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Trauma-Informed Practices within a Positive Behavioral Interventions and Supports Framework:

A Guide for Implementation

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TIC Values and Key Areas apply across all three tiers of the PBIS framework.

—Diagram content: Wisconsin Department of Public Instruction Trauma-Sensitive Schools Resources

Introduction

Many schools are implementing School-Wide Positive Behavior Interventions and Supports (PBIS) as a way to provide tiered interventions for all students. Rob Horner, the Co-Director of the Office of Special Education Programs (OSEP) Technical Assistance Center for PBIS, states that **the fundamental purpose of PBIS is to make schools more effective and equitable learning environments.** Creating more effective and equitable learning environments benefits all students, including students who have experienced traumatic events or adverse childhood experiences (ACEs). **Schools implementing a PBIS framework are well-positioned to incorporate trauma-informed practices into their existing systems of support for students.**

Often, school administrators and staff initially view trauma-informed approaches as an additional activity to be added to an already overwhelming agenda of requirements. However, most trauma-informed practices can be infused into already established teaching methods and school practices, and usually will make classroom management, teaching, and disciplinary practices easier and more effective. (Resler, 2017)

The purpose of this guide is to assist school teams as they implement trauma-informed practices through a multi-tiered system of support (MTSS). The delivery of universal interventions for all students (Tier 1), targeted interventions for some students (Tier 2), and intensive, individualized interventions for a few students (Tier 3) will be explained. A school should utilize the existing MTSS/PBIS structure to support the implementation of the interventions that will be discussed. **The trauma-informed interventions discussed in this guide will reflect trauma-informed values of safety, empowerment, collaboration, trust, and choice.** PBIS core values of respect, responsibility, and safety are also reflected and woven across all interventions.

It is assumed that the schools using this guide for implementation have Tier 1 systems in place. These Tier 1 systems include:

- a commitment to PBIS,
- a building-based leadership team,
- regular data analysis completed by the team,
- reports to all staff regarding office discipline referrals (ODRs) and suspension data, and
- the implementation of tiered behavioral interventions, positive acknowledgment systems, and consequence systems.

A school may also have Tier 2 and Tier 3 systems in place. This guide will demonstrate how to implement trauma-informed interventions at each tier.

Schools that do not have a PBIS structure in place may still choose to implement interventions discussed in this guide, however a PBIS framework provides the systems of support to sustain the implementation of trauma-informed practices.

> **Positive Behavioral Intervention and Supports serves as a structure and process that organizes, implements, and evaluates multiple initiatives and strategies related to social and behavioral improvement.**
>
> —*"Using Positive Behavioral Interventions & Supports to Help Schools Become More Trauma-Sensitive," p.1*

Definitions

Trauma .... The Substance Abuse and Mental Health Administration (SAMHSA) describes individual trauma as resulting from "an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being."

Toxic Stress Response ...... *From the Center on the Developing Child at Harvard University:*
Toxic stress response can occur when a child experiences strong, frequent, and/or prolonged adversity—such as physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship—without adequate adult support. When toxic stress response occurs continually, or is triggered by multiple sources, it can have a cumulative toll on an individual's physical and mental health—for a lifetime.

Resilience .... The American Psychological Association defines resilience as the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress. It means "bouncing back" from difficult experiences.

1 Event → **2** Experience → **3** Effect
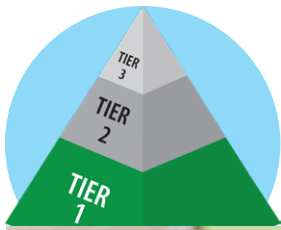
Tier 1: Universal Interventions for All Students

Safety is a core component of PBIS and also a trauma-informed value. Safety is imperative to support student success in the classroom, however perceptions of safety (emotional, physical, and psychological) at school are impacted by personal experiences. As Cole et al. state, "Every child has his or her own expectations and insights, formed from experiences at home, in the community, and at school. When children witness violence…or experience abuse and neglect, they can enter the classroom believing that the world is an unpredictable and threatening place "(Cole et al., 2005, p. 15). **Students who have experienced trauma struggle to feel safe and can be in a state of heightened alert much of the time. This lack of real or perceived safety must be addressed to bolster youth success at school.** Furthermore, "The school setting can be a battleground in which traumatized children's assumptions of the world as a dangerous place sabotage their ability to develop constructive relationships with nurturing adults" (Cole et al., 2005, p.32). Not only does trauma impact relationships, but it can also interfere with ability to learn. It is crucial that schools invest adequate time and effort into establishing and maintaining safety within the building.

■ Teaching School-Wide Positive Behavioral Expectations

Tier 1 universal practices that support safety within a school include teaching school-wide positive behavioral expectations in many areas throughout the school, such as the classroom, the cafeteria, the hallways, the playground, etc. We do not always know which students have experienced trauma, so these are universal precautions that can support all students toward success. **This approach ensures equity since we know all students can benefit from clear behavioral expectations.** For students who have experienced trauma, chaotic environments can result in high anxiety and hypervigilance. **Providing clear expectations, structure, and routine helps to alleviate anxiety and acts as an antidote to chaos.**

Re-teaching these behavioral expectations occurs when necessary. Often, schools introduce the behavioral expectations from their behavior matrix at the beginning of the school year and re-teach the matrix after a break or when the school's discipline data indicates there is a need to re-teach. Below is an example of a school-wide behavior matrix which includes trauma-informed strategies:

INCORPORATE Trauma Informed Strategies

	All Settings	Hallways	Playground	Classroom	Library	Assembly	Bus
BE RESPECTFUL			• Have a plan.	• Use your words. • Use safe hands.			• Watch for your stop.
BE RESPONSIBLE	• Be kind. • Hands and feet to self. • Help/share with others.	• Use normal voice volume. • Walk to the right.	• Share equipment. • Include others.	• Self check. • Using calming strategy.	• Whisper. • Return books.	• Listen/watch. • Use appropriate applause.	• Stay in your seat.
BE SAFE				• As for help. • Connect with safe person.	• Push in chairs. • Treat books carefully.	• Pick up. • Treat chairs carefully.	• Wipe your feet.

1. Expectations

2. Natural Context (Locations)

3. Rules or Specific Behaviors

—*Diagram content: Integrating Trauma-Informed Approaches Within School-Wide PBIS, Lucille Eber*

RECESS

Be Responsible
- Use appropriate language.
- Use appropriate volume.

Be Respectful
- Make good choices in selecting playmates, and productive activity.
- Report suspicious activities, and incidents to recess coordinator.

Be Safe
- Respond to whistle
- 1 long whistle: Emergency call; Line up and wait for instructions
- 2 short whistles: Look to see whose attention is needed
- 3 short whistles: Line up to return to class

BATHROOM VOICE LEVEL 1

Be Respectful
- Voice Level 1
- Clean up after yourself.
- Respect others' privacy

Be Responsible
- Flush the toilet.
- Report any problems.

Be Safe
- Wash hands with soap.
- Remember your purpose.

CLASSROOM & INSTRUCTIONAL AREAS

R — RESPONSIBLE & SAFE
Walk to and from work area.
Keep hands, feet, and objects to yourself.

O — OWNERSHIP
Be present and prompt.
Complete classroom work and homework.
Follow classroom procedures.

A — ACTIVE LEARNING
Listen to designated speaker.
Ask for help when needed.
Participate.

R — RESPECT
Use kind words.
Use appropriate volume.
Follow directions.
Treat guest teachers with respect.

Expectations and procedures should be visible throughout the building as teaching tools and ongoing reminders for students during the school year. Posters displaying the expectations should be easy to read, include visuals appropriate to the age/development/setting, and should be eye-catching.

The positive behavior expectations are taught and modeled by every staff member in the building. Implementing trauma-informed strategies through a PBIS framework is the responsibility of everyone in the school. **In order to make a difference in the culture and climate of the school overall, all staff have a stake in creating a calm, safe environment for students.** Staff must model the positive behavior expectations and provide opportunities for students to frequently practice the expectations. The teaching must go beyond one all-school assembly. The PBIS team along with the school administrator provide the plan and schedule for teaching behavioral expectations throughout the year. In addition, staff must address students in a positive manner, teaching them what to do, rather than what not to do. Posters and visuals explaining the behavior matrix should use positive language. Use praise and positive reinforcement when expecations are followed to encourage future positive behavior.

■ Sensory Interventions

Some schools incorporate sensory interventions available to all students. While the research on the effectiveness of sensory interventions is mixed (Nwogu & Peterson, 2016), the following are examples of how a school can include access to sensory interventions:
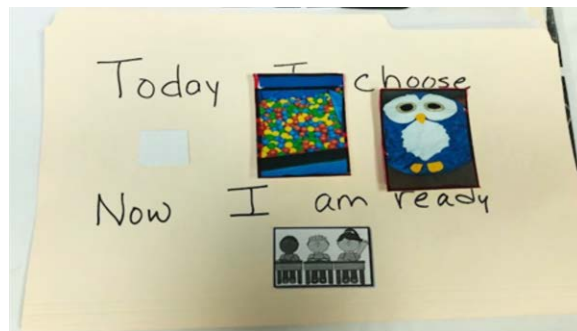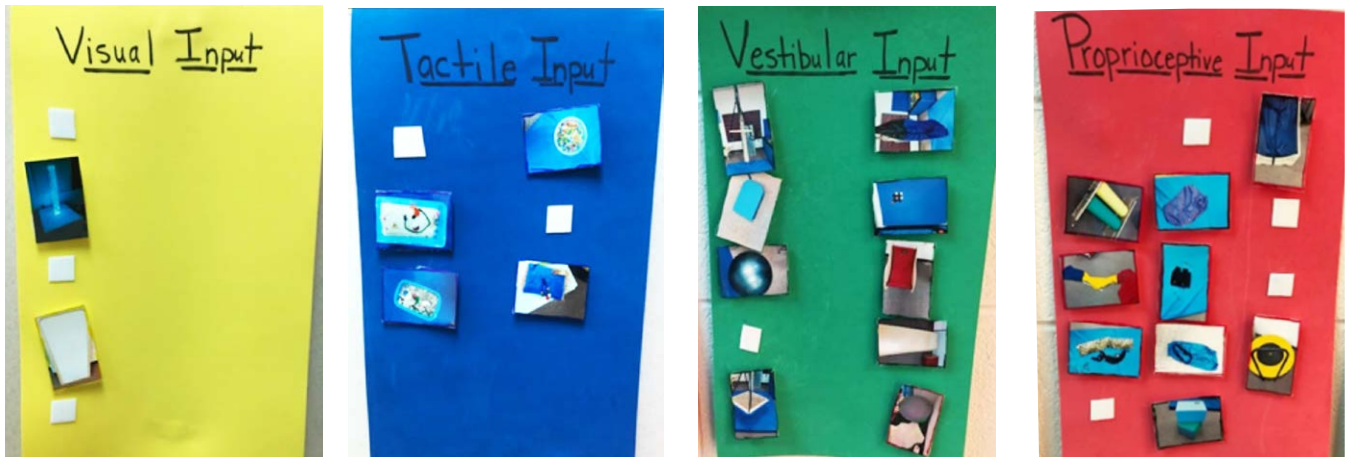
■ Regulation Stations and Brain Gym Trails:
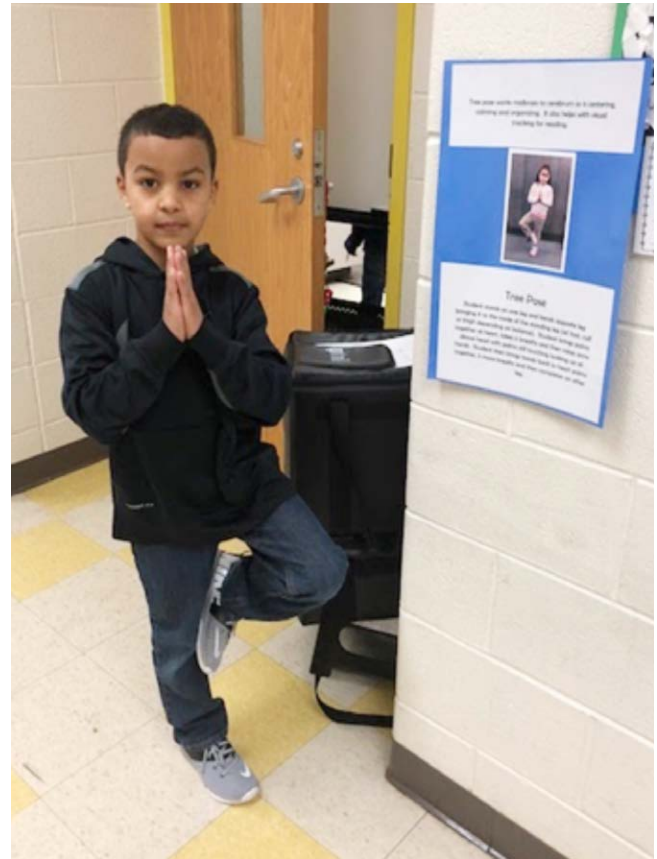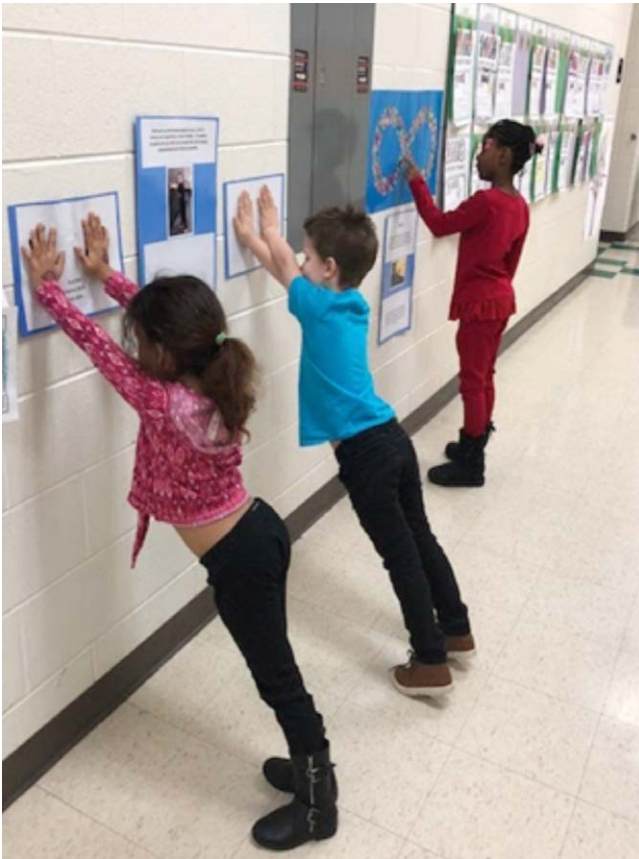
■ Classroom Environment

