



CTRI
CRISIS & TRAUMA
RESOURCE INSTITUTE

DE-ESCALATING CHILDREN AND YOUTH IN CRISIS

Skills for Emotional Regulation

**We envision a world where
everyone is trauma-informed.**



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DE-ESCALATING CHILDREN AND YOUTH IN CRISIS

Skills for Emotional Regulation

If you are in a support role, it is crucial to know how to help children and youth return to calm during a crisis. When stressed, everyone's nervous system is hardwired to react with protective patterns such as fight, flight, or freeze. Young people are especially vulnerable because their nervous systems are still developing, and they lack the self-regulation skills needed to calm down. An adult who can help them co-regulate can often de-escalate the situation.

In this workshop, you will learn a trauma-informed de-escalation framework, built on neurobiology and attachment. The role that emotions, trauma, and adverse childhood experiences play in escalating a crisis will also be explored, and you'll gain fun and creative skills for engaging children, adolescents, and the adults who support them, including breathwork, movement, music, art, mindfulness, and play.

De-escalating Children and Youth in Crisis – Skills for Emotional Regulation

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De-escalating Children and Youth in Crisis

ESCALATION

When children and youth reach a crisis point, as helpers, we want to be able to de-escalate the situation and eliminate the threat associated with the dysregulated nervous system. Yet often an escalating child or youth can trigger us into our own state of escalation.

Definition

- To increase the volume, amount, or scope; to become more intense or serious
- To become worse; make more severe

Because of how exquisitely the human nervous system is designed for connection, our mirror neurons allow us to take on the emotional state of others. Emotions are contagious and it is easy to “catch” anger and fear when others are dysregulated. When we react from our own escalated state, it is like we are pouring gasoline on a fire.

DE-ESCALATION

Just as anger and fear are contagious, so are love, joy, and feelings of calm. De-escalating a child or youth in crisis involves the ability to use one's own nervous system to convey safety, empathy, and understanding.

Definition

- Reduce the intensity of a conflict
- Stabilize or slow a potentially violent situation

Consider some of the more common strategies for de-escalating children and youth in crisis. How might they help regulate others? How might they act like gasoline?

What Is Regulation?

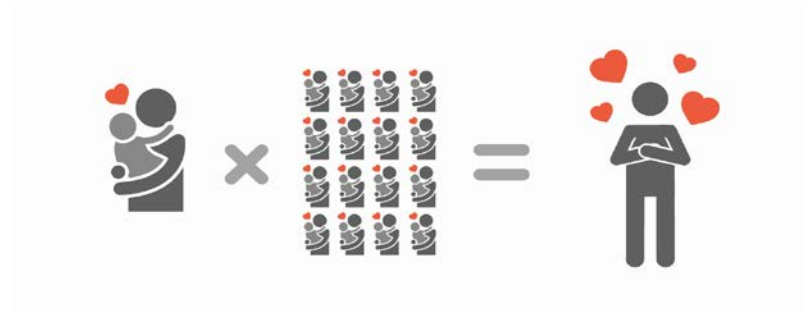
Regulation is the ability to respond appropriately to our environment and effectively manage our sensory, physical, and emotional experiences. This is not an easy task for anyone, including adults, and it is especially difficult for children and youth.

CO-REGULATION

Infants are born completely helpless and are dependent on the caregivers around them for all of life's necessities. With little ability to regulate themselves, babies are reliant on their caregivers for emotional regulation. Over time, co-regulated experiences between infant and caregiver become internalized as the infant learns to comfort themselves when an attuned caregiver is not present.

The Recipe for Self-Regulation

Children develop successful strategies for self-regulation through repeated moments of co-regulation with attuned and empathetic adults.



01 | In what ways are children more vulnerable than adults?

02 | What factors might affect a child's ability to regulate?

Emotional Dysregulation

DYSREGULATION

Dysregulation occurs when our emotional and physiological state does not match the needs of our environment. When dysregulated, we are not in control of our nervous system, and we are stressed beyond our capacity to cope. Our reaction is unwarranted given the situation and we move into a hyper- or hypo-aroused state.

STRESS

Stress refers to all the stimuli we encounter, moment to moment, that require our attention. Our bodies are able to handle stress, and some stress even has benefits for the nervous system. We are seeking to maintain a balance between healthy stress and toxic stress:

- **Healthy stress:** A small amount of stress is actually good for our nervous system. Stress motivates us to do better and rise to the occasion. Healthy stress happens when we feel passionate and enthusiastic. It's the heart-quickenning, pulse-racing feeling of true engagement.
- **Toxic stress:** Stress becomes toxic when it is ongoing and unrelenting, like a rollercoaster ride that goes on for too long. When the nervous system is constantly on "high alert," there isn't enough time to recuperate. Toxic stress damages the structures and functions of a child's developing brain.

