

BEST PRACTICES: WORKING WITH TRAUMA

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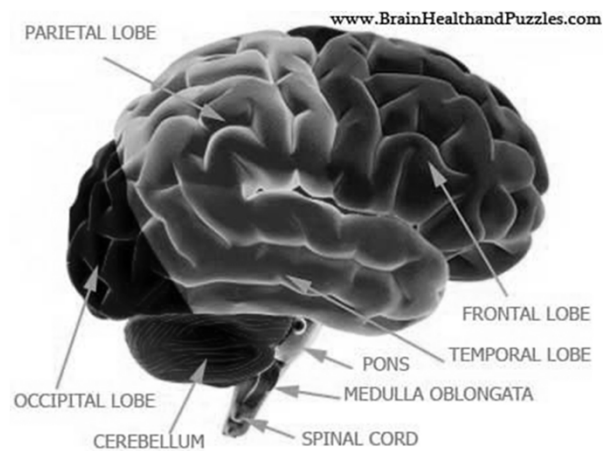
What Is Trauma?

- Posttraumatic Stress Disorder – variety of symptoms following exposure to a traumatic event. Clinical presentation varies among individuals and may include:
 - Fear-based re-experiencing, emotional, and behavior symptoms.
 - Anhedonia or dysphoric mood and negative thoughts.
 - Arousal
 - Dissociation
 - Combination of all of these
- Other Trauma- and Stressor-Related Disorders
 - Reactive Attachment Disorder – relationally inhibited and emotionally withdrawn
 - Disinhibited Social Engagement Disorder – socially disinhibited

What is Trauma?

- Violence and betrayal in our own lives, as well as on our histories and cultures.
- Unbearable. Intolerable. Overwhelming. Out of Control.
- Trauma has direct and indirect effects.
- Imprint on the mind, body, and brain.
- Traces of trauma remain in our minds, emotions, and biology.

The Human Brain



Neuroplasticity

- Neuroplasticity has a clear age-dependent determinant
 - Although plasticity occurs over an individual's lifetime, different types of plasticity dominate during certain periods of one's life and are less prevalent during other periods.
 - In other words, there are "windows of opportunity" for full acquisition of skill to occur
- The environment plays a key role in influencing plasticity.
 - The brain is shaped by the characteristics of a person's environment and by the actions of that person

Brain Development

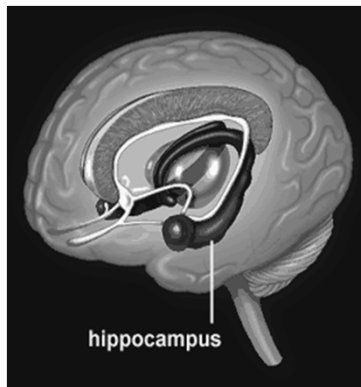
- ▣ Bottom Up – from primitive to most complex
- ▣ Brain development is sequential. More complex systems are dependent on development of less complex systems.
- ▣ For normal brain development to occur there must be specific patterns of activity at specific times during development = *sensitive periods*
- ▣ Experiences (positive or negative) during sensitive periods organizes brain systems.
- ▣ Therefore, trauma during early childhood can effect all future functional capabilities!

| Activity Across Brain Regions | | | | |
|-------------------------------|--|---------------------|--|---------------------|
| Brain Region | Functions | Critical Period | Experiences needed | Functional Maturity |
| Cortex | Thinking, Planning, Reasoning, Creativity, & Sensory Integration | 3 - 6 years | Complex conversations, social interactions, exploration, safe, fed, secure | Adult |
| Limbic | Emotion, Attachment Memory, & Sensory Integration | 1 - 4 years | Complex movement, social experience, narrative | Puberty |
| Diencephalon | Sensory Motor & Sensory Processing : | 6 months - 2 years | Complex rhythmic movement, simple narrative, affection | Childhood |
| Brain Stem | State Regulation & Sensory Processing | In utero - 9 months | Rhythmic, patterned input, engaged caregiving | Infancy |

Trauma Leads to Problems with Sensory Integration

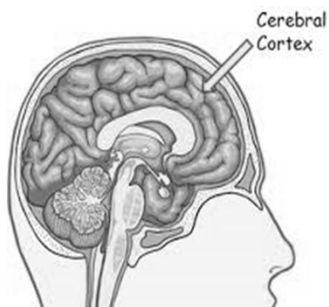
- The more effective our brain is at processing sensory input, the more effective our behavioral output will be.
- 90% of children with trauma have sensory difficulties.

