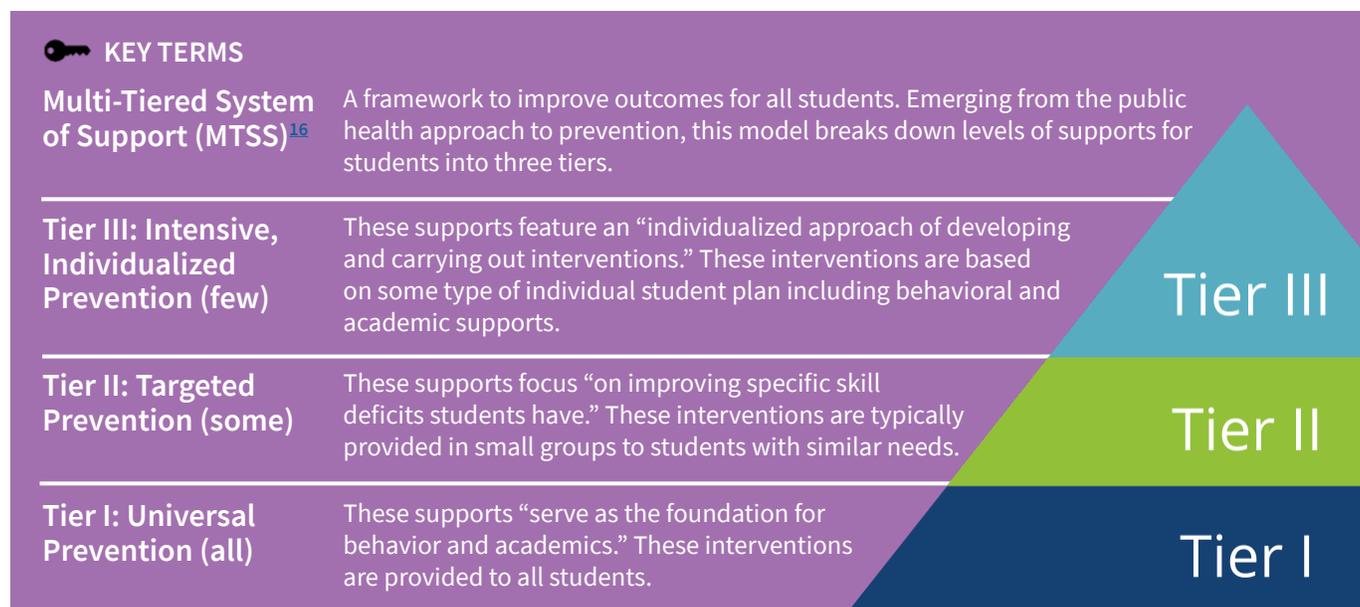


SECTION 4

Tier II and Tier III Interventions and Supports



Once universal trauma-informed, resilience-oriented practices are in place, a small percentage of the student population will continue to struggle academically and/or behaviorally. Traditionally, these students would be referred for special programs such as Title I or Special Education Programming. Less time is spent in the general education classroom and interventions were chosen based on a student’s lowest skill in an academic area. Often the student has mastered many of the skills in the chosen curriculum; however, the programmatic choice is either full-time instruction in the specific academic area in the general education classroom or in the pull-out intervention program. The result is students falling farther and farther behind their grade-level peers. Educators would consider, “What is wrong with this student?” and, “Which program will best address their deficits?”

In a multi-tiered system of supports, at Tier II, students receive services and supports in small groups and individually at Tier III.¹ Although they benefit from Tier I approaches, these more targeted interventions and supports fill in where universal strategies fall short for these specific students.

The key purpose of schools is to ensure that students learn academic skills and knowledge as well as social and emotional skills, executive functioning, and problem-solving skills. It is not the role of the school to assess, diagnose, and provide therapeutic treatment for students with mental illness. However, it is necessary to understand an individual student’s mental health needs and how to support them in the academic environment. Trauma-informed, resilience-oriented schools create partnerships with community agencies to provide students with the services that the school does not. More about school-community partnerships can be found in Section 5 - Parent and Community Partnerships.