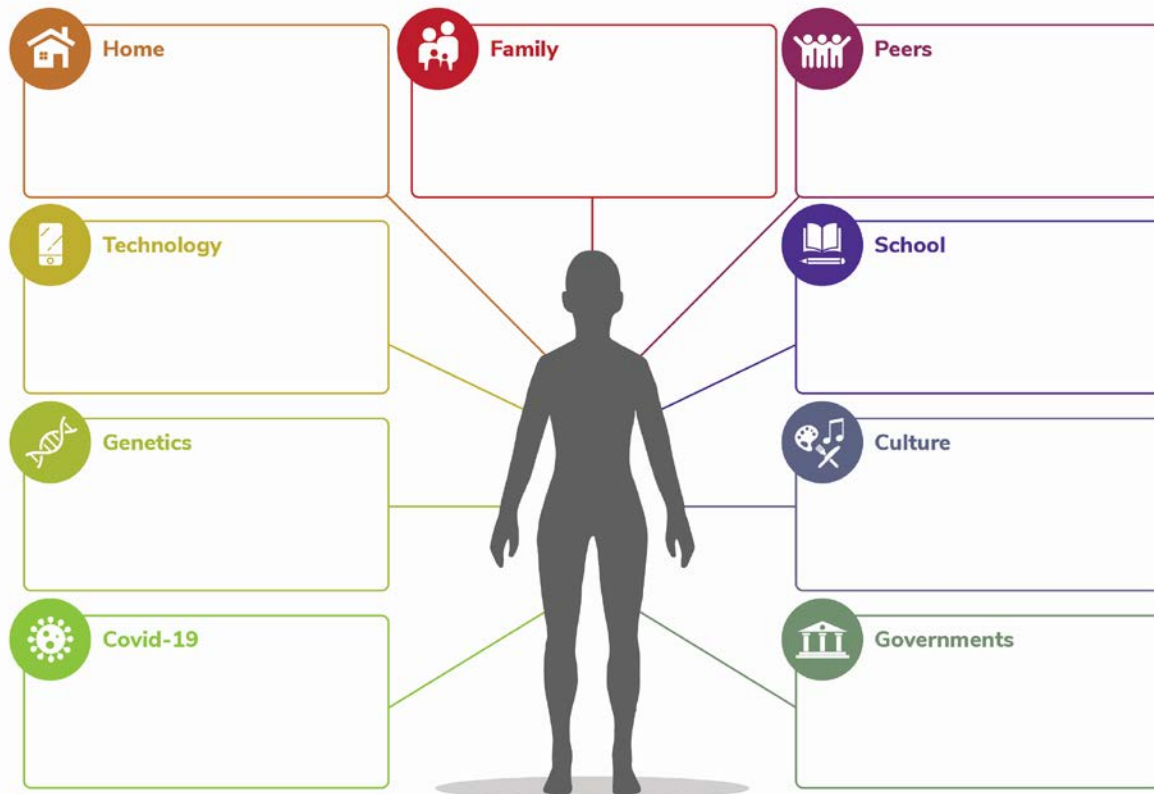
01 | What are the benefits of healthy stress?

02 | What are the signs of toxic stress?

Influences on Children and Youth

Our environment plays a huge role in our ability to regulate. People, places, and experiences that provide cues of safety make regulation easier than when there is the perception of danger or threat. Children have little control over their own lives and are dependent on adults. Therefore, they are particularly vulnerable to their environment.

Consider the influences on the children and youth you work with:



01 | What are the influences on the children and youth that you work with?

02 | How are these influences different than when you were a child? Or your parents' and grandparents' generations?

What Is a Crisis?

A crisis is a response to acute stress. We may become overwhelmed beyond our ability to cope and thus move into dysregulation, but this is a temporary state. Over time, we can recover from the crisis and our nervous system will return to a state of regulation.

01 | How do you define a crisis?

02 | From your perspective, what are the characteristics of a crisis?

STEPS TOWARD A CRISIS

01 | The perception of potential danger or threat

02 | The sense of vulnerability

03 | Precipitating factors, such as childhood trauma or protective factors

04 | The active crisis state

05 | Recovery and integration

01 | What causes a crisis in your personal life? What about in your professional life?

02 | What makes you more vulnerable to stress?

03 | What helps you to recover and integrate after a crisis?

VULNERABILITIES AND PRECIPITATING FACTORS

Our current nervous system state and our previous experiences affect how we perceive potential threats. These precipitating factors can include:

- Habitual behaviours and coping strategies
- Sensitivities
- Attachment history
- Adverse childhood experiences and exposure to traumatic events
- Developmental stage
- Temperament
- Mental health diagnoses and challenges
- Being too tired, hungry, stressed, bored, etc., or simply having a “bad” day

01 | What causes a crisis in the children and youth you work with?

02 | What might prevent an active crisis state from developing?

03 | How might precipitating factors influence the perception of a crisis?

Crises can bring opportunity and change.

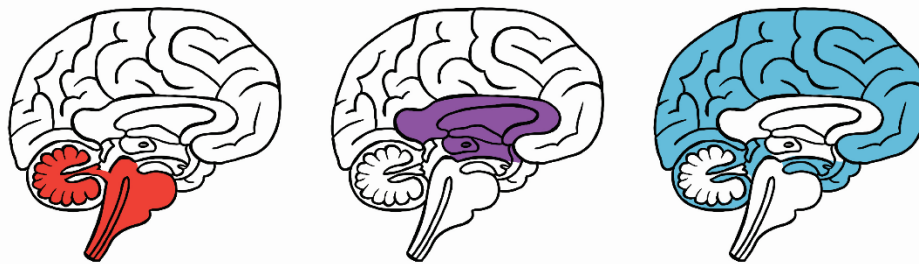
The Nervous System Response

The nervous system response refers to how our brain and our body work together.

THE THREE BRAIN MODEL

The triune brain theory helps us understand the evolution of the human brain and its role in our behaviour and actions. We experience the world through our senses. This sensory information is processed first by the primitive brain stem, then by the limbic system (the emotional centre of the brain), before finally reaching our smarter, thinking brain.

These three brain systems help us create a framework for understanding polyvagal theory and the three speeds of the nervous system: freeze, fight or flight, and connect.



Notes:

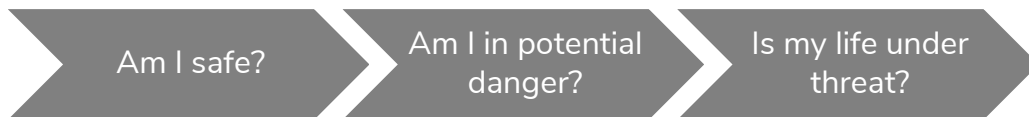
POLYVAGAL THEORY

When there is the perception of potential danger, the brain stem and emotional brain work with the nervous system to automatically move us into a protective state. Polyvagal theory is organized into the three principles that follow.

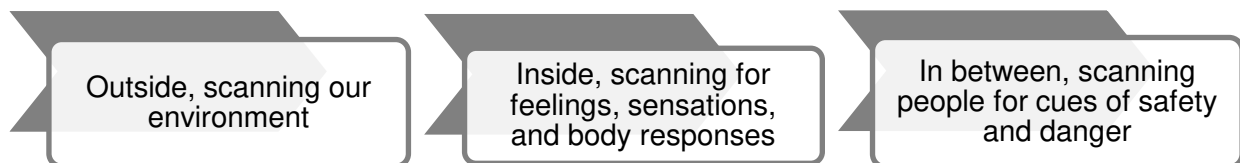
PRINCIPLE 01 | NEUROCEPTION

Neuroception happens below our conscious awareness.

Neuroception asks these questions:



Neuroception listens:



PRINCIPLE 02 | HIERARCHY

Polyvagal theory suggests that the nervous system is a predictable hierarchy.



