



TALKING POINTS ABOUT CHILDHOOD TRAUMA

✓ Childhood Trauma Is a Critical Issue

- Nationwide, almost half of children have experienced at least one or more types of serious childhood trauma, such as divorce, poverty, homelessness, neglect, abuse, etc.
- These childhood traumas negatively impacting attendance, academic achievement, relationships, risky behavior, professional success, and mental and physical health.
- Childhood trauma changes a child’s brain, body and behavior. It has ripple effects on the state’s public health, education, and juvenile and criminal justice systems.
- Behavior is often the first “red flag” of childhood trauma. Yet, teachers and other school staff often misinterpret that red flag as “bad behavior” that needs “fixing.”
- Teachers and school staff are rarely trained on the science of childhood trauma and how it affects children’s brains, bodies, and futures or how to deal with traumatized kids.
- It is toxic for children to grow up with trauma, constantly flooded by stress hormones in a state of fight, flight or freeze.
- The very same sensitivity that allows infants to learn language makes them highly vulnerable to chaos, threat, inconsistency, unpredictability, violence and neglect.



- These kids are “beyond at-risk,” they are “wounded.” A wounded student has deep scars of emotional, physical, and mental pain that deeply affects them. Yet this affect often goes ignored or neglected with the belief the pain will be outgrown or forgotten as they age.



Schools Play an Important Role

- It is important for teachers and all school staff to be able to recognize the signs of traumatic stress and understand the short- and long-term impacts
- This is known as a trauma-sensitive approach.



Schools Are Becoming a Part of the Solution

- Schools are responding by becoming trauma-sensitive.
- This means implementing trauma-informed programs and systems to help children heal and to decrease chronic absenteeism; increase academic, social and emotional learning; and improve physical and mental health.
- The good news for teachers and schools is that we don’t have to be a psychiatrist or an expert in behavioral health to make a difference in a traumatized child’s life.
- Reliable, safe, and engaging relationships can buffer the effects of trauma and toxic stress and help children heal.
- The idea of trauma-informed care is to shift the outlook from “What’s wrong with you?” to “What happened to you?” This shift in outlook can help adults provide the stable buffer that children need to heal.
- Teachers and all school staff should be trained on the short- and long-term impacts of childhood trauma and trained to recognize the signs and symptoms in students.



1 School (East Central ISD in San Antonio) Is a Model for What Our Schools Could Do in Trauma Sensitivity

- Fortunately, we have an example to follow.
- East Central ISD in San Antonio is taking a “what happened to you?” approach with its new Trauma-Informed Care System thanks to its Student Services Director, John Hernandez.

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- John figured out that childhood trauma was a big reason for high absenteeism at EC ISD.
- So he asked his superintendent and got permission to start a task force.
- The task force:
 - Created a resource guide of relevant services for traumatized kids and families
 - Created a tracking system for traumatized students in their school management software
 - Established a chain-of-command to alert designated staff when concerned about a student
 - Attended multiple district-wide in-service days to train staff about the science behind childhood trauma, the associated behaviors and the new chain-of-command
 - They continue to arrange for staff to attend trauma-informed trainings and conferences to receive certified education credits.



What Our Schools Should Do

- Let's start a task force
- Comprised of: representative from many/each campus, social worker, district staff, transportation, athletics, nutrition, grants coordinator, community member
- Let's start holding regular meetings
- Let's create a vision for "trauma-sensitive" care at our district
- We can utilize the free *Salud America!*/UT Health San Antonio Action Pack with technical assistance to help guide us on the path to becoming "trauma-sensitive."



A Story to Tell

- If a kid is cussing you out or just got into a fight with another student, suspend judgment and ask what happened to them. Kids don't wake up that morning wanting to cuss you out or hurt another kid. Somebody has got to get in the ditch with that kid because they may be the only safe, stable adult in the kids life. Be

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the stable adult, continue communicating high expectations, and deal with the inappropriate language or fighting later.



Deal with Pushback

- Boot strap mentality.
- Many claim to have had a rough childhood and made it through “just fine”. These people often say they pulled themselves up by their boot straps.
- The thing is, they are failing to recognize that they had a stable person or stable people to help pull up their boots. In the face of this pushback, consider if they are really “doing just fine”. Without judgement, you will often see that many people who say this are at increased risk for cardiovascular disease, diabetes, substance abuse, depression, anxiety, low academic achievement, poverty, divorce, domestic abuse, and many of the other lifelong consequences of childhood trauma.
- “Boot strap” people are likely not the yardstick by which a public health professional would measure “doing just fine” in terms of health and wellbeing.

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