Trauma Informed Systems of Care

Funded by SAMHSA: System of Care Expansion and Sustainability Grant #1H79SM063392-01
Presenters

Mandy Busch
MS, LMHP

Taira Masek
LCSW
“The need to address trauma is increasingly viewed as an important component of effective behavioral health service delivery”
SAM HSA’s 4Rs of Trauma-Informed Care

- **Realizes**
  - Awareness of widespread impact of trauma

- **Recognizes**
  - Mindful of signs and symptoms of trauma

- **Responds**
  - Fully aligning knowledge of trauma into policies, procedures, and practices

- **Resists**
  - Seeks to avoid re-traumatization

- **Future harm**
SAMHSA’s 4Rs of Trauma-Informed Care

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- Seeks to avoid re-traumatization
What is Trauma

- **Traumatic experience**: Witnessing or experiencing an event that poses real or perceived threat to life or well being. NCTSN

"Traumatic events are marked by a sense of horror, helplessness, serious injury, or the threat of serious injury or death" CDC.gov
Situations That Can Be Traumatic
Can you name some?

- Abuse and Neglect
- Natural disasters
- Family or community violence
- Sudden or violent loss of a loved one
- Drug and Alcohol issues
- Refugee and war experiences
- Serious accidents or life-threatening illness
- Military family-related stressors

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Exposure to Adversity impacts Health outcomes later in life

[Diagram showing the ACE study pyramid, with layers starting from Adverse Childhood Experiences, Disrupted Neurodevelopment, Social, Emotional, and Cognitive Impairment, Adoption of Health-risk Behaviors, Disease, Disability, and Social Problems, and finally Early Death.]

https://www.cdc.gov/violenceprevention/acesstudy/ACE_graphics.html
What is Trauma according to ACEs

• 10 Characteristics

<table>
<thead>
<tr>
<th>Abuse</th>
<th>Neglect</th>
<th>Household Dysfunction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical</td>
<td>Physical</td>
<td>Mental Illness</td>
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<tr>
<td>Emotional</td>
<td>Emotional</td>
<td>Incarcerated Relative</td>
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<td>Sexual</td>
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<td>Substance Abuse</td>
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<td>Domestic Violence</td>
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<td>Divorce</td>
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ACE Study Findings

How Common are ACES?

ACE Study

- Zero: 36%
- One: 26%
- Two: 16%
- Three: 9.5%
- Four or More: 12.5%

https://www.cdc.gov/violenceprevention/acesstudy/ACE_graphics.html
Impacts of Adverse Childhood Experiences

Adverse Childhood Experiences
- Abuse and Neglect (e.g., psychological, physical, sexual)
- Household Dysfunction (e.g., domestic violence, substance abuse, mental illness)

Impact on Child Development
- Neurobiological Effects (e.g., brain abnormalities, stress hormone dysregulation)
- Psychosocial Effects (e.g., poor attachment, poor socialization, poor self-efficacy)
- Health Risk Behaviors (e.g., smoking, obesity, substance abuse, promiscuity)

Disease and Disability
- Major Depression, Suicide, PTSD
- Drug and Alcohol Abuse
- Heart Disease
- Cancer
- Chronic Lung Disease
- Sexually Transmitted Diseases
- Intergenerational transmission of abuse

Long-Term Consequences

Social Problems
- Homelessness
- Prostitution
- Criminal Behavior
- Unemployment
- Parenting problems
- Family violence
- High utilization of health and social services

SAMHSA’s 4Rs of Trauma-Informed Care

- **Seeks to avoid re-traumatization**
- **Fully aligning knowledge of trauma into policies, procedures, and practices**
- **Mindful of signs and symptoms of trauma**
- **Awareness of widespread impact of trauma**
- **Recognizes**
- **Resists Future harm**
- **Responds**
- **Seeks to avoid re-traumatization**
“Trauma is not about the past, it’s about a body that continues to behave and organize itself as if the trauma were happening now”

Bessel van Der Kolk, MD
Vital life functions
- Heart rate, digestion, breathing, stress response

Regulates mood, memory, attention. Pleasure seeking, self-preservation, fear, protective response

