

Using a Trauma-Informed Lens to Address Children's Behavior

Melissa Lin: I'm so pleased. Today's webinar, we have Lisa Knight presenting and Dr. Amittia Parker joining her to moderate the Q&A. At this time, I'll turn it over to Lisa to introduce herself.

Lisa Knight: Thank you, Melissa, and what a lovely day indeed it is welcomed into the room. Good morning, good afternoon to everybody here. I'm just excited to share space with you. I'm Lisa Knight. I am a research instructor and a very proud team member of the National Center on Health and Behavioral Health and Safety. I'm a mom, an advocate, a doctoral candidate, and I have lived experience with challenging behavior, preschool expulsions, and the Pyramid Model.

I also want to give a huge thank you and shout out to my colleague and friend, Dr. Amittia Parker, who is going to be co-managing the Q&A chat today because really, we want to hear from you. Enough about me and my appreciation for her. I want to know who's in the room. Next. All right. Kate is going to put up a poll. And if the poll is blocking your screen, you can literally slide the poll to the right. We want to know what role you have in your program, your state, your region, your territory. But more importantly, we also want to get into what are some of the behaviors that are coming up for you.

I love to see the diversity coming in the room parent and family members, federal staff, coaches, state, territorial tribal agencies, program managers. I love it. I love the diversity. We got a lot of folks in here. We're almost at 2,000 folks. All right, very good. I love that. It's like, yes, Kate, we can also start thinking about two behaviors that we're seeing in the programs. Well, this is a lot. Love it. All right.

Amittia Parker: Just want to highlight for the participants that, that second question there, you can share your responses to the behaviors that you're seeing, and you would like help with. We know that you came into this space with something in mind, and we would love to hear what that is there in that particular poll question number two. We see some people have already started sharing their responses.

Lisa: Thank you for that Amittia. Had to scroll down to see it. When I think of challenging behavior, I'm thinking about food being thrown across the room. I'm thinking about it's time to transition off of the playground. Now we decide to go opposite way. I'm thinking about kids moonwalking on the table because they're excited to do. I'm also thinking about the kids in the corner that withdraw and isolate because they may not have the skills to socialize, or something makes them feel safe by themselves.

I can think of a number of different things when I think about different behaviors. This is really good insight for us as a national center because it's given us an opportunity just to understand the landscape of what's happening, and we can better support you all. We got a lot of answers coming in for the challenging behavior, and we won't be displaying those responses. That's going to be for us. Very good.

I think as these come in, Kate, are we able to move to the next slide as these results still come in? All right, perfect. Let me minimize that. All right. Today, we're going to be learning about the ABCs of behavior. While we're doing we're all going to leave understanding how to respond to behavior through a trauma-informed lens, but we're going to be looking at our own biases and figuring out what's one thing that we can implement the next day. Because the truth is, the answer is already in the room. We have it. It's just about exploring our tool set to get it. Next.

My favorite part of the day. I love a good feeling to check in. Here we are. Before being a part of this amazing center, I was a practitioner coach, and I will always make sure that we knew how the children were feeling, we knew how the families were feeling. I would also just center and ask my directors and teachers, how are you feeling today? You know what's happening with you. I want to talk about this quote here on the screen from Doctor Walter Gilliam.

For folks that do or do not know him, he's one of my favorite researchers. But more importantly, in 2005, he led a groundbreaking case study on preschool expulsion, and his research uncovered the impact of systemic racism, implicit and explicit racism, the impact of teacher bias. That Black children, particularly Black boys are suspended and expelled at greater rates than any other race and ethnicity when we look at the preschool landscape and K to 12.

Earlier this year in February, Dr. Gilliam was at an Early Childhood Leadership Institute, and he shared this quote. It says, "The extent to which a child's cup is full depends on the extent to which the childcare providers cup is overflowing." When I saw this on LinkedIn, I thought ... First of all, I got chills because of my own lived experience, advocating for my son. I've just thought about, wow, we put much emphasis on the children and families, but we're the ones having to show up every single day, whether we have capacity or not. I'm going to actually pass this over to Amittia because we're going to actually do some grounding and sit in this space.

Amittia: I love that invitation to pause, just to think about us and how are we doing. You can go to the next slide, please. We, in parallel process, want to give each of you an opportunity to take this moment to think about, how are you? How full is your cup? To really pause and think about that thing. You can move the poll over to the side for just a moment, but what I would love for you to do is to look at these images and think about how in any way any of these reflect how you're feeling in this moment about your experience.

Then, please share by responding A, B, or C if any of these images really resonate with you in your experience. I know that there may be some other image that you might feel like is a representation of your experience but choose one that you feel like fits the best.

Lisa: Yeah. Because some days, it could be all three.

