Trauma is an individual experience whereby powerful and dangerous events overwhelm an individual’s capacity to cope (Rice & Groves, 2005). When a child experiences trauma, it can cause devastating, long-term emotional, mental, and physical health issues. Vitaly important for educators to understand the effects of trauma on development and to be able to implement trauma-informed practices in the learning environment. As teachers in a school setting, it is invaluable to know that an event that is traumatic to one may not be traumatic to another. Trauma is identified as acute or chronic. Acute trauma is a single, short-term event that has occurred in someone’s life (e.g., school shootings, gang-related violence, natural disasters, serious accidents, sudden loss of a loved one, or physical or sexual assault). Whereas chronic is a prolonged occurrence extending over time (e.g., addiction, incarceration, emotional, physical, or sexual abuse, domestic violence).

For an individual carrying trauma, it means continuing to organize one’s life “as if the trauma were still going on—unchanged and immutable—as every new encounter or event is contaminated by the past” (Van Der Kolk, 2014, p. 53). When a child experiences trauma, it can lead to devastating, long-term emotional, mental, and physical health issues.

**EFFECT UPON THE BODY**

- Brain development, the immune system, hormonal systems, and even the way our DNA is read and transcribed (Burke Harris, 2015)
- Toxic stress response involves the body consistently producing too much of the stress hormones adrenaline and cortisol, which negatively affects a person’s health
- Shuts down the conscious mind and propels the body to run, hide, fight, or, on occasion, freeze (Van Der Kolk, 2014).
- Children may not know how to communicate their needs or ask for help.
- Children are unable to identify a person with whom they feel safe or loved.

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**INTRODUCTION: WHAT IS TRAUMA?**

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**THE NEED FOR CHANGE**

Teachers and school settings have an opportunity to deliver daily doses of healing interactions that serve as antidotes to toxic stress. Learners experiencing stress or trauma are using the downstairs area of the brain (limbic area): arousal, emotion and the fight, flight or freeze response. Being able to feel safe with other people is probably the single most important aspect of mental health; safe connections are fundamental to meaningful and satisfying lives for developing children.

Since education and learning requires children to use the upstairs area of the brain (prefrontal cortex), enabling thought and reason, it is essential that healthy relationships are primary. If children feel safe with others, these cultivated connections become fundamental to meaningful and satisfying lives.

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**DATA METHOD**

Interviews provided an approach to collect perspectives of teacher’s experience with children affected by trauma.

Observations examined what is happening in school setting while documenting approaches and engagement with children.

Surveys invited teachers, professionals, and parents with a list of questions and Likert items to gather data about their attitudes, experiences, and/or opinions related to effective trauma-informed practices.

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**NEXT STEPS**

- Learning Environment
- School / Community Network
- Self Care

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**PRELIMINARY FINDINGS**

Initial findings from interviews were compiled to capture the voices of school staff as they discussed their experience and support for children affected by trauma. **Findings uncovered several emerging and inter-related themes, presented here:**

- Power of Relationships / Building Trust
- Focus on a Child’s Need
- Cultivate Patience / Respond Outweighs Reaction
- Punitive Measures are Detrimental