

# Trauma Informed Care for the Classroom

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## Participants will:

- Understand trauma in a broad and inclusive way.
- Learn how the brain and body respond to stress and trauma.
- Recognize the effects of trauma on students, staff, and schools.
- Apply trauma knowledge to your daily work.




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## What Can YOU, as an Educator DO?

- Recognize that exposure to trauma occurs to many children, not just those in protective or foster care.
- Recognize the signs and symptoms of child traumatic stress and how they vary in different age groups.
- Recognize that "bad" behavior is sometimes an adaptation to trauma.
- Understand the impact of trauma on different developmental domains.




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## Why is Understanding Trauma Imperative for schools?

The teachers tell me I am smart. They say I am just not trying.




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## Definition of Trauma



TRAUMA

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## What is Trauma?



Individual trauma results from an **event**, series of events, or set of circumstances that is **experienced** by an individual as overwhelming or life-changing and that has profound **effects** on the individual's psychological development or well-being, often involving a physiological, social, and/or spiritual impact.

SAMHSA

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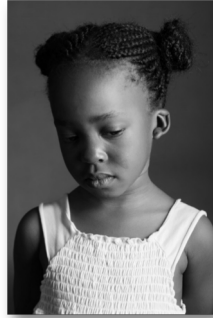
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## A Child's Reaction

### *Varies with...*

- Developmental Stage
- Temperament
- Perception
- Trauma History
- Post-Trauma Events
- Supportive Adults




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## Types of Trauma

- **Natural disasters:** hurricanes, fires, floods
- **Human-caused disasters:** accidents, wars, environmental disasters, acts of terrorism
- **Community violence:** robberies, shootings, assault, gang-related violence, hate crimes, group trauma affecting a particular community
- **School violence:** threats, fights, school shootings, bullying, loss of a student or staff member




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## Types of Trauma

- **Family trauma:** abuse, neglect, experiencing or witnessing domestic violence, incarceration of family members, family substance abuse, sudden or expected loss of a loved one
- **Refugee and Immigrant trauma:** exposure to war, political violence, torture, forced displacement, migration and acculturation stressors, fears of deportation
- **Medical trauma:** pain, injury and serious illness; invasive medical procedures or treatments
- **Poverty:** lack of resources, support networks, or mobility; financial stressors; homelessness




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## Types of Trauma

### Complex trauma:

- 1) Exposure to multiple traumatic events from an early age; and
- 2) The immediate and long-term effects of these experiences over development.




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## Types of Trauma

**Historical Trauma:** “The cumulative emotional and psychological wounding across generations, including the lifespan, which emanates from massive group trauma.” - Maria Yellow Horse Brave Heart

### Examples:

- American Indian and Alaska Native communities
- Communities of color
- Holocaust survivors
- Japanese-American survivors of internment camps
- LGBTQ communities




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## Types of Trauma

**Racial trauma:** Potentially traumatic experiences resulting from

- Direct experiences of racial harassment;
- Witnessing racial violence toward others; and
- Experiencing discrimination and institutional racism.




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## What about MY school?

Are there students who....

- Are physically, emotionally or sexually abused?
- Are neglected?
- Are homeless?
- Have family members who are fighting overseas?
- Have experienced a natural disaster (i.e., tornado, house fire)?
- Live in homes with family members with untreated mental illness?
- Witness domestic violence?
- Have been in a serious accident (car accident)?
- Have been a victim of physical or sexual assault?
- Have lost a loved one?
- Live in homes with family members who abuse alcohol or other drugs?




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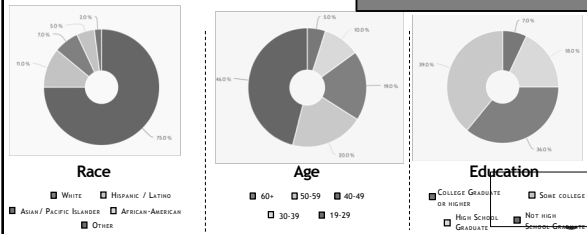
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## What are ACEs?

