## Implementing Trauma-Informed Practice in Kindergarten

by

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## Field Project

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# **Signature Page**

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#### **Abstract**

Trauma has been part of the human experience since the fall into sin. However, it has only been recently that educators along with counselors and psychologists have begun to use strategies in classroom to help students who have experienced trauma. The strategies assist students in knowing themselves and what they are capable of learning in the classroom. This project grew out of these strategies to help students who have suffered trauma to continue learning in the classroom and be successful in their academic pursuits. The project was approximately four weeks in length with four Kindergarteners. The teacher built a relationship with each student, used brain breaks, growth mindset, routines and procedures, and calming strategies to help students focus on the academic learning in the classroom. A Kindergarten assessment which included letters and sounds, numbers, and shapes was used as a pre and post assessment. All four students were highly proficient in letter names and sounds, and number identity and building numbers. These strategies have been shown to be successful with students who have experienced trauma, needing to be part of the classroom instruction in to future.

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#### **Chapter 1: Introduction**

### **Identify the Issue**

Trauma. It is not a new issue in our world. Trauma has been in the world since man's fall into sin. People who suffer from trauma often kept it secret and hidden from view. However, in the last 20 years, the study of the effects of trauma along with neuroscience have shown how trauma can affect the human body and brain. Cognitive science and social-emotional learning can inform teachers in the classroom to help students who struggle with trauma. Trauma can be defined as "an experience that threatens life or physical integrity and overwhelms the capacity to cope" (Erdman, Colker, & Winter, 2020, p. 4). Not only adults, but also children are at risk to experience trauma. In fact, the number of children who experience trauma is surprising. "More than two thirds of children reported at least one traumatic event by the age 16" (Substance Abuse and Mental Health Administration, 2015).

As a teacher, I have spent a good share of my time struggling with two things: classroom management and student learning. I couldn't figure out why students had issues with their behavior and learning concepts. There was a time when those students were written off as candidates for special education or to just to make it through the school year so they would move on. These students took a lot of energy and patience to work with in the classroom. However, recent research suggests that difficult student behavior may be the result of trauma (Craig, 2016; Erdman, et.al., 2020; Jennings, 2019).

I have spent the bulk of my teaching career on the Fort Apache Indian

Reservation in East Central Arizona. The reservation is roughly 2,627 square miles of forest, lakes, and range land. However, under the beauty of the reservation lies another

story of poverty, addiction and abuse among the members of the White Mountain Apache tribe (WMAT). Almost three quarters of families live 200% below the poverty line. The early mortality rate among WMAT members is at 81.2% while the state of Arizona is 54.8%. This mortality rate is caused in great measure to liver alcoholic disease and suicide (Arizona Department of Health Statistics, 2020).

MVR Seven Mile Elementary School was established in 1964 to serve the communities of Seven Mile, East Fork, Fort Apache, and neighborhoods in between; all part of the town of Whiteriver on the Fort Apache Indian Reservation. In the school year 2019-2020, there were approximately 450 students enrolled from Kindergarten through Grade 5. In all classrooms, teachers spend a lot of time with classroom management over teaching. It is not uncommon for students to be in the office for misbehavior and even suspended for behavior. As a Kindergarten teacher, I have had my share of interruptions in instruction with student misbehavior (e. g., talking out of turn, getting up and walking away from the lesson, and defiant behavior). I attributed a lot of student behaviors to not knowing how to behave or never being taught how to behave. In many homes, where addiction is present, chaos rules the household. There is very little parenting being done for the children. The children are often left to do as they please. The expectation, in school, is for them to conform to the 'proper behaviors' of the classroom. And they don't. These students create for themselves reputations as having bad behavior and hard to teach. Teachers cringe when they see that student's name on a student list for the new year. After attending a workshop on Social Emotional Development and trauma, I began to look at my situation with students differently. There was something behind the behaviors at school. And as a teacher, could I help put an end to those behaviors?

## **Importance of the Project**

Trauma has become the buzzword in education today. It began with the ACEs (Adverse Childhood Experiences) Study by the Center for Disease Control and Kaiser in 1995-1997. In this study, researchers asked participants about the childhood experiences they had had. They were also asked about their health at the time. The childhood experiences included domestic violence, abuse and neglect and substance abuse by a parent or caregiver. Each experience that a person selected became their ACE score. For example, if a person experienced domestic violence and abuse, the score would be two ACEs. Over two thirds of the participants had at least one ACE, and one in five reported three or more ACEs (CDC, 2020). Those who reported three or more ACEs tended to have more health or mental health issues. The study results reveal a frightening statistic: people who experience a number of ACEs in childhood have a higher risk of poor health, mental health issues, substance abuse, and even risky behavior. Traumatic events that are experienced in childhood can and do carry on through adulthood.

The original CDC/Kaiser study did not include any Native Americans. However, a separate ACES study was conducted with Native Americans and Alaskan Natives in 2003. Sixteen hundred tribal members from seven tribes participated. The percentage of participants with four or more ACES was 33%, more than twice that of the CDC ACEs study. Other studies have also found an increased rate of trauma among Native Americans (National Native Children's Trauma Center, 2016). Research has begun in the area of school closures due to COVID and their impact on levels of trauma. School closures and community lock downs may contribute to developing a greater learning gap among children living in poverty along with food insecurity (Phelps & Sperry, 2020; Van

Lancker & Parolin, 2020). Golberstein, Wen, and Miller (2020) added that the mental health of children may also be at risk due to shutdowns from COVID. The tribe was under lock down most of the summer of 2020. From March 2020 until the present time, the district has been closed to students. Students are in a virtual learning environment with hit or miss internet connections. It is quite possible that the children on the reservation may have experienced more trauma due to COVID, with lock downs and school closure.

