

Session H3#  
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3:30 PM



# Trauma Informed Care: An Imperative for Collaborative Care Models

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Collaborative Family Healthcare Association 13<sup>th</sup> Annual Conference  
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# Faculty Disclosure

I **have not** had any relevant financial relationships during the past 12 months.

## Need/Practice Gap & Supporting Resources

*Epidemiologic and neurologic studies over the last two decades confirm that trauma and violence are pervasive public health problems that affect multiple aspects of health and well-being across the life span*

***“There remains a staggering gap between what we know and what we do”***

*Jack Shonkoff, MD, 2000*

# Objectives

At the Conclusion of this workshop you will be able to:

- Cite scientific evidence that supports the imperative for trauma informed approach to healthcare
- Define the principles of trauma informed care
- Understand the potential for organizations to inadvertently re-traumatize the clients/patients they are designed to help.
- Identify individual and organizational goals to develop and/or enhance trauma informed services in collaborative care models.

# Expected Outcome

*Raised awareness of why collaborative care models must adopt a trauma informed approach to practice*

*Initial steps you can take to promote trauma informed practice in your organization*

# Adverse Childhood Experiences

A

- 17,000 adults
- 9 types of adverse experiences

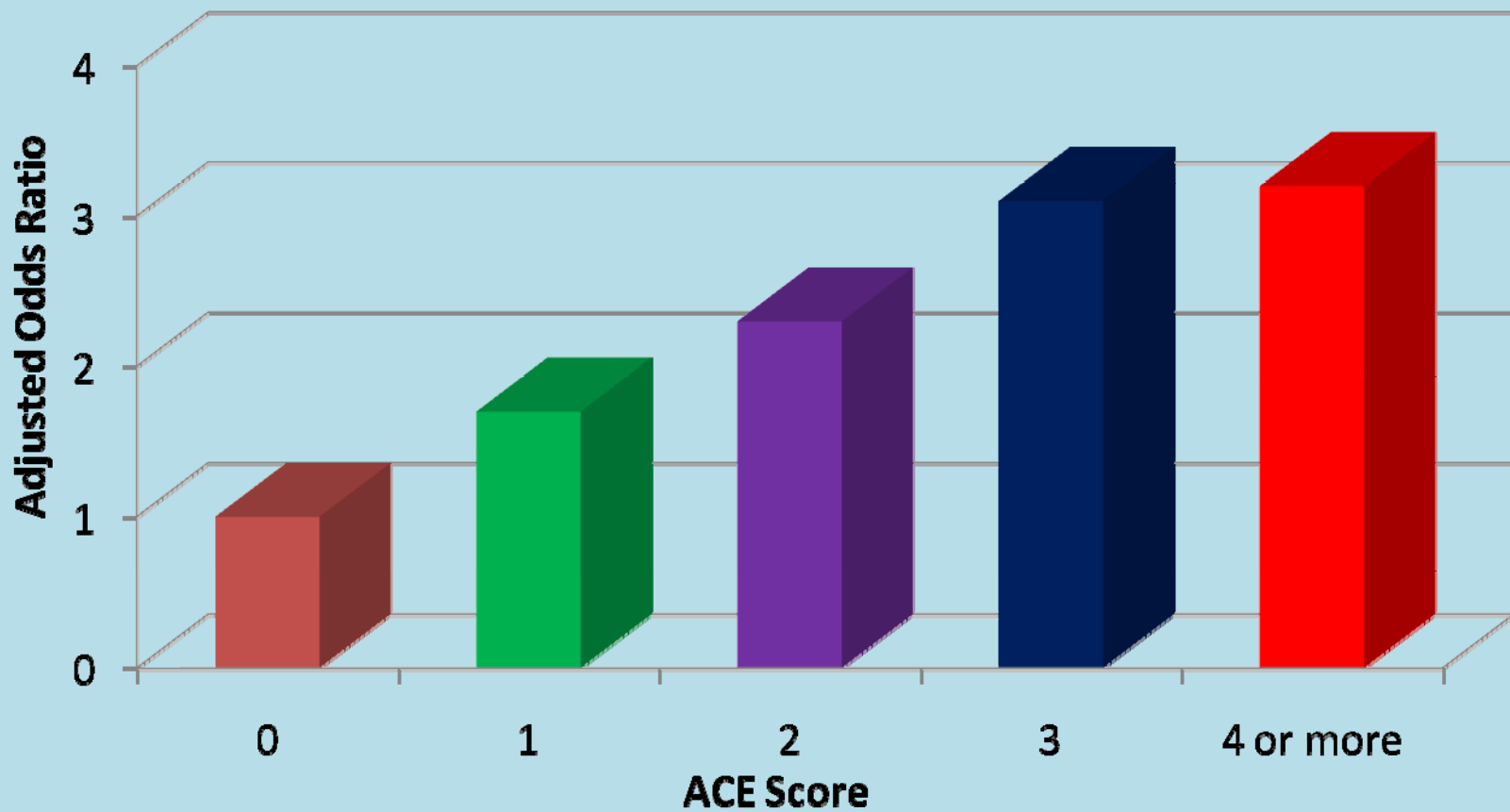
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- Only 1/3 had *NO* ACES
- 16% had *4 or more* ACES
- 9% had *5 or more* ACES

