

Introduction to Bounce Back for Classrooms



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Bounce Back for Classrooms, an adaptation of the trauma-focused group counseling intervention *Bounce Back* (Langley & Jaycox, 2015), is a social and emotional learning (SEL) curriculum based on cognitive behavioral therapy components. Use of the curriculum in a classroom setting supports students in understanding and mitigating the effects of stress and traumatic stress, fostering hope, and building skills that promote healing and resilience. The curriculum is intended to fit within existing school protocols for implementing SEL interventions and could serve as one element of a multi-tiered trauma-informed school system as a Tier 1 or universal strategy suitable for all students.

The curriculum is developmentally appropriate for students between 2nd and 5th grade. Each of the 12 lesson plans fits within an approximate 50-minute time frame and

can be facilitated by classroom teachers, school counselors, or other staff members— no clinical training is required.

Child Traumatic Stress

Child traumatic stress occurs when a child 1) experiences a frightening, dangerous, or violent event or series of circumstances; and 2) develops reactions that persist long after the danger has subsided. The child may experience the traumatic event directly or witness the event as it happens to someone else. Importantly, there is no external standard for determining whether a given event is traumatic. The child's experience of the event—the perception of the event as frightening, dangerous, or violent—determines whether the event is traumatic. Examples include trauma that occurs within the child's caregiving system over time, such as physical abuse, sexual abuse, emotional abuse, emotional neglect, physical neglect, and the witnessing of domestic violence, among other experiences. Single events can also be traumatic, such as car accidents, medical procedures, dog attacks, instances of community violence, the sudden loss of a loved one, and natural disasters.

Some families and communities also experience historical or intergenerational trauma resulting from large-scale community events or losses. Examples of historical trauma include genocide, exile, religious persecution, loss of land, loss of cultural identity, and discrimination. The traumatic stress resulting from these events may be transmitted from generation to generation.

Common reactions to stress and trauma vary widely from person to person. Although these reactions can be problematic and interfere with learning and development, they are based on survival instincts and are protective in nature. During the experience of a threatening or dangerous event, the body often automatically adopts a physiological danger response, referred to as the fight, flight, or freeze response. This response is vital to our survival, as it primes our nervous systems and bodies to address or avoid dangers in our environment. Problems may arise, however, if the danger response becomes activated in everyday situations. This often occurs in response to reminders of

the original traumatic event or events, such as people, sights, smells, sounds, stories, feelings, or other details in the environment. Someone whose danger responses are triggered in this way may exhibit similar levels of activation as during the original traumatic event(s), regardless of whether any danger is present in the current environment. These “false alarms” can disrupt learning and social interactions. Frequent false alarms take a physiological and psychological toll on children.

Some common signs and symptoms of traumatic stress among elementary age children include somatic complaints like stomach aches; increased anxiety, worry, or hyper-arousal; difficulty sleeping and/or nightmares; isolation or becoming withdrawn; sadness or depression; and increased irritability or outbursts of anger. Often children avoid people, places, or things that remind them of the trauma.

Traumatic stress adversely affects a child’s ability to self-regulate emotions and energy levels, and it may disrupt developmental trajectories. Regressions in development and difficulty in reaching milestones are common. Children who experience chronic trauma or who have not had access to the encouragement, structure, and safety necessary for healthy physical, cognitive, social, and emotional development may exhibit difficulties with focus, memory, and executive functioning.

Often, traumatic stress adversely affects relationships. If children have been exposed to trauma within the home or their caregiving system, they may form ideas that adults cannot be trusted to treat them well or provide them with security. In other cases the reverse can be true: children who have had their boundaries violated by trusted adults may have difficulty setting appropriate boundaries with adults and peers, putting them at risk of being manipulated or treated poorly by others. Other common effects of traumatic stress on relationships include misreading social cues and making impulsive decisions in conflict resolution and problem solving.



Why Bounce Back for Classrooms Was Developed

The National Survey of Children's Health (2016) found that 45% of the nation's children ages 0-17 have experienced at least one traumatic childhood event (Sacks & Murphey, 2018). Given this widespread exposure, coupled with the significant amount of time children spend in school, teachers are in a unique position to recognize when a child might be struggling emotionally or behaviorally and needing additional resources or interventions. Teachers are also in a position to support students by teaching skills related to self-awareness and coping strategies that can be beneficial for dealing with traumatic or general life stress. Additionally, families may face obstacles to accessing community resources and mental health services for children, especially in rural communities. Thus, a trauma-informed SEL curriculum delivered in the school setting, such as *Bounce Back for Classrooms*, can help fill in gaps in services and promote the resiliency of students who have experienced trauma.

