



## School-Based Trauma & Resilience-Informed Care: Guiding Principles and Current Practices

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## **Learning Objectives**

- 1. Review the science of ACEs, toxic stress, trauma and resilience;
- 2. Describe the foundational principles of a trauma and resilience-informed approach;
- 3. Examine school-based models and practices of trauma and resilience-informed care.

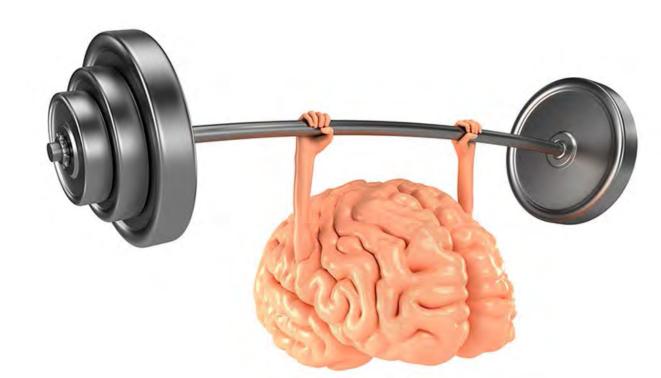




#### What are the

# strengths

you bring to this work?





## **Acknowledgments**

























## Science of ACEs, Toxic Stress, Trauma & Resilience



#### **ABUSE**

#### **NEGLECT**

## HOUSEHOLD DYSFUNCTION



Physical



Physical



Mental Illness



**Incarcerated Relative** 



**Emotional** 



**Emotional** 



Mother treated violently



Substance Abuse



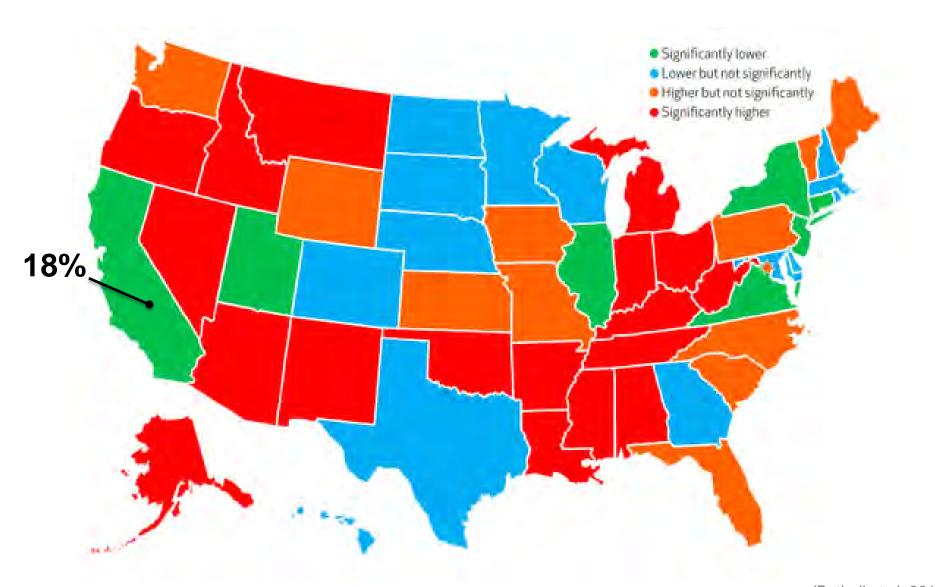
Sexual



Divorce

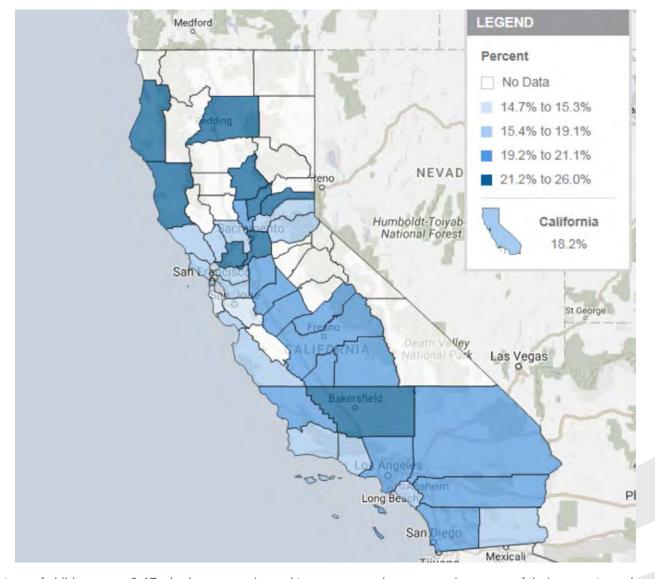


# Percentage of Children with 2 or More ACEs, Compared to the National Average (22%), 2011-2012





#### Percentage of Children with 2 or More ACEs, 2011-2012



Definition: Estimated percentage of children ages 0-17 who have experienced two or more adverse experiences as of their current age (e.g., in 2011-2012, an estimated 18.2% of California children had experienced two or more adverse experiences).

