TRAUMA-INFORMED APPROACHES IN SCHOOLS:
KEYS TO SUCCESSFUL IMPLEMENTATION IN COLORADO

Exposure to abuse, discrimination, violence, neglect, and other adverse experiences during childhood significantly increase the risk of serious health, social, emotional, and learning problems throughout life (Felitti et al., 1998). These traumatic events can disrupt brain, social, and emotional development. This disruption impacts a student's opportunity for academic success. School systems must reconsider how they support children that have been exposed to trauma and the resultant activation of the brain's stress response in order to fully support every student's opportunity for emotional social wellness, academic achievement, and preparation for post-secondary success.

The purpose of this document is to provide an aligned message to schools and districts on trauma, its' prevalence in youth, and how schools can utilize trauma-informed approaches to change outcomes for students. This document will provide a common language and common understanding to help schools begin the investigation and implementation of universal tier 1, school-wide trauma-informed approaches. It utilizes research and practice from experts and implementers across the state and the country to explore the essential components of successful implementation of trauma-informed approaches in schools. It is also intended to provide vetted resources and references for further investigation at the local level.

> Examples of Acute Trauma:
> Natural Disasters,
> Act of violence,
> Passing of a loved one,
> One-time physical or sexual assault,
> Individual act or violence

INTRODUCTION

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, 2014). Acute, complex, and historical trauma are the three types of trauma most often experienced by youth. Acute trauma is the response to a one-time event. Complex trauma is the exposure to multiple traumatic events that often occur within the caregiving systems (Cook et al., 2003). Complex trauma is often of an invasive, interpersonal nature, and experienced over the long-term. Historical trauma is a constellation of characteristics associated with massive cumulative group trauma across generations (Brave Heart et al., 2011). Essentially, each of these types of trauma can overwhelm one's ability to cope and cause intense reactions that include fear, helplessness and loss of control.

A toxic stress response can occur when an individual experiences' strong, frequent, or prolonged trauma without adequate support. This prolonged activation of the stress response systems can disrupt the development of the brain architecture as well as other bodily systems (Center on the Developing Child, 2016). Toxic stress can have dramatic impact on a student's learning, worldview, and long-term health outcomes.

The vigor of the trauma movement is a result of the growing awareness of the prevalence of exposure to trauma among children and adolescence as well as an increased understanding of the corrosive impact of trauma on the biological, psychological, and social emotional development (Finkelhor, Turner, Shattuc, & Hamby, 2015; Hamoudi, Murray, Sorensen, & Fontaine, 2015; McLauglin et al., 2013). In 1995, the Centers for Disease Control and Prevention partnered with Kaiser Permanente to conduct a large-scale investigation of over 17,000 participants in which the long-term effects of adverse childhood experiences (ACEs) on health outcomes throughout the lifespan were studied (Felitti, et al., 1998). The major findings of the ACEs study were twofold. First, adverse childhood experiences are more common than originally thought, with two-thirds of respondents reported experiencing at least one ACE. Second, as the number of individual's adverse childhood experiences increases, so does their risk for negative health outcomes. In fact, since the publication of this hallmark study, more research has been done that suggests even higher rates of students experiencing ACEs in schools and the negative outcomes experienced by these students include academic problems, decreased attendance at school, increased behavioral issues, and poor health as compared to their peers who have experienced no trauma.

The trauma-informed movement has also been fueled by the effectiveness of school-wide trauma supports and specific treatments in ameliorating the traumatic stress reactions in youth (Rolfsnes & Idsoe, 2011). Implementing trauma-informed approaches help schools engage their students more effectively, thereby offering the potential to improve outcomes and reduce avoidable negative impacts. Trauma-informed approaches in schools shift the focus from "What is wrong with the student?" to "What has happened to the student?" Schools can protect children from the negative impact of stress by increasing protective factors that buffer stress (Masten, Herbers, Cutuli, & Lafavor, 2008).