Amittia: In the morning, I might start full and ready to share everything with everybody. Then might end up being like that cup that's thrown on the floor.

Lisa: Well, because life keeps happening. Life is going to always life.

Amittia: It does. It does. Many responses have already come in. We totally appreciate that. Let's go ahead and end the poll and share the results for just a moment each of you could see who else is experiencing their day or their life in this moment similar to you and who might be experiencing it differently. I see a lot of folks experiencing each one of these. That's really helpful for us as a grounding place. Don't forget to check in with yourself. Think about what you might do on this day to continue to feel your cup, even after the time that we have together. I'll give it back to you Lisa.

Lisa: Thank you so much, Amittia, just for centering us. I just appreciate y'all for just being vulnerable because that's a lot of work in itself for saying, hey, I don't really feel like it today. Thank you for that. Let's go to the next slide. We want to make sure we're all on the same page. We're here talking about different behaviors that may challenge us, but we're also here to talk about trauma. We're going to journey together. Next.

Trauma can look very different for young children, and it can look like bullying, losing a pet, maybe sudden illness, exposure to violence, whether it's murder, maybe it's domestic violence, any type of violence. Sudden death of a loved one or even a friend, a natural disaster. Maybe you're displaced during a hurricane or a tornado, neglect or even abuse. But the commonality is that they're all major changes and disruptions that can result in trauma for young children. Next.

Today, in this presentation, we're going to focus on some of the individual family and community factors that contribute to children developing mental health problems. When we think about the word "trauma," I encourage you to think about it more broadly in terms of systemically. I want us to really lean into equity, looking at racism, our history, our political history, systems and structures, and then think about the influence and/or could it just be a factor all related to trauma. Next.

If we can, we're up 2,000 folks in the room. Excited. Show me a thumbs up if you've ever heard of the ACEs, if we have an opportunity to do a thumbs up. If not, we know y'all are here in present, and we love that. I see the thumbs up. I love it. I love that y'all because we are the effective workforce. We're going to talk about that, too, when we get into the Pyramid Model. This fills my cup when I see the level of awareness happening right now on this lovely day.

Researchers at Kaiser, they studied the relationship between 10 adverse childhood experiences, and they found that these experiences elevated risk for health outcomes later in life. Research showed us that trauma is a possible outcome of experiencing adversity. That's usually when it's emotional or physical safety that's being threatened. But we also discover that children, when they experience childhood adversity and trauma, it can lead to lifelong physical and mental health problems.

This is really where the work begins for us understanding and acknowledging that these adverse experiences, they don't just happen at home, it's community environments that play a role. When we're looking at housing and we're looking at lack of opportunity, we're looking at

discrimination, poverty, these are real-life things that impact us. We just want to be mindful when we're working with the diverse families that we do. Next. All right.

I love the imagery on here and the messaging because what it tells us is that adversity doesn't just happen to children, it happens inside of them. I want us to dig a little deeper and understand this goes to us, too, as adults. This goes right back to Amittia talking about how full the cup is. Let's go right back to that slide if we can. How full the cup is, if your cup is A, B, or C. Because the reality is, we're doing the best we can to show up in the best way we can possible for our families.

I just want us to hold on to this as we journey together. Then also, at this moment, Kate will be opening up the Q&A section. Any questions that come to mind, we encourage you all to put it right in Q&A so we can start gathering up questions for you all. Next.

Now, we're here. Trauma-informed care, the buzz word. Very popular word. We all want to know about, what is trauma-informed care? When I think of trauma-informed care, I think of this space of shifting, meaning that we need to be shifting our thinking of what's wrong with this child. What happened to this child? Or what happened in their life? Or now is showing up in the behavior that we're seeing in the moment.

Then I want to take it a little bit further and ask, well, how can I help? What can I do? How can I bring safety to this child or to help bring safety to the family? It's important for us to reflect on how this child or adult experiences can contribute to the behavior that we're seeing in the moment because what we do know is that something is causing this behavior to show up. We're like detectives to figure out what that is. Next. All right.

We're talking about trauma. We're talking about behavior. Now, we're going to go into the Pyramid Model to understand behavior a little bit better. Y'all are so engaged. I didn't even ask y'all yet. Raise your hand if you heard of the Pyramid Model. I see the hands. I love it. I love it. I love it.

Amittia : Hey, dude they know it. I love it.

Lisa : Oh my gosh, It's such a great group. I love it. For the folks that may or may not know about the Pyramid Model, the work began in 2001, with the Center on the Social and Emotional Foundations for Early Learning, which we call CSEFEL. But the work continues with other national programs, including the National Center on Pyramid Model Innovation. Right now, we're going to unpack the Pyramid Model together. Thank you much for doing that, Livia.

