



TIECP
TEACHER WELLBEING
& STUDENT BEHAVIOR
(TWSB) GUIDEBOOK

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OVERVIEW

Because the impacts of trauma, chronic, and toxic stress can have a lasting impact on individuals and communities, creating a trauma-informed/sensitive school takes several years to plan and implement and includes extensive professional development and classroom training. This is also true of the therapeutic school model, which includes building in-school clinical capacity to serve students and staff within a therapeutic school environment.

However, paying attention to teacher wellbeing is an introductory step for schools to gain a practical understanding of trauma-informed educational approaches. It can be the first step to considering adopting a whole school model.

This guidebook offers a fundamental framework for supporting schools forming in-house Teacher Wellbeing Groups. Although there are many things that a trauma-informed school can do to support the well-being of its educators, an opt-in, group-based approach to teacher wellbeing is an excellent place to start because it can:



- ✓ Equip educators with a fundamental understanding of how student and adult classroom behavior is shaped and impacted by Adverse Childhood Experiences (ACEs) and Positive Childhood Experiences (PCEs).
- ✓ Create a co-facilitated, psychologically safe space for educators to connect and focus exclusively on their wellbeing.
- ✓ Engage school leadership in regular and productive conversations about school climate and culture from the lens of educators' needs.

SECTION 1



FOUNDATIONAL CONCEPTS AND TERMINOLOGY

TIECP & THE NEED FOR TRAUMA-INFORMED EDUCATION

The Trauma-Informed Educators Community of Practice (TIECP) is a community by, of, and for educational practitioners that supports peer-to-peer learning, cross-sector collaboration, and the creation and sharing of trauma-informed educational practices, including developing a standardized, sharable therapeutic whole school model to help improve educational outcomes.

A therapeutic whole school environment provides social-emotional support for students and staff – as a practical means to help schools address student behavior and discipline problems to improve learning and well-being – by addressing the influence and impact of Adverse Childhood Experiences (ACEs). These experiences include abuse, neglect, separation, and family members with mental illness, addictions, imprisonment, or abuse. People with high ACE scores are at high risk for toxic stress and lifelong adverse effects. In addition, unaddressed trauma is a biological impediment to learning. Moreover, teachers and schools are held accountable for student achievement results without support to address the brain’s biological need for safety before building relationships and accessing learning.

Amidst a long-growing mental health crisis among youth – of anxiety, depression, and suicidal ideation – the COVID epidemic has dramatically increased public awareness of the effects of trauma and support for mental health services. The COVID-related national decline in NAEP scores is clear evidence of the effects of trauma on educational performance. Young people on the lower end of the economic spectrum, experiencing the same crisis combined with ACEs, will benefit from TIECP’s sharable, customizable, and scalable therapeutic school model.

The National Alliance for Public Charter Schools hosts TIECP and is open to charter and traditional district K-12 schools.

WHAT IS TRAUMA-INFORMED EDUCATION (TIE)?

The essence of Trauma-Informed Education is it seeks to be comprehensive in the engagement of the whole child. It recognizes the totality of influences and impacts (physical, social, and emotional) on each child at any given time and how those impacts may support or inhibit the acute sense of safety that undergirds any learning potential.

Unaddressed trauma is ubiquitous in personal impact, with measurable and adverse outcomes in every sphere of existence for individuals impacted by it. This impact is especially true where education is concerned. Trauma-Informed Education respects the biology of the brain in that the need to feel safe correlates with brain science in that the lower systems of the brain that regulate survival are as critical as the higher reasoning cortex where learning takes place. The sequence of the brain is the need to control stress first (to feel safe with predictability), to relate well with others, and to open up the brain's cortex to be able to reason, create, and reflect (to learn).

One significant part of the work of approaching trauma in educating our youth is the assessment of Adverse Childhood Experiences (ACEs). These early and often unaddressed experiences of trauma most commonly correlate to negative impacts throughout life. In addition, we know that children who have had or are having these experiences are significantly more likely to have moderate to severe issues in school. While one may argue many other incidents may have similar effects, these have received the most significant study.

In her groundbreaking 2011 study "The Impact of Adverse Childhood Experiences on An Urban Pediatric Population," Dr. Nadine Burke Harris found a strong link between the number of childhood ACEs and the onset of learning and behavioral issues.



Images: Who is Danny/stock.adobe.com

SCHOOL LEADERSHIP QUESTIONS

INITIAL ASSESSMENT

Whether establishing a Teacher Wellbeing Group is initiated by an interested educator, clinician, or school leader, an assessment of the interests of the school's leadership helps serve as a baseline for beginning and building.



1

How would you describe yourself or your school's leadership?

- A. Interested and aware of the effects of trauma on students and education, and values social-emotional learning (SEL).
- B. Not aware of the effects of trauma, but could be interested in SEL.
- C. SEL skeptic in thinking SEL is an excuse, expense, and time not focused on learning.

2

Is your school's leadership concerned about teacher retention?

- A. Yes
- B. No

After sharing the idea of establishing a Teacher Wellbeing Group:

3

How would you describe your school leader's support of a Teacher Wellbeing Group?

- A. Supportive
- B. Interested
- C. Not interested, but allowing existence
- D. Against

If supportive or interested, ask school leaders to provide food/refreshments.

If not interested but allowing, request space and allow teachers time to participate.

4

Does the school leader support making time for the celebration of Rituals, such as monthly birthdays, for teachers/staff to help build community and maintain relationships?

- A. Yes
- B. No

5

Is the school leader interested in the TWG and moderators serving as liaisons, with teachers' permission, to express concerns and propose solutions in the spirit of collaboration rather than conflict?

