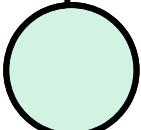
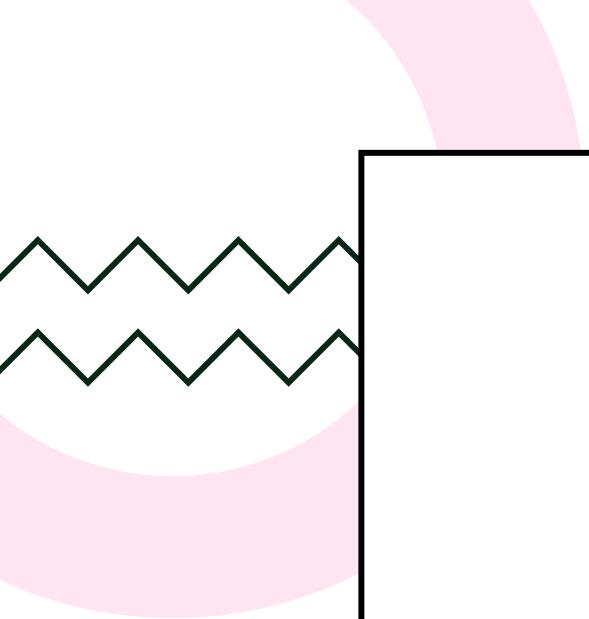


Navigating Trauma: Understanding the Brain and Building Supportive Strategies for Emotional and Behavioral Growth

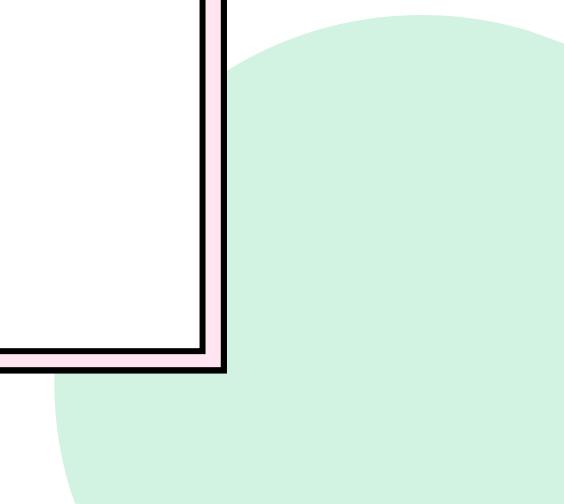
Dr. Ricki L. Moran, DSW, LCSW
Kori Rongey, MSWc

