

Getting the Heart of it

***Coping with the Push-Pull of Teens with
Developmental Trauma to Build Attachment***

Prairie Care Training Series July 9, 2020

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How this morning is going to flow...

9:00- 10:20 Part One- Getting familiar with the cast of characters: Teens with Developmental Trauma, their Caregivers and us as their Therapists.

We need to imagine a person's lived experience to activate positive change.

- *Truly embracing what is Developmental Trauma as a way to understand and “dance” with push/pull youth*
- *Walking alongside Caregivers, prompting capacity to offer their teen both compassion and accountability*
- *Ourselves – knowing our blind spots and assets to be able to **choreograph** change.*

10:30-12:00- Part Two -Therapy Strategies and Practice

- *Engaging Push/Pull Youth using IFS, DBT skills, Mindfulness and EMDR resourcing- enlarging social engagement and stress response systems*
- *Building Attachment– Parent-Teen therapy with Affective/Reflective Dialogue*

Let us start with **Embodying Secure Attachment** *especially in times of stress*

- I can seek comfort and help from key people for survival
- My body metabolizes stress so I can tolerate distress and use “good stress” to learn.
- I have sensory memory of what “Safe Haven” feels like.
- I can explore the unknown from a “safe base”.
- I can trust, feel safe, even joy in connecting with others.
- I do not need to rescue family members from their pain but can stand alongside them.
- ***How about You?***

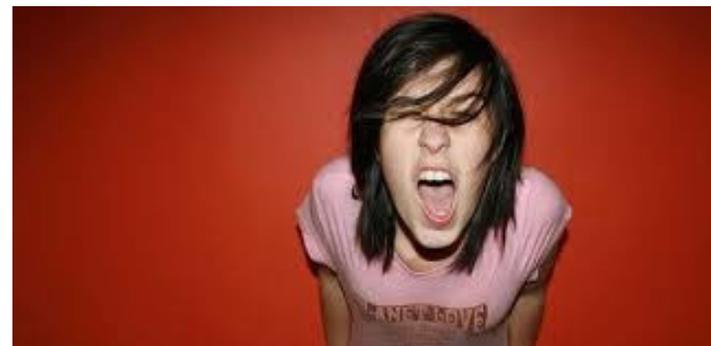


***If we can't reduce our stress
internally,
we automatically seek to calm stress
externally
in how we act with others***

What Happens in Your Body When Teens Power Struggle with you in the Push-Pull Way?

- Visualize the last time a teen was aggressively activated or shut you out as you were interacting.
- What happens inside you when clients "push/pull"?
- How do you respond?
- What do you do next?

(Use chat to *type in your responses*)

