



B10 – Integrating Trauma-Informed Care into the PBIS Framework

October 3, 2019 – 11:45 am – 1:00 pm

Key Words: Mental Health, Systems Alignment

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Integrating Trauma-Informed Care into the PBIS Framework

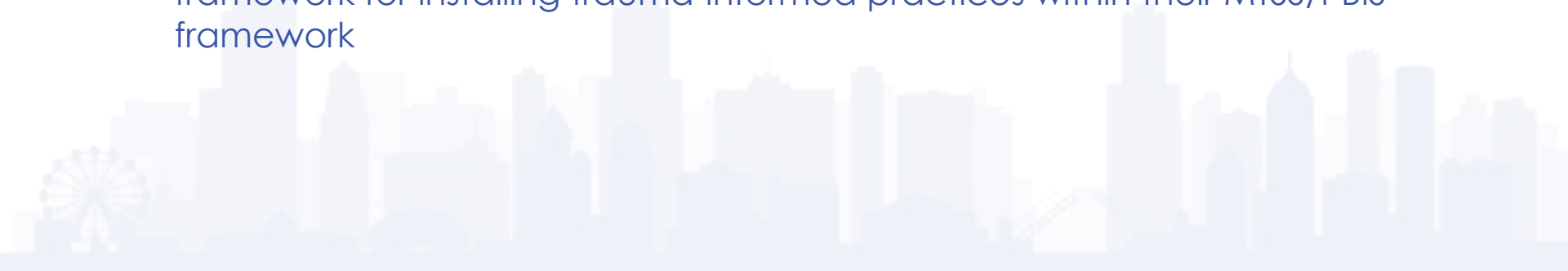
Strand: Mental Health Integration

Recommended Experience: Some Experience to PBIS

Description: PBIS leaders and coaches, now that we are aware of the impact of trauma on our learners, what can we do about it? Leaders at two rural school districts will discuss the why, what, and how of creating a safe and supportive school environment for all students.

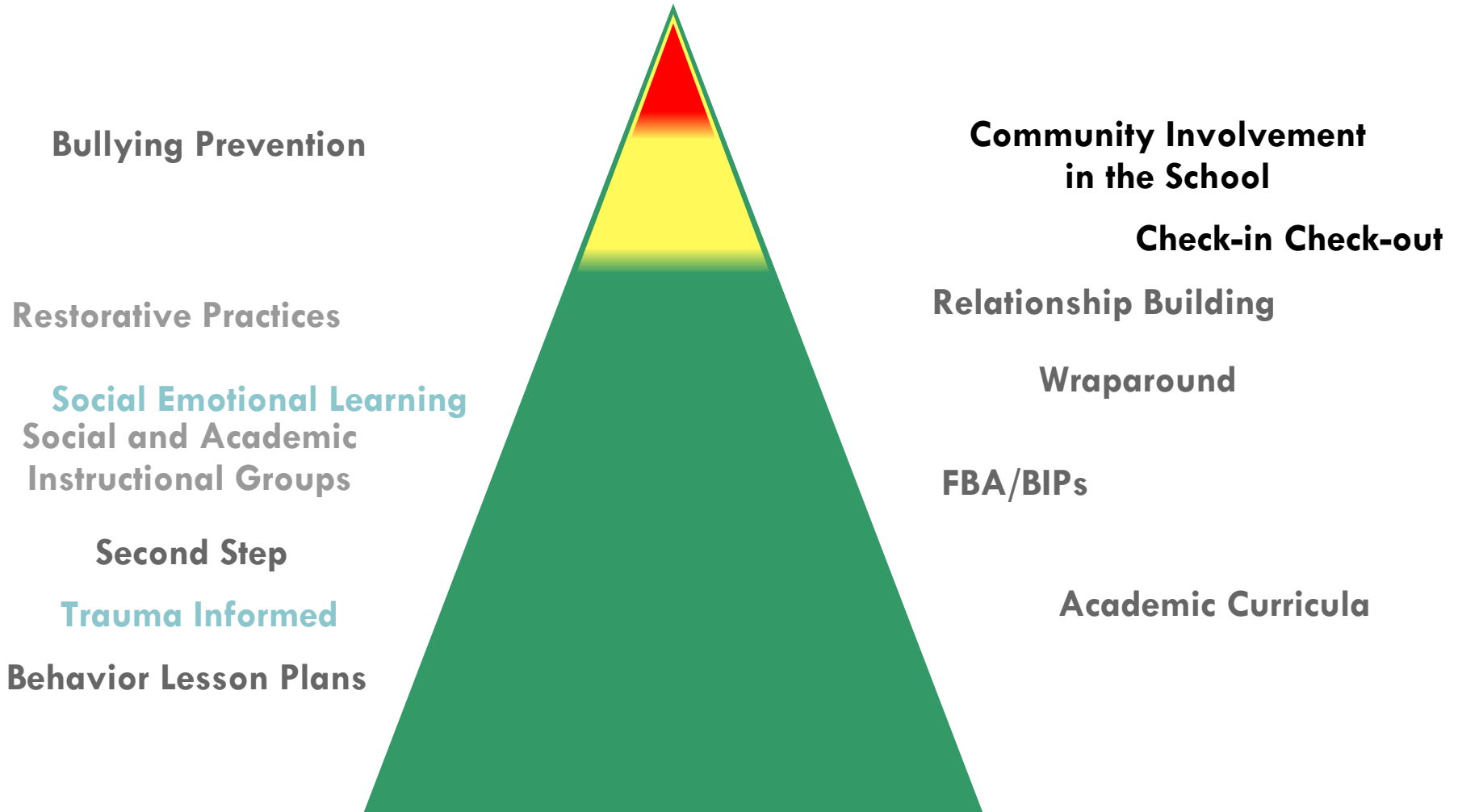
Objectives:

- Understand the impact of trauma on students and staff
- Identify key features of using a Multi-Tiered System of Supports (MTSS) framework for installing trauma-informed practices within their MTSS/PBIS framework





A Framework for Aligning Your Practices/Initiatives

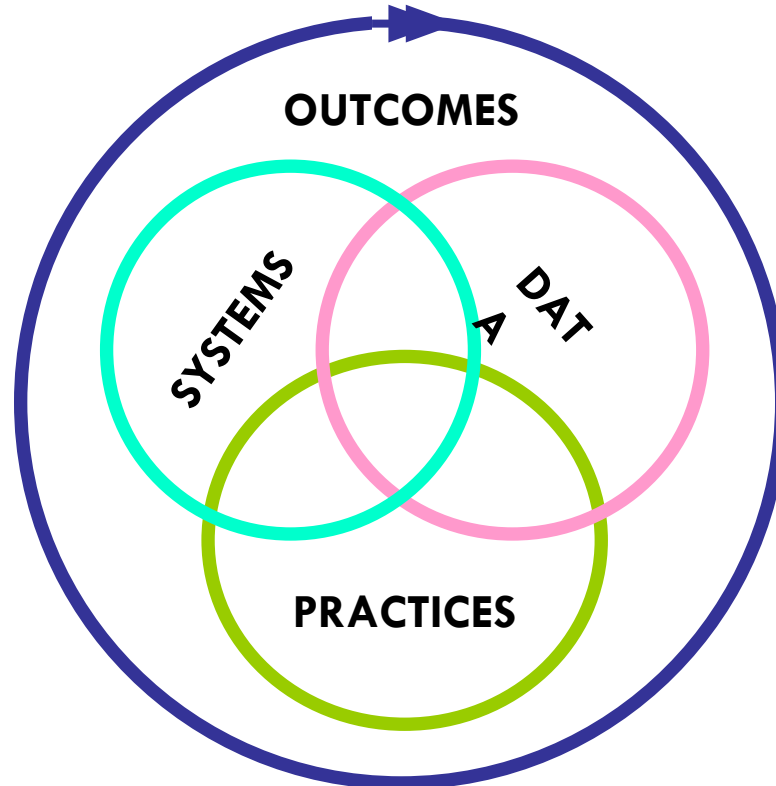




Positive Behavioral Interventions and Supports (PBIS) is a **Multi-Tiered System of Supports (MTSS)** Framework for Continuous Improvement and Alignment of Initiatives

Supporting culturally equitable **Targets** including
social/emotional competence & academic achievement

Supporting culturally knowledgeable **Staff Behavior** through team-based leadership and coordination, professional development, coaching, and content expertise



Supporting culturally valid **Data-based Decision Making** through universal screening, progress monitoring, and evaluation of fidelity

Supporting **Student Behavior** through a three-tiered continuum of culturally relevant evidence-based interventions

Midwest PBIS Network 1/15/19. Adapted from:

“What is a systems Approach in school-wide PBIS?” OSEP Technical Assistance on Positive Behavioral Interventions and Supports. <https://www.pbis.org/school>

McIntosh, K. & Goodman, S. (2016). *Integrated Multi-Tiered Systems of Support: Blending RTI and PBIS*. New York: Guilford Press.

How / Where Does Trauma Inform Your Triangle?

