

Internal States and Dysregulation within Early Childhood

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Housekeeping



PLEASE PARTICIPATE
IN POLLS AND THE
OPEN-ENDED
QUESTIONS.



PLEASE COMPLETE
THE EXIT SURVEY AT
THE END OF
TODAY'S WEBINAR
VIA THE QR CODE.
THE SURVEY LINK
WILL ALSO BE
EMAILED AN HOUR
AFTER TODAY'S
WEBINAR.

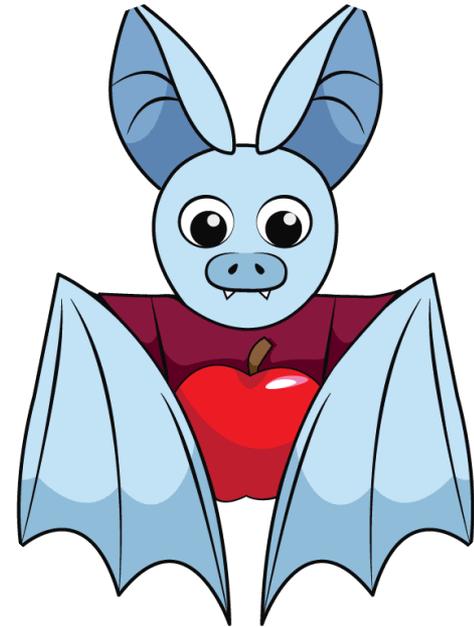


IF YOU WISH TO
EARN A CPDU HOUR,
COMPLETE THE ISBE
EVALUATION OF
PROFESSIONAL
DEVELOPMENT AND
RETURN IT TO ME. IT
WILL BE EMAILED
TOMORROW.



Poll #1: Who are you?

1. Special Education Teacher
2. General Education Teacher
3. Related Service Personnel
4. Administrator
5. Other role



Agenda

- Welcome
- Overview of BAT project
- Backpacks
- Overview of Brain States
- Application of Brain States
- Supports and strategies
- Self-reflection and Q&A
- Exit survey



Behavior Assessment Training (BAT) project



The Special Education Behavior Assessment Training Project will provide comprehensive, professional learning for special education personnel on culturally responsive Functional Behavior Assessment (FBA) practices and Behavior Intervention Plans (BIPs) for students across all grade levels identified as having a disability in one or more of the 13 categories specified in IDEA...Additionally, the successful Offeror will coordinate with ISBE on mandate 105 ILCS5/14-8.05, which requires ISBE to **develop and implement State-level guidelines on culturally responsive, evidence-based behavior interventions for students across all grade levels** identified as having a disability in one or more of the 13 disability categories specified in IDEA.



BAT project continued

- Awareness of culturally responsive behavioral processes including as related to the FBA/BIP process
- Awareness of personal lens related to behavior and need for ongoing examination and reflection
- Integrate resources to support data collection and strategies to respond to challenging behavior



What's in a young child's backpack?

- Prenatal course
- Birth and perinatal history
- Positive and negative experiences with parents, caregivers, siblings, and extended family
- Developmental skills, risk factors, delays, and/or disability
- Home environment and community related to access to medical care, living conditions, poverty etc.



What's in your backpack?

- Childhood experiences
- Knowledge and skills in discipline
- Strategies and practices
- Home environment and community
- Experiences with family members, colleagues and friends
- Negative experiences (past, current)
- Your own biases...



What are Brain States?

Different terms, often used interchangeably:

- Brain states
- Executive functioning
- Self-regulation



Regardless of term, all focus on gaining insight into the how and why of behavior, which, in turn, assists us to support students in classrooms and other school-based settings and, also better understand our responses to challenging behaviors; directly relates to conducting FBAs and developing behavior plans/BIPs.

