Brains, Moods & What To Do’s

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THE BRAIN

the portion of the vertebrate central nervous system enclosed in the skull and continuous with the spinal cord through the foramen magnum that is composed of neurons and supporting and nutritive structures (such as glia) and that integrates sensory information from inside and outside the body in controlling autonomic function (such as heartbeat and respiration), in coordinating and directing correlated motor responses, and in the process of learning
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THE MIND

the element or complex of elements in an individual that feels, perceives, thinks, wills, and especially reasons

the conscious mental events and capabilities in an organism

the organized conscious and unconscious adaptive mental activity of an organism
A holistic view (mind) means that we are interested in engaging and developing the whole person. You can think of this as different levels, physical, emotional, mental and spiritual. It's the concept that the human being is multi-dimensional. We have conscious and unconscious aspects, rational and irrational aspects.
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Greek Philosopher Epictetus

People are disturbed not by things, but by the views we take of them…
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*Shakespeare, Hamlet*

“…for there is nothing either good or bad, but thinking makes it so…”
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Renee Descartes

“...I think, therefore I am...”
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A word about fMRI’s…
Functional magnetic resonance imaging or functional MRI (fMRI) measures brain activity by detecting changes associated with blood flow. This technique relies on the fact that cerebral blood flow and neuronal activation are coupled.
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NEUROSCIENCE

“...understanding the depth of the brain as it relates to varied mental health conditions, allows the counselor to better fit clinically sound therapeutic approaches to the process...”

Understanding a little bit about some functions of the brain and it’s various parts allows parents to recognize what might be typical (normal) behaviors as compared to those considered “concerning”
The limbic system is a group of structures that includes the amygdala (involved with the experiencing of emotions) and the hippocampus (thought to be the center of emotion, memory, and the autonomic nervous system). These areas are important for controlling the emotional response to a given situation.
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Understanding Glial cell

A supportive and connective cell in the central nervous system
Unlike neurons, glial cells do not conduct electrical impulses
The glial cells surround neurons and **provide support for and insulation between them**
Glial cells are the most abundant cell types in the central nervous system
Understanding Neurons

Neurons have specialized projections called dendrites and axons. Dendrites bring information to the cell body and axons take information away from the cell body.

Neurons communicate with each other through an electrochemical process.

Neurons form specialized connections called "synapses" and produce special chemicals called "neurotransmitters" that are released at the synapse.
Neurons “Speak” to Each Other

Many types of neurons, each consisting of specific parts

Those parts play an integral role in receiving, integrating, and sending information across the brain

for counselors — A Systems Approach to thinking… the entire system is considered from multiple views, levels, and interactional exchanges at the basic level
We critters are creatures of habit – in thinking, feeling, and doing. The growth of new neurons creates new habits. The term neuroplasticity refers to “...the ability of the brain to form and reorganize synaptic connections, especially in response to learning or experience or following injury...”
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Cognitive Behavioral Therapy (CBT) focuses on learning to think about thinking (meta-cognition), think about feeling (meta-mood), and thinking about doing getting triggered then learning to pause and choose your response

“DON’T JUST STAND THERE, DO SOMETHING!”
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Portions of the brain, of the mind, would activate and could lead to fight, flight, or freeze

“DON’T JUST DO SOMETHING, STAND THERE!”

CBT techniques focus on interrupting the automatic brain/mind responses while increasing one’s ability to STOP FOCUS CHOOSE
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**HABITS** are routines of behavior (thoughts, feelings and emotions) that are repeated regularly and tend to occur subconsciously.

Often goes **unnoticed** by individual.

Extremely simple form of learning.

Incremental increase in link between context and action – increasing **automaticity** of the behavior in that context.
Cognitive Behavior Therapy is based on a straightforward, common sense model of the relationship between cognition, emotion, and behavior in human functioning.
THREE ASPECTS OF COGNITION are emphasized

1. Automatic thoughts

2. Schemas

3. Cognitive distortions
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**Automatic Thoughts**

- Immediate
- Unpremeditated *interpretation* of events
- Occur spontaneous *without volition* – NO CHOICE
- *Shape* both individual *emotions* and their actions in *response*
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Automatic Thoughts

• Manifest themselves out of the individual’s beliefs, assumptions, and schemas

• Perception and interpretation of events are shaped by beliefs, assumptions, and schemas

• Psychopathology is “fueled” by automatic thoughts that are exaggerated, distorted, mistaken, or unrealistic
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Schemas

• Unconditional core beliefs which serve as a basis for screening, categorizing, and interpreting events
• Often operate outside awareness and often not clearly verbalized
• Include underlying assumptions which are conditional beliefs that shape responses to experiences and situations
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Schemas

Include *interpersonal strategies* which are underlying assumptions that focus specifically on ways of influencing others
Development of Schemas

Formed in response to real developmental circumstances and/or biological influences
Most of us develop positive and negative schemas regarding our self:

“I’m competent” / “I’m incompetent”
“People can be trusted” / “People can’t be trusted”
“The world is manageable” / “The world is overwhelming”
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Development of Schemas

“The teacher is so kind to me even though she doesn’t like me…”

“That cool kid probably says ‘Hi’ to everyone…”

“She likes me now but when she gets to know me…”
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Cognitive Distortions

- Errors in logic
- Fuzzy thinking
- Stinking Thinking
- N.U.T.S. – Negative Underlying Thoughts
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ALL-OR-NOTHING Thinking

Look at things as black or white; right or wrong; always or never or everyone or no one

OVER GENERALIZATION

View a negative event as a never-ending pattern of defeat
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MENTAL FILTER
Dwell, access negative and ignore or dismiss the good and positive