In a trauma-informed, resilience-oriented approach implemented in a tiered framework, student needs, interventions, and how they were implemented is the focus of the discussion. Individual skills are remediated, with the student only leaving the general education classroom for short periods of time.

The goal of a multi-tiered system of supports (represented in the Key Terms box) is to maintain all students in their classrooms with their peers and the teacher who knows the content. When they need more support, the staff are curious about the root of the problem and choose an evidence-based intervention targeting the specific root or need. It might be implemented in a small group (Tier II) or in a one-on-one situation (Tier III) until the student has mastered the specific skill. For the remainder of the day, the student continues to learn in the classroom, leaving just for the targeted instruction. Finally, the educators consider what they need to do differently to assist the student in their learning. How can the environment be altered? Do I provide a safe environment and relationship that supports the student? How can I change my instruction based on what I have learned about the student?

Some examples of interventions for challenges related directly to toxic stress and trauma used at Tier II and III include alternative teaching of specific social and emotional skills such as identifying feelings and sharing that information with others, communicating frustration in a calm and helpful manner, working collaboratively with their peers, and other coping skills. Academic intervention may already be established in your school. Other sources for these interventions include the [National Center on Intensive Intervention](#) and the [Wisconsin Response to Intervention Center](#). Most states have their own list of interventions that are recommended and vetted for their districts. In the area of behavior, [Positive Behavioral Interventions and Supports](#) suggests many evidence-based interventions. Interventions are best implemented within a system of assessment, implementation, and tracking to document success or identified needed changes.

Create Student Plans Responsive to Trauma and Rooted in Resilience-Building Approaches

Teams comprised of the student (when developmentally appropriate), their parents or guardians, teachers, administrators, student support staff, and community providers work collaboratively to determine the individual's unique needs and then create an individualized plan. Teams can be a multi-



ACTION STEPS

- » Create student plans that are responsive to trauma and rooted in resilience-building approaches
- » Adapt schoolwide discipline processes to meet individual students' mental health needs
- » Implement targeted practices for Tier II and III supports

IMPLEMENTATION TOOLS

- » [Practice Scenarios – Alternatives to Discipline](#)
- » [Trauma-Informed, Resilience-Oriented Check-In/Check-Out Checklist](#)
- » [Individual Student Behavior Plan](#)
- » [Trauma-Informed, Resilience-Oriented Social, Academic, Instructional, Groups \(SAIG\) Review Activity](#)
- » [Student Progress Record of Interventions](#)
- » [Trauma-Informed, Resilience-Oriented Instruction-Curriculum-Environment-Learner \(ICEL\) Assessment Questions](#)
- » Professional Development Training Slide Decks:
 - » [Schoolwide Discipline Processes Adaptations](#)
 - » [Targeted Tier III Practices](#)

tiered system of support team, a grade-level team, a 504 Plan team, or an Individual Educational Plan (IEP) team, where the focus is on building an effective plan rooted in the individual student’s strengths to address the challenges they experience at school.

Student voice and choice must be involved in all stages of this process. Input from students may include: identification of safe adults and environmental factors, preferred learning style, effective regulation strategies, and their tolerance for length and style of interventions. To build resilience and to set clear expectations, the plan primarily focuses on what is behind the behavior, such as trauma and toxic stress, and what needs the student is attempting to meet, such as safety and emotional regulation. Disruptive behaviors are not condoned at any point in this plan.

Behavior	Need	Plan to Address the Need
<ul style="list-style-type: none"> » Talking or yelling during instruction or quiet work time. » Shutting down and not doing work. » Physical aggression toward others or self. » Using disrespectful language. » Hurting other students’ property, classroom materials, furniture, or the building. 	<ul style="list-style-type: none"> » Frustration » Lack of regulation skills » Anger » Sadness » Fear » Jealousy » Pain » Loneliness » Intrusive or distorted beliefs 	<ul style="list-style-type: none"> » Identify specificity of need, source of pain, and fear. » Determine level of readiness. » Teach executive functioning, communication, academic, social, and emotional skills. » Model and support development of skills.

