

The BILD Positive Behaviour Support International Research and Practice Conference 2014

Pre-Conference Symposium on Trauma Informed Care

7 May, Glasgow





Brodie Paterson

BILD PBS Conference 2014
Pre-Conference Symposium



Integrating an awareness of trauma into practice, staff training and support and organisational re-design

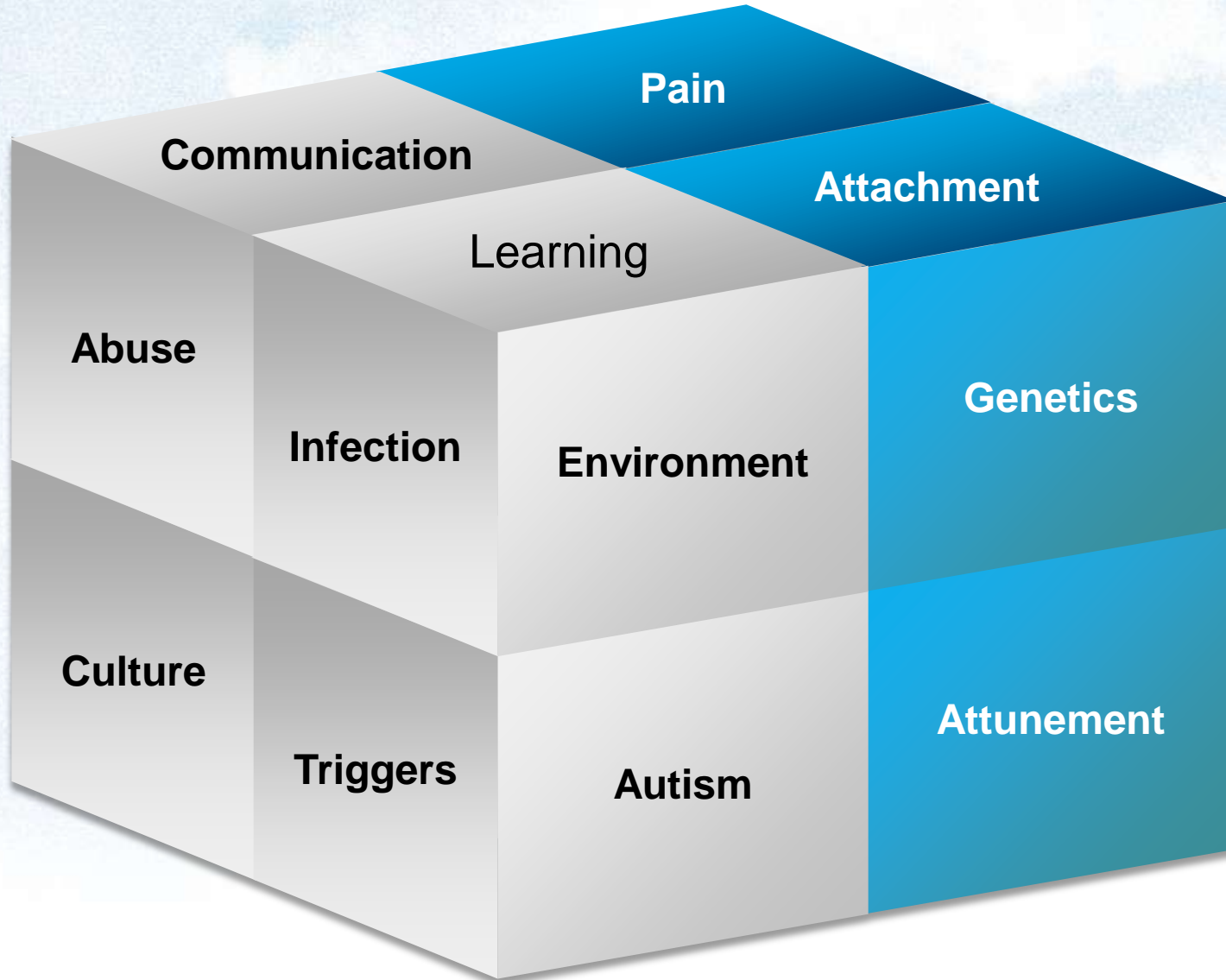
**Brodie Paterson, Ph.D.,
M.Ed., BA(hon), RMN.,
RNLD, FEANS
Director CALM**

