

TRAUMA-INFORMED PRACTICES FOR SCHOOLS

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WHY TRAUMA?

- **ITS COMMON** - Trauma is EXTREMELY PREVALENT in school-age children. Out of a typical high school class of 45 *only* 7 have no ACEs. 45% have **3 or more!**
- **BEHAVIOR** - The emotional dysregulation, hyper-vigilance, hyper-arousal social misperception associated with trauma FREQUENTLY result in behavior problems in the classroom
- **DIFFERENT RESPONSE** -Adults response to students with trauma often serves to INCREASE difficulties, increase arousal, and decrease trust.
- **DIFFERENT APPROACH** - Trauma requires a different approach - an approach that works well with all students.

ACES – ADVERSE CHILDHOOD EXPERIENCES

- Original study of Trauma was conducted in the Keiser Health system in the 1990s.
- 10 types of ACE's or "Adverse Childhood Experiences" in 3 categories were identified:
 - ABUSE: Physical, Sexual, Emotional
 - NEGLECT: Physical, Emotional
 - HOUSEHOLD: Family members incarcerated, mental illness, parental separation, substance abuse, domestic violence.
- ACEs tend to **occur in clusters**.

ACES IMPACTS

- **ACEs have an enormous impact on school age students:**
 - Neurological development
 - Decreased resilience
 - Mental illness (increased rates)
 - Increased stress response (fight or flight)
 - Low emotional regulation
 - Hyper-vigilance
 - Social misattributions (hostile bias)
 - Academic difficulties
 - Problems with Concentration and attention
 - Difficulty trusting others
 - Low self-worth & self concept, sense of agency
 - High risk behaviors (substance abuse, domestic violence, etc)
 - Long-term health problems and early morbidity

ACES IMPACTS

- **Students at risk:** Compared to someone with no ACES students are:
 - 3 times more likely to experience academic failure
 - 4 times more likely to have reported poor health
 - 5 times more likely to have severe attendance problems
 - 6 times more likely to evident school behavior problems
- **Impacts Vary by:**
 - Point in time trauma occurs
 - Nature of adverse experience
 - Relational environment & supports present
 - Students resilience

PREVALENCE OF ADVERSE EXPERIENCES



RESILIENCE

- **Resilience** = An adaptive response in the face of stress. Just as the brain can change in response to negative stress it can also change to become more resilient!
- A KEY GOAL OF A TRAUMA-INFORMED CLASSROOM IS TO BUILD STUDENTS RESILIENCE



WHAT BUILDS RESILIENCE?

- **Relationships:** At least one stable & supportive caring adult relationship
- **A Sense of Mastery:** A sense of mastery or self-efficacy
- **Well-developed coping skills:** skills at regulating emotions, inhibiting impulses to consider multiple options
- **Supportive & Affirming Faith & Cultural Traditions:** Faith, culture & community supports.
- HOW DO YOU HELP?
- **Build that relationships**
- **Support** kids with things that they are good at, develop skills
- **Teach:** self-regulation, planning and problem solving skills
- **Connect:** Kids to faith, culture, and community

REGULATION

- **Regulation** – The ability to impact your own thinking, attention, emotions and physical sensations. All of these can be impacted by ACEs.
- **Top Down Control:** Using thinking to regulate.
- **Bottom Up Control:** when you are overwhelmed by automatic arousal process



HOW REGULATION DEVELOPS

- **Developmental Pathway**
- Absolute Dependency: Fetus is 100% dependent on mother to regulate.
- Co-Regulation: Mothers help infants and small children regulate because they can't do so on their own.
- Care-giver Directed Regulation: Over time, caregivers direct kids to use strategies until kids can learn...
- Self Regulation: The ability to regulate independently.



