

HELPING DAMAGED PEOPLE MANAGE THEIR CHAOTIC EMOTIONS



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TRAUMA-INFORMED CARE FOR ID

KEESLER 2014

- Safety
- Trustworthiness
- Choice
- Collaboration
- Empowerment

GARDINER, IAROCCI & MORETTI 2017

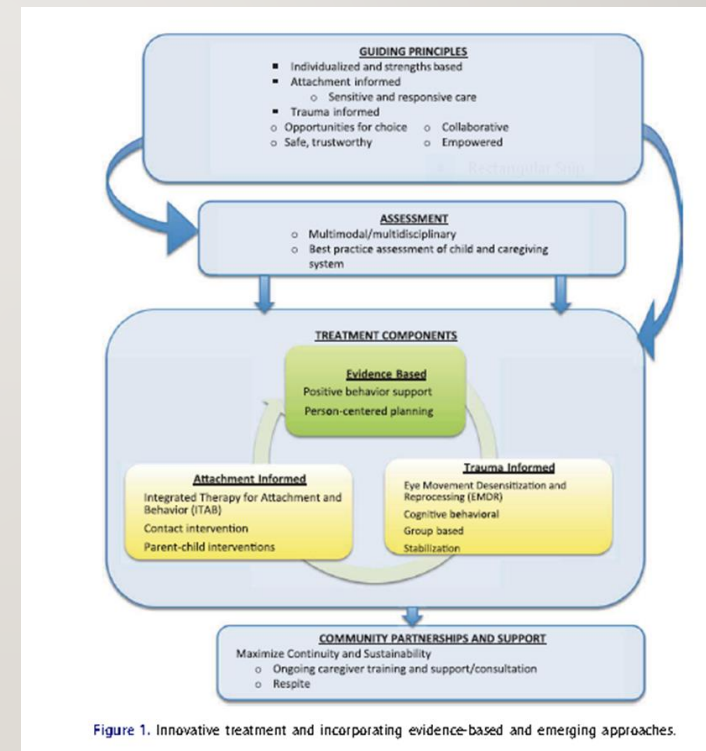


Figure 1. Innovative treatment and incorporating evidence-based and emerging approaches.

TRAUMA-INFORMED PRACTICE: WHAT IT REALLY IS

“The core problems of
affect dysregulation,
structural dissociation,
somatic dysregulation,
impaired self-development and
disorganised attachment



are likely to remain the foundation for clinicians working with survivors of complex trauma,
regardless of the specific diagnosis or assessment and treatment methodologies in use.”

Kezelman & Stavropoulos (2012 p3)

