TRAUMA TOOLKIT

TOOLS TO SUPPORT THE LEARNING & DEVELOPMENT OF STUDENTS EXPERIENCING CHILDHOOD & ADOLESCENT TRAUMA

In partnership with MARYLAND STATE EDUCATION ASSOCIATION
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INTRODUCTION

As educators, we want our students to be happy, healthy, and prepared to reach their highest potential. These aspirations are most often possible when children have environments that provide safety, support, love, and nurturing. Unfortunately, this is far from reality for almost half of the children in the United States – about 35 million – who have experienced one or more types of trauma.¹

As educators, we may notice unhealthy or concerning student behaviors in the children we serve. Understanding the source of this behavior, recognizing that this behavior may be symptomatic of trauma, and then knowing how to support student learning when trauma is a factor, is far less obvious.

This toolkit, created by First Book and funded by the Maryland State Education Association (MSEA), is designed to provide an overview of the causes and symptoms of trauma, offer insight on frequently asked questions, and provide actionable steps educators and caring adults can take to support student learning and development.

In this toolkit, educators will:

> Learn about the most common sources of childhood trauma
> Learn how trauma affects learning, and how it manifests in students
> Receive tools and techniques to help students manage their social & emotional behavior
> Learn how to gain additional support from your community, student caregivers, and MSEA
> Learn about the importance of self-care, and how to handle compassion fatigue

Childhood trauma is a broad topic, and there are many organizations that focus on it exclusively. The ideas presented in this toolkit are the result of a broad review of books, published papers, and other resources focused on adolescent and childhood trauma and how it impacts students in the classroom and in after school program settings. This toolkit was designed to save educators time by culling together and highlighting the most salient and actionable resources from across this literature review, using First Book member feedback as the starting point for this work. The FAQs included in this toolkit were developed in direct response to MSEA member questions about how to support children who have or are currently experiencing trauma; however, are relevant to educators nationwide who are supporting children experiencing trying times and situations.

This reference tool for educators was designed to work in conjunction with First Book’s Healthy Feelings and Relationships collections of books and free reading guides. Available through the First Book Marketplace (www.fbmmarketplace.org/healthy-feelings-relationships), these reading guides help educators teach social and emotional learning to Pre-K – 7th graders using picture books and graphic novels. These book-and-resource pairs were developed in partnership with the MSEA, Molina Healthcare, and CASEL (Collaborative for Academic, Social, and Emotional Learning) to help kids understand and articulate their feelings and better manage their resulting behavior, with special consideration and guidance for supporting children who have or are currently experiencing trauma.

We recognize that schools and individual educators cannot do this work alone. There are policy decisions that need to be made and implemented to better support you and the children you serve. This toolkit does not focus on the policy aspect, but will offer resources in the appendix should you want to further engage your community or your local and state leaders on this topic.

With the help of educators like you, traumatized children can flourish despite overwhelmingly difficult experiences. Doing so, however, requires the support of everyone – educators, school leaders, support staff, parents, and children – to recognize and respond to the effects of childhood trauma and the impact it can have on learning and behavior.² First Book and MSEA hope this resource, coupled with the Healthy Feelings and Relationships collections, proves to be a helpful starting point to supporting you as you support the children you serve and set them up for success in their education and beyond.

THE DATA

Research has shown that social and emotional learning (SEL) strongly impacts children’s academic success. As early as their first years in school, children’s emotional and behavioral competence is a critical predictor of their future academic performance – even more so than their cognitive skills or their family background.

Why? Children who have less-developed SEL skills and who behave in anti-social ways are less likely to participate in their classroom environment, which often makes it challenging for them to be embraced by their classmates, and sometimes school staff. This lack of acceptance and integration greatly affects children’s academic progress, particularly in their early childhood and early elementary school years.

On the other hand, children who have more developed SEL skills, and can regulate their emotions despite having a disadvantaged background or having experienced trauma, perform better in school.3 One of the major challenges in supporting children’s SEL, especially for those who have experienced trauma, is identifying them in the first place. Although research shows the benefits of early intervention and treatment, many young children and parents do not receive evaluation or support in the areas of behavioral, social, emotional or mental health.4

Less than 1% of young children with emotional behavioral problems are identified.

Nearly 55% of family practitioners and pediatricians report that they did not use a standardized tool to screen for developmental delays during well-child visits for two-year-olds.

Even in structured early learning settings such as Head Start, 80% of parents needing mental health services did not receive them.

80% of primary care physicians & 96% of pediatricians do not formally screen for maternal depression in spite of its proven impact on caring for young children.

Between 80 – 97% of children ages 3 – 5 with identified behavioral health needs did not receive services.

Behavioral problems among young children are often predictive of later conduct problems, antisocial behaviors, delinquency, and serious mental health problems.

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Trauma is pervasive. Studies estimate between 3.3 million and 10 million children in the U.S. witness violence in their own homes each year. In a recent study done in Massachusetts, 90% of students evaluated said they experienced at least one type of trauma.\(^5\)

**WHAT IS TRAUMA?**

Experts explain that trauma is not an event itself, but instead a response to a stressful situation in which a person’s ability to cope is dramatically undermined.\(^6\) For children, trauma occurs when a child experiences an event that causes actual harm or poses a serious threat to his or her emotional and physical well-being.\(^7\)

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<thead>
<tr>
<th>The types of trauma a child can experience include:  (^8)</th>
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<td>Community Violence</td>
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<td>Refugee Experience</td>
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<td>Early Childhood Trauma</td>
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Traumatized children can enter your class believing that the world is a scary, threatening place.

