


Professional Development Series on
Childhood Trauma:
Starting With the Basics!


Trauma's Impact & Universal Response
June 27, 2019

Sponsored by
Leaders In Transformational Education (LITE)




Welcome
and
Introductions

WHO IS "IN THE ROOM" TODAY?
ANNE STUDZINSKI
MICHELLE ARNOLD
LITE! Our hosts...




Many
Thanks

*Illinois Childhood Trauma
Coalition, Illinois Collaboration
on Youth, National Child
Traumatic Stress Network,
Child Trends, Dr. Gene Griffin,
Lurie Children's Hospital, Dr.
Bruce Perry, UIC & NU
researchers, & the many youth
& family organizations that
have become trauma
informed!*



AGENDA

- Welcome & Introductions
- Recap on Brain Development
- The Three E's of Trauma
- Universal Response: The Five S's
- Group Activity
- Surveys




Overview of the Series

June 19, 2019
Baby Brains to Adolescent Brains


Today!
Trauma's Impact & Universal Response

June 28, 2019
9-Noon
Taking Care Of Yourself & Others



Take Good Care ...

When you talk about trauma and traumatic events, you never know who is in the room. The information may be disturbing to some people. Please take care of yourself: take deep breaths, feel free to move around, stand up or leave the room.



Tell Us What You Think

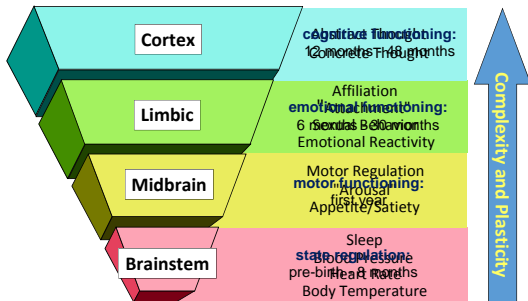
- Share a funny story about what you observed or learned about brains since 6/19
- Websites: NCTSN.org and Look Through Their Eyes.org; other websites?





RECAP: BRAINS

Complexity & Hierarchy of Brain Functioning



Brain Basics – Critical Periods

- For some aspects of brain development, timing is critical.
- Important abilities will be lost or diminished if they don't develop at the right time (e.g. vision, attachment, language)

Childhood experiences impact how the brain develops



IN OTHER WORDS...

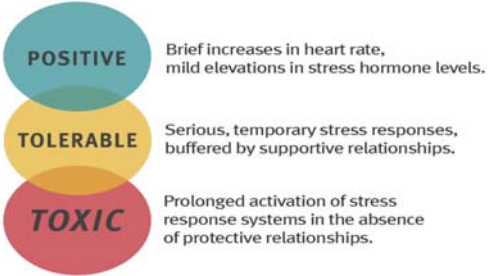


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Values Activity



Kinds of Stress



POSITIVE Brief increases in heart rate, mild elevations in stress hormone levels.

TOLERABLE Serious, temporary stress responses, buffered by supportive relationships.

TOXIC Prolonged activation of stress response systems in the absence of protective relationships.


<https://developingchild.harvard.edu/science/key-concepts/toxic-stress/>

What is Childhood Trauma?

The **experience** of an **event** by a child that is emotionally painful or distressful which often results in lasting mental and physical **effects**.


National Institute of Mental Health

- **Event** – One time or chronic
- **Experience** – whether the event is experienced as scary or threatening
- **Effect** - long-lasting and life altering









Event

- Could be a single event
 - Accident
 - Illness (especially with invasive procedures)
 - Natural Disaster
- Could be repeated or chronic events or repeated exposure



Childhood ACES

In 1998, Felitti and Anda identified 10 Adverse Childhood Experiences (ACES) that may happen to a child before the age of 18, which can also cause childhood trauma.⁵ For a child, ACES include:

 <p>Abuse and neglect. Physical abuse Physical neglect Verbal abuse Emotional neglect Sexual abuse</p>	 <p>A parent who has problems with alcohol or substance abuse.</p>
 <p>Exposure to domestic violence toward a caregiver.</p>	 <p>Family member who has been in jail.</p>
 <p>Family member with mental illness.</p>	 <p>Disappearance of a parent through divorce, death or abandonment.</p>

“Urban” ACES

- Experiencing racism
- Witnessing violence
- Living in an unsafe neighborhood
- Living in foster care
- Experiencing bullying

(Institute for Safe Families. Philadelphia)

Other Traumatic Exposure

- Living in Poverty
- Migration
- Repeated Military Deployments



Experience

- Definition says “emotionally painful or distressful”
- Scary or threatening long afterward
- Age matters – What is threatening for a 3 year old may not be threatening to a 15 year old



Activity

Have the Children You Work With **Experienced** any of these **Events**?

