Strategies to Support Students and Educators Experiencing Trauma

NREA Conference Presentation

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REL Appalachia

Agenda

- Welcome and introductions
- Overview of the Institute of Education Sciences (IES) Regional Educational Laboratory (REL) program and the Cross-State Collaborative to Support Schools in the Opioid Crisis (CCSSOC)
- Resources to support students and educators impacted by trauma
  - Common Trauma Symptoms in Students and Helpful Strategies for Educators
  - Menu of Trauma-Informed Programs for Schools
  - Selecting the Right Interventions to Support Students' Mental Health Needs
- Applying these resources in your own context
- Closing reflections and how the work continues: Building Safe, Caring, and Trauma-Sensitive Schools partnership

Introductions: Meet the REL Appalachia facilitators

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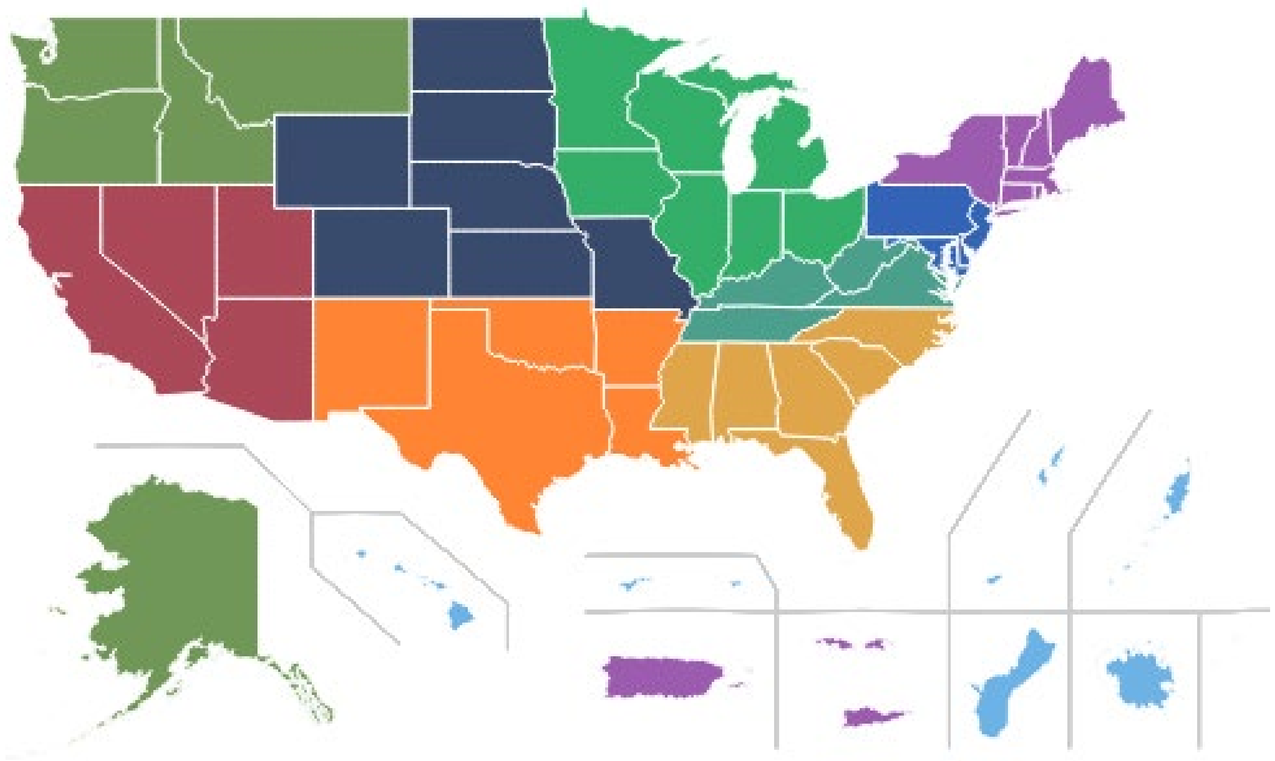
Before we get started…

Please introduce yourself:

- Name
- Role
- State
- Share your favorite memory from the classroom!

Overview of the Institute of Education Sciences (IES) Regional Educational Laboratory (REL) program and the Cross-State Collaborative to Support Schools in the Opioid Crisis (CCSSOC)

Regional Educational Laboratories



The ten RELs partner with educators and policymakers nationwide. REL work is **change-oriented, supporting meaningful local, regional, or state decisions** about education policies, programs, and practices designed to improve learner outcomes.

Find us on the web! https://ies.ed.gov/ncee/rel/region/appalachia

Regional Educational Laboratory activities

Applied Research

Training, Coaching, and Technical Support

Dissemination

To improve student outcomes through use of evidence-based practices

REL Appalachia partnerships

For more information about our work, visit:
https://ies.ed.gov/ncee/rel/region/appalachia

Cross-State Collaborative to Support Schools in the Opioid Crisis (CCSSOC)

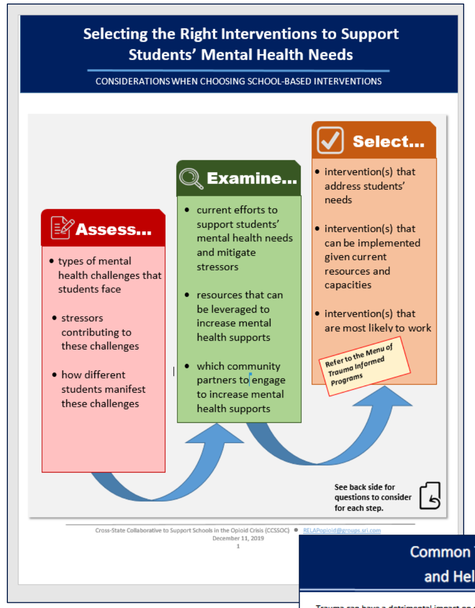
- 30 members
- Representatives from:
  - State and local education agencies
  - Departments of behavioral/mental health
  - Community-based partners
  - Universities

