

Creating a Trauma Sensitive School

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What's going on nationally?

Trauma Informed Care

- Adverse Childhood Experiences
- Philadelphia – Urban ACEs
- NCTSN
- Center for Developing Child at Harvard University
- American Academy of Pediatrics

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What's going on nationally?

Trauma Sensitive Schools

- Massachusetts Advocates for Children – Trauma and Learning Policy Initiative
- State of Washington Superintendent's Office – Compassionate Schools: The Heart of Learning and Teaching
- Compton Unified School District Lawsuit
- Paper Tigers <https://vimeo.com/110821029>

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What's going on locally? 

Trauma Informed Care

- Wisconsin ACEs – Child Abuse Neglect Prevention Board
- Mobilizing Ace Resilient Communities
- ACE Interface Project
- Fostering Futures / National Council of Behavioral Health
- Wisconsin Trauma Project
- Office of Children's Health Collective Impact
- Urban ACES Milwaukee Project

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What's going on locally? 

Trauma Sensitive Schools

- Trauma Sensitive Schools Toolkit
- Entire school staff professional development
- Many big districts going beyond PD to implementation planning and
- School Mental Health Project : Trauma Sensitive Schools Professional Development

<http://dpi.wi.gov/sspw/mental-health/trauma/modules>

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Overview of DPI Project 

60 Schools – Two phases

Internal school based team

- Overlap with existing multi- disciplinary team
 - PBIS team
 - School mental health team
 - Building leadership team
- Two day kick off training
- Monthly web-based training with external coach; quarterly in person coaching /training sessions

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WI DPI Modules



1. Introduction
2. Prevalence and Impact
3. Neuroscience
4. Self Care
5. Trauma Sensitive Schools
6. Trauma Sensitive Lens
7. Trauma Sensitive Environments
8. Social and Emotional Learning
9. Emotional and Physical Regulation
10. Relationship Building
11. Cognitive Problem Solving
12. Trauma Sensitive Behavioral Supports
13. School wide Discipline
14. Parent Engagement and Leadership

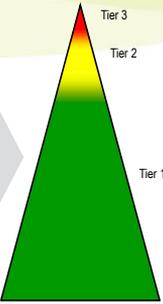
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Using the PBIS Framework to Better Support Students Affected by Trauma



TIC Values

- Safety
- Empowerment
- Collaboration
- Trust
- Choice



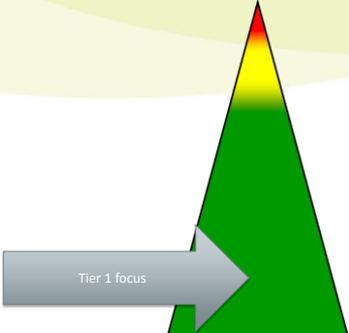
Key Areas

- Academics
- Assessment & screening
- Behavior management
- Cognitive skills
- Community partnerships
- Crisis prevention & response
- Educator Capacity
- Emotional & physiological regulation
- Environment, culture & climate
- Leadership
- Parent & caregiver involvement
- Policies
- Relationships
- Social-emotional learning

Tier 1 – Universal strategies & instruction for all students <http://dpi.wi.gov/sspw/mental-health/trauma>
 Tier 2 – Additional supports for students with milder symptoms of trauma or in high-risk groups
 Tier 3 – Intensive & ongoing interventions for students deeply impacted by trauma

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Tier 1 focus

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Evaluation

- ARTIC
- Fidelity Tool
- Culture and Climate Survey



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What is it?



Trauma Sensitive Schools

A framework that ...

- recognizes the high prevalence of adverse experiences that students and how these experiences impact the behavior and learning
- creates supportive universal environments for all students that promote regulation , relationship and reason to be
- supports awareness of unique needs of trauma affected students and is mindful of avoids re-traumatization

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In other words....

Trauma Sensitive Schools is not simply a program or a set of strategies. It is a perspective or way of being that drives what we do and how we do it.



