BUILDING SCHOOL SUPPORT

WHAT IS TRAUMA-INFORMED EDUCATION?

WHAT IS TRAUMA-INFORMED EDUCATION (TIE)?

The essence of Trauma-Informed Education is it seeks to be comprehensive in the engagement of the whole child. It recognizes the totality of influences and impacts (physical, social, and emotional) on each child at any given time and how those impacts may support or inhibit the acute sense of safety that undergirds any learning potential.

Unaddressed trauma is ubiquitous in personal impact, with measurable and adverse outcomes in every sphere of existence for individuals impacted by it. This impact is especially true where education is concerned. Trauma-Informed Education respects the biology of the brain in that the need to feel safe correlates with brain science in that the lower systems of the brain that regulate survival are as critical as the higher reasoning cortex where learning takes place. The sequence of the brain is the need to control stress first (to feel safe with predictability), to relate well with others, and to open up the brain's cortex to be able to reason, create, and reflect (to learn).

One significant part of the work of approaching trauma in educating our youth is the assessment of Adverse Childhood Experiences (ACEs). These early and often unaddressed experiences of trauma most commonly correlate to negative impacts throughout life. In addition, we know that children who have had or are having these experiences are significantly more likely to have moderate to severe issues in school. While one may argue many other incidents may have similar effects, these have received the most significant study.

In her groundbreaking 2011 study "The Impact of Adverse Childhood Experiences on An Urban Pediatric Population," Dr. Nadine Burke Harris found a strong link between the number of childhood ACEs and the onset of learning and behavioral issues.





Physical or Emotional Neglect

Separation or Divorce

A Family Member With Mental Illness



A Family Member Addicted to Drugs or Alcohol

A Family Member Who Is In Prison



Witnessing A Parent Being Abused

MAKING THE CASE TO CONSIDER TRAUMA-INFORMED EDUCATION

3 REASONS FOR TEACHERS AND SCHOOLS TO BE TIE-INTERESTED:



There is a great need for social-emotional supports for students and school staff.

Unaddressed trauma is a biological impediment to learning, and teachers and schools are being held accountable for student achievement results, which are biologically limited because of unaddressed trauma. Trauma-Informed Education and Comprehensive Wellbeing helps schools address student behavior and discipline problems, and it's a means to improve special education performance.

HOW TO START A TIE-INTEREST GROUP AT YOUR SCHOOL:

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Get two school peers interested, ideally including a mental health clinician/social worker, to form a TIE-interest group to engage and build support throughout the school, particularly of the school leader and the teachers. TIE-interest does not mean an agreement to practice.



Encourage school peers to watch the "Dealing with the Brain Before Learning Can Begin" video from the www.teicp.org website (35 minutes). Then, meet to discuss it over coffee (30 minutes) and/or host a larger group meeting, which should include watching the video (35 minutes), discussing interest in a comprehensive wellness approach at your school (25 minutes), and refreshments.



Get the principal and school leader's interest and support to encourage and engage the school staff's participation.



If your school community is interested in considering some level of TIE practices, please have the principal respond to the TIECP Survey for TIE-interested Schools. The Trauma-Informed Educators Community of Practice (TIECP) is by, of, and for practitioners to support peer-to-peer learning and collaboration and the sharing and creation of trauma-informed educational practices and models. TIECP is open to all K-12 schools including traditional, charter and private (www.tiecp.org).

TIE-INTERESTED SCHOOL CATEGORIES:

EXPLORING

- Exploring TIE conceptually
- Limited or no social work/mental health capacity
- Interested in building a plan to develop staff understanding and capacity

EXECUTING

- Executing elements of TIE
- Interested in coordinating TIE elements into a program
- Some mental health/social work team staffing and capacity, some level of TIE training

ADVERSE CHILDHOOD EXPERIENCES (ACEs)

Researchers determined that ten specific traumatic childhood experiences, or ACEs, could be linked to a higher likelihood of health challenges later in life. These adverse effects increased with the number of "ACEs" a child experienced. For each "yes" answer, add 1. The total number at the end is your cumulative number of ACEs. If a person's ACE score is 1-3 and has at least one ACE-associated condition, or if the ACE score is four or higher, a person is at "high risk" for toxic stress.

Did a parent or other adult in the household often or very often:

A) Swear at you, insult you, put you down, or humiliate you?

B) Act in a way that made you afraid you might be physically hurt?

Did a parent or other adult in the household often or very often:

A) Push, grab, slap, or throw something at you?

B) Ever struck you that you had marks or were injured?

Did an adult or person at least five years older than you ever.

A) Touch or fondle you, or have you sexually touch their body?

B) Attempt or have oral, anal, or vaginal intercourse with you?

Did you often or very often feel that:

A) No one in your family loved you or thought you were important or special?

B) Your family didn't look out for each other, feel close to each other, or support each other?

FIVE

Did you often or very often feel that:

A) You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you?

B) Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?

SIX

Were your parents ever separated or divorced?

A) Yes B) No

Was your parent/caregiver:

A) Often pushed, grabbed, slapped, or had something thrown at her?

B) Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard?

C) Been repeatedly hit for at least a few minutes or threatened with a gun or knife?

Was a household member depressed or mentally ill, or did a household member attempt suicide?

Did you live with anyone who was a problem drinker, alcoholic or used street drugs?

A) Yes

B) No

TEN

Did a household member go to prison?

A) Yes B) No

A) Yes B) No

TOTAL NUMBER OF ACEs _____

SURVEY FOR TIE-INTERESTED SCHOOLS

(Please formally respond to survey through the www.tiecp.org website.)

This survey is for schools that have built staff interest and school leader support for considering the adoption of trauma-informed educational practices at their school.

- 1 What grades do you serve?
- 2 Describe your school demographics.
- 3 Describe your school staffing.
- 4 Describe your current social-emotional learning program.
- 5 Describe the partnerships you currently have to get TIE-related work done.
- 6 Name the times in the school schedule to focus on activities directed to staff.
 - a. Morning meetings
 - b. End of day meetings
- 7 Do you have therapists and social workers on-site, and what are the staff/ student ratios?
- 8 Budget how much do you spend on social-emotional learning, and how?
- 9 Do you have buy-in from school leadership (principal, board), staff, and parents?
- 10 Would your school be interested in committing to the work and at least a 3-year process (1-year planning and two years implementation) for a trauma-informed whole-school model social-emotional learning program at your school?

INTERESTED SCHOOL STAFF & LEADERS

1	9
2	
3	11
4	
5	13
6	14
7	15
8	16

Notes	



WWW.TIECP.ORG