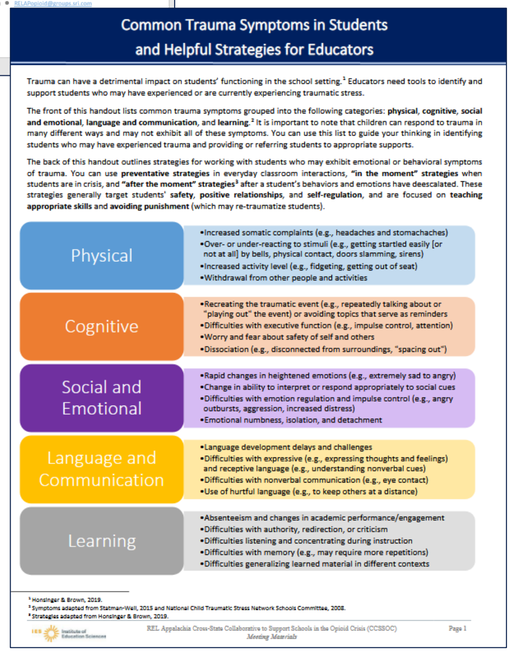
Project goals

- Enhance state and local leaders' capacity to identify and implement evidence-based practices
- Enhance state and local leaders' capacity to use research and data to make decisions
- Establish an Action Agenda that:
  - Identifies high-priority unmet needs
  - Outlines steps to address these needs, with relevant information/resources for educators
- Establish a collaborative website that includes:
  - CCSSOC meeting materials and resources
  - Curated evidence-based tools and resources
  - Suggestions about where additional research is needed

Resources

- Intervention selection guide
- Menu of trauma-informed programs for schools
- Common trauma symptoms in students and helpful strategies for educators
- Glossary: Common terms for frameworks, initiatives, and approaches that address trauma
- Using data to support students experiencing trauma
- School-community collaboration to address opioid-related trauma





Common Trauma Symptoms in Students and Helpful Strategies for Educators

Trauma can have a detrimental impact on students' functioning in the school setting.[1] Educators need tools to identify and support students who may have experienced or are currently experiencing traumatic stress.

The front of this handout lists common trauma symptoms grouped into the following categories: **physical**, **cognitive**, **social and emotional**, **language and communication**, and **learning**.[2] It is important to note that children can respond to trauma in many different ways and may not exhibit all of these symptoms. You can use this list to guide your thinking in identifying students who may have experienced trauma and providing or referring students to appropriate supports.

The back of this handout outlines strategies for working with students who may exhibit emotional or behavioral symptoms of trauma. You can use **preventative strategies** in everyday classroom interactions, **"in the moment" strategies** when students are in crisis, and **"after the moment" strategies**[3] after a student's behaviors and emotions have descalated. These strategies generally target students' **safety**, **positive relationships**, and **self-regulation**, and are focused on **teaching appropriate skills** and **avoiding punishment** (which may re-traumatize students).

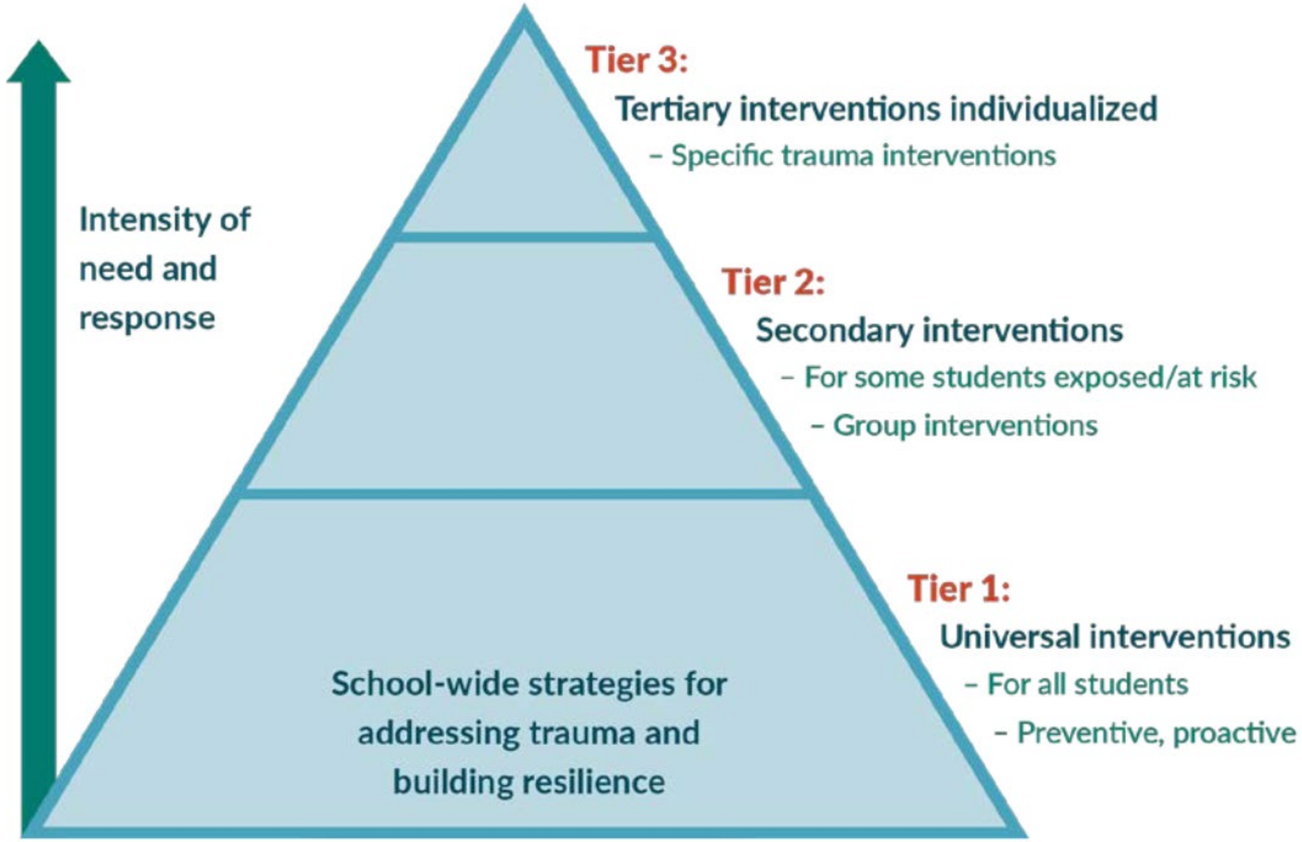
Physical	•Increased somatic complaints (e.g., headaches and stomachaches) •Over- or under-reacting to stimuli (e.g., getting startled easily [or not at all] by bells, physical contact, doors slamming, sirens) •Increased activity level (e.g., fidgeting, getting out of seat) •Withdrawal from other people and activities
Cognitive	•Recreating the traumatic event (e.g., repeatedly talking about or "playing out" the event) or avoiding topics that serve as reminders •Difficulties with executive function (e.g., impulse control, attention) •Worry and fear about safety of self and others •Dissociation (e.g., disconnected from surroundings, "spacing out")
Social and Emotional	•Rapid changes in heightened emotions (e.g., extremely sad to angry) •Change in ability to interpret or respond appropriately to social cues •Difficulties with emotion regulation and impulse control (e.g., angry outbursts, aggression, increased distress) •Emotional numbness, isolation, and detachment
Language and Communication	•Language development delays and challenges •Difficulties with expressive (e.g., expressing thoughts and feelings) and receptive language (e.g., understanding nonverbal cues) •Difficulties with nonverbal communication (e.g., eye contact) •Use of hurtful language (e.g., to keep others at a distance)
Learning	•Absenteeism and changes in academic performance/engagement •Difficulties with authority, redirection, or criticism •Difficulties listening and concentrating during instruction •Difficulties with memory (e.g., may require more repetitions) •Difficulties generalizing learned material in different contexts

[1] Honsinger & Brown, 2019.
[2] Symptoms adapted from Statman-Weil, 2015 and National Child Traumatic Stress Network Schools Committee, 2008.
[3] Strategies adapted from Honsinger & Brown, 2019.

