

Trauma Informed Education

In the Era of COVID-19

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Introductions

arborpsychology.org/resources



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Trauma Basics & Impacts



What is trauma?

An event or a series of events that have an adverse impact which overwhelms a person's existing coping skills.

- The event(s) may:
 - Be physical or psychological
 - Experienced directly or witnessed
 - Cause acute or chronic levels of extreme stress

Often it is out of our control, beyond usual experience and creates sense of danger

Trauma Experiences

- Trauma develops from a SUBJECTIVE experience and is really a RESPONSE to the event (not the experience itself)
- Trauma is cumulative -- a combination of “Big T” and “little t” traumas accumulate together over time.



TYPES OF TRAUMA

Acute

A single,
isolated event

- Accident
- Natural Disaster
- Sudden loss

Chronic

Repeated and
prolonged
exposure/
events

- Domestic Violence
- Community Violence
- Prolonged illness

Complex

Varied and
multiple
traumatic
events

- Often interpersonal
- Abuse/neglect
- Multiple events from prior categories

Others

Racial &
Historical
Trauma

- Intergenerational
- Systematic
- May impact response to other traumatic events

The three types of ACEs include

ABUSE



Physical



Emotional



Sexual

NEGLECT



Physical



Emotional

HOUSEHOLD DYSFUNCTION



Mental Illness



Mother treated violently



Divorce



Incarcerated Relative



Substance Abuse

Source: Centers for Disease Control and Prevention

Credit: Robert Wood Johnson Foundation

Reflective Activity

Prior to your 18th birthday:

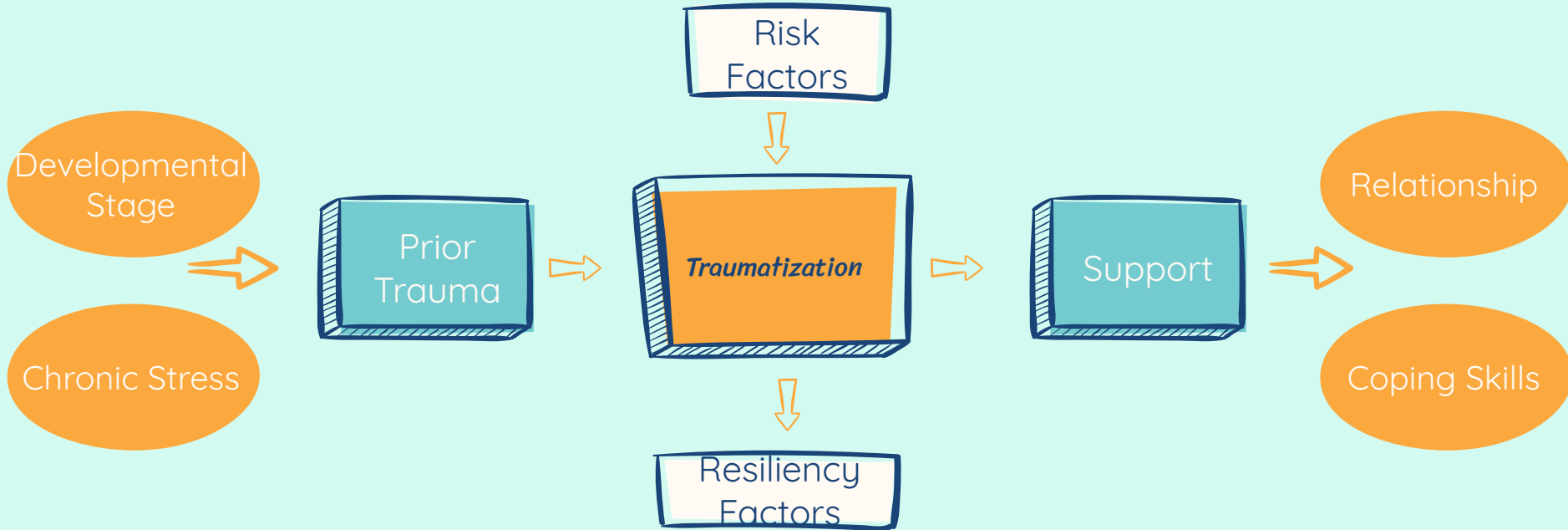
1. Did a parent or other adult in the household often or very often... Swear at you, insult you, put you down, or humiliate you? or Act in a way that made you afraid that you might be physically hurt?
No___If Yes, enter 1___
2. Did a parent or other adult in the household often or very often... Push, grab, slap, or throw something at you? or Ever hit you so hard that you had marks or were injured?
No___If Yes, enter 1___
3. Did an adult or person at least 5 years older than you ever... Touch or fondle you or have you touch their body in a sexual way? or Attempt or actually have oral, anal, or vaginal intercourse with you?
No___If Yes, enter 1___
4. Did you often or very often feel that ... No one in your family loved you or thought you were important or special? or Your family didn't look out for each other, feel close to each other, or support each other?
No___If Yes, enter 1___
5. Did you often or very often feel that ... You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? or Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?
No___If Yes, enter 1___
6. Were your parents ever separated or divorced?
No___If Yes, enter 1___
7. Was your mother or stepmother:
Often or very often pushed, grabbed, slapped, or had something thrown at her? or Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? or Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?
No___If Yes, enter 1___
8. Did you live with anyone who was a problem drinker or alcoholic, or who used street drugs?
No___If Yes, enter 1___
9. Was a household member depressed or mentally ill, or did a household member attempt suicide?
No___If Yes, enter 1___
10. Did a household member go to prison?
No___If Yes, enter 1___

