

Trauma Informed Care and Universal Precautions: You Don't Know What You Don't Know

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LEARNING OBJECTIVES

- Define trauma and toxic stress
- Identify impacts of trauma on brain development & lifelong health
- Clarify between individual and systemic traumatic stress
- Understand how implementing trauma informed care can help us provide better care for our patients, families, and ourselves

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Taking Care of Ourselves

- Today's information can affect people differently and may be upsetting.
- It is important to know that:
 - Self care is important, always!
 - Please approach us at any point to talk privately
 - Please feel free to get up, walk, take a break, etc.
- COVID-19 has many uncertainties and new ways of interacting. This can bring new stresses and affect our allostatic load.
 - Take notice of current state and take things one step at a time.

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Systemically Buffering Toxic Stress...

Awareness
Awareness of the prevalence and effects of trauma

Sensitive Practices
Universal precautions to prevent unintentional harm

Trauma Informed Healthcare

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Resilience at Work

Understand the impact of trauma in their own lives and in their work.
Empowered with available interventions designed to care for them while they care for others.

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Understanding (Psychological) Trauma

- Any experience that overwhelms ability to cope.
 - Individual
 - Family
 - Community
- EVENT
- EXPERIENCE
- EFFECTS

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SAMHSA, 2015

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Potential Traumatic EVENTS

What comes to mind

- MVA
- Child maltreatment
- Community violence
- Terrorist attacks/War
- Divorce
- Being bullied
- Medical crisis
- Being laid off/furlough
- Natural disasters (COVID-19)

More often missed

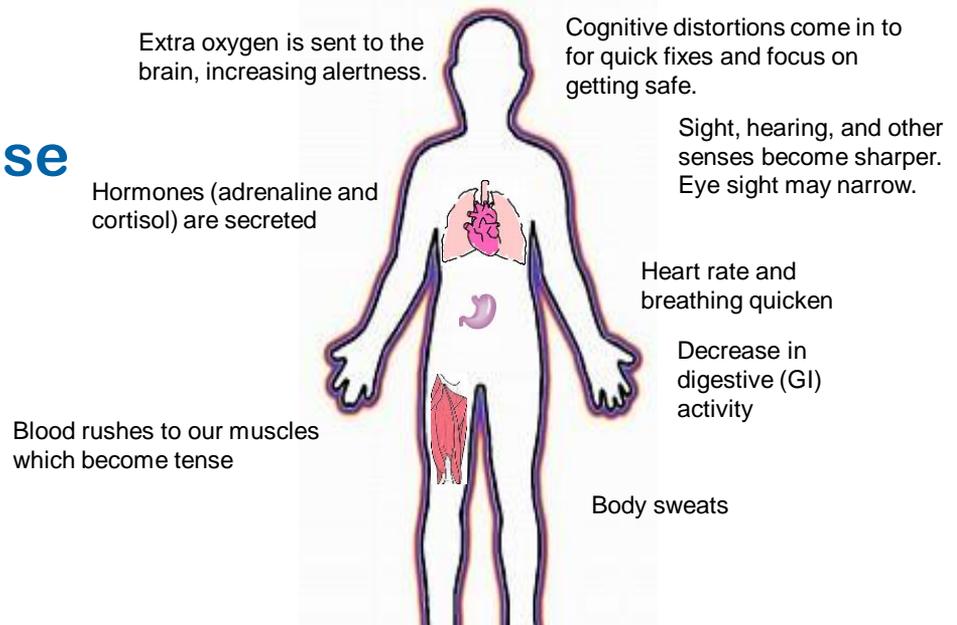
- Systemic racial discrimination
- Family member w/ mental illness or Substance Abuse
- Explicit and Implicit biases (sexual orientation, weight, gender, culture)
- Secondary trauma at work
- Poverty
- Sexual Harassment
- Exposure to IPV

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NCTSN; Felitti & Anda, 1998; Hall, 2013, CPI, Sanders & Hall, 2018



Stress Response System



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Brain in the palm of your hand

- Palm and wrist – brain stem (“automatic” brain – blood pressure, breathing, heart rate, digestion)
- Thumb – “emotional” brain (triggers the fight, flight & freeze)
 - Real threats
 - Triggered memories of threats (ie. Sound of someone’s voice, facial expression of a teacher, simple touch on the shoulder...)
- Fingers – Prefrontal Cortex (“thinking” brain - reasoning and emotional control)
- “Flip your Lid”
 - Child yelling at teacher when they think they’re unfair
 - Parent not sharing their full story, was triggered when walking into clinic



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2010, Siegel, D.