Data Source: As cited on kidsdata.org, Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health, Advancing data-in-action partnerships for children and children with special health care needs in California counties and cities using synthetic estimation from the 2011/12 National Survey of Children's Health and 2008-2012 American Community Survey (Jun. 2016).



## Impacts of ACEs on Academics

#### **ACEs associated with:**

- Repeating a grade, low school engagement, special health care needs (Bethell, 2014)
- Learning and behavioral problems (Burke, 2011)
- Academic failure, attendance problems, behavior problems (Blodgett, 2015)
- Delays on cognitive and social-emotional indicators (Blodgett, 2014)



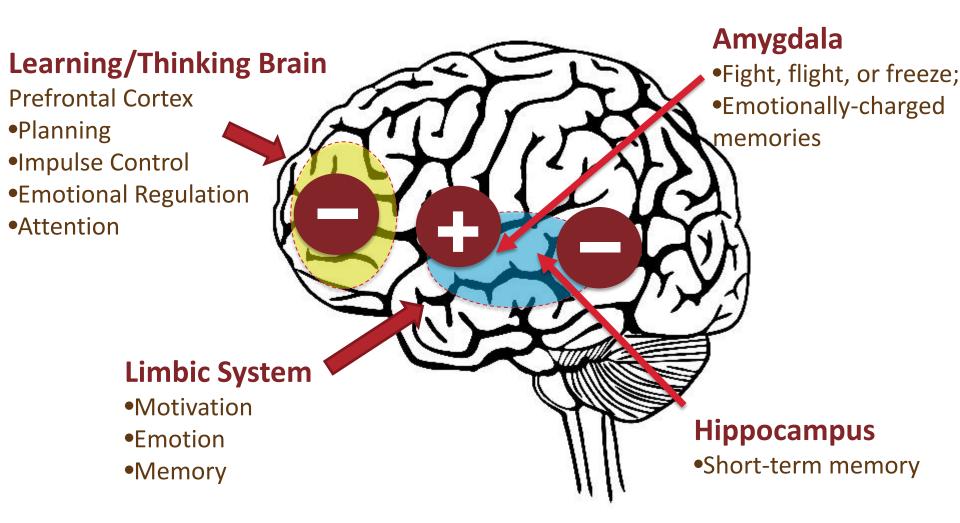
Positive Stress Mild/moderate and short-lived stress response necessary for healthy development; brief increases in heart rate and mild elevations in stress hormones

Tolerable Stress More severe stress response but limited in duration which allows for recovery; buffered by supportive relationships

Chronic or Toxic Stress Extreme, frequent or extended activation of the body's stress response without the buffering presence of a supportive adult



## Survival Mode: Flight/Fight/Freeze



Source: Community Resilience Cookbook





The event(s) or circumstance(s) causing actual or perceived physical or psychological harm

#### **Experience**

One's experience of the event – differs across individuals – beyond one's coping capacity