While informed by trauma treatment best practices, *Bounce Back for Classrooms* is appropriate for all students, including those who have not experienced traumatic events or who demonstrate no signs or symptoms of traumatic stress. All students experience stress, and struggles with nervous system activation in stressful moments is common. The self-awareness and coping strategies that help children with traumatic histories regulate their emotions and behaviors are also beneficial for children who deal with ordinary levels of stress. Furthermore, development of these skills may serve as a protective factor in the event that children are exposed to traumatic events or other mental health challenges in the future.

Bounce Back for Classrooms can be integrated into larger school efforts at becoming more trauma-informed. In brief, trauma-informed schools focus on 1) educating staff about the prevalence and impacts of trauma; 2) integrating trauma-informed practices that support feelings of safety and belonging; 3) incorporating preventative social skills instruction for all students and providing more intensive levels of intervention utilizing trauma-focused, school-based therapies as needed; 4) modifying policies and procedures to reflect proactive and supportive approaches to discipline; and 5) working collaboratively across the school and community. These

trauma-informed approaches align well with school-wide models of prevention and intervention such as Multi-Tiered Systems of Support (MTSS) and Positive Behavioral Interventions and Supports (PBIS).

While a school-wide system of trauma supports and interventions may be desirable, we recognize that every school has its own character, context, and priorities. The lack of a school-wide model should not discourage schools from implementing *Bounce Back for Classrooms*. Indeed, schools with resource constraints may find the curriculum particularly approachable in that it can be implemented during instructional hours by existing non-clinical staff.

How Bounce Back for Classrooms Can Help



The purpose of *Bounce Back for Classrooms* is to teach social and emotional skills that promote healing and resilience in children who have been exposed to trauma. The main premise of *Bounce Back for Classrooms* (as with cognitive behavioral therapy and *Bounce Back*, the group therapy intervention from which this curriculum is adapted) is that feelings, thoughts, and actions are all connected. If we alter one of these, we can often alter the other two.

Students are taught this concept; educated about common reactions to trauma, stress, and loss; and taught how to apply this new concept and new knowledge in their everyday lives.

Many children have difficulty self-regulating their feelings. This can be especially true of children attempting to cope with current or past instances of traumatic stress. For example, anxiety, fear, guilt, shame, grief, and sadness are common among children who experience traumatic stress. *Bounce Back for Classrooms* seeks to help students identify emotions such as these, understand their origins and intensity, and gain specific skills they can use to cope with them. Taken together, these skills increase students' ability to gauge and modulate their arousal or energy levels. This is what is

meant by the development of self-regulation skills.

Self-regulation is important for all children, but it is critical for children who have experienced trauma. As noted above, traumatic stress often results in false alarms. When faced with a trauma reminder, a child's mind and body may react with the activation of the fight, flight, or freeze danger response even when no danger is present. Frequent false alarms may lead to increased arousal levels or hypervigilance as well as to the opposite: a numbing or checking-out response. *Bounce Back for Classrooms* can help children who commonly experience increased arousal levels to modulate their energy downwards and make it less disruptive. Children prone to numbing or checking out can learn to modulate their energy upwards or enhance their focus on the present moment.

Many of these skills take the form of actions, such as progressive muscle relaxation and deep breathing exercises that are designed to calm the body. These actions can be useful for children whose traumatic stress leads to increased arousal. Other activities, such as movement and listening to music, are designed to increase energy levels in children whose stress responses lead to numbing or checking out. Other actions teach grounding skills that increase focus.

Bounce Back for Classrooms targets thoughts by supporting the development of skills for distinguishing between helpful and unhelpful thoughts. Children learn to recognize thoughts that needlessly increase anxiety, such as jumping to a worst-case scenario or only focusing on the negative side of a situation. While students exposed to trauma may have an increased propensity toward anxiety-provoking thoughts and a critical need to learn how to counteract these thoughts, the development of calming and optimistic thinking patterns is an important lifelong skill for everyone.



Finally, *Bounce Back for Classrooms* offers students ideas for reaching out to increase their support. Often, students who have experienced trauma feel isolated and are not in the habit of asking for help. Additionally, the curriculum is designed to help students with the problem-solving method of thinking before the action, evaluating

potential actions, and then making a decision on the best action.

Setting the Tone

When facilitating *Bounce Back for Classrooms*, it is important, as in any learning environment, to create spaces where students feel safe and comfortable. Although the lesson plans are designed simply to build knowledge and skills, the topics of stress, trauma, and our emotions can sometimes upset students. As facilitators, we should work to normalize the idea that we all have a vast range of feelings that can change at different times in different situations. We want to send the message that it's okay to feel what we feel and feeling not-okay is okay. We also want to send the message that we all have the ability to learn about our feelings and how to manage them better.