There is no one-size-fits-all approach to supporting children who experience trauma. The symptoms and behaviors that children display can be as varied as the traumatic events they experience. There are, however, four key factors to supporting kids in trauma:

<table>
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<th>The key things children experiencing trauma need are:</th>
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<td>1. Safety</td>
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<td>2. Caring adults / positive relationships</td>
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<td>3. A feeling of accomplishment and/or success</td>
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<td>4. Choices and options in daily tasks, like assignments, that help develop their sense of agency and control over their lives.</td>
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\(^6\) Ibid, 18

\(^7\) Bartlett, J., Smith, S., and Bringewatt, E., (2017) *Helping Young Children Who Have Experienced Trauma: Policies and Strategies for Early Care Education.* p. 4

**Trauma In The Home**

Recent research has shown that victimization in the home is the most prevalent form of trauma among children treated by mental health professionals.\(^9\) Childhood trauma from exposure to family violence can manifest as:

- Diminished concentration and memory
- Decreased organizational and language abilities
- Inappropriate behavior
- Depression and/or anxiety
- Perfectionism
- Self-destructive behavior
- Suicidal behavior\(^{10}\)

![A traumatized child's most challenging behavior often originates in immense feelings of vulnerability.](image)

When a child’s source of trauma is their caregiver – someone they trust and on whom their life depends – the consequences a child experiences can be devastating.\(^{12}\) Because traumatized children see the world through a lens of fear and uncertainty, they are often on constant alert for danger. They are unable to take off their “trauma glasses” as they go between home and school – from a dangerous to a safe place.

A traumatized child’s most challenging behavior often originates in immense feelings of vulnerability. These feelings can translate into behaviors that interfere with learning and building relationships and can often sabotage their ability to hear and understand a teacher’s positive messages. Additionally, a child’s ability to perform well academically and to behave appropriately is also affected. Studies show abused children have more academic problems and are more likely to receive special education services, have below-grade level test scores, poor work habits, and are 2.5 times more likely to fail a grade.\(^{13}\) The reality that family violence is often kept a secret makes it even more difficult for educators to identify the root cause of student behavioral and learning problems.

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\(^{10}\) Ibid

\(^{11}\) Ibid, 33

\(^{12}\) Ibid, 2

\(^{13}\) Ibid, 4 - 5
The Symptoms of Trauma & How it Affects Learning

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<th>Major symptoms of trauma: (^\text{14})</th>
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<td><strong>COGNITIVE DELAYS</strong></td>
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<td>A delay in normal brain development process.</td>
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**MAJOR SYMPTOMS OF TRAUMA INCLUDE:**

**Cognitive delays.** Children and adolescents who experience developmental trauma or traumatic experiences often experience a delay in their normal brain development process. Examples of this include difficulty concentrating or paying attention, increased frustration with difficult tasks, noncompliance with directions, and challenges with executive function – especially planning and problem solving.

**Inability to process relationships and emotions.** For example, students may have difficulty forming or maintaining relationships, reading social cues, and trusting others.

**Inability to predict and make inferences.** Traumatized children often have no understanding of cause and effect. Because of this, they can have difficulty understanding that they can influence what happens to them.

Because of a lack of understanding of cause and effect, children often experience an impaired development of things like: \(^\text{15}\)

- Goal setting
- Delayed gratification
- Motivation and persistence
- Receptiveness to behavior management techniques

**Wariness of the future.** When children live in environments where they can’t make connections between their actions and the responses they trigger, the future can feel unpredictable and out of their control. This may lead some children to become extremely passive. This can look like a student “checking out” because they believe they have a low impact on the world.


THE CYCLE OF TRAUMATIC RESPONSES

WHAT USUALLY HAPPENS

In this scenario, a student suffers a traumatic experience, has a trigger event or memory and then copes the best way they know how. Often their coping skills are inadequate and ineffective. In response to these memories or events some students may become aggressive, isolate themselves, or even scream. Most often, adults observe the student trying to cope in a negative light. The adult’s reaction, and sometimes the consequence, confirms the student’s beliefs (e.g. I am not lovable, worthy, good, etc.) and the cycle continues without the student receiving help or healing from their experience.

A TRAUMA-INFORMED RESPONSE

In a trauma-informed scenario, the same student suffers a traumatic experience, has a trigger event or memory, and then copes the best way they know how. The adult recognizes the student’s behavior as a symptom of trauma, and takes a trauma-informed approach by getting support for the student. With the aid of a school social worker, guidance counselor, therapist or other professional, the student begins to get help. Over time, the student learns to cope and eventually heal from their traumatic experience.
# TOP 8 QUESTIONS ANSWERED: HOW EDUCATORS CAN SUPPORT CHILDREN EXPERIENCING TRAUMA

The FAQs included in this toolkit were developed in direct response to MSEA member questions about how to support children who have or are currently experiencing trauma; however, are relevant to educators nationwide who are supporting children experiencing trying times and situations.