Teaching and reinforcing the behavioral expectations throughout the school and within each location inside of the classroom helps students know what is expected of them, so they can be successful. As previously stated, teaching and reinforcing behavioral expectations provides structure, routine, and predictability for students. All students, especially students who have experienced trauma, benefit from routine and predictability. **Structure, routine, and predictability reduce the student's anxiety and stress level, and thereby can reduce the frequency and intensity of trauma (fight, flight, or freeze) responses.**

> Established routines and positive responses are important for all children, but they are particularly helpful for traumatized children, who need a school environment that is predictable and safe, in contrast to life at home.
>
> —*(Cole et al., 2005, p. 62-63).*

To further promote safety and reduce anxiety, a classroom teacher may offer flexible seating options to allow students choice within the room. The teacher may also pay attention to lighting and sounds within the room. Soft lighting and sounds create a sense of calm in the room, reducing the anxiety a student who has experienced trauma may feel. Another way educators can promote predictability is to

> …clearly communicate the schedule their lessons and activities will follow. This can be accomplished by making easily readable schedule charts and by reviewing what activities will be taking place and their projected duration. Going over the schedule on a consistent basis will reinforce predictability.
>
> —*(Cole et al, 2005, p. 62)*

All efforts made to create a calm, orderly classroom environment will benefit all students and increase their success.

Expectations	Classroom Procedures/Routines				
	Classwide	Arrival	Cooperative Learning Groups	Independent Seat Work	Whole Group
	Identify Attention Signal... Teach, Practice, Reinforce				
Be Respectful	• Listen to others. • Use inside voice. • Use kind words. • Ask permission.	• Enter/exit classroom prepared. • Use inside voice.	• Listen to others. • Accept differences. • Use kind words. • Encourage others.	• Use quiet voice. • Follow directions. • Use the FOCUS strategy.	• Eyes/ears on speaker. • Raise hand to speak. • Contribute to learning.
Be Responsible	• Be prepared. • Follow directions. • Be a problem solver. • Make choices that support your goals.	• Place materials in correct area. • Begin warm-up promptly.	• Use time wisely. • Contribute. • Complete your part.	• Use the FOCUS strategy. • Be a TASK mater. • Use your neighbor.	• Follow directions. • Take notes. • Use the FOCUS strategy. • Meet your goals.
Be Safe	• Keep hands, feet, and objects to self. • Organize yourself. • Walk.	• Walk. • Use your personal power to support self/others.	• Use materials carefully. • Use your personal power to support others.	• Notice your neighbor. • Keep hands, feet, and objects to self.	• Stay at seat. • Keep hands, feet, and objects to self. • Notice your neighbor.

Content retrieved from: https://education.wm.edu/centers/ttac/resources/articles/teachtechnique/strategiesforteachingsocialskills/index.php

Students who have experienced trauma may have a mistrust of people and have trouble with forming and maintaining positive relationships. For this reason, **it is important that students have opportunities to create and practice positive connections.** As described by International Society for Traumatic Stress Studies (ISTSS),

> Living through traumatic events may result in expectations of danger, betrayal, or potential harm within new or old relationships. Survivors may feel vulnerable and confused about what is safe, and therefore it may be difficult to trust others, even those whom they trusted in the past. It may feel frightening to get close to people for fear of being hurt in an unsafe world. (2016, p. 2).

To support students in social development, a teacher may incorporate daily or weekly community-building circles within the classroom to promote a sense of belonging for all students. Restorative practices training provides professional development for teachers and staff interested in learning how to facilitate circles. The International Institute for Restorative Practices is a resource to learn more about circles and restorative practices. Providing other opportunities for positive peer and adult interactions promote resilience and can work to mitigate the effects of trauma.

■ In-Class Breaks

Providing opportunities for students to take breaks in the classroom when needed as a part of a Tier 1 trauma-informed PBIS system **gives students another tool to practice safety and self-regulate when they feel heightened emotions.** When students can take a break in place of engaging in disruptive or aggressive behaviors, the classroom and the school continue to be a safe environment for all students.

> **I am calming down and getting back on track so I don't have to get into trouble. It is a good thing and it is helping me stay in class.**
>
> *—Lincoln Park Public School Student*
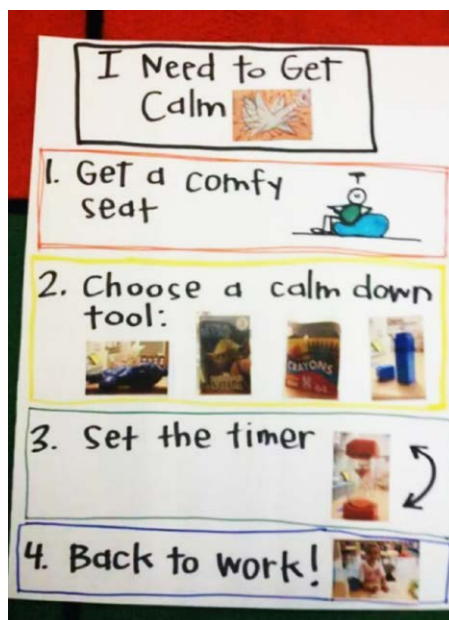
In-class break procedures should be taught to the entire class. Break procedures should be visually posted just as other procedures in the classroom are posted.

Asking for a break should be normalized so all students feel empowered to take a break if needed. **Breaks are an intervention, but also teach an important coping skill to students who experience emotional dysregulation.** An in-class break area may be designed by the classroom teacher or may be designed by PBIS team members and implemented in every classroom in the school. Break areas can include calming kits and a variety of sensory items. It is recommended that an occupational therapist provide consultation on break areas and the sensory items that are used within the break area.

Seeing a child's behavior is like seeing only the tip of the iceberg. Remember there is more going on beneath the surface that you may not be aware of.

■ Unconditional Positive Regard

Along with safety, trust is another trauma-informed value that is addressed through Tier 1 universal interventions. **Trust is developed between students and staff when students feel safe in their environment and when connections are nurtured.** Staff should accept students with unconditional positive regard. "A position of unconditional positive regard encourages a teacher to value a student regardless of his or her behaviors, affect, or presentation," (Cole et al., 2005). **Communicating unconditional positive regard to students will strengthen trust and let students know that they are valued for who they are, rather than for what they do.** It communicates to students their inherent worth, and that they are not defined by what has happened to them. Children who've experienced trauma can often have negative views of themselves and by adopting unconditional positive regard, supportive adults can support healthy self-esteem building.

Unconditional positive regard shifts our thinking from viewing undesirable behavior and thinking, "What's wrong with this child" to instead asking, "What happened to this child?" The image of an iceberg is a great reminder that we only see a small portion of what is happening above the surface. By remaining curious and mindful that the student is more than what is happening behaviorally, adults are able to adopt more positive approaches to the youth.

There are a variety of ways staff can communicate unconditional positive regard at the Tier 1 universal level. Examples include:

Strategy	Description
Personal greetings	Provide each student in your classroom with a personal greeting using their name and a positive statement each day. **Research supports that personal greetings can increase cooperative behavior in students** (Allday & Pakurar, 2007). In addition, using a student's name communicates to the student that they are noticed and that they matter. Another example of personal greetings that promote connection is personalized handshakes with students. Watch how one teacher does it here in this video link, entitled "Teacher Has Personal Handshakes With Every Single One of His Students":
High rates of positive acknowledgements	PBIS encourages the four to one (4:1) ratio. For every one correction, staff should use four positive acknowledgements with students. Positive acknowledgements are not always praise statements, though they can be. Smiles, personal greetings, and letting a student know you notice and care about them are all ways to communicate positive acknowledgements. **It is reasonable to assume that students who have experienced trauma may need an even higher ratio of positive acknowledgments to corrections.** Loading up on the positives can help counterbalance the negative interactions and experiences students may have had. Parent Management Training-Oregon Model (PMTO) uses the analogy of caring for a plant when thinking about positive reinforcement. In order for the plant to thrive it must have adequate light and water. Without it, the plant will eventually die. The PMTO concept is, when it comes to behavior remember to **"shine the light on what we want to grow."** Acknowledging behavior you'd like to see continue will reinforce that behavior for the student. In contrast, it is also important not to give attention to minor problematic behavior in an effort to extinguish that behavior.
Praise in public, correct in private.	Trauma responses are often exacerbated when a student feels threatened. Students who are corrected in front of an audience of their peers may react negatively. **Trust is maintained and corrective feedback is more effective when delivered privately.** Correcting in private also creates a greater sense of safety and eliminates the possibility of public embarrassment or humiliation in front of peers.
End classes with one minute of students acknowledging one another positively.	Model and participate. This activity teaches students how to notice others and communicate with their classmates in a positive manner. **It can positively influence the climate of the entire classroom.**

Strategy	Description
Make positive phone calls and/or send positive postcards home.	Set a goal to make a specific number of positive home contacts each month. As a school-wide practice, set a goal for every teacher/staff member to send home a specific number of positive postcards each month, card-marking, or semester. Provide the postcards with postage at a staff meeting and take five minutes for each teacher/staff member to write out positive postcard for students. **The handwritten note is a powerful communication tool that will have a lasting positive effect on students and their families.**
Get to know your students outside of the classroom.	Make an effort to really learn more about your students, their families, and their lives outside of school. What are their interests? Who is important to them? What have they experienced? **Investing time into getting to know more about your students fosters deeper, more trusting relationships between students and staff.**
Avoid power struggles.	**Staff can contribute to power struggles when they become escalated themselves, or when clear strategies for dealing with problematic behavior are lacking.** Adults working with students need to remain aware of their own emotional triggers and should seek support when a student's behavior or reaction continues to intensify. Staff require training in de-escalation techniques so as not to engage in power struggles with students, especially students who have experienced trauma. The best way to avoid a power struggle is to remain calm. Use a soft, slow, calm tone of voice when interacting with an escalated student. If you are struggling to remain calm, get support from another staff who can relieve you. Furthermore, Cole et al. state, "Whenever possible, school personnel should avoid battles for control, seeking instead to engage the child while reinforcing the message that school is not a violent place" (2005, p. 69).
Validate the student's emotions.	**Validating a student's emotions before providing corrective feedback can be an effective way to de-escalate a student.** For example, "Michelle, I can see you are upset today. What's going on?" Communicating an empathic statement first allows the student to lower their defenses and accept the subsequent corrective feedback or consequence. The empathic statement should be followed up by corrective feedback. "Michelle, I hear that you are upset this morning. However, what you said to me was not respectful. How can you speak to me in a more respectful way?"
Respond, don't react.	Reactions are impulsive, but responses to students and their behavior are well-thought out and are in line with the staff member's and school's core values. **Reactions escalate situations, whereas thoughtful responses elicit solutions.**
It's not about you.	Although a student's reactions may feel personal to you, it's important not to take things personally. As humans, when feeling personally confronted or attacked we may act defensively. When staff members remind themselves that the student's behavior not a personal attack, it allows them to remain more calm and open. **Remember to QTIP (Quit Taking It Personally).**

■ Clubs and Connections

A school implementing trauma-informed practices through a PBIS framework explores ways to increase positive connections between students and staff, as well as among the students themselves. **Clubs are an effective way to increase student engagement in school and provide opportunities for students to connect with one another.** Staff should be encouraged to be creative as they consider what types of clubs to offer students. Ideas include: art club, sports clubs, film club, chess club, games club, gardening club, LEGO club, animal club…the possibilities are endless! Asking students what type of club would interest them is an option that also promotes choice, control, and student voice. Clubs also provide an opportunity for students to form trusting relationships with positive adults, which develops resilience.