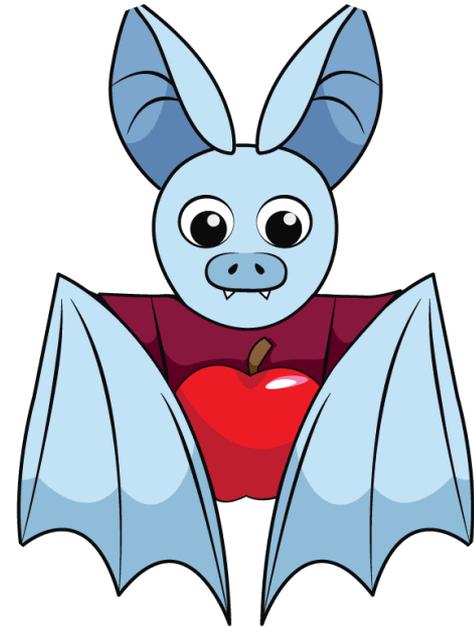
Behavior Plans compared with BIPs

- Most young children do not display such severe behavior to require an IEP; most preschoolers and primary aged children receive support for speech and language delays, developmental delay and autism
- Behavior strategies and interventions are used in daily activities and routines; need to be intentional and consistent
- Behavior plans are informal and not part of an IEP; BIPs are a part of IEPs (legal, binding document)

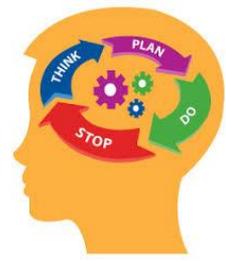


Poll #2: How familiar are you with Brain States?

1. Very familiar
2. Familiar
3. Somewhat familiar
4. Minimally familiar
5. Not at all



Conceptualization of Brain States



- A set of cognitive processes that are necessary for the cognitive control of behavior: selecting and successfully monitoring behaviors that facilitate the attainment of goals.
- Key executive functions include Impulse control, Emotional Control, Flexible Thinking, Working Memory, Self-Monitoring, Planning and Prioritizing, Task Initiation, and Organization.
- Children aren't born with these skills but the potential to develop them. **Some young children may need more support than others to develop these skills.** In other situations, if children do not get what they need from their relationships with adults and/or in their environments; adverse environments (e.g., neglect, abuse, and/or violence) impair the development of executive function.
- **Not fully developed until approximately 27 years of age.**



Several interrelated topics as related to Brain States

- Adult's experiences and background
- Adverse Childhood Experiences (ACEs)
- Awareness of cognitive processes including self-regulation
- Supports and strategies to assist students demonstrating challenging behavior



Key Factors to Consider

- Determine “where” a young child is in Maslow’s hierarchy of needs
- Family situation/circumstances
- Program attendance
- Developmental delay or diagnosed disability
- Cultural and community norms
- Health and medical needs



Adverse Childhood Experiences (ACEs) can impact a young child's behavior

This questionnaire was used to assess participants in the original Adverse Childhood Experiences study, conducted by CDC and Kaiser Permanente and published in 1998. This widely used and validated tool is used by trained providers to measure the impact of childhood abuse and neglect upon health and well-being.

<https://www.traumainformedcare.chcs.org/resource/original-ace-questionnaire/>

The ACE Scale contains two subscales. The *Childhood Abuse* subscale contains eight questions about exposure to psychological, physical abuse, and sexual abuse. The *Exposure to Household Dysfunction* subscale includes nine questions about exposure to substance abuse, mental illness, domestic abuse, and criminal behavior in the household.

<https://sparqtools.org/mobility-measure/adverse-childhood-experiences-ace/#all-survey-questions>

Finding Your ACE Score



While you were growing up, during your first 18 years of life:

1. Did a parent or other adult in the household **often** or **very often**...
Swear at you, insult you, put you down, or humiliate you?
or
Act in a way that made you afraid that you might be physically hurt?
Yes No If yes enter 1 _____
2. Did a parent or other adult in the household **often** or **very often**...
Push, grab, slap, or throw something at you?
or
Ever hit you so hard that you had marks or were injured?
Yes No If yes enter 1 _____
3. Did an adult or person at least 5 years older than you **ever**...
Touch or fondle you or have you touch their body in a sexual way?
or
Attempt or actually have oral, anal, or vaginal intercourse with you?
Yes No If yes enter 1 _____
4. Did you **often** or **very often** feel that...
No one in your family loved you or thought you were important or special?
or
Your family didn't look out for each other, feel close to each other, or support each other?
Yes No If yes enter 1 _____
5. Did you **often** or **very often** feel that...
You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you?
or
Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?
Yes No If yes enter 1 _____
6. Were your parents **ever** separated or divorced?
Yes No If yes enter 1 _____
7. Was your mother or stepmother:
Often or **very often** pushed, grabbed, slapped, or had something thrown at her?
or
Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard?
or
Ever repeatedly hit at least a few minutes or threatened with a gun or knife?
Yes No If yes enter 1 _____
8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?
Yes No If yes enter 1 _____
9. Was a household member depressed or mentally ill, or did a household member attempt suicide?
Yes No If yes enter 1 _____
10. Did a household member go to prison?
Yes No If yes enter 1 _____

Now add up your "Yes" answers: _____ This is your ACE Score.

Adapted from: https://www.acestudy.org/files/ACE_Score_Distribution.pdf, 09/24/09/04/09

Think Trauma: A Training for Staff in Juvenile Justice Residential Settings
Module Four - Finding Your ACE Score



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Positive Childhood Experiences (links with ACEs)

Examples of Positive Childhood Experiences

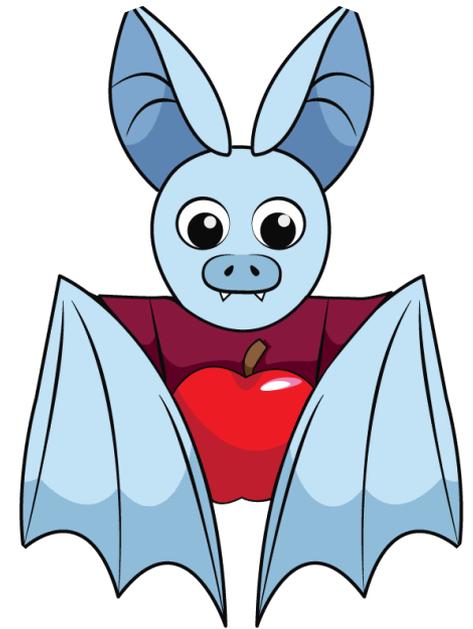
- High quality early learning programs
- Assist to locate affordable preschool and child care programs
- Teach how to handle conflict
- Assist to manage negative feelings
- Assist to handle pressure from peers
- School or community mentoring programs
- After school activities

<https://dph.illinois.gov/topics-services/life-stages-populations/maternal-child-family-health-services/child-health/adverse-childhood-experiences.html>



Poll #3: How familiar is this information?

1. Very, I know a great deal about contextual factors and influences
2. Familiar with some information
3. Minimal familiarity
4. Not at all



Brain States as related to three levels of a young child's behavior

Behavior

- Interferes With Learning
- Interferes With Engagement in Activities and Routines
- **Developmentally Appropriate Strategies Are Effective**

Challenging Behavior

- Repeated Pattern of Behavior
- Interferes With Learning and Engagement Of Child And Others
- **Developmentally Appropriate Strategies Are Effective With Intentional and Consistent Support**