Introduction

- Impact of trauma upon the individual with LD. Brodie
- Impact of trauma on individual staff / teams supporting people with LD B. Bowen
- Impact upon organisations supporting people with LD and challenging behaviour. M Nunno



Causes of Challenging Behaviour

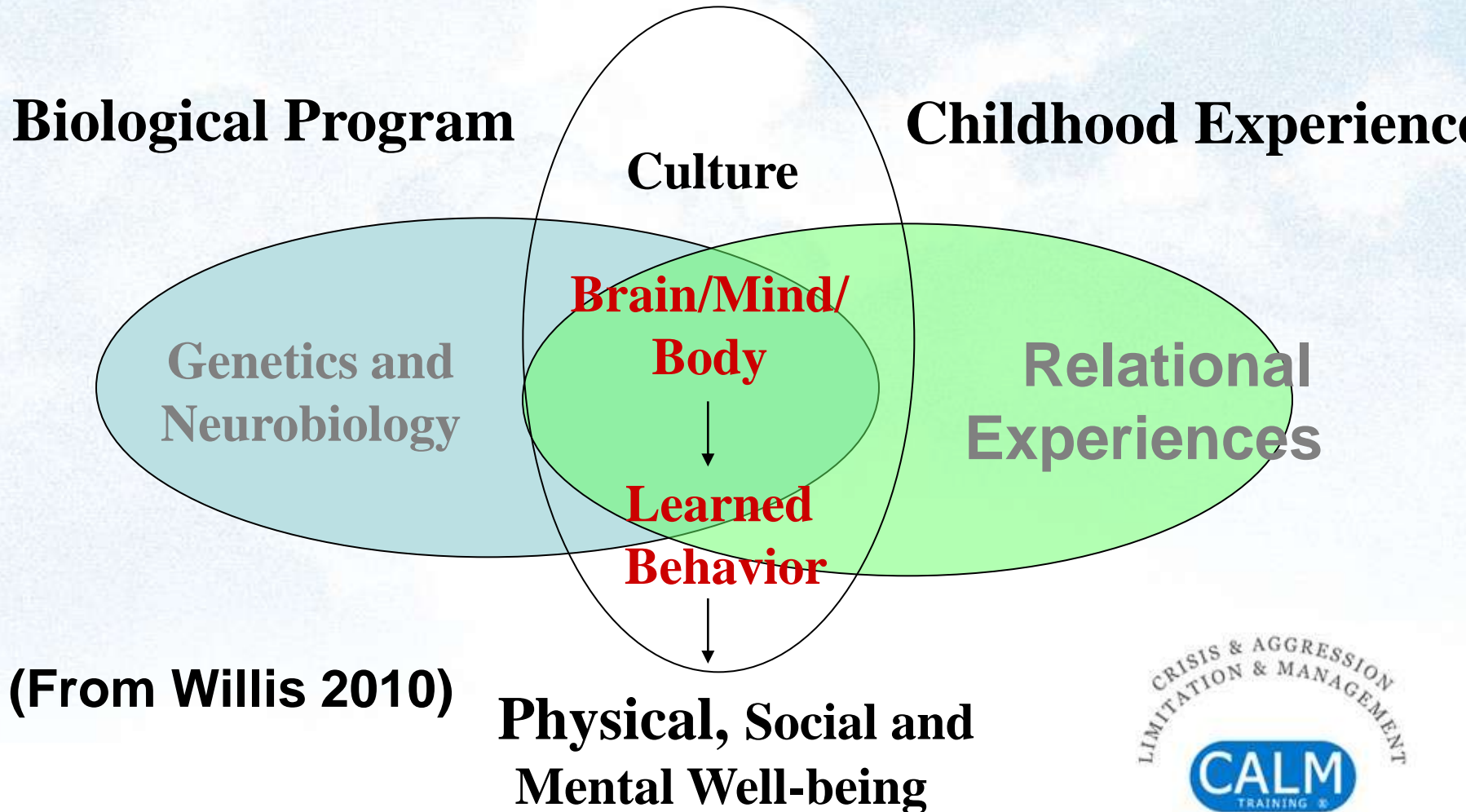


