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## Preparing Trauma Informed Teachers and Utilizing Trauma Responsive Systems to Increase Educational Success For Elementary Age Students

Kate Jordal

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Preparing Trauma Informed Teachers and Utilizing Trauma Responsive Systems to  
Increase Educational Success For Elementary Age Students

by Kate Lewellen Jordal

A capstone submitted in partial fulfillment of the requirements for the degree of Master  
of Arts in Education

Hamline University

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## DEDICATION

To my parents, Mike and Alice Lewellen, and my husband, Michael Jordal, for your endless love and support. To my children, Griffin, Collin, Tobin, and in memory of Kimberly for inspiring me to be better every day. To Danielle Theis, Mel Hoffner, Alisha Field, Alicyn Prestegard and Pat Fails for the professional inspiration, and to Jana Lo Bello Miller and Dr. Abigail Rombalski for all the help and support in getting this paper much closer to completion.

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## CHAPTER ONE

### Introduction

#### Overview

The impact of past trauma on a student's ability to succeed in school, particularly with social/emotional skill building, has been a topic on the minds of many educators, especially over the past two years during the pandemic. Because of the impact of the worldwide pandemic, children and families may be at higher risk of trauma, however, for many students, it goes beyond pandemic trauma. Students experience homelessness, loss of parents or siblings, poverty, abuse in many forms- the list goes on. According to Kleber (2019), psychological trauma has developed into a very common concept in the scientific community, in mental health care, as well as in popular language and mass media, and since Kleber wrote his article in 2019, it has only increased. How can teachers help? I believe the most powerful and impactful thing a teacher can do is to become a trauma informed teacher.

My research focus is *"how might trauma informed teaching impact elementary age student success?"* I've chosen this focus because I have a passion for helping teachers become trauma-informed. Thankfully the school I work at has a trauma responsive behavior system in place, but there is always more work to be done and more to learn to become a trauma informed teacher.

In this chapter, I will discuss my personal and professional reasoning for choosing this topic. I will also include more focused information about what my project portion of the Capstone will look like.

One question that may come up for the reader is, “how is success defined in relation to the research question?” Does it mean academic success? Behavioral success? Healing from trauma? Are we just putting a bandage on deep wounds and not working to heal? My overarching answer to this is, success to me is defined as students being able to access the general education classroom more often. Does this mean their trauma has healed or even worked toward healing? Have they increased academic success? In some cases, yes, but unfortunately not always. But what I do hope, along with those goals, is that the students feel more comfortable at school and that their classroom feels like a space they can feel their own personal successes in. How will I know if that is happening? That will be explained in greater detail in Chapters 3 and 4, but it will be tracked in several different ways. What I do know is that if school is a predictable, consistent place, with trauma-informed teachers using common language and responding to behaviors in similar ways, students will spend more time in their classrooms. If they spend more time there, they will learn more skills, both academic and behavioral/social-emotional skills. If they learn more skills, they will increase school related success.

### **Trauma Informed Teaching- Terms and Definitions**

While more information and focus will be given to terms and definitions surrounding trauma and trauma-informed teaching in the next chapter, it is important to discuss brief definitions of these terms at this time. Figley defines trauma as a “state of disruption caused by stressors severe enough to threaten life or make one believe that one is about to die” (2012). Trauma can split and fragment the mind in various “weightings of awareness and unawareness” (2012). Trauma always leaves an imprint, and even if

covered by extra defenses, a degree of compromised functioning, sensitivity, and vulnerability remain. Trauma is a “state of disruption in which one or more life-enhancing processes are irretrievably lost” (Figley 2012). Kleber (2019) defines a traumatic event as exposure to actual or threatened death, serious injury, or sexual violence. Kleber also states that according to Sigmund Freud, the “essence of a traumatic situation is an experience of helplessness that is brought about either externally or internally” (2019).

According to Figley (2012), understanding trauma took giant strides with the work of Pierre Janet and Sigmund Freud at the end of the 19th century. Each described a splitting of the mind. Janet called the process *dissociation* while Freud called it *splitting of consciousness*. In both of these cases, emotional, cognitive, and contextual fragments connected with trauma were disconnected from conscious awareness. Both Janet and Freud agreed that the dissociated or unconscious fragments continued to have psychic power and could return in characteristic symptoms and illnesses. While there are various definitions of trauma, one thing most scholars agree on is that it changes the brain and triggers emotional responses. More information regarding these changes will be explored in chapter 2.

### **Personal Background**

I was fortunate that the most extreme trauma I have ever experienced was as an adult, and not as a child. Growing up in a middle-class, midwestern, White household, I had an easy, happy childhood with a two-parent, stable family, where there was not an abundance of money, but there was enough, and there was more than enough love. I never worried about whether my parents loved me. I never worried about where we

would sleep or if there would be food at home. I knew my parents would be where they said they would be and do what they said they would do. I had limits and expectations, schedules and routines. My parents were extremely present in my life (and remain so today). I was never exposed to an adult or even another child who wanted to harm me. I had what I needed and I had consistent, stable, loving adults as role models in my life at home, school, and everywhere else.

### **Professional Significance**

I have been a special education teacher for the past 13 years. Prior to that, I worked as a paraprofessional in special education for two years while I worked on my teaching licenses. I have worked at every level, beginning at the high school as a paraprofessional working with students with severe developmental disabilities. My student teaching experience was at an all-kindergarten building where I worked with students in a variety of special education categories. Next, I taught for eight years in a classroom that was considered Level Three, which means that my students were with me for more than 60% of their day. These students also had severe developmental disabilities, ranging from autism, to down syndrome, to cerebral palsy, and more. For the past four years, I have worked at an elementary level with all grade levels, with students of varying ability levels. I provide reading, math, and social-emotional skill instruction in small groups. I am also the founder and former director of a camp for children with severe forms of autism. These are children who would have difficulty attending a traditional day-camp experience, due to a variety of reasons, including lack of toilet training, behavioral difficulties, and communication needs.



I didn't start out as a teacher. I came from a family of teachers who honestly weren't that supportive of my initial interest to go into education. Many said it was a "thankless" job with lack of support and felt I would be better off going into something that would provide more financial reward. I went to school for Journalism and Mass Communication with a Public Relations emphasis and fully intended to work for a PR firm in a big city. When I ended up moving to rural Minnesota instead, the opportunities weren't there, and I floundered for a couple of years. Any time I thought about what I really wanted to do with my life, my interest always went back to teaching. I started working as a paraprofessional while I figured out what to do next, and I absolutely fell in love with special education, and immediately I knew that was what I was meant to do. I haven't looked back since and despite so many challenges and setbacks, I have only grown more passionate about my chosen career. In providing this description, I am attempting to explain my frame of reference and background in working in the classroom. "We must Maslow before we Bloom".

