

The Value of Integrating Trauma Informed Care for the Healthy Start Community

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Office on Women's Health

Vision

All women and girls achieve the best possible health

Mission

The Office on Women's Health provides national leadership and coordination to improve the health of women and girls through policy, education and model programs.





Region V Focus on Trauma

Vision

To equip every health and social service provider and institution with the knowledge, resources and support to provide services that are gender-responsive and trauma-informed so as to provide the best possible care for trauma-affected individuals





Functional Definition of Trauma

Trauma occurs whenever an external threat overwhelms a person's coping resources.





Trauma

A Practical Definition

- Non-consensual
- Victim is in discomfort, fear, feels intimidated
- Bodily integrity (or that of someone else) is threatened



Source: <http://www.ncvc.org>

SAMHSA's Definition of Trauma

The 3 E's

- Event
- Experience
- Effect

Effects of Trauma

- ▶ Inability to cope with the normal stresses of daily life
- ▶ Difficulty trusting others
- ▶ Difficulty managing emotions
- ▶ Memory and attention deficits
- ▶ Behavior changes
- ▶ Altered neuro-physiology
- ▶ Health impairment

How common are traumatic exposures?



Prevalence of Trauma in the U.S.

Rape and Sexual Assault

One out of every 6 American women has been the victim of an attempted or completed rape in her lifetime

That's approximately **18 million American women**

Source: RAINN





Prevalence

Child Abuse in America

Hidden epidemic of child abuse and neglect

- Every year more than 3 million reports of child abuse are made in the United States involving more than 6 million children.
- The United States has one of the worst records among industrialized nations – losing on average between four and seven children every day to child abuse and neglect.

Source: Childhelp.org





Prevalence of Trauma in the U.S. Intimate Partner Violence

- ▶ **Nearly one in three** adult women experience at least one physical assault by a partner during adulthood.
- ▶ Men who have witnessed their parents' domestic violence are **twice as likely to abuse their own wives** compared to children of non-violent parents.
- ▶ Girls who have witnessed domestic violence are **more likely to stay in an abusive relationship** as an adult.
- ▶ More than **50% of batterers** also abuse their children or their victim's children.

Report of the American Psychological Association Presidential Task Force on Violence and the Family, (1996)

www.nyawc.org





Prevalence of Trauma in the U.S. Childhood Sexual Abuse

By the age of 13...

- **2 out of 10** girls
- **1 out of 10** boys
are sexually abused





Trauma in the U.S.

Natural Disasters and Terrorism

- Sandy Hook Elementary School
- Hurricane Sandy
- TORNADOS
- 9/11
- BP Deep Water Horizon
- OKC bombing

No one who sees a disaster is untouched by it.





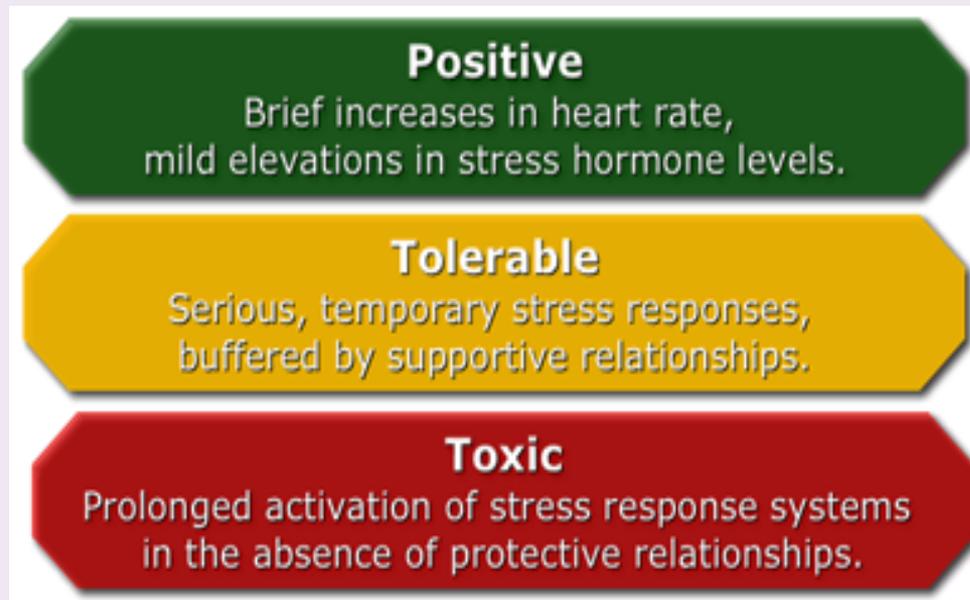
Prevalence of Trauma in the U.S. Historical Trauma

