

Compassionate Accountability

How Trauma Impacts Accountability and
What now...





Objectives

01

Explain how Trauma
Changes Brain
Development

02

Recognize how
shame blacks
accountability

+

03

Recognize Survival
Tactics and learn
how to get to
accountability

04

Define and
Implement
Compassionate
Accountability



Difficult Adolescent

- Defiant
- Unwilling to change
- Drug Use
- Suicidal/Self-Harm
- Committing Crimes
- Exploited
- Skipping School
- Non-Compliant
- Aggressive
- Destructive



Some Statistics

- Information taken from the Census of Juveniles in Residential Placement
- The Census Bureau identifies juvenile residential facilities for court-involved offenders

Most serious offense	Total
2019	36,479
Person: Homicide, Sexual Assault, Robbery, Aggravated assault, Simple Assault	15,823
Property: Burglary, Theft, Auto Theft, Arson	7,503
Drug	1,589
Public order: Weapons, Alcohol	5,077
Status offense: Running away, Truancy, Incurability, Curfew Violation, Underage Drinking	1,424
Sickmund M. Sladky T.J. Puzzanchera C. and Kang W. (2021) Easy Access to the Census of Juveniles in Residential Placement." Online. Available: https://www.ojdp.gov/ojstatbb/ezacjrp/	



Accountability

Traditional View of Accountability

- Instill moral values and social justice
- Develop a sense of right and wrong
- Build self-control and responsibility
- Set Limits
- Improve Inappropriate Behaviors



Trauma

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4,300,000

Children referred to Child Protection Agencies each Year



656,000

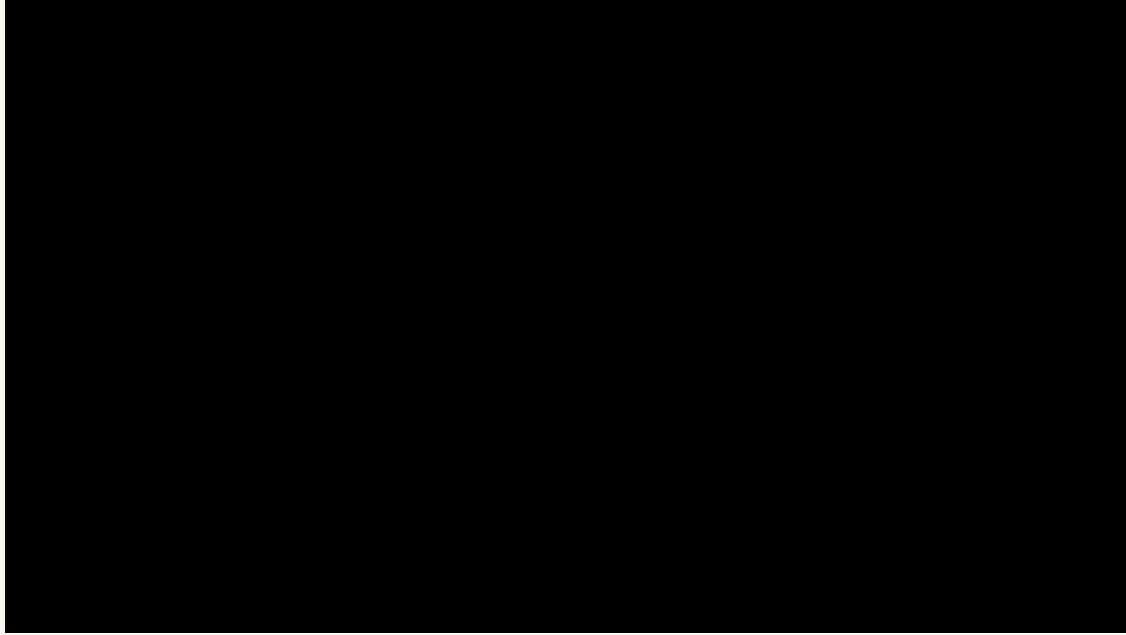
Victims of Child Maltreatment in 2019



1,840

Children who died from abuse or neglect in 2019

Complex Trauma





Whoa!

Traditional view is often shame based and discipline-focused.
Desired outcome is to stop the behavior from happening again.

Heirarchal/Authoritarian: Adult is in Control, Child is Powerless

01

Brain

Development



The Anatomy Of Your Brain

FRONTAL LOBE

Helps you reason, plan, pay attention, and move specific body parts.