- A. Yes
- B. No

ADDRESSING
TEACHER RETENTION
CONCERNS



SUPPORTING TEACHER WELLBEING SUPPORTS TEACHER RETENTION

Schools that establish and support Teacher Wellbeing Groups (TWG) help address teacher stress related to their mental health and workplace concerns that cause stress.

- ✓ Teachers, like their students, can have ACEs-indicated toxic stress, which they too can address through self-regulation and relationships, and so as not to be triggered by, or a trigger to, students in the classroom.
- ✓ Schools with student behavior and discipline issues cause stress to students and teachers, and with a responsive administration, teachers are heard, and solutions are collaboratively developed.

ADDRESSING STUDENT BEHAVIOR SUPPORTS TEACHER RETENTION

School administrations taking concerns about student behavior and teachers' safety seriously can adopt Alternative Student Intervention Options and accept teacher input on student discipline policy and practices.

- ✓ Wellness Rooms as dedicated spaces where students go to take a break, practice self-care, then return to learning.
- ✓ Limit cell phones in class.
- ✓ The administration can be open to teacher, student, and parent involvement/advice for modifying the discipline and reward systems toward producing better behavior and academic achievement.

Therefore, schools that help address teacher concerns and needs increase their opportunities to retain and recruit teachers.

ABOUT ADVERSE CHILDHOOD EXPERIENCES (ACEs)

Excerpts from the Center for Disease Control (CDC)
<https://www.cdc.gov/violenceprevention/aces/index.html>



Adverse Childhood Experiences (ACEs) are linked to chronic health problems, mental illness, and substance use problems in adolescence and adulthood. ACEs can also negatively impact education, job opportunities, and earning potential.

CONSEQUENCES:

ACEs can have lasting, adverse effects on health, well-being, and life opportunities such as education and job potential. In addition, these experiences can increase the risks of injury, sexually transmitted infections, maternal and child health problems (including teen pregnancy, pregnancy complications, and fetal death), involvement in sex trafficking, and a wide range of chronic diseases and leading causes of death such as cancer, diabetes, heart disease, and suicide.

ACEs and associated social determinants of health, such as living in under-resourced or racially segregated neighborhoods, frequently moving, and experiencing food insecurity can cause toxic stress (extended

or prolonged stress). Toxic stress from ACEs can negatively affect children’s brain development, immune systems, and stress-response systems. These changes can affect children’s attention, decision-making, and learning.

Children growing up with toxic stress may have difficulty forming healthy and stable relationships. They may also have unstable work histories as adults and struggle with finances, jobs, and depression throughout life. These effects can also be passed on to their children. In addition, some children may face further exposure to toxic stress from historical and ongoing traumas due to systemic racism or the impacts of poverty resulting from limited educational and economic opportunities.

THE **SCALE** OF THE PROBLEM

ACEs are common. About 61% of adults surveyed across 25 states reported they had experienced at least one type of ACE before age 18, and nearly 1 in 6 reported they had experienced four or more types of ACEs.

61%

1.9
million

Preventing ACEs could potentially reduce many health conditions. For example, by preventing ACEs, up to 1.9 million heart disease cases and 21 million depression cases could have been potentially avoided.

Some children are at greater risk than others. For example, women and several racial/ethnic minority groups were at greater risk for experiencing four or more ACEs.

4+ ACEs

\$56
billion

ACEs are costly. The economic and social costs to families, communities, and society total hundreds of billions of dollars annually. A 10% reduction in ACEs in North America could equate to an annual savings of \$56 billion.”

ABOUT THE ACEs TEST:



The CDC-Kaiser Permanente adverse childhood experiences (ACE) study is one of the most extensive investigations of childhood abuse and neglect, household challenges, and later-life health and well-being.

The original ACE study was conducted at Kaiser Permanente from 1995 to 1997 with two waves of data collection. Over 17,000 Health Maintenance Organization members from Southern California receiving physical exams completed confidential surveys regarding their childhood experiences and current health status and behaviors.

POINTS TO CONSIDER:

1

The Adverse Childhood Experiences (ACEs) test serves as the universal standard assessment survey of high risk for toxic stress in students and teachers and is collectively measured as a percentage within the school.

2

Understanding how ACEs impact the behavior of both ourselves and our students is critical for teacher wellbeing. Without this foundational knowledge, teachers can get trapped in a cycle of blaming their students and themselves for maladaptive classroom behaviors. Inviting teachers to take the ACEs exam at the beginning of a Teacher Wellbeing Group can be an essential first step in unpacking some of the stress they are feeling at school.



ADVERSE CHILDHOOD EXPERIENCES (ACEs)

Researchers determined that ten specific traumatic childhood experiences, or ACEs, could be linked to a higher likelihood of health challenges later in life. These adverse effects increased with the number of “ACEs” a child experienced. For each “yes” answer, add 1. The total number at the end is your cumulative number of ACEs. If a person’s ACE score is 1-3 and has at least one ACE-associated condition, or if the ACE score is four or higher, a person is at “high risk” for toxic stress.

1

Did a parent or other adult in the household often or very often:

- A) Swear at you, insult you, put you down, or humiliate you?
- B) Act in a way that made you afraid you might be physically hurt?

2

Did a parent or other adult in the household often or very often:

- A) Push, grab, slap, or throw something at you?
- B) Ever struck you that you had marks or were injured?

3

Did an adult or person at least five years older than you ever:

- A) Touch or fondle you, or have you sexually touch their body?
- B) Attempt or have oral, anal, or vaginal intercourse with you?