The Trauma Response



Traumatization

- Experiencing what is perceived as a traumatic event does not necessarily result in traumatization or long-term impact



Neurobiology: Brain Basics

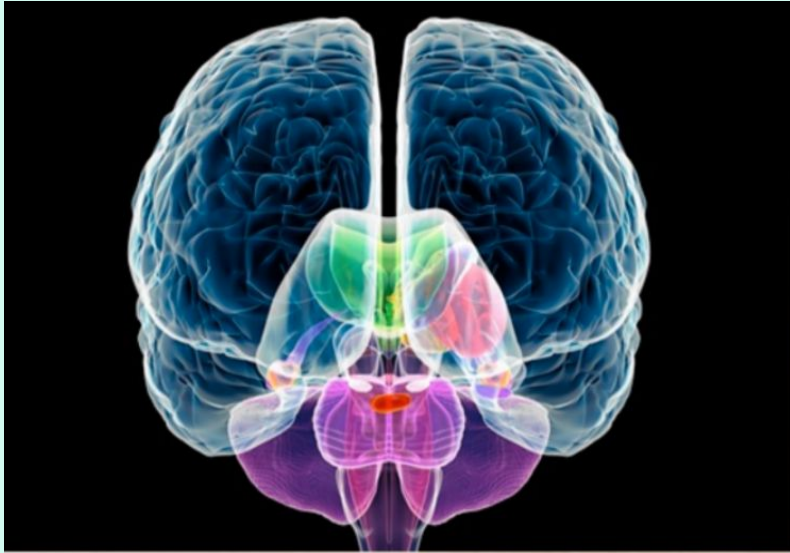
- The brain develops from the bottom up. What is needed for survival comes first:
 - Brainstem
 - Almost fully developed at birth; hard to change
 - Lymbic system
 - The emotional center; partially developed at birth
 - Cortex
 - The thinking center; last to develop



Neurobiology: Brain Basics

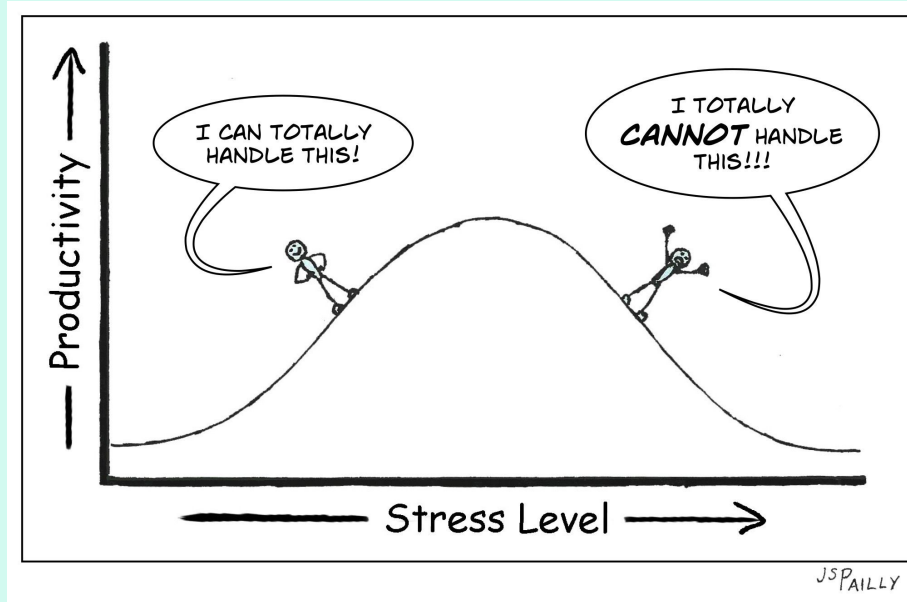
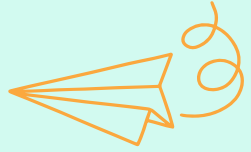
- The structure of the brain is a blueprint for development, but the brain molds and changes based on input
 - We are born with a set number of neurons, but our experiences shape how those neurons connect and fire over time.
 - In other words, our experiences impact what our brains come to expect and how we react to situations
- Brain is at 80% of its adult size by age 3, with 1 million new synapses forming in first 3 years of life.*

Neurobiology: Trauma Impacts



- Stress, including stress from traumatic events, impacts brain development
 - Stress-response system becomes overdeveloped (amygdala, hippocampus)
 - Thinking centers of brain become underdeveloped
- Goal is survival and protection of self