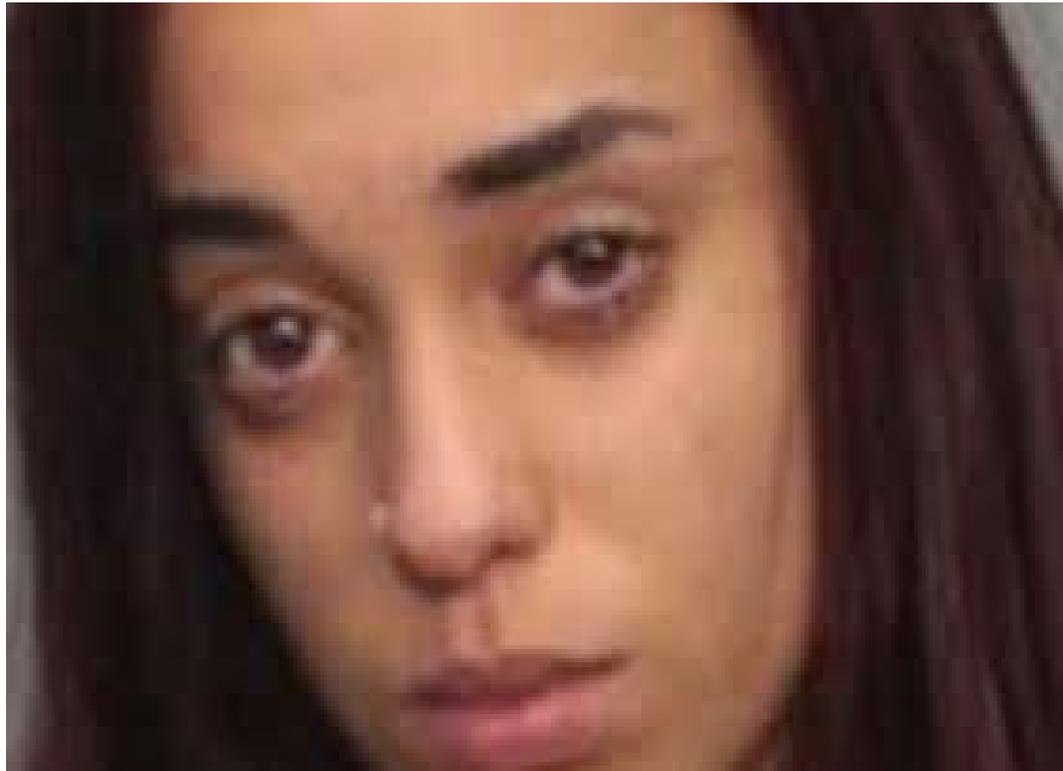


Lived Paradox

Teen Wants what Also Terrifies

- 1) Hard wired need as human to connect with another for survival, to signal needs for food, pain relief, comfort
- 2) Early experiences of signaling need met with neglect, fear, bodily harm, inconsistent, confusing responses
- 3) Infant becomes a teen- developmental drive to seek peers and use secure base to explore world
- 4) Such emotions and actions evoke strong signals of danger and confusion internally- so sabotage the very social engagement they need
- 5) Teen is pulled to somehow engage with another for survival
- 6) Teen defensively needs to then push back

My first Session with 17 year old “Maria”



Compassion vs Empathy- Joan Halifax

- **Compassion-** seeing and trying to understand another, as you also consider feelings taking place in yourself. Setting a table between you and other and looking at a hard thing together, thinking as well as feeling.
- **Empathy-** feeling other person's feelings- a body practice.
- **Today's Training Goal-** increase your confidence in moving through teens' defenses to help them stay in supportive relationships, including your own.

To Aid Another, Must First Learn Their Story

What is Going On Inside our Teens with Attachment Ruptures/Trauma?



“RAD Circle of Life” in the words of 16 year old youth

- **Feel like Crap/Hard Emotions**
 - Not Want to Reach Out
 - Urges and plans to push away
 - Acting it out Say mean things , rude, isolate, be an “asshole”
 - Get What I Want
 - Feel like Shit- then Shame, Guilt
 - Punish Self- lack of self care, internalize stress
 - Apologize Get Forgiven
 - Feel Cared About

- **So then I**
 - **Feel Like Crap**



Clarifying “Attachment Concerns”

- 1) Attachment is a central component of social and emotional development in early childhood, promotes right hemisphere regulation of emotional and physical states.
- 2) Absence of or terror of primary caregiver creates patterns of “attachment insecurity” - *a risk factor for psychopathology*.
- 3) Reactive Attachment Disorder and Disinhibited Social Engagement Disorder for children are Diagnoses in DSM V.
- 4) “Complex Trauma” or “Developmental Trauma Disorder” yet unrecognized as diagnoses, are specific forms of relational posttraumatic stress for children and adults.

See Mosaic of Mental Health Concerns for social and emotional functioning in kids with early attachment disorganization



Reactive Attachment Disorder 2017

IDC 10 Code F94.1

- ❑ One of two clinical patterns from descriptive studies of severely deprived **institutionalized/ foster** young children in last 20 years
- ❑ Result of adverse caring environments, esp. **Serious Emotional Neglect**
- ❑ Rare > 10% , use caution when diagnosing over age 5
- ❑ **Comorbidity** with other diagnoses, esp. **Depression**
- ❑ *Once placed in emotionally responsive, enhanced care, **RAD signs diminish or disappear in younger children***
- ❑ Absence of focused attachment behaviors directed toward a preferred caregiver (***attachment behaviors not expressed***)
- ❑ ***Failure to seek and respond to comforting when distressed***
- ❑ Functional impairment in ***social competence across context***
- ❑ ***Disturbance of emotional regulation-reduced positive affect, unexplained fearfulness or irritability***
- ❑ Limited research and standardized methods for assessing and diagnosing

Disinhibited Social Engagement Disorder 2017

F94-2

Core Features:

- ❑ Inappropriate, attention seeking approach to unfamiliar adults, lack of wariness of strangers (*attachment behaviors expressed non selectively*)
- ❑ Lack of appropriate social and physical boundaries
- ❑ Asking overly intrusive or familiar questions of unfamiliar adults- indiscriminate
- ❑ Linked to number of caregiver disruptions vs severity of maltreatment, *as well as material risk factors- physical illness, abusing substances, limited pre natal care.*
- ❑ Linked to impulsivity, moderately strong correlation to ADHD
- ❑ Rarely seen in clinical settings- occurs in only 20% of severely neglected children
- ❑ Predicative of difficulties with close relationships and more need for special education services
- ❑ Unclear how measures of DSED for young children relate to signs in middle childhood/adolescence.
- ❑ Symptoms persist despite enhanced caregiving placement- see inauthentic expression of emotions & indiscriminate behavior with peers in adolescence

Attachment, Anxiety, Neurobiology



“ Well before the declarative memory develops, early traumatic experiences leave traces in the amygdala as emotional memories, eliciting fearful responses without cognitive awareness of cause”.

“Resolving experiences of fear or trauma are essential for development of necessary brain structures to cope adaptively with anxiety and develop organized responses to stress...”

Because of low sense of control and predictability, insecurely attached individuals are at risk for chronic anxiety”

Bettman and Jasperson *Anxiety in Adolescence: Integration of Attachment and Neurobiology Research into Clinical Practice* (2010)

Generational Trauma's Impact?

Trauma is passed on from person to person and generation to generation through genetics, culture, family structures and biochemistry of the womb. Trauma is literally in our blood.

Resmaa Menakem

No discussion of generational trauma would be complete without acknowledging ..the inheritance of survival based information, the critical, even life saving transmission of implicit information that can be traced back through several generations of a family or tribe's history



Peter Levine

“Reactive Attachment Issues Is this PTSD?”

Not a diagnosis

- “Rather a ***developmental trajectory***, how the nervous system was “sculpted” by early attachment relationships, **directly impacting social and emotional coping capacities”**

(A Schore & J Fischer)

- “**Adverse and traumatic experiences change us in many ways after trauma, our bodies and minds, our hearts and souls are seared and then twisted and modified to help us survive”.**

(Bruce Perry)

Read July/August Atlantic Monthly- The Romanian Orphans Are Adults Now

PTSD? yes and no.... See

- Trauma occurred in 1st 3 years -abuse, neglect or severe emotional misattunement- 1st Stage of Development- **I exist- I Value -so I Trust-** not reinforced, even terrorized.
- Lack of adult attunement partner = **Inability to identify own emotions and body states-** cannot contain own energy/nervous system- Learned early to **withdraw or deflect** emotional pain
- **Feels Terror when vulnerable in relationships-** heart is 165 beats/min.
- **Need to control** interactions versus do give and take play.
- **Expect to be abandoned,** judged or misunderstood by others.

What do you see?

Rigid or Chaotic Self Organization in early relational neglect or abuse (Dan Siegel)

- Bits of sensory or emotional reactions to experience are split off, not integrated neurobiologically
- Sadness or loss experiences blocked
- “Do Something” emotion of Anger takes over
- Can’t Stay with own emotions- blame, deny, self harm

What does this mean for what we do in therapy?

Left brain, logical ways of teaching don't land

More about Maria, and now Alex too

I think of our teens this way.....

*“The world breaks everyone apart
and afterward many are strong
at the broken places”.*

Ernest Hemingway, *A Farewell to Arms*



How Developmental Trauma show up in our Teens

- Delays in **Constancy and Permanence**- *worth not held inside - dependent on constant external validation*
- **Small Window of Tolerance for Stress**- *Survival responses activated – hypo or hyper arousal*
- **Delays in Self Regulation and Impulse Control**

- **Therefore Cannot use Consequences** – *“If -Then” Guidance from parent to motivate or punish*
- *See impulsivity, all or nothing responses to relationships with peers or romantic partners, **Rescue then Reject***
- *See **Wise Soul** then **Two year old** in face of stress*
- ***Have skills, then lose them** as sensory triggers of early neglect/abuse are tripped – **like mines hidden in a harbor***