Information about the challenge is gathered using a functional behavioral assessment (FBA) and/or academic assessment. All individuals on the team bring their knowledge of the student’s strengths and challenges to the table. Based on all the data the team creates a follow-up behavioral intervention plan (BIP). The assumption or belief behind a trauma-informed, resilience-oriented FBA and BIP is that all behavior serves a purpose. For students impacted by trauma, that purpose is generally an attempt to feel safe. Adults on the team must remember the neurobiology of trauma and toxic stress, and reflect the trauma-informed, resilience-oriented assumptions about student behavior:

1. All behavior serves a purpose.
2. Students do well if they can—when they do not, something is lacking.
3. Behavior continues because it is reinforced in some way.
4. It is necessary to understand the need behind behavior in order to understand its function or purpose. It is necessary to understand that information in order to choose interventions that will change a student’s behavior.

Choose Evidence-Based, Trauma-Informed, Resilience-Oriented Interventions in the Student Plan

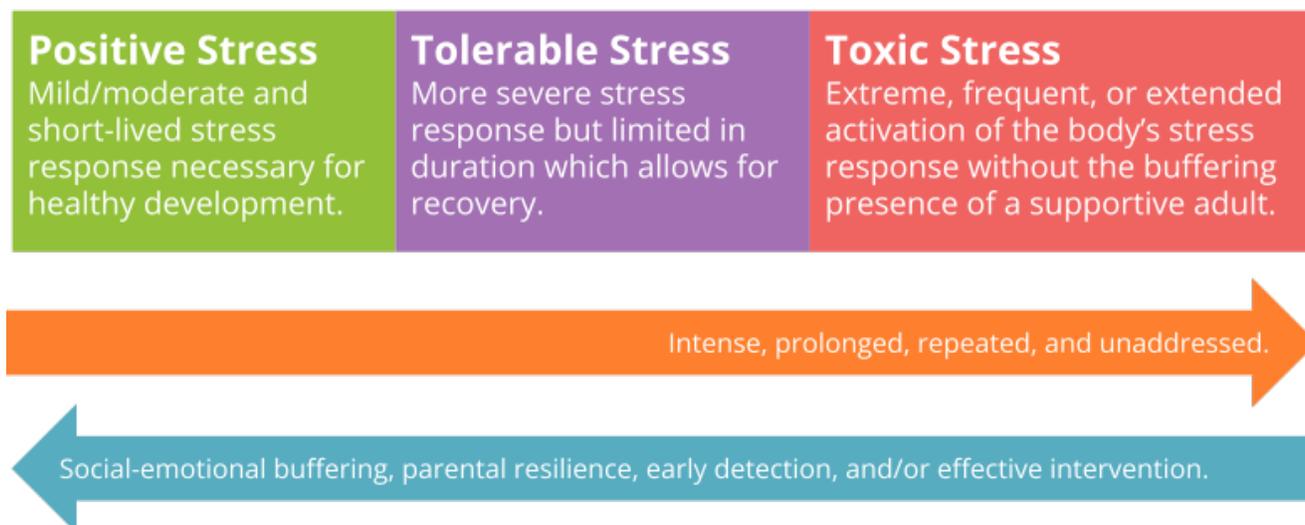
Once the team has gathered the necessary data, they can choose specific interventions and supports to address the identified need. One key difference between universal approaches and interventions at Tier II and III is the increased intensity, frequency, and duration. In other words, they are utilized more often, are implemented in smaller groups, and are more focused in their scope. The interventions often continue for a longer duration and over a more extended period of time. These factors are part of a process to increase the student's opportunity to learn new skills. Comprehensive lists of trauma-informed, resilience-oriented, evidence-based Tier II and III interventions can be found at [Blueprints for Healthy Youth Development](#)² and the [Institute of Education Sciences What Works Clearinghouse](#).³