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WHAT THE RESEARCH SAYS

Students who have experienced trauma have a primary need to feel safe. When someone is threatened, or perceives a threat, they will have a fight, flight, or freeze response. Children who have experienced trauma may perceive threats when others do not. This can trigger them to have the same fight, flight, or freeze response in situations that are not dangerous, but because of trauma, the child perceives it as so. Creating a safe environment and reassuring students that they are out of harm’s way is essential to helping them learn both academic and social and emotional skills.

Students who experience trauma often suffer from low self-esteem and low self-image. Having these students experience success is essential to helping them develop confidence and a sense of agency (meaning they realize that they can influence what happens in their lives). They need to know that they are good at something and that they are valuable.

Having positive relationships with peers and adults is also critical to the success of traumatized students. Children experiencing trauma may suffer delays in the development of age appropriate social skills, and may not know how to initiate and cultivate healthy relationships. Traumatized children who take a “strike first” approach to others to shield their vulnerability may unknowingly frighten their peers, thus isolating themselves further from healthy relationships.

EDUCATOR OBJECTIVE:
Create a safe space and nurture healthy relationships for students.
How do I help my students if they are below their age appropriate developmental level for social & emotional learning?

1. **Create a safe classroom environment.** Incorporating consistent routines and rituals in the classroom helps students experience predictability and security. Take a zero-tolerance stance on bullying, teasing, and other behaviors that make children feel unsafe or threatened.

2. **Help students identify an area of competence.** Whether it is an academic subject, extracurricular activity, or other creative outlet, helping students identify an area where they feel successful is important to their healing and development.

3. **Support positive relationship development with students.** Students experiencing trauma greatly benefit from having strong, positive relationships with adults and peers.

PUT IT INTO ACTION

Create a classroom, grade level, or school-wide bulletin board or display that celebrates what students do well.

- Have students identify one thing they do well. Allow this exercise to include a broad range of potential talents or skills. Provide students with examples to help stimulate their thinking (speaking a second language, reading, taking care of my little brother, helping my mom, being a good friend, etc.).

- Have students write their identified talent or skill on whatever object you will use to create the bulletin board or display. Allow students the option to keep their skill anonymous by choosing whether or not to include their name.

- Create the display in an obvious location and talk about the many competencies your students bring with them to class.

- Keep an eye out for any student who has a difficult time identifying one thing they do well. This could be a signal that this student needs more positive and caring relationships with adults and peers.
WHAT THE RESEARCH SAYS

Emotions can be intense for everyone, including adults. Children are much more likely to know how to handle intense or overwhelming emotions when they have had caregivers who have helped them manage their emotions. Whether it was being rocked during a scary storm or having their back rubbed after losing a game, this type of caregiver-child interaction helps a child develop the skills to manage their own emotions in an age appropriate way.

Children who react strongly to trigger events or reminders of traumatic experiences often have yet to develop the ability to manage their emotions. Therefore, they respond in the best way they know how, which can look like inadequate coping skills or skills below their age level.

### Examples of such responses can include:

- Emotional shut down or overcontrol (e.g. avoidance, daydreaming, isolation)
- Behavioral or physical expressions (e.g. jumping, running, aggression, sexualized behavior)
- External outlets (e.g. substance abuse, eating disorders, self-harm)

Often children who have experienced trauma feel at the mercy of their emotions, which they experience as overwhelming, unpredictable, and powerful. It is important to realize that children are trying their best to manage their emotions with the skills they know.

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**EDUCATOR OBJECTIVE:**
Help kids identify their emotions as a first step toward getting calm and centered.

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17 Ibid
How do I help my students center and calm themselves after experiencing a trigger event?

1. **Help students learn to identify their feelings.** The ability to recognize and name emotions and feelings is critical to the social and emotional development of all students, including those who have experienced trauma. Children and young people who have experienced trauma are frequently disconnected from, or unaware of, their own emotional experience. This makes it difficult for them to read the cues of others, and understand their own experience.

2. **Help build a connection between their identified emotion and their internal and external experiences.** To help a student calm down after a trigger experience, it is important that they connect the feeling they have to their thoughts, behavior, and body sensations, as well as external (what’s happening in their immediate environment) and internal factors (e.g. are they hungry, sleepy, etc.).

3. **Help students determine what will help them manage their emotions.** This can take the form of breathing exercises, using imagery (e.g. think of a safe character in a story, and imagine that they are with you now), using tactile tools (clay, stress balls, coloring, etc.), and more.

Make “Take 5” breathing a regular part of your classroom routine. To practice, the teacher or group leader counts out loud to five while everyone gently breathes in through their noses, if possible. Then count to five again while everyone breathes out, also through the nose. Pre-K and early elementary students should do the same practice with a shorter count, such as three, as their lungs are smaller and they cannot comfortably inhale and exhale for as long as older students. This simple breath stimulates the parasympathetic nervous system, which activates the body’s relaxation response. It is often taught to children to help them calm down when they feel upset. By practicing this breath for a few minutes each day, students can become comfortable using it when facing a potentially triggering experience.
WHAT THE RESEARCH SAYS

Students who experience trauma may exhibit a variety of behaviors that distract them from instruction. The stress of being in a near constant “fight, flight, or freeze” state leaves little room for learning. However, this can be supported, and ultimately students can learn.

