Students, staff, administrators, and families experience multiple stressors each day. For many, stressors are rising to the level of distress and trauma, and negatively impact their ability to live healthy lives and learn to their full potential. Before educators can make decisions about effective ways to address trauma in their classroom and throughout the school, they need to understand what it is, its impact generally, and its disproportionate effects on individuals of color and other underserved groups. This section of the toolkit establishes a common vocabulary related to trauma and resilience, their impact on life, learning, and other important concepts, and offers strategies to begin to embed a trauma-informed, resilience-oriented approach throughout the school community before a crisis happens.

**Establish Understandings of Trauma, Its Impact, and Prevalence in School Communities**

Trauma and its impact are individual experiences. Multiple kinds of events such as child maltreatment, violence in the home, substance misuse, loneliness, serious illness, car accidents, natural disasters like flooding and forest fires, terrorism, and war, can all be experiences of trauma. Additionally, groups of people defined by culture, race, religion, ability, gender, sexuality, territory, socioeconomic status, or language can have collective experiences that impact themselves and multiple generations of their offspring. Often experiences of oppression related to the multiple pieces of a person's identity layer on each other, and intensify and increase the frequency of trauma.

**ACTION STEPS**

- Establish understandings of trauma, its impact, and prevalence in school communities
- Encourage new mindsets about students and their experiences of trauma and toxic stress
- Embed trauma-informed, resilience-oriented principles into all decision-making

**IMPLEMENTATION TOOLS**

- Six Principles of Trauma-Informed, Resilience-Oriented Schools Reference Sheet
- Trauma-Informed, Resilience-Oriented Schools Principles Assessment Questions
- Trauma-Informed, Resilience-Oriented Schools Review Tool for School Policies, Protocols, Procedures & Documents
- Practicing Responding to Trauma Scenarios
- Personal Identity and Loss Activity
- Brain Rules Practice Template Tool
- Introduction to Trauma and Trauma-Informed, Resilience-Oriented Schools Slide Deck
Defining Trauma

According to the Substance Abuse and Mental Health Services Administration (SAMHSA), trauma results from an event, series of events, or set of circumstances experienced or witnessed by an individual that amount to an overwhelming or life-changing effect on the individual’s well-being. Trauma affects people in numerous and individualized ways, such as health complications, distrust of people, institutions, and systems, and an altered view of the world, beliefs, and spirituality.

Adverse Childhood Experiences (ACEs) are a sociological measure of childhood experiences that can cause trauma. They include events occurring during childhood such as experiencing or witnessing violence and parental separation. Research has linked ACEs to chronic health issues, including mental illness and addiction. Since 1997, almost every state has completed the ACEs survey at least once with a cross-sample of their population. Consistent through all the surveys is the conclusion that ACEs are common. They exist across states, communities, cultures, races, geographical areas, socio-economic categories, and languages. Additional studies have been done in schools. A study in Washington State concluded that, on average, 13 out of every 30 students in a classroom will have toxic stress from 3 or more ACEs.

The original list of ten ACEs in the seminal 1997 study has since been expanded as the field’s definitions of trauma have solidified and gaps in the list have been highlighted. Trauma is now understood to result from experiences like food insecurity, poverty, and discrimination.

Historical trauma is the cumulative and psychological wounding, over the lifespan and across generations, emanating from massive group trauma experiences. This form of trauma stems from an event affecting a group of people, and the consequences of the event impact generations to come, particularly as systems

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**KEY TERMS**

Sometimes conflated, there is a difference in definitions for trauma, ACEs, and toxic stress.

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Trauma</td>
<td>An umbrella term used to describe the impacts of ACEs and toxic stress.</td>
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<tr>
<td>ACEs</td>
<td>Specific experiences occurring during childhood, such as abuse or neglect.</td>
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<tr>
<td>Toxic Stress</td>
<td>Occurs when an individual “experiences strong, frequent, and/or prolonged adversity” without adequate support. This term refers to the physiological stress response to ACEs. Without intervention, this response can disrupt brain and organ development and increase risk for serious health consequences later in life.</td>
</tr>
<tr>
<td>Historical Trauma</td>
<td>The cumulative and psychological wounding, over the lifespan and across generations, emanating from massive group trauma experiences.</td>
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</tbody>
</table>
and institutions continue to inflict pain related to this event. Some examples include genocide and forced assimilation of indigenous peoples in the United States, slavery, Jim Crow era discrimination, and procedures and policies that make it difficult for Black, Indigenous, and People of Color to achieve their goals. This form of trauma has long-lasting impacts and has been tied to disparities in health and educational outcomes for these populations.

