

Data Collection and Reporting to Support Implementation of Social Emotional Learning and Trauma Responsive Practices in Illinois Schools: Recommendations for State Leaders from the Data, Assessment and Accountability Committee of the P-20 Council

November 2021

Introduction

In fall of 2020, the Data, Assessment, and Accountability (DAA) committee of the Illinois P-20 Council formed a working group to consider how the state can create a framework for data collection and use to support social emotional learning (SEL) and trauma responsive practices in Illinois' schools. The group was comprised of a diverse array of stakeholders from across the state, including a school principal, representatives from the Illinois Education Association and Illinois Federation of Teachers, advocates, and education researchers, and representatives from the Illinois State Board of Education, and met roughly once a month from September 2020 through August 2021.

Prior to the COVID-19 pandemic, a large and growing body of research demonstrated the importance of SEL and trauma responsive practices in improving educational and life outcomes for students and helping address systemic inequities. In the wake of the pandemic and the impact it has had, and continues to have, on students and families across the state, the need for ensuring that schools are equipped to meet these needs has become even more urgent.

Data on student and staff needs and current capacity and resources are fundamental to informing the design and implementation of high-quality school-based programming and supports related to trauma, mental health, and SEL. This kind of information is critical to inform the targeting of resources and supports to where they are most needed at the classroom, school, and district level. Collecting and publishing this data in a clear and consistent way also allows for transparency so that parents, caregivers and school communities have a clear understanding of both the assets and areas of growth present in their local educational contexts. Finally, standard measures and language for communicating about and evaluating progress toward building trauma-responsive schools and districts and supporting school-wide SEL not only inform continuous improvement in implementation, but enable comparisons between student groups to identify and address inequities.

Despite the critical importance of this information, there is currently a lack of statewide data – either quantitative or qualitative – available to shed light on the SEL & trauma related needs, as well as capacity to address these needs, of Illinois' school communities. Knowing what data is available and accessing that data can be a challenge, and data quality varies widely from various sources/agencies. More consistency, standard, clear, consistent definitions and metrics and systems that speak to each other would be helpful.

This report reflects some of the findings and recommendations of the working group and is intended to help inform the state's work to help all PreK-12 schools and districts support the social-emotional and mental health needs of their student populations. This work bore a high value prior to the COVID-19 pandemic, as evidenced by the large and growing articulated need for mental health and SEL supports and robust body of research around the importance of SEL and trauma responsive practices in improving educational and life outcomes for students and helping address systemic inequities. In the wake of the pandemic and the impact it has had, and continues to have, on students, families, and school personnel/staff across the state, the need for this work has become [even more urgent](#).

This report is intended to serve as a useful resource to state leaders in general and in particular to inform the efforts of the state's newly formed Whole Child Task Force in regards to data collection, as well as the work of the P-20 Council to support Learning Renewal in the wake of the pandemic. It is also meant to complement

and build upon the exceptional work the state has already embarked upon to [support school district implementation](#) of trauma responsive practices through partnership with the Center for Childhood Resilience (CCR) at the Ann & Robert H. Lurie Children’s Hospital of Chicago and Peoria ROE to create a virtual learning community and provide trainings, as well as launching the Resilience Education to Advance Community Healing (REACH) pilot in 44 districts aimed at developing and implementing “data-driven strategic plans to support students’ social-emotional learning and mental health”.

The group used a K-12 focus, acknowledging that while data collection to support social-emotional learning and trauma-responsive practice in Early Childhood Education and Care and Higher Education settings prior to kindergarten is important, the expertise of group members is primarily related to K-12 education and the systems and structures relevant to each sector of the education continuum are sufficiently different that a K-12 focus was most constructive for this project. This area presents an opportunity for additional exploration, including identifying the ways that SEL data are collected and used in early childhood, such as through the [CLASS tool](#) in Head Start programs, and leveraging insights and best practices in data collection and use from the early years to [inform efforts in K-12](#) and to strengthen alignment and create connections between early childhood and K-12.

