

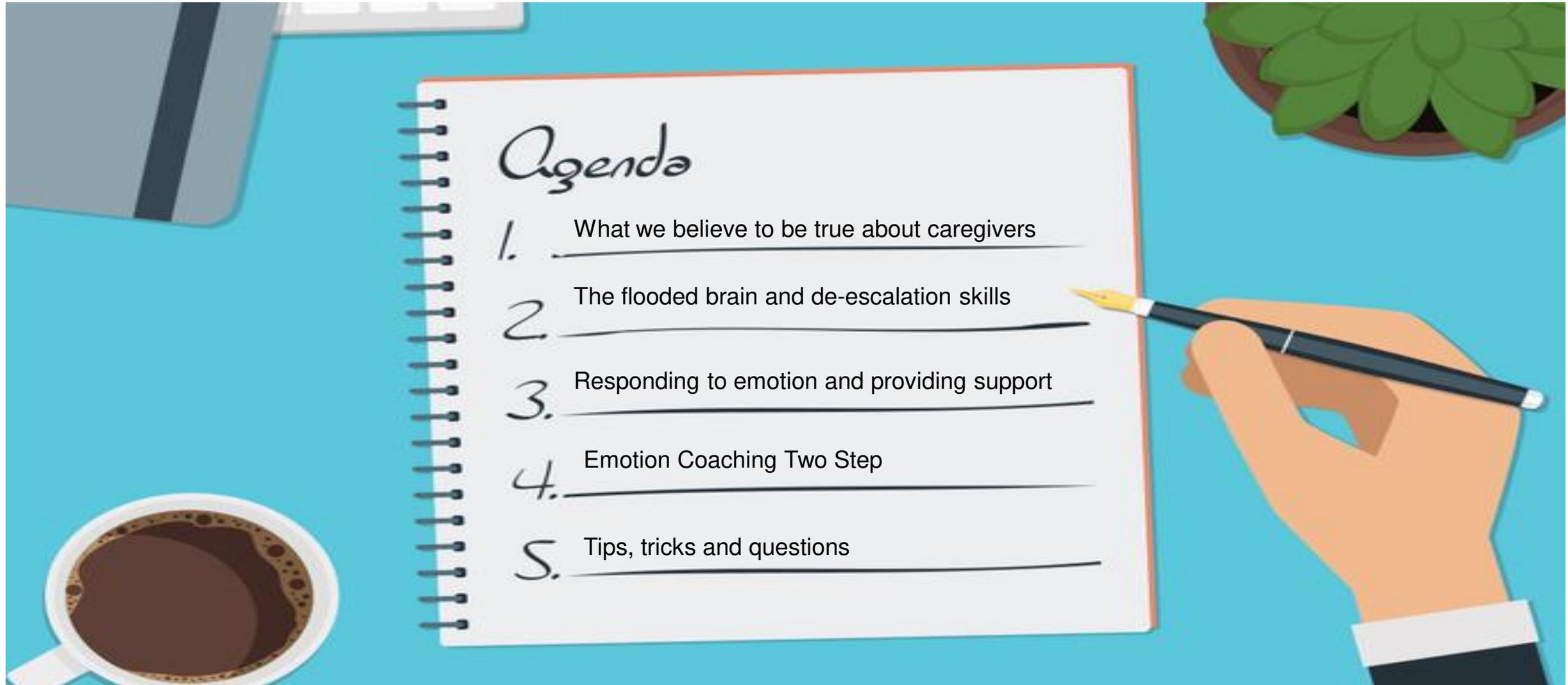


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Emotion Coaching: Skills You Can Use Now!

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Agenda

1. What we believe to be true about caregivers
2. The flooded brain and de-escalation skills
3. Responding to emotion and providing support
4. Emotion Coaching Two Step
5. Tips, tricks and questions

What we know...



- There is no such thing as an “unmotivated parent/caregiver” who “doesn’t get it”
- Caregivers are often fueled by unprocessed or maladaptive emotion (shame, blame, hopelessness, helplessness, complicated grief/resentment) and MORE motivated to avoid something “worse” from happening
- Clients that have family/supportive other involvement in treatment and recovery have better outcomes related to full, sustained recovery

What we know...