**Effects on Learning**

Toxic stress, resulting from ACEs and trauma, can disrupt a learning brain. Much of our understanding of the effects of toxic stress on the brain comes from the work of Dr. Bruce Perry. The stress response is not inherently bad; the brain reacts to challenging situations to protect the body through what is often called a fight, flight, or freeze response. However, when experienced frequently and intensely, this stress response becomes toxic. The physiological response can negatively impact the development of the brain and other organs, potentially resulting in cognitive impairment and chronic physical disease.

An escalated stress response system activates the lower and midbrain (indicated by purple, green, and yellow on the diagram) causing individuals to be hypervigilant to threats and fears. When the stress response system remains escalated over an extended period of time, the brain can be structurally, chemically, and neurologically changed. Thus, learning is often impacted as memory function, attention, and cognitive abilities can be compromised.

In addition to the physiological disruption of learning, trauma can negatively impact a child’s sense of self-worth and self-esteem. Trauma is known to impact an individual’s sense of identity and how they perceive themselves. Confidence and self-esteem are tied to learning. Students with low self-esteem frequently are hesitant to engage in learning and may respond to challenges in the classroom with frustration, anger, and disinterest. This change in worldview, identity, and learning ability often manifests itself in negative behaviors. Educators’ responses to these attitudes and behaviors, such as focusing on poor performance, publicly addressing the issue, and ignoring students who are struggling can exacerbate the reaction, which further isolates and discourages the student.

**Resilience—the Antidote**

The prevalence and impact of trauma can be overwhelming and intimidating. Fortunately, it is possible to heal and prevent trauma and improve responses to stressors. Resilience is “the capability of individuals to cope successfully in the face of significant change, adversity, or risk.” This capability is not fixed; through targeted strategies and interventions, it is possible for an individual’s resilience to improve. Changes to the environment, the development of protective factors, and practicing skills to manage stress response all can promote resilience.
Section 1: Introducing Trauma and Trauma-Informed, Resilience-Oriented Schools

Encourage New Mindsets about Students and Their Experiences of Trauma and Toxic Stress

Where does that leave schools? With stress, toxic stress, and trauma on the rise, how can they respond? To begin, educators, administrators, and any individuals who interact with students must be introduced to the most basic information about trauma, its prevalence, and impact. Consider sharing with teachers the article, 10 Things About Childhood Trauma Every Teacher Needs to Know, and creating one-page fact sheets about trauma and why your school and/or district is paying special attention to this issue, such as those provided by the National Child Traumatic Stress Network (NCTSN) for preschool, elementary, middle school, and high school children. Integrate NEAR Science (Neurobiology, Epigenetics, ACEs and Resilience) into science curricula at the high school level. Host information sessions at school board meetings, parent-teacher conferences, professional development meetings, and other established meetings to share definitions and begin community conversations about trauma and resilience, and how both show up in your school. Included in this toolkit is an introductory presentation that you can adapt for these types of sessions.

One goal of learning about trauma and resilience is to start to shift mindsets about students and their experiences of trauma and toxic stress. Support teachers, staff, families, and even the students themselves to adapt their perspective to understand that student disengagement, frustration, emotional dysregulation, and lack of academic success can all be related to experiences of distress, toxic stress, and trauma. Often, it’s not a question of their motivation to learn, but rather a question of what is getting in the way of learning. Even shifting language from describing a student as “acting out” or “uncontrollable” to “emotionally dysregulated” and “lacking skills” helps to focus an educator’s actions on teaching lagging skills and repairing relationships rather than on punishment.

