



***SAMHSA-HRSA
Center for Integrated
Health Solutions***

**Aligning Primary Care Practices with
Trauma-Informed Care Principles and
Practices – *Informational Webinar***

Trauma-Informed Care (TIC) Pilot Poster
Technical Assistance Project

November 8, 2013

**Slides for today's webinar are
available on the CIHS website at:**

<http://www.integration.samhsa.gov/pbhci-learning-community/webinar-calendar>

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Welcome!

- **Tenly Biggs, SAMHSA GPO**
- **Cheryl Sharp, Senior Advisor, National Council Trauma Informed Services**
- **Linda Ligenza, CIHS Liaison, TIC Faculty**
- **Tony Salerno, CIHS Liaison, TIC Faculty**

Overview of the Webinar

- Welcome & Introductions
- What is trauma? What is trauma informed care?
- Why is trauma informed care important?
- What can be done to provide sensitive practices in integrated settings?
- Poster Project aims, benefits, messages
- Project Details: What the resource team will provide
- Project Details: Expectations of participating grantees
- Timelines and tasks
- How to apply
- Next steps and Q & A

SAMHSA's Trauma Strategic Initiative

- Integrating a trauma informed approach throughout health, behavioral health and related systems in order to reduce the harmful effects of trauma and violence on individuals, families and communities.

SAMHSA's Concept of Trauma (draft)

Individual trauma results from an **event**, series of events, or set of circumstances that is **experienced** by an individual as physically and/or emotionally harmful or threatening and that has lasting adverse **effects** on the individual's functioning and mental, physical, social, emotional, and/or spiritual well-being

Examples of Traumatic Life Experiences

- Physical, emotional and/or sexual abuse in childhood or adulthood
- In Childhood
 - neglect or abandonment (food insufficiency, lack of money to met basic needs, homelessness)
 - death of a parent
 - divorce
 - family life that includes drug addiction, alcoholism, parental incarceration, violence
- Rape
- Serious medical illness or disease (disabling conditions, loss of function, invasive and distressing procedures)

Why Focus on Trauma and Trauma Informed Care in Integrated Settings?

Why is Understanding Trauma Important?

- To provide effective services we need to understand the life situations that may be contributing to the persons current problems
- Many current problems faced by the people we serve may be related to traumatic life experiences
- People who have experienced traumatic life events are often *very sensitive* to situations that remind them of the people, places or things involved in their traumatic event
- These reminders, also known as triggers, may cause a person to relive the trauma and view our setting/organization as a source of distress rather than a place of healing and wellness

Prevalence of Trauma in Behavioral Health

- Majority of adults and children in inpatient psychiatric and substance use disorder treatment settings have trauma histories
(Lipschitz et al, 1999; Suarez, 2008; Gillece, 2010)
- 43% to 80% of individuals in psychiatric hospitals have experienced physical or sexual abuse
- 51%-90% public mental health clients exposed to trauma
(Goodman et al, 1997; Mueser et al, 2004)
- 2/3 adults in SUD treatment report child abuse and neglect
(SAMHSA, CSAT, 2000)
- Survey of adolescents in SU treatment > 70% had history of trauma exposure (Suarez, 2008)



The Adverse Childhood Experiences (ACE) Study

- **Center for Disease Control and Kaiser Permanente (an HMO) Collaboration**
- **Over a ten year study involving 17,000 people**
- **Looked at effects of adverse childhood experiences (trauma) over the lifespan**
- **Largest study ever done on this subject**

Impact of Trauma Over the Lifespan

Increases the risk of neurological, biological, psychological and/or social difficulties such as:

- Changes in brain neurobiology;
- Social, emotional & cognitive impairment;
- Adoption of health risk behaviors as coping mechanisms (eating disorders, smoking, substance abuse, self harm, sexual promiscuity, violence); and
- Severe and persistent behavioral health, physical health and social problems, early death.

