Normalizing Trauma-Informed Care
LEARNING OBJECTIVES

Identify simple ways to foster trauma-awareness in all school staff working with students.
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Learn simple ways to create top of mind awareness for all staff working with youth.

Utilize ways to keep all staff trauma aware.

Add ideas to their toolbox.
OPENING ACTIVITY

• Write down the name of a teacher who made a difference in your life:
  
  What was it about this person that motivated you to learn, to come to school, to try your hardest? What was it about this educator that inspired you to do what you do today? What traits did you appreciate about this person? Write down some words or phrases that describe this person and his or her influence on you.
“The three most important aspects of learning - attention, focus, and memory - are all controlled by our emotions, not cognition.”

~Marc Brackett, Ph.D.
Exposure to trauma and the link to negative health outcomes has been well documented, due in part to the original Adverse Child Experiences (ACE) Study (Felitti, Anda, Nordenberg, Williamson, Spitz, & Edwards, et al., 1998).

Childhood trauma is a significant public health threat that can adversely impact social, emotional, and cognitive development (McConnico, Boynton-Jarrett, Bailey, & Nandi, 2016).
• Exposure to adverse child experiences can contribute to academic inequities, also known as the achievement gap (McConnico et al., 2016).

• What is more difficult to find in the literature is the self-efficacy educators have to help their students who have been impacted by trauma.
TRÁUMA GRANT

• Relevant interventions should include a variety of trauma informed education, as well as concrete strategies aimed at increasing educator self-efficacy.

• Developed a voluntary survey for teachers based on the Collaborative for Academic, Social, and Emotional Learning (CASEL) Model to measure their educator self-efficacy around trauma informed practices, a pre/post model.

• Received grant money to incorporate trauma informed practices and education for teachers.
BRAIN DEVELOPMENT

• Our brains are “use dependent” meaning the more you take any neuronal network and activate it in patterned repetitive ways, the more it is internalized, creating synaptic connections that become hard wired and change the brain architecture and blood chemistry.

• A key principle of neuroplasticity is specificity. In order to change any part of the brain, that part of the brain has to be activated. This is true for love and relationships.
• What is adaptive for children living in chaotic, violent, trauma filled environments becomes maladaptive in other environments especially school.

• Hypervigilance looks like ADHD

• Resistance and Defiance look like ODD

• Fight behavior can result in assault charges, thus starting the school to prison pipeline
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<thead>
<tr>
<th>Flight</th>
<th>Fight</th>
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<tr>
<td>• Withdrawing</td>
<td>• Acting out</td>
<td>• Exhibiting numbness</td>
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<td>• Fleeing the classroom</td>
<td>• Behaving aggressively</td>
<td>• Refusing to answer</td>
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<td>• Skipping class</td>
<td>• Acting silly</td>
<td>• Refusing to get needs met</td>
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<tr>
<td>• Daydreaming</td>
<td>• Exhibiting defiance</td>
<td>• Giving a blank look</td>
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<td>• Seeming to sleep</td>
<td>• Being hyperactive</td>
<td>• Feeling unable to move or act</td>
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<td>• Avoiding others</td>
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<td>• Hiding or wandering</td>
<td>• Screaming/yelling</td>
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<td>• Becoming disengaged</td>
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FLOCKING

• When we look to others to help determine what is going on and is it safe.

• We look at other people, especially facial expressions- for emotional clues about how to interpret a situation.

• “Did he really just say that?!” “Did you hear that?”

• Me on an airplane😊
RELATIONSHIPS
RELATIONSHIPS

• Our brains our social organs and we cannot survive without one another.

• We are biologically wired to need one another for survival.

• We survive by forming collaborative groups and large parts of our brains are dedicated for relationships and connection.
Relationships

These activated stress systems initiate repeated negative dispositions, and we sometimes see aggressive, defiant, oppositional, and violent shut down behaviors.

When pain-based behaviors are treated with pain the response system is escalated.

Wired to be negative for survival.

They have to stay.

When any individual feels isolated, rejected and disconnected from those around him or her, they tend to retreat to their reactive neurobiology within the brain stem and limbic systems.
RELATIONSHIPS

• If our view of the world is that people are good, then we expect good from them.

• Our internal view of the world becomes a self-fulfilling prophecy; we project what we expect from people and in turn that helps elicit what we expect.

• We project based upon what happened to us as a child.

• We all require some reciprocal social feedback to stay engaged.
  
  -Story about the preschool girl
WHAT CAN WE DO?

• All the evidence points to relationship building…

• All successful models emphasize regulation and connection- relationships.

