



**Child Development and Trauma:
Considerations for Educators**
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California School-Based Health Alliance

The California School-Based Health Alliance is the statewide non-profit organization dedicated to improving the health and academic success of children and youth by advancing health services in schools.

Our work is based on two basic concepts:

- Health care should be accessible and *where kids are*, and
- Schools should have the services needed to ensure that poor health is not a barrier to learning

Statewide Annual Conference

Join Us in sunny San Diego April 30 & May 1, 2015, for *Advancing Equity in Education & Health Care*, our statewide annual conference.

More information at www.schoolhealthcenters.org.



April 30 & May 1
Bahia Resort
San Diego's Mission Bay

Objectives

1. Review our knowledge about child and adolescent development, particularly thinking, emotions and behavior.
2. Define "trauma" and understand its impact on the developing brain.
3. Discuss strategies educators can use to support students affected by trauma.
4. Learn the approach in the San Francisco Unified School District.

Self-Care Is Critical

“It is not uncommon for school professionals who have a classroom with one or more students struggling from the effects of trauma , to experience symptoms very much like those their students are exhibiting.”

-The Heart of Learning and Teaching: Compassion, Resilience, and Academic Success

Child Development Review



1.What do infants and young children need from caregivers?

2.What do infants and young children need from their environment?

3.What do preschool and school-aged kids need from their school?

What influences child development?

- Intrauterine environment
- Endowments at birth
- Attachment
- Physical and cultural environment
- Quality and nature of parenting

Optimal Child Development

Provision of a safe environment
+
Attuned, reliable and consistent care
+
Patterned, repetitive responses
=
The best approach to optimizing children's
development.

Adolescent Development



What Do We Know About the Teen Brain?

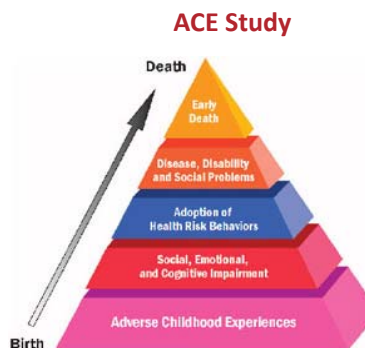
- Major brain growth spurt during teen years
- Brain develops until mid-20's
- "Use it or lose it" principal & brain "plasticity"

What Do We Know About the Brain?

- Brain matures in an environmental context
- High risk behavior related to brain growth
- Shift from concrete thinking to abstract thinking ("Feeling" brain to "Thinking" brain)

Considerations About Trauma

- Trauma is prevalent in the lives of children.
- Trauma affects learning and school performance, and causes physical and emotional distress.
- Children/teens experience the same emotions as adults, but may not have the words to express them.
- Some behaviors are protective in one environment, but problematic in another.
- Trauma sensitive schools help children feel safe to learn.
- Schools have an important role to play in meeting the social/emotional needs of students.



www.acestudy.org

What Makes an Experience Traumatic?

- Overwhelming, very painful, very scary
- Fight or Flight incapacitated
- Threat to physical or psychological safety
- Loss of control
- Unable to regulate emotions

Types of Trauma

- Acute → earthquake
- Chronic → sexual abuse
- Toxic stress → community violence
- Historical/Insidious → racism
- Complex → caregiver neglect

Trauma Impacts on Child Development

Trauma causes brain to adapt in ways that contributed to their survival (i.e. constant fight/flight/freeze).



These adaptations can look like behavior problems in “normal” contexts, such as school.



When triggered, “feeling” brain dominates the “thinking” brain.



The normal developmental process is interrupted, and students may exhibit internalizing or externalizing behaviors.

How does trauma impact child brain development?

http://developingchild.harvard.edu/resources/multimedia/videos/three_core_concepts/toxic_stress/

What Might You Notice?

- Physical symptoms
- Poor emotional control/lashing out
- Confrontational/ control battles
- Overly protective of personal space/belongings
- Over- or underreacting to loud noises or sudden movements
- Difficulty with transitions
- Emotional response doesn't “match” situation

What Might You Notice?

- Depression/ withdrawal
- Anxiety/worry about safety of self and others
- Poor or changed school performance/attendance
- Avoidance behaviors
- Difficulty focusing, with attention, memory, thinking
- Increase in impulsive, risk-taking behaviors
- Repetitive thoughts or comments about death or dying
- Non-age appropriate behavior

Common Triggers

- Unpredictable situations or sudden changes
- Transitions
- Conflicts, disagreements or confrontation
- Particular sights, sounds, smells
- Feelings of vulnerability , powerlessness, or loss of control
- Experiences of rejection
- Praise, positive attention and intimacy

When a Student Is Triggered...

- Breathe! Be calm and you will help the student be calm.
- Do not use this as a time to try to change behavior or demand respect.
- Call for help, or ask another person to call.
- Notice your tone of voice and personal space.
- Remember that the student is probably not engaged in the pre-frontal cortex right now!

