

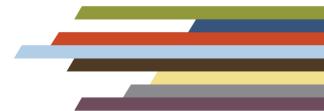
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Addiction Technology Transfer Center Network Funded by Substance Abuse and Mental Health Services Administration

Trauma Informed Care: Through the Lens of COVID-19

Presented by Mary McCarty-Arias, MA November, 2020





Disclaimer

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The ATTC Network uses affirming language to promote the promises of recovery by advancing evidence-based and culturally informed practices.

Mary McCarty-Arias, M.A.

More than 25 years experience training in co-occurring disorders, HIV, and vocational rehabilitation.





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- To understand the scope, definition, and impact of trauma on their clients
- To review the COVID-19 pandemic and research other pandemics



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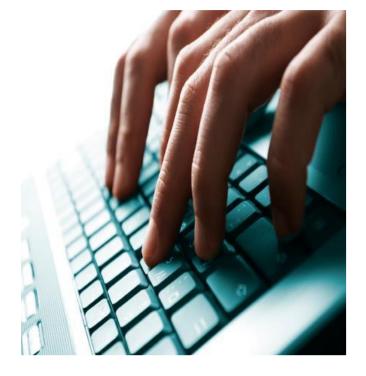
Objectives

- To define trauma
- To state epidemiology of trauma on our clients
- To define "pandemic" and compare pandemics
- To list resiliency and risk factors for trauma and how COVID-19 might affect them
- To define "trauma-informed care"
- To list principles of trauma-informed care

Scope of the Problem

How many of your clients have experienced trauma?

Please write in.





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What Is Trauma?

- Events and circumstances
- The individual's experience of these events or circumstances to determine whether it was a traumatic event
- The long-lasting adverse **effects** on an individual



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Kinds of Traumas – Where Does COVID-19 Fit?

Natural Causes	<u>Accidents</u>	Intentional Acts
Earthquake	Train derailment	Terrorism
Hurricane	Aircraft crash	Arson
Tornado	Car accident	Homicide/suicide
Flood	Radiation leak	Domestic violence
Tsunami	Oil spill	School violence – bullying
Famine	Accidental gun shooting	Genocide
		Physical abuse or neglect
		Sexual assault or abuse
		Warfare

Pandemic

World Health Organization (WHO):

Worldwide spread of a new disease

<u>Centers for Disease Control and Prevention</u> (CDC):

- Spreads around the world
- Most people will not have immunity (2020)



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Spanish Flu

- Killed 50 million people worldwide
- ½ million Americans died
- Number of psychiatric hospitalizations increased by 7.2 in the following 2 years
- Survivors reported sleep disturbances, depression, mental distraction, dizziness, and difficulties coping at work
- Also coincided with World War I



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Addiction Technology Transfer Center Network Funded by Substance Abuse and Mental Health Services Administration Source: Eghigian G., (4/3/2020) Psychiatric Times, *The Spanish Flu Pandemic & Mental Health: A Historical Perspective*

Comparison to 9/11

Different kind of event but:

- Increase in alcohol (28.8), tobacco (9.7), marijuana (3.2)
- Increase in anger, stress, & sadness



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Addiction Technology Transfer Center Network Funded by Substance Abuse and Mental Health Services Administration Johnson & Richter (2003). Impact of 9/11 The Aftermath of Substance Use & Psychological Functioning. (Center for Alcohol & Substance Abuse)



- The magnitude; the scale of the pandemic
- Lack of control; powerlessness
- Not knowing the outcome
- Increase in stress & anxiety as a normal response
- Exacerbates any pre-existing problem
- Dealing with losses

Acute Trauma vs. Post-Traumatic Stress

Acute:

- Occurs shortly after traumatic event
- Experience of symptoms lasts up to four weeks after the event

Post-Traumatic Stress:

- Occurs sometime after the event
- Experience of symptoms becomes pervasive



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Complex Trauma

The experience of multiple, chronic and

prolonged, developmentally adverse traumatic events most often of an interpersonal nature and early life onset.



