



Trauma-Sensitive Schools TRAINING PACKAGE

UNDERSTAND • BUILD • LEAD

Understanding Trauma and Its Impact

E-Resource Companion Slide Presentation

DISCLAIMER

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UNDERSTANDING TRAUMA AND ITS IMPACT

- Part 1: What Is Trauma and Who Is Affected?
- Part 2: How Does the Stress Response System Work?
- Part 3: What Is the Impact of Exposure to Trauma?
- Part 4: What Does This Mean for Schools?



LEARNING OBJECTIVES

- 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



PART 1

What Is Trauma and Who Is Affected?

Definition of trauma | Types of trauma | Prevalence of childhood trauma



DEFINITION OF TRAUMA

The three "E's" of trauma

Trauma refers to an **event**, series of events, or set of circumstances that is **experienced** by an individual as physically or emotionally harmful or life threatening and that has lasting adverse **effects**.



- 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



- 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



The term **complex trauma** refers to exposure to multiple traumatic events from an early age, **and** the immediate and long-term effects of these experiences over development.



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 of historical trauma:

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



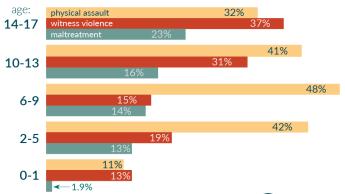
Racial trauma: Potentially traumatic experiences resulting from direct experiences of racial harassment, witnessing racial violence toward others, and experiencing discrimination and institutional racism



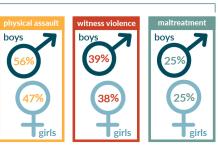
PREVALENCE OF CHILDHOOD TRAUMA

2 of 3 children & youth were exposed to violence in the past year

Of these, 50% report more than 1 form of victimization 1 in 6 report 6 or more exposures to violence physical assault, witnessing violence, and maltreatment are common



Lifetime exposure



Adverse Childhood Experiences (ACE) Study

1 in 5 adults report 3 or more adverse experiences as children



Adverse experiences include:

- · Physical abuse, emotional abuse, and sexual abuse
- Emotional and physical neglect
- Household substance abuse
- Household mental illness
- A mother treated violently
- Parent separation or divorce
- Incarcerated household member

As rates of adverse childhood experiences go up, so does high risk behavior, illness, and early death

Sources: Finkelhor, Turner, Shattuck, & Hamby, 2015; Child Trends, 2016; Felitti, Anda, Nordenberg, Williamson, Spitz, Edwards . . . & Marks, 1998



PREVALENCE OF CHILDHOOD TRAUMA

Groups at increased risk of exposure to trauma:

- Youth of color ages 12 to 19
- African American youth living in urban, low-income communities
- American Indian/Alaska Native (Al/AN) children and youth
- Children and youth with disabilities
- Refugees
- Children and youth who are homeless and living in poverty
- LGBTQ children and youth



SUMMARY: PART 1

- Experiences become traumatic when they overwhelm our ability to cope.
- Traumatic experiences come in many forms, ranging from one-time events to experiences that are chronic or even generational.
- Exposure to trauma in childhood is common.
- Risk for exposure to more than one type is high.
- Contextual factors increase risk for trauma.



