Creating Trauma-Informed Policies:
A Practice Guide for School and Mental Health Leadership

By Leora Wolf-Prusan, EdD

Creating compassionate policies is a cornerstone strategy of educational leadership. Recently, teachers, school counselors, school-based health center directors, nurses, mental health providers, and district and state administrators have embraced trauma-informed care in education.

Policies are just written practices. If policies, practices, and programs do not align with practitioners’ core principles, a policy is simply words on paper. When developing policies, leaders have many distinct opportunities to be thoughtful, strategic, and intentional about the what, why, how, with, and for whom.

This guide provides an overview of four leadership “choice points” that influence the creation, development, and impactful implementation of school practices and approaches that align with trauma-informed and compassionate school principles.¹ We use the term choice point to reflect costs and benefits of each option. We offer leadership and practice suggestions for state, LEA, school site, and other student mental health organizations to strengthen leadership approaches. The guide presents these suggestions organized around four key policy choice points:

1. **Names & Definitions:** What is the intended outcome of the trauma-informed work, and how might you choose policy language that reflects the mission and vision of the work?

2. **Platform & Levers:** What is the right policy entry point? Which avenue will allow the policy to carry the most impact?

3. **Approach:** Is it most effective, impactful, and sustaining to add to existing policies; amend current policies to include trauma-informed principles; align concurrent initiatives with a trauma informed focus; drop policies that are trauma uninformed, or add a new policy altogether?

¹ Note that for the purposes of this issue brief, we use the term “trauma-informed schools” to reference policies that develop, ensure, and promote personalized learning environments informed by brain science and centered on positive school climates with relationships as the main driver. See Table 1 for more choices regarding the name or term to use for this pedagogical policy and practice approach.
4. **Match Process to Product**: how might the process of developing the policy embody trauma-informed principles?

Although this guide is intended to be useful for education leaders and practitioners nationwide, special consideration is given to the **Pacific Southwest states and islands**: Arizona, California, Hawaii, Nevada, American Samoa, Federated States of Micronesia, Guam, Marshall Islands, Northern Mariana Islands, and Palau. Throughout this guide, we review existing models of trauma-informed policy and legislation, with a focus on examples from the Pacific Southwest.

**Choice Point 1:**

**Names & Definitions**

*Identify the outcome, name the practice, inform the policy*

Language matters. The term “trauma-informed schools” can hold a wide range of meanings to different practitioners. Clarifying key concepts and definitions at the outset ensures that practices and programs are aligned with shared values and visions for the work. Good policies are built upon shared understanding, concepts, and research. The definitions we choose and the way we name practices informs our core principles and subsequent action steps.

When choosing a definition, name, or term, consider how this language will resonate with your stakeholders. How would your proposed policy look, sound, and feel like to all community members? Is it strengths-based? How might a teacher, administrator, funder, partner, parent, or student hear or understand the definition similarly or differently? For example, in some communities it may be vital to integrate principles of equity and empowerment (including the impacts of historical trauma, community and system oppression, and micro-aggressions) into a definition of trauma.

The meaning of “trauma-informed schools” can include multiple definitions and can hold many different names. One of the core intentions behind the trauma-informed school movement is to create safety by building secure relationships. Blodgett and Dorado observe that “the foundational concepts of good trauma response—that compassion has the power to heal, that placing a priority on the power of relationships is essential for change, and that assuring safety should be a right of childhood—all create hope for better outcomes and point to the kinds of immediate actions that make change a realistic possibility for many.” The first choice that mental health and educational leaders face is to identify the intended outcome of the work.

**Appendix I** highlights diverse definitions of trauma and trauma-informed. Use these concepts to create consensus for your organization on the meaning of trauma and to develop a shared understanding of the change your policy seeks to achieve.

**CHOICE POINT 1 PRACTICE SUGGESTIONS**

1. Explore the definitions provided in Appendix I. What do you notice in the language differences? What language resonates, and what language is not culturally aligned?
   Draft a definition and get feedback from students, parents/guardians, educators, and other stakeholders.

