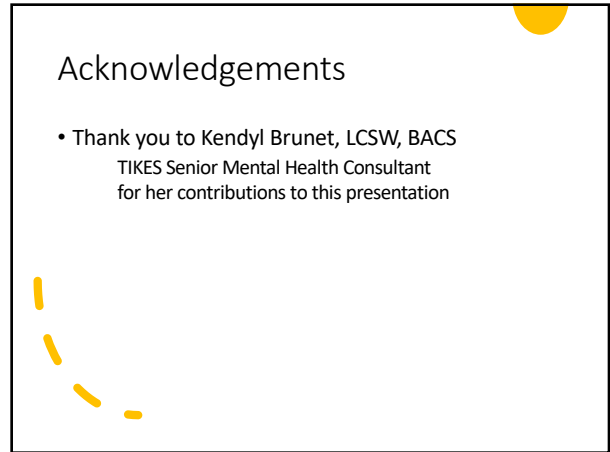
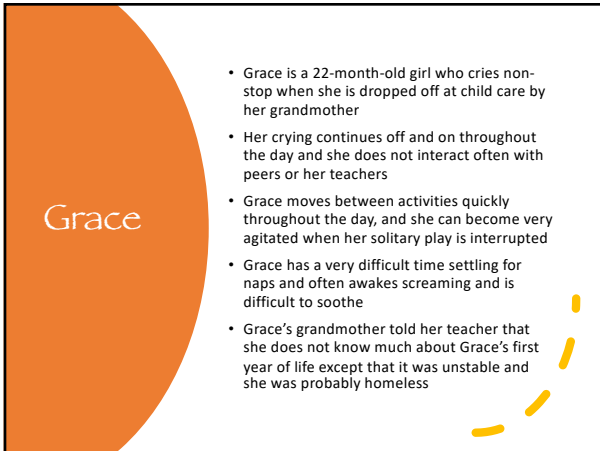


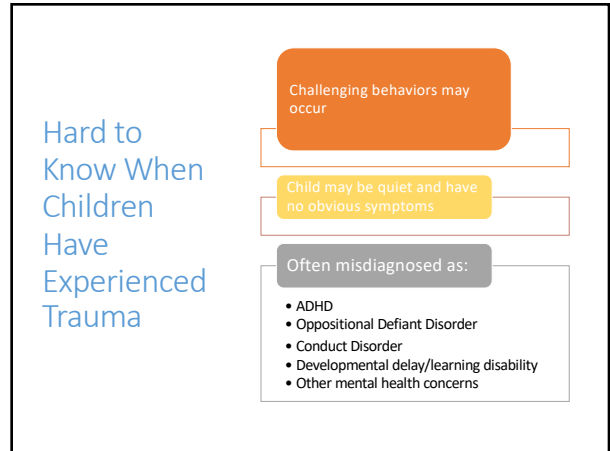
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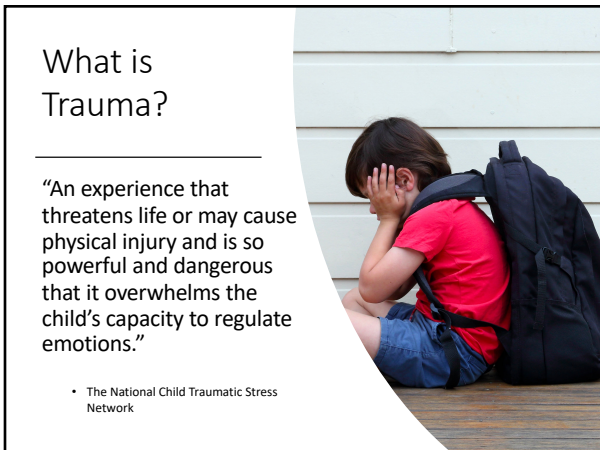
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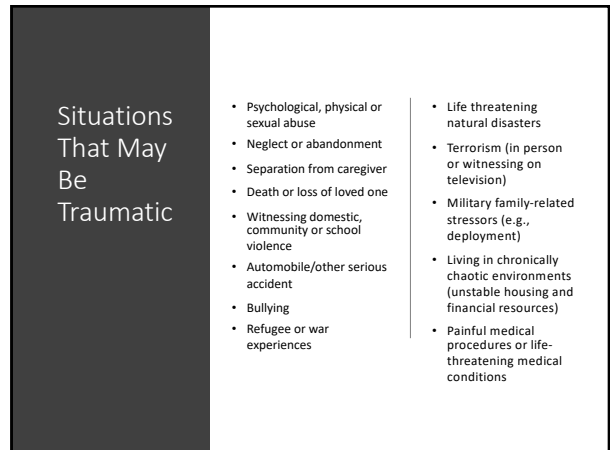
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## Traumatic Stress