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Why do some cope well and others do not?...

Positive Stress

- Brief increases in heart rate, mild elevations in stress hormone levels.
- Normal part of healthy development
- Result of briefly distressing experiences



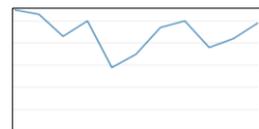
Tolerable Stress

- Serious, temporary stress responses, buffered by supportive relationships
- Result of more severe, longer-lasting difficulty



Toxic Stress

- Prolonged activation of stress response systems in the absence of protective relationships
- Result of strong, frequent and/or prolonged adversity



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Center on the Developing Child; Harvard University

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Common Effects on Belief Systems

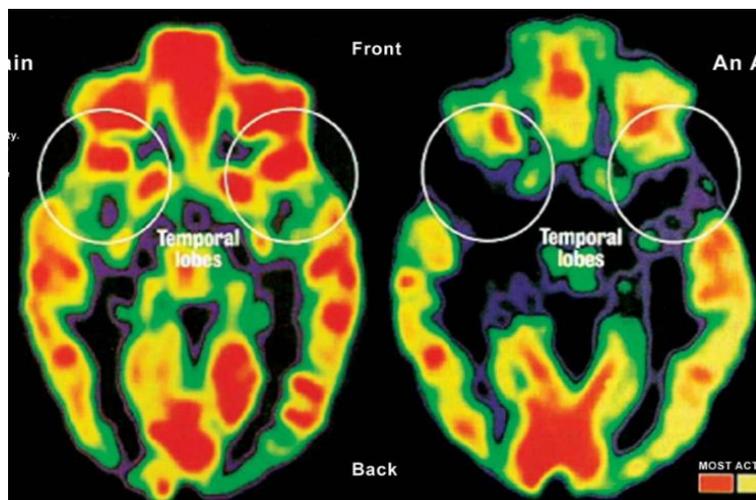
- Relationships
- Misplaced guilt or shame
- Silenced, fear of reaching out
- Hesitance to trust again
- Historical oppression



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NCTSN; Deblinger et al 2015; SAMHSA

Effects of trauma on the brain



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<https://www.childwelfare.gov/pubs/issue-briefs/brain-development>

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Learning



Studies show chronically traumatized children to have lower intellectual functioning, specifically as shown in Verbal and Full Scale IQ assessments in math and reading, when compared to others.

Think about a child who is bullied at school ...

or a child with an undocumented parent ...

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Gaowitz et al. 2008. Debellis, 1998. van derKolk. 2014. Bloom, 2013. Cohen, 2015.

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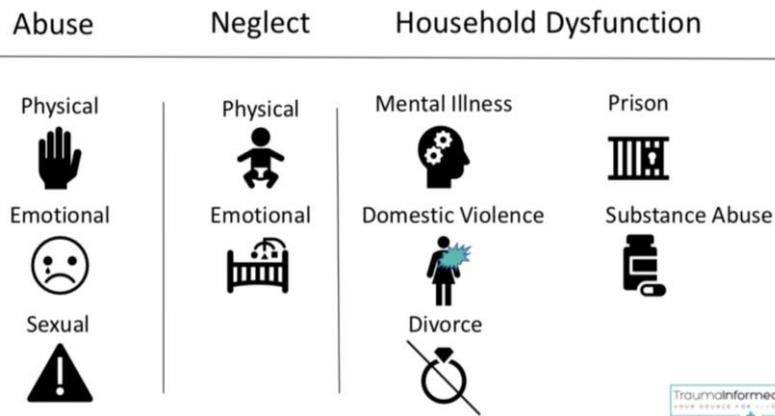
Resilience in the Brain

- PTSD is treatable!
- Brain Plasticity
- Cannot erase the trauma
- Opportunity for healing
- Learn to self-regulate thoughts and emotional reactions

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The Adverse Childhood Experiences Study (N=17,000+)



What did the ACE Study Show?