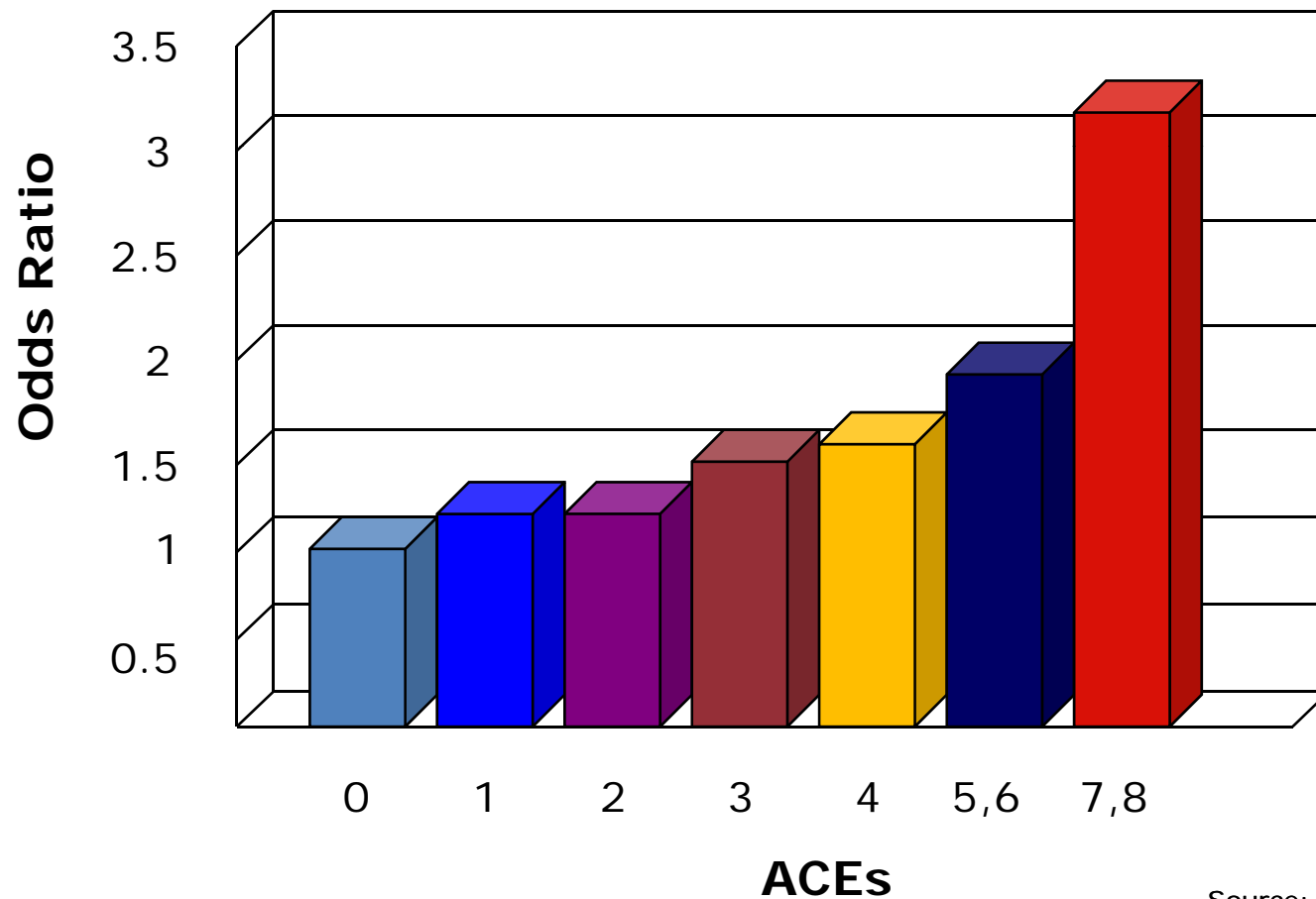
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- More ACES were strongly correlated with significantly poor health outcomes and health risk behaviors

