The primary mission for schools is to support students in educational achievement. To reach this goal, we know that children must feel safe, supported, and ready to learn. As schools strive to accomplish this for all students—regardless of strengths, needs, and capacities—schools must recognize the influence of the students’ personal experiences on their learning and achievement. Children are exposed to violence and trauma at an alarming rate in the United States. By age sixteen, two-thirds of children in the United States have experienced a potentially traumatic event such as physical or sexual abuse, natural disaster or terrorism, sudden or violent loss of a loved one, refugee and war experiences, serious accident or life-threatening illness, or military family-related stress. Many children, with support, are able to heal and overcome such traumatic experiences. However, a recent report examining the impact of adverse childhood experiences (ACEs) on academic outcomes found that communities with higher ACE scores had higher rates of suspension and unexcused absences and lower rates of graduation from high school and progression to post-secondary school than communities with relatively low prevalence of ACEs. Not only are individual children affected by traumatic experiences, but other students, the adults on campus, and their communities can be impacted by interacting or working with a child who has experienced trauma. Thus, as schools maintain their critical focus on education and achievement, they must also acknowledge that mental health and wellness are integrally connected to students’ success in the classroom and to a thriving school environment. This framework illustrates why becoming “trauma-informed” should be an essential component of the overall mission of our education system.
What Does It Mean to Be “Trauma-Informed?”

The National Child Traumatic Stress Network (NCTSN) defines all trauma-informed child- and family-service systems as one in which all parties involved recognize and respond to the impact of traumatic stress on those who have contact with the system including children, caregivers, staff, and service providers. Programs and agencies within such a system infuse and sustain trauma awareness, knowledge, and skills into their organizational cultures, practices, and policies. They act in collaboration with all those who are involved with the child, using the best available science, to maximize physical and psychological safety, facilitate the recovery or adjustment of the child and family, and support their ability to thrive.

In order to create, support, and sustain these elements specifically in schools, a tiered approach is suggested to create an environment with clear expectations for everyone, open communication, and a collective commitment to a safe and nurturing school culture. The tiered approach describes how trauma-informed practices can be applied both universally as a preventative approach and to help those in need of more intensive support. The aim of a trauma-informed tiered approach is to create a school-wide environment that addresses the needs of all students, staff, administrators, and families who might be at risk for experiencing traumatic stress symptoms. There are many ways to weave trauma-informed approaches into the fabric of schools, including strategic planning by administrators, approving trauma-informed policies, staff training, direct intervention with traumatized students, and building knowledge and communication in a variety of domains, all with a focus on creating and supporting academic achievement, behavioral competence, and mental health of all students, families, and staff.

The Challenges

While healing from trauma and loss exposure is possible with the appropriate level of support, before these supports are present many students may experience a range of reactions including behavioral changes, emotional distress, grief, difficulties with attention, academic failure, nightmares, or illness. These reactions sometimes develop into psychiatric disorders, including posttraumatic stress disorder (PTSD), anxiety, and depression. It is critical to highlight that even when a traumatic event does not result in clinical symptoms/behaviors consistent with traumatic stress, it can have a serious impact on the developmental trajectory of a youth across all major domains of functioning (e.g., physical/health, cognitive/learning, behavioral, social/emotional).

Trauma and traumatic stress reactions such as the symptoms and behaviors described above can disrupt the school routine and the processes related to teaching and learning not only for the child who experienced the event, but also for his or her peers, classroom environment, teachers, as well as staff. The ability to read, write, solve math problems, and engage in discussion requires attention, organization, comprehension, memory, the ability to produce work, engage in learning, and trust. These activities also require students to have the capability to regulate their own attention, emotions, and behavior. Students traumatized by exposure to violence are at increased risk for displaying emotional dysregulation, disruptive behaviors, declines in attendance and grade point averages, and more negative remarks in their cumulative records than other students. They may have increased difficulties concentrating and learning and may engage in unusually reckless or aggressive behavior. It is important to note that recent research highlights the unique impact of grief and loss when youth are exposed to traumatic events. Grief and loss reactions can heighten traumatic stress reactions and worsen symptoms such as feeling disconnected from others, strong negative reactions to relationships, and general disengagement from school.
Repeated childhood exposure to traumatic events can affect the developing brain and nervous system, such that the brain is more easily triggered into survival mode even when there is no actual danger present. When areas of the brain associated with survival are triggered and highly activated, the thinking and learning areas of the brain are bypassed and largely “go offline.” Further, exposure to chronic trauma is associated with an increase in health-risk behaviors such as smoking, eating disorders, substance use, and high-risk sexual behaviors leading to teen pregnancy and sexually transmitted infections. In the classroom, behaviors resulting from exposure to trauma can lead to reduced instructional time, suspensions, and expulsions. Long-term results of exposure to violence include reduced graduation rates, along with increased incidences of teen pregnancy, joblessness, and poverty.