HYPOTHALAMUS

In charge of your body temp, hunger, and thirst.

PARIETAL LOBE

Lets you perceive things like touch, taste, and pain.

OCCIPITAL LOBE

Makes sense of what you see.

PITUITARY GLAND

Controls the release of most hormones.

TEMPORAL LOBE

Helps you make sense of what you hear.

CEREBELLUM

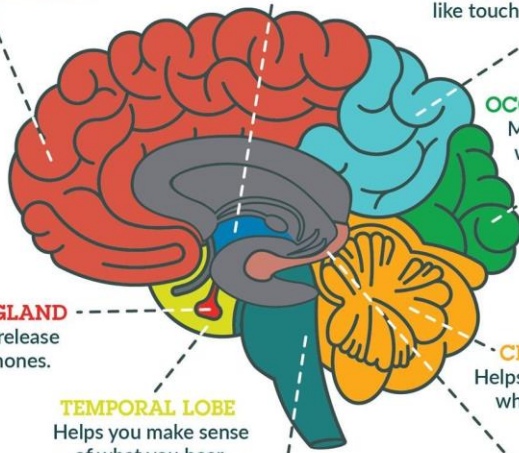
Helps you coordinate when you move.

BRAINSTEM

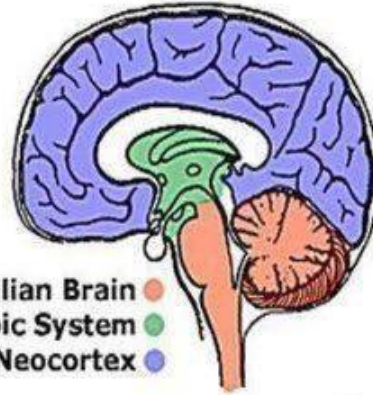
Controls your breathing, heartbeat, facial expressions, and more.

HIPPOCAMPUS

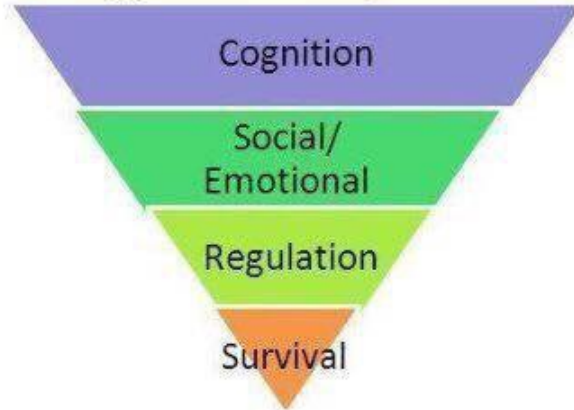
Helps you make long-term memories.



Trauma & Brain Development



Typical Development



Developmental Trauma



The Hand Model of the Brain

What happens when we “flip our lid”

When our brain is working efficiently both the upper and mid brain are communicating effectively. Information comes in and is processed logically. Sometimes too much information is coming in for the Upper brain to process and it disconnects. We “flip our lid” and can no longer access the functions provided by the upper brain

Cerebral cortex



Your brain working in harmony. All parts are connected and talking. The upper part of the brain can be accessed for logic, socialising and reasoning. Our upper brain is hugging our mid brain, making it feel safe

Brain Stem
Reptilian brain
Basic functions
Hind brain

Base of Skull
Spinal cord

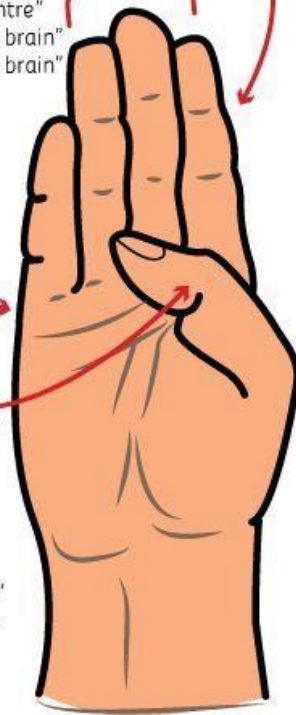
Upper and lower parts of the brain are no longer connected and talking. Logic no longer influence emotions. You've “flipped your lid”

The Cerebellum or Limbic Regions

Hippo campus
Amygdala
Mid brain
“Big feelings”
“Cave man” brain
“Downstairs brain”
Information dump from the Central Nervous System

