



Approaches to Trauma-Informed Teaching and Learning

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Pay attention.

Preparing ourselves for learning

How is your body feeling right now?

How is your mind feeling right now?

Now, breathe.

Learning outcomes

Explain

the relationship between trauma and learning

Give

examples of recommendations for how to use trauma-informed approaches in your interactions with students in order to promote their well-being

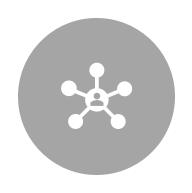
Engage

in dialogue with colleagues about how the current health crisis and recent examples of racial injustice may be shaping your teaching

Guidelines for Participation



Use of participation tools (chat, raise hand function, etc.)



Co-creating a safe learning environment with our peers



Session is being recorded



This does not replace medical or mental health advice for you, nor are you expected to provide such advice to your students

Agenda



Brief contextualization with Ignatian principles



Presentation on what trauma is, what it means for our teaching and how it impacts learning



Breakout rooms

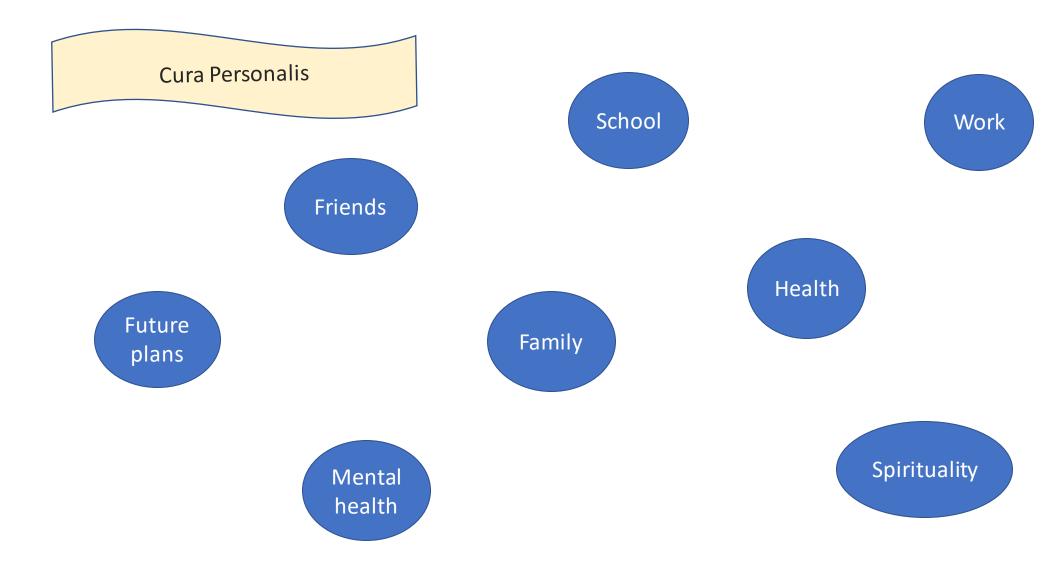


Larger group discussion

Setting the Stage: Cura Personalis



Setting the Stage: Cura Personalis



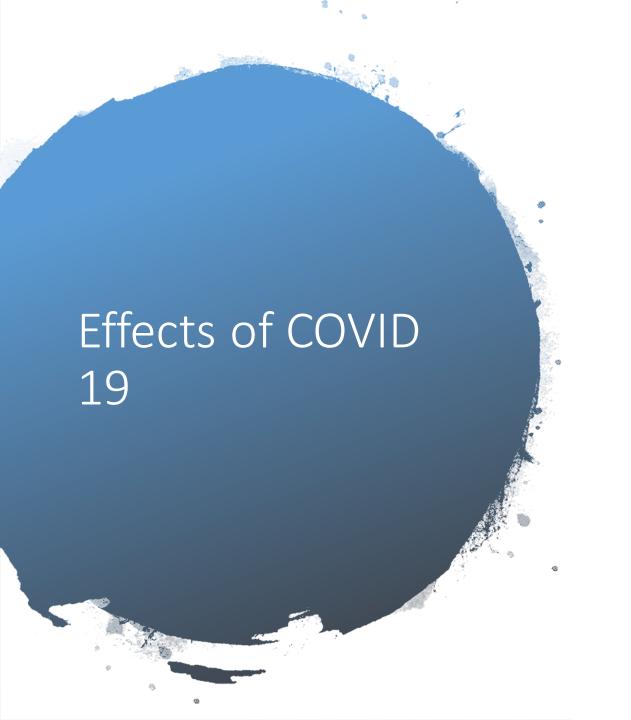
What is trauma?