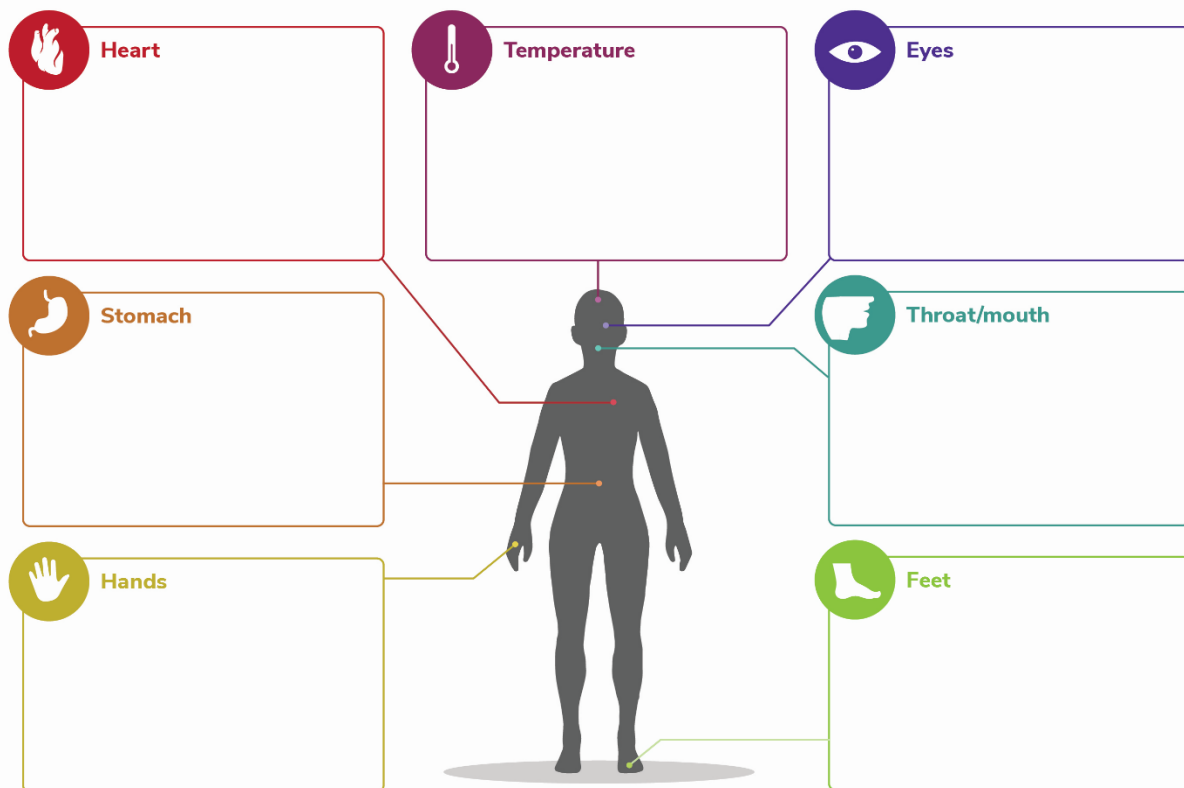
PRINCIPLE 03 | CO-REGULATION

The third principle of polyvagal theory is co-regulation. As noted earlier, co-regulation is developed through repeated experiences of attunement with a safe caregiver and is our primary strategy for calming the nervous system.

MOVING INTO FIGHT OR FLIGHT

The first step down the polyvagal ladder begins with the perception of “maybe” danger. The nervous system moves into “essential services only” mode, turning off functions not immediately needed, and turning on responses ready to protect.