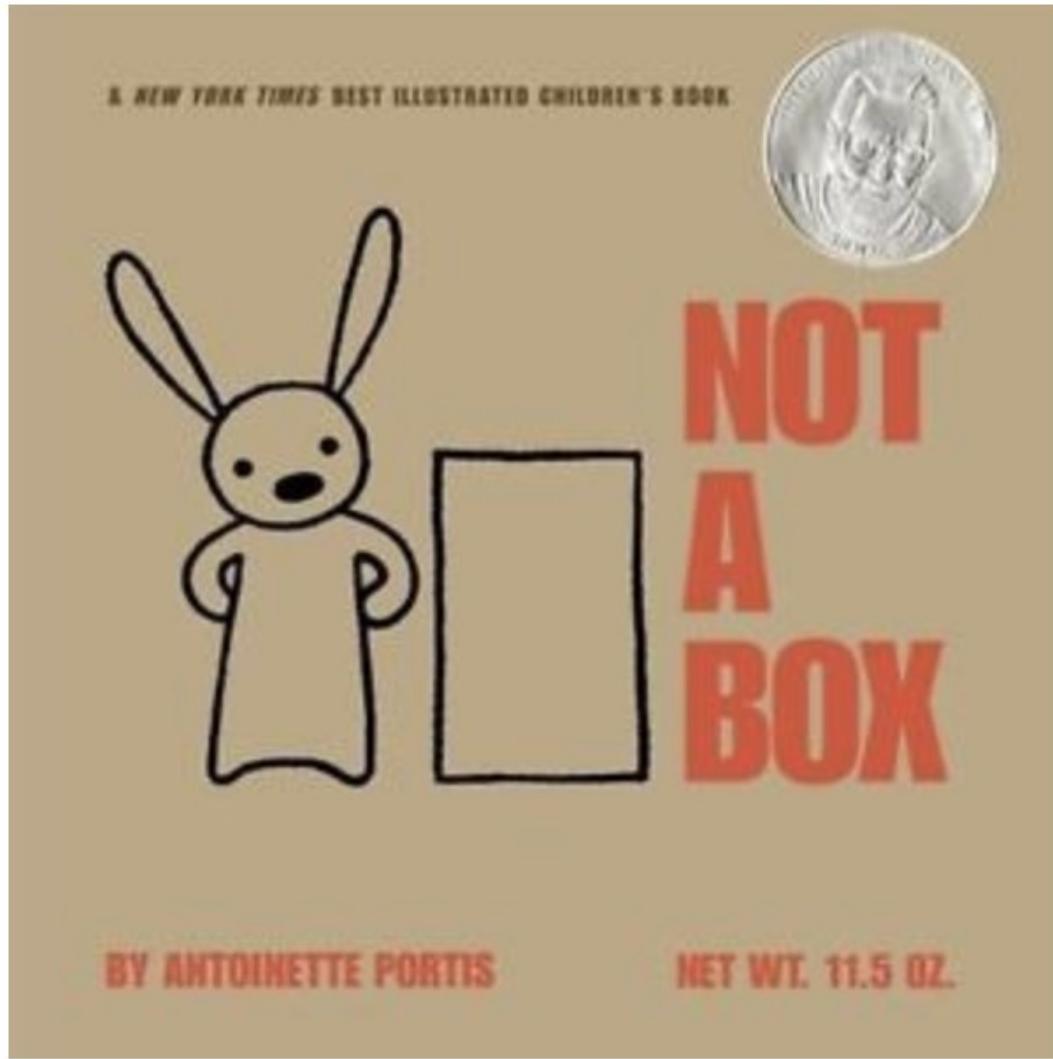




Objectives:

1. Enhance Understanding of Trauma and Its Impact on the Brain
2. Foster Trauma-Informed Practices to Support Emotional Regulation
3. Provide Interventions to Address Disruptive Behaviors







What is trauma

Deeply distressing or disturbing experience – experiencing intense fear, helplessness, or horror

Perceived or actual

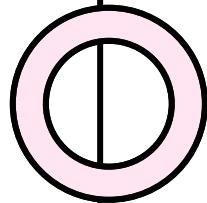
Lasting effects on the individual's physical, social, emotional, or spiritual well-being

