

The Science of Success in Working with ~~Difficult~~ Children A Day with Dave Ziegler "Traumatized"

Dr Dave Ziegler, Ph.D., L.M.F.T., L.P.C., is a Licensed Psychologist, Executive Director and Organisation Founder of Jasper Mountain, Oregon, USA, with a 37 year career as a therapist, clinical supervisor, foster parent and program manager. An international authority and presenter on issues related to trauma and psychological treatment, Dave has authored multiple books and publications including:

- ❧ **Raising children who refuse to be raised**
- ❧ **Traumatic experience and the brain**
- ❧ **Achieving success with impossible children**
- ❧ **Beyond healing**

Dave was recently in Melbourne running a full day program on 'The science of success in working with difficult children'. As part of our metropolitan conference training initiative for 2009, FCAV sponsored 30 places for carers to attend this great training opportunity. The following notes are the thoughts, ideas, 'wow's' and insights we found valuable while attending the session – we hope this information is as valuable to you as it has been for us...

Trauma gets worse throughout life if untreated!

- ❖ Trauma will affect the physiological state as well as the mental state of the child;
- ❖ Children who have suffered trauma will lose the ability to play and to bond – they will struggle to maintain friendships;
- ❖ Traumatized kids will go out and seek equally damaged friends;
- ❖ Traumatized kids will die younger than their counterparts from medical diseases (not from mental illness);



www.jaspermountain.org

Jasper Mountain provides a continuum of programs that meets the needs of emotionally disturbed children and their families. Services include an intensive residential treatment program with a therapeutic school, a short-term residential center, treatment foster care program, community based wraparound program and crisis response services. (Source: www.jaspermountain.org)

Check out the website for articles, resources and further information about Jasper Mountain.

Influences for Health and Disease

“The inner working model developed by the level of attachment will form the basis to appraise, interpret and regulate social and emotional information for the person’s life span. There is a strong correlation between this bond and adult health or disease”.

Dr. Allan Schore

- Genetic coding play a major role;
- Epigenetics – potentiating factors promote or depress the influence of genes;
- The social environment plays a major role in determining the interplay of Mother Nature & Mother Nurture;
- The fundamental influence determining the social world of a child is the quality of attachment;
- Early attachments determine structural and operational functions of the brain;

Dr Dave Ziegler

Six Processes of Neuro-development

❖ Promote Survival

- ❖ **Adaptation:** The infant brain is prepared to develop around the conditions found in the environment, whether nurturing or threatening.
- ❖ **Imprinting:** The more frequent the traumatic experience or neural activation, the more indelible the imprint or processing template through which all new input is filtered. Very early experiences become the framework through which the brain perceives and understands others and the environment from then on, unless these perceptions are modified through potent further experiences.
- ❖ **Sensitization:** Repeated exposure to trauma produces sensitization, or full arousal to minor stressors.
The individual’s limbic memory produces a reactive response pattern to all levels of future stress.
- ❖ **Use Dependent Development:** Neurons that connect, communicate and work with other neurons develop, those that do not die. (“Neurons that fire together wire together” – Voigt Baier & deLima). Nurturing environments produce neuro-networks of comfort, self regulation and optimism. Threatening environments produce networks for fight/flight, hypervigilance and pessimism.
- ❖ **Sequential Progression:** Primitive brain regions develop first then more complex regions. Higher reasoning centres of the brain develop only when chronic survival issues are not a constant focus of the brain.

Brain Structures

- **Orbitofrontal Cortex** – The 'CEO' on the brain that pulls all sensory information into a meaningful whole.
- **Right Frontal Cortex** – Regulates emotions both positive and negative.
- **Right Hemisphere** – Includes the intuitive, creative and social brain.
- **Limbic System** – The emotional/reactive brain including traumatic memory.

All overlap and interact

Limbic System

- **Amygdala** – Signals threats, sources of fear, and triggers autonomic arousal.
- **Anterior Cingulate** – Involved in regulation of emotion, related to identifying others, connecting and separating, moderating arousal.
- **Insula** – Enables internal awareness and a sense of self as different from others.
- **Orbitofrontal Cortex within the Limbic System** – Provides meaning to identification and regulation of emotions.

The Orbitofrontal Cortex begins to develop only after birth and is shaped by attachment experiences which in turn impact:

- ↪ Social adjustment
- ↪ Mood control
- ↪ Drive & responsibility
- ↪ Defining the personality

Cavada & Schultz

"To be resilient in the face of stress is a primary indicator of both a secure attachment and of optimal childhood mental health".