Social, Academic, Instructional Groups (SAIG)⁴ and Check-In, Check-Out (CICO)⁵ connections between an individual educator and student are commonly used and easily implemented strategies. SAIG is organized as a Tier II intervention to bring together students with similar social, emotional, regulation, or academic instructional needs. Adults leading the group may use specific curricula and should monitor students' progress throughout the intervention. Students with significant academic needs in specific subjects may be placed in evidence-based interventions where progress is monitored weekly. Teams should consider this course of action if the student's academic needs are so great that they are considering an evaluation for learning disabilities in the future. To ensure your SAIG is meeting the needs of students impacted by trauma and/or dealing with ongoing toxic stress, use the Trauma-Informed, Resilience-Oriented SAIG Review Activity.

Students impacted by trauma benefit from CICO as both a Tier II and Tier III intervention. Through CICO, they can solidify a relationship with an individual educator. Every morning and afternoon, the student and educator touch base to monitor emotional, behavioral, and academic performance on that day. If a student is dysregulated during this meeting, the educator has time to help them return to a calm state before the school day or class period has even started. Educators do this through sensory regulation strategies, such as deep breathing, yoga moves, brain breaks, grounding exercises, or allowing the student to take time in a calming place. The educator can also refer to strategies the individual student has identified as helpful in their individualized plan. The educator can ask questions quietly and calmly, such as, "How are you feeling today?" "Do you feel safe this morning?" "What assignments do you need help with?" "Are you concerned about any class today?" "Will you have time to complete this work tonight?" These interventions and supports are helpful for students at all grade levels. To assess the efficacy of your CICO interventions, use the Trauma-Informed, Resilience-Oriented Check-In/Check-Out Checklist.

The student's ability to stay regulated and benefit from instruction and support will determine the intervention dosage. The intervention itself should not push a student into a dysregulated state. For the intervention to be beneficial, the time of day and length of the intervention must align with a student's tolerance level. This ensures they can experience stress as positive or tolerable as defined on the stress continuum.⁶

Stress Continuum



Source: Center on the Developing Child. (2020). Toxic Stress. Harvard University. Retrieved December 19, 2020 from <https://developingchild.harvard.edu/science/key-concepts/toxic-stress/>

Mild or moderate stress over short periods is considered to be healthy for development. All learning pushes students beyond their comfort level, enabling them to incorporate new concepts, skills, and processes. However, for students who have been impacted by trauma, learning new skills and ideas can be experienced as toxic. Unfortunately, learning stops when a student is experiencing toxic stress. During interventions, it is necessary to monitor the student's state of mind to gauge their ability to regulate and/or reason.

Choosing the appropriate response based on a student's brain state may look like taking a short break. Use the Individual Student Behavior Plan tool to see what responses are most beneficial at each stage of escalation and de-escalation.

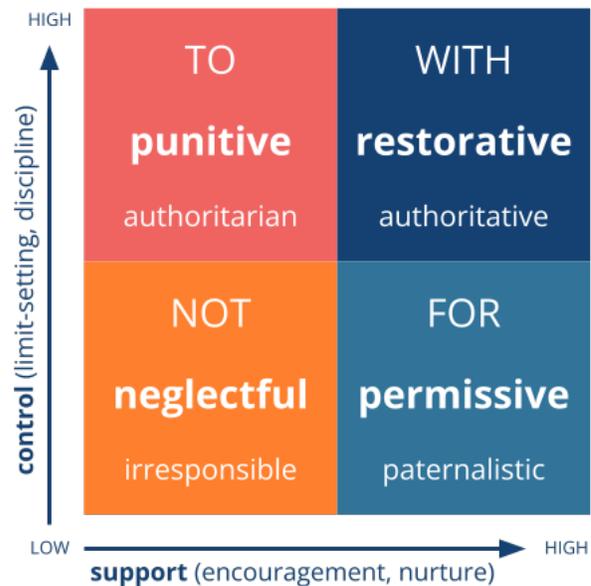
Most students can learn the new skills needed to maintain regulated emotions and behavior when Tier II interventions are planned and implemented with fidelity based on student needs and input, and integrate the knowledge of the professional educators. Some students will need to be taught and supported in a more intensive setting than the Tier II small groups. These students require one-on-one work at Tier III. The instruction may be the same, but the student is receiving it more frequently in a one-on-one situation for a longer duration each time. As soon as a student is able to return to a Tier II group or the classroom, a shift in the schedule should be made. This would happen when they have mastery of the regulation skill needed to remain calm in an environment with other students.