2. Ask each other: with this policy name, what practices would stay the same? What practices and belief systems might need to shift? Who benefits from the chosen language? Who might not? Who may feel challenged?

3. Finalize the definition for school/agency/organizational practice.

4. Review the policy’s name frequently: are there new terms used? New science to inform policy and practice? How might new organization members or students re-inform the name of the work?

**CHOICE POINT 1 LEADERSHIP QUESTIONS**

1. What values and beliefs are you trying to communicate? What is the outcome of this work?

2. Which definitions best fit with the vision and mission of your organization and community?
3. Is there language that your community (constituents, stakeholders, students, families, school employees, partnerships) would like to add to these definitions?

4. What language do your partners, funders, or other stakeholders use? How can you ensure alignment?

**Choice Point 2: Platforms & Levers**

*Select the platform(s) for optimal policy change and advocacy*

A policy needs a platform. Platform options include large platforms (large federal or state systems) and/or local platforms (individual community, school, or district-based). When designing policies, it is important to choose the platform that will most impact practice shift in a sustainable, equitable manner.

It is critical for leadership teams to understand the policy levers unique to their own environment. Some states, like California and Nevada, have adopted local control agreements that provide the individual schools or districts a degree of autonomous decision making. These states may be more inclined to craft trauma-informed school policies at the local policy level, especially if the policies are written by and for students and teachers. Hawaii is the only state in the country to have a single statewide school district (Hawaii’s public schools are 100% funded by the state); it may be more effective for Hawaii to approach policy at the large systems platform level.

**Leadership Questions**

1. Which platform will maximize the culture shift desired?
2. Is it more sustainable to create and establish a policy from the top down or bottom up?
3. How might leadership from both levels collaborate to create policies that are aligned and mutually informing at the state and systems levels, as well as the school and classroom levels?

**Practice Suggestions**

Before choosing a platform, conduct a landscape analysis to assess the platform that will be most impactful, efficient, and effective. Suggested practice steps:

1. Gather a team together to begin a policy platform landscape analysis.
2. Ask: what policies at both platform levels are already in place?
3. Ask: which partners (political groups, leaders, agencies) promoted the policy’s construction?
4. Determine the trajectory and outcomes of previous policy efforts. Were there efforts to enact new policies that never get off the ground? With whom might you connect to assess the challenges of these previous efforts?
5. What are the benefits and challenges to choosing to establish a trauma-informed policy through large systems versus through a local contingency?

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*Adapted from "Trauma-Informed" Student Codes Of Conduct (Walters, 2018)*
Choice Point 3:  
Add, Drop, Amend, Adapt, or Align?  
Assess where you are to inform the most effective and efficient approach

Creating trauma-informed school policies doesn’t always have to start with drafting new policies. Mental health and education leaders can add, drop, amend, adapt, or align trauma-informed policies for school systems, districts, LEAs, ISDs, or school communities. See Appendix II for sample trauma-informed, school-related policy at various levels for examples of existing policies in action.

The following are five practical approaches to the adoption or adaptation of trauma-informed policies.

**ADD** a commitment to trauma-informed care to existing policies. Your school community may be already committed to social-emotional learning, grief-sensitive schools, school mental health referral pathways, or a multi-tiered system of support. New research and evidence-based practices can support additions to existing policies for students who have experienced trauma. For example, Child Trends recommends local and statewide agencies add a specific focus on early childhood development as the main pathway to developing trauma-responsive school environments. The report suggests creating “policies that promote the placement of young children who have experienced trauma in high-quality ECE programs [and] policies that severely limit or prohibit the suspension and expulsion of young children.” By adding trauma-specific provisions to already existing policies, practitioners may be more successful at implementation.