Dr Allan Schore

Some key points from Dr Dave Ziegler's presentation:

- Self regulation is controlled in the frontal cortex. If a child is never soothed as an infant, it has no way of learning to self-soothe or self regulate their own behaviour and emotions.
- Empathy is not an instinctive human trait. Empathy must be taught.
- Traumatized children have no idea why they act the way they do. If you ask a traumatized child "Why did you hit your sister?", their response will be "I don't know", and they are right – they do not know.
- Traumatized children have the mindset that their needs will never be met.
- Neglect is the biggest form of abuse for a child. Neglect programs the 'inner working model' of the child for life.
- Connecting with a child can open the mind to change the inner working model. If you can connect with a child, you can teach them to enable their mind to bond and attach with/to you.
- The brain's job is to protect and survive. It will focus on these objectives above all else.

Handy hint – The Limbic System handles memory, sexuality, emotions, attachment. The Limbic System in a traumatized child is always alert and active – permanent state of fight or flight. Instead of asking the question "Why did you hit your sister?", try saying "Tell me how you were feeling when you hit your sister - what was happening with you and what could you have done differently in the situation?"

Note: It's not always a great strategy to talk about this with a traumatized child straight after the event as their brain is not available to handle the conversation while they are angry. Instead, have the conversation when they want something. Eg; "We are going to have a quick three minute conversation and then you can go outside". Alternatively, talk to the child while driving in the car – they are more likely to speak freely if you are not looking directly at them.

- Jasper Mountain School – the staff have learned how to adapt the school to suit teaching a traumatized brain. Many traumatized children do not connect at school because school is not teaching what is relevant to them, which is basic survival.
- Lunch time and recess are the hardest times for traumatized children and they perceive everything and everyone around them to be a threat. There are too many variables present for the child's Amygdala, hence it is a permanent state of danger alert.
- 70% of traumatized children are labelled as having learning disabilities. This is not due to any 'brain' problem, but rather is a direct result of their 'nurture' experience.
- 82% of children who arrive at Jasper Mountain are on medications for hyperactivity. There has been a 400% increase in the prescribing of hyperactivity medications to children in the USA in the last 20 years.
18% of children who come to Jasper Mountain remain on medications, but this is only in cases of highly traumatized children, and only after all other alternatives have been considered.
- We need to teach traumatized children to relax and decompress.
- We need to teach/educate traumatized children differently in schools.
- We need to change the traumatized child from the inside out, rather than from the outside in.

- To achieve success in changing a traumatised child's behaviour, you must have a positive impact on the brain.
- The human brain wants to be happy. The traumatised child's brain just wants to survive.
- Engage the front of the traumatised child's brain with a better way to survive and thrive in life.
- "I can show you a better way to go"....there will a small part of the child's brain that will say, "What if he's right??"
- Trauma arrests the development of the limbic system at the age of the initial trauma.
- Don't be afraid to set high expectations for traumatised children.
- The brain can promote its own health. The body knows how to heal physically. The brain knows how to recover but will be unable to do so if something is in the way. The brain needs to be taught how to heal to begin with if it is to be able to do so throughout life.
- To succeed in life is to achieve maximum love in love – to give and receive love. We must be skilled in social connection in order to love and be loved.

Five goals of Neurological Reparative Therapy

1. Facilitate perceptual change in the inner working model of self, others, the world. Ie Change the way you view your world/job/partner and you will in turn change your inner working model.
2. Enhance the brain's ability and function (neuro-integration).
3. Traumatized children use the 'lizard' brain but they need to use a human, or 'higher functioning' brain. We need to alter the region of the brain's information processing system.
4. Activate the Orbitofrontal Cortex.
5. You can only change a brain through practice, practice, practice.

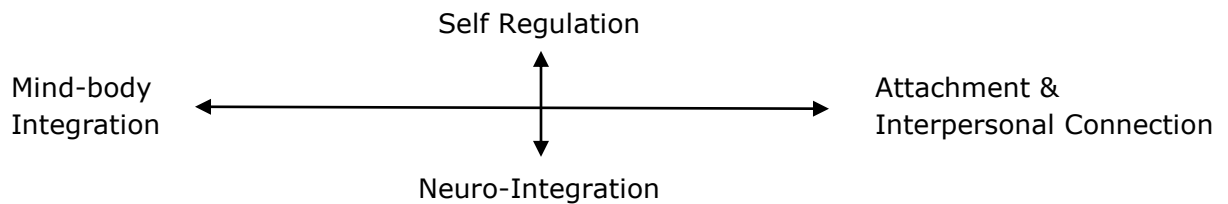
In the following pages we take a closer look at the five goals of Neurological Reparative Therapy.....

I Facilitate Perceptual Change in the Inner Working Model of Self, Others, the World

“The early period of brain growth has a major influence on the development of inner working models & a unified sense of self, leading to development of empathy, morality & a moral guidance system”.

Rebecca Bigler

Trauma Influences



Trauma can produce a two-part deficiency in self-regulation

- The brain must self-regulate what sensory input is prioritised otherwise there is internal chaos. Trauma makes internal brain self-regulation more challenging.
- If the brain does not have internal self-regulation, then the common result is a serious lack of behavioural and emotional self-regulation.
- Self-regulation is essential to good mental health.