IES Institute of Education Sciences | REL Appalachia Cross-State Collaborative to Support Schools in the Opioid Crisis (CCSSOC) *Meeting Materials* | Page 1

Resources to support students and educators impacted by trauma

Tiered approach to support students experiencing trauma

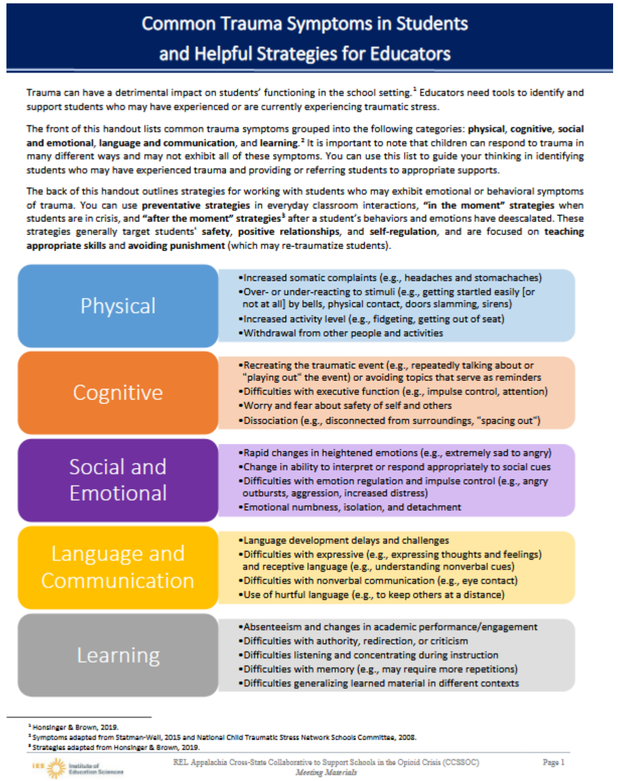


(National Center on Safe Supportive Learning Environments, 2020)

Resource #1

Common Trauma Symptoms in Students and Helpful Strategies for Educators

Common Trauma Symptoms in Students and Helpful Strategies for Educators



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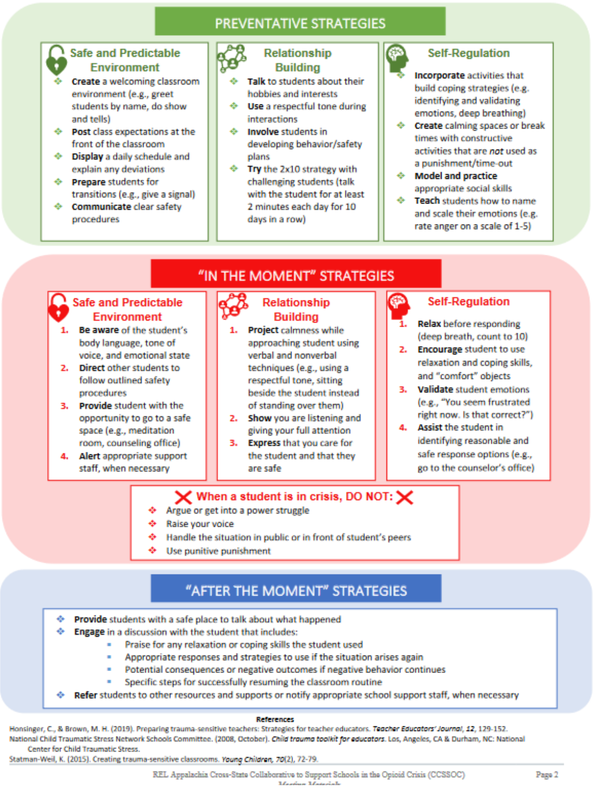
IES Institute of Education Sciences — REL Appalachia Cross-State Collaborative to Support Schools in the Opioid Crisis (CCSSOC) *Meeting Maverials* — Page 1



PREVENTATIVE STRATEGIES

Safe and Predictable Environment
- **Create** a welcoming classroom environment (e.g., greet students by name, do show and tells)
- **Post** class expectations at the front of the classroom
- **Display** a daily schedule and explain any deviations
- **Prepare** students for transitions (e.g., give a signal)
- **Communicate** clear safety procedures

Relationship Building
- **Talk** to students about their hobbies and interests
- **Use** a respectful tone during interactions
- **Involve** students in developing behavior/safety plans
- **Try** the 2x10 strategy with challenging students (talk with the student for at least 2 minutes each day for 10 days in a row)

Self-Regulation
- **Incorporate** activities that build coping strategies (e.g. identifying and validating emotions, deep breathing)
- **Create** calming spaces or break times with constructive activities that are *not* used as a punishment/time-out
- **Model and practice** appropriate social skills
- **Teach** students how to name and scale their emotions (e.g. rate anger on a scale of 1-5)

"IN THE MOMENT" STRATEGIES

Safe and Predictable Environment
1. **Be aware** of the student's body language, tone of voice, and emotional state
2. **Direct** other students to follow outlined safety procedures
3. **Provide** student with the opportunity to go to a safe space (e.g., meditation room, counseling office)
4. **Alert** appropriate support staff, when necessary

Relationship Building
1. **Project** calmness while approaching student using verbal and nonverbal techniques (e.g., using a respectful tone, sitting beside the student instead of standing over them)
2. **Show** you are listening and giving your full attention
3. **Express** that you care for the student and that they are safe

Self-Regulation
1. **Relax** before responding (deep breath, count to 10)
2. **Encourage** student to use relaxation and coping skills, and "comfort" objects
3. **Validate** student emotions (e.g., "You seem frustrated right now. Is that correct?")
4. **Assist** the student in identifying reasonable and safe response options (e.g., go to the counselor's office)

When a student is in crisis, DO NOT:
- Argue or get into a power struggle
- Raise your voice
- Handle the situation in public or in front of student's peers
- Use punitive punishment

"AFTER THE MOMENT" STRATEGIES

- **Provide** students with a safe place to talk about what happened
- **Engage** in a discussion with the student that includes:
  - Praise for any relaxation or coping skills the student used
  - Appropriate responses and strategies to use if the situation arises again
  - Potential consequences or negative outcomes if negative behavior continues
  - Specific steps for successfully resuming the classroom routine
- **Refer** students to other resources and supports or notify appropriate school support staff, when necessary

References

Honsinger, C., & Brown, M. H. (2019). Preparing trauma-sensitive teachers: Strategies for teacher educators. *Teacher Educators' Journal, 12*, 129-152.
National Child Traumatic Stress Network Schools Committee. (2008, October). *Child trauma toolkit for educators*. Los, Angeles, CA & Durham, NC: National Center for Child Traumatic Stress.
Statman-Weil, K. (2015). Creating trauma-sensitive classrooms. *Young Children, 70*(2), 72-79.

