The child who is not embraced by the village will burn it down to feel its warmth.

- African Proverb

All Handouts for this training can be found at:

CHECK-IN

- Partner with someone.
- Take up to 1 minute (per person) to respond to the following prompts...

OBJECTIVES:
Trauma Informed Practices In Schools

- **Prevalence & Response** - Why does this matter?
- **Triggers** – Why is this happening?!
- **Tools** – What can I do?!
- **Self Care** – This is exhausting....
**WHY THIS MATTERS ....**

- Adverse Childhood Experiences (ACE)-study
  [http://www.cdc.gov/ace/index.htm](http://www.cdc.gov/ace/index.htm)
- Kaiser Permanente, San Diego, CA
  - Original 286 patients
  - 17,000 participant sample
- Participants completed a 10-question ACE Survey

- Something happens between infancy and adulthood to create a lifetime of addictions, abuse and mental health issues. (Dube et al., 2003)

---

**OF THE 17,000 RESPONDENTS...**

Two-Thirds reported at least one ACE:

![ACE Infographic](http://www.rwjf.org/en/library/infographics/the-truth-about-aces.html)
ADDITIONAL ADVERSE EXPERIENCES

- Accidents
- Community/School violence
- Homelessness
- Loss of a loved one
- Man-made or natural disasters
- Terrorism
- War
- Witnessing of domestic violence

UNTREATED ADVERSE EARLY CHILDHOOD Events Only Exacerbate Over Time

Childhood
- Developmental Delays
- Expulsion

Adolescence
- Delinquency
- Mental Health
- Sexual Activity
- Drugs & Alcohol
- Violence

Adulthood
- Psychiatric Problems
- Drug Abuse
- Alcohol
- Crime

Source: Adverse Childhood Experiences (ACE) Study.
Information available at http://www.cdc.gov/ace/index.htm
OUR BRAIN’S TRIO

Amygdala – Brain Stem
• The NOW.
• Am I safe?

Limbic system – Mid Brain
• The PAST.
• Memories, emotions, past hurts & experiences.
• Can I trust you?

Pre-frontal cortex
• The FUTURE.
• Higher level functioning
• can plan & consider consequences
• Rational Thinking/Logic
• Where the “true personality” is held

IMPACT OF STRESS

• During acutely stressful situations, our bodies secrete cortisol in higher doses to help aid our survival.

• Cortisol – stress hormone
  • Strengthens memories of scary/traumatic experiences

• Elevated cortisol impacts health and cognitive functioning
HISTORICAL TRAUMA
Evidence of post-traumatic stress disorder across generations

- Pregnant women impacted by the World Trade Center attacks on 9/11 who had PTSD from the event gave birth to babies with an elevated stress response and a hypersensitive stress axis.

- Children of parents who survived the holocaust were found to have the same genetic changes to genes related to stress as their parents.

*Children in both cases are more susceptible to anxiety, depression and even PTSD than those whose parent did not experience PTSD*
VIDEO DEBRIEF

• What stood out to you?

• What made you happy or unhappy about Zoe's story?

• What other things might trigger Zoe in the future or might she struggle with?
HOPE IS A ONE WAY STREET...

Resiliency is:

“The Deep Belief that at one time you really mattered to another human being”

-Vincent Feletti, M.D.

WHAT IS TRAUMATIC STRESS?

• Overwhelming experience
• Involves a threat
• Results in vulnerability and loss of control
• Leaves people feeling helpless and fearful
• Interferes with relationships and beliefs

“Trauma can be a single event, connected series of traumatic events or chronic lasting stress.”

Complex Trauma:
• Multiple traumatic events, often that occur within a caregiving system that is supposed to be the source of safety and stability in a child’s life.
THE STRESS RESPONSE AND TRAUMA

The stress response is a chemical response

• Prepares the body for action
  – Fight
  – Flight
  – Freeze
• Most recover
• Some develop more severe difficulties

SIGNS OF TRAUMA

• Inpulsivity
• Hyperactivity
• Distractibility & Inattention
• Dysphoria
• Emotional Numbing
• Social Avoidance
• Dissociation
• Sleep Problems
• School Failure
• Anger

• Eating Difficulties
• Relationship Difficulties
• Aggression/Violence
• Substance Abuse
• Disrespectfulness
• Refusal to attend school
• Refusal to follow instructions
• Regressed or delayed development
• Sensory Issues
TRAUMA & EDUCATION

- Children who were exposed to four or more adverse experiences were **32 times** more likely to have learning and behavioral problems than non-traumatized children.
- Maltreated children are more likely than their peers to be retained a grade, have irregular attendance, and be placed in special education classes.
- Children with higher exposure to violence have lower grade point averages and more absences than children with less exposure to violence.
- Children with ACES are more likely to have:
  - Early initiation of sexual activity
  - Adolescent pregnancy


---

Trauma Informed Care

- Amygdala is overactive in traumatized children
- Goal of TIC is to de-activate the amygdala when it is over-firing
- When amygdala is de-activated, compassion is activated
- TIC helps rebuild the child’s brain
**WHAT DOES A TRAUMA SENSITIVE SCHOOL LOOK LIKE?**

When there is **leadership investment**, all staff:

- Understand what trauma is and how it manifests itself
- Adjust their teaching and discipline styles to meet the needs of traumatized students
- Have access to professional development
- Know where to turn and what resources are available for students they suspect have experienced trauma

**TRIGGERS AND BEHAVIOR**

- Triggers include seeing, feeling, or hearing something that remind us of past trauma.
- Triggers activate the alarm system.
- When the alarm system is activated, but there is no danger, it is a false alarm.
- The response is as if there is current danger.
- The response in involuntary – remember the amygdala responds!
- It can take time to realize you are dealing with a trigger.
**TRIGGERS AND BEHAVIOR**

**Some Common Triggers:**
- Sirens
- Loud noises – school bell
- Police Officers / Fire Persons
- Schedule Changes
  - Minimum Days, testing days, fire/earthquake drills, picture day…
- Sights and Smells
- Resemblances – physical and verbal
- Terms of Endearment
- Unexpected Touch
- ...You tell us?

---

**BREAK TIME**

![Keep Calm and Take a Brain Break](image)
Trauma Informed Practices for Schools - TIPS

IT’S A PARADIGM SHIFT.
CHANGING THE QUESTION:

From… “What is wrong with you?”
To… “What happened to you?”

<table>
<thead>
<tr>
<th>Behavior…</th>
<th>Feeling it is Masking…</th>
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</thead>
<tbody>
<tr>
<td>Oppositional</td>
<td>Fear of Rejection/Abandonment</td>
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<tr>
<td>Outbursts</td>
<td>Overwhelmed</td>
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<tr>
<td>Anger</td>
<td>Hurt</td>
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<tr>
<td>Depression</td>
<td>Lack of Self Worth</td>
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<tr>
<td>Withdrawal/Absences</td>
<td>Avoidance of Emotions</td>
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<tr>
<td>Argumentative</td>
<td>Testing relationship</td>
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<tr>
<td>Escalation</td>
<td>Triggered Trauma Memories</td>
</tr>
<tr>
<td>Defiance of Authority</td>
<td>Need for Control</td>
</tr>
</tbody>
</table>

UNDERSTANDING THAT …

TRAUMA **EXPLAINS** BEHAVIOR IT DOES
NOT **EXCUSE** BEHAVIOR

*Problem Behaviors are often due to a desire to Self Protect or Mechanisms for Coping*
CREATE A SENSE OF SAFETY

• Trauma results in a loss of sense of safety
• Safety is a human being's number one priority
• This includes both physical and emotional safety
• Provide opportunities for students to be successful
• Celebrate even the smallest successes

CREATE A SENSE OF SAFETY

• Provide a safe environment: predictable structure with consistent routines
  ▪ Supervision: eyes, ears, proximity to students
  ▪ Consider a school-wide positive behavior intervention program
  ▪ Create clear expectations during unstructured times (e.g., passing periods, lunch)
  ▪ Provide transition opportunities (e.g., 5 minutes to read a book or a warm up question)
  ▪ Provide clear pathways to emotional support for students who elect to utilize it
**Provide a Sense of Control**

- Give students choices and not ultimatums
- Engage them in a semi-private conversation, instead of in front of classmates
- Limit the number of adults involved; too many educators participating can cause confusion or mixed-messages
- Provide adequate personal space; if the student tells you to back off, give them more space
- Do not block escape routes; when individuals are agitated, they are more likely to experience fight or flight response
- Keep verbal interactions calm and use simple, direct language

** Foster Connections**

- Children need to feel *belonging & significance* before we can really expect them to respond or care about our rules or limits
- Healthy relational interactions with safe and familiar individuals *can buffer and heal trauma related problems*
- Research shows *social connectedness* as a protective factor against maltreatment
- Social milieu (safe environments): *major mediator of trauma*
I’VE LEARNED THAT PEOPLE WILL FORGET WHAT YOU SAID, PEOPLE WILL FORGET WHAT YOU DID, BUT PEOPLE WILL NEVER FORGET HOW YOU MADE THEM FEEL.

～Maya Angelou

DON’T QUIT ON ME!

GradNation
SELF-REGULATION

• Deprivation and neglect of the most basic needs in early childhood prevents the development of the ability to self-regulate

• Trauma impacts the way in which self-regulating skills are formed

• Trauma directly influences how a student develops their coping skills

• Schools that strive to build safe and nurturing schools where relationships are valued are more likely to promote and foster positive coping skills for their students
“A child whose behavior is creating issues is not trying to cause a problem. They’re trying to solve a problem.”

-American Journal of Pediatrics, November 1956

- Every misbehavior is an attempt to fulfill an unmet childhood need
- Must look to understand the meaning behind the behavior

EVERYTHING SPEAKS

*Behavior is a form of communication*

What is this behavior telling me about this youth? What is this youth trying to tell us through this behavior?