The saying "We must Maslow before we Bloom" refers to the idea that basic needs must be met for our students before they can achieve in school. Abraham Maslow (1908-1970) was a psychologist who developed the Hierarchy of Needs in a pyramid form with five levels. He describes human motivation as being driven by unmet needs. The lower level of needs must be met before one can move onto the next level. According to an article by Saul McLeod, from the bottom of the hierarchy upwards, the needs are: physiological, safety, love and belonging, esteem, and self-actualization (McLeod 2018). Maslow's Hierarchy of Needs has been widely studied by educators and most agree that until at least a good chunk of these needs are satisfied, it is going to be

very difficult for students to find success in school or more to Bloom's Taxonomy, which includes the six cognitive levels: knowledge, comprehension, application, analysis, synthesis, and evaluation (Anderson & Krathwhol, 2001). Although we would like to believe that all students will be ready to achieve the levels of Bloom's Taxonomy, if their basic needs have not been met (which is often an element of trauma, but not always), this is going to be impossible. Maslow's hierarchy of needs will need to be addressed first. It is a common thought among educators who work with students who have experienced trauma.

Maslow's hierarchy of needs is only a small part of trauma-informed teaching. For years, educators have been exploring the impact of trauma on the brain. One of the most impactful training I have ever attended in my career was Life Space Crisis Intervention (LSCI). In LSCI, we learn how trauma impacts the brain. First of all, what is a traumatic event? They are defined as incidents that expose a person to death, serious injury, or violence. The essence of trauma is that it is overwhelming, unbelievable, and unbearable (van der Kolk, 2014). Events that are commonly experienced as traumatic for a young person include: death of a family member, separation from loved ones, natural disaster, school shooting, physical or sexual abuse, domestic violence, community violence, systemic racism, displacement from the home, illness (or fear of illness), sudden or chronic loss of stability, routines, and sense of safety (Long et. al., 2021). At the national level, at least 1 in 10 children have experienced three or more ACEs (Adverse Childhood Experiences), and children of different races and ethnicities do not experience adversities equally. Nationally, 61 percent of black children and 51 percent of Hispanic children have experienced at least one adversity, compared with 40 percent of

white children (Murphey & Sacks, 2018). Asian children were represented in this study at 23 percent, but conflicting studies show that number may be under reported.

The body and brain respond to trauma in many ways. Housed deep within the human brain is the limbic system, which is also called the emotional brain (Long et. al., 2021). The limbic system directs the human body's emotional responses.

Developmentally, young people's brains tend to be dominated by the limbic system.

Adults sometimes say that children are driven by their emotions, which is actually correct (Long et. al., 2021). The limbic system includes the hippocampus, thalamus, and amygdala. It is the part of the brain most directly involved in regulating emotions and memories and contributes to the body's fight, flight, or freeze response (2021).

In his book, *Lost At School*, Ross Greene says, "kids do well if they can" (2014). I believe this- I have always believed it, and we need to help them get to the "can" part. Greene states,

this philosophy carries the assumption that if a kid could do well, he would do well. If he is not doing well, he must be lacking the skills. Adults should assume that a child is already motivated, already knows right from wrong, and already has been punished enough. Then figure out what skills he's lacking so you have the clearest possible understanding of what's getting in his way. (2014)

Over my years of teaching, I have observed some keys to success with students. Consistency is one of them. Having routines, expectations, and consistent responses to behavior is very important. Students need to know what to expect from their teachers. They need to walk into the classroom and have a good idea of what is going to happen. They need to know what adults will do and what they will be expected to do. Common

language is a large piece of this and most truly impactful behavior systems I have seen or worked with have had common language. I will explore this further in Chapter 2, as well as how it can be done through non-verbal communication.

Another very important aspect is relationship building. Some teachers are just better at this than others. They get to know their students- what they like and don't like, what they are good at or aren't so good at, or what their perceptions are of what they are or are not good at. They take time to build a strong relationship instead of always focusing on their academic content. When a student has a problem, the teacher who is a good relationship builder looks for a solution and will think outside the box to get to one. They don't shame or blame the child. They aren't so focused on what the child should be doing but more focused on why they may not be doing it and how they can help. All of these are characteristics of a trauma informed teacher. In order to serve our students the best we can in this unique time in history, we need to be trauma informed.

### **Focus**

The focus of my project is new ways to explicitly teach behavior management skills to students through a trauma informed, nurturance lens. I will be creating a Professional Development for teachers to present at back to school week. As part of this, I will create a Google Classroom with resources for teachers to use throughout the school year. This will include additional recommended readings as well as sample lessons for teachers to utilize. I especially want to gear the lessons to be implemented in the first 20 days of school. I hope to provide lesson plans to teach students the needed skills to manage their behavior and implement them in my school in the fall. To me, an important aspect of trauma responsive teaching is to ensure we are teaching the skills necessary to

be successful which includes a number of social-emotional skills. Being trauma informed means that teachers are aware that all behavior is a form of communication and represents a skill deficit. The school where I currently teach has a framework that focuses on eight skills in order for students to find success in school. I will go into greater detail regarding those skills in upcoming chapters.

### **Conclusion and Summary**

The research question is *“How might trauma informed teaching impact elementary age student success?”* Chapter 1 explored the importance of being a trauma informed teacher, as well as why this topic is important to the researcher. The impact of trauma on the brain was also discussed. This will be explored more extensively in chapter 2. Various trauma-responsive behavior systems will be explored. Compliance versus nurturance lenses as well as what it truly means for a teacher to be trauma informed will be additional themes of the chapter. In Chapter 3, I will offer more details and explanation of my project: creating professional development for teachers which will include resources in teaching social/emotional learning skills which align with the Performance Tracking System (PTS) which is a behavior monitoring system utilized in my current school. Chapter 4 will be a summary and reflection of the project and process.

## CHAPTER 2

### Literature Review

#### **Introduction**

*How might trauma informed teaching impact elementary age student success?*

First, teachers need to understand what it means to be trauma informed. Thus, the first part of Chapter 2 will explore this, including providing a definition of some additional terminology. Next, the impact of trauma on the body and brain will be discussed.

The following section will explore trauma informed teaching practices, including and largely focused on Life Space Crisis Intervention. In this section, the difference between seeing students through a compliance lens versus a nurturance lens will also be explored. Finally, the focus will be explicit teaching of social-emotional skills including different methods for doing so, and the impact this has on student behavior.

