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14
15 **IN THE UNITED STATES DISTRICT COURT**
16 **FOR THE CENTRAL DISTRICT OF CALIFORNIA**

17 PETER P., a minor, by Carolina	)	Case No.
Melendrez, guardian ad litem;)	
18 KIMBERLY CERVANTES; PHILLIP	)	CLASS ACTION
W., a minor, by Beatrice W., guardian)	
19 ad litem; VIRGIL W., a minor, by	)	COMPLAINT FOR:
20 Beatrice W., guardian ad litem; DONTE)	
J., a minor, by Lavinia J., guardian ad	)	1) VIOLATION OF SECTION 504
21 litem; on behalf of themselves and all	)	OF THE REHABILITATION ACT,
22 others similarly situated; RODNEY	)	29 U.S.C. § 794;
CURRY; ARMANDO CASTRO II; and)	
23 MAUREEN MCCOY,	)	2) VIOLATION OF DEPARTMENT
	)	OF EDUCATION REGULATIONS
	)	REGARDING “LOCATION AND
25 <i>Plaintiffs,</i>	)	NOTIFICATION,” 34 C.F.R.
	)	§ 104.32;
26 v.)	
)	
27 COMPTON UNIFIED SCHOOL	)	3) DEPARTMENT OF EDUCATION
28 DISTRICT; DARIN BRAWLEY, in his	)	REGULATIONS REGARDING

1 official capacity as Superintendent of)
2 Compton Unified School District;)
3 MICAH ALI, SATRA ZURITA,)
4 MARGIE GARRETT, CHARLES)
5 DAVIS, SKYY FISHER, EMMA)
6 SHARIF, and MAE THOMAS, in their)
7 official capacities as members of the)
8 Board of Trustees of Compton Unified)
9 School District,)

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Defendants.

) **“PROCEDURAL SAFEGUARDS,”**
) **34 C.F.R. § 104.36;**
) **4) DEPARTMENT OF EDUCATION**
) **REGULATIONS REGARDING**
) **“FREE APPROPRIATE PUBLIC**
) **EDUCATION,” 34 C.F.R. § 104.33;**
) **AND**
) **5) AMERICANS WITH**
) **DISABILITIES ACT, 42 U.S.C.**
) **§ 12101 ET SEQ.**
) **DEMAND FOR JURY TRIAL**

1 Students Peter P., Kimberly Cervantes, Phillip W., Virgil W., and Donte J.,
2 (“Student Plaintiffs”) on behalf of themselves and all others similarly situated, along
3 with teachers Rodney Curry, Armando Castro II, and Maureen McCoy (collectively,
4 “Plaintiffs”) bring this action against Compton Unified School District (“CUSD”),
5 Darin Brawley, in his official capacity as Superintendent of CUSD, and Micah Ali,
6 Satra Zurita, Margie Garrett, Charles Davis, Skyy Fisher, Emma Sharif, and Mae
7 Thomas, in their official capacities as members of the Board of Trustees of CUSD
8 (collectively, “Defendants”). Plaintiffs’ allegations against Defendants are based
9 upon information and belief unless otherwise indicated. Plaintiffs allege as follows
10 in this federal question action, over which this Court has jurisdiction pursuant to 28
11 U.S.C. § 1331.

12 INTRODUCTION

13 1. Decades of research have proven that children who grow up in high-
14 poverty neighborhoods characterized by minimal investment in schools, quality
15 housing, after-school programs, parks, and other community resources are
16 disproportionately likely to be exposed to trauma and complex trauma.¹ Trauma
17 stems from such causes as exposure to violence and loss, family disruptions related
18 to deportation, incarceration and/or the foster system, systemic racism and
19 discrimination, and the extreme stress of lacking basic necessities, such as not
20 knowing where the next meal will come from or where to sleep that night. Complex
21 trauma stems from the exposure to multiple persistent sources of violence, loss, and
22 other adverse childhood experiences (“ACEs”), and describes children’s exposure to
23 these events and the impact of this exposure.² Children in high-poverty
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25 ¹ The terms “trauma” and “complex trauma” are often used interchangeably in
26 this complaint, and although a child can be profoundly affected by one traumatic
27 experience, the Student Plaintiffs are all victims of complex trauma, which also is
28 the subject of most of the academic literature cited.

² The Centers for Disease Control and Prevention (“CDC”) defines ACEs as
childhood abuse, neglect, and exposure to other traumatic stressors. The CDC’s

1 neighborhoods are also overwhelmingly concentrated in schools that fail to meet the
2 educational and mental health needs of trauma-affected students. Young people
3 living in the communities with the fewest resources are thus both more likely to be
4 exposed to trauma and less likely to receive the interventions needed to cope with
5 that trauma. This dual assault greatly increases the likelihood of long-term and
6 devastating harm to the educational success and emotional well-being of these
7 young people.

8 2. How young people react to trauma depends on the age of the child, the
9 severity of the trauma, their proximity to it, and their individual coping mechanisms.
10 A child experiencing trauma or abuse develops strategies, which become coping
11 mechanisms to enable day-to-day functioning, but medical science has made clear
12 that cumulative exposure to trauma—particularly when it goes unaddressed—is
13 likely to disable a child’s ability to learn. Trauma incapacitates by altering the
14 physiology of a child’s developing brain, creating a neurobiological response that
15 impairs the performance of daily activities, especially skills essential to receiving an
16 education such as thinking, reading, concentrating, learning and regulating
17 emotions.

18 3. Education, mental health, and medical research have established that,
19 without appropriate interventions, complex trauma can have a devastating effect,
20 including among children who do not exhibit symptoms sufficient to merit diagnosis
21 of a clinically-significant trauma-related disorder. Studies have shown, for example,
22 that when controlling for other factors, children exposed to violence have decreased
23 reading ability, lower grade-point averages (GPA), more days of school absence,
24 and decreased rates of high school graduation.³ Exposure to two or more traumas
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26 web site includes a discussion of a number of studies linking ACEs to children’s
27 later-life health and well-being.

28 ³ Sheryl Kataoka et al., *Violence Exposure and PTSD: The Role of English
Language Fluency in Latino Youth*, 18 J. Child. Fam. Stud. 334, 335 (2009)

1 makes a student 2.67 times more likely to repeat a grade or be disengaged with
2 school.⁴ In short, unaddressed trauma is a powerful predictor of academic failure.⁵

3 4. Schools are obliged under the Rehabilitation Act and Americans with
4 Disabilities Act to accommodate students who are being denied benefits of
5 educational programs solely by reason of experiencing complex trauma. Schools
6 must intervene early and consistently according to professional standards in order to
7 ensure that trauma does not determine a young person’s educational attainment and
8 life chances.

9 5. Experiences in California and across the country have repeatedly
10 shown that appropriate interventions, which teach skills proven to bolster the
11 resilience of young people, can effectively accommodate the disabling effects of
12 trauma. This gives students affected by trauma meaningful access to the public
13 education they deserve. Experts agree that to effectively provide reasonable
14 accommodations to students whose learning is impaired by complex trauma,
15 particularly in schools that serve high concentrations of trauma-impacted students,
16 access to an individualized plan is insufficient. Rather, implementation of
17 schoolwide trauma-sensitive practices that create an environment in which students
18 are able to learn is required.

19
20 (hereinafter “Violence Exposure and PTSD”); *see also* Nadine J. Burke et al., *The*
21 *Impact of Adverse Childhood Experiences on an Urban Pediatric Population*, 35
22 *Child Abuse & Neglect* 408 (2011) (hereinafter “Impact”).

23 ⁴ Christina D. Bethell et al., *Adverse Childhood Experiences: Assessing the*
24 *Impact on Health and School Engagement and the Mitigating Role of Resilience*,
25 33:12 *Health Affairs* 2106, 2111 (hereinafter “Adverse Childhood Experiences”).

26 ⁵ Christopher Blodgett, *Adopting ACEs Screening and Assessment in Child*
27 *Serving Systems* (working paper), Ex. 1 at 8, 9, 12, 14, 15, 25, 26 (hereinafter
28 “Adopting ACEs”); Christopher Blodgett, *No School Alone: How Community Risks*
and Assets Contribute to School and Youth Success, Report to the WA State Office
of Financial Management in response to Substitute House Bill 2739 (March 2015),
Ex. 2 at 4-6, 24-26, 28, 65 (hereinafter “No School Alone”).

1 6. There exists broad consensus around the core components of such
2 trauma-sensitive schools: (1) training educators to recognize, understand, and
3 proactively recognize and address the effects of complex trauma, in part through
4 building students' self-regulation and social-emotional learning skills; (2)
5 developing restorative practices to build healthy relationships and resolve conflicts
6 peacefully and avoid re-traumatizing students through the use of punitive discipline;
7 and (3) ensuring consistent mental health support is available to appropriately meet
8 student needs. Together, these whole-school practices can create a safe, consistent,
9 and supportive learning environment to contribute to the healing process and enable
10 students exposed to trauma to learn.

11 7. There are devastating consequences to educational opportunity and
12 academic success that flow from a failure to make reasonable accommodations to
13 the needs arising in schools attended by high concentrations of trauma-impacted
14 students. Moreover, the evidence shows that whole-school approaches work to
15 mitigate the disabling consequences of complex trauma. Despite this, Defendants
16 have ignored and affirmatively breached their responsibility to accommodate
17 students whose access to education is fundamentally impaired by reason of the
18 trauma they have endured. CUSD does not train and sensitize teachers or
19 administrative personnel to recognize, understand, and address the effects of
20 complex trauma. Without such training, CUSD is unable to appropriately identify
21 trauma-impacted students in need of more intensive support and notify their parents
22 or guardians. Nor do teachers and staff receive training in evidence-based trauma
23 interventions that have been demonstrated to reduce the effects of trauma.
24 Likewise, CUSD does not notify parents of its obligation to identify and provide
25 accommodations to students whose learning may be impaired due to the experience
26 of trauma. It does not implement restorative practices necessary to support healthy
27 relationships. It does not address conflict and violence in a manner that recognizes
28 the impact of complex trauma on the ability to self-regulate in high stress or anxiety

1 situations. Moreover, mental health support is either entirely unavailable or grossly
2 insufficient to meet student needs related to trauma.

3 8. Instead of providing these and other accommodations to address
4 complex trauma, Defendants subject trauma-impacted students to punitive and
5 counter-productive suspensions, expulsions, involuntary transfers, and referrals to
6 law enforcement that push them out of school, off the path to graduation, and into
7 the criminal justice system.

8 9. In *Brown v. Bd. of Educ.*, 347 U.S. 483 (1954), the U.S. Supreme Court
9 famously recognized “the importance of education to our democratic society.” *Id.* at
10 493. Public education is “required in the performance of our most basic public
11 responsibilities,” “the very foundation of good citizenship,” and “a principal
12 instrument in awakening the child to cultural values, in preparing him for later
13 professional training, and in helping him to adjust normally to his environment.” *Id.*
14 Indeed, “it is doubtful that any child may reasonably be expected to succeed in life if
15 he is denied the opportunity of an education.” *Id.* More than sixty years later,
16 students in CUSD who are affected by the disabling impacts of complex trauma still
17 lack meaningful access to this most basic of opportunities. These students are
18 entitled to the accommodations necessary such that the trauma to which they have
19 been disproportionately and unjustly subjected is not determinative of their
20 educational success and life chances.

21 10. As discussed above, trauma occurs when overwhelmingly stressful
22 events undermine a person’s ability to cope.⁶ The term “complex trauma” describes
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24 ⁶ Lenore C. Terr, *Childhood Traumas: An Outline and Overview*, 148 Am. J.
25 Psychiatry 10, 11 (1991) (defining childhood trauma as the impact of external forces
26 that “[render] the young person temporarily helpless and [break] past ordinary
27 coping and defensive operation.... [This includes] not only those conditions marked
28 by intense surprise but also those marked by prolonged and sickening
anticipation.”); Judith Herman, *Trauma and Recovery* 33 (Basic Books 1997)
(explaining that traumatic events “overwhelm the ordinary human adaptations to

1 children’s exposure to multiple traumatic events, often of an invasive, interpersonal
2 nature, and the wide-ranging, long-term impact of this exposure.⁷ Humans are
3 ordinarily able to process the myriad stresses of everyday life, but when confronted
4 with experiences so severe that they produce feelings of terror and helplessness, or
5 with so many repeated small and large psychological cuts to a developing brain that
6 it forms a deep wound,⁸ a person’s ability to adapt to these stresses can become
7 overwhelmed. This is especially true for children, whose brains are still organizing
8 and developing⁹ and who have yet to establish their baseline equilibrium.¹⁰ Thus,
9 even when a traumatic event is over, the effect on the child and the child's reaction
10 to it is not.

11 11. The effects of trauma on development and social and educational needs
12 of children vary. For some children, there may be only brief distress following a
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14 life.... They confront human beings with the extremities of helplessness and
15 terror.”).

16 ⁷ Bruce D. Perry & Ronnie Pollard, *Homeostasis, Stress, Trauma, and*
17 *Adaptation: A Neurodevelopmental View of Childhood Trauma*, 7 *Child Adolesc.*
18 *Psychiatr. Clin. N. Am.*, 33, 36 (1998) (hereinafter “Homeostasis”); *Effects of*
19 *Complex Trauma*, The National Child Traumatic Stress Network, [http://](http://www.nctsnet.org/trauma-types/complex-trauma)
20 www.nctsnet.org/trauma-types/complex-trauma (last visited May 16, 2015).

21 ⁸ *Homeostasis*, *supra* note 7, at 34-36, 45-46.

22 ⁹ Bruce D. Perry et al., *Childhood Trauma, the Neurobiology of Adaptation,*
23 *and “Use-dependent” Development of the Brain: How “States” Become “Traits,”*
24 *16 Infant Ment. Health J.* 271, 276 (1995) (hereinafter “How ‘States’ Become
25 ‘Traits’”) (“[T]he organizing, sensitive brain of an infant or young child is more
26 malleable to experience than a mature brain. Although experience may alter the
27 behavior of an adult, experience literally provides the organizing framework for an
28 infant and child.”).

29 ¹⁰ *Homeostasis*, *supra* note 7, at 36; Bruce D. Perry, *Stress, Trauma and Post-*
30 *traumatic Stress Disorders in Children: An Introduction*, The Child Trauma
31 Academy 5 (2007) (hereinafter “Stress”), available at [https://childtrauma.org/wp-](https://childtrauma.org/wp-content/uploads/2013/11/PTSD_Caregivers.pdf)
32 [content/uploads/2013/11/PTSD_Caregivers.pdf](https://childtrauma.org/wp-content/uploads/2013/11/PTSD_Caregivers.pdf) (“[T]he rates of children developing
33 PTSD following traumatic events are higher than those reported for adults.”).

1 traumatic event, without significant impairment in functioning. For others, trauma-
2 related symptoms appear soon after a traumatic event and may persist indefinitely,
3 often manifested by significant distress and/or impairment. For some youth, these
4 effects will lead to significant developmental disruption and consequent educational
5 loss, even if they do not meet the threshold for a diagnosable mental health disorder.
6 Most children exposed to violence, abuse, and neglect display symptoms of
7 psychological trauma,¹¹ and at least half develop “significant neuropsychiatric
8 symptomatology.”¹² Other children will develop diagnosable mental health
9 disorders as a result of exposure to trauma. For example, research has shown that a
10 substantial minority of children exposed to violence develops clinically significant
11 post-traumatic stress disorder (“PTSD”)¹³ and has linked trauma with mental health
12 conditions such as conduct disorder, ADHD, anxiety disorders, dissociative
13 disorders, somatoform disorders, major depression, schizophrenia, and substance
14 abuse and dependence.¹⁴ Children exposed to sudden and unexpected violence, such
15 as community violence, are especially vulnerable.¹⁵

16 12. For youth of color and for youth who identify as LGBT, racism,
17 homophobia, and marginalization further compound trauma, increase the likelihood
18 of trauma, and may intensify the effects of any victimization.

19
20 ¹¹ Steven P. Cuffe et al., *Prevalence of PTSD in a Community Sample of*
21 *Older Adolescents*, 37 J. Am. Acad. Child Adolesc. Psychiatry 147 (1998); Karyn
22 Horowitz et al., *PTSD Symptoms in Urban Adolescent Girls: Compounded*
23 *Community Trauma*, 34 J. Am. Acad. Child Adolesc. Psychiatry 1353 (1995).

24 ¹² *How “States” Become “Traits,” supra* note 9, at 273.

25 ¹³ Bradley D. Stein et al., *A Mental Health Intervention for Schoolchildren*
26 *Exposed to Violence: A Randomized Controlled Trial*, 290 J. Am. Med. Ass’n 603,
27 603 (2003) (hereinafter “Mental Health Intervention”). Controlled studies indicate
28 that between 15% and 90% of children exposed to traumatic events develop clinical
PTSD. *Stress, supra* note 10, at 5.

¹⁴ *Homeostasis, supra* note 7, at 45.

¹⁵ *How “States” Become “Traits,” supra* note 9, at 273.

1 13. This action is brought in part by the Student Plaintiffs who attend
2 schools in CUSD and have been denied meaningful access to public education as a
3 result of Defendants' practices and policies that fail to accommodate the effects of
4 complex trauma. Even worse, these policies and practices perpetuate and
5 sometimes create trauma on their own.