Academic Systems

Tier III/Tertiary Interventions 1-5%

- Individual students
- Assessment-based
- High intensity

Tier II/Targeted Interventions 5-15%

- Some students (at-risk)
- High efficiency
- Rapid response
- Small group interventions
- Some individualizing

Tier I/Universal Interventions 80-90%

- All students
- Preventive, proactive

Behavioral Systems

Tier III/Tertiary Interventions

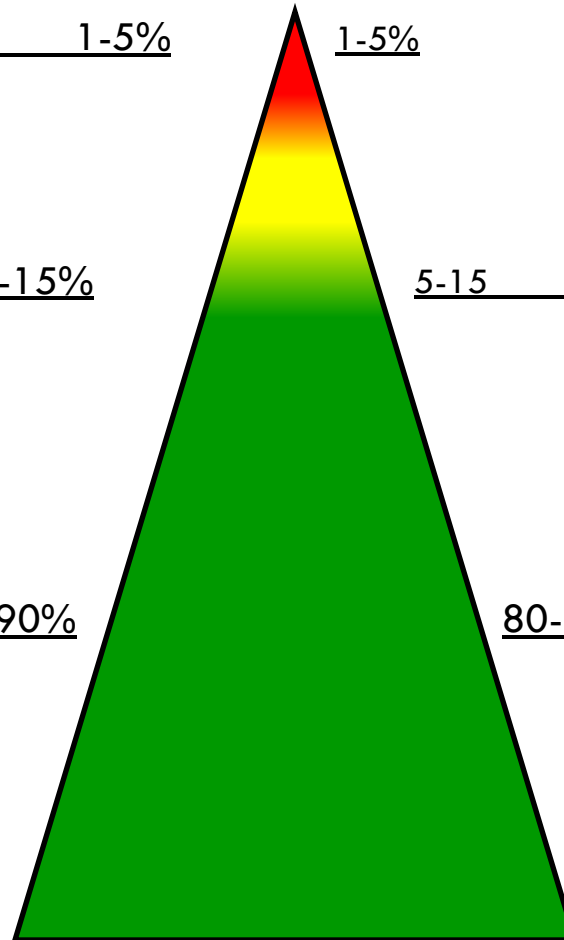
- Individual students
- Assessment-based
- Intense, durable procedures

Tier II/Targeted Interventions 5-15

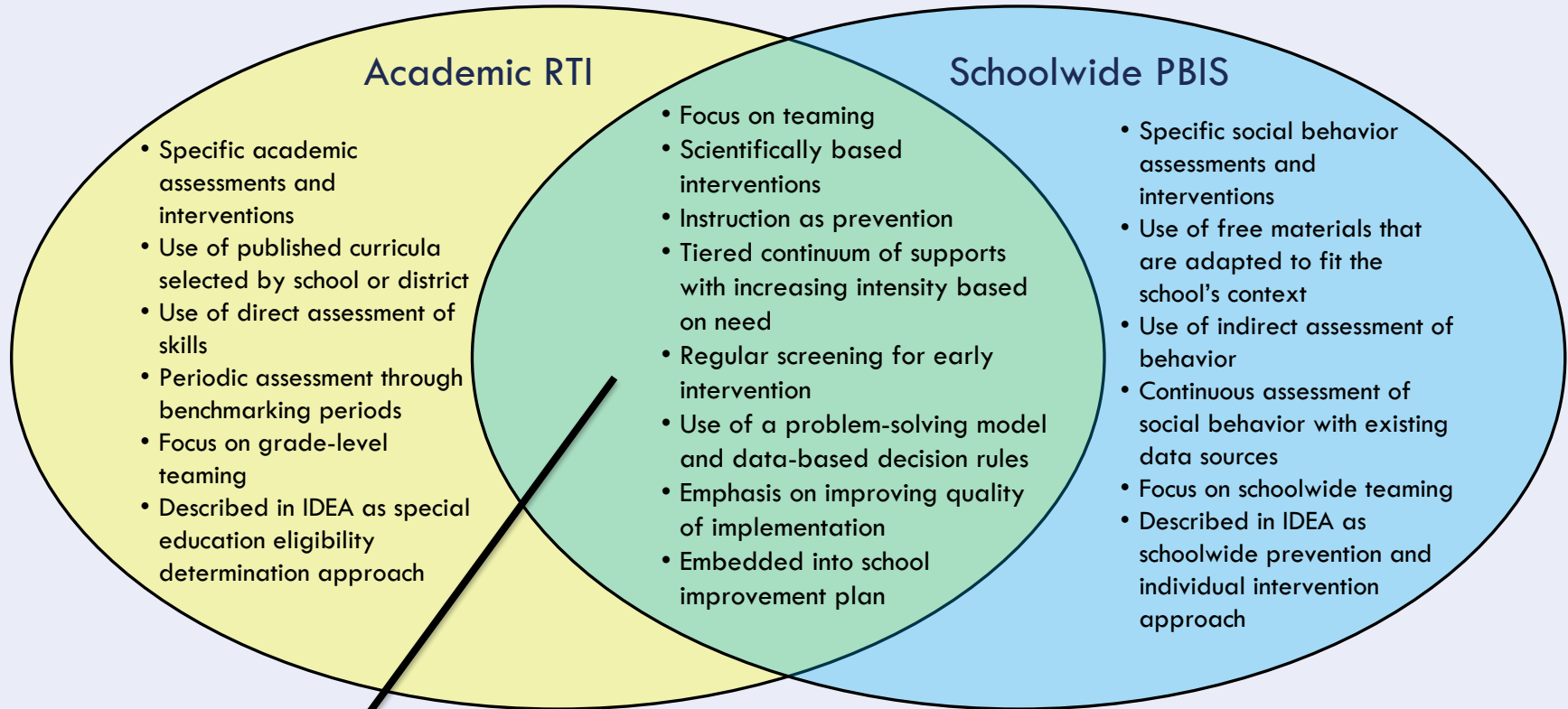
- Some students (at-risk)
- High efficiency
- Rapid response
- Small group interventions
- Some individualizing

80- 90% Tier I/Universal Interventions

- All settings, all students
- Preventive, proactive



Shared Characteristics of RTI and PBIS represent the Core Features of MTSS



Core Features of MTSS

1. Team based leadership and coordination
2. Evaluation of implementation fidelity
3. Three-Tiered Continuum of evidence-based practices
4. Continuous data-based progress monitoring and decision-making
5. Comprehensive universal screening
6. On-going professional development including coaching with local content expertise

- Academic RTI**
- Specific academic assessments and interventions
 - Use of published curricula selected by school or district
 - Use of direct assessment of skills
 - Periodic assessment through benchmarking periods
 - Focus on grade-level teaming
 - Described in IDEA as special education eligibility determination approach

- Focus on teaming
- Scientifically based interventions
- Instruction as prevention
- Tiered continuum of supports with increasing intensity based on need
- Regular screening for early intervention
- Use of a problem-solving model and data-based decision rules
- Emphasis on improving quality of implementation
- Embedded into school improvement plan

- Schoolwide PBIS**
- Specific social behavior assessments and interventions
 - Use of free materials that are adapted to fit the school's context
 - Use of indirect assessment of behavior
 - Continuous assessment of social behavior with existing data sources
 - Focus on schoolwide teaming
 - Described in IDEA as schoolwide prevention and individual intervention approach

Definition

National Childhood Traumatic Stress Network (NCTSN)

“Trauma occurs when a child experiences an intense event that threatens or causes harm to his or her emotional and physical well-being.”

T R A U M A

T t

Trauma

Adverse Experiences

Chronic Stress

Toxic Stress

What we are really talking about?

Extreme or chronic stress that overwhelms a person's ability to cope & results in feeling vulnerable, helpless & afraid

Can result from **one event** or a **series of events**

Event(s) may be **witnessed** or **experienced directly**

Experience is **subjective**

Often **interferes** with relationships; self regulation; & fundamental beliefs about oneself, others & one's place in the world



Our Perception Matters

When we think “this student can do it and they just aren’t doing it” or we think “this student just isn’t motivated”, **we** tend to have heightened emotions and become dysregulated ourselves.
(e.g.: angry, impatient).



The Needed Perspective Shift

(we need to change how we view our students)

What's wrong
with you?"

TO

What has
happened?

"How can I help?"

How Do We See Students?

Uninformed view

- Anger management problems
- May have ADHD
- *Choosing* to act out & disrupt classroom (e.g., disrespectful or manipulative)
- Uncontrollable, destructive
- Non-responsive

Uninformed Response

- Student needs consequences to correct behavior or maybe an ADHD evaluation

Adapted from Daniel & Zarling (2012)

Informed view

- Maladaptive responses (in school setting)
- Seeking to get needs met
- Difficulty regulating emotions
- Lacking necessary skills
- Negative view of world (e.g., adults cannot be trusted)
- Trauma response was triggered

Informed Response

- Student needs to learn skills to regulate emotions & we need to provide support

Example

See example chart below. School identified all of the practices they had in place in black font and then identified an action plan to strengthen trauma informed implementation in *red font*.