Trauma is associated with a loss of neuro-integration due to:

- Disconnection of the brain from the rest of the body's nervous system
- Dissociation
- Absence of self-regulation

Trauma impairs neuro-integration by affecting the:

- Hippocampus – inhibiting explicit memory
- Prefrontal Cortex – confusing higher reasoning centres
- Anterior Cingulate – altering the processing of information from the orbitofrontal cortex
- Corpus Collosum – scrambling communication between the left and right hemispheres
- Cerebellum – reducing inhibition of brain stem arousal impacting self-regulation

Put up photos.

**Show children
they are part
of a family
and they
belong.**

❖ **Children can handle multiple attachments.**

❖ **Traumatized children can recognize and accept multiple 'Mums & Dads'.**

Healing Trauma Involves:

- ✓ **Enhancing neuro-integration**
- ✓ **Facilitating collaborative inter-hemispheric functioning**
- ✓ **Selective activation of representational constructs in the right hemisphere**
- ✓ **Simultaneous activation of logical/linear processing of the left hemisphere**

Trauma treatment must improve neuro-integration by bringing all neuronal activity of the brain into a functional whole.

Trauma treatment can enhance neuro-integration and collaboration of the two hemispheres of the brain by selectively activating processes in one hemisphere while at the same time activating parts of the other hemisphere

? Problems

➤ Causes

✓ Solutions

We cannot hope to effectively fix a problem until we have established, and addressed the cause of the problem. Here are some practical breakdowns and solutions for some very complex issues:

Negative Self Worth

? Not low self esteem, but a negative self worth – “I belong nowhere, I don’t deserve love and do not love myself”.

➤ Caused by the biological primary care giver not giving sustained love, support and caring.

✓ **Solution: A new sense of self, of belonging, of intrinsic value and personal worth must come from outside.**

Personal Isolation

? Having pushed everyone away, the person is alone, unhappy, angry, depressed and sees no improvement in sight.

➤ Caused by the perception that my needs will never be met and other people should be avoided.

✓ **Solution: Provide personal support, develop an expanding support system, build environmental supports (school, neighbourhood, interests, activities).**

Powerlessness

? The experience of no control results in the intense need to control others and the environment.

➤ Caused by the experience that adults cannot be relied upon for safety, so now I must rely on myself.

✓ **Solution: Adults in charge and highlight areas that child can appropriately control and expand on these. Power and influence must be positive.**

Pervasive Negativity

? Things are bad and bound to get worse, moments of success and pleasure are cruel tricks before more failure and pain.

➤ Caused by the experience of the world being a frightening, lonely and painful place.

✓ **Solution: Provide safety, a sense of joyful play, and then an external reality check, add balance of perceptions from outside.**

Egocentrism & Affective Blindness

? My needs are all that matter, I need to get my share first because there will not be enough to go around.

➤ Caused by personal needs not being met and there is no room to care about others.

✓ **Solution: Basic needs (food, water, air, safety, touch and love) must be unconditionally met, empathy and consideration for others must be specifically taught through modeling.**

Attributing negative motivations to others

? Everyone is out to get me. Avoid anyone who wants something from me. If they are mean to you avoid them, if they are nice to you avoid them.

➤ Caused by poor insight, not being able to use feelings as a guide, poor executive functions, bad past experiences.

✓ **Solution: Perceptions change with the right experiences, trauma therapy, reflect that you understand the child’s challenge.**

LAUGH!!
happy people laugh
more often

Children can only change their perceptions if they feel safe.

Safety requires respect.

To earn the respect of children, adults must be:

- ✓ **Safe**
- ✓ **Consistent**
- ✓ **Clear**
- ✓ **Unruffled**
- ✓ **Firm**
- ✓ **Smart**
- ✓ **Sure of themselves**
(Fake it if you have to!!)

Treat Trauma Early
(5 & 6 yrs of age)

Don't wait until the child is in their teens and have them 'lose their mind' during the gap.

Listen to music and describe it – this uses both sides of the brain simultaneously.

Video success and make the child watch it over and over again so as they can see themselves succeeding – this will go to re-building self-worth.

Personal Isolation

Make sure the child **feels** support – don't just be the cop and the judge.

Make sure they feel your support and do what you can to expand their support system.

Powerlessness

Powerlessness is a huge issue for traumatised children. 'There's nothing I can do to change or have impact in my own life'.

The child needs to be allowed to be a child.

The child needs to be allowed to have fun. (refer Jasper Mountain website to play/fun ideas)

The adult must be in control if the child is to be able to have fun and be a child.

Play resets and recharges our batteries.

Give a child a chance to appropriately control some things in their lives.

Pervasive Negativity

All effective treatment begins with safety.

Talk out loud so children do not have to second guess what you're thinking.

Most traumatised children speak in opposites:

"I bet you're excited about Christmas", "No I'm not", actually means, "Yes I am".

