

# Strategies for Trauma-Informed Distance Learning



## INTRODUCTION

Sometimes even the most effective teachers may struggle to reach a student. Discerning the reasons can be hard, especially if those reasons stem from the effects of adverse experiences that may result in trauma. The challenges of recognizing and responding to students' social, emotional, and mental health needs are compounded in a distance learning environment — and even more so during a global health crisis.

Childhood trauma may be caused by any of a number of adverse experiences,<sup>1</sup> such as abuse, neglect, and household and community distress.<sup>2</sup> Trauma can affect just about every domain in which students function, and can inhibit their ability to develop in a healthy manner.<sup>3</sup> Trauma can also negatively affect students' abilities to regulate emotionally, to develop healthy relationships, to pay attention, to engage, and to learn.<sup>4</sup>

Trauma-informed practices — such as creating safe and supportive learning environments and helping students develop consistent, positive relationships with peers and adults — are powerful ways to mitigate the effects of trauma and to promote resilience in children and youth. However, distance learning creates barriers to students' access to safe environments, healthy relationships, and needed supports. Because distance learning is taking place during a global health crisis, when students may already be experiencing increased levels of stress, adversity, and trauma, educators must remove or work around such barriers.

Even when teaching students remotely, teachers can engender safe and supportive environments that improve students' ability to engage and learn. One simple framework that can

- 1 Centers for Disease Control and Prevention. (2020). *Adverse childhood experiences (ACEs)*. <https://www.cdc.gov/violenceprevention/childabuseandneglect/acestudy/index.html>
- 2 Shonkoff, J. P., & Garner, A. S. (2012). The lifelong effects of early childhood adversity and toxic stress. *Pediatrics*, 129(1). doi:10.1542/peds.2011-2663
- 3 Van der Kolk, B. (2014). *The body keeps the score*. Penguin Random House.
- 4 Bartlett, J. D., & Sacks, V. (2019). *Adverse childhood experiences are different than child trauma, and it's critical to understand why*. Child Trends. <https://www.childtrends.org/adverse-childhood-experiences-different-than-child-trauma-critical-to-understand-why>









- Plan activities that allow for interaction, when possible. In a virtual setting, use tools such as online community platforms or videoconferencing, so that students can see and hear you and one another. In a nonvirtual setting, plan activities that allow for interaction in other ways, such as through group texts or phone conferences, so that students can interact with you and with one another.

**Emphasize caring connections between students and the community for the purposes of student and family wellbeing — even when discussing academic content or performance.**

- Create remote or virtual outreach opportunities, by sending messages, creating online hubs, or offering “community hours” for students and family members to check in and chat about academic or nonacademic topics. In a nonvirtual setting, write and mail letters, make phone calls, or schedule “walk-bys” or “drive-throughs” — when allowable under state and/or local guidelines — to wave or speak to students, from a safe distance away, near their homes.
- Encourage students and their families to talk on the phone or by video with one another when possible, or schedule virtual “play dates” or other home-based activities that they can do together virtually when all participants are available.
- Create an appreciation or gratitude activity for students to do together with one another or with their families, such as mailed cards, emailed notes, or spoken words.
- Regardless of a student’s performance or ability to complete tasks, communicate appreciation of student and caregiver efforts.
- Encourage students and their parents or caregivers to connect with counselors or other trusted adults. Offer students other connections or resources to use if they need help or are worried about their safety or well-being.
- Encourage parents and caregivers to limit the amount of time that they spend watching or listening to the news or discussing information about current events, while they are in the presence of students. This is to reduce students’ exposure to potential fear-based information, which can impede their ability to regulate, or can exacerbate existing stress or trauma.

### REASON

Once students are regulated and related — feeling safe and supported — educators and others can support their learning of academic content that may require recalling, reflecting, and/or communicating their knowledge.

#### **Be realistic and gentle about creating a “new normal” with students and their families.**

- Many students who face adverse experiences and who live with trauma have not been prepared to use distance learning tools, either virtual or nonvirtual, or to shift to learning at home. Therefore, effective and meaningful lessons and activities may not happen immediately or all at once. Provide students, their families, and yourself the time and space to figure out a “new normal,” giving everyone permission for trial and lots of error. Be patient, prioritize, and let some things go.

#### **Reduce workloads for yourself and your students.**

- With stress and change, students’ physical and mental capacities to handle an academic workload are diminished. If you are using the lessons that you would normally use in your classroom for distance learning, consider slimming them down, such as by reducing the amount of reading required or decreasing the number and/or the length of responses that you ask for. For example, if you normally assign five word problems for homework, consider assigning only two or three.

#### **Support executive functioning and self-management skills by breaking work into smaller pieces.**

- Ensure that instruction and materials are “chunked,” giving students the opportunity to focus on one new learning task at a time. Encourage caregivers to follow this “chunking” method with students as well.
- Ensure that instructions are clear and concise, with one or two steps presented at a time.
- When possible, use both written and verbal instructions. Encourage parents and caregivers to read any instructions for the student aloud.
- Provide lots of opportunities for breaks, fun activities, and connections with peers and teachers (see the previous “Regulate” and “Relate” sections for examples).
- Allow plenty of time for students to process information and to respond to it.
- Ask parents and caregivers to do their best to establish a routine for learning, to involve students in developing schedules, and to set reasonable expectations of students while at home. Provide organization and structure by using hourly, daily, and weekly lesson schedules that students can follow as an example, but remind





