

Understanding and Managing Trauma in Children



Train the Trainer

2017



Akron Children's Hospital Trauma Train the Trainer Curriculum 2017 Melissa McClain

The PowerPoint, manual design, content choice, and the presentation of this curriculum is the intellectual property of the author. The use of this curriculum and any reproduction of its contents requires express consent of the author. This curriculum, all images, and media are to be used for academic purposes only and do not carry any commercial value.

If you have questions regarding the curriculum contact: Melissa McClain 330-620-4355 <u>mmcclain@chmca.org</u>

Using This Curriculum

This curriculum is designed to train educators on the impact of trauma on children. This curriculum may not be used without attending the train the trainer program in its entirety. This curriculum may not be used to host a train the trainer program without the author.

When their training is complete, trainees have permission to use the handouts, videos, and PowerPoint presentations in this manual and the provided flashdrive to train staff in their individual district. The PowerPoint slides are accompanied by training notes that provide information to assist the trainer while presenting the information to their district.

Trainees may wish to have additional booster trainings as well as continued support from Akron Children's Hospital. The author is available for technical assistance regarding the implementation of individual trainings as well as extended support for new information, material, and classroom techniques.

The Train the Trainer Curriculum consists of the following four key components:

• An Introduction to Trauma

• This component includes the basics of trauma, what types of trauma students may face, and how trauma can affect a student's physical, emotional, and cognitive abilities.

• Managing Trauma in the Classroom

 This component also discusses techniques to prevent a trauma based reaction in the classroom and what to do if a child is acting out in your classroom.

• Increasing Developmental Assets in Children

 This component uses the Search Institutes Developmental Assets to guide schools to work with all students by increasing their resiliency skills, coping skills, and other abilities.

• Recognizing Secondary Traumatic Stress

• This component works with the educators to recognize their own compassion fatigue or burnout. It covers techniques for staff to use to relax, keep balance, and continue to help students in need.



Session 1

An Introduction to Trauma



Train the Trainer

2017

Training Plan Worksheet

Directions: This worksheet is intended to guide you in planning your trainings. Feel free to use this sheet as a space for you to jot down notes and ideas.

1. Think of the audience with which you will deliver this training. What can you do to encourage and strengthen their understanding of trauma?

2. In what setting will the training be best received?

3. When is the best opportunity to get 60 minutes of your staff's time?

4. What are your main concerns with conducting this training? Any foreseeable barriers to hosting the training?

Session 1: An Introduction to Trauma Time Required: 60 minutes

Description

An Introduction to Trauma is designed to inform educators and other school staff about trauma and the impact on a child's ability to learn and behave.

Learning Objectives

During Session 1:

- 1. Participants will define 3 ways children experience stress and the stress response system.
- 2. Participants will define 3 types of psychological trauma.
- 3. Participants will discuss 2 physical, cognitive, emotional, and behavioral effects of trauma.
- 4. Participants will define the ACE Study and 2 effects on of trauma on adult health outcomes.

Prepare

- A training date and space. Notify all staff of training date and space.
- Prepare one large post it that is labeled "graffiti wall" at the top. Hang the large Post It at the front of the training space.

Equipment and Materials

- Laptop computer and projector
- Large screen or blank wall
- Large paper/white board/, markers or chalk board /chalk
- All handouts including printed copy of PowerPoint if requested

Methods Used in this Session:

Lecture, video clips, demonstrations, simulation

Required Handouts

- Printed copy of PowerPoint for each participant if requested
- Copy of the Session One Exit Ticket for each participant

Getting Started

Session One Agenda

- Session Opening
 - Introduce yourself, optional participant introductions
 - OPTIONAL: Pre-Test questionnaire implementation
 - What to expect during session one of this training

• Training Topic in PowerPoint: Introduction to Stress Response System

- Amygdala
- Hypothalamus
- Hippocampus

• Training Topic in PowerPoint: Trauma Introduction

- Positive, Tolerable, Traumatic Stress
- Acute, Chronic, Complex Trauma

• Engage participants in Group Discussion

• Is trauma real in our school district?

• Training Topic in PowerPoint: Trauma's Impact on a Child

• Physical, Emotional, Social, Cognitive, Future planning

• Training Topic in PowerPoint: ACE Study

- Study description
- Discussion of study conclusions

• Wrapping Up

- Provide Introduction Summary of Session Two
- OPTIONAL: Post-Test Questionnaire implementation
- Hand out Session One Exit Ticket
- Collect completed Exit Tickets
- Thank the participants



Display this PowerPoint slide as the participants are entering the training space. As they arrive, participants should be given all necessary handouts for this session.

OPTIONAL: Ask your participants to complete the Session One Pre-Test questionnaire before we begin. (Provided in Appendix A of this manual) Collect the completed Pre-Test questionnaires before beginning the session.

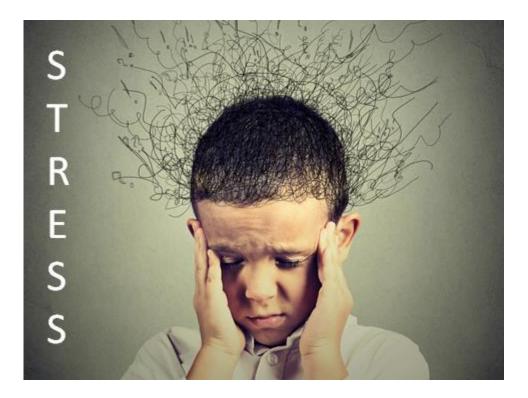
When all the participants have arrived and been seated welcome and thank them for attending the training. Introduce yourself, describe your train the trainer experience and your role as the trainer.

SAY:

This session will be an overview of trauma, what types of trauma our students may face and how the impact of that trauma can affect how our students learn and behave during their time with us.

Before we can understand how trauma can affect a child, we first need to understand stress and how our bodies cope with stress.

Advance Slide Slide 2



Have you ever experienced stress? Can someone give me an example of when you feel stress?

Allow for 2-3 examples from the participants. Thank the volunteers.



Stress works on a continuum. We all experience stress at one time or another. We can use this spectrum or one like it to describe how much stress we are experiencing. We can also use a spectrum to identify when we need to take a break.

Using a spectrum is very helpful with dealing with the stress of our students. Typically, we address stress in our students when they have reached a 9 or 10 on a 1-10 spectrum of stress. Waiting until a student has reached a 9 or 10 is too late. It is a part of our goal as professionals to begin noticing when a child is in the 4-7 zones. If we can address stress at a lower level, we will be able to calm the student down before they act out. There are many stressors that we face every day.



What types of stressors do you experience as an adult?

Allow 1-2 minutes for examples from the participants. Feel free to give your personal stressors as an example.

SAY:

As adults we experience many stressors that we bring to school with us every day. Our stress can impact the way we feel and the way that we teach. Some of the stressors may be very serious like financial or health problems. We will often excuse our own negative behavior because we know that we are stressed out. We do not always give children the same benefit.

Our students have many stressors that are similar to the stress that adults feel, but they also have stressors that are unique.

What do our students stress about?

Allow 1-2 minutes for examples from the participants.





Discuss each of these stressors and feel free to add some of your own.

SAY:

It is important to note that sometimes, as adults we de-value the stressors of children. We think that because our worries may be more complicated, the "easy" stress that a child may face is less serious. However, the stress that a child experiences over friends, homework, and testing will impact them in the same way that high stress can impact an adult who is stressed about a sick parent, financial problems, or work/life balance.

We need to acknowledge that a child is stressed and that it needs attention.



(TV Commercials DB, 2014)

Play the Jell-O Pudding video

This is a perfect example of a child that is stressed. We as adults may look at this child and think, "Puzzles, ABCs? That sounds like a fun day!" However, this stress can produce the same biological reaction in a child than that of serious adult stressors.

Advance Slide

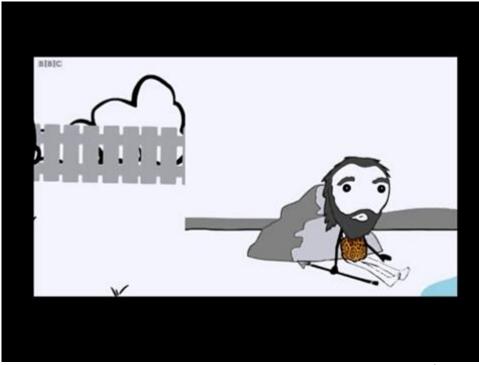
Slide 6





When we experience stress, our bodies go into hyper-drive. We experience an evolutionary process in our body called the Stress Response System.

```
Slide 8
```



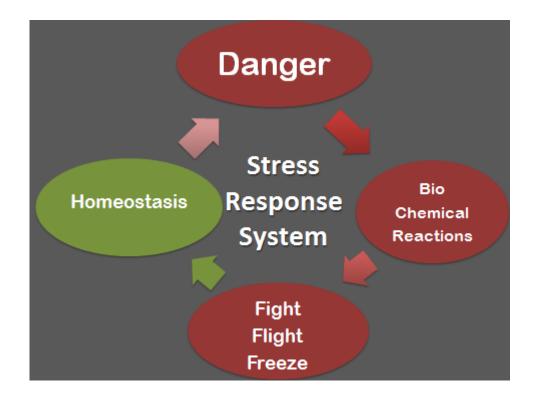
(BBC, 2010)

Play the BBC Stress Response System video.

SAY:

How many of you have ever felt like this?

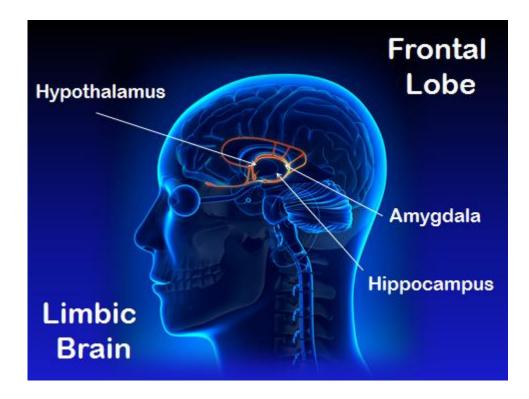
How many of you know students who feel like this?



Here is the process of the stress response system. Under normal stress when the brain senses danger it sends signals to the body. Chemicals are released as the body prepares the fight, flight or freeze response.

When the danger is alleviated, the body is meant to return to a state of homeostasis, a state of calm.

When the stress response system is activated reactions are instinctive, thinking is not involved, and the conscious mind is not involved. The Stress Response System protects our body from any avoidable danger.



Here is our brain. There are 3 main brain components that are activated during the stress response system. These 3 brain components live in what is called the Limbic Brain. The Limbic Brain supports a variety of functions, including emotional reactions and survival skills.

The 3 brain components involved in the stress response system are the amygdala, the hypothalamus, and the hippocampus.

The **amygdala**, (The Police Officer) is where danger is first perceived. The amygdala will alert the hypothalamus and the hippocampus into action.

The **hypothalamus**, (The Personal Trainer) gets the body ready for action. It tells the endocrine system to secrete stress hormones, such as adrenaline and cortisol which can prepare the body to respond to threat or danger. In addition, the heart rate, blood pressure, and breathing all increase. Blood rushes to the muscles while digestion and the immune system are switched off.

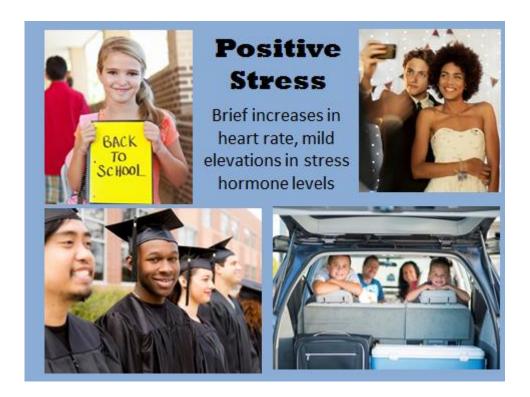
The **hippocampus**, (The Secretary) stores memories based on our life experiences. Our past experiences and perceptions can be used in future situations to help guide us to our responses. These "gut responses" are not coming from our thinking brain. They are instinctive and come from the survival part of our brain.

When a child is faced with continuous stressors they can get stuck in the stress response system and stuck in their limbic brain. To think, behave, and learn a child must be functioning in their Frontal Lobe or the thinking brain. If a child is stuck in the limbic brain they are incapable of learning in your classroom.



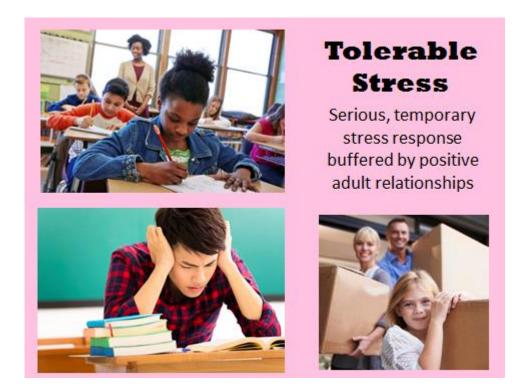


Our stress response system is regularly activated throughout our day. There are 3 types of stress that some of our students may face. Though we all experience stress, not everyone experiences traumatic stress.



Positive stress is stress that comes from positive events and interactions in life. Examples of positive stress include the first day of school, joining a new club or sport, or important milestones like Prom or Graduation. This stress is short lived and is alleviated by strong support from family and friends.

Slide 13



SAY:

Tolerable stress is everyday stress that needs managed.

Students may feel tolerable stress when they are overwhelmed with homework or testing. They may feel tolerable stress at home with a separation of parents or moving to a new school. This stress needs to be addressed and managed. This stress is also be alleviated by strong support from friends and family.



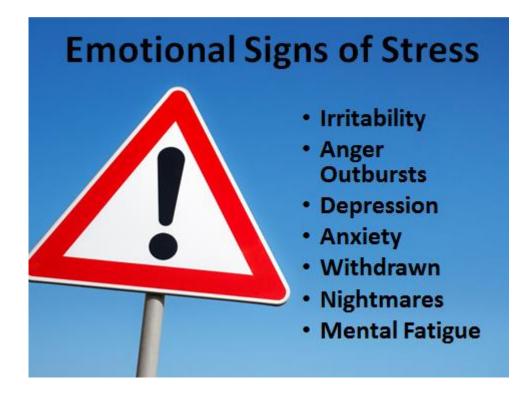


There are many ways that our body physically tells us that we are stressed out!

How many of you have ever experienced any of these symptoms?

Allow 1 minute to discuss.



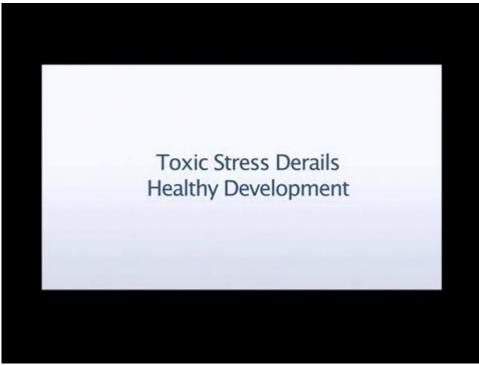


There are many ways that our body emotionally tells us that we are stressed out!

How many of you have ever experienced any of these symptoms?

Allow 1 minute to discuss.





(Center on the Developing Child at Harvard University, 2011)

Play Toxic Stress Video

SAY:

This video is a good example of how stress can turn traumatic and permanently set a child's stress response system on high alert. It is important to understand that this type of stress can have real and deep impact on a child's development.



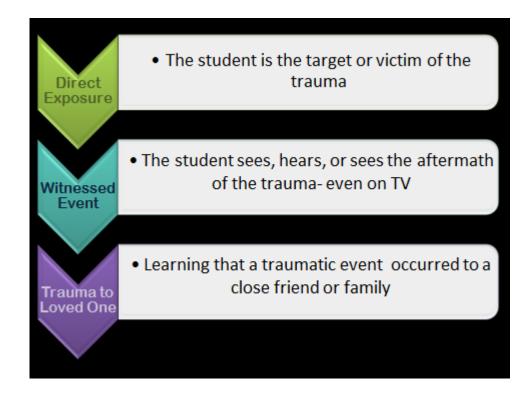
Traumatic stress is stress that creates prolonged activation of the stress response system.

Children who experience traumatic stress may never get an opportunity to return to a calm state. These children often lack positive adult support that can buffer the stressors they experience.

This doesn't necessarily mean that a child lacks positive adult relationships in their lives, but they may not share with their trusted adults that they have experienced a trauma at all. Therefore, these children will have to cope with this trauma alone.



A child that has experienced trauma has experienced a real or perceived threat to themselves or a loved one, or experiences continuous feelings of terror, horror, helplessness, or fear. Experiencing trauma can permanently set a child's stress system on high alert.



A child can be exposed to trauma in several ways. The child may be directly exposed to a trauma, like experiencing a house fire or child abuse.

They may also witness the trauma, like witnessing domestic or community violence. They may also experience trauma by learning of a traumatic event that has happened to a close loved one.



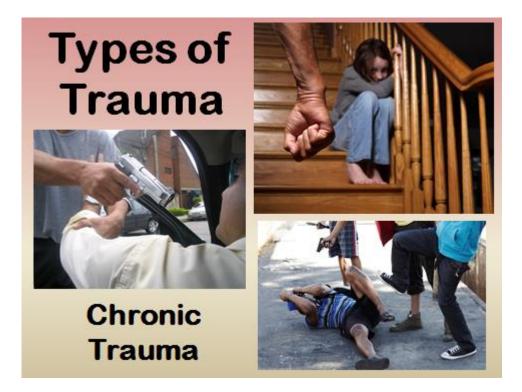
Experiencing trauma can lead to overwhelming feelings of terror, horror, or helplessness. There are 3 different types of trauma that a child may be exposed to. The first of these is acute trauma.

The following events are considered *acute traumatic events* because they occur at a particular time and place.