ACES DISRUPT THE REGULATION PATHWAY

- There are two important conditions that facilitate growth in regulations skills from total dependency to self-regulation:
 1. **supportive caregiving** and
 2. **stable, safe, and predictable environments.** ACEs often involve disruptions in these conditions. For children with ACEs:
 - regulation skills may not develop normally
 - The brain and nervous system may be overly reactive and oriented toward "fight or flight" responses
 - They may be hyper-vigilant to and over-focused on threat and safety
 - They may be prone to misperceive people's intentions and events in their environment as threatening

CO-REGULATION

- When students with ACEs are upset, they may not **be able** to calm themselves down.
- Students may need YOU to help them
- Students will likely rely heavily on your non-verbal interaction with them (rather than what you say)
- REGULATE – First help students become calm
- RELATE – Then listen
- REASON – Then, if ready, reason and problem solve. Don't start here.

HOW CAN YOU HELP STUDENTS LEARN TO REGULATE?

- Teach students the skill of **self-monitoring**: How do you observe, track and become more aware of your own thoughts, feelings? Teach students **words** to describe thoughts, emotions and physical sensations.
- Help students find **new strategies** that are similar to the way a student currently regulates in two important ways:
 - Does the student use physical / sensory or cognitive strategies?
 - Does the student attempt to regulate alone or involve others?
- **Find a similar strategy**

REGULATION SKILLS

- Help students build skill sets that help students modify the way they currently attempt to regulate by:
 - Help them identify a range of options they can use to regulate
 - Use word or picture lists to aid them in remembering and identifying these options
 - Provide students with opportunities to practice different ways to regulate
 - Help student identify and evaluate the effectiveness of behaviors that are successful
- Students will rely on your **modeling** to help them.

TRAUMA-INFORMED CLASSROOMS

- THREE KEY GOALS
- Predictability
- Safe Relationships / Engagement
- Opportunities for Regulation



PREDICTABILITY

- *Students with ACEs do not respond well to the unexpected.*
- 1. Post and follow a regular schedule
- 2. Make students aware of changes.
- 3. Designate spaces for specific activities.
- 4. Post and teach routines, stay consistent



SAFE RELATIONSHIPS & ENGAGEMENT

- 1. Seat kids in proximity to staff, facing forward – make it easy to interact, get feedback and cues
 - 2. Seat kids facing toward teacher.
 - 3. Arrange class so kids entering, exciting and moving around causes minimal distraction.
 - 4. Establish classroom Rituals – like morning meetings, afternoon goodbyes, compliments etc – that foster sense of belonging.
- **CLASSROOM RITUALS**
 - - Provide consistency
 - - Help students become regulated.
 - - Transition into academic work
 - - Help students learn and practice engagement skills
 - - Have fun
 - - Develop sense of belonging
 - - Develop relationships

OPPORTUNITIES FOR REGULATION

- 1. **Planned Regulation Activities:** Movement breaks, exercise, calming routines.
- 2. **Calming Space:** Place students can go if they are dysregulated.
- 3. **Visual Supports:** Students with ACEs pay less attention to words than visuals.



YOU: THE MOST IMPORTANT ELEMENT

- You are the most important element in a trauma-informed environment.
- 1. Students are hypervigilant to staff mood, actions and non-verbal communication. You have to manage your non-verbals if you want students to be regulated.
- Nonverbal signals account for 93% of communication



NON-VERBALS

- Tone
- Rate of speech
- Choice of words
- Facial expression
- Voice volume
- Gestures
- Smile vs. Frown
- Personal distance



HERE'S WHAT YOU CAN DO

- 1. Check yourself – Make sure you understand your own stress level, triggers and can regulate yourself before you react.
 - 2. Focus on what's behind the behavior – many students with ACEs act like they do for a reason. Have empathy – this is part of a normal stress response.
 - 3. Remember to regulate – relate and then reason.
- Many of our students with ACEs don't have experience with adults in their life
 - - Asking for their opinion
 - - Requesting they express emotion
 - - Asking them to solve a problem through verbal dialogue.
 - - Wanting to listen to their explanations.

SELF CARE

- **ACEs & Stress:** Working with students with ACEs can be stressful
 - Feeling responsible to help
 - Feeling powerless
 - Vicarious traumatization
 - Worrying about students
- **What if I have ACEs?** – Many people after learning about ACEs believe they may have experienced ACEs also. Trauma treatments are well-developed and effective and can help people who have trouble be happier.

