

From under-the-radar to understood?

Using Trauma-informed care to identify & support at-risk students

Dr. Allison Sampson-Jackson, LCSW, LICSW, CSOTP
Integration Solutions, Inc.



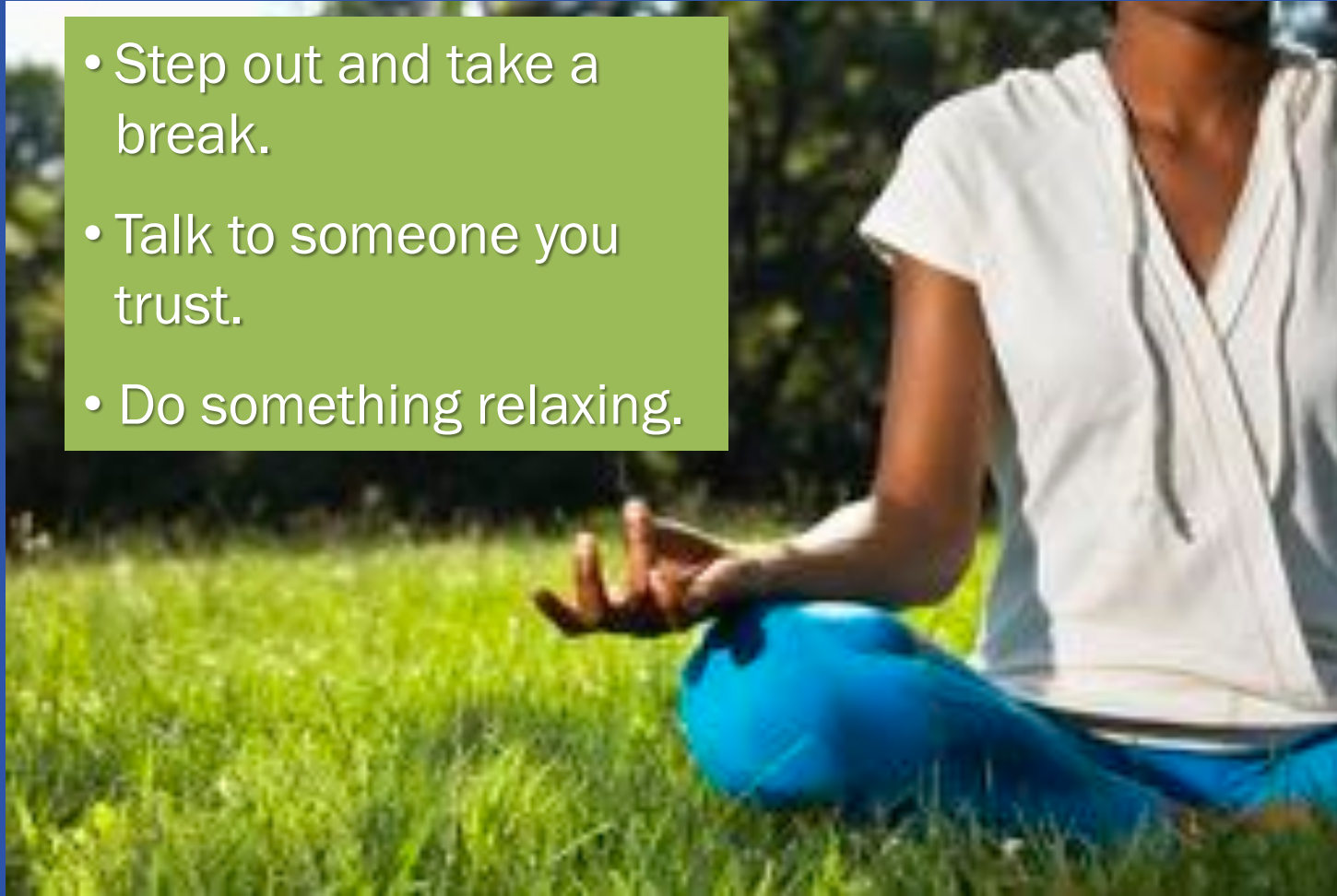
The Rose that Grew Out Of Concrete

- Tupac



Self-Care Alert!

- Step out and take a break.
- Talk to someone you trust.
- Do something relaxing.



**SO WE DECIDED AT SOME POINT TO BECOME
INVOLVED IN EDUCATING CHILDREN ...**

What I thought I was going to do when I started my role in education ...



<http://aplusphysics.com/flux/aplusphysics/teaching-students-to-teach-themselves/>



<https://101clipart.com/teacher-teaching-students-clipart/>

And then we started and some days ...



<https://www.cartoonstock.com>



So why did it go this way

What we know about millennials (and likely Gen Z) and how they want to be taught ...

- Actively using their eyes, ears, and hands
- Shorter attention span
- Want less lecture
- More collaboration with peers
- Information needs to be relevant (why should it matter to me?)
- Less authoritarian approach
- Want flexibility
- Want the social emotional rationale behind what you are saying
- Laid back environment
- Minimum pressure and stress
- Be allowed to express their creativity
- STRIVE ON PERSONAL RELATIONSHIPS
- Want to be connected to on a personal level

WHEN YOUTH WERE ASKED::

What do you need at school to make learning better? In other words, what would make you look forward to getting up and going to school each day?

- Beyond Consequences Institute Survey (Heather Forbes)
 - 1st to 12th grade
- Mostly students who are not responsive to traditional teaching practices

Survey says:

- 14% decrease level of stress and overwhelm
- 12% improvements in types of teachers and teacher-student relationships
- 10% importance of positive peer relationships
- 10% included word “fun”

What we are learning about discipline and engagement for different youth ...

Theory 1: Kids do well when they want to

Theory 2: Kids do well when they can

We are moving to understand via neuroscience, trauma informed care, and resilience research that theory number 2 is more accurate

....

“Where there is a skill there is a way” ... Dr. Stuart Ablon

From the work of Dr. Ross Greene in Lost at School

What we know about kids who are challenging

The three areas of growth and need for youth who are challenging:

- **Problem Solving**
- **Flexibility**
- **Frustration Tolerance**

Things not taught well by consequences and tradition discipline approaches

- Based on TedTalk **Dr. Stuart Ablon**, Director of the Think: Kids program in the Department of Psychiatry at MGH, describes the general tenets of a model of care called Collaborative Problem Solving, which was originated by Dr. Ross Greene in his book The Explosive Child.

And then there is trauma ...

The need:



1 Billion children experience violence annually.

At Least 1 in 7 children experienced abuse or neglect in the last year in U.S.



**STOP
ICES**

violence abuse suicide crime
war murder assault disaster
sexual abuse family violence

TRAUMA

fear terror shame guilt
nervous haunting panic
avoidance disconnected
numbness powerlessness
normal reactions to abnormal events

There is healing and hope
after trauma. Ask for help.



Effects of Stress On Your Health

Toxic Stress

Poor Health



Defining Trauma

Individual trauma results 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.

- SAMHSA definition 2014

Exposure to Violence in Childhood

46 million of 76 million children
are exposed to violence, crime and abuse each
year

Finkelhor, D., et al. (2010). Trends in childhood violence and abuse exposure: evidence from 2 national surveys. *Archives of Pediatric and Adolescent Medicine*, 164(3), 238–242.



- Alcoholism and alcohol abuse
- Chronic obstructive pulmonary disease (COPD)
- Depression
- Fetal death
- Health-related quality of life
- Illicit drug use
- Ischemic heart disease (IHD)
- Liver disease
- Risk for intimate partner violence
- Multiple sexual partners
- Sexually transmitted diseases (STDs)
- Smoking
- Suicide attempts
- Unintended pregnancies
- Early initiation of smoking
- Early initiation of sexual activity
- Adolescent pregnancy