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7ei of Trauma Sensitive Schools:

7 Essential Ingredients

1. Prevalence
2. Impact
3. Perspective Shift
4. Regulation
5. Relationship
6. Reason To Be
7. Caregiver Capacity

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Trauma Definition

- 1) Exposure to an event that threatens/harms physical or emotional integrity of the individual or someone close to them
- 2) Overwhelms the person's ability to respond
- 3) Creates significant difficulty in functioning

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Types of Trauma

- Acute trauma: The response to a one-time event
- Complex trauma: Exposure to multiple traumatic events, often of an invasive, interpersonal nature, and the wide-ranging, long-term impact of this exposure (*National Child Traumatic Stress Network*)
- Historical trauma: A constellation of characteristics associated with massive cumulative group trauma across generations. *Brave Heart, M.Y.H. (1999)*

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What about our school/district?



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#1: Prevalence

Adverse Childhood Experiences (ACE) Study Center for Disease Control & Prevention

Household dysfunction	Kaiser*	WU**
• Substance abuse	27%	27%
• Parental separation/divorce	23%	21%
• Mental illness	19%	16%
• Violence between adults	13%	16%
• Incarcerated household member	5%	6%
Abuse		
• Psychological /Emotional	11%	29%
• Physical	28%	17%
• Sexual	21%	11%
Neglect		
• Emotional	15%	
• Physical	10%	

* Center for Disease Control and Prevention 1995-97
** <http://wchildrenstrustfund.org/files/WaconsinACEs.pdf>
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64%

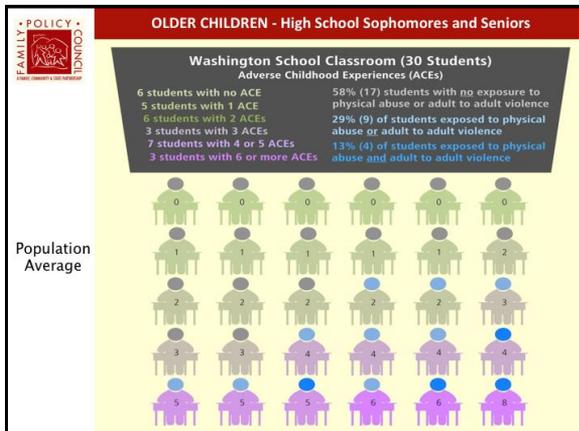
Have at least one ACE



ACE Score =	0	1	2	3	4+
					

Center for Disease Control and Prevention, 2016

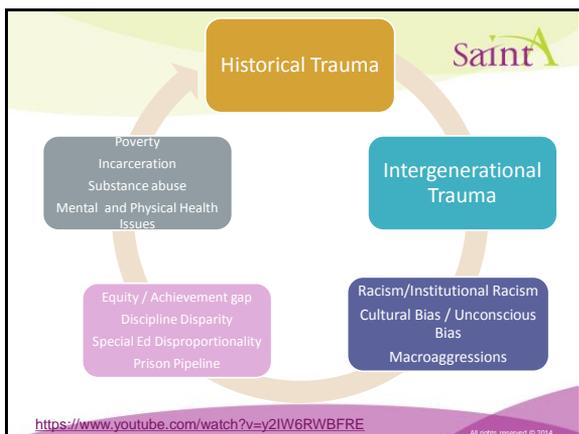
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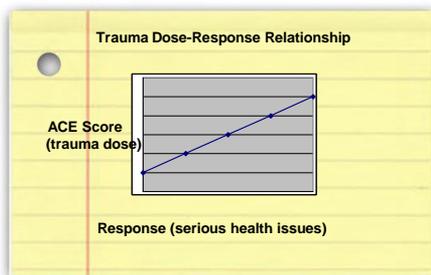
Urban ACE Indicators

Indicator	Philadelphia Study	White	Black
Witnessed violence in the neighborhood	40.5%	25.9%	52%
Felt discrimination based on race or ethnicity	34.5%	15.8%	49.5%
Adverse neighborhood experience, feeling unsafe/not trusting one's neighbor	27.3%	19.3%	29.2%
Bullied	7.9%	9%	6.4%
Lived in foster care	2.5%	1%	4.1%

