

# Best Practices and Helpful Considerations for Responding to Traumatic Stress in Schools for School Staff

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8/11/21



Mountain Plains (HHS Region 8)

**MHTTC**

Mental Health Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

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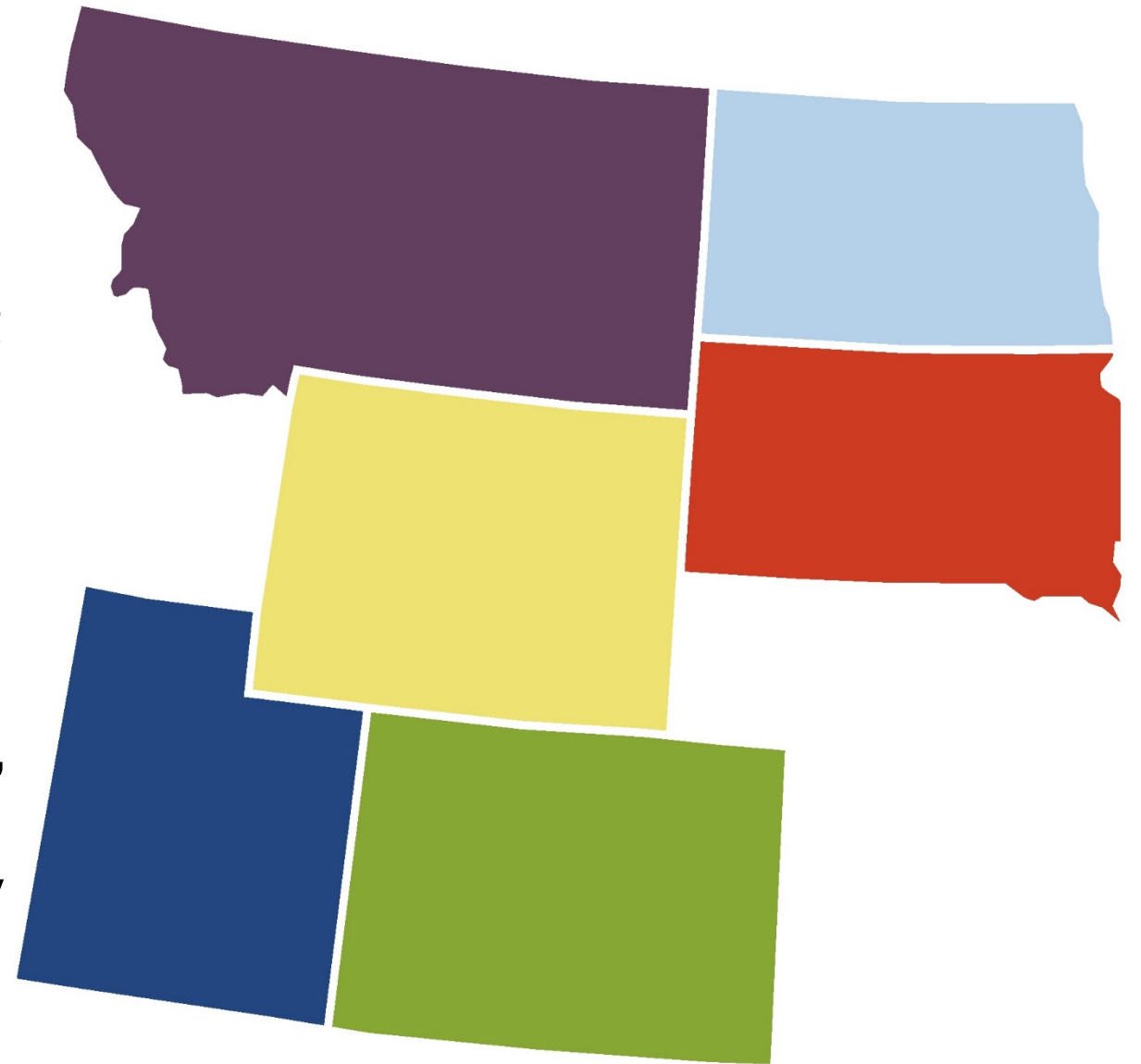
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The work of the Mountain Plains MHTTC is supported by grant H79SM081792 from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