Strategies

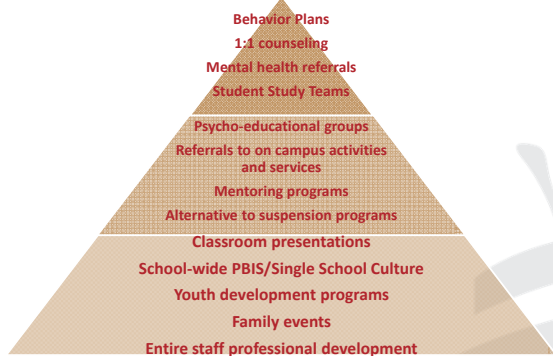
- What is a strategy you have employed in your work that supports and youth who've experienced trauma?
- What is something you learned from experience that DOES NOT work?
- After reviewing this research, is there something you would add to your toolbox? Something you would do differently?

Resilience

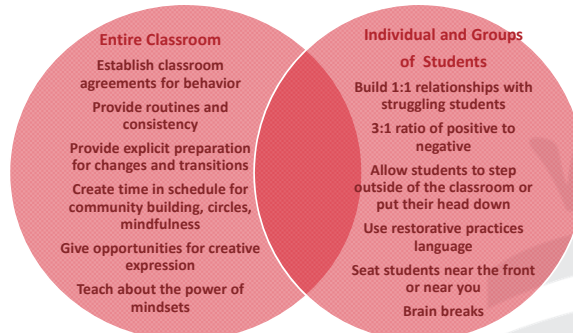
- Responsive caregiving provided to youth from trusted adults can moderate the effects of early stress and neglect associated with trauma
- Building resilience can counter the effects of trauma/ACE's and help lead youth to more effective, productive and healthy adulthoods

St. Andrews, Alicia (2013). *Trauma and Resilience: An Adolescent Provider Toolkit*. San Francisco, CA: Adolescent Health Working Group, San Francisco, CA

How can the school environment help?



How can school staff help?



San Francisco Wellness Initiative

A summary of trauma-informed practices

What is the Wellness Center?

Wellness Centers provide **safe, supportive environments** in the school where students can go to discuss a variety of issues from depression, grief, self-esteem, family life and stress to dating violence, sexual identity and gang involvement. The Wellness Programs provide **culturally competent** services in a confidential, nonjudgmental space staffed with professionals who are dedicated to improving the health, well-being and educational outcomes of all students. Through both on-campus programming and community-based partnerships, **students receive coordinated health education, assessment, counseling and other support services** at no cost.

www.sfwellness.org

Staffing and Funding

School & Community Staffing

- 1 FTE Wellness Coordinator (credentialed school social worker)
- 1 FTE Community Health Outreach Worker (classified)
- 2-5 days of School Nurse (credentialed)
- .5-2.0 FTE Behavioral Health Counselor
- Graduate interns
- Community partners

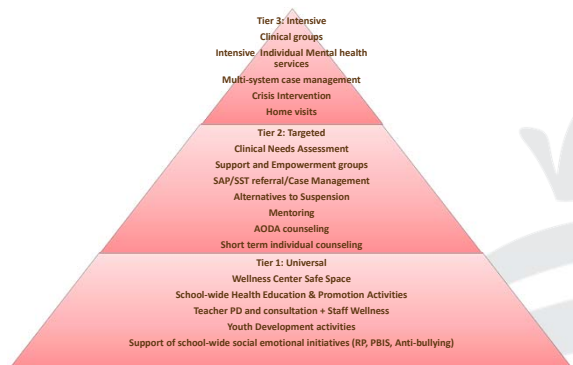
Braided Funding and Leadership

- Department of Children, Youth and their Families
www.dcyf.org
- Department of Public Health
www.sfdph.org
- San Francisco Unified School District/ School Health Programs Department
www.healthiersf.org

68 University and Community Partners

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| 3rd Street Youth Clinic
Arab Cultural and Community Center
Asian American Recovery Services
Bayview Center for Arts and Technology
Bayview Hunters Point Foundation
Breathe CA
Bridges from School to Work
Brothers Against Guns
CARECEN
Center for Wellness and Achievement in Education
Chinatown Child Development Center
Chinatown/North Beach Mental Health
Columbia Park Boys & Girls Club
Community Assessment & Referral Center
Community Response Network
Community Youth Center (CYC)
Edgewood Center
Enterprise for High School Students
OHLHOFF Recovery Programs
Richmond Area Multi-Services
San Francisco Women Against Rape
Yo Puedo
Youth Leadership Institute
YMCA/Bayview
YMCA/Buchanan
YMCA/Urban Services | Family Service Agency- Teenage Pregnancy & Parenting Program
Filipino Community Center
Good Samaritan
Hearing and Speech Center
Hip Hop Chess Federation
HOMEY
Horizons Unlimited
Huckleberry Youth Programs
Instituto Familiar de la Raza
In Touch
Jewish Family and Children's Services
Josie's Place
La Casa de las Madres
Legal Services for Children
Mission Clubhouse
Mission Girls
Mission Graduates
Mission Neighborhood Centers, Inc.
Next Course
New Generation Health Center
Oakes Children's Center
Southeast Child and Family Therapy Center
Truancy Assessment & Referral Center
United Playaz
Vietnamese Youth Development Center
Westside Community Mental Health |
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Wellness Services by Tier