Evokes fear

Changes the individual's worldview

Changes the individual's view of oneself





Traumatic events

Grief & loss

Physical, emotional, or sexual abuse

Medical interventions

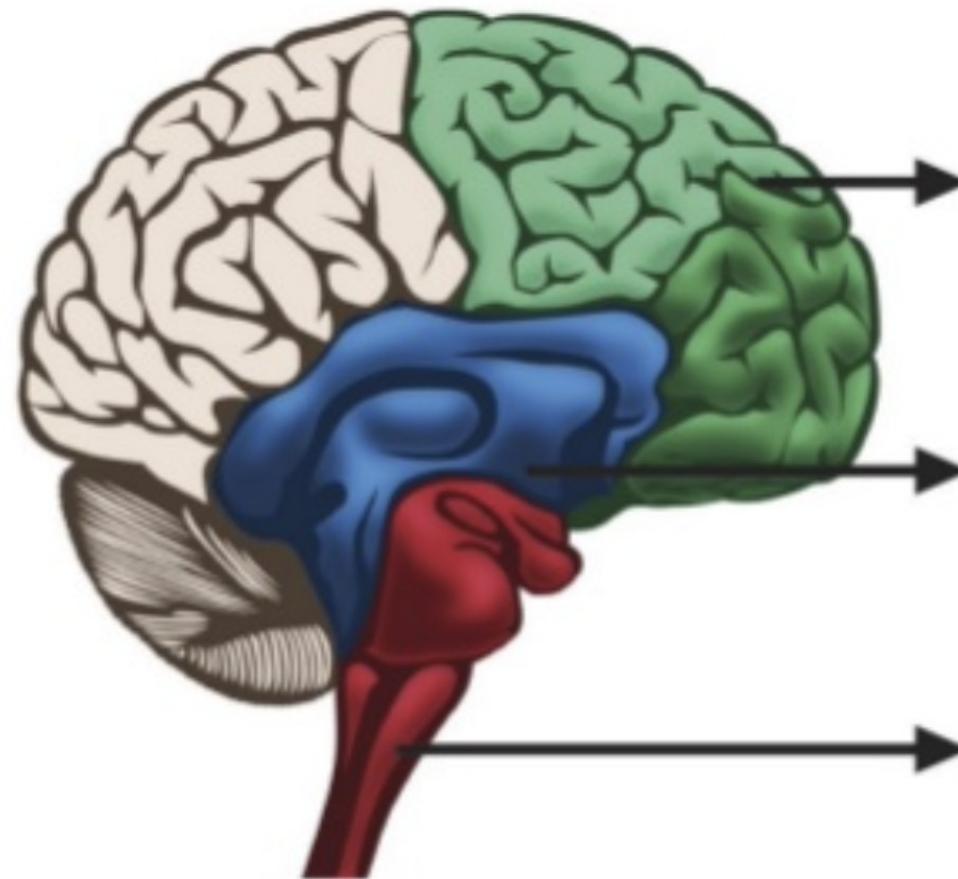
Accidents and natural disasters

War and other forms of violence

Childhood abuse and/or neglect

Witnessing acts of violence

An event that is so overwhelming, we have lost connection to ourselves, to our bodies, to others, or the world around us



Executive
(Prefrontal Cortex):
What can I learn?