There is no doubt that trauma exists among human beings in this world. For many years, it was a taboo subject. A person was just supposed to get on with life no matter what had happened to them whether in war, on the job, or at home. With the ACES Study and now COVID-19, trauma has become a reality in our communities, including schools.

Social-emotional learning (SEL) has become a recent emphasis in many schools (The Collaborative for Academic, Social, and Emotional Learning, 2021). Many children who have experienced trauma do not know how to interpret the signals their bodies send them which leads to poor regulation and naming feelings. Rather they may be in a state of constant fear and sadness, and may act out aggressively. SEL in the classroom can help students to label their emotions and talk about them, learn to regulate themselves, and feel more in control of themselves (Sprenger, 2020). This also supports learning in the classroom.

In summary, the ACES Study in the late 1990's brought trauma into the consciousness of the American public, especially considering the impacts on health in later life. Now the COVID-19 pandemic with lock-downs and shut-downs has also show in early studies the trauma experienced by children in America. One bright spot seems to

be the emphasis on Social Emotional Learning in schools to help those students who have experienced trauma.

Many families of Seven Mile students live in poverty. One hundred percent of the students receive Free and Reduced lunch. Poverty comes with a whole host of other issues including substance abuse, domestic violence, and students who are being raised by someone other than biological parents (Jensen, 2009). These issues can have a negative impact on our students. However, in the Apache community to speak of what happens in the home is not considered appropriate, especially to a teacher, so we do not have hard numbers of those students who have suffered trauma. Therefore, why not provide all students with a trauma-informed approach to learning? It means that a teacher has learned about trauma, has a toolbox of strategies to use in the classroom, and can help students build their regulations skills, perseverance, and still teach what students need to learn. "Providing the same social and emotional supports to all students in your classroom... will help ensure that no child who has experienced trauma will slip through the cracks. And every child will be enriched by your sensitive asset-building teaching" (Erdman, et al., 2020, p.27).

## **Purpose**

The purpose of this project is to implement a trauma-informed classroom to help students deal with the trauma they have experienced and to help students be successful in academics. My goal is to build just such a Kindergarten classroom where all students are welcomed and safe, and receive an all-important education while being supported with social-emotional strategies to build regulation, perseverance, and knowledge. This model will be implemented in my classroom and assessed for its impact on the students. Insight

gleaned from the study will be used to inform other teachers at Seven Mile Elementary School.

## **Chapter 2: Literature Review**

Trauma can happen to anyone, young or old. It could be a one-time occurrence such as a car accident, hurricane, or forest fire. Trauma, at its most extreme, occurs on a daily basis and lasts a long time (Erdman, et.al., 2020; Sorrels, 2018). We often think of 'the trauma of war.' However, trauma can also come from domestic violence, substance abuse, sexual abuse, neglect, and poverty (Erdman, et. al., 2020). Trauma can cause aggressive behavior in individuals including fighting, hitting, biting, outbursts, withdrawal, or daydreaming (Erdman, et. al., 2020). It is important to note that trauma affects all people differently. Not only does it depend on the traumatic experience, its duration, and impact, but also the person's temperament, support system, and genetics.

Trauma can be categorized as acute, chronic, complex, or vicarious. Acute trauma is that huge one- time event, like a natural disaster. Chronic trauma occurs over a period of time, but ends. Complex trauma can begin in early childhood and can last until adulthood. And lastly, vicarious trauma is caused by not experiencing the trauma first hand, but listening to traumatic events, sometimes over and over again (Erdman, et. al., 2020; Sorrels, 2018). One other type of trauma is developmental trauma. This trauma affects primarily children 0-5 years old. During this time in a child's life, their brain is developing at a rapid pace. The trauma experienced by children at this age can change the make-up of the child's brain. They have problems with cognitive skills, emotional regulation, and may have fears and trust issues (Van der Kolk, 2005).

Reactions to trauma can vary widely. Reactions are dependent on the perception of events. Demeanor and temperament of the individual also plays a part in the reaction to trauma. Even the age of the victim can have an effect on the reaction to trauma. The

young child often cannot verbalize the event but will act out with behaviors while the older child or adult may be able to talk about what happened. Additionally, the occurrence of traumatic events can have an impact on the victim. The more incidents of traumatic events, the more trauma the victim suffers from trauma.

Trauma in children can range from no obvious symptoms to aggressive behaviors. Children who are experiencing trauma may exhibit these behaviors: withdrawal, aggression, excessive crying, talking or playing out trauma, eating and sleeping issues, anxiety, phantom pains, difficulties separating from a parent, hyper-vigilance, and avoidance (Erdman, et. al., 2020). All of these can affect a child's performance in school. "Chronic trauma interferes with neuro-biological development and the capacity to integrate sensory, emotional and cognitive information into a cohesive whole," (Van der Kolk, 2005, p. 402). In other words, trauma can literally change the brain of a child. *The Heart of Learning and Teaching* (Wolpol et al., 2011), a document prepared by the Superintendent of Public Instruction of Washington State, documented specific learning issues traumatized children can face in the classroom:

- Difficulty forming relationships, regulate emotions, and learn the cognitive skills necessary to succeed academically.
- 2. Difficulty processing verbal/nonverbal and written academic information.
- 3. Trouble identifying and differentiating emotions.
- 4. Cannot fully develop a sense of self-care.
- 5. Poor executive functions.
- 6. Trouble with classroom transitions.
- 7. Misinterpreted and mislabeled behaviors caused by trauma.

