

*Facilitating
Healing and Change*



Inspire Action for Social Change

Equity & Trauma-Informed Compassionate De-escalation in Supervised Visitation Services

Part 2: January 11, 2022

This project was supported by Grant No. 2020-TA-AX-K011 awarded by the Office on Violence Against Women, U.S. Department of Justice. The opinions, findings, conclusions, and recommendations expressed in this publication/program are those of the authors and do not necessarily reflect the views of the Department of Justice, Office on Violence Against Women.

Inspire Action for Social Change

Session Trainers

**Beth
McNamara**
*Co-Founder &
Co-Executive
Director*



**Erin
Fairchild**
*Inspire
Consultant*



Today's Learning Points

- The Escalation Continuum: how culture, identity & bias can shape our perceptions
- Starting with ourselves: self practices for escalated situations
- What to do when co-regulation isn't safe
- Tips for equity and trauma informed compassionate de-escalation

Grounding Exercise

- Take a deep breath and repeat your affirmation to yourself
- Feel your bottom on your seat and/or feet on the ground
- As you exhale, repeat your affirmation
- As you breathe in again, recall someone you trust saying the affirmation to you



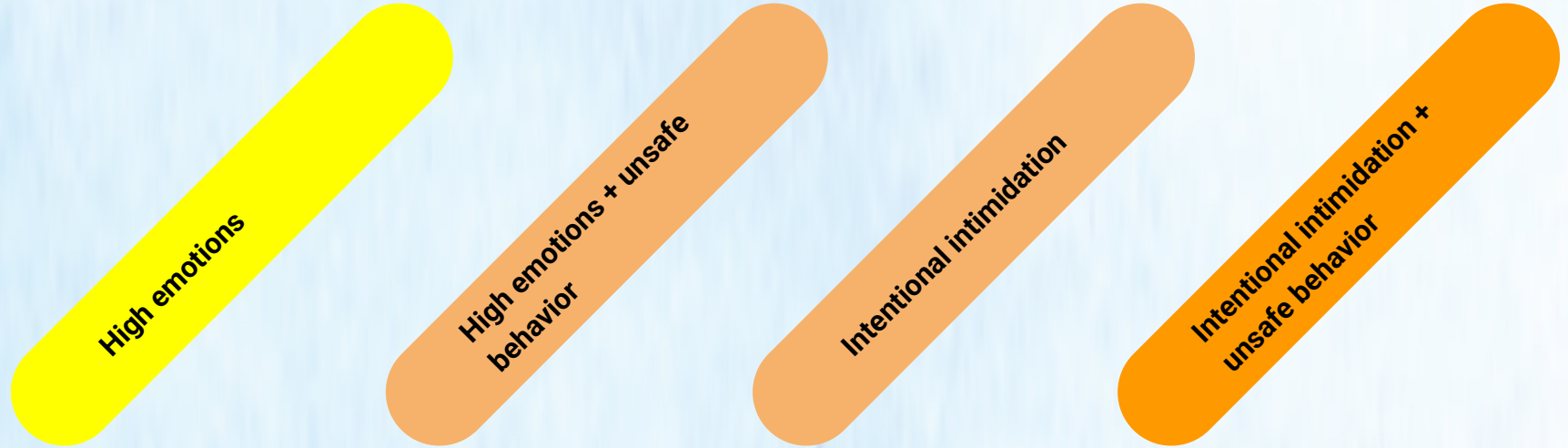
Self-Reflection Moment

Reflect & Write:

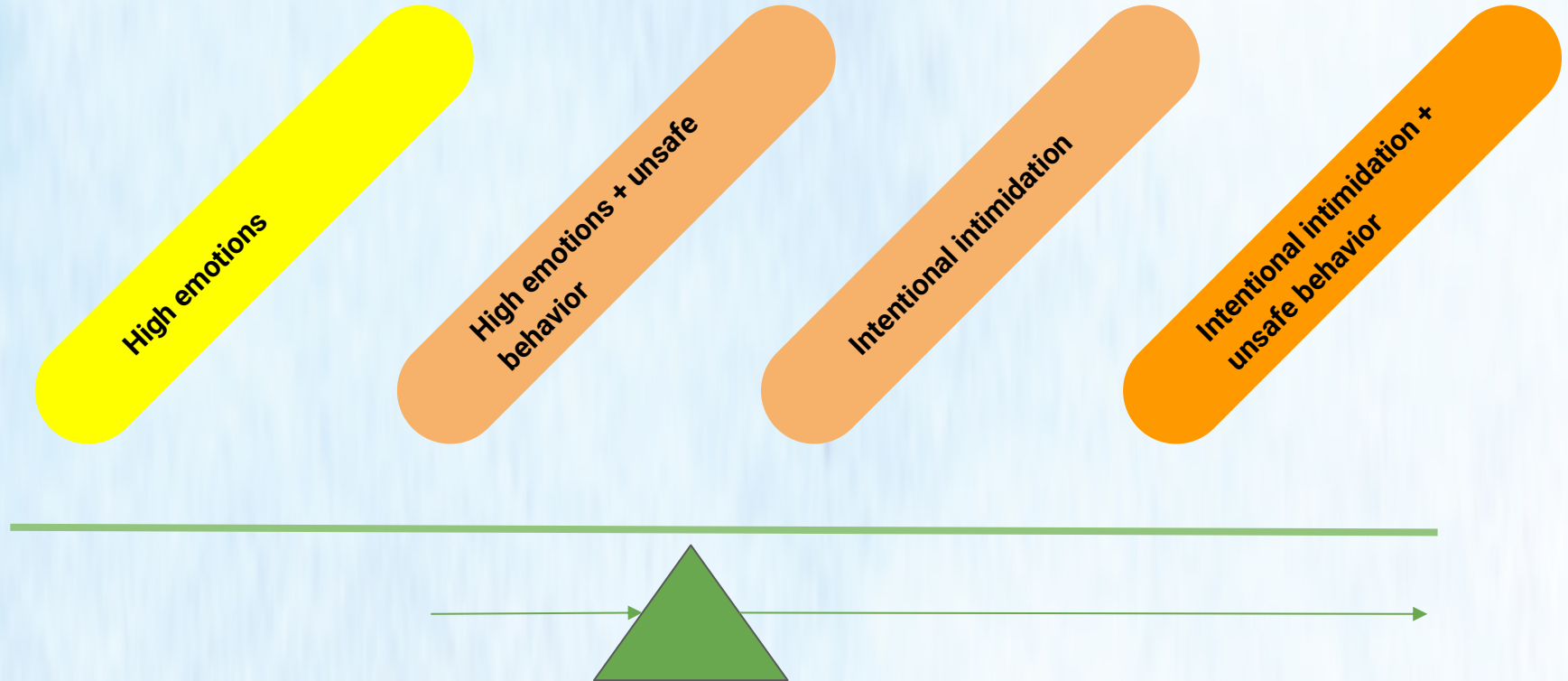
What do you think, imagine, assume about
“escalated” behavior and people who are
“escalated”?



The Escalation Continuum



The Escalation Continuum





How people express and experience emotions varies greatly based on:

- Culture
- Lived experience
- Identities
- Spirituality/religion/faith practice
- Past & current experiences with healing
- Environment/context
- Safety or sense of safety
- Sense of trust
- Past & current experiences with trauma
- Cultural mismatches with involved parties
- Stress & trauma response in the body & brain (stress hormones, etc.)
- Current & historical experiences with oppression
- What else? Take a moment to think about what else can impact how someone expresses and experiences emotion.

Self-Reflection Moment:

Reflect & Write: When it comes to how big emotions are expressed, and how people navigate conflicts and stress, is there an objective norm we can hold program participants to?



Grounding Exercise

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It Starts With Me

Self-reflection and personal de-escalation are a critical component of working through stressful situations in supervised visitation.





When Our Bodies Are Flooded With Stress:

- Our thinking brains go offline (our “lids are flipped”) -
 - We can feel numb or out of body
 - We might feel like our heart, body, and brain are in chaos
 - We might become singularly focused
 - Hear a ringing in ears
 - Pulse slow down or speed up
 - Breathing may get shallow or fast

Self-Reflection Moment:

Reflect & Write:

Think about how it feels when your lid is flipped.

- ❖ What responses from the people and the environment are helpful?
- ❖ Which responses are not helpful or may even make it worse?



When Lids Are Flipped:

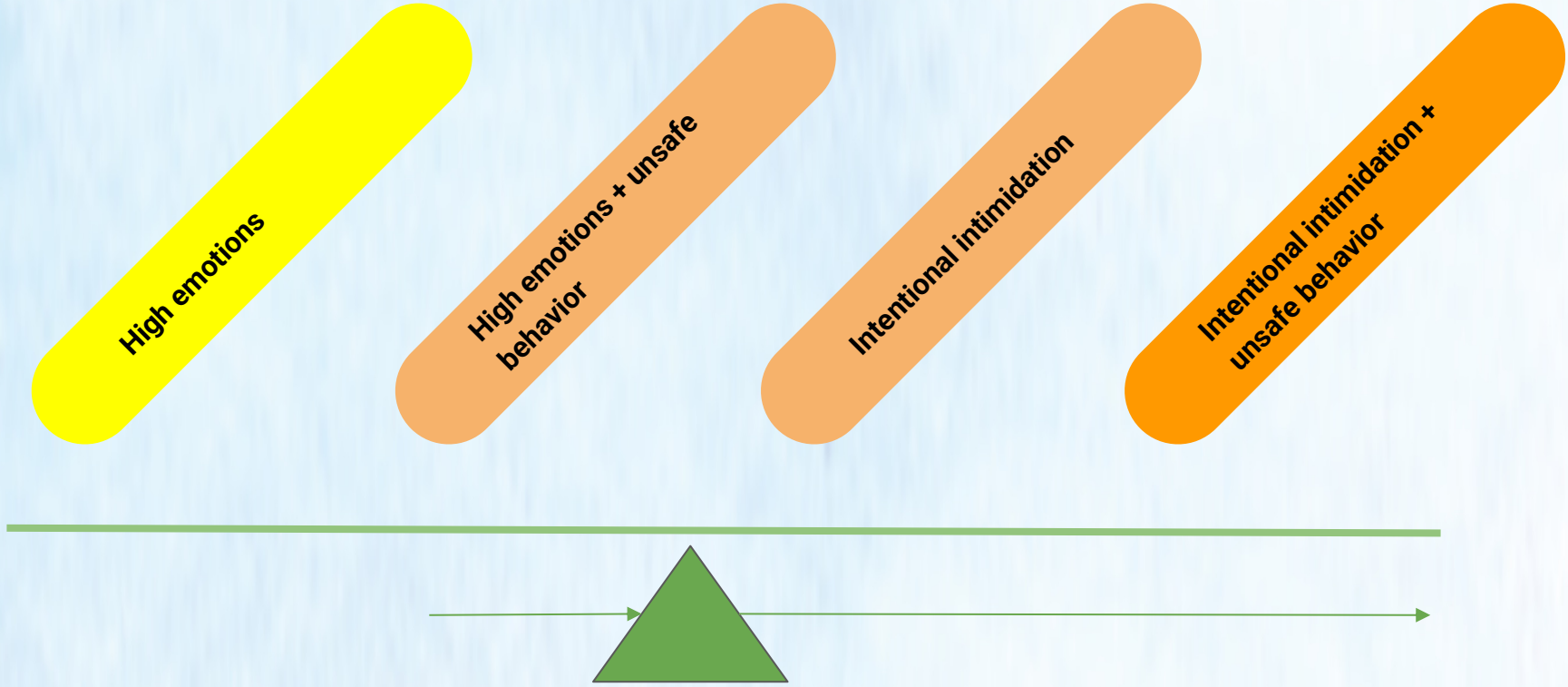
- Less verbal or talking responses
- Consciously attend to breathing, relaxing
- Caring, nurturing self-talk
- Brief meditative moment, prayer, or moment of silence
- Validation and affirmation from people around you
- More tactile or physical, in the body responses
- Co-regulation with people you have some level of trust with
- Making necessary changes to the environment
- Noticing what is in the here and now
- Breathing with affirmation
- Drinking water, staying hydrated
- Eating crunchy, tactile snacks like celery

NOT Helpful When Lids Are Flipped:

- Avoid lots of verbal processing and verbal requests
- Avoid negotiating, asking questions, future planning
- Avoid offering rewards and consequences
- Avoid saying “calm down, stay calm, be calm



When Co-regulation Isn't Safe



Recognizing the Stages of Escalation: The Orange Zone



Questioning

Distinguish between real questions and a challenge questions. Orange zone challenge questions are not true questions. They are meant to get you off-track or be in avoidance of the real issue.

Refusal

A slight change in behavior, such as refusing to agree to a boundary that has been set, even if it was previously agreed upon.

Outburst

A sudden release of a strong emotional reaction.

Intimidation

The intention to create fear or force action. Often includes an outburst, or release and becomes verbally and/or non-verbally threatening to staff, participants, or others.

Tension Reduction

At this stage the person may gain rationality or may be scared or embarrassed.

Stage 1: Questioning

Respond to the question calmly and ask your own questions as a follow-up (try to uncover the sticking point). Remember, engaging in dialogue and asking questions also signals you are truly listening.

Work to help them stay on topic and redirect as needed. You may need to restate your initial request or response frequently.

Stage 2: Refusal

Stay on topic and set clear limits.

Clear limits should include: clear choices and be very concise, enforceable, and reasonable.

Be aware of potential power struggles.

Listen and acknowledge - this does not mean you have to agree with their statements.

Anticipate the worst-case scenario (what could be used to cause harm, who needs protection, who needs to be removed, etc.)

Stage 3: Outburst

If possible, allow the person to vent verbally.

Isolate the situation (remove the acting out person or the audience).

When the person takes pause or slows down, state or re-state your directives in a non-threatening manner, be intentional to show compassion, understanding, and reason.

Be clear and concise in your directives and have backup support available, if possible.

Stage 4: Intimidation

Remove those who are in close proximity to the situation.

Be aware of when you should excuse yourself from the situation.