Persistent Challenging Behavior

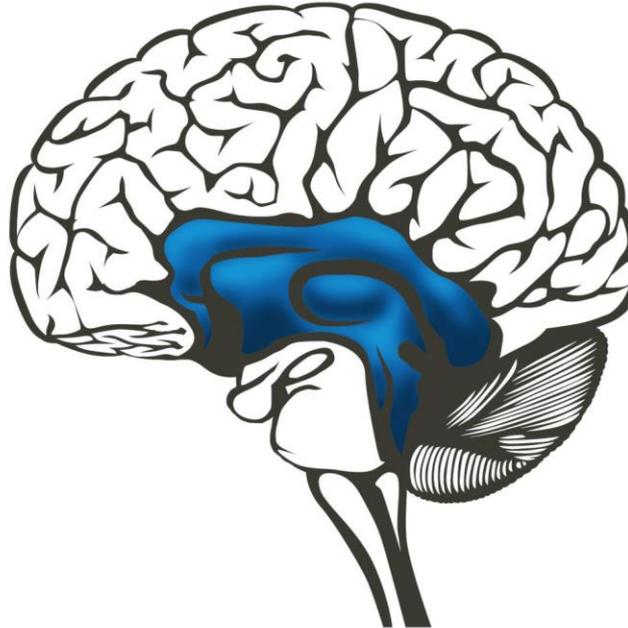
- **Not Responsive To Developmentally Appropriate Strategies**
- **May Need Additional Outside Support To Decrease Behaviors**



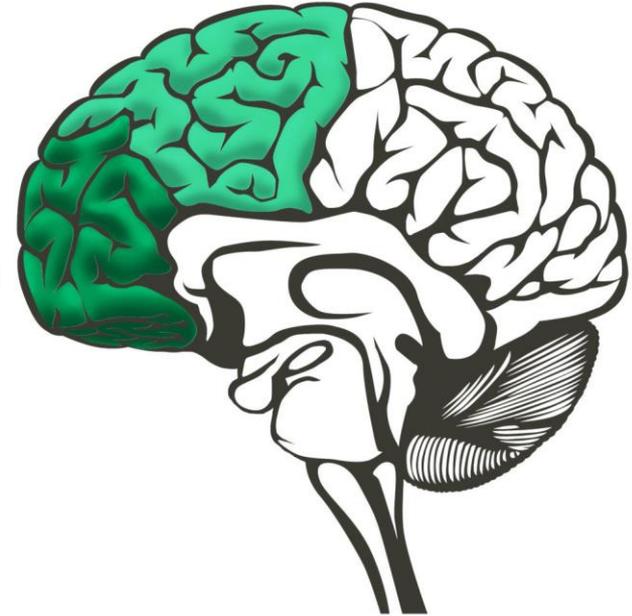
Internal States (Becky Bailey) / Brain States