REL Appalachia Cross-State Collaborative to Support Schools in the Opioid Crisis (CCSSOC) — Page 2

Source: https://ies.ed.gov/ncee/edlabs/regions/appalachia/events/materials/04-8-20-Handout3_common-trauma-symptoms-and-helpful-strategies-for-educators.pdf

(REL Appalachia at SRI International, 2020a)

Common trauma symptoms in students

- Physical
- Cognitive
- Social and Emotional
- Language and Communication
- Learning

(REL Appalachia at SRI International, 2020a)

How educators and school staff can support students

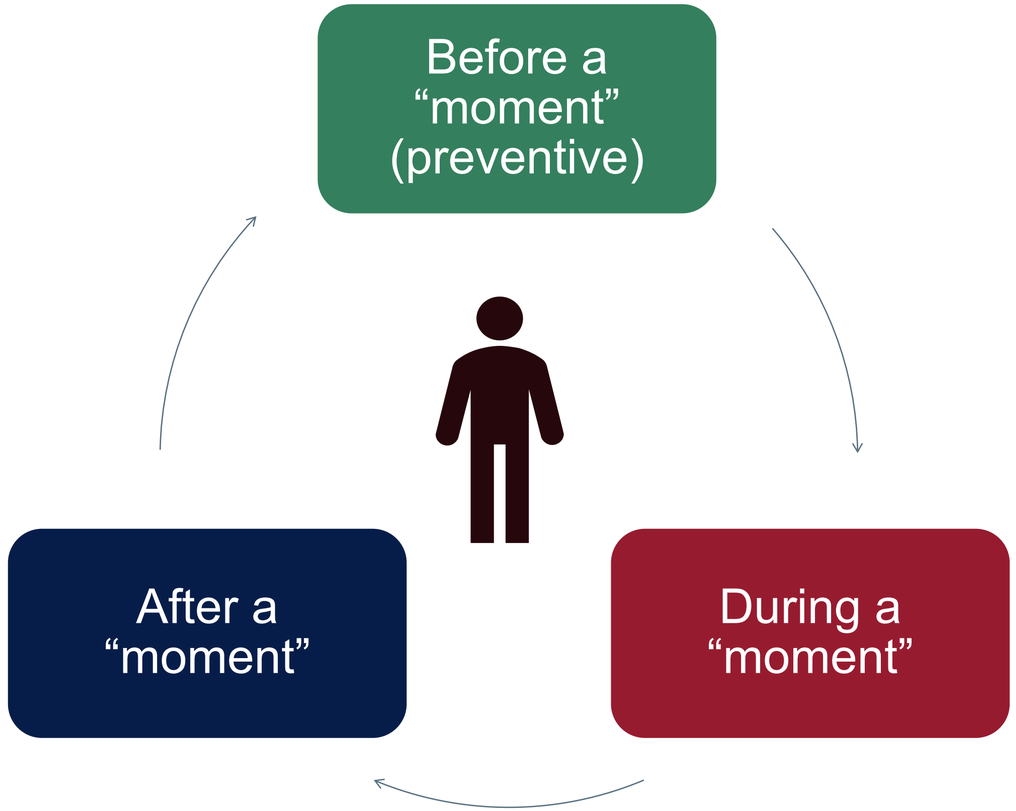
Strategies

Create a safe and predictable environment

Build relationships

Promote self-regulation

Opportunities to support



(REL Appalachia at SRI International, 2020a)

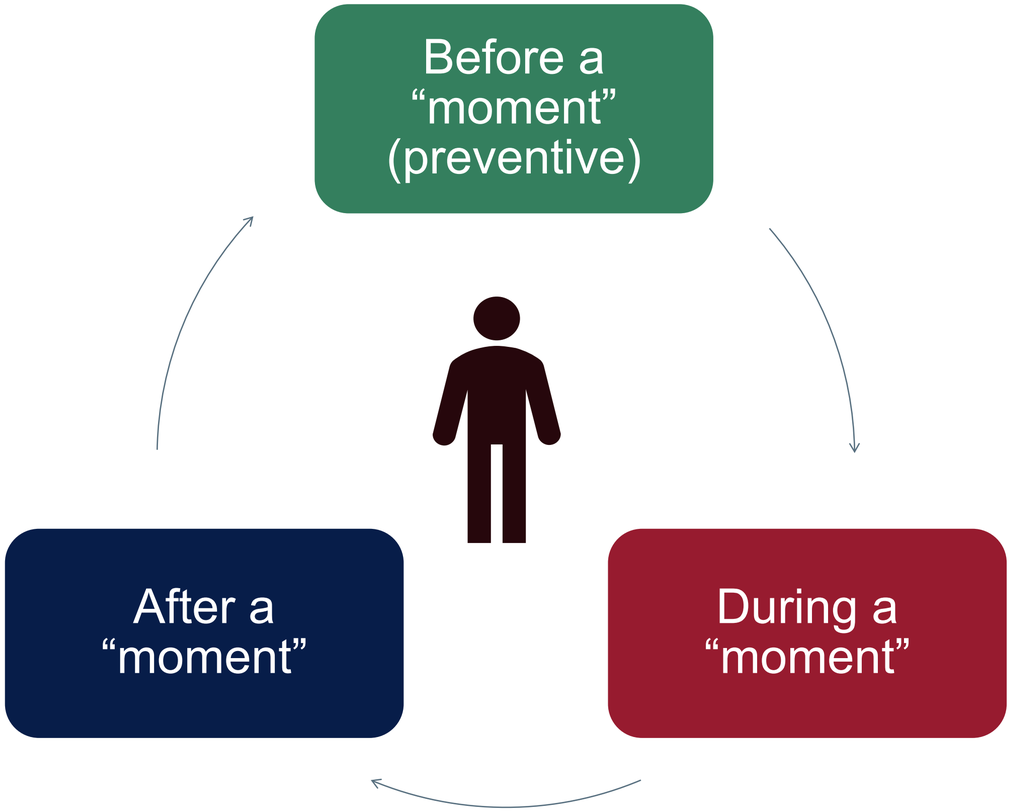
Example: Create a safe and predictable environment