Let's talk about it. The Pyramid Model is an evidence-based framework that really promotes a social and emotional development of young children. What it teaches us? It teaches us on how to be more responsive in various ways when we're interacting with young children and families. Based off of my experience-- my own lived experiences and research-- when the Pyramid Model is implemented with an equity lens and a trauma-informed lens combined, that is when we see the reduction in preschool suspensions and expulsions.

I had to put that out there, that we know that when we implement these strategies, it helps reduce expulsion and suspension. I want to go layer by layer, just we can all understand and ground ourselves. When we look at the yellow piece, that's everybody on the call. That is the effective workforce, the foundation of this work. That's us committing to the webinars, going to trainings.

We have our leadership teams. We're going to conferences because we want to be more responsive in our interactions. We want to be more empathic. We want to be a bridge to resources, and we want to be able to connect with families in a way where the moment they enter our program, they feel safe. That is the effective workforce.

Then when we look at the blue portion of the pyramid model, we call that tier one. We look at it as universal promotion for all children. That means right at enrollment, we're putting the work in. We're developing, nurturing a responsive relationships right at intake. But then we also look at making sure we have high-quality, supportive environments. That looks like predictability. That means that we're teaching our schedules and our routines consistently.

Everybody knows exactly what's expected of them. The children feel safe, loved, and seen. We're doing a good job teaching expectations and rules consistently. And to top it off, not only are we honoring, but we're implementing the home language in everything that we do in our newsletters, in our parent handbooks. Our library is diverse. We are really honoring the family system.

With all these systems in place, we look at the green portion of the pyramid, which we call tier two. Some children need a little bit more. They need a little bit more targeted social-emotional supports. We're teaching friendship skills. We're looking at various ways to teach about emotions and how to receive them and express them. We're also teaching about problem solving. But even with the predictability, even with the relationships, even with us teaching about the social and emotional skills, it's very few children that need intensive intervention.

Some of these children have chronic behavioral needs. They're at the top of the pyramid. They're also sometimes supported under the IDEA, which is the Individual with Disabilities Education Act. I wanted just us to unpack the Pyramid Model together, make sure we're all on the same page before we go any further in our work. Next. All right.

We're going to make the connection together. As we do , I want us to take notice to this crosswalk. While we're taking notice of this crosswalk, I want us to think about the importance of relationships and honoring families. Because the more trauma informed we are, the better equipped we are to understand behavior that challenges us, number one. But number two, it's the relationships that give us access to understanding why the behavior could be happening. Everything begins with that relationship.

I want us to ruminate and really pause, and ask ourselves, how are we seeing our families? Do they feel like equal partners? If what makes them feel welcomed, seen, heard, valued, and

honored? I want us to hold on to these reflective questions as we journey together, but just keep them in the forefront as we navigate. Next.

All right, challenging behaviors that we've defined, trauma. We've unpacked the Pyramid Model together. When we think about challenging behavior, it's a repeated behavior that happens, and it really interferes with our interactions with our friends and also adults that are in our care. Then, also, challenging behavior can be very difficult to redirect, and some examples were probably shared in the poll. I'm sure.

It could be physical aggression, hitting, or biting, or it could be destroying the center area because you're frustrated, or even hitting yourself in the head or head banging. It could be the kid that just wants to sit in the corner. Behavior looks very different, and we want to just make sure that we understand it. It's a spectrum of different behaviors to consider. Next.

In that thinking, that behavior looks very different. Children communicate in very different ways. That can be through words. It can be through American Sign Language. It can be through pointing or gesturing, biting, even maybe hitting their teacher's thigh, because this is their way to say I need help. It just looks different. Next.

And so I love this because behavior has many messages. I want you to pay attention to me because when I go home, I don't get attention. And I can't get hugs because my foster home doesn't allow hugging, or I want that particular toy food because this is the only place that I'll get it here. It could mean, I want to play with you, but I don't have the speech and language to say so. I'm just going to force my way into it.

It can say, I don't want to stop what I'm doing because now, you're taking the control away, and I don't have any power. Then, I don't want to clean up. You know why? Because I'm happy right now. And I don't feel like it. Behavior has so many messages that I want us just to think about as we wonder, where is this coming from? Next.

When we think about behavior, I want us to think about function. What is the child trying to communicate? What are they trying to get? What kind of activity are they trying to go to? Who are they trying to get attention from. Is it their friend, or is it the adult? Because they may not get that attention at home, or we don't know what that is like in every situation. Or do they need a hug, a deep-pressure hug or some sensory input?

Do they not want to play with their friends because they don't feel included? They may not want to go next to the teacher or adult because they know that teacher may not like them. Or are they trying to avoid a task or sensory because they just don't want to be involved? Everything that a child does, it is telling us something, and it's a reason behind that behavior. Next. All right.

