TRAUMA, CRISIS INTERVENTION & RESILIENCE IN CHILDREN & YOUTH
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Contents

Introduction 7
Trauma and Crisis Intervention 8
What is Trauma? 9
What Impacts the Intensity of Reactions to Trauma? 10
How do Children and Adolescents React to Trauma? 12
Trauma Intervention 14
How Else Can Teachers Help Children Cope? 20
How Else Can Parents Help Children Cope? 22
General Principles for Building Resiliency 24
When and Where do I Seek Additional Professional Support? 26
Building Resiliency: Classroom Activities
  Activity Related to Feelings 30
  Teamwork Activity – Lifting 34
  Communication Activity – “I Feel” Messages 35
  Problem Solving Activity 36
References 37
Introduction

As a science and profession, psychology is engaged in a wide variety of endeavours aimed at better understanding the psychological aspects of human growth and development in all its diversity. Psychology service providers work in varied occupational settings such as schools, hospitals, universities, the forensics industry and sports. One of the emerging areas in the field of psychology involves research and clinical practice related to psychological trauma, its impact on individuals and treatments that promote recovery. Building resilience, the ability to adapt well to adversity, can help individuals manage stress and feelings of anxiety and uncertainty. When tragedies occur, psychology staff works together with other professionals, such as social workers and guidance counsellors to help students and school personnel reduce the impact of such events.

This booklet focuses on the impact of traumatic experiences on school children and adolescents and how psychology staff, along with other special services staff, teachers and parents can intervene both in the immediate aftermath of crises and over the long term and help build skills of resilience.
Trauma and Crisis Intervention

In 1999, two high school students at Columbine High School carried out a shooting rampage. On September 11, 2001, the Twin Towers in New York City collapsed after terrorist attacks. In 2004, a massive Tsunami in South East Asia killed hundreds of thousands. In 2005, Hurricane Katrina flooded the city of New Orleans. In our own neighbourhoods, violence, sexual abuse, drive-by shootings, car accidents, illness and/or death of students or their loved ones, fires, separation from caregivers, and robberies occur.

All these events share something in common – they can be traumatizing.
What is Trauma?

Psychological trauma is any event that is extremely distressing to a person, and that usually evokes a reaction of intense fear, anxiety, and helplessness. It is an experience that is emotionally and psychologically painful, and usually involves a threat to a person’s physical integrity or the safety of someone that is in close proximity. Trauma can alter the way we view ourselves, the world around us, how we process information and how we respond to the environment.

It changes our perception of safety and predictability of our world and makes us realize our vulnerability. Emotional memories about the traumatic event may be replayed over and over again. In the face of traumatic events, most psychological and physiological reactions are considered normal. The intensity of these reactions, however, depends on several factors related to the traumatic event and the characteristics of the child, his family, and social network.
What Impacts the Intensity of Reactions to Trauma?

*Factors Related to the Traumatic Event*

- **Perceived severity of the event** - a child’s perception of an event can be more important than the event itself. For example, an infant may not be at all affected by a home robbery, but separation from his/her primary caregiver may be extremely traumatic. Among school aged children, graphic or gruesome images of people, particularly primary caregivers and other loved ones, appear to be most traumatic.

- **Physical Proximity** - the closer the child’s location to the event, the more traumatic it is. For example, a child who is a witness to a violent event will be expected to be more traumatized than another child who hears about the incident.

- **Frequency/Duration** - trauma can be either pervasive (such as ongoing sexual abuse) or a time-limited event (such as a flood). Time limited events can also occur more than once.
Characteristics of the Child and Family

The child’s initial vulnerability also determines how well the child deals with the traumatic event. Developmental age, preexisting psychological disorders, experience with previous trauma, previous life stressors (such as medical or health related issues), and the range of family and social supports all influence the child’s reactions to the trauma. For example, research has indicated that children exposed to family violence, child abuse, community violence, and disasters are more likely to experience excessive stress and anxiety, depression or difficulties with overall adjustment in the face of a traumatic event.