- Mental Health issues have a huge impact on families
- Caregivers DO NOT cause mental health issues. Causes are FAR more complex. **Caregivers did the best they could with the information/resources they had at the time**
- Difficulties with emotion processing (individual and family based) can contribute to / feed the mental health issues, but more importantly they are a way to reduce caregiver burden

We are committed to teaching you skills and supporting you to become your loved one's emotional co-pilot until they can pilot their emotions on their own. This is referred to as emotion coaching.



What happens in the brain when flooded with emotion



- Limbic System including the Amygdala (Fight, Flight, Freeze) is activated
- Frontal Cortex (reason, decision making) shuts down
- Thinking becomes very rigid, inflexible, black and white or circular
- No new learning can take place
- Limited access to knowledge/tools they have

When we use emotion de-escalation skills...



- **In the moment:** Caregiver's verbal and non-verbal signals trigger a release of calming neurochemicals (oxytocin) from the hypothalamus which then bind to receptors in the emotional center of the brain (limbic system)
- **Over time:** These efforts promote brain building activity to create connections between the frontal lobe and the limbic system.
- Caregivers can act as temporary co-regulators while loved one increases self-regulation capacity



Your loved one may need more emotional support than others because...

- ✓ They are younger (or their brain isn't fully developed) That means their response system will be less sophisticated and therefore more likely to go off-line more often
- ✓ Their amygdala is "rapid firing." In other words, their internal alarm system is a little more sensitive than others'
- ✓ They have fewer receptors for calming neurochemical (oxytocin) in their limbic system
- ✓ The Eating Disorder may be disrupting the normal functioning of their brain
- ✓ They may be a Super Feeler

Super-feelers

- Wired this way
- Experience emotions very intensely
- Can present as explosive or shut down/silent or very agreeable
- More aware of the emotions of others than their own emotions
- High sensitivity to perceived threat in environment (might become more upset if someone raises their voice)
- Can feel very alone as others will struggle to understand their emotional experience
- May look for ways to reduce pain/avoid emotions- often with unhealthy behavior
- Can be more vulnerable to developing mental illness, including eating disorders
- Need support from their environment to manage their emotions until they develop skills to do so
- Are highly likely to succeed in the caring professions and perform well in the world once they learn to manage the emotions they sense and feel



How to we respond to emotion and how do
we provide support?

Animal Models

Adapted from Janet Treasure, PhD

- Mental Health issues and your own emotions, emotional past, emotional style can exaggerate normal caregiving patterns to the point that they can inadvertently maintain the problem
- Not related to general parenting; think about your most stressful/distressing time with your loved one in the current moment
- Helpful language to have to support your co-caregiver and provides awareness so we can change the way we respond to emotion and the way we provide care.



Response to Emotion (#1)

How we respond to stressful situations/ loved one's distress/resistance



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Jellyfish

May struggle to keep emotions in check. Can be openly distressed. A little wobbly.

Response to Emotion (#2)

How we respond to stressful situations/ loved one's distress/resistance



Ostrich

Avoids seeing, thinking & dealing with emotions

(may channel their energy to support family
“practically” to try and make it go away)



Balance of Emotional Responsiveness



Too much emotion



Warmth and Calm
Caregiver support, interest
and affirmation increases
loved one's confidence
that change is possible



Too little emotion



Support Style (#1)

How we provide caregiving around stressful situations/loved one's distress/resistance



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Kangaroo

On the overprotective side; desire to protect loved one from the challenges of life by putting them in their pouch, doing things for them

Support Style (#2)

How we provide caregiving around stressful situations/loved one's distress/resistance



Rhinoceros

On the controlling side; gives advice and arguments for change; pushes for growth and change



Balance of Support Styles

Too much
sympathy &
management



Just enough direction &
support
Follow when possible, take charge
when necessary



Too much control &
direction



Which animal are you?