Please share your stories



Effects

Long-lasting and life altering

- Brain is repeatedly exposed to traumatic events.
- Fight, flight, or freeze response is launched on an ongoing basis (amygdala).
- Over time, the brain’s architecture is altered.
- The brain does not return to its original baseline functioning.




“It’s Like You’re on Autopilot and Someone Else is Controlling the Switches.”

Shawn Hornbeck—abducted at age 11, held captive for over 4 years


Epigenetics

- Fast-growing field of study and research looks at the role of experience, environment, nutrition and other external factors in changing gene expression.
- Chemical modifications around the genes turn those genes on or off, over time. The different combinations of genes that are turned on or off is what makes each one of us unique.
- Remember all the growth of baby brains when they are very young? Experiences cause epigenetic adaptations...



Typical Crisis Response

- Negative Event
- Brain Operates at Survival Level
- Stress Hormones Flood the Brain and Body to Deal with the Negative Event
- After Threat, Hormone Levels Return to Normal



Perry-Dominant Response Types

Hyper arousal

- Flight or Fight
- Hyper-vigilant
- Easily Offended
- Over-reactive
- Avoidant

Dissociation

- Freeze/Numb
- Overwhelmed
- Nonresponsive
- Self-Mutilation
- Passing Out



In other words ...



- A child's brain development responds to the child's experiences
- Alarm System as a Survival Mechanism
- Extreme or frequent threats can damage the alarm system
- With trauma, the alarm system is too easily triggered and too slow to shut down



Effects: Trauma and Triggers






After Trauma

- Youth is on Constant Alert
- Youth may over-interpret signs of danger
- Youth overreacts to normal situations



Effects: Back to experience

The Five Senses

-  **Sight** • What was seen?
-  **Hearing** • What was heard?
-  **Smell** • What was smelled?
-  **Taste** • What was tasted?
-  **Touch** • What was felt or touched?

Post Traumatic Stress Disorder (PTSD)

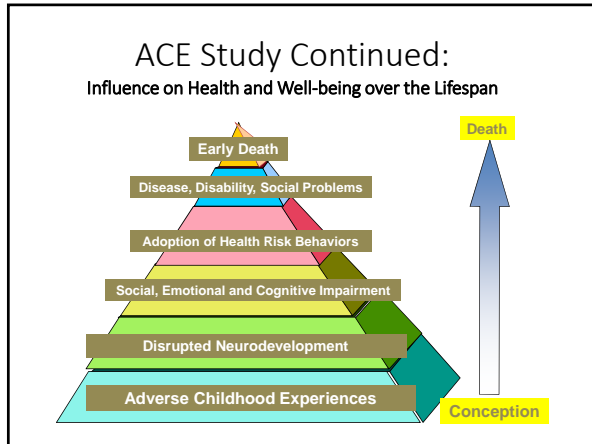
SIMPLE DEFINITION:

Experience of or witness to an event that involves actual or threatened death, injury or threat to physical integrity of self and/or others.

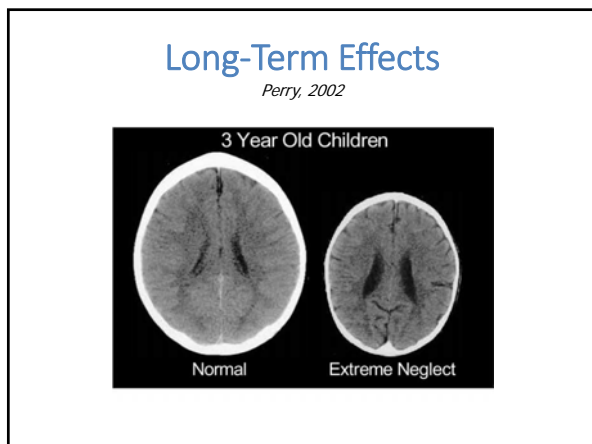
Symptoms may include:
Re-experiencing, Avoidance Arousal & Reactivity Symptoms, Negative Cognitions or Moods

PTSD: Reactions & Observable Behaviors

Symptom	Re-experience-ing	Avoidance	Reactivity-Arousal	Negative Cognitions
How a child may react	Nightmares, Flashbacks,	Decreased interest or activity	Being on guard, feeling out of control, hypervigilant	Persistent & distorted sense of anger, shame, sadness
What you might observe	Fatigue, unable to concentrate	Resistance to do things or go places, withdrawn	Easily upset, startled, or scared; tearful	Moody, flat affect, withdrawn







More About Plasticity


Activity-Dependent Changes

- Events can cause changes in the brain.
- A single, powerful experience can affect our brains for life.
- Repeated smaller experiences can also change the brain.
- Practice (sports, art, studies) - the more we repeat things the stronger the brain connections become


This is why there is always hope that youth can get better with new, positive experiences

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Let's take a break!



A UNIVERSAL RESPONSE TO TRAUMA



A Wise Man Told Us

“Risk Factors Are Not Predictive Factors Because of Protective Factors”

Carl Bell, M.D.