Students who are dealing with trauma can quickly fall behind their peers in learning and emotional growth. This can add a whole other set of behaviors, including feelings of failure, disengagement from learning and dropping out of school.

Teachers have tremendous power to help a child who suffers from trauma. "The task is to teach with a pedagogy of awareness that provides an ongoing support for the needs of all learners," (Sifter, 2009, p.120). It is not the job of the teacher to diagnose or single out a child who could be suffering from trauma. Diagnosis should be left to psychologists or medical personnel. The teacher, on the other hand, should build her knowledge of trauma, its symptoms, and classroom strategies. In other words, the teacher should become familiar with a trauma-informed approach to teaching and learning. As mentioned earlier, a trauma-informed approach can benefit all children in the classroom (Erdman, et. al., 2020).

The literature offers a plethora of strategies that teachers can use to help a student who is suffering or have suffered from trauma. Williams and Scherrer (2017), perhaps, gave the best reason for the large number of strategies: "There is no one-size-fits-all approach to supporting children who experience trauma" (Williams & Scherrer, 2017, p. 4). Human beings are the reason for lack of a one-size fits-all approach. We are all different because of our genetics, temperament, social economic status, and rearing. And also, the fact that each person interprets a traumatic experience in a different way (Erdman, et. al., 2020; Van der Kolk, 2005). Dr. Bruce Perry, a leading psychologist who deals with children in trauma, puts it another way, "...the research on the most effective treatments to help child trauma victims might be accurately summed up this way: what works best is anything that increases the quality and number of relationships in the

child's life" (Perry & Szalavitz, 2017, p. 85). The Australian Childhood Foundation (2010) created a document, *Making Space for Learning*, to help teachers create a trauma-informed practice in the classroom. It includes 88 separate strategies that teachers can use to help students.

The literature agrees on four strategies that should be employed in the classroom, (ACF, 2010; Erdman, et. al., 2020; Jennings, 2019; NCTSN, 2008; Souers and Hall, 2019; Williams & Scherrer, 2017; Wolpol et. al., 2009).

- 1. Positive relationships with caring adult
- 2. Safety
- 3. Choices and options in daily tasks
- 4. Emotional regulation

### **Positive Relationships with Caring Adults**

The most important strategy a teacher can use is to build a relationship with all students. The relationship between a teacher and student involves, "Creating a safe environment and reassuring students that they are out of harm's way is essential to helping them learn both academically and social- emotional skills" (Williams & Scherrer, 2017, p. 9). Children who have experienced trauma may have had their trust broken by a trusted adult. They are leery of a new classroom and teacher. By building a caring relationship with a student, a teacher is helping in the healing process of those traumatized students (Ludy-Dobson & Perry, 2010; Williams & Scherrer, 2017; Wright, 2017). Research shows that for students who exhibit behaviors, like tantrums, excessive crying, angry outbursts in the classroom, a relationship with a caring teacher can mitigate those behaviors (Cook, et. al., 2017). Building that relationship must be the first step in helping a traumatized student begin to heal. It will take time and patience on the part of

the teacher, but it is well worth the time invested. For without that caring relationship, providing safety and security for the student, no learning can take place.

## **Safety**

Many children who have experienced trauma do not feel safe. In essence, they are "waiting for the other shoe to drop." They are ready to fight, take flight, or freeze at a moment's notice. It has already been stated that the teacher in the classroom creates a safe classroom environment for traumatized students in the classroom. The relationship a teacher builds with a student can bring a feeling of safety and security to that student. The teacher will want to build routines, procedures, and schedules that are consistent and predictable (Erdman et. al., 2020). If a change has to be made in routines or schedules, the teacher shares with students what will change and why the change is made. There are times when student anxiety and fears build up to a point where the student cannot cope with learning. The child needs a quiet place in the classroom to retreat for a time to calm themselves. Inside the classroom, the teacher creates a calming space with pillows, books, paper, crayons, and even a blanket where the child can stay until he is calm and ready to return to learning. That calming space may be under a designated table, in a corner, or even created by students (Erdman, et. al., 2020; Williams & Scherrer, 2017). Teachers can teach students to self-calm with breathing exercises that students can use when they become overwhelmed, frustrated, or angry (Cook, et. al., 2017; Erdman et. al.,2020; Wright, 2017).

#### **Choices and Options in Daily Tasks**

Students who are victims of trauma may feel they have no control over themselves and what they do. In most classrooms, students are required to do what the

teacher assigns. However, giving a student options can help him/her regain some control over his/her life. Choices could be as simple as choosing a book to read, where to work, how to present his work, choosing a learning game to play, or even creating a space in the classroom where students can stand or walk around before rejoining the class. The child benefits with feeling he/she has some control in his/her life (AFC, 2010; Craig, 2008; Erdman, et. al., 2020; Jennings, 2019).

## **Emotional Regulation**

When students come to school, they are in a new environment with new people that may trigger their fight, flight, and freeze response. Often these students do not know how to express their emotions in a positive way. These children may respond with externalizing behaviors (e.g. lash out at others or temper tantrums) or internalized behaviors (e.g. becoming silent, withdrawn). Teachers in the classroom help students recognize and label their emotions. The teacher becomes the model by expressing his/her emotions and showing students how to appropriately react (Erdman et. al., 2020). A teacher helps children understand their emotions by observing how their body feels and by helping them put those feelings into words. The teacher becomes an emotional coach, helping students to understand their emotions and how to handle them in the classroom (Craig, 2008; Cook et. al., 2017; Jennings, 2019; Tobin, 2016; Williams & Scherrer, 2017; Wright, 2017).