6 14. **Plaintiff Peter P.** is seventeen years old and is enrolled at Dominguez
7 High School in CUSD. In the early years of Peter P.'s life, his biological mother
8 abused drugs, and he was repeatedly physically and sexually abused by his mother's
9 boyfriends. He also witnessed physical abuse of his siblings and mother. He
10 continues to have flashbacks to this period and often experiences an instinct to be
11 aggressive when he sees a male approaching him.

12 15. When Peter P. was about five years old, he and his siblings were
13 removed from the home of their biological mother and entered the foster system.
14 Peter P. was initially separated from most of his siblings and moved in and out of a
15 series of foster homes. Peter P. was occasionally sent back to live with his
16 biological mother for a few weeks before being removed from her home again.
17 When Peter P. was about ten or eleven years old, the rights of his biological mother
18 were terminated, and he and some of his siblings were adopted. Peter P.'s adoptive
19 mother's health worsened when Peter P. was sixteen, and he became a caretaker for
20 her and his younger siblings.

21 16. Peter P. has witnessed and been the victim of violence on multiple
22 occasions. Peter P. reports that in middle school he watched as his best friend was
23 shot and killed. In 2014, Peter P. received stab wounds and required stitches after
24 he threw himself in front of a friend whose relative was attacking her with a knife.
25 Peter P. reports that he has witnessed more than twenty people get shot.

26 17. Peter P.'s two older brothers are currently incarcerated. The man who
27 was living with his mother and serving as a caretaker for Peter P. and his siblings at
28 the time they entered the foster system is also currently in prison for murder.

1 18. Peter P. was homeless for two months in March and April 2015.
2 During this period, he slept on the roof of the Dominguez High School cafeteria. At
3 no time did administrators provide any support or services. Instead, he was
4 suspended. Although some personnel were aware of these circumstances, Peter P.'s
5 attempts to return to school were denied, and he was threatened with law
6 enforcement involvement if he persisted in attempting to return.

7 19. As a result of the repeated and sustained trauma that Peter P. has
8 endured, he often experiences uncontrollable anger. "My anger is not normal," he
9 says. "Sometimes I believe my aura is wicked. Sometimes I believe I have a demon
10 in me." Peter P. also feels deep sadness and depression. He says: "Sometimes I
11 pray to God, why do you still keep me here even after all the things I've been
12 through? I have had so many chances to go to heaven but I'm still here. I thank
13 God every day for waking up, but I regret waking up every day."

14 20. Because CUSD does not have a system of accommodations and
15 modifications to address the impact of complex trauma, Peter P. has been unable to
16 access his education. Although Peter P. previously had shown an ability to achieve
17 high grades in certain honors classes, complex trauma in his life has at times caused
18 his grades to decline sharply. He is currently failing all but two classes, which
19 causes him to feel deep shame. Although he has repeatedly missed classes due to
20 the complex trauma he has experienced, no mental health or attendance counselor or
21 other school official has intervened or inquired as to the cause of these absences.
22 CUSD has also repeatedly subjected Peter P. to harsh punitive discipline. Over the
23 course of his academic career, he has been repeatedly suspended for disobedient,
24 angry, or aggressive behavior, and has been involuntarily transferred (or "expelled")
25 from all of the following CUSD schools: Roosevelt Elementary School, Clinton
26 Elementary School, Kelly Elementary School, Bunche Elementary School and
27 Bunche Middle School, Roosevelt Middle School, and Davis Middle School. Most
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1 of these “expulsions” stemmed from physical altercations and misbehavior caused
2 by unaddressed anger and aggression related to trauma.

3 21. **Plaintiff Kimberly Cervantes** has been a senior at Cesar Chavez
4 Continuation School in CUSD since October 2014. From August 2011 until
5 October 2014, Kimberly was a student at Dominguez High School and before that
6 she attended Whaley Middle School and Roosevelt Elementary School, all in
7 CUSD. After attending Roosevelt and before attending Whaley, Kimberly attended
8 Rowland Elementary School in West Covina for one year. While at Rowland,
9 Kimberly experienced multiple incidents of racism.

10 22. Kimberly has experienced multiple traumas during school hours that
11 have contributed to difficulties with attendance. As a middle school student at
12 Whaley, Kimberly witnessed the deaths of two students. While at Dominguez,
13 Kimberly told a fellow student that she identified as bisexual only to be told by the
14 teacher, in front of the whole class, that she “shouldn’t be gay” and that it was
15 “wrong.” Already dealing with suicidal feelings, Kimberly stopped attending the
16 class. Largely as a consequence of the credits she missed during this time period,
17 Kimberly ultimately had to transfer to Chavez Continuation School at the beginning
18 of her senior year.

19 23. In October of her senior year, Kimberly got into an altercation with a
20 security guard at Dominguez while returning a book to the library that resulted in
21 feelings of terror and serious injuries to Kimberly’s back. As a result of the
22 incident, Kimberly did not attend school for over a week. Although Kimberly and
23 her family filed a formal complaint with the school and attempted to press charges,
24 Kimberly received no services or acknowledgement of the incident.

25 24. After transferring to Chavez, Kimberly was sexually assaulted on the
26 public bus on her way home from school. The experience left her traumatized and
27 terrified of traveling to and from Chavez. She again missed multiple days of school,
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1 and when she did attend, flashbacks caused her to break down in class. Although
2 the school is aware of the incident, she has yet to receive mental health services.

3 25. Kimberly's access to mental health support has been inconsistent and
4 wholly lacking during times of acute and urgent need. Although CUSD referred her
5 to Shields for Families for counseling services when she was in elementary school,
6 by the time she reached high school she was told that she had "used up" her five
7 years of free services and would have to start paying if she wanted to continue
8 therapy. Kimberly felt that she needed the mental health services more than ever,
9 but her family could not afford to pay, and her counseling sessions were terminated.
10 Although Kimberly read a poem at a school talent show in high school discussing
11 her struggles with suicidal feelings, she never received any mental health services.

12 26. Because CUSD does not have a system of accommodations and
13 modifications to address the impact of complex trauma, Kimberly has been unable
14 to access her education. Due to unaddressed trauma, Kimberly had trouble focusing
15 and concentrating in class and has missed a significant amount of class. As a result,
16 she struggled in school and failed numerous courses; she was compelled to transfer
17 to a continuation school and will not have the opportunity to graduate from one of
18 Compton's mainstream high schools.

19 27. **Plaintiff Phillip W.** is fifteen years old and currently attends Team
20 Builders, an alternative high school in CUSD. Phillip W. has repeatedly
21 experienced traumatic violence and loss. When Phillip W. was eight years old, a
22 bullet went through the rear window of his mother's car when he was sitting in the
23 back seat; Phillip W. believes he would have been killed if he had been sitting up
24 higher in his seat. Phillip W. also first witnessed someone shot and killed when he
25 was eight years old. After witnessing that first shooting, Phillip W. cried and threw
26 up. He estimates that he has since witnessed more than twenty further shootings.
27 He has had guns fired at him on more than one occasion, and has been caught in
28 crossfire approximately eight times. In 2014, Phillip W. was hit in the knee by a

1 ricocheting bullet. Also during 2014, Phillip W. was chased and shot at by the
2 police when he and his friends were playing basketball on the court of his old
3 elementary school campus in the evening. On another occasion, when Phillip W.
4 was playing tag with friends in a Compton park, a police officer pointed a gun at
5 him and told him to freeze until the officer realized that he had mistaken Phillip W.
6 for someone else.

7 28. In the past year, Phillip W. has experienced the deaths of two close
8 friends—one of whom he witnessed get shot in the head last September. He also
9 lost a close family member to cancer.

10 29. As a result of the complex trauma he has experienced, Phillip W. has
11 difficulty focusing, concentrating, and recalling information in school. Phillip W.
12 feels detached or angry much of the time. Phillip W. says, “When I was about
13 twelve, I felt a click in my head and something changed. I used to be happy and
14 joyful, but now I can’t be happy. I have to be serious and ready for anything.” He
15 frequently jokes around during school to distract himself from thinking about the
16 past. Phillip W. says that his main goal is “to make it past twenty-five.”

17 30. Because CUSD does not have a system of accommodations and
18 modifications to address the impact of complex trauma, Phillip W. has not been able
19 to access his education. Despite Phillip W.’s acute need for additional and more
20 intensive support, no CUSD school has ever provided or referred him to mental
21 health services. At age thirteen, Phillip W. became involved in the juvenile justice
22 system, which contributed further to the impact of the trauma he has experienced
23 and his resultant educational losses.

24 31. Although Phillip W. is only in his first year of high school, CUSD—
25 rather than providing him with meaningful accommodations and modifications—has
26 already “expelled” Phillip W. from all three of its mainstream high schools because
27 his unaddressed anger related to trauma caused him to enter into physical
28 altercations with other students. He has most recently been removed from

1 Dominguez High School, and is attending Team Builders—a CUSD alternative
2 school that is only in session for half of the school day and has no mental health
3 support—where he continues to struggle without appropriate support.

4 **32. Plaintiff Virgil W.** is Phillip W.’s twin brother, and is a fifteen-year-
5 old student at Dominguez High School in CUSD. When Virgil W. was
6 approximately three years old, he woke up during the night to the sight of his father
7 pointing a gun at his mother and yelling, “I’m done.” Virgil W. continues to have
8 terrifying nightmares linked to this incident. After that night, he says, “the part of
9 my brain that processes fear sort of shut down.” Virgil W. has also recently
10 experienced the death of a close friend and a cousin, and nearly lost another close
11 friend and cousin.

12 **33.** Because CUSD does not have a system of accommodations and
13 modifications to address the impact of complex trauma, Virgil W. has not been able
14 to access his education and make sufficient academic, social, and emotional
15 progress. Virgil W. struggles with anger due to the traumatic violence and loss he
16 has endured. Virgil W. says, “I know I have anger problems. Up until I was in
17 seventh grade, there was no limit. I was kind of scared of myself for a while.” As a
18 direct and proximate result of this anger, Virgil W. got into fights in the classroom
19 or schoolyard. Instead of providing the necessary support to Virgil W., CUSD has
20 responded with punitive discipline and police involvement. In sixth grade, Virgil
21 W. was “expelled” from Enterprise Middle School in CUSD and became involved
22 with the juvenile justice system as a result of one such altercation. Virgil W. has
23 been repeatedly suspended, and this year he was “expelled” out of Centennial High
24 School. Despite Virgil W.’s need for additional and more intensive support, no
25 CUSD school has ever provided or referred him to mental health services.

26 **34. Plaintiff Donte J.** is thirteen years old and currently attends Whaley
27 Middle School in CUSD. When Donte J. was in sixth grade he moved to Compton
28 from Culver City. That year, he was arrested at gunpoint on the campus of

1 Roosevelt Elementary School in CUSD and taken to the station in handcuffs when
2 police mistook him for someone else.

3 35. During the first semester of this school year, an assailant pulled out a
4 knife and threatened to stab Donte J. and a friend as they were leaving the school
5 campus. During the second semester, a group of young men assaulted Donte J. on
6 his way to school for wearing “gang colors,” despite Donte J.’s lack of involvement
7 with any gang. Despite going to the school nurse and explaining the incident and
8 being sent home, Donte J. never received any counseling concerning this traumatic
9 experience.

10 36. Because CUSD does not have a system of accommodations and
11 modifications to address the impact of complex trauma, Donte J. has been denied
12 access to his education. He has had difficulty focusing in class following these
13 traumatic events due to intrusive thoughts, and was recently suspended for
14 slamming the door to the counselor’s office when he tried to request help and felt
15 that he was getting none.

16 37. The experiences of the Student Plaintiffs are far from unique among
17 CUSD students. CUSD serves under-resourced neighborhoods in which community
18 violence is disproportionately prevalent. CUSD is comprised of high numbers of
19 foster and homeless youth, and nearly exclusively students of color who experience
20 the expression and consequences of racism. Defendants are accordingly on notice
21 that CUSD schools serve a disproportionately high number of students exposed to
22 complex trauma. Concentrating many significantly trauma-impacted students in a
23 school creates the highest level of need, necessitating the implementation of
24 intensive systems of interventions.

25 38. Defendants’ failure to provide support necessary to accommodate
26 student trauma also has significant mental health impact on educators. Plaintiffs
27 Rodney Curry, Armando Castro II, and Maureen McCoy are just a few of the many
28 empathetic and compassionate teachers and staff in CUSD schools who must devote

1 a great deal of time and emotional resources to addressing student trauma. In many
2 cases, they lack the training, resources, and support necessary to do so. For some
3 CUSD teachers, the overwhelming energy it takes to manage a class of students
4 manifesting the consequences of unaddressed trauma without the appropriate
5 resources or training leads to “burnout.” Other educators actually begin to take on
6 the trauma themselves, displaying similar symptoms to their students. This
7 “secondary traumatic stress” creates serious health consequences for the educator.
8 Both burnout and secondary traumatic stress predictably lead to administrator and
9 teacher turnover and contribute to further instability at CUSD school sites.

10 39. Defendants have failed to put systems of accommodation in place to
11 accommodate the high concentration of trauma-impacted students in CUSD schools,
12 instead relying upon an ineffective and counterproductive approach of punitive
13 school removals, which further diverts students from learning and pushes students
14 off the path to graduation. The failure of Defendants to properly account for the
15 disabling impact of complex trauma results in students with the greatest needs and
16 vulnerabilities being effectively denied access to education.

17 **PARTIES**

18 *Plaintiffs*

19 40. Plaintiff Peter P. is seventeen years old and resides in Los Angeles
20 County within the boundaries of CUSD and Dominguez High School. Plaintiff
21 Peter P. attends Dominguez High School and is legally required to attend school.
22 The effects of the complex trauma Plaintiff Peter P. has experienced have impaired
23 his access to public education, as described above in Paragraphs 14 through 20.
24 During his academic career, Plaintiff Peter P. has been subject to involuntary
25 removal from at least six CUSD schools, including Roosevelt Elementary School,
26 Emerson Elementary School, Kelly Elementary School, Bunche Elementary School
27 and Bunche Middle School, and Davis Middle School. Carolina Melendrez has
28

1 concurrently filed an application with the Court to act as Peter P.'s guardian ad
2 litem.

3 41. Plaintiff Kimberly Cervantes is eighteen years old and resides in Los
4 Angeles County within the boundaries of CUSD and Dominguez High School.
5 Plaintiff Kimberly Cervantes attends Cesar Chavez Continuation School and is
6 legally required to attend school. The effects of the complex trauma Kimberly
7 Cervantes has experienced have impaired her access to public education, as
8 described above in Paragraphs 21 through 26.

9 42. Plaintiff Phillip W. is fifteen years old and resides in Los Angeles
10 County within the boundaries of CUSD and Compton High School. Plaintiff Phillip
11 W. is legally required to attend school. The effects of the complex trauma Plaintiff
12 Phillip W. has experienced have impaired his access to public education, as
13 described above in Paragraphs 27 through 31. During the 2014-2015 school year,
14 Plaintiff Phillip W. was involuntarily removed from Compton High School,
15 Centennial High School, and is currently in expulsion procedures from Dominguez
16 High School. Plaintiff Phillip W. currently attends school at Team Builders, an
17 alternative school in CUSD. The legal guardian of Phillip W. has concurrently filed
18 an application with the Court to act as Phillip W.'s guardian ad litem.

19 43. Plaintiff Virgil W. is fifteen years old and resides in Los Angeles
20 County within the boundaries of CUSD and Compton High School. Plaintiff Virgil
21 W. attends Dominguez High School and is legally required to attend school. The
22 effects of the complex trauma Plaintiff Virgil W. has experienced have impaired his
23 access to public education, as described above in Paragraphs 32 through 33. During
24 the 2014-2015 school year, Plaintiff Virgil W. was involuntarily removed from
25 Centennial High School, and during the 2011-2012 school year, Plaintiff Virgil W.
26 was involuntarily removed from Enterprise Middle School. The legal guardian of
27 Virgil W. has concurrently filed an application with the Court to act as Virgil W.'s
28 guardian ad litem.

1 44. Plaintiff Donte J. is thirteen years old and resides in Los Angeles
2 County within the boundaries of CUSD and Whaley Middle School. Plaintiff Donte
3 J. attends Whaley Middle School and is legally required to attend school. The
4 effects of the complex trauma Plaintiff Donte J. has experienced have impaired his
5 access to public education, as described above in Paragraphs 34 through 36. The
6 legal guardian of Donte J. has concurrently filed an application with the Court to act
7 as Donte J.'s guardian ad litem.

8 45. Plaintiff Rodney Curry is a teacher at Dominguez High School in
9 CUSD. Plaintiff Curry has been teaching at Dominguez High School for nineteen
10 years. In that time, Plaintiff Curry has lost dozens of students to violence and
11 attended their funerals. Even more of Plaintiff Curry's students have been shot or
12 have witnessed or experienced traumatic violence but survived. Because he must
13 teach children who experience complex trauma, Plaintiff Curry is affected by, and
14 has an interest in, Defendants' failure to provide reasonable accommodations for
15 CUSD students. Students in Plaintiff Curry's classes are hindered in their ability to
16 learn by the effects of complex trauma. Because of Defendants' failure to
17 accommodate students suffering from complex trauma, Plaintiff Curry exerts
18 significant additional effort both in teaching and in managing his classroom.
19 Plaintiff Curry also experiences substantial emotional distress from observing the
20 effects that unaddressed complex trauma has on his students' lives. Furthermore,
21 Plaintiff Curry spends his own money and personal time in attempting to alleviate
22 the effects of complex trauma on his students, although he is not required to do so
23 and has received no training or resources from CUSD.