Logic, planning, language, delayed gratification, reasoning
"Thinking about Thinking"
Higher Reasoning
Executive Function

Prefrontal Cortex
- 9 Functions of the Prefrontal Cortex
  1. Empathy
  2. Insight
  3. Response Flexibility
  4. Emotion Regulation
  5. Body Regulation
  6. Morality
  7. Intuition
  8. Attuned Communication
  9. Fear Modulation

Limbic Brain
- 1. Fight, flight, freeze stress response
- 2. Thinks, "Am I safe? Do people want me?"
- 3. Emotions live here
Limbic Brain

1. Fight, flight, freeze stress response
2. Thinks, "Am I safe? Do people want me?"
3. Emotions live here

Diagram:
- Stress
- Fight
- Flight
- Freeze

Connections:
- Stress to Fight
- Stress to Flight
- Stress to Freeze

Dr. Nadine Burke Harris

https://youtu.be/95ovlJ3dsNk?t=12
Prevalence of Trauma

• **90%** of clients in the public behavioral health setting have experienced trauma

• **60%** of all children/youth experience violence every year.

• Only **20%** of children with mental health disorders are identified and receive treatment.
People who have experienced trauma are:

- **15 times** more likely to attempt suicide
- **4 times** more likely to become an alcoholic
- **4 times** more likely to develop a sexually transmitted disease
- **4 times** more likely to inject drugs
- **3 times** more likely to use antidepressant medication
- **3 times** more likely to be absent from work
- **3 times** more likely to experience depression
- **3 times** more likely to have serious job problems
- **2.5 times** more likely to smoke
- **2 times** more likely to develop chronic obstructive pulmonary disease
- **2 times** more likely to have a serious financial problem

What You may see in children:

- Anxiety, fear, worry
- Decreased attention/concentration
- Change in academic performance
- Irritability
- Aggression or Angry Outbursts
- Withdrawal from people or activities
- Absenteeism
- Increased somatic complaints
- Defiance
- Over or underreacting to sounds
- Hyper-arousal or hypervigilance
- Excessive daydreaming
Adaptive/life saving → Maladaptive

Fight

Defiant

Freeze

Tuned out

Flight

Manipulative
Experiencing Trauma can Result in Post Traumatic Stress Disorder

Affects youth’s
- Ability to trust adults
- Sense of personal safety
- Effectiveness in navigating life changes

PTSD
- Re-Experiencing
- Avoidance
- Hypervigilance/Arousal
SAMHSA’s 4Rs of Trauma-Informed Care

- Seeks to avoid re-traumatization
- Fully aligning knowledge of trauma into policies, procedures, and practices
- Mindful of signs and symptoms of trauma
- Aware of widespread impact of trauma
- Recognizes
- Resists future harm
- Seeks to avoid re-traumatization
- Responds
“The need to address trauma is increasingly viewed as an important component of effective behavioral health service delivery”
What do these pictures have to do with Trauma Informed Care?

Reality can be so complex that equally valid observations from differing perspectives can appear to be contradictory.
Shift in perspective

You can't change what you don't acknowledge.

- Dr. Phil
“Trauma Informed Care is a strength-based framework that is grounded in an understanding of and responsiveness to the impact of trauma...that emphasizes physical, psychological, and emotional safety for both providers and survivors...and, that creates opportunities for survivors to rebuild a sense of control and empowerment.” (Hopper, Bassuk, &Olivet, 2010, pg.82)
Trauma Informed Principal

“Children do well if they can”

Ross W. Greene
Lost at School

What’s wrong with you

Trauma Informed

What happened to you
Principals of Trauma Informed Approach

Safety

Trust-worthiness

Choice

Collaboration

Empowerment

https://www.samhsa.gov/nctic/trauma-interventions
“The need to address trauma is increasingly viewed as an important component of effective behavioral health service delivery.”
System of Care:
A set of services and supports, guided by a common philosophy and supported by an infrastructure.
Incorporating Trauma Informed Care into System of Care Principals

Core Values

13 Guiding Principals

Culturally & Linguistically Appropriate (CLAS)
The 13 guiding principles of a system of care