# The Mountain Plains Mental Health Technology Transfer Center

The Mountain Plains Mental Health Technology Transfer Center (Mountain Plains MHTTC) provides training and technical assistance to individuals who serve persons with mental health concerns throughout Region 8 (Colorado, Montana, North Dakota, South Dakota, Utah and Wyoming).

We belong to the Technology Transfer Center (TTC) Network, a national network of training and technical assistance centers serving the needs of mental health, substance use and prevention providers. The work of the TTC Network is under a cooperative agreement by the Substance Abuse and Mental Health Service Administration (SAMHSA).



The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED  
AND HOPEFUL

INCLUSIVE AND  
ACCEPTING OF  
DIVERSE CULTURES,  
GENDERS,  
PERSPECTIVES,  
AND EXPERIENCES

HEALING-CENTERED AND  
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS  
PARTICIPATING IN THEIR  
OWN JOURNEYS

PERSON-FIRST AND  
FREE OF LABELS

NON-JUDGMENTAL AND  
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR  
AND UNDERSTANDABLE

CONSISTENT WITH  
OUR ACTIONS,  
POLICIES, AND PRODUCTS

# Trauma and Child Brain Development

- Toxic stress- cortisol interrupts brain's growth.<sup>7</sup>
- Results in difficulty with memory, selective attention, self-control, & ability to turn off stress response so they appear in state of high alert which impacts learning and socializing.<sup>9</sup>
- Motor hyperactivity, anxiety, impulse control, sleep problems, tachycardia and hypertension.<sup>8</sup>

# Stress Response Results in...

- Fight - Dysregulation & aggressive attempts to manage stressors; argumentative, defiance.<sup>8</sup>
- Flight – Withdrawn, shut down, fleeing; fidgety, physical moving away from stress source.<sup>8</sup>
- Freeze- Disconnects/dissociates; refusal to make eye contact/speak; refusals; shuts down; holds breath.<sup>8</sup>
- ‘Tend and befriend’-Clingy, nurturing behaviors, connection seeking.<sup>8</sup>

## Preschool Children<sup>8</sup>

- Feels helpless and uncertain
- Fear of separation from caregiver
- Cries or screams a lot
- Eats poorly and loses weight
- Regressions (return to bedwetting, using baby talk)
- Develops new fears
- Has nightmares
- Recreates trauma through play
- Not developing to the next growth stage
- Has changes in behaviors
- Asks questions about death

## Elementary School Children<sup>8</sup>

- Becomes anxious and fearful
- Worries about own/others safety
- Becomes clingy with teacher or parent
- Feels guilt or shame
- Tells others about traumatic event repeatedly
- Becomes upset if they get small bumps or bruises
- Has difficulty concentrating
- Experiences numbness
- Has fears that event will happen again
- Has difficulty sleeping
- Has changes in school performance
- Is easily startled

## Middle and High School Youth<sup>8</sup>

- Feels depressed and alone
- Discusses traumatic events in detail
- Develops eating disorders and self-harming behaviors
- Starts substance use/abuse
- Becomes sexually active
- Feels like they're going crazy
- Feels different from others
- Engages in risk-taking behaviors
- Has sleep disturbances
- Doesn't want to go to places reminding them of the event
- Says they have no feeling about event
- Shows changes in behavior

# Significance During COVID

- 20% ***typically*** anticipated to demonstrate a social-emotional or behavioral (SEB) concern during school years.<sup>5</sup>
- More than 20% of students experienced signs of anxiety & depression after one month in quarantine (Xie et al., 2020)<sup>5</sup>
- Rates are expected to double or triple after COVID.<sup>5</sup>



# COVID Related Trauma & Stressors

- Changes in routines and expectations
- Financial stressors
- Aversive home environments
- Oppression
- Systemic Racism
- Civil Unrest

Important: consider the experiences of yourself and staff!

