

Volume 1, Issue 9

Sept./Oct. 2010



BECOMING YOUR BEST

Stories Of Hope And Encouragement About Individuals With Disabilities

Becoming Your Best Newsletter

Since our last newsletter, a new school year has begun. No matter whether you are an educator, parent, student, or are involved in the field of education in any other capacity, I am sure you have been extremely busy. It has been for me. Thus, the reason for combining September and October into one issue.

If you have been keeping up with the news, you know that "bullying" is a "hot topic" around the country right now. The sad part of the news is the tragic increase of suicides among those being bullied. This issue is a major concern for parents, teachers, administrators, as well as the students who suffer the onslaught of bullying.

Our first article is shared with the intention of helping to foster an awareness of this growing concern. It is written by Horacio Sanchez, who is a nationally known author and presenter. He is an authority on resiliency, and brain-based science and research. Horacio provides insightful information on how to understand the mind of a bully and how educators can more effectively help to break the cycle of bullying.

The second story was submitted by one of our readers, Dr. Merri Jamieson. It's a story about one of Dr. Jamieson's personal friends, Irene. It is an inspirational story of overcoming obstacles and achieving success in spite of it all.

We are having a **CONTEST!** See page 3, to find out how you can be one of four (4) possible winners of an autographed copy of **MOTIVATIONAL QUOTES**, compiled by Mac Anderson. Winners will be notified by e-mail on November 16th.

We have some awesome stories coming up in future issues. We hope you will help us spread the news about the newsletter and website!

Submit your inspirational stories to the following e-mail address:

stories@becomingyourbest.com.

Subscribe to our FREE newsletter by sending an e-mail to:

newsletter@becomingyourbest.com.

The photograph is by Bob Sumners—see more at www.shootthebeach.com.

[WE ARE NOW ON FACEBOOK—BECOME A FAN AT BECOMING YOUR BEST.](#)

Mission:

We are dedicated to presenting inspiring stories of hope and encouragement about individuals with disabilities.

These stories of success are meant to provide support and the keys to "Becoming Your Best!"

Thank you for your stories and your support!

George M. Graham Jr.

“UNDERSTANDING THE MIND OF A BULLY” BY HORACIO SANCHEZ

Resiliency Inc. applies brain-based science and best practice research to a framework that helps agencies learn how to accomplish reform and to implement it in order to achieve identified goals and outcomes.

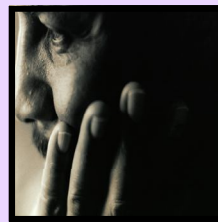
Exposure to violence and abuse has long been linked to the occurrence of behaviors such as aggression and bullying. What has not been explored until recently is the impact that this exposure has on brain development. By understanding what happens in the brain and why, educators can take steps to prevent bullying and assist the bully in more socially acceptable behavior.

The amygdala, an important part of the limbic system in the brain, is in charge of *personal* behavioral responses. Any stimulus encountered by an individual is filtered through the amygdala in order for it to assess if the stimulus is a threat. When the amygdala perceives danger, it will configure a chemical response designed to respond to the situation and release the necessary chemicals into the blood stream. By releasing the response through the circulatory system, the amygdala seizes control of the body in order to ensure immediate response. The amygdala reduces input from the cortex, which is in charge of reasoning and planning, in direct proportion to the level of the perceived danger. A primary function of the cortex is to provide related data to the amygdala in order to produce a more thoughtful, rational response. However, since the amygdala's role is to ensure survival, if the threat is perceived to be immediate, it will block input from the cortex in order to expedite the "survival" response. Simply put, the more immediate and severe the threat, the lower the percentage of input from the cortex.

The types of personal behavioral responses produced are directly correlated to the past emotional experiences to which an individual has been exposed. The chemical configurations designed by the amygdala to deal with these responses are then stored for faster response if the individual encounters a similar threat in the future. In cases of repetitive trauma, the response of the amygdala will become quicker each time. Repetitive trauma can result in a *hypersensitive limbic system*. A hypersensitive limbic response occurs when the response designed and stored by the amygdala is so repeatedly produced that it can be prematurely released in times of *perceived* stress, without the related trigger actually being present.

