



Trauma Informed Practice



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Presentation Outline

- + Introduction
- + Territorial Acknowledgment
- + What is Trauma?
- + What is Trauma Informed Practice?
- + Mindfulness Moment and/or Break (10 minutes)
- + Strategies for Implementing Trauma Informed Practice
 - Social Emotional Learning
 - Zero Tolerance Practices
 - Self-Regulation
- + Breakout Room Discussion & Brainstorm
- + Questions & Debrief

Yes...we will share our slides :)



Taking Care





Territorial Acknowledgement

1.

What is Trauma?

An experience that threatens life or physical integrity and overwhelms one's ability to cope (NCTSN Trauma Facts)



Trauma Can Be:

- Physical or sexual abuse
- Abandonment
- Neglect
- Death or loss of a loved one
- Life threatening illness in a caregiver
- Witnessing domestic violence
- Serious accidents
- Bullying
- Life-threatening illnesses or medical procedures
- Witnessing or experiencing community violence
- Racialized events
- Life threatening natural disasters
- Acts or threats of terrorism
- Living in chronically chaotic environments
- Colonization



*1 in 4 Students have
Experienced Trauma*



Behaviours That Can Alert You to Trauma:

- ✦ Anxiety, fear or worry about the safety of the self and others
- ✦ Worry about the occurrence of violence
- ✦ Changes in behaviour
- ✦ Distrust of others that affects peer interactions
- ✦ A change in ability to interpret and respond to social cues
- ✦ Increased somatic complaints
- ✦ Changes in school performance

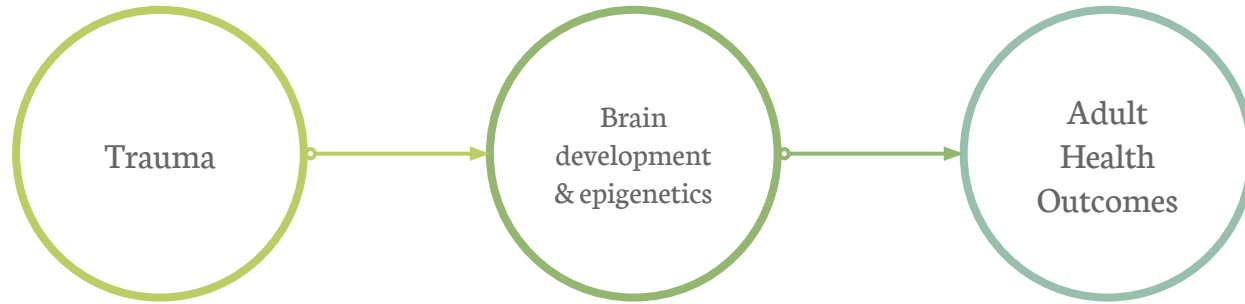




Trauma Referrals



Adverse Childhood Experiences Study (ACEs)



2.

Trauma Informed Practice (TIP)

“A universal and systemic approach to service provision”
(TIP Discussion Guide)



“Trauma-informed practice 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.”

BC Ministry of Education, Trauma Informed Practice Resources



Trauma-Informed Practice vs. Trauma-Specific Services

Trauma-informed services	Trauma-specific services
Are informed about trauma, and work at the client, staff, agency, and system levels from the core principles of trauma awareness, safety and trustworthiness, choice and collaboration, and building of strength and skills.	Are offered in a trauma-informed environment, and are focused on treating trauma through therapeutic interventions involving practitioners with specialist skills.
The connections between trauma and related health and relational concerns are discussed in the course of work with all clients; trauma adaptations are identified and supports; and strategies are offered that increase safety and support connection to services.	Offer services to clients with trauma, mental health, substance use and gambling related harms concerns who seek and consent to integrated treatment, based on detailed assessment.

Source: *Trauma-informed Practice Guide (2013)*, British Columbia Centre of Excellence for Women's Health and Ministry of Health, Government of British Columbia.

*Classrooms are
Trauma-informed*

- + Safety and trustworthiness
- + choice/collaboration/connection
- + Strengths-based
- + Empowerment



TIP Continued:

Responsibility of and for the Educator



What might a school or classroom look like if the adults didn't know anything about trauma?





Effective Trauma Informed Practice is dependent on an understanding of trauma.

Trauma-informed	Not trauma-informed
Recognition of high prevalence of trauma and common trauma-related effects, and adaptation of services to focus on safety and connection	Lack of awareness of trauma, siloed service delivery, lack of attention to emotional and physical environment of service delivery
Staff understand the function of challenging behaviours (rage, self-injury, substance misuse and gambling related harms, etc.)	Difficult behaviours seen as intentionally provocative, attention seeking, manipulative, or uncooperative; service terminations common
Recognition and avoidance of practices that are re-traumatizing	Traditional, often-confrontational approaches employed, resulting in boundary violations and triggering of trauma reactions
Collaboration with service users in designing service plans, opportunity for choice and agency	Compliance with expert-designed service plans valued; power-over relationship
Recognition of trauma as central to service users' difficulties, and/or linked to mental health and substance use and gambling related harms concerns	Over-diagnosis of bipolar, conduct, and personality disorders, and singular addictions
Recognition of the importance of the offering of choices to our service users	Dictating the route of services without consultation; not allowing users to decide the gender or location of their services providers when such choices are available for clients; power-over relationship

- Siloed service delivery
- Difficult behaviours → termination of services
- Boundary violations & re-traumatizing
- Compliance & power-over relationships
- Over & single diagnosis
- Dictating without consultation





mindfulness

4.