Mediators of Traumatic Stress Responses

Characteristics of the child/youth:

- Subjective experience of the event
- Prior history of exposure to trauma
- Prior psychiatric history
- Coping style
- Strengths & supports
- Family relationships
- Cultural issues
- Gender
- Age

Characteristics of the event and environment:

- Nature & intensity of the event
- Child or family members’ experience of direct harm
- Proximity to event
- Pattern & duration of the event
- Exposure to the event through media & other mechanisms
- Parent’s & other’s reaction to the event
- Level of caregiver & environmental support following the event

**Universal: Do No Harm
The 5 Ss**


1. Create a **Safe** environment
2. Provide **Supportive adult** relationships
3. Model/teach effective **Self Soothing & Self-regulation** and coping strategies
4. Develop **Strengths** and Resilience
5. Encourage and Practice **Self-Care** for providers and caregivers

DRAW YOUR SAFE PLACE!




Create a Safe Environment

- Be predictable: Maintain routines and prepare youth for changes in routine or their schedule.
- Add ritual; promote a positive atmosphere.
- Give real choices, ensure youth understand, and provide consistent rewards and consequences for behavior.
- Maintain professional boundaries. Avoid the false promise of rescuing youth.
- Pay attention to youth and their physical environment/spaces.



Emotional Safety: Attitudes & Beliefs

What helps	What hurts
<ul style="list-style-type: none">✓ Asking questions for the purpose of understanding what harmful events may contribute to current problems: “What happened to you?”✓ Recognizing that mental health, substance use, and physical health symptoms may be a person’s way of coping with trauma.	<ul style="list-style-type: none">• Asking questions that convey the idea that there is something wrong with the person: “What’s wrong with you?”• Regarding a person’s difficulties ONLY as symptoms of a mental health, substance use or medical problem.




Physical Safety of Settings

What helps	What hurts
✓ Spaces that are calming and offer privacy.	• Congested areas that are noisy.
✓ Furniture is clean & comfortable; lighting natural.	• Confusing signage.
✓ Wall coverings, images are culturally sensitive, and convey hopeful, positive messages.	• Uncomfortable furniture or cramped or no seating.
	• Dim lighting; burned out bulbs.
	• Cold non-inviting colors.

Be A Supportive Adult

- Growth is fostered by mutual, authentic relationships.
- Learn youth's strengths & challenges, triggers or reminders of past trauma.
- Collaborate & empower with choices, allow for control but maintain boundaries.
- Be sensitive to changes in tone of voice, rhythm of movement, & notice patterns of activities.
- Teach how to identify safe and supportive connections; Practice!



Being A Supportive Adult

What Helps	What Hurts
✓ Meet them where they're at; no judging.	• Interactions that are humiliating, harsh, impersonal, disrespectful, critical, demanding, judgmental
✓ Express reassurance, acceptance; actively listen; give choices.	
✓ Be patient, calm; protect privacy.	
✓ Remember to use PLEASE and THANK YOU .	

Self Soothing To Self-Regulation

- Use calm, soft voice tones, & a balance of verbal & behavioral responses.
- Breathing techniques or remind them to breath.
- Demonstrate how to relax, breathing techniques; practice mindfulness individually or in a group.
- Introduce safe, positive coping skills, so they have new ways to respond & replace negative coping habits.
- Problem solve using role modeling; practice & listen to them regarding what feels “doable” for them.

DAILY INTEGRATED PRACTICES TO CALM & GROUND CHILDREN

- Yoga
- Abdominal Breathing – Deep Breathing
- Guided Imagery or Visualizations
- Classical Music, Ocean or Nature Sounds
- Progressive Muscle Relaxation (special approaches for younger children)
- Can You include any in a routine?

And these can help the grown-ups, too!

Strengths & Resilience

- Find the strengths – start small, do often, celebrate
- Try to put yourself in their place: what you view as a challenge may be evidence of great strength.
- Use positive statements; reframe negative behavior & language into strengths.
- Each interaction provides another opportunity to increase self-esteem, confidence, feel empowered to heal - plus add new brain pathways!



And the Final “S” is Self Care

- ✓ Children, youth and their families have endless needs; pace yourself!
- ✓ Learn techniques & skills to support positive and effective engagement with children and families.
- ✓ You will have some successes and some challenges, sometimes you won’t know...
- ✓ Caring adults are at risk of “compassion fatigue”


More on Self Care Next Time – Hope to See You Tomorrow!

SCENARIOS

Practice, Practice, Practice


Working in groups, take about 15 minutes and:

- Review the scenario
- Agree on what you would do to answer the question
- Prepared to share your responses with the group (choose a spokesperson!)



Looking Ahead to Self-Care

- As you leave: What would you do if you won the lottery?
- For tomorrow: What would you do if we told you (suddenly) that you had the afternoon off?



Surveys!

And THANK YOU!
