

Dear School Administrator,

Thank you for implementing *Trauma-Informed Practices for K12 Schools* into your professional development program! One of the most important things we can do for a child who has experienced trauma is provide a caring, safe relationship, infused with hope. The program introduces trauma-informed strategies that can be used with all students. This can make a lifetime of difference, not only for students, but for their families and communities, as well. While not every student will experience a significant trauma in life, all of us experience loss, stress, and challenges. Building up our students' resilience will help them through these experiences.

Below are a few ways you can promote and use this program.

Get the word out!

Distribute flyers and email your staff to introduce and promote the program. An email template and program flyer are included in this packet.

Check staff progress.

Keep track of who has completed the program, and send reminder emails to encourage full participation.



Schedule a follow-up workshop.

Schedule a workshop where staff can discuss their reactions and takeaways to the program, role play similar scenarios with each other, and learn the process for referral at your school. This packet contains a workshop facilitator's guide as well as handouts for participants.

Thank you for all you do to support the health and wellbeing of your students!

Sincerely,

The Kognito Team

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About Kognito

At Kognito, we envision a world where all individuals and communities harness the power of conversation to change lives. Kognito's mission is to combine the science of learning, the art of conversation, and the power of virtual-human simulations to empower educators and students with the tools they need to build safe and supportive school cultures. Our model of change is built on the input of thousands of educators and students from across the country.

The Kognito Model

Every day, conversations take place that have the potential to improve social, emotional, and physical health. Unfortunately, these conversations often suffer in quality and effectiveness. Practice-based experiential learning can build the skill and confidence needed to effectively approach these important conversations.

The Kognito model combines evidence-based SEL skills, learning science, and simulated practice with virtual humans to create a learning experience that leads to improved confidence and behavior change. Learners immerse in simulated real-life scenarios, engaging in conversations with virtual humans and receiving feedback from a virtual coach. This model ensures a more reflective and transformational experience.

At Kognito we believe that

- O1. Adults learn best when they do. Kognito's simulations provide key knowledge on conversation and adult SEL skills, followed by practice opportunities. Active experimentation transforms abstract concepts into concrete experiential learning.
- **O2.** Adult learners need opportunities for critical reflection. The conversations provide coaching and critical check-in opportunities for learners. These reflection points create transformative-learning moments and promote deeper understanding of the program's communication strategies.
- **O3.** Adult learning that evokes an emotional response creates a powerful learning experience that is meaningful and lasting. The conversations promote "aha" moments, revealing the cause-and-effect relationship between a learner's communication strategy choices and the responses they elicit. The learner is then able to relate experience in the simulation to past experience and discover new meaning in previous interactions.

Steps for Successful Roll-Out



Meet with your mental health staff to ensure the school's referral process is defined.

In a recent survey, educators ranked lack of knowledge around their school's policies and referral process as the #1 barrier to connecting students with support. If your teachers do not already have a copy of your policy and process, consider creating a reference document. Also, ensure your school's mental health staff are aware of the upcoming training with this Kognito program, as they will most likely receive an increase in questions and referrals.

Note: If your school is going through a period of remote learning, it is critical to adapt referral procedures for students to assure telehealth options are available to connect students/families with school counselors and mental-health professionals.

Step 2

Plan how you will implement the program at your school.

Trauma-Informed Practices for K12 Schools can be used as a standalone training, or it can be rolled out in conjunction with an online or face-to-face workshop where staff delve deeper into the issues and skills learned. The blended-learning option is ideal, as it reinforces learning and provides staff a chance to discuss school-specific policies and resources.

Implementation Options:

- **01.** Staff complete the simulation only
- **02.** Staff complete the simulation, then discuss in a workshop session (recommended)
- 03. Staff complete the simulation during a larger workshop, with before and after discussion



Have your technical contact review the hardware and software requirements.

Most schools will easily meet the minimum requirements, but if you have any questions, please contact the Kognito support team at 866-923-8632 or support@kognito.com.

Steps for Successful Roll-Out



Email staff to let them know about the training and provide details on when and how to take the simulation.

We have provided a promotional email template; personalize the communication to reflect your school voice and training goals. Program flyers are also included.

Step 5

Designate someone to lead the workshop discussion.

Designate someone to lead the workshop discussion, as well as a point person for those who are unable to attend. Kognito's Workshop Facilitator's Guide provides step-by-step instructions for leading a valuable workshop discussion. Again, this step is optional, as the simulation can be used as a standalone learning experience.

