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School Counselors Implementing a Trauma-Informed Approach Through Evidence-Based Practices

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Abstract

School counselors are well positioned to support students who have experienced trauma, and the need to do so has increased during the past few years. In this article, we provide school counselors with relevant evidence-based practices that are focused on addressing trauma and supporting students who have experienced a traumatic event(s). We also offer strategies for school counselors to implement a trauma-informed approach to align the delivery of services with multitiered systems of support through advocacy and collaboration in their school.

Keywords

trauma, school counselors, evidence-based practices

Nearly 46 million children are exposed to trauma every year in the United States (Listenbee et al., 2012). The types of trauma children can encounter include abuse, neglect, physical or mental illness, substance abuse, exposure to crime and violence, bullying, separation from family members, and discrimination (Herrenkohl et al., 2019). The Substance Abuse and Mental Health Services Administration (SAMHSA, 2020a) reports that more than 60% of children have experienced trauma by the age of 16. SAMHSA (2014a) defines individual trauma as resulting "from an event, series of events or set of circumstances that is experienced by an individual as physically or emotionally harmful or life-threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being" (p. 7). Furthermore, the Centers for Disease Control and Prevention (CDC, 2019) reported that one in six adults has experienced at least four types of adverse childhood experiences (ACEs), indicators of potentially traumatic events that occurred in childhood that can have a lasting, negative effect on an individual's health and well-being. Although ACEs and traumatic events should not be conflated, understanding the potential academic and social/emotional impact of both on children is important.

Traumatic experiences can greatly affect a student's education. Research indicates that traumatic experiences significantly impact the risk for negative developmental outcomes, including low academic performance and poor social skills (CDC, 2019), increased risk for mental health concerns (ASCA, 2016a; CDC, 2019), increased office referrals for behavioral concerns (SAMHSA, 2020a), and the possible need for special education services due to learning difficulties (National Child Traumatic Stress Network [NCTSN], n.d.-a). The impact of experiencing trauma can also be carried into adulthood and may cause physical and psychological health problems such as depression and cancer (CDC, 2019).

When a child has experienced a traumatic event(s), the school setting becomes vital in providing effective interventions that develop resilience and improve coping skills for students—positive school environments have been empirically linked to an increase in overall academic achievement and social/emotional well-being (ASCA, 2016a; Herrenkohl et al., 2019). In 2016, ASCA adopted a position statement that describes school counselors' role in trauma-informed practices. According to the position statement, school counselors should, "strive to identify, support and promote the success of students who have experienced trauma through the implementation of a data-informed school counseling program" (ASCA, 2016a, p. 1). Given the important role of school counselors in providing services to students who have experienced trauma, the purpose of this article is to offer information regarding trauma-informed approaches in schools and share trauma-informed evidence-based practices (EBPs) specifically designed for practicing school

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counselors. We also highlight how school counselors can integrate a trauma-informed approach within multitiered systems of support (MTSS) through advocacy and collaboration across the three tiers of support.

Trauma and School Counselors

In a study surveying school counselors, Lokeman (2011) found that 95% of participants reported regularly meeting with students regarding trauma-related issues. These results are not surprising, considering how many children are subject to violence, physical harm, and abuse. For instance, in 2001, approximately 15.5 million children in the United States were exposed to domestic violence (McDonald et al., 2006) and this exposure to violence continues (Child and Adolescent Health Measurement Initiative, 2020). According to the Administration for Children and Families, of the more than 3.5 million children under investigation for physical abuse and neglect in 2018, an estimated 678,000 cases were confirmed. This number represents an increase from 2017. In 2020, SAMHSA (2020b) predicted that children's exposure to violence during the COVID-19 pandemic would "dramatically rise" (p. 2).

SAMHSA (2014b) clarified that experiencing or witnessing violence can create individual trauma, but that mental health practitioners should also view trauma via a social-cultural perspective. This entails understanding a person, their family, and their community's life experiences and cultural influences concerning trauma (SAMHSA, 2014b). SAMHSA (2014b) calls these experiences and influences "cross-cutting factors" (p. 26) and provides a framework of these factors to help mental health providers conceptualize a socially and culturally informed view for practice. This useful framework includes factors such as religion, communication styles, location, worldview and traditions, kinship, gender and sexuality, socioeconomic status, immigration, cultural identity, heritage, and healthy practices (SAMHSA, 2014b). Viewing trauma through a social-cultural lens helps connect those impacted by trauma with appropriate resources, services, and treatment.

