

The Mental Health Crisis and Trauma Informed Care

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Disclosure

We have no financial relationships with ineligible companies.



Today's Objectives

The Mental Health Crisis

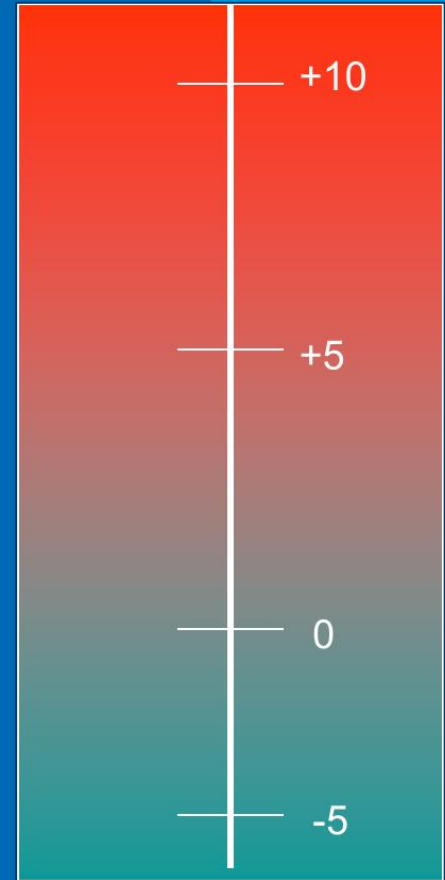
What is Trauma?

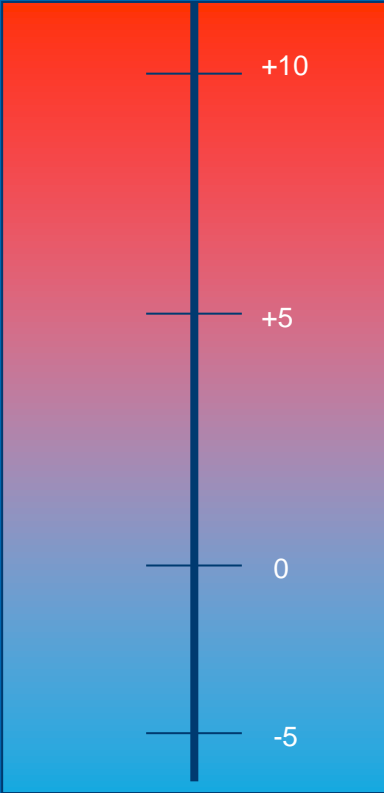
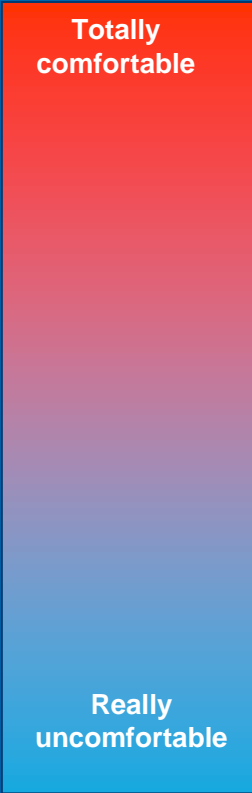
The Trauma Response

Trauma Informed Care



How high (or low) is your energy right now?





The Mental Health Crisis





Our country needs a better approach to mental health.

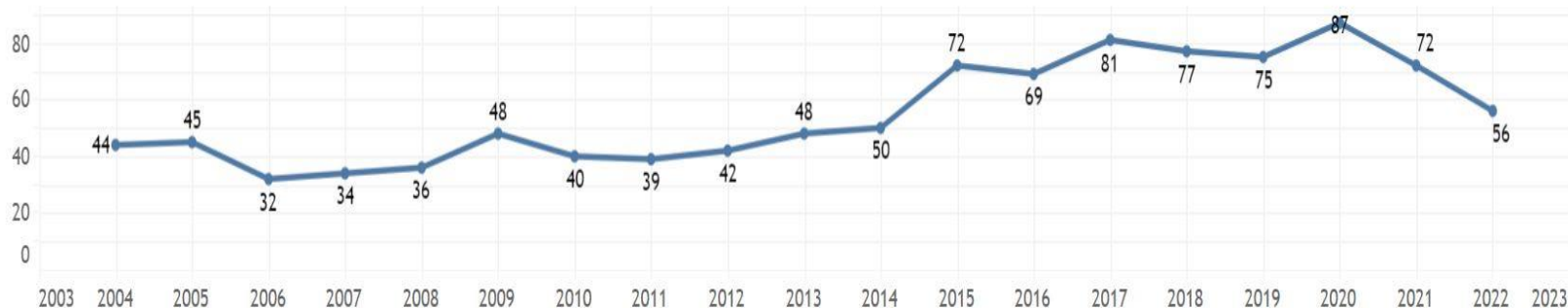
Across the nation, one in five children is living with a mental health disorder. But *less than 50%* of these kids will ever receive the appropriate treatment.



Selected population for all charts on this page

Age: 10-14 years & 15-18 years, Sex: All, Ethnicity: 0, Race: 0, Marital status: All, Veteran status: All, Method: All methods, County: All

Number of suicides over time



*Counts of less than three are suppressed

**Rates/data on this page will differ slightly from Colorado Violent Death Reporting System data, due to the inclusion of out of state resident deaths



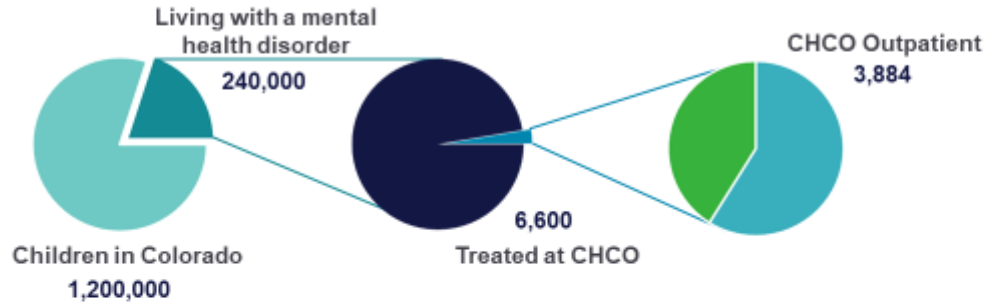
COLORADO

**Center for Health
& Environmental Data**

Department of Public Health & Environment



Outpatient Landscape



The mental health crisis continues to escalate

- Rising Acuity
- Rising Volume
- 80% of providers do not accept insurance



Our system is full of gaps that fragment, delay, and confuse care.

Mental health is not resourced, staffed, studied, or coordinated in the same ways as physical illnesses.

Root Cause: A Lack of Parity		Physical Health	Mental Health
Workforce	Requisite providers and specialists	●	●
	System and resources to train next generation	●	●
	Sustainable reimbursement model	●	●
	Schools, PCPs trained to enable early treatment	●	●
Settings	Sufficient primary care, outpatient, inpatient capacity	●	●
Research	Outcomes consistently tracked, reported	●	●
	Robust evidence bases	●	●
Coordination	Robust tools for coordination of services	●	●



Workforce Challenges

2x

More than double the number of health workers reported harassment at work in 2022 than in 2018.

46%

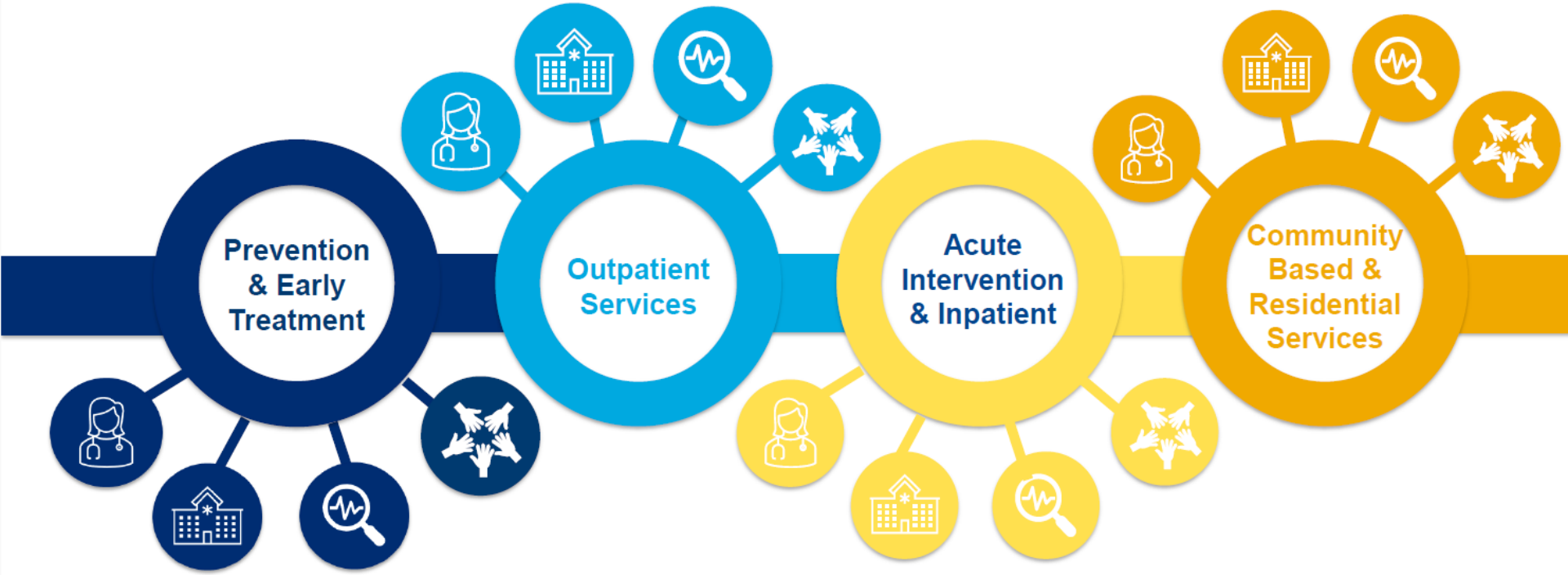
Nearly half of health workers reported often feeling burned out in 2022, up from 32% in 2018.

44%

Nearly half of health workers intended to look for a new job in 2022, up from 33% in 2018.



OUR VISION: *To advance a youth and family-centered coordinated system of mental health care with collaborative partners, ensuring equitable access to high-quality, evidenced-based care and prevention.*

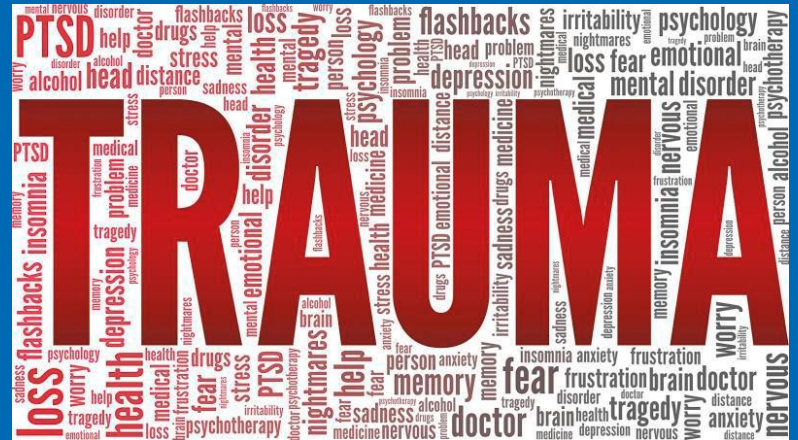


Trauma



What is Trauma?

- An event that overwhelms an individual's capacity to cope
- Traumatic experiences are
 - Overwhelming
 - Invoke intense negative affect
 - Involve a degree of loss of control or vulnerability



<https://peopletopeopleohio.com/trauma/>



ADVERSE CHILDHOOD EXPERIENCES STUDY

- First real exploration of relationship between adverse experiences in childhood and adult behaviors and medical problems
- Kaiser Permanente and CDC
- San Diego, 1995-1997
- ACES Questionnaire completed by 9,508 adults
 - Participants also completed questionnaire regarding adult health risk behaviors and diseases



Adverse Childhood Experiences (ACE) 10-Question Survey

PRIOR TO YOUR 18th BIRTHDAY:

1. Did a parent or other adult in the household **often or very often**...
Swear at you, insult you, put you down, or humiliate you? OR
Act in a way that made you afraid that you might be physically hurt? **If YES, enter 1** _____
2. Did a parent or other adult in the household **often or very often**...
Push, grab, slap, or throw something at you? OR
Ever hit you so hard that you had marks or were injured? **If YES, enter 1** _____
3. Did an adult or person at least 5 years older than you **ever**...
Touch or fondle you or have you touch their body in a sexual way? OR
Attempt or actually have oral, anal, or vaginal intercourse with you? **If YES, enter 1** _____
4. Did you **often or very often** feel that...
No one in your family loved you or thought you were important or special? OR
Your family didn't look out for each other, feel close to each other,
or support each other? **If YES, enter 1** _____
5. Did you **often or very often** feel that...
You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? OR
Your parents were too drunk or high to take care of you or
take you to the doctor if you needed it? **If YES, enter 1** _____
6. Was a biological parent **ever** lost to you through divorce, abandonment,
or other reason? **If YES, enter 1** _____
7. Was your mother or stepmother:
Often or very often pushed, grabbed, slapped, or had something thrown at her? OR
Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard?
OR
Ever repeatedly hit over at least a few minutes or threatened
with a gun or knife? **If YES, enter 1** _____
8. Did you live with anyone who was a problem drinker or alcoholic or
who used street drugs? **If YES, enter 1** _____
9. Was a household member depressed or mentally ill or did a household
member attempt suicide? **If YES, enter 1** _____
10. Did a household member go to prison? **If YES, enter 1** _____

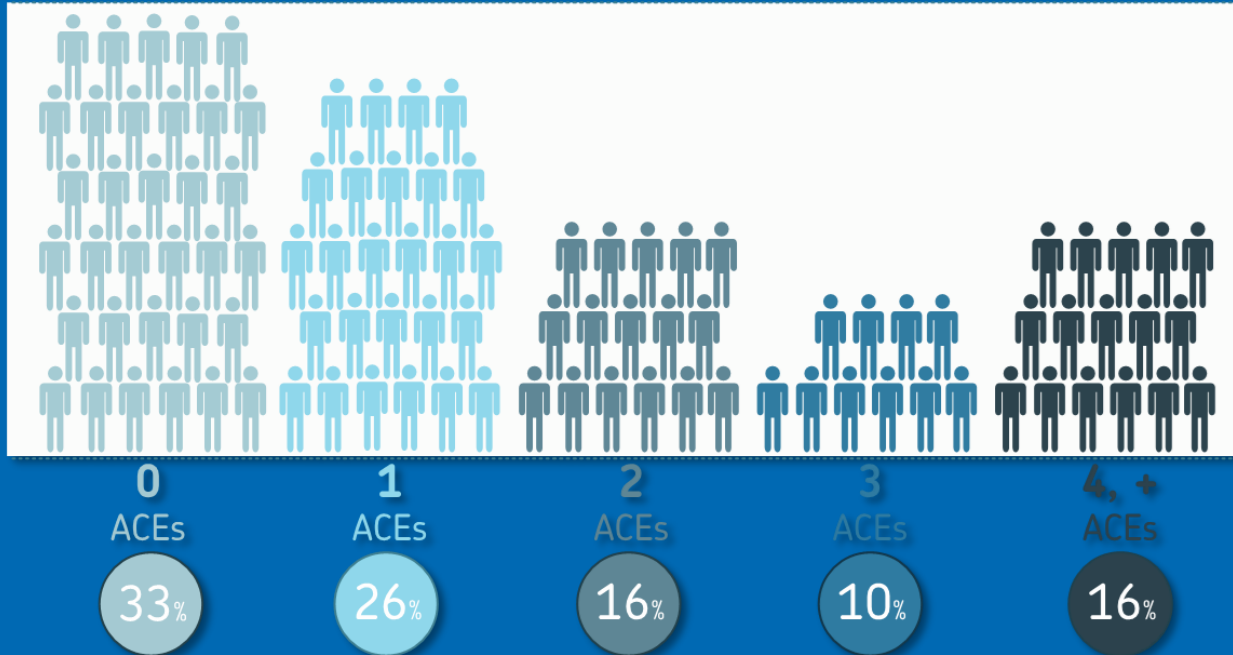
Now add up your YES answers – **TOTAL "Yes":** _____

This is your ACE score



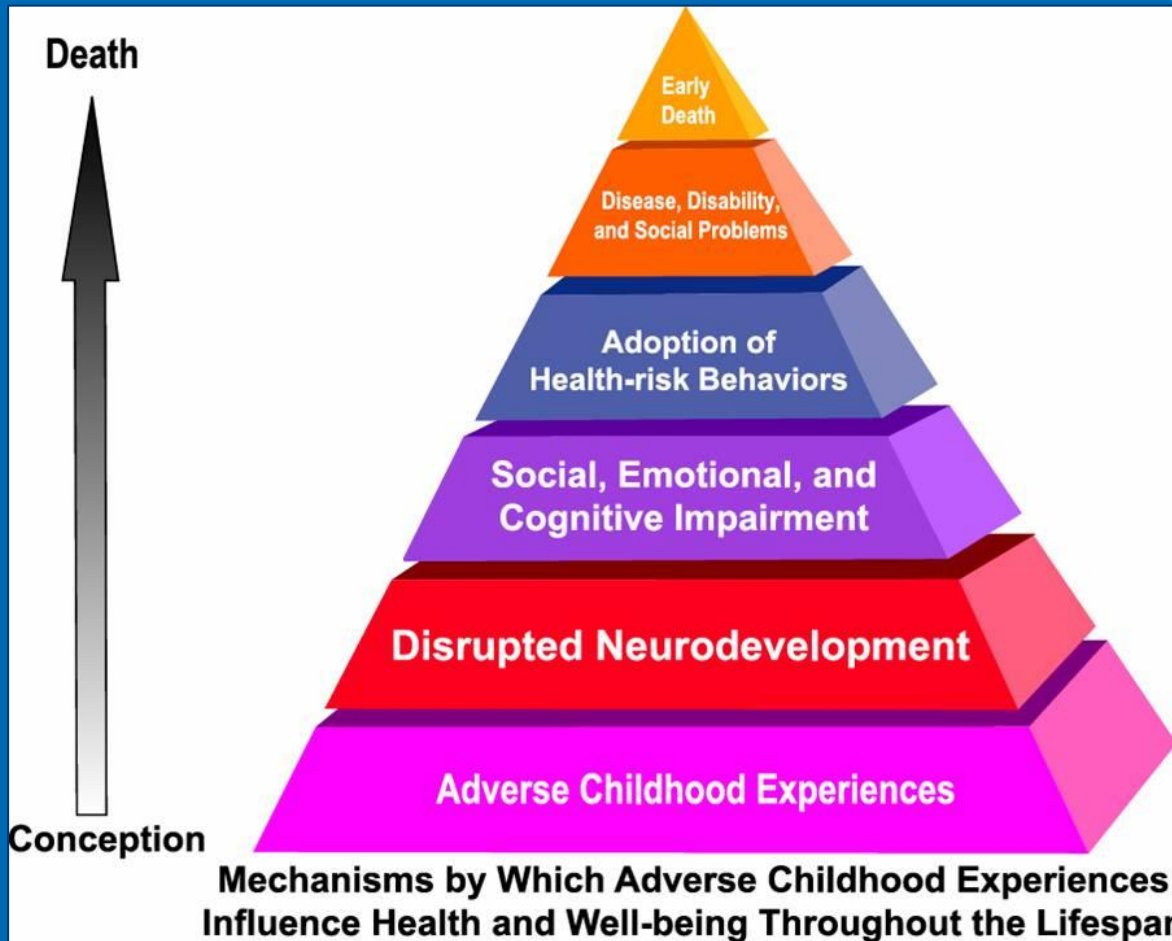
ACES Findings

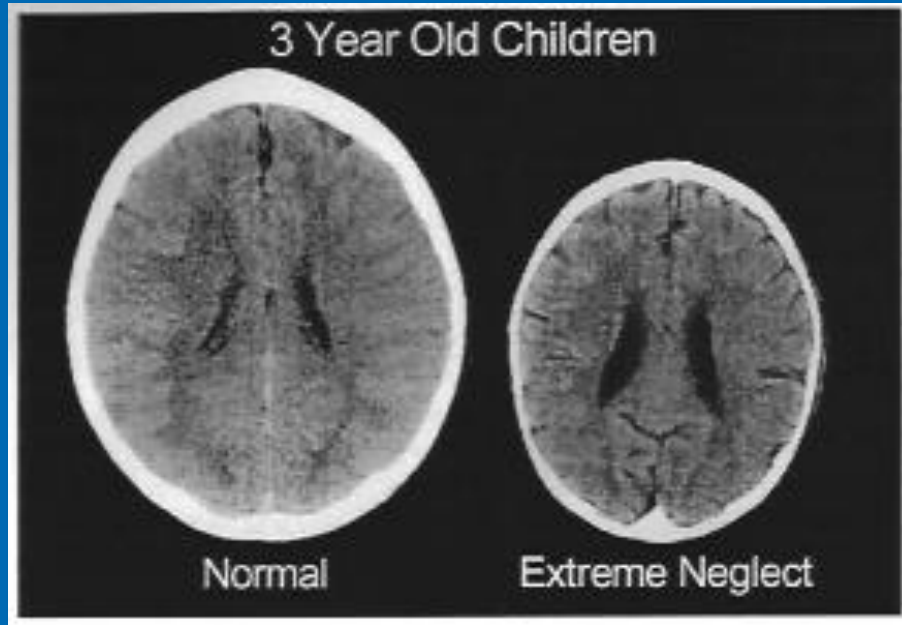
ACE Score = Number of ACE Categories



ACE Scores Reliably Predict Challenges During the Life Course







"Childhood Experience and the Expression of Genetic Potential: What Childhood Neglect Tells Us About Nature and Nurture." Brain and Mind 3: 79-100, 2002

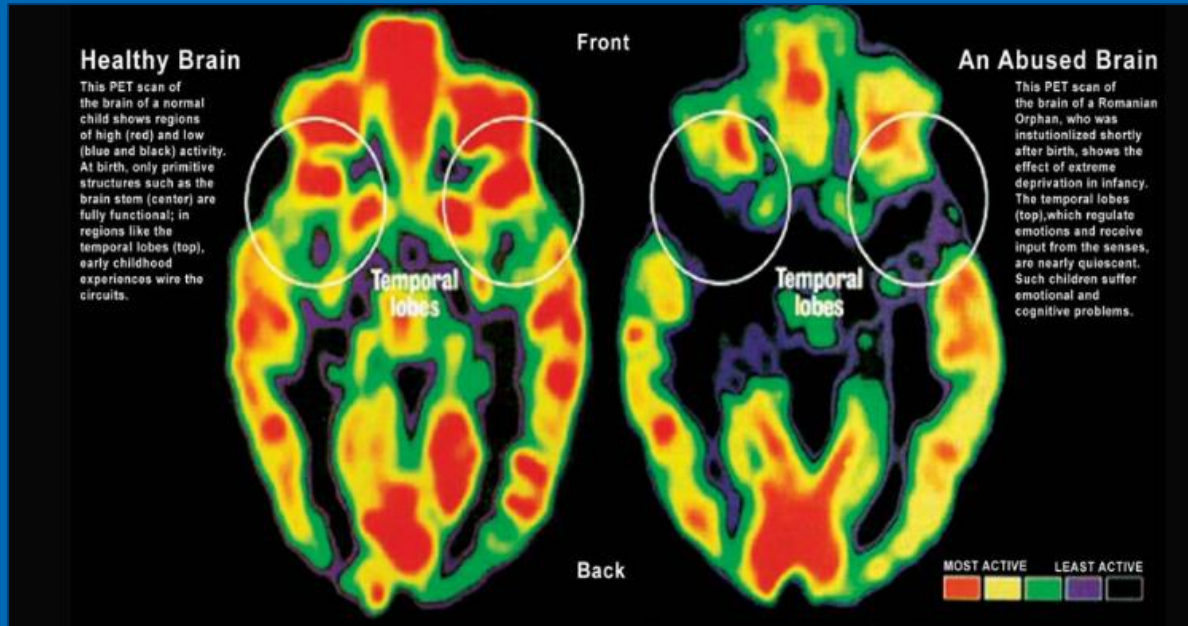
- The CT scan on the left is an image from a healthy three-year-old with an average head size (50th percentile).
- The image on the right is from a three-year-old child suffering from severe sensory-deprivation neglect.
- The child's brain is significantly smaller than average (3rd percentile) and has enlarged ventricles and cortical atrophy.

- Bruce D. Perry



Trauma changes the brain

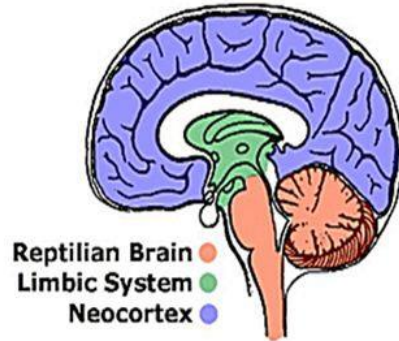
People who experienced trauma possess brains that are disorganized and dysregulated which can explain why they perceive the world differently and why thinking consequentially and sequentially is challenging.



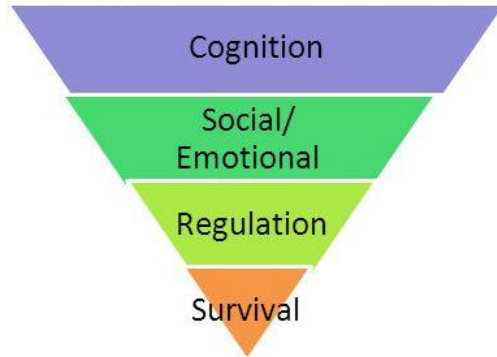
4 Ways Childhood Trauma Changes a Child's Brain and Body - Salud America (salud-america.org)



Trauma & Brain Development



Typical Development



Developmental Trauma












Adapted from Holt & Jordan, Ohio Dept. of Education



The Trauma Response



C-PTSD TRIGGERS

People	linked to the person who had the control over you	
Places	associated to the trauma	
Things	reminding you of the trauma	
Situations	that may induce uncontrollable emotions, e.g. arguments	
Boundaries	having them pushed or tested	
Senses	sensitive to noises (loud bangs) or intense visuals (flashing lights)	
Dates	memorable dates, like anniversaries, birthdays	
Dreams	nightmares where you relive the trauma	
Connections	difficulty trusting new people	



FIGHT

Self-preservation
Anger outbursts
Demanding perfection from others
Demeaning way of speaking to others
Controlling others
Sense of entitlement
Narcissistic tendencies
Bullying

FLIGHT

Obsessive or compulsive tendencies
Feelings of anxiety or panic
Workaholic
Can't sit still, can't relax
Rushing around
Perfectionism
Over-achiever

Trauma Stress Responses

FREEZE

Feeling unreal
Brain fog
Spaced out
Difficulty in making decisions
Difficulty in taking action
Wants to hide from the world
Couch potato

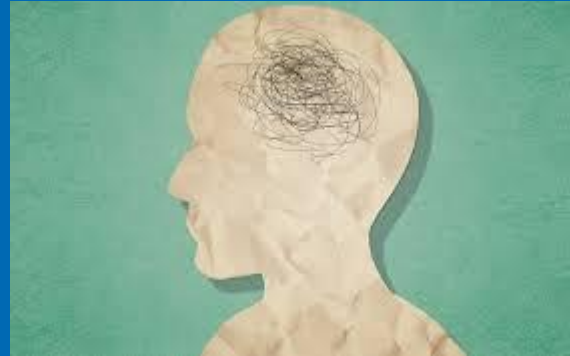
FAWN

People pleaser
Loss of self
Codependent relationships
Stays in a violent relationship
Little or no boundaries
Easily exploited by others
Flattering others
Can't speak up for themselves



Trauma Responses

- Dissociation
- Emotional Numbing
- Avoiding others/withdrawing
- Hyper control of environment/rigidity
- Substance use
- Alterations in eating patterns
- Constricted of excessive sexual behaviors
- Sensation seeking behaviors
- Self injury



[What Is Trauma? | Cedars-Sinai](#)

Blaustein & Kinniburgh 2010



The Trauma Cycle

	Child	Parent	Team
Cognitive	<ul style="list-style-type: none"> • I am bad, unlovable, damaged • People are dangerous • I can't trust anyone 	<ul style="list-style-type: none"> • I am ineffective • This kid is causing trouble • He's making things hard for everyone 	<ul style="list-style-type: none"> • I am ineffective • This family is so difficult • They just need to do what I say
Emotional	<ul style="list-style-type: none"> • Shame • Anger • Fear • Hopelessness 	<ul style="list-style-type: none"> • Frustration • Anxiety • Helplessness 	<ul style="list-style-type: none"> • Frustration • Anger • Burnout • Loss of empathy
Behavior	<ul style="list-style-type: none"> • Avoidance • Aggression • Rejection 	<ul style="list-style-type: none"> • Over-reacting, controlling, • Shutting down • Disconnecting emotionally 	<ul style="list-style-type: none"> • Reactivity • Control • Punitive Responses
The Cycle	<ul style="list-style-type: none"> • I am being controlled • I have to fight harder • This is dangerous 	<ul style="list-style-type: none"> • He keeps fighting me, I better dig my heels in • The staff don't get it, why bother 	<ul style="list-style-type: none"> • I have to up the ante or this family will never do the right thing • This is hopeless • This is personal • Moral distress



A Matter of Framing

These individuals are not “manipulative,” or “disrespectful,” “defiant,” “rude,”
“attention seeking” etc.

They are surviving.

These behaviors are not “problems,” “issues,” or “concerns”

They are ways to communicate needs.



Trauma Informed Care Tenants





“A strengths-based framework that is grounded in an understanding of and responsiveness to the impact of trauma that emphasizes physical, psychological, and emotional safety for both providers and survivors; and creates opportunities for survivors to rebuild a sense of control and empowerment”

Hopper, Bassuk & Olivet, 2010



<https://bhr-llc.com/trauma-informed-services/>

A New Question:

Moving from:

“What’s wrong with you?”

To:

“What happened to you?”

and how do *I* do things ***DIFFERENTLY***
because of what’s happened to you?



<https://www.pinterest.com/pin/writing--439663982376317387/>



We must...

Respond to the need

Not react to the behavior

Seek connection



Trauma Informed Care in Medical Centers



Pediatric Medical Traumatic Stress

- The distress experienced by patients and family members when experiencing life-threatening or life-altering illnesses/injuries/conditions
- Prevalence
 - Up to 80% of children and families experience a traumatic stress reaction after a life-threatening illness, injury, or procedure
 - Another study reports up to 20% of PICU parents develop PTSD within a few months of admission



<https://www.akronchildrens.org/inside/2023/03/09/picu-program-shows-benefits-of-early-mobility-to-critically-ill-patients/>



Trauma in the medical setting

- Individuals who have experienced trauma are often highly sensitive to their environment
- Medical environments may be perceived as particularly threatening, with great potential to trigger trauma-related symptoms
- The physiological effects of critical illness as well as sedative agents hinder a patient's perception of their situation, increasing feelings of fear
- Potentially traumatizing aspects of healthcare were magnified during the COVID-19 pandemic



Schroeder, Pathak & Sarwer, 2021



Trauma Informed Care

- Trauma informed approaches in intensive care may decrease potential for re-traumatization during hospitalization
- A trauma informed care approach could be implemented in the inpatient medical settings in multiple ways:
 - Reducing ambient sound and light intensities
 - Minimizing alarm frequency/volume
 - Finding alternatives to physical restraints when able
 - Creation of a healing physical space with natural light
 - Efforts to provide privacy and carefully explain invasive procedures
 - Assigning the same healthcare provider to a patient across multiple days.



Trauma Informed Care Considerations

- Does this cultivate a sense of safety?
- Am I showing respect?
- Does this build trust?
- How can I foster autonomy?
- How do I create routine?



Blaustein & Kinniburgh 2010

<https://kdphospital.com/service/pediatric-services/>



Trauma Informed Self-Care

- Advance Preparation-something you do before entering a situation you anticipate could be stressful
- In the pocket strategies- your "go tos" when you are feeling stressed
- Recovery Strategies- what do you do after to take care of yourself?
- Ongoing Self Care-
 - Education on adaptive nature of behaviors
 - Understanding function
 - Understand and recognize triggers for yourself and your patients
 - **Normalize and depersonalize**
 - Using hospital resources- debriefs, peer coaching, formal and informal support



Personal Photo



TYPES OF COPING SKILLS

Self-Soothing

(Comforting yourself through your five senses)

1. Something to touch
(ex: stuffed animal, stress ball)
2. Something to hear
(ex: music, meditation guides)
3. Something to see
(ex: snowglobe, happy pictures)
4. Something to taste
(ex: mints, tea, sour candy)
5. Something to smell
(ex: lotion, candles, perfume)

Distraction

(Taking your mind off the problem for a while)

Examples:

Puzzles, books, artwork, crafts, knitting, crocheting, sewing, crossword puzzles, sudoku, positive websites, music, movies, etc.

Opposite Action

(Doing something the opposite of your impulse that's consistent with a more positive emotion)

1. Affirmations and Inspiration
(ex: looking at or drawing motivational statements or images)
2. Something funny or cheering
(ex: funny movies / TV / books)

Emotional Awareness

(Tools for identifying and expressing your feelings)

Examples:

A list or chart of emotions, a journal, writing supplies, drawing / art supplies

Mindfulness

(Tools for centering and grounding yourself in the present moment)

Examples:

Meditation or relaxation recordings, grounding objects (like a rock or paperweight), yoga mat, breathing exercises.

Crisis Plan

(Contact info of supports and resources, for when coping skills aren't enough.)

Family / Friends
Therapist
Psychiatrist
Hotline
Crisis Team / ER
911



Normalize – Ask – Pause – Connect

NORMALIZE

- Communicate that emotional difficulties are common and expected.
- Set up the discussion to promote emotional disclosure.
- Minimize the likelihood of "I'm fine."
 - "I know from working with other teens that it's common to feel down or depressed when [illness-specific stressor]."
 - "I hear from a lot of parents that they grieve the loss of [pre-illness experience]."
 - "I always ask about [emotion] because how you are emotionally is just as important as how you are physically."

PAUSE

Communicate non-verbally that you want to hear the answer.

Give the patient/family time to gather their thoughts and decide whether to share.

ASK

- Use open-ended questions.
- Keep your questions brief.
- Pay attention to your non-verbal communication.
 - "How about you/your family?"
 - "How has your family been affected?"
 - "What has [illness-specific stressor] been like for you?"

CONNECT

- Use reflection to communicate that the patient/family was heard and understood.
- Validate feelings.
- Connect to additional providers and resources when available.
 - "Thank you for sharing. It sounds like this has been a really hard time. I appreciate learning more about how you are doing so that we can continue to support you/your family."
 - "I can understand why you might feel this way."
 - "Our team has a [resource/person] that may be able to provide additional support around [challenge/concern]. Is it okay if I connect you?"

<https://www.roadmapforemotionalhealth.org/>

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It sounds as though you're feeling...

You would like me to understand that you're feeling _____ because _____ and you wish ...

What I'm learning about you is....

How can I support you?

What I hear you saying is....

On a scale from 0 - 10 (with 0 being the worst and 10 being the best) how well did I summarize what you are thinking and feeling?

What you would like me to know and understand better is



5 Things (5-4-3-2-1)

Grounding



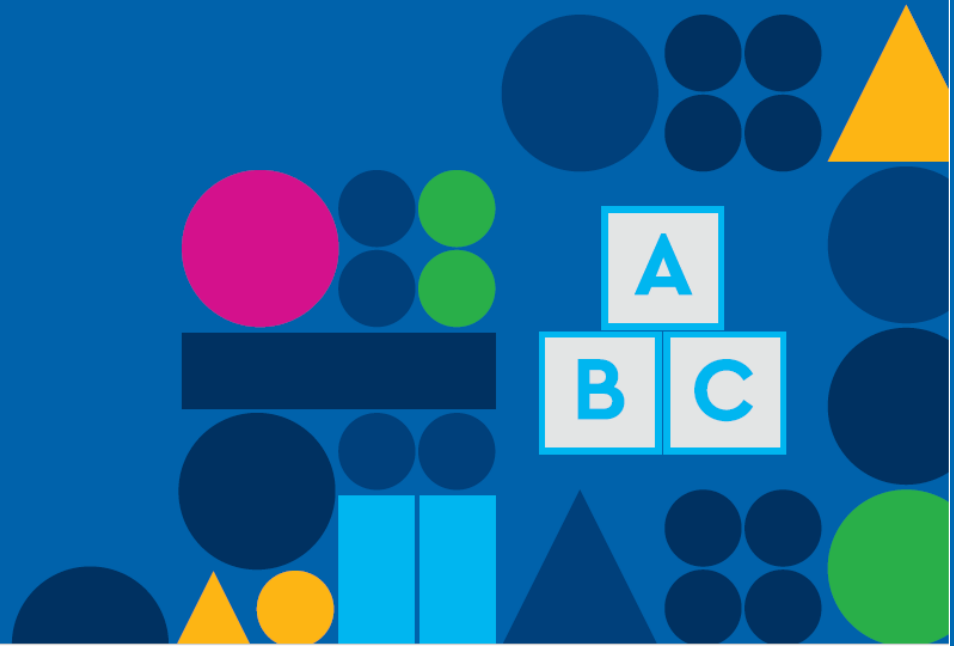
Children's Hospital Colorado
Here, it's different.™

ABC Around the Room

Grounding



Children's Hospital Colorado
Here, it's different.™



Superhero Breathing

Breathwork



Children's Hospital Colorado
Here, it's different.™

Questions



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