

Trauma-Sensitive Settings and the Devereux Early Childhood Assessment (DECA) Program

The purpose of this document is to:

- Provide early childhood educators with basic information about trauma and the impact on young children;
- Describe what a trauma-sensitive setting for young children looks like;
- Identify recommended practices in trauma-sensitive settings for young children; and
- Align the DECA Program with those recommended practices.

What is trauma and what is the impact of trauma on young children and adult caregivers?

According to the Substance Abuse Mental Health Services Administration (SAMHSA), “Individual trauma results from an event, series of events, or set of circumstances, that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual’s functioning and physical, social, emotional, or spiritual well-being” (SAMHSA, 2012). Trauma can be thought about in terms of “Three E’s”: An Event, series of events or set of circumstances that is Experienced by an individual as physically or emotionally harmful or threatening, and that has lasting adverse Effects on the individual’s functioning and well-being (Bath, 2008)

Exposure to trauma and high levels of stress can negatively impact all areas of a child's development and behavior (Guirano, 2009). All children experience traumatic experiences differently and are impacted differently, yet all types of trauma can undermine children’s abilities to learn, play, form healthy relationships with caregivers and peers, and follow classroom expectations (Statman-Weil, 2015).

Approximately 26% of children in America experience trauma before the age of four (Statman-Weil). In every early childhood setting, there is likely to be one or several children who have experienced trauma, and the adult caregivers of young children will not necessarily know who these children are, or of the details of the trauma they have endured. The presence and support of a stable and trusted adult caregiver, the temperament, and the developmental status of the child are all factors that can impact the long term effect of a traumatic experience (Statman-Weil, 2015).

Children who have experienced trauma are at risk for being overwhelmed by feelings of distress and unable to regulate their emotional and physical states such as heart rate and breathing. When children live in a constant state of fear and are not supported in the regulation of their emotions, the amygdala (the brain’s regulator of emotions and emotional behaviors) tends to be overused, causing it to overdevelop. This can result in children being highly impulsive and reactive and unable to complete higher-order thinking tasks, such as solving even simple everyday

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problems (McInerney, 2015). The resulting behaviors can be misunderstood and viewed as intentional. This can be very frustrating for caregivers and can unintentionally lead to reinforcement of a child's negative view of themselves and their world.

Working with children who have experienced trauma can be draining and often leads to burnout (Philadelphia ACE Task Force, 2016). This takes a physical, mental and emotional toll on caregivers and can lead to experiencing secondary trauma, which can be very debilitating. Practicing self-care is critical for caregivers to effectively meet the needs of all children, including and especially those children who have experienced trauma (Philadelphia ACE Task Force, 2016).

Educators should be aware of some of the signs that may indicate suffering from the effects of secondary trauma, which may include increased irritability, difficulty concentrating and planning, experiencing feelings of numbness and experiencing intense feelings about a child's trauma experience (NCTSN, 2008). Adult caregiver self-care can include such things as getting support from others, asking for help, and incorporating things such as rest, breaks, humor, self-reflection, good nutrition and exercise into their lives (NCTSN, 2008).

Young children who learn to regulate their feelings and emotions is an important predictor of school and social success. It is important to remember that children's brains have the ability to change and reorganize in response to new experiences. Therefore, early childhood settings and classrooms that are trauma-sensitive can play a positive role and be a place of healing for children.

What is a trauma-sensitive setting for young children?

Primarily, a trauma-sensitive setting for young children is one where all adults are knowledgeable about trauma and its impact on children. In a trauma-sensitive setting, all experiences are looked at "through a trauma lens." (NCTSN, 2008). A primary belief is that children's actions are a result of their experiences, so the question adults should ask themselves is not "what's wrong with you?", but rather "what happened to you?" (SAMHSA, 2012).

A trauma -sensitive setting is one where safety, trustworthiness, choice, collaboration and empowerment for all children and families is a primary focus (SAMHSA, 2012).