#### **Effects**

The resulting effects or symptoms – neurobiological and behavioral adaptations



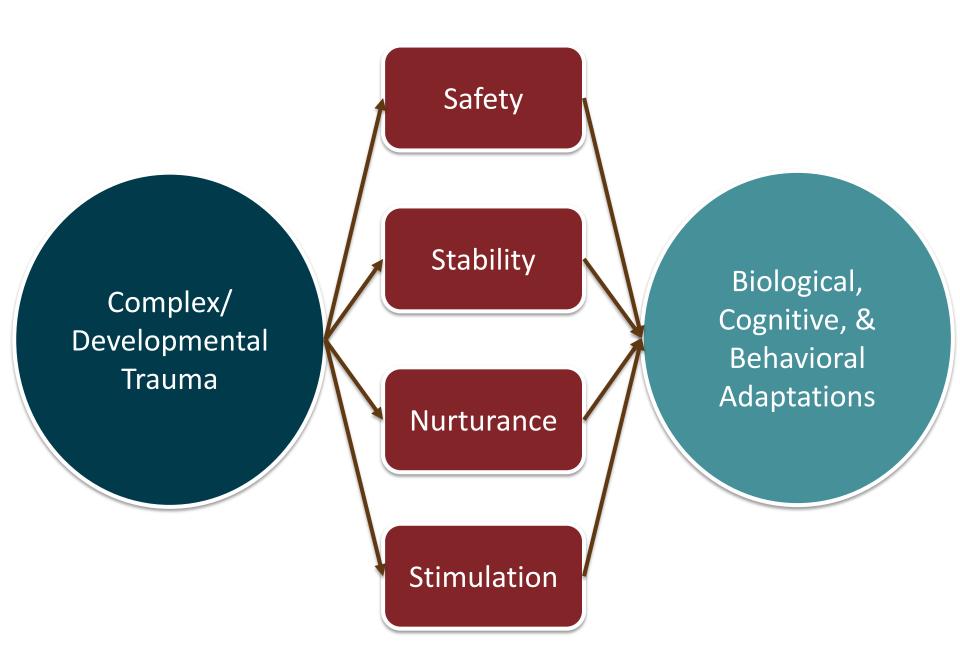
#### **Trauma**



## **Trauma Types**

- Acute trauma ——— earthquake
- Chronic trauma ———— sexual abuse
- Complex trauma ——— caregiver neglect
- Historical/Insidious trauma microaggressions
- Intergenerational trauma oppression
- Secondary/vicarious trauma ——— practitioner/client







#### The Window of Tolerance

#### **Hyperarousal Zone**

"Fight or Flight Response" (too much arousal)



- Emotional reactivity
- Defensiveness
- Feeling unsafe
- Feeling overwhelm
- •Hyper-vigilance
- Impulsivity
- Anger/Rage

#### **Optimal Arousal Zone**

"Window of Tolerance"



- Feeling safe
- Feel and think simultaneously
- Present moment awareness
- Awareness of boundaries
- Optimal learning/integration

#### **Hypoarousal Zone**

"Immobilization or Freeze Response" (too little arousal)



- No energy
- Numbing of emotions
- No feelings
- Passive, shut down
- Reduced physical movement