Hippocampus



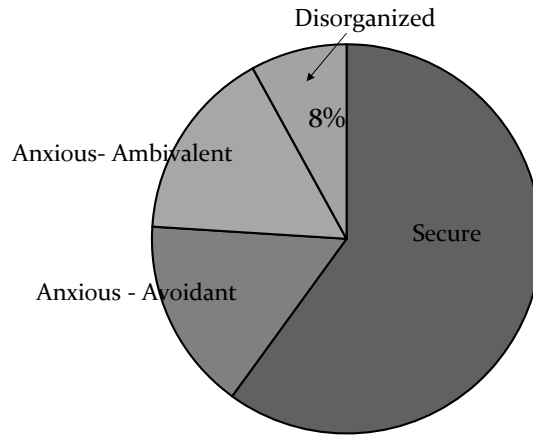
- Part of the limbic system
- Fully mature by age 3
- Primary role is short-term and long-term memory
- Also plays important role in spatial navigation

Cerebral Cortex

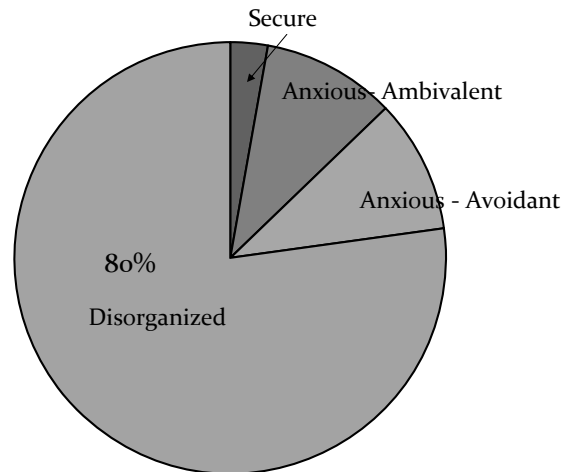


- Outer layer of neural tissue
- Fully mature at age 20
- If it is not nurtured it does not mature
- Primary function is higher brain function such as thought and action
- Where “true personality” is held

Secure Vs. Insecure Attachment General Population



Secure Vs. Insecure Attachment Foster/Adopted Children



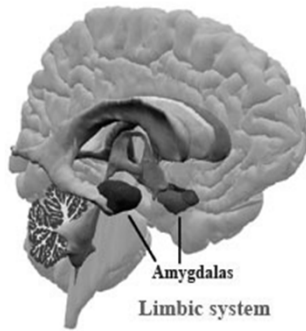
Trauma Leads to Problems with Attachment

- Attachment is a system in the brain that that develops to ensure infant safety and survival
- The comfort, pleasure, and calm and balanced attuned interaction between the infant and caregiver creates a sense of safety within the infant
- Forms the basis for:
 - all future relationships
 - sense of self-worth
 - resilience to stress
 - ability to regulate own emotions
 - make sense of life
 - create meaningful connections with others

Mirror Neurons

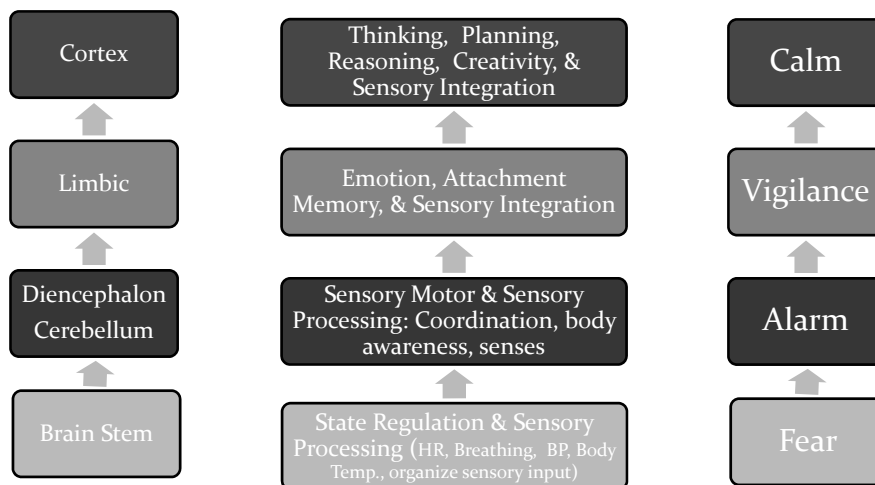
- In Normal Youth:
 - the brain mirrors what is being projected by the caregiver
- In Traumatized Youth:
 - The mirror becomes inaccurate
 - Hypersensitive and highly reactive to negative nonverbal cues
 - Over-perceive negative behavior to mean presence of threats
 - Inability to recognize feelings
 - Difficulty with empathy

Amygdala



- Part of the limbic system
- Limbic system is active in-utero. Therefore infant is born with feelings!
- Primary role is processing of memory, decision-making and emotional reactions
- Important role in expression and modulation of aggression
- Survival based
- “Boss” of the limbic system

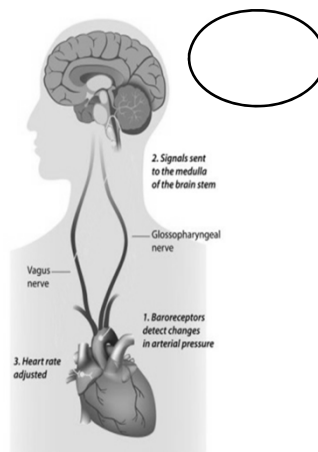
Fight, Flight, or Freeze

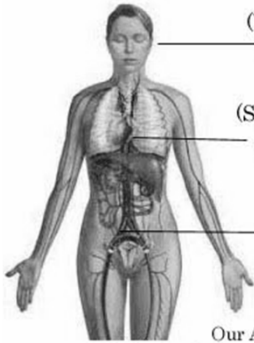


How Trauma and Neglect Impact the Brain

Overbuilding stress reactivity
+
Underdeveloped cortex
=
primitive, immature and violent responses