Acute traumatic events include the following:

School shootings Gang-related violence in the community Terrorist attacks Natural disasters (for example, earthquakes, floods, or hurricanes) Serious accidents (for example, car or motorcycle crashes) Sudden or violent loss of a loved one Physical or sexual assault (for example, being beaten, shot, or raped) Dog Bites

```
Slide 21
```

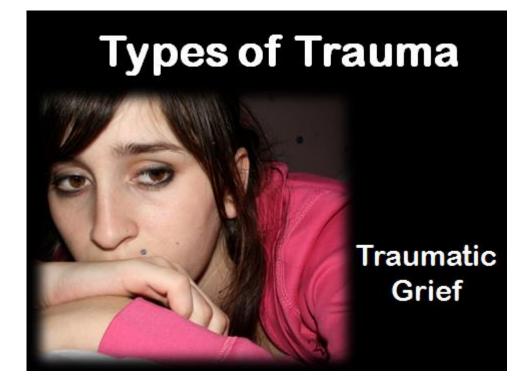


The second type is called chronic trauma. Chronic traumatic events occur repeatedly over long periods of time.

The following events are considered chronic trauma because it occurs multiple times and the impact can be greater and long lasting.

Chronic traumatic situations include the following:

Some forms of physical abuse Long-standing sexual abuse Poverty Domestic violence Wars and other forms of political violence



Children can have a difficult time understanding and coping with the death of a loved one. If that death is perceived as traumatic by the child, the death will be especially difficult for the child to cope. This traumatic grief can cause a reaction in the classroom.

Symptoms of *Chronic Traumatic Grief* include:

Preoccupation with the loved one or the death Social isolation Avoidance of reminders of the loved one or the death Lack of motivation or purpose Re-enacting the death through play or art



Complex trauma is a layering of chronic traumas. This example shows a child experiencing a house fire. The house fires leads to housing instability and food instability.

This child is experiencing complex trauma.

When a child experiences multiple traumatic events that occur over a long period of time in their life, it can affect their development physically, emotionally, and socially.



Trauma can escalate physical symptoms of stress. Children who have experienced trauma may consistently seek medical staff in the school building.

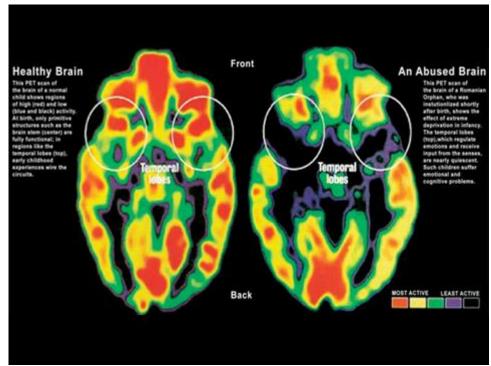
Go over the physical symptoms of trauma listed on the slide.

SAY:

Has anyone seen these symptoms in your school or classrooms?

Take 2-3 examples from the participants.

Slide 25



PET scans Healthy and Abused Brain Comparison, CDC

SAY:

This image is a comparison of a PET scan of the brain of a healthy child on the left and the PET scan of the brain of a child that was raised in a Romanian orphanage on the right.

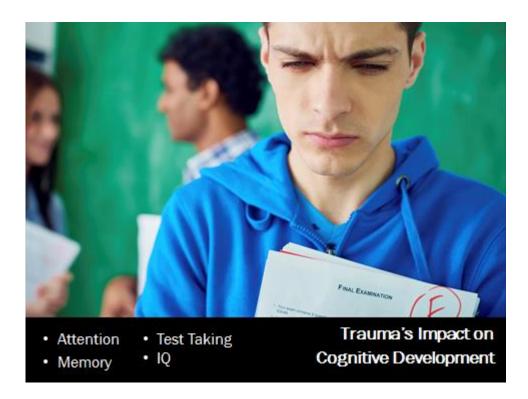
Take a look at the large differences in function, especially in the frontal lobe or thinking brain.

Trauma may affect many brain functions including memory, language, anxiety and fear management, thinking, impulse control, perceptual awareness, survival response management and attention.

Children who have experienced trauma may also have a smaller corpus callosum. A lack of a corpus callosum can affect the way that the 2 sides of the brain can communicate regarding cognition, emotion, language, reactions.

Trauma can also impact a child's DNA by prematurely shortening telomeres which prematurely ages the child.

Trauma isn't just something a child experiences, it is something that impacts a child at their core and can affect every part of their live.



Trauma can affect a child's attention and executive functioning. The impact can make it difficult for children to utilize their higher level abstract thought. Students may experience intrusive traumatic memories which can interfere with the ability to focus and think clearly at school. They can also struggle with memory and recall for testing.

Children who have experienced trauma can score up to 8 points lower in an IQ evaluation.

Trauma's Impact on Emotional Development

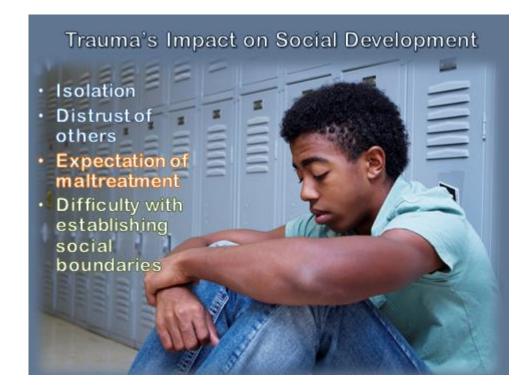


SAY:

When a child experiences trauma it can affect the way they regulate their emotions. Trauma triggers can especially put a child a risk for acting out emotionally.

They may also have a difficult time articulating how they feel due to a lack of emotional literacy and appropriate vocabulary. These children come to school with 3 emotional crayons. They can use happy, sad, and angry. They may also have a difficult time understanding the complexity of emotions in others. This may cause conflict with staff and peers. A child needs to be equipped with a 64 box of emotional crayons to be able to accurately articulate their needs.





Experiencing trauma can create conflict and difficulty in forming and maintaining relationships. A child who has experienced trauma may have trouble forming trust in a relationship. They may overreact to interpersonal conflict. Past experiences may lead them to be aggressive as a part of what they believe to be "normal."

These children desire connection with others; however, they may not have had past role models that help them understand healthy connection and relationships. Because of this, they may enter into abusive relationships, participate in high risk sexual behavior, or isolate themselves from relationships entirely.

Slide 29

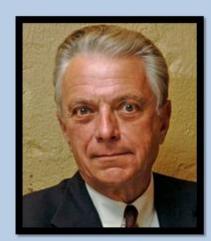


SAY:

As children reach puberty, hormonal changes, dating, and sexual initiation can trigger trauma reactions.

Some adolescents who have experienced trauma may seek out risk behaviors including tobacco, alcohol, and drug abuse, self-harm, and maladaptive eating.

Adverse Childhood Experiences Study



Dr. Vincent Felitti Kaiser Permanente



Dr. Robert Anda - Center for Disease Control and Prevention

SAY:

While working for Kaiser Permanente, Dr. Vincent Felitti was asked to work with patients in the Kaiser Permanente Obesity Program. He began to wonder why patients who had been successfully losing weight were dropping out. He found that a high proportion of those dropping out had histories of childhood abuse or neglect.

After interviewing many of these patients he learned that they were using eating as a coping mechanism to deal with physical and sexual abuse they had experienced as children. Felitti went on to collaborate with Dr. Robert Anda at the Center for Disease Control and Prevention in a large-scale study addressing Adverse Childhood Experiences and their impact on future outcomes. The study showed that adverse childhood experiences or ACEs led to negative coping mechanisms.

Slide 31

Did a parent or other adult in the household often or very often... Swear at you, insult you, put you down, or humiliate you? or Act in a way that made you afraid that you might be physically hurt? No If Yes, enter 1 Did a parent or other adult in the household often or very often... Push, grab, slap, or throw something at you? or Ever hit you so hard that you had marks or were injured? No If Yes, enter 1 Did an adult or person at least 5 years older than you ever... Touch or fondle you or have you touch their body in a sexual way? or Attempt or actually have oral, anal, or vaginal intercourse with you? No___If Yes, enter 1___ Did you often or very often feel that ... No one in your family loved you or thought you were important or special? or Your family didn't look out for each other, feel close to each other, or support each other? No___If Yes, enter 1___ Did you often or very often feel that ... You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? or Your parents were too drunk or high to take care of you or take you to the doctor if you needed it? No___If Yes, enter 1___

You can quickly go over each of the 10 questions included in the ACE study survey.

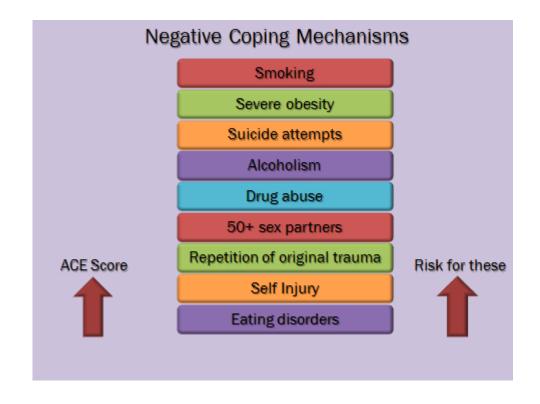
These 5 questions cover verbal abuse, physical abuse, sexual abuse, emotional neglect, and physical neglect.

Slide 32

•	Was a biological parent ever lost to you through divorce, abandonment, or other reason ? NoIf Yes, enter 1
•	Was your mother or stepmother: Often or very often pushed, grabbed, slapped, or had something thrown at her? or Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? or Ever repeatedly hit over at least a few minutes or threatened with a gun or knife? NoIf Yes, enter 1
•	Did you live with anyone who was a problem drinker or alcoholic, or who used street drugs? NoIf Yes, enter 1
•	Was a household member depressed or mentally ill, or did a household member attempt suicide? NoIf Yes, enter 1
•	Did a household member go to prison? NoIf Yes, enter 1

You can quickly go over each of the 10 questions included in the ACE study.

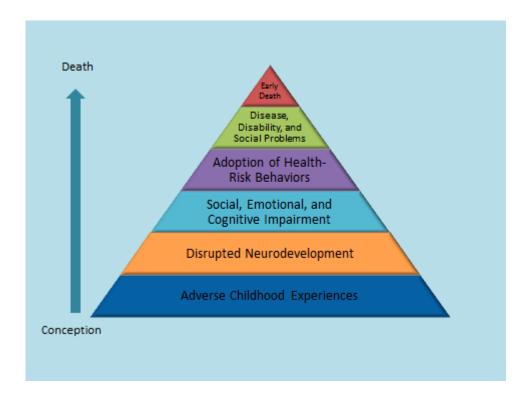
These 5 questions cover loss of parent, witnessing domestic violence, drugs or alcohol in the home, mental illness or suicide in the home, and incarceration in the home.



The ACE survey revealed that if a child scores 4 or higher on the survey that their risk for engaging in negative coping mechanisms rises.

Take 1 minute to go over the risk behaviors on the slide.



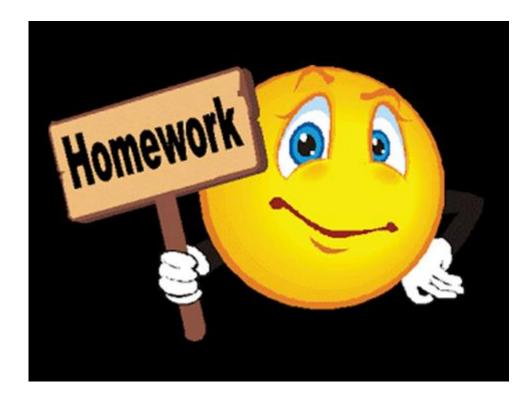


People with trauma histories attempt to cope with maladaptive and survival coping strategies. As a result of these, people may attempt to combat their feelings and anxieties with unhealthy and dangerous behaviors. Unfortunately, these high-risk behaviors can lead to many diseases, disabilities, and social problems like drug dependency, obesity, and involvement in violent relationships. These can lead to early death.

It is imperative to consider the possibility of trauma exposure when you have a child behaving poorly in your classroom. This child may not just have a "bad attitude." Before reacting, consider that they may have experienced something that has impacted them so deeply that it affects every facet of their lives. They may have experienced something that may lead them to unwanted reactions and behaviors as well as cognitive, emotional, and social difficulties. They may have experienced something that could lead them to engage in negative coping skills that cause disease, disability, and early death.

With that lens, you can increase your empathy and begin to formulate appropriate interventions that can help that student maintain calm in the classroom and learn at their highest capacity.





After each session I will ask you to complete a homework assignment. This session's homework is for you to begin observation in your classroom. Begin to view students with a trauma lens and journal some examples and your thoughts. Be ready to report your observations to the group at our next session.

The second session is titled Managing Trauma in the Classroom. It will cover specific tools that you can use in your classroom to maintain calm, recognize school triggers, and activities to specifically address negative behaviors.

Thank you and I will see you for Session Two!





Give each participant an Exit Ticket and OPTIONAL: Post Test questionnaire (APPENDIX A) and collect the completed handouts before the participants leave.

SAY:

Thank you so much for participating in our session today. We believe that learning about trauma can help us better understand our students and help them learn. We appreciate your commitment to this project.

Thank you and I will see you for Session Two! Have a great rest of your day!

These collected handouts (or copies) must be mailed to: Akron Children's Hospital School Health Services ATTN. Melissa McClain One Perkins Square Akron, OH. 44308 Or scanned copies may be emailed to: <u>mmcclain@chmca.org</u>

SCHOOL:_____

YOUR ROLE:_____

Exit Ticket

Please complete before you leave. I appreciate your participation and thank you for your input.

What were 3 "Ah-Ha" moments for you today?

What do you need from me?

Other thoughts and comments?



Session 2

Managing Trauma in the Classroom



Train the Trainer

2017

Training Plan Worksheet

Directions: This worksheet is intended to guide you in planning your trainings. Feel free to use this sheet as a space for you to jot down notes and ideas.

5. Think of the audience with which you will deliver this training. What can you do to encourage and strengthen their understanding of trauma?

6. In what setting will the training be best received?

7. When is the best opportunity to get 60 minutes of your staff's time?

8. What are your main concerns with conducting this training? Any foreseeable barriers to hosting the training?

Session 2: Managing Trauma in the Classroom Time Required: 60 minutes

Description

Managing Trauma in the Classroom is designed to provide educators and other school staff with practical strategies to address stress and trauma in the classroom and increase the learning capacity of students.

Learning Objectives

During Session 2:

- 5. Participants will describe 5 triggers that children face in the school building.
- 6. Participants will use the Spectrum of Prevention to detail 5 techniques that prevent and respond to a student experiencing a traumatic reaction
- 7. Participants will develop a plan to recreate 3 trauma informed strategies in their classroom in the next month.

Prepare

- A training date and space. Notify all staff of training date and space.
- Print all necessary handouts

Equipment and Materials

- Laptop computer and projector
- Large screen or blank wall
- Large paper/white board/, markers or chalk board /chalk
- All handouts including PowerPoint if requested

Methods Used in this Session:

• Lecture, group discussions, video clips, demonstrations, simulation

Required Handouts

- Copy of PowerPoint for each participant if requested
- Copy of Identify School Stressors handout
- Copy of Session Two Exit Ticket

Getting Started Session Two Agenda

- Session Opening
 - OPTIONAL: Pre-Test questionnaire implementation
 - What to expect during session two of this training
- Training Topic in PowerPoint: Review of Session One content
 - Types of trauma
 - Physical, Emotional, and Cognitive impact
 - Common presentation of trauma
- Group Discussion

•

•

- Homework assignment discussion
- Training Topic in PowerPoint: Classroom Behaviors
 - Re-experiencing/Reenactment
 - Hyperactivity/Hypervigilance
 - Avoidance/Numbing
 - Dissociation
- Training Topic in PowerPoint: School based triggers
 - Trigger visualization
 - Common school triggers
 - Training Topic in PowerPoint: Three Rules
 - Arrange your classroom, Set clear expectations, Consider safety
- Training Topic in PowerPoint: The Spectrum of Prevention
 - Primary, Secondary, Intervention, Tertiary
 - **Training Topic in PowerPoint: Primary Prevention**
 - Feelings are Mentionable
 - Feelings are Manageable
- Training Topic in PowerPoint: Secondary Prevention
 - Identify school based triggers handout
 - Negative/positive thoughts
- Training Topic in PowerPoint: Intervention Strategies
 - Limbic Defibrillator
 - Calming Caddies
 - Consequences
 - Return to class
- Training Topic in PowerPoint: Tertiary Prevention
 - Action Planning
 - What's on your Plate
- Wrapping Up
 - Detail homework expectations
 - Provide summary of Session Three
 - OPTIONAL: Post-Test questionnaire implementation
 - Collect completed Exit Tickets

Managing Trauma in Your Classroom



Display this PowerPoint slide as the participants are entering the training space.

As they arrive, participants should be given all necessary handouts for this session.

OPTIONAL: Ask your participants to complete the Session 2 Pre-Test questionnaire before we begin. (Provided in Appendix A) Collect the completed Pre-Test questionnaires before beginning the session.

When all the participants have arrived and have been seated, welcome and thank them for attending this session of the training.

SAY:

We are going to start today by reviewing some of the content from Session One. After this short review, we will begin to discuss strategies that you can use to keep students learning at their best capacity in your classroom.

Advance Slide



To review trauma from the last training:

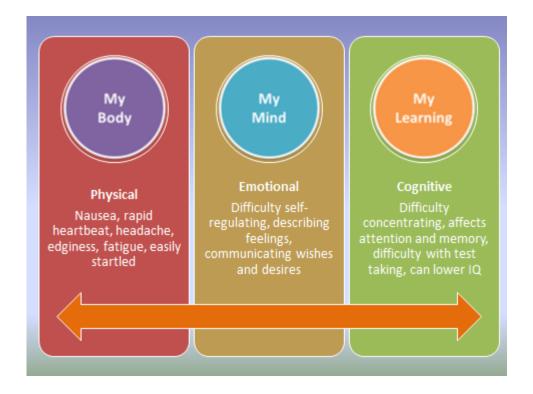
Acute trauma occurs in a particular time and place: school shootings, gang-related violence in the community, terrorist attacks, natural disasters, serious accidents, dog bites

Chronic trauma is exposure to trauma that can occur repeatedly over long periods of time: some forms of physical abuse, long-standing sexual abuse, domestic violence, war and other forms of political violence.

Traumatic Grief is coping with the death of an important person in one's life.

Complex Trauma is multiple interpersonal traumatic events from a very young age and recurring over a long period of time. Complex trauma is chronic trauma stacked on top of itself.