The research question remains:

*How might trauma informed teaching impact elementary age student success?*

Whether or not students have experienced trauma, elements of a trauma informed teacher, which will be discussed later in the chapter, are beneficial to all. Trauma informed teaching is important for students because many students who have experienced trauma have developed a distrust of adults. The adults in their lives haven't been predictable in the past. Students, in general, whether they have experienced trauma or not, will thrive in the classroom of the trauma informed teacher (Theis, 2022). What does it truly mean to be trauma informed? Next, this topic will be explored in detail.

## **What Does It Mean To Be Trauma Informed?**

This terminology has been used in different ways and can have various meanings. For purposes of this paper, definitions will be provided in context to the topic at hand. Trauma informed teaching starts with an understanding of how trauma can impact learning and behavior. With this approach, educators think about what student behavior may be telling them (Kaufman, 2022) Trauma-informed teachers reflect on their teaching practices to find ways that are more effective in supporting students impacted by trauma (Kaufman, 2022).

Some of the key pieces to trauma-informed teaching revolve around making simple changes to class structure and student interactions. Some of these strategies include: be mindful of your own emotions and manage your own feelings, expect student overreactions and provide time and space to calm down, normalize trauma responses, give students an opportunity to talk about their experiences, remind yourself that behavior is communication, make sure your teaching is culturally responsive, teach and model social-emotional skills, including positive behavior strategies, and communicate with others, including the students' families, school counselors, and other mental health specialists (Kaufman, 2022).

Trauma can be defined as “an emotional response to a terrible event” (American Psychological Association). Another definition is “the response to a deeply distressing or disturbing event that overwhelms an individual’s ability to cope, causes feelings of helplessness, diminishes their sense of self and their ability to feel a full range of emotions and experiences” (Integrated Listening Systems). According to the Center for Early Childhood Mental Health Consultation, the definition of trauma, rather than

naming types of trauma, describes the experience of trauma and highlights the factors that contribute to the perception of trauma. It is a unique individual experience, and not everyone impacted by trauma will react the same way. The Early Trauma Treatment Network states their definition of trauma as “an exceptional experience in which powerful and dangerous stimuli overwhelm a child’s capacity to regulate emotions” (Early Trauma Treatment Network, ND). It is clear that trauma is an experience that has adverse effects on the mind and body (Hope Women’s Center).

Another important term to define is “toxic stress”. This is the body’s response to lasting and serious stress, without enough support from a caregiver. When a child doesn’t get help for this extreme stress, the body and brain can be harmed. This type of stress results from exposure to things such as abuse and neglect (Center for Youth and Wellness). Exposure to toxic stress can have a major impact on a child’s social, emotional, cognitive, and academic growth (Blitz, et. al, 2016).

According to van der Kolk (2005), in the Adverse Childhood Experiences (ACE) study by Kaiser Permanente and the Centers for Disease Control and Prevention, 17,337 adult health maintenance organization (HMO) members responded to a questionnaire about adverse childhood experiences, including childhood abuse, neglect, and family dysfunction. Eleven percent reported having been emotionally abused as a child, 30.1% physical abuse, and 19.9% sexual abuse. Also, 23.5% reported being exposed to family alcohol abuse, 18.8% were exposed to mental illness, 12.5% witnessed domestic violence, and 4.9% reported family drug abuse. The ACE study showed that adverse childhood experiences are vastly more common than most would believe.



Trauma-informed education can be conceived from both a deficit perspective (e.g., what deficiencies or developmental struggles does this student face?) and a strengths perspective (e.g., what positive strengths does this student have to build upon for future success?) (Brunzell, et. al, 2016). It is important to make sure that the strengths perspective is always present.

Dr. Ross Greene says “Kids do well if they can” in his book, *Lost at School*. Greene says that kids with social, emotional, and behavior challenges lack important thinking skills. This carries the assumption that if a child could do well, he would do well. If a child is not doing well, it is due to a skill deficit. Adults need to figure out what skills a child is lacking so you can find out what is getting in the way of being successful at school (Greene, 2014). Greene states “the skills required for adaptive social, emotional, and behavioral functioning don’t come naturally to all kids...you also know that challenging behavior occurs when life demands skills a child lacks, and that there’s a whole spectrum of challenging behaviors that can occur” (2014, pg 25). Greene believes that there is a difference between interpreting lagging skills as excuses rather than explanations for behavior. The research question remains, “*how might trauma informed teaching impact elementary age student success?*” Important terms have been defined and a target audience of elementary teachers has been established. As previously stated, trauma informed teaching recognizes a skill deficit rather than labels behaviors as a choice for the child. In the next section, some other common themes of trauma informed teaching practices will be discussed further.

### **What do trauma informed teaching practices have in common?**

van der Kolk states, “ children learn to regulate their behavior by anticipating their caregivers’ responses to them” (2005). An important element of trauma informed teaching is adults who respond to behaviors in a consistent, regulated manner. Trauma informed teachers believe in behavior as a form of communication. They believe that challenging behavior is due to a skill deficit and the job of the adult is to help teach the skill to the student. They also believe in problem solving collaboratively with the child instead of the adult doing all the problem solving independently. They help children understand their behavior patterns that are causing difficulties. They have clearly defined roles for adults. Common language is also used by all the adults in the building. In later sections, specific trauma informed teaching practices will be explored.

According to Teach to Heal, the components of trauma responsive schools are: role definition, student skill sets, culture and environmental management, life space crisis intervention, the performance tracking system (PTS), and effective teaming (Theis, 2022). This is a child-centered paradigm that focuses on the perception and experience of the child to develop individualized solutions to maximize their academic and social emotional learning (Theis 2022).

### **How Does Trauma Affect the Body and Brain?**

The body and brain respond to trauma in many ways. The central nervous system (CNS) involves a vast array of structures and processes that control and impact the response to traumatic stress (Weiss, 2007). There is growing evidence that traumatic experiences may change the brain and the ways it responds to future stresses. Research indicates that the effects of trauma especially alter regions of the brain in the limbic

system. This is housed deep within the human brain and is also called the emotional brain (Long et. al., 2021). The limbic system directs the human body's emotional responses. Developmentally, young people's brains tend to be dominated by the limbic system. Adults sometimes say that children are driven by their emotions, which is actually correct (Long et. al., 2021). The limbic system includes the hippocampus, thalamus, and amygdala. It is the part of the brain most directly involved in regulating emotions and memories and contributes to the body's fight, flight, or freeze response (2021). It is important to note that the limbic system does not have access to words and language (2021).

### **Thalamus**

Sensations involved in a traumatic event enter the thalamus, which is a gateway for all sensory information (Weiss, 2007). Information is then assessed and determined to which other regions of the brain to be sent.

