

Clinical Foundations

STARR
COMMONWEALTH

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Introduction

Mental health emergency
Trauma-informed, Resilience-focused mindset

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Self-care is an act of
self-love.

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Starr's Theory of Change

When trauma-informed and resilience-focused adults work within trauma-informed and resilience-focused systems, the wellbeing and success of children will increase.



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What does being trauma-informed and resilience-focused really mean?

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It is a **MINDSET**



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Trauma-Informed and Resilience-Focused

Trauma-informed and resilience-focused care fosters the possibility of well-being by restoring and nurturing resilience – **despite other life adversity.**



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What is Trauma-Informed and Resilience-focused Care

- It is asking,
“What experiences are driving the way this child thinks about themselves and others?”
- And,
“How does that impact the way they behave?”



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What is Trauma-Informed and Resilience-Focused Care?

- It is **NOT** asking, “What is wrong with this child?”
- It is **NOT** labeling
- It is **NOT** diagnosing without first **REALLY** assessing



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What is Trauma-Informed and Resilience-Focused Care?

- It is being curious rather than “all knowing”
- It is asking or wondering:
 - What happened or what is happening in this child’s life?
 - What is already right for this child?
 - What are the strengths of this child?



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What is Trauma-Informed and Resilience Focused Care?

- It is wondering, **“What can I do to best support this child?”**
- And, “What are the new opportunities and experiences I can provide this child to **restore and nurture resilience**, despite all they have experienced?”



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The Most Important Thing You Will Hear Today...



Trauma-Informed and Resilience-Focused
Care is a **MINDSET**

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Children of Trauma

- Over half of the nation's children have experienced at least one or more types of childhood trauma.
- 33% of students have been bullied.
- 60% of students 17 years old or younger have been exposed to crime, violence, and/or abuse.
- 30% of student in urban schools have witnessed a stabbing or a shooting.

– National Survey of Children's Health (2020)

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Children of Trauma

- There has been a 45% increase in self-harm and suicidality from 2019-2021
- 12 million children live in poverty.
- There is an epidemic of childhood grief due to COVID related deaths.
- More children that ever are living with a parent or caregiver struggling with depression and anxiety.

– Annie E. Casey Fund (2022)

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National Emergency in Mental Health

- In 2021, the Children’s Hospitals Association, American Academy of Pediatrics, and the American Academy of Child and Adolescent Psychiatry declared a

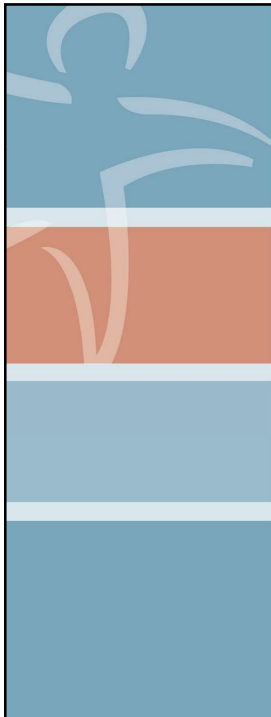
**National State of Emergency in
Child and Adolescent Mental Health**

- In 2022, the Biden Administration declared a

Federal Mental Health Crisis

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Mental Health Practitioner Shortage

- Reports about the supply of mental health therapists according to an analysis by the Health Resources and Services Administration, the United States needs a population to provider ratio of 30,000 to 1 and is coming up short by over 6,000
- There is a system design issue (access)
- Over 1/3 of Americans live in areas lacking mental health professionals

This means that we need all hands on-deck to help

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Resilience

Core values and beliefs
Circle of Courage: A model of resilience

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The bad news is,
TRAUMA is a fact...

The good news is,
so is **RESILIENCE!**

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Brain Science Advances

- Every experience changes our chemistry – both adverse AND positive experiences!



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We Begin Here: RESILIENCE

- We cannot talk about being trauma-informed without talking about being **resilience-focused**.
- We may not be able to take away what happened but...
- Every interaction we have with a person provides them with a new opportunity for a new experience – something positive which can restore and nurture their resilience.
- This is what we can control and where we can **find hope**.

Resilience = **HOPE**

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What is Resilience?

...the ability to achieve positive outcomes – mentally, emotionally, socially, and spiritually – despite adversity.

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4 Main Protective Factors for Resilient Children

1. Supportive adult-child relationships
2. A sense of self-efficacy and perceived control
3. Adaptive skills and self-regulatory capacities
4. Sources of faith, hope and cultural traditions

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"There is no such thing as a bad boy (person)."

– Floyd Starr

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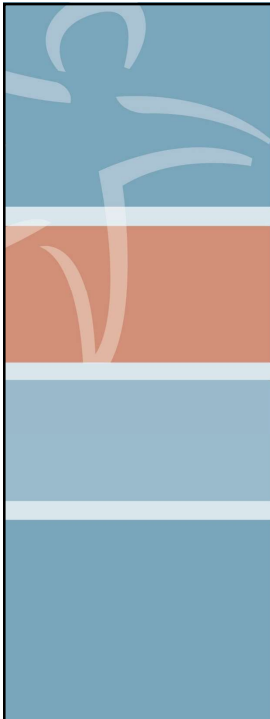


Foundations

View of children

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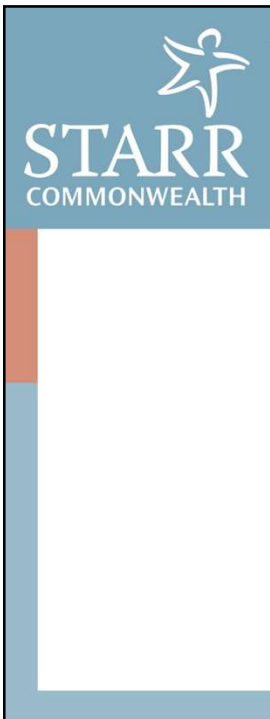
The Lakota word for child means...



Sacred Being

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We Believe...

There's no such thing as a bad child.



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We Believe...

That badness is not a normal condition but the result of misdirected energy and unmet needs.



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We Believe...

That every child will be good if given an opportunity in an environment of love and activity.



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We Believe...

In play.



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We Believe...

That children are resources.



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We Believe...

That children merit confidence and trust.



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We Believe...

That problems are opportunities.



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We Believe...

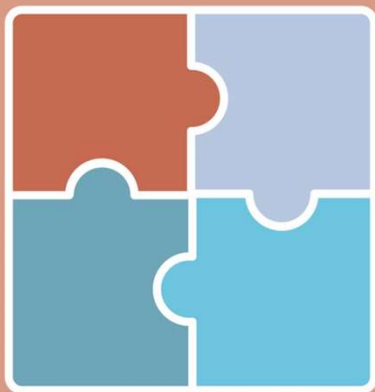
That everyone has a responsibility to help and no one has the right to hurt.



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ACTIVITY

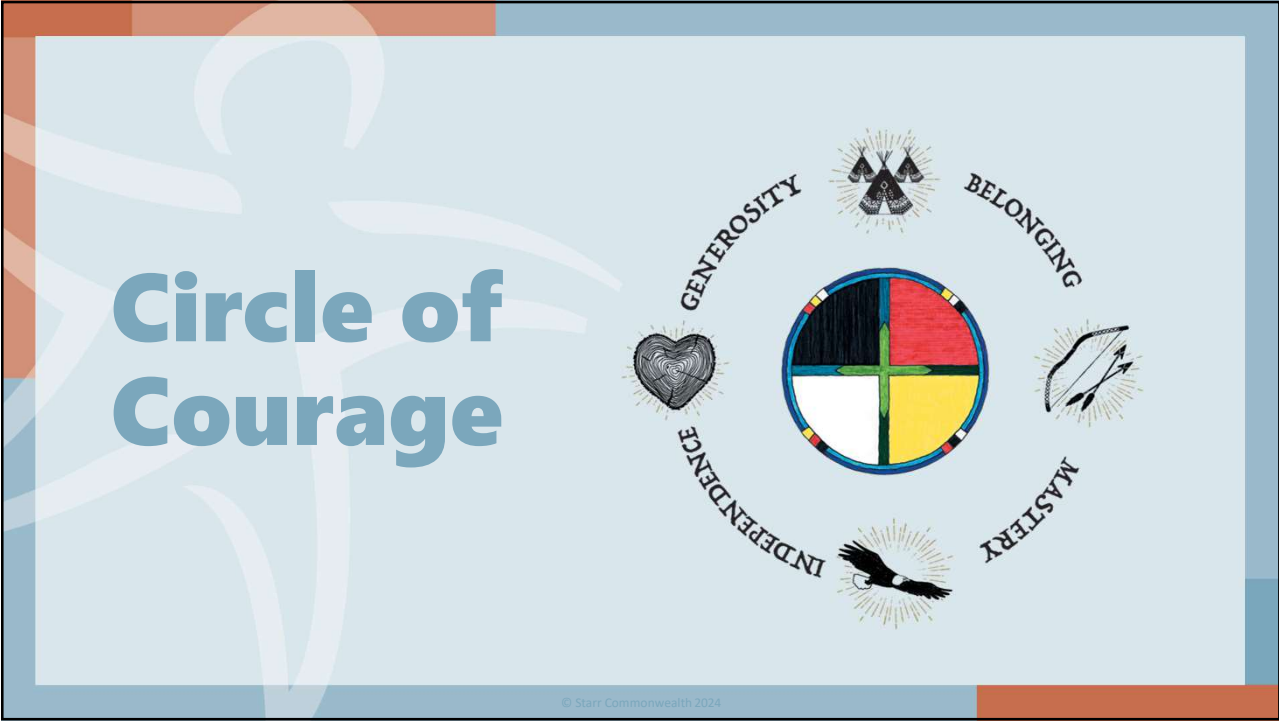


What are the core values and beliefs in your professional setting?

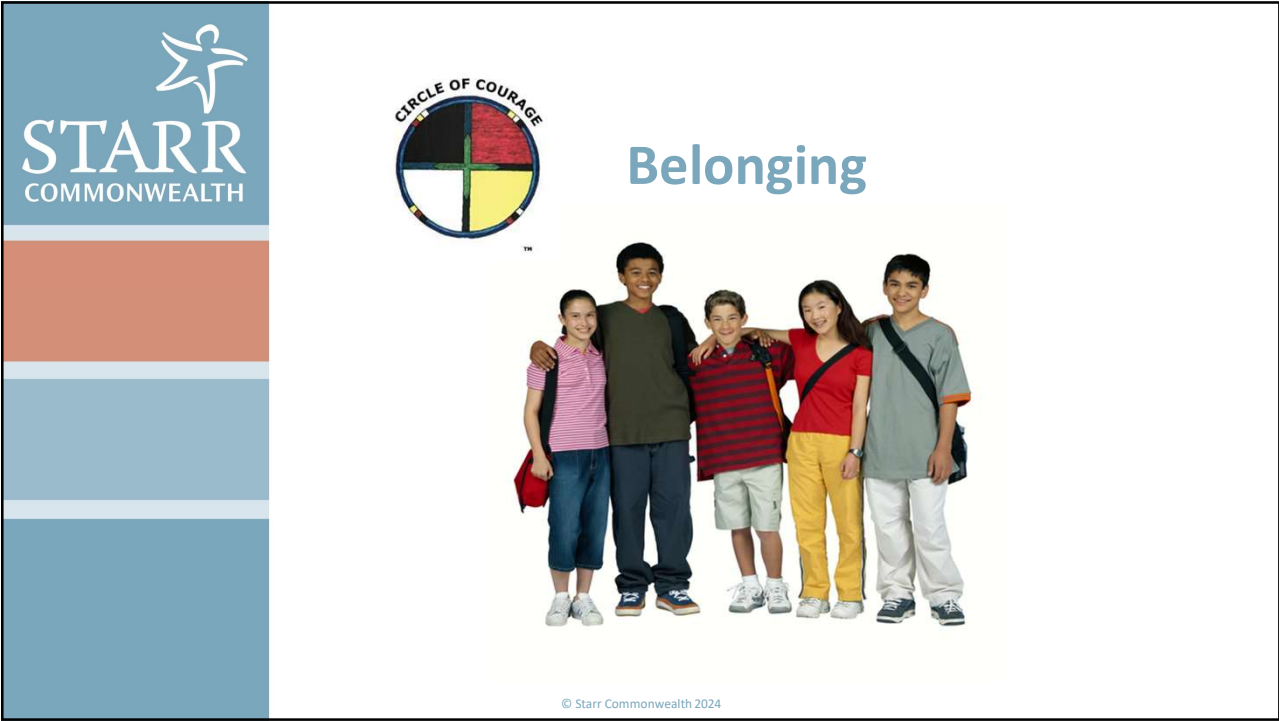
How do these values and beliefs influence the way children are viewed and treated?

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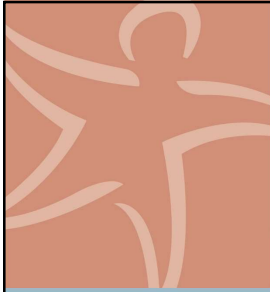
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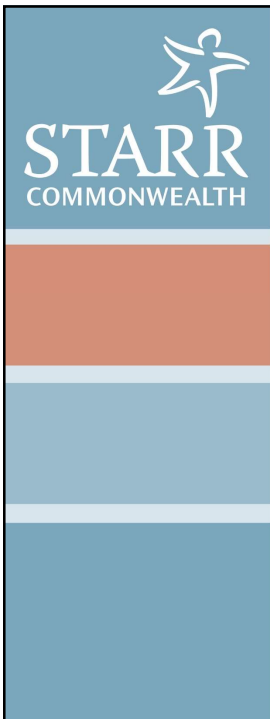
Belonging

- The presence of a strong sense of belonging makes young people more receptive to guidance from other community members.
- And, even if parents/caregivers are struggling – there are others there to help children.



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Belonging

- A sense of belonging helps children draw strength from a group as well as from themselves.



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  **Mastery**




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 **Mastery**

- The goal for mastery should be to achieve one’s potential and then contribute to and provide for the greater community.



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Mastery

- When success is met, the desire to achieve is strengthened.



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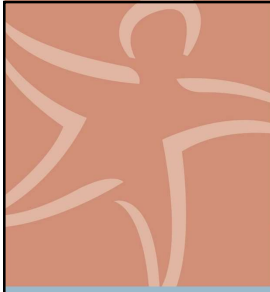


Independence



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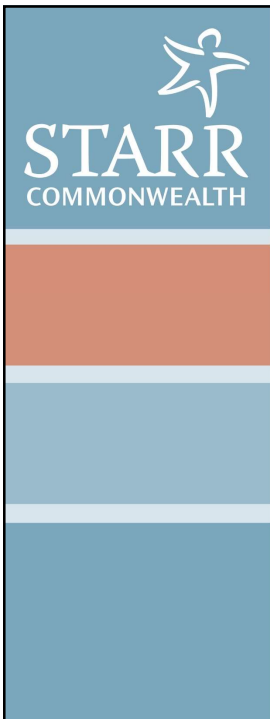


Independence

- In contrast to obedience models of discipline, teaching should be designed to build respect and teach inner discipline.
- Children should be encouraged to make decisions, solve problems, and show personal responsibility.
- To learn and practice emotional awareness and regulation.

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Independence

- Adults can model, nurture, and guide, but children should be given opportunities to make choices without coercion.



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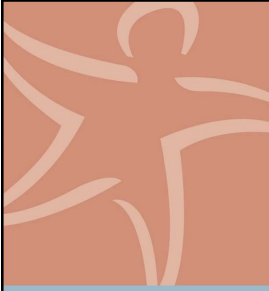



Generosity




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Generosity

- In helping others, we create our own proof of worthiness, for we have the power to make positive contributions to the world.



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Generosity

- All children increase their sense of self-worth as they become committed to the positive value of caring for others.



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Who Remembers...

What are the **4 Protective Factors** resilience research today indicate as most important?



1. Supportive adult-child relationships.
2. A sense of self-efficacy and perceived control.
3. Adaptive skills and self-regulatory capacities.
4. Sources of faith, hope and cultural traditions.

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Practice-Based Evidence: 1913 to Present

BELONGING – Supportive adult-child relationships

MASTERY – A sense of self-efficacy and perceived control

INDEPENDENCE – Adaptive skills and self-regulatory capacities

GENEROSITY – Sources of faith, hope and cultural traditions

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Resilience

When we focus on resilience, we find **HOPE, SOLUTIONS,** and **JOY.**

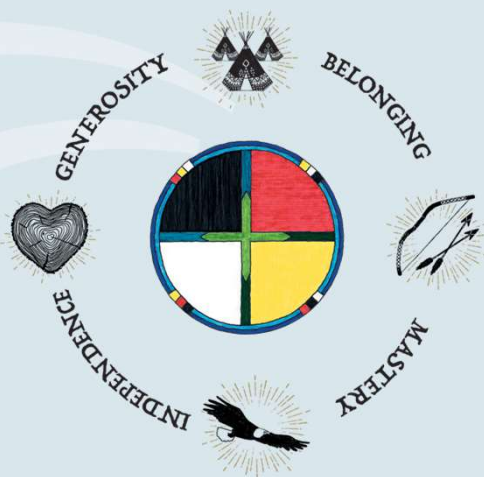
When we focus on resilience, we bring out the best in children and in ourselves!



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Restore & Nurture Universal Needs



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Belonging

Attachment and Significance

"I am important to someone and they want to know what my life is like, not only what is wrong with me but what is good about me to."

How can connect with children?

- Be continuously curious about how the child is experiencing their world
- Get to know them!
- Find out their likes, dislikes.
- Explore what they need most to feel supported

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Mastery

Achievement and Competence

“For once I feel like I am good at something.”
“I am in control of my behavior and reactions.”
“There is more to me than just my stress and trauma...”

How can educators promote mastery?

- Identify each child’s potential.
- Teach emotional awareness and regulation and then practice with them.
- Provide opportunities for children to experience their strengths.

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Independence

Autonomy and Power

“I have a choice.”

How can we promote a sense of independence?

- Provide choices.
- Provide options.
- Ask the child what they need most.

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Generosity

Altruism/Virtue

"I have value and I can help others."

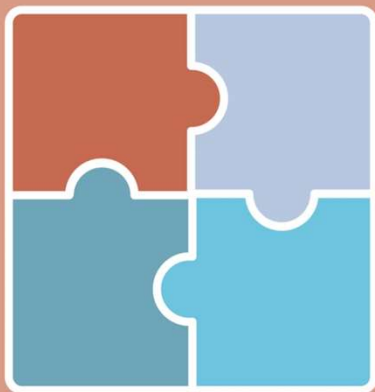
How can we help children feel valuable?

- Point out the child's self worth.
- Provide opportunities for them to experience their value when they help others!

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ACTIVITY



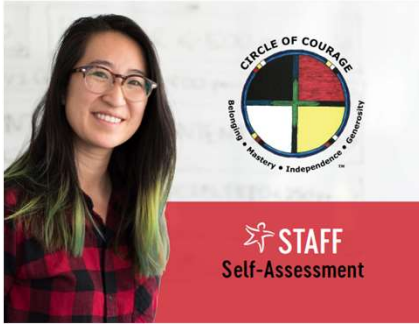
Circle of Courage Staff Self-Assessment

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ACTIVITY: Circle of Courage Staff Self-Assessment



Circle of Courage® Staff Self-Assessment



Name _____ Date _____

Directions: Please rate your implementation of the following four universal need interventions: Belonging, Mastery, Independence, and Diversity based upon the following scale: 0 - Not yet implemented, 1 - Rarely implemented, 2 - Sometimes, 3 - Almost always, 4 - Always. Allow me rate the interventions, take a look at the numbers you selected for each intervention. Focus on one or two interventions from each universal need category where you rated yourself with a 0, 1, or 2 for the next several weeks. Feel proud of the interventions you are consistently implementing almost always and/or all of the time. Well done! Periodically, come back to this assessment to compare how you are doing with your implementation.

Rate your implementation of the following interventions to support BELONGING:	0 Not Yet Implemented	1 Rarely Implemented	2 Sometimes	3 Almost Always	4 Always
1. I greet each student by name every day and when they return from recess/lunch and specials.					
2. I have asked each student what they want to be called, if they have a nickname and how to pronounce it.					
3. I strive to establish a positive relationship with every student (trust, connection, and understanding) and assume each student is doing their best. Example: The look (and body) - is that why you haven't started your work? and Do you need a drink of water, a few minutes, some time to help you get started? (Give time to do these requests)					
4. I have daily classroom meetings.					
5. I have created norms for classroom meetings, collectively with my students.					
6. I practice pro-social behaviors during classroom meetings with my students (i.e. compliments, gratitude, and "get to know you" prompts).					
7. I implement the 5:1 positive/negative interaction rule. I always look for the good in every situation. I notice what is going right. Have at least 5 positive interactions for every 1 negative interaction.)					
8. I offer specific verbal affirmation for students who are making another student(s) feel a sense of belonging.					
9. When a difficult behavior arises, I do my best to look beyond the behavior to determine if the behavior is a bid for connection.					
10. I respond to student's bids for connection with boundaries.					
11. I restore relationships after negative interactions between myself and a student and/or between students. (Mediation session with teacher and student and/or peer - may need to wait until all parties are calm.)					
12. I restore all strangers.					
13. If a student has to leave the classroom to regain regulation, I wholeheartedly welcome them back.					
14. I notice strengths in every student.					
15. I provide opportunities for students to work together in structured and unstructured groups each day.					
16. I role model valuing diversity and acceptance and infuse this into curriculum (i.e. through "read alouds", science, history, math role models, etc.).					
17. I identify students' interests and hobbies and find something you have in common with every student.					
18. I help students see what they have in common with each other.					

CC Staff Self-Assessment 1 of 5

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Trauma

Broken circles

Grief versus trauma

Trauma exposure and types

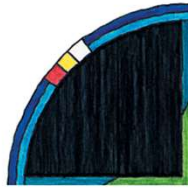
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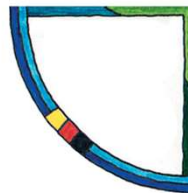
Broken Circles

~~Generosity~~



~~Belonging~~

~~Independence~~



~~Mastery~~

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How do circles become broken?