A safe learning environment is one in which students feel like they belong, are cared about, and can share without being judged or criticized. We suggest opening each lesson with a warm, friendly greeting and allowing students to greet each other. This greeting might take the form of neighbor-to-neighbor sharing or whole-group sharing in a circle. For example, everyone greets each other or answers an icebreaker question, such as what their favorite foods, books, or activities are. The goal is to create a sense of community and connectedness.

We can also promote a safe learning environment by continuously reminding and encouraging students to engage in kind and respectful behaviors and to intervene when students do not. This sends the message that everyone is worthy of being treated well and will be equally protected.

Being clear, consistent, and predictable with students also contributes to their feelings of safety. Work to create a routine around teaching the curriculum. For example, it may be beneficial to facilitate the lessons at approximately the same time each day, to gather students together for lessons using a specific activity such as a song or chant that announces the start of the day's lesson, and to gather in the same place in the room for each lesson. In addition to providing a consistent opening activity, it might be helpful to close the lesson in a similar manner each time (for example, by thanking the group members for their participation), and to utilize familiar transition activities when going



from one task or topic to the next.

We also encourage providing high rates of specific positive feedback to students as they are learning the self-regulation and coping skills in the curriculum. This will promote confidence and increase the likelihood that they will use the skills when they need them. Feedback statements could include “Great job taking deep breaths,” or “Nice work using feelings words.” It might also be helpful to provide specific positive feedback to students when they are engaging in safe, respectful behaviors that contribute to a safe learning environment. Provide all of these kinds of feedback both during and after lessons, to individual students as well as to the whole group.

Continuity and Context

We would all like to believe that if we teach effectively, students will always remember the lessons they learn in our classrooms. In truth, as we all know, learning new skills requires not just one-time exposure but also repetition. This can be especially true for students impacted by trauma, who may struggle with attention and focus during lessons for all of the reasons described above. To reinforce learning the curriculum content, it’s important to continuously integrate the language, concepts, and skills into ongoing discussions and situations as well as to review or re-teach lessons as needed.



This might take the form of reviewing skills learned during the previous lesson at the beginning of each new lesson. Or it might mean integrating *Bounce Back for Classrooms* skills into academic and social discussions. For instance, after students have learned about identifying the intensity of their emotions using a thermometer, encourage them to apply this skill when discussing characters’ emotions in literary texts or when thinking about upsetting situations on the playground. In general, we encourage facilitators to prompt students to use the skills they have learned in *Bounce Back for Classrooms* in all relevant situations. We also encourage the continuous modeling of the skills as a key method of reinforcing the course content.

Developmental Considerations

This curriculum targets students in 2nd through 5th grade. As we know, not all students of the same age are at the same developmental level. Modifications should be made to best support the learning of all students in the class or group. For example, facilitators may need to simplify language or provide additional clarification. Some students may be very familiar with terms such as “stress,” “behavior,” or “danger,” whereas others may need these terms simplified. Instead of using the term “stress,” we might say “When we have a lot of pressure on us to do things and it’s making us uncomfortable.” Instead of “behavior,” we might say, “How we act and what we do,” and instead of “danger,” we might say, “When we are afraid of something.” We may also need to provide additional visuals, pictures, or very concrete examples to clarify these and other terms and concepts.

Other adaptations may need to be made related to attention spans and the ability to focus. Younger students typically engage in activities for shorter periods of time than older students. The lessons in this curriculum are designed for approximately 50-minute class periods. With younger students, it may be preferable to spread one lesson across two or even three shorter sessions. Other ways of addressing attention and focus in younger students include integrating movement activities periodically to give them breaks and to renew their focus so that they can engage with the material for longer periods of time.



This curriculum, on paper, is an example of how certain evidence-based concepts and skills can be taught to upper-elementary-aged students. However, the real teaching and learning occurs through the teacher’s hands-on application of the curriculum with students. As developers of the curriculum, we encourage teachers to translate concepts and ideas in ways they know their students will understand, relate to, and engage with. Teachers might find their own ways to engage the group they are leading through the curriculum, as well as their own ways of individualizing the content for specific students.

Lesson Plan Format and Timing

The lesson plans are organized into one to three discrete skills. Each skill is first Explained, then Demonstrated, and finally Practiced. At the end of each lesson is a Transfer of Learning which is an additional practice activity that supports learning how to apply the skill in the real world. As noted above under Developmental Considerations, the full lesson plans were designed to fit into an approximate 50-minute period, however, they can be divided up into smaller time periods. For example, Lesson 1 takes approximately 45 minutes. The facilitator may wish to teach Skill 1 one day (approximately 20 minutes), Skill 2 a day or a couple of days later (approximately 15 minutes), and the Transfer of Learning on another following day (approximately 10 minutes). This may be useful if facilitators only have short periods of time available to facilitate this curriculum. If different skills within the same Lesson are taught at different times, it is optimal to try to at least teach each of the Skills and the Transfer of Learning within the same week. If that is not possible, it may be necessary to provide a brief review of what was taught previously to remind students of the previous skills they learned. See example Scope and Sequence at the end of the Introduction.