### **Hippocampus**

During a traumatic event, the thalamus also sends information to the hippocampus, which is the part of the brain that establishes memories of facts and details. There is evidence to suggest that the hippocampus of people impacted by trauma has decreased activation and lower levels of metabolism than in people who have not been exposed to trauma, especially during traumatic memories (Weiss, 2007). The hippocampus can actually shrink and cause neurons to atrophy, which may explain symptoms of avoidance and numbing of people with PTSD (post-traumatic stress disorder), which could include such things as difficulty recalling facts and details, fragmentation of memory, or total amnesia for trauma (Weiss, 2007).

## **Amygdala**

During a traumatic event, the thalamus also provides preliminary information to the amygdala, which determines the need to prepare for a threat. In individuals with PTSD, an overactive amygdala may be responsible for hypoarousal, which may include exaggerated startle responses, irritability, anger outburst, and hypervigilance (Weiss, 2007).

According to van der Kolk, childhood trauma, including abuse and neglect, is probably the most important public health challenge in the United States, a challenge that has the potential to be largely resolved by appropriate prevention and intervention (2005). In the next section, intervention will be discussed further.

## **Life Space Crisis Intervention**

In Life Space Crisis Intervention (LSCI), the impact of trauma on the brain is taught. The essence of trauma is that it is overwhelming, unbelievable, and unbearable (van der Kolk, 2014). Events that are commonly experienced as traumatic for a young person include: death of a family member, separation from loved ones, natural disaster, school shooting, physical or sexual abuse, domestic violence, community violence, systemic racism, displacement from the home, illness (or fear of illness), sudden or chronic loss of stability, routines, and sense of safety (Long et. al., 2021). At the national level, at least 1 in 10 children have experienced three or more ACEs (Adverse Childhood Experiences), and children of different races and ethnicities do not experience adversities equally. Nationally, 61 percent of black children and 51 percent of Hispanic children have experienced at least one adversity, compared with 40 percent of white children (Murphey & Sacks, 2018).

LSCI is a six- stage verbal intervention that can be used for young people during times of stress and crisis (Long, 2021 pg 89). LSCI gives adults a “cognitive roadmap for how to respond effectively during a stressful situation (89).

The time shortly after a crisis is a productive time for children to learn new skills and gain insights into behavior patterns of reacting to stressful situations. While this can be a difficult time for the adult who may have seen or responded to the crisis, for the child, oftentimes the realization that current behaviors are not working and emotional distress has resulted will allow them to be more receptive to change than they would be after a longer passage of time following a crisis (2021).

There are six stages to every LSCI. The first three stages work on diagnosis of the crisis and central issue, while the last three stages address outcome and goals (Long, 2021).

### **Stage 1: Drain Off**

In this stage, a child’s emotions are usually running high. The adult needs to convey soothing support and use active listening, identifying feeling words to help the child label their emotions. In some cases, this stage may only last a few minutes, but in others it may be a half-hour or longer. This stage ends when a child will use words rather than be dominated by emotions. If a child is not able to use words, the adult should not move on to the next stage (Long 2021).

### **Stage 2: Timeline**

In Stage 2, the child is able to explain what happened as they see it. The adult will find out what the child believes to be true. Although the adult may not agree with the child’s perception of reality, it is important to validate their feelings and allow the

child the time to tell their side of the story. The goal for the adult in this stage is to determine a clear timeline of events and understand the child's perceptions, thoughts, and feelings about an incident. The adult then needs to determine if the real issue is the incident or if there are some underlying issues that are the true incident. This stage can shift to Stage 3 when an adult has a clear understanding of the timeline and begins to understand what the true issue is for the child (Long 2021).

### **Stage 3: Central Issue**

In Stage 3, the adult is identifying a therapeutic goal. The adult is also identifying which intervention (there are six different intervention types in LSCI) to use going forward. In Stage 3, the adult will prepare the child to accept the insight that will be planted in Stage 4. It ends when the adult has determined the intervention to use and makes a statement to bridge to the next stage such as "This has been a hard day for you, but now that we know what the problem is, we can make a plan to solve it" (Long 2021).

### **Stage 4: Insight**

In Stage 4, the adult uses information collected in previous stages, particularly the Timeline, to reframe how the child feels and perceives the issue. In this stage, the adult should help the child work toward a plan to prevent this from happening again, however, it is important that the child is an active participant in coming up with solutions (Long 2021).

### **Stage 5: New Skills (Teach and Empower)**

In Stage 5, "adults help young people expand their social- emotional skills, rehearse new behaviors, accept consequences, accept challenges, and affirm benefits of

behavior change (Long 2021 pg. 117). This stage often includes role-playing or rehearsals of what the child might do if faced with the same or similar situation.

### **Stage 6: Transfer of Learning**

In this stage, the child is ready to resume their regular schedule. It is a good idea for the adult in this stage to contact the teacher who will be with them next to find out what the student will be expected to do when they return. The adult will then describe to the student what the learning environment looks and sounds like, and what they will do when they get there. Long states “As you end Stage 6, if the LSCI has been effective, emotional intensity has been reduced, events make more sense, the young person’s insight has changed, a plan for success has been established, the adult-child relationship was improved, and the child’s self-concept has been enhanced” (pg. 126).

Life Space Crisis Intervention is very effective as a way to process through difficult behaviors, however, it is not a one and done situation. Students need to be explicitly taught social and emotional skills needed to be successful in the classroom. The next section will explore this in detail.

### **Explicit Teaching of Skills**

How can explicitly teaching social-emotional skills to students help them be successful in the classroom? As stated previously, one of the themes of a trauma-informed classroom/school is common language. All the staff in the building should be using the same language when talking to students so that they hear the same message over and over. Consistency is very important. One example of this is the Performance Tracking System (PTS). In PTS, students with very challenging behavior are tracked on their performance of eight explicitly taught skills. The skills included are:

accepting directions, self regulation, area of designation, assignment completion, tone and volume, interactions, physical boundaries, and participation (Theis, 2022). More details about PTS will be provided in Chapter 3.

According to Ashdown and Bernard, (2011), the development of social-emotional competence is an important foundation for young children's later success and well-being. The Center on the Social Emotional Foundations for Early Learning (CSEFEL) defines social-emotional development as the developing capacity of the child from birth through 5 years of age to form close and secure adult and peer relationships; experience, regulate, and express emotions in socially and culturally appropriate ways; and explore the environment and learn (2011).

It is evident that students with or at high risk for emotional and behavioral difficulties often find it difficult to meet the social demands of school (Bierman & Sanders, 2021). School based interventions should include efforts to address the skill deficits that undermine their social-emotional functioning, as well as addressing the behaviors that impair classroom engagement and performance.