24 46. Plaintiff Armando Castro II is a teacher at Cesar Chavez Continuation
25 School in CUSD. Plaintiff Castro has been teaching at Cesar Chavez Continuation
26 School for eight years. In that time, Plaintiff Castro has witnessed significant
27 violence take place in and around the school. Plaintiff Castro has multiple students
28 who have lost family members to violence or who have family members who are

1 incarcerated. Many current and former students of Plaintiff Castro die every year as
2 a consequence of violence in the community. Plaintiff Castro believes that other
3 high schools in the district send students who are acting out unaddressed complex
4 trauma to the continuation school, but that the continuation school does not have
5 sufficient mental health resources to help those students. Because he must teach
6 children who experience complex trauma, Plaintiff Castro is affected by, and has an
7 interest in, Defendants' failure to provide reasonable accommodations for CUSD
8 students. Students in Plaintiff Castro's classes are hindered in their ability to learn
9 by the effects of complex trauma. Because of Defendants' failure to accommodate
10 students suffering from complex trauma, Plaintiff Castro exerts significant
11 additional effort both in teaching and in managing his classroom. Plaintiff Castro
12 also experiences substantial emotional distress from observing the effects that
13 unaddressed complex trauma has on his students' lives.

14 47. Plaintiff Maureen McCoy is a teacher at Centennial High School in
15 CUSD. Plaintiff McCoy has been teaching at Centennial High School for six years.
16 She is a certified school psychologist. Plaintiff McCoy has counseled students
17 dealing with foster care, death, teen pregnancy, and sexual abuse. Plaintiff McCoy's
18 students often tell her that they are scared walking to and from school. For example,
19 earlier this year, a female student told Plaintiff McCoy that she felt she had to carry
20 a knife as she walked to school to feel safe. Plaintiff McCoy started at Centennial in
21 the middle of the semester, after her classes had gone through four to five substitute
22 teachers. Plaintiff McCoy has requested assistance from administrators for
23 additional support in addressing student behavior, but her additional requests have
24 been ignored. During her first year at Centennial, Plaintiff McCoy was bullied by
25 students. Plaintiff McCoy has experienced significant health problems and was
26 placed on disability leave by her doctor as a result of her attempts to meet the needs
27 of CUSD students who have experienced trauma without the training, resources, or
28 support to do so. This stress and lack of support has also led to Plaintiff McCoy's

1 need to take sick days on several occasions. Because she must teach children who
2 experience complex trauma, Plaintiff McCoy is affected by, and has an interest in,
3 Defendants' failure to provide reasonable accommodations for CUSD students.
4 Students in Plaintiff McCoy's classes are hindered in their ability to learn by the
5 effects of complex trauma. Because of Defendants' failure to accommodate
6 students suffering from complex trauma, Plaintiff McCoy exerts significant
7 additional effort both in teaching and in managing her classroom. Plaintiff McCoy
8 also experiences substantial emotional distress from observing the effects that
9 unaddressed complex trauma has on her students' lives.

10 *Defendants*

11 48. Defendant CUSD operates schools in the south central region of Los
12 Angeles County and encompasses the city of Compton and portions of the cities of
13 Carson and Los Angeles. The school district serves nearly 26,000 students at forty
14 sites, including twenty-four elementary schools, eight middle schools, three high
15 schools, and five alternative schools. CUSD is headquartered at 501 South Santa Fe
16 Avenue, Compton, California, 90221. CUSD receives federal funds.

17 49. Defendant Darin Brawley is the superintendent of CUSD. Defendant
18 Brawley exercises supervision and control over the daily activities of CUSD. *See*
19 Cal. Educ. Code § 35035 (powers and duties of superintendent). Defendant
20 Brawley is aware, or should be aware, of the impact of complex trauma on the
21 ability of class members to obtain the benefits of public education.

22 50. Defendants Micah Ali, Satra Zurita, Margie Garrett, Charles Davis,
23 Skyy Fisher, Emma Sharif, and Mae Thomas are members of the Board of Trustees
24 of CUSD. Defendants Ali, Zurita, Garrett, Davis, Fisher, Sharif, and Thomas
25 exercise control over the actions of CUSD teachers, principals, and support staff.
26 *See* Cal. Educ. Code § 35020 ("The governing board of each school district shall fix
27 and prescribe the duties to be performed by all persons in public school service in
28 the school district."). Defendants Ali, Zurita, Garrett, Davis, Fisher, Sharif, and

1 Thomas are aware, or should be aware, of the impact of complex trauma on the
2 ability of class members to obtain the benefit of public education.

3 **JURISDICTION AND VENUE**

4 51. The Court has subject matter jurisdiction over this case pursuant to
5 28 U.S.C. § 1331 because it arises under the laws of the United States.

6 52. This Court has personal jurisdiction over Defendants because CUSD is
7 headquartered within this district; the CUSD schools at issue are located within this
8 district; because the individual defendants are domiciled in this district; and because
9 Defendants' actions and omissions took place within this district.

10 53. Venue is proper in this federal district pursuant to 28 U.S.C. § 1391(b)-
11 (c).

12 **CLASS ACTION ALLEGATIONS**

13 54. This action is maintainable as a class action under Federal Rule of Civil
14 Procedure 23.

15 55. The Student Plaintiffs Peter P., Kimberly Cervantes, Phillip W., Virgil
16 W., and Donte J. represent a class consisting of current and future students enrolled
17 in CUSD who have experienced or will experience complex trauma that
18 substantially limits major life activities, including learning, reading, concentrating,
19 thinking, and/or communicating, and who have not received reasonable
20 accommodations that would enable them to receive the benefits of CUSD's
21 educational programs. The class includes, but is not limited to, students with
22 trauma-related conditions recognized by the Diagnostic and Statistical Manual of
23 Mental Disorders, Fifth Edition (DSM-5), including post-traumatic stress, anxiety,
24 dissociative, conduct, somatoform, depressive, and substance-related and addictive
25 disorders.

26 56. There exist questions of law and/or fact common to the entire student
27 class that predominate over any individual question. Common questions of fact and
28 law include, without limitation:

- 1 • Whether the effects of complex trauma can substantially limit one or more of a
2 student's major life activities, including learning, reading, concentrating,
3 thinking, and communicating.
- 4 • Whether such interference with education-related life activities impairs a
5 student's ability to receive the benefits of a public education.
- 6 • Whether students affected by complex trauma enrolled in schools in CUSD are
7 denied the benefits of a public education at least in part due to the effects of
8 experiencing complex trauma.
- 9 • Whether students affected by complex trauma enrolled in schools in CUSD are
10 denied the benefits of a public education solely by reason of their trauma.
- 11 • Whether accommodations exist that can be reasonably implemented by
12 Defendants to ensure that students with complex trauma do have meaningful
13 access to a public education.
- 14 • Whether Defendants have failed to consistently implement such
15 accommodations.

16 57. Each student member of the class has claims that are typical of the
17 claims of the class. Each Student Plaintiff is a member of the class he or she seeks
18 to represent. The Student Plaintiffs and the student class members have all
19 experienced complex trauma that substantially limits major life activities, including
20 learning, reading, concentrating, thinking, and/or communicating. Moreover, as
21 result of Defendants' acts, omissions, policies, and procedures that apply to Student
22 Plaintiffs and all student class members, Student Plaintiffs and the student class
23 members are denied benefits of a public education.

24 58. The class is so numerous that joinder of all members of individual
25 actions by each class member is impracticable. Because CUSD serves a student
26 population that is highly likely to be exposed to complex trauma, including violence,
27 loss of a loved one, removal from home and placement in the foster system,
28 homelessness and extreme socioeconomic hardship, and discrimination, the class

1 constitutes a significant percentage of students of the approximately 26,000 students
2 enrolled in CUSD. Moreover, the inclusion in the class of future members and the
3 dispersal of the class at numerous school sites makes joinder impracticable.

4 59. The Student Plaintiffs will fairly and adequately protect the interests of
5 the class. The Student Plaintiffs are represented by experienced counsel who will
6 adequately represent the interests of the class.

7 60. Defendants have acted and refused to act on grounds generally
8 applicable to the class, thereby making appropriate final injunctive relief and/or
9 corresponding declarative relief with respect to the class as a whole.

10 **STATUTORY FRAMEWORK**

11 **A. Section 504 of the Rehabilitation Act**

12 61. Section 504 of the Rehabilitation Act provides: “No otherwise qualified
13 individual with a disability in the United States ... shall, solely by reason of her or
14 his disability, be excluded from the participation in, be denied the benefits of, or be
15 subjected to discrimination under any program or activity receiving Federal
16 financial assistance....” 29 U.S.C. § 794(a). To demonstrate a violation of § 504, a
17 plaintiff must show that (i) he or she is an “individual with a disability” under the
18 terms of the Rehabilitation Act; (ii) he or she is “otherwise qualified” to receive the
19 benefits or services sought, (iii) he or she was denied the benefits of the program
20 “solely by reason of her or his disability”; and (iv) the program receives federal
21 financial assistance. *Id.*

22 62. “[A]ll of the operations” of “local educational agenc[ies]” are
23 considered “program[s] or activit[ies]” covered by the Act. 29 U.S.C. § 794(b).

24 63. CUSD receives federal funds and is therefore covered by the
25 Rehabilitation Act.

26 64. For purposes of the Rehabilitation Act, “individual with a disability” is
27 defined as it is in the Americans with Disabilities Act of 1990 (“ADA”). *See* 29
28 U.S.C. § 794(a); *see also* 42 U.S.C. § 12101 *et seq.* For an individual to be eligible

1 for protection under the Rehabilitation Act, he or she must have a “physical or
2 mental impairment that substantially limits one or more major life activities....” 42
3 U.S.C. § 12102(1)(A).

4 65. The Student Plaintiffs and class members have experienced complex
5 trauma, the effects of which “will, at a minimum, substantially limit major life
6 activities,” 29 C.F.R. § 1630.2(j)(3)(iii), including “learning, reading, concentrating,
7 thinking, [and] communicating.” 42 U.S.C. § 12102(2)(A).

8 66. Because the Student Plaintiffs and the class members have experienced
9 complex trauma, they meet the definition of “individuals with disabilities” within
10 the meaning of the Act. Thus, they are entitled to “meaningful access” to the
11 benefits, services, and programs provided by CUSD. *Alexander v. Choate*, 469 U.S.
12 287, 301 (1985).

13 67. As explained below, to provide “meaningful access” to education,
14 CUSD must have a system for addressing the needs of students who are impacted by
15 complex trauma, 34 C.F.R. §§ 104.32, 104.36, and provide a “[f]ree appropriate
16 public education,” *id.* § 104.33, by integrating trauma-sensitive approaches and
17 training that have been shown to mitigate the effects of trauma and allow students to
18 meaningfully access public education.

19 68. “The remedies, procedures, and rights [of the Rehabilitation Act] . . .
20 shall be available to any person aggrieved by any act or failure to act ... under
21 section 794 [Section 504 of the Rehabilitation Act] of this title.” 29 U.S.C.
22 § 794a(a)(2). Plaintiffs Curry, Castro, and McCoy are persons aggrieved by
23 Defendants’ failure to act in accordance with Section 504.

24 **B. Americans with Disabilities Act of 1990**

25 69. Title II of the ADA states, in relevant part, that “no qualified individual
26 with a disability shall, by reason of such disability, be excluded from participation
27 in, or be denied the benefits of the services, programs, or activities of a public entity,
28 or subjected to discrimination by any such entity.” 42 U.S.C. § 12132.

1 70. To prove that a public entity has violated Title II of the ADA, “a
2 plaintiff must show: (1) he [or she] is a qualified individual with a disability, (2) he
3 [or she] was either excluded from participation in or denied the benefits of a public
4 entity’s services, programs, or activities, or was otherwise discriminated against by
5 the public entity; and (3) such exclusion, denial of benefits, or discrimination was by
6 reason of his [or her] disability.” *Duvall v. Cnty. of Kitsap*, 260 F.3d 1124, 1135
7 (9th Cir. 2001) (citation and internal quotation marks omitted).

8 71. The definition of “disability” under the ADA is identical to that under
9 § 504, and Defendants have the same obligation to the plaintiff class to provide
10 meaningful access to its services as under the Rehabilitation Act. *See* 29 U.S.C.
11 § 794(a); 42 U.S.C. § 12102.

12 72. “The remedies, procedures, and rights set forth in [the Rehabilitation
13 Act] shall be the remedies, procedures, and rights [the ADA] provides to any person
14 alleging discrimination on the basis of disability in violation of ... this title.” 42
15 U.S.C. § 12133.

FACTUAL ALLEGATIONS

Student Plaintiffs and Class Members Experience Complex Trauma

16
17
18 73. The Student Plaintiffs and class members attending CUSD schools
19 have experienced and continue to experience traumatic events that profoundly affect
20 their psychological, emotional, and physical well-being. Although even a single
21 traumatic experience can impair a child’s ability to learn, Student Plaintiffs and
22 class members are subjected to multiple, repeated, and sustained traumatic
23 experiences. Traumatic experiences suffered by Student Plaintiffs and their peers
24 include—but are not limited to—witnessing or experiencing violence; grief over the
25 loss of family members and friends; the loss of a caregiver due to deportation,
26 incarceration, or family separation; the causes and consequences of involvement in
27 the foster system; extreme socioeconomic hardship and its attendant consequences,
28 including homelessness; and discrimination and racism.

1 74. Although trauma is widespread and affects children in all
2 communities,¹⁶ complex trauma is particularly ubiquitous among Compton
3 schoolchildren like Student Plaintiffs. Compton is among the most
4 socioeconomically distressed cities in Southern California, and it experiences
5 attendant high rates of violent crime. Violence, poverty, and discrimination are so
6 pervasive that in any Compton classroom, the only reasonable expectation is that a
7 significant number of students are likely suffering from complex trauma. Indeed,
8 the appropriate question in a Compton classroom is not “Have you ever experienced
9 a traumatic event?,” but rather, “What traumatic events have you experienced?”

10 **A. Students in CUSD Are Routinely Exposed to Traumatic Violence.**

11 75. Like many of their peers, Student Plaintiffs have experienced and
12 witnessed violence in their neighborhoods, including on the way to and from school,
13 and even on school grounds itself.

14 76. Incidents of shootings, beatings, robberies, and other violent acts take
15 place in the neighborhoods where the Student Plaintiffs and their peers reside and
16 attend school. Representative examples of the traumatic incidents of violence that
17 Plaintiffs have experienced or witnessed include:

- 18 • Plaintiff Peter P. was repeatedly physically and sexually abused by his mother’s
19 boyfriends and witnessed physical abuse of his siblings and mother.
- 20 • Plaintiff Peter P. reports that he watched as his best friend was shot and killed.
- 21 • Plaintiff Peter P. was stabbed with a knife while trying to protect a friend.
- 22 • Plaintiff Peter P. reports that he has witnessed over twenty people being shot.
- 23 • Plaintiff Kimberly Cervantes was sexually assaulted on the bus on her way home

25 ¹⁶ A landmark study of 17,000 individuals found that about two-thirds of
26 children in the United States have been exposed to traumatic events and nearly 40%
27 suffered two or more traumatic experiences. *Prevalence of Individual Adverse*
28 *Childhood Experiences*, Centers for Disease Control and Prevention, <http://www.cdc.gov/ace/prevalence.htm> (last visited May 16, 2015).

1 from school.

- 2 • Plaintiff Phillip W. has had guns fired at him repeatedly, including several cases
- 3 in which he was severely injured or narrowly escaped death.
- 4 • Plaintiff Phillip W. estimates that he has witnessed more than twenty people
- 5 being shot, one of whom was a close friend who died when shot in the head.
- 6 • Plaintiff Virgil W. witnessed his father pointing a gun at his mother.
- 7 • A stranger attempted to stab Plaintiff Donte J. and his friends when they were
- 8 standing in front of the Whaley Middle School campus.
- 9 • Plaintiff Donte J. was arrested by police at gunpoint on school campus when he
- 10 was mistaken for someone else.
- 11 • Plaintiff Donte J. was attacked by four people on his way to school.

12 77. In addition to the traumatic violence experienced by the Student
13 Plaintiffs, other students in CUSD are routinely exposed to trauma-inducing
14 violence or threats. On March 7, 2015, a student at Dominguez High School was
15 shot twice in the hip while walking in his neighborhood. Another student was
16 attacked on his way to Centennial High School in December 2014 and experienced
17 such profound trauma as a result that he has not returned to school since January.
18 Female students are frequently sexually harassed and threatened while walking to
19 and from school. A man in a white van recently attempted to abduct a female
20 student walking to Dominguez High School.