The ability to manage one’s emotions is directly related to the concept of self-regulation. This means that students have the ability to become aware of their feelings, notice how feelings influence and affect their bodies (e.g. my heart starts racing when I feel stressed), and independently apply self-soothing or self-regulating techniques to change their emotional state.

In a healthy scenario, a student might naturally become frustrated when time is up on a test and they’ve yet to finish. The student is able to recognize their feelings of frustration and perhaps anxiety, take a few deep breaths (or another self-regulating action that helps them), and calmly put their pencil down.

The ability to self-regulate is a key skill that many students who experience trauma have not adequately developed. Children who are unable to regulate their internal systems have a limited ability to understand and find healthy ways to express what they are feeling. Students who have poorly developed self-regulation skills can often demonstrate many behaviors that prevent them from learning – as physical activity like running or jumping, withdrawing (daydreaming or shutting down), and even self-harm.

EDUCATOR OBJECTIVE:
Use exercises that highlight the mind-body connection to help kids manage their emotions.
How do I help students cope with their emotions daily in class?

1. **Help students recognize how their emotions affect their bodies.** When students can connect emotions with bodily sensations, they can begin to recognize what they are feeling in the moment and how those feelings are connected to their behaviors. An example of this awareness could be, “When I get angry my cheeks get hot, and then I curl my hands into fists. Sometimes I hit things.” When young people can notice and become aware of their own responses to emotions, they can take steps to manage their responses.

2. **Give students tools to change their state of mind.** The body and mind are connected. Students can use simple physical actions as tools to change their mindset; for example, a fun activity such as a 60-second dance party, or a more individualized activity, such as deep breathing. Keep in mind that not all activities will be effective for every student, so be sure to frame activities as experiments so students can find what works best for them. Invite students to be a part of determining whether or not they feel different, better, calmer, etc., after the exercise.

3. **Practice mind-body activities when students are calm.** It’s important to introduce and practice the techniques above when students are calm. Giving students a variety of coping skills in advance will give them a number of strategies to draw from when they experience a trigger or reminder.

Create a safe space in your school or classroom that students can visit when they need to calm down and process their emotions. Sometimes the memory or reality of something is so overwhelming that a student will need to get away. You may choose to include stress balls, clay (for smashing), coloring sheets and colored pencils, a blanket, paper for journaling, or other items that will help students feel comfortable in the space. Involve students in creating the safe space. Suggested questions to discuss are:

- What should the safe space be named?
- What should be included in the safe space?
- Where should we locate our safe space?
What do I do if my student is having a meltdown?

WHAT THE RESEARCH SAYS

Imagine this scenario:

You ask a student to put her pencil down, and she doesn't do it. You ask again and she continues to refuse. You ask a third time, and warn of a consequence, and suddenly she explodes. It is a scene with which most educators are very familiar.

Whether it takes the form of aggression, shutting down, self-harm, or screaming, your seemingly simple request to follow a direction has resulted in a meltdown – an uncontrollable response to an unknown trigger or memory. In this scenario, a student’s overreaction to your request is usually not about your request at all. Instead, something about it triggered a memory that was too much to handle. Perhaps it was tone, proximity, facial expression, or even an internal factor (e.g. she is hungry). Either way, your student wasn’t able to effectively process your request, and she responded as though she were in a high-alert situation.

Often, children who are experiencing trauma live in a state of constant vigilance. With all of their energy focused on identifying threats, they remain in fight, flight, or freeze mode and have an underdeveloped ability to distinguish real versus imagined threats. Everything, and sometimes everyone, is potentially threatening. Students who have meltdowns need help learning how to identify real threats versus imagined threats so that they can respond accordingly.

EDUCATOR OBJECTIVE:
Help students learn self-regulation strategies to help them calm down during a trigger experience.
What do I do if my student is having a meltdown?

1. **Refer your student to the school counselor for support.** Healing from a traumatic experience is a process. While you can take supportive steps in the classroom, the support of a school counselor and/or a professional therapist will be invaluable to students who display signs of trauma in helping them develop key skills that will support them throughout life.

2. **Create a culture of safety and understanding in your classroom.** When students become accustomed to regularly naming and discussing their emotions, physical feelings, and behaviors, they will be better at articulating what they need to relax and feel safe.

3. **Model effective calming techniques.** One of the most effective ways to help young people regulate their emotions is to co-regulate with them. This means that you do the calming exercise along with them, rather than simply instructing it. For example, instead of telling your student to take deep breaths, take the deep breaths along with them. If a student needs to “shake off” the bad mood, shake it off with them. Remember, students who experience trauma are often not learning healthy coping skills. By co-regulating with them, you are modeling skills that can help students learn how to better manage future trigger moments.

**Key Strategies**

**What do I do if my student is having a meltdown?**

- The 5-4-3-2-1 coping technique is often used by therapists to help traumatized individuals connect to the present moment through their senses in times of acute stress. Ask the student to:
  - Name 5 things you see in the room.
  - Name 4 things you can feel (“my feet on the floor” or “the air in my nose”).
  - Name 3 things you hear right now (“traffic outside”).
  - Name 2 things you can smell right now (or 2 smells you like).
  - Name 1 good thing about yourself.