> The single most common factor for children who develop resilience is at least one stable and committed relationship with a supportive parent, caregiver, or other adult.
>
> —*Center on the Developing Child, Harvard University*

Clubs for everyone can also serve as a great incentive in place of school-wide reward parties that may repeatedly exclude some students.

■ Whole Staff Training and Social Emotional Learning

Providing training for all staff on the neurological and physiological effects of trauma gives staff a knowledge base regarding the impact of trauma. It can empower staff to better understand why students respond to an emotional trigger in a particular way. Training on de-escalation strategies is also beneficial and can complement trauma training. This type of training should be offered to teaching staff as well as support staff, administrators, and security staff. There are many resources available to use for staff training on trauma. Some are found in the Appendix of this guide. Resources for staff training on de-escalation strategies can be found through the Crisis Prevention Institute.

In addition to staff training on the effects of trauma, students can be taught skills to develop resilience. A variety of social-emotional learning curricula exists that can be implemented for students school-wide. The Collaborative for Academic, Social, and Emotional Learning provides a wealth of resources and suggestions related to curriculum. **Teaching skills such as problem-solving, anger management, understanding stress and stress responses, and active listening promotes resilience as students learn necessary skills to navigate difficulties.** Social-emotional learning is most effective when it takes place in every classroom in the school and the lessons are reinforced throughout the week by staff.

Mindfulness is a practice that schools are beginning to embrace and teach to students. Mindfulness teaches participants to remain in the present, work through difficult emotions, and teaching calming strategies. Mindful Schools provides information and resources to schools interested in incorporating mindfulness practices for students and staff. A school may also reach out to community resources for mindfulness training. Connect to this video link entitled "Mindfulness in Schools: Mindfulness and the Brain for Children" to watch an example of how mindfulness can be easily taught in the classroom.
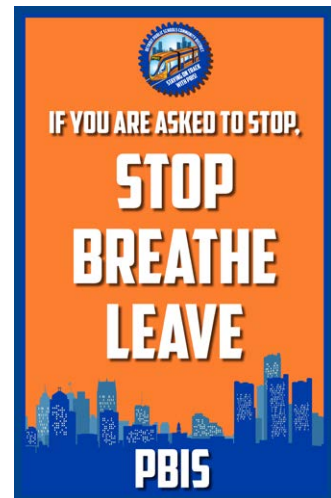
■ School-wide Bully Prevention

Teaching students how to manage peer conflicts, harassment, and disrespect promotes a safer, more respectful learning environment. Research published by the Centers for Disease Control in 2018 shows that **students who experience bullying or harassment at school are at increased risk for emotional, academic, and behavioral problems**. Introducing and maintaining a bully prevention program school-wide gives schools the opportunity to reduce these risks for students and create safer places for student to engage in learning.

School-wide PBIS national researchers support the implementation of the **Expect Respect bully prevention program**. The program includes curriculum for elementary, middle school, and high school levels. A link to the guides for the Expect Respect bully prevention program can be found here:

Elementary

Middle School

High School

Successful implementation of the Expect Respect program should also include eye-catching visuals around the building reminding students of the bully prevention strategies they have been taught. These visuals also serve as a teaching tool for staff as the strategies are taught and reinforced with all students. Teachers should draw attention to visuals frequently and reference when providing feedback to students.

■ Safe, Predictable, and Consistent Consequences

A school implementing trauma-informed practices within a PBIS framework provides safe, predictable, and consistent consequences for students when behavior infractions occur. Preventative strategies such as teaching behavioral expectations school-wide, allowing opportunities for breaks, providing high rates of positive acknowledgements and corrective feedback must be solidly in place. However, behavioral infractions must be addressed. **As a part of the PBIS framework, staff need to consistently follow procedures for minor and major behavior infractions.** There may be a need to review the discipline policies and procedures at the building, or even the district level, to ensure that practices are in line with current policy and are implemented consistently.

Cole et al. explain the importance of consistent consequences saying,

> Expectations, rules, and consequences should be consistent from teacher to teacher and throughout all school settings. A traumatized child needs to know that the rules in the lunchroom are the same as the rules in the classroom. Consistency at school will allow a traumatized child to begin to differentiate between arbitrary rules, which they may be subject to at home, and purposeful ones. A traumatized child needs to see that rules are enforced fairly and apply to all students. (2005, p. 69)

Time Out
- Occurs after a problem behavior
- Staff directed
- May involve a Think Sheet
- Is a consequence
- Reinforcesclassroom expectations
- Removal fromreinforcement

(overlap)
- Pre-planned
- Time-limited
- Allows time to think
- For everyone
- Procedure is taught and practiced

Calming Break
- Preventative
- Student or staff directed
- Access to calming tools
- Not a consequence/not reinforcing
- Teaches self-regulation

■ Time-Out

Time-out may be used with elementary students as a safe, predictable consequence that can be applied in-class or out of class. Time-out must be distinguished from a preventative, calming break.

Like other expectations and rules, time-out procedures must be taught and practiced by students in the class. It's important that students are taught rules. Cole et al. remind us that

> Traumatized children sometimes come from home environments in which power is exercised arbitrarily and absolutely. It is important for these children to learn to differentiate between rules and discipline methods that are abusive and those that are in their best interest. (2005, p. 69)

Time-outs should be time-limited, based on the age and developmental level of the student. The time-out area in the classroom should have posted procedures. A student may be asked to complete a Think Sheet in order to fulfill the time-out.

While implementing a time-out procedure with a student, it is important for staff to remember to communicate empathy and unconditional positive regard. A student's behavior does not define the student. The time-out occurs as a predetermined consequence when a choice was made that does not align with the school's core values and positive behavior expectations.

Some staff may be concerned that an intervention such as time-out might re-traumatize a student. According to Quetsch, Lienemen, and McNiel (2017), "There is no evidence that the short-term experience of time-out constitutes 'repeated' stress, a core feature of trauma experience." On the contrary, when teachers have a pre-determined consequence for problematic behavior, it can reduce escalations between teachers and students and also reduce the frequency of students being excluded from the classroom for a period of time. Resilience is promoted in the students as they learn how to accept a safe consequence for their behavior.

For secondary schools, a time-out my be implemented in the classroom using a Think Sheet or outside of the classroom in another specified location. A Think Sheet developed for the secondary level may include the "Restorative Chat" questions used in Restorative Practices.

The goal is for the school, whether elementary or secondary, to have a plan for responding to problem behavior in a safe, predictable, and consistent manner. These actions promote trust and maintain a safe school environment.

RANDOLPH ELEMENTARY

SIT AND THINK

1. Set timer
2. Quietly sit in chair
3. Think about your actions
4. Talk respectfully with adult
5. Move on

International Institute for Restorative Practices

Restorative Questions 1

When things go wrong...

- **What happened?**
- **What were you thinking of at the time?**
- **What have you thought about since?**
- **Who has been affected by what you have done? In what way?**
- **What do you think you need to do to make things right?**

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■ Natural Consequences

It's important to allow natural consequences to teach a child cause and effect, which can be lacking for children who've experience trauma (Cole et al., 2005).

> When cognitive development occurs in an inconsistent and unpredictable environment, children may have trouble comprehending cause-and effect relationships and recognizing their own ability to affect what happens in the world (Cole et al., 2005, p. 27).

Here are a few examples of natural consequences:

- A student acts in a verbally aggressive manner toward peers during recess or in the hallway. The peers try to avoid the student later on, due to the verbal aggression. A caring adult can explain to the student the cause and effect of their behavior. Due to the way the student treated the peers, they have chosen not to interact with him. This situation is also an opportunity for the adult to problem-solve with the student and repair the harm caused.
- When students do not use sensory tools in an appropriate way, it will result in the loss of the sensory tools for a period of time.

Natural consequences may be incorporated for students who do not have severe behavior problems. However, students with more intense behavioral challenges will need predictable consequences that are implemented with consistency in order to promote a sustained change in the student's behavior.
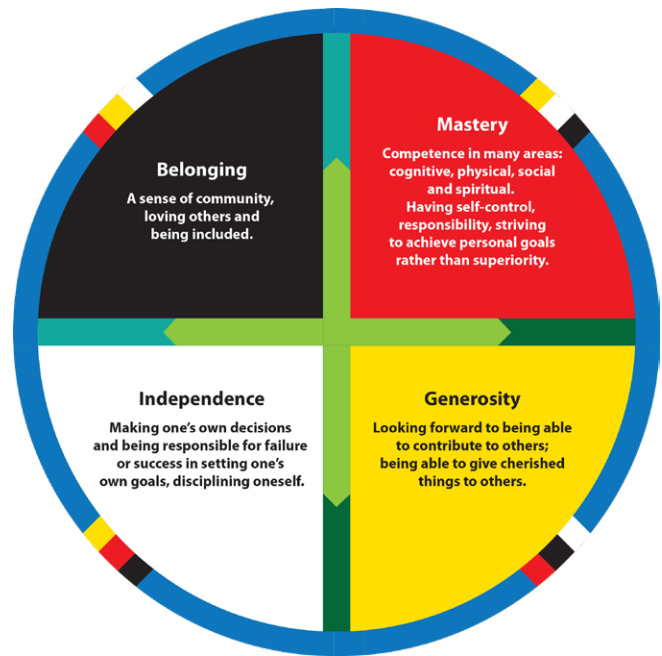
■ Circle of Courage Training

Some schools have invested in The Circle of Courage training for all staff. **The Circle of Courage stems from the philosophy and universal principle that to be emotionally healthy, individuals need a sense of belonging, mastery, independence, and generosity.** To learn more about The Circle of Courage training, please refer to Starr Commonwealth.

■ Engaging Families

We know that students often suffer from traumatic experiences in their lives outside of school, in fact two-thirds of youth will have experienced at least one trauma by age 16 (SAMHSA, 2017). Some students are repeatedly exposed to violence in their home or in their community, while other students may be victims of neglect or may be exposed to a parent/caregiver with a mental health or substance use disorder. It is important for schools to be welcoming and supportive places for all students and their families. As school professionals seek to work with students and families to improve outcomes, family involvement, voice and choice are key to accomplishing this goal. Schools can engage families experiencing high levels of stress in the following ways:

Engaging Families Experiencing High Levels of Stress

- Treat all individuals with dignity and respect.

- Welcome parents into the school and the classroom.

- Develop positive relationships with parents. Send positive postcards and make positive phone calls. Welcome their concerns and input regarding their child.

- Inform parents about classroom expectations.

- Inform parents about the classroom design/consequence systems.

- Partner with parents to help them know how they can support at home. Provide families with tools and ideas.

- Refer parents to district and community resources that work with families experiencing high levels of stress.

- Create parent brochures to introduce school programs, such as PBIS.

PBIS School-wide Systems for Student Success
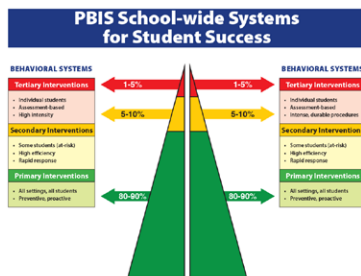
About PBIS

PBIS stands for Positive Behavioral Interventions and Supports. It is a proactive approach designed to teach **respect**, **responsibility**, and **safety** at school. At Edison Elementary, our goal is to create a safe and effective school by encouraging students to continuously make good behavioral choices with the implementation of this program.

PBIS emphasizes teaching and reinforcing important social skills and data-based problem solving to address any behavioral concerns.

How the Program Works

- All students and staff are taught the school-wide expectations.
- Students will receive frequent reviews of the expectations and be acknowledged when they demonstrate them.
- Most of the contact that students have with adults is positive and prevents problem behavior from occurring.

- Staff will use data to help identify students who need additional support.
- A PBIS school provides a consistent, predictable, and fair use of consequences for all students.

How Can Parents Help?

- Parents can help by reading and discussing the Behavior Matrix on a regular basis.
- Require your child to speak respectfully to others, especially adults.
- If your child has a problem in school, review with them the Behavior Expectations Matrix and discuss other possible solutions.
- Support teacher and administrative behavior decisions. Discuss problems privately with staff.
- Volunteer to help with the Edison Elementary School PBIS team.