Shift from an ACE Score of 0 to 4 Population Health

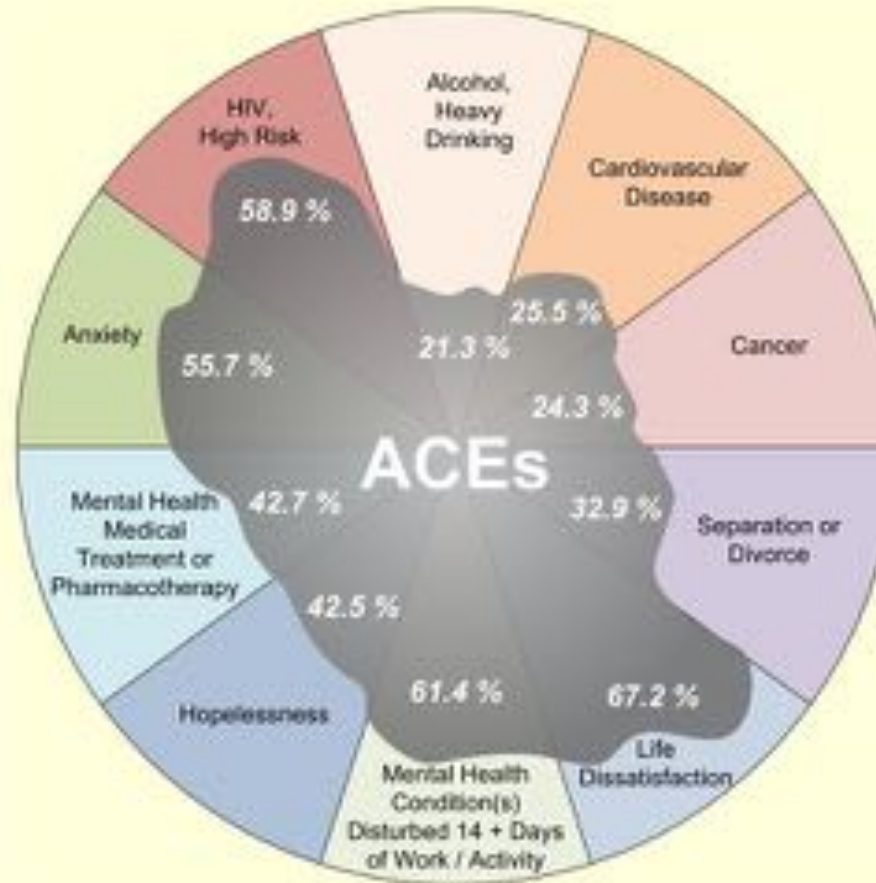
- **242% more likely to smoke**
- **222% more likely to become obese**
- **357% more likely to experience depression**
- **443% more likely to use illicit drugs**
- **1133% more likely to use injected drugs**
- **298% more likely to contract an STD**
- **1525% more likely to attempt suicide**
- **555% more likely to develop alcoholism**



POPULATION ATTRIBUTABLE RISK

A large portion of many health, safety and prosperity conditions is attributable to Adverse Childhood Experience.

ACE reduction reliably predicts a decrease in all of these conditions simultaneously.



AND THERE IS ENVIRONMENTAL TRAUMA ...



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2016 NASW NATIONAL CONFERENCE

**JUNE 12-15, 2016
WASHINGTON, DC**



Developing Trauma Informed Schools

Marleen Wong, Ph.D. LCSW

**Senior Associate Dean and Clinical
Professor**

University of Southern California

USC School of Social Work

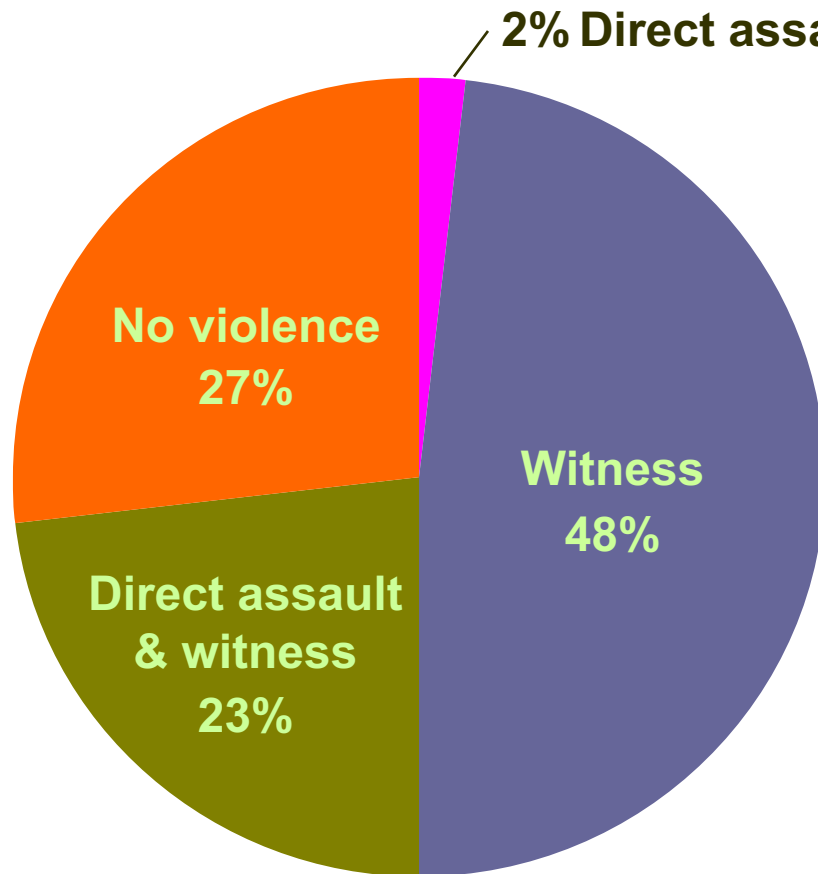
**Principal Investigator,
USC/LAUSD/RAND/UCLA**

Trauma Services Adaptation Center

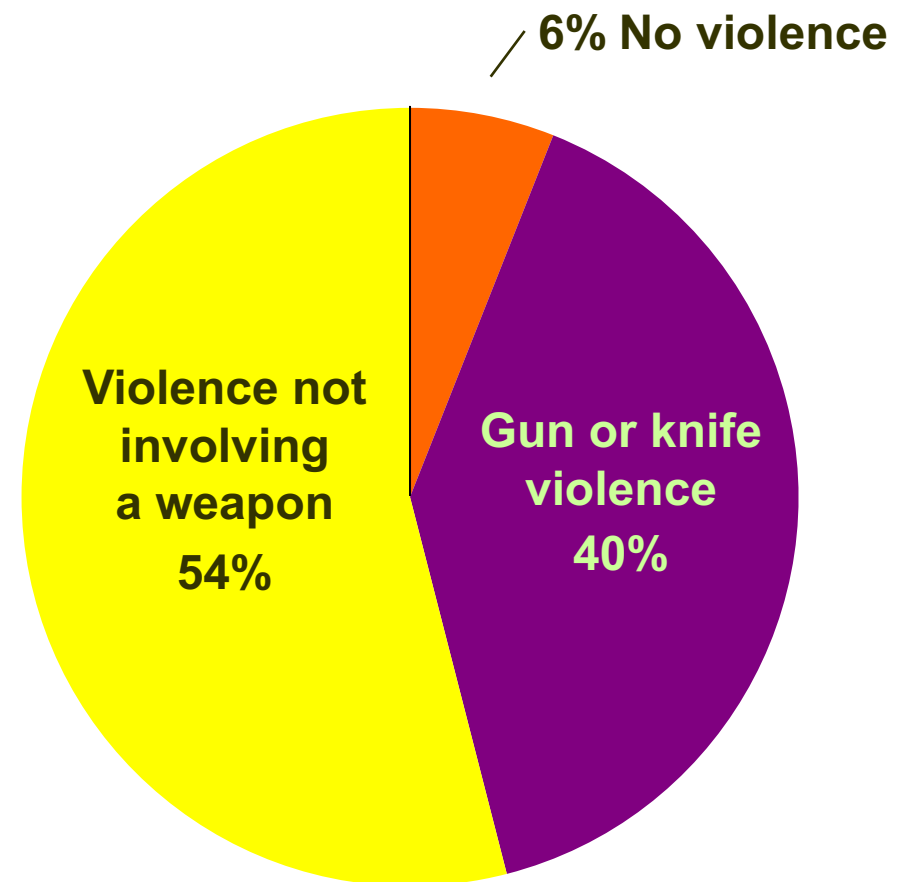
**for Resilience Hope and Wellness in
Schools and Communities**