We're getting ready to get into the ABCs of behavior. When we think about the antecedent, I want you always to think about what happened right before the behavior happened. Right before. Then the behavior is what we can see here. We'll talk about it more. Then the

consequence, what happened right after that behavior is what we're going to unpack together. Next.

Some examples that can probably happen right before behavior. Maybe you've asked a child to do something, and they don't want to do it. Maybe you took away a favorite toy or a truck that they really wanted. They're having difficulty completing a task. Maybe they don't know how or need help. Maybe they have an object that's not available because we ran out of duplicates. Now you've asked them to clean up, housekeeping, but they want to be Superman today. It's a couple of things that can contribute to possible antecedents when we're looking at behavior and its meaning. Next.

But then we look at the behavior, the actual behavior. It's many folks on the call that know about the Pyramid Model, which makes me feel good. A lot of you know about the data collection tool that we used, our BIR. That is our Behavior Information Reporting System. With that tool, we look at, can the behavior be seen and heard? Are we seeing the same behavior at arrival? Or is it during nap time? Or is it during circle time?

Is it happening at the same time every day? Is it happening at the same time every day? Is it happening every Monday or every Wednesday? Do we see a pattern in when the behavior upticks when grandma comes, or upticks when dad picks up, or mom picks up, or the cousin picks up? We really want to look at, can we see or hear the behavior? Can it be timed so we can better understand what's happening? And then, also, is it happening? What's the frequency of it? Next. All right.

Now, the consequence. What happened after the behavior? Did they get the attention that they wanted? Did the child get something that they wanted or needed? Did they get the help that they deserved or desired? Or were they able to still play during cleanup time because the teacher did an extended planned ignoring? Maybe the teacher was having a tough day. Who knows?

But did they get out of cleaning up for whatever the circumstance? Did they avoid circle? Because they don't want to do circle time anyway. They don't want to be next to the kid. That doesn't make them feel appreciated or safe or included. These are just examples of what a possible consequence could look like. Next. All right.

We've talked about the ABCs. We've unpacked the antecedent, the behavior, the consequence. Now, we're going to do a little interaction to see where we're at called "Name That Function." I want us to think about what happened right before the behavior. Then I want us to think about what is a challenging behavior that we see. Then what happened right after the behavior? Just think about, what did the child get or get out of or avoid by engaging in the behavior? Next.

[Video begins]:

[Children talking and playing]

Child: Stop doing that!

Child: He pulled on my shoulder.

[Video ends]

Amittia: Y'all, that is such a good clip. Much happening in such a short bit of time. I just want to create a bit of pause for us right here. What did you see in that short clip? We want you to jot down, if you would, the ABCs. Just real quick, on your own paper or on your own document, or if you fancy, on your computer, on your electronic notes. What did you see? Liv, you can share the responses for us here. Thank you.

I'm wondering if what you all have written down or documented briefly aligns with what you see. Before you are the things that you noticed as specific, and observable is the language that you see written here. You're playing alone in the block play. They go over to a group of children. A behavior is sticking out the tongue, making a raspberry sound, hits boy, scratches shoulder, the potential consequence. A boy yells at him and brings him a lizard. Boy yells to teacher.

Do you write really short, specific, observable behaviors in your writings or not? Not all of us were trained. I think that this pause is really important and helpful, especially as we begin to talk more about bias and how bias can show up. We also want to name and notice that some of us don't really know how to do this. We don't know how to observe children in their behavior without putting our own meanings on it, without shading it with our own stuff.

There's lots of good questions in the Q&A. I just want to acknowledge that we see them there, and we're going to have some time to get into them pretty soon. Lisa, I'll turn it back to you, and I'll see if there's something that we need to highlight right now.

Lisa: Thank you, Amittia. Thank you just uplifting that, that some folks don't know what a BIR is, or they've never been in a program where they haven't attract behavior. It may look different. Your answers may look different, I just appreciate you uplifting that Amittia. We can go to the next slide, Livia.

I think what's important when we pause is really looking at, how do we respond? When I think of when and how we respond. My first question is, and I'm thinking about Dr. Gilliam's study around preschool expulsion and biases, are we responding the same way with each and every child? What comes up for me when I do respond. Because sometimes, children know when they're not liked or loved. They get the energy. They get the feeling.

I want us to really pause and think about what's coming up for us. Are we responding differently to each child? Did we expect the child to be challenging? Are we waiting for it to happen? Before we even go to developing the behavior planning process, I really want us to go back to the foundation of, how is trauma-informed care really threaded in the work? How are we seeing our families when we do the work? Because we don't want to go into the child-planning process, and we haven't seen the families yet and made that connection. Next. All right.