#### **School-wide Initiatives**

Schools have a responsibility to support students with trauma issues with school-wide initiatives that include professional development, positive reinforcement discipline, and support from professional counselors. Teachers are at the heart of the work with

traumatized students. Therefore, schools will prepare teachers with professional development on what trauma is, how it occurs in the classroom, and strategies teachers can use with these students. It is important that teachers receive this training, so they can provide informed support to those students.

A positive approach to school-wide discipline is another way to support students who are dealing with trauma. However, many schools still use a traditional discipline approach which does not offer support to students who have experienced trauma for coping and healing. Rather, traditional discipline models use coercion to control behaviors in the classroom. Coercion comes in the form of threats and punishments, the popular being suspension from school in order to get students to follow the rules of behavior. Not only does this affect students dealing with trauma but other students in the school. They can become less engaged, non-compliant, disrespectful towards teachers, and have poor school attendance (Jennings, 2019). To provide support for all students, schools can move away from traditional discipline models to ones that provide teaching and learning in positive behaviors and enhancing social emotional learning.

One such program is PBIS (Positive Behavior Intervention Supports). PBIS programs work on three to five expectations of behaviors that each student will attain. Those behaviors are taught and reinforced in the classroom. And rather than subjecting a student to punishment for failing in an expectation, the student is taught the expectation. PBIS has three tiers: tier one is for all students, tier two is for those students who are not successful within tier one, they need more support to learn the behaviors they need to be successful in school, and tier three is for those students who are most at risk and need

individual support (Center on PBIS: Positive Behavioral Interventions and Supports, 2021).

Counselors are an integral part of the school student support team especially when considering the needs of traumatized students (American School Counselor Association, 2016). Teachers are not equipped to deal with the students who have experienced trauma. Counselors can aid teachers by meeting with traumatized students, individually or in small groups, and working more closely on the specific needs of the students. Counselors also add another layer of support to students and teachers as they work with students. They can provide teachers with added classroom strategies specific to a particular student and become that extra trusted adult a student needs for stability in his/her life. The counselor is another person the child can trust to be there for them to help in troubled times and celebrate successes. Counselors are the members of the school who can advise a teacher who believes they have a student experiencing trauma.

#### **Educator Self - Care**

One last thing the literature is clear on—educator self- care (Jennings, 2019; Johnson, 2020; Wolpol, et. al., 2009). Working with a traumatized student can add to stress a teacher already experiences on a daily basis. Teachers are people persons. They have a true interest in their students and want the best for them. Teachers care. When a student dealing with trauma enters the classroom, the caring begins. "Constant demand to care for others, which are a daily part of our jobs as educators, may cause fatigue, emotional stress, or apathy" (Wolpol et al., 2009, p.40). Teachers may experience several different effects to the added stress: secondary trauma, compassion fatigue, and burn out (Wolpol et al., 2009; Johnson, 2020). Secondary trauma occurs when the teacher hears so

many traumatic stories from students that they begin to suffer from the symptoms of trauma. With compassion fatigue, a teacher overuses her coping skills in dealing with a student with trauma, becoming short tempered and worn out. And lastly there is burn out. The teacher simply becomes physically and mentally exhausted from dealing with trauma in the classroom.

Self-care is needed to help teachers avoid the negative personal symptoms that dealing with traumatized students can bring. Self-care can take a variety of forms, including journaling, physical recreation, sleep and rest, and good nutrition (Craig, 2016; Jennings, 2019; Johnson, 2020; Wolpol et al., 2009). The key to self-care is to know yourself and recognize when the symptoms of fatigue, vicarious trauma, and burn-out may be harming you professionally and personally.

## **Summary**

There is no doubt that trauma is real. It is all around us. The trauma that enters schools with students can have a lifetime effect on the student, the teacher, and the school itself. Therefore, schools must do all they can to support students with teachers who are trauma-informed; schools that are aware and ready to work with traumatized students, and teachers who care just not for the student, but also for themselves, so they can continue in their field.

#### **Chapter 3: Implementation**

#### Introduction

Trauma in children is real and can be devastating to academic learning in the classroom. Teachers, however, can use strategies that assist the traumatized child feel safe and secure in the classroom. By using these strategies, teachers can increase the likelihood that students who have experienced trauma will do better academically and behaviorally. The purpose of this project is to implement trauma-informed classroom strategies outlined in the literature to help students deal with trauma they have experience and be successful in academics. My goal is to build just such a Kindergarten classroom where all students are welcome and safe, receive an all -important education, and are supported with social-emotional strategies to build regulation, perseverance, and knowledge. This model will be implemented in my classroom and assessed for its impact on the students.

#### **Procedures**

## Subjects

The Kindergarten class consisted of thirteen students, six boys and seven girls. All the students are members of the White Mountain Apache Tribe. Many of these students live in poverty. Children, ages 0-12, who live in poverty is 53.1%. Students may also live in homes where alcohol and drug abuse are prevalent. Four of the students had been part of the virtual class since the beginning of school. The other students were from other teachers. Parents had the choice to send children to school or continue with virtual learning which led to an amalgamated classroom.

Parent permissions were given for four students, so only their results are reported here. Two of the students had been in the class since starting school is August. The other two students came from kindergarten colleagues who remained virtual. Each of these students began the school year in the virtual setting and did not enter the school building until February, 2021. Along with this strange school situation, the students were exposed to multiple community lockdowns due to COVID19. This alone could have led to trauma. However, each student was also exposed to other traumas. Student 1 came from a single parent home. Students 3 and 4 came from homes where alcohol was abused. Student 2 appears to have come from a good home; however, there was a time during the school year where a parent was unemployed due to COVID19 closures.

