

- WESTERN CANADA MENTAL HEALTH SUMMIT -

IMPROVING SKILLS & COMPETENCIES FOR MENTAL HEALTH & EDUCATION PROFESSIONALS

WEDNESDAY, MAY 24, 2023 – FRIDAY, MAY 26, 2023

Best Western Premier Calgary Plaza Hotel & Conference Centre
1316 33 St NE, T2A 6B6, Calgary, AB

EBONI WEBB, PSY.D., HSP

WORKSHOP #16

Trauma-Focused DBT: Common Survival Resources and Critical Interventions

Day Two | 12:45pm – 4:00pm



EBONI WEBB
PSY.D., HSP

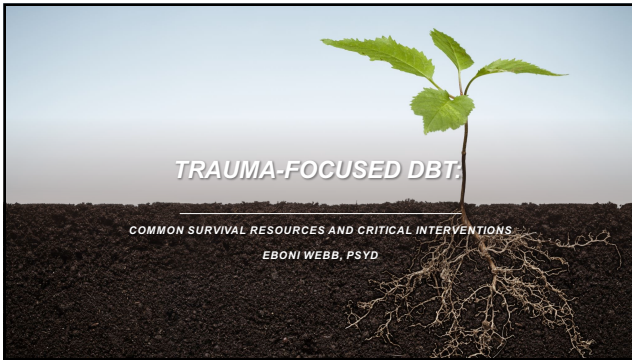
Eboni Webb, Psy.D., HSP is a licensed psychologist and serves as an advisor to the Dialectical Behavior Therapy National Certification and Accreditation Association (DBTNCAA).

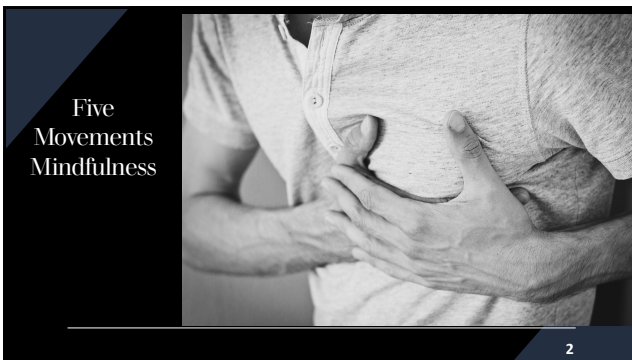
She has practiced in numerous community settings including clinics that treat underserved communities of color, clients with developmental disabilities, and clients suffering from severe and persistent mental illness. She worked at the largest mental health clinic at the time in the Minneapolis/St. Paul area that specialized in treating clients diagnosed with Borderline Personality Disorder (BPD) with Dialectical Behavior Therapy.

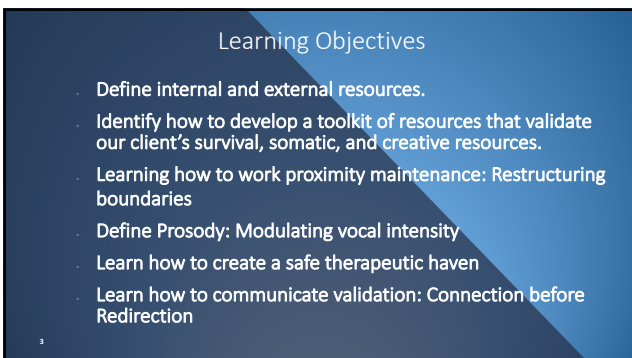


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Let's Practice!



The vagus nerve is the largest nerve in the body and controls our body's ability to detect danger, sense safety, experience rest/relaxation, and connect socially. It is refined through connection from birth and innervation of touch.

The Polyvagal Theory (Porges, 2011)



Neuroception



Safe



Danger!



