

Understanding the Role of Trauma and Gender as it Results in Better Health Outcomes

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TRAUMA

- Although humans have been experiencing trauma for thousands of years, it is only in the past two decades that it has been given such widespread attention. Many began hearing of Post Traumatic Stress Disorder (PTSD) after the Vietnam War. Trauma now is a household word and primarily associated with sexual abuse as recently evidenced by the Penn State scandals. In spite of the growing interest in this subject, up until recently, we have known very little about trauma and its affects. In fact, in spite of the interest and sensationalism surrounding this topic, we see little evidence of trauma being healed.



FACTS

- Statistics show that as many as one in three women and one and five men have been sexually abused as children. Even with this increased recognition, there remains little understanding about the conditions necessary for its healing.



FACTS

- Most of the trauma work that has been done in this country has been supported by survivors. Many traumatized individuals have sought refuge in each other through sharing their stories and validating each other's unique, painful experiences.



FACTS

- ❑ We now know that trauma is an event that happens to us and depending on the severity of the event and/or the amount of times it happens it has an effect on our mind, body and spirit.



CHILDREN

 The National Child Traumatic Stress Network says early childhood trauma generally refers to the traumatic experiences that occur to children aged 0-6. Because infants' and young children's reactions may be different from older children's, and because they may not be able to verbalize their reactions to threatening or dangerous events, many people assume that young age protects children from the impact of traumatic experiences.



CHILDREN

 A growing body of research has established that young children—even infants—may be affected by events that threaten their safety or the safety of their parents/caregivers, and their symptoms have been well documented. These traumas can be the result of intentional violence—such as child physical or sexual abuse, or domestic violence—or the result of natural disaster, accidents, or war.



GROUND-BREAKING RESEARCH

 It has not been until recently that we have been able to understand the link between disease and trauma. A recent study, between the Centers for Disease Control and Prevention and Kaiser Permanente led by Co-principal Investigators Robert F. Anda, MD, MS, and Vincent J. Felitti, MD, is perhaps the largest scientific research study of its kind, analyzing the relationship between multiple categories of Adverse Childhood Experiences (ACE's), and health and behavioral outcomes later in life.



FINDINGS

- This study was conducted on 17,000 middle-income Kaiser Permanente members. It found the following; childhood abuse, neglect, and exposure to other traumatic stressors are common.



FINDINGS

- Almost two-thirds of the study participants reported at least one ACE, and more than one of five reported three or more ACE. The short and long-term outcomes of these childhood exposures include a multitude of health and social problems.



RESEARCH METHODOLOGY

 The ACE Study uses the ACE Score, which is a count of the total number of ACE respondents reported. The ACE Score is used to assess the total amount of stress during childhood and has demonstrated that as the number of ACE's increase, the risk for the following health problems increases in a strong and graded fashion given the following order of hierarchy:



ADVERSE EVENTS BY HIERACHY

- Recurrent physical abuse
- Recurrent emotional abuse
- Contact sexual abuse
- An alcohol and/or drug abuser in the household
- An incarcerated household member
- Someone who is chronically depressed, mentally ill, institutionalized, or suicidal
- Mother is treated violently
- One or no parents
- Emotional or physical neglect



STUDY CONCLUSIONS

 The overall findings, demonstrate that: Adverse Childhood Experiences are surprisingly common, although typically concealed and unrecognized. ACE's still have a profound effect 50 years later, although now transformed from psychosocial experience into organic disease, social malfunction, and mental illness and substance abuse. Adverse Childhood Experiences are the main determinant of the health and social well-being of the nation.



OUR CULTURE

 In our culture there is a lack of tolerance for the emotional vulnerability that traumatized people experience. We are all too quick to label those who exhibit symptoms; especially our children who can rarely express how they feel.



DENIAL

 Trauma can no longer be kept in the closet it is a ***public health issue of magnifying proportion.*** It is imperative that we understand the impact of trauma on the families we serve and our role in terms preventing future trauma.



HEALING

 In order to heal from psychological and emotional trauma, you must face and resolve the unbearable feelings and memories you've long avoided. Otherwise they will return again and again, unbidden and uncontrollable.



INTERVENTIONS

- Some of the best treatments available include, **Somatic Therapy**, where the focus of therapy is on bodily sensations, rather than thoughts and memories about the traumatic event. By concentrating on what's happening in your body, you gradually get in touch with trauma-related energy and tension.



MORE

 **Cognitive Behavioral Therapy,** which helps you process and evaluate your thoughts and feelings about a trauma through behavioral changes, is designed to help you regulate emotions.



CUTTING-EDGE

- One of the most promising is; **EMDR (Eye Movement Desensitization and Reprocessing)** which incorporates elements of cognitive-behavioral therapy with eye movements or other forms of rhythmic, left-right stimulation. These back-and-forth eye movements are thought to work by “unfreezing” traumatic memories, allowing you to resolve them.



CARE-GIVER ALERT...

- Social Work staff must also recognize that as a result of this work, they may experience vicarious trauma. When this occurs, this must be managed so that care is given to the care giver.



TRAUMA-INFORMED

 Our work must be trauma-informed; incorporating at all times the following five (5) elements; ***safety, collaboration, trust, choice, and empowerment.*** We are resilient if given the chance to "tell our stories" have someone listen and show us the path to healing. It is time for us to finally acknowledge the wounds that come as a result of trauma, provide the care that is necessary and support a vision for change that is possible for everyone.



Why Gender Matters

- Sexual differences affect health and medical care, including reproductive issues
- Recent brain research findings also indicate a female-male difference in terms of learning, behavior, and processing emotion
- The female brain takes in more sensory data, relies more heavily on verbal communication, and processes more emotional information.

(Covington, 2007)



Definition: Gender Responsiveness

 Creating an environment through site selection, staff selection, program development, content, and material that reflects an understanding of the realities of the lives of women/girls (men/boys) and that addresses and responds to their strengths and challenges.

» (Covington and Bloom)



Quotes:

- If nothing ever changed, there'd be no butterflies. ~Author Unknown
- Change is inevitable - except from a vending machine. ~Robert C. Gallagher
- Things do not change; we change. ~Henry David Thoreau



Why Gender & Trauma?

- The Substance Abuse and Mental Health Services Administration (SAMHSA) in 2004 released study findings that show women with mental and substance abuse disorders and histories of violence (trauma) can improve when treated with counseling that addresses all their service needs. Findings also noted that women who have a voice in their own treatment report better outcomes than women who do not.



Issues Facing Addicted Women:

Personal Issues

- Shame and stigma
- Physical and sexual abuse
- Relationship issues
 - fear of losing children
 - fear of losing a partner
 - needing a partner's permission to obtain treatment



Treatment Issues:

Treatment Issues

- Lack of services for women
- Not understanding women's treatment
- Long waiting lists
- Lack of childcare



Systemic Issues:

- Lack of financial resources
- Lack of clean/sober housing
- Poorly coordinated services

(United Nations, 2004)



Relational Cultural Theory

- **Cultural Context:** Culture is a framework of values and beliefs and means of organizing experiences
- Cultural context creates a shared identity and it has a powerful impact on women's lives



Relationships

- The importance of connection with others in relationships is the central organizing feature in women's development
- Pathways to growth: Women's relational qualities and activities are potential strengths that provide avenues to healthy growth and development.
(Covington, 2007)



Trauma

 Recovery cannot occur in isolation. It can only take place within the context of relationships, characterized by belief in persuasion rather than coercion, ideas rather than force, and mutuality rather than authoritarian control – precisely the beliefs that were shattered by the original traumatic experiences.

Herman, 1992



Trauma-Informed and Trauma Specific Models

- Addressing the needs of survivors of trauma within the public and private systems requires a systemic approach characterized by both “trauma specific” diagnostic treatment services and a “trauma-Informed” environment capable of sustaining these services and supporting positive outcomes to clients receiving these services.



Moral Challenges

 19th century – slavery

 20th century – totalitarianism

 21st century – brutality against women and girls

(NY Times 9/23/09)



Our Belief...

- Persons who have survived psychological trauma can better recover when provided services that are informed by the needs of trauma survivors. The primary goal of having a focus on Trauma and Gender is to deliver behavioral health care that is sensitive and responsive to the needs of men and women who have experienced trauma.



Definitions:

 **Trauma-Informed** – A “trauma-informed” system is one in which all components of a given service system have been reconsidered and evaluated in light of a basic understanding of the role that violence plays in the lives of adults, children and adolescents and families or caregivers seeking mental health and addictions services (Harris & Falot, 2001)



More...

 **Trauma-Specific** - “trauma-specific” services are designed to treat the actual sequelae of sexual or physical abuse trauma. Examples of trauma-specific services include grounding techniques which help trauma survivors manage dissociative symptoms, desensitization therapies which help render painful images more tolerable, and behavioral therapies which teach skills for the modulation of powerful emotions (Harris & Fallot, 2001).



More...

- All trauma-specific service models, including those that have been researched and are considered emerging best practices, should be delivered within the context of a ***relational approach*** that is based upon the empowerment of the survivor and the creation of new connections.



Trauma Specific Models:

 Seeking Safety

 TREM (Trauma Recovery & Empowerment Model)

 MTREM (Male Trauma Recovery & Empowerment Model)

 EMDR



Trauma Informed Elements:

 Safety

 Trustworthiness

 Choice

 Collaboration

 Empowerment



Changes in Practice:

- **Safety:** How can we ensure physical and emotional safety for consumers throughout our system of care?
- **Trustworthiness:** How can we maximize trustworthiness? Make tasks clear? Maintain appropriate boundaries?
- **Choice:** How can we enhance consumer choice and control?
- **Empowerment:** How can we prioritize consumer empowerment and skill-building at every opportunity?
- **Collaboration:** The program's activities and settings maximize collaboration and sharing of power between staff and clients/consumers taking into consideration specific female and male issues.



In Conclusion:

 “If we can’t be helping people...at least we should be doing them no harm.”

» Dalai Lama