Also essential for school counselors is understanding the impact of working as practitioners with a population impacted by trauma, particularly the emotional effects. Related terms associated with this phenomenon include vicarious trauma, compassion fatigue, secondary traumatic stress, or simply secondary trauma (Brown, 2019; Giordano et al., 2020; Lambert & Lawson, 2013; Meyers & Cornille, 2002). These terms refer to the powerful emotions and behaviors a person experiences due to empathizing, assisting, or desiring to aid another person significantly affected by a traumatic experience (Figley, 1995). Coupled with balancing possible secondary traumatization exposure when discussing student ACEs, school counselors are at risk for experiencing trauma-related burnout (Rumsey et al., 2020). Experts strongly encourage practitioners to buffer the personal impact of working with trauma survivors by developing a self-care plan that includes peer support, supervision, consultation, training, individual therapy, and setting clear boundaries with students/clients (SAMHSA, 2014b).

Evidence-Based, Trauma-Informed Practices in School Counseling

The various traumas that students may experience have placed an even greater emphasis on the unique role school counselors can play in supporting K–12 youth. School counselors can recognize the signs of trauma, provide support and resources to students, and implement effective evidence-based interventions using a data-informed lens. Many of the existing EBPs and interventions that address the mental health needs of students with trauma are intended for clinical mental health counselors or school social workers. However, implementing EBPs is critical for school counselors to help support the learning and social/emotional development of all students—including those with trauma experiences (Martinez et al., 2020; Sink, 2016). Such support can subsequently improve student academic outcomes (Durlak et al., 2011).

Finding EBP resources, however, can be a challenging and overwhelming task, given the need to use programs that are data-driven and supported by research. Furthermore, the gap between university research and practitioner application still exists for trauma-informed EBPs (Stratford et al., 2020). The COVID-19 pandemic has also increased the need for school counselors to address trauma with their students, challenging practitioners to get creative when addressing students' needs in a virtual school counseling platform (ASCA, n.d.). With already limited funding for purchasing or accessing evidence-based classroom lessons, small-group curricula, and individual interventions, school counselors are often forced to create curricula, use outdated materials that are available within the school, or try to use best practice techniques. However, with proper knowledge and training, school counselors can use relevant data to select appropriate interventions and implement evidence-based intervention with fidelity, all within a trauma-informed comprehensive school counseling program.

Trauma-Informed Schools Through Comprehensive School Counseling Programs and Multitiered Systems of Support

In the following sections, we expand on how school counselors can utilize EBPs within their primary roles as service providers, advocates, and collaborators to address trauma through a comprehensive school counseling program grounded in an MTSS framework. A comprehensive program is intended to be a systemic tool that allows school counselors to combine data, service, collaboration, advocacy, and leadership to meet the needs of all students with the goal of closing both achievement and opportunity gaps (ASCA, 2017). ASCA (2016a) posits that school counselors can use comprehensive programs to promote school environments that provide students with safe places to

learn, avoid retraumatization, and engage in collaboration to support students who have experienced trauma. School counselors are also situated to identify students who may have experienced traumatic events (ASCA, 2016a) and support students using trauma-focused interventions to aid in the successful completion of school (Rumsey & Milsom, 2019).

MTSS is a framework or model that is currently widely accepted in many school systems. Sugai and colleagues (2019) concisely described MTSS as "an overarching approach or 'umbrella' for a range of tiered systems of support" (p. 2). MTSS involves providing school and student support through three different tiers of support. Tier 1 focuses on all students in the school environment, while Tier 2 addresses more targeted student needs, typically in a small-group setting. The final tier, Tier 3, often involves individual services, referral for outside services, and direct collaboration with families/parents.

The alignment of comprehensive school counseling program with MTSS helps school counselors support students within the three ASCA domains of academic development, career development, and social/emotional development (ASCA, 2021). Through this tiered "umbrella," school counselors can advocate for students who have experienced trauma and collaborate with key stakeholders to extend their efforts from their school counseling program by working within the MTSS model through tiered systems of support (Rumsey & Milsom, 2019).

The combination of comprehensive school counseling programs and MTSS can strengthen how school systems support students who have experienced trauma and address their mental health needs (Martinez et al., 2020). In fact, of children and adolescents who receive mental health services, 70%–80% receive them in school-based settings (NCSMH, 2019). Trauma-informed care within the MTSS model can help school counselors serve students in a tiered system while engaging in a team approach (Martinez et al., 2020). Because an MTSS team is guided by student-centered data, stakeholders can make informed decisions about school-wide initiatives, small-group support, individualized interventions, and special education (ASCA, 2021). In the following sections, we share examples of how school counselors can approach trauma-informed care using data to advocate for students and engage in collaboration to support students who have experienced trauma through comprehensive school counseling program and MTSS alignment.

