

Stabilization: First Phase of Trauma Treatment

Presentation by:

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Objectives

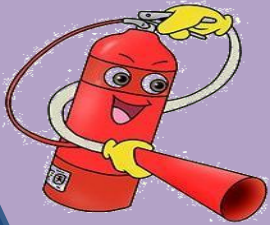
Discuss the role and goals of stabilization in trauma treatment

To understand the key components of stabilization.



**FRONTAL LOBES
(Thinking Brain)**

Amygdala



Limbic Brain

Brain Stem

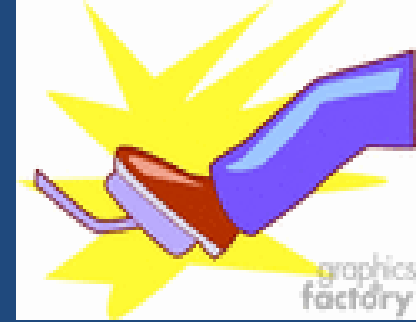
Two Branches of Nervous System

ANS

- **Sympathetic Nervous System**
- **Parasympathetic Nervous System**



Gas Pedal and Brakes



Sympathetic NS

(Gas Pedal)

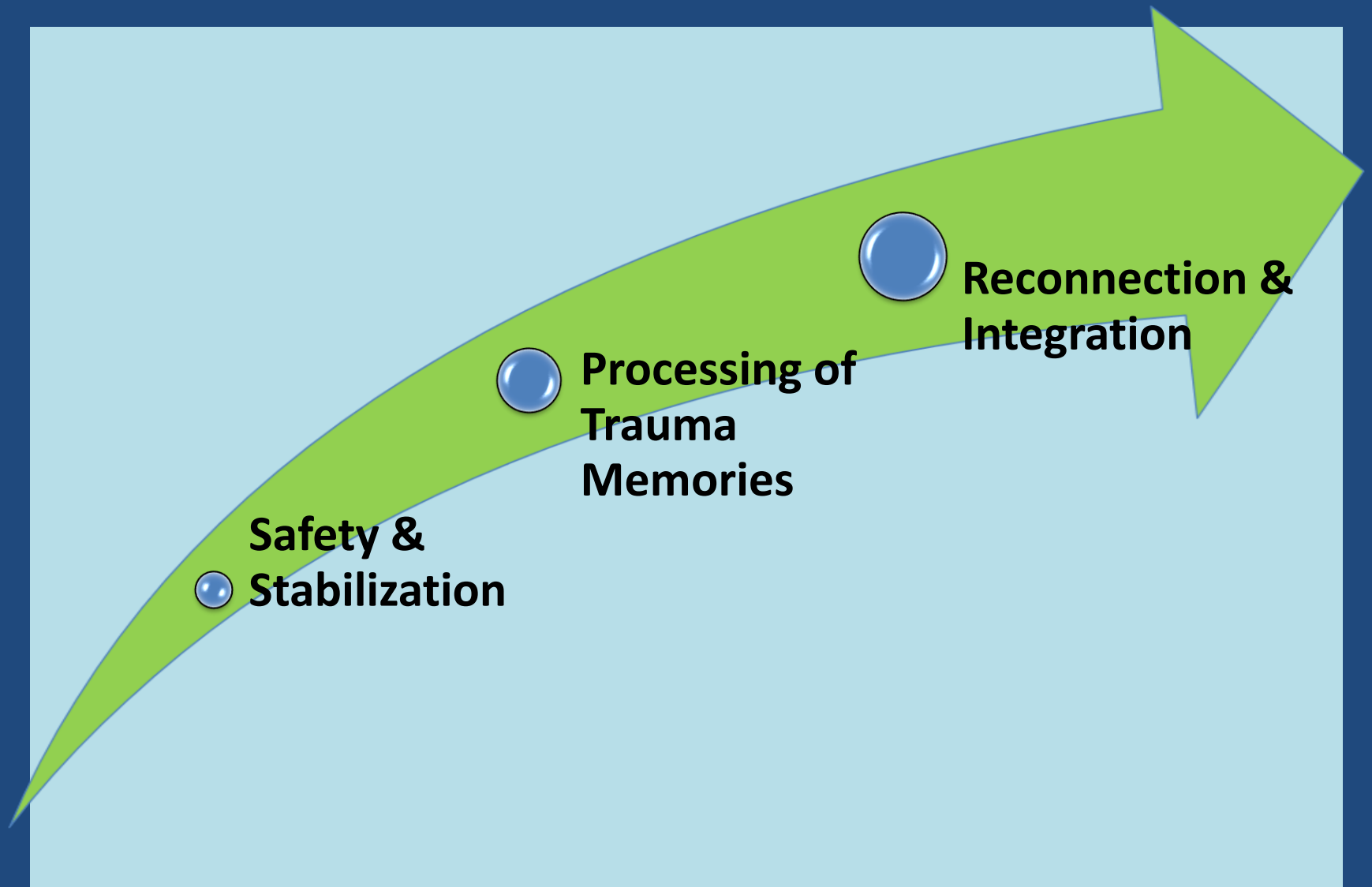
- Blood pressure increases
- Pupils dilate
- Muscles tense
- Heavy breathing
- Mental focus sharpens
- Stress hormones are released