4

Did you often or very often feel that:

- A) No one in your family loved you or thought you were important or special?
- B) Your family didn’t look out for each other, feel close to each other, or support each other?

5

Did you often or very often feel that:

A) You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you?

B) Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?

6

Were your parents ever separated or divorced?

A) Yes
B) No

7

Was your parent/caregiver:

A) Often pushed, grabbed, slapped, or had something thrown at her?

B) Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard?

C) Been repeatedly hit for at least a few minutes or threatened with a gun or knife?

8

Did you live with anyone who was a problem drinker, alcoholic or used street drugs?

A) Yes
B) No

9

Was a household member depressed or mentally ill, or did a household member attempt suicide?

A) Yes
B) No

10

Did a household member go to prison?

A) Yes
B) No

TOTAL NUMBER OF ACEs: _____

POSITIVE CHILDHOOD EXPERIENCES PCEs

Excerpts from <https://americanspcc.org/positive-childhood-experience/>



A growing body of research states PCEs can be statistically linked to good emotional and mental health in adults. Increasing positive childhood experiences builds resilience in kids who have experienced trauma and those who may in the future. The relationship between PCEs in childhood and good mental health in adults is dose-responsive, meaning the more positive experiences that individuals had, the more likely they were to report few or no issues of adult mental health challenges.

Individuals with 6-7 reported PCEs, the highest number of reported positive childhood experiences, had even lower odds of adulthood depression or poor mental health — 72% lower — when compared to those with the least number of reported PCEs.

The more PCEs a child has, the more likely they are to be healthy and resilient. Individuals with 3-5 positive childhood experiences had 50% lower odds of adulthood depression or poor mental health than those with 0-2.

THE POSITIVE CHILDHOOD EXPERIENCES QUIZ

TAKE THE QUIZ

Research has determined seven specific Positive Childhood Experiences, or PCEs, that could link to a higher likelihood of positive health outcomes and reduced adverse outcomes associated with ACEs or toxic stress.

Individuals with high PCE scores are more likely to seek social and emotional support. For each “yes” answer, add 1. The total number at the end is your cumulative number of PCEs.

BEFORE YOUR 18TH BIRTHDAY:

1

You were able to talk with your family about your feelings.

- Yes
- No

2

You had the sense that family is supportive during difficult times.

- Yes
- No

3

You had the enjoyment of participating in community traditions.

- Yes
- No

4

You had the feeling of a sense of belonging in high school.

- Yes
- No

5

You felt supported by friends.

- Yes
- No

6

You had at least two non-parent adults who genuinely cared.

- Yes
- No

7

You had the feeling of being safe and protected by at least one adult in the home.

- Yes
- No

TOTAL NUMBER OF PCEs:

COMMON TERMINOLOGY

TRAUMA

“The word “trauma” is used to describe singular or repeated events in the life of a young person (including but not limited to Adverse Childhood Experiences [ACEs]). These events result in exposure to toxic stress described as “strong, frequent, and/or prolonged adversity—such as physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship—without adequate adult support.”

EMOTIONAL INTELLIGENCE

Emotional intelligence is one’s ability to manage, understand and regulate one’s emotions and those of others.

SELF-REGULATION

Self-regulation is understanding and managing your behavior and reactions to feelings and things happening around you. It includes regulating reactions to strong emotions like frustration, excitement, anger, and embarrassment and calming down after something exciting or upsetting.

SOCIAL-EMOTIONAL LEARNING (SEL)

Social-emotional learning (SEL) is developing the self-awareness, self-control, and interpersonal skills vital for school, work, and life success. People with strong social-emotional skills can better cope with everyday challenges and benefit academically, professionally, and socially.



TOXIC STRESS

Toxic stress can result from acute events such as an accident or loss of a family member or chronic exposure to experiences such as food insecurity, racism, or repeated abuse over time.

Students who experience insults, such as toxic stress, to the brain during the sensitive developmental phases of their youth are more likely to experience changes in typical brain development that may inhibit their ability to regulate their bodies, remain productively in a traditional classroom and/ or access academic information. Students that exhibit externalizing behaviors (e.g., hyperactivity, aggression, or conduct issues) or more internal, dissociative behaviors due to the impacts of trauma can be perceived as disruptive or having social gaps. Students with atypical behavior can place a strain on staff and peers or struggle to participate fully in the general education classroom. When regulated, students can access, process, and act on the information provided in the classroom.”

Katie Lohmiller, Halley Gruber, Scott Harpin, Elaine S. Belansky, Katherine A. James, Jessica P. Pfeiffer, Jenn Leiferman (2022). The SITE Framework: A Novel Approach for Sustainably Integrating Trauma-Informed Approaches in Schools. *Journal of Child & Adolescent Trauma*, 15:1011–1027. <https://doi.org/10.1007/s40653-022-00461-6>

A POINT TO CONSIDER:

1

Increasing teachers’ time, space, and capacity to build and strengthen their emotional intelligence, self-regulation skills, and SEL capacity is a concrete, tangible way to support them in prioritizing their wellbeing.

SECTION 2



GUIDANCE FOR TEACHER **WELLBEING GROUPS**

To combat the toxic and chronic stressors prevalent for students and adults in the school building, we recommend the formation of Teacher Wellbeing Groups (TWG).

WHAT IS A TEACHER WELLBEING GROUP?



A 40-minute (minimum) voluntary, safe space for educators across the school to gain trauma-informed education (TIE) understanding, to be heard and discuss work-related concerns, and to consider solutions that help address teacher wellness and safety.



The administration can support Teacher Wellbeing Groups by providing space and food/refreshments.



Teacher Wellbeing Groups should meet regularly (weekly, bi-weekly, monthly, or at a frequency agreed to within the school) on a day/time agreed to by most participating teachers.