Tier 1

School counselors can align their comprehensive school counseling program with MTSS by providing Tier 1 interventions in the form of school-wide initiatives, classroom instruction, and engaging in universal screening (ASCA, 2021). In both MTSS and comprehensive programs, Tier 1 interventions include direct and indirect services that focus on all students (school-wide programming). These services are universal, with all students receiving the same support and resources regardless of unique student needs. In this section, we provide an overview of each of these alignment strategies followed by specific implications for school counselors related to advocacy and collaboration.

An example of a specific, school-wide trauma-informed initiative is the Healthy Environments and Response to Trauma in Schools (HEARTS) program from the University of California, San Francisco (Regents of the University of California, 2021). This program was designed to address trauma through all three tiers of MTSS and includes a Tier 1 focus on the school's climate and culture to create a school environment that is safe and encouraging through a trauma-informed lens (Dorado et al., 2016). Over the years, HEARTS has continued to evolve through a partnership with the NCTSN (n.d.-b) to create HEARTS-Extended, which focuses on culturally responsive trauma programming. HEARTS has shown promise related to its effectiveness in addressing trauma from a tiered approach (Dorado et al., 2016), and efforts are in progress to solidify its effectiveness as an evidence-based, whole-school, trauma-informed approach (Regents of the University of California, 2021). Although not yet confirmed as an evidence-based program, HEARTS serves as an excellent model of how trauma-informed work can be infused within MTSS in a culturally responsive manner that can support school counselors' important work of advocacy and collaboration, with a social justice focus.

School counselors can also implement evidence-based programming related to social/emotional learning (SEL) via school-wide initiatives because trauma-informed schools and SEL are often interconnected (Pawlo et al., 2019). Most SEL programs were not explicitly created to address trauma, but an overlap exists between the underlying tenets of SEL and trauma-informed schools, with a difference primarily in the level of support (Pawlo et al., 2019). Specifically, SEL interventions encourage students to manage their emotions and encourage healthy self-coping skills. However, students who have experienced trauma may have a heightened level of emotion requiring a different classroom instructional approach (Pawlo et al., 2019). This presents an opportunity for school counselors to advocate for a trauma-informed focus within school-wide SEL curriculums being implemented in their schools.

School counselors can also carefully administer assessments—the first component of EBPs in school counseling data-driven decision making (Dimmitt et al., 2007; Zyromski et al., 2018)—to identify students who may have experienced trauma and may require additional support, keeping in mind family consent and ethical and legal guidelines. Some assessment tools for school counselors to consider include the *Student Risk Screen Scale* (Drummond, 1994) and the *Child and Adolescent Trauma Screen* (CATS; Sachser et al., 2017), both of which can aid the MTSS team in screening for students who could benefit from small-group or individualized services. Through this identification process, school counselors can begin the initial stages of providing support to students who have experienced trauma. Because research suggests that

traumatic experiences can impact student academic performance and put students at increased risk for mental health concerns (ASCA, 2016a; CDC, 2019), identifying students can be the first step in counteracting those negative outcomes. The questionnaires should not be used to diagnose students, but rather to identify students who may benefit from services and support. These assessments may be free to access, but proper knowledge and training of the selected assessments is essential. Additional information regarding school counselors' role in using assessments in addressed with the advocacy and collaboration sections to follow.

Advocacy and Collaboration at the Tier I Level. In addition to the interventions and ideas presented above, school counselors can advocate for the needs of students who have experienced trauma through current SEL school-wide initiatives, classroom lessons, and universal screening. First, school counselors can help their schools choose relevant Tier 1 evidence-based SEL programs (e.g., Second Step, Sanford Harmony; see https://casel.org/for full lists). If an SEL intervention is not inherently trauma-informed, school counselors can advocate for adjustments. This may include teachers and mental health professionals (e.g., school counselor, school psychologist, school-based mental health counselor, or school social worker) co-teaching this curriculum to ensure students who have experienced trauma can fully participate in SEL. To strengthen a trauma-informed focus through the delivery of school-wide SEL, school counselors can advocate for implementation of conflict-resolution and decision-making models that embody peaceful approaches. Working this way helps to avoid retraumatizing students, provides opportunities for all school staff to model these positive behaviors, and allows students multiple opportunities to practice (Pawlo et al., 2019).

