Attachment Disorder: New Interventions & Strategies

The Center for Disease Control reports that 1 out of every 50 infants under twelve months of age has been traumatized. In Alaska, approximately 50 percent of all reports of harm are for children under the age of six, and the rate of substantiated maltreatment for Alaskan children is nearly 3.5 times the national rate. (Early Childhood Comprehensive Systems Report, 2006). Shaw and Goode (2005) report that “Research shows that children who have experienced abuse or neglect are at high risk for a variety of developmental problems, including for example, attachment disorders, social and emotional disturbances, cognitive deficits, neurobiological changes in the brain, and failure to thrive. Infants and very young children are especially vulnerable to abuse and neglect.”

Much of what is known about attachment disorders feels overwhelming, heavy, and hopeless. Parents are told that their child has suffered permanent brain changes, and that their resultant behaviors will likely continue to impact their daily functioning in an all-encompassing and largely negative manner for the rest of their lives.

This workshop aims to dispel those myths and provide hope for the future by offering practical interventions for parents and caregivers, a basic understanding of differential diagnosis, including the correlation and connection between attachment and dissociation, and an understanding of the limbic system response to trauma and abuse.

Participants will learn about the brain’s capacity for change, the power of relationship in facilitating change in limbic-system reactionary behaviors, and an understanding of how to gain access to services appropriate for their child.

All portions of this one-day workshop will be appropriate for both parent/caregivers and professionals working with children and adults who experience attachment difficulties.

PART I: Limbic System Rage and Reactionary Behaviors

Understanding how the brain is formed by trauma, how it becomes attuned to anxiety, fear, and anger and how these fuel the very behaviors that result in limbic system rage will be addressed. Fundamental to understanding the experience and behavior of the individual with attachment difficulties is the understanding of brain function, the impact of trauma on the brain, and the difference between the brain of a person who has experienced repeated trauma and abuse and one who has not. Limbic system functioning will be compared to that of the prefrontal cortex. This presentation will be in Powerpoint/lecture format. A powerpoint projector and laptop will be required. A short video, may be shown.

Learning Objectives:
1. Increase the knowledge base of participants in brain-based research and its implication for children and adults who have experienced trauma and resulting attachment disordered behaviors.
2. Understanding the neurological impacts of trauma/abuse and how they are manifested within limbic system behaviors.
3. Improve working understanding of behaviors that are limbic-system activated, such as hypervigilence, emotional reactions, feelings of safety or lack of safety within the parental and marital relationship, lack of integrative thinking, values, power struggles, and learning.

PART II: Overlapping Issues & Differential Diagnoses

Attachment Disorders and Complex Trauma are the foundation for many mental health diagnoses, and complicate the understanding and treatment of these diagnoses. Diagnoses such as Oppositional Defiant Disorder, Attention Deficit Disorders, and Mood Disorders are often misused when attempting to understand the complexities of the child with attachment problems. If misdiagnosed, interventions may be ineffective and inappropriate for the child with attachment difficulties. In particular, it is impairative that parents, caregivers, and providers understand the link between trauma, attachment disorders and dissociation (Liotti, 2004).

Powerpoint/lecture and handouts will be utilized for this portion of the lecture.

Learning Objectives:

1. Understand the clinical differences between diagnoses.
2. Increase understanding of why appropriate diagnosis is important for the child or adult with attachment issues.
3. Improve knowledge of how trauma can impact attachment and how a disorganized attachment can be the garden bed of dissociation.

PART III: Practical Interventions and Solutions for Parents & Caregivers

Effective parenting principals are the absolute fundamental structure of treating the child with an attachment disorder. Both parents and professionals must familiarize themselves with the specialized techniques and skills that are necessary to parenting this population. This workshop will provide participants with specific hands-on principles and techniques that are necessary to help a child with trauma-attachment disorders develop a healthier and more secure attachment to parents/caregivers. Advanced techniques not previously taught in beginner and intermediate workshops will be taught. Powerpoint/lecture, and small group work will be utilized in this portion of the presentation.

Learning Objectives:
1. Improved understanding of how to connect with difficult-to-connect-with children.
2. Specific skills in facilitating attachment-focused parenting strategies with children who fit the diagnostic category of Reactive Attachment Disorder.
3. Increased self-confidence in carrying out those strategies necessary to improve the connection between parent/caregiver and the child with a history of trauma, attachment disruption and dissociation.

