The creation of supportive and healing environments for all children, particularly, the most vulnerable children, is vital to their ability to thrive and achieve their full potential.
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Introduction

All children want to live a happy life.

Adversity touches everyone. As our country, indeed our world, is coping with a pandemic and ever more frequent natural disasters, our need to care for the emotional well-being of ourselves and others has become a necessary priority. Stress, toxic stress and trauma are real and affect us all. Additionally, many communities struggling to manage the multiple challenges associated with natural disasters and COVID-19, are also facing issues of domestic violence, abuse, neglect and mental health challenges that have resulted in populations with high levels of Adverse Childhood Experiences (ACEs). Numerous studies have shown that the higher the ACEs scores, the greater the negative impact there will be on the child’s mental health, physical health, ability to connect to education, and prospects for life-success.

While there is much happening that is outside our control, there are many things we can do.

WE can make a difference.

The adults, and especially, the children in our communities need support and we can contribute positively toward the creation of healing environments right now. Children are often the most vulnerable population during times of adversity.
Community Impact

Adverse Childhood Experiences (ACEs) along with community-wide adversity and COVID-19 have left those who may not have the skills to cope the most susceptible to long-term mental and physical health challenges.

So, what can we do?

A lot! When we adults show up in supportive ways for children, we can meaningfully impact the trajectory of their life. We are the “medicine” that children need and make all the different on their path toward healing and thriving. “Another phrase we often use is you matter, and every moment matters. And you matter every moment,” says Dr. Christina Bethell. By learning the right set of tools, we can learn to recognize the signs of toxic stress or trauma and act to give our children a fighting chance to rise and thrive into the future.

This training series is designed for

Parents  Educators  Youth-Serving Agencies

By equipping the caregivers with the critical guidance needed in order to enhance the quality of care, we aspire to improve the mental health, physical health, resiliency, academic achievement and overall well-being of youth in our communities.

This resilience-focused initiative is designed, through an online heart-centered series, to provide parents, educators and youth-serving organizations with essential tools that can help set youth on a path to recovery.

How this will help

• This video series is designed to help you understand the impact of stress and how toxic stress affects children in your community and what you can do to help.
• This series will give you practical, personal self-care and child well-being tools to break some of these cycles.
• This series can help empower you to engage in supportive, healing-centered interactions with our youth.

**TOXIC STRESS**

TOXIC STRESS CAN OCCUR IN FAMILIES OR SCHOOLS, OR IT MAY BE THE RESULT OF LONG-STANDING INEQUITY AND SOCIAL PROBLEMS LIKE RACISM, SEXISM AND POVERTY.
How we got here

Local effort. Global application.

Thrive, a healing initiative of the North Valley Community Foundation (NVCF), is a collaboration of people, organizations and agencies in Butte County to address the impact of trauma across generations. In the wake of the devastating Camp Fire in 2018, Thrive developed the first of its kind mental health and child well-being focused curriculum to support the community’s vulnerable youth.

At Thrive, your mission is our mission. And we know you want to be a source of healing for the community: to support those children and families who are suffering due to repeated hardships. The path to healing can be overwhelming. Oftentimes, the support and resources you need get blocked by “red tape” barriers that create cracks in the system. It shouldn’t have to be this hard. At Thrive, you can find the collaborative support, resources and guidance you need to improve the lives of others.

How this will help

- Strengthening the network of protection, care and well-being of children
- Enhancing caregiver readiness and effectiveness
- Delivering clear and actionable training designed to meet caregivers where they are
- Increasing child well-being indicators via a scalable, cost-efficient, sustainable approach

“Our community has experienced trauma upon trauma during the last few years. This video series gives our frontline heroes working with youth additional tools they need to help transform trauma into growth and resilience.”

- Alexa Benson-Valavanis
  President and CEO,
  North Valley Community Foundation
How to use this training series

Through understanding key concepts and learning effective tools, we can support our youth toward a path of resilience, recovery and thriving.

**Designed to Fit Into Your Schedule**

Find a comfortable space ... pull up a seat ... grab a pen and notepad ... and settle in to this experience. We have designed this experience to fit into your life. Only have 10 minutes? That's OK. You can just watch one episode at a time. It is actually best digested over time and we recommend leaving time in between the episodes to process the videos and fully engage in the learning experience.

**Or, Watch it as a Group**

Another ideal application for this training series is to utilize and process the videos and material with a group. Learning socially, alongside others, in conversation together, is an effective and powerful way to integrate new material. The workbook and “Extending Learning” reflective questions included for each episode could serve as a guide for the group facilitator.

**Certificate of Completion**

The completion of the six episodes, 8-10 minutes each, along with the completion of the accompanying online questions, will result in an optional course certificate of completion.

**Warning**

If some of the content brings up distressing memories for you, we strongly encourage you to take a break when you need to, and talk to people you trust about your own reactions.
Meet the Instructors

We gathered a wide variety of experts to support this learning experience and we would like you to meet them.

**Dr. Devjani (Juni) Banerjee-Stevens**

Dr. Devjani (Juni) Banerjee-Stevens is a licensed psychologist and owner of Deer Park Counseling & Consulting. She is committed to helping individuals, organizations and communities heal from trauma, one relationship at a time.

**Matt Reddam**

Matt Reddam is the current school and community wellness advisor for Butte Butte County Office of Education and former policy and practice coordinator for Trauma Transformed. A regional expert on child traumatic stress and trauma informed systems, Matt is a clinician, advocate, trainer and consultant whose passion as a survivor drives the need to bring our systems into a state of equity and compassion.

**Dr. Christina Bethell**

Dr. Bethell is a professor in the Bloomberg School of Public Health at Johns Hopkins University, where she serves as the founding director of the Child and Adolescent Health Measurement Initiative (CAHMI) within the Department of Population, Family and Reproductive Health.

She is passionate about enabling data-driven partnerships and leveraging the new brain sciences, mindfulness and other mind-body methods to transform health and related services, with a focus on addressing childhood trauma, promoting positive health and advancing High Reliability Organizations.

She earned an MBA and an MPH from UC Berkeley and Ph.D. in public policy from the University of Chicago.
**Sheriff Kory L. Honea**

Kory L. Honea became the 31st sheriff of Butte County in May 2014. During his law enforcement career Sheriff Honea has held assignments in corrections, patrol and investigations. In 2000, Sheriff Honea transferred to the District Attorney’s Office as an investigator. In 2008 he became the chief investigator and held that position until his return to the Sheriff’s Office as undersheriff in 2010.

Sheriff Honea holds a Juris Doctorate from the Taft School of Law and is a member of the State Bar of California. He also holds an Associate of Arts degree from Butte College.

**Scott Dinits**

Scott Dinits works as the human resources director for the Boys and Girls Clubs of the North Valley and is also a co-director of the Ability First Sports Camp. Scott provides training and support to community-based organizations, parent workshops and expanded learning programs for youth development practices, Trauma Informed and Responsive Systems and Community Resiliency Practices.

**Dena Kapsalis**

Dena Kapsalis is the director of student services at Paradise Unified School District. Prior to the Camp Fire, Dena was a passionate advocate and local leader for systemic implementation of Trauma Informed Practices. Since the Camp Fire, Dena has lived experience “leading in crisis” and has a deep understanding of how trauma impacts both students and adults.
Farshad Azad

Grandmaster Farshad Azad is a 9th Degree Black Belt, the chair of the board of directors of the North Valley Community Foundation, as well as the owner of Azad’s Martial Arts Center in Chico and Azad’s International Inc., an international investment company. He is also currently on the board of directors of the American Red Cross and Foundation Board at Butte College.

Grandmaster Azad teaches martial arts for children and adults of all ages and abilities. He conducts talks and presentations around the world on personal empowerment and growth, business development and efficiency, the power of philanthropy and public and private sector partnerships.