<https://www.blueknot.org.au/resources/Publications/Practice-Guidelines>

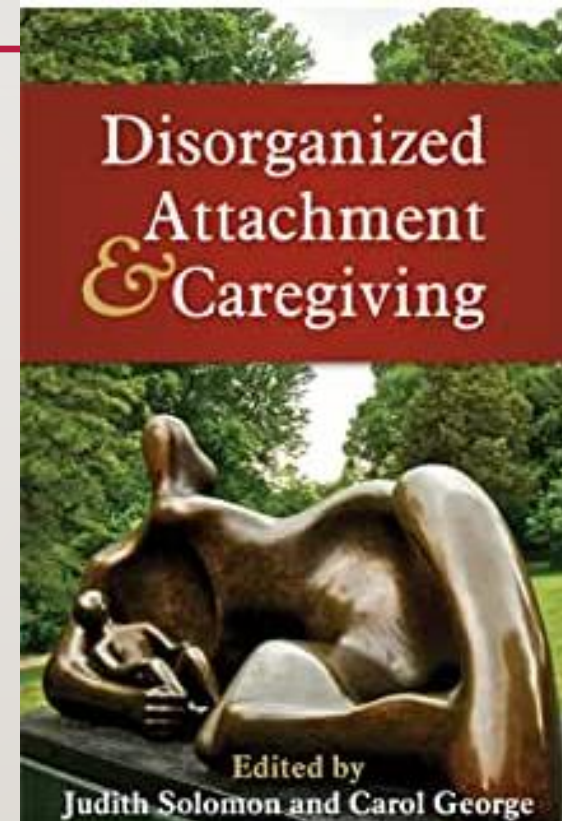
HELPING DAMAGED PEOPLE TO MANAGE THEIR CHAOTIC EMOTIONS

Intervention & cure

- Levels of damage not understood  problem underestimation
 - Neoliberal policies gloss over levels of distress so don't have to acknowledge or fund it: Burton & Kagan 2006
 - High expectations & focus on autonomy  problem exacerbation
 - One combined perspective useless: move between different lenses
1. Identify relational & environmental supports that help co-regulate chaotic emotions - & develop systems that both supply **& maintain** them
 2. Look to Europe for innovation and creativity
 - Understand & work with emotions: SED-s [Germany, Holland, Belgium]
 - Psychomotor therapy [Germany, Holland, Belgium]
 3. **AND:** Tackle major sources of distress & disturbance

UNDERSTAND DISORGANISED ATTACHMENT

- Secure; Insecure but organised (Preoccupied, Dismissing); or Disorganised
- Disorganised: mutual fear dominates primary attachment relationship
- Infants experience 'terror without resolution': radically compromises brain, social, & emotional development
- Predicts unstable & borderline personality disorders in adults – *Help me! But I won't let you!*



ADVERSE CHILDHOOD EXPERIENCES

- Abuse: physical, sexual, emotional
- Household dysfunction: alcohol or substance abuse, mental health problems including suicide attempts, domestic violence, parent incarcerated
- Neglect: physical, emotional
- Childhood coping mechanisms become significant public health problems for adults
 - “The many constraints which still militate against open discussion of child abuse compound recognition and addressing of violations, the scale and magnitude of which raise questions of complicity and comprise grounds for deep national shame” Blue Knot 2012 p39
- Giltaij et al 2013
 - 42% children with ID referred to mental health services had disordered attachments
- Vervoort-Schel et al 2018 (Intl J Environmental & Public Health):
 - 36% Dutch children with IDs referred to services 3 or more ACEs

SCHUENGEL'S PARADOX

- For children with ID ...attachment relationships may be even more important for healthy socioemotional development ... while [their] chances of experiencing secure, organized attachment appear in fact to be lower.... ID, unfortunately, is a field in which symptoms of disorders of attachment occur in relatively high frequency (2013:43)

TRAUMA-INFORMED PRACTICE IS NOT 'MORE OF THE SAME'

Changing to trauma-informed service system experienced by all as **profound cultural shift**

- **Your ability to connect is your best therapeutic tool**
- Users, their conditions & behaviours viewed differently
 - Attitude shift from 'what's wrong with you?' to 'what happened to you?'
 - Co-regulate chaotic emotions to help person stay within window of tolerance
- Staff respond differently: **A program cannot be safe for clients unless it is simultaneously safe for staff.** Staff should be educated in trauma sensitivity, & receive *at least monthly* professional supervision
- Service delivery conducted differently
 - Ongoing attention to well-being for all & boundaries

Window of Tolerance

Hyperarousal Zone

Increased sensation
Emotional reactivity
Hypervigilance
Intrusive imagery
Disorganised cognitive processing

↑
Window of Tolerance
Optimal Arousal Zone
↓

Hypoarousal Zone

Relative absence of sensation
Numbing of emotions
Disabled cognitive processing
Reduced physical movement

The three zones of arousal: A simple model for understanding the regulation of autonomic arousal (Ogden, Minton & Pain, *Trauma and the Body*, p. 27)

EUROPEAN LENS I: ASSESSING EMOTIONS

Research in Developmental Disabilities 59 (2016) 166–175



Contents lists available at [ScienceDirect](#)