**WHAT A STUDENT KNOWS AND HAS PRACTICED WILL ALWAYS FEEL THE MOST NORMAL**

UNDERSTAND THAT:
- That the student is not out to get us
- They act in a way that makes sense according to their understanding of how the world works
- See handout *The Belief Behind The Behavior*
**Trauma Informed Practices for Schools - TIPS**

### STEPS TO BUILD AFFECT IDENTIFICATION

- Build vocabulary
- Connect emotions with:
  - Body sensations
  - Thoughts associated with feelings
  - Behaviors—manifestations of feelings
- Context
  - External: Smells, Sounds
  - Internal: Tired, hungry
- Use literature, music, film to help kids learn to identify emotions.
- See Handout, *The Brain In The Palm of the Hand*

### T.I.P.S. TECHNIQUES

- Teach/Model/Practice
- Morning check-ins
- Breathing
- Taking breaks
- Writing down feelings
**T.I.P.S. TECHNIQUES**

- Grounding Exercises
  - 5-4-3-2-1
  - Progressive Muscle Relaxation
- My Calm Colors Pallet
- Mirroring
- Simple Tasks to Engage Cortex

---

**MORE TIPS FOR TEACHING STUDENTS IMPACTED BY TRAUMA**

Connections:

“Two by Ten” Strategy - Handout
- R. Smith & M. Lambert, Assuming the Best
- 85% Improvement in student behavior
- Behavior of all other students in class improved
- Often their worst student became an ally in the class
MORE TIPS FOR TEACHING STUDENTS IMPACTED BY TRAUMA

- Use and Teach what you know about trauma:
  - Handouts: *Working With Students Exposed To Trauma*,
    - Students who Don’t Perceive Safety
    - Students Who Are Not Able To Self-Regulate Well
    - Students Who Don’t Believe They Matter
    - Students Who Don’t Succeed Academically or Socially

“Students often exhibit behaviors that are a result of trauma but that can be *misinterpreted* by a teacher as willful disobedience, or that the child has greater control over his/her behavior than he/she does.”

-Jody McVittie, MD, Sound Discipline

SELF CARE

*You can’t pour from an empty cup.*

Take care of yourself first.
SELF AWARENESS.....

- **Educators and Empathy**: Empathy is the identification with or the experiencing of, the feelings, thoughts or attitudes of others.
- **Compassion Satisfaction**: The positive feelings we get when we realize that the compassion we put in working with others is resulting in some relief, growth or healing.
- **Empathy** is a double edged sword: It provides healing power, however empathy for the traumatic pain of another can result in personal upset or pain for the listener.

VICARIOUS TRAUMA

When empathy for a student’s suffering leads to internalizing or frightening realities not personally experienced.

**Compassion Fatigue:**
- PTSD related signs that you receive vicariously as a secondary target to trauma.
- Experienced by those in a helping profession.
- Can change your wiring/who you are

**Unlike Burnout:**
- Physical and emotional exhaustion, apathy, or dissatisfaction with job.
“We have not been directly exposed to the trauma scene, but we hear the story told with such intensity, or we hear similar stories so often, or we have the gift and curse of extreme empathy and we suffer. We feel the feelings of our clients. We experience their fears. We dream their dreams. Eventually, we lose a certain spark of optimism, humor and hope. We tire. We aren’t sick, but we aren’t ourselves.”

– C. Figley, 1995
Personal & Professional Symptoms

- Reduced ability to feel sympathy and empathy
- Anger and irritability
- Dread of working with certain clients/populations
- Loss of morale
- Cognitive ability decreases/job tasks more difficult
- Isolation
- Sleep disturbance
- Depression
- Anger toward perpetrators
- Work absenteeism
- Lower workplace performance
- Exhaustion
- Interpersonal/Relational problems

What is Self Care?

- Self-care is any activity we do deliberately in order to take care of our mental, emotional, and physical health.
- Self-care IS NOT...
  - Something we force ourselves to do, or anything we don’t enjoy doing
  - A selfish act!
  - A luxury- it is an ethical mandate
SELF-CARE TECHNIQUES

• PHYSICAL FITNESS
• NUTRITION AND HYDRATION
• SLEEP AND REST
• ASSERTIVENESS
• CENTERING AND SOLITUDE
• CREATIVITY
• FUN AND ENJOYMENT
• CREATE A PLAN FOR SELF-CARE

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San Diego County Office of Education
Susanne.terry@sdcoe.net
619-683-9340 x33030
## SIGNS OF TRAUMA