**DROP** policies that are recognized as trauma-uninformed (or trauma-inducing or retraumatizing). These policies include those that promote the suspension and expulsion of young children and do not provide appropriate interventions for children who have experienced trauma and have social-emotional or behavioral difficulties.

**AMEND** policies that can’t be dropped because they are required by law. It can be transformational to review policies that are already in place and assess areas in which these policies can be augmented with a trauma-informed lens. Note that this may include policies that are seemingly unrelated to student mental health but have great potential to impact and contribute to trauma (e.g., immigration policy, housing policy). One place to start is with a school’s code of conduct. Your team should ask, “How does your student code of conduct reflect a trauma-informed lens?” The following link provides concrete examples of trauma-informed policies that can help your team begin to assess your current code of conduct: "Trauma-Informed Student Codes of Conduct."3

**ADAPT** trauma-informed legislation that exists in another system (juvenile justice, mental health) and re-tool legislation that has been successful in other school systems. For example, an eight-state initiative was led by SAMHSA and the National Association of State Mental Health Program Directors (NASMHPD) to eliminate the use of seclusion and restraint in residential facilities and hospitals. Through that initiative, Hawaii changed its statewide culture in mental health facilities. The same learnings could be applied to school systems in the Pacific Southwest region.

**ALIGN** trauma-informed policy with existing policies. Too often, trauma-informed policy development is seen as “one more thing” to implement rather than a paradigm shift in the way an organization operates; this feeling of burden can lead to resistance. Schools and districts already have policies and practices in place that may align with a trauma-informed approach. Using an assets-based lens, teams can complete a survey of policies and practices that are already in place. Examining and identifying these connecting points can ensure a

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3 [https://drjim-walters-jt4a.squarespace.com/my-blog/trauma-informed-student-codes-of-conduct](https://drjim-walters-jt4a.squarespace.com/my-blog/trauma-informed-student-codes-of-conduct) (Date of access: 1/10/19)
school system and community’s adherence and support.

Below is sample policy content that can inform, align, and augment trauma-informed school policy:

- **School expulsion and disciplinary policy.** The US Departments of Education and Justice have recently released guidance on trauma-informed school discipline policies (see Rethinking School Discipline). Highlighted by the U.S. Department of Health and Human Services, the guide defines trauma-informed school discipline as that in which “accountability is balanced with an understanding of traumatic behavior; positive behavioral support is emphasized; clear and firm limits are set for behavior; logical—instead of punitive—consequences are developed; consistent rules and consequences are created; and non-violent and respectful relationships are modelled” (see more at the Administration for Children and Families Resources Specific to Schools page).

- **School climate and culture policy.** School climate and culture policies include restorative practices and whole child approaches. When aligned to trauma-informed principles, school climate policy explicitly names the wellness factor (burnout prevention, compassionate fatigue intervention) for school employees (including support staff, cafeteria, and maintenance staff). See more specific examples in How Trauma-Informed Schools Help Every Student Succeed by the Crisis Prevention Institute.

- **Educator (teachers, counselors, school site leaders) professional development policy.** Educator professional development policy can be aligned to a trauma-informed approach. These professional development mandates might encourage both educators and community leaders to take lead roles in the professional development delivery. They can offer opportunities that are relationship-focused and relational, and include ongoing coaching to support workforce capacity building. Opportunities should be appropriately sequenced (meaning they are long-term and ongoing). For example, trauma-informed professional development opportunities might require training on adverse childhood experiences or the brain and its impact on behavior.

- **Social and emotional health school policy or wellness policies.** Wellness policies often focus on nutritional and physical health for school and district communities. These wellness policies can be augmented by adding language that invites the same approach to healthy living, but with a socio-emotional and/or resiliency lens (e.g., San Diego Unified School District’s 2017 Wellness Policy). Another approach is to align trauma-informed policy with the human relations/resources department to maximize a commitment to workforce development (e.g., Trauma-Informed Oregon’s human resource policies assess and address the training, onboarding, and supervision of personnel).