After earning his Master of Public Administration from Chico State in 1990, he has been lecturing part time in the Department of Kinesiology — teaching in the department longer than any other faculty. He served on the University Advisory Board from 2006 to 2018 and received Chico State’s Distinguished Alumni Service Award in 2015.

Ada Terry

Ada Terry is the children’s bereavement coordinator for Sutter Health Sutter Care in Yuba City. Ada has worked for Sutter for the past eight years, initially as a medical social worker with hospice. Ada transitioned into the position of the children’s bereavement coordinator. In her position as children’s bereavement coordinator, Ada developed a framework for working with children, youth and their families experiencing anticipatory grief and post-loss grief centering on grief education, and the identification of coping skills through the integration of art.

With a Master of Social Work degree from California State University, Marriage and Family Therapy and Theology from Oral Roberts University, Ada is currently pursuing her Ph.D. from Walden University in Disaster and Crisis Intervention work.
Anita Barker

Anita Barker is in her 19th year as the athletic director for Chico State’s 13 intercollegiate athletics programs. During this time, Chico State Athletics has ranked competitively among the top 10 percent of Division II athletic departments nationwide and collected five CCAA Commissioner’s Cups. In addition to maintaining competitive sports programs, Barker continues to be committed to improving the student-athlete experience at Chico State through a focus on the Student Athlete Advisory Council (SAAC), and spearheading efforts to keep Wildcat student-athletes confident, responsible and resilient.

Prior to her current position, Barker served as the associate athletic director for seven years. Barker graduated from Ohio Northern University in 1985 and received her master’s degree from the University of Arizona in Tucson in 1987. She has worked at all three divisions in the NCAA. Barker and her husband, Scott, the Wildcats’ head athletic trainer, have two children, Luke and McKena — both former Chico State athletes.
Discussion Guide Authors

Wendy Baron

Wendy Baron is co-founder and chief officer, Social and Emotional Learning (SEL), Emeritus, New Teacher Center. She is a teacher, author, researcher and SEL consultant. Currently, Wendy co-facilitates the statewide and Northern California SEL Communities of Practice, serves on the newly formed California Department of Education SEL Taskforce, and collaborates with district and school leaders to design and implement SEL within a system of support for educators, students and families.

Sandra Azevedo

Sandra Azevedo, MA, PPS, is a coordinator of continuous improvement for Butte County Office of Education. Sandra is a lead for Social and Emotional Learning (SEL) in her county and is on the California SEL Community of Practice lead team. Sandra assisted in the development of “Social & Emotional Learning in CA: A Guide to Resources and Social and Emotional Learning Embedded in Core Education Documents.”
Module 1: Understanding Trauma
How Trauma and Enduring Stress Affects Children

Guiding Questions

• What are causes of trauma or Adverse Childhood Experiences (ACEs) and how can we recognize the signs?
• What is toxic stress and how does it differ from positive stress?
• What is the impact of trauma and chronic stress on children?
• What are positive childhood experiences (PCEs) and how do they buffer adversity?
• What can you do to help?

Trauma is Real

Adverse Childhood Experiences (ACEs) are primarily due to:
• Not feeling safe
• Not having stability
• Not feeling proactively nurtured

Emotional Responses to Threats

<table>
<thead>
<tr>
<th>ABUSE</th>
<th>NEGLECT</th>
<th>HOUSEHOLD DYSFUNCTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical</td>
<td>Physical</td>
<td>Mental Illness</td>
</tr>
<tr>
<td>Emotional</td>
<td>Emotional</td>
<td>Mother treated violently</td>
</tr>
<tr>
<td>Sexual</td>
<td></td>
<td>Substance abuse</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Divorce</td>
</tr>
</tbody>
</table>

In addition:

Bullying, discrimination, war, famine, natural disasters, serious accidents and other life-altering events can cause trauma in children and adults.
How Do Our Brains React to Danger?

The amygdala sounds the alarm to a real or perceived threat. The body releases hormones adrenaline and cortisol that ready the body for flight, fight or freeze. As the body readies itself, we also have emotional responses to threats.

Three Levels of Stress

Not all stress is bad. Some stress is even considered to be positive, increasing our attention and interest. “Green light” stress is the type we encourage because it can lead to some real joy in our lives. This includes things like the first day of school, taking a test, being at the starting line for a race or planning a big event. Positive stress is often associated with anticipation of some level of performance and emotions such as excitement, enthusiasm, focus and optimism.
We need positive stress to develop in a healthy way. We need it to become thriving adults.

Another type of stress is considered *tolerable*. Although this type of stress is associated with events or situations that may cause unpleasant emotions such as grief, sadness, discouragement, anxiety and fear, with support from caring family, friends and other support systems, recovery occurs, and we return to our natural state of health and wellbeing.

**Toxic** stress, on the other hand, is prolonged, with constant release of stress hormones, cortisol and adrenaline, readying the body for fight, flight or freeze. Emotions such as anxiousness, alienation, worry, anger and depression are relentless, and over time become toxic stress that can have a negative impact on attention, working memory, decision-making and emotion regulation.

### Emotional Responses to Threats

**Fight:** Acting out, aggression, bullying, defiance, critical, angry, sarcastic, disrespectful

**Flight:** Withdrawn, stubborn, indifferent, silent, hiding, sulking, pouting, complaining, closed body language

**Freeze:** Zoning out, sleeping, shutting down, over-explaining, giving excuses, disassociation

**Fawn:** Acting in appeasing or seemingly compliant ways to the source of abuse or neglect as a way to secure a sense of safety
**Toxic:** Strong, frequent, and prolonged activation of stress responses in the absence of protective supports

**Tolerable:** More serious, yet temporary stress responses from which the brain and organs can recover

**Positive:** Brief increases in heart rate and mild elevations in hormone levels

**Red Light Warning:** If we’re in a toxic situation for too long, our physical and emotional health will decline. This is even more true if we don’t feel like we have anything or anyone who can give us a break from that stress.

The prolonged nature of COVID-19, along with other stressors, such as wildfires, puts many individuals at risk for experiencing the negative consequences associated with toxic stress.

Let’s dive deeper. Examine this graphic, with examples of stressful circumstances, on the impact of toxic stress and complex trauma on our bodies and brain development.

<table>
<thead>
<tr>
<th>Green Light Stress</th>
<th>Yellow Light Stress</th>
<th>Red Light Stress</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Positive Stress</strong></td>
<td><strong>Tolerable Stress</strong></td>
<td><strong>Toxic Stress</strong></td>
</tr>
<tr>
<td>Normal and essential part of healthy development</td>
<td>Body’s alert systems activated to a greater degree</td>
<td>Occurs with strong, frequent and prolonged adversity</td>
</tr>
<tr>
<td>Brief increases in heart rate and blood pressure</td>
<td>Activation is time limited and buffered by caring adult relationship</td>
<td>Disrupts brain architecture and other organ systems</td>
</tr>
<tr>
<td>Mild elevations in hormonal levels</td>
<td>Brain and organs recover</td>
<td>Increased risk of stress related disease and cognitive impairment</td>
</tr>
<tr>
<td>Examples: tough test at school, playoff game</td>
<td>Examples: death of a loved one, divorce, natural disaster</td>
<td>Examples: abuse, neglect, caregiver substance abuse</td>
</tr>
</tbody>
</table>
Stress takes a toll on physical and mental health, including a child’s neurodevelopment, causing developmental trauma.

**Emotional Responses to Threats**

**BEHAVIOR**
- Lack of physical activity
- Smoking
- Alcoholism
- Drug use
- Missed work

**PHYSICAL & MENTAL HEALTH**
- Severe obesity
- Diabetes
- Depression
- Suicide attempts
- STDs
- Heart disease
- Cancer
- Stroke
- COPD
- Broken bones

**Positive Childhood Experiences Change Everything**

Children with higher rates of Positive Childhood Experiences (PCEs) had higher rates on tests of cognition, language, social skills, math and reading and a decrease in mental health diagnoses, behavioral problems, sleep problems and problems with nutrition or drug use.
What are considered Positive Childhood Experiences?

