

Trauma Sensitive Schools

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What is “Trauma”

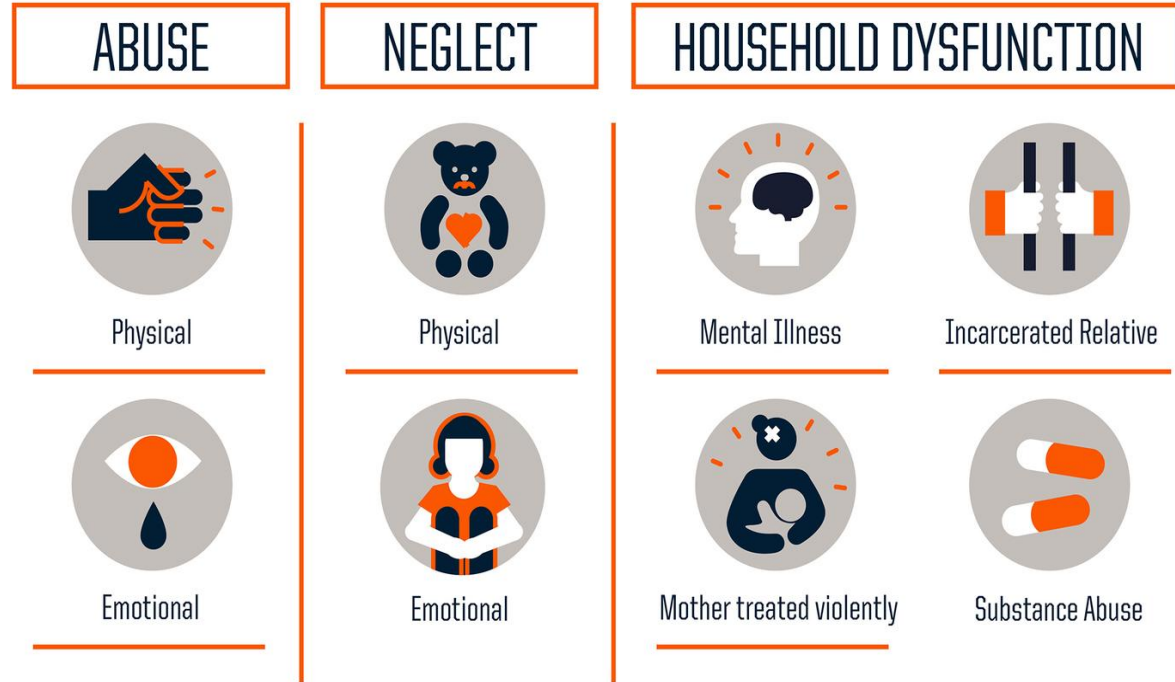
“Possibly the largest public health issue facing our children today.” (CDC, 2019)

“Trauma is an exceptional experience in which powerful and dangerous events overwhelm a person’s capacity to cope” (Rice & Groves, 2005). Keep in mind that the experience doesn’t have to be life-threatening to trigger a trauma response.

Adverse Childhood Experiences (ACE's)

Research has shown that Adverse Childhood Experiences (ACE's) and exposure to trauma greatly impacts your social neurobiology and how your brain functions and learns.

The more ACE's you have, the higher the risk of physical and mental health problems in adulthood.



"Experts say that the most shattering of traumas happen within relationships, and thus it is only within relationships that any healing can occur."

Why is this helpful to know?

1. Trauma Informed Strategies decrease negative behaviors
2. Compassion Fatigue
3. Know YOUR Triggers

Symptoms of Trauma

AGGRESSION

Avoidance

HYPERVIGILANT

Highly Emotional

Peer conflict

Off Putting Behaviors

Shuts Down

Difficulty Concentrating

Truant

Depressed

Withdrawn / Lack
of Responsiveness

Lethargic

Impulsive

Dysregulation *The inability to tolerate being uncomfortable emotionally and / or physically.*

Common Causes:

- Hunger
- Lack of Sleep
- Household / family dysfunction
- Loud Noises
- Unexpected events or unexpected behaviors
- High Stress
- Lack of basic needs being met
- Lack of Control
- Inability to communicate feelings or emotions