It is important to know that the activities offered in this guide may help students experiencing trauma if they are practiced regularly over time by all students in the group (not only the traumatized individual). It is through developing a culture in which feelings are regularly discussed, calming techniques are regularly practiced, and successes are celebrated, that traumatized students may be able to heal to some degree. Be patient. Healing is a slow process and consistency is key.

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WHAT THE RESEARCH SAYS

It is hard to imagine the challenges many students face each day, particularly when children are navigating issues that are challenging even for adults. Extreme violence, poverty, family instability, immigration fears, and more can keep young people from experiencing the joys of childhood. These experiences are shocking, jarring, and often overwhelming to process. It is important to invite a trained professional to offer counseling to students and families experiencing trauma.

EDUCATOR OBJECTIVE: Notice changes in student behavior and work with a guidance counselor or school social worker to bring in additional support.

1. **Be alert to changes in student behavior.** If you notice a major change in a student’s behavior, approach them about it and listen more than you talk. Traumas experienced within the home are often kept secret, and therefore students often do not receive the support they need. If you learn of any abuse, report it immediately.

2. **Be supportive.** When the world feels out of control, young people need to know that there is someone they can count on – someone who cares, who loves them, and who will support and help them. This isn’t always a child’s primary caregiver. It could be their educator, a neighbor, or another family member. Every child needs at least one adult they can rely on and trust.

3. **Maintain high expectations.** It sounds counterintuitive – if a student has experienced a traumatic event, it may feel natural to say, “You don’t have to do this week’s homework,” or “You don’t have to take the test.” Despite this coming from a place of love and compassion, lowering expectations for children experiencing trauma can validate feelings of inadequacy and unworthiness. Instead, let students know that they will need to complete all assignments, that you still expect great things from them, and that you will work with them to get the support they need.
How can I support a child who is experiencing severe trauma?

In trauma-inducing situations, children experience helplessness and a lack of control. Any further feelings of perceived helplessness can become triggering for those children. Wherever possible, try to implement choice in your classroom in order to offer a greater sense of agency to all students, including those affected by trauma.

The “Healthy Feelings and Relationships for 4th-7th Grades” collection, available on the First Book Marketplace (bit.ly/HFR4-7), comes with reading guides that include examples of how to use choice in the classroom. These activities may help you better understand how to offer choices to trauma-affected students, without singling them out individually.
When do I connect my student with a social worker, school counselor, or other professional for support?

WHAT THE RESEARCH SAYS

Living day-to-day with a traumatic experience can be stressful, scary, and exhausting. Students who have this ongoing experience need the help of professionally trained therapists, counselors, and others who can help them heal and develop healthy coping skills.

The earlier you can connect students with the support they need, the better chance they have at recovery. Having a traumatic experience doesn’t mean that one’s life possibilities or potential is lost, or that there is no hope. Research shows that it is absolutely possible to recover from trauma with the right support.

It can be difficult to determine which student may be experiencing trauma. Some behaviors or “cries for help” are more overt and aggressive than others. It can be easy to miss the students who withdraw and isolate themselves.

KEY STRATEGIES

1. **Make sure that each student in your class has a strong relationship with at least 2 - 3 adults in your school or program.** Students who may be experiencing severe family instability, abuse, or other trauma can be hard to identify since these experiences are often kept a secret. Do what you can to ensure that all students have at least two caring adult relationships in the building.

2. **Build strong relationships with your students’ caregivers.** Trust is critical for communicating openly about trauma. Parents and guardians may be more willing to divulge personal struggles and challenges in a trusting relationship with an educator, thus opening the door for help.

3. **Build strong relationships with your school counselors, dean, social workers, and other support staff.** These professionals can help you learn more about recognizing signs of trauma and supporting students and parents in your school.
When do I connect my student with a social worker, school counselor, or other professional for support?

In your next staff meeting, talk to your colleagues about the importance of connecting individual children with caring adults in order to reduce the effects of trauma. Together as a group, take the time to assess whether you are connecting with all of the students in your class, school, etc.

- Print your class (or grade, or school) roster.
- Pass it around the group, and ask staff members to write their initials beside each student they feel they have a strong connection or relationship with.
- Develop an action plan for any student with less than three names to have more caring adult relationships so that no child is (or feels) invisible.
How do I help my students learn even while they experience or try to recover from trauma?

WHAT THE RESEARCH SAYS

There are many ways in which teachers can support students who are experiencing trauma. Be aware that some academic, social, and behavioral problems can be signs that a child is currently experiencing or has previously experienced trauma.

These signs can include:

- Failing to understand directions
- Overreacting to comments from teachers and peers
- Misreading context
- Failing to connect cause and effect
- Miscommunication
- Difficulty in modulating emotions and behaviors

Many of your existing competencies and skills as an educator will help you support students experiencing trauma. These include presenting information in a variety of ways for different learning styles, being consistent and organized, and forming positive relationships with students. Offering choice to students wherever possible in the classroom (such as whether to join a group discussion or write a journal entry instead) can help reduce feelings of helplessness, which can be triggering to traumatized students.