Strategies

Create a safe and predictable environment

In the classroom

Opportunities to support



(REL Appalachia at SRI International, 2020a)

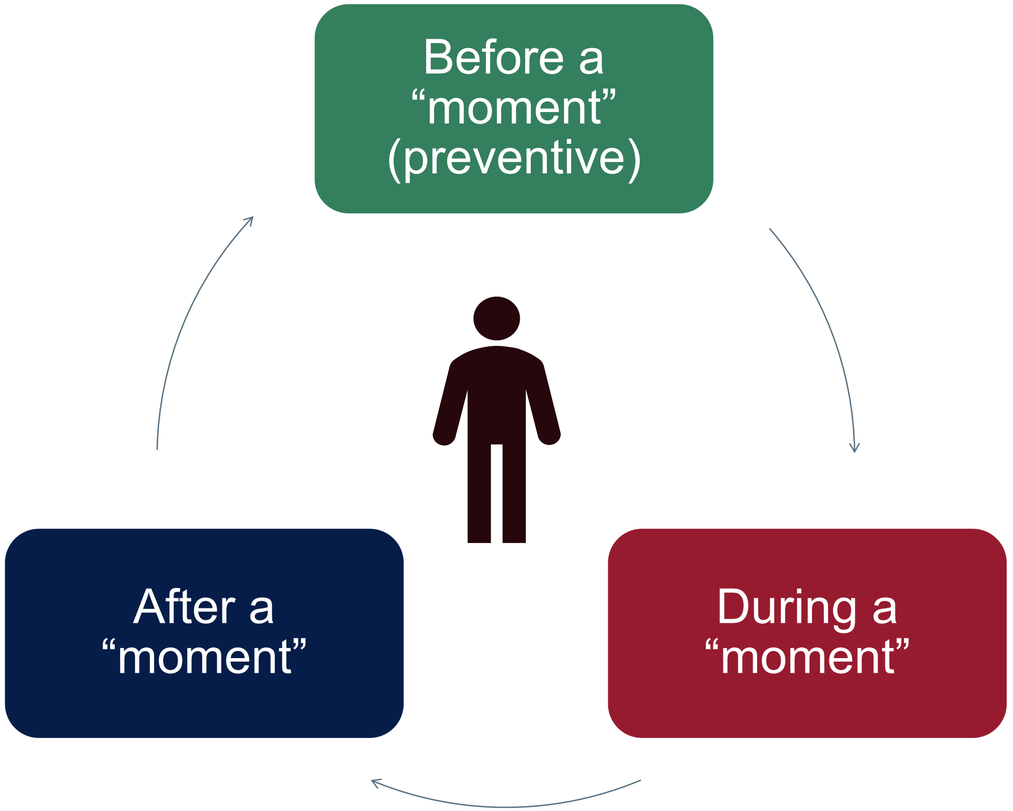
Example: Build relationships

Strategies

Build relationships

In the hallway

Opportunities to support



(REL Appalachia at SRI International, 2020a)

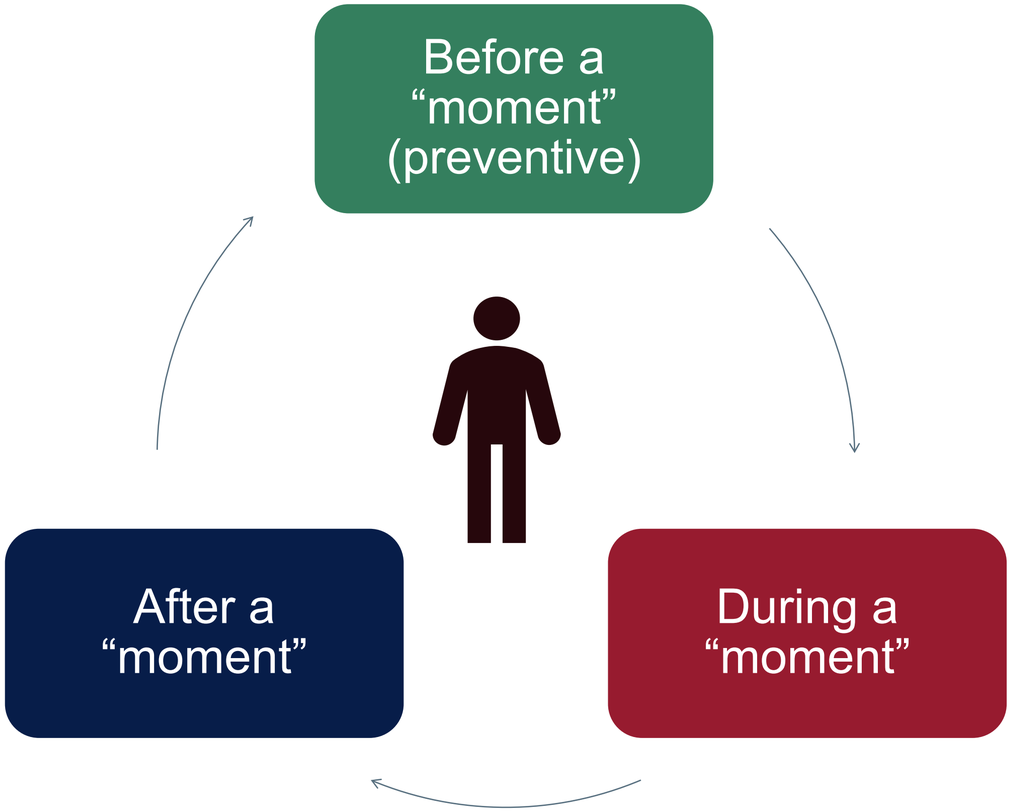
Example: Self-regulation

Strategies

Promote self-regulation

In the library

Opportunities to support



(REL Appalachia at SRI International, 2020a)

Helpful Strategies for Educators: "After the Moment" Strategies

"AFTER THE MOMENT" STRATEGIES

- **Provide** students with a safe place to talk about what happened
- **Engage** in a discussion with the student that includes:
  - Praise for any relaxation or coping skills the student used
  - Appropriate responses and strategies to use if the situation arises again
  - Potential consequences or negative outcomes if negative behavior continues
  - Specific steps for successfully resuming the classroom routine
- **Refer** students to other resources and supports or notify appropriate school support staff, when necessary

Reflection

- Think about a time you tried a similar strategy. When have you tried to create consistent routines? To build stronger relationships with and between students? To help a student learn about self-regulation? To support students involved as “witnesses”? How did it go?