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TRAUMA



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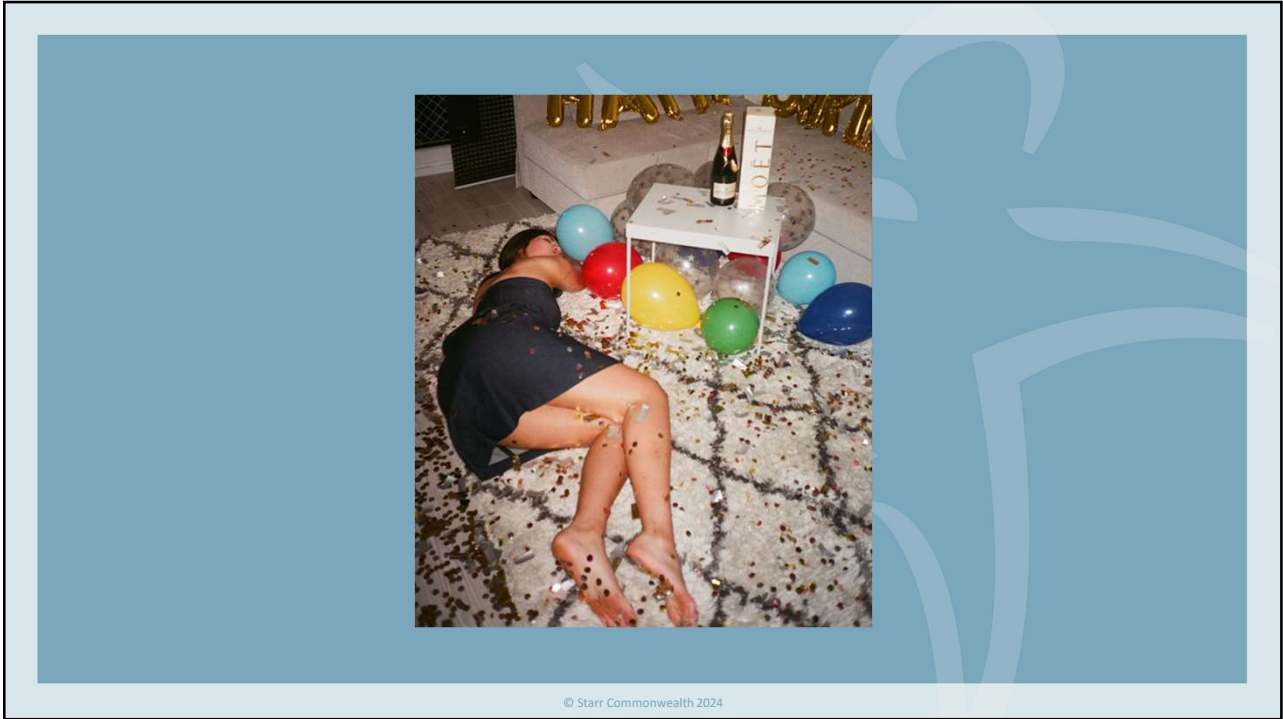
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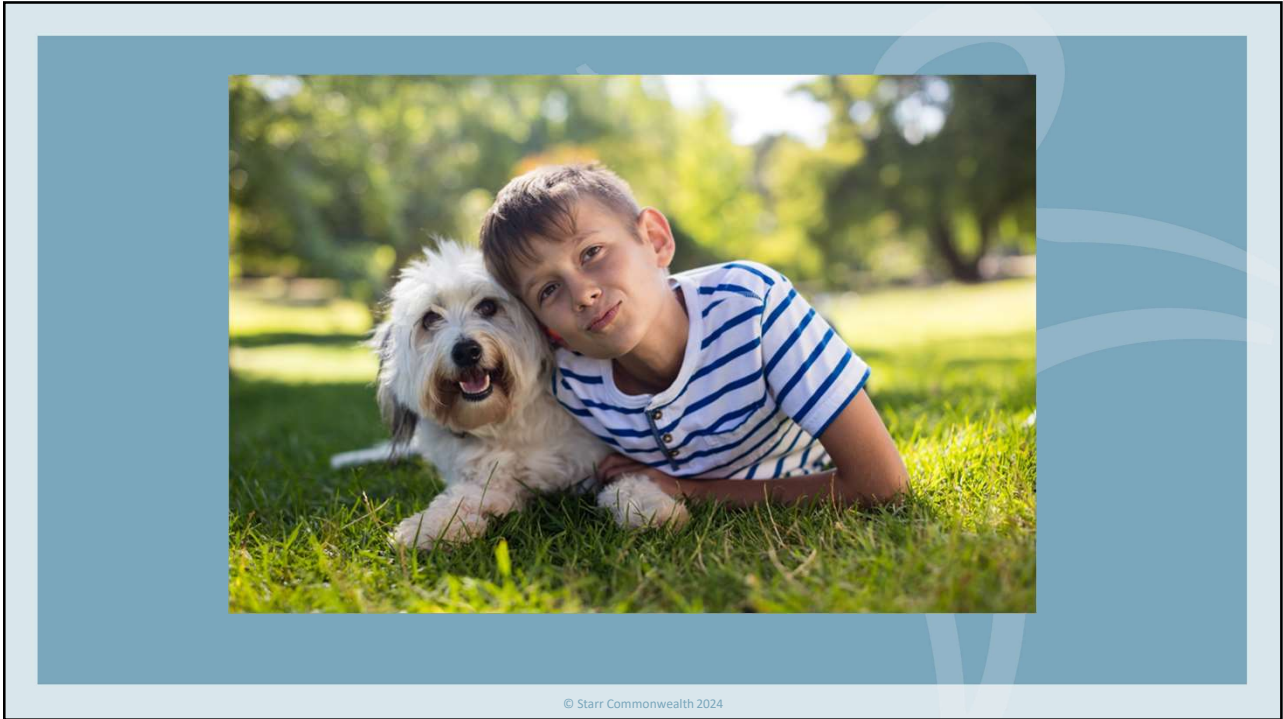


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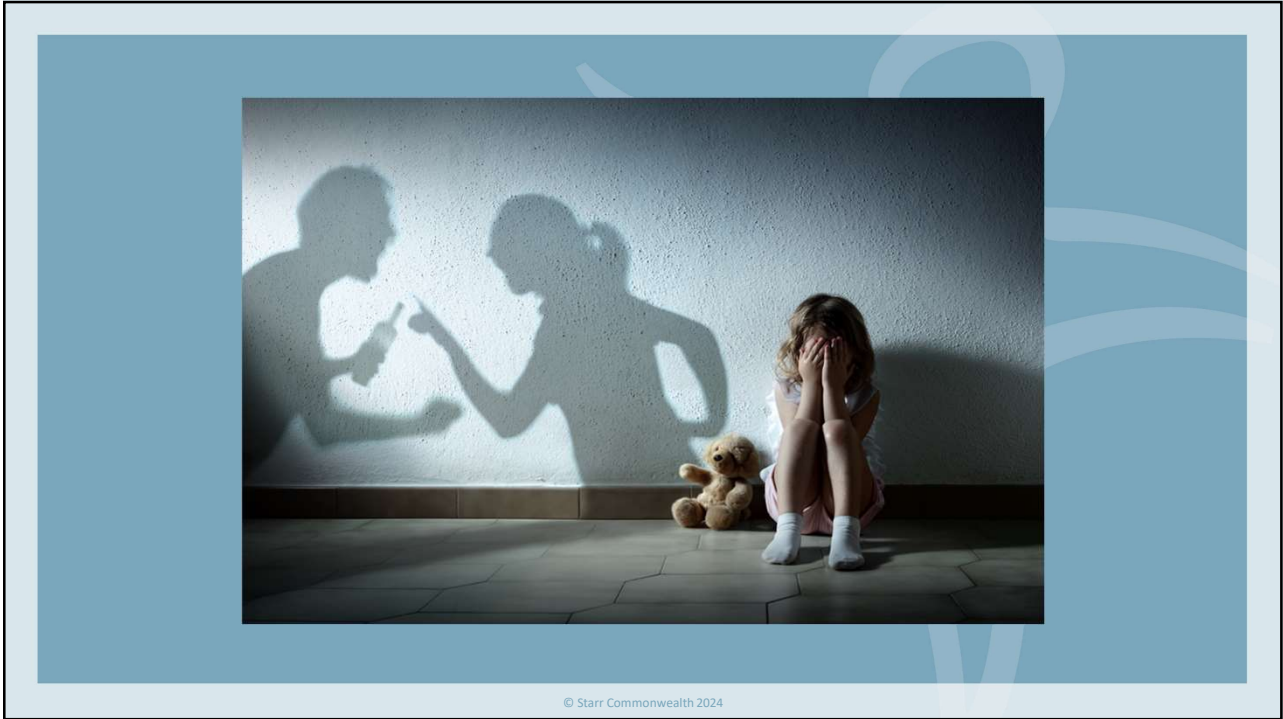
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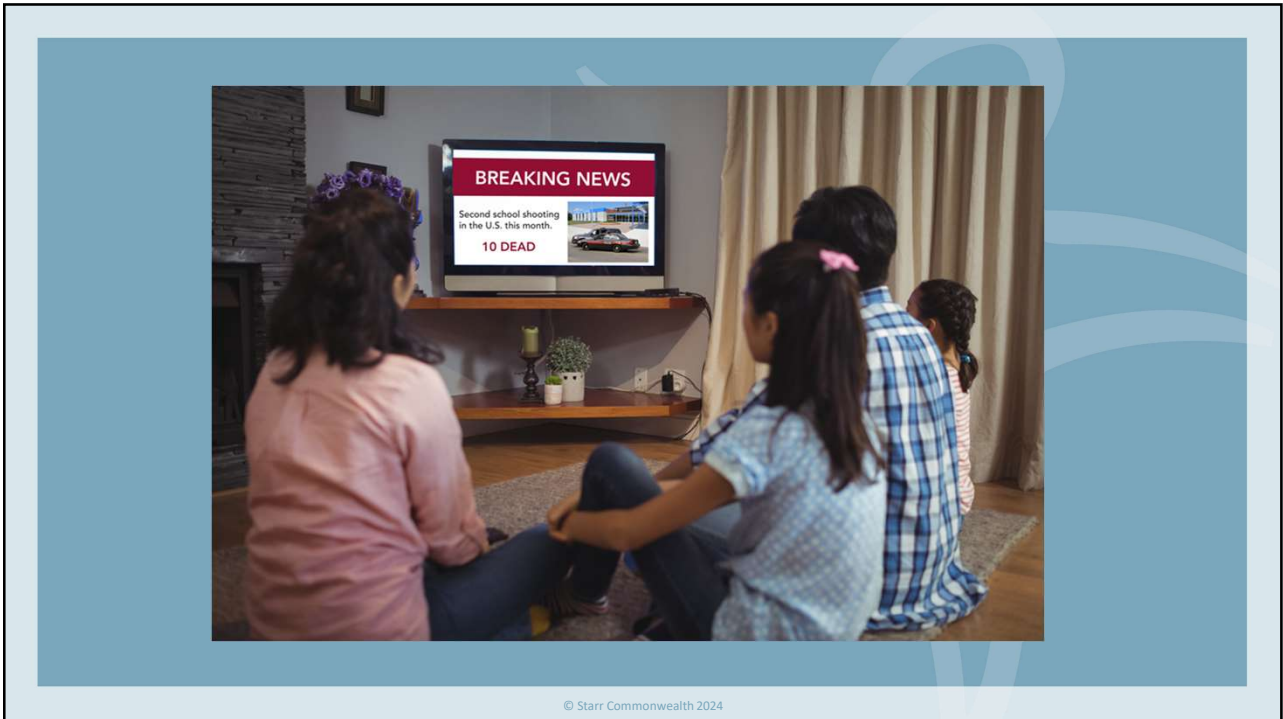
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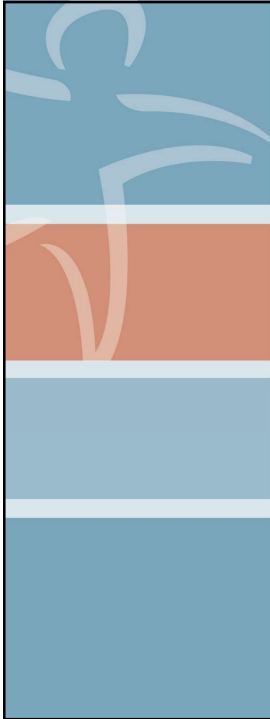


Let's Take a Closer Look at Impact



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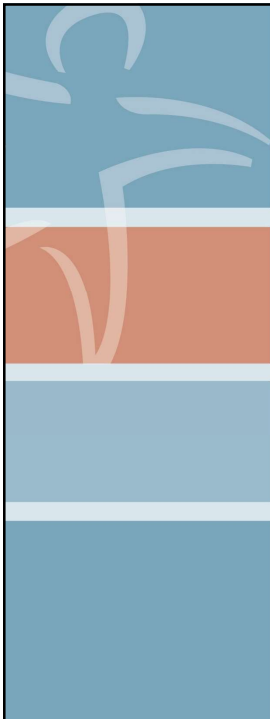


What one word or image stands out when you hear the word grief?



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What one word or image stands out when you hear the word trauma?



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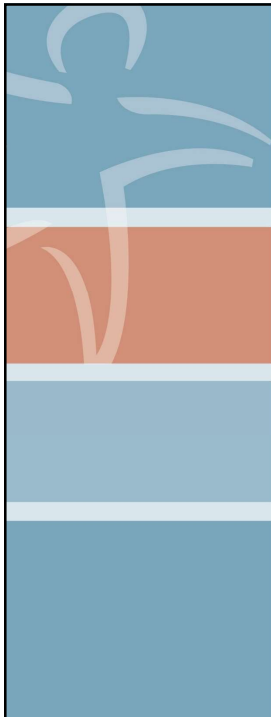
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The Differences

GRIEF	TRAUMA
Generalized reaction is SADNESS	Generalized reaction is TERROR
Grief reactions stand ALONE	Trauma reactions generally include grief reactions
Known to public and professionals	Largely unknown (esp. in children)
Does not disfigure identity	Attacks and distorts identity
Regret says "I wish I would have..."	Guilt says, "It was my fault."
Dreams of person who died, was hurt	Dreams of self dying, being hurt
Pain is related to the loss	Pain is related to tremendous terror and sense of powerlessness, fear, and loss of safety
Anger is not destructive	Anger is assaultive (even if non-violent trauma)

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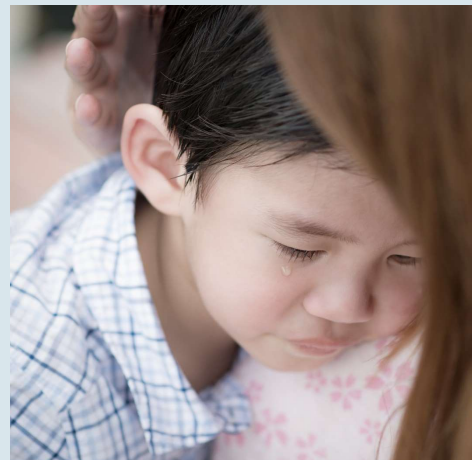
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Trauma

Any experience that leaves a person feeling hopeless, helpless, fearing for their life/survival, or their safety.

This experience can be **REAL** or **PERCEIVED**.



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We can Experience Trauma in Many Ways

The causes of trauma are less important than **how trauma manifests** in a client's life...

It is important to understand we can **experience trauma** in many ways.



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Trauma Exposure

Victim

(e.g., abuse, neglect, car accident)

Witness

(e.g., personal witness – domestic violence, police, fire)

Related to

(e.g., peer, siblings – of chronically ill siblings, sibling that completed suicide)

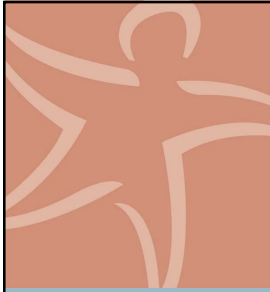
Listening to details of trauma

(e.g., therapists, media exposure, video games, etc.)



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Types of Trauma

Type 1 – Single exposure

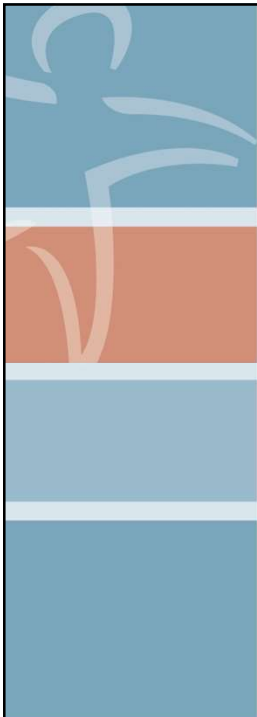
Type 2 – One type of exposure that is repeated OR exposure to one or two different events

Type 3 – **Toxic Stress** and Developmental Trauma Disorder



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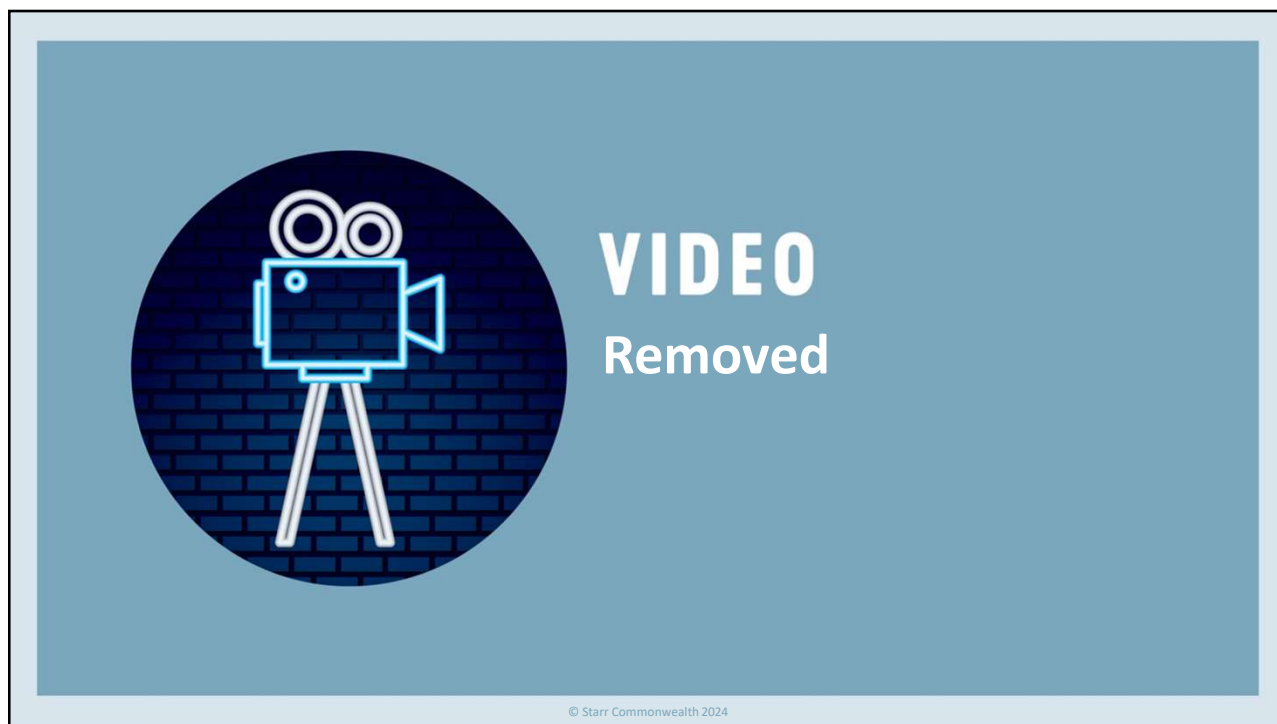
Developmental Trauma Disorder

A proposed diagnosis to help us understand the symptoms and reactions children experience when they have grown and developed in a constant state of stress and trauma.