Adapt Schoolwide Discipline Processes

Schoolwide discipline processes may not only unsuccessfully address problematic behaviors, but at their worst, they can cause further toxic stress and trauma for students. The traditional school discipline model is based on the increasing severity of consequences aimed at motivating a student to behave in “appropriate” ways. Often, these consequences include exclusion from peers, such as separate lunch or after-school detention. When a student’s behavior does not change or becomes more severe, schools traditionally continue along the continuum to suspension and, finally, expulsion.

Many schools have already started to adapt their discipline processes through programs such as Positive Behavioral Interventions and Supports (PBIS), Restorative Practices, and Conscious Discipline. These types of programs add instruction on appropriate behaviors and opportunities for discussing hurt and possible repair as responses to challenging and unsafe behavior. The decision-making process about consequences is considered a restorative approach when they move from “to” to “with” a student as seen on the Social Discipline Window.⁷

Social Discipline Window



Source: Wachtel, T. (2016). Defining Restorative. International Institute for Restorative Practices. Retrieved December 18, 2020 from https://www.iirp.edu/images/pdf/Defining-Restorative_Nov-2016.pdf.

A more flexible program that allows administrators, teachers, families, and students to create a plan responsive to the problematic behavior holds hope for helping students learn better behavior. These programs incorporate **reflection, instruction, and restoration** in their frameworks.⁸ This process involves guiding a student to think about the behavior, then creating a plan with the educator to learn new skills and address the harm that was done. A student is connected with the trusted adult identified in their plan. This educator facilitates the student’s reflection on their behavior by discussing what happened and why, who may have been hurt, what can be done to “repair” the harm, and what appropriate consequences or actions to take. Together, they create a contract that the educator monitors with the student. When the student, and in some cases their family, is involved in this process, the plan created can positively impact the student’s future.

For some students, this alternative discipline process is not easy or simple. It is difficult for them to reflect on their behavior and see why or how it must change. Truly restoring the harmed relationships is even more difficult. Collaborative Problem-Solving (CPS),⁹ discussed in Section 2 – Universal Trauma-Informed, Resilience-Oriented Schools Practices and Processes, is an evidence-based approach to help students move beyond their current understandings of safety and needs to a place where they can effectively learn new behaviors and repair damage they have done. The techniques from CPS can be blended in conversations utilizing reflection, instruction, and restoration. The key is listening to the student first, then sharing the adult concerns, and then finally working collaboratively to find a solution.



Inclusion and Engagement Action Steps

The discipline process used with students identified as living with a disability is very specific and part of the educational services they have a right to in the Individuals with Disabilities Education Act (IDEA).

An adaptive discipline including reflection, instruction, and restorative practices fits nicely into the guidelines in this law.¹⁷

Implement Targeted Practices for Tier III Supports

There are students so gravely impacted by their experiences that they do not have all their needs met by Tier I and Tier II strategies. They require even more targeted, intensive, and frequent interventions and supports categorized as Tier III. These strategies should be implemented one-on-one with a trusted adult who understands the impact of trauma and the specific interventions that work for that student. In many schools, these students will be receiving services in a special education program driven by an Individual Education Plan (IEP), but that is not required. Students do not need to qualify for special education programming to receive supports and interventions at this level. Tier III services should be available to all students regardless of their disability status.