School counselors can educate key stakeholders on the effects of trauma and help them recognize the signs of trauma and how traumatic events may impact students. School counselors can also provide in-service trainings for teachers about how to support students who are struggling with adverse experiences or who have experienced trauma. Serving as models for positive social interactions and relationships is critical for adults in schools, so training for staff is an especially important element of trauma-informed school counseling (Pawlo et al., 2019). By advocating for and providing teacher-level training, school counselors can educate others about how exposure to traumatic events may impact students emotionally, socially, and academically; provide strategies on how to build relationships; support teachers in managing stress and avoiding burn out (Pawlo et al., 2019); and inform staff about the school's referral process. Trainings prepare teachers to have a better understanding of why students might be exhibiting certain behaviors (Honsinger & Brown, 2019) and help administrators understand how experiencing a traumatic event can affect students' behavioral, academic, and social development.

Next, school counselors can use SEL activities in classrooms as a school-wide intervention to help to build and maintain healthy relationships for all students. When using SEL activities to help students identify and regulate their emotions, school counselors need to consider the implications for students who have experienced trauma. For example, when teaching relevant vocabulary to express and recognize feelings to foster the development of emotional skills, school counselors should be aware that students who have experienced trauma may struggle with correctly labeling and expressing their feelings (Pawlo et al., 2019).

Although school counselors are well situated within the MTSS team to utilize assessments or universal screeners, no uniform method currently is in place at a national level related to using assessments to universally screen for trauma. Assessments done through the universal screening process as part of MTSS are significant in helping to identify students who may be at risk related to their mental health, social/emotional, and behavioral needs. Universal screening outcomes affect the intervention selection process and methods by which students are supported through the tiers (Donohue et al., 2015; Pincus et al., 2020). Opinions are mixed related to school counselors' involvement with assessments and advocacy for universal screeners. ASCA's (2016b) ethical standards call for school counselors to use data when selecting interventions, and assessments are a powerful tool to gather more student data beyond school-level data such as attendance, grades, and discipline referrals. However, ASCA's ethical code does not outline specifics on utilizing assessments and/or how to navigate parental consent. To fill this gap, Donohue and colleagues (2015) presented a case example of the role of school counselors and school psychologists in using universal screeners within the MTSS process to identify students who are at risk for mental health concerns. Their case example detailed the process of contacting parents/families and the importance of providing general information to families found via the screener versus providing raw scores to inform them on best strategies to support the students. School counselors need to consider their unique school environment, school policies, and district policies related to universal screening practices. School counselors also benefit from understanding how assessment data can be used to collaborate with other key stakeholders.

Through collaboration, school counselors can encourage universal screening to identify student needs related to mental health, academic, and behavioral supports (ASCA, 2021), and promote the use of data to engage in evidence-based prevention work (Donohue et al., 2015; Goodman-Scott et al., 2013). Pincus and colleagues (2020) noted similar importance of advocating for the use of screening tools to address students with reentry to schools during the COVID-19 pandemic, affecting how school counselors collaborate with other mental health professionals and parents to ensure students' needs are being met. Assessments help school counselors gather initial data and serve as a baseline for each student. With universal screening data, school counselors can collaborate with MTSS team members to determine which students need Tier 2 support and which interventions would be most appropriate, and

incorporate those within their comprehensive school counseling program.

Tier 2

Tier 2 interventions are targeted strategies that provide specialized support to a group of students identified as needing additional assistance (Adamson et al., 2019). Data, which can include the use of a universal screener, help identify students who need more individualized attention. Evidence-based programming can provide students the added support they need to succeed when foundational Tier 1 programming proves insufficient. Tier 2 interventions within the framework of a comprehensive school counseling program often include classroom or small-group instruction and can be provided by school counselors or in collaboration with teachers or mental health professionals within the school (ASCA, 2021). When specific interventions are not successful, school counselors can collaborate with the MTSS team to identify new interventions and next steps for students (Donohue et al., 2015).

Two notable examples of evidence-based interventions focused on trauma designed for small-group implementation are Cognitive Behavioral Intervention for Trauma in Schools (CBITS) and Support for Students Exposed to Trauma (SSET). CBITS (n.d.), rooted in cognitive-behavioral theory, is a skills-based intervention typically implemented for students in 5th through 12th grade that addresses symptoms of posttraumatic stress disorder, depression, and generalized anxiety (NCTSN, 2017). Much like many evidence-based programs available for Tier 2 intervention support, CBITS is designed to be led by school-based mental health professionals.

SSET, the non-clinical version of CBITS, is a 10-session program designed to be facilitated by teachers or school counselors in a flexible format as an aid to creating trauma-informed schools. The program is evidence-based and free. The SSET program is intended to address behaviors associated with acting out and impulsivity or risky behaviors (SSET, n.d.). Sessions focus on developing students' coping skills, problem-solving strategies, and capacity to engage in relaxation techniques (SSET, n.d.). Although SSET has only been evaluated for use specifically with middle school students aged 10–14, the program developers indicate that the program would be successful for students in late elementary through early high school (SSET, n.d.). One of the best ways of determining intervention fit is through data-informed decision making, which we address next.