Adverse Childhood Experiences (ACEs) is the term given to describe all types of abuse, neglect, and other traumatic experiences that occur to individuals under the age of 18.

### Who Participated?




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## Prevalence of ACEs



- At least **59 percent** of the general population has experienced at least one adverse childhood event
- **Twenty-six percent** of children in the United States will witness or experience a traumatic event before they turn four
- **Four of every 10** children in America say they experienced a physical assault during the past year, with **1 in 10** receiving an assault-related injury
- **More than 60 percent** of youth age 17 and younger have been exposed to crime, violence and abuse either directly or indirectly




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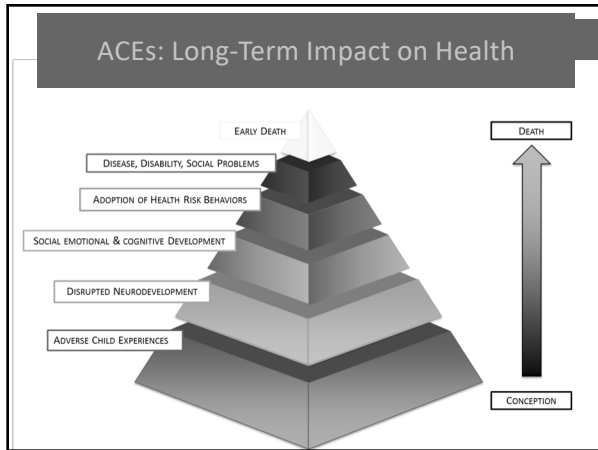
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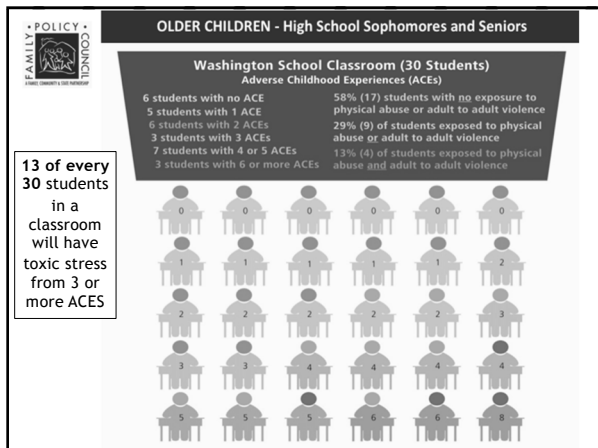
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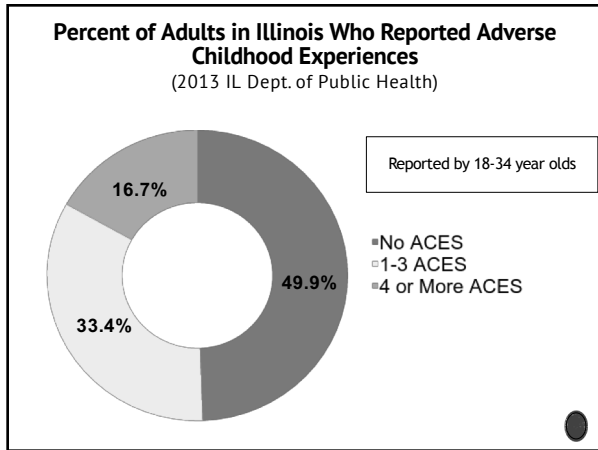
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**Impact on Urban, Minority, and the Poor**

- 98.5% of **urban** adolescents report exposure to violent crime (65.9% rural)
- **African-American** adolescents report more victimization
- Adolescents living in **poverty** report more child maltreatment

Overstreet & Mathews, 2011

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**More likely to be exposed to**

- family turmoil or violence
- separation from their families
- housing instability and multiple moves
- more violent neighborhoods

(American Academy of Pediatrics, 2015)