Tier I				
Practice	How is it trauma informed?			
	Creates Safe, Predictable, & Consistent Environment	Building Community or Relationships	Teaching/ Reinforcing Skills	Supports Regulation
Defined and teaching school-wide expectations <ul style="list-style-type: none"> • <i>Expand teaching to include coping skills (e.g.: identifying feelings, expressing feelings, & managing feelings)</i> • <i>Teach behavioral lessons in a circle</i> 	X	X	X	
Feedback and acknowledgement	X	X	X	
Defined problem behaviors	X			
Continuum of response to inappropriate behavior <ul style="list-style-type: none"> • <i>Alternatives to traditional discipline</i> 	X	X		
<i>Schedule of regulation for all classrooms</i>	X		X	X
<i>Morning Classroom Check-Ins</i>	X	X		
Tier II				

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Safe and Supportive Schools: A Journey

JOSEPH FANTIGROSSI, ED.D.

PRE K-12 INTERVENTION COORDINATOR, LYONS CSD

Joseph Fantigrossi Consulting LLC

@jfantigrossi

“

Do the best you can until you know better. Then when you know better, do better. ”

Maya Angelou

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TODAY'S PURPOSE

www.josephfantigrossi.com @jfantigrossi

- Self-Care
- Understand the impact
- How do we address trauma?
 - Support for Students
 - Building Capacity for Staff
- Action steps

SELF- CARE

HOW DO YOU RECHARGE & HEAL?

WHO IS “THAT PERSON” FOR YOU TO GO TO WHEN YOU NEED HELP?



MENTAL/ PSYCHOLOGICAL	SOCIAL/ BEHAVIORAL	PHYSICAL/ HEALTH
REFLECTION	BOUNDARIES	REST
BOUNDARIES	USE VACATION	NUTRITION
SOLITUDE	PEER SUPPORT	EXERCISE
READING	HUMOR/LAUGH	SUNSHINE

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Think, Pair, Share

How would you define trauma?

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Trauma is not the event.

Trauma is the response.

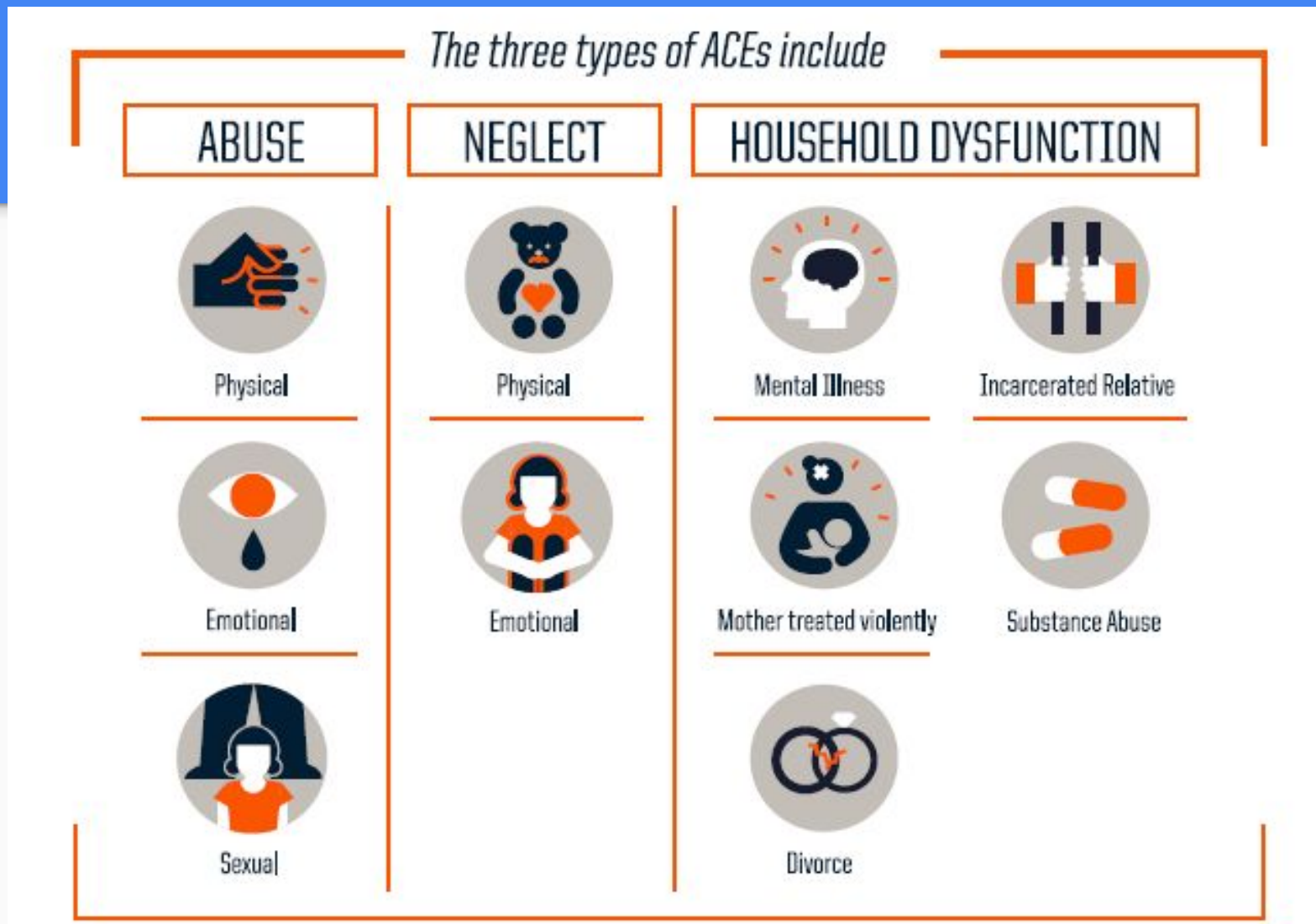


Each individual responds differently.

***STOP ASKING: What is wrong with this student?
AND START ASKING: What has happened to this student?***

ACES- ADVERSE CHILDHOOD EXPERIENCES

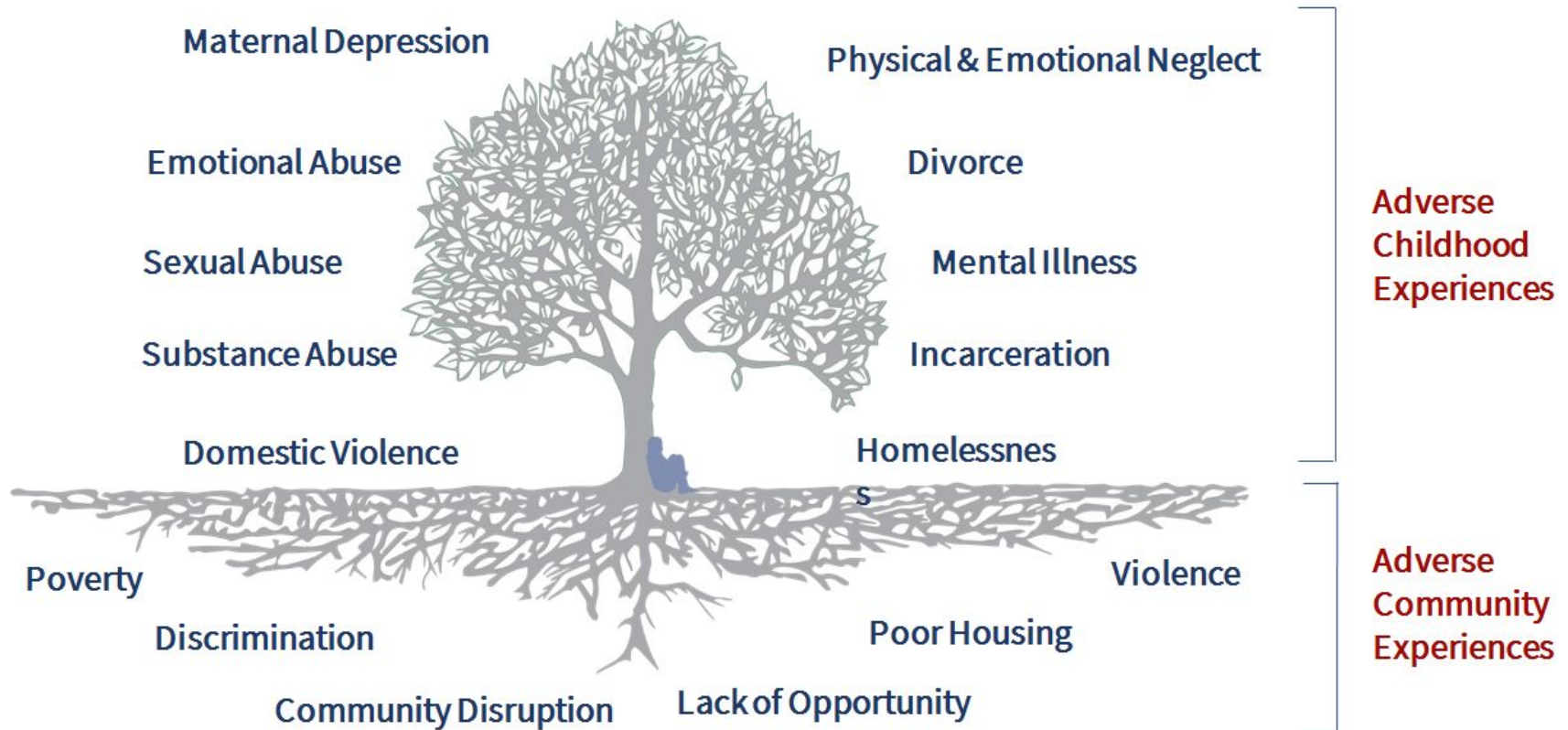
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Pair of ACEs