Advance Slide



Trauma can affect a child in many ways. Remember that trauma is not just something that this child has experienced; it is something that can affect every part of their being.

Read off some of the listed effects of trauma, feel free to add more.



In this activity, you may use large Post Its labeled "Physical", "Emotional", "Cognitive", and "Social." to allow participants to share by writing their groups answers on the appropriate Post It. You may also just share by asking for volunteers to share their group's observations.

SAY:

Please discuss what types of behaviors you saw in your classroom. Try to create a list of examples from each of the four categories listed on the large post its. I will give you about 5 minutes. Once you have completed, please send one of your group members to write your groups answers on the Post Its.

Allow 5 minutes for table discussions. If you chose to have your participants write their answers on the Post Its, remind them after 4 minutes to begin writing.

If the groups are writing their answers, take 1 minute to process each of the 4 large Post It's with all the participants.

Otherwise, take 2-3 minutes to ask for volunteer sharing.

Re-experiencing/Reenacting

Images, sensations, or memories of the traumatic event recur uncontrollably.

This includes:

- Nightmares
- Disturbing thoughts
- Flashbacks



SAY:

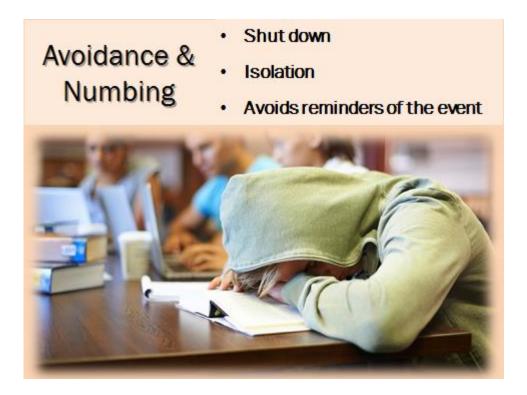
There are several behaviors that a child may present in the classroom.

The first behavior is re-experiencing or reenacting their trauma. The child may experience thoughts, images, sounds, or feelings associated with the traumatic event that occurs uncontrollably. They may share that they have experienced nightmares that include a traumatic event. They may also re-experience or reenact traumatic experiences through their play, art or creative writing.



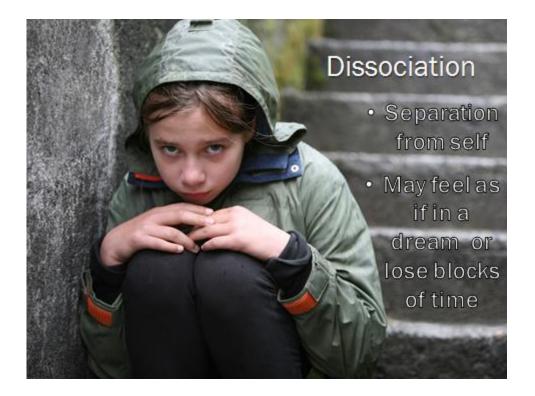
The next behavior includes children who become hyperactive. They may also feel hypervigilant and ready to act immediately. Every time their bodies go into the fight, flight, or freeze they undergo all the changes designed to help the body react to danger, including the hyper drive physical and emotional reactions.

Many of these children feel unsafe in triggering situations. They may appear impulsive, inattentive, and restless.

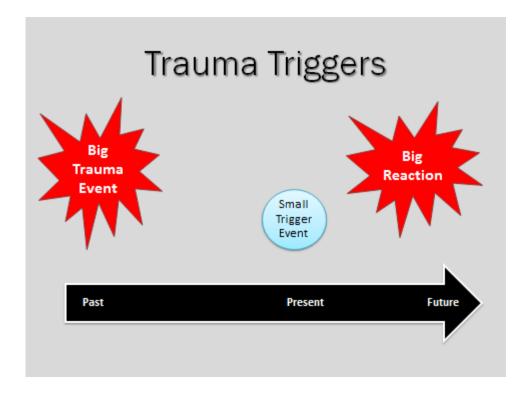


This behavior includes when a child feels shut down, withdrawn, or numb. They may feel cut off from their feelings.

Educators need to look out for these children. Children who experience the hyperactive behavior may require a lot of time and energy from their teacher. A child who is experiencing this numbness may fall through the cracks because they are not disrupting the class.



This behavior is Dissociation. Some children may separate themselves from the traumatic events that they have experienced. They may act as if nothing has happened, or that the trauma happened in a dream or to someone else.



When a child experiences a traumatic event, their brain makes connections related not just to the trauma, but to what they see, smell, taste and feel. This is not a conscious process. When a child sees, smells, or feels a similar experience, their brain will push them into the stress response system. A child may not even be aware of what specifically made them upset. All they know is that they suddenly feel bad or scared. Even years after a traumatic experience, a trauma reminder can still have a powerful impact.

To better understand triggers, I would like for us to do some guided visualization.

I want you to imagine that you are mowing the lawn. It is a beautiful day and you are eager to get some exercise and sunshine. As you are mowing, suddenly you see this...

Advance Slide



What do you think your body will do?

Think back to the stress response system and how our bodies naturally and automatically go into fight, flight, or freeze.

Seeing this snake may make us feel very afraid. We may mow over the snake, we may run away screaming, we may freeze in terror. We may have nightmares of the snake, we may even be afraid to mow the lawn again.

Have you ever known someone who has been in a bad car accident that was then fearful to get behind the wheel again? This is a common response to fear.

Now I want you to imagine that the neighbors are starting to give you bad looks and you have to get the guts up to mow the lawn again. You wait for a beautiful day and begin to mow. You will be nervous at first, especially while passing the space where the snake was before. You start to get comfortable and are enjoying the day. Suddenly, you see this...

Advance Slide Slide 11



What do you think your body will do?

Our bodies will once again naturally and automatically go into fight, flight, or freeze. Seeing the hose may make us feel very afraid, we may mow over the hose, we may run away screaming, we may freeze in terror.

Do you think your body is reacting to the hose? No, your body is reacting to the snake!

The hose just reminded us of the snake. The hose is a trigger for the experience we had with the snake.

When we see a child having a traumatic reaction in our classroom, we may see a hose but the child sees a snake.

Advance Slide



There are many things that can happen in a classroom or school building that can become triggers. This is a small sample of possible triggers.

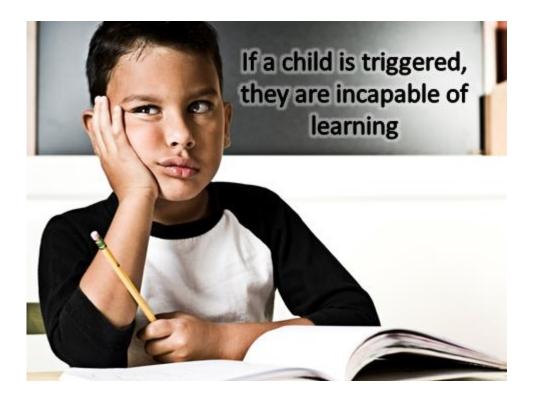
Read the listed triggers and feel free to list more.



Here are more examples of possible triggers.

Read the listed triggers and feel free to list more.

Many schools bring in guest speakers to discuss violence, or drug and alcohol prevention. A teacher may believe that the child is acting out because of the guest speaker, but the child may be triggered by the speaker's topic.



Children who are triggered are in their limbic brain. These students are NOT functioning in Frontal Lobe or thinking brain. They must recover from the trauma trigger to successfully move through their rest of their day.



We will now move into some strategies that you can use to help children stay calm, avoid triggers, and return to their thinking brain. I will start with 3 general rules followed by many classroom activities.



The first rule is to arrange your classroom with a trauma lens. I want you to think about the space in your classroom. Make sure that there is enough space in common areas, and that clutter is at a minimum. Congestion and clutter can be triggering for students and they don't have control of the classroom environment.

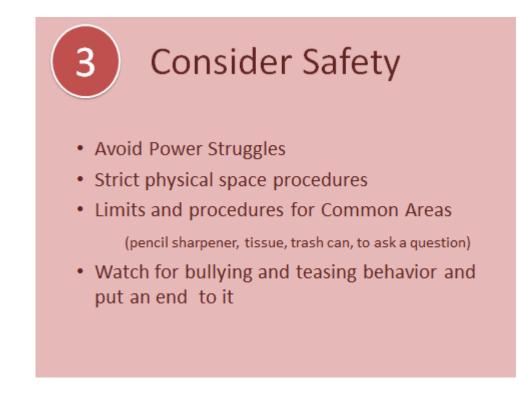
Also, make sure to avoid blind corners. Blind corners can allow for bullying and triggering events.

A child may be triggered simply by sitting in a certain area of the classroom. It may be worthwhile to ask students where in the classroom they would be able to learn best. (Not by their best friend!) Ask the child, "Where would you feel safe sitting in the classroom?"





The second rule is to set clear behavior expectations for everyone in the classroom. It is important for all classrooms grades k-12 to have posted established behavior expectations. List both problem behaviors and replacement behaviors. Try not to assume that the child knows what they are "supposed" to do. Reinforce the rules not only when they are broken, but also when they are followed.

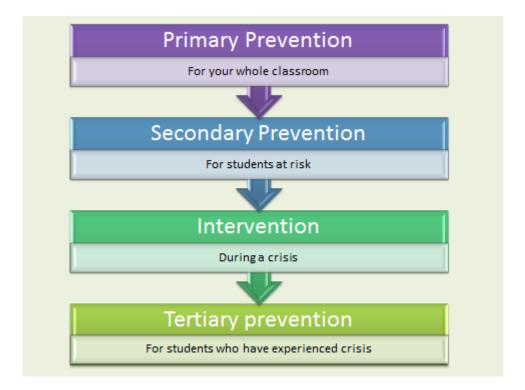


The third rule is to consider the safety of each of your students. Try to avoid participating in power struggles with a child. When you are involved in a power struggle, both you and the child are working in your limbic brains. Give each other time to breathe and calm down before discussing the issue.

Children need to understand clear physical boundaries in all grades k-12. Younger students can easily understand "This is my bubble" concepts.

It can be helpful to establish a few rules for common areas and post them. Setting a procedure for the pencil sharpener increases the structure in the classroom.

If you witness any bullying or teasing behavior, you must immediately put an end to it. If you ignore it, the victim (and perpetrator) may think that you are OK with bullying in your classroom.



This is the Spectrum of Prevention. It is a framework that can guide your efforts in your classroom. I will be giving you strategies that you can use at each of these levels.

Primary prevention includes strategies for every student in your classroom.

Secondary Prevention includes strategies that can reach those students who are at risk for a traumatic reaction in the classroom.

Intervention Strategies are to be used during a crisis event.

Tertiary Prevention strategies are for students who have had a traumatic reaction in the classroom and need special attention to ensure that it does not happen again.

Slide 20



SAY:

The following strategies should be given to all students in your classroom. There are 2 parts to the primary strategies. They include "feelings are mentionable" and "feelings are manageable."



(Inside Out, 2015)

SAY:

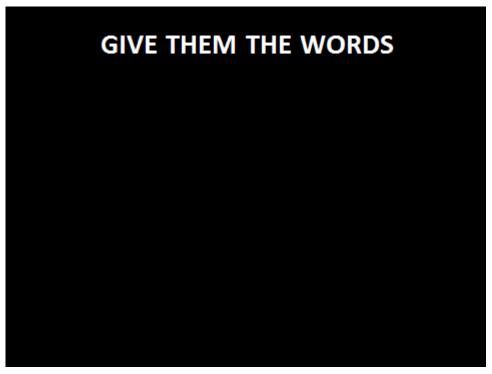
I want to start with feelings are mentionable.

Children should feel as though they can talk about their feelings whether they are in Art or Creative Writing or in Science or Math class. When a child can openly express their feelings, they feel comfortable in the learning environment. It can be beneficial for you as the teacher to express your own feelings. It is OK if a child sees that you experience a variety of feelings too.



This statistic is from a study called the 30 million word gap. This shows that some children, especially those living in poverty hear fewer words than some of their peers. These children may what to express how they are feeling, but they do not know the appropriate words to articulate their feelings.





(PBS Parents, 2014)

Play the feelings words video.

SAY:

When a child is unable to express their feelings or needs, it can be very frustrating and can lead to unwanted behavior in the classroom.

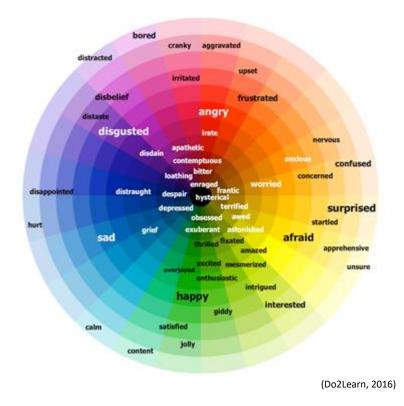
It is very important that we introduce as many words as possible to students of all ages. The larger their emotional vocabulary, the more capable they are of getting their immediate and long term needs met.

```
Slide 24
```



Every classroom should have an emotional vocabulary poster. This should be used as an everyday, many times a day conversation. You can use this tool at the beginning of every day or during breaks. This is a great way for children to begin using a broader vocabulary in relation to their feelings.

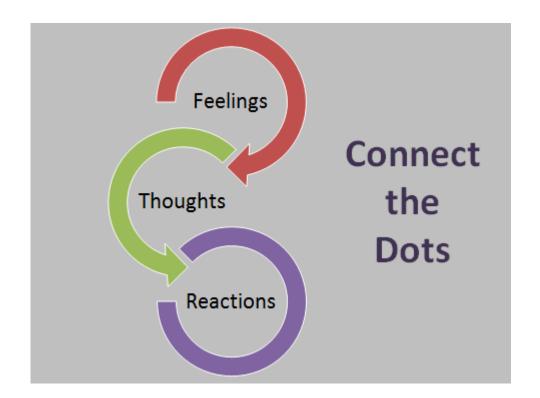




This is an example of an emotions color wheel that can be used for older students. This is a great way for older students to see many different words that can best describe what they are feeling.

Advance Slide

(Do2Learn, 2016)



It is important help children connect the dots between their feelings, thoughts, and reactions. By helping a child connect their feelings with their actions and behavior, you can help them identify more positive reactions and behaviors in the future.

Tell them that they have the power to track and manage how they feel and control their behavior.

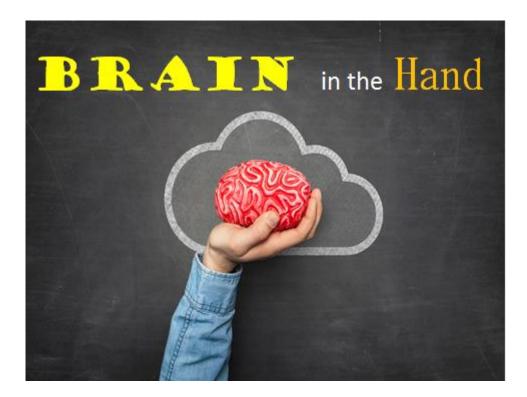
Slide 27



SAY:

Not only should feelings be mentionable for every child, but every child should have tools to be able to manage the feelings that they experience.

Sometimes it can be difficult to manage emotions. As educators, we can provide students with tools that can help them cope with their emotions and discover alternative ways to meet their needs.



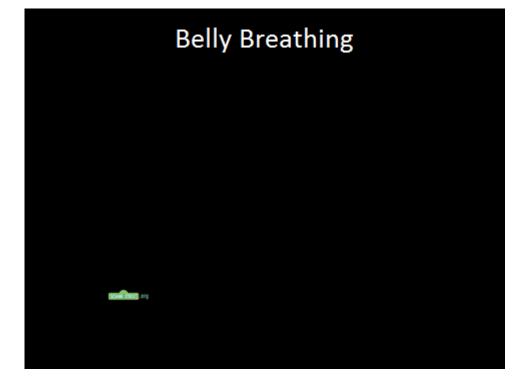
The first tool that all students can learn is The Brain in the Palm of your Hand demonstration. This is a great activity to share with students' grades k-12. If a child knows the function of their brain, the child can have better control over their behavior. I will describe some basic parts of the brain by using my hand.

Encourage your participants to follow along with their hands.

Imagine that your hand is your brain; **your palm** represents your Brain Stem which is responsible for Autonomic ("automatic") functions, like breathing, and our heartbeat. **Your thumb** represents your Limbic Brain or wild animal brain which is responsible survival instincts like fight, flight, or freeze, as well as your emotional reactions and fears. Tuck your thumb into your palm and close your 4 fingers over your thumb. **These fingers over your thumb** represent your Frontal Cortex or thinking brain which is responsible for your perception, motor action, speech, higher processing and what we normally call "thinking."

When we are stressed, overwhelmed, or trying to deal with traumatic or painful memories, the frontal cortex shuts down; it no longer functions. You have flipped your lid and let your wild animal brain run wild! *Demonstrate this by lifting your 4 fingers up*.

To get back to yourself, you need to calm down and bring the thinking brain back on top of our animal brain to keep it in the cage!



(Sesame Street, 2012)

Play the Belly Breathing video. Have your participants practice along with the song!

SAY:

Breathing is the number one way to get into your thinking brain. Breathing should be done at the beginning of every day, every class, and after any distraction, for example, unexpected announcements, classroom disruptions, any change in routine.

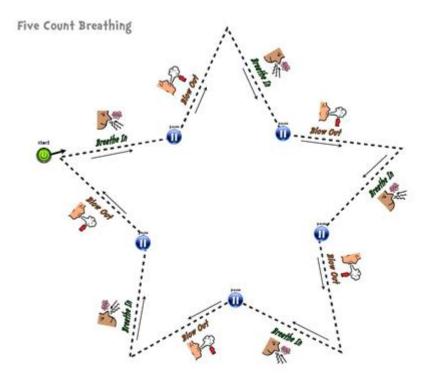
There are many ways that you can teach a child to deep breathe. You can use belly breathing, butterfly breathing, sunshine breathing, balloon breathing. You can also use count breathing which is better for older students.

Deep breathing is good for people of all ages.

Demonstrate deep breathing techniques for your participants.

Belly Breathing Balloon Breathing Butterfly Breathing Count Breathing





This star is a visual aid for 4 count breathing. A child can start on any line that says "breathe in" and while moving their finger toward the "pause" point, they will inhale for 4 seconds. Once they reach "pause", they will hold their breath for 4 seconds. Then, they can trace their finger down the "blow out" line as they exhale for 4 seconds.