DISCOUNTING THE POSITIVE
Insist that out accomplishments or positive qualities don’t count
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JUMPING TO CONCLUSIONS

Mind Reading – “for sure” knowing how another with act, feel, or think

Fortune Telling – when we predict how badly/negatively things will turn out
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MAGNIFICATION
Blow up experiences or events, making them way out of proportions

MINIMIZATION
Shrink importance down inappropriately
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EMOTIONAL REASONING
We think, we reason from how we feel

“SHOULD” STATEMENTS
Criticizing ourselves with “should’ve…could’ve…would’ve… I must… I have to…”
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LABELING
We identify with our faults – “Imma idiot”

PERSONALIZING AND BLAME
Assume ownership for other’s ‘stuff’
Shift responsibility from self to others
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Typical Moods and Feelings

Atypical Emotional Experiences
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ANXIETY

DEPRESSION

EMOTIONAL DYSREGULATION

And OTHER DEBRIS
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Dynamic Interplay / Interrelationship of Cognition, Emotion and Behavior

The Self-Perpetuating Cycle:

- Beliefs and Assumptions
- External Events
- Biased perception and recall
- Automatic Thoughts
- Responses of Others
- Emotional Responses
- Interpersonal Behavior
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**CLINICAL ANXIETY** includes:

Excessive anxiety and worry occurring more days than not for at least six months

Difficult to control worries

Restlessness, feeling keyed-up, edgy, easily fatigued, difficulty concentrating or mind going blank, irritability, muscle tension, sleep disturbance
CLINICAL DEPRESSION includes:

At least five of the following for at least two weeks:

Depressed mood most of the day (sad, empty, hopeless, irritability);
diminished interest or pleasure in all or most daily activities; significant weight
loss or gain; insomnia or hypersomnia; psychomotor agitation observed by
others; daily fatigue or loss of energy; feeling of worthlessness or excessive
guilt; diminished ability to think or concentrate or indecisive; recurrent
thoughts of death, being dead, or suicide
Emotional Reactivity or Dysregulation
Outbursts, tantrums, bouts of feeling mad (not angry) or overwhelmed
Occur regularly or infrequently
Out-of-nowhere
Exaggerated and grandiose
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Emotional Skill Needed: Emotional Self-Awareness

- tend to have one emotion at a time
- act out how they feel
- flip between one emotion to another quickly
- start to understand that they can have more than one emotion in reaction to the same event as long as they are similar
- understand that they can have opposite feelings to the same situation
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Emotional Skill Needed: Recognizing Other People’s Emotions

• rely on physical clues to identify emotions (e.g. tears = sadness)
• take into account clues from the situation to help explain the emotion (e.g. understand that a child might be sad because his/her toy has been broken.)
• have a more complex understanding of the interaction between emotions, situations and people (e.g. the child is sad because the thing that was broken was a gift from a loved grandparent who died recently)
Emotional Skill Needed: **Emotion Regulation**

- are able to use simply ways to manage emotions with support from adults (e.g. choose a different activity to distract them from feeling frustrated)
- are increasingly able to choose appropriate behavioral responses (e.g. asks and waits for assistance with difficult task)
- are increasingly able to manage emotions by rethinking own goals and motives (e.g. decide that there is no point being angry about something he or she can’t change)
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WHAT TO DO?!?!
The illusion of control

Do what I tell you to do....
The illusion of control

Do it when I tell you to do it....
The illusion of control

Do it how I tell you to do it....
Helpers in the Helping Profession (parents, teachers, clinicians, etc.)

Helpers help!!!

Helpers have thick skin, do not take things personally!
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A sticker is just a sticker… doesn’t teach skills or solve problems…

Time outs do not teach skills or solve problems…

Kids prefer to do well, it’s just that simple!!!

CARROTS AND STICKS DO NOT WORK…
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SKILLS NEEDS

Executive Functioning:
hindsight and fore-thought (impulse control) are unavailable to challenging kids

Language processing/communication:
bark at you (woof-off, woof this), bite us, or run away

Emotional regulation:
response with thought rather than emotions
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**SKILLS NEEDS**

**Cognitive flexibility:**
the skill of gray, not black-n-white thinking

**Social:**
enter a group, start conversation, skills on the better side of human nature
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DO NOT TALK ABOUT THE SCREAMING AND SWEARING AND GOING TO THE BATHROOM DURING MATH AND ALL THE OTHER BEHAVIORS

Talk about skills needed and problem solving
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Coping Strategies

Practice slow paced breathing

Relax your muscles

Slow your thoughts

Practice acceptance
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Techniques for Challenging Automatic Thoughts

Thought Record (TR)
  Situation
  Emotion(s)
  Automatic Thought(s)
  Rational Response
  Outcome
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**Graded Task Assignment:** Approach systematically and break “large” tasks into smaller, more manageable ones; “shaping” strategies are small steps

**Relaxation and Breathing Exercise:** Progressive relaxation, focused breathing or meditation gains a sense of control

**Behavioral Experiments:** Do the unexpected
COPING WITH INTENSE EMOTIONS

TOLERATING
If I let the emotion run its course, will it pass reasonably quickly? Does trying to escape the emotion make things better or worse?

DISTRACTING
Can I focus on something else in order to reduce the intensity of the emotion to make it easier to tolerate and cope with?
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COPING WITH INTENSE EMOTIONS

SELF-SOOTHING
What can I do that will soothe me, comfort me?

IMPROVING THE MOMENT
What can I do to make things a bit better for the time being?
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Work to Understand your Child
Keep Your Cool
Allow Children to have Emotions
Model Problem Solving, Empathy, Emotional Range, Language
Coordinate
Do Your Best