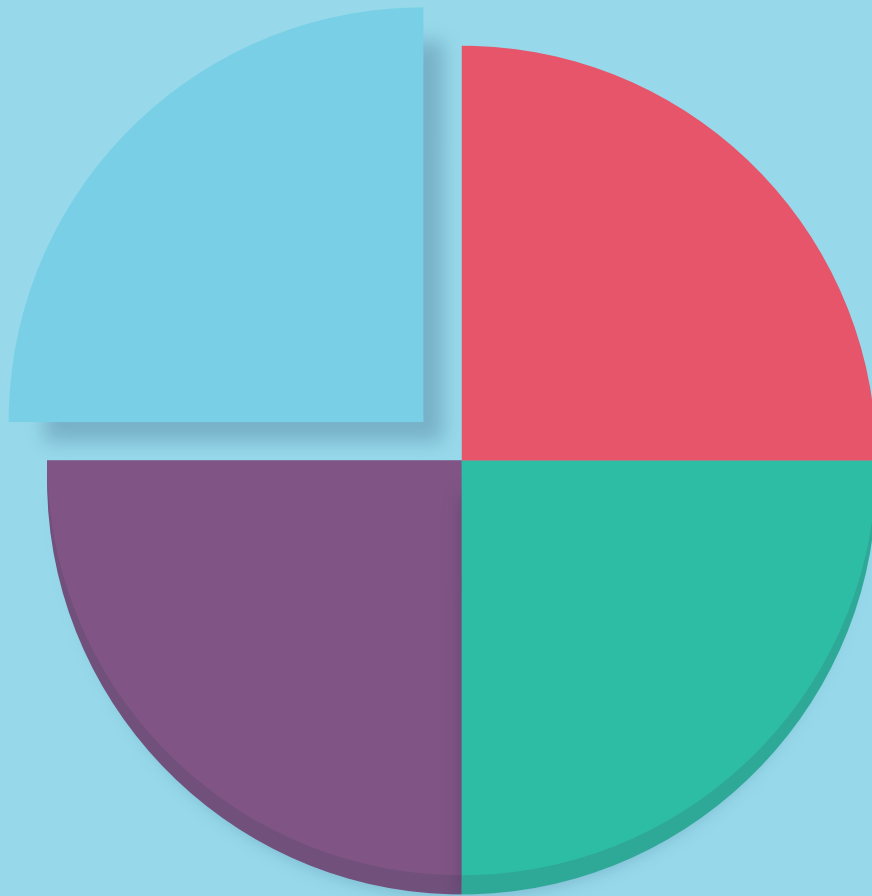


Compassionate Learning Communities
Supporting a Trauma-Informed Practice

Participant Handout

UNDERSTANDING



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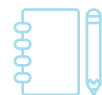
Participant Self-Care

In keeping with a trauma-informed lens, you are invited to engage with the materials at your own level, especially if you have experienced adversity. We invite you to move around, have tea, coffee or water and to leave the room if you feel triggered or overwhelmed. The sharing of personal histories is not recommended in this format and facilitators have contact information for community resources. Hopefully your school or district has school counsellors or school psychologist available to speak to today if needed.

Let's Begin

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).

These Participant Handouts include the following components:



1. Highlights from the slide deck:
 - Student voices / scenarios
 - Compassionate Educators
 - Discussion topics and questions for reflection
2. Some of the many available resources to supplement your study and practice
3. Brief introductions for speakers included in the videos
4. Slide screenshots with space for notes



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.

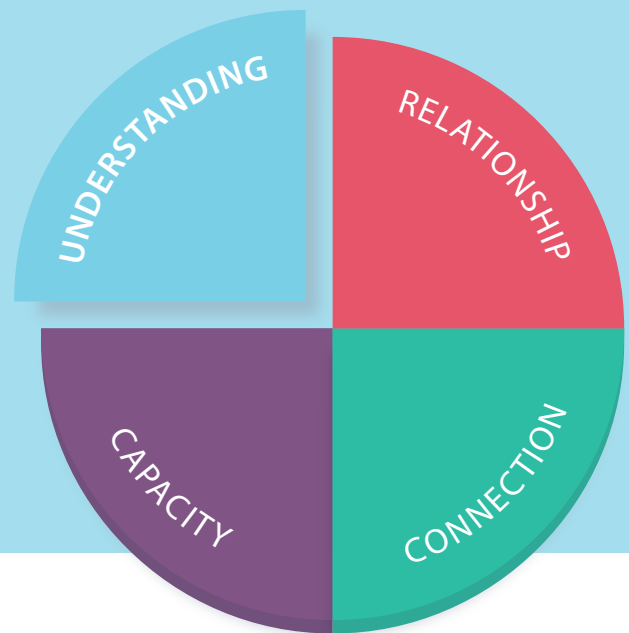
Trauma-informed practice is not intended to be a one-shot training or the latest educational fad; it involves the long-term work of transforming schools into compassionate learning communities. Trauma-informed is not about doing more in the classroom and community but rather, about doing things differently.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

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.