EDUCATOR OBJECTIVE:
Help students understand how their brains work so they can be aware of how they learn.

How do I help my students learn even while they experience or try to recover from trauma?

1. **Help children regulate their emotions in order to master social and academic skills.** Traumatized children often operate in an ongoing state of hyperarousal. Reminders of the trauma (a facial feature or expression, tone of voice, or other trigger) can lead to behaviors that are not appropriate for the classroom. It is important to recognize when children may be experiencing intense emotions, and then discuss appropriate supports and responses.

2. **Help students develop a sense of agency.** Offering choice to students wherever possible in the classroom (such as what book to read, how much to participate in a group discussion, how to use or not use their body in physical activities, etc.) can help reduce feelings of helplessness, which can be triggering to traumatized students.

3. **Avoid labels.** There are negative consequences to labeling a child “traumatized” or “abused” in a public setting, even among fellow educators and peers. These labels risk making trauma a part of the child’s internalized identity rather than a reaction to an experience that they are trying to heal from.

Understanding some very basic information about how the brain works can help students better understand their own behavior and the behavior of their peers. Adapt the following simple information about the brain to best suit the needs of your group.

One part of our brain (called the **amygdala**) is designed to keep us safe. It knows how to do three things: fight, flee, or freeze. Those are great things to know to do when we are facing danger! However, when our amygdala is in control, another part of our brain (called the **prefrontal cortex**) isn’t in control. The prefrontal cortex is the part of our brain that knows how to think, learn, and remember. Sometimes the amygdala thinks we are in danger when we actually are not. This triggering, or feeling like we are in danger, keeps us from being able to learn and remember new things. By knowing what calming techniques work for us and using them regularly (such as breathing deeply, talking about our feelings, or imagining a calm and peaceful place), we can help our brains work in a way that both keeps us safe when needed, and helps us to learn and remember new things.

“Hand Model of the Brain for KIDS” by Jeanette Yoffe is an online video that succinctly and entertainingly explains this information to young students. It can be found at [https://youtu.be/H_dxnYhdyuY](https://youtu.be/H_dxnYhdyuY).
WHAT THE RESEARCH SAYS

The ability to self-manage emotions in a healthy way is a learned process that begins in infancy. While a student’s ability to manage emotions will vary and evolve with age, key components of this skill include:

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<tr>
<th>While a student’s ability to manage emotions will vary and evolve with age, key components of this skill include:20</th>
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<tbody>
<tr>
<td>Some degree of awareness of one’s internal state, and the factors that influence it</td>
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<tr>
<td>The ability to tolerate and manage one’s responses to a range stimuli</td>
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<tr>
<td>Understanding of the connection between sensations, feelings, thoughts, and behaviors</td>
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<tr>
<td>The capacity to effectively communicate one’s experience to others</td>
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Gaining awareness of emotions and feelings is the starting point for helping students self-manage. Often, children who experience trauma will disconnect from their feelings or use unhealthy coping skills, neither of which are effective solutions.

Once students are able to name emotions, they can then work on connecting emotions to triggers, and distinguishing between real and false alarms. This ability to recognize a false alarm, paired with effective self-soothing techniques, will help students as they learn to manage their emotions.

How do I teach my students to self-manage their emotions?

1. **Discuss feelings as a class.** Regularly naming and talking about emotions and feelings helps all students, including those affected by trauma, to develop a rich vocabulary for communicating their experiences.

2. **Help students recognize physical sensations that may be signs of intense emotions.** The more awareness students have of their internal experiences, the more they will be able to manage their emotions.

3. **Provide options for students who recognize they are experiencing an intense or overwhelming feeling.** Students who have developed the awareness to understand when an outburst is coming on may be able to prevent it if they have a space they can go to and/or access to the resources they need to be able to calm themselves.

**KEY STRATEGIES**

Provide opportunities throughout the day for students to quietly notice thoughts and emotions and their accompanying physical sensations.

- Identify a time in the day when you can consistently dedicate five minutes to this practice.
- Ask students to write down on a piece of paper what emotion they are feeling most noticeably in the moment. You may choose to provide them with a word bank to choose from or a group of “feeling faces” expressing different emotions from which they could select.
- Next, ask students to write down any thoughts they notice accompanying that emotion. Allow students’ observations to be kept private, and tell them that no one will be reading what they write.
- Ask students to scan mentally through their body and notice any physical sensations they are feeling. Pay particular attention to the head, throat, shoulders, chest, and stomach. You may choose to provide students with an outline of a body on which they could note their feelings.

As students practice identifying their emotions and the accompanying feelings and physical sensations, they may begin to develop an awareness of how the mind affects the body and vice versa. You may want to build on this activity by regularly guiding students through a mindfulness practice known as the body scan. A script and a recorded guided version of this practice for children can be found at [www.mindful.org/body-scan-kids/](http://www.mindful.org/body-scan-kids/).
GETTING SUPPORT

From Your School Community

The school community is a key part of the support system for students experiencing trauma. As children spend much of their time in school, having the right resources, individuals, and practices in place can help them heal, and ultimately succeed academically, socially, and behaviorally.