# Adverse Childhood Experiences and Likelihood of > 50 Sexual Partners



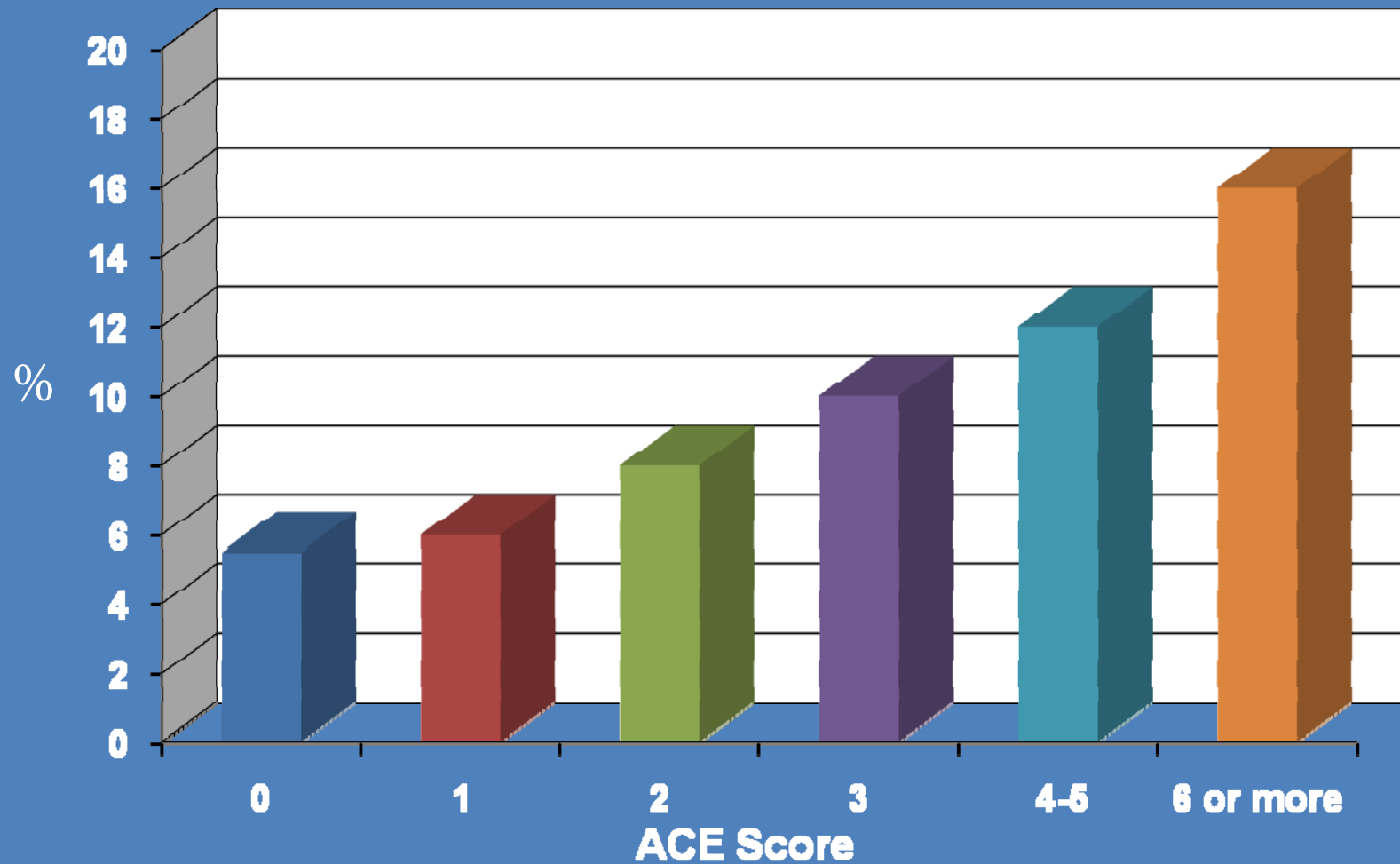
# Adverse Childhood Experiences and Heart Disease



