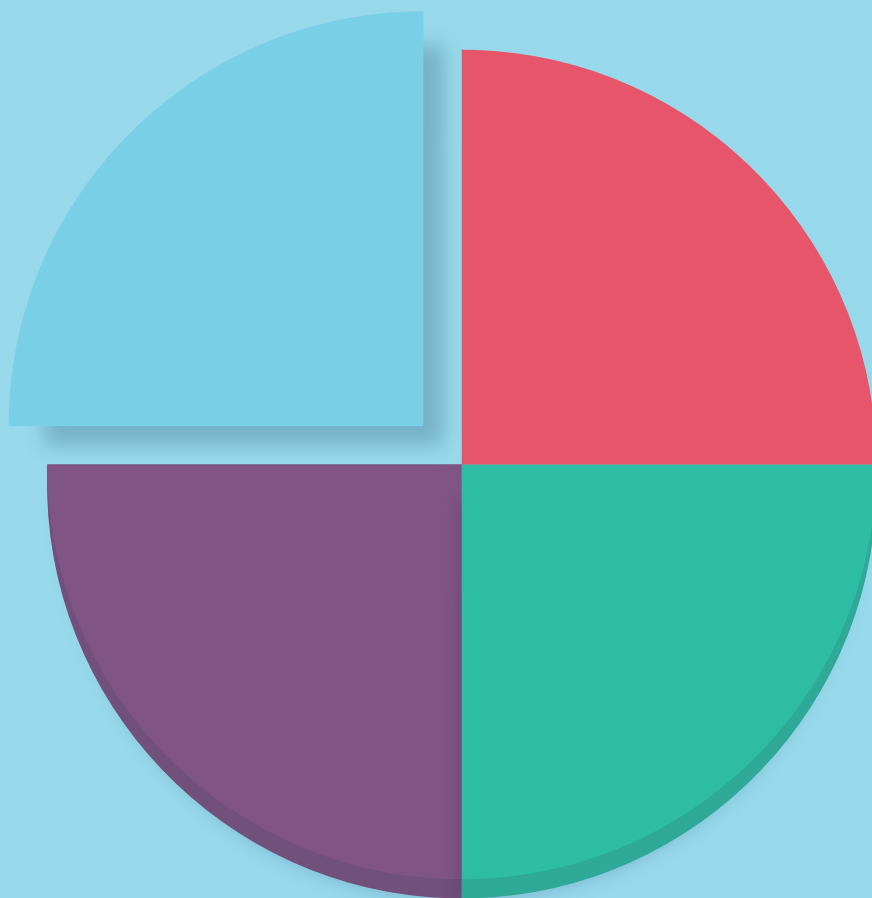


Compassionate Learning Communities
Supporting a Trauma-Informed Practice

Facilitator Guide

UNDERSTANDING



Acknowledgements

Planning Committees

- Denise Augustine, Indigenous Education Field Liaison, Ministry of Education
- Scott Bedall, Director Student Wellness and Safety, Ministry of Education
- Martin Breuhan, Project Lead, Inclusive Education, Ministry of Education
- Juanita Coltman, First Nations Education Steering Committee (FNESC)
- Colleen Hodgson, Director of Education, Ministry of Education, Métis Nation BC
- Wanda Klics, Principal, Voyageur Elementary, School District #28 (Quesnel)
- Sheryl Koers, Assistant Superintendent, School District #79 (Cowichan)
- Patricia Kovacs, Director, Inclusive Education, Ministry of Education
- Dan Lowndes, District Principal of Support Services, School District #28 (Quesnel)
- Dan Malone, Executive Director, FPSS Foster Parent Support Services Society
- Shannon Mitchell, Instructional Designer, Open School BC
- Linda O'Neill, PhD. CCC, CTS, Subject Matter Advisor, University of Northern BC
- Deborah Pawar, Director, Child and Youth Mental Health Policy, Ministry of Children and Family Development
- Shelaina Postings, Executive Director, Workforce Development and Governance, Ministry of Education
- Sanja Ristic, Coordinator Children and Youth in Care, Ministry of Education
- Steven Smith, Director, Life Course Prevention, Ministry of Health
- Ashley Turner, Provincial Wellness Coordinator, Ministry of Health, Métis Nation BC
- Katy Winship, Senior Policy Analyst, Strategic Priorities, Ministry of Education
- Tim Ylagan, District Principal of Support Services, School District #79 (Cowichan)

Working Group

- Martin Breuhan, Project Lead, Ministry of Education
- Sheryl Koers, Assistant Superintendent, School District #79 (Cowichan)
- Patricia Kovacs, Director, Inclusive Education Branch, Ministry of Education
- Shannon Mitchell, Project Manager, Open School BC (OSBC)
- Linda O'Neill, PhD. CCC, CTS, UNBC, Resource Author and Subject Matter Advisor

