

**Building *A Trusted Space*:**  
**A Classroom-level Evaluation of the**  
**Docu-training and Curriculum**

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**FINAL REPORT**

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**September 2021**



**THE HACKETT CENTER**

**F O R M E N T A L H E A L T H**

A Regional Center of the Meadows Mental Health Policy Institute

## Contents

Background .....	1
Methods.....	4
Results .....	6
Conclusions .....	9
Appendix A: Docu-Training Satisfaction Survey .....	11
Appendix B: Curriculum Implementation Experience Survey.....	12
Appendix C: Summary of <i>A Trusted Space's</i> Curriculum Lessons .....	14

## List of Tables

Table 1: ARTIC-10-ed Summary Statistics.....	6
Table 2: ARTIC-10-ed Post Hoc Tukey Honest Significant Differences .....	7
Table 3: Docu-Training Satisfaction Survey Summary Statistics .....	8
Table 4: Curriculum Implementation Survey Summary Statistics.....	8

## List of Figures

Figure 1: <i>A Trusted Space</i> Order of Measures .....	5
Figure 2: Training and Comparison Groups Across ARTIC-10-ed Survey Phases.....	7
Figure 3: Top Three Lessons, According to Students.....	9

## Background

### COVID-19's Impact on Children's Mental Health

The COVID-19 pandemic has been and continues to be unpredictable. Adults and children are feeling the psychological consequences, including over a year of isolation, social unrest, pandemic anxiety, the economic toll of job loss, and the trauma of losing a family member, among other concerns. Families and students have experienced the disruption of the education system, which has challenged the way they interact and learn. As the pandemic continues to impact our society, schools and school districts will have to address and prioritize the mental health needs and wellbeing of students and their families, along with teachers and school personnel, while also addressing long-standing disparities within communities, as these factors impact learning and academic success.

Pre-pandemic data indicates that one in five children and youth under the age of 18 will experience a diagnosable mental health disorder during any given year.<sup>1</sup> In fact, around half of all diagnosable mental health disorders start by age 14.<sup>2</sup> While the long-term impact of COVID-19 on children's mental health is still unknown, a review of recent studies revealed that children, including young children, are experiencing high rates of anxiety and depression, and some groups are more vulnerable to the mental health burden of the COVID-19 pandemic.<sup>3</sup> These impacts are felt even more strongly among African American and Hispanic/Latino populations, who are disproportionately impacted by COVID-19.<sup>4</sup> One study estimated that nine family members, including children, are affected by one person dying of coronavirus.<sup>5</sup> This is of particular concern as there have been over 600,000 deaths in the United States alone.<sup>6</sup> The context in which many of these deaths occur, where social distancing prevents in-person

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<sup>1</sup> Kessler, R. C., Berglund, P., Demler, O., Jin, R., Merikangas, K. R., & Walters, E. E. (2005). Lifetime Prevalence and Age-of-Onset Distributions of DSM-IV Disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*, 62(6), 593–602. <https://doi.org/10.1001/archpsyc.62.6.5939/22/2021 4:39:00 PM>

<sup>2</sup> Kessler, R. C. et al. (2005). Lifetime Prevalence and Age-of-Onset Distributions of DSM-IV Disorders in the National Comorbidity Survey Replication, *Archives of General Psychiatry*, 62(6), 593–602.

<sup>3</sup> Marques de Miranda, D., da Silva Athanasio, B., Sena Oliveira, A. C., & Simoes-E-Silva, A. C. (2020). How is COVID-19 pandemic impacting mental health of children and adolescents? *International journal of disaster risk reduction: IJDRR*, 51, 101845.

<sup>4</sup> Centers for Disease Control and Prevention (2021). Risk for COVID-19 infection, hospitalization, and death by race/ethnicity. *Centers for Disease Control and Prevention*. <https://www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-death-by-race-ethnicity.html>

<sup>5</sup> Verdery, A. M., Smith-Greenaway, E., Margolis, R., & Daw, J. (2020). Tracking the reach of COVID-19 kin loss with a bereavement multiplier applied to the United States. *Proceedings of the National Academy of Sciences*, 117(30), 17695–17701. <https://doi.org/10.1073/pnas.2007476117>

<sup>6</sup> Centers for Disease Control and Prevention (2021). *COVID-19 mortality overview*. CDC. <https://www.cdc.gov/nchs/covid19/mortality-overview.htm>

support and community mourning, further increases the grief-related impact, particularly for young children.<sup>7</sup>

As students return to school, school leadership must be aware that many students will have experienced traumatic events, and many are also experiencing learning loss.<sup>8</sup> Exposure to trauma and grief significantly affects student learning outcomes, and bereavement is the strongest predictor of poor school outcomes, more so than any other form of trauma.<sup>9,10</sup> Over 50% of children and youth do not receive treatment for their mental health conditions, and untreated mental illness during childhood and adolescence is linked to higher rates of school absence and disruption in the classroom, as well as reduced grade completion and graduation rates.<sup>11,12</sup> While schools are not healthcare providers, they are well-positioned to address mental health and wellbeing concerns in their students by providing supports, including medical and educational services or referrals.<sup>13</sup> Schools can also provide a place for students to thrive through the provision of evidence-based lessons and support.