The Cerebrum or Neo Cortex

Cerebral cortex
Prefrontal cortex
Upper brain
“Logic centre”
“Thinking brain”
“Upstairs brain”



02

Shame

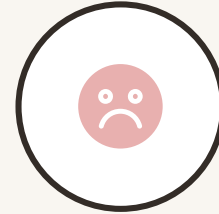


Shame Definitions



Definition 1

A physiological state where there is an inherent sense of being flawed, fundamentally bad



Definition 2

"I define shame as the intensely painful feeling or experience of believing that we are flawed and therefore unworthy of love and belonging—something we've experienced, done, or failed to do makes us unworthy of connection."
--Brene Brown



Where Does Shame Come From

Interpersonal
Trauma

1

Feeling
Powerless

2

High
Expectations

3

Self Criticism

4



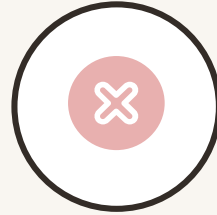


Impact of Shame



Collapse

Physically and Mentally



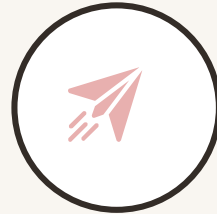
Protection

Brain does anything to protect from connecting with the experience of shame



Connection

Fear of disconnection.



Avoid and Escape

Engage in any behavior to avoid or escape feeling shame—including suicide



Shame Defensive Tactics

The Compass of Shame

Adapted from D.L. Nathanson, Shame and Pride, 1992

Withdrawal:

- isolating oneself
- running and hiding

Attack Other:

- 'turning the tables'
- blaming the victim
- lashing out verbally or physically



Attack Self:

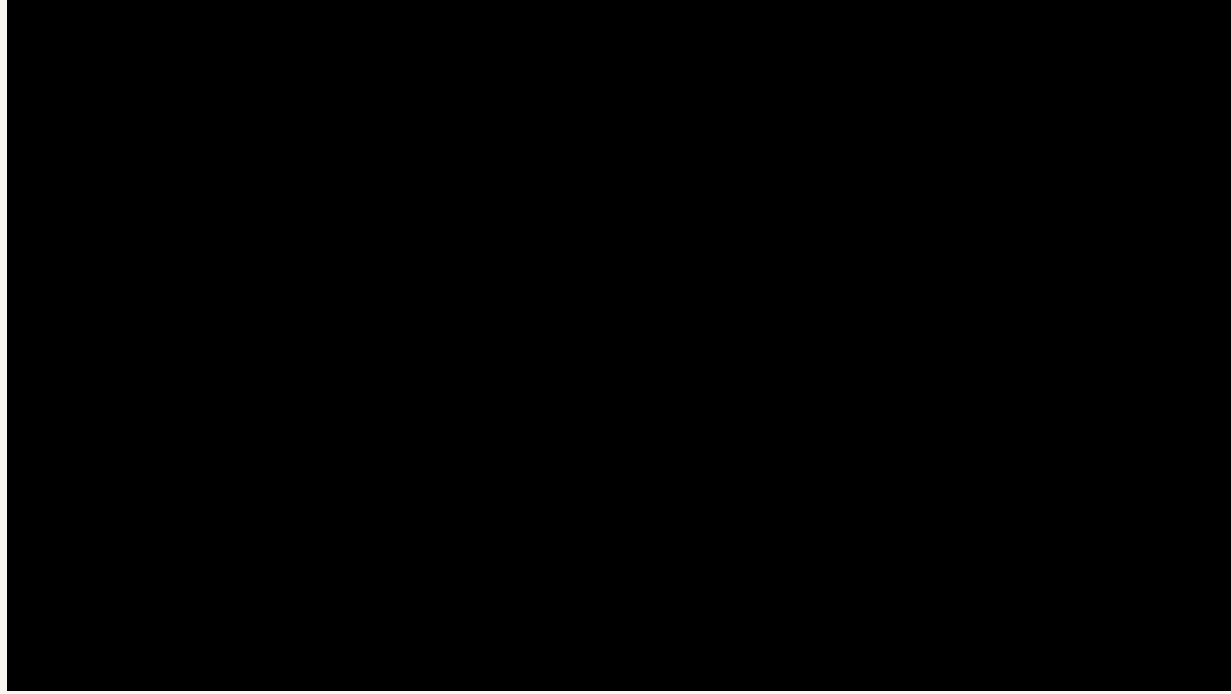
- self put-down
- masochism

Avoidance:

- denial
- abusing drugs and alcohol
- distraction through thrill seeking



Brene Brown On Shame



How Shame Blocks Accountability

Shame corrodes the part of us that believes we can be better!

