Building Resilience in Students Impacted by Adverse Childhood Experiences: A Whole-Staff Approach

Victoria E. Romero, Ricky Robertson, and Amber Warner (2018).
Thousand Oaks, CA: Corwin, 248 pp.

Jacqueline Nenchin*
Molloy College

In May and August of last year, the NYSED issued press releases that offered new guidance and resources to help schools implement practices that focus on educating the whole child through renewed emphasis on social emotional learning. This Materials Review presents one such resource, *Building Resilience in Students Impacted by Adverse Childhood Experiences*: *A Whole-Staff Approach* by Victoria E. Romero, Ricky Robertson, and Amber Warner (2018), which can assist schools, teachers, and students in responding to what is termed an "adverse childhood experience (ACE)." The authors point out the estimate that 46% of all schoolchildren have experienced at least one ACE and that this percentage is increasing with the growing numbers of students living in poverty, which is highly correlated with ACEs. Their book seeks to address this crisis. Although it is intended for all schools and all children, it is particularly relevant to TESOL professionals at schools with many immigrant and refugee children, who are likely to have experienced ACEs. Thus, this book, which offers ways to help all students build resilience and achieve success in school and life, is a strong support for all who work with English language learners.

Romero et al. define ACE as trauma that occurs before the age of 18 and posit that it can be classified as belonging to one of three groups: (a) abuse (emotional, physical, or sexual); (b) family/household challenges (death of a family member, homelessness, domestic violence, substance abuse, mental illness, bitter divorce, incarceration of a family member); and (c) neglect (emotional or physical). It does not, however, explicitly address political trauma (war, persecution), which is a very important type of ACE—one that might be unfamiliar to teachers and staff who have spent their whole lives in the United States; in addition, the increase in the pace of technological advances and the explosive growth in social media have also negatively affected parental interaction with their children. Under these conditions, the reality is that children are increasingly more likely to come to school with ACEs and "behavioral language," which refers to the behavior (verbal or nonverbal) that expresses their distress. To avoid burnout and compassion fatigue and adequately support the children in their care, teachers and school staff need to be better prepared to deal with what the authors call "the new normal" (p. 9).

Building Resilience is positioned on a firm foundation of theory and theory in practice. From the preface, where readers learn of the adverse childhood experiences of and their effects on one of America's most famous Founding Fathers—Alexander Hamilton—to the concluding chapter, where readers find testimonies of adults with ACEs who have experienced success, the book offers proven ways to provide a healthy environment for students and staff. Chapter 1, "ACEs and the New Normal," introduces the basic terms and their definitions and presents salient new research about the changed needs of today's students. Chapter 2, "Put on Your Own Oxygen Mask before Helping Others," strongly advocates transformationist teaching, which urges that school staff take care of themselves and each other in a

professional way first. Chapter 3, "It's Easy to Have High Expectations—Hard to Grow a New Mindset," shares significant research about the characteristics of innovative schools that are high performing in high-poverty areas. The research shows that such schools are growth-oriented, collaborative, and responsible for their students' and their own growth. Chapter 4, "The Effects of Trauma on the Brain," explains the importance of educators being trauma-informed, so teachers and staff can better understand how ACEs can negatively affect the learning process.

Chapters 5 through 8 are dedicated to developing and implementing the plan for transforming schools and everyone working in them into the transformationist paradigm. Chapter 5, "Teaching Behaviors, Differentiating Interventions, Changing Pedagogy," introduces a practical and workable student-centered approach to trauma-informed pedagogy based on four components: talk, trust, feel, and repair; it also presents an adapted model of response to intervention (RTI) called "Trauma-Sensitive Response to Interventions for Behavior." Chapter 6, "Plan with the End in Mind: Visioning a Compassionate School," sets forth a process that school systems can readily emulate to achieve culturally responsive and emotionally safe districts. Chapters 7 and 8 ("From Theory to Practice: Transformational Actions Convert ACEs to Aces" and "The Process, the Plan, the Transformation") effectively tie together the information presented in earlier chapters and describe the roles of all stakeholders as they become trauma-informed activists.

The book, available in paperback and Kindle, is in a handy workbook format with a practical and user-friendly organizational plan, which facilitates teacher training. It is designed to help in the implementation of a school-wide response to the needs of students who have experienced ACEs. There is an informative preface, which presents a compelling rationale for the book and a chapter overview. The chapters are grouped into sections, which delineate the authors' joint and individual perspectives on the themes: Romero from the principal's perspective, Robertson from the teacher's and behavior intervention specialist's perspective, and Warner from the clinical social worker's perspective; each of their sections is followed by a series of questions that give readers the opportunity to engage with the text. In addition, the chapters include checklists, charts, links to pertinent websites, and "Toolkit Takeaways," which can be used individually and/or in conjunction with professional development for all stakeholders in a school. The book concludes with a comprehensive list of additional resources and a glossary of terms.

The authors recommend reading the final chapter, "In Their Own Words," after the first chapter because it contains the testimonies of adults from many different socioeconomic backgrounds (including screenwriter Antwone Fisher, a Black teacher, and a Latina entrepreneur) who survived various ACEs and achieved success, so it serves as a motivation for engaging with the rest of the book. Though this recommendation may seem out of reading order at first, these revealing accounts and the firsthand narratives give readers a vivid and intimate picture of the effects of ACEs, language expressed as behavior in response to ACEs, and the trauma-informed interventions that can successfully build resilience in students and transform classes, schools, and districts to meet student needs in the "new normal" in today's society. Most helpfully, the book provides concrete suggestions for culturally responsive teaching, trauma-informed strategies such as 2X10 (speaking to a student for 2 minutes per day for 10 days) and Check-In/Check-Out with a socio-emotional goal ("I showed kindness today" or "I reduced my stress by practicing breathing exercises"). There are websites—e.g., Centers for Disease Control (2018); Substance Abuse Mental Health Services Administration (2018); and other books (Harris, 2018; Nakazawa, 2015)—that address the topic of ACEs, mostly from a psychological perspective. Though the Collaborative for Academic, Social, and Emotional Learning (2018) website presents all-encompassing information on social and emotional learning, *Building Resilience* addresses supporting students with ACEs more thoroughly than any other resources, and provides an extensive and implementable plan. For TESOL professionals, who often find themselves on the forefront of the "new normal" and are the closest to students whose behavior may express how they feel better than their limited English ability can, this book, with the transformational pedagogy it represents, is indispensable.

References

Centers for Disease Control and Prevention (CDC). (2018). Adverse childhood experiences. Retrieved from https://www.cdc.gov/violenceprevention/acestudy/index.html

Collaborative for Academic, Social, and Emotional Learning (CASEL). (2018). Retrieved from https://casel.org/

Harris, N. B. (2018). *The deepest well: Healing the long-term effects of childhood adversity.* Boston, MA: Houghton Mifflin Harcourt.

Nakazawa, D. J. (2015). *Childhood disrupted: How your biography becomes your biography and how you heal.* New York, NY: Atria.

Romero, V. E., Robertson, R., & Warner, A. (2018). *Building resilience in students impacted by adverse childhood experiences: A whole-staff approach.* Thousand Oaks, CA: Corwin.

Substance Abuse Mental Health Services Administration (SAMHSA). (2018). *Adverse childhood experiences.* Retrieved from https://www.samsha.gov/capt/practicing-effective-prevention/prevention-behavioral-health/adverse-childhood-experiences

_____

*Corresponding author: jnenchin@molloy.edu