Parasympathetic NS

(Brakes)

- Blood pressure decreases
- Breathing is normal
- Muscles relax
- Able to think and problem solve
- Relaxation hormones are released

Road Map for Trauma Treatment



STABILIZATION

**G
O
A
L
S**

Establish a sense of safety

Improved self-regulation

Improve attachment relationships

Elicit clients' strengths & resilience (Empower)

Reduce risk- Develop safety plan

Stabilization Begins with....



What is Safety?

Safety is the extent to which the child is free from fear and secure from physical or psychological harm within their social and physical environment.

(Essential for Childhood, 2014)

Types of Safety

Physical Safety

Behavioural Control

Emotional Safety

Therapeutic Safety

Improve Attachment Relationships

- Assist caregivers in providing a **STABLE, SAFE and PREDICTABLE ENVIRONMENT** that includes:
 - Keeping a regular schedule/routine for:
 - Mealtime
 - Bedtime
 - Playtime
 - Quiet time etc...
- Provide psycho-education

Secure Relationships Create Safety

➤ **Trusting Relationships**

- Empathy
- Listening
- Reliability

➤ **Predictability**

➤ **Routines**

- Structures
- Explicit Rules
- Explicit Expectations

➤ **Self-care resources that stabilize the “energy regulation system (Ogden, 2006).”**

- Regular Sleep
- Eating habits

“Being able to feel safe with other people is the single most important aspect of mental health.”

(Bessel Van Der Kolk)

**Safety is the foundation of all
therapeutic work.**

Establishing a Secure Base in Therapy

Five essential conditions of trauma informed therapy include:

- Safety (client privacy, flexibility, paced appropriately)
- Trustworthiness
- Choice (include as much choice as practical)
- Collaboration
- Empowerment

(PODS, 2016)





When Basic Needs are NOT Met

Children acquire:

- **Non-caring attitude and feelings of hopelessness which result in:**
 - **Internalizing behaviours** (depression, somatic complaints, suicidal thoughts)
 - **Externalizing behaviour** (aggression, defiance towards authority, self harm suicidal).

(Slide Credit: Kevin Powell, 2013)

Symptoms Often Dissipate When..

- Children receive support from family & friends (**social needs**)
 - Develop trusting relationships with staff (**social needs**)
- 
- Begin to feel safe within the predictable routine of their home, treatment facility etc.. (**safety needs**)
- 
- Begin eating and sleeping regularly (**physiological needs**)

(Slide credit: Kevin Powell, 2013)