#### **Interventions**

To mediate student trauma, classroom strategies aligned with the district's PBIS initiative were employed. The strategies used in the classroom were used with the class as a whole and retaught on an individual basis and need. Each strategy aligns with the four pillars of PBIS: Be Safe, Excellence, Be Responsible, and Be Respectful. It should be noted that none of the students were clients of the HEDY program, so their intervention was not needed for this study.

Routines and Procedures. Routines and procedures began with breakfast.

Students were welcomed to school at breakfast on a daily basis. This also became an important time to build relationships through conversations with students as they ate their breakfast. In the classroom, a schedule was established (Appendix A). Students were told daily about what would happen during each class session. If changes needed to be made, the teacher explained the change and why it was done. Routines were also established for

using the bathroom, walking in a line, and using the playground equipment. One routine which also served as a calming strategy was called, "Being Busy." Students could not move around the classroom or sit together in groups of learners, as is common in kindergarten classrooms. The teacher could not work with all students at once, including answering questions. So, the students were taught that when they had a question or needed help and the teacher was helping someone else to take out a wipe off activity sheet, journal book, Journey's Book, or manipulatives and set aside their work until the teacher could get to them. Also, once students were broken into groups, the same "Being Busy" strategy went into effect.

Responsibility. This year, because of COVID, classroom responsibilities were very important. Students did not have opportunities to move around the classroom to get materials. All the materials were at the student's table. The materials included a pencil box with pencils, eraser, crayons, scissor, glue and a box that had a picture dictionary, Journey's reading book, number charts, activity pages with plastic covers, and manipulatives. These are a lot for a kindergarten student to have at any one time. Students were taught what went in the pencil box and materials box. Then students were taught to clean them daily to get rid of any trash and be sure materials were in the correct place. Students were required to clean their table, chair, and materials at the end of each day. They were taught how to use the cleaning cloths to do the job.

Responsibility extended to classwork, too. Each student had his/her own work to complete during the school day. Responsibility to schoolwork included being neat, taking one's time, and completing the work. And lastly, responsibility extended to other people in the classroom and others in the school. Students were shown how to help their

tablemate with classwork, care for students hurt on the playground, and remind other students of the rules, especially on the playground.

Accommodation. Accommodations were made for students as relationships were being built, anecdotal notes on teacher observations, and informal assessments. Because students came from a virtual setting, where they may not have attended to instruction or lacked a good internet connection, it became important to provide accommodations to work from student strengths and improve weaknesses. English Language Arts (ELA) groupings were decided upon letter and sound knowledge. One group worked only on letters and sounds. Another group began working on beginning letters sounds in words and progressed to reading emergent text. By the time study was ending, there were a total of four ELA groups in the classroom. In math, groups were defined by how many numbers, 0-20, a student could name and show how many. Two groups were made: one group working on teen numbers and the other working on numbers 0-10. Both groups worked on subtraction and addition at their level. A flexible grouping model was used where students could move between groups based on teacher observation and informal assessment.

Mindset. The classroom was set up with a Growth Mindset in mind. The virtual setting had been difficult for students, especially those who have suffered from trauma. For the teacher, it meant being positive and encouraging to students. It also meant explaining to students how their brains grow and how mistakes grow the brain. Students were asked daily 'what do we do with mistakes?' Their response was 'Fix it.' Students were taught about the Power of Yet; that they may not to be able to do something 'yet,' but with practice they would be able to do it. The Growth Mindset was taught to the

whole class, however individual students were reminded of Growth Mindset as the teacher worked with them individually.

Calming Strategies. Due to the constraints of COVID in the district, a calming center could not be set up in the classroom. That being said, students were taught how to use the materials to calm themselves. Each student was not allowed to move around the classroom. They were required to sit at their table with all their materials. The teacher could not get to a student who was having issues with their work at a moment's notice, especially when working with a group. Students were taught to take something else out when they were frustrated with their work as was mentioned before and "Be Busy."

Some students needed to be reminded to set aside what was frustrating them while others were able to set aside and find something else to do without prompting. Another strategy used was deep breaths. Students were taught to take in a deep breath, hold it for four seconds, and then let it out for four seconds.

**Brain Breaks.** Brain breaks became a must in a classroom where movement was restricted. They become part of the routine in the classroom. When it seemed that students had lost the flow of the lesson, became lethargic, or just plain sleepy, a brain break happened. Students would hop, touch their toes, touch the ceiling, deep knee bends, and any exercise the students could come up with. We even had a few jogging-in-place races. Brain breaks were a part of the day, but not a routine because they were dependent on the students in the classroom and their need.

**Be Safe.** Many of the strategies used in being responsible also, in our COVID year, were meant to create a sickness-free environment. As stated earlier, students sat at a table divided in half by a plexiglass divider. Students could interact through the divider,

but not sit side by side. Movement was restricted in the classroom, but it was still important for students to sit on their chairs. Students were taught to sit in their chairs, no leaning back, to the side, etc. When COVID restrictions were lifted slightly, the students were able to move their chairs to be closer to the learning. They were taught to push or drag their chairs, not carry, so that they would not hit anyone or fall themselves. Students were taught playground rules, so they could be safe on the playground (i.e., down the slide, not up, up the ladders not down, playground benches for sitting, not climbing). Students were encouraged to remind their classmates if they saw the rules being broken. Students were taught to be safe in the hallways at school by walking. In the cafeteria, they were expected to walk and stand quietly while waiting to get their food. The whole class was taught to be safe in the classroom, hallways, and cafeteria. When needed, individual students were given another dose of instruction.