- **Crisis response, readiness, and recovery policy.** Many school districts have crisis response policies in place. If aligned to a trauma-informed school practice, these policies can explicitly name what constitutes a crisis (e.g., school shooting, death of a student, community violence); describe what equitable and peer-led crisis response practices can be instituted; and focus on recovery and repair after a critical incident. To be aligned with trauma-informed practice, crisis response policy would assume the crisis has universal impact and anticipate that the event may activate students’ and staff members’ trauma response. For example, the promotion of restorative circles would be a trauma-informed response to crisis.

- **Violence prevention policy.** Many states, counties, cities, and school districts have policies that address violence prevention. For example, California convened a multidisciplinary group of stakeholders and consumers in June 2018 to discuss the needs and future direction of violence prevention in California. Examples of how the attendees envisioned an alignment between violence prevention and trauma-informed policy included “engage communities and youth,” “foster community engagement and increase social cohesion,” and pursue a “coordinated approach to funding.” Details can be found in the Violence Prevention Initiative Public Health Convening Summary and Notes.

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Leadership Questions

**Choice Point 3**

**Leadership Questions**

1. What current policies and practices need to be added?
2. What current policies and practices need to be dropped?
3. What current policies and practices can’t be dropped but can be amended?
4. What role does the school board play in this process?
5. Are there other systems from which you might adapt policy or legislation?
6. What is your process for identifying and aligning current policy?

**Choice Point 3**

**Practice Suggestions**

When choosing whether to add, drop, amend, adapt, or align, it’s useful to conduct a landscape analysis to assess what policies currently exist. Suggested practice steps:

1. Gather a team together to begin a policy landscape analysis.
2. Identify the data that will inform your decision-making and support understanding of the impact of a currently existing policy.
3. Choose a data inquiry protocol—a structured method to review data and help structure your data-driven decision making.\(^5\)
4. Appendix II offers examples to reference when adapting, adopting, or aligning trauma-informed policy (general and school-focused). Across the country, entities at the national, state, and local level have been creating both systems- and local-level policies that bolster trauma-informed school practice. There are many examples to draw from in the structure, content, and language of existing policy to contextualize for your own needs.

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**Choice Point 4:**

**Matching Process to Product**

_Mirror a trauma-informed approach in the development of the policy_

The way in which we approach policy development and the establishment of a trauma-informed school community, building, or system is most impactful when the process itself models trauma-informed principles and values. The “how” deeply impacts the “what.” SAMHSA’s six trauma informed principles\(^6\) (see box) can ground leadership choices that shape the policy’s development and implementation.

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**SAMHSA’s Six Trauma Informed Principles**

1. Safety
2. Transparency and Trustworthiness
3. Choice and Collaboration
4. Peer Support
5. Mutuality and Empowerment
6. Attunement to Cultural, Historical, and Gender Issues

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The following are examples of three ways in which the process of trauma-informed policy development can embody the principles it espouses:

- **Cross-sector collaboration:** Policies are most successfully integrated and implemented when developed across sectors. If the policy platform is a local mental health department of a local education agency, try developing the policy with early childhood, college and career, curriculum and instruction, physical education, and other departments to ensure a true community of practice. The work of developing the policy can be collective and collaborative, with an emphasis on peer work and equity. This helps eliminate potential barriers and avoid common pitfalls of complex change.

- **Transparent communication:** Ensure that stakeholders and partners know throughout every stage of the process where the policy is in its development, the arising challenges, the

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\(^5\) See [nsrfharmony.org](http://nsrfharmony.org) for sample data inquiry protocols for practitioners.

\(^6\) Substance Abuse and Mental Health Services Administration. SAMHSA’s Concept of Trauma and Guidance for a Trauma Informed Approach. HHS Publication No. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.
thought process behind its language, and the choices made along the way to model transparency and enlist trust. This also includes easy-to-read documentation in relevant languages and social media posting for optimal access.