1. Prevalence of ACEs were much more common than had been known

- 2/3 of respondents reported at least one ACE and 87% of those ≥ 2 .

2. Graded dose-response relationship with chronic medical and mental health conditions in adulthood.

- With an ACEs Score ≥ 4 vs 0, relative disease risk rose to the following:

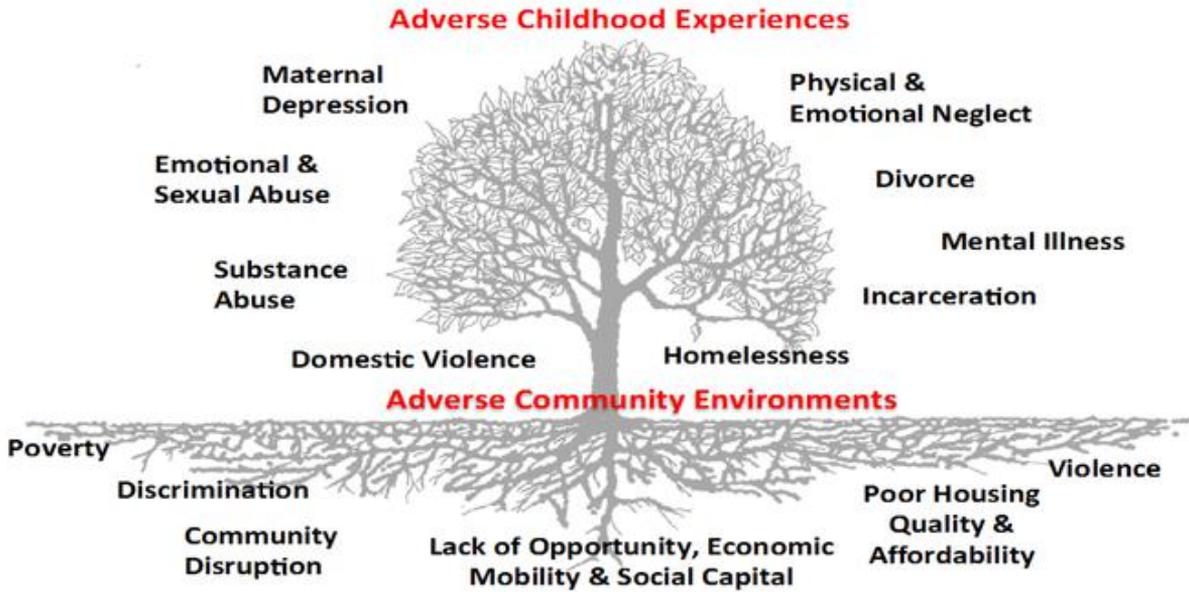
1.6	Diabetes	3.9	COPD
1.9	Cancer	4.6	Clinical Depression
2.2	Heart Disease	4.7	Illicit Drugs
2.4	Stroke	12.2	Suicide Attempt

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Felitti et al, 1998; www.cdc.gov