Reduce Risk – Develop Safety Plan

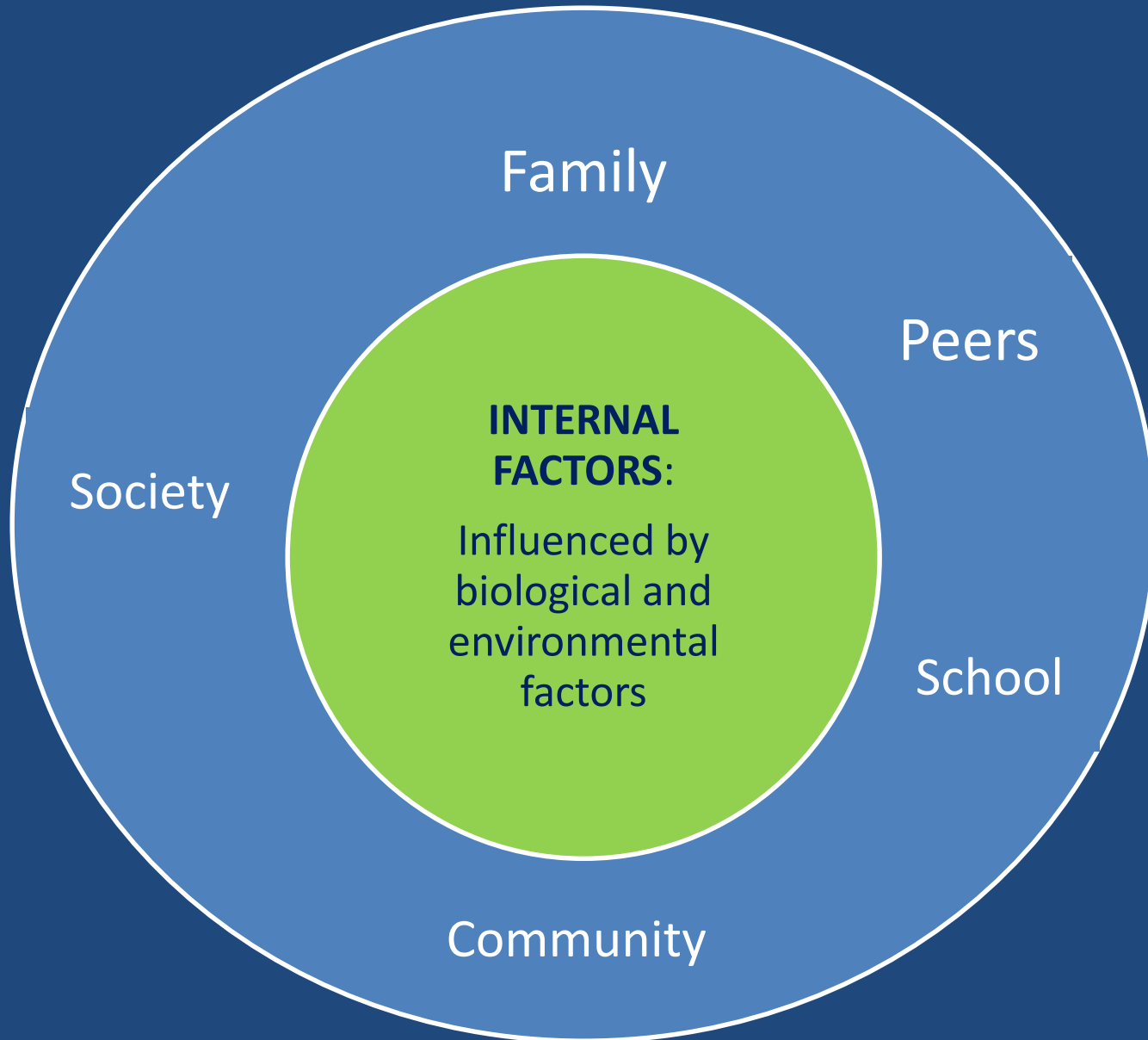
- **Reduce risk by building on protective factors.**
- **Components of a safety plan**
 1. Warning signs
 2. Internal coping
 3. People that can help
 4. Professional that can be contacted
 5. How to make the environment safe

(MCFD, 2014)

One Sided View



Risk and Protective Factors – Internal & External



Strengths

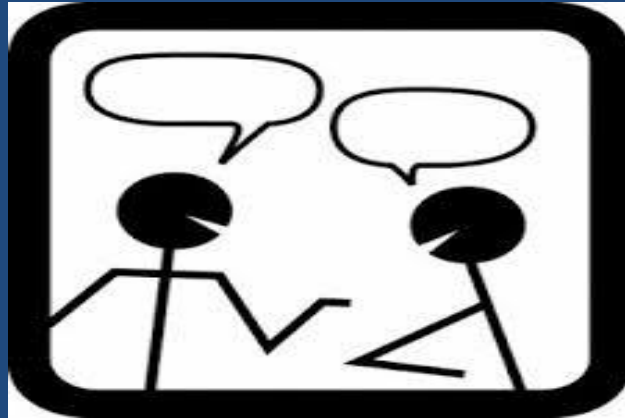


Interventions to Foster Stabilization

- Many of these interventions are informed by child-centered , cognitive– behavioral theories, and strengths-based approaches such as solution focused and narrative theories.
- These may include:
 - relationship building,
 - psycho education,
 - skills building, and
 - experiential activities. (Myrick & Green, 2014)

