Preparing Trauma-Sensitive Teachers: Strategies for Teacher Educators

Connie Honsinger, Ph.D
Chesterfield County Public Schools

Mavis Hendricks Brown, Ph.D.
University of Richmond

Abstract

Many children who attend school have or will experience some type of trauma that may impact cognition, behavior, and relationships (Van Der Kolk, 2014). The result of these adverse experiences is often diminished concentration, memory, organization, and language skills that can exacerbate maladjustment in the school setting (Ogata, 2017). According to the National Child Traumatic Stress Network (NCTSN) (2016), difficulties displayed by children impacted by trauma can also include poor social skills, increased aggression, an inability to trust, dysregulation, fearfulness, anxiety, and avoidant behaviors. Despite how common exposure to trauma is and the significant impact it can have on students and the classroom, few teachers are prepared to recognize and respond appropriately. This paper will provide information and resources that can assist teacher educators to better prepare future teachers to address these concerns and build resilience in all students particularly those impacted by trauma.
     Keywords: Trauma, Classroom, Strategies

"When little people are overwhelmed by big emotions, it is our job to share our calm, not join their chaos."

L. R. Knost

"There is no more effective neurobiological intervention than a safe relationship."
"Relationships are the agents of change and the most powerful therapy is love."

-- Bruce Perry, PhD, MD, researcher & child psychiatrist

Trauma has no boundaries with regard to age, gender, socioeconomic status, race, ethnicity, geography, or sexual orientation and it is often a common experience of individuals who struggle with mental health disorders. Students who have experiences of trauma exist in every school and community. There is a strong correlation between students who have experienced trauma and poor school performance (Goodman, Miller, & Olatunji, 2011). Given these concerns, it has become critically important to help prepare teachers with the skills and strategies necessary to successfully work with students who have been impacted by trauma.

Virginia has taken the lead in focusing on issues that impact children with the establishment of the Children's Cabinet by Governor Ralph Northam in June of 2018. The executive order identified a number of priorities; (a) Early childhood development and school readiness, (b) Nutrition and food security, and (c) Systems of care and safety for school-aged youth. One of the goals of the governor's policy council on PreK-12 education in Virginia was to identify significant issues and make recommendations on how to improve public education. Equity and opportunity for every student was described as a high priority and within this category the council acknowledged the importance of promoting alternatives to punitive school discipline. Recommendations further supported the implementation of positive behavioral supports, restorative practices, and making Virginia a national leader in using trauma-informed instruction in all of its public schools to support student success.

In addition, the governor created the Trauma-Informed Care for Children Work Group that was charged with developing recommendations to enhance student safety and to support a consistent, evidence-based, and culturally-competent statewide response to childhood trauma. Although the groups are in the preliminary stages of work, one recommendation that has come

forward is for child and family-serving agencies to adopt the Substance Abuse and Mental Health Services Administration (SAMHSA) definition and framework of trauma-informed care.

The Virginia Department of Education has also reflected this emphasis on trauma education within teacher licensure and recertification requirements, approved August of 2018. According to the State Board of Education, Licensure Regulations for School Personnel (Article 2.1) Human Development and Learning, skills in this area shall contribute to an understanding of the physical, social, emotional, speech and language, and intellectual development of children and the ability to use this understanding in guiding learning experiences and relating meaningfully to students. Highlighted within this article is an understanding of trauma, including child abuse and neglect and other adverse childhood experiences and family disruptions (VDOE, 2018). According to Tara McDaniel, director of teacher education in Virginia, there are no plans at the moment to include any specific professional development regarding adverse childhood experiences and understanding trauma, as that is currently left up to the individual locality (T. McDaniel, personal communication, January 23, 2019).

Developing a Trauma-Informed Approach

Given the absence of direction on the specific content related to trauma, what should teacher educators include in their teacher preparation programs? Currently the child abuse and neglect recognition and intervention training curriculum guide on the Virginia Department of Education website (Attachment A, Superintendent Memo #209) provides some information regarding child abuse recognition and reporting, promoting resiliency, and resources. In addition, information from The Substance Abuse and Mental Health Services Administration (SAMHSA, 2014) can assist teacher educators with resources on trauma-informed care and trauma-sensitive practices. Both are excellent resources however, what are the most important

concepts teachers should know prior to walking into the classroom? How can teacher educators

help future teachers develop a trauma-sensitive lens, what skills are needed, and what does this

look like in practice?