<table>
<thead>
<tr>
<th>Young Children (Birth-5)</th>
<th>Elementary School Children (6-12)</th>
<th>Adolescent Children (13-18)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Irritability, “fussiness”</td>
<td>• Difficulty paying attention</td>
<td>• Talking about trauma incidents constantly, or denying that it happened</td>
</tr>
<tr>
<td>• Startling easily or being difficult to calm</td>
<td>• Being quiet or withdrawn</td>
<td>• Refusal to follow rules, or talking back frequently</td>
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<tr>
<td>• Frequent tantrums</td>
<td>• Frequent tears or sadness</td>
<td>• Being tired all the time, sleeping much more (or less) than peers, nightmares</td>
</tr>
<tr>
<td>• Clinginess, reluctance to explore the world</td>
<td>• Talking often about scary feelings, ideas</td>
<td>• Risky behaviors (e.g., using drugs or alcohol, running away from home, or getting into trouble with the law)</td>
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<tr>
<td>• Activity levels that are much higher or lower than peers</td>
<td>• Difficulty transitioning from one activity to the next</td>
<td>• Fighting</td>
</tr>
<tr>
<td>• Repeating traumatic events over and over in dramatic play or conversation</td>
<td>• Fighting with peers/adults</td>
<td>• Not wanting to spend time with friends</td>
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<td></td>
<td>• Changes in school performance</td>
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<td></td>
<td>• Wanting to be left alone</td>
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<td>• Eating much more or less than peers</td>
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<td>• Getting into trouble at home or school</td>
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<td>• Frequent headaches or stomachaches with no apparent cause</td>
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<td></td>
<td>• Behaviors common to younger children (e.g., thumb sucking, bed wetting)</td>
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<td>Nuisance</td>
<td>Show off</td>
<td>Annoyed</td>
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<td>Show off</td>
<td>Clown</td>
<td>Irritated</td>
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<td>Clown</td>
<td>Disruptive</td>
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<td>Disruptive</td>
<td>Pesters</td>
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<td>Pesters</td>
<td>Blunting out</td>
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<tr>
<td>Blunting out</td>
<td>Teacher's pet</td>
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<tr>
<td>Teacher's pet</td>
<td>Acts pitiful</td>
<td>Worried</td>
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<tr>
<td>Acts pitiful</td>
<td>Acts helpless</td>
<td>Guilt</td>
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<tr>
<td>Acts helpless</td>
<td>Acts scared</td>
<td>Sorry for</td>
</tr>
<tr>
<td>Acts scared</td>
<td>Acts incapable or demanding</td>
<td>Responsible for</td>
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<tr>
<td>Acts incapable or demanding</td>
<td>Teacher's pet</td>
<td>Challenged</td>
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<td>Acts pitiful</td>
<td>Defiant</td>
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<td>Acts pitiful</td>
<td>Acts helpless</td>
<td>Passive - aggressive</td>
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<td>Acts scared</td>
<td>Apathetic</td>
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The Two-By-Ten Strategy for Dealing with Difficult Students

It probably would take little effort for you to identify your most difficult student. This child is active, disruptive, and frustrating. Researcher Raymond Wlodkowski investigated a strategy called Two-by-Ten and found very successful results. With the strategy, the teachers focus on their most difficult student. For two minutes each day, ten days in a row, teachers have a personal conversation with the student about anything the student is interested in (as long as the conversation is appropriate for school). Wlodkowski found an 85% improvement in that one student’s behavior. In addition, he found that the behavior of all the other students in class improved.

Many teachers utilizing the Two-by-Ten strategy found similar results. Their worst student became an ally in the class when they formed a strong personal connection with that student. Though this seems counterintuitive, the students who seemingly deserve the most punitive consequences we can deliver are actually the ones who most need a positive and personal connection with the teacher. Often when they act out, they are letting us know that they are seeking a positive connection with an adult authority figure and that they need that connection first, before they can or will focus on academic content. One teacher using the Two-by-Ten strategy said, “Not only does it help with the toughest students, but also it helps the teachers remember their humanity as they attempt to survive and thrive in the classroom.

The Brain in the Palm of the Hand
Preparing the Ground: Self-regulation
Brain in the hand is based on work by Daniel J. Siegel, MD

<table>
<thead>
<tr>
<th>Objective:</th>
<th>Directions:</th>
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</table>
| • To teach students and teachers about the need to self-calm and re-gather. | 1. **Setting the stage.**
Invite students to think of a time that they got really upset. List a few examples on the board of things that are upsetting to them (no names).
• Ask them if they can remember if it felt like they had a choice about what they did?!
• Did it matter to them what the other person was feeling or thinking?
| • To invite students to think about self-regulation pro-actively. | 1. **Setting the stage.**
Invite students to think of a time that they got really upset. List a few examples on the board of things that are upsetting to them (no names).
• Ask them if they can remember if it felt like they had a choice about what they did?!
• Did it matter to them what the other person was feeling or thinking?
| • To create a positive time out space. | 2. **Introducing the "brain in the palm of the hand".**
• Explain that you will use your hand to model a brain. (See drawings next page.)
• Point to your wrist. The part that is closest to your spine and near the base of your skull is called the brain stem. It keeps you awake or asleep, makes sure you breathe and makes sure your heart keeps beating. It also keeps you safe.
• Fold your thumb across your palm. The middle part of your brain is where you process emotions and store your memories (limbic area). It is also where you have your "safety radar" (your amygdala).
• Fold your fingers over your thumb so you have a fist. The outer layer of your brain is called the cortex. It is where your thinking and planning happens.
• Point to your fingernails. The area of the cortex that is right up front is Hit prefrontal cortex. It is where the brain processes information about how we relate to others:
  - Understanding others' feelings
  - Ability to calm ourselves
  - Ability to make choices
  - Morality
  - Ability to sense what is going on for others (read body language)
| Materials: Board | 3. **Flipping our lid.**
When we are really stressed or upset, the prefrontal cortex shuts down and no longer works with the rest of our brain.
• Lift the fingers up so they are straight and the thumb is still across the palm.
• We say, "We flip our lid."
• Explain that we "flip our lid" when the thinking part (prefrontal cortex) of our brain isn't working. It becomes hard to use our problem solving skills.