Toxic Stress

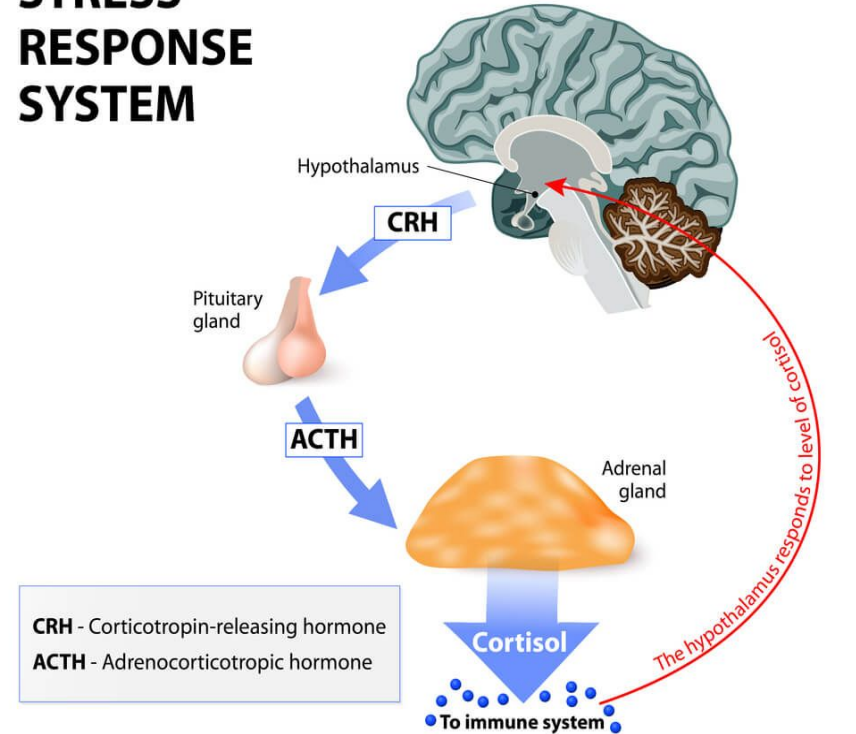


Some level of stress is necessary; too much stress impacts brain development and response systems

Toxic Stress

- When Stress Response System is functioning typically, system activates (cortisol releases) to protect us from real danger/anxiety. When that danger passes, parasympathetic system activates to to slow down that fight/flight/freeze response
- When you've experienced ACEs or toxic stress, the system is overly-active and less able to regulate.

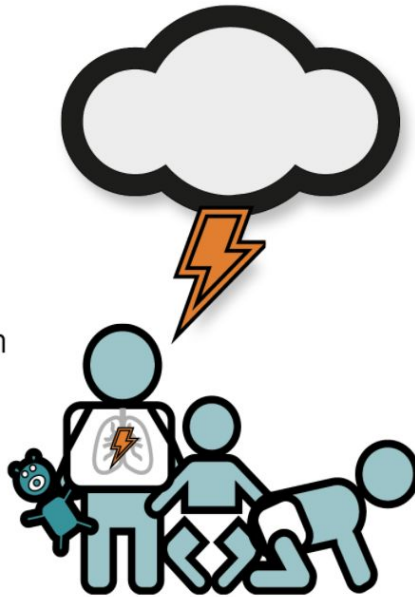
STRESS RESPONSE SYSTEM



TOXIC STRESS EXPLAINS HOW ACEs "GET UNDER THE SKIN."

Harvard Center for Child Development

Experiencing many ACEs, as well as things like racism and community violence, without supportive adults, can cause what's known as toxic stress. This excessive activation of the stress-response system can lead to long-lasting wear-and-tear on the body and brain.



The effect would be similar to revving a car engine for days or weeks at a time.

5-Stages of Stress/Arousal

Calm

- Can access your whole brain, so kids can learn and play here
- Many kids spend most of their time here
- Kids with trauma have a hard time staying here

Alert

- An adaptive stage Encountered upon mild stress, like trying something new
- Can still learn in this stage, so long as stress doesn't become too high

Alarm

- Significantly limited capacity to think and learn
- Operating out of limbic system primarily and will react to anything new, any change with emotional brain
- Children with trauma spend most of their time here

Fear

- Extremely limited capacity to think and learn
- Language center inaccessible, which is why talking/reasoning won't work

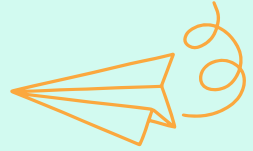
Terror

- No capacity for thinking/learning
- Language center inaccessible, which is why talking/reasoning won't work
- Kids may become aggressive or out of control

COVID-19 & Trauma

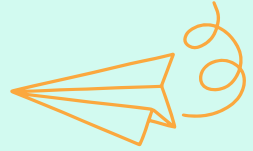


COVID-19



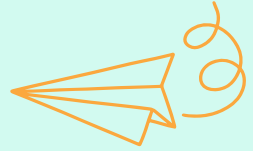
- COVID-19 may be a traumatic event -- it is out of our control, out of the ordinary, and may create threat to safety
- Response will differ by students relative to their experience of COVID-19, prior risk factors, coping capacities, and support systems
 - For students with prior trauma, there may be cumulative impact
 - For other students, this may be an event that overflows their stress bucket
 - Many students will be living in the “alert” stage more often, which may become the “alarm” stage as pandemic progresses

