Safe and Connected

Using Trauma Informed Practices to Enhance Student Success

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Adverse Childhood Experiences (ACEs)

Early experiences in life guide our development. Exposure to extreme trauma and/or repeated adverse experiences and challenges can shape our neural system, and affect our interaction with societal structures and institutions. ACEs studies include: Center for Disease Control and Prevention; Harvard University Center for the Developing Child; Kaiser Permanente, and many others.

We owe much of our knowledge regarding the impacts of trauma on the brain to orphaned children of Romania adopted to the U.S.
Types of Adverse Experiences

Abuse
Emotional abuse
Physical abuse
Sexual abuse

Neglect
Emotional Neglect***
Physical neglect***

Household Challenges
Domestic Violence
Substance abuse***
Mental Illness***
Parental
Separation/Divorce
Household member in
jail/prison

CAPPD http://www.multiplyingconnections.org/become-trauma-informed/introduction-0
# Adverse Community Experiences: Eco-Systemic Trauma

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<td>• Agencies and Office do not provide outreach</td>
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<td>• Lack of facilities to address community-organized needs</td>
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<td>• Community Citizens lack resources to promote engagement</td>
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<td>• Education/Opportunity Gap</td>
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Severity, Frequency, Duration

- People experience adversity.....it informs us, helps us grow and develop.
- Increasing Collective Trauma
- What ACEs do you/your students have?
- How much is too much? How long is too long? What is severe?
- What Protective Factors mediated the impact of your adversity?
WHAT HAPPENS IN THE BRAIN
during a potentially traumatic event?

The brain stem is critical in fast, defensive responses. It’s directly connected with the retina.
The retina sends visual information to the brain stem immediately - before higher levels of the brain are even aware of the threat.
If the predator moves closer, the periaqueductal gray initiates a fight or flight response.

But it’s not always safe or possible to fight or escape.

That’s when a person may enter the freeze response, or feigned death.

Now the periaqueductal gray activates the parasympathetic nervous system as well.

Muscles get tight and freeze. Both gaze and breath may freeze.

This is not a cognitive choice.

These “decisions” are made at the level of the brain stem and the nervous system.
If the predator doesn’t move away, the person may shutdown completely.

Heart rate drops. Respiratory rate drops. Some people stop breathing. Muscles become limp. Metabolism shuts down. Endorphins are released.

The person enters a state of “no pain”. They are no longer aware of their surroundings.

During inescapable trauma, this is a very adaptive way for the brain and body to respond.
Building Neural Patterns

Electrical-hormonal-synaptic patterns related to increased cortisol flooding lead to compromised brain functioning, relative to a healthy, typically developing child.

= Cumulative developmental impacts. What wires together fires together. Can be stuck in hyper-arousal (Brain Stem), rather than activity in Pre Frontal Cortex.

Impacted children are disadvantaged, usually increasingly.

Social agencies and schools are not able to adequately address the need. Realistic funding would make a HUGE difference. *We already know what to do.*
Limbic System v. Pre Frontal Cortex (PFC) (ACC)

Feel

- Amygdala (episodic autobiographical memory (EAM)) creates emotional mnemonics or shortcuts
- Hippocampus (stored as stories/interpretations with emotional response attached)
- Files/tapes
- Presumes Danger (Safety 1st)
- Perseverate/Avoid (consciously breath through it)

Think and Communicate (internal)

- The longest part of brain to develop (maturity = 20+ years)
- Executive Functioning (critical thinking, problem solving, goal setting, organization)
- Receives feedback from arousal/emotional systems
- Stimulus discrimination
- Sense-making

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Examples of Toxic Stress-Producing Experiences

**Often habitual, Non-Extreme, or intermittent**

- Caregiver unpredictability re: mood swings, state of mind, presence, intoxication
- Fights, Violence, Emotional Outbursts or Withdrawal
- Lack of adequate food, warmth, clothing, personal care items or facilities
- Lack of routine, poor or little engagement with positive social structures, unstable household population
- Minor abuse, or threat of abuse (lack of parenting skills re guidance)
Healthy Brain

This PET scan of the brain of a normal child shows regions of high (red) and low (blue and black) activity. At birth, only primitive structures such as the brain stem (center) are fully functional; in regions like the temporal lobes (top), early childhood experiences wire the circuits.