- Occurs in children who have been exposed to one or more traumas over the course of their lives and develop reactions that persist and affect their daily lives after the events have ended
- Symptoms occur when reminded in some way of the traumatic event
- When a child is experiencing traumatic stress, these reactions interfere with the child's daily life and ability to function and interact with others
- Children may be reminded by persons, places, things, situations, anniversaries, or by feelings such as renewed fear or sadness

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## Behaviors That May Occur After a Traumatic Experience

- Preschool children
  - Separation anxiety/clinginess
  - Crying/screaming
  - Eating too much or too little
  - Difficulty with transitions
  - Sleep issues/nightmares
  - Regression/acting like a younger child
  - Difficult to soothe/console
  - Play less


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## Effects of Trauma on Children

- Early experiences impact brain development
- When a child experiences chronic stressors, such as extreme poverty or persistent traumatic experiences, without the support of an adult, the stress becomes toxic
- Early toxic stress affects development
- Cumulative toxic stressors in early childhood increase likelihood of problems in adulthood

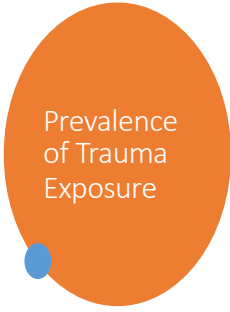
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## Impact of Trauma

- The impact of child traumatic stress can last well beyond childhood. Research has shown that child trauma survivors may experience:
  - Learning problems, including lower grades and more suspensions and expulsions
  - Increased use of health and mental health services
  - Increased involvement with the child welfare and juvenile justice systems
  - Long-term health problems (e.g., diabetes and heart disease)
- TRAUMA is a risk factor for nearly all behavioral health and substance use disorders

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## Prevalence of Trauma Exposure

- For children 2-5 years of age, 52% had experienced a severe stressor in their lifetime
- More than 67% of children report experiencing at least one traumatic event by age 16
- Among children being treated or assessed for trauma:
  - 78% had experienced more than one trauma
  - Initial trauma exposure occurred at age 5

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## Adverse Childhood Experiences (ACES)

Adverse Experience (0-18 years)	Percent Experienced
Physical Abuse	28%
Substance Abuse in Home	27%
Parental Separation/Divorce	23%
Sexual Abuse	21%
Mental Illness in Home	17%
Emotional Neglect	15%
Domestic Violence in Home	13%
Psychological Abuse	11%
Physical Neglect	10%
Criminal Behavior in Home	6%

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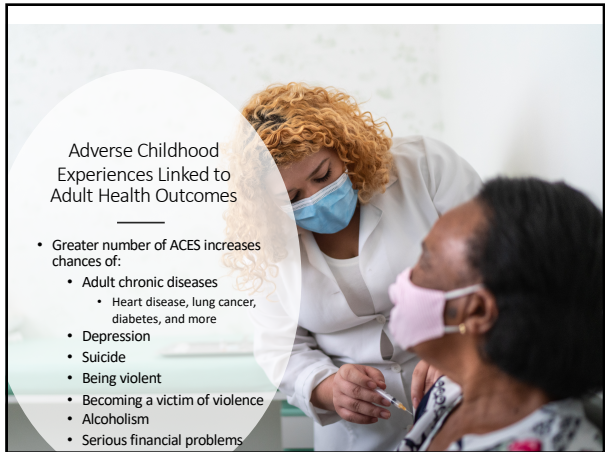
## Prevalence of ACEs

- An estimated 45% of children have one or more ACEs and approximately 10% have three or more.
- Only about 20% of children with mental, emotional, or behavioral disorders actually receive care from a specialized mental health care provider, like a psychiatrist or psychologist.
- In the absence of support, children develop survival mechanisms that help them control their environments and feel safe.