Risk Factors

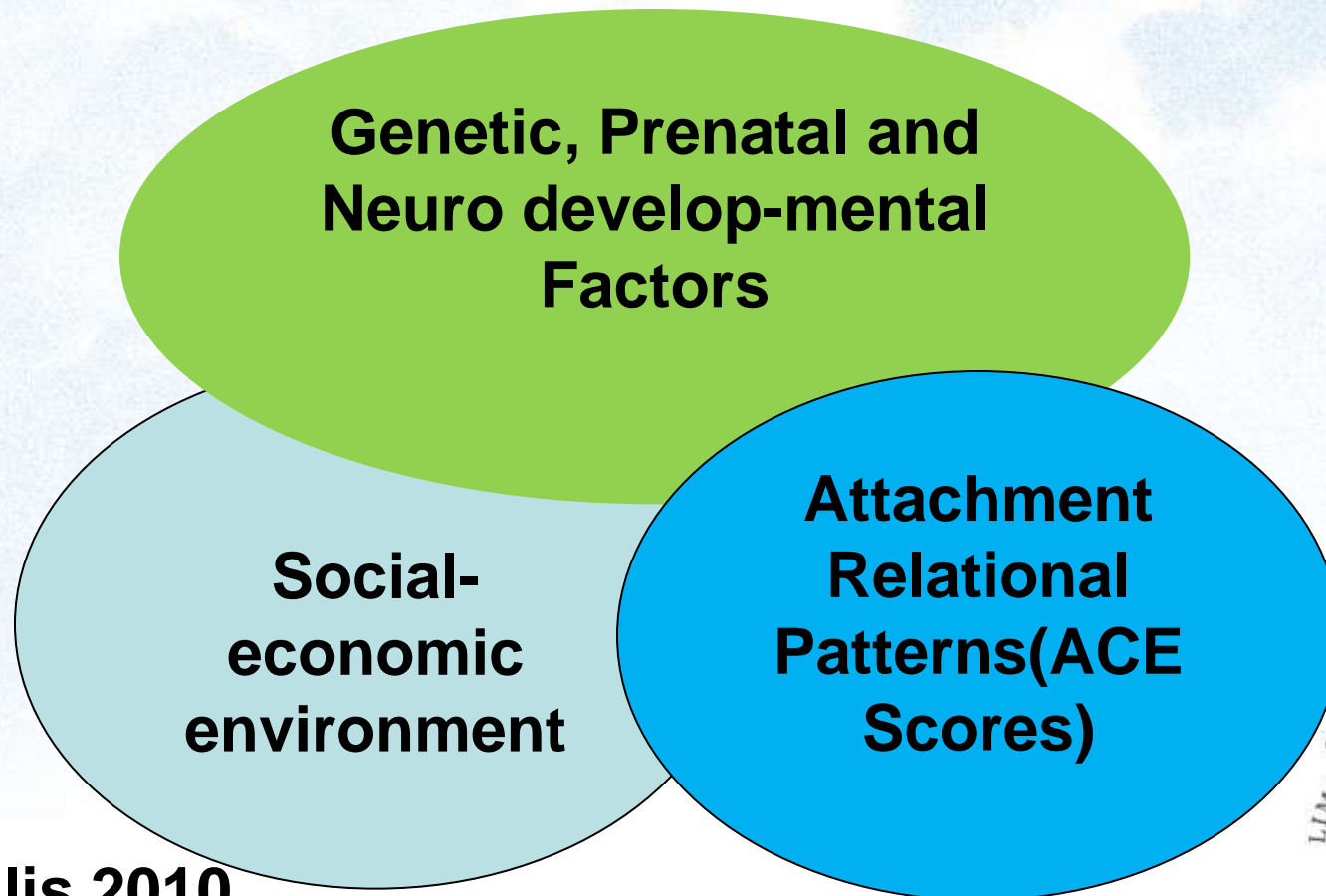
- **Extent of Disability**
- **Physiological (inc Pain)**
- **Communication deficits**
- **Mental Health Issues**
- **Autistic Spectrum Disorder**
- **Environmental Deficiencies**
- **Attachment / Relationships**
- **Interactional style**
- **Trauma**