- **Center equity and justice:** If the elements and outcomes of a trauma-informed school policy pathologize students and their families, the policy is not trauma-informed. If the elements and outcomes of a trauma-informed policy create or replicate harmful power dynamics, it is not trauma-informed. The process of developing a trauma-informed school mental health policy must address historic harm that previous school mental health and education policy has inflicted on disenfranchised communities. From there, communities can feel safe, repair trust, and interrupt experiences of appropriation or manipulation to become authentic partners.

**CHOICE POINT 4**

**LEADERSHIP QUESTIONS**

1. How will we collaborate with student support staff, teachers from an array of subjects/grade levels, administrators (including district), parents, classified staff, and union representation?
2. How might the district and school communities’ written policies and procedures include a focus on trauma and issues of safety and confidentiality?
3. How might we establish policies that require all levels of school systems to have crisis readiness, response, and recovery procedures (including natural disasters, community violence, and grief and loss in schools) that are co-constructed by school community members, written and accessible, and iteratively examined to ensure accuracy?
4. How do the district and school communities’ staffing policies demonstrate a commitment to staff training events that are culturally relevant and trauma-informed?
5. What policies and procedures are in place for including students and staff in meaningful roles in school culture and climate, and instructional planning, governance, policy-making, services, and evaluation?

**PRACTICE SUGGESTIONS**

1. Create contributive experiences: Youth and community participatory action research (YPAR and CPAR respectively) are processes that center collaboration and mutuality. Using YPAR or CPAR approaches to policy development can build trust between those who may be most impacted by the policy itself.
2. Ensure iterative return to the policy: Identify the time marker for when everyone involved in the development of, and who experiences the impact from the policy, comes together to review what is working, what needs to get better, and if the policy is meeting its intended goals.
3. Share decision-making so that the development process feels consensual and supportive. Note that this often means more time: more time to listen to stakeholders and more time to listen to the policy’s supporters and the policy’s challengers.
4. Provide tools for stakeholder capacity-building: How a workforce is trained directly translates to their ability to enact the trauma-informed skills and competencies in their role (as teachers for students, as principals for school staff, etc.). Like Title IV in the Every Student Succeeds Act, there are many policies that have begun to codify the funding of trauma-informed professional development. Policy process can become empowering by providing professional development and training to staff and community members on policy development itself, explicitly investing in the competencies of partners participating in the development or implementation process.

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7 See “Community-Based Participatory Research: A Strategy for Building Healthy Communities and Promoting Health through Policy Change” (PolicyLink, 2012).
This guide for education and mental health leaders examined the four choice points to consider in the development of policies that support trauma-informed school practice, programs, and pedagogy. These four choice points are foundational steps to building policy and practice structures that support sustainable implementation of a trauma-informed approach. The establishment of clear and coherent policy is essential to ensure fidelity, adherence, sustainability, and, most importantly, overall improved outcomes for students and staff.

RESOURCES

Measuring Progress Towards Becoming a Trauma-Informed School (Now is the Time TA Center for SAMHSA, 2017)

Restorative Practices: Approaches at the Intersection of School Discipline and School Mental Health (Now is the Time TA Center for SAMHSA, 2015)

How Trauma-Informed Schools Help Every Student Succeed (Eilers, Crisis Prevention Institute, 2018)

Guide to Trauma-Informed Organizational Development (THRIVE, 2010)


Trauma Sensitive Schools Training Package (National Center of Safe Supportive Learning Environments)—includes training modules on discipline practices, communication with students and families, and safety procedures (alignment with trauma-informed principles and guiding questions for school leaders)


Wisconsin Department of Instruction’s Tool: Review Tool for School Policies, Protocols, Procedures & Documents: Examination Using a Trauma-Sensitive School Lens

REFERENCES


Below are various terms and definitions that those involved with policy development and implementation can use, adapt, or glean from when choosing the language to describe the desired outcomes of the policy.