School environments that do not recognize when externalizing behaviors and emotional dysregulation of a student are a result of trauma and loss may respond in a punitive and potentially harmful way. Students who have been exposed to trauma are at increased risk of receiving out-of-school discipline. Historically, schools and districts have responded to a broad range of student behaviors by implementing zero tolerance policies, resulting in suspensions and expulsions for drug use and violence as well as minor infractions such as “willful defiance.” Although zero tolerance policies are aimed at improving safety on school campuses, unintended consequences can result such as greater school dropout and justice system involvement of those who are suspended or expelled from school. Out-of-school discipline also disproportionately affects African American students, who are four times more likely than their White peers to be suspended, a trend that begins in preschool. Schools may also inappropriately respond to defiant behavior by relying on a show of force by police. Collectively, these well-intentioned policies and practices can undermine feelings of safety for students impacted by trauma and inadvertently contribute to a school climate counter to many principles of a trauma-informed approach.

The Opportunities

Traumatic stress can arise from a variety of sources, both internal to the school environment and external, such as bullying, school shootings, dramatic weather events, community or domestic violence, grief due to loss of a loved one, and even the day-to-day exposure to events such as divorce, poverty, homelessness, abuse and/or neglect. Children and adults can be affected by traumatic stress. Having the tools and strategies to identify, address, and manage traumatic stress empowers all stakeholders involved with the school community, and supports their primary pursuit of educational achievement.

School personnel are uniquely situated to identify, respond to, and be impacted by students’ traumatic stress symptoms due to their central role in children’s lives and their continued assessment of children’s learning abilities and relationships with peers and school staff. The goals of schools that pertain to student learning, test scores, and successful outcomes are directly impacted by children’s traumatic experiences, so addressing students’ trauma and loss symptoms is essential for meeting those goals. School personnel have the ability to change the course of children’s lives while meeting their own systems’ goals through teaching children skills to regulate their emotions and behaviors, partnering with families to strengthen children’s relationships with adults in and outside of the school, and allowing them to develop their academic potential.

Trauma-informed schools build resilience by preparing schools to be responsive to the needs of their constituents with seamless, accessible social, behavioral, and emotional supports involving all school community members, as well as access to evidence-based, developmentally appropriate, child and family services. This requires the engagement of all administrators, educators, and staff, as they are each involved with the daily life of students who have experienced trauma and loss.

Strengthening systems is particularly important when working with diverse and vulnerable student populations including ethnically and culturally diverse youth, sexual minorities, developmentally-delayed students, and youth with linguistic diversity. Trauma-informed approaches are most effective when implemented during a student’s initial encounter with early learning systems (e.g., pre-school, head-start) and are sustained throughout their educational experience.
What Does a Trauma-Informed School Look Like?

More specifically, a trauma-informed school system (pre-school – 12th grade) is one in which all administrators, staff, students, families, and community members recognize and respond to the potentially negative behavioral, relational, and academic impact of traumatic stress on those within the school system including children, caregivers, teachers, other school staff, as well as on the system itself. Such a school system provides trauma awareness, knowledge, and skills as part of the fabric of the school culture, practices, and policies and acts in collaboration with those who are involved with the child, including students’ families, community agencies, leaders, and law enforcement, using the best available science to facilitate and support the recovery and resiliency of the school community. Specifically, a trauma-informed school promotes a safe and welcoming climate; seeks to create a structured and predictable learning environment that minimizes unnecessary trauma and loss reminders; focuses on building positive and attuned relationships between teachers and students, and among school staff; has anti-bullying and suicide prevention programs; and uses a balanced restorative justice (a.k.a. restorative practices) approach to conflict and conflict mediation with appropriate disciplinary action.