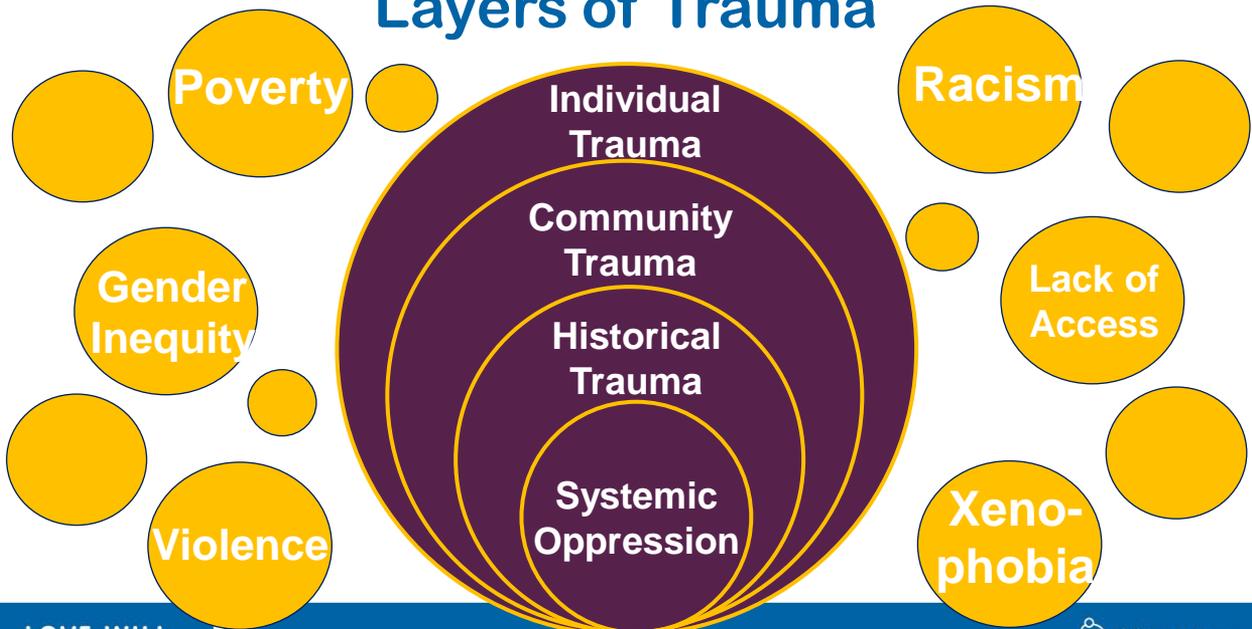
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Further Culprits of Trauma – The Pair of ACEs



Ellis, W., Dietz, W. (2017). A New Framework for Addressing Adverse Childhood and Community Experiences: The Building Blocks of Resilience. *ISCD's Model of Child Development*, 17(2017), 500-508.

Layers of Trauma



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Alive and Well Communities, 2019



Findings in Children and Families today...

- Children with **4 or more ACEs** are **32 times more likely** to have behavioral problems in school.
- Children with **3 or more ACEs** are nearly **4 times** (OR=3.66) more likely to have developmental delays
- Adolescents with **7 or more ACEs** are **51 times more** at likely to attempt suicide
- Children with **4 or more ACEs** are **6.2 times** more likely to use alcohol by 14 years old.
- Young children with an ACE score of **4 or greater** are **twice as likely** to have a body mass index (BMI) ≥85%.

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Burke et al, 2011; Boynton-Jarrett et al, 2010; Dube et al, 2006 and 2001; Marie-Mitchell et al, 2013, endabusenetworkofcare4elearning.org;



Healthcare System Bias ⇌ Toxic Stress ⇌ Health Disparity

- “Racism is a core social determinant of health that is a driver of health inequities. These health inequities are not the result of individual behavior choices or genetic predisposition but are caused by economic, political, and social conditions, including racism.” (Pediatrics, 2019)
- IOM 1999 – “minorities are less likely than whites to receive needed services, including clinically necessary procedures, even after correcting for access-related factors, such as insurance status”.
- Physicians' implicit racial bias has been associated with less patient-centered communication and informed decision making with minority patients.
- With complex decisions requiring trust in patients' reports, such as in the management of chronic pain or chest pain, physicians have exhibited racial bias in decision making.
- Implicit (unconscious) bias is significantly related to patient-provider interactions, treatment decisions, treatment adherence, and patient health outcomes

IOM, 1999; Annual Review of Public Health, 2016; Cuevas, 2013; Flores, 2010; Wallander et al, 2012; Health Equity and Children's Rights, Pediatrics April 2004, Smedley, B.D., 2003; Saha, S., et al, 2007; Pediatrics, 2019

Why Trauma Informed Practice?

