Bringing Mindfulness to our Work with Families Experiencing Trauma, Loss, and Grief

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Jill Hennes
LICSW, IMH-E® (IV-C)

Independent Consultant and Trainer
Learning Objectives

- Understand of the complexities of working with families who have experienced complicated loss and grief and suffer trauma-related challenges in relationships

- Consider the relationship as a vehicle for learning and growth

- Learn simple strategies that promote mindfulness and self-reflection and also serve to prevent or mitigate vicarious trauma
JUST BREATHE

"BREATHE IN AND OUT? WHAT OTHER WAY IS THERE?"
Understanding Complexity: The Family’s Story
WHERE ARE YOU?
AND the ability to engage in relationship
Childhood trauma
Experience in the first years of life shapes future relationships

- Early experience in relationships form the foundation for all subsequent development, and influence lifelong learning, behavior, and both physical and mental health
What Is Trauma?

• An exceptional experience in which powerful and dangerous stimuli and which
  – Overwhelms the child’s developmental and regulatory capacity (including the capacity to regulate emotions)
  – When child has insufficient resources to cope with the event

C. Ghosh Ippen
IMPACT OF TRAUMA depends on...

Children’s *perceptions of threat* during and following a potentially traumatic event...

and the *nature of caregiver responses* following the trauma...
Trauma & Brain Development

Adapted from Holt & Jordan, Ohio Dept. of Education
A Healthy Nervous System

- Arousal-activation
- Sympathetic
- Parasympathetic
- Settle

Normal Range
Symptoms of Un-Discharged Traumatic Stress

Anxiety, Panic, Hyperactivity, Exaggerated Startle, Inability to relax, Restlessness, Hyper-vigilance, Digestive problems, Emotional flooding, Chronic pain, Sleeplessness, Hostility/rage

Depression, Flat affect, Lethargy, Deadness, Exhaustion, Chronic Fatigue, Disorientation, Disconnection, Dissociation, Complex syndromes, Pain, Low Blood Pressure

Stuck on “On”

Stuck on “Off”
Grief and Loss

- Early caregivers relationship disruption
- Losing or not knowing parent(s)
- Death of relative, friend, pet
- School and housing changes
Complex Trauma

The experience of multiple, chronic and prolonged, developmentally adverse traumatic events

most often of an interpersonal nature

often occurring within the child’s caregiving system and early-life onset.

B. van der Kolk
# TRAUMA RESEARCH

<table>
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<th>Veterans</th>
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<th>Childhood Chronic</th>
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<td>• PTSD</td>
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**TRAUMA RESEARCH**
Developmental Trauma Disorder

Multiple or chronic exposure to one or more forms of developmentally adverse interpersonal trauma

Triggered pattern of repeated dysregulation in response to trauma cues

Persistently altered attributions and expectancies

Functional impairment
Disorganized Attachment

- Parent provides care that is frightened or frightening:
  - Parent exhibits fear of child (child is a trigger to trauma)
  - Parent elicits fear in child (acts in menacing way)
- Child attempts to adapt to frightening parent:
  - Approaches reunion with bizarre, contradictory behavior
  - Has no organized strategy for maintaining proximity to attachment figure
  - Aggressive and controlling behavior
  - Poor self confidence, lower academic ability
Symptoms of Trauma

- Dysregulation of emotions
- High level of anxiety or panic
- Dissociation or disconnection with the self
THE BRAIN
Historical Trauma

- Soul wounds: “the cumulative emotional and psychological wounding over the lifespan and across generations”
  Maria Yellow Horse Braveheart, (2003).
- Post Traumatic Slave Syndrome
  Joy DeGruy (2010)
- Refugees/Immigrants/Undocumented
Trauma-informed practice

- Adverse childhood experiences (ACEs)
- Trauma history revealed in chaotic or confusing relationships
- Historical
- Personal loss, experience of violence
- Mindfulness
- Self-care
This work is inherently arousing
Who am I?
Memory

“...autobiographical memories are not precise reflections of reality; they are stories we tell to convey our personal take on our experience.”

“Whether we remember a particular event at all, and how accurate our memories of it are, largely depends on how personally meaningful it was and how emotional we felt about it at the time. The key factor is our level of arousal.”

Bessel van der Kolk
Time dimension

“... the imprints of traumatic experiences are organized not as coherent logical narratives but in fragmented sensory and emotional traces: images, sounds, and physical sensations.”

Bessel van der Kolk
Wordless horror

- Victims of trauma have no words for the things they have been too afraid to remember.

