
The Trauma-Informed Approach in Healthcare

Nkem Ndefo, MSN, CNM, RN | Lumos Transforms

Email nkem@lumostransforms.com

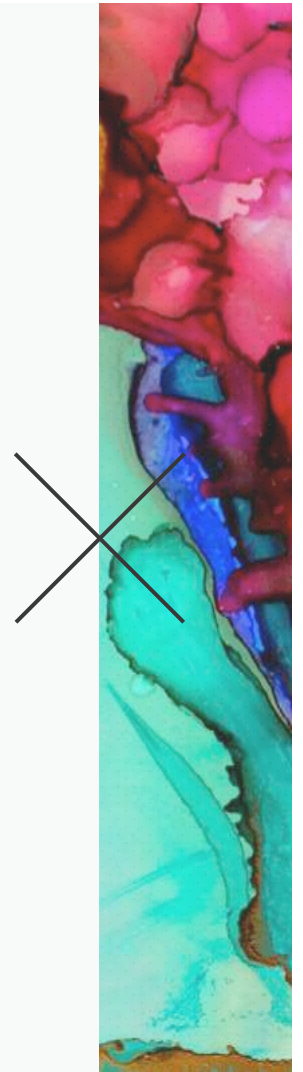
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October 2018



Trauma-Informed Paradigm Shift

What's wrong with you?

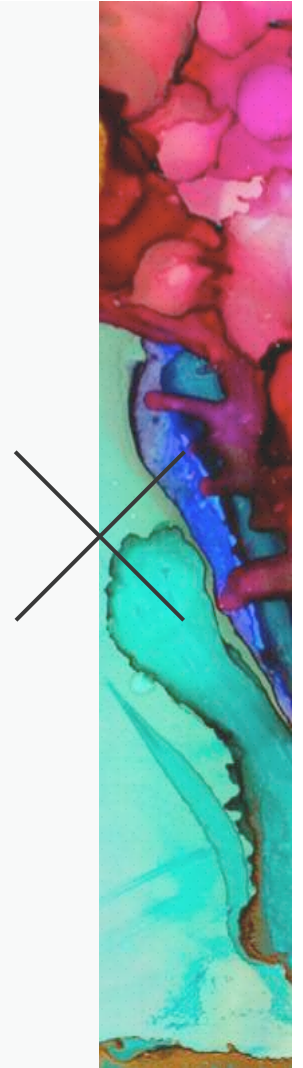


Trauma-Informed Paradigm Shift

What's wrong with you?

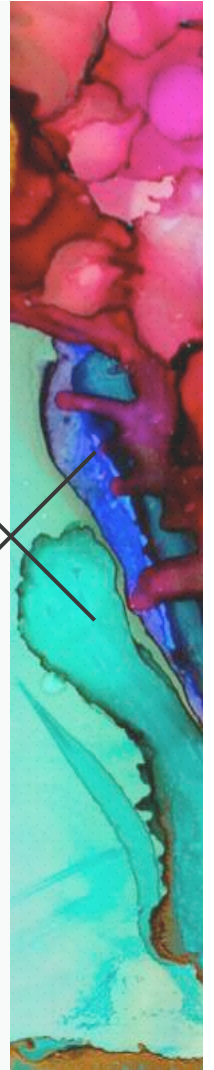


What happened to you?