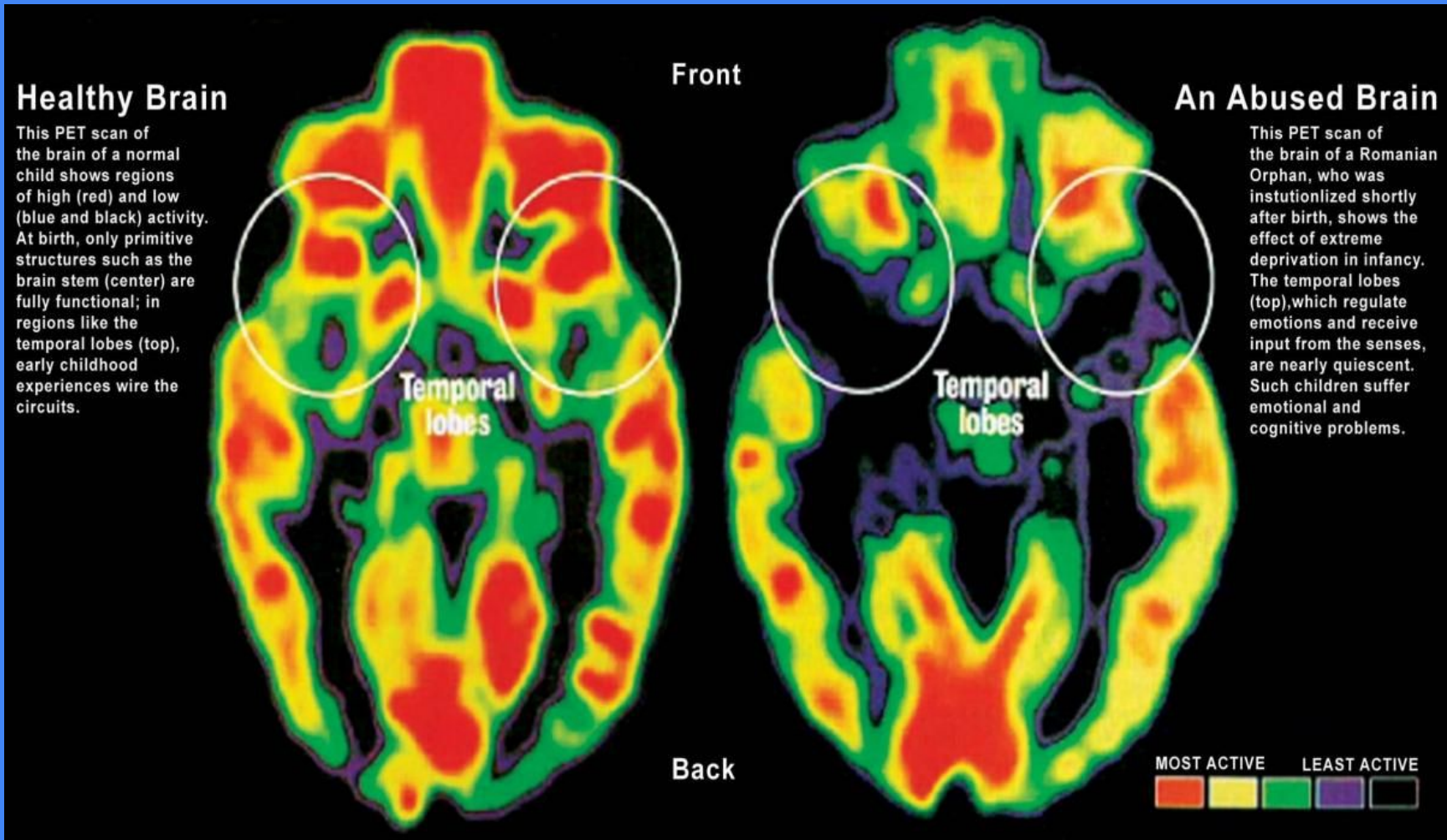
Many Types of ACEs

There are many types of trauma other than abuse, neglect, and household dysfunction.



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MRI SHOWS IMPACT



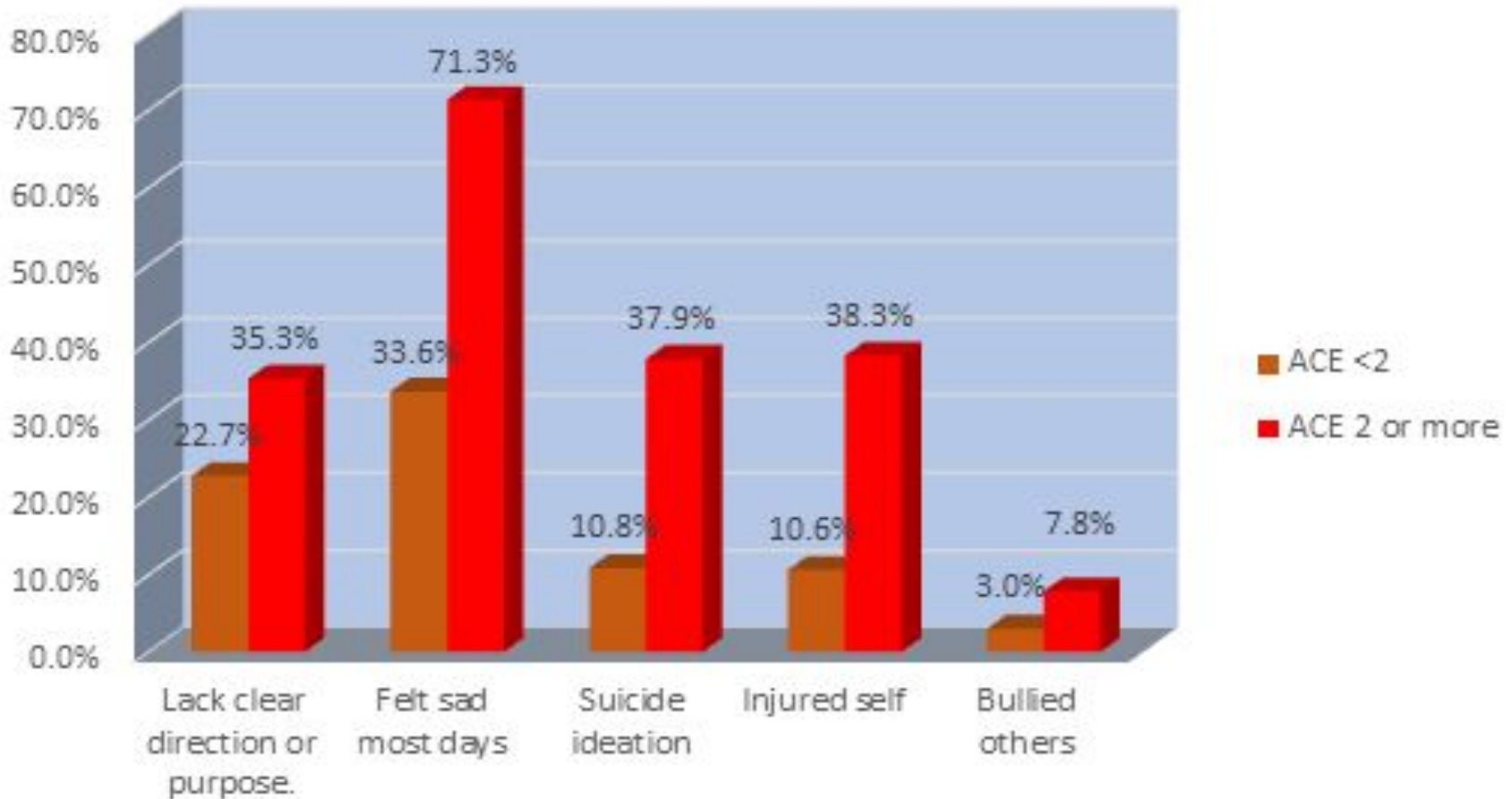
Hand Model of the Brain

Dr. Dan Siegel



Overlap of Trauma and Suicide-2019 Youth Survey

Risk Behaviors and ACE



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How do we
address trauma?

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Turn and Talk with a partner

What does a Safe &
Supportive environment look
like, sound like, and feel like?