COVID-19



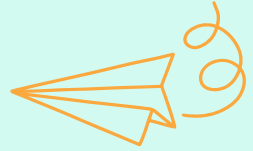
- Kids often experience stresses at the same level as adults but are better at “hiding it,” so it’s important to be aware of the high-risk stressors:
 - Remaining at home subjects them to more trauma
 - Significant disruption in routines
 - Lack of socialization, at a time when social skills are developing and important for wellness
 - Parental stress

COVID-19



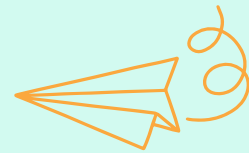
- Generational trauma and impact
 - Often during times of “disaster” or crisis, the youngest children experience the biggest impact.
 - Children incorporate the event as they develop and it shapes who they are
 - Kids from more socially disadvantaged groups are often disproportionately impacted

Responses to Trauma



Young Children	School-Aged Children
<ul style="list-style-type: none">● Fear/anxiety/worry● Regression in behavior● Difficulty sleeping● Changes in eating● Reenactment of trauma through play● Separation anxiety	<ul style="list-style-type: none">● Fear/anxiety/worry● Shame/guilt/blame● Anger/aggression● Headache/Stomachache● Nightmares● Difficulty concentrating● Hypervigilance or Dulling of response

How it Might Show Up in Classroom



FIGHT	FLIGHT	FREEZE
Disruptive/high risk behaviors Aggression Outbursts Screaming Hyperactivity	More absences Disengagement/isolation Avoidance Leaving the classroom Daydreaming Sleeping/pretending to sleep Hiding Wandering	Zoning Out* Appearing Numb Refusal to answer/participate Not asking for help Not making needs known Appearing unable to move

Educational Impacts

4+ ACES



51%

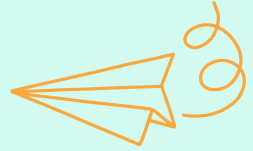
0 ACES



3%

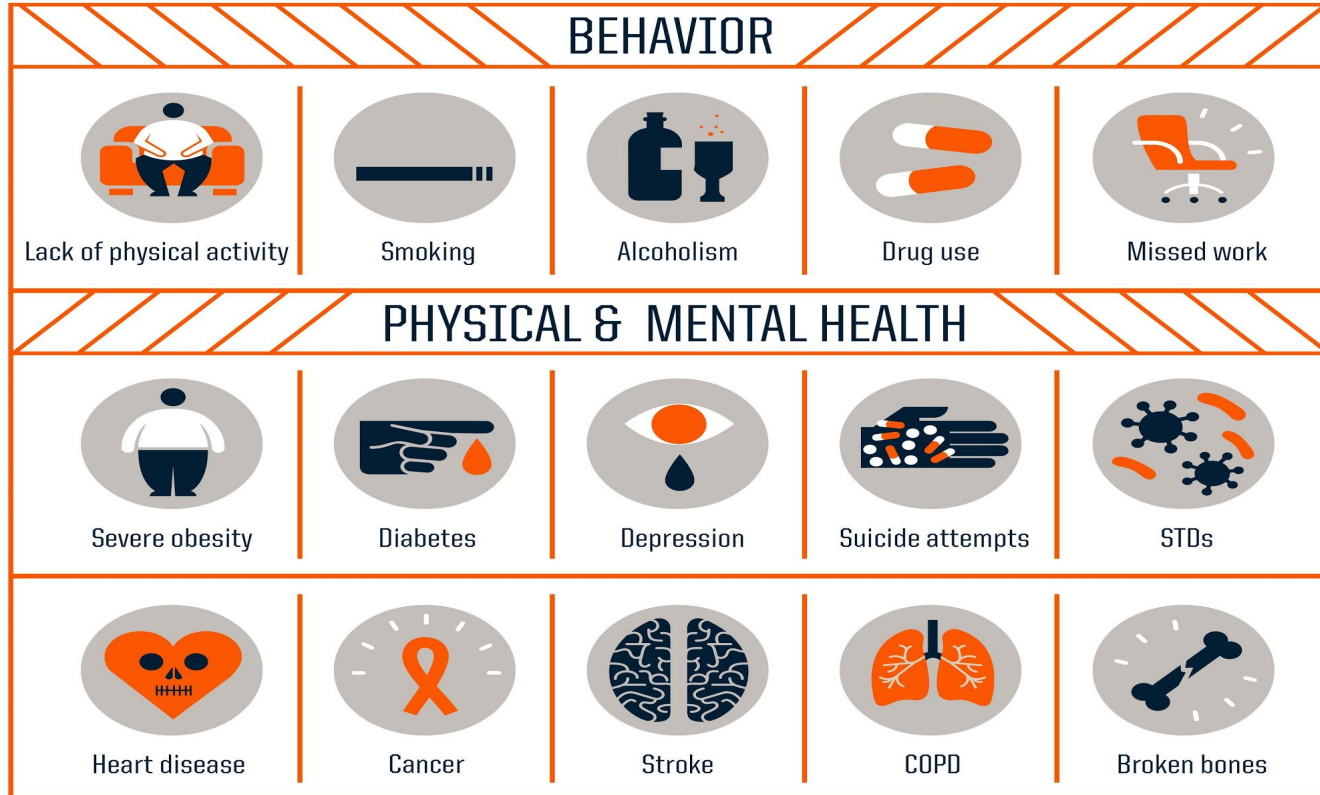
Reported learning or behavioral concerns present at school

