



## **Mindfulness-Based Practice with Children and Youth Exposed to Trauma**

**Presented by:**

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# Introductions:

- 1) *Your Name*
- 2) *In what capacity do you work with children?*
- 3) *How do you currently treat anxiety and trauma related disorders?*
- 4) *Any experience with mindfulness? If so, what?*
- 5) *What are your expectations for this training?*



# Workshop Objectives:

- 1) *Participants will become familiar with Mindfulness-based Cognitive Therapy*
- 2) *Participants will learn MBCT interventions when working with children and youth*
- 3) *Participants will learn how to incorporate mindfulness with those who have varying intellectual and developmental abilities*
- 4) *Participants will practice MBCT activities*
- 5) *Participants will be able to identify benefits to utilizing MBCT when working with children and youth*



# What is trauma?

*Trauma is the emotional, psychological and physiological residue left over from heightened stress that accompanies experience of threat, violence and life changing events...*

*A more overwhelming event than a person would ordinarily be expected to encounter*

Source: American Academy of Child and Adolescent Psychiatry,



# How do children/teens react following trauma?

- Every child reacts to trauma differently
- Reaction will depend on:
  - Developmental and intellectual level
  - Lowered level functioning
  - Previous life experiences
  - Level of exposure to the trauma
  - Parental reactions
  - Subsequent changes in living situation
- The majority of children are resilient



Source: Centre of National Research on Disability and Rehabilitation Medicine, 2011, *Childhood Trauma Reactions*, [www.uq.edu.au](http://www.uq.edu.au)





# Types of trauma

- Acute & Complex trauma
- Family violence
- Medical trauma
- Natural disasters
- Community and school violence
- Neglect
- Physical abuse
- Sexual abuse
- Traumatic grief
- Refugee and war zone trauma

Source: Adapted from The National Child Traumatic Stress Network, [www.nctsn.org](http://www.nctsn.org)