Research in Developmental Disabilities



Scale of emotional development—Short



Tanja Sappok^{a,*}, Brian Fergus Barrett^b, Stijn Vandeveldel^c, Manuel Heinrich^a,
Leen Poppe^d, Paula Sterkenburg^e, Jolanda Vonk^f, Juergen Kolb^b, Claudia
Claes^d, Thomas Bergmann^a, Anton Došen^g, Filip Morisse^d

SCALE EMOTIONAL DEVELOPMENT-SHORT

ASSUMPTIONS

- Assessment only useful when informs support: not change clients
- Asks refreshing questions:
 - What emotions does X provoke in you? In your team?
 - When does it go better with X?
- About starting a process:
 - what domains are relevant to this person
 - how can we meet his/her needs
 - How can I/we change to help person become steady, & perhaps develop

8 DOMAINS

- Relating to own body
- Relating to others
- Dealing with change
- Differentiating emotions
- Relating to peers
- Engaging with material world
- Communicating with others
- Regulating affect

EUROPEAN LENS 2: EMBODIED DISTRESS




- “Rather than focusing on how people make meaning of their experience when past experience is embodied in present physiological states and actions... The role of the therapist is to facilitate self-awareness and self-regulation, rather than to witness and interpret the trauma.”

JOURNAL OF INTELLECTUAL & DEVELOPMENTAL DISABILITY, 2015
<http://dx.doi.org/10.3109/13668250.2015.1094037>

 **Routledge**
Taylor & Francis Group

BRIEF REPORT

The feasibility of psychomotor therapy in acute mental health services for adults with intellectual disability

Joshua J. Kay^a , Jennifer A. Clegg^b, Claudia Emck^c  and Penny J. Standen^d 

PSYCHOMOTOR THERAPY: EVIDENCE BASE

NOT Doman-delacato; unvalidated 'body therapy'

Treats people with neurodevelopmental disorders, eating disorders, & schizophrenia (Ekerholt, 2011; Emck et al, 2012; van der Maas et al, 2015; Probst et al, 2013).

Show how movement-based interventions can support change in emotional & behavioural problems

PsyMot (Emck) based on WHO **International Classification of Functioning, Disability and Health (ICF)**: assessment uses battery of games & reflective interview to assess mental & bodily functioning

Josh Kay applied this with 12 consecutive admissions to ATU, 9 engaged

PSYCHOMOTOR THERAPY IN ID: PILOT

Very popular

No increase in incidents following sessions

People had IQ 44-80 (dementia & unstable PD impediments)

Most common treatment clusters:

- Participation and Enjoyment (n=6)
- Self-Control (n=6)
- Body Acceptance (n=5) including 3 of 4 people with ID & autism
 - Dosen: SED-s *Relating to own body* VIP domain for autism

& FINALLY, TACKLE PROBLEMS AT SOURCE

WHO systematic reviews:

Jones et al 2012, Hughes et al 2012

- 27% disabled children experience violence: risk higher for children with ID
- “Family members are the commonest perpetrators of abuse and violence.”

Shakespeare 2014:p228



PARENTS: HOW CAN WE GRASP THE NETTLE?

- Mothers of people w IDs complain of intrusive service scrutiny (Todd)
- Must avoid humanising some lives by silencing others (Clifford-Simplican).
- Yet across history, abuse & neglect of people with ID has happened not just in institutions, but also in community & family (Trent, 1994).

RESIST URGE TO BRIGHTSIDE OR SEARCH FOR MAGIC ANSWERS



1. TiC not just like PCP: acknowledge severity of damage & complexity of distress experienced by a small minority of people w. ID & CB
2. Abandon notion one lens is all we need
3. Move expectation from autonomy to a model of co-regulation that can be sustained
4. Grasp the nettle: work with parent organisations, child protection, guardianship and public advocate systems to tackle abuse within families

The background features a light grey gradient with vibrant, multi-colored ink splashes in shades of yellow, orange, red, and blue. At the bottom of the image, there is a horizontal strip of a wooden floor with vertical planks.

THANK YOU
COMMENTS WELCOME NOW OR LATER

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