### Addressing Trauma and Grief in Schools

Children who are exposed to traumatic events are more likely to exhibit resilience in the aftermath of childhood trauma when child-serving systems, including schools, are trained in trauma-informed care (TIC).<sup>14</sup> Trauma-informed care is an approach used by programs, institutions, and service systems, including child-serving systems, that focuses on building a shared language to talk about trauma and integrating evidence-based best practices and policies to address trauma.<sup>15</sup> Resilience can be defined as the process of adapting well in the

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<sup>7</sup> Hostinar, C. E., Sullivan, R. M., & Gunnar, M. R. (2014). Psychobiological mechanisms underlying the social buffering of the HPA Axis: A review of animal models and human studies across development. *Psychological Bulletin*, *140*(1). <https://doi.org/10.1037/a0032671>

<sup>8</sup> Kuhfel & Tarasawa (2020). The COVID-19 slide: what summer learning loss can tell us about the potential impact of school closures on academic achievement. *NWEA Research*. [https://www.nwea.org/content/uploads/2020/05/Collaborative-Brief\\_Covid19-Slide-APR20.pdf](https://www.nwea.org/content/uploads/2020/05/Collaborative-Brief_Covid19-Slide-APR20.pdf)

<sup>9</sup> Oosterhoff, B., Kaplow, J. B., & Layne, C. M. (2018). Links between bereavement due to sudden death and academic functioning: Results from a nationally representative sample of adolescents. *School Psychology Quarterly*, *33*(3), 372–380. <https://doi.org/10.1037/spq0000254>

<sup>10</sup> Frieze, S. (2015). How trauma affects student learning and behaviour. *BU Journal of Graduate Studies in Education*, *7*(2), 27-34.

<sup>11</sup> Whitney, D.G., Peterson, M.D. (2019). US national and state-level prevalence of mental health disorders and disparities of mental health care use in children. *JAMA Pediatrics*, *(4)*:389–391.

<sup>12</sup> Meadows Mental Health Policy Institute. (2018). *Mental and Behavioral Health Roadmap and Toolkit for Schools*. <https://mmhpi.org/project/mental-and-behavioral-health-roadmap-and-toolkit-for-schools/>

<sup>13</sup> Meadows Mental Health Policy Institute, (2018), *Mental and Behavioral Health Roadmap and Toolkit for Schools*.

<sup>14</sup> Bartlett, J., & Steber, K. (2019). How to implement trauma-informed care to build resilience to childhood trauma. *Child Trends*. <https://www.childtrends.org/publications/how-to-implement-trauma-informed-care-to-build-resilience-to-childhood-trauma>

<sup>15</sup> Bartlett, J., & Steber, K., (2019), How to implement trauma-informed care to build resilience to childhood trauma, *Child Trends*.

face of adversity, trauma, tragedy, threats, or significant stress.<sup>16</sup> Resilience is more than “bouncing back” from difficult experiences; resilience can also involve profound personal growth as individuals build skills necessary to manage adversity.<sup>17</sup> When schools train their staff to understand the impact of childhood trauma and focus on implementing evidence-based best practices that address trauma, children are more likely to demonstrate resilience and thus experience improved emotional, developmental, and educational outcomes.<sup>18</sup> In addition to schools, parents, programs, and other service providers can play a role in helping children develop resilience by serving as trusted adults. Youth-adult partnerships are one of the most effective ways to engage both youth and adults in meaningful activities that contribute to positive youth development. Students who are involved in positive relationships with trusted adults show skill improvements and a decrease in risky behaviors.<sup>19</sup> To facilitate learning and academic success, it is important that school leaders attend to the mental well-being of their students. Building trusted spaces helps students process their experiences and advocate for their needs. The use of socio-emotional learning (SEL) curriculum can be a way to make these connections.