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Risk Factors for Trauma

Traumatic events experienced in the past	Discrimination
Nature and intensity of event(s)	Lack of social support
Number of stressors experienced	History of psychiatric illness
Length of exposure to stressful situations	Housing instability
Poverty	Substance use



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Building Resilience – Protective Factors

- Social support
- Family support
- Economic stability
- Employment
- Optimism and healthy selfesteem
- Tendency to find meaning

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ATTC

- Aptitude
- Adaptability
- Spirituality
- Curiosity and openness to experience



ACE Study

The three types of ACEs include			
ABUSE	NEGLECT	HOUSEHOLD D	YSFUNCTION
Physical	Physical	Mental Illness	Incarcerated Relative
		. D.	
Emotional	Emotional	Mother treated violently	Substance Abuse
Sexual		Divorce	

Additional ACEs

- Lower socioeconomic status
- Peer victimization
- Peer isolation/rejection
- Exposure to community violence



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(Finkelhor, Shattuck, Turner & Hamby, 2015)

Findings of the ACE Study

Correlates with:

- Physical health heart disease, COPD, diabetes
- Mental health depression, suicide attempts
- Behavioral health substance use



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Trauma Informed Care

- Systems approach
- It recognizes how trauma impacts clients
- Ensures safety in all interactions and physical space
- Helps us understand how we evaluate & reflect on our practice to avoid re-traumatizing our clients
- Use universal precautions

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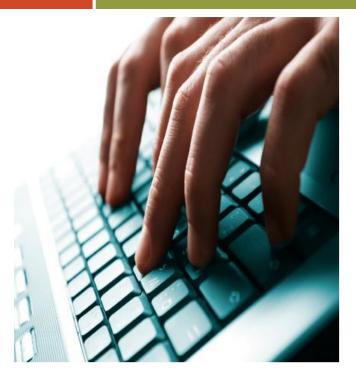
- You can't create safety for others if you don't feel it yourself.
- Everything your clients are feeling, you may be feeling as well!



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What do you do to create safety?





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Avoiding Re-traumatization

What are some examples of how we re-traumatize people?



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Principles

- Safety
- Trustworthiness & transparency
- Peer Support
- Collaboration & mutuality
- Empowerment & choice
- Cultural Responsiveness



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Addiction Technology Transfer Center Network Funded by Substance Abuse and Mental Health Services Administration (SAMHSA Guidance for a Trauma Informed Approach)



For Staff	For Clients
Make sure staff feel protected in a crisis	Same
Communicating clear efforts	Eliminating any shame Re-telling their story can be re- traumatizing
Asking for feedback	Same
Acknowledging staff fears	Acknowledging client fears



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Addiction Technology Transfer Center Network Funded by Substance Abuse and Mental Health Services Administration (Portland State University, Trauma Informed Oregon, 2020)

Trustworthiness & Transparency

For Staff	For Clients
Clear & direct communication regularly	Same – creates safety
Explaining "why"	Same – shows respect
Communication about new policies	Same
Providing strength & compassion	Same



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Peer Support

For Staff	For Clients
Supporting many ways to communicate	What ways do clients have to communicate? What times are best for them?
Teach/learn virtual face to face methods	Same – What about clients who do not have access to the internet?
Checking in regularly	Same



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Collaboration & Mutuality

For Staff	For Clients
Working with other systems	Teaching clients how to work with other systems
Beginning relationships with new partners	Introducing clients to new partners & the need for them
Collaborating within the agency to provide safety	Including clients in the process



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Empowerment & Choice

For Staff	For Clients
Providing choices	Choosing their treatments
Giving staff the skills/information to explain new policies	Same
Listening to clients' feedback	Encouraging clients to speak up



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Cultural Responsiveness

Staff	Clients
Recognize cultural strengths	Build on strengths Build on healing rituals within a culture
"Do no harm" in terms of policies	What could you do here?
Be mindful of historical contexts	For many clients, this isn't the first traumatic experience
Be patient and understanding	



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Trauma & the Body

- Overstimulated amygdala on high alert
- Underactive hippocampus becomes less effective in making connections
- Ineffective variability elevation of stress hormones interferes with the body's ability to regulate itself



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Symptoms of Trauma

Being triggered into:

- Fight aggression
- Flight running away
- Freeze
 - depersonalization shape shifter being separate from one's body, able to move outside of one's self
 - dissociation *time traveler* being separate from one's experience, leading to little recall

Trauma-Informed vs. Trauma Specific

- Trauma Informed
- Values the principles
- Trauma Specific
- Uses evidence-based practices (EBPs): Eye Movement Desensitization and Reprocessing (EMDR), Cognitive Behavioral Therapy (CBT), Seeking Safety, Prolonged Exposure

Stay in your lane!

What Is Vicarious Trauma?

- Witnessing/hearing about other people's suffering
- Exposure to other people's traumas
- Process of change
- Cumulative effect



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Vicarious Traumatization

- Cynical view of the world
- Workers may experience parallel emotional reactions to their clients and mirror clients' physical symptoms

VT is different than "burnout" – burnout is usually due to the effect of concrete stressors, i.e. physical environment, work hours, etc.



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ABCs of Self-Care

- Awareness
- Balance
- Connection



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