This is a really good video, where Livia, we might have to cut it in like 4 minutes. We're going to watch this video on Hot Buttons because this applies to everybody on the call. Let's take a look together.

[Video begins]:

Narrator: Early childhood professionals need to be able to model how to express feelings in appropriate ways. How can you be an effective model when you're feeling upset or under stress? What are some of the ways you can monitor your own feelings and reactions? How can you respond calmly to children when you may not feel calm inside?

Ann Gruenberg: When children are having difficulty, it's easy for adults to just take that personally. It's important for teachers not to assume that when a child does something really impulsive that they're trying to be mean, or that they're doing it to push buttons. That's not really what's going on.

Kara Wanzer: One of the things we work with teachers a lot on is how to recognize their own Hot Buttons. What are those behaviors that drive you crazy?

Ruth Ettenberg Freeman: When this child does this behavior, this is what happens to me. Describe the symptoms, describe what it feels like to get escalated, and get aware of that.

Ashley Anderson: When I'm frustrated, I call it my ball of rage in my stomach. They're pushing your buttons, and there's nothing you can do that's going to change that at that particular moment.

Ruth Ettenberg Freeman: When you're in an environment where you're in close contact with human beings, especially uninhibited, very expressive young human beings, that it's normal to feel sad. It's normal to feel despair. It's normal to feel scared, furious, and angry.

Ashley Anderson: If I'm feeling that in the classroom and that's how internally I feel, it's going to be projected on them. That's not fair to them. It's not fair to me. It's not fair to anybody in the room.

Kara Wanzer: That's been a real taboo subject when we think about that with teachers. We shouldn't have these feelings about kids, but the truth is we're people, too. It's really important that we start to recognize our personal feelings when we're in a relationship with a child.

Jamie Vallarelli: Every teacher has a child that does push their buttons. I think those children are the children that need you the most. You have to keep that in mind at all times.

Amy Figueroa: I think teachers can get stressed. Out at work sometimes in the classroom, it can be very busy and hectic.

If your kid is having a meltdown, your brain goes on fire. You feel like it's an emergency. The adult has to learn how to deescalate, not just get affected by the child's feelings and react that way.

Teacher: Can you tell me what was happening?

Child: [Crying]

Teacher: Did you want to turn with the flashlight? Yeah. Who was using the flashlight?

Child: Me.

Teacher: You were using it? OK. Let's go talk to Xander and say, "Xander, I was using the flashlight."

Ann Gruenberg: As starting point for a lot of people is recognizing that they do have that opportunity rather than just feeling out of control of themselves.

Pat Kitchen: I just got to sit back and watch every now and then. You take a breath. For yourself, too, and say, we're not going to explode or anything. Let's see what's going on here.

Kara Wanzer: We really talk to teachers about how their personal reaction should not be their professional action.

Child 1: I said no!

Child 1: Stop it. Stop it!

Child 2: I can roll that.

Child 3: That's enough!

Child 2: I can roll that.

Child 3: Enough!

Child 2: Hey!

Teacher: Oh, wait.

Come on, let's freeze. Freeze. Remember this morning, we talked about talking to Hunter. You don't need to yell at him.

Kara Wanzer: That we go from knowing enough about ourselves and what we're experiencing emotionally.

Jamie Vallarelli: Because a lot of the time, it is something that is really bothering them, and it is upsetting them. If you ask and probe a little bit, they are able to express a little bit of what's wrong. And it's easy to talk with them and try to figure out a solution.

[Children talking]

Teacher: Your marble? That's OK. I'll get it back for you.

Pat Kitchen: I go for humor. I just go with that. And if they see you laughing, they don't have any choice. And they'll start to laugh and giggle. Get everybody in a good mood. You can't tell jokes. Not with this crowd. You got to find something silly to do. "I forgot."

Kara Wanzer: What we like people to do is put a reflective conversation in place with the colleagues that they work with, that this is difficult for me. There are times where I'm tagging out now. Now, I need you to step in. These are plans that we need to have in place.

Amy Figueroa: We definitely support each other in the classroom. And we also pick up a lot of each other's kids as teachers. And sometimes, if one teacher needs to just go out in the hallway, we're really able to do that and communicate to each other.

Ashley Anderson: We do a lot of self-speak to the children about it, like, "Wow, I'm really frustrated right now." And my teacher assistant will be like, "Oh, Ms. Ashley, is there anything I can do to help you?" And we use it as a learning opportunity to mirror to them, first of all, how to support a friend when they're in that place, but then, also, so that they become aware of how we're feeling.

Kara Wanzer: When we think about what the next steps have to be, we really first have to acknowledge our own feelings. That's what we're asking kids to do, is to acknowledge how they're feeling and then express it in an appropriate way. Teachers really have to practice those skills, too.