### ***A Trusted Space***

Documentary films are designed for social impact, and it is important to evaluate their effectiveness.<sup>20</sup> Although there is a lack of empirical study and literature about how to measure the impact of docu-trainings on attitudes and behavior, this evaluation has attempted to focus on these outcomes. *A Trusted Space* is a docu-training for educators and administrators to learn strategies to mitigate the effects of the grief, trauma, anxiety, and other emotional stressors related to the pandemic; that many students, families, and school personnel are feeling as they return to school. The 43-minute docu-training features teachers, parents, students, and experts in education and socio-emotional learning (SEL). The accompanying research-based SEL curriculum provides a practical and scientific understanding of how trauma impacts behavior and learning with lessons focused on improving emotional and educational outcomes.<sup>21</sup> *A Trusted Space's* goal is to increase understanding about the complex circumstances with which teachers and their students are coping, helping educators “redirect grief into growth” by

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<sup>16</sup> The Hackett Center for Mental Health (2021). *Fostering Resiliency in a Post-Pandemic World: Recommendations to Boys & Girls Clubs of Greater Houston*. [https://www.bgcgh.org/assets/pdf/FINAL\\_2021\\_BGCGH\\_Report.pdf](https://www.bgcgh.org/assets/pdf/FINAL_2021_BGCGH_Report.pdf)

<sup>17</sup> The Hackett Center for Mental Health (2021). *Fostering Resiliency in a Post-Pandemic World: Recommendations to Boys & Girls Clubs of Greater Houston*.

<sup>18</sup> Bartlett, J., & Stever, K., (2019), How to implement trauma-informed care to build resilience to childhood trauma, *Child Trends*.

<sup>19</sup> Innovation Center for Community and Youth Development, National 4-H Council, National Network for Youth, & Youth Leadership Institute. (2003). *Youth-adult partnerships: A training manual*. <https://ucanr.edu/sites/UC4-H/files/2424.pdf>

<sup>20</sup> Karlin, B. & Johnson, J. (2011). Measuring impact: The importance of evaluation for documentary film campaigns. *M/C Journal*, 14(6).

<sup>21</sup> All It Takes (2020). *Creating A Trusted Space in five days* [Program of studies].

building safe and trusted spaces for healing, ultimately creating more resilient students and a productive and supportive learning environment.<sup>22</sup>

The evaluation outlined in this report analyzes the use of *A Trusted Space* as a strategy to aid teacher development of trauma-informed classrooms and thus address student mental health needs as we continue to face the COVID-19 pandemic. We explored teacher attitudes toward trauma-informed care (TIC) to measure the impact of the *A Trusted Space* docu-training. To guide the quality improvement efforts of the *A Trusted Space* producers, we also incorporated feedback from teachers on the strengths and challenges of the docu-training and curriculum.

## Methods

Participants were recruited through a partnership with 11 schools from a school district in the Northern Los Angeles area. Based on guidance of district staff familiar with the participating schools, six schools were assigned to the training group, and five were assigned to a comparison group.

At baseline, prior to watching the docu-training, the comparison and training groups completed the ARTIC-10-ed. The Attitudes Related to Trauma-Informed Care (ARTIC) Scale is the first psychometrically valid measure of attitudes toward trauma-informed care (TIC) that has been published in peer-reviewed literature.<sup>23</sup> This evaluation used the ARTIC 10 – Education (ARTIC 10-ed), a 10-item, 7-point Likert-type scale measure designed for use in education settings.<sup>24</sup> Sample statements include “Students could act better if they really wanted to” contrasted with “Students are doing the best they can with the skills they have”, as well as “I feel able to do my best each day to help my students” contrasted with “I’m just not up to helping my students anymore”.<sup>25</sup>

Next, the training group watched *A Trusted Space* and participated in a conversation about the training. Immediately after, the training group completed the first phase of follow-up data collection (FU1), which included the ARTIC-10-ed and the Docu-Training Satisfaction Survey. The Docu-Training Satisfaction Survey asked respondents to answer six statements on a scale of “strongly disagree” to “strongly agree.” Statements included “The documentary was relevant to me” and “I plan to implement things I learned in the training in my classroom.” The full measure is in **Appendix A**.

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<sup>22</sup> All It Takes (2020). *Creating A Trusted Space in five days*

<sup>23</sup> Baker, C.N., Brown, S.M, Wilcox, P.W., Overstreet, S. & Arora, P. (2015). Development and psychometric evaluation of the attitudes related to trauma-informed care (ARTIC) scale. *School Mental Health*. DOI:10.1007/s12310-015-9161-0.