- Trauma is pervasive and diverse
- Trauma's impact can be deep and life-shaping
- Trauma differentially affects populations and has cumulative effects
- **Trauma affects how people approach services**
- **Trauma affects how we do our job**

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Hall, et al, 2015; Perez-Stable, El-Toukhy, 2018

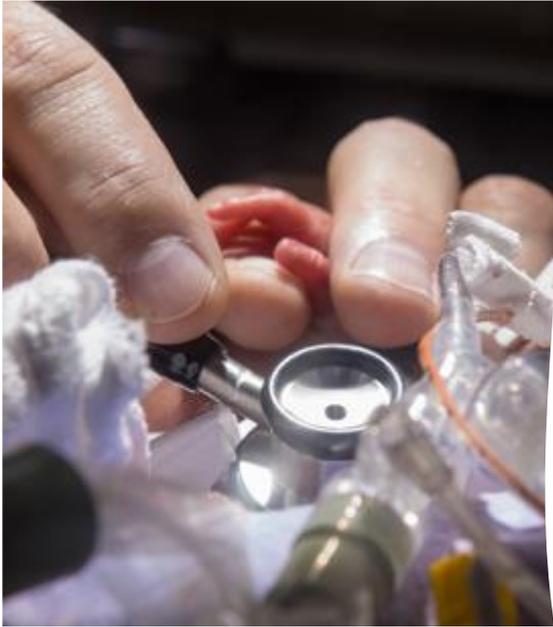


The Challenge – We don't know what we don't know...

- Similar to Standard Precautions in healthcare
 - We don't know what kind of diseases/illnesses our patients have, so we treat everyone with caution
- Trauma-Informed Care
 - We don't know what kinds of experiences our patients have had when they present for services, so we need to approach them in a universally sensitive manner

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What is Trauma Informed Care?

1. **Realizes** impact of trauma and potential recovery
2. **Recognizes** signs & symptoms of trauma in patients, families, staff
3. **Responds** by incorporating TIC policies and procedures
4. Actively **Resists** re-traumatization

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SAMHSA, 2018

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How to address effects of trauma...

- We cannot address trauma if we are continuing to cause it.
- Among the many contributing factors to healthcare disparities are **health worker bias** and **barriers to trust** (from pt to healthcare staff).

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Hall et al, 2015; Cuevas, 2013; Flores, 2010; Wallander et al, 2012; Health Equity and Children's Rights, Smedley, B.D., 2003; Saha, S., et al, 2007

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Trauma Informed Key Principles

A trauma informed approach incorporates the Key Principles into every interaction, policy and procedure.



SAFETY



TRUST



CHOICE



COLLABORATION



EMPOWERMENT



CULTURAL
HUMILITY

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Missouri Model: A Developmental Framework to Trauma Informed, 2014
Harris & Fallot, 2001; SAMHSA (2014)

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Common triggers in the healthcare setting

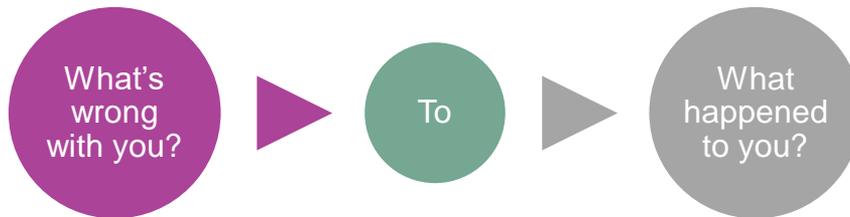
- Invasive procedures and removal of clothing
- Physical touch/ Vulnerable physical position
- Personal questions that may be embarrassing/distressing
- Loss of privacy
- Feeling unheard by provider/team
- Facing persons with authoritative stance
- Insinuation that you did something wrong
- Feel caretaking ability is being questioned
- Judgment

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Trauma Informed Healthcare System

- A trauma informed perspective reinforces the notion that all people want to live their best lives.
- Creates a cultural shift in healthcare -Instead of thinking:



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Keys to Implementing Trauma Sensitive Practices

1. Minimize the Risk of Retraumatization or Replicating Prior Trauma
2. Create a Safe Environment
3. Incorporate trauma informed key principles into practice
4. Refer as needed to Trauma focused interventions



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Tip 57: Trauma informed care in behavioral health services, SAMHSA, 2015

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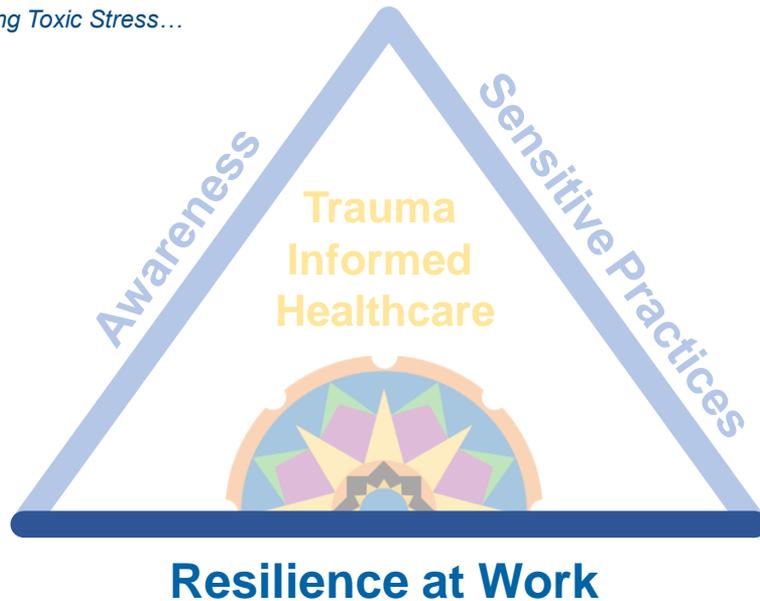
Trauma Sensitive Practices

Safety	<ul style="list-style-type: none"> • Grounding - take time to familiarize person with environment
Trust	<ul style="list-style-type: none"> • Explain rationale for what you are doing.
Choice	<ul style="list-style-type: none"> • Explain/ask before you close the door, curtain.
Collaboration	<ul style="list-style-type: none"> • Persons with lived experience are “Experts”
Empowerment	<ul style="list-style-type: none"> • Teach skills so that parents are equipped
Cultural Humility	<ul style="list-style-type: none"> • We don't know what we don't know. • Check own assumptions. Ensure balance of power.

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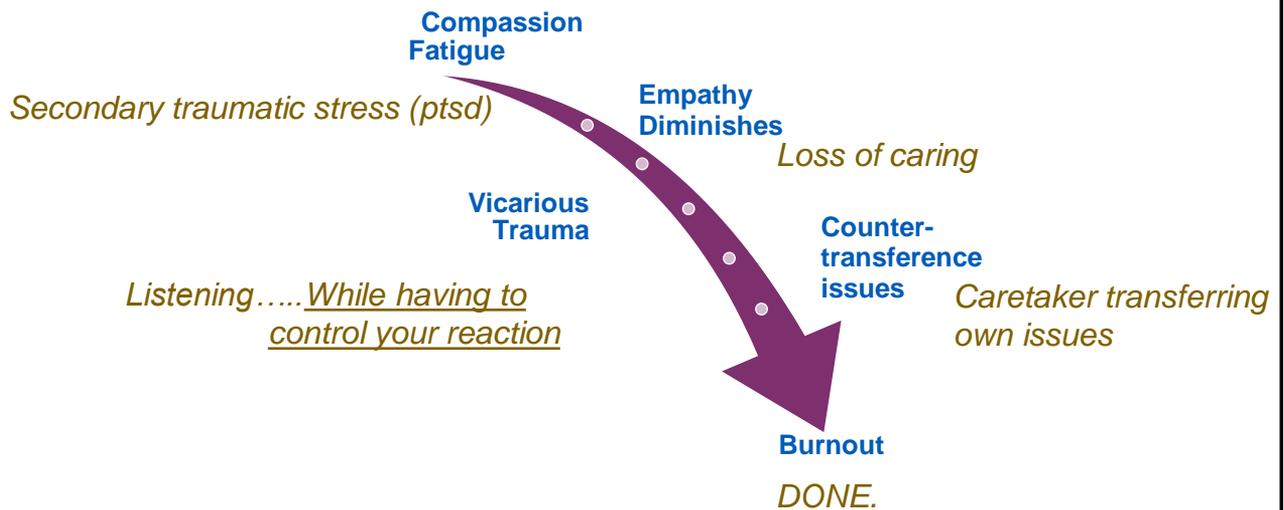
Systemically Buffering Toxic Stress...