PART 1: ACTIVITY/DISCUSSION



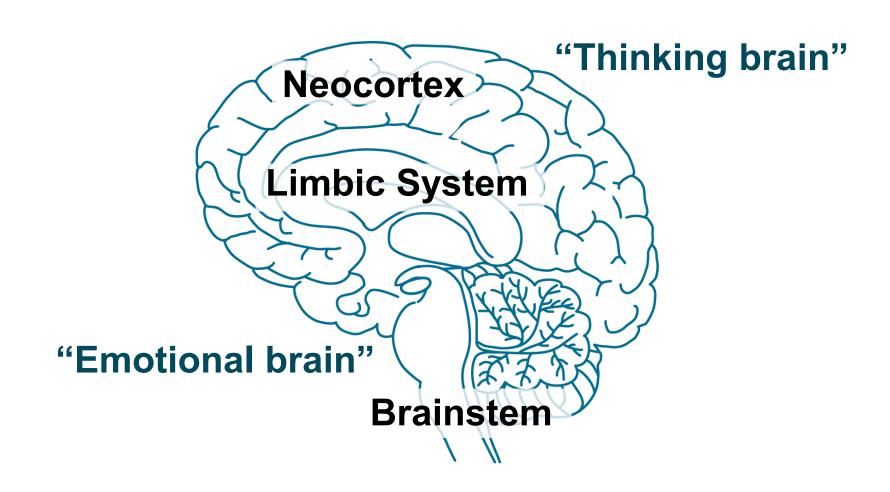
PART 2

How Do We Respond to Stress?

The Stress Response System | The Stress Response and Trauma | Common Responses to Trauma for Youth | Triggers



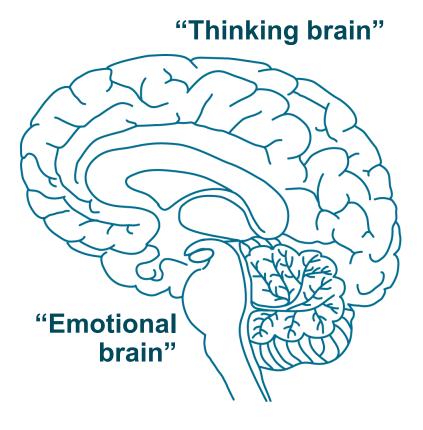
THE STRESS RESPONSE SYSTEM





THE STRESS RESPONSE SYSTEM

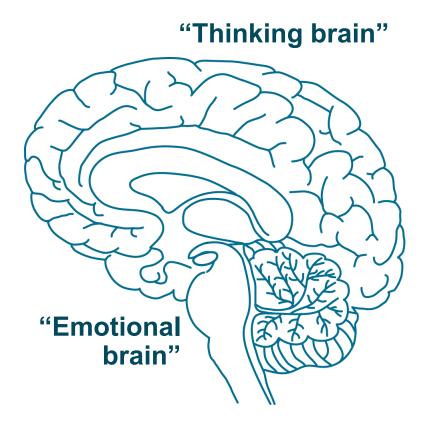
- 1. The amygdala senses threat and sets off the alarm.
- 2. Thinking brain assesses the situation.
- 3. Thinking brain goes off-line. Emotional brain activates fight or flight response.
- 4. Thinking brain helps shut off the alarm and helps us to calm down.





THE STRESS RESPONSE AND TRAUMA

- An experience becomes TRAUMATIC when it overwhelms our system for responding to stress.
- The emotional brain continues to sound the alarm and send messages to fight or flee, even after the threat has passed.





COMMON RESPONSES 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



COMMON RESPONSES 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)



COMMON RESPONSES 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)



CULTURE AND TRAUMA

The following are influenced by cultural factors:

- Risk and type of trauma exposure
- How a person describes their experience
- How distress is expressed
- Which topics are acceptable to discuss
- How a person makes meaning of experiences and heals from trauma



- 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



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



Common responses to trauma triggers:

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



Parents

- School environment
- Shame and embarrassment
- Confusion in meetings
- Fear of other system involvement
- Interactions with staff who they know or who remind them of someone connected to a past traumatic experience
- Situations that trigger feelings of helplessness and loss of control



SUMMARY: PART 2

- The brain has a built-in alarm system designed to detect threats and keep us safe.
- When faced with a threat, the emotional brain takes over.
- A stress becomes traumatic when it overwhelms our stress response system.
- A range of acute post-trauma responses are common.
- Triggers are trauma reminders that set off the alarm.
- Responses to triggers may seem out of place and can be misunderstood by others.



PART 2: ACTIVITY/DISCUSSION



PART 3

What Is the Impact of Exposure to Trauma?