Underpinning Development Model



“Three-legged stool” for “predicting” developmental and health trajectories



Willis 2010



Why do we need to attach?



- **Emotional regulation**
- **Empathy**
- **Rage management**
- **Impulse regulation**



Consistent, sensitive and appropriate care-giver response to distress

Empathic modeling Internal Working Model

Inconsistent, insensitive, or dismissive responses

Empathic overarousal becomes overwhelmed with negative affect and refocuses efforts on reducing their own distress

Positive emotionality:
 ability to monitor or adjust the duration or intensity of emotional reaction to cope constructively with a distressing situation or achieve a goal

Panfile, T. M., & Laible, D. J. (2012). Attachment Security and Child's Empathy: The Mediating Role of Emotion Regulation. *Merrill-Palmer Quarterly*, 58(1), 1-21.

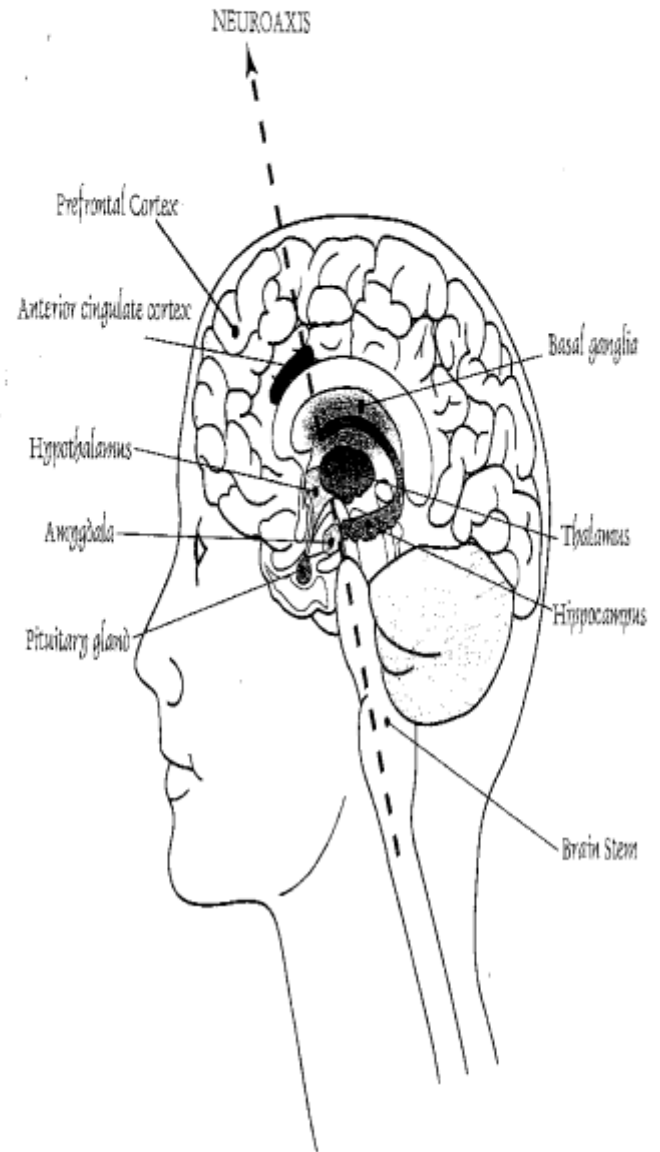


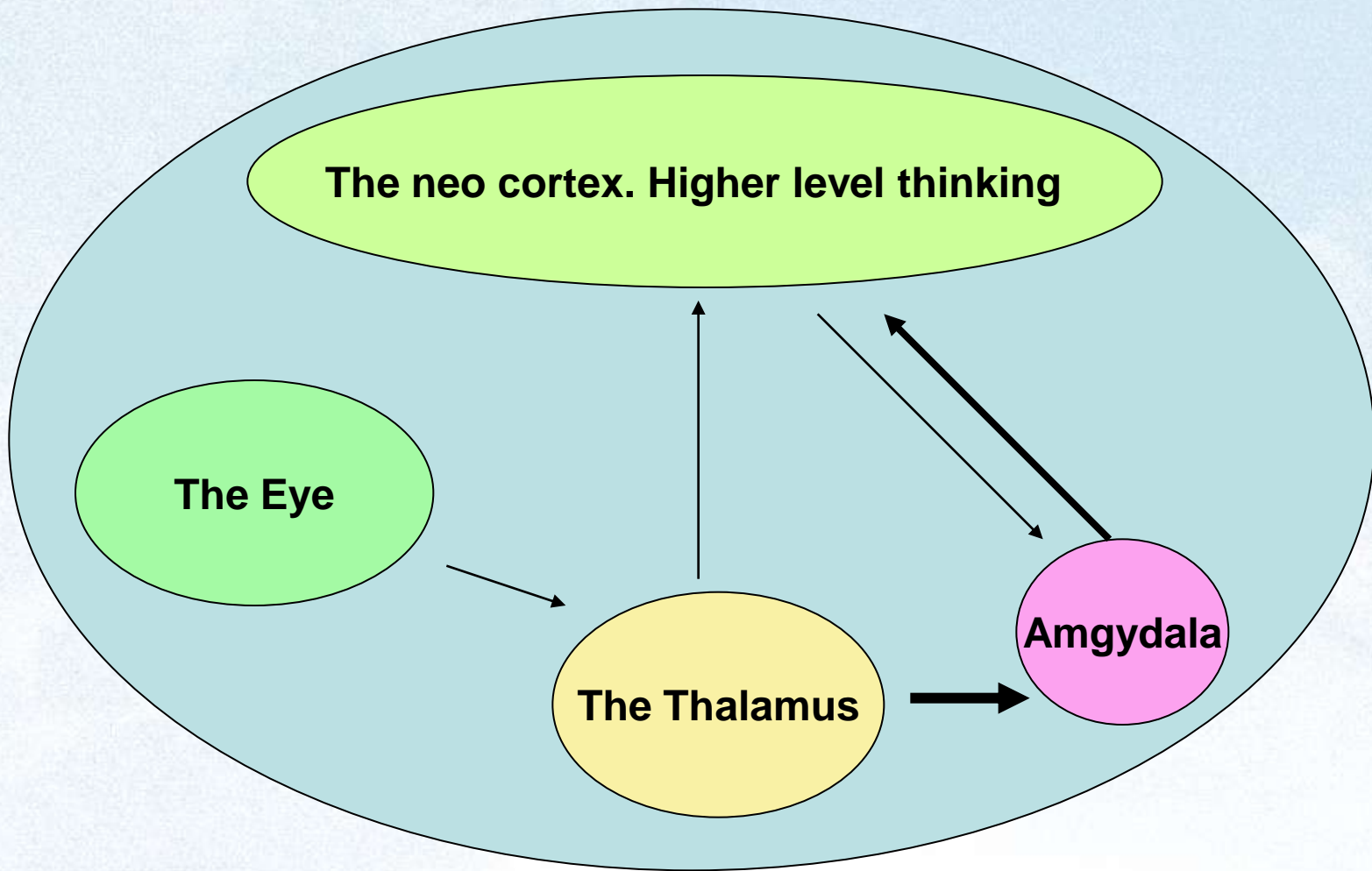
Triune Brain Theory

**Lizard. Survive React Repeat,
Repeat, Repeat**

**Mammal. Feel, remember
interact with others**

**Great Ape. Talk – Think –
Moves - Create – Learn - Lie**





In an emotional hijack the stimulus from the eye hits the amygdala first. If the amygdala detects a threat it sets off the fight flight freeze reaction hijacking both brain and body (adapted from Morris and Casey 2006).