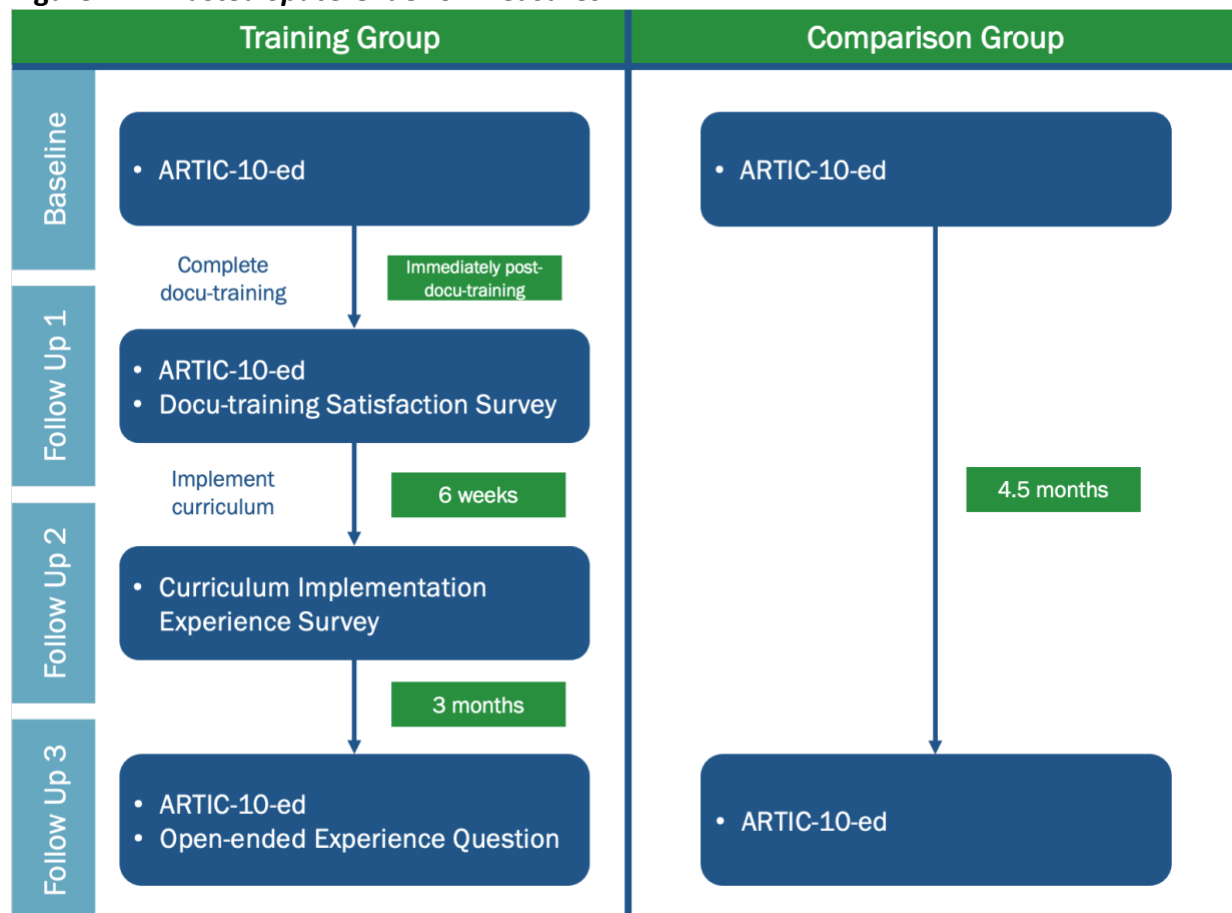
<sup>24</sup> Baker et al. (2015). Development and psychometric evaluation of the attitudes related to trauma-informed care (ARTIC) scale. *School Mental Health*.

<sup>25</sup> Baker et al. (2015). Development and psychometric evaluation of the attitudes related to trauma-informed care (ARTIC) scale. *School Mental Health*.

Approximately four weeks later, the training group completed Follow-Up 2 (FU2) – the Curriculum Implementation Experience Survey. The Curriculum Implementation Experience Survey assessed the actual use of and satisfaction with the curriculum in a teacher’s classroom after watching the docu-training. Respondents answered five statements on a scale of “strongly disagree” to “strongly agree,” with statements including “My students were engaged with this curriculum” and “The curriculum was relevant to my work as an educator.” Participants were also asked about their classroom format (in person, online, or hybrid), the usefulness of the curriculum for their classroom format, the lessons in which students seemed most and least interested, and barriers faced in curriculum implementation. The full measure is in **Appendix B**.

Approximately three months later, both the training and comparison groups completed Follow-Up 3 (FU3), comprised of ARTIC-10-ed (both groups) and an open-ended question on overall experience (training group only). After the data were collected and prepared for analysis, we calculated descriptive statistics for each variable and examined changes over time via statistical testing between and within groups. **Figure 1** lays out the order of measures used throughout the data collection process.

**Figure 1. A Trusted Space Order of Measures**





## Results

A total of 270 unique participants responded, all of whom taught in a fully virtual learning environment throughout the entire data collection process. Teachers in this sample taught grades ranging from kindergarten to eighth grade, with some teachers teaching multiple grades.

Summary statistics from each collection of ARTIC-10-ed data are provided in **Table 1**. Analysis of ARTIC-10-ed scores revealed significant differences between the training and comparison groups and between scores from baseline to final follow up, as seen in **Table 2**. **Figure 2** shows ARTIC-10-ed results for both the training and comparison groups over time, from baseline to final follow up. Two important inferences can be drawn from these results. First, the docu-training significantly improved attitudes toward TIC for teachers who participated in it. Second, those attitude changes persisted over time, remaining significantly more positive than the attitudes of non-participating teachers.