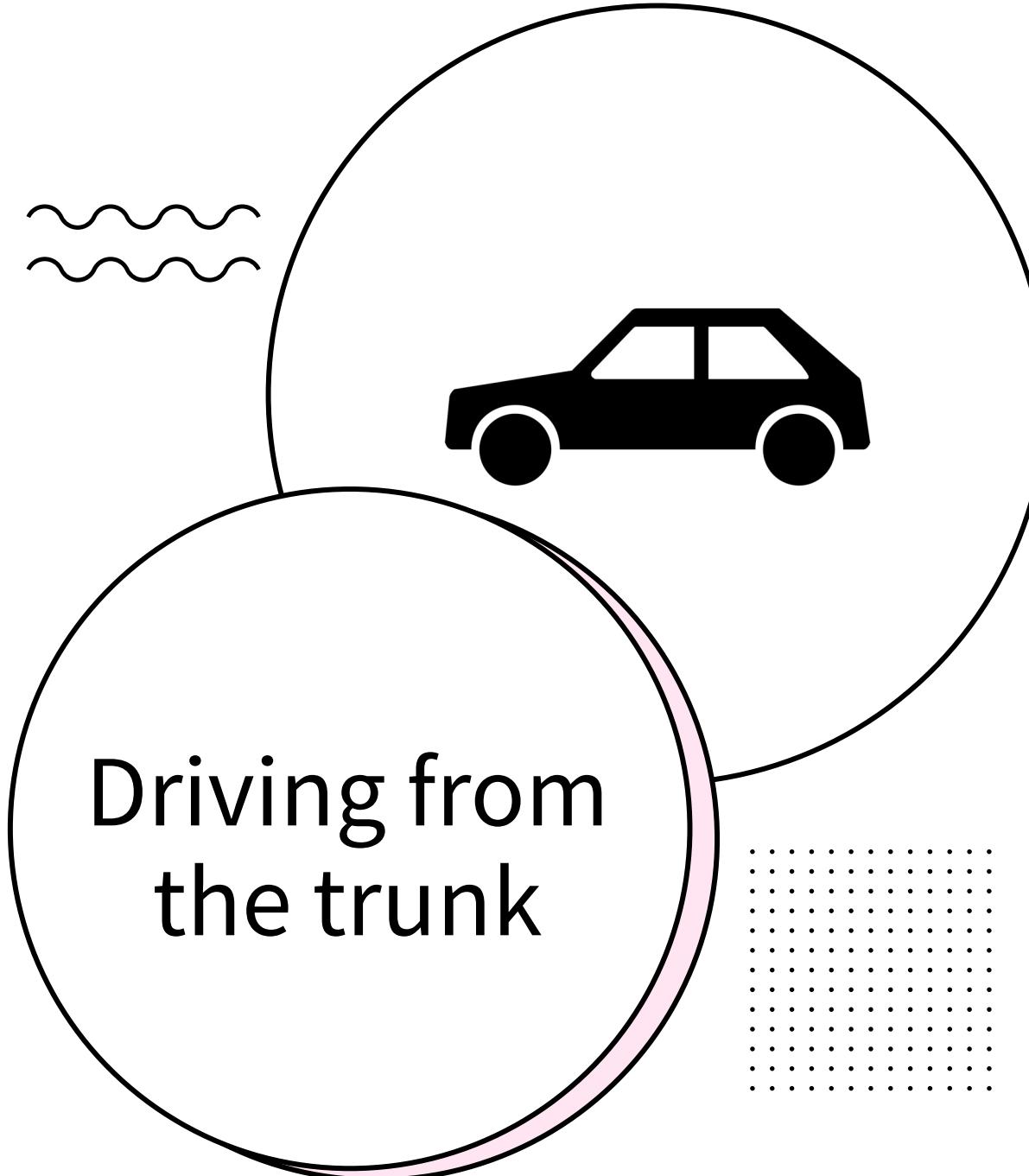


Emotional
(Limbic System):
Am I loved?



Survival
(Brain Stem):
Am I safe?





- The Driver's Seat: Represents the Frontal Lobe, which allows a person to think, process information, and make good decisions.
 - Thinking brain – calm, relaxed body, safe, in control
- The Backseat: Represents the Limbic System, which is the middle part of the brain and controls emotional responses. It also retains emotional memory
 - Feeling Brain – upset, angry, sad, anxious, fists tense, hot, red faced, triggers
- The Trunk: Represents the Brain Stem, which is the oldest part of the brain. It includes the nervous system and controls Fight, Flight, and Freeze responses.
 - Fight – aggression, anger, not able to concentrate, hyperactivity
 - Flight – social isolation, avoidance, or running away
 - Freeze – limited emotional expression, over compliance, denial of needs
 - Unable to process, operating out of emotions