• Books, research articles/empirical data, memoirs

• Think about your own story and why you are where you are
RELATIONSHIPS

• Notice what they are doing well and right.
• Notice effort.
• Notice when tensions rise and redirect with opportunities and choices.
RESTORATIVE PRACTICES

• If you do develop community, you do have the right to manage conflict/change relationships. You do get to have the life changing conversations.
TRAUMA INFORMED/BEING INTENTIONAL

• Be intentional about building relationships.
• Assume that everyone has experienced some type of trauma in their life, it is not a good idea to universally screen. How would you treat everyone?
• Take the time to ask the questions:
  • How was your night?
  • How are you feeling about today/is there anything you want to share about your day?
  • How was that for everyone?
  • Are we alright/can we move forward?
SUGGESTIONS FOR EDUCATORS

• You can’t talk someone out of being upset- you can’t tell someone to “calm down.”
• Calm must be modeled, and they will hopefully catch your calm.
• Any kind of movement also helps- walking, kicking a ball, coloring side-by-side, etc.
• “If you can hear my voice, take a deep breath.”
• These things must be taught and modeled when students are regulated.
SUGGESTIONS FOR EDUCATORS

• Maintain usual routines.
• Give choices. Often trauma involves the loss of control and or chaos so you can help them feel safe by providing them some choices and control when appropriate.
• Increase the level of support, this often involves other resources.
• Provide a safe place for the child to talk about what happened.
• Warn children if you will be doing something out of the ordinary.
• Understand that children cope by re-enacting trauma through their interactions with others. Resist their efforts to draw you into a negative repetition of the trauma. Some children will provoke teachers in order to replay abusive situations at home.
I CAN’T...BUT I CAN...

• What would have happened if you had allowed her to ________________?
• I can’t control whether _______________will come to my class today, but I can control...
• I can’t control whether _______________passes this test, but I can control...
• I can’t control whether _______________has experienced adversity and trauma at home, but I can control...
• I can’t control whether we add _______________to our already overloaded plates, but I can control...
ENVIRONMENT

• From the 1\textsuperscript{st} day of kindergarten on there is an important shift in the child’s environment. From that day on, most children spend more of their waking hours in the care of their teachers than in the care of their parents.

• If from the beginning of the year the classroom is stable and reliable, with clear rules, consistent discipline, and greater emphasis on recognizing good behavior than punishing bad, students will be less likely to feel threatened and better able to regulate their less constructive impulses.
Why do you think some children are more strongly affected by certain events than others are? What does this suggest for us as professionals?

What are your initial thoughts to the prevalence of trauma? Are you surprised? Why or why not?

What might you add to the list of ACE Study stressors? What do you see significantly affecting your students?

How many of your students have an ACE score of 1? Two? Three or higher?

How might you shift your approach in working with these vulnerable children?

What steps can you take to bring this important topic into your professional conversations?
STRATEGIES

• **Active Constructive Reasoning:**
  • How you respond to an event or experience with another provides a safe space to feel seen, heard and understood. It involves stepping into the experience with someone and responding with questions, details and interest. Some examples of questions that may be used when building this skill:
    • Where were you when you saw this or heard this?
    • Who was with you?
    • What were you doing when this happened?
    • How did this feel?
    • How will this change things for you?
STRATEGIES

• The 2x10 strategy:
  • For two minutes, ten days in a row, teachers engage in a personal conversation with a student about anything the student is interested in, as long as the conversation is appropriate.

• Classroom Roles and Responsibilities:
  • The Giver - the student is responsible for giving encouragement, affirmations, kindness throughout the day.
  • The Noticer - the job is to notice what is going well and right. It is the antithesis for tattling or snitching.
  • Resource Manager - this student suggests ideas, resources, or ways to solve a problem or locate information.
STRATEGIES

• How Do We Structure Our Classrooms?
  • What do we do in the morning/the first 20 minutes of the day? Is there opportunity for creating connections?
  • What is our class challenge?
  • What types of activities or free time at the end of the day would we like to create?
STRATEGIES

• Power of Questions:
  • What do you need?
  • How can I help?
  • What feels difficult?
  • What are your resources?
  • What is the best/worst thing that could happen?
STRATEGIES

• Guided Imagery
• Yoga
• Various breathing strategies, the 7/11 breath, inhale for 7 seconds, exhale for 11
• Brushing
• Calming areas with mints, water, etc.
• Does each student have one adult in the building who makes them feel safe?
CLOSING

“No one person, no single therapist could be all things for all children, who were each at different stages of development and in different stages of regulation.”

- Bruce Perry
• Center on the Developing Child, Harvard University
• The Boy Raised as a Dog and other Stories from a Child Psychiatrist’s Notebook by Bruce Perry, M.D., Ph.D and Maia Szalavitz

• Helping Children Succeed, What Works and Why by Paul Tough
• What Happened to You? By Bruce D. Perry, M.D., Ph.D. and Oprah Winfrey

• Hillbilly Elegy: A Memoir of a Family and Culture in Crises by J.D. Vance
• Ghosts from the Nursery, Tracing the Roots of Violence by Robin Karr-Morse and Meredith S. Wiley