Prolonged Effects of Developmental Trauma

Behavioral

- Hyperactivity
- Poor impulse control
- Appearing attention seeking or demanding
- Violence or other dangerous actions
- Oppositional behavior
- Difficulty with rules, point systems and behavior plans
- Trauma reenactment through aggressive or sexual behavior or play
- Stealing or hoarding food, clothing, or objects
- Self harm
- Being overly compliant
- Eating problems
- Sleep disturbances
- Bowel or bladder issues
- Maladaptive self soothing behaviors
- Substance use

Relationship

- General mistrust of others
- High need of control of self or others
- Interpersonal difficulties with adults and peers
- Unhealthy boundaries in relationships
- Hesitant to ask for help or a tendency to ask for help with everything
- Clingy or overly dependent
- withdrawn / socially isolated or otherwise detached
- Tendency to demonstrate “I need you” and “stay away from me” patterns of behavior
- Overly helpful or solicits of attention
- Difficulty reading social cues
- Communication problems
- Difficulty taking another person’s point of view
- Little understanding of others feelings and lack of empathy
- Vulnerable to revictimization and/or victimizing others

Prolonged Effects of Developmental Trauma, cont.

Biological

- Fight
- Flight
- Freeze
- Scensory
- Motor
- Balance
- Body Tone
- Over/Under react to pain
- Psychosomatic complaints
- Sick

Cognitive

- Lack of curiosity
- Learning disabilities
- Processing disabilities
- Memory impairments
- Language difficulties
- Difficulties in regulation of attention, focus, and work completion
- Problem with executive function
- Difficulty in accepting your their own contribution.

Emotional

- Hyper-vigilant
- Over reactionary
- High states of distress
- Emotional self-regulation problems (Mood concerns Anger management)
- Difficulty label or describing emotions
- Struggling to communicate needs and wants
- Dissociation

Self Concept: *"How students see themselves, others and the world."*

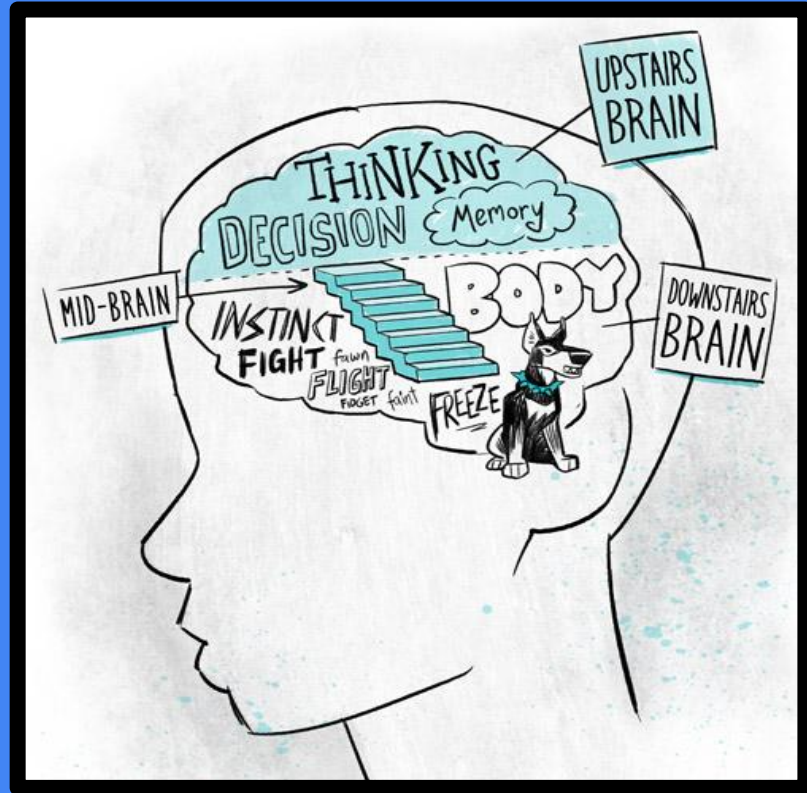
- Lack of a continuous predictable sense of self.
- Low self-esteem
- Toxic shame and guilt
- Belief that he or she is the best or the worst
- Belief that nothing he or she does matters
- Tendency to place blame on self or others
- Body image concerns
- Self-sabotaging behaviors

Shame is feeling like one is a bad person whereas guilt is a feeling that goes with knowing someone did something wrong.