Safe, nurturing, calm, consistent relationships with all children is an important component of a setting that supports young children who have experienced trauma. Having adults who support children in their most challenging and troubling times is key (Statman-Weil, 2015). A trauma-sensitive setting is a place where all children feel safe and are empowered to make choices, solve problems, and engage in meaningful and positive relationships with peers and adults. Adults who provide love, support, encouragement and extra time spent with children are providing an environment that has the power to help all children heal and thrive (Perry, 2001).

Although adult caregivers in early childhood settings are not necessarily providing clinical, therapeutic services, there is evidence to suggest that trauma-sensitive natural environments such as home and school, in which healing and growth can take place, are a necessary precursor to any formal therapy that might be offered to a traumatized child. It may even be argued that the creation of these environments is the critical ingredient in therapeutic transformation (Bath, 2008).

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What are the recommended practices in trauma-sensitive early childhood settings?

It is important for all adult caregivers of young children to understand the impact of trauma and use research-informed, trauma-sensitive strategies to support all children.

Early childhood settings must be safe spaces where adults support children in creating positive experiences and identities (NCTSN, 2008).

Young children who have experienced trauma are most likely to heal and thrive in safe, predictable environments with consistently nurturing and responsive adult caregivers (Perry, 2001).

Some key recommended practices for supporting young children in trauma-sensitive environments include:

- the presence of nurturing and supportive caregiving adults (Perry 2001; SAMHSA, 2012; Statman-Weil, 2015),
- providing consistency (NCTSN, 2008; Perry, 2001; Statman-Weil, 2015),
- supporting the development of self-regulation (McInerney, 2015; NCTSN, 2008; Perry, 2001; Statman-Weil, 2015),
- empowering children to make positive choices and decisions (Perry, 2001; SAMHSA, 2012),
- the use of positive discipline techniques (Greenspan, 2017; Perry, 2001; Statman-Weil, 2015; Ziegler, 2007),
- focusing on each child's strengths (McInerney, 2015; Perry, 2001; Statman-Weil, 2015),
- encouraging children to express their feelings (NCTSN, 2008; Perry, 2001; Greenspan, 2017),
- working closely with families in respectful and nonjudgmental ways (McInerney, 2015; Statman-Weil, 2015), and
- adult caregivers practicing self-care (McInerney, 2015; Philadelphia ACEs Task Force, 2016; NCTSN, 2008).

DCRC Resources and Trauma-Sensitive Settings

Resilience is the ability to bounce back and heal from adversity, significant risk and trauma. The mission of the Devereux Center for Resilient Children (DCRC) is to promote social and emotional development, foster resilience, and build skills for school and life success in all children and the adults who care for them. In order to provide quality, meaningful resources, services, and professional development, DCRC has remained true to six underlying principles. These principles are aligned with trauma-sensitive practices and include:

DCRC Principle	Trauma-Sensitive Practices
<p>The strengths, happiness and resilience of all children: Children who are happy and have social and emotional strengths are more likely to be academically and socially successful.</p>	<p>The creation of settings where all children are nurtured and supported by their caregivers is key to helping children heal from trauma (Perry, 2001; McInerney, 2015; Stetman-Weil, 2015).</p>
<p>The well-being of the adults who parent, nurture and educate children: Young children’s healthy social and emotional development is strongly influenced by the health and well-being of the adults who care for them.</p>	<p>Working with children who have experienced trauma can take a physical, mental and emotional toll on caregivers and can lead to experiencing secondary trauma, which can be very debilitating. Practicing self-care is critical for caregivers in order to effectively meet the needs of all children, including and especially those children who have experienced trauma. (McInerney, 2015; NCTSN, 2008; Philadelphia ACEs Task Force, 2016).</p>
<p>Strength-based approaches: Research confirms that promoting children’s social and emotional strengths reduces the development and escalation of behavior concerns</p>	<p>Using strength-based approaches is a key element in trauma-sensitive settings for young children. (McInerney, 2015; Perry, 2001; Statman-Weil, 2015). DCRC resources help to identify and build on children’s strengths first, rather than focusing on deficits.</p>
<p>Strong partnerships between families and teachers, and other child-serving professionals: Families and providers working together as a team to provide consistent, nurturing, developmentally appropriate care results in more positive outcomes for children.</p>	<p>Sharing information in honest and sensitive ways with families of children who have experienced trauma is critical to their success and healing. (Perry, 2003; McInerney, 2015; Stetman- Weil, 2015).</p>