Overstimulated

Thinking brain is offline and child is unable to calm down without assistance

Perceived unreasonable demand

Consequences are seen as blocking freedom

Freedom Restricted

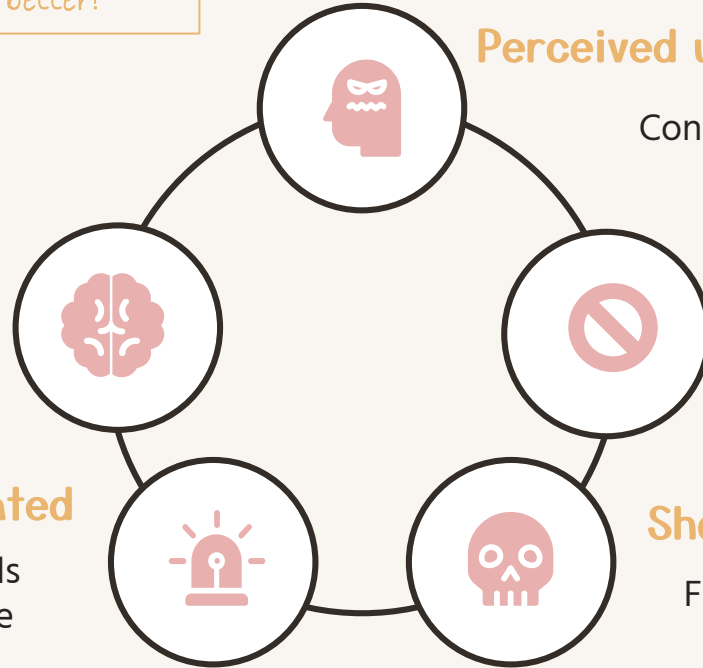
Restriction of freedom is a threat to safety

Stress Response Activated

Perceived threat sends into fight-flight-freeze

Shame Triggered

Feel flawed and incapable



Shame and Accountability



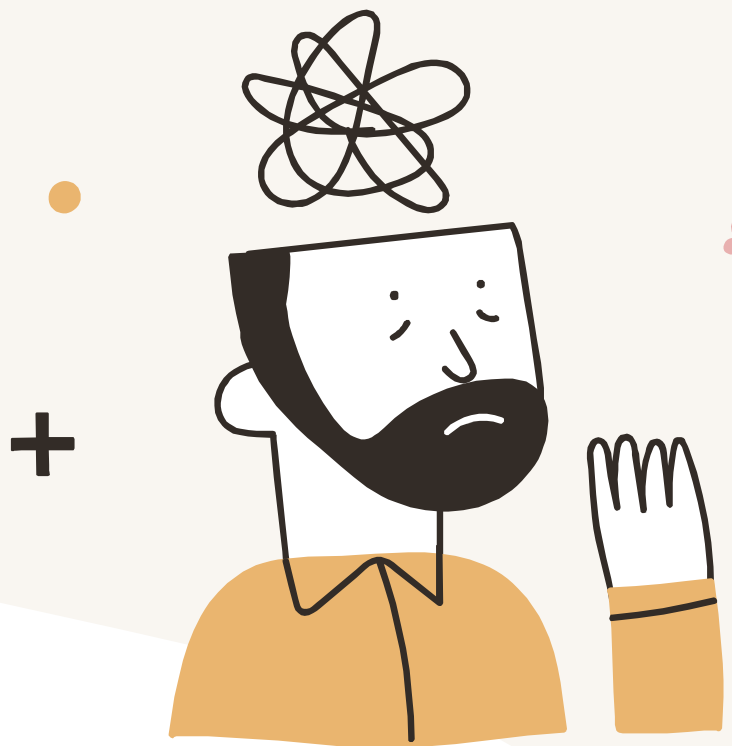
Leads to feel:

Powerless
Trapped
Isolated



Common Responses:

Attempt to gain power over others
Being Aggressive
Withdrawing
Seeking attention and belonging
Seeking Approval



03 Compassionate Accountability



Compassion Defined

A strong feeling of sympathy and sadness for the suffering or bad luck of others and a wish to help them.