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SUPPORTING STUDENTS



ADAPT INSTEAD OF ADD



- DON'T THINK
“MORE” –
THINK “ADAPT
CURRENT PRACTICE”



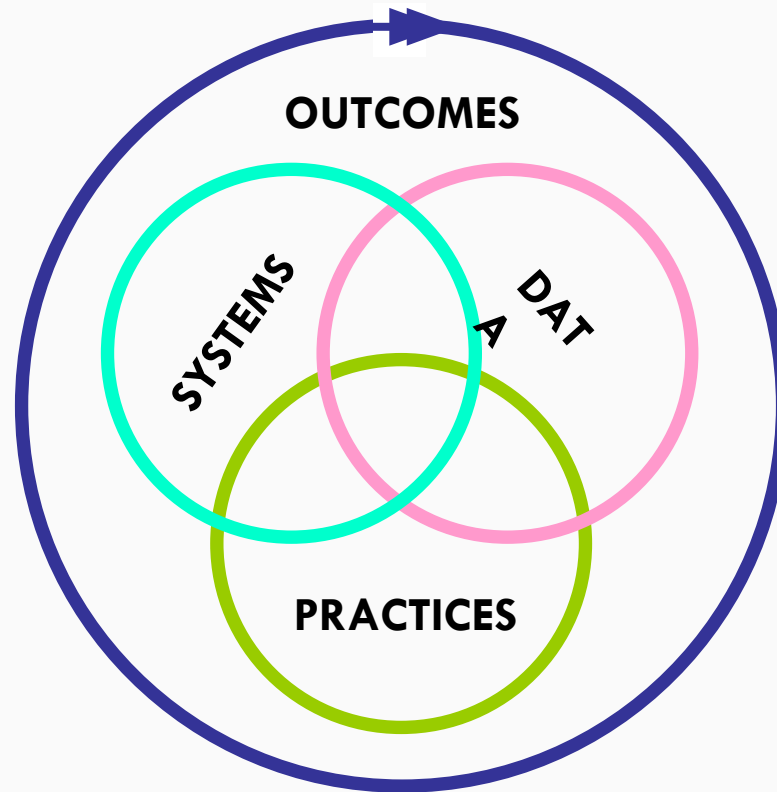
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Trauma & Mental Health Issues

- **50% of all lifetime cases of mental illness begin by age 14**
- **75% by age 24.**

Anxiety Disorders – Age 11

Eating Disorders – Age 15

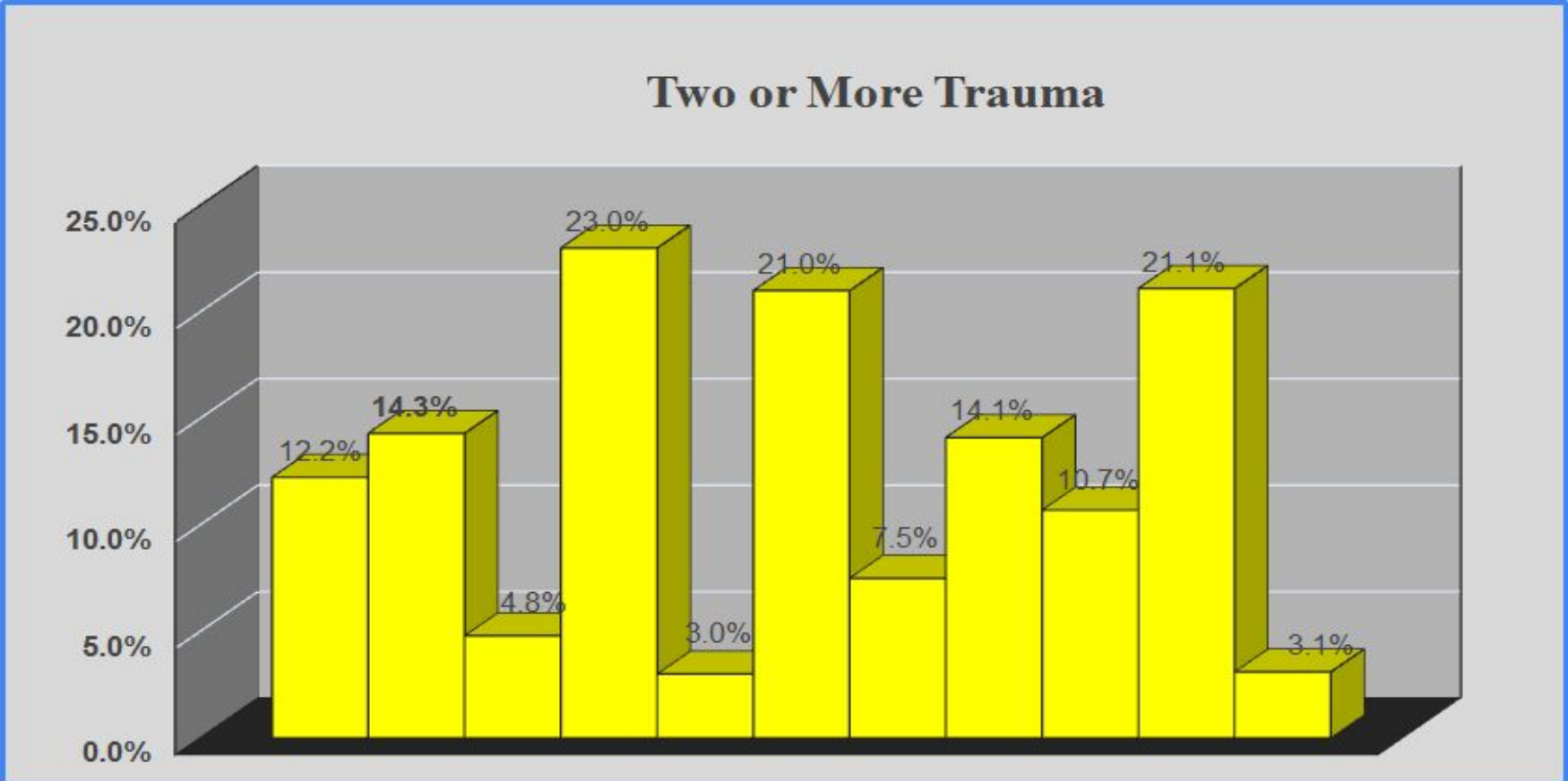
Substance Abuse – Age 20

Schizophrenia – Age 23

Bipolar – Age 25

Depression – Age 32

ACE'S REPORTED BY KINDERGARTEN PARENTS AT SCREENING: [@frantigrossi](#)



WAYNE COUNTY SCHOOL DISTRICTS

K READY SURVEY- Wayne County 2019
599 out of 1007 Kindergarten Students

12% Wayne Co. Avg

Adapted from Jay Roscup, WCPSF

LOCAL K SCREEN:

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CHILDREN WITH 2 OR MORE “ACEs” *:

- 3 times more likely to not calm down when upset.
- Twice as likely to not be able to independently button or zipper clothing.
- 13 times less likely to be able to focus on activity other than TV or computer.

LOCAL K SCREEN: CHILDREN WITH 2 OR MORE “ACEs” :

- 5.7 times more likely to ignore rules at home.
- 4.3 times more likely to never read with parent/adult.

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Discuss with someone new

Now that you have seen our pre-K numbers, what is your prediction as to how trauma will impact secondary students?

Evalumetrics Youth Survey - 2019	2019	ACE less than 2	ACE 2+	Ratio
Used Alcohol in Past 30 Days	18.7%	15.3%	25.8%	1.7
Used Marijuana in Past 30 Days	13.9%	11.3%	18.8%	1.7
Used Any Other Drug in Past 30 Days	1.5%	0.7%	3.1%	4.4
Family Conflict	7.7%	2.6%	15.3%	5.9
Attachment	10.5%	7.2%	27.0%	3.8
Suicide Plan	10.4%	4.7%	25.3%	5.3

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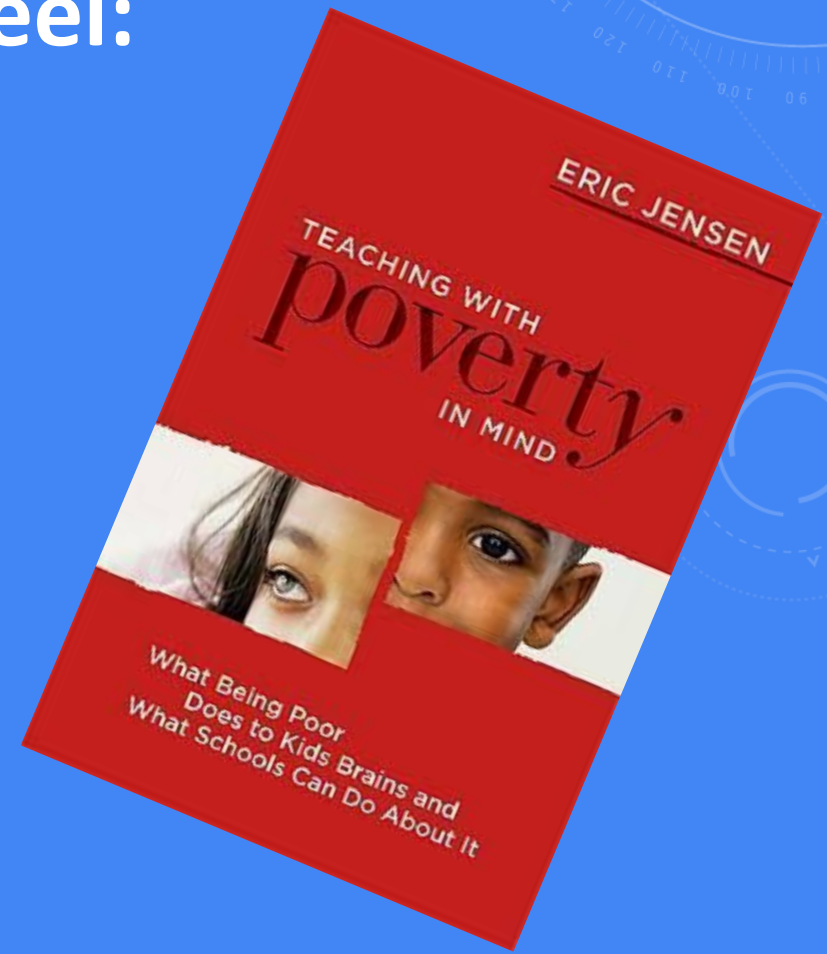
POVERTY ASIDE