> Visit the Trauma-Informed Work Group at their Website here.
> (under construction)
>
> More information regarding the work of Project AWARE and state and local implementation of trauma-informed approaches, strategies, and supports.

In Colorado, the trauma-informed movement has been led at the state and local level. Districts and schools across the state are implementing universal, targeted, and intensive supports and interventions aimed at building relationships and utilizing strategies that support all students, especially those that have been impacted by adverse childhood

> Protective Factors that Safeguard Against Stress:
> Healthy supporting relationships with caring adults
> Learning environments that are safe, engaging, and supportive
> Explicit instruction and practice of social and emotional skills that include problem-solving, self-awareness, self-regulation, and relationship skills

experiences. At the state level, the Colorado Department of Education (CDE) has convened the Trauma-Informed Work Group to provide a cross-departmental aligned message, guidance, and professional development to districts and schools across the state. Additionally, COACT Colorado at the Colorado Department of Human Services has convened state partners across agencies and departments to develop a statewide theory of change for trauma responsive care. As a part of that work, the membership developed and agreed upon core beliefs or assumptions regarding child and adolescent trauma. CDE has agreed on these core beliefs and adopted them to provide guidance to districts and schools. These core beliefs are in the highlighted section above.

TRAUMA-INFORMED APPROACHES IN SCHOOLS

The prevalence of trauma and confirmed connection between healthy social emotional development and academic success requires schools to focus on school-wide implementation of trauma-informed approaches in schools (SAMHSA, 2014). The CDE Trauma-Informed Work Group defines trauma-informed approaches in schools as the school-wide implementation of "*explicit recognition, understanding, and responsiveness to trauma with intentional efforts made in utilizing evidence-based practices to build healthy relationships, restore emotional safety, and create positive opportunities where students can practice self-regulation strategies and prosocial skills*" (SAMHSA, 2014). The need for trauma-informed approaches in schools as a tier 1 or universal approach is clear. First, the prevalence of students experiencing acute, complex, and/or historical trauma has been found to be at least 64% of students in schools and thus necessitate support for all (Felitti, et al., 1998). Second, those students experiencing trauma are not always obvious to staff and a school-wide approach will meet the needs of the silent sufferers (Craig, 2015). Third, trauma-informed schools provide effective and efficient supports for students with other learning needs. Ultimately, as stated in the COACT Core Beliefs school environments that are safer, supportive, and built on building relationships are most effective and efficient in meeting the needs of all learners.

Building and maintaining trauma-informed approaches in schools starts with recognizing this need, using a trauma lens to build awareness and design support, and engaging in the active pursuit of practices that will avoid re-traumatizing students. This trauma-informed work must include supporting adults that serve these students to ensure self-care to prevent and mitigate vicarious trauma and compassion fatigue.

Trauma-Informed Approaches & Multi-Tiered System of Supports (MTSS)

You can find more information on utilizing PBIS within an MTSS framework in Colorado at the Office of Learning Supports at CDE.

Additionally, more information on best practices for Alternatives to Zero Tolerance Policies and the Dropout Prevention Framework.

Trauma-informed approaches in schools utilize a Multi-Tiered System of Supports (MTSS) in which whole school tiered practices and interventions utilize systems, data and evidence-based practices to increase social, emotional, and academic success for all students. In the universal or tier 1, trauma is addressed by ensuring all aspects of the environment are informed by an understanding of trauma and designed to foster safety, resilience, mitigate impact, and support healing. The practices of tier 1 include implementing universal Positive Behavioral Interventions and Supports that share trauma-informed principles including creating a safe and supportive learning environment, building relationships, and direct instruction of school-wide-expectations. Additionally, a trauma-informed universal system includes the direct instruction of social emotional skills. The Collaborative for Academic, Social, and Emotional Learning (CASEL) has identified five core competencies of social emotional learning. The competencies are self-awareness, social awareness, responsible decision making, self-management, and relationship skills. The explicit instruction of each of these competencies is essential in creating a universal trauma-informed approaches in schools. The Colorado Academic Standards includes Emotional and Social Wellness Standards as a part of the Comprehensive Health and Physical Education. There are also social and emotional skills within the Reading, Writing and Communicating and Social Studies standards. Universal supports also include aligning the discipline system with trauma-informed principles and using this lens to ensure students are not re-traumatized by discipline practices.

