Trauma Informed Care

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What is Trauma Informed Care?

- An organizational approach to understanding how trauma affects a person's life (SAMHSA, 2014)
 - Realizing the prevalence of trauma
 - Recognizing how trauma affects all individuals at the organization
 - Responding by putting this knowledge into practice

- Trauma is not rare and is more common in clinical populations (Gold, 2008)
- General Population
 - ->60% of men
 - >50% of women
- Clinical Samples
 - ->90% of individuals

- Trauma is linked to common mental health disorders (Gold, 2008)
 - Depression
 - Anxiety
 - PTSD
 - Personality disorders
 - Dissociative disorders
 - Substance abuse
 - Psychosis
 - Somatic complaints

- Trauma is associated with serious health risks (Gold, 2008)
 - Asthma
 - Hypertension
 - Obesity
 - Diabetes
 - Cardiovascular disease
 - GI problems
 - Arthritis
 - Substance use problems (Pietrzak, Goldstein, Southwick & Grant, 2012)

- Trauma <u>disrupts</u> functioning (Gold, 2000)
- Ongoing trauma <u>disrupts</u> functioning in an ongoing way
 - Growing up in a traumatic context interferes with basic aspects of functioning in the first place
 - These deficits impair the survivors ability to cope with routine daily stressors (Gold, 2008)
- Trauma-related behaviors are adaptive (Gold, 2000; Haley, 1997; SAMHSA, 2014)
 - These behaviors have gotten them to this point in life
 - They are a form of resilience
- Trauma is a barrier to healthy living

- Everyday interactions can help improve functioning (Gold, 2000)
 - Modeling of appropriate interactions and behaviors
 - Increased feelings of safety and belonging
- Increased safety for our patient, ourselves, and other visitors to the clinic
 - Reduces risk of future trauma
 - Helps reduce trauma-related behaviors
 - Survivors of trauma are likely to become angry or disruptive when anxious/triggered
- Improves community health and wellbeing
 - Survivors of trauma are likely to avoid healthcare setting

How does Trauma Affect the Clinic?

- Who do we see in our clinics?
 - Refugees
 - Veterans
 - Homeless individuals
 - Chronic poverty
 - Domestic violence
 - Child abuse/neglect
 - Accident survivors
 - Victims/witnesses of violent crime
 - Torture survivors
 - Cultural trauma (e.g., Native American, Asian Americans, African Americans, etc.)
 - Survivors of natural disasters
 - First responders

- Avoid assuming malicious intent (Gold, 2000)
- Watch for areas of deficiency
- Distinguish "right" from "appropriate"
- Teach missing information/skills
 - What does it mean to pick up a refill?
 - What is a "CSA" and how is that different from a "CSR"?
 - What is a sliding scale and why do you need my income?

- Emphasize safety
 - Become aware of potential triggers/problems
 - Establish clear roles and boundaries
 - Model appropriate boundaries
 - Be clear about roles
 - Warm handoffs
 - Accept and respect diversity
 - Reflective listening/validation

- Validate the patient's personhood
 - Make eye contact and SMILE
 - Acknowledge each patient with a verbal welcome
 - Provide choices
 - Stop and listen
- "Turn Towards" the patient (Lisitsa, 2012)
 - Dr. Gottman's technique used to strengthen relationships
 - Applying this to office interaction with patients means using small, unrelated validation to help them feel better about the encounter.
 - For example: comment on a patient's nice scarf or ask them how their trip here was, this feeds a positive bank account
 - Improving the positive to negative ratio (5:1) helps build collaboration and patient loyalty.

- Empower the patient
 - Provide choice and respect the patient's choice
 - "Cultural Competence"
 - Think about gender!
 - Think about language
 - Ask questions!
 - Approach your questions with the stance that you don't know (you don't)
 - Be willing to be educated by the client
 - Have her or him explain their rationale/beliefs to you
 - Take a one-down position, e.g.:
 - I don't understand...
 - Please explain that to me...
 - Consider a harm reduction approach

- <u>Positive regard</u>: kindness, benefit of the doubt, sense of being welcome, choices
- Clarity: about what is and is not offered here
 - We offer Behavioral Health as part of primary care, but not extended psychotherapy
 - We do not treat chronic pain with narcotic pain medicines
 - We do not treat chronic anxiety with controlled meds
 - Even if we help diagnose ADHD in adults, we do not treat this with controlled stimulants
- <u>Compassion</u>: everyone has stress; we see patients on some of the worst days of their lives
- <u>Validation</u>: active listening—mirror back what you heard patient say or acknowledge that they may be stressed, in a hurry, and/or feeling frustrated

- Care for yourself and each other
 - Remind yourself that it's not personal
 - Take a deep breath
 - Step away, take a break
 - Eat a healthy breakfast
 - Exercise regularly
 - Start a regular relaxation regimen
 - SMILE! It's contagious

How Do I Care for Myself?

- IMPROVE the Moment (Linehan, 2015)
 - Imagery skill: see self coping well, holding a child in arms or on lap, or going to a peaceful place. Have a soothing postcard behind computer to rest mind.
 - Meaning skill: "I am a professional" affirmation may help; I am making the world a better place by being part of this healthcare home.
 - Prayer: "radical acceptance" and being in the moment—trust it will work out
 - Relaxation skill: breathing, respond to stress in body, "tension does not help my response."
 - One thing in the moment skill: I just have to get through this moment right now.
 - Vacation skill: super-brief, stretch break, bathroom break or other interruption if need to regroup or get grounded again
 - Encouragement skill: Cheer lead self as you would talk to someone else in crisis: "I can handle this one; this too shall pass; I am the grown-up here..."

How Do I Care for Myself?

- Get a "De-Stress Buddy"
 - Pick 1-2 persons to do this with at work
 - Make a cue word that engages the "buddy" as a stress response helper (for example "buddy time" or "code purple")
 - Explain cause of stress or need briefly
 - As stress buddy: help your buddy breathe, take a small break, remember skills
 - Balance venting (or listening) with positive regrouping and self regulation reminders.

- TIC reduces barriers the health
- TIC is great care

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