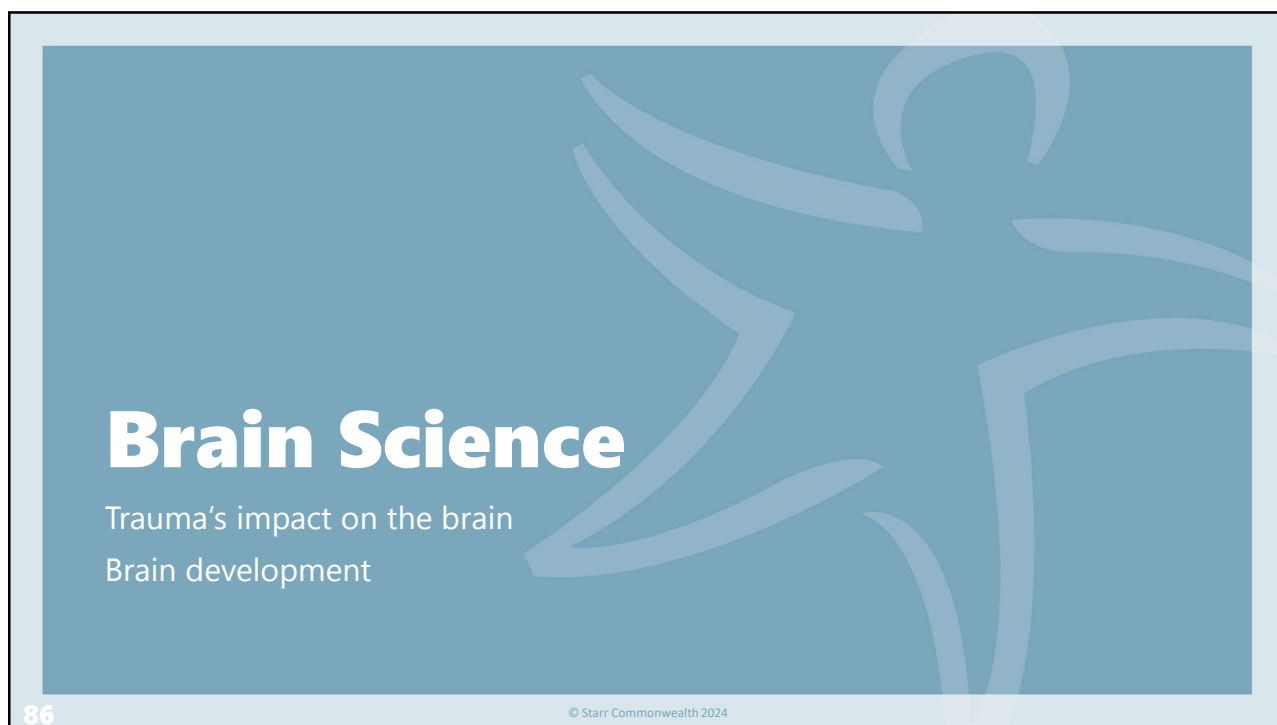
(Robert Pynoos and Bessel van der Kolk in 2005, 2009, 2013)

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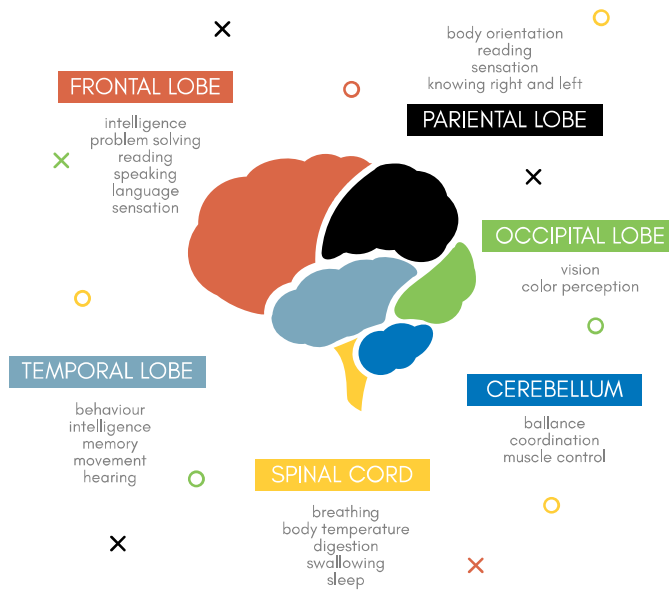
Stress Response System



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Brain Development

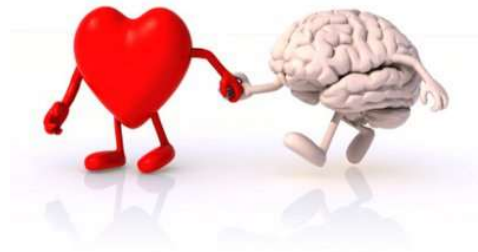


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Deep Brain Functions

- Sensation
- Stress Regulation
- Memory



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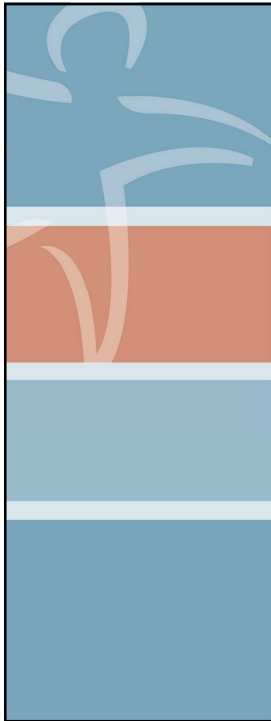
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What was the DANCE?



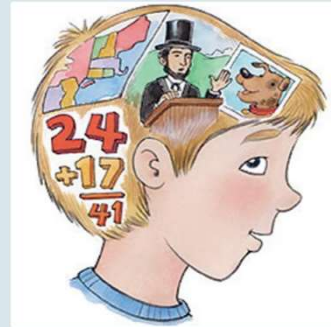
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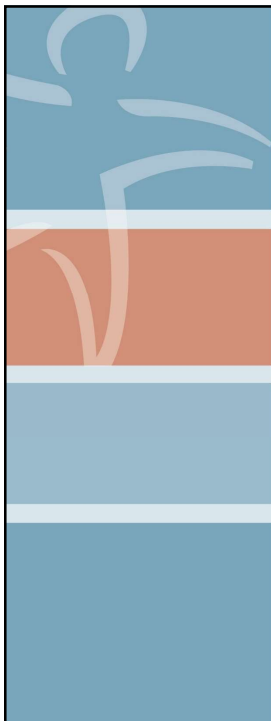
Outer Brain Functions

- Thinks
- Learns
- Recalls information
- Pays attention
- Solves problems
- Makes decisions
- **LEARNS**



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Trauma's Impact on the Brain

OUTER BRAIN

(Thinking)

- Language
- Reasoning
- Understanding
- Processing

DEEP BRAIN

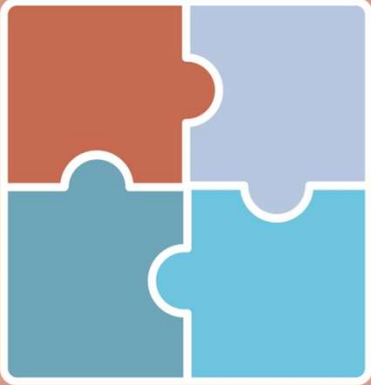
(Sensory)

- Senses
- Affect
- Emotional Regulation
- Memory

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ACTIVITY



Understand Trauma's Impact


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ACTIVITY: Understand Trauma's Impact

TRAUMA activates the stress response. When the brain stem is activated, do the following physical symptoms increase (▲) or decrease (▼)? Circle the arrow below that applies.

- ▲ Heart rate ▼
- ▲ Respiration ▼
- ▲ Muscle tension ▼
- ▲ Blood flow ▼
- ▲ Cortisol ▼
- ▲ Adrenalin ▼



thinking brain

sensory brain

brain stem

When stressed, the Thinking Brain:
 WORKS WELL or DOES NOT WORK WELL
 Name or describe three symptoms of trauma as a result of the stress impact on the Thinking Brain:

1. _____
2. _____
3. _____

When stressed, the Sensory Brain:
 WORKS WELL or DOES NOT WORK WELL
 Name or describe three symptoms of trauma as a result of the stress impact on the Sensory Brain:

1. _____
2. _____
3. _____

Students in trauma often react by engaging in fight, flight, or freeze responses.
 Describe a student experience for each of the responses in the appropriate boxes below.

FIGHT

FLIGHT

FREEZE

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Meerkat, Tiger, & Owl


Teaching kids about their brains is easy!




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ACTIVITY: The Animals Inside of Me



How are you like a meerkat when you're calm? Stressed?



How are you like a tiger when you're calm? Stressed?



How are you like an owl when you're calm? Stressed?

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Trauma screening and assessment

Diagnostic criteria of trauma symptoms and reactions
Overlapping symptoms and reactions

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Screen for Trauma & Toxic Stress Exposure

The best screening tool is your own **curiosity...**

"I wonder what has happened...what is happening?"

NOT...

"What is wrong with this child?"



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Screening & Assessment

SCREENING

(Awareness)

- Starr's Life Events Checklist
- ACE Questionnaire
- Resilience Questionnaire

ASSESSMENT

(Symptoms/Reactions)

- Child and Adolescent PTSD Questionnaire
- Others...
- Intervention should be an ongoing assessment

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Signs & Signals that May Indicate Trauma

- Loss of appetite
- Easily startled
- Difficulty concentrating or remembering
- Frequent headaches or stomach aches
- Constant state of alert
- Diminished interest in school and activities
- Inability to experience joy or pleasure
- Self-blame or shame
- Feeling of detachment from others
- Recurrent conflicts with peers
- Irritability
- Outbursts of anger
- Trouble focusing on classwork
- Acting as if the traumatic event was recurring

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Diagnostic Criteria of PTSD

The term trauma was not formally assigned to children until 1994, when children were included in the adult-designed PTSD diagnostic category.

It has taken 20 years, but things are improving for PTSD diagnoses:

- There is now **developmentally sensitive diagnostic criteria**.
- Thresholds have been lowered for children and adolescents.
- There is a separate criteria for children 6 years or younger.

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Post-Traumatic Stress Disorder (DSM-5)

Re-Experiencing (INTRUSION – 1)	Avoidance (NUMBING – 1)	Negative Cognitions and Mood (2)	Arousal (2)
Flashbacks	Detachment	Distorted sense of self	Aggression
Intrusive thoughts, images	Numbing	Estrangement to others	Reckless behavior
Traumatic dreams	OCD and phobic-like behavior	Markedly diminished interest	Self-destructive and rule-breaking behaviors
Sleep problems	Self harm	Depression	Hypervigilance
Physical complaints	Substance abuse	Blames self or others	Irritability
	Eating disorders		Inattention
	Not wanting to talk about it		Cognitive/learning problems

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Overlapping Symptoms

Symptomology	ADHD	PTSD
Hypervigilance	X	X
Inattention	X	X
Detachment	X	X
Irritability	X	X
Anger outbursts	X	X
Distracted	X	X
Restless	X	X
Impatient	X	X
Impulsive	X	X
Limited sense of future	X	X
Difficulty concentrating	X	X

(Weinstein et al., 2000)

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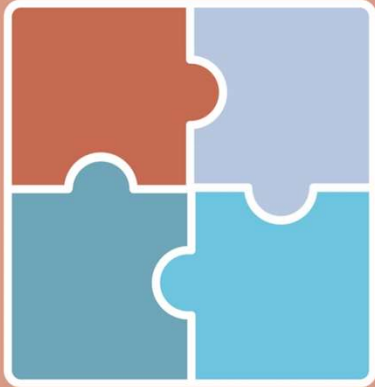
VIDEO

Remembering Trauma

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ACTIVITY



In the Video *Remembering Trauma*

- What stood out to you?
- What impacted you the most?
- Takeaways?

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Attachment

Wired to connect
Ghosts from the nursery reflection

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Attachment

- Attachment starts with bonding experiences and successful relationships with a parent or a caregiver.



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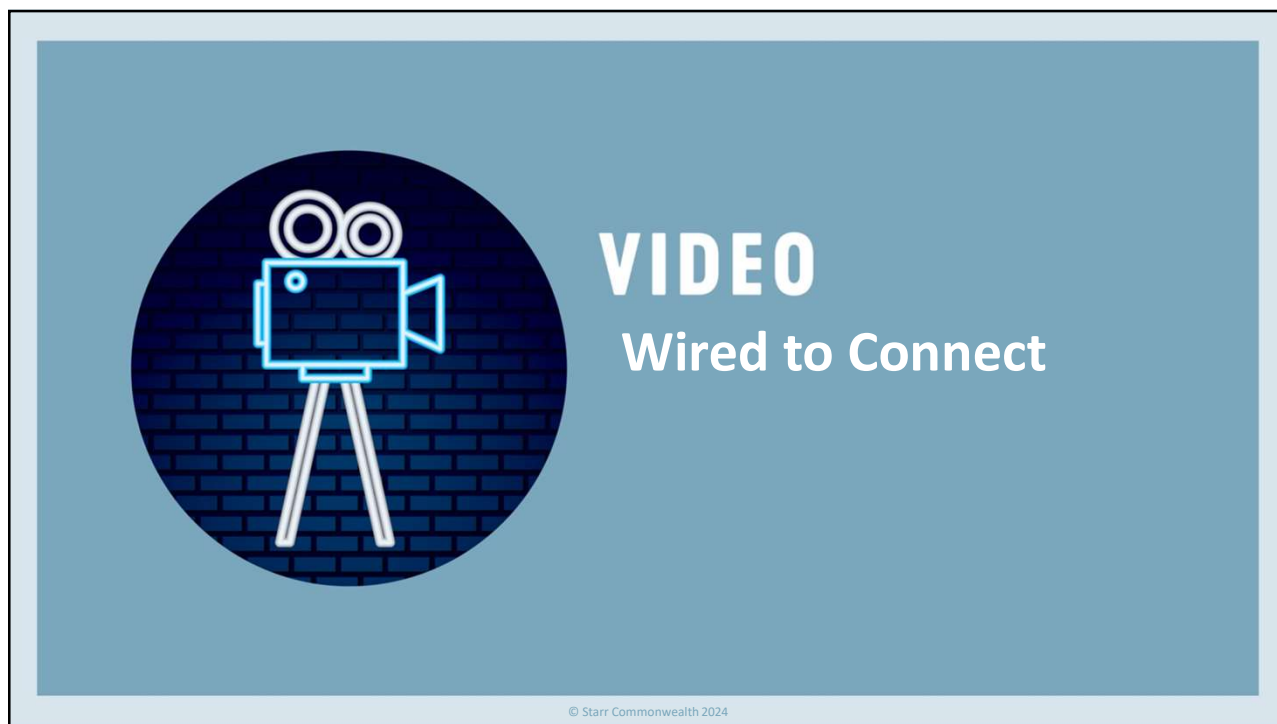
The Importance of Attachment

The **maturation of the brain is heavily mediated by the interaction** and attachment relationship with primary caregivers.


Attachment experiences directly influence optimal brain development (including the maturation of the right brain – i.e., the **development of coping responses**). If this is not taught, children will not learn it.

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109



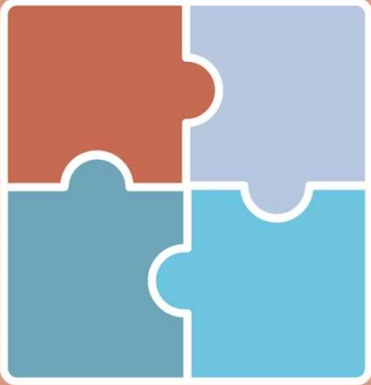
Stressed vs. Secure Attachments

Stressed Attachments	Secure Attachments
<ul style="list-style-type: none"> • Chaotic biochemical changes • Interfere with brain's coping mechanisms • Problems with: <ul style="list-style-type: none"> ○ Emotional regulation ○ Relationships ○ Identity formation ○ Capacity to cope with stress 	<ul style="list-style-type: none"> • Growth facilitating environment • Strong neuronal connections • Integrates brain systems • Strengthens the capacity to cope with stress

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ACTIVITY



Ghosts in the Nursery


- Reflection

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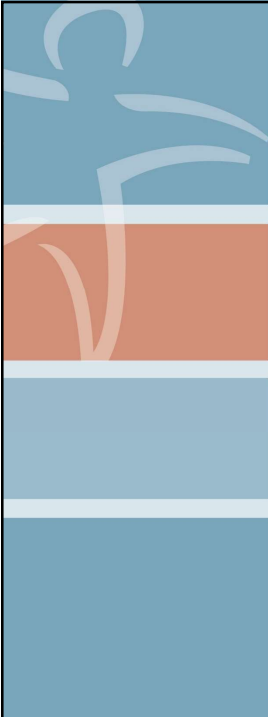
ACE Study

The body remembers



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Short and Long-Term Effects of Trauma

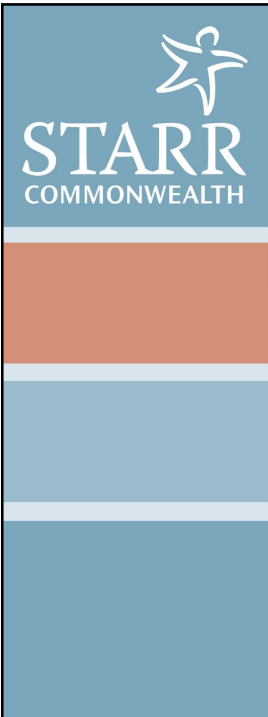
We see twice the number of serious health and mental health problems as those without a history of trauma.

- Chronic fatigue
- Poor immune function
- Eating disorders and obesity
- Hypertension
- Interpersonal difficulties
- Aggressive behavior
- Low self-esteem
- Depression
- Anxiety

94 Billion Dollars Per Year
(Estimated Economic Costs of Trauma)

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Adverse Childhood Experiences (ACE) Study

Large investigation to assess the **associations between childhood maltreatment and later-life health and well-being.**

*Source: Centers for Disease Control and Prevention
Credit: Robert Wood Johnson Foundation*

3 Types of ACEs

ABUSE	NEGLECT	HOUSEHOLD DYSFUNCTION	
 Physical	 Physical	 Mental Illness	 Incarcerated Relative
 Emotional	 Emotional	 Mother treated violently	 Substance Abuse
 Sexual		 Divorce	

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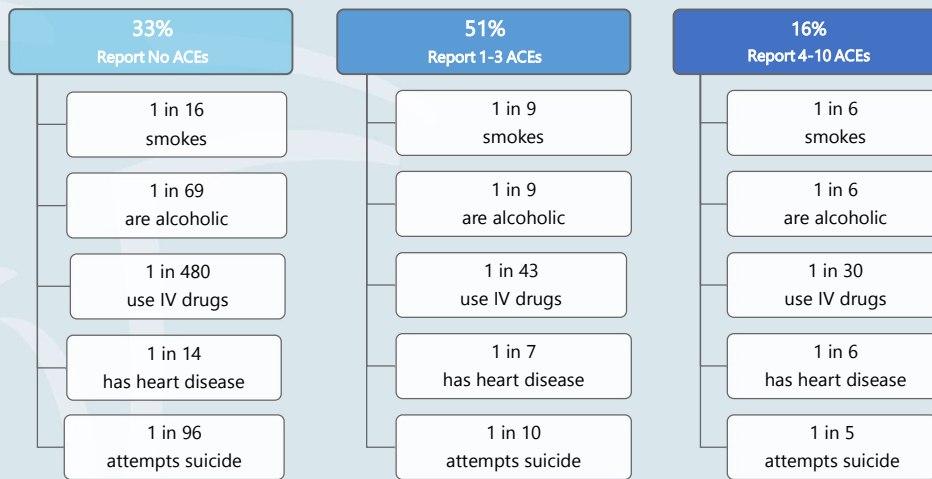
ACE Study



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ACE Study



(Anda & Felitti)

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Trauma – Resilience Link



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Resilience...

...my mother loved me when I was little....my father loved me when I was little.

...other people helped my mother and father take care of me and they seemed to love me.

...when I was an infant, someone in my family enjoyed playing with me and I enjoyed it, too.

...there were relatives in my family who made me feel better if I was sad or worried.

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Resilience...

...teachers, coaches, or ministers were **there to help me** and they **cared about how I was doing in school.**

...my family, neighbors, and friends talked often about **making our lives better.**

...we had **rules** in our house.

...I could almost always find **someone I trusted** to talk to.

...people noticed that **I was capable** and could get things done...I was independent and a go-getter.

Life is what you make it.

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Resilience...

Resilience is not just individual traits, but also a result of family, community, and larger cultural contexts.

Resilience is nurtured and restored in the context of RELATIONSHIPS.




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Trauma is a Sensory Experience

Trauma is a Body Experience




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What do mashed potatoes have to do with trauma?



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“We Want Comfort When Stressed”

“Looks like another Black Monday. The defeat of a proposed \$700 billion bailout package in the U.S. House of Representatives sent U.S. stocks plunging Monday – the Dow Jones Industrial Average registered its largest point drop ever, and the broad Standard & Poor's 500 had its biggest percentage drop since 1987. **The only stock that finished higher from the Standard & Poor's 500 was comfort-food processor Campbell Soup.”**

Wall Street Journal, September 30, 2008 p. C6



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Our Bodies Do Remember

This is why sometimes the behavior and reactions you see TODAY look odd or like unreasonable responses to the current situation.



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HOPELESS

READY TO FIGHT

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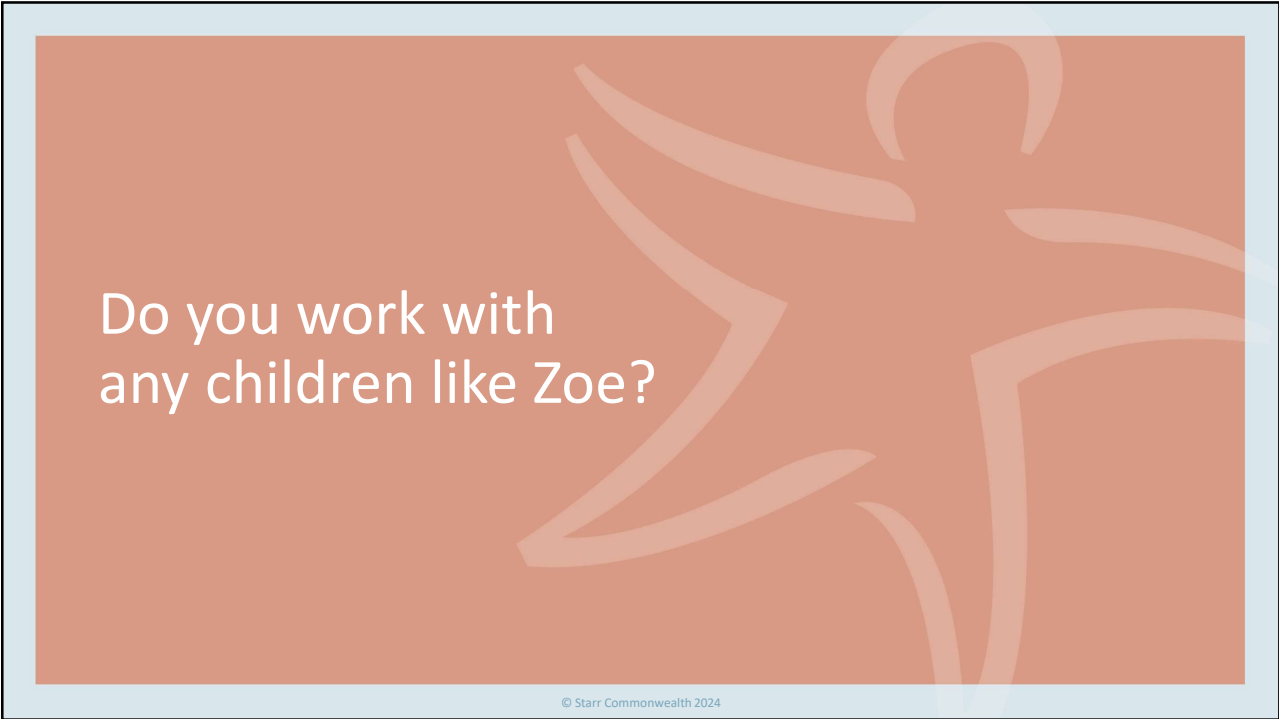
VIDEO
Zoe Remembers

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How can we help?

Behavior support plan

Private logic and Universal Needs

Rethinking traditional discipline approaches

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How can we help?