21 78. Sixteen-year-old Dominguez student Lontrell Turner was murdered in
22 his neighborhood while walking home from church in December 2014. A freshman
23 student at Dominguez was killed directly adjacent to school grounds in a hit-and-run
24 accident several years ago. Teachers in Compton schools attend countless funerals
25 of former students. Plaintiff Curry, who has taught at Dominguez High School in
26 CUSD, typically attends between one and three funerals of current or former
27 students per year. A teacher at Chavez Continuation School has been informally
28

1 designated as the individual who will attend funerals of former students and current
2 on behalf of Compton teaching staff.

3 79. The Student Plaintiffs and many of their peers experience similar
4 incidents and threats of violence in the course of traveling to and from school each
5 day.

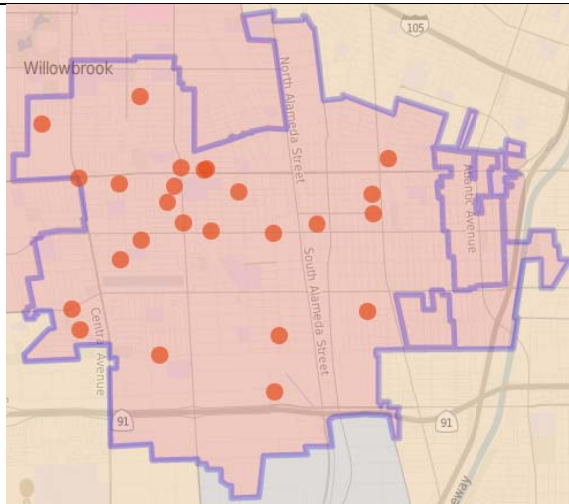
6 80. CUSD schools are located in areas wherein significant gang activity is
7 commonplace. The lack of available options and support available to many young
8 people in the community contributes to gang recruitment, threats, and violence that
9 occur on or near CUSD campuses. Students report assaults in the mornings just
10 outside the school gates and threats during the school day. Some students have been
11 compelled to transfer to protect their safety.

12 81. When violent incidents occur on or near school campuses, not only are
13 the victims and witnesses to those incidents affected, but also the schools may
14 require the students to implement lockdown procedures—called “code yellow” in
15 CUSD—as a safety measure. These frightening incidents traumatize students by
16 bringing violence into school—a place where students should have an expectation of
17 safety. While on lockdown, students may be confined to a single classroom for
18 hours, at times dropping to the floor or hiding under furniture in response to the
19 sounds of nearby gunshots, police sirens, or circling helicopters. Students who have
20 been previously traumatized may be forced to relive those experiences by being
21 locked in a small room with knowledge of the violence taking place outside.

22 82. For example, last year, Chavez Continuation School was placed on
23 “code yellow” for over two hours in response to a report that individuals had been
24 spotted near the campus fence with a gun. While students were confined in their
25 classrooms, a police officer rushed into a classroom full of students with his gun
26 drawn.

27 83. The neighborhoods around CUSD schools are, by all accounts
28 (including governmental reports), extremely dangerous. In the last twelve months,

1 there have been 25 homicides in Compton, which equates to 26 killings per 100,000
 2 people,¹⁷ more than five times the national average.¹⁸ In the past six months, there
 3 have been 470 officially reported violent crimes, defined as homicides, rapes,
 4 assaults, and robbery.¹⁹ This violence exists in close proximity to many CUSD
 5 schools. The following maps show the location of homicides and schools in
 6 Compton, with each being spread out across the community, illustrating the
 7 proximity of such gun violence to students and schools.



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 16 *Homicides, last 12 months*²⁰



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 28 *Schools*²¹

¹⁷ *The Homicide Report*, Los Angeles Times, <http://homicide.latimes.com/neighborhood/compton/year/all> (last visited May 17, 2015).

¹⁸ *Murder Rates Nationally and by State*, The Death Penalty Information Center, <http://www.deathpenaltyinfo.org/murder-rates-nationally-and-state> (last visited May 11, 2015).

¹⁹ *Mapping L.A. – Southeast: Compton*, Los Angeles Times, <http://maps.latimes.com/neighborhoods/neighborhood/compton/crime/#six-months> (last visited May 17, 2015).

²⁰ *The Homicide Report*, *supra* note 17.

²¹ *Mapping L.A. – Southeast, Compton*, Los Angeles Times, <http://maps.latimes.com/neighborhoods/neighborhood/compton/schools/> (last visited May 17, 2015).

1 84. Too many Compton students report feeling unsafe on their school
2 campuses. The California Healthy Kids Survey data for CUSD reflects that only
3 47% of elementary school students feel safe at school all the time.²²

4 **B. Death of or Separation from a Loved One**

5 85. Nearly every student in the CUSD community has been touched by loss
6 of or separation from caregiver, family member, or close friend.

7 86. The loss of a loved one can be difficult for any young person to
8 process, but the nature of the losses suffered by many Compton children may further
9 complicate or exacerbate the trauma. Development of trauma symptoms after the
10 death of a family member or friend is particularly likely when the death is sudden or
11 violent. Children exposed to community violence are thus particularly vulnerable to
12 complex trauma related to loss.

13 87. Loss is particularly traumatic when the survivor witnessed the events
14 leading to the death or grieves in a setting in which the survivor feels like the threat
15 has not passed. For example, the trauma of a child whose parent or sibling was
16 killed in a shooting may be re-triggered when hearing gunshots or sirens.

17 88. Student Plaintiffs have lost family members or close friends under
18 sudden or violent circumstances, and/or were witness to the traumatic events. For
19 example, last September, when he was fourteen years old, Plaintiff Phillip W.
20 watched a close friend get shot in the head and killed. As a middle school student at
21 Whaley, Plaintiff Kimberly Cervantes witnessed the deaths of two students.

22 89. Finally, many Compton schoolchildren are grieving not a single death,
23 but the loss of multiple friends and family members within a single year. While the
24 passing away of even a single loved one is often defining for a child, the chronic
25 nature of the losses suffered by Compton schoolchildren further complicates the

26
27 ²² *Compton Unified Elementary 2013-2014 Main Report, California Healthy*
28 *Kids Survey at 7, available at [https://chks.wested.org/resources/ComptonUnified_](https://chks.wested.org/resources/ComptonUnified_elem1314_main.pdf?1422393875)*

1 grieving process. For example, in the past year, Plaintiff Phillip W. has lost two
2 close friends and a close family member. Plaintiff Virgil W. has also recently
3 experienced the death of a close friend and a cousin, and nearly lost another close
4 friend and cousin.

5 90. While some youth may lose parents or caregivers to death, others are
6 separated from parents or guardians due to the incarceration or deportation of the
7 caregiver. These traumatic and destabilizing events typically result in the sudden
8 absence of a primary caregiver with whom children have significant emotional
9 bonds, or may create a financial crisis in those circumstances where the lost parent
10 was relied upon to support the family income. Plaintiff Peter P., for example, who
11 is a foster youth and has been separated from his biological parents, has two older
12 brothers who are both currently incarcerated.

13 **C. Placement of Children in the Foster System**

14 91. Compton schools serve particularly high numbers of foster youth.
15 CUSD reports at least 254 foster youth district-wide. By definition, a child who has
16 been placed in the foster care system because of abuse or neglect and/or been
17 removed from his or her family has experienced trauma. Such trauma is
18 compounded by the fact that the foster youth are routinely subjected to school and
19 placement removals. When stability is taken away, it further reduces the ability of
20 children to cope with traumatic experiences.

21 92. For example, children often enter into the foster system because they
22 have lived with a family member who had an alcohol or drug problem, lived with
23 someone who was mentally ill or suicidal, or witnessed or experienced domestic
24 violence.

25 93. Entry into the foster system itself exacerbates this trauma and creates
26 new trauma. Foster youth are forcibly removed from the only caregivers they have
27 ever known. It is common for foster youth to cycle through multiple placements,
28 repeatedly uprooted as they are transferred from foster family to foster family or

1 group home to group home. These children lack a continuous caregiver, and often
2 must change schools, hindering the formation of stable relationships with teachers
3 and classmates. Moreover, they are often re-traumatized due to forced confrontation
4 with past traumatic events in court proceedings and with county social workers as
5 their case winds its way through the county dependency system.

6 94. Plaintiff Peter P.'s experience in the foster system is representative of
7 that of many other Compton foster youth. As a very young child, Plaintiff Peter P.
8 experienced and witnessed physical and sexual abuse in the home and lived with a
9 caregiver affected by substance abuse. Peter P. was removed from the home of his
10 biological mother when he was five years old. He was put into the foster system,
11 separated from his siblings, and transferred in and out of a series of foster
12 placements. On multiple occasions, Peter P. was sent back to live with his
13 biological mother, only to be removed from her home again several weeks later.

14 **D. Extreme Poverty, Homelessness and Other Socioeconomic Hardship**

15 95. The United States Census Bureau found that 26.3% of Compton
16 residents live below the poverty level, a rate more than 50% higher than the
17 California average.²³ Similarly, the per capita income in Compton is \$13,548, less
18 than half the California average.²⁴ 93% of children in Compton schools are eligible
19 for Free and Reduced Priced Lunch.

20 96. Persistent poverty adversely affects Compton schoolchildren in many
21 ways, including by contributing to homelessness. There are 1,751 homeless
22 students in Compton schools, or 7.8% of the total student population. Those
23 children who are not sleeping on the streets may bounce between relatives' couches
24

25
26 ²³ *State & County QuickFacts, Compton (city), California*, U.S. Census
27 Bureau, <http://quickfacts.census.gov/qfd/states/06/0615044.html> (last updated Apr.
28 22, 2015, 9:08 EDT).

²⁴ *Id.*

1 and friends' floors, rarely knowing how long they will be able to stay or where they
2 will go next.

3 97. Homeless children are disproportionately likely to have experienced
4 other trauma, such as violence or the loss of a caregiver. Moreover, children who
5 lack a stable place to stay experience the chronic trauma caused by instability and
6 uncertainty. Children may go to school each day not knowing where they will sleep
7 that evening. Plaintiff Peter P., for example, spent two months of homelessness
8 sleeping on the roof of his high school cafeteria.

9 **E. Discrimination and Racism**

10 98. For Compton youth, the experience of violence, instability, and poverty
11 is often compounded by unfair treatment due to their race or ethnicity. The
12 Compton school district is comprised nearly entirely of students of color. The
13 district serves a student population that is 79% Latino and 19% African-American.²⁵
14 Consistent with the experience of youth of color elsewhere in California and
15 throughout the nation, Compton students experience the dignitary harm of racism
16 and discrimination.

17 99. Racial oppression itself is “a traumatic form of interpersonal violence
18 which can lacerate the spirit, scar the soul, and puncture the psyche.”²⁶ Research
19 has shown that children who are victims of racism experience psychological
20
21
22

23
24 ²⁵ *Enrollment by Ethnicity for 2014-15*, California Department of Education,
25 <http://data1.cde.ca.gov/dataquest/Enrollment/EthnicEnr.aspx?cChoice=DistEnrEth&cYear=2014-15&cSelect=1973437--Compton%20Unified&TheCounty=&cLevel=District&cTopic=Enrollment&myTimeFrame=S&cType=ALL&cGender=B> (last
26 visited May 16, 2015).

27 ²⁶ Kenneth V. Hardy, *Healing the Hidden Wounds of Racial Trauma*, 22
28 *Reclaiming Child and Youth* 24, 25 (2013).

1 trauma.²⁷ Chronic exposure to acts of racism can lead to internalized devaluation,
2 an assaulted sense of self, internalized voicelessness, and rage.

3 100. Incidents of racially-biased policing and law enforcement practices that
4 stigmatize and victimize communities of color have risen to national prominence in
5 recent months. Student Plaintiffs, like many other Compton youth—particularly
6 African-American youth—have been subject to brutality and disproportionate police
7 treatment:

- 8 • Last year, Plaintiff Phillip W. was chased and shot at by the police when he and
9 his friends were playing basketball on the court of his old elementary school
10 campus in the evening. One of the bullets grazed Phillip W.’s side and left a
11 hole and burn marks on his sweater. Phillip W. says the incident sent a message
12 to him: “We don’t care what you’re doing, we think you’re bad, so we’re going
13 to kill you.”
- 14 • On another occasion, Plaintiff Phillip W. was playing tag in a Compton park with
15 friends. A police officer pointed a gun at him and yelled, “Freeze!” He then
16 looked more closely at Phillip W. and said, “Never mind, you’re not him, go on.”
- 17 • In sixth grade, Plaintiff Donte J. was arrested at gunpoint for walking through
18 Roosevelt Elementary School after-hours in order to take a short cut home. He
19 later learned the police thought he was someone else.

20 101. These encounters affect individuals beyond the direct victims and their
21 families by creating and contributing to mistrust between the community and the
22 police. This causes students to experience fear and tension during interactions with
23 law enforcement, thereby further exacerbating exposure to trauma.

25 ²⁷ Vanessa M. Nyborg & John F. Curry, *The Impact of Perceived Racism:*
26 *Psychological Symptoms Among African American Boys*, 32 J. Clin. Child Adolesc.
27 Psychol. 258, 258 (2003) (“Personal experiences of racism were related to self-
28 reported internalizing symptoms, lower self-concept, and higher levels of
hopelessness.”).

1 102. The actions of school police in Compton frequently mimic law
2 enforcement encounters in the community, and further reinforce and exacerbate the
3 mistrust. At Chavez Continuation School, for example, a special education student
4 was recently pepper-sprayed in the face outside the school cafeteria by school
5 police.

6 103. African-American students in Compton, particularly African-American
7 male students, are particularly likely to bear the most harmful consequences of
8 Defendants' failure to address and accommodate student trauma. African-American
9 students in Compton schools are disproportionately subject to school discipline such
10 as suspension or expulsion and pushed out of mainstream high schools and into
11 continuation schools. In the 2013-2014 school year, African-American students
12 received 45% of total disruption/defiance suspensions within CUSD,²⁸ where they
13 comprise only 19% of the student population.²⁹

14 104. For other students, the experience of violence, instability, and poverty
15 is compounded by the discrimination and marginalization they experience as a result
16 of their sexual orientation or gender identity. This often manifests in bullying, a
17 form of chronic trauma.³⁰ "Indeed, the student who fails to conform to generally
18 accepted gender stereotypes frequently finds him or herself among the chronically
19 victimized."³¹ Such victimization has a profound impact on self-identity and
20 frequently leads to "degradation of [the youth's] ability to envision a healthy,
21

22
23 ²⁸ *Enrollment by Ethnicity for 2014-15, supra* note 25.

24 ²⁹ *Suspension and Expulsion Report For 2013-14*, California Department of
25 Education, <http://dq.cde.ca.gov/dataquest/SuspExp/defbyscheth.aspx?cYear=2013-14&cType=ALL&cCDS=19734370000000&cName=Compton+Unified&cLevel=District&cChoice=dDefByEth&ReportCode=dDefByEth> (last visited May 16, 2015).
26

27 ³⁰ Michael J. Higdon, *To Lynch a Child: Bullying and Gender Nonconformity*
28 *in Our Nation's Schools*, 86 Ind. L.J. 827, 856 (2011).

³¹ *Id.* at 832.

1 meaningful future.”³² Tragically, “incidences of suicide among children who have
2 been bullied on the basis of nonconforming gender expression are plentiful.”³³

3 105. Plaintiff Kimberly Cervantes’s experience demonstrates how harmful
4 such discrimination can be. In her junior year at Dominguez High School, Kimberly
5 told a classmate that she identified as bisexual. The teacher, who was about to begin
6 the lesson, overheard and in front of the entire class proclaimed that Kimberly
7 “shouldn’t be gay” and that it was “wrong.” Kimberly felt humiliated and horrified
8 and stopped attending school.

9 **F. Co-Incidence and Prevalence of Traumatic Events**

10 106. The traumatic events described above rarely take place in isolation.
11 The experience of Plaintiff Peter P., who has endured nearly all of the types of
12 injury described above, is illustrative. Peter P. entered the foster system
13 due to violence and substance abuse in the home, and was further re-traumatized by
14 the instability of the foster system, including changing placements and schools.
15 Peter P. has repeatedly witnessed violence and has himself been the victim of
16 violence. His two older brothers are currently incarcerated, and he has been
17 homeless for the past two months. Youth like Peter P. who have endured more than
18 one adverse childhood experience are more likely to experience significant adverse
19 outcomes connected to the past trauma.³⁴

20 **Trauma Exposure Affects Brain Development**

21 107. Decades of medical research have made clear that the brains of children
22 who experience chronic or repeated traumas undergo material changes, creating
23 demonstrable physiological impairments that impede the ability to perform daily
24

25 ³² *Id.* at 851.

26 ³³ *Id.* at 853.

27 ³⁴ *Adopting ACEs, supra note 5; No School Alone, supra note 5; Impact,*
28 *supra note 3.*

1 activities, including thinking, learning, reading, and concentrating. These
2 impairments fall squarely within the meaning of disability under the Rehabilitation
3 Act and Americans with Disabilities Act.