- Jellyfish with a pouch?
- Rhino with its head in the sand?
- 🚩 If part of a couple or co-parent, you will also accidentally reinforce each other's dominant styles. This can be particularly problematic in strained relationships and blended families

Check in...



What do you find the most challenging?

- Crying, despair
- Angry outbursts
- Swearing at you
- Rejection (go away)
- Shutting down
- Lying
- Self-Harm
- Panic attacks
- Refusing to eat
- Threats of suicide
- Others?

What's your first impulse?



Mom/Dad/Partner/Spouse/Friend-
“I feel so sad. Nobody likes me.”



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Why would we avoid our loved one's feelings in this way?

- ❖ We want to free them from emotional pain
- ❖ Their emotional pain causes us emotional pain (and we avoid emotions too)
- ❖ We don't know what else to say. We surely don't want to make their pain worse
- ❖ We don't agree with or understand the pain
- ❖ We weren't taught how to respond to emotional pain such as vulnerability, anger, etc.

And yet... Emotion Basics

- Emotions are fundamentally adaptive and aid in survival
- How? They are an alarm system providing information about the self and the world
- Help us to survive by providing an efficient., automatic way of responding rapidly to important situations (prepare us for action)



Thirsty anyone?

Each feeling comes with hormones and neurochemicals. Listening to the emotion reduces the stress on the body by bringing the systems back to baseline.

In other words, feelings need to be felt/expressed to “run their course” and resume flexibility

Distress is not the enemy!



Emotion Coaching

Emotion is like an elevator and the door to reason, logic & problem-solving is on the ground floor. Emotion coaching is the way down to the ground floor.



Key Outcomes



- Increase in cooperation (including with limits)
- Avoidance of escalation
- Decrease in urges
- De-escalation
- Regulation
- Internalization