Two (2) co-moderators/facilitators should guide the group following the TWG Meeting Moderator Guidelines.



WHO SHOULD ORGANIZE AND MODERATE THE GROUP?



Any invested adult in a school building can initiate a Teacher Wellbeing Group, but it is most effective when the administration supports (and even stipends) this role.



Teacher Wellbeing Groups should be co-facilitated by one educator and (if possible) at least one clinician (counselor, social worker, or school psychologist).



Teacher Wellbeing Group Moderators, with permission of the teachers, can also serve as an intercessor to communicate with the school leader/administration to address school-related teacher concerns and proposed solutions.

TEACHER WELLBEING GROUP GUIDELINES

	Moderators should lead, but power and voice are shared. Everyone should have a chance to speak and be open to different opinions and perspectives.
	Establish a standard of agreement of 2/3 of participants for group decision-making, such as times to meet and topics to discuss.
	Arrange seating in a circle.
	Food/refreshments are recommended, ideally provided by a supportive school administration.
	Confidentiality – Sharing in the Teacher Well-being Group is shared in confidence and should not be repeated or shared outside the group, particularly by the school’s administration.
	To help address school-related concerns, particularly those causing stress, the group can send expressed concerns and proposed solutions (with 2/3 agreement) through the moderators to open, supportive, and willing administrators/school leaders in a spirit of collaboration rather than conflict.

RECOMMENDED SESSION CADENCE

1

First 5 minutes - Mindfulness/grounding/breathing exercises to enter (many of which can be found online through a quick search).

2

20-30 minutes (or more) - Open Discussion according to the agreed agenda.

3

5-10 minutes - Closing reflection (written or verbal) and mindfulness/grounding/breathing exercise to exit.

4

If session time is longer than 40 minutes, or if time allows and is agreed to by the group, a 10-minute “mini-lesson” can be added after the mindfulness/grounding exercise to revisit and review the lesson points covered in the proposed initial session outlined in the guidebook appendix, “Introduction to Trauma-Informed Education Session and Lesson Points.”

ADDITIONAL THINGS THE SCHOOL CAN DO TO SUPPORT TEACHER WELLBEING



Rituals - are to build and maintain community (celebrate birthdays, holidays, and special events).



Timeouts - allow flexibility, with coverage by other teachers, for teachers to address their stress and self-regulate when necessary.



Time Off and Away - Setting a culture of boundaries and limits from emails/calls/work-related tasks outside of the building (like an email embargo from 6 pm-6 am).



Administrative Listening Tours/Office Hours/Regular Check-Ins - to allow teachers consistent, responsive access to decision-makers in the building.



Mentors/Coaches - to build the capacity of veteran teachers to support younger/newer teachers, not just in their practice, but in their wellbeing.





ACEs INDICATED
**TOXIC STRESS
MANIFESTATION**

How ACEs-indicated toxic stress manifests in people,
the classroom, and student behavior/discipline.



TOXIC STRESS MANIFESTATION

Because we understand that the root of challenging behaviors (from both children and adults) in schools is the result of not feeling psychically or psychologically safe in the environment, we encourage teachers to consider this framework for re-considering and addressing challenging behaviors in class. Behaviors are not “right” or “wrong,” not “bad” or “good,” but can instead be thought of in terms of adaptive (or lifesaving) and maladaptive (or life-threatening).

This list is not exhaustive but indicates frequent maladaptive behavior patterns and can be used as a frame for other potential challenges.

ACEs INDICATED

TOXIC STRESS MANIFESTATION

This list is not exhaustive but indicates frequent maladaptive behavior patterns and can be used as a frame for other potential challenges.

ACEs Showing Up In The Classroom (Maladaptive Behavior)	Potential Space In Which That Behavior is “Adaptive”	Recommended Teacher Response	Intended Outcome for Student
<p>The student is withdrawn, puts their head down on the desk, does not engage, and is often asleep.</p>	<p>Family conflict/parents fighting; community violence- this is a “flight” response to stress.</p>	<p>Be patient with the student, and do not reprimand or punish. Invite the student to have lunch with you/stay back in the classroom to talk.</p>	<p>The student feels heard/seen/safe instead of punished; the student generates solutions or alternatives for which you hold them accountable.</p>
<p>Student gets up and runs out of the classroom whenever there is individual confusion or collective chaos.</p>	<p>Also, a “flight” response to conflict/chaos and perceived individual inadequacy.</p>	<p>Create a unique signal for this student to tell you that they are in distress (could be a hand signal or a Red/Yellow/Green card on their desk. When they give you the signal, you permit them to take a proactive break- a walk to get water, stretch their legs, or visit a part of the classroom designated for calm.</p>	<p>Student tuned into the non-verbal signs that he/she is going to have a stress response; the student feels empowered to take that time away in collaboration with you as a partner, not as a departure from you. You become a teammate to them in combatting the stress, and you become safe.</p>