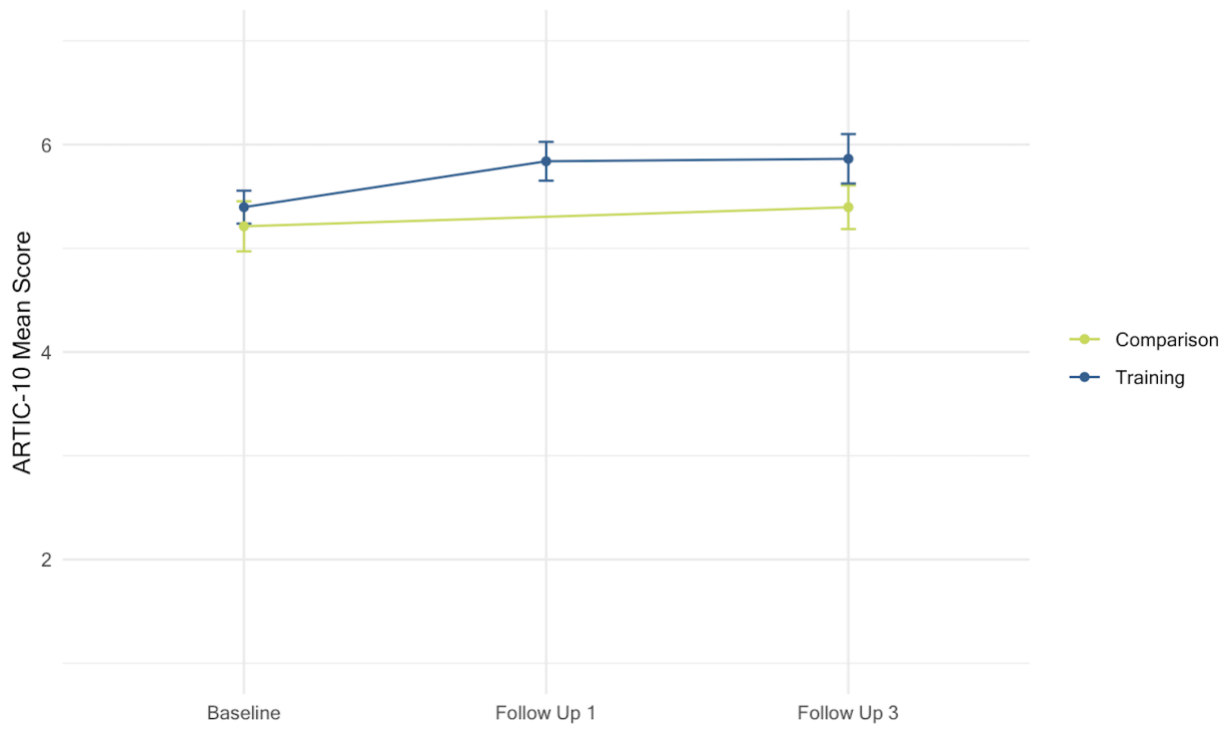
**Table 1. ARTIC-10-ed Summary Statistics (7-point Likert-type scale)**

ARTIC-10-ed Means Scores: Summary Statistics				
Group	Number of Responses	Mean	Standard Deviation	Minimum - Maximum
Comparison Baseline	41	5.21	0.773	3.2-6.5
Comparison FU3	53	5.4	0.767	3.8-6.9
Training Baseline	92	5.4	0.761	3.5-7.0
Training FU1	74	5.84	0.805	4.0-7.0
Training FU3	43	5.86	0.781	4.0-7.0
Total	303	5.55	0.811	3.2-7.0

**Table 2. ARTIC-10-ed Post Hoc Tukey Honest Significant Differences**

ARTIC-10-ed Mean Scores: Post Hoc Tukey Honest Significant Differences		
Groups	Mean (Confidence Interval)	Significant?
Training Baseline vs. Comparison Baseline	0.1845 (-0.216, 0.585)	Not significant
Comparison FU3 vs. Comparison Baseline	0.1840 (-0.260, 0.628)	Not significant
Training Baseline vs. Comparison FU3	0.0005 (-0.367, 0.368)	Not significant
Training FU1 vs. Comparison Baseline	0.6260 (0.212, 1.04)	Significant***
Training FU3 vs. Comparison Baseline	0.06525 (0.185, 1.12)	Significant**
Training FU1 vs. Comparison FU3	0.4430 (0.0590, 0.827)	Significant*
Training FU3 vs. Comparison FU3	0.4664 (0.0287, 0.904)	Significant*
Training FU1 vs. Training Baseline	0.4425 (0.109, 0.776)	Significant**
Training FU3 vs. Training Baseline	0.4660 (0.0719, 0.860)	Significant*
Training FU3 vs. Training FU1	0.0235 (-0.386, 0.433)	Not Significant
Significance codes: 0.001 '***', 0.01 '**', 0.05 '*'		

**Figure 2. Training and Comparison Groups Across ARTIC-10-ed Survey Phases**



Two other surveys, the Docu-Training Satisfaction and the Curriculum Implementation surveys, were completed by the training group only, as the comparison group did not participate in the docu-training or implement the curriculum in their classrooms. Summary statistics of the training group's Curriculum Satisfaction and Curriculum Implementation surveys are reported in **Table 3** and **Table 4**, respectively.