National Child Traumatic Stress Network

A Startling Number of Students Are Exposed to Violence

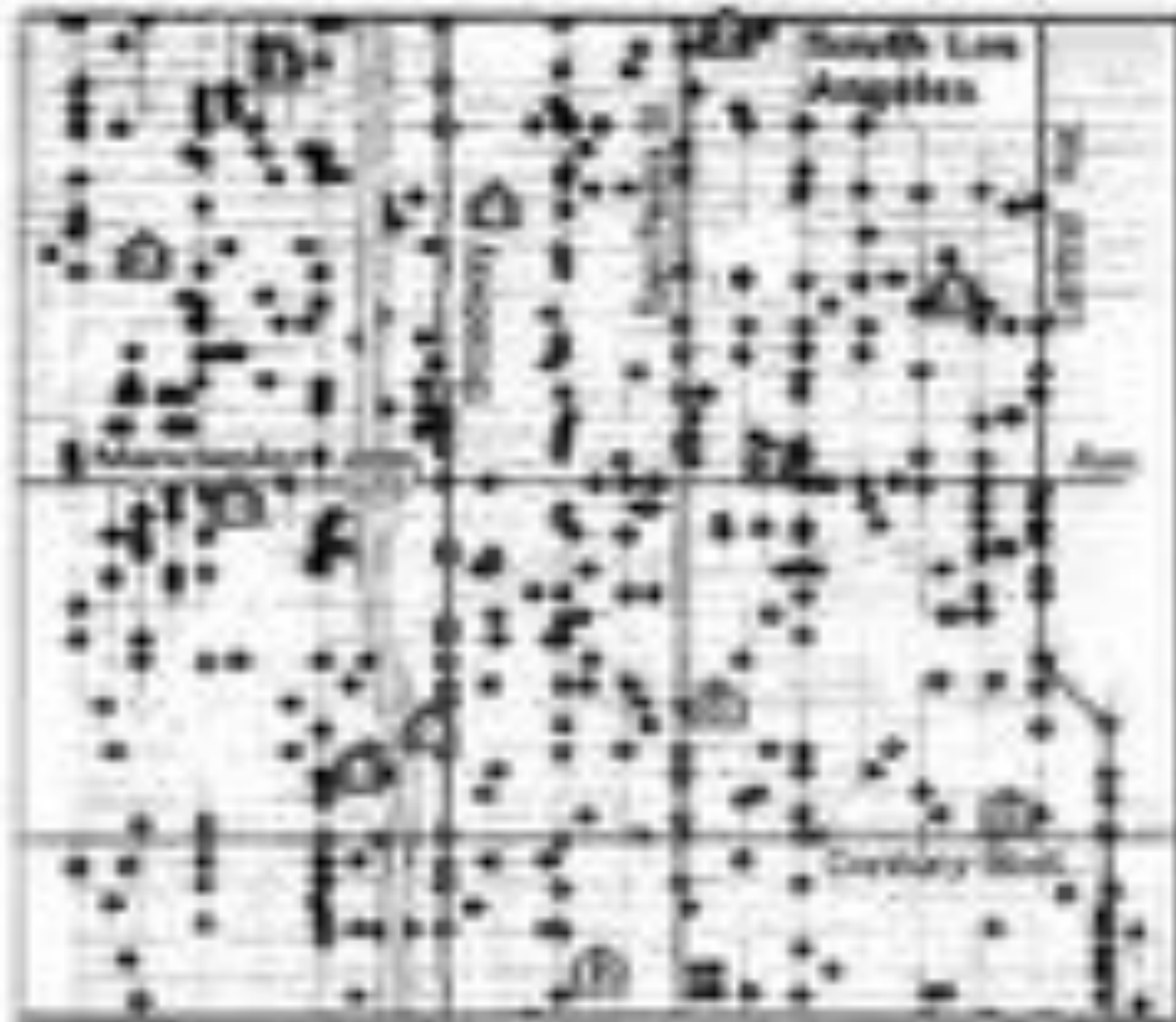


**National Survey of
Adolescents
1995**



**The LA Unified School District
6th-Grade Students, 2004**





* Quantities of 0.75
 Marleen Wong PhD University of Southern California
 Southern Los Angeles Police Department, U.S. Criminal Statistics, 1994



IT CHANGES THE WAY THE BRAIN WORKS



Mechanisms by Which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan

Mirror Neurons

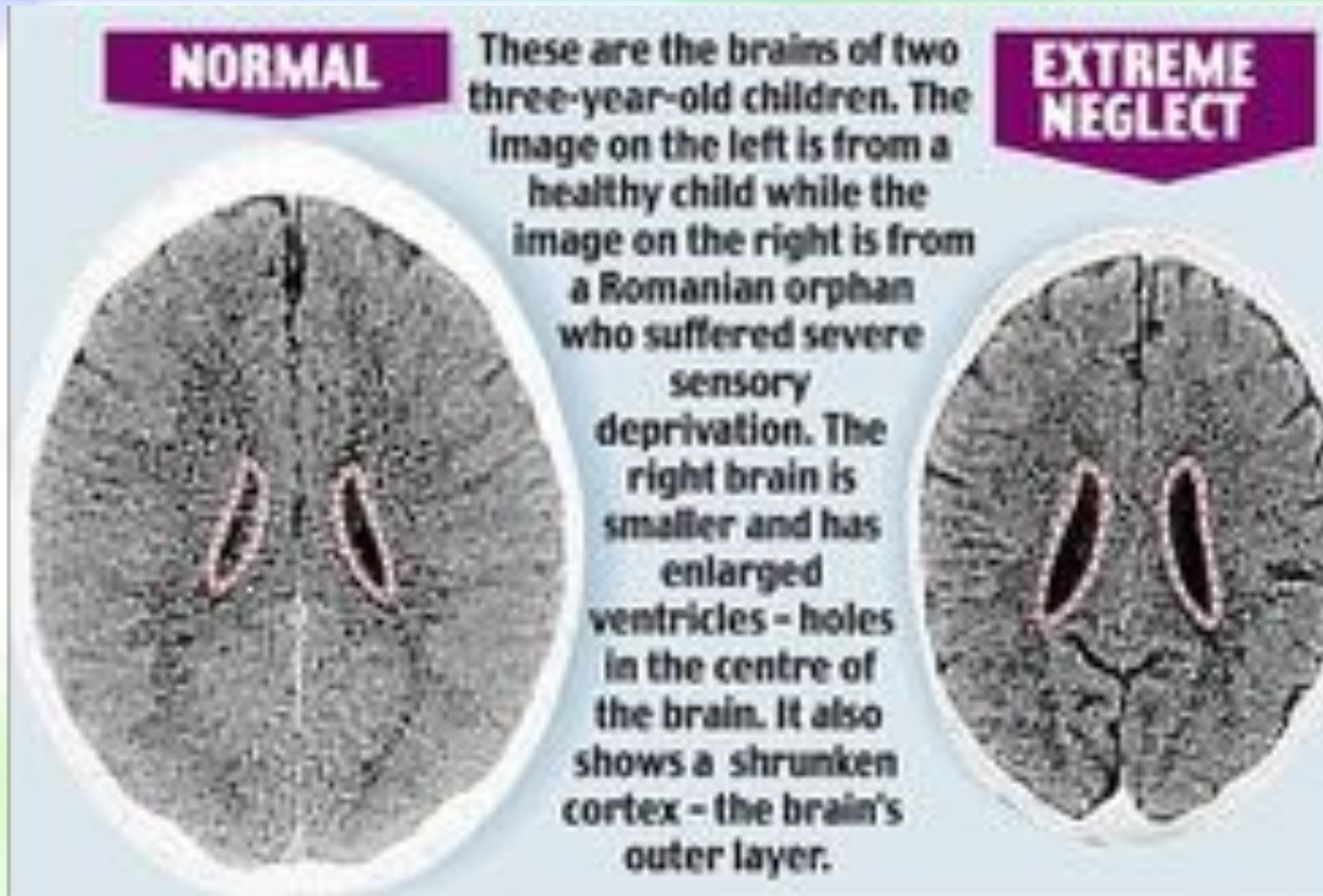
A **mirror neuron** is a neuron that fires both when an animal acts and when the animal observes the same action performed by another.

Thus, the neuron "mirrors" the behavior of the other, as though the observer were itself acting