Research suggests that there is growing support for Tier 1 (classwide) interventions to promote social emotional learning, especially at the elementary level, but to date, there are few evidence-based social emotional learning programs used at a Tier 2 or 3 (for students with more challenging behavior) level (Bierman & Sanders, 2021).

Social-emotional learning has become much more commonly discussed in schools in recent years, in part due to the pandemic. One might wonder: what are possible counter-arguments to being trauma responsive? What possible reasoning would there be not to be trauma-responsive? Does that argument exist? As a matter of fact, it does. In



the next section, other possibilities as well as the reasons behind them will be explored in detail.

### **Counter-Arguments and Alternatives**

What are possible counter-arguments to trauma-responsive schools? What do those schools look like? Non-trauma responsive schools tend to look at students through a lens of compliance. “Consequence” is a word that will be heard frequently in a school that is not always considered trauma responsive. The belief is that difficult behavior can be punished away, which counteracts Ross Greene’s argument that kids do well if they can and instead, hold the belief that kids do well “if they want to”. Negative behaviors are looked at as a choice, rather than as a skill deficit. For negative behaviors, a consequence is enforced, and behavior is expected to be changed. The problem lies in the fact that the child may not have actually worked through the reasons behind the behavior and therefore the behavior will happen again. Although this could also happen in a trauma responsive school, students are given tools and interventions to help them through challenging behaviors, which can be helpful in, over time, improving behavior.

There are some other programs, such as PBIS (Positive Behavior Interventions and Supports) which have some elements of trauma-responsive schools, such as common language. PBIS also teaches skills such as how to manage behavior in different spaces in the building. What PBIS lacks is interventions when a challenging behavior occurs. The focus is on rewarding positive behavior and “ignoring” negative behavior. Programs such as this are beneficial in terms of reducing challenging behaviors in the first place, but lacking in terms of addressing the behaviors when they do occur. There are many

articles about the ineffectiveness of PBIS. The following are a few examples of arguments against it.

Several articles stated that the root of PBIS can be traced back to behaviorism (Knestrict, 2018). Behaviorism is a school of thought developed by B.F. Skinner in the early 1900s, which simply put, is a philosophy that people have no internal motivation or self-determination, so to change behavior, simply reward what you like and punish what you don't like. Students are not that simple, especially when their behavior is the result of trauma or a skill deficit, so this approach is lacking.

Another article compares a trauma informed approach to PBIS. In this article, it is stated that for students who have behavior problems that are the result of trauma, PBIS is not enough. Students need a nuanced approach. A trauma-informed system trains all teachers on the biology and physiology of trauma, as well as how to provide students with tools for self-regulation. Trauma-informed systems focus on relationship based efforts, replacement behaviors, and tools for self-control. PBIS can be a fine tool for many students, but when it comes to students who have experienced trauma, it is simply not enough (Knestrict, 2018).

Similarly, Bierman and Sanders point to the most common Tier 2 or 3 programs being Check In and Check Out and The Behavior Education Program. Both of these focus on reducing challenging behaviors in the classroom as well as office referrals. While these are important goals, they differ from trauma-responsive systems that focus on social-emotional learning competencies (2021). The research is there: students who have experienced trauma need explicitly taught social emotional learning skills in order to find success at school.

In terms of any arguments against trauma responsive schools, and trauma informed teaching, it is difficult to find any substantial research on how programs are not effective. As more and more students experience trauma, trauma responsiveness is more and more accepted and needed in schools.

## **Conclusion**

*How might trauma informed teaching impact elementary age student success?* In this chapter, this question was further addressed and explored. What it means to be a trauma-informed teacher was the first topic for discussion. The reader learned that being a trauma informed teacher means understanding that behavior is communication and that if a child could do well, they would do well. Behavior challenges come from a skill deficit, often from previous trauma the child has experienced. It is our job as adults to teach the skills to students so that they can be more successful in school. Next, the impact of trauma on the brain was explored. Traumatic events often change the brain permanently, particularly the limbic system. Then, a trauma responsive teaching practice was explored, called Life Space Crisis Intervention. Next, ways to specifically target students who communicate non-verbally were discussed. Then, explicit teaching of social emotional learning skills was explored, including the Performance Tracking System through Teach to Heal. This explicit teaching of skills will be further discussed in Chapter 3, as it is the major theme of the Capstone project relating to this paper. Trauma informed teaching recognizes that improving challenging behavior involves a need for skill building, and teachers need to explicitly teach students these skills. Finally, any counter arguments to trauma informed teaching were discussed. There is a significant lack of research arguing against trauma informed teaching. Many programs

that aren't directly trauma-informed, including PBIS, exist, and can be effective for many students, but students who have challenging behaviors as a result of trauma simply need more.

As presented at the end of this chapter, a main objective of trauma informed teaching is to explicitly teach the necessary social and emotional learning skills to students in order to help them be successful in school. The Capstone project associated with this paper, which revolves around professional development for teachers helping them to create a trauma-responsive classroom, which includes explicit teaching of skills, will be discussed at length in Chapter 3.

## CHAPTER 3

### Project Description

#### **Introduction**

The topic at hand is trauma informed teaching, and trauma responsive programs for elementary age students. This is an important topic for many reasons. As I stated in Chapter 2, at the national level, at least 1 in 10 children have experienced three or more ACEs (Adverse Childhood Experiences), and children of different races and ethnicities do not experience adversities equally. Nationally, 61 percent of black children and 51 percent of Hispanic children have experienced at least one adversity, compared with 40 percent of white children (Murphey & Sacks, 2018). Due to the global pandemic that all children have experienced over the past two years, I would only expect that this number has and will continue to increase. Now more than ever, I feel a deep importance to teachers being trauma informed.

For this Capstone Project, the research question is *“how might trauma informed teaching impact elementary age student success?”* In Chapter 1, I provided a rationale for the research question, including discussion of my personal and professional reasonings for the desire to complete this research project. In Chapter 2, I provided an overview of the literature that supports the importance of being a trauma informed teacher. This included some defined terms including trauma, trauma-informed teaching, and toxic stress. It also provided research surrounding what trauma responsive schools look like and what type of programs they use in support of trauma responsive teaching. Now, in Chapter 3, I will describe in detail the project I will complete. One of the important pieces to being a trauma informed teacher is to recognize that challenging

behavior is not a choice but rather the result of a skill deficit, and the ability as a teacher to explicitly teach skills needed to have success in school. My project will help teachers to have the tools to accomplish this task in their classrooms.