"I hate you", means "I am starting to love you but it scares me"

What we say to kids will be very similar to what their abusers have said to them in the past. So, when establishing a relationship with a new young person, state something like:

"I want you to know I'm a safe person. We are going to try and have fun, but I don't want you to trust me until you feel I have earned your trust".

Trauma cuts
off the ability
to use
feelings

You seldom get
everything you
want when helping
a child, so accept
the approximations
as a win

Have high
expectations!

These kids are capable
and will succeed if they
believe they can.

II Enhance Neuro-Integration

The challenge for the brain – Form collaborative neuro-communication and avoid sensory and information overload.

Neuro-integration is the interconnection of neurons from all parts of the brain and nervous system to form a coherent information processing system.

Patterns of neuron firing produce neuro-maps or neuro-net profiles. Information is then arranged into larger perceptual systems producing hierarchies of layers if information clustered together into a functional whole. This functional whole can be called neuro-integration.

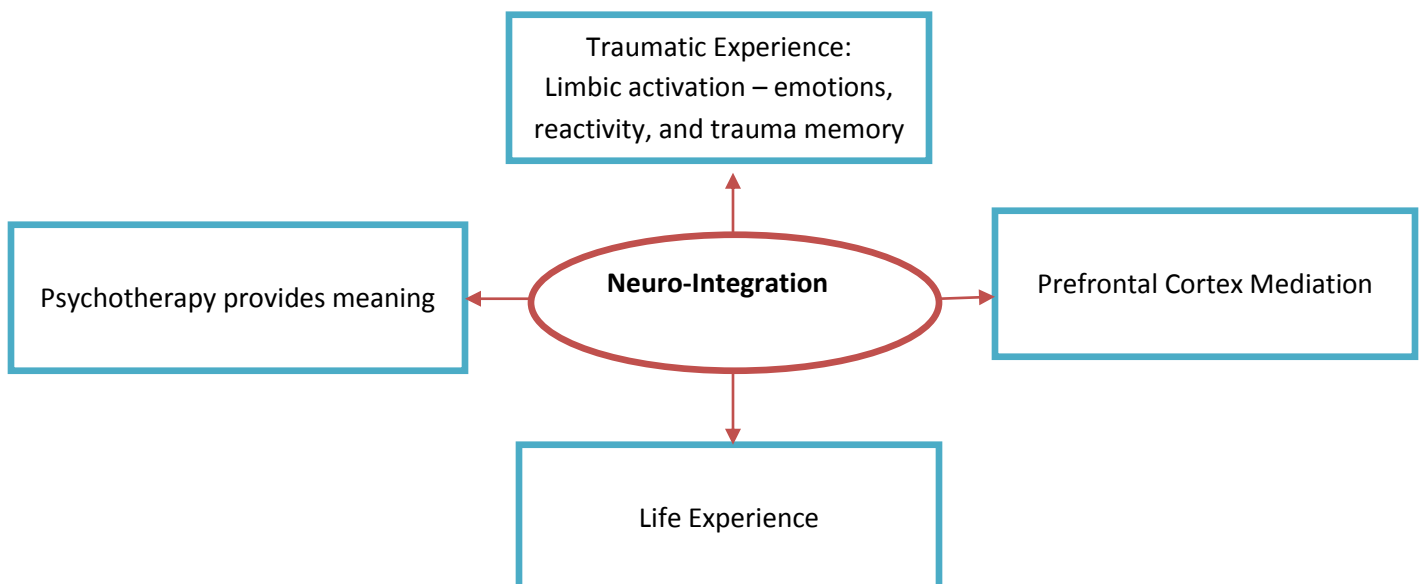
Neuro-integration is required to produce a stable, adaptive, flexible state of well-being.

What do each of these disorders have in common?

- Attention Deficit Hyperactive Disorder
- Post-traumatic Stress Disorder
- Intermittent Explosive Disorder
- Mood Disorders
- Autism Spectrum Disorder

A deficiency of Neuro-integration

Therapeutic Role of Neuro-Integration



Neuro-Integration is also involved in communication between the right and left hemispheres of the brain.

Left Hemisphere

The Left Hemisphere is dominant for:

- ❖ Linear processing
- ❖ Linguistic expression
- ❖ Logical cognition
- ❖ Cause and effect understanding
- ❖ Moral reasoning

Integration of the right and left hemisphere of the brain requires the corpus collosum, which can be either underdeveloped or damaged by traumatic experiences.

Right Hemisphere

The Right Hemisphere is dominant for:

- ❖ Nonverbal communication
- ❖ Perceptual understanding
- ❖ Emotional expression
- ❖ Regulating the nervous system
- ❖ Social connections

The reason the right hemisphere develops first appears related to its function to manage internal meaning from perceptions, intuition, reading environment cues, as well as having responsibility for withdrawal and dissociation in early childhood.

