SO THAT'S WHAT'S GOING ON! UNDERSTANDING EMOTION IN RESTORATIVE PRACTICES

Matt Casey and Sue Deppe

Restorative Practice

- Why does it work?
- What theories underpin it?
- What would need to happen for Restorative Practice to be the way you do business all the time?

Emotional Patterns

Sculpted by life experience, mostly out of awareness.

Attention

- Complex environment: What's important?
- Instinct cannot handle all needs for urgent action.
- Things do not come to our attention (become conscious) unless amplified by affect.





Innate Affect

- Prewritten brain program
- Trigger: Shape, intensity of neural stimulation
- Specific emotional, body experience, facial display

Amplifiers

- Affects call attention to stimulus
- Nothing becomes conscious unless amplified by affect!

Innate Affect

- Affect system responds to qualities of stimulus: increasing, decreasing, level.
- Things happen all over the body to make the information important.

Innate Affect

- It's not about stimulus content!
- Healthy affect system -> appropriate affect for the trigger.
- Affect is an analogue of its stimulus.

AFFECT MOTIVATES EVERYTHING!

The Innate Affects

- Positive: Interest-Excitement, Enjoyment-Joy
- Neutral: Surprise-Startle
- Negative: Distress-Anguish, Fear-Terror, Anger-Rage, Shame-Humiliation, Dissmell, Disgust

Somatosensory Feedback

Facial and body feedback are a big part of our experience of affect.

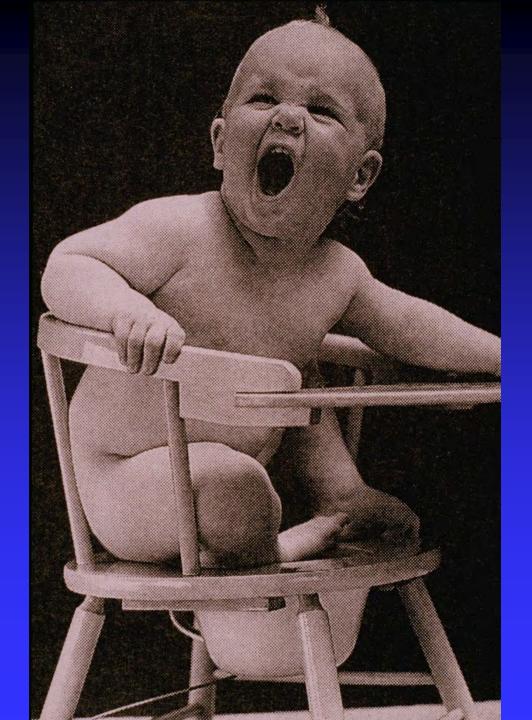
Feedback Loop Components

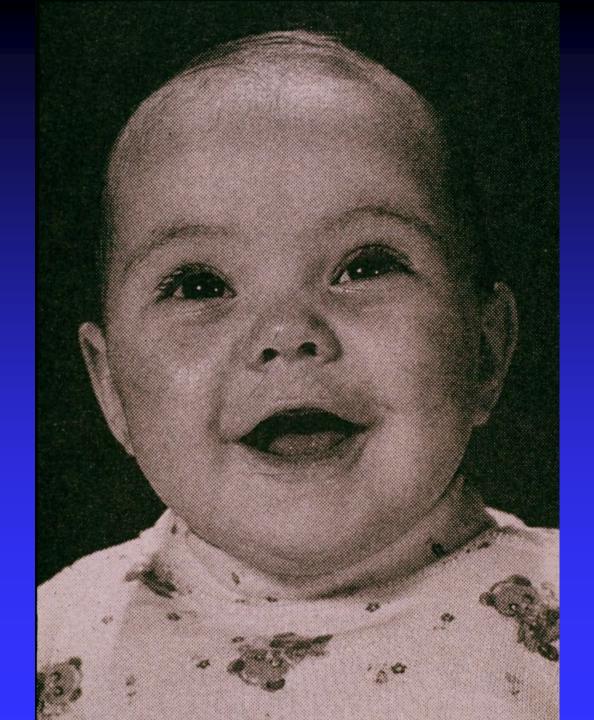
- Innate affects organize patterns
- Nerves, hormones, chemicals carry messages to sites of action, where we recognize affect as feeling
- Receptors detect affect-related information, which goes back to the affect system to cause more affect.