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## Health risks associated with ACEs

- **Behaviors**
  - School Absenteeism —tardies & truancy
  - Dysregulated eating (under & overeating)
  - Smoking
  - Suicide attempts
  - Illicit drug use & substance abuse
  - Multiple sexual partners
  - Self-injurious behaviors (i.e., cutting)
- **Outcomes**
  - Autoimmune disorders
  - Obesity & eating disorders
  - Substance use disorders
  - Chronic obstructive pulmonary disease (COPD)
  - Depression
  - Fetal death
  - Health-related quality of life
  - Ischemic heart disease (IHD)
  - Liver disease
  - Risk for intimate partner violence
  - Sexually transmitted infections (STIs)
  - Unintended pregnancies

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## What ACEs are present in the youth you work with and support?

- What ACEs did you think of?
- What students did you think of?
- How do you think these ACEs might impact their learning and behavior?

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## Impact of ACEs on Education

Impacted by physical and verbal aggression

51% of children with 4+ ACE scores had learning and behavior problems in school compared with only 3% of children with no ACE score

Illinois ACEs Response Collaborative Summit 2015 Education Policy Brief

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Trauma and Mental Health		
Diagnosis	Overlapping Symptoms	Trauma
	restless, hyperactive, disorganized, and/or agitated activity; difficulty sleeping, poor concentration, and hypervigilant motor activity	
	hyperarousal and other anxiety symptoms mimicking hypomania; traumatic reenactment mimicking aggressive or hypersexual behavior; and maladaptive attempts at cognitive coping mimicking pseudo-manic statements	
	self-injurious behaviors as avoidant coping with trauma reminders, social withdrawal, affective numbing, and/or sleep difficulties	
	severely agitated, hypervigilance, flashbacks, sleep disturbance, numbing, and/or social withdrawal, unusual perceptions, impairment of sensorium and fluctuating levels of consciousness	

Reference: Gene Griffin, J.D., Ph.D.

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## Change in Perspective

What is wrong with you?

*Instead...*

What happened to you?

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## Behavior

### TRAUMA

Often have little or no actual control over their bodies reactions to a perceived threat

Reaction is natural but the observed behavior is often labeled "problematic"

**Using a trauma-informed lens...**

Allows us to understand that a child's behavior might be in a survival effort- as they are reacting through pathways that were created for events perceived as traumatic

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### Risk Factors

Stressful conditions, events or circumstances that increase a student's chance for poor outcomes, including child abuse and neglect




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### Protective Factors

Conditions or attributes of individuals, families, communities, or the larger society that mitigate risk and promote healthy development and well being




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## Experience and Resiliency

### Resilience

Given the proper supports, children can endure stress related to traumatic events and adversity and avoid the negative behavioral, emotional, and physical consequences associated with experiencing traumatic stress.

*capacity of a child to effectively cope with, adjust or recover from stress or adversity*

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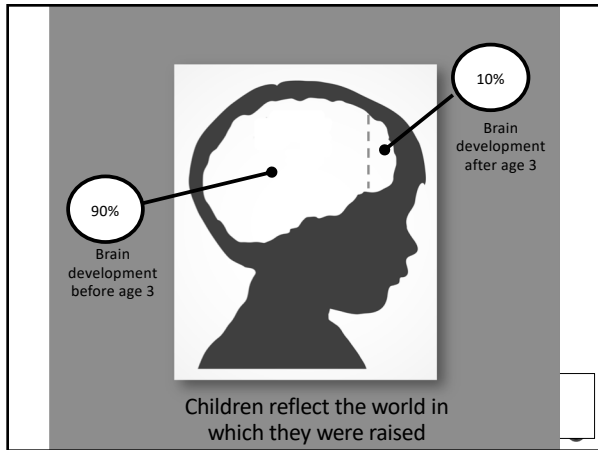
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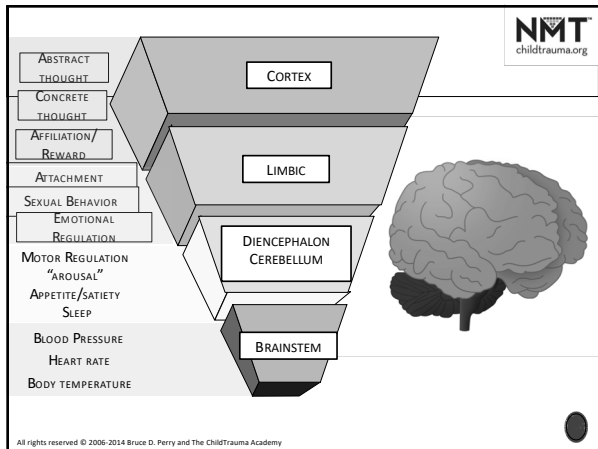
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### Can You Relate?