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What happens?



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Vicarious Trauma Institute, www.vicarioustrauma.com 2012, ViveBene, LLC

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Organization

“When people perceive their organizations to be supportive, they experience lower levels of vicarious trauma” (Jansen, G., 2004).



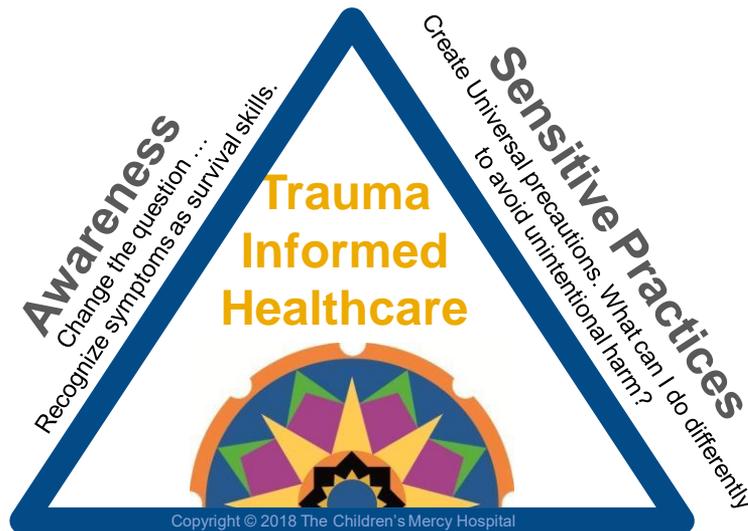
Organizational Resilience at Work

Support and care for entire staff is essential, not an option or luxury.

Destigmatize fact that VT is occupational hazard of working with trauma affected population
Assume every employee wants to be a high performer.

In stressed systems, trauma can be a reality for administrators and staff. We can apply much of what we know about trauma and recovery to the agency or program as a whole.

Encourage psychosocial and psychological help with **no stigma**
Create working environment that is respectful toward staff and patients
Encourage self-care



Resilience at Work

Make it an intentional act to care for ourselves so that we can care for others.

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Trauma-Informed pediatric healthcare reminders

- Don't take it personally.
- Work to understand that an individual's responses and behaviors may be a result of changes in the brain and body and designed for safety.
- Remain nonjudgmental, consider what you don't know
- Recognize our own privilege may blind us from seeing generational effects of the trauma of oppression
- Encourage parents to be the heroes for their children (not us!)
- Be transparent
- Give Grace...Forgive each other, forgive our own failures...

Learning Outcomes –

- Define psychological trauma and toxic stress
Events, Experiences, Effects
- Understand how trauma impacts brain development and lifelong health
The ACE Study, Changes in brain architecture
- Clarify between individual and systemic traumatic stress
The Pair of ACEs
- Delineate need for trauma-informed care
Pervasive, Life-shaping, & Affects how people approach services
- Identify the basic principles of trauma informed care
Safety, Trust, Choice, Collaboration, Empowerment, and Cultural Humility

How has Trauma Informed Care education changed my practice?

- <https://bcove.video/3z5F5jP>

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Resources

- www.traumainformedmd.com
- www.NCTSN.org
- www.Healthcaretoolbox.org
- www.developingchild.harvard.edu

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