Therefore, it is logical that the profile of a bully is that of an individual who has been exposed to violence and has been a victim of systematic physical abuse. The aggression toward others initiates whenever he or she experiences stress.

In this context, stress is defined as any stimulus that causes dramatic chemical shifts in the brain. Each individual's emotional health, then, determines how the individual will interpret and react to stress. Victims of systematic abuse often misperceive common everyday occurrences as threatening whenever they become over stimulated.



Horacio Sanchez— President and CEO of Resiliency Inc. Horacio did his graduate work at Duke University. His diverse education and background has helped him to merge research, science, and practice. His approaches are based on sound scientific research and have been the foundations of his award-winning mental health and educational programs.

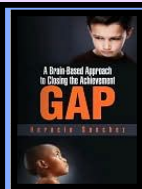
Resiliency Inc. - "A leader in education, mental health, and juvenile justice reform." Find out more information by going to www.resiliencyinc.com.

"UNDERSTANDING THE MIND OF A BULLY"... CONTINUED

The arousal level of the amygdala is lowered in situations in which there exists a perception of being wanted, safe, and successful. When experiencing these types of emotions, the amygdala perceives stimuli accurately and continues to receive input from the cortex. Since many bullies suffer from poor self-esteem and poor social skills, when in group settings their level of anxiety often elevates. In settings like school, bullies experience failure, don't feel wanted, and don't feel safe. Their perceptions lead to a classic "catch 22" cycle of aggression: the bully seeks acceptance; earlier life traumas have created atypical response patterns; feeling different from the other students, he or she becomes anxious, leading to acts of aggression; this cycle continues, increasing feelings of isolation and leading to repetitive acts of aggression. Since at the core, bullies are anxious and insecure individuals, it will be natural for them to select victims that they perceive as weaker than themselves.

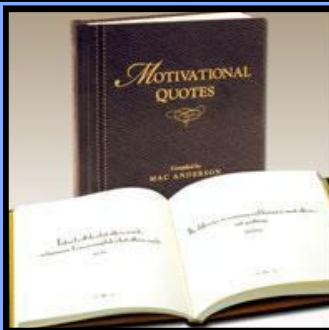
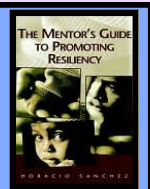
Once the pattern of school failure is established, school itself will produce increased anxiety and lead to aggressive behaviors. It is not surprising that bullying usually occurs in the least structured parts of the school day. The increased stimuli experienced during all the major transitions become consistent times for these threatening behaviors to escalate: admission to school in the morning, transitions between classes, lunchtime, and dismissal.

To break the cycle of bullying, schools need to establish predictable routines and rituals that aid in lowering the bully's level of anxiety. In addition, schools that help students feel successful and wanted, will lower the arousal level of the amygdala, thereby reducing impulsivity. The old adage that bullies are the individuals who are afraid is clinically true. To learn more about the science of preventing bullying, contact Resiliency Inc., at 919-544-0616 or visit our web site at www.resiliencyinc.com.

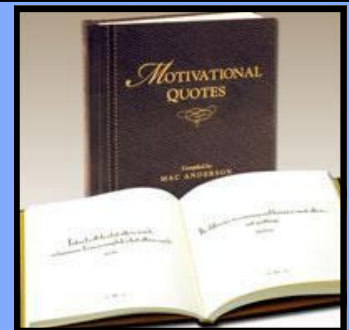


Horacio has written two books which are available through our website at www.becomingyourbest.com or through any bookstore.

His first book (to the right) is [The Mentor's Guide to Promoting Resiliency](#). His newest book (to the left) is [A Brain-Based Approach to Closing the Achievement Gap](#).