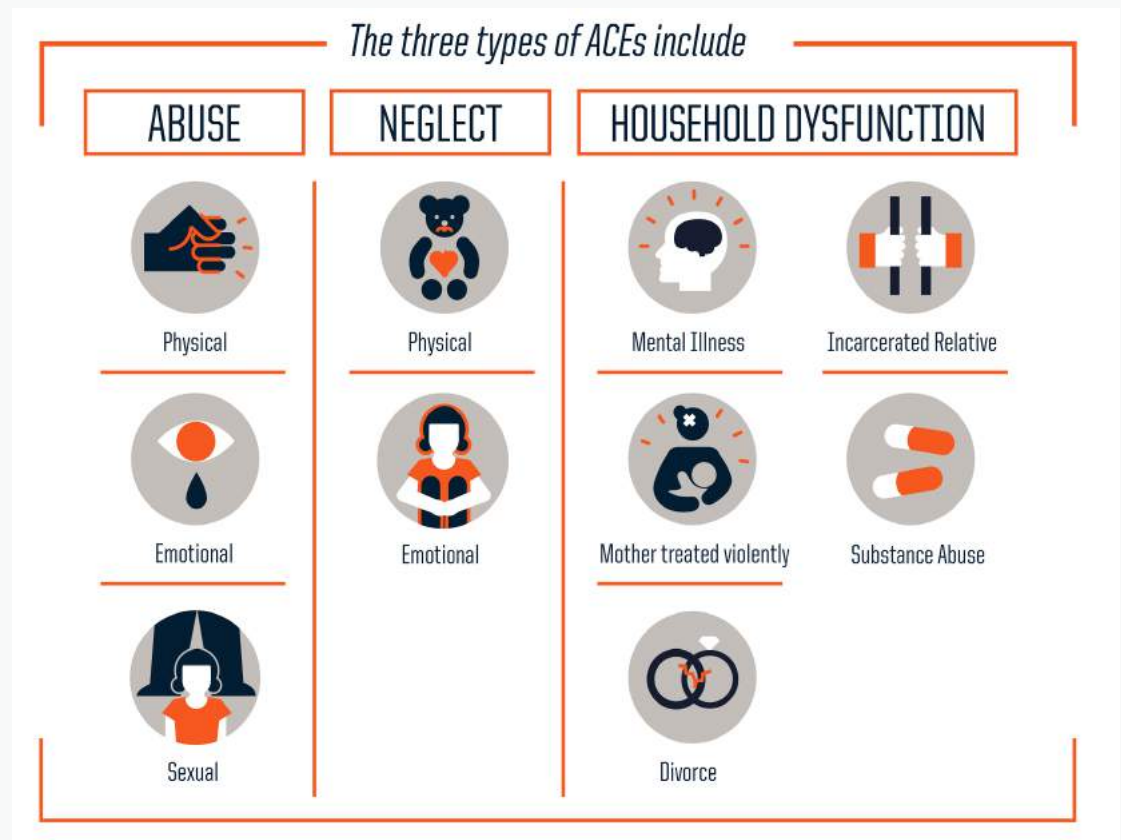


Adverse Childhood Experiences Study

Vincent Felitti (Kaiser Permanente) & Robert Anda (CDC)

