

WHAT HAPPENED TO YOU?

CONVERSATIONS ON TRAUMA, RESILIENCE, AND HEALING



BRUCE D. PERRY, MD, PhD OPRAH WINFREY

Book Study Guide

Neurosequential Model in Education (NME) Neurosequential Model in Sport (NM Sport)

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Overview

This book study guide was prepared by members of the Neurosequential Network to assist educators – including coaches – explore key concepts presented in *What Happened to You*. As you will see, the basics of brain organization and functioning, understanding the stress response and the impact of developmental experiences – good and bad – are all foundational for effective communication, teaching and coaching. The questions in this Guide are only a rough framework; please feel free to skip, add and modify any of these to better fit your group. And, please feel free to share your experiences and insights with our team (send comments to info@neurosequential.com). We are always trying to learn and improve.

The purpose of the Neurosequential Model in Education (NME) is to help educators, caregivers and students better understand some of the most important – and most easily mastered – concepts related to how the brain develops and changes. Understanding and acting on these concepts will lead to more effective and pleasurable learning experiences. While the NME is often referred to as an approach that will make a school "trauma-informed", we know that the core concepts of the NME have broad relevance for teaching all children, youth and adults. Again, understanding how the brain processes, stores and retrieves information – especially when stress, distress and trauma are involved - is foundational to education.

There are several ways that The Neurosequential Network brings the NME to educators and educational settings; some of these are didactic (e.g., a daylong seminar using a lecture format), some are more consultation based (e.g., the NMN's web-based Case-based NME teaching series) and some are relational, interactive and involve an ongoing learning process. A similar Book Study Guide for *The Boy Who Was Raised as a Dog* was created to provide an interactive introduction to the core concepts of the Neurosequential Model as used in educational settings (NME), caregiving settings (NMC), athletics (NM-Sport), and therapeutic settings (NMT). The present book study guide for What Happened to You will play a similar and complementing role for NME and NM Sport. Similar Book Study Guides for the NMT and NMC are in development.

The first NME "beta" class of 25 staff members was this group of teachers at Erik Ramstad Middle School in Minot, ND in 2010. Eleven years later, NME training has now grown to include over 25 countries and thousands of schools, impacting hundreds of thousands of students. The clinical version of the Neurosequential Model, the NMT is being used in over 28 countries and 90,000 NMT assessments (NMT "metrics") have been completed. Conservative estimates of the number of children impacted by the NM is over 2.8 million....and growing.

While the guide was developed by educators for educators it can be useful to a much larger audience. Our first 'beta' test of this book study was a Coaches Book Study provided in context of our emerging NM Sport initiative in collaboration with We Coach and the newly formed Center for Healing and Justice Through Sport (CHJS).

The Neurosequential Model in Sport (NM-Sport) is not a specific "program" or "intervention." It includes a "capacity-building" process that provides an introduction to important concepts related to engagement and performance in sport by focusing on how the brain works, develops, changes and is impacted by developmental adversity including trauma. In application, NM-Sport can inform effectiveness in coaching, performing, training and a host of key skills needed for success in sport.



We believe this book can provide a solid introduction to core concepts that can help you better understand yourself and others. By participating in this book study, you will be joining many others who are continuously learning and growing in an effort to better understand and serve children, youth and families. Welcome, you are in good company.

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A Note from the Authors & Introduction

1. On page 9, A Note from the Authors, Dr. Perry and Oprah invite us to be in control of our own reading experience. They understand the challenges of reading both disturbing emotional content and new, initially challenging, science content. In their wisdom, they invite us on a reading journey that we control, encouraging us to stop, ponder, rest, walk away and eventually return.

How can we as teachers and coaches appreciate this example of giving agency to our learners? How can we dose our content in ways that feel safe for our students/athletes while still challenging them to stretch and grow?

2. On pages 11-13, the Introduction begins with Oprah recounting a troubling story of how she was disciplined as a child: "whuppings" that often began with these words, "I do this because I love you." It became an excuse for abuse that had serious consequences long after her temporary "conditioned compliance" helped her survive. Many educators and coaches were raised and taught under that same rule of conditioned compliance that gives short term peace at the expense of long term pain. How can we begin to change this paradigm in schools and on teams that still rely mostly on power, fear, and exclusion to maintain control?