Building resiliency involves protecting the child from such negative events and facilitate their development of good social, communicative and problem solving skills, as well as building positive self-esteem and a hopeful future outlook.
How do Children and Adolescents React to Trauma?

Reactive behaviours in response to trauma are normal for a period of time after the event. Reactions to trauma may appear immediately after the event, or may be delayed in appearing. Nevertheless, each individual varies in terms of time needed to heal from the traumatic event. Once traumatized, a child’s brain needs to “sort out” the extraordinary experience because trauma overwhelms the person’s capacity to deal with everyday stressors.
Below is a chart outlining common reactions to traumatic events:

<table>
<thead>
<tr>
<th>CHILD’S AGE</th>
<th>RESPONSE BEHAVIOURS TO TRAUMA</th>
</tr>
</thead>
<tbody>
<tr>
<td>5 years and younger</td>
<td>Regression, crying, screaming, trembling; “freezing”, aimless motion, clinginess, thumb sucking, bedwetting</td>
</tr>
<tr>
<td>6 - 11 years old</td>
<td>Disruptive behaviour, inability to pay attention, anger outbursts, fighting, irritability, complaints of stomach/headaches, sleep disturbances/nightmares, withdrawal from others, irrational fears, refusal to attend school, feelings of guilt, “flatness”</td>
</tr>
<tr>
<td>12 - 17 years old</td>
<td>Flashbacks, nightmares, problems with peers, mood swings, depression, sleep disturbances, substance abuse, academic decline, suicidal thoughts, physical complaints</td>
</tr>
</tbody>
</table>

Typically we expect that symptoms of trauma diminish with time and a person returns to some level of appropriate functioning within two to four weeks. However, some children may exhibit severely intense long-term reactions in the aftermath of a traumatic event that may be diagnosed as Post Traumatic Stress Disorder (PTSD). Reactions common to PTSD include persistent re-experiencing of the traumatic event, increased arousal (such as hypervigilance and sleep disturbance), emotional numbness and avoidance of reminders of the event (such as when a victim of a car accident does not want to ride in a car). These reactions continue for more than one month following the traumatic experience and cause considerable distress and impairment in social, emotional and academic functioning.
Trauma Intervention

In helping children cope with trauma, crisis intervention is essential. Otherwise the probability of developing significant learning and behaviour difficulties increases. For example, research indicates that trauma intervention is very effective in preventing the development of PTSD. Parents, teachers, and school support staff (e.g., psychology and social work staff) can help children cope and reduce the psychological effects of a traumatic event by immediately intervening and being observant of those who may be at greater risk. Such intervention is also conducive to building resilience.

What is trauma intervention?

The goal of trauma intervention is to stabilize the child emotionally and enhance his/her feelings of safety and control. The process typically involves three levels of trauma intervention: defusing, debriefing, and social responsiveness. Not all students exposed to a traumatic event will need to go through all levels, as individuals vary in their resiliency and individual needs.
Defusing

Defusing is initiated immediately following the traumatic event or within eight hours of the traumatic event. As the definition implies, its goal is to provide immediate response to the crisis and to lessen its potential impact on individuals.

The first step is to establish a plan of action, which involves identifying specific school personnel and special support staff to participate in the intervention and to address safety concerns.

The second step of defusing is to clarify misunderstandings, which increase confusion and anxiety, and threaten the sense of safety, by providing accurate and consistent information to students regarding the incident.

For many students, sharing information about the event will be sufficient in addressing their concerns. For others, however, additional support may be necessary to address their unresolved emotions. This typically involves allowing the student to “vent”, while the adult listens, validates and normalizes emotions, provides further information, and helps plan for the next couple of days. It is also a chance to establish a support network for the most affected individuals.
# Defusing