Presenters and Contributors

- Chief Shane Point, Musqueam Nation
- Roxanne Blemings, Director, Mental Health and Substance Use, Ministry of Health
- Rachel Calder, Executive Director, Artemis Place Society
- Danielle Carter-Sullivan, Director, Strategic Priorities, Learning Division, Ministry of Education
- Brittney Bertrand, Métis Nation BC
- Suman Hothi, Lead Clinical Trauma Counsellor, Borstal Association
- Linda Lamers, Education Officer, Learning Division, Ministry of Education
- Stephanie Martin, Community Development Manager, McCreary Centre Society
- Cheyleene Moone, Youth Research Academy Alumni, McCreary Centre Society
- Linda O'Neill, PhD. CCC, CTS, Associate Professor, Counselling, University of Northern BC
- Laureen Peterson, Métis Nation British Columbia
- Sonia Pieraccini, Teacher, Annieville Elementary, School District #37 (Delta)
- Allison Pooley, Executive Director, Asante Centre
- Nathan L. Rock, Executive Director of Operations, Borstal Association

- Jeffrey Schiffer, PhD, Indigenous Affairs Consultant, City of Toronto
- Nancy Scott, Funding Administrator, Inclusive Education, Ministry of Education
- Daniel To, PhD, District Principal, Education Services, School District #36 (Surrey)
- Jennifer Wolowic, PhD, Managing Director Stigma and Resilience Among Vulnerable Youth Centre (SARAVYC), UBC School of Nursing

Production and Graphics

- Aaron Florian, Production Technician, OSBC
- Ian Horner, Production Technician, OSBC
- Farrah Patterson, Production Manager, OSBC

Media

- Janet Bartz, Manager Instructional Media, OSBC
- Matthew Davison, Senior Producer, Basetwo Media

Pilot Session

- Jill Fergus, Support Teacher, Self-Regulation & Resiliency, School District #79 (Cowichan)
- Richard Matthews, District Counselor, Safe Communities Support, School District #79 (Cowichan)
- Colleen Mullin, Vice-Principal, Alexander Elementary, School District #79 (Cowichan)
- Mary Peter, Principal of Indigenous Education, School District #79 (Cowichan)

Advisory / Open School BC

- John Anderson, Manager, Operations
- Sophia Barton-Bucknor, Manager of Instructional Services
- Jennifer Riddel, Director
- Shannon Sangster, Administration
- Sheena Wilson, Education Project Manager

Learning Division, Ministry of Education

- Jennifer McCrea, Assistant Deputy Minister, Learning Division, Ministry of Education
- Cloe Nicholls, Executive Director, Learning Division, Ministry of Education

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Introduction

This guide is intended to support the information found in the slide deck presentation. We understand that many trauma-informed educators are working throughout B.C. and elsewhere and encourage you to customize the presentation material in any way that makes it more relevant to your staff and school. We have included *sample speaking notes* (below; also included in the *notes* section of the PowerPoint presentation). These notes are intended to provide a script where one is desired, but if you prefer, please feel free to use your own words. You can read the notes ahead of your presentation for background information on each slide. In some cases, there are opportunities to raise questions with the group and the background information is intended to support you to answer/debrief various topics.

It is always challenging to estimate the time for such a presentation due to different levels of engagement with various topics and questions, but we recommend scheduling a minimum of one hour for each of the four presentations included in the Compassionate Learning Communities resource set.

In order to provide participants with time to reflect on and discuss the material, we suggest spacing the four presentations several months apart. Presenting more than one topic at a time is strongly discouraged as it does not provide participants with time to reflect and apply what they learned in their classrooms and schools before supplementing their practice with the information from the next topic.

Needed materials:



- Laptop and Projector
- Internet connection (wireless will suffice in most cases) to play videos directly from YouTube links embedded in the PowerPoint presentation (alternatively, videos can be downloaded prior to the presentation from links provided)
- Participant handout (student profiles/case studies for discussion with the questions related to each for the small group discussion, PowerPoint slides with notes field (fillable PDF file in digital format)



Why Trauma-Informed Practice Matters in Education

Trauma-informed practice, sometimes referred to as ACEs (Adverse Childhood Events) informed practice, is a compassionate lens of understanding that is helpful to all children, youth and adults, especially those who have experienced traumatic events and early hardships. The main components of this lens are rooted in understanding that all behaviour and actions happen for a reason and that it is up to each of us, in our helping capacity, to acknowledge current coping strategies and to assist children, youth and adults find other ways of coping, building on personal capacity and growth through supportive relationships and creative opportunities.