- Without the words to organize the experience, the body’s response – *fight, flight, freeze* – remains active and contagious.
Numbing

“Trauma interferes with a person’s ability to feel ALIVE in this moment.”

Bessel van der Kolk
Trauma changes the brain
The Body Holds the Trauma
Coping behaviors ensured survival
Trauma pushes you (your mind) away
Imagine... what it must be like

- Wordless horror: Broca’s area shut down
  - preverbal experience
  - impossible to find words, describe
  - Unable to organize experience
- Preoccupation with trauma
- Avoidance of triggers
- Dissociation

- Say what you think people want to hear or what you heard someone say about you... whatever
- Distracted, distressed, irritable, impatient, unfeeling
- Thoughts/images/sensations intrude on daily activity
- Avoid certain things at all cost, without knowing why
In Relationship

- Why should I trust you?
- You’re just like all the others (who have hurt me)
- I’m not worth your time/attention/caring
- You won’t like me once you get to know me
So hard to understand the story...

- Hard to follow or find connections to make sense of the family’s story – big gaps, contradictions, inconsistencies
- Feel you don’t really know her
- Irritating trying to figure it all out!’ Your brain feels foggy
- Baby gets lost
- If she’s not thinking about what might happen next, SOMEONE HAS TO... AND I’M IT
SITTING WITH...

- You get charged up
- You have your own coping strategies
- Recognize the pain is real and reasonable - you feel empathy, but that doesn’t feel so good...
- Plus you have your own heartaches - loss, hurts,

- “Feel” the inner turmoil
- Accept the disturbance
  - Or shut down
  - Or take control
  - Or run

- How to TOLERATE THE DISTRESS?
WHEN STRESSED

- Dysregulation leads OUR brains to...
  - Narrow our attention, perceptions
  - Limit creativity, problem-solving capacity
  - “Pulls” us to fix, run, do
TYPES OF TRAUMA

- **Primary Trauma**: direct experience of trauma

- **Secondary Trauma**: the stress from helping or wanting to help a traumatized or suffering person.

- **Vicarious Trauma**: the transformation of the inner experience of the helping person that comes about as a result of empathic engagement with the traumatic experience of the person being helped.
SECONDARY TRAUMATIC STRESS

The experience of people who are exposed to the trauma of others and as a result develop traumatic symptoms and reactions.
Signs of Vicarious Trauma

- Feeling helpless and hopeless
- A sense that one can never do enough
- Diminished creativity
- Inability to embrace complexity
- Minimizing
- Chronic exhaustion and physical ailments
- Inability to listen/deliberate avoidance
- Dissociative moments
Vicarious trauma: emotional reactions

- Sense of persecution
- Guilt
- Fear
- Anger and cynicism
- Inability to empathize/numbing
- Addictions
- Grandiosity: an inflated sense of importance related to one’s work
TENSIONS IN THE SYSTEMS

- Narrow focus of and various demands re documentation may not reflect the complexity of the work
- Integration of emotion and reason
- Tolerating the intolerable
Why MINDFULNESS?

- Your health
- Your effectiveness
- Ethical mindset that cultivates wise action, social harmony, and compassion.
STRATEGIES
that promote mindfulness
and resilience
Compassion Fatigue

Babette Rothschild, MSW
It is not the strongest of the species that survives, nor the most intelligent that survives. It is the one that is the most adaptive to change.

Charles Darwin
RESILIENCE

• Ability to recover quickly and to bounce back from change, misfortune, difficulty or setbacks.

• Developing resilience is a process, not a trait which some have and others do not.

• Individuals develop coping strategies within an environment which promotes well-being and safety.
CAPACITIES THAT PROMOTE RESILIENCE

• A sense of *humor*

• Ability to develop realistic *goals*

• Ability to *accept* circumstances

• *Meaningful connections* with others
ACCEPTANCE
COMPASSION
Your BODY

Rested?
Fed/Hydrated? (What quality?)
Exercised?
Tension?
Energy?
Your MIND

Calm?
Focused?
Available?
Interested?
Not distracted?
Emotions: offer and practice naming
Be cool
monitor your heat level

van der Kolk
Your SPIRIT

- What fills up your reservoir?
- How and to whom do you speak your heart’s desire?
- When and how do you receive attention from those you love?
C'mon
Inner peace
I don't have all day
We can make our minds so like still water that beings gather about us to see their own images and so live for a moment with a clearer, perhaps even a fiercer life because of our silence. ~

WB Yeats
Relationships are the catalyst and the context for all early learning.
In the company of another