ACES INDICATED TOXIC STRESS MANIFESTATION *continued*

<p>ACEs Showing Up In The Classroom (Maladaptive Behavior)</p>	<p>Potential Space In Which That Behavior is “Adaptive”</p>	<p>Recommended Teacher Response</p>	<p>Intended Outcome for Student</p>
<p>The student is clingy, will not leave your classroom, tries to friend you on Instagram, call you after hours, etc.</p>	<p>The student exhibits symptoms of unhealthy attachment in relationships, which could result from abandonment or neglect.</p>	<p>Create proactive times when the student can access your full undivided attention, and then firm boundaries around when you are off limits. Re-teach the child how to set healthy boundaries and responsive relationships.</p>	<p>For children, healthy limits and structure make them feel safe. They push these boundaries to find power and connection, but helping them realize how to connect within the limits of a healthy relationship creates safety and comfort.</p>
<p>The student is combative, disrespectful, mean, and hurtful toward you.</p>	<p>The student may hear this type of language at home; students may not feel like you are a safe and trusted person, students may not have examples of healthy relationships at home, students may be inherently distrustful of authority because of community violence from the police, etc.</p>	<p>As much as you may not want to, get to know this child outside of school. Allow them to share with you their world and what is important to them. Spend proactive time with them, and lean into the pain. They expect you to write them off, so you must disrupt that worldview that they are “too difficult and people cannot deal with them.”</p>	<p>Break down their understanding of how to relate, engage them in a healthy relationship, and show them this is not how they must be in the world.</p>

TOP TEN

SELF-REGULATION TECHNIQUES

De-escalation: Do not trigger students, and don't let students trigger you.

#1 BREATHWORK

Gain control of your breathing, and use your breath to steady your nerves. Practice various breathing strategies and find one that works for you: <https://www.nhs.uk/mental-health/self-help/guides-tools-and-activities/breathing-exercises-for-stress/>.

#2 VISUALIZATION

Remember a place when you felt truly happy and calm. Remember the way your senses felt in that space- what it looked, sounded, felt, smelled, and tasted like. Go to that place in your brain at least once a day proactively as practice, and then close your eyes and access that image and those feelings in times of acute stress.

#3 5-4-3-2-1 MINDFULNESS

Accessible, in-the-moment mindfulness for stressful situations:
<https://www.mayoclinichealthsystem.org/hometown-health/speaking-of-health/5-4-3-2-1-countdown-to-make-anxiety-blast-off>.

#4 MUSIC

Create a decompression playlist and have it accessible to you during the day.

#5 CALM DOWN CORNER

These are not just for kids. Have a drawer in your desk that has fidgets, candles, pictures of loved ones, and other tactile things that can help bring you back to center.

#6 JOURNALING

Keep a journal in your desk for when you need to get something out. Step out of the classroom or wait until your next break to write.

#7 AUDIO JOURNALING

For those that do not process in writing but would rather process auditorily, record yourself venting after a stressful experience. Go back and listen to your voice after the day is done to see what you said and how you may feel similarly or differently now.

#8 CONNECT WITH A FRIEND

Call someone outside the building or go find your BFAW (Best Friend at Work) to connect with when you are feeling heightened. Connection in and of itself can help calm our nerves.

#9 HYDRATE

Water and/or herbal tea are critical for your body's ability to flush out toxic hormones out of your system after an activation of the stress response system. Pound a big glass of water after a blowup and feel it bring your body back to center.

#10 COMPARTMENTALIZE

When you leave the building each day, physically visualize yourself picking up the remote control and changing the channel, wrapping up a package and putting it on a shelf, or closing a gate or a door. Allow your brain to imagine that you are shutting down this part of your day and leaving it behind.

SECTION 3



FOR ADMINISTRATION
CONSIDERATION

ALTERNATIVE STUDENT INTERVENTION OPTIONS

Disruptive student behavior and safety concerns are significant sources of stress for teachers and students. While teachers have responsibility for things within their control, addressing out-of-control and disruptive students is the responsibility of the school administration.

As alternative student intervention options within a school's existing discipline system, school leaders and administrations can consider incorporating existing approaches that take into account brain science and development (such as ACEs, PCEs, and de-escalation) while taking concerns about behavior, discipline, and student and teacher safety seriously.

IDEAS FOR IMPLEMENTABLE OPTIONS INCLUDE:



Policy limiting cell phones in class - many educators have come to see social media – accessed via students' phones – as a significant contributor to poor mental health, wherein social media posts and texts during school hours often lead to conflicts, bullying, or other infractions.



Wellness Rooms are dedicated spaces where students can take a break, practice self-care, then return to learning with the goal of emotional regulation.

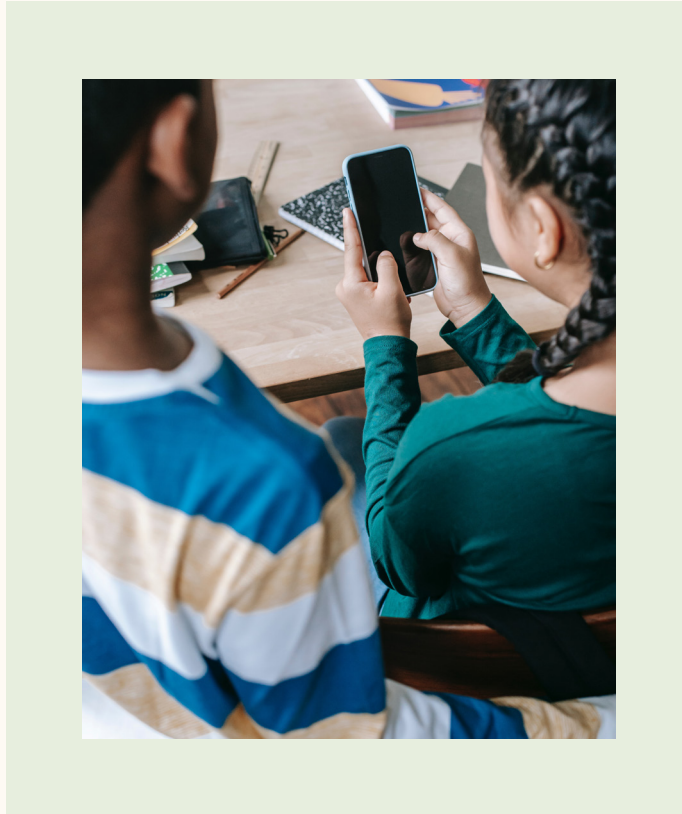


Parent Circles - Schools can invite parents to meet in class circles and help hash out and agree to policies and school behaviors.