Survival



Emotional



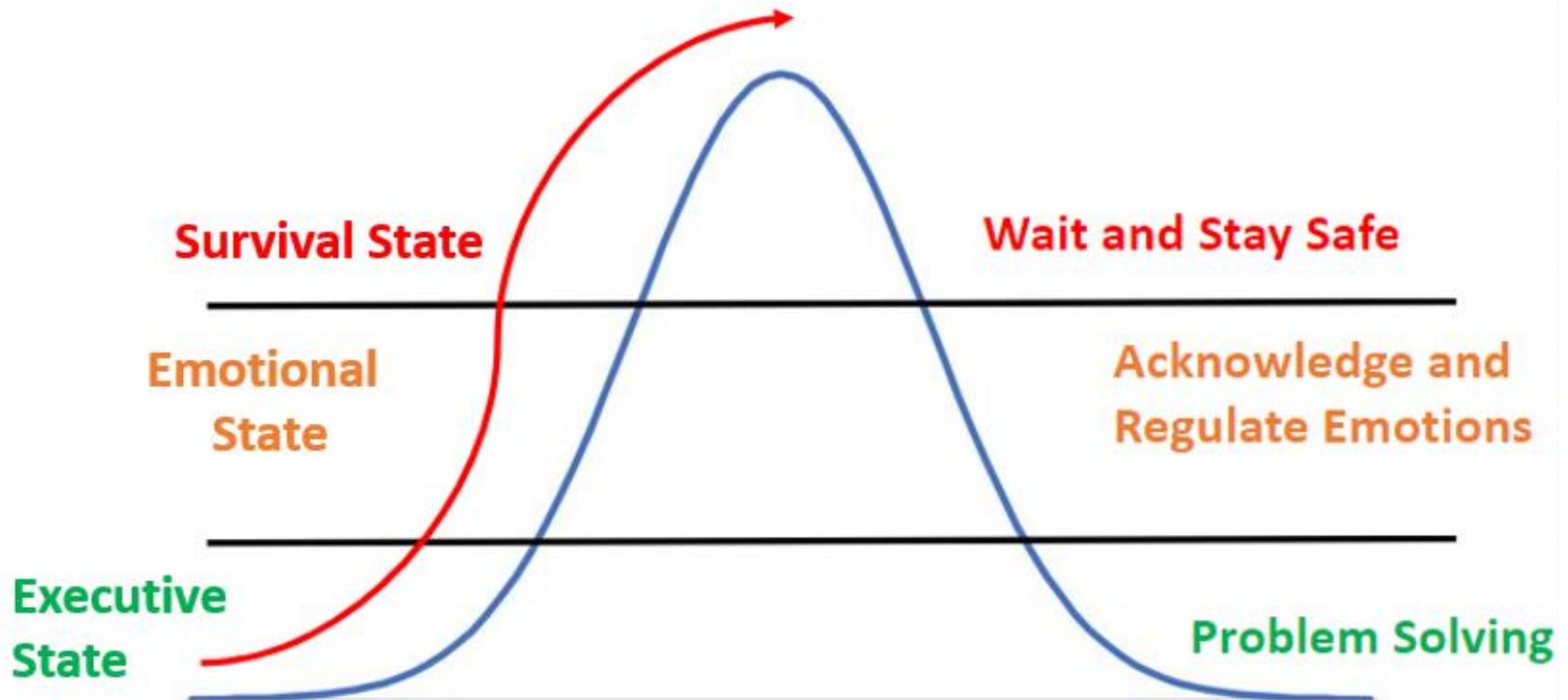
Executive



State	Behaviors May Look Like...
Survival	Fight by hitting, pushing, kicking, spitting, screaming Flight by running away, hiding, withdrawing Freeze by zoning out, shutting down Fawn by giving up, giving in, surrendering
Emotional	Blaming, back-talking, name-calling, social exclusion, social aggression, guilt, attention-seeking, clinging, neediness, relationship resistance, perfectionism
Executive	Problem-solving, empathy, win-win solutions, willingness, reflection, conflict resolution, managing emotions, making plans



INTERNAL STATES & THE ESCALATION CYCLE



Survival State Strategies

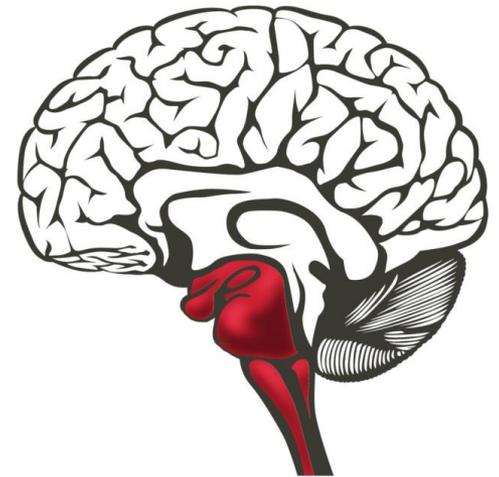
Before addressing a young child; check in with yourself; how are you feeling?

Limit verbal supports

Provide physical support

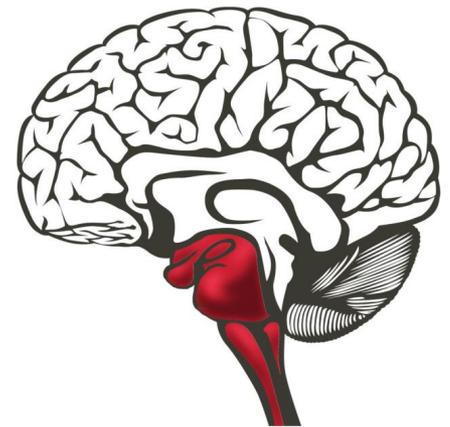
If able/needed, provide emotional support to others

