



TRAUMA-INFORMED PRACTICE

Excerpted and adapted from *Skills and Dispositions that Support Youth Success in School, Part 2: Strategies for Building Motivation, Engagement and 21st Century Skills*

Lead Contributor: Jody McVittie, MD, Sound Discipline

Trauma-informed practice is founded on an understanding of the effects that trauma and insecure attachment have on the brains, psychology, and behavior of people. Trauma-Informed practice continues to advance from a growing body of research in neuroscience and mental health that analyzes the impact of adverse experiences on the developing brain.¹ Because adverse experiences change the brain's response to stress and affect how brains develop, an understanding of brain development can inform systems and practices for supporting trauma-exposed youth and building communities that promote resilience.

THE IMPACT OF TRAUMA AND ADVERSE CHILDHOOD EXPERIENCES (ACEs)

It is now widely accepted that adverse childhood experiences (ACEs) have long-term effects on health and well-being,² and on children's ability to learn and function well in the school environment.³ The original study of ACEs involved over 17,000 adults and examined ten categories of experiences including abuse (physical, emotional, sexual), neglect (physical, emotional), and household dysfunction (use of drugs or alcohol, witnessing domestic violence, loss of a parent, parental incarceration).

Traumatic events are experienced differently by different individuals, and are influenced by developmental and cultural factors. What may be traumatic to one child may not be so for another. But while any child can experience traumatic events and effects, children who are refugees or economic migrants; those living in poverty; and those deeply impacted by the social and political effects of racial, ethnic, or gender oppression may be especially vulnerable to experiencing complex trauma. In general, children exposed to trauma have nervous systems that are highly sensitive to stressors. Their reactions to events in their environment can seem out of proportion or irrational. Because their brains are more focused on surviving than thriving, they can misinterpret or entirely miss social cues or instructions, and can have difficulty regulating their own emotions and behaviors. This all too often leads to significant behavioral and academic difficulties.

HOW TRAUMA-INFORMED PRACTICE CAN HELP

The fundamental goal of trauma-informed practice is to build resiliency in children who have experienced trauma.⁴ Children who have safe, reliable, consistent, responsive and attuned caregivers are more resilient.⁵ For children whose primary caregiver cannot provide this consistency, other adults using a trauma-informed framework can help to mitigate the

¹ Beers & De Bellis (2002); Nelson & Carver (1998); Carlson, Furby & Armstrong (1997)

² Centers for Disease Control and Prevention (CDC) (n.d.); Anda & Brown (2010); Felitti (2002)

³ National Child Traumatic Stress Network (2008); Cole, O'Brien, Gadd, Ristuccia, Wallace & Gregory (2005); Cicchetti, Toth & Hennessy (1989)

⁴ Wolpow, Johnson, Hertel & Kincaid (2009); Herman (1997)

⁵ Perry (2013)



harmful effects of traumatic experiences. Trauma-informed practices can actually repair damage to the brain caused by trauma and support youth to build helpful, responsive, and respectful relationships, develop self-regulation skills, and build competencies in executive function, cognitive, inter-personal, intra-personal and emotional domains.⁶

Forging partnerships to develop the capacity of schools and youth development organizations to use trauma-informed practices can increase children’s resiliency. This increase results in part from growing the student’s social web of caring people (peers and adults) who are consistent, safe, reliable and attuned.

HOW TO IMPLEMENT TRAUMA-INFORMED PRACTICE IN SCHOOLS

Leadership and staff members are trained in how to respond to the social-emotional needs of trauma-exposed students. Schools begin the process with information about how trauma affects children's learning and behavior. They learn about brain development, and tools that enhance students’ sense of safety and ability to self-regulate. Leadership and staff also train in instructional principles and strategies, building community partnerships, and student engagement. In addition, because working with students exposed to trauma is difficult work that can lead to vicarious trauma for adults, there is a focus on the importance of self-care. Finally, staff members are not expected to act as counselors. Instead, they are expected to have a general understanding of strategies, and to establish partnerships with mental health professionals to more fully support students.

CHARACTERISTICS OF TRAUMA-INFORMED PRACTITIONERS ⁷	CHARACTERISTICS OF TRAUMA-INFORMED SCHOOLS ⁸
<ul style="list-style-type: none"> • Have an understanding of the brain science that underlies behaviors • Understand that trauma-exposed students dysregulate easily and misperceive safety • Focus on strengths to empower and encourage youth • Self-regulate well and provide safe, consistent environments • Understand the importance of routines • Incorporate self-regulations tools into curricula at all levels • Avoid contingency-based discipline practices (rewards and punishments) as these tend to further dysregulate trauma-exposed students • Focus on repair/solutions instead of punishment • Check their assumptions, observe and question • Provide opportunities and build skills for helpful participation 	<ul style="list-style-type: none"> • Focus on culture and climate in the school and community • Train and support staff regarding trauma and learning • Encourage and sustain open and regular communication for all • Use a strengths-based approach in working with students, families and colleagues • Ensure that discipline policies include prevention and are trauma-informed as well as focused on teaching and repair, rather than punishment • Have established data teams to review school discipline, academic and attendance data • Provide tiered support for all students based on what they need • Provide access, voice, and ownership for staff, students and community • Actively build relationships with families/caregivers • Incorporate continual intentional learning to improve cultural responsiveness • Maintain awareness of vicarious trauma and the need for self-care

⁶ Kinniburgh, Blaustein, Spinazzola & Van der Kolk (2005); Fisher, Gunnar, Chamberlain & Reid (2000); Herman (1997)

⁷ Wolpow, Johnson, Hertel & Kincaid (2009)

⁸ Cole, O’Brien, Gadd, Ristuccia, Wallace & Gregory (2005)



FOR MORE INFORMATION

- **Compassionate Schools** - <http://www.k12.wa.us/compassionateschools/>
Communities across the country are expressing interest in Washington's Compassionate Schools. Two examples of local successes are the cases of Lincoln High School in Walla Walla, and Manitou Elementary in Tacoma. Both schools have populations with high levels of ACEs. In the case of Lincoln High, suspensions have dropped by 85% since they started implementing a compassionate approach. Student engagement and school connectedness have risen dramatically, and staff morale has increased. At Lincoln, partnerships have been developed with Children's Resiliency Initiative, and Washington State University's Area Health Education Center to develop community and staff understanding.
- **Sound Discipline** - www.SoundDiscipline.org
Sound Discipline is a Puget Sound based non-profit that offers training and staff support with Positive/Solution Focused Discipline that emphasizes trauma-informed practices among other strategies, frameworks, and supports that build positive and sustainable, culturally responsive school climates.
- **ChildTrauma Academy (CTA)** - <http://childtrauma.org>
CTA is a not-for-profit organization based in Houston, Texas working to improve the lives of high-risk children through direct service, research and education. CTA translates emerging findings about the human brain and child development into practical implications for the ways we nurture, protect, enrich, educate and heal children.
- **The National Child Traumatic Stress Network (NCTSN)** - <http://www.nctsn.org/>
NCTSN is an extensive resource dedicated to raising the standard of care and access to services for traumatized children, their families and communities throughout the U.S.
- **ACEs Connection** - <http://acesconnection.com/>
ACEs is an online community of practice network.

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