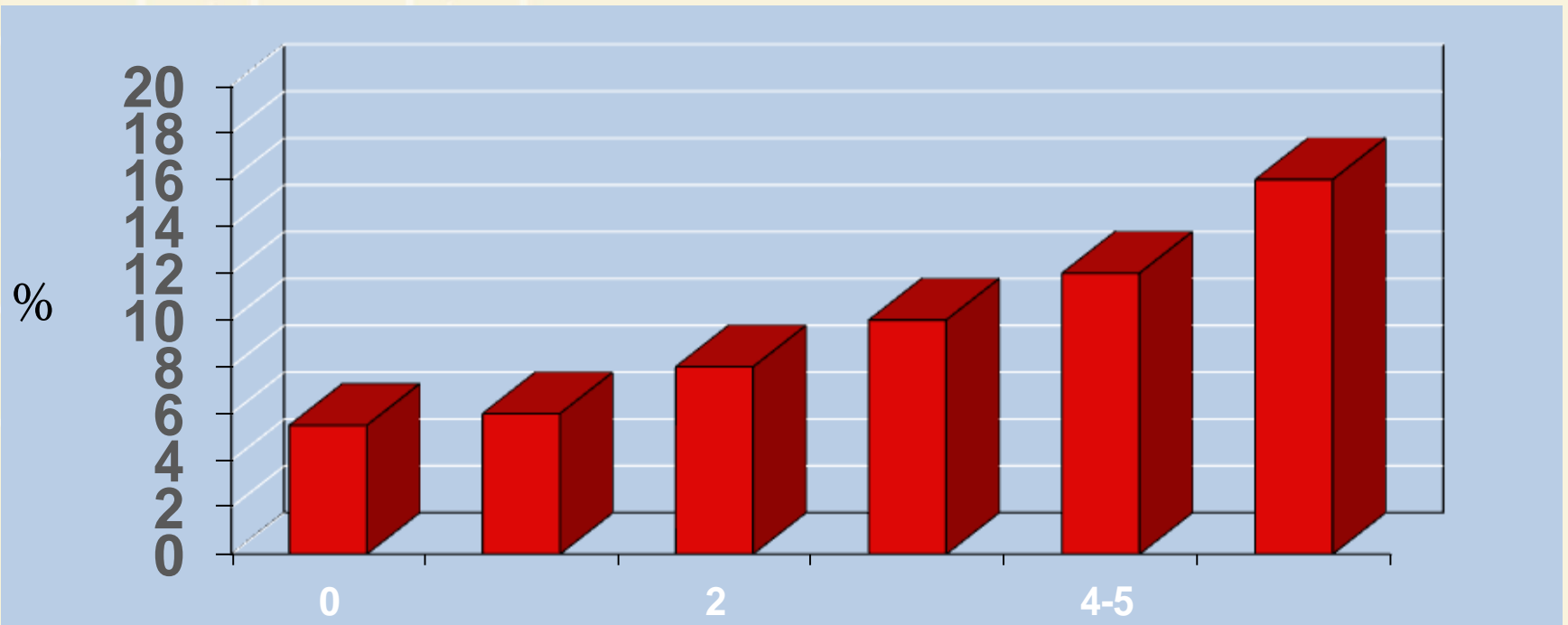
(Felitti et al, 1998)

Healthcare conditions often associated with a history of adverse childhood experiences:

- Diabetes
- COPD
- Heart Disease
- High Blood Pressure
- Obesity
- Cancer
- Liver Disease
- Gynecologic Disorders
- Sexually Transmitted Diseases
- Unintended Pregnancies

“The Hidden Impact of Early Life Trauma On Health and Disease. Chapter 8. in Lanius,. By Felliti and Anda, 2010.”

Adverse Childhood Experiences and Current Smoking



ACE Score

Trauma may negatively influence access to and engagement in primary care:

- Avoidance of medical and dental services
- Non-adherence to treatment
- Postponing medical and dental services until things get very bad
- Misuse of medical treatment services – ex. over use of ER Services and misuse of pain meds

Why medical settings may be distressing for people with trauma experiences:

- Invasive procedures
- Removal of clothing
- Physical touch
- Personal questions that may be embarrassing/distressing
- Power dynamics of relationship
- Gender of healthcare provider
- Vulnerable physical position
- Loss of and lack of privacy

Therefore.....

We need to presume the clients we serve have a history of traumatic stress and exercise “universal precautions” by creating systems of care that are *trauma-informed*.

