Understanding and Managing Trauma Symptoms without Medications

Dr. Maya Moody DO, FAAP

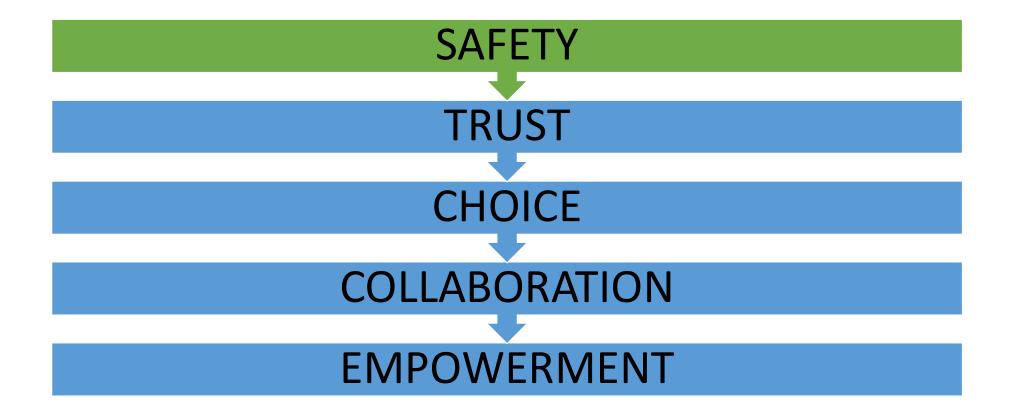
Pediatrician

Center for Excellence in CHILD Well-Being

What are some trauma symptoms?



Trauma Informed Care Components



SAFETY – Physical AND Emotional

- WORDS: "You are safe" "This is a safe place"
- TOUCH: Follow child's lead touch can be comforting or triggering
- KNOW: Situations or relationships that are safe or unsafe
- SAFE SPACE: Calming Corner promote self-regulation



Big Bird's Comfy Cozy Nest



Safe, Stable, Nurturing Relationships

Safe, Stable, Nurturing Relationships

SAFE = free from harm

STABLE = a high degree of consistency



NURTURING = compassionate, responsive caregiver(s)



CDC's Essentials for Childhood Framework



Assuring safe, stable, nurturing relationships and environments for all children







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Preparing Ourselves



This is real.

This is hard.

You have to be your best self... or at least your next-best self.

Self-Regulation: The eye of the storm

- Monitor your own stress, reactivity, reactions in context of your own trauma, background, cultural norms.
- "Share your calm, do not contribute to the chaos!"
- Create your own Action Plan!



Name Position						
Mission Statement	and Target Population:					
Accountability Part	tner(s):	Frequency of Meetings: Weekly				
Career Mentor:						
		Frequency of Meetings: Weekly				
Tendency to Get	Known Overwhelm Triggers:					
Overwhelmed:	Emails Over-commitment Big deadlines Presentations					
Persistent	Many to-dos	Many to-dos Rushing Inter-personal dynamics Stress/Emotions				
🖾 Mild	🖾 Sudden changes 🖾 Lack of	Sudden changes 🔲 Lack of sleep or exercise 📄 Other:				
Moderate	eason: 🗆 Fall 🗆 Winter 🔲 Spring 💷 Summer 💷 Other:					
Severe	Date Last Reviewed:					
Green Zone: Stro	ng Worki – Prevention & Man	agement Steps method of capturing and organizing next steps				
		times a Week Month				
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GREEN ZONE: Prevention and Maintenance

YELLOW ZONE: Management Steps and Quick-Relief Measures

RED ZONE:

Continue Management Steps, Quick-Relief Measures Reach out for help!

Developed by Chidiogo Anyigbo, MD, MPH. Updated: 9/21/21

Tendency to Get	Known Overwhelm Triggers:				
Overwhelmed:	Emails	Over-commitment Big deadlines		Presentations	
Intermittent or Persistent	□ Many to-dos	□ Rushing	□ Inter-personal dynamics	□ Stress/Emotions	
Mild	□ Sudden changes □ Lack of sleep or exercise □ Other:				
Moderate	Season: 🗆 Fall	🗆 Winter 🛛 Spring	□ Summer □ Other: _		
□ Severe	Date Last Reviewed:				