Consider how you might intervene with this child or youth.

▷ 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

▷ Slide 4



[Play Video: What are adverse childhood experiences and how do we define trauma?](#)



Self-Reflection

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 9



Self-Reflection

Reflect on times when you may have experienced these heightened\suppressed stress responses yourself and/or have witnessed these responses with your own students.

▷ Slide 12



[Play Video: How does trauma affect development?](#)



Self-Reflection

Consider the developmental age of some of your students, especially during stressful moments in the classroom.

▷ Slide 14



[Play Video: Understanding Coping](#)



Self-Reflection

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 currently may be describing children who have experienced adverse events.

▷ Slide 17



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



Play Video: Understanding safe, supportive school environments

▷ Slide 21



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

▷ Slide 22



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 28



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.

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.



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.



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.

UNDERSTANDING
Why trauma-informed practice matters in education

Brian lives in an unpredictable world. He is never sure how his caregivers will respond, each day is different. Brian has learned to be invisible when he needs to be and to fight when he has to stay safe. School is very different than his home environment. At school, Brian makes himself invisible or fights when he is afraid because that is what Brian has learned to do.

BRAIN DEVELOPMENT

Pre-frontal cortex
thinking brain
logic and reason
self-regulation

Limbic system
feeling brain
emotions and memories
sensory input

Brain Stem
instinct
fight, flight, freeze
instinct

Trauma:
Any event that overwhelms the child's capacity to cope

Behaviours you may observe:

- fear
- aggression
- shyness
- dissociation
- body symptoms
- hyperactivity

When children are triggered, they are using their instinct and emotion brain.

PROVIDING HOPE

Though early childhood experiences have long lasting effects on human development, the brain is very resilient. Its plasticity means the brain can be reprogrammed and old patterns changed. The first step is changing the environment and changing how the child feels.

Unpredictable → Needs predictability
Unstable → Needs stability
Punitive → Needs safe boundaries
Controlling → Needs choice
Not emotion focused → **LOVE** Needs language of emotion

Did you know that just one safe adult in a child's life can begin to plant the seeds of safety, hope, connection, beauty, self-mattering, healthy relationships and love.

University of Lincoln

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

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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.

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

Blaustein, M.E., & Kinniburgh, K. M. (2010) *Treating Traumatic Stress in Children and Adolescents*. New York, NY: The Guilford Press.

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

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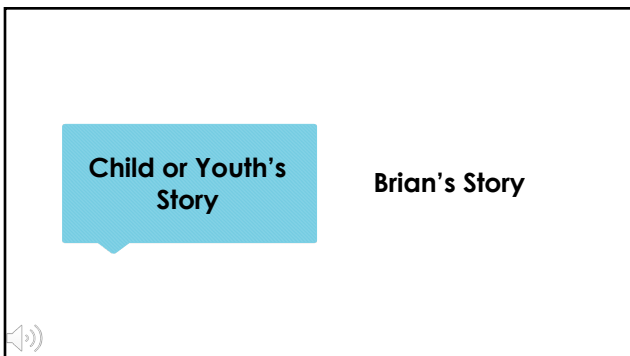
Solomon, Ed, & Heide, KM (2005). The biology of trauma: implications for treatment. *Journal of Interpersonal Violence*, 20 (1), 51-60.

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

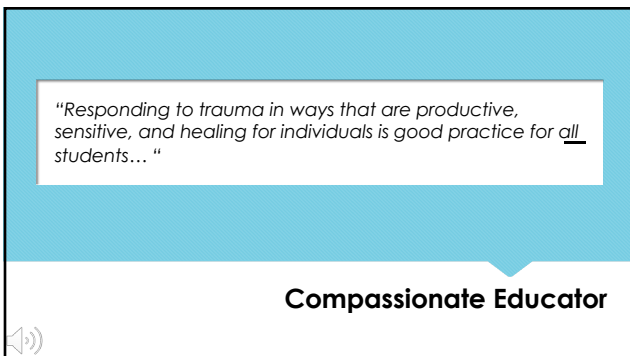
Slide Deck Notes



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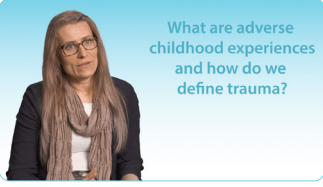


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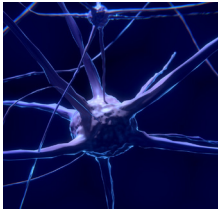
3

Understanding Adverse Events and Children

4


Brain and Environment



- Children's brains respond to their environment.
- Brain development is affected by life experience.
- How a child is treated and what happens to them affect how their brain's neuropathways develop.

5

Brain Response



Children who have experienced adverse events are often described as showing primitive coping, just trying to respond to high-end events, trying to be okay.

Moving from one environment to another is often difficult, with children's coping strategies (shutting down, running away, hiding, fighting) staying the same.