American Indians and Alaska Natives

- Robbed of culture
- Boarding schools



Toxic Stress and Trauma





Prevalence of Trauma in the U.S.

Very common that an individual will have exposure to multiple traumatic events during their lifetime



The Impact of Trauma is dramatically underestimated

Long Term Consequences

- ▶ Mental Health
- ▶ Physical Health
- ▶ Behavioral Health
- ▶ Early Mortality

Why?

What's the relationship among trauma and poor outcomes?



The Adverse Childhood Experience (ACE) Study

- Over 17,000 Kaiser patients participating in routine health screenings volunteered to participate in the study.
- Data continues to be analyzed
- Staggering proof of the health, social, and economic risks that result from childhood trauma



What is an ACE?

10 types of childhood trauma measured in the ACE Study

Five are personal:

- Physical abuse
- Verbal abuse
- Sexual abuse
- Physical neglect
- Emotional neglect

Five are related to other family members:

- A parent who is an alcoholic
- A mother who is a victim of intimate partner violence
- A family member in jail or prison
- A family member diagnosed with a mental illness
- The disappearance of a parent through divorce, death, or abandonment



ACE Scores

- Number of categories (not events) is summed
- 2 out of 3 experienced at least one *category* of ACE
- If any one ACE is present, there is an 87% chance *at least* one other category of ACE is present

<u>ACE Score</u>	<u>Prevalence</u>
0	33%
1	25%
2	15%
3	10%
4	6%
5 or more	11%*

***Women are 50% more likely to have a score >5.**

Anda, Robert F. M.D., & Felitti, Vincent J. M.D. (July 2011). *Adverse Childhood Experiences and their Relationship to Adult Well-being and Disease: Turning Gold into Lead.* [PowerPoint slides]



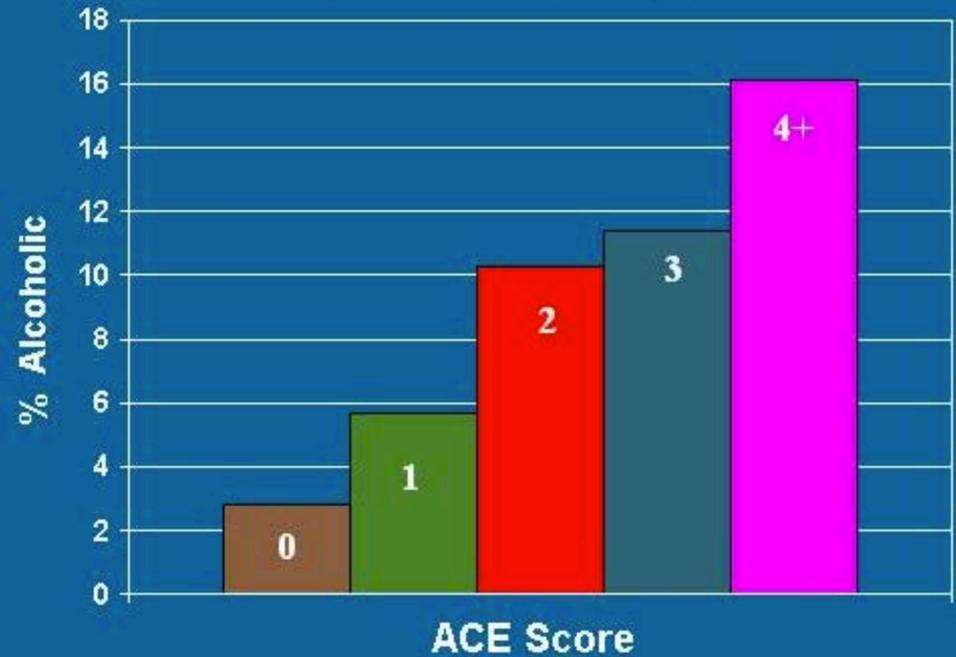
Adverse Childhood Experiences

ACEs have a strong influence on:

- Adolescent health
- Teen pregnancy
- Smoking
- Alcohol abuse
- Illicit drug abuse
- Sexual behavior
- Mental health
- Risk of revictimization
- Stability of relationships
- Performance in the workforce

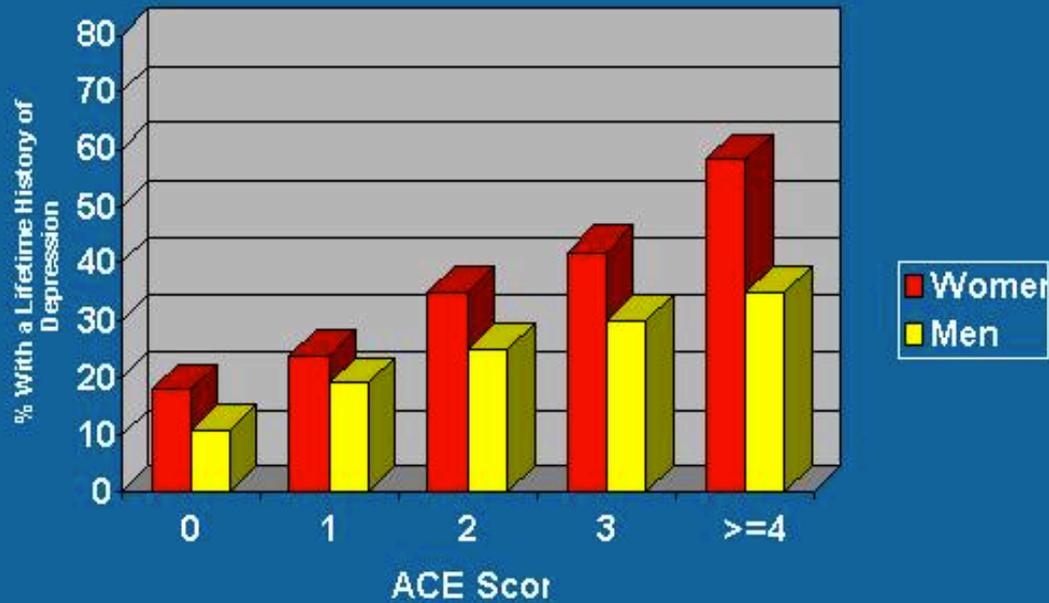
Health Risks