The lens of trauma-informed practice is relevant to all helping practitioners as it focuses on safety, stabilization and reconnection. Trauma-informed is different than the trauma-specific work that many counsellors and psychologists do, which requires specialized clinical training. In the education system, school counsellors and school psychologists may have this additional training to support children and youth with significant adversity issues, but educators and staff stay in the world of trauma-informed to ensure competence in helping.

Trauma-informed practice is not intended to be a one-shot training or the latest educational fad; it involves the long-term work of transforming schools into compassionate learning communities. Trauma-informed is not about doing more in the classroom and community but rather, about doing things differently. This lens is about life and how children's environments have the potential to shape their beliefs and behaviours along the way.

Safety in Presenting: Care of Participants

In keeping with a trauma-informed lens, facilitators are encouraged to present the material as safely as possible, encouraging participants to meet the material at their individual level, especially if participants themselves are from a background of adversity. Encourage participants to move around, have tea, coffee or water and to leave the room if they feel triggered or overwhelmed. The sharing of personal histories is not recommended in this format. Facilitators are encouraged to have contact information for community resources available to support participants and preferably, to host the workshop with the presence of a school counsellor or school psychologist. The pace of presenting the information and the need for compassion in facilitation are important elements.

We now understand that many people working within our schools have experienced adverse childhood events and we ask that you do your best to ensure everyone's safety. The sharing of detailed traumatic material is strongly discouraged! The focus here is on better understanding and providing support for the affected behaviours we observe with children and youth.

To ensure participant wellbeing, please check with your school counsellor or district school psychologist before adding additional material to this presentation.

Before You Present

Schools and communities are diverse; facilitators are encouraged to customize the information to best fit the children, youth, caregivers, educators and staff in their community. You are encouraged to engage with the material before presenting to ensure that it fits with your school and community culture, modifying or adapting the information as required.

Many caregivers, educators and staff have been working within a trauma-informed lens for years but may not have used this specific term to describe how they work with children and youth. You are encouraged to honour and acknowledge the expertise and experience in each room, in each training session.

This guide contains information that you might want to summarize for each slide (what this is, why it is important), questions on which you might suggest participants reflect individually or in small groups (wondering questions), and group discussion topics intended for participants to share their unique perspectives, understanding of the material, and ideas that may enhance their trauma-informed practice (possibilities discussion). Each of the four PowerPoint presentation begins with a child's scenario and closes with how an educator might intervene. The presentations also include the voices of educators and youth who have experienced compassionate practice in their education journey.

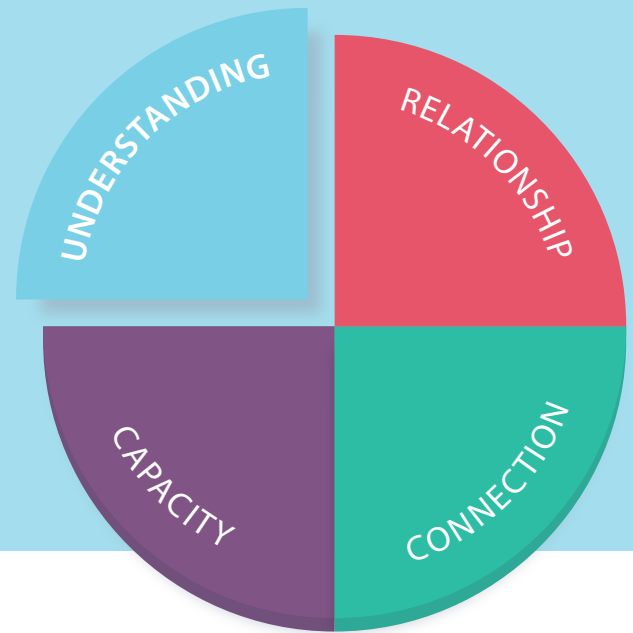
If time and resources permit, please watch the [Meet the Speakers](#) video; alternatively, you may wish to read brief introductions to the specialists who appear in the video interviews (provided at the end of this guide).

Component 1

Understanding

Understanding is the first part of a four-part framework for creating compassionate learning communities.

- Foundational, scientific knowledge
- Students' specific contexts
- Educators' needs



Slide 1

Introduction (What this is, why it is important)

Thank you for joining us for the *Understanding* presentation on building compassionate learning environments. This presentation focuses on understanding through foundational information, the potential impact of early adverse events including interpersonal neurobiology and links to affect regulation, learning and social engagement.

This information is so important for supporting all children and youth with best practice in education, but some of it may be difficult to hear, especially if you have similar experiences in your own life. You are encouraged to take care of yourself during the presentation, stand, walk about, leave the room if you need to and use the support offered if you believe it would be helpful. As difficult as it can be to hear, this information provides hope for better supporting all children in the education system.

