



## Student services staff handout

# 5. Trauma-Sensitive Assessment and Planning Checklist

This handout for student services staff and other staff who conduct student assessments is designed to help you adopt trauma-sensitive assessment, evaluation, and planning practices. By incorporating an awareness of trauma and its effects, those individuals performing student assessments are more likely to correctly identify trauma-related behaviors and provide appropriate interventions.

Even so, staff members in trauma-sensitive schools refrain from assuming that trauma is at the root of all student difficulties. Also, trauma-sensitive assessments are not trauma evaluations that identify the details of the trauma and provide clinical recommendations. Instead, the assessments take into account the potential effects of trauma on student behavior and learning. A formal trauma evaluation may be warranted based on results.

## Components of Trauma-Sensitive Assessments and Evaluations

### Functional behavioral assessments

Use this checklist as a guide for conducting trauma-sensitive functional behavioral assessments.

	Assessments consider school routines that could trigger a student affected by trauma.
	Assessments include examples of trauma-related cues or triggers in the school environment that may lead to fight, flight, or freeze responses.
	Assessments consider trauma-related physiological responses as possible drivers of behavior (versus more purposeful or obvious motivations such as seeking attention or avoiding difficult tasks).
	Assessments consider a wide range of potentially traumatic experiences that may increase the likelihood of problem behavior.
	Assessments consider student strengths.

### Psychological evaluations

The term *complex trauma* refers to exposure to multiple traumatic events as well as to the long-term impact of such exposure. Children and youth affected by ongoing trauma from an early age exhibit a wide range of difficulties that can mimic other conditions, such as attention deficit hyperactivity disorder, bipolar disorder, oppositional defiant disorder, and reactive-attachment disorder. When youth are diagnosed solely on the basis of presenting symptoms, mental health

and other providers are likely to miss an underlying trauma that may be the source of the emotions and behaviors and the necessary focus of treatment.

Student services staff with expertise in conducting comprehensive psychological evaluations (e.g., school psychologists and other school-based mental health professionals) should be aware of and assess for the effects of trauma, particularly complex trauma on all key areas of student functioning.

To guide your assessment process, consider the following graphic, which outlines the core developmental domains of complex trauma that should be assessed.

### Developmental domains affected by complex trauma

<p><b>Attachment and Relationships:</b></p> <ul style="list-style-type: none"> <li>Relationship problems with family members, adults, and peers</li> <li>Problems with attachment and separation from caregivers</li> <li>Problems with boundaries</li> <li>Distrust and suspiciousness</li> <li>Social isolation</li> <li>Difficulty attuning to others and relating to other people's perspectives</li> </ul>	<p><b>Thinking &amp; Learning:</b></p> <ul style="list-style-type: none"> <li>Difficulties with executive functioning and attention</li> <li>Lack of sustained curiosity</li> <li>Problems with information processing</li> <li>Problems focusing on and completing tasks</li> <li>Difficulties with planning and problem-solving</li> <li>Learning difficulties</li> <li>Problems with language development</li> </ul>
<p><b>Physical Health: Body &amp; Brain:</b></p> <ul style="list-style-type: none"> <li>Sensorimotor developmental problems</li> <li>Analgesia</li> <li>Problems with coordination, balance, body tone</li> <li>Somatization</li> <li>Increased medical problems across a wide span</li> <li>Developmental delays/regressive behaviors</li> </ul>	<p><b>Behavior:</b></p> <ul style="list-style-type: none"> <li>Difficulties with impulse control</li> <li>Risk-taking behaviors (self-destructive behavior, aggression toward others, etc.)</li> <li>Problems with externalizing behaviors</li> <li>Sleep disturbances</li> <li>Eating disturbances</li> <li>Substance abuse</li> <li>Oppositional behavior/difficulties complying with rules or respecting authority</li> <li>Reenactment of trauma in behavior or play (e.g., sexual, aggressive)</li> </ul>
<p><b>Emotional Responses:</b></p> <ul style="list-style-type: none"> <li>Difficulty with emotional self-regulation</li> <li>Difficulty labeling and expressing feelings</li> <li>Problems knowing and describing internal states</li> <li>Difficulty communicating wishes and needs</li> <li>Internalizing symptoms such as anxiety, depression, etc.</li> </ul>	<p><b>Dissociation:</b></p> <ul style="list-style-type: none"> <li>Disconnection between thoughts, emotions and/or perceptions</li> <li>Amnesia/loss of memory for traumatic experiences</li> <li>Memory lapses/loss of orientation to place or time</li> <li>Depersonalization (sense of being detached from or "not in" one's body) and derealization (sense of world or experiences not being real)</li> <li>Experiencing alterations or shifts in consciousness</li> </ul>
<p><b>Self-Concept &amp; Future Orientation:</b></p> <ul style="list-style-type: none"> <li>Lack of a continuous, predictable sense of self</li> <li>Poor sense of separateness</li> <li>Disturbances of body image</li> <li>Low self-esteem</li> <li>Shame and guilt</li> <li>Negative expectations for the future or foreshortened sense of future</li> </ul>	

\*The information above is adapted from Cook et al., 2005.