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## Adverse Childhood Experiences Linked to Adult Health Outcomes

- Greater number of ACEs increases chances of:
  - Adult chronic diseases
    - Heart disease, lung cancer, diabetes, and more
  - Depression
  - Suicide
  - Being violent
  - Becoming a victim of violence
  - Alcoholism
  - Serious financial problems



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## Children and Trauma

- Children can be and are affected by stressful and traumatic events
- They may not understand it
- They may not be able to talk about it
- Important for parents/caregivers to look for support in how to respond to children who have experienced a possibly traumatic event

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## Children and Trauma

- Feel decreased sense of safety
- Frightening images may reoccur as nightmares, new fears, or reenacted through play
- May believe that their thoughts, wishes, fears, etc. have power to become real and can make things happen
- Less able to anticipate danger and keep selves safe
- May blame self or parents for not preventing or for not keeping safe

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## Supporting Children After Traumatic Experience

- Most effective reassurance often comes from trusted caregivers
- Parents and trusted caregivers can assist in reestablishing a sense of security and stability for the child



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## Supporting Children with Trauma

- Take a deep breath, and shift your frame of reference for students
- Create awareness by understanding the trauma response
- Practice self-awareness by knowing your own triggers and know how to regulate yourself
- Build relationships with students not based on academics

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## Supporting Children with Trauma

- Teach**
  - Teach your students about their brains, their stress response system, and basic coping skills they can access in your classroom
- Create**
  - Create a space for calming down
- Provide**
  - Provide students with choices
- Be**
  - Be aware of potential triggers when practicing mindfulness with your students

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## Trauma-Informed Classrooms

- Built on an understanding of the prevalence and impact on children's development and school functioning
- Acknowledge children's responses to trauma vary
- Work to provide a continuum of evidence-based services designed to effectively identify and manage the mental health needs of students impacted by trauma and prevent future trauma
- Work to build supportive relationships with children and families

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## The Good News

- Early intervention can prevent negative consequences
- One study demonstrated:
  - Children who experienced extreme neglect and who were placed in foster care before age 2 had higher IQs and were more likely to have typical attachment relationships than those that were placed in foster care after age 2

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## Resilience

- Some children demonstrate a capacity for resilience
- Resilience is the ability to overcome serious hardship
- Children do not become resilient alone
- They have at least one stable and committed relationship with a supportive parent, caregiver, or other adult

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## Building Resilience

- Building strong relationships between children and caregivers
- Infant and Early Childhood Mental Health Consultation can support

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## Activity: Recognizing Trauma

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Trauma Glasses Off	Trauma Glasses On
Attention-Seeking	Connection-Seeking
Disobedient	Trying to get needs met; feeling lack of control
Manipulative	Doing what has worked; getting needs met by any means necessary
Aggressive	Feeling unsafe or under threat
Clingy	Feeling scared or anxious; Needing connection to feel safe
Avoidant	Distrustful of people or situations based on past experiences

National Center on Safe Supportive Learning Environments. (n.d.). *Understanding trauma and its impact activity packet.*

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## Challenging Behavior Basics

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Some slides in this section are adapted with permission from:

**Center on the Social and Emotional Foundations for Early Learning**

[www.csefel.vanderbilt.edu](http://www.csefel.vanderbilt.edu)

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### The Who

How do you communicate with the family about challenging or concerning behaviors?

Who is demonstrating concerning behaviors?

How often do you communicate with the family about the good things that are happening?

What do you know about the child and his or her family?

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### The What

- Which behaviors are concerning?
- Consider child, family, and center culture and expectations
- Is this only a one child concern or are there room/center changes that could also support the child?