Some objectives of this presentation:

- Gain more familiarity with the terminology of trauma-informed practice and adverse childhood events.
- Understand the neurobiology involved in adverse childhood events and stressful environments.
- Understand more about when you are needed to intervene and support children, and how to do so effectively.
- Begin to accommodate students with flexibility as needed, considering their specific environment and context.
- Begin to integrate local knowledge with a broader understanding of the effects of adversity on child and adolescent development.

▶ Slide 2 **Brian's Story**



I am 6 or 16. I live in an unpredictable world. I never know how my caregivers will respond — each day is different. I have learned to be invisible when I need to be, and to fight when I have to stay safe. School is very different than my home environment, I do not feel safe, so I make myself invisible when asked to try new things, and I fight when I am scared and afraid. That is what I know to do...now.

Beginning with Brian's story. In your participant handout, you will find a description of Brian, a child from an adverse early environment and how he may present at school. If you are working in an elementary school, Brian is 6, if presenting to a secondary school, Brian is 16. We will come back to Brian at the end of our time together. We imagine that many of us have had a child, like Brian, in our class. Consider how you might intervene with this child or youth. There will be time to share your ideas with colleagues before reviewing specific suggestions for working with Brian at the end of this presentation.

▶ Slide 3 **Compassionate Educator**



When we understand the brain science behind behaviors, we understand the intended communication of the student. Students are not playing us or tricking us to get out of the classroom. No child wakes up and says, "I'm going to be the biggest jerk I can today so that I get taken out of class and away from my friends and fun activities". Each student deserves awareness of what they are experiencing, tools to practice and explore, a place to reset, and attachment to at least one healthy adult to find their way. Time to trust, risk, and effectively utilize strategies takes time, sometimes years. The big people in their lives need to be BIG people.

Lisa Norman, principal

All 4 presentations include the voices of compassionate educators who share their thoughts on aspects of trauma-informed practice in schools. In your participant handout, you will find the full quote from this compassionate admin educator who is passionate about a trauma-informed approach, stressing the need to understand why children and youth do what they do.

▷ Slide 4 **Understanding Adverse Events and Children:** *Coping Anyway I can*

Based on decades of research, we now have a better understanding of the complex interaction between children, parents/caregivers, environment and stress. Understanding adverse events and children, especially how children develop and learn to cope based on their environment and how people treat them, is critical information for all educators and staff.

In this video, we hear from different speakers about terminology and the words we use to refer to trauma in our practice with children and youth.



Play Video: What are adverse childhood experiences and how do we define trauma?



Note: If the participants want to discuss this video clip, invite them with the following:

It may be helpful to reflect on how we coped or are coping in our own lives with stress and adversity. We also invite you to reflect on your own definitions of trauma and how we may currently be describing children who have experienced adverse events.

▷ Slide 5 **Brain and Environment**

The relationship between infants and primary caregivers and environment has a direct impact “on the hard wiring of neural circuits in the developing brain.”

Many of these affected neural circuits connect regions of the brain that are crucial for physiological, psychological, emotional, and social development (Solomon & Heide, 2005).

A “synapse” allows a neuron to send an electrical impulse to another neuron, creating a neuropathway. In keeping with the idea of use it or lose it, the more neural systems are activated, the more permanent they become. And if neural systems are not activated they “wither” (Malchiodi 2008). This is important to acknowledge for children who don’t seem to be able to “calm down” in school, their brains are often wired for high-end activity for survival while other children are shut down in order to survive high levels of distress.

▷ Slide 6 **Brain Response**

How children's brains respond to adverse events has been termed an ancient emotional response based on an archaic brain response by Alan Shore (2004). Fight, flight freeze are ancient brain responses intended to keep people safe from danger.

When afraid, the child's central nervous system will often take over, an automatic response with no conscious control, either the sympathetic nervous system (SNS) or the parasympathetic nervous system (PNS). Signals from the environment activate primarily one or the other branches, an automatic response.

In classrooms we quite often see overdevelopment of the SNS where children cannot at this time get to a calm baseline, or at the other end of the continuum, high levels of dissociation.

▷ Slide 7 **Possible Adverse Childhood Environments**

Research has expanded our understanding of what circumstances may lead to traumatic effects and responses in children, moving from the more familiar situations of family violence, and all forms of abuse to negative effects resulting from acrimonious divorce or the death of a caregiver, natural disasters, and the situation of children with refugee experiences based on war and displacement.

▷ Slide 8 **Defining Adversity, Traumatic Events**

Our current understanding is that children may respond in unique ways to small or big events, with the event not defining their reactions and possible long-term effects, but rather their brains' response to the events. This helps us in not making assumptions about what children have and have not experienced adversity. In staying true to a trauma-informed lens, we try to interact with children and parents as if everyone has experienced some adversity in their lives, then we never go wrong in our supportive approach.

