MARCH 2016 WEBINAR

EFFECTIVELY ADDRESSING TRAUMA IN HEALTHY RELATIONSHIP EDUCATION
PRESENTERS:

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WEBINAR INFORMATION

• If you are unable to access audio through your computer, please use your phone:
  +1 (631) 992-3221 access code: 848-433-009.
• All attendees are muted.

Ways to participate:
• Type your questions in the “Questions” box
• Raise your hand
• Answer the poll questions

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The Dibble Institute believes in stable, healthy families.
THE DIBBLE INSTITUTE BELIEVES ALL PEOPLE DESERVE RESPECT.
BRAIN TRAIN
WHAT WE NEED IS...

To be trauma informed
   As an administrator, supervisor, staff member, interested party
To be able to provide relief from trauma
   For consumers
   For staff
To address these needs through
   A Trauma Informed Approach
   The Brain Train
WHY WE NEED IT IS...

- Trauma is rampant
- We are typically unaware of the impact of trauma in our programs and organizations
- We are typically unaware of how programs continue to re-traumatize participants and foster secondary traumatic injury to staff
- A Trauma Informed Approach helps to explain why we are not successful with some people
- A Trauma Informed Approach helps to explains dramatic and unpredicted shifts in behavior
DEFINING TRAUMA

- A incident or series of incidents over time that adversely impacts the body-brain
- Trauma creates traumatic memories containing emotions, thoughts, and behaviors
- Trauma often creates memories that are *Implicit*
- Memories created by trauma can (and often do) last a life time
WHAT IS A TRAUMA INFORMED APPROACH?

1. Appreciate the high prevalence of trauma in the general population
2. Programs, organizations or systems realize the wide spread impact of trauma
3. Recognize the signs and symptoms of trauma in staff, clients and others
4. Recognize and support paths of healing from trauma
5. Integrates knowledge of trauma into public policies, social and professional organizational procedures and practices, and the community at large
A Change of Attitude and Perception

- Sorting out our own emotions, prejudices, reactions and beliefs
- Seeing your organization from the perspective of your consumers
- Seeing others again from a new perspective
ADVERSE CHILDHOOD EXPERIENCES

“ACE’S”

Robert F. Anda, Vincent J. Felitti, MD, Carol A. Redding, MA,

- 18,000 Kaiser patients, San Diego
- Abuse, neglect & exposure to other traumatic stressors are COMMON

Almost two-thirds of participants reported at least one ACE incident, and more than one in five reported three or more ACE.
ADVERSE CHILDHOOD EXPERIENCES

- Recurrent physical abuse
- Recurrent emotional abuse
- Contact sexual abuse
- An alcohol and/or drug abuser in the household
- An incarcerated household member
- Someone who is chronically depressed, mentally ill, institutionalized, or suicidal
- Mother is treated violently
- One or no parents
- Emotional or physical neglect
BY THE NUMBERS:

• 1 in 6 men experienced trauma
• 1 in 5 Americans sexually molested
• 1 in 4 beaten by a parent
• 1 in 3 couples engages in physical violence
• 25% grow up with alcoholic relatives
• 1 in 8 witnessed their mother being beaten or hit
ADDITIONAL CAUSES OF TRAUMA

- Natural or Human-caused
- Individual, group, community and mass trauma
- Trauma affecting communities and cultures
- Historical Trauma
- Mass trauma
- Interpersonal trauma
- Political terror and war
- Refugees
- System Oriented Trauma: Re-traumatization
STRUCTURAL AND FUNCTIONAL NEURONAL ABNORMALITIES RESULTING FROM TRAUMA

- Prefrontal cortex: logic and reasoning
- Corpus callosum: integrating the right and left hemisphere
- Amygdala: fear and facial recognition
- Temporal lobe: hearing, verbal memory, language function
- Hippocampus: memory
- Neuroendocrine system: stress regulating hormone cortisol & neurotransmitters (epinephrine, dopamine, serotonin) mood & behavior
- Immune system
WHAT TO DO ABOUT IT