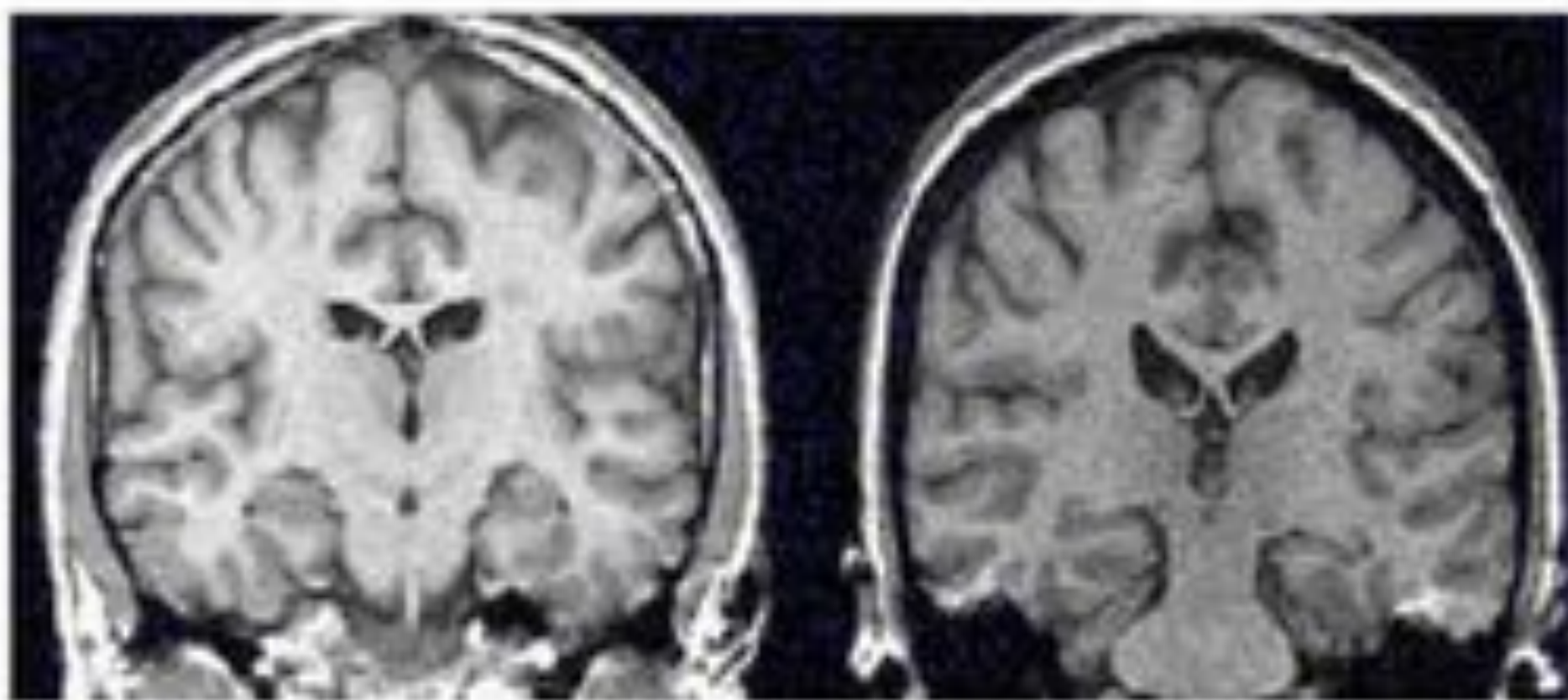
Brains mirroring Social Experience



Relationship Poverty



PTSD IS A REAL PHYSICAL INJURY



REGULAR

PTSD

NOT A SOCIAL OR POLITICAL OPINION.

Handy Model

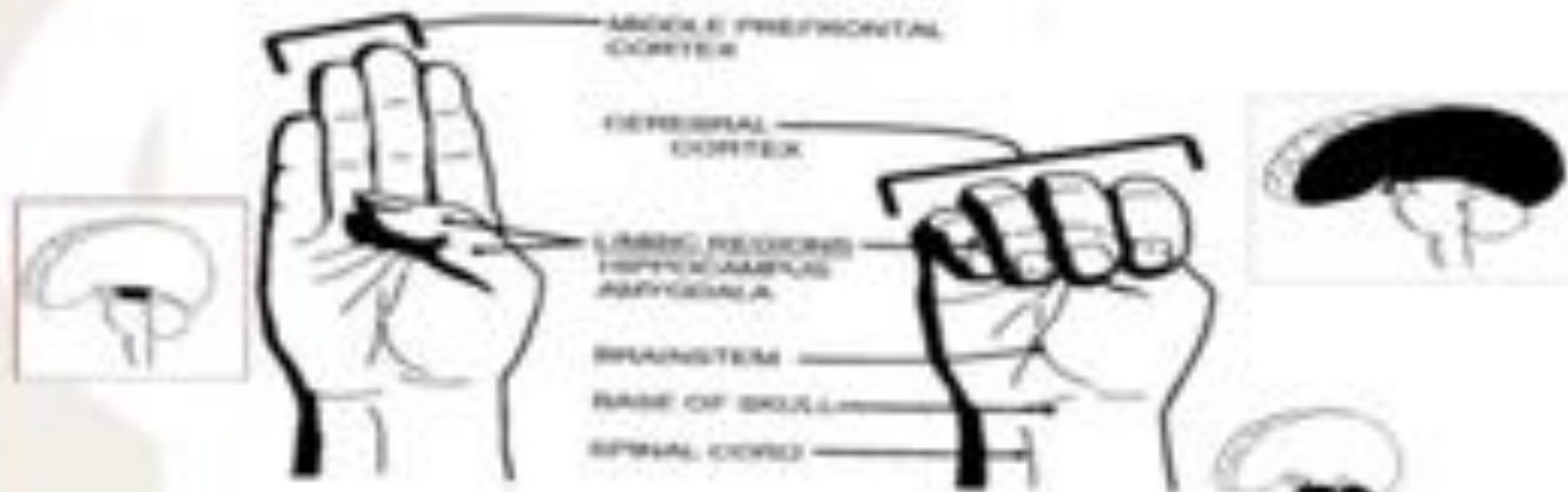
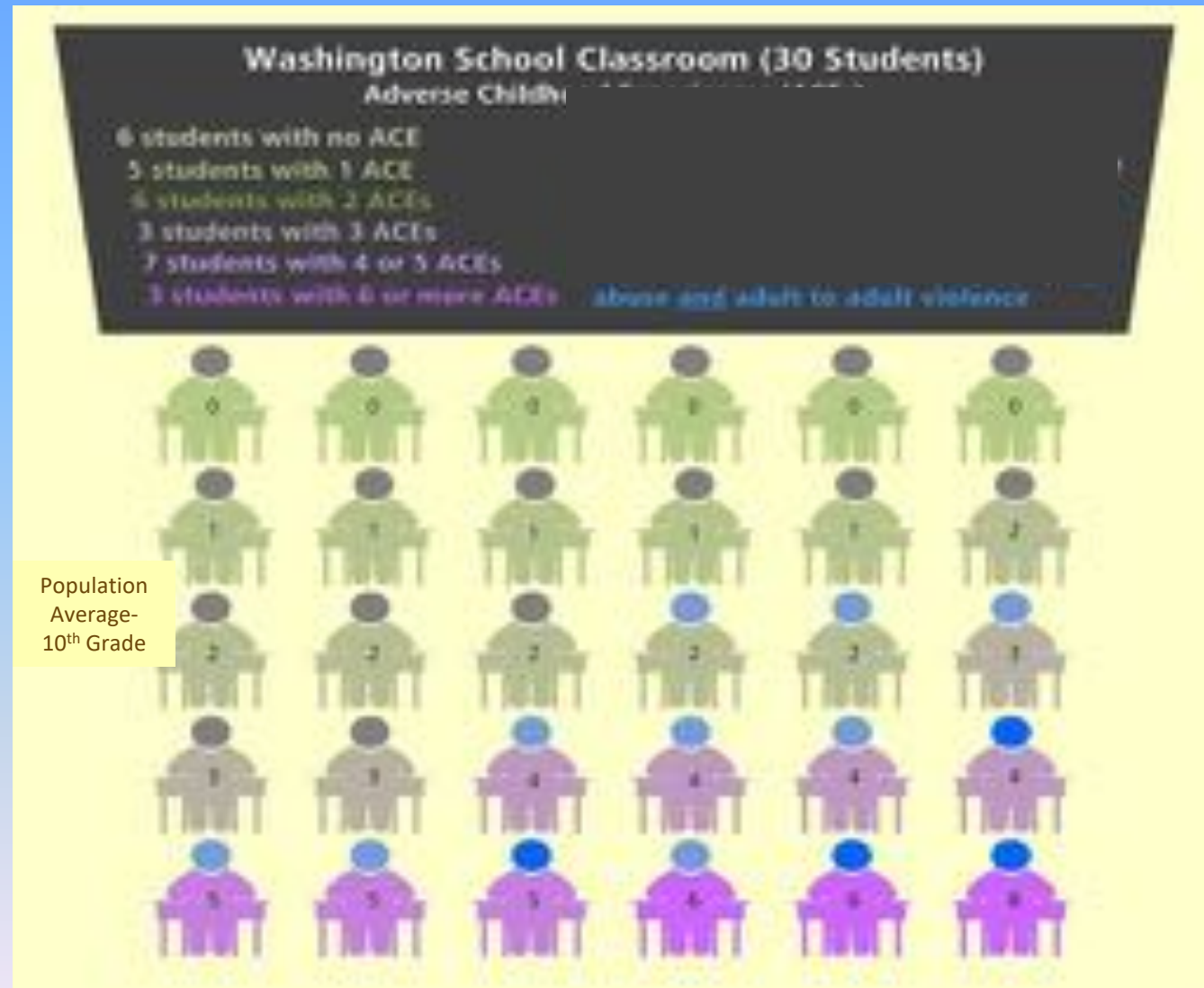


Figure 14.1. The brain in the palm of the hand. This is a "handy model" that depicts the major regions of the brain: cerebral cortex in the fingers, limbic area in the thumb, and brainstem in the palm. The spinal cord is represented in the wrist. Please see text for explanation. Copyright © 2004 by Mind Your Brain, Inc. Used with permission by Daniel J. Siegel, M.D., from *The Developing Mind: How Relationships and the Brain Foster to Shape Who We Are* (2001).