In essence, a school that is trauma-informed recognizes the relationship between and alignment of trauma-informed core areas with social, emotional, and behavioral learning practices, disciplinary response, classroom management, and student and professional supports. It acknowledges the impact that mental health can have across all major developmental domains (physical/health, cognitive/learning, behavioral, social/emotional) both inside and outside of the classroom, as well as how the scholastic experience can influence mental health. Given that the relationship between mental health and academic achievement is bidirectional and highly correlated, a trauma-informed school nurtures this relationship while maintaining its primary focus on educational outcome.

The Role and Goal of this Framework

The NCTSN System Framework for Trauma-Informed Schools provides strategic guidance in order to achieve the vision of a trauma-informed school described above. It is not a prescriptive roadmap for a one-size-fits-all approach. Instead, it includes core areas that will help to focus educational system improvements and organizational changes. These core areas can be applied to each of the three intervention tiers to create a trauma-informed environment within the school system while identifying those who are at risk or might need more intensive support to address their traumatic stress or loss symptoms.

System Framework

Although the framework attempts to break down the complexity of a school system and its environment into discrete components, no single core area should be viewed in isolation. Only in totality can the framework serve to help create, support, and sustain a trauma-informed school. The framework for trauma-informed schools that follows applies to Pre/K-12. It is rooted in the Multi-Tiered Systems of Support (MTSS) framework pyramid, which is a multi-tiered approach for the early identification and support of students with learning and emotional/behavior needs. The framework not only infuses all three tiers of the MTSS (see diagram below) with trauma-informed concepts and practices, but it also recognizes and addresses the broader contexts in which these tiers operate: school environment/culture, community, and family partnerships.
Within each of these tiers are strategies that are critical to creating a trauma-informed school. These include practices that influence the day-to-day interactions among educational staff, students and families, organizational policies and procedures, and community capacity-building strategies. All of these—inside the school and in the family and community contexts—are essential to support the overall culture, practice, and structures for a trauma-informed school. While it is noted that education and mental health perspectives for serving student social/emotional needs may differ, the following framework is intended to integrate these perspectives and highlight the core areas necessary to implement and sustain trauma-informed practices in a school.
CORE AREAS OF A TRAUMA-INFORMED SCHOOL

A trauma-informed school recognizes that trauma affects staff, students, families, communities, and systems. Thus organizational support, partnerships, and capacity-building are essential. The following represent 10 Core Areas for a trauma-informed school system and relevant tiered approaches within each area. Note: ▲1=Tier 1; ▲2=Tier 2; ▲3=Tier 3

I

Identifying and Assessing Traumatic Stress

The school recognizes and values identification of students that are vulnerable to traumatic events as an important prevention and intervention strategy with an intentional and transparent plan to use information to help a student attain educational goals. This requires implementing a tiered approach to identifying students for trauma-related mental health problems when indicated. Such factors include (but are not limited to) significant changes in key developmental domains (physical/health, cognitive, behavioral, social/ Emotional) as well as disruption in the student’s academic performance, attendance, or pattern of school engagement. A tiered approach includes a diversity of strategies beginning with parent and family engagement and sustaining engagement throughout the process.

▲1 Systematically Assessing School-Wide Trauma-Informed Practices. The school employs an organizational assessment that requires identification of trauma-informed policies, practices, and/or procedures to support students and staff.

▲1 Standard Protocols for Considering Trauma-Exposure. School personnel are prompted routinely to consider the presence and/or impact of trauma exposure on student academic and behavioral performance. This includes observing signs, symptoms, and risk factors related to a potential traumatic event, and addressing barriers to support youth facing these challenges. Staff use trauma-related and/or routinely collected data to inform decisions about students in a systematic manner (e.g., attendance, grades, nursing visits, behavioral incidents). Staff meetings, student performance reviews, and other standard protocols for regularly assessing student performance while integrating trauma-informed considerations.

▲2 Trauma Screening for Behavioral Referrals. The school includes as a primary response to behavioral referrals a screening for traumatic experiences and traumatic/loss stress reactions using evidence-based screening tools. When traumatic exposure or traumatic/loss stress reactions are identified, a more comprehensive assessment is conducted to direct future interventions.

▲3 Ongoing Monitoring of Traumatic Stress Responses. The school makes available ongoing assessment that is aligned with ongoing intervention of traumatic stress reactions for students experiencing ongoing academic, behavioral, and mental health challenges.