You can be poor and feel:

-Safe

-Loved

-Proud



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POVERTY & TRAUMA 2019

RISK FACTOR/BEHAVIOR	ACEs 2 OR MORE	FOOD INSECURE	BOTH
Family Conflict	5.9X	2.6X	4.2X
Opportunities for Prosocial Involvement	2.9X	2.5X	3.5X
Lack Attachment To Family	3.8X	2.4X	3.1X
Plan Suicide	5.3X	3.7X	9.8X
Alcohol Use	1.7X	1.4X	1.8X
Marijuana Use	1.7X	1.1X	1.3X
Other Drugs (Opioids, Cocaine etc)	4.4X	1.8X	2.1X

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Partner Discussion

What do you notice and
wonder after looking at this
data?

Comparing 2017 to 2019

RISK FACTOR/BEHAVIOR	ACE 2 + and Poverty 2017	ACE 2+ and Poverty 2019
Anti-social Behavior	4.2X	0.6X
Friends Use Drugs	58.8X	1.3X
Lack Attachment To Family	5.3X	3.1X
Alcohol Use	8.0X	1.8X
Marijuana Use	8.0X	1.3X
Other Drugs (Opioids, Cocaine etc)	8.8X	2.1X



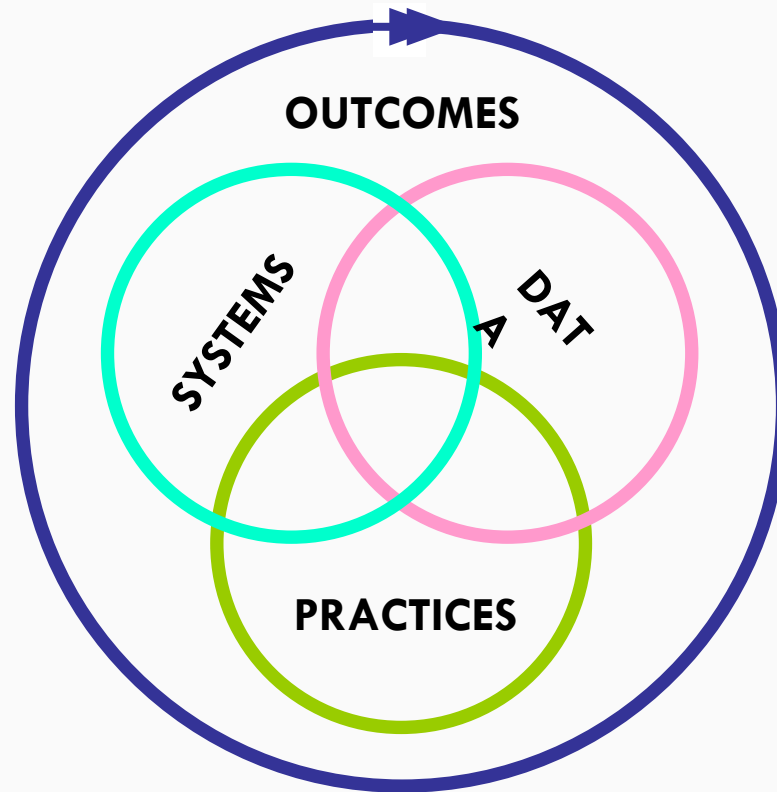
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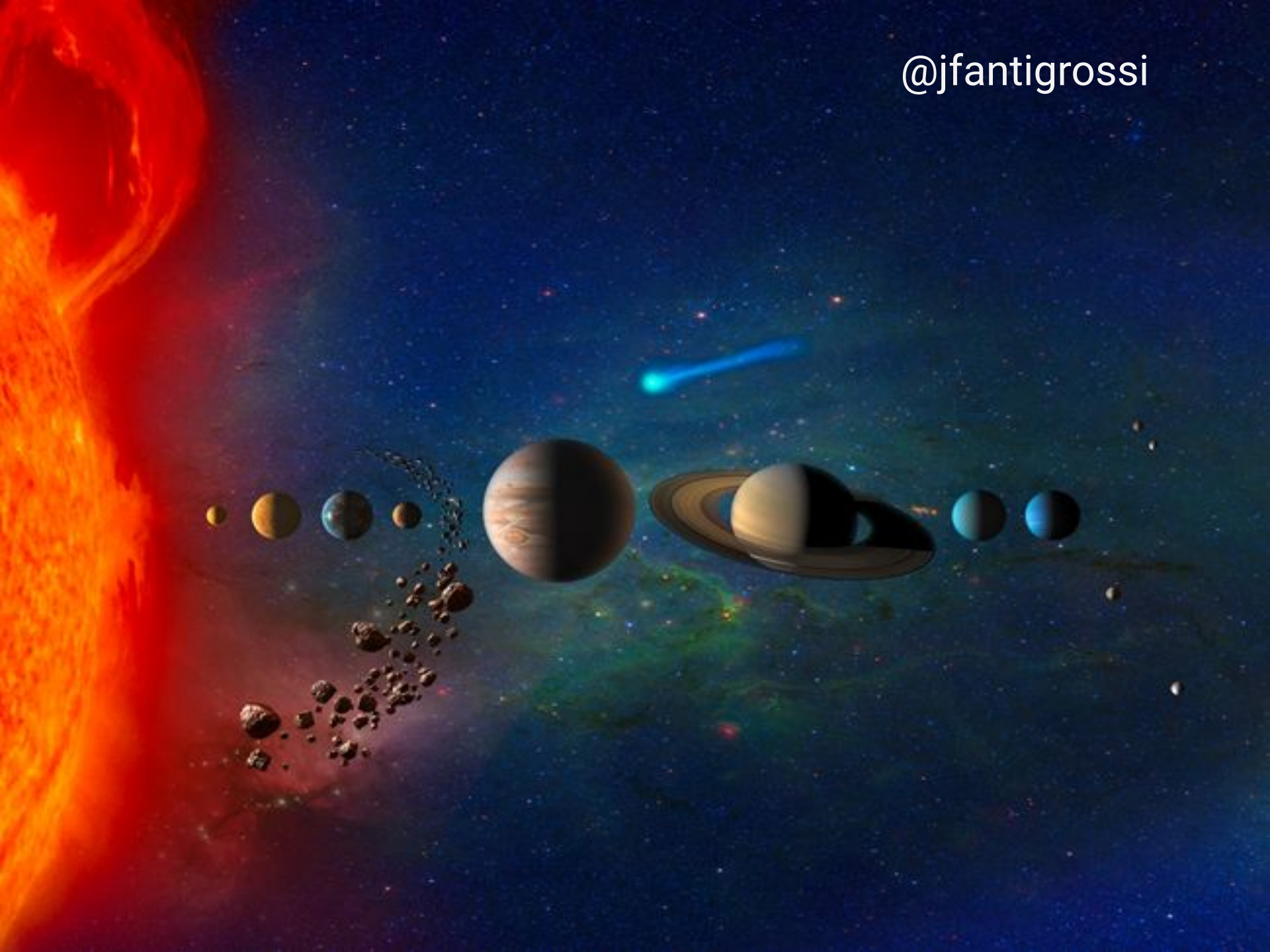
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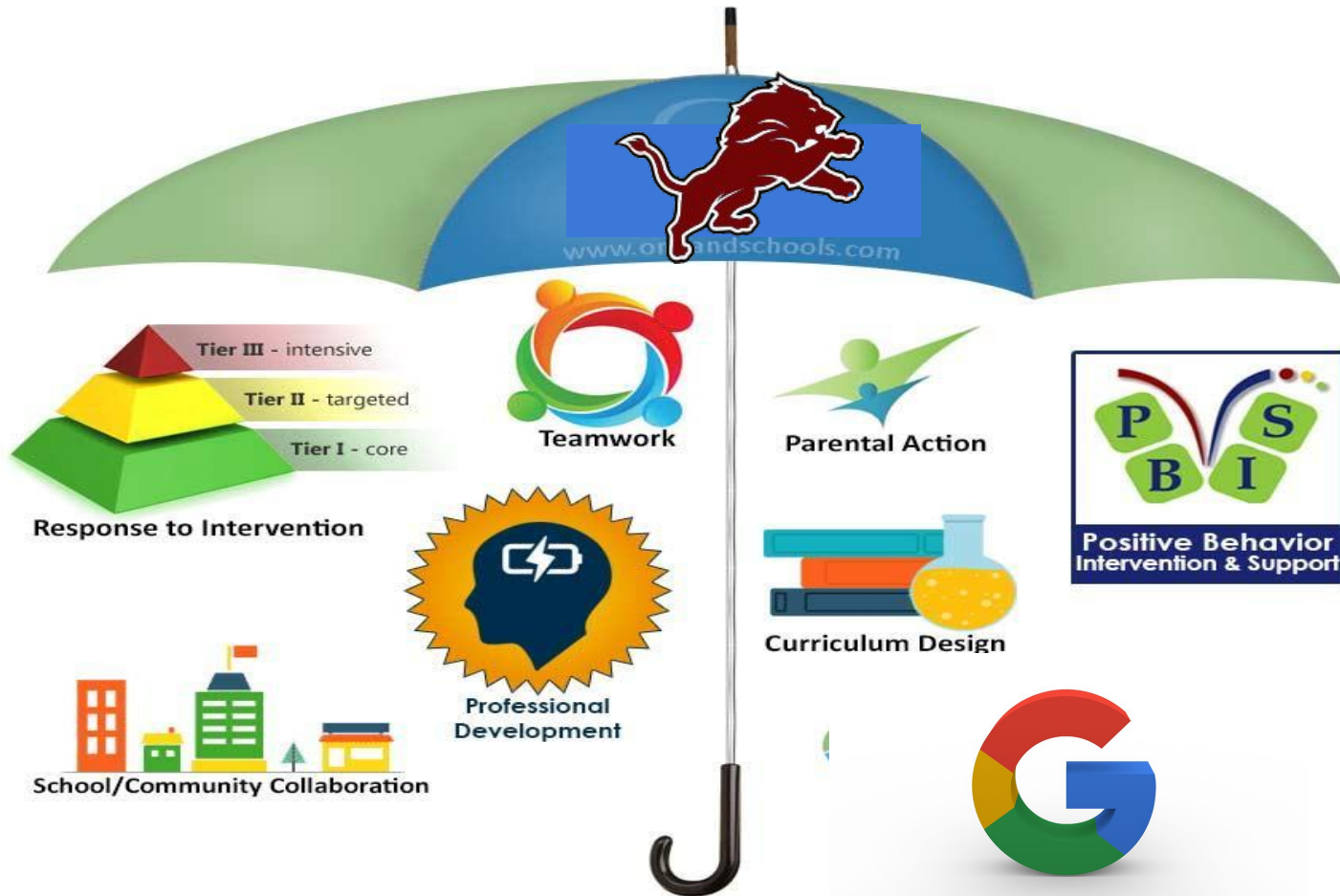
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What lives under the MTSS Umbrella



