

Foundation of the Trauma-Responsive Model

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Trauma-Informed

• How I became involved

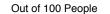
Trauma-Informed

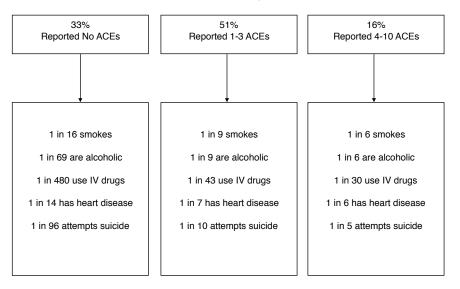
	ABUSE	NEGLECT	HOUSEHOLD DYSFUNCTION	
	Physical	Physical	Mental Illness	Incarcerated Relative
			3	
	Emotional	Emotional	Mother treated violently	Substance Abuse
			Ø	
	Sexual		Divorce	
Texas Juvenile Justice Department				

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Trauma-Informed

The ACE Study Revealed:



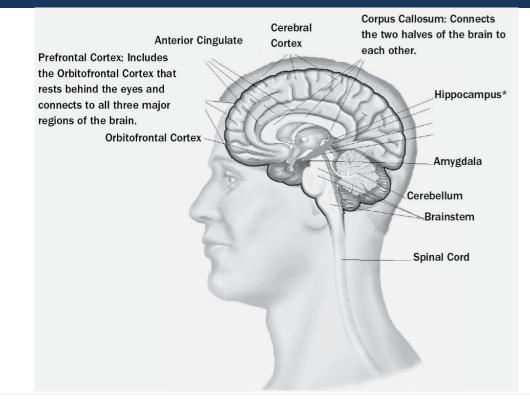


Expanded ACEs

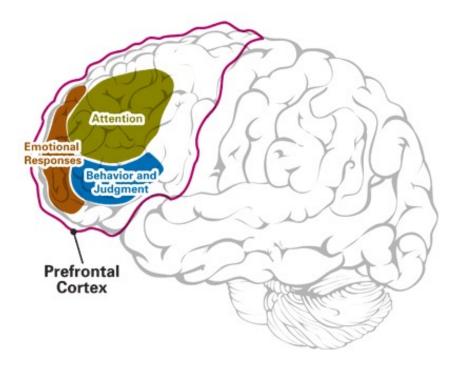




Brain Basics



Pre-frontal Cortex

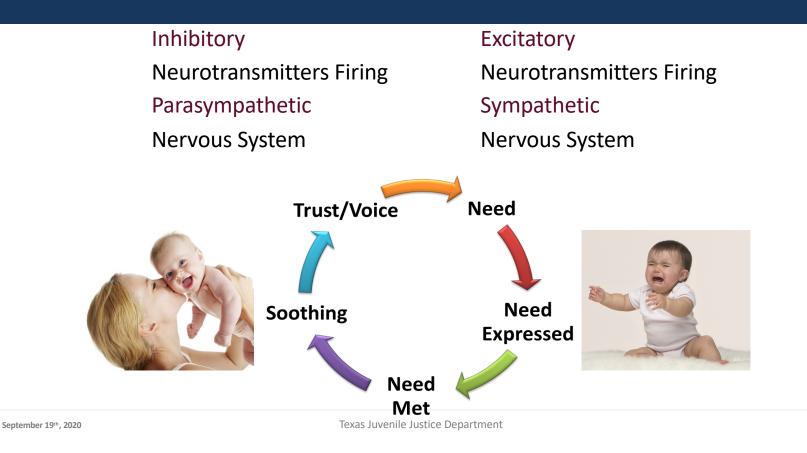


How the Brain Develops and Wires



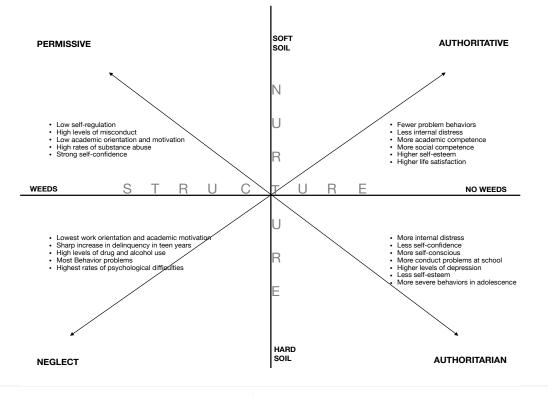
- "Lower brain" wires to the "Upper brain" during development.
- These connections are "hard-wired."

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CAREGIVING STYLES

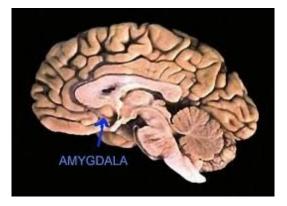


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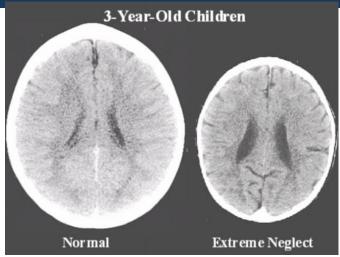
Fear and the Brain



- Fear sends the brain backwards to the brainstem.
- This can disengage the pre-frontal cortex where non-reactive, executive thinking occurs.
- Repetitive fearful events will create a hyperactive amygdala with constant anxiousness.
- The brain is more interested in keeping you alive than keeping you happy.



- Repetitive trauma overdevelops the amygdala and brainstem
- This brain is wired for survival, not attachment
- This survival mode results in "bad behavior" that is actually protective behavior
- Processing disorders (auditory, sensory) may result from this
- Child will have chronic anxiety, racing thoughts, poor sleep, poor attention, poor self-regulation, frequent tantrums or shut-downs, etc.

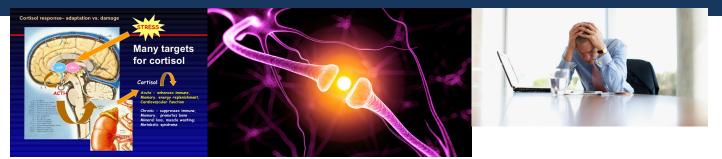


- Repetitive trauma leads to decrease size in the corpus collosum and cortex
- Can lead to seizure activity, learning delays
- Imbalance of hemispheres and poor connectivity of the hemispheres with each other (no emotions vs over emotional, etc.)
- Not only is this child's perception of nurturing relationships skewed, their brain has not yet been developed for secure relationships.

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- They have lacked nurturing care as well as received trauma
- These children have not been able to fully develop neurobiologically and will most probably be developmentally delayed
- They may act much younger than their age
- They may want to go back to infant or toddler care/habits
- The day a child from a hard place walks into your home, he or she will not instantly change. It will take time through nurturing and restoring a loving, trusting relationship



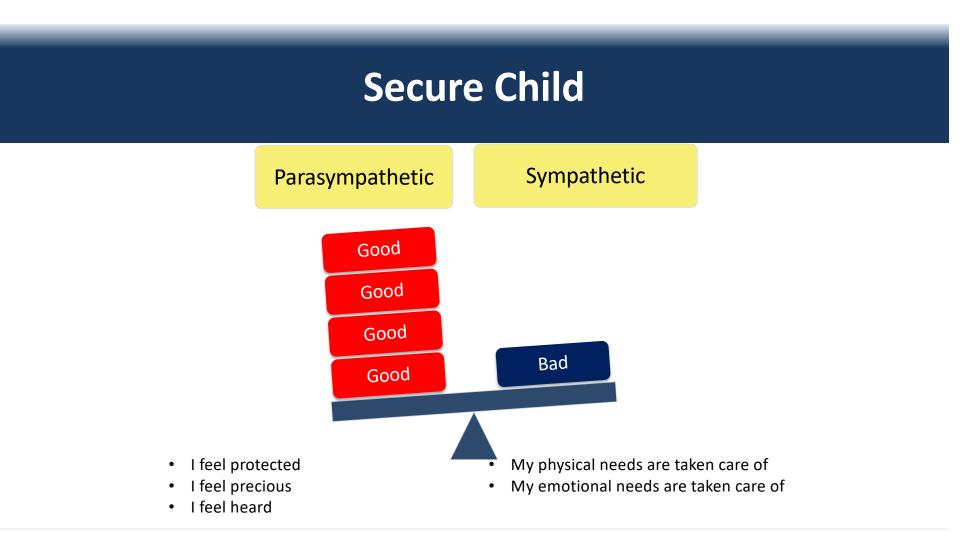
Toxic levels of cortisol (stress hormone):

- damages connections in the pre-frontal cortex
- significantly decreases or debilitates function in the pre-frontal cortex (poor thought process, forgetfulness, poor self regulation)
- disrupts normal sleep/wake cycles

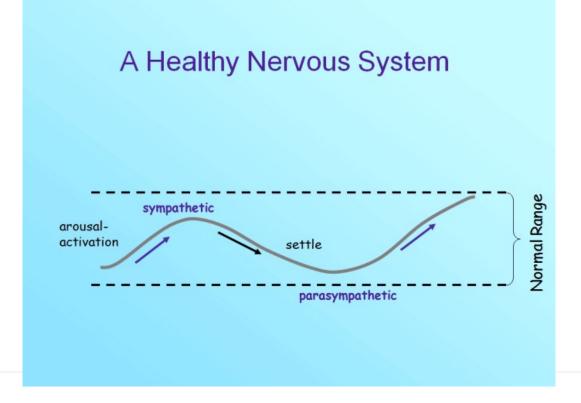
Increased levels of glutamate can cause tantrums/seizures:

- Too much play/activity
- Missed nap or snack
- Too hot or cold

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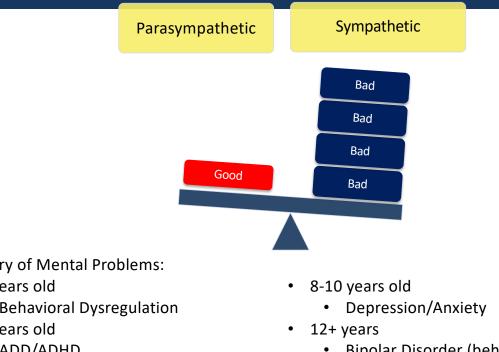


Normative Brain Response to Life Experiences



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Child from a Hard Place



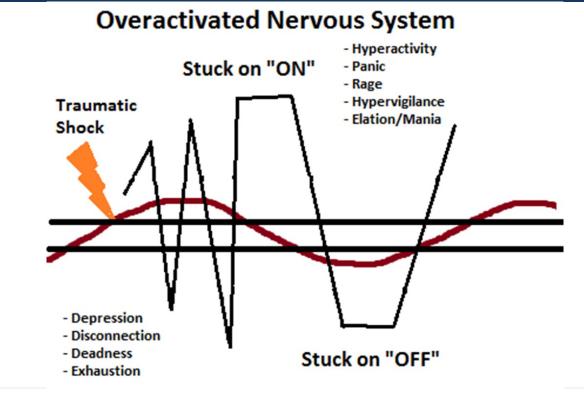
Trajectory of Mental Problems:

- 2-3 years old
 - Behavioral Dysregulation
- 4-6 years old
 - ADD/ADHD

• Bipolar Disorder (behavioral/emotional disintegration)

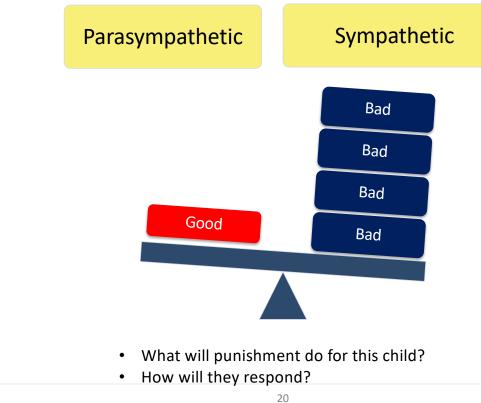
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Dysregulated Brain Response to Life Experiences



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Child from a Hard Place



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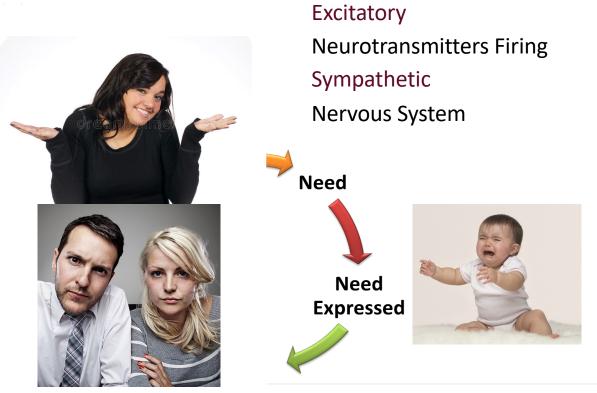
Excitatory

Neurotransmitters Firing

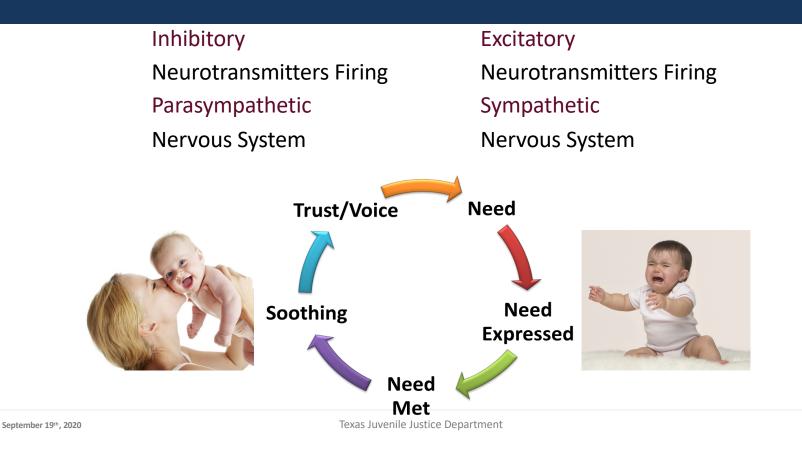
Sympathetic

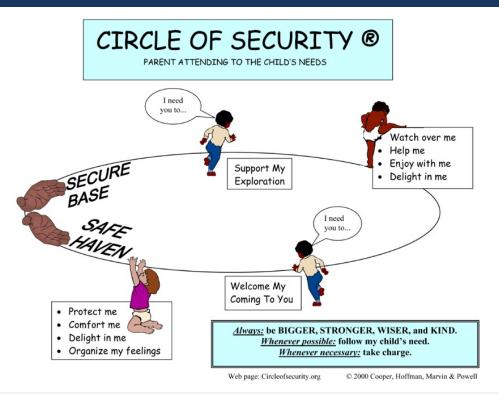
Nervous System

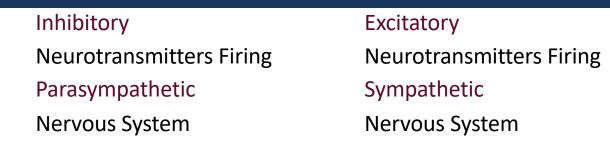




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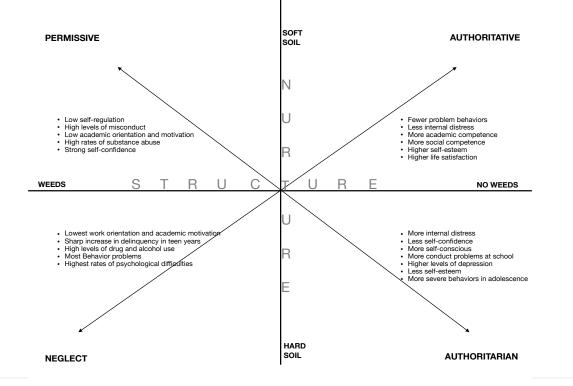




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ADDICTION IS A BYPRODUCT

CAREGIVING STYLES



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It takes secure attachment to create secure attachment!

ATTACHMENT THEORY



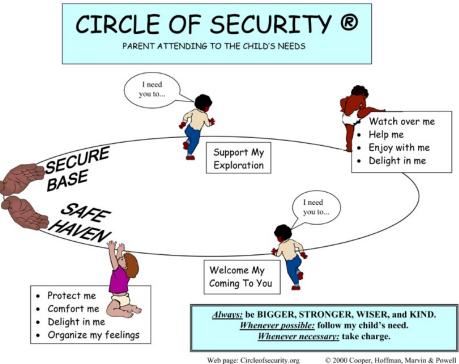
Science shows that our children will become who we are rather than what we say or do. The most important factor in successful parenting is the caregiver making sense of their own past.

The Adult Attachment Interview (AAI) can predict with up to 85% accuracy the attachment style of the child.

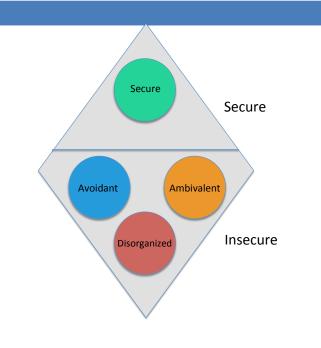
We must LIVE what we want those around us to learn. It is the only way that teaching works.

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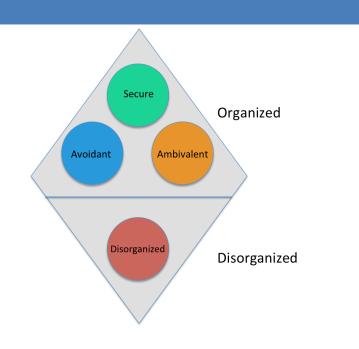
ATTACHMENT THEORY



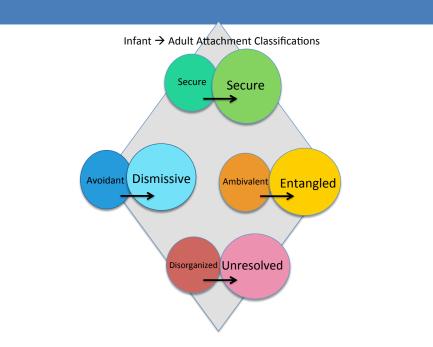
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ATTACHMENT **S**TYLES: **S**ECURE

Pillars of Secure Attachment:

- Give care
- Receive care
- Negotiate
- Okay with autonomous self

ATTACHMENT **S**TYLES: **S**ECURE

Secure attachment breeds:

- Self regulation
- Flexibility
- Organization
- Empathy

- Research shows that securely attached adults do better in life overall, including employment, marriage, parenting, and friendships.
- Insecure attachment styles will struggle in relationships and will lead to a sense of unfulfillment.

ATTACHMENT **S**TYLES

Avoidant Attachment

- Often does not speak out when has a need
- May have inability to negotiate
- May resist help unless at end point

ATTACHMENT **S**TYLES

Ambivalent Attachment

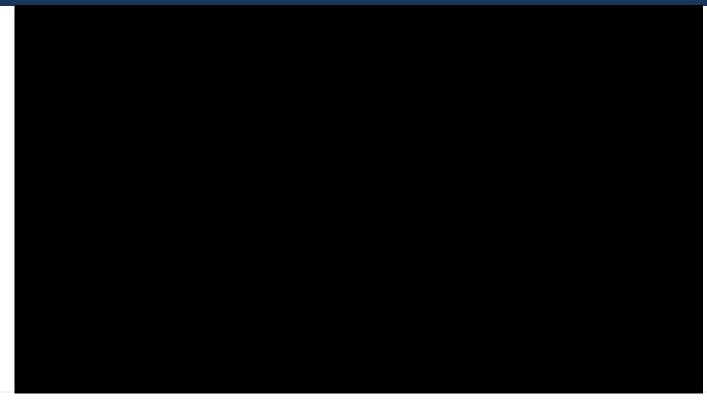
- Give inconsistent care
 - Care may be intrusive or absent
 - Responses may be nurturing at times or punitive at others

ATTACHMENT **S**TYLES

Disorganized Attachment

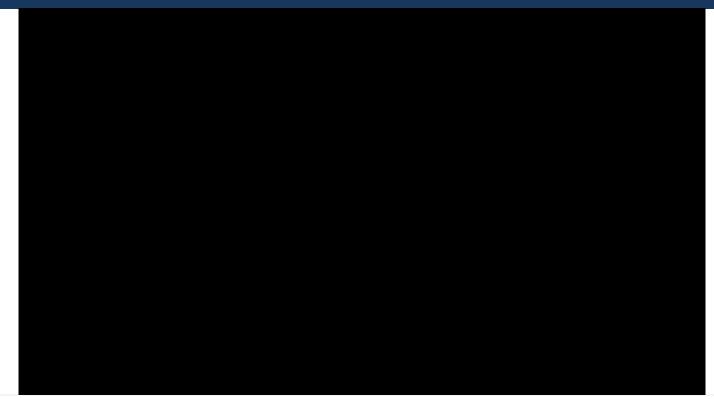
- No real strategy to deal with stressors
- Aggression
- Manipulation
- Control
- Difficulty completing tasks, focusing (chaotic)

ATTACHMENT THEORY: SECURE

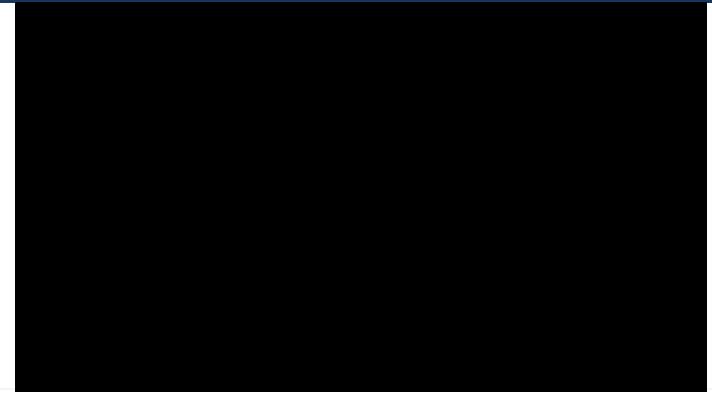


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ATTACHMENT THEORY: AVOIDANT



ATTACHMENT THEORY: AMBIVALENT



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SELF-REGULATORY SKILLS



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THE MOST IMPORTANT FACTOR

The Most Important Factor in Successful Caregiving

- The least known factor
- The most rejected factor

The Caregiver Making Sense of Their Own Past

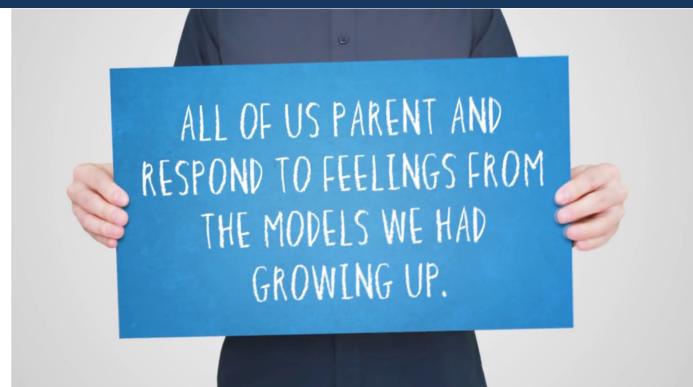
ACTIVITY

- Google "How We Love Quiz"
- Click on link "Love Style Quiz How We Love"

SECURE ATTACHMENT

- Four Pillars
 - Give care
 - Receive care
 - Negotiate
 - Okay with autonomous self