- Attunement develops neurons
- Emotion in one arouses the same in another
- Regulation of emotional states is required for cognition – and new learning – to occur
- Resonance “feeling felt” induces calm

Bruce Perry, 1999
Use feelings to *inform* rather than *interfere* with the work

(Weatherston, Weigand & Weigand, 2014)
Diversity Informed Practice

*Self-awareness* leads to better services for families

- One’s own culture, personal values, beliefs
- Impact of racism, classism, sexism, and other systems of oppression

Chandra Ghosh-Ippen, 2009
RESOURCES

Jon Kabat-Zinn

Linda Kavelin Popov

**COMING TO OUR SENSES**
Healing Ourselves and the World through Mindfulness

**A PACE OF GRACE**
The Virtues of a Sustainable Life
No simple solutions
What You Can Do as an INDIVIDUAL

- Know that you are not alone and your reaction makes perfect sense
- Recognize your personal signs of stress
- Engage in healthy self-soothing and relaxing activities
- Pay attention to your work/life balance: cherish enjoyable outside activities and outlets
- Check your expectations for yourself
- Invite acceptance as a way to honor the difficulties without getting stuck in them
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Bruce Perry, 1999
The supervisory relationship

- Borrow each others’ calm (breathe together!)
- Recognize and talk about your personal signs of stress (how would your supervisor know that you are struggling?)
- Pay attention to work/life balance, make accommodations when life gets especially hard,
- Check in for feedback and your expectations for each other
- Find acceptance of each other’s strengths and challenges
What is Reflective Supervision?

• “A safe and compassionate kind of mirroring”
  Weigand, 2008

• “An act of shared mindfulness”
  Gil Foley, 2010
Reflective Process

- Contain and regulate emotion
  - Shared attention and conscious self-regulation
- Think about themes, patterns
- Remember, describe, anticipate, imagine...
- ACCEPT what is
- Explore meaning, hypothesize, link with theory
- Consider possible next steps, implications, what to look for
Working Alliance

• The process of creating and nurturing a supportive professional relationship
• Based on mutual understanding of the purpose, focus, and goals of the work
• The quality of the working alliance can directly impact the provider’s sense of efficacy

Watson, Gatti, Harrison, Hennes, & Harris 2014
Find a co-regulatory partner

A trusted “other” (who is dependable, reliable, interested in YOUR perspective)
- Regain/maintain a calm, nonreactive state

Create a regular “reflective space”
- To notice and articulate emotional responses to the work
- Explore various perspectives and meanings
- Re-ground in theory
- Revitalize passion for the work
Don’t be shy about using Employee Assistance or your health plan when things are challenging. Be proactive!

Get regular Infant Mental Health Consultation
What You Can Do as a TEAM

• Create environments in which everyone feels safe and heard
• Learn about vicarious and secondary trauma and how different people are impacted differently
• Listen and honor: accept without judging or blaming
• Create buddy systems and mentoring
• Replenish often: get away for a retreat, do a 5K together, etc
Deep inhale, hold it for a moment and then a longer exhale

_Why:_ Research shows that purposeful, regulated breathing helps to calm the amygdala (smoke detector for the brain) and decreases the amount of adrenalin, stress hormones, cortisol being released into our body
FIRST AID KIT: “Taking in the Good”

How:

• Actively notice positive experiences
• Hold it in awareness for a while (5, 10, 20 seconds)
• Focus onto the emotions and body sensations that are part of this awareness
What gives us HOPE?
Early intervention can shift the balance

- Risk to resiliency
- Development can be compromised
- Building capacities
- Addressing challenges
NEUROPLASTICITY

The capacity of the brain to rewire itself, to grow new neurons and new connections among those neurons, thus new neural pathways and circuits, even repair brain structure, lifelong.

Linda Graham, MFT – “Bouncing Back”
Using your relationship with the family as a tool to promote growth and change
CURIOSITY
IMAGINATION
INTEREST
AGENCY
JOY OF
ACCOMPLISHMENT
Be a candle
RESOURCES: Culture and Trauma

- The Healing Collective: http://www.healingcollectivetrauma.com/
RESOURCES: Mindfulness

RESOURCES:

Infant and Early Childhood Mental Health


RESOURCES: Reflective Process

RESOURCES: Reflective Process

The FAN Approach

The Fussy Baby Network’s unique approach to working with families is called the FAN (Facilitating Attuned INteractions). The FAN approach focuses on the parent’s concerns and uses five core processes to match interactions to what the parents are showing they can most use in the moment. [http://www.erikson.edu/fussybaby/](http://www.erikson.edu/fussybaby/)