Community Roadmap to Bring Healing-Centered Schools to the Bronx

A PROJECT OF THE HEALING-CENTERED SCHOOLS WORKING GROUP

Authored by the Healing-Centered Schools Working Group, a coalition of parents, students, advocates, educators, and mental health providers working to bring healing-centered practices to all Bronx schools.
Acknowledgements

The Healing-Centered Schools Working Group would like to thank all those who made this Roadmap possible. Thank you to Vibrant Emotional Health’s Coordinated Children’s Service Initiative for giving our Working Group a home and a place to grow. Thank you to the countless organizers and leaders, particularly Black leaders and non-Black leaders of color, who built the foundations of this work and have been pushing for many of these changes for decades. Thank you to the many Bronx schools, mental health practitioners, and education experts who allowed us to observe their practices and who helped us grow our knowledge. Above all, thank you to the countless Bronx students, parents/caregivers, and educators who contributed to this effort and inspired this work.

A special thank you to the Working Group members and partner organizations who authored this document:

Editor
Katrina Feldkamp, Esq., Equal Justice Works Fellow Sponsored by the Arnold & Porter Foundation, Bronx Legal Services

Contributing Authors
Nancy Bedard, Staff Attorney, Brooklyn Legal Services
Grisel Cardona, Parent Leader, New Settlement Apartments Parent Action Committee
Huiying B. Chan, Research and Policy Analyst, Education Justice Research and Organizing Collaborative at the NYU Metro Center
Venus Cooper, LMSW
Cruz Fuksman, LMSW, Community Liaison, New York Psychotherapy & Counseling Center
Tanesha Grant, CEO of Parents Supporting Parents New York, Inc.
Rasheedah Harris, Parent Leader & Advocate
Perpetua Igweatu, LMSW
Ayishah Irvin, PTA Co-President of Teacher’s College Community School, District 5 CEC Member, Chairperson of D5 DLT and ECC Secretary
Rey-Anthony LaRuy, Community Organizer for Bridge Builders Community Partnership
Kendall Lewis
Nelson Mar, Esq., Senior Staff Attorney, Bronx Legal Services
Anthony Otten, Sr. Outreach & Marketing Specialist, New York Psychotherapy & Counseling Center
Mayra Perez Hill, Students in Temporary Housing Community Coordinator
Destiny Quinones, Healing-Centered Schools Working Group Outreach Chair
Theresa Siame-Roberts, Parent Advocate for District 11
Dana M. Suozzi, Psy.D.
Julianne Toce
RueZalia Watkins, Education Services Specialist, Vibrant Emotional Health
Chauncy Young, Director, New Settlement Apartments Parent Action Committee
Contributing Partners

Dignity in Schools Campaign-New York

Thank you to Bronx Legal Services interns Laetitia Krisel and Nicole M. Kaufman for their thorough proofreading and citation support.
A Message from the Healing-Centered Schools Working Group

We are a coalition of Bronx parents, students, educators, mental health providers, and advocates who believe that every school-based interaction with students and parents/caregivers should be healing-centered. We have witnessed the impact of trauma on our communities and our students’ ability to learn, and we have seen how our students suffer when schools lack the tools to respond to trauma. We believe that a healing-centered approach to learning will make Bronx schools safer and more supportive environments for all students, not just those who have been impacted by trauma. We thank you for taking the time to read our Community Roadmap to Bring Healing-Centered Schools to the Bronx. We hope it will be a useful tool for you to advance educational equity in your own corner of the Bronx.

If you have any questions about the materials included in this document, or would like support advocating for healing-centered practices in your school, you can reach us at (917) 661-4529 or bxhealingcenteredschools@lsnyc.org.
Executive Summary

Bronx students are more likely than almost any other students to experience childhood trauma and its detrimental impacts on learning. One in four children in classrooms nationwide has been exposed to some form of childhood trauma, and children who live below the poverty level are more likely to experience three or more adverse childhood experiences.¹ Because the Bronx has one of the highest rates of childhood poverty in the country, our students face disproportionately high levels of childhood trauma. Students experience childhood trauma in their communities, in their homes, in their personal relationships, and in the institutions with which they interact. In addition to the long history of trauma that impacts Bronx students, our students and families are now grappling with the trauma of the COVID-19 pandemic and national attention to police killings of and state-sanctioned violence against Black people. These traumatic experiences, rooted in systemic oppression, impact brain functioning, development, self-regulation skills, the ability to form healthy relationships, and students’ ability to learn. In the long term, these experiences can impact students’ educational outcomes, employment stability, physical health, and criminal justice involvement.

For some students, schools are safe havens. For many other students, schools are sites of trauma and re-traumatization. Bronx students and parents/caregivers report that punitive responses to behavior, including police intervention, frequent suspensions, and calls to EMS; school-based racial trauma and other forms of discrimination; school or classroom dynamics that replicate the dynamics of past trauma; and staff responses that minimize or neglect students’ academic and social emotional needs often exacerbate existing trauma or lead to new trauma.

The Healing-Centered Schools Working Group believes that schools should be sites of healing, not trauma or re-traumatization. When Bronx schools are not equipped to understand trauma and its impacts, staff are more likely to create traumatizing and re-traumatizing dynamics that make it difficult for students to learn, form relationships, and succeed in life. But schools that build a culture of healing can reverse the effects of trauma, boost academic engagement, and promote social emotional well-being.

Healing-Centered Schools are the Solution

The Healing-Centered Schools Working Group believes that Bronx schools can address trauma and trauma’s impact on learning by adopted a healing-centered framework for education. A healing-centered school is one that takes affirmative steps to ensure that all students, staff, and parents/caregivers feel safe, supported, and seen — a necessary ingredient

for learning and for a strong school community. When our students are given the space to heal, to learn, and to exist in community with one another, they are able to grow their strengths and build a foundation for success.

Healing-centered educational practices have been proven to produce positive outcomes for students' social emotional well-being, staff wellness, parent/caregiver trust, and school culture. The Healing-Centered Schools Working Group studied many schools and school districts that adopted these practices, including the Schenectady City School District (SCSD). SCSD adopted a citywide trauma-sensitive program that involved greater funding for social workers, adoption of mindfulness spaces and practices, and whole-scale changes to their discipline and safety systems. As part of their changes to safety and discipline, SCSD removed all school resource officers from their schools, hired respected community members to provide support and de-escalation in the event of student conflict, and adopted a suspension diversion program that connects students to long-term mental health resources. Four years after implementing these changes, SCSD has seen one-third fewer conflicts between students, a reduced dropout rate, and a reduction in the amount of missed instructional time caused by suspensions.

Key Recommendations for Creating Healing-Centered Schools

This Roadmap offers a menu of changes that schools can make to become more supportive and healing-centered. These recommendations were compiled through research by and discussions with Bronx students, parents/caregivers, educators, advocates, and service providers. Key recommendations include:

- Steps you can take to remove punitive, criminalizing school structures that undermine healing including School Safety Agents, metal detectors, and criminalizing language;

- Best practices to advance anti-racism and equity through Culturally Responsive-Sustaining Education (CRSE), including anti-bias trainings, restorative justice practices, and steps to center student and family voice in decision-making;

- Individual healing-centered responses to behavior, including best practices for empathetically re-directing students who engage in disruptive behavior, strategies to help staff understand the roots of challenging behavior, and preventive strategies that staff can use to reduce disruptive behavior, promote students’ social emotional well-being, and create an atmosphere that supports learning;

- School-wide and district-wide healing-centered responses to behavior, including recommendations for adopting a suspension diversion program;

---

• Specific practices schools can use to amplify student voice and promote staff wellness;

• Targeted strategies to support students with specific needs related to bullying, behavioral crises, or housing instability; and

• Best practices for cultivating healing-centered school-based partnerships, including partnerships with mental health clinics and Students in Temporary Housing staff.

Best Practices for Whole-School Transformation

This Roadmap also offers best practices for launching the whole-school transformational change that is necessary to create a healing-centered environment. It will provide you with advice for facilitating early conversations, strategies to build buy-in, and best practices for implementation, ongoing assessment, and continued growth. Bronx students, parents/caregivers, and educators can all make use of these strategies to advance change. Here are the key elements of whole-school change featured in this Roadmap:

• Build support among all members of the school community. Principals, Superintendents, and the Executive Superintendent can provide support by ensuring schools have time to complete necessary changes, promoting healing-centered messaging, and facilitating access to resources. Staff, students, and parents/caregivers should contribute their voice to the Healing-Centered Plan, support implementation, and help build buy-in.

• Form a Transformation Team, a team comprised of members from all aspects of the school community, to start conversations about the healing-centered transformation, assess your school community’s needs, formulate a Healing-Centered Plan in collaboration with the school community, and implement and assess that plan.

• Transformation Team should collaborate with School Leadership Teams and school communities to assess how school practices and culture are advancing or undermining the seven Healing-Centered Principles. One principle says, “All students, families, and staff should feel physically, psychologically, and emotionally safe in our schools.”

• Educate all staff members about trauma, its impact on learning and behavior, the importance of student safety and well-being, and healing-centered practices that will help staff support student safety and well-being. Community education should also be made available to students and parents/caregivers.

We Need Healing-Centered Education Now

For decades, countless Bronx students have attended schools that punished or neglected their trauma-related needs. Our students’ social emotional well-being and academic outcomes have suffered as a result. School staff and parents/caregivers have experienced
vicarious trauma as they struggled to provide support in an educational environment that too often inflicts harm. As we confront two pandemics, the COVID-19 crisis and the anti-Black racism that has plagued this country from its earliest foundations, we are called to dismantle structures of harm in our schools and create spaces where students can heal and learn.

This roadmap provides a tool to help you begin conversations in your school or district about healing-centered education. Whether you’re a Bronx parent/caregiver, a student, a staff member, a school administrator, or an executive within the Department of Education, this Roadmap will provide you with examples of healing-centered practices, research to support those practices, and the tools to initiate and sustain change.
# Bronx Healing-Centered Schools Working Group

## Community Roadmap to Bring Healing-Centered Schools to the Bronx

## Table of Contents

- **A Message from the Healing-Centered Schools Working Group** ................................................................. 3
- **Acknowledgements** ........................................................................................................................................ 1
- **Executive Summary** ....................................................................................................................................... 3

### I. Introduction .................................................................................................................................................. 10
- **The Impact of COVID-19 and the Fight for Justice for Black Students & Non-Black Students of Color in the Bronx** .................................................................................................................................... 10
- **The Problem: Childhood Trauma and its Impact on Bronx Learning** ......................................................... 11
- **Schools Can Be Sites of Trauma, Too** ............................................................................................................. 15
- **The Solution: Healing-Centered Schools** ...................................................................................................... 18
- **How to Use this Roadmap** ............................................................................................................................ 20

### II. Principles of a Healing-Centered School .................................................................................................... 21

### III. Creating Effective Organizational Change ................................................................................................ 23
- **Support from School, District, and Borough Leadership** .............................................................................. 23
- **Support from Educators and Other School Staff** .......................................................................................... 25
- **Meaningful Involvement of Students** ........................................................................................................... 27
- **Meaningful Involvement of Parents/Caregivers** ............................................................................................ 28
- **Planting the Seeds** ......................................................................................................................................... 30
- **Forming a Transformation Team** .................................................................................................................. 30
- **Tailoring Your Plan to Your School** .............................................................................................................. 31
- **Creating and Implementing a Healing-Centered Plan** .................................................................................. 32

### IV. Educating the School Community about Healing-Centered Practices .................................................... 33
- **Introduction** ................................................................................................................................................... 33
- **Where Do We Find the Time and Money for Training?** ............................................................................ 33
- **Who Should Receive Training?** .................................................................................................................... 35
- **What Topics Should Training Cover?** ........................................................................................................ 36
- **What Other Strategies Can We Use to Cultivate a Healing-Centered Workforce?** ................................. 37

### V. Academic Healing-Centered Strategies .................................................................................................... 39
- **Implementing Culturally Responsive-Sustaining Curricula** ....................................................................... 39
- **Incorporating Social Emotional Learning into Curricula** ......................................................................... 43
Universal Precautions in Classroom Instruction .......................................................... 45

VI. Non-Academic Healing-Centered Strategies .......................................................... 47

   Being Healing-Centered Means Being Anti-Racist .................................................. 48

   Changing the School’s Response to Behavior ......................................................... 50
   Restorative Justice Practices .................................................................................. 51
   Alternatives to Suspension ..................................................................................... 55
   Citywide Behavioral Expectations to Support Student Learning ......................... 58
   Healing-Centered Strategies for Responding to Behavior ..................................... 59

   Changing the Physical School Environment ......................................................... 62

   Uplifting Student Voice .......................................................................................... 65

   Staff Wellness ....................................................................................................... 66

   Non-Academic Universal Precautions ................................................................... 68

   Non-Academic Targeted Precautions ................................................................... 73

   Assessing the Role of School Safety Agents & Available Alternatives ................ 75

   Policies & Procedures .......................................................................................... 77

VII. Creating Healing-Centered School-Based Services ........................................... 79

   Mental Health Partnerships .................................................................................. 79

   Students in Temporary Housing .......................................................................... 82

   Crisis Teams ......................................................................................................... 83

   Response to Intervention and Special Education ............................................... 85

VIII. A Long-Term Approach .................................................................................... 87

IX. Not Just on Schools ............................................................................................. 88

   Students, Parents/Caregivers, & Community Members ........................................ 88

   New York City and State Leaders & Elected Officials ........................................... 89

   Secondary Education ............................................................................................ 90

   Statewide Partners ............................................................................................... 91

Appendix .................................................................................................................... 92
I. Introduction

The Impact of COVID-19 and the Fight for Justice for Black Students & Non-Black Students of Color in the Bronx

At the time of this initial printing, the Coronavirus 2019 (COVID-19) pandemic is profoundly affecting life around the globe. Bronx students grappled with trauma and its impacts on learning long before this crisis, and we began our work to address those impacts years ago. However, COVID-19 has significantly exacerbated and contributed to those traumas. Isolation, contact restrictions, and economic shutdown have had significant psychosocial impacts on Bronx families and communities. Our students and their parents/caregivers are experiencing pervasive unemployment, grief, anxiety, lack of peer contact, parental mental illness, domestic violence, limited access to physical and mental health care, the transition that accompanies COVID-19 related incarceration releases, and the pain of witnessing this pandemic disproportionately impact communities of color. These impacts pose a significant threat to the social emotional well-being of children and adolescents.

As the pandemic continues to impact our City, Bronx students and communities are also grappling with the police killings of Breonna Taylor and George Floyd, challenging and important conversations about state-sanctioned violence against Black people and institutional anti-Blackness in our society, and violent police responses to expressions of grief, demands for change, and displays of civil disobedience. The difficulty of this moment weighs heavily on our Black students and families in a way that non-Black allies cannot understand. On a smaller scale, our non-Black communities of color are engaging in difficult conversations about their privilege as non-Black individuals and their own experiences with racism. Racist police violence also has demonstrable educational impacts. Research shows that police killings of Black and Hispanic individuals, and the institutional racism that these killings reveal, lead to lower grade point averages, lower graduation rates, and increased emotional challenges among Black and Hispanic students, exacerbating the racial inequity that already plagues our education system.3

In this moment, we are confronting two pandemics: COVID-19 and the anti-Black racism that has plagued this country from its earliest foundations. As we join with countless others to fight for change that is necessary and just, we offer this Community Roadmap. We hope that it will help your schools and communities take the first step toward eradicating the school-based structures that harm and building school cultures that heal. We emphasize that this healing is not just a matter of recovery – it is a much bigger step toward changing who we are and how we impact the lives of children and young people in the Bronx.

The Problem: Childhood Trauma and its Impact on Bronx Learning

Childhood trauma is widespread: one in four children in every classroom has been exposed to some form of childhood trauma. But the issue of childhood trauma is particularly acute in the Bronx. Children living below the poverty level are more likely to experience three or more adverse childhood experiences (ACEs), and the Bronx has one of the highest rates of childhood poverty in the country. As a result, our students are more likely than almost any other students nationwide to experience trauma and its detrimental impacts on learning. These traumatic experiences, rooted in systemic oppression, can have a long-term impact on a child’s ability to learn: Young children exposed to five or more ACEs in their first three years are 76 percent more likely to have one or more delays in language, emotional, or brain development.

What does “childhood trauma” really mean? Adverse childhood experiences are stressful or traumatic events, including interpersonal traumas such as physical or emotional abuse, neglect, and parental separation. But trauma also includes systemic trauma, like poverty, lack of access to food or housing, persistent exposure to racism and other forms of discrimination, and community violence. These systemic traumas affect countless Bronx families, students, and educators, and they impact our school climates and communities.

Research strongly links ACEs with negative impacts throughout adulthood. Children who are exposed to trauma in various forms are more vulnerable to chronic health problems, mental illness, and difficulties with substance abuse in adulthood. ACEs have also been shown to impact brain development in a way that affects participation in education, employment stability, and criminal justice-involvement in adulthood. Exposure to ACEs increases the risk for repeated trauma exposure across a person’s life.

7 Downs & Manning, Understanding How Trauma Affects Students, Scholastic, www.scholastic.com/teachers/articles/18-19/understanding-how-trauma-affects-students/.
Types of Stress and Trauma’s Impact on Young People

Childhood trauma is closely connected to stress, but not all forms of stress are bad. There are three primary forms of stress: positive, tolerable, and toxic. Each are important for Bronx educators, parents/caregivers, and students to understand as they embark on the journey of healing-centered transformation:

- **Positive stress** is stress that occurs in a supportive situation where we feel safe, seen, and cared for. Positive stressors tend to be either short-lived stressors or mild stressors that occur over long periods of time. They offer opportunities for students to develop important coping skills. Secure relationships with supportive adults are essential to experiencing stress in this positive way.

- **Tolerable stress** happens when prolonged or intense stressors disrupt the brain, but we have sufficient supports to recover. These supports may include internal coping skills as well as external supports. External supports are especially important for children and adolescents because they provide the scaffolding young people need to process, recover, and develop more stable internal coping skills.

- **Toxic stress** occurs when we are exposed to intense physically, psychologically, or emotionally overwhelming stressors but do not have adequate internal and external supports. When toxic stress occurs, the central nervous system becomes overloaded, resulting in a chronic stress state and causing symptoms like anxiety, fear, flashbacks, depression, insomnia, hyper-vigilance, and emotional detachment. When toxic stress occurs because of harmful adults or in the absence of caring adults, young people may also experience regression or stagnation in their cognitive, psychological, and behavioral development. Coping skills that young people develop while experiencing toxic stress tend to be reactive and rooted in avoidance, defensiveness, and overreaction.

**Trauma impacts the brain.** Someone who has experienced trauma lives in a state of hyperarousal and can be easily triggered into a fight-flight-or-freeze response. In the presence of this overactive threat-response system, there is less activity in the area of the brain that regulates thoughts, behaviors, and emotions. Specifically, trauma impacts the brain’s limbic system, or ability to regulate levels of arousal. This may lead to hyperarousal, which looks like restlessness, impatience, impulsivity, hypersensitivity, or an exaggerated response to something sudden or startling; or hypoarousal, manifested as daydreaming, drowsiness, forgetfulness, slower processing, low retention of material, or low engagement. Trauma also impacts the brain’s prefrontal cortex. This part of the brain is responsible for maintaining and directing attention, inhibiting impulses, regulating responses, and modulating emotions. It

---

helps us think flexibly, carry out goal-directed behavior, evaluate and interpret events, and develop insights about our own and others’ behaviors.

**Trauma also impacts development.** Children who experience trauma, who do not receive adequate protection and care from adults, and who do not form close bonds with parents/caregivers often struggle to build healthy and trusting relationships throughout their lives. They are less likely to trust the intentions of others and are more likely to approach relationships from a defensive, pessimistic position. Alternatively, they may be overly dependent, clingy, and passive in relationships. Children who have experienced trauma may also be overly focused on controlling their relationships, seeking attention, or garnering approval and may, as a result, struggle to empathize or read social cues. Overall, the experience of relating to and connecting with others can be tense and stressful for students who have experienced trauma. Some may be too scared to learn because they feel they cannot trust their environment or their teachers. Others may have a hard time forming and maintaining relationships that facilitate their learning.

**Trauma impacts self-regulation and language skills.** Children who experience adverse circumstances have fewer opportunities to develop the self-regulation skills necessary to modulate their emotions and regulate their behaviors. In addition to the neurocognitive impacts of trauma, children who grow up in adverse circumstances have fewer opportunities to practice frustration tolerance, impulse inhibition, emotional awareness and communication skills, and interpersonal problem-solving skills. Each of these skills plays an important role in learning and peer engagement. Children who experience trauma also display significant negative impacts on all areas of language, particularly expressive and receptive language. Language skills are critical for learning new concepts through reading and listening and for expressing knowledge through speaking and writing. Underdeveloped skills increasingly impact learning as higher grades place increased demands on language skills.

**EXAMPLE:** One elementary school student who had experienced trauma struggled with expressive language. When he could not express his frustration with an assignment or peer interaction, he became upset and wanted to leave the classroom. This occurred on a regular basis and interrupted both his ability to learn and his ability to form relationships with his peers and teachers. At times, his teachers responded by suspending him or removing him from the classroom.

All of this means that trauma impacts a student’s ability to learn. Students who have dealt with trauma may experience intrusive thoughts or memories of past trauma during the school day. These intrusive thoughts, along with trauma’s impact on the aspects of brain function described above, can cause students to experience two emotional extremes that interfere with learning: feeling either too much (hypersensitive, overwhelmed) or too little (hyposensitive, numb). Educators must be aware of these reactions and how they impact
learning. Students enduring either emotional extreme may experience the following impacts that interfere with learning functions:

- A disproportionate reaction to a regular request or difficulty regulating emotions about classroom interactions, academic pressures, or critical feedback;
- Difficulty maintaining attention, staying focused, and resisting distractions;
- Challenges starting and finishing assignments;
- Difficulty processing, retaining, and recalling material;
- Struggling to plan and organize or adhere to priorities; and
- Difficulty with abstract thinking and flexible problem solving.