<table>
<thead>
<tr>
<th>Terms to Avoid</th>
<th>Replacements</th>
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<tbody>
<tr>
<td>Acting out</td>
<td>Emotionally dysregulated</td>
</tr>
<tr>
<td>Aggressive</td>
<td>Fight</td>
</tr>
<tr>
<td>Runner</td>
<td>Flight</td>
</tr>
<tr>
<td>Disengaged</td>
<td>Freeze</td>
</tr>
<tr>
<td>Uncontrollable</td>
<td>Lacking skills</td>
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</table>

Students experiencing trauma and toxic stress may be in a state of alarm while in the classroom, whether in person or virtually. They may be teetering on the edge of calm and upset, and seemingly small actions may make the difference of which side they fall on. Even nonverbal cues from educators and staff may have a heightened effect on a student sitting in this state. This
is why it is important to shift mindsets from a behavioral deficit model to an understanding of students’ behavior.

Because this mindset may be new, it is important to practice how to respond when trauma and toxic stress show up in the classroom. When teachers and staff adopt and utilize regulating practices with students, they can help to keep a situation from escalating and even move a student from a state of alarm to calm, which allows their brain to utilize their cortex and learn more effectively. Use the Practice Responding to Trauma Scenarios tool during professional development and parent-teacher conferences to consider how to respond to situations differently. Scenarios for early childhood, elementary, and secondary age groups are provided. Each practice scenario includes a description of a traditional response to challenging behaviors. Then, it offers an alternative rooted in trauma-informed, resilience-oriented principles and practices.

The more educators can practice responding, the more effective they will become. Frequently, our brains run automatically, making decisions about how we feel about interactions and situations without our conscience recognition. Fortunately, these automatic responses can be confronted. Consider these six brain rules to practice changing learned habits and behaviors for responding to challenges in the classroom:

1. “The brain seeks to minimize social threats and maximize opportunities to connection with others in the community.” Seek to prioritize relationships and connection-building activities throughout the school community.

2. “Positive relationships keep our safety-threat detection system in check.” Build community norms around supporting academic safety. Foster a psychologically safe environment that encourages the growth and risk-taking needed for learning.

3. “Culture guides how we process information.” Consider taking time to reflect on your own culture and view of the world. Our differences can be our strength, but only when we understand how they are playing out in our relationships and interactions.


5. “All new information must be coupled with existing funds of knowledge in order to be learned.” Encourage each other to reflect on how new information is similar to or different from previous experiences and current expectations. This curiosity can spur growth and foster relationships.

6. “The brain physically grows through challenge and stretch, expanding its ability to do more complex thinking and learning.” Lean into learning. Support each other to engage in growth rather than step away when things are different or difficult.

A template found in this toolkit of the six brain rules includes the six rules, an explanation of each, implementation examples for work with students and staff, and a place for teachers to insert their own method of implementation.
Educators can also refer to three tips for making any lesson more culturally responsive. These tips take into account how students who come from a communal and oral tradition can be engaged in learning new knowledge and concepts. The tips are not based on language or race, but a broader, cross-cultural oral tradition.

1. Gamify it: Games “get the brain’s attention and require active processing,” which makes them a powerful strategy in the classroom.29

2. Make it social: Organize learning activities to encourage students to rely on each other. This will “build on students’ communal orientation…attention and engagement.”30

3. Storify it: The use of stories is universal. Students “learn content more effectively if they can create a coherent narrative about the topic or process presented. That’s the brain’s way of weaving it all together.”31

Videos can be a helpful way to understand and see a visual depiction of what is meant by changing mindsets. In the Alternate Learning Strategy box, you will find videos to encourage staff, students, families, and communities to think about trauma and resilience in the classroom and school community.

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**Alternate Learning Strategy**

Videos for understanding trauma, ACEs, and toxic stress and resilience:

» [How childhood trauma affects health across a lifetime](https://www.tedmed.com/review/how-childhood-trauma-affects-health-across-a-lifetime) by Dr. Nadine Burke Harris at TEDMED 2015

» [Experiences Build Brain Architecture](https://www.developingchild.harvard.edu/2015/02/experiences-build-brain-architecture/) from the Center on the Developing Child at Harvard University

» [Serve & Return: Interaction Shapes Brain Circuitry](https://www.developingchild.harvard.edu/2016/01/serve-return-interaction-shapes-brain-circuitry/) from the Center on the Developing Child at Harvard University

» [Toxic Stress Derails Healthy Development](https://www.developingchild.harvard.edu/2016/01/toxic-stress-derrails-healthy-development/) from the Center on the Developing Child at Harvard University