Data collected across the tiers of implementation are utilized to determine the need at the targeted and intensive tiers of support. Targeted or tier 2 supports are for some students that are at-risk for further impact. These tier 2 supports focus on increasing opportunities for skill development to students that need more to be successful. Targeted supports in a trauma-informed approach often focus on providing a double dose of instruction on self-regulation, problem-solving, and other social emotional skills. It can also include increasing the reinforcement of those skills and building adult and peer relationships in the school. Intensive or tier 3 supports focus on individualize, trauma-specific services in the school. Figure 1 below is from the Wisconsin Department of Public Instruction. It demonstrates the integration of MTSS, PBIS, and trauma-informed approaches in schools and provides evidence-based practices associated with implementation at each tier.

USING THE PBIS FRAMEWORK TO SUPPORT STUDENTS' MENTAL HEALTH

Tier 3
-Individualized services
-Case management
-Coordination with community-based treatment
-Parent & caregiver training & support

Tier 2
-Adult mentors
-Small groups for SEL & CBT
-Parent & caregiver education

Tier 1
-Instruction on SEL
-Sensory opportunities to manage anxiety
-Predictable routines
-Choices in learning
-Physical activity breaks
-Adults model emotional regulation
-Calm Zones

Tier 3
-Comprehensive FBA & BIP
-504 plans & IEPs
-Wraparound supports
-Staff avoid trauma triggers

Tier 2
-Brief FBA & BIP
-Additional classroom supports
-Screening/SBIR
-Pupil services accessible & approachable
-Staff awareness of higher-risk groups
-Check-in, Check-out

Tier 1
-School policies promote safe climate
-Proactive behavior management
-Discipline system minimizes exclusion
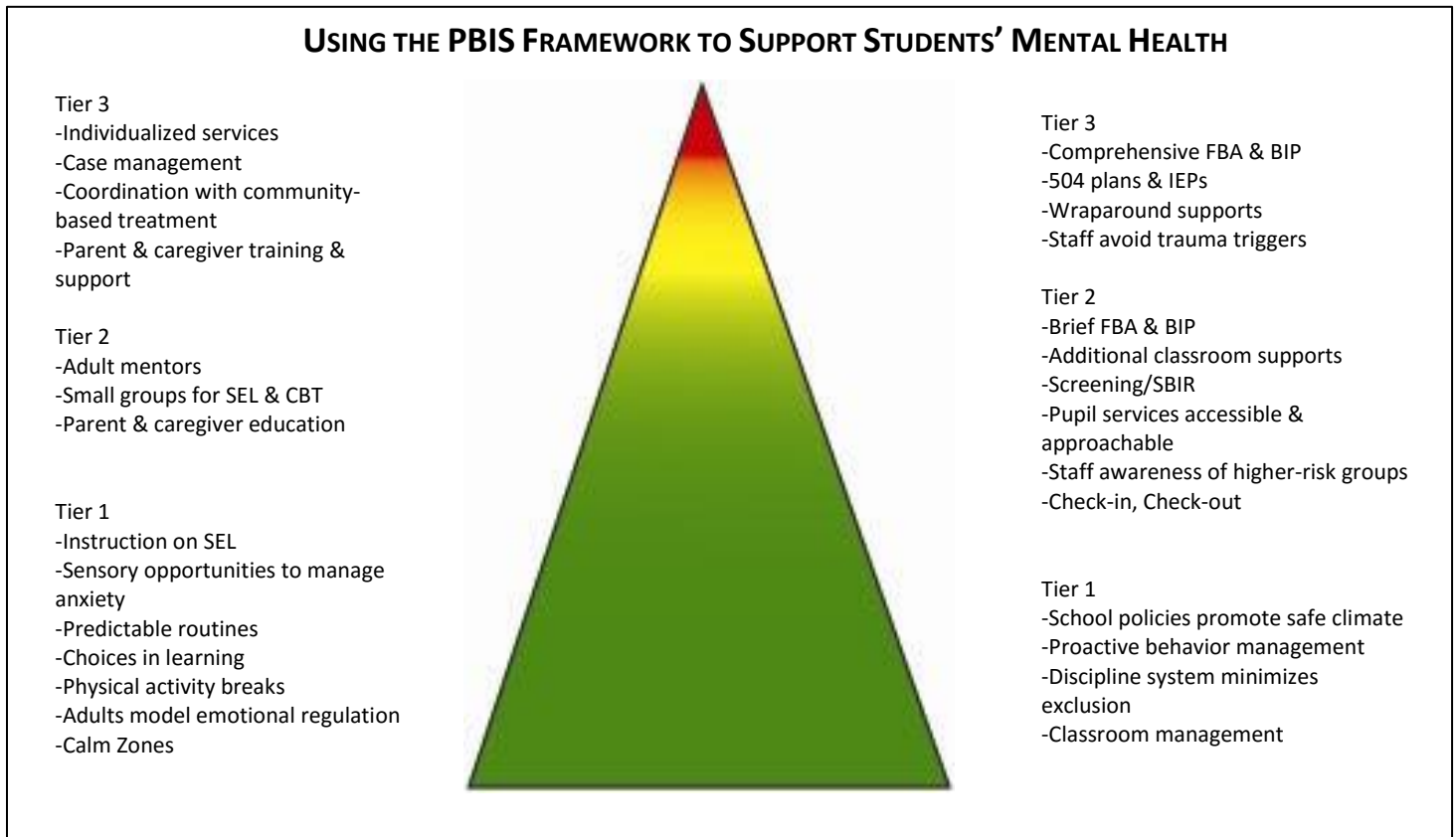-Classroom management