**EXAMPLE:** One high school student who had been through a traumatic event experienced frequent flashbacks. These intrusive memories made it difficult for her to pay attention in class, process information that was being taught, recall information on tests, or prioritize her assignments or activities. Her school did not understand that these challenges were cognitive impacts related to trauma. Instead, school staff believed that she was not adequately applying herself.

Fostering Resilience and Post-Traumatic Growth

We can help students who have experienced trauma avoid the negative long-term impacts of that trauma by helping them build resilience. **Anything that helps a person feel safe in their body and connected to the present moment can promote resilience and healing from trauma.** Practices that help create physical, psychological, and emotional safety in environments and relationships are imperative to activating the regulatory systems of the brain, decreasing threat-response in the brain, and advancing healing. When students feel emotionally and physically safe, they are in a better place to be available to learn, to develop coping skills, and to build and maintain close relationships. Building nurturing relationships with supportive adults, like parents/caregivers and school staff, can promote resilience and advance healing. In the long-term, this healing will reduce trauma’s adverse effects on the body and brain.

When students who have experienced trauma get the support they need to develop resilience, **healing can yield growth.** Post-traumatic growth refers to the process of psychological growth that can occur after a trauma. Trauma can disrupt a student’s core beliefs about safety, security, and the world around them. But students who have adequate support to make sense of their circumstances may experience psychological growth, or post-traumatic growth, as a result. Post-traumatic growth can include improved trust in relationships with others, improved appreciation for life and the future, a sense of personal strength and competence, and a sense of meaning as a result of the challenges they have experienced.
Schools Can Be Sites of Trauma, Too

For many students, school buildings and classrooms are a safe haven from trauma that they may be experiencing in the home or community. However, there are instances when school settings and school staff traumatize and re-traumatize students through intentional and unintentional behaviors, biases, and even the culture of the school itself. While all schools serve students who have experienced trauma, staff are often unaware of the specific traumas that students have experienced. For this reason, it is vital that school staff operate under the principle that any individual may have experienced trauma and, based on that understanding, take a healing-centered approach to interactions with all students and families.

This section will provide an overview of the traumas that can be exacerbated by schools, that may occur in schools, and that may occur as a result of the intentional or unintentional actions of school staff. This section will also discuss the traumas that staff and parents/caregivers may experience within or because of schools.

Schools can contribute to the cycle of trauma by exacerbating students’ trauma or re-traumatizing students. Re-traumatization is any interaction, procedure, or even something in the physical environment that replicates someone’s trauma, literally or symbolically, and triggers the emotions or cognitions associated with that trauma. For example, the use of harsh discipline may be triggering for students that have histories of physical abuse, have witnessed domestic violence, or have witnessed other violent interactions. Students with trauma who are exhibiting emotional duress may experience a staff member’s reactions to that duress as a threat. For example, if a staff member sends the student to the Principal’s office, contacts another staff member for “backup,” contacts the student’s parent, or threatens a suspension, the student may experience the emotions, cognitions, and hypervigilance associated with past trauma. As a result, the student may perceive the staff member as threatening and may attempt to protect themselves from the perceived threat.

---

Similarly, students who have experienced verbal or emotional abuse may be re-traumatized when a staff member reprimands them in front of their classmates. When staff reprimand students in front of their peers, they can emotionally injure the student and cause the student to react with internalizing and externalizing behaviors that undermine the student’s social emotional well-being. These behaviors can ultimately contribute to the development of depression, withdrawal, or aggressive behaviors.

Students may also be re-traumatized by material. Lessons and assignments may include themes related to slavery, genocide, racism, homophobia, xenophobia, sexism, abuse, or other difficult topics. Many students may be experiencing these traumas firsthand or may have a past experience with these harmful dynamics. Other students may have a family history that involves historical trauma or recent traumatic experiences with the topics listed above. For these students, lessons and assignments on these topics can be re-traumatizing if not discussed with sufficient care and social emotional supports.

Students’ trauma can also be compounded when staff actions exacerbate that trauma or its impacts. Staff may passively or unintentionally exacerbate student trauma by minimizing a student’s reported experience, failing or refusing to provide requested social emotional or academic support, or failing to notice when a student is withdrawing or exhibiting other internalizing behaviors.

Schools can also be sites of novel traumatic experiences for students. Students may experience trauma because of the actions of peers or school staff or because of school culture. For example, bullying and other forms of harassment can “severely affect a child’s or teen’s self-image, social interactions, or school performance, and can lead to mental health problems such as depression, anxiety, and substance use, and even suicidal thoughts and behaviors.”

Furthermore, if a student has a history of trauma, they are at increased risk for engaging in bullying behaviors or being bullied by their peers.

Students and staff alike may also experience racial trauma while at school. Racial trauma, or “traumatic events that occur as a result of witnessing or experiencing racism, discrimination, or structural prejudice (also known as institutional racism) can have a profound impact on the mental health of individuals exposed to these events. Racial trauma (also known as race-based traumatic stress) refers to the stressful impact or emotional pain of one’s experience with racism and discrimination.” Educators should be cognizant of the fact that their race or ethnicity and the privilege they carry in the world may affect Black and non-Black students of color’s interactions with them and ability to view them as caring, trustworthy adults. To create a healing-centered school, educators must strive to create safe and brave

classroom environments where students feel comfortable discussing their thoughts and experiences with racism.

Microaggressions, when experienced frequently over time, are one form of racial trauma that students and staff may experience at school. Microaggressions are “everyday verbal, nonverbal, and environmental slights, snubs, or insults, whether intentional or unintentional, which communicate hostile, derogatory, or negative messages to target persons based solely upon their marginalized group membership.” Educators who want to create safe and brave classrooms must start by working to identify their own implicit and explicit bias. Doing so will help them to facilitate open and honest dialogues with students.

Students may also be traumatized by the use of restraint, detainment, or emergency removal as a means of crisis response. When students become emotionally dysregulated or display behaviors perceived to be disruptive, some school staff respond by contacting multi-person crisis teams that lack adequate training, School Safety Agents, or even 911 to address the situation. Many school staff members who engage these responses want to help students, but may instead be creating a new trauma for students. Many students who are subject to these responses are forcibly restrained, forcibly removed from school premises, placed in physical restraints, placed onto stretchers, or taken to unfamiliar locations, like psychiatric emergency rooms, without the presence of a trusted adult. These experiences can be emotionally injurious and traumatizing for students and may disrupt students’ ability to trust adults both inside and outside their school community.

Finally, students may also be traumatized by the harsh use of discipline practices. Repeated suspensions, repeated classroom removals, and the involvement of School Safety Agents or police officers can create new trauma by causing students to feel criminalized, unsafe, and unwelcome in their school community. For students that live in over-policed communities, harsh discipline practices, especially those that involve School Safety Agents or police officers, can compound the stress of over-policing and increasing the frequency of adversarial contact with law enforcement. In addition, harsh discipline practices are often employed in response to behavior that is a reflection of the student’s social emotional state, need for safety, or available coping strategies. When students engage in this behavior and are met with harsh or indifferent responses, they may be more likely to experience toxic stress.

Students are not the only members of the school community who experience trauma while at school. Schools can also be sites of trauma for school staff. This can include re-traumatization, vicarious trauma, and novel trauma. Staff who themselves have experienced trauma may be re-traumatized by interactions with students or fellow staff that replicate the dynamics of their trauma. Staff who support students as they navigate traumatic experiences may also experience vicarious trauma, or post-traumatic stress symptoms that arise from working with traumatized children. Staff may experience the traumas that students experience,

---

like racial trauma or harassment. Staff may also be traumatized by school dynamics or aspects of school culture that are harmful to students. For example, staff in our community discussions reported that they were traumatized by incidents in which they were told to call School Safety Agents or 911 to physically remove a student from a classroom.

Finally, schools can be sites of trauma for parents/caregivers. In our community discussions, many parents/caregivers reported feeling traumatized by the harm their children suffered at school. For example, one parent shared her frustration with being unable to protect her child from severe bullying, and another expressed the emotional impact of being unable to stop her child’s school from repeatedly calling 911 when he had behavioral outbursts. Other parents/caregivers reported feeling helplessness when, despite repeated advocacy, they were unable to get their child’s school to stop harmful behavior or provide desperately needed support. Finally, many parents/caregivers reported experiencing high levels of stress as a result of the treatment they received from school staff. Some parents/caregivers reported experiencing race-based harassment, xenophobic threats, and retaliatory and unfounded calls to or threats to call the State Central Registry from school staff members.

The Solution: Healing-Centered Schools

The Community Roadmap to Bring Healing-Centered Schools to the Bronx presents a solution to the problem of Bronx childhood trauma and its impact on learning. In this Roadmap, we describe a healing-centered framework for education, outline the steps that Bronx schools should follow to adopt that framework, and provide a variety of options to help schools navigate the obstacles they may encounter. By adopting this framework, Bronx schools can become safer, more supportive, and more culturally responsive spaces for all students. This is crucial because students who feel safe, supported, and seen by their schools are in a better place to grow in their academic and social emotional well-being.

The healing-centered approach provides a whole-school framework grounded in the Working Group’s Healing-Centered Principles. This framework rejects traditional, siloed approaches to reform and instead offers schools a way to align their core operations to healing-centered values. By taking a whole-school approach, schools set themselves up for success by creating consistency, reducing costs and fatigue across the board, and increasing the sustainability of their efforts. In addition, because a whole-school framework allows staff, students, and parents/caregivers to participate in change, it often generates greater buy-in and trust within the school community. Sections III and IV map out how school communities can navigate this process of whole-school change by generating buy-in, forming Transformation Teams, developing and implementing Healing-Centered Plans, and pursuing community education.

The healing-centered approach is a whole-school framework, but it also involves smaller changes to the way staff interact with students and parents/caregivers, lessons are taught, and policies are administered. Transformation Teams, tasked with facilitating and assessing their schools’ healing-centered journey over time, will help their schools make these changes in a
way that is realistic, achievable, and responsive to the needs of their student community. In Sections V-VII, we provide a menu of changes that schools can include in their Healing-Centered Plans including academic practices, non-academic practices, and school-based services. In these sections, you’ll find

- Recommendations and evidence to support the removal of punitive and criminalizing structures like School Safety Agents, metal detectors, and criminalizing language;
- Best practices to advance anti-racism and equity through Culturally Responsive-Sustaining Education (CRSE), including anti-bias trainings, restorative justice practices, and steps to center student and family voice in decision-making;
- Academic practices that reduce the likelihood that students with trauma or social emotional challenges will become dysregulated or disengaged from learning;
- One-on-one and school-wide evidence-based behavioral strategies to nurture students’ social emotional well-being and help them maintain a ready-to-learn state;
- Community-building strategies like restorative justice practices, programs that uplift student voice, and staff wellness programs;
- Targeted strategies to support students with specific needs related to bullying, behavioral crises, or housing instability; and
- Best practices for cultivating healing-centered school-based partnerships including, but not limited to, partnerships with mental health clinics and Students in Temporary Housing staff.

No school will begin with the same Healing-Centered Plan but, over time, we hope that Bronx schools will adopt most, if not all, of the changes outlined in this Roadmap.

Each school will begin their healing-centered journey from a unique starting point. We recognize that many Bronx schools have already made significant progress on some of the individual changes proposed in this Roadmap. With the support of the Department of Education, some schools have made significant strides in restorative justice, social emotional learning, and school-based mental health partnerships. For these schools, the Roadmap is a tool for continued growth. It will help them step back, create a mission-driven framework, and fill in the gaps that may be hindering the success of existing initiatives and the transformation of school culture. For other schools, this will be a journey that starts at the beginning. These schools will have an exciting opportunity to embark on the process of change with clear, uniform goals and a framework for success. For all schools, the journey will involve close collaboration with students and parents/caregivers and the cultivation of a stronger school community.
How to Use this Roadmap

This Roadmap is a tool to help you begin a conversation in your school or district about becoming more healing-centered. It will connect you with resources that you can draw upon, including advice for facilitating early conversations, strategies to build buy-in, and best practices for implementation, ongoing assessment, and continued growth.

This tool is written by Bronx communities for Bronx communities. It includes reflections from Bronx students and parents/caregivers about the traumas that are most impacting their school communities and the changes they most want to see. It provides helpful context about the landscape of education in the Bronx and the unique challenges that the Bronx is facing, and it proposes responses to those challenges. It also offers the changes that our coalition of Bronx parents/caregivers, students, advocates, and providers thought most essential to adopt based on the needs of the communities we live in, are educated in, and work in. Finally, this Roadmap offers strategies for confronting the obstacles that come with any big change like financial limitations, workforce buy-in, and administrative constraints.

The healing-centered journey is a cyclical process of learning, mobilization, and action that school communities will continuously engage with. The Healing-Centered Schools Working Group has identified seven Steps to Healing-Centered Transformation. Each school is unique and will begin their journey at a different step in the process.

- **Get People Involved**: Begin to understand trauma and its impact on Bronx students. Mobilize members of your school community.

- **Form a Transformation Team**: Launch a Transformation Team of passionate individuals to facilitate change in your school community.

- **Assess Needs & Goals**: Engage in conversations with your school community. Conduct surveys and focus groups. Identify areas of need and changes that community members want to see.

- **Create a Healing-Centered Plan**: Develop a Healing-Centered Plan to address the needs and goals that your Transformation Team has identified.

- **Implementation – Train Your Community**: Educate your school community about trauma, its impact on learning and behavior, and healing-centered educational practices.

- **Implementation – Change School Culture**: Adopt practices that promote healing, remove those practices that harm community members and undermine healing, and build community in your school.
• **Assessing Impact:** Evaluate your Healing-Centered Plan, identify new needs and goals, and maintain the momentum of healing-centered change.

As you read this document, look for the Roadmap steps depicted in the following graphic. You’ll see a key at the beginning of each section alerting you to the steps that will be discussed in the pages that follow.

This Roadmap concludes with an appendix of resources that you can use to support your school’s healing-centered journey. These resources provide more detailed guidance about effective organizational transformation, offer free online trainings in trauma-informed and healing-centered education, and connect you to experts that can advise you on your journey.

**II. Principles of a Healing-Centered School**
The foundation for an effective healing-centered school is a set of principles that guides each change, policy, and interaction with students, parents/caregivers, and staff. Our Working Group has identified the following Healing-Centered Principles as key tenets for Bronx schools. Throughout the Roadmap, we will refer back to these Principles. They will guide you as you initiate conversations in your school communities, determine your priorities for change, and craft, implement, and assess your Healing-Centered Plan.

PRINCIPLES OF A HEALING-CENTERED SCHOOL

1. We understand that any student or parent/caregiver may have experienced trauma, and we reject the expectation that students will come to school with strong self-regulation skills.

2. All students, families, and staff should feel physically, psychologically, and emotionally safe in our schools.

3. A proactive, supportive, and strengths-based approach helps students cultivate social emotional skills and effective coping strategies.

4. Social emotional well-being is a necessary ingredient for learning.

5. Healing-centered schools strive to give students the supports they need to develop social emotional skills and regular opportunities to practice those skills.

6. All students, staff, and parents/caregivers deserve transparency, consistency, and decision-making in their school community.

7. Students, staff, and parents/caregivers are experts in their needs and essential partners in creating a supportive school environment.

The shift to healing-centered education also involves careful self-reflection by school leadership and staff. To create sites of learning and healing, we must acknowledge that schools and related institutions have historically been sites of individual and systemic trauma. Becoming healing-centered requires transforming institutions to remove policies, actions, and behaviors that are rooted in that history and continue to perpetuate trauma and inequity.

Becoming truly healing-centered also involves a continual assessment of the ways in which a school may be contributing to trauma, exacerbating trauma, or partnering with institutions that traumatize students and families. Throughout the ongoing healing-centered journey, schools will learn to examine and challenge the ways that they are sites of enforcement, harmful punishment, deficit-based engagement, silencing, or othering. By doing
so, they will learn to identify ways that they can be more compassionate, supportive, strengths-based, and community-building.

III. Creating Effective Organizational Change

Now that we have outlined the goal and core principles of a healing-centered approach to education, we can begin to discuss the process for effective whole-school change. Section III outlines the members of the school community that should be involved in your school’s healing-centered transformation and describes how to initiate discussions and generate buy-in among those community members. Section III concludes with a discussion of the Transformation Team that will support your school’s healing-centered journey and provides guidance for developing your first Healing-Centered Plan.

Support from School, District, and Borough Leadership

While all members of the school community are central partners in the healing-centered journey, research shows that Bronx Principals, Superintendents, and the Executive Superintendent will be critical to the long-term success of schools’ healing-centered transformations. Staff, students, and parents/caregivers will be integral to early success and will plant the seeds for change along the journey. Bronx Principals, Superintendents, and the Executive Superintendent can ensure that those changes succeed in the long-term by providing the support and infrastructure that only administrative leadership can provide:

- Consistent messaging about the commitment to healing-centered principles, healing-centered change, and eventually the Healing-Centered Plan, in communications with staff, students, parents/caregivers, and outside leaders and communities;

- Administrative support for the time, flexibility, and resources needed to ensure an effective transformation;

- Unique insights on budgetary considerations or administrative obligations that may get in the way of effective transformation, and how to navigate those barriers; and

- A high-level view of all initiatives and intentional effort to ensure they are aligned with one another and with healing-centered principles.

We are asking our Bronx school, district, and borough leadership to draw on their unique position and skills to take the following concrete steps:

**LEADERSHIP ASKS**

**Bronx Executive Superintendent and District Superintendents**

- Create opportunities for Bronx educators to come together to learn, collaborate, and brainstorm ideas for healing-centered schools. These can include in-person events, webinars, or ongoing work groups.
- Develop and host professional development opportunities. These can be individual trainings or a series that culminates in a certificate.
- Consistently include healing-centered principles in your messaging to school staff and families. Uplift healing-centered transformations in your communications.
- Help your schools access the resources they need to fulfill their Healing-Centered Plan, including financial resources and time needed for training and implementation.
- Engage in intentional relationship-building with parents/caregivers and students. Build a healing-centered culture across your district by ensuring that parents/caregivers and students in your district feel safe reaching out to you for support.
- Identify district, borough, or citywide policies or practices that impede healing-centered education and cannot be addressed on an individual school level. Collaborate to challenge these policies or practices. For example, consider high-stakes testing policies, admissions and screening mechanisms, and educational funding patterns that are contributing to segregated, inequitably resourced, and high-stress educational environments that cannot support healing.

**Bronx Principals**

- Initiate healing-centered conversations in your schools. If your staff, students, or parents/caregivers approach you about healing-centered change, receive their ideas and proposals with an open mind.
- Support the creation of, participate in, and advance the work of your school’s Transformation Teams. Ensure that Transformation Teams have the time they need to implement your school’s Healing-Centered Plan. Help Transformation Teams access the resources they need to implement the Plan.
- Facilitate information sharing with other schools and districts.
- Facilitate whole-community conversations about healing-centered practices.
- Engage in consistent messaging about healing-centered education in Principal communications with staff, students, and parents/caregivers.
- Identify any obligations or administrative constraints that may stand in the way of your school’s transformation and bring them to the attention of the other members of the Transformation Team. Work together to identify an alternative or adjust priorities.

---

For all Bronx education leadership, healing-centered school transformations are an opportunity to be a leading example for other boroughs and other cities, both in New York State and nationwide. Cities and states across the country, including Schenectady, New York and the entire state of Massachusetts, have adopted trauma-informed schools and can teach us important lessons. Bronx schools that follow this Roadmap will build on that work in a unique way by becoming the first set of districts to adopt a healing-centered model that intentionally responds to systemic traumas like housing instability, racism, and over-policing.

In addition, Bronx schools serve communities with some of the highest rates of childhood poverty and trauma rooted in systemic oppression. Our school communities will learn important lessons throughout their healing-centered transformations, and these lessons will provide invaluable information to other school districts serving high-trauma and high-poverty student populations. By following this Roadmap, Bronx schools will also demonstrate to schools around the City and State the importance of taking a whole-school approach when pursuing meaningful change.

Support from Educators and Other School Staff

Educators and other school staff are the people that students most frequently interact with outside of their home communities. Because staff spend so much time with students, they are essential to the success of a model that proposes healing-centered interactions in schools. Educators are also often the first people in the school community to buy-in to a healing-centered approach. They witness firsthand the impact of trauma on learning and classroom behavior and can directly benefit from better strategies to respond to those impacts.

Both students and school staff benefit when staff support healing-centered change. Our Working Group has heard from school staff who report experiencing burnout, compassion fatigue, and secondary trauma when interacting with traumatized students. A healing-centered approach can provide educators with the strategies, tools, and school culture to prevent and mitigate these problems. Similarly, school staff have told our Working Group that they want to respond differently to challenging student behavior, but that they haven’t been provided with the right training, resources, or administrative support to do so. A healing-centered transformation can address those concerns. Finally, a healing-centered approach makes all students feel safer and more supported. When students feel this way, they are less likely to exhibit the behavioral challenges or classroom disruptions that contribute to staff stress, require intensive staff response, or make it difficult for staff to carry out their regular duties.

Non-instructional staff are essential to the success of a healing-centered transformation. Every school-based interaction affects students’ sense of safety and community, not just interactions with their individual teachers. In addition, some students report that the adult they trust most in the building is not a teacher at all, but is a non-instructional staff member. For that reason, it is important that all staff are given the opportunity to learn about trauma’s impact on learning and behavior and are provided with strategies that they can use to support students.
School staff are often inundated with policy changes, new initiatives, and shifting expectations. When staff feel overwhelmed by these changes, they may experience burnout, fatigue, and apathy toward initiatives they would otherwise find exciting. A healing-centered framework can mitigate these effects. When change is coordinated, consistent, and presented as part of an intentional plan, staff feel supported and prepared to fulfill their role in real change. More importantly, a healing-centered framework uplifts staff voices in the design and implementation of the Healing-Centered Plan. Staff are not viewed as subordinates tasked with carrying out unfamiliar directives, but are valued participants in their school’s change process.