- Become a Trauma Informed Organization
- Embed techniques and strategies that address trauma in existing programs
- Embed techniques and strategies to address trauma in organizational culture
- Develop and provide trauma informed programs for participants and staff
RESOURCE SHORTAGE

- Developed The Brain Train Program to deal with this problem
- Skills based approaches rather than therapy
- A program to stand alone
- A program that can be embedded into your already existing program

“There are NOT enough therapists in the world to address the prevalence of human trauma”
BRAIN TRAIN: SKILL BUILDING

- **Background of Curriculum**
  - Resources used
  - Our training in trauma

- **Goals of Brain Train program**
  - Internal awareness and emotional regulation
    - Mental and physical awareness
  - Interpersonal awareness
  - Creating support systems
EMOTIONAL REGULATION

- May be used at the beginning and end of each class

- Many methods of emotional regulation
  - Breath Practice
  - Peripheral Vision
  - Pelvic Floor Relaxation
  - Light Stream
  - 5-4-3-2-1
  - Trauma Containment
  - Practice of Loving Kindness
FEELINGS, THOUGHTS, SENSATIONS

- Many participants will need help with:
  - Identifying their emotions
    - Inside Out, the Pixar movie
  - Emotions – Goldilocks and the Three Bears
    - Feeling too little, too much, just right
  - Discerning thought from emotion
  - Sensations: Body scans
# BUILDING EMPATHY

## Part I

**Partner A**
Select an emotion and tell a story when you experienced that emotion

**Partner B**
Retell the story in your own words. Include thoughts, emotions and body sensations that you believe your partner experienced

**Partner A:** affirms or gently corrects listener

**Partner B:**
accepts speaker’s corrections

## Part II

**Partner B:**
Share what emotions, thoughts, and sensations they experienced when hearing the story

**Partner A:**
Retell what your partner’s experience was hearing your story

**Partner B:**
Affirms or gently corrects listener

**Partner A:**
Accepts speaker’s correction
### Developing an Observing Self

<table>
<thead>
<tr>
<th>Event</th>
<th>Response</th>
<th>SUDS</th>
<th>Self-Regulation Exercise</th>
<th>SUDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>See, Hear, Touch, Smell, Taste</td>
<td>Body Sensation (Feelings)</td>
<td>Emotions</td>
<td>Thoughts</td>
<td>Triggers</td>
</tr>
<tr>
<td>Hear announcement of test</td>
<td>Shoulders tense, Sweaty palms, trouble sleeping</td>
<td>Anxious</td>
<td>I’m stupid, I will never get this right</td>
<td>The test</td>
</tr>
</tbody>
</table>
LET’S GET MOVING

- Self Empowerment through Physical Activity
- Integrate the Senses Through Rhythm
  - Happy
DECIDE RATHER THAN SLIDE

- Life Compass
- Code of Honor
CREATE A SUPPORT SYSTEM

Asking for Help

Me

- Role Models
- Helpers
- Referral Agent
- Respect
- Challenger
- Friends
- Family
- Common Interests
- School/Work
- Referral Agent
CREATING A NEW MIND

Dan Siegel:

“We cannot THINK our way to another way of being but WE CAN GROW OUR BRAIN”

Donald Hebb:

“Neurons that fire together wire together”

Consistent practice and patience: “Practice makes progress, not perfection.”
NOW WHAT?

- Provide staff and organizational training with the Brain Train
- Attend two-day FFCOA training

  Day one—Trauma Informed Care
  Day two—The Brain Train

  City of Long Beach Head Start, Teacher Training Center 90758
  1299 East 32nd Street
  Signal Hill, CA 90755

  August 11-12, 2016
Questions?
Thank You for Joining Us Today!

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SECOND WEDNESDAY WEBINAR

April 2016 Webinar
April 13, 2016

Introducing At-Risk Youth to Relationship Skills for Love, Life, and Work