Creating Trauma Sensitive Schools

April 17, 2013

Co-sponsored by:

The Qualitative and Evidence Based Practice Group of the National Community of Practice on Collaborative School Behavioral Health and the IDEA Partnership at NASDSE

The National Community of Practice (CoP) on Collaborative School Behavioral Health

- Co-led by the IDEA Partnership at NASDSE and the Center for School Mental Health at the University of Maryland
- The focus of the CoP is to collaboratively work to create a shared agenda across education, mental health and families.

The National Community of Practice (CoP) on Collaborative School Behavioral Health

- The CoP affiliates with cross-stakeholder teams that have created 16 state CoPs modeled on the national exemplar.
- The CoP affiliates with 22 national organizations and 9 technical assistance centers and coalesces them around the issues they share.
- Together the states, organizations and TA centers lead 12 issue-based Practice Groups that develop the content and design the interaction for of the Annual Conference on Advancing School Mental Health
 - 18th Annual Conference October 3-5, 2013 in Crystal City-Arlington, Virgina

QEBP Practice Group Mission and Priorities

• Co-facilitators:

- Nicole Evangelista Brandt, PhD, Center for School Mental Health
- Mark Sander, PsyD, LP, Hennepin County/Minneapolis Public Schools
- Sharon Stephan, PhD, Center for School Mental Health

• Mission:

- To provide resources and promote sharing of information across individuals/groups interested in improving the quality of school mental health (SMH)
- To discuss, promote, and disseminate evidence based practices in SMH

Priority areas include:

- Improving dissemination and sharing of evidence-based practices in SMH
- Bridging the research-practice and practice-research gaps in the field
- Understanding and promoting the use of the best student-, program-, and school-level evaluation strategies.
- http://www.sharedwork.org/

The Heart of Learning & Teaching:

Compassion, Resilience, & Academic Success

- Webinar on March 20, 2013
- Presenters: Mona Johnson and Ron Hertel
- Archived recording of webinar and PowerPoint slides
 - Wiki page
 - http://www.sharedwork.org/web/school-behavioralhealth/wiki/-/wiki/19863/3-20-2013+Webinar+Followup+-+Heart+of+Learning+and+Teaching+-+Compassion+Resilience+and+Academic+Success?p_p_lifecy cle=1
 - Center for School Mental Health
 - http://csmh.umaryland.edu/Resources/ArchivedWebinars/in dex.html

Using an Rtl Framework to Support Students Affected by Trauma

Nic Dibble, LSSW, CISW Education Consultant, School Social Work Wisconsin Department of Public Instruction

What is trauma?

Trauma is an individual's response to a highly stressful event or ongoing series of events

Trauma is not the event itself

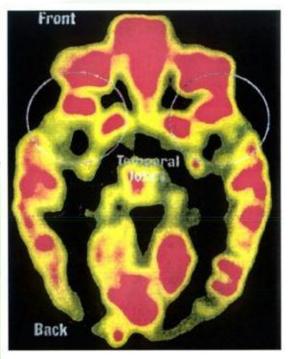
 Children growing up in dangerous environments may be in a constant state of "yellow alert" (i.e., survival mode) emphasizing lower brain functions

- Flight leave or hide
- Fight verbal & physical aggression
- Freeze shut down, withdraw or dissociate

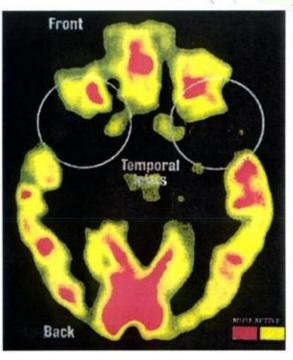
Trauma may alter brain biology

- Brain chemistry exposure to strong, frequent, prolonged adversity ("toxic stress") results in an ongoing release of cortisol
- Brain structure

Healthy



Neglected/Abused



Experiences that can result in trauma

- Does your school have students who ...
 - witness domestic violence?
 - are physically, emotionally or sexually abused?
 - are neglected?
 - are homeless?
 - have been physically or sexually assaulted?
 - live in homes with family members with untreated mental illness or substance abuse?
 - have been in a serious accident?
 - have experienced disasters (e.g., tornado, house fire)?
 - have parents or other family members serving overseas in the military?