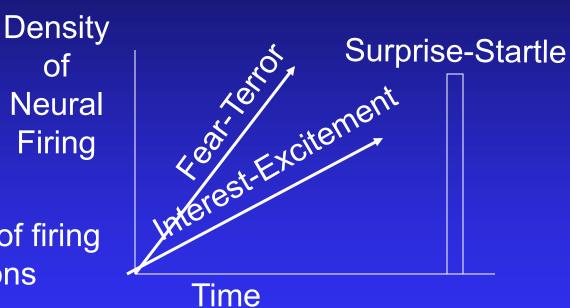






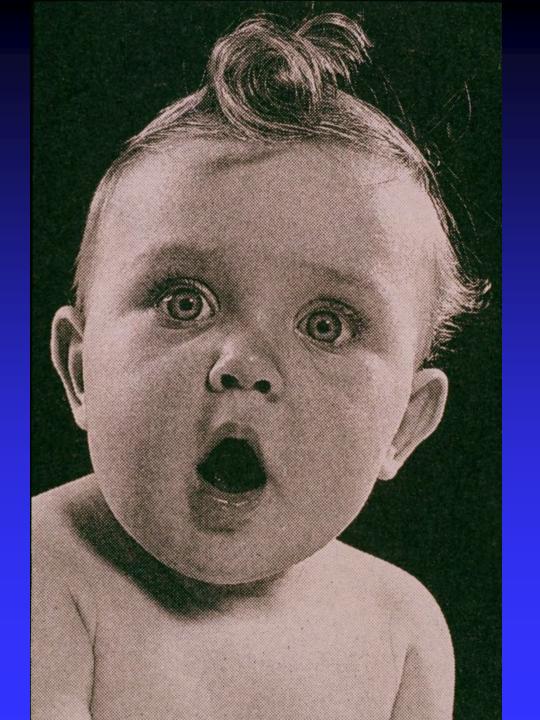


Innate Triggers for Affect

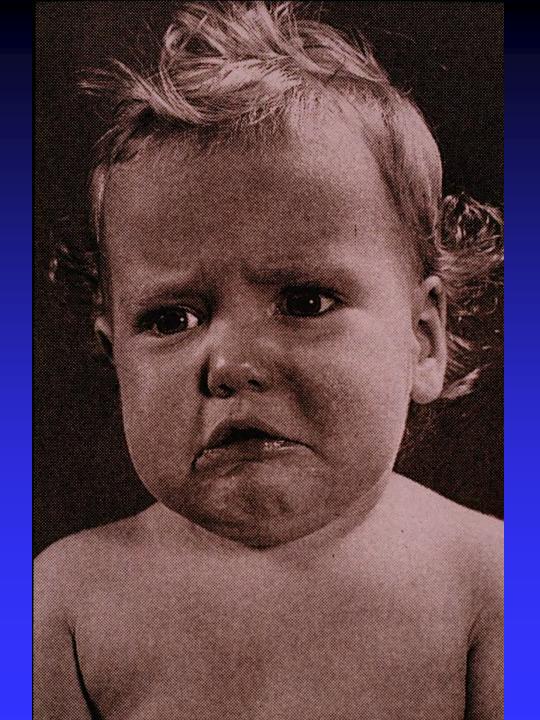


(Quantity of firing neurons

Frequency of firing)







Innate Triggers for Affect: Level Stimulus (Overload)