Responsive Administration - The school administration is open to the teacher, student, and parent involvement/advice for modifying the discipline and reward systems towards producing better behavior and academic achievement.

POLICY LIMITING CELLPHONES IN CLASS



EXCERPTS FROM THE ARTICLE:

Students can't get off their phones. Schools have had enough.

by Donna St. George, Washington Post

<https://www.washingtonpost.com/education/2023/05/09/school-cellphone-ban-yondr/>

“When students returned to school during the pandemic, educators quickly saw a change in their cellphone habits. More than ever, they were glued to the devices during class – posting on social media, searching YouTube, texting friends. So this year, schools in Ohio, Colorado, Maryland, Connecticut, Pennsylvania, Virginia, California and other banned the devices in class to curb student obsession, learning disruption, disciplinary incidents and mental health worries.”

“Some have come to see social media – accessed via students’ phones – as a major contributor to poor mental health.”

POLICY AND PRACTICE EXAMPLES:

“

“This year, they went a step further, expanding to high school. There, students slip their phones into locking Yondr pouches (about \$16 each) that they carry with them all day and that they open by tapping it against a magnetic device as they leave.”

“Do we have 100 percent compliance?” she said. “No, but the majority of our teachers would say that it is much better. There are fewer distractions.”

“Now, she said, she sees children talk to each other at lunch, rather than text or scroll. If a parent needs to reach a student during school hours, school staff promptly relay messages, she said.”

“

“A new regulation this school year forbids cellphone use during instructional hours or in a school setting. Middle-schoolers now must keep phones stowed in their lockers. High school students may carry phones – and use them during lunch or between classes – but not in class. Teachers refer offenders to an administrator, who may give them a warning, an in-school detention or another punishment. “

“

“Nearly all of student discipline issues last year were the result of phone or involved phones. Social media posts and texts during school hours often led to conflicts, bullying or other infractions. This year, the rules are the same in every classroom: No phones. If students are caught in class or even in a hallway, they must go to their school’s office and wait for a parent to come to collect their phone. If they need to read messages on their phone – say, about a ride home or a team practice – the rules permit them to visit the office and view them there.”

“He sees more interaction between teachers and students, more focus, less conflict in hallways. And only a handful of students are second-time offenders, he said. ‘The majority of our students, when we surveyed them, were thankful for it because it has reduced the stress in their life,’ he said.”

“

“Homeroom teachers collected phones every morning and locked them in zippered storage cases. Students picked up their cellphones before heading home.”



WELLNESS ROOMS

EXCERPTS FROM THE ARTICLE:

<https://fomcore.com/wellness-rooms-in-schools/>

“Wellness Rooms are dedicated spaces in which students can come to take a break, practice self-care, then return to learning. These spaces are staffed with personnel trained to support students in identifying triggers and effective coping strategies. Students from all backgrounds, including the neurodiverse population, have benefitted from this setting as it is a proactive approach to regulating their own emotions. Prior to wellness rooms, many of these students have been forced to remain in class while their stress escalates to an out of control level. These students are then removed from the classroom (either sent to the school nurse or sometimes to the office for disciplinary action), resulting in even more loss of learning and negative feelings about school and themselves.”

“Although the specific details of a wellness room can vary depending on school needs, a few characteristics should be considered:

Wellness rooms should be staffed with trained personnel. This personnel can sometimes go into the classrooms to demonstrate how some strategies can be implemented without leaving the classroom.

Wellness rooms should have a variety of seating and lighting options to meet the needs of their population.

Use muted colors and avoid visual stimulation. Use sound-absorbing materials.

Wellness rooms should be semi-private, meaning the students can be away from the public eye, but are safely supervised.

A clear purpose that is based on school needs should be established and communicated. Some schools choose to use this space as a de-escalation tool while others designate the space for preventative purposes only.

Students should be taught how to appropriately use the space. Clear expectations and norms should be set.

Use a check-in, check-out procedure to track attendance, triggers, and strategy usage.

Use a 10-minute timer. If students are not re-focused and ready to return to class after 10 minutes, set the timer again.”

PARENT CIRCLES

WHY ARE PARENT CIRCLES IMPORTANT?

Parent circles play a crucial role in school communities by fostering a supportive and collaborative environment where parents can meet, discuss, engage, and collaborate. These circles provide a platform for parents to actively participate in their child's education and contribute to the overall development of the school community. Here are several reasons why parent circles are essential:



1 Building a Sense of Community: Parent circles help create a strong community within the school. When parents come together regularly, they form connections, establish relationships, and build a support network. This sense of belonging contributes to a positive school climate and enhances the overall well-being of both parents and students.

2 Sharing Knowledge and Experiences: Parents bring a wealth of knowledge and experiences to the table. In parent circles, they can share their expertise, insights, and strategies related to parenting, education, and child development. By exchanging ideas and experiences, parents can learn from one another and gain valuable perspectives that can benefit their children and the broader school community.

3 Modeling Core Values: Parent circles allow parents to model and reinforce the school community's core values. Parents can demonstrate respect, empathy, open-mindedness, and effective communication by actively engaging in discussions. These positive interactions serve as examples for their children and contribute to developing a healthy and inclusive school culture.

