# **Article**

# Why Schools Need to Be Trauma Informed

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o educators and schools have an informed role to play in the lives of students struggling with unprocessed traumatic memories other than providing cognitive learning experiences? Although schools are not mental health facilities and teachers are not therapists, teaching today's students requires alternative strategies and skills compared to what worked a generation ago.

The correlation between trauma and low academic achievement is very strong and relevant. [Perry, 2004; Schore, 2001; Stein & Kendall, 2004] With the current extraordinary focus on test scores, educators are missing a significant information- base directed toward learning successes along with a reduction in behavioral out-bursts and drop-outs.

Schools have attempted to address learning and behavioral dilemmas repeatedly over the last decade with traditional educational strategies and minimal success, Focusing on what actually are symptoms of traumatic stress as opposed to the root cause, which is trauma itself, has not resulted in the desired outcomes for students or schools. The field of education, from preschool through teacher training, cannot ignore the issue of traumatic stress if schools are to meet the expectations of parents, community, and the nation.

Becoming a trauma informed school goes beyond identifying and referring students with traumatic stress to outside services; taking a passive role will not bring about the steps necessary to assure every student will meet their full potential.[Perry, 2004]. Improving academic achievement in rural, suburban, and urban schools requires educators examine the cross-discipli-

nary research of neurobiological research and traumatology.

### **Understanding Altered Brain Development**

Changes in society, employment, entertainment, and family have contributed to changes in early childhood experiences of many students which has resulted in altered brain development and traumatic stress. [Schore,2001; ; Siegel, 2007;Solomon & Siegel, 2004]. Effectively teaching today's students requires alternative techniques and school policies in order for the school to meet academic expectations. Electronic imaging techniques clearly illustrate that brain structure and chemistry is altered for children who are anxious, insecure, and have experienced uncompleted attachments.

#### **Attachment Trauma**

Children who have not been afforded the opportunity to complete the attachment process during early childhood have reduced capacities for self-regulation, stress management, and empathy, according to Allan Schore. [2001] Early relationships that are predictable, soothing, and include ample eye contact, smiling faces, and touching, stimulate critical development in the prefrontal cortex, considered the executive manager of the neurological system. Perceived rejections and separations will continue to be a sensitive issue for these children and youth if not addressed by informed adults, especially in the elementary grades. [Bailey, 2000; Stein & Kendall, 2004; Badenoch, 2008].

Children with an underdeveloped pre-frontal cortex

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often present disruptive and unsettling behaviors in early elementary classrooms due to separation distress and not having the neurological structure necessary for self-regulation. Unfortunately, these behaviors can be misinterpreted as misbehaviors, not stress behaviors, and are reacted to with disciplinary actions. Such reactions, in turn ,are then interpreted by the child as another rejection, setting in motion a pattern of emotional insecurity and behavioral issues that greatly interfere with learning for the rest of the student's education.

Implicit memories from early infancy of angry or frustrated faces remain encoded in their amygdale unless processed and externalized. [Badenoch, 2008] Whenever the child, later as a student, sees the same facial expression on a staff member, that same sense of rejection and shame is generated, only the student has absolutely no awareness of the reason why the internal anxiety has arisen. Those implicit memories were encoded without narrative and are now not available to the student cognitively. Such experiences can result in social and relationship patterns that become lifelong struggles for children who were denied the opportunity to attach. [Colozino, 2006]

Having Experienced or Witnessed Chronic Violence

Natural disaster, accidents, and other single incidents of distress can traumatize a child but the chronic stress of family or community violence or abuse will have the most lasting effect on the child's brain.

Early childhood experiences of fear and terror tend to be recorded without words or narrative. These implicit memories are stored in the amygdale, deep within the limbic area of the brain and cause perceptions of help-lessness along with over-sensitized fear-alarm reactions whenever the child or youth perceives a threat.[Colozino, 2006; Oehlberg, 2006] Such fear reactions, even in school, are prompted by an automatic shift out of the neo-cortex into the limbic area for survival purposes of fight, flight, or freeze. [Perry, 2004,; Levine & Kline, 2007]

These survival reactions, generated by unprocessed memories of terror and loss, directly complicate learning and classroom climates. These students are not able to communicate their sense of fear and doom with words but do so through behavioral out-bursts and

class disruptions. Unfortunately, such behaviors can be interpreted by uninformed adults as disrespect and defiance; even as ADHD. Normal disciplinary actions that may follow will result in the student continued processing out of the limbic system and not the neocortex. Students cannot learn or problem-solve when not in the neo-cortex. [Forbes & Post, 2006]

Students with traumatic stress pay particular attention to teachers or school personnel who are beginning to lose control, indicated by a changed breathing pattern, facial expression, and tone of voice. These cues will trigger perceptions of vulnerability for students with unprocessed traumatic memories. Such survival reactions by students following a perceived threat are neither rational or by choice as they are not generated by the central nervous system and neo-cortex; neither are they acceptable. They are sensory reactions generated by the limbic system and appear to be anger rather than fear. Anxious student's need for emotional security at such times will go farther in reinstating a classroom climate beneficial to learning than shame or threats [Forbes & Post, 2006].