Comments for teachers:
• This activity looks long, but can be done quickly. We recommend you do steps 1-7 one day and come back, review the brain in the hand and move on to step 8 the next day.
• We function best when we have access to all parts of our brain. Under stress the prefrontal cortex doesn't work well and we lose our problem solving skills.
• When the part of our brain that allows us to think and respond respectfully is not functioning well, we can help ourselves and others by taking some time to "come back into ourselves."
• To watch Dr. Daniel Siegel demonstrating this click here: http://www.youtube.com/watch?v=G0T_2NNoC68
• For further details on this model for the brain, study Parenting from the Inside Out by Daniel J. Siegel, MD & Mary Hartzell, New York: Jeremy P. Tarcher/Putnam, 2003, p. 171 - 183.
4. **Reflection.**
   Ask students:
   - "Do you sometimes flip your lid or have you ever been with someone who flipped their lid?" Invite students to share (no names). "What did that look like?" "Feel like?"
   - "When you are really upset, have you ever done something and later thought, 'Why did I do that?' or 'I really wish I hadn't done that!' or 'What in the world was I thinking when I did that?'" (Allow some thought about why that might happen if the pre-frontal cortex is not working at that time.)
   - Explain, when you are "flipped" (hand with fingers straight), you can’t learn very well either. It really helps to calm back down so that you can solve problems.

5. **A little more brain science: Mirror neurons.**
   Our brains are built so that we learn by copying. When you see someone yawn do you notice that sometimes you feel like yawning? Even babies copy what they see. Our brains also mirror feelings. When we are with other people who are sad, we can feel their sadness. The nerves (neurons) that do this are called mirror neurons.
   - Holding up one hand as a "flipped lid" ask students what might happen to someone near that person because of mirror neurons. (They are likely to flip their lid too.)
   - Holding both hands in the "flipped lid" positions, ask students what might happen if two people approach each other like this. (They might get into a fight.)
   - What might students need to do to find their thinking brains and solve their problem? (Move away, calm down, unflip their lids).

6. **Exploring self-regulation.**
   - Invite the students to share what they have found helpful to calm or re-gather themselves. Make a list of some of the tools.

7. **Designing a space.**
   - Explain that sometimes it is helpful in a classroom to have a place to calm down, to sort out feelings and to re-gather. This is not a place where students go as a punishment, but a place to calm down until the student feels better.
   - Either as a class or in small groups, invite students to brainstorm what kind of calming-down place could be created in the classroom. Ask them to think of some possible names for the area. (Common names include: the alone zone, Hawaii, Antarctica, the chill spot, calming quarter.)
   - Make a list of the ideas from the class (or from different groups). Invite students to think about the list for a day.
8. **Deciding on the space and setting up agreements.** The next day, as a class:
- Pick ideas from the list that are doable and practical for making a time out area.
- Establish a plan for how it will be created.
- Vote on or choose a name for the area.
- Decide if any guidelines are needed about using this calming down place. If the students suggest guidelines, have them select 3 or 4 from the list that can be made into a poster as a reminder.

**Tips:**

- It can be helpful to post a list of things that are useful when you or someone else has a "flipped lid." When I have a "flipped lid" I could: Take 3 slow deep breaths, go to our cool-down zone, put my head down for 30 seconds, etc. When a friend has a flipped lid, I could: Not take it personally, invite them to breathe deeply, give them space, etc.

- Some teachers are worried students will go to the cool-down spot just to play or to avoid doing their work. If this is one of your concerns bring it up as students are setting the guidelines. It is better to ask instead of tell. For example, "Do you think that this will be a space to use to play?" "What would happen if you use the space during work time? When would you get your work done?" When a problem develops, it is a great opportunity to review guidelines and focus on solutions. Let the class share how they feel about the space being used this way, as well as their ideas for correcting the problem. When only one student is consistently misusing the space, consider individual problem solving.

- A frequent question from teachers is, "What happens when the student won't go to the cool down spot?" One reason students refuse to go is that they associate going to "time out" with being bad, or being punished. Another reason is that when someone has "flipped" they are not totally in their thinking brain. Some strategies that have worked for others are:
  - Offer a choice."_____ , you seem upset. Do you think you can cool down at your desk, or would it be helpful to go to the cool-down spot?"
  - Offer an ear."_____ , I can tell you are upset I'd be glad to listen to what is going on for you after I ____________ . Do you want to wait at your desk or would it be more helpful to go to the cool down spot?"

- Some teams of teachers invite students to use the calming down space in the other classroom, so that they are not as near the incident or people that were the trigger. It is best to do this only in extreme situations. When students are able to stay in the same room they:
  - Miss less class
  - Do not risk being embarrassed by having to leave class or show up in another class
  - Students see how peers can transition from feeling upset to becoming self-regulated.

"The Brain in the Palm of the Hand" is the work of Daniel J. Siegel, M.D., first published in his book, Parenting from the Inside Out (2003) and more recently published in The Whole-Brain Child (2011). Dr. Siegel is not associated and/or affiliated with, and does not endorse and/or sponsor the Positive Discipline Association and/or its activities.
WORKING WITH STUDENTS EXPOSED TO TRAUMA
WHAT TRAUMA CAN LOOK LIKE
IN THE CLASSROOM (AND SCHOOL)
ADAPTED FROM: HELPING TRAUMATIZED CHILDREN LEARN

CHILDREN EXPOSED TO TRAUMA STRUGGLE TO:
- Accurately perceive-safety (over perceive danger)
- Self-regulate (attention, behavior, emotion)
- Hold a self image that includes the belief that they matter
- Succeed academically and or socially at school