PART IV: Manifesting the Hope

Much of what is known about attachment disorders feels overwhelming, heavy, and hopeless. Parents are told that their child has suffered permanent brain changes, and that their resultant behaviors will likely continue to impact their daily functioning in an all-encompassing and largely negative manner for the rest of their lives.

Participants will learn about the brain’s capacity for change, the power of relationship in facilitating change in limbic-system reactionary behaviors, and an understanding of how to gain access to services appropriate for their child.

Video tapes of dissociation and attachment difficulties may be show. These, as well as other resources, will help point to the healing that can occur through carefully dictated relationship interventions. The presenter will also use powerpoint/lecture and handouts, as techniques of learning.

Learning Objectives:

1. Increase hope and optimism for the healing and behavioral improvement of the child/adult experiencing attachment problems.
2. Improve understanding of feelings vs. facts related to the behavioral functioning of children and adults with attachment difficulties.

OUTLINE OF THE DAY

7.0 CEU’s

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<thead>
<tr>
<th>Event</th>
<th>Time 1</th>
<th>Time 2</th>
<th>Duration</th>
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<tbody>
<tr>
<td>Registration/Breakfast</td>
<td>08:00 a.m.</td>
<td>08:45 a.m.</td>
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<tr>
<td>Welcome &amp; Housekeeping</td>
<td>08:45 a.m.</td>
<td>09:00 a.m.</td>
<td>1 hour 30 minutes</td>
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<tr>
<td>Presentation</td>
<td>09:00 a.m.</td>
<td>10:30 a.m.</td>
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<tr>
<td>Break</td>
<td>10:30 a.m.</td>
<td>10:45 a.m.</td>
<td>12:00:00</td>
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<tr>
<td>Presentation</td>
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<td>noon</td>
<td>1 hour 15 minutes</td>
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<tr>
<td>Lunch</td>
<td>noon</td>
<td>1:00 p.m.</td>
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<tr>
<td>Presentation</td>
<td>1:00 p.m.</td>
<td>3:00 p.m.</td>
<td>2 hour</td>
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<tr>
<td>Break</td>
<td>3:00 p.m.</td>
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<tr>
<td>Presentation</td>
<td>3:15 p.m.</td>
<td>5:30 p.m.</td>
<td>2 hour 15 minutes</td>
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Presenter’s Bio:  Kimber Evensen has worked in the mental health and social services field since 1989. She graduated with her bachelors in social work in 1995 and with her masters degree in 1997. She was licensed at the clinical level in 2001. Kimber has worked as a child protection social worker, a volunteer guardian ad litem (CASA), and a rape crisis hotline volunteer. Her extensive mental health experience includes work in outpatient community mental health centers, in school-based programs, providing city-wide on-call and crisis management services, home-based and hospital-based therapy, community health development coordination, and long-term residential treatment.

Kimber is a board certified licensed clinical social worker and a certified criminal reformation clinician. She holds advanced certification in critical incident stress management, and is an Advanced-Children, Youth and Family Social Worker. Kimber has trained in level I and II Eye Movement Desensitization and Reprocessing Therapy (EMDR) and level I Internal Family Systems Therapy (IFS). She has post-graduate training in sand tray therapy, the use of art in therapy, and Child Centered and Filial therapy. Kimber is a clinical member of the Association for the Treatment and Training in Attachment of Children (ATTACCh) and the Association for the Treatment of Sexual Abusers (ATSA).

Kimber has provided trainings nationally and internationally, teaching professionals in the areas of trauma, sexual abuse, attachment, ethics, compassion fatigue, physically and sexually aggressive youth, maintaining empathy with difficult parents, and understanding eating disorders, among others. She has taught in the social work and human services departments at the Kachemak Bay Branch of Kenai Peninsula College.

Kimber is the author of the Pathway to Hope Video Guidebook, a companion to the video created by Tribal Law and Policy Institute to help community providers in Alaska understand and address the sexual abuse of children. She is the co-author with PeggyEllen Kleinleder of The Thursday Group: A Story and Information for Girls Healing from Sexual Abuse, published in 2009 by NEARI Press.

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