Density of Neural Firing

Anger-Rage

Distress-Anguish

(Quantity of firing neurons

X

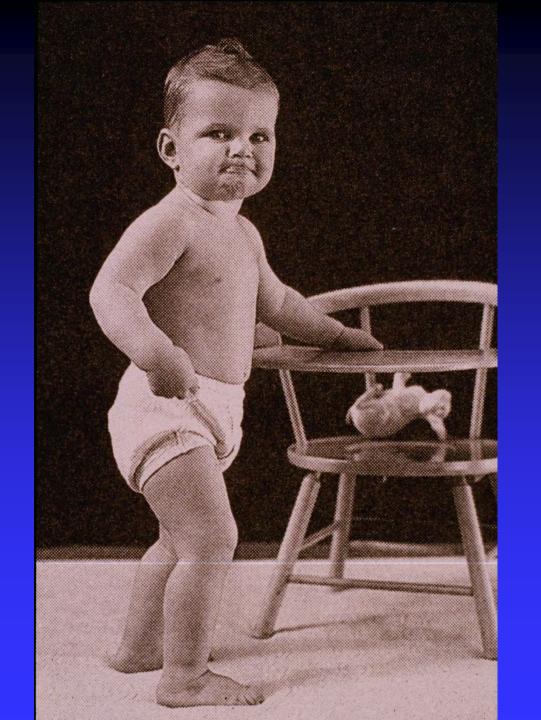
Frequency of firing)