II

Addressing and Treating Traumatic Stress

Adequate supports are available for all school stakeholders who have directly or indirectly experienced traumatic events or are at risk for exposure. Stakeholders include students, families, teachers, administration, and additional school personnel. Referral and access to evidence-based prevention and intervention resources are available and adapted to the needs of service recipients. Provision of services are systematically linked to protocols for identifying individuals exposed to trauma and loss. Routine reviews of service referral and provision are conducted to ensure effectiveness.

▲1 De-stigmatized Self-Referral Options. Students and school personnel are made aware of support services available. Schools provide options for self-referral that reduce stigma about mental health. Individuals are encouraged to connect with services when necessary. Service options are made available in the community to support privacy preferences.
2 Early Interventions. Based on screening results, the school provides trauma-informed, evidence-based, resiliency-building early interventions. Interventions for schools may include cognitive-behavioral or mindfulness strategies, treatments for youth identified at risk for traumatic stress grief, or depression; or referrals to trauma-informed services that address behaviors such as substance abuse. Schools also provide opportunities for educators to employ in-class supports that address behavior in a trauma-informed manner.

2 3 Trauma-Informed Behavior Support Plans. The school’s behavioral support planning team incorporates an understanding of trauma, trauma and loss reminders, trauma’s impact on key developmental domains, and evidence-based practices for supporting children experiencing traumatic stress into its behavior support planning process.

2 3 Trauma-Informed Special Education Services. School-based Individualized Education Plan (IEP) team members incorporate an understanding of trauma, trauma and loss reminders, trauma’s impact on key developmental domains, and evidence-based practices for supporting children experiencing traumatic stress into its IEP planning process.

3 Referring for Services. Educators and school staff refer students to evidence-based trauma-informed treatments as needed when the school is unable to meet their trauma-based mental health needs. The school develops strong relationships with community providers of trauma-informed care.

Trauma Education and Awareness
Professional development for educators, administrators, and allied professionals and partners is routinely offered with the goal that the entire community will share the understanding of trauma’s impact on learning and will build student coping and protective skills. This will be done by using a whole-school inquiry-based approach to creating trauma-sensitive schools. Schools and districts work to create local policies that support trauma-informed practices and have adequate staffing to perform screenings, provide services, and create an effective infrastructure to achieve the administrative functions necessary for effective implementation of trauma-informed policies, practices, and procedures.

1 School Mission and Vision. The schools’ academic mission recognizes (formally and in practice) that addressing trauma and behaviors associated with exposure to trauma and loss is key to improving academic outcomes.

1 Professional Development. Trauma literacy is a key component of professional development for school administrators, teachers, and staff. Building on a strong foundation of therapeutic and crisis management practice in schools, trauma literacy helps staff recognize the continuum of trauma in children and its impact on academic achievement and development. Leadership and staff share an understanding of trauma’s stress on the brain and body, student learning, their behavior, and the need for a school-wide approach to develop skills for coping with such stress.

1 Psychoeducation for Students on the Effects of Stress and Trauma. The school provides health and psychoeducation to students about the effects of stress and trauma on the body; how to develop healthy coping skills for managing stress; promotes associations and activities that nurture healthy peer and family relationships and connections to community organizations; and incorporates practices to increase students’ resilience and protective factors. For youth who have recently experienced a loss, the school provides grief-specific psychoeducation and supports. Psychoeducation empowers youth to seek services when necessary.

2 Developmentally Appropriate Trauma-Informed Responses. The school recognizes that trauma can impact development. A child’s developmental level should be considered when addressing their educational needs, including classroom structure and individualized supports. For younger students, the recognition that the adults in these children’s lives may have to provide additional support to help them thrive. It also recognizes that certain students may have developmental delays or intellectual disabilities that require specialized trauma-responses.
Partnerships with Students and Families

Trauma and loss involve experiences of powerlessness and isolation that can make students and families less likely to trust school institutions and authority figures or to fully participate in programs created to support their trauma recovery. It is therefore essential to empower students and family members as partners in the creation of a trauma-informed school as well as in the planning of trauma-informed practices. While limits exist for who the school can engage within the student’s family directly, a trauma-informed lens recognizes the impact of caregiver, sibling, and other important family member’s life experiences in an effort to enhance a school’s ability to address adverse life experiences for the student and find practical opportunities to maximally address challenges facing students. Specifically, this supports student engagement academically and addresses potential trauma-related factors that are impacting students at home. Particular efforts should be made to build meaningful partnerships among students, families, caregivers, and school staff in order to better support students who have experienced trauma and loss; and to create, implement, and sustain trauma-informed programs and practices. Students and families are actively engaged in student-specific assessment of strengths and needs and the development of individualized education and treatment plans. Students and families are also actively engaged in school-wide planning and implementation efforts to address trauma, including the development of school-wide policy, protocol, and guidelines to create a trauma-informed school climate and to implement trauma-informed practices. Schools should embrace practices that incorporate peer and parent support and guidance.