Components of Compassion


Recognize Suffering

Understand Universality of suffering in the human experiences

feeling moved by the person suffering and emotionally connecting with their distress

tolerating uncomfortable feelings aroused (e.g., fear, distress) so that we remain open to and accepting of the person suffering

acting or being motivated to act to alleviate suffering



“Accountability is
compassionate when you set
standards for acceptable
behavior and walk with people
after they make mistakes”

—Carly Hauck

Goals of Compassionate Accountability



Connection

Builds connections, then uses the connection to teach personal responsibility



Validation

validates perspective, feelings, and experiences



Non-Judgemental

Keeps in Mind: past experiences, what is driving the behavior, and their perceived sense of safety



Empowers

A way to teach emotional regulation and improving distress tolerance



3 steps to accountability



Calm



Connect



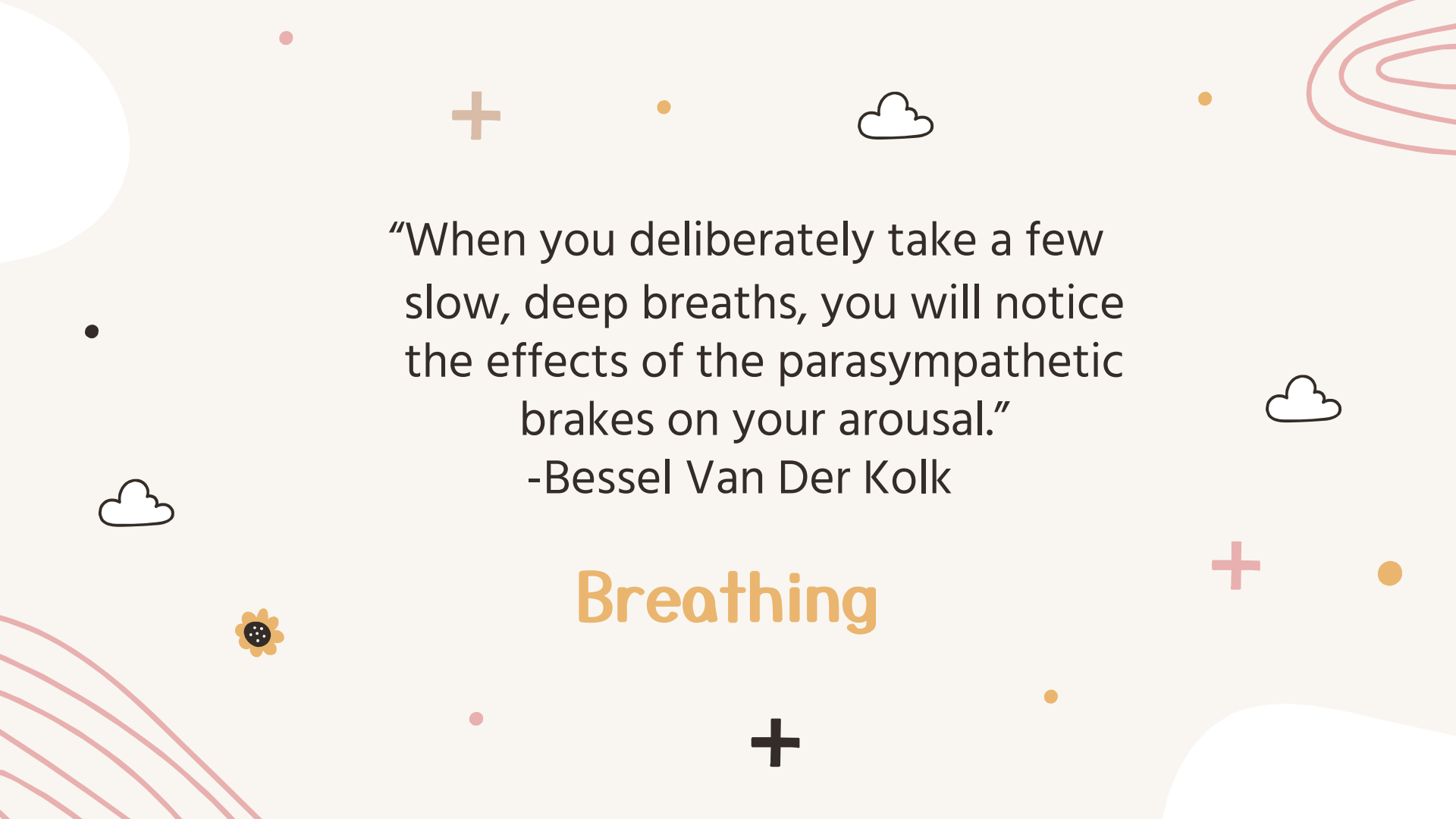
Correct





Calm

- Get thinking brain back online
- Calm emotional trauma triggers
- Ground in reality
- Help them Self Soothe



“When you deliberately take a few slow, deep breaths, you will notice the effects of the parasympathetic brakes on your arousal.”