Childhood Experiences vs. Adult Alcoholism



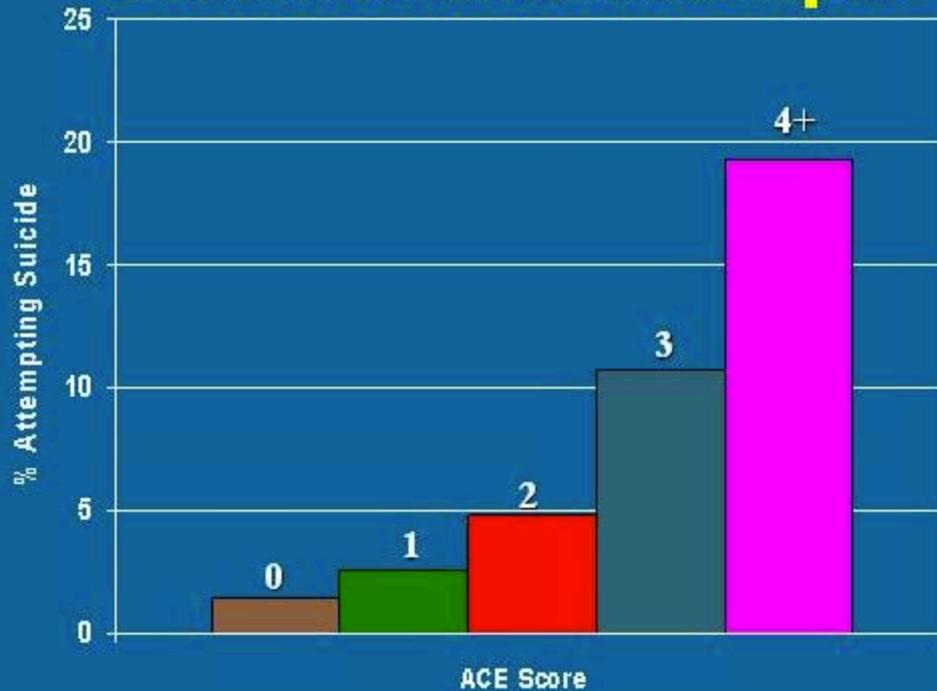
Mental Health

Childhood Experiences Underlie Chronic Depression



Mental Health

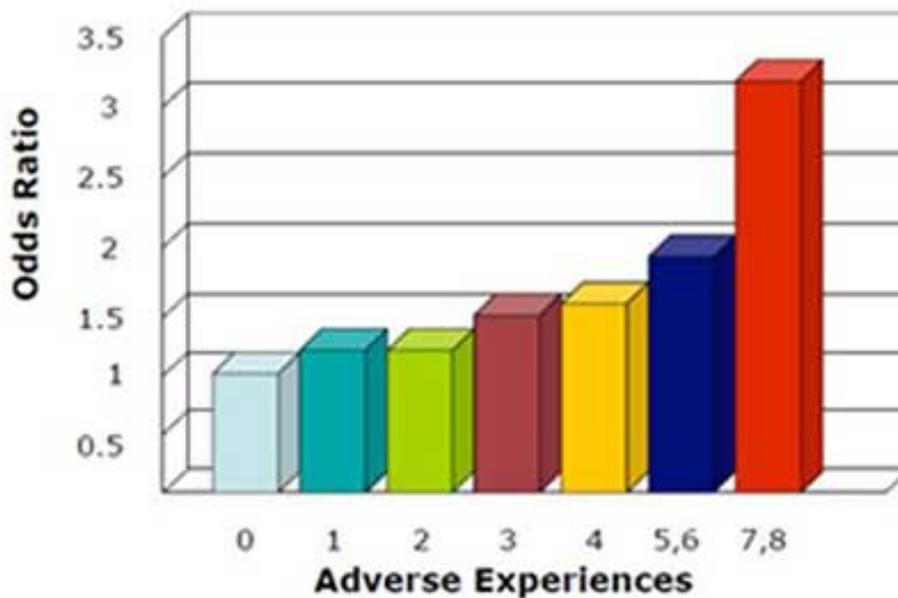
Childhood Experiences Underlie Suicide Attempts