### APPENDIX I: Naming the Practice; Informing the Policy

Historically, the concept of trauma has focused on individual trauma—childhood abuse and neglect, adult or adolescent sexual assault, and abuse by an intimate partner, as well as the individual effects of combat trauma and military sexual assault. Yet many people experience collective forms of trauma, as well—trauma that affects people as part of a particular community, culture, or group. These experiences continue to affect individuals and communities across generations, including the ongoing legacies of trauma resulting from structural violence, slavery, and colonization; the trauma of war, poverty, displacement, and persecution; the trauma of transphobic, homophobic, and gender-based violence; as well as the insidious, microaggressive trauma of objectification, dehumanization, and marginalization that many people experience daily. | National Center on Domestic Violence, Trauma & Mental Health, 2018, p. 48-49

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 life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being. | SAMHSA, 2014, p. 7

Experiences or situations that are emotionally painful and distressing, and that overwhelm people's ability to cope, leaving them powerless. | Center for Nonviolence and Social Justice, Drexel University

### TRAUMA-INFORMED CARE AND PRACTICES

Trauma-informed practices may reflect the application of a deeper knowledge of trauma and recovery, include specific practices and policies, and typically involves systemic integration of trauma knowledge and skills into all aspects of organizational practices. | SAMHSA, 2014

All adults able to recognize and respond to the impact of trauma on young children, and to infuse trauma awareness, knowledge, and skills into program culture, practices, and policies. | Child Trends, 2017

### TRAUMA-INFORMED ORGANIZATIONS AND AGENCIES

Trauma-informed describes an approach that recognizes the pervasiveness and impact of trauma on survivors, staff, organizations, and communities, and ensures that this understanding is incorporated into every aspect of an organization’s administration, culture, environment, and service delivery. A trauma-informed organization actively works to decrease re-traumatization and support resilience, healing, and well-being. Additionally, trauma-informed organizations recognize ongoing and historical experiences of discrimination and oppression, and are committed to changing the conditions that contribute to the existence of abuse and violence in people's lives.

A trauma-informed approach involves providing access to a range of healing modalities and practices, and creating community partnerships to ensure survivors and their children have access to trauma, mental health, and substance use services. Trauma-informed organizations support survivors to feel more connected and empowered as they prepare for situations that are potentially retraumatizing. A trauma-informed approach fosters an awareness of what we, as service providers, bring to our interactions, including our own experiences of trauma as well as the ways we are affected when we are truly open to the experiences of other people. | National Center on Domestic Violence, Trauma & Mental Health, 2018, p. 8

### TRAUMA-INFORMED CLASSROOMS

A learning environment infused [with] an understanding of the impact of trauma and adverse life experiences on students into the classroom culture and promote a physically and psychologically safe environment to foster student growth. Classroom structures promote safety, appropriately use disciplinary action and helps students manage overwhelming responses to stress. | National Center on Domestic Violence, Trauma & Mental Health, 2018, p. 8
TRAUMA-INFORMED SCHOOLS

Trauma response moves from trauma awareness, to trauma sensitivity, to trauma-informed practice with progressive shifts
the depth of understanding and level of formal change efforts. | Blodgett & Dorado, 2015, p. 46

Trauma-informed schools acknowledge the prevalence of traumatic occurrence in students’ lives and create a flexible
framework that provides universal supports, is sensitive to unique needs of students, and is mindful of avoiding re-
traumatization. | Wisconsin Department of Public Instruction

TRAUMA-INFORMED SYSTEM

A trauma-informed child- and family-service system is one in which all parties recognize and respond to the impact of
traumatic stress on those who have contact with the system, including children, caregivers, and service providers. Programs
and agencies within such a system infuse and sustain trauma awareness, knowledge, and skills into their organizational
cultures, practices, and policies. They act in collaboration with all those who are involved with the child, using the best
available science, to facilitate and support the recovery and resiliency of the child and family. | National Child Traumatic
Stress Network