<table>
<thead>
<tr>
<th>Method</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active Listening</td>
<td>Face the child and give your undivided attention. Assume an open, receptive posture. Express concern and maintain eye contact.</td>
</tr>
</tbody>
</table>
| Reflective Listening    | Repeat or paraphrase what the student says. *For example:*  
Student: *I can’t believe what happened! I am so upset. I just can’t believe it!*  
Staff: *What happened is upsetting and surprising to you.* |
| Validating              | Nod affirmatively as the child speaks, smile warmly and do not give advice. Spend some extra time with the child, comfort and reassure feelings. *For example:*  
Staff: *I can see that this is very upsetting for you.* |
| Normalize emotions      | Acknowledge present feelings and possible future reactions, remind them they are safe right now, compare to another situation, affirm that they are capable of coping and healing.  
*Examples of questions:*  
- Have you ever felt this way before (or knew someone who did)?  
- How did you/they get through it?  
- Who/what helped the most?  
- What did you/they do to feel a little bit better? |
| Providing information   | Provide further information about the incident as needed and correct false information.                                                                                                                      |
| Planning for the next couple of days | Help predict and prepare – think in terms of short periods of time, simplistic actions.  
*Examples of questions:*  
- What can you do for the rest of the day that will help you until we meet again?  
- What can you do for a brief time to give your brain a rest?  
- As difficult as this is, you are showing me a lot of compassion. What can you do share your compassion with others who feel the way you do? |
Debriefing

Debriefing is typically a group discussion about a traumatic event. It is more structured and complex than defusing and it is provided at least a day to a few days after the traumatic event. This way the shock has begun to dissipate and people have begun realizing the impact of the event on them.

The ultimate goal of debriefing is to accelerate the normal process of recovery, to lessen the stress reaction, to teach basic stress management and to provide psychological closure. The process provides an opportunity for emotional venting, it normalizes the reactions to the traumatic event and it allows students to express their deeper thoughts and feelings and to share their experience with others. It is also a chance to identify individuals who are in need of more specific trauma intervention and follow up.

Ultimately, the role of the adult is to help the individuals cope by deriving meaning from their subjective experience and thereby shift their perception of themselves from one of a “victim” to one of a “survivor” of the incident.
Research has demonstrated that this process leads to empowerment, active involvement of the student in their own healing process and a renewed sense of safety and hope.

<table>
<thead>
<tr>
<th>DEBRIEFING</th>
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<tbody>
<tr>
<td>Deriving meaning</td>
<td>Ask specific questions that help the student derive meaning from their thoughts, actions and behaviour occurring as result of the critical incident.</td>
</tr>
<tr>
<td>Examples of questions:</td>
<td></td>
</tr>
<tr>
<td> What worries you the most right now?</td>
<td></td>
</tr>
<tr>
<td> What scares you the most right now?</td>
<td></td>
</tr>
<tr>
<td> How are you getting through it?</td>
<td></td>
</tr>
<tr>
<td> What do you think you can possibly learn from this?</td>
<td></td>
</tr>
<tr>
<td>Planning for the future</td>
<td>Help students view themselves as survivors instead of victims of the incident.</td>
</tr>
<tr>
<td>Examples of questions:</td>
<td></td>
</tr>
<tr>
<td> Sometimes people feel like they learned something (about themselves, about how to deal with difficult things) after going through something like this. Have you learned anything? What have you learned?</td>
<td></td>
</tr>
<tr>
<td> What was something that someone did that you found helpful?</td>
<td></td>
</tr>
<tr>
<td> What really surprised you the most about yourself in the past few days?</td>
<td></td>
</tr>
<tr>
<td> How has dealing with this changed how you think about yourself?</td>
<td></td>
</tr>
</tbody>
</table>

Example of a statement to reinforce the child’s feeling of resilience:

 Every time we make it through one crisis, we learn a little more about ourselves, especially our strength. There will be other crises – that is a part of life. Future crisis may be less or more difficult, but your strength will help you find a way to get through those tough times too. (Steele, 2004).
Social Responsiveness

Social responsiveness refers to making an active contribution to the traumatic event. As such, it often refers to social activities that may be initiated by students, parents or school staff to help those involved feel more helpful about the situation. Examples of such social activities include organizing food or clothing drives, fundraising, taking part in communal activities with others who are experiencing the same crisis, making cards, and drawing a mural.