Ashley Anderson: Being able to use those moments as teachable moments with the children so that they can understand. First of all, it's OK to feel frustrated. Everybody feels frustrated and upset, or angry at times, but how you handle it and what you do with it, that's what matters.

[Video ends]

Amittia: Yeah. Livia, could we stop the video here? I think this is a good point, highlighting something that's so important. The thing is, I'm sitting with my spirit, and I'm just like, man, many adults don't know how to do this. How do we teach kids to do something that we didn't learn how to do?

Lisa Knight: I've even seen some questions come up in the Q&A, and I just think about doing this work. Some of us are raised in households where we didn't have emotion check-ins. We didn't have those spaces where you were taught how to problem-solve and how to be friends with someone. A lot of folks don't have those tools, and they're learning as an adult. The video just spoke to me, and I'm sure it spoke to a lot of my fellow folks on the call. But we don't want this just to be a handout. We want this to be an opportunity for reflection.

This activity really puts you in a very safe yet vulnerable space with yourself because you're going to go through the questions. You're going to reflect on your own buttons, your emotions. But furthermore, you're going to look at how do my emotions impact my engagement with the child and family. We're encouraging our regions, our states, our programs and teams, take this activity and carry it forward.

Use it as a reflection tool for practitioner coaches. Think about ways to institute this in your coaching session, on your leadership teams. Think about ways to roll this out to the entire staff, even if you're partner with folks with early steps or whomever, whatever. Folks, you're partnering with your service delivery. How can you bridge it so everybody is using the same reflective tool?

Amittia: Yes. I just want to highlight. There was a question in the chat or in the Q&A that was about, how do you teach people to notice and name the observable behaviors that are challenging? I think that if you use this tool as a resource, you can first get that person to get regulated and calm enough to where they even have the capacity to accurately reflect on what they actually observed and experienced. To have a step-by-step like this is one of the ways that I learned how to notice and name observable behaviors. That, also, this is the exact kind of tool that you can use to help enhance people's capacity to move their judgment out of the way and to really reflect on what's happening in themselves, and then to do better with reflecting on what's happening to the children that are around them.

Lisa: Yes, thank you for that Amittia, I second that. I remember going to some very tough coaching conversations where I had a whole coaching agenda and I had to pivot. We had to go right back to Hot Buttons because you can't do the work if you're not able to see what's coming inside of you, what's coming out. We know that it can be very difficult when you're bubbling inside. This is such a valuable tool. Next. All right.

Some of the main messages, we've hit on a lot of really rich topics today, but I want us to really listen to this and sit in this and pause. But let's ask ourselves, how do we see the world when we think of trauma? Because the truth is, how we relate to trauma is how we respond to it. We know that behavior is a learned behavior. It has meaning, and it's communicating some sort of messaging.

I think with all of these things, the interconnection is, how do we honor the family system, those family values? How do we try to really work on building trust from the start and understand, considering the family dynamic. Trauma is going to impact that behavior. I really want us just to hold on to that, even after today's webinar. How can we take some of these tools and carry it forward the next day, if not all, one thing? Next.

This is powerful, as we wind down our time together, but I want to just share this space with you all and read this quote that's so impactful. Just gives me chills. And it says, "I've come to the frightening conclusion that I am the decisive element in the classroom. It's my personal approach that creates the climate. It's my daily mood that makes the weather. As a teacher, I possess tremendous power to make a child's life miserable or joyous.

I can be a tool of torture or an instrument of inspiration. I can humiliate or heal in all situations. It is my response that decides whether a crisis will be escalated or de-escalated, and a child is humanized or dehumanized. I tell you, being a part of the education system and also being a parent advocate, also having lived experiences with preschool expulsion, this is impactful for me in the work that we continue to do. I'm just appreciative to share this space with you all, and then we're going to navigate now into our resource corner. All right.

Amittia: Want to highlight, Lisa. We have some great questions. Just hold tight. Let's share these resources, and we're going to get to your questions.

Lisa: Yes, we're doing good on time. Thank you, Dr. Parker, my chat surrogate. I love that for us. Here's a really great resource from NCPMI, the National Center for Pyramid Model Innovations on not just self-care for teachers but self-care for staff, and really just gives us some valuable practical tools on how to respond when our own buttons are pushed. Next.

There's another great resource. All of this is in the Handout section from NCPMI. Pause, ask, and respond. Again, Amittia already talked about us being able to do the work, being able to reflect and self-regulate. And so some of us are learning these tools now as adults. This is another great resource you'll find in the handouts. Next.

Responding to challenging behaviors tips and strategies. Looking for something to share with your leadership teams or with your staff. Maybe to do some reflections or chatting to. Another great opportunity to deep-dive and reflect on. All right. Here we go what we've all been waiting for.