▷ Slide 9 **Brain Stress Response**

These stress hormones are intended to help the child or youth run from a threat or fight. Cortisol speeds up body metabolism, Epinephrine is a stimulant to the muscles and Norepinephrine speeds heart rate, increases blood pressure. If a child only experiences occasional stress, these hormones may not become problematic, but repeated adverse events and the cumulative effects of this hormonal release may lead to emotional, psychological and physical challenges.

We invite you to reflect on your own experiences when you may have experienced these heightened/suppressed stress responses yourself or had witnessed these responses with your own students.

▶ Slide 10 **Brain Stress Response**

Watch a summary of the brain's stress response: <https://www.youtube.com/watch?v=71dnQkqS9bQ>

▶ Slide 11 **When Very Young Children Cannot Fight or Run**

Children under high levels of stress, especially with very active sympathetic nervous systems (SNS), may have stress hormones released repeatedly, sometimes resulting in the breakdown of proteins. The effect on children may be observed as a diminished ability to regulate, with the tendency to react rather than respond. The overdevelopment of some neuropathways is simply surviving a particular environment.

▶ Slide 12 **Complex Trauma**

One of the great pioneers in trauma research, Bessel van der Kolk describes how Post-Traumatic Stress Disorder (PTSD) is not developmentally sensitive and does not adequately reflect the developmental implications of early adverse events, stressing that trauma has its most pervasive impact during the first decade of life.



Background

Researchers now understand that children experiencing adversity at developmentally vulnerable times that is repetitive and prolonged involving direct harm and/or neglect/abandonment by parents/caregivers may struggle in one or more of the listed domains linked to complex trauma.

(Courtois & Ford, 2009)

In this video, we hear from a variety of speakers about how trauma affects development.



Play Video: How does trauma affect development?



Note: If you would like to discuss this video clip, consider the developmental age of some of your students, especially during stressful moments in the classroom.

▶ Slide 13 **Brain Plasticity**


The brain is malleable, reprogrammable so there is hope in plasticity. Changing the environment, changing how the child feels, can change their brain.

It is so important in the school environment to work with hope, understanding that if we can change the conditions that a child may be automatically and negatively responding to, working together we can change how the child currently feels when asked to try new tasks, respond to directions and accept safe boundaries, and in doing so, potentially change the brain response from reaction to response.

▶ Slide 14 **Coping**

Children and youth do not behave in certain ways for no reason. Over the critical early years, children are constantly developing coping skills to handle stresses found within their environments. Trauma-informed practice and a trauma-informed lens is intended to be preventative and proactive, acknowledging how each child or youth is currently coping, brainstorming with colleagues on possible replacement copings and working extremely hard not to re-traumatize children and youth.

 **Play Video: Understanding Coping**

 **Note:** If you want to discuss this video clip, it may be helpful to reflect on how we coped or are coping in our own lives with stress and adversity. We also invite you to reflect on your own definitions of trauma and how we may currently be describing children who have experienced adverse events.

▶ Slide 15 **Trying not to Trigger**

None of us can know exactly what will set children and youth off into an automatic triggered response of extreme activation, or at the other end of the continuum, high levels of dissociation where the child or youth “checks out”. Understanding triggers takes time and observation and chances are we will not be able to identify all potential triggers. Researchers identify that many children are triggered by raised voices, sudden loud noises replicating conflict in their environments. Yet other children may respond negatively to kind gestures and well-meaning attention, not trusting their intentions. Awareness and understanding of environmental and human triggers is big work for trauma-informed educators.

▶ Slide 16 **Figuring It Out**

The question of how to help the child access their thinking brain in order to start to shift out of the automatic survival brain response requires the establishment of a safe environment and educators and staff who themselves can regulate consistently. If children are less triggered and less fearful, they can move from a limbic response to one of reason. Adding fear to fear heightens the stress reaction and pushes children and youth to limbic or brain stem responses.

▶ Slide 17 Questions and Discussion



Possibility Discussion

In table groups, spend 5 minutes or so discussing a choice of the following questions, and then share whatever is most relevant with the larger group.

- When hearing this material, are there certain children and youth you are supporting or have supported who come to mind?
- In what ways might this information help you reframe some of their behaviours you have observed?
- What approaches in general do you use at a classroom level to support children, especially children with adverse events experience?
- For educators and staff new to the brain information, what information and support would be welcomed in terms of children and youth with adverse events experience?

▶ Slide 18 Supportive School Environment: Listen, See and Understand Me

Based on the research discussed in the first section, we now understand that schools may be a place of resolution and growth for children who have experienced adversity if we can establish safety within the classroom and train and support safe educators and staff.