Figure 1: From Wisconsin Department of Public Instruction - Using Positive Behavioral Interventions & Supports (PBIS) to Help Schools Become More Trauma-Sensitive

CDE is dedicated to providing supports for each and every student in our schools.
Visit the Office of Facility Schools, Foster Care Education, McKinney Vento Homeless Education, and Serious Emotional Disability websites to find more information on serving students in facility schools, strategies, and supports.

CORE PRINCIPLES OF TRAUMA-INFORMED APPROACHES IN SCHOOLS

In order to implement trauma-informed approaches in schools, a school must adopt core principles. Core principles leverage the core beliefs presented earlier and go further to provide a large-scale view of how trauma-informed approaches in schools should be achieved and guidance for action. Commonly utilized core principles of trauma-informed approaches in schools include understanding trauma and its impact; belief that healing for students happens in safe, supportive, positive relationships among and between staff, students, and families; ensuring physical and emotional safety; support choice, control, and empowerment for students, staff, and families; striving for cultural competence; view students holistically; and use a collaborative approach across staff, and between staff and students and families (Adapted from Guarino & Willis-Darpoh, 2016; Cole et al., 2005). The COACT Colorado cross agency collaborative have adopted core principles specific for Colorado. These principles are in the highlighted section below.

COACT Colorado

Principles: The Essential Elements of Trauma Informed Care
   Maximize physical and psychological safety for children and families.
   Identify and respond to the individualized needs and strengths of children and families who have experienced trauma.
   Enhance child well-being and resilience.
   Enhance family well-being and resilience.
   Enhance the well-being and resilience of those living in the community and those working in the system, including supporting self-care for providers and addressing secondary traumatic stress.
   Partner with youth and families, including utilizing peer/family voice at all levels from policy to practice.
   Support and promote positive and stable relationships in the life of the child and the family.
   Recognize and respond to gender, cultural, and historical issues.
   Ensure all families have equal access to resources and equal opportunities.