Feel free to have your participants practice the 4 count star breathing technique.



(ASMR Relax For a While, 2013)

OPTIONAL: Play the guided visualizations video. Ask your participants to relax and participate in the visualizations.

SAY:

Guided visualization is another strategy that can help students focus before a stress. In the classroom, guided visualization can be used when you expect a large stressor for your students, like a big test. There are many guided visualizations for all ages available for free on YouTube.





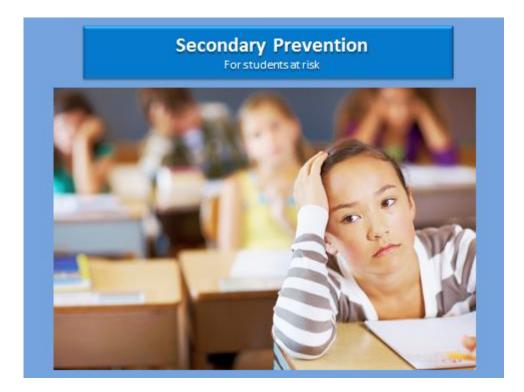
Slide 32

Stretching is another great strategy for you to help students step down their energy after being active at gym, recess, or a fire drill. When the students return to the classroom after this active event, have them stand by their seats and do standing stretches. Then have the students sit in their seat and continue with seated stretches. Now the students are ready to take a few deep breaths and begin the lesson.

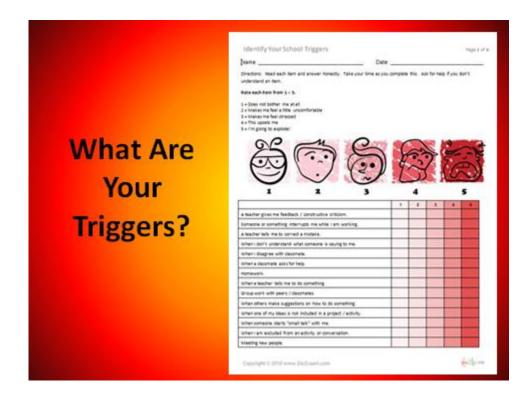
Demonstrate standing and seated stretches to your participants.

Advance Slide

80



We will now move onto secondary prevention strategies. These strategies can be used with students who are at risk for high levels of stress or you suspect that they may have experienced trauma.



Hand out the "Identify stress triggers" activity to your participants. (Provided in Appendix B)

SAY:

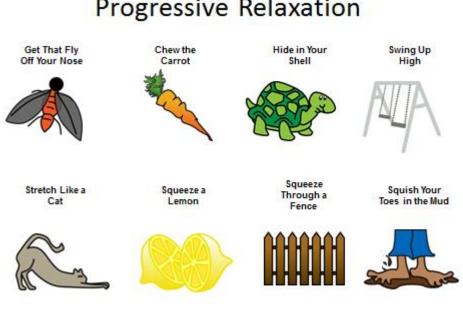
This activity is meant to help children grades 4-12 identify triggers that they may experience in the school building. Younger students may need assistance to complete the activity.

This is a great way for the student and teacher alike to identify the larger triggers at school for the student. It allows the teacher to better understand triggers that may contribute to the child's behavior. This can also help the teacher encourage positive coping during these stressful times.





It is important for a student to understand how their body reacts to stress. If a child knows how they feel stress, they can use it as an indicator to implement their positive coping skills. You may wish to give the child examples of how you feel stress to assist them in identification.



Progressive Relaxation

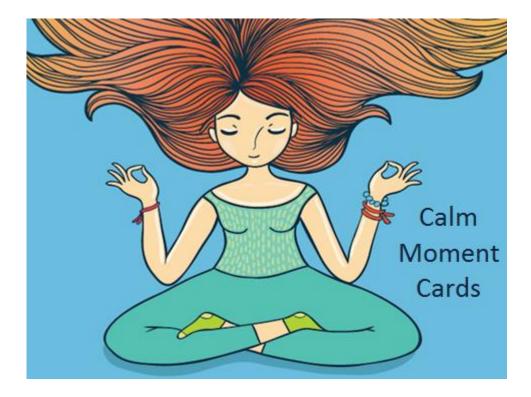
(Vanderbilt Kennedy Center, 2016)

OPTIONAL: Guide your participants through progressive relaxation.

SAY:

Progressive relaxation is a great additional way for students to relax in times of stress. This example is good for younger students; there are also diagrams and videos that are useful for older students.

Slide 37

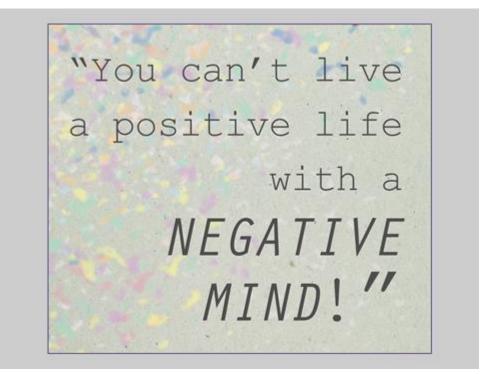


SAY:

A great local resource is the Every Moment Counts Project. There are many useful tools, especially the Calm Moment Cards.

Hand out copies of the calm moment cards.

www.everymomentcounts.org



We all have that voice in our heads that tell us we are not good enough. It is important to talk with a student about this negative voice. Remind them that they are not the only one who has this voice. Help the student identify their voice and discuss the types of things it says. Discuss ways to replace the negative voice with a positive voice.

Slide 39



SAY:

Here are some examples of "canned" phrases that can a child can use to combat the negative voice. You can provide these phrases and have the student create phrases of their own to begin reframing their thoughts.



Once a student has identified their negative thoughts and the phrases that they can use to combat that negative voice, give them a reminder token to carry with them.

Have the student say their positive thoughts while holding the token.

After this process, every time they see or feel their reminder token, they will remember to use their positive phrases.





We will now move into intervention strategies. Intervention strategies are to be used when a student is dysregulated and needs to calm down before they can return to the learning environment.

These strategies can help a student so that they do not have to be sent out of the classroom. It is important to know that these strategies may not always be successful.

Slide 42



SAY:

If a child is having a traumatic reaction in the classroom it is important for you to stay calm. Take some deep breaths so that you can stay in your thinking brain!

You need to use a calm and soothing voice and avoid asking the child what is wrong at this time. This is not the appropriate time for that discussion. Instead use the Limbic Defibrillator.

The Limbic Defibrillator is a way that you can quickly move a child from their animal brain to their thinking brain. A child will not be able to calm down until they are in their thinking brain. To implement the Limbic Defibrillator, you begin by making bland observations like "I see you're wearing blue, do you like the color blue?" This will redirect the student's brain to their thinking brain for a moment. During that moment, ask the child to take a deep breath. The child may slide back into their animal brain and will need another bland observation and deep breath.

Demonstrate the Limbic Defibrillator for your participants.

Repeat this process until the child has calmed enough to take regular deep breaths on their own. They are now ready to take an item from a calming caddy. Have the child return to their seat if they are ready. They should be permitted to keep the calming item at their seat.

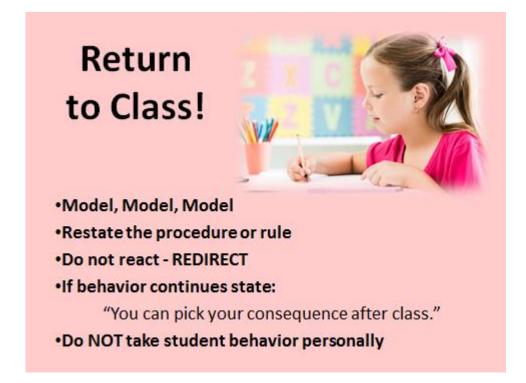




Using a calming caddy is an intervention strategy that can be used when a student needs to calm down before they can return to the learning environment. For the calming caddy to be successful, every child in the classroom must have an opportunity to use items from the calming caddy throughout the day. It can be used as a reward or during transitions. By using this intervention strategy regularly through the day, you can use these items for students who are experiencing a traumatic reaction without the stigma of "only bad" kids get to use the calming caddy!

The calming caddy can also be used as a secondary prevention. You may want to give a child an item from the calming caddy if they are reaching high levels of anxiety. This item can lower their anxiety levels and prevent an outburst.

There are many items that you can include in your calming caddy including coloring pages, Playdoh, Sparkle jars, Pinwheels, and Squeeze items.



The goal of intervention strategies is to get a student back into the learning environment. Once a child is using an item from the calming caddy and has quieted, immediately return to teaching. This does not mean that the child will not receive consequences for their behavior. Don't worry about consequences now. There has already been enough time spent on this situation. Dole out consequences on your time. You may want to say "we will talk about your consequences at recess or during our break."



It is important for children who have experienced trauma to have a structured and predictable environment. To increase consistency, establish 5-6 standard consequences for misbehavior in your classroom. Take some time to teach these consequences as you would any other lesson. It may also be beneficial to allow the child to choose their consequence so that they have personal ownership over that consequence. This ownership can help a child feel empowerment that they may not feel in other parts of their life.

Slide 46



SAY:

Lastly, we will discuss tertiary prevention. Tertiary prevention strategies should be used with students who have experienced a stress/traumatic reaction in the classroom. These strategies are meant to prevent students from acting out in class again.



Above and beyond their school plan, it can be helpful to work with these students to create a classroom plan between you and the student. This is not an IEP; this is a close discussion regarding the child's behavior. For example, you may discuss alternative reactions when a friend wants to borrow their crayons. Involve the student in choosing their new alternative reactions. This process can empower the student to regulate their emotions.



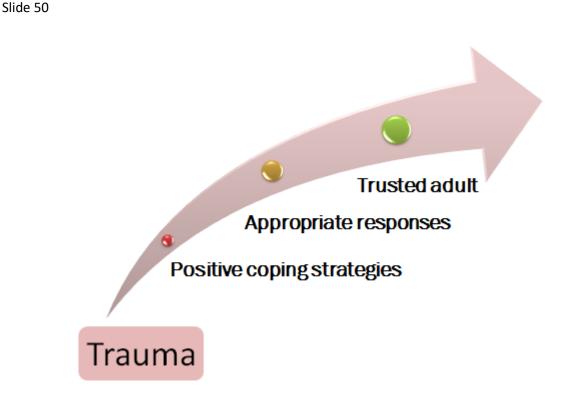
The "What's on Your Plate" activity is a great way for students to show everything that they are experiencing. Have the student write or draw on the plate all of the things/activities/responsibilities/worries happening in their life. Discuss the events and activities that the child shares, ask them which activity takes up the most of their time or thoughts, which are the most (or the least) stressful and which they would like to have more time for.

This can be very helpful for the child to process what they have to deal with every day. And can also help you to better understand where they are coming from.



On the back of the plate have the students answer the questions listed on the PowerPoint.

Process the questions with the student and explain that though they may have a lot of their plate, it is within their power to seek help and feel safe.



Trauma can have a huge impact on a child's development and behavior. The good news is that this damage doesn't have to be permanent. The brain can heal. These children can learn new ways of thinking, relating, and responding, have new experiences with new trusted adults that can help buffer stress, and develop ways of coping with stress.

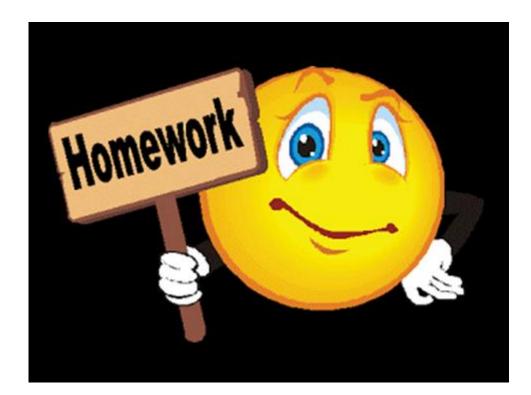
The child's frontal cortex, or thinking brain, continues to develop throughout adolescence and even into adulthood and every positive encounter that you can provide will help engineer that development.

Though unlearning and rebuilding can take lots of time and patience. You can be one of the adults that can help "retrain" their brain through positive new experiences and examples.

Advance Slide

98

```
Slide 51
```



As you know, after each session I will ask you to complete a homework assignment. This session's homework is to build a calming caddy with at least 3 items. I also ask that you choose 1-2 primary and secondary prevention strategies and practice them in your classroom. Be ready to share your experiences at our next session.

Thank you so much for participating in our session today. You have a significant role in the life of these children and we know that provided with tools, you can make a real difference in their lives. The third session is titled Increasing Developmental Assets in Children. It will cover the Search Institutes 40 Developmental Assets and how educators can use them to recognize and increase strengths in the students in your classroom.

Thank you and I will see you for Session Three.



OPTIONAL: Give each participant an exit ticket and a Post Test questionnaire (APPENDIX A) and collect the completed handouts before the participants leave.

SAY:

Thank you again for taking the time to learn about and utilize tools to help children who have experienced trauma.

Thank you and I will see you for Session three. Have a great rest of your day!

These collected handouts (or copies) must be mailed to:

Akron Children's Hospital School Health Services ATTN. Melissa McClain One Perkins Square Akron, OH. 44308

Or scanned copies may be emailed to: mmcclain@chmca.org

DATE:	

SCHOOL: _____

YOUR ROLE: _____

Exit Ticket

Please complete before you leave. I appreciate your participation and thank you for your input.

What were 3 "Ah-Ha" moments for you today?

What do you need from me?

Other thoughts and comments?

I look forward to seeing you at our next training!



Session 3

Increasing Developmental Assets in Schools



Train the Trainer

2017

Training Plan Worksheet

Directions: This worksheet is intended to guide you in planning your trainings. Feel free to use this sheet as a space for you to jot down notes and ideas.

9. Think of the audience with which you will deliver this training. What can you do to encourage and strengthen their understanding of trauma?

10. In what setting will the training be best received?

11. When is the best opportunity to get 60 minutes of your staff's time?

12. What are your main concerns with conducting this training? Any foreseeable barriers to hosting the training?

Session 3: Increasing Developmental Assets in School Time Required: 60 minutes

Description

Increasing Developmental Assets in Schools is designed to introduce The Search Institute's Developmental Asset framework and to use its strategies to build resiliency in youth.

Learning Objectives

During Sesson 3:

- 8. Participants will define The Search Institute's Developmental Asset framework.
- 9. Participants will detail the evidence that supports the need for developmental assets.
- 10. Participants will identify strategies to implement developmental asset work in the school.
- 11. Participants will develop an individual plan to identify sparks in students and implement 3 developmental asset improvements for their classroom.

Prepare

- A training date and space. Notify all staff of training date and space.
- Prepare two large Post Its, labeled "Love" and "Not so much"
- Hang large Post It's around the training space.
- Print copies necessary for each participant.
- 3 small slips of paper for each participant

Equipment and Materials

- Laptop computer and projector
- Flashdrive with PowerPoint Presentation
- Large screen or blank wall
- Large paper/white board/, markers or chalk board /chalk
- All handouts including PowerPoint if requested

Methods Used in this Session:

Lecture, group discussions, video clips, demonstration

Required Handouts

- Copy of PowerPoint for each participant if requested
- Copy of 40 Developmental Assets
- Information regarding the online location of the Asset Database

Getting Started

Session Three Agenda

- Session Opening
 - OPTIONAL: Pre-Test questionnaire implementation
 - What to expect during session three of this training

• Activity: Reputations

•

- Blue vs. Red
- Activity: Asking the right questions
 - What I Do
 - Who I Am
 - What I Value
- Training Topic in PowerPoint: 40 Developmental Assets
 - External Assets
 - Internal Assets
- Training Topic in PowerPoint: Search Institute Statistics
 - Positive Outcomes
 - Negative Outcomes
- Video: TED Talk
 - Peter Benson
- Activity
 - What do children love about coming to our school
 - What they don't like about coming to our school
- Training Topic in PowerPoint: Fires to be Lit
 - Who helped you
 - Thriving Formula
 - School Roster Activity

• Training Topic in PowerPoint: Asset Activities

- Database
- Expectations
- Wrapping Up
 - Detail homework expectations
 - Provide Summary of Session Four
 - OPTIONAL: Post-Test Questionnaire implementation
 - Collect completed Exit Tickets



Display this PowerPoint slide as the participants are entering the training space.

As they arrive, participants should be given all necessary handouts for this session.

OPTIONAL: Ask your participants to complete the Session 3 Pre-Test questionnaire before we begin. (Provided in Appendix A of this manual) Collect the completed Pre-Test questionnaires before beginning the session.

When all the participants have arrived and have been seated, welcome and thank them for attending this session of the training.

SAY:

Before we start our session today, Let's take some time to discuss our homework from Session Two.



At the end of Session Two, you were asked to try some prevention tools in your classroom. We are going to take few minutes to discuss your homework with your table. Please group together with the participants at your table.



Please discuss what types of tools you used in your classroom. Also, take some time to discuss what worked, what didn't work and why?

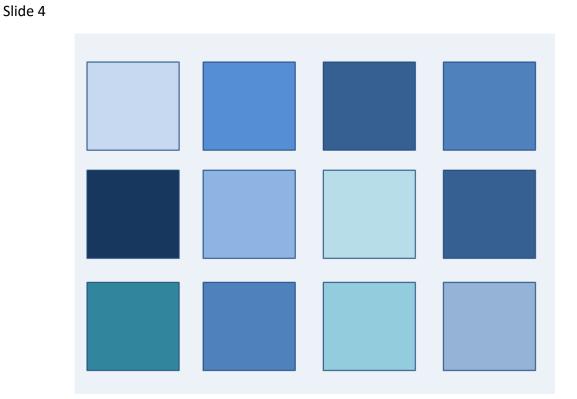
Allow 5 minutes for table discussions.

Allow 2-3 minutes to ask for thoughts from the participants.

SAY:

Today, we will be talking about the Search Institutes 40 Developmental Assets and how we can use them to help our students find their strengths and succeed.

But first, we are going to play a little game. I will give you about 30 seconds to look around the room and I want you to remember everything



BLUE!

Make sure you can remember as many as you can because you will be quizzed on it later!

Allow 30 seconds for your participants to look for blue items.