### Information gathered in trauma-sensitive evaluations

Use this checklist as a guide for conducting trauma-sensitive psychological evaluations. Based on results, student services staff may refer students for a more detailed trauma evaluation.

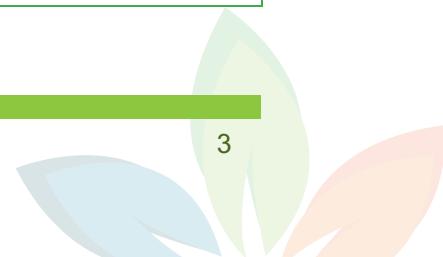
	Assessments include questions about student exposure to potentially traumatic events.
	Assessments gather information about possible trauma-related challenges across developmental domains related to self-regulation, physical functioning, relationships, and academics, including:
	<ul style="list-style-type: none"> <li>■ Developmental delays</li> </ul>
	<ul style="list-style-type: none"> <li>■ Difficulty regulating or controlling behavior, emotions, and bodily states, and regulating or identifying and expressing feelings</li> </ul>
	<ul style="list-style-type: none"> <li>■ Risky behaviors (e.g., self-harm, substance abuse, risky sexual behaviors, illegal activities)</li> </ul>
	<ul style="list-style-type: none"> <li>■ Difficulty sustaining attention and concentration</li> </ul>
	<ul style="list-style-type: none"> <li>■ Learning difficulties</li> </ul>
	<ul style="list-style-type: none"> <li>■ Difficulties in relationships with others</li> </ul>
	Assessments include questions about reactions to common trauma triggers.
	Assessments include questions about family functioning and potential exposure to trauma.
	Assessments include questions about student and family strengths.
	Assessments include questions about student and family cultural background, values, and norms.
	Information is gathered using a variety of techniques—clinical interviews, standardized measures, and behavioral observations.
	Information is gathered from a variety of perspectives—the child, caregivers, teachers, and other individuals who have direct contact with the student.
	Staff members conducting assessments try to determine connections between exposure to various traumatic events and current difficulties.
	Staff members conducting assessments try to determine potential trauma-related reminders or triggers based on the types of traumatic events the student has experienced.

### Conducting trauma-sensitive assessments and evaluations

The manner and situation for conducting assessments is as important as the questions asked. Assessments require students and parents to meet with people they don't know and share sensitive information that can be emotionally painful or unsettling. The very concept may reside outside the family's cultural norms. School professionals need to stay aware of these challenges throughout the encounter and create a safe, secure, comfortable, and respectful environment.

Use this checklist to consider how you incorporate trauma-sensitive strategies into your assessment process.

	Assessments are conducted in a private space.
	Students and families are well informed about what to expect.
	Students and families are given choices about the conduct of the assessment (e.g., form of expression or consideration for reading or writing limitations).



	Staff members consider potential safety issues and triggers (e.g., asking personal questions, shame about behaviors, fear about what could come up).
	Staff members consider cultural norms and expectations when greeting, engaging, and questioning students and families.
	Students and families are given options for stopping assessments and continuing at a later time if they begin to feel uncomfortable or overwhelmed.
	Assessments are relationship oriented (e.g., empathic, respectful, engaged, student and family-centered).
	Assessments maintain a strengths-based focus.

## Trauma-Sensitive Student Plans

In a trauma-sensitive school, individual student plans, such as behavioral support plans and individualized education programs (IEPs) address trauma when appropriate.

Use this checklist as a guide for creating trauma-sensitive student plans.

	Behavior support plans include a place to identify student-specific trauma-related triggers.
	Behavior support plans include a place for necessary accommodations and helpful adult responses for students who have been exposed to trauma.
	Individualized strategies for supporting students include a focus on physiological regulation.
	Plans include strategies or routines for supporting students during difficult times and in potentially triggering situations.
	Social and emotional IEP goals include ways to build skills that support resilience and skill building for students exposed to trauma.
	Plans include opportunities for teaching students exposed to trauma about the stress response and strategies for managing physiological responses.

## References

- Cook, A., Spinazzola, J., Ford, J., Lanktree, C., Blaustein, M., Cloitre, M., et al. (2005). Complex trauma in children and adolescents. *Psychiatric Annals*, 35(5), 390–398.
- Crecco, J. (n.d.). Trauma sensitivity during the IEP process. Recruitment, Training and Support Center, Federation for Children with Special Needs. Retrieved from <http://fcsn.org/rtsc/wp-content/uploads/sites/2/2013/11/Trauma-Sensitivity-During-the-IEP-Process.pdf>
- Loman, S., & Borgmeier, C. (n.d.). Practical functional behavioral assessment training manual for school-based personnel. Retrieved from [http://www.pbis.org/common/cms/files/pbisresources/PracticalFBA\\_TrainingManual.pdf](http://www.pbis.org/common/cms/files/pbisresources/PracticalFBA_TrainingManual.pdf)
- National Child Traumatic Stress Network. (n.d.). Assessment of complex trauma. Retrieved from <http://www.nctsn.org/trauma-types/complex-trauma/assessment>
- Tishelman, A. C., Haney, P., O'Brien, J. G., & Blaustein, M. E. (2010). A framework for school-based psychological evaluations: Utilizing a “trauma lens.” *Journal of Child & Adolescent Trauma*, 3(4), 279–302.