4 Enhancing Parental Involvement: When parents actively participate in their child's education, research shows that students tend to perform better academically, have improved behavior, and develop more vital social-emotional skills. Parent circles facilitate increased parental involvement by providing a dedicated space for parents to engage in meaningful, well-rounded conversations about their children's needs, progress, challenges, and goals.

5 Strengthening Partnerships with Educators: Parent circles create opportunities for parents and educators to collaborate and work together as partners in supporting students' learning and well-being. Through these circles, parents can communicate their perspectives, concerns, and aspirations to educators, while educators can share valuable information about curriculum, teaching strategies, and school policies. Such collaboration fosters a mutual understanding and promotes a more cohesive approach to supporting the whole child.

6 Addressing Common Issues: Parent circles can serve as a forum to discuss and address common issues or challenges parents and students face. These discussions can revolve around homework, discipline, social dynamics, mental health, and extracurricular activities. By identifying common concerns, parents can collectively seek solutions, share resources, and support each other in navigating these challenges.



Parent circles are vital in school communities as they promote collaboration and sharing of knowledge and experiences, model core values, enhance parental involvement, strengthen partnerships with educators, and address common issues. By actively participating in parent circles, parents create a supportive and inclusive environment that nurtures the whole child and fosters a strong sense of community within the school.

RECOMMENDED STRATEGY FOR SCHOOL PARENT CIRCLES THAT ENGAGE THE WHOLE SCHOOL:

Establish Clear Goals and Objectives: Begin by defining the goals and objectives of the parent circles. Determine what you hope to achieve through these circles, such as fostering community, enhancing parental involvement, and promoting the whole child's development. Clearly communicate these goals to all participants to ensure everyone is on the same page.

Develop a Welcoming and Inclusive Environment: Create an atmosphere where all parents feel welcome, valued, and included. Ensure that the parent circles are accessible to parents of diverse backgrounds, cultures, and abilities. Encourage open dialogue, active listening, and respect for differing perspectives. Foster an environment where parents feel comfortable sharing their thoughts and ideas without judgment.

Provide a Variety of Meeting Formats: Offer different meeting formats to accommodate varying schedules and preferences. Consider hosting both in-person and virtual meetings to allow for broader participation. Provide options for different time slots or alternative means of engagement, such as online forums or email communication, to ensure that all parents can participate.

Plan Engaging and Relevant Topics: Select topics that interest parents and directly relate to their children's education and well-being. Offer a mix of educational sessions, workshops, guest speakers, and group discussions. Topics include parenting strategies, academic support, social-emotional development, technology use, mental health, and school policies. Solicit input from parents to ensure their needs and interests are taken into account.

Provide Professional Guidance and Resources: Consider inviting experts, such as educators, psychologists, or community leaders, to share their knowledge and expertise with parents. These professionals can provide valuable insights and resources for child development, academic support, and parenting strategies. Make relevant resources, articles, and recommended readings available to parents to further their understanding and support their engagement.

Encourage Collaboration and Action: Foster opportunities for parents to collaborate and take meaningful action. Encourage parents to form subcommittees or task forces to address specific needs or projects within the school community. Support parents in their efforts and provide necessary resources to facilitate their initiatives.

Promote Parent-Educator Partnerships: Foster partnerships between parents and educators by inviting teachers, administrators, and other school staff to participate in parent circles. Encourage open and constructive dialogue between parents and educators, allowing for exchanging ideas, concerns, and feedback. These interactions can enhance the two groups' understanding, trust, and collaboration.

Communicate Regularly and Transparently: Establish clear communication channels to keep parents informed about upcoming meetings, topics, and outcomes of the parent circles. To reach a wider audience, utilize various communication methods, such as email newsletters, social media groups, school websites, and bulletin boards. Provide regular updates on any action items or projects initiated by the parent circles to maintain transparency and accountability.

Seek Feedback and Continuous Improvement: Regularly solicit feedback from parents regarding their experiences with the parent circles. Use surveys, suggestion boxes, or open discussions to gather input on meeting formats, topics, and overall effectiveness. Actively listen to the feedback received and adjust to ensure continuous improvement and meet the evolving needs of parents and the school community.

Celebrate Achievements and Recognize Contributions: Acknowledge and celebrate the accomplishments of the parent circles and individual parents who actively participate and contribute. Recognize their efforts through verbal appreciation, certificates, or small tokens of gratitude. Publicly share success stories or testimonials to inspire and motivate others to get involved.

By implementing this recommended strategy, school parent circles can effectively engage the whole school community, foster collaboration, and create a supportive environment where parents play an active role in shaping their children’s educational experience.

PARENT CIRCLE DYNAMICS

MEETS:

3 times a school year

LED BY:

Classroom educator, mentor, or principal

LOCATION:

In the classroom, in chairs set up in a circle with coffee/tea provided

CIRCLE ROLES:

Classroom educator leads the discussion, and parents actively (or passively) participate. Ice-breaking activities and games are sometimes held to get people feeling comfortable with each other.

VOTING POLICY:

75% agreement to pass (practitioners have not had any issues arise that parents could not come to an agreement on. They do not vote on specific school policies, voting on issues relating to whole-child development such as screen time, birthday parties, parental supervision, activities, etc).

SECTION 4



APPENDIX

TWG MEETING MODERATOR GUIDELINES

Framing: The purpose of the Teacher Wellbeing Groups is to provide a pro-active, consistent space dedicated to the wellbeing of the adults in a school building. The purpose is to facilitate processing and healing through connection and reflection and promote the safety and wellness of the educators who care for our children.

TO SET UP THE GROUP:



LEADERSHIP

Designate two faculty members as the co-facilitators. They are both to share the responsibility of planning and admin, but also to ensure that there is always someone in the building that can facilitate the groups to promote consistency.