Most individuals engage in social responsiveness following a traumatic event regardless of the intensity of trauma experienced. Research indicates that social responsiveness empowers students, restores hope and helps students learn about respect, diversity, generosity, and collaboration. Consequently, it can also have a healing impact on the community as a whole.
How Else Can Teachers Help Children Cope?

When violence or disaster affects a whole school or community, teachers and school administrators can play a major role in the healing process. In addition to supporting the interventions described above, educators may also help children cope and build resiliency by employing any or all of the following:

- Allow yourself to come to terms with the event before you try to reassure the children. This may be difficult when the traumatic event occurs suddenly at school, however, occasionally in the case of a natural disaster, there will be several days before schools reopen and staff can take the time to prepare themselves emotionally.

- Take your time returning to ordinary school routines. Give students time to talk over the traumatic event and express their feelings about it. In time encourage the students to move toward reasonable goals.
Understand that some students may not want to participate in class discussion about the traumatic event. Nonetheless, encourage them to stay in class. Try not to force discussion or repeatedly bring up the catastrophic event as this may re-traumatize students.

For younger students, offering art and play activities may be beneficial.

Remember to take into account cultural differences for expressing emotion. For example, in some cultures it is not acceptable to express negative emotion.

Maintain communication with parents with regards to the traumatic event, their children’s response to it, and how you can work together as a team. Involve mental health professionals in these meetings if necessary.
How Else Can Parents Help Children Cope?

After violence or a disaster occurs, the family is the primary resource for helping the student. Among the things that parents and other caring adults can do to help children cope and build resiliency are:

- Take care of yourself so you can take care of the children.

- Reassure children that the traumatic event was not their fault, and that it is normal to feel upset when something traumatic happens.

- Allow time for the children to discuss their feelings. Gradually encourage them to express their thoughts and feelings and listen without passing judgement. Help younger children communicate their feelings if they are having difficulty.

- Gradually return to routines at home. If your children continue to be somewhat anxious or afraid, reassure them that you love them and will be there for them. Spending extra family time together may be helpful.
Understand that the behaviour of some children may regress. Such reactions are typical following exposure to a traumatic event. For example, if your children begin experiencing difficulties at bedtime, allow them extra time and reassurance. If necessary, it may be helpful to let the child sleep with a light on for a limited time.

Provide children with opportunities to feel in control and self-sufficient. For example, allow them to make some decisions about meals, what to wear, and so forth.
General Principles For Building Resiliency

General principles that parents and educators can follow to build resiliency and help children cope with trauma are:

- Encourage children to continue moving toward reasonable goals. Focusing on what children have accomplished can help build the resilience to move forward in the face of challenges.

- Encourage children to develop problem-solving skills and age-appropriate methods for managing anxiety. Help children learn to trust themselves to solve problems and make appropriate decisions.

- Continue to teach children to make social connections with others (e.g., family, teachers, and friends) that can act as a social support/network.

- Continue nurturing children’s positive self-esteem by reminding them of previous challenges they have overcome and how their strength will help them overcome future challenges.

- Keep current events in perspective and teach children to maintain a hopeful future outlook. A positive outlook will enable children to keep going even in the hardest times.
Most children and adolescents if given support such as that described above, will recover almost completely from the fear and anxiety caused by a traumatic experience within a few weeks. However, some children and adolescents need more help perhaps over a longer period of time in order to heal.
When and Where Do I Seek Additional Professional Support?

In the weeks following a traumatic event, it is important to identify students who are in need of more intensive long-term support and therapy, because of profound grief or some other extreme emotion. Children and adolescents who further require the help of a mental health professional may show the following symptoms of PTSD.

- Re-experiencing the trauma in play or dreams
- Continuously reliving the experience (psychologically or physiologically)
- Persistently avoiding reminders of the event
- General withdrawal from people, interests or activities
- Having difficulty feeling positive emotions about the future
- Sleeping disturbances (i.e., difficulty falling or staying asleep)
Having difficulty concentrating
Exaggerated startle response
Being irritable

If these symptoms are present for more than a month and cause significant distress to the student or result in a significant impairment in social, emotional, adaptive or academic functioning, then they may meet the diagnostic criteria for PTSD.