Institutions as well as many school districts and organizations have looked to local

expertise for direction in providing education in becoming trauma-informed. The Greater

Richmond Trauma Informed Community Network (TICN) is a diverse group of individuals,

convened by Greater Richmond SCAN (Stop Child Abuse Now), who share a commitment

towards the creation of a more trauma informed and resilient community within the Greater

Richmond region. This network includes a number of committee's to address this mission

including a training committee that has developed a common language and understanding around

our community on the impact of adverse childhood experiences and strategies to build individual

and community resilience.

Members of the training committee provide community workshops free of charge as well

as presentations to specific organizations upon request using research-based information and best

practices. The TICN Outcomes Committee has worked to develop an evaluation plan to measure

the collective impact and value of the TICN in the community. Knowledge is assessed using a

variety of methods including pre and post-tests, evaluations, qualitative feedback, and

assessments to identify changes in how individuals, organizations, and/ or systems function and

interact as a result (Greater Richmond SCAN, n.d.).

The Virginia Department of Behavioral Health, responsible for promoting behavioral

health wellness, has also launched their Adverse Childhood Experiences (ACE) Initiative with its

Master Trainer series in partnership with Dr. Robert Anda, one of the original researchers of the

ACE study.   Two cohorts of trainers have participated in this two-day in depth training with the

charge to conduct a minimum of three additional trainings in their own communities across the state. This training is provided free of charge and trainers are listed on the prevention works website (Virginia Prevention Works, 2019).

According to SAMHSA (2014), a trauma-informed approach includes four Rs; (1) *Realize* the widespread impact of trauma and understand potential paths for recovery, (2) *Recognize* the signs and symptoms of trauma in clients/ students, families, staff, and others involved with the system, (3) *Respond* by fully integrating knowledge about trauma into policies, procedures, and practices, and (4) *Resist* re-traumatization. Using this framework, teacher educators can address student needs and promote learning that will prepare them to work with K-12 students who have been impacted by trauma. Key concepts, skills, and strategies within this framework will be addressed in this article.

Realize: The Impact of Trauma

The first step to becoming trauma-informed is the realization that trauma is pervasive in the lives of children. It is not isolated to students with emotional and behavioral disabilities or select schools or communities but exists everywhere. According to the U. S. Department of Health and Human Services (DHHS) (2013), an estimated 679,000 children were victimized by maltreatment that included neglect, physical, sexual, and psychological abuse. Nearly a half million children who experience physical and sexual abuse and neglect are placed into foster care each year (Dwyer & Noonan, 2005). An estimated one in five Americans was sexually molested as a child, one in four was beaten by a parent, and one in eight children witnessed their mother being physically assaulted (VanDerKolk, 2014). Nearly 11 million children under the age of 18 grow up in households with alcoholic relatives; 10 million have experienced the incarceration of a parent and live below the poverty level in unsafe communities (Paccione-Dyszlewski, 2016).

There is little question, that for many students, adverse childhood experiences or ACEs are common and often highly interrelated; where one ACE occurs, there are usually others (ACE Interface, 2015). There is a significant dose-response relationship that indicates the more adverse experiences; the more likely an individual is to experience mental, physical, behavioral health, and social problems (Felitti et al., 1998). Adverse experiences are also more likely to be transmitted from one generation to the next repeating toxic levels of stress and unhealthy coping patterns.

Teacher educators will want to keep in mind that some future educators they work with have their own histories of trauma (Carello & Butler, 2015). Statistics regarding undergraduate college students indicate as high as 66-94% report exposure to one or more traumatic events (Frazier et al., 2009). The introduction of information regarding adverse childhood experiences can trigger individual responses that pre-service teachers may not be prepared for. As a result, teacher educators need to be mindful of potential reactions and be prepared to provide appropriate support and resources that may range from warning students of such a reaction prior to the introduction of the material to the provision of resources for those who may want to seek additional supports provided by the institution such as counseling.

Recognize: **The Signs and Symptoms of Trauma**

SAMHSA defines trauma as an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being. In addition, the adverse events often involve intense fear and helplessness and fall outside of one's ability to cope (Perry, 2017). Examples of trauma include, but are not limited to: experiencing or observing physical, sexual, and emotional abuse; childhood neglect;

having a family member with a mental health or substance use disorder; experiencing or witnessing violence in the community or while serving in the military, poverty, and systemic discrimination (NCTSN, 2016).

A significant number of youth have previously or will experience some type of trauma prior to the age of 18 that may impact their ability to regulate their emotions, develop healthy relationships, and achieve academic success in the school environment (Van Der Kolk, 2014). Neurobiological studies have identified physiological changes to children's brains due to exposure to trauma potentially resulting in emotional and behavioral responses that can interfere with learning (Center on the Developing Child, 2007). Children impacted by trauma may experience diminished concentration, difficulty with memory and organization, increased aggression and negative peer interactions, dysregulation, avoidant behaviors, and distrust of teachers which can exacerbate challenges in the school setting (NCTSN, 2016; Ogata, 2017).

So how does a teacher know if a student has been affected by trauma? The answer is, despite some academic, behavioral or social indicators, they may never know. We need to presume the K-12 students we serve have a history of traumatic stress and exercise "universal precautions" by creating systems of care that are trauma-informed (Hodas, 2005). Universal design theories share some common principles with trauma-informed care such as using a strengths-based, person centered, and solution-focused approach (Carello & Butler, 2015).

Respond: **Using a Trauma-Sensitive Lens**

Teachers working with children and adolescents in the school environment spend a significant amount of time addressing difficult behaviors and assisting students with poor academic achievement (Keller-Dupree, 2013; Perry, 2009). Educators who learn about the impacts of trauma can have a greater understanding of some of the underlying reasons for

children's inappropriate behavior in the classroom rather than misreading it as intentional misconduct in need of more harsh consequences. A barrier to adopting a new and more trauma-informed approach for educators who believe in a discipline-oriented or more confrontational style for student misbehavior is the perception that one is "being soft" (Walkley & Cox, 2013).

Meeting the needs of students is a collaborative effort among all school professionals. The strategies associated with a trauma-informed environment need to span a continuum of prevention through intensive intervention using a multi-pronged approach that includes access to both internal and external supports (Chafouleas, Johnson, Overstreet, & Santos, 2016). Internal supports such as school counselors, social workers, psychologists, and special education teachers can help to facilitate coping when students are experiencing stressors. The goal is to provide universal (Tier 1) supports for all students by fostering a positive environment and skill building. Students who need more intensive services (Tiers 2 & 3) may require more targeted or individual interventions to support academic, social-emotional, behavioral, and mental health needs. These supports can extend to adult needs for education as well as support with regards to practices, data, and systems.

It has been well documented that trauma changes the way children and adolescents interact with others and they may adopt behaviors or patterns of thinking that can compound their problems and cause further trauma. Evidence-based approaches have demonstrated the importance of breaking the cycle of trauma by considering the question, "What happened to you?" instead of "What's wrong with you?" (SAMHSA, 2012). Multi-tiered frameworks of service delivery such as Positive Behavioral Interventions and Supports (PBIS) are built on foundations involving early identification of risk, varied levels of intervention designed to teach skills and prevent more serious problems which align well with a trauma-informed approach.

The focus is on positive, preventive, and proactive approaches and a continual data-driven evaluation of responses. It is critical for teacher preparation programs to address frameworks such as PBIS. According to the National Education Association (2014), positive behavior supports help teachers recognize the significance of classroom management and preventive school discipline in order to maximize student success.

A shift in mindset puts the focus on what has happened to the child and what skills are needed rather than focusing on discipline alone for behavior that may be a student's attempt to cope with elevated levels of stress (Greene, 2014). Failure to acknowledge the impact of traumatic stress in children in the school setting may also lead to mislabeling students and giving diagnoses such as attention deficit disorder and oppositional-defiant disorder among others (Black, Woodsworth, Tremblay, & Carpenter, 2012). Further support for this movement came from the recent reauthorization of the Every Student Succeeds Act (ESSA) which included the provision for trauma-informed approaches, training for school personnel, and recognition of the strong relationship between a positive school climate and student learning (NEA, 2014; Prewitt, 2016).

Many children who have experienced traumatic events view the world as a dangerous place and are more vulnerable to stress which can sabotage their ability to manage emotions and use coping mechanisms that can help to regulate their behavior. The development of learning environments that feel safe and supportive require underlying foundations such as trusting relationships, organization and structure, and engagement that builds on student strengths and teaches self-regulation skills. Teachers who provide trauma-sensitive supports in their classrooms can play a significant role in healing for students impacted by trauma but those practices will also benefit the growth and development of all students with whom they work. It

is important for teacher educators to provide prospective teachers not only an understanding of the importance of becoming a trauma-informed educator but specific strategies for K-12 teachers to follow in order to become trauma-sensitive practitioners (Table 1). These strategies fall within the three main components of the trauma-informed care movement.