**Table 3. Docu-Training Satisfaction Survey Summary Statistics (7-point Likert scale)**

Docu-Training Satisfaction Survey: Summary Statistics			
Item	Number of Responses	Mean	Standard Deviation
1: relevant to me	89	6.03	1.05
2: relevant to student	89	6.08	0.895
3: discussion after	89	5.39	1.21
4: learned new info	89	5.09	1.32
5: plan to implement	89	5.57	1.05
6: recommend to others	89	5.54	1.12

**Table 4. Curriculum Implementation Survey Summary Statistics (7-point Likert scale)**

Curriculum Satisfaction Survey: Summary Statistics			
Item	Number of Responses	Mean	Standard Deviation
Number of Lessons Used	28	1.04	1.37
Degree of Following	13	3.08	0.641
1: easy to apply	12	5.58	1.08
2: relevant to work	12	5.75	0.754
3: create relationship	11	5.09	0.944
4: safe community	11	5.18	0.751
5: students engaged	11	5.46	0.688

While teachers reported enjoying the docu-training, they did not necessarily implement the curriculum in full in their virtual classrooms. This may be a result of the Curriculum Implementation Survey's small sample size (31 partially or fully completed surveys submitted from 131 eligible participants) or because of challenges implementing the curriculum virtually. When asked about the lessons in which students seemed especially engaged, the top three choices were All My People (n=7), My Bad, All Good (n=7), and Take 5 Space (n=6). A summary of the most popular lessons is displayed in **Figure 3**.

**Figure 3. Top Three Lessons, According to Students**<sup>26</sup>

<b>All My People</b>
All My People is focused on providing time for students and teachers to get to know each other on a more personal level, truly noticing who else is in the classroom.
<b>My Bad, All Good</b>
The goal of My Bad, All Good is to break students of the habit of making excuses or beating themselves up for making simple mistakes. When a mistake occurs, the person who made the error says, “my bad,” and the rest of the class responds with, “all good.”
<b>Take 5 Space</b>
Take 5 Spaces are designed to help students develop self-awareness, self-regulation, positive decision making, and coping mechanisms. Rather than always being redirected by an adult, students learn to notice what is happening and decide purposely what they need to manage the moment.

When asked which lessons students seemed least engaged in, the three most selected choices were Notice-Choose-Act (NCA) Worksheet (n=8), Common Courtesies (n=5), and Apologies and Forgiveness (n=5). A summary of these lessons is in **Appendix C**. The majority of teachers noted no specific barriers to curriculum implementation, and those who did listed online/remote teaching as the primary barrier.

## Conclusions

The comparison and training groups were not significantly different at baseline. Importantly, however, the training group demonstrated positive and significant changes in ARTIC-10-ed scores after viewing the docu-training, which indicates that the training had a positive impact on the attitudes of teachers towards trauma-informed care (TIC). It should be noted that attitude change is not necessarily synonymous with behavior change; however, we believe these results are an encouraging sign that the docu-training made a positive impact.<sup>27,28</sup>

The Docu-Training Satisfaction survey revealed high satisfaction amongst participants, indicating that the docu-training was well received and can be successfully provided to teachers during an in-school ‘Inservice’ training session. The Curriculum Implementation survey identified challenges with implementation of the curriculum in the classroom demonstrating that, on average, only one of the curriculum lessons was used per teacher throughout the implementation period. This could have several potential causes, including the virtual learning environment. An important caveat to these conclusions is the relatively small sample size, so

<sup>26</sup> All It Takes. (2020). *Creating A Trusted Space in five days*.

<sup>27</sup> Purtle, J. (2018). Systematic review of evaluations of trauma-informed organizational interventions that include staff trainings. *Trauma, Violence, & Abuse*, 1-16.

<sup>28</sup> Valente, T.W., Paredes P., Poppe, P.R. (2006). Matching the message to the process: The relative ordering of knowledge, attitudes, and practices in behavior change research. *Human Communication Research*, 24(3), 366–385.

conclusions drawn from the curriculum implementation survey should be considered with caution. These limitations and the lack of empirical data around documentary films suggest the need for further study.