Use Behavior Support Plans to:

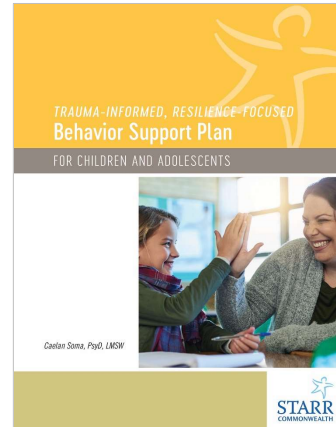
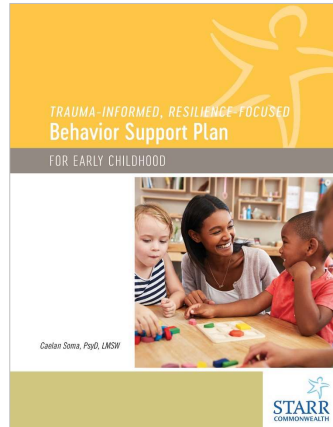
- Understand **Private Logic**
- **Assess Universal Needs**
- Support Deficits in **Universal Needs**
- Normalize Symptoms and Reactions
- Teach and Practice
 - Emotional Awareness
 - Emotional Regulation
 - Encourage Expression



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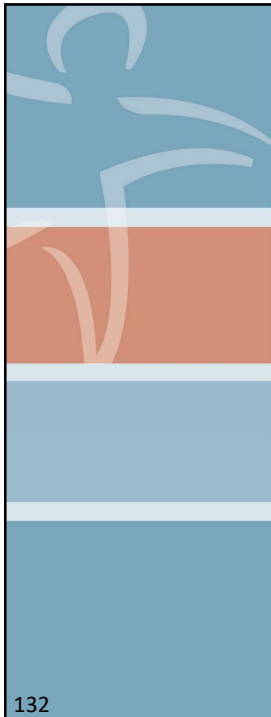
Behavior Support Plans



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How to Complete a Trauma-Informed & Resilience-Focused Behavior Support Plan

- **Step 1:** Function of behavior Assessment (Part A and Part B)
- **Step 2:** Private Logic (PL) Assessment
- **Step 3:** Universal Needs (UN) Assessment (Parts 1 & 2)
- **Step 4:** Review of Function of Behavior Assessment to connect PL and UN to Function of Behavior
- **Step 5:** Behavior Support Plan – Strategies to support needs
- **Step 6:** Behavior support plan at a glance
- **Step 7:** Evaluation

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Behavior Support Plan – Step 1

Function of Behavior Assessment

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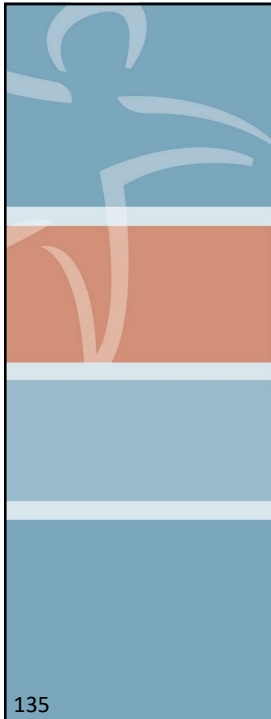
ACTIVITY

Select your Student

- In small groups, select a student you wish to use as a case example for the activities within this entire step.

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Step 1: Function of Behavior Assessment

Child's Name _____ Date _____

1. What are this child's challenging symptoms, reactions, behaviors? List no more than 3-5 to start.

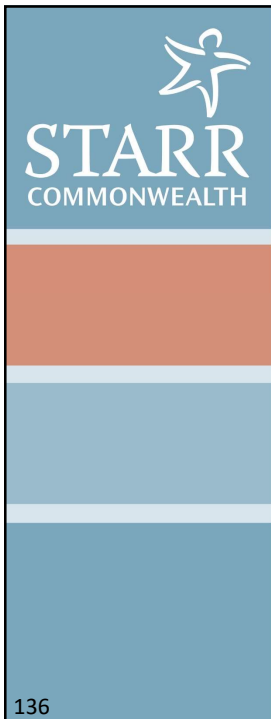
2. What are the goals? Do you want to see a reduction in behaviors, symptoms, or reactions? Reduction in frequency, duration, intensity? Be as specific as possible.

3. How do private logic and universal needs being met impact this child's symptoms, reactions, behavior?

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Key Mindset

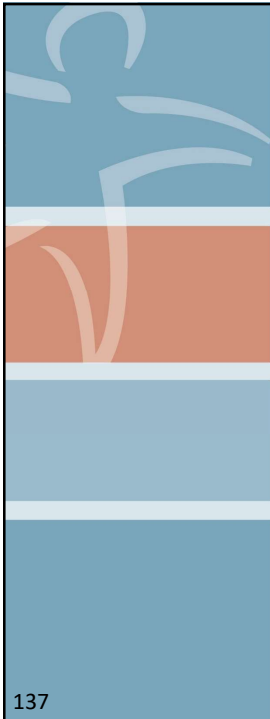
- Behavior is a language for an unmet need.



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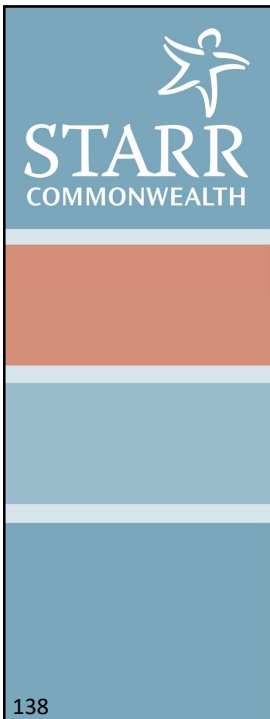
Maslow's Hierarchy of Needs



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Behavior = Clues and Symbols

- Behavior is the beginning, not the end.
- Behavior is a **CLUE**, as it is a traumatized child's way of communicating.
- It is highly unlikely that they will talk, reason, or use logic.
- Behavior can also be a **SYMBOL** for what the child has experienced or is experiencing (e.g., terror, lack of safety, worry, insecurity, anger, fear, guilt, shame, low self-worth, etc.)

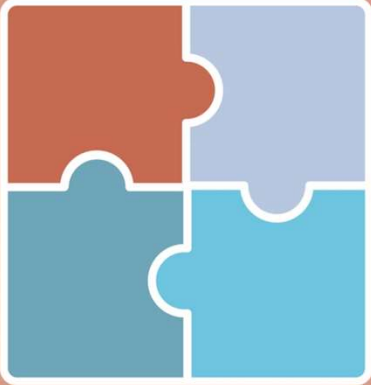


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ACTIVITY



GROUP DISCUSSION: Reframing Behavior

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Reframing Behavior

“He is just so mean.”

“She is always complaining.”

“It is like there is nobody home in there.”

“She can’t sit still for 5 minutes.”

“He can’t keep his mouth shut.”

“He loves to push my buttons.”

“She always has to get her way.”

“He’s better than this.”

“She isn’t even trying.”

“He ruined it for the rest of the class.”

“She can’t be trusted.”

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Behavior Support Plan – Step 2

Private Logic Assessment (2.1 & 2.2)

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What Matters Most...

- NOT only the symptoms but the experience of trauma and how that impacts the experience of:
 - Themselves
 - Others
 - Life following exposure to traumatic events
- If we truly want to help, we must first understand how children are experiencing what they have been exposed to.
- We can't assume we know.

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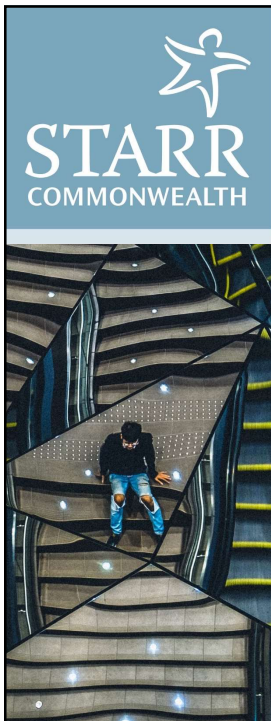


Trauma can disfigure and distort the way an individual sees themselves, others, and their life experiences.

Symptoms and behavior are not as important as **understanding** the individual's **experience of trauma** and how it has shaped their "private logic."

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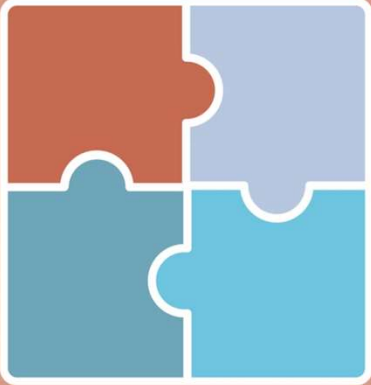
Private Logic

- Private logic is the way a person views themselves, others, and the environment around them as a result of their experiences.

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ACTIVITY



GROUP DISCUSSION:
Private Logic

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Private Logic

"I will do whatever I have to do to let you know that I am terrified."

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Private Logic

"I will do whatever I need to do in order to control you and your responses. I don't trust you and I need to survive."



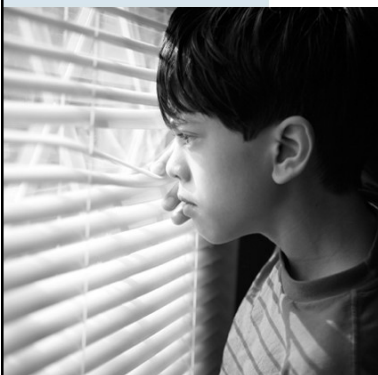
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Private Logic



"I will fight any experience, any activity, and any person that tries to control me because I am vulnerable to your abuse and your abandonment; it happened before and it will happen again."

148

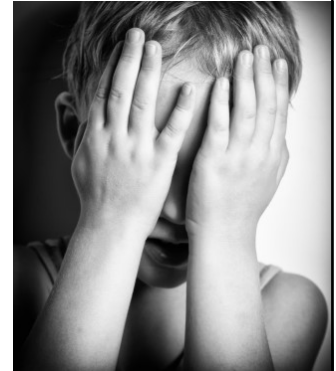
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Private Logic

"I will not do what you want me to do because, if I do and I do not do it well, you will ridicule me, berate me, shame me, abuse me, or abandon me."



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Private Logic

"I will ask an adult at school how to handle a situation I am having with my friend that seems overwhelming."

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Private Logic

"I need to go to the counseling office because I don't feel like I am ready to go to class."

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Private Logic

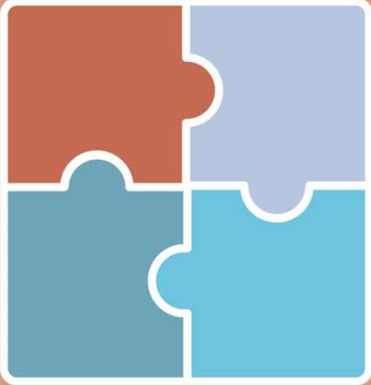
"Next time, I might need more practice before the day of the test."

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ACTIVITY



Private Logic Case Studies

- Staff Assessment
- Youth Self-Report

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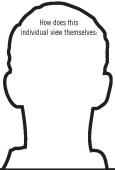
153

Private Logic Assessment – Staff (2.1)

Child's Name _____ Date _____
 Assessor _____ Check one: Parent Teacher Practitioner

Private Logic Assessment Parent/Teacher/Practitioner Report

Directions: Think about this child and complete the top half of the assessment using adjectives to describe the way you believe the child views themselves, others, and the world. Then answer the questions listed in the bottom half of the assessment.

How does this individual view others:	How does this individual view the world (classroom, school):
	
How does the child's private logic appear to impact the child's behavior, symptoms, or reactions?	
Based upon this individual's private logic, what does this individual need most from peers/siblings?	
From adults?	
From the community, etc.?	

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





154

Youth Self-Report (2.2)

Private Logic Assessment Youth Self-Report

Child's Name: _____ Date: _____

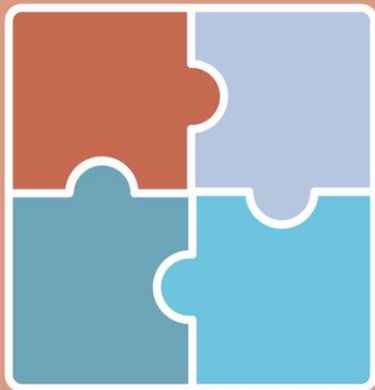
Use at least two words to describe:

Yourself  _____ _____	Your Family  _____ _____	Your Friends  _____ _____
School/Class  _____ _____	Community  _____ _____	The World  _____ _____

What I need most from...

Myself _____
Family _____
Friends _____
School _____
Community _____
The World _____

ACTIVITY



GROUP REFLECTION: Private Logic

- What did you learn during your small group Private Logic assessments?

Behavior Support Plan – Step 3

Universal Need Assessment (Student and Adult Reports)

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Assessing Universal Needs



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BELONGING

Milestone Met	Still Developing/Not yet Developed	
Attached	Attention Seeking	Alienated
Able to form and keep friendships	Clingy	Withdrawn
Cooperative	Craves Approval	Affectionless
Has close healthy relationships	Promiscuous	Rejected
Trusts Others	Gang Involvement	Suspicious

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MASTERY

Milestone Met	Still Developing/Not yet Developed	
Achieves Often	Overachiever	Achieves below potential
Problem-solver	Cheats	Unmotivated/"Lazy"
Creative	Delinquent skills	Avoids risks
Resilient	Repeats tasks over and over	Gives up easily
Motivated	Overcompetitive	Failure-oriented

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INDEPENDENCE

Milestone Met	Still Developing/Not yet Developed	
Autonomous	Rebellious	Lacks Confidence
Self-control	Overly controlled	Lacks control
Assertive	Manipulative	Easily misled
Responsible	Reckless/Macho	Irresponsible
Leadership Skills	Bully	Powerless

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GENEROSITY

Milestone Met	Still Developing/Not yet Developed	
Selfless	Follows others	Not sociable
Concern for others	Forces help on others	Inflated sense of self-importance
Caring	Overly involved	Not willing to accept responsibility for actions
Compassionate	Overly indulgent	Easily misled
Motivated Empathetic	Hardened	Lying

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ACTIVITY



Universal Needs Assessment Self-Report

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Universal Needs Assessment Self Report (3.1) page 1

Universal Needs Assessment - Part One
 The universal needs for all individuals are belonging, mastery, independence and generosity.
 Directions: Check each box that you believe applies to the way the student perceives their life. All checks represent strengths and resources for this student.

<p>BELONGING</p> <p>Family</p> <p><input type="checkbox"/> I get along well with my parent. <input type="checkbox"/> My parent wants to know where I am. <input type="checkbox"/> I feel very close to some adult in my family. <input type="checkbox"/> My family often shows that they love me.</p> <p>School</p> <p><input type="checkbox"/> I feel safe in school. <input type="checkbox"/> Students feel like they belong at school. <input type="checkbox"/> Teachers treat students fairly. <input type="checkbox"/> There is at least one adult in school I trust.</p> <p>Peers</p> <p><input type="checkbox"/> I have a close friend I can trust. <input type="checkbox"/> My friends accept kids who are different. <input type="checkbox"/> My parents approve of most of my friends. <input type="checkbox"/> Most kids I know are kind to others.</p> <p>INDEPENDENCE</p> <p>Self-Regulation</p> <p><input type="checkbox"/> I can keep calm when I get overwhelmed. <input type="checkbox"/> I control my temper and emotions. <input type="checkbox"/> I am learning to think before I act. <input type="checkbox"/> My sense of humor gets me through hard times.</p> <p>Self-Efficacy</p> <p><input type="checkbox"/> I am confident and feel in charge of my life. <input type="checkbox"/> I can give my opinion even if others disagree. <input type="checkbox"/> I don't easily get discouraged if things go wrong. <input type="checkbox"/> If I have a problem or conflict, I usually can solve it.</p> <p>Self-Discipline</p> <p><input type="checkbox"/> I think for myself and am not easily misled by peers. <input type="checkbox"/> I usually get along well with the person in charge. <input type="checkbox"/> I have will, power and can stick to a difficult task. <input type="checkbox"/> I am developing life goals and planning my future.</p>	<p>MASTERY</p> <p>Strengths</p> <p><input type="checkbox"/> I usually pay attention in school. <input type="checkbox"/> I try to learn from my mistakes. <input type="checkbox"/> I am curious to learn new things. <input type="checkbox"/> People can become smart by trying hard.</p> <p>Supports</p> <p><input type="checkbox"/> My family is very interested in my school success. <input type="checkbox"/> My friends encourage me to do my best in school. <input type="checkbox"/> My teachers expect me to work hard and succeed. <input type="checkbox"/> My school has many opportunities for learning.</p> <p>Engagement</p> <p><input type="checkbox"/> Most of my school subjects are interesting. <input type="checkbox"/> I participate in sports, music, art, or hobbies. <input type="checkbox"/> I like to read a lot, even outside of school. <input type="checkbox"/> School teaches me skills that will be useful later in life.</p> <p>GENEROSITY</p> <p>Empathy</p> <p><input type="checkbox"/> It bothers me when people are mean to others. <input type="checkbox"/> If I do things that hurt others, I feel bad afterwards. <input type="checkbox"/> I can usually understand what others are feeling. <input type="checkbox"/> I can usually understand what others are thinking.</p> <p>Altruism</p> <p><input type="checkbox"/> I help a lot at home and with my family members. <input type="checkbox"/> If my friends are upset, I usually try to help them. <input type="checkbox"/> I try to forgive others rather than hold a grudge. <input type="checkbox"/> I like to volunteer to help others.</p> <p>A Caring Community</p> <p><input type="checkbox"/> In my family, we help one another through hard times. <input type="checkbox"/> Adults in my school really care about their students. <input type="checkbox"/> Students try to help others and make all feel welcome. <input type="checkbox"/> No one has the right to hurt anyone, and all should help.</p>
---	---

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Universal Needs Assessment Self Report (3.1) page 2

Universal Needs Assessment Self-Report Page 1 of 3

The universal needs for all individuals are belonging, mastery, independence, and generosity.

Child's Name _____ Date _____

Directions: In each of the categories check each box that you believe applies to you.

BELONGING

- Family**
- I get along well with my parent/caregiver.
 - My parent/caregiver wants to know where I am.
 - I feel very close to at least one adult.
 - My family often shows that they love me.

- School**
- I feel like I belong in school.
 - Individuals feel like they belong at school.
 - Teachers treat me fairly.
 - There is at least one adult in school I trust.

- Peers**
- I have a close friend I can trust.
 - My friends accept kids who are different.
 - My parents approve of most of my friends.
 - Most kids I know are kind to others.

Total number checked BELONGING

INDEPENDENCE

- Self-Regulation**
- I can keep calm when I get overwhelmed.
 - I control my temper and emotions.
 - I am learning to think before I act.
 - My sense of humor gets me through hard times.

- Self-Efficacy**
- I am confident and feel in charge of my life.
 - I can give my opinion even if others disagree.
 - I don't easily get discouraged if things go wrong.
 - If I have a problem or conflict, I usually can solve it.

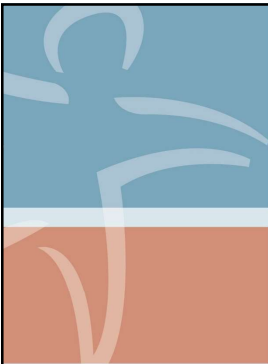
- Self-Discipline**
- I think for myself and am not easily misled by peers.
 - I usually get along well with the person in charge.
 - I can stick to a difficult task.
 - I am developing life goals and planning my future.

Total number checked INDEPENDENCE

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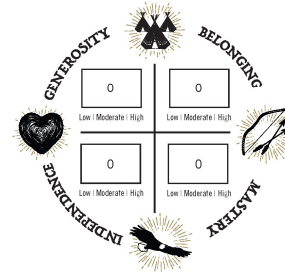


Universal Needs Assessment Self Report Scoring

Universal Needs Resilience Assessment Self-Report Scoring Form Page 3 of 3

Child's Name _____ Date _____

Directions: Enter total scores from each of the universal needs from the Self-Report Assessment worksheet in the corresponding boxes in the circle below. Refer to the Universal Needs Resilience Scoring Scale below and circle high, moderate, or low for each universal need to find the resilience score for each category.



Universal Needs Resilience Scoring Scale
HIGH RESILIENCE: 9-12 | MODERATE RESILIENCE: 5-8 | LOW RESILIENCE: 0-4

Total Resilience Scoring Scale
Directions: Enter the corresponding scores from the circle in the boxes below and add them together. The sum is the child's Total Resilience Score. Refer to the scoring scale below to determine high, moderate, or low resilience.

Belonging + Mastery + Independence + Generosity = TOTAL RESILIENCE SCORE

Low | Moderate | High

Resilience Scoring Scale
HIGH: 32-48 | MODERATE: 16-31 | LOW: 0-15

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Universal Needs Assessment Staff Report (3.2) page 1

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Universal Needs Staff Assessment

Child's Name _____ Date _____

Assessor _____ Check one: Parent Teacher Practitioner

Directions: Mark each box that describes this child. Add the total number of marks under each category list.

	- 1 MILESTONE MET -	- 2 STILL DEVELOPING / NOT YET DEVELOPED -
BELONGING	<input type="checkbox"/> Attached <input type="checkbox"/> Able to form and keep friends <input type="checkbox"/> Cooperative <input type="checkbox"/> Has close relationships <input type="checkbox"/> Trusts others <input type="checkbox"/> BELONGING-1 TOTAL	<input type="checkbox"/> Attention seeking <input type="checkbox"/> Clingy <input type="checkbox"/> Craves approval <input type="checkbox"/> Promiscuous <input type="checkbox"/> Gang involvement <input type="checkbox"/> BELONGING-2 TOTAL
MASTERY	<input type="checkbox"/> Achieves often <input type="checkbox"/> Problem solver <input type="checkbox"/> Creative <input type="checkbox"/> Resilient <input type="checkbox"/> Motivated <input type="checkbox"/> MASTERY-1 TOTAL	<input type="checkbox"/> Overachiever <input type="checkbox"/> Cheats <input type="checkbox"/> Delinquent skills <input type="checkbox"/> Repeats tasks over and over <input type="checkbox"/> Over competitive <input type="checkbox"/> MASTERY-2 TOTAL
INDEPENDENCE	<input type="checkbox"/> Autonomous <input type="checkbox"/> Self-control <input type="checkbox"/> Assertive <input type="checkbox"/> Responsible <input type="checkbox"/> Leadership skills <input type="checkbox"/> INDEPENDENCE-1 TOTAL	<input type="checkbox"/> Risky <input type="checkbox"/> Overly controlled <input type="checkbox"/> Manipulative <input type="checkbox"/> Reckless/macho <input type="checkbox"/> Bully <input type="checkbox"/> INDEPENDENCE-2 TOTAL
GENEROSITY	<input type="checkbox"/> Selfless <input type="checkbox"/> Concern for others <input type="checkbox"/> Caring <input type="checkbox"/> Compassionate <input type="checkbox"/> Empathic <input type="checkbox"/> GENEROSITY-1 TOTAL	<input type="checkbox"/> Follows others <input type="checkbox"/> Forces help on others <input type="checkbox"/> Overly involved <input type="checkbox"/> Overindulgent <input type="checkbox"/> Belittles or degrades self <input type="checkbox"/> Not sociable <input type="checkbox"/> Inflated sense of self importance <input type="checkbox"/> Not willing to accept responsibility for actions <input type="checkbox"/> Hardened <input type="checkbox"/> Lying <input type="checkbox"/> GENEROSITY-2 TOTAL

Adapted from L. Bredekamp, M. Brinkerting and S. Vasbjoerck. 1990. Reclaiming Youth At Risk: Our Hope for the Future.