Public Health Management Corporation Philadelphia Urban ACE Study, 2013



Impact: Physical and emotional health





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 (e.g., cutting)

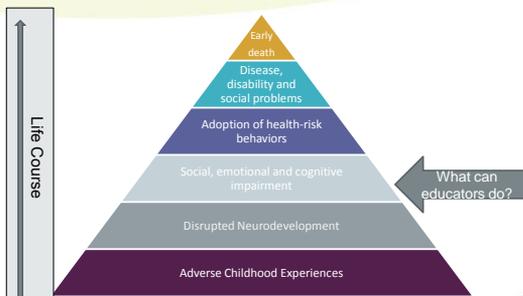
Outcomes

- 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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ACEs over the Life Course



Adapted from Center for Disease Control and Prevention, 2010

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ACE and School Performance

- Traumatized children are:
- 2.5x more likely to fail a grade in school
- score lower on standardized achievement tests
- have more struggles in receptive and expressive language
- are suspended and expelled more often
- more frequently placed in special education

VIDEO: <http://csjjusticecenter.org/youth/media-clips/a-principal-met-a-student-she-expelled-and-it-changed-her-approach-to-discipline/>

The Heart of Learning and Teaching Compassion, Resiliency and Academic Success Wolpov, Ray; Johnson, Mona M.; Hertel, Ron; Kincaid, Susan O. 2009
<http://k12.wa.us/CompassionateSchools/HeartofLearning.aspx>



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Impact on Learning & Behavior

<ul style="list-style-type: none"> • Organization • Cause & effect • Memory • Executive functioning • Attention • Academic engagement • Intrusive thoughts • Receptive & expressive language • Fine motor skills • Frustration tolerance/perseverance 	<ul style="list-style-type: none"> • Reactivity • Impulsivity • Attention (vigilance/dissociation) • Relational engagement • Emotional regulation • Social & emotional development • Aggression • Withdrawal • Perfectionism
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Impact on Worldview

Typical Development vs. Developmental Trauma

<ul style="list-style-type: none"> • Nurturing & stable attachments with adults • Belief in a predictable & benevolent world/ generally good things will happen to me • Feeling of positive self-worth /others will see my strengths • Optimism about the future • Feeling that I can have a positive impact on the world 	<ul style="list-style-type: none"> • Basic mistrust of adults/inability to depend on others • Belief that the world is an unsafe place/bad things will happen & they are usually my fault • Assumption that others will not like me • Fear & pessimism about future • Feelings of hopelessness & lack of control
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Building Healthy Brains

<http://www.albertafamilywellness.org/resources/video/how-brains-are-built-core-story-brain-development>

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Perceptive: How do we view children?

Traditional View	Trauma Informed View
Acting out child	Emotionally dysregulated child
Anger management problems	Scared / fight, flight, freeze response
Willful and naughty	Adaptive patterns of behavior
Manipulative	Seeking to get needs met
Uncontrollable	In need of skills to self-regulate
Pushing buttons	Negative template or worldview
In need of consequences to motivate	In need of effective intervention to heal

Perspective Shift
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Perception: How do we view parents?

Traditional View	Trauma Informed View
Non-compliant, disrespectful	Scared, seeking control
Lazy	Feels helpless
Uncaring, disengaged	Overwhelmed, disenfranchised
Manipulative	Seeking to get needs met
Angry	Survival adaptation
Delayed/ "slow"	Dissociative
System distrust	Historical trauma

Perspective Shift
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Assessing Perspective

- School culture/climate
- Trauma Sensitive School Checklist
- Review Tool for Assessing Practice
- Stop, start, continue, change activity
- Safety Review Tool
- Classroom sensory strategy assessment
- Social and Emotional Learning Tool
- My Emotional Regulation Plan