3+ ACES & Learning Outcomes



- Two-and-half times more likely to repeat a grade than are children who have experienced none
- Five times more likely to have severe attendance issues
- Six times more likely to experience behavioral problems
- More than twice as likely to be suspended from school

Long-Term Impacts



Source: Centers for Disease Control and Prevention

Credit: Robert Wood Johnson Foundation

Trauma-Informed Schools

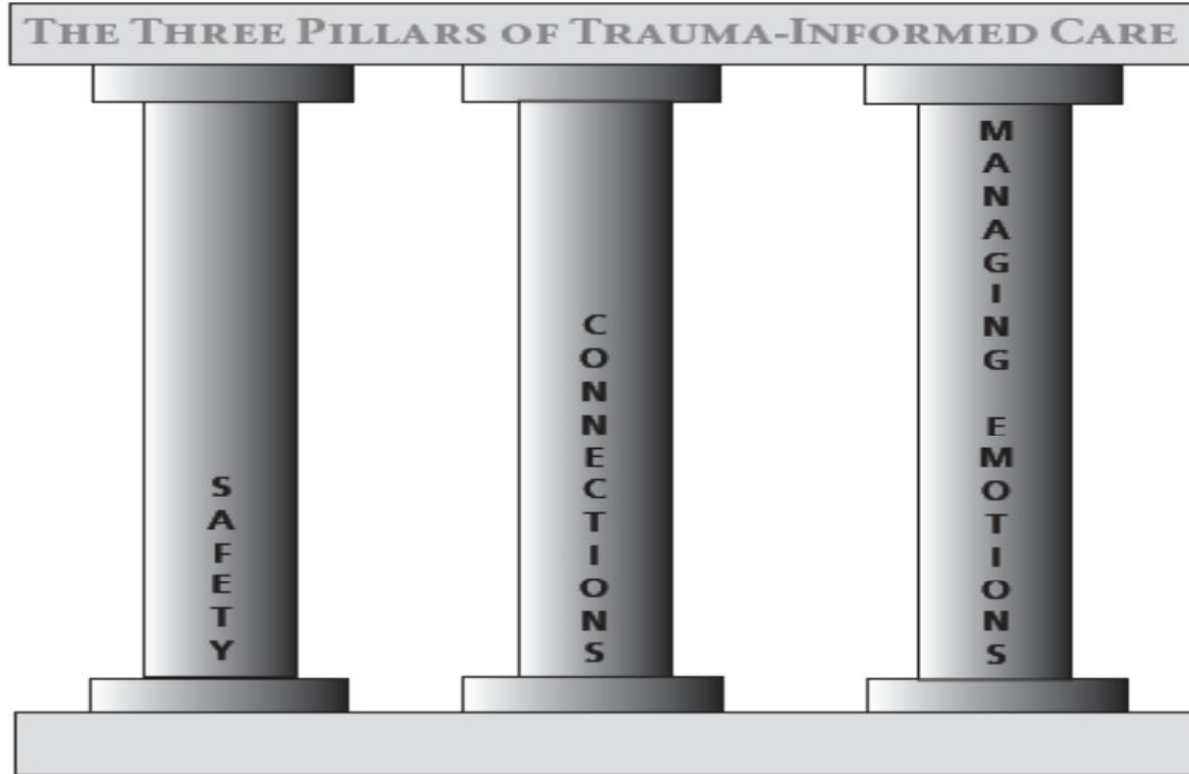


Key Differences

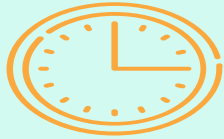


- Trauma-Informed Schools:
 - Prioritize relationships
 - Recognize that “behavioral management” is insufficient and look for the meaning in behavior
 - Keep trauma in mind, knowing that students need to be “calm” or “alert” to learn
 - Provide flexibility to prioritize social-emotional needs, over academic focus
 - Create sense of safety and inclusivity to promote learning

Pillars of Trauma Informed Care



A Strategy for Implementation: The 3 R's



Routine

Maintain consistent in classroom routines, including explaining routines in terms of safety



Relationship

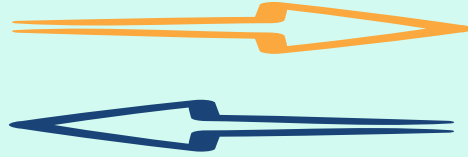
“The more healthy relationships a child has, the more likely he will be able to recover from trauma and thrive. Relationships are the agents of change[.]”
-Dr. Bruce Perry



Regulation

Validate and co-regulate, while also supplying tools for self-regulation (breathing, meditation, mindfulness). Build regulation tools into routines

Routine Creates Safety



- Keep consistent routines and schedules to ensure physical safety
- Describe routines in terms of safety, both COVID and otherwise

- Consistency of routines helps build emotional safety and provides reassurance that you're doing everything within control to maintain physical safety
- Use routine to build in opportunities to check-in

Creating Safety



- Predictability
 - Knowing what to expect
 - Knowing what is expected
 - Understanding the boundaries (and the reasons why)
- Reliability
 - Trusting someone to support you
 - Trusting what the response will be when you have needs
 - Trusting someone will help you maintain the boundaries (even when it is hard)

What else do you need to feel safe?