RESILIENT-ORIENTED SCHOOLS [OR] RESILIENCE IN SCHOOL ENVIRONMENTS

Teachers routinely work with children who experience traumatic life events ranging from abuse and neglect, natural
disasters, and the death of someone close. The effects of others’ trauma can negatively impact life at work and home. Like
first responders who respond to critical incidents, teachers need training and coping skills to protect their own physical,
emotional, and mental health. Resilient school environments not only focus on student well-being, but also on school
employee wellness. | Kaiser Permanente Southern California

COMPASSIONATE SCHOOLS

Compassionate schools support all students and are focused ultimately on helping teachers understand fundamental brain
development and function, learning pedagogy, recognize a mandate for self-care, correctly interpret behaviors, manage
negative behaviors successfully with compassionate and effective strategies, and engage students, families, and the
community. | Washington State Office of Superintendent of Public Instruction

TRAUMA-RESPONSIVE/SENSITIVE SCHOOLS

Trauma sensitive practices may involve a more general appreciation of the impact of trauma and global supportive strategies
such as encouraging quality of relationships and promoting safety. | Blodgett & Dorado, 2015, p. 46

A trauma-sensitive and trauma-informed school provide increased access to behavioral and mental health services, effective
community collaboration, an increased feeling of physical, social, and emotional safety among students, and positive and
culturally responsive discipline policies and practices that increase school connectedness. | National Resilience Institute

HEALING-CENTERED ENGAGEMENT

A healing-centered approach is holistic involving culture, spirituality, civic action, and collective healing. A healing-centered
approach views trauma not simply as an individual isolated experience, but rather highlights the ways in which trauma and
healing are experienced collectively. The term “healing-centered engagement” expands how we think about responses to
trauma and offers more holistic approach to fostering well-being. | Ginwright, 2018
### National Policy That Supports Trauma-Informed Schools Practice and Programs

<table>
<thead>
<tr>
<th>Description</th>
<th>Excerpted language: “Whereas trauma-informed care is an approach that can bring greater understanding and more effective ways to support and serve children, adults, families, and communities affected by trauma; Whereas trauma-informed care is not a therapy or an intervention, but a principle-based, culture-change process aimed at recognizing strengths and resiliency as well as helping people who have experienced trauma to overcome those issues in order to lead healthy and positive lives; That the House of Representatives— (1) recognizes the importance, effectiveness, and need for trauma-informed care among existing programs and agencies at the Federal level; and (2) encourages the use and practice of trauma-informed care within the Federal Government, its agencies, and the United States Congress.”</th>
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<tr>
<td>House Resolution 443 Recognizing the Importance &amp; Effectiveness of Trauma-Informed Care (Agreed to Simple Resolution on February 26th, 2018)</td>
<td>National Education Association 2016 Convention</td>
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<td>Excerpted language: “The National Education Association believes that complex trauma impacts the brain development of children. Complex trauma causes systemic and individualized educational barriers that interfere with children’s emotional and physical health and impedes access to education. The Association further recognizes the risks of secondary trauma faced by those who support these children and that they, themselves, may need support. The Association understands that trauma crosses all segments of society and is often compounded by the effects of poverty, institutional racism, and other adverse childhood experiences. The Association also believes that school districts should provide complex trauma training for education employees, and programs to address the effects of trauma.”</td>
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| Parent Teacher Association (PTA)’s statement on trauma-informed care includes workforce development recommendations. | Excerpted language: "School-based professionals—teachers, principals, counselors, nurses, psychologists, social workers and paraprofessionals—are provided with professional development on the topic of resilience in trauma-exposed children, thereby creating an education and support system that is trauma-informed at all levels; Strengthening professional training and licensing for related health personnel and practitioners to recognize and respond to youth at risk of, or affected by, ACEs." |