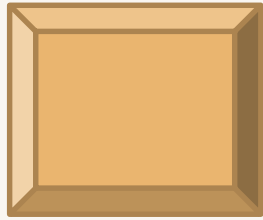
-Bessel Van Der Kolk

Breathing



Breathing

Square Breathing



Deep Breathing



5 Finger Breathing



Balloon Breathing



Movement

“When one of your children has lost touch with his upstairs brain, a powerful way to help him regain balance is to have him move his body.”

Dr. Dan Siegel





Rhythm

Dancing

Listening to Music

Yoga

Rocking

Swinging

"The brain doesn't just keep one beat; it has many drums." Dr. Bruce Perry



“Being able to be in the moment and appreciate the positive sensory experiences that we have is not simply enjoyable; it also elicits positive emotions that feed into overall well-being.”

Dr. Tina Rae

Grounding

Reduce Anxiety Grounding Exercise



Connect



Healing Happens in the Context of Relationships:

1. Create Safety and Security
2. Instill Hope

Healthy Relationship Continuum



Under-involved

Interactions: Rigid, punitive, non-caring
Approach: Cold, disengaged, disconnected
Focus: Rules and Consequences



Helpful Zone


Interactions: Supportive
Approach: Warm
Focus: Connecting



Over-involved

Interactions: Lack of Boundaries, keeping secrets, no limit setting
Approach: Friend, Passive, lack of confidence
Focus: Rescuing and Saving





“The way in which we choose to *be with* others,
meaningful interpretation of what is occurring,
and *intentionality* in what we do can become
our central ways of living out relational care on a
daily basis.” James Freeman

(What keeps us from Relational Child and Youth Care)

Being. Interpreting. Doing.

Using the Relationship to Heal



Curiosity

View it from a “what happened?” lens



Slow Down

Do not get stuck in blaming. Look for shame messages



Openness

Be open to discovering what is behind the behaviors



Intentionality

Be intentional about nurturing human connection



Self-Awareness

What is going on inside of us that might keep us from truly connecting?



Self-Care

Know when to tap out and let someone else help

What Happened? What is the Problem?

- Use a caring tone.

- Get on their level

- Begin with curiosity: Inquire about their well-being

- Help them feel understood and validated

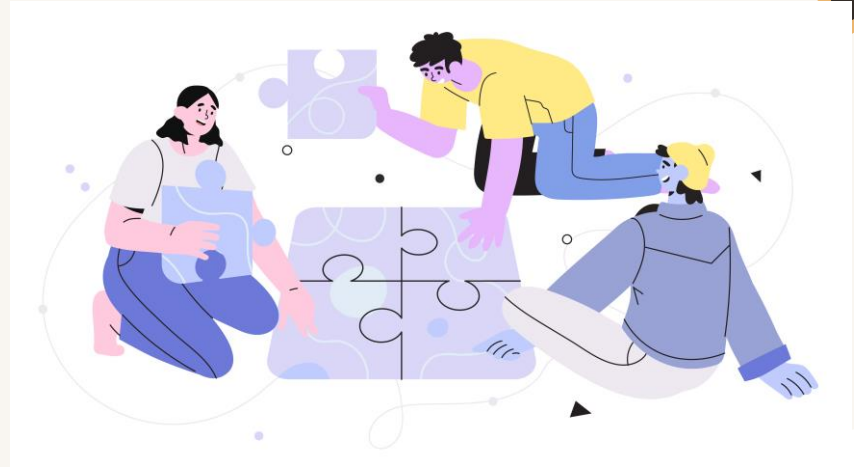
- Use the connection to open them up to the underlying issue

- Focus becomes collaboration and problem solving



Collaborate

- Once calm and connected the thinking brain is back online
- Youth is ready to problem solve
- Able to learn new things
- When calming and connecting are the focus, accountability naturally becomes easier