Advocacy and Collaboration at the Tier 2 Level. School counselors must be critical consumers of research when selecting or recommending specific interventions, considering the unique needs of their school and students and any relevant training or knowledge required for implementation. We suggest that school counselors use universal screening data to inform which interventions are presented to administration and the MTSS team to support students who have experienced trauma, and use the data for progress monitoring and to guide the decision-making process for additional intervention (e.g., see Donohue et al., 2015, for a case study on this process). Using data, school counselors can position themselves to advocate for interventions that are best suited for their students who have experienced trauma and provide interventions such as trauma-based groups (e.g., CBITS, SSET) either as part of their comprehensive school counseling program or in collaboration with school-based mental health counselors or other mental health professionals.

School counselors can also educate key stakeholders on the effects of trauma and help them to recognize the signs of trauma and how traumatic events may affect students. This builds critical understanding of these issues throughout the building and can also help school counselors and the MTSS team's work to support students through Tier 2 and Tier 3 interventions.

Throughout, school counselors can support students who have experienced trauma through collaboration with key stakeholders to create individual care plans to retain students in classes, increase attendance, and provide various resources and support. Evaluating the effectiveness of their work after an intervention—the third component of EBP (Zyromski et al., 2018)—is essential for supporting students who have experienced trauma. School counselors can work with teachers and families to evaluate the impact of trauma-based interventions, selecting alternate interventions if initial interventions are unsuccessful.

Tier 3

Within an MTSS framework, Tier 3 supports are provided to students on an individual level, often with greater frequency and intensity, to address persistent challenges and concerns (Adamson et al., 2019). Tier 3 support focuses on identifying students who need more individualized trauma support (e.g., complex trauma) and often includes collaboration with parents/family and referrals to outside mental health counselors or school-based therapists. Even after Tier 1 school-wide initiatives and Tier 2 small groups, some students may not have made the improvement in academic or social/emotional outcomes that was hoped for or expected from those tiered services. Some students who experienced trauma may still require additional and personalized support. School counselors can collaborate with other providers in the school to provide Tier 3 services that are specific to the individual student; these services might occur in the school or the school counselor may need to advocate and collaborate with others to access community-based services.

Advocacy and Collaboration at the Tier 3 Level. Within Tier 3, school counselors can advocate for students' well-being in their comprehensive school counseling program by creating programming collaboratively with mental health professionals in the building, obtaining consent to communicate with outside mental health caregivers, using a comprehensive and effective referral process, and establishing strong communication channels with the parents and guardians of students. As discussed in Tier 2, school counselors need to collaborate with key

stakeholders to evaluate the effectiveness of the intervention and how students have responded. Further, if interventions are not working for students who have experienced trauma, school counselors might need to advocate for Tier 3 services, which can include being prepared to refer out to community-based mental health counselors, connect students with necessary agencies and services, and collaborate directly with students' families and caregivers. When working in collaboration with administrators, school counselors can also serve as advocates for alternatives to suspensions and expulsions for students exposed to trauma who may be experiencing poor control of emotion (moodiness, anger) and impulsive behavior. Honsinger and Brown (2019) highlighted the importance of examining discipline procedures to include a trauma-informed approach to continue to provide access to the learning environment for students who have experienced trauma. This provides an opportunity for school counselors to collaborate directly with administrators to restructure the discipline process to be trauma-informed.

Conclusion

School counselors have an important role in helping to create a trauma-informed school and a safe learning environment for all. Because experiencing a traumatic event can impact students on an academic and social/emotional level, the support students receive can be critical to their development and future school experience. Despite school counselors' ability to support students who have experienced trauma, many school- and evidence-based practices have been developed for clinical mental health counselors and school social workers. However, school counselors can focus on how to identify students in need of trauma-focused interventions, advocate for students who have experienced trauma, educate faculty and stakeholders on the impact of trauma, and incorporate trauma-informed frameworks and interventions into their comprehensive school counseling programs. In this article, we explored how school counselors can use data to identify students who may have experienced trauma, identified trauma-related EBPs and interventions, and provided suggestions for collaboration and advocacy aligned with the three tiers of MTSS. When school counselors and schools approach learning from a trauma-informed lens, students can focus on their learning, rather than trying to navigate the negative effects of experiencing a traumatic event. With various tiers of support, students can ultimately cultivate resilience.

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