Trauma & Visceral Feelings





(VVC) Ventral Vagal Complex: Signaling System for motion, emotion & communication. (Our Social Engagement System)

(SNS) Sympathetic Nervous System: Mobilization System for Flight or Fight Behaviors. (Our Aggressive Defense System)

(DVC) Dorsal Vagal Complex: Immobilization System for Conservation Withdrawal. (Our Passive Defense System)

Our Autonomic Nervous System fires muscular tensions triggered by feedback signals from the external & internal world at millisecond speeds below conscious awareness. These muscles tensions fire our Thoughts?

Trauma & Left-Right Brain



- Left side rational brain
 - Facts
 - Statistics
 - Sequence
- Right side emotional brain
 - Sensory experiences
 - Nonverbal signals

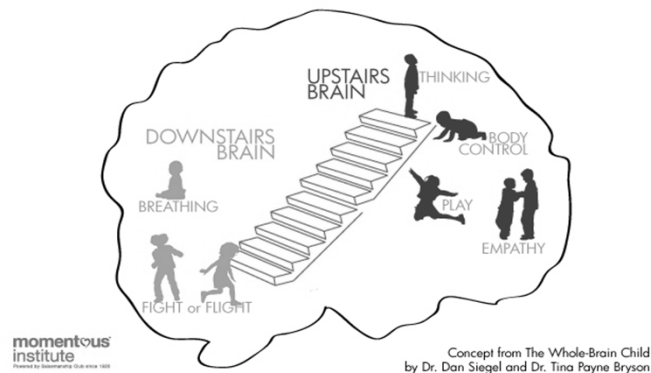
Problems of Traumatized Youth

- Impulsivity
- Hyperactivity
- Distractibility & Inattention
- Dysphoria
- Emotional Numbing
- Social Avoidance
- Dissociation
- Sleep Problems
- School Failure
- Anger
- Eating Difficulties
- Relationship Difficulties
- Aggression/Violence
- Substance Abuse
- Disrespectfulness
- Refusal to attend school
- Refusal to follow instructions
- Regressed or delayed development
- Sensory Issues

Trauma-Informed Care

- Amygdala is overactive in traumatized children
- Goal of TIC is to de-activate the amygdala when it is over-firing
- When the amygdala is de-activated, compassion is activated
- TIC rebuilds the child's brain!

Trauma & The Brain



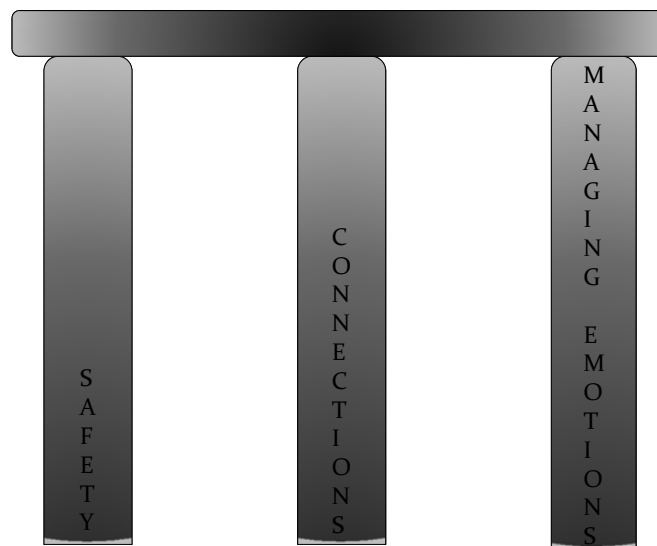
Trauma-Informed Care

- The greater the intensity, frequency, and duration of the child's trauma, then the greater the intensity, frequency and duration of the intervention
- TIC must have breadth and depth
 - Must include sensory, relational, therapeutic, etc. Strategies
- Some research shows that 1 month of intensive intervention is required for every year of life

Trauma-Informed Care

- Every misbehavior is an attempt to fulfill an unmet childhood need
- Must look to understand the meaning behind the behavior
- Relationship trauma can only be healed by relational interventions

3 Pillars of Trauma-Informed Care



Citations

- Karen, R. 1998. *Becoming Attached: First Relationships and How They Shape Our Capacity to Love*. Oxford Press, New York, NY.
- Perry, B. 2009. Examining Child Maltreatment Through a Neurodevelopmental Lens: Clinical Applications of the Neurosequential Model of Therapeutics. *Journal of Loss and Trauma*, 14:240-255.
- Trevarthen, Colwyn, & Kenneth J. Aitken. 2001. Infant Intersubjectivity: Research, Theory, and Clinical Applications. *Journal of Child Psychology and Psychiatry* 42, 3 - 48.