17045 Grand River
Detroit, MI 48227
Phone: (313) 852-1066
Fax: (313) 852-1060

www.detroitk12.org/schools/Edison

Edison Elementary School • Home of the Inventors •
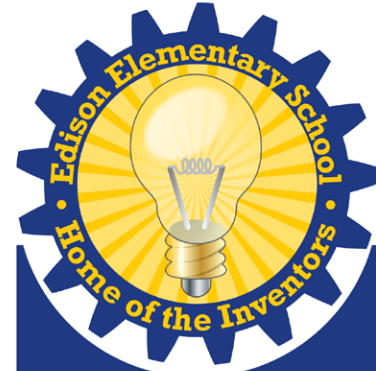
Positive
Behavior
Interventions
and **S**upports

*Be Respectful
Be Responsible
Be Safe*

■ Self-Care for Staff

Working with students who have experienced trauma can have an impact on teachers and staff. It is important to acknowledge that staff may experience secondary traumatic stress, burn out, or compassion fatigue as they engage in the daily tasks of teaching and supporting these students.

Compassion fatigue can develop when one cares "too much" for another who has shared firsthand traumatic experiences. It is a unique form of burnout… that has been described as "the cost of caring" for others' in emotional pain. If left unrecognized and untreated, this condition can turn into a full-blown case of burnout that can lead to even more serious outcomes. (Sizemore, 2016)

Signs of compassion fatigue, secondary traumatic stress and burn out include (but are not limited to) the following:

Compassion Fatigue	Secondary Traumatic Stress	Burn Out
• Feeling burdened by the suffering of others • Blaming others for their problems/suffering • Isolation • Loss of pleasure in life • Denial • Physical/mental fatigue • Frequent complaining • Others commenting about your work or attitude • Complusive behaviors (overeating, gambling, substance use	• Intrusive thoughts • Chronic fatigue • Emotional changes: sadness, anger, helpless, hopeless • Lack of trust/confidence in decisions • Fearfulness/hypervigilance • Absenteeism • Physical symptoms/illness • Sense that can't do enough, guilt • Diminished creativity • Inability to embrace complexity • Minimizing • Dissociation/detachment/numbing • Inflated sense of importance about your work	• Physical and emotional exhaustion • Cynicism and detachment • Feelings of inefficacy • Fatigue or insomnia • Forgetfulness, lack of attention/concentration • Physical symptoms/illness • Emotional changes; increased depression, anxiety, anger and irritability • Pessimism • Isolation • Feelings of apathy and hopelessness • Lacking productivity/poor performance

To assess your own levels of burn out, compassion fatigue and STS, you can take the Professional Quality of Life Scale (PROQOL). Repeat the tool periodically to measure progress.

When staff feel supported by their colleagues, they are less likely to experience burn-out and more likely to experience growth in their teaching practice. Peer-to-peer support is a research-based intervention that allows teachers to support one another in their practice. Teachers identify another teacher whom they trust and agree to observe one another as they teach. After the observation, constructive feedback is provided to the teacher being observed. Teachers often best learn from one another. A teacher might observe another teacher's implementation of the 4:1 strategy, provide feedback on opportunities for instruction response, or might provide insight into how a behavior or academic struggle was addressed with a student.

Staff working with students who have experienced trauma must also take time to take care of themselves. These five self-care strategies can help any professional who is at-risk for experiencing compassion fatigue:

1 **Know what is within your role** and focus what you can do to minimize feelings of hopelessness and helplessness. Maintain healthy boundaries and say "no" when necessary.

2 **Develop a self-care strategy.** What rejuvenates you? Make time for it and make taking care of yourself a priority. Try listing three self-care strategies you can implement daily, weekly, monthly, and annually. Share it with a trusted friend or colleague who can help with accountability.

3 **Create a strong network of trusted colleagues and friends.** Ask for help and process tough experiences within your network, however be mindful of student privacy and always share the least information necessary when processing situations.

4 **Seek positive influences.** One of the behavioral signs of secondary trauma is regular venting and negative gossip at work, so be sure to avoid negative situations and keep company with people who are positive and make you laugh!

5 **Recognize and remind yourself of the powerful impact you have on students**, even when the road is difficult and the rewards seem few. The impact educators have remains strong although seeds that are planted do not bloom right away. Know your work matters and relationships with students are fostering resilience in them. Also, it's important to remember and reflect what led to a career in education and let that motivation be a guiding light through challenging situations.

Self-care is not selfish. You cannot serve from an empty vessel.

—Eleanor Brownn with 2 Ns
eleanorbrownn.com
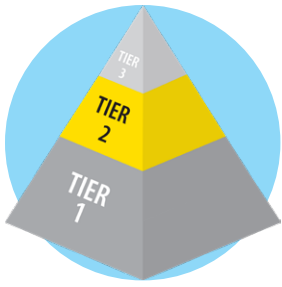
Tier 2: Targeted Interventions for Some Students

Some students within a school need targeted supports to be successful within the school environment. These students require an additional layer of support, beyond Tier 1. Schools implementing PBIS analyze behavioral data to determine which students qualify for added support. After Tier 1 systems are solidly in place, a school can successfully implement Tier 2 interventions for students. This section of the document will discuss trauma-informed, targeted interventions for Tier 2 students. Keep in mind that what works for some, won't work for all. **It is important to match the intervention to the student's needs as much as possible.**

■ Check In/Check Out

Check In/Check Out (CICO) is a research-based Tier 2 intervention that is widely used in schools implementing PBIS. CICO provides an opportunity for a student to "check-in" with an adult other than the teacher at the beginning of day, receive hourly feedback on behavior throughout the day, and "check-out" with an adult at the end of the day to review points and discuss progress. N**ot only does CICO support kids who've experienced trauma by providing additional structure and clear behavioral expectations, CICO also provides an opportunity to foster another positive adult connection.** During check-in, the student reviews the behavioral expectations listed on their daily point sheet with the adult. A goal is established for the student, usually that they earn 80% of their points for the day, but be sure the student is clear on how success is defined.

Carver STEM Academy Check In-Check Out Point Sheet

Points Possible: _____
Points Received: _____
Percentage of Points: _____
Goal Met: _____

Student Name: _____ Date: _____

Goals: _____

2=Great Job!   1=So So   0=Doesn't Meet Goal

Targeted Behaviors	Math			Social Studies			Specials			Recess			Language Arts			Science		
Respectful	2	1	0	2	1	0	2	1	0	2	1	0	2	1	0	2	1	0
Responsible	2	1	0	2	1	0	2	1	0	2	1	0	2	1	0	2	1	0
Safe	2	1	0	2	1	0	2	1	0	2	1	0	2	1	0	2	1	0

Parent Signature: _____

Daily Check In Check Out Data Summary

Student's Name	Amy

Mo/Year: Sept. 2012

Comments	Started CICO 9-4-12.

Standard: 80%

Data Entry Section

Date	Possible Points	Points Earned	Daily %
9/4/2012	48	32	0.67
9/5/2012	48	36	0.75
9/8/2012	48	43	0.90
9/9/2012	24	23	0.96
9/10/2012	48	42	0.88
9/11/2012	36	30	0.83
9/15/2012	48	31	0.65
9/16/2012	48	43	0.90
9/17/2012	32	29	0.91
9/18/2012	48	40	0.83
9/19/2012	48		0.00

Daily Percentage of Points Earned

At the end of the day during check-out, the student's points are graphed. Daily and weekly summaries can be tallied to track the student's progress on the intervention.

This intervention is generally implemented for 8-12 weeks with a team reviewing student data and monitoring the effectiveness of the intervention. CICO can also be part of a behavior plan that includes other components. CICO is most effective for students who display low-level disruptive behaviors throughout the day and whose behavior appears to be impulsive and attention-seeking.

What makes Check In/Check Out trauma-informed? CICO matches students with an adult who provides pre-corrections and feedback on the student's behavior within the context of a trusting relationship. The adult becomes another person providing unconditional positive regard for the student, thereby increasing positive connections at school. In addition, CICO is intended as a positive behavior intervention. Negative comments should never be written on the CICO point sheet. When implemented with fidelity, the

student will experience increase self-awareness and increased success related to behavior and academics. As the student notices their own progress reflected on the graphs, they can celebrate success and begin changing negative beliefs about themselves. **The CICO intervention is an opportunity to develop resilience in students as they learn to self-reflect and work on behaviors while receiving positive feedback as they progress.**

■ Take a Break

In-class breaks were discussed in the Tier 1 section of this document, however there are times when it is appropriate to include an out-of-class break for a student. Out-of-class breaks are Tier 2 interventions that are used with some students. Breaks can take different forms and should be tailored to the student's individual needs. Breaks may be walking around the building, giving a student an assigned task, or having a student spend time in a designated break room. Breaks should be neutral in nature, meaning they are not reinforcing and they are not punitive. Some students require scheduled breaks throughout their day, and other students need to be taught how to request a break as needed. **Teaching a student how to request a break increases resilience as it is providing the student with an opportunity to self-regulate and learn an essential skill around communicating needs.**

■ Tier 2 Sensory Breaks

As previously stated, the research on sensory interventions as an effective method to reduce negative behaviors is mixed (Nwogu & Peterson, 2016). In the absence of a functional assessment determining that the function of a student's behavior is sensory related, we cannot be sure that sensory breaks will address a student's behavior effectively. However, some students may demonstrate the potential to benefit from scheduled sensory breaks or sensory diets as a part of their daily schedule. A school can design staff-monitored spaces for sensory breaks to be used regularly for students who may need more sensory input. Individual sensory diets may also be curated by an occupational therapist to meet individual students' sensory needs. Furthermore, **children who have experienced trauma can have feelings of detachment from their bodies. Sensory breaks allow these youth opportunities to attune to the present moment while also helping integrate mind-body experiences.** Sensory interventions can be a helpful regulation tool, as they support the youth in returning to the prefrontal cortex of their brain, especially when triggered/escalated. Data should be collected and analyzed regularly to determine the effectiveness of sensory interventions as related to a student's behavior.
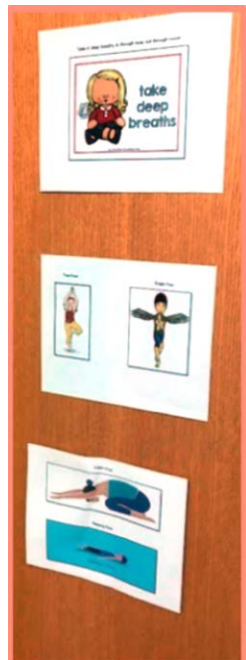
■ Mentoring

School-based mentorship programs are used to promote positive, healthy relationships between students and adults within the school environment. These positive connections provide an opportunity for students to build trust with adults. Some students who have experienced trauma may have difficulty trusting others, as experience has taught them that not all adults are safe. This lack of safety and trust with adults can greatly impact behavior and student success while in school.

Positive mentoring relationships are thought to facilitate emotional regulation and to improve youths' social skills and self-perceptions. By providing consistent support, for example, **mentors can challenge negative views that youth may hold of themselves and demonstrate that positive relationships with adults are possible.**
(C.S. Chan et al., 2013, p.130)

Improving emotional regulation and building social skills, including social interactions with trusting adults, can promote resilience in students.

The student who demonstrates the following characteristics may benefit from a school-based adult mentor:

- Rewards and consequences appear ineffective.
- Student lacks motivation.
- Student appears to lack self-esteem or self-confidence.
- Student lacks positive adult role models.
- Student appears to dislike school.
- Student lacks a sense of belonging at school.

What does it take to be a mentor for a student? Not very much! Any adult within the school who has time and an interest in developing a positive relationship with a student can be a mentor. Often, matching a student with an adult who has similar interests can be beneficial. For example, a student who is interested in sports may relate well to an adult with

the same interest and can engage in a conversation about sports with the student.

What should the mentor and the mentee do together? **The main component of mentoring is to create a warm, caring relationship that focuses on *listening* to the student and developing the trust necessary to eventually guide the student toward success.** Mentor time with a student can be as simple as having a 30 minute lunch together once per week. It can include playing games, playing basketball, or doing another activity together that the student would enjoy. Mentor time should be enjoyable for both the adult and the student. Schools can develop a list of adults who are interested in mentoring and then match students to the adults who are available. It should be noted that mentoring is not therapy, and is not even a time to discuss behavioral issues with the student if trust has not yet been developed.

■ Targeted Social Skills Instruction

Some students need more intensive opportunities to learn social skills than what can be provided during a social-emotional lesson within the classroom. **In keeping with the understanding that resilience-enhancing skills can be taught, targeted social skills instruction is a method to provide students the space to learn and practice important social skills.** Social skills group participants can include students who have repeated discipline problems or the teacher acknowledges a potential to benefit. Students are placed in small groups and taught social skills lessons two to three times per week. These lessons may be taught by a school social worker, a special education teacher, a general education teacher, or other identified staff member. For schools who have School-Based Mental Health (SBMH) Services housed in the building, the SBMH staff may also facilitate social skills groups.

During the lesson time in a targeted social skills group, students should be provided the opportunity to role-play the skills they are learning. As they return to their classroom, it is recommended that the facilitator of the group assist the classroom teacher in finding opportunities for the student to practice the new skills throughout the week. Whenever the student demonstrates the learned social skill, they should receive a positive acknowledgement. Positively acknowledging the student using the new skill will increase the likelihood that the student will generalize the skill and use it across settings. Positive feedback also promotes positive and healthy self-esteem development, which can be lacking for students who have experienced trauma.