An Abused Brain

This PET scan of the brain of a Romanian Orphan, who was institutionized shortly after birth, shows the effect of extreme deprivation in infancy. The temporal lobes (top), which regulate emotions and receive input from the senses, are nearly quiescent. Such children suffer emotional and cognitive problems.
Comparison of the Developing Brain

Healthy Development

Development Affected by Environmental Stress

## Effects on Children

### Cognitive
- Demonstrate poor verbal skills
- Exhibit memory problems
- Have difficulties focusing or learning in school
- Develop learning disabilities
- Show poor skill development (social, physical, academic)

### Physiological
- Have a poor appetite, low weight, and/or digestive problems
- Experience stomachaches and headache
- Have poor sleep habits
- Experience nightmares or sleep difficulties
- Enuresis/Encopresis after toilet training or exhibiting other regressive behaviors

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Behavioral

- Display excessive temper
- Demand attention through both positive and negative behaviors
- Exhibit regressive behaviors
- Exhibit aggressive behaviors
- Act out in social situations
- Imitate the abusive/traumatic event
- Are verbally abusive
- Scream or cry excessively
- Startle easily
- Are unable to trust others or make friends
- Believe they are to blame for the traumatic experience
- Fear adults who remind them of the traumatic event
- Fear being separated from parent/caregiver
- Are anxious and fearful and avoidant
- Show irritability, sadness, and anxiety
- Act withdrawn
- Lack self-confidence

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Associated with High ACEs Scores

- Alcoholism – Drug Addiction
- Drug/Alcohol Use
- Smoking
- Depression
- Health-related quality of life
- Ischemic heart disease
- Liver disease
- Financial stress
- Risk for intimate partner violence
- Risk for sexual violence
- Sexually Transmitted Diseases
- Suicide attempts
- Early initiation of smoking
- Early initiation of sexual activity
- Adolescent pregnancy
- Poor academic achievement

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The ACE Pyramid represents the conceptual framework for the ACE Study. The ACE Study has uncovered how ACEs are strongly related to development of risk factors for disease, and well-being throughout the life course.

ACEs = likelihood of early death
Collective Trauma and Anxiety Spectrum
Rates increasing sharply, preK-College and adult

• I am crumbling, and I am so strong
• How many of you have ACEs? How many of you are so strong?
• In your core on a daily level, how are you feeling?
• Unprecedented levels of anxiety and PTSD, people need support
• New Normal

• Social Media- Always on
• Biorhythmic disturbance
• Exposure to News 24/7 visually
• Negative gets more play
• Threat (school/community violence, racism and related, socio-political, privacy)
• Climate change
• Economics
• Governmental disarray
Police chief: Teen shot dead by officer was unarmed

Hate groups in

ICE launches new immigration sweep in L.A. area; at least 100 detained so far

Immigration agents raid 7-Eleven stores nationwide, arrest 21 people in biggest crackdown of Trump era

Weedkiller found in granola and crackers, internal FDA emails show
## Trauma Reactions and Resilience Pathways

### Crisis
- Fear
- Anger
- Shame and Guilt
- Hopelessness
- Depression

### Resilience/Post Traumatic Growth
- Relationship with others
- Connection to positive community or culture
- Finding/Developing personal strengths
- Changing core beliefs
- Engaging with new opportunities
- Making peace, finding gratitude
- Transforming trauma/finding the gem
Trauma Reactions and Perspectives

View of the Self

- I feel damaged
- I am to blame
- I am a bad boy/girl
- I am incompetent/I will fail
- It is too much for me to handle
- I should have acted or reacted differently
- If only I had.............
- I deserve to suffer
Trauma Reactions and Perspectives

View of the World
• The world is not a safe place
• The world is dangerous
• People cannot be trusted
• Life is unpredictable

View of the Future
• Things will never be the same
• Nothing will work out for me
• What is the point?
• I will not get over this (sorrow, fear, stress, disappointment, etc.)
Provider Behaviors:
Avoid Triggering Trauma Response or Re-Traumatizing

- Create a Safe Environment
- Genuine Positive Regard
- Respectful, Gentle, Available
- More Personal/Less Institutional
- Honest and Transparent
- Use Culturally Responsive Practices
- Build Relationship
- Learn about Interests, Concerns and Self-Help strategies
- Work towards Healing and Empowerment

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Provider Behaviors: Avoid Triggering Trauma Response or Re-Traumatizing

• Focus on Strengths
• Promote Agency (choices, taking action, control, ownership)
• Build Self-Efficacy, Self Regulation and model/scaffold Reflection and Critical Thinking
• Build Positive Connections to school, community, social support
• Acknowledge Difficulties yet Reinforce the Positive
• Faith/Spirituality is important, so encourage (Carefully) if it is brought up by the student. Frame as Positive Social Connection
Secure your own oxygen mask first, before assisting others

University of British Columbia researchers tracked the levels of stress hormones of more than 400 elementary students in different classes. They found teachers who reported higher levels of burnout had students with higher levels of the stress hormone cortisol each morning.