Ok, be sure to remember the blue in the room and we will come back to that a little later.



Now that we have our blue items in our brain, I would like for you to stand up and grab 3 small slips of paper from the table as well as something to write with. Now I would like you to find a partner in the room that you do not know very well.

Allow for 1 minute for your participants to find a partner.

Once you have found your partner, I will to give you 1 minute (30 seconds each) to tell each other about "What you do." This does not mean what you do for a living, but what you do from the moment you wake up to the time you go to sleep.

Allow for 1 minute and give the partners a reminder at 30 seconds to give the other person a chance to talk. Once the 1 minute has completed, regain the group's attention.

Now that you've had a chance to chat, I would like for you to write down on one slip of paper your first impressions of your partner. You can write one word or a sentence about what you think of them. Once you've completed fold your sheet of paper and give to your partner. DO NOT open your paper when you receive it! Now I would like for you to find a new partner!

Allow for 1 minute for your participants to find a new partner.



Now that you have your new partner, I will give you 1 minute tell each other about "Who you are." Describe something that you consider central to who you are. An example would be that you are a parent, or a writer. What are some things that truly make you, you?

Allow for 1 minutes and give the partners a reminder at 30 seconds to give the other person a chance to talk. Once the minute has completed, regain the group's attention.

Now that you've had a chance to chat, I would like for you to write down on one slip of paper your first impressions of your new partner. You can write one word or a sentence about what you think of them. Once you've completed fold your sheet of paper and give to your partner.

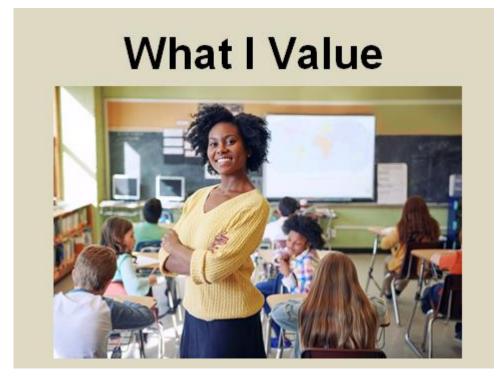
DO NOT open your paper when you receive it!

Now I would like for you to find one last partner!

Allow for 1 minute for your participants to find a new partner.

Advance Slide

Slide 6



Now that you have your last partner, I will give you 1 minute to tell each other about "What I value." Describe what you value most about the youth that we work with. What do you love about working with kids? What brings you back to the school every morning?

Allow for 1 minute and give the partners a reminder at 30 seconds to give the other person a chance to talk.

Now that you've had a chance to chat, I would like for you to write down on one slip of paper your first impressions of your partner. You can write one word or a sentence about what you think of them. Once you've completed fold your sheet of paper and secretly give to your partner. We are all done, so you can return to your seat and take a minute to read your papers!

Allow 1 minute for the participants to read their papers.

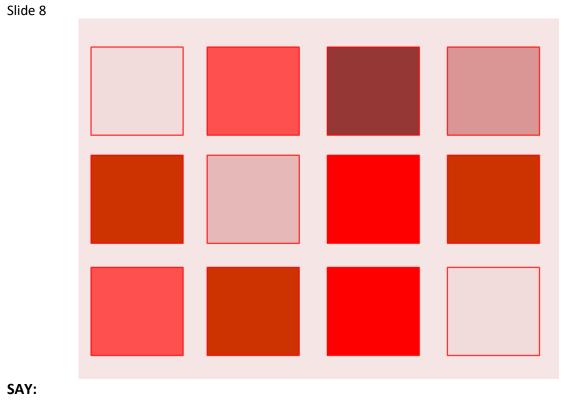
This activity is a fun way of getting to know each other a little better, but it also serves as a great lesson in asking the right questions. If we only have 30 seconds to connect with a child, what question will we ask? We could ask a surface question about what they did over the weekend, but could we discover more about that child and build a stronger relationship with a deeper question about who that child is, or what they value.

We may only have 30 seconds, but if we ask the right questions, we can build a powerful relationship!

Now you are going to play a little trick on your participants!

Before you reveal this slide, remind your participants that they were to remember items in the room that are blue. **SAY:**

Are you ready for your test?! Did you remember all the Blue? OK- Tell me everything that you remember in the room that is... *Advance Slide*



RED!

The group will groan and say "you said blue!" Allow for time to laugh!

This activity illustrates what happens when you meet a child who has a "reputation." In some schools, a child may start Kindergarten and be a real handful for the teacher. Upon promotion to 1st grade, the Kindergarten teacher may warn the 1st grade teacher of all the terrible things that child put them through. They will say, "He was BLUE all the time, you've never seen BLUE like this, Just wait until he shows his BLUE! On the first day of school, the 1st grade teacher may see this boy and the all the BLUE she heard about!

Because the 1st grade teacher has been told to see BLUE, she may not see the RED that the child is bring to the class.

The BLUE represents unwanted behavior and the RED represents a child's strengths.

Because of this child's reputation, we may only see the unwanted behaviors and outbursts. We may miss out on see the strengths that child has to offer to the class and miss a chance to build a positive relationship with that child.



So I am sure that you have noticed that I am talking a lot about building positive relationships. Positive relationships are one of the cornerstones of the Search Institutes 40 Developmental Assets. Starting and maintain relationships with children is the key to a successful and calm classroom.

In 1991 The Search Institute lead by Peter Benson introduced the Developmental Assets Framework. Studies of the Developmental Assets have been conducted with more than 4 million young people across the United States. The Developmental Assets identify a set of skills, experiences, relationships, and behaviors that enable young people to develop into successful and contributing adults. Data collected from Search Institute surveys has consistently demonstrated that the more Developmental Assets a child acquires, the better their chances of being happy, healthy, and succeeding in school while becoming contributing members of their communities and society.

The Developmental Assets is not a program. It is a framework to create appropriate programming for any system working with youth.

Slide 10



SAY:

I would like to go through each of the developmental assets identified. 40 is big number, so the Search Institute divided the assets into 2 halves, Internal and External Assets and further into 8 total categories based on topic. We will begin with the 4 external categories which include support, empowerment, boundaries and expectations, and constructive use of time.



Here are the Assets from our first topic of Support. A Child needs support from many different areas of their lives to succeed.

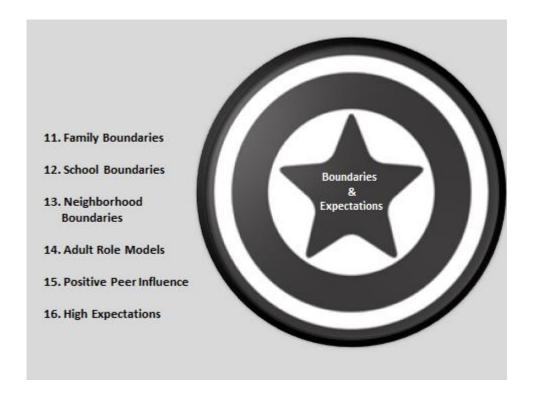
- 1. Family support- A child needs family life that provides high levels of love and support.
- 2. **Positive family communication**—a child and their parents communicate positively, and the child is willing to seek advice and counsel from parents.
- 3. **Other adult relationships**—a child receives support from three or more nonparent adults.
- 4. **Caring neighborhood**—a child experiences caring neighbors.
- 5. **Caring school climate**—a school provides a caring, encouraging environment for every student.
- 6. **Parent involvement in schooling**—parents are actively involved in helping the child succeed in school. They ask about homework, attend conferences, and take interest in their child's education.





The next topic is Empowerment. A child gains empowerment in the following ways.

- 7. **Community values youth**—a child perceives that the adults in the community value and respect youth, not just as children but as community members.
- 8. Youth as resources—children are given useful roles in the community.
- 9. Service to others—a child serves in the community one hour or more per week.
- 10. Safety—a child feels safe at home, school, and in the neighborhood



The next topic is Boundaries and Expectations. A child needs boundaries in all areas of their life.

- 11. **Family boundaries**—the family has clear rules and consequences and monitors the child's whereabouts.
- 12. School boundaries— a school provides clear and consistent rules and consequences.
- 13. **Neighborhood boundaries**—neighbors take responsibility for monitoring children's behavior.
- 14. **Adult role models**—parents and other adults model positive, responsible behavior. This is not just an adult relationship, but an adult that the child can look up to.
- 15. **Positive peer influence**—a child's close friends model responsible behavior.
- 16. High expectations—both parents and teachers encourage the child to do well.





The next topic is Constructive Use of Time. A child needs to have a variety of ways to spend their time.

- 17. **Creative activities**—a child spends three or more hours per week in lessons or practice in music, theater, or other arts.
- 18. **Youth programs**—a child spends three or more hours per week in sports, clubs, or organizations at school and/or in the community.
- 19. **Religious community**—a child spends one or more hours per week in activities in a religious institution. Intergenerational relationships are important to a child's success.
- 20. Time at home—A child is home "with nothing special to do" two nights per week.



Now we will move on to the 4 internal categories which include commitment to learning, positive values, social competencies, and positive identity.





The next topic is Commitment to Learning. This includes:

- 21. Achievement Motivation—a child is motivated to do well in school.
- 22. **School Engagement**—a child is actively engaged in learning and wants to be involved at school.
- 23. Homework—a child reports doing one hour of homework every school day.
- 24. **Bonding to school**—a child cares about her or his school. They are connected to school. "I am a Tiger!"
- 25. Reading for Pleasure—a child reads for pleasure three or more hours per week.





The next topic is Positive Values. This includes:

- 26. **Caring**—a child places high value on helping other people.
- 27. Equality and Social justice—a child places high value on promoting equality and reducing hunger and poverty.
- 28. Integrity—a child acts on convictions and stands up for their beliefs.
- 29. Honesty—a child tells the truth even when it is not easy.
- 30. **Responsibility**—a child accepts and takes personal responsibility.
- 31. **Restraint**—a child believes it is important not to use alcohol or other drugs or be sexually active.





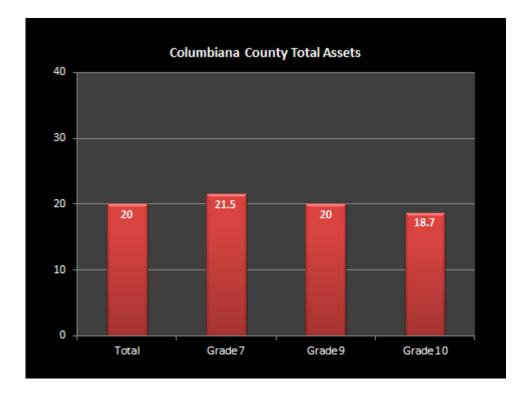
The next topic is Social Competencies. This includes:

- 32. Planning and decision making—a child knows how to plan ahead and make choices.
- 33. Interpersonal competence—a child has empathy, sensitivity, and friendship skills.
- 34. **Cultural competence**—a child has knowledge of and comfort with people of different cultural/racial/ethnic backgrounds.
- 35. **Resistance skills**—a child can resist negative peer pressure and dangerous situations and say no.
- 36. **Peaceful conflict resolution**—a child seeks to resolve conflict without violence.



The next topic is Positive Identity. This includes:

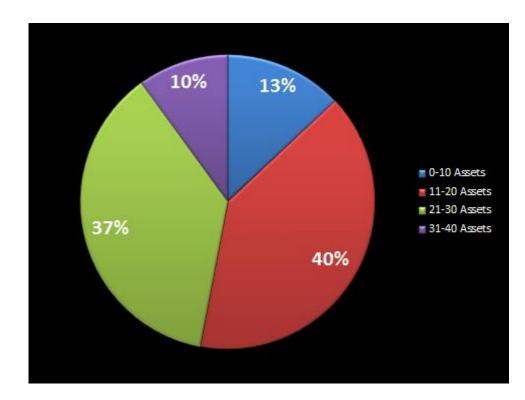
- 37. **Personal power**—a child feels they have some control over things that happen to them.
- 38. **Self-esteem**—a child reports having a healthy self-esteem.
- 39. **Sense of purpose**—a child reports that their life has a purpose.
- 40. **Positive view of personal future**—a child is optimistic about their personal future.



This slide shows the results from The Search Institutes 2016 Behaviors and Attitudes Survey completed in Columbiana County that included 10 districts and 2296 students.

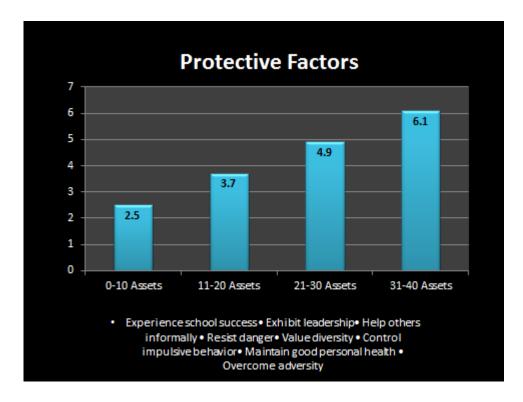
Review the data on the slide.





This slide is a continuation of the results from The Search Institutes 2016 Behaviors and Attitudes Survey completed in Columbiana County that included 10 districts and 2296 students.

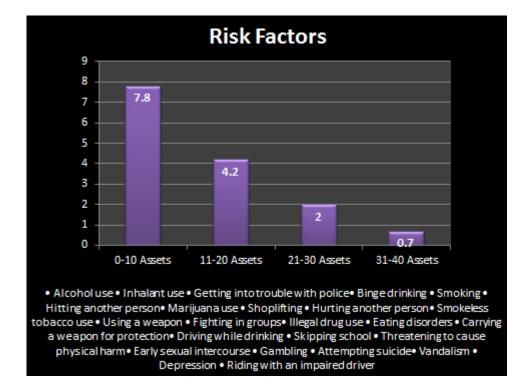
Review the data on the slide.



This slide is a continuation of the results from The Search Institutes 2016 Behaviors and Attitudes Survey completed in Columbiana County that included 10 districts and 2296 students.

Review the data on the slide.

Slide 23

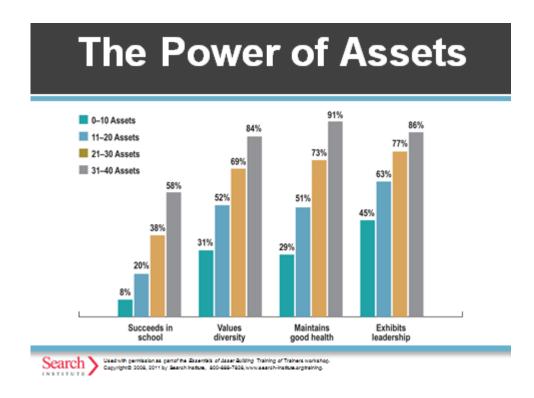


SAY:

This slide is a continuation of the results from The Search Institutes 2016 Behaviors and

Attitudes Survey completed in Columbiana County that included 10 districts and 2296 students.

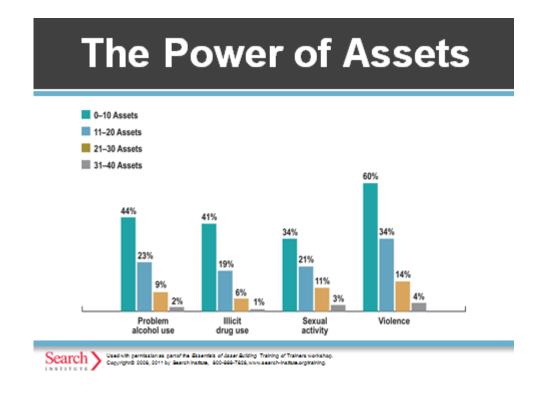
Review the data on the slide.



The next 3 slides detail statistics from a 2010 Search Institute survey of 86,000 youth in the United States. The study showed that the more assets a child reports, the more likely they will report success indicators.

Take 1 minute to read and discuss the graph with your participants.

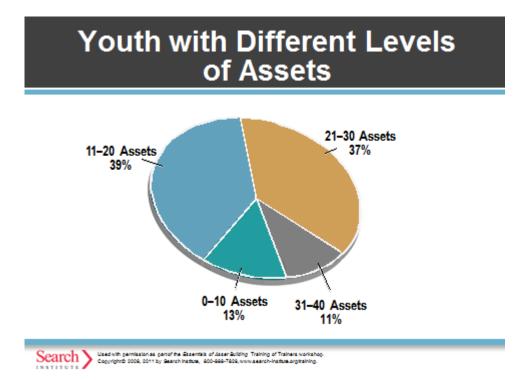




The study also found that the more assets a child reports, the less likely they will report high risk behaviors.

Take 1 minute to read and discuss the graph with your participants.





This last graph shows the populations overall assets. It is surprising that 52 percent of U.S. children have less than half of the 40 assets.

Does anyone have any thoughts about the assets or starting ideas on how to help our students strengthen and develop more assets?

Take 1 minute to discuss with your participants.

I will now be showing you a portion of a TED Talk from the former president of the Search Institute, Peter Benson. This video is a great way to see the vison of the Developmental Assets.





(TEDx Talks, 2011)

Play the TED Talk video. The video is 5 minutes.

SAY:

Does anyone have any thoughts on the video?

Allow 1 minute to discuss the video. Feel free to share your thoughts.



"Children are fires to be lit, not vessels to be filled." This is a concept that can help us work with students. When we start with a positive relationship and help a child identify their spark, we can begin to use that spark to help children through the difficult or disliked aspects of school.

How can we help a child identify their spark?

Allow for 1-2 minutes to discuss. Feel free to include your own thoughts. Look to your "Love" list to help facilitate the conversation. The "Love" list often includes sparks.



The thriving formula is one spark plus three champions and opportunity.

Helping a child identify their spark is a key beginning but that spark needs to grow into a fire. The best way to get that fire started is by helping a child identify 3 adults in their life that can support them. The child also will need opportunity to sustain their fire and use it to succeed in challenging or even frustrating circumstances.

The 3 champions would ideally be one adult from home, one adult from the community, and one adult from school. We may not have control of the adults in a child's life outside of school, so how can we identify 3 champions in our building for that child?





This activity will utilize the 2 large Post Its labeled "Love" and "Not so Much"

SAY:

Now I would like to talk about our schools. What do you think children like most about coming to our school? Is it Art? Or Sports? Or Friends?

