NME Core Concepts and Trauma Informed Practices
“Fire can warm or consume, water can quench or drown, wind can caress or cut. And so it is with human relationships; we can both create and destroy, nurture and terrorize, traumatize and heal each other.”

perspective...

* Bruce D. Perry
Agenda

• Welcome
• Trauma - ACEs & prevalence
• Trauma-Impact
• Sequential Brain development
• Trauma lens in the NME classroom
• Classroom support for ALL kids
• Organize and integrate
Working Agreements

Attention-getting signal

Minimize off-topic volume

Silence Cell phones, reduce side bars & non-note-taking-typing

Everyone shares knowledge!

Participate to the degree you are comfortable

Others?
This training has a lot of information about trauma and its impact... many people in this room may have shared some of these experiences.

If at any time you are uncomfortable and feel that you need a break, please take care of yourself!

And, please, let a trainer know if you need any assistance.
1. Consider the ACEs study, the prevalence and impact of childhood trauma (i.e. behavioral, developmental, social, and educational)

2. Identify and summarize the core components of neurosequential development and how the components increase positive outcomes for students, families/caregivers and stakeholders for more effective classroom management, curriculum planning, and regulatory activities

3. Describe utilizing the Neurosequential Model in Education (NME) “lens” in education

4. Identify examples of practices to support all, some and few that are reflective of 6R’s of NME classroom.

Outcomes: We’ll all be able to....
When someone uses the term “trauma”... what do you envision?
Everyone at your table pulls one strip out of the bag.
Read your slip to the group.
Then everyone join into a dialogue around how your topic might or might not be considered trauma.
All of the sentence strips in the “bag” are examples of possible traumatic events and experiences.

Yet not all trauma leads to disaster— even when trauma has occurred, we have real reason for hope!

We can support families, staff, and our community to build resilience through relational interactions.
Did you consider some of the experiences “traumatic”? And if they were considered “traumatic” … what made them so?

Did you have additional questions during your dialogue?

Did you have some commonalities within your group?

Did you wonder why some children move through a traumatic experience and other children are significantly impacted?
“Resiliency is essentially the capacity to face a stressor or a life experience that’s challenging … without having any significant damaging impact on the individual. If a student suffers grief, they would feel loss and a normal range of emotions. But over time, it wouldn’t interrupt their ability to go to school and to lead a healthy life. That’s resilience.”

Dr. Bruce Perry
ChildTrauma Academy (CTA) is a not-for-profit organization based in Houston, Texas, working to improve the lives of high-risk children through direct service, research, and education. Dr. Perry began this work at the University of Chicago, and later moved the organization to Houston.

Dr. Perry and his colleagues realized that the information from research around childhood experiences was key to developing trainings and interventions that could help children who have experienced trauma.

By creating biologically-and-trauma-informed practice, CTA has advanced its mission to help children who have experienced trauma and neglect.

http://childtrauma.org/
Sequential/Neurodevelopment
Sequential Neurodevelopment

- The brain is undeveloped at birth
- The brain organizes from the “bottom” up - brainstem to cortex and from the inside out
- Organization and functional capacity of neural systems is sequential
- Experiences do not have equal “valence” throughout development
• The brain is always changing

• Plasticity is not uniform across all brain areas

• It takes less time, intensity and repetition to organize the developing neural systems than to re-organize the developed neural systems
TRAUMA

- Terrorism
- Sexual Abuse
- Divorce
- Lack of Financial Support
- Illness of Caretaker
- Physical Abuse
- Lack of Shelter, Food, Basics
- Neighborhood Violence
- Abandonment
- Death of Loved One
- Shooting, Stabbing, Jail
Three E’s

* Events
* Experiences
* Effects
Three E’s- Events

- Abuse- Physical, Emotional, Sexual
- Neglect
- Victimization
- Domestic / Community Violence
- Accident / Illness
- Natural Disaster
- War / Terrorism
- Removal from Home
- Single Incident vs. Chronic Events
Three E’s- Experiences

- Life Threatening / Overwhelming
- Or Not... (Chronic)
- A Subjective, Internal State
- Varies Between People
- Varies Over Time with the Same Person - Developmental Level
- Emotional Experience at the Time vs. Later
Three E’s- Effects

- Symptoms can include:
  - Nightmares
  - Flashbacks
  - Fight or Flight
  - Dissociation
  - Cutting
  - Hyperarousal
  - Misinterpretation of Cues
  - Overreaction
Adverse Childhood Experiences:
Influence on Health and Well-being over the Lifespan

Early Death

Disease, Disability, Social Problems

Adoption of Health Risk Behaviors

Social, Emotional and Cognitive Impairment

Disrupted Neurodevelopment

Adverse Childhood Experiences

Death

Conception
Prevalence

National sample of youth (2 – 17) reported (in the last year)

- 55% physically assaulted
- 40% victims of crime
- 14% victims of child maltreatment
- 9% witnessed domestic violence
- 8% victims of sexual assault
### Washington School Classroom (30 Students)

#### Adverse Childhood Experiences (ACEs)

- **6 students with no ACE**
- **5 students with 1 ACE**
- **6 students with 2 ACEs**
- **3 students with 3 ACEs**
- **7 students with 4 or 5 ACEs**
- **3 students with 6 or more ACEs**

- **58% (17) students with no exposure to physical abuse or adult to adult violence**
- **29% (9) of students exposed to physical abuse or adult to adult violence**
- **13% (4) of students exposed to physical abuse and adult to adult violence**

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**Population Average**
As the number of traumatic events experienced during childhood increases, the risk for the following health problems in adulthood increases:

- depression
- alcoholism
- drug abuse
- suicide attempts
- heart and liver diseases
- pregnancy problems
- high stress
- uncontrollable anger
- family, financial, and job problems
What is NME?