Objectives

The working group set out to explore how Illinois can build on the work the state started with the introduction of the Illinois Social-Emotional Learning standards and identified the following objectives for doing so:

- Identify and recommend components of a common statewide definition and/or framework to support trauma responsive practices in Illinois schools
- Highlight the overlap and intersections between SEL and trauma responsive practices
- Identify best practices in collecting and using data to inform continuous improvement efforts
 - Metrics: *What information can/should schools and school districts use to understand student needs, school/district capacity, progress, and areas for improvement around SEL and TRP?*
 - Tools: *How can the state help them collect this info – ensure high quality, provide for comparability, offer PD, make sure they are affordable to access/use?*
 - Use: *How does this information, once collected fit into strategies and practices for supporting SEL learning and TRP within classrooms, schools, districts?*

Workgroup Highlights

The working group conducted a literature review and engaged in a series of panel presentations and discussions with subject matter experts and practitioners from around the state and participated in facilitated conversations focused on the objectives listed above. A summary of the topics, activities, and stakeholders the group engaged is included below, along with highlights and key takeaways from the group’s work.

1. *Examined definitions of social-emotional learning and trauma-responsive practices, and began considering relationships between the two*

Although there are common frameworks and foundational components of a trauma-informed approach used by some schools, districts, and even states, “there in fact is currently no consensus on use or clear operationalization of the terms ‘trauma-informed approach,’ ‘trauma sensitive,’ ‘trauma-informed system’ ([Thomas et al., 2019](#); [Champine et al., 2019](#)). This lack of a consistent and unifying definition for what it

means for a school or school district to be “trauma-informed” or “trauma-responsive” in turn contributes to a lack of consistent and comparable metrics for measuring schools’ and districts’ capacity and progress toward becoming trauma-informed. The establishment of a single statewide definition and/or framework for trauma responsive schools and school districts in Illinois is therefore necessary for designing and implementing data collection mechanisms to evaluate need and measure progress, thereby supporting the strengthening and expanding of this work in Illinois.

The working group did not go so far as to define what a trauma responsive approach would look like, and this work was eventually taken up explicitly by the [Whole Child Task Force](#), but members did discuss a set of characteristics that would ideally be demonstrated by a trauma-responsive school and/or school district. Those characteristics included the following:

- i. Trauma responsive schools/districts require high quality, culturally responsive, **ongoing and job-embedded professional development** for *all* school staff to support continuity of care.
- ii. Trauma responsive schools/districts **leverage community partnerships** to provide seamless and coordinated care.
- iii. **Staffing and resources** are explicitly directed to trauma-responsive efforts/practices.
- iv. **Anti-racist practices** are trauma-informed practices, and need to be acknowledged as such to prevent trauma and resist re-traumatization (this means including school culture and climate and discipline in definition and data collection).
- v. **Collecting appropriate data** to identify students who are experiencing trauma should be viewed as the beginning but only part of the work of being genuinely trauma responsive. The necessary next step is for trauma responsive schools/districts to use that information intentionally, **establishing a process and protocol for systematic follow-up and supports** informed by data.
- vi. Trauma responsive schools should work to build student capacity and resilience, and to empower them, taking an **asset-based, healing-centered approach** – to that end, in the creation of a statewide definition, state leaders should consider using the term “healing-centered” rather than “trauma-responsive” because there is research that suggests that “trauma responsive” defines someone by their trauma, whereas “healing-centered” is more holistic.
- vii. Being trauma-responsive/informed recognizes **differentiation** according to student needs and a **school-wide system of support** to meet the unique needs of students.

Relationship Between SEL and Trauma Responsive Practices

Social and emotional learning is “the process through which all young people and adults acquire and apply the knowledge, skills, and attitudes to develop healthy identities, manage emotions and achieve personal and collective goals, feel and show empathy for others, establish and maintain supportive relationships, and make responsible and caring decisions” ([CASEL, 2020](#)). Illinois is recognized as a national leader in Social-Emotional Learning, having been among the first states in the nation to adopt [learning standards](#) for social-emotional learning from kindergarten through 12th grade. The standards build from the Illinois Early Learning and Development Standards, and each standard includes benchmarks and performance descriptors that reflect what students should know and be able to do throughout their educational trajectory.

Social Emotional Learning and Trauma responsive practices ideally function in a complementary manner if implemented in an [intentionally integrated](#) way. SEL programming can play a role in creating healthy and supportive learning environments necessary for schools to be trauma-responsive if it is delivered in a manner that is [culturally responsive](#) and [affirming](#) of students’ strengths. As the state works to facilitate data collection to support trauma responsive practices in Illinois schools, articulating the relationship between

Social Emotional Learning and trauma responsive practice and providing examples and/or best practices for what trauma-informed SEL looks like will help avoid implementation that is fragmented and redundant.