We know Adverse Childhood Experiences (ACEs) threaten child wellbeing. Now we have research showing that Positive Childhood Experiences (PCEs) - things we can do today and everyday - protect children facing ACEs to avoid harm.

New research shows that the seven PCEs illustrated here reduce the risk of depression, poor mental health, loneliness in adulthood.

Get access to the research paper here.


https://jamanetwork.com/journals/jamapediatrics/fullarticle/2749336
Positive Childhood Experiences build resiliency and are the “remedy” for trauma.

We can support students, families and communities by fostering Positive Childhood Experiences. Surrounding children with supportive adults can help build the capacity to withstand adversities.

“Children with higher rates of positive childhood experiences (had higher rates on tests of cognition, language, social skills, math and reading, and a decrease in mental health diagnoses, behavioral problems, sleep problems, and problems with nutrition and drug use.”

- Dr. Christina Bethell

Key Learnings

• Stable nurturing relationships foster the development of healthy circuitry.

• When children join group sports, engage in activities they are good at and have supportive relationships, their capacity to withstand things like fires, COVID-19 and other adversities increases.

• Positive Childhood Experiences are the “remedy” for childhood trauma and contribute to multiple positive outcomes for children.

YOU Can Make a Difference

When we’re able to sit with a child and work with him or her on an individual level in the moment, it has a profound impact on neurodevelopment. The result? A beneficial impact on how they see the world around them.

Suggestions for How to Put this into Practice with Children

“Protective factors, or characteristics that enable individuals to transform adversity and develop resilience include caring relationships that convey compassion, understanding, respect, and interest; are grounded in listening; and establish safety and basic trust.”

- Bonnie Bernard, M.S.W.
• Recognize the signs of trauma

<table>
<thead>
<tr>
<th>Young Children (Birth - 5)</th>
<th>Elementary Age Children (6 - 12)</th>
<th>Adolescent Children (13 - 28)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Irritability, fussiness</td>
<td>Difficulty paying attention</td>
<td>Talking about trauma incidents repeatedly or denying it happened</td>
</tr>
<tr>
<td>Startling easily, difficulty in calming back down</td>
<td>Being quiet or withdrawn</td>
<td>Refusal to follow rules, talking back, resisting</td>
</tr>
<tr>
<td>Frequent tantrums</td>
<td>Frequent tears or sadness</td>
<td>Frequently tired, sleeping more or less than peers, nightmares</td>
</tr>
<tr>
<td>Clinginess</td>
<td>Talking often about scary feelings, ideas, traumatic events</td>
<td>Risky behaviors (e.g., using drugs, alcohol, running away from home, getting in trouble with the law)</td>
</tr>
<tr>
<td>Activity levels much higher or lower than peers</td>
<td>Fighting with peers and/or adults</td>
<td>Fighting</td>
</tr>
<tr>
<td>Repeating traumatic events in dramatic play or conversation</td>
<td>Changes in school performance</td>
<td>Not wanting to spend time with friends</td>
</tr>
<tr>
<td>Excessive thumb sucking, bed-wetting</td>
<td>Eating more or less than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Headaches and/or stomachaches</td>
<td></td>
</tr>
</tbody>
</table>

- Adapted from SAMHSA

Substance Abuse and Mental Health Services Administration

• Focus on the 3 Rs: Routines, Relationships and Regulation

- Help a child be seen and feel safe. Be present and connect with eyes, ears and heart

- Establish routines and rituals that create a sense of predictability and safety and lower anxiety and stress. Perhaps there is a certain greeting ritual you create together such as a high five or fist bump.

- Integrate healthy living habits and positive social interactions into daily life.

- Check in often about feelings. Inquire gently. Respond with encouragement, such as “I see” and “Is there more?” Ask open-ended, reflective questions and give space for a response. Listen with empathy, compassion and non-judgement. “I can imagine you might be feeling ...” “That must have been very scary.” “I am here for you.”

- Encourage children to share their feelings through a variety of ways such as:
  ○ *Describe how you’re feeling as a type of weather (cloudy, rainy, stormy, sunny)*
- If your feelings were a color, what color would they be?
- If your feelings were an animal, what animal would they be?
  ♦ After sharing, ask what might be some reasons for those feelings? Respond with encouragement, such as “uh huh” or “I see” or “Is there more?”

Model, teach and practice emotion regulation and stress reduction strategies. Some examples include:

- Pausing to take three deep breaths
- Coming back to your senses 5-4-3-2-1 Calming Technique
- Going for a walk, run, bike ride, etc.
- Doing something creative - an art project, playing an instrument
- Listening to music
- Journaling
- Mindfulness activities Mindfulness Activities for Children and Teens
- Movement and body breaks Go Noodle
- Reading a book
- Storytelling
- Talking about feelings Name it to Tame it
- Doing a progressive relaxation or body scan Body Scan Meditation by GoZen

Help develop a sense of safety and belonging by demonstrating your love, caring, and support.

“When a child is met with loving, attuned, and responsive relationships on a moment-by-moment basis, they are literally learning that life is safe; that they matter; and that others can be trusted.” (Dr. Bethell)

If you are a parent, take extra care to build a strong and healthy attachment with your child. Consistent warmth, care and responsiveness throughout a child's development, and especially in the first three years of life lay the foundation for a lifetime of mental health and wellbeing. (Dr. Bethell)

Cultivate supportive relationships with and among other children. Be present with younger children and set guidelines to ensure cooperation and safety. Empower the child — give voice and choice to re-establish a sense of control.
- Ask what activities are fun and interesting and then engage in activities they enjoy, and are confident and competent in doing. Laugh and have fun together.

- Take care of your own wellbeing. If you are struggling to manage your own stress, you’ll have a harder time supporting your child.

“You matter! Every moment matters! And you matter every moment!”

**Extending Learning/Discussion Questions**

Take a moment to reflect individually and, if possible, discuss with others:

1. **What are some of your own experiences regarding positive and tolerable stress? What helped you recover from tolerable stress?**

2. **What would you look for in a child to differentiate between tolerable stress and toxic stress?**

3. **What emotion regulation strategies do you use when you are feeling stressed? What new strategies might you try so you can expand what you model, teach and practice with children?**

4. **Think of a child in your own life. What might you do tomorrow to cultivate Positive Childhood Experiences (PCEs)?**
Additional Resources

1. 5,4,3,2,1 Calming Technique
   https://www.evergreenyfs.org/Youth%20Anxiety%20Handouts.pdf
2. Mindfulness Activities for Children and Teens
   https://positivepsychology.com/mindfulness-for-children-kids-activities
3. Go Noodle
   https://gonoodle.com
4. Daniel Siegel Name it to Tame it
   https://youtu.be/ZcDLzppD4Jc
5. Body Scan Meditation by GoZen!
   https://youtu.be/aIC-lo441v4
Module 2: Knowing the Signs
Recognizing the Signs of Stress and Trauma

Guiding Questions

• How do we identify stress and trauma in children?
• How does stress show up differently in preschool children, elementary children and adolescents?
• How can we shift to a resilience lens with children?

Connection Between Stages of Psychosocial Developments, Stress and Trauma

Identifying the signs of stress and trauma in children can be difficult, as children often don’t have the language to describe what is happening inside them. Thus, it can be confusing to differentiate between typical childhood behaviors and those caused by toxic stress or trauma. It can be even harder, given that children respond to stress differently depending on their developmental level.

In Module 1, we identified the signs of trauma in young children, elementary age children and adolescents. Let’s go deeper into children’s response to stress and trauma (e.g., abuse, neglect, household dysfunction, a natural disaster or a life-threatening illness or injury), using the lens of child development. Erik Erikson identified eight stages of psychosocial development that healthy individuals pass through during childhood to adulthood.