▲ 1 Education for Parents/Caregivers. The school, together with community partners, teach parents about the effects of stress and trauma on children’s brains and bodies, and instructs them in how to develop skills for coping with stress to bolster student’s learning-readiness and a sense of psychological safety (feeling and believing one is safe).

▲ 1 Education for Students. The school provides education to students about the effects of stress on their brains and bodies, as well as stress management strategies such as slow breathing, mindfulness, effective problem-solving, and asking for help.

▲ 1 Engagement in Program Planning and Implementation. The school engages students and families/caregivers in the process of creating trauma-informed schools at all levels. School staff and administrators collaborate with students and families to develop practices that will best address their needs and implement those practices in ways that make them most useful, effective, and accessible. On an organizational level, schools partner with students, families, and caregivers when making decisions regarding the development and implementation of programs.

▲ 2 Families are an important Source for Identifying Students In Need of More Support. Parents and caregivers want their children to succeed in school and often need assistance themselves in learning ways to help their child. Therefore, they are a primary source for identifying students in need of more individualized planning and support.

▲ 3 Engaging Families in Treatment. The treatment process must engage both youth and families as actively as possible. Providers should partner with families to address safety issues and concerns, define their needs and hopes for treatment, explore their role in their child’s treatment, and regularly provide input about how their child is doing. A general understanding about issues parents may face such as managing personal stresses, difficulties sleeping, or interpersonal challenges should inform interventions. Families should have an easy and accessible mechanism for providing frequent feedback to the school and to the treatment provider.

Creating a Trauma-Informed Learning Environment (Social/Emotional Skills and Wellness)

The school creates a safe environment by promoting healthy interactions among students and staff and teaching social/emotional skills and self-regulation skills. In a trauma-informed approach, the school promotes the wellness of all students, ensuring they feel safe and supported physically, socially, emotionally, and academically. School personnel model healthy social/emotional skills and integrate trauma-informed practices with other
school-wide behavioral programming. Protocols to address bullying, identify threats, harassment, bigotry, inequity, and other behaviors that compromise the safety of the learning environment are clearly outlined and employ a trauma-informed perspective.

▲ 1 Promoting a Safe School Climate & Education about Trauma. By promoting healthy activities and utilizing protective factors that include connections to community organizations and practices to increase students’ resilience and coping skills, schools create an environment that leads to healthier student interactions with others and a school that feels physically and psychologically safer for all its members.

▲ 1 Predictable and Supportive Learning Environments. The school uses an understanding of trauma to deepen and augment school-wide practices to create a predictable and supportive learning environment that minimizes unnecessary trauma and loss reminders.

▲ 1 Developing Sense of School Community. The school explicitly connects students and teachers to each other, to the schools’ programs, and to the rest of the school community—including the promotion of teacher peer consultation and support models.

▲ 1 ▲ 2 Teaching Social Skills. The school provides training for staff and curriculum implementation for students on creating, sustaining, and promoting a positive and safe learning environment. Content includes conflict resolution, problem-solving skills, social communication, emotional/behavioral literacy, bullying prevention, and suicide prevention. The school recognizes that unhealthy social conflict between peers can have serious developmental consequences and negatively impact the mental health of all youth involved. Consequently, the school proactively addresses bullying/cyberbullying by educating staff, students, and families in bullying awareness, relevant social skills (empathy, friendship, assertiveness) and effective response and repair strategies. Providing targeted supports for youth at risk of displaying behaviors that adversely impact the psychological and physical safety of others is an important supplement to universal supports.

▲ 3 Safe Spaces for Students. The school develops and designates safe spaces inside and outside of the classroom for students to calm themselves after exposure to trauma and loss triggers. Safe spaces provide opportunities for students to self-regulate when experiencing behavioral and emotional challenges.

VI

Cultural Responsiveness

The school recognizes that there are cultural differences in experiences, interpretations, and responses to trauma. For students seeking help after a trauma, the school ensures that responses of school staff are culturally appropriate. The school also works to actively counteract the effects of historical trauma, societal oppression including implicit and explicit bias, and institutional oppression including eliminating disproportionality in punitive and exclusionary (out-of-school) discipline practices.

