



# TRAUMA SENSITIVE STRATEGIES

Studies estimate that between 3.3 million and 10 million children in the U.S. witness violence in their own homes each year<sup>1</sup>. Children who have experienced early, chronic trauma – such as family or community violence – can develop emotional, behavioral, cognitive, and relationship difficulties that can adversely affect their ability to learn and function well in school. The area of a child’s brain that is associated with the fear response may become overdeveloped, causing the child to act out using a fight or flight response when triggered by a trauma reminder, even when there is no actual threat to fear.

Exposure to trauma is associated with a higher risk for school dropout and, in turn, dropping out of school increases the risk of being imprisoned.

The goal of creating a “trauma sensitive school” is to reduce problem behaviors and emotional difficulties, as well as optimize positive and productive functioning for all children and youth. When schools are able to address the behavioral health needs of students in a proactive manner, rather than a reactive one, they can increase the resources available to promote educational goals. It is also crucial to support the wellness of school staff, addressing chronic stress, burnout, and vicarious trauma.

[Fix School Discipline Mini Toolkit](#)

## ELEMENTS TO ADDRESS TRAUMA AND PROMOTE SOCIAL EMOTIONAL WELLNESS

**Leadership** by school and district administrators to create supportive school environments and promote collaborative services. The leadership team must reliably address each of three levels of services – whole school, preventative supports and services, and intensive services.

**Professional development** for school administrators, educators, and behavioral health providers – both together through cross-disciplinary trainings, and separately. Trainings should respect and take into account ethnic and cultural diversity, and ensure that staff is actively engaged respectfully and supportively with students and families.

**Access to resources and services** by identifying, coordinating, and creating school and community behavioral health services to improve the school-wide environment. These resources should also be clinically,



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linguistically, and culturally appropriate for students and their families.

**Academic and nonacademic approaches** that enable all children to learn – including those with behavioral health needs – and that promote success in school.

**School policies, procedures, and protocols** that provide a foundation for schools to implement and support the work, such as school curricula that includes Social Emotional Learning instruction in areas like problem solving, life skills, social-emotional development, interpersonal community, self-regulation, and violence prevention.

**Collaboration with families** where parents and families are included in all aspects of their children’s education and able to participate as equals in the planning and evaluation of programs and services.<sup>2</sup>