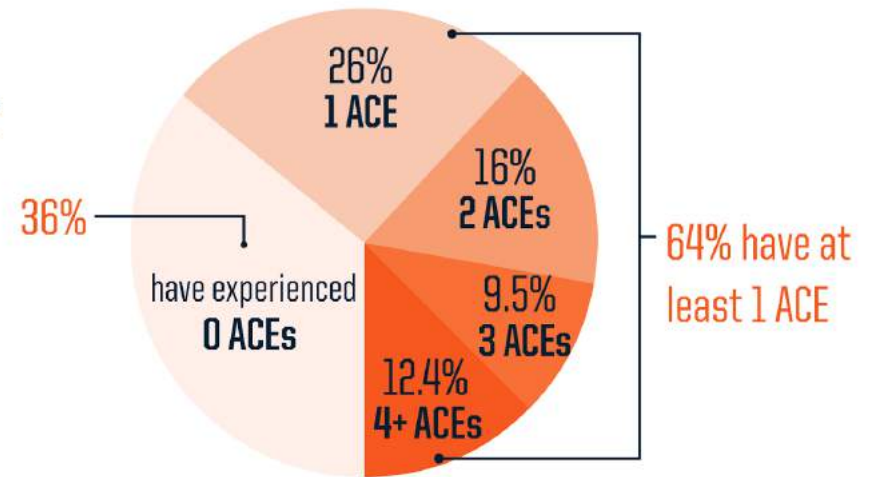


Types of ACEs

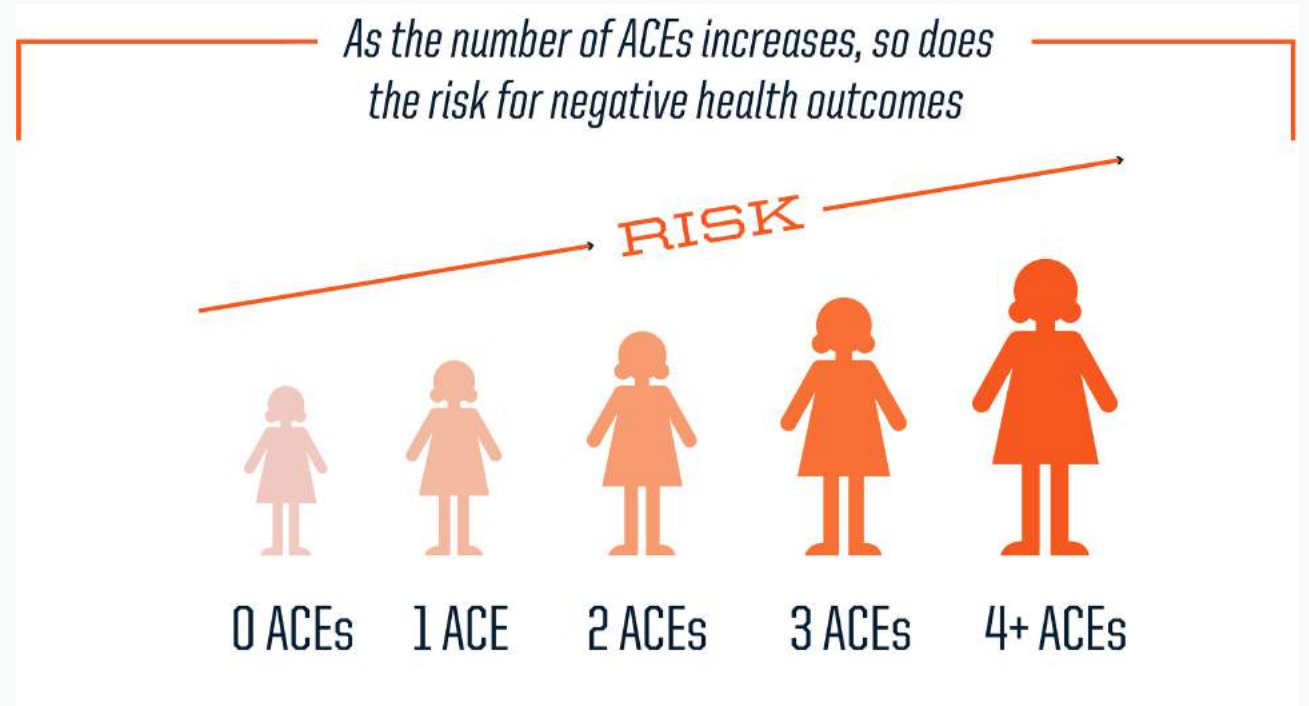


ACEs are common

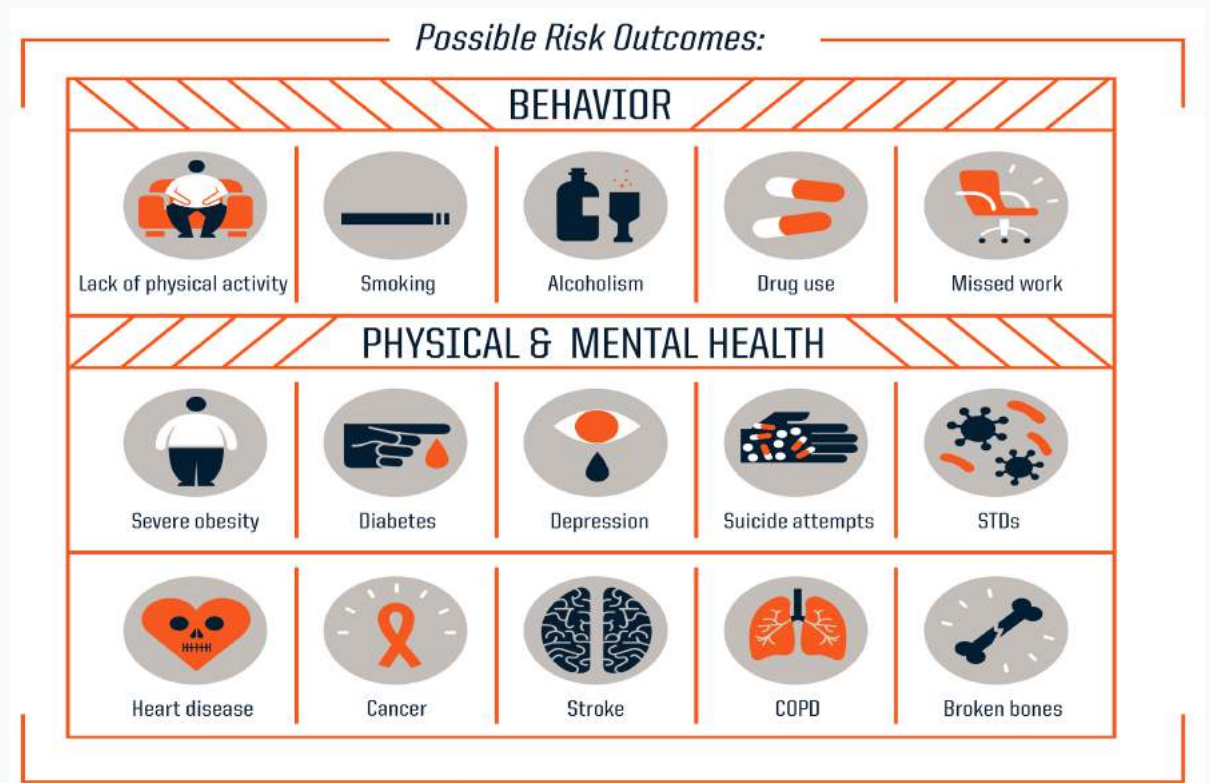
Of 17,000 ACE study participants:



ACEs dose-response effect



ACEs behavior & health outcomes



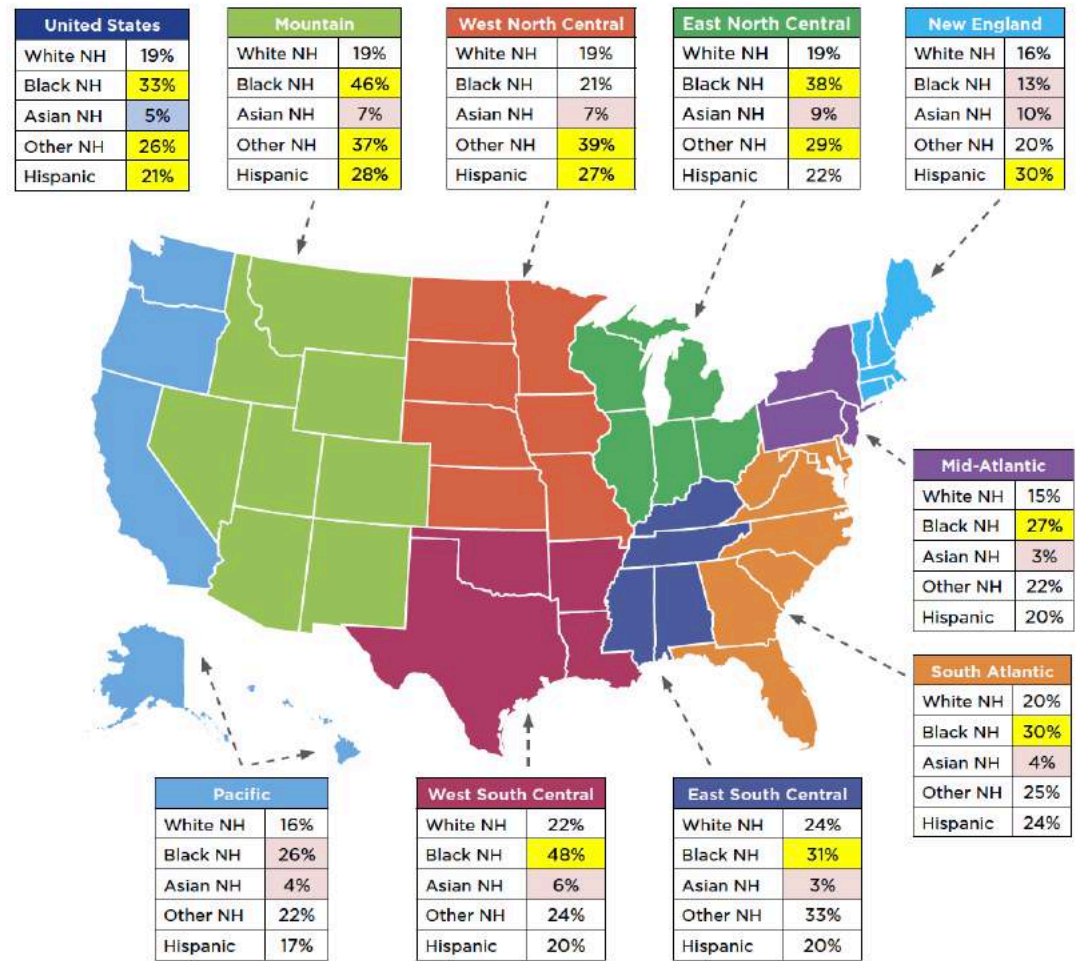
Philadelphia Urban ACEs

ACEs in PHL vs. Original Kaiser Sample

	PHL Sample (N=1,784)	Kaiser Sample (N=17,337)
Standard ACE Indicators		
Emotional abuse [†]	33.2%	10.6%
Physical abuse ^{*†}	35.0%	28.3%
Sexual abuse ^{*†}	16.2%	20.7%
Physical neglect [*]	19.1%	14.8%
Emotional neglect [*]	7.7%	9.9%
Substance using household member [*]	34.8%	26.9%
Mentally ill household member [*]	24.1%	19.4%
Witnessed domestic violence ^{*†}	17.9%	12.7%
Incarcerated household member [*]	12.9%	4.7%
Urban ACE Indicators		
Witnessed violence	40.5%	Not measured
Felt discrimination	34.5%	Not measured
Unsafe neighborhood	27.3%	Not measured
Experienced Bullying	7.9%	Not measured
Lived in foster care	2.5%	Not measured

Retrieved from <http://www.instituteforsafefamilies.org/sites/default/files/isfFiles/Urban%20Aces%20Study%20SlideShow%20version%2011-19-13.pdf>

National Survey Child Health ACEs



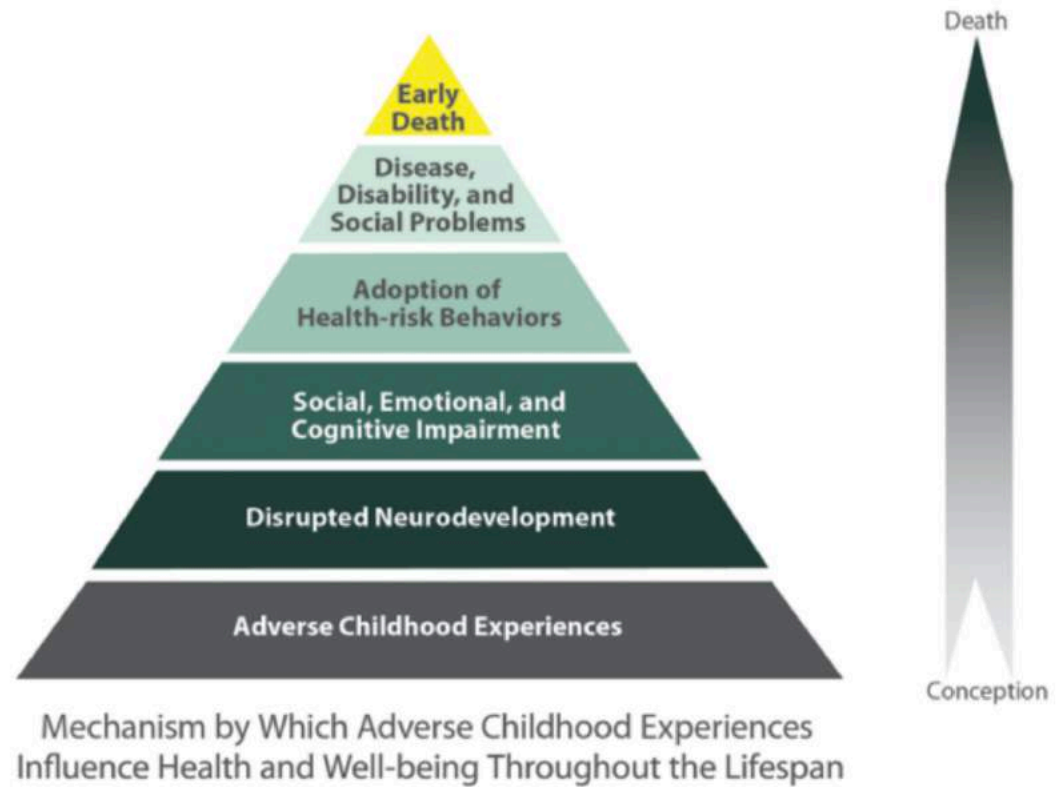
Retrieved from https://childtrends-ciw49tixgw5lbab.stackpathdns.com/wp-content/uploads/2014/0/childhood-experiences_FINAL.pdf