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<tr>
<th>AB-2246 Pupil suicide prevention policies (California State Assembly)</th>
<th>Excerpted language: “Existing law establishes a system of public elementary and secondary schools in this state and provides for the establishment of school districts and other local educational agencies to operate these schools and provide instruction to pupils.”</th>
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<td>“The policy shall also address any training to be provided to teachers of pupils in grades 7 to 12, inclusive, on suicide awareness and prevention...To assist local educational agencies in developing policies for pupil suicide prevention, the department shall develop and maintain a model policy in accordance with this section to serve as a guide for local educational agencies.”</td>
<td>California: Concurrent Resolution No. 155; Passed Aug 11, 2014</td>
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<td>Urges the Governor “to reduce children’s exposure to adverse childhood experiences, address the impacts of those experiences, and invest in preventive health care and mental health and wellness interventions” and “to consider the principles of brain development, the intimate connection between mental and physical health, the concepts of toxic stress, adverse childhood experiences, buffering relationships, and the roles of early intervention and investment in children as important strategies.”</td>
<td>Convey a commitment to trauma-informed services (TIS) by authoring guiding principles into policy for the Department of Education.</td>
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<td>These are some examples of what state policy can do (adapted from “Creating Conditions for Change: Emerging Policies to Promote and Support Trauma-</td>
<td>Establish an office or project coordinator for TIS within student support, school mental health, or behavioral health divisions that is charged with creating a strategic plan, developing regional learning collaboratives, or providing technical assistance on TIS.</td>
</tr>
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<td>Convey a commitment to trauma-informed services (TIS) by authoring guiding principles into policy for the Department of Education.</td>
<td>Require school districts universally to demonstrate their commitment to TIS by providing overall guidelines and tie funding streams to ensure accountability.</td>
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### School District-Level Policy Examples

**Informed Care,**" 2015):  
Offer incentives or support for implementation efforts (e.g., mini-grants for LEA or school districts to participate in statewide TIS community of practice or work group).

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<tr>
<th>San Francisco Unified School District Resolution No. 1312-10A4, &quot;Establishment of a Safe and Supportive Schools Policy in the SFUSD&quot; (adopted 2/25/14)</th>
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<td>Excerpted language: “San Francisco Unified School District (SFUSD) believes strongly in creating a District-wide, positive, relationship-based culture that is supportive of all members of the SFUSD community and has been a statewide leader in initiating policies to support Restorative Practices, Positive Behavior Interventions and Supports, and Trauma Sensitive Practices.”</td>
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<td>1) Develop a policy and implementation plan for the roll-out of Restorative Practices (RP) and 2) School Wide Positive Behavior Interventions and Supports (SWPBIS) at all schools over the next three years (e.g., include trauma-informed practices and behavior de-escalation support.</td>
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<td>[The SWPBIS plan shall include] “A structure for providing training and support about trauma informed practices, the need for behavior de-escalation and implicit bias and stereotype, and Lesbian, Gay Bisexual, Transgender, Queer sensitivity, and other cultural competency training in order to help all staff more effectively respond to and prevent behavior issues from escalating.”</td>
</tr>
</tbody>
</table>

### School Building-Level Policy Examples

**In The Trauma Sensitive Classroom (2019),** Jennings & Siegel offer the following policies (often embedded in practices) that support a trauma-sensitive approach.

- School contains predictable and safe environments (including classrooms, hallways, playgrounds, and school buses) that are attentive to transitions and sensory needs.
- Leadership (including principal and/or superintendent) develops and implements a trauma-sensitive action plan, identifies barriers to progress, and evaluates success.
- School participates in safety planning, including enforcement of court orders, transferring records safely, restricting access to student-record information, and sensitive handling of reports of suspected incidents of abuse or neglect.
- Discipline policies balance accountability with an understanding of trauma and the history of disproportionality of discipline among students of color.
- Ongoing professional development opportunities occur as determined by a staff needs assessment.