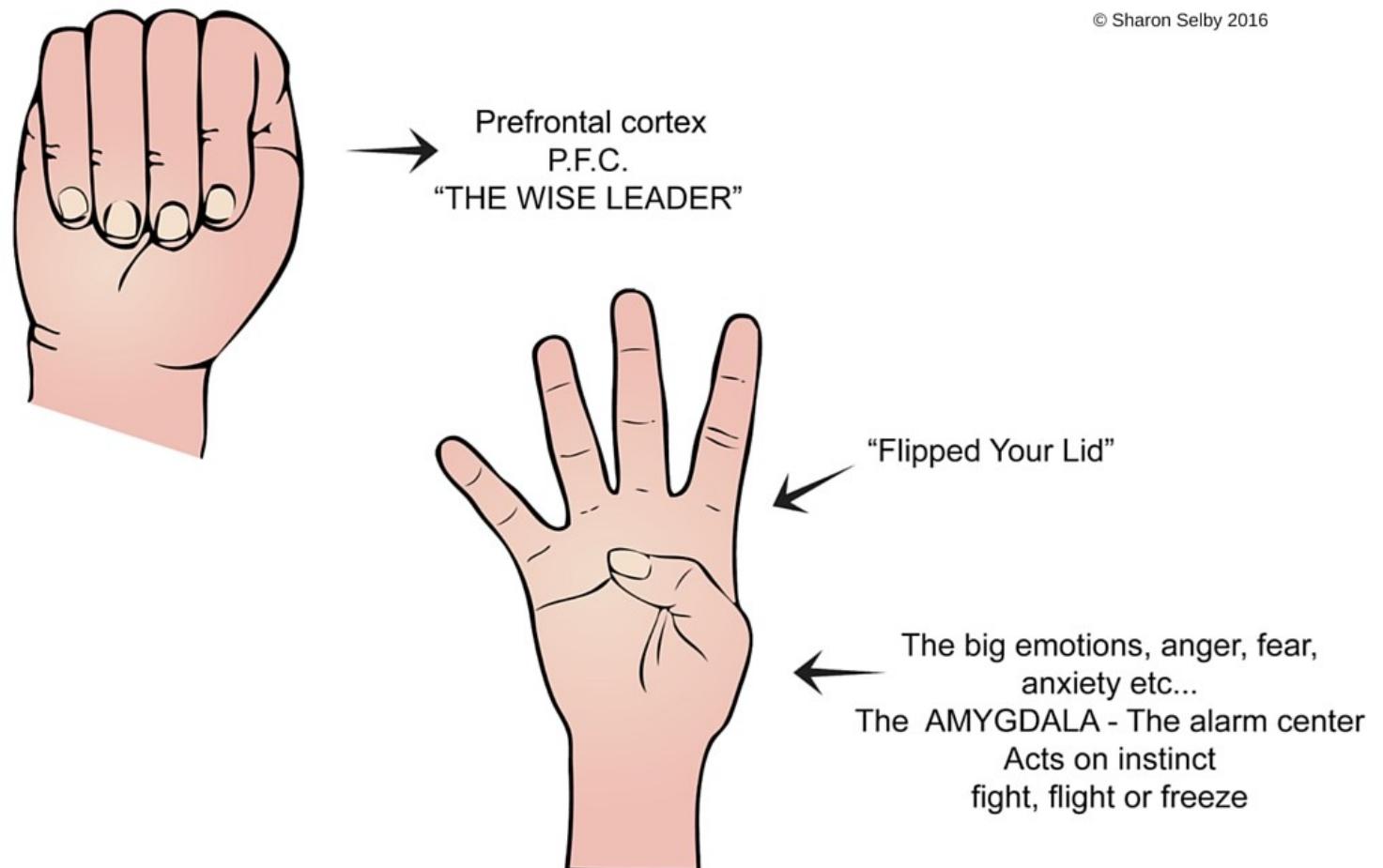


Trauma and the brain

Science has been able to determine that trauma affects the way the brain functions. People who have been through trauma respond to stimuli and move to the Trunk faster, as a survival instinct. This means they are less likely to think through a situation and decide how to respond to a situation and make good choices.