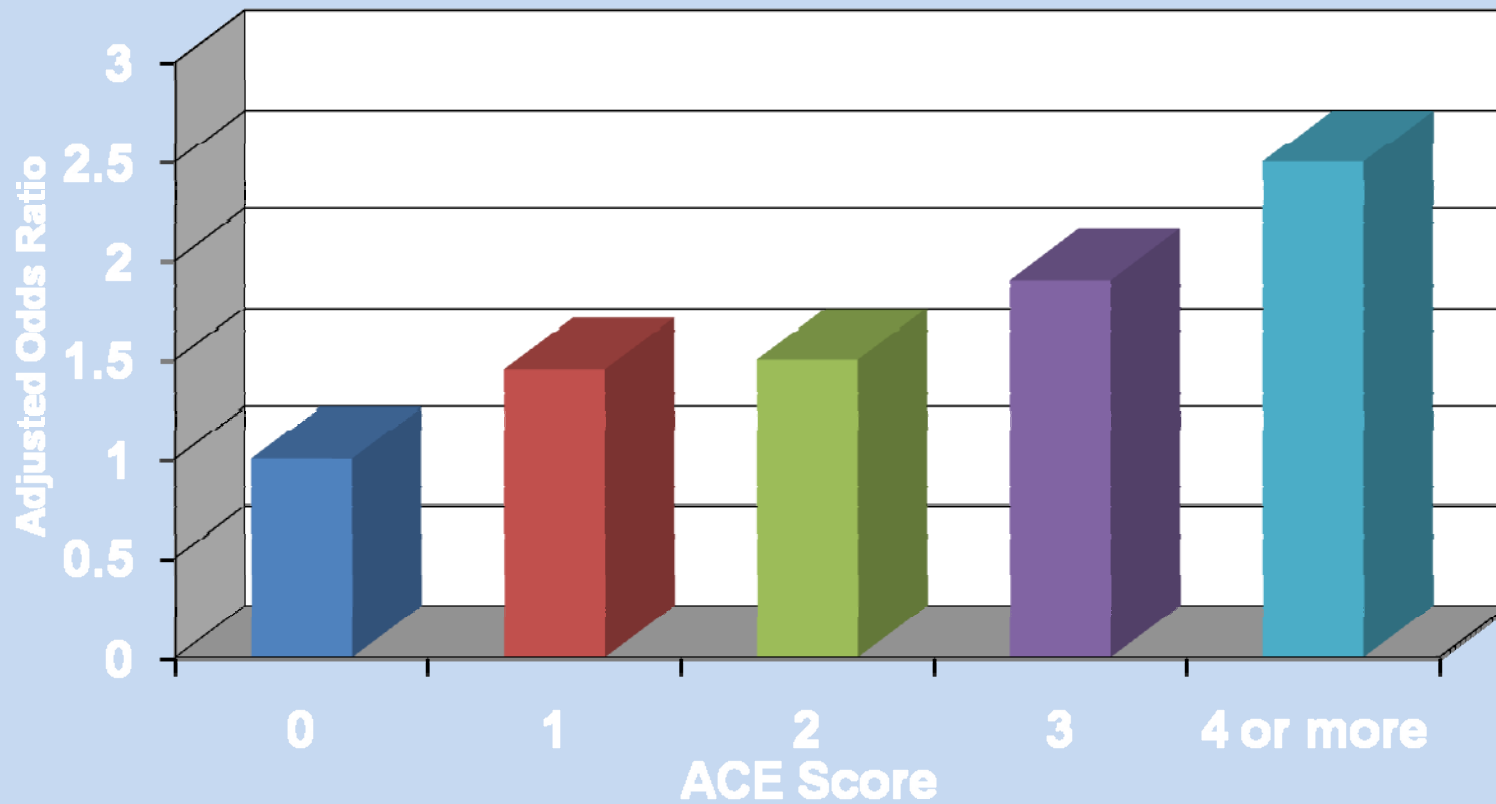
Source: Dong et al, 2004

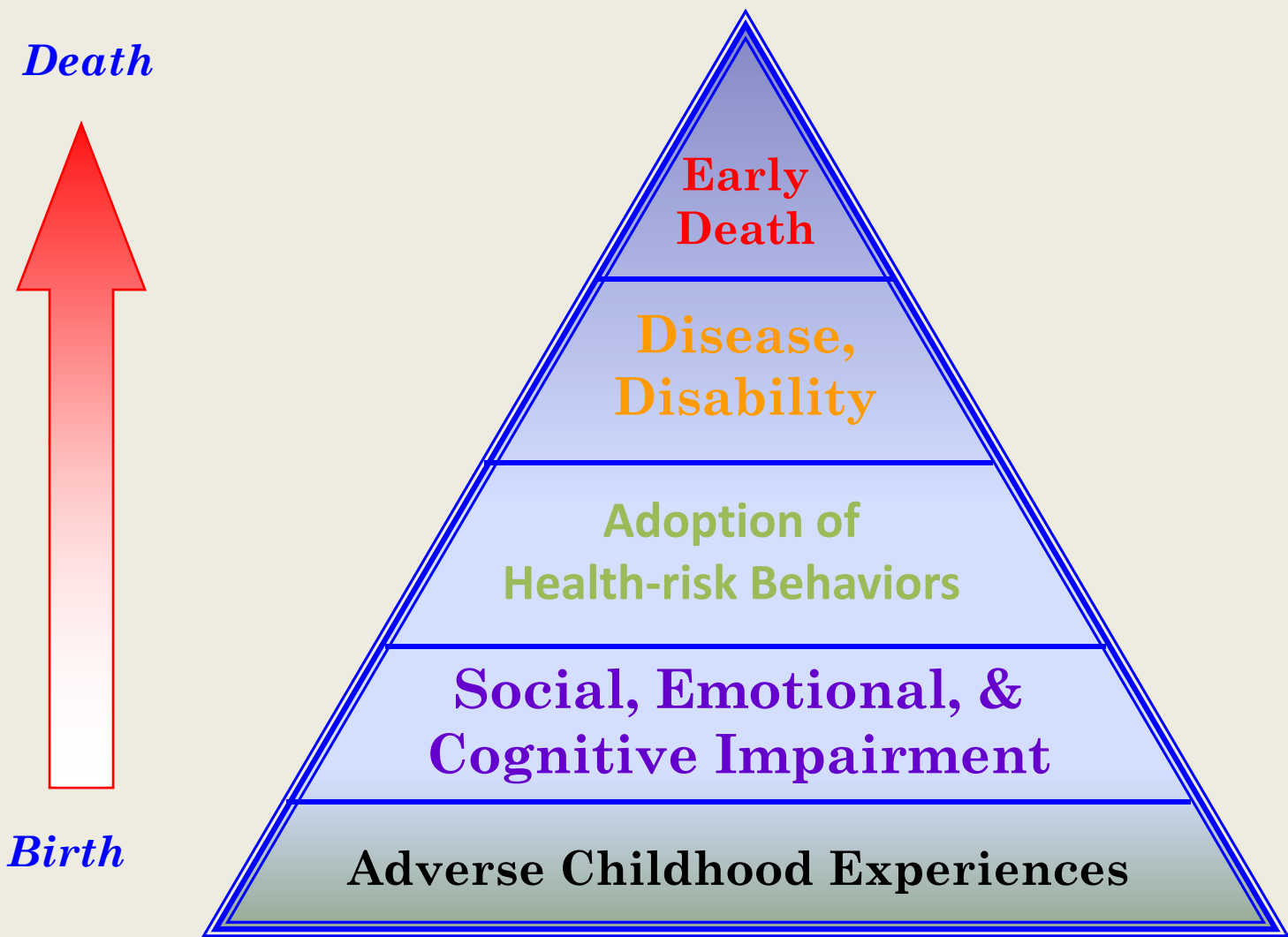


# Adverse Childhood Experiences and Current Smoking



# Adverse Childhood Experiences and History of STD





**The Influence of Adverse Childhood Experiences  
Throughout Life  
ACE's Major Determinant of Health & Well Being  
(Felitti, 2003)**