Resource #2

Menu of Trauma-Informed Programs for Schools

Menu of Trauma-Informed Programs for Schools

- Organizes trauma-informed school-based **programs by tier**, including Tier 1, Tiers 2–3, and multi-tiered (all three) programs
- Provides **basic information** about programs (e.g., intended audience, grade level) in Program Descriptions (blue table, pages 2–4)
- Provides details about **resources needed** to implement programs and relevant **research evidence** in Implementation Information (purple table, pages 5–10)

Program Descriptions

Multi-Tiered: *Supports that include all 3 tiers*

Program Name (and developers)	Program Description	Participants: Grade	All Students	Educators	Specific Sub-Groups	Program Setting	Considerations
Animating Learning by Integrating and Validating Experience (ALIVE) (Foundation for the Arts and Trauma, Inc.)	A trauma-informed program that includes screening, stress reduction, child safety education, letter-writing for students to express emotions, and professional development.	K–12	✓		Students identified as struggling and in need of additional services.	Various locations within schools	
Healthy Environments and Response to Trauma in Schools (HEARTS) (University of California San Francisco)	A whole-school, multi-level, prevention and intervention program for creating trauma-informed, safe and supportive schools.	K–12	✓	✓	At-risk students and students suffering from effects of trauma.	Various locations within schools	Includes teacher wellness groups for secondary trauma.
Project Linking Action to Unmet Needs in Children's Health (LAUNCH) (National Center for Healthy Safe Children)	A community-school partnership project that includes training teachers to deliver social-emotional curriculum and provides onsite mental health supports, including trauma-informed approaches.	ECE–2	✓	✓	Students with identified behavior problems in the classroom and students with mental health issues.	Various locations within schools	Implemented in Appalachia and other regions throughout the United States with trauma focus.
Student Assistance Program (SAP) (Prevention First[1])	A school-based, evidence-informed framework for prevention, early intervention, referral and support for students with needs dealing with non-academic barriers to learning.	K–12	✓		Students unable to fully benefit from educational opportunities due to trauma generated at school or at home.	Various locations within schools	

Implementation Information

Multi-Tiered: *Supports that include all 3 tiers*

Program Name	Resource Intensity[1]	Implementation Considerations: Who Implements[1]	Professional Development/Training	Materials and Cost	Implementation Timeframe	Evaluation Information[2]: Level of Evidence[3]	Findings[1]
Animating Learning by Integrating and Validating Experience (ALIVE)	High	School staff; Mental health professionals	Specialist-based program: Trainer site visits (3x in first year, 2x in second year, and 1x per year afterward), specialized staff in school (1 hour per week for every 10 students). Teacher-based program: 2-day training session, ongoing phone coaching/supervision.	Program materials (including program cost) available at this site.	Tier 1: Weekly 1-hour trauma-focused dialogues in the classroom (by trainer or teacher). Tiers 2-3: One-on-one counseling as needed.	Demonstrates a Rationale (ESSA)	No statistically significant findings.[3] Relevant research was conducted in New Haven, Connecticut.
Healthy Environments and Response to Trauma in Schools (HEARTS)	High	School staff; Mental health professionals	Training on topics such as trauma and secondary stress, consultant onsite at school 3-5 days per week.	No public information identified	No public information identified	Demonstrates a Rationale (ESSA)	Potential for… **Students**: Improved school engagement; decreased disciplinary behavioral issues (less office referrals, less suspensions); improved trauma symptoms (students in tier 3 therapy). **Staff**: Increased knowledge, skills and use of trauma-sensitive practices. Program was developed to serve needs of schools with students from under-resourced, trauma-impacted neighborhoods, as well as significant gaps on achievement test scores between African American and Latino students and other students. Research thus far has been conducted in California and Colorado.

Source: https://ies.ed.gov/ncee/edlabs/regions/appalachia/events/materials/04-8-20-Handout2_menu-trauma-informed-programs-for-schools.pdf

(REL Appalachia at SRI International, 2020b)

Program Descriptions table

Tier 2: *Targeted support for some students* **and Tier 3:** *Intensive support for a few students*							
Program Name (and developers)	**Program Description**	**Grade**	**Participants**			**Program Setting**	**Considerations**
			All Students	**Educators**	**Specific Sub-Groups**		
Bounce Back (Langley & Jaycox)	A school-based group intervention for students exposed to stressful and traumatic events.	K–5			Children from diverse ethnic/social backgrounds exposed to traumatic events.	Small groups at school	An adaptation of the Cognitive Behavioral Intervention for Trauma in Schools (see description below) that includes increased parental involvement that is appropriate for younger school children.

Program Descriptions table (continued)

Program Name (and developers)	Program Description
Bounce Back (Langley & Jaycox)	A school-based group intervention for students exposed to stressful and traumatic events.

Program Descriptions table (continued part 2)

Program Name (and developers)	Grade	Participants			Program Setting	Considerations	erations
		All Students	Educators	Specific Sub-Groups			
Bounce Back (Langley & Jaycox)	K–5			Children from diverse ethnic/social backgrounds exposed to traumatic events.	Small groups at school	An adaptation of the Cognitive Behavioral Intervention for Trauma in Schools (see description below) that includes increased parental involvement that is appropriate for younger school children.	tion of the Behavioral n for Schools (see below) that creased volvement ropriate for hool

Implementation Information table

Tier 2: *Targeted support for some students* **and Tier 3:** *Intensive support for a few students*							
		Implementation Considerations				**Evaluation Information[2]**	
Program Name	**Resource Intensity[1]**	**Who Implements[1]**	**Professional Development/Training**	**Materials and Cost**	**Implementation Timeframe**	**Level of Evidence[1]**	**Findings[1]**
Bounce Back	High	Mental health professionals	1- to 2-day in person training, free online training resources, potential ongoing implementation support by developer.	Implementation manual and workbook, free downloadable sample materials and forms, robust online community of practice.	Weekly 45- to 60-minute group sessions plus two or three 45- to 60-minute individual sessions over 10 weeks.	Promising (OJJDP)	Some evidence for… **Students:** Improved PTSD/trauma and anxiety symptoms, social adjustment, behaviors, emotional expression, and coping skills; decreased depression symptoms. Relevant research was conducted with racially and ethnically diverse children exposed to a range of traumatic events in urban settings.

Implementation Information table (continued)

Program Name	Resource Intensity[1]	Implementation Considerations				Findings[1]
		Who Implements[1]	Professional Development/Training	Materials and Cost	Implementation Timeframe	
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Implementation Information table (continued part 2)

Tier 2: *Targeted*									*a few students*
				Evaluation Information[2]					Evaluation Information[2]
Program Name	Resource Intensity[1]	Who Implements		Level of Evidence[1]	Findings[1]				Findings[1]
Bounce Back	High	Mental health professionals		Promising (OJJDP)	Some evidence for… **Students:** Improved PTSD/trauma and anxiety symptoms, social adjustment, behaviors, emotional expression, and coping skills; decreased depression symptoms. Relevant research was conducted with racially and ethnically diverse children exposed to a range of traumatic events in urban settings.				Some evidence for… **Students:** Improved PTSD/trauma and anxiety symptoms, social adjustment, behaviors, emotional expression, and coping skills; decreased depression symptoms. Relevant research was conducted with racially and ethnically diverse children exposed to a range of traumatic events in urban settings.