4 108. The human brain, especially the developing brain, is plastic and
5 adaptable. It is the brain's plastic quality that allows us to learn, grow, and adapt to
6 new and novel situations. But it is unfortunately this same feature of the brain that
7 causes trauma to have a profound effect on the developing brains of children.³⁵ In
8 plain terms, the brain calibrates itself so it is able to respond to and meet the
9 challenges, tasks, and situations individuals encounter in their daily lives. However,
10 when an individual is exposed to trauma, especially in the form of repeated
11 traumatic stress, the brain becomes over-sensitized to any potential stimulus that
12 might cue a threat, so the individual perceives ordinary encounters as threatening ones,
13 triggering a reactive "fight or flight" or dissociative mode.³⁶

14 109. The ongoing effects of trauma are well-documented. For example, an
15 individual who has been in an automobile accident at a particular intersection may
16 continue to be nervous when driving through that intersection, long after the
17 accident occurred. A child who has been bitten by a dog may react with terror to
18 any dog, even one that is clearly non-threatening. A child who is exposed to
19 repeated complex trauma, therefore, might reasonably perceive ordinary questions
20 from teachers, alarm bells, or hallway jostling as challenges, triggering hostility (a
21 "fight" response) or withdrawal (a "flight" response). In an educational
22 environment that is not trauma-sensitive, that student is treated as disruptive and
23 may be isolated from other students, suspended, or even expelled. This only
24 exacerbates the student's trauma. Even if the student is not punished, nothing is
25

27 ³⁵ *Homeostasis, supra* note 7, at 36.

28 ³⁶ *How "States" Become "Traits," supra* note 9, at 277-79.

1 being done to address the psychological and neurological symptoms caused by
2 trauma that are preventing the student from receiving an adequate education.

3 **A. The Body’s Stress Response to Trauma.**

4 110. According to Dr. Bruce Perry, by definition, “[a]n event is traumatic if
5 overwhelms the [child] dramatically and negatively disrupts homeostasis.”³⁷ The
6 brain’s “normal” state is characterized by “a continuous, dynamic process of
7 modulation, regulation, compensation, and activation” called homeostasis.³⁸ Like
8 the body’s regulation of its blood sugar levels or the level of oxygen in its muscles,
9 the brain maintains a base equilibrium state, homeostasis. Homeostasis allows the
10 brain to respond to everyday environmental situations and challenges.

11 111. When there are rapid, novel, threatening, or unpredictable changes in
12 the environment, the brain engages in an alarm reaction, initiating a state of
13 hyperarousal. If the perceived threat persists after the initial alarm response, an
14 individual will either further enter into a state of “fight or flight” or begin to move
15 through a dissociative continuum.³⁹ The “hyperaroused” fight-or-flight state is a
16 complex, total-body response optimized to allow the person to respond to and
17 survive the novel or threatening situation. This response disturbs the brain’s
18 equilibrium, or homeostasis, by engaging a set of nervous system, neuroendocrine,
19 and immune responses that allow the body to react to the stress or danger in the near
20 to immediate term.⁴⁰

21 112. As the perceived threat increases, so does the extent of the individual’s
22 hyperaroused fight-or-flight state, elevating from a state of calm to vigilance, alarm,
23
24

25 ³⁷ *Homeostasis*, *supra* note 7, at 36.

26 ³⁸ *Id.* at 35.

27 ³⁹ *How “States” Become “Traits,” supra* note 9, at 279.

28 ⁴⁰ *Id.*

1 fear, and ultimately terror.⁴¹ During each of the stages of the body’s stress response,
2 all aspects of the individual’s physical and mental functioning—thinking, feeling,
3 and behaving—change.⁴² The heart and breath start racing, the skin may flush or
4 pale, the pupils dilate, and the muscles tense up. The individual gets tunnel vision
5 and focuses on non-verbal cues, such as eye contact, body posture, and facial cues
6 rather than words.⁴³ The body is totally optimized to respond to the *here and now*,
7 and everything else is put on hold. Put simply, “[s]omeone being assaulted doesn’t
8 spend a lot of time thinking about the future or making an abstract plan for
9 survival.”⁴⁴

10 113. When the threatening situation has passed, the brain mediates the return
11 to its equilibrium, homeostasis state—the heart rate decreases, and the mind returns
12 to its pre-stress-response state.⁴⁵ It is normal and healthy for a young, developing
13 brain to be exposed to predictable and moderate amounts of predictable stress; the
14 world is a dynamic and changing place and the brain must learn to adapt and
15 thrive.⁴⁶ However, if a discrete stress is particularly severe, prolonged, or
16 unpredictable, or if the stress response is evoked chronically over and over, the

19
20 ⁴¹ Bruce D. Perry, *Effects of Traumatic Events on Children: An Introduction*,
21 The Child Trauma Academy (2003), at 3 (hereinafter “Effects of Trauma”),
22 available at [http://www.mentalhealthconnection.org/pdfs/perry-handout-effects-of-](http://www.mentalhealthconnection.org/pdfs/perry-handout-effects-of-trauma.pdf)
23 trauma.pdf.

24 ⁴² *Id.*

25 ⁴³ *Id.*

26 ⁴⁴ *Id.*; see also Bruce D. Perry, *Maltreatment and the Developing Child: How*
27 *Early Childhood Experience Shapes Child and Culture*, The Margaret McCain
28 Lecture Series (2005) (hereinafter “Maltreatment”), available at [http://](http://www.lfcc.on.ca/mccain/perry.pdf)
www.lfcc.on.ca/mccain/perry.pdf.

⁴⁵ *Homeostasis*, *supra* note 7, at 35.

⁴⁶ *Id.* at 37, *Stress*, *supra* note 10, at 2; *Maltreatment*, *supra* note 44, at 2.

1 brain’s regulatory mechanisms can become fatigued or overactivated—thus making
2 it harder for the brain to return to its original equilibrium state.⁴⁷

3 114. In contrast, the dissociative, or “freeze and surrender” response is more
4 common in young children, as well as during traumatic events that involve pain or
5 being trapped.⁴⁸ Unlike the fight or flight response, the dissociative response
6 manifests in cognitive and physical immobilization, decreased heart rates, and
7 disengagement from external stimuli.⁴⁹

8 115. The spectrum of dissociation ranges from daydreaming to loss of
9 consciousness. When an educator is unaware of the symptoms of a dissociative
10 reaction, it is easy for him or her to misinterpret a student’s dissociative behavior.
11 For example, if a student’s sensitized nervous system overreacts to a seemingly
12 innocuous stimulus, such as hearing their name unexpectedly called by a teacher,
13 they may freeze, both cognitively and physically. The teacher may then give that
14 child a directive, which the child is unable to acknowledge due to the impact of the
15 situation on his or her physiology. In turn, the teacher understandably perceives the
16 student to be disobedient and is likely to repeat the directive, this time with an
17 explicit or implicit threatened consequence if the student continues to “misbehave.”
18 This “‘threat’ makes the child feel more anxious, threatened, and out of control....
19 If sufficiently terrorized, the ‘freezing’ may escalate into complete dissociation.”⁵⁰
20 A trauma that would evoke a fight-or-flight response in one individual may evoke a
21 dissociative state in another, and rather than being hyperaroused, the child will
22 appear detached, numb, avoidant, and out of touch with his or her surroundings.⁵¹

23
24 ⁴⁷ *Homeostasis*, *supra* note 7, at 35-36; *Stress*, *supra* note 10, at 2.

25 ⁴⁸ *How “States” Become “Traits,” supra* note 9, at 279, 291; *see also*
26 *Homeostasis*, *supra* note 7, at 44; *Maltreatment*, *supra* note 44.

27 ⁴⁹ *How “States” Become “Traits,” supra* note 9, at 279-80.

28 ⁵⁰ *Id.* at 280.

⁵¹ *Effects of Trauma*, *supra* note 41, at 4.

1 **B. Trauma “Rewires” the Brain.**

2 116. Over time, the areas of a child’s brain that become most developed are
3 the areas that the child uses most frequently. As described by Dr. Perry, “[i]n a very
4 real sense, trauma throws the [brain] off balance and creates a persisting set of
5 compensatory responses that, in turn, create a new but less flexible state of
6 equilibrium.”⁵² One analogy is to compare the stress-state to a groove in a record—
7 the more the record is played, the deeper the groove becomes engraved into the
8 vinyl. Or, as Dr. Perry explains, “[t]he more frequently a certain pattern of neural
9 activation occurs, the more indelible the internal representation.”⁵³ With severe or
10 chronic trauma, “states become traits,”—the “fight or flight” state, or the detached,
11 dissociative state, becomes the brain’s new equilibrium. If a child repeatedly
12 experiences fear, the areas of the brain that control behavior directed by fear can
13 become over-sensitized, and “full-blown response patterns” such as hyperarousal or
14 disassociation can be triggered by seemingly innocuous stimuli.⁵⁴

15 117. “Memories of fear are created at multiple levels in the brain’s
16 hierarchical systems,”⁵⁵ and traumatic events can “create different types of
17 memory.”⁵⁶ Because trauma triggers an all-brain response, the emotional, motor,
18 cognitive, and physiologic parts of the brain are all engaged. Thus, any stimulus
19 that triggers any of these parts of the brain can trigger a full-blown trauma-
20 reaction.⁵⁷ Frequently the individual experiencing the trigger and response will have
21 no control over it. “Specific cues from the traumatic event may generalize (*e.g.*,

23 ⁵² *Homeostasis*, *supra* note 7, at 36.

24 ⁵³ *How “States” Become “Traits,” supra* note 9, at 275.

25 ⁵⁴ *Id.*

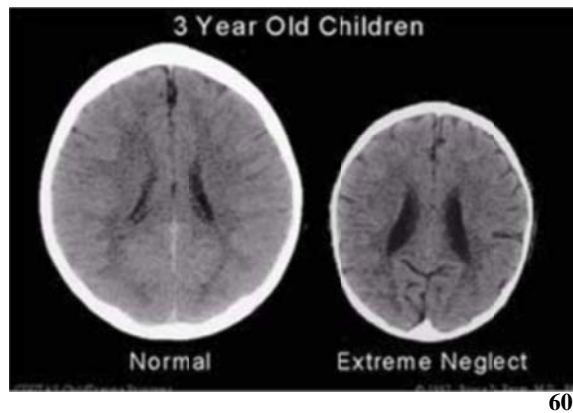
26 ⁵⁵ *Homeostasis*, *supra* note 7, at 38.

27 ⁵⁶ *Id.* at 36.

28 ⁵⁷ *Id.*

1 gunshots to loud noises, a specific perpetrator to any strange male). In other words,
2 despite being away from threat and the original trauma, these key parts of the child's
3 brain are activated again and again. The memories of fear are seared into the child's
4 neurobiology."⁵⁸

5 118. These wounds inflicted by trauma are invisible on the skin, but are
6 unmistakably revealed by brain imaging of trauma victims. Recent research by Dr.
7 Victor Carrion and Shane S. Wong at Stanford University involving brain imaging
8 of traumatized children bears this out.⁵⁹



17 119. The hippocampus is a brain structure in the limbic system and plays an
18 essential role in new learning and memory formation. The hippocampus is active
19 when the brain is storing and retrieving information. However, researchers have
20 shown that part of the hippocampus is less active in a traumatized brain, and that
21 trauma can increase cortisol levels in the hippocampus and ultimately cause it to

22

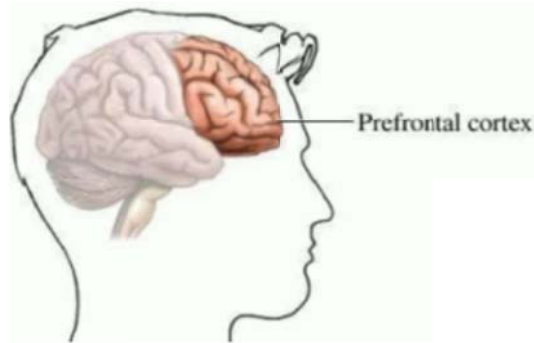
23 ⁵⁸ *Id.* at 42.

24 ⁵⁹ See Victor G. Carrion & Shane S. Wong, *Can Traumatic Stress Alter the*
25 *Brain? Understanding the Implications of Early Trauma on Brain Development*
26 *and Learning*, 51 *J. Adolesc. Health* S23-S28 (2012) (hereinafter “Can Traumatic
27 Stress Alter the Brain?”).

28 ⁶⁰ Bruce D. Perry, *Childhood Experience and the Expression of Genetic*
Potential: What Childhood Neglect Tells Us About Nature and Nurture, 3 *Brain &*
Mind 79, 93 (2002).

1 decrease in volume. Researchers found that “physiological hyperarousal may make
2 memories difficult to regulate. The memories may be processed abnormally,
3 leading to both overrepresentation, such as intrusive thoughts and nightmares, or
4 suppression, inability to recall memories, or selective amnesia.”⁶¹

5 120. Medical researchers also found changes in the prefrontal cortex
6 (“PFC”) of traumatized students. The prefrontal cortex is a lobe in the front of the
7 brain that plays an important role in regulating the complex cognitive, emotional,
8 and behavioral functioning of humans. Its functions include the ability to react to
9 one stimulus instead of another, and also “making the association between stimuli
10 and its rewards, thus contributing to the formation of response-reinforcement
11 associations and guiding goal-directed actions.”⁶²



19 121. Researchers have documented that traumatized children had smaller or
20 abnormal prefrontal cortex structures. They concluded that “youth with [traumatic
21 experiences] have deficits in key areas of the PFC responsible for cognitive control
22 attention, memory, response inhibition, and emotional reasoning—cognitive tools
23 that may be necessary for learning and therapeutic processing of trauma.”⁶³

26 ⁶¹ *Can Traumatic Stress Alter the Brain?*, *supra* note 59, at S24.

27 ⁶² *Id.*

28 ⁶³ *Id.* at S26.

1 122. The above findings represent only a handful of the documented
2 physiological effects of trauma on the brain. The science is clear: trauma causes
3 palpable, physiological harm to a young person’s developing brain.

4 **In the Absence of Trauma-Sensitive Practices, CUSD Students Affected by**
5 **Complex Trauma Cannot Meaningfully Access Education.**

6 123. Compton students bear the physiological and psychological wounds of
7 the traumatic experiences they have experienced when they arrive in the
8 classroom.⁶⁴ When these wounds go unaddressed, the physiological consequences
9 of past traumatic experiences impair students’ capacity to perform daily activities all
10 children engage in such as learning and participating in the classroom. “[E]xposure
11 to violence is associated with impaired school functioning, decreased IQ and reading
12 ability, lower grade-point average (GPA), increased school absenteeism, and
13 decreased graduation rates.”⁶⁵ As is well known, the acquisition of academic skills
14 in reading, writing, and mathematics requires “attention, organization,
15 comprehension, memory engagement in learning, and trust.”⁶⁶ Trauma impairs
16 students’ ability to operate in each of these areas.

17
18 ⁶⁴ After completing a study of 642 preschool children enrolled in Head Start,
19 Dr. Christopher Blodgett concluded that “Children’ [sic] ACEs are strong predictors
20 of developmental concerns in social emotional adjustment and in cognitive skills
21 associated with school readiness.” Christopher Blodgett, *ACEs in Head Start*
22 *Children and Impact on Development* (2014) (manuscript in preparation), Ex. 3 at
23 10. He further notes, “The evidence demonstrates that ACE exposure in children is
a significant predictor not only of social emotional adjustment but of the school
readiness skills critical to children’s academic potential.” *Id.* at 11.

24 ⁶⁵ *Violence Exposure and PTSD*, *supra* note 3 at 335. See also Lisa H. Jaycox
25 et al., *Support for Students Exposed to Trauma: A Pilot Study*, 1 *School Ment.*
26 *Health* 49 (2009); Sheryl Kataoka et al., *Responding to Students with PTSD in*
27 *Schools*, 21 *Child. Adolesc. Psychiatr. Clin. N Am.* 119 (2012) (hereinafter
“Responding to Students”).

28 ⁶⁶ Wolpov, Ray et al., *The Heart of Learning and Teaching: Compassion,*
Resiliency, and Academic Success 12 (2009) (hereinafter “The Heart of Learning”),

1 124. Complex trauma also often induces behaviors due to loss of ability to
2 emotionally self-regulate—including aggression, disproportionate reactivity,
3 impulsivity, distractibility, or withdrawal and avoidance—that disrupt the learning
4 environment and frequently lead to exclusionary school discipline measures or
5 absence from school. These barriers have tragically predictive consequences for
6 students: academic research has extensively documented the link between trauma
7 and poor academic outcomes, including failure to reach proficiency and failure to
8 graduate from high school.

9 125. In a record review of 701 youth who had attended the Bayview Child
10 Health Center, a private, not for profit, community based primary care clinic in San
11 Francisco, Nadine Burke and her co-authors found that only 3% of participants with
12 an ACE score of 0 had learning/behavior problems, while 51.2% of participants with
13 an ACE score greater than or equal to four exhibited learning/behavior problems.⁶⁷

14 126. In addition, CUSD schools, which serve high concentrations of
15 students who have experienced significant trauma and have not put effective
16 accommodations in place, generate a multiplier effect upon students and teachers.
17 When schools fail to appropriately accommodate students who have experienced
18 trauma, classrooms can become unmanageable for even experienced teachers and
19 the learning for all students is impacted. Students who are reliving trauma in the
20 classroom or who cannot self-regulate as a result of trauma and have not been
21 provided with appropriate accommodations may not be able to sit still or
22 concentrate. They may act out or overreact. Without appropriate accommodations
23 in place, a classroom teacher without proper support and/or training may be forced
24 to stop instruction multiple times to address the issues, taking away instructional
25

26 available at <http://www.k12.wa.us/compassionateschools/pubdocs/theheartof>
27 [learningandteaching.pdf](http://www.k12.wa.us/compassionateschools/pubdocs/theheartof).