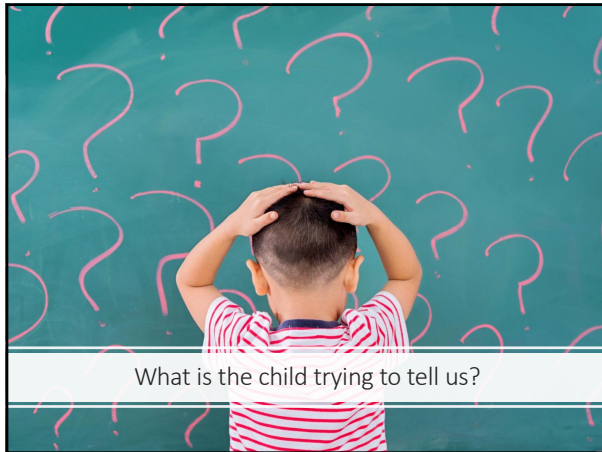
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### The When and the Where

When is the behavior occurring?

Is it across multiple situations and places?

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### Children Communicate in Many Ways

- Forms
  - Words
  - Sentences
  - Point to a picture
  - Eye gaze
  - Pulling adult
  - Crying
  - Biting
  - Tantrums
  - ?

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### Children Communicate a Variety of Messages

- Functions
  - Request object, activity, person
  - Escape demands
  - Escape activity
  - Escape a person
  - Request help
  - Request social interaction
  - Comment
  - Request information
  - Request sensory stimulation
  - Escape sensory stimulation
  - ?

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### How can we figure out the message?

- By looking closely at the environment for cues
- MHCs use a specific method to determine the meaning or function of a child behavior
- Then they will work with the adults to figure out how to meet the child's needs in a more productive way

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### MHC Method

- What happens just before the behavior?
- What is the exact behavior you would like to see changed?
- What happens after the behavior?

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### Mental Health Consultants Can Help With A Behavior Support Plan

- Behavior Hypotheses** - Purpose of the behavior; your best guess about why the behavior occurs
- Prevention Strategies** - Ways to make events and interactions that trigger challenging behavior easier for the child to manage
- Replacement Skills** - New skills to teach throughout the day to replace the challenging behavior
- Responses** - What adults will do when the challenging behavior occurs to ensure that the challenging behavior is not maintained and the new skill is learned
- Setting Events** - events that occur at another time the increase likelihood that a child will have a challenging behavior

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**Prevention Strategies**

- How can the environment be changed to reduce the likelihood that challenging behavior will occur?
- What can be done to make challenging behavior irrelevant?
- What procedures can I select that fit in the natural routines and structure of the classroom or family?
- How can I build on what works?
- What can be done to help the child not respond to the trigger or change the trigger so it does not cause challenging behavior?

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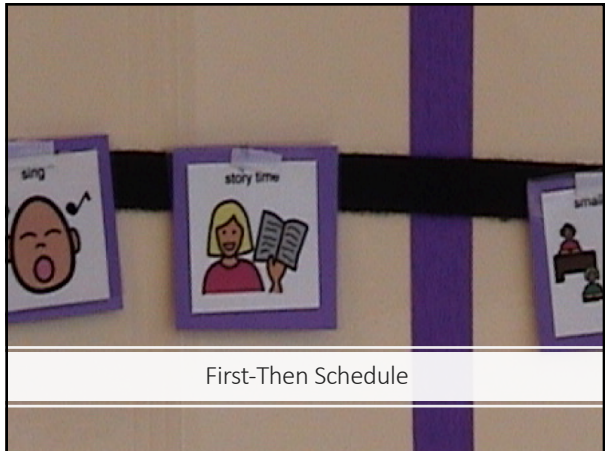
Individualized Line-Up

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Classroom Rules

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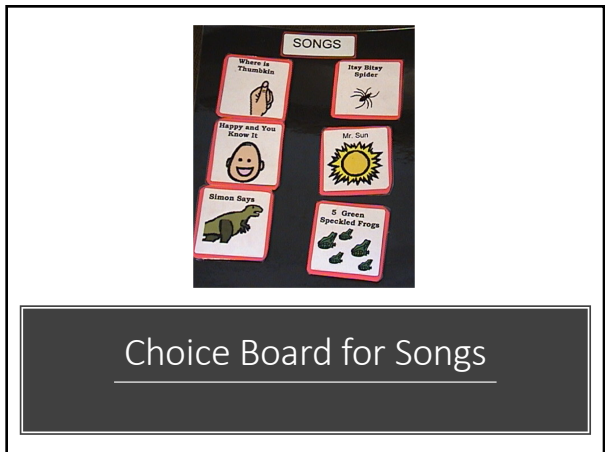
First-Then Schedule

