Trauma-Informed SEL Quick Guide

Principles, ten classroom strategies, de-escalation steps and an adult self-care checklist

For: K-12 teachers, counselors and school leaders

What trauma-informed SEL is

Trauma-informed SEL teaches the five CASEL competencies (self-awareness, self-management, social awareness, relationship skills and responsible decision-making) in a way that assumes some students in every classroom carry trauma. The goals stay the same. The delivery changes: predictable routines, real choices, no forced disclosure, and a plan for the moments when a student's stress response takes over.

Why it is universal: CDC data from the 2023 Youth Risk Behavior Survey show that three in four US high school students report at least one adverse childhood experience and one in five report four or more. Most of those experiences are never disclosed at school. A trauma-informed classroom does not depend on knowing who is affected.

The six principles in a classroom

SAMHSA's six principles of a trauma-informed approach, translated for K-12 use.

Principle	What it looks like in your room
Safety	Posted, followed schedule; calm voice; a known place to regulate; no public shaming
Trustworthiness and transparency	Do what you said; explain reasons; give notice of changes, drills and substitutes
Peer support	Structured partner routines; peer mentors; class agreements built together
Collaboration and mutuality	Solve problems with the student, not at them; treat families as partners
Empowerment, voice and choice	Choices in seating, task order and format; a shared vocabulary for needs; honored opt-outs
Cultural, historical and gender issues	Learn how students' communities understand distress; check discipline data for disparities

The four Rs

The National Child Traumatic Stress Network describes a trauma-informed school as one that:

1. Realizes the widespread impact of trauma and the pathways to recovery.
2. Recognizes the signs and symptoms of trauma.
3. Responds by integrating trauma knowledge into all parts of the school.
4. Resists re-traumatization by reducing unnecessary triggers and adopting trauma-informed policies and practices.

Ten strategies for this week

1. **Greet every student at the door by name.** Offer a choice of greeting. Daily, no exceptions.
2. **Post a visual schedule and follow it.** Two-minute warnings before transitions. Pictures for K-2, an agenda for secondary.
3. **Build a regulation space.** Two or three calming tools, a time limit, a return routine. Students choose to go; nobody is sent there.
4. **Teach the body signals of stress on a calm day.** Fast heart, tight chest, hot face, urge to run. Pair with three responses: slow breath, feet on floor, drink of water.
5. **Replace forced sharing with structured choice.** Every SEL prompt has a "pass," a written option, or a character to talk about instead of oneself.
6. **Run a private two-minute check-in.** A one-to-five scale on a card. Follow up quietly with low scores. Never ask students to explain in front of peers.
7. **Correct privately, side by side.** Low voice, same direction, no audience. Restorative follow-up later.
8. **Give choices in how work is done.** Two or three options for order, seating or format.
9. **Preview distressing content.** Say what is coming and why, and offer a parallel task with the same learning goal.
10. **Connect every student to one trusted adult.** Ask students to name theirs. Know the referral pathway and use it.

De-escalation in seven steps

1. **Regulate yourself first.** Slow breath, lower voice, drop your shoulders.
2. **Reduce the audience.** Move the class to a task or move the conversation to the doorway.
3. **Give space and time.** Stand at an angle, an arm's length away. Stop talking for a few seconds.
4. **Name and offer, do not demand.** "You look upset. Your desk or the calm space, which one?"
5. **Wait for the body before the words.** Reasoning and consequences only work once breathing and posture settle. Allow 20 minutes or more.
6. **Repair.** Check in privately later the same day or the next. Restate that the student is welcome.
7. **Document and refer.** Note what came before. Patterns point to triggers to remove and students who need more support.

Signs a student may be carrying traumatic stress

From the NCTSN's Trauma Facts for Educators. None of these is proof; all are reasons to respond with regulation first.

- Over- or under-reacting to bells, physical contact, slamming doors, sirens, lighting or sudden movements
- Blowing up when corrected or told what to do
- Fighting when criticized or teased
- Resisting transitions or change
- Headaches, stomachaches, inconsistent performance, impulsive behavior
- Trouble with attention, memory, organizing and planning

What not to do

- Do not ask students to disclose trauma to the class.
- Do not label a student as "having trauma." Describe behavior and needs.

- Do not use the calm space as a timeout.
- Do not use public behavior charts or color systems.
- Do not confuse trauma-informed with permissive. Calm, clear limits are safety.
- Do not screen students for ACEs in class.

Adult self-care checklist

Secondary traumatic stress is the emotional duress that comes from hearing about another person's trauma. Its symptoms mimic PTSD. The NCTSN lists hypervigilance, hopelessness, difficulty listening, anger and cynicism, sleeplessness, fear, chronic exhaustion, physical ailments, minimizing and guilt. Check yourself monthly.

Area	This month I have...
Awareness	Reviewed the signs above and noticed any that apply
Debriefing	Talked through hard incidents the same day with a colleague, counselor or administrator
Peer support	Checked in with a named partner at least once a week
Boundaries	Protected one boundary (leaving time, lunch away from the desk, no student email after a set hour)
Basics	Kept up sleep, food and some movement most days
Help	Known how to reach employee assistance or a counselor, and used it if needed
Organization	Asked leadership for structured peer support time if none exists

School-wide sequence at a glance

1. Build shared understanding with all staff, including front office, custodial, cafeteria and transport.
2. Audit the environment and the discipline data.
3. Pick three universal practices everyone uses.
4. Align discipline with de-escalation and repair.
5. Build and publicize the referral pathway.
6. Support the adults.
7. Review attendance, referrals and climate data every quarter.

Sources

- CDC, About Adverse Childhood Experiences: cdc.gov/aces/about/index.html
- CDC, 6 Guiding Principles to a Trauma-Informed Approach (SAMHSA principles): stacks.cdc.gov/view/cdc/56843
- NCTSN, Creating, Supporting, and Sustaining Trauma-Informed Schools: A System Framework (2017)
- NCTSN, Trauma Facts for Educators, Child Trauma Toolkit for Educators (2008)
- NCTSN, Secondary Traumatic Stress: A Fact Sheet for Child-Serving Professionals (2011)
- Full guide: transformingeducation.org/resources/trauma-informed-sel-toolkit/

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