

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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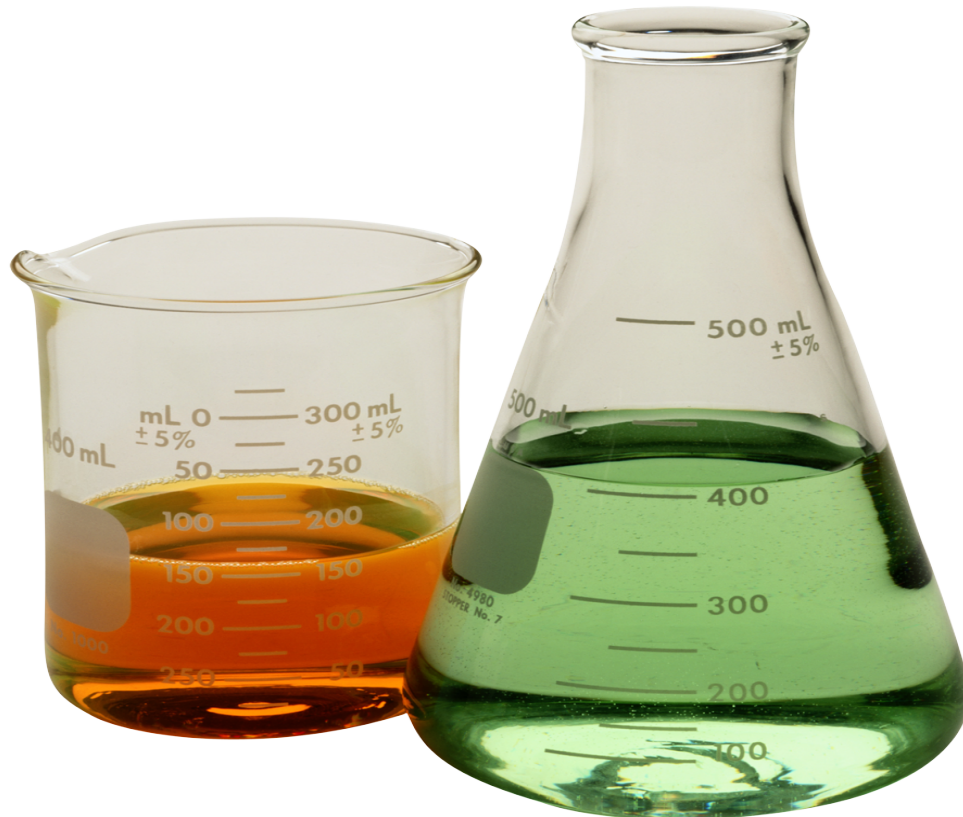




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Resources for Teaching Relationship Skills

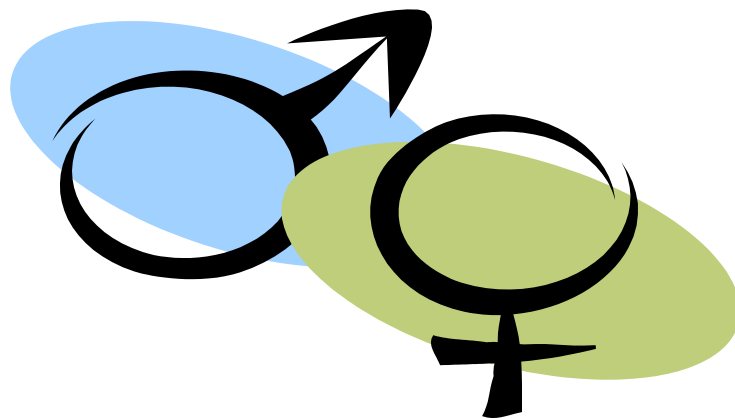
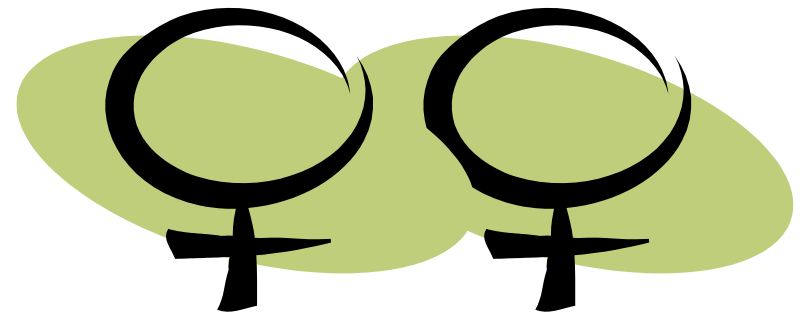
THE DIBBLE INSTITUTE BELIEVES IN RESEARCH.