1. Families & Youth are full partners at all levels
2. Community-based services
3. Individual, strengths based approach
4. Evidence-based and promising practices
5. Least restrictive environments
6. Services integrated at the system level
7. Care management and wraparound services
8. Developmentally appropriate behavioral health services
9. Developmentally appropriate trauma informed services
10. Earlier identification of needs
11. Accountability and Quality Improvement
12. Protect rights and support advocacy
13. Non-discrimination
System of Care Core Values

- Family driven and youth guided
- Community based
- Culturally and linguistically competent
Involved at all levels

Family and Youth should have a seat at the table in EVERY part of the System of Care process.
What it really means to be family driven

- **Family driven** means families have a primary decision-making role in the care of their own children as well as the policies and procedures governing care for all children in their community, state, tribe, territory and nation. This includes: choosing supports, services, and providers; setting goals; designing and implementing programs; monitoring outcomes; and determining the effectiveness of all efforts to promote the mental health of children and youth.
Supporting Families with traumatic stress

“Put families in the “driver’s seat” and empower them to plot their own courses of recovery and healing”

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- Promote Safety
- Trauma-Informed Assessments and EBP’s
- Encourage sharing & processing traumas
- Link to community resources
- Educate about PTSD and traumatic stress

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What it really means to be youth guided

**Youth guided** means that youth are engaged as equal partners in creating systems change in policies and procedures at the individual, community, state and national levels. Applicants are required to develop plans for infusing a youth-guided approach throughout the system of care, including plans for training and supporting youth in positions of leadership and system transformation.
Family Driven and Youth Guided in Trauma Informed Care

“Partnership among family, youth, and providers merges professional expertise and the experiences of trauma and healing to achieve more successful and meaningful outcomes of care”

https://www.nctsn.org/trauma-informed-care/families-and-trauma
Community-based Services are available and provided in the community or nearby.
Culturally & Linguistically Appropriate

- Principle Standard: Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs.
Trauma and Culture

- Trauma overlaps with culture, history, race, gender, location, and language.

- Trauma-informed systems acknowledges inequity and are receptive to different needs of diverse communities.

- “Cultural awareness, sensitivity, and understanding are essential to increasing access and improving the standard of care for traumatized children, families, and communities”

https://www.nctsn.org/trauma-informed-care/culture-and-trauma
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**Trauma Informed System of Care**

- “A trauma-informed system of care is one that recognizes and responds to the impact of traumatic stress on those within the system including children, caregivers, and service providers”.

- “Programs and agencies within such a system teach and sustain trauma awareness, knowledge, and skills into their organizational cultures, practices, and policies”.

- “They act in partnership with all who are involved with the child, using the best available science, to maximize safety, encourage recovery, and support children and families in their ability heal and grow”.

Engaging Family and Youth in Trauma-Focused Treatment

 RESOURCE TYPE
 Webinar

 TRAUMA TYPE

 LANGUAGE
 English

 AUDIENCE
 Mental Health Professionals

 POPULATION

 NCTSN RESOURCE

 Resource Description

 Suggests practical ways to partner with youth and families within treatment settings based on different resources and organizational structures. This webinar reflects the perspectives of providers, family members, and youth.

 Published in 2010

https://www.nctsn.org/resources/engaging-family-and-youth-trauma-focused-treatment
Parent and Family Trauma Informed Information

- https://www.childwelfare.gov/topics/responding/trauma/caregivers/
- https://www.nctsn.org/trauma-informed-care/families-and-trauma
- https://www.nctsn.org/resources/trauma-informed-parenting-how-talk-trauma-md
- http://nebraskamentalhealth.com/
Trauma-Informed Parenting (NCTSN)

- **Understand trauma’s impact on the children in your care.** Remember to look through the trauma lens. How you look at a child makes a difference in how you see their behaviors.

- **Help children feel safe.** Talk about how to keep kids safe. Keep predictable environment and prepare kids for change when possible. Help them know what to expect.

- **Help children understand and manage overwhelming emotions.** Model the behaviors you want your children to use to calm down. Prove calm instead of adding to their chaos. Help children learn to identify and share their emotions.