Cultural Considerations

We also encourage cultural adaptation of *Bounce Back for Classrooms*. Each community is unique. How connections are made for students about the content will look different from school to school. Incorporating community elders, parents, caregivers, community representatives, community voice, and local language and symbols all present an opportunity to incorporate your community's identity in the lesson plans. For example, in American Indian/Alaska Native communities working toward language revitalization, traditional language could be integrated into the curriculum as appropriate to promote tribal identity. This could include translating feelings vocabulary into the respective tribal language or interspersing language throughout the lesson plans. At times it may be appropriate to bring in a community

member to share stories of resilience and overcoming. Encourage students to identify coping skills including those they practice with family and community. Understanding the values of the children, families, and community within which the school serves and incorporating those values into the lessons can add additional meaning to the lessons being taught as well as ensuring the relevance of the lessons.

What to Do if a Child Discloses

Bounce Back for Classrooms is designed to teach and provide opportunities for practice of social skills. The intent is not to promote self-disclosure of the circumstances surrounding traumatic experiences, but this is an outcome that facilitators of the curriculum should be prepared to address. If a child discloses the details of a traumatic experience, facilitators must acknowledge the importance of what they tell us and respond in ways that are supportive.

Instruction during Lesson 1 encourages children to discuss any personal stories that come up for them in a one-on-one setting rather than sharing these stories in front of peers. In spite of these instructions, given the young age of the target audience for the curriculum, the disclosure of sensitive information in the group setting may still occur. If it does, we should redirect the conversation, while still validating the child's decision to tell us about it, and we should request a private conversation with the child after the group session has ended. For example, we could say, "Thank you for telling me. Let's talk a little more about that after lunch today, okay?"

Once we are conducting this one-on-one conversation, we should follow school protocols such as those concerning mandatory reporting. At the same time, it is very important that no matter how disturbing the child's disclosures may be, we should remain calm, be supportive, and believe the truth of what they are telling us. We should validate the child's experience and the action they took in telling us about it, and we should reassure them that the situation was/is not their fault. It can be helpful to say



something like, “That sounds like a very hard and painful situation; it’s not your fault, and you were right to tell me.”

Responding with shock or disbelief may send the child harmful messages, such as the following: “Telling my story wasn’t the right thing to do,” “Something is wrong with me” (which in turn may reinforce the child’s tendency to blame themselves for what has happened to them), and “I’m not safe, and no one is going to help me.” Overreacting emotionally to a child’s disclosures may also trigger feelings of fear, activating a child’s fight, flight, or freeze danger responses and disrupting their ability to discuss the situation.

We should keep confidentiality in mind in situations of disclosure in front of groups as well as in one-on-one conversations, only telling those who are required to know about any disclosures. And we should keep in mind our own role in relation to the child. We want to be supportive, but as school staff members, it is not our job to investigate the situation or to provide counseling. We should aim to listen, validate, and reassure students; follow school reporting protocols; and follow protocols related to sharing resources.

Referrals and Resources

Facilitators should expect that some students will need intervention or treatment for trauma beyond what can be offered within *Bounce Back for Classrooms*. We recommend that before implementing the curriculum, facilitators familiarize themselves with local mental health resources and consult with school counselors to prepare for situations in which children need more intensive support. Some indications that students may need more support include traumatic stress responses that are frequent and intense and that interfere with a child’s ability to learn and participate in classroom activities. Any student who discloses a traumatic experience during the course of *Bounce Back for Classrooms* lessons could likely benefit from continued assessment and intervention.



Trauma-informed strategies more intensive than those offered in *Bounce Back for Classrooms* might include a number of non-clinical interventions that are feasible in most school settings. For example, a self-regulation room to give students extra time, space, and tools to process difficult reactions may be helpful in promoting effective coping. A mentoring system where staff members check in and check out with students during the day may promote feelings of safety and trust, as well as allowing staff members to continuously assess students' needs and individualize any existing support plans in place.

A school counselor or mental health professional working in conjunction with the school would likely be the person teachers should consult with about students' more intensive trauma needs. School counselors may be able to administer screenings to help determine the need for more services by assessing for trauma exposure and reactions. *Bounce Back*, the evidence-based group treatment model from which this curriculum is derived, might make sense as a companion intervention to this one.

Bounce Back utilizes the skills taught in *Bounce Back for Classrooms*, but in a small group counseling setting with the addition of individual sessions designed to process the traumatic event. *Bounce Back* can be facilitated by a school counselor or mental health professional working in the school. It may also be necessary to refer a student to mental health services outside the school setting. The school counselor or onsite mental health professional would likely be the person to facilitate such referrals.