Stages of Psychosocial Development

- Infancy: trust vs. mistrust
- Early Childhood: autonomy vs. shame & doubt
- Preschool: initiative vs. guilt
- School Age: industry vs. inferiority
- Middle Adulthood: generativity vs. stagnation
- Young Adulthood: intimacy vs. isolation
- Adolescence: identity vs. role confusion
- Maturity: ego integrity vs. despair
Stress and Trauma in Young Children (18 Months to 2-3 Years Old)

Young children are typically in stage two of psychosocial development, Autonomy vs. Shame and Doubt. With this stage, gaining a sense of personal control and independence becomes increasingly important. Preschoolers need an environment that allows them to feel safe enough to take risks in ways that allow them to learn and grow.

Strong, frequent and prolonged stress, including receiving punishment for simple mistakes, will likely interrupt the child's healthy development of confidence in their own abilities. Instead, a sense of inadequacy and self-doubt may result.

<table>
<thead>
<tr>
<th>Psychosocial Stage 2</th>
<th>Key Question</th>
<th>Signs of Stress</th>
<th>Indicators of Trauma</th>
</tr>
</thead>
</table>
| Autonomy vs. Shame & Doubt | “Can I do things for myself or am I reliant on the help of others?” | • Poor eating habits and weight loss  
• Loss of previously acquired skills such as speech and toileting skills  
• Unpredictability | • Nightmares, night terrors or fear of going to sleep  
• Traumatic play representing the child’s continued focus on the event |

Stress and Trauma in the Preschool Years (Between the Ages of 3-5)

This third stage of psychosocial development is characterized by Initiative vs. Guilt. In this stage, children assert their power and control over the world through exploration, play and social interactions as they develop a sense of purpose. During this stage, children take initiative by planning activities, accomplishing tasks and facing challenges.

Children need to be supported in self-directed play and making appropriate choices during this stage. Caregivers who are discouraging or dismissive may cause children to feel ashamed and embarrassed. Overly directed children may struggle to develop healthy initiative and confidence and when mistakes are made, they may interpret those as a sign of personal failure — left with the sense that they are “bad.”

<table>
<thead>
<tr>
<th>Psychosocial Stage 3</th>
<th>Key Question</th>
<th>Signs of Stress</th>
<th>Indicators of Trauma</th>
</tr>
</thead>
</table>
| Initiative vs. Guilt | “Am I good or bad?” | • Irritability and fussiness  
• Unwillingness to take risks or to try something new  
• Overdependence on help from others  
• Unwillingness to play in the absence of a family memeber or trusted adult | • Retelling of the traumatic event  
• Being overwhelmed by their feelings of fear or sadness  
• Excessive thumb sucking or bed-wetting  
• Loss of previously acquired skills and abilities |
Stress and Trauma in Elementary Age Children (Ages of 6-11)

Elementary age children enter the fourth stage of psychosocial development, *Industry vs. Inferiority*. In this stage, children are striving for competence — especially in school, as their social world expands. It is through social interactions that children develop a sense of pride in their accomplishments and abilities. By feeling competent and capable, children form a strong self-concept.

Those children who receive little or no encouragement from parents, teachers, or peers will doubt their ability to be successful, thus feelings of failure and inferiority result. Children who struggle with schoolwork may have a more difficult time developing a sense of sureness. If children feel insecure, they may act out in unpredictable ways and not be aware of what they are doing, or why. It may even appear that a child is overreacting to something by demonstrating big feelings over a relatively small event.

<table>
<thead>
<tr>
<th>Psychosocial Stage 4</th>
<th>Key Question</th>
<th>Signs of Stress</th>
<th>Indicators of Trauma</th>
</tr>
</thead>
</table>
| Industry vs. Inferiority | “How can I be good?” | • Feelings of inadequacy and inferiority  
• Less likely to try new things and more likely to assume their efforts will not “measure up”  
• Difficulties paying attention and learning at school | • Sleep disturbances such as difficulty falling asleep, fear of sleeping alone and/or nightmares  
• Complaints of headaches or stomachaches without obvious cause  
• Engaging in unusually reckless or aggressive behavior  
• Having a hard time managing impulses  
• New behaviors |

Signs of Stress and Trauma in Adolescents (Ages 12-18)

*Identity vs. Confusion* is the fifth stage of psychosocial development. Adolescents are exploring their independence, developing their identity, and determining a sense of direction in life. Friends, social groups, schoolmates, societal trends and pressures all play a part in shaping identity in this stage.

Those adolescents who are not allowed the freedom to explore or test out different identities may end up disappointed, confused and unsure about who they are and what they like.
<table>
<thead>
<tr>
<th>Psychosocial Stage 5</th>
<th>Key Question</th>
<th>Signs of Stress</th>
<th>Indicators of Trauma</th>
</tr>
</thead>
</table>
| Identify vs. Confusion | “Who am I?” | • Not having a clear path forward or direction in life  
• Drifting from one relationship to another  
• Feeling unsure about what social groups to associate with  
• Struggling with decisions about personal style and interests | • Feelings of guilt and shame about a traumatic event  
• May have fantasies about revenge and retribution  
• Feeling self-conscious about their emotional responses to the event  
• Feeling fearful, vulnerable and concerned about being labeled abnormal or different from their peers  
• Withdrawal from their family and friends  
• Having decreased appetite, difficulty sleeping, anxiety or irritability  
• Engaging in high-risk behaviors such as:  
  - Self-destructive or accident-prone behaviors  
  - Aggression  
  - Excessive alcohol or substance use |

No matter what stage of psychosocial development of the child, trauma has impact across multiple dimensions including brain development and cognition, physical and mental health, and our emotional nature, behavior and quality of relationships.
With the psychosocial development stages in mind and a deeper understanding of the signs of stress and trauma in each stage, we turn our attention to cultivating resilience — a positive, adaptive response in the face of significant adversity.

**Impact of Childhood Trauma**

**Cognition**
- Impaired readiness to learn
- Difficulty problem-solving
- Language delays
- Problems with concentration
- Poor academic achievement

**Brain development**
- Smaller brain size
- Less efficient processing
- Impaired stress response
- Changes in gene expression

**Physical health**
- Sleep disorders
- Eating disorders
- Poor immune system functioning
- Cardiovascular disease
- Shorter life span

**Behavior**
- Poor self-regulation
- Social withdrawal
- Aggression
- Poor impulse control
- Risk-taking/illegal activity
- Sexual acting out
- Adolescent pregnancy
- Drug and alcohol misuse

**Emotions**
- Difficulty controlling emotions
- Trouble recognizing emotions
- Limited coping skills
- Increased sensitivity to stress
- Shame and guilt
- Excessive worry, hopelessness
- Feelings of helplessness/lack of self-efficacy

**Mental health**
- Depression
- Anxiety
- Negative self-image/low self-esteem
- Posttraumatic Stress Disorder (PTSD)
- Suicidality

**Relationships**
- Attachment problems/disorders
- Poor understanding of social interactions
- Difficulty forming relationships with peers
- Problems in romantic relationships
- Intergenerational cycles of abuse and neglect

**Brain development**
- Smaller brain size
- Less efficient processing
- Impaired stress response
- Changes in gene expression

**Impact of**

**Trauma**

**A Resiliency Lens**

“Protective factors, or characteristics that enable individuals to transform adversity and develop resilience including caring relationships that convey compassion, understanding, respect, and interest, are grounded in listening, and establish safety and basic trust.”