Creating Safe Environments

The trauma-informed schools movement was created to encourage the development of positive and supportive learning environments that are responsive to the needs of students who have been impacted by trauma. Safety and consistency are cornerstones of a trauma-informed educational practice. This is often created through the use of school-wide positive behavioral interventions and supports and classroom expectations that are consistently taught and reinforced (Cavanaugh, 2016). High rates of positive interactions help to build upon student strengths and support feelings of success and self-efficacy as do increased peer supports and social skills instruction (Sugai, O'Keefe, & Fallon, 2012). The classroom environment should be a place of comfort and safety. The teacher can foster a caring classroom community where peers support each other as well as modify the physical environment by considering desk arrangements, color, lighting, music, scents, plants, and even alternative seating options. The environment can be the first line of defense and set the stage for regulation to occur throughout the school day. Imagine as a student coming from a loud and crowded bus ride, navigating through a busy hallway with a school bell ringing to a classroom where the teacher greets you by name with a smile, lights are lowered, the room is organized, there is calming music playing, and the schedule for the day is clearly displayed in the front of the classroom with the expectations outlined for the beginning routine. All students thrive and feel safe in an environment where the expectations are clear, routines are predictable and consistent, and students know what to expect (Sugai & Horner,

2010). Research indicates school and classroom environments benefit from the integration of trauma-informed strategies within the PBIS framework which focuses on improving school climate, reducing problem behaviors, and enhancing academic achievement (Chafouleas et al., 2016).

Building Relationships and Connections

Students who have experienced trauma may have some difficulty forming healthy relationships. Discouraged children often have a negative view of self, others, and the world which may translate to maladaptive ways of dealing with others and school related tasks. Safe, predictable, and consistent relationships can help to bring the brain back into regulation allowing students to then be able to access higher level thinking and reasoning skills (Perry, 2011). Supportive relationships with students that provide unconditional positive regard can promote healing and growth. Perry (2011) referred to relationships as the "agents of change" and Comer (1995) said, "No significant learning can take place without a significant relationship." According to student interviews, teacher actions that demonstrated care and respect included both verbal and nonverbal signals and behaviors such as calling them by name, answering their questions, talking respectfully to them, noticing and greeting them, and helping them when they needed help (Payne, 2008). Students can often quickly tell when a teacher's interactions and intent are not genuine and if their behaviors indicate judgement or support.

Students impacted by trauma often have lagging social and emotional skills that can make developing positive relationships and connections with them more challenging. Teacher educators could introduce the 2 X 10 strategy to teacher candidates for practice (Wlodkowski, 1983). This strategy includes talking with the person for at least two minutes each day for ten days in a row. The conversation should be brief, honest, allow for student voice, solution

oriented, and a reminder the student is accountable to others (Smith & Lambert, 2008). This simple strategy can increase student engagement, improve behavior, and send the message to the student that you are interested and you care (Smith & Lambert, 2008).

Supporting and Teaching Emotional Regulation

Increasingly important is an awareness of the internal emotional state of the adult. When a student exhibits disruptive or even aggressive behaviors an adult's emotional reaction may elicit a similar response. This is not only ineffective but can often escalate the situation. Educators must maintain a focus on preventative strategies while also understanding how to respond to challenging behaviors. According to Tackie, Nixon, and Keels (2018), aggressive or disruptive behaviors are indicators that a physiological response inside the student's brain and body is also taking place. Adults may feel similarly making it difficult to respond in a calm and thoughtful manner. Helpful strategies could be taught through role playing potential scenarios of student disruptions and include depersonalizing the behavior (it's not about you), remaining calm and minimizing your outward reactions (using deep breathing and possibly some mindfulness techniques), and using short and simple language (Tackie et al., 2018). A sequence of strategies could include; 1) identify the behavior the student is displaying, 2) check to see if you interpreted their behavior correctly, 3) affirm and validate student feelings, 4) assist the student in identifying reasonable choices or options, and 5) follow up with the student and discuss what went well, what possible changes or plans need to be in place for the future. Some things to avoid may include 1) don't argue or get into a power struggle, 2) don't raise your voice, and 3) don't handle the situation in public in front of the student's peers because you will open the door to additional drama (Tackie et al., 2018).