TIP &

*Social-Emotional
Learning (SEL)*





SEL & TIP Connections

**Adult SEL skills
are directly tied
to our ability to
be trauma
sensitive**

**Supporting
student SEL is a
trauma-sensitive
practice**

“SEL helps children survive and cope in various situations...While not all kids will experience trauma, they will all face challenges at some point in their lives, so all can benefit from learning skills for managing adversity.” (Kim Gulbrandson, *Committee for Children*)



Trauma-informed SEL

Key Trauma-informed SEL Practices



Create predictable routines.



Build strong & supportive relationships.



Empower students' agency.



Support the development of self-regulation skills.



Provide opportunities to explore individual and community identities.



5.

TIP & Zero-Tolerance Policies

“Trauma-informed practice is not about treating trauma; instead, it is about creating safety and trustworthiness in the course of health- and social-care interactions.”



TIP & Zero-Tolerance Policies

Fact



Trauma can impact school performance through more suspensions and expulsions, increase drop-out.

Fact



Traumatized children may experience physical and emotional distress including impulsive behaviour, intense reactions to reminders of their traumatic event.

How might these facts about trauma highlight the ineffectiveness of zero-tolerance in schools?



How a trauma-informed approach supports students

- Understand that behaviours may be automatic responses to stress and related to trauma.
- Set clear, firm limits for inappropriate behaviour and develop logical consequences.
- Be sensitive to cues in the environment that may cause a reaction in the traumatized child. Children may increase problem behaviours near an anniversary of a traumatic event.
- Understand that children cope by reenacting trauma through play or through their interactions with others.
- Create a supportive school environment, raise awareness of school staff and personnel, modify teaching strategies.



6.

*T.I.P. & Self-Regulation
(SRL)*



Trauma affecting Self-Regulation abilities

Domain	Possible barriers to practicing self-regulation due to trauma	Considerations
Biological	Hyperalert (deplete energy faster); repeated stress activation and release of stress hormones; interrupted sleep; physical distress	<ul style="list-style-type: none"> - Remember: inability to self-regulate did not cause trauma - Possible regression in self-reg strategies <ul style="list-style-type: none"> - Mental health - Very stressful life events - Unhealthy self-calming behaviours - It doesn't look the same in every student
Emotional	Emotional numbing; intense negative emotions; emotional distress; not feeling safe; feelings of extreme fear & helplessness	
Cognitive	Impair ability to attend/ concentrate; difficulty paying attention to authority figures; impact executive functioning and brain development	
Social	Social withdrawal; inability to co-regulate; interpersonal conflicts	
Prosocial	May have never experienced empathy before; a diminished perception of physical boundaries; over exaggerated fear response when someone else is hurt	





Psychologically safe
place

Calming
environment

No pressure

De-escalating the flooded response



Self-Regulation as the Educator

You've Got This...



Break Out Groups



“People orient to safety like a flower orients to the sun”



Questions & Debrief



Classroom strategies to creating a TIP space:

Maintaining routines, giving choices, increasing support/encouragement, having consistent and firm boundaries with logical consequences, remembering they experienced trauma, creating safe or brave spaces, giving simple and realistic answers to questions concerning trauma, remembering environmental cues, anticipating difficult times/situations, warning children of sudden changes, being aware of peer relationships, remembering that traumatized students may play/role play traumatic events repeatedly, and allowing differentiation and accommodation for these students is key (NCTSN Trauma Facts)



Dr. Nadine Burke

How Childhood Trauma Affects Health Across a Lifetime (16 minutes)

The video we asked you to watch prior to our presentation, for your reference.

Nadine Burke also has other, longer videos where she goes into more depth on ACEs, trauma, and health outcomes. Here is a

[Youtube playlist](#) if you are interested.



Dr. Bruce Perry

Early Brain Development: Reducing the Effects of Trauma (20 minutes)

We found minutes **7:00-15:00** the most relevant to our topic, but the entire video is worth watching if you have the time.



RESOURCES

Burke, N. (2017, February 17). *How childhood trauma affects health across a lifetime* [Video]. Youtube.
<https://www.youtube.com/watch?v=uXXTLf7oouU>

My Training BC. (2019). *Trauma Informed Practice*. Resources for Compassionate Learning Communities.
<https://mytrainingbc.ca/traumainformedpractice/>

National Child Traumatic Stress Network Schools Committee. (October 2008). *Child Trauma Toolkit for Educators*. Los Angeles, CA & Durham, NC: National Center for Child Traumatic Stress.

Perry, B. (2017, November 16). *Early Brain Development: Reducing the Effects of Trauma* [Video]. Youtube.
<https://youtu.be/Hp6fZrzgiHg>

Trauma Informed Approaches: An introduction and discussion guide for health and social service providers, Discussion Guide 1. (May 2015). IWK Health Centre and The Nova Scotia Health Authority. Halifax, NS.