Email Template

Below is sample content you can use for emails, newsletters, or posts on your school website. Request that principal or school counselor send the email to emphasize the simulation's importance to school goals and student outcomes, and customize the language to fit your needs.

• • •

Subject: Supporting Student Mental Health

Dear staff members:

Today's students face pressures and circumstances that can lead to trauma and distress and manifest in concerning behavior, such as depression, anxiety, and even thoughts of suicide. As educators, we can take small steps to make a big difference.

[Sponsor Organization] has adopted *Trauma-Informed Practices for K12 Schools*, a 45-minute online simulation to help us recognize signs of distress, approach students and parents to discuss our concerns, and refer students to appropriate mental-health resources. During the simulation, you will practice through role-play conversations with an emotionally responsive virtual student and parent.

Link to open an account and begin the simulation: http://kognitocampus.com Enrollment Key: [xyz]

I ask that you complete this training by [date]. You may complete the training in multiple sittings, and your progress will be saved.

We will conduct an [online/face-to-face] workshop on [date] to review the skills discussed in the simulation and discuss the referral process at our school.

If you have any questions, please don't hesitate to contact me [or counselor if applicable] at [xx@xx.edu].

Sincerely,

[Signature/ideally the principal or superintendent]

Trauma-Informed Practices for K12 Schools

A 30-Minute Online Role-Play Simulation

At school, educators see a small part above the water. But there's probably a lot happening below the surface.

Learn how to:

- Recognize when a student's behavior might be the result of trauma or distress
- Lead conversations with a student about how they might be feeling
- Problem-solve ways that your class can become a more comfortable place for students who have experienced trauma
- Assess the need for referral, motivating students to seek help when needed
- Consider your own need for self-care

Accredited for 1.0 ANCC CNE contact hours







To access simulation:



Visit kognitocampus.com



Create account using Enrollment Key



Select your grade level



Launch
Trauma-Informed Practices
for K12 Schools





Workshop Facilitator Guide

Print the following pages and use as a guide for leading the workshop. A PDF of the following pages can also be downloaded at:

https://kognito.com/ares_workshop_facilitators_guide

Workshop Facilitator Guide

Facilitator Prep time: 2-3 hours Workshop Runtime: 2-3.5 hours

Preparation

Oetermine how to best implement the training at your school:

Decision 1: Will staff complete the simulation prior to coming to the workshop?

- We recommend staff complete the simulation on their own and then meet for a two-hour workshop.
- Alternatively, staff can take the simulation as part of the workshop (on separate computers). Then they rejoin the group for discussion. This would be a half-day training.

Decision 2: Will the workshop be face-to-face or online?

Tips for online workshops:

- Possible software: Zoom, Google Hangouts, WebEx, or Skype
- The "breakout rooms" in Zoom allow participants to partner for role plays and discussion.
- Share your screen to show PowerPoint slides.
- Assign a co-host to help you manage the workshop.
- · Complete a recording of the online workshop and make it available for those who cannot attend.
- Review *Trauma-Informed Practices for K12 Schools* and the full Workshop Facilitator's Guide and corresponding PowerPoint. Customize the PowerPoint to include your school or district's logo and any mission- or vision-specific details. If you will have less than two hours for your workshop, customize it to suit your time constraints.
- Discuss your school's referral process with the school leader, counselor, and/or mental-health team. Customize slides 16-17 (referral process and local resources) and be ready to present this information to the group. Be sure to include both the traditional at-school referral process as well as the process for referral and connection if students are learning from home. If you will provide mental health services via telehealth, explain that process.
- Cue up the corresponding PowerPoint presentation and make sure you have adequate means to present it to your participants. If needed, you can adjust the length of time of your workshop by adding/removing discussion items or activities.
- Print or email the workshop handouts.
 - Note-taking guide
 - Simulation summary
 - Role-play scenarios
 - Local Resources page from the simulation

Sample Planning Timeline

- 60 Days Prior: Confirm simulation training date and location
- 45 Days Prior: Ensure account access for district/school staff
- 30 Days Prior (if staff will take simulation prior to workshop): Confirm registration and that attendees have created their accounts
- 5 Days Prior: Send reminder to staff

Workshop Flow

Welcome & **Hook Activity** 10 min

Slide 1: Welcome

• Welcome attendees and thank them for coming.