In summary, teachers who viewed the *A Trusted Space* docu-training showed statistically significant improvements in attitudes toward trauma-informed classrooms. Future evaluations of the *A Trusted Space* docu-training would benefit from larger sample sizes and a lower drop-off in participation across survey phases (attrition). By focusing on increasing awareness about trauma and its impact on children through the lens of COVID-19, teachers became aware of the importance of creating safe, trusted spaces, became increasingly able to recognize the signs of trauma, and learned about the need to intervene accordingly to help students take positive steps forward to redirect grief into growth. Further research is needed to understand the correlation between teacher attitude changes and behavioral changes.

### Appendix A: Docu-Training Satisfaction Survey

“A Trusted Space” Docu-Training Satisfaction: Please indicate how much you agree or disagree with each of the following questions.							
	Strongly Disagree	Disagree	Slightly Disagree	Neither Agree not Disagree	Slightly Agree	Agree	Strongly Agree
The documentary was relevant to me.	1	2	3	4	5	6	7
The documentary was relevant to my students.	1	2	3	4	5	6	7
The discussion after the documentary was helpful.	1	2	3	4	5	6	7
I learned new information throughout this training.	1	2	3	4	5	6	7
I plan to implement things I learned in the training in my classroom.	1	2	3	4	5	6	7
I would recommend this training to another educator.	1	2	3	4	5	6	7
Open-Ended:							
What portion of the documentary or discussion did you find most useful and why?							
What could make this training more effective?							
Is there additional information that you wish was covered in the training?							

### Appendix B: Curriculum Implementation Experience Survey

Curriculum Implementation Experience Survey							
How many lessons from the 'A Trusted Space' curriculum did you implement in your classroom?	0	1	2	3	4	5	
To what degree did you follow the curriculum when implementing ATS in your classroom?	I did not follow the curriculum at all	I only slightly followed the curriculum	I followed the curriculum to a moderate degree	I followed the curriculum to a high degree	I followed the curriculum extremely carefully		
Please indicate the degree to which you agree or disagree with each of the following statements about your experience implementing the "A Trusted Space" curriculum.							
	<b>Strongly Disagree</b>	<b>Disagree</b>	<b>Slightly Disagree</b>	<b>Neither Agree nor Disagree</b>	<b>Slightly Agree</b>	<b>Agree</b>	<b>Strongly Agree</b>
The curriculum was easy to apply in my classroom.	1	2	3	4	5	6	7
The curriculum was relevant to my work as an educator.	1	2	3	4	5	6	7
The training on the 5 Critical Muscles helped me create trusting relationships in the classroom.	1	2	3	4	5	6	7
The curriculum materials helped build a safe classroom community.	1	2	3	4	5	6	7
My students were engaged in this curriculum.	1	2	3	4	5	6	7
<b>Additional Questions:</b>							
What classroom format were you using when you implemented this curriculum?	<input type="checkbox"/> In-person class <input type="checkbox"/> Online/remote class <input type="checkbox"/> Hybrid (combination of online and in-person)						

<p>[For those indicating a hybrid class] Approximately what percentage of your students receive at least some in-person instruction in a given week?</p>	0%	25%	33%	50%	66%	75%	100%
<p>[For those indicating a hybrid class] Approximately what percentage of your students receive at least some online/remote instruction in a given week?</p>	0%	25%	33%	50%	66%	75%	100%
<p>The “A Trusted Space” curriculum was useful for a(n) [in-person/online/hybrid as indicated above] classroom format.</p>	Strongly Disagree	Disagree	Slightly Disagree	Neither Agree nor Disagree	Slightly Agree	Agree	Strongly Agree
<p>My students seemed especially interested in these activities (rank top 3 activities):</p>	<input type="checkbox"/> Temperature Check <input type="checkbox"/> All My People <input type="checkbox"/> Interactive Story <input type="checkbox"/> Common Courtesies <input type="checkbox"/> NCA Worksheet <input type="checkbox"/> Apologies and Forgiveness <input type="checkbox"/> My Bad, All Good <input type="checkbox"/> Take 5 Space						
<p>My students seemed least interested in these activities (rank top 3 activities):</p>	<input type="checkbox"/> Temperature Check <input type="checkbox"/> All My People <input type="checkbox"/> Interactive Story <input type="checkbox"/> Common Courtesies <input type="checkbox"/> NCA Worksheet <input type="checkbox"/> Apologies and Forgiveness <input type="checkbox"/> My Bad, All Good <input type="checkbox"/> Take 5 Space						
<p>Open-Ended:</p>							
<p>Did you experience any problems or barriers to implementing the curriculum? If yes...</p>	Yes			No			
<p>[If Yes] What barriers existed to implementing these lessons?</p>							
<p>Is there anything else that you would like to share about implementing these lessons?</p>							



## Appendix C: Summary of *A Trusted Space's* Curriculum Lessons<sup>29</sup>

### Temperature Check

The Temperature Check activity focuses on paying attention to how students are feeling throughout the school stay by using the concept of a thermometer as a gauge of feelings. This activity can be verbal or a drawing, and a temperature of 98.7 is centered, calm, and ready. In the drawing activity, students identify the temperature of various feelings they may have on a thermometer and then use a clothes pin to indicate where they are at any given point during the day. It allows student an opportunity to reflect on how they are feeling and provides teachers with a visual indicator of where each of their students are on their thermometers.

