

If interested, this topic can be learned in greater detail through a full day workshop called “Trauma Informed Classrooms.” Please contact Sara at sara@growingrootstherapy.ca or 204-333-9804 for more information or to book a workshop.

Being Trauma Sensitive

Impact of Trauma on Learning

Children who have experienced trauma:

- Have a main goal of survival.
- Might not trust authority figures due to previous experiences.
- May be hypersensitive to threat.

Areas required for learning that are affected by trauma:

Attention: Attention is an important part of participating in school and remembering information taught. Many children who have experienced trauma can have difficulty with attention due to hyperarousal (increased responsiveness to stimuli).¹

Sleep: Many children who have experienced trauma can have difficulty with sleep. Two common experiences for children who have had trauma are: increased arousal resulting in difficulty falling and staying asleep, and shutting out stimuli and decreasing activity thus resulting in extended sleep.⁴

Memory: Children who have experienced trauma can have difficulty with memory for multiple reasons including: flashbacks of trauma, dysregulation, difficulty paying attention in a hyper aroused state, as well as changes in brain structure. Trauma in early childhood can cause decreased hippocampal volume, which is fundamental for memory. These changes in brain structure can decrease ability to consolidate memories.³

Language: Children who have experienced trauma might have difficulty with language due to decreased opportunities to develop language as well as disruption in brain pathways during early childhood. Trauma impacts the Broca’s area of the brain which is responsible for speech production and expressive language. Low language skills can influence ability to read, understand new information, and organization.¹

Executive functioning: Executive functioning is important for goal setting and thinking before acting. Children who have experienced trauma might have difficulty with this due to interference with brain development.

Cause and effect: Children might have difficulty understanding that their actions can affect what happens when they have not had experience with this previously in their life. Ensure that consequences are clearly connected with behaviour and occur right after behaviour.

Social development: Children who have experienced trauma often have difficulty with peer relationships as they can have difficulty with aspects of friendships including turn taking and thinking about other people's thoughts and feelings. Chronic exposure to threat in childhood can change the way the amygdala functions, specifically in response to facial cues. This can interfere with social relationships as children might not be able to understand and react to facial cues.³



The brain can be rewired until a person is in their late 20's and educators can play a part in this!

Resources

1. Victoria, Child Safety Commissioner, (2007). *Calmer classrooms A guide to working with traumatised children*. Retrieved from: <https://www.acesconnection.com/g/aces-in-education/fileSendAction/fcType/5/fcOid/452934889391655998/fodoid/452934889391655997/Calmer%20Classrooms%20-%20A%20guide%20to%20working%20with%20traumatised%20children.pdf>
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3. McLaughlin, K. A., Sheridan, M. A., & Lambert, H. K. (2014). Childhood adversity and neural development: deprivation and threat as distinct dimensions of early experience. *Neuroscience and Biobehavioural Review*, 47: 578-591. doi:10.1016/j.neubiorev.2014.10.012
4. Montgomery, E. & Foldspang, A. (2001). Traumatic experience and sleep disturbance in refugee children from the Middle East. *The European Journal of Public Health*, 11(1). DOI: 10.1093/eurpub/11.1.18
5. Brain clip art. Retrieved from: https://openclipart.org/image/2400px/svg_to_png/193152/Metacognition.png

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