Trauma, autism, depression, BPD, Schizophrenia All share...

• Difficulty feeling safe

- Auditory hypersensitivity
- Flat facial affect
- Lack of vocal prosody
- High heart rate/low vagal tone

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F.A.C.E.S.
(Dan
Siegel's work)FlexibleAdaptiveCoherentEnergyzedStable

Bodily Regulation	Attuned Communication	Balanced Emotions
Soothing/ Modulating Fear	Flexibility	Insight
Empathy	Intuition	Morality





 State (awareness of moods) Interpersonal (recognizing own and other's needs Temporal (past, present, future) Consciousness (mindful awareness: what is known, unknown and experienced) 	Differentiation & Integration	 Bi-lateral Vertical (being open to experience) Memory (connect implicit with factual and autobiographical) Narrative (making meaning from observing
 DDP strengthens all of These bridges. Temporal (past, present, future) Consciousness (mindful awareness: what is known, unknown and experienced) 		 experiences) State (awareness of moods) Interpersonal (recognizing own and other's poods)
	DDP strengthens all of These bridges.	 Temporal (past, present, future) Consciousness (mindful awareness: what is known, unknown and experienced)

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PAG; Periaqueductal gray

Is the primitive danger-detection part of brain.

It is always active in a traumatized person as its job is to suppress pain through production of endorphins and dynorphins \rightarrow analgegia.

How it lights up (dorsal vs lateral) determines whether you will have a hyperactive or more of a dissociative response

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limbic system

Amygdala; everything to do with emotion, forming memories of things we love/hate. Major fear center. Combines input from all over the forain to make a decision about whether something is dangerous (stimulation can be real or imagined). Tags information from voice and face in particular.

Orchestrates early approach and avoidance learning that is fundamental to trust or mistrust

Optimally, inhibited by temporal cortex. However, if stress impedes the connection, behaviour becomes fear driven. Messages sent to the PAG, which is hard wired for Flight, Fight or Freeze.

Develops early (by 8th month of gestation) and sensitive to early rearing experiences and context or cultural environment

High speed detection of stimuli that have significant relevance to our health (+/-) less than 50 ms
 Implicit memories

-Early damage leads to profound difficulties in establishing emotional bonds and emotion regulation





Anterior Cingulate Cortex	 Bridge between thinking and feeling Strong connection to amygdala, therefore helps regulate fear Strong connection to insula so allows for empathy. Involved in "caring about". Transforms single brains into an side argument
	Under high stress, uncouples the fronto-limbic circuit and move to self-defense
	 Very sensitive to auditory information: prosody vs content (damage to ACC often leads to mutism)
	 First year of life is about nurturing the ACC



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Secure attachment

Bodily	Attuned	Balanced
regulation	Communication	Emotions
Soothing fear	Flexibility	Insight
Empathy		
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AVOIDANT (15-20%)

- Behaviour skews away from attachment and more towards autonomy and exploration
- Upon separation, attachment system is deactivated and child looks unconcerned
- Upon reunion, hyper independent, mot much attention to mum, no capacity to seek comfort or proximity
- Physiologically highly aroused

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In school children with avoidant attachments will
Often fly under the radar because they don't make a fuss or ask for help
They like to please
May be perfectionistic or anxious
Occasionally "crack" under pressure and are uncharacteristically angry.





In school ambivalent kids...

- Are often disruptive, reactive and have difficulty settling their bodies
- Seem to always want your attention
- Can be intimidating and aggressive
- Avoid challenges that threaten to overwhelm anyway they can
- Do best in one-on-one environments





Become dysregulated quickly and move through both hyper-aroused and hypoaroused states: rage, lying, minimization, blame

Resist being taught because can't trust adults

Peer interactions are often conflictual

Can't access regular education

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DEVELOPMENTAL DOMAINS IMPACTED BY DEVELOPMENTAL TRAUMA

- 1. ATTACHMENT: Difficulties with trusting others, perspective taking, social isolation, empathy.
- 2. BIOLOGY: Difficulties identifying and regulating physical states, somatic problems, problems with balance and coordination.
- 3. AFFECT REGULATION: Difficulties identifying, regulating, and communicating emotional states.
- 4. DISSOCIATION: Variable access to states of consciousness, impaired memory for events occurring in particular states.
- 5. BEHAVIORAL CONTROL: Poor impulse control, self-destructive, difficulty self- soothing, oppositional behaviors, reenactments of past traumas.
- 6. COGNITION: Difficulties in attention, lack of curiosity, learning difficulties, speech/language problems, processing novel information, reflective functioning.
- 7. SELF-CONCEPT: Lack of continuity in sense of self, negative selfconcept and high level of shame, poor body image.



Suppression of social emotions and reflective functioning
Suppression of empathy
Suppression of guilt, shame, remorse
Suppression of curiosity and wonderment
Suppression of reality testing

Intersubjectivity: existing between conscious minds; shared by more than one conscious mind.

Att	Attunement		
	Joint attention		
	Congruent intent (both have same intent to understand inner life vs to "fix" a problem)		