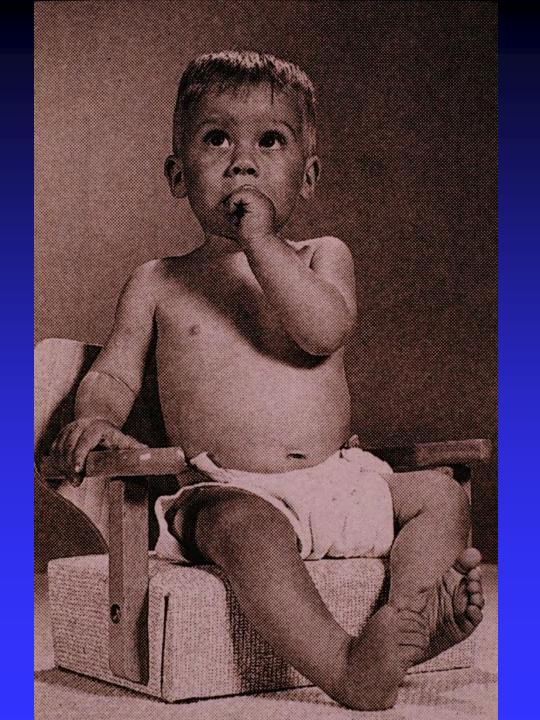
Time

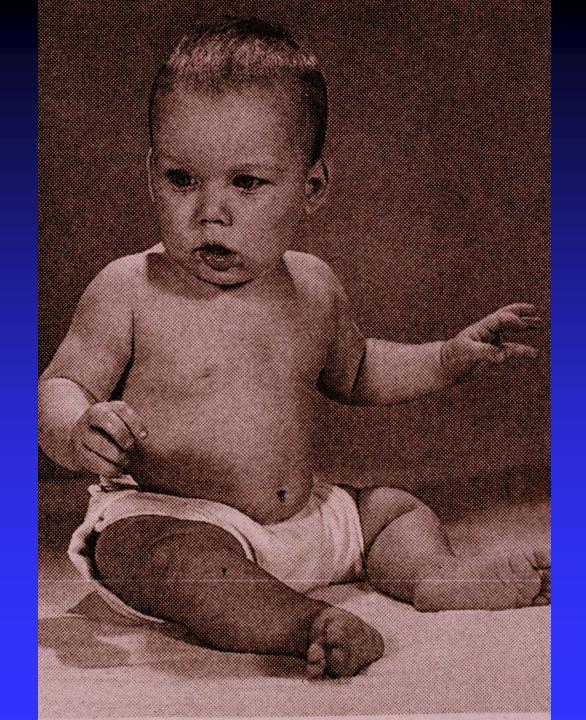


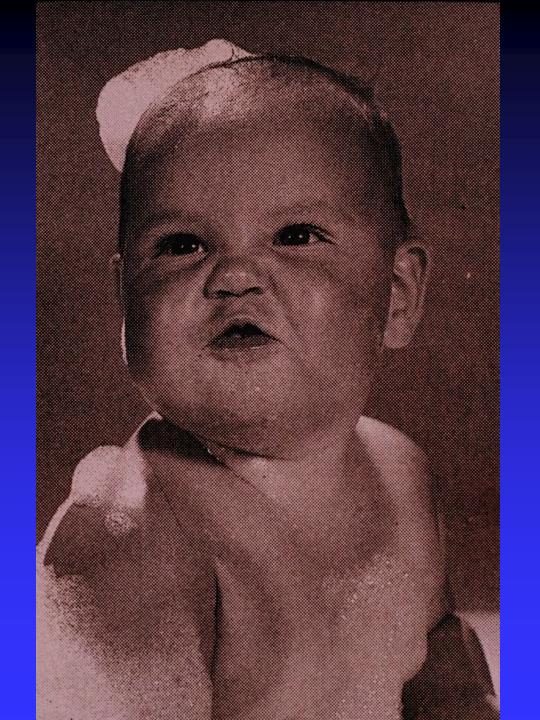
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Susan Leigh Deppe, MD, DFAPA











A Little Quiz...

What is this boy feeling?



The Innate Affects

- Urgent
- Abstract
- Analogues of their stimuli
- General
- Matching in profile to their stimuli
- Correlate stimulus and response

People are Complex! Innate Affects . . .

- Can be combined
- Can vary in intensity
- Any affect may amplify: any drive, affect, mental content, experience
- Result? Different experiences and people!

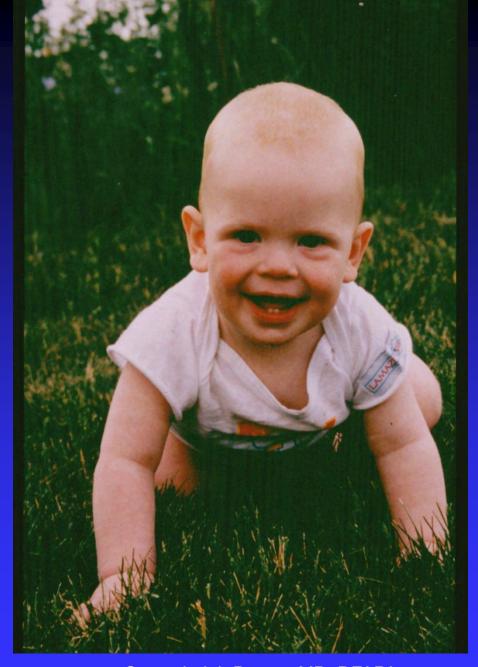


Script Formation

- From birth, we link things together.
- We want more positive affect, less negative.
- We begin to try to predict and control outcomes.

Script Formation

- Most of life managed by scripts.
- Even one-year-old has many scripts.
- We are rarely aware of their operation.



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Definitions

- Affect
- Feeling
- Emotion
- Mood
- Mood Disorder

Nathanson, 1992

Affective Resonance

We tend to mimic others' affect display, giving ourselves a milder experience of the same affect.

Affective Resonance

- Affect is contagious!
- Interaffectivity is crucial in relationships.
- The empathic wall
- Empathy key in RP



Affect Modulation

- Parent soothes child by rocking, singing, stroking, distracting.
- All societies require that kids learn to modulate affect by cultural rules.
- This is a major role of parents.
- What happens when parents don't manage their own affects well?

Affective Attunement

Parent assesses baby's affect display, assigns meaning.

Interaffectivity is non-verbal communication.

What if parent and child are misattuned?



The Blueprint

Because we have an affect system with some affects that feel good and some that feel bad, we are motivated to:

- 1. Express and maximize positive affect;
- 2. Express and minimize negative affect;
- 3. Minimize impediments to the expression of all affects; and
- 4. Maximize the power to do 1-3.

The Blueprint: Intimacy

- Private interpersonal relationship within which two people:
- 1. Mutualize and maximize positive affect.
- 2. Mutualize and minimize negative affect.
- 3. Each person agrees to express all affect so the first two rules will work.
- 4. Anything that helps the performance of the first three rules fosters intimacy; anything that interferes with them is bad for intimacy.