### All My People

The All My People activity is constructed to provide time for students and teachers to get to know each other on a more personal level, truly noticing who is in the room. In this activity, the person whose turn it is will say, "My name is \_\_\_\_\_, and all my people who \_\_\_\_\_", and then state something that is true about them. For example, "My name is Callie, and all my people who love pizza" or "My name is Sean, and all my people who like to read". After they say this, everyone in the group for whom the statement is true will stand up, and the teacher will provide time for the group to notice who is standing with them.

### Interactive Story

The Interactive Story activity is designed to initiate a connection between the teacher and their students. It can be used any time a re-engagement exercise is needed. The activity is initiated when a teacher creates a prompt, choosing a topic that students may have recently noticed, such as "School may become virtual again". The teacher makes a statement, and subsequent students add on to the story. One person in the group writes down the story as it develops, and students retell the story and add their own part. This activity allows students to choose what they contribute based on what they have noticed in the classroom and about their classmates.

### Common Courtesies

Prior to this activity, students will explore the words *proactive* and *reactive* and how it feels when proactive responses and behaviors are used instead reactive responses and behaviors. The Common Courtesy Agreement (CCA) is a document formulated by the teacher and their students that will serve as a guideline that everyone agrees to adhere to for the academic year. The CCA is about being proactive, setting the intention for how all people want to feel and what actions will help the class do that, together. It is an 'operating agreement' that serves everyone equally, giving direction and permission for breakdowns and resets to happen without shame.

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<sup>29</sup> All It Takes. (2020). *Creating A Trusted Space in five days* [Program of studies].

Teachers start by asking for ideas, asking “What do we as a class want to promise each other? What do we want to commit to so everyone, including ourselves, feels safe and can learn well, all year?” Example statements for the CCA include:

- We will respect each other.
- We will listen to each other and the teacher.
- We will be kind to each other.
- We will allow each other to be ourselves without judgement.
- We will give each other the benefit of the doubt when something goes wrong.
- We will get to know each other and talk out our differences.
- We will notice when things are not safe for someone and work together to make it better.

## NCA Worksheet

The Notice-Choose-Act (NCA) Worksheet can be applied in large group, small group, or individual setting. It involves noticing a behavior or issue, choosing a different course of action, and determining the specific actions that are needed to rectify the behavior or issue. An example of what this looks like in practice for an individual is pictured below.

**Individual:**

**Notice:** I am grouchy around the house to others.

- I feel: upset, unkind, lonely, disconnected, alone, attacked.
- My behaviors are: being rude, being annoying, isolating myself, not being helpful.

**Choose:** To be friendly with my family.

- I would feel: accepting, open to learning, connected to others, not alone, optimistic
- Behaviors would be: others will treat me better, everyone will be happier, I will be helpful, I will look after others and they look after me, we would all talk better to each other.

**Act:** Very specific actions:

- I will offer to help my mom with dishes
- I will be careful not to argue with my siblings
- I will take a break when I feel myself get irritated, I will not take it out on others
- I will share how I am feeling with my family in a kind way
- I will stop blaming them for my moods

## Apologies and Forgiveness

The Apologies and Forgiveness lesson is discussion-based and includes a writing activity that teaches the value of asking for forgiveness and not holding grudges. Students learn what it means to offer a sincere apology, define examples of grudges, and talk about what happens to themselves and others when grudges are held. The conversation structure for Apologies and Forgiveness is pictured below.

1. I am sorry for \_\_\_\_\_ (be specific).
2. I know you must have felt \_\_\_\_ (genuine empathy).
3. Next time I will \_\_\_\_\_ (what I will do differently next time?).
4. Do you forgive me? (others do not have to say yes; we need to accept where they are).

5. Do you have any requests? (be open to this).

### **My Bad, All Good**

The goal of the My Bad, All Good activity is to break students of the habit of making excuses or beating themselves up for making simple mistakes. The teacher will initiate a chain of hand motions that all students must repeat, going around the in person or virtual room, with the goal of getting around the entire class without starting over. When a mistake happens, the person who made the error says, “my bad”, and the rest of the class responds with, “all good”.

### **Take 5 Space**

Take 5 Spaces are designed to help students develop self-awareness, self-regulation, positive decision-making, and coping mechanisms. Rather than always being redirected by an adult, students learn to notice what is happening for them and decide what they need to manage the moment. As they decide what they need, they can consider a Take 5 Space as one option. This is a ‘space’ to reset without disruption to the class or the teacher. These spaces rely on self-management from start to end. One major goal of a Take 5 Space is to keep the student in the classroom (both in person and virtual).