GREEN ZONE

Feeling in control Feeling of satisfaction/accomplishment Healthy integration of work and rest

ACTION ITEMS: Most productive times To-do list: making, reviewing, editing Check-in with mentor, support person

Scheduled ME-TIME

YELLOW ZONE

Increased irritability Feeling stuck Problems balancing sleeping, working, and rest

Delegate & Tame Approach: Name all the things causing overwhelm, determine to delegate, reschedule, or remove

Rapid Evaluate & Act Cycle: Spend 15 minutes addressing tasks that can be completed in 2 minutes followed by deep focus for 35 mins on the toughest task on list (goal is use a small win to make progress), repeat for ____ hours)

RED ZONE

Difficulty focusing Irritability/anger outbursts Feeling overwhelmed Physical/Behavioral changes (pain, change in appetite, insomnia

Reset Measure: sleep, break, exercise, meditate OR/AND Seek Another Perspective: therapist, coach, mentor

QUICK-TRIAGE Steps & GET HELP!

Developed by Chidiogo Anyigbo, MD, MPH.

Reasons Children May Dysregulate

FEAR: Kids may have increased vigilance, may misread facial expressions or other cues. Triggers may seem random – smells, touch, tone of voice.

NEEDS: Emotional or physiologic – actual or perceived

COPING MECHANISM: Self-soothing behaviors may look like "problem behaviors" but may be efforts to calm or regulate themselves.



TO AVOID DANGER

TO GET NEEDS MET





MALADAPTIVE SELF-CALMING

Co-regulation

- Validate and reflect
- Use emotional language
- Visual cues facial expression, colors for emotions









What do you notice about these pictures?





Sensory – Soft, squishy, heavy, rocking, swinging













Violent episodes

- Safety, safety, safety
- Do not entrap or restrain
- Sit calmly, practice your own breathing, grounding exercises
- Use 5 senses





Behavior always has a meaning

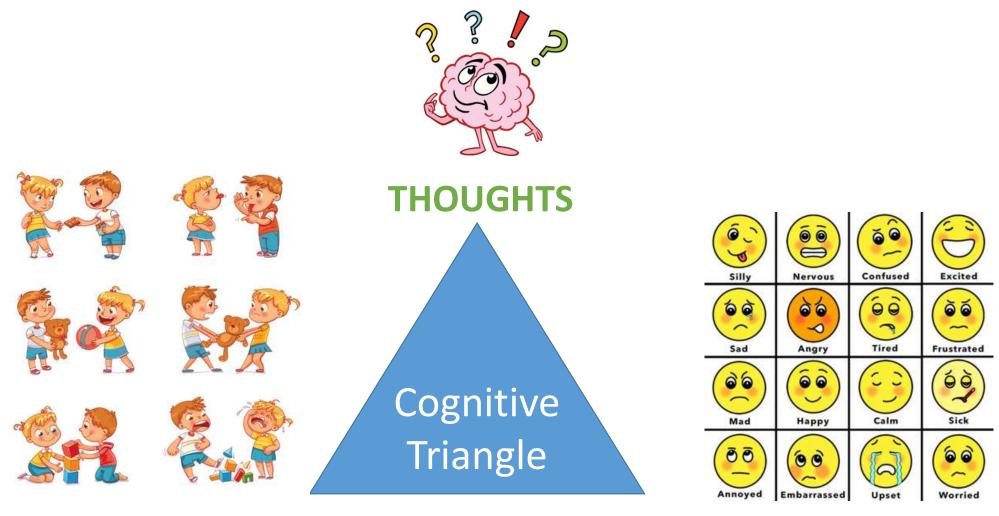
- "Get curious, not furious"
- Understand that thoughts, feelings and behaviors are all connected.
- Examples:
 - Child worries that they can't fall asleep, feels stressed, then cannot fall asleep, thoughts about their inability to fall asleep are reinforced.
- Response to behavior:
 - "It is okay to feel angry, but it is better to tell me that you are angry than to throw your toys and break them. Let's think about how you might let me know how you feel."



DEDICATED TO THE HEALTH OF ALL CHILDREN*



Pediatric Approach to Trauma, Treatment and Resilience



BEHAVIORS

EMOTIONS

States of Regulation

Distressed – LID IS FLIPPED

- Do not explain, No discipline
- NOT a teaching moment, focus on regulation and calming

Able to Reflect

- Name feelings
- Alternative reactions/behaviors

Problem Solving – Thinking Brain

- How can we prevent issues?