This is most likely when the school community; from the crossing guard, bus driver, teachers, cafeteria staff, front office staff, nurse, administrators – everyone that interacts with a student – is able to develop a “trauma informed” perspective, and support students from this viewpoint.

Helping Traumatized Children Learn, a report and policy agenda from the Massachusetts Advocates for Children, recommends a “Flexible Framework” to help make school environments trauma-sensitive. The Framework includes steps for supporting students in schools. The following is a short list of the recommendations included in the report.21

- Train staff on the symptoms of trauma and provide strategies to help students cope and learn.
- Review school-wide infrastructure and culture, and identify ways to integrate trauma-sensitive practices into existing school operations.
- Develop relationships with local mental health providers, homeless and battered women’s shelters, the department of youth and family services, and other organizations that could support students and families.
- Review your instructional approach for teaching traumatized children.
- Identify non-academic strategies to support students who have experienced trauma.
- Ensure each student has strong relationships with 2 - 3 adults in your school/program.
- Review school policies (especially discipline) from a trauma-informed lens and make any adjustments in process or protocol.
- Develop a plan to engage parents and build strong relationships with caregivers.

From Parents & Guardians

DIRECT SUPPORT FOR PARENTS & GUARDIANS

While educators can do all that we can to support students when in our care, students must still go home to their parents and caregivers at the end of each school day. Research shows that children benefit when their parent’s emotional, physical, and mental needs are being met. When this happens, parents are in a better position to provide sensitive care to their child(ren). Healthy brain development requires protection

from excessive stress, not just enrichment in a stimulating environment. Achieving breakthrough outcomes for children experiencing significant adversity requires that we support the adults who care for them to transform their own lives.²²

Schools can create a positive relationship with parents by recognizing their strengths and values, and by encouraging them to be a part of their child’s education. Having empathy for parents who may feel marginalized, judged, or overwhelmed with their own challenges is a key part of developing a relationship. Parents who face adversity may focus all of their energy on securing safety, food, or shelter for themselves and their children, and may have little energy left for education, or other needs. For this reason, connecting parents to the right support (medical services, legal services, support from child welfare, social support, etc.) can positively influence the child’s experience and development.²³

HELPING PARENTS & GUARDIANS HELP THEIR CHILDREN

Parents and guardians can help their children through “co-regulation” — the ability to help their sons/daughters manage their emotions — together. So, instead of telling a child to calm down and take a deep breath, the parent/guardian should take a deep breath with the child and help them calm down.

Parents can also develop their “attunement” skills and recognize variations in their child’s emotions. How does their son look when he is upset, frustrated, or when his emotions are escalating? The parent can develop a list of cues that connect to their child and help them manage emotions as they arise. It is also important for parents to understand how their interaction with their children can agitate or calm their child’s emotions.

Achieving great outcomes for children experiencing adversity means offering support to the adults who care for them.

From Your Union

Your local or state union is a great resource to find professional development, trainings, and resources to help you support your students who may be experiencing trauma. Here are some specific resources from the Maryland State Education Association (MSEA):

- “Creating Community with Peace Circles” bit.ly/peacecircles
- “500 words on Restorative Practices” bit.ly/500wordsNovDec
- “Nurturing Resilience—Post-Traumatic Growth” bit.ly/nurturingPost

If you are a MSEA member, visit www.marylandeducators.org or email MSEA’s Center for Professional Learning at CPL@mseanea.org for upcoming training opportunities.

²² Center on the Developing Child at Harvard University (2016). From Best Practices to Breakthrough Impacts: A Science-Based Approach to Building a More Promising Future for Young Children and Families
Self-care & Compassion Fatigue

Working with children experiencing trauma and the challenges that they bring with them into the educational setting will take its toll on you over time. This is known as “compassion fatigue” or “secondary traumatic stress.”

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<th>Signs of compassion fatigue can include:</th>
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<tr>
<td>Feeling physically, mentally, or emotionally worn out</td>
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<tr>
<td>Feeling overwhelmed by students’ traumas</td>
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<tr>
<td>Increased irritability and impatience</td>
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<tr>
<td>Feeling numb or detached</td>
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<tr>
<td>Intense dreams, feelings, or intrusive thoughts about students’ traumas</td>
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It is of critical importance that all educators working with students afflicted by trauma know how to care for themselves and do so regularly. Some individuals struggle to make time for themselves in this way, because they have been conditioned to think of doing so as “selfish” or “wasteful.” One way to counter those feelings if you notice them in yourself may be to remember the oxygen mask analogy: On an airplane, passengers are instructed to put on their own oxygen mask in an emergency before assisting others. We simply cannot care for others without caring for ourselves first.

What is your self-care plan? You may find it helpful to speak to your school or program leader for support. Or, you can also brainstorm ways to find increased calm and decreased stress in your life. These can vary from person to person, and may include exercise or physical activity, prayer or meditation, spending time in nature, journaling, receiving a massage, or just having some quiet time to yourself. After you identify the self-care strategies that best serve you, create a plan for how you will implement those strategies in your life on a regular basis. Consider sharing your plan with a few trusted people (such as family members, close friends, or colleagues) who can help encourage you to stick with it.