Relationships:

- Relationships are key for:
 - Keeping students in learning brain
 - Helping students to regulate
 - Rewiring traumatized brain
 - Providing consistency and predictability
 - Healing from prior experiences (changes the internal narrative)*

“Who you are, is as important as what you do.” - Jeree Pawl



**Learning
Brain**

VS



**Survival
Brain**

Shift in Mindset

- Developing a connection and building a trauma informed approach to relationship, requires a shift in mindset. Instead of looking at “misbehavior” as being driven by student misconduct, we look for the deeper meaning (i.e. the cause)

WHAT'S WRONG?



WHAT HAPPENED?

What are you seeing?



The behavior:	The meaning:
Distracted Aggressive Hyperactive Defiant Controlling Manipulation Hypervigilant Impulsivity Low Frustration Tolerance Meltdowns	I'm having intrusive thoughts I'm in survival mode I'm ready to face anything I don't trust you I don't trust anyone I need to have my needs met I think there is danger everywhere I have a hard time controlling my body I'm fearful I need someone to help contain my stress

How can you help:

- After asking what happened, the next step is to ask:

**WHAT CAN I DO IN THIS
MOMENT, TO IMPROVE MY
RELATIONSHIP WITH THIS
STUDENT?**

Things to Consider:

- What does the student need from me?
- How can I make this student feel safe?
- Where can I place my body to create a sense of safety?
- How can I be most authentic?
- How can I convey that I want to understand what's happening?
- Am I getting stuck in the behavior?
- Is the behavior triggering me?

Traditional Reactions	Beyond Consequences Responses
"It's not that difficult."	"I need to know how hard this is for you."
"Go to the principal's office."	"I'm here. You're not in trouble."
"You're a teenager now and you need to learn to deal with life."	"I don't want you alone in this. Let me help you."
"Stop crying."	"It's okay to feel."
"You're so dramatic."	"You need to be heard."
"Stop acting like a baby."	"That really set you back, didn't it?"
"Detention is waiting for you."	"Sit with me."
"Stop being so needy."	"What is it you need help with?"
"You need to learn to be responsible."	"Let's chunk this down so it is more manageable."
"I can't help you with this issue—I've got thirty other children in this classroom."	"We'll get through this together. Every single student in this class is important."
"Don't you talk to an adult like that!"	"You're allowed to have a voice. Let's talk together."
"Stop whining."	"I want to understand you better. If I know how you feel, I'll be able to help you better. Use your voice so I can really understand."

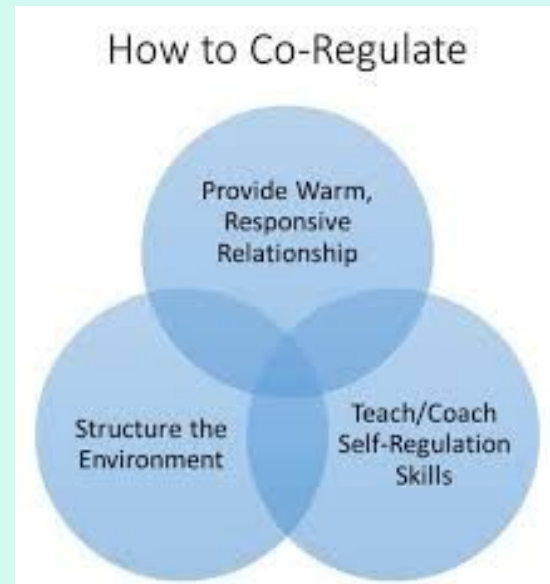
Taken from: Help for Billy

Regulation

- Students who are not regulated, cannot learn.
 - “Regulate, then relate, then reason” - Dr. Bruce Perry
 - Regulation + Relationship are needed for students to access higher level cognitive capacity
- A trauma-informed response, therefore, recognizes that rather than a behavioral management technique to impact behavior, students need support and skills to regulate their emotions first!

Boundaries + Care

- Being trauma informed does not mean there are no consequences or boundaries!
 - In fact, consistent, thoughtful boundaries and follow through are necessary for creating both physical and emotional safety.
- The trauma-informed implementation of boundaries and follow-through approaches consequences from the learning perspective
 - “What am I trying to teach this student?”



Break Out Rooms

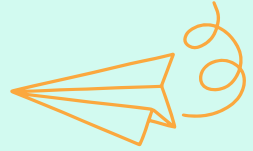


- What are times of day/events during school day that might trigger your stress response system?
- What is an example of a student who may have been engaging in “challenging” behaviors?
 - How did you respond?
 - Would you change anything going forward based on being trauma-informed?