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Universal Needs Assessment Staff Report (3.2) – page 2

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Universal Needs Staff Assessment Scoring Form

Child's Name _____ Date _____

Assessor _____ Check one: Parent Teacher Practitioner

Directions: Transfer the scores from the Universal Needs Staff Assessment report into the corresponding boxes below. Refer to the matrix for a description of each score based upon the characteristics you have used to describe the child. Characteristics may represent developmental milestones met or still developing for each universal need category.

	- 1 MILESTONE MET -	- STILL DEVELOPING / NOT YET DEVELOPED -
BELONGING	0-1 No to little characteristics demonstrating milestones for BELONGING. 2-3 Some characteristics demonstrating milestones met for BELONGING. 4-5 Many characteristics demonstrating milestones met for BELONGING. BELONGING-1 SCORE <input type="checkbox"/>	0-3 All or most developmental milestones for BELONGING MET. 4-6 Some developmental milestones for BELONGING MET but STILL DEVELOPING. 7-10 Student is still STILL DEVELOPING many milestones to have universal need of BELONGING met. BELONGING-2 SCORE <input type="checkbox"/>
MASTERY	0-1 No to little characteristics demonstrating milestones for MASTERY. 2-3 Some characteristics demonstrating milestones met for MASTERY. 4-5 Many characteristics demonstrating milestones met for MASTERY. MASTERY-1 SCORE <input type="checkbox"/>	0-3 All or most developmental milestones for MASTERY MET. 4-6 Some developmental milestones for MASTERY MET but STILL DEVELOPING. 7-10 Student is still STILL DEVELOPING many milestones to have the universal need of MASTERY met. MASTERY-2 SCORE <input type="checkbox"/>
INDEPENDENCE	0-1 No to little characteristics demonstrating milestones for INDEPENDENCE. 2-3 Some characteristics demonstrating milestones met for INDEPENDENCE. 4-5 Many characteristics demonstrating milestones met for INDEPENDENCE. INDEPENDENCE-1 SCORE <input type="checkbox"/>	0-3 All or most developmental milestones for INDEPENDENCE MET. 4-6 Some developmental milestones for INDEPENDENCE MET but STILL DEVELOPING. 7-10 Student is still STILL DEVELOPING many milestones to have the universal need of INDEPENDENCE met. INDEPENDENCE-2 SCORE <input type="checkbox"/>
GENEROSITY	0-1 No to little characteristics demonstrating milestones for GENEROSITY. 2-3 Some characteristics demonstrating milestones met for GENEROSITY. 4-5 Many characteristics demonstrating milestones met for GENEROSITY. GENEROSITY-1 SCORE <input type="checkbox"/>	0-3 All or most developmental milestones for GENEROSITY MET. 4-6 Some developmental milestones for GENEROSITY MET but STILL DEVELOPING. 7-10 Student is still STILL DEVELOPING many milestones to have the universal need of GENEROSITY met. GENEROSITY-2 SCORE <input type="checkbox"/>

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Behavior Support Plan – Step 4

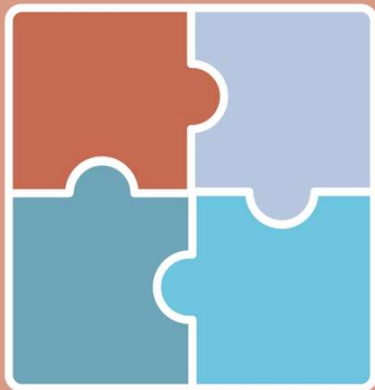
Return to Function of Behavior Assessment and Complete the third box
(Connect Behavior to PL and UN Assessments)

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ACTIVITY



DISCUSSION:
Return to Function of Behavior
Assessment

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How do many adults respond to “opportunities” with challenging children?

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Consider the Following

- Yes, they typically punish them...or they might...
 - Take things away?
 - Use Law & Order?
 - The “dis-ease” model?
 - Extinguish behaviors?

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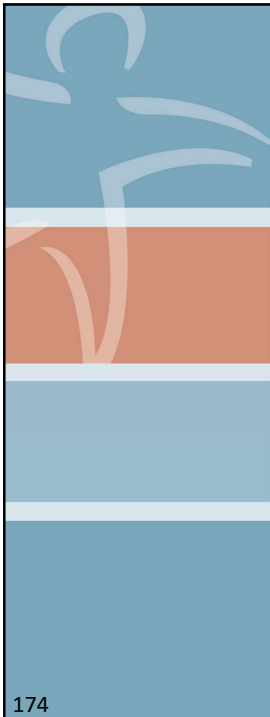
What might happen...

- Time-out/isolate from entire classroom/family/friends
- No choice time, take away recess, take away interactions with others
- Call family or Send home to “get them in trouble”
- Send to Principal’s office/Go talk to Mom, Dad, etc.
- Lose sticker on their chart or other “reward”

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Time-outs don't work

- Require children to regulate on their own.
- Withdraw connections.
- Do not provide opportunities for teaching coping skills.
- May further increase worry, fear and/or anger.

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Taking away recess/fun things with others

- Play, recess and social interactions are how preschoolers learn.
- This consequence isn't a natural or logical consequence to what the child "did".
- May be only opportunities for movement (which helps regulation).
- Little opportunity to practice making friendships/social skills.

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Call family/Send home

- Family also gets a message that their child is "bad" and may also perceive that they too, are "bad" or did something "wrong."
- Families relate calls from school to unpleasant events.
- Child feels like school does not want them, like them.
- Child doesn't feel like they belong and/or are connected to school.

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Send to principal's office/person of authority

- Damages relationships
- Sends a message to the child that the adult can't "handle" them, doesn't like them or doesn't want them in classroom/within their eyesight.
- Isolates child from others.
- Takes child away from learning and social opportunities.

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Lose a sticker on chart or other reward

- Embarrassing if entire class sees this occur.
- Isolating.
- Shame-based – instead of "I did something wrong or bad" child believes "I am bad or not valuable".
- Does not address underlying cause of behavior.
- Might trigger more fight/flight responses.
- Might trigger stress in other students.

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Natural Consequences

- Occurs without adult intervention.
- Requires no explanation but can be helpful to point out.

Examples:

- I push someone down – that friend doesn't want to play with me today.
- It is raining and I don't want to stand under an umbrella – I get wet.
- Child doesn't rest during rest time – child is tired in the afternoon.

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Logical Consequences

- Adult imposes
- Related to the behavior
- Needs an explanation in a respectful way
- Should be reasonable for the child's age and understanding.

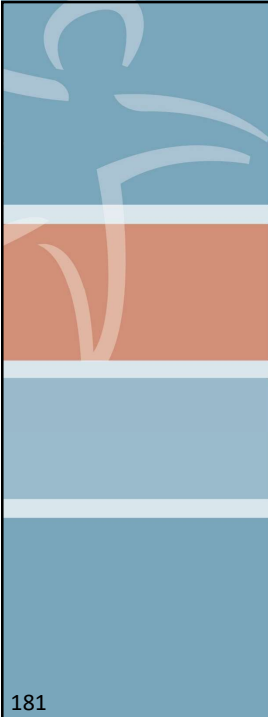
Examples

- A child is told to put away sidewalk chalk but doesn't – it rains, and the chalk is ruined.
- I break someone's block tower – I help them rebuild it.
- Waving around scissors – can't use them today

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Punishments

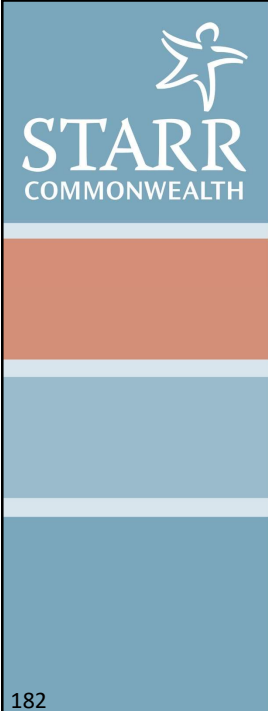
- **There is no place for this in trauma-informed schools.**
- **Punish – to inflict pain**
- Punishment belongs to an autocratic value system in which authority figures dominate and reward or punish their “inferiors.”
- Punishment does not produce lasting change, only shutdown and often greater powers of defiance, fear, anger and the flight/fight responses



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What can we do instead?

- See behavior as a clue/trauma response.
- Lean in – time in (Co-regulation)
- Keep yourself calm (Co-regulation)
- Notice when things are going well (on task 5:1)
- Assess for deficient universal need and then offer supports and experiences to meet those needs.
- Other simple reminders...

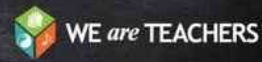
182

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Our job is to teach the students we have.
Not the ones we would like to have.
Not the ones we used to have.
Those we have right now.
All of them.

Dr. Kevin Maxwell



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You can't
TEACH CHILDREN
to behave better
by making them
FEEL WORSE.
When children
feel better, they
BEHAVE BETTER.

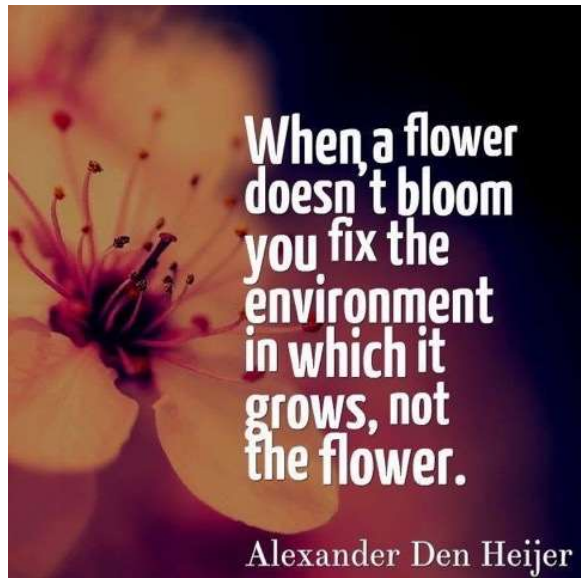
– Pam Leo

toddlerapproved.com

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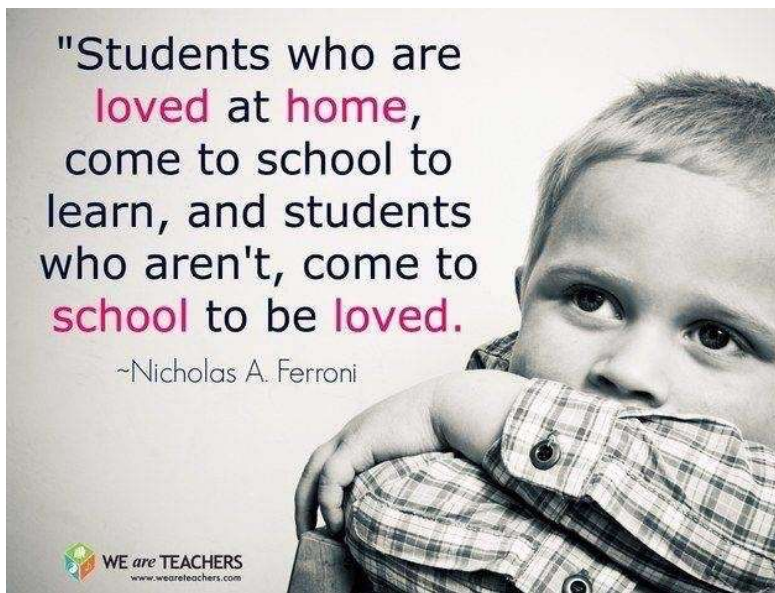
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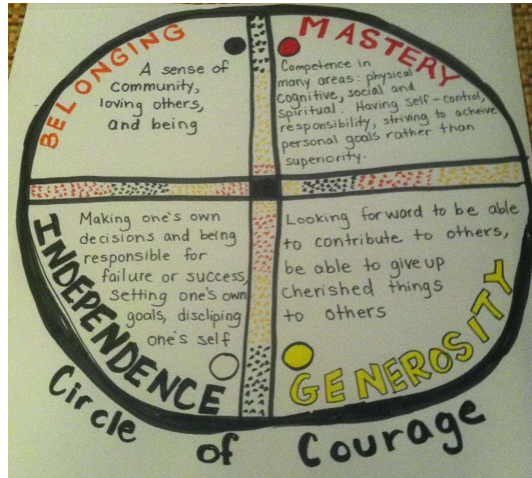
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The Good News: Repetition Works

The number of times a support needs to be repeated can be very frustratingly. However, **REMEMBER** – parts of the brain can't be changed unless they are activated.

Repetition is the only way change will occur.

When we support children, problematic behavior reduces!

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Behavior Support Plan – Step 5

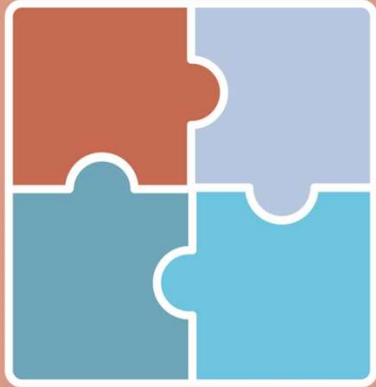
Strategies to Support Children by Universal Needs

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ACTIVITY



DISCUSS AND IDENTIFY: Strategies to Support Needs

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BELONGING



Trauma-informed, Resilience-focused Behavior Support Plan – Belonging

A trauma-informed, resilience-focused behavior support plan will not focus on changing behaviors but rather on providing what is needed based upon the individual's private logic and stated universal needs. For each of the universal needs, there are intervention strategies identified. Individuals will often require multiple strategies within each of the four categories. Directions: Identify the intervention strategies that will benefit the individual. Complete entries now associated with each intervention strategy identified.

What we will do	How we will do it/frequency	Who will be involved	Resources or support needed
<input type="checkbox"/> Greet the individual by name every day.			
<input type="checkbox"/> Ask the individual what they want to be called and if they have a nickname.			
<input type="checkbox"/> Make intentional connections for the individual with at least 2 adults and 2 peers.			
<input type="checkbox"/> Join a team/group.			
<input type="checkbox"/> Provide an abundance of opportunities for individual to connect with one another through structured and unstructured activities.			
<input type="checkbox"/> Role-model and practice valuing diversity.			
<input type="checkbox"/> Say, "I understand why you did that. Now let's work together to help you respond in a more positive way."			
<input type="checkbox"/> Identify individual's interests and hobbies.			
<input type="checkbox"/> Find something you have in common with the individual.			
<input type="checkbox"/> Offer regular but genuine praise and positive encouragement to the individual.			
<input type="checkbox"/> Teach and role play social skills.			
<input type="checkbox"/> Respond to individuals bids for connection.			
<input type="checkbox"/> Check-in with individual frequently.			
<input type="checkbox"/> Lunch with staff.			
<input type="checkbox"/> Pair up with peers who have similar interests to become experts.			
<input type="checkbox"/> Other			

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MASTERY



Trauma-Informed, Resilience-Focused Behavior Support Plan – Mastery

What we will do	How we will do it/frequency	Who will be involved	Resources or support needed
<input type="checkbox"/> Post and review community rules regularly.			
<input type="checkbox"/> Staff: "What am I teaching and reinforcing?"			
<input type="checkbox"/> Staff: "Do all individuals understand the rules and have the capability/social skills to carry them out?"			
<input type="checkbox"/> Teach tasks in small chunks individually or in groups with peers.			
<input type="checkbox"/> As individual understands content, celebrate the success and then move on.			
<input type="checkbox"/> Conduct a strengths inventory and offer more opportunities for the individual to engage in experiences that support that strength.			
<input type="checkbox"/> More computer/coloring or drawing/reading time.			
<input type="checkbox"/> Put in a group with similar strengths and allow them to work together.			
<input type="checkbox"/> If good at something, ask them to model that skill for others, or help another individual to learn it.			
<input type="checkbox"/> Report good news to stakeholders.			
<input type="checkbox"/> Connect individual with a mentor or tutor.			
<input type="checkbox"/> Re-teach if an individual does not understand.			
<input type="checkbox"/> Check-in with individual frequently.			
<input type="checkbox"/> Lunch with staff.			
<input type="checkbox"/> Teach study skills.			
<input type="checkbox"/> Point out strengths regularly–be specific.			
<input type="checkbox"/> Ask if they do chores at home–if not, parents should engage them in a few they can complete easily, when possible.			
<input type="checkbox"/> Involve in community activities, lessons and sports.			
<input type="checkbox"/> Other			

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INDEPENDENCE



Trauma-Informed, Resilience-Focused Behavior Support Plan – Independence

What we will do	How we will do it/frequency	Who will be involved	Resources or support needed
<input type="checkbox"/> Post and review community expectations rules regularly.			
<input type="checkbox"/> Provide schedule for individual.			
<input type="checkbox"/> Allow individuals input into daily schedule.			
<input type="checkbox"/> Pay careful attention to changes.			
<input type="checkbox"/> Give choices whenever possible.			
<input type="checkbox"/> Encourage individual to take on appropriate challenges.			
<input type="checkbox"/> Ensure individual knows it is acceptable to seek help – independence does not mean they are "on their own."			
<input type="checkbox"/> Teach and practice body awareness using body maps.			
<input type="checkbox"/> Teach and practice mind body skills (emotional regulation, coping skills, and relaxation).			
<input type="checkbox"/> Encourage problem solving.			
<input type="checkbox"/> Give the individual options where appropriate.			
<input type="checkbox"/> Assign age appropriate chores.			
<input type="checkbox"/> Allow movement in milieu (sitting on floor, at desk, taking a walk around room).			
<input type="checkbox"/> Open option to go to the comfort corner.			
<input type="checkbox"/> Create signal between you and individual to represent a need for a break, to use the bathroom, etc.			

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GENEROSITY



Trauma-Informed, Resilience-Focused Behavior Support Plan – Generosity

What we will do	How we will do it/frequency	Who will be involved	Resources or support needed
<input type="checkbox"/> Put the individual in charge of a job.			
<input type="checkbox"/> Assign task to help the staff (run an errand, take note to the office, sort papers).			
<input type="checkbox"/> Staff: "Do all individuals understand the rules and have the capability/social skills to carry them out?"			
<input type="checkbox"/> Service learning project.			
<input type="checkbox"/> Peer tutoring.			
<input type="checkbox"/> Peer mentoring.			
<input type="checkbox"/> Ask the individual to help you solve a hypothetical problem that someone their age might face.			
<input type="checkbox"/> Recognize and celebrate acts of kindness and generosity.			
<input type="checkbox"/> Create opportunities for individuals to give to others.			
<input type="checkbox"/> Practice empathy exercises.			
<input type="checkbox"/> Write a note or draw a picture to someone in need (elderly, children's hospital, veteran, military).			
<input type="checkbox"/> Give compliments every day.			
<input type="checkbox"/> Other			

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Behavior Support Plan – Step 6

At a Glance

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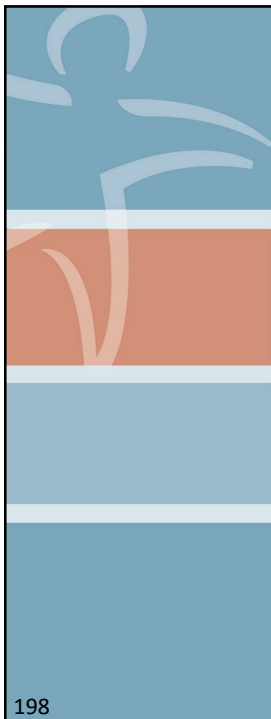
Step 6 - Behavior Support Plan - Summary at a Glance

Universal Need	Strategy
<input type="checkbox"/> Belonging <input type="checkbox"/> Mastery <input type="checkbox"/> Independence <input type="checkbox"/> Generosity	
<input type="checkbox"/> Belonging <input type="checkbox"/> Mastery <input type="checkbox"/> Independence <input type="checkbox"/> Generosity	
<input type="checkbox"/> Belonging <input type="checkbox"/> Mastery <input type="checkbox"/> Independence <input type="checkbox"/> Generosity	
<input type="checkbox"/> Belonging <input type="checkbox"/> Mastery <input type="checkbox"/> Independence <input type="checkbox"/> Generosity	

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Behavior Support Plan - Summary at a Glance

What we will do – when, where, how often?	Who will be involved	Resources or support needed	How will we measure progress?
			<input type="checkbox"/> Behavior graphs, tallies, log <input type="checkbox"/> Observation <input type="checkbox"/> Self-report <input type="checkbox"/> Interviews <input type="checkbox"/> Other
			<input type="checkbox"/> Behavior graphs, tallies, log <input type="checkbox"/> Observation <input type="checkbox"/> Self-report <input type="checkbox"/> Interviews <input type="checkbox"/> Other
			<input type="checkbox"/> Behavior graphs, tallies, log <input type="checkbox"/> Observation <input type="checkbox"/> Self-report <input type="checkbox"/> Interviews <input type="checkbox"/> Other
Summary:			

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Behavior Support Plan – Step 7

Plan and Measuring Progress

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Step 7 - Behavior Support Plan - Plan, Follow Up, and Measuring Progress

Behavior/Symptom/Reaction	How Will We Measure Progress?
	<input type="checkbox"/> Behavior Tally/Graph <input type="checkbox"/> Observation <input type="checkbox"/> Self-Report <input type="checkbox"/> Interviews <input type="checkbox"/> Other _____
	<input type="checkbox"/> Behavior Tally/Graph <input type="checkbox"/> Observation <input type="checkbox"/> Self-Report <input type="checkbox"/> Interviews <input type="checkbox"/> Other _____
	<input type="checkbox"/> Behavior Tally/Graph <input type="checkbox"/> Observation <input type="checkbox"/> Self-Report <input type="checkbox"/> Interviews <input type="checkbox"/> Other _____

Follow Up
 Date to reconvene _____ Follow up every _____ thereafter

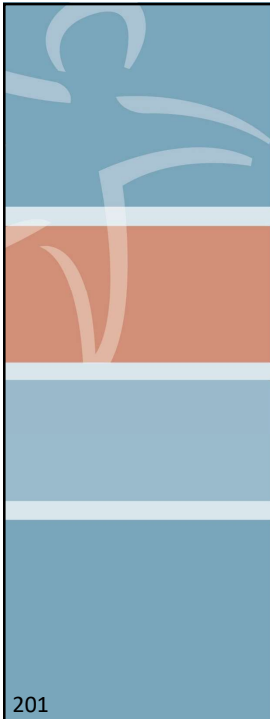
Measuring Progress
 Date _____ Individual's signature _____ Parent's signature _____
 Staff(s) signature(s) _____ Notes _____

 Date _____ Individual's signature _____ Parent's signature _____
 Staff(s) signature(s) _____ Notes _____

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In Summary...