Slide 2: Your role [customize]

- Introduce yourself and (if necessary) your role within the school or district.
- Share contact information. Encourage attendees to reach out to you with questions or follow up after the training.

Slide 3: Workshop overview [customize this slide if participants will not take the simulation during the workshop]

Discuss what participants will learn in the workshop.

Slide 4: Group norms [customize as necessary]

Sample norms: actively participate, be respectful, do not share names or identifying information of students or staff, seek help if you would like to discuss personal trauma, take a break if any of the material is triggering, reach out to me at the end if you are concerned about a student.

Slide 5: Hook activity (5 min)

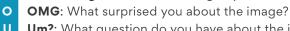
Ask attendees to use a scrap piece of paper to describe the image on the slide, using the acronym AEIOU. (1 min)



Adjective: A word to describe the image.







Um?: What question do you have about the image?

- Ask participants to share their observations with a neighbor. (1 min)
- Ask participants to share a few answers with the whole group. (2.5 min)

- Quick Debrief: (0.5 min)
 - Sometimes we see the kid at the desk but we don't see the wave behind them. Understanding the possibility of past or ongoing trauma and the effect it can have on a student's mental well-being helps educators see the student's bigger picture.
 - It's important to keep a trauma-informed mindset when responding to concerns in the classroom, as you never know which students may be dealing with trauma that is affecting how they interact at school.
 - As educators, we should know how to identify signs of distress, approach students confidently, and refer students to the supports they need to thrive.

Note: If staff have taken the Kognito simulation prior to the workshop (recommended), then skip to section 5 (PPT slide 11).

Preparing for Simulation

Slides 6 - 9: Brief overview of Kognito and the simulation they are about to take.

- Kognito's simulations are evidence-based.
- Encourage staff to choose the conversation pathway that best reflects what they would actually say in a real-life conversation.
- Let staff know we are not asking them to become counselors... but to capitalize on the limited time they have with students to provide the most effective support.

Simulation & Break 50 min - 1 hr 20 min

Slide 10

- Ensure participants are able to login to their account.
- Provide headphones to all participants.
- When asked to choose your setting, select elementary school, middle school, or high school. If they take only one conversation, they will likely complete the experience in 30 minutes; if they take all three, it could take 45-60 minutes.
- Pass out the **note-taking guide** to all participants.
- Proctor the room to allow anyone needing assistance to communicate with you.
- Participants who finish early can begin their break. Write on the board what time the workshop will reconvene for discussion.

10-Minute Break

Discussion 30 min

Slide 11: Simulation review (5 min)

- Distribute the *simulation summary*.
- Remind participants about the conversation(s) in the simulation (include more detail if the participants took the simulation prior to the workshop).
- Ask a few questions to get the discussion going. Sample questions:
 - How similar did these feel to conversation(s) feel to those you've had in real life?
 - Did you try new things in these conversation(s) that you haven't tried in real life?

Slide 12: Student Distress (5 min)

- "Remember the wave we saw in the picture at the beginning of the workshop? Often we don't know that wave is there. All we see are the student's *reactions* to that wave. These are warning signs that tell you a child might be dealing with more under the surface than we realize."
- "In the simulation, this was described as an iceberg. What we see in class is usually not a full picture of what the child is going through."
- Possible discussion questions:
 - How would you feel if a student like Casey in the simulation knocked over his desk and said your class was BS?
 - How might you react in the moment?
 - How would you like to react?

Slide 13: Warning Signs (5 min)

- Read through the warning signs of distress.
- "Boys are more likely to externalize their emotions (act out). Girls are more likely to internalize their emotions (withdraw)."
- "Younger students are more likely to show their feelings. Older students may not want to stand out or seem 'weak.' They may hide their emotions and cope by doing dangerous things, like driving fast, using drugs, or getting into fights."
- Possible discussion questions:
 - Which of these warning signs of distress do you see most often in your classrooms?
 - How do you feel when a student has behaviors like these? Do you ever take it personally? Why or why not?
 - What are some strategies you use to calm down before approaching a student for a longer conversation? Alternatively, what are some strategies you might try? Possible answers: Letting some time pass before approaching the student, taking deep breaths, finding mental-health support for yourself if needed.