### **Project Description**

For this project, I have created professional development for teachers. The goal of this professional development is to help teachers create a trauma-responsive classroom. As a part of this professional development, they will learn about trauma informed teaching and trauma responsiveness, as well as why this is so important. They will also have tools to help them create this in their classroom. As I stated in Chapter 1, I believe that the two most important aspects of having a trauma-responsive classroom is to practice consistency and build relationships. The professional development as well as the sample lessons I've created all revolve around these two themes. This professional development includes sample lessons to teach the skills in the performance tracking system.

Performance Tracking System: Teach to Heal (PTS), is a toolkit for teachers to use to teach the skills that are measured in PTS. PTS is a trauma responsive behavior tracking system that assists students with significant and complex needs (Theis, 2022).

Danielle Theis, creator of PTS, writes,

Teach to heal has established student skill sets that encompass what is necessary to be successful in school. The application of these skills, at a tier one level, simplifies the expectations for kids and the classroom management language for adults. This consistency established through common language across classrooms, makes school a more predictable place for children who struggle in

adult managed places. The combination of predictability and regulatory practice allows students to maintain in the classroom and be engaged in learning which increases their academic performance. Tier II and III applications assist students in self-monitoring, gauging their impact on themselves and others, and increasing their capacity to be guided by adults. (Theis 2022)

After using PTS for the 2021-22 school year, I greatly believe in its importance and alignment with trauma responsive teaching. It encompasses many of the trauma-responsive practices I have already discussed in this paper including a child-centered, nurturance approach that has clearly defined roles, culture and environmental management, and student skills sets.

### **The Performance Tracking System (PTS)**

PTS was created by Danielle Theis as a trauma responsive multifaceted tool to effectively support student regulation, skill mastery, and engagement (Theis, 2022). Ms. Theis has many years of experience in children's mental health. The PTS assists students in self-monitoring, gauging their impact on themselves and others, and increasing their capacity to be guided by adults. There are eight targeted skills in PTS. They fall into three categories: respect of others, work behavior, and group participation (Theis, 2022). The skills are detailed below.

#### **Respect of Others**

**Tone and Volume:** This skill involves having a calm, comprehensible, appropriate volume and age appropriate pitch.

**Physical Boundaries:** This skill involves appropriate touch of self, others, and property, and maintaining and respecting physical space and personal property.

**Interactions:** This skill involves appropriate verbal and non-verbal communication and communicating needs and wants with age appropriate school language

### **Work Behavior**

**Assignment Completion:** This skill involves submitting work as assigned in a timely manner

### **Group Participation**

**Area of Designation:** This skill involves being in the assigned place at appropriate time or per staff direction

**Accepts Direction:** This skill involves following staff directions or redirection and accepting staff response in a timely manner

**Participation:** This skill involves being available and engaged in instruction or activity

**Self-Regulation:** This skill involves acknowledgment of self-escalation, advocating for needs, and having appropriate coping strategies without interrupting the education of others (Theis, 2022).

Within the PTS, there are two ways adults can assist students. One is by offering and normalizing self-time. Self-time is when students are needing time away from a task. It is not a “break”, but rather a time to refocus and regulate. Directed time is when an adult identifies a skill deficit and informs the student of a need for redirection “we are moving to directed time for \_\_\_\_\_(state the skill)” (Theis, 2022).

If a student is not able to respond to directed time and continues to show a skill deficit to a point where instruction can no longer occur for others, a teacher may then call



the behavior intervention team for support. The team will then assist students through a Life Space Crisis Intervention (LSCI) (Theis, 2022). Students will earn reward time based on low amounts of directed time.

The above eight skills need to be explicitly taught, as part of being a trauma responsive school. The lessons provided as part of the professional development will be part of the explicit teaching that teachers do at the beginning of the school year. While there are some lessons in place for each of these skills, more expansion is necessary for a wider range of students. I have decided to focus my work on four of the eight skills. While I could create something for all eight, there are four that are commonly used most often at the elementary level, according to data from our PTS database. The four skills that I will target more heavily are: self-regulation, accepting directions, area of designation, and interactions.

### **Setting**

Primarily, I expect these lessons to be utilized in an elementary setting, made available to both general education classroom teachers and special education teachers. My ideal plan would be for general education teachers to teach the lessons during their first two weeks of school when they are establishing classroom management expectations, and I would like to see special education teachers reinforce the lessons during their small group social skills/behavior regulation teaching sessions. I would be willing to make the lessons available to any teacher who asked for them, but they will be targeted toward elementary teachers and students. Specially, the age range for which these lessons were ideally created is grades 1-3. They can be used, and modified, at the kindergarten level as well as for grades 4-5, but the target range is grades 1-3. The

reasoning behind this is those are the age levels where students are really establishing how to be in school. In kindergarten, they are still learning the very basics of how to be a student, and by upper elementary they are pretty well-established in this area, but of course skill building in social emotional education is needed at all levels, even middle and high school. These particular lessons may not be as developmentally appropriate for older students, but they could be adapted to meet the needs of those populations as well.

### **Timeline**

This professional development has been created in the summer. I will pilot its use in the Fall of 2022. I have been working on this Capstone Project for about nine months so far, including initial interest in trauma-informed teaching, attending training related to trauma responsiveness, and doing initial research. The main focus of my professional development is to help teachers begin immediately at the beginning of the school year, creating a trauma-responsive classroom. Teachers know that the first 20 days of school is an important time to set the framework for the rest of the school year. Fisher and Frey state, the “first month of school is approximately 20 instructional days in length, and holds both promise and apprehension. As teachers we approach the first month as the time when we can get many of the logistical and procedural kinks worked out with our new students” (2011). Fisher and Frey continue, “the first 20 days of school is time when you systematically put into place the procedures on which you will rely throughout the year....And a few years in the classroom has taught all of us that simply posting and reviewing a set of rules isn’t enough. We have to embody these rules with actions that reinforce the principles we value” (2011). Ideally, teaching these lessons during the first 20 days, and then reinforcing them at times that are needed throughout the

school year, such as after returning from a break or when the teacher notices that the students are having difficulty with a skill area, will help the students to be successful during the school year.

### **Assessment**

I have created a google classroom for the teachers who have attended my professional development session. I have some discussion questions posted in it, and I will periodically be posting more questions for teacher response throughout the 2022-23 school year. I will provide a second professional development mid-year in which we will heavily discuss how things are going and what tools are still needed for teachers. From a student perspective, I have chosen three students who utilize the full extent of the PTS (including daily behavior tracking) and I will work with their classroom teachers to monitor their data. Their teachers will be utilizing my google classroom, so I will be able to work with those teachers to look at various aspects of student success in their classroom (time spent in class as opposed to the previous school year, academic data, teacher observations, and more). I will be continually adding content to my google classroom throughout the school year based on student needs.