**A baby's brain is born  
ready to connect.**



**Experience shapes the brain.**



**The brain is a  
“use it or lose it”  
machine.**



**The brain develops  
from the bottom up.**



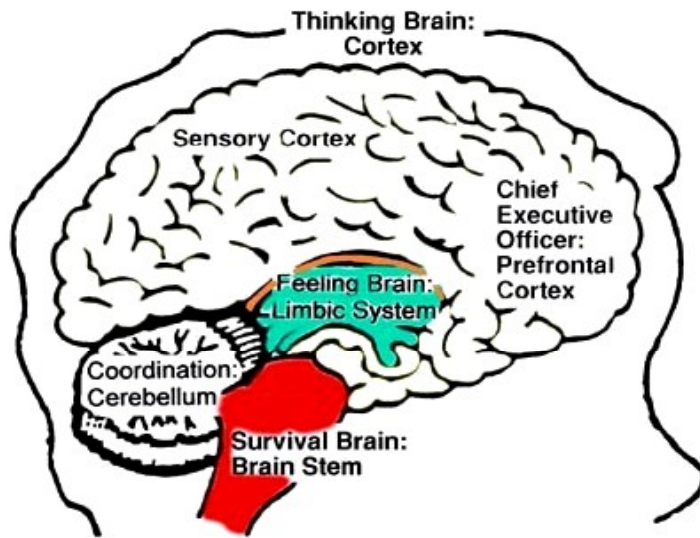


**Healthy, caring relationships  
are food for a growing brain**

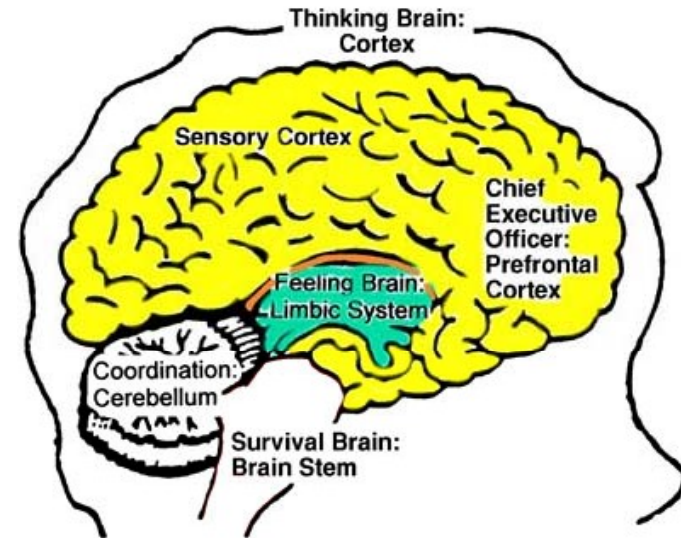




# The Brain on Trauma

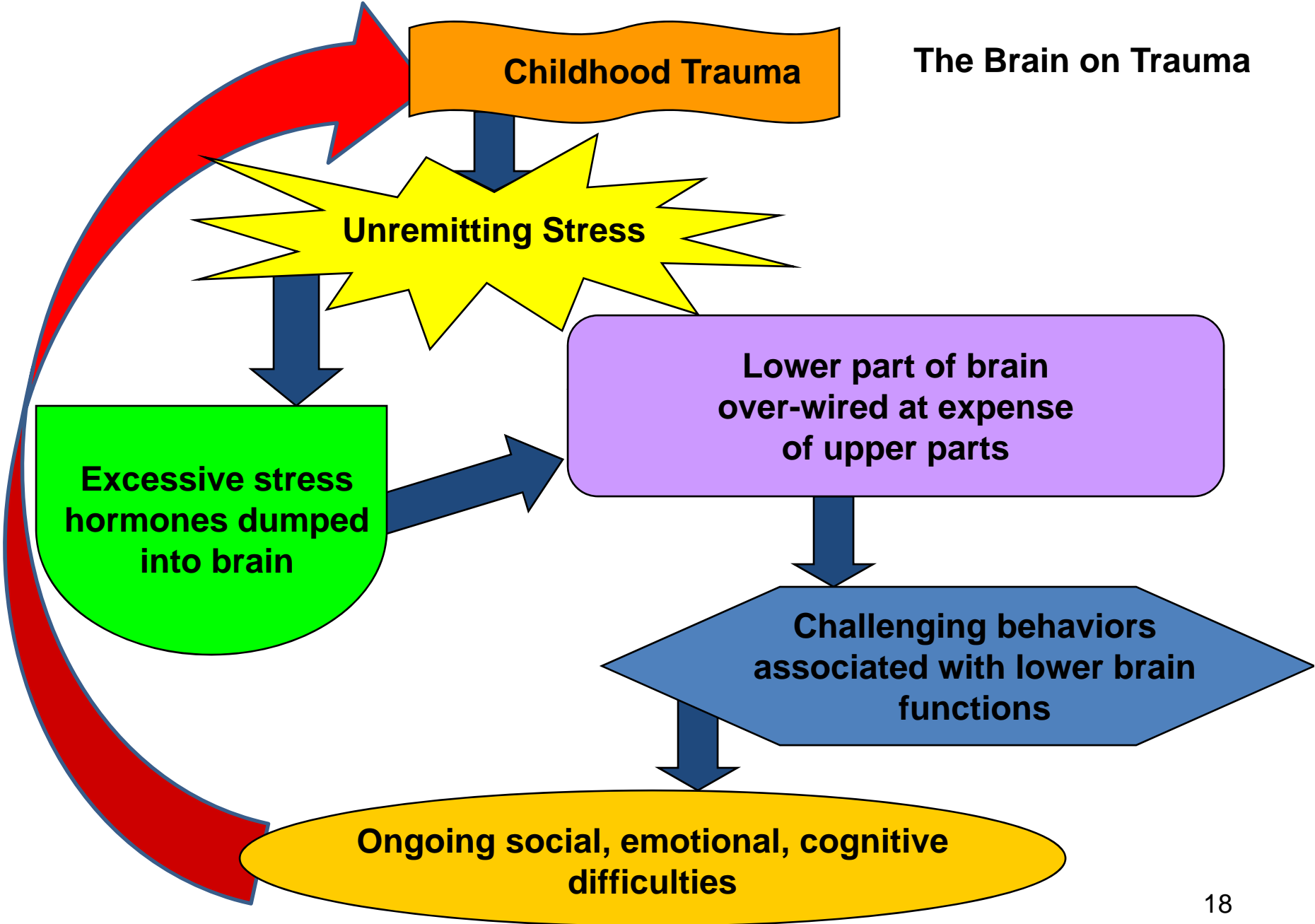


**Stressed Brain**



**Calm Brain**

**The Brain on Trauma**



# Triggers and Re-Traumatization

- Situations that remind individuals of the traumatic experience
  - People, places, things
  - May be sensory, without language
  - May not be obvious to person, but still cause emotional responses
- Situations that are associated with and/or create feelings or sense of:
  - danger
  - loss of control
  - loss of predictability

# Organizational Trauma

- Organizations are like human beings
- Organizations have their own culture
- Organizations can experience and respond to trauma

# Trauma Informed Care

*“A human services or health care system whose primary mission is altered by knowledge about trauma and the impact it has on the lives of consumers receiving services.”*

Harris and Fallot , 2004

*First Do No Harm*

# Trauma Informed Principles

## Fallot and Harris

- Safety
- Trustworthiness
- Choice
- Collaboration
- Empowerment

## Sanctuary

- Growth and change
- Democracy
- Non-violence
- Emotional Intelligence
- Social Learning
- Open Communication
- Social Responsibility

## Wisconsin

- Understand prevalence and impact of trauma
- Promote Safety
- Earn Trust
- Embrace Diversity
- Provide Holistic Care
- Respect Human rights
- Pursue persons strength's, choice and autonomy
- Share power
- Communicate with compassion