Referral Process

- Who can refer? **ANYONE**
- How do you refer? **Form, email, hallway conversation**
- Coordination of referrals? **Wellness Coordinator and SAP team**
- Follow up? **Note to referral source; internal documentation; mandated documentation; SAP notes**
- **THERE IS NO WRONG DOOR!**

Progress Monitoring

- How success is measured:
- | | |
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| <ul style="list-style-type: none"> • Data collection • Service evaluation • Staff evaluation • Program evaluation • School-wide/district-wide data • Strategic planning | <p>2013/14 School Year</p> <ul style="list-style-type: none"> • 7,289 students served • 175 support groups • 908 drop-ins per day • Over 2,000 receiving intensive individual • 73% report “doing better in school • 76% report coming to school more often • 95% report improved health and well-being |
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SFUSD’s Strategies

UCSF HEARTS

- Influence district and school policies
- Staff training (Train the Trainer) and capacity building
- Workshops for families
- Curricular development
- Intensive school support with tiered prevention and interventions

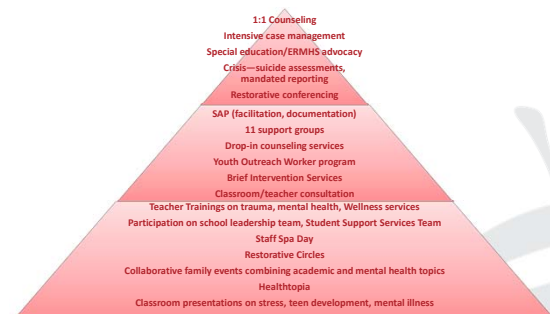
District-wide Programs

- Staffing: SSWs, Nurses, Counselors, CWALS
- Restorative Practices
- Positive Behavior Interventions and Supports
- Mentoring for Success
- Foster Youth Services
- LGBTQ Youth Support Services
- Student Intervention Team
- Crisis Response
- Peer Resources
- Safe and Supportive Schools Policy

Safe and Supportive Schools Policy

Addresses disproportionality by eliminating suspensions based solely on “willful defiance” and replacing with integration of School-Wide Positive Behavior Interventions and Supports, Restorative Practices, Trauma-Sensitive Practices, and practices that address implicit and explicit bias.

Actualized on a school site: Raoul Wallenberg High School



Resources for Educators and Health Professionals working in Schools

- Adolescent Health Working Group:
www.ahwg.net
- Harvard Center on the Developing Brain:
<http://developingchild.harvard.edu/>
- Trauma-Sensitive School Checklist:
http://ssp.wi.gov/ssp_mhtrauma
- School mental health program consultation:
California School-Based Health Alliance,
www.schoolhealthcenters.org

References

1. UCSF HEARTS (Healthy Environments and Response to Trauma in Schools Project) Child and Adolescent Services, Department of Psychiatry, UCSF/San Francisco General Hospital/Joyce Dorado, PhD and Lynn Dolce, MFT.
2. Cincinnati Children's Hospital Medical Center, David J. Schonfeld, MD
3. Castro-Rodriguez, G. (2014, May). Overview of Trauma and Trauma-Informed Care. Lecture conducted from Kaiser Permanente, Oakland, CA.
4. Wright, T. (2014, May 6). Reframing Risk and Resilience in Young Children with Messy Lives. Devereux Center for Resilient Children Webinar. Webinar retrieved from www.centerforresilientchildren.org.
5. St. Andrews, Alicia (2013). *Trauma and Resilience: An Adolescent Provider Toolkit*. San Francisco, CA: Adolescent Health Working Group, San Francisco, CA
6. Oehlberg, Barbara (2008). Why Schools Need to be Trauma Informed. *Trauma and Loss: Research and Interventions*, Vol. 8, No. 2, Fall/Winter, 2008. Retrieved from www.traumainformedcareproject.org

References

7. National Child Traumatic Stress Network Schools Committee. (2008, October). *Child Trauma Toolkit for Educators*. Los Angeles, CA & Durham, NC: National Center for Child Traumatic Stress.
8. Hertel, R. & Wilson, M. (2014, March 25). Creating Compassionate, Trauma-Informed Schools to Promote Student Well-being and Resilience. Substance Abuse Mental Health Services Administration Webinar. Webinar retrieved from www.samhsa.gov
9. Wolpov, R, Johnson, M.M., Hertel, R., and Kincaid, S.O. (2011, January). *The Heart of Learning and Teaching: Compassion, Resilience, and Academic Success*. Olympia, WA: State Office of Superintendent of Public Instruction. Retrieved from www.k12.wa.us/compassionateschools/resources
10. Steinberg, L. (2009, February). Commentary: A Behavioral Scientist Looks at the Science of Adolescent Brain Development. National Institutes of Health, Bethesda, MD. Retrieved from www.ncbi.nlm.nih.gov/pmc/articles
11. Marijuana May Hurt the Developing Brain. Morning Edition. National Public Radio. 2014, March 3. Transcript.
12. Teen Drinking May Cause Irreversible Brain Damage. Morning Edition. National Public Radio. 2010, January 25. Transcript.