28 ⁶⁷ *Impact, supra* note 3, at 5.

1 time and interfering with consistent and coherent delivery of curricula, which then
2 impacts the education of all students in the class.

3 127. Empathetic and compassionate teachers and school staff who attempt to
4 address student needs resulting from trauma often lack the training, resources, and
5 support necessary to do so. These teachers and staff often experience burnout and
6 secondary traumatic stress, leading to turnover and further instability at the school
7 site. Relationships between staff and students are often disrupted, and students can
8 be further traumatized by the loss of yet another supportive adult in their lives,
9 especially if they have previously endured a great deal of loss.

10 128. In sum, unaddressed student trauma in CUSD schools undermines the
11 educational environment and denies CUSD students meaningful access to the public
12 education to which they are entitled.

13 **A. Verbal Processing and Communication**

14 129. One of the first things affected when a student enters a classroom in the
15 hyperaroused, fight-or-flight state is the student's ability to process verbal
16 communication and use language as a medium of communication. As Dr. Perry
17 explains:

18 The calm child may sit in the same classroom next to the child in an
19 alarm state, both hearing the same lecture by the teacher. Even if they
20 have identical IQs, the child that is calm can focus on the words of the
21 teacher and, using the neocortex, engage in abstract cognition. The
22 child in an alarm state will be less efficient at processing and storing
23 the verbal information the teacher is providing.⁶⁸

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25
26
27 ⁶⁸ Bruce D. Perry, *Youth Violence - Neurodevelopmental Impact of Violence*
28 *in Childhood, in Principles and Practice of Child and Adolescent Forensic*
Psychiatry 221 (2002).

1 130. One study found that children who had suffered chronic trauma had
2 significantly different outcomes between the verbal and performance portions on IQ
3 testing:

4 This is consistent with the clinical observations of teachers that these
5 children are ‘bright’ but can’t learn easily.... At rest, the brain of [a
6 traumatized] child has different areas activated-different parts of the
7 brain ‘controlling’ his functioning. The capacity to internalize new
8 verbal cognitive informational depends upon having portions of the
9 frontal and related cortical areas being activated—which, in turn,
10 requires a state of attentive calm. A state the traumatized child rarely
11 achieves.⁶⁹

12 131. Because students who have been exposed to chronic, traumatic stress
13 are “consumed with a need to monitor nonverbal cues for threats, their brains are
14 less able to interpret and respond to verbal cues, even when they are in an
15 environment typically considered nonthreatening, like a classroom.”⁷⁰

16 132. The student who has a more difficult time processing verbal
17 information will learn far less of it. Likewise, when a student’s facility with using
18 language is hampered, he or she has a harder time communicating with others. This
19 potentially inhibits the student’s ability to effectively express abstract concepts and
20 other complex information. Further, it typically harms the student’s ability to
21 develop interpersonal relationships with teachers and peers, which are crucial to
22 academic success.

23
24 ⁶⁹ Bruce D. Perry, *Memories of Fear: How the Brain Stores and Retrieves*
25 *Physiologic States, Feelings, Behaviors and Thoughts from Traumatic Events*, The
26 Child Trauma Academy, available at http://www.juconicomparte.org/recursos/Memories_of_Fear_Wkh9.pdf (internal citations omitted).

27 ⁷⁰ *Understanding the Effects of Maltreatment on Brain Development*, Child
28 Welfare Information Gateway, The Children’s Bureau (2015), available at
<http://www.childwelfare.gov/pubs/issue-briefs/brain-development>.

1 **B. Cognitive Development**

2 133. Trauma also affects mental reasoning functions, including the analysis
3 of cause-and-effect relationships. If the environment in which cognitive
4 development occurs is unstable, unpredictable, and/or disordered, this can be
5 reasonably expected to harm a student’s ability to process cause-and-effect
6 relationships.⁷¹ These relationships are the basic building blocks of the narrative
7 form, scientific inquiry, and elementary logic. Examples of unstable, unpredictable,
8 or disordered environments include sudden absences of family members due to
9 incarceration or death, homelessness, and school lockdowns. The unpredictability
10 and instability of these environments leaves a child’s understanding of cause-and-
11 effect underdeveloped, because his or her universe lacks the basic orderliness the
12 young person who has not experienced complex trauma takes for granted.⁷²

13 **C. Concentration**

14 134. A child who is exposed to severe or chronic trauma may also become
15 preoccupied with the traumatic events and replay them over and over in his or her
16 mind, making it harder for him or her to focus in the classroom.⁷³ This can be
17 further compounded by poor sleep, which is a symptom of trauma.⁷⁴

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19 ⁷¹ Susan E. Craig, *The Educational Needs of Children Living with Violence*,
20 74 Phi Delta Kappan 67, 68 (“An extended experience of perceived low impact on
21 the world inhibits the development of such behaviors as goal setting and delayed
22 gratification. These skills, so important to school success, rely on a person’s ability
23 to predict and make inferences. Similarly, failure to establish an internalized locus
24 of control results in an apparent lack of both motivation and persistence in academic
25 tasks, as well as a resistance to behavior-management techniques that assume an
26 understanding of cause and effect.”).

27 ⁷² *Id.*

28 ⁷³ *Responding to Students*, *supra* note 65.

⁷⁴ Sheryl Kataoka et al., *Effects on School Outcomes in Low-Income Minority
Youth: Preliminary Findings from a Community-Partnered Study of a School
Trauma Intervention*, 21 Ethn. Dis. 7 (2011) (hereinafter “Effects on School
Outcomes”).

1 135. The difficulty concentrating caused by exposure to trauma can impair
2 students' ability to process, retain, synthesize, and recall information.⁷⁵ This
3 perceived inability to pay attention is sometimes diagnosed as ADHD, but the root
4 cause is often traumatic experiences suffered by the child.⁷⁶

5 **D. Goal-Setting and Long-Term Planning**

6 136. Traumatized students also have a more difficult time setting and
7 achieving goals, which are important skills for academic success. Students who do
8 not feel safe at school and who are often in a state of hypervigilance tend to “act
9 instead of plan,”⁷⁷ focusing only on their immediate surroundings and situation.
10 Consequently, their ability to make plans, set goals, work toward those goals, and
11 reflect on progress—the “executive functions” necessary for educational progress—
12 can be compromised.⁷⁸ Dr. Perry explains:

13 Children in a state of fear retrieve information from the world
14 differently than children who feel calm. In a state of calm, we use the
15 higher, more complex parts of our brain to process and act on
16 information. In a state of fear, we use the lower, more primitive parts
17 of our brain.... The traumatized child lives in an aroused state, ill-
18 prepared to learn from social, emotional, and other life experiences.
19 She is living in the minute and may not fully appreciate the
20 consequences of her actions.⁷⁹

23 ⁷⁵ Bessel A. Van der Kolk, *Psychological Trauma* 18, 96-98 (American
24 Psychiatric Publishing) (2003).

25 ⁷⁶ *Stress*, *supra* note 10, at 4; *Homeostasis*, *supra* note 7 at 34, 45.

26 ⁷⁷ Bessel A. Van Der Kolk, *Developmental Trauma Disorder*, 35 *Psychiatric*
27 *Annals* 401 (2005).

28 ⁷⁸ *The Heart of Learning*, *supra* note 66, at 12.

⁷⁹ *Maltreatment*, *supra* note 44, at 3.

1 **E. Classroom Behaviors and School Discipline**

2 137. Research documents that that “[c]lassroom behavioral adaptations to
3 trauma include aggression, defiance, withdrawal, perfectionism, hyperactivity,
4 reactivity, impulsiveness, and/or rapid and unexpected emotional swings.”⁸⁰ A
5 hallmark of trauma is behaviors or reactions that may appear disproportionate,
6 emotional, exaggerated, and/or out of place for their social context. Children
7 exposed to unbearable stresses may be unable to self-regulate their behavior in the
8 classroom, which results in them being labeled as “acting out” or as “troubled.”

9 138. A traumatized student in a hypervigilant state may interpret visual and
10 verbal clues differently than students unaffected by trauma. For example, a
11 teacher’s or classmate’s seemingly trivial gesture, such as crossed arms, could be
12 interpreted as menacing or threatening by a trauma-impacted child. In other
13 situations, seemingly innocuous situations or phrases might remind the student of
14 traumatic events, causing the student to become defensive. In each case, the student
15 may become explosive or angry in a way that seems completely disproportionate to
16 the situation—which again, typically leads to unproductive school discipline.⁸¹

17 139. Students affected by a loss of emotional self-regulation due to trauma
18 may also act aggressively towards others and be perceived as reactive or impulsive.
19 Trauma causes students to have a harder time processing language and accurately
20 reading social cues, which in turn causes them to have more difficulty relating to
21 and empathizing with others, which can elicit aggressive behaviors.

22 140. Many of the Student Plaintiffs in this case struggle with anger as a
23 result of the complex trauma they have endured. Plaintiff Peter P. says, for
24 example, “My anger is not normal. Sometimes I believe my aura is wicked.
25 Sometimes I believe I have a demon in me.” Plaintiff Virgil W. says, “I know I
26

27 ⁸⁰ *The Heart of Learning*, *supra* note 66, at 13.

28 ⁸¹ *How “States” Become “Traits,” supra* note 9, at 278-79.

1 have anger problems. Up until I was in seventh grade, there was no limit. I was
2 kind of scared of myself for a while.”

3 141. One of the most common reactions by educators is to suspend, expel, or
4 refer to police students experiencing complex trauma for behavior related to their
5 trauma. Children affected by trauma are far more likely to be suspended or expelled
6 than children who are not affected by trauma. As a consequence, schools are
7 suspending and expelling the children who most need a supportive school
8 environment.

9 142. Defendants have failed to put systems of accommodation in place to
10 accommodate the high concentration of trauma-impacted students in its schools, and
11 instead have relied on an ineffective and counterproductive approach of punitive
12 discipline. During the 2013-2014 school year, CUSD reported 1,243 suspensions
13 and 7 expulsions. The experiences of Student Plaintiffs reflect this data:

- 14 • Plaintiff Peter P. has been “expelled” from six CUSD elementary and middle
15 schools, and was recently suspended after Dominguez High School learned that
16 he was homeless and sleeping on the roof of the high school cafeteria.
- 17 • In a single school year, Plaintiff Phillip W. has been “expelled” from two of
18 CUSD’s mainstream high schools, and is currently in expulsion proceedings
19 from the third.
- 20 • Plaintiff Virgil W. was “expelled” from Enterprise Middle School in sixth grade,
21 and from Centennial High School in ninth grade.
- 22 • This year, Plaintiff Donte J. was suspended from Whaley Middle School after
23 slamming the door to the counselor’s office in frustration over not getting the
24 help he needed.

25 **F. Student Attendance**

26 143. Some trauma-impacted students, particularly those who evoke avoidant
27 responses, may avoid school altogether. Dr. Christopher Blodgett has confirmed in
28

1 two studies that the level of exposure to adverse childhood experiences (ACEs)⁸² is
2 a powerful predictor for attendance problems.⁸³ In one study, Dr. Blodgett found
3 that “the level of ACE exposure was the principal predictor of attendance and
4 behavior problems” when Special Education status, grade level, race, eligibility for
5 Free and Reduced Meal plans, teachers, facilities, and gender were considered.⁸⁴ He
6 further found that in the ten percent of the children known to have experienced three
7 or more ACEs, serious attendance problems were five times more likely.⁸⁵ In
8 another study, he found that as “ACEs increase, the odds that attendance problems
9 and behavioral health problems occur rise progressively with increasing ACEs.
10 With four or more ACEs, attendance problems are five times more likely.”⁸⁶

11 144. In some cases, conditions at the school may exacerbate the effects of
12 trauma. In addition to traumatic events that have occurred at or near schools, the
13 sights, smells, and noises of a campus can act as traumatic reminders, and thus
14 trigger involuntary neurophysiological reactions in trauma-impacted students.
15 Lockdowns, slammed doors, angry voices, hallway jostling, alarm bells, police
16 sirens, helicopters, or schoolyard fights can elicit “flight or fight” behaviors which
17 interfere with student learning, attendance, and academic success. As a result,
18 students may avoid coming to school. This is borne out by academic studies
19 establishing that students who have experienced trauma are more likely to be absent
20 from school.⁸⁷

21

22 ⁸² *Adopting ACEs, supra* note 5, at 1 (ACEs are “inherently disruptive
23 experiences in childhood that produce significant and potentially damaging level of
24 stress and associated physical changes.”).

25 ⁸³ *Id.* at 8; *No School Alone, supra* note 5, at 6.

26 ⁸⁴ *Adopting ACEs, supra* note 5, at 8.

27 ⁸⁵ *No School Alone, supra* note 5, at 25.

28 ⁸⁶ *Adopting ACEs, supra* note 5, at 12.

⁸⁷ *Id.*

1 145. Exposure to trauma contributes to low student attendance rates in
2 CUSD schools. Trauma has caused avoidance of school for a number of Student
3 Plaintiffs. Plaintiff Peter P. has been repeatedly absent from class as a result of
4 trauma, particularly this past semester, and the district has not intervened to identify
5 or remedy the cause of the absences. Plaintiff Kimberly Cervantes missed a
6 significant amount of school as a result of experiencing multiple traumas, and as a
7 result was not able to graduate from a mainstream high school in CUSD. Other
8 CUSD students report similar experiences. For example, a Centennial High School
9 student was attacked on his way home from school in December and has missed
10 nearly an entire semester of school because he is too fearful to return to school.

11 **G. Unaddressed Trauma Is Associated With Poor Academic Outcomes.**

12 146. “The academic consequences of trauma exposure on academic success
13 are direct and causal.”⁸⁸ Academic research has consistently established that,
14 without effective interventions, children who have experienced trauma are more
15 likely to fall academically behind and less likely to graduate from high school.⁸⁹

16 147. One study showed that exposure to two or more traumas makes a
17 student 2.67 times more to have to repeat a grade or to be disengaged with their
18 classwork, even after controlling for factors such as race, socioeconomic status, and
19 health.⁹⁰

20 148. A different study of middle school students concluded that witnessing
21 violence was associated with lower academic achievement over time. Students who
22 had never witnessed violence were twice as likely to meet or exceed state academic
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26 ⁸⁸ *No School Alone*, supra note 5, at 25.

27 ⁸⁹ *Effects on School Outcomes*, supra note 74, at 6.

28 ⁹⁰ *Adverse Childhood Experiences*, supra note 4, at 2111.

1 performance goals as those who had.⁹¹ Yet another found that children exposed to
2 violence have decreased reading ability, lower grade-point average, more days of
3 school absence, and decreased rates of high school graduation.⁹² Another found
4 correlation between exposure to violence and lower high school graduation rates.⁹³

5 149. Another study of 2,101 elementary school students in Spokane, WA
6 found that “ACE exposure was the second most powerful predictor” of academic
7 failure after knowing if the child was in Special Education classes.⁹⁴ Further, in “the
8 10 percent of children known to have experienced three or more ACEs, academic
9 failure was four times more likely.”⁹⁵

10 150. Yet another study conducted in Washington State analyzed data for
11 5,443 K-12 student-participants in a state-funded program “for students at risk of
12 academic failure because of non-academic barriers.” The study administrators
13 found that in “students with the four or more ACEs, academic failure is twice as
14 likely.”⁹⁶

15 151. In an extensive statistical analysis of standardized test results in over
16 2,000 schools for in Washington state, Dr. Blodgett and his fellow researchers
17 found, in “a wholly consistent set of findings,” that “[a]cademic performance is
18 lower within grade and content tests as ... ACEs in the community increase,” even
19 when controlling for other factors such as race and poverty.⁹⁷ Emphasizing the

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21 ⁹¹ Christopher C. Henrich et al., *The Association of Community Violence*
22 *Exposure with Middle-School Achievement: A Prospective Study*, 25 J. Appl. Dev.
23 Psychol. 327 (2004).

24 ⁹² *Impact*, *supra* note 3, at 52.

25 ⁹³ Jeffrey Grogger, *Local Violence and Educational Attainment*, 32 J. of
26 Human Resources 659 (1997).

27 ⁹⁴ *Adopting ACEs*, *supra* note 5, at 8.

28 ⁹⁵ *No School Alone*, *supra* note 5, at 25.

⁹⁶ *Adopting ACEs*, *supra* note 5, at 12.

⁹⁷ *No School Alone*, *supra* note 5, at 38.

1 consistency of their findings, Dr. Blodgett remarked, “[w]e found no exceptions to
2 how [increased ACEs in the community] influence standardized test performance.”⁹⁸

3 152. These poor outcomes are all indicative of the consensus among
4 researchers: that trauma impairs a student’s ability to learn and receive an education.