Skills Building

Verbal
Techniques



Non-Verbal
Techniques
or



A combination of both

Psycho-education

It has two main objectives:

- **Educate** client about trauma symptoms

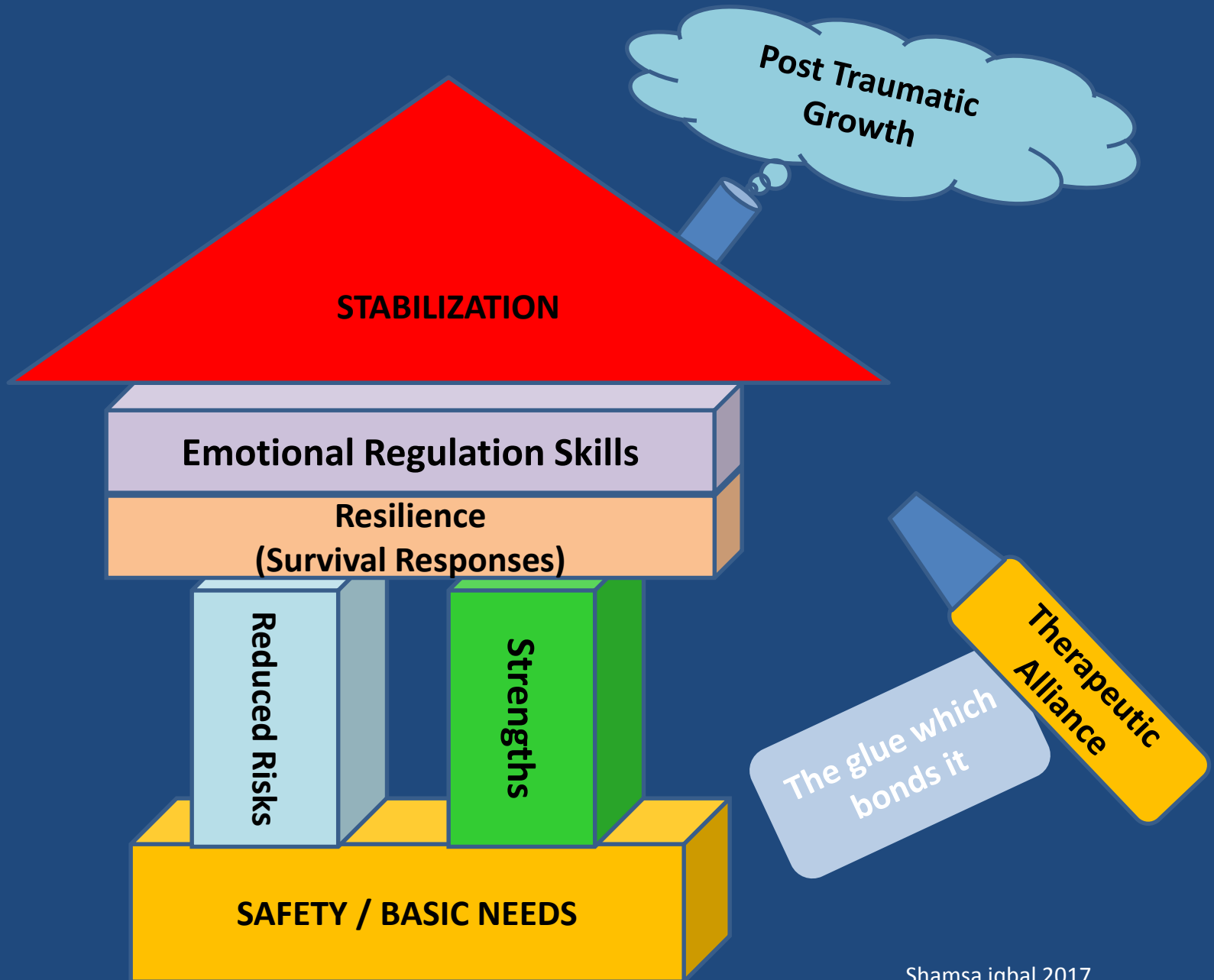
And

- **Decrease client's shame, confusion** and sense of being crazy.

(Fisher, 1999)

Skill Building

- Container
- Calm Place
- Centering
- Grounding
- Breath
- Resource Development
- Moving Meditations (yoga etc.)
- Still Mediations



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