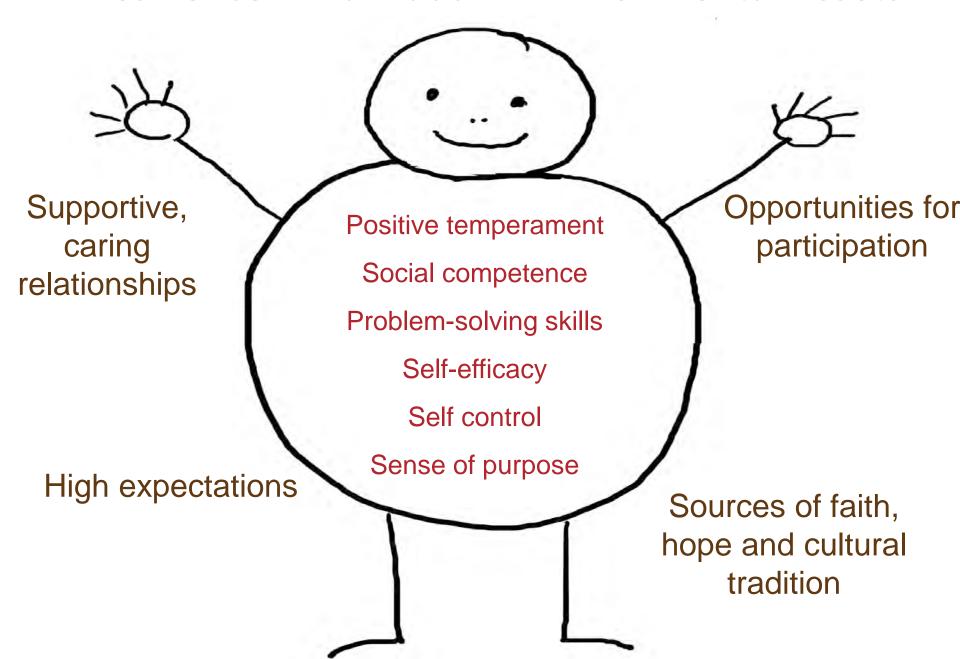
#### Resilience



Resilience is the process of successfully adapting and developing positive well-being in the face of chronic or toxic stress and adversity.



#### **Resilience = Individual + Environmental Assets**





# Models of Trauma & Resilience-Informed Care

 $\bigcirc$ 

Write 1-2 words in the chat box that describe trauma/resilience-informed care.