Life Threat

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Acute Response to Threat Study

Hyperaroused Continuum	Rest (Male Child)	Vigilance (crying)	Resistance (Freeze)	Defiance (posturing)	Aggression (hitting, spitting)
Dissociative Continuum	Rest (Female Child)	Avoidance (Crying)	Compliance (Freeze)	Dissociation (Numbing)	Fainting (checking out, mini-psychosis)
Primary Brain Areas	Neocortex	Subcortex	Limbic	Midbrain	Brainstem
Cognition	Abstract	Concrete	Emotional	Reactive	Reflexive
Mental State	Calm	Arousal	Alarm	Fear	Terror

"In the brains of people who have been abused, the genes responsible for clearing cortisol were 40% less active"
(Morse & Wiley, 2012)

Acute Response to Threat; (Perry, Pollard, Blakely, Baker & Vigilante, 1995). Adapted from study results for teaching.

Social Engagement System

- Eye-gazing
- Language
- Prosody
- Touch
- Proximity



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Window of Tolerance

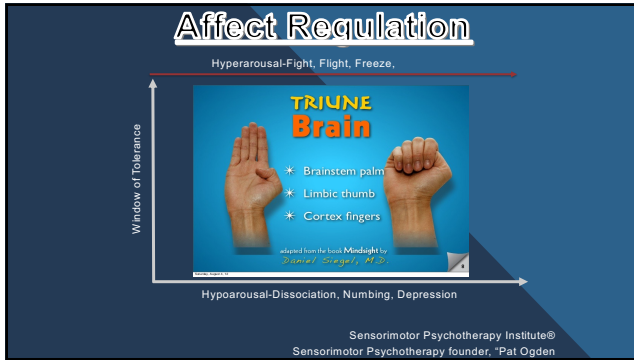
Sensorimotor Psychotherapy Institute®/Sensorimotor Psychotherapy founder, Pat Ogden



HYPERAROUSAL

HYPOAROUSAL

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Universal Emotions and Function (Adapted from Linchen, 2014)

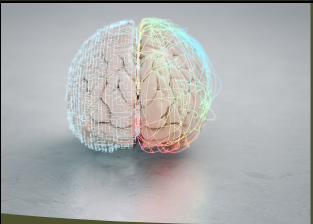

Emotion	Function	Action Urge
Anger	Boundary, Identity, Injustice	Attack, Define a boundary
Disgust	Protect from contamination/influence	Reject, Separate
Envy	Obtain something not currently possessed	Obsess, Aspire
Fear	Survival, Life Threat	Survival Defenses
Guilt	To signal a threat to personal morality	To make amends or apologize
Happy	Connect with pleasure	Maintain
Jealousy	To signal a threat to an important relationship	Possess, Posture, Protect
Love	Connect relationally	Connect, Sustain
Sadness	To signal a loss (relationship or expectation)	Isolate, Withdraw
Shame	To signal a threat to social standards/expectations	Hide, Conform

Intrinsic Universal Needs (Keating)

- ♦ Safety
- ♦ Security
- ♦ Affection
- ♦ Pleasure
- ♦ Esteem
- ♦ Power
- ♦ Control

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Development of Universal Needs (Adapted from Keating, 1982)				
Need	Age of Development	Healthy Development	Unhealthy Development	Key Emotions Impacted
Survival	0-2	Emotions	Threat Response	Fear, Happy, Anger
Security	2-3	Self in Relationship	Diffuse Boundaries	Fear, Jealousy, Love
Pleasure	0-3	Body-Self Development	Body Shame	Shame, Disgust, Envy, Love, Guilt
Affection	4-5	Capacity for love, sense of love and belonging, worthiness	Inhibition from autonomous connection	Love, Anger, Envy, Jealousy
Esteem	5-6	Recognition, Acknowledgement, Self-Acceptance	Lack of trust in self	Sadness, Shame, Guilt
Control	3-7	Choice	Compulsion, Impulsivity	Jealousy, Anger, Fear
Power	7+	Intention	Invulnerability	Envy, Guilt, Fear

Oxytocin

Hormonal Counter to Cortisol
Architect of Regulation

Treatment Targets to Increase Oxytocin Without Problem Behaviors

- Hugs
- Sing in a choir
- Give a back rub/foot rub
- Hold a baby
- Stroke a dog or cat
- Perform a generous act
- Pray