2. *Discussed and reviewed research on types of data helpful for understanding student needs and informing implementation of SEL and TRP in schools and districts.*

Research suggests that strategic data collection and use is a [critical component](#) of a comprehensive approach to Social Emotional Learning and Trauma Responsive Practices in schools and school districts, both for designing and targeting supports and interventions appropriately and for [evaluating progress](#) and informing continuous improvement. Three main categories of data useful for this purpose are information and data regarding:

- 1) Student needs and experiences to understand exposure to trauma;
- 2) Supports and resources available in schools and districts for meeting students' needs in these areas; and
- 3) The extent to which those supports and resources are being utilized, including whether they are equitably accessible and whether/where disparities exist in participation and uptake.

All three types of data can and should be collected in a manner that allows for disaggregation using demographic data in order to identify any disproportionalities in exposure to trauma. Although trauma is experienced by individuals of all demographic groups and identities, historically marginalized groups are exposed to trauma at [disproportionate rates](#). Exposure to systemic, historic and/or environmental stressors like [racism](#), classism, homophobia and transphobia can in itself be traumatic, and can cause [re-traumatization for students and staff](#) alike. The COVID-19 pandemic and ongoing racial violence are examples of [collective traumas](#) – sources of psychological upheaval shared by a group of people who all experience an event. Despite copious evidence of this inequity in the experience of traumatic stress, a notable limitation of available research evaluating the impact of various programs for school-based trauma-informed supports is a failure to consider differences by race/ethnicity and other relevant student characteristics.

3. *Compiled information on data the state already/currently collects that could be useful in supporting trauma-responsive practices and SEL work in schools and districts and brainstormed types of qualitative and quantitative data not currently collected or widely available that might add value in supporting schools and districts' move toward supporting SEL and building trauma-responsive environments.*

Illinois already collects a couple of important types of data that can help contribute to expanding and deepening trauma responsive practices and SEL work. The state is recognized as a [national leader](#) in collecting and using data on climate and culture through its [5 Essentials survey](#), which is completed on an annual basis by all PreK-12 teachers and 4th through 12th grade students to provide school level reports on key elements of the school environment, and is published on the state's school report cards, allowing parents and community members to access the information as well. Research has also [demonstrated](#) a connection between participation in arts education and student development of social-emotional competencies, suggesting that access to and participation in arts education can have a positive impact on student SEL. In terms of measuring this type of access and participation, Illinois' ESSA fine arts indicator will encompass data, already collected, on K-12 student participation in the arts.

Although this information provides valuable insights into school conditions that impact student SEL and mental health, only reflects a partial measure of student mental health and SEL needs and school capacity. The below chart summarizes data the state collects and publishes related to 1) student and staff mental

health and SEL needs and 2) school/district capacity, resources and supports to meet those needs, as well as measures/metrics in each of those domains that might hold value for school communities but which are not currently collected, published, and/or disaggregated by student characteristics like race and income.

Type of Data	State Currently Collects and Publishes	State Currently Collects, Does Not Publish	State Does Not Currently Collect or Publish
Student needs/ experiences	<ul style="list-style-type: none"> • Attendance and Chronic Absenteeism • School Climate and Culture (5Es completion rates) 	<ul style="list-style-type: none"> • Discipline Data (suspensions and expulsions at the school level, disaggregated by race/ethnicity, gender, etc.) • School Climate and Culture (outcomes?) • Kindergarten Individual Development Survey (KIDS) data on Approaches to Learning and Self-Regulation Domain 	<ul style="list-style-type: none"> • Mental Health and Counselor Referrals • Community conditions • Rates of ACEs or community conditions • Information on student screeners used locally
Supports/Available Resources for SEL and TRP		<ul style="list-style-type: none"> • Data needed to calculate student to counselor and student to social worker ratios 	<ul style="list-style-type: none"> • % of staff trained in TRP

Data related to SEL and TRP will be used in a variety of ways by different stakeholder groups. School and district administrators can use data on SEL and mental health needs of students, as well as school/district progress towards becoming trauma-responsive, to plan programming targeted to specifically meet student needs. Data on staff needs and beliefs can also help administrators build structures for supporting staff mental health and SEL. Classroom educators can use student level data to understand where their students’ strengths and areas for growth lie, and in turn differentiate supports and instruction accordingly. Parents and caregivers can gain insight into not only their own children’s needs, but those of the school community, empowering them to more effectively advocate on their child’s behalf. At the macro level, state leaders and advocates can use data disaggregated by student demographics to design policy and drive resources in a manner that is informed by student need and advances equitable outcomes. Mechanisms for collecting and communicating data on SEL and TRP should consider which end-user(s) will be utilizing the data, and how it will be leveraged.