Call for assistance



What **not** to do

Only intervene if it becomes physical
Jump right into the situation without seeing where we are first; **need to regulate own** internal state
Let yourself get escalated
Expect compliance; command and demand approach
Thinking you can handle it all on your own



Emotional State Strategies

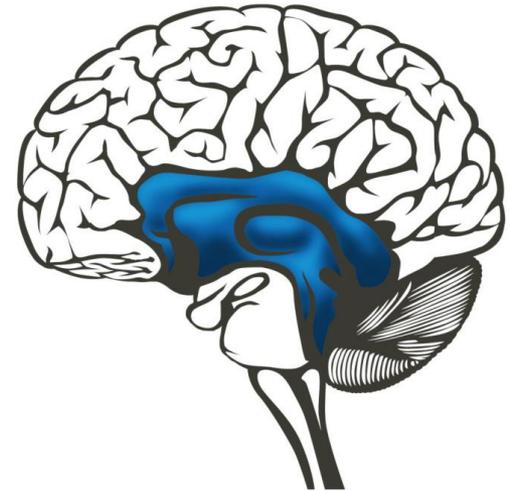
Meet emotions with empathy

Natural consequences

Provide two developmentally appropriate choices

Verbal encouragement and physical comfort

Encourage re-engagement



What **not** to do

Argue with the student

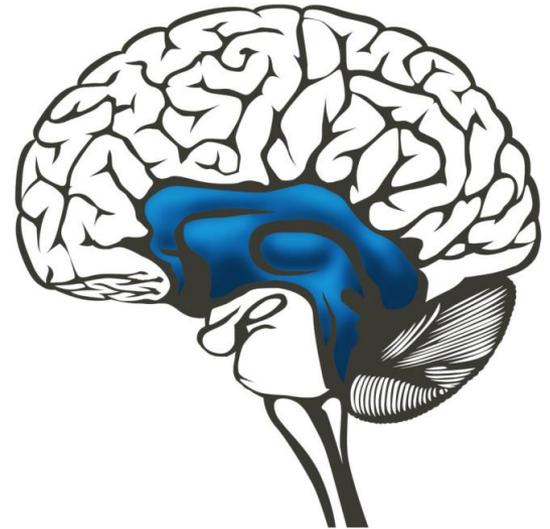
Make a young child apologize

Provide an illogical choice
or consequence

Provide physical support (unless
necessary)

Blame/shame student for their emotions

Expect compliance; command and
demand approach



Executive State Strategies

Focus on replacement skills

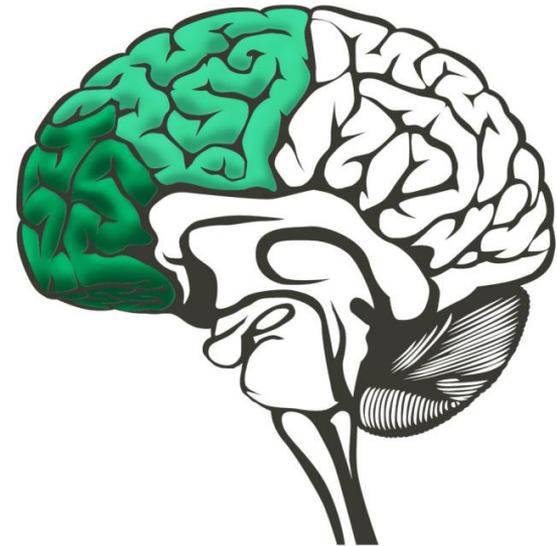
Redirection

Planned ignoring

Natural consequence

Logical consequence with
behavioral expectation

Assist with problem solving skills



Poll #4: How do you typically respond to student behavior?

1. Survival state
2. Emotional state
3. Executive state



Reframing Our Thoughts as related to Brain States

Deficit Thinking

“Brent ruined my lesson. He kept yelling out and I had to stop my story 5 times.”

Strength-Based Thinking

Focusing on what the young child can do.