## Assessments

## Attendance

It was important that students were in school every day. In a study by Romero and Lee (2007), attendance was shown to be an important factor in student achievement. Attendance was taken twice a day, once in the morning and then again in the afternoon. Students who are not in school cannot learn what is being taught in the classroom, including the trauma-informed strategies. "Chronic absenteeism means missing 10% of school year for any reason" (Balfanz & Burnes, 2012). In a school year with 180 days, that is at least 18 days where a student is absent. That is 18 or more days of missed content in Math and English Language Arts to be ready for 1st grade content. In my class, I wanted students to be in class at least 80% of the year or better to reap the full

benefits of the activities of the school day. This study used the attendance from the attendance book and the master attendance from the school office to determine which students attended school faithfully.

#### Observational Checklist

The trauma-informed strategies are intended to help a child feel secure and safe in a classroom environment. Not only do they learn academically, but students also learn behavioral objectives like, talking quietly, asking for help, doing their own work, etc.

These are assessed through an observational checklist (see Appendix B). The goal is for students to score a consistent 3 or 4 in all eight behaviors the teacher observed. Along with the checklist, teacher observation is written down in anecdotal notes. These notes detail students' progress in the classroom and where they need further assistance.

Informal assessments, setting changes, grouping adjustments are also noted in the anecdotal records.

#### Academic Assessments

And lastly, the Kindergarten Assessment used focused on letters/sounds, number identity, building numbers, sight words, and shapes. The assessment is given in stages first letters, then sounds, sight words, etc. It was given one on one to each student in the class.

#### **Results**

The study collected qualitative and quantitative data on students as they progress through the in-person school year. Quantitative data was collected through the observational checklist (Appendix B) and anecdotal notes. The Kindergarten Assessment served as the qualitative data. Thirteen students were part of the in-person kindergarten

class; however, only four parents responded to the Consent to be in the study. What follows is a review of the data gathered from the students in the study.

#### Academic Assessment

The Kindergarten Assessment (Appendix C) was used at the end of each quarter to gauge where students were in their knowledge of letters, sounds, numbers, building numbers, sight words, and shapes. Due to the ongoing pandemic and virtual nature of teaching, the Kindergarten team of Seven Mile Elementary School chose to focus on letters, sounds, numbers, 0-20, and building numbers as being critical skills for moving to First Grade. This became the data that was reported to the district as part of an incentive for the school year. However, one change was made as the year ended, the teachers, working in their grade level groups, could use data from the beginning of the school year to determine maximum growth of students. Raw percentages were converted into a proficiency label using the district proficiency scale (Table 1). For this study, the data was expressed using the same proficiency scale, using data from First and Fourth

Table 1: WUSD Proficiency Scale

Quarters in all

Proficiency Label	Percentages
Highly Proficient (HP)	90-100%
Proficient(P)	70-89%
Partially Proficient	50-69%
(PP)	
Minimally Proficient	0-49%
(MP)	

the skills that were a priority for the Kindergarten of Seven Mile Elementary School.

Tables 2 and 3 show the results of the Kindergarten Assessment for the First and Fourth quarters.

Quarter	1 <sup>st</sup>	4 <sup>th</sup>	1 <sup>st</sup>	4 <sup>th</sup>
Student	Letters	Letters	Sounds (26)	Sounds (26)
	(52)	(52)		
1	MP	HP	MP	HP
2	MP	HP	MP	P
2	1711	111	1 <b>V11</b>	1
3	MP	HP	MP	P
4	MP	P	MP	PP

Table 2: ELA Data from Kindergarten Assessment 1st and 4th Quarters

Table 3:Math Data from Kindergarten Assessments 1st and 4th Quarters

Quarter	1 <sup>st</sup>	4 <sup>th</sup>	1 <sup>st</sup>	4 <sup>th</sup>
Student	Identify	Identify	Build	Build
	Number	Number	Number	Number
	(0-20)	(0-20)	(4#)	(4#)
1	P	P	P	HP
2	PP	P	PP	HP
3	P	HP	P	HP
4	MP	MP	HP	HP

The results of the Kindergarten Assessment show that students improved in their ELA and Math skills from the First Quarter to the Fourth Quarter. It also shows that students who were already Proficient in an area were able to maintain that level through the end of the school year. All the students were in the higher levels of the proficiency scale.

#### Observational Checklist

The Observational Checklist (Appendix B) was used as a measure of behavior improvement in the classroom. Anecdotal notes were used to complete the checklist daily and weekly. Through-out the third and fourth quarters teacher would daily write down observations of students at work and during academic lessons. These observations included behaviors exhibited by the student at those times. Observations took place when students were at work and measured how the student engaged with assignments, what

they did when confronted with frustration and failure, and how they responded to assistance. The observations also took into account the interventions by the teacher by documenting the intervention and noting whether it was successful and if students can use it themselves. Anecdotal notes were also used as a guide of how students were doing academically in the classroom, and who needed extra help. These notes were reviewed each week to determine where the student would place on the Observational Checklist. Each item on the checklist was then marked for the week as to the behaviors noted in the anecdotal notes based on the observations of the teacher. The data gathered in the Observational Checklist was then averaged first by student and then by competency of all the students in the study for the final outcomes shown in Table 4.