6

Possible Adverse Child Environments

Many different contexts affect children's coping behaviour:

- abuse, neglect
- severe attachment disruption
- serious early medical interventions
- natural disasters
- war and displacement
- other trauma-based circumstances

7

Defining Trauma

- Threat to survival or emotional well-being
- The core event around which behaviour and development is organized
- The brain's response to events

8

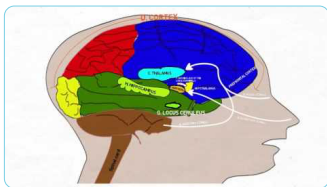
Brain Stress Response

When children become afraid, the brain signals hormone-producing glands for fight or flight:

- Cortisol
- Epinephrine
- Norepinephrine

9

Brain Stress Response

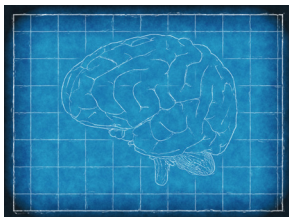


10

When Young Children Cannot Run or Fight

When a child's stress hormones are activated repeatedly, there is the potential for high levels of cortisol to be harmful to early development, altering neural pathways.

Neural pathways develop based on use. Use them or lose them.



11

Complex Trauma



Children exposed to multiple, chronic, prolonged developmentally adverse traumatic events, may experience difficulty with:

- attachment
- affect regulation
- dissociation
- cognition
- biology
- self-concept

12

Brain Plasticity

If child's environment is currently:

- unpredictable – provide predictability
- unstable - provide stability
- punitive - provide safe, caring boundaries
- controlling - provide choice
- not emotion focused - provide language of emotion



13

Coping



Primary goals of trauma-informed approach:

- understand children's coping strategies
- minimize the chance of inadvertently re-traumatizing children

14

Trying Not To Trigger

Children may be triggered by:

- Raised voices
- Rejection
- Attention
- Unpredictability
- Kindness
- Punitive measures

15

Figuring Out

How can a child's developing neocortex help modulate their limbic and brainstem responses to fear and danger?

- Not so much about talking, more about a physical sense of safety, a felt sense of being okay.
- When a child's own resources fail, someone is there to take over providing a sense of safety and predictability.

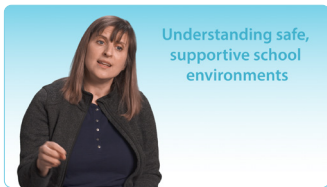
16

Questions and Discussion

- Which children and youth that you are currently supporting or have supported, come to mind when discussing complex trauma?
- When reflecting on this material, are there certain children and youth that you are supporting or have supported who come to mind?

17

Supportive School Environment



Listen, see and understand me



18

Feeling, Thinking, Connecting

Find ways to support students in the three main areas of concern:

1. Affect (Emotional) Regulation
2. Learning and cognition (survival brain versus thinking brain)
3. Relationships and social interactions (connecting and playing)

19

Trauma-Informed Teaching

Trauma-informed teaching strategies can build safety in the classroom through consistency, structure, compassion, and understanding.

By ensuring safety in the classroom, all students benefit; they need a safe and compassionate space to take intellectual and emotional risks when learning.

20

Establish Supportive School Environments



Understand that all coping behavior has a purpose and can be changed by establishing safety.

Provide cultural, emotional, mental and physical safety for all children, acknowledging unique qualities of each child.

Support educators and staff, acknowledging their strengths and needs.

21

Feeling Accepted

New learning cannot take place if a child or youth does not feel safe.
Feeling liked or at least accepted by school staff and peers supports growth.
Children and youth strive in emotional safety.

22

Positive Boundaries

What I can control and what I cannot ... yet



23

Where is the Line and Can I See it?

At the core of safety:

- Positive boundaries and natural consequences
- From power 'over' to including in decision making
- From punishment to guiding behaviour through understanding

Challenge for systems such as schools:

- Changing a belief system

24

Working for Safety

Safe boundaries:

- Let a child know that he/she/they matter
- Set limits necessary to maintain safety for the child struggling with regulation and all other children

All types of limit setting can act as triggers, and many children are unfamiliar with limits.

25

Awareness of Guilt and Shame

Children who have experienced traumatic events often believe they are responsible for the abuse, neglect, lack of attachment:

I didn't say no,

I didn't tell,

I didn't try hard enough.

26

Awareness of Guilt and Shame

Shame is related to feeling flawed, unworthy, inadequate, or defective

I am bad,

I am stupid,

I am not worthy of being protected or loved

27

Accommodations to meet Children's Needs



- Children use behaviour to communicate and cope
- Understand possible causes of a child's behaviour before thinking about consequences
- Don't react – respond
- Consider the child's **developmental** not biological age

28

Brian's Teacher (Elementary)

Would you respond to Brian the same way?

Is there anything you would do differently than you thought at the beginning?



29

School Team and Brian (Secondary)

Would you respond to Brian the same way?


Is there anything you would do differently than you thought at the beginning?



30

... He made me want to try. I believed him.
He understood me.

Youth's Voice



31