# First Steps –Resource Mapping & Planning

- Identify assets & resources available to implement supports.<sup>5,6</sup>
- Efficacy of established supports.
- Identify individual, school, classroom needs and determine supports for students, families, and staff at each phase of recovery (prior to reopening, immediately after reopening, long-term support) <sup>1,5</sup>
- Evaluate wrap around supports.

# Examine MTSS Framework (General)

## 1. Determine Student Needs. Analyze:<sup>6</sup>

- Attendance, grades, discipline records
- MBH progress monitoring data
  - When were interventions provided? E.g., during/after closures.
  - Are needs result of expected reactions to specific event or more long-term?
- Anecdotal data: individual experiences, risk factors, warning signs for distress.
- Data from caregivers & self-report (especially helpful for virtual environments)

# Examine MTSS Framework (General)

2. Match needs to existing services. Identify gaps in existing service delivery model. \*\*6

3. Develop guidance documents: a) services across all tiers; b) how to access providers/referral process; c) how interventions will be provided virtually if needed.<sup>6</sup>

\*\*Consider services available in schools and community providers.

# Examine MTSS Framework (Virtual)

Also consider:

- Data from caregivers & self-report.<sup>6</sup>
- How learning environment influences student presentation, validity of data, and the way needs are identified and matched to relevant interventions at Tiers 2 and 3.<sup>6</sup>
- Identification and support for students with unsafe homes.<sup>1</sup>
- Gather data from multiple sources and settings<sup>5</sup>, including informal regular check-ins.<sup>1</sup>

# Triage

- A system of triage should be used to help identify those at more risk for adjustment difficulties so that students can be best matched with needed interventions.<sup>4</sup>
- COVID-19 School Adjustment Risk Matrix (C-SARM) helps educators analyze a) pre-COVID-19 school experiences and b) shelter-in-place environment.<sup>4</sup>

# COVID-19 School Adjustment Risk Matrix<sup>4</sup>

	Pre-COVID-19 School Experience Continuum	COVID-19 Shelter in Place Environment Continuum
<b>Positive</b>	Liked & enjoyed all aspects of school; felt connected to the school, safe, & cared for as part of a community.	Healthy, safe, nurturing, and adaptive (e.g., most or all needs met, positive experiences with distance learning, no direct financial or health impacts from COVID-19).
<b>Variable</b>	Liked & enjoyed only particular aspects of school. Either felt neutral or had negative experiences with other elements.	Some support, but some challenges, affected by COVID-19 in some areas.
<b>Negative</b>	Disliked most or all aspects of school; did not feel connected to the school, safe, or cared for as part of a community. However, note that some students may find requirements for physical distancing in the “new” school environment to actually make school less negative (e.g., modifications to recess may minimize negative social interactions).	Unhealthy, unsafe, dangerous, and maladaptive. Reflects either significant impact from physical, medical, or financial COVID-19 related stress, or those living in an environment of child maltreatment, violence, substance abuse and mental health problems, and rejection.

\*Adapted from NASP (2020) C-SARM

# COVID-19 School Adjustment Risk Matrix (C-SARM) <sup>4</sup>

		Pre-COVID-19 School Experience		
Shelter-In-Place		Positive	Variable	Negative
	Positive	Low Risk	Low/Moderate Risk	Moderate/High Risk
	Variable	Low/Moderate Risk	Moderate Risk	High Risk
	Toxic	High Risk	High Risk	Extreme Risk



# Why Focus on Tier 1 Post Pandemic?

- During pre-COVID-19, screeners identified needs at a broader level but can now result in overidentification.<sup>5</sup>
- Universal screening not recommended until there's been time to adjust back to school & for implementation of Tier 1. <sup>5,6</sup>
- Allows for continuum of supports and reserves resources for students with intensive needs.<sup>6</sup>
- Likely difficult providing intensive/individualized supports because of increased needs.