(Hodas, 2005)

Poll Question 1:

How would you describe your level of knowledge about the connection between trauma and physical health?

- Great Deal**
- Moderate**
- Minimal**

What are Trauma Informed Care Principles and Practices?

What Can Be Done in PC Settings?

SAMHSA's Concept of a Trauma-Informed Approach (draft)

A program, organization or system that is trauma-informed

- (1) **realizes** the prevalence of trauma and taking a universal precautions position;
- (2) **recognizes** how trauma affects all individuals involved with the program, organization, or system, including its own workforce;
- (3) **responds** by putting this knowledge into practice; and
- (4) **resists** retraumatization.

Principles of a Trauma-Informed Approach (draft)

- ***Safety***
- ***Trustworthiness and transparency***
- ***Peer support***
- ***Collaboration and mutuality***
- ***Empowerment and Choice***
- ***Respect for cultural, historical, and gender issues***

Poll Question 2:

How often do issues come up during a physical health visit that may be directly related to a persons adverse life experiences?

- Often
- Sometimes
- Rarely
- Not sure

Challenges for Primary Care Staff

- Training of primary care staff doesn't typically include how to explore and identify the role of trauma as an important factor in a persons physical health status and health risk behaviors
- The pace and culture of primary care settings place considerable time constraints on practitioners
- Staff often have the misconception that considerable time and expertise is required to address trauma issues in the context of primary care visits

What Can Be Done To Provide Sensitive Care and Practices?

- Communicate a sensitivity to trauma issues
- Create a safe and comfortable environment
- Provide services in a trauma informed manner

Poster Project Aims, Benefits, Messages

Aims of this Project

- Field test organizational strategies to align primary care services with the principles and practice of trauma informed approaches
- Develop and test the value of an informational poster as a practical and effective tool/resource to:
 - Publicly communicate a trauma informed value system
 - Increase the awareness of clients about trauma in a way that is empowering
 - keep primary care providers and other client supports focused on trauma informed approaches as part of routine practice
- Assess the benefits of this project to clients and providers alike
- Assess scalability for widespread dissemination

Benefits to the Organization

Adverse life experiences contribute to increased health problems and affects individuals' access to health care services and adherence to treatment.

The aim of this project is to assist primary care and behavioral health partners in addressing these challenges through practical tools and strategies.

What the Poster Communicates

- Public declaration of the organizations values and mission
- Reminder to staff and clients about the impact and role of trauma in health
- Vehicle to convey message to PCP/staff/clients that the organization upholds the principles of Trauma Informed Care and universal precautions
- Empowers clients to engage as partners in their care

Project Details

Project details: Partnership with Participants

The final details regarding methods, poster messages, implementation methods, training content and delivery, and performance indicators is designed as a collaborative effort with the participating organizations

Project Details: Poster

Three messages:

1. Information about trauma

- what it is
- why its important
 - ✓ May raise risk for health problems
 - ✓ May increase avoidance of healthcare services

2. Public statement of trauma informed care values and practices in primary care

3. Empowers patient to share their trauma related concerns

Poster Message 1: DID YOU KNOW....

- **Very difficult life events in childhood or adulthood can have a big effect on a person's emotional and physical health.**
- **Going through difficult life events may result in emotional, physical and substance use concerns.**
- **Difficult life events include:**
 - **Physical, sexual or emotional abuse**
 - **Loss of loved ones**
 - **Neglect or abandonment in childhood**
 - **Growing up in poverty**
 - **Family life that was very stressful due to alcoholism, mental illness or incarceration**
 - **Loss of property, home or livelihood due to natural catastrophes such as floods, hurricanes, tornadoes**
 - **Serious accidents**
 - **Being the victim of or witnessing a crime**
 - **Serious illness/intense medical procedures**
- **Some of these events may make a person very sensitive to and uncomfortable with a medical visit and/or dental exam.**

Poster Message 2

- Your comfort and care is our top priority.
- We will explain what we do and why
- We absolutely want you to tell us if you are dissatisfied with your care and treatment
- We will patiently answer your questions
- We will check in with you to insure your questions are answered and how we can make your visit as comfortable as possible.