### **Conclusion**

The research question remains: *how might trauma informed teaching impact elementary age student success?* I have learned that teachers need to work to become trauma informed. How might they do this? For one, they must learn about the impact of trauma on the body and brain. Teachers need to have an understanding of the ACEs (Adverse Childhood Experiences) their students have experienced or may be at higher risk of experiencing. They must understand that trauma- responsive schools have clearly

defined roles for the adults and they must understand what their role is in this process. They must be clear and consistent with their expectations for students, providing routines, schedules, and high quality lessons. They must provide high expectations for students, but meet the students at their level and help them rise to higher levels of success. Also, they must normalize self-time and self-regulation practices in their classroom so that students don't feel singled out when they need assistance with these skills. In Chapter 1, I gave an overview of the topic at hand, including the personal and professional relevance to me. In Chapter 2, I reviewed literature surrounding the topic, including important aspects of being a trauma responsive teacher, supported by research. In Chapter 3, I provided an overview of my Capstone Project, which includes professional development for teachers with ongoing support, including sample lessons for social-emotional learning. Next, in Chapter 4, I will provide a Conclusion to my project.

## CHAPTER 4

### Conclusion

For this Capstone Project, the research question is *“how might trauma informed teaching impact elementary age student success?”* In Chapter 1, I provided a rationale for the research question, including discussion of my personal and professional reasonings for the desire to complete this research project. In Chapter 2, I provided an overview of the literature that supports the importance of being a trauma informed teacher. This included some defined terms including trauma, trauma-informed teaching, and toxic stress. It also provided research surrounding what trauma responsive schools look like and what type of programs they use in support of trauma responsive teaching. In Chapter 3, I described in detail the project I completed. One of the important pieces to being a trauma informed teacher is to recognize that challenging behavior is not a choice but rather the result of a skill deficit, and the ability as a teacher to explicitly teach skills needed to have success in school. My project will help teachers to have the tools to accomplish this task in their classrooms. In Chapter 4, I will provide an overview of how my project came together and provide a conclusion to the paper.

### **Revisiting the Literature Review**

I learned so much about trauma and trauma-informed teaching from completing the literature review. While it was incredibly time-consuming, I really enjoyed doing the research and found it difficult to ever consider my research complete. I know that I am going to continue reading and researching on this topic for the rest of my professional career. The following are a few of the key takeaways from my literature review.

## **1. A Trauma-Informed Teacher Looks at Behavior as a Form of Communication**

Trauma informed teaching starts with an understanding of how trauma can impact learning and behavior. With this approach, educators think about what student behavior may be telling them (Kaufman, 2022) Trauma-informed teachers reflect on their teaching practices to find ways that are more effective in supporting students impacted by trauma (Kaufman, 2022).

Some of the key pieces to trauma-informed teaching revolve around making simple changes to class structure and student interactions. Some of these strategies include: be mindful of your own emotions and manage your own feelings, expect student overreactions and provide time and space to calm down, normalize trauma responses, give students an opportunity to talk about their experiences, remind yourself that behavior is communication, make sure your teaching is culturally responsive, teach and model social-emotional skills, including positive behavior strategies, and communicate with others, including the students' families, school counselors, and other mental health specialists (Kaufman, 2022).

## **2. Trauma Changes the Brain**

The body and brain respond to trauma in many ways. The central nervous system (CNS) involves a vast array of structures and processes that control and impact the response to traumatic stress (Weiss, 2007). There is growing evidence that traumatic experiences may change the brain and the ways it responds to future stresses. Research indicates that the effects of trauma especially alter regions of the brain in the limbic system. This is housed deep within the human brain and is also called the emotional

brain (Long et. al., 2021). The limbic system directs the human body's emotional responses. Developmentally, young people's brains tend to be dominated by the limbic system. Adults sometimes say that children are driven by their emotions, which is actually correct (Long et. al., 2021). The limbic system includes the hippocampus, thalamus, and amygdala. It is the part of the brain most directly involved in regulating emotions and memories and contributes to the body's fight, flight, or freeze response (2021). It is important to note that the limbic system does not have access to words and language (2021).

### **3. Life Space Crisis Intervention Is a Powerful Tool for Teachers**

LSCI is a six- stage verbal intervention that can be used for young people during times of stress and crisis (Long, 2021 pg 89). LSCI gives adults a "cognitive roadmap for how to respond effectively during a stressful situation (89).

The time shortly after a crisis is a productive time for children to learn new skills and gain insights into behavior patterns of reacting to stressful situations. While this can be a difficult time for the adult who may have seen or responded to the crisis, for the child, oftentimes the realization that current behaviors are not working and emotional distress has resulted will allow them to be more receptive to change than they would be after a longer passage of time following a crisis (2021).

There are six stages to every LSCI. The first three stages work on diagnosis of the crisis and central issue, while the last three stages address outcome and goals (Long, 2021).

#### **4. Social Emotional Skills Need to Be Explicitly Taught**

According to Ashdown and Bernard, (2011), the development of social-emotional competence is an important foundation for young children's later success and well-being. The Center on the Social Emotional Foundations for Early Learning (CSEFEL) defines social-emotional development as the developing capacity of the child from birth through 5 years of age to form close and secure adult and peer relationships; experience, regulate, and express emotions in socially and culturally appropriate ways; and explore the environment and learn (2011).

It is evident that students with or at high risk for emotional and behavioral difficulties often find it difficult to meet the social demands of school (Bierman & Sanders, 2021). School based interventions should include efforts to address the skill deficits that undermine their social-emotional functioning, as well as addressing the behaviors that impair classroom engagement and performance. These and other themes were major components of my literature review.

#### **Major Learnings**

I learned a great, great deal from completing this paper and project. When I originally set out to do the project, I planned on my focus being lessons for students. As I discussed my ideas with others, I realized that, as I stated in Chapter 1, the two really important pieces that I believe in for being a trauma-informed teacher are building relationships and consistency in the classroom. I decided that my focus needed to be on those two aspects more than anything. I want teachers to always be thinking about those two items when teaching social emotional skills. How does this build consistency for my students? How does it build relationships and community? So, my focus shifted to be



more professional development focused for teachers, with examples of lessons as a secondary focus. What I now have is a google classroom full of resources for teachers, that I plan to build on as the year goes on. My professional development will occur in two pieces throughout the school year, and I will continue to add resources into the google classroom library. If teachers use what I already have, they will have some powerful resources to start their first 20 days of school, I believe.