Allow for 3-4 minutes for suggestions and discussion from the participants. Write down all of their suggestions on the large Post It labeled "Love."

Now that we know what kids love about our school, let's talk about what they don't like about coming to school? Tests? Too early? A certain subject?

Allow for 3-4 minutes for suggestions and discussion from the participants. Write down all of their suggestions on the large Post It labeled "Not So Much."

All children have reasons why they like coming to school. If we can help them use these things on the "Love" list to help them cope with the things they do not like so much, we can build positive relationships and have children that are happy in our school buildings.





A great way to identify some champions in the school building is by using a school roster. During your summer professional development days, consider hanging a list of your entire student body. Then give each staff member 3 stickers.

Each teacher then places a sticker next to a child with whom they have a good relationship. You will see that some students may have many stickers and some students may have zero stickers. These are the children that do not feel connected to a single adult in the building.

Once these children are identified, you can begin identifying key adults that can reach out to that student this year. This isn't meant to be a formal mentoring match, but an informal connection of adults with students.

```
Slide 32
```



Please make the provided Asset Activities Database available to your participants. You may want to include them on a website or a google doc.

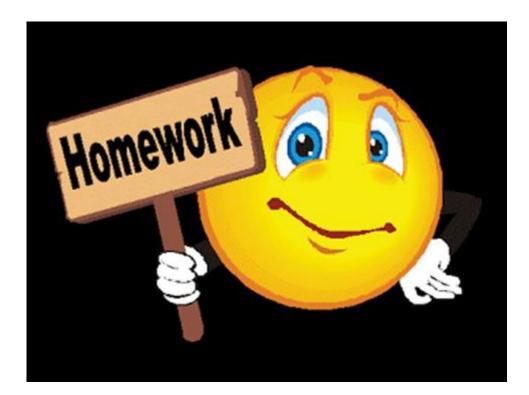
SAY:

Once we have identified the spark and the champions, we have to give that child the opportunity to foster that spark. There are many ways that we can offer new opportunities to foster a child's spark and increase assets. Whether it is an art activity, a math test with sports based questions, or opportunities during holiday and other special celebrations, the child can be engaged even during those times that they don't like being in our building.

I will be providing some activities that you can use with a child to help increase their assets. This database of activities can be used to find activities for each individual asset. You can find these activities:

PLEASE INCLUDE THE LOCATION OF THE DATABASE FOR YOUR DISTRICT.

```
Slide 33
```



With the framework of the 40 Developmental Assets, the thriving formula, and high expectations and high support, any child will begin to improve and succeed in school. They will feel connected, respected, and a part of a positive relationship with adults in their school building.

As you know, after each session I will ask you to complete a homework assignment. This session's homework is to identify 3 Developmental Assets that you can focus on in your classroom. Feel free to use activities from the database to begin work with your students. Be ready to share your experiences at our next session.



Give an exit ticket and a Post Test questionnaire (APPENDIX A) to each participant and collect the completed handouts before your participants leave.

SAY:

Thank you so much for participating in our session today. I hope that you are able to engage in positive and fun relationships with your students!

The last session of our training is titled Recognizing and Managing Secondary Traumatic Stress. It will cover the stress that you experience as a teacher including stress from our students, stress from your colleagues, and burnout.

Thank you and I will see you for session four.

These collected handouts (or copies) must be mailed to:

Akron Children's Hospital School Health Services ATTN. Melissa McClain One Perkins Square Akron, OH. 44308

Or scanned copies may be emailed to: mmcclain@chmca.org

DATE:	

SCHOOL: _____

YOUR ROLE: _____

Exit Ticket

Please complete before you leave. I appreciate your participation and thank you for your input.

What were 3 "Ah-Ha" moments for you today?

What do you need from me?

Other thoughts and comments?

I look forward to seeing you at our next training!



Session 4

Understanding and Managing Secondary Traumatic Stress



Train the Trainer

2017

Training Plan Worksheet

Directions: This worksheet is intended to guide you in planning your trainings. Feel free to use this sheet as a space for you to jot down notes and ideas.

13. Think of the audience with which you will deliver this training. What can you do to encourage and strengthen their understanding of trauma?

14. In what setting will the training be best received?

15. When is the best opportunity to get 60 minutes of your staff's time?

16. What are your main concerns with conducting this training? Any foreseeable barriers to hosting the training?

Session 4: Understanding and Managing Secondary Traumatic Stress Time Required: 60 minutes

Description

Understanding and Managing Secondary Traumatic Stress is designed to educate professionals who work with youth on the impact of their work and the extreme stress it can cause to their bodies and minds.

Learning Objectives

During Session 4:

- 12. Participants will define 3 symptoms of secondary traumatic stress accurately.
- 13. Participants will discuss potentially traumatizing events they may encounter while working with traumatized students on a daily basis.
- 14. Participants will describe the importance of maintaining personal self-care activities.
- 15. Participants will develop an individual self-care plan for 3 daily, 3 weekly, and 3 monthly activities.

Prepare

- A training date and space. Notify all staff of training date and space.
- Print copies of the necessary handouts

Equipment and Materials

- Laptop computer and projector
- Large screen or blank wall
- Large paper/white board/, markers or chalk board /chalk
- All handouts including PowerPoint if requested

Methods Used in this Session:

Lecture, group discussions, ProQol implementation, work/life balance group work

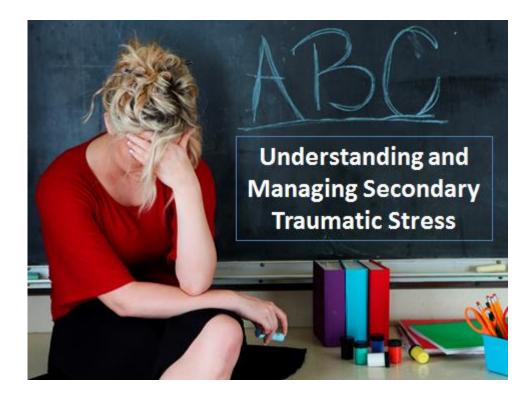
Required Handouts

- Copy of PowerPoint for each participant if requested
- Copy of Professional Quality of Life Scale
- Copy of work/life balance plan

Getting Started

Session Four Agenda

- Session Opening
 - OPTIONAL: Pre-Test questionnaire implementation
 - What to expect during Session Four of this training
- Engage participants in Homework Discussion
- Training Topic in PowerPoint: Secondary Traumatic Stress
 - Why do we experience STS?
 - Occupational hazard
- Training Topic in PowerPoint: Risk Factors
 - Personal risks
- Training Topic in PowerPoint: The Impact of STS
 - Physical
 - Emotional
- Training Topic in PowerPoint: The Professional Quality of Life Scale
 - OPTIONAL: Implementation
 - Discussion
- Training Topic in PowerPoint: Self Care
 - Who is responsible
 - ABC of self-care
- Activity: Work/Life Balance Plan
- Wrapping Up
 - Detail homework expectations
 - OPTIONAL: Post-Test Questionnaire implementation
 - Collect completed Exit Tickets
 - Encourage staying connected



Display this PowerPoint slide as the participants are entering the training space.

As they arrive, participants should be given all necessary handouts for this session.

OPTIONAL: Ask your participants to complete the Session 4 Pre-Test questionnaire before we begin. (Provided in Appendix A of this manual) Collect the completed Pre-Test questionnaires before beginning the session.

When all the participants have arrived and have been seated, welcome and thank them for attending this session of the training.

SAY:

Today we will discuss secondary traumatic stress and ways to cope using self-care. But first, let us discuss your homework from last session.



At the end of session three, you were asked to identify and try working with 3 Developmental Assets in your classroom.

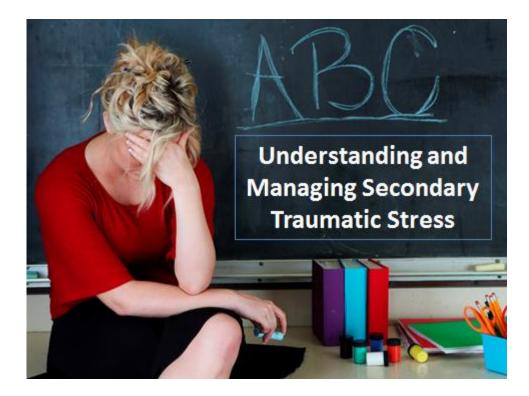
We are going to take few minutes to discuss your homework with your table. Please group together with the participants at your table.



Please discuss which Developmental Assets you chose and why? Were you able to use any activities from the database? What worked and what didn't work?

Allow 5 minutes for table discussions.

Allow 2-3 minutes to ask for thoughts from the participants.



Today we are talking about Secondary Traumatic Stress (STS.) STS is the stress we feel when we hear about the firsthand trauma experiences of another. The stress that you feel as teachers can be very overwhelming at times.

Why do you think we as teachers experience secondary traumatic stress or STS?



Professionals who work with youth are especially at risk for STS. We have naturally higher levels of empathy. This empathy is what helps us treat and help children and families in need. We are at risk because we care about the children we work with. We also have contact with many different types of children, their families, and the stress and trauma that they experience.

Professionals who work with youth are also at risk because there are many school staff members who have increasing expectations and not enough resources to complete or train for new protocols or roles.

Advance Slide

Slide 6



STS is not a sign that you are weak or that you are not good at your job. STS is an occupational hazard for all of us that work in the helping field. There is no shame in experiencing STS. It is something that anyone could face during their career.



(Grazer & Reitman, 1990)

Play the Kindergarten Cop video.

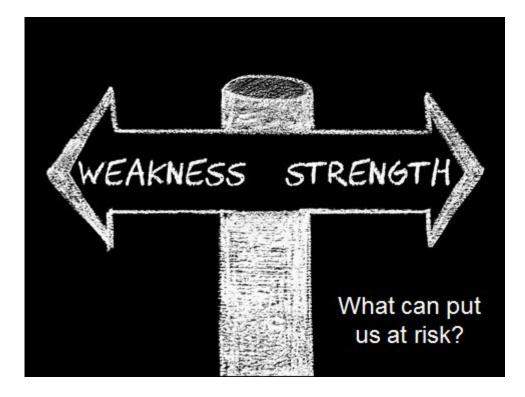
SAY:

Have you ever felt like this?

Our jobs can make us feel crazy sometimes!

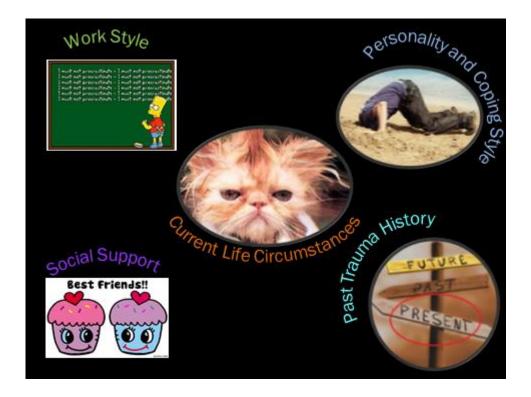
Advance Slide

Slide 8



Some of us have more risk than others to experience STS. Does anyone have any suggestions on what may increase our risk for STS?

Allow 1 minute for participants to share their thoughts.



Depending on the degree in which these are in one's life will determine whether this is a potential risk factor.

Personality and Coping Style: Someone who has difficulty coping with stress, or uses negative coping skills may be at a higher risk for STS.

Past Trauma History: Someone who has experienced a personal trauma of their own has a higher risk of STS

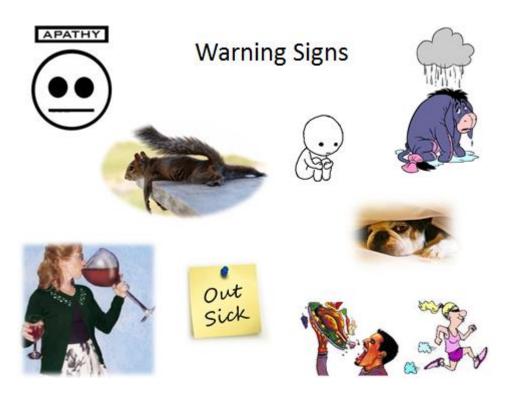
Current life circumstances: Someone who is experiencing an especially difficult time in life is at greater risk for STS. For example, financial trouble, aging parents, a new baby.

Social Support: Someone who lacks a social support system like friends or family is at higher risk for STS.

Work Style: Someone who struggles with work/life balance is at higher risk for STS.



There are many things that can impact STS like feeling unprepared to do an assigned work project or juggling work with home & family responsibilities. We can be at risk if we always put ourselves at the bottom of our priority list and neglect our self-care.



Symptoms of secondary traumatic stress can include some of the same symptoms experienced by the direct victims of trauma. STS can lead to:

Chronic exhaustion –you feel as if you don't have the time or energy to do all that needs to be done.

Social withdrawal – from friends, family, spouse

Insensitivity to violence or injustice- immunity to negative experiences in the community. **Avoidance** - You avoid certain staff, students, and families.

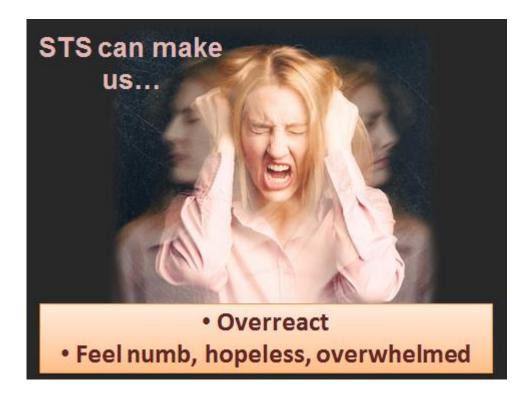
Anger/Cynicism – you begin to think none of what you're doing is going to work.

Diminished Self-Care - you are not doing what you used to do to take care of yourself.

Illness – you may begin to experience pain or illnesses.

Survival Coping- frequent happy hours, ice cream, etc.





STS makes us feel like we are losing it. You don't feel like yourself. We may experience feelings like hopelessness and numbness that can be intolerable. STS makes good teachers feel like bad teachers.



We all experience stress differently. We might feel anxiety, irritability, and depression. We also may feel guilty that we are feeling this way. We may think that we should be able to handle this, that we don't need help.

- Alterations in sense of identity, worldview, and spirituality
- · Loss of hope
- Chronic lateness
- Inability to maintain balance of empathy and objectivity
- Diminished sense of personal accomplishment



STS can affect our work; we may be frequently late or miss deadlines. We may also feel a diminished sense of personal accomplishment. If we receive praise, we may think "If only they knew what I going through, they wouldn't say that..."



There are some barriers that we can face when we experience STS. As educators, we often do not have time to process what we are experiencing. A student may tell us something very scary, but we have to keep going throughout our day as if nothing has happened.

We also may be fearful to share with our coworkers or supervisors that we are feeling overwhelmed or down. We may be afraid that it will impact their opinion of our abilities.

We also tend to put our own needs behind the needs of our families, friends, and students. Therefore we do not take opportunities to take care of ourselves.

We have to address these barriers before we can properly address our STS.



Who do you think is responsible for your self-care?

Engaging in Self-Care is doing whatever you like to do to relax. Finding ways to enjoy life is vital to your health.

Allow 1-2 minutes to brainstorm possible self-care opportunities.

You can take care of yourself by creating fun ways to relax and by staying in contact with friends and family.

Effective self-care does require good planning. There is a good parallel between how effectively you engage in self-care and how effective you are at teaching. You have to practice self-care and good coping so you can work effectively with the students and model the skills you are teaching them.

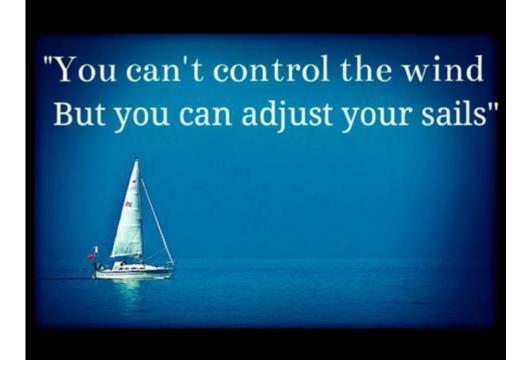


Attending to your self-care must start with basic human needs. You must eat breakfast, lunch, and dinner every day. Food is our fuel and we cannot get through our day without it. We also need to take time to drink water. Our bodies need 64 oz. of water every day. If we are dehydrated, we will not be able to function as our best selves. Sleep is also vital to our daily success. We need to get 6-8 hours of sleep every night.



It is important that you are aware of when you need to attend to self-care. Becoming aware of when you are losing balance in your life gives you an opportunity to change. Give yourself a check-up of your body and mind. In what ways does your body reacts to stress? How is your personal life affected by stress? How is your professional life affected by stress?

Try to seek balance among a number of different types of activities. This should include work, personal and family life, rest, and leisure. You will be more productive when you've had opportunities to rest and relax.



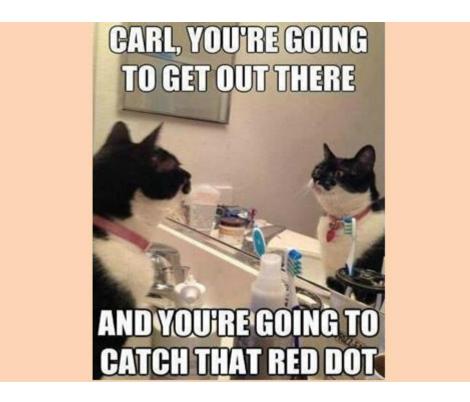
To accomplish self-care, you must try to let go of worries or stress regarding things that you cannot control. Simplification can lead to comfort when you begin to limit your attention to only the things in your live that you can control.



Take time to unplug from your devices. We tell students that they need to take a break from their phones and we also need to listen to that advice. Taking time away from your phone or computer can give you time to relax and have fun in other ways.



Fostering supportive relationships with your co-workers, friends, family and community is a great way to promote self-care. One of the most powerful stress reducers is social connection. Remember to think about ways you can reconnect with family members. Take your child's suggestion about family game night or nightly reading seriously. Hear your partner's repeated request to schedule a standing date night. Take up your friend on her offer to go and see a relaxing movie.



Just as children have an internal voice that enforces negative thoughts, we also experience negative private speech. Identify the negative impact of this voice and create positive thoughts to replace the negative noise.