Odds ratio with ≥ 4 ACEs

	OR
DIABETES	1.52
CARDIOVASCULAR DISEASE	2.07
CANCER	2.31
Anxiety	3.70
Depression	4.40
Violence victimization	7.51
Violence perpetration	8.10
Substance abuse	10.22
Suicide	30.14

Hughes, et al. (2017)

ACEs mechanisms



ACEs mechanisms

Neurologic

Prefrontal cortex inhibition

Hippocampal atrophy

Nucleus accumbens Δ

Immune

Chronic inflammation

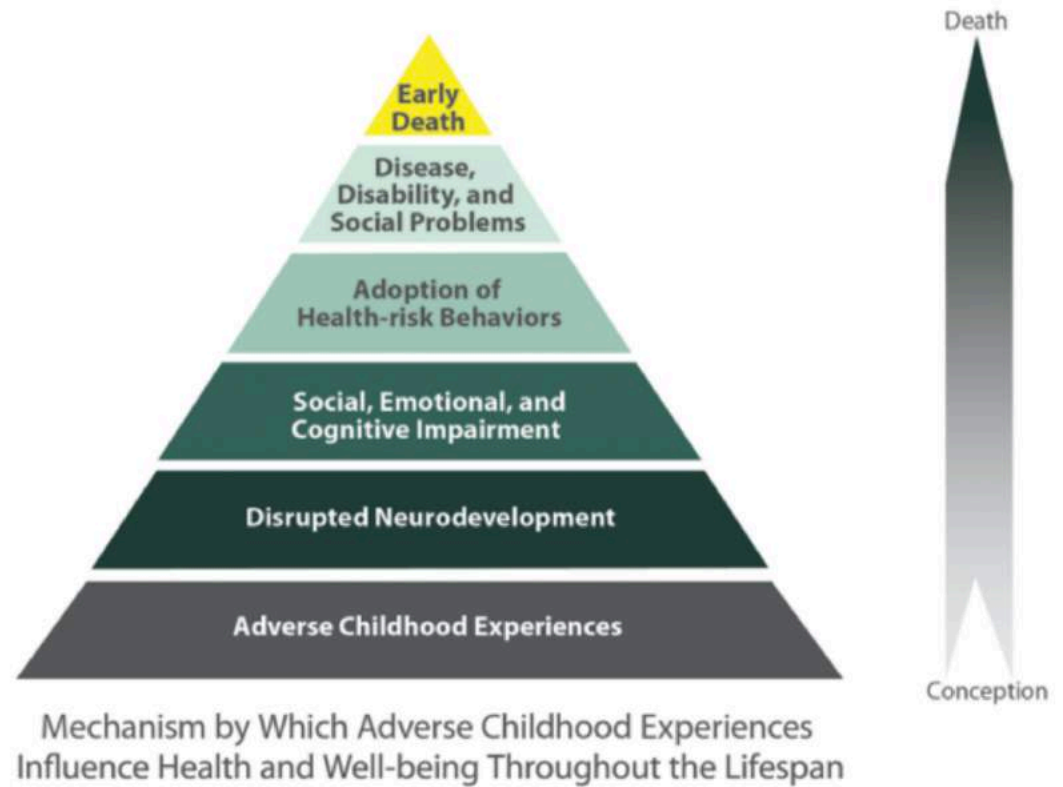
Impaired cell-mediated immunity

Endocrine

HPA dysregulation

Thyroid inhibition

ACEs mechanisms



Protective Factors

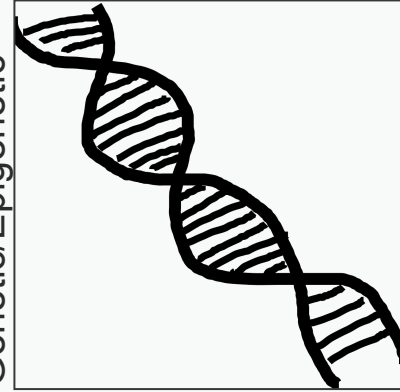
Ecology



Nurturing relationship



Genetic/Epigenetic



Southwick, et al., 2015

Trauma-Informed Framework



SAMHSA Trauma-Informed Goals

- **Realizes** impact of trauma and potential for recovery
- **Recognizes** signs of trauma
- **Responds** by integrating knowledge of trauma into policies, procedures, and practices
- **Resists** re-traumatization