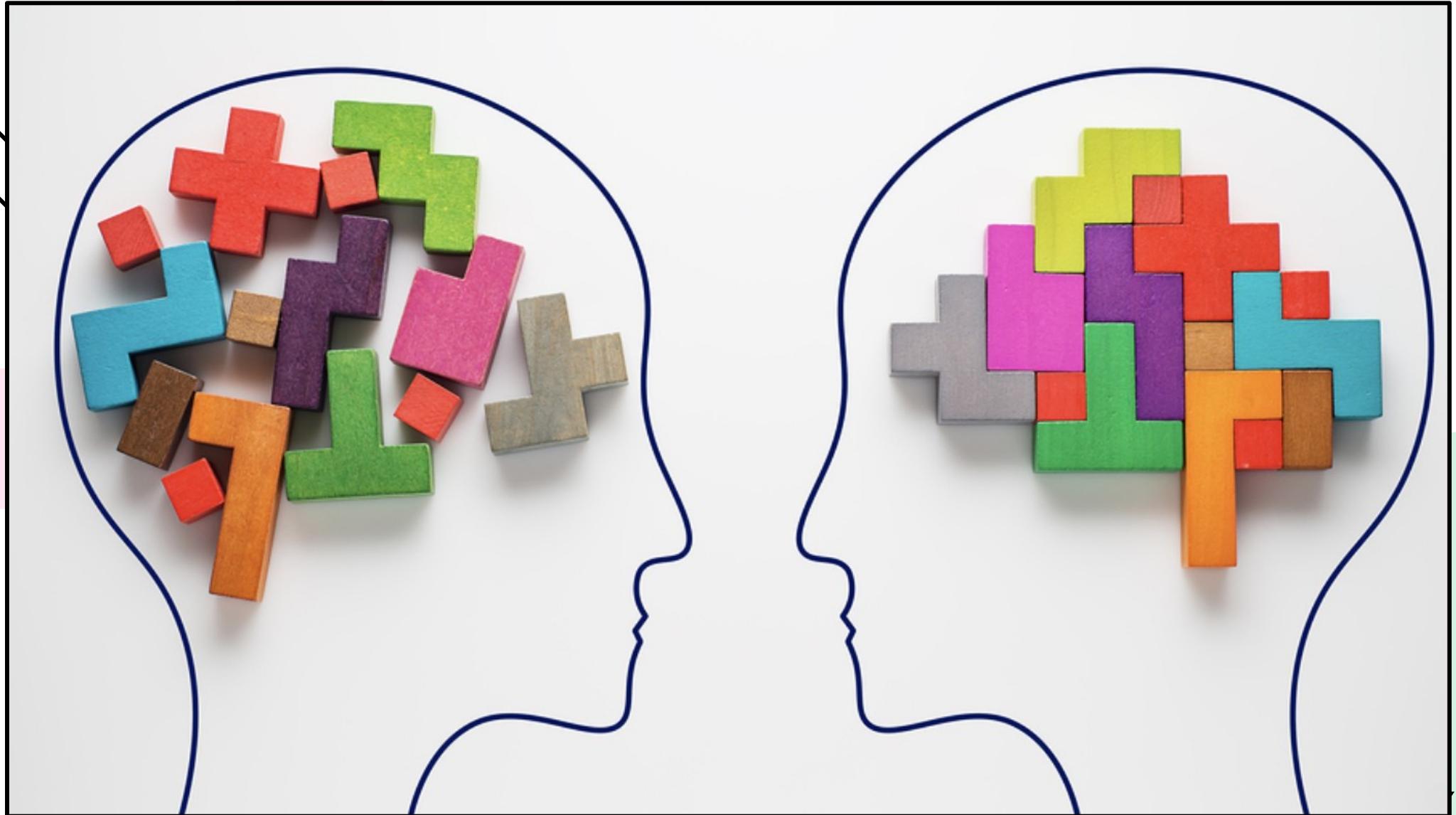


Flipping your lid



Adapted from Dr. Daniel J. Siegel's Hand Model of the Brain found in *Mindsight: The New Science of Personal Transformation*
(Bantam Books, 2010)





The Missouri Model Principles of Trauma Informed Care

SAFETY

Ensure physical and emotional safety, recognizing and responding to how racial, ethnic, religious, gender or sexual identity may impact safety across the lifespan.

TRUSTWORTHINESS

Foster genuine relationships and practices that build trust, making tasks clear, maintaining appropriate boundaries and creating norms for interaction that promote reconciliation and healing. Understand and respond to ways in which explicit and implicit power can affect the development of trusting relationships. This includes acknowledging and mitigating internal biases and recognizing the historic power of majority populations.

CHOICE

Maximize choice, addressing how privilege, power, and historic relationships impact both perceptions about and ability to act upon choice.

COLLABORATION

Honor transparency and self-determination, and seek to minimize the impact of the inherent power differential while maximizing collaboration and sharing responsibility for making meaningful decisions.

EMPOWERMENT

Encouraging self-efficacy, identifying strengths and building skills which leads to individual pathways for healing while recognizing and responding to the impact of historical trauma and oppression.

The five principles were initially based on Creating Cultures of Trauma-Informed Care (CCTIC): A Self-Assessment and Planning Protocol; Community Connections; Washington, D.C. Roger D. Fallot, Ph.D. and Maxine Harris, Ph.D. April, 2009.

The revised Missouri Model Principles of Trauma Informed Care were approved October 2018 by the Missouri State Trauma Roundtable.