Slide 14: ACEs (10 min)

- Read through the list of adverse childhood experiences.
- "Three in five children will experience one of these by the age of 18. One in three will experience two or more by age 18."
- Possible discussion questions:
 - What kinds of trauma and stressors do you see most frequently? What warning signs do those students exhibit?
 - How can experiences like these take a child out of "learning mode" and put them in a state of heightened alert ("fight, flee, freeze"), even at school?
 - Why is it important for teachers to notice warning signs, reach out to the student, and possibly refer them for support? (Possible answers: build the student's resiliency by being another adult they know cares; educators in an ideal position to notice when a student needs help and connect them with the resources designed to help them; the earlier a child gets the help they need, the better their overall outcomes might be; students receiving needed support may take less of our time and attention in the classroom and cause less disruption)

- Why do some students' warning signs not lead to approach and referral
 by a teacher? (Possible answers: Teachers may not realize the behavior
 is indicative of a deeper issue. Or the student's behavior may not be a
 problem in the classroom.)
- How might identifying an at-risk student save you time in the long run?
 (Possible answers: The student could get the help they need to improve behavior in the long run; when you improve your relationship with the child, their behavior may also improve

Slide 15: Bringing up concerns (5 min)

- Review the techniques discussed in the simulation.
- Possible discussion questions:
 - How does it sound different to approach a student as an authority figure
 versus as a supportive adult? (Possible answers: authority figures spend
 more time talking and less time listening; authority figures give unsolicited
 advice, discipline the student, and presume they already know the reason
 for the student's behavior)
 - Why might we want to sometimes approach a student as a supportive adult, instead of as an authority figure? (Possible answers: we want to understand what the student is struggling with, we want to work with the student to evoke behavior changes, we want to encourage the student to talk with the counselor without making them defensive)
 - How do techniques like these help us assume the role of a supportive adult? (Possible answers: not acting like we already know the reasons for the behavior, bringing up concerns in a way that doesn't blame or criticize the student and is less likely to provoke defensiveness)

Role Play 1

Prepare for role play (5 min)

- Ask participants to break into groups of two for a set of role plays. Onlinemeeting systems like Zoom offer randomized break-out rooms for set periods of time and set group sizes.
- Tell participants they will role-play two challenging conversations between a teacher and a student.
- Ask them to decide who will play the teacher first.

Role play (10 min)

- Participants should look at the *role-play scenarios* and read ONLY about their character (the concerned teacher or the student). Together, they can decide a target age/grade for Tamina, based on the age of their real-life students. Then they begin their role play.
- Give participants a five-minute and one-minute warning before the end of the role play.

Role play discussion (15 min)

- If you played the role of the teacher... What did you learn about Tamina's emotional state and home life?
- If you played the role of the student... What did your teacher do in this conversation to make you feel comfortable and respected?
- How were the techniques (bringing up specific behaviors, asking open-ended questions, and empathizing) used to approach Tamina more as a supportive adult than as a disciplinarian? Alternatively, how could they have been used to make the conversation even better?
- Could Tamina be helped by a referral to a school mental-health professional? (yes, she seems to be under a lot of stress and may benefit from talking with a trained professional at school)
- What kind of advance planning, if any, is necessary for conducting a conversation like this? (Possible answers: checking your emotions to put aside any unhelpful thoughts or presumptions you may have about the student or parent; considering how you might bring up the things you've noticed and what kind of language you will use)
- How else might you better support Tamina at school?

Role Play 2

Role play (10 min)

- Now participants will switch roles. Whoever played the teacher before, will now play the student.
- Ask participants to read Section B on the role-play scenarios. They can decide a target age/grade for Dallas, based on the age of their real-life students. Then they begin their role play.
- Give participants a five-minute and a one-minute warning before the end of the role play.

Role play discussion (15 min)

- If you played the role of the teacher... What did you learn about Dallas's emotional state and home life?
- If you played the student... What did your teacher do in this conversation to make you feel comfortable and respected?
- How were the techniques (bringing up specific behaviors, asking open-ended questions, and empathizing) used to approach Dallas more as a supportive adult than as an authority figure? Alternatively, how could they have been used to make the conversation even better?
- Could Dallas be helped by a referral to a school mental-health professional? (yes, Dallas seems to be under a lot of stress and may benefit from talking with a trained professional at school; it would also be helpful to talk with his parents about your observations)
- How else might you better support Dallas at school?

Our School's Process

5 min

Slides 16: Referring students

- Ask participants to turn to the back of the *simulation summary* and take notes.
- Pass out copies of the "Local Resources" page from the simulation.