*Adapted from the NCTSN Toolkit

The agreement and adoption of core principles guide implementation by shifting perspectives from traditional approaches in schools to a trauma-informed approaches. This shift is imperative to change the culture and ultimately change outcomes for students.

Traditional School Perspective	Trauma-Informed Approaches in Schools Perspective
❖ Student's challenging behaviors are the result of individual deficits (e.g., what's wrong with you?) ❖ Understands difficult student behaviors as purposeful and personal. ❖ Focuses on changing the individual to "fix" the problem. ❖ Adults need to uphold authority and control with students and families. ❖ Punitive discipline works. ❖ Support for students exposed to trauma is provided by counseling professionals.	❖ Students challenging behaviors may be ways of coping with a traumatic experience(s). ❖ Understands difficult student behaviors may be automatic responses to stress. ❖ Focuses on changing the environment. ❖ Adults need to offer flexibility and choice to students and families. ❖ Positive discipline that is instructional and focuses on teaching and reinforcing prosocial replacement behaviors works. ❖ Support for students exposed to trauma is the shared responsibility of all staff. ❖ Restorative practices.

IMPLEMENTATION SCIENCE AND TRAUMA-INFORMED APPROACHES IN SCHOOLS

Implementing any innovation in schools is a process, not an event. Schools adopting trauma-informed approaches in schools requires multiple levels of decisions, actions, and mitigations. Planning for implementation that will be durable and sustainable requires considering long-term implementation and is aided by utilizing the stages of implementation designed by the National Implementation Research Network (NIRN). The table below describes that stages of implementation and the description of each stage as it pertains to implementing trauma-informed approaches in schools.

Table 1: Stages of Implementation & the Description of Activities Necessary to Implement Trauma-Informed Approaches in Schools at Tier 1

Stage	Description
Exploration	❖ Build knowledge ❖ Assess readiness ❖ Garner Staff and Community Buy-in ❖ Determine need
Installation	❖ Establish infrastructure ❖ Envision your trauma-informed approaches in school. ❖ Develop plan - identify framework and practices to organize your vision ❖ Create team to lead implementation efforts ❖ Train team, staff, and community in trauma-informed approaches
Initial Implementation	❖ Begin implementation ❖ Work out details ❖ Learn and improve ❖ Align and integrate with other practices (e.g., PBIS, restorative practices, social emotional learning, emergency planning) ❖ Ensure implementations of strategies across academics, assessment, behavioral supports, educator capacity, and family, caregiver, and community partnerships,
Full Implementation	❖ Evaluate impact ❖ Adjust to changing needs of the school community based on student population and types of trauma experienced ❖ Sustain systemic changes

KEY DOMAINS OF TRAUMA-INFORMED APPROACHES IN SCHOOLS

The final portion of this guidance focuses on the key domains of implementation of trauma-informed approaches in schools. There are many programs and practices that focus on implementing school-wide trauma-informed approaches to a varying degree of success. Instead of highlighting one program, this guidance will provide look-fors across six key domains to support schools in determining the best approach to implementation and utilization of evidence-based practices based on context, fit, relevance, and resources. This is intended to provide look-fors in future and current implementation as well as additional resources to support school level implementation. The following six key domains were adapted from Guarino and Willis-Darpoh (2016) and resources from the Wisconsin Department of Education (2017).

Six Key Domains of Implementing Trauma-Informed Approaches in Schools

1. Supporting staff development.
Staff must be trained with a baseline understanding of trauma and its' impact on students and staff. Staff development includes ongoing learning and coaching in trauma-informed practices to support implementation across academics, assessment, behavioral supports, and family, caregiver, and community partnerships. Additionally, staff need to receive ongoing professional learning in evidence-based practices that are essential in supporting students including problem-solving, cognitive skills, emotional regulation, and social emotional learning. Staff are taught student triggers and how to avoid them, including recognizing verbal and nonverbal early warning signs of student escalation. Skills and strategies to de-escalate and defuse situations is equally emphasized and explicitly trained.   Self-care is an essential component of staff development to prevent and mitigate vicarious trauma and compassion fatigue. Staff development is utilized to teach and encourage staff to participate in self-care activities in their work and personal lives.