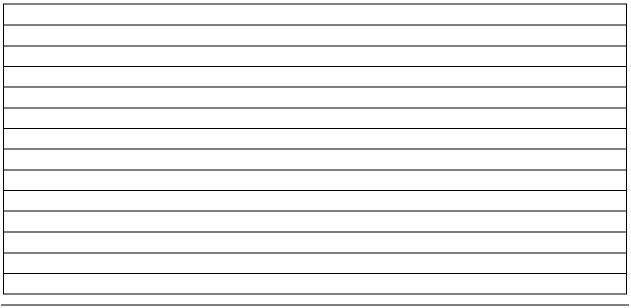
Chapter 1 Making Sense of the World

3. On page 23, Dr. Perry explains that "seemingly 'senseless' or confusing behavior makes more sense once you look at what is behind the behavior...why did they do that? What would make them act that way? Something happened that influenced how their brain works." As an educator or coach, when was the last time you struggled to understand behavior from one of your students, players or fellow teachers? Did you get frustrated, annoyed or angry because the behavior made life harder for you? -- or did you consider asking yourself what was behind the behavior? Please share an example.

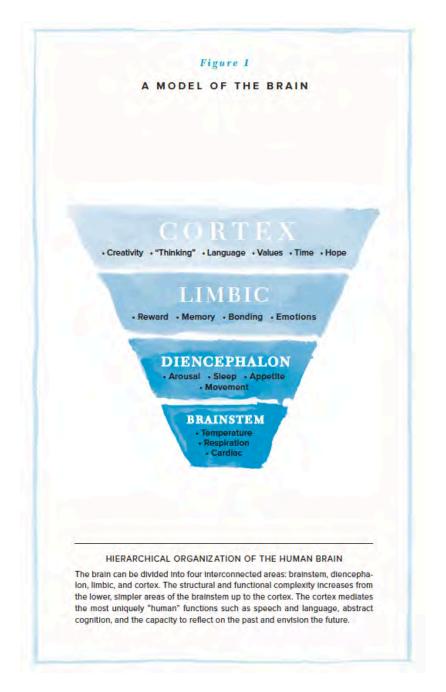


4. Read the story of Korean War veteran Mike Roseman on pp. 23-28. In his exchange with Dr. Perry, what did he learn about himself? How did that knowledge affect him and his wife? What did you learn about evocative cues in Mike's story that may relate to your personal story and the stories of your students/athletes? How does it illustrate the need for a lens that asks, "What happened to you?" rather than "What's wrong with you?"

5. Understanding what is behind behavior is much easier once we understand some basic brain architecture and function. in Figure 1 on p. 27, Dr. Perry shares the primary heuristic that informs the neurosequential model lens. List the four major anatomical regions of the brain and list at least two functions that each region mediates. What do you notice about those functions as you move from low in the brain to the cortex at the top?





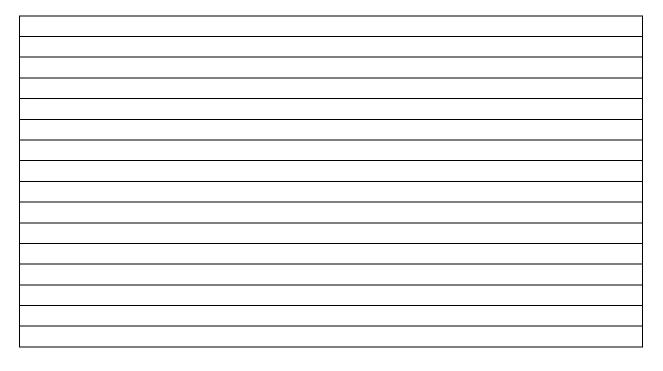


6. Consider this quote from Dr. Perry on p. 29: "All experience is processed from the bottom up, meaning, to get to the top, "smart" part of our brain, we have to go through the lower, not-so-smart part. This sequential processing means that the most primitive, reactive part of our brain is the first part to interpret and act on the information coming in from our senses. Bottom line: Our brain is organized to act and feel before we think."

What does this mean to us as educators and coaches when we consider the most effective ways to teach, learn, and organize our education/sports community?



7. Page 33: Think a minute about the following statement: There are parts of our brain that are very, very sensitive to nonverbal relational cues. And in our society, this is an underappreciated aspect of the way human beings work. We tend to be a very verbal society—written and spoken words are important—but the majority of communication is actually nonverbal. Now think about coaches or teachers you've had or known. What messages did they convey non-verbally? What about you? How and what do you communicate non-verbally and how are your students/athletes likely to process that?





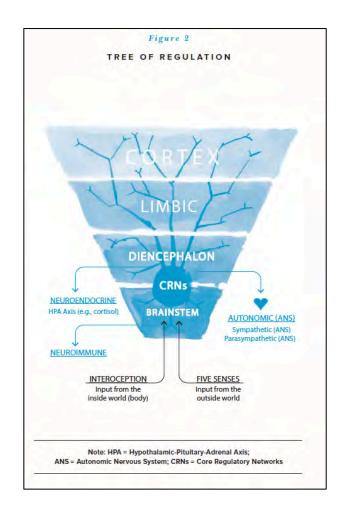


Chapter 2 Seeking Balance

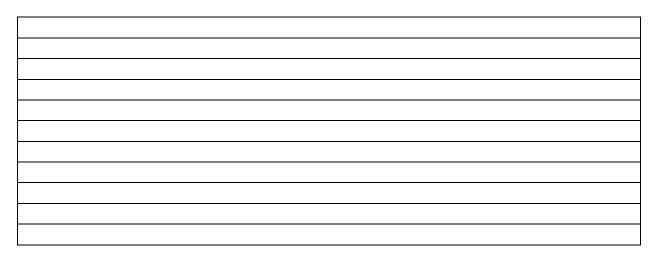
8. Reread Oprah's reflection on her own heart rhythms on pp. 45-47. Dr. Perry follows: "Rhythm is essential to a healthy body and a healthy mind. Every person in the world can probably think of something rhythmic that makes them feel better: walking, swimming, music, dance, the sound of waves breaking on a beach...". List some practical examples of how educators and coaches can use healthy rhythmic activity to help regulate students or athletes.



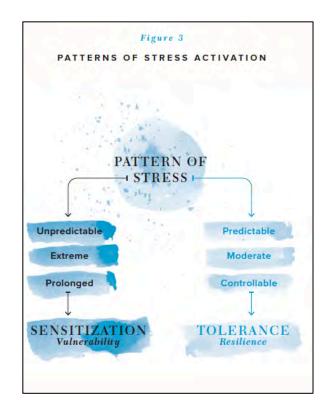




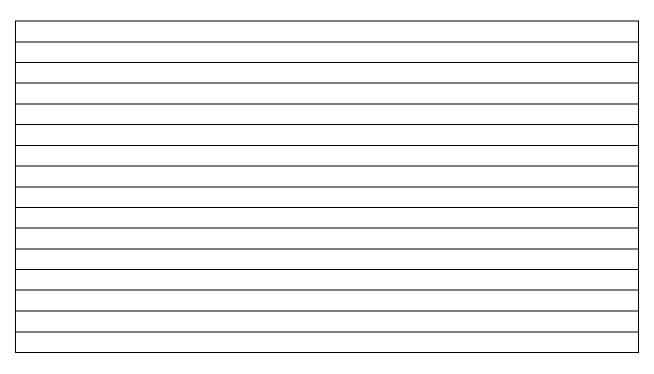
9. On pp. 54-58, Dr. Perry shares tales of two little girls, one a happy, gregarious toddler in an airport and the other, a withdrawn preschooler. After reviewing these stories, contrast the outcomes and think of the importance of understanding, "What happened to you?" Reflect on your own connections with students/athletes, depending on how they interact with you.