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WHAT DO A FEW STUDENTS NEED?

WHAT DO SOME STUDENTS NEED?

WHAT DO ALL STUDENTS NEED?





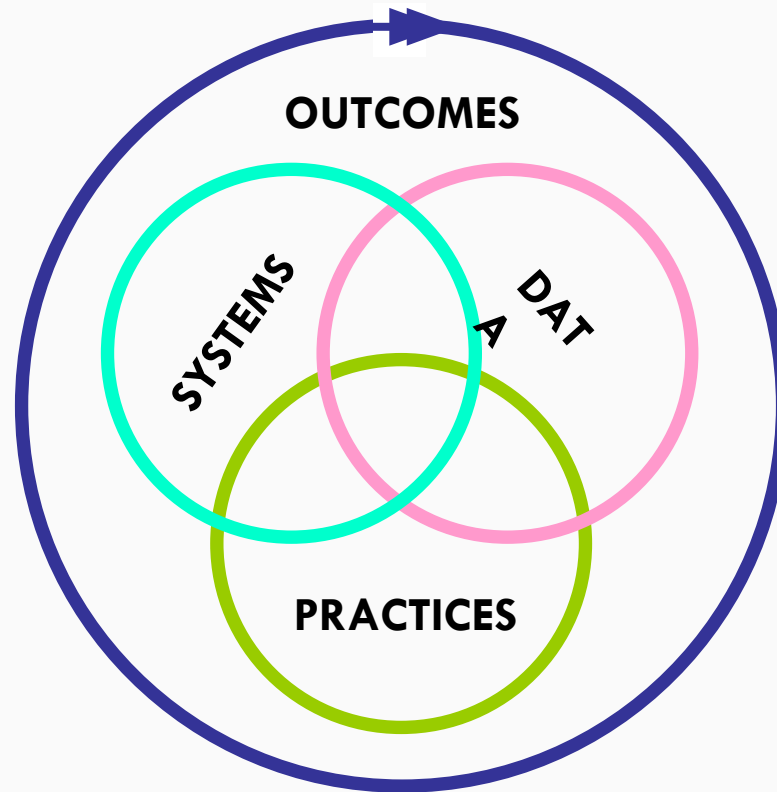
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Best Practices

Next
Exit



TIER 1 Interventions

TIER 2 Interventions

TIER 3 Interventions

How to Adult

SW-PBIS

Second Step

Botvin's Life Skills

Project Success

RRR

Incredible Years

Primary Project

NYS Mentoring

Check In/ Check Out

FACT

Why Try

Goal Attainment Scaling

Wrap/Renew

**YAP Mentoring (before
involvement with
court)**

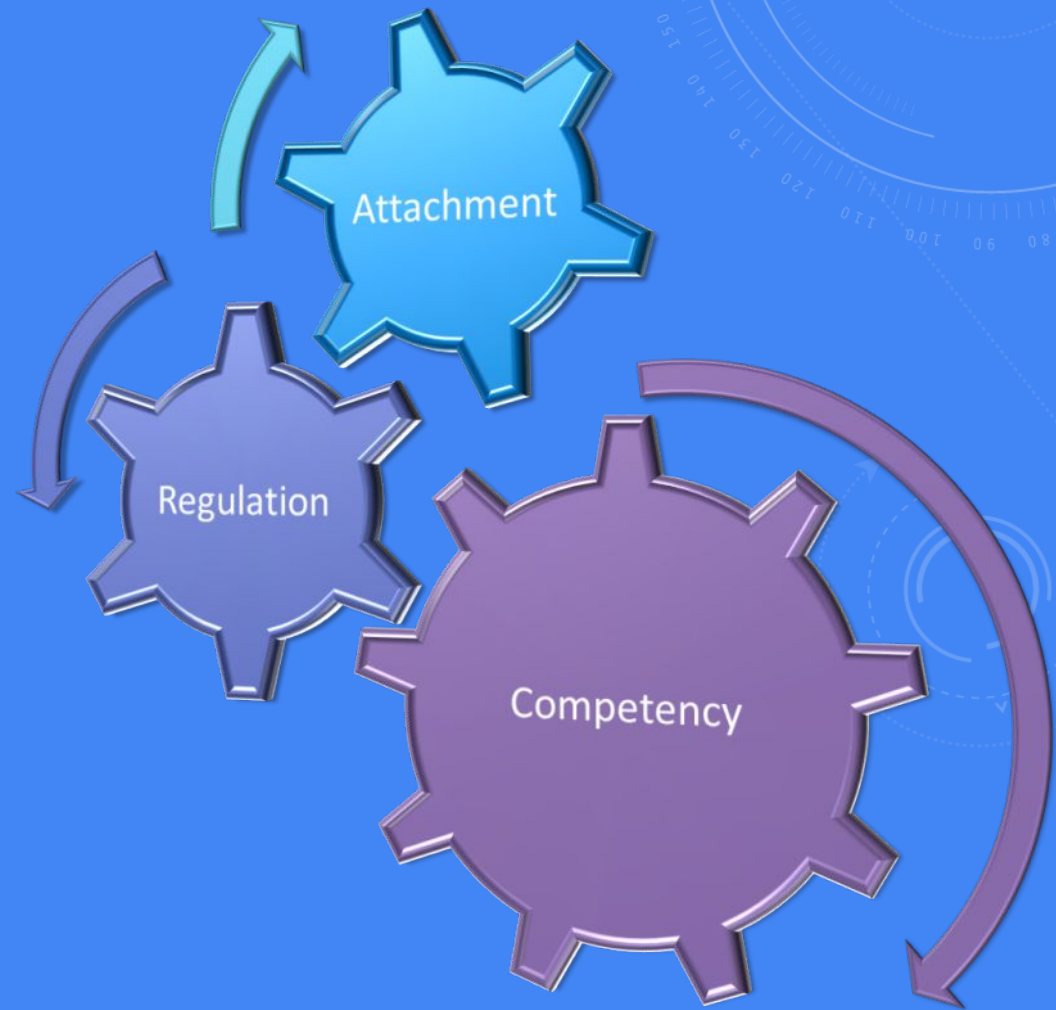
PINS

**Satellite MH Office in
School Building**

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A FRAMEWORK TO HELP

**ATTACHMENT
REGULATION
(SELF)
COMPETENCY**



arcframework.org

Developing Resilience:

Attachment-caring adult & positive peer interaction

Self-Regulation- ability to respond to stress with poise; absorb, identify and manage strong emotions

Competency- building abilities; from reading to math to cooking a meal-this provides a sense of self-efficacy

Control, Agency, and Means-end Interview

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Self-efficacy	ACE<2	ACE 2+	ratio
N=	851	925	
At risk from lack of self-efficacy	10.6%	32.9%	3.11

Nearly one in three (32.9%) of students with an ACE score of two or more lacked self-efficacy.