Students were reluctant to talk about their feelings unless they were asked direct questions and then with little or no detail. The table shows the average scores for each sentence. The traditional classroom expectations, talking quietly, getting along with others, and following directions were all consistent behaviors. The average score on emotions and body awareness were consistently a 2 (rarely) (see table 4). Students would

Table 4: Observational Checklist Average Scores

Observational Checklist	Avg.
	Score
I can identify my feelings and how my body	2
feels.	
I can talk about how I feel.	2
I can use the breathing strategy on my own,	2
I can use a quiet voice to talk	4
I can get along with others	4
I can follow directions.	4
I can work on my own.	4

exhibit emotions, but were never forthcoming in talking about them. Only one student was able to use a breathing strategy on his own in a consistent fashion. The rest of the

group did not use the breathing strategy on their own; however, they would participate in group breathing exercises.

#### Attendance

Students who are not in school regularly miss out on so much, especially those who have had traumatic experiences. Students who have attendance of 80% or better are those who not only get the academic learning (Balfanz & Burnes, 2012), but strategies to help them be successful. Student attendance was taken twice a day, once in the morning and the other in the afternoon. Table 5 shows the percentages for the students in the study. Collecting daily attendance began February 22, 2021 and ended on May 28, 2021. The average attendance rate of 92% is 12 percentage point above the expected 80%.

Table 5: Student Percentage of Attendance in School

Student	% of
	Attendance
1	91%
2	95%
3	87%
4	93%

## **Summary**

Considering the school year of 2020/2021 where students were virtual a majority of the year, the data looks very good. All the students performed at the highest levels of the proficiency scale in ELA and Math; they were either; proficient or highly proficient. The attendance showed that students were in school an average of 92%. This suggests that being in school to learn with trauma-informed strategies may help all students, especially those who have experienced trauma.

Students behaviors also improved to consistent. Improved behaviors, suggest, that students felt safe and valued in the classroom. Students were not comfortable talking

about their emotions and how their bodies felt. It was a rarity that a student expressed an emotion and how their body felt. The fact that students did not talk about their emotions suggests they needed more practice and modeling from the teacher.

The breathing strategy was introduced and practiced in a whole group manner, but students did not use it on their own. On the Observational Checklist the score for the breathing strategy averaged 2 or rarely. This suggests that students needed more practice and encouragement to use the strategy on their own until it became a habit.

#### **Chapter IV: Reflective Essay**

### Introduction

Trauma is a real occurrence in today's classroom. Implementing trauma-informed strategies is one way to help students who have been affected by trauma. The purpose of this study was to determine if students who were taught using trauma-informed strategies would improve their behavior in the classroom and be successful in their academic learning.

### **Conclusions**

The data collected showed that using trauma-informed strategies with all students, especially those who have experienced trauma, may improve student behaviors in the classroom. The use of these strategies also showed that students may perform at high levels in their academic learning.

One of the most significant strategies used was relationship building. This strategy not only allowed teacher and student to know each other in a personal sense, but also created the safe and accepting atmosphere of the classroom. The attendance rate also bore this out. The students in this study were in school an average of 92% of the time from February to end of May. Students wanted to be at school and wanted to learn.

Another strategy that proved powerful was routine and procedures. Students knew what was going to happen in the school day. And if it did change, they were reminded of what would be coming in the day. Routines and procedures provided security for the students that there would be no surprises to the learning day. Routines and procedures are another way to provide safety and security for the students, so they can concentrate their time on learning.

One of the best strategies initiated was accommodations. By creating groups of like students to work on ELA or Math, students were not struggling to keep up or bored with learning materials. Each student got the academics learning they needed at their level to move forward and be successful. Students within each group were successful in that they grew as learners. The students in this study reaped the benefits from routines and procedures along with accommodations. In ELA, 100% of students scored highly proficient or proficient in letter names and 75% or students scored proficient in letter sounds. While in Math, students scored 100% in building numbers and 75% of students scored proficient or highly proficient in naming numbers 0-20.

And lastly, brain breaks were an essential piece of the classroom routine.

Students did not have much freedom to move to around the classroom due to COVID protocols. To get up and get moving with brain breaks gave students to ability to move and refresh their bodies and brains. Also, it was fun. Brain breaks could happen at any moment during the school day, even in the middle of a lesson. It was dependent on the students. If they seemed sluggish and unresponsive during a lesson, a brain break would happen. When students had been sitting and working for a long time, a brain break would happen. It was also an activity that was energizing for the teacher. The brain break proved to be a welcome and enjoyable activity for the whole classroom to engage in. Not only did brain break help students get students moving, it also helped with behaviors. All the students in the study averaged a 4, or consistent, in behaviors as talking quietly, doing their own work, following directions, asking for help, and getting along with each other.

One area that was not successful was that of regulating emotions. This group of students did not warm up to the idea of talking about their emotions and how it makes

their body feel. There was no doubt there were emotions in the classroom and on the playground. When students had their emotional moment, they had their emotion and quickly moved on to the next thing.

#### Limitations

Several limitations came up in the study that could have altered the outcomes of the study. First was virtual and in-person learning. The students went from a virtual setting to in-person setting at the end of February 2021. The importance of in-person instruction cannot be discounted as a factor in how well the students did in Math and English Language Arts. It is virtually impossible to tell which was a bigger factor to students' learning, the trauma-informed strategies or the in-person instruction.

The next limitation had to do with time. The study only lasted approximately a month. For students with trauma, it takes longer to really build and solidify such strategies as mindset, calming strategies, and talking about feelings because of the trauma they have suffered. There just was not the time to make these strategies a habit with students.