Play Video: Understanding safe, supportive school environments

This video helps us understand what is required within a school environment for brains to respond differently. Speakers present the main areas of work in establishing supportive school environments. The need to understand that many of the children's behaviours identified in school settings as problematic are coping behaviours that the child or youth has developed to survive various adverse events and environments cannot be stressed enough in order to develop effective interventions. This often requires changing a belief system where children's behavior is always viewed as a choice, all actions done with intent.

Slide 19 **Feeling, Thinking, Connecting**

There are three main areas of concern for children who have experienced traumatic, adverse events. As the trauma specialist Judith Herman has stated, first and foremost, it is paramount that children learn to regulate. The inability to regulate interferes with children's ability to take in new information, and as the child develops, may leave the child at greater risk for involvement in the justice system and mental health area of the health system. Children who have experienced adversity may have a very limited emotional vocabulary and need time and a good co-regulator to start the long journey to self-regulation.

Children who are fearful and triggered are running out of the limbic or central nervous system response and have often not had the safety or stability to develop executive functioning skills. They have not had the luxury of calm, stable environments. Children with adverse experiences may be hypervigilant, constantly assessing the sounds, sights, and other details of a school environment until being assured of safety. This urgent need to ensure safety may present as attention issues. Children from adversity may also present as taking fewer intellectual risks and demonstrate less creativity, as survival has been the main task of their lives to this point.

Children who struggle with affect regulation may also struggle with connecting and forming relationships. Often children who have experienced adverse events have not had many opportunities to play, so require modeling from educators, staff and peers on basic steps in connecting with others.

These three areas of need result in the urgency in creating supportive school environments.

Slide 20 **Trauma-informed Teaching**

The point of trauma-informed teaching is not to ask you as educators to do more as we have discussed, but sometimes to do things differently at a classroom level. Educators often express that they are limited in the one-on-one time that they can give to activated or dissociative children, so the work has moved to a classroom approach that potentially benefits all children.

The ability of educators to create safe classrooms requires consistency in approach and tone in the room, predictability and structure with room for choices and flexibility, and understanding of where each child is at developmentally, especially emotionally.

Slide 21 **Supportive School Environment**

This slide presents the main areas of work in establishing supportive school environments. The need to understand that many of the children's behaviours identified in school settings as problematic are coping behaviours that the child or youth has developed to survive various adverse events and environments cannot be stressed enough in order to develop effective interventions. This often requires changing a belief system where children's behavior is always viewed as a choice, actions done with intent.

Cultural, mental, emotional, and physical safety are critical principles to put into place in any environment in order to ensure that children, youth and parents/caregivers who have experienced adversity have opportunities for learning and growth rather than basic survival.



Play Video: Understanding good practice in responding to trauma in the classroom – Part 1

Based on the research discussed in the first section, we now understand that schools may be a place of resolution and growth for children who have experienced adversity if we can establish safety within the classroom and train and support safe educators and staff.

Slide 22 **Feeling Accepted**

Being liked, or at least accepted, is a component of emotional safety. It is how children feel in the classroom and school environment that determines what they will do and how much growth will be sustained. The establishment of safety opens doors for children and youth who have experienced trauma.



Wondering Questions

- What are the current ways your school creates a supportive environment?
- What are the barriers to moving your classroom or school to your vision of a supportive environment?



Possibility Discussion

With colleagues, discuss the term "safety" and in what ways the various components have been established within your school environment.

- Where have you observed growth and what are the possibilities for increasing safety within your school?

▷ Slide 23 **Positive Boundaries: What I Can Control and What I Cannot...Yet**

The biggest challenge in establishing safety while working with children and youth who are coping the best they can and learning to regulate, is in defining safe boundaries, commonly known as school discipline policies. Trauma-informed Practice has a proactive and preventative focus, working towards responsive policies in schools rather than reactive. Positive boundaries are essential for children and youth who may not have experienced structure or consistent boundaries.

▷ Slide 24 **Where Is The Line and Can I See It?**

Current school discipline policies often have a punitive basis. Policies that include punishment or rejection, such as sending children and youth home to sometimes stressful or abusive environments may not facilitate change or growth. Both the conditions of the punitive school policies and the conditions of the home environment are outside the child's control, often resulting in strengthening current negative coping strategies. To be safe and to prevent harm to other children, schools need positive boundaries that are clear to all students yet have the flexibility to serve student's unique needs.