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<p>Collaboration between the fields of early childhood and mental health to optimize positive outcomes: Families, providers, specialists and other community resource professionals share knowledge and work as a team to understand and jointly determine how to best promote children’s healthy social and emotional development</p>	<p>Trauma-sensitive practice recognizes the importance of collaboration among all of the adults who care for and support young children. (McInerney, 2015; NCTSN, 2008; Stetman-Weil, 2015).</p>
<p>Data driven decision-making: Decisions about how to optimize a child’s social and emotional development must be based on reliable and valid information from multiple sources. The DCRC approach uses data to inform decisions and also track progress.</p>	<p>Gathering information and data about children who have experienced trauma is key to understanding the child’s needs and strengths, learning and behavior. Every child responds to trauma experiences differently and each child needs approaches that match their particular needs. (Perry, 2001; Stetman-Weil, 2015).</p>

Use of the Devereux Early Childhood Assessment (DECA) Program in Trauma-Sensitive Settings

The Devereux Early Child Assessment Programs for Infants, Toddlers and Preschoolers is a comprehensive assessment and planning system that involves families and professionals working as partners. The significant adults in a child’s life work together to collect information, including social and emotional screening and assessment data, and use the information to develop plans that promote children’s social and emotional skills and resilience. Families, educators, consultants and other significant adult caregivers continuously monitor, evaluate, and modify the plans as needed, ensuring positive outcomes. A trauma-sensitive setting recognizes the importance of professionals working closely with families in respectful, nonjudgmental and strength-based ways (Berry, 2003; McInerney, 2015; Stetman-Weil, 2015).

The Devereux Early Childhood Assessments for Infants, Toddlers and Preschoolers are nationally normed, standardized assessments that strengthen protective factors in children from infancy through age 5. Healthy Attachment/relationships, Self-regulation and Initiative are the three protective factors, or social and emotional competencies, assessed to identify a child’s strengths and areas of need. These three protective factors are closely tied to critical recommendations for children to heal and thrive in a trauma-sensitive setting. First and foremost, research indicates that children who have experienced trauma require consistent, supportive nurturing relationships with adult caregivers (DECA - Attachment/Relationships). Supporting the development of self-regulation (DECA - Self-Regulation) and empowering children to make positive choices and decisions (DECA - Initiative) are also key recommended practices for supporting young children in a trauma-sensitive setting (Greenspan, 2018; Harvard, 2018; Perry, 2001; SAMHSA, 2012; Stetman-Weil, 2015; NCTSN, 2008; McInerney, 2015). The DECA assessments and accompanying resilience- building resources provide child and group data as well as numerous strategies for teachers and parents to use to promote the social and emotional well-being of entire groups of children and each individual child. The resources combine the best of what science tells us children need and delivers resources in a format that is practical and user-friendly.

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Recognizing the important link between the health of children and the adults who care for them, DCRC has also developed resources for adult caregivers of young children to strengthen their own protective factors and resilience. The Devereux Adult Resilience Survey allows adults to reflect on their protective factors and to use the data to put action plans in place that foster their own health and well-being. The model also recognizes the importance of the environments where children spend their time and offers resources to help adult caregivers create safe, healthy environments where young children can thrive. Research indicates that safe, stable, nurturing environments are critical in order for young children to heal from trauma experiences (McInerney, 2015; NCTSN, 2008; Perry, 2001; Rice, 2005; Stetman-Weil, 2015).

The DECA Program offers excellent tools for designing and implementing a trauma-sensitive setting for all young children to thrive, heal and move toward a more positive life outcome. Please visit our website at www.centerforresilientchildren.org to learn more about all of the work that we do to foster resilience in children, families, organizations and communities nationwide.

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