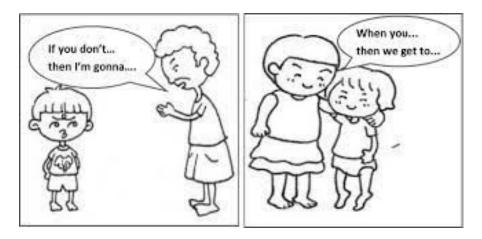
What happens when YOU FLIP YOUR LID

PREFRONTAL CORTEX IS ENGAGED:



Prevention – Structure, Routine, Expectations

- Visual Schedules
- Schedule down-time
- Knowing what to expect: "If, then" POSITIVE statements





Instructions that teach

- Eye contact
- Use as many words as the child is old (2 year old, 2 word instruction)
- Allow for 10 second to respond
- If able have child repeat instruction
- Tell them what TO DO instead of what NOT to do



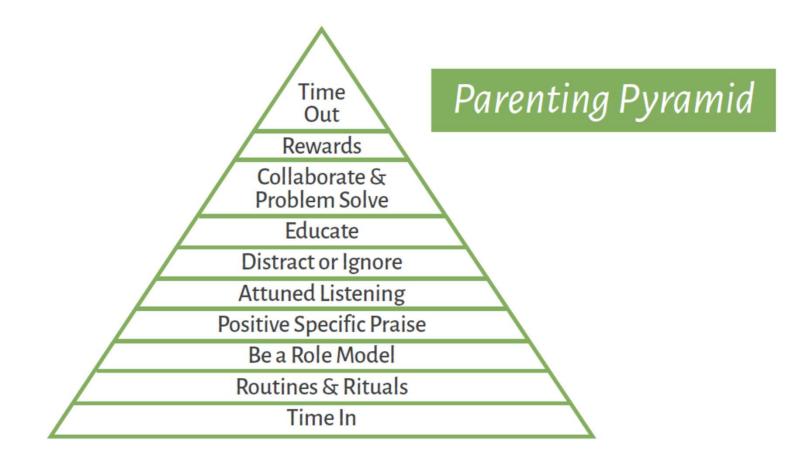
Do vs Don't

FROM POSITIVE DISCIPLINE BY JANE NELSEN

Instead of telling children what NOT to do, suggest what they CAN do. 1)Instead of, "Don't hit," say, "Touch nicely," and demonstrate. 2)Instead of, "Don't run in the house,"

say, "Walk please."
3)Instead of, "Don't touch the lamp,"
say, "You can play with the pans."
4)Instead of, "Stop fighting,"
say, "Outside" or, "Hug time."

Positive Parenting



Healthy Outcomes from Positive Experiences

"HOPE from a parenting perspective is recognizing my child's ability to grow, to learn, to continue to have a growth mindset, and that his current situation isn't fixed."

"I am now recognizing how much it mattered to me to have someone who really watched out for me, cared for me, and ensured that I was accountable."



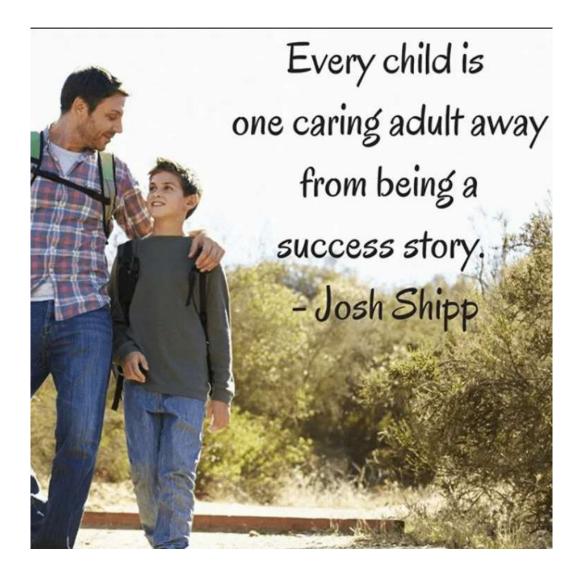
www.positiveexperience.org



InBrief: The Science of Resilience

Center on the Developing Child at Harvard University







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center for excellence in CHILD WELL-BEING