We are asking school staff to learn about healing-centered schools and to leverage their unique position as the face of education to take the following concrete steps.

- As you learn about healing-centered schools and practices, reflect on your own reactions and the reactions of others. Consider whether you feel you can commit to these concepts and how you can cultivate that commitment in your peers. Commitment and buy-in among school staff consists of three ingredients:\(^{17}\)
  1. **Head:** Do you understand the change that is needed and your role in it?
  2. **Heart:** Can you emotionally commit to the change that is needed?
  3. **Hands:** Will you take action to make and sustain that change?

- Once you feel you can commit to healing-centered principles, initiate conversations with your co-workers and peers about healing-centered practices.

- Approach your school’s leadership and ask to start a Transformation Team. The Healing-Centered Schools Working Group can help you organize. Reach out to us at (917) 661-4529 or bxhealingcenteredschools@lsny.org.

- Have a discussion at your staff meeting or host a staff event to discuss what you’ve learned.

- Share resources and learning materials with other staff, then discuss together in small groups. You can find helpful reading materials at the end of this Roadmap.

- Host an event where students and parents/caregivers can learn about these ideas and make their voice heard.

Bronx educators already have a strong network of solidarity to draw upon for support. The United Federation of Teachers (UFT) provides resources to promote educators’ well-being at work and infrastructure to advance change. We are asking the UFT to support educators in the process of healing-centered change by advocating for DOE support of healing-centered

practices, offering professional development, facilitating cross-school discussions, and connecting educators to resources.

**Meaningful Involvement of Students**

A healing-centered approach that is effective and accurately responsive to the needs of the school community is one that centers student involvement and leadership in change. Students are the foremost experts on their social emotional needs, how they experience safety in their schools, and what schools can do to improve their experience of safety. This information is the foundation that Transformation Teams will use to identify priorities for change and, later, develop a Healing-Centered Plan.

Some resources on trauma-informed schools recommend only partial or minimal involvement for students. Under these models, change is placed almost exclusively in the hands of school leadership and staff. The Healing-Centered Schools Working Group recommends a different approach. For the following reasons, schools should include students in all aspects of the healing-centered transformation, including initial conversations, the Transformation Team, and ongoing assessment:

- Including students creates a higher likelihood that the transformation will succeed. Healing-centered schools have a strong sense of community. Students are more likely to embrace and participate in the cultivation of this community if they are given the opportunity to meaningfully contribute to it.

- A healing-centered transformation is a school culture transformation. As members of the school community who exist in and are deeply affected by school culture on a daily basis, students must be centered in any transformation that yields real culture change.

- Trust, autonomy, and the opportunity to voice ideas and concerns are key ingredients of a healing-centered school. If school teams leave students out of this process, they may unintentionally undermine their own efforts by violating that sense of autonomy and trust. On the other hand, students who are given the opportunity to participate and see their contributions reflected in the process are more likely to feel heard, to trust their school community, and to experience safety while at school.

- Students can offer perspectives that school staff may have overlooked. Having a variety of perspectives throughout the transformation process allows the Transformation Team to effectively craft a responsive plan.

We are asking students to take the following steps to promote healing-centered practices in their schools:
• Take the time to learn about healing-centered schools. Read this Roadmap and check out the resources listed at the end.

• Share what you have learned with other students and with the adults in your life, both inside and outside of school.

• Approach your school staff or leadership and ask to have a school conversation about healing-centered practices. The Healing-Centered Schools Working Group can help you have this conversation. Reach out to us at (917) 661-4529 or bxhealingcenteredschools@lsnyc.org.

• Demand healing-centered practices in your schools. The Healing-Centered Schools Working Group can help you organize. Reach out to us at (917) 661-4529 or bxhealingcenteredschools@lsnyc.org.

• Participate in your school’s healing-centered transformation process. Attend school discussions, participate in focus groups, and complete surveys. If you are passionate about these ideas, volunteer to join your school’s Transformation Team.

• Hold your school accountable to the healing-centered principles, the priorities your school community identified, and your school’s Healing-Centered Plan. As central members of the school community, you will experience the implementation of your school’s Healing-Centered Plan in real time. Give ongoing feedback to the Transformation Team, and make your voice heard about what aspects of the plan are working and what aspects need to change.

**Meaningful Involvement of Parents/Caregivers**

An effective healing-centered approach is also one that centers parent/caregiver perspective and involvement. Parents are key partners in understanding, responding to, and better supporting students’ social emotional needs. Parents are also a bridge between the school community and students’ experiences and community outside of school. Their involvement and perspective is critical to the development of a Healing-Centered Plan that responds to student needs and creates real school culture change.

Many resources on trauma-informed schools do not recommend structures for parent/caregiver involvement. Under these models, change is placed almost exclusively in the hands of school leadership and staff. The Healing-Centered Schools Working Group strongly recommends a different approach. For the following reasons, schools should include parents/caregivers in all aspects of the healing-centered transformation, including initial conversations, the Transformation Team, and ongoing assessment:
• Parents have unique insight into students’ social emotional needs, and can offer perspectives or suggestions that other members of the school community may overlook.

• Meaningful parent/caregiver participation builds good will with parents/caregivers, who are essential partners in the success of a healing-centered school community.

• Students’ perceptions of their safety at school depend largely on whether they feel their parent/caregiver is welcome, safe, and respected. Meaningful involvement of and positive relationship building with parents/caregivers will boost parents/caregivers’ sense of safety at school. This will, in turn, promote students’ perceptions of their own safety and belonging in the school community.

• A healing-centered school is one that promotes healing-centered practices outside of the school community. Parents/caregivers are a bridge between school communities and students’ communities outside of school. Involving parents/caregivers in the healing-centered transformation gives them the tools and knowledge to promote healing-centered practices in students’ home communities.

We are asking parents/caregivers to take the following steps to promote healing-centered practices in their schools:

• Take the time to learn about healing-centered schools. Read this Roadmap and check out the resources listed at the end.

• Speak with the students in your life about their experiences at school, whether they feel safe, and what healing-centered practices mean. Talk to them about what they think needs to change in their schools.

• Share what you have learned with other parents/caregivers in your school, district, or borough community. Gather folks who are interested in these ideas.

• Approach your school and district’s teachers, staff, and leadership about healing-centered school transformation. It may be helpful to do this with a small group of other students and parents/caregivers. The Healing-Centered Schools Working Group can help you have this conversation. Reach out to us at (917) 661-4529 or bxhealingcenteredschools@lsenyc.org.

• Hold your school accountable to the healing-centered principles, the priorities your school community identified, and your school’s Healing-Centered Plan. Push your school’s Transformation Team to develop new goals and plans after the first Healing-Centered Plan is implemented. All members of the school community are partners in ensuring the success of the Healing-Centered Plan, and parents/caregivers are uniquely positioned to provide checks and accountability.
Planting the Seeds

If you are one of the stakeholders listed above, you may be wondering how to begin the healing-centered transformation process in your own school. You can begin by building conversations within your own community. Start by speaking with individuals that have expressed interest in these ideas or in ideas related to social emotional health and equity in schools. Individuals who are not familiar with these ideas, but who have expressed frustration with the school’s response to a particular incident or problem, may also be willing to speak with you. Start with just one other person and engage that person in discussion over lunch or in a conversation during the school day. Build those connections into small groups. Nurture these small groups to help them grow. Collaborate with one another to host discussions in your community to help spread the word. Reach out and engage other categories of stakeholders in your school community.

If staff, students, and parents/caregivers in your community express interest in healing-centered school practices, approach school leadership together. Present your ideas, share resources, describe how members of your school community support the concept, and ask school leadership to help you initiate healing-centered change. Conversely, if staff have not yet learned about or embraced the idea of healing-centered educational practices, students, parents/caregivers, or school leadership can approach staff through informal discussions or at staff or Community Education Council meetings.

Superintendents and the Executive Superintendent can also plant the seeds for healing-centered change. They can host events throughout the Bronx to incubate conversations and promote idea-sharing. Their early interest and support can help motivate school staff and alleviate any concerns they have about institutional obstacles to success.

Forming a Transformation Team

Once leadership, staff, students and parents/caregivers in the school community have expressed interest in healing-centered practices, schools should identify a Transformation Team to take the lead on early conversations. As the process of change progresses, this team will be responsible for formulating and carrying out a Healing-Centered Plan in collaboration with the entire school community.

In the beginning of the healing-centered change process, the Transformation Team should host school community discussions, conduct surveys, and facilitate focus groups. These conversations will help the school community build consensus and identify priorities to address in the Healing-Centered Plan. Once those priorities have been identified, the Transformation Team will be responsible for developing a Healing-Centered Plan that is responsive to those priorities and consistent with the Healing-Centered Principles. They will oversee the implementation of that Plan, assess implementation to determine where adjustments are needed, and support the school’s continued healing-centered growth.
All members of the school community must be represented in the Transformation Team. The Team should include instructional staff, non-instructional staff, a student, a parent/caregiver, and a member of the administration. The Principal’s support is crucial for the success of the transformation, so we recommend that the Principal be a member of the team. Those with a passionate interest in healing-centered change are a natural fit for the Transformation Team, but schools may also choose to appoint individuals who they think will be successful leaders and changemakers. Because of the School Leadership Team’s (SLT) involvement in budget development, we also recommend that the Transformation Team include a member of the SLT. In order to create more opportunities for new parents/caregivers to get involved in school leadership, we caution against including the SLT parent member as the SLT member in the Transformation Team.

When developing the Transformation Team, schools should consider including community members with special knowledge or skills. If your school serves a high number of students in temporary housing and has on-site staff from the Office of Students in Temporary Housing, include one or more of those staff in your Team. The team will likely coordinate or conduct a great deal of staff education. Including staff members who already provide training to staff and who have the flexibility to do so during the school day will help the Transformation Team accomplish their training goals.

Tailoring Your Plan to Your School

Transformation Teams will work hard to develop a Healing-Centered Plan that proposes community education and changes to the school’s policies, practices, and culture. A successful plan will be responsive to four elements.

First, the Healing-Centered Plan should be responsive to the needs of the community that the school serves. For a school community struggling with persistent housing instability and related chronic absenteeism, a Plan focused on initiatives to support absent or late students may be a better fit than a Plan focused on addressing conflict between students.

Second, the Healing-Centered Plan should be responsive to staff’s current knowledge and level of buy-in. If the staff is still growing in their understanding and support is still evolving, it may be best to start with a small change. Once the community has gained a greater sense of motivation and excitement about healing-centered schools, the Transformation Team can pursue bigger changes. This will encourage buy-in and prevent fatigue.

Third, the Healing-Centered Plan should be responsive to the priorities that the school community feels are most pressing. This will build trust as the community witnesses the Transformation Team and administration reflecting back their priorities. This will also generate greater buy-in and investment in the Healing-Centered Plan. Most importantly, this will ensure that the Plan promotes the healing that is most needed.
Fourth, and perhaps most important, the Healing-Centered Plan should be responsive to the Healing-Centered Principles. The Transformation Team may develop careful plans for change, but those plans will not build a healing-centered school unless they advance the seven Principles. Transformation Teams should continually refer to those Principles as they engage in school community discussions and craft their plan.

Creating and Implementing a Healing-Centered Plan

In this section, we provide a brief overview of the steps that Transformation Teams should take to develop their school’s Healing-Centered Plan. Transformation Teams can find detailed guidance and best practices on development and implementation of organizational change in the resources linked at the end of this Roadmap.

The path to healing-centered change will be different for each school. Each school community must engage in its own process of education, generating buy-in, and developing a plan for transformation. Each school will start with different structures, a different school culture, and a different landscape of initiatives that either advance or hinder healing-centered education. Each school will have to engage in a unique process of assessing their progress, tackling obstacles, and adjusting course as needed. There is no one-size-fits-all approach, but Transformation Teams can support one another by sharing ideas and brainstorming solutions to problems that arise during the change process.

The Transformation Team should begin the healing-centered planning process by conducting a baseline assessment of staff, student, and parent/caregiver needs and priorities. The team can do this by hosting conversations within the school community. During these conversations, the Team can educate participants about the Healing-Centered Principles and invite participants to envision specific school reforms that embrace those Principles. They can also conduct surveys of staff, students, and parents to assess their perception of safety at school and how they think safety can be improved.

Once the Transformation Team has gathered this information, they should use it to develop Healing-Centered Plan action items that are realistic, measurable, and responsive to the four elements outlined above: community needs, staff understanding and buy-in, community priorities, and the Healing-Centered Principles. When selecting potential action items, the Transformation Team can build momentum by starting with action items that are easily obtainable. Successful implementation of these items will generate greater trust and buy-in, which are key components for the success of Healing-Centered Plans and the ongoing transformation.

As the Transformation Team moves toward implementation, they should plan to meet on a regular basis. These meetings may take place weekly or monthly. They will provide an opportunity for the team to reflect on their progress, ensure that outcomes are consistent with the Healing-Centered Principles, brainstorm solutions to unanticipated obstacles, and adjust course as needed.
Throughout implementation, the Transformation Team should maintain an open dialogue with staff, students, and parents/caregivers about their progress. The team should solicit feedback through school events, staff check-ins, discussions at parent-teacher conferences, focus groups, and surveys. Later in this Roadmap, we will discuss how to use this feedback to promote sustainability and develop future Healing-Centered Plans.

IV. Educating the School Community about Healing-Centered Practices

Introduction

Education and training for the school community is essential. While many aspects of healing-centered education feel like common sense, others are complex and counter-intuitive. Without a foundational understanding of trauma, its impact on learning, and appropriate response strategies, school communities will struggle to implement Healing-Centered Plans. In addition, education takes the concept of healing-centered schools from the theoretical to the practical. It helps school staff build their capacity to apply these ideas and gives them knowledge to share with the community. Importantly, education in healing-centered principles should not be limited to school leadership and staff. Providing education to students, parents/caregivers, and partners ensures that the push for healing-centered institutions extends beyond the school building.

This section will provide an overview of training practices recommended by the Healing-Centered Schools Working Group. For more detailed recommendations on training and for more information about best practices, please refer to the list of resources in the Appendix.

Where Do We Find the Time and Money for Training?

Bronx schools grapple with countless professional development demands. Some are in the position to dedicate professional development resources to a new initiative, while others struggle to find the budget or the time to train staff. This section provides information about comprehensive healing-centered professional development and low-cost alternatives to traditional training models. These strategies can help Transformation Teams provide training to staff, partners, and even students and parents/caregivers in flexible ways that meet their schools' limitations and needs.

Transformation Teams should build a Healing-Centered Plan that dedicates existing professional development time and funding to healing-centered training for all school staff. We have compiled a number of organizations that provide training on healing-centered and trauma-sensitive educational practices that we feel is effective and aligned with the goals
outlined in this Roadmap. Please refer to the Appendix at the end of this document for more information about training programs and resources.

Superintendents and the Executive Superintendent can support whole-school healing-centered professional development by hosting **district-wide trainings**. For example, Superintendents and the Executive Superintendent can use dedicated professional development time to educate staff about healing-centered practices or can host a series that culminates in a certificate in Healing-Centered Learning. These events will also provide opportunities for collaboration and information sharing.

Superintendents and the Executive Superintendent can also support **budget changes at the citywide level to focus on healing-centered professional development**. Doing so will create greater opportunities in the long-term for schools to access and sustain healing-centered professional development and transformation. This will require coordination and collaboration between Superintendents and the Executive Superintendent.

Transformation Teams can also secure training **through collaboration with other schools and districts**, both in New York City and around the state. Multiple schools can coordinate a large training and share costs. Schools can also come together for informal education in the form of collaborative conversations and idea-sharing.

For schools with limited budgetary resources, a **train-the-trainer model** can be highly effective alternative. This model works especially well if the Transformation Team includes individuals that already conduct training or capacity-building in their schools. This method reduces costs by securing formal training for a smaller group of people who then train other staff, partners, students, and parents/caregivers. This model also allows for greater flexibility in scheduling. If the individuals who need to be trained are not available at one time, school-based trainers can conduct a series of trainings that participants can attend based on their availability. When using this model, it is important to ensure that the entire Transformation Team, as well as any other individuals selected to administer future training, receive formal training in full before training is turnkeyed to school staff. This will allow the Team to support one another’s understanding and training efforts, and will reduce the likelihood that information is misunderstood or diluted as it is relayed to school staff. Transformation Teams should be aware that without this whole-team training, and without meaningful buy-in from trainers and school administration, train-the-trainer models are significantly less likely to be effective.

If time is particularly constrained, **webinars** allows staff, partners, students, and parents/caregivers to access education on a flexible schedule. Webinars are not recommended for core concepts of healing-centered schools, since they typically do not cultivate the same level of engagement and understanding as in-person trainings. They may, however, work well for continued learning or smaller concepts that build on a strong foundational understanding of healing-centered practices.
After any training, staff should have the opportunity to **reflect on the material** with one another. This can happen immediately after a training, or weeks later after staff have received training in separate groups. This reflection will help staff process what they have learned and brainstorm ways that they can apply the content to their own interactions with students.

We strongly recommend that schools or districts that are able to do so **begin with a comprehensive, whole school training from qualified experts**. This strong foundation will allow schools to meaningfully engage with healing-centered change and will help staff understand how to effectively and faithfully adopt aspects of the Healing-Centered Plan. Schools that have completed this initial training, or that have already taken independent steps to educate staff about trauma and its impact on learning, may be ready to transition to a lower-cost professional development alternative like train-the-trainer models or webinar trainings.

Training should be sustained over time, with the understanding that healing-centered growth is never complete. As a long-term goal, healing-centered concepts should be integrated into the school and district’s approach to training in most, if not all, concepts. School leadership Superintendents, and Executive Superintendents can support this long-term goal by advocating the citywide adoption of healing-centered educational practices.

**Who Should Receive Training?**

The Transformation Team will be responsible for organizing and overseeing training for different parts of the school community, and many will have to do so with limited time and budgetary resources. We hope that the following recommendations will help Transformation Teams plan and prioritize training programs for their school community.

**All building staff** must receive training in the core concepts of healing-centered schools. Training should be geared toward educating staff on trauma, its impact on learning and school behavior, the importance of student safety and well-being, and practices that will help staff support student safety and well-being. Acquiring this training will require support from school leadership.

Community education should also be made available to **students and parents/caregivers**. Opening up training to the school community will generate trust and buy-in among students and parents/caregivers and will promote the use of healing-centered approaches in other aspects of students’ lives. Training will also help parents/caregivers understand and recognize the signs of trauma’s impact on learning among the students they care for. Finally, training will give students and parents/caregivers the information they need to be effective and collaborative partners in healing-centered change.

It is essential for **Principals, Superintendents, and the Executive Superintendent** to receive training and a deep understanding of healing-centered schools. As educational leaders, they oversee the structural framework for the entire school, district, or borough. With the proper knowledge, they can facilitate accurate and consistent messaging, can successfully
integrate the healing-centered transformation into all areas of school administration, and can ensure that implementation is truly advancing the school’s ability to be more healing-centered.

For similar reasons, it is essential that the **Transformation Team** also receive training on and a deep understanding of healing-centered schools. As the team of individuals responsible for building consensus, identifying priorities, and developing, implementing, and assessing Healing-Centered Plans, Transformation Teams should become resident experts in healing-centered principles and educational practices.

**What Topics Should Training Cover?**

Transformation Teams must decide what types of training their school communities need in order to become healing-centered. Training priorities will be different for each school. To identify their school’s training priorities, the Transformation Team should revisit their community’s conversations about community needs, challenges, and goals. The Team should then select training topics that are responsive to those needs, challenges, and goals. As with every step in the change process, the Transformation Team should also ensure that identified training priorities are consistent with the Healing-Centered Principles. For example, the team should consider whether the identified training will advance staff’s ability to help students feel physically, psychologically, and emotionally safe.

Some training areas will be necessary for all schools engaged in the healing-centered transformation process. The early stages of the Healing-Centered Plan should include trainings that covers trauma, including school-based trauma, trauma’s impact on learning, core principles and practices of healing-centered schools, and how healing-centered schools can address vicarious trauma and secondary stress among school staff. This training will be foundational to the success of action items in the Healing-Centered Plan.

Anti-racism education and implicit bias training are also integral to a healing-centered approach. These trainings should be made available to all members of the school community. These trainings can be ineffective if not implemented as part of wider culture change, so Transformation Teams should meaningfully build on anti-racism education by forming an anti-racism subcommittee. The anti-racism subcommittee should follow up on these trainings, provide support as staff implement these principles, create opportunities for community reflection and discussion, and outline specific steps that the Transformation Team can take to create a school culture that actively challenges bias, discrimination, and racism. The anti-racism subcommittee should be composed of members of the Transformation Team as well as other members of the school community dedicated to advancing anti-racist educational practices. You can find information about organizations that offer anti-racism training programs in the Appendix.

In our Working Group’s community conversations, parents/caregivers, students, educators, and providers have expressed a desire for school staff to receive training in the following areas. If your Transformation Team is having difficulty identifying training priorities,
you can start by considering these topics:

- Trauma-informed universal precautions;
- Vicarious trauma and secondary stress syndrome, teacher wellness strategies, and vicarious post-traumatic growth;
- Restorative practices;
- Implicit bias and anti-racist educational strategies;
- Culturally responsive-sustaining education practices;
- The harm of improper calls to, or threats to call, the State Central Registry and how to work with families on concerns about educational neglect;
- Mental Health 101 and Youth Mental Health First Aid;
- Successful collaboration with parents/caregivers and families; and
- How to build relationships with clinics and community-based organizations.

You can find more information about training resources and materials in the Appendix at the end of this Roadmap.

**What Other Strategies Can We Use to Cultivate a Healing-Centered Workforce?**

The Bronx has the highest rate of educator turnover in the City. During the 2017-2018 school year, 22% of educators left Bronx schools after teaching for less than five years. In parts of the South Bronx, the turnover rate climbed as high as 31%. Successful transformation to a healing-centered framework often decreases staff turnover, but schools will inevitably continue to hire after the begin their transformation. To help new staff support the healing-centered mission of the school and to bring new staff into this paradigm, Transformation Teams should incorporate Healing-Centered Principles into hiring, new staff orientation, and the cultivation of an educator pipeline.