# Tier 1

- Focus on trauma-informed supports for unique issues related to pandemic and racial injustice.<sup>3</sup>
- Explicit instruction in SEL competencies. E.g., psychoeducational class lessons:<sup>1,3,6</sup>
  - Resiliency/coping skills
  - Help-seeking
  - Fostering relationships/social skills
  - Self-regulation/self-management
- Teacher/school-based behavioral health specialist led group discussions to help students process experience (consider increased frequency at reentry)<sup>1</sup>

# Tier 2

1. Identify students at risk prior to closure. Analyze:<sup>3</sup>

- Previous school supports
- Attendance/tardies
- Preexisting conditions and existing SEB concerns
- Insecurities with food, shelter, finances
- Loss of loved one due to COVID-19
- Racial trauma
- Data from caregivers & self-report
- Tier 1 SEB progress monitoring data and less emphasis on screening

# Tier 2

2. Clearly defined goals & expected intervention outcome.

3. Interventions

- NASP recommends using a standard protocol and targeted skill groups by school-based mental health providers.<sup>3</sup>

# Tier 3

- Use culturally responsive and equity focused identification and interventions.
- Consider current and historical context for emotions and behaviors.<sup>6</sup>
- Consider individual and cultural strengths when creating intervention plans.<sup>6</sup>

# Tier 3 Considerations

1. Which intensive supports can be delivered virtually and in-person?
2. How will you collect data for virtual monitoring?
3. Which Tier 3 interventions can be altered to be implement at Tier 1 or 2?
4. Psychological triage. What is the process of determining need of intensive supports?

# Data Evaluation and Equity Considerations

- Access to virtual learning (e.g., Wi-Fi, tech devices) and learning supports in the home.<sup>2,5</sup>
- Appropriate supports for English language learners.
- COVID-19 related racism and stigma appropriately addressed in virtual and in-person learning.
- Basic needs in home met.
- Work demands appropriate during traumatic situations (e.g., sick loved one)
- Student has/have supports if living in unsafe/unstable environments.

# Cultural Responsiveness, Stigma, and Racism

- Consider cultural expectations and norms for responses, expressions, and behaviors of students/staff.<sup>2,6</sup>
- Increase awareness of stigma and racism with bullying, harassment, hurtful statements, discrimination, etc.:<sup>1</sup>
  - Individuals/family members diagnosed with COVID-19
  - Allergic reactions/respiratory illness resulting in coughing.
  - Asian American and Pacific Islander population.
  - African American individuals targeted due to mask wearing in public.



# Other Helpful Considerations

- Most experienced some degree of related trauma, but risk/protective factors and personalized experiences influence how we react.<sup>3</sup>
- Minimized social interactions can have adverse impact.<sup>1</sup>
- Self-regulation and social/emotional skills may have regressed due reduced social interaction and may need to be retaught.<sup>1</sup>
- Loss takes many forms and includes inability to participate in activities deemed as enjoyable (e.g., athletics, band, drama, etc.) for a period of time.<sup>1</sup>

# Other Helpful Considerations

- Wearing masks can create difficulty reading non-verbal cues.<sup>1</sup>
- Expect decreased stamina for work completion due to reduced demands at time of closure.<sup>5</sup>
- Expect difficulties following routines and schedules.

# Relations are a Buffer

- Strong connections can mitigate impact of stressors.
- Children need to be physically and emotionally safe at school especially if experiencing stressors.<sup>5</sup>
- Give time & attention other than when students engaging in challenging behaviors.
- Establish connections in a non-intrusive & compassionate manner.<sup>5</sup>
- Helpful tip: Create a routine to regularly connect with students on-line or in classroom.