▷ Slide 25 **Working for Safety**

Establishing safe boundaries and determining natural consequences is some of the most difficult work in schools. Educators and administrators working in a trauma-informed way describe being torn in their efforts to support children and youth using more problematic coping while working in a preventative way to limit harm to other children and staff. Children and youth who have not experienced boundaries in their home environments or who have experienced excessive control may become triggered by boundaries set in the school environment. Creativity in determining consequences and trial and error are required.

▷ Slide 26 **Awareness of Guilt and Shame**

In developing positive boundaries (discipline policy), the need to understand how many children from adverse environments hold guilt and shame for what has happened to them as well as their present actions is essential.

▷ Slide 27 **Awareness of Guilt and Shame**

Assurance of safety of course is the key for all children, so holding positive regard for each child while setting boundaries on all acts of aggression is necessary. It is all about how the boundaries are set and how the child is interacted with after negative events.

▷ Slide 28 **Accommodations**

The goal of trauma-informed practice is early intervention before high-end behaviour happens, with someone acting as a co-regulator watching for early fear responses and frustration. Educators and staff attuned to children who may be at a different level of emotional development compared to chronological age are usually successful in preventative interventions. When consequences attached to safe boundaries are required, it is hoped that administrators, educators, staff and parents/caregivers are aware of the need to avoid a punitive approach, rather creatively developing consequences that children understand and help facilitate change in coping behaviours.

 **Play Video: [Understanding good practice in responding to trauma in the classroom – Part 2](#)**



Wondering Questions

- In what ways does your school discipline policy work for most of your students?
- What challenges does your school discipline policy face in facilitating changes in behavior for children struggling with regulation and control?
- Would it be important for you in determining consequences to assess if high-end behavior is a triggered response or had intent?



Possibility Discussion

With colleagues, discuss and share natural consequences that you have found effective in your classroom. Then discuss your wish list for a positive boundaries school policy that might be more effective in changing coping behaviours.

Before shifting to the next slide, invite the group to reflect on their initial approach to working with Brian.

Slide 29 Educator and Child: Brian's Story (Elementary)



I am Brian's teacher and I am working hard to stay predictable and present, conscious of staying in my thinking brain. I do small check-ins with Brian each morning, sharing my joke of the day. I have assessed Brian's interest in bugs, bringing "bug talk" into class discussions. I have assessed as well what situations set Brian off, trying to be proactive and preventative. When Brian is triggered, running on his CNS response, I ask Brian if he is okay and stay with him until Brian can hear me. I try to connect him with other children in the class who can regulate. I am working on ways to safely encourage Brian to explore tasks that he is interested in and can currently do, believing that competency will help Brian.

Brian's new teacher is trying many trauma-informed approaches in working to support Brian, knowing that each day is different, a new day, a clean slate for Brian and his educator.



Wondering Questions

- Would you respond to Brian the same way?
- Is there anything you would do differently than you thought at the beginning?



Possibilities Discussion

At your table, discuss your thoughts on current supports and barriers to intervening with Brian in a trauma-informed way.



Slide 30 Educators and Youth: Brain's Story (Secondary)



Working with the school counsellor and support team, Brian starts the semester with a selection of electives in order to build his competence and feelings of success. Academic courses will be added once Brian has experienced success. Brian starts the morning block in the breakfast room, as hunger is a major internal trigger for him. In the first block the second block shop teacher checks in with him briefly, as Brian has been observed to connect best with this educator. Brian has been encouraged to walk the halls every 15 to 20 minutes to help him regulate and is beginning to use this strategy to cope with his hyperarousal. The school counsellor is working with Brian on grounding strategies to help him learn to take proactive steps to downregulate and address his tendency to react rather than respond.

In a high school setting, the school team has worked to find ways to support Brian to begin to have success. The school counsellor is an important part of Brian's support.



Wondering Questions

- Would you respond to Brian the same way?
- Is there anything you would do differently than you thought at the beginning?



Possibilities Discussion

At your table, discuss your thoughts on current supports and barriers to intervening with Brian in a trauma-informed way.



Slide 31 Youth's Voice



I lived in fear for so long, I just felt like I could trust no one. I was so jumpy—when I was younger they said I was ADHD, but I think I was just on, looking for danger, for trouble. Now I understand flight, fight, freeze. But the thing that changed everything for me was a grade 7 teacher who understood fight flight freeze: he got me. Until I had him, I hated everything about school; because I felt so bad about home and life and all the stuff I just could not do, I just quit. But he would not let me quit. He made me want to try. I believed him. He understood me.

This is a shared retrospective reflection from a young adult, demonstrating the power of understanding and marking the turning point in his educational journey. This quote bridges to our next section on Relationship.

Thank you for engaging in this material and we hope it leads to productive conversations, the sharing of expertise and ideas and creative interventions over time.