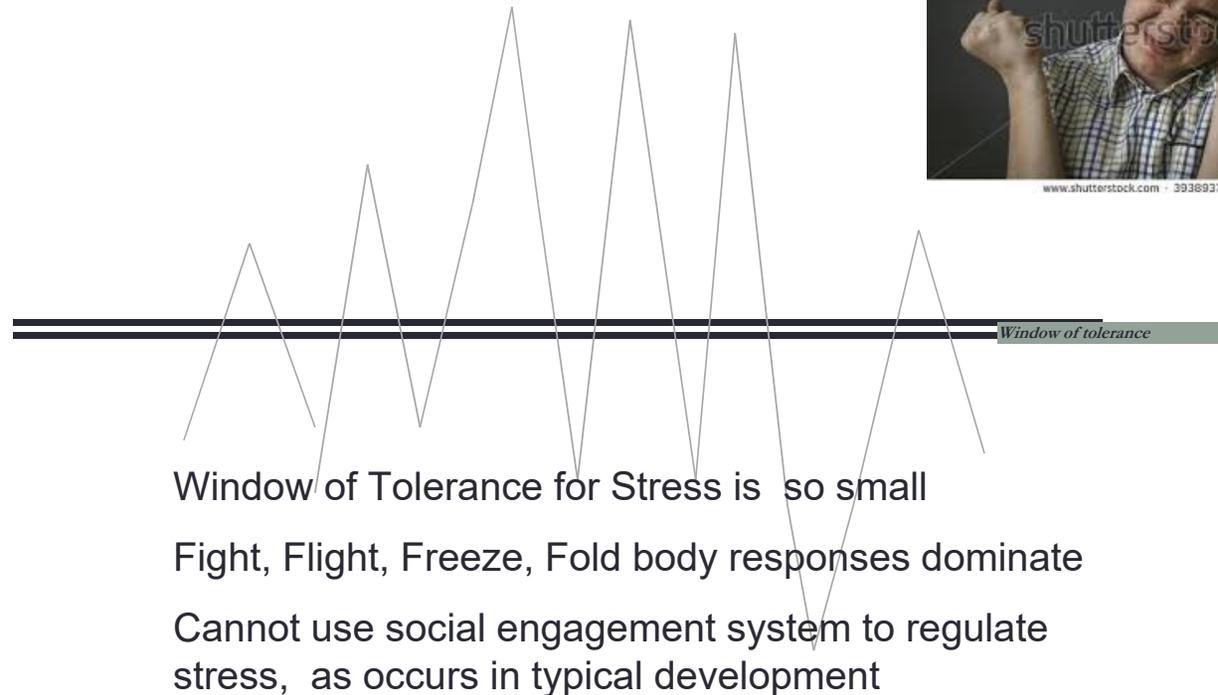
Arousal:

It's Physiological!

Hyperarousal:
Flight/fight response

Optimal arousal: Social
engagement response

Hypoarousal:
Immobilization response



What Insecurely Attached Youth feel/think when out of window of tolerance for stress

- I cannot trust anyone to stay by me
- I am not worthy to exist
- I need to get really big or disappear to feel safe
- Feeling close to someone is terrifying
- I need to outwit or take revenge
- I need to be the boss of me or I will die
- There is not enough (care, love) to be shared- it is him or me
- I cannot control my body when feelings get big. I am broken.



With a Partner for 7 minutes each

- Introduce yourself and a teen you know with Developmental Trauma Disorder
- Where is this teen stuck?
- List out developmental delays you see.
- Name one why you currently help this teen do “developmental catch up” in your therapy with him/her/they
- Name one thing you want to take away from today’s training to help your clients keep learning/developing
- Switch

- **Trauma is not a diagnosis but a universal human experience**
- Circles us back to stories of resilience, feeling alive in the midst of hardship the world over- Spiritual at core
- **How people respond to traumatic events is more important than the events themselves**

- *Connection to others – attachment is our primary protection, our way of moving on*
- *Can't extract trauma like a bullet- can't "fix" it*
- *Can facilitate change by facing fear, walking in and through it, grow a healthier skin around it*

- *Maria and Alex responses to this*



Developing Alliances with Parents

Each parent has a story. Discover it. From start to finish, convey that she or he is central to helping their child shift and grow.