- Bonnie Bernard
When a child experiences adversity that may be overwhelming, we can foster their strengths and help them develop healthy coping strategies by shifting our own perspective from a deficit orientation to one with a resiliency lens. We know from research at the Center on the Developing Child at Harvard that “resilience depends on supportive, responsive relationships and mastering a set of capabilities that can help us respond and adapt to adversity in healthy ways. It’s those capacities and relationships that can turn toxic stress into tolerable stress.” (Shonkoff, Director)

**We start by shifting from judgment to curiosity. From...**

“**What’s wrong with you?**”

**to**

“**What’s happened to you?”**

---

**For Key Reminders**

- Stress shows up differently in children depending on their developmental level, and the severity, frequency and length of the stressor.
- Behavior can be seen as an indicator of what has happened to someone rather than an indicator that something is wrong with them.
- A non-judgmental, non-punitive approach can support children.
- Listening is vital. It shows you are present and that you care.
Suggestions for How to Put this into Practice with Children

- Review and save this handout from the National Child Traumatic Stress Network that discusses age-related reactions to trauma.
- Focus on building a strong and positive relationship with the child. Adjust your responses to match the psychosocial developmental level of the child. Build resilience.

**Preschool Age Children**
- Provide opportunities for independence. Allow children to make choices about food, clothing, and toys.
- Reassure that trying your best is what's most important. When a child is frustrated and ready to give up, counter negative self-talk (“I can’t do that”) with ... *yet.*
- Reinforce when you see the child persevering, trying something again — maybe in a different way. “Mistakes are an opportunity to learn.” “I saw you tried a new way to solve that.” “I see you’ve been practicing, and it’s paying off.”
- Be supportive, not punitive.
- Offer opportunities for children to play together in safe, kind, fun ways.

**Elementary Age Students**
- Encourage children to take initiative (e.g., planning activities) and explore capabilities (e.g., taking on new tasks and facing challenges).
- Support problem-solving in ways that empower vs. being overly directive.
  - What do you want to have happen?
  - What would your best self do in this situation?
  - Would you like any ideas?
- Help the child consider pros and cons in order to make responsible and ethical choices.
- Encourage physical and imaginative play.
- Reinforce using mistakes as an opportunity to reflect, learn, and grow — a natural part of life.

**Adolescents**
- Provide encouragement to explore personal identity.
- Be open and non-judgmental when an adolescent shares confusion about decisions, personal style and relationships.
Consider the 2x10 strategy which is simply spending 2 minutes per day for 10 days in a row talking with a child about anything they would like.

- Offer suggestions in an invitational way with several choices, as to show confidence in decision-making ability.
  - I wonder if any of these ideas might work for you?
  - Sounds like you’re trying to decide ______. What are some factors you’re considering?
  - What might happen if you did _____?

Consider the 2x10 strategy which is simply spending 2 minutes per day for 10 days in a row talking with a child about anything they would like.

**Extending Learning/Discussion Questions**

Take a moment to reflect individually and, if possible, discuss with others:

1. *What behaviors have you observed in children that you think are indications of stress associated with a particular stage of psychosocial development? What are some signs?*

2. *What impacts of trauma have you seen in children? What did you notice in terms of brain development, cognition, mental health, physical health, relationships, emotions and behavior?*

3. *What have you done or could you do to foster resilience in a child?*
Additional Resources

1. The Eight Stages of Human Development
   https://www.verywellmind.com/psychosocial-stages-2795743

2. Erik Erikson’s Eight Stages of Psychosocial Development, Article and graphic

3. Impact of Childhood Trauma

4. Harvard University Center on the Developing Child
   https://developingchild.harvard.edu/science/key-concepts/toxic-stress/

5. Beacon House
   www.beaconhouse.org.uk

6. National Child Traumatic Stress Network
   https://www.nctsn.org/resources/age-related-reactions-traumatic-event
Module 3: Help Yourself First

“To be a good parent, you need to take care of yourself so that you can have the physical and emotional energy to take care of your family.”

—Michelle Obama
Help Yourself First

Guiding Questions

• Why is it vital to engage in self-care before child care?
• How can we recognize when we need to take a break?
• What are some effective stress management strategies?
• What are the dimensions of self-care and what practices might I integrate into my life?

Take Care of Yourself

You can’t pour from an empty cup

“If you can’t take care of yourself, you can’t take care of others.”

It is hard! Why is it so important?

Unchecked distress can have a negative impact on the very people you are trying to help, and you may be unintentionally retraumatizing them.

Many of us may be experiencing stress, toxic stress and symptoms of trauma.
I need a minute...
Try one of these three practical strategies when you are feeling stressed.

1. *Square Breathing: Calming Stress and Anxiety*

   ![Square Breathing Diagram]

   • Square breathing is a type of breathwork that can support you in the following ways:
     • Connecting you more deeply with your body
     • Calming your nervous system so you can think clearly
     • Decreasing stress in your body
     • Shifting from the “fight, flight, freeze” reactive response to the “rest and digest” relaxation response

2. *Wise Mind: Pause, Inquire, Choose*

   When in a challenging situation, take a few deep breaths and ask yourself: What am I *feeling*? What are my emotions telling me?

   Pause, take a few more deep breaths and ask yourself: What am I *thinking*? What is my narrative, my story about this? Am I bringing any past perceptions into this moment?

   Imagine your wise self, the one who is calm, has a broad perspective and chooses the best response for the circumstance.
3. Self-Compassion: Treat yourself with kindness and understanding

When things are hard, it is easy to spiral into self-criticism and negative thinking. That's when we especially need the third tool, a Self-Compassionate Point of View (POV).

<table>
<thead>
<tr>
<th>Mindfulness of Stress and Suffering</th>
<th>Common Humanity</th>
<th>Self Monitoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recognizing when you are stressed or struggling, labeling your emotions, and exploring the underlying causes objectively.</td>
<td>Recognizing that you are not alone with your suffering. Others have struggled with similar situations or difficulties.</td>
<td>Being supportive, kind, and understanding with yourself during a hard time. Noticing and reframing critical or negative self-talk.</td>
</tr>
<tr>
<td>What am I feeling? What may be contributing to how I'm feeling?</td>
<td>How is my stress, situation or setback universal — common to humanity?</td>
<td>What would I say to someone I care about who is suffering?</td>
</tr>
</tbody>
</table>

Self-compassion allows us to be more resilient in the face of challenge, more likely to succeed, and provides enormous inner strength. Additionally, modeling self-compassion for children is very important as it gives them a tool for managing difficult situations.
“Bridge Maintenance”: Ongoing Self Care

Key reminders for self-care:

1. **Reduce traffic.** What are you saying no to? (plans, deadlines, extra duties) What are you saying yes to? (time off, rest)

2. **Set healthy boundaries.** Check out the Mental Health Self Care Wheel. Consider all elements of self-care: physical, psychological, emotional, spiritual, personal, and professional. Are you getting good sleep, practicing mindfulness, scheduling regular health care appointments, planning a vacation? What self-care practices will serve you?

3. **Access a support system.** Draw on friends, family and supportive relationships. Getting outside perspective can help, too.

-Mental Health Self Care Wheel

- Columbia River Mental Health Services
“If you’re going to take on the responsibility to help someone else, you have to be able to help yourself first.”

Suggestions for How to Put This into Practice for Yourself

- **Cultivate** awareness of how you are feeling. When you notice your stress level has increased, breathe and tap into your three tools and self-care practices.

- **Review** the six dimensions on the Mental Health Self Care Wheel. Celebrate the areas where you ARE taking good care of yourself, identify 2-3 actionable self-care practices to incorporate into your life, and jot down how you will know if you are successful. Enlist a friend or family member to support you on your path.

- **Explore** Dr. Dan Siegel’s “Healthy Mind Platter,” “Everyday Mindsight Tools” and free resources to support health and wellbeing.

- **Practice** Mindfulness-Based Stress Reduction, a program founded by Jon Kabat-Zinn at the University of Massachusetts Medical School.

- **Review** these resources from the California Office of the Surgeon General that emphasize the core practices of self-care as: healthy relationships, sleep, nutrition, exercise, mindfulness and mental health.

- **Model** and teach children how to use these tools and practices, too.

---

**Extending Learning/Discussion Questions**

**Take a moment to reflect individually and, if possible, discuss with others:**

1. **What are some of the signals you notice in yourself that might indicate you need to “take a minute”**?