————— **End of slides** —————

Follow up

We suggest checking-in with staff over the following days or weeks to understand what discussions have developed out of the presentation. At this stage, staff interested in moving toward a fully trauma-informed school may want to download a working document on Developing Compassionate Learning Communities available on the website.

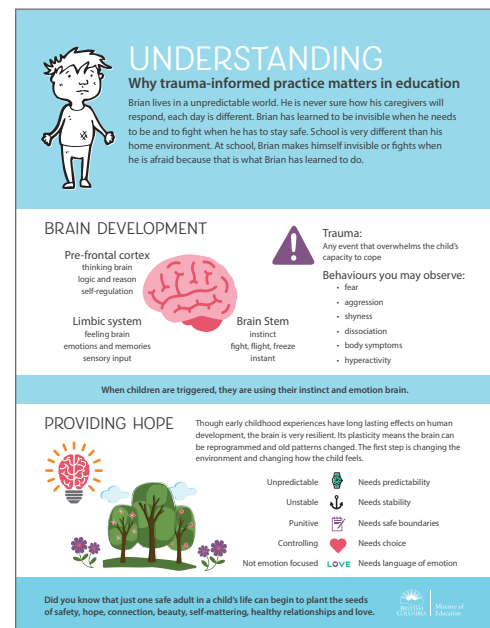
One page downloadable and links to other resources are included.



The next suggested presentation is on **Relationship**, a key concept in working towards compassionate learning communities.

One-Page Tip Sheet

Download this reference sheet for Understanding Adverse Childhood Experiences and Trauma.



Videos

What are adverse childhood experiences and how do we define trauma?

Allison Pooley, MAL, BEd, Executive Director, The Asante Centre

Dr. Jennifer Wolowic, Managing Director of the Stigma and Resilience Among Youth Centre (SARAVYC)

Brittney Bertrand, Youth Communications and Project Assistant; Métis Nation BC

Dr. Jeffrey Schiffer, Sessional Instructor, Justice Institute of BC; Special Projects Officer, Vancouver Aboriginal Child and Family Services Society

How does trauma affect development?

Suman Hothi, Registered Clinical Counsellor, BC Borstal Association

Dr. Jeffrey Schiffer, Sessional Instructor, Justice Institute of BC; Special Projects Officer, Vancouver Aboriginal Child and Family Services Society

Understanding Coping

Dr. Daniel To, District Principal for alternative-based programs, Surry School District

Allison Pooley, MAL, BEd, Executive Director, The Asante Centre

Understanding safe, supportive school environments

Allison Pooley, MAL, BEd, Executive Director, The Asante Centre

Sonia Pieraccini, Teacher, Annieville Elementary, Delta School District

Rachel Calder, MSW, RSW; Executive Director, Artemis Place Society

Suman Hothi, Registered Clinical Counsellor, BC Borstal Association

Understanding good practice in responding to trauma in the classroom – Part 1

Jeffrey Schiffer, Instructor, Justice Institute of BC & Faculty of Aboriginal oriented therapy program

Dr. Daniel To, District Principal for alternative-based programs, Surry School District

Lauren Petersen, Indigenous Educator and Fraser Valley Community Activator for Métis Nation BC's Ta Saantii Healthy Communities Project

Understanding good practice in responding to trauma in the classroom – Part 2

Jeffrey Schiffer, Instructor, Justice Institute of BC & Faculty of Aboriginal oriented therapy program

Rachel Calder, MSW, RSW; Executive Director, Artemis Place Society

Suman Hothi, Registered Clinical Counsellor, BC Borstal Association

Lauren Petersen, Indigenous Educator and Fraser Valley Community Activator for Métis Nation BC's Ta Saantii Healthy Communities Project

Sample Resources

Australian Childhood Foundation: Making SPACE for learning
<https://professionals.childhood.org.au/resources/>

Craig, S. (2015). Trauma-Sensitive Schools: Learning Communities Transforming Children's Lives, K-5. Teacher College Press.

Levine, P. & Kline, M. (2006). Trauma Through a Child's Eyes: Awakening the Ordinary Miracle of Healing. Berkely, CA: North Atlantic Books.

Van der Kolk, B. (2014). The Body Keeps the Score. New York, New York: Viking

These are just a few of the many resources available. We encourage you to seek out additional resources relevant to your practice, school, and community.

References

Herman, J. (1997). Trauma and recovery. New York: Basic Books.

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Montgomery, A. (2013). Neurobiology essentials for clinicians. New York, NY: W.W. Norton & Company

Solomon, Ed, & Heide, KM (2005). The biology of trauma: implications for treatment. Journal of Interpersonal Violence, 20 (1), 51-60.

van der Kolk, B. A. (2003). The neurobiology of childhood trauma and abuse. Child & Adolescent Psychiatric Clinics North America, 12, 293-317.