5 **H. Educators Who Work with Students with Trauma Experience Secondary**
6 **Traumatic Stress and Burnout**

7 153. “The school environment and availability of resources for the mental
8 health needs of students is critical not only for student learning but also for the well-
9 being and efficacy of teachers.”⁹⁹ In addition to impacting the students directly,
10 unaddressed student trauma further destabilizes the CUSD community by
11 contributing to secondary traumatic stress and burnout among teachers and school
12 staff. “[S]chool personnel [are] often on the front line in supporting students
13 experiencing a crisis or trauma on campus or in their local community.”¹⁰⁰
14 Attempting to meet the needs of severely traumatized children, particularly without
15 the training or support necessary to do so, can lead to an emotional state in which
16 even the best and most empathetic teachers are unable to effectively teach. As an
17 immediate result, a classroom that needs a teacher who can provide a trauma-
18 sensitive environment instead has a disconnected and/or emotionally exhausted
19 teacher. In the longer term, unaddressed stress leads to burnout and increased
20 teacher turnover at the school. Turnover further destabilizes the school site and
21 makes it more difficult to address student trauma by disrupting longstanding
22 relationships between students and teachers.

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25 ⁹⁸ *Id.*

26 ⁹⁹ Steven Hydon, Marleen Wong, et al., *Preventing Secondary Traumatic*
27 *Stress in Educators*, 24 *Child and Adolescent Psychiatric Clinics of North America*
28 319, 330 (2015) (hereinafter “Preventing Secondary Traumatic Stress”).

¹⁰⁰ *Id.* at 319.

1 154. Research has demonstrated that teachers working closely with
2 traumatized students may themselves experience compassion fatigue, secondary
3 traumatic stress (or “vicarious trauma”), and burnout.¹⁰¹ Compassion fatigue occurs
4 when a caregiver “unconsciously absorbs the distress, anxiety, fear, and trauma” of
5 someone for whom they are providing care. Secondary traumatic stress, in contrast,
6 “describes the emotional and behavioral symptoms that can result from secondary
7 exposure to a victim’s trauma.”¹⁰² This work-related exposure to the trauma of
8 others can manifest in the same symptoms exhibited by those who endured the
9 underlying trauma—in this case the student—including physical distress, fatigue,
10 difficulty sleeping, detachment, numbness, despair, depression, anxiety, increased
11 irritability, intrusive thoughts, social withdrawal, and diminished concentration.¹⁰³

12 155. Working in an emotionally demanding situation such as leading a
13 classroom of traumatized students without sufficient support or training can lead to
14 burnout, a “state of physical, emotional and mental exhaustion.”¹⁰⁴ Burnout is
15 characterized by feelings of cynicism, exhaustion, hopelessness, and difficulties in
16 dealing with work or doing one’s job effectively.¹⁰⁵ As a result, even dedicated
17 teachers may be less likely to show up to school. For example, over half of the
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20 ¹⁰¹ *Id.* at 324.

21 ¹⁰² *Id.* at 321.

22 ¹⁰³ *Id.* at 342; *see also* Bruce D. Perry, *The Cost of Caring: Secondary*
23 *Traumatic Stress and the Impact of Working with High-Risk Children and Families*,
24 The Child Trauma Academy, at 2, 10, 14 (2014) (hereinafter “The Cost of Caring”),
25 *available at* [https://childtrauma.org/wp-content/uploads/2014/01/Cost_of_Caring_](https://childtrauma.org/wp-content/uploads/2014/01/Cost_of_Caring_Secondary_Traumatic_Stress_Perry_s.pdf)
26 [Secondary_Traumatic_Stress_Perry_s.pdf](https://childtrauma.org/wp-content/uploads/2014/01/Cost_of_Caring_Secondary_Traumatic_Stress_Perry_s.pdf); Joyce Dorado & Vicki Zakrzewski, *How*
27 *to Support Stressed-Out Teachers*, The Greater Good (2013), *available at*
28 greatergood.berkeley.edu/article/item/how_to_support_stressed_out_teachers.

27 ¹⁰⁴ *The Cost of Caring*, *supra* note 103 at 10.

28 ¹⁰⁵ *Id.* at 22; *Preventing Secondary Traumatic Stress*, *supra* note 99.

1 teachers in CUSD missed more than their ten allotted days for personal illness or
2 injury in 2013.

3 156. As a consequence of Defendants' failure to provide teachers with the
4 support, resources, and training to address the high concentration of CUSD students
5 who have experienced trauma, Plaintiff CUSD teachers report experiencing burnout
6 and secondary traumatic stress:

- 7 • Plaintiff Rodney Curry, who has taught at Dominguez High School for nineteen
8 years and attended Dominguez High School himself, has come close to leaving
9 the teaching profession on multiple occasions when he felt that he could not
10 endure losing another student.
- 11 • Plaintiff Armando Castro II has missed more days following the dissolution of
12 support services for students at Cesar Chavez Continuation School due to the
13 stress of unaddressed student trauma.
- 14 • Plaintiff Maureen McCoy has experienced significant health problems and was
15 placed on disability leave by her doctor as a result of her attempts to meet the
16 needs of CUSD students who have experienced trauma without the training,
17 resources, or support to do so. This stress and lack of support has also led to
18 Plaintiff McCoy's need to take sick days on several occasions. She says,
19 "Sometimes, the anxiety is so great as I'm about to turn the corner to get to
20 school, that I have to turn back, get to a part of the city away from the school
21 where I feel safe, and call a sub for the day, because I just can't face it."

22 157. The teacher and administrative turnover that can result from
23 unaddressed burnout and secondary traumatic stress exacerbates the complex trauma
24 experienced by the students by creating an unstable, unpredictable, and frequently
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1 hostile environment.¹⁰⁶ In turn, the school not only fails to address trauma-related
2 educational interference, but creates and maintains an environment that intensifies it.

3 **Whole School Trauma-Sensitive Practices are Effective and Necessary to**
4 **Accommodate Students Affected by Complex Trauma.**

5 158. If a student uses a wheelchair, the student’s school must reasonably
6 accommodate the student’s disability by installing ramps on and throughout the
7 school grounds in order for that student to have access to the full benefits of the
8 school. The impact of trauma is no less debilitating to the performance of daily
9 educational activities, and must also be accommodated. Without adjustments to the
10 school environment, a traumatized student most typically has no less difficult time
11 accessing education as a wheelchair user would at a school without an access ramp.

12 159. Fortunately, schools can effectively accommodate students affected by
13 childhood trauma by implementing whole school trauma-sensitive practices.
14 Schools and districts that have implemented such practices have demonstrated
15 impressive results, including that trauma-impacted children who received trauma
16 intervention support in school receive higher grades and have fewer struggles with
17 behavior and concentration than traumatized children who do not.¹⁰⁷ Studies have
18 indicated that the introduction of neurological repair methods, such as mindfulness
19 training, as well as proper education, emotional, and practical support can mitigate
20

21 ¹⁰⁶ *Maltreatment, supra* note 44, at 3 (“It is paramount that we provide
22 environments which are relationally enriched, safe, predictable, and nurturing.
23 Failing this, our conventional therapies are doomed to be ineffective.”); *How*
“States” Become “Traits,” supra note 9, at 271, 291.

24 ¹⁰⁷ *Effects on School Outcomes, supra* note 74, at 6-7; *UCSF HEARTS*
25 *Program: Healthy Environments and Response to Trauma in Schools*, University of
26 California, San Francisco, http://coe.ucsf.edu/coe/spotlight/ucsf_hearts.html (last
27 visited May 17, 2015); Jane Ellen Stevens, *San Francisco’s El Dorado Elementary*
28 *uses trauma-informed & restorative practices; suspensions drop 89%*, ACES Too
High News, (Jan. 28, 2014), <http://acestoohigh.com/2014/01/28/hearts-el-dorado-elementary/>.

1 the consequences of ACEs even when children continue to experience them.¹⁰⁸
2 Such methods are being implemented in numerous school settings across the
3 country.¹⁰⁹

4 160. In a school setting in which a significant number of students are
5 trauma-impacted, modification of the whole school environment is not only an
6 effective means to address complex trauma experienced by students, but it is in fact
7 essential in order to meaningfully accommodate the effects of trauma.

8 **A. Characteristics of a Trauma-Sensitive School**

9 161. Education and mental health professionals have developed and
10 implemented whole school approaches that effectively deliver trauma-sensitive
11 practices in schools. In order to reasonably accommodate impairments resulting
12 from students like plaintiffs in this case, school districts must implement an
13 approach that creates a foundational infrastructure that provides a level of mental
14 health support appropriate to meet student needs. For schools like CUSD's, for
15 example, which serve substantial numbers of students exposed to complex trauma,
16 experts have developed schoolwide approaches that meet a high level of impairment
17 to learning.

18 162. While these approaches vary somewhat in particulars, experts agree
19 that such trauma interventions effectively accommodate the disabling effects of
20 trauma on learning in school by incorporation of the following core elements: (1)
21 training and ongoing coaching of educators to recognize, understand, and
22 proactively intervene to address the effects of complex trauma; (2) development of
23 restorative practices to build healthy relationships, resolve conflicts peacefully, and
24 avoid re-traumatizing students through the use of punitive discipline; and (3)
25 consistent mental health support to appropriately meet diverse student needs.

27 ¹⁰⁸ *Adverse Childhood Experiences, supra* note 4, at 2112.

28 ¹⁰⁹ *Id.*

1 **1. Trauma-Sensitive Training for All Staff**

2 163. The core of a trauma-sensitive school is training and ongoing
3 consultation and coaching for all adult staff including teachers, principals,
4 counselors, and others to enable educators to (1) understand and respond
5 appropriately to students who have been impacted by trauma; (2) create a safe,
6 predictable, and bias-free school environment to establish conditions under which
7 students are able to learn; (3) deliver proven trauma interventions such as building
8 students' self-regulation and social-emotional learning skills. Trauma-sensitive
9 training must inform all interactions between students and adults at the school site.
10 It is essential that appropriate training take place on a systematic and ongoing basis,
11 as part of a regime of consistent training, coaching, and consultation and that all
12 staff be involved, beginning with a committed and engaged leadership.

13 164. **Recognizing and Understanding Complex Trauma:** At the outset,
14 training teaches educators to understand the effects of trauma, including how it
15 affects children, adults, learning, relationships, and organizations. Such training
16 prevents the school from being a space that exacerbates and re-traumatizes students
17 and seeks to prevent and reduce the effects of trauma on the classroom in the first
18 place.

19 165. School personnel must possess the knowledge and skills to recognize
20 when and how trauma may be affecting students in the classroom and to respond
21 appropriately and productively to the actions of students who are affected by
22 trauma. For example, a student who is triggered by a trauma reminder in the
23 classroom may enter a hyperaroused, fight-or-flight state and react with
24 hyperactivity, aggression, or impulsiveness. It is essential that teachers recognize
25 this behavior as a fear response. This enables a response that provides safety, assists
26 in self-regulation, and promotes healing, rather than escalating the situation in ways
27 that fracture relationships and create more impediments to learning. In addition to
28 responding appropriately to trauma-impacted students in moments of high stress,

1 enhanced understanding of trauma and its effects allows teachers to avoid trauma
2 triggers in the first place. As another example, without appropriate training, a well-
3 meaning teacher may not realize that simply assigning a particular student to a seat
4 that places her back facing the door is causing the student to feel insecure and
5 unsafe, prompting a reaction of nervousness, agitation, or avoidance of class
6 altogether.

7 166. It is also essential for staff to receive training to understand the ways in
8 which working with students who have experienced profound trauma affects their
9 own social-emotional well-being and mental health, and to learn healthy strategies
10 for coping with that stress. By way of example only, as a result of the “growing
11 recognition of the importance of addressing the stress that teachers and other school
12 staff may experience as a result of their secondary exposure to traumatic events,” the
13 U.S. Department of Education has developed a comprehensive training, drawing on
14 the academic literature concerning secondary traumatic stress.¹¹⁰ The training,
15 which aims “to help school faculty and staff recognize, understand, and orient
16 themselves to the concepts of compassion fatigue, secondary trauma, and
17 resiliency,” focuses on peer connectivity, self-care, and recovery.¹¹¹

18 167. **Create a Safe, Positive, and Predictable School Environment:**
19 Students affected by complex trauma require a safe, positive, predictable, and bias
20 free environment if they are to meaningfully access an education. Unpredictability
21 itself is a trigger for children who have experienced trauma, frequently pushing
22 them into a hyperaroused state and creating conditions under which learning is
23 nearly impossible. While stability and routine have benefits for all children, in
24 classrooms of highly trauma-impacted children, it is essential to establish very
25 predictable practices in order to create conditions of learning readiness.

27 ¹¹⁰ *Preventing Secondary Traumatic Stress, supra* note 99, at 320, 325.

28 ¹¹¹ *Id.* at 325, 326-330.

1 168. One research-based methodology for creating such an environment is
2 known as School-Wide Positive Behavior Interventions and Supports (SWPBIS).
3 When implemented in a culturally responsive manner, schools implementing this
4 whole-school approach report greater safety, a more positive and respectful school
5 environment, reductions in the use of punitive discipline, and improvements in
6 academic achievement, attendance, and teacher stability and satisfaction.

7 169. **Implement Proven Trauma Interventions to Build Resilience:** With
8 appropriate training, schools can also proactively help students build resilience to
9 process trauma in a healthy, caring, and supportive environment. Many of these
10 practices are based on evidence-based components of trauma intervention that can
11 be implemented in the classroom and have been shown to reduce the effects of
12 trauma in children.

13 170. For example, teachers can learn how to help students acquire and apply
14 the social-emotional learning skills necessary to recognize and manage one's own
15 emotions, make responsible decisions, set and achieve goals, establish positive,
16 respectful relationships, and handle stressful situations and control impulses. Social
17 and emotional learning programs have been proven to reduce classroom behavior
18 problems and emotional distress such as depression, stress, and social withdrawal.¹¹²
19 As part of trauma-sensitive training, teachers learn how to actively model, teacher,
20 and reinforce these skills in class and school instruction.

21 2. **Restorative Practices**

22 171. When trauma-related incidents or conflicts do escalate, trauma-
23 sensitive schools must respond with restorative practices designed to build healthy
24 relationships and resolve conflicts peacefully, instead of subjecting trauma-impacted
25 students to counterproductive punitive discipline. Restorative practices bring
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27 ¹¹² Joseph A. Durlak, et al., *The Impact of Enhancing Students' Social and*
28 *Emotional Learning: A Meta-Analysis of School-Based Universal Interventions*, 82
Child Development 405 (2011).

1 students and staff together to build relationships, trust each other, share experiences,
2 and work through conflicts. Restorative practices take incidents that might
3 otherwise result in punishment and create opportunities for students to become
4 aware of the impact of their behavior, understand the obligation to take
5 responsibility for their actions, and take steps toward making things right and
6 repairing harm to relationships. They have been recognized as beneficial by
7 Congress and the California state legislature, and have been adopted in a number of
8 school districts, including the Oakland, San Francisco, and Vallejo City School
9 Districts.

10 172. Restorative practices reduce the number and intensity of fights and
11 physical altercations, reduce classroom disruptions, drastically reduce the number of
12 students suspended and expelled, can help eliminate disproportionate discipline for
13 students of color and other groups like foster youth, lead to higher academic
14 performance and attendance, provide a greater sense of safety in the school, lead to
15 healthier relationships among and between students and adults, and facilitate
16 positive communication.¹¹³

17 173. A typical restorative justice approach operates at three levels and is
18 integrated into a school's system of staff training and mental health support: (1)
19 school-wide practices to establish a safe and supportive campus; (2) practices to
20 address conflict; and (3) intense intervention to help students in the school
21 population that are in crisis.

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24 ¹¹³ E.g., Sonia Jain et al., *Restorative Justice in Oakland Schools:
25 Implementation and Impacts*, Oakland Unified School District (Sept. 2014), [http://www.ousd.k12.ca.us/cms/lib07/CA01001176/Centricity/Domain/134/OUSTRJ%20](http://www.ousd.k12.ca.us/cms/lib07/CA01001176/Centricity/Domain/134/OUSTRJ%20Report%20revised%20Final.pdf)
26 [Report%20revised%20Final.pdf](http://www.ousd.k12.ca.us/cms/lib07/CA01001176/Centricity/Domain/134/OUSTRJ%20Report%20revised%20Final.pdf); Myriam L. Baker, *DPS Restorative Justice*
27 *Project: Year Three: Year End Report 2008-2009*, Outcomes Inc. (Sept. 2009),
28 *available at* [http://www.rjcolorado.org/_literature_55812/Denver_Public_Schools_](http://www.rjcolorado.org/_literature_55812/Denver_Public_Schools_Restorative_Justice_Program_Final_Report_2008-2009)
[Restorative_Justice_Program_Final_Report_2008-2009](http://www.rjcolorado.org/_literature_55812/Denver_Public_Schools_Restorative_Justice_Program_Final_Report_2008-2009).

1 174. As discussed above in Paragraphs 163-170, at the school-wide level,
2 schools must implement systematic and ongoing practices that create a safe and
3 predictable school environment and build co-regulation and social-emotional skills.
4 These school-wide practices facilitate communication, build relationships, and
5 bolster resilience. They also allow personnel to identify students who may need
6 more assistance in managing difficulties and preventing violence and conflict.