Daniel & Zarling (2012)

Trauma affects school performance

- Lower scores on standardized achievement tests (Goodman et al, 2011)
- Substantial decrements in IQ, reading achievement & language (Delaney-Black et al, 2002)
- 2.5x more likely to be retained (Grevstad, 2007; Sanger et al, 2000; Shonk et al, 2001)

Daniel & Zarling (2012)

Trauma affects learning

- Adversely affects ability to ...
 - Organize narrative material
 - Understand cause & effect
 - Take another person's perspective
 - Attend to classroom instruction
 - Regulate emotions
 - Engage the curriculum
 - Utilize executive functions
 - Make plans
 - Organize work
 - Follow classroom rules

The Heart of Learning & Teaching Compassion, Resiliency & Academic Success (Wolpow et al, 2009)

Trauma affects behavior

May manifest in the classroom by increased ...

- Reactivity
- Impulsivity
- Aggression
- Defiance
- Withdrawal
- Perfectionism

The Heart of Learning & Teaching Compassion, Resiliency & Academic Success (Wolpow et al, 2009)

Suspended & expelled more

(Grevstad, 2007; Sanger et al, 2000; Shonk et al, 2001)

How do we see these students?

Uninformed view

- Anger management problems
- May have ADHD
- Student is choosing to act out (e.g., disrespectful or manipulative)
- Uncontrollable, destructive
- Non-responsive
- Uninformed response: Student needs consequences or maybe an ADHD evaluation

Adapted from Daniel & Zarling (2012)

Trauma-informed view

- Maladaptive responses (in school setting)
- Seeking to get needs met
- Difficulty regulating emotions
- Lacking necessary skills
- Negative view of world (e.g., adults cannot be trusted)
- Trauma response was triggered
- Trauma-informed response: Student needs to learn skills to regulate emotions & we need to provide support

Wisconsin's Journey

Cross-system work group formed in 2010

- K-12 education
- Higher education
- Mental health
- Parent peer specialist
- State education & health departments
- Work group's charge
 - 1. Create an on-line toolkit of resources that schools could use to support students affected by trauma
 - 2. Provide professional development opportunities for educators

Wisconsin's Journey

- Started by examining work done by others
 - Massachusetts Advocates for Children <u>http://www.massadvocates.org/</u>
 - Washington State Compassionate Schools <u>http://www.k12.wa.us/CompassionateSchools/</u>
 - National Child Traumatic Stress Network <u>http://www.nctsnet.org/</u>
- Decided to build on existing, complementary Wisconsin initiatives
 - Trauma-Informed Care (TIC)
 - Adverse Childhood Experiences (ACEs)
 - Positive Behavioral Interventions & Supports (PBIS)

Trauma-Informed Care (TIC)

Trauma-informed care is an approach to engaging people with histories of trauma that recognizes the presence of trauma symptoms & acknowledges the role that trauma has played in their lives

SAMHSA - http://www.samhsa.gov/nctic/

- Wisconsin Educational & Media Campaign <u>http://www.dhs.wisconsin.gov/mh_bcmh/tic/index.htm</u>
- Connection between TIC & schools
 - Over the last several years, what we know from the literature about TIC has been applied effectively to school settings

Best Resources

Calmer Classrooms

http://www.ccyp.vic.gov.au/childsafetycommissioner/downloads/calmer_classrooms.pdf

Child Trauma Toolkit for Educators

http://www.nctsnet.org/nctsn_assets/pdfs/Child_Trauma_Toolkit_Final.pdf

Creating Sanctuary in the School

http://www.sanctuaryweb.com/Documents/Sanctuary%20in%20the%20School.pdf

Helping Traumatized Children Learn

http://www.massadvocates.org/download-book.php

The Heart of Learning & Teaching Compassion, Resiliency & Academic Success

http://k12.wa.us/CompassionateSchools/HeartofLearning.aspx

Adverse Childhood Experiences

Adverse Childhood Experiences (ACEs) include

- child maltreatment
- parent with untreated mental illness or substance abuse
- incarcerated parent
 - separation or divorce of parents
- witnessing domestic violence

http://www.cdc.gov/ace/index.htm

Adverse Childhood Experiences

- Critical findings from landmark CDC study
 - ACEs are prevalent
 - 64% reported at least 1 ACE
 - 12% reported 4 or more ACEs
 - 4 or more ACEs are associated with significantly more adverse health outcomes in adulthood
 - Heart disease
 - Cancer
 - Diabetes
 - Depression & suicide
 - Substance abuse