- Driving home from school, it begins to rain...

Turn on wipers  
Grip steering wheel  
Sit up to see better  
Turn off radio  
Ask kids to be quiet

Anxiety decreases → Heart rate decreases

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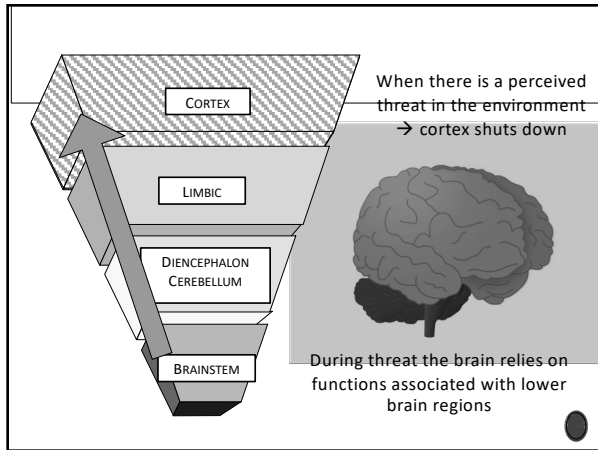
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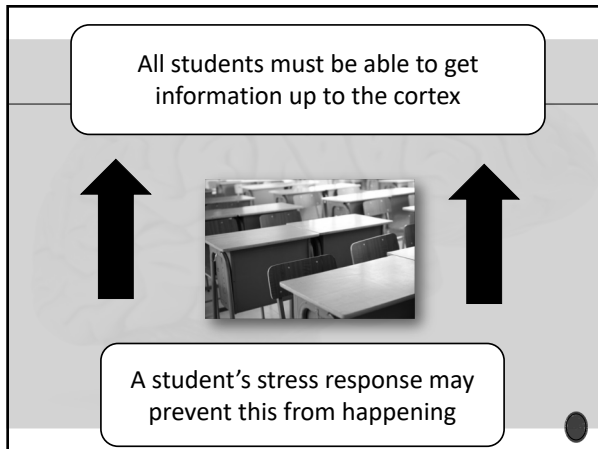
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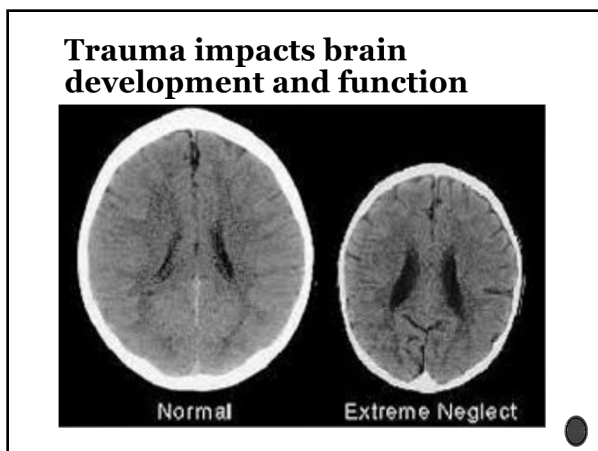
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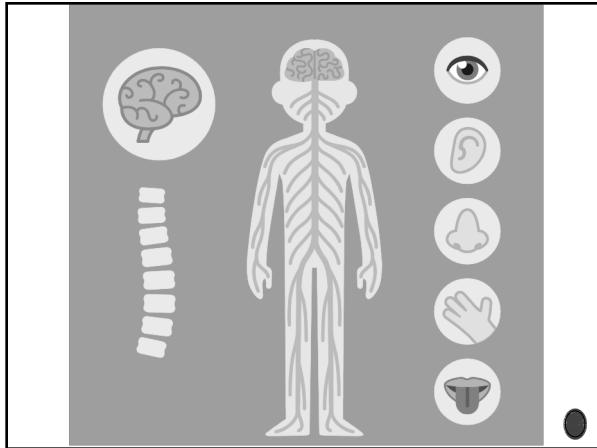
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### Fight-Flight-Freeze