Collaborating



Consequences

When accountability and consequences can be addressed



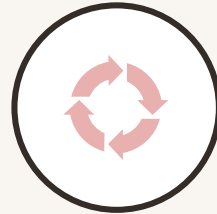
Compliance

Request for compliance is possible



Reaffirm

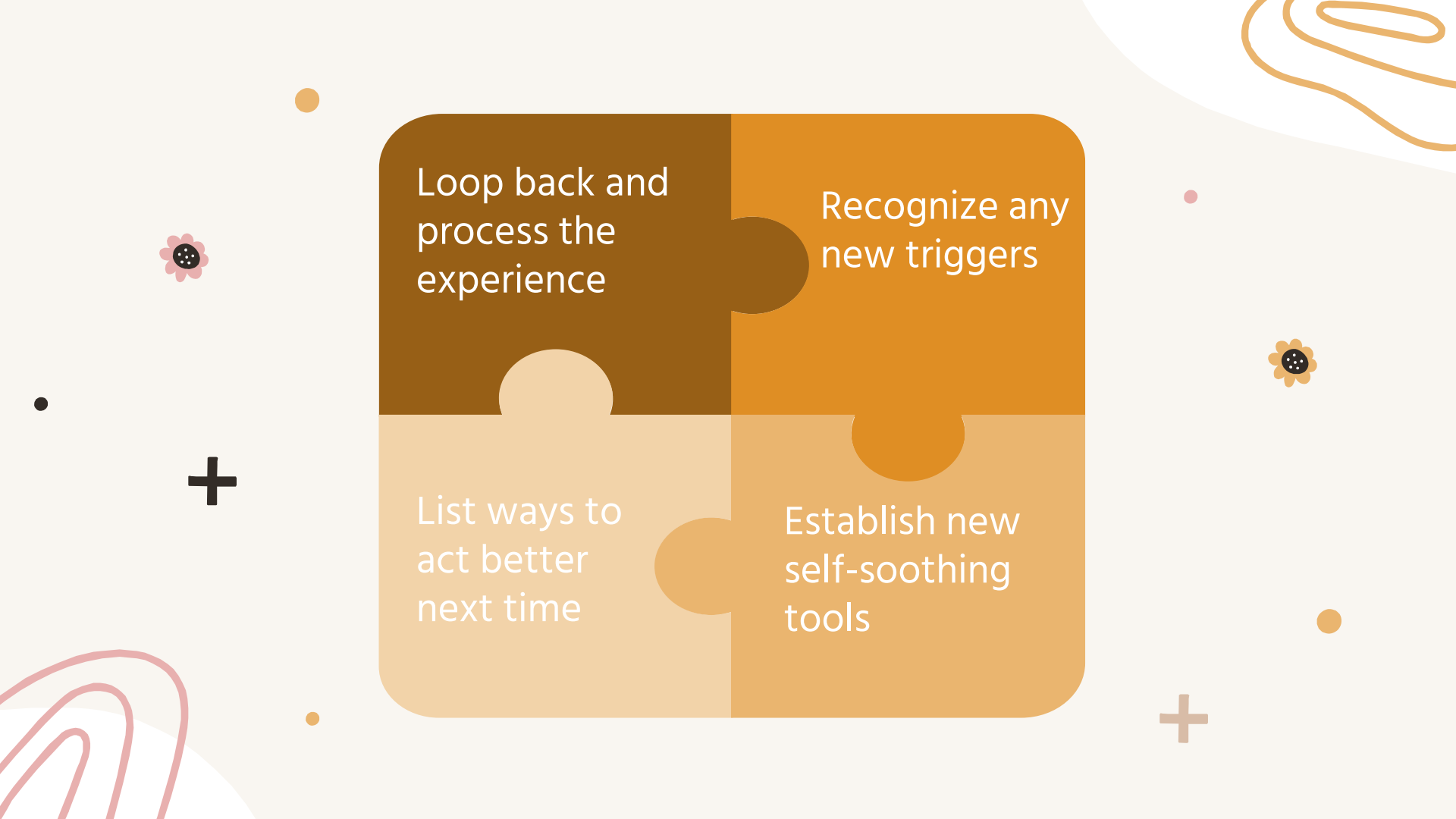
Remind consistently of the relationship. Reassure as much as needed



Repeat

Repeat the Process as Necessary





Loop back and
process the
experience

Recognize any
new triggers

List ways to
act better
next time

Establish new
self-soothing
tools

The background is a light cream color with several decorative elements: a black dot in the upper left, a pink flower with a black center, a white cloud outline, a yellow flower with a black center, a large pink swirl in the top right, a black plus sign on the left, a yellow dot, a white cloud outline at the bottom, a pink dot, a yellow plus sign, a yellow dot, and a large orange swirl in the bottom left.