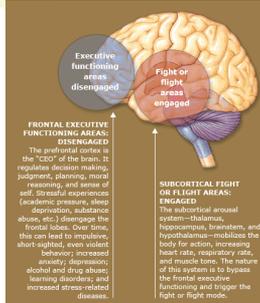


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#4 Regulation

- Impact on the Brain
 - If there is danger, the "thinking" brain shuts down, allowing the "doing" brain to act
 - Brain changes in a use dependent way; repeated exposure to traumatic stress causes changes in brain structures, neuro-chemistry & genetic expression
 - Information from our environment comes in low
 - Cortical modulation is impaired



FRONTAL EXECUTIVE FUNCTIONING AREAS: DISENGAGED
The prefrontal cortex is the "CEO" of the brain. It regulates decision making, judgment, planning, moral reasoning, and sense of self. Stressful experiences (reading pressure, sleep deprivation, substance abuse, etc.) hijack the frontal lobes. Over time, this can lead to impulsive, short-sighted, even violent behavior; increased anxiety, depression, alcohol and drug abuse; learning disorders; and increased stress-related diseases.

SUBCORTICAL FIGHT OR FLIGHT AREAS: ENGAGED
The subcortical arousal system (thalamus, hippocampus, brainstem, and hypothalamus) mobilizes the body for action, increasing heart rate, respiratory rate, and muscle tone. The nature of this system is to bypass the frontal executive functioning and trigger the fight or flight mode.

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Adaptive Response	Rest	Vigilance	Freeze	Flight	Fight
Hyperarousal Continuum	Rest	Vigilance	Resistance	Defiance	Aggression
Dissociative Continuum	Rest	Avoidance	Compliance	Dissociation	Fainting
Primary secondary Brain Areas	F-CORTEX	CORTEX	LIMBIC	MIDBRAIN	BRAINSTEM
	<i>Cortex</i>	<i>Limbic</i>	<i>Midbrain</i>	<i>Brainstem</i>	<i>Autonomic</i>
Cognition	Abstract	Concrete	Emotional	Reactive	Reflex
Mental State	CALM	AROUSAL	ALARM	FEAR	TERROR

Evans, D. Perry © 2010. www.ChildTrauma.org



How do we intervene in the classroom?



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Categories of Strategies

- * Sensory
- * Regulatory
- * Relational



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Sensory Triggers and Preferences

Providing Diverse Options

- Vision
- Auditory
- Smell
- Taste/ Oral motor
- Movement (vestibular / proprioceptive)
- Touch / Temperature
- Movement and Balance



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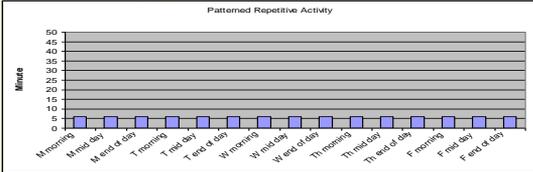
Regulation

- Art
- Music
- Yoga, stretching,
- Bouncing a basketball, playing catch
- Aerobic Exercise <https://www.youtube.com/watch?v=6Rlrvx5-2CQ>
- Bal-a-vis-x <https://www.youtube.com/watch?v=-mbQv34Zs-w>
- Comfort/ sensory rooms
- Pet assisted work
- Ritual and routine
- Deep breathing,
- Mindfulness https://www.youtube.com/watch?v=U9-pHw18I08&feature=player_embedded
- **For more examples:**
https://media.dpi.wi.gov/sspw/av/trauma_sensitive_scho ols_mod_9/story.html

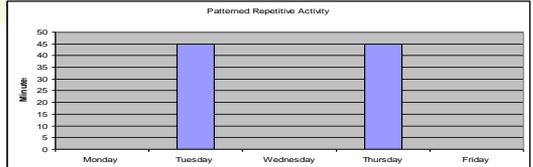


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At this frequency



Not this frequency



Lower Brain

5: Relationship 



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Repeating the pattern

- Co-regulation: Educator and student
- Co-dysregulation: Educator and student
- Disengaged students



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Relational

Increasing connections

- Identifying relational deficits
- Mentoring with a safe adult
- Regulation breaks with staff

Teaching relational skills

- Universal and embedded social and emotional learning
- Safe and acceptable expression of feelings
- Supervised play/ parallel play at first
- Coaching and role playing interactions

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#6: Reason to Be



- Past: How did I come to be?
- Present: Who am I and what is my purpose?
- Future: Who do I hope to become?