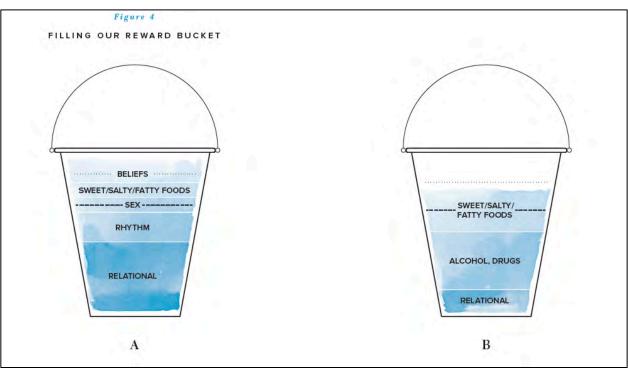
10. Figure 3 on p. 57 is crucial to understanding both vulnerability and resilience. It shows that all of us experience stress as an unavoidable and necessary part of life. It is how we experience stress that matters. As NM Sport director Megan Bartlett shares: "It isn't about <u>no</u> stress, it's about <u>dosed</u> stress." Using the guiding words of Figure 3, discuss how coaches and teachers can make practical delivery changes that lead to resilience rather than vulnerability.





11. Study Figure 4 on pp. 62, 63. Then read Dr. Perry's final paragraph of Chapter 2 on p. 66. Examine your own need for reward--how you try to fill your bucket in a positive way. How can we practically help our athletes and students do the same?









Chapter 3 How We Were Loved

12. Please reread pp. 71-74, the story of Mama P. and her nurturing love for a young mother and her daughter. This story highlights the value of first caring for and then training the adults who are in charge of our children in some capacity: teachers, coaches, parents, daycare providers. Highlight the many aspects of Mama P's strategy for helping Gloria and Tilly. Why is her strategy so crucial and strategic in developing the therapeutic communities we need for our most unloved children, including our schools and teams?





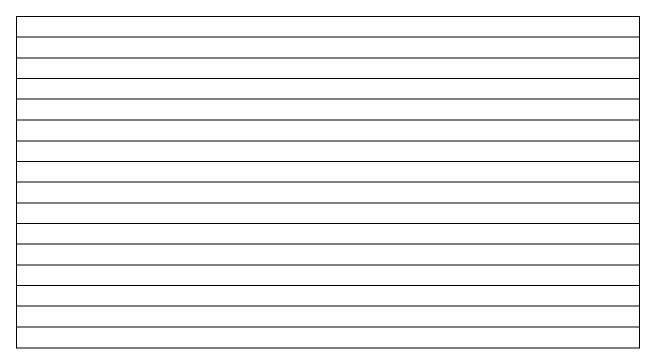
13. Dr. Perry ends his discussion of Mama P with these powerful words: *GIVEN LOVE THE UNLOVED BECOME LOVING*, a testimony to neuroplasticity, the ability for the brain to change in a positive way. What does neuroplasticity mean for us as coaches and teachers? In terms of a child's ability to learn new skills? To change behaviors? To develop as young people?

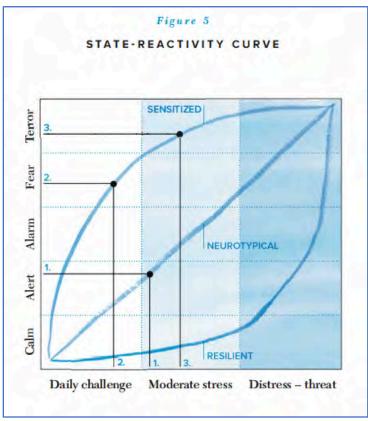


"STATE"	CALM	ALERT	ALARM	FEAR	TERROR
DOMINANT BRAIN AREAS	Cortex (DMN)	Cortex (Limbic)	Limbic (Diencephalon)	Diencephalon (Brainstem)	Brainstem
ADAPTIVE "Option" Arousal	Reflect (create)	Flock (hypervigilance)	Freeze (resistance)	Flight (defiance)	Fight
ADAPTIVE "Option" Dissociation	Reflect (daydream)	Avoid	Comply	Dissociate (paralysis/catatonia)	Faint (collapse)
COCNITION	Abstract (creative)	Concrete (routine)	Emotional	Reactive	Reflexive
FUNCTIONAL IQ	120–100	110–90	100-80	90–70	80–60



14. Review Figure 6 on pp. 90-91. Discuss the implications for learning, depending on the state a young person finds themselves in. Give an example of how YOU have shifted in YOUR state, with a resulting change in thinking, feeling and behaving.