Safety – ensuring physical & emotional safety

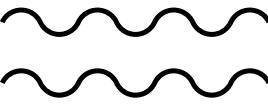
Trustworthiness – task clarity, consistency, and interpersonal boundaries

Choice – maximize choice and control

Collaboration – emphasize team-oriented approach

Empowerment – giving the permission to and equipping the student/family





Preventative Strategies



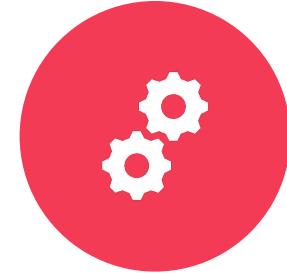
BUILDING POSITIVE RAPPORT
AND APPROPRIATE
RELATIONSHIPS



EXPRESS CLEAR EXPECTATIONS



REINFORCE EXPECTED BEHAVIOR



SET RULES & PROCEDURES



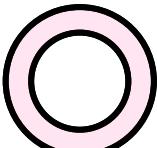
INCREASE CHILD'S
PREFERENCE/INTEREST IN
ACTIVITY



PHYSICAL ARRANGEMENT OF
SPACE



PROVIDE POSITIVE
(SPECIFIC) PRAISE

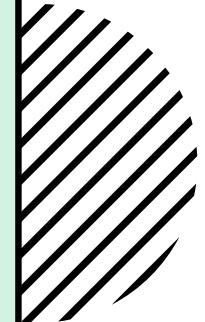


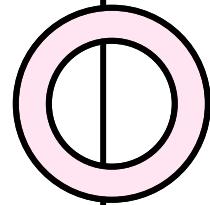
I N T E R V E N T I O N S
F O R
D I S R U P T I V E
B E H A V I O R



ZONES OF REGULATION!

Blue	Green	Yellow	Red
			
Sick Sad Tired Bored Moving Slowly	Happy Calm Good to Go Focused Ready to Learn	Frustrated Worried Silly/Wiggly Anxious Excited	Mad/Angry Mean Yelling/Hitting Out of Control I Need Time and Space





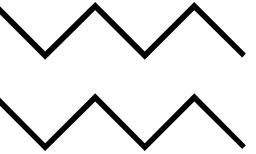
What is the
child
attempting
to gain?