» [InBrief: The Science of Neglect](https://www.developingchild.harvard.edu/2016/01/inbrief-the-science-of-neglect/) from the Center on the Developing Child at Harvard University

» [Intergenerational Trauma Animation](https://www.healingfoundation.com.au/resources/intergenerational-trauma-animation) from the Healing Foundation

» [How Do People Experience Historical Trauma?](https://www.minnesotalink.org/child-youth-family/consumer-education) from the Children, Youth & Family Consortium at the University of Minnesota Extension

» [Brains: Journey to Resilience](https://www.albertafamilywellness.org/resources) from Alberta Family Wellness

» [ReMoved](https://www.youtube.com/watch?v=H4Q9J9KQ4Dc) by Nathanael Matanick

» [Purple Glasses](https://www.youtube.com/watch?v=H4Q9J9KQ4Dc) from Teeland Middle School at the Mat-Su Borough School District community.
Embed Trauma-Informed, Resilience-Oriented Principles into all Decision-making

Throughout this toolkit we will use the trauma-informed, resilience-oriented principles as applied to the field of education as a lens for choosing trauma-informed, resilience-oriented practices, processes, and procedures. When these principles are embedded in the school culture, policies, and daily practices, it can be identified as a trauma-informed, resilience-oriented school: “an innovation in which schools infuse the core values safety, trust, choice, collaboration, and empowerment into their Multi-Tiered System of Support’s practices, assessments, and program adjustments. [The school] acknowledges the high prevalence of traumatic exposure for students, the importance of staff wellness, and strives to meet the unique needs of all learners.”

Six Principles of Trauma-Informed, Resilience-Oriented Schools

The central feature of a trauma-informed, resilience-oriented school is the infusion of the Six Principles of Trauma-Informed, Resilience-Oriented Schools throughout the school community, its processes, procedures, and environments. The Six Principles of Trauma-Informed, Resilience-Oriented Schools Reference Sheet serves as a quick reference sheet to help readers remember, understand, and communicate the principles.

To begin to embed these principles into decision-making, a good activity is to use the Trauma-Informed, Resilience-Oriented Schools Principles Assessment Questions tool to drive discussions with leadership, staff, students, and the broader school community. The guiding questions in this tool are broader and more theoretical, and may be used to open a discussion. The specific questions highlight more concrete considerations to take action on, and could easily be turned into a survey that is disseminated to school community members or used in a focus group. Consider using existing channels of communication, such as parent-teacher conferences and professional development days, to make it easier to gather this information. When making decisions that affect the school community, it is recommended that decision-makers come back to these principles and assessment questions. As you make plans and decisions, ask:

» How will this decision further embed the principles in our school community?

» How have we utilized these principles to make this decision?

» Is there an additional step we may need to take to ensure these principles are utilized in our decision-making process?

6 PRINCIPLES OF TRAUMA-INFORMED, RESILIENCE-ORIENTED SCHOOLS

» Safety
   Ensuring physical, academic, social, behavioral, and emotional safety in the school community

» Trustworthiness
   Maximizing trustworthiness through task clarity, consistency, and interpersonal boundaries between all members of the school community

» Student Voice and Empowerment
   Maximizing student and family input, choice and control

» Collaboration
   Facilitating collaboration and sharing power

» Peer Support
   Providing help and support for each other, for both students and staff

» Inclusion and Engagement
   Practicing inclusion, seeking to prevent discrimination, and celebrating the unique aspects of our school community
REFERENCES

To return to your place in the toolkit, click the number of the endnote that you followed to this page.


4  Stevens, Jane. (May 31, 2012). Massachusetts, Washington State lead U.S. trauma-sensitive school movement. ACEs Too High. Retrieved September 11, 2020 from https://acestoohigh.com/2012/05/31/massachusetts-washington-state-lead-u-s-trauma-sensitive-school-movement/. While this study has not been repeated, further research on this topic can be found at: https://extension.wsu.edu/cafru/research/.


REFERENCES

To return to your place in the toolkit, click the number of the endnote that you followed to this page.

10 To learn more about Dr. Bruce Perry’s work, visit http://www.bdperry.com.


REFERENCES

To return to your place in the toolkit, click the number of the endnote that you followed to this page.