The Dibble Institute
believes in stable, healthy families.



THE DIBBLE INSTITUTE BELIEVES
ALL PEOPLE DESERVE RESPECT.





BRAIN TRAIN

**Effectively Addressing Trauma in
Healthy Relationship Education**

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 explain 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

TO BE TRAUMA INFORMED REQUIRES...

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

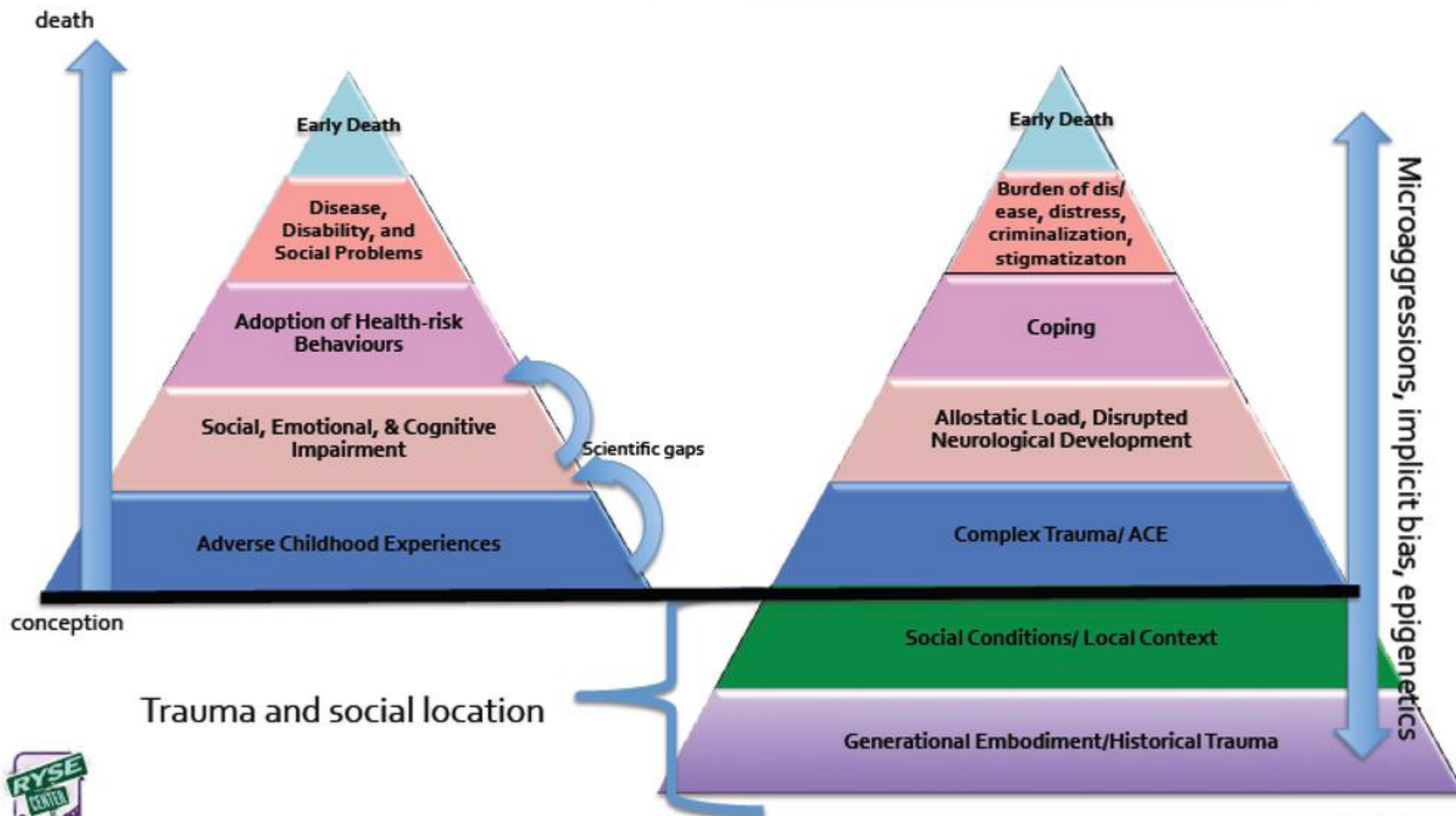
BY THE NUMBERS:

- 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

Trauma and Social Location

Adverse Childhood Experiences

Historical Trauma/Embodiment



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

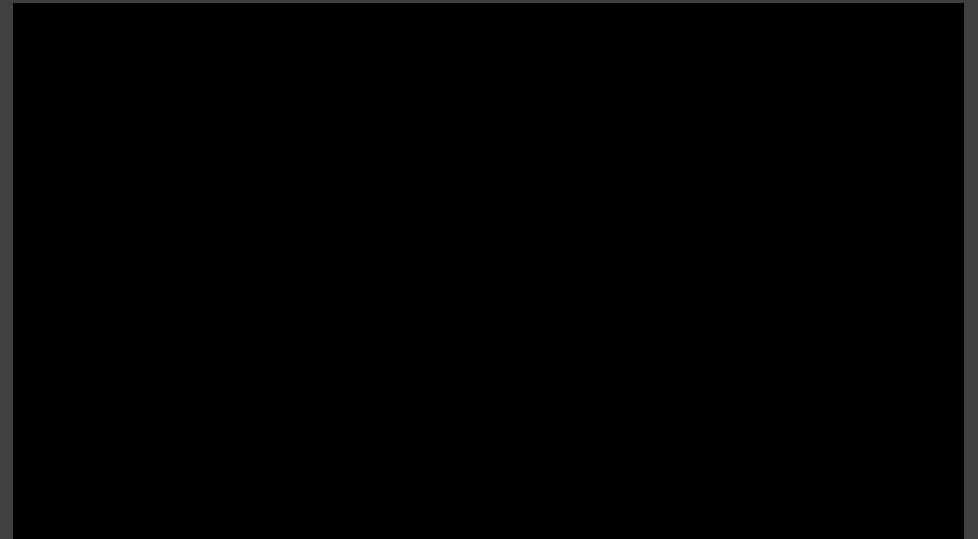
Part I	
Partner A Select an emotion and tell a story when you experienced that emotion	Partner B Retell the story in your own words. Include thoughts, emotions and body sensations that you believe your partner experienced
Partner A: affirms or gently corrects listener	Partner B: accepts speaker's corrections
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

Event	Response							
See, Hear, Touch, Smell, Taste	Body Sensation (Feelings)	Emotions	Thoughts	Triggers	Memory	SUDS	Self- Regulation Exercise	SUDS
Hear announcement of test	Shoulders tense, Sweaty palms, trouble sleeping	Anxious	I'm stupid, I will never get this right	The test	Previous failure on test, Being humiliated in class	6	Peripheral vision, breath work, pelvic relation Tapping	4, 2

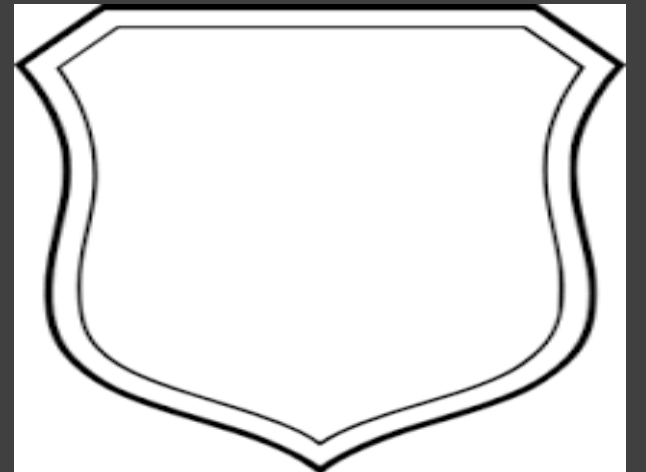
LET'S GET MOVING

- 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



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?



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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**