Autobiographical (our sense of our self) coherence requires integration of the linear left hemisphere with the subjective emotional information from the right hemisphere.

Post Traumatic Stress Disorder may cause the autobiographical narrative to be incoherent. Treatment must integrate left and right hemispheres.

The ability of regions of the brain to specialize yet organise into a whole (neuro-integration) produces an innate ability to self heal.

? Problems

➤ Causes

✓ Solutions

Here are some more practical breakdowns and solutions for some very complex issues:

The regions of the brain do not work together

? What I know is not useful, I don't learn from past experience, I make the same mistake repeatedly, I get confused often and immediately react in negative ways.

➤ Caused by poor early attachment to a primary care provider, poor hemispheric communication, brain region atrophy.

✓ **Solution: Treatment that integrates the regions of the brain, work on executive functioning, and right and left brain coordination.**

Little of no Executive Functioning

? I react – I do not plan, organise, assess, think it through, weight my options, learn from the past, plan ahead, delay gratification or care about anything other than getting my way right now.

➤ Caused by trauma and most brain functioning going into surviving and not developing higher order reasoning.

✓ **Solution: Executive functions must initially come from outside, trauma treatment, the experience of safety while you show the brain a better way to get needs met.**

The brain cannot heal its own emotional wounds

? Every emotional meltdown further imprints and strengthens negative coping leaving the child with the belief that life is unfair and will never get better.

➤ Caused by engrained and repeated faulty perceptions, reactive emotions and fight or flight behaviours due to pervasive perceived threats.

✓ **Solution: Without internal healing, it must come from outside, teach relaxation, expressing honest emotions, and have the child experience a positive support system – attachment.**

Inability to use the cognitive skills the individual possesses

? Problems include confusion, misperceptions, feeling chronically alone, lost and unsafe with cognitive skills used primarily to react to threats that don't exist.

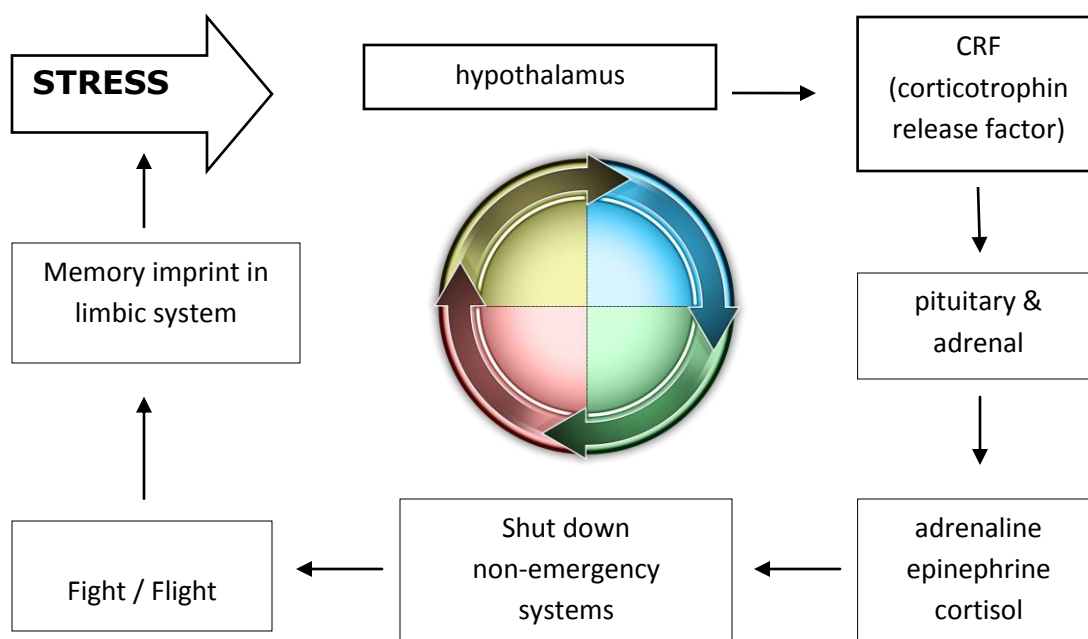
➤ Caused by trauma and most brain functioning going into surviving and not developing higher order reasoning.