TRAUMA MAY:
- Disrupt the ability to process verbal information and use language to communicate. (May make it difficult to follow instructions.)
- Be less skilled in using language to forge social relationships and more skilled using language to build walls between themselves and those perceived to be dangerous or threatening.
- Have limited problem solving skills.
- Struggle with sequential ordering and therefore not be able to organize (thoughts, feelings, if-then events, multi-step tasks) which in turn results in difficulty reading, writing and with critical thinking. Interfere with a student’s understanding of behavior and consequences.
- Not have internalized cause and effect relationships. This means that they cannot easily predict events, sense their power over events or make meaning of “consequences.”
- Struggle to see the world from the point of view of another.
- Struggle to focus and attend to what is happening in the classroom because their brains are preoccupied with ensuring safety/warding off danger.
- Struggle to self regulate their own attention.
- Struggle to self regulate and recognize emotions. This results in poor impulse control, trouble reading social cues, and lack of a predictable sense of self. (Self regulation is a predictor of academic success)
- Have low executive functions.
- Be slow to trust adults or peers
- Struggle to engage with academic material effectively

"Students often exhibit behaviors that are a result of trauma but that can be misinterpreted by a teacher as willful disobedience, or that the child has greater controls over his/her behavior than he/she does. Potentially further complicating interpretation of behavior are cultural factors which may be difficult for the teacher to identify and understand."

-Teachers' Strategies Guide for Working with Children Exposed to Trauma

Jody McVittie, MD
www.SoundDiscipline.org
Our brains are hard wired to keep us safe and are continually monitoring the environment for safety (out of our awareness). Children who did not have secure attachments and/or have experienced a significant threat (trauma) devote much more of their brain energy toward ensuring safety. They tend to overreact to stimuli (which are misperceived as threats) and struggle to self regulate, modulate their attention, and/or be able to complete academic tasks.

**YOU MIGHT SEE:**
- Inability to focus
- Deep withdrawal
- Very wary, suspicious, not trusting
- Apparently random body movements (getting out of seat) and blurt out
- Lack of impulse control
- Inability to sit still
- Repetitive behaviors
- Appear anxious (twirls hair, sucks thumb)
- Clingy/Needy
- Lack of boundaries (hugging strangers)
- Over-reaction to peer movements
- Extremely acute awareness of any negative body language
- Misinterpretation of events, where the child feels that their actions caused the problem
- Explosive behavior that does not have clear cause
- Trouble with transitions
- Trouble with any change in schedule
- Pains, body complaints, nurse visits Aggressive (physical/emotional/verbal)
- Avoidant behavior (not coming/refusing to participate or go places)

**YOU MIGHT TRY:**
- Taking time to teach routines
- Posting schedules
- Practice transitions
- Pay attention to which parts of transitions are hard for the student and work together to create solutions. (Non verbal signals, advance warning etc.)
- Lead classroom respectfully (Kind and Firm)
- Establish clear agreements about classroom behavior with your students. Teach the students how to follow them by regularly checking in with them about how they are doing and asking them to silently make improvements. ("How are we doing on our agreement to have quiet during reading? Thumbs up/sideways/down. Take a breath and notice if there is one thing you can quietly do to make it better. Please do it. Thank you")
- Warning the student of potential "surprises" including fire drills, guests, substitutes, schedule changes, new seating arrangements
- Connecting with the student each day in a similar fashion
- Small connection rituals (hand shake/high five)
- Give the student control where possible. (I’m changing the seating chart, do you have a place in the classroom that feels best for you?)
- Whole class activities involving patterns of motion
  - (Regular motion/rhythm/music helps re-establish helpful connections in the lower brain.)
- Keep your mood relatively stable. If you are having a bad day explain why to the students (or they may think you are mad at them)

**THINGS TO AVOID:**
- Inconsistency, irregular behavior
- Allowing bullying, name calling
- Requiring students to present from the front/read aloud to all.
- Punishments or threats
- Angry outbursts in class
- Surprises (even "good" ones)
- Not keeping promises or appointments
- Not following through

**CONSIDER THE CONTEXT:**
- What do you know about this student's family?
- What do you know about this student's history at school?
- What do you know about his/her culture? (Unspoken rules about eye contact, personal space, gender roles, role of the individual vs. group)
Self-regulation is a learned behavior: early in life our brains grow neural pathways that allow us to self-regulate when we are with others who self-regulate with us. In the absence of adults who can teach us to self-regulate that part of the brain does not develop fully. Self-regulation can be learned later in life but it requires a lot of practice. The ability to self-regulate is a better predictor of success than academic achievement. To be able to self-regulate students must be able to recognize feelings in themselves and others, be able to connect those to their experience (and awareness of physical sensations.)