ACEs having a major impact on health care costs

Adverse Childhood Experiences

 Wisconsin replicated this study through the Behavioral Risk Factor Survey & found parallel results

http://acesconnection.com/group/state ace response project/page/wisconsin

- Connection to Schools & TIC
 - Children who have experienced ACEs may be affected by trauma
 - ACEs can adversely impact students' ability to learn
 - ACEs & TIC are not part of pre-service education for teachers & school administrators

Positive Behavioral Interventions & Supports

- Wisconsin PBIS Network started in 2009
 - Funded by Wisconsin DPI
 - PBIS in over half of Wisconsin schools in 3 years <u>http://www.wisconsinpbisnetwork.org/</u>
- Connection to TIC & ACEs
 - 3-tier PBIS framework works well to organize trauma-sensitive practices into a school setting

Wisconsin uses the 3-tier framework to describe comprehensive, school-based mental health services, as well, including suicide prevention

http://sspw.dpi.wi.gov/sspw_mentalhealth

http://sspw.dpi.wi.gov/sspw_suicideprev

Why did Wisconsin select PBIS as a framework to support students affected by trauma?

- Many of the strategies & programs used in PBIS work for students affected by trauma
- Schools have multiple improvement initiatives going on simultaneously & reduced capacity to take on more
 - Educators are being asked to do more with less
- Presenting TIC as connected to existing school improvement initiatives focused on behavior & mental health increases likelihood of ...
 - Buy-in
 - Success

Using the PBIS Framework to Better Support Students Affected by Trauma

Tier 3 (for students impacted by trauma)

- •Case management
- •Monitoring (e.g., Check & Connect)
- •Coordination with community-based treatment
- •Wrap-around programs
- •Parent & caregiver training & support

Tier 2 (for students with symptoms)

Differentiated instruction
Adult mentors
Small groups for SEL
Community referrals
Parent & caregiver education
Monitoring (e.g., Check In – Check Out)
Sensory opportunities to manage anxiety

Tier 1 (for all students)

- SEL instruction
 Predictable routines
 Choices
 Physical activity breaks
 "Calm zones"
- •Adults model emotional regulation

Tier 3

Individualized services
Comprehensive FBA & BIP
504 plans & IEPs
Staff avoid "trauma triggers"

Tier 2

Brief FBA & BIP
Building Consultation Team
Classroom supports
Pupil services accessible & approachable
Staff awareness of higher-risk groups

Tier 1

School policies promote safe climate
Proactive behavior management
Discipline system minimizes exclusion
School builds environmental assets
Opportunities for students to help others
Professional development
Classroom consultation

What's in our toolkit?

Webcasts

- Understanding childhood trauma
- Steps to implementing trauma-sensitive practice into the school environment
- PowerPoint presentation with detailed speaker notes to use for a school building in-service
- Trauma-sensitive school checklist
 - Massachusetts Advocates for Children & partners
 - May be re-administered over time to assess progress

http://sspw.dpi.wi.gov/sspw_mhtrauma

What's in our toolkit?

- Annotated list of resources
 - Resources every school should have
 - Websites
 - For educators
 - With clinical information
 - Selected articles
 - Additional publications
 - Books

http://sspw.dpi.wi.gov/sspw_mhtrauma

What's in our toolkit?

- Common questions & answers
- Links to articles
- Explanation of connection between PBIS & TIC
- Contact information for training & technical assistance
- Links to national & Wisconsin ACEs studies

http://sspw.dpi.wi.gov/sspw_mhtrauma

Professional development

- Brought in Joel Ristuccia from Massachusetts Advocates for Children in 11/10 for a large state conference
 - Training offered
 - Regional day-long trainings in Spring 2011
 - Half-day trainings provided on request
 - Workshops & extended trainings in existing conferences
 - Sponsoring ongoing training & TA for a regional team over last several months
 - PLC using The Heart of Learning & Teaching Compassion, Resiliency & Academic Success as a text/guide
 - Beginning to do presentations to other educators

What's next for Wisconsin?