Conclusion Activities

Slides 18: 3, 2, 1 Activity (8 min)

- On a new piece of paper, write down 3 things you learned today, 2 questions you have, and 1 way you're going to change your practice.
- Allow participants to share their answers.

Slide 19: Bridging the Gap Activity (8 min)

- "Let's do some action planning, to think about your school, and commit to some takeaways. Visualize where you are, where you'd like to be, and what it takes to get there."
- **01.** Where You Are: List some of your observations.
- **02.** Where You'd Like to Be: Second, list some of the qualities of your ideal school.
- **03.** What It Takes: Finally, list some ideas that might bridge the gap between where you are and where you'd like to be. What could happen to bring your school one step closer to your ideal?
- Allow participants to share their ideas.

Slide 20: Conclusion (4 min)

- Thank participants for their time, remind them of why this topic is important.
- Allow for questions.



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Note-Taking Guide

By the end of this simulation, you will be able to:

- Recognize when a student's behavior might be the result of trauma or distress.
- Lead conversations with a student about how they might be feeling.
- Probelem-solve ways that your class can become a more comfortable place for students who have expreienced trauma
- **Assess** the need for referral, motivating students to seek help when needed.

Trauma-Informed Teaching	What we see at school



1

Warning Signs

Warning signs of distress or trauma:

- Aggression
- Angry outbursts
- Disengagement
- Headaches and stomachaches

- Inattention
- Extreme fatigue
- Social withdrawal
- Easily distracted

Trauma-Informed Teaching	Boys are more likely to externalize their emotions (act out). Girls are more likely to internalize their emotions (withdraw).
	Younger students are more likely to show their feelings. Older students may not want to stand out or seem "weak." They may hide their feelings and cope by doing dangerous things like driving fast, using drugs, or getting into fights.



Lived with a parent/guardian who:

- Got divorced or separated
- Died
- Served time in jail/prison
- Was mentally ill, suicidal, or severely depressed

60% of children experience one ACE before age 18.

- Behaved violently
- Had a problem with drugs/alcohol

Experienced:

- Violence (or witnessed it)
- Food scarcity
- Displacement

33% experience **two or more** ACEs.

Fight
Flee
Freeze



Are Student Behaviors Personal?	
Conversation #1	
	 Be specific about what you've observed. Ask open-ended questions. Show empathy.



Conversation #2		
Conversation #3		



Teachers Can Make a Difference

1.	В	r	e	а	t	h.	
1.	В	r	е	а	t	n.	

Take three deep breaths.

2. Be still.

For the next minute, stay as still and quiet as you can. (Build to three minutes for older students.)

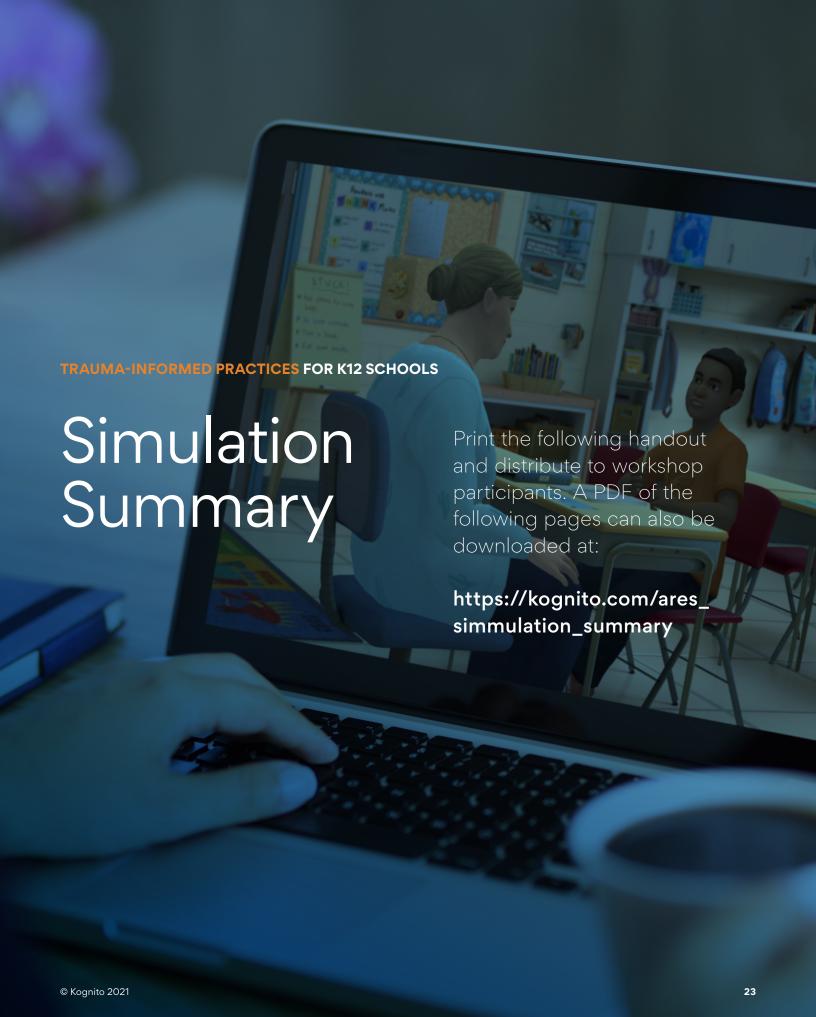
3. Take your emotional temperature.