"Trauma can be defined as any experience in which a person's internal resources are not adequate to cope with external stressors" (Hoch, Stewart, Webb, & Wyandt-Hiebert, 2015, as cited in Davidson & Northwest, 2017, p. 4)

Direct or vicarious experience of real or possible threats of harm or death through exposure to (a) the frailty of the human body or (b) the existence of evil. (Paraphrased from Dr. James Garbarino, LUC Department of Psychology)



Both COVID-19 and racism and racialized violence are two current overarching stressors for students, though others exist



Destabilizes life

Threatens self and loved ones

Forces continual uncertainty

Creates a dysfunctional learning environment



Negative physical effects

Negative mental effects

Persistent anxiety and worry on college campuses

Physical¹

- Coronary artery calcification²
- High diastolic blood pressure ³
- Lower-birth-weight infants⁴
- Cognitive impairment⁵
- Subjective and objective indicators of poor sleep⁶
- Higher levels of visceral fat⁷
- Higher mortality rates⁸*

*All Cited in D. Williams & Mohammed, 2013

Mental

- Correlation between perceived racial/ethnic discrimination and depression, ADHD, oppositional defiant disorder, and conduct disorder in younger students⁹
- Racial battle fatigue¹⁰

^{1.} Pascoe & Richman, 2009; D. Williams & Mohammed, 2009.

^{2.} Lewis et al., 2006

^{3.} Lewis et al., 2009

^{4.} Earnshaw et al., 2013

^{5.} Lewis et al., 2012

^{6.} Lewis et al., 2011

^{7.} Barnes et al., 2012

Barnes et al., 2008

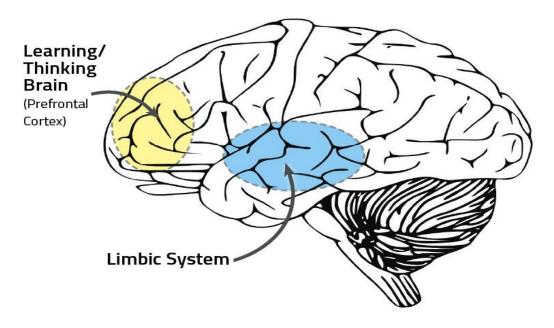
^{9.} Coker et al., 2009

^{10.} Smith et al., 2007

How Trauma Impacts Learning

Survival Mode: Flight/Fight/Freeze

Frontal lobe (Prefrontal cortex) goes offline Limbic system / mind and lower brain functions take over



Adapted from Carello, J., & Butler, L. D. (2015). Practicing what we teach: Trauma-informed educational practice. Journal of Teaching in Social Work, 35(3), 262-278.

Principles for Trauma Informed Teaching & Learning

- Physical, emotional, social, and academic safety
- Trustworthiness and transparency
- Support and connection
- Empowerment, voice, choice

Adapted from Carello & Butler, 2015; Fallot & Harris, 2009; SAMHSA, 2014; St. Andrews, 2013

Educators' scope of practice

YES	NO
empathy	counseling
trauma-informed, anti-racist, apply DEI principles	ignores equity concerns
recognize the probability of trauma in your classroom	try to assess individual trauma histories
develop self-awareness	overly focused on behaviors of others
curious about impact of trauma on pedagogy	rigidity or overreliance on what worked for you as a learner

Knowing Possible Signs in Our Students

- Difficulty focusing, attending, retaining, and recalling
- Tendency to miss a lot of classes
- Challenges with emotional regulation
- Fear of taking risks
- Anxiety about deadlines, exams, group work, or public speaking
- Anger, helplessness, or dissociation when stressed
- Withdrawal and isolation
- Involvement in unhealthy relationships or coping strategies

(Hoch et al., 2015, in Davidson & Northwest, 2017, p. 8)

Examples & Discussion

You will be dismissed into small breakout rooms.

Even numbered groups will discuss prompt 1, odd numbered groups will discuss prompt 2.

You will then have a representative report back to the larger group for a larger debrief.

Discussion Prompts

- **Discussion Prompt #1:** Current events reveal video footage of another person of color killed by police or vigilantes in the US. Your student has not turned in her recent assignments. What is your trauma-informed response?
- **Discussion Prompt #2:** How will you revise or evolve your syllabus to be responsive to the realities and resulting traumas related to the COVID-19 pandemic, health inequities, social unrest and systemic racism?

Summary of Key Recommendations

 Be available. Attend to and acknowledge the social-emotional challenges of this time, within reason

- Maintain structure, predictability, consistency
- Find ways to offer some choice and control to students
- Attend to equity, inclusion, accessibility
- Take care of yourself, model self-care for students



Know Your Resources

Student Wellness

- LUC's Wellness Center
- Behavioral Concerns Team

How can I learn more?

- University COVID-19 updates
- FCIP COVID-19 support
- Academic Continuity Team

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