- Our dilemma: Building in-services & day-long trainings won't transform schools, but we have little capacity to do intensive, transformational training
- Our critical question: What do we have the capacity to do that can help schools better meet the needs of students affected by trauma?

What's next for Wisconsin?

- Currently expanding our work group to represent more parts of the state & include more trainers
- Governor Walker has proposed the creation of an Office of Children's Mental Health
- Our present "list of things to do" includes creating ...
 - Trauma-sensitive tools & protocols to expand toolkit
 - e.g., functional behavioral assessment
 - Materials that can be used in pre-service training
 - Teachers
 - School administrators
 - A list of trauma-informed practices that schools can implement without intensive, trauma-specific training

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Discipline system minimizes exclusion
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Professional development
Classroom consultation

Websites 1 more time ...

Wisconsin Department of Public Instruction

Wisconsin Toolkit on Trauma-Sensitive Schools
<u>http://sspw.dpi.wi.gov/sspw_mhtrauma</u>

School-Based Mental Health
<u>http://sspw.dpi.wi.gov/sspw_mentalhealth</u>

School-Based Suicide Prevention
<u>http://sspw.dpi.wi.gov/sspw_suicideprev</u>

The websites 1 more time ...

- 3 major Wisconsin initiatives complementing our work to create trauma-informed schools
- Wisconsin PBIS Network <u>http://www.wisconsinpbisnetwork.org/</u>
- Adverse Childhood Experiences (ACEs)
 <u>http://www.cdc.gov/ace/index.htm</u>
- Wisconsin TIC Educational & Media Campaign http://www.dhs.wisconsin.gov/mh_bcmh/tic/index.htm

The websites 1 more time ...

National Resources

- Massachusetts Advocates for Children <u>http://www.massadvocates.org/</u>
- Washington State Compassionate Schools
- http://www.k12.wa.us/CompassionateSchools/
- National Child Traumatic Stress Network <u>http://www.nctsnet.org/</u>
- Trauma-Informed Care (TIC)
- http://www.samhsa.gov/nctic/

Contact Information

Nic Dibble, LSSW, CISW Consultant, School Social Work Services Wisconsin Department of Public Instruction <u>nic.dibble@dpi.wi.gov</u> (608) 266-0963 <u>http://sspw.dpi.wi.gov/sspw_socialwork</u>

Secondary Traumatic Stress, Burn-out and Self-Care

Quality and Evidence Based Community of Practice April 17, 2013

Erin Butts, MSW

This work was supported in part by OJJDP Grants #2009-TY-FX-0010 and 2007-JL-FX-0041, SAMHSA Grant #1U79SMo58145, and COPS grant #2010CKWX0434. However, no university or sponsor endorsement should be inferred.

SECONDARY TRAUMATIC STRESS, BURN-OUT AND SELF-CARE

Quality and Evidence Based Community of Practice April 17, 2013

Erin Butts, MSW

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Center for School Mental Health

Dr. Nicole Brandt Dr. Jim Caringi Dr. Mark Sander IDEA Partnership Many other colleagues



Montana Office of Public Instruction National Child Traumatic Stress Network









Strengthening Schools and Communities Since 1957

The University of **Montana**

As a program of The University of Montana's College of Education & Human Sciences IERS houses these major centers:

> Director and Principal Investigator Dr. Rick van den Pol



auma Cente



National Native Children's Trauma Center



Statewide Partners









National Partners





The National Child Traumatic Stress Network

Effective School-wide Interventions

















Participant Check-In I am familiar with secondary traumatic stress (STS) language, research and identification: Very familiar Familiar Mildly familiar Not at all familiar







Interest in STS









Trauma Examples in Populations We Work With

Acute













Trauma Examples Continued...











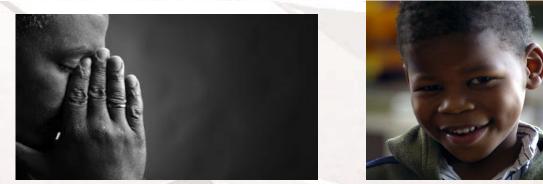
And All of This Exposure Impacts Us Direct Contact







Everyone agreed that the morale and team-building session was a roaring success.









And All of This Exposure Impacts Us Indirect Contact

Hearing about others Stories

Reading Case Files

Records









What About You? Your stress? Personally? Professionally?









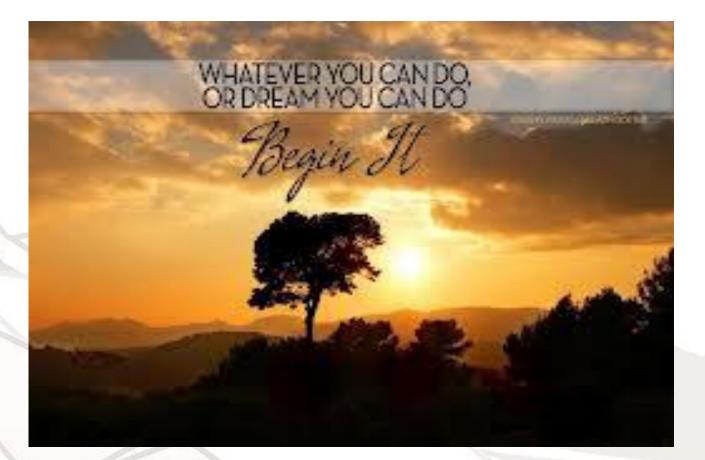
General "Stress"

- Stress is your body's way of responding to any kind of demand.
 - It can be caused by both good and bad experiences.
 - When people feel stressed by something going on around them, their bodies react by releasing chemicals into the blood.
 - These chemicals give people more energy and strength, which can be a good thing if their stress is caused by physical danger.
 Fight or Flight (limbic)
 - Implications

Many factors influence how we respond to stress







SECONDARY TRAUMATIC STRESS







STS Defined

Figley defines secondary traumatic stress as "the natural and consequent behaviors and emotions resulting from knowing about a traumatizing event experienced by a significant other, the stress resulting from helping or wanting to help a traumatized or suffering person", (Figley, 1995a)







Impacts of Stress on Our Emotional Well-Being



© Original Artist

Anger

Anxiety

Feelings of Hopelessness

"I've been under a lot of pressure lately. It's like I'm drowning, no air, you know?"

Sadness

and i have become comfortably numb.







Impacts of Stress on Our Physical Well-Being Headaches Hyper-arousal Stomachaches



Increase Fatigue or Illness 52



Lethargy





Impacts of Stress on Our Personal Well-being



Self-Isolation

Cynicism

Irritability with Partner, Family, Friends,

Social Withdrawal







Impacts of STS in Our Workplace



Avoidance Productivity "We offee and an Tardiness

Job Dissatisfaction & Turnover



"We offer competitive pay, good benefits and an attractive severance package."

Missed Appointments

Tardiness









Self Check-In

When I am stressed cognitively, physically, emotionally, in my work place and/or in my personal life, I am selfaware of how stress impacts my body, mind and spirit:

Very aware
Aware
Somewhat aware
Could be more aware
Do not feel aware at all









Secondary Trauma Signs Intrusive thoughts or images, Avoidance (of significant others, clients, students) Nightmares **Flashbacks** Exaggerated startle response ctrec Increased startle response **Difficulty concentrating Difficulty sleeping** Changes in the way one views the work & the world Anxiety







What Increase Secondary Trauma Risk? Being overwhelmed Being isolated Too many 4 empty calories? Feeling disorganized Feeling helpless Personal history of trauma and/or depression







The Impact? The Significance?

High levels of STS Symptoms......

You can not see







Important!!

Secondary traumatic stress is a NORMAL reaction to ABNORMAL circumstances.....

Secondary traumatic stress is a NORMAL reaction to ABNORMAL circumstances.....