The **Neurosequential Model in Education** is a research-based platform behind the installation of systems that create environments that foster safe learning for youth that have experienced trauma and its consequences.

If education is based on neurological developmental levels, then children can learn and thrive in school, rather than fall farther behind.
What NME IS and is NOT

NME is

• a developmentally-informed, biologically-respectful approach to working with at-risk children
• a different way to organize and really see a child’s history, as well as current functioning, in order to understand their behavior

NME is not

• a specific therapeutic technique or intervention, (although many excellent strategies are used.)

It is the difference between a map at a roadside park and an electronic navigation system with all that entails.
Practical Principles of NME

• Work where the child is
• Chronological age may not match the emotional, cognitive, or social ‘age’
• Emotional, cognitive, and social ‘age’ are context and state-dependent
• Remember -- parts of the brain that are not being ‘used’ do not change
Using NME as a foundation for service delivery, all people who work with children potentially impacted by trauma can begin to see these children as what they are...CHILDREN.

Use your trauma lens to:
* Be Aware - look for changes, signs, symptoms of trauma
* Be Available - Listen and help them problem solve
* Be Resourceful - Consult with school mental health and know your resources.
How Do You Interpret What You See?
It’s all about … perception...

Let’s Zoom!

With your “zoom” partner:

What conclusions are you drawing from this activity?

What connections are you making to your work?
How might we support students who experience trauma?

• Six Core Strengths
• Six R’s of an NME Classroom
• The NME Classroom
Trauma and Learning

“Traumatic experiences can profoundly affect memory, language development, and writing. This can interfere with a child’s ability to master the basic subject matter that is the core of every school’s curriculum. Indeed, trauma-related responses can become embedded in, and therefore encumber, all aspects of the learning process...”

Impact of Trauma on Learning, Behavior and Relationships at School

• **Academic Performance:** organization, comprehension, memory, the ability to produce work, engagement in learning, ability to self-regulate attention, emotions and behavior.

• **Classroom Behavior:** ability to remain calm and regulate their behavior in the classroom. Ability to process social cues and convey feelings in appropriate manner.

• **Relationships:** preoccupied with physical and psychological safety; distrustful of adults and/or fellow students.

From: traumasensitiveschools.org
Teachers are not to blame for dysregulation.

Neither teacher *nor child* caused the dysregulation, but both will pay for the results - unless the classroom is crafted with *developmentally targeted strategies*. 
“Developmentally appropriate practice requires that teachers make decisions daily based on their knowledge of child development, taking into consideration individual learning differences and social and cultural influences.”

National Association for the Education of Young Children (NAEYC)
Security - Safety

“Security is the key to an optimal learning environment. “

Dr. Bruce Perry
Six Core Strengths

The building blocks in a child’s development...

Attachment
self-regulation
affiliation
awareness
tolerance
respect

Together they provide a strong foundation for his or her future health, happiness, and productivity.
Each table will draw one of the six core strengths. With your table mates, think more about your core strength and develop a “looks like - sounds like”.

Example: Attachment - looks like a baby bonding with his mother, and sounds like mom’s soft cooing voice and the baby reacting by looking at mom and smiling.
Hierarchy of a successful classroom

- CHALLENGE
- RELATIONSHIPS
- SUCCESS
- ENGAGEMENT
- SAFETY
Recipe for a Healthy Classroom

Six R’s of an NME Classroom - Every Classroom!
The 6 Rs of an NME Classroom

Relational (safe)
Relevant (developmentally-matched)
Repetitive (patterned)
Rewarding (pleasurable)
Rhythmic (resonant with neural patterns)
Respectful (child, family, culture)
Relational

Welcoming classroom

Family dinner
Relevant

Age appropriate curriculum

Fidgets to regulate
Rhythmic

Before homework - let’s swing

Drumming
Repetitive

Repeating a bedroom routine

Preview learning opportunities
Respectful

Everyone needs a brain break  
Allow children solitude
Rewarding

Personal contacts  Community/School recognition
## Organize & Integrate

<table>
<thead>
<tr>
<th>Each table selects one of the 6 R’s of an NME classroom.</th>
<th>Post all of your ideas on big paper.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Come up with as many additional examples as you can, putting one example on each post it.</td>
<td>Ask someone to be your spokesperson.</td>
</tr>
</tbody>
</table>
Every single human encounter is an opportunity to create a template of positive human interaction.
Questions? Comments? Connections?
Resources used...


Six Core Strengths for Healthy Child Development, CTA (Child Trauma Academy). Dr. Bruce Perry (2002).


Perry, B., Perry: Rhythm Regulates the Brain. Posted on April 11, 2014.

Trauma and Families. National Child Traumatic Stress Network - Child Trauma Home (http://www.nctsn.org)

(Trauma and Families: Fact Sheet for Providers)

Trauma, Brain and Relationships: Helping Children Heal, Section 6 - You make the difference:

SIX CORE STRENGTHS:

Importance of Regulation: