

Trauma INFORMED CARE and THE ACE Study

Healing Invisible Wounds
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Four Winds Turning Point

A model

- Trauma Informed Care and The ACE Study
- Trauma Informed Culturally Competent Approaches

Learning Objectives

- Trauma Informed Care: A practical model for implementation
- Outcomes of The ACE Study
- What is The ACE Study and what are we waiting for?
- Healing the Healers

Trauma Informed care

- Experiencing, witnessing, or being threatened with an event or events that involve actual serious injury, a threat to the physical integrity of one's self or others, or possible death.
- Responses to these events include intense fear, helplessness, or horror.
- Residual effects...
- Significant distress, impairment in social functioning...

What is Trauma Informed Care

- TIC is a seminal concept
- Adjective of a work, event, moment, strongly influencing later developments.
- Enhancing recovery through integrated trauma treatment

Trauma Informed Care

- Addressing trauma in substance abuse treatment involves "trauma-informed" and "trauma-specific" approaches.
- Trauma informed systems and services take into account knowledge about trauma-its impact, interpersonal dynamics, and paths to recovery-and incorporate this knowledge thoroughly in all aspects of service delivery.

Trauma Specific

- The primary goal of trauma-specific services are more focused: to address directly the impact of trauma on people’s lives and to facilitate trauma recovery and healing
- Creating trauma-informed environments will provide services that are sensitive and responsive to the unique needs of trauma survivors.

Trauma Informed Services

- Basic principles of trauma-informed services
- Harris& Falot,2001
- See trauma as a defining and organizing experience that can shape a survivor’s sense of self and others.
- Create an open and collaborative relationship between providers and consumers.
- Place priority on consumer safety, choice and control.

Trauma Informed Services

- Problem behaviors originate as understandable attempts to cope with abusive experiences.
- Effects may be seen in life domains not obviously related to experiences of violent victimization (for example, in substance abuse, eating disorders, relationship difficulties...)
- Programs designed with these goals in mind are welcoming to trauma survivors.

Trauma Informed Substance Abuse Treatment

- Brings these principles to the addiction treatment setting.
- Integrate understanding of trauma and substance abuse throughout the program.
- Recognizing the multiple, complex interactions between alcohol and drug use and interpersonal violence.
- Understand that drugs and or alcohol are often a part of people's sexual, and emotional abuse.

Trauma informed Care

- Survivors often use, to manage the emotional distress
- Simultaneously address trauma and substance abuse.
- In contrast, parallel models offer two distinct sets of services-one for trauma and one for addiction
- Sequential approaches argue that the substance abuse problems must be addressed before turning to trauma related difficulties

Trauma Informed Care

- Ensure consumers' physical and emotional safety
- Creating an atmosphere that is hospitable, engaging, and supportive from the very beginning.
- Avoiding practices that may potentially re-traumatize and avoid shame inducing confrontations.

Key Goals for Trauma Informed Care

- Focus on empowerment
- Empower clients to engage in collaborative decision making.
- Recognize that ancillary services are necessary components.
- Programs adopting a trauma-informed model should insure a leadership and administrative commitment to trauma-informed change.

Trauma Informed Care

- Meeting the challenge-areas in need of understanding
- Understanding the consumer-survivor
- Administrative commitment to change
- Staff training and education
- Authority and responsibility

The ACE Study

- The Origins of Addiction: Evidence from the Adverse Childhood Experiences Study
- Vincent J. Felitti, MD
- Kaiser Permanente Medical care Program

The ACE Study

- Adverse Childhood Experiences Study
- 17,000 patients
- Evaluated ten different types of trauma that a child may have experienced
- Five are personal. Physical abuse, verbal abuse, physical neglect, and emotional neglect
- Five are related to other family members

Categories-Other family members

- A parent who is an alcoholic
- A mother who's a victim of domestic violence
- A family member who went to prison
- A family member diagnosed with a mental illness
- Were parents ever separated or divorced

ACE Study

- Findings: A history of childhood trauma leads to the earl development of chronic disease, substance abuse, mental illness, and death
- Staggering evidence of the impact of childhood trauma on health, social, and economic risks

The Findings from The Ace Study

- Provide a remarkable insight into how we become what we are as individuals and as a nation
- Given us reason to reconsider the very structure of medical care in America
- Reveals a powerful relationship between our emotional experiences as children and our physical and mental health as adults, as well as the major causes of adult mortality in the United States

Linking the progression

- It documents the conversion of traumatic emotional experiences in childhood into organic disease later in life
- How does this happen. Reverse alchemy, turning the gold of a newborn infant into the lead of a depressed adult?
- Time does not heal. One does not “just get over it” not even fifty years later

Why, Why, Why...

- Is an outgrowth of observations made in a obesity program with a high dropout rate
- Successfully losing weight
- Later learned that childhood sexual abuse was remarkably common
- No one had sought this kind of information from patients
- When brought up was rejected as being in the distant past and of no relevance to current problems
- CDC recognized the importance of these observations...

ACE Study Findings

- The two most important findings are that these adverse childhood experiences:
- Are vastly more common than recognized or acknowledged
- Have a powerful relation to adult health a half-century later
- This combination makes them important to the nation's health and to medical practice

Invisible

- All this is well shielded by social taboos against seeking or obtaining this kind of information
- We may miss the forest for the trees if we study the categories individually
- They do not occur in isolation; a child does not grow up with an alcoholic parent in an other wise supportive and well-functioning household

- Then they asked: How will these childhood experiences play out decades later in a doctor's office?
- Outcomes were categorized into organic and emotional disorders

ACE Score vs. Smoking

- The relationship of ACE to smoking
- Smoking underlies some of the most important causes of death in America
- Strong social pressure against it is often attributed to “addiction”
- Attributable to characteristics that are intrinsic within the molecular structure of nicotine
- The higher the ACE score, the greater the likelihood of current smoking
- Strongly related in a progressive dose-response manner to what happened decades ago in childhood
- Are smoking and it’s related diseases the result of self-treatment of concealed problems that occurred in childhood

ACE Score vs. COPD

- A person with an ACE score of 4 is 260% more likely to have COPD than a person with an ACE score of 0
- Hepatitis: when compared with Ace score of 0 to Ace score of 4 there was a 240% increase in prevalence
- STD’s Ace score of 0 compared to Ace score of 4 showed a 250% increase

Ace Score vs. Intravenous Drug Use

- In Epidemiology, these results are almost unique in their magnitude. A male child with an ACE score of 0 vs. 6 has a 4,600% increase in the likelihood of later becoming an IV drug user
- No one injects heroin to get endocarditis or AIDS, why is it used?
- Might heroin be used for the relief of profound anguish dating back to childhood experiences?
- Might it’s psychoactive effects be the best coping device that individual can find?

- Is IV drug use properly viewed as a personal
- solution to problems that are well concealed by social niceties and taboos?
- If so, is IV drug use a public health problem or a personal solution? Is it Both?
- Is drug abuse self-destructive or is it a desperate attempt at self-healing?

Emotional Disorders

- When they looked at purely emotional outcomes like self-defined current depression or self reported suicide attempts, they found equally powerful effects.
- ACE score of 0 vs. 4 or more there was 460% more likely to be suffering from depression
- Should one doubt the reliability of this, they found there was a 1,220% increase in attempted suicide. At higher ACE scores, the prevalence of attempted suicide increases 30-51 fold,(3000-5,100%)

- Found many other measures of adult health have a strong graded relationship to what happened in childhood: heart disease, fractures, diabetes, obesity, unintended pregnancy, STD's
- Occupational health and job performance worsened progressively as the ACE score increased

- Childhood experiences are common, destructive, and have an effect that last a life time
- These problems are painful to recognize and difficult to deal with
- Our usual approach to many adult chronic diseases reminds us of the relationship of smoke to fire. Smoke is the most visible aspect

- The very nature of the material will make many uncomfortable
- Therefore we find it useful to routinely pose such questions to all patents by questionnaire We then ask them, "how did this effect you in later life?"
- This is easy to ask and is neither judgmental nor threatening to hear

God help me
to be
the kind
of person
my dog thinks I am
