



# FAQ: TRAUMA-SENSITIVE SCHOOLS

## 1 *What is childhood trauma?*

Childhood trauma, also called adverse childhood experiences (ACEs), is a childhood event can have negative, lasting effects on health and well-being. Trauma causes stress, which is defined as anything that produces a disruption in the physiologic or emotional balance of a person.

Traumatic events can include (but are not limited to):

- Physical, sexual, and emotional abuse
- Physical and emotional neglect
- Divorce
- Domestic violence
- Parental incarceration
- Parental death
- Parental substance abuse
- Witnessing violence
- Food insecurity
- Racism and bullying
- Mental illness in family
- Chronic poverty
- Homelessness



Toxic stress is the prolonged activation of stress response systems in the absence of protective relationships.

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## 2

## How common is childhood trauma?

Childhood trauma is more common than you think.

Data suggest that every classroom has at least one student affected by trauma.

A national study of 5,117 Latinos ages 18-74 found 77.8% experienced at least one ACE in childhood (in contrast to the 46% of youth in general who are currently exposed to ACEs). The same study found that 28.7% of Latinos experienced four ACEs or more. Learn more in a [Salud America! Research Review](#).

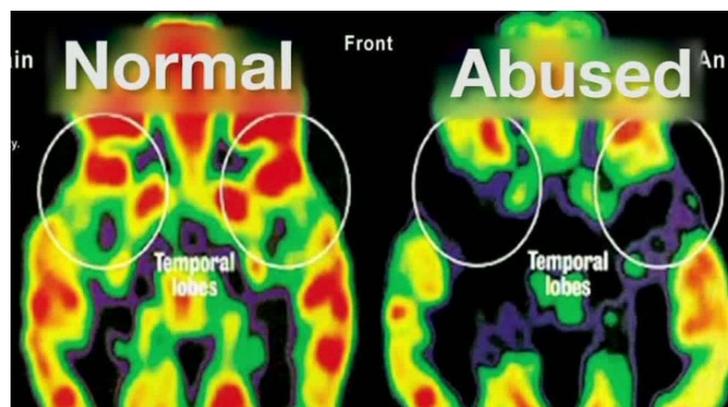
## 3

## Why should you — a teacher, administrator, or other school personnel — care about childhood trauma?

Kids who experience childhood trauma can be impacted in ways that manifest in your schools.

**When responding to toxic stress, the child’s normal developmental process is interrupted.** The body responds to stress in a “fight, flight or freeze” mode. Repeated or chronic activation of stress hormones, bypass the thinking part of the brain and activate the survival part of the brain. The thinking part of the brain goes “offline” and the emotional part of the brain remains “activated.”

**Trauma and toxic stress can cause permanent changes to a child’s brain and body.** The primary function of the triggered stress response system is to help the child achieve safety in the face of perceived danger. Repeated triggering of the stress response system delays brain maturation and impairs complex thought and learning. A child’s reaction to stress will depend on their internal regulation and the response of the adult to the stress. These reactions can look like behavioral problems.



**Children facing trauma at home face higher referrals for behavioral problems, special education and diagnosis for ADHD, as well as higher rates of suspension, expulsion and being held back.** Trauma and toxic stress impair

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complex thought and learning, resulting in lower grades. Children with trauma are 2.5 times more likely to have repeated a grade in school. Chronic absenteeism also is a result.

**Children with histories of traumatic experiences are twice as likely to have chronic health conditions.** Children and adolescents who have been traumatized have higher rates of smoking, substance abuse, teen pregnancy, dropping out of high school, suicide, suicide attempts, and involvement in the juvenile and criminal justice system. As they age they have more failed relationships are involved in domestic violence. As children age, they are at higher risk for anxiety, depression, cardiovascular disease, diabetes, cancer, stroke, asthma, lupus, multiple sclerosis, osteoporosis, viral infections, and autoimmune diseases.

## 4 *What are the signs of childhood trauma?*

The signs of traumatic stress may be different in each child.

- In **“fight” mode**, children may display hyperactivity, verbal aggressions, oppositional behavior, limit testing, or physical aggression.
- In **“flight” mode**, children may display withdrawal, escaping, running away, self-isolation, or avoidance.
- In **“freeze” mode**, children may display stilling, watchfulness, looking dazed, daydreaming, forgetfulness, or shutting down emotionally.



Young children may react differently to trauma than older children. The intensity of a child’s response may not match the intensity of the stressor or trigger. Children who experience trauma may have more headaches and stomachaches and overreact to minor bumps and bruises.

Difficulty identifying feelings, communicating needs, controlling impulses, and staying focused are common among children who have experienced trauma.

Trauma affects learning and school performance, and causes physical and emotional anguish. As these children age, they have lower self-worth and self-efficacy and feel more fear and pessimism about the future. Triggers can re-occur for years or the entire lifetime.

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Without supportive, protective relationships, children are less able to cope with and overcome trauma. The impact of childhood trauma and toxic stress can last well beyond childhood.

## 5 *What can you do, as an individual person at school?*

Fortunately, children are resilient.

**Build resiliency in children.** Every adult in a child's life can play a part in building their resiliency. Consistency and predictability increases the child's sense of safety.

**Recognize trauma-related behaviors in children.** This recognition is important so your reaction to the child's behavior does not further traumatize the child. Children who learn resiliency skills mitigate negative effects, often enabling them to engage better in school.

**Get trained in "trauma-informed care."** Trauma-informed care is a change of the adult mindset from saying, "What's wrong with you?" to start asking, "What happened to you?" Parents, foster parents, grandparents, teachers, coaches, bus drivers, school administrators, school leaders, day care providers, pastors, and law enforcement, can receive training in trauma-informed care. You can raise public awareness and share research and resources about trauma-informed care with your friends, family, colleagues and professional and social networks. You can promote and support coordinated efforts to develop and train a trauma-informed workforce at national, state and local levels.



## 6 *What can you do, as a school, school system, or school district?*

Become a trauma-sensitive school district!

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Schools play a particularly important role in meeting social and emotional needs of students. Trauma-sensitive schools help children feel safe to learn.

**Create a system to track, monitor, and help traumatized students across your district.**

Using existing school software programs, you can create a system to identify students facing trauma or toxic stress, monitor/track them over time, and proactively connect them to community services and resources. This is the kind of system developed by John Hernandez, director of student services at East Central ISD. Read about this activity here:

<https://salud-america.org/ex-coach-creates-trauma-informed-program-reduce-absenteeism-san-antonio/>. John did these things:

- Created a tracking system for traumatized students in ECISD’s school management software
- Established a chain-of-command to alert designated staff when concerned about a student
- Created a resource guide of relevant services for traumatized kids and families
- Promoted the system across all district departments and campuses



**Provide ongoing professional development for key school personnel.**

For example, for John Hernandez at EC ISD, the task force he put together for a trauma-sensitive school connected more than a dozen of its members to 16 hours of certified training online about working with wounded students and trauma-informed practices through the National Wounded Student Certificate Program. A dozen other employees have attended national conferences and educational seminars to receive continued education units.

**Other activities possible are:**

- Adopt alternative discipline policies (to include campus police)
- Integrate social-emotional learning into curriculum
- Improve access to mental and behavioral health services
- Limit suspensions and expulsions of students

Learn more about trauma-informed schools

- [Unlocking the Door Learning: Trauma-Informed Classrooms / Transformational Schools](#)
- [Spokane’s Transformation](#)

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- [Schools with Informed Care](#)
- [Leading a Trauma-Sensitive School](#)

Learn more about childhood trauma

- Report: [The Role of Healthy Relational Interactions in Buffering the Impact of Childhood Trauma](#)
- Film: [Paper Tiger's](#)
- Film: [Resilience](#)
- Video: TED Talk by Nadine Burke Harris, [How Childhood Trauma Affects Health Across a Lifetime](#)
- Video: TED Talk by Rita Pierson, [Every Kid Needs a Champion](#)
- Video: [Oprah Winfrey and Dr. Bruce Perry reports on 60 Minutes](#)
- Video: [San Diego Principal Takes on Trauma](#)
- Video: [Childhood Trauma: What Every Teacher Needs to Know](#)
- Videos: [The Child Trauma Academy Channel](#)
- PowerPoint: [Creating Trauma Sensitive Schools](#) and Speaker Notes
- Toolkit: [Child Trauma Toolkit for Educators](#) (National Child Traumatic Stress Network [NCTSN])
- [7 Webinars](#) on how schools can address trauma (NCTSN)
- [The Role of Schools in Supporting Traumatized Students](#) (National Association of Secondary School Principals)
- Positive Behavioral Interventions & Supports (PBIS) [Slides, handouts, and other materials](#) from local, state, and national conferences and training events.

## 7 *Other questions?*

Be sure to contact Amanda Merck, who is available to answer any questions or help with any research on childhood trauma, as well as connections to training on childhood trauma.

Amanda can be reached at 210-562-6525 or [merck@uthscsa.edu](mailto:merck@uthscsa.edu).

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