Emotions are connected to memories

When under stress or perceived threat:

Thinking brain	Survival brain
	

Fight-or-flight is a healthy, normal, and adaptive response to stress

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### Fight-Flight

Impulsively react with defensive behaviors

Aggression	Withdraw
Fight	Space-out
Refuse to cooperate	Unable to assert self
Meltdown/temper-tantrum	Overly compliant

Repeated stress can wire the brain

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## Common Response to Trauma

### Young Children

- Fear, anxiety, worry
- Changes in sleeping and eating
- Difficulty separating from caregivers
- Regressed behaviors (losing speech, wetting the bed)
- Reenacting aspects of the traumatic event in play




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## Common Response to Trauma

### School-age Children

- Fear, anxiety, worry
- Feelings of guilt, shame, and self-blame
- Headaches, stomachaches
- Nightmares, disrupted sleep
- Difficulty concentrating
- Angry outbursts, aggression, and withdrawal
- Over- or under-reactions to situations in the environment (e.g., sudden movements, loud noises, physical contact)




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## Common Response to Trauma

### Adolescents

- Fear, anxiety, worry
- Concerns about how others will view them after the event
- Shame, guilt, responsibility, embarrassment
- Withdrawal from family, peers, activities
- Avoid reminders of the event
- More intense mood swings
- Decline in school performance
- Increase in risk-taking behaviors (e.g., alcohol/drug use, sexual behaviors, fights, self-harm)




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## Triggers

- Reminders of past traumatic experiences that automatically cause the body to react as if the traumatic event is happening again in that moment.
- Responses can appear confusing and out of place and be misunderstood by others.

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## Triggers

### Youth

- Loud noises
- Physical touch
- Threatening gestures
- Authority figures and limit-setting
- Chaos or uncertainty
- Particular spaces (e.g., bathrooms or areas that are less monitored)
- Changes in routine
- Witnessing violence between others, such as peers fighting
- Emergency vehicles and police or fire personnel
- Certain smells
- Particular times of year

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## Triggers

Common responses to trauma triggers include:

- Fight responses: yelling, swearing, posturing, aggressive behavior;
- Flight responses: running away, refusing to talk, avoidance, substance use; and
- Freeze responses: spacing out; appearing numb, disconnected, confused, or unresponsive.

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# Triggers

## Parents

- The school environment
- Shame and embarrassment
- Confusion in meetings
- Fear of other system involvement
- Situations that trigger feelings of helplessness and loss of control

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## Stress Response In The Classroom

Ready to learn



For learning to occur, a student must be regulated

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## Calming Strategies

- Sensory Regulation
- Relate




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## Guiding Principles of Trauma-Informed Practice

- Safety
- Empowerment
- Collaboration
- Trustworthiness
- Choice

Source: SAMHSA  
[www.samhsa.gov/samhsaNewsLetter/Volume\\_22\\_Number\\_2/trauma\\_tip/guiding\\_principles.html](http://www.samhsa.gov/samhsaNewsLetter/Volume_22_Number_2/trauma_tip/guiding_principles.html)