▲ 1 Cultural-Responsive Approaches Integrated School-Wide. Professional development and supervision of school personnel are infused with strategies for understanding cultural perspectives and traditions of students and their families, as well as strategies for actively counteracting the effects of implicit and explicit bias on an institutional level and in individual interactions. Connecting with community partners who can enhance cultural responsiveness and support cultural brokering (partnering with a community member to champion trauma-informed practices) is a priority.

▲ 2 Address Systemic Practices Countering Cultural-Responsiveness. The school reviews policies and procedures to identify and address standard practices that may adversely and disproportionately impact specific groups of students and exacerbate traumatic stress or loss reactions. The school also pays particular attention to cultural practices of families, such as disciplinary practices, in a manner that protects the student while respecting and understanding the cultural frame of the family.

▲ 3 Adapting Interventions Using Cultural-Responsive Strategies. Evidence-based practices are adapted to the students and their families in an attempt to reduce stigma and increase effectiveness of service utilization. Cul-
tural brokers (members of the student’s community tasked with translating cultural practices for school) engage with the school to act as a bridge between school and community, especially when a family is reluctant to engage in health and trauma-informed services. Interventions recognize and address the impact of traumatic stress that can result from societal oppressions such as racism, xenophobia, homophobia, and sexism.

### Emergency Management/Crisis Response

The school has clear and well-communicated procedures to address emergencies before, during, and after an event. Trainings and drills that involve students and school staff must be delivered in a trauma-informed manner, which includes special attention to those who have been previously traumatized and adapting protocols to reduce the impact of these exercises. The school develops a comprehensive protocol for all hazards and trains staff, students, and partners in those procedures.

▲ **1 Comprehensive Emergency Operations Plan.** Schools consider all threats and hazards, provides for the access and functional needs of the whole school community, considers all settings and all times, and creates a collaborative process for regularly revising this plan. Schools Emergency Operations plans should be developed and maintained by various representatives from administration, staff, parents, and community representatives (e.g., law enforcement, fire officials, mental health practitioners).

▲ **1 Staff and Partners Informed of Emergency Procedures.** Staff and partners should be well informed about the Emergency Operations Plan, including the protocol for communications with individuals inside the school and their parents/caregivers. The whole community should regularly practice the plan using different drills and exercises. Staff should also be trained in appropriate early interventions for when an emergency takes place, such as Psychological First Aid.

▲ **2 Threat-Assessment.** The school should create and maintain a comprehensive threat assessment protocol which includes a multidisciplinary school threat assessment team for early identification and intervention of potential targeted acts of violence.

▲ **3 Recovery Services.** In the aftermath of a crisis, a team of trained professionals, which may include school staff, provides evidence-based and trauma-informed screenings and intervention following the crisis to ensure adequate support for individuals impacted by the crisis. To facilitate recovery, when necessary, the school provides both short-term supports to stabilize students affected by an immediate crisis and long-term supports in the aftermath to facilitate recovery and adjustment.

### Staff Self-Care and Secondary Traumatic Stress

The school trains staff in social/emotional skills that promote the physical, social, emotional, and academic wellness of all teachers and staff, and support school climate of physical and psychological safety. Additionally, schools identify sources of secondary traumatic stress (STS) for teachers and staff and intervene to mitigate and/or manage stress.

▲ **1 Work Responsibilities Consider Self-Care Practices.** School administration and key decision-makers consider the impact of school staff assignments, general workload, and exposure to students displaying traumatic stress reactions on staff mental health. Plans for addressing barriers to a supportive professional environment and incorporating feedback from school staff should be implemented. Wellness practices are encouraged and offered regularly to reduce staff stress.

▲ **1 Prevention and Awareness of Secondary Traumatic Stress (STS) in Educators.** Schools provide training for staff to understand the signs of secondary traumatic stress and the ways to prevent STS and burnout. A support structure that promotes help seeking should be available to support the self-care of its staff, teachers, and administrators. Offerings of wellness activities and promoting routine health care is another critical component to supporting staff well-being.
2 In-School Supports for Educators. Peer supports and stress-management are provided for educators displaying signs of burnout and/or STS. Schools integrate protocols for checking in with educators (in a non-punitive manner) to assess their level of need.