Reframing

“When Brent yelled out, he was answering questions from the lesson. He must’ve been interested in the content.”

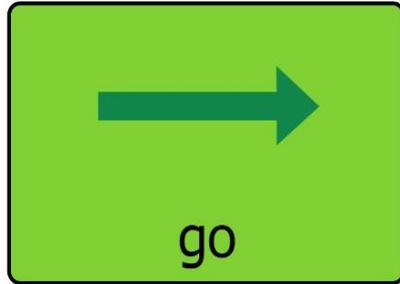
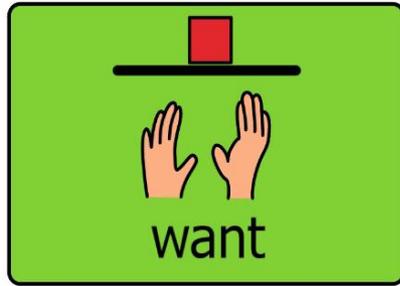
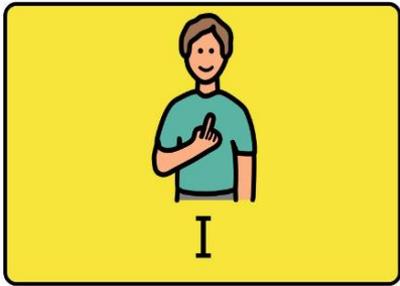




Supports and strategies related to Brain States and FBAs and BIPs

- Use easy to understand and appropriate language
- State instructions positively and calmly
- Break down and/or repeat multi-step instructions
- Provide multiple, advance warnings for transitions





Supports and strategies continued

Provide behavioral expectations in visual form

- Visual cues
- Visual prompts including pointing, gestures, and sign language
- Visual schedule
 - All or some students
 - Individual students
- Choice cards
- Core boards





Supports and strategies continued

- Environmental changes
 - Layout of space
 - Materials
 - Lighting / Noise level
- Preferential seating
- Modeling
- Partial physical assistance
- Hand over hand assistance



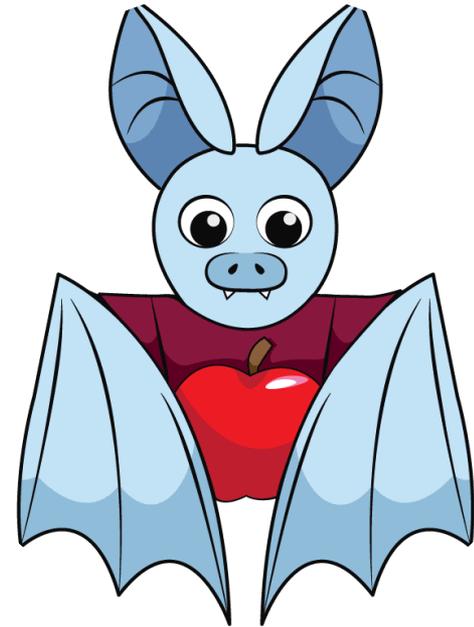
Provide Support by Monitoring Behavior

- Informal observations
- Formal observations
- Coaching and mentoring
- Provide resources and follow-up
- Ongoing self-reflection and evaluation including assisting child to self-monitor



Poll #5: How likely is it you will implement one or more of these supports and strategies?

1. Very likely
2. Most likely
3. Somewhat likely
4. Not likely



Brain States and conducting FBAs

- Need to be objective and neutral when observing and collecting data (e.g., no negative expectations)
- Be aware of observing “typical” behavior and accompanying assumptions
- Include collecting data related to not complying, aggression etc. to identifying preferred tasks, interactions with peers and adults and key skills for current and future success to understand the “why” of challenging behavior



Brain States and developing Behavior Plans/BIPs

- Integrate self-regulation into BIPs
- Teaching replacement behavior(s) is also opportunities to build and nurture relationships; change response to attention seeking behavior(s)
- Develop plan with active involvement of child
- Executive functioning encompasses skills young children have not developed including perspective taking, impulse control, and cognitive flexibility.
- Know your triggers (survival and emotional states)



Self-reflection

- What are your thoughts about Brain States and implications for the young children you work with?
- Which supports and strategies are familiar and already in use?
- Which supports and strategies are new/novel/different? Which will you put into use?
- What are your thoughts about linking information about Brain States with the FBA/BIP process?