Adults who have unresolved trauma in their past are even more vulnerable to compassion fatigue. It’s perfectly ok to seek professional help in the form of counseling as part of your self-care plan.

ADDITIONAL RESOURCES

Organizations Focused on Trauma & Support for Educators

Massachusetts Advocates for Children
Center on the Developing Child (Harvard University)
National Child Traumatic Stress Network
National Center for Children in Poverty
National Council of Juvenile and Family Court Judges
Trauma Informed Care Project

Books & Resources to Help Your Students Develop SEL

The following books were handpicked by First Book to create Healthy Feelings and Relationships, a collection designed to promote the social and emotional learning skills necessary for kids to manage their emotions and behavior. Each book and a FREE downloadable reading guide, developed in partnership with CASEL, is available on the First Book Marketplace for registered members at http://www.fbmarketplace.org/healthy-feelings-relationships.

<table>
<thead>
<tr>
<th>Title</th>
<th>Author</th>
<th>Grade</th>
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<tbody>
<tr>
<td>I Can Help</td>
<td>David Hyde Costello</td>
<td>PreK - K</td>
</tr>
<tr>
<td>Cleversticks</td>
<td>Barnard Ashley</td>
<td>PreK - K</td>
</tr>
<tr>
<td>The Colors of Us</td>
<td>Lauren Katz</td>
<td>PreK - K</td>
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<tr>
<td>Elephant and Piggie: A Big Guy Took My Ball! Also available in Spanish: Elefante y Cerdita: ¡Un tipo grande se llevó mi pelota!</td>
<td>Mo Willems</td>
<td>PreK - K</td>
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<tr>
<td>The Feelings Book</td>
<td>Todd Parr</td>
<td>PreK - K</td>
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<tr>
<td>A Kiss Means I Love You</td>
<td>Kathryn Madeline Allen</td>
<td>PreK - K</td>
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<tr>
<td>Little Elliot, Big City</td>
<td>Mike Curato</td>
<td>PreK - K</td>
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<tr>
<td>Little Monkey Calms Down</td>
<td>Michael Dahl</td>
<td>PreK - K</td>
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<tr>
<td>Llama Llama Time to Share</td>
<td>Anna Dewdney</td>
<td>PreK - K</td>
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<tr>
<td>Pete the Cat: I Love My White Shoes</td>
<td>Eric Litwin</td>
<td>PreK - K</td>
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<td>A Bike Like Sergio’s</td>
<td>Maribeth Boelts</td>
<td>1st– 3rd</td>
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<td>Clark the Shark</td>
<td>Bruce Hale</td>
<td>1st– 3rd</td>
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<td>Finding the Music / En pos de la música</td>
<td>Jennifer Torres</td>
<td>1st– 3rd</td>
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<td>I’m New Here</td>
<td>Anne Sibley O’Brien</td>
<td>1st– 3rd</td>
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<td>The Invisible Boy</td>
<td>Trudy Ludwig</td>
<td>1st– 3rd</td>
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<td>It’s Okay to be Different</td>
<td>Todd Parr</td>
<td>1st– 3rd</td>
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<td>My Best Friend</td>
<td>Mary Ann Rodman</td>
<td>1st– 3rd</td>
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<td>My Friend Maggie</td>
<td>Hannah E. Harrison</td>
<td>1st– 3rd</td>
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<td>Stand Tall, Molly Lou Melon</td>
<td>Patty Lovell</td>
<td>1st– 3rd</td>
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<tr>
<td>Swimmy</td>
<td>Leo Lionni</td>
<td>1st– 3rd</td>
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<td>What James Said</td>
<td>Liz Rosenberg</td>
<td>1st– 3rd</td>
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<td>All’s Faire in Middle School</td>
<td>Victoria Jamieson</td>
<td>4th- 7th</td>
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<td>Brave</td>
<td>Svetlana Chmakova</td>
<td>4th- 7th</td>
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<td>Cosmic Commandos</td>
<td>Christopher Eliopoulos</td>
<td>4th- 7th</td>
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<td>The Creepy Case Files of Margo Maloo</td>
<td>Drew Weing</td>
<td>4th- 7th</td>
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<td>El Deafo</td>
<td>Cece Bell</td>
<td>4th- 7th</td>
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<tr>
<td>Explorer: Hidden Doors</td>
<td>Kazu Kibuishi (editor)</td>
<td>4th- 7th</td>
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<tr>
<td>Hilo #1: The Boy Who Crashed to Earth</td>
<td>Judd Winick</td>
<td>4th- 7th</td>
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<tr>
<td>Real Friends</td>
<td>Shannon Hale &amp; LeUyen Pham</td>
<td>4th- 7th</td>
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<tr>
<td>Roller Girl</td>
<td>Victoria Jamieson</td>
<td>4th- 7th</td>
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<tr>
<td>The Secret Science Alliance and the Copycat Crook</td>
<td>Eleanor Davis</td>
<td>4th- 7th</td>
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</tbody>
</table>
REFERENCES


[Online] Resources for Schools to Help Students Affected by Trauma Learn. Available: http://www.traumainformedcareproject.org/resources/bibliography%20of%20resources%20for%20schools%20to%20be%20trauma%20informed.PDF