The Blueprint: Community

- A community is a public system of individuals who agree to:
- 1. Mutualize and maximize positive affect
- 2. Mutualize and minimize negative affect
- 3. A community holds together only if it has a forum for the public expression of affect.
- 4. Anything that helps these rules fosters the sense of community; anything that interferes with them jeopardizes it.

A Little Quiz... Name some things that Can affect the affect system.

Biological Factors:

- Physical illness
- Drugs: benzodiazepines, AMPT, lithium, caffeine, alcohol, cocaine
- Drug withdrawal: cocaine, SSRIs
- Mental illnesses, e.g., mania, paranoia
- Fatigue, hunger, etc.
- Pain

Biology and Development

- Substances influence affective development.
- What if you wipe out adolescence with drug abuse?

Adult Affect has Many Causes

Name some!

(Story of colleague and wife's shoes)

IF WE ALL HAYE THE SAME NINE AFFECTS. HOW COME WE'RE SO DIFFERENT? INTRODUCTION TO SCRIPTS AND PERSONAUTY

Why Are We Different?

- Biology: Innate, drug, or illnessinduced
- Different scripts due to different life experiences
- Complex interactions between the two over time

- From birth, we begin to link things together.
- We want more positive affect and less negative.
- We try to predict what will happen, to control the outcome.

- We go through life having affects triggered.
- Other things become bad or good (scary, happy, exciting, etc.) by linkage to affects.

- If stimulus-affect-response sequences (scenes) happen over and over, we develop emotional "rules" for managing families or bundles of scenes.
- These rules are called "scripts".

- Scenes: Events and affects.
- If scenes happen frequently or with intense affect, we group them and develop an emotional reaction to the whole bundle.
- Affect triggered in response to a family of scenes magnifies the affects within those scenes.

- Most of life managed by scripts.
- We are rarely aware of their operation.

Scripts

Nathanson (1996): "The function of a script is to simplify the process through which any mental content may be analyzed for its resemblance to prior experience and to provide rapid deployment of strategies for its management."





- Baby has normal reflexes (sucking) and facial displays (smiling).
- She tries to suck or smile voluntarily to improve her life (autosimulation).
- After age six months, a child can connect events further apart in time.

- A one-year-old who has had shots will cry at the sight of a doctor and needle
- She's started to link prior affectladen scenes together (psychological magnification).
- (SLD and doctors)

Multiple Causes

- All humans have scripts. Many are adaptive; some are maladaptive.
- (Duke's script on fetching.)

Pleurideterminacy

- Scripts can be validated or attenuated.
- Whether an event changes our lives will depend on what precedes and follows it.
- A child is treated with cruelty . . . Or respect . . .

Distortion

- Scripts help us handle information more efficiently, but . . .
- We tend to try to fit new material into our existing scripts, responding as we would have in the past.
- The more intense the relationship, the more powerful the scripts.

Emotional Health

- Healthy affect system responds with appropriate affect for any particular trigger. The affect stops when the trigger ends.
- Health is affective flexibility due to normal affect biology, plus adaptive scripting for the culture, enabling optimal functioning.



Even in the rewarding socialization of affect, a child must be exposed to, and taught to tolerate, graded doses of negative affect!

Shame Trigger

- Impediment to the expression of positive affect, when there is reason for the affect to continue.
- PARTIAL interruption

Shame

Shame is the central social regulator that governs how we interact with others. (Nathanson)

- Interferes with our feeling good
- Provides sudden awareness of something we really don't want to know about ourselves

Adult Experience of Shame

Feeling put down Not heard Embarrassment Rejection Failure Inferiority . . .

Healthy Response to Shame

- Ouch! Identify the affects(s)
- Comfort myself.
- Do I need to take responsibility for anything?
- What does this have to teach me?

BUT THAT'S NOT WHAT WE USUALLY DO!



Behavioral Influences

Why do you do the right thing most of the time?