Reacting to and Contributing to the Push Pull Cycle

Stress is Predictor and Consequence
of parenting and family functioning

Stressed parents who are frequently
more irritable, critical and severe
towards children – **more liable to
cause problematic behavior** in them,
which in turn increases parental stress

Challenged **in ability to give** both
compassion and accountability to teen

Carry own trauma or toxic losses



Without understanding neurobiology of fear, loss, adoptive parents get stuck

- ◆ They see child's miscuing needs and dysregulated behavior as manipulative, disrespectful, & in need of their firm, redirecting hand.
- ◆ The child's inflexible push pull behavior feels personal, rejecting, invalidating, hurtful.
- ◆ They are in need of our Relational Partnership.



Each Parent has Story

- ◆ What did you want for this child when you adopted? What did you hope for in becoming his/ her parent?
- ◆ Who did this for you? Adult Attachment Interview
- ◆ What behaviors in your child trigger you or your partner- Are you split apart?
 - ◆ *What does this mean- how does that feel- what happens as a result-what do you do- what does your body feel like, what does your child feel/hear/see?*
 - ◆ *Is what you are doing working? Can we explore other ways?*



Name Losses

How hard I tried to create a family- the disappointment I don't dare express as I must be grateful- the comparing my child to birth children of others- the sense of exhaustion, failure, the graduations that don't happen. I can't celebrate developmental milestones for my kid, and this hurts!.

How Well Can This Parent.....?

- Find “**Mindsight**”- be able to reflect on self and reflect about teen without being fully caught in emotions
- **Know Self**- Curious about own roots behind what/how want to teach, give, show, protect and relate to teen
- **Tolerate Hot and Cold** from teen- know teen is projecting own crap onto parent
- **Not expect “I Love You” to motivate good behavior in teen. *Be Safe vs Value Me.***
- **Have own Life outside of Parenting**
- **Be savvy to challenges teen is facing and set security boundaries**
- **Stay in relationship somehow- rituals of connection**
- **Tend to own Spirit Damage**- grief/loss/shift of expectations

The Mindful Parent

*Do Yes – No Exercise in Pairs- 10 minute break out
How do you help parents find their “yes” eyes?*

Impact of Push/Pull on Us as Therapists
What is your Skill Set with our teens and parents?
Perhaps a Choreographer?



Trauma Learning Is Powerful

- **If we want our youth to learn something else, how do we do this?**
- *They need to experience something else.*
- They need to experience it over and over again so they can count on it.
- As adults interacting with youth, we are part of their ‘not so evidence based’ experiment. We are their learning laboratory.

“ To create an effective memory, experience has to be patterned and repetitive” (Bruce Perry, Chandra Ghosh Ippen)

Mistakes we make while intervening with conflicted systems and high risk behaviors

- We get behavioral
- We become overly focused on safety risks
- We take sides
- We stop seeing patterns of coping
- We see a war zone that we need to fix
- We forget about the power of relationships
- We lose our confidence as healing catalysts
- We refer, we burn out.



When we get the Seduction or Shut Down from a teen, then what?

- In youth without reliable social engagement systems, don't fool ourselves that we are the adult who can finally give them the nurturance they deserve.
- Your care can inwardly terrorize them and they defend with charm or cut off.
- Titrate your empathy in bits they can handle. Remember- Your ***Care Does not Feel Safe for this Teen, even as they want it.***



10 MINUTE STRETCH BREAK

The therapeutic relationship is an encounter between two attachment systems.....How we “dance” together reflects very early experiences encoded in the body and nervous system

Janina Fisher

GETTING TO THE HEART OF IT ENGAGING THE PUSH PULL IN A THERAPY PROCESS

- 1) Building Curiosity- Who Are You?
- 2) Tapping a Teens Social Engagement Capacity in a Window of Tolerance for Stress
- 3) Building Regulation Skills and Resources
- 4) Welcome **Nurture- Protect- Wisdom Parts**
- 5) **Choreographing past “Push-Pull”** in Attachment Family Therapy

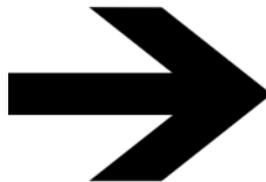
Core Concepts for Healing

Teen with Attachment Insecurity

- *Atrophied Empathy*
- *Misreads verbal and facial cues of others*
- *Falling Apart- no self regulation*
- *Destructive behavior toward self/other*

Attuned Staff/Parent

- **VCR- validates, challenges, requests**
(Dr. Ken Hardy)
- **Holds “Mindsight”**
- **Organize feelings, thoughts and hand them back to child**
- **Repairs after Ruptures**



Use of Self- The Metaphor of Jazz

- Starts with chaos, you ask “where is this going?”
- Individual player moves towards increasing collaboration with band members
- Good jazz musicians listen to each to each other. What may seem like chaos is actually the process of finding sweet collaboration.