Chapter 4 The Spectrum of Trauma

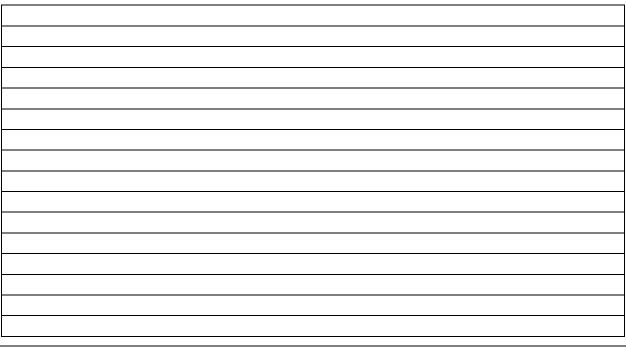
15. To become a trauma-responsive teacher or coach requires a basic understanding of what trauma is and isn't. Discuss the SAMHSA definition (p. 102-3) that is grounded in the three E's. Explain why this balanced definition is crucial to our understanding of self and others we serve.





16. Starting on p.104, Oprah and Dr. Perry discuss the Adverse Childhood Experiences Study (ACEs) and what it has revealed about the level of trauma present in the lives of many. Added to that is an important discussion of the difference between "causation" and "correlation." Please summarize both, adding your own thoughts/experiences to cement understanding.

17. The ACESs study has proven valuable in assessing some traumas we experience on a personal level. However, we are also aware of the role of other community or structural traumas in the lives of many young people, especially those most marginalized in our society. What are some other kinds of overwhelmingly stressful experiences that the young people you work with face?



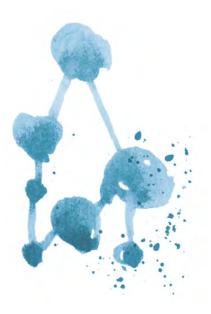


18. On pp. 112-115, Dr. Perry and Oprah reflect on the case of a 3 year old boy who witnessed his mother's murder. The conversation narrows to the crucial understanding of "a *therapeutic dose*." Define a "*therapeutic dose*," and discuss why coaches and teachers are perfectly positioned to supply therapeutic doses of healing for the kids we work with.







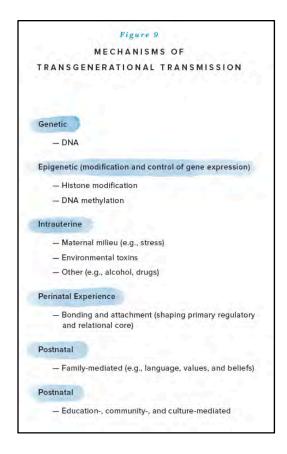


Chapter 5 Connecting the Dots

19. Oprah and Dr. Perry begin Chapter 5 with a long discussion of "transmissibility" of beliefs, language, and behaviors from one generation to another. This transmission is a product of intentional experiences our elders have allowed or fostered, be they negative or positive. Knowing that positive transmission is possible and powerful, how might that encourage us coaches and teachers to be intentional about transmitting love, concern, and a healthy sense of community to our kids, particularly those from previously marginalized populations.