The Fight and Flight Response

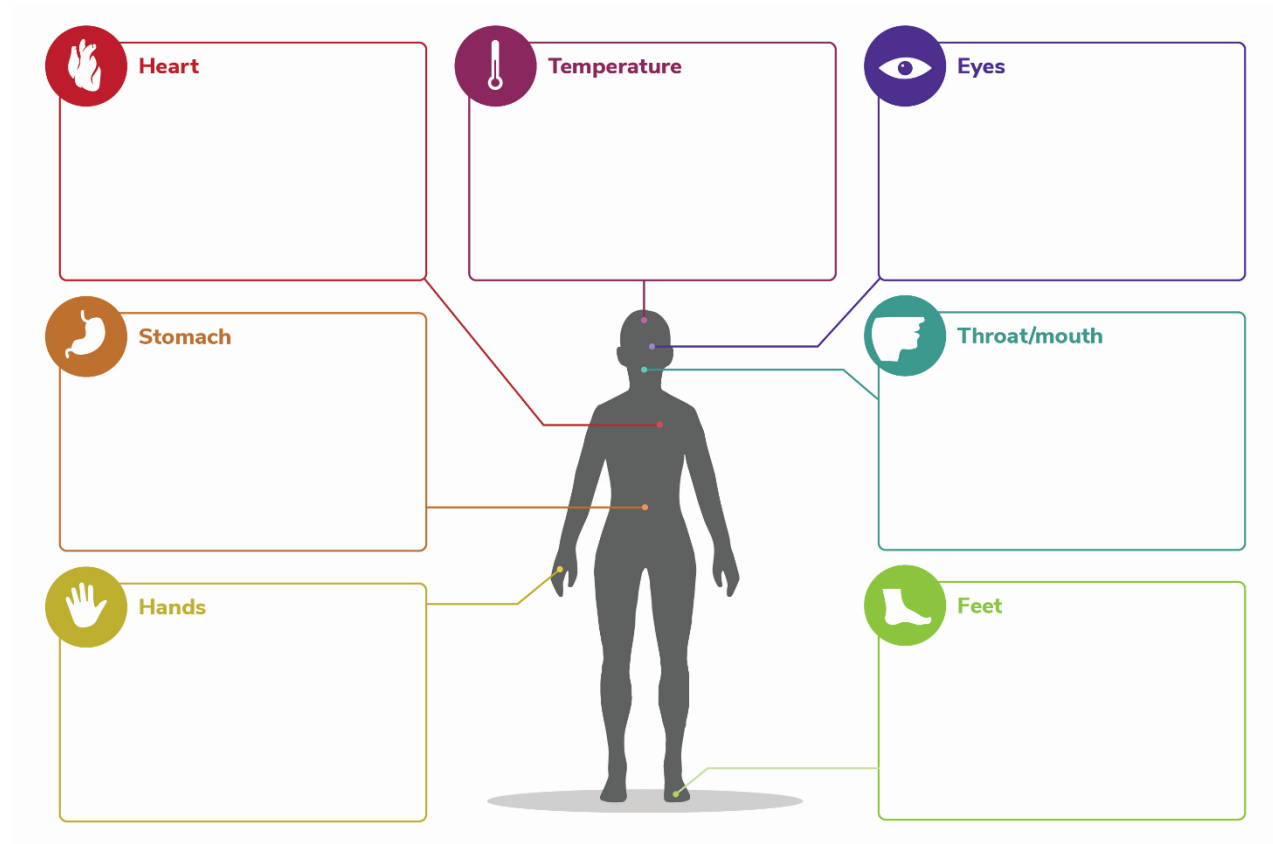


How do fight and flight show up in your nervous system?

MOVING INTO FREEZE

We move into the freeze response when either there is the perception of a life threat or when the fight or flight response has been on for too long and we tire ourselves out.

The Freeze Response

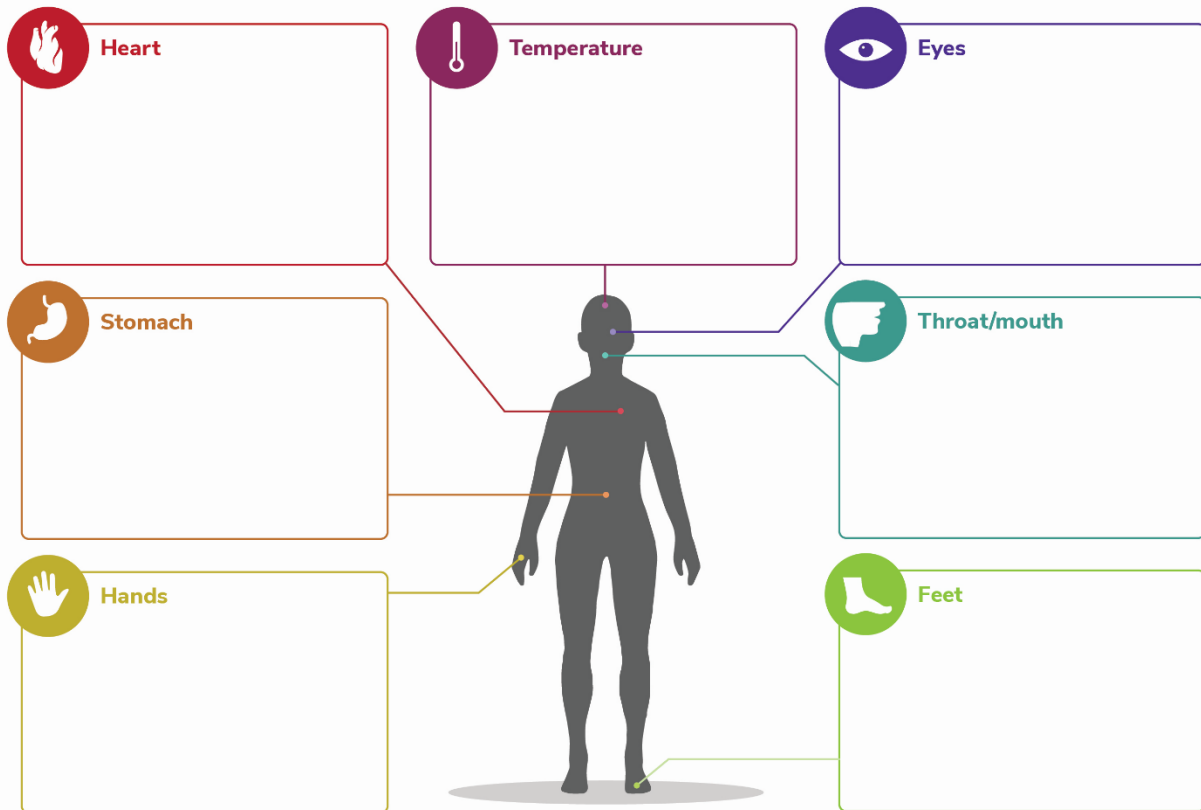


How does freeze show up in your nervous system?

MOVING INTO CONNECTION

It is only with the perception of safety that we are able to move into our “smart” brain, where we can relax, connect, and trust.

The Connection Response



What does connection and safety look like in your nervous system?

OPPORTUNITY FOR PRACTICE

01 | Tracking Triggers and Glimmers

Regulating our own nervous system begins with recognizing when we have moved out of a sense of safety and down the polyvagal hierarchy into a protective state. Learning to recognize the (sometimes subtle) physiological shifts that accompany a fight, flight, or freeze response is arguably the single greatest skill we can learn. Another skill that's nearly as important is to use *glimmers* to help us move back into our connective state in the absence of true danger. Glimmers are the people, places, activities, smells, tastes, etc., that create the possibility for joy and happiness.

01 | What triggers you down the ladder into a fight, flight, or freeze response?

02 | What glimmers move you back up the ladder into a state of connection?

02 | Nickname Your Nervous System!

Choose a symbol to represent each state of your nervous system. You can use fictional characters, colours, weather, animals, etc. – the possibilities are endless!

How might “befriending” these parts of your nervous system be helpful in managing regulation?

Beyond Fight, Flight, and Freeze

THE FAWN RESPONSE

The fawn response is a relational survival strategy that helps protect us when the source of threat is another human. Rather than a true neurological response, fawning is a conditioned behaviour we learn through experience. With fawning behaviour, we try to avoid or minimize potential danger by appearing pleasing to the potential source of threat. We keep others happy by attending to their wants and needs above our own.

01 | When might fawning be a successful survival strategy?

02 | How and why might children and youth activate the fawn response?

03 | How does fawning show up in your life?