One student's fear-alarm reaction can trigger and spread to other students with unprocessed traumatic stress, creating a classroom climate in which little learning ensues. [Oehlberg, 2006; Dallmann-Jones, 2006] Trauma sensitive student's ability to learn is further compromised by their inability to focus and stay on task.

At the other end of the behavioral spectrum, traumatized students may present dissociation and appear very numb, passive, and frequent daydreaming in class. Although these students may not upset classroom climate, they are not actively engaged in cognitive learning as they struggle with internal static and confusion. Bruce D. Perry states that these students hear about half the words spoken by their teachers, causing them to fall behind year after year [Perry, 2004].

Traumatized students are unable to problem-solve or participate in their own safety after they have downshifted out of their neo-cortex when threatened. Regretfully, this sense of helplessness can prompt some teens to be more afraid of life than of death, making them exceedingly difficult to motivate in the classroom.

## **Being Trauma Informed: What it Means**

Integrating trauma sensitivity into the educational system constitutes a paradigm shift but with minimal costs. The information on how brain development is altered because of early childhood insecurities has stunning implications for school policies and teaching techniques. It counters most of the assumptions about misbehaviors wall of us heard in our respective childhoods and throughout our professional education. Despite these challenges to our understandings, becoming a trauma informed school affords significant benefits to staff and students.

- Administrative commitment: Integration of trauma sensitivity begins with the administration by clearly endorsing that all students will be safe inside the school, on the school grounds, and on the busses. The framework of total security, primarily emotional security, will become the primary focus in all situations and actions by students and staff. The power of relationships will be acknowledged and practiced, with every student being assigned a staff member in a caring supportive team relationship. Building a school climate of respect and generosity of spirit by all can be initiated only by administration.
- **Disciplinary policy:** Traditional disciplinary policies and protocols tend to aggravate the sense of rejection by offending students who have a traumatic history. Such policies generate a sense of internal shame that has been encoded since early childhood.. A trauma informed policy is built on the premise that infractions are generated by insecurities and fears, not anger or by choice. Instead of punishments, the focus will be on ways to restoring the offending student to the school community. [Amstutz & Mullet, 2005; Oehlberg, 2006; Forbes & Post, 2006]
- Staff development: In-services on brain development and trauma will be presented to all staff; teaching, non-teaching, and volunteers. Particular attention will be given to the sensitivity of students with traumatic stress to the body language, non-verbal communications, and use of threats by staff. Bullying and shaming by adults will not be tolerated as it retraumatizes students. Included in these in-services will be bus drivers, security personnel, office staff, cafeteria staff, tutors, volunteer playground and hall

monitors. Teachers will be introduced to classroom sensory activities for externalizing and transforming unprocessed memories of helplessness that fit into core curriculum subjects.

- Counselors, school psychologists, and serving mental health specialists serving the school:

  Screening and assessment tools that indicate traumatic experiences, past and present, will be introduced and used, not just identifying symptoms.

  Interventions will be encouraged. Relationships with trauma-specific mental health providers in the community will be developed.
- **Students:** Information on the human brain and its development will be introduced sensitively into health classes, including survival adaptations and resiliency requirements. Student CARE Teams will be encouraged at the high school level to meaningfully connect with and support those students who are not fully integrated into the school community [Perry, 2006].

# **Benefits for Being a Trauma Informed School**

- Improved academic achievement and test scores.
- Improved school climate.
- Improved teacher sense of satisfaction and safety in being a teacher.
- Improved retention of new teachers.
- Reduction of student behavioral out-burst and referrals to the office.
- Reduction of stress for staff and students.
- Reduction in absences, detentions, and suspensions.
- Reduction in student bullying and harassment.
- Reduction in the need for special educational services/classes.
- Reduction in drop-outs.

At a time when schools and teachers are exceedingly stressed and stretched, becoming trauma informed may seem an ambitious and challenging strategy. However, the rewards for everyone involved are real and energizing.

TLC will be offering an internet course in Jan. 2009, featuring strategies that could be used by counselors, mental health professional, and other dedicated persons to facilitate a school becoming trauma informed.

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