**YOU MIGHT SEE:**
- Over reactivity, hyper-sensitivity
- Aggressive/loud behavior
- Physical acting out
- Anticipatory aggression
- Tantrums
- Destruction
- Lack of impulse control
- Inability to sit still
- Sudden mood swings
- Dissociation/spacing out
- Irritability
- Belligerent, confrontational
- Picking fights
- Blaming
- Teasing, taunting, bullying
- Explosive behavior that does not have clear cause
- Trouble with transitions
- Pains, body complaints, nurse visits
- Aggressive (physical/emotional/verbal)
- Avoidant behavior (not coming/refusing to participate or go places)

**YOU MIGHT TRY:**
- Keep your mood relatively stable. If you are having a bad day explain why to the students (or they may think you are mad at them)
- Teach short self-regulation tools regularly. These can include deep breaths, 10 second quiet moments for reflection, listening until the chime is silent, BrainGym activities, activities that require awareness of the body in space (Moving and then asking students to close their eyes and guess something about their body like which foot is further ahead, which elbow is higher, is an example)
- Teach emotional awareness. Examples include feeling faces charts, vocabulary work to distinguish feelings, journaling, regular emotion check-ins using a consistent format.
- Lead classroom respectfully (Kind and Firm)
- Establish clear agreements about classroom behavior with your students. Teach the students how to follow them by regularly checking in with them about how they are doing and asking them to silently make improvements. (“How are we doing on our agreement to have quiet during reading? Thumbs up/sideways/down. Take a breath and notice if there is one thing you can quietly do to make it better. Please do it. Thank you”)
- Warning the student of potential "surprises" including fire drills, guests, substitutes, schedule changes, new seating arrangements.
- Connecting with the student. "It seems like you feel...."
- Give the child control where possible. (I’m changing the seating chart, do you have a place in the classroom that feels best for you?)
- Whole class activities involving patterns of motion. (Regular motion/rhythm/music helps re-establish helpful connections in the lower brain.)

**THINGS TO AVOID:**
- Raising your voice
- Allowing bullying, name calling, outbursts
- Punishments, threats and put-downs
- Trivializing feelings/behavior

**CONSIDER THE CONTEXT:**
- What do you know about this student's family?
- What do you know about his/her culture? (Unspoken rules about eye contact, personal space, gender roles, role of the individual vs. group)
The belief that you matter to another human being is one of the most powerful foundations for resilience. Our beliefs about ourselves shape the way we interpret and respond to the world around us. You cannot talk a student out of their beliefs, however beliefs can change based on regular consistent behavior of the people around us. "The body changes its mind, one experience at a time." stimuli (which are misperceived as threats) and struggle to self regulate, modulate their attention, and/or be able to complete academic tasks.

YOU MIGHT SEE:
- Giving up
- Acting out when work feels hard or the student doesn't believe he/she can do it.
- Deep withdrawal
- Very wary, suspicious, not trusting
- Appear anxious (twirls hair, sucks thumb)
- Clingy/Needy
- Lack of boundaries (hugging strangers)
- Misinterpretation of events, where the child feels that their actions caused the problem
- Explosive behavior that does not have clear cause
- Trouble with transitions
- Trouble with any change in schedule
- Pains, body complaints, nurse visits
- Aggressive (physical/emotional/verbal)
- Avoidant behavior (not coming/refusing to participate or go places)

YOU MIGHT TRY:
- Encouragement
- Teach the class encouragement skills
- Have appreciation circles
- Notice strengths
- Small connections regularly 2x10 rule
- Writing post it notes — that are honest
- Learning about the student. What are his/her likes/dislikes?
- Not giving up
- Saying hello, using his/her name whenever you see him/her in the hall
- Teach to make amends
- Make amends
- Use solutions instead of consequences
- If you have to call home, call home after the problem has been fixed so parents are not put in a position that they do not know how to handle
- Get to know family
- Be the magic fairy mirror
- Continue to acknowledge student even when no longer in your class
- Let the student teach you and or class something that they are skilled at
- Share appreciations (in private or with post -it note is best)
- Use teacher tools to elevate student's academic and social status with peers

THINGS TO AVOID:
- Shaming, blaming, humiliating
- Embarrassing student
- Posting grades
- Displaying poor work as "bad example"
- Requiring students to present from the front/read aloud to all
- Punishments or threats
- Not keeping promises or appointments

CONSIDER THE CONTEXT:
- What do you know about this student's family?
- What do you know about this student's history at school?
- What do you know about his/her culture? (Unspoken rules about eye contact, personal space, gender roles, role of the individual vs. group)
When students misperceive safety, can’t self-regulate and/or don’t believe that they matter it is easy to understand why it is hard to succeed academically.

### YOU MIGHT SEE:
- Inability to focus
- Lots of excuses
- Attention getting behavior
- Disruptive behavior
- Acting out in front of peers
- Withdrawal
- Lots of absences/skipping class
- No class participation
- Inappropriate class participation
- No homework
- Low or absent organization skills
- Lack of supplies
- Sleeping in class
- Not working well alone or in group
- Not able to follow a series of instructions
- Frequent repetitive requests for help but without follow through
- Lack of ability to remember previous work/skills
- Lack of ability to make connections between linked concepts
- Making “creative” or inappropriate links between concepts.
- Shame and embarrassment with special help Refusal to accept special help.
- Claims of abilities that are not present (I can read this) Claims that work has been done and turned in. (You lost it.)
- Drug or alcohol use
- Gang involvement

### YOU MIGHT TRY:
- Assess ability to self-regulate/ perception of safety/self image.
- Assess student’s "prerequisite" skills. eg. Cannot succeed at algebra without number fluency.
- Develop system to augment "prerequisite" skills.
- Post schedule and homework where it is easily visible.
- Use written and verbal instructions (show the instructions on the white board and give them verbally)
- Help student set achievable goals for short term (week, every other week) learning and follow up.
- Help student notice successes. Differentiate instruction. Assist student in using other resources: including after school tutoring, local library tutoring,
- Problem solve with student
- Learn about the student’s life. Many older students are working or caring for siblings and school work cannot be a priority if the family is to survive.
- Ask your support team for help. What other interventions are available at your school. (Friendship groups, grief groups, social skills groups)
- Communicate regularly with family sharing successes as well as concerns.
- Support the student in creating systems that will be helpful (organizing notebooks, homework tracking)
- Empower instead of enable.
- Make agreements and follow through.
- Listen deeply. "What is your plan?"