Expressions of the fawn response include:

- An inability to say no
- Overly complimentary
- Being a people pleaser
- Ignoring own health/self-care
- Feelings of guilt when unable to help others
- Always making oneself helpful and useful
- Unable to confront mistreatment or injustice
- Inability to advocate for self or others
- Difficulty accessing and communicating one's own feelings and needs
- Worth and value tied to service

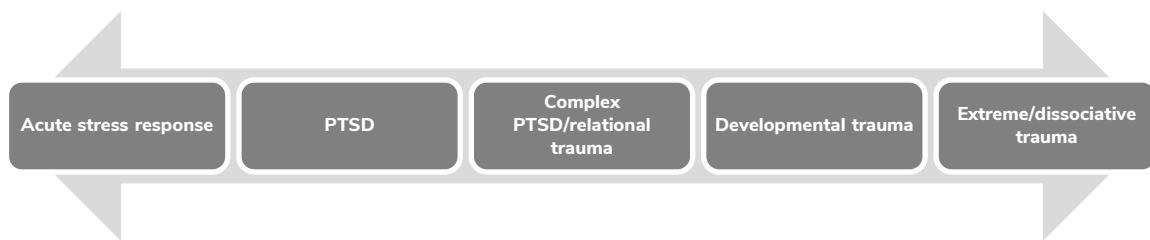
The Legacy of Trauma

Trauma is a state of acute stress or crisis from which we have not recovered. Traumatic experiences have not been processed into cognitive memory and stay stuck at a physical level, encoded as body sensations and feelings.

Trauma narrows our perception of the world, reducing our ability to see cues of safety and making us hyper-aware of danger cues. Sometimes trauma can move us into a state of hypo-arousal, where we have blunted responses to actual threat.

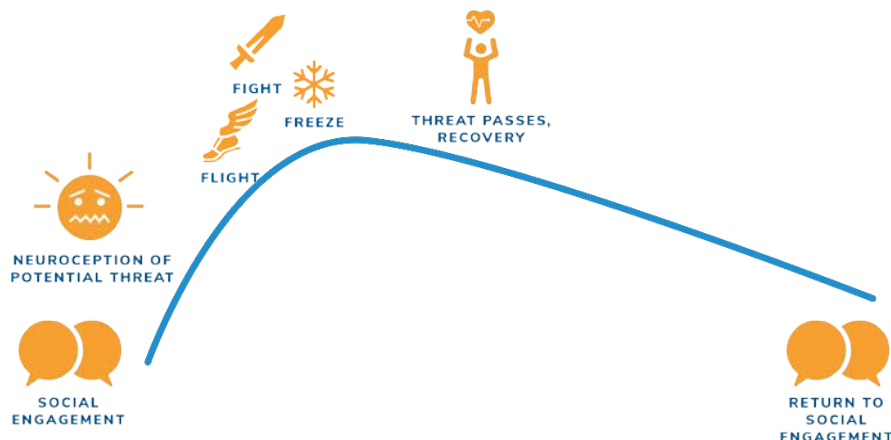
TRAUMA AS A CONTINUUM

Trauma responses occur on a spectrum. Our nervous system is designed to manage stress. Most often, the body can heal from an acute stress response. However, when it is unable to recover, post-traumatic stress symptoms develop and can be complicated by previous complex, relational, and developmental trauma. At the end of the spectrum is extreme or dissociative trauma, usually the result of heinous child abuse.