Trauma Organized



Trauma Informed



Healing Organization



#### THE 4 R's



#### Realize:

The prevalence of trauma in the population of your school



#### Recognize:

How trauma may be impacting the student



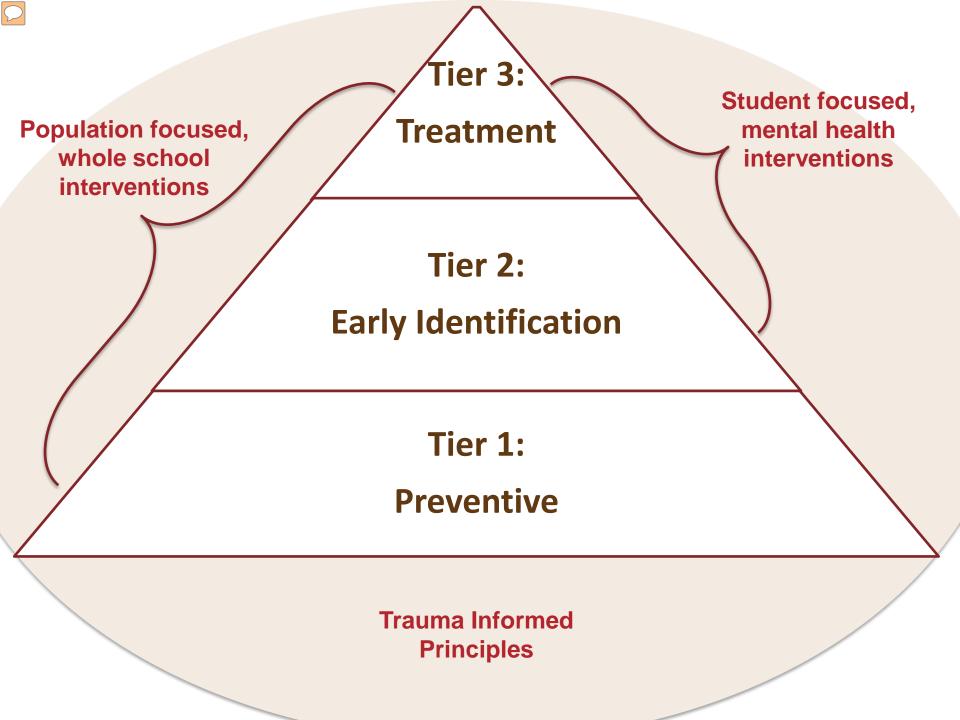
#### **Respond:**

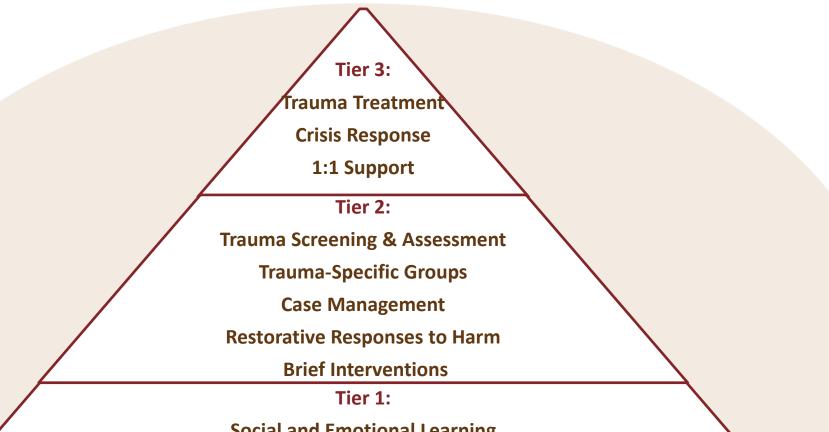
With empathy, understanding, and in a way that is relational, calming, and with cultural awareness



#### **Resist:**

Re-traumatizing responses, consequences, judgment, or actions



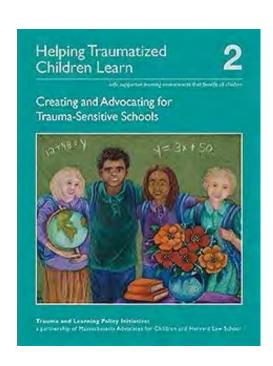


Social and Emotional Learning
Positive Behavioral Interventions and Supports
Restorative Practices, Multi-Cultural Education
School Climate, Teacher Training on Trauma-Informed Practices

#### **Trauma-Informed Principles**



## **Population Focused Interventions**

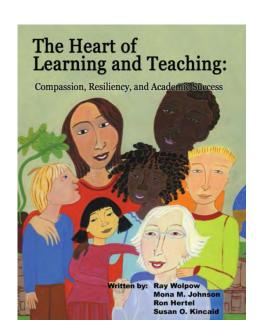


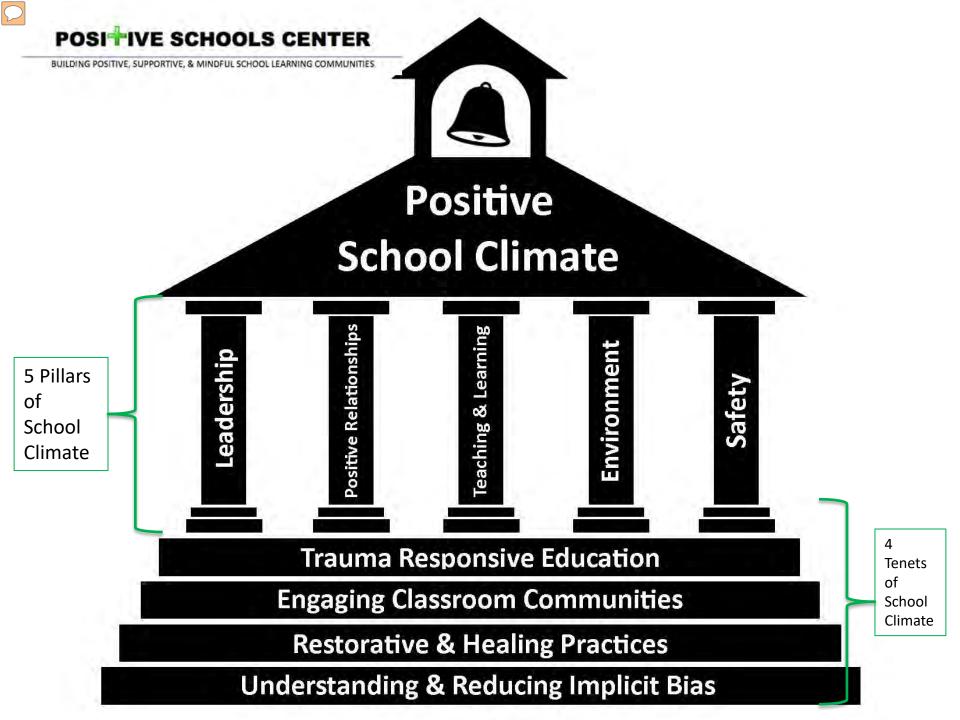
Harvard Law School & MA Advocates for Children