Amittia: The questions. Oh, my goodness. Y'all, want to just say thank you for sharing your questions throughout our time together, and I wish we had even more time we can make sure that we get through all these questions. But I want to be honest, there are more questions than we have time, and we're going to do our best. I think to start this off, there was a really great question that was here. I had these questions pulled in some little categories if you will. Let's start with the one that was about what do you do when you're I don't want to misquote them, but it was essentially that you're struggling with the child and their behavior, and the parents won't work with you.

Lisa: Can I answer that, please?

Amittia: The behavior continues to be a problem, and the parents are not helping. I think that's a good one to start with.

Lisa: That's an excellent question. Whoever uplifted that question, thank you for letting me enter this space with you. So out of transparency and vulnerability, I am that parent. My kid was the one with challenging behavior. He was the one that was disruptive. It wasn't that I wasn't willing to work. It just took time for me to get there. It was a lot to process to know that your kid is not like everybody else. I'm literally working for Head Start at the time where all this challenging behavior is happening.

If the feeling of fear, embarrassment, you feel alone, you feel unsafe sometimes, walking into preschool because you're getting many calls, and you really don't feel like a partner. It just feels like, oh, here she go. He's really the kid that nobody wants. I just encourage you to really try to figure out how can I build trust with this family they don't feel pressured. We know in the moment it can be so tough because you got a whole classroom to manage. You have all of these different requirements throughout the day. And now you have this different behavior.

But I encourage you to find different ways to build that relationship with the family because once that relationship was built with between me and the school and I tell you, it was a game-changer. I did feel a part of the team. It wasn't much where, here goes Lisa, it was more so of, oh, I know she's going to follow up. We start sharing strategies, updates with neurology, occupational therapy. It was a whole process, but I finally felt supported.

Maybe we can look at how we're including the family. What does the conversation look like when we're reporting out about the behavior? Is it more supportive conversation? Is it more reporting out all today? They were flying again, or today they just weren't listening. I want us to be mindful of the messaging because you may have good intent. But how is it delivered? I think that delivery is crucial to the foundation of that relationship.

Amittia: Absolutely. I love that how is it landing with them. I love that. Now, there's another question that is also, I think, about working with families that I think I want to lift up for this audience, and it is, how can one navigate the complex interplay between trauma and entrenched maladaptive coping mechanisms, particularly when conventional therapeutic approaches have proven ineffective? Now, I find myself wanting to make this simple and plain and simply say, what do you do when everything you've done is not enough, and it's not working, and folks are not finding the services and supports that we are offering helpful? What do you think about that?

Lisa: I think it's a place to pause. What do you do when you feel like you've done it all? You feel like you've done it all. Do you even have the bandwidth? And I think it goes back, depending on if you're a Pyramid Model program going back to your leadership team, going back in our think tank if you're a Head Start Program, getting with comprehensive services to see who on our Disability Advisory board that can support us, who on our Health Services Advisory Committee

that can support us. How do we tap into our community of practice to support this family? Because our tank is almost empty.

We have to acknowledge and honor that, too, like in the video. We're human, too. I think it goes back into our community of practice, these advisory boards and Head Start, your leadership teams if you're a Pyramid Model Program. Even if you're not Head Start or you're not Pyramid Model, your staff meetings. Look into the community and see, what are some other things that we can do to be a bridge to resources? For not just the child and family, but to my staff. And I even want to tap into the staff wellness piece.

Amittia: It's exhausting when everything you've done is not working, and you're still struggling. There were a couple questions about the number of needs that are present in the burden on the staff. Then to think about, well, how do we think about our own cup? People are burnt out. They are struggling.

Lisa: That makes me wonder, too. We're doing the best we can to show up, but if I don't have capacity, how can I show up for anybody else? I think that's where we really got to reset on staff wellness. How do we pour into our teams? Not only that, who's going to the directors and the owner and operators? We have to even look at that component to where when we have these moments. What does staff wellness look like in our programs? I think that's really something to center into when we feel like our cup is completely empty.

Amittia: Absolutely. We have some resources on the ELCKC related to staff, wellness, and some ways that you can take an intentional, and also beyond the surface, beyond bubble baths.

Lisa: [Chuckles] Long walks in the park.

Amittia: How you can create some action steps with your staff that are practical and actionable, and actually go across a range of different areas of wellness, knowing that people have different preferences and experiences. All right, these are wonderful responses. The questions keep coming in, y'all. We definitely appreciate that. I want to go into talking a little bit more about the children, just if we could.