**Bringing it all
together**

State Dependent Brain Functioning

Collaborate

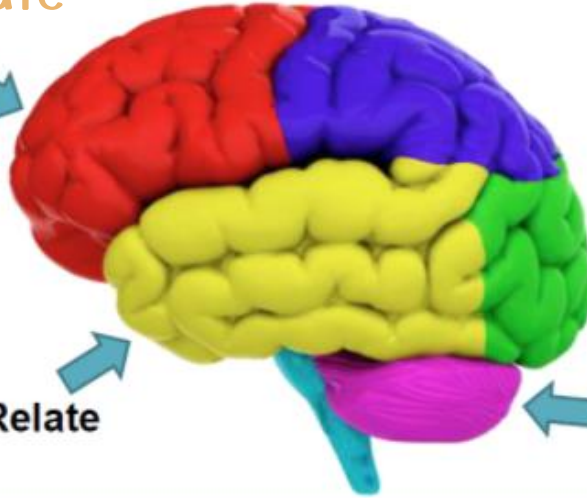
Reason

Connect

Relate

Calm

Regulate



Bruce Perry. "What Happened to You?" 2021.



Shame Resiliency Theory



- Recognizing the personal vulnerability that led to the feelings of shame
- Recognizing the external factors that led to the feelings of shame
- Connecting with others to receive and offer empathy
- Discussing and deconstructing the feelings of shame themselves

Reframing Behaviors

From Labels:

Defiant

Unwilling to change

Non-Compliant

Attention Seeking

Disrespectful

Non-Caring

Manipulative

Disruptive

Lazy

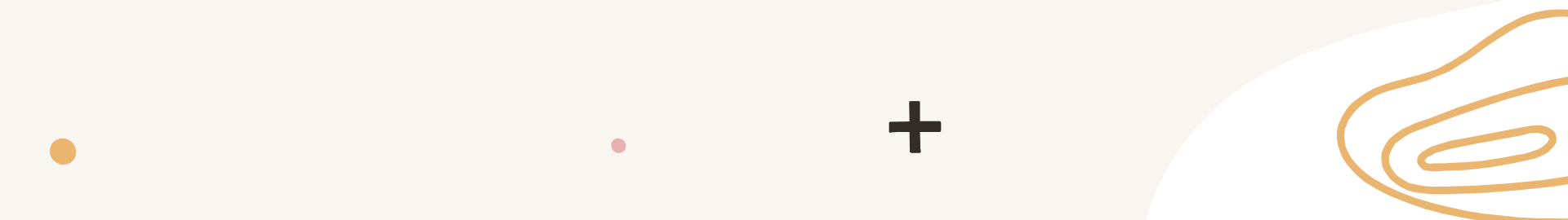
Doing it intentionally

Understanding Behavior Is:

- Neurological Based
- How they learned to survive/adapt
- Reactive/Impulsive
- Lack of social skills
- Limited ability to self-soothe
- Trying to meet a need



Reframing Accountability

- Increasing Self-Awareness
 - Learning new skills
 - Commitment to understand the why behind behaviors
 - Improving Empathy
 - Making necessary changes to avoid future issues
 - Acknowledging it was about the behavior not, who they are as a person
- 

The background is a light cream color with various decorative elements: a large white circle with red wavy lines in the top-left corner; a large white circle with orange wavy lines in the bottom-right corner; several small orange and pink dots scattered throughout; and two plus signs, one orange and one black. The text 'Take Home Messages' is centered in a large, bold, black sans-serif font.

Take Home Messages

References

- - An Empirical Examination of the Factor Structure of Compassion. Jenny Gu. Kate Cavanagh. Ruth Baer. Clara Strauss. Published online 2017 Feb 17
 - Brene Brown Research. www.brenebrown.com
 - Rocco A. Cimmarusti PhD LCSW LMFT & Soe L. Gamero BS (2009) Compassionate Accountability in Residential Care: A Trauma Informed Model, Residential Treatment for Children & Youth, 26:3, 181-193, DOI: 10.1080/08865710903130244
 - Shame and Pride. D.L. Nathanson. 1992
 - Trauma Informed Care: The Restorative Approach. Patricia D. Wilcox. 2012

Thanks!

Do you have any questions?

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