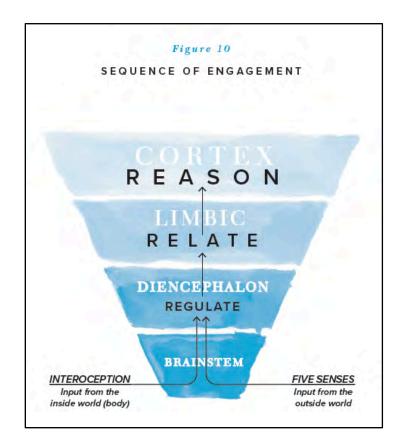






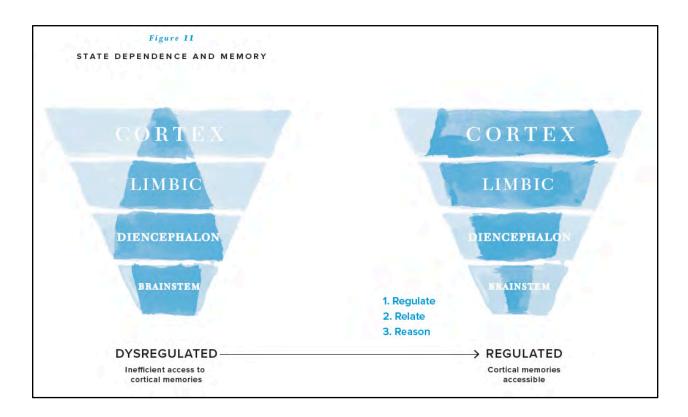
20. On page 141, Oprah and Dr. Perry begin a conversation around the word "sequential." That leads to Dr. Perry's discussion of the "Sequence of Engagement," Figure 10. Study that figure and then list several reasons why all coaches and teachers need to understand this foundational core concept that illumines how we communicate with our kids and with each other.





21. On page 144, Dr. Perry begins telling the story of Joseph, a three year old boy who witnessed his sister's abduction. He uses the story to teach us a core concept he identifies as the "*power differential*." Detail Dr. Perry's approach to Joseph and explain why it was respectful to both the Sequence of Engagement and the Power Differential.











Chapter 6 From Coping to Healing

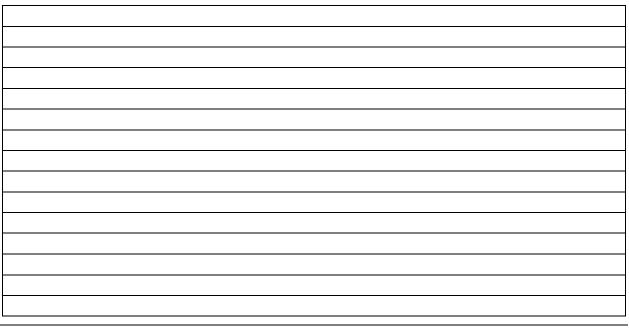
22. At the beginning of Chapter 6, Dr. Perry recounts the story of two same-age boys, Thomas and James, who had the same mental health diagnoses but were very different in how they responded to stressors. Compare and contrast these two boys, focusing on the two common responses they display: hyperarousal and dissociation. How does their story fit with the kids in your coaching and teaching experience?





23. Dr. Perry and Oprah expand the discussion of dissociation throughout Chapter 6. Included were our maladaptive expressions of dissociation like "cutting" and our adaptive/positive expressions of dissociation like "flow." Discuss both sides of dissociation and explain why a deeper understanding can be so beneficial to teachers and coaches.

24. After reading p. 168, briefly discuss each state on the arousal continuum: calm, alert, alarm, fear and terror. How does dissociation look different than hyperarousal on this continuum? Detail the value of having teachers/coaches understand this continuum for themselves and their kids.





25. At the end of Chapter 6, Dr. Perry makes a profound statement: "Therapy is more about building new associations, making new, healthier default pathways." He prefaces this statement with the idea that therapy isn't about making the past go away. It's about creating a new pattern, a new experience. As a coach and teacher, describe some specific things you can do in your position to help make these new default pathways of experience happen.









Chapter 7 Post-traumatic Wisdom

26. Chapter 7 introduces us to these thematic words: "the painful path of wisdom." We are taught that resilience is learned over time, can't be rushed, and can never be assumed. What mistakes are easy to make in traumatic situations when we don't respect the painful path of wisdom?