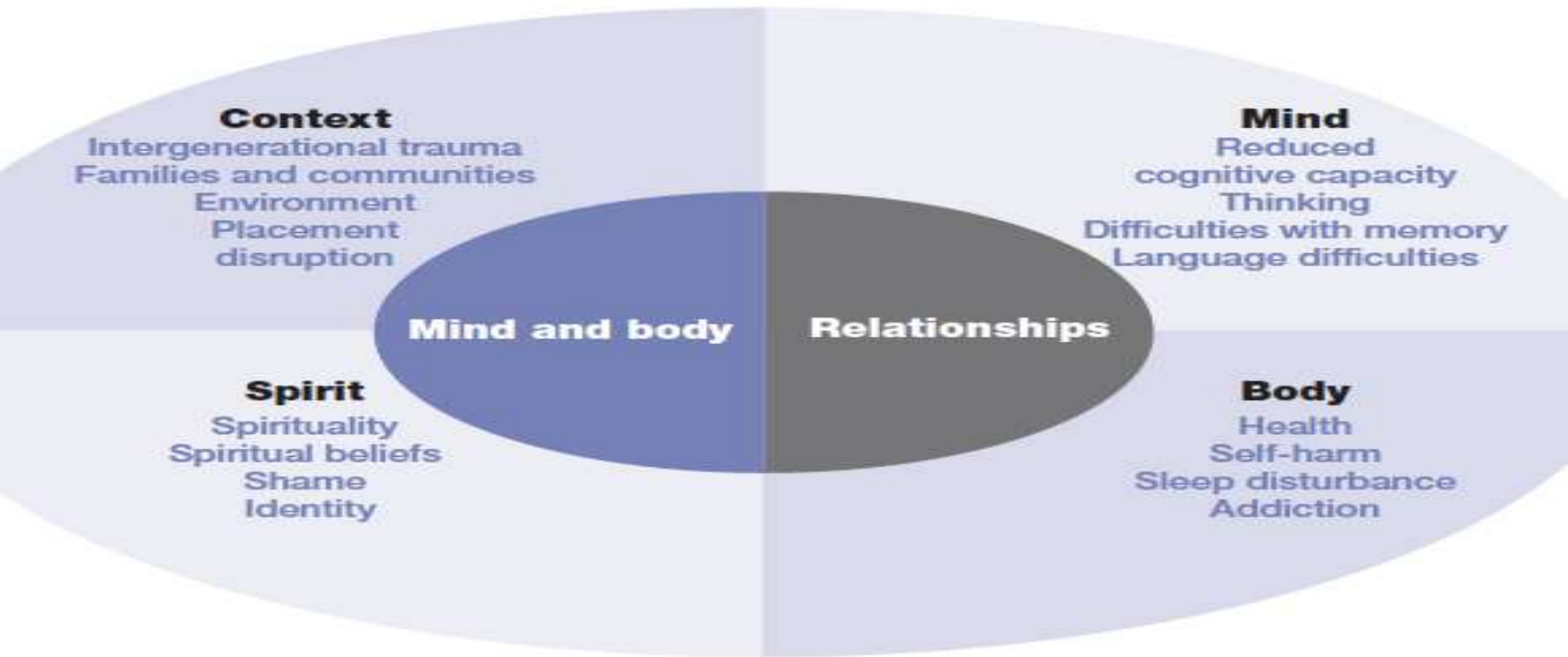


# The effect of trauma on children

*Children who experience horrible external events may experience emotional harm or psychic trauma. Left untreated, all but the mildest of childhood trauma can have an impact on the child*

*It is important to remember that abuse, neglect and other trauma have different impacts on different children – and that while we have to take seriously the negative impacts of trauma we cannot underestimate the strength of human resilience*





## The impact of trauma on children/teens

Source: Child Safety Commissioner, 2009, *From isolation to connection: a guide to understanding and working with traumatised children and young people*, <[www.kids.vic.gov](http://www.kids.vic.gov)>





# What's the impact of trauma?

- Increased need for control
- Fear of separation
- Loss of self-esteem and self-confidence
- Confusion about trauma



# Trauma impact continued

- Behavioral change
- Increased tension, irritability, reactivity and inability to relax
- Sleep disturbances, nightmares, night terrors, difficulty falling or staying asleep
- Regression of behavior
- Lack of eye contact



# Trauma impact cont.

- Truant from school
- Re-enacting of the trauma with others
- Obvious anxiety, fearfulness and loss of self-esteem
- Specific fears
- Efforts to distance from feelings of shame, guilt, humiliation and reduced capacity to feel emotions



# What else do we hear?

- 'blanking out' or loss of concentration when under stress at school with lowering of performance
- Explicit, aggressive exploitive, sexualized relating/engagement with peers



# What is Mindfulness?

“the awareness that emerges through paying attention on purpose, in the present moment, and non-judgmentally to the unfolding of experiences moment by moment”

( Jon Kabat-Zinn, 2003, page 145)





# Varieties of mindfulness \_ Mindfulness-based Stress Reduction (MBSR)

- Developed in 1980s by Jon Kabat-Zinn
- An 8 week program (2.5 h per week + day of mindfulness+ daily practice)
- Guided mindfulness practices focused mainly on sensory awareness and body awareness
- Education about stress
- Gentle yoga and movement practices
- Developed for stress reduction of varied patient groups from chronic pain to anxiety and heart problems
- Well documented beneficial effects on stress reduction and well-being (e.g., Hofmann, 2010)



# What is Mindfulness Based Cognitive Therapy (MBCT)?

- Developed by Segal, Williams and Teasdale in the 1990s
- Targeting specific groups of patients with recurrent major depression while in remission to prevent relapse
- 85% MBSR + elements of Cognitive Behaviour Therapy (CBT)
- MBCT halved the rate of depressive relapse in patients with three or more past episodes (Teasdale, Segal & Williams, 2000)



# Mindfulness-Based Cognitive Therapy (MBCT) continued

MBCT is designed to help those who suffer repeated bouts of depression and anxiety related disorders. It combines the ideas of cognitive therapy with meditative practices and attitudes based on the cultivation of mindfulness skills and practices.



# Benefits of Mindful Practice

Stress reduction and self-acceptance are two of the major perks of mindfulness, benefits Winston says are particularly important during the drama and turmoil-filled teen years. "Emotional regulation, learning how to quiet one's mind—those are invaluable skills."