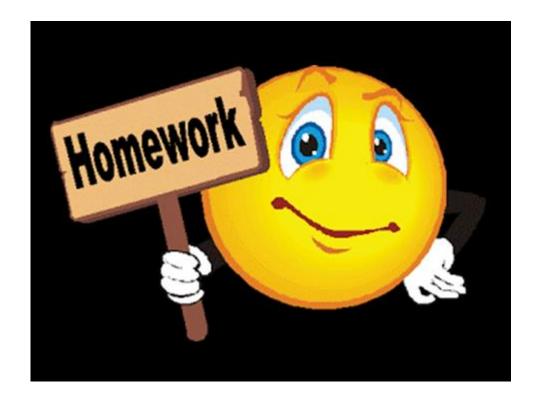
"Canned" phrases can help to combat the negative voice and allow you to begin reframing your thoughts.



You can begin to change your attitude when you find one thing everyday that brings you joy. Finding everyday joy can help reduce time spent in a negative point of view and can improve overall happiness.

It's not selfish to love yourself, take care of yourself, & to make your *Happiness* a priority. It's necessary. Mandy Hale

You are not selfish. Take yourself out from the bottom of that priority list and give yourself the rest and refreshing time that you need to be the best educator you can be.



For homework this week, Identify personal stressors, identify and **implement** self-care techniques!

Follow your Work Life Balance commitments!



Give an exit ticket and an OPTIONAL: Post Test questionnaire (APPENDIX A) to each participant and collect the completed handouts before your participants leave.

SAY:

Thank you very much for coming to each of these sessions. I hope that you were able to learn more about the students we work with and tools to help them succeed. I truly appreciate your commitment to this initiative.

These collected handouts (or copies) must be mailed to:

Akron Children's Hospital School Health Services ATTN. Melissa McClain One Perkins Square Akron, OH. 44308

Or scanned copies may be emailed to: mmcclain@chmca.org

DATE: _	

SCHOOL: _____

YOUR ROLE: ______

Exit Ticket

Please complete before you leave. I appreciate your participation and thank you for your input.

What were 3 "Ah-Ha" moments for you today?

What do you need from me?

Other thoughts and comments?

APPENDIX A

PRE/POST TESTING

PRE-TEST

Session 1

- 1. I have a better understanding of the stress response system
 - a. True
 - b. Somewhat True
 - c. Somewhat False
 - d. False
- 2. The main parts of the brain that engage the stress response are: (circle all that apply)
 - a. Hypothalamus
 - b. Hippocampus
 - c. Brainstem
 - d. Amygdala
 - e. Corpus Callosum
- 3. Trauma can be induced by a one-time event or continuous events in a child's life.
 - a. True
 - b. False
- 4. Physical Impact of Trauma can include: (Circle all that apply)
 - a. Headaches
 - b. DNA composition
 - c. Digestive problems
 - d. Hypervigilance
 - e. Disrupted brain development
- 5. Circle all the ways trauma can impact a child.
 - a. Physically
 - b. Cognitively
 - c. Emotionally
 - d. Their Future health choices
 - e. Socially
- 6. I am familiar with the ACE Survey
 - a. I have experience using the ACE Survey
 - b. I am somewhat Familiar with the ACE Survey
 - c. I am unfamiliar with the ACE Study

POST-TEST

Session 1

- 1. I have a better understanding of the stress response system
 - a. True
 - b. Somewhat True
 - c. Somewhat False
 - d. False
- 2. The main parts of the brain that engage the stress response are: (circle all that apply)
 - a. Hypothalamus
 - b. Hippocampus
 - c. Brainstem
 - d. Amygdala
 - e. Corpus Callosum
- 3. Trauma can be induced by a one-time event or continuous events in a child's life.
 - a. True
 - b. False
- 4. Physical Impact of Trauma can include: (Circle all that apply)
 - a. Headaches
 - b. DNA composition
 - c. Digestive problems
 - d. Hypervigilance
 - e. Disrupted brain development
- 5. Circle all the ways trauma can impact a child.
 - a. Physically
 - b. Cognitively
 - c. Emotionally
 - d. Their Future health choices
 - e. Socially
- 6. I am familiar with the ACE Survey
 - a. I have experience using the ACE Survey
 - b. I am somewhat Familiar with the ACE Survey
 - c. I am unfamiliar with the ACE Study

PRE-TEST

Session 2

- 1. School based triggers include: (circle all that apply)
 - a. Transitions
 - b. Change in Routine
 - c. Alcohol/drug prevention
 - d. Mother's Day projects

2. If a child is triggered they are unable to learn

- a. True
- b. Somewhat True
- c. Somewhat False
- d. False
- 3. The Spectrum of Prevention creates a framework for prevention including: (circle all that apply)
 - a. Primary Prevention
 - b. Intervention Strategies
 - c. Secondary Prevention
 - d. Tertiary Prevention
- 4. Children should have the opportunity to express their feelings in all classes at school.
 - a. True
 - b. Somewhat true
 - c. Somewhat false
 - d. False
- 5. Deep breathing is the best way to get your classroom ready to learn.
 - a. True
 - b. Somewhat true
 - c. Somewhat false
 - d. False
- 6. When a child is upset it is best to send the child to their guidance counselor,
 - a. True
 - b. Somewhat true
 - c. Somewhat false
 - d. False

POST-TEST Session 2

- 1. School based triggers include: (circle all that apply)
 - a. Transitions
 - b. Change in Routine
 - c. Alcohol/drug prevention
 - d. Mother's Day projects

2. If a child is triggered they are unable to learn

- a. True
- b. Somewhat True
- c. Somewhat False
- d. False
- 3. The Spectrum of Prevention creates a framework for prevention including: (circle all that apply)
 - a. Primary Prevention
 - b. Intervention Strategies
 - c. Secondary Prevention
 - d. Tertiary Prevention
- 4. Children should have the opportunity to express their feelings in all classes at school.
 - a. True
 - b. Somewhat true
 - c. Somewhat false
 - d. False
- 5. Deep breathing is the best way to get your classroom ready to learn.
 - a. True
 - b. Somewhat true
 - c. Somewhat false
 - d. False
- 6. When a child is upset it is best to send the child to their guidance counselor,
 - a. True
 - b. Somewhat true
 - c. Somewhat false
 - d. False

PRE-TEST

Session 3

- 1. I am familiar with the Search Institute's Developmental Assets
 - a. I actively use the Developmental Assets
 - b. I am familiar with the Developmental Assets
 - c. I am unfamiliar with the Developmental Assets

2. Developmental Assets can prevent violence

- a. True
- b. Somewhat True
- c. Somewhat False
- d. False

3. Over 60% of children possess the assets needed to succeed

- a. True
- b. Somewhat True
- c. Somewhat False
- d. False

4. A thriving formula is

- a. Academics, sports, community service
- b. Home time, positive peers, school engagement
- c. High expectations, support, praise
- d. Spark, champions, opportunity

5. I feel comfortable including asset building into my lesson plans

- a. Very comfortable
- b. Somewhat comfortable
- c. Somewhat comfortable
- d. Not at all comfortable

6. I feel prepared to increase Developmental Assets in students

- a. Very prepared
- b. Somewhat prepared
- c. Somewhat prepared
- d. Not at all prepared

POST-TEST

Session 3

- 1. I am familiar with the Search Institute's Developmental Assets
 - a. I actively use the Developmental Assets
 - b. I am familiar with the Developmental Assets
 - c. I am unfamiliar with the Developmental Assets

2. Developmental Assets can prevent violence

- a. True
- b. Somewhat True
- c. Somewhat False
- d. False
- 3. Over 60% of children possess the assets needed to succeed
 - a. True
 - b. Somewhat True
 - c. Somewhat False
 - d. False
- 4. A thriving formula is
 - a. Academics, sports, community service
 - b. Home time, positive peers, school engagement
 - c. High expectations, support, praise
 - d. Spark, champions, opportunity
- 5. I feel comfortable including asset building into my lesson plans
 - a. Very comfortable
 - b. Somewhat comfortable
 - c. Somewhat comfortable
 - d. Not at all comfortable
- 6. I feel prepared to increase Developmental Assets in students
 - a. Very prepared
 - b. Somewhat prepared
 - c. Somewhat prepared
 - d. Not at all prepared

PRE-TEST Session 4

- 1. Secondary Traumatic Stress can be common among educators
 - a. True
 - b. Somewhat True
 - c. Somewhat False
 - d. False
- 2. Working in a school environment can increase the risk for Secondary Traumatic Stress.
 - a. True
 - b. Somewhat True
 - c. Somewhat False
 - d. False
- 3. Examples of personal risk factors for Secondary Traumatic Stress include: (circle all that apply)
 - a. Past trauma history
 - b. Lack of social support
 - c. Work style
 - d. Personality
 - e. Coping style
- 4. Examples of warning signs of Secondary Traumatic Stress include: (circle all that apply)
 - a. Disconnection
 - b. Anger
 - c. Illness
 - d. Insensitivity to violence
 - e. Loss of creativity
- 5. Examples of barriers to seeking help for Secondary Traumatic Stress include: (circle all that apply)
 - a. Opportunity
 - b. Fear of judgement
 - c. Don't think we need help
 - d. Lack of resources
- 6. Who is responsible for your self-care. (circle all that apply)
 - a. You
 - b. Your coworkers
 - c. Your supervisor
 - d. Your district administration

POST-TEST

Session 4

- 1. Secondary Traumatic Stress can be common among educators
 - a. True
 - b. Somewhat True
 - c. Somewhat False
 - d. False
- 2. Working in a school environment can increase the risk for Secondary Traumatic Stress.
 - a. True
 - b. Somewhat True
 - c. Somewhat False
 - d. False
- 3. Examples of personal risk factors for Secondary Traumatic Stress include: (circle all that apply)
 - a. Past trauma history
 - b. Lack of social support
 - c. Work style
 - d. Personality
 - e. Coping style
- 4. Examples of warning signs of Secondary Traumatic Stress include: (circle all that apply)
 - a. Disconnection
 - b. Anger
 - c. Illness
 - d. Insensitivity to violence
 - e. Loss of creativity
- 5. Examples of barriers to seeking help for Secondary Traumatic Stress include: (circle all that apply)
 - a. Opportunity
 - b. Fear of judgement
 - c. Don't think we need help
 - d. Lack of resources
- 6. Who is responsible for your self-care? (circle all that apply)
 - a. You
 - b. Your coworkers
 - c. Your supervisor
 - d. Your district administration

APPENDIX B

HANDOUTS

Session One Handouts

What's My ACE Score?

Prior to your 18th birthday:

Did a parent or other adult in the household often or very often... Swear at you, insult you, put you down, or humiliate you? Or Act in a way that made you afraid that you might be physically hurt?

If Yes, enter 1 ____

1. Did a parent or other adult in the household often or very often... Push, grab, slap, or throw something at you? Or ever hit you so hard that you had marks or were injured?

If Yes, enter 1 ____

2. Did an adult or person at least 5 years older than you ever... Touch or fondle you or have you touch their body in a sexual way? or Attempt or actually have oral, anal, or vaginal intercourse with you?

If Yes, enter 1 ____

3. Did you often or very often feel that ... No one in your family loved you or thought you were important or special? or Your family didn't look out for each other, feel close to each other, or support each other?

If Yes, enter 1 ____

4. Did you often or very often feel that ... You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? or Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?

If Yes, enter 1 ____

5. Was a biological parent ever lost to you through divorce, abandonment, or other reason?

If Yes, enter 1 ____

6. Was your mother or stepmother: Often or very often pushed, grabbed, slapped, or had something thrown at her? or Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? or Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?

If Yes, enter 1 ____

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

If Yes, enter 1 ____

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

If Yes, enter 1 ____

9. Did a household member go to prison?

If Yes, enter 1 ____

Now add up your "Yes" answers: _____ this is your ACE Score

DATE: _____

SCHOOL: _____

YOUR ROLE: _____

Session 1: Exit Ticket

Please complete before you leave. I appreciate your participation and thank you for your input.

What were 3 "Ah-Ha" moments for you today?

What do you need from me?

Other thoughts and comments?

I look forward to seeing you at our next training!

Session Two Handouts

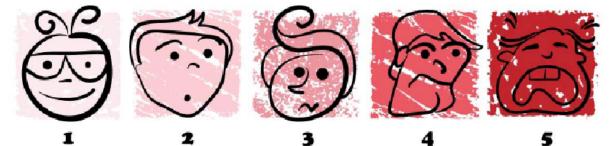
Page 1 of 4

Name:	Date:	

Directions: Read each item and answer honestly. Take your time as you complete this. Ask for help if you don't understand an item.

Rate each item from 1 – 5.

- 1 = Does not bother me at all
- 2 = Makes me feel a little uncomfortable
- 3 = Makes me feel stressed
- 4 = This upsets me
- 5 = I'm going to explode!



	1	2	3	4	5
A teacher gives me feedback / constructive criticism.	ļ				
Someone or something interrupts me while I am working.					
A teacher tells me to correct a mistake.					
When I don't understand what someone is saying to me.					
When I disagree with classmate.	J				
When a classmate asks for help.					
Homework.	J				
When a teacher tells me to do something.	J				
Group work with peers / classmates.					
When others make suggestions on how to do something.	J				
When one of my ideas is not included in a project / activity.	Ì				
When someone starts "small talk" with me.	J				
When I am excluded from an activity or conversation.					
Meeting new people.					

Copyright © 2010 www. Do2Learn.com

do2 earn

Getting a lower grade on a test, quiz, or paper.			
When someone points out a mistake I made.			
Greeting people.			
Taking tests.			
When I make a mistake.			
Reporting to school on time.			
Writing papers.			
Wearing specific clothing (i.e. long pants, coat)			
School bells or loudspeaker announcements.			
Fire drills.			
When a classmate disagrees with me.			
Surprise quizzes (pop quizzes).			
Tornado drills.			
When I am late to work / school.			
When I have to do something new or different.			
Hearing other people's music /radio.			
When others touch me (i.e. handshake, pat on back).			
Large crowds.	_		
When I have to wait for something.	_		
Teasing by others.			
Crowded hallways.	_		
Peer pressure.	_		
When my daily routine is changed.			
Loud places.			
Specific noises (i.e. beeping, humming).	_		
Certain smells (examples: perfumes, foods).			
Math assignments.			
Big projects.			
When a teacher / authority figure tells me no.			
Changing classes.			
Copyright © 2010 vʌvv. Do2Learn.com			de2lear

Page 2 of 4

Bright lighting (i.e. fluorescent).			
When I have to do something in a different way from usual.			
Big classrooms.			
When I don't understand a certain idea or concept.			
When I don't finish something on time.			
Getting wet (i.e. hands, shoes).			
Field trips.			
When someone talks to me about something that I am not interested			
Certain textures (examples: in clothing, paint, glue, chalk).			
Changes in noise level.			
Deadlines, time pressures.			
Sitting at a desk for long periods of time.			
Reading assignments.			
When other people are talking near me.			
Small spaces (i.e. cubicles).			
Asking for help.			
When Lam confused about a task / activity.			
When I have to follow specific instructions.			
Physical activity (i.e. in health class or P.E.).			
Large spaces (i.e. auditoriums, gyms, conference rooms).			
When I have to organize my things.			

Copyright © 2010 www. Do2Learn.com

Page 3 of 4

de2learn

Now that you have finished rating these items, identify your BIG TRIGGERS. These are items that you scored as a "5" (or perhaps even a "4"). Write those down below, and be as specific as you can. For example, if certain noises make you want to "explode," describe the specific noise that makes you feel this way.

My TOP FIVE "5's" ARE:

1			
2			
3			
4			
5			

Copyright © 2010 www. Do2Learn.com

de2learn

DATE: _____

SCHOOL: _____

YOUR ROLE: _____

Session 2: Exit Ticket

Please complete before you leave. I appreciate your participation and thank you for your input.

What were 3 "Ah-Ha" moments for you today?
What do you need from me?
Other thoughts and comments?

I look forward to seeing you at our next training!

Session Three Handouts



40 Developmental Assets® for Adolescents (ages 12-18)

Search Institute^{*} has identified the following building blocks of healthy development—known as **Developmental Assets**^{*} that help young people grow up healthy, caring, and responsible.

	Support	1.	Family support—Family life provides high levels of love and support.
		2.	Positive family communication-Young person and her or his parent(s) communicate positively, and young
			person is willing to seek advice and counsel from parents.
		3.	Other adult relationships—Young person receives support from three or more nonparent adults.
		4.	Caring neighborhood—Young person experiences earing neighbors.
		5.	Caring school dimate—School provides a caring, encouraging environment.
			Parent involvement in schooling—Parent(s) are actively involved in helping young person succeed in school.
	Empowerment	7.	Community values youth—Young person perceives that adults in the community value youth.
s			Youth as resources—Young people are given useful roles in the community.
et			Service to others-Young person serves in the community one hour or more per week.
Ass		10.	Safety—Young person feels safe at home, school, and in the neighborhood.
External Assets	Boundaries &	11.	Family boundaries—Family has clear rules and consequences and monitors the young person's whereabouts.
ē			School Boundaries—School provides clear rules and consequences.
Ĕ			Neighborhood boundaries—Neighbors take responsibility for monitoring young people's behavior.
			Adult role models—Parent(s) and other adults model positive, responsible behavior.
			Positive peer influence — Young person's best friends model responsible behavior.
			High expectations—Both parent(s) and teachers encourage the young person to do well.
	Constructive Use of Time	17.	Creative activities —Young person spends three or more hours per week in lessons or practice in music, theater, or other arts.
		18.	Youth programs—Young person spends three or more hours per week in sports, clubs, or organizations at school and/or in the community.
		19	Religious community—Young person spends one or more hours per week in activities in a religious institution.
			Time at home—Young person is out with friends "with nothing special to do" two or fewer nights per week.