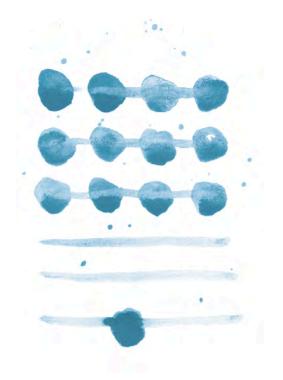


27. On p. 194-195, Dr. Perry discusses the Goldilocks effect, when we provide moderate, "*just right*" stressors to our athletes and students, stressors that stretch them but never break them. In light of this admonition, discuss how dosing and spacing matter to the building of lasting resilience.....or.... How do we coach resilience?

28. "The painful path of wisdom" is dependent on those we meet along the way, the relationships we foster as we navigate the thrive-survive continuum we all live on. Share some practical ideas on how community care can be built in your setting. Let the story of Ally on pp. 200-203 inspire your thoughts.







Chapter 8 Our Brains, Our Biases, Our Systems

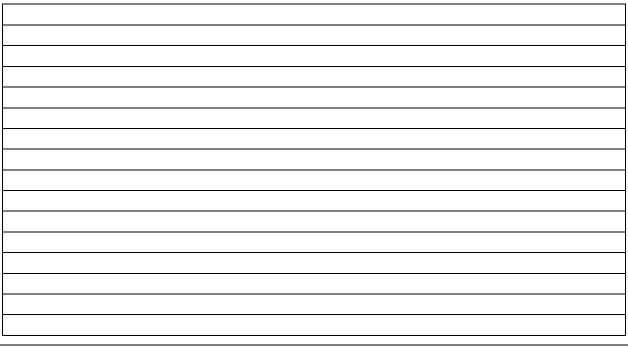
29. On page 222, Dr. Perry talks about a "*toxic mismatch*" between the needs many people have and the systems designed to respond to those needs. Discuss the shortcomings of the current systems you are a part of and what it truly means to be "trauma-informed." What role does bias/race/systemic oppression play as it relates to the need for connection and belonging?



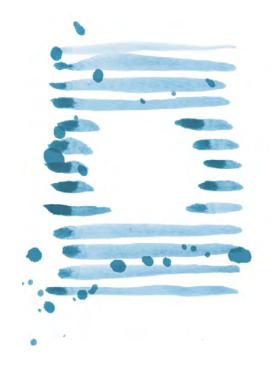


30. On page 230, Dr. Perry shares the 6 Rs of a positive educational experience, notably inspired by his experience with Indigenous cultures that shaped his thinking. 6 Rs: relevant, rewarding, repetitive, rhythmic, relational, respectful. Try using these Rs as a template to describe or evaluate a recent lesson you taught or a practice you managed. Now evaluate a lesson/practice you are planning soon. How many of the Rs can you infuse into your practice?

31. Dr. Perry and Oprah have a long discussion at the end of Chapter 8 about implicit bias and racism as related to brain development and function. Parse out the difference between implicit bias and racism, relating both to your own brain organization. Add elements of the practical advice Oprah and Dr. Perry give regarding how to begin changing our biases and racist practices.







Chapter 9 Relational Hunger in the Modern World

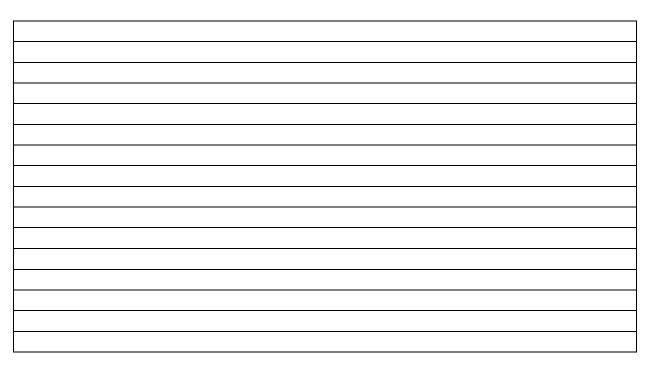
32. Chapter 9 begins on p. 247 with the story of Dr. Perry spending two days immersed in Maori culture. [Please read and reread this crucial account which organically contains the core of the Neurosequential Model: "Whanaungatanga" –Maori for kinship and connection.] Find and list your five favorite quotes or expressions that sum up this critical need for community.