*Diana Winston, author of Wide Awake and the Director of Mindfulness Education at UCLA's Mindful Awareness Research Center*



# Difference between responding and reacting?

- **Reacting** is when stressful situations (such as behaviors which challenge) trigger our physical, emotional cognitive and behavioural reactions to stress. This can make a difficult situation worse
- **Responding** is when during a stressful situation (such as experiencing behaviours which challenge), we use mindfulness to create strategies we may have learned in our training to deal with the situation in a positive, and respectful way.





# What about managing anxiety in teens?

- Randy Semple, PhD, an assistant professor at the University of Southern California's Keck School of Medicine, has spent her career developing programs to teach anxious kids how to quiet their minds.
- "When I look at childhood anxiety I see an enormous problem and a precursor to other problems in adolescents and adults," she says. "So I figured if we could manage the anxiety we could head off a lot of the other problems." Mindfulness-Based Cognitive Therapy for Anxious Children, the book she co-authored, is based on the program she developed.



# What is Mindfulness-Based Cognitive Therapy (MBCT)?

1. **INTENTION** involves consciously and purposely regulating attention.
2. **ATTENTION** is the ability to sustain attention in the present moment without interpretation, discrimination or evaluation; a bare registering of the facts observed (Brown, Ryan & Creswell, 2007).
3. **ATTITUDE** is a frame of mind brought to mindfulness meditation; commonly described as openness, acceptance, or **nonjudgmental**.



# A Mindfulness based response

- Appraisal of thoughts, feelings and perceived threats
- Possible arousal, but also an awareness of the body: muscle tension, breathing, awareness of the full context of emotion and challenge
- Using training fully is seeing new options
- Quicker recovery of mental and physical equilibrium



# Mindfulness interventions for people with Intellectual Disabilities (ID)

- ***Soles of the Feet*** - teaches people to divert attention to an emotionally neutral part of the body if they experience emotionally arousing thoughts, events or situations (Singh et al 2003 - 2013; Idusohan-Moizer et al, 2013)
- ***Mindful Observation of Thoughts*** – visualising and observing thoughts as clouds passing through awareness (Singh et al 2011b)
- ***Mindfulness programmes*** – participation, observation and description exercises to promote non-judgemental attitudes and acceptance, awareness of surroundings and thoughts and breathing (Chilvers et al 2011); MBCT programme (Idusohan-Moizer et al, 2013)



# Yes it works!

## Key findings – people with ID (1)

All studies found improvements over medium-long term:

- **Physical and verbal aggression** (Singh et al 2003, 2007a, 2008b, 2013, Adkins et al 2010, Chilvers et al 2011, Singh et al 2011c)
- **Increases in self control** (Singh et al 2003, 2008b), compassion towards self and others (Idusohan-Mozer et al 2013)
- **Improvements in psychological wellbeing, anxiety and depression** (Adkins et al 2010; Idusohan-Mozer et al 2013; Miodrag et al 2013)
- **Reductions in inappropriate sexual arousal** (Singh et al 2011b)
- **Physiological changes** – declines in cortisol levels (Miodrag et al 2013)





## Key findings – people with ID (2)

As a result this has led to **reductions** in:

- interventions such as **physical restraints and seclusion** (Singh et al 2003, 2008b, Chilvers et al 2011)
- **medication** (Singh et al 2003, 2008b)
- staff and resident **injuries** & staff absences (Singh et al 2003, 2008b)



# Key findings – people with ID (3)

## People with ID :

- **Value** learning to control their own feelings rather than being told to calm down (Singh et al 2011b)
- Find mindfulness procedures **difficult** to understand if they cannot easily remember or visualise past events (Singh et al 2007) or understand abstract concepts and instructions (Singh et al 2011b)
- May **drop out** if they find content difficult to understand or do not like meditation practice. Amount of paper work, including diaries can be overwhelming (Idusohan-Moizer et al 2013)
- Vary in their ability to **initiate** mindfulness meditation without prompting (Adkins et al 2010) and to use it in their lives (Singh et al 2011c)



## Findings – Family Members

- Mindfulness training led to **transformational change** rather than rules or techniques to use, and a more holistic view of their child (Bazzano et al 2010)
- Parents **responded** in a calm, positive manner that pre-empted maladaptive behavior and encouraged positive social behavior by children (Bazzano et al 2010)



# Let me say this...

- Utilizing Mindfulness is not to force teens to talk about their trauma—Rather, it allows them to be in control of themselves (mind, body, soul and space) and if they choose to share their trauma they have the skills and ability to do so.
- Mindfulness is about *Choice Theory*



# Choice Theory

People have the right to choose how they wish to conduct themselves and what behaviors/actions they should take. When informed and aware about what's coming up for them in the moment—people will make the decision that best fits them.