- Make positive eye contact
- Breath work
- Listen without judgment
- Positive touch
- Proximity
- Laugh/Dance

DBT Skills

- Build Positive Experiences
- Self-Soothe
- IMPROVE the Moment
- DISTRACT
- Nonjudgmental Stance
- Mindful Breathing
- GIVE

Signs of cPTSD: What to Look For

Self-Invalidation

- Self-hate/criticism of ethnicity, culture
- People-pleasing/assimilation behaviors
- Perfectionism/Procrastination/Proving worth

Emotional Vulnerability

- Anger, Bitterness Towards Others
- Fragility, Vulnerability

Traumatized Experiencing

- Active avoidance
- Passive avoidance, dissociation

How to Help

Self-Invalidation

- Modeling and owning failure
- Communicating validation

Emotional Vulnerability

- Teach culturally-sensitive body positivity and self-care
- Create a safe environment for dialogue

Traumatized Experiencing

- Model Emotions
- Display authentic reactions without minimizing

Signs of cPTSD: What to Look For

Unrelenting Crises

- Uncontrollable Events (e.g. COVID-19)
- Ongoing televised racial trauma
- Constant trauma cues in family of origin

Active Passivity

- Willfulness, Demandingness
- Helplessness

Apparent Competence

- Disconnect between verbal and non-verbal behavior
- Contextual Competence (mood/situational)

How to Help

Unrelenting Crises

- Control the Controllable in the Safe Harbors
- Establish curfews and limit access to media outlets without supervision and increase dialogue

Active Passivity

- Cheerlead
- Encourage problem-solving
- Establish deescalating space

Apparent Competence

- Highlight effective behaviors observed
- Lose the assumption of how the loved one "should" behave in all contexts based upon one.

Whole Body Healing

"Pain is important: how we evade it, how we succumb to it, how we deal with it, how we transcend it." Audre Lorde

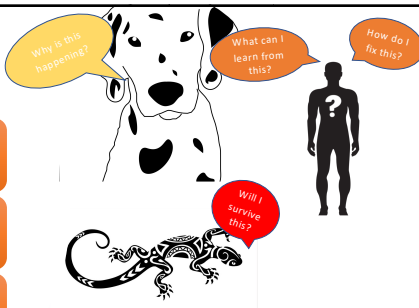


The Trine Brain

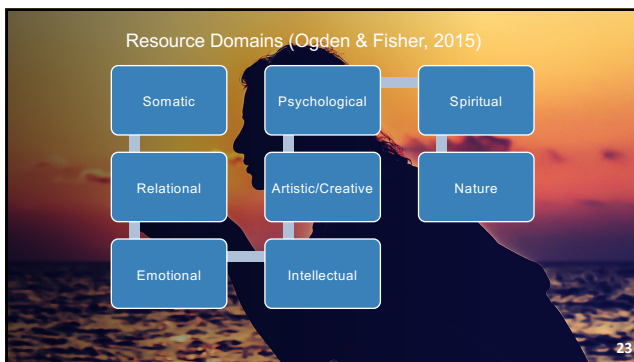
Prefrontal Cortex
Observing
Thinking
Decision-Making