And it changes the dynamics of our classrooms ...



Chasing Behaviors

Agitation

Hopelessness

Intrusive Memories
Nightmares

Insomnia

Poor Impulse
Control

Defiance

**Traumatic
Event**

Numbing

Shame & Self-
Hatred

Depression

Panic Attacks

Dissociation

Somatic Symptoms

Withdrawal

Self-
Destructive
Behavior

Substance Abuse

Eating
Disorders

Deep Breath ...

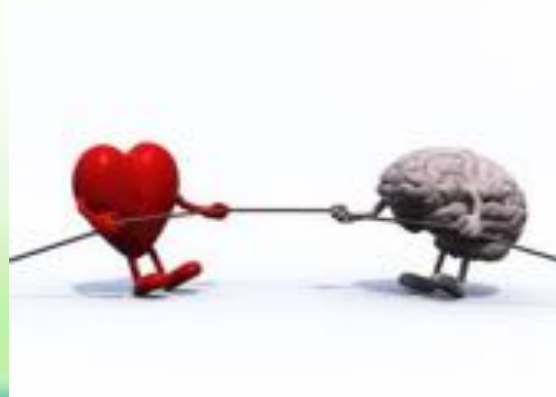
Makes sense why you are tired ...



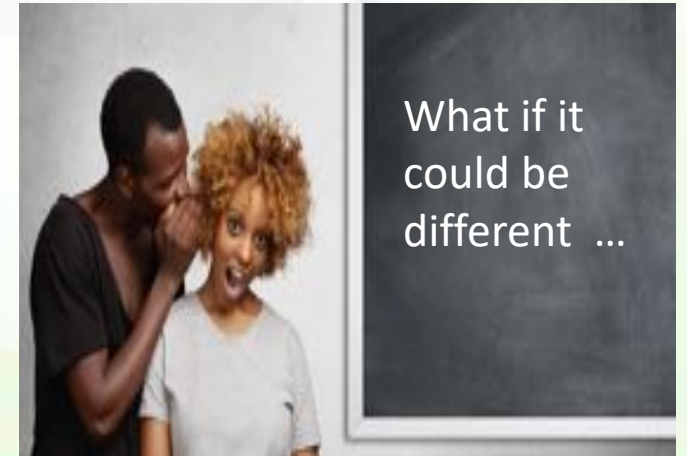
VALIDATION MOMENT ...

**IF YOU FEEL LIKE THIS ITS BECAUSE TODAY
EDUCATING OUR YOUTH FEELS LIKE THIS ...**

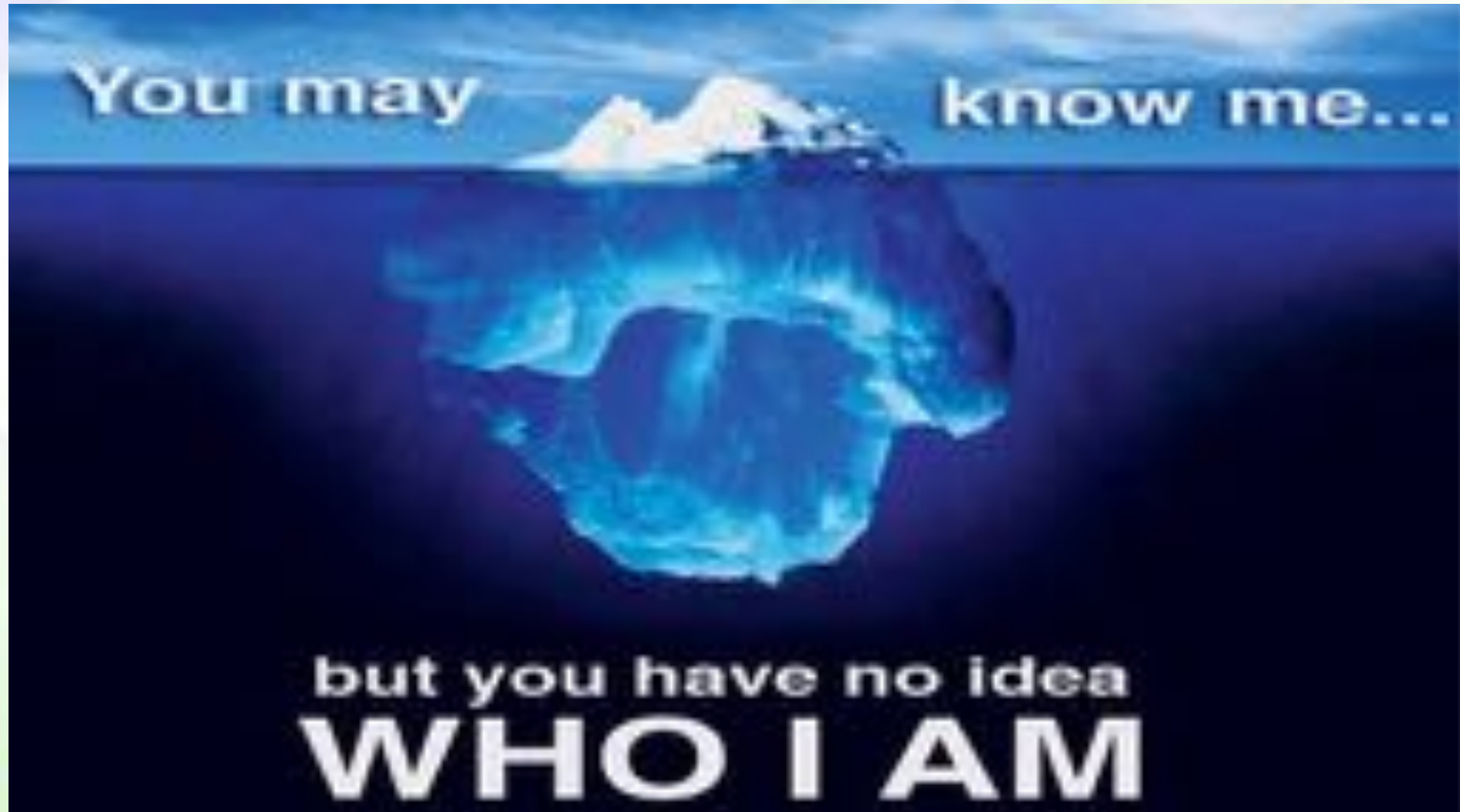
YOU ARE NOT ALONE



But understanding trauma and resilience can change our view and approach ...



Our students are saying to us ...



Moving from a Hierarchal Model of Education to a Relational Model of Education

**We are moving from focus on summative practices to
more formative ... the classroom becomes about process**

“NOW HOW DO I DO THAT ?”

What is your why ... you
have to hold on to it ?



Trauma Sensitive School

A trauma-sensitive school is a safe and respectful environment that enables students to build caring relationships with adults and peers, self-regulate their emotions and behaviors, and succeed academically, while supporting their physical health and well-being.