And lastly, the third limitation was COVID protocols in the classroom. Students did not have the ability to move around as is normal in a classroom. Making choices and having options are hampered when one cannot move around to work with others or find a quiet work space.

#### **Recommendations**

Trauma-informed strategies were not a tremendous change to the classroom. Most of the strategies used were what effective teachers do on a daily basis. Students really

responded to the relationship building, accommodations, and routines and procedures. All of which aided students in learning and behavior.

Recommendation One: Teachers need to give student emotional regulation more attention.

The students did not care to share their emotions verbally with the teacher or anyone else. The emotions were there, but it took a lot to get them to talk about them. Students may know their emotions but may not have the words to express them or may lack the confidence to talk about them. Teachers should provide more practice in emotions; what they are and how they make our bodies feel. Acting out emotions as a group can help students feel more secure in their knowledge of what emotions are. A teacher should model her own emotions and tell students how it makes her body feel. This modeling will help students see that it is okay to talk about their emotions.

## Recommendation Two: Mindset needs to be integrated into the school day.

Students need to learn from the first day that, 'I can,' no matter what the subject or activity. Such books as *You Can Do It, Curious George*, and *The Little Train that Could* show students the importance of having confidence when doing something new, and the story, *Leo the Late Bloomer*, show students the importance of the word, 'yet.' There is always practice involved to learn something new. Students need to be reminded of the growth mindset on a daily basis, especially when they are challenged.

Recommendation Three: Teachers should employ consistency and fidelity when using trauma-informed strategies in the classroom.

Each strategy has to be taught and retaught, reviewed and reminded, every day in the same way. With consistency and fidelity, students will hear the same message daily. That will alleviate any question of what is expected. It will bring an added feeling of safety and security to students who have experienced trauma. The consistency and fidelity will ensure that students learn the strategies and will be able to use these strategies on their own.

#### Recommendation Four: Teachers need training in the trauma-informed strategies.

Yes, these strategies are what effective teachers use in their classrooms. However, teachers also need to know how these strategies help students who have suffered from trauma. Teachers need training on trauma-informed practice, so they can use the strategies effectively to help all students, especially those students who suffer from trauma. Training should be from a trauma-informed specialist such as a school counselor or local psychologist. Trauma-informed practice training should take place through- out the school year with new strategies added as needed.

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#### Appendix A

#### Ms. Lewiston's Kinder Class Schedule

8:30-9:00am Breakfast 9:00-11:00am ELA

Letters/Sounds

Writing
Sight Words
Groups

11:00-11:30am Ancillary 11:30-12:30pm Lunch/Recess 12:30-1:00pm Read Aloud

1:00-1:30pm Read Aloud Activity

1:30-2:30pm Math

Fluency- Counting, Identify Shapes, Identify numbers

Groups Recess

2:30-2:45pm Recess 2:45-3:10pm Wrap-up 3:10-3:20pm Clean up and Sanitize

3:20pm Clean up and Sanitize
3:20pm Pick- ups picked up
3:30pm Out to the buses

## Appendix B

## Observation Checklist

Student Name_	 SY	

Key- 4- Consistent, 3- Sometimes, 2-Rarely, 1-Not at all

Key	<u>/- 4- (</u>	onsis	tent, .	<u> 3- Soi</u>	neum	es, 2	-Kare	1y, 1-	Not at all
Dates									Notes
I can identify my feelings and how my body feels.									
I can talk about how I feel.									
I can use the breathing strategy on my own.									
I can use a quiet voice to talk.									
I can ask for help when I need it.									
I can get along with others.									
I can follow directions.									
I can my work on my own.									

Appendix C

## Kindergarten Assessment

Student Name	
	Letter Names

Letter	Qrt. 1	Qrt. 2	Qrt. 3	Qrt. 4	Letter	Qrt. 1	Qrt. 2	Qrt. 3	Qrt.4
A					a				
В					ь				
С					c				
D					d				
Е					e				
F					f				
G					g				
Н					h				
I					i				
J					j				
K					k				
L					1				
M					m				
N					n				
О					o				
P					p				
Q					q				
R					r				
S					S				
T					t				
U					u				
V					v				
W					W				
X					X				
Y					у				
Z					Z				

Student	Name		
OUNCELL	Name		

### Letter Sounds

Letter	Qrt. 1	Qrt. 2	Qrt. 3	Qrt. 4
a				
b				
c				
d				
e				
f				
g				
h				
i				
j				
k				
1				
m				
n				
o				
p				
q				
r				
S				
t				
u				
v				
W				
X				
у				
Z				

Student Name	
Student Manie	

## Sight Words

Word	Qrt. 1	Qrt 2	Qrt. 3	Qrt. 4
Ι				
see				
can				
the				
like				
a				
in				
it				
he				
she				
you				
we				

Student Name	
--------------	--

# Identify Shapes

Shape	Qrt. 1	Qrt. 2	Qrt. 3	Qrt. 4
Circle				
Triangle				
Rectangle				
Square				
Oval				
Hexagon				
Trapezoid				
Rhombus				
Cone				
Cube				
Sphere				
Cylinder				

Student Name	
Student Name	

# Number Identification

Number	Qrt. 1	Qrt. 2	Qrt. 3	Qrt. 4
0				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

## **Oral Counting**

Qrt.1	Ort.2	Qrt.3	Ort.4
Q1t.1	Q1t.2	Q11.J	Q11.T

<u>Matching Numbers</u>
(Using blocks, cubes, or fingers, tell how many a shown number is)

Number	Qrt. 1	Qrt. 2	Qrt. 3	Qrt.4
0				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				