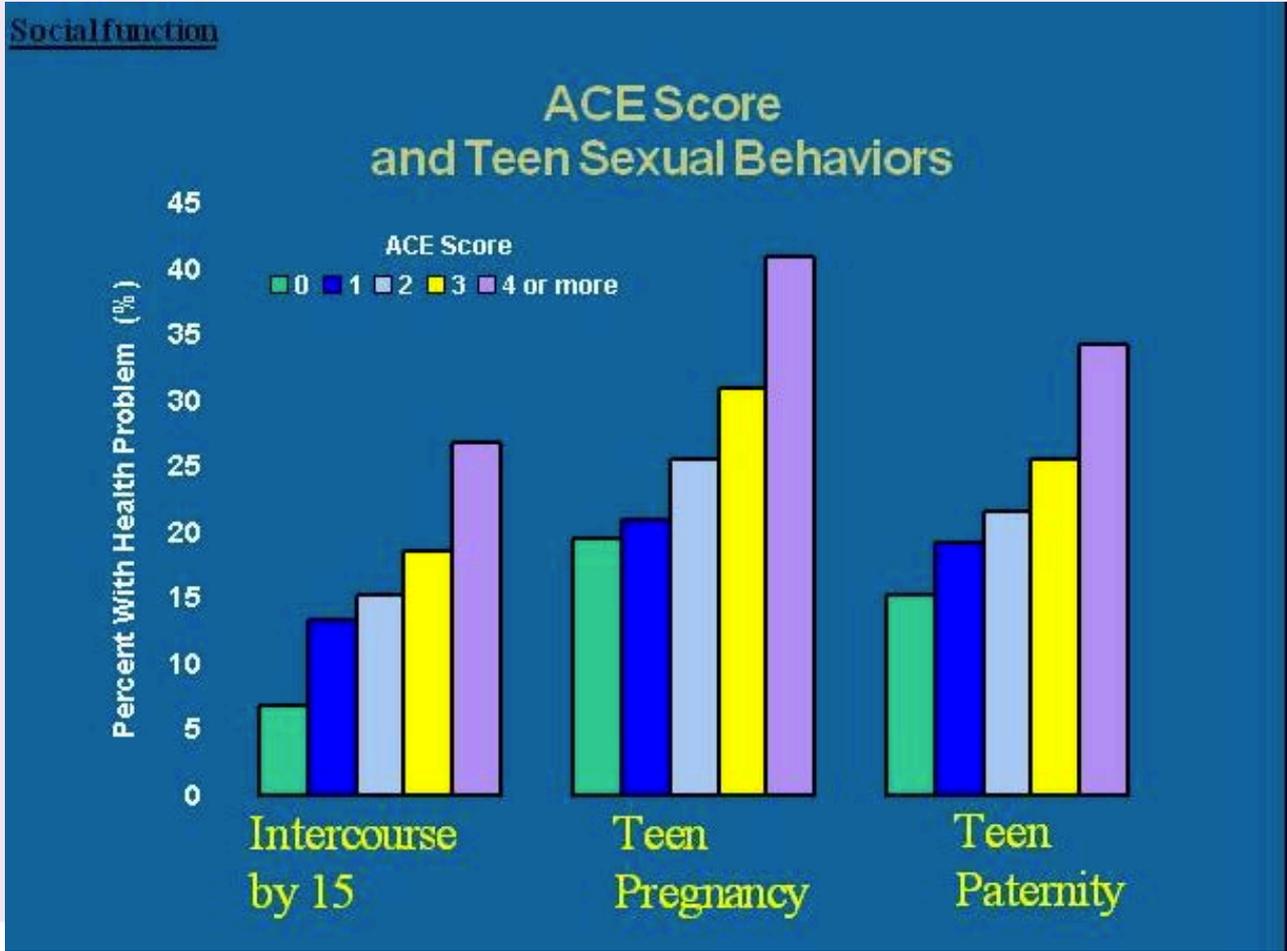




Risk of Adult Heart Disease Increases with more Adverse Childhood Experiences



Source: Dong et al., 2004



IV Drug Use

- The relationship of IV drug use to adverse childhood experiences is powerful and graded - it provides a perfect dose-response curve.
- A male child with an **ACE Score of 6** has a **4,600% increase** in the likelihood of later becoming an IV drug user when compared to a male child with an ACE Score of 0.

Felitti, German ACE article



Adverse Childhood Experiences and Sexual Risk Behaviors in Women: A Retrospective Cohort Study