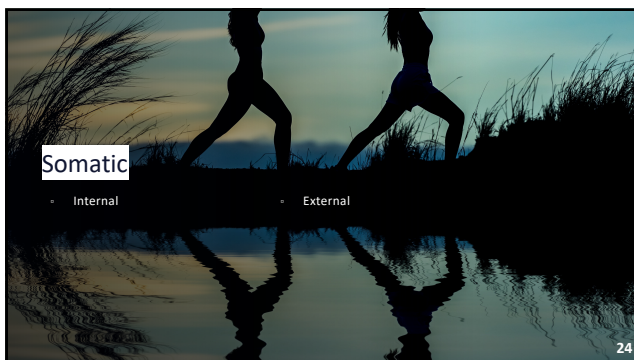
Mid Brain
Emotional Center
Memory

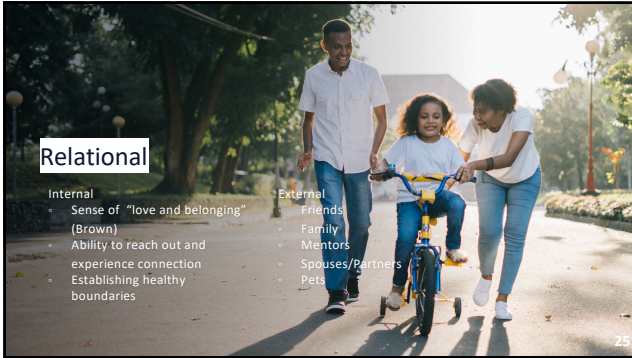
Lower Brain
Survival defenses
Automatic processes







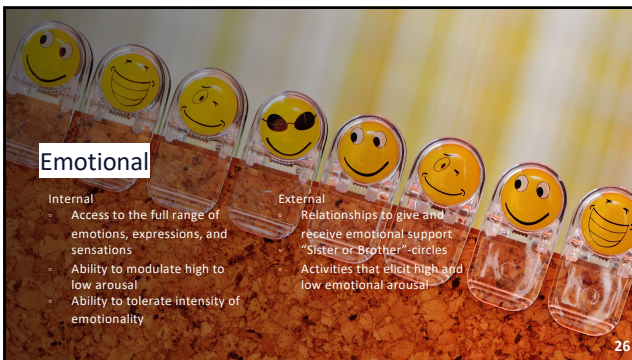




Relational

Internal <ul style="list-style-type: none"> ◦ Sense of "love and belonging" (Brown) ◦ Ability to reach out and experience connection ◦ Establishing healthy boundaries 	External <ul style="list-style-type: none"> ◦ Friends ◦ Family ◦ Mentors ◦ Spouses/Partners ◦ Pets
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Emotional

Internal <ul style="list-style-type: none"> ◦ Access to the full range of emotions, expressions, and sensations ◦ Ability to modulate high to low arousal ◦ Ability to tolerate intensity of emotionality 	External <ul style="list-style-type: none"> ◦ Relationships to give and receive emotional support ◦ "Sister or Brother" circles ◦ Activities that elicit high and low emotional arousal
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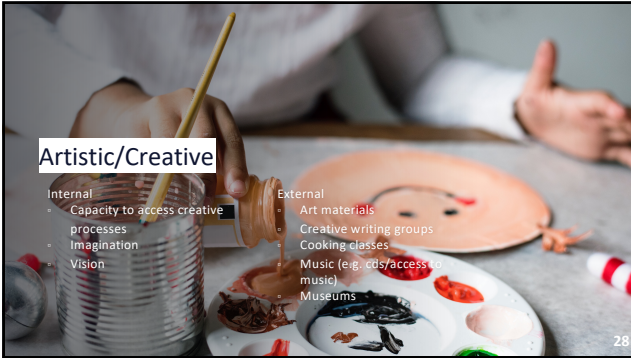
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Intellectual

Internal <ul style="list-style-type: none"> ◦ Creative thinking ◦ Dreaming ◦ Imagination ◦ Learning 	External <ul style="list-style-type: none"> ◦ School ◦ Classes ◦ Study groups ◦ Puzzles ◦ Books
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Artistic/Creative

Internal <ul style="list-style-type: none"> Capacity to access creative processes Imagination Vision 	External <ul style="list-style-type: none"> Art materials Creative writing groups Cooking classes Music (e.g. cosy access to music) Museums
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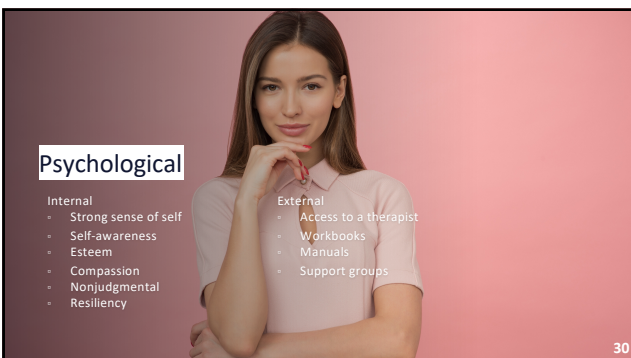
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Material