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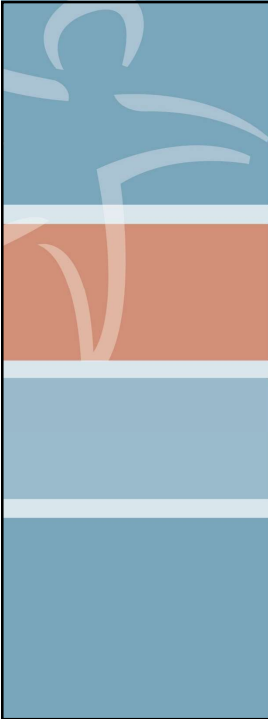
Brain Science continued

Deeper dive into brain science
Polyvagal theory

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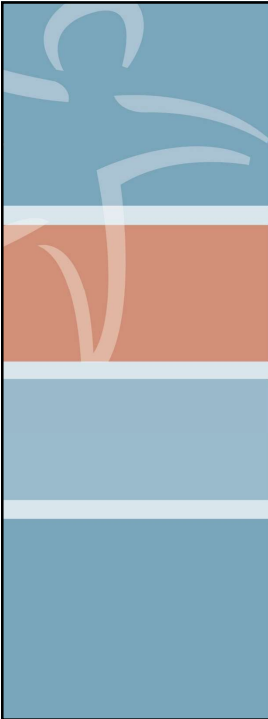
Trauma and Resilience are Body Experiences



We must engage the
body to heal.

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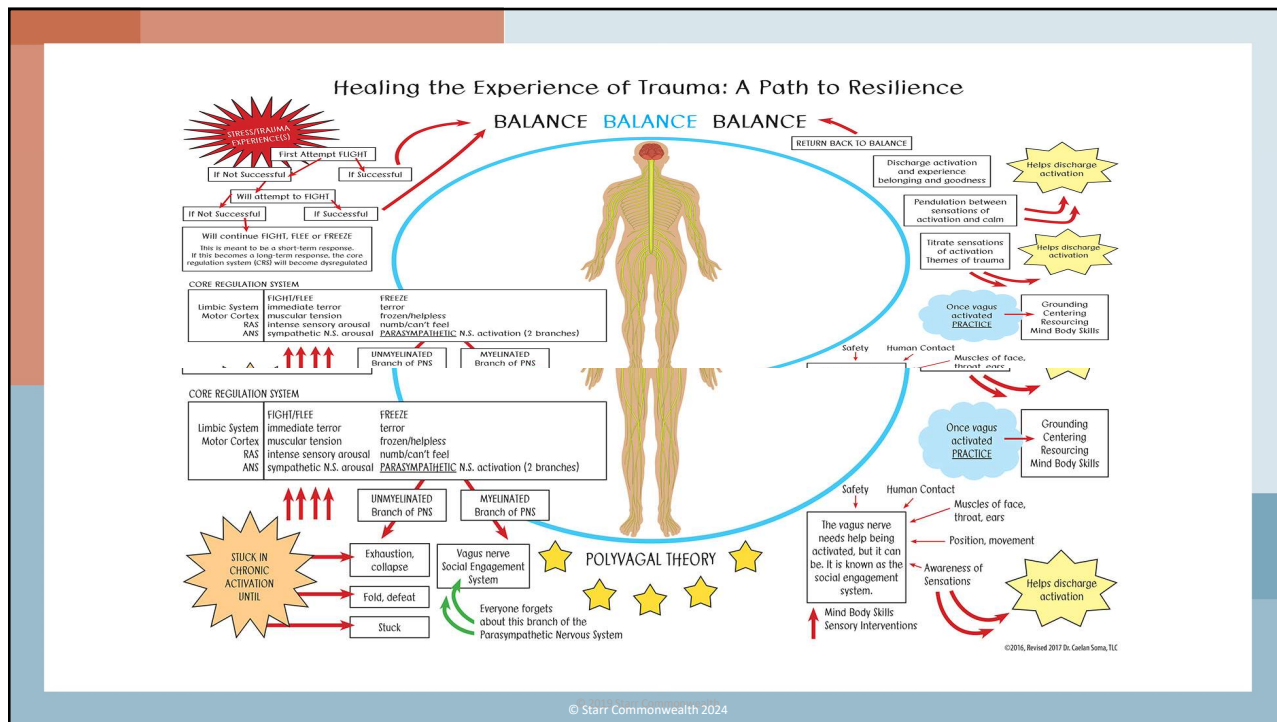


Brain Science Advances



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Remember the Brain?

Trauma Exposure → Amygdala is activated → ARREST (increased vigilance and scanning)

First, the person will try to FLEE (FLIGHT) →
 If successful = **COMPLETION and Balance**
 If the escape isn't successful...
 the person will try to FIGHT →
 If successful = **COMPLETION and Balance!**

If the fight isn't successful, the person will continue to fight and fight and fight until (exhaustion) FOLD or they will FREEZE

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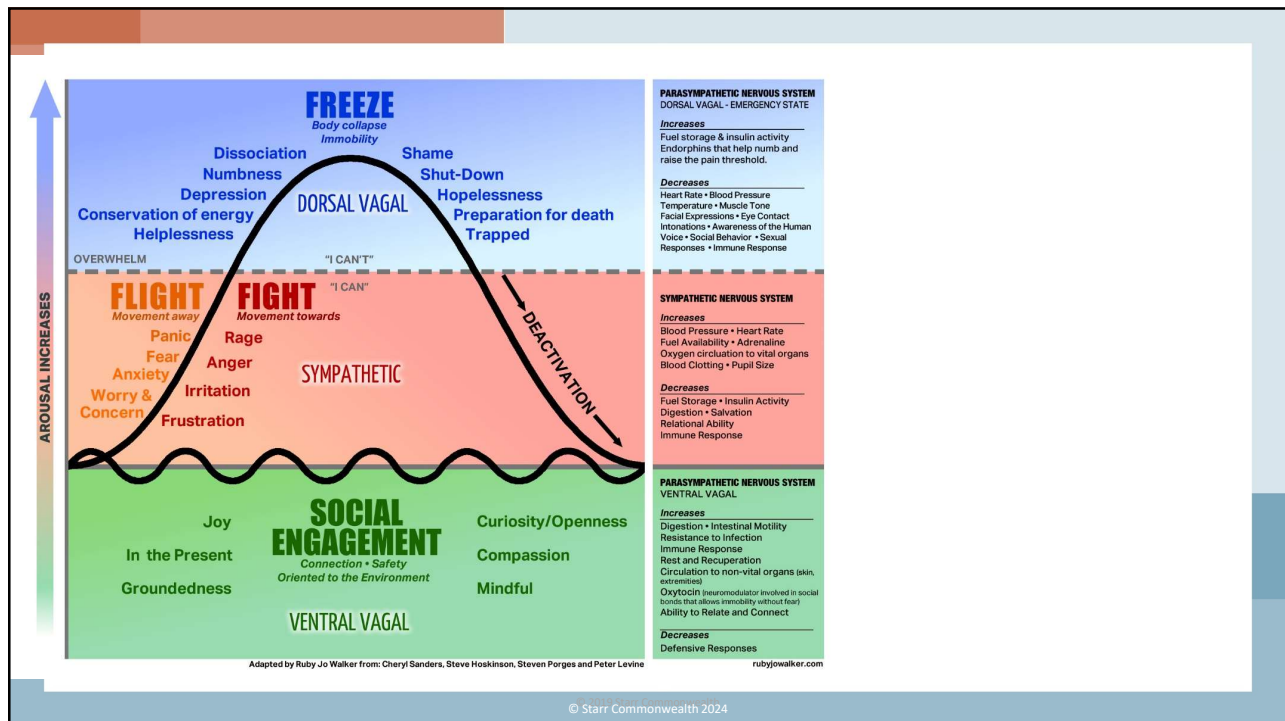
Arrest → Flight/Fight

Trauma triggers
EMERGENCY activation of
 the **Core Regulation
 Network (CRN)**

When prolonged and
 exaggerated → CRN
 becomes dysregulated
 (e.g., PTSD, depression,
 anxiety)

- Limbic System = Terror
- Motor System = Muscle tension
- Autonomic Nervous System (ANS) = Can calm or activate viscera, blood circulation, and hormonal activity
- Reticular Activating System (RAS) = Sensory arousal

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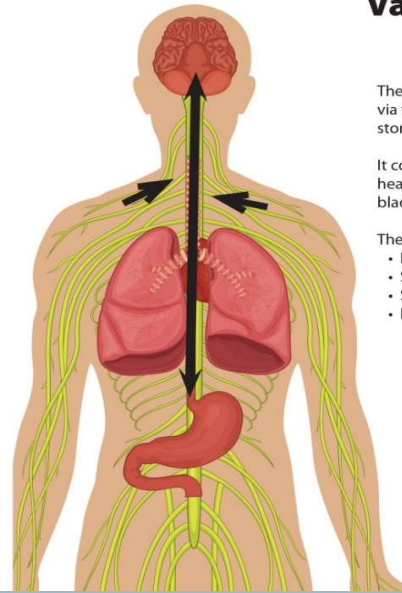


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The Polyvagal Theory

PNS – the same system that can shut us down and immobilize us??

It has another branch – the social engagement system – which ALSO governs goodness and belonging.



Vagus Nerve

The vagus nerve travels from the brainstem via the heart, lungs and esophagus to the stomach. It includes numerous branches.

It controls unconscious body reactions like heart rate, breathing, sweating and loss of bladder control under stress.

The vagus nerve orchestrates:

- Relaxation
- Self-soothing
- Social interaction reactions
- Fight/flight/freeze responses

Responds positively to tone quality.

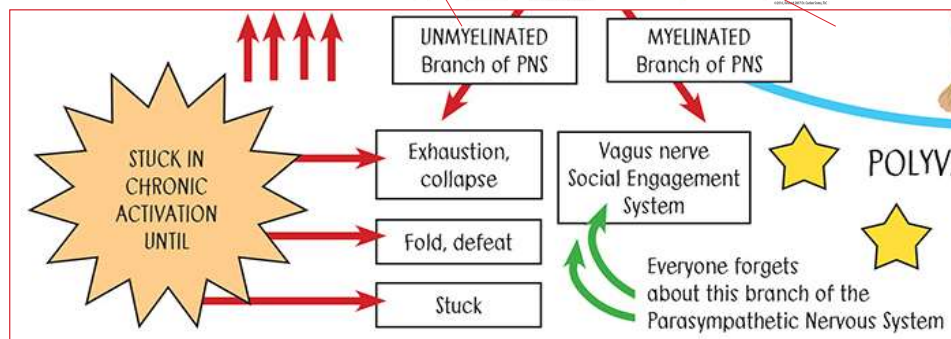
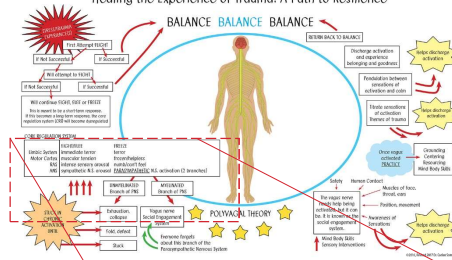
It is our "Reset Button" because it tells the body/brain that the threat is over – return to calm.

Repeated unregulated stress/trauma freezes the reset button.

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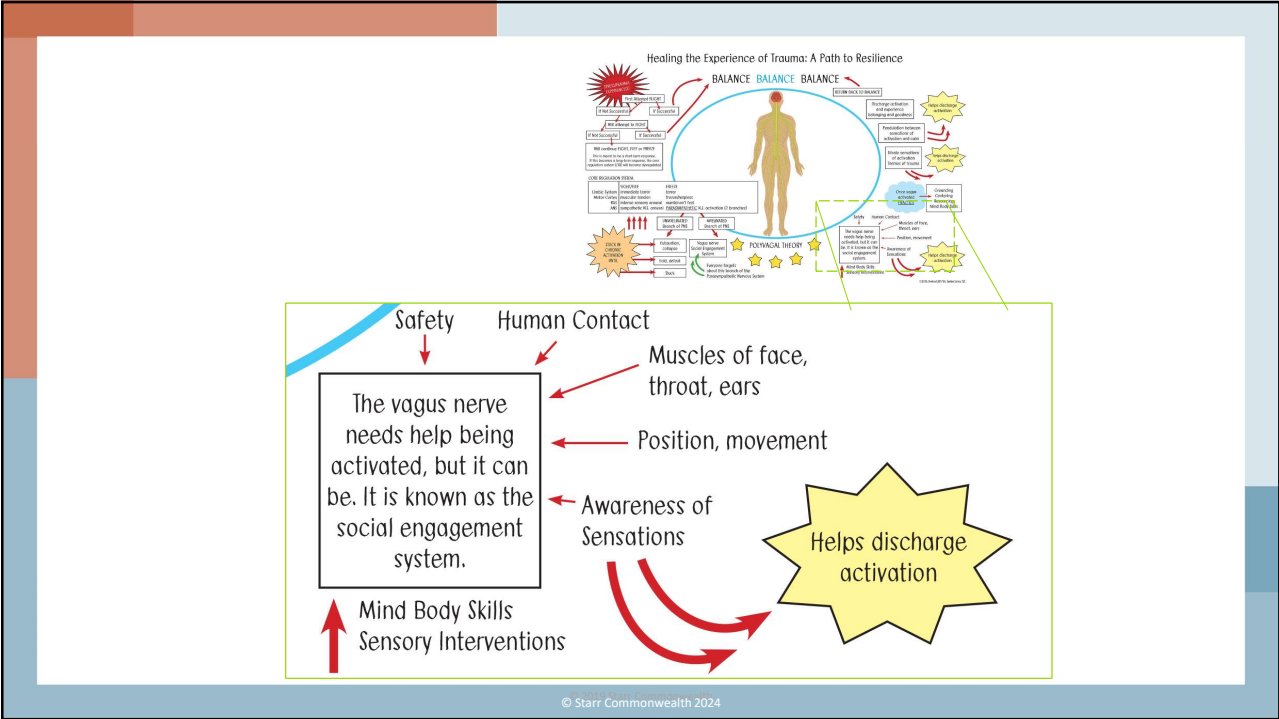
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Healing the Experience of Trauma: A Path to Resilience



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STARR COMMONWEALTH

Deep Brain Functions

- Sensation
- Stress Regulation
- Memory

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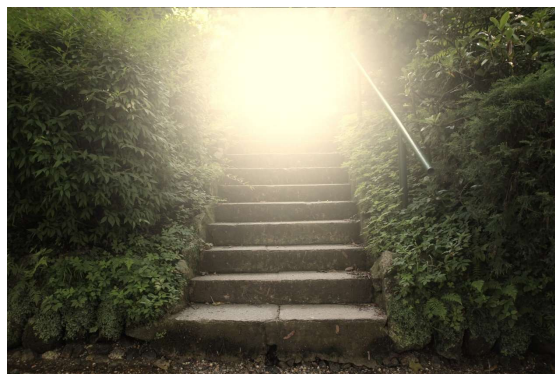
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What was the DANCE?



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What We Do Matters!



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NEAR Science

Neuroscience, epigenetics, ACEs, resilience
Health outcomes of positive experiences (HOPE)

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New Experiences Build New Brain Pathways



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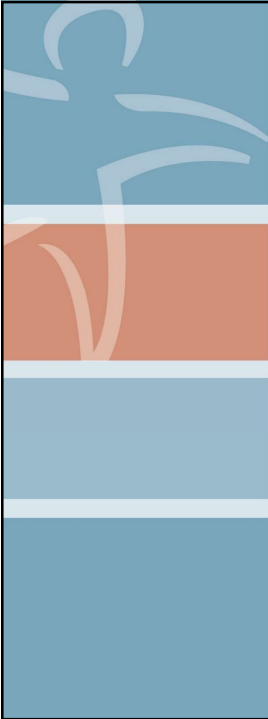
New Dance = New Experience = New Pathways




These three functions must “dance” together.

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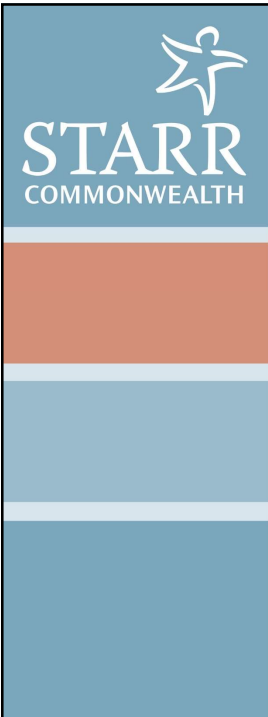
More Brain Science...



- Light it Up!!
- Anterior Cingulate Cortex

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"NEAR" Science

Cluster of fields of study that include:

- Neuroscience
- Epigenetics
- ACEs
- Resilience



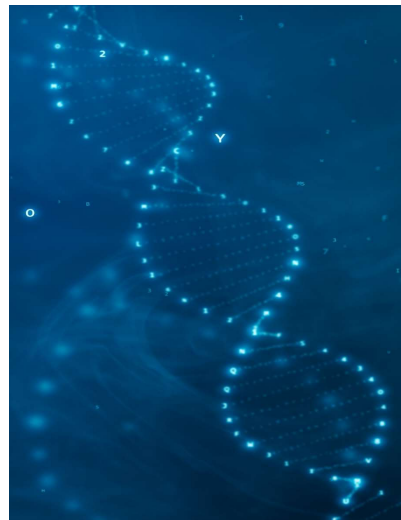
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Epigenetics

What is it?

- The additional information layered on top of the sequence that makes up DNA.
- Epi – “on top”
- Genetics – “DNA”

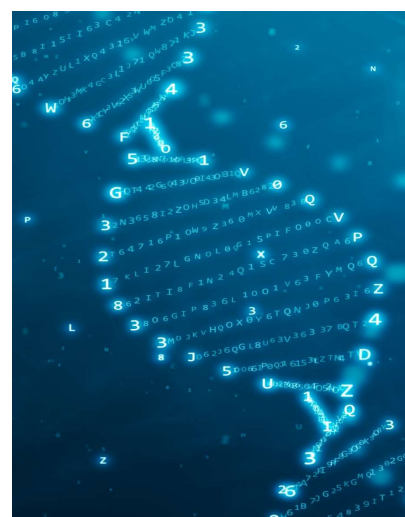


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Epigenetic “Marks”

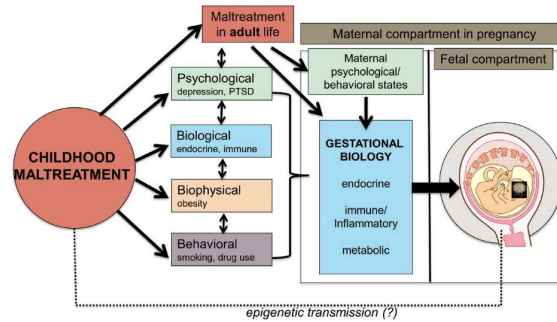
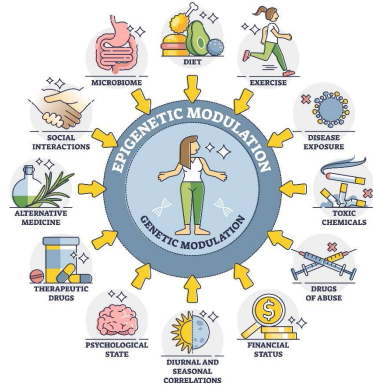
- DNA methylation and histone modifications (marks on DNA)
- Sort of like highlighting a book – epigenetic marks tell the proteins in the cells to process parts of DNA in certain ways:
 - Some marks of like activate the proteins
 - Some marks shut down the proteins
 - The marks are not fixed and can change through the lifetime and in response to outside influences



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Which came first, the chicken or the egg?



Environmental exposures, stresses, diet, and lifestyle can all induce epigenetic changes that determine whether genes are turned on or off.

From article on Journal of the American Academy of Child & Adolescent Psychiatry website at: [https://www.jaacap.org/article/S0890-8567\(17\)30105-3/fulltext](https://www.jaacap.org/article/S0890-8567(17)30105-3/fulltext)

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Experiences Matter

Any outside influence that can be detected by the body has the potential to cause epigenetic modifications.

- Chemicals, lifestyle factors, experiences

Examples

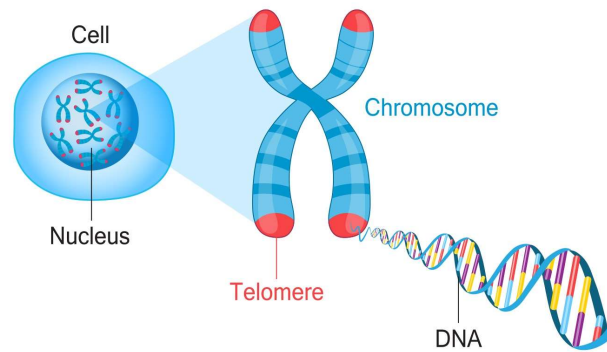
- BPA exposure → cancer, disease
- THC exposure in mother → predisposition to heroin addiction of child
- EXERCISE → changes to fatty tissue and muscle
- STARVATION in parent → diabetes, cardio-vascular disease

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Telomeres

A telomere is a region of repetitive nucleotide sequences at each end of a chromosome, which protects the end of the chromosome from deterioration or from fusion with neighboring chromosomes.