Decrease potential harm by increasing space between yourself and the person.

Remember, during this stage, the person wants to be taken seriously. It is important to take them (and their threats) seriously and not minimize, dismiss, or call their bluff.

If they grab something to use as a weapon, increase space, e.g., slowly back up towards the door, take a few steps back, move behind a chair, or leave the room.

Stage 5: Tension Reduction

It is important to acknowledge and actively process the situation. This may be a process that is done over time, and you may or may not be able to do this with the acting out person.

Your goal is to create closure of the situation and look for positive growth moments.

Grounding Exercise

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Small Breakout Group

- Have you ever experienced these stages with program participants?
- How did you regain a sense of regulation and safety for yourself?
- What did you learn from the stages of escalation in the orange zone?



When Someone Is In The Orange Zone:

- Put your lid down as best you can.
- Speak clearly & concisely - less words is better.
- You don't need to change emotions & opinions; you just need to increase safety.
- Stick to your limits/boundaries, but make sure they are reasonable.
- Put space between yourself and the person as needed.



Caring For Self After An Escalated Incident:

- How is my breathing right now? Do I need to slow my breath, take deeper breaths?
- What does my body needs right now? Bathroom, hydration, fresh air, etc.
- What would help me get grounded right now? How can I do that now?
- Who on my team can support me if I need to talk with someone about what happened while at work?
- What is my self-care plan for after work? What do I need to now to secure that plan? For example, secure childcare, pass off a task or chore to someone else.

Caring For Colleagues After An Escalated Incident

- When can I realistically connect with colleagues who were also involved in the situation?
- Do I need to do anything for myself before I check in with them?
- Can we take a break together and do something grounding during that time, like walking and talking?
- What do my colleagues need to regain a sense of balance, and can we mutually support each other?



Caring For Children, Youth & All Bystanders:

- After an incident, focus on what first comes to heart and mind when you think about participants who were impacted.
- Ask yourself and/or them what they need at this moment.
- Seek support from a colleague if you need backup to meet the needs of those impacted.
- Remember to be less verbal and focus more on putting lids down.
- Remind participants that everyone is working together to increase safety and you can talk about what happened at a later time if they need space.



Considerations for Equity & Trauma Informed Practice: Developing Your Lens

- We all benefit from universally supportive approaches grounded in trauma-informed care and equity.
- Being trauma-informed requires us to challenge inequity within ourselves and our systems.
- Everyone's lid flips; it's not wrong, bad, or weird - it's biology.
- Trusting relationships can flourish when we embrace equity and trauma-informed approaches together.



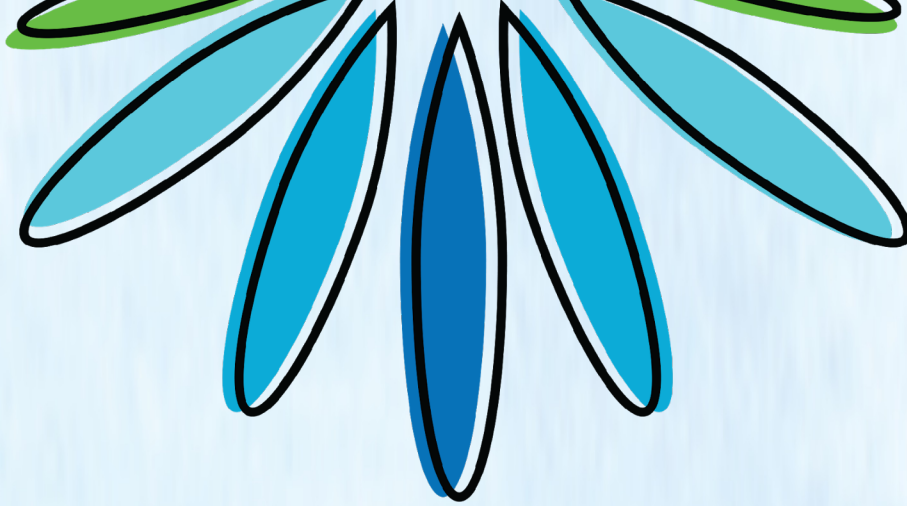
- You don't need to know someone's history with oppression and trauma to be equitable & trauma informed.
- Being punitive often leads to power struggles, damaging trust, and challenging equitable, trauma-informed practices.
- An equitable & trauma-informed environment operates from the truth that there is the potential for repair after harm which we strive for that in all we do.

Take It With You



In the chat, share one or two things from this session that you will take with you in to your supervised visitation work.





Thank you for participating.

We are here to provide you support - please contact us anytime!

Amrita Hanjrah (she/her): amrita@inspireactionforsocialchange.org

Beth McNamara (she/her): beth@inspireactionforsocialchange.org

Jennifer Rose (she/her): jennifer@inspireactionforsocialchange.org