CAREGIVING STYLES VARY GREATLY

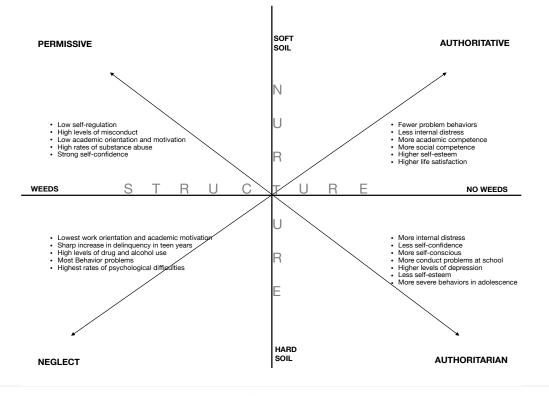


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INTERPERSONAL NEUROBIOLOGY

- BIG paradigm shift in caregiving
- HIGH structure, HIGH nurture (does not allow for disruptive behavior)
- Discipline with the definition of structure that aids in training a disciple
- It isn't "fixing the person" or changing behavior as much as it is changing the relationship
- HIGH investment, but HIGH yield
- Optimally guides behavior with maintaining the person in the pre-frontal cortex
- Will require caregiver to spend much work on themselves

CAREGIVING STYLES

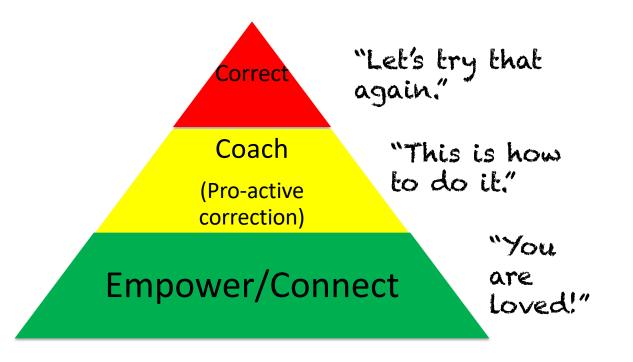


TBRI: Basics

3 PRINCIPLES:

- 1. EMPOWER (Body)- Meeting the needs of the child allowing the child to feel safe and well cared for.
- 2. CONNECT (Spirit)- engaging through activities and healthy touch. Including child in decisions. Building a trust-based relationship.
- 3. CORRECT (Soul)- Guiding new behavior by re-directing and working on behavioral skills proactively. Coaching a child and preparing them in a playful setting with the skills that will allow them to get it right the first time in daily life events. Stop wrong behavior and re-do with praise once right behavior is achieved.

TBRI: Basics



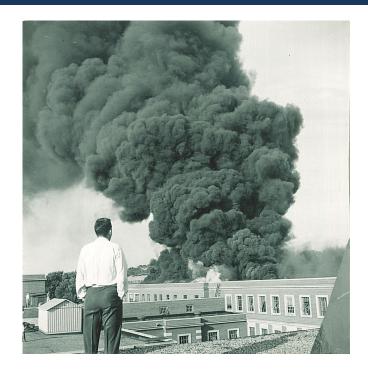
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Bridging the Tools: "The most important factor in successful caregiving"

- Understand the individual tools of the therapeutic model
- Attachment style is foundational to emotional intelligence (EQ) and trauma-informed therapeutic models
- Learn to bridge the tools together

Emotional intelligence: Aware of what is going on within me and around me. This requires me knowing who and where I am in any given situation.

No Therapeutic tools.



Therapeutic Model without EQ



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EQ

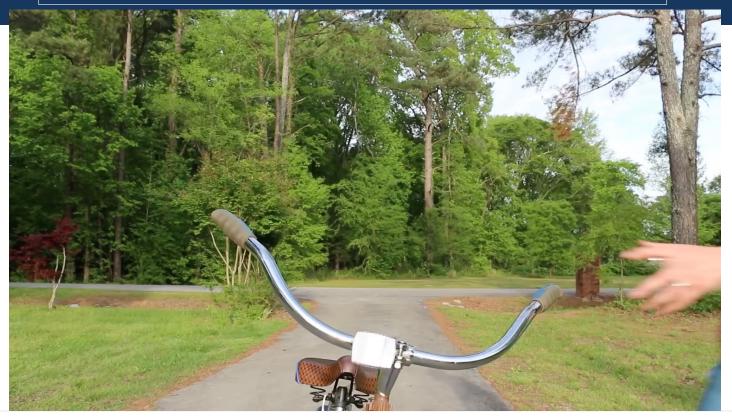
Tools

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KNOWLEDGE IS NOT UNDERSTANDING



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