Attention

Control

Escape/Avoid

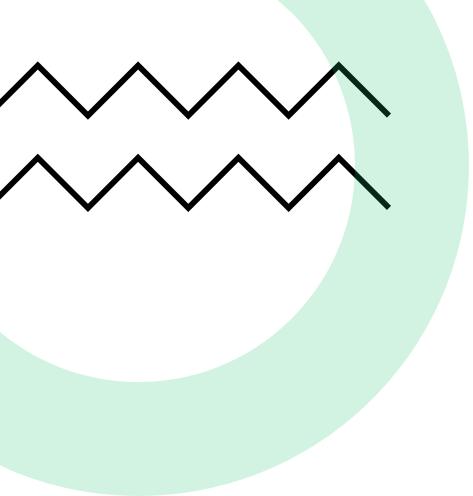
Sensory Input



Attention

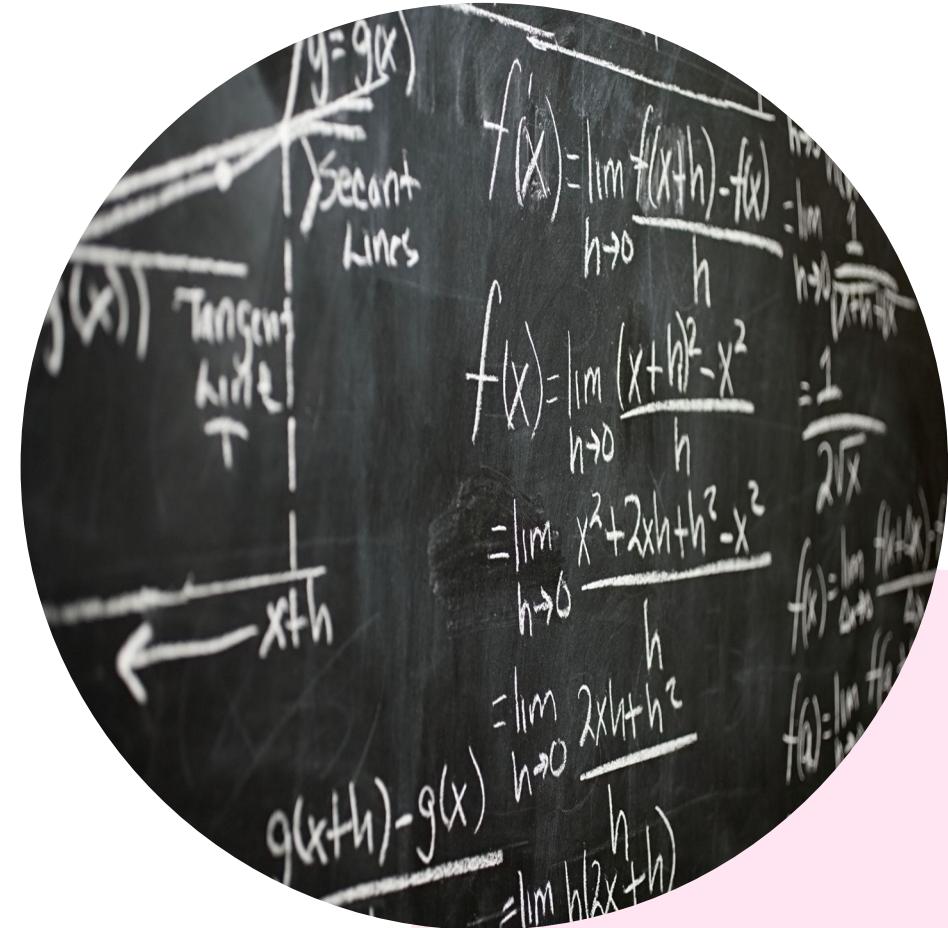
Give	Give periodic attention – attend to them, look in their eyes, verbal praise
Provide	Provide specific jobs
Offer	Offer highly preferred activities more often
Increase	Increase proximity to the child





Control

- Transitional warnings – 3 minutes left of playing then it's time to clean up
- When/Then statements – When you finish your chore, then we can watch a show
 - Alternate preferred activities with non-preferred activities
- Picture schedule/chore chart
- Task lists for child to cross off





Escape/Avoid

This feeling is often triggered by a demand of a nonpreferred activity. Can this demand be eliminated or modified? This is based on your personal values, what you are able to tolerate, and what you expect.

Opportunities for Choice

Increase predictability

Incorporate movement breaks

Modify task



○ Sensory – Avoids or Seeks

Touch

- Offer music for those seeking auditory reinforcement

Proprioception

- Noise canceling headphones

Vestibular - balance

- Squishy balls, Playdough, Rubik's cube

Auditory

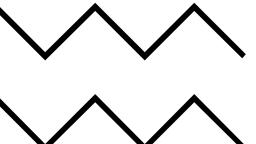
- Alternative seating

Vision

- Physical activity

Taste & Smell





Your Reaction Matters

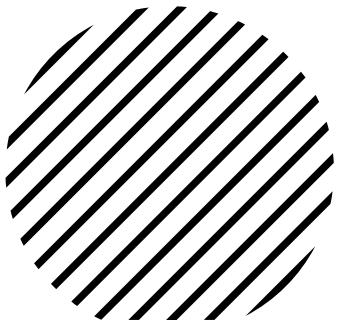
Emotion drives behavior

- That goes for you too!

Do not react out of emotion

Practice skills when you are calm

A practiced skill trumps emotion every time



If...	Then...
You want to build relationships,	Build trust, speak respectfully, and call them by name.
You want to build trust,	Make eye contact, follow through, use their names, and go the extra mile.
You want to improve behavior,	Use the relationship you have to speak to the child or create a contract.
You want to improve overall achievement,	Make the child feel that they belong.
You need to repair relationships,	Take responsibility for your part in the breakdown.
You want a child to feel they belong,	Show each child that you respect them as well as like them and their differences.
You need to start at the beginning with a child,	Start with a smile, add a greeting, and share your own story.