SAFETY



TRUST & TRANSPARENCY



COLLABORATION &
MUTUALITY



PEER SUPPORT



CULTURALLY,
HISTORICALLY, & GENDER-
APPROPRIATE



VOICE, CHOICE, &
EMPOWERMENT

Trauma-Informed Principles

LEADERSHIP &
GOVERNANCE

TRAINING &
WORKFORCE
DEVELOPMENT

SCREENING, ASSESSMENT, PROGRESS &
& SERVICES RESULTS
MONITORING

ENGAGEMENT &
INVOLVEMENT

PHYSICAL
ENVIRONMENT

CROSS-SYSTEM
COLLABORATION

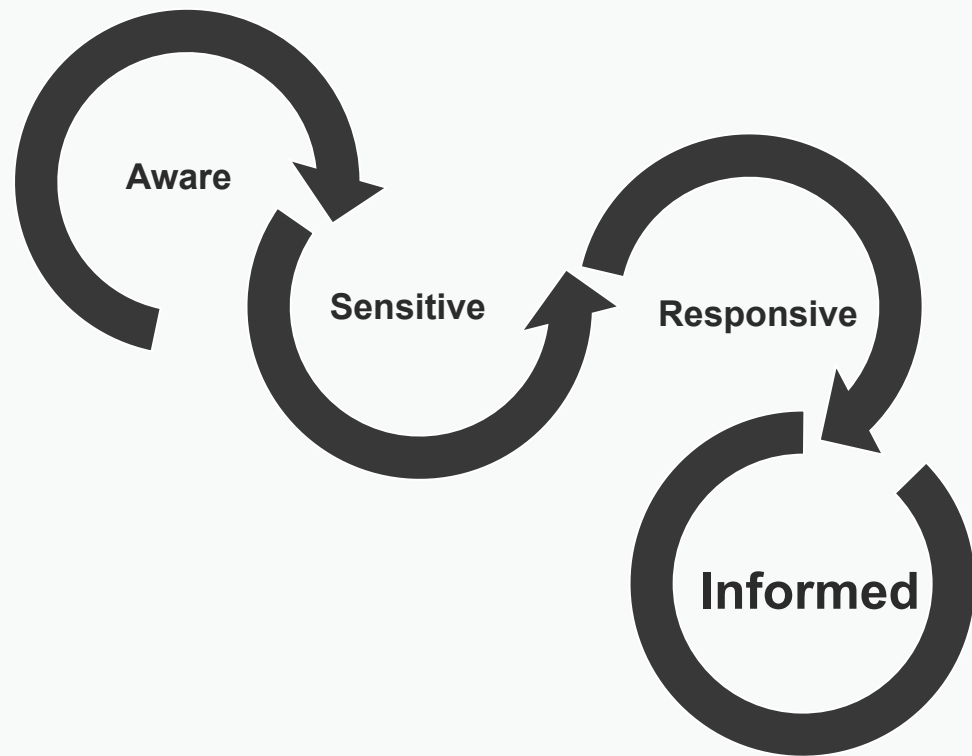
MEDIA &
MARKETING

POLICIES &
PROCEDURES

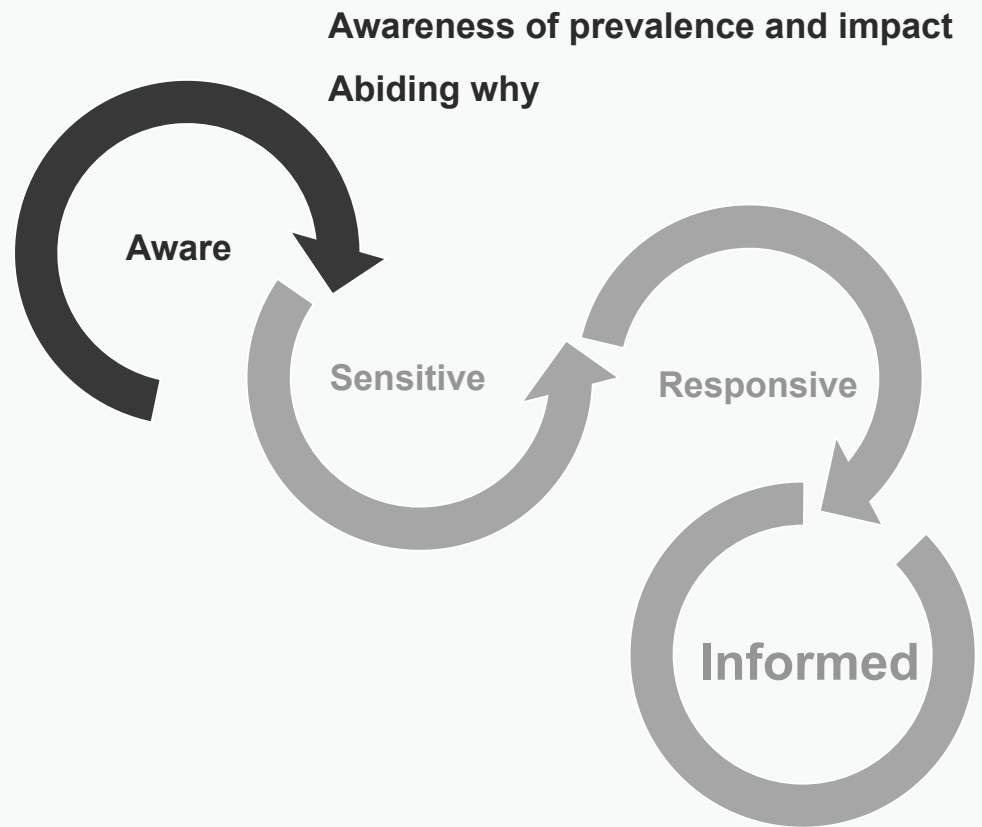
FINANCING

Implementation Domains

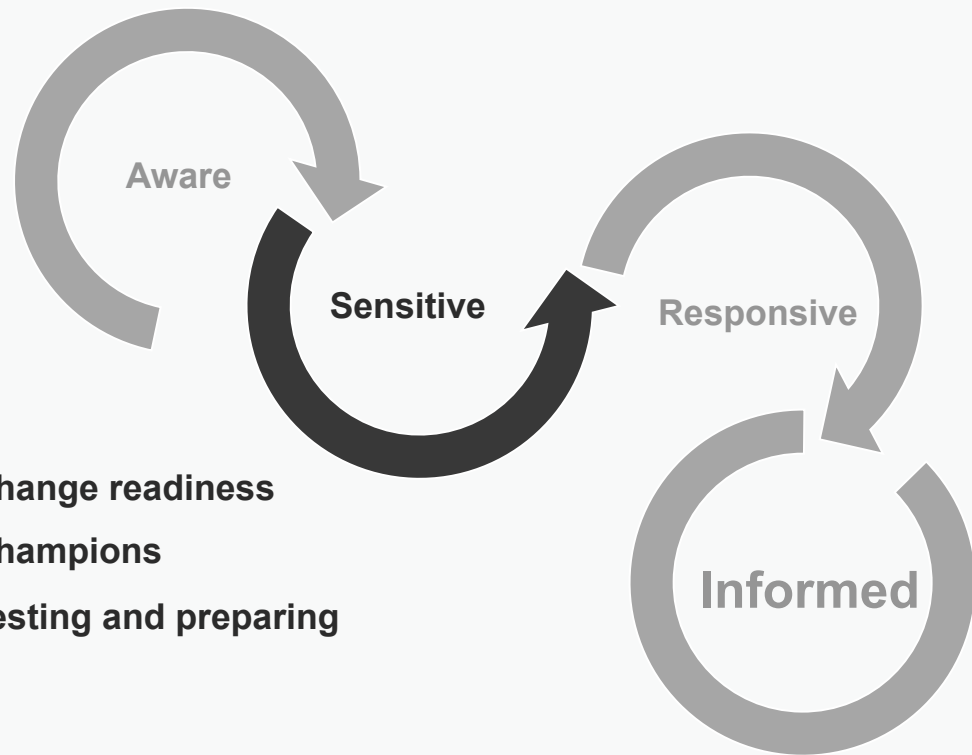
Developmental Framework



Developmental Framework

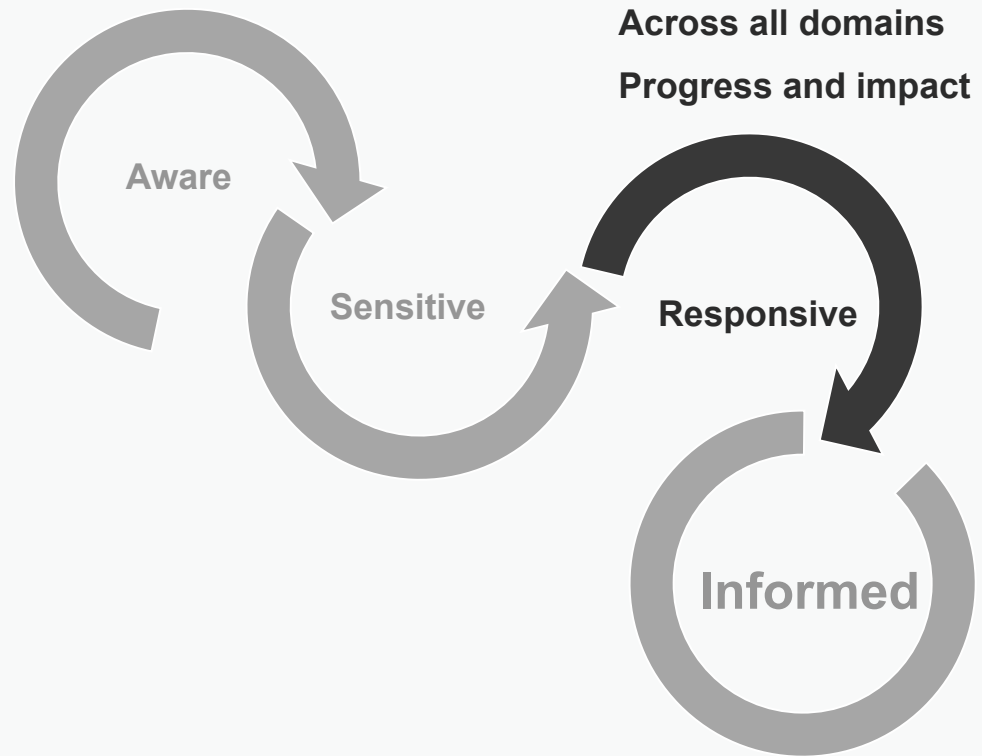


Developmental Framework

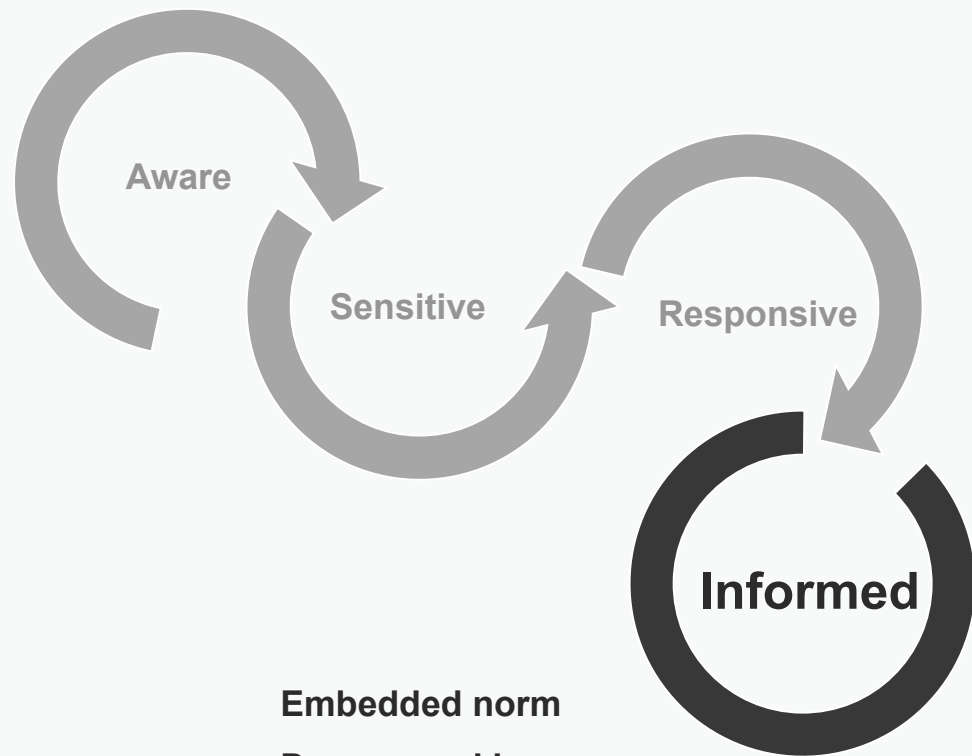


Change readiness
Champions
Testing and preparing

Developmental Framework



Developmental Framework



Embedded norm
Deepen and improve
Disseminate

Implementation is not . . .

“a program model that can be implemented and then simply monitored by a fidelity checklist. Rather, it is a profound paradigm shift in knowledge, perspective, attitudes and skills that continues to deepen and unfold over time.”

(Missouri Department of Mental Health and Partners, 2014, p. 1)



Organizational Implementation

- Leadership involvement
- Clinical and non-clinical staff training and engagement
- Safe physical and psychological environment
- Patient engagement
- Address vicarious trauma and burnout
- Evaluation



Clinical Implementation

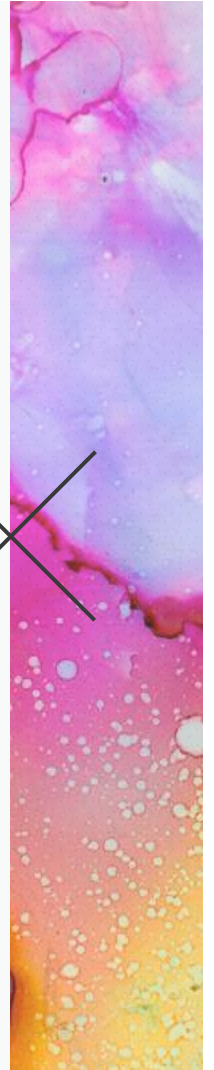
- Collaborative patient relationships
- Trauma screening
- Availability of trauma-specific treatments
- Referrals and partner organizations
- Enhance protective factors



American Academy of Pediatrics:

“Pediatricians are now armed with new information about the adverse effects of toxic stress on brain development, as well as a deeper understanding of the early life origins of many adult diseases. As trusted authorities in child health and development, pediatric providers must now complement the early identification of developmental concerns with a greater focus on those interventions and community investments that reduce external threats to healthy brain growth.”