Trauma and Learning Policy Initiative

Washington State Office of the Superintendent of Public Instruction

Compassionate Schools Initiative







# WASHINGTON STATE UNIVERSITY EXTENSION

#### **CLEAR**

(I)

Readiness Assessment, Infrastructure Development, Capacity Building and Sustainability Planning

Trauma
Enhanced SEL
Universal
Practices

6

Common Core Alignment/ Other State and Local Initiatives

Trauma-Informed
Educational
Practice and
Organizational
System Change:
Staff Professional
Development,
Coaching, and
Consultation

(3

Teacher's
Individualized
Student Response
and Classroom
Management

RTI
Tier 2 and 3
Trauma Informed
Supports

The CLEAR Team, Building and District Leadership Development

(Source: http://ext100.wsu.edu/clear/)



## UCSF HEARTS

Understand Stress & Trauma

Promote
Resilience &
Social-Emotional
Learning

Facilitate
Collaboration &
Empowerment



Practice Cultural Humility & Responsiveness



Establish Safety & Stability

Foster
Compassionate &
Dependable
Relationships

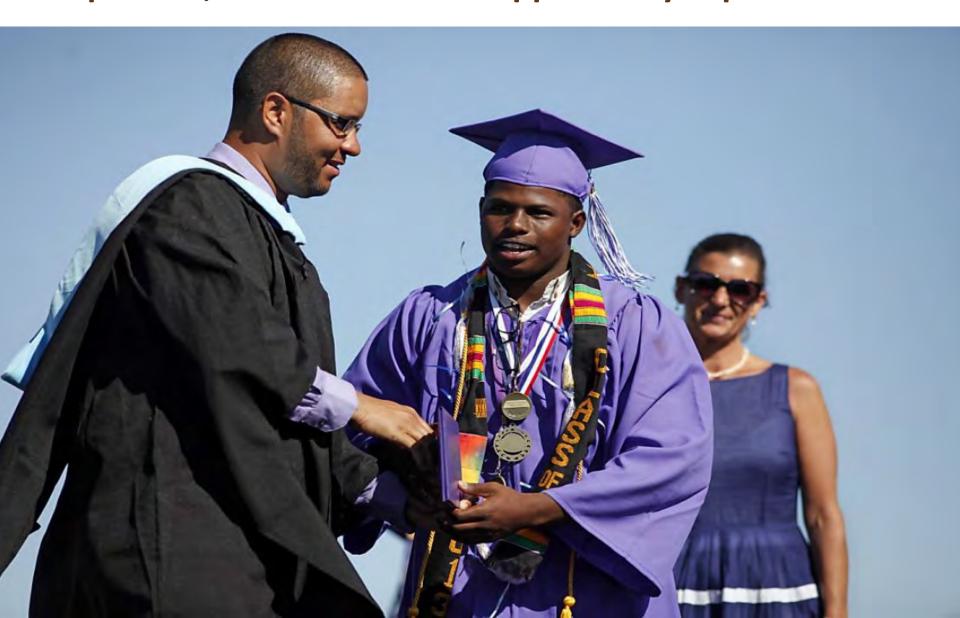
(Joyce Dorado, 2016; Trauma Transformed)



#### **Understand Stress and Trauma**

- ✓ Train all staff on the effects of stress & trauma including self care
- ✓ Assess current practices and policies
- ✓ Shift your perspective from "What is wrong?" to "What has happened?"
  - ✓ What is happening here?
  - ✓ What is the underlying need?
  - ✓ How can we best meet this need?