It is important to note that students experiencing PTSD or those in need of further intensive support may also appear to be experiencing extreme anxiety, phobias, depression, and behavioural difficulties that significantly impact on their overall functioning.
Listed below are agencies/resources where children and families may seek further support:

**Canadian Red Cross Society**  
(416) 480-2500  
www.redcross.ca

**Salvation Army, Community and Family Services**  
(416) 532-4511  
www.salvationarmy.ca

**Distress Centres of Toronto**  
(416) 598-0166 or (416) 408-HELP  
www.torontodistresscentre.com

**Scarborough Hospital**  
(416) 289-2434  
www.tsh.to

**St. Elizabeth Health Care**  
(416) 498-8600 ext. 2136  
www.saintelizabeth.com

**Bereaved Families of Ontario**  
416-440-0290  
www.bfotoronto.ca

**Trauma Management Group**  
Toll Free: 1-800-644-4373  
www.trauma.ca
WEB SITES

Canadian Mental Health Association
www.cmha.ca

Childhood Trauma
www.childtrauma.com

Trauma References
www.sourceresource.com

The Child Survivor of Traumatic Stress
http://users.umassmed.edu/Kenneth.Fletcher/kidsurv.html

National Association of School Psychologists (NASP)
www.nasponline.org

National Institute of Mental Health
www.nimh.nih.gov/healthinformation/anxietymenu.cfm
Building Resiliency:
Classroom Activities

In building resiliency and helping children cope, the following classroom activities may be helpful. These activities may be completed in small groups or individually. Additionally, they can be adapted to be completed at home.

Activity Related to Feelings

Backpack Activity

This activity is designed to be adapted for many situations with children or adults. It has been used effectively to explain the benefits of healthfully releasing angry or sad feelings. Students seem to grasp the concepts better after experiencing the visual and perceptual metaphor of the backpack and canned food. The material with quotation marks can be used a partial script for the activity.

---

Materials needed:

Backpack
Canned food (many shapes and sizes; cover labels)
Marker

Procedure:

Gather group into a circle or other arrangement where everyone can see the demonstration. Have cans of food stacked or lined up on a table. Explain: “This backpack represents our bodies, and the cans represent mad or sad feelings. Sometimes these feelings are small like this can. [Hold up a small can.] Sometimes feelings are big like this one. [Hold up a large can.] The small can represents something that may happen every day, like being cut off in the lunch line. The big can represents something more serious, like when your pet dies.” Ask students to share situations that bring about sad or mad feelings. Write their examples on can labels that correspond in size to the seriousness of the situation. As each can is labelled add it to the backpack.

After all cans have been placed in the bag, pass it around the group for each student to lift. Ask, “Would it be possible to participate in activities you enjoy carrying such a heavy bag? Of your favourite activities, which would be the most difficult to do?” Possible answers may include swimming, playing the piano, baseball, dancing, playing video games. Explain: “When we carry mad and sad feelings inside, it is a heavy burden. Just like heavy
cans, these feelings may keep us from enjoying things we usually like. They can keep us from doing our best in school. They may make us not want to play. Hard feelings may also make us feel cranky, so that we respond to others differently than we normally would. Maybe we are impatient with a friend or parent. This is our body’s way of telling us that we have feelings deep inside that need to be let out.”

Explain: “There are helpful and unhelpful ways to deal with tough feelings.” Give examples of each [and practice]. “Many people find that when they are mad, they have extra energy. Exercising can be a helpful way to use that extra energy. At other times, having quiet alone time, [taking deep breaths, imagining peaceful things], or talking to a good friend is most helpful. When getting feelings out, it is important to follow two rules: (1) Don’t hurt people (self or others), and (2) Don’t hurt things. Using energy to destroy things or hurt others is not a healthy way to express feelings.”