2. Creating a safe and supportive environment.
All adults must be responsible for creating and maintaining a physically, socially, and emotionally safe learning environment. This includes training and expertise in culturally responsive practices to learn and value the cultural history of students and their families. All crisis prevention and intervention practices integrate trauma-informed strategies and practices. Belonging and safety is a priority. Building relationships among staff and students is the foundation of this environment. All interactions between students and adults are healing and build resilience skills in the students. Attention is given more as a means to build relationships than to correct unwanted behavior. A ratio of 5 positive interactions to reinforce prosocial behavior to every 1 interaction aimed at decreasing undesired behavior will assist in supporting connectedness, build relationships, and promote the feeling of mastery.

3. Assessing Need and Providing Appropriate Supports.
This requires that all school-based screening and assessments consider potential impact of trauma and plans consider ways to address trauma. A variety of academic, behavioral, and social emotional assessment methods are used to allow students to demonstrate knowledge and skill. It also requires a mechanism to measure and progress monitor a school's ongoing implementation of trauma-informed approaches.

4. Building Strong Social and Emotional Skills.
School must integrate universal strategies to model, teach, and practice self-regulation, self-awareness, social awareness, relationship skills, and responsible decision making. Explicit emphasis is paid to problem-solving and emotional and physiological regulation. Students are taught how to identify and process their emotions.

5. Collaborate with Students and Families
Students, families, and caregivers are given a voice to express their concerns. The school environment and practices within it is built on students' strengths. The school builds trusting relationships with families and caregivers. Families and caregivers are encouraged to take a leadership role in the community. Family and caregiver voice is integral in developing school policies and procedures.

6. Policies and Procedures
Existing policies and procedures are reviewed regularly against trauma-informed core beliefs, principles, and values and modifications are made when inconsistencies arise to ensure full alignment. Discipline, communication, and safety procedures reflect an understanding of trauma and are consistent with beliefs, principles, and values. Policies and procedures at the local school level are presented to the school board to educate the board on trauma and its impacts in order to modify school board policies as needed.

FINAL THOUGHT ABOUT TRAUMA INFORMED APPROACHES IN SCHOOLS

Concerns regarding the impact of trauma exposure on the social, emotional, and academic success of our Colorado youth has been fueled by the growing evidence of its impact on biological, psychological, and social emotional development. There is a growing realization that toxic stress is impacting more and more students in our state each year. It is imperative to the Colorado Department of Education to provide an aligned message to schools and districts across the state in order to establish common language and common understanding of trauma, its prevalence, and the essential steps to take to help mitigate the impact of trauma exposure so that each and every student can thrive. By organizing trauma informed approaches within a Multi-tiered System of Supports (MTSS) framework, utilizing effective implementation practices, adopting its core principles as a lever for change, and targeting the six key domains when considering contextually relevant strategies and supports, districts and schools can successfully create supportive environments for all students.

This document was not meant to be provide an exhaustive list, as the trauma-informed research base and supported literature continues to emerge, but to instead provide some guidance in how schools can utilize trauma-informed approaches to change social, emotional, and academic outcomes for all students. To this end, this document emphasized the consideration of trauma informed approaches within universal tier 1, in order to create school-wide efforts, shared responsibility, positive environments, and aligned efforts with other evidence based practices existing in schools (e.g., PBIS, restorative practices, Social Emotional Learning). Research as well as practices from experts and implementers from across Colorado and the country were utilized to explore the essential components of successful implementation of trauma-informed approaches contained within this document. Additional evidence-based resources and references were also included for further investigation and adoption decisions at the local level.