When we come from a place of understanding, empathy and compassion, we can co-create opportunity & possibilities ...



### In practice:

- Trainings for teachers on trauma and impact of trauma on stress
- Collateral consultation for teachers by clinicians
- \*Wish\* Monthly consultation groups for educators (grade level meetings)
- Training for OUSD parent liaisons and WOPAN parent and caregivers on impact of trauma and stress
- Mindfulness and wellness opportunities for educators hosted by School Health Clinic



#### **Practice Cultural Humility & Responsiveness**



Self-reflection of cultural biases

Respect culture and diversity within the community

Recognize power imbalances

Avoid judgment, shame and blame



## In practice:

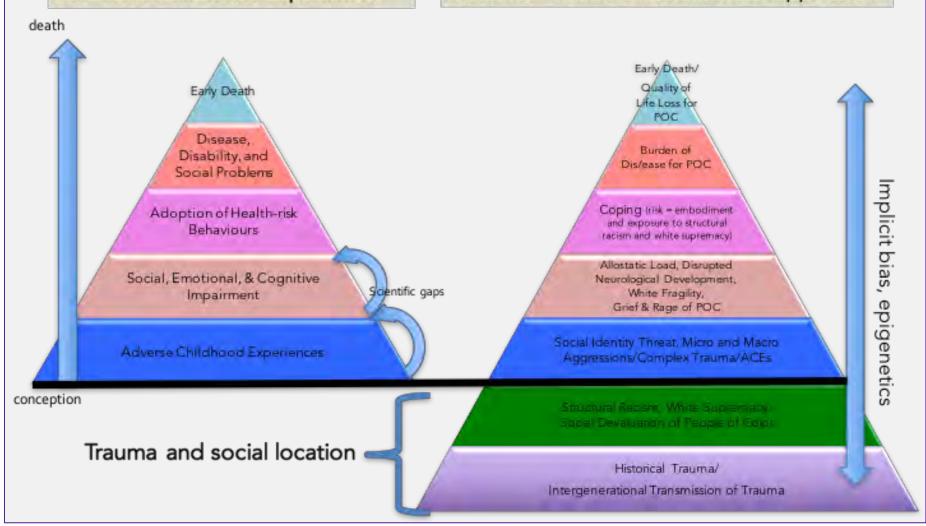
- Commitment to lifelong learning, self-evaluation and self-critique and holding each other accountable.
- Developing community partnerships for advocacy (Partnerships with AAMA, LMB)
- Building common vocabulary to have critical conversations (insidious trauma, microagressions, historical trauma)

# Racing ACEs If it's not racially just, it's not trauma-informed



Adverse Childhood Experiences\*

Historical Trauma/Embodiment of Oppression







## **Establish Safety & Predictability**

- ✓ Physical Safety
  - Protection from harm
  - Clear safety procedures
  - Reduction of unnecessary triggers
- ✓ Emotional Safety
  - ✓ Build emotional management skills
  - ✓ Create "safety" plans
- ✓ Social Safety
  - ✓ Build supportive relationships
  - ✓ Prevent victimization and abuses of power
- ✓ Predictability
  - √ Routines and consistency
  - ✓ Preparation for changes and transitions

### In Practice:

- Coordination with school and school district
- Crisis response after incident of community violence
- Provide resources and share best practices
- Support healing voices of students and families





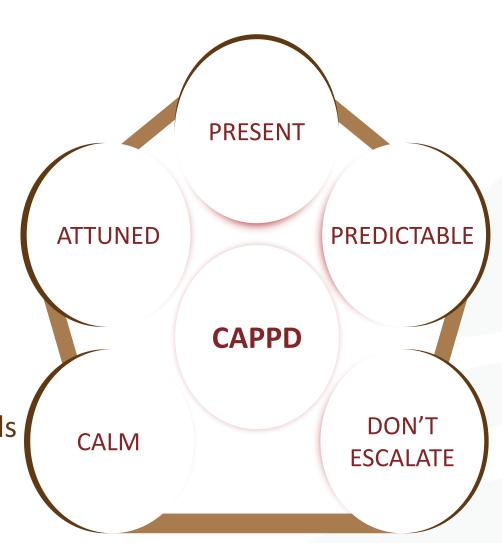
# Foster Compassionate & Dependable Relationships