Internal <ul style="list-style-type: none"> Ability to work (e.g. what I get to do and have to do) To enjoy the comforts of life Experiencing pleasure 	External <ul style="list-style-type: none"> Jobs Home Comfortable bedding Life hacks
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Psychological

Internal <ul style="list-style-type: none"> Strong sense of self Self-awareness Esteem Compassion Nonjudgmental Resiliency 	External <ul style="list-style-type: none"> Access to a therapist Workbooks Manuals Support groups
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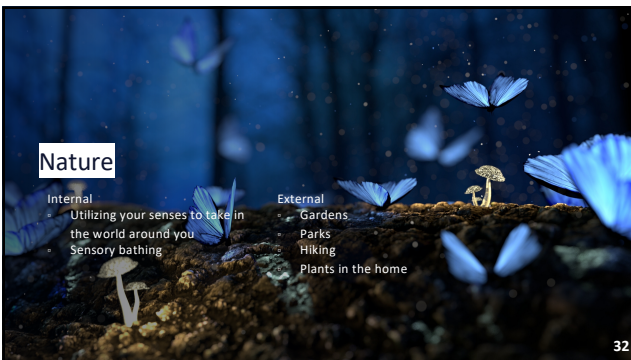
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Spiritual

<p>Internal</p> <ul style="list-style-type: none"> Ability to develop connection with a Someone or Something greater than one's self Capacity to connect with one's own spiritual essence 	<p>External</p> <ul style="list-style-type: none"> Meditation Contemplative Prayer Shabbat Spiritual mentors
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Nature

<p>Internal</p> <ul style="list-style-type: none"> Utilizing your senses to take in the world around you Sensory bathing 	<p>External</p> <ul style="list-style-type: none"> Gardens Parks Hiking Plants in the home
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Critical Interventions: Building the
Therapist's Resource Toolkit

How do we embody this as therapists?



Secure Base
Attuned therapists that are skilled
listeners, attuned, present, and activated
towards change and challenge



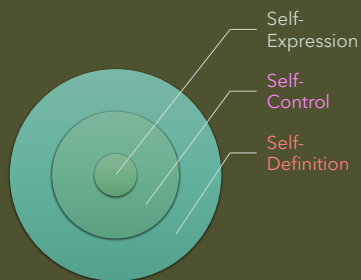
Safe Harbor
Office safety and security, informed
consent, confidentiality, community
safety planning and protection



Proximity Maintenance
Tolerate, Modulate, and Communicate
Difficult Emotions, Feelings, and
Sensations as they arise in session.


Boundaries
Authoritative Therapy:
Proximity Maintenance

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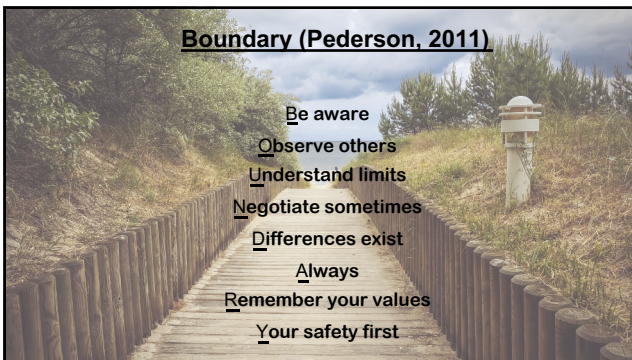
Envision the Human Cell

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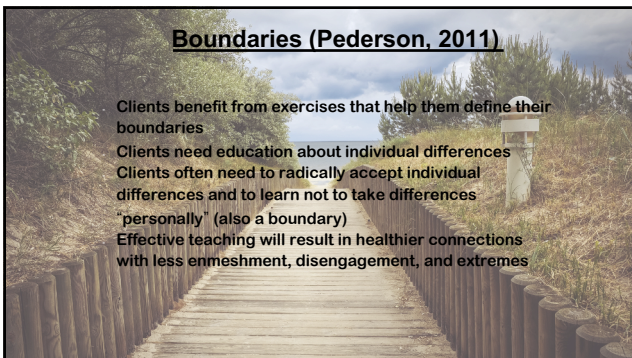
Boundaries (Limits)
Core Assumptions
(Pederson, 2011)