Susan D. Hillis, Robert F. Anda, Vincent J. Felitti and Polly A. Marchbanks

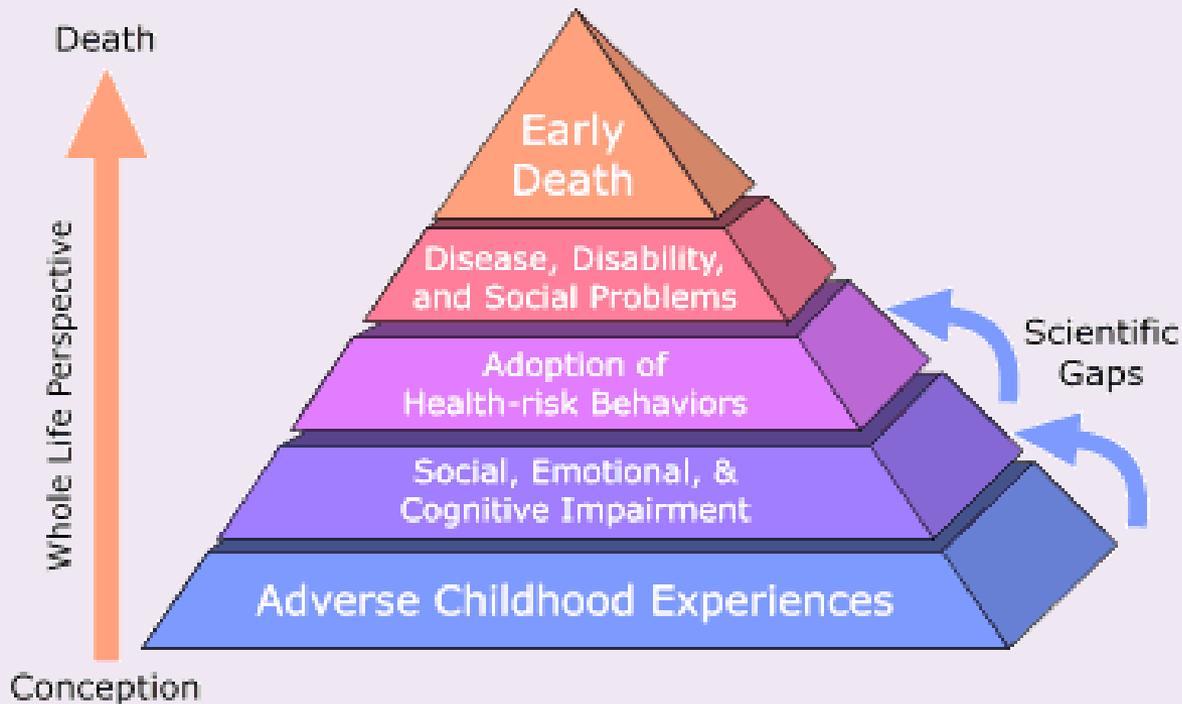
Conclusions:

*Among individuals with a history of adverse childhood experiences, **risky sexual behavior** may represent their attempts to achieve intimate interpersonal connections. Having grown up in families unable to provide needed protection, such individuals may be unprepared to protect themselves and may underestimate the risks they take in their attempts to achieve intimacy. If so, coping with such problems represents a serious public health challenge.*

Family Planning Perspectives, 2001



The ACE Pyramid





High Risk Behavior or Coping?



A quote from Dr. Felitti:

**“It’s hard to give something up
that almost works.”**



In Summary, the ACE Study indicates...

Adverse childhood experiences are the most basic and long lasting determinants of health risk behaviors, mental illness, social malfunction, disease, disability, death, and healthcare costs.

Anda, Robert F. M.D., & Felitti, Vincent J. M.D. (July 2011). *Adverse Childhood Experiences and their Relationship to Adult Well-being and Disease: Turning Gold into Lead.*





Utilization of Medical Services

Survivors have higher utilization of medical services and report a greater number of physical health problems.

Sources: Kartha et al., 2008; Lesserman, et al., 2006; Letourneau, Holmes, & Chasendunn-Roark, 1999; Nicolaidis, et al., 2004; Sadler, et al, 2000; Sledjeski, Speisman & Dierker (2008)





Utilization of Preventive Care

Trauma survivors are less likely:

- ▶ To obtain regular mammograms
- ▶ To obtain regular cervical cancer screenings
- ▶ To attend regular dental appointments

Sources: Farley, Golding, & Minkoff (2002); Farley, Minkoff, & Barkan (2001); Farley & Patsalides (2001)



Secondary Victimization

- ▶ Also known as the “Second Rape” or “Retraumatization”
- ▶ Victimization which occurs, not as a direct result of the criminal act, but through the response of programs, institutions, and individuals to the victim

Sources: Campbell & Wasco (2005); Campbell & Raja (2005); Campbell, Wasco, Ahrens, et.al, (2001)

The Results of Secondary Victimization

- Actually *increases* symptoms
- Keeps patients from seeking or benefitting fully from the care they need

So now what?

Trauma-Informed Care





Trauma-Informed Care

- ▶ Your words, actions, and policies have the ability to hurt or heal
- ▶ Patients remember, so what you say and do matters



What is Trauma-Informed Care?