Meet.... Our friends

Take a Break!

The Trauma Brain



HOW TRAUMA AFFECTS THE BRAIN

Prefrontal Cortex

Rational thinking -
regulates emotions such
as fear responses from
the amygdala - with
PTSD this has a reduced
volume

Hippocampus

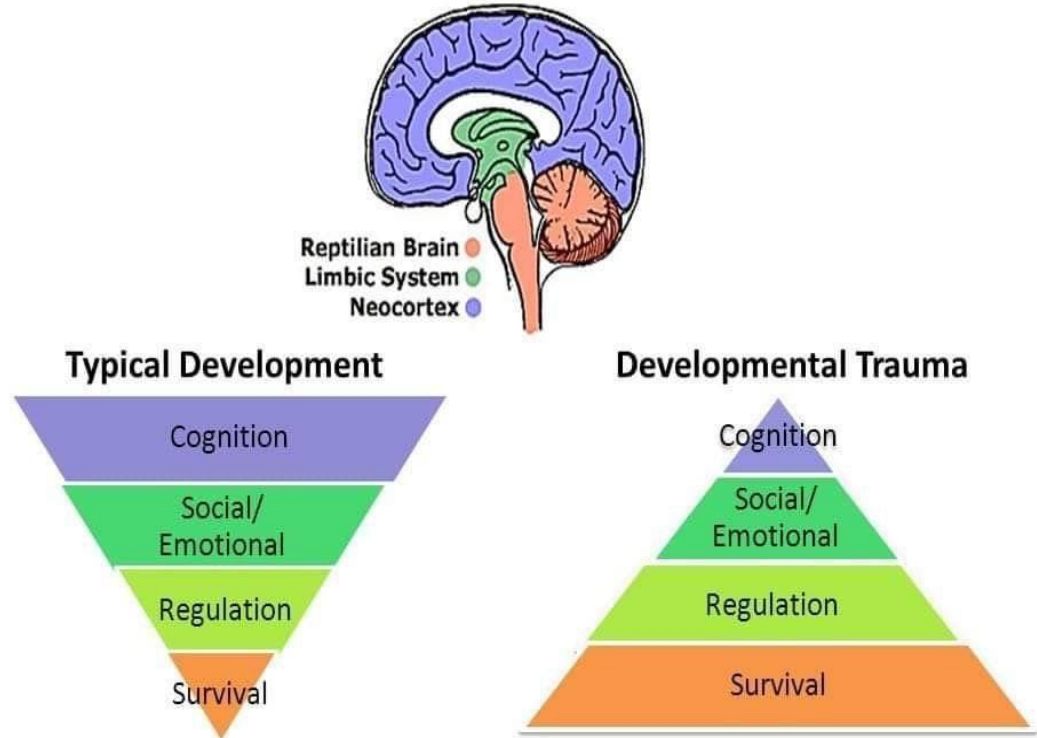
Responsible for
memory and
differentiating
between past and
present - works to
remember and make
sense of the trauma.
With consistent
exposure to trauma, it
shrinks.

Amygdala

Wired for survival, when active it is
hard to think rationally. The more
hyperactive the amygdala is, the more
signs of PTSD are present.

“Importantly, spending prolonged amounts of time in overwhelming stress states as a result of trauma especially, during critical, early years of brain development, can result in students experiencing long lasting, negative psychological and physiological effects. This in turn, influences students personal, relational, and academic success.”