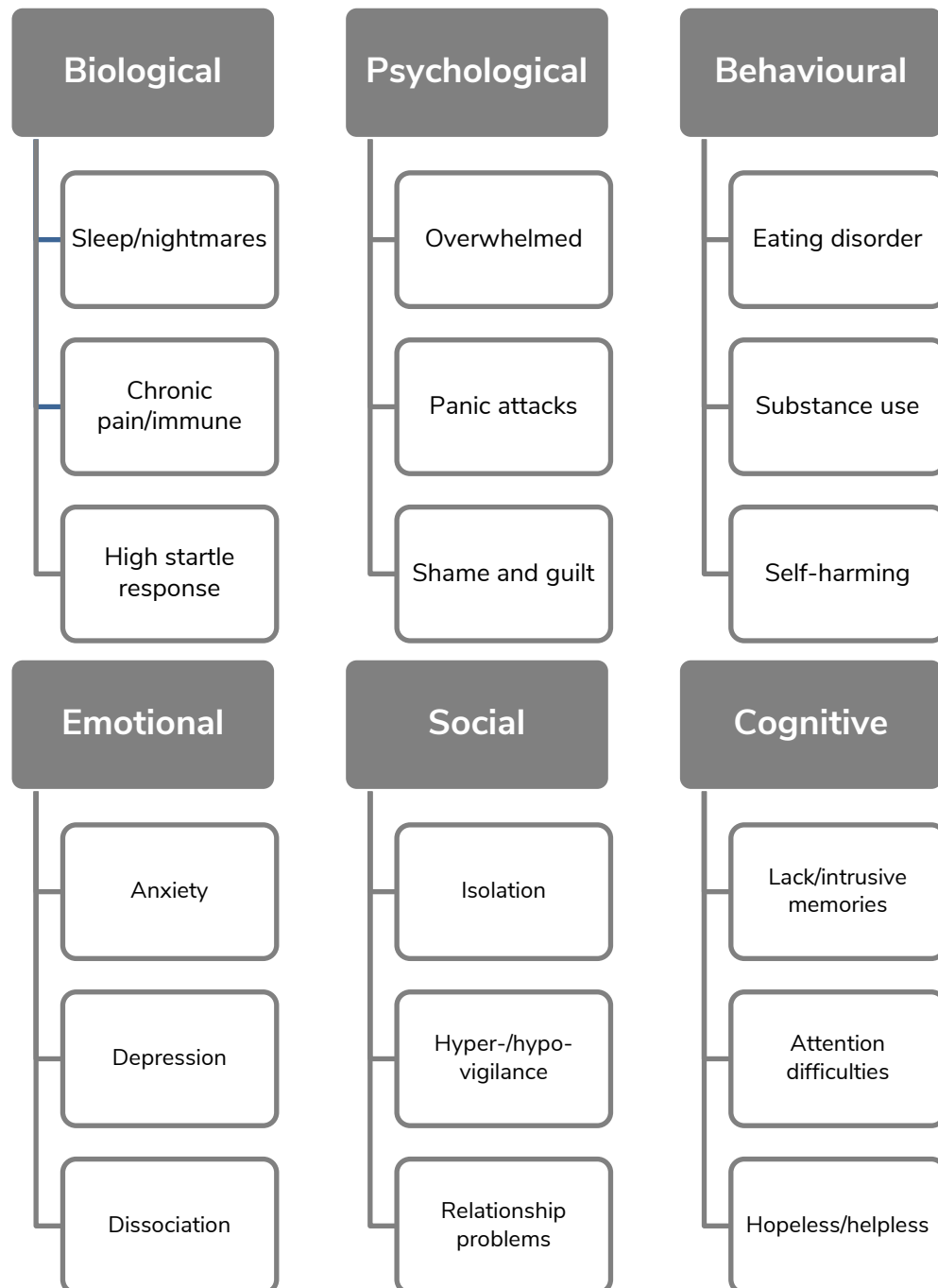
ADAPTIVE STRESS RESPONSE

Our nervous system is designed to handle a stress response. The body orients to a threat and neuroception chooses a protective action for us – fight, flight, freeze, or fawn. With an adaptive response, there is a realization that the threat has passed and that we have survived. This invites a period of rest and a return to a calm nervous system.



MALADAPTIVE STRESS RESPONSE

In a maladaptive response, the nervous system stays stuck “on”, without the perception that the danger has passed. We stay overwhelmed past our capacity to cope and the traumatic response remains undigested. The symptoms of trauma are numerous, as trauma can affect every level of functioning. Moreover, the indicators of trauma are often inexplicable – both because of a lack of cognitive memory and their seemingly contradictory symptoms – as they could be, for example, both hyper- and hypo-aroused. Indicators of trauma include:



Attachment and Adverse Experiences

ATTACHMENT AND SECURITY

Attachment plays a huge role in our ability to regulate. It is through repeated interactions with caregivers that are synchronized and reciprocal that we develop a sense of ourselves and others. Responses that convey “I see you, I get you, I accept you” lay the foundation for trust and a sense of security. Without enough of these attuned moments, a child may develop an insecure style of attachment, where others are perceived as potentially threatening and the world as unsafe.

01 | Why have humans developed such an elaborate attachment system?

02 | What are the benefits of having a secure attachment?

ADVERSE CHILDHOOD EXPERIENCES

Adverse childhood experiences (ACEs) are incidents that occur before we turn eighteen that can affect physical and emotional health throughout our lives. The ten most common ACEs are divided into three broad categories:

- **Abuse:** Physical, emotional, and sexual abuse
- **Neglect:** Physical and emotional neglect
- **Household dysfunction:** Partner violence, separation/divorce, caregivers with substance abuse or mental health issues, or who have been incarcerated

Notes:

ADVERSE COMMUNITY EXPERIENCES

Adverse community experiences reflect the structural and cultural systems into which we are born and raised. Our location in the world – our home, neighbourhood, community, culture – influences our access to services and supports. Adverse community experiences include:

- Racism and discrimination
- Violence, war, displacement
- Substandard housing, segregation, toxic exposures
- Limited access to food, transportation, education, healthcare, etc.
- Poverty, lack of economic opportunity
- Discriminatory policing and justice systems

ADVERSE ENVIRONMENTAL EXPERIENCES

We are also affected by what is happening both locally and globally. Global pandemics and climate change incidents demonstrate how quickly our environment can be altered. Some adverse environmental experiences include:

- **Natural disasters:** Tornados, hurricanes, volcanos, earthquakes, tsunamis
- **Climate change:** Heat, wildfires, storms, mudslides, rising sea levels
- **Global Health:** Epidemics, pandemics, famine, drought

How might climate change and the rise of natural disasters adversely affect this generation of children and youth?

The Biology of Emotions

THE PURPOSE OF EMOTIONS

The purpose of emotion is to provide us with important information about our internal and external environment. No emotion is inherently “bad,” and emotions themselves don’t cause dysregulation.

When we experience safety in our nervous system, we can learn to experience and express emotions in healthy and successful ways. Stress, trauma, and adverse experiences impede our ability to recognize and process feelings and create patterns of dysregulation and dysfunction.

Seven Basic Emotions

Dr. Paul Ekman suggests a theory that there are seven innate emotions:

- Anger
- Sadness
- Fear
- Enjoyment
- Disgust
- Contempt
- Surprise

EMOTIONS IN CHILDREN AND YOUTH

Around two months of age, infants show “social smiles.” Around seven months of age, they begin to experience emotions like anger, fear, sadness, and surprise. Most of us have experienced some form of the “terrible twos” when children are easily overwhelmed. Biological factors like temperament and genetics can combine with attachment disruptions and adverse experiences to create children who are more easily emotionally dysregulated.

“The basic premise that children must learn about emotions is that all feelings are okay to have; however, only some reactions are okay.”

– Daniel Goleman

TEN PRINCIPLES OF EMOTIONS

Emotions are:

- Innate
- Rooted in the body
- Able to flip on and off like switches
- Experienced on a continuum
- Like waves
- Able to be named and validated
- Programmed for action
- Amplifiers
- Energetic
- Contagious

THE BENEFITS OF “POSITIVE” EMOTIONS

As mentioned earlier, emotions aren’t inherently “good” or “bad,” but some emotions are more distressing than others. This may cause us to label them as “negative” for ourselves.

In our quest to understand our more distressing emotions, we often overlook the tremendous benefit of savouring emotional states that we perceive as “positive.” Learning to sustain pleasant feelings like the following can help us stay connected to others:

- Love
- Gratitude
- Interest
- Pride
- Inspiration
- Joy
- Serenity
- Hope
- Amusement
- A sense of purpose and meaning

01 | What might be the purpose of anger, sadness, and fear?

02 | Which emotions do you have the most difficulty expressing? Which are easier?

Cultural Considerations

ATTACHMENT

Mothers and Others

Much of the research on child development has centred around Western ideals, such as a mother as a singular caregiver. The work of Sarah Hrdy demonstrates that in many cultures, infants are cared for by a variety of “allo-parents” – relatives, siblings, neighbours, friends – who all participate in the raising of a child.

Cross-Cultural Patterns

While attachment patterns appear universal, researchers have discovered cross-cultural patterns. One example is the maternal trait of “sensitivity” which is linked to regulation patterns in toddlers. This trait is found to follow patterns linked to cultural norms. For instance, there are differences in attachment patterns in cultures where independence is valued versus cultures where obedience and loyalty to family are valued.