Always Return to Regulation

Dysregulation is a significant problem for students in need of Tier III interventions and supports. It is likely that instruction and interventions have not been understandable, broken into small enough steps, reinforced, or supported enough to help the student change their behavior. In addition to slowing down instruction and chunking it into shorter time segments, utilize unique approaches to meet the student's readiness level. A student may not be able to follow common plans to dysregulate because they are unaware of how it feels in their body or do not have the communication tools to express what is happening. In addition to using the curriculum and the strategies focused on regulation introduced in Section 2, the student might benefit from a better understanding of what they are able to tolerate.

The Window of Tolerance,¹⁰ graphically depicted below, helps us understand and describe brain and body reactions to adversity. This concept suggests there is a window of tolerance for stress and our nervous system can cope with an acceptable amount of up and down. Any reaction outside of this window may be the result of toxic stress, unmet needs, and trauma. It aligns with the fight, flight, and freeze response discussed in Section 1. The more adverse experiences a student has, the smaller their window of tolerance becomes. This is why it may be difficult for them to manage dysregulation. Simply put, they have less space in their window for the ups and downs of stress and, unfortunately, as a result, spend more time in the fight, flight, or freeze response.

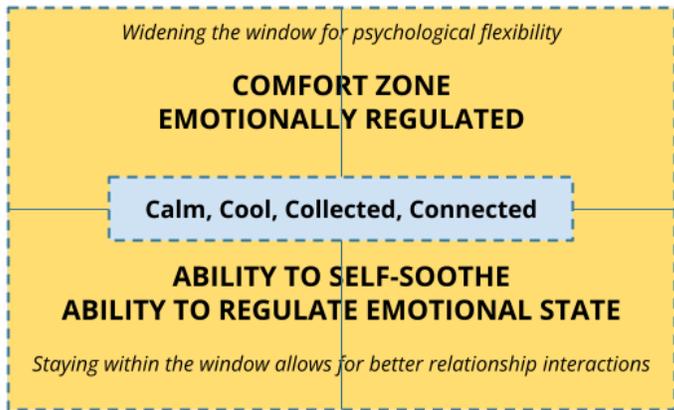
Window of Tolerance
Trauma/Anxiety Related Responses
Widening the Comfort Zone for Increased Flexibility

- ANXIETY
 - OVERWHELMED
 - CHAOTIC RESPONSES
 - OUTBURSTS (EMOTIONAL OR AGGRESSIVE)
 - ANGER/AGGRESSION/RAGE
- ## HYPER-AROUSSED

Fight/Flight Response
- RIGIDNESS
 - OBSESSIVE-COMPULSIVE BEHAVIOR OR THOUGHTS
 - OVER-EATING/RESTRICTING
 - ADDICTIONS
 - IMPULSIVITY

CAUSES TO GO OUT OF THE WINDOW OF TOLERANCE

- **Fear of...**
Unconscious Thought & Bodily Feeling: Control, Unsafe, I do not exist, Abandonment, Rejection
- **Trauma-Related Core Beliefs about self are triggered:**
Emotional & Physiological Dysregulation occurs



TO STAY IN THE WINDOW OF TOLERANCE

- Mindfulness: Being Present, in Here-n-Now
- Grounding Exercises
- Techniques for Self-Soothing, Calming the Body & Emotional Regulation
- Deep, Slow Breathing
- Recognize Limiting Beliefs, Counter with Positive Statements About Self, New Choices

- FEIGN DEATH RESPONSE
 - DISSOCIATION
 - NOT PRESENT
 - UNAVAILABLE/SHUT DOWN
 - MEMORY LOSS
- Freeze Response

HYPO-AROUSSED
- DISCONNECTED
 - AUTO PILOT
 - NO DISPLAY OF EMOTIONS/FLAT
 - SEPARATION FROM SELF, FEELINGS & EMOTIONS

Source: Dezelic, M. S. (2013). Window of Tolerance- Trauma/Anxiety Related Responses: Widening the Comfort Zone for Increase Flexibility. Retrieved December 19, 2020 from <https://www.drmariedzelic.com/window-of-tolerance--traumaanxiety-rela>