3 Support Services and Employee Assistance Programs Availability. School staff have access to resources after experiencing potentially traumatic life events or exposure to substantial levels of stress in their professional or personal lives. Access and utilization of these resources are provided in non-stigmatizing ways. Ensure that Employee Assistance Programs (EAPs) and insurance companies offer trauma and loss-specific evidence-based practices.

School Discipline Policies and Practices
The school includes a trauma-informed lens in the review and revision of discipline policies and practices. The impact of traumatic life experiences on students’ behavior and home life is considered when administering discipline. Disciplinary actions should be aimed to address the safety of those in the school environment and to utilize available resources to help students learn skills that support reintegrating into the school.

1 Standard Discipline Procedures Are Trauma-Informed and Equitable. Schools refrain from using zero tolerance policies and out-of-school discipline procedures as a primary disciplinary tool. Schools also refrain from unnecessarily calling on school resource officers (SRO) for punitive responses to student behaviors and integrates SROs into non-punitive school activities to increase trust. Schools should consider whether traumatic event exposure plays a role in student behavior and communicate behavioral expectations and disciplinary actions in a clear and consistent manner. Disciplinary procedures are implemented in an equitable way that eliminates disproportionality in disciplinary practices.

2 Disciplinary Actions Accompanied by Trauma-Informed Interventions. Students requiring frequent disciplinary actions are assigned appropriate support services to address underlying causes of the behavior. The school coordinates support services with the student’s family and gives appropriate referrals as available when required.

3 Restorative Practices Embedded in Disciplinary Protocols. Best practices for engaging students in repairing situations and relationships harmed by their behavior are integrated into disciplinary procedures (i.e., restorative justice practices).

Cross System Collaboration and Community Partnerships
Trauma-informed approaches span all aspects of the school environment, including classrooms, health services, administration, school discipline and attendance, guidance, and extra-curricular programming. Staff collaborate to ensure continuity of trauma-informed practices across student services. The school routinely collaborates with family and community partners for trauma-informed approaches. Schools outreach to community partners, including community mental health organizations, community diversity and human rights organizations, youth-focused groups, law enforcement, child welfare, advocacy groups, military family organizations, and others to (1) increase their knowledge of the impact of trauma exposure on children and youth, (2) share strategies for supporting students impacted by traumatic stress, (3) increase their knowledge of secondary traumatic stress and the personal and professional impact of working with trauma-impacted children, youth, and families, and (4) share strategies for promoting health and wellness in educators and school staff. School leaders participating in community advisory boards or taskforces ensure that schools contribute to collective efforts toward building a trauma-informed community.

1 Developing and Sustaining Trauma-Informed Policies and Practices. Laws, policies, and funding streams are cultivated and maintained to support schools in the development of an action plan to create whole-school trauma-informed approaches that are organized according to core school operations. The ultimate goal is to pro-
vide clear and consistent messages among partners—including all levels of school governance, federal agencies, state and local government—articulating a clear, strong, coordinated message that trauma-sensitive schools are a priority. Schools and districts build and maintain organizational infrastructure, including the support of local “champions,” to sustain trauma-informed practices. These practices include ongoing assessment of the effectiveness of trauma-informed policies, practices, and procedures.

▲ 1 Resource Mapping and Service Access. Schools, community agencies, and state and local governments collaborate to ensure support services are an integral part of trauma-sensitive whole-school environments and that they connect students to their school communities. Further, schools and partners should routinely generate a catalogue of services available at the school and in the community. These services should be based on screening and assessment outcomes and delivered to students with fidelity to evidence-based principles.

▲ 2 Multidisciplinary Team-Based Approaches. The school uses team-based approaches for problem-solving, decision-making, and action planning to support students receiving Tier 2 level intervention efforts. Teams facilitate student eligibility and placement into Tier 2 group interventions, monitor progress and effectiveness of interventions, and collectively collaborate to make adjustments to the student’s intervention plan.

▲ 3 Consultation and Partnership with School Staff and Community Members. Intensive trauma-informed school-based individual and family interventions should include consultation with school staff and wrap-around services. Partnerships in the community that can maintain youth safety and where youth may utilize services should be established in child welfare and residential settings, justice settings, or law enforcement settings.
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9 Substance Abuse and Mental Health Services Administration (2014). SAMHSA’S Concept of Trauma and Guidance for a Trauma-Informed Approach. SAMHSA’s Trauma and Justice Strategic Initiative.


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