Risk and Protective Factors | Post-Trauma Pathways | Effects of Complex Trauma



RISK AND PROTECTIVE FACTORS

- Individual Factors
- Environmental Factors



RISK AND PROTECTIVE FACTORS

Individual Factors

- History of previous exposure to trauma
- Age of exposure
- Gender
- Cognitive ability
- Self-efficacy
- Biological factors



RISK AND PROTECTIVE FACTORS

Environmental Factors

- Nature of the traumatic event
- Proximity to the traumatic event
- Culture and ethnicity
- Level of social support
- Quality of parent-child relationships, parent mental health, and parental history of trauma
- Health of the broader community



POST-TRAUMA PATHWAYS

- Resilience
- Recovery
- Post-traumatic growth





- Severe persisting distress
- Decline
- Stable maladaptive functioning



POST-TRAUMA PATHWAYS

Resilience, Recovery, Growth

Resilience: A positive, adaptive response to significant adversity

- Adaptable, caring, and supportive relationship with an adult
- A sense of mastery over life circumstances
- Strong executive function and self-regulation skills
- Safe and supportive environments (schools and communities)
- Affirming faith or cultural traditions



POST-TRAUMA PATHWAYS

Resilience, Recovery, Growth

Resilience

- Children may demonstrate resilience in one type of situation but not another.
- Coping skills that support resilience can be developed at any age.
- Children do not develop the capacity to positively adapt to adversity in isolation.
- Regardless of resources, children who face extreme adversity are likely to be significantly impacted.
- Schools play an important role in fostering student resilience.



Resilience, Recovery, Growth

Recovery

- Longer period of disruption
- Return to earlier level of functioning



Resilience, Recovery, Growth

Post-traumatic Growth: Positive change or transformation as a result of a traumatic experience



Distress, Decline, Stable Maladaptive Functioning

Severe Distress

- Severe, persisting distress after a traumatic event
- Body's attempts to adjust are not effective
- Requires more intensive, individualized supports



Distress, Decline, Stable Maladaptive Functioning

Decline

- Initially appear to be managing the strain of a traumatic experience
- Over time unable to maintain a healthy level of functioning
- Difficulties may begin months or years after the event



Distress, Decline, Stable Maladaptive Functioning

Stable Maladaptive Functioning

- Poor functioning before and after a traumatic event
- History of exposure to adversity
- Vulnerable to continued negative effects



Post-traumatic Stress Disorder

Symptoms

- Re-experiencing (nightmares, flashbacks, reactions to trauma reminders)
- Avoidance of trauma reminders
- Changes to the stress response system (on alert danger, reactive)
- Negative changes in beliefs about self, others, and mood

Consider cultural factors related to PTSD symptoms.

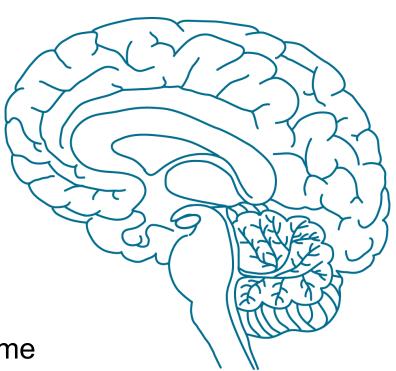


- Exposure to trauma that starts early in life can alter how the brain develops
- Need to review key concepts related to brain development



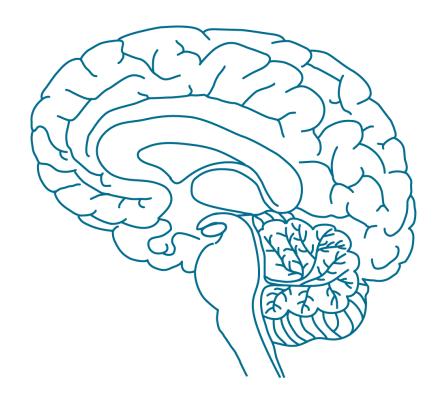
Brain Development

- Develops from the bottom up
- Early childhood is period of greatest growth
- At 80% of adult size by age 3
- Streamlines connections over time
- Thinking brain and emotional brain better coordinated over time





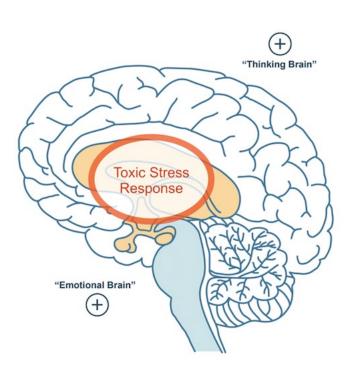
Brain development is influenced by **genetics**, the **environment**, and early **experiences**.