7 175. Once school-wide prevention practices are in place, trauma-impacted
8 students experiencing difficulties must be addressed through methods that do not
9 punish or exclude students from the learning environment, actions which the
10 American Academy of Pediatrics Association has found re-traumatize students.¹¹⁴
11 Students learn new ways to address conflict, which reduces the impact of trauma for
12 students as they experience a stronger and safer school environment. If there are
13 additional behavioral issues, they must be addressed with an approach that does not
14 further penalize or stigmatize a child, but rather helps them to identify and learn
15 different ways of behaving when triggered through trauma.

16 176. Certain students will be more profoundly affected by trauma than
17 others. At the third level, intense intervention focuses on rebuilding relationships,
18 repairing harm, and reintegrating a student into the school community. With the
19 assistance of restorative practice counselors, intense intervention involves formal
20

21 ¹¹⁴ American Academy of Pediatrics Committee on School Health, *Out-of-*
22 *School Suspension and Expulsion*, 112 Pediatrics 1206 (2003), available at [http://](http://pediatrics.aappublications.org/content/112/5/1206.full.pdf+html?sid=b76baf23-07bf-4cdf-8fa010587add04f3)
23 [pediatrics.aappublications.org/content/112/5/1206.full.pdf+html?sid=b76baf23-](http://pediatrics.aappublications.org/content/112/5/1206.full.pdf+html?sid=b76baf23-07bf-4cdf-8fa010587add04f3)
24 [07bf-4cdf-8fa010587add04f3](http://pediatrics.aappublications.org/content/112/5/1206.full.pdf+html?sid=b76baf23-07bf-4cdf-8fa010587add04f3). Furthermore, the American Psychological
25 Association has determined that out-of-school suspension is not only ineffective, but
26 for some students, can actually reinforce misbehavior, has negative psychological
27 impacts on students groups who are already vulnerable due to poverty and loss.
28 Am. Psychological Association Zero Tolerance Task Force, *Are Zero Tolerance*
Policies Effective in the Schools? An Evidentiary Review and Recommendations, 63
Am. Psychologist 852 (2008), available at [http://www.apa.org/pubs/info/reports/](http://www.apa.org/pubs/info/reports/zero-tolerance.pdf)
[zero-tolerance.pdf](http://www.apa.org/pubs/info/reports/zero-tolerance.pdf).

1 meetings with all involved to enable the resolutions of the students’ problems and
2 repair any harm to the school community.

3 **3. Mental Health Support**

4 177. For some trauma-impacted students, classrooms that are managed in
5 accordance with trauma-sensitive techniques and implementation of restorative
6 practices will be sufficient to accommodate their needs. Other students who have
7 experienced severe trauma will require more intensive mental health support, either
8 in the form of one-on-one mental health counseling or group therapy.

9 178. With training, school faculty can help reduce potentially severe
10 psychological effects that impede learning by being observant of children who
11 might be at greater risk and getting them help immediately. But those teachers and
12 staff must have the assistance of properly-trained mental health service providers.
13 Appropriate mental health support, whether in the form of counselors, social
14 workers, or psychologists, must be available at the school site to help teachers and
15 administrators identify children in need of more intensive support.

16 179. Mental health experts have developed a number of empirically
17 supported, evidence-based treatments that effectively address the consequences of
18 complex trauma in children. Several of these treatments have been specifically
19 designed to be delivered in schools. For example, the Cognitive Behavioral
20 Intervention for Trauma in Schools (CBITS) program—which prescribes a series of
21 group and individual therapy sessions in addition to parent education and teacher
22 training—has been shown to increase academic performance and decrease behavior
23 problems,¹¹⁵ particularly when intervention was provided promptly after a discrete
24 traumatic event.¹¹⁶

27 ¹¹⁵ *Mental Health Intervention, supra* note 13.

28 ¹¹⁶ *Effects on School Outcomes, supra* note 74.

1 180. Mental health professionals must be available on site to implement
2 appropriate interventions. Students who need support can be provided with the
3 necessary counseling on-site or be immediately referred to appropriate referral
4 resources for more intensive trauma-informed therapeutic interventions. At a
5 minimum, at least one mental health professional must be on-site and available at all
6 times so that the school may be responsive to mental health emergencies. Similarly,
7 mental health support should be available to assist educators with the secondary
8 traumatic stress and burnout they experience.

9 181. In addition, schools must be staffed with other supportive personnel
10 such as attendance counselors with the capacity to investigate the causes of student
11 absences and the reasons behind them. This enables trauma-related absenteeism to
12 be productively addressed by the school, rather than either being ignored or treated
13 punitively.

14 **B. Defendants Have Failed to Reasonably Accommodate Students Affected**
15 **by Complex Trauma in CUSD Schools.**

16 182. Trauma-sensitive procedures reasonably can be implemented by
17 Defendants to address the significant impediments to education caused by trauma
18 experienced by Student Plaintiffs and class members. Yet, despite the fact that
19 Defendants are aware or reasonably should be aware that a very high proportion of
20 its students are affected by trauma, Defendants have taken grossly inadequate
21 measures to accommodate these students. Not only have Defendants failed to
22 accommodate students affected by trauma, but Defendants' failure to implement
23 trauma-sensitive practices has affirmatively exacerbated, contributed to, and
24 generated student trauma.

25 183. **Lack of Training:** CUSD currently provides no training to staff to
26 enable them to recognize and respond appropriately to students who have been the
27 victims of trauma.

28

1 184. Without such training, CUSD cannot and does not appropriately
2 identify trauma-impacted students in need of more intensive support. Likewise,
3 CUSD does not notify parents of its obligation to identify and provide
4 accommodations to students whose learning may be impaired due to the experience
5 of trauma.

6 185. Lack of appropriate training in trauma-sensitive practices for staff
7 affirmatively exacerbates and contributes to student trauma in CUSD. Negative and
8 frightening interactions with school police and school security officers who are not
9 trained in trauma-sensitive techniques traumatize not only the student or students
10 directly involved in the incidents, but create a fearful and tense environment that
11 degrades the supportive culture necessary for learning.

12 186. **Insufficient Mental Health Support:** The number of mental health
13 professionals in CUSD is grossly insufficient to address student mental health needs
14 related to complex trauma in the district.

15 187. CUSD has also failed to provide mental health intervention in the
16 aftermath of severely traumatic events that have affected the school community.
17 For example, no counseling—or any other intervention—was made available to
18 assist students and teachers processing grief and trauma after Dominguez High
19 School student Lontrell Turner was killed last December, or after a Dominguez
20 High School student was shot last March.

21 188. In theory, CUSD has a referral process to connect students in need of
22 mental health counseling to outside, non-profit organizations to receive mental
23 health counseling. However, this process is wholly inadequate and assists only a
24 tiny fraction of students who would benefit from such counseling. Very few
25 students actually receive these services for a number of reasons. CUSD teachers
26 lack the training to appropriately recognize students who would benefit from more
27 intensive mental health support, and many teachers are not even aware that this
28 referral process exists.

1 189. There is also a severe lack of staff to support the other needs of CUSD
2 students related to trauma. For example, though CUSD schools have notoriously
3 low attendance rates, CUSD lacks attendance counselors to identify the causes of
4 student absences and assist students in returning to school.

5 190. **Counterproductive Exclusionary Discipline:** CUSD schools lack
6 appropriate trauma-sensitive practices, with the most obvious consequence being
7 that CUSD schools continue to suspend and expel students in significant numbers
8 for conduct related to the trauma they have endured, rather than addressing the
9 source of that trauma. During the 2013-2014 school year, CUSD reported 1,243
10 suspensions and 7 expulsions. This data does not include all of the involuntary
11 transfers, which the school district is issuing to students experiencing the effects of
12 complex trauma.

13 191. Plaintiff Phillip W., for example, has been involuntarily removed from
14 two of CUSD's mainstream high schools, and is currently in expulsion proceedings
15 from the third. Plaintiff Virgil W. has been involuntarily removed from a CUSD
16 middle school and a CUSD high school because his unaddressed anger related to
17 trauma caused him to enter into physical altercations with other students. Plaintiff
18 Peter P. has been subject to involuntary removal from at least six CUSD schools
19 during his academic career.

20 **CAUSES OF ACTION**

21 **FIRST CLAIM FOR RELIEF**

22 **(Violation of Section 504 of the Rehabilitation Act)**

23 192. Plaintiffs hereby re-allege and incorporate by reference Paragraphs 1
24 through 191 as if fully set forth herein.

25 193. The effects of complex trauma cause an impairment that limits a
26 student's ability to learn, read, concentrate, think, communicate, and generally
27 receive an education and have the opportunity to succeed in school.
28

1 194. Each of the student class members suffers from complex trauma and its
2 effects.

3 195. CUSD receives federal funding.

4 196. As residents of the area served by CUSD and children between the ages
5 of six and eighteen and are eligible for a free public education, such an education is
6 compulsory. The student class members are therefore eligible for a free public
7 education.

8 197. Solely by reason of their exposure to complex trauma, each of the
9 student class members has been denied meaningful access to an adequate public
10 education by Defendants. Each of the class members has also been denied the
11 benefits of an adequate public education by Defendants. Complex trauma impairs a
12 student's ability to learn and receive an education in the classroom when reasonable
13 accommodations have not been made for students who have been subjected to
14 complex trauma.

15 198. There are effective reasonable accommodations that Defendants could
16 implement that could create a trauma-sensitive environment that would allow the
17 class members to learn, read, concentrate, think, communicate, and enjoy the benefit
18 of public education. Some examples include providing training, coaching, and
19 consultation for teachers, administrators, and all school staff on effective strategies
20 for interacting with class members in a positive and trauma-sensitive way,
21 establishing restorative practices to prevent, address, and heal after conflict, and
22 making mental health professionals available who could assist in diagnosis of
23 trauma and implementation of interventions.

24 199. Defendants have failed to implement any reasonable accommodations
25 that would allow the student class members to enjoy the benefits of the free public
26 education offered by CUSD.

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1 200. Because of this failure, the Student Plaintiffs and class members have
2 been denied the benefits of an adequate public education solely on the basis of their
3 disability.

4 **SECOND CLAIM FOR RELIEF**
5 **(Violation of Department of Education Regulations regarding “Location and**
6 **Notification,” 34 C.F.R. § 104.32)**

7 201. Plaintiffs hereby re-allege and incorporate by reference Paragraphs 1
8 through 200 as if fully set forth herein.

9 202. **34 C.F.R. § 104.32(a) (“Location”)**: Defendants have failed to
10 identify and locate students within CUSD who are not properly receiving an
11 adequate public education as a result of complex trauma and its effects.

12 203. Defendants have failed to locate and identify the student class members
13 as individuals who are not properly receiving an adequate public education.

14 204. CUSD has no policies or procedures in place to identify and locate
15 students who are not properly receiving an adequate public education on account of
16 complex trauma and its effects.

17 205. **34 C.F.R. § 104.32(b) (“Notification”)**: CUSD does not take
18 appropriate steps to contact the parents or guardian of students who are not
19 receiving an adequate public education as result of their trauma to notify them of
20 their duty to identify students who might require a reasonable accommodation.

21 206. Defendants have failed to take appropriate steps to contact the parents
22 or guardians of the class members to notify them of their duty to identify students
23 who might require a reasonable accommodation.

24 207. Because Defendants have failed to reach out to the parents or guardians
25 of the student class members, CUSD has missed opportunities to partner with
26 families and the community to address the needs of the trauma-impacted students
27 and create a school environment that would allow student class members to receive
28 an adequate education.

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THIRD CLAIM FOR RELIEF

(Violation of Department of Education Regulations regarding “Procedural Safeguards,” 34 C.F.R. § 104.36)

208. Plaintiffs hereby re-allege and incorporate by reference Paragraphs 1 through 207 as if fully set forth herein.

209. Defendants have not established and implemented a system of procedural safeguards with respect to actions regarding identification, evaluation, and educational placement of students who are not receiving an adequate public education as result of their trauma.

210. Defendants have failed to establish a system of procedural safeguards for class members that includes notice, an opportunity for parents or guardians to examine relevant records, an impartial hearing, and a review procedure. Defendants’ failure to establish such a system has resulted in negative consequences for class members who were entitled to the protection of procedural safeguards, including suspension, involuntary transfer, and expulsion.

FOURTH CLAIM FOR RELIEF

(Violation of the Department of Education Regulations regarding “Free Appropriate Public Education,” 34 C.F.R. § 104.33)

211. Plaintiffs hereby re-allege and incorporate by reference Paragraphs 1 through 210 as if fully set forth herein.

212. Defendants have denied class members meaningful access to a public education because the education CUSD provides freely to the public is not designed to meet the needs of students who have been subjected to complex trauma.

213. Though the school’s procedures, policies, and actions could be modified using a framework similar to many of the more trauma-sensitive schools around the country, and though such a modification would allow the class members to receive a more adequate education, Defendants have not implemented any such trauma-sensitive modifications.

1 214. As result of Defendants’ policies, the student class members do not
2 receive a free appropriate public education.

3 **FIFTH CLAIM FOR RELIEF**

4 **(Violation of the Americans with Disabilities Act of 1990)**

5 215. Plaintiffs hereby re-allege and incorporate by reference Paragraphs 1
6 through 214 as if fully set forth herein.

7 216. The effects of complex trauma cause an impairment that limits a
8 student’s ability to learn, read, concentrate, think, communicate, and generally
9 receive an education and have the opportunity to succeed in school.

10 217. Each of the student class members suffers from complex trauma and its
11 effects.

12 218. CUSD is a public entity under Title II of the Americans with
13 Disabilities Act.

14 219. As residents of the area served by CUSD and children between the ages
15 of six and eighteen and are eligible for a free public education, such an education is
16 compulsory. The class members are therefore eligible for a free public education.

17 220. Solely by reason of their exposure to complex trauma, each of the
18 student class members has been denied meaningful access to an adequate public
19 education by Defendants. Each of the class members has also been denied the
20 benefits of an adequate public education by Defendants. Complex trauma impairs a
21 student’s ability to learn and receive an education in the classroom reasonable
22 accommodations have not been made for students who have been subjected to
23 complex trauma.

24 221. There are effective reasonable accommodations that Defendants could
25 implement that could create a trauma-sensitive environment that would allow the
26 class members to learn, read, concentrate, think, communicate, and enjoy the benefit
27 of public education. Some examples include providing training, coaching, and
28 consultation for teachers, administrators, and all school staff on effective strategies

1 for interacting with class members in a positive and trauma-sensitive way,
2 establishing restorative practices to prevent, address, and heal after conflict, and
3 making mental health professionals available who could assist in diagnosis of
4 trauma and implementation of interventions.

5 222. Defendants have failed to implement any reasonable accommodations
6 that would allow the student class members to enjoy the benefits of the free public
7 education offered by CUSD.

8 223. Because of this failure, the class members have been denied the
9 benefits of an adequate public education solely on the basis of their disability.

10 **REQUEST FOR RELIEF**

11 WHEREFORE, Plaintiffs request the following relief:

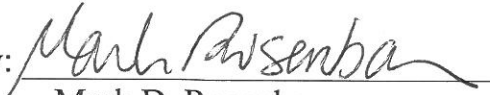
- 12 1. A determination by this Court that this action may be maintained as a class
13 action.
- 14 2. Injunctive relief requiring Defendants to implement reasonable
15 accommodations in the form of trauma-sensitive policies and procedures that
16 will allow the student class members an opportunity to receive an adequate
17 public education, including, but not limited to:
 - 18 a. Comprehensive and ongoing training, coaching, and consultation for all
19 adult staff—including teachers, administrators, counselors, and other
20 staff—regarding trauma-informed methods and strategies for educating
21 class members and fostering a healthy, supportive environment.
 - 22 b. Implementation of restorative practices as described in this Complaint
23 to prevent, address, and heal after conflict.
 - 24 c. Employment of appropriately trained counselors who can assist with
25 identification of students who have mental health difficulties after
26 being subjected to trauma.
- 27 3. A declaration that Defendants, through their actions and omissions and its
28 policies and procedures complained of violate:

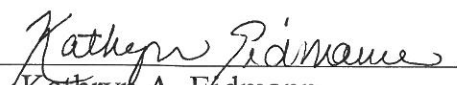
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- a. Section 504 of the Rehabilitation Act.
 - b. Department of Education Regulations regarding “Location and Notification.” 34 C.F.R. § 104.32.
 - c. Department of Education Regulations regarding “Procedural Safeguards.” 34 C.F.R. § 104.36.
 - d. Department of Education Regulations regarding “Free Appropriate Public Education.” 34 C.F.R. § 104.33.
 - e. The Americans with Disabilities Act.
- 4. An award of costs and attorney’s fees and expenses pursuant to 29 U.S.C. § 794a and any other applicable provisions of law.
 - 5. Such other relief as this Court deems just and proper.

DATED: May 18, 2015

Respectfully submitted,

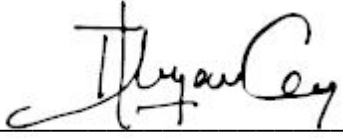
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1 **JURY TRIAL DEMAND**

2 Plaintiffs demand a trial by jury of all issues so triable on the claims alleged
3 herein.

4
5 DATED: May 18, 2015

Respectfully submitted,

6
7 By: 
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