✓ **Solution: The brain's regions must be able to communicate, assist by helping the right and left brain work together, override limbic reactivity, and teach executive functions.**

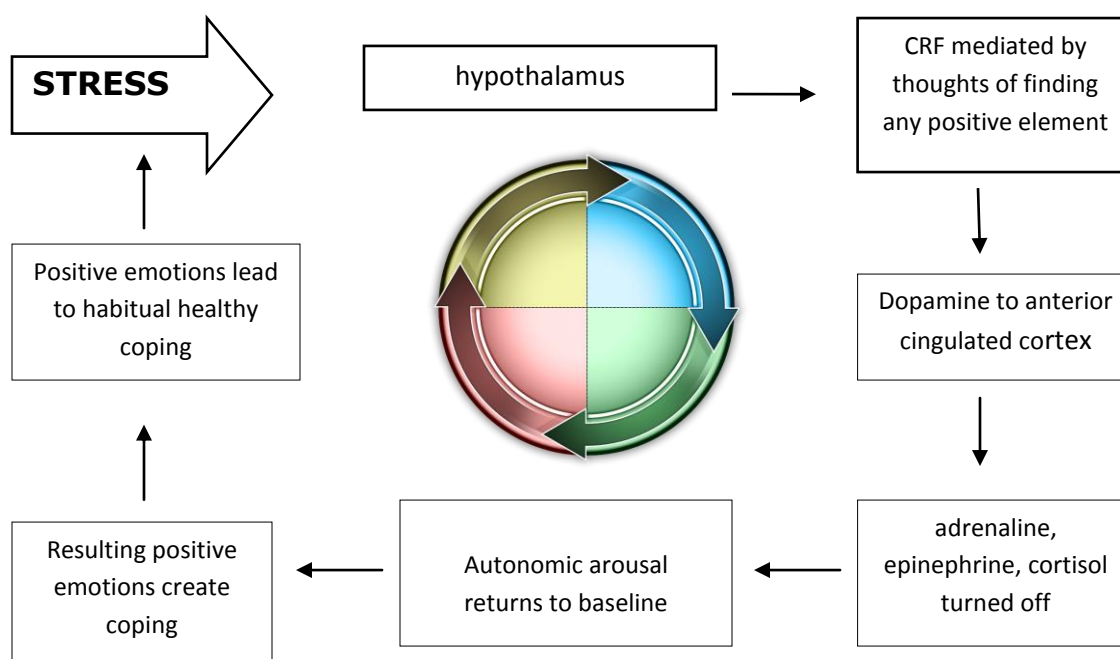
Treatment should include:

- ✓ Stress and anxiety reduction to free the mind from singular focus;
- ✓ Assist the individual in mental flexibility;
- ✓ Enhance the innate ability for the mind to self-heal;
- ✓ Assist the individual to achieve neuro-integration;

Stress Response Cycle



Resiliency Response Cycle



III. Altering the Brain's Information Processing System

Poor attachment and disorganisation of mental processes produce:

- **Smaller brain size**
- **Impaired functioning of the Corpus Collosum**
- **Cerebellar Vermis unable to soothe the limbic system or brain stem**

Treatment that improves attachment and mental organisation improves cognitive and emotional flexibility to adapt to new situations.

Attachment aids in integration of emotion and experience. Treatment involves the external application of meaning, leading to self-regulation and internal development of integration.

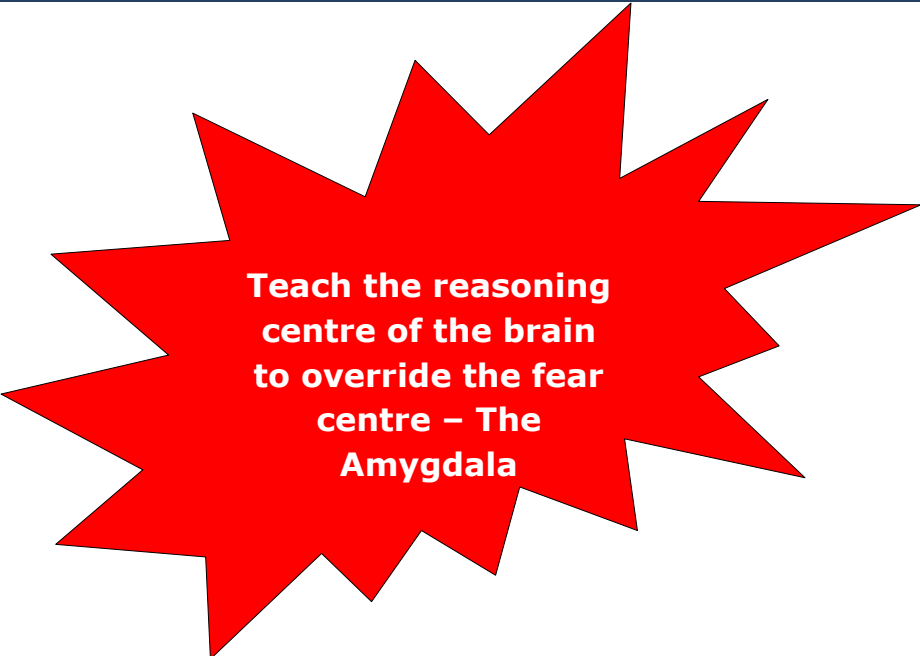
One function of the therapist: Become an attachment figure enabling co-regulation of internal states, thus enhancing self-regulation of emotional states.