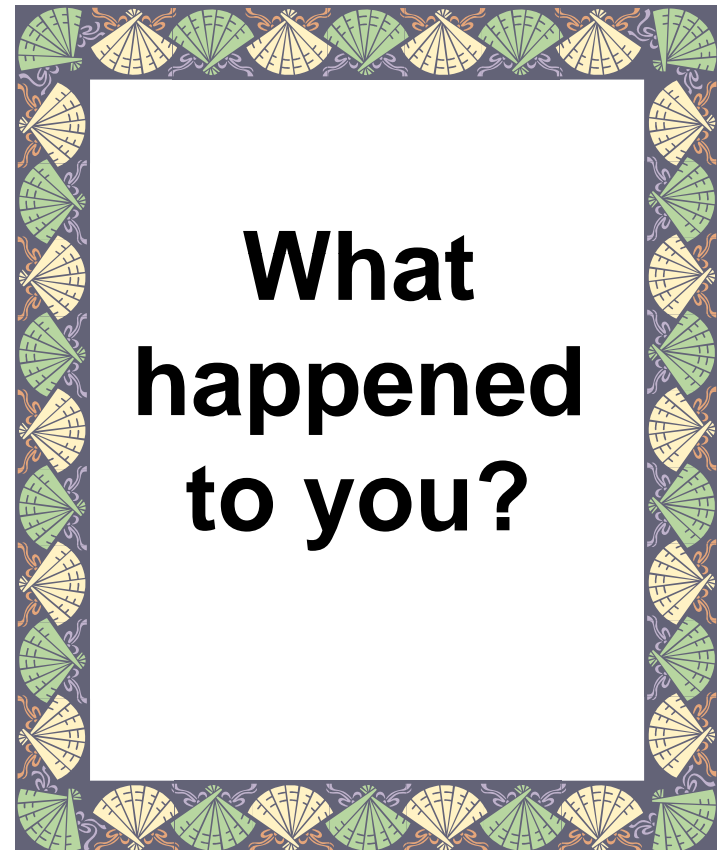
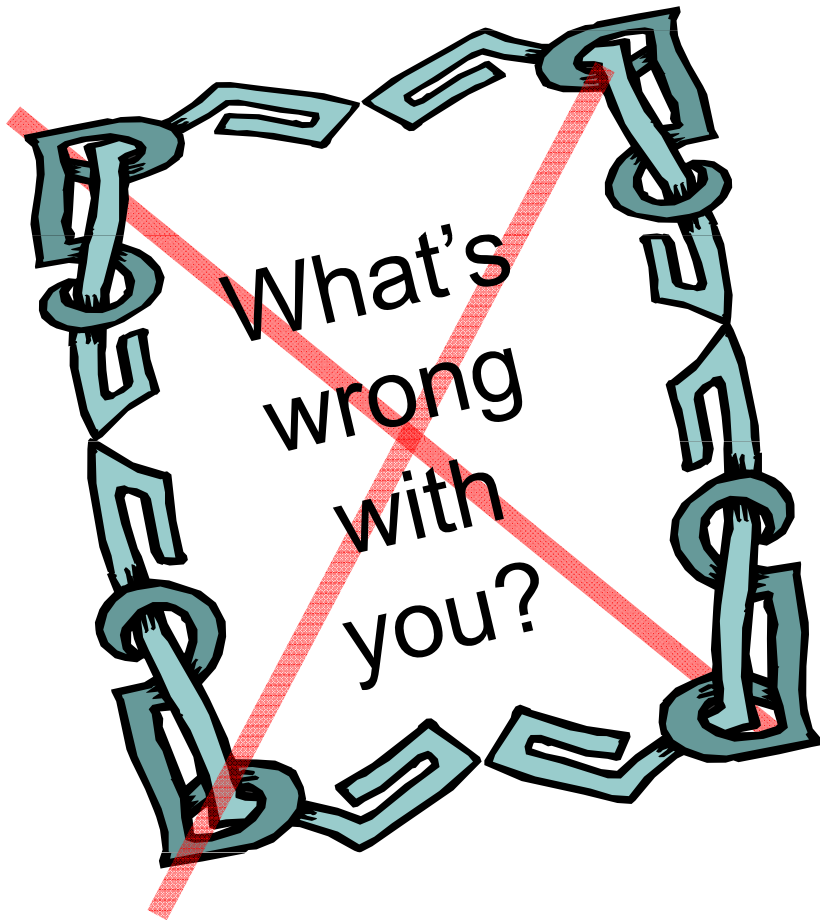
# Three Pillars of Trauma Informed Care