Trauma and Learning Policy Initiative of Massachusetts Advocates for Children and the Legal Services Center of Harvard Law School

Trauma Sensitive School Practices

In general, Trauma Sensitive Schools hold 3 practices that are key to their success:

1. All staff are trained on trauma and its impact on student learning
2. Restorative Practices (Tier One) are put in place for all students
3. Mental Health Support is available within the school

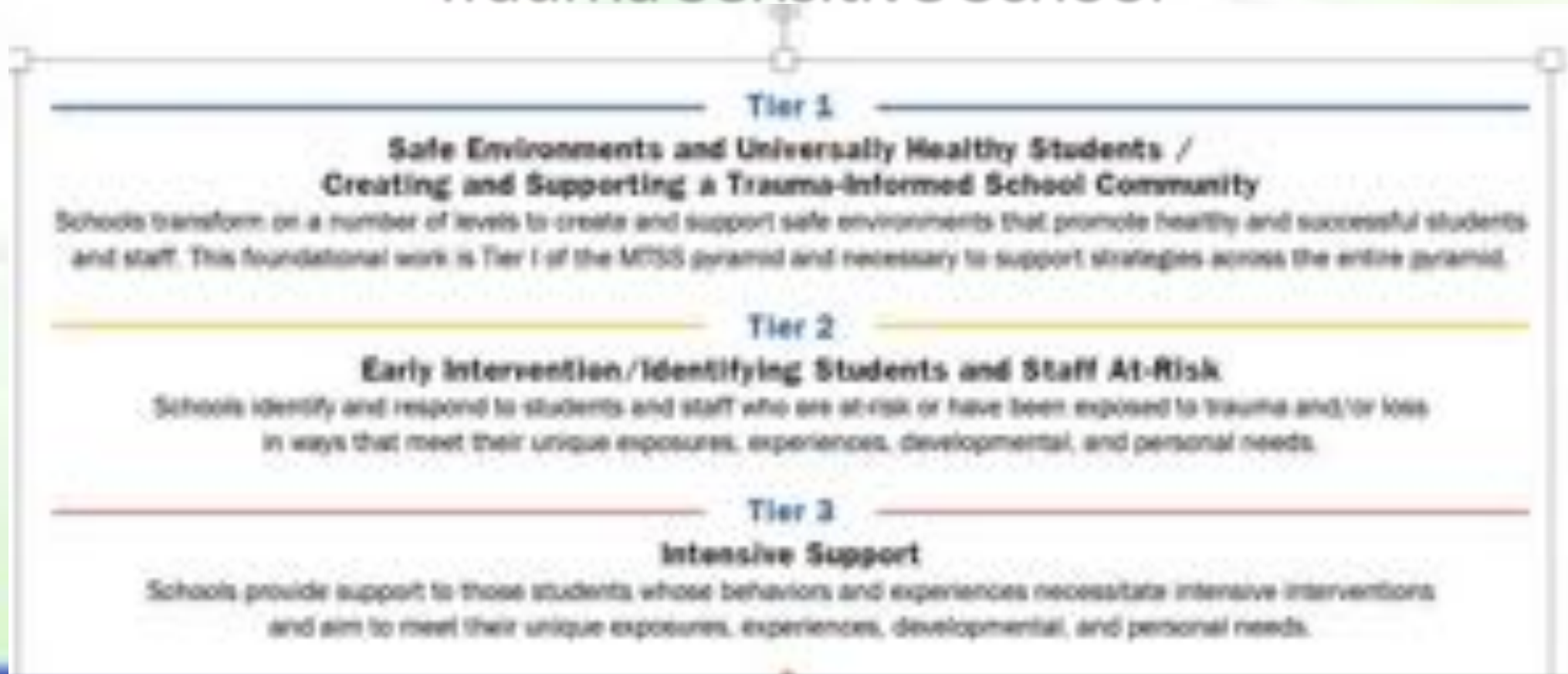
<http://www.traumaandlearning.org/>

RoadMap

Building to Academic Success



Multi Tiered Systems of Support (MTSS) Response to Intervention (RTI) Trauma Sensitive School



It is critical to connect
TIC to MTSS and RTI

We don't want to create initiative
fatigue any more than we have it

So what are the keys to our success ...

Restorative and Resilience Oriented Practices

Building to Academic Success



In this series we will be looking at approaches that are known to work with youth who have experienced trauma.

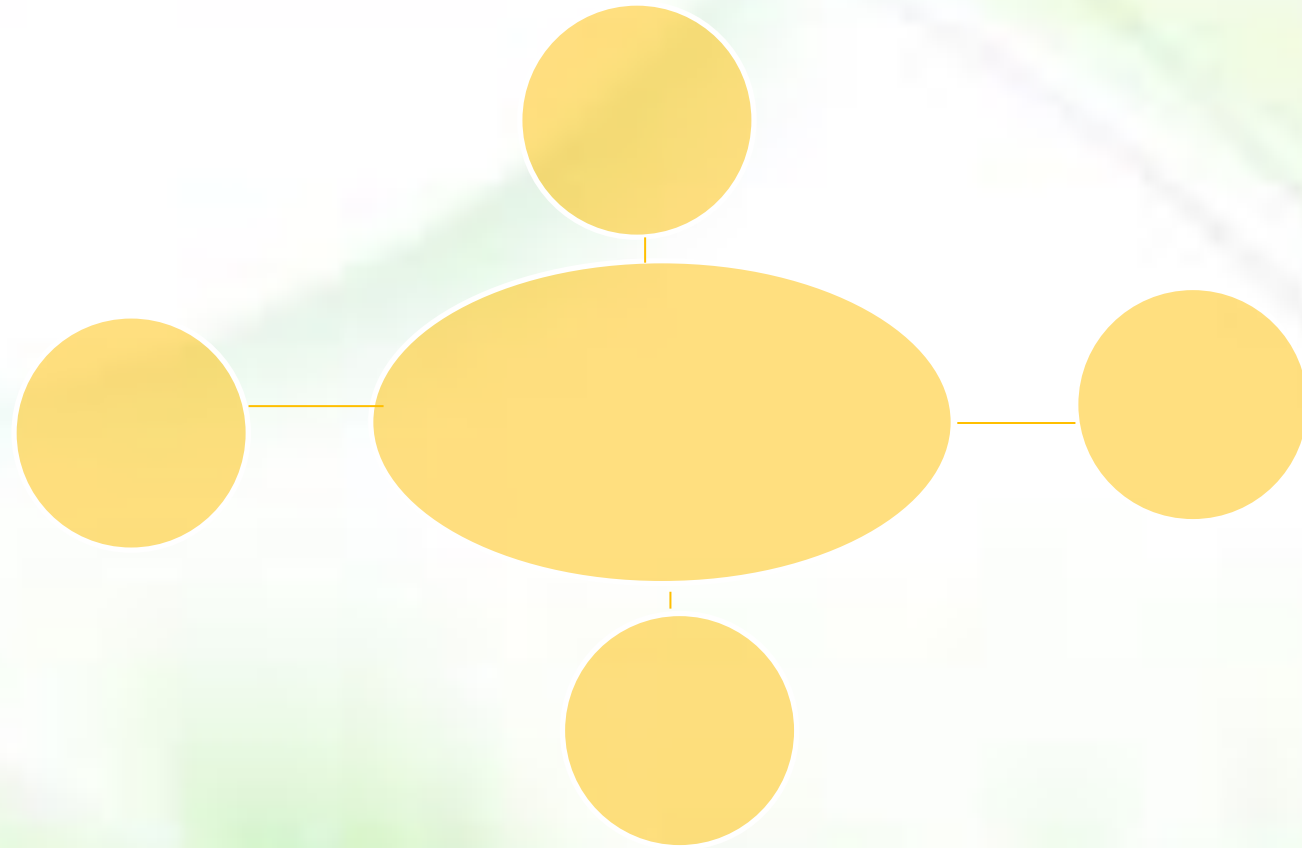
They also build resilience in all youth and adults

4 part focus

- Overview of Trauma and A Change of Perspective
- Restorative Practices in the classroom
 - Managing the Environment
 - Dropping/Changing Expectations
 - Empathy and Validation
- The Student who is “at promise” (often D codes)
 - Collaborative Problem Solving for “Next Time”
 - Repairing the Relationship
 - Re-integrating into the Classroom
- Creating a Strategic Plan for Change
 - Professional Development - CARE Certification
 - Restorative Practices - Peer Coaching Model and Technical Assistance
 - Mental Health Referrals and Integration
 - Enhancing data and feedback solutions for proactive and strategic planning (Emote as a solution)

Respond to the need

Not react to the behavior



So then in the classroom and school
... what does focusing on the need look like

Summative to formative

How does this change Identification of needs

e.g. scanning classroom for needs, integrating social emotional competence into school day as curriculum

How does this change planning

e.g. moment to moment and weekly planning vs static 8 week plan

How does this change how you track

e.g. affect vs attendance

**Building Coping Skills at all phases for
Persons with Complex Trauma**

Universal Precautions Method

Children's Resilience Initiative

Three basic building blocks to success:

Adapted from the research of Dr. Margaret Blaustein

Attachment - feeling connected, loved, valued, a part of family, community, world

Regulation - learning about emotions and feelings and how to express them in a healthy way

Competence - acting rather than reacting, accepting oneself and making good choices