Back to School Strategies

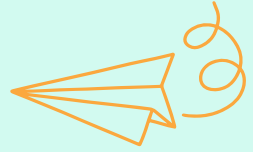


Balancing Safety and Normalcy



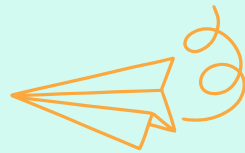
- There are new and unique challenges of balancing physical and emotional safety in the era of COVID, with physical symptoms of emotional need mirroring illness
 - Look out for patterns indicating emotional stress and assess for signs/symptoms of anxiety BUT **prioritize physical safety.**
 - If we try to maintain a sense of normalcy, at expense of physical safety, we are likely to create more trauma events (increased illness, death)
 - Plus, this will help with keeping everyone in the calm or alert stages, including teachers

Assessing for Trauma/Stress



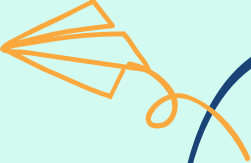
- Utilize existing knowledge of students to inform decisions about who may be at greater risk
- Find opportunities for short, individual check-ins with students
- Consider doing an activity such as a reflective circle or worksheet, to provide an opportunity for students to share their feelings about the crisis.
- Note any changes in students' behavior.

Modulate Expectations



- This year will look different. Shift your expectations of yourself with a goal of being proud of how you've adapted
- Create expectations that are consistent with student emotional and cognitive capacity (which are likely not “normal” in this moment)
 - Remember: It's easier to shift up than repair down
- Be flexible and prioritize regulation and containment → students can only learn in those first two zones of stress

Provide Information

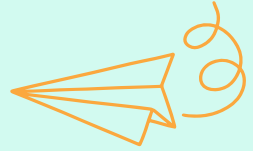


“Children are compelled to give meaning to what is happening to them; when there is no **clear explanation**, they make one up. The intersection of trauma and the developmentally appropriate egocentrism of childhood often leads a little kid to think, I made this happen.”

—*Nadine Burke Harris*

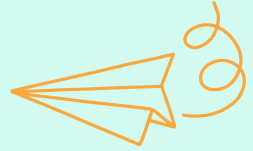


Provide Information



- Withholding information often creates more stress for kids.
- Give consistent information in brief, developmentally appropriate ways
- Make yourself available to answer questions (and provide lots of ways to ask questions -- check-ins, circle time/reflection circles, question box)
- Make resources that are appropriate available (e.g. “Georgie and the Giant Germ”)
- Limit access to social media and 24-hour news cycles

Continue Socioemotional Education



- Incorporate the “new normal” with games like the Masked Memory Match or a feelings “chart” check-in with masked faces
- Provide check-ins specific to COVID-19 (books, reflection circles, worksheets)
- Create a predetermined “space” for regulating and a system for helping students access it (on their own or with support)
- Practice coping strategies (breathing, 5 senses, mindfulness walks)
- Create spaces for choice and empowerment



Social-Emotional Schedule

Daily Schedule Example

8:05: Greet students at door (Relationship)

8:15: Morning Mindfulness (Regulation)

10:00: ELA writing stem (Self-Awareness)

12:15: After lunch break break (Regulation)

1:30: Before Math Brain Break (Regulation – prime the brain)

2:50: Daily gratitude in agenda (Self-Awareness)

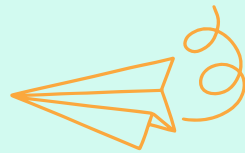


Help Students Understand

Why do we lose
CONTROL
of our
emotions?

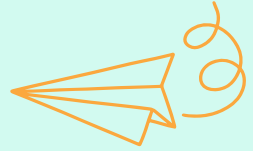


Stay Connected [through the mask]



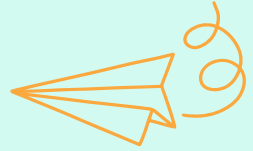
- Establish a touch-free greeting routine
- Video tape yourself or use pictures of yourself for lessons so kids can see your whole face during the day
- Allow students to bring in photos of themselves without the mask for use in classroom/lessons or to make a video for a “show-and-tell” (younger) or “teach a lesson” (older)
- Have 1:1 check-ins with students throughout the day

Every Hour:



- Connect with students through humor
 - Jokes
 - Short humorous video
- Provide sensory integration opportunities
 - Utilize repetitive rhythm
 - Practice a coping skill together
 - Engage in an activity that requires your bodies to move
- Check-in with students, with reciprocal sharing

Managing a Crisis



- Stay consistent, but flexible
- Provide information in concrete and developmentally appropriate ways
- Have a clear message being communicated by all staff (and, ideally, in coordination with parents)
- Validate feelings AND provide reassurance that you're working hard to protect safety (concrete steps taken)
- Connect promptly with mental health professionals to support staff and students needing extra support

Self-Care



What is Self-Care



Discussion: What is it?