With the support of Superintendents and the Executive Superintendent, Principals should ensure that potential hires demonstrate an openness to and an understanding of healing-centered and trauma-informed education principles. School leadership can assess this by having a conversation with the applicant about their understanding of childhood trauma or their views on social emotional well-being and its relation to learning. Transformation Teams and school leadership can collaborate across schools to develop strategies for assessing an applicant’s fit for a healing-centered educational environment. The Working Group recognizes that school leadership may not have full control over the hiring process. For that reason, we also recommend that school staff and leadership work together to advocate that the United

19 Id.
Federation of Teachers and the NYC Department of Education incorporate healing-centered principles into hiring practices citywide.

**DID YOU KNOW:** Legislators and institutions of higher education can also help cultivate a healing-centered workforce. New York State Assembly Member Latoya Joyner is in the process of drafting a bill that would require educators to have received some form of training on trauma in order to qualify for their teaching certificate. Institutions of Higher Education can build on this effort by adding coursework about trauma, its impact on learning, and healing-centered educational practices.

Transformation Teams can develop a new hire orientation for all school staff. This is especially critical for schools that have high staff turnover rates. The new staff orientation should introduce the core principles of healing-centered schools, the Healing-Centered Plan crafted by the Transformation Team, and the role that the newly hired staff member will play in supporting the Healing-Centered Plan. To model and uphold the culture of community that the school is building, the orientation should involve members from all parts of the school community. Transformation Teams can even collaborate across schools or districts to develop orientation pieces that can be used throughout the Bronx.

**CASE STUDY:** The Institute on Trauma and Trauma-Informed Care supported one organization’s transformation, including their new-hire orientation. The organization lacked the resources to include extensive trauma-informed education in their orientation, so they created a welcome video featuring organizational leadership discussing the importance of trauma-informed principles, a timeline of when new hires would receive trauma-informed training, and clips of staff discussing how they use trauma-informed practices each day. Transformation Teams can create similar videos that also feature students and parents/caregivers talking about their experience with their school’s new healing-centered practices.

Bronx schools can also cultivate healing-centered skills in other workforces. For schools that have on-site mental health services or school-based partnerships, the Transformation Team may want to provide training or informational sessions for the partner organization’s staff. Partner organizations may also provide feedback to school staff and leadership about the trauma impacting students or the implementation of Healing-Centered Plans. Transformation Teams can use that feedback to develop future training or workforce development initiatives.
The Transformation Team can create a **mentorship network** to support staff and leadership throughout the healing-centered transformation. This team should consist of individuals who have volunteered, individuals selected by leadership, and individuals who are likely to continue working at the school for a long time.²⁰ This network can promote the infusion of healing-centered practices in educator culture and create opportunities for educators to receive specific feedback on the appropriate use of those practices.

Finally, to advance culturally-responsive education and challenge the systemic inequity that contributes to students’ trauma, Bronx education leadership and Transformation Teams should work over the long-term to **cultivate a workforce development pathway** for Bronx students and young adults interested in becoming Bronx educators. Currently, Bronx schools serve a student population that is 28% Black and 62% Latinx, but only 20% of Bronx teachers are Black and only 24% are Latinx.²¹ Meanwhile, nearly half of all Bronx teachers are white, even though only 4% of the Bronx student population is white.²² This means that students are rarely taught by staff members who look like them and can identify with their experiences with culture, racism, and privilege. A workforce development pathway can address this problem by creating opportunities for young people in the Bronx to become educators in their own communities. This pathway can provide young people with opportunities to learn more about the education profession, receive mentorship, and access support as they navigate higher education. The Healing-Centered Schools Working Group is interested in collaborating with Bronx schools to develop this pathway.

V. Academic Healing-Centered Strategies

**Implementing Culturally Responsive-Sustaining Curricula**

Culturally responsive-sustaining education (CRSE) is central to a healing-centered school. Healing-Centered Plans must be responsive to the diverse students and communities that make up each school and school district.

Over the past three years, parents with the NYC Coalition for Educational Justice (CEJ) have pushed the NYC Department of Education (DOE) to embrace CRSE as a key strategy for an equitable education system with high levels of engagement and achievement for all students. The campaign included advocating for anti-bias and cultural competency trainings for school staff and diverse, culturally responsive curricula.

---

²² Id.
In July 2019, DOE adopted a definition of CRSE as: “a cultural view of learning and human development in which multiple forms of diversity (e.g., race, social class, gender, language, sexual orientation, nationality, religion, and ability) are recognized, understood, and regarded as indispensable sources of knowledge for rigorous teaching and learning.” The definition explains that, “CRSE uses educational strategies that leverage the various aspects of students’ identities, including the rich cultural, racial, historical, linguistic characteristics of students to provide mirrors that reflect the greatness of who their people are and windows into the world that allow students to connect across cultures.”  

Like the healing-centered approach, CRSE encompasses the entirety of a school. It is reflected in the curriculum and instruction, school climate, and family and community engagement. All Transformation Teams should consider adopting the following practices to become more culturally responsive and sustaining.

Curriculum and Instruction

Students excel in school when they see themselves reflected in the classroom and have strong, authentic relationships with their teachers. CRSE has been shown to increase grade point averages, student engagement, self-image, critical thinking skills, and graduation rates, while decreasing dropout rates and suspensions. In practice, CRSE changes implemented by Transformation Teams may look like the following examples:

- Students read a variety of books that center Black characters and authors and portray Black people in positive and uplifting ways.

- Teachers support students as they learn about important and overlooked people in U.S. history. Students, for instance, learn about Black and Latinx trans women leaders, such as Marsha P. Johnson and Sylvia Rivera during the Stonewall Riots.

- In PS 290 A.C.E. Academy for Scholars in Queens, students used the Culturally Responsive Curriculum Scorecard to analyze the representation and cultural

---


competence of the books in their classroom’s library. They found that many of their libraries were lacking in cultural responsiveness and wrote letters to the Chancellor asking for more diverse books. Creating opportunities, like this one, for students to share power in the classroom normalizes their agency and models their value as members of the school community.

- Teachers can begin the day with brief civics presentations or discussions of current events that center marginalized communities. They can build student involvement through presentations and discussions and encourage students to draw knowledge from their own experiences.

- Educators encourage students to carry out community-based, experiential learning projects. These projects can become catalysts for change and create space for students to exercise agency and empowerment.

School Climate

Many schools currently have harmful school climates with discipline policies and practices that disproportionately target Black, Latinx, and Native students and students with disabilities. A healing-centered and culturally responsive school is a safe and liberatory space that respects and honors students of all races, cultures, and abilities, especially those who have been historically marginalized. It is a school where all staff work to cultivate the knowledge and skills that students need to transform the injustices in our society. In practice, it may look like the following examples:

- Teachers, principals, and school staff receive anti-bias trainings on race, power, and privilege. Superintendents, Transformation Teams, and SLTs follow up with DOE leadership to secure these trainings.26

- The school district recruits, supports, and promotes teachers and school leaders of color.

- Transformation Teams implement positive, restorative practices as alternatives to punitive discipline policies. They might hire restorative justice circle coordinators to prioritize school-wide social emotional well-being.

- The school district invests in social workers and guidance counselors, instead of police officers, to support youth development.

- The school district creates “Grow-Your-Own” programs to recruit, train, and support parents and community members to become certified teachers.

---

26 CEJ conducted organizing meetings, led rallies, coordinated meetings with DOE staff and City Council, conducted teach-ins, and took other advocacy steps to secure these anti-bias trainings.
• The school district expands and invests in access to mental health services.

Family and Community Engagement

Schools can also move towards culturally responsive family engagement by transforming traditional notions of parents’ values and roles and by providing opportunities for staff and parents to build strong, authentic relationships as equal partners. In practice, CRSE might look like the following examples:

• School staff take the time and space to understand and respect students’ cultures. For example, they can take a yearly community tour led by parents and community members to get to know the neighborhood history, institutions, leaders, and culture.

• Schools provide opportunities for staff and parents to build strong, authentic relationships as equal partners by giving staff time and money to make regular home visits to students’ families. These visits should be made with the goal of building relationships, not discussing a problem.

• Schools ensure that parent meetings and parent-teacher conferences are held at different times of day to accommodate parents’ work schedules. Schools offer translation, food, child care, and assistance with transportation.

• Outreach and communication with parents is active and personal, in their home language, and their home communities. This is more equitable than outreach by flyers, robocalls or emails, only in English, and only on school premises.

Superintendents and the Executive Superintendent can support CRSE by supporting the above changes and creating district-wide policies and resources that advance CRSE. They can take action to ensure that their school districts are aligned with the New York State Framework for Culturally-Responsive Sustaining Education, and ensure that schools and districts are supporting the long-term implementation and success of CRSE.

CRSE will help students, educators, and district leaders create educational environments in which students know how to love, respect, and honor themselves, their people, and their histories. Students will be most able to grow their strengths when every aspect of their education centers and honors their cultures, knowledge, and communities. This will actively foster a healing-centered school environment where students who have long been

---


marginalized and denied a fair share are respected, honored, loved, and prepared to shape a life they deserve for themselves and their communities.

**Incorporating Social Emotional Learning into Curricula**

In 2018, Congress authored several education bills that addressed a variety of issues including chronic absenteeism, graduation rates, teacher wellness and the capacity of parents and teachers to teach students social emotional skills. This effort led to the formation of the National Commission on Social, Emotional, and Academic Development. Two members of this commission served on the board of the Collaborative for Academic, Social, and Emotional Learning (CASEL), an organization that has been involved with social and emotional learning for twenty years.

The standard definition and framework of SEL, adopted by many states, districts and counties comes from CASEL: “Social and emotional learning (SEL) is the process through which children and adults understand and manage emotions, set and achieve positive goals, feel and show empathy for others, establish and maintain positive relationships and make responsible decisions.”29 The CASEL framework includes the five competencies: self-awareness, self-management, social awareness, relationship skills and responsible decision-making.

In 2018, the New York State Education Department mandated that all public schools include mental health education as a fundamental part of their school curriculum.30 This mandate embraces the CASEL definition and framework. It addresses several dimensions of health, including mental health, and aims to promote student understanding, attitudes, and behaviors that advance students’ well-being and dignity.

On the heels of this legislation, the DOE took steps to make the Sanford Harmony social emotional curriculum available to schools.31 This is a meaningful step, and many schools have begun to use the curriculum. But a healing-centered school’s relationship with social emotional learning must go farther than adoption of a curriculum. The Transformation Team, school, and district must identify the needs of their school communities, examine their existing curriculum, and assess that curriculum’s impact on students and school culture. Transformation Teams must take affirmative steps to ensure that this curriculum, or any other curriculum they adopt, teaches and promotes emotional wellness and academic achievement to all students, including those impacted by trauma. Transformation Teams should also ensure that their curriculum and

---


other aspects of school culture create opportunities for students to practice their social emotional skills throughout the school day. Finally, social emotional learning should be implemented in tandem with school-wide positive behavior supports to ensure consistency throughout the school environment.

The CASEL framework addresses the development of the aforementioned five core competencies in the classroom through curriculum and instruction, through school-based policies and practices, and through family and community collaboration. Transformation Teams can take the following steps to assess, build, and improve their SEL curriculum and instruction:

- Search for evidence that the school has incorporated all five competencies of SEL in its existing curriculum.\(^\text{32}\) These competencies are as follows:
  - Self-awareness
  - Self-management
  - Social Awareness
  - Relationship Skills
  - Responsible Decision Making

- Examining each grade level separately, determine which of the five competencies are lacking and which are strongly exemplified;

- Collaborate with the school community to identify the SEL competencies that students in the school community would most like to grow;

- When identifying areas for growth in certain SEL competencies, pay close attention to differences between grade levels or any other competency patterns;

- Map out your school’s areas of SEL competency need and growth and identify developmentally appropriate instructional approaches to support competency growth;

- Consider adopting instructional supports, peer mentorship networks, informal staff discussions, and other practices to support staff as they implement SEL and to encourage staff to share successful strategies; and

- Partner with parents/caregivers to promote SEL learning by encouraging parents to model and support growth in one or more SEL competencies at home.

\(^{32}\) *What Is SEL? CASSEL.*
Universal Precautions in Classroom Instruction

Universal precautions treat all students with care and are the manifestation of the healing-centered belief that any student may have been impacted by trauma. These precautions benefit all students because they reduce management challenges that consume teacher time and energy, increase all students’ sense of safety and emotional well-being, and allow teachers to maintain a higher level of instruction. While these precautions are designed to benefit all students, they are particularly impactful for students who have experienced trauma or who have difficulty coping effectively in the school environment. Universal precautions help these students maintain a level of social emotional well-being and readiness to learn that is difficult to achieve in traditional classroom environments.

School staff, parents/caregivers, and even students may be surprised to learn that a healing-centered approach involves changes to academic instruction. Academic universal precautions are necessary because trauma impacts students’ ability to learn. Past or ongoing trauma can limit focus and concentration, impulse control, memory, and executive functioning abilities like organization and prioritization. To properly respond to and mitigate these impacts, healing-centered practices must extend beyond social emotional and community-building practices to include instructional supports.

This section outlines a variety of universal precautions that can be implemented during academic instruction. As with any other part of the healing-centered transformation process, Transformation Teams should carefully consider these practices or programs to determine which are most responsive to the needs of the school community, school staff’s level of understanding and commitment, priorities identified by the school community, and the Healing-Centered Principles. The following strategies require little to no cost to adopt and can be adapted to all classroom settings. For that reason, Transformation Teams may decide to build staff’s familiarity with most, if not all, of the precautions listed below. 33

UNIVERSAL PRECAUTIONS IN CLASSROOM INSTRUCTION

School staff should learn to recognize the signs of trauma or social emotional disruption. Signs may include shifts in attendance, homework completion, talkativeness, alertness, or participation; exaggerated emotional or behavioral responses; or behavior that appears to be random or unconnected to any triggering event or pattern that the staff member can observe. These behaviors are not willful defiance, but are a communication of the students social-emotional well-being and needs. When staff members recognize these signs and become aware that a student may be experiencing hypersensitivity, hyposensitivity, or social emotional challenges, they are better equipped to respond with compassion and provide students with the supports they need to return to ready-to-learn state. A response that prioritizes social emotional well-being and readiness to learn is more effective than a punitive response, which views academic disengagement as willful defiance.

33 For more information about chunking instructional material, reducing the amount of content covered while increasing recall and depth of understanding, and seating arrangements, please refer to Understanding Trauma and Trauma Responsive Educational Practices. Trauma Responsive Educational Practices.
**Chunking instructional material** reduces neurobiological dysregulation and allows students greater time to process smaller pieces of information. If students have little background knowledge about the material or if the content is complex, provide instruction in 4-8 minute chunks with a brief break in between. If the students have background knowledge or if the content is not as complex, provide instruction in 8-15 minute chunks with a brief break in between.

Similar to chunking, educators can **reduce the amount of content covered while increasing recall and depth of understanding** by using the following strategies:
- Plan lessons in intervals by breaking up instructional time into a variety of activities like lecture, research, creative time, and sharing.
- Use visuals or encourage students to create visuals to represent ideas, create metaphors, and activate the senses.
- Incorporate interaction with content through individual reflection, partnered questions, and small group discussions.

**Communicate academic expectations** clearly, consistently, and ahead of time. Provide regular reminders for expectations by posting them in a part of the classroom that is visible to all students. When it is necessary to deviate from previously communicated expectations, acknowledge the deviation.

**Individualized instruction** that is tailored to a student’s skill and engagement helps students maintain a ready-to-learn state. Instruction that requires students to perform beyond their ability can increase students’ stress levels or replicate the dynamics of a traumatic environment. For students who have not developed adaptive coping techniques for the classroom environment, this stress can disrupt their ability to engage with learning.

**Call on students in a predictable, consistent manner** that is clearly communicated ahead of time. Ensure that other aspects of classroom participation are relayed in advance and are administered with consistency and predictability. Random or inconsistent classroom participation expectations are more likely to cause students to experience hypervigilance or hypersensitivity, disrupting their readiness to learn.

**Monitor seating arrangements** and permit students to choose the seat that feels comfortable for them. If you can, arrange the seats in a U-shape so that no student has someone behind them.

Neurobiological dysregulation is common in students who have experienced trauma, are experiencing anxiety, or are grappling with intrusive flashbacks or memories. Educators can take breaks from instruction to conduct mindfulness exercises, grounding techniques, or movement and rhythm breaks to reduce neurobiological dysregulation.

Educators can also address neurobiological dysregulation by creating space for students to step away from work, as needed, to **take a break and enjoy a simple activity**. This may involve an individualized mindfulness exercise or a brief activity involving tactile objects in the classroom.

Transformation teams should **examine the way their school engages with high-stakes testing** and consider how that testing may cause or exacerbate student trauma. Teams should work with school or district leadership to identify healing-centered changes to high-stakes testing practices. In the long-term, Transformation Teams may decide to collaborate across schools or districts to advocate for an end to high-stakes testing practices.

Transformation Teams should assess whether their school has a pattern of **passing along students who have not received adequate support** and are not ready to advance. If the Team identifies such a pattern, consider gaps in academic support that may be contributing to this problem and identify steps to address those gaps.
A healing-centered approach also requires making changes to the school environment to ensure that students, parents/caregivers, and staff feel safe. When students and other community members feel safe and seen in their school environment, conflicts and safety incidents decrease, trust and community get stronger, and students are better able to engage with academic instruction. Changes to the school environment will impact school culture, discipline responses, the physical environment, the way policies and procedures are carried out, and how school staff build relationships with partners and community members. Adopting these changes is a process, and it is not feasible for any school to adopt all of these changes at once. Nevertheless, by building a long-term commitment to this work, schools can adopt many of these changes over the course of a few years.

As with any other part of the healing-centered transformation process, Transformation Teams should carefully consider these practices or programs to determine which are most responsive to the needs of the school community, school staff’s level of understanding and commitment, priorities identified by the school community, and the Healing-Centered Principles. Some of these changes can be implemented quickly, while others require a long-term effort. Over time, we hope that all Bronx schools will adopt some or all of these healing-centered strategies.

**NOTE ON SAFETY:** Many of these changes involve modifying or removing programs that schools have upheld for decades as security precautions, like suspensions and aspects of the Citywide Behavioral Expectations. Many of these practices preserve the physical safety of some students, while harming the physical safety of other students or the emotional and psychological safety of all students. Healing-centered practices aim to upend this pattern. Rather than reacting to physical safety incidents in a way that harms our community’s emotional and psychological safety, healing-centered practices allow us to address the underlying issues that result in physical safety incidents. When schools address these underlying issues, they improve physical, psychological, and emotional safety by reducing the number of overall incidents. On top of that, schools can further promote psychological and emotional safety by removing practices and safety measures that make students and parents/caregivers feel criminalized, othered, or reluctant to trust school staff.
Being Healing-Centered Means Being Anti-Racist

Healing centered schools must be actively anti-racist. This means that all school staff - educators, administrators, social workers, counselors, related services providers and support staff – must be actively anti-racist. 66 years after Brown v. Board of Education, the landmark Supreme Court decision that ruled school segregation unconstitutional, we have yet to achieve anything close to racial equity in education. This is evident in the way we fund our schools, the way we limit access to gifted and talented programs, the distribution of arts and sports programs, and the way we discipline students.\(^{34}\) Staff, parents/caregivers, and students must work together to take intentional steps that dismantle the perpetual, systemic racism that exists within schools and that disrupt instances of discrimination and bias.

Each of us carry racist biases that we must confront with intention through introspection, reflection and action. We must practice vigilant self-awareness to understand ourselves and our reactions and responses in school and in the classroom.\(^{35}\) Here are some questions that Transformation Teams, led by the anti-racism subcommittees discussed in Section IV, can use to approach this critical work:

- How does your power and privilege show up in your work with students, take up space, or silence others?
- What narratives are you telling yourself about students, and how do these narratives affect grading, behavior management, and other interactions?\(^{36}\)

School staff who are ill-equipped to recognize and name racism and discrimination are unable to confront their own internalized racism and are unable to respond to racist dynamics in their school communities. Healing-centered schools must take intentional steps to build staff capacity to understand and confront racism and the structures that uphold white supremacy. Transformation Teams, led by their anti-racism subcommittees, can promote capacity-building, provide intervention training, and model disruption of institutional racism on school-wide and individual levels through the following actions:\(^{37}\):


\(^{36}\) Id.

\(^{37}\) This list is adapted from the following article: Ferlazzo, L., *Four Ways Schools Can Support Teachers to Become 'Actively Anti-Racist'*. Education Week - Classroom Q&A with Larry Ferlazzo, June 08, 2020. Retrieved June 17, 2020, from [http://blogs.edweek.org/teachers/classroom_qa_with_larry_ferlazzo/2020/06/four_ways_schools_can_support_teachers_to_become_actively_anti-racist.html](http://blogs.edweek.org/teachers/classroom_qa_with_larry_ferlazzo/2020/06/four_ways_schools_can_support_teachers_to_become_actively_anti-racist.html).
• Seek out and uplift the voices of Black students and parents/caregivers and non-Black students and parents/caregivers of color in their school community.

• Partner with Black students and parents/caregivers and with non-Black students and parents/caregivers of color to examine and assess discriminatory systems, practices, and policies in school. Identify steps to confront those discriminatory structures. This does not mean placing the burden on students, parents/caregivers, or staff of color to lead efforts to dismantle discriminatory school systems. White allies must step up and provide support.

• Analyze, revise, and abolish practices and relationships, including relationships with government agencies, that harm or do not serve Black communities or non-Black communities of color.

• Create space, provide resources, and establish support networks to help staff engage in the internal work of becoming “critically consciousness, reflective practitioners equipped to shift mindsets.”