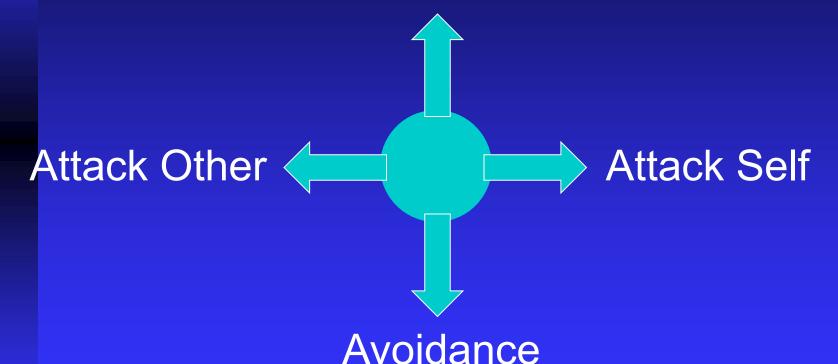
If you did the wrong thing, who is the last person you would want to find out about it?



WHAT DO WE DO WHEN WE FEEL SHAME?

The Compass of Shame

Withdrawal



Nathanson, 1992



Fight Hurt others Be cross with others Be mad at people (Attack Others)





Run away and hide Go to your room Don't want to play (Withdrawal)



The Shame Bear



Pretend it's not happening Don't want to talk about it Do naughty things



The Crumpled One (Avoidance)





Feel sad Hurt yourself Say I'm Stupid To get into trouble Be Frightened (Attack Self)



Application of Affect and Script to Real People

- Script evolution is lifelong.
- Parenting, psychotherapy, personal growth, spiritual growth, many life experiences . . .

Problems

Dangerous cultural shift from withdrawal and attack self to avoidance and attack other shame scripts

Changing Scripts

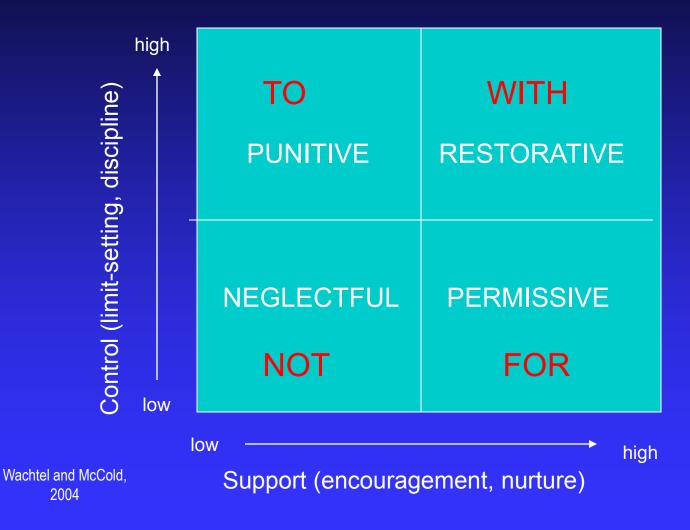
- We only change when it is safe to look at what shame is telling us.
- Past experiences, scripts also determine whether we feel safe enough to acknowledge shame.

Who was the teacher who had the biggest impact on you, the one you most respected?

What allowed you to feel this way?

What was special about this person?

Social Discipline Window



Restorative Practices

Range from least to most formal:

- Affective statements
- Affective questions
- Small, impromptu conference
- Group or circle
- Formal conference

Healthy parents, teachers, and leaders do lots of informal restorative practices!

Some Restorative Questions

- What happened?
- What were you thinking at the time?
- What have you thought about since?
- Who has been affected by the incident? How?
- What needs to happen to make things right?



Restorative Questions

- What did you think when you realized what had happened?
- What impact has this incident had on you and others?
- What's been the hardest thing for you?
- What do you think needs to happen to make things right?

The Blueprint

Because we have evolved with an affect system with some affects that feel good and some that feel bad, each of us is motivated to:

- 1. Express and maximize positive affect;
- 2. Express and minimize negative affect;
- 3. Minimize impediments to the expression of all affects; and
- 4. Maximize the power to do 1-3.

Affect in Restorative Practices

- Affective resonance and empathy crucial.
- Generally move through more toxic and distancing emotions first.
- RP works because of how emotion works.



The Solution

- Help people to identify, understand, and manage their affects, especially shame.
- Use restorative practices to build community and script relationship skills; teach people how to DO HEALTHY RELATIONSHIPS.