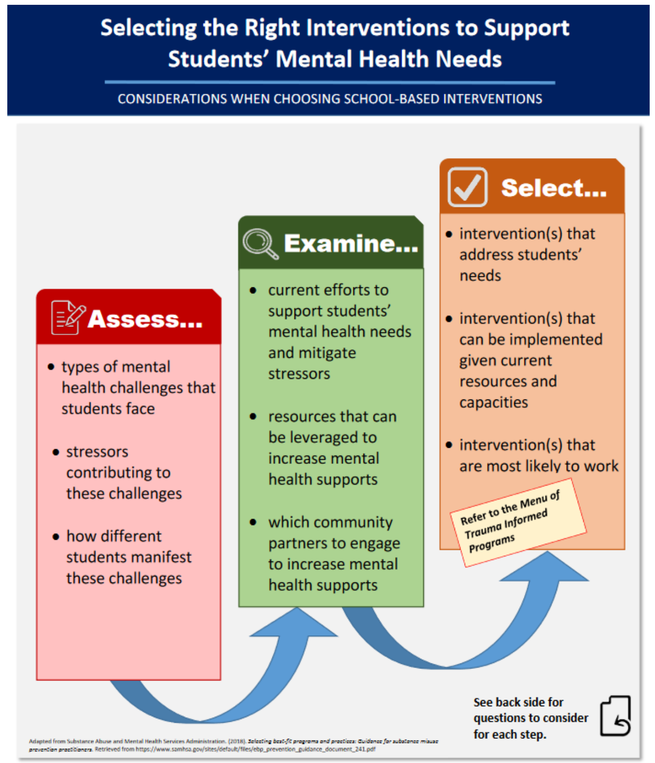
Implementation Information table (continued part 3)

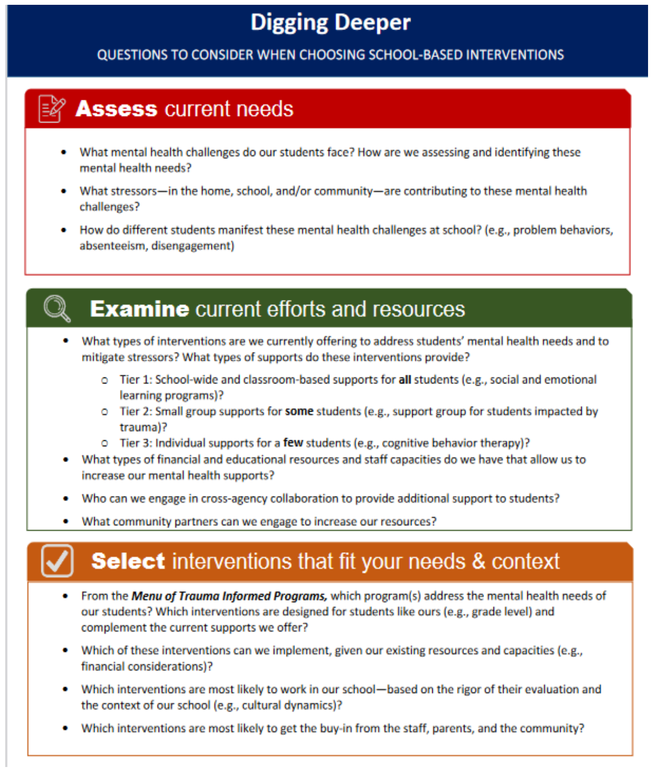
OJJDP For more information, visit: https://www.ojjdp.gov/MPG/Home/About/	
No Effects	Programs have strong evidence indicating that they did not achieve their intended outcomes when implemented with fidelity.
Promising	Programs have some evidence indicating they achieve their intended outcomes. Additional research is recommended.
Effective	Programs have strong evidence indicating they achieve their intended outcomes when implemented with fidelity.

Resource #3

Selecting the Right Interventions to Support Students' Mental Health Needs

Selecting the right interventions to support students' mental health needs





Source: https://ies.ed.gov/ncee/edlabs/regions/appalachia/events/materials/04-8-20-Handout1_selecting-right-interventions-to-support-students-mental-health-needs.pdf

(REL Appalachia at SRI International, 2020c; SAMHSA, 2018)

Assess current needs

What are students' mental health challenges (and strengths)?

What are stressors related to these challenges?

How are these challenges manifested at school?