Giving teens control again of something that might have been taken from them (i.e. safety, connections, trust, love, and themselves).





# What do we avoid in mindful practice?

The Shoulds!

I should have done...

I shouldn't have taken too long...

Next time I should...

He should have...

She shouldn't have...



# What else to avoid...

Making judgment statements like:

That's good

That's right

That's wrong

That's bad



# Instead let's just acknowledge what is in the moment without judging it

Statements like:

Isn't that interesting

Look what came up from your experience

I wonder if...

How do you see this playing out outside of this activity or session?



# Now Let's Practice MBCT!





Let's start with a 3 minute  
breathing space



# Inquiry

- 1) What was that experience like for you?
- 2) What made this experience different than any other experience you've had?
- 3) Is this something that you can incorporate in your everyday life? If yes, how and when?



# Let's do another one

## Mindful touch





# What was that experience like



# Let's do another one

Mindful taste



# What was that experience like



# One more

Mindful smell



# MBCT Intervention Take away

Remember to **H.E.L.P. T.H.E.M.**

- **H**ighlight what's happening in the present
- **E**xplore feelings, thoughts, behaviors/actions
- **L**et them identify what coming up for them
- **P**rocess with them in the moment
- **T**each them how to choose (Choice Theory)
- **H**ear their experience through their sharing (inquiry)
- **E**rase judgment (stay away from the shoulds)
- **M**indful is all it takes



Date 5-7-15

Dear [redacted]

I do get angry sometimes, but I need to remember to use my mindfulness skills. I don't want to hurt somebody just because I am angry. I need to remember to take deep breaths or/and take breaks. Don't take it out on someone else. Just take a break and then later talk about what was making you mad. It's normal to get angry, it's fine to get mad just don't put it out on anybody else.

Sincerely,



P.S. You can do this anytime. Good luck!



five acres.

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Mindfulness!



# Questions





# Thank you!

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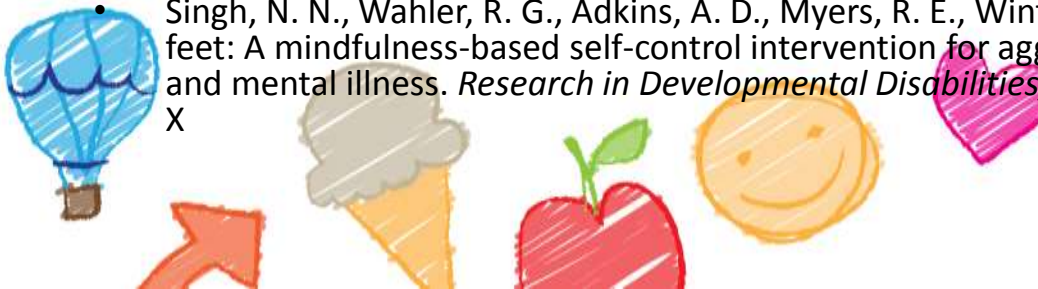
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# Resources

- <http://www.dayonepublishing.com/VMC/index.html> - mindfulness practice scripts
- <http://www.thehawnfoundation.org/welcome> - a school based 15 week curriculum for k-8 teaching neuroscience and mindfulness.
- <http://www.mindfulexperience.org/> - a research site with a monthly newsletter- FREE subscription
- <http://mindfulschools.org/schools/> - Link to videos, sample lessons and kids' commentaries.
- <http://www.mindfuled.org/464/>
- <http://www.stillquietplace.com/> - another curriculum for kids devised by this Holistic Medical professional





# Resources continued