Safety

Connections

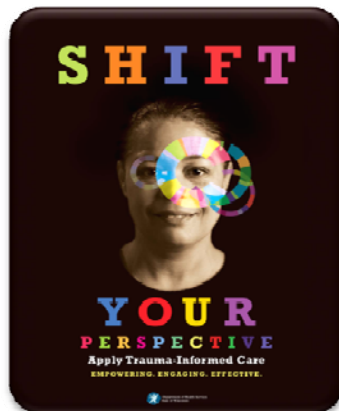
Managing  
Emotions

# Re-Framing the Key Question





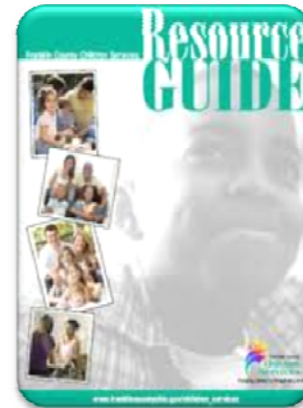
# What You Can Do



**Reframe**

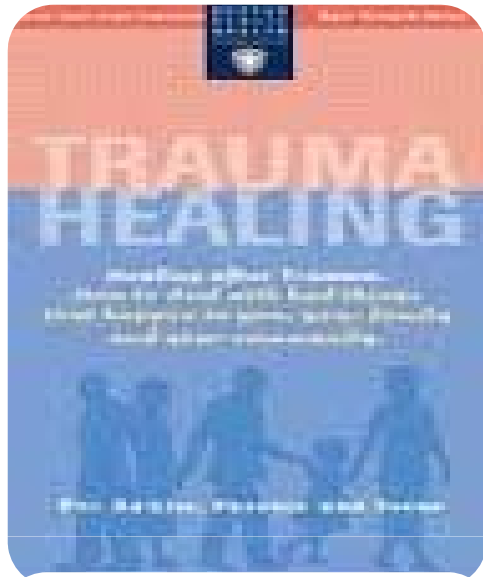


**Learn  
about  
trauma**



**Know  
local  
resources**

# What You Can Do



**Have  
Materials  
Available**



**Promote  
calming  
activities**

# What You Can Do



**Write down  
Instructions**



**Become a TIC  
Champion in  
your  
organization**

# What your Organization Can Do

Organizational walk through

Apply a trauma informed lens to everything you do

Train your entire organization in foundation

Stay current with the emerging scientific research

Network with other organizations

Review the models for organizational change

Create a work group

Involve consumers

# Understanding of Service Relationship

Traditional Services	Trauma Informed Services
Hierarchical staff / patient relationship	A collaborative relationship between the patient and the provider of her / his choice  Patient and the provider are assumed to have valid and valuable knowledge
The patient is seen as passive recipient of services	The patient is an active planner and participant in services
The patient's feelings of safety and trust are taken for granted	The patient's safety must be guaranteed and trust must be developed over time

# Is It Possible?

**Bayview Hunters Clinic,  
San Francisco**

**Eleventh Street Clinic,  
Philadelphia**

**Your Clinic??**

## CFHA Mission and Trauma Informed Care

For us, collaboration isn't just a word in our name; it defines who we are, how we interact with each other and other organizations.

We believe deeply that collaboration is an essential element necessary for re-visioning healthcare, specifically, and society, generally.

# Session Evaluation

Please complete and return the evaluation form to the classroom monitor before leaving this session.

**Thank you!**





# Resources

- ACE Study. The Centers for Disease Control and Prevention reports on the Adverse Childhood Experiences (ACE) Study - one of the largest investigations ever conducted on the links between childhood maltreatment and later-life health and well-being.  
[www.cdc.gov/nccdphp/ace](http://www.cdc.gov/nccdphp/ace)
- National Center for Posttraumatic Stress Disorder,  
<http://www.ncptsd.org>
- National Child Traumatic Stress Network, <http://www.nctsn.org>
- The National Working Group on Evidence-Based Health Care. [www.evidencebasedhealthcare.org](http://www.evidencebasedhealthcare.org).
- Linda Weinreb, M.D., Vice Chair and Professor Dept. of Family Medicine and Community Health University of Massachusetts Medical School/UMass Memorial Health Care,  
[weinrebl@ummhc.org](mailto:weinrebl@ummhc.org). Dr.

# Resources

- National Center for Trauma Informed Care
- <http://mentalhealth.samhsa.gov/nctic/>
- Community Connections – Roger Fallot, PhD
- <http://www.communityconnectionsdc.org>
- Sanctuary Model/Community Works – Sandra Bloom, MD
- <http://www.sanctuaryweb.com/>
- Sidran Foundation for Traumatic Stress - [www.sidran.org](http://www.sidran.org)
- PTSD Alliance - [www.ptsdalliance.org](http://www.ptsdalliance.org)
- International Society of Traumatic Stress - <http://www.istss.org/>

# Resources for Consumers

- Gift from Within. A site for survivors of trauma and victimization. [www.giftfromwithin.org](http://www.giftfromwithin.org)
- Healing Self Injury provides information about self-inflicted violence and a newsletter for people living with SIV– The Cutting Edge. [www.healingselfinjury.org](http://www.healingselfinjury.org)
- National Center for Posttraumatic Stress Disorder, <http://www.ncptsd.org>
- National Child Traumatic Stress Network, <http://www.nctsn.org>
- Sidran Institute. For Survivors and Loved Ones – printable handouts. <http://www.sidran.org/index.cfm>
- WCADV. Works to prevent and eliminate domestic violence. <http://www.wcadv.org>
- WCASA. Works to ensure that every sexual assault victim in Wisconsin gets the support and care they need. <http://www.wcasa.org>