33. When Dr. Perry returned to work after his experience in the Maori culture, he describes treating a 10 year old boy named Timothy. Beginning on p. 253, review and discuss the changes in approach that occurred as a result of Dr. Perry's enhanced understanding of *"whanaungatanga."* How can we mirror this approach in both teaching and coaching?

34. On page 257, Dr. Perry shares wisdom from his friend and colleague, Dr. Ed Tronick, who teaches us the power of "*rupture and repair*." List some conditions necessary for "repair" to occur. How can the concept of "*rupture and repair*" align with how we teach and coach?







Chapter 10 What We Need Now & Epilogue

35. On p. 279 Dr. Perry shares that the Neurosequential Model allows us to see others as we might view the way we "build and rebuild a house." He follows his metaphor with the story of 7 year old Susan who needed sequential healing from the bottom up rather than incongruent treatment from the top down. Use this metaphor and story to discuss your current coaching/teaching practice and your opportunity to be a healer.

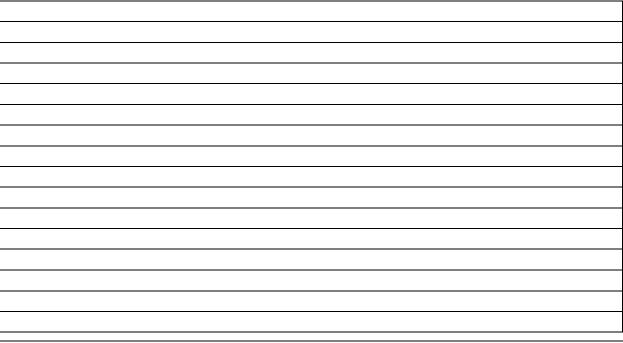




36. On p. 283, Oprah says ".....you get a chance to rewrite the script." Dr. Perry follows: "It is really never too late. Healing is possible." Discuss their level of hope in relation to the kids we teach and coach, the parents we interact with, and our own lives as we all strive to heal from past adversities. [pp. 284-285 contain helpful hints to the rewriting/healing process.]

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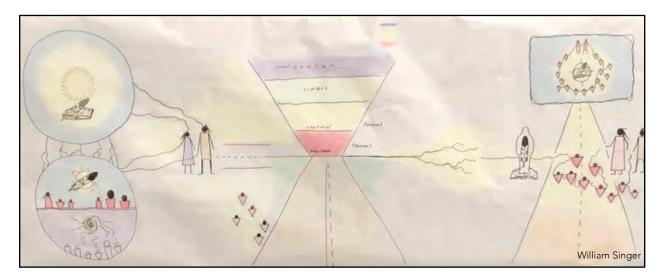
37. On pages 281-282 we learn the mantra, "know the stage and watch the state." How does this mantra lead us to better understanding and patience? What did Dr. Perry mean when he said, "Your relationship lives to teach/coach another day?" Discuss the value of patient dosing and realistic expectations of ourselves and our kids.





38. Dr. Perry: "If we truly want to understand ourselves, we need to understand our history—our true history. Because the emotional residue of our past follows us." Oprah: "but that can't happen until there is a tipping point of awareness." Discuss why knowing our society's history is crucial to the healing of our society as a whole. How can we take advantage of the struggles we've faced that have provided this "tipping point of awareness" for all of us.





This Hieroglyph was created by William Singer, a Kainai artist, as a partial recording of a presentation on transgenerational trauma, resilience and healing given by Dr. Perry for the Kainai Nation in Alberta in 2017. The Kainai are one of the three nations (Siksika, Piikani) comprising the Blackfoot Confederacy.



39. The epilogue contains two beautiful ending stories. Review both. Dr. Perry ends with his desire to keep learning, and Oprah ironically finishes the book with a story about "finishing." How can we immediately apply these lessons to our own lives and the lives of the kids we work with?