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Visual Schedule


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Choice Board for Songs

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## Individualized Turn-Taking Support



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## Preventions to Minimize the Effect of the Setting Event

- Provide the child with a calming or desirable activity
- Decrease demands on the child
- Increase attention or comfort
- Offer a chance to rest or cuddle
- Provide additional supports for routines and activities (e.g., transition warnings, visuals, adult assistance)

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## Trial & Error


- Keep in mind there is no one right answer
- It may be necessary to try again, especially if you have not gotten a full understanding of the behavior
- Consider whether the plan is being implemented with fidelity



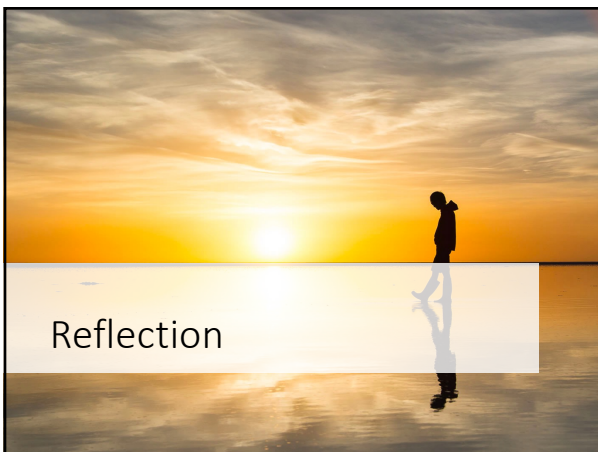
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## What is Success?

- What does success look like to a:
  - Teacher
  - Parent
  - Director
- How are our ideas different?
- Once successful, important to not change routines back to what they were before



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## Reflection

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## Take-Aways and Goals

- Write down 1 to 3 things want to remember
- Write down one goal for your class based on this training
- Set a start date for implementing this goal

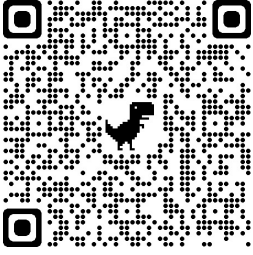


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## Where to go for Assistance

- Type III and FCC sites can reach out to TIKES mental health consultation
- Other caregivers and teachers can request TIKES teleMHC
- TIKES can provide supports for children, families, teachers, and directors!




<https://medicine.tulane.edu/departments/clinical-sciences/psychiatry/research/tikes>

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## Resources

- *National Child Traumatic Stress Network* ([www.nctsn.org](http://www.nctsn.org))
- *NCTSN Educator Toolkit* ([www.nctsn.org/resources/child-trauma-toolkit-educators](http://www.nctsn.org/resources/child-trauma-toolkit-educators))
- *Adverse Childhood Experiences* ([www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/index.html](http://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/index.html))
- *Mindful Schools* ([www.mindfulschools.org](http://www.mindfulschools.org))
- *Trauma Sensitive Schools Training Packet* ([www.safesupportivelearning.ed.gov/sites/default/files/Trauma\\_101\\_Activity\\_Packet.pdf](http://www.safesupportivelearning.ed.gov/sites/default/files/Trauma_101_Activity_Packet.pdf))



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<https://medicine.tulane.edu/departments/clinical-sciences/psychiatry/research/tikes>



TIKES Early Childhood Mental Health Consultation



tikesmhc





TIKES Early Childhood Mental Health Consultation

### Find TIKES on Social Media

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## How Did we Do?

We value your feedback. Please complete a brief survey to give us your thoughts about this training at [http://tulane.co1.qualtrics.com/ife/form/SV\\_9SpSTOYrortwvc](http://tulane.co1.qualtrics.com/ife/form/SV_9SpSTOYrortwvc)

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