2. **Considering the three tools of square breathing, “wise mind” and self-compassion, what most resonates as helpful to you?**

3. **Recognizing we all need to “monitor traffic on our bridge,” what is one self-care practice you can do to reduce stress and stay healthy?**
1. Dr. Daniel Siegel’s Healthy Mind Platter
   https://www.drdansiegel.com/resources/healthy_mind_platter/
2. Dr. Daniel Siegel’s Everyday Mindsight Tools
   https://www.drdansiegel.com/resources/everyday_mindsight_tools/
3. Mindfulness-Based Stress Reduction
   https://palousemindfulness.com/MBSR/week1.html
4. California Office of the Surgeon General Adult Self Care
Module 4: Empowering Children
How to Empower our Children

Guiding Questions

• Why is it important for children to express their emotions?
• How can we support children to express and understand their emotions?
• How can we help children cultivate compassion for themselves and others?
• How can we support children in developing resilience?
• How can we help children restore their emotional state to one of balance?

“I think the best way to help children cope is by giving them the ability and the skills and the mental state that they need to really feel their own power inside.”

- Farshad Azad

Emotional Literacy

Reserve Judgment

Emotions flow continuously within us, only children may not have learned that emotions are information, and the key is exploring what they mean and giving them a name. Once we recognize that we’re having an emotion, we get curious about the underlying cause. Here, we step back and observe what we are thinking, feeling and sensing in our body and ask ourselves, “What is this emotion trying to tell me?” Next, we try to label that emotion. Am I feeling scared or anxious? Sad or hopeless? Angry or resentful? Once we know how we’re feeling, we’re ready to express how we’re feeling and why. This process of labeling and expressing our emotions gives us a sense that we can handle them. Since children often do not have the emotion literacy skills to recognize, understand, and label their emotions, they may hide their feelings thinking they are bad or wrong.

Dr. Marc Brackett from the Yale Center for Emotional Intelligence invites us to be an “Emotion Scientist” instead of an “Emotion Judge” when it comes to cultivating emotion literacy in children.

<table>
<thead>
<tr>
<th>Emotion Scientist</th>
<th>Emotion Judge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Open, curious, reflective</td>
<td>Critical, closed, ignores emotion</td>
</tr>
<tr>
<td>Views all emotions as information</td>
<td>Views emotions as “error”</td>
</tr>
<tr>
<td>Is in learner mode (investigates)</td>
<td>Is in knower mode (makes attributions)</td>
</tr>
<tr>
<td>Wants to get “granular”</td>
<td>Clumps emotions as good or bad</td>
</tr>
<tr>
<td>Has a “growth mindset”</td>
<td>Has a “fixed” mindset</td>
</tr>
</tbody>
</table>
He states that developing one’s emotion skills are likely the antecedent to building resilience. And practicing non-judgment is a key part of this. This aligns with Dr. Siegel’s strategy discussed: “Name it to Tame it.”

Describing Emotions

“Name it to Tame it” Technique by Dr. Daniel Siegel, MD

Just by naming a feeling, Dr. Siegel reports that calming neurotransmitters are sent into the brain to help a child who may be in fight, flight or freeze mode. Helping us recognize this vital role we can play with children is not difficult once we become accustomed to it and aware of the power of it.

Dr. Siegel uses a hand model to help explain the brain by using the thumb as the primitive, lower part of the brain which is the location of big feelings. The fingers are the upper part, thinking, planning part of the brain used to gently hug the big feelings. When we are triggered — feeling threatened physically or emotionally — the upper part of the brain is impaired, as we move into a flight-fight-freeze reactive response. We can think of this as “flipping our lid.” Here, the fingers fly up, and the (thumb) or big feelings are exposed. You can review a two-minute video link demonstrating this here.

Interpreting Emotions

Emotions are actually very complex, but we tend to use only a few simple labels for them — mad, sad, angry or happy. Increasing our vocabulary around emotions is called developing emotional literacy. This will help us learn to better understand and manage our emotions in healthy ways.

Dr. Marc Brackett, Yale Center for Emotional Intelligence, utilizes the Mood Meter (see sample for older kids here) to help name, label and interpret emotions. The “mood meter” is adaptable. Younger children begin by sharing the color of the quadrant that best describes how they’re feeling. As children learn the language of emotions, they increase their emotion vocabulary, and are better able to explain how they are feeling and why.

Listening non-judgmentally, being open and curious, supports children in feeling safe to share scary and uncomfortable feelings. From there, we can then develop strategies for regulating big emotions such as fear, anger, anxiety and grief.
Taking a moment to stop and breathe with the child, perhaps saying these phrases (in/out, deep/slow, calm/ease, smile/release) as you breathe together for three to five breath cycles, will be supportive in shifting from the fight-flight-freeze response to the relaxation response, which reactivates our “thinking brain” and enables us to make thoughtful decisions and apply strategies that will improve our health and wellbeing.

**Mirror Neurons**
When our children watch us do something, they have neurons that fire in their brain that “mirror” what we are doing. The good news about this is that we can influence our children’s feelings and behavior in positive ways by changing how we feel and behave.

**Positive behavior modeling**
Once we recognize how powerfully our behavior can impact children, we turn our attention to positive behavior modeling. As we model how to express our emotions in ways that are authentic and constructive, children “read” our signals and learn that we can have strong emotions, and still be reflective and thoughtful in our approach to dealing with them.

Drawing on our knowledge of the power of Positive Childhood Experiences (PCEs) in Module 3, we know that a caring supportive adult can be the protective factor that allows a child to be resilient and thrive.

**Growth Mindset vs. Fixed Mindset: Changing the Tone**
Carol Dweck, a professor at Stanford University and author of “Mindset,” has shown through research that our beliefs about our skills affect our success or failure at developing them. Namely that one’s effort can matter as much as one’s natural talent or intelligence. Thus, if we believe our emotion skills can be learned, we are likely to be more confident, willing to persevere, and find creative solutions to our problems. An easy technique to help shift from a “fixed mindset” to a “growth mindset” is through the use of the **YET Technique**.

Leveraging the power of the word yet. By adding **“YET”** to the end of a sentence (i.e. “I can't do this math yet”) we open ourselves to the possibility and expectation of growth.
Another strategy for shifting our perspective is to reframe our thinking when faced with challenging behavior from:

- **“What’s wrong with you?”**
- **“What’s happened to you?”**
- **“What’s right with you?”**

By helping children identify their strengths, we are helping them cultivate resilience.

**Resilience**

With emotional literacy, the presence of positive behavior models, and the power of a growth mindset. Children are much better equipped to bounce back to a state of normalcy after experiencing stressful or traumatic events in their life. And most importantly develop the ability to persevere when things get tough. This is the true meaning of resilience.

Positive supports for children to aid in building resilience can include:

- Fostering a sense of control
- Having a network of peers
- Helping children name the protective factors or strengths in themselves, families and communities and thinking of ways to accentuate those.

Supports for **families** and **communities** ultimately foster resilience in children. Seeking out ways to strengthen family and community wellbeing helps ALL children reach their highest potential.

**Key Reminders**

- Helping children recognize, understand and name their emotions is foundational to wellbeing and resilience.
- Providing positive behavior modeling, fostering a growth mindset and accentuating a child’s strengths are practical ways we can help them thrive.
- Supporting families and communities also helps children live their healthiest life.
Suggestions for How to Put this into Practice with Children

- Model and normalize the naming and processing of emotions through check-ins like the Mood Meter, “What's your emotional weather?” or simply “How are you feeling right now?” For educators looking for virtual strategies, see the resources under Thoughtful Modeling here.

- Teach children to view their emotions with non-judgment and curiosity through modeling how to be an “Emotion scientist” versus an “Emotion Judge”.