# Staff Wellness

- Important to consider staff's experience with their own trauma.
- Are your staff in a place where they can serve students?
- NASP recommends monitoring health and well-being of staff at reopening and throughout school reintegration.<sup>3</sup>
- Provide staff SEL resources, collaboration opportunities, and school practices are consistent.<sup>5</sup>

# Contact Information

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# Bibliography

1. American School Counselor Association and National Association of School Psychologists (August, 2021). *School Reentry Considerations. Supporting Student Social and Emotional Learning and Mental and Behavioral Health Amidst COVID-19*. Author. Retrieved from [https://www.nasponline.org/resources-and-publications/resources-and-podcasts/covid-19-resource-center/webinar-series/school-reentry-considerations-supporting-student-social-emotional-learning-\(sel\)-and-mental-behavioral-health-\(mbh\)-amidst-covid-19](https://www.nasponline.org/resources-and-publications/resources-and-podcasts/covid-19-resource-center/webinar-series/school-reentry-considerations-supporting-student-social-emotional-learning-(sel)-and-mental-behavioral-health-(mbh)-amidst-covid-19)
2. National Association of School Psychologists (2020). *Equity considerations during and after COVID-19 school closures* [handout]. Author.
3. National Association of School Psychologists (2020). *Providing Effective Social-Emotional and Behavioral Supports After COVID-19 Closures. Universal Screening and Tier 1 Interventions* [handout]. Author.
4. National Association of School Psychologists (2020). *Returning to School Following COVID-19 Related School Closures: The COVID-19 School Adjustment Risk Matrix (C-SARM)* [handout]. Author.
5. National Association of School Psychologists (2020). *Tier 2 Social-Emotional Learning/Mental and Behavioral Health Interventions: Post COVID-19*[handout]. Author.

# Bibliography

6. National Association of School Psychologists (2020). *Tier 3 Mental and Behavioral Health Interventions and Special Education* [handout]. Author.
7. Perry, B.D. Traumatized children: How Childhood Trauma Influences Brain Development, 11(1), 48-51. *The Journal of the California Alliance of the Mentally Ill*.
8. The College of St. Scholastica(n.d.). *Trauma Affects Development Throughout the Lifespan*. Retrieved from:  
<http://resources.css.edu/academics/med/2015conferenceresources/children-and-trauma.pdf#:~:text=Trauma%20Affects%20Development%20Throughout%20the%20Lifespan%20A%20child%E2%80%99s,consequences%20for%20physical%20and%20mental%20health%20throughout%20life.>
9. *What is Child Trauma?* (2020, June 22). Center for Child Trauma Assessment and Service Planning. Retrieved from  
<http://cctasi.northwestern.edu/family/child-trauma/>

# Resources

1. NASP COVID-19: Resource Center - <https://www.nasponline.org/resources-and-publications/resources-and-podcasts/covid-19-resource-center>
2. U.S. Department of Education: COVID-19 Resources for Schools, Students, and Families - <https://www.ed.gov/coronavirus?src=feature>
3. CASEL. The CASEL Guide to Schoolwide SEL. 2<sup>nd</sup> Edition- <https://schoolguide.casel.org/>
4. CASEL COVID Resources: <https://casel.org/covid-resources/>
5. National Education Association. Resource Library- <https://www.nea.org/resource-library?>
6. Safe Schools and Campuses Best Practices Clearinghouse- <https://bestpracticesclearinghouse.ed.gov/>



# Resources

## **Crisis Preparedness**

NASP PREPaRE Model for School Crisis Prevention and Response - <https://www.nasponline.org/professional-development/prepare-training-curriculum>

## **SEL Curriculums that Allow for Remote Service Delivery:**

1. Second Step - <https://www.secondstep.org>
2. Kimochis - <https://www.kimochis.com>
3. Stanford Harmony - <https://www.stanfordharmony.org>
4. Collaborative Learning Solutions - <https://www.clsteam.net>
5. WhyTry - <https://whytry.org>

# Stay Connected



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