One of the two co-facilitators should be a member of the mental health/wellness team (social worker, counselor, school psychologist, etc.)



FREQUENCY

Find a consistent, dedicated space.



SCHEDULE

Set a schedule for the whole year, whether weekly, bi-weekly, monthly, or quarterly meetings; get them on the schedule as soon as possible and create a shared calendar invite.



BUDGET

See if there is a budget available from the school for light refreshments.

FOR GROUP FACILITATION:

Start every session by signing in - track and keep records of attendance.

Begin the series with a pre-survey; this could be 5-10 quick questions (on paper, as a Google form, on a QR code).

Begin every session with a mindful minute - breathing and grounding to differentiate this space from the rest of the day.

Have the group decide on norms - steer these towards respect for each other, airtime, confidentiality, results orientation, and allowing space for diverse voices and opinions.

Explain that this is a safe and confidential space and that people's privacy will be upheld here unless someone says something that threatens the safety of themselves or someone else.

Explain that this space is designed for connection, reflection, and growth.

End every session with intention setting - a word or phrase that the participant is committed to living into in the next chunk of time until we meet again.

End the series with a survey - the same 5-10 questions to see how mindsets have shifted.

BE MINDFUL OF THE FOLLOWING:



One person dominating the conversation. Through in-the-moment re-direction and outside of session one on one conversations, ensure that you are conscious of that person's dominance in the space and ask them to help you create space for other voices.



Microaggressions - you may have and those of others. When you witness one, be brave enough to call it out and invite it into the space. It is critical that people feel safe and seen and heard in this space.



Power dynamics - exist between roles in the school, genders, and races, and between you as the facilitator and the participants. Look for every opportunity to share power and create equity in the space.



Negativity taking over - acknowledging failures, lack of energy, negative "vibes"- it is OK to allow yourself and participants this space, but also ensure that we are in a results-oriented lens, moving forward to ideas and solutions instead of dwelling on what is not working.

AGENDA TEMPLATE

TEACHER WELLBEING GROUP

Welcome

•

Introduction

•

Overview

•

5-minute Wellbeing Exercise

•

Agreement on the Proposed Agenda

One 30-minute topic or two 15-minute topics, which can be sorted as:

- Discussion around Wellbeing in General
- Discussing School-related Topics that cause stress

•

Conclusions and Closing

Reiterate the results of discussions (if any) and conclude the meeting.

FLYER TEMPLATE

TEACHER WELLBEING GROUP

AGENDA



Image: Lilynthesweetpea/stock.adobe.com

INTRODUCTION TO TRAUMA-INFORMED EDUCATION SESSION AND LESSON POINTS

A 60–90-minute voluntary session for educators and counselors, organized by the co-moderators, towards establishing the Teacher Wellbeing Group (TWG) and laying the foundation of a practical understanding of the effects of Adverse Childhood Experiences (ACEs) and trauma, and its impact on teachers, students, classrooms, and education.

RECOMMENDED SESSION CONTENT AREAS:

TOPIC 1- TRAUMA AND THE BRAIN

- Utilize the guidebook sections “*What is Trauma-Informed Education (TIE)?*” and the description of Trauma under the “*Common Terminology*” section.
- Discuss what happens in our thinking and our bodies when we are feeling triggered in the classroom.

TOPIC 2- ACES AND TOXIC STRESS

- Utilize guidebook sections “*About Adverse Childhood Experiences (ACEs)*,” “*ACEs-Indicated Stress Manifestation*,” the “*ACEs Test*,” and “*Positive Childhood Experiences (PCEs)*.”
- NOTE that there should be a TRIGGER WARNING prior to this session and an invitation for folks to step away if the content elicits a strong emotional reaction.
- Discussion around our own ACEs, the ACEs of our students, and how we see these show up in the classroom.
- Consult the “*ACEs-Indicated Stress Manifestation*” chart.
- Take the 10-question “*ACEs Test*,” which doesn’t require a clinician to implement and can be self-administered as a survey. If a person’s ACE score is 1-3 and has at least one ACE-associated condition, or if the ACE score is four or higher, a person is at “high risk” for toxic stress.
 - The ACEs test is self-administered, with results not reported to the group.
 - Self-awareness includes if you have ACEs or want to support someone who does.

TOPIC 3- RECOGNIZING TRIGGERS AND EMPLOYING DE-ESCALATION STRATEGIES

- Utilizing guide sections “*Top 10 Self-Regulation Techniques*” and “*ACEs-Indicated Stress Manifestation*.”
- Discussion around what to do REACTIVELY to mitigate the impact of acute classroom/school stressors (like disrespectful kids or loud classrooms).
- Discussion around what to do PROACTIVELY to mitigate the impact of acute classroom/school stressors (how we care for ourselves outside of the building).
- Love, Connection, Boundaries (Our Relationships as a Tool).
 - Note that relationships and boundaries for negative relationships are key to resiliency and are beneficial to mental health.
- Discussion around sleep, nutrition, exercise, and vices (Our Bodies as a Tool).
 - Note that regular sleep, regular physical activity, and nutrition significantly benefit mental health.

TOPIC 4- STARTING A TEACHER WELLBEING GROUP.

- Utilizing the guidebook section “*Guidance for Teacher Wellbeing Groups (TWG)*.”
- Ask the participants to see if they want to continue understanding Trauma-Informed Education as a Teacher Wellbeing Group for peer support, to reduce stress, and address school-related concerns.

INTERESTED

SCHOOL STAFF & LEADERS

1. _____	21. _____
2. _____	22. _____
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