- **Help children understand and manage difficult behaviors.** Help children see how thoughts, feelings, and actions are connected and that by changing one area you can change another.

- **Respect and support children’s positive, stable relationships.** Healthy relationships with a caring adult is one of the key factors that produces resiliency in children affected by trauma.

- **Help children develop a strengths-based understanding of their life story.** Help children identify their strengths and build on them. Help them to understand they are not their past and they can change their future. They need to know they have positive things to contribute to the world.

- **Advocate.** It takes a team. Work with trauma experts in your community. Educate others on the impact of trauma. Build a caring community of adults that can advocate for your child.

- **Promote and support trauma-focused assessment and treatment.** Work to find qualified trauma professionals in your community who can treat your child’s trauma. (See slide on questions to ask provider)

- **Take care of yourself.** You must take care of yourself in order to be the best person you can be for your child and they need you.
Finding a Provider

- [https://www.nctsn.org/sites/default/files/resources//what_to_expect_from_treatment.pdf](https://www.nctsn.org/sites/default/files/resources//what_to_expect_from_treatment.pdf)
Some Helpful Questions for Locating Trauma Informed Therapists

- Are you familiar with research about the effects of trauma on children?
- Can you tell me about your experience working with children and youth who have experienced trauma?
- How do you determine whether a child’s symptoms may be caused by trauma?
- How does a child’s trauma history influence your treatment approach?
- Do you possess skills in certain areas of treatment, i.e. EMDR (Eye Movement Desensitization and Reprocessing), Trauma Focused Cognitive Behavioral Therapy, play therapy, etc.? Please list your certification/licensure.
- What Evidenced based training do you have?

https://www.childwelfare.gov/pubPDFs/child-trauma.pdf
Trauma-Specific Services

- Child-Parent Psychotherapy (CPP): Ages 0-6
- Trauma-Focused Cognitive-Behavior Therapy (TF-CBT): Ages 0-17
- Cognitive Behavioral Intervention for Trauma in Schools (CBITS): 5th-12th grade
- Bounce Back-Elementary adaptation of CBITS: Kg-5th grade
- Parent-Child Interaction Therapy (PCIT): Ages 2-8
- Alternatives for Families: A Cognitive Behavioral Therapy (AF-CBT): Ages 5-17
- Eye Movement Desensitization and Reprocessing (EMDR): Ages 2 and up
- Circle of Security: Early intervention program for parents and children: Ages preschool to age 5.

To find a local therapist visit nebraskamentalhealth.com

http://nebraskamentalhealth.com
Resources

- Trauma Informed Care e learning modules
  http://www.acesconnection.com/blog/trauma-informed-care-e-learning-modules-open-access
- Resource Guide to Trauma-Informed Human Services
  https://www.acf.hhs.gov/trauma-toolkit
- Trauma Informed Oregon
  https://traumainformedoregon.org/resources/
- SAMHSA Trauma-Informed Approach and Trauma Specific Interventions
  https://www.samhsa.gov/nctic/trauma-interventions
- Child Trauma Academy
  http://childtrauma.org/
- National Child Traumatic Stress Network
  https://www.nctsn.org/
  https://www.nctsn.org/trauma-informed-care/creating-trauma-informed-systems
- ACES Too High
  https://acestoohigh.com/
- Trauma-Informed Care and Trauma-Specific Services: A Comprehensive Approach to Trauma Intervention
- SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach
  https://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf
- Trauma Matters Omaha
  https://traumamattersomaha.org/
Screening and Assessment of Trauma

Trauma-Based Screenings and Assessments

SAMHSA
https://www.integration.samhsa.gov/clinical-practice/screening-tools

NCTSN

TRAUMA SCREENING AND ASSESSMENT TOOLS FOR CHILDREN AND ADOLESCENTS
http://www.actforyouth.net/resources/pd/trauma-assess-tools.pdf
References

- https://www.cdc.gov/violenceprevention/acesstudy/ace_graphics.html
- https://www.samhsa.gov/nctic/trauma-interventions
- https://www.nctsn.org/trauma-informed-care