Dr. Anne Gaerity

Example- Maria’s session last week.



To Begin- Got to Know this youth's "Parts of Self" Applying Internal Family Systems and EMDR Resourcing methods

Alex's Parts of Self Collage/Jigsaw

- Little kid part (animals, duckies)
- Survivor part
- Wild part
- Wise part
- Destroyer part
- Papa Bear part
- Manager and Fireman parts

Richard Schwartz

- Trauma part- Exiles (disappearing...)



Appoint Nurture- Protect- Wisdom Team of Helpers

Laura Parnell

Our Curiosity can spark Their Curiosity

Organizing Split off Selves

Methods

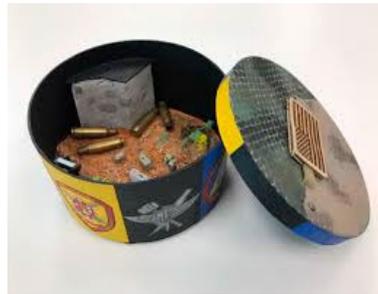
Center for Adoption Support and Education Questions:

- *What parts of you are from your birth family, your adopted family and are just uniquely you?*
- *What would you want to ask your 1st family members or grandparents- generational forbearers (naming historical trauma)*
- *How do you deal with other's ignorance about your race/culture difference?*
- **Mask making-** who am I outward and who am I on the inside?

Methods

- **“Suffering Skin”** (Demonstrate)
- Ask for poems, song lyrics, music - ***I am a person of Many Parts***
- Drawing **Time Line of Moves-** “who I became”
- **Make a Video Diary**
- **Commemorating Loss Box- The “Container”**

Share ways you have used creative expression to help a push/pull teen show up and engage more vulnerably



But I'm not crazy, I'm just a little unwell
 I know right now you can't tell
 But stay awhile and maybe then you'll see
 A different side of me
 I'm not crazy, I'm just a little impaired
 I know right now you don't care
 But soon enough you're gonna think of me
 And how I used to be me

Up and Down Regulating Skill Practice.... Now Inviting in Caregiver

Create “Stations” for each emotion and practice going between *Anna Gomez*

- **Do Mindfulness practice-** Breath, Guided Imagery, Movement of stop/start.
- Use Smells, Sounds, Tastes, Textures **to shift from hypo or hyper arousal** states
- Do Parent-Teen Theraplay- **“Hide and Seek”- even with large 15 year old?**
- **Practice Heart Jar Exercise- Visualize this with a teen and parent you know**
- **When is this so hard- when safety is right on the razor’s edge?**
- **We deal with this too. – when a “Bigger Back Yard” is needed.**



Now ready for bringing Push/Pull Teen and Hurt/Angry Parent into Attachment focused Family Therapy? –Dan Hughes



LET'S BREAK THIS DOWN

One step at a time:

- Active use of PACE, curiosity and humility to see dance steps of teen and parent- how do they dance together?
- Intensify the felt experience through Affective Reflective Dialogue and Catching Bullets- use Relational Reframes.
- Pull back the spotlight, allow new experiences between parent-teen to emerge, including repair of attachment ruptures.
- Then can get to problem solving, boundary setting re cell phones, curfews, chores, etc.

Step One Affective – Reflective Dialogue

Therapy is not a talking cure but a communication cure Allan Shore

Therapist- Choreographer

- Uses the nonverbal expressions of the Storyteller
- Therapist deepens and expands the intersubjective presence of parent and teen for each other.
- Move from light to stressful interaction, using prosody of voice - expression- Speak for and about
- Leads to teen being able to be fully present in presence of parent- as themes of inner life are gingerly or dramatically explored and made more coherent

What is Story you See Here?
Affective- Reflective Ideas?