While you are being still, notice your thoughts (what you are thinking), sensations (how your body feels), and your feelings (try not to judge them.



My Reflections, Takeaways, and Possible Next Steps





Adverse Childhood Experiences (ACES)

Lived with a parent/guardian who:

- Got divorced or separated
- Died
- Served time in jail/prison
- Was mentally ill, suicidal, or severely depressed
- Behaved violently
- Had a problem with drugs/alcohol

Experienced:

- Violence (or witnessed it)
- Food scarcity
- Displacement

60% of children experience **one** ACE before age 18. 33% experience **two or more** ACEs.

Trauma and distress can take a student out of learning mode and put them into reactive mode (fight, flee, or freeze).

Warning signs of distress or trauma:

- Agression
- Angry outbursts
- Disengagement
- Headaches and stomachaches

- Inattention
- Extreme fatigue
- Social withdrawal
- Easily distracted

Younger students are more likely to show their feelings. **Older students** may hide their feelings and cope by doing dangerous things like driving fast, using drugs, or getting into fights.

Conversation Strategies

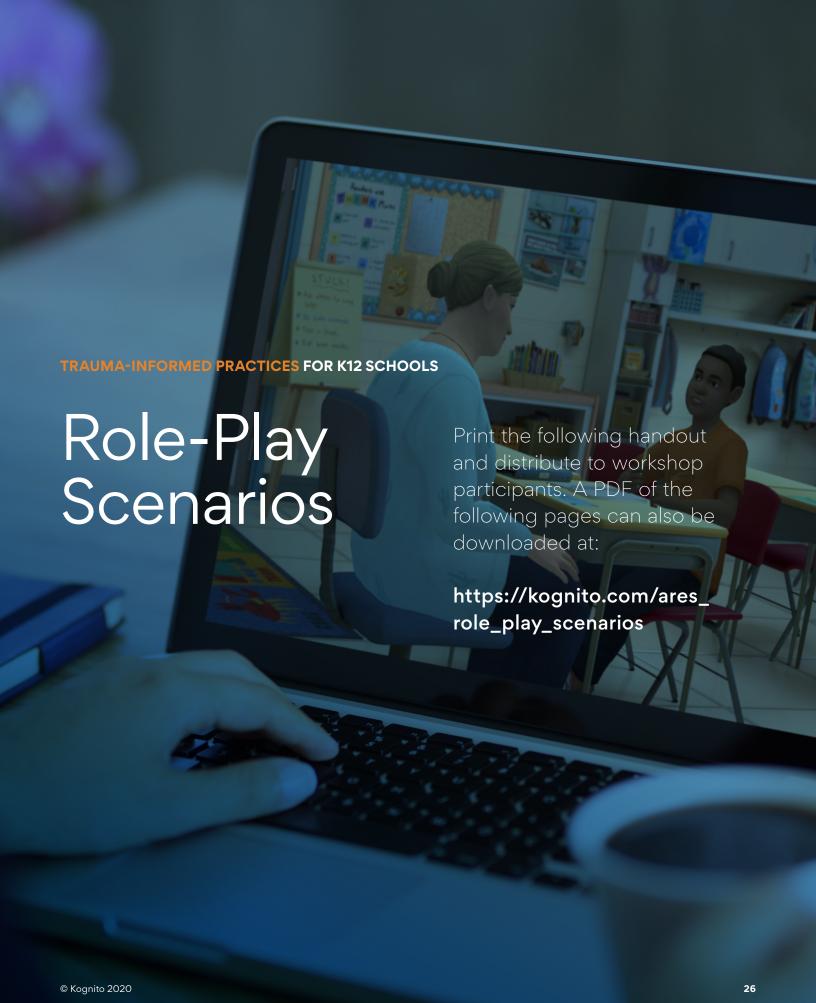
- Be specific about what you've observed.
- Ask open-ended questions.
- Show empathy.