Phases of Behavior

KNOWN TO OTHERS



ACE's

Adverse Childhood Experiences

UNKNOWN TO OTHERS

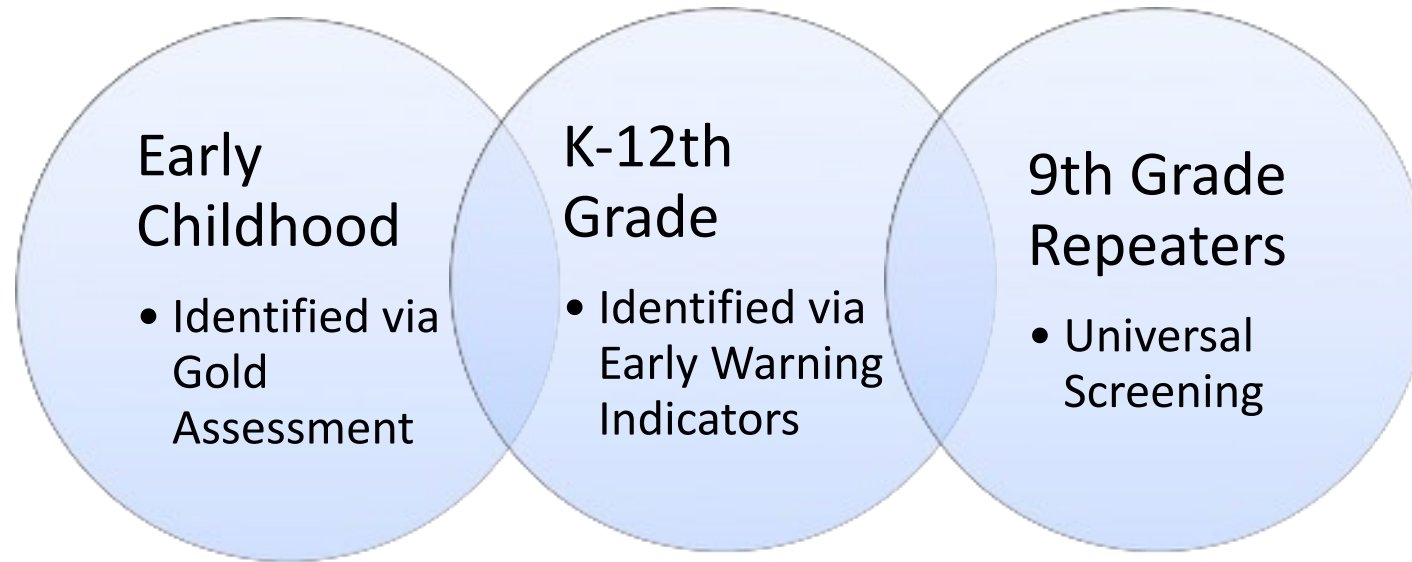
POVERTY – ABUSE – DRUGS & ALCOHOL
MOTIVES – ETHICS - BELIEFS

District of Columbia Example

Provided by:

Deitra Bryant-Mallory, PhD.
Director, School Mental Health
Student Wellness Division
District of Columbia Public Schools

District of Columbia Trauma Sensitive Process



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Student Wellness Division
District of Columbia Public Schools

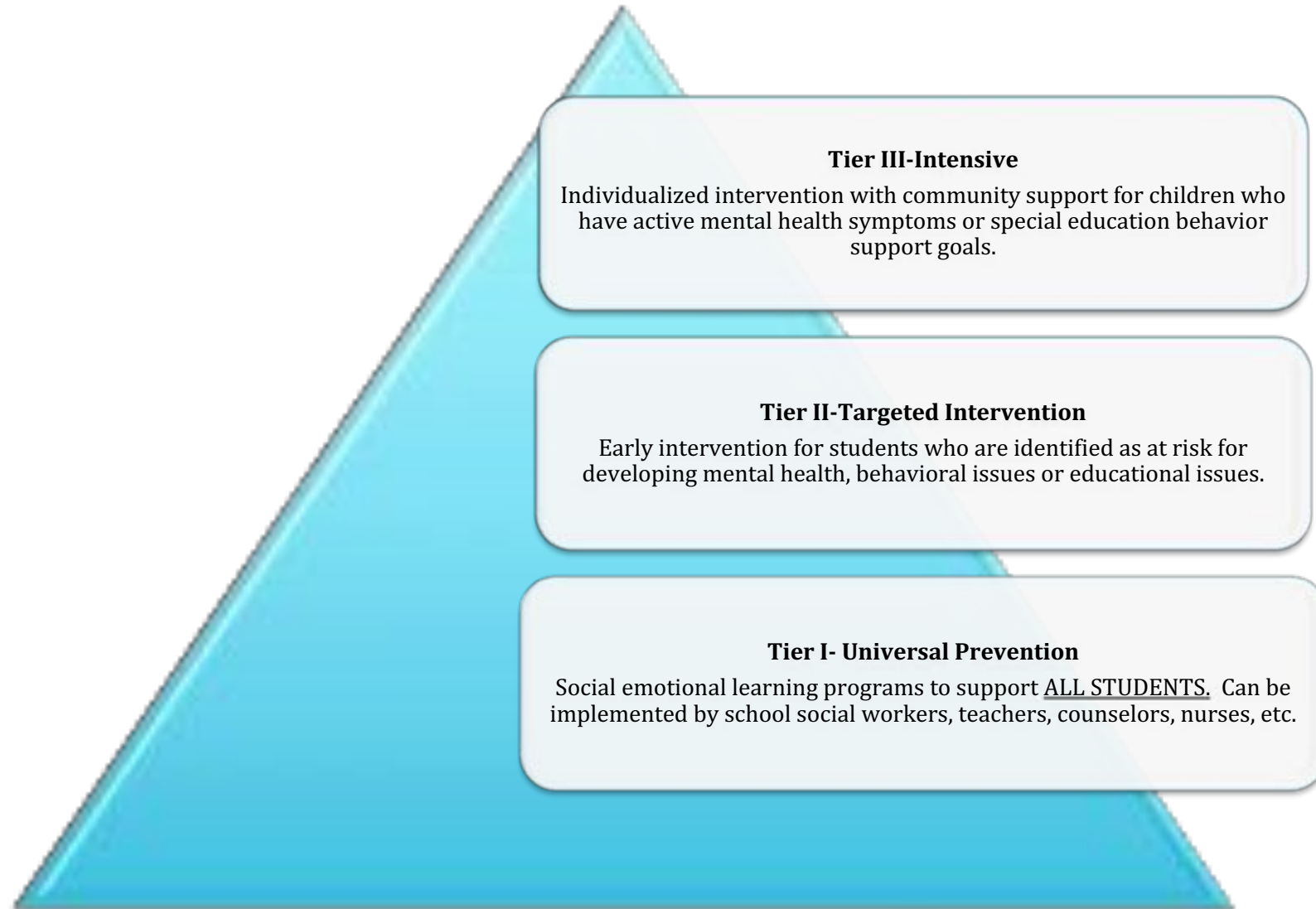
Early Warning Indicator System Screening for MH and Trauma

Early Warning Indicators	On-Track (Tier I)	Sliding (Tier II)	Off-Track (Tier III)
BEHAVIOR	No Office Discipline Referrals (ODR) or suspensions	2-3 ODRs and/or 1 suspension	3+ ODRs and/or 2+ suspensions
ATTENDANCE	missed < 5% instructional days	missed ≥ 5-9% instructional days	≥ 10% instructional days
ACADEMICS: READING and Math	Above Proficient or Proficient on interim assessment	Below Proficient	Far Below Proficient

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Tiered Trauma Sensitive Model



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Student Wellness Division
District of Columbia Public Schools

Tier One

Tier I: Universal Prevention/Consultation and Mental Health Promotion:

- Social Emotional Support services at this tier are provided universally to the entire student body, school staff, or parents/guardians. These services aim to prevent the development of serious mental health problems and to promote pro-social skill development among children and youth.

Examples of interventions at this tier include:

- School-wide PBIS or classroom-based social emotional learning programs, including substance abuse and violence prevention programs (i.e., bullying prevention; Good touch, Bad touch; peer mediation; conflict resolution)
- Staff professional development (i.e., mental health awareness, classroom management)
- Mental health educational workshops for parents/guardians or students
- Mental Health Consultation*

*During Tier One: Consultation is focused on increasing the general knowledge base of general education teachers regarding social emotional development, impairments, and the relationship to the curriculum and function in age-appropriate activities.

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Director, School Mental Health
Student Wellness Division

District of Columbia Public Schools

Tier Two

Tier II: Targeted or Early Intervention/Prevention:

- Students who are at elevated risks for developing a mental health problem are offered various early intervention services to target specific risk factors. These interventions are delivered to children and youth who have social emotional challenges, behavioral symptoms and/or mental health needs that may not be severe enough to meet diagnostic criteria or eligibility for special education services.