While doing this project, I struggled greatly with imposter syndrome, which is defined as a belief in your own inadequacy and incompetence, despite evidence to the contrary (Wilding, 2022). I asked myself often, “Do I really have any kind of experience that will help teachers? Who am I to tell them what they should do in their classrooms? Why would they listen to me? Will any of this actually help my students heal from trauma?” What I learned from all this is, I have a true passion for trauma-informed teaching, and I have ever since I first went through Life Space Crisis Intervention training twelve years ago, at the very beginning of my career. Am I an expert? Maybe not. But do I have the passion to help my students and fellow teachers, and have I learned things over the years that are valuable, that I truly have seen help students be successful? Yes. This truly has been a passion project for me, and I feel like, although I completed it for the purpose of this course, it’s really only the beginning as far as what I can do with it and where I can take it in the future.

### **Limitations**

While I am happy with my project and feel it is going to be beneficial for the elementary teachers in my district, there are still improvements I’d like to make in the future. First, I would like to use some actual photos and videos of students at our school.

I would like to have video models of the skills. I chose not to use photos/videos of actual students for the purposes of this initial project due to confidentiality, but this is something I'd like to explore in the future when the project is shared only in my district. If I still wasn't able to do this, I'd like to make or find videos of other children practicing the skills and make it part of my project. The second improvement/expansion idea I have for the project is to create a character for each skill- for example "This is Regulation Reggie. He knows how to stay regulated at school." I'd like to draw out the character and write/illustrate a story to go with the character. The reason I didn't include this idea initially is that unfortunately, it came to me too late in the process. I am very interested in doing this in the future, however. Also, I would like to expand on the lessons and resources I have for teachers. I want to go into the first 20 days really hitting these skills hard in hopes of a successful year for the students and teachers, and I believe I have created a lot of tools to do so, but I know that more will be needed throughout the school year. Finally, I hope to expand resources for students who communicate non-verbally, as well as for English Language Learners (ELLs) In my school, the population of students who are ELLs are approximately 25%. While I have some modifications in place for them, especially a lot of visual supports for the sample lessons and definitions of terms, I would like to collaborate with an ELL teacher in my school to expand this support.

### **Future Research and Projects**

It was difficult to find research suggesting how students who communicate non-verbally can process trauma responses. I would like to continue to look for research for this population of students. I worked with students who communicate in other ways than through typical speech for eight years, and I would like to find more to support this

population of students. I also hope that I can expand my professional development into possibly three sessions for future years, at varying points of the school year. I'd like to find a population of teachers who would be interested in individual coaching sessions as well. We have an instructional coach for teachers at our school and my dream job would be to be an instructional coach, but geared toward behavior, social emotional learning and trauma informed teaching. I would love to expand this into training other teachers on a regular basis, as a part of my job. Right now, I don't feel I have enough resources to do this, but I plan to continue researching and working on creating and adding resources to my google classroom until I do.

### **Communicating the Results**

My first hope is to share my results during a professional development session during back to school week. Then, I hope classroom teachers will access my google classroom and use what I've built for the first 20 days of school and I have a few teachers who will pilot this use to the full extent. I hope they will teach the introductory lessons and utilize the resources I've created and compiled for them. My hope beyond that is for the teachers to ask questions and give feedback on how this worked for them, so that I can improve it in the future. I plan to use my google classroom to communicate with teachers throughout the year to talk about the results we are seeing from utilizing the tools I've created for them and for our students. By the end of the year, I'd love to create a third professional development session to further communicate results and discuss what is still needed to improve, as of course this is a never ending process.

## **Benefits to the Profession**

I do believe that what I've created is going to be a benefit to teachers. When I attended Life Space Crisis Intervention training twelve years ago, it was life-altering. It has been the framework I've utilized in my career ever since. I've always done my best to view my students through a nurturance lens and to most of all consider their perspective and what they believe is their truth, even when it doesn't match my perception of what has happened. That training is usually five full days in the summer, and for that reason and others, it isn't something that all teachers can do. My hope is that by spending two hours of hands on time (one hour per professional development session) along with an ongoing google classroom of support, I can help change the way teachers view communicating with their students. I believe that my resources will help teachers reframe their thinking and be able to have more confidence teaching much needed social-emotional skills to their students. I also believe that by creating more consistency among when, why, and how these skills are taught, students will feel that school is a place that feels good.

Throughout this process, one question that has come about for me is "what do my students need to heal and how does my work assist them in that process?" This is such a difficult question to answer and a huge part of the imposter syndrome I experienced as I completed this work. It was late in this process when I discovered the work of Dr. Shawn Ginwright, which I regret, because reading his work provided a lot of insight into how I can truly help my students heal. There were two important takeaways for me from reading his work that I'd like to summarize now.

The first important takeaway from Ginwright is that people are more than their trauma, which of course I know, but I need to make sure this is always emphasized in my work. He stated that trauma-informed care can sometimes focus only on the harm that someone has experienced, and it can create “blind spots in our efforts to support young people” (2018). This is not something I would never want to perpetuate with my students. I will strive never to look at them through a trauma only lens, and always focus on the whole child. I feel that I already do this, but it is incredibly important to keep this at the forefront of my mind, as well as to communicate to any teachers I work with the importance of never defining a child by their trauma, and always believing in the child’s ability to be seen separately from any incidents that may have occurred in the past.

A second important takeaway from his work for me was that “a healing centered approach to addressing trauma requires a different question that moves beyond ‘what happened to you’ to ‘what’s right with you’ and views those exposed to trauma as agents in the creation of their own well-being rather than victims of traumatic events” (2018). Wow. I can’t think of much else that is more important for children than to know that so much is right with them. As a result of reading his work, I created some additional resources called “Well Being Work” for my google classroom. This focuses on students understanding all the aspects of themselves that are unique and special. I am definitely going to be adding to this as the year goes on. I think if I had learned of Ginwright’s work earlier on in this process, my research and project would have gone in a somewhat different direction, but this just reiterates my point that this work is ongoing and constantly evolving.

## **Conclusion**

Trauma-informed teaching is beneficial to all students, whether they have experienced trauma or not. Building relationships/community and creating consistency are two of the most important aspects of a trauma-responsive classroom. Many times, behavior that seems challenging in a classroom is not due to a choice, but rather a skill deficit. My project attempts to address all of these statements and helps teachers to understand them as well, and reframe their thinking about trauma and behavior, if needed. My greatest hope is that by helping teachers become more trauma-informed and creating trauma-responsive classrooms, ALL students will have a more positive experience in school. I desperately want school to be a safe place for students, that is somewhere they truly want to be. While my work in this area feels like it is just beginning, I feel it is an important start to the process, and I'm committed to seeing it forward as far as I possibly can.

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