What is Trauma?

- Traumatic events overwhelm the ordinary human adaptations to life.
(Herman, 1997)
- An exceptional experience in which powerful and dangerous stimuli overwhelm the child's capacity to regulate emotions.
(Early Trauma Treatment Network)



Trauma memories



*Ask
for it
by
name!*



ELDORADO
SCOTLAND'S BEST SELLING PROPRIETARY WINE

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Before And After Birth.....

- Prolonged elevation of maternal cortisol may disrupt early brain development.
- Infant brain (McEwen et al 2009) “retain that initial programming and put the stress response system on a short-fuse and high-alert status,”
- Combined with Alcohol Misuse



Sensitisation

- Experience creates a “processing template” through which all input is filtered.
- A sensitized neural response results from repetitive neural activation or experience.
- The system becomes more sensitive with use.
- Once sensitized, the neural activation can be elicited by even minor stress (Perry et al., 1995). The child can be responsive to what appears to others as something inconsequential.

Behavioural Learning Theory

Motivation +
Antecedent +
Behaviour +
Consequences +

= Behavioural Learning Theory



(Glasberg)

Multi-element Positive Behavioural support

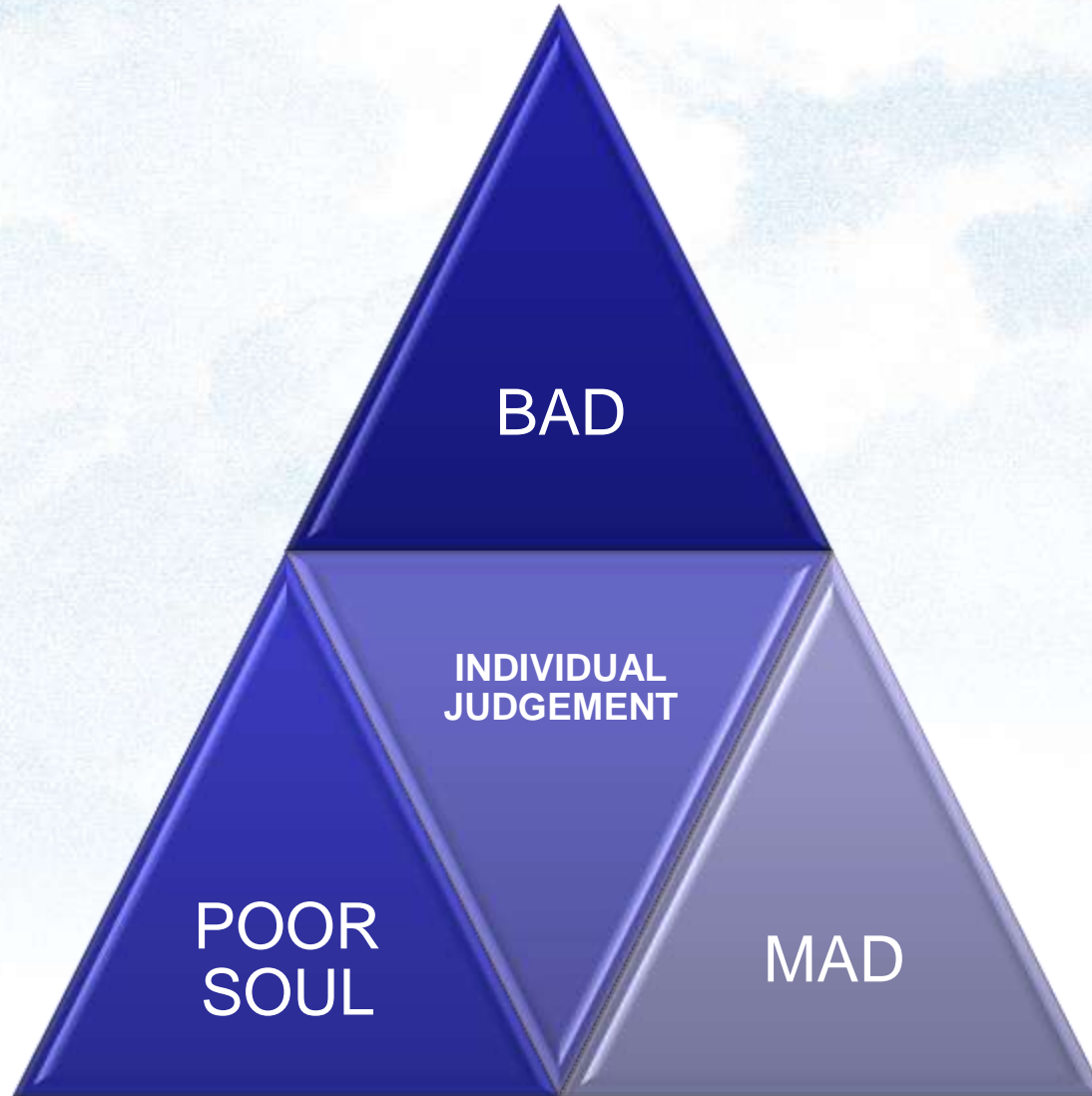
Primary Prevention Environmental Changes <ul style="list-style-type: none">•Setting•Interactions•Activities•Choice•Variety•Triggers	Primary Prevention Skills Teaching <ul style="list-style-type: none">•General skills•Coping & tolerance skills	Primary Prevention Direct Interventions <ul style="list-style-type: none">•Differential Reinforcement•Ignoring•Cognitive Therapy•Counselling	Secondary Prevention <ul style="list-style-type: none">• De-Escalation• Facilitated Relaxation.• Instructional Control.	Tertiary Prevention <ul style="list-style-type: none">• Escape Techniques• Proximity Control.• Remove others at risk.• Physical Blocking / Restraint.• Debriefing
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Functions of Behaviour