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Telomeres

Normal to shorten with age, but they decline significantly with exposure to:

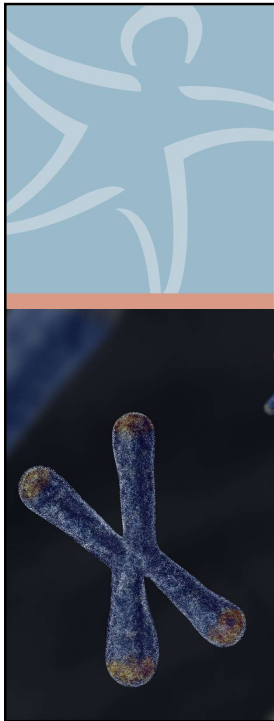
- Stress
- Chronic inflammation
- Depression
- Emotional trauma
- Physical trauma

Decline can be slowed down (maintain) and we can even lengthen telomeres significantly through:

- Diet (healthy, whole foods)
- Exercise (moderate)
- Stress management
- Mindfulness (Mind-Body Skills)
- Connections/social support

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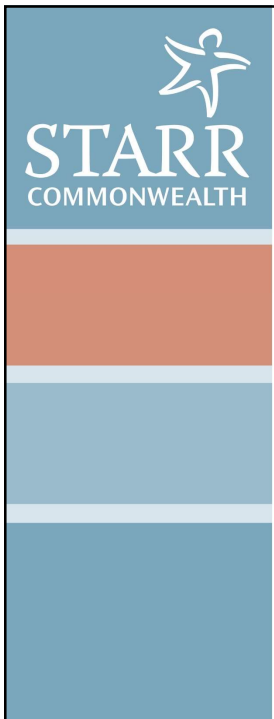


“Adults who have experienced stress as children appear to have an increased risk of shorter telomeres.”

According to research published in the Proceedings of the National Academy of Sciences.

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Epigenetics = More Awareness & Hope!



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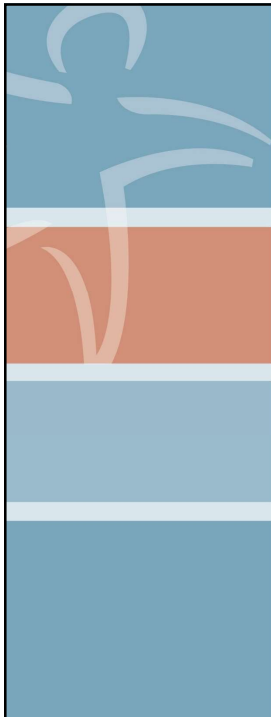
Health Outcomes of Positive Experiences

- A framework that studies and promotes positive child and family well-being.
- There is a possibility to flourish, even in the face of adversity.
- Research supporting health outcomes of positive experiences is **SIGNIFICANT!**



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One More Time: Trauma and Resilience are Both Body Experiences



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Emotional Awareness

- What is my experience in the here and now?
- What messages is my body sending me?



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Feelings & Sensations



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Sensation Words

Examples Include:

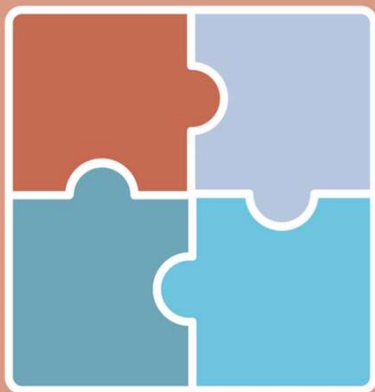
Dense	Breathless	Thick
Flowing	Fluttery	Nervous
Queasy	Heavy	Electric
Numb	Full	Spacey
Tight	Hot	Icy
Light	Cold	Hollow
Wooden	Sweaty	Tingly
Suffocating	Knotted	Energized
Blocked	Fast	Calm

(Levine, 2008)

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ACTIVITY



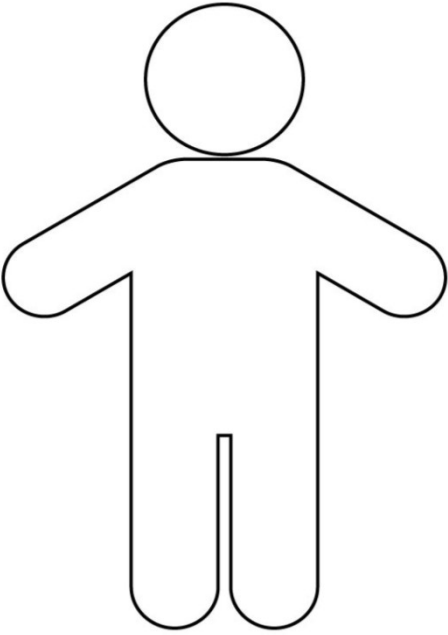
Body Scan

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Body Scan



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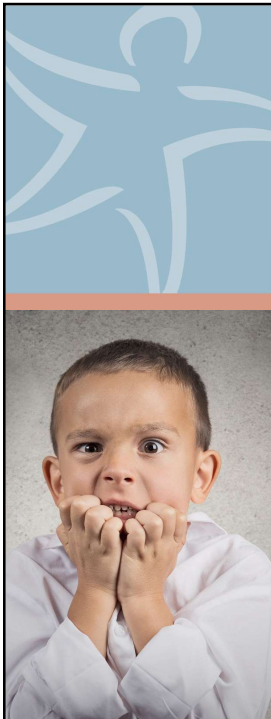
Emotional/Self Regulation

- The development of the ability to maintain a well-regulated emotional state to coping with everyday stress.
- Increasing **awareness** and differentiation of experiences, emotions and body sensations is helpful – this **helps improve emotional regulation** and limits reactivity.



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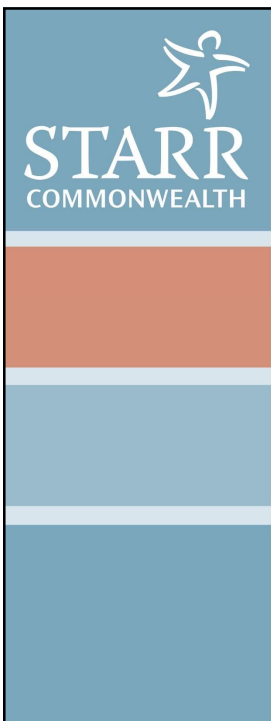
Maladaptive Behaviors

What do our kids do to help them **manage their overwhelming feelings and sensations?**

These have become their “go to” ways to cope.

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Emotional Regulation

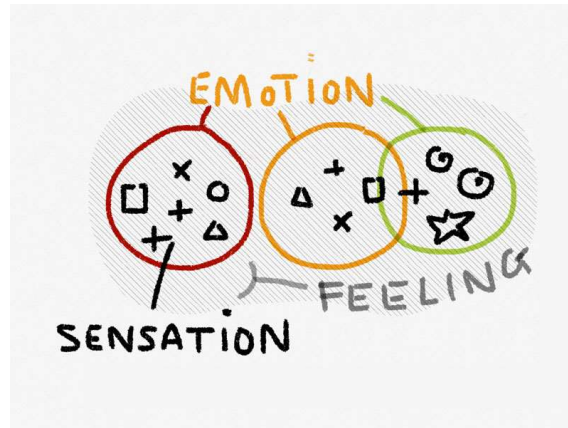
Use **sensory-based** and **mind-body skills** to teach and practice emotional awareness and regulation with students.



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Examples of How Behaviors are Driven by Body Sensations



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Fighting/Aggression

Not in touch with body

- "I feel so angry, I fight!"
- "I'm angry, I need to fight, break something, hurt someone."

In touch with body

- "I notice my arms and fists feel tight and, even though it would release the tension to fight, I could try to do push-ups first."
 - "Fighting isn't the only thing that might help. Since I feel this tightness in my arms and I feel tension in my fists, maybe I can try another strategy that I have practiced before to release these sensations like running or lifting weights."

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Eating Disorders

Not in touch with body

- "I feel empty, so I eat."
- "I'm empty, I need to eat. I eat, I still feel empty, I need to eat more (shop more, drink more...)"

In touch with body

- "I feel empty, but is it true hunger for food?"
- "It isn't my stomach that is empty but more in my chest – I think it is loneliness that I feel. Food won't help me fill up loneliness but calling a friend or writing a letter might!"

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Self-Harm

Not in touch with body

- "I feel stressed, so I cut myself."
- "I'm stressed, its inescapable. I need to cut, I need some relief, I need to 'check out'."

In touch with body

- "I notice that I am feeling overwhelmed, I need to relieve the stress."
- I feel distressed and overwhelmed. I feel the stress building up in my chest, I can turn on music that I love and play it super loud!"

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Awareness → Expression → Regulation

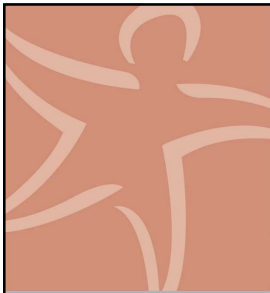
Connecting to Body (Awareness)

Sensory Based Interventions (Expression and Regulation)



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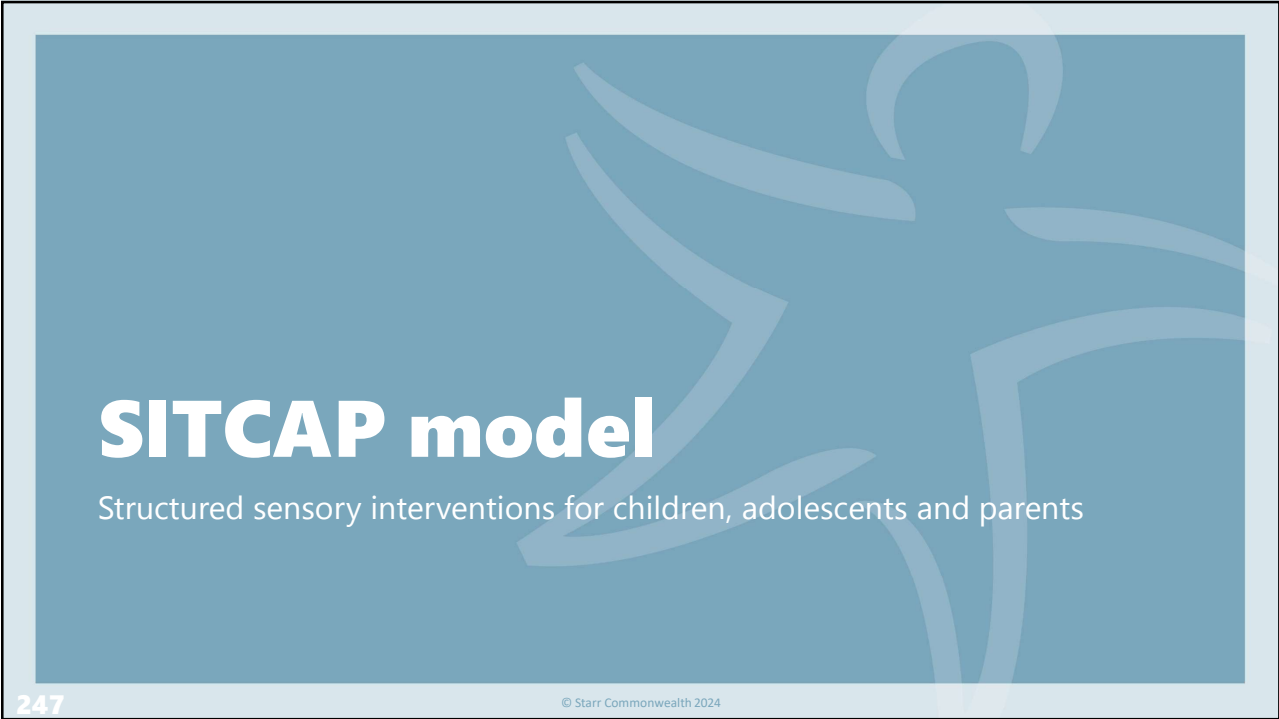
Allow for Expression

- Journaling
- Drawing
- Music
- Poetry
- Photography
- Painting
- Movement
- Dance
- Recreation and play
- Reading
- Collage
- Pottery



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A presentation slide with a blue background and a faint silhouette of a person with arms raised. The text is white and centered.

SITCAP model
Structured sensory interventions for children, adolescents and parents

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A slide featuring the STARR Commonwealth logo on the left and a photograph of three wooden blocks spelling 'LET'S GET STARTED' on the right. The logo consists of a stylized figure above the text 'STARR COMMONWEALTH'. The photograph shows three light blue wooden blocks with black and red text on a grey fabric background.

STARR
COMMONWEALTH

LET'S
GET
STARTED

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SITCAP®

Structured Sensory
Interventions for
Traumatized
Children,
Adolescents, and
Parents



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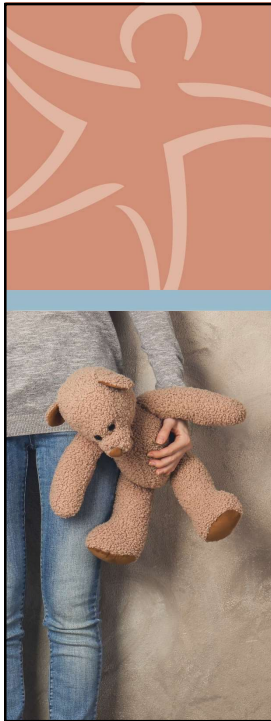
SITCAP®

Structured Sensory
Interventions for
Traumatized
Children,
Adolescents, and
Parents



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About SITCAP® SAFETY

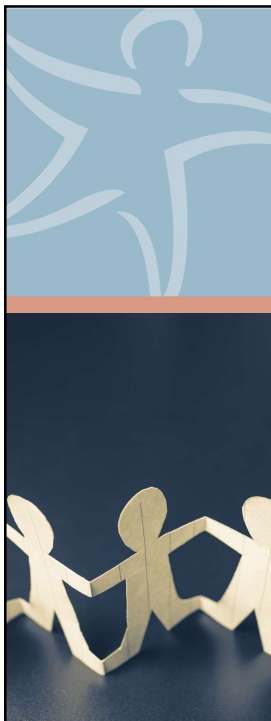
The core principle of SITCAP® is to provide children with the opportunity to **safely revisit and rework the primary subjective experiences of trauma** within the sensory (not cognitive) context in which they are experienced, stored, and remembered.

Why take this approach?

By using this model, some PTSD symptoms, grief, and trauma related mental health reactions can be significantly reduced, the gain sustained, and their resilience developed and/or strengthened in ways that support growth.

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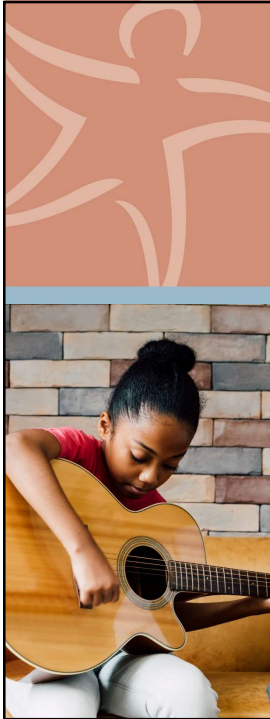


About SITCAP® New Experiences

The SITCAP® process directs itself at **actively involving children in new experiences in order for them to build new connections** related to what they are learning about themselves, trauma and resilience as a result of the sensory-based activities they engage in when participating in SITCAP®.

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About SITCAP[®] Sensory Interventions

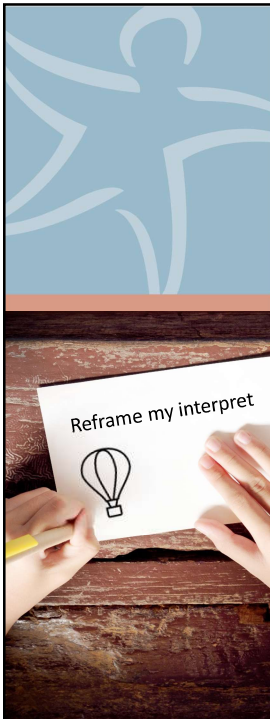
Trauma experiences are **difficult to communicate through words** and are more easily described through sensory-based interventions.

Sensory-based interventions are non-language activities that help children convey the way they now see themselves, others and the world around them as a result of their trauma experiences.

Drawing, art, music, play, recreation, sports, theater, journaling – etc.

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About SITCAP[®] Regulate, Reorder, Reframe

The intervention process involves multiple sensory-based activities, which bring these sensory memories to life in a safe, contained context so they can **be regulated, reordered, and reframed in ways that support a resilience response** to future stressful, overwhelming, and terrifying experiences.

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Types of Trauma

Type 1 – Single exposure

Type 2 – One type of exposure that is repeated OR exposure to one or two different events

Type 3 – Developmental Trauma/Toxic Stress



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SITCAP® Model Programs

Draw me a picture you can tell me a story about:

- Sensory-based interventions
- Trauma themes
 - Exposure, create a narrative, cognitive reframing



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Remember the Dance!

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Exposure

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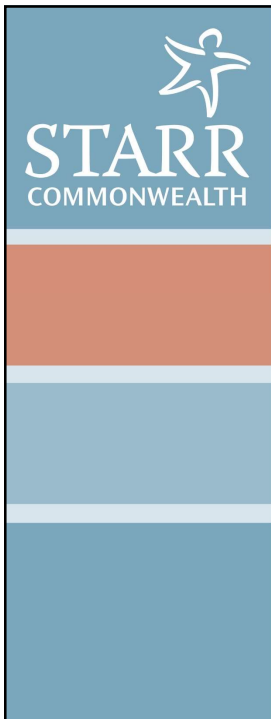


Why Drawing?

- Externalizes iconic images
- Puts experience outside of themselves
- Helps us **see it like the child sees it**
- Empowers the child to be an **active participant** in their healing
- Connection to body memories/sensations

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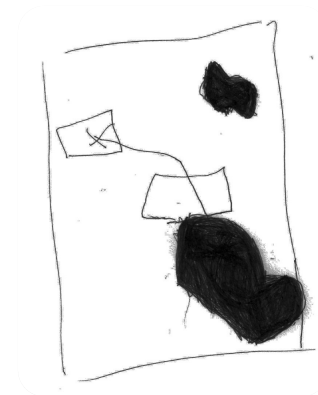
259



How Children Draw Does Not Matter


We are not here to interpret, judge, or analyze – the **drawing is only meant to provide a visual representation** of what the child experienced or continues to experience.

Symbols, shapes, etc. are fine.



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Trauma Narrative



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Pursing Details Matters

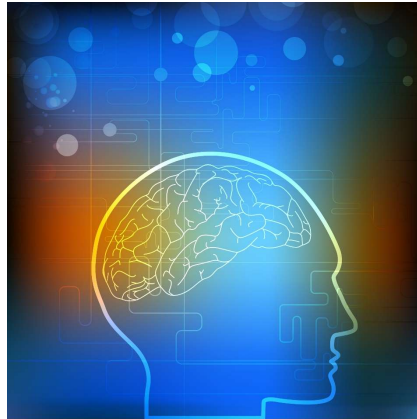
- **Details** are so important in the SITCAP® process.
- Whatever the child draws, they expect us to be **very curious** about every aspect of it (every line, scribble, shaded area, figure, object).
- Any one of these elements can provide us with the core at what shaped their private logic and is driving their behavior.

Tell me about this...
NOT, why did you draw this?

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Cognitive Reframing



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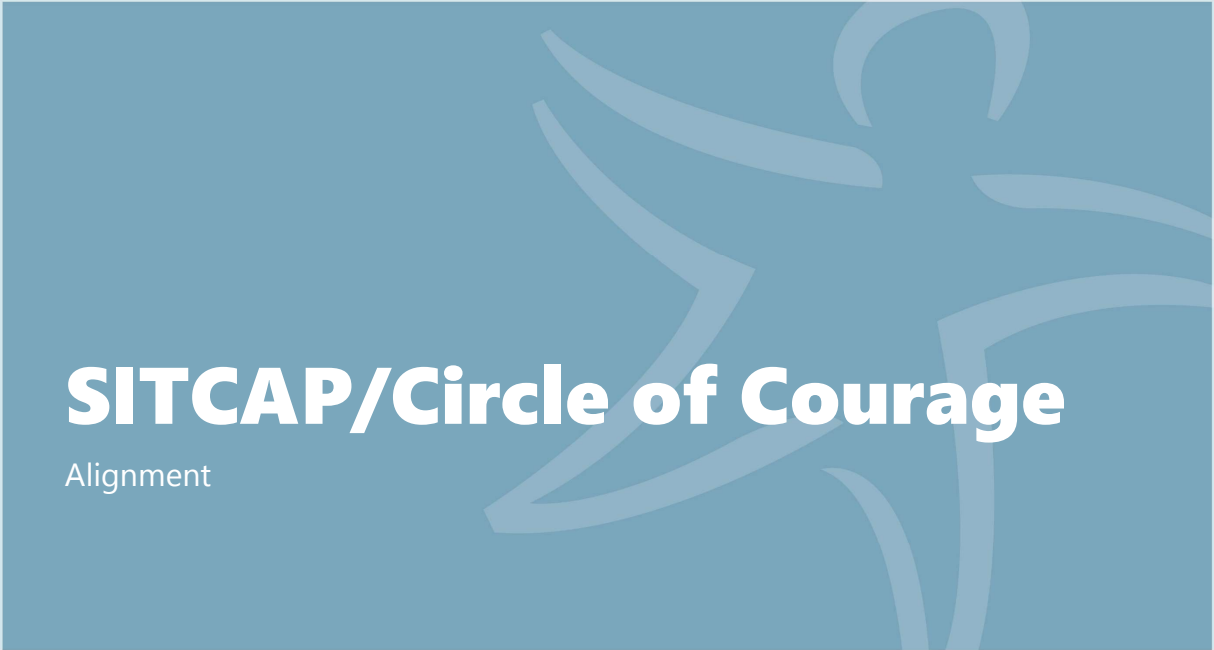
Cognitive Reframing

Directly reference how the child is subjectively experiencing what is happening or what has happened.

Reframing should be presented in a way that transforms trauma from something that is feared to **a resource that empowers the child** to see self, others, and life through a lens of hope, strength, and resilience.