Secondary traumatic stress is a NORMAL reaction to ABNORMAL circumstances.....







STS Research in Schools Journal: Advances in School Mental Health Promotion

Title: Secondary traumatic stress in school personnel

Authors: Borntrager, et al

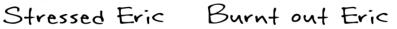
ADVANCES IN SCHOOL MENTAL HEALTH PROMOTION

Training and practice Research and policy





Burnout





(Eric was too
tired to pose for
this cartoon,
apologies)







©hills www.myburnouffhing.com



Burnout

Maslach & Leiter define burnout as:

"the index of the dislocation between what people are and what they have to do. It represents an erosion in values, dignity, spirit and will--an erosion of the human soul. It is a malady that spreads gradually and continuously over time, putting people into a downward spiral ..."





"The Truth About Burnout" Maslach & Leiter

Below are some of what their research has revealed:

- **Overloaded work schedule:** Too little time and too few resources to accomplish the job.
- Lack of control: Reducing costs is primary over needs of students or employees.
- **Breakdown of community:** Faster paced work destroys the sense of community among coworkers, which further disrupts our job performance.
- **Unfair treatment of workers:** If evaluations, promotions, and benefits are not applied fairly, the organization cannot be trusted by the employee.
- **Conflict of values:** Performing tasks we feel are unethical or which go against our personal values undermines our ability to believe in the worth of the work we do.







The "ABC's"



Balance

Connection



Discharge what is harmful

Embrace what is helpful







Positive Institutional Factors

DON'T WORRY. EVERYTHING IS GOING TO BE AMAZING.





Institute for Educationa Research and Service

Self-Care



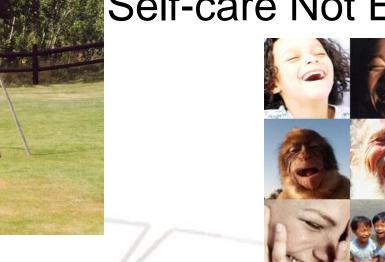
Saakvitne and Pearlman (1996) assert, "Self-care is an ethical imperative. We have an obligation to our clients-as well as to ourselves, our colleagues, and our loved ones-not to be damaged by the work we do."







Self-care Not Enough?



How about "Radical Self-care?" "Intentionally & frequently creating opportunities for respite & replenishment"









Let's Practice Together

(Resiliency Manual)







Exercise Feedback

1)This is the first time I have participated in this type of exercise during my work day?

Yes

No

2)After participating in this exercise, I feel more relaxed:

Yes

No

No noted difference in how I feel

3) After participating in this exercise I can identify a physical, emotional or psychology reduction in stress at this moment:

- Yes
- No

No area(s) of reduction in stress is self-identified







What Else Might Work for Me? Celebrations Gratitude Mindfulness **Positive Thinking Spirituality and Religion** Team building Use of Vacation/Leave Wellness activities **Working Protectively**







Additional Examples:

Adequate rest

- Exercise
- Healthy work environment

Nutrition

Peer support Policies Reasonable workload Recognition for good work Self-reflection and Self-recognition Supervision





Take Away Exercise

 Identify a partner that you will check in with at next week's early out. Develop a self-care plan that identifies how you will take care of yourself:

Personal

- Professional
- Organizational

Make a personal list and CIRCLE the ones you will do this week.





Personal

Making personal life a priority Personal psychotherapy Leisure activities: physical, creative, spontaneous, relaxation Spiritual well-being Nurture all aspects of yourself: emotional, physical, spiritual, interpersonal, creative, artistic

Attention to health





Professional

Supervision / consultation Scheduling: client or student load and distribution Balance a variety of tasks Education: giving and receiving Work space





Organizational

Collegial support Forums to address STS Supervision availability Respect for workers and clients Resources: mental health benefits, space, time





In All Realms

Mindfulness, spirituality and selfawareness Self-nurturance Balance: work, play, rest Meaning and connection





Other ideas for dealing with STS

EMDR Energy psych Body work Culturally specific approaches





Self-Care Exercise

	Daily	Weekly	Monthly	
Personal				
Professional				
Organizational				
In All Realms				







Thank You!

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