Cognitive Reprocessing

Relax – stop what you are doing and lower metabolism and stress

Rethink – with help use higher order reasoning to ask what is happening

Respond – choose what you want to do rather than react to what is happening



**Teach the reasoning
centre of the brain
to override the fear
centre – The
Amygdala**

Here are some more practical breakdowns and solutions for some very complex issues:

Getting Stuck

? Trauma produces a tendency to get stuck and organise life around bad experiences producing depression, hyper-vigilance, fear, hopelessness.

➤ Caused by the child inner working model of ongoing trauma, lack of safety and poor support.

✓ Solution: Cognitive restructuring with more thoughtful consideration, thinking about past Vs. present, putting the past in perspective, write the final chapter of trauma.

Loss of Self-Regulation

? Lack of self control results in poor performance and failure in multiple areas.

➤ Caused by poor attachment resulting in the right frontal cortex not attuning to the stress reduction of the mother.

✓ Solution: The person must learn internal control using self-mastery, and having small then larger successes.

Emotional / Limbic Reactivity

? Emotional disturbance including reactivity, anger, negativity and a fear response in the amygdale or fear centre in the brain.

➤ Caused by the limbic region of the brain processing all incoming stimuli due to past limbic activation through trauma.

✓ Solution: Teach the child relaxation, provide comfort and soothing, enhance interpersonal attachment, teach the orbitofrontal cortex to override the limbic brain.

Primitive regions of the brain are in charge

? Problems include anger, violence, egocentricity, fight or flight, lack of caring or getting close to others.

➤ Caused by the brain's primitive centres taking the lead such as the brain stem, dienchelon and limbic system.

✓ Solution: Teach the brain to process information in more complex centres of higher order reasoning. This begins from the outside in. Any interventions requiring thought helps.

IV Activation of the Orbitofrontal Cortex

The Orbitofrontal Cortex is positioned in the middle of the brain, which allows it to physically connect the regions of the brain and therefore play a major role in neuro-integration.

The Orbitofrontal Cortex facilitates:

- ❖ Flexible mental states
- ❖ Tolerating a wide range of emotions
- ❖ Accessing autobiographical memory
- ❖ Enabling complex levels of interpersonal attachment and connection with others

Functions of the Orbitofrontal Cortex:

- ❖ Becomes more developed as attachments become developed
- ❖ Plays a major role in self-awareness
- ❖ Enables social understanding
- ❖ Determines the meaning of events and influences the autonomic nervous system
- ❖ Key region of the brain for mental coherence and neuro-integration

Trauma Therapy is working at deep levels of memory, emotions, and physiology to help the individual form a coherent inner and interpersonal world.

These skills must be specifically taught:

- ❖ Delaying gratification
- ❖ Setting goals
- ❖ Correctly perceiving the intentions of others
- ❖ Moral and ethical reasoning
- ❖ Empathy

Here are some more practical breakdowns and solutions for some very complex issues:

Unable to Use Feelings as Guides

? Emotions are ineffective as helping make wise decisions and informing cognitions resulting in reactivity, being overwhelmed, making poor decisions.

➤ Caused by limbic over-activation resulting in feelings being the sole response rather than informing thoughts and decisions.

✓ **Solution: Must be taught to perceive and understand emotions, accurately reflect on feeling states and then think about feelings.**

No one is in the driver's seat

? Smart children do not understand their situation, acting against one's own best interests, aimless acts not related to what the child really wants.

➤ Caused by confusion within the brain and no central clearinghouse forming a coherent picture or direction.

✓ **Solution: Teach the child how to see the big picture. Enhance all activities that promote higher order reasoning. Help the child experience self management.**

Inability to Play and Have Fun

? Inability to enjoy oneself, others, activities and life resulting in chronic loss of interest and depressive mood.

➤ Caused by excessive focus on survival and having to rely on self to identify threats and react to them.

✓ **Solution: Having fun must be taught, modeled, and learned step-by-step. The ability to play only comes after experiencing safety.**

Lack Personal Confidence

? No belief in one's abilities and possibilities to achieve desirable pursuits resulting in lack of effort, failure and negative self-fulfilling prophesy.

➤ Caused by little or no experience of success in staying safe, impacting the environment positively and dread of the future.

✓ **Solution: Help the person experience small successes through skill building and provide external feedback.**



Catch kids doing good things.

Have a graphic display of achievement - use a chart, with stars, etc.

V Neuro-template Development through Repetitive Practice

Based upon the primary goal of survival, the brain adapts to the world it finds itself in by developing neuropathways that may be healthy or unhealthy.

Habitual thinking, emotions and behaviours are due to neuropathways in the brain. Unless the pathways change, the habitual functioning actually gets worse over time.

Neuropathways that are either negative or positive are strengthened through repetition.

Use dependent development – The brain organises, grows and develops around use, meaning the regions that activate most often.

? Problems

➤ Causes

✓ Solutions

Here are some more practical breakdowns and solutions for some very complex issues:

Repeating Chronic Behaviour Problems

? Problems – lying, stealing, tantrums, manipulating, sexual acting out, being rude.