Data

Data

Data

Using data to understand needs

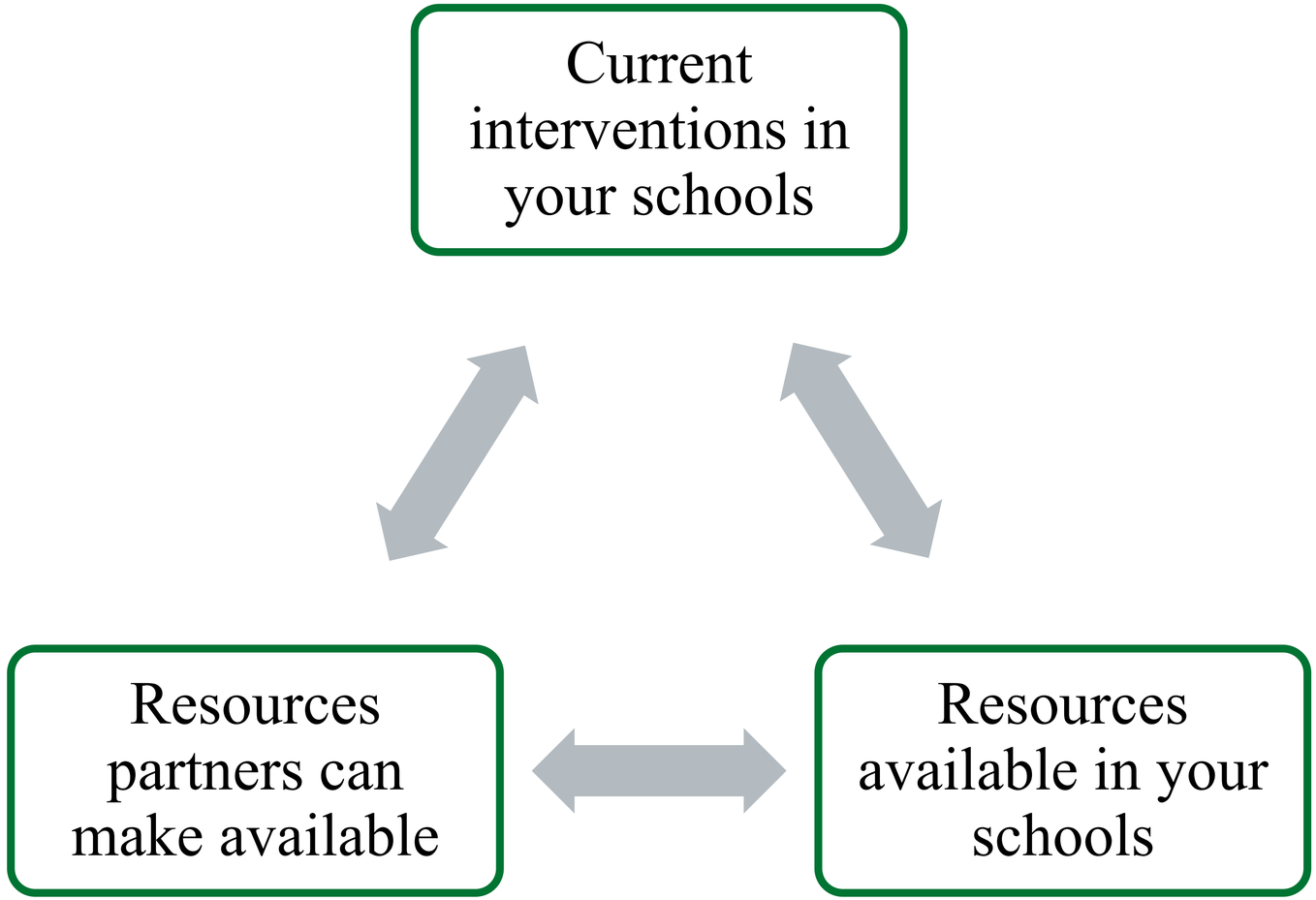
What can data reveal?	What are potential sources of the data?
Students' general patterns of behavior and emotional well-being	Student health surveys, school climate surveys, social-emotional learning (SEL) assessments
Students who may be experiencing, or are at risk for, emotional and behavioral challenges	Disciplinary records, attendance, school nurse visits, referrals to school social worker/counselor, behavior screeners/assessments
Students who may be at risk for specific mental health disorders	Mental health screeners/assessments, disciplinary records, referrals to school social worker/counselor
The impact of interventions and supports over time on students' progress	Tailored progress-monitoring tools, behavior and mental health assessments, grades, disciplinary records, attendance

How do we collect data about needs in culturally responsive ways?

- Consider the context "beyond the data":
  - Culture
  - Socioeconomic status
  - Race and ethnicity
  - Language and literacy
- Request assistance from translators and liaisons.
- Develop relationships with families and caregivers.
- Adapt for an online environment:
  - Use breakout rooms to meet with students in smaller groups.
  - Consider using digital applications (apps).

(Mason et al., 2014; Reynolds & Ramsay, 2003; Van de Vijver & Tanzer, 2004)

Examine current efforts and resources



Select interventions that fit your needs & context

Which intervention(s) will meet our students' needs and context?

Which intervention(s) can we implement given existing resources?

Which intervention(s) are most likely to be effective?

Which intervention(s) are most likely to get buy-in from stakeholders?

Menu of Trauma-Informed Programs for Schools

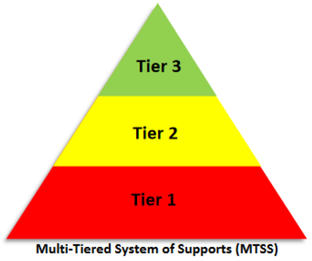
Many educators are seeking guidance to support students who have experienced trauma, particularly related to the opioid crisis. This resource was co-developed by the REL AP team and the Cross-State Collaborative to Support Schools in the Opioid Crisis (CCSSOC) and provides a list of interventions developed to address this specific need. This program list is not comprehensive and focuses on school-based programs that address general and family-based trauma; it does not include programs that focus on other types of trauma (like sexual abuse, natural disasters, or wars). It also does not include school-community collaborations, after-school or family-based programs, or therapies typically conducted in clinical settings.

This document includes two tables. The first table, **Program Descriptions** (pages 2-4, blue header), provides descriptions of each program, including hyperlinks you can click on for more information, intended audience (grades, students vs. teachers, specific sub-groups), program setting, and other important considerations.

The second table, **Implementation Information** (pages 6-10, purple header), provides helpful implementation information for those looking to select and implement one or more interventions from this list. This table includes the intensity of the resources typically needed for implementation, implementation considerations (e.g., who implements, required professional development, materials), and evaluation information. There is a **Key** for some of this information on page 5 before this table is presented.

Both tables organize all interventions using the Multi-Tiered System of Supports (MTSS) framework. Specifically, interventions are listed under one of these three categories:

- **Multi-Tiered**: Supports that include all 3 tiers
- **Tier 1**: Universal support for ***all*** students
- **Tier 2** and **Tier 3**: Targeted support for ***some*** students (Tier 2) *and* intensive support for a ***few*** students (Tier 3)



IES Institute of Education Sciences | REL Appalachia Cross-State Collaborative to Support Schools in the Opioid Crisis (CCSSOC) *Meeting Materials* | Page 1

Source: https://ies.ed.gov/ncee/edlabs/regions/appalachia/events/materials/04-8-20-Handout2_menu-trauma-informed-programs-for-schools.pdf

Any questions?

Applying the resources

Breakout groups

- Now we will break into small groups based on your roles.
- We will discuss the practical applications of these resources in your school/organization's context.

Action Planning

Planning *How ready am I to address this need?*
Strengths: What and whom does our organization already have in place to address this need? What strengths does our community bring to address this need?
Challenges: What are potential challenges to addressing this need? What structural and historical factors might be barriers to overcome when addressing this need?
Key players to involve: With whom will I collaborate to address this need? Are certain voices missing from the planning process?

Implementation *What are the steps I need to take to complete this action?*	
Immediate (within the next month)	
Medium-term (by the end of the school year)	
Long-term (in the next three years)	

Closing reflections and how the work continues

Reflections

Building Trauma-Sensitive Schools

What does this project aim to achieve?

- Develop additional resources for educators to improve their capacity to support students experiencing trauma at the school and classroom levels.
- Develop additional resources for educators to improve supports for educator well-being and secondary trauma.
- Increase educators' understanding of how to adopt and apply evidence-based trauma-sensitive practices with fidelity.
- Enhance educators' capacity to engage in individual and group reflection to support their implementation of evidence-based trauma-sensitive practices.

Training and coaching model

Four-part training series for district coaches and school teams on evidence-based, trauma-sensitive practices

"Train-the-trainer" workshops for district coaches to enhance understanding of practices and build capacity to support school teams

Direct support to school teams to implement these practices from district coaches

Trauma-sensitive classrooms and schools!

Questions?

Thank you!

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