WIN AN AUTOGRAPHED COPY OF
MOTIVATIONAL QUOTES
COMPILED BY MAC ANDERSON



TWO WAYS TO WIN

1. Sign up to receive our Becoming Your Best Newsletter at our website: www.becomingyourbest.com. Two winners will be selected in a random drawing from those who sign up by November 15th. Each winner will receive a copy of [Motivational Quotes](#).
2. Recommend someone to sign up for our Becoming Your Best Newsletter (at our website: www.becomingyourbest.com) and ask that individual to list you as the person who made the referral. The two individuals with the most referrals by November 15th will receive a copy of [Motivational Quotes](#).

Winners will be selected on November 16, 2010 and will be notified through their e-mail address.

(CONTINUED TO THE NEXT PAGE)

"IRENE'S STORY" BY DR. MERRI JAMIESON

For many years I drove to Partlow State School and Hospital in Tuscaloosa, Alabama to pick up Irene for Sunday Services at University Presbyterian Church. She had lived at the institution since she was 8 years old. She and her two siblings who had epilepsy were sent to Partlow when both parents died. The other five siblings were adopted by relatives and lived in communities throughout Alabama.

Irene had a strong faith. She had attended the chapel services at Partlow for 50 years. Irene helped raise several generations of children at Partlow and always imparted her faith and the love of God.

One Sunday the minister announced that there were unexpected problems with the church roof. The cost to fix the problems would be thousands of dollars. The congregation was asked to assist with the needed funding.

The next week I picked up Irene and we sat in our usual place in the sanctuary. During the offering, Irene opened a paper bag and pulled out a piggy bank. When the offering plate passed through our row, Irene put the piggy bank onto the plate. She leaned over and whispered matter-of-factly, "That is for the roof."

I knew that the money was the only money Irene was allowed to control.

At the time Partlow State School and Hospital was declared an unfit place to live. Many people like Irene were told that they had to find other accommodations. This was called deinstitutionalization, a word that is insufficient to describe a process that later was under investigation as hundreds of people were lost in the "system." Investigators were employed to locate past residents. Some died for lack of supervision, medication errors, poor or no housing, etc.

Irene was not "retarded" or "mentally ill," according to the new guidelines. None of Irene's relatives would take her, including her brother who was a minister in a Presbyterian church. None had come when Irene invited them to be witnesses when she joined the church.

Irene took all the classes to prepare her to "live on the outside." She passed each and was assigned to live with a small group of past residents in a group home. She had asked to live with her brother, also deinstitutionalized; however, there was a rule that relatives could not live together if both had lived at Partlow.

After a couple of weeks, Irene stopped taking her medicine and was returned to Partlow for further instruction about her health needs. Again, placed in a group home, Irene stopped taking her medicine. This happened four times before anyone asked Irene why she stopped taking the medicine. Irene replied "I grew up at Partlow. Partlow is my home. I raised many of the people here. I am responsible for them. I don't want to move. "

Finally, a plan was written for Irene to have success in a group home. She wanted to be on a bus line so she could return to visit Partlow. She wanted to be able to walk to her church. She wanted a job working with children. She wanted only one roommate.

Once these conditions were met, Irene became a part of the community near the University of Tuscaloosa. She had a job working with small children who had disabilities who were in a university grant research project. She walked to church and visited with the pastor. She walked to her bank, grocery store, downtown, park, etc. as the need/desire arose. She hopped on the bus when she wanted to visit her friends at Partlow. She moved from the group home to an apartment with one roommate.

Irene never stopped taking her medication again. In records at Partlow it was written that Irene was successfully deinstitutionalized. On the streets of Tuscaloosa, in the preschool, and at church, Irene belonged.

This story was contributed by Dr. Merri Jamieson. It is a story written about her personal friend, Irene. We would like to thank Dr. Jamieson for sharing her story about Irene.

For more stories like this, visit our website at www.becomingyourbest.com. You can also find us on Facebook at Becoming Your Best.