Supporting an Individual with Difficult Behaviors Who Has Experienced Trauma

Understanding Trauma
Traumatic events may include one or more of the following (the more events experienced, the greater the influence of trauma):

- Separation from primary relationships at an early age
- Frequent moves from residential placements
- Institutionalization
- Abuse (physical, emotional, verbal, sexual)
- Witnessing violence
- Neglect
- Degradation
- Loss of parent, sibling, or significant other
- Significant medical problems/procedures
- Extended hospitalizations

In the name of treatment, professionals may expose individuals to trauma (individuals who have experienced previous trauma are more susceptible):

- Time out
- Overcorrection
- Physical restraint
- Hospitalizations

Trauma alters the emotional and physiological make-up of a person, especially if the trauma was experienced in childhood and was part of development. Exposure to trauma creates internal dysregulation and an increased stress response. Therefore, individuals who experience trauma are more easily overwhelmed and this oftentimes presents as problem behaviors. Difficult behaviors are a trauma response. It is important to remember that the person may not always have control over his or her behavior. A person’s dissociative experiences during a trauma response may be as involuntary as a seizure. This means that a strictly behavioral approach is not the best method and could actually create the difficult behaviors and expose the individual to more trauma (a person would never be expected to just stop having a seizure). It is not about the behaviors! Instead, difficult behaviors are an automatic trauma response communicating messages such as, “I’m lonely,” “I have no power,” “I don’t feel safe,” “you don’t value me,” “I’m bored,” “I don’t know how to tell you what I need,” “I hurt,” “my body is not doing/feeling like I want it to.” The goal is to focus less on the actual behavior and more on the underlying communication and dysregulation that are creating the behaviors. Therefore, decreasing and eliminating difficult behaviors involves working with the physiology and creating instances where a trauma response is less likely. This means teaching and providing regulation skills. Throw out what you know about rewards and punishments! Those do not apply here!

**Difficult Behaviors = Trauma Response**
Supporting & Creating Conditions to Lessen Trauma Response

A trauma response happens when an individual does not feel safe in his or her body or environment. This means that something in the environment may “trigger” the response or it may be something internally because of previous trauma that cannot be seen. Instead of a behavior plan to "fix" the person or reduce and manage problem behaviors, support should focus on:

How can we help the person to achieve a sense of safety and well-being?

A strong sense of safety is critical. What a person most needs are people who remain committed to the importance of safe, predictable relationships. Relationships make all the difference!

1. Overarching Attitude of Support:
Everything we can do for the person should convey and emphasize:

- My love/support is not contingent on your behaviors and I will accept you no matter what.
- I care.
- I am trying to help.
- I am trying to reassure.
- I understand.
- I will hang in there with you.

Infuse all of your help with hope and emphasize- “It’s not your fault.” Try not to take things personally and understand that difficult behaviors are not a choice. Appreciate the person has a warrior personality and has survival techniques that have helped to persevere in the past. Accept and respect these techniques while helping to teach and develop healthier ones.

2. Providing Regulation During Trauma Response:
When having difficult behaviors (trauma response): Use Time-Ins instead of Time-Outs

- Do not use time outs, punishment, isolation, shaming, or blaming: punishment can further traumatize or create more problem behaviors
- Time-Ins teach how to regulate emotions, calm and quiet self
  - Close proximity to a calm person that emphasizes connection (interaction may include hugs, holding, touching, eye contact, sitting nearby, offering firm but loving limits)
  - Don’t force support but make it available if needed- offer support with presence and a couple calming words if needed- “I’m here if you need me.”
  - Tell the person that you want to help and then stop talking. Wait until the person begins to calm, or relax, and then provide support (“That’s great. I’m glad you’re calming down. How can I help you?”). And then follow through on the promise to be supportive!
  - The consequence should allow the person to have MORE contact (your presence to them should not depend on their behavior)
- Talk more when the person is on track. Talk less when the person is engaging in difficult behaviors. It’s not always clear that a person can process language when they are upset. It’s likely they cannot process your words when they are dissociating.
- Know and expect that difficult behaviors will happen. It is okay and is not anyone’s fault. Don’t be overly impressed or frightened by difficult behaviors or emotions. It is important to remain calm during emotional displays to communicate to the person that they are “safe.”
“When a flower doesn’t bloom, you fix the environment in which it grows, not the flower.”

3. Creating Healthy Conditions to Lessen Trauma Response and Teach Self-Regulation:
Here are some ways to modify the environment and develop self-regulation when the individual is not engaging in difficult behaviors (this is the best time to teach).

- Limit things that can make the person feel unsafe: crowds, confusion, new places, lack of control, being given orders, threats
- Provide stimulating activities and movement to dampen the hyper-state of physiological arousal that individuals who have experienced trauma are often in
- Structure and predictability are critical for safety: Provide consistent, loving guidance with structured and predictable time frames and gentle transitions (a regular, but not rigid, schedule must be followed)
- Minimize the amount of rules or expectations while still keeping safe and supported
- When having a hard time and experiencing more difficult behaviors, amp up the support don’t punish
- Model and label emotions and actions for yourself and the individual. Narrate healthy ways of regulating such as “I’m feeling overwhelmed right now so I’m going to go in my room and read a book.” Label emotions for the individual out loud as they happen without forcing or expecting them to engage with you or understand.
- Help the person create and make his or her own safe space where he or she can go as needed: There should be no rules or expectations about it other than safe and accessible
- Create safety around expected difficulties with the individual- if he or she thinks something is going to be difficult, ask, “what would you need for it to be less difficult?” and have that ready if needed
- Establish traditions and rituals (things to look forward to)
- Keep your promises: many individuals who engage in difficult behaviors have too much experience with broken promises
- Do not expect a thank-you for your help (they might, but don’t expect it)
- Be prepared for the person’s concept of love to be fundamentally different than yours
- Choice is a powerful alternative to punishment: If the person’s behavior challenges you, help find more desirable ways to express the needs underlying the behaviors- Instead of ultimatums, give choices
- Set limits in ways that are supportive and not threatening: Include the individual with setting rules or limits instead of imposing without their input

Support for the Supporters
The work of supporting someone who has experienced trauma can be difficult and challenging.
It is important to provide on-going support to the person’s supporters.
Build a support plan for the supporters. Meet regularly and ask what the supporters need to continue doing their best work. Build a crisis support plan that really works and develop possibilities to handle difficult times. As a supporter, ask, “What would I need if the person had a terrible day and nothing I could do would make him or her calm down?” “What would I need to feel safe?” Once you are assured that you will be safe in the “worst case scenario,” it is easier to be ready for the work ahead. Also include information about emergency back-up and assure this back-up is reliable. You may also need to develop a safety plan or protocol if the person requires it during a crisis.