Q & A



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Taken the exit survey? We hear you!

Participants valued.....

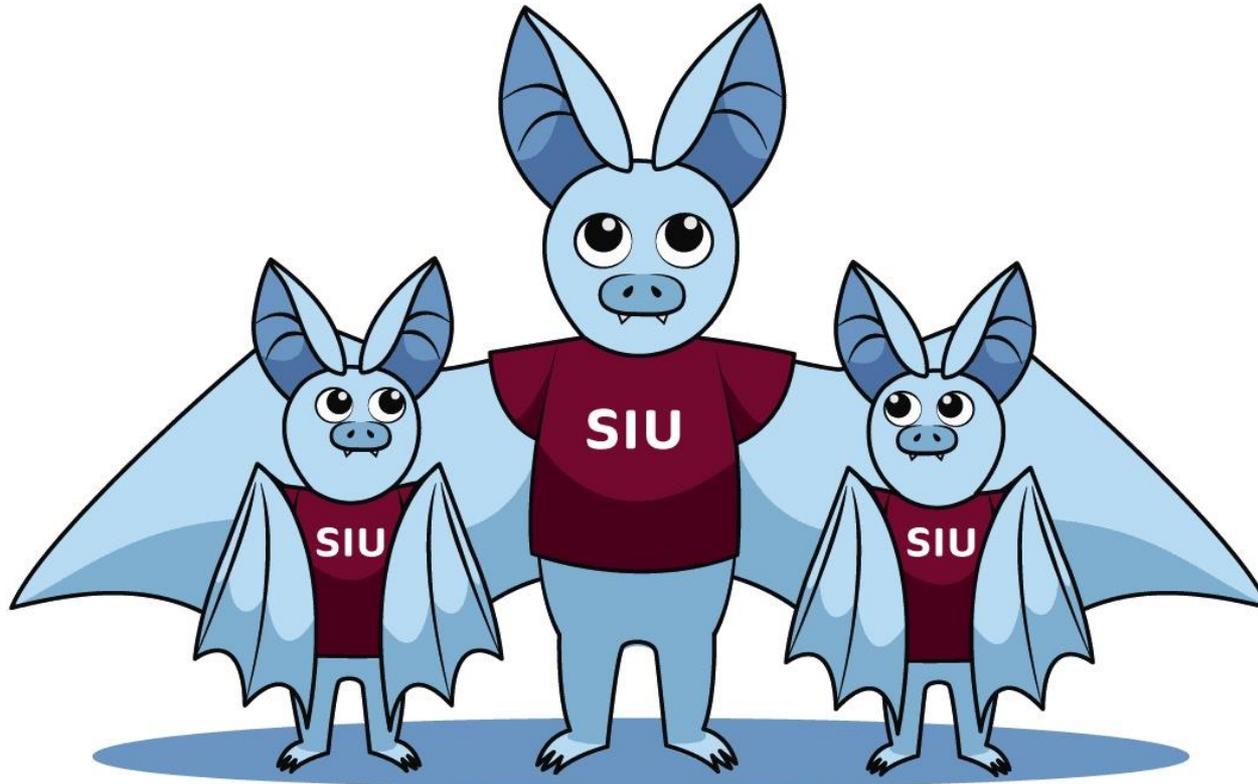
Guest speakers, information and restorative practices, the emphasis on addressing/acknowledging biases, and information and writing BIPs/FBAs.

Due to the content-heavy nature of these webinars, we are not able to incorporate participation/interaction opportunities beyond the polls and chat questions. However, we know it is important for participants to play an active role in their professional development.

Please complete the Exit Survey! Thanks.



Thank you!



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