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Reason to Be: Universal



- Identity development in curriculum
- Culturally responsive practice
- Restorative Practice
- Safety/ Protection from bullying
- Focus on strengths/ Sense of competence
- Belonging and acceptance –community circle
- Service learning
- Student driven decisions
- Vision, Mission/ Values
- Diverse exposure
- Growth mindset
- Optimism, hope and perseverance
- Meaning
- Resilience

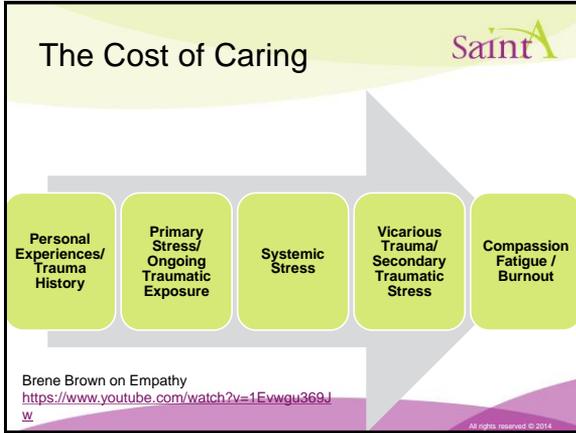


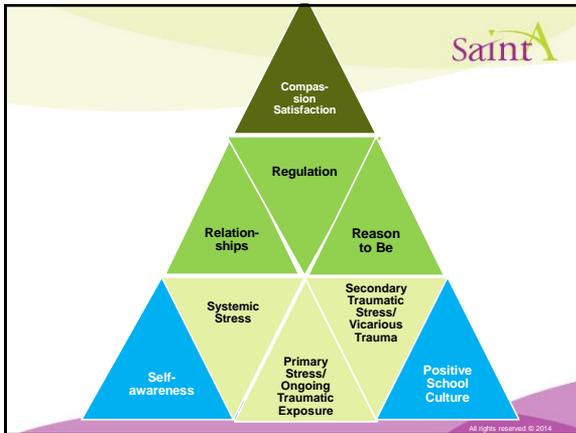
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#7 Caregiver Capacity



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Self-Awareness

Personal Awareness:

- Acknowledging personal trauma history/ ACE score.
- Recognizing its role in your way of being
- Seeking professional support as needed

Red Flags

- Changes in friends or activities
- Sleeping /eating issues
- Intrusive thoughts
- Medical Concerns
- Withdrawal/ numbing
- Others?

Self- Assessment

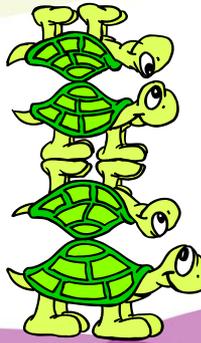
- Beth Hudnall Stamm - ProQOL <http://www.proqol.org>

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Positive School Culture

- Wellness program
- Work/life balance is valued
- Open communication
- Positive problem solving
- Supportive culture (ask for help, tapping out)
- Gratitude and celebrations



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Strategies for us

- Regulation
- Relationship
- Reason to Be



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Next Steps... Saint 

What will you do next?

“We are the ones we’ve been waiting for.”

—The Elders Oraibi, Arizona Hopi Nation

We need more...

7 EI Introduction to Trauma Sensitive Schools
November 7th

<http://www.sainta.org/trauma-informed-care/community-training/>

7 EI Train the Trainer
October 7th and 8th / 14th and 15th
November 7th – 11th

<http://www.sainta.org/trauma-informed-care/train-the-trainer/>

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- Professional Development on mental health and trauma
- Teacher consultation regarding student needs
- Coaching and consultation on school wide implementation of trauma sensitive schools

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