This suggests classroom tensions could be “contagious.”

(Oberle & Schonert-Reichl, 2016)
(https://doi.org/10.1016/j.socscimed.2016.04.031)
Provider Self-Care......and teach/promote for your students

Managing Information

• Create a Cloud account
• Visualize the info leaving your brain/body and being housed in the Cloud
• When you put info there, trust that it will be available to you if you need it
• Let it go

Body-Mind

• Mindfulness
• Physical Activity
• Being in Nature
• Sleep
• Nutrition
• Positive Connections
• Professional Support

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Trauma and Trigger Recovery
Long term/Short term

• Safety and Stabilization
• Remembrance and Mourning
• Reconnection

Herman, J. 1992. *Trauma and Recovery: The Aftermath of Violence-From Domestic Abuse to Political Terror.*

• Reframing
• Finding Purpose
• Taking Action

Promote Self Regulation

• Self Care-Calming (sensory or emotional space)
• Physical Grounding (walking, running, yoga, tapping, vests/texture, chewing, breathing, brain gym or other)
• Mindful (awareness of present moment, surroundings, breath)
• Art/Craft/Journal
• Affirmations
• Re-Assess situation

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Building Resilience: Some Protective Factors

- Stable, committed relationship with a supportive caregiver
- Self Regulation skills
- Positive coping skills
- Problem-solving skills
- Developing self-efficacy
- Clear expectations for behavior
- Utilizing faith, hope, and cultural traditions
- Positive engagement and connections in two or more of the following contexts: School, Peers, Athletics, Employment, Religion, Culture
- Presence of mentors and support for development of skills and interests
Let’s add to these:

Empathy x2 (metacognitive)
Self-Compassion
Self-Care
Self-Love
Self-Acceptance
Self-Advocacy
Self-Regulation
Using Agency

“What would you tell a friend?”
“How would you treat a friend?”
“What do you need?”
More about Self-Awareness
You must participate in your own rescue

• What is the story you tell yourself?
• What are your beliefs about yourself? Your situation?
• How are you feeling?
• How are your beliefs, thought and feelings affecting your actions?
• What are the results of those actions?

• We can’t control what happens to us, but we can control our narrative. Reframe.
  • Highlight Strengths
  • Note Successes (even small ones)
  • Describe Growth & Progress
  • Promote Agency (look for ways to give control and choice)
Setting Intention & Grounding
“What’s On Your Plate?” “Gratitude Journal” “Parking Place”

- Frees up space in hippocampus for short term memory usage
- Creates focus on present day and tasks
- Clears the “air” and helps students set unhelpful material aside
- Allows for “parking” thoughts, feelings, or topics
- Allows for identifying thoughts, feelings, or topics that are no longer useful or that could be discarded ("tow away zone")
- Practice goal setting and reflection
- **Gratitude** increases serotonin, enhances sense of well-being
What’s on your plate?

• Clear your plate. Use visuals, sticky notes, 3D, teach this concept and model.

• Show how when you already have a full plate it’s hard to add anything else.

• If you add too many things, they can get all mixed up and it can be hard to manage them.

• An empty plate or tray can be used to show symbols for things on our mind (houses, family members, pets, health, $, other issues)
Morning Ritual: “What’s On Your Plate?”

• Minute of silence/breathing (Note: some people are disturbed or nervous with silence. Option: near-silence such as soft instrumental background music or nature sounds).

• Examine your plate

• What’s on it? Look at each thing (your plate = your mind/body).

• Assess and ask yourself:
  “Do I need this thought to be active right now?”
  “Is this helpful to me for the tasks I will engage in this morning?”
  “Is this something I can work on or address now, or should I save it for later?”
  “Can I let go of this for a little while?”
Morning Ritual: Park it or Tow Away Zone?