Anti-racism also means engaging in empathetic, culturally responsive, and healing-centered support when students respond to trauma or to social emotionally difficult situations with maladaptive behaviors. This is important for two reasons. First, staff should recognize that a student’s behavior may be rooted in valid feelings of pain or anger toward dynamics of racism or inequity occurring in the school community or other aspects of the student’s life. When that pain or anger manifests at school, staff should act as critical thinkers and empathic partners. By employing a healing-centered response, staff can radically reframe their understanding of these behaviors and respond in a way that nurtures students’ social emotional well-being. 38 Second, staff who take an intentionally anti-racist, culturally responsive, and healing-centered approach to maladaptive behavior may be less likely to respond to behavior in a racially disparate manner. 39 For example, a staff member who acts uncritically on racial biases may make disciplinary decisions based on the racist bias that Black girls are more angry, are more aggressive, and are to be treated like adults. 40 This staff member may issue a suspension for a Black girl who raises her voice, while later offering social emotional support to a white girl who raises her voice. Transformation Teams can also support an anti-racist response to behavior by incorporating anti-racist principles into staff mentorship networks, discipline processes, reviews of discipline decisions, and trainings, including trainings on trauma and behavior.

38 Section VI. Non-Academic Healing-Centered Strategies: Changing the School’s Response to Behavior contains several strategies that can be used to employ a healing-centered response to maladaptive behaviors.
An anti-racist, healing-centered approach to education also involves meaningful involvement of students and parents/caregivers in anti-racism education and discussions. Students and parents/caregivers should be invited to participate in anti-racism and implicit bias workshops. In addition, Transformation Teams, led by their anti-racism subcommittees, can create opportunities for groups of students and, separately, groups of parents/caregivers to gather, discuss these ideas, and engage in open communication with the Transformation Team and school leadership about dynamics of racism and bias within the school community. These opportunities may include:

- Town Halls
- Movie or documentary watch parties
- Book discussions
- Restorative circles

**Changing the School’s Response to Behavior**

One central principle of the healing-centered approach is the recognition that challenging or disruptive behavior comes not from willful choice, but from a student’s social emotional state. Staff should respond to challenging behavior by proactively and compassionately exploring why the student is not ready to learn and by helping the student reach readiness. This concept aligns with the Healing-Centered Principle that “Social emotional well-being is a necessary ingredient for learning.”

To promote student’s well-being and readiness to learn, school staff must identify social emotional strategies, refocusing prompts, and crisis response techniques that help students regulate their emotions and return to a ready-to-learn state. A healing-centered response to behavior also means avoiding harmful discipline strategies, including those that remove

**TIP:** Transformation Teams in schools with significant and/or racially disparate discipline rates may implement a self-review or peer-review process for discipline decisions. For example, a staff member who issues a classroom removal may be prompted to revisit, analyze, and revise that decision with a peer. Revisit: What events, actions, thoughts, and feelings precipitated the decision to remove the student? Analyze: Why did I decide to remove the student? How was I feeling at the time? What assumptions was I making about the student or their behavior? Does this student make me uncomfortable? Would I respond to other students in a similar manner? Revise: How should I have handled this differently? What would a healing-centered and anti-racist response to this behavior look like? Have I invested energy in developing a positive relationship with this student?
students from the classroom or school environment unnecessarily or for more than a few days. When schools achieve this goal and move toward a healing-centered framework, they reduce the number of incidents that disrupt learning and impact students’ sense of safety.

**Restorative Justice Practices**

Restorative justice is “a theory of justice that emphasizes seeking to repair rather than to punish when there is harm.” According to the Dignity in Schools Campaign, a school-based restorative justice framework offers “a broad range of restorative justice approaches that proactively build school community based on cooperation, mutual understanding, [and] trust and respect.” Under this framework, schools “respond to conflict by including all people impacted by a conflict in finding solutions that restore relationships and repair the harm done.” When implemented properly, restorative justice practices have been shown to reduce suspensions, expulsions, and disciplinary referrals.

Restorative justice is deeply aligned with healing-centered education. It aims to address the roots of student behavior, invites our communities to rethink the way we engage with harm, emphasizes strong relationships between school community members, and works to build genuine communities of learning. Through the hard work of community advocacy and with the support of educators and DOE leadership, many Bronx schools have already begun to adopt restorative justice practices. This is meaningful progress that brings Bronx schools closer to the goal of being healing-centered. However, the challenges that staff and students report experiencing with restorative justice demonstrate the importance of adopting an integrated, whole-school approach to healing. In this section, we discuss some of those challenges and recommend that Transformation Teams consider and implement best practices for restorative justice.

In our community sessions, some staff and students reported that their schools only employ restorative justice as a response to conflict. Their schools did not employ community-building restorative practices like culturally responsive circles or integration of restorative values in classroom learning. In addition, these community members reported that participation in restorative circles felt like going through the motions, and that the values and ideas presented in those circles did not line up with school culture. For example, one student said that he does not buy in to restorative circles because while he is expected to correct the harm he has caused, school staff are not held to the same standard when they inflict harm upon students. Another student reported that she does not buy in to restorative circles because

---


42 Id.

43 Id.

they are centered around healing the community, but her school does not have a strong sense of community. Other students report that restorative practices feel meaningless when the outcome—-suspension—often stays the same.

These examples illustrate how important it is to infuse restorative practice and healing-centered values throughout the entire school. When healing-centered practices are implemented in isolated initiatives, those initiatives struggle to succeed as they fight against a school culture not yet centered on healing. Instead, the Healing-Centered Schools Working Group recommends adopting restorative justice practices with fidelity as part of a healing-centered transformation. We recommend using the following strategies from Dignity in Schools’ Model Code on Education and Dignity (DSC Model Code) to ensure that restorative justice practices are implemented effectively and in a manner consistent with the Healing-Centered Principles.

The DSC Model Code recommends that schools and school districts provide resources, training, and technical assistance to support the implementation of restorative justice practices. In line with these recommendations, Transformation Teams focused on restorative justice should collaborate with other teams across their district, with their Superintendent, and with the Executive Superintendent to secure the following resources and changes.45

- Transformation Teams should collaborate to adopt a district-wide restorative philosophy and strategy for integrating restorative justice practices into academic and non-academic aspects of the school environment, including responses to behavior.

- Transformation Teams should collaborate across district or borough to develop a centralized School Climate and Culture Committee. This Committee, comprised of individuals engaged in restorative justice practice, can facilitate ongoing training, technical assistance, program assessment, and exchange of ideas and practices.

- Transformation Teams should advocate for the Superintendent or Executive Superintendent to fund a Restorative Coordinator position within their school. This Coordinator will facilitate development and implementation of restorative practices. This Coordinator should work closely with the Transformation Team’s anti-racism subcommittee to ensure that restorative justice practices are implemented with an anti-racist framework.

The DSC Model Code advises schools to establish a School Climate and Culture Leadership Team to develop and implement a plan to integrate restorative justice practices throughout school policies and culture. Under the healing-centered schools framework, Transformation Teams will already be engaged in this work. In line with DSC Model Code recommendations, Transformation Teams should take the following steps to integrate

restorative justice practices school-wide:46

- Gather input from staff, students, parents/caregivers, and other members of the school community. Use that input to develop a plan for restorative justice training, technical assistance, policy changes, and practices.

- On a quarterly basis, assess implementation and impact on school culture, discipline, and psychological, emotional, and physical safety. Report on this impact.

- Consider ways that the Transformation Team or wider school community can engage with the wider community to build broader support for restorative justice practices.

In line with a healing-centered approach to education, the DSC Model Code recommends that schools take intentional steps to **develop a positive school climate**. Schools can create this climate by integrating “classroom-level practices, staff-focused processes, and school-wide Restorative Justice Practices that build community, strengthen relationships, promote inclusiveness, enhance communication and promote culturally affirming social and emotional learning.”47 Transformation Teams can integrate restorative justice values throughout the school environment by taking the following steps:48

- Explore and implement universal precautions listed in Section V. Academic Healing-Centered Strategies and Section VI. Non-Academic Healing-Centered Strategies.

- Support instructional staff in implementing restorative circles as a teaching-method. Classroom-based circles can help “build relationships, set academic goals, foster culturally affirming social and emotional learning, explore the curriculum and set classroom norms for behavior.” Staff may use Check-In circles each morning to create space for students to engage in social emotional reflection or may use Discussion Circles to explore a topic of study in greater depth.

As a central tenet of restorative justice practice, the DSC Model Code recommends that schools **respond to harm or conflict by using a continuum of practices that are restorative, not punitive**. Under this continuum, all school community members who are impacted by a behavior should discuss the harm, its root causes, and its impacts and should come to collective agreements about how the harm will be addressed. Where appropriate, students or staff who inflicted the harm may participate in a restorative process “to hear from all stakeholders and determine actions that meet restorative practice principles.” Students should have opportunities to lead circles and other practices. The following restorative justice practices may

---

46 Id. at p. 78.
47 Id.
48 Id.
be used as part of this continuum: 49

- **Restorative Circles** provide an opportunity for participants, guided by one or more circle keepers, to take turns speaking on a topic. There are many different kinds of circles.
  - **Responsive Circles or Discipline Circles** are used to address and repair harm. These circles may be used to address harm inflicted by a student upon another student, harm inflicted by a student upon a staff member, or harm inflicted by a staff member upon a student.
  - **Classroom or Staff Circles** can be used to build community, establish norms, and check in about well-being, problem-solving, or decision-making.
  - **Intensive Support Circles** support struggling members of the school community by surrounding them with other school community members to form “a web of support characterized by strong relationships and shared responsibility.”
  - **Reintegration Circles** provide affirmation, belonging, and support to school community members who are returning to school after being excluded because of suspension, arrest, incarceration, illness, or similar circumstances.
  - **Culturally affirming social and emotional learning circles** create opportunities for role-play and development of positive behavioral strategies.

- **Restorative Conferencing** or **Community Conferencing** is used as an alternative to exclusionary forms of discipline and is based on the idea that students should only be excluded from their classroom when doing so is absolutely necessary to protect the safety of the school community. In a Restorative Conference, a facilitator individually prepares each person affected by a harm and then brings them together to share what occurred, how they were each affected, and what they feel is needed to repair that harm and prevent future harm.

- **Fairness Committees** are committees of students and staff who are trained in restorative justice practices. They work with school community members who have violated community norms to develop collective agreements.

- **Impact Panels** are forums where school community members who were harmed by an incident can discuss that harm before the community in a non-judgmental and non-blaming manner. These panels educate other community members about the impact of harm.

49 For more information on this continuum or any of the practices listed, please refer to *A Model Code on Education and Dignity*. Dignity in Schools Campaign 2019, PDF File pp. 78-80.
• **Restorative Mediation** allows community members who have been harmed to meet with the community member who caused the harm in a “safe and structured setting” so that they can “engage in a mediated discussion” facilitated by a trained mediator.

Some Bronx schools have not yet begun to adopt the restorative justice practices outlined above. For those schools, the healing-centered transformation is an opportunity to approach restorative justice in a holistic, thoughtful way that considers wider school culture. Fully integrating these values into school culture can help reduce conflict, build a stronger sense of community, and ensure that students are ready to learn.

As discussed above, many other schools are already engaged in the difficult and important work of implementing restorative justice. For those schools, the healing-centered transformation provides an opportunity to step back, assess any obstacles that may be preventing the success of restorative justice programs, and increase the likelihood that those programs will succeed by integrating them into a whole school culture shift. By doing so, schools can also expect to see a reduction in the number of incidents that necessitate a behavioral response.

**Alternatives to Suspension**

As the example in the previous section shows, many students feel that restorative justice programs lack authenticity when they are carried out alongside traditional suspensions and other punitive responses. Students in our community discussions reported that suspensions and other punitive responses make them feel unwanted, pushed out of school, alienated and dehumanized. In addition, traditional responses fail to address the underlying causes of student conflict and challenging student behavior. When we do not address those root causes, we do nothing to challenge the conditions that make students feel physically, psychologically, and emotionally unsafe. In contrast, a healing-centered framework addresses the problems posed by traditional approaches.

A healing-centered framework for addressing behavior gets to the root causes of student conflict and challenging student behavior, responds to those causes with compassion, and reduces the number of school-based incidents in the long-term by bolstering students’ sense of physical, psychological, and emotional safety while at school. As schools transition to the healing-centered framework, they will also build trust and a strong sense of community with students and parents/caregivers – key ingredients for reducing student conflict and challenging student behavior. In short, a healing-centered framework is one in which discipline is redefined as instruction that corrects behavior, molds character, and helps students develop self-control.

The Healing-Centered Schools Working Group strongly recommends that schools use **alternatives to classroom removal or suspension** as often as possible. The DOE has taken great strides to encourage the use of these strategies by updating the Citywide Behavioral
Expectations to Support Student Learning. In updates to the Citywide Behavioral Expectations issued in September 2019, the DOE added the following language:

“When a student engages in misconduct, supports are provided to address the student’s inappropriate behavior and/or underlying needs, in conjunction with a disciplinary response, if appropriate. The goal is to foster social emotional growth and pro-social behavior and prevent future misbehavior” (emphasis added).^{50}

Throughout the Citywide Behavioral Expectations, school leadership and staff can find recommended supports and interventions for each level of infraction. Each list of supports and interventions is preceded by the reminder that “Student supports and interventions may be used in lieu of or in tandem with disciplinary responses” (emphasis added).^{51} The Healing-Centered Schools Working Group strongly urges Transformation Teams to review their schools’ use of supports and interventions and implement changes to promote their use.

The Healing-Centered Schools Working Group also strongly urges Bronx schools to adopt suspension diversion programs. When students engage in challenging or disruptive behavior, they are often responding to a difficult situation with the strategies that they feel most comfortable using. They may employ a coping strategy that protects them in other difficult or traumatic settings but that is inappropriate in the school environment. Punitive responses will not correct this behavior. Instead, schools should help students build their emotional awareness, social emotional skills, and toolbox of coping strategies.

Under a healing-centered approach to discipline, students who would receive a suspension under the current system should be offered the opportunity to opt-in to a diversion program that (1) connects them with long-term mental, emotional, and behavioral health resources and (2) allows them to return to school quickly after receiving short-term social emotional education related to the behavior that triggered the suspension.

To view a successful model of this program, we recommend that Transformation Teams look to the diversion program put in place by the Schenectady City Schools District.^{52} Under that program, parents/caregivers who are notified of a superintendent suspension receive a separate call from a guidance counselor offering participation in the diversion program. Students must plead no contest to participate. Families who agree to participate are matched with a team of school staff and mental health professionals that meet with the family. During that meeting, the team discusses any underlying mental or behavioral health challenges, screens the student for mental health needs, and connects the family to long-term, community-based treatment or support options. In addition, the team pairs the student with a short-term,

---


^{51} Id. at p. 3.

evidence-based treatment that is directly responsive to the incident for which the student was suspended. The student may, for example, be asked to complete a three day aggression replacement training. The student is permitted to return to school immediately after completing the short-term treatment. SCSD’s diversion program has produced meaningful outcomes for students’ well-being, academic engagement, and the school community: 53

- 75% of families elect to participate in the diversion program.
- SCSD has seen a decrease in missed instructional time due to suspension.
- Students are 13% less likely to engage in violence after completing the program.
- 25% of students who select the traditional suspension process drop out of school, but less than 2% of students who complete the diversion program drop out.
- SCSD has seen improved relationships with parents/caregivers since implementing the program.

A healing-centered response to behavior is one that takes a strengths-based approach and does not define students by their challenging behavior. To model these principles, we recommend that Transformation Teams incorporate expungement processes into diversion programs. Students’ no contest plea should be removed from their disciplinary record upon successful completion of the diversion program.

Student and parent/caregiver trust is essential to the success of a diversion program. We recommend that Transformation Teams design their programs to build that trust by taking two lessons from SCSD’s program. First, a staff member unrelated to the suspension process should contact the parent/caregiver to offer participation in the diversion program. This may be a guidance counselor or parent coordinator. Second, the diversion team should meet with the family in a setting that is comfortable for the student and parent/caregiver. This may mean meeting in a neutral setting, like a park, or going to the family’s home if they are comfortable.

The Transformation Team should also consider trust and healing-centered principles when selecting partners for the diversion program. Students and parents/caregivers may share difficult experiences during diversion assessment. This can provide staff with the information they need to effectively identify supports for the family. In order for families to feel comfortable sharing this information, they must feel that their privacy and confidentiality are safe. Families are less likely to engage meaningfully, or at all, if the program feels like surveillance or law enforcement. To that end, the Healing-Centered Working Group strongly advises against partnering with the Administration for Children’s Services, the New York City Police Department, or the School Safety Division when carrying out these programs. Staff

participants should also advise families of their mandatory reporter obligations and be transparent about what those obligations require.

A diversion program is a significant lift and one that will set a powerful example for schools around the City. The Executive Superintendent, Superintendents, and Principals can advance this effort by collaborating to develop a Bronx-wide diversion program. They can also exercise their leadership and support for healing-centered principles to advocate for a citywide suspension diversion program that reflects these principles.

Citywide Behavioral Expectations to Support Student Learning

The Citywide Behavioral Expectations provide the language that schools use to respond to challenging or disruptive behavior. In 2019, the DOE made significant strides toward equity by updating the Behavioral Expectations to include more interventions and supports and language that promotes racial, cultural, and gender equity. However, much of the language in the Behavioral Expectations continues to reflect a punitive, not positive, approach to discipline. This approach and the surrounding language contradict and undermine healing-centered principles. The punitive approach also fails to address the root causes of student conflict and challenging student behavior, all but guaranteeing that those problems will persist in the long-term.

We recommend that districts and schools adopt their own Bronx Behavioral Expectations. These Bronx Behavioral Expectations should be presented in a student- and parent/caregiver-facing document that complies with the Citywide Behavioral Expectations but is healing-centered and uses supportive, compassionate, and socially and emotionally aware language. A healing-centered approach to Bronx Behavioral Expectations will acknowledge and address the root causes of student conflict and behavior, will promote students’ sense of safety, and will therefore reduce school-based incidents in the long-term. Development of this document is a great opportunity for Principals and Superintendents to collaborate. Specific changes may include:

- Removing language that may be found in the penal code or is reminiscent of criminal justice language.

- Reviewing infractions to determine which are enforced in a manner that is racially disproportionate within schools, districts, or the Bronx as a whole. Consider what changes the Transformation Team can recommend to correct for disproportionality within the constraints imposed by the Citywide Behavioral Expectations.

---


• Including Healing-Centered Principles throughout the Bronx Behavioral Expectations. The Schenectady City School District’s Code of Conduct opens with information about positive behavioral response and trauma sensitivity.\textsuperscript{56} Schenectady’s Code specifies that suspensions are a last resort that should only be used for safety reasons, and recommends frequent use of restorative practices and therapeutic strategies.\textsuperscript{57} Finally, Schenectady’s Code includes an infographic about the school-to-prison pipeline and offers strategies for “Rerouting the Pipeline.”\textsuperscript{58} We recommend that Transformation Teams look to the Schenectady Code of Conduct when considering changes they can make to the way they use the Citywide Behavioral Expectations.

• Taking affirmative steps to ensure that staff, students, and parents/caregivers have a shared, consistent understanding of the Bronx Behavioral Expectations. Consistent expectations will promote a sense of school community, reduce misunderstandings, and provide everyone a stronger opportunity to uphold community values.

The Healing-Centered Schools Working Group recognizes that healing-centered Bronx Behavioral Expectations may be challenging to implement when Citywide Behavioral Expectations have not changed. To that end, we recommend that Transformation Teams, Principals, Superintendents, and the Executive Superintendent collaborate to advocate for updated, healing-centered Citywide Behavioral Expectations in the long-term. As Bronx schools make the transition to a healing-centered approach, they will gain firsthand knowledge of the ways that healing-centered discipline promotes students’ physical, psychological, and emotional safety and reduces the number of school-based incidents. Bronx leaders can draw upon this experience and the positive outcomes it yields to advocate for citywide changes that promote healing-centered responses to behavior. For example, the Healing-Centered Schools Working Group recommends that Bronx leaders consider potential models for expungement of student disciplinary records and advocate for a model consistent with healing-centered values. Expungement models the healing-centered concept that students are not defined by their challenging behaviors.

Healing-Centered Strategies for Responding to Behavior

A healing-centered educational framework also takes a compassionate, proactive approach to behavior that interrupts academic engagement. Students with past trauma may become disengaged from learning when they are in a hypervigilant state or a social emotional state that does not leave them ready to learn. When students lack the appropriate coping mechanisms to manage these states, their disengagement may translate into behavior that disrupts their own learning and the learning of those around them.

\textsuperscript{56} Id.
\textsuperscript{57} Id.
\textsuperscript{58} Id.
A reactive educator response to behavior is one that views student disengagement as willful defiance or a lack of compliance. In contrast, a healing-centered response attempts to understand the student’s social emotional state, provide the student with the tools to access their ready-to-learn state, and help the student return to positive engagement. The following healing-centered strategies for responding to behavior can equip school staff to support students with compassion. Each of these strategies can be adopted without cost to the school. We recommend that Transformation Teams explore trainings, materials, or other educational methods to help all school staff learn and practice these skills.

- **Ask** the following questions to help **investigate and identify** responses to difficult behavior:
  1. How might the behavior represent an effective coping strategy in other settings?
  2. What are the aspects of the current context that may be triggering and escalating the behavior?
  3. What function does the behavior serve in the current context?
  4. How can the current context be changed to extinguish the behavior?
  5. What can I do to teach adaptive replacement behaviors and effective coping strategies?\(^{59}\)

- **Use an academic error response** when responding to challenging behaviors.\(^{60}\)
  1. Implement a correctional procedure and provide the student with opportunities to practice the expected behavior.
  2. Teach the expected behavior with verbal descriptions, examples, role play, or behavioral reversal and offer reminders.
  3. Model expected behaviors.
  4. Monitor expected behaviors and reward them when they appear.