- Explore the research-based approach, RULER, and learn this helpful acronym, by Yale Center for Emotional Intelligence for developing emotion skills. RULER stands for:

  - Recognizing emotions in self and others
  - Understanding the causes and consequences of emotions
  - Labeling emotions accurately
  - Expressing emotions
  - Regulating emotions effectively

To help children restore balance in their emotional state, review this Playbook with information on six “stress busting” activities for children from California’s Office of the Surgeon General, including healthy nutrition, regular exercise, restful sleep, practicing mindfulness, building social supports, and getting mental health care as illustrated in the graphic:
Extending Learning/Discussion Questions

Take a moment to reflect individually and, if possible, discuss with others:

1. Recall a time when you helped a child recognize, understand, and name their feelings. What did you say and do? What did you notice about how the child responded? Is there anything you would do differently now?

2. Recognizing the power of positive behavior modeling for children, what is an area of emotional growth for yourself? What might be some barriers for you? What might be some supports? How will you know if you’re making progress?

3. What stress busters are already in your “toolbox?” What could you learn and practice that would help you be better able to support a stressed child?

Additional Resources

1. Dr. Daniel Siegel’s Name it to Tame it
   https://youtu.be/-AJAe28xkvM

2. Integrating SEL in Distance Learning from Transforming Education
   https://docs.google.com/presentation/d/10BeQ_NQFbHdek77G8sxo4TifTtGr5_laW_oaLeSdlGw/present?ueb=true&slide=id.g9921fdc4ec_0_0
   from https://www.transformingeducation.org/

3. California Surgeon General’s Playbook: Stress Relief during COVID-19
Module 5: Community Action
Guiding Questions

- How does mental health correlate with community success?
- How can the community take an active role in a child’s healing process?
- How can we make healing possible in the home, classroom and community?

Community Action

According to Gilad Hirschberger (2018), the term collective trauma “refers to the psychological reactions to a traumatic event that affect an entire society. It does not merely reflect a historical fact, the recollection of a terrible event that happened to a group of people. It suggests that the tragedy is represented in the collective memory of the group, and like all forms of memory it comprises not only a reproduction of the events, but also an ongoing reconstruction of the trauma in an attempt to make sense of it.” What we understand is that collective trauma affects our nervous system and if we ignore it, many of us may end up unconsciously numbing with food, drugs or other addictions in an attempt to seek comfort. Those with high rates of Adverse Childhood Experiences (ACEs) typically have a much higher rate of addiction. While this can be considered a normal coping mechanism or adaptive response to a traumatic experience, it is not a healthy response that allows individuals to fully thrive. Most importantly, supporting children when they are young can provide healing and save thousand of hours in support services later in their lives.

Below is a graph from the Substance Abuse and Mental Health Services Administration (SAMHSA) that highlights typical phases of collective trauma after a disaster. When crises are particularly chaotic or chronic these phases might occur in a less linear fashion or take longer than they typically do. What can generally be understood is that we move through emotional highs and lows into an eventual recovery/healing phase. Recognizing, naming and normalizing these phases can be helpful.
So, what can we do to address collective trauma?

**Four Key Concepts for Community Action**

- Collective Understanding
- Collective Agency
- Creation of Safe, Collaborative Spaces
- Strategic Action

**Collective Understanding**

What is collective understanding? In this context, it is having every person in the community understand what children are experiencing, how to support them, and what their role is in creating a safe and nurturing environment for them. A community that is trauma-informed and healing-centered ensures every person receives equal care and compassion from everyone they meet.

Author and activist Shawn Ginwright discusses an approach to trauma with a fresh lens that promotes a holistic view of healing from traumatic experiences and environments. This approach is called healing-centered, as opposed to trauma-informed. Ginwright explains, “a healing-centered approach is holistic involving culture, spirituality, civic action and collective healing. A healing-centered approach views trauma not simply as an individually isolated experience, but rather highlights the ways in which trauma and healing are experienced collectively.” The term healing-centered engagement broadens our understanding of how to conceptualize trauma so that we can think more holistically about ways to foster well-being. Healing-centered engagement begins, Ginwright emphasizes, by building empathy with young people who experience trauma.
**Collective Agency**

Another community action concept is to create a sense of collective agency. Empowering each other to have the skills to cope, heal and build resilience are the things that will help us change. Building these skills will help us act now to help children feel safe and loved. Earlier we heard from Dr. Christina Bethell reminding us of our agency and ability to impact children: “You matter, and every moment matters. And you matter every moment.”

We often think in terms of “Big I’s” or large-scale initiatives to help to address the systemic trauma, stress, and racial inequity in our systems. “Big I’s” are often necessary but somewhat beyond the control of those who are on the frontlines and generally move at a slower pace. “Little i’s” are skills we can act on now, the small interventions that we can do in relationship with those around us, at all times.

> “True equity and healing cannot happen if we do not continually focus on the ‘Little i’s’: intentional, relational interactions done with compassion and empathy.”
> - Matt Reddam

**Creation of Safe, Collaborative Spaces**

Relationships are at the heart of healing trauma. These spaces are where we need to come together, create shared understanding, build our agency and then begin to ask, “What’s possible?” While we aim to create safe, collaborative spaces when bringing together people with different viewpoints, disciplines, and backgrounds, we acknowledge that spaces may not always feel safe to everyone in a group. Thus, we strive for the courage and confidence to address differences of opinions and respect one another while developing a holistic approach to healing and addressing our community’s trauma.

There are a variety of methodologies that can be used to create collaborative spaces, and they share some key considerations:

- Common agreements or guidelines
- Equity for all voices
- Mutual respect
- Authenticity

A facilitator or host of safe, collaborative spaces:

1. Intentionally creates the “container” (the space) — agreements, processes for the space
2. Listens deeply
3. Attends carefully to relationships — self (self-awareness), others (social awareness), the group as a whole (systems awareness)
Wise Mind

We can only address the complex challenges our communities are facing by bringing diverse voices and ideas into our spaces to enhance the likelihood of unique and creative solutions to the challenges we are addressing. One size does not fit all. Increased diversity in our thinking, relationships, ideas and actions increases the possibility that others will find something that works for them, for their family or for their community.

One way to think about community strategies is through the lenses of People, Place and Equitable Opportunity. Some examples of community strategies utilizing these categories include:

Strategic Action

Finally, we can think about taking collective action through an ongoing learning mechanism. We can do this by acting in small increments. We can try small experiments, utilize the feedback to adjust, keep repeating this process again and again. This is continuous improvement. When a community combines these small aims of improvement together, we can generate a large desired response. We can collectively co-create the shifts we want to see in our community.

Through a commitment to the “continuous improvement” cycle (Launch, Do, Learn, Adapt), we can start to evolve and build our own knowledge and capacity.

We can only address the complex challenges our communities are facing by bringing diverse voices and ideas into our spaces to enhance the likelihood of unique and creative solutions to the challenges we are addressing. One size does not fit all. Increased diversity in our thinking, relationships, ideas and actions increases the possibility that others will find something that works for them, for their family or for their community.

One way to think about community strategies is through the lenses of People, Place and Equitable Opportunity. Some examples of community strategies utilizing these categories include:
Suggestions for How to Put this into Practice in your Community

- Consider a thinking tool like this one, “Circles of Control,” to help identify small action steps that can be taken toward building resilience in ourselves, homes, organizations and communities.

<table>
<thead>
<tr>
<th>People</th>
<th>Place</th>
<th>Equitable Opportunity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Promote community connection</td>
<td>Create safe public spaces</td>
<td>Workforce Development</td>
</tr>
<tr>
<td>Rebuild relationships and networks</td>
<td>Invest in parks, housing and transportation</td>
<td>Restorative Justice</td>
</tr>
<tr>
<td>Strengthen healthy and social norms</td>
<td>Improve the built environment</td>
<td>Healing Circles</td>
</tr>
</tbody>
</table>

Steps in the Process

- First, consider: “What is an area of concern related to trauma in your community? What is something that is directly connected to the health and wellbeing of your community?