Notes:

DISCRIMINATION

Genetic researchers have discovered that up to 99.9% of human DNA is identical from person to person. Of the .1% that differs, almost all of the variation is found among individuals within the same race. This means that there is actually more diversity *within* a race than between races.

Despite this, belonging to or feeling isolated from the dominant culture has a huge impact on our experience of the world. Being on the outside of the sphere of influence can affect access to education, housing, and social and health services. It creates exposure to detrimental economic, judicial, and governmental agencies.

From a nervous system lens, exposure to racism, sexism, and other forms of discrimination keep us in a heightened state of fight or flight, offering fewer opportunities to recover from stress.

01 | In what ways was the family in which you grew up the same and/or different from the culture in which you were raised?

02 | How does culture where you live now impact the clients you support?

Resilience and Post-Traumatic Growth

RESILIENCE

Resilience is often described as the ability to bounce back from adversity. We have come to think about resilience as a superpower to call upon in times of distress. Resilience generally describes a person who can successfully manage stress.

What Resilience Is Not

Resilience is not an innate personality characteristic. It is not synonymous with grit or perseverance or strength. Resilience is something you can only *learn* by first encountering adversity. And it is not enough for us to have survived adversity – we must integrate that experience with our nervous system.

Beyond survival, resilience is *future-oriented*. It is the inner knowing that because we survived one bad thing, we will probably survive another bad thing in the future.

Resilience does not protect against pain. With resilience, we hurt just as much as anyone else – we have just learned not to suffer as long. With resilience, we know that emotional pain will not annihilate us (despite how it might feel), and we can successfully manage our emotional responses. Moreover, we may demonstrate resilience in one circumstance, such as losing a job, but not in another, such as moving.

POST-TRAUMATIC GROWTH

Unlike resilience, to experience post-traumatic growth we first have to experience a trauma. Post-traumatic growth takes resilience one step further. Not only do we recognize that we survived the traumatic experience and were able to integrate it into our narrative, but we can also see *benefits* to having undergone the adversity. The phrase used to describe the healing process of bones captures the essence of post-traumatic growth: “Stronger in broken places.”

Post-traumatic growth is influenced by:

- Our experiences and how we engage with the world
- The availability and quality of social resources
- Our coping strategies

THE RECIPE FOR RESILIENCE



Notes:

Regulation Strategies

When we are experiencing a dysregulated state, we commonly reach for cognitive strategies to help us regulate, but the strategies that calm adults do not always work with children and adolescents. Their brains are still developing and cognitive skills require a level of insight that most children haven't developed yet.

The following strategies emphasize the physiological nature of dysregulation and focus on body-based ways to return to a regulated state.

Somatic-Based Strategies

Dysregulation begins with a physiological response to a potential threat. Somatic-based strategies speak the language of the nervous system and help to quickly regulate our state. These strategies include breathwork and touch.

Play and Art-Based Strategies

Play is a child's first language and their natural medium of expression. Art and play activities engage the senses in ways that take us beyond words. Play and art provide the opportunity for connection, emotional expression, and fun!

Movement and Music-Based Strategies

Rhythm is an integral part of the nervous system. We use rocking and lullabies to sooth cranky babies, and songs and clapping games to engage toddlers and preschoolers. Movement and music are fundamental to life and have an astonishing ability to change our mood and state.

Mindfulness and Cognitive-Based Strategies

Mindfulness is the practice of nonjudgemental, intentional awareness of the present. It strengthens areas of the brain associated with learning, attention, memory, and self-awareness. Mindful and cognitive strategies help calm the nervous system and decrease emotional reactivity by engaging our conscious awareness.

"Self-regulation will always be a challenge, but if somebody's going to be in charge, it might as well be me."

– Daniel Akst

SOMATIC-BASED STRATEGIES

BREATHWORK

When the nervous moves into a protective state, there are automatic changes to our breathing. Our breath becomes rapid and shallow as we prepare to fight or flight, and we may hold our breath in a state of freeze. Knowing this, we can consciously and deliberately help the nervous system move back into a sense of safety by simply using the power of our breath.

Breathwork Strategies

Horse breath	
Snake breath	
Beehive breath	
Bunny breath	
Whale breath	
Pinwheel breath	
Darth Vader breath	

01 | What other breathing strategies help to regulate the nervous system?

02 | How might you introduce breathwork to children, youth, and adult clients?

03 | What toys and props might make learning breathwork fun?

TOUCH

We may be reluctant to use touch in our work, but nothing accesses the nervous system like soothing touch from an attuned and trusted person. We can also teach our clients a variety of strategies for them to use touch to comfort themselves.

Self-Touch

Hands on heart	
Hands on face	
The three storytellers	
The self hug	

Co-Regulating Touch

Co-regulating touch involves the judicious use of touch by the helper to help create a state of calm in the other person's nervous system. Any use of touch needs to be preceded by conversations about consent. Co-regulating touch includes holding hands, a hand on the person's shoulder or back, and hugging.

01 | What other ways might you use touch to regulate the nervous system?

02 | How comfortable are you with touching your clients?

03 | What are the policies in your workplace about touch? Do you agree with them?

MOVEMENT AND MUSIC-BASED STRATEGIES

MOVEMENT

When we are triggered into protective defences, the nervous system wants to move! Our unconscious urge is to mobilize resources just in case we need to fight or flight our way out of danger. Allowing the body to discharge this drive by allowing it to move can bring us back into a regulated state.

As humans we are hardwired to take pleasure in activities that promote our survival. Physical activity promotes self-expression, social connection, and mastery. Movement influences many brain chemicals, and these help us reduce worry, feel more energized, and bond with others.

Movement also:

- Reduces inflammation in the brain
- Protects against depression, anxiety, and loneliness
- Makes us more receptive to joy
- Creates resilience against stress

Movement Activities

Clapping	
Stomping	
Ripping, popping, breaking, etc.	
Jumping and rebounding	
Kicking and throwing	
“Power poses”	
Pendulation	
Gestures	

Notes:

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MUSIC

Listening to and making music activates the brain regions that generate and control emotions. Our limbic system lights up when our ears perceive music. In fact, almost all regions in the brain are activated with music, making it a truly whole-brain activity.

Drumming

Research shows that even a few minutes of drumming can boost our mood. The physical stimulation of drumming, paired with the vibrations, resonate through every cell in the body.