A necessary, deliberate action, we take to restore and care for overall wellness

TYPES OF SELF-CARE



PHYSICAL

- Sleep
- Stretching
- Walking
- Physical release
- Healthy food
- Yoga
- Rest



EMOTIONAL

- Stress management
- Emotional maturity
- Forgiveness
- Compassion
- Kindness



SOCIAL

- Boundaries
- Support systems
- Positive social media
- Communication
- Time together
- Ask for help



SPIRITUAL

- Time alone
- Meditation
- Yoga
- Connection
- Nature
- Journaling
- Sacred space



PERSONAL

- Hobbies
- Knowing yourself
- Personal identity
- Honoring your true self



SPACE

- Safety
- Healthy living environment
- Security and stability
- Organized space



FINANCIAL

- Saving
- Budgeting
- Money management
- Splurging
- Paying bills



WORK

- Time management
- Work boundaries
- Positive workplace
- More learning
- Break time

Barriers

Discussion: What gets in the way?

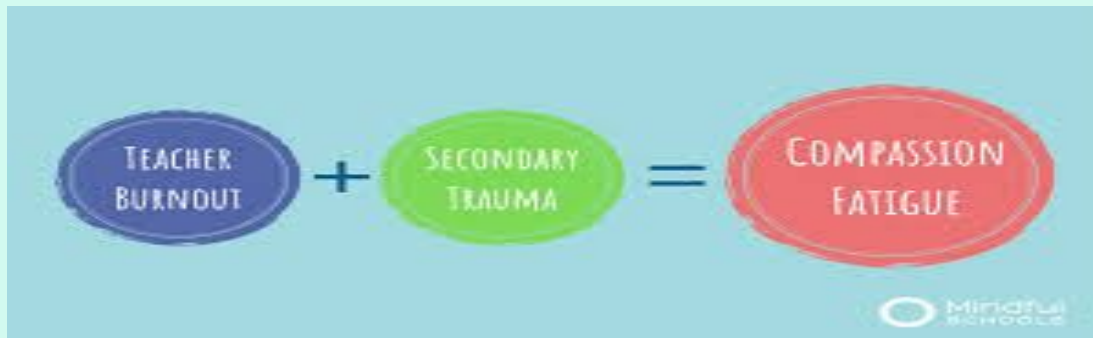
Feelings of guilt, selfishness, indulgence
Not prioritizing selves and wellness

Why do we need it?

- Empty our stress buckets
- Restore and maintain wellness
- Combat secondary trauma and emotional contagion
- Avoid burnout, compassion fatigue

On an average school year, 46% of teachers report high levels of daily stress. This is tied with nurses for highest reported stress level among occupations survey.

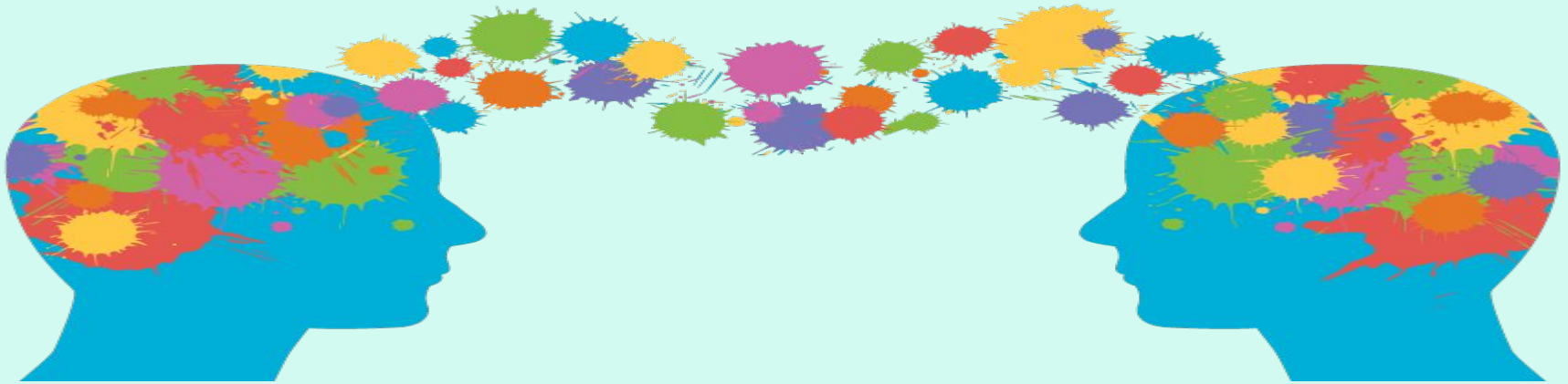
Why do we need it?



Signs/Symptoms:

- Self-doubt/Self-blame
- Frustration
- Anger
- Exhaustion
- Diminished enjoyment
- Avoidance/detachment
- Disengagement
- Autopilot
- Reduced ability to feel empathetic

What is your emotional contagion score?



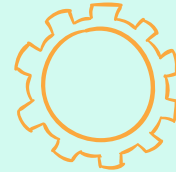
Self-care Assessment and Planning



Take Assessment



Create Plan



Share Out

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Thanks!

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