---

**COMMON CLASSROOM TRIGGERS:**

- Yelling, arguments, or fighting
- People who remind the student of someone connected to their trauma
- A particular time of year
- Smells related to trauma
- Music and sounds connected with trauma
- Physical touch
- Isolating the student from their peers
- Rest time
- Safety drills
- Assignments that involve requests for family information
- Reading materials about certain topics
- Activities that are overstimulating and push the student beyond their ability to cope
- Situations that cause feelings of fear, anxiety, or shame
- “Teacher voice” and crossed arms, stern brows, and angry frowns.

---

\(^{59}\) *Understanding Trauma and Trauma Responsive Educational Practices.* Trauma Responsive Educational Practices.  
\(^{60}\) Id.
5. When challenging behavior is persistent, take a different teaching approach, provide more practice and review, and give information about the error and the context in which it occurred.

- **Assess your own emotions** before and after responding to difficult behavior. Take a deep breath and assess your social emotional state before responding. Afterwards, revisit, analyze, and revise your response with a peer staff member.\(^6^1\) If you find you are frequently responding to student behavior in a manner that is inconsistent with the Healing-Centered Principles, explore ways that you can cultivate staff wellness on an individual and school-wide level.\(^6^2\)

- Be cognizant of potential **classroom triggers**.\(^6^3\)

- Help students **identify triggers** when they occur.\(^6^4\)

- Provide appropriate levels of **predictability and control**. Provide choices whenever possible. This develops a sense of trust and helps the student practice making good choices.

- Use **non-verbal gestures, visual references, and brief verbal cues** to redirect behavior. When possible, provide redirection on a one-on-one basis, instead of in front of peers. Avoid extensive or lengthy verbal redirection.

- **Build structure, predictability, and routine** throughout the school day.

- Provide frequent, but brief, **positive attention**. Be strategic with praise. Longer periods of attention, even if positive, can overwhelm hypervigilant students or cause students with relational difficulties to feel distrustful. Over-frequent or indiscriminate praise may be viewed as an attempt at manipulation.\(^6^5\)

---

\(^{61}\) For additional details on the Revisit, Analyze, and Revise approach, refer to the Section VI subsection entitled, “Being Healing-Centered Means Being Anti-Racist.”

\(^{62}\) For ideas, refer to the Section VI subsection entitled, “Staff Wellness.”

\(^{63}\) *Understanding Trauma and Trauma Responsive Educational Practices*. Trauma Responsive Educational Practices.

\(^{64}\) Id.

\(^{65}\) Id.
• Employ strengths-based **positive reinforcement** to promote the cultivation of adaptive coping strategies.

• These strategies, along with positive relationship building, are particularly effective preventive strategies for students who frequently become dysregulated and display aggressive behaviors in response to perceived threats to their safety or social emotional well-being.

Schools that implement behavioral support strategies see positive results. When one school built educators’ capacities to recognize the signs and symptoms of traumatic stress and respond with appropriate developmental supports, they saw significant reductions in trauma symptoms, aggressive incidents, and out-of-school suspensions.66

**Changing the Physical School Environment**

A school’s physical environment impacts student, parent/caregiver, and staff’s sense of physical, psychological, and emotional safety. Transformation Teams should evaluate the physical environment and consider how it can be altered to promote safety, a sense of community, and alignment with healing-centered principles. Students, parents/caregivers, and staff should be given the opportunity to provide feedback during this process.

Transformation Teams may choose to adopt **warmer lighting** throughout the school building. Research shows that cold, harsh lighting can result in a sanitized, institutional atmosphere that disrupts feelings of comfort and safety.67 Teams should assess whether any **smells** throughout the building are disrupting the desired environment. Teams should consider whether any **outstanding repairs** or damages in the school building are contributing to students feeling physically, psychologically, or emotionally unsafe.68

**TIP:** Falls-Hamilton Elementary adapted warmer lighting, calmer colors, and positive smells like essential oil diffusers in the school building to help students feel more welcome and comfortable.

Transformation Teams should also assess the **morning arrival process**. A healing-centered school is one in which students and staff feel like valued members of the community.

---


when they arrive each day. A welcoming arrival sets a positive tone for the day and supports students with trauma who struggle with the transition to school each morning. This can result in fewer school-based incidents throughout the day. Schools can create a welcoming, healing-centered start to the day by inviting different members of the school staff, including non-instructional staff, to participate in morning greetings. Provide an individualized greeting to each student as they enter the building. This builds positive connections between staff, students, and parents/caregivers and helps students feel like valued members of their school community.

Transformation Teams should reconsider aspects of the morning arrival process that threaten students and parents/caregivers’ sense of physical, psychological, and emotional safety. Schools with metal detectors must carefully consider the ways that metal detectors infringe upon students’ psychological and emotional safety. Students, educators, and community members report that scanning, searches, aggressive behavior from School Safety Agents (SSAs) who conduct scans, and arbitrary confiscation of everyday items make students feel unsafe, criminalized, humiliated, and demeaned. Transformation Teams must consider the racially disparate manner in which DOE metal detectors are used, how those disparities perpetuate racist stereotypes that Black and Latinx students are dangerous, and how the presence of metal detectors builds racist stereotypes into school culture. Transformation Teams must also consider whether entry through metal detectors contributes to student tardiness or school avoidance. These negative impacts undermine the supportive environment that a healing-centered approach attempts to create, detract from time that could be spent in class and with peers, and contribute to hyperactive social emotional states that can result in disengagement, conflict, and dysregulated student behavior.

The YA-YA Network, a youth-led organization that advocates against harmful scanning practices, recommends that Transformation Teams assess the harm of metal detectors by analyzing their impact on tardiness, missed instructional time, rates of suspension and

---


In the absence of a definition, students and community members report that School Safety Agents have arbitrarily confiscated water bottles, house keys, and hair clips and have asked Black girls to remove wig caps and bonnets. A survey conducted by Partners for Dignity & Rights and Teachers Unite found that over 50% of DOE educators feel that metal detectors “rarely” or “never” make students feel safe. In schools with permanent metal detectors, more than 90% of educators reported that School Safety Agents disrespect students during the scanning process. Teachers Talk: School Culture, Safety and Human Rights, National Economic and Social Rights Initiative (NESRI) Fall 2008. PDF File, pp. 24-25. Retrieved June 17, 2020, from https://dignityinschools.org/resources/teachers-talk-school-culture-safety-and-human-rights-3/.

70 In 2016, WNYC found that “black and Latino high school students were nearly three times more likely to attend a scanning school than white high school students.” Aaron, K., & Ye, J., Racial Disparity in Discipline Persists While Suspensions Drop in New York City Schools. WNYC: New York Public Radio, July 21, 2016. Retrieved June 17, 2020, from https://www.wnyc.org/story/school-arrests-student-suspensions-race-new-york/.
discipline, graduation rates, and college readiness rates. This data, along with the harmful outcomes outlined above, may compel the Transformation Team to adopt a Healing-Centered Plan that includes removing metal detectors. Removing metal detectors and making other healing-centered changes will boost students’ sense of safety and decrease the frequency of school-based incidents – reducing the need for metal detectors in the first place.

If Transformation Teams are unable to remove metal detectors from their school building, the Healing Centered Schools Working Group recommends that school and district leadership take steps to reduce harmful scanning practices. Superintendents and the Executive Superintendent can advocate for updates to Chancellor’s Regulation A-432 that enumerate student rights in the scanning process, create greater school control over the scanning process, increase transparency around scanning data, and include accountability mechanisms for SSAs that conduct scanning in an aggressive, demeaning, or arbitrary manner.

Transformation Teams should also assess the accessibility of the school building. Teams should assess whether the space is physically accessible to all students and make changes that improve accessibility. Teams should also assess the school building to identify spaces, like the lunchroom, that may be particularly harmful for students who become over-stimulated when exposed to crowds or loud noises. Once Teams have identified these spaces, they can work to create calming spaces and soft rooms that students can visit if they are beginning to feel over-stimulated. Creating accessible spaces is essential to creating a school where all students feel valued and safe.

Not all changes to a school’s physical environment require significant cost or administrative approval. Simple, but effective changes may include:

- Update school hallways to feature artwork by students and bulletin boards that are culturally responsive, reflect healing-centered principles, and cultivate a sense of community.
- Examining the signage in your school. Does it use harsh, punitive, or deficit-based language? If so, consider low-cost updates to signs.

---

72 Under current policy, the Principal can do this by requesting a change in metal detector or scanning designation from the School Safety Division. If that process is still in place when a school begins its healing-centered journey, the Transformation Team should address this process in its Healing-Centered Plan. See, Scanning in NYCDOE Schools. New York City Department of Education, July 2016, PDF File p. 5. Retrieved June 17, 2020, from https://www.schools.nyc.gov/school-life/safe-schools/school-safety.
73 See, Report: Safety with Dignity. NYCLU, p. 43.
74 For additional recommendations, please see the YA-YA Network’s January 22, 2020 Public Comment to the NYC DOE Panel for Educational Policy, “Comments urging the New York City Department of Education to amend Chancellor’s Regulation A-432 (Search and Seizure)” (on file with Working Group).
• Developing **calming corners** and art and meditation spaces in classrooms, lunchrooms, and other school spaces. These can include art supplies, simple musical instruments, pillows, objects to assist with grounding exercises, and tools for meditation.

• Assessing the **lunchroom**’s layout, student entry, food distribution process, and student exit to determine if changes need to be made to improve students’ sense of safety and community. Invite school staff, including non-instructional staff, to join student tables to promote positive relationship building between students and staff. 

  **TIP:** At the Lincoln school, staff realized that changes were helping students feel calmer at the beginning of the day, but outbursts and bullying were persistent in the lunchroom. Staff used TLPI’s Flexible Framework to assess the problem, and realized that students were being rushed to eat in a short period of time and that lunchroom staff were over-worked and, as a result, were likely to respond to behavior punitively. These realizations gave them the information they needed to correct the problem.

**Uplifting Student Voice**

Schools can model trust, transparency, and a commitment to community by uplifting student leadership and agency. Schools should facilitate and support the creation of student groups that reflect student needs and build community among students. These groups should be given a meaningful role in decisions about school programs, policies, and healing-centered practices. Student groups and Transformation Teams can collaborate with the DOE’s Student Voice Manager to explore strategies for uplifting student voice and centering students in decision-making. On a district or borough-wide level, student groups and Transformation Teams can collaborate with one another and with the Student Voice Manager to develop healing-centered practices for centering student voice. Below are two examples of schools that have cultivated a greater sense of school community by uplifting student voice:

• Students at the Schenectady City School District play a significant role in healing-centered programs. Students at Schenectady High School lead restorative circles on a weekly basis. Student leaders select restorative circle topics of interest to the student body such as police brutality, microaggressions, and immigration justice. These conversations help the school community grow in their understanding of equity and

---

75 *Creating and Advocating for Trauma-Sensitive Schools.* Harvard TLPI, p. 79.
healing. Students in Schenectady’s Teen Advocacy Group represent Schenectady’s students in conversation with school and local leadership. Students meet regularly with local leaders to discuss issues impacting young people and provide training and education to adult leaders. They also collaborate with similar groups in surrounding communities to advance regional change.

- One elementary school in the Bronx took significant strides to uplift student voice. School leadership created a student council that was empowered to meet with school leadership each week and present recommendations on behalf of all students. When the students suggested morning Town Halls, school leadership adopted them. These morning events brought students and staff together and helped strengthen school culture.

Using a similar approach, Transformation Teams should uplift parent/caregiver voice by engaging with parent associations and considering how their recommendations can advance healing-centered principles.

**Staff Wellness**

A healing-centered school is one in which staff safety and well-being is valued and protected. When staff do not have the support or strategies to advance their own social emotional wellness, they are less equipped to support students’ social emotional wellness. Worse, when schools prioritize student safety but disregard staff safety, or vice versa, they build a healing-centered approach that lacks consistency and authenticity. An inconsistent and inauthentic approach will struggle to succeed until the safety of all school community members is addressed.

When identifying strategies for promoting staff wellness, the Transformation Team can consider the following ideas:

- School leadership can adopt check-ins at the beginning of each staff meeting. These check-ins can start simple as staff develop comfort with the concept. They may, for example, involve asking staff to select one word or emotion that describes how they feel that day. Over time, these check-ins can evolve into brief descriptions of each staff member’s well-being and needs that day. Small group check-ins can also be held outside of staff meetings.

- Transformation Teams can develop a plan to promote wellness culture and work-life balance among staff. Falls-Hamilton Elementary School adopted a practice called “tap in, tap out” that allows teachers to step out and collect themselves if they became

---

overwhelmed or simply needed a brief break. Teachers can simply text another staff member that they need to “tap out,” and the other staff member will “tap in” to supervise that teacher’s students for 3-5 minutes. This arrangement can be done with partners or small groups. Paraprofessionals at P.S. 531 Archer Elementary School in the Bronx utilize a strategy like this one to provide each other with peer support and to ensure that students experiencing emotional distress are supported by an adult who is emotionally and mentally prepared to support them.

- Transformation Teams can establish and develop infrastructure for educator-to-educator conversations and peer mentorship opportunities for all staff. These conversations will bolster staff’s sense of safety and support in the workplace and will help them practice social emotional well-being. This type of peer support can aid staff members in considering an alternative perspective when reflecting on a student’s behavior. They can also increase staff members’ self-awareness regarding the impact that their reaction to behavior may have on students and student behavior.

- Self-care and wellness strategies can be difficult to cultivate and practice. Transformation Teams can create wellness accountability groups to help staff support one another’s self-care efforts.

- By implementing a strategy like monthly wellness groups, educators can create opportunities to support each other, increase their individual self-awareness and increase their ability to self-manage. In response to teachers reporting that they were feeling overwhelmed and burned out, a School Counselor at P.S. 691 Bronx Little School implemented weekly Restorative Circles for staff. This strategy provided staff members with peer support and the opportunity to express themselves without fear of negative consequences.

- Transformation Teams can host trainings for staff about cultivating compassion satisfaction and vicarious post-traumatic growth. Compassion satisfaction is a sense of personal efficacy that staff derive from doing difficult work well. Vicarious post-traumatic growth occurs when staff work with students who have been exposed to trauma, are able to work effectively with those students, and consequently develop greater insight, compassion, interpersonal skills, and a stronger sense of purpose and self-perception. Healing-centered schools promote compassion satisfaction and vicarious post-traumatic growth by giving staff the tools they need to serve students with compassion and efficacy.

---

• The Schenectady City School District created reading groups for their staff. In one reading group, staff read and discussed materials about trauma and trauma-sensitivity. In another group, staff read and discussed materials about racial equity including White Fragility by Robin DiAngelo and The 1619 Project. These reading groups helped staff connect with one another, promote each other’s growth, and develop a stronger staff community.

• Transformation Teams may recommend that their schools adopt a clinical support model for staff. Under a clinical support model, staff would be paired with lateral or more senior staff members, either one-on-one or in small groups. During support sessions, staff can review specific interactions with students, parents/caregivers, and other staff, explore their behavior in those interactions, and seek feedback and advice. This model will provide staff with the opportunity to understand how their personal biases and trauma histories may influence their responses or interactions with students or parents/caregivers in a negative way. It will also help them identify potential strategies to repair damaged relationships.

Non-Academic Universal Precautions

Universal precautions treat all students with care and are the manifestation of the healing-centered belief that any student may have been impacted by trauma. These precautions benefit all students because they reduce management challenges that consume teacher time and energy, increase all students’ sense of safety and emotional well-being, and allow teachers to maintain a higher level of instruction. Because social emotional well-being is a necessary ingredient for learning, healing-centered schools adopt universal precautions and other small practices that promote healing throughout the school day and across the school environment.

This section outlines a variety of universal precautions that can be implemented throughout the school environment. As with any other part of the healing-centered transformation process, Transformation Teams should carefully consider these practices or programs to determine which are most responsive to the needs of the school community, school staff’s level of understanding and commitment, priorities identified by the school community, and the Healing-Centered Principles. The following strategies require little to no cost to adopt and can be applied with ease once staff receive the appropriate education. For that reason, Transformation Teams may decide to build staff’s familiarity with most, if not all, of the precautions listed below.

Transformation Teams should examine language used throughout school programs and student interactions. For example, teams may examine curricula, student orientation materials, non-instructional student programming, and teacher resources that provide strategies for student and parent/caregiver interactions. Teams should consider the following questions: Is the language culturally responsive, or does it alienate groups of students that have traditionally been marginalized in education systems? Do programs employ deficit-based, punitive, or reactive language? How can language be modified to amplify student strengths?

Transformation Teams can create physical space, carve out time, and provide resources for students to engage in mindfulness activities. Teams can do this by creating calming corners in classrooms or hallways, setting aside a specific period of the school day during which students are encouraged to engage in creative activities or meditation, or dedicating physical space where students can engage in movement activities. Schools can reduce or altogether eliminate the costs of providing these programs by streaming free meditations, guided activities, yoga exercises, or somatic routines. Transformation Teams can also create small, individual opportunities for mindfulness and self-soothing by allowing students to keep grounding objects at or near their desks. Transformation Teams that develop these spaces and strategies in conjunction with students will uplift student voice and model power-sharing, further contributing to a healing-centered environment.

**TIP:** Staff can build relationships with students who exhibit difficult emotional and behavioral patterns by employing the following strategies:

- Express care
- Challenge growth
- Provide support
- Share power
- Expand possibilities

Positive relationships between staff and students can promote student well-being. Transformation Teams should brainstorm strategies that are unique to their school building and culture and that build rapport and cultivate relationships. In addition to the Healing-Centered Principles and four elements that Transformation Teams consider for all potential changes, Teams should keep in mind that positive educator-student relationships consist of sensitivity, attunement to emotional needs, consistency, trustworthiness, cognitive stimulation, and scaffolding. Transformation Teams consider for all potential changes, Teams should keep in mind that positive educator-student relationships consist of sensitivity, attunement to emotional needs, consistency, trustworthiness, cognitive stimulation, and scaffolding.

Relationship-building strategies include pairing students with school staff members for individual or group check-ins throughout the week and having staff personally greet and see off students each day. As implementation progresses, Teams can assess the efficacy of relationship-building efforts by surveying students to ask whether there is an adult in the building that cares about them or an adult in the building that they trust.

---

81 Understanding Trauma and Trauma Responsive Educational Practices. Trauma Responsive Educational Practices.
82 For additional information on the Lincoln School example, please refer to Creating and Advocating for Trauma-Sensitive Schools. Harvard TLPI, p. 79. For additional information on the five strategies for building relationships with students, please refer to Understanding Trauma and Trauma Responsive Educational Practices. Trauma Responsive Educational Practices.
Transformation Teams should also carefully **examine the school’s relationship with students’ parents/caregivers.** Many students’ sense of safety at school depends on their perceptions of their parent/caregiver’s relationship with school staff. Building positive and trusting relationships with parents/caregivers can, therefore, promote a culture of community and improve students’ sense of safety. Below are some examples of practices that can schools use to improve parent/caregiver relationships.

- **One of the simplest ways to build parent/caregiver trust is to meaningfully incorporate parents/caregivers in the healing-centered transformation process.** When parents/caregivers contribute and see their feedback incorporated into their school’s Healing-Centered Plan, they will develop greater confidence in their school’s commitment to community and parent/caregiver ideas. Include parents/caregivers in educational events, community discussions, focus groups, and priority-setting conversations.

- **One major obstacle to parent/caregiver trust is the over-use or inappropriately threatened use of the State Central Registry hotline.** In the Working Group’s community discussions, parents/caregivers report that Bronx schools make frequent unfounded calls to the State Central Registry and threaten parents/caregivers with unjustified calls. The Healing-Centered Schools Working Group understands that school staff are committed to their important responsibilities as mandatory reporters. We strongly recommend that Transformation Teams review staff’s use of the State Central Registry hotline, examine potential patterns of overuse or improper threats, and provide staff with training and mentorship on the appropriate use of the hotline, particularly when educational neglect concerns are at issue. Most importantly, Transformation Teams should educate staff about interventions and resources available to them if they have concerns about potential educational neglect. Transformation Teams can refer to the Appendix for additional recommendations related to this issue.

**Bullying** is one of the most frequently reported school-based traumas that students experience. Schools that are experiencing high reports of bullying, harassment, or discrimination among students may decide to develop action items that directly address those issues.

---

**TIP:** Lincoln School identified as their top priority the need to help students feel calm and safe so that they could focus on learning. Staff began holding morning gatherings in each class during which students could connect with peers, connect with staff, and practice social skills.
• Transformation Teams should review school records and engage in discussions with students and parents/caregivers to assess the frequency with which bullying complaints are investigated, the timeliness of bullying investigations, and the frequency with which school staff provide support after a student reports a bullying incident. Transformation Teams should take steps to correct any deficiencies in these areas.

• Work with guidance counselors or school-based mental health staff to offer support to students who have experienced bullying. Support should include guided processing of unresolved trauma related to bullying.

• Develop an Individualized Support Plan for involved students. For a student who has experienced bullying, the plan may include support and counseling focused on rebuilding relationships, promoting safety and trustworthiness, and building self-advocacy skills. For a student who has engaged in bullying behaviors, the plan may include support and counseling to address the underlying root causes of the behavior.

One of the central principles of healing-centered schools is the idea that social emotional well-being is a necessary ingredient for learning. A healing-centered school is one that recognizes that some emotions and experiences are better expressed through non-verbal forms of expression, like visual art, music, poetry, theater, and dance. These creative forms of expression provide age-appropriate and culturally sensitive ways for students to process and express their emotions. In addition, when schools provide opportunities for students to engage in non-verbal expression, they model respect for different forms of expression and expand students’ capacity to meaningfully express themselves. Encouraging students, particularly students who have experienced trauma, to express themselves through creative media can also help prevent emotional crises, expose students to positive outlets, and help students build their strengths, interests, and passions.

Developing creative expression exercises can also advance equity. For generations, Black communities have had a meaningful relationship with art as a healing medium. It is imperative that schools respect and honor this history when discussing the emotional well-being of Black students. Despite this important history, predominantly Black schools have seen massive cuts to art and music programs in recent years, while many predominantly white schools have continued to offer these programs. Combatting institutional racism in education requires that we address this inequity.