	Commitment	21. Achievement Motivation—Young person is motivated to do well in school.
	to Learning	22. School Engagement—Young person is actively engaged in learning.
		23. Homework—Young person reports doing at least one hour of homework every school day.
		24. Bonding to school—Young person cares about her or his school.
		25. Reading for Pleasure—Young person reads for pleasure three or more hours per week.
	Positive	26. Caring —Young person places high value on helping other people.
	Values	27. Equality and social justice—Young person places high value on promoting equality and reducing hunger and poverty.
		28. Integrity—Young person acts on convictions and stands up for her or his beliefs.
2		29. Honesty-Young person "tells the truth even when it is not easy."
ē		30. Responsibility—Young person accepts and takes personal responsibility.
Internal Assets		31. Restraint—Young person believes it is important not to be sexually active or to use alcohol or other drugs.
rna	Social	32. Planning and decision making —Young person knows how to plan ahead and make choices.
Ē	Competencies	33. Interpersonal Competence—Young person has empathy, sensitivity, and friendship skills.
		34. Cultural Competence—Young person has knowledge of and comfort with people of different
		cultural/racial/ethnic backgrounds.
		35. Resistance skills—Young person can resist negative peer pressure and dangerous situations.
		36. Peaceful conflict resolution - Young person seeks to resolve conflict nonviolently.
	Positive	37. Personal power—Young person feels he or she has control over "things that happen to me."
	ldentity	38. Self-esteem—Young person reports having a high self-esteem.
		39. Sense of purpose—Young person reports that "my life has a purpose."
		40. Positive view of personal future—Young person is optimistic about her or his personal future.

The following are registered trademarks of Search Institute: Search Institute", Developmental Assets" and Healthy Communities • Healthy Youth".

DATE:	

SCHOOL: _____

YOUR ROLE: _____

Session 3: Exit Ticket

Please complete before you leave. I appreciate your participation and thank you for your input.

What were 3 "Ah-Ha" moments for you today?

What do you need from me?

Other thoughts and comments?

I look forward to seeing you at our next training!

Session Four Handouts

PROFESSIONAL QUALITY OF LIFE SCALE (PROQOL)

COMPASSION SATISFACTION AND COMPASSION FATIGUE

(PROQOL) VERSION 5 (2009)

When you [help] people you have direct contact with their lives. As you may have found, your compassion for those you [help] can affect you in positive and negative ways. Below are some-questions about your experiences, both positive and negative, as a [helper]. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the last 30 days.

=Neve	r 2=Rarely	3=Sometimes	4=Often	5=Very Often					
١.	l am happy.								
2.	I am preoccupied with more	than one person [[help].							
3.		get satisfaction from being able to [help] people.							
4.	I feel connected to others.								
5.	I jump or am startled by une	xpected sounds.							
6.	I feel invigorated after worki	ng with those I [help].							
7.	I find it difficult to separate r	ny personal life from my life	e as a [helper].						
2. 3. 4. 5. 6. 7. 8.	I am not as productive at wo [help].	ork because I am losing slee	p over traumatic exp	periences of a person I					
9.	I think that I might have been	n affected by the traumatic :	stress of those I [hel	b].					
10.	I feel trapped by my job as a	[helper].		-					
<u> </u>	Because of my [helping], ha	we felt "on edge" about var	ious things.						
- 12. - 13. - 14. - 15. - 16. - 17. - 18. - 19. - 20.	l like my work as a [helper].								
13.	I feel depressed because of t	he traumatic experiences o	f the people [help].						
14.	I feel as though I am experie	ncing the trauma of someor	ne I have <i>[helped]</i> .						
15.	I have beliefs that sustain me	.							
16.	I am pleased with how I am a	able to keep up with [helpin	g] techniques and pr	otocols.					
17.	I am the person I always war	nted to be.							
18.	My work makes me feel satis	sfied.							
19.	I feel worn out because of m	ny work as a [helþer].							
20.	I have happy thoughts and fe	elings about those I [helþ] a	and how I could help	them.					
21.	I feel overwhelmed because	my case [work] load seems	endless.						
22.	I believe I can make a differe	nce through my work.							
_ 23.	I avoid certain activities or si people I [help].	ituations because they remi	nd me of frightening	experiences of the					
24.	I am proud of what I can do	to [help].							
25.	As a result of my [helping], I	have intrusive, frightening t	houghts.						
26.	I feel "bogged down" by the	system.							
27.	I have thoughts that I am a "	success" as a [helper].							
28.	I can't recall important parts	of my work with trauma vi	ictims.						
24. 25. 26. 27. 28. 29. 30.	I am a very caring person.								
30.	I am happy that I chose to de	o this work.							

© B. Hudnall Stamm, 2009-2012. Professional Quality of Life: Compassion Satisfaction and Fatigue Version 5 (ProQOL). www.proqol.org. This test may be freely copied as long as (a) author is credited, (b) no changes are made, and (c) it is not sold. These interested in using the test should visit www.proqol.org to verify that the copy they are using is the most current version of the test.

Based on your responses, place your personal scores below. If you have any concerns, you should discuss them with a physical or mental health care professional.

Compassion Satisfaction

Compassion satisfaction is about the pleasure you derive from being able to do your work well. For example, you may feel like it is a pleasure to help others through your work. You may feel positively about your colleagues or your ability to contribute to the work setting or even the greater good of society. Higher scores on this scale represent a greater satisfaction related to your ability to be an effective caregiver in your job.

The average score is 50 (SD 10; alpha scale reliability .88). About 25% of people score higher than 57 and about 25% of people score below 43. If you are in the higher range, you probably derive a good deal of professional satisfaction from your position. If your scores are below 40, you may either find problems with your job, or there may be some other reason—for example, you might derive your satisfaction from activities other than your job.

Burnout

Most people have an intuitive idea of what burnout is. From the research perspective, burnout is one of the elements of Compassion Fatigue (CF). It is associated with feelings of hopelessness and difficulties in dealing with work or in doing your job effectively. These negative feelings usually have a gradual onset. They can reflect the feeling that your efforts make no difference, or they can be associated with a very high workload or a non-supportive work environment. Higher scores on this scale mean that you are at higher risk for burnout.

The average score on the burnout scale is 50 (SD 10; alpha scale reliability .75). About 25% of people score above 57 and about 25% of people score below 43. If your score is below 43, this probably reflects positive feelings about your ability to be effective in your work. If you score above 57 you may wish to think about what at work makes you feel like you are not effective in your position. Your score may reflect your mood; perhaps you were having a "bad day" or are in need of some time off. If the high score persists or if it is reflective of other worries, it may be a cause for concern.

Secondary Traumatic Stress_

The second component of Compassion Fatigue (CF) is secondary traumatic stress (STS). It is about your work related, secondary exposure to extremely or traumatically stressful events. Developing problems due to exposure to other's trauma is somewhat rare but does happen to many people who care for those who have experienced extremely or traumatically stressful events. For example, you may repeatedly hear stories about the traumatic things that happen to other people, commonly called Vicarious Traumatization. If your work puts you directly in the path of danger, for example, field work in a war or area of civil violence, this is not secondary exposure; your exposure is primary. However, if you are exposed to others' traumatic events as a result of your work, for example, as a therapist or an emergency worker, this is secondary exposure. The symptoms of STS are usually rapid in onset and associated with a particular event. They may include being afraid, having difficulty sleeping, having images of the upsetting event pop into your mind, or avoiding things that remind you of the event.

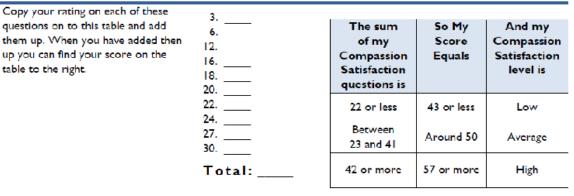
The average score on this scale is 50 (SD 10; alpha scale reliability .81). About 25% of people score below 43 and about 25% of people score above 57. If your score is above 57, you may want to take some time to think about what at work may be frightening to you or if there is some other reason for the elevated score. While higher scores do not mean that you do have a problem, they are an indication that you may want to examine how you feel about your work and your work environment. You may wish to discuss this with your supervisor, a colleague, or a health care professional.

© B. Hudnall Stamm, 2009-2012. Professional Quality of Life. Compassion Satisfaction and Fatigue Version 5 (ProQOL). www.proqol.org. This test may be freely copied as long as (a) author is credited, (b) no changes are made, and (c) it is not sold. Those interested in using the test should visit www.proqol.org to verify that the copy they are using is the most current version of the test.

WHAT IS MY SCORE AND WHAT DOES IT MEAN?

In this section, you will score your test so you understand the interpretation for you. To find your score on each section, total the questions listed on the left and then find your score in the table on the right of the section.

Compassion Satisfaction Scale



Burnout Scale

On the burnout scale you will need to take an extra step. Starred items are "reverse scored." If you scored the item 1, write a 5 beside it. The reason we ask you to reverse the scores is because scientifically the measure works better when these questions are asked in a positive way though they can tell us more about their negative form. For example, question 1 "Lam hanny" tells us more about

1. Tam happy tells us more about							
You	Change	the effects					
Wrote	to	of helping					
	5	when you					
2	4	are not					
3	3	happy so					
4	2	you reverse					
5	I	the score					

*1. *4. 8. 10. *I5. *17 19. 21. 26. *29.

The sum of my Burnout Questions is	So my score equals	And my Burnout level is
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

Total:

2

Secondary Traumatic Stress Scale

Just like you did on Compassion Satisfaction, copy your rating on each of these questions on to this table and add them up. When you have added then up you can find your score on the table to the right.

2 5 7 9 11 13	The sum of my Secondary Trauma questions is	So My Score Equals	And my Secondary Traumatic Stress level is
14 23	22 or less	43 or less	Low
25 28	Between 23 and 41	Around 50	Average
Total:	42 or more	57 or more	High

© B. Hudnall Stamm, 2009-2012. Professional Quality of Life: Compassion Satisfaction and Fatigue Version 5. (ProQOL). www.proqol.org. This test. may be freely copied as long as (a) author is credited, (b) no changes are made, and (c) it is not sold. Those interested in using the test should visit www.progol.org to verify that the copy they are using is the most current version of the test. 3 DATE: _____

SCHOOL: _____

YOUR ROLE: _____

Session 4: Exit Ticket

Please complete before you leave. I appreciate your participation and thank you for your input.

What were 3 "Ah-Ha" moments for you today?		
What do you need from me?		
Other thoughts and comments?		

Thank You!

APPENDIX C

References

References

- Acevedo, V. E. (2014, May 1). Vicarious Resilience: An Exploration of Teachers and Children's Resilience in Highly Challenging Social Contexts. *Journal of Aggression, Maltreatment & Trauma, 23* (5), 473.
- Bothe, D. A. (2014, January 1). The Effects of a Stress Management Intervention in Elementary School Children. *Journal of Developmental and Behavioral Pediatrics, 35* (1), 62.
- Figley, C.R. (1995). Compassion Fatigue: Coping with Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized. New York: Brunner/Mazel, Inc.
- Graham-Bermann, S. A., Howell, K., Habarth, J., Krishnan, S., Loree, A., Bermann, E. A. (2008, April). <u>Toward Assessing Traumatic Events and Stress Symptoms in Preschool Children</u> <u>From Low-Income Families.</u> *American Journal of Orthopsychiatry, 78* (2). 220-228.
- Greeson, J.K.P. (2011, November, 1). Complex Trauma and Mental Health in Children and Adolescents Placed in Foster Care: Findings from the National Child Traumatic Stress Network. *Child welfare, 90* (6), 91.
- Kindsvatter, A., Geroski, A. (2014, October). The Impact of Early Life Stress on the Neurodevelopment of the Stress Response System. *Journal of Counseling & Development*, 92 (4), 472-480
- Kragg, G. (2009, January 1). "Learn Young, Learn Fair", a stress management program for fifth and sixth graders: longitudinal results from an experimental study. *Journal of child psychology and psychiatry, 50* (9), 1185.
- Lucas, L. (2007). The Pain of Attachment—"You Have to Put a Little Wedge in There" How Vicarious Trauma Affects Child/Teacher Attachment, *Childhood Education*, 84 (2), 85-91.
- Oelberg, B. (1996). Making It Better: Activities for Children Living in a Stressful World. St. Paul, New York: Redleaf Press.
- Rice, M.(2008, March 1). Relationship of Anger, Stress, and Coping with School Connectedness in Fourth-Grade Children. *The Journal of School Health, 78* (3), 149.
- The Search Institute. (2006). Pass it On!: Ready to Use Handouts for Asset Builders. Minneapolis, Minnesota: Search Institute.
- Scales, P., Leffert, N. (2004). Developmental Assets: A Synthesis of the Scientific Research on Adolescent Development. Minneapolis, Minnesota: Search Institute.
- Smith Hatcher, S. (2011, July1). An Assessment of Secondary Traumatic Stress in Juvenile Justice Education Workers. *Journal of Correctional Health Care*, 17 (3), 208.
- Vanderbilt Kennedy Center. (2016). Progressive Muscle Relaxation Script for Parents to use with Their Child. Retrieved from

http://vkc.mc.vanderbilt.edu/asdbloodwork/parent/muscletensingscript.php

Verduijn, N.J.C., Meesters, C.M.G., Engelhard, I.M. & Vincken, M.J.B. (2015, October
1). Emotional Reasoning in Acutely Traumatized Children and Adolescents: An Exploratory Study. *Journal of Child and Family Studies*, 24 (10), 2966.

National Child Traumatic Stress Network - Child Trauma Home. Retrieved from http://www.nctsn.org/

Centers for Disease Control and Prevention. Child Maltreatment Consequences. Retrieved from <u>http://www.cdc.gov/ViolencePrevention/childmaltreatment/consequences.html</u>

Media

- ASMR Relax For A While. (2013, November 12). Ocean Escape (with music): Walk Along the Beach Guided Meditation and Visualization [Video file]. Retrieved from https://youtu.be/ar W4jSzOIM
- Anxiety Disorders Association of British Columbia. (2016). Mindshift (Version 1.21) [Mobile application software]. Retrieved from https://itunes.apple.com/us/app/mindshift/id634684825?mt=8BBC. (2010, January 14). Managing Stress Brainsmart BBC [Video file]. Retrieved from https://youtu.be/hnpQrMqDoqE
- Center on the Developing Child at Harvard University. (2011, September 29). Toxic Stress Derails Healthy Development [Video file]. Retrieved from <u>https://youtu.be/rVwFkcOZHJw</u>
- Devito, D., Shamberg, M., Sher, S. (Producer), & LaGravenese, R. (Director). (2011). Freedom Writers [Motion picture]. U.S.A: Paramount Pictures. Freedom Writers Diary Scene [Video file]. Retrieved from <u>https://youtu.be/ILL7nShKplU</u>
- Do2Learn. (2016). *Emotions Color Wheel*. Retrieved from <u>http://do2learn.com/organizationtools/EmotionsColorWheel/index.htm</u>
- PBS Parents. (2014, January 6). Exploring Feelings [Video file]. Retrieved from <u>https://youtu.be/hAckcoesj4s</u>
- Sesame Street. (2012, October 12). Sesame Street: Common and Colbie Caillat "Belly Breathe" with Elmo [Video file]. Retrieved from <u>https://youtu.be/ mZbzDOpylA</u>
- TEDx Talks. (2011, April 22). TEDxTC Peter Benson Sparks: How Youth Thrive. [Video file]. Retrieved from https://youtu.be/TqzUHcW58Us
- TV Commercials DB. (2014, February 3). Jell O Pudding Commercial Puddin' Hour 2014 [Video file]. Retrieved from <u>https://youtu.be/xPPVs2kMMvM</u>
- Grazer & Reitman. (1990). Kindergarten Cop (4/10) Movie CLIP Shut Up! 2014 [Video file]. Retrieved from <u>https://youtu.be/tO4X8_c80kg</u>

Images

 Girl With A Balloon. Southbank, London: N.p., 2004. Print.
 PET Scan Healthy and Abused Brain Comparison. Center for Disease Control and Prevention. DeKalb County, Georgia. Print.
 Whats on your plate activity. Taylor Garbe, 2016. Illustration.

Inside Out. Disney Pictures, 2015. Animation.

Akron Children's Hospital

Trauma Training Online Links

Melissa McClain

mmcclain@chmca.org

These YouTube videos are only available to trainees who have attended the train the trainer program. The videos are to be used for preparation and technical assistance to trainees. These videos are not to be shared in anyway online or otherwise.

Trauma Training Melissa McClain Module 1- Trauma Overview

https://youtu.be/O6pua_VXRtc

Trauma Training Melissa McClain Module 2- Trauma in the Classroom

https://youtu.be/a2PF0nPCAjI

Trauma Training Melissa McClain Module 3- Increasing Developmental Assets

https://youtu.be/QWax6zL_uXk

Trauma Training Melissa McClain Module 4- Secondary Traumatic Stress

https://youtu.be/DfFadPpjNPc

If you have questions regarding the curriculum contact: Melissa McClain 330-620-4355 <u>mmcclain@chmca.org</u>



Akron Children's Hospital Trauma Train the Trainer Curriculum 2017 Written by Melissa McClain

This curriculum is funded by a grant from The National Childhood Traumatic Stress Network. The PowerPoint, manual design, content choice, and the presentation of this curriculum is the intellectual property of the author. The use of this curriculum and any reproduction of its contents require express consent of the author. This curriculum, all images, and media are to be used for academic purposes only and do not carry any commercial value. Visit nctsn.org for more information or community resources in your region.

> If you have questions regarding the curriculum contact: Melissa McClain 330-620-4355 <u>mmcclain@chmca.org</u>

Train the Trainer Evaluation

Melissa McClain

Date of Training: _____

School or Organization:_____

Please complete the following questions using a 1-5 scale.

- 1- Strongly Disagree
- 2- Disagree
- 3- Neutral
- 4- Agree
- 5- Strongly Agree

Workshop objectives were met.

1 2 3 4 5

I discovered new content and resources related to trauma.

1 2 3 4 5

I was able to contribute ideas and perspectives to the discussion.

1 2 3 4 5

I was able to ask questions and participate in group discussions.

1 2 3 4 5

The information provided by the facilitator was useful.

1 2 3 4 5

The facilitator modeled relevant teaching strategies.

1 2 3 4 5

The information provided was relevant and useful for my school and classroom.

1 2 3 4 5

My favorite part of the training was:

My least favorite part of the training was:

What are some possible barriers to training professionals in your school or organization?

Did this training prepare you to train professionals in your school or organization? If not, please list suggestions that would have helped you feel more prepared.

Please share any further comments on the facilitator, content, format or logistics of the training.

Thank you for your hard work and dedication to this Training. I truly appreciate the extra time and effort that you will contribute to help train professionals in Ohio. Congratulations on a job well done!