Poster Message 3

- **If you wish to inform your doctor or nurse about your experience with very upsetting life events we invite you to share this in a way that is comfortable for you and respect that this decision is completely your choice.**
- **We will do our best to provide you with information and guidance on steps you may take to address your concerns.**

A brief, empathic, validating response by a healthcare provider to someone who discloses a trauma history may be:

- “I’m sorry that that happened to you; no one has the right to hit another person/force another person to have sex”
- “Growing up in an environment of violence is so difficult for a child – no one should have to face such upsetting and scary situations”
- “We know that there is a direct relationship between these experiences and a person’s physical health; have you ever had a chance to explore these?”

Project Details: What the Resource Team will Provide

- Laminated posters for exam and waiting rooms
- Training of Primary Care and Behavioral Health providers via webinars
- Consultation calls to provide TA, support, resources
- Data collection method to gather staff and client feedback
- Project timelines

Project Details: Expectations of Participating Grantees

- Identify project team members including PC and BH leads, consumer(s) and data collection person
- Develop implementation plan
- Design and vet poster (staff and clients)
- Participate in educational webinars focused on the use of the poster and sensitive practices
- Utilize CIHS technical assistance, support and guidance through consultation calls
- Survey clients and staff response to this initiative.

Poll Question 3:

At this point, how would you describe your interest level in participating in this project?

- Very interested
- A little interested
- Not interested
- Not sure yet

Timelines and Tasks

11/8 – Informational Webinar followed by dissemination of RFA and Pilot Application

11/22 – Applications due to Linda Ligenza at lindal@thenationalcouncil.org

12/13 – Selected applicants notified

1/22 – First group planning call to develop implementation plan

How To Apply

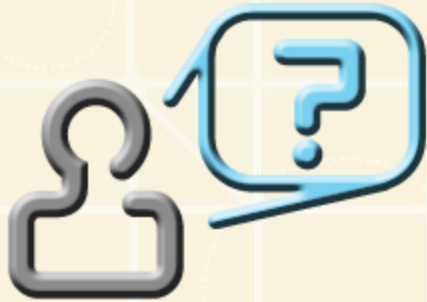
- Look for email with application following this webinar or access it using the following link:

http://integration.samhsa.gov/TIC_Poster_Pilot_Application.doc

- Complete and submit the application, using the embedded link, by November 22nd
- Any questions, email Linda Ligenza at:
lindal@thenationalcouncil.org

Next Steps

- Insure PC and BH leadership buy in and participation
- Create project team composed of PC/BH leaders, consumers and data collection person
- Complete and submit application by November 22nd
http://integration.samhsa.gov/TIC_Poster_Pilot_Application.doc
- Participate in 1st planning call on January 22nd

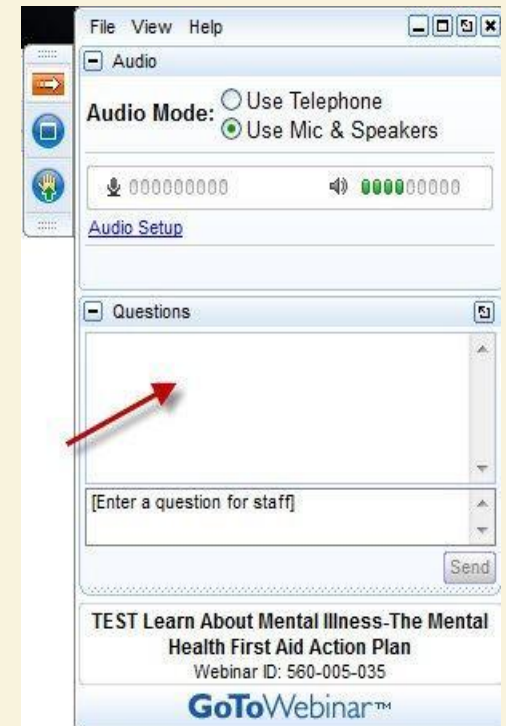


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For more information, resources and technical assistance contact the CIHS team or the presenters at:

Online: integration.samhsa.gov

Phone: 202-684-7457

Email: Integration@thenationalcouncil.org

Thank you for joining us today.

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