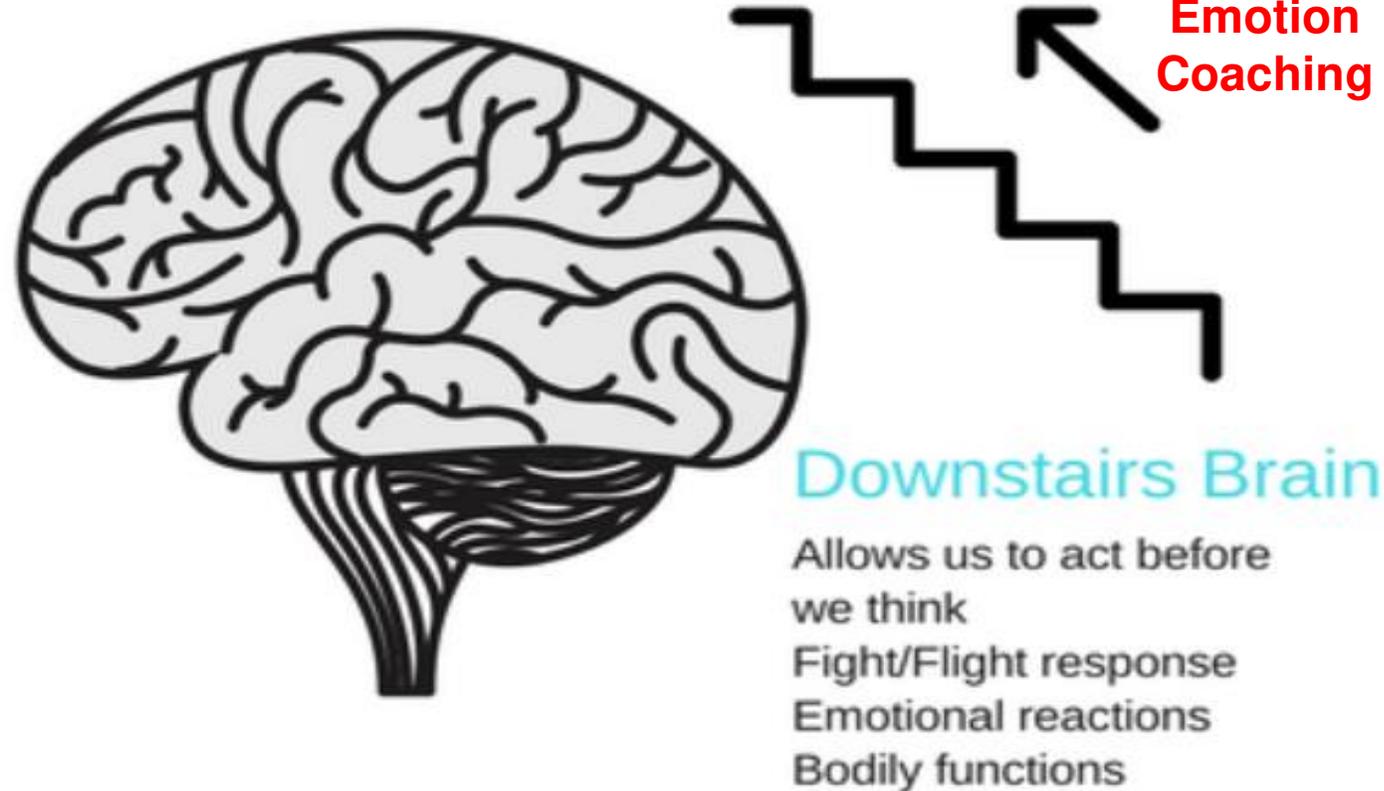
For eating disorders

- Restores caregiver/loved one relationship and open communication
- Gives loved one skills outside of their eating disorder to cope with painful emotions

Another way to look at it...

Upstairs Brain

Allows us to think before we act
Decision-making
Control over emotions & body
Focus/concentration
Empathy
Self awareness



Downstairs Brain

Allows us to act before we think
Fight/Flight response
Emotional reactions
Bodily functions

Source: Siegel & Bryson "The Whole Brain Child"

Sophisticate scientific evidence has concluded...

NEVER,
in the history of calming
down has anyone ever
calmed down by being
told to calm down!



Emotion Coaching is a two-step process



Step 1: **Validation** of the emotional experience

(convey understanding of their experience & prove you “get it”)

Step 2: Providing **Support** (emotional, practical or both)

Validation Myth Busting

Our definition is not:

- Cheerleading
- Reassurance
- Problem-solving
- Using logic to correct



It's helpful to know your "go-to"!

Why is validating so hard?



The problem is rarely the problem- rather it is the **emotion** associated with the situation/ event that cause the most difficulty



Because we are drawn to validate only what we feel is true



We are socially/culturally conditioned to offer support first

Next, recognize another socially conditioned impulse...

I can understand why you might think/feel/want _____

PAUSE!

Which 3-letter word are you now tempted to
utter?



“But” indicates that it is inconvenient to ME for YOU to be feeling the way you do

Replacing But with Because



“I can understand why you might feel/think/want (____) but...”

Is transformed into:

**“I can understand why you might feel/think/want (____)
BECAUSE _____ and BECAUSE _____ and BECAUSE
_____.”**

When the external environment mirrors the internal experience, the alarm bells in the brain reduce in intensity

Step 2. Support



Emotional Support

- Comfort
- Reassurance
- Togetherness
- Hope
- Belief

Practical Support

- Distraction
- Redirection
- Exposure
- Problem-solve
- Setting Limits
- Take over



I can imagine you might feel _____



and because...



because...



and because...

The door is now open for
support/redirection/problem-solving, etc



I know you feel anxious but...



Is transformed into:

I can imagine you might feel anxious, **BECAUSE this is your third treatment admission, and you are fearful that this time will be like the others** and **BECAUSE you really don't want to have to leave school and all your friends** and **BECAUSE it can feel so scary to think about opening up to a new treatment team**. I want you to know that I hold so much hope for your recovery and am so proud of your decision to take this difficult step. What can I do to support you right now?

“I’m not going to eat my snack.”

I can imagine you wouldn’t want to eat right now **because your food rules tell you that you shouldn’t eat certain things and because eating is stressful for you and because restricting has been your way of managing pain and stress for so long.** I believe in you and while you are having your snack, we can play cards or have the music on, whichever you prefer.