- Clients often don't recognize boundaries
- Ineffective boundaries can create dysfunction in relationships
- Ineffective boundaries can create ineffective responses in therapists
- Clients want to learn about and practice effective boundaries for themselves
- Clients need to learn about and recognize the boundaries of others
- Therapists need to model effective boundaries



Boundary (Pederson, 2011)

- Be aware
- Observe others
- Understand limits
- Negotiate sometimes
- Differences exist
- Always
- Remember your values
- Your safety first



Boundaries (Pederson, 2011)

- Clients benefit from exercises that help them define their boundaries
- Clients need education about individual differences
- Clients often need to radically accept individual differences and to learn not to take differences 'personally' (also a boundary)
- Effective teaching will result in healthier connections with less enmeshment, disengagement, and extremes

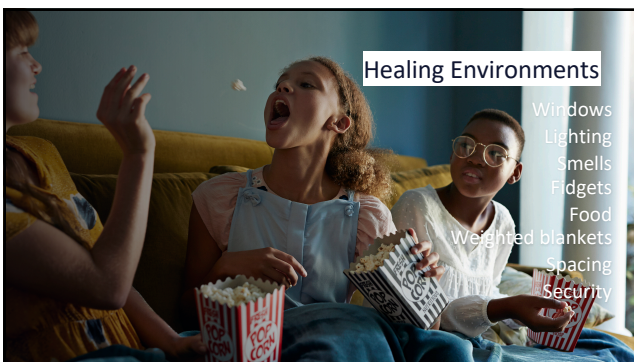














Validation: The Keys to the Kingdom

- Validation is the non-judgmental acknowledgement of a person's experience
- Validation creates the conditions of acceptance that usually precede change
- As a rule, start with validating the person, and return to validation when the person is "stuck."

Common Types of Invalidation

- Abuse and neglect
- Open rejection of thoughts, feelings, and behaviors
- Making "normal" responses "abnormal"
- Failing to communicate how experience "makes sense"
- Expecting behaviors that one cannot perform (e.g., due to developmental level, emotionality, or behavioral deficits)

Levels of Validation

(Linehan, 1997)

- Level 1: Being acutely attentive
- Level 2: Reflecting verbal communication
- Level 3: Describing non-verbal communication
- Level 4: Expressing how experience makes sense given history or biology
- Level 5: Expressing how experience makes sense in the present moment and context
- Level 6: Being in genuine, human contact

VALIDATION PRACTICE

"I went to the store yesterday and I saw these Red Hot candies. I completely lost it and forgot what I went into the store to get. It reminded me of when I was little and my mom wanted to teach me about waiting. I had asked for some of those candies and she said no, but when she tucked me in that night, she forced me to eat a huge bag until my mouth and eyes burned. I thought I was past that, but I am having urges to cut myself again. I get so angry with myself. I keep myself from eating. If I had any pills, I'd take them...you know, just to numb out."

In Summary

Trauma: Is broad, self-perceived, and activates survival defenses to cope. It can come in multiple forms including single-incidents and developmental.

Stress Response: Dysregulation is a learned response that is neurobiologically driven and socially maintained.

Attachment: Human survival and attachment is dependent on communication, eye-gazing, and finding a way to "fit." It is essential when working with trauma to see behaviors as "attachment-seeking behaviors"

Whole Body Healing: We must seek healing of the body in order to heal the mind. Our functioning isn't either or but both and.

Complex Treatment Strategies: Treatment must be multifaceted including top-down and bottom-up processing techniques. DBT, EMDR, SP, and somatic therapies must be utilized to address the lasting impact of trauma.

The impulse to heal is real and powerful and lies within the client. Our job is to evoke that healing power, to meet its tests and needs and to support it in its expression and development. We are not the healers. We are the context in which healing is inspired.

Ron Kurtz



Thank-You

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