## Trauma and School Years: Early Childhood



### Brain area impacted

- Reduction in size of cortex

### Trauma is associated with

- Cognitive abilities
- Ability to regulate emotions
- Increased sense of fear
- Reduced sense of safety and protection

## Trauma and School Years: School-Aged Children

### Brain areas impacted

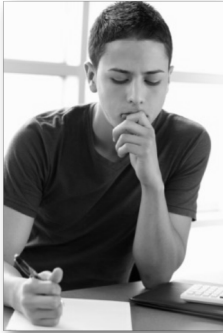
- Cortex and limbic regions

### Trauma is associated with

- Sleeping issues
- Difficulty learning
- Controlling startle reactions
- Behavior that shifts (i.e., Fear → Anxiety → Aggression)



## Trauma and School Years: Adolescent



### Brain area impacted

- Prefrontal cortex

### Trauma is associated with

- Increased chances of reckless and risk-taking behaviors
- Academic struggles, including school failure
- Poor choice making decisions
- Aggressive behavior

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## Guiding Principles of Trauma-Informed Practice

- Safety
- Empowerment
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- Trustworthiness
- Choice

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## The silver lining

- The brain is malleable and develops into the mid-to late 20
- Human beings are resilient
- Emotional regulation is like a muscle
- Protective factors make a difference
- Your classroom and school can be safe spaces where healing can happen

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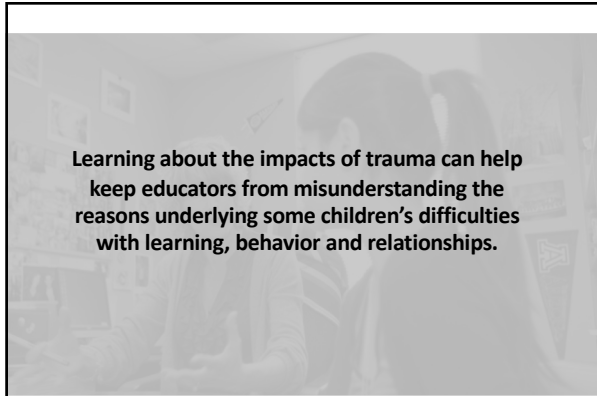
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**Learning about the impacts of trauma can help keep educators from misunderstanding the reasons underlying some children's difficulties with learning, behavior and relationships.**

Trauma and Learning Policy Initiative (TLPI)  
A collaboration of Massachusetts Advocates for Children and Harvard Law School

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**What will you do  
to create a trauma-  
informed environment**

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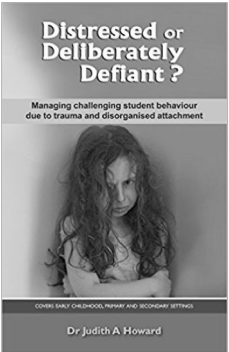
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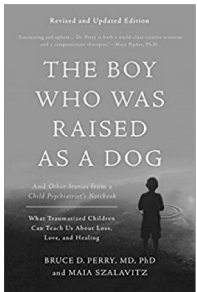
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**Distressed or Deliberately Defiant?**  
Managing challenging student behaviour due to trauma and disorganised attachment

COVERS EARLY CHILDHOOD, PRIMARY AND SECONDARY SETTINGS

Dr Judith A Howard



Revised and Updated Edition

**THE BOY WHO WAS RAISED AS A DOG**

And Other Stories from a Child Psychiatrist's Notebook  
What Traumatized Children Can Teach Us About Loss, Love, and Healing

BRUCE D. PERRY, MD, PhD  
and MAIA SZALAVITZ

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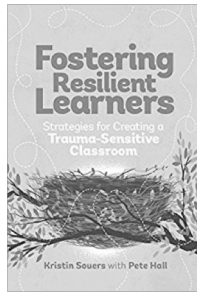
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