4. Learned from national and Illinois-based subject matter experts as well as practitioners (school and district administrators and teachers and school staff) currently implementing trauma informed practices in Illinois school districts about data needs and possible avenues for the state to support data use for SEL and TRP.

The Trauma Informed Partnership of Macon County and the East St. Louis School District each participated in presentations and panel discussions with the working group. Both emphasized the critical role of partnerships in implementing trauma responsive practices in their areas, noting the importance of local union chapters in supporting and prioritizing ongoing educator trainings, and connections to local organizations

like hospitals and universities as pivotal to coordinating resources and expertise and making sure the work is embedded in educational practice in the long term. In Macon County, [two key components](#) of the partnership's work were developing a shared understanding and language around trauma within the district and conducting broad trainings for school staff on Adverse Childhood Experiences (ACEs) and their impact on child cognitive development.

In terms of data collection to support trauma responsive practices, schools in the Macon County partnership use local data trackers and primarily look to behavioral data like declines in office referrals and suspensions as well as qualitative data to understand impact of supports, understand student need, and adjust practices accordingly. In East St. Louis, community and contextual data, including data on things like poverty rates, concentrated poverty, violent crime and homicide, attempted suicide, incarceration, etc. help to identify areas of urgent need. They noted that a persistent challenge in collecting and using this information arises from the fact that data quality varies widely from various sources/agencies. Data on who has been trained on TRP is also useful, as it helps understand current capacity and identify other school district personnel, youth development professionals, and other community members and stakeholders who can benefit from training.

The group also heard from a panel of educators from across the state who are participating in the implementation of trauma responsive practices in their schools contexts. These educators expressed a desire to see SEL made a part of the core curriculum, and more emphasis to be placed on SEL as a key component of student growth and learning. During this panel and other discussions, the work group also noted the unique, positive impacts of a well-rounded set of experiences and learning opportunities, including arts education (dance, music, theater, visual, media art), on students' social-emotional development. Educators noted that their schools were starting to use more community data to understand environmental factors impacting students' SEL and mental health, but noted that this means "branching out to new data sources" aside from school-based information, which is not always easy to find or access. For some schools, inclusion of SEL information on local report cards was shared as an example of progress, giving parents/caregivers, educators and students a clearer picture of students' strengths and areas for growth with respect to SEL. Ongoing professional development on understanding data to inform trauma responsive work and shape SEL was considered highly valuable, as was availability of professional learning communities to allow educators to troubleshoot and learn from one another. Finally, educators suggested that districts develop goals explicitly related to trauma responsive practices and SEL, to ensure that this work is valued and meaningfully measured. They shared that buy-in from school and district leaders helps institutionalize this work and makes it much easier for educators to implement, but is not always a given, suggesting a need for administrator professional development on these topics as well.

The [Center for Childhood Resilience](#) (CCR) joined the group and walked through the Trauma Responsive Schools Implementation Assessment, a tool which can be used to assess needs, barriers, and progress toward trauma-responsiveness. They also shared the approach, key components, and examples of metrics used to evaluate progress within the Resilience Education to Advance Community Healing (REACH) pilot currently being implemented in 44 school districts in Illinois. As schools work to become trauma responsive, the CCR team suggested there might be a value in creating designations which reflect where schools and districts are on a progression toward trauma responsiveness. Group members discussed the value in exploring this option and looking to work done on Chicago Public Schools' [Supportive Schools certification](#) as an exemplar of such a designation.