“I hate my therapist. She is making me do all this stuff I don’t want to do so I’m discharging. I’m done”

I can understand why you wouldn’t want to go to therapy **because it might feel like there’s no way a stranger could possibly understand you and because it might be uncomfortable and embarrassing to have that kind of attention focused on you and because it might feel hard to trust that they actually care.** I’m holding on to hope that it can help. Maybe you could share your concerns with your therapist and see how it goes?

“I’m disgusting”

I could understand why you feel disgusting **because you feel best when you’re restricting and because your clothes aren’t fitting the same as they used to and because your body feels so uncomfortable to be in right now**. I see how hard this is for you and I’m here for you. Let’s go snuggle on the couch and we can watch that show you’ve been telling me about.

Validating Anger

Becoming a vessel for your loved one's anger is an incredibly powerful tool for healing

Metaphor of the balloon...

- Need to let the air out of the balloon using Emotion Coaching
- Same formula + meeting the other's volume, tone and energy
- Calms the brain and leads to more flexibility
- Helps to transition from anger to vulnerability (more productive zone)



“I don’t need your help, leave me alone”

I can imagine why you would be so angry with me **because it feels like we aren’t listening to you or respecting your perspective** (said with energy) and **because you want things to be different now** (said with energy) and **because we haven’t always been there for you in the ways you’ve needed, wanted and deserved** (said with softness). Your anger is valid and it’s ok that you’re mad. Why don’t we each take 10 minutes to cool down and try this conversation again.

- ❖ The most activating of all the “states”
- ❖ We are social beings, when the person with whom we are interacting has a “still face” it is the most upsetting, triggering and dysregulating
- ❖ Important to have skills to break through the wall

Validating Silence



Validate **(remember, no questions)**

First validate the silence (i.e. the fact that s/he is shut down, referencing possibilities related to the other, the relationship and the self)

Then validate the various underlying emotions: fear, anger, hopelessness, sadness, loneliness, etc

Meet the need **“I can just imagine what you need is...”**

- ✓ Space
- ✓ Time
- ✓ No pressure
- ✓ For me to be there no matter what



silence

I can understand why you wouldn't want to talk with me right now **because you don't trust me** and **because I haven't always responded in helpful ways in the past** and **because it would be hard to feel exposed**. I can just imagine what you need right now is to know there is no pressure to talk. Let's take a 30-minute break and try again.

Practical Tips



- Remember the baseline- it doesn't need to be perfect
- It is a targeted strategy with heart
- Go through the open door, play darts and whack-a-mole
- Use tentative language (best guesses can be better than questions)
- Work towards approaching non-verbals (tone, volume, facial expression, body language)
- Need to practice or your brain will default to your go-to

Take Home Messages



- CONNECT before you REDIRECT
- It's hard to stay in a resistant state
- It's not what you say, it's what you convey (sometimes the words don't even matter so much)
- Feedback is not required for connection and deep emotion processing
- “No pressure, “sticking with it” and “making educated guesses” are the best way to transform the resistance
- You can't always trust your bodily felt sense to determine what's working

How are you feeling?



Common Responses



- This is condoning “bad” or ED behavior.
- I may make it worse by opening the floodgates.
- It might look like I agree with their (incorrect) perception.
- There are limits on my capacity to do this. I’m exhausted. Please don’t ask me to do one more thing.
- I don’t have time to do this.
- I’m thinking about a time I didn’t respond this way and feeling guilt.
- Did my previous responses to emotion cause the ED?



NO!!! You did not cause the eating disorder.

Validating emotion doesn't mean that you agree with it

Co-regulation creates self-regulation

These are advanced parenting skills, not intuitive or common knowledge

Moving into emotion is the quickest way to process it

You don't need to be perfect

1° shift is all we are looking for

You are NOT alone!!



- ❖ We are all conditioned to move away from emotion- not towards it
- ❖ Research has shown that leaning into emotion supports quicker processing of the emotion
- ❖ This technique is simple. Our biggest challenge for implementation will be our own biases against doing so (including our fear of making it worse)
- ❖ Self-knowledge is power



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