Example from Dan Hughes

- John: I don't know why we have to go to the dumb lake. There is nothing to do and I need to be with my friends.
- Dad: It is not always what you want John. What the rest of the family enjoys doing is important too.
- Therapist (with urgency) Wait a second! I hear you, Dad. You need to think of the whole family, not just one member. Can we understand more about what John is saying before responding? I need to know what he is experiencing about the lake more. (interrupting lecture to get to understanding each other)
- I really want to know John, what makes it hard for you to spend a week at the lake..... Ahh, now it makes more sense. You want time with your dad and when you had time with him, nothing happened that you enjoy (speak for) That would be so hard!...(tap and intensify affect)
- John: He doesn't want to spend time with me. He doesn't even enjoy being with me!
Therapist: John would you say to your dad, "Dad it seems to me that you just don't want anything to do with me (enactment). (conveying to dad his importance to his son)

“Catching Bullets”

- See the angry, shaming or blaming look or words aimed at other
- Grab it- name it and reframe it in an attachment frame
- *“It is so important that she understand you this very minute, that you are willing to fight her so hard for it”...*
- *Come alongside- regulate it.*



Step 2-Dance Moves in Pattern Discovery

- **Reflect** present process, “what is happening here” with curiosity vs. need to find cause, consequence, or correct.
- **Wonder**, “what is core need behind behavior ?
- **Regulate** one’s own body, actively noticing, grounding, and recalibrating to stay attuned, present, real.
- **Order** the fight/flight chaos through “scaffolding” Tell the Story
- **Evoke** and Expand Attachment Emotions
- **Distill** it, to help teen or parent risk new feeling or action- Invite safety for vulnerable parts of self to show up.
- **Validate**, “you did it”- mirror competence in tiniest ways teen/parent can tolerate-
- **Coach** and Model “ If you know your parts and pattern, you can risk more and shift... again, and again.....

Getting Unhooked and then Connecting

“Sometimes I get tangled up in a convoluted story and completely miss Jenna’s intended point. Then I ‘m the one letting her down. Although I don’t screw up on purpose- **these small but significant and recurring ruptures are essential.**”

“I take on her searing glare head on, knowing my therapy is strongest when I’m fully engaged with her disappointment in me- when I feel wretched too... My job is to feel calm with her. It is not a matter of just teaching isolated coping skills. If she can be mad at me **she can also come to feel in real time what it is like to let go of smaller injustices**”.

- Martha Strauss

Step 3-Judgment Calls.....

as we turn up the emotional heat

- When to speak for teen or parent and when to help them speak for themselves
- When to ask for an enactment- “Can you turn to your mom and tell her....”
- When to stop all the talk and change it up- throw a football into the fray, do a cart wheel.
- When to stop because toxicity is just too strong or enough safety is not there

Break out group

Give me 2 ideas on how I help Alex slow his push/pull and take in his dad’s care.

•
...

Step 4- Repair Experiences- Sharing Teen and Parent Lens

- Hurtful behavior is reframed from lens of protecting, avoiding pain, “because you matter enough to fight with”
- Share emotions of longing, grief, push for independence, push for connection, acceptance, identity
- When see acknowledgement, then ask “so what gets to happen now that you know this- can this fight change- what else is possible?”
- Then can be practical- set short clear, consequences, dispassionate boundaries....



Your Questions? Such as...

- *How do you help a parent who is so hurt stay curious about what her child is feeling underneath all the harsh words?*
- *What are signs that the teen no longer needs to use push/pull to cope with feeling vulnerable?*
- *When is therapy moving forward- this is a long process!!*
- *How do you keep yourself as a therapist energized for this intensity?*
- *When is it fun? (Yes, yes, it really is.)*

At the end of the day....A skilled therapist...

“A skilled therapist doesn’t act like anything. A skilled therapist is genuinely herself, may ask a few questions, and deftly creates a space where people can actually feel worse, not better. We create and hold spaces for people to feel pain and discomfort that isn’t safe to feel outside of therapy. And, the single most effective tool we bring into creating that sacred space is ourself.

Our self.

Kathleen Adams *Helping MFT Graduate Students Develop Mindfulness*



“The roots of resilience and the capacity to withstand emotionally adverse situations...are to be found in the sense of being understood by and existing in the mind and heart of a loving, attuned and self possessed other.”



Diane Fosha 2000