Creating a Trauma-Sensitive Classroom
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Introduction/Definition
❖ trauma - an experience—real or perceived—that threatens someone’s sense of safety—physically, emotionally, or sexually—and overwhelms their capacity to normally cope
❖ subjective
❖ not everyone has or will develop PTSD, or PTSD like symptoms
❖ singular event or chronic
❖ trauma is a disease of not being present – either by dis-associating, re-experiencing, or feeling stuck

How Trauma is Processed in the Brain
❖ limbic system is activated
❖ amygdala, our emotional brain, senses fear - the “smoke detector”
❖ amygdala sends distress signal to the hypothalamus
❖ hypothalamus communicates to the nervous system
❖ sympathetic nervous system - ACTIVE
  o gas pedal
  o fight or flight response
❖ parasympathetic nervous system – INACTIVE/RESTING
  o brake
  o calming, “rest and digest”
❖ when experiencing trauma ➔ amygdala ➔ hypothalamus ➔ sympathetic nervous system ➔ adrenal glands pump epinephrine
  o physiological changes like sharper senses, active reflexes, digestion shuts down

Acute Stress
❖ immediate reaction to a threatening situation
  o stress hormones return to normal levels after the threat has passed

Chronic Stress
❖ continuous ongoing stress
❖ can result in long term damage to the body
❖ children may believe that what is happening is their fault
❖ trauma survivors may feel unsafe in their bodies
❖ survivors may become out of touch with themselves and the world around them
Common Manifestations
- disassociation
- anger
- intergenerational trauma
- need for special education or accommodations

Signs and Symptoms
- avoidance
- fatigue
- hypervigilance
- acting out
- anger issues
- anxiety
- withdrawal, isolation
- grades dropping, schoolwork suffering
- feeling sad, feeling guilty, low self-esteem
- physical health problems/complaints
- sudden changes in behaviors or appearance (losing weight, dirty clothes, etc)
- being very clingy, especially in young children
- being hypersexualized

How Do We Create a Trauma-Informed Classroom?
- Giving instructions in a mindful way that doesn’t feel threatening, demeaning, or scary
- Changing your language—using positive redirection versus pointing out the negative (“Look at all the great energy you have! Let’s take it and put it into singing this awesome song rather than running around”)
- Allowing students to move when they need to move
- Focusing on the behavior and not demoralizing the child as a person, not defining a student by their behavior
- Not touching kids without their permission
- Getting down to their level and looking at them in the eye
- Not turning off the lights or making loud noises unexpectedly
- Creating a safe space with structure where kids know what to expect
- Be mindful of your students trying to pull you into their trauma narrative—remaining calm and not engaging in a power struggle
- It is not about control. Let things go!
- Acknowledging and holding space for their feelings, do not tell them how not to feel
Some Tips for Good Self-Care

- Recognize that you are not a therapist and cannot fix things—for your students, or anyone for that matter
- Seek your own therapy and support
- Do your best to leave work at work
- Energy cloaking
- Get very good and very consistent sleep
- Move in some way (I personally recommend yoga)
- Spending time with friends who have positive energy
- Eat plenty of fruits & vegetables

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