- Next, think about: “What is within your control? What resources are available to you? Are there people within your community who would join you in strategic action related to this area of concern? How might you bring those people together to discuss the concern, identify a goal, and plan ways to address the concern and heal the community?

- Next, broaden out and consider how might you influence others that may not be directly within your circle of “control,” yet may also connect with the area of concern and your group’s efforts. How might you build new relationships and connections that could support implementation of a plan to address the identified area of concern?

- With this broader coalition and a plan ready to implement, generate ways you might assess or measure your results and impact.
○ Implement your plan and **monitor the outcomes and signs of progress.**

○ **Reflect** as a group, **refine your goals and plan,** and continue efforts of implementation, monitoring and reflecting.

○ **Broadcast your successes** and work to enlist others in your community in your strategic initiative.

• Leverage technology to work in your favor. The restrictions on in-person gatherings can be a barrier but can also be an opportunity to bring people together via technology that override geographic barriers. Consider this [resource](#) from the Art of Hosting and Harvesting Conversations that Matter developed to support impactful virtual engagements and bring multiple perspectives in that create the conditions for deep listening and shared inquiry.

• To influence yourself or community, create or participate in healing spaces for adults. Examine a resource like the [Compassion Resilience Toolkit](#). Compassion resilience, is “the ability to maintain our physical, emotional, and mental wellbeing while responding compassionately to people who are suffering.” Within this, there are comprehensive resources for facilitators and parents/caregivers, educators and youth-serving organizations.

  **Compassion resilience for parents and caregivers is defined as:**

  ○ Caring for ourselves while acting with compassion in interactions with children, family members, and those we count on to support us;

  ○ Practicing skills to effectively engage in compassionate action with and towards children, family members, and those we count on to support us;

  ○ Identifying, preventing, and minimizing compassion fatigue within ourselves.

• Consider joining a community group or collaborative, learn more about collective action through reviewing this [collective action toolkit](#) by frog design, recognize your own individual strengths, and take steps toward developing a thriving community.

**Key Reminders:**

• **Collective trauma** impacts us all, and through understanding and “healing-centered engagement” we can heal and thrive.
• **It’s vital** to support adults to develop the skills and agency to help children feel safe and loved. Small, nurturing interactions can have a large impact.

• **Creating safe, collaborative spaces** that center relationships are needed for individuals and communities to thrive.

• **Bringing diverse perspectives** together to address complex challenges using a “Launch, Do, Learn, Adapt” approach will help us collectively co-create the shifts we desire in our community.

### Extending Learning/Discussion Questions

**Take a moment to reflect individually and, if possible, discuss with others:**

1. *How might you shift your interactions with others to emphasize or “center” relationships and compassion in your work and life with children and adults?*

2. *What skill building strategies have you used or might consider using to help children feel safe and loved?*

3. *In your context, what are areas of concern? What are areas of influence and control?*

4. *What community action(s) can you initiate? Who or what resources would support you?*

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### Additional Resources

1. Compassionate Resilience Toolkit
   
   [https://compassionresiliencetoolkit.org/](https://compassionresiliencetoolkit.org/)

2. Collective Action Toolkit by frog design
   
Summary
Summary

We have shared a significant amount of information about the impact of Adverse Childhood Experiences (ACEs) and toxic stress and the ways that we can support children and our communities to heal, be resilient, and thrive. Here's a brief review:

1. Understanding Trauma
   - Trauma is real.
   - Decreasing the negative impacts of things that cause stress in children and increasing the things we know are positive experiences will result in children who can manage stress and become resilient, thriving members of society.
   - We have the power to make a difference in a child's life.

2. Know the Signs
   - Know the signs that a child is experiencing trauma and/or toxic stress.
   - Signs of stress are influenced by a child's psychosocial stage of development.

3. Help Yourself First
   - If you can't take care of yourself, you can't take care of others.
   - Engage in physical, emotional and mental health self-care practices.
   - Treat yourself with kindness, understanding and compassion.

4. Empower the Children
   - Develop your own emotional literacy.
   - Foster resilience and a growth mindset in children.
   - Give children voice and choice.
5. **Take Community Action**

We can address collective trauma through:

- Collective Understanding
- Collective Agency
- Creation of Safe, Collaborative Spaces
- Strategic Action

Be aware of areas of concern and take initiative in areas within your control and influence.

Engage in continuous improvement cycles (launch, do, learn, adapt).

*“WE are the medicine that we need.”*

- Dr. Bethell
Discussion Guide for Facilitators
This document provides a summary of the discussion questions from each episode in the video series and may be used to support facilitators of a group collectively viewing the video series.

Some reminders to consider while preparing for hosting or facilitating discussion include:

- Emphasizing equality
- Setting the tone for a respectful community
- Strategies to keep the flow moving
- Keeping the focus on the group as a whole
- Releasing the desire to “fix” or “rescue”
- Expect emotion or discomfort to arise and name and normalize it in advance

**Discussion Guide**

**Welcome**
- Introductions
- Agreements

**Introduction**
- What is one hope you have for participating in this discussion that aims to support children’s resilience?
- Adversity impacts us all. What is one thing you believe strengthens an individual’s ability to overcome adversity?

**Module 1: Understanding Toxic Stress**
- What are some of your own experiences regarding positive and tolerable stress? What helped you recover from tolerable stress?
- What would you look for in a child to differentiate between tolerable and toxic stress?
- What emotion regulation strategies do you use when you are feeling stressed? What new strategies might you try so you can expand what you model, teach, and practice with children?
- Think of a child in your own life. What might you do tomorrow to cultivate Positive Childhood Experiences (PCEs)?
Module 2: Know the Signs

• What behaviors have you observed in children that you think are indications of stress associated with a particular stage of psychosocial development? What are some signs?
• What impacts of trauma have you seen in children? What did you notice in terms of brain development, cognition, mental health, physical health, relationships, emotions, and behavior?
• What have you done or could you do to foster resilience in a child?

Module 3: Help Yourself First

• What are some of the signals you notice in yourself that might indicate you need to “take a minute”?
• Considering the three tools of square breathing, “wise mind” and self-compassion, what most resonates as helpful to you?
• Recognizing we all need to “monitor traffic on our bridge,” what is one self-care practice you can do to reduce stress and stay healthy?

Module 4: Empower the Children

• Can you think of a time in which you helped a child name their feelings? If so, what did you notice about how they responded?
• Recognizing the power of positive behavior modeling for children, what is one way you could provide this?
• What is something you could say or do to help a child recognize and accentuate their strengths?

Module 5: Take Community Action

• How might you shift your interactions with others to emphasize or “center” relationships and compassion in your work and life with children and adults?
• What skill-building strategies have you used or might consider using to help children feel safe and loved?
• In your context, what are areas of concern? What are areas of influence and control?
• What community action(s) can you initiate? Who or what resources would support you?

Summary

• After participating in this resilience initiative, what is one key learning you are taking away?
• What is one hope you have for the future of the children in your community?
Thrive is an initiative of NVCF, bringing together a collaborative of people, organizations, and agencies committed to engaging in work surrounding the impact of childhood trauma across all generations. The purpose of the Thrive Initiative is to create opportunities for healing and support to help children and families truly thrive.

**North Valley Community Foundation**: NVCF exists to fuel healing and compassion for a better world. Through grantmaking, partnerships, and financial and philanthropic services, NVCF is a hub for social change in the northern Sacramento Valley. In the fiscal year ending June 30, 2020, NVCF raised $22 million for social good and issued more than $25 million in grants. Much of NVCF grants recently have been focused on disaster relief, including more than $35 million for relief and recovery after the 2018 Camp Fire, $1 million in coronavirus response and more than $100,000 for relief efforts after wildfires in 2020. NVCF also holds hundreds of charitable funds, each embodying a community member’s dream to improve our world.

For more information, visit [https://www.nvcf.org](https://www.nvcf.org) and follow us on Instagram, Facebook, Twitter, and Youtube.