There are many social skills curriculums and online resources that can be used to teach social skills in a targeted manner. Second Step, Michigan Model for Health, Advantage Press Inc., as well as the Collaborative for Academic, Social, and Emotional Learning are examples of where such resources can be found. Additional trauma informed lessons around social skills and other topics can be found here.

Teaching social skills in a targeted way develops skills that students will need to become productive and healthy citizens. Resilience is enhanced in students when they demonstrate an ability to handle adversity through managing their emotions and behavior, as success promotes self-efficacy. School professionals promote resilience in students when they teach students self-awareness, self-management, self-expression, and how to interact with others in prosocial ways.

■ Token Systems

Token Systems are an intensive method to teach desired social skills, reward success, and increase desired behaviors within the classroom. They are an effective tool for providing early intervention with students who exhibit severe behaviors, which may stem from a trauma history. **Token systems provide teachers with an avenue to provide high rates of positive reinforcement for pro-social behavior. Token systems also increase the likelihood that a student will remain academically-engaged.** Students are provided a high-interest incentive to work toward and receive tokens for task completion and other appropriate behaviors. Students are then able to "cash-in" the tokens for a high-interest reward. Token systems are an alternative to Check In/Check Out or can be added to a CICO plan, depending on the student's developmental age. The token system should be used to strengthen positive behavior and should decrease over time as the student acquires positive behavior skills.
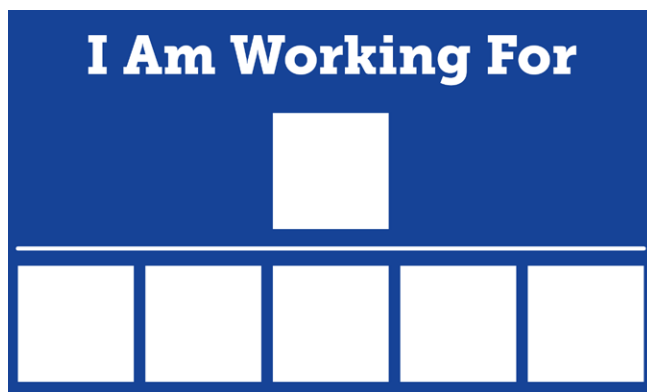
As schools aspire to be trauma-informed, understanding and implementing methods to reinforce positive behavior and increase academic engagement allows for students with trauma histories to learn skills that promote resilience. **Token systems focus on the student's success, instead of focusing on deficits.** Again, opportunities for positive feedback not only increases self-esteem and self-efficacy, but promotes resilience to overcome future challenges.

■ Restorative Circles

The "Rethink Discipline" Law, enacted in Michigan in August 2017, requires that schools consider the use of restorative practices and "lesser interventions" prior to a suspension or expulsion of a student.

Restorative Practices can positively influence school climate and culture as well as provide alternatives to suspension for students who need Tier 2 and Tier 3 interventions. **Restorative Practices promote teaching empathy, taking responsibility for behavior, and providing restitution to the victims of an incident.** Punishment-based consequences often do not go far enough to teach students how to take responsibility or repair the harm they have caused.

Response to Harm or Problem-Solving Circles address specific behavioral problems and may be used for some students. A restorative circle requires a facilitator trained and prepared for the circle. Circles may include a small group of students or an entire class that is struggling with behavior. Circles are structured, have guidelines, and follow a script to facilitate discussion and problem-solving. Students are empowered in the circle to check in, identify the problem, discuss the harm it has caused, brainstorm how to repair the harm, and come to an agreement on a solution. Circles promote trust-building and help students take ownership of a problem. Students also take a role in seeking solutions, which promotes problem solving skills. Circles can be used in lieu of a suspension, or in addition to a suspension, if one is warranted.

When conducting a circle or a restorative conversation, restorative questions, such as the ones shown below and on , are used to facilitate the discussion.

International Institute for Restorative Practices

Restorative Questions 2

When things go wrong...

- **What did you think when you realized what had happened?**

- **What impact has this incident had on you and others?**

- **What has been the hardest thing for your?**

- **What do you think needs to happen to make things right?**

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■ Home-School Plans

Students who have experienced trauma, or come from homes and families experiencing a high amount of toxic or chronic stress, need supports that extend to both home and school. A simple Home-School Plan is a way for school professionals to connect with a student's home and family. As stated by Cole et al.,

> A trauma-sensitive school makes deliberate efforts to engage parents and caregivers and help them connect to the school community in meaningful ways. As their parents become more involved, students can begin to feel that they and their families are truly part of the life of the school community. (2013, p. 23)

Developing the plan requires collaboration between home and school and provides the student with consistency in both environments. The Home-School Plan allows for students and their families to receive additional support from the school.

Below is an example of a Home-School Plan template:

Home/School Collaboration Plan

Student: _____

Positive behaviors to be increased:

Behaviors to be decreased:

The school agrees to:

Parents agree to:

When will this plan be explained to the student?
_____

Next meeting date to review progress:
_____

Signature of school staff: _____

Signature of student: _____

Signature of parents/guardians: _____

Wayne RESA | 2015

The school team may also assist the family in developing a Home Behavior Matrix, similar to the School-Wide Positive Behavior Matrix. This matrix helps the family identify positive behavior expectations for their home and **supports the family in developing a calmer, more consistent approach to behavior.** Below is an example from the Florida Positive Behavior Support Project.

Having clear behavioral supports and expectations across home and school environments further promotes student success by decreasing anxiety and uncertainty.

PBIS Home Matrix

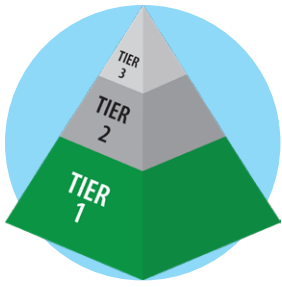|	Getting Up in the Morning	Getting to School	Clean-up Time	Time to Relax	Homework Time	Mealtime	Getting Ready for Bed
H *Help Out*	• Make your bed • Clothes in hamper	• Have your backpack, lunch, notes, keys	• Do your chores	• Clean up after yourself • Play quietly	• Put your things in your backpack when finished	• Set the table • Put dishes away	• Brush your teeth • Put dirty clothes away
O *Own Your Behavior*	• Get up on time • Get cleaned up and dressed on time	• Be ready to leave on time	• Clean up after yourself	• Ask before you borrow • Ask to change stations	• Complete your homework on time • Do your best!	• Use kind words and "I statements" • Recognize mistakes and apologize	• Get to bed on time
M *Manners Count*	• Try a morning SMILE • Thank your parents for helping	• "Thanks for the ride" • "Have a nice day"	• Ask politely for help	• Respect others' things • Offer to share	• Ask for help respectfully • "Thanks for the help"	• Please and thank you • Use your napkin	• End the day with nice words and thoughts
E	**V**	**E**	**R**	**Y**	**D**	**A**	**Y**

—*Content from Florida Positive Behavior Support Project*

Tier 3: Intensive Supports for Individual Students

Tier 3 interventions are offered at the most intensive level for students demonstrating significant challenges in school, including those experiencing PTSD and trauma reactions. Challenging behavior and significant problems managing strong emotions disrupt these students' ability to learn and progress educationally. In addition, these students' behaviors may be extremely disruptive to the entire classroom or even the entire school. "Not every student has a significant trauma history, but the needs of those who do can define the success of the entire classroom," (Souers & Hall, 2016).

Students who demonstrate significant behavioral challenges due to their trauma history require intensive and individualized support. These students may be struggling with academic achievement, attendance, frequent office discipline referrals and suspensions, frequent classroom disruptions, verbal and/or physical aggression, and/or elopement. These students may have few adults that they trust and are connected to at school. Furthermore, the quality of their peer relationships may be poor, which can further exacerbate feelings of worthlessness and isolation.

Support for these students is provided systematically at the Tier 3 level of the PBIS model, which includes Tier 1 and Tier 2 supports within an individualized plan. Regular behavior reviews are necessary and may also include school-based wraparound and school-based mental health services.

> "Not every student has a significant trauma history, but the needs of those who do can define the success of the entire classroom."

▪ Functional Behavior Assessments

Functional Behavior Assessments (FBAs) are conducted by a team familiar with the student and involve student, staff, and parent interviews, data collection and data analysis. **The purpose of the FBA is to analyze problematic behavior and hypothesize what "function" the behavior serves, or what may be driving the behavior.** Often for students who need Tier 3 supports, there can be multiple functions to their behavior. For example, a student may consciously or unconsciously escalate in order to avoid a situation or avoid completing work. Or, a student may find academics too difficult and not know how to request and receive help. Trauma can have an impact on a student's self-esteem and may cause the student to seek attention from adults and peers in ways that are negative. Students may experience depressive symptoms or engage in self-harm. **It's important to view all student behaviors as communication and "an attempt to meet a need," which also supports use of unconditional positive regard.**

Ongoing, severe behavioral problems require an in-depth assessment on the antecedents, or triggers, to the behaviors and an understanding of what the student is gaining or avoiding by engaging in the behaviors.

In order to conduct an FBA for a student with an Individualized Education Plan (IEP), parental consent is required. A school team will determine whether the student needs a standard FBA or a more intensive FBA process. Though the FBA is a team process, it does require an identified person with behavioral expertise to lead the work. This could be a school social worker, a behavior specialist, a special education teacher, or a school psychologist. Once the FBA is complete, findings inform and guide the development of the PBIS plan (Behavior Intervention Plan). Below is a timeline outlining the process of developing an intensive FBA:

1st Week
Planning meeting with entire team

- Begin FBA interviews

- Design data collection system and begin to implement

- File review

- Assign roles

2nd & 3rd Weeks

- Continue data collection

- Conduct any additional interviews

- Direct observations by support staff

4th Week
Review meeting with entire team

- Review, summarize, and analyze data

- Generate summary statements/hypotheses/ identify major variables

- Design interventions/ BIP development

1 ——— 2 ——— 3

■ Positive Behavior Intervention and Support Plans (PBIS Plans)

Students with severe behavioral needs, especially students who also have a trauma history, need consistency in their environment. They may test limits as their lives outside of school may be chaotic and unpredictable. In order to have the greatest impact on teaching these students positive behaviors and building their resilience, a well-designed and consistently implemented behavior plan is key.

A well-designed PBIS plan is a multi-component plan. Prevention strategies, teaching replacement behaviors, positive reinforcement, planned consequences, home interventions, and a mutually agreed upon review schedule are all necessary pieces. In addition, including strong interventions under each heading will provide the best chance that a student will experience success once the plan is implemented.

Prevention Strategies

Review Schedule

Plan for Teaching Replacement Behaviors

MULTI-COMPONENT PBIS PLAN

Home Intervention

Positive Reinforcement

Planned Consequences/ Emergency Intervention

For more Tier 3 FBA, PBIS plan, and data collection resources, you may visit the Wayne RESA PBIS website.

Behavior Review Process

```
Schedule reviews          →    Prepare for the          →    Efficient agenda—
proactively                    meeting by reading,           solution-focused
                               summarizing, and              discussion
                               analyzing data                     │
                                                                  ↓
Discuss          ←    Evaluate          ←    Was the plan
changes               effectiveness          implemented
   │                                         reliably?
   ↓
Schedule         →    Distribute minutes
next meeting          from meeting
```
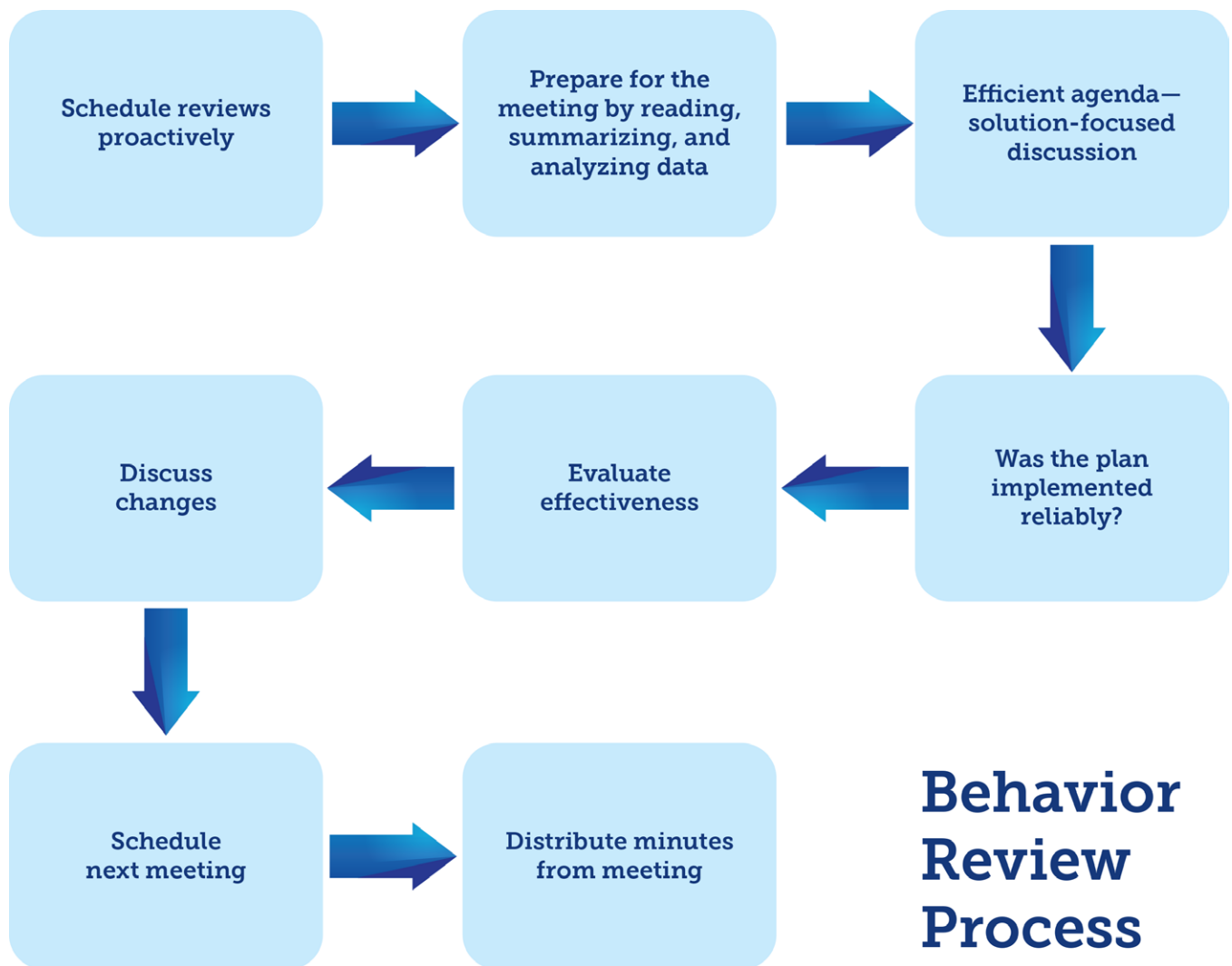
■ Ongoing Data Collection and Behavior Review

Tier 3 PBIS plans should be reviewed at least quarterly. A Behavior Review meeting allows the team to work collaboratively on progress and problem-solve together. It is a **data-driven meeting**, with the student's graphed behavioral data (CICO data, scatterplot data, and/or ABC data) being the starting point for the discussion. For students with Tier 3 behavioral needs, only keeping data on the most severe behaviors (i.e., physical aggression, elopement) and the most restrictive interventions (i.e., time-out, emergency interventions) may be the most helpful and keep the team focused on reducing the most problematic behaviors. Addressing too many problem behaviors can leave the student and family feeling like success is unattainable, so this strategy also helps to better position the student and family for success by inspiring hope that change is possible.

Participating in a regular behavior review process protects the integrity of the implementation of the plan. In other words, "Did we do what we said we were going to do?" If so, how did it go? If not, what barriers were encountered and how can we address them? The Behavior Review process brings the team, including the parent, back to the table to determine what progress is being made. For students who have experienced trauma, the process keeps the behavior plan consistent and reliable in meeting the student's identified needs.

■ Crisis Plans

Students with behaviors that present a safety risk to themselves or others may need a safety or crisis plan included in their PBIS plan. **The purpose of the crisis plan is to ensure that all staff are aware of how to handle a safety concern with the student. Staff need to be consistent with how crisis situations are handled and it is important that staff communicate well with one another and with parents** when crisis situations arise. Procedures for the use of emergency seclusion or emergency physical restraint should only be addressed in a student's Emergency Intervention Plan. **It's important to include prevention activities** to increase student and staff awareness to possibly prevent a crisis before it occurs. When developing crisis/safety plans, have the student make a list of triggering people, places, situations, and sensory inputs (visuals, sounds, smells etc.). Furthermore, identifying the behavioral warning signs that precede a crisis situation can support caring adults in intervening before things escalate. For example, warning signs can include but are not limited to: clenching fists, turning red, isolation, getting loud or quiet. It's important to have a strong sense of what a student's baseline behavior looks like. Keep an eye out for deviations in baseline as they may be useful cues that signal student distress.

■ Emergency Intervention Plans

Per the Michigan School Code and the Policy for the Emergency Use of Seclusion and Restraint, **repeated uses of emergency seclusion or emergency physical restraint require that the school staff develop an Emergency Intervention Plan (EIP) for the student.** A template for the EIP can be found on the Wayne RESA PBIS website, under the Tier 3 ribbon EIPs should be reviewed on a regular basis, usually at a monthly school-based wraparound meeting. Data on severe behaviors and the use of seclusion and/or restraint are kept and reviewed at the meeting.

■ School-Based Wraparound

School-based wraparound is an approach recommended for use with 1-2% of the student population in a school. It is a process used with students who have the most complex behavioral, academic, and emotional needs. **School-based wraparound provides a way for the school to coordinate all the services and supports a student may be receiving**, such as family and community support, outside mental health services, ABA, medical services, juvenile justice, etc. We believe it is a trauma-informed practice as it provides a coordination of systems in a student's life to create the best possible program and supports based on the student's individual needs. The school-based wraparound process allows for all natural supports involved in the student's life to communicate and work together toward **the common goal of improving the student's functioning and outcomes both in school, at home, and within the community.**

Wraparound meetings generally occur on a monthly basis. The meetings are coordinated and facilitated by a lead person from the school who is often an administrator, a school professional with behavioral expertise, or a special education teacher. **The meetings are pre-planned, proactive, and solution-focused rather than reactive and problem-focused.** The meetings include an agenda and a note-taker who shares the notes with the team following the meeting. Also, each meeting is data-driven and each person at the meeting reports on how the student is doing in each setting (school, home, ABA, etc.). After a review of the data and share-outs, the team works together to determine what the next steps will be in a student's plan. Behavior interventions may be modified or supports within the home or community may be strengthened. Strategies that are being used to improve the student's functioning in one setting are shared across settings and a unified approach to the student's behavioral, academic, and emotional needs is developed. The team comes back together the following month to again review the student's data and progress and make any needed changes to his or her plan to move forward.

School-Based Wraparound
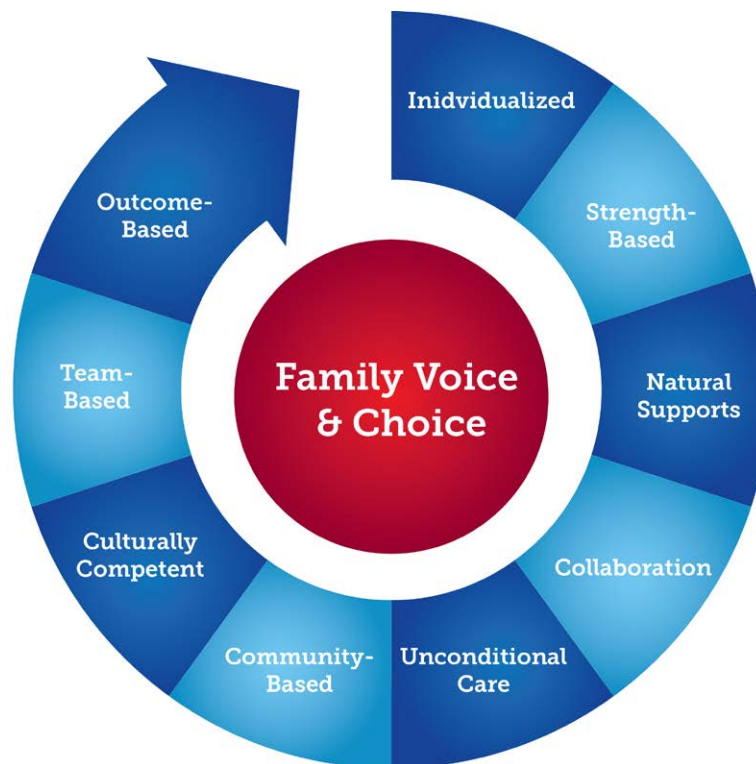
Wraparound Mechanics:

- Build on Tier 2 interventions
- Start every meeting with a review of the data

    — CICO summary

    — Incident reports; referrals, suspensions

    — Grades

    — Attendance

- Keep a tight agenda
- Be solution-focused
- Written notes distributed by e-mail
- Identified Team Member to guide the process

For more information about school-based wraparound, please visit the Wayne RESA PBIS website, under the Tier 3 ribbon.

◼ **Trauma-Focused Cognitive Behavioral Therapy**

Trauma Focused Cognitive Behavioral Therapy (TF-CBT) is an evidence-based practice that is highly effective in reducing Post Traumatic Stress Disorder (PTSD)

symptoms for children and adolescents following exposure to traumatic events. TF-CBT may be accessed through mental health services delivered outside of school or by a trained school-based mental health clinician housed in the school setting.
The TF-CBT approach focuses on promoting parent-child (or caregiver-child) relationships while using gradual exposure to work toward processing and integrating the traumatic experience(s). Treatment is time limited with a clear beginning, middle, and end and varies from 12-36 sessions. A PTSD assessment determines the extent and impact of PTSD symptoms and provides direction for individualize treatment. The assessment is also used at the end of the model to measure progress. For more information on TF-CBT, please visit the National Child Traumatic Stress Network at https://www.nctsn.org/. To find a nationally certified TF-CBT therapist, you can visit www.tfcbt.org. Families can also connect with a state endorsed TF-CBT therapist in Detroit-Wayne County by contacting (800) 241-4949 to initiate mental health services.

■ Parent Support Partners (A Community Mental Health Support)

Per the Association for Children's Mental Health website:

"The Parent Support Partner (PSP) service is an intervention-based approach to support families whose children receive services through a community mental health service provider.

The purpose of the Parent Support Partner Service is to increase family involvement and engagement within the mental health treatment process and to equip parents with the skills necessary to address the challenges of raising a youth with special needs thus improving outcomes for youth with serious emotional disturbance (SED) or an intellectual/developmental disability (I/DD) who are involved with the public mental health system.

The PSP service is provided by trained parent with first-hand experience navigating public child serving agencies and raising a child with mental health or developmental challenges. Support provided to a family by a PSP will focus on increasing confidence and competence in parenting skills, increasing the parent's knowledge to navigate systems and partner with service providers, and empower the parent to develop sustainable, natural support networks after formal service delivery has ended. Parent Support Partners, serving as an equal member of the treatment team, will assist in identifying goals within the Person Centered/Family Centered Plan that will support the parent to develop the new skills, resources, and confidence in parenting a child with serious emotional disturbance (SED) and/or intellectual developmental disabilities (I/DD).

Parent Support Partners are typically used to enhance the therapeutic process of the clinician or the case manager by working directly with caregivers to expand, enhance and increase skills, knowledge and abilities needed to meet the numerous challenges facing families of youth with mental health needs."

For children already served by a community mental health, families can ask their therapist or case manager about how to add PSP services to the treatment plan. For families interested in obtaining PSP services, but your child is not currently receiving mental health services, please contact 800-241-4949 to schedule an intake appointment. The flyer can be viewed here.

■ Parent Management Training— Oregon Model (PMTO)

PMTO is another evidence-based practice that is effective in reducing challenging and troubling behaviors by equipping parents with the tools to more effectively manage and modify behaviors. While working with a specially trained therapist, parents/caregivers engage in interactive sessions that aim "to promote prosocial skills and cooperation and to prevent, reduce and reverse the development and maintenance of mild to moderate to severe conduct problems in children age 4–12. PMTO empowers parents as primary treatment agents to promote and sustain positive change in families." PMTO can be accessed through community mental health services by calling (800) 241-4949. More information can be found on the PMTO website. The flyer can be viewed here.

■ School-Based Mental Health Services

School-Based Mental Health Services (SBMH) are community mental health services housed in a school community. **SBMH requires a strong collaboration with the school administration/professionals and offers mental health services to eligible youth right in their own school environment.** This approach reduces additional barriers the student/family may face in seeking out mental health services in a clinic setting. Students not only have access to a therapist who helps the family address identified goals in individual, family, or group contexts, but students can also access additional services and supports offered through a community mental health setting. These additional supports include Youth Peer Support, Parent Support Partners, TF-CBT, PMTO, respite care and community living supports. Mental health professionals work closely with education professionals to promote youth success at home and at school.

Coaching Support and Implementation Suggestions

In order for an initiative to be effective within a school, coaching must accompany other professional development activities. Teachers and staff members will need practice, feedback and assistance in the implementation of trauma-informed PBIS strategies. As Tier 1, Tier 2, and Tier 3 systems are put into place, regular data analysis by a school-based team must occur to ensure fidelity of implementation.

Below are some coaching considerations to further support ongoing, successful implementation of trauma-informed PBIS practices:

- Coach adults within the school on demonstrating **unconditional positive regard** toward students. Provide a trusting space for staff to process situations during which they struggled with unconditional positive regard.
- **Remind adults to remain aware of their own affect and reactions toward students.** Is it negative or positive? Ask yourself how students may feel in your presence.
- Coach and model ways to **remain firm but kind** when providing corrective feedback on behavior.
- Teach and model the **difference between reacting and responding** to student behaviors.

- Coach and provide professional development on how to **mentor students**.
- Coach and provide professional development on **verbal de-escalation strategies**.
- Use staff meeting time for providing **information on trauma and trauma-informed strategies**.
- Provide **emotional support for staff** experiencing compassion fatigue or burn-out.
- Teach staff **stress management techniques**.
- Model strategies such as community circles, restorative circles, providing corrective feedback with empathy.
- Create video clips or blogs that teach strategies.
- **Acknowledge staff** who are implementing trauma-informed strategies and allow staff time to work with one another and share ideas.
- **Allow staff time to work with one another** to develop Tier 2 and Tier 3 plans for students who continue to struggle.
- **Coach staff on how to approach and work with parents who have experienced trauma.** Create a culture of understanding that trauma is often inter-generational.
- **Create policies and procedures around handling Child Protective Service referrals**, especially around suspected cases of domestic violence. Schools should have policies and procedures for reporting the suspected abuse and neglect of children which maintain safety for and trust between school professionals and families to the greatest extent possible.
- **Consult multi-disciplinary professionals when necessary** (mental health expert, community resource expert etc.)
- **Promote work-life balance** for staff and encourage self-care throughout the work day.
- Provide consultation and a **process to debrief crisis situations/critical incidents**.

Appendix

Trauma-Informed PBIS Core Features Checklist	Yes, Consistently	Inconsistently	No
Whole staff have received training on trauma and have ongoing professional development opportunities.			
Tier 1 PBIS systems solidly in place.			
Tier 1 Trauma-Informed PBIS Strategies in place:			
Behavioral expectations taught and practiced			
— Classroom			
— School-Wide			
Calm, orderly classroom environments structured activities			
In-class break procedures are taught and practiced			
Staff demonstrate unconditional positive regard toward students (minimum 4:1 ratio of positive acknowledgements to corrections)			
PBIS Clubs			
School-wide bully prevention program			
Safe, predictable classroom consequences are taught and practiced			
Discipline policies balance accountability with an understanding of trauma			
Multiple opportunities for parent engagement and to develop positive relationships with families			
Self-care for staff is addressed on a regular basis			
Tier 2 Trauma-Informed PBIS Strategies in place:			
Check In/Check Out			
Tier 2 Sensory Breaks			
Mentors			
Targeted Social Skills Instruction			
Token Systems			
Home-School Plans			
Restorative Circles			
Youth Peer Support-CMH			

Trauma-Informed PBIS Core Features Checklist

	Yes, Consistently	Inconsistently	No
Tier 3 Trauma-Informed PBIS Strategies in place:			
Functional Behavior Assessments			
PBIS Plans			
Regular, data-driven behavior reviews			
Crisis Plans			
Emergency Intervention Plans			
School-Based Wraparound			
Mental Health Referrals			
— Trauma-Focused CBT			
— Parent Support Partners			
— PMTO			
— School-Based Mental Health Services (if available)			

Detroit Wayne Mental Health Authority (DWMHA)

For clients new to mental health services in Detroit/Wayne County, please contact Wellplace to complete an initial screening and to connect with your provider of choice. You can also contact your preferred provider directly using the contact information on the Children's Service Provider List below.

DWMHA Main Office

707 West Milwaukee Street
Detroit, Michigan 48202

(313) 833-2500

Wellplace
Centralized Access

24-Hour Crisis/Information and Referral Line

Local Calls: (313) 224-7000

Toll Free: (800) 241-4949

TTY/TDD Line for Hearing Impaired: (866) 870-2599

(877) 909-3950 (FAX)

DWMHA
Customer Service

707 W. Milwaukee St.
Detroit, Michigan 48202

Community Outreach
Consumer Affairs
Family Support Subsidy
Grievances and Appeals

Local Calls: (313) 833-3232

Toll Free: (888) 490-9698

TDD Line for Hearing Impaired: (800) 630-1044

Office of Recipient Rights

707 W. Milwaukee St.
Detroit, Michigan 48202

Toll Free: (888) 339-5595

TDD Line for Hearing Impaired: (888) 339-5588

Children's Service Providers (as of June 2019):

Service Provider	Phone Number
American Indian Health & Family Services	(313) 846-3718
Arab American & Chaldean Council	(313) 369-4730
Arab Community Center for Economic and Social Services	(313) 842-7010
Assured Family Services	(313) 896-1466
Black Family Development, Inc.	(313) 758-0150
Community Care Services	(313) 389-7500
Community Living Services	(734) 467-7600 or Toll Free: (866) 381-7600
Development Centers	(313) 531-2500
Hegira Health, Inc.	(313) 565-2000
Lincoln Behavioral Services	(313) 450-4500
New Oakland Family Services	(800) 395-3223
Northeast Guidance Center	(313) 245-7000
Ruth Ellis Center	(313) 252-1950
Southwest Counseling Solutions	(313) 963-2266
Starfish Family Services	(888) 355-5433
TEAM Wellness Center	East Clinic (313) 331-3435 Eastern Market (313) 396-5300 Southgate (734) 324-8326
The Children's Center	(313) 831-5535
The Guidance Center	(313) 388-4630
Third Circuit Court/Clinic for Child Study	(313) 833-2800

Children's Crisis Centers

The Guidance Center

26300 West Outer Drive
Lincoln Park, Michigan 48146

Monday-Friday until 8:00 PM
(734) 785-7705 Ext. 7298

After hours: (734) 846-5232

Holidays/Weekends:
(888) 711-5465

Available by phone 24/7.

The Children's Center

90 Selden
Detroit, Michigan 48201

Local Calls: (313) 324-8557

**Monday-Friday
8:00 AM – 8:00 PM**

Calls and walk-ins welcome.

New Oakland Family Center

32961 Middlebelt Road
Livonia, Michigan 48334

Mobile Crisis: (877) 800-1650

24/7 Availability

Resources and References

PBIS

- https://www.resa.net/curriculum/schoolwide-positive-behavioral-interventions-supports/

- Wayne RESA Guidelines for Behavior Intervention, 2014

- https://www.pbis.org/

Trauma-Informed and Resilience

- SAMHSA: https://www.samhsa.gov/trauma-violence

- Children's Trauma Assessment Center, Western Michigan University: https://wmich.edu/traumacenter

- Center on the Developing Child, Harvard University:
  https://developingchild.harvard.edu/science/key-concepts/resilience/

- Wisconsin Department of Public Instruction Trauma-Sensitive Schools Resources and Training Modules.
  https://dpi.wi.gov/sspw/mental-health/trauma/modules

Social-Emotional Learning

- MDE Social-Emotional Learning website:
  https://www.michigan.gov/mde/0,4615,7-140-74638_72831_72834-361321--,00.html

- The Collaborative for Academic, Social, and Emotional Learning: www.casel.org

- Second Step Program: www.secondstep.org

Bully Prevention

- Expect Respect Bully Prevention
  https://www.pbis.org/resource/900/bullying-prevention-in-pbis-expect-respect-middle-and-high-school-level
  (Also includes link to elementary program)

Mindfulness

- http://leftbrainbuddha.com/5-mindfulness-practices-bring-classroom/

- www.mindfulschools.org

Resources and References

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- Souers, K. & Hall, P. *Fostering Resilient Learners*. 2016. Alexandria, VA: ASCD.

- *Using Positive Behavioral Interventions & Supports to Help Schools Become More Trauma-Sensitive.* Wisconsin Department of Public Instruction. Retrieved from https://dpi.wi.gov/sites/default/files/imce/sspw/pdf/mhtraumausingpbis.pdf

PARENTS AND CAREGIVERS
SUPPORTING YOUR CHILD IN OVERCOMING TRAUMA

Trauma

The National Child Traumatic Stress Network (NCTSN) defines trauma as a frightening, dangerous or violent event that threatens the life or bodily integrity of the child or child's loved one.

Examples of Trauma

- **Physical abuse**
- **Emotional abuse**
- **Sexual abuse**
- **Neglect**
- **Bullying**
- **Exposure to violence at home or in the community**
- **Medical trauma**
- **Separations from family**

Common Child Reactions

- **Nightmares/trouble sleeping**
- **Thinking about the trauma**
- **Avoidance- not wanting to think or talk about the trauma**
- **Feeling scared, anxious, or easiliy startled**
- **Trouble concentrating, academic difficulties, or regression in learning**
- **Depression**
- **Feeling anger, guilt, or shame**

Common Parent Reactions

- **Self-blaming and feeling guilty**
- **Blaming the child**
- **Being overprotective**
- **Denial about the trauma**
- **Not wanting to enforce rules and limits**
- **Becoming overwhelmed**
- **Feeling worried your child won't recover**
- **Having your own Post Traumatic Stress symptoms**

FOR
PARENTS AND CAREGIVERS
SUPPORTING YOUR CHILD IN OVERCOMING TRAUMA

There Is Hope

The best way to help your child after a traumatic event is to be believing, protective, and supportive.

Environments with love, laughter and learning can help your child heal and thrive.

Parenting Strategies

- Have daily mealtime, bedtime and school routines. Structure helps reduce uncertainty and anxiety.
- Give positive praise to good behaviors.
- Set aside time everyday for an activity with your child/family (even if it's just 20 minutes).
- Take time for yourself and seek professional help when needed.

Where to Learn More

- National Child Traumatic Stress Network (NCTSN)
- Child Mind Institute-Trauma Resources
- www.recognizetrauma.org
- www.starr.org/training/tlc/resources-for-parents
- www.childwelfare.gov/topics/responding/trauma/caregivers/
- www.samhsa.gov/capt/tools-learning-resources/coping-traumatic-events-resources
- www.resiliencetrumpsaces.org/resources/
- *The Whole-Brain Child*
- *How to Talk So Kids Will Listen & Listen So Kids Will Talk*

Help is Available

Detroit Wayne Integrated Health Network can connect you and your child to a Trauma Focused Mental Health Professional, just call 1-(888)-490-9698 or

TTY: (800)-630-1044

Services are strengths-based, non-judgemental, and supportive.

TEACHERS AND EDUCATORS

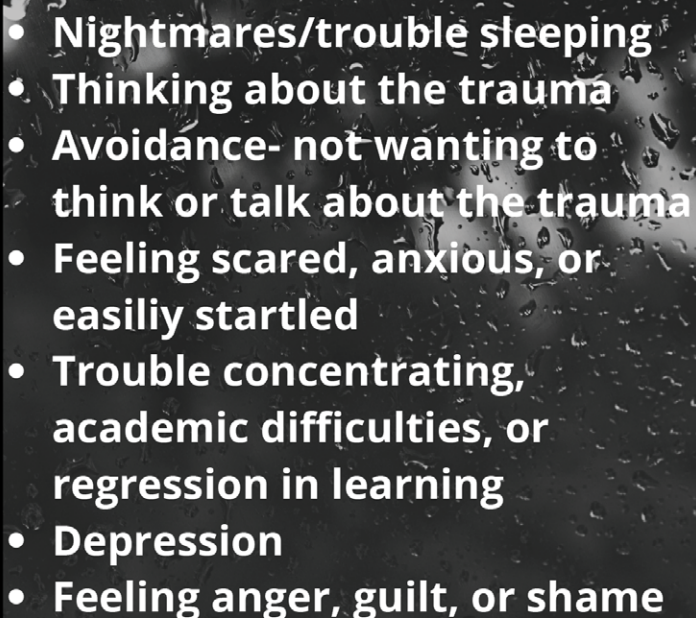## CREATING SAFE AND SUPPORTIVE LEARNING ENVIRONMENTS

TRAUMA

The National Child Traumatic Stress Network (NCTSN) defines trauma as a frightening, dangerous, or violent event that threatens the life or bodily integrity of the child or child's loved one.

More than 2/3 of children will report at least one traumatic event by age 16 (SAMHSA, 2017).

Trauma can create a ripple effect, impacting many parts of a child's life including education and learning.

Children who've experienced trauma may display these behaviors, which should be viewed as learned survival :

- Intense and ongoing emotional upset
- Mood changes (depression, anxiety, anger, irritability)
- Difficulty with peers and forming relationships
- Attention and academic difficulties
- Fight, flight, freeze responses (combative, running, spacing out/numbing)
- Physical complaints, aches and pains
- Difficulty eating/sleeping

Working with kids impacted by trauma can affect the caring adults in their lives and can result in Secondary Traumatic Stress and Burn Out. Make sure to take time for your own individual well-being and practice self-care regularly.

WHAT KIDS NEED:

Safety

Kids require a safe environment in order to learn. Make efforts to ensure the physical, psychological, and emotional safety of all students.