As you decide what to take off your plate, consider if you want to park it, or put it in the tow away zone.

• Parking area is a list in your journal (tabbed orange) and you can refer to items later if need be. You can write, sketch, or use a symbol. Its up to you.

• Sometimes there are things you would like off your plate and don’t want them back on. Sometimes we have things we want to stop thinking about, maybe an unkind comment, or feeling badly about a fight. You can put these in your tow away zone list to let them go (tabbed red).

• If you already listed something and it comes up again, you can just add a star or a checkmark, or you can list it again.

• If you finish early, focus on your belly breathing, so your brain is well oxygenated.
Morning Ritual: Gratitude

• Move into **Gratitude**. Turn to your yellow tab and add at least one thing that you are truly grateful for this morning. You can list it, sketch it, use a symbol or a code. That’s up to you. Anything you are thankful for (students may have previously decorated that section...stars, glitter...)

• Remember that when you think about what you are grateful for, **feel that gratitude in your body**, in your heart, and what a gift it is (to breathe, to walk, to have clean clothes, to see an elk on the way to school, to go to grandma’s afterschool, etc.)
Morning Ritual: Setting Intention - Goals

• **Goals**: go to your green tab and list* 1-2 goals or intentions you have for the day.

• Remember that they can be something you are continuing to work at and improve on, or a new goal.

• They can be academic, a behavior, or a way of being.

• When you finish, go to belly breathing and visualize yourself meeting these goals or intentions. Feel free to add lots of detail. (Allow 2 minutes)

• We are going to move towards our first tasks. You are welcome to share your gratitude or intentions with others as we get set up.

• We’ll check on our progress in meeting our goals later in the day. (Follow up includes what students did that helped them make progress or meet goals)
Relationship-Based Restorative Behavior Support

R3: Reflect Respond Restore

- Behavior Response “Think” Sheet
- Can do on their own, with teacher, with peer support or other staff
- Can use UDL
- Conference with teacher/staff and other parties involved/affected

R4 = R3+ Relationship to

- Self
- Others
- Place
- Process

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Relationship-Based Restorative Behavior Support

• Supportive, not punitive
• Student(s) have ownership
• Normal activities (recess, lunch with peers, etc) resume when Initial R3 Process is complete
• Conferencing (if necessary) may need time to be scheduled
• The issue or matter is not over until Restoration is complete
• Once it is resolved/restored, it is truly over. To bring it up again would be injurious to the student.
• Celebrate (can be quietly) students completion and growth
Relationship-Based Restorative Behavior Support

R3: Reflect Respond Restore Behavior Response “Think” Sheet

• What happened?
• What were you thinking at the time?
• Who was affected by your actions?
• How were they affected?
• What rules were violated or safety measures ignored?
• What would you do differently if your thoughts or situation arose again?
• What can you do to make things right?

*See Restorative Practices, International Institute for Restorative Practices
*Love & Logic In the Classroom
Education Initiatives & Trauma-Informed Practice

• Positive Behavior Support (check for competitive reinforcers)
• Restorative Practices (Yes, yes, yes) .... not specifically included in MTSS
• Social Emotional Learning (Yes, preferably infused throughout)
• Universal Design (Yes, yes, yes)
• Response to Intervention (RtI) (Yes, with Growth Mindset and without exclusion)
• CCSS (Yes, if Contextual, Culturally Responsive, Student-Centered)
• MTSS Tier I, II and III
Our social agencies and schools are not able to adequately address the need.

Adequate funding would make a **HUGE** difference.

_We already know what to do._
It’s not Rocket Science!
But is does require commitment $$$

Increased counseling, mental health services, and mental health education for all age groups:

- Early childhood/preschool
- Elementary School
- High School
- Young Adult
- Young families
- Prenatal mentoring & support
- Neonatal mentoring & support
- Academic & Professional mentoring & support
- Education, Social Service and Criminal Justice Professionals trained in Restorative Practices

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The future of our society and world depends on healthy children able to positively engage.
We can’t afford not to invest in healthy children and families.
Thank you for your dedication to children, youth, families and community.

Your participation in the process of supporting growth, development, healing and education is essential to transforming lives and paving the way for a better future.

Please feel free to contact me with questions, concerns, or feedback.

I am available for training and technical assistance, consultation and program development.