➤ Caused by habitual activation of neuro-pathways related to negative coping that react automatically.

✓ **Solution: Experience positive ways to get attention and then repeat them, provide a reality check. Catch the good things before they resort to bad things to get your attention.**

Lack of Trust in Others

? Inability to be vulnerable and open oneself to experience comfort, support and intimacy.

➤ Caused by the brain refusing to be vulnerable due to experience.

✓ **Solution: Provide consistent support, acceptance, belonging and unconditional positive regard.**

Positive Improvements Must Be Repeated

? Problem – the child doesn't seem to get on that current behaviours are not working.

➤ Caused by the brain processing information the quickest way possible.

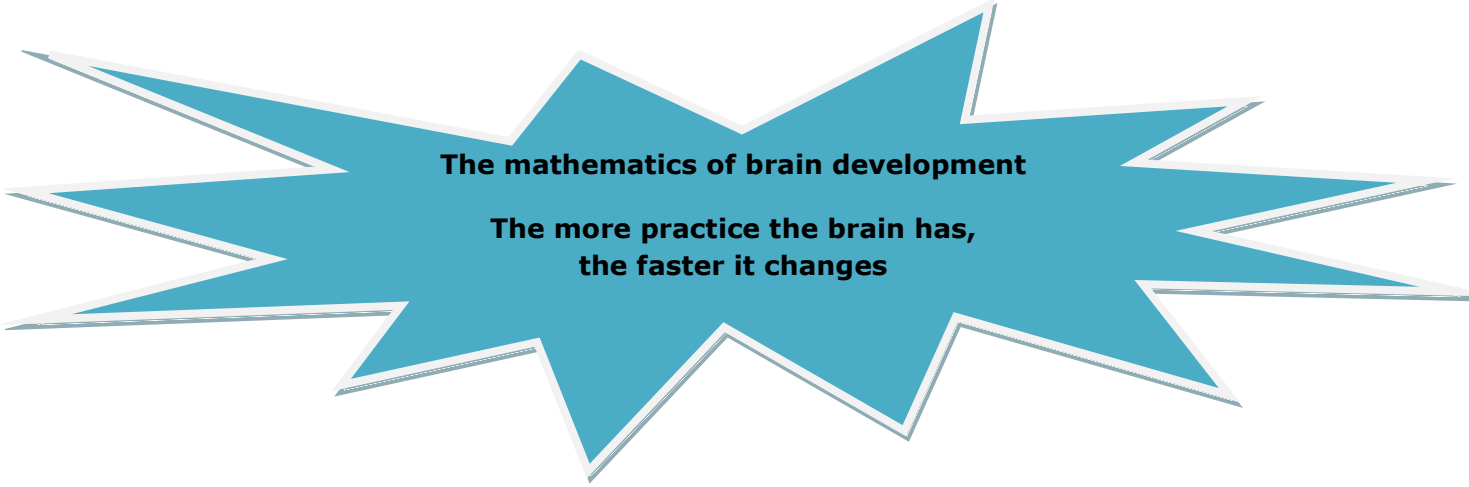
✓ **Solution: the brain wants to succeed, give it a taste of success and then repeat as often as possible.**

Negative coping behaviours must be replaced by positive coping

? Problem behaviours related to coping include hostility, threats and violence when the child does not get his or her way, also manipulation, sexual acting out, deceit and distancing.

➤ Caused by traumatic experience activating reactive brain centres designed to ward off threats and maintain survival.

✓ **Solution: Teach and model positive coping such as asking for help, accepting support, sharing emotions, developing a positive plan, being proactive and optimistic.**



The mathematics of brain development

**The more practice the brain has,
the faster it changes**

Five Goals of Neurological Reparative Therapy

- 1. Facilitate perceptual changes of self, others and the child's inner working model**
- 2. Enhance neuro-integration**
- 3. Alter the region of the brain's processing information system**
- 4. Facilitate Orbitofrontal Cortex activation**
- 5. Neuro-template development through repetitive practice**

Five Steps of Neurological Reparative Therapy

- 1. Assess the extent and causes of neurological impairment**
- 2. Identify specific cognitive, emotional and behavioural problematic symptoms**
- 3. Implement interventions addressing the identified problematic emotional and behavioural symptoms**
- 4. De-condition the child's stress response cycle through multiple forms of relaxation and allostatic (learning to reduce stress levels back to baseline) training**
- 5. Environmental enhancements promoting the building blocks of brain development**

The brain is always looking for methods to succeed (survive and perhaps, thrive). Negative methods will continue until positive methods are experienced and repeated.

The challenge for the helper is to have the individual's brain get a taste of positive success, and then to have an environment that allows the individual to change and not be locked in to the negative past.

The highest form of personal satisfaction is to help a troubled child learn how to live a successful and meaningful life.