Improving Academic Supports at Tier III

Academic activities can be activating for students who have experienced significant challenges and failure up to this point. If intensive evaluation of their academic difficulty has not happened, it is important to ensure that it is completed. This can be done outside of an evaluation for special education using the Response to Intervention approach and the ICEL Model (Instruction, Curriculum, Environment and Learner).¹¹

The goal of this approach is to ensure that adult educators understand the power they have to implement changes that will make a difference for students and their ability to learn. Using the trauma-informed resilience-oriented lens, the student or learner is the primary factor at all times. So, even though the learner profile is listed last in this model, the learner’s viewpoint of all four domains is the most important information. Use the Trauma-informed, Resilience-oriented ICEL Questions to monitor academic interventions.

Key Domains of Learning

I	Instruction	Instruction is how the curriculum is taught and can vary in many different ways, including: level of instruction, rate of instruction, and presentation of instruction.
C	Curriculum	Curriculum refers to what is taught. Curriculum would include scope, sequencing, pacing, materials, rigor, format, and relevance.
E	Environment	The environment is where the instruction takes place. Variables in the environment include classroom expectations, beliefs/attitudes, peers, school culture, facilities, class size, attendance/tardiness, and management.
L	Learner	The learner is who is being taught. This is the last domain that is considered and is only addressed when the curriculum and instruction are appropriate and the environment accommodating. Variables include motivation, prerequisite skills, organization/study habits, abilities, impairments, and history of instruction.

Source: Wright, J. (2010). The RIOT/ICEL Matrix: Organizing Data to Answer Questions about Student Academic Performance and Behavior. How RTI Works. Retrieved from https://www.interventioncentral.org/sites/default/files/rti_riot_icel_data_collection.pdf

In addition to benefiting from small group or individual instruction in reading, math, and writing, students are likely to have other lagging skills in executive functioning, communication, attention and working memory, cognitive flexibility skills, and social thinking skills. Fortunately, students can learn these skills. But first, adults must identify the combination of triggers and lagging skills leading to a student’s struggles in class.¹² By connecting these together, counselors, social workers, behavioral therapists, special education teachers, and Tier III specialists can identify a series of interventions to teach these skills.^{13,14}

Additionally, school counselors or others working with students impacted by trauma can be trained in Cognitive Behavioral Intervention for Trauma in Schools (CBITS).¹⁵ This is an evidence-based program disseminated through SAMHSA’s National Child Traumatic Stress Network, which has demonstrated statistically significant improvement in student behavior. It includes ten group sessions, three individual sessions, two-parent psycho-educational sessions, and one teacher educational session.

The Road to Formal Assessment

After all three tiers of interventions and supports have been tried, some students continue to need even more support. For those students, mental health or trauma screenings and assessments are important. Screening processes and protocols need to be inclusive and engaging for all students in the school setting. First, each individual school should check their state guidance on securing consent to proceed with the screening or assessment. Student voice in this process is critical; answering all of their questions about how the information will be used, what information will be collected and why it is being done will make the process smoother, more effective, and truly trauma-informed and resilience-oriented. If your school does not have services on-site, partner with community agencies to provide mental health interventions after identifying needs led by student support staff.

Schools still have a responsibility to provide supports to their students even if they receive additional mental health therapy and supports from a community agency. Schools are primarily responsible for their academic instruction and, in the case of special education students, their Free Appropriate Public Education as required by law. Educators and student support staff must be strong in their commitment to continue to implement interventions and supports while that student is also supported outside the school. Strong communication between parents and guardians, the community agency, and the school is vital to making this structure beneficial for the student.

Alternate Learning Strategy

Videos for Understanding Challenging Behaviors and Supportive Responses:

- » [The Most Important Questions to ask about Children's Behavioral Challenges](#) by Dr. Mona Delahooke
- » [Check-In/Check-Out: Providing a Daily Support System for Students](#) by Edutopia
- » [Restorative Practices in Education](#) by Twin Cities PBS

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