A student interviews her former neighbor for a school project: "I feel like my life keeps getting smaller and smaller," Maggie told me, "and one day I'm afraid we won't have anything and we'll be living in the street." Maggie says she has nightmares about that happening. I wanted to promise her that I would never let that happen to her, but realized that that would be a promise I might not be able to keep.

The webinar will begin shortly.
Maggie goes to school every day. Her teacher lets her brush her teeth in the classroom. She takes showers at friends' homes. Sometimes, she just takes a sponge bath - washing off in the car. During the summer, she and her family stay near a campground and use those showers.

Maggie does her homework in the car, at school or in the library. The library has been great for Maggie and her family because there are lots of free programs there. I hope they never close that library because of budget cuts.

The webinar will begin shortly
She begins calling herself “ghetto.” She dares girls to fight her and challenges boys to arm-wrestle, flexing the biceps she has built doing pull-ups in Fort Greene Park. The boys watch slack-jawed as Dasani demonstrates the push-ups she has also mastered, earning her the nickname “muscle girl.”

Her teachers are flummoxed. They assume that she has shed her uniform because she is trying to act tough. In fact, the reverse is true.

*The webinar will begin shortly*
The Trauma Center at Justice Resource Institute evaluated the progress of a group of women with Post-traumatic Stress Disorder (PTSD) that was unresponsive to treatment.

Sixty-four women took yoga classes for 10 weeks:
- Experienced a 33% decrease in symptoms.
- 52% no longer qualified for the PTSD diagnosis.

The webinar will begin shortly.
The decrease in symptoms was significant in comparison to a control group.

Improvements were comparable to research-based psychotherapy and pharmacologic treatment.

Posited that yoga helps individuals:
- tolerate physical and sensory experiences associated with fear and helplessness.
- increase emotional awareness and affect.

The webinar will begin shortly.
“Get your things and leave,” Miss Holmes tells her. Dasani will be out of school for a whole week. She cannot speak.

To be suspended is to be truly homeless.

The webinar will begin shortly.
Chronic Trauma

Fear, Avoidance, Aggression, Uncontrolled Emotion

Cycle of Re-Enacting Trauma

Perceives Safe Place (School) as Threat

Trauma Re-writes World View, Stress Response

Fear, Avoidance, Aggression, Uncontrolled Emotion

Chronic Trauma
Dasani closes her eyes and tilts her head toward the ceiling of her classroom. She has missed breakfast again. She tries to drift. She sees Florida. For a child who has never been to the beach, television ads are transporting. She is walking in the sand. She crashes into the waves.

The webinar will begin shortly
<table>
<thead>
<tr>
<th>Event</th>
<th>Details</th>
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<tbody>
<tr>
<td>9/11</td>
<td>- Survivors ran toward home</td>
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<tr>
<td></td>
<td>- 5% of survivors developed PTSD</td>
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<tr>
<td>Hurricane Katrina</td>
<td>- Survivors ran from home, lost home</td>
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<tr>
<td></td>
<td>- 33% of survivors developed PTSD</td>
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</table>
NCHE

- Operates the U.S. Department of Education’s technical assistance & information center on homeless education

- Offers:
  - Website: www.serve.org/nche
  - A toll-free helpline: Call 800-308-2145 or e-mail homeless@serve.org
  - A listserv: Visit www.serve.org/nche/listserv.php for subscription instructions
  - Free resources: Visit www.serve.org/nche/products.php
TRAUMA IN THE CLASSROOM: MINIMIZING DISRUPTIONS TO LEARNING
TODAY’S AGENDA

- Looking at the Definition of Trauma
  - Complex trauma
- Who it impacts & how
  - Signs
  - Triggers
- Trauma Informed Organizations
  - Strategies for schools
- Secondary Trauma
Why This Discussion Is Important

- One in four school children has experienced a traumatic event
- Rates of anxiety & depression are higher in homeless children vs. their peers
- More than 90% of low-income & homeless women experienced physical & sexual assault
- The SHiFT Study found that trauma severity predicts long-term housing instability
A very difficult or unpleasant experience that causes someone to have mental or emotional problems, usually for a long time.

External events that overwhelm a person’s coping responses.

An emotional response to a terrible event.

While these feelings are normal, some people have difficulty moving on with their lives.
Groups, organizations, communities, & individuals

Every aspect of life
  - Physical health
  - Behavioral health
  - Ability to learn
  - Relationships
Trauma occurring early in life has greater impact & is more likely to result in greater damage

- Long-term implications of harm to developing brains & bodies
- Harm at the hands of an authority figure is particularly damaging

Multiple sources of trauma or repetitive experiences of trauma magnify the impact
Immediate response: shock, denial

Long-term reactions
- Unpredictable emotions
- Changes in thoughts or behavior patterns
- Strained relationships
- Physical symptoms like headaches or nausea
- Flashbacks
THINGS TO REMEMBER

No two people respond exactly the same
Trauma can affect cultures differently

- Gender
- Age
- Race
- Nationality
- Religion
- Income
- Education & profession
- Location: urban, rural, etc.
Something that sets off an action, process, or series of events

Sometimes referred to as a threat cue

Can include:

- Not being listened to or tone of voice
- Loud noises or yelling
- People being too close
- Someone opening the student’s desk or locker
- Withholding food
TRIGGERS

- Time of day or year
  - Start or end of day
  - End of school year
  - Time of year when student experienced trauma

- Particular activities
  - Essays about summer activities
  - Painting a picture of family or home

- Particular items that remind people of loss or harm
Physical symptoms of distress that may signal dangerous proximity to a trigger

- Restlessness
- Agitation
- Pacing
- Shortness of breath
- Sensation of tightness in chest
- Sweating
- Skin picking, rubbing, or similar
# DISTRESS SIGNALS

- Clenching teeth or fists
- Hand wringing
- Bouncing legs
- Shaking
- Crying
- Giggling
- Pounding heart
- Singing or yelling
- Eating food excessively fast
- Rocking
- Swearing
- Coloring so hard it tears paper
- Hostility
- Isolation
- Refusal to look at others
When overwhelmed by a trigger, the parts of the brain become disassociated:
- Logical, speaking side of brain shuts down
- Emotional, reactionary side of brain takes over

In the midst of the trigger, the person may need help regulating

Over time, they’ll become better at self-regulating
- Remove the trigger
- Change the type of activity
- Do anything calming
  - Listen to music
  - Read in the corner
  - Allow students to have transitional objects

Be alert to students who are coping by re-enacting trauma; avoid being drawn into “role playing” the trauma
A program, organization, or system that is trauma informed:

1. Realizes the widespread impact of trauma & understands potential paths for recovery;

2. Recognizes the signs & symptoms of trauma in clients, families, staff, & others involved with the system;

3. Responds by fully integrating knowledge about trauma into policies, procedures, & practices; &

4. Seeks to actively resist re-traumatization.”

http://www.samhsa.gov/nctic/trauma-interventions
TRAUMA INFORMED KEY PRINCIPLES

- Safety
- Trustworthiness & transparency
- Peer support
- Collaboration & mutuality
- Empowerment, voice, & choice
- Cultural, historical, & gender issues
STRATEGIES FOR SCHOOLS

- Maintain a set schedule of events
  - Warn students of what will happen next
  - Warn students before turning lights out, making loud noises, etc.

- Look at your school from the perspective of the student
  - Would you feel safe? Why? Why not?

- Do the same from the perspective of a parent
STRATEGIES FOR SCHOOLS

- Seek parent & student input
- Identify your own triggers
- Be proactive: waiting until the problem escalates results in re-traumatization
- Consider the impact of language
  - Survivors vs. Victims
  - Strategies for classrooms, not fixing people
<table>
<thead>
<tr>
<th>Instead of</th>
<th>Try this instead</th>
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<tbody>
<tr>
<td>“Fill out this paperwork”</td>
<td>“Thank you for coming in today. If you can help me by completing this paperwork, I’ll be able to...”</td>
</tr>
<tr>
<td>Closing the office door</td>
<td>Ask the parent or student if it’s ok to close the door</td>
</tr>
<tr>
<td>Telling a parent they must speak to someone, but you don’t know when the person will be in</td>
<td>Offer to schedule an appointment with the parent</td>
</tr>
<tr>
<td>Sending a parent a notice their child is being expelled due to absences/tardies</td>
<td>Contact the parent to express concern about the family, offer transportation services</td>
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National Institutes of Health funded the development of a model for use by teachers and other educators. Based on a model designed for mental health clinicians, the model targets students grades 5 thru 9. It includes 10 weeks of classroom interventions.
Sessions follow lesson plan format

Manual provides all handouts, worksheets, & instructions

Focuses on helping students

- Feel more normal by explaining common trauma reactions
- Link thoughts to feelings, combat automatic emotion-based thoughts
- Relax their bodies to combat anxiety
- Develop a trauma story that moves from the community to the individual
Initial pilot showed

- Small reductions in trauma symptoms
- Parents & students reported good to high satisfaction with program
- Teachers reported small improvements in student behavior

https://traumaawareschools.org/sset
SECONDARY TRAUMA

- Presence of post-traumatic stress disorder (PTSD) symptoms caused by at least one indirect exposure to traumatic material
- Can have same level of impact as direct, or primary, trauma
- Sometimes referred to as compassion fatigue
Emotional exhaustion, lowered sense of accomplishment, or depersonalization

Develops as a result of general work-related stress

Does not result from exposure to a traumatic event

Secondary Trauma is not typical stress, nor is it burnout!
EVALUATING SECONDARY TRAUMA

Questions to ask yourself:

- Do you get angry or terse over insignificant things?
- Does the work you do leave you feeling depressed? Satisfied?
- Do you find yourself pre-occupied with students?
- Do you leave work at work?
- Do you have a history of trauma that may raise your risk?
THANKS FOR JOINING US!

- Live webinar participants will receive a follow-up e-mail shortly
  - Link to webpage for downloading handouts
  - Link to a brief, anonymous online evaluation; once your evaluation is complete, you’ll be directed to a webpage to download a certificate of completion, if desired

- Presenter Contact Information
  - Christina Endres, cendres@serve.org
  - Jan Moore, jmoore@serve.org
  - Karen Madrone, kmadrone@serve.org