Trauma & Brain Development

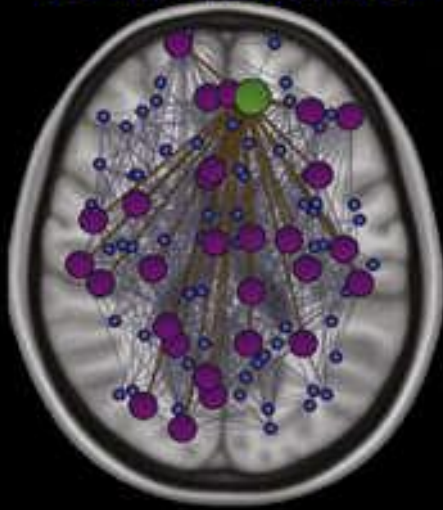


Adapted from Holt & Jordan, Ohio Dept. of Education

Neuropathways

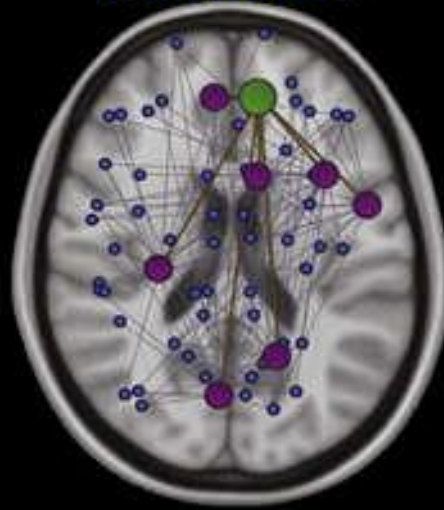
Neurons that fire together, wire together!

No Maltreatment




VS.

Maltreated



Responses to Fear or Stress

FIGHT



✱✱✱✱✱

- 'Self-preservation' at all costs
- Explosive temper and outbursts
- Aggressive, angry behavior
 - Controls others
 - Bully
- Can't 'hear' other points of view
- A pronounced sense of entitlement
- Demands perfection from others
- Dictatorial tendencies

Typically mis-labelled as:

- Narcissist
- Sociopath
- Conduct disorder

FLIGHT



- Obsessive and / or compulsive behavior
 - Feelings of panic and anxiety
 - Rushing around
 - Over-worrying
 - Workaholic
- Can't sit still, can't relax
- Tries to micromanage situations and other people
- Always 'on the go', busy doing things
- Wants things to be perfect
- Over-achiever


Typically mis-labelled as:

- OCD
- Bipolar
- ADHD
- Panic disorder
- Mood disorder

Most people have one or two dominant stress responses as their main mode of reacting to stressful triggers and situations or perceived threats.
(www.spiritualselfhelp.org)

But...how about Freeze and Fawn?

FREEZE










- Spacing out
- Feeling unreal
- Hibernating
- Isolating the self from the outside world
- Couch potato
- Dissociates
- Brain fog
- Difficulties making decisions, acting on decisions
- Achievement-phobic
- Wants to hide from the world
- Feels 'dead', lifeless

Typically mis-labelled as:

- Clinical depression
- Schizophrenia
- ADD
- DID

FAWN



- People pleasing
- Scared to say what they really think
- Talks about 'the other' instead of themselves
- Flatters others (to avoid conflict)
- 'Angel of mercy'
- Over-caring
- 'Sucker'
- Can't stand up for the self, say 'no'
- Easily exploited by others
- Hugely concerned with social standing and acceptance, 'fitting in'
- 'Yes' man (or woman...)

Typically mis-labelled as:

- Codependent
- 'Victim'

The Brain is Plastic!

“Relationships matter, and resilience research shows that one caring adult within the education system can make a huge difference to a student.”

Strategies— It's all about relationships!

Help students feel safe: (Physical Safety AND Emotional Safety)

- Clear and understandable expectations
- Be aware of tone and language choice
- Have a predictable structure
- Be aware of other student's behaviors and how they affect others

Help students feel connected:

- Treat your bus as a “community”
- Build and nurture healthy relationships with your students (Drivers to students, drivers and families, student to student)
- Eye Contact
- Friendly greetings
- Foster belonging, acceptance and value for each student.

Check for Regulation:

- Stay calm
- Name to tame it
- Check YOUR regulation
- “Don't Engage in correcting behavior” “ Do in Engage in calming responses”

Questions or Comments?

We 'd love to hear from you!

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