### THINGS TO AVOID:
- Embarrassing/shaming/blaming student
- Not following through with student
- Threats
- Comparing with others
- Giving up on student
- Pointing out faults publicly

### CONSIDER THE CONTEXT:
- What do you know about this student's family?
- What do you know about this student's history at school?
- What are the families ideas/experiences/values around education?
- What constitutes "success" in this student’s family or culture?
- What do you know about his/her culture? (Unspoken rules about eye contact, personal space, gender roles, role of the individual vs. group)
THE PROBLEM IS A SOLUTION TO ANOTHER PROBLEM  
(Find the Belief Behind the Behavior)

STUDENTS EXPOSED TO TRAUMA MAY HAVE ALTERED BRAIN GROWTH:
  • They may be missing a sense of: Basic Trust
    ◦ Self-regulation
    ◦ Ability to delay gratification
    ◦ Causal thinking (poor if/then thinking)
    ◦ Ability to focus or concentrate
    ◦ Relationship skills
  • Often have altered stress response

MANY CHILDREN EXPOSED TO TRAUMA HAVE:
  • Decreased perception of safety (misperceive threats)
  • Poor impulse control
  • Decreased self regulation
  • Decreased self concept
  • Are withdrawn or aggressive
  • Struggle with transitions

REBUILDING THE FOUNDATION OF THESE SKILLS  
CREATES A STABLE PLATFORM FOR ACADEMIC GROWTH:

SAFETY
  • Routines
  • Consistency (of routines, mood of class leader)
  • Posted schedules
  • Solutions instead of consequences
  • Brain in the Palm of the Hand
  • Self-regulation

BELONGING
  • Connect before correct
  • 2x10 rule
  • Mirror neurons
  • I messages
  • Relationship/relationship/relationship

SIGNIFICANCE
  • Focus on strengths
  • Remember the student's story
  • Understanding the brain (teach mirror neurons, Brain in the Palm of the Hand)
  • “I made a mistake” vs. “I am a mistake”
  • Teaching repairs, how to make amends
  • Find way for student to contribute (jobs, helping)
Self Care

TECHNIQUES AND STRATEGIES

PHYSICAL FITNESS:
Stress is often manifested in muscle tension, particularly on the jaw, neck and back. Regular exercise releases tension, builds strength and aids in clarity.

NUTRITION AND HYDRATION:
When we are stressed we need good nutrition more than ever. When under stress avoid the empty calories and stimulants - drink lots of water losing just 2% of your body’s water results in feeling tired and weak.

SLEEP AND REST:
Adequate sleep is essential to well-being. Insufficient sleep affects intelligence, the immune system, irritability and cognitive function.

ASSERTIVENESS:
Asking for what we need and expressing our feelings helps establish healthy boundaries.

CENTERING & SOLITUDE:
Allow yourself time to push the “clear” or “reset” button.

CREATIVITY:
Engaging in creative activities that combine our hands, hearts and minds can be helpful and satisfying.

FUN & ENJOYMENT:
When we are having fun we are “in the joy” of life. Walks and meals with loved ones, dancing, going to movies, or hanging out with friends.

CREATE A PLAN FOR SELF CARE:
“By failing to prepare, you are preparing to to fail” Ben Franklin
TRAUMA THE PROFESSIONAL IMPACT OF VICARIOUS TRAUMA

JOB TASKS: Decrease in quality and quantity, lower motivation, increased mistakes.

MORALE: Loss of interests, dissatisfaction with assignments, negative attitudes, apathy, detachment, decrease in confidence.

INTERPERSONAL: Withdrawal from colleagues, poor communication, staff conflicts, blaming, and impatience.

BEHAVIORAL: Absenteeism, irritability, overworking, irresponsibility, tardiness, overworking, poor judgment, frequent threats to resign or quit, changes in routine, absent-mindedness, accident prone, self-destructive coping behaviors (food, money, gambling, shopping, drugs).

PHYSICAL: Loss of sleep, change in appetite, increase alcohol consumption, impaired immune system.

EMOTIONAL: Anxiety, guilt, irritability, anger, rage, depression, sadness. Loss of empathy, hopelessness, grief and emotional roller-coaster rides.

COGNITIVE: Lack of concentration, loss of focus, rigidity, self-doubt, perfectionism, difficulty making decisions.

RELATIONAL (INTERPERSONAL): Mistrust, withdrawal, intolerance, confusion and impaired thinking.

WORLD VIEW (SPIRITUAL): Work place frustration, sense of unfairness and lack of support, blaming and misplaced anger.