Small Group Discussion

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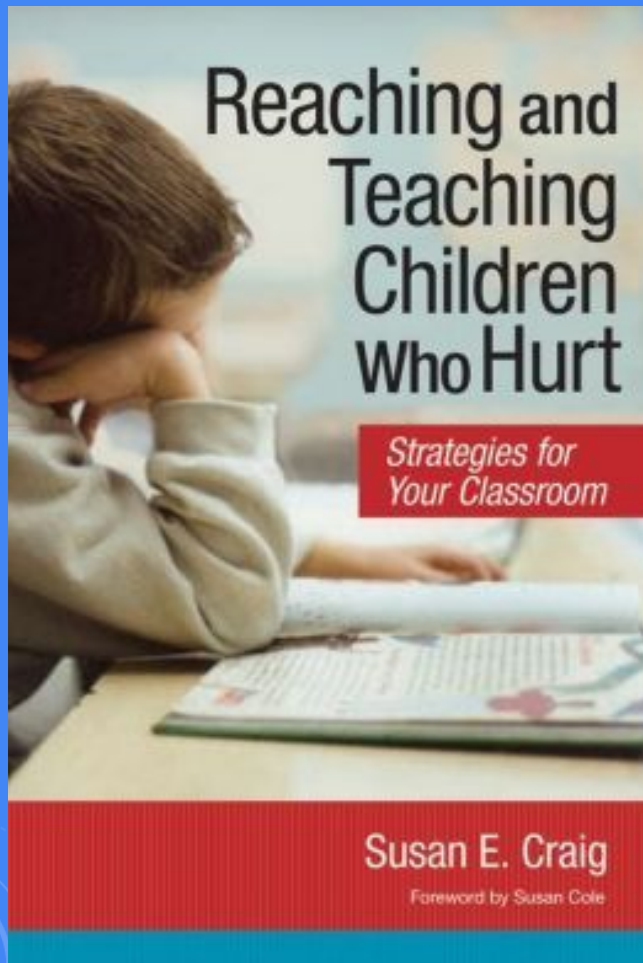
What is one thing you are currently doing in your school/district that helps students with attachment, regulation, or competency?

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BUILDING CAPACITY FOR STAFF

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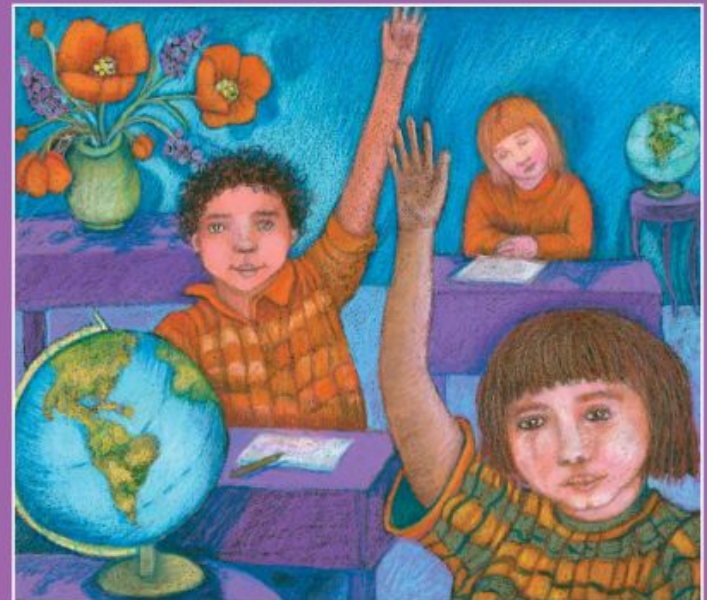
BOOK STUDIES & PLC'S HELPED START CONVERSATION:



Helping Traumatized Children Learn

*supportive school environments
for children traumatized by family violence*

A Report and Policy Agenda



Massachusetts Advocates for Children: Trauma and Learning Policy Initiative

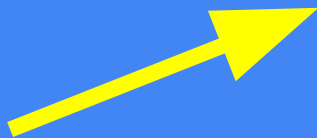
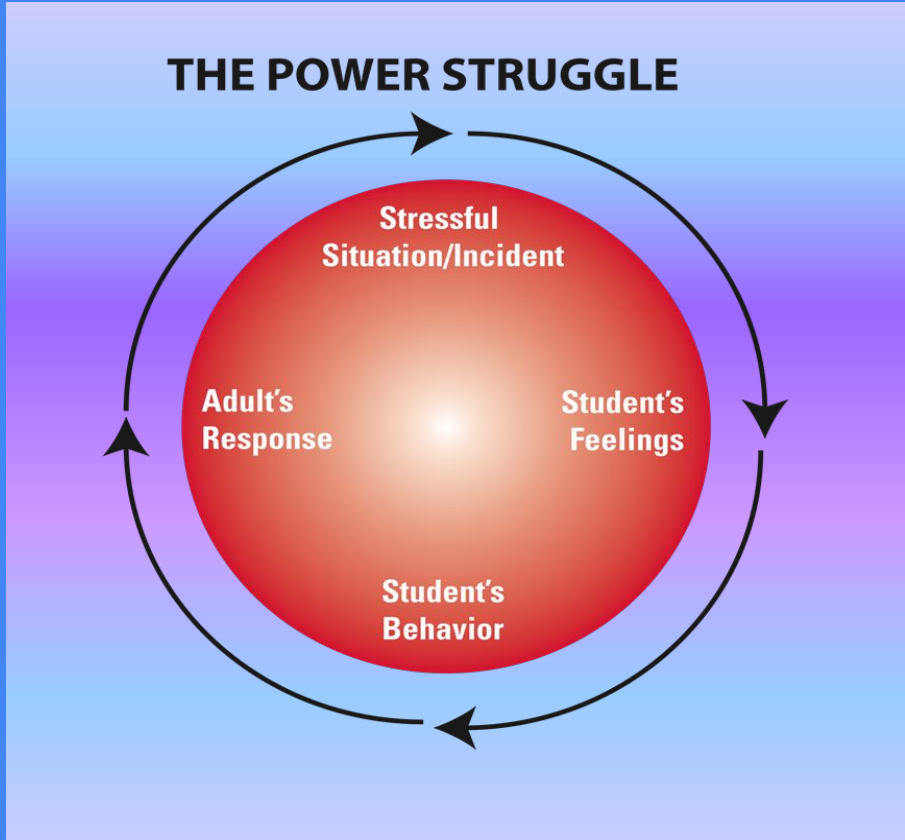
In collaboration with Harvard Law School

and The Task Force on Children Affected by Domestic Violence

(Both of these are on your resource handout)

Therapeutic Crisis Intervention for Schools (TCIS)

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WHAT HAPPENED TO YOU?



YOUTH
MENTAL
HEALTH
FIRST AID®

www.MentalHealthFirstAid.org

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YOUTH MENTAL HEALTH FIRST AID

TAKE A COURSE. SAVE A LIFE.

ANYONE, ANYWHERE CAN #BETHEONE TO MAKE A DIFFERENCE IN THE LIFE
OF SOMEONE WITH A MENTAL HEALTH OR SUBSTANCE USE CHALLENGE!



ASIST

Applied Suicide Intervention Skills Training

- Suicide first-aid to help a person at risk stay safe and seek further help as needed.
- Participants learn to use a suicide intervention model
 - identify persons with thoughts of suicide
 - develop a safeplan based upon a review of risk
 - be prepared to do follow-up
 - become involved in suicide-safer community networks.

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Find a partner you have not worked with yet today.

Discuss one action step you can take in the near future to make your organization more responsive to trauma.

ADAPT INSTEAD OF ADD



- MUCH OF WHAT IS ALREADY DONE CAN BE Integrated INTO A TRAUMA INFORMED APPROACH!!
- DON'T THINK "MORE"—THINK "ADAPT CURRENT PRACTICE"

@ jfantigrossi #safeandsupportiveforall

It has to start somewhere...

@jfantigrossi

THANK YOU!

- jfantigrossi@lyonscsd.org
- @jfantigrossi on Twitter
- Joseph Fantigrossi on Facebook and LinkedIn
- JosephFantigrossi.com
- <http://bit.ly/wayne-cty-mtss>

17th INTERNATIONAL CONFERENCE ON POSITIVE BEHAVIOR SUPPORT

The Expanding World of PBS:

SCIENCE, VALUES, AND VISION

Miami, FL

Hyatt Regency Miami

March 11-14, 2020

For more information, visit:
conference.apbs.org

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1) **Mobile App:** click on “session evaluation” under the session description.

2) **Online:** click on the link located next to the downloadable session materials posted at <http://www.pbis.org/presentations/chicago-forum-19>

3) **QR Code:** Scan the code here (or in your program book) and chose your session from the dropdown Menu.