Your School's Referral Process

Q.	To whom should you refer a student who may be in distress?
Q.	What is the referral policy in your school for students who may be a danger to themselves or others?
Q.	When and how would a student's parents/guardians be notified about your concerns? Whose role is it to notify them?





Role-Play Scenarios

Role-Play Scenario (A)



Concerned Teacher

(read this if you are playing the teacher role)

During the first months of school, your student Tamina did well, making mostly Bs and Cs, and seemed happy and outgoing. She was popular and often told jokes in class that made the students (and you) laugh. Then there was a change. She often comes to school now in clothing that is stained and dirty. She sometimes smells of body odor. She seems angry and mean. Now, instead of laughing with her friends, she's more likely to say things that hurt their feelings. Two days ago, she made a girl named Jeanne cry by making fun of her answer in class. You addressed Tamina's behavior at the time, letting her know that was not acceptable. Now you want to reach out to her for a longer chat to see what's going on.

Tamina

(read this if you are playing the student role)

You are the third of four kids at home, being raised by your mom and grandma. Even though your mom was busy with work, she always made time to do things just with you in the evenings. You would help her cook and do laundry, just to spend more time with her. She's really funny and always makes you laugh.

Then your mom lost her job and started drinking again. Sometimes she doesn't come home at night at all. When she is at home, she acts strange and angry, yelling at you for no reason. Your grandma and older sister take care of you now, but they seem angry too. Money is tight, the house is a mess, and sometimes you don't have enough dinner to get full. Plus, your sister bullies you and your little brothers, always telling you you're ugly and dumb. You love your mom and just want things to go back to the way they were.

Sometimes you get so mad you don't know what to do. Two days ago, you made fun of Jeanne in class when she was having trouble reading. You told her she was dumb, which you believe is true. The other kids laughed. Your teacher didn't like it, but so what? When the other kids laugh because of something you said, it makes you feel important again. Like a million bucks.



Role-Play Scenarios

Role-Play Scenario B



Concerned Teacher

(read this if you are playing the teacher role)

Earlier this year, Dallas's parents divorced. Now you have to monitor who picks him up on what days. Twice, the father accused you of allowing Dallas to be sent home with the mother on the wrong day, which leads you to believe the custody agreement may be complicated and antagonistic. Mondays through Wednesdays he comes to school looking tired. He rests his head on the desk and falls asleep. Sometimes he asks to stay inside and nap instead of go to recess. On Thursdays and Fridays, he seems happy—more like his old self. You want to check in with him and see how things are going.

Dallas

(read this if you are playing the student role)

Last summer, your parents split up, and your dad went to live in an apartment on the other side of town. Your mom and dad fought a lot before he moved out. Now they fight even more—on the phone, in person, and through you. They tell you bad things about each other that you don't want to hear. Your dad says your mom is crazy. He wants to make it where you don't see her as much. Your mom says your dad is a cheater and a bad man.

Lately it's been a lot more fun to stay at your dad's house, Wednesday through Friday nights. Dad plays with you and your sister, he makes good food, and he gets you to school on time. Even though your mom says he's bad, he doesn't seem bad, which is confusing. The days when you're with your mom, it's more difficult. Sometimes she's got a ton of energy and keeps you and your sister up late having "parties" or going to see movies. Then you're late for school the next day and really tired. Other times she just sits on the couch in a daze, watching TV and playing on her phone, ignoring you and your sister like she doesn't even want you there. On those nights, she yells if you get too loud and says you're just like your dad. She doesn't make dinner, and you have to find your own food. Sometimes you're hungry the next day at school.

It's hard to focus on anything else except what's going on with your parents. Things were so much better when they were together. Now you never know what's going to happen from one day to the next.



Stay Connected

Congratulations! You have completed the Kognito Trauma-Informed Practices for Educators Program. You and your school are creating a more positive climate for your community, and the entire Kognito staff is here to celebrate all of your successes! Please stay connected with us, we would love to hear from you.

Customer Support

Phone: 866-449-8834

Email: Support@Kognito.com