Predictability

Create predictable routines and schedules, so kids know what to expect, which helps alleviate anxiety. Give students reminders before transitions occur.

Adaptations

Be flexible. Provide fidgety youth with tools to self-manage in a non-disruptive way. Incorporate movement breaks to increase attention and focus.

TEACHER'S TOOLBOX: A TIERED APPROACH

1

Incorporate mindfulness & movement using **www.gonoodle.com**. These strategies can benefit all students. For more resources visit **mindfulschools.org**.

Use calm and consistent responses to problem behavior.
Kids impacted by trauma need safe and predictable consequences and limits.

Approach youth with unconditional positive regard. Praise publicly, but give constructive feedback in private. Kids impacted by trauma can have a negative view of themselves.

2

Create coping/calming kits to help regulate emotions. Have students pick one object for each of the five senses to appeal to touch, taste, sound, sight, and smell.

Link students to a mentor to foster positive relationships. Receive training in using check-in/check-out to add more structure & routine while also creating an additional adult connection.

Help students manage triggers. Develop a list of triggering people, places, situations, sounds, and smells. Create a safety plan handle triggers appropriately.

3

Build trust and sense of belonging with families through the Wrap Around process. Strong relationships between school and home helps the student feel more connected to the school community.

Utilize functional behavioral assessments to gain understanding of behavior. Follow up with a behavior support plan and hold reviews to evaluate progress.

Refer students for mental health services for more intensive services and supports. Families can contact Detroit Wayne Integrated Health Network to Request an intake by calling (800) 241-4949.

SUPPORTIVE RESPONSE TO YOUTH AND FAMILIES

For support staff, security, transportation and others who interact with children and youth

Support personnel can often be the first contact with children and families across work settings. It's extremely important to be compassionate and empathetic in all interactions, even when challenging behaviors are present. It's natural to have reactions or make assumptions about how a child is behaving, but remain mindful that we don't know what that child is going through.

TRAUMA

The National Child Traumatic Stress Network (NCTSN) defines trauma as a frightening, dangerous, or violent event that threatens the life or bodily integrity of the child or child's loved one.

Seeing a child's behavior is like only seeing the tip of the iceberg. Remember there is more going on beneath the surface that you are not aware of.
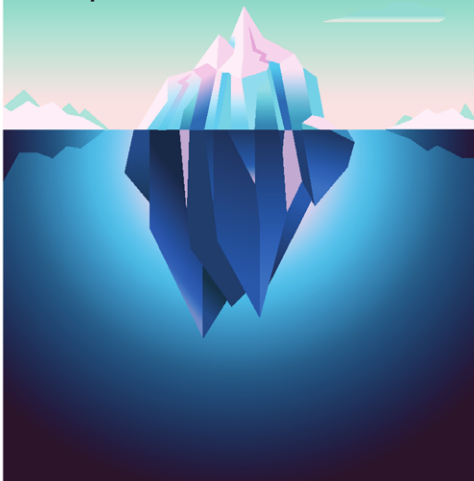
Subjective: A traumatic event can impact everyone differently. What may be traumatic for one, may not be for another.

Pervasive: A traumatic event can elicit strong emotions and physical reactions that persist after the traumatic event is over.

Adversive: Traumatic events can impact healthy functioning. Trauma can interfere with learning, relationships and view of self and the world.

UNDERSTANDING TRAUMA SYMPTOMS

KIDS WHO HAVE EXPERIENCED TRAUMA MAY DISPLAY THESE BEHAVIORS

- Intense and ongoing emotional upset
- Depression
- Anxiety
- Anger, irritability
- Difficulty with peers and forming relationships
- Attention and academic difficulties
- Fight, flight, freeze responses (combative, running, spacing out/numbing)
- Physical complaints, aches and pains
- Difficulty eating/sleeping (nightmares)

CARING ADULTS CAN HELP

1) Take a deep breath to calm yourself when interacting with an escalated or distressed child. Children need adults to help them regulate emotions, so staying calm is critical.

2) Use a soft, calm, caring tone of voice when interacting with an escalated or distressed child. Let them know you have intentions to understand and help. You can also mimic a child's body language to send a message that you are present with them in the moment.

3) Get support from a team member if you're overwhelmed or having difficulty with remaining calm.

RESOURCES

- Detroit Wayne Integrated Health Network for referrals and intake at 1-(800)-241-4949; TTY: 1-(800)-870-2599
- Detroit Wayne Connect Training, Suggested Topics: Trauma 101, Mental Health First Aid, Cultural Compentence, Crisis Pre-Intervention Using Verbal De-Escalation
- National Child Traumatic Stress Network (NCTSN)
- Adverse Childhood Experiences (ACES)-Infographic:https:// www.rwjf.org/en/library/infographics/the-truth-about-aces.html
- www.recognizetrauma.org
- www.resiliencetrumpsaces.org

STRENGTHS-BASED AND SUPPORTIVE

It's imperative to keep a positive view of the child even amidst challenges. Kids who have experienced trauma are more likely to have a negative self-image and need adults to help build healthy self-esteem. Instead of labeling a youth "argumentative," focus on seeing the strength by thinking they are a self-advocate and communicator.

NON-JUDGEMENTAL

It's easy to misinterpret behaviors as offensive or off-putting, but approach the youth from a place of compassion. Youth who have experienced trauma can have difficulty trusting others. A non-judgemental approach will help build trust, so you can provide support more effectively.

I AM MORE THAN WHAT YOU SEE

Self-Care
More than a bubble bath and cup of tea

Self-care has become popularized in the helping professions and also across mainstream culture, but what does it mean? We often think of self-care as a "to do" list of behaviors that will help us relax and cope during high-stress times, and for some it can be. However, more generally, self-care is daily intention that increases the ability for us to "show up" for those we help. Self-care can be preventative or in the moment. Self-care creates more time, energy, and space to be present and available in our work.

YOU HAVE TO NOURISH TO FLOURISH

Self-care can help protect against:

Burn Out

- Physical and emotional exhaustion
- Cynicism and detachment
- Feelings of inefficacy
- Fatigue or insomnia
- Forgetfulness, lack of attention/concentration
- Physical symptoms/illness
- Emotional changes; increased depression, anxiety, anger and irritability
- Pessimism
- Isolation
- Feelings of apathy and hopelessness
- Diminished productivity/poor performance

Compassion Fatigue

- Feeling burdened by the suffering of others
- Blaming others for their problems/suffering
- Isolating
- Loss of pleasure in life
- Denial
- Physical/mental fatigue
- Frequent complaining
- Others commenting about your work and/or attitude
- Compulsive behaviors (overeating, gambling, substance use)

Secondary Traumatic Stress

- Intrusive thoughts
- Chronic fatigue
- Emotional changes; sadness, anger, helplessness, hopelessness
- Lack of trust/confidence in decisions
- Fearfulness/hypervigilance
- Absenteeism
- Physical symptoms/illness
- Sense that one can't do enough, guilt
- Diminished creativity
- Minimizing, inability to embrace complexity
- Dissociation/detachment/numbing

Try this: Use the Professional Quality of Life Scale (ProQOL) quarterly to assess and monitor for Burnout, Compassion Satisfaction, and Secondary Traumatic Stress (find it here: http://www.proqol.org/uploads/ProQOL_5_English_Self-Score_3-2012.pdf)

Self-care is creating daily rituals to take care of mind, body, and spirit.
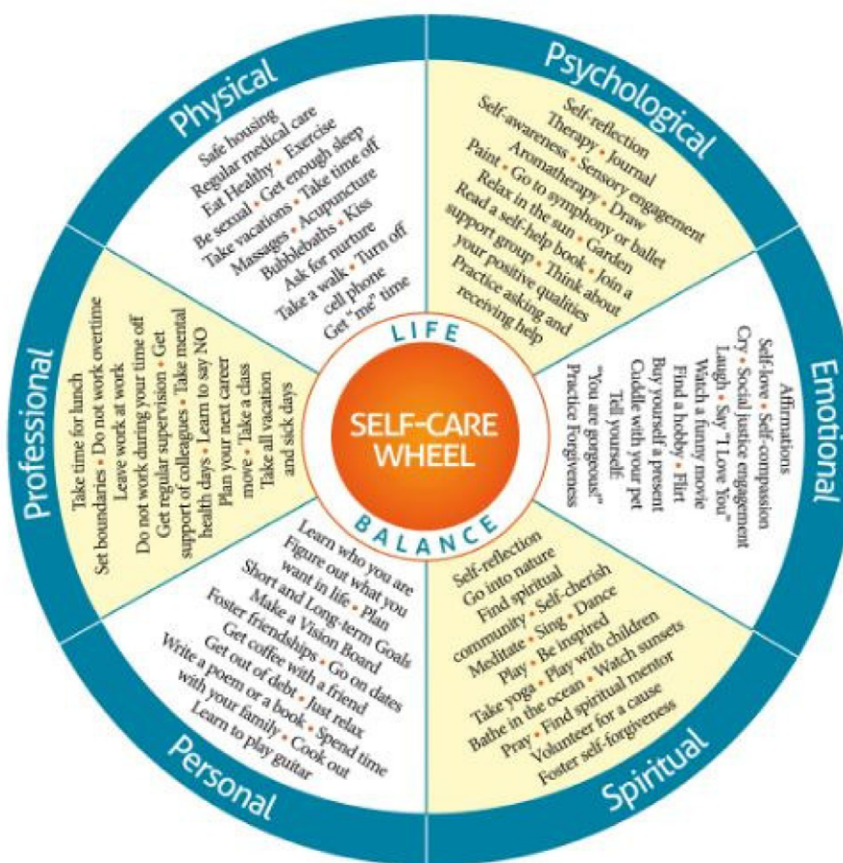
Self-care isn't selfish

Self-care can rejuvenate and restore. Self-care promotes self love.

Self-Care Strategies
Take an individualized approach

SELF-CARE WHEEL

Physical
Safe housing • Regular medical care • Eat Healthy • Exercise • Be sexual • Get enough sleep • Take vacations • Take time off • Massages • Acupuncture • Bubblebaths • Kiss • Ask for nurture • Take a walk • Turn off cell phone • Get "me" time

Psychological
Self-reflection • Therapy • Journal • Self-awareness • Sensory engagement • Aromatherapy • Draw • Paint • Go to symphony or ballet • Relax in the sun • Garden • Read a self-help book • Join a support group • Think about your positive qualities • Practice asking and receiving help

Emotional
Affirmations • Self-love • Self-compassion • Cry • Social justice engagement • Laugh • Say "I Love You" • Watch a funny movie • Find a hobby • Flirt • Buy yourself a present • Cuddle with your pet • Tell yourself "You are gorgeous!" • Practice Forgiveness

Spiritual
Self-reflection • Go into nature • Find spiritual community • Self-cherish • Meditate • Sing • Dance • Play • Be inspired • Take yoga • Play with children • Bathe in the ocean • Watch sunsets • Pray • Find spiritual mentor • Volunteer for a cause • Foster self-forgiveness

Personal
Learn who you are • Figure out what you want in life • Plan Short and Long-term Goals • Make a Vision Board • Foster friendships • Go on dates • Get coffee with a friend • Get out of debt • Just relax • Write a poem or a book • Spend time with your family • Cook out • Learn to play guitar

Professional
Take time for lunch • Do not work overtime • Set boundaries • Leave work at work • Do not work during your time off • Get regular supervision • Get support of colleagues • Take mental health days • Learn to say NO • Plan your next career move • Take a class • Take all vacation and sick days

LIFE BALANCE

SELF-CARE WHEEL

This Self-Care Wheel was inspired by and adapted from "Self-Care Assessment Worksheet" from *Transforming the Pain: A Workbook on Vicarious Traumatization* by Saakvitne, Pearlman & Staff of TSI/CAAP (Norton, 1996). Created by Olga Phoenix Project: Healing for Social Change (2013). Dedicated to all trauma professionals worldwide.

www.OlgaPhoenix.com

Resources:
- *Trauma Stewardship: An Everyday Guide to Caring for Self While Caring for Others*
- *Self-Care Revolution: 5 Pillars to Prevent Burnout and Build Sustainable Resilience for Helping Professionals*
- *Compassion Fatigue Workbook*
- Calm App, or www.calm.com for silent or guided meditation
- Provider Resilience App
- To create your own self-care wheel visit: http://www.olgaphoenix.com/wp-content/uploads/2015/05/ACGD_SelfCareWheel_templatejan2016_A3-1.pdf

Preventative Activities:
Setting healthy boundaries, yoga, healthy eating/sleeping habits, exercise, social time or "me" time, therapy, journaling, delegate tasks, positive self-talk

In the Moment Activities:
Deep breathing (try box or belly), tense and release, take a walk, call a support person, mindfulness

Develop a personalized self-care plan to put your intentions in writing. Write down 3 self-care activities you can do everyday, every week, every month, and every year. Share it with a support person.

Daily	Weekly	Monthly	Annually
1)	1)	1)	1)
2)	2)	2)	2)
3)	3)	3)	3)

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