# ✓"I" Interventions

- Behavioral health
- Trauma interventions

# √"i" interactions

- Express genuine concern
- Manage own stress so you can attune to youth's needs





### In Practice:

- Seeking Safety
- CBITS
- TGCT-A
- TF-CBT
- ARC



- Every relationship is an opportunity for healing
- Welcomes and hellos
- Celebrate successes
- Honor cultural traditions
- Examples from participants

For a comprehensive list of evidence-based interventions, visit:

- SAMHSA's National Registry of Evidence-Based of Programs and Practices
- The National Child Traumatic Stress Network Treatments that Work

Childhood trauma Changing minds."

#### DEFENDING CHILDHOOD







#### COLLABORATE

Ask for their opinions.

READ MORE [+





#### INSPIRE

Expose them to new ideas.

READ MORE



# **Facilitate Collaboration and Empowerment**

- Allow youth voice and choice
- Provide meaningful opportunities for engagement
- Share power and decision-making
- Adopt a strengths-based approach



# In practice:

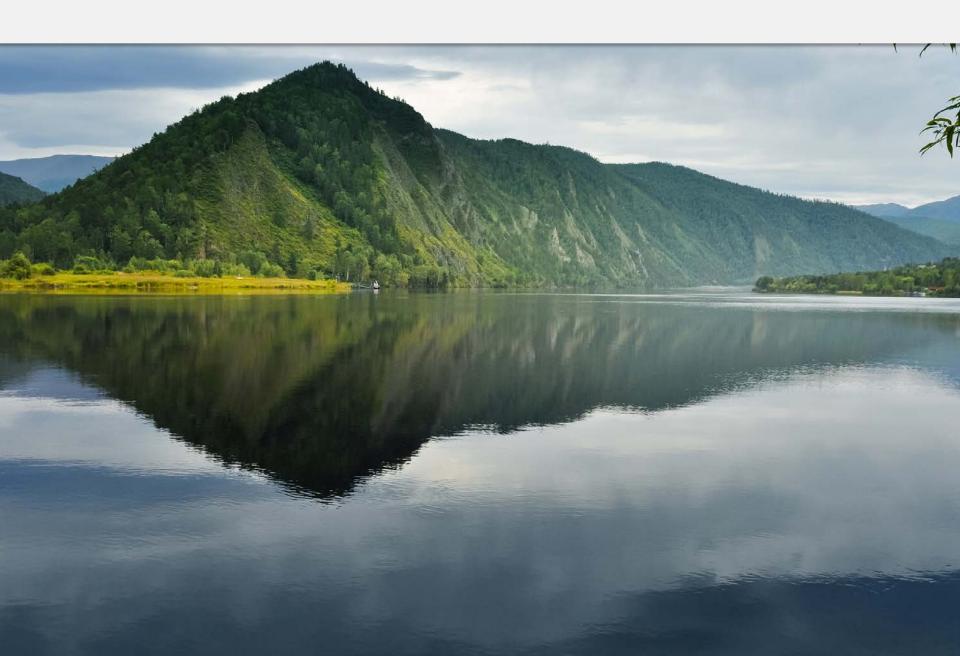
- Site youth and community advisory committee
- Clients involved in treatment planning
- Transparency and choice
- Health careers and youth internships
- "Nothing for us without us"



# Promote Resilience & Social Emotional Learning

- Develop an attitude of resilience
- Connect young people to appropriate care, supports and opportunities
- Maintain high expectations
- Enhance life skills (self-regulation, problem-solving, etc.)

# **Lessons Learned**





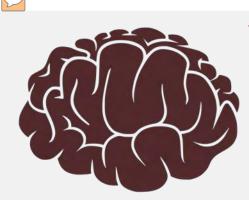
# Closure





Any Questions





Write down one thing you learned.



Write down one thing that inspired you.



Write down one action you will take.





# Thank You!

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