Dancing

With dancing we get twice the benefits – all the positive effects of listening to music and the activation of sensory and motor circuits.

Singing

Polyvagal theory defines singing as a neural exercise of the social engagement system. The slow exhalations, coupled with controlling the muscles of the face and head, engage the ventral vagal pathways and calm the autonomic nervous system.

Instruments

Playing instruments together engages several of our sensory systems and creates the opportunity for wordless connection through sound and rhythm. Many instruments also provide discharge and expression.

“Shake It Off”

This intervention deserves its own category. Chose any music that invites the movement of “shaking off” stress – imagine wet hands, no towel, and vigorously shaking your hands to get every drop of water off.

Kinesthetic empathy is the capacity to participate in someone’s movement. It makes use of mirroring sensations and movements of the body to enhance connection and synchronicity between people.

PLAY AND ART-BASED STRATEGIES

Play helps kids develop self-regulation and language skills, as well as creativity. They learn to imagine possibilities, rehearse roles, and practice empathy. Play builds new neural connections simply by having fun.

ART

Paint and crayons	
Colour your heart	
What's in your brain	
Feelings maps	
Kinetic drawings	
Portraits	

01 | What other art-based strategies might you use with children and youth?

02 | How comfortable are you with using art as a therapeutic medium?

PLAY

Nurturing activities	
Puppets	
Costumes and masks	
Games	

Rough and Tumble Play

Like most young mammals, children gravitate towards rough and tumble play. Harnessing the power of play by providing outlets for the natural discharge of the nervous system can prevent dysregulation from starting.

Nature-Based Play

Combining play with the elements of nature promotes safety and relaxation.

01 | What other play-based strategies might you use with children and youth?

02 | What is your relationship with play? How can you invite more play into your life?

SENSORY ACTIVITIES

Trauma happens to the body and is stored as sensory memory. Sensory activities engage several senses at once. They promote emotional and creative expression. Sensory activities also provide opportunities for self-identity while connecting us to others.

Paint	
Collage	
Sand	
Water	
Clay	

MINDFULNESS AND COGNITIVE-BASED STRATEGIES

Because of their ages and developmental stages, young children respond well to play and somatic interventions. Around age eight (and often much later if there are adverse experiences and trauma), the ability to be self-reflective begins to develop. Older children can apply cognitive strategies to think about their thinking.

COMMON COGNITIVE PATTERNS IN CHILDREN

Minimizing

- Discounting good and/or bad experiences
- Denying own role and responsibilities

Blaming

- Overly focused on others' mistakes
- Overly focused on their own mistakes

Rumination

- Repetitive thinking and feeling about past events
- Worry and anxiety about future events

Catastrophizing

- Exaggerating past events
- Imagining improbable, negative events in the future

MINDFUL ACTIVITIES

"Spidey Senses"	
Progressive muscle relaxation	
"Walking on Thin Ice"	
Loving kindness meditation	

What other mindful activities might you use with your clients?

COGNITIVE ACTIVITIES

Safe place visualization	
Container visualization	
Destroy/release visualization	
Shift judgement to curiosity	

Listen for the M.O.A.N.S.: Must, Ought to, Always, Never, Should

What other cognitive activities might you use with your clients?

PSYCHOEDUCATION

Teaching others what we have learned about the nervous system, neuroception, and adverse experiences can help normalize dysregulation, create understanding and compassion for the self, and provide hope that we can learn to manage our own nervous system.

Notes:

JOURNALLING

Many trauma treatments, such as EMDR, attribute a healing response to the activation of both the right and left sides of the brain. When we think about a distressing memory, we activate our right/somatic/emotional memory. When we write about it, we engage our “left brain” that brings order and logic. This whole brain activity promotes the integration of memory. Journalling can help us shape our life into a cohesive narrative.

JOURNALLING ACTIVITIES

“Ugly” journal	
Triggers journal	
Glimmers journal	
Gratitude journal	
List journal	
Letter writing (not letter sending)	
Past, present, and future self	

01 | In what ways might journalling help calm the nervous system?

--

02 | How might you introduce new regulation strategies like mindfulness and journalling to your clients?

--

03 | What other activities can you think of that honour the natural urges of the nervous system and help bring about a state of regulation?

--

Opportunity for Practice

CREATE YOUR OWN EXAMPLE

First, create a composite of a child or adolescent that is relevant to your practice. You can create a fictional scenario or choose a real-life example from your life, with identifying details changed.

Consider some of the following criteria for the child or youth:

- Name and age
- Sex and gender expression
- Cultural background
- Family configuration
- Community, cultural, and environmental influences
- Presenting issue or problem
- Your role (therapist, educator, medical professional, parent, etc.)

Reflection

01 | What regulation strategies might be effective in promoting emotional regulation for this child or youth?

02 | What regulation strategies might not be successful?

03 | What strategies might support the family?

04 | How does age, gender, culture, and/or community affect which strategies you select?

Appendix

THE CHILD AND ADOLESCENT BRAIN

The brain goes through astonishing states in its lifetime. Diagnoses such as foetal alcohol syndrome unveil just how vital the prenatal environment is on the developing brain. Much of the brain's architecture unfolds on a tight, nonnegotiable schedule, which is why trauma can be so damaging during infancy.

The importance of early childhood experiences for growing healthy brains has been understood for several decades, but we are only beginning to understand the enormous remodeling that is occurring in the adolescent brain and its influence on teen behaviour.

Before Birth

- Week 3: The brain begins to develop.
- Week 6: The triune brain regions begin to form.
- Week 12: Every hour 15 million nerve cells are created.
- In the last trimester, the brain triples in weight.

At Birth

- A wide variety of reflexes are present (rooting, sucking, stepping, etc.).
- Infants can recognize familiar voices.
- Infants prefer human faces.

The First Few Years

- By age two, the brain is 80% of its adult size.
- Up to 250,000 neurons are added to the brain every minute.

Childhood

- Between birth and age five, the brain changes more than any other time.
- By age eight, children begin to use reason as their cognitive brain develops.

Adolescence

- Between puberty and mid to late twenties, the brain goes through an extensive rewiring with the processes of pruning and myelination.
- Hormones, including dopamine, serotonin, testosterone, and estrogen, have an influence on behaviour.
- There are innate drives towards novelty, risk-taking, and peer relationships.

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