Transformation Teams may consider incorporating artistic exercises into curricula, calming corners, non-instructional time, and other school-based activities. Here are some helpful examples of artistic exercises that advance healing-centered values:

• Students are given time for free-drawing at the beginning of the day or at the start of the class period. Students may draw shapes, doodle, or collage. The teacher then concludes the free-drawing session with guided reflection questions: What about the drawing reminds you of yourself? What about the drawing is nothing like you?
• Students are given a piece of paper. They are instructed to fold it. On one side, they are asked to draw where they see themselves now. On the other side, they are asked to draw where they see themselves after a certain period of time that the teacher announces. Students are then asked to make a bridge across the fold showing how they will get to their vision for their future selves.

• Students are asked to draw in response to a particular idea discussed in class. The teacher then concludes the art session with guided reflection questions related to the topic.

• Students are given time to create a dance or step. Students have an opportunity to step or dance to particular music that they are familiar with.

• Students have an opportunity to create a rap, other song, or poetry on a topic of their choice or on a topic identified by their teacher.

• Students are given an opportunity to create dialogue and or a comedy sketch. Students are then invited to perform or read aloud.

• Students are given an opportunity to sing or have a percussion circle.

• Students are asked to make a box. The teacher will provide a description of what the box symbolizes. Students then put objects into the box or write things on paper that they want to put into the box.

• Students are asked to draw themselves inside a circle on the center of a page. They are then asked to draw lines of various lengths and to connect those lines to people, places, or things that they feel varying degrees of closeness to.

Transformation Teams in schools with high chronic absenteeism or student tardiness rates should consider adopting greater flexibility on attendance consequences. Bronx schools serve the highest percentage of students in temporary housing.83 Our students in temporary housing experience traumatizing instability and are more likely to miss school days and be late to school. Despite this, many schools penalize students for tardiness. Starting the day late and with negative consequences can significantly and negatively impact students social emotional well-being. They are more likely to enter the classroom feeling demoralized, panicked, and as if they are being punished for dynamics outside of their control. Students who feel this way are not available for learning and are more likely to become disengaged.

Healing-centered schools can promote students’ sense safety and readiness to learn by providing supportive transitions for students who arrive late to school and removing

stigmatizing consequences. These may include the following strategies:

- School staff can collaborate with the school’s Students in Temporary Housing Community Coordinator or with the Office of Students in Temporary Housing to identify solutions to student tardiness. For example, a student may be late because they have been placed on a bus route that is experiencing delays. Students in Temporary Housing staff can work with the Office of Pupil Transportation to resolve this issue.

- Many students who experience chronic tardiness struggle to transition into classes that have already started. School staff, including the student’s teacher, can help a student make that transition in a way that does not attract potentially stigmatizing attention. They can also provide the student with supportive instruction to jump into the work that the class is already engaged in.

- School staff can work collaboratively with parents/caregivers to identify supports to address chronic absenteeism and tardiness.

- Transformation Teams should review school policies to identify those that punish or stigmatize student tardiness. Teams should then consider how those policies can be modified to be more supportive of students and to support students’ social emotional well-being and readiness to learn.

Non-Academic Targeted Precautions

Transformation Teams should also adopt targeted precautions to support students with significant needs. These students may have experienced trauma, may be at risk of being traumatized by an inappropriate school response to behavior, or may be experiencing some combination of both issues. Targeted precautions will provide students with significant needs the social emotional support they need to access learning, will provide effective support when students become disengaged or display challenging behavior, and will reduce the number of behavioral incidents that disrupt learning for all students.

Transformation Teams should consider the population of students with significant needs that their school serves. Through careful evaluation, teams can assess the particular needs of this population and use the Healing-Centered Principles to identify and implement potential solutions. Here are examples of targeted precautions that schools can develop in response to the specific student populations:

One elementary school in the Bronx serves a high number of students with significant behavioral needs. Staff were responding to frequent behavioral crises. School leadership and staff realized that the reactive approach they were using to respond to these crises was inefficient, not as effective as they hoped, and often involved response from adults that the student in crisis did not know. In addition, because response teams were often composed of
staff that happened to be available when the behavior occurred, students who experienced frequent crises were receiving responses from a wide range of adults that employed differing strategies. School leadership convened a team to develop a proactive, healing-centered approach to behavioral crises. The team identified students with the most significant needs and created an informational page for each student describing their needs, strategies that work for that student during a crisis, and the adults in the building that the student trusts. Each page went into a binder kept in the Main Office. Whenever a student experienced a crisis, the available adults could refer to the binder to access helpful contextual information, learn what strategies to use, and identify the staff members integral to an effective crisis response. The school saw a decrease in the number of incidents and a decrease in the time it took for students in crisis to return to a ready-to-learn state.

Transformation Teams in schools with high rates of students in temporary housing should collaborate with their Students in Temporary Housing Team to identify targeted precautions to support those students. Transformation Teams may consider adopting the following evidence-based targeted precautions for students in temporary housing.

- Students in temporary housing may be more likely to arrive late to school, but may rely on breakfast provided by the school. When students are unable to get breakfast or are rushed through their breakfast because they arrived late, they may be more likely to become dysregulated throughout the day. Transformation Teams can work with school staff to ensure that students can access to breakfast even when they arrive late, can eat without being rushed, and can receive support as they transition to class.

- Students in temporary housing may need to attend a new school because of their housing situation. Cultivate positive relationships and the new student’s strengths by pairing the student with a “buddy” in the classroom, assigning the student a task to help around the classroom, or encouraging extracurricular involvement.

- Many students in temporary housing are stigmatized because of their housing status. Be sensitive to concerns about this stigma and avoid using the word “homeless.” Instead, use descriptive language to ask about or discuss the student’s housing situation.

- Students experiencing housing instability may develop stronger attachments to possessions or personal objects. Allow students to hold onto those possessions in class to reduce dysregulation.

- Provide structure, a consistent and predictable routine, clear expectations, and supportive accountability strategies. When possible, plan assignments in a way that allows students to keep up without taking work home.

One high school in the Bronx deployed a targeted precaution with great success. When the school reviewed its suspension data, they realized that they were suspending African immigrant girls at disproportionately high rates. The school implemented an open door policy
that allowed girls who received frequent suspensions to check in with staff members and one another. Over time, the girls built positive relationships with staff members and were able to voice the challenges and pressures they face as young immigrant women. This outlet, and the supportive relationships developed within it, allowed the students to develop stronger coping mechanisms. The program also helped school staff respond to the girls’ behavior with greater empathy, leading to a decrease in suspensions.

**Assessing the Role of School Safety Agents & Available Alternatives**

As Transformation Teams consider how to improve students’ sense of physical, psychological, and emotional safety, they should examine the role that School Safety Agents play in either protecting or hindering that safety. The Healing-Centered Schools Working Group recognizes that some students, parents/caregivers, and educators feel that School Safety Agents provide physical safety and peace of mind in difficult moments. But for countless other students, parents/caregivers, and even educators, the presence of School Safety Agents threatens their psychological, emotional, and even physical safety and makes them feel criminalized and unwelcome in their schools. It is essential that Transformation Teams take all student and parent/caregiver perspectives into account when assessing School Safety Agents’ alignment with healing-centered principles.

Transformation Teams must examine the responses, communication strategies, and language that their school’s SSAs use. Are the SSAs’ responses to behavior proactive, compassionate, and aimed at addressing underlying conditions and returning students to a ready-to-learn state, or are they reactive responses that escalate students’ challenging behavior and hinder social emotional well-being? When SSAs communicate with students and parents/caregivers about student behavior, do they use healing-centered, strengths-based language, or do they use deficit-based language that alienates students?

SSAs are some of the first people that students and parents/caregivers see when they enter the school building. Are their interactions with students and parents/caregivers promoting a sense of community and setting the tone for a day of learning, or are they contributing to students feeling frustrated or unwelcome in their school? In our community discussions, students and parents/caregivers reported that SSAs often spoke to students in an aggressive or demeaning manner during morning arrival. Even if the SSAs interactions with the students are positive and healing-centered, are they being asked to carry out duties, like searches of student backpacks, that undermine students’ sense of psychological and emotional safety? Answering these questions can help Transformation Teams assess whether SSAs are advancing or hindering Healing-Centered Principles and the goals of the Healing-centered Plan.

The Healing-Centered Schools Working Group recommends and supports the model that the Schenectady City Schools District used to remove all police and school resource officers from their schools. SCSD removed these officers from school buildings and, in their
place, hired a team of “cultural brokers.” In SCSD, cultural brokers are respected members of the community, typically elders, who intervene when conflict occurs between students or when a student exhibits challenging behavior. Cultural brokers’ primary goal is always to return students to the classroom and to a ready-to-learn state as quickly as possible. They accomplish this by using skills gained in intervention and conflict resolution training and by leveraging their relationship with students’ networks outside of school. Since adopting this model and other healing-centered strategies, SCSD has seen a 40% reduction in physical altercations in their schools. This outcome demonstrates that our students are safer and better able to learn when SSAs are not present in their schools.

Through this transformation and by using the funds previously dedicated to school resource officers, SCSD was able to expand the number of social workers serving their students. For example, at the high school level, SCSD was able to staff a full-time social worker to a room called the Iceberg Room. Students who are experiencing social emotional challenges or feeling dysregulated can leave class, go to the Iceberg Room, and access social work support and other resources. This example shows how schools that divest from punitive structures can invest in healing.

We recommend that the Executive Superintendent, Superintendents, Principals, and other members of Transformation Teams work together to advocate for SSAs to be removed from Bronx schools and for Bronx schools to instead be staffed with social workers and cultural brokers or similar community-based staff that can address harm in a supportive and empathetic way. Leadership from the Executive Superintendent and Superintendents is essential because this ask requires navigating significant administrative constraints.

It is important to take a moment to underscore the immense value of social workers for schools seeking to implement healing-centered practices. As noted throughout this Roadmap, social workers have played significant roles in schools and school districts that have undertaken this transformation. Social workers, especially licensed social workers and those with clinical experience, bring skills that are vital to creating a healing-centered school. At its heart, the focus of the social work profession is to develop and sustain nurturing and satisfying relationships between people. With that understanding, the Healing-Centered Schools Working Group strongly recommends that Transformation Teams adopt Healing-Centered Plans that include bringing in social workers or expanding the school’s existing collaboration with

---

85 Id.
86 Id.
social workers. The Working Group also recommends that Transformation Teams, Superintendents, and the Executive Superintendents collaborate to advocate for greater funding for social workers.

In the meantime, we recommend that Transformation Teams work collaboratively with their SSAs to help the SSAs become more healing-centered. SSAs should be given the opportunity to participate in professional development about trauma, its impact on learning, and healing-centered approaches to behavior.

**Policies & Procedures**

Longstanding policies and procedures can, if left unchecked, undermine the Transformation Team’s goals and Healing-Centered Plan. To prevent this and to ensure that all school-based interactions are healing-centered, Transformation Teams should establish a subcommittee to review school policies and procedures and ensure their conformity with healing-centered principles. This subcommittee should consist of members from all parts of the school community including students and parents/caregivers. This Roadmap already discusses a number of policies that are especially critical to review, like tardiness policies and the Citywide Behavioral Expectations. Some policies may not be written on paper, and may simply be common practice, but are just as important to assess. Here are a few examples of important policies, practices, and materials to review:

- The school’s policy for **communication with parents/caregivers** regarding attendance. Is the Attendance Teacher the first person to reach out to the parent/caregiver regarding attendance issues, or does the parent/caregiver receive a call from a familiar staff member first? Does the staff member attempt to work with the family to identify solutions, or does the call focus primarily on compliance and mandatory reporter obligations? How can staff approach these calls with compassion, collaboration, and a strengths-based approach?

- The school’s use of **student’s names and pronouns**. Does the school strictly adhere to names and gender indicated on legal documents? Does the school require consent from a student’s parent/caregiver before using the student’s preferred name and pronoun? If so, the school may be traumatizing students whose name or gender is not reflected in their legal documents or whose parents do not know about or do not support their preferred name or pronoun. The DOE has made significant strides on this issue by adopting the 2019 Guidelines to Support Transgender and Gender Expansive Students. Schools can build on this work and become more healing-centered by ensuring that their practices and policies conform with these guidelines and support student needs not contemplated by the guidelines.  

• The school’s policy for **contacting and involving law enforcement in school-based incidents.** Chancellor’s Regulations related to safety incidents set requirements for when schools must contact law enforcement, but they also outline a variety of situations in which school leadership has discretion to decide whether to contact law enforcement. Is the school exercising that discretion in a way that leads to over-reliance on law enforcement involvement? Is the school using their discretion to invoke law enforcement in ways that threaten student and parent/caregiver physical, emotional, and psychological safety and well-being? Is the school using their discretion in a way that re-traumatizes students and parents/caregivers who live in over-policed communities or who have experienced the trauma of racist police violence? Are there opportunities for the school to reduce their involvement with or reliance on law enforcement? What new strategies can the school adopt to help staff safely and effectively address incidents before or instead of contacting law enforcement?

• When modifying policies to promote conformity with healing-centered values, the Buffalo Institute on Trauma and Trauma-Informed Care recommends using trauma-informed and solution-focused language. This means

1. Describe the desired behaviors and outcomes, instead of describing only prohibitions.
2. Avoid language that shames and blames. Instead, communicate expectations in a clear manner.
3. Eliminate jargon.\(^{89}\)

Policies evolve over time and the Transformation Team’s understanding of healing-centered principles will evolve as well. To ensure that policies remain consistent with healing-centered values, the team should establish a timeline for ongoing reviews by the subcommittee.

Healing-centered policies are also those that are accessible to students, parents/caregivers, and staff. The subcommittee should ensure that all individuals have access to the policies that impact them. This can be done by placing policies on the school’s website and providing copies in the main office. The subcommittee should also work with the DOE Division of Family and Community Engagement’s Translation and Interpretation Unit to ensure that all copies are available in the 9 major languages.

---

\(^{89}\) Koury & Green, *Trauma-Informed Organizational Change Manual.* p. 85.
VII. Creating Healing-Centered School-Based Services

Like targeted precautions, school-based services and partnerships can help healing-centered schools support the safety and social emotional well-being of students with the most significant needs. Through targeted supports, healing-centered schools ensure that their most vulnerable students are available to learn and receive the support they need to develop healthy coping mechanisms. As an added benefit, partnerships and school-based services allow schools to spread the Healing-Centered Principles to other organizations in their community.

Mental Health Partnerships

Bronx students experience a disproportionately high rate of mental, emotional and behavioral health challenges. At the same time, the Bronx has one of the lowest rates of mental health services available per young person. This disparity is caused by disproportionate funding between the adult and children’s mental health systems and by the acute needs of the children in the Bronx who are grappling with trauma rooted in systemic oppression.

There are also disparities in mental health services across boroughs. Manhattan, Queens, Staten Island and Brooklyn each have children’s psychiatric in-patient units in at least one of their municipal hospitals. Many of these same municipal hospitals also have day treatment or partial hospitalization programs that supplement their outpatient capacity. These municipal programs are especially important to ensuring that immigrant families can access mental health care. In the Bronx, on the other hand, day treatment equivalent programs are institutional programs under the auspices of school systems, not hospitals or medical facilities, and are not equipped to provide the same level of care or access.

Establishing, maintaining, and utilizing partnerships with the mental health community is critical to providing a healing-centered approach that extends into the wider community. Mental health services can support student wellness and success both during and after the school Transformation Team’s implementation of the Healing-Centered Plan. The Transformation Team can collaborate with the school community to increase access to and use of mental health services by pushing back on stigma and partnering with outside groups to challenge barriers caused by long wait lists, language disparities, insurance limitations, transportation challenges, and operational hours that lock families out of treatment. Schools can only accomplish these necessities through active partnerships with numerous members of the surrounding mental health community.

---

Schools are centers of communities and are spaces where young people and families regularly share space. Schools can make meaningful use of their role as community spaces by establishing partnerships with mental health organizations that can provide school-based mental health services. School-based mental health organizations can provide and facilitate on-site services to help students, families and staff foster coping mechanisms for dealing with stress, interpersonal trauma, complex trauma, vicarious trauma, and systemic traumas including racism. The ability to provide this care on-site is what, in part, makes a healing-centered school and a healing-centered community.

Many Bronx schools have already done the hard work of developing valuable mental health partnerships. Other schools are just beginning. We recommend that Transformation Teams in all schools employ the following strategies:

- If there is a mental health clinic in the school, Transformation Teams should consider the following questions:
  
  o Do the providers have knowledge about healing-centered practices that they can share with the school as they engage in their transformation? Do the providers have knowledge of art as therapy?

  o Does the mental health clinic have access to interns that understand trauma-informed and healing-centered educational practices and can support the entire school community through training and consultation?

  o What specific therapies, modalities, and services are available in the school clinic and in what languages? Are cognitive behavioral therapy, eye movement desensitization and reprocessing, behavior activation, applied behavior analysis and other behavior therapies, didactical therapy, group therapy, substance abuse treatment, psychiatry, and bereavement support available?

  o Are there insurance or immigration status limitations that might impede access for members of the school community?

  o What processes are used to determine which students are eligible, which students are given priority, and how a wait list might be managed? Do those processes advance or undermine equity?

  o To what extent are services available to families and staff in the school community? Are those services available through direct application? If a referral process must be used, is it a cohesive process that allows students and families
to meaningfully access services?

- Does the mental health clinic have partnerships with other programs, including community-based organizations and other mental health providers, that can be leveraged to support the school community?

- Do clinic staff have time to meet with the school community to discuss patterns of student mental health challenges and how school staff or culture may be contributing to mental health challenges?

- How will the clinic ensure that families and parents/caregivers are a part of their child’s treatment processes? How will the clinic ensure that families and parents/caregivers have an opportunity to participate in the overall functioning of the clinic?

- For schools that do not have a mental health clinic on site, Transformation Teams should consider the following questions:

  - Does the school have any existing mental health partners that may be able to provide treatment and supports to students, families, and staff?

  - What specific therapies, modalities, and services would the Team like to make available in the school and in what languages? Will cognitive behavioral therapy, eye movement desensitization and reprocessing, behavior activation, applied behavior analysis and other behavior therapies, didactical therapy, group therapy, substance abuse treatment, psychiatry, and bereavement support be made available?

  - What steps can the Team take to eliminate insurance or immigration status limitations that might impede access for members of the school community?

  - What processes will be used to determine which students are eligible, which students are given priority, and how a wait list might be managed? How can the Team shape those processes to advance equity?

  - Does the school have any existing mental health partners that are able to provide services and supports to students in the school building, including crisis services?
o Does the school have any existing mental health partners that can provide clinical support to parents/caregivers and families, either on an individual level or through group support?

Schools can promote healing by building partnerships with diverse members of the mental health delivery stream including hospitals, clinics, family resource centers, and private partners. Transformation Teams can operate individually or collaborate across districts or borough-wide to partner with psychology and psychiatric departments within secondary education institutions that can provide professional development for staff, students, and parents/caregivers. Through these partnerships, schools can serve as hubs of services to support all members of the school community.

**Students in Temporary Housing**

Housing instability is a pervasive, persistent, and increasingly prevalent problem that affected 16% of Bronx students during the 2018-2019 school year. Bronx students in temporary housing face the personal trauma of daily instability and lack of access to basic needs. At the same time, these students must also grapple with the systemic trauma of living in a city and country that allows for such pervasive poverty and has not yet created a universal right to safe and stable housing. For these students, trauma is not in the past – it is an everyday reality. Many Transformation Teams will serve in schools with high rates of student housing instability and may identify those students as a priority in their Healing-Centered Plans. These Teams should consider building a stronger partnership with the DOE’s Students in Temporary Housing Staff. We recommend that teams take the following approach to build healing-centered partnerships with the Office of Students in Temporary Housing:

- Students in Temporary Housing (STH) staff are given clear job descriptions and tools for collaborating with the schools in which they work, including data-driven planning tools. Sit down with the STH staff allocated to your schools to discuss the role that they can play, the resources they can offer, and their expectations for collaboration with the rest of the school community. Support STH staff’s fulfillment of their duties and avoid assigning tasks to STH staff that are inconsistent with those duties.

- Integrate STH Community Coordinators and Social Workers into school operations that impact the most marginalized students, including preparation for and participation in IEP meetings, responses to discipline, and responses to absences or tardiness. Community Coordinators are specially equipped to support students in temporary housing as they navigate these processes.

- Carve out time for STH staff to train staff on common experiences of students experiencing housing instability, including enrollment at multiple schools, gaps in records or learning, inconsistent attendance, poor hygiene, unmet medical or dental

---

91 *Students in Temporary Housing Reports, 2018-2019. NYC Department of Education InfoHub.*
needs, wearing the same clothes frequently, fatigue, difficult emotional behaviors, difficulty developing relationships, lack of attention or focus, anxiety at the beginning or end of the school day, lack of participation in extracurricular activities, or lack of school supplies or inability to complete projects that require particular supplies. Staff who possess this knowledge will be better able to respond to students who are experiencing these challenges with support and empathy. STH staff can also train staff on healing-centered approaches that can be used to support students in temporary housing, including those listed in the “Non-Academic Targeted Precautions” section.

- Collaborate with Community Coordinators and Social Workers to identify any school practices or aspects of school culture that may contribute to the stigmatization of students in temporary housing. Transformation Teams should brainstorm ways to alter these practices or patterns.

- Collaborate with STH staff to identify community resources to support students. These may include local churches, local home base offices, or local pantries.

- Schools with STH Social Workers may be able to take on interns who can administer specific student supports including a success mentor program to address attendance challenges or a social skills group. Speak with your STH staff and STH Regional Manager to see if this is possible.

Schools without Students in Temporary Housing staff can still build strong relationships with the Office Students In Temporary Housing. Transformation Teams in schools that serve a high number of students in temporary housing, but that do not have STH staff, should review their student demographics against STH criteria to see if they are eligible for STH staff to join their school. Schools that do not qualify should designate a counselor, a parent coordinator, or someone in a similar position to act as a Students in Temporary Housing Liaison. The STH Liaison should connect with the STH Regional Managers in their district to collaborate and learn best practices to support their school’s students in temporary housing. Transformation Teams should work together to identify an appropriate Liaison, support the Liaison’s collaboration with district STH staff, and help the Liaison train staff and disseminate best practices within the school.