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SITCAP/Circle of Courage

Alignment

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Restore & Nurture Universal Needs with SITCAP®



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Belonging

Attachment and Significance

“I am important to someone, and they want to know what my life is like, not only what is wrong with me.”

SITCAP® provides connectedness to the practitioner:

- The practitioner is continuously curious about the child’s world.
- Connections are strengthened when the practitioner becomes a witness to the child’s world by inviting them to draw.

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Mastery

Achievement and Competence

“For once I feel freedom from my terror –
I can manage what life sends my way.”

“There is more to me than just my stress and trauma...”

How can SITCAP® promote mastery?

- Opportunities to practice regulating reactions to extreme stress.
- Experiences to reframe cognitive understand of self – not as victims but as survivors.

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Independence

Autonomy and Power

“I have a choice.”

SITCAP provides opportunities for children to:

- Say yes or no.
- Choose which parts of their life they want us to enter.
- Choose when the intervention is over.

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Generosity

Altruism/Virtue

“I have value and I can help others.”

How can SITCAP® help children feel valuable?

- In SITCAP®, children learn they are not alone, and this helps them develop empathy for others.
- Self worth is experienced and strengthened.
- Their view of survivor always them to see themselves as valuable to the world.

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Personal Sensory Experience


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ACTIVITY: Personal Sensory Experience



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Sensory-based interventions

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This is Me



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I am poem

I am _____

I wonder _____

I hear _____

I see _____

I want _____

I am _____

I pretend _____

I feel _____

I touch _____

I worry _____

I cry _____

I am _____

I understand _____

I say _____

I dream _____

I try _____

I hope _____

I am _____

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Road Map from the Past Road Map to the Future

Worksheet 24 - Road Map to the Future

Road Map to the Future
Your hopes, dreams and goals:

Go to college
Be a nurse
Have family
Be married
Be happy

DO NOT ENTER

Three years from now:
College

One year from now:
Senior in High School
Cross Country Team

Four months from now:
Summer

Your Name: Ruby Today's date:

Keep going!
The sky is the limit!

Age: 65

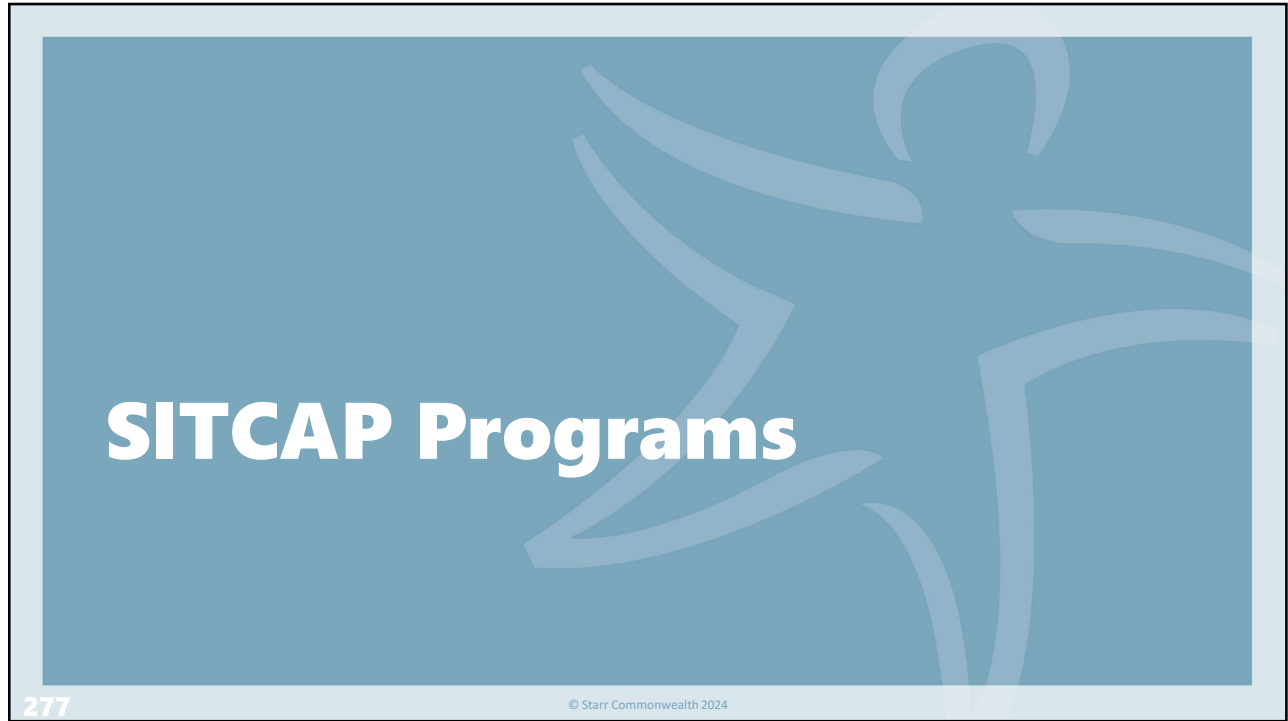
And further...
Finish College
Have a job at a hospital with kids
running races

Two years from now:
College

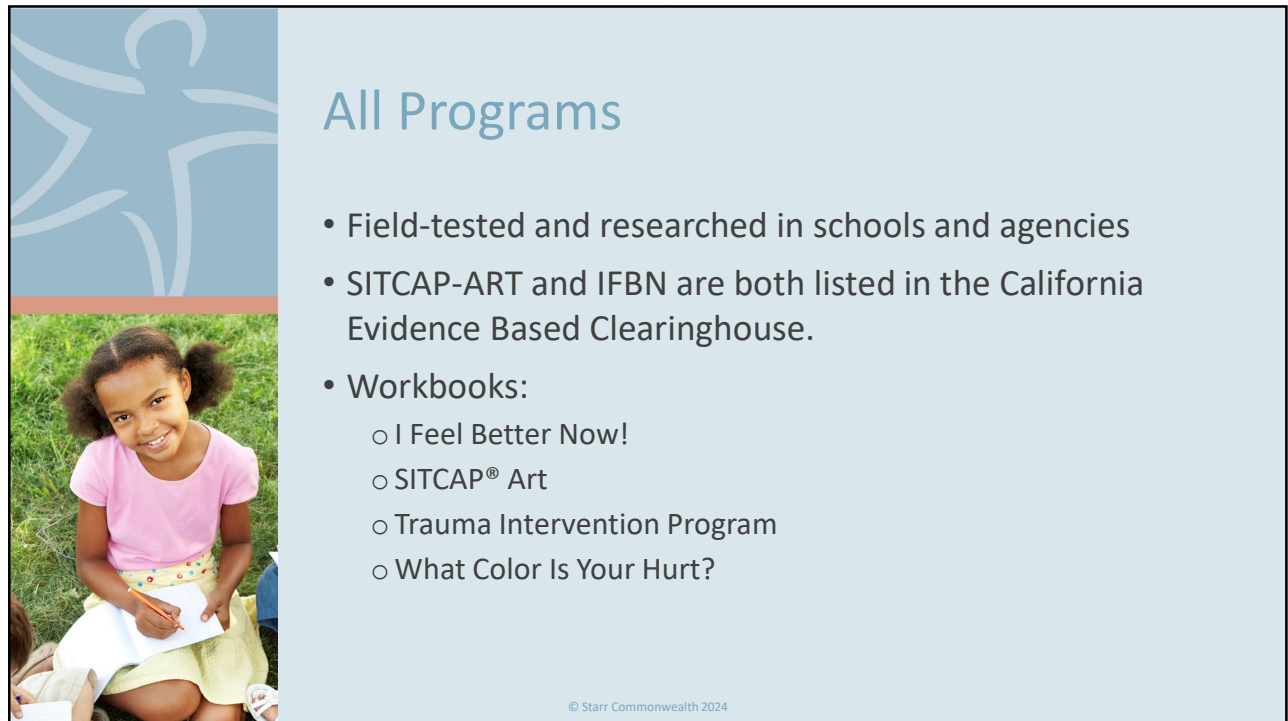
YOU ARE HERE NOW

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A light blue gradient background. On the left side, there is a vertical strip containing a white silhouette of a person with arms raised (top) and a photograph of a young girl with braids, wearing a pink shirt and a yellow skirt, sitting on the grass and smiling while holding a pencil and a piece of paper (bottom). The title "All Programs" is written in a large, blue, sans-serif font. Below the title is a bulleted list of program details. In the bottom right corner, the copyright notice "© Starr Commonwealth 2024" is visible.

All Programs

- Field-tested and researched in schools and agencies
- SITCAP-ART and IFBN are both listed in the California Evidence Based Clearinghouse.
- Workbooks:
 - I Feel Better Now!
 - SITCAP® Art
 - Trauma Intervention Program
 - What Color Is Your Hurt?

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SITCAP® Model Programs

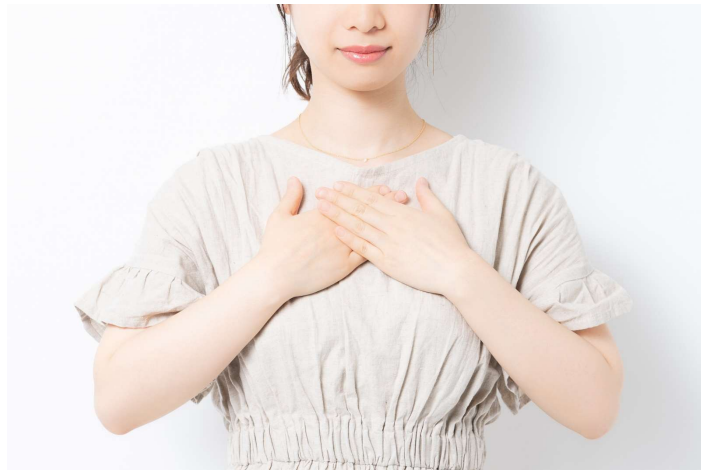
- Manuals and workbooks
- Themed sessions:
 - Objectives
 - Materials needed
 - Cognitive reframing statements
- Worksheets have a frame to keep the externalization (drawing) of the experience, sensations, and visual memories contained
- Child and Adolescent PTSD Questionnaires included in programs

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Bookend Sessions with Safety



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Activities Provide Ongoing Assessment

- You can repeat activities as often as you like
- This is a great way to assess and to show the child that life changes

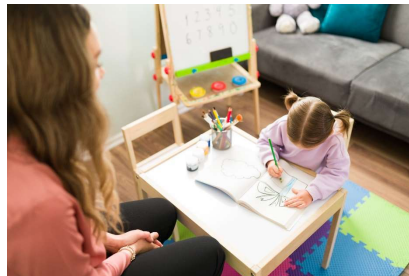


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Activities Provide Ongoing Assessment

- You can repeat activities as often as you like
- This is a great way to assess and to show the child that life changes



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How to Select a Program

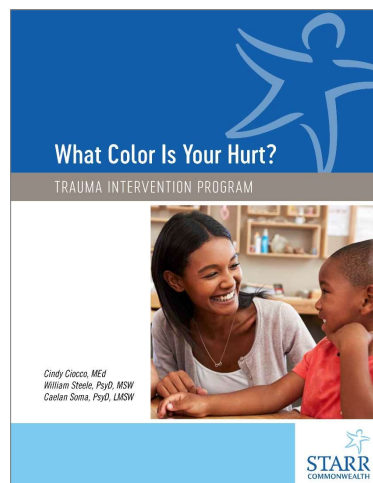
- Individual or Group?
- Age (Developmental age NOT chronological age)
 - Children who are emotionally impaired or have developmental delays will be able to participate in a program that matches their developmental age
- Type 1 or 2 Trauma?
- Developmental Trauma or Toxic Stress?
- Will you work with child for at least 8-10 weeks?
- How much time do you have to spend each time?

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What Color Is Your Hurt?

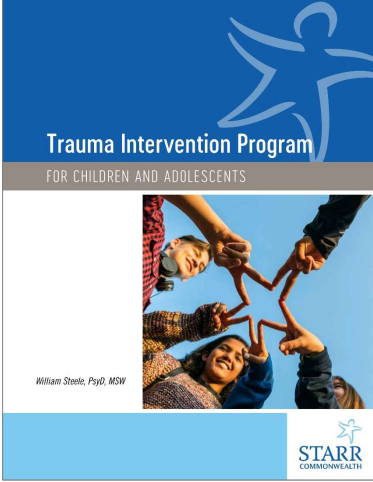


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Trauma Intervention Program

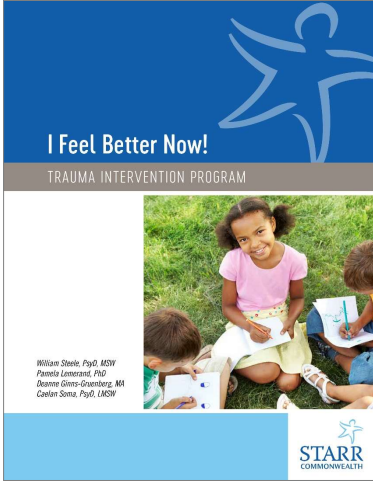


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I Feel Better Now!

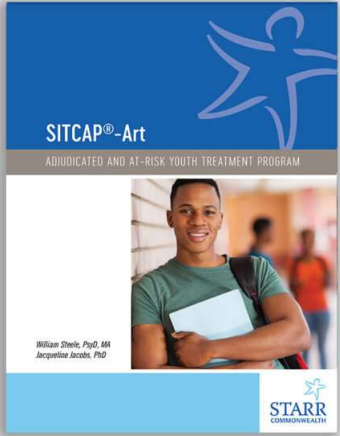


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SITCAP®-ART

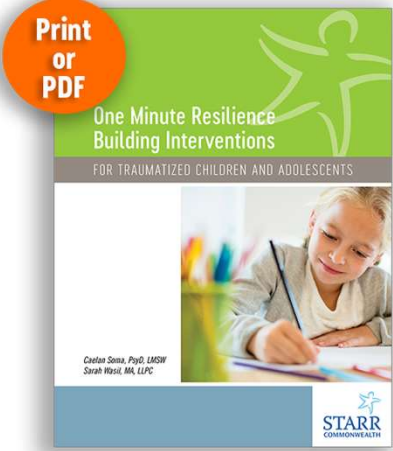


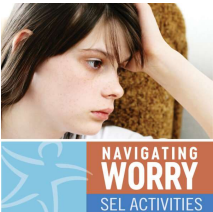
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One-Minute Interventions



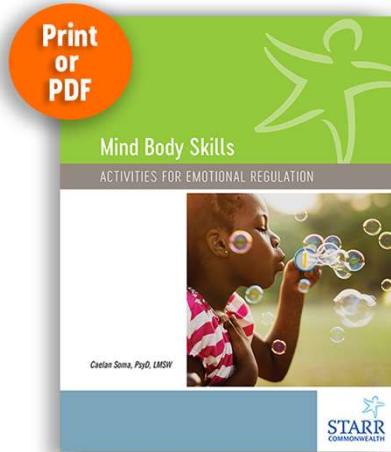




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Mind Body Skills



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Direct Practice and Practitioner Feedback - Sensory Based Interventions work!



Expressive Arts (e.g., art, dance,
music, play, journaling)

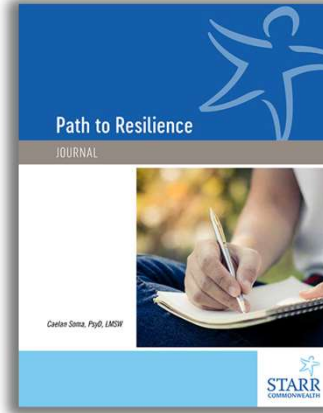
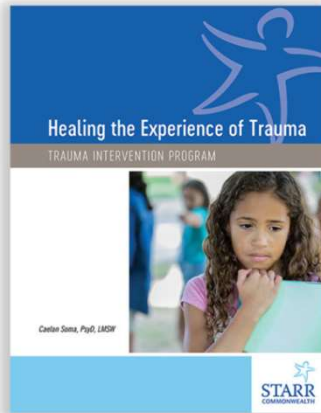


Mind-Body Skills (e.g., breath work,
mindfulness, guided imagery)

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Healing the Experience of Trauma: A Path to Resilience



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About the Program

- For youth ages 5-17 years (and even adults)
- Individual or group format
- Nine 60-75 minute sessions
- Manual and journal for each participant
- Can be an open or closed group
- School and agency compatible
- 25% focus on trauma themes, **75% focus on resilience and strengths**

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Program Goal

To **regulate** the Autonomic Nervous System and Core Regulation Network by decreasing sympathetic nervous system arousal and activating the social engagement system (vagus nerve) through the use of **sensory interventions and mind-body skills** including affirmations, journal prompts, body awareness, movement, and expressive arts.

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Program Format

- Today I Feel
- Session Affirmation
- Mindfulness Activity
- Journal Prompt
- Movement
- Theme-based Activities
 - Trauma/Stress Theme
 - Resilience Theme
- Body Maps (2)
- Stand Out and Symbol
- Affirmation

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About the Journals & Materials

- Each child receives a journal to keep.
- Each session has its own section with corresponding worksheets in the journal.
- Write or draw (words, phrases, images, symbols, color).
- The only materials you must have are the journals and colored pencils.
- Optional materials for each session include:
 - Stickers, magazines for cut-outs, scissors and glue sticks.

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Body Awareness Questionnaire

- 20 questions
- Self report
- Likert scale
- Measures body awareness
- Low, Moderate, High
- Measure pre and post intervention
- Want to see body awareness increase

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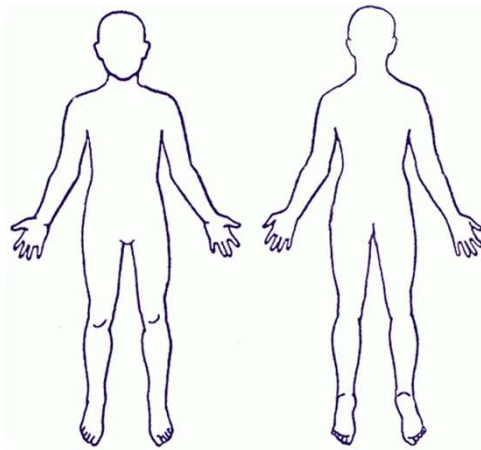
Body Awareness

- Body awareness, and then teach regulation strategies.
- Body awareness, and then practice regulation strategies.
- Body awareness, only then can you expect to see emotional regulation.

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Body Maps



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Theme Based Activities

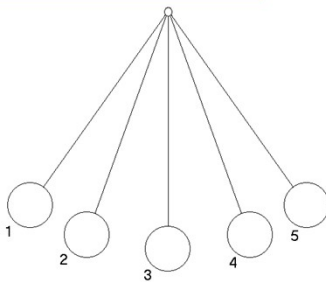
Trauma	Resilience
Tension/stress	Calm
Worry	Hope
Fear	Safety
Loneliness	Connection
Hurt	Joy
Anger	Generosity
Guilt/Shame	Gratitude
Perfection	Pride (Healthy Striving)

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Titration and Pendulation

Exposure to trauma themes and then to resilience-building themes



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Healing Trauma

When we **access body memories via sensations** we can begin to notice and then transform them.

We need to gently discharge the instinctive survival energy that we didn't have time to use at the time of the event or multiple events.

Part of how we discharge the energy is to **notice** the sensations.

Part of creating NEW positive pathways is to **notice the good sensations too!**

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Heal Trauma & Foster Resilience

- You don't have to consciously remember an event to heal from it. You can VISIT it instead of RELIVING it by tapping into the body sensations (messages).

Memories are stored in our bodies more than our minds.

- We must make that connection – find sensation in our body to make sense of it in our minds.
- We must also make connection to how joyful experiences impact the body.

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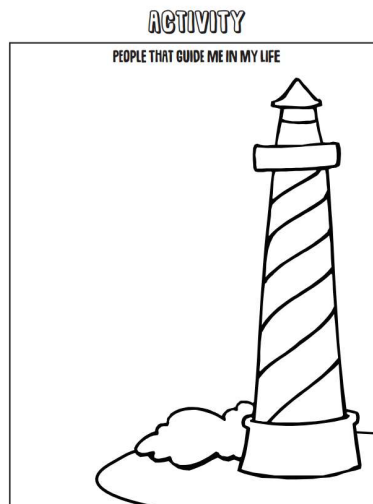
Safety (Fear)



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Lighthouse



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Hope (Worry) My Worried Mind



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My Biggest Worry

Worksheet 2.5 Group Session 3

My biggest worry:
What I worry the most about is my mom gettin beat up agin

This is how big or little my worry is:

an ant a cat

a car a house

the WORLD

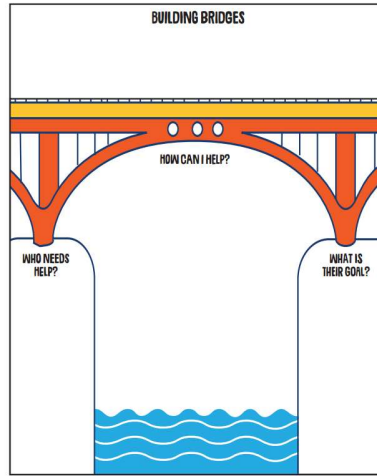
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Generositu (Anger)

ACTIVITY



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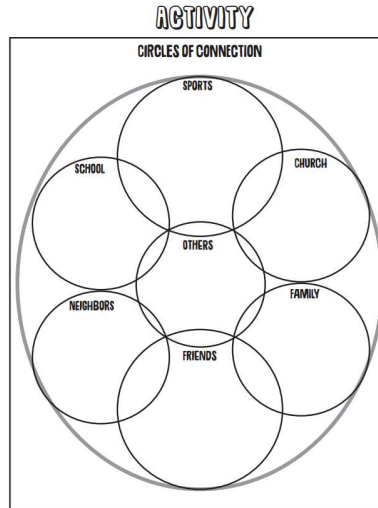
Connection (Loneliness)



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Circles of Connection



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Private Logic


The way children view themselves, others, and the world around them drives their emotions and behavior but **does not seal their fate!**

Private Logic is shaped and re-shaped through experiences!

Through our practice, we know that even youth who have experienced extreme and chronic stress and trauma have the capacity to heal.

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Of all you heard in this course,
what stands out most?

How will what you have learned
change your approach to teaching
or working with children who have
experienced trauma?

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Thank you!!

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