When a student is feeling stressed and overwhelmed or may be trying to deal with traumatic or painful memories the pre-frontal cortex or rational thinking and problem-solving areas of the brain shut down and a state of intense emotions with often impulsive responses takes over (Siegel, 2011). Students need skills in order to manage stressors so it is critical that teachers learn specific techniques they can model and practice with students that can build coping strategies such as identifying and validating emotions, deep breathing, positive imagery, and the creation of calming spaces or break times that can assist a student to calm emotions and return to a focus on learning (Weist-Stevenson & Lee, 2016). Teachers in the field can access a variety of support personnel such as the school counselor, social worker, and psychologist who can provide further guidance in this area. Perry (2006) recommends a sequence of engagement that begins with calming or managing emotions also referred to as *regulation* in order to be able to connect with or *relate* to the student and then *reason* with them. Regulation can be done independently by the student who has learned the skills and tools needed for reducing stress or can be assisted by the teacher using a calm voice, giving choices, modeling use of sensory items or moving to a calming area. Once regulated the teacher will be able to relate to the student, identify and validate feelings, and then move into problem-solving or reasoning with the student.

Resist Re-traumatization: Traditional Approaches are Not Working

Research indicates traumatic experiences in childhood can lead to toxic levels of stress that can disrupt development, impact academic success, and contribute to behavior problems in school-aged children (Clarkson Freeman, 2014; Proche, Fortuna, Lin, & Alegria, 2011). According to a study conducted in Spokane Washington, students with three or more adverse experiences had three times the rate of academic failure, five times the rate of severe attendance problems, six times the rate of school behavior problems, and four times the rate of poor health

compared with children with no known trauma (Blodgett et al., 2012; Iachini, Peetiwala, & DeHart, 2016). Without sufficient education, teachers are more likely to view these behaviors as bad or disruptive resulting in a focus on punishment as opposed to skill building (Emmons & Belangee, 2018). Traditional approaches to disruptive behavior in the classroom often focus on consequences and include strategies such as a change in status on a behavior chart, a loss of points or privileges, public correction, removal from the classroom, calls home, and suspension.

The school discipline reform movement, considering the impact of trauma, has recommended the reduction of exclusionary discipline practices and an increase in the use of non-punitive, trauma-informed restorative practices to address the root causes of disruptive student behavior (Max, 2017). Evidence-based, multi-tiered behavioral frameworks, such as School Wide Positive Behavioral Interventions and Supports (SWPBIS: www.pbis.org), are built on a prevention oriented approach that is proactive rather than reactive. This framework includes a continuum of intervention support designed to teach skills and prevent problems (Universal, Tier 1), early identification of risk (Targeted, Tier 2), and more intensive interventions (Individual, Tier 3) supports (Sugai & Horner, 2009). Implementation of SWPBIS can help improve overall school climate and safety by explicitly teaching and reinforcing expectations and self-management skills, promoting positive relationships, and taking a strengths-based approach which are key components of a trauma-sensitive school and classroom (Bradshaw, C., Koth, C.W., Thornton, L.A., & Leaf, P.J., 2009).

Research indicates students who have experienced even one suspension are less likely to earn a high school diploma, less likely to earn a college degree, and more likely to have been arrested and been in prison than their non-suspended peers (Rosenbaum, 2018). As seen in zero tolerance policies, applying the same standards of punishment regardless of individual

characteristics often results in discriminatory practices with minority students and students with disabilities (Mayworm & Sharkey, 2014; U. S. Department of Education, 2016). Evidence shows discipline practices that remove students from instruction, such as office referrals or suspensions, do not help to improve either student behavior or school climate (Skiba, Shure, Middelberg & Baker, 2011). In reality, removal and suspensions isolate students and communicate the message "you do not belong" which in turn can cause additional trauma (Forbes, 2012). Neither out of class or out of school suspensions teaches appropriate behavior but rather teaches students what they are not supposed to do and that is it important not to get caught (Mayworm & Sharkey, 2014; Strawhun, Peterson, Fluke, & Cathcart, 2015).

There is a need for school discipline policies to balance accountability with an understanding of traumatic behavior. According to the U. S. Department of Education (2016), 3.5 million students are suspended in-school and 3.45 million suspended out-of-schools each year and even more alarmingly are the noted disproportionately suspended numbers of African American children. According to the Virginia Department of Education, a large portion of student suspensions were due to incidents of disrespect and classroom disruption (VDOE, 2016). Negative consequences of suspensions include a higher risk of academic failure, disengagement from school, failure to graduate on time or at all, student alienation, alcohol and drug use, and future antisocial behavior (Sheryl, Stephanie, Herrenkohl, Toumbourou, & Catalano, 2014).