Every part of a service, agency, program or institution from front desk staff, to administrators, to care providers is assessed and potentially modified to include a basic understanding of how trauma impacts the life of an individual seeking services and provides services so as to prevent retraumatization and optimize opportunity for the individual to benefit from care and services.



Trauma-informed Services

- Take trauma into account
- Avoid triggering trauma reactions and/or traumatizing the individual
- Adjust the behavior of providers, other staff and the organization to support the individual
- Allow survivors to manage their trauma symptoms successfully so that they are able to access, retain and benefit from the services.

(Harris & Fallot)



“Universal Precautions”

- ▶ Exposure to trauma is pervasive
- ▶ The impact of trauma is dramatically underestimated

Therefore, assume EVERYONE has a trauma history.

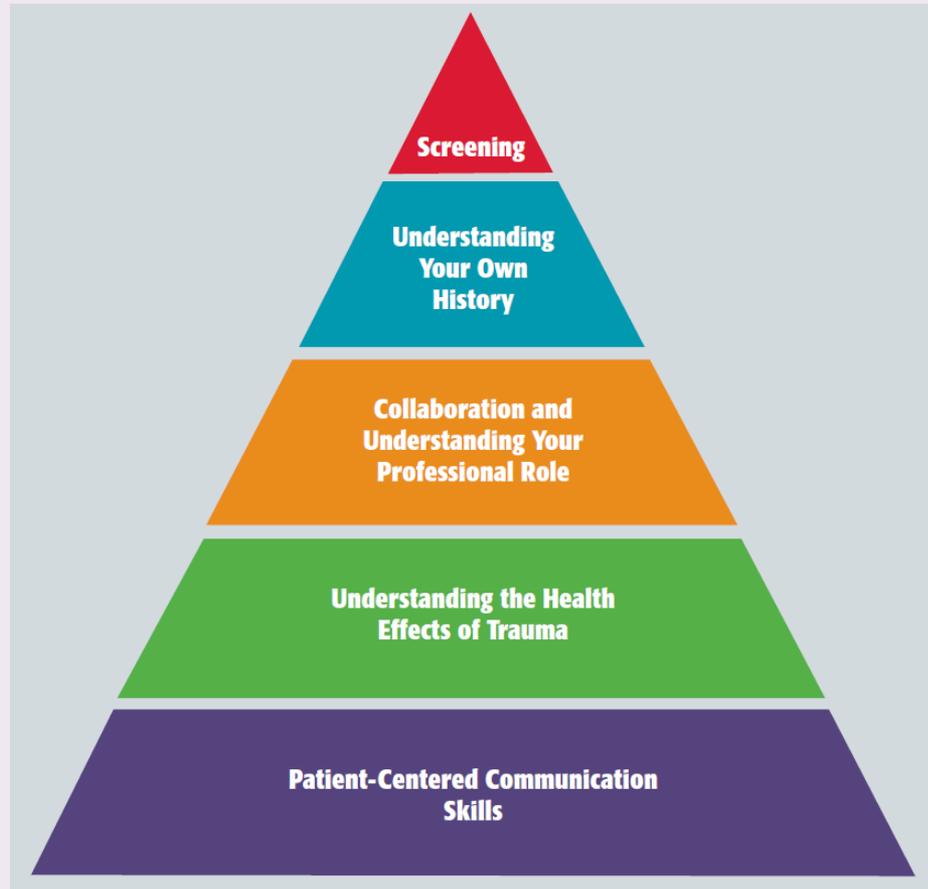
Trauma-Informed Care

Paradigm shift from...

What's wrong with you?

What happened to you?

The Trauma-Informed Care Pyramid



Raja, S., Hoersch, M., et al. (2014). *JADA*



Training Health Care Providers

Trauma-Informed Care for Health Care Providers: On-line Clinical Cases

- Interactive case-based learning
- Free-standing cases allows providers to self-tailor CMEs
- Evidenced-based
- To increase knowledge and skills in trauma-informed care



Resources

- ▶ National Center for Trauma-Informed Care
<http://beta.samhsa.gov/nctic>
- ▶ ACEStudy.org
- ▶ ACEStoohigh.com
- ▶ Wisconsin Department of Health Services –Trauma-informed Care Website
<http://www.dhs.wisconsin.gov/tic/principles.htm>



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