This CDE guidance document is meant for clarification, is not legally binding, and is not to be confused with legal advice. This guidance reflects CDE's recommendations, but Administrative Units (AUs) may have developed their own policies or procedures that differ from those described herein. Be sure to refer to your local AU's policies and procedures through the Director of Special Education. If you are seeking legal advice, please contact your legal counsel. The contents of this document were developed under a grant from the U.S. Department of Education. However, the content does not necessarily represent the policy of the U.S. Department of Education, and you should not assume endorsement by the federal government. Multiple programs made this document possible. Special thanks to the Colorado Project AWARE Grant through the Office of Health and Wellness, the Office of Learning Supports, the Office of Special Education and the Office of Dropout Prevention and Student Re-engagement.

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Where can I learn more?

Guidance Documents:
Addressing Race and Trauma in the Classroom

Calmer Classrooms: A Guide to Working with Traumatized Children

Healing the Hurt: Trauma-Informed Approaches to the Health of Boys and Young Men of Color

Healing the Invisible Wounds: Children's Exposure to Violence - A Guide for Families

Helping Traumatized Children Learn: A Report and Policy Agenda Volume 1 – Guide to demonstrate the impact of trauma on children's learning, behavior, and relationship to school

Helping Traumatized Children Learn: Creating and Advocating for Trauma Sensitive Schools Volume 2 – Guide to creating trauma-informed schools

Optimum Learning Environments for Traumatized Children

SAMHSA's Concept of Trauma and Guidance for Trauma-Informed Approach - Framework for trauma and trauma-informed approach

Strategies and Resource to Create a Trauma-Sensitive School – Guidance from the Wisconsin Department of Public Instruction

The Heart of Learning and Teaching Compassion, Resiliency and Academic Success

The National Child Traumatic Stress Network (NCTSN) Child Trauma Toolkit for Educators

The National Child Traumatic Stress Network (NCTSN) Complex Trauma in Children and Adolescents

Trauma in Children and Related Learning Problems

Trauma Informed Care Toolkit – Resources to support trauma approaches in children and adolescents

Understanding and Helping Children Who Have Been Traumatized

Using Positive Behavioral Interventions & Supports (PBIS) to Help Schools Become More Trauma-Sensitive

Paper Tigers (2015)

Resilience (2016)

National Organizations:
National Child Traumatic Stress Network

National Institute for Trauma and Loss in Children

National Post Traumatic Stress Network

National Technical Center for PBIS

Websites with School-Based Resources:

Creating Sanctuary in Schools

School Mental Health Project

Trauma Aware Schools

Integrating PBIS and Trauma

Wisconsin Department of Public Instruction – Resources and learning modules on implementing Trauma-Informed Approaches in Schools

Books:

Bloom, S.L. & Farragher, B. (2013). Restoring sanctuary: A new operating system for trauma informed systems of care. New York, NY: Oxford Press.

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APPENDIX A: COACT Colorado Core Beliefs

COACT Colorado

Core Beliefs: The Core Concepts of Child & Adolescent Trauma

Traumatic experiences are inherently complex.

A child's experience of trauma is shaped within a broad context that includes children's personal and family characteristics and relationships, life experiences, development, current circumstances, and historical and cultural context.

Traumatic experiences often generate secondary adversities, biological changes, life changes, and distressing reminders in children's daily lives.

Children can exhibit a wide range of responses to trauma and loss.

Danger and safety are core concerns in the lives of traumatized children.

Traumatic experiences affect the family, broader caregiving systems, and the community.

Protective and promotive factors, including health relationships, can reduce the adverse impact of trauma.

Trauma and post-trauma adversities can strongly influence development.

Developmental neurobiology underlies children's reactions to traumatic experiences.

Culture is closely interwoven with traumatic experiences, response, and recovery.

Challenges to the social contract, including legal and ethical issues, affect trauma response and recovery.

Working with trauma-exposed children can evoke distress in providers that makes it more difficult for them to respond to the children's needs.

The supportive environments and relationships that are essential for the healthy development of children who have experienced trauma are beneficial for all children.

*Adapted from the NCTSN Core Curriculum on Childhood Trauma Task Force (2012)

More information can be found at COACTCOLORADO.ORG/TRAUMA