The group also engaged with experts from the Aspen Institute and xSEL Labs. In early 2021, the Aspen Institute published a [policy guide](#) focused on building positive school climate. They shared research on the influence of school principals on school climate and culture, as well as value added models showing the link between SEL and long-term student success, and highlighted key findings from the report, including the importance of school and district leaders creating coherence in policy relating to SEL and school climate by explicitly connecting efforts to improve school climate with other aspects of policy such as safety, culturally responsive pedagogy, and discipline. [xSEL Labs](#) creates assessments to evaluate SEL competencies and guide teaching and learning, and is a member of CASEL's [Measuring SEL](#) initiative. They shared a rubric for understanding school or district progress on a continuum from planning administration of SEL assessments to execution of activities based on using that data, and shared examples of work currently underway in other states to create a statewide platform for SEL data collection for continuous improvement which would allow schools and districts to select metrics for monitoring their progress.

Notes from all workgroup discussions were used to create the recommendations included in the following section.

Recommendations

Themes from the relevant research and those that arose in the working group's discussions suggest a set of actions the state can take in order to support data collection and use to expand and strengthen Trauma-responsive practices and social-emotional learning in Illinois schools. In order to support schools and districts across Illinois in effectively collecting and using data to implement SEL and develop TR schools, state education leaders should:

1. Create a theory of change that at its foundation applies the recommendations of the state's Whole Child Task Force to school community context to enact systemic change supported and informed by data which:
 - Draws a clear connection between a statewide definition of trauma responsive practices/schools and the role of the collection and use of data to support progress toward schools and communities becoming trauma responsive
 - Clarifies the significance of, and relationships between, various kinds of data related to SEL and trauma responsive practices, including attendance and chronic absenteeism, discipline, staffing ratios, community factors, school climate and culture surveys, SEL competencies, etc.
 - Acts as a high-level roadmap for leveraging quantitative and qualitative data to accomplish school and district goals of supporting SEL and building TRP
2. On an optional basis, purchase/provide evidence-based, high quality data collection tools and PD on their use which districts can access and use at their discretion, such as a universal trauma screener and tool for assessing SEL competencies. The provision of these tools should be accompanied by clear guidance communicating the importance of coupling data collection of this nature with local plans for providing supports and interventions to meet student needs revealed by the data, as well as guidance for ensuring student privacy and safety in the collection and use of data related to trauma and mental health.
3. Add metrics to the state report card (possibly in the school and district environment sections) that reflect data related to TRP and SEL data, like school and school district staff ratios related to supporting student SEL and TRP compared to research-based recommendations of those ratios, including student to counselor ratios, student to social worker ratios, resource coordinators (or the

equivalent/similar school and district level positions related to coordination of services), etc. Stakeholder and expert input should be used to ensure metrics identified for this purpose are appropriate and are reported in manner that supports equity and avoids creating unintended consequences or incentives. Such data is valuable for transparency and for informing community conversations as well as state policy design and resource allocation. This state-level information should be complemented by recognition of the important role played by local data collection and use related to trauma responsive and healing centered practices.

4. Recommend that districts collect and report on a standard set of metrics related to SEL/TRP, disaggregated by student group, on an annual basis, in keeping with evidence-base suggesting that data of this nature is critical for understanding need, targeting supports, and informing continuous improvement. The state could help maximize the usefulness of these data for various stakeholder groups and ensure they are interpreted and utilized appropriately by creating and providing a clear data dictionary including a description of each recommended metric, the rationale for its inclusion in school and or district level reportage, and examples of use-cases for relevant/intended stakeholder groups.
5. Work across agencies and service providers to increase accuracy and accessibility of data on community and environmental factors related to SEL and Trauma.

Membership

The group was comprised of a diverse array of stakeholders from across the state – names and organizational affiliations of members are listed below. Additionally, staff from the Illinois State Board of Education participated and provided valuable consultation throughout the course of the working group’s convening.

1. Amy Alsop, *Illinois Federation of Teachers*
2. Antoinette Taylor, *Exceptional Needs Consultant*
3. Betheny Lyke, *American Institutes for Research*
4. Erin Roche, *William H. Prescott Elementary, Chicago Public Schools*
5. Jane Russell, *Illinois Federation of Teachers*
6. Jonathan VanderBrug, *Arts Alliance Illinois*
7. Joshua Kaufmann, *Teach Plus*
8. Lindsay Semph, *Educators for Excellence*
9. Lisa Hood, *Education Systems Center at Northern Illinois University*
10. Larry Frank, *Consultant to the Illinois Education Association on Educational Policy and Research*
11. Melissa Figueira, *Advance Illinois*
12. Robin Steans, *Advance Illinois*