Evidence Based Interventions

- Cognitive Behavior Therapy (CBT-Elementary, Middle and High School)
- Child Centered Play Therapy (CCPT-Elementary School)
- Cognitive Behavioral Intervention For Trauma in Schools (CBITS-Middle and High School)
- Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS-Middle and High School)
- Theatre Troupe/ Peer Education Project (TT/PEP-Middle and High School)
- Cannabis Youth Treatment (CYT-Middle and High School)

Additional interventions may include:

- Support groups (e.g., grief and loss, children of divorce, etc.)
- Focused skills training groups (social skills, anger management)
- Crisis management
- Interventions that target specific behaviors, such as aggression, withdrawal, sadness etc.
- Attendance interventions, dropout prevention programs, and training or consultation for families and teachers who work with identified children.
- Mental Health Consultation
- FBA and BIP-Level I

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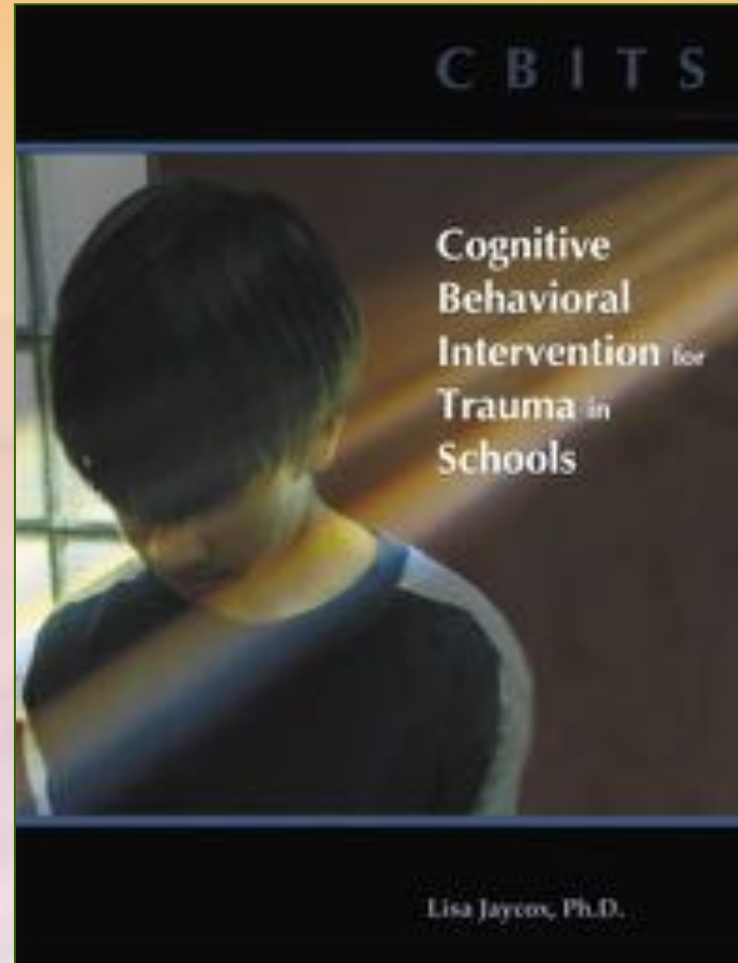
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WASHINGTON, DC**



Cognitive Behavioral Intervention for Trauma in Schools (CBITS)



- School-based intervention
- Delivered by licensed mental health professionals
- Proven effective in research trials
- Visit: Rand.org OR cbitsprogram.org



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NAACP
NATIONAL ASSOCIATION
FOR THE ADVANCEMENT
OF COLORED PEOPLE

Support for Students Exposed to Trauma (SSET) – Modified for Use by Teachers

- Modified version of CBITS
- Delivered by: Teachers, Graduate Interns and School Counselors
- Proven effective in research trials

PROGRAM MANUAL

Support for Students Exposed to Trauma: The SSET Program

Group Leader Training Manual, Lesson Plans,
and Lesson Materials and Worksheets

Lisa M. Socol • Audrey K. Langley • Kristin L. Davis



NAACP HEALTH

Tier Three

Tier III: Intensive Intervention:

Students who have active mental health symptoms that meet diagnostic criteria are offered intensive interventions to improve functioning in school and decrease impact on academic achievement. Interventions at this level are appropriate for meeting the needs of students who have specific mental health needs that are impacting their functioning in the school, home, and/or community.

Evidence Based Interventions

- Cognitive Behavior Therapy (CBT-Elementary, Middle and High School)
- Child Centered Play Therapy (CCPT-Elementary School)
- Cognitive Behavioral Intervention For Trauma in Schools (CBITS-Middle and High School)
- Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS-Middle and High School)
- Cannabis Youth Treatment (CYT-Middle and High School)

Interventions at this tier may include any combination of the following:

- Behavior Support Services on an IEP utilizing evidenced based interventions (listed above)
- Individual and or group counseling
- Psycho-education
- Crisis intervention
- Referral to and Service coordination with community mental health providers

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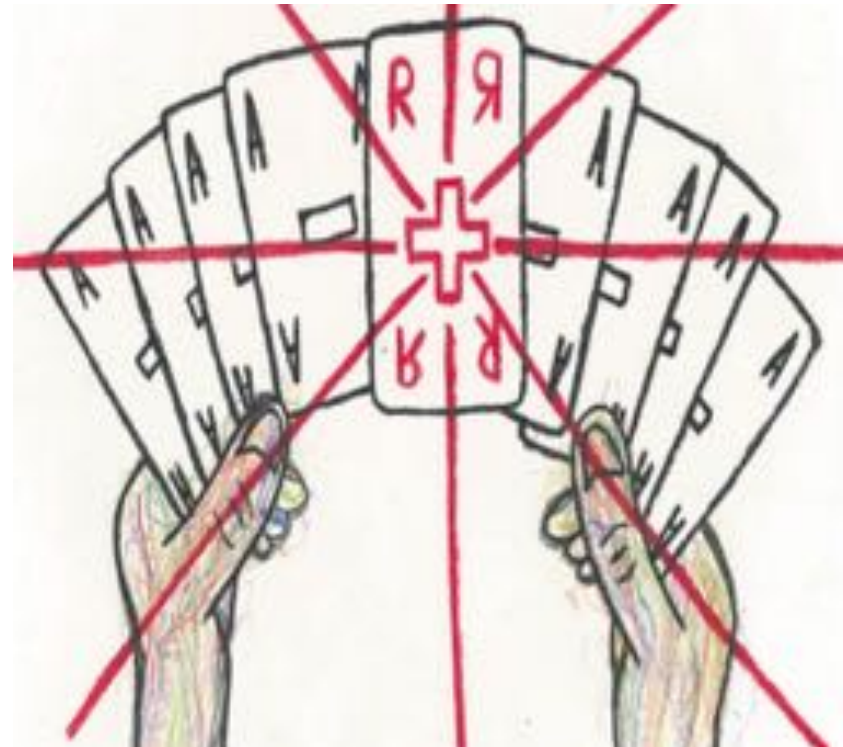
Hanover Virginia (West Corridor) Implementation

- Began in February 2016
- Monthly Work within a School Feeder System
- End of August 2016, 100% staff trained in TIC Paradigm (K-8)
- Tier One Work – Mind Up Implementation
- Tier Two Work – Resilience Oriented approaches to PBIS (case planning and resourcing for students and families)
- 2017-2018 School Year Focus on:
 - Continuing to increasing student coping skills
 - TIC PBIS
 - Implementing Coaching Model to build sustainability and support for school professionals
 - Infusing Self Care for Teaching Professionals (modeling the way for students)

Be a **F.O.R.S.E.** in your community

Image by Lincoln High student Brendon Gilman

FOCUS
On
Resilience &
Social-Emotional



Resources

- <http://gucchdtacenter.georgetown.edu/TraumaInformedCare/index.html>
- <https://arcframework.org/>
- <http://verbaljudo.com/programs/>
- <https://www.dbtselfhelp.com/index.html>
- <http://marc.ucla.edu/mindful-meditations>
- <http://self-compassion.org/>
- <https://brenebrown.com/>

Resources

- <http://gucchdtacenter.georgetown.edu/TraumaInformedCare/index.html>
- https://www.youtube.com/watch?v=3axcjT_zo58
- <https://www.youtube.com/watch?v=-HG8H4n2j9I>
- https://www.ted.com/talks/nadine_burke_harris_how_childhood_trauma_affects_health_across_a_lifetime?language=en

Thank You

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www.integrationsolutions.org

804-432-0056

CHECK OUT our new On Demand Trauma and Resilience Certification Classes

<https://squareup.com/store/Integration-solutions-CARE>

See my TedTalk at

<https://m.youtube.com/watch?v=-HG8H4n2j9I>

Two People Podcast a:

<http://www.twopplpodcast.com/31-allison-jackson/>