- | - Short term | Longer term |
|----------------------|---------------|
| - Escape / Avoidance | •Control |
| - Attention | •Power |
| - Tangible | •Self esteem |
| - Sensory | •Compensation |
| - Automatic | |

Staff Causal Assumptions



STAFF ACT ON FEELINGS

FEELING	Thought	CONSEQUENCE
BAD > Anger Fear	<i>"They can't get away with that"</i> <i>"He needs to learn he can't do that"</i>	Punishment Unplanned ignoring
MAD > Guilty Frustrated	<i>"I don't know what to do"</i> <i>"we can't go on like this"</i> <i>"they need to sort him out"</i>	Unplanned ignoring Avoidance Inconsistent
POOR SOUL > Pity	<i>"its not his fault"</i> <i>"its just how he is"</i> <i>"there's no point"</i>	Spoil Don't follow Plan Give up

Attribution and Emotion

Perceptions that the behaviour is

- a) Controllable by the person
- b) Internally caused (actor/observer)

Associated with

- a) Higher levels of anger
- b) Lower optimism
- c) Less willingness to help

•(Dagnan & Cairns, 2005;

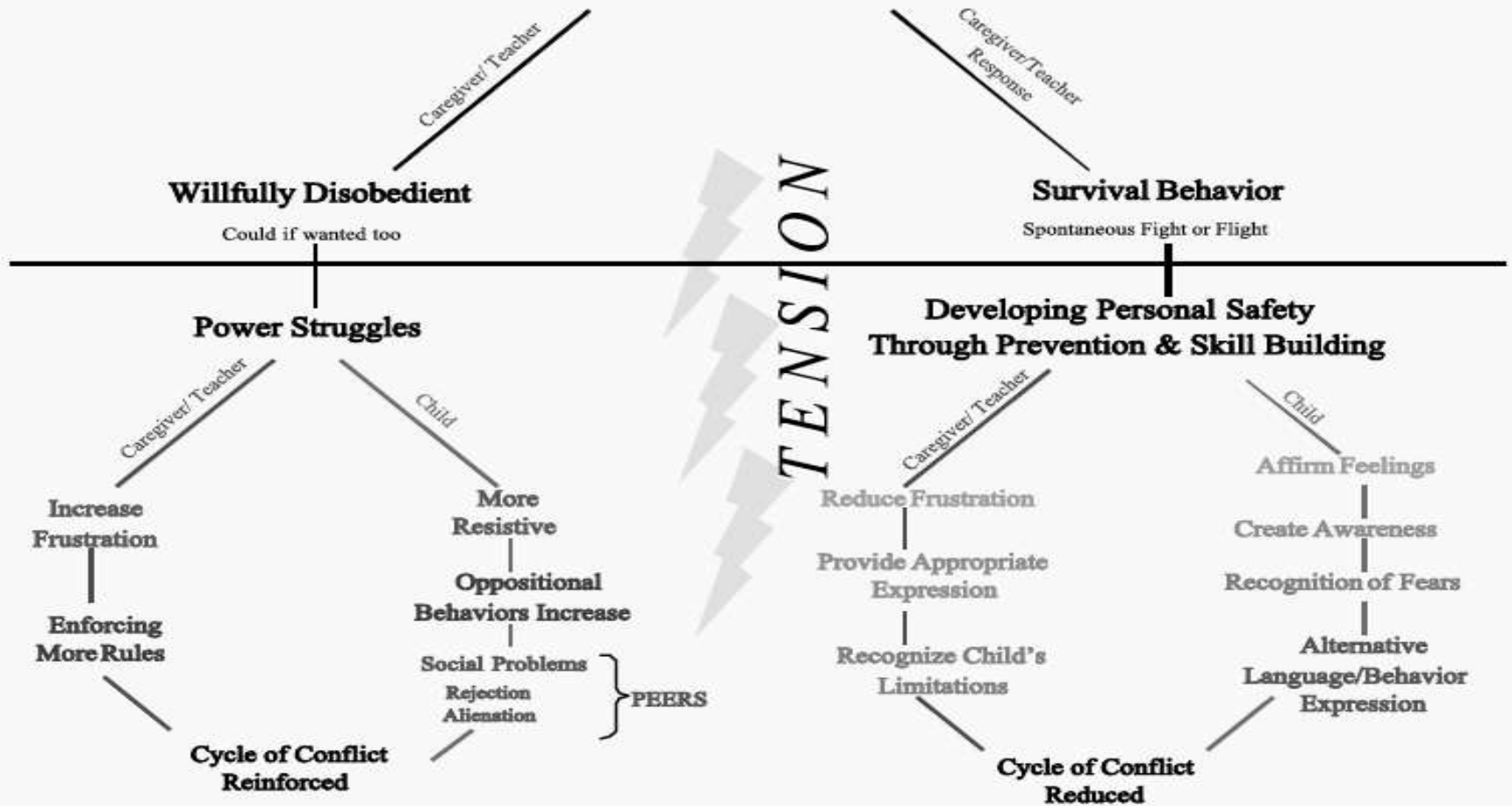
•Dagnan & Weston, 2006; Wanless & Jahoda, 2006).

- May lead to sabotage of others efforts to help



PARALLEL PROCESSES: STAFF & SERVICE USERS

Framework for Intervention AGGRESSION

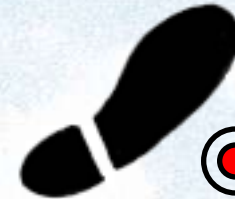


(Henry, Sloane and Black-Pond 2007)

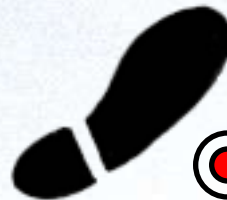
Your 5 steps to TIC



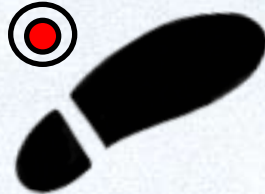
Step 4 How will we know the plan is working



Step 5 Who is Doing what When?



Step 3 Have we all agreed how we are going to monitor progress



Step 2 Have we all agreed what we are going to do do that is different?



Step 1 Are we all thinking about this the same way

You