Crisis Teams

Even schools with successful healing-centered practices serve students that experience behavioral or emotional crises. Schools serving students that regularly experience crises may consider adopting a healing-centered approach to those crises as part of their Healing-Centered Plan. To do so, Transformation Teams should identify crisis response practices that align with the Healing-Centered Principles.
Transformation Teams may decide to take a proactive response to crises by providing greater support, resources, and infrastructure for the school’s Crisis Intervention Team\(^\text{92}\). The Transformation Team may pursue actions that help the Crisis Intervention Team brainstorm holistic preventive measures after a crisis or for students who regularly experience crises. These measures may include additional classroom supports, support on the development of coping mechanisms and self-regulatory skills, careful identification of potential triggers in the school environment, and connection to partners or outside services.

Transformation Teams should evaluate whether their school’s current Crisis De-escalation Plan is consistent with the healing-centered goal of providing students with the support they need to be ready to learn.\(^\text{93}\) Does the current crisis response escalate some or all students’ crisis behaviors, leading to more time out of school? Does the current crisis response traumatize some or all students, leading to more time out of school and greater social emotional challenges? What response strategies can be used to help students return to the classroom more quickly?

When crises escalate beyond the crisis team’s ability to respond, it may be necessary to seek outside support. Many Bronx schools contact 911 to seek additional support during a student crisis. For students with behavioral challenges or emotional challenges who are not expressing suicidal ideation, this response can be harmful and ineffective. The arrival of EMTs and transport to a hospital is often deeply traumatizing for students. In addition, many psychiatric emergency rooms report that they can do little to support students once they arrive, particularly when those students are no longer in crisis. If a Transformation Team observes a pattern of inappropriate calls to EMS at their school, they should consider adopting a Healing-Centered Plan geared toward increasing use of available community resources such as Mobile Crisis. School officials can place a referral through NYC Well, a crisis call center service provided by the City of New York.\(^\text{94}\) Once a referral is made, a Mobile Crisis team comes directly to the school within two hours and works with the student, reducing the traumatic nature of the experience. Mobile Crisis will also work with the student and caregiver to identify preventive approaches to support the student.\(^\text{95}\)

---


\(^{93}\) Chancellor’s Regulation A-411 on Behavioral Crisis De-Escataion/Intervention and Contacting 911 requires each NYC DOE program to develop an annual Crisis De-Escalation Plan as part of its Consolidated School and Youth Development Plan. The NYC DOE requires that each plan include strategies, locations, staff, and resources strategies that can be called upon for de-escalation. NYC Department of Education, https://www.schools.nyc.gov/docs/default-source/default-document-library/a-411-english.


\(^{95}\) The Visiting Nurse Services of NY (VSNY) operates the children’s Mobile Crisis Team in the Bronx. Since the introduction of Mobile Crisis teams in the Bronx, school officials have increased referrals to this service and have engaged more students into mental health care. However, a number of school officials have expressed concerns that they prefer a quicker response time from Mobile Crisis teams than the current two-hour window allowed under the program guidelines. See, Community Mental Health Services. Visiting Nurse Service of New York (VSNY).
Transformation Teams in schools with high rates of EMS transports and police responses to emotional crises should ensure that their Healing-Centered Plans integrate targeted services to support students with significant mental health needs. The Mayor’s Leadership Team on School Climate – a diverse group of stakeholders from the Mayor’s office, city agencies, unions, medical providers, research organizations, schools, and communities – developed a model called the Mental Health Continuum to address this need. This comprehensive, innovative, and trauma-sensitive model will build capacity within high needs districts to better address the needs of children with significant mental health needs, better respond to student crises, and prevent further crises.

The Mental Health Continuum model includes school partnerships with hospital-based mental health clinics; call-in centers to advise school staff about students in crisis; clinician response teams who respond during crises in schools; student assessments to determine the appropriate level of care needed; direct, ongoing mental health services for students, including intensive in-home individual and family behavioral supports when necessary; School-Based Mental Health Clinicians; and whole-school training in Collaborative Problem Solving, an evidence-based, skill-building approach to changing the most challenging behavior. These elements provide for a team of clinicians working systematically with students and school staff to determine the appropriate level of care; coordinate with schools to respond to students in crisis while working to enhance each school’s capacity to respond to the mental health needs of its students; provide direct, ongoing mental health support to students in school, as well as to families at home when needed; and help schools move to a public health rather than a law enforcement model to support an environment that fosters long-term behavioral change.

Lastly, the DOE should consider the development of its own mobile crisis team. School districts like the Schenectady City Schools District successfully operate and fund their own mobile crisis teams to respond to emotional and behavioral crises in their schools. By creating an in-house program, the DOE would likely reduce response times and develop an institutional memory of best practices and responses for crisis teams in an educational setting.

Response to Intervention and Special Education

As the beginning of this Roadmap explains, trauma impacts students’ ability to learn. Students who have experienced childhood trauma may struggle with receptive and expressive language, focus and concentration, executive functioning skills like organization and


prioritization, inhibition and impulse control, and memory. Intrusive flashbacks, hyperactivity, or dissociation may limit students’ ability to engage with and retain material.

To a special education or RTI team unfamiliar with the impacts of trauma, these challenges may look like ADHD or a behavioral disorder. However, trauma-related learning challenges cannot be effectively addressed with interventions typically used for ADHD or behavioral disorders. Schools that serve high populations of students who exhibit these challenges and who have IEPs or have been referred to RTI should consider prioritizing the provision of trauma-related interventions and special education supports. These supports should be used when students continue to experience these challenges despite the use of school-wide healing-centered practices. A trauma-sensitive and healing-centered RTI and IEP process includes the following elements:

- Trust between parents/caregivers and the RTI or IEP team is essential. RTI and IEP teams are better equipped to understand student needs if parents/caregivers feel comfortable sharing general information about the nature of past trauma experienced, the impact of the trauma, and triggers that the parent/caregiver has observed. RTI and IEP teams can encourage this sharing by modeling trust through consistent communication and by emphasizing privacy and confidentiality as much as possible. Before having these conversations, RTI and IEP teams should advise parents/caregivers of the ways in which these conversations may implicate mandated reporter status.

- Transformation Teams can partner with RTI and IEP teams to review the evaluations available for use in RTI and IEP processes. If a parent/caregiver reports learning impacts that may be related to trauma, does the team have access to appropriate evaluations to assess that impact? Does the team have access to evaluative tools to help them determine, for example, whether concentration issues are caused by ADHD or by intrusive flashbacks? If so, what can the team do to expand their evaluative ability? This is a great opportunity for Transformation Teams to collaborate with one another throughout the borough.

- Transformation Teams should consider whether their school’s RTI or IEP teams are familiar with interventions, services, management needs, and goals that are appropriate for students experiencing trauma-related learning challenges. If not, the Transformation Team may include an item in their Healing-Centered Plan to secure more training for RTI and IEP team members. Training may cover effective interventions, services, management needs, and goals; how traditional special education tools like Behavioral Intervention Plans can be adapted to support students with trauma-related learning challenges; and how some traditional approaches to RTI or IEPs can actually exacerbate
trauma-related learning disabilities.98

• A school that has mental health partnerships and serves a significant number of students with RTI services or IEPs who have trauma-related learning challenges may consider more clinical approaches. Transformation Teams in these schools may adopt a Healing-Centered Plan that includes collaborating with mental health partners to provide Cognitive Behavioral Intervention for Trauma in Schools (CBITS) or similar programs proven to improve the academic performance of students with trauma. These programs can help reduce the number of students with trauma-related learning challenges who receive RTI or IEP services. Some Transformation Teams may consider this intervention too specific when they are crafting their first Healing-Centered Plan, but may later decide to pursue it as they progress along their healing-centered journey.

Adopting these strategies can reduce the number of students who need or receive special education services in the long run. First, leveraging mental health partnerships and providing effective RTI services to support students with trauma-related learning challenges can reduce the number of students who are referred to special education in the first place. Second, by providing special education students with effective supports that are tailored to their trauma-related needs, IEP teams increase the likelihood that students will be able to operate without special education supports in the future. Taking a preventive approach is particularly important for students who have experienced trauma because this population of students overlaps significantly with students who are over-referred and over-classified for special education services.

VIII. A Long-Term Approach

This Roadmap focuses primarily on the steps that Bronx schools can take to begin their healing-centered journey, but the journey does not end with the implementation of a Healing-Centered Plan. A healing-centered school transformation is a paradigm shift and is a process of ongoing learning for school staff, school leadership, students, and parents/caregivers.

After the Transformation Team begins implementation of the Healing-Centered Plan, the Team should regularly meet to assess implementation, talk through any unanticipated problems, and adjust as needed. During these meetings, Team members may raise new needs or priorities that have arisen as implementation has progressed and as the school community has embraced the Healing-Centered Principles. As

implementation continues, the Transformation Team should formally evaluate the efficacy of action items and assess their outcomes.

As the Transformation Team concludes implementation of the first Healing-Centered Plan, the Team should identify new priorities and action items to implement. This process should replicate the original process and involve meaningful participation from all aspects of the school community, identification of priorities that reflect community needs and concerns, and prioritization of action items that align with the Healing-Centered Principles. Because the Team will have already completed one round of implementation, these new priorities will allow the school to build on their healing-centered capacity in exciting new ways. As the iterative process continues, the membership of the Transformation Team may evolve to include new members or take on new roles.

Schools can find more detailed guidance on Healing-Centered Plan development, implementation, assessment, and sustainability in the resources listed at the conclusion of this Roadmap.

IX. Not Just on Schools

The Healing-Centered Schools Working Group has addressed this Roadmap primarily to Bronx educators, but all members of the community share responsibility on the journey to healing-centered education. School staff support and buy-in is critical for success, but parents/caregivers and other community members, elected officials, and partners around New York State also have important roles to play. In this section, we describe the steps that other members of our community can take to support our schools as they become healing-centered spaces.

Students, Parents/Caregivers, & Community Members

Students, parents/caregivers, and other community members have a central role to play in the development of healing-centered schools. In addition to the student and parent/caregiver involvement laid out in the Roadmap, community members can be pivotal in the push for healing-centered schools. They can initiate conversations within their school community and push for change. They can also connect schools with local partners who can support the healing-centered transformation, including mental health professionals and arts institutions.

The entire community can promote and benefit from the principles of healing-centered schools. Community members can support young people in their neighborhood by educating themselves about the impact of trauma and systemic oppression on development, learning, and lifelong behaviors and the importance of building healthy coping mechanisms. Schools can support community member’s efforts to spread the Healing-Centered Principles by opening
educational events to members of the public. This type of education can help transform the mental and emotional health of community members of all types.

Community members, including community leaders, can also support the push for healing-centered schools by challenging the roots of trauma and systemic oppression in their communities. This means challenging the systemic trauma, conditions, and institutions that harm young people and their families. These traumas include over-policing, mass incarceration, lack of affordable and humane housing, lack of quality affordable healthcare, persistent poverty, and persistent exposure to discrimination including racism, sexism, homophobia, ableism, and xenophobia. This also means supporting our neighbors as they work to develop stronger coping mechanisms and heal from past trauma.

Finally, individuals who serve the community in other areas can take steps to make their institutions more healing-centered. This includes healthcare providers, mental health providers, non-profits and community-based organizations, arts institutions, and social services organizations.

New York City and State Leaders & Elected Officials

New York City and State leaders and elected officials can provide critical institutional support for healing-centered schools. Elected officials can connect with schools in their district and support their healing-centered transformation by connecting them to partners and resources. If elected officials find that schools in their district have not yet begun the journey to a healing-centered approach, they can host conversations for constituents about beginning that process.

On the state level, legislators have already begun to address trauma and its impact on learning. In 2019, Bronx State Assembly Member Latoya Joyner and Bronx State Senator Jamaal Bailey sponsored and passed legislation directing the New York State Commissioner of Education, Commissioner of Health, and Commissioner of Children and Family Services to conduct a study on the effects of trauma on child development and learning. At the completion of the study, the State Commissioners must issue a report of their findings and make recommendations to the governor and the state legislature. Once these recommendations are issued, legislators and state leaders can craft programs, grants, legislation, and policies to support their implementation.

Recommendations issued in the State Commissioners’ report and changes enacted through state legislation also create opportunities for local legislators and community leaders to take action. The recommendations issued by the State Commissioner of Education,

---

100 Id.
Commissioner of Health, and Commission of Children will provide helpful guidance, research, and best practices that can inform local programs, legislation, grants, and policies. For example, the Department of Education and other city agencies can implement those recommendations through school-based policies and programs. Similarly, local leaders can support the DOE by reviewing the information provided in the study and developing their own recommendations to further promote trauma-informed and healing-centered schools.

When considering how to implement these recommendations, legislators and state agencies should encourage a whole-school approach that integrates initiatives throughout school culture. An integrated approach is more likely to succeed than the traditional approach to school reforms, which organizes initiatives into discrete silos.

Finally, the New York State Education Department can create a Healing-Centered Schools Task Force dedicated to cultivating best practices around healing-centered schools, connecting New York schools to resources that support healing-centered transformations, and applying for and administering grants that fund healing-centered transformations. A similar task force was implemented in Massachusetts. The Massachusetts Behavioral Health and Public Schools Task Force was tasked with creating an organizational framework to enable schools to create supportive school environments. They issued their framework in 2011, setting off meaningful statewide change.

**Secondary Education**

Secondary education institutions can advance this effort by preparing future educators to engage in and build healing-centered schools. Bronx schools that begin the process of healing-centered transformation must educate their school staff about trauma, its impact on learning and behavior, and how staff can respond supportively to that behavior. Secondary education institutions can alleviate the burden of training future staff by adopting courses and curriculum materials that prepare future educators to use healing-centered and trauma-informed practices.

Universities are already engaged in this work at varying levels. For example, the University of Buffalo’s Institute on Trauma and Trauma-Informed Care provides resources to help organizations become more trauma-informed.\(^1\) Similarly, the University of Chicago’s TREP Project helps train educators to understand and use trauma-responsive educational practices.\(^2\) These universities and others can build on this work to develop healing-centered and trauma-sensitive curricula for future educators attending their institutions.

\(^1\) *[The Institute on Trauma and Trauma Informed Care (ITTIC)*](http://socialwork.buffalo.edu/social-research/institutes-centers/institute-on-trauma-and-trauma-informed-care.html)

\(^2\) *[Helping Traumatized Children Learn*](https://traumasensitiveschools.org/)
Statewide Partners

The movement for healing-centered schools should not end with the Bronx. This Roadmap was written to reflect the needs and voices of Bronx educators, students, and parents/caregivers, but the principles contained in this document can apply to schools around New York City and New York State.

Schools around the state – those that have begun the healing-centered transformation and those that are just beginning to explore it – can connect with one another to share ideas, educate one another, and support one another as they navigate the process of becoming healing-centered. The Healing-Centered Schools Working Group is committed to supporting this information sharing. In the next year, we will be launching the New York State Healing-Centered Schools Network. The goal of the network will be to bring educators, students, and parents/caregivers together to share their ideas, experiences, and the lessons they’ve learned. Participants can also identify statewide barriers that hinder healing-centered transformation and work together to remove or overcome them.
Appendix

Whether you are beginning your journey to understanding healing-centered practices, formulating your first Healing-Centered Plan, or charting a path for sustainability, the Healing-Centered Schools Working Group recommends these readings and resources:

**Healing-Centered and Trauma-Sensitive Training**

Your school community can access training on trauma-sensitive and healing-centered educational practices through the following organizations.

- The University of Chicago’s Trauma-Responsive Educational Practices Project offers a course entitled, “Understanding Trauma and Trauma-Responsive Educational Practices.” You can access the course here: [https://trep.educator.thinkific.com/courses/intro](https://trep.educator.thinkific.com/courses/intro).
- The National Center on Safe Supportive Learning Environments offers a variety of Trauma-Sensitive Schools training packages: [https://safesupportivelearning.ed.gov/trauma-sensitive-schools-training-package](https://safesupportivelearning.ed.gov/trauma-sensitive-schools-training-package).
- Ramapo for Children specializes in professional development and offers a variety of workshops for school staff, administrators, and parents/caregivers. You can view their offerings here: [https://ramapoforchildren.org/services-programs/training/professional-development/](https://ramapoforchildren.org/services-programs/training/professional-development/).

**How to Create Healing-Centered and Trauma-Sensitive Organizational Change**

Creating whole-school, system-wide change is an intensive process. This Roadmap lays out our recommended processes for organizational change. The following documents informed our recommendations, and they provide additional detail and insight.

- The Trauma and Learning Policy Initiative, a collaboration of Massachusetts Advocates for Children and Harvard Law School, authored *Helping Traumatized Children Learn*, a two volume series of publications that describes the impact of trauma on learning and lays out the Flexible Framework, a tool that schools can use to create a trauma-sensitive environment: [https://traumasensitiveschools.org/tlpi-publications/](https://traumasensitiveschools.org/tlpi-publications/).

- In 2019, the University of Buffalo Institute on Trauma and Trauma-Informed Care published the *Trauma-Informed Organizational Change Manual*, a step-by-step guide that any organization, including schools, can use to become trauma-informed: [http://socialwork.buffalo.edu/social-research/institutes-centers/institute-on-trauma-and-trauma-informed-care/Trauma-Informed-Organizational-Change-Manual0.html](http://socialwork.buffalo.edu/social-research/institutes-centers/institute-on-trauma-and-trauma-informed-care/Trauma-Informed-Organizational-Change-Manual0.html).

- The University of Chicago’s Trauma Responsive Educational Practices Project has developed a Professional Learning Community. On this webpage, school community members can access information and resources to use on the pathway to becoming a trauma-responsive school: [https://www.trepeducator.org/plc](https://www.trepeducator.org/plc).
Resources on Academic Healing-Centered Practices

Our Roadmap outlines academic healing-centered practices, including strategies for effective social emotional learning and culturally responsive-sustaining education.

- This in-depth study conducted by the Harvard Graduate School of Education assesses twenty-five evidence-based social and emotional learning programs, issues recommendations, and provides tools for educators and practitioners to use: https://www.wallacefoundation.org/knowledge-center/pages/navigating-social-and-emotional-learning-from-the-inside-out.aspx

- NYU’s Metropolitan Center for Research on Equity and the Transformation of Schools issued this “Brief Guide to Making Your Schools More Culturally Responsive.” It includes specific recommendations related to curriculum, school culture, recruiting and retention, and parent and family engagement: https://static1.squarespace.com/static/5bc5da7c3560c36b7dab1922/t/5e32fa7464c482a2d764678/1580399221393/Brief+Guide+to+CRE+in+Schools.pdf.

- The Education Justice Research and Organizing Collaborative at NYU’s Metropolitan Center also published one-pagers on Culturally Responsive-Sustaining Education that you can distribute to members of your school community. They are available in English, Spanish, Chinese (Simplified or Traditional), Korean, and Bangla. You can also find a one-pager specific to Asian Pacific American communities.

Anti-Bias Education

As our Roadmap states, being healing-centered means being anti-racist. We recommend exploring the following organizations, training materials, and resources as you explore anti-racist education and practices for your school community.

- The People’s Institute for Survival and Beyond offers Undoing Racism and a variety of other anti-racist workshops. You can learn more about their programming here: http://www.pisab.org/programs/.

- Black Lives Matter at School has compiled a variety of teaching materials, including a 2020 Curriculum Resource Guide that features lessons for every grade level to challenge racism and build supportive classrooms. You can access those resources here: https://blacklivesmatteratschool.com/teaching-materials/.
• The National Education Association’s EdJustice site offers a variety of resources for school-based discussions of race and anti-Blackness. On the following page you’ll find classroom activities, classroom lessons, educator resources, art and activism materials, and information about the book, Teaching for Black Lives: https://neaedjustice.org/black-lives-matter-school-resources/.

• Teaching Tolerance, a nationwide coalition of anti-bias educators, offers a variety of resources including professional development. You can access their resources here: https://www.tolerance.org/professional-development.

• Enid Lee’s “Looking through an Anti-Racist Lens” offers questions for reflection, action, and critical analysis that schools can use as they identify anti-racist actions for their Healing-Centered Plan.

Restorative Justice Practices

A healing-centered approach to behavior and harm is a central tenet of healing-centered education. Review these resources for more information about restorative justice practices and alternative responses to school-based harm.

• In 2019, the Dignity in Schools Campaign released an updated Model School Code on Education and Dignity. That Model Code outlines a human rights framework for schools, including model restorative justice practices. You can access the Model Code here: https://dignityinschools.org/toolkits/model-code/.

• In 2014, the Advancement Project collaborated with the American Federation of Teachers, the National Education Association, and the National Opportunity to Learn Campaign to publish a guide for educators entitled Restorative Justice: Fostering Healthy Relationships & Promoting Positive Discipline in Schools. This guide includes frameworks and action steps for educators looking to integrate restorative justice practices into all aspects of the school environment. You can access the guide here: http://schottfoundation.org/sites/default/files/restorative-practices-guide.pdf.

Miscellaneous

• Beginning in the fall of 2019, Rise Magazine began publishing a series entitled, “Surveillance Isn’t Safety” to document the harms of over-reporting to child protective services hotlines. In March 2020, Rise Magazine continued their series by issuing the “Rise Recommendations to Address Schools’ Over-Reporting to Child Protective Services.” The Healing-Centered Schools Working Group supports these recommendations and advises Transformation Teams to consider them: http://www.risemagazine.org/2020/03/rise-recommendations-schools-over-reporting/.
• *Community Schools: A Guide for Getting Started* offers needs assessment, community partnership, and change mobilization strategies that Transformation Teams may find useful. You can find a link to the guide on this page: [https://infohub.nyced.org/working-with-the-doe/community-school-partners/community-schools](https://infohub.nyced.org/working-with-the-doe/community-school-partners/community-schools).