The brain under constant threat:

- Emotional brain is overreactive and constantly in survival mode
- Thinking brain is underdeveloped





Key areas affected by complex trauma:

- Relationships
- Emotional regulation
- Behavior
- Cognition
- Dissociation
- Self-concept and future orientation



SUMMARY: PART 3

- Key environmental and individual factors impact a child's response to trauma and risk for negative effects.
- There are a number of possible trajectories for youth following a traumatic event.
- Most youth who experience a traumatic event do not develop significant mental health issues; however, some continue to struggle.
- Chronic interpersonal trauma that begins early changes the way the brain develops and can impact all areas of functioning into adulthood.
- Adults play a critical role in preventing and reducing the negative effects of stress on children.



PART 3: ACTIVITY/DISCUSSION



PART 4

What Does This Mean for Schools?

Impact of Trauma on Students, Parents, Staff and Schools | Trauma-Sensitive Schools: A Universal Response



IMPACT OF TRAUMA ON STUDENTS

- Physical symptoms such as headaches, stomachaches, poor appetite, and decline in self-care
- Intense feelings of fear, anxiety, and concern for their safety
- Difficulty identifying how they are feeling and controlling their emotional reactions
- Angry or aggressive outbursts
- A desire to withdraw from peers and adults
- A tendency to engage in risk-taking behaviors
- Trouble trusting adults and peers, reading social cues, and building relationships



IMPACT OF TRAUMA ON STUDENTS

- Difficulty paying attention and learning
- More time out of the classroom
- Increased isolation
- School absences
- More suspensions or expulsions
- Higher referral rates to special education
- Poor test scores and an increased risk of failing grades



IMPACT OF TRAUMA ON PARENTS

- Difficulty managing emotions and controlling behaviors when interacting with school staff
- Difficulty forming relationships
- Increased risk for substance abuse, depression, and PTSD that negatively impact parenting
- Trouble managing stress related to their child's difficult behaviors
- Feelings of embarrassment, shame, fear, or guilt about their child's behaviors or needs
- Difficulty helping their children cope



IMPACT OF TRAUMA ON STAFF

- Increased anxiety
- Reduced energy and focus
- Trouble regulating emotions
- Difficulty managing responses to students and parents
- Diminished capacity to maintain positive teacherstudent and teacher-parent relationships
- Poor attendance or work performance



IMPACT OF TRAUMA ON STAFF

Secondary traumatic stress: The presence of PTSD symptoms caused by indirect exposure to other people's traumatic experiences.

Vicarious trauma: The cumulative effect of working with traumatized students and their families that leads to negative changes in how staff view themselves, others, and the world.



IMPACT OF TRAUMA ON SCHOOLS

- Students more likely to escalate
- Adults more reactive, controlling, and punitive
- Negative impact on school safety and culture
- Increased risk for harm
- Decrease in academic achievement



TRAUMA-SENSITIVE SCHOOLS: A UNIVERSAL RESPONSE

- All school staff members recognize and understand student responses to trauma, and practices that support healing and resilience are embedded schoolwide.
- May require changes to mission, vision, practices, policies, and culture
- Ensures support for all students and enhances identification of students with more intensive needs
- Encourages partnerships with community organizations to ensure needed resources are available



PART 4: ACTIVITY/DISCUSSION



CLOSING

We have learned the following:

- What trauma is and who is affected
- How the body's stress response system works
- How exposure to trauma affects students, parents, and school staff
- What this means for schools



CLOSING

Questions to consider:

- To what extent is our school talking about trauma and its effects regularly?
- What steps has the school taken to adopt a trauma-sensitive approach schoolwide?
- What more would you like to do?



THANK YOU!