One of the participants asked about, are we going to talk very much about emotion regulation and some of those pieces around the nervous system and those kinds of things? I think that the question is well-positioned, especially considering talking about trauma. Another person's wondering about, what do we do with children who've experienced trauma? How do you rewire their brains, bodies, experiences so that they can get out of that survival state?

Lisa: That's a really good question and thank you for that question. I've worked with teachers that are literally teaching multiple children that live in foster care, or they've been displaced five times by the age of two. What has been most successful in that experience is really building the partnership with the family currently caregiving for the child. In those moments, I think we got to really go back to the relationship piece to see how do we really connect with the families that the child is now in care with.

Let's figure out what are some things that calm them. What are some things that may trigger them? What are some things that make them feel safe? Is it OK to hug them? When we're talking about rewiring and how malleable the brain is. The trauma that happens, that can happen in a short two years, is so huge. It can turn to bedwetting. It can turn to moonwalking on the table. It can turn to, I'm traumatized or triggered when you say my name.

I think going back to the relational piece and really having that authentic, transparent conversation with the family to see what's going to make this child feel most safe and really taking the families' funds of knowledge, their assets, their input, and putting that in the classroom to make it a safe place for the child. This is a lot of work to do when we're talking about trauma that's experienced as such a short age.

Amittia: Absolutely. And I think one of the questions that came up really aligned with exactly what you just said and that-- one of the participants was asking about, what do you do when you find that you just still don't know what it is that is causing this child to react in certain ways? And you feel like you just can't get right in terms of knowing what things are calming or maybe something works today, but it doesn't work tomorrow. It might work this week, but not next week.

I think with what you were saying, and also with that person's question or comment, really highlights for us that we have to remain curious. And we have to keep trying until we find out, and we figure it out, and we get it right. There's a lot of trial and error in this. And it is important that we keep our patience to the extent that we can and be curious and committed to learning more about that child who is shifting and changing rapidly every single day and week.

Lisa: Absolutely. I agree 100%, Amittia.

Amittia: And speaking of change, there's a really wonderful question that highlighted how-- well, they were like pointing out or wondering that there's a lot of children who are having trouble in the environment with their communication, and maybe it's initiating conversations or participating or whatever. And the person highlighted that they notice that these children were born right in the middle of COVID-19. I'm just wondering if you think that COVID-19 played a part in their social-emotional development, or even I would add communication skills, and how that might be showing up within them today.

Lisa: I mean, that's a good question, but I would also wonder what environment they were in. Because if it was a family child care home, if it was center based, some folks opened up because we also know for private care, this is the bread and the butter. Some kids went back to school sooner than others. I would be curious to see what that social environment looked like. Were they at home? Were they back in school? And then exposure. Because we all know that exposure is really going to enhance those social skills. But we have seen those trends.

Amittia: Absolutely. I think I know that we're getting short on time. I think that these questions bring up more questions. I think that from your responses, I really glean the importance of us

staying curious and staying open, and really staying committed to being in the journey with children, families, and staff, and doing this really important work.

Lisa: Absolutely.

Amittia: If we should go ahead to the next step or if we want to take one more question, because I know we really want to spend a little bit of time telling people about how they can learn more and engage more with this.

Lisa: Absolutely.

Amittia: Let's just do that. Let's just do that. Let them know about what's coming in the next times they can engage with us. Lisa: OK, perfect. I think Melissa's going to take it.

Melissa: Thank you so much, Lisa and Dr. Parker. I hope that you enjoyed today's webinar, everyone. We just have a few things we want to share with you before you leave. In a couple of weeks or less, May 21 to 23 is this year's Health and Mental Health Leaders Institute. It's a three-day online professional development opportunity for Head Start and Early Head Start staff. There's no cost to attend, and you can find the registration link here or in your handout. I see my see colleague. Kate has already dropped the link in the chat. The agenda is also available, so please look out for that soon. Next slide, please.

You're going to get a link to the evaluation when you leave the Zoom platform. You can start to respond to that here. And if you have more questions, go to my peers or write to us at health@ecetta.info. The evaluation link will be placed in the chat as well, and it will appear soon after you complete the evaluation. You'll be taken to the link to the certificate. Note that your feedback to the evaluation is anonymous, and your feedback helps us improve future training and technical assistance offerings.

Thank you so much to our presenter and moderator. Thank you to everyone for sharing this space and taking the time out of your day. We hope that you have a lovely day and know that you can subscribe to our monthly newsletter, or also follow us on social media. Please also check us out on my peers to continue the conversation with colleagues across the country. If you have more questions, like we said, you can write to us at health@ecetta.info. You can also find today's resources and more in the Health section of the ECLKC. Thank you all for joining us today.

Amittia: Thank you all.

Lisa: Thank you so much friends. We enjoyed you.

Melissa: Thank you, Lisa and Amittia. Thank you, everyone, today.