Bear Clan, LLC
Empowering Balanced and Transformative Lives

Distress Tolerance Kit Contents

Responding to Superficial Cutting as a Residential Counselor:

- Reviews a sequence for responding to superficial cutting.
- Notably, outlines 7 different focus areas that can potentially be integrated into processing with a client soon after an incident of superficial cutting. Processing can shift the counseling intervention only being reactive to being proactive toward impacting the next potential incident.

Common Reasons for Superficial Cutting:

- Outlines the 15 most common psychological reasons clients give for superficial cutting.

Physiological Resets:

- Outlines the research-supported techniques for physiologically interrupting a client's state-of-mind and the one technique (cold-water face wash) that I found to be the most practical and natural to use with kids.
- Presents the need to then anchor the changed state-of-mind by using a breathing exercise.

4-7-8 Breathing:

- Presents a specific ancient breathing exercise that I've found to be structured in a way that is most powerful for kids.
- References that there are a series of audio-recordings, available in the Resources section of the www.BearClanllc.com website that guide listeners through different variations of the 4-7-8 technique. Designed for direct use with clients.

How to Tell Your Stress Level:

- Presents a simple, but structured, way to help kids determine their level of emotional, cognitive, physiological, and behavioral distress. Improvements in clients' skills at monitoring their own level of stress are key to creating and implementing a plan for handling distress in a mature fashion.

How High Is Your Stress Level:

- For use directly with clients; presents a 5-scale thermometer structure for reporting on your overall level of distress. This tool is an example of a SUDs Scale (Subjective Units of Distress). SUDs Scales helps clients improve their skill at self-monitoring their own level of distress and provide the basis for formalizing a structured Distress Level Action Plan.

Distress Level Action Plan:

- This document is a sample of a plan that builds off of a SUDs scale report and associates specific coping actions with different levels of distress.

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Coping Activities Chart:

- This chart lists a variety of activities that can help kids better tolerate feelings of distress before those feelings become overwhelming. This chart is designed to potentially be used directly with clients in designing an individualized Distress Level Action Plan.

Negative Coping Actions Chart:

- This chart lists negative coping actions, like superficial cutting, that different people use in ultimately damaging ways to manage their overwhelming feelings. It can be used directly with clients to help them understand how some of their problem-behaviors are actually driven by overwhelming feelings of distress.

Responding to Suicidal Ideation:

- This document presents an outline for responding to suicidal ideation, which can, but doesn't have to, include any self-injurious actions.
- It includes material on assessing the degree of suicidal ideation. That's bonus material for most Residential Counselors but a good review for Clinicians tasked with assessing whether a self-injurious behavior should be treated as an example of non-suicidal self-injury or as a suicidal gesture. Understanding this approach can help Counselors process incidents, give more useful information to Clinicians, and determine the appropriate immediate programmatic response.

Safety Contracts:

- This document presents an outline and example of how to create a Safety Contract with a client. Safety Contacts can be purely verbal or can be more formal written documents. In either case, this technique has an excellent track record for reducing the risk of repeat self-injurious incidents during the same shift.

Safety Watch:

- The details of a Safety Watch are going to be different for different types of residential programs and should be customized to individual clients. This document gives a sample from which programs can develop their own program form and/or other standardized structures for keeping kids safe after a self-injurious incident, significant suicidal ideation, or suicidal gestures not requiring hospitalization.

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