The fact that a great majority of suspensions are attributed to disruptive behavior as opposed to more serious or violent offenses tells us it is past time to reconsider our approach to student discipline. Understanding the students we work with and how to meet their needs can provide more equitable learning environments and focus on solutions rather than punishments. Trauma-informed educational practices such as using a multi-tiered systems approach where

expectations and self-management skills are explicitly taught and positively reinforced can

provide much needed supports not only for students but for teachers as well.

Conclusion

The teaching profession is challenging both intellectually and emotionally particularly

with the increasing numbers of students who are impacted by trauma. It is important to develop

an awareness and understanding of the impact of trauma on the lives of children before we can

begin to implement effective strategies that can support learning in the classroom. It has also

become painfully clear that traditional methods of discipline that focus on consequences do not

develop the skills students need to be successful. Research supports the use of Positive

Behavioral Interventions and Supports in conjunction with trauma sensitive practices that

address the environment, relationships, and one's ability to regulate emotions (Chafouleas et al.,

2016; Dorado, Martinez, McArthur, & Leibovitz, 2016; Sugai & Horner, 2010). The essentials of

a trauma-informed approach include a focus on the four Rs; Realize, Recognize, Respond, and

Resist Re-traumatization. The ultimate goal of implementing trauma-sensitive practices is to

provide safe environments where students can feel supported, increase their ability to identify,

express, and manage emotions, decrease trauma-related symptoms that can impact behavior, and

increase their ability to develop healthy relationships which in turn can promote success in the

school as well as the community setting (Dorado et al., 2016; Hummer, Crosland, & Dollard,

2009). Safe, predictable, and consistent relationships can help to bring the brain back into

regulation allowing students to then be able to access higher level thinking and reasoning skills

(Perry, 2011). The Examples of Trauma-Sensitive Classroom Practices chart (Table 1) provides

a number of proactive strategies within these essential components that teacher educators can

highlight when helping preservice teachers develop the skills and strategies necessary to put

information into practice.

Table 1

Trauma-Sensitive Classroom Strategies

Environment	Relationships	Self-Regulation
Welcoming, positive signage, daily greeting	Greet students by name every day	Identify and validate emotions
Predictable routine, visual schedule posted each day	Use calm, respectful voice & demeanor (unconditional positive regard)	Teach students how to scale emotions (e.g., on a scale of 1-5 how strong, *Zones of Regulation*
Communicate clear, consistent expectations for ALL activities and settings	Inquire about students' interests & strengths	Teach / Model a variety of deep breathing techniques
Design of physical environment – organized, defined spaces, etc.	Increase opportunities for humor and fun	Yoga poses (e.g., *Yoga Pretzels, Yoga for the Classroom*)
Consider lighting, alternative seating, calming music, etc.…	Hold regular class meetings or proactive circles	Mindfulness (e.g., *Mind Up Curriculum, Mindfulness for Kids*)
Provide a safe space for calming (e.g.,"peace corner," "meditation room," passes to take a break, etc.)	Use *behavior specific* praise for academic skills and behavior (Identify skill. behavior; not just *good job*)	Sensory items available for use (stress ball, fidgets, etc.…)
Active supervision; be aware of students' body language, tone of voice, emotional state	Plan activities and move seating frequently to help peers develop connections	Coloring Mandalas, Zentangle, etc.

Prepare students for transitions, give advance notice, use common signal	Use cooperative learning strategies to increase engagement	Movement / brain breaks (e.g., *Go Noodle, Move to Learn, CosmicKids, Fuel Up to Play)*
Monitor seating arrangements	Provide opportunities for helpful participation (jobs, mentor, etc.)	Incorporate themes of emotion regulation into curriculum / literature
Communicate safety procedures & how you will handle situations	Address issues / concerns in private NOT public	Progressive Muscle Relaxation
Use positive recognition / reward systems and logical consequences NOT systems based on punitive consequences or take away	Assume positive intentions – Often students struggle because of lagging skills (*punishment will not create the skills they need*)	Establish a safe/quiet place for students who feel overwhelmed (e.g., peace corner, meditation space)
Increase engagement, provide student voice and choice in learning / projects	Collaborative problem-solving - Include the student when developing plan	Talk about, teach, and model stress management

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