Ask students for examples of expressing feelings in ways that follow these two rules. For each healthy idea, take one can out of the backpack.

Reassure students: “All of us have different feelings from time to time. However, you can decide how you will react to your feelings. You can make sure you aren’t holding them inside and carrying them around longer than you need to. When we have difficult feelings, it is better to deal with them in a healthy way than to keep them inside.”
Additional discussion for specific situations:

*Sensitivity to others’ needs:*

Explain: “The backpack activity can also help us understand others and be more sensitive to their needs. Maybe someone’s bag is heavy with lots of feelings stuffed inside. Unaware of that person’s heavy backpack, we might say something that hurts his or her feelings. This adds another can to his or her heavy backpack. Because the person is already exhausted from carrying such a heavy load, he or she might lash out and dump the load of feelings on us.”

“Another example is when Mom asks John to take out the trash. Taking out the trash is not fun, but usually John does the chore without complaining. However, today John complains and stomps his foot in anger. Mom might not know that John had a bad day at school. He got into a fight with his best friend. His backpack is full to overflowing. Because he already has feelings stuffed inside, he becomes overly upset about taking out the trash, complains, and stomps his foot in anger.”

“It is important to be understanding of others’ feelings. When other people overreact to something we do or say, they might already have a full backpack. We need to be careful not to add more cans to someone’s backpack. We also need to be careful about overreacting to others when our backpack is full. It makes sense to keep our backpack as empty as possible.”
Teamwork Activity

Lifting

Explain:

“When things seem impossible or overwhelming, we need to remember the strength we gain from unity.”

Ask one student to sit on a table or desk. Ask another student to lift the student on the table with one finger. This seems impossible! It is impossible with only one finger providing the power. Now ask 15 students to come forward and, as a group, to each use one finger to lift the student on the table/desk. Ask students to lift the table/desk 1 inch off the ground. Then ask students to state in one sentence what they learned from the lifting activity. Possible lessons might include:

“A little help from many friends goes a long way.”
“Many hands make heavy work lighter.”
“When everyone joins in, amazing things can be accomplished.”
“We are stronger when we work together as a group.”
Communication Activity

"I Feel" Messages

Invite students to share how they have used their good communication skills over the past week. Expand on previously taught conversation skills by teaching them how to use “I feel” statements. Read the scenarios listed below (one at a time) and ask students how they would feel in that particular situation. Practice using the formula: “I feel___when ____because____.” You can normalize their feelings by making a statement after the student’s “I feel” statement. Using the student’s phrases, you would insert: “Lots of kids feel _____ when _____ because ______.” Considering the age of students involved, you might use the following examples:

- “Your dog chewed your new pair of shoes.”
- “You were selected to be the class president.”
- “Your mother is taking you to a restaurant for dinner tonight.”
- “You earned a good grade on the math test.”
- “Your best friend got sick and can’t spend the night at your house.”
Problem Solving Activity

Explain to students the following steps to solving problems:

1. Define the problem.
2. Is it your problem? If not, whose is it?
3. Brainstorm possible solutions. When students are brainstorming, don’t stop to judge the ideas. It is important to list as many ideas as possible.
4. Look at each idea and ask, “How would this solution work?”
5. Choose the best solution for the problem. This is personal. What might work well for one student might not work for another. Students need to evaluate their own situation and determine which solution will best fit their needs and circumstances.
6. Act on the chosen solution. Do it.
7. Review: Was the problem solved? If the problem is solved, GOOD JOB! If not, go back and try again.

Ask students to pick a problem that the whole group can use as an example. Use this example to demonstrate the seven steps of problem solving. Ask students to use the worksheet while practicing problem solving skills with the example chosen by the group.
REFERENCES


WEBSITES

National Association of School Psychologists (NASP)
www.nasponline.org

National Center for Post Traumatic Stress Disorder (PTSD)
www.ncptsd.va.gov

National Institute of Mental Health (NIMH)
http://www.nimh.nih.gov/

Trauma Intervention Programs Inc.
http://www.tipnational.org/
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