(Garner & Shonkoff, 2012)



A Call to Osteopaths:

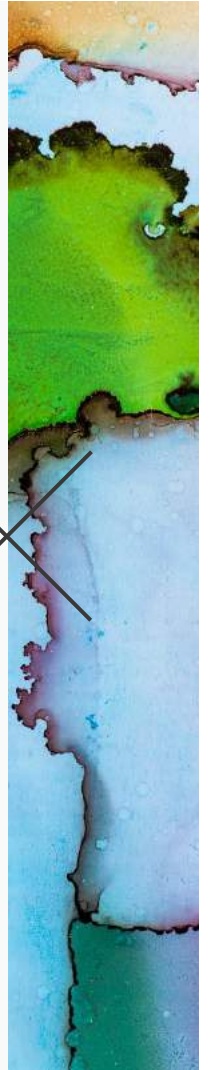
“The knowledge gained from these studies should inform our professional roles and be incorporated into the education of our medical students. We must add extensive coursework on ACEs and trauma recognition, prevention, and treatment to medical curricula, including trauma-informed care, lifestyle medicine and self-care within trauma-informed offices. Creating trauma-informed medical systems has the potential to help children and adults who receive care in overcoming the sequelae of their ACEs and should be a priority for physicians. This research and the need for trauma-informed care plays to our osteopathic strengths. Let us make the effort and take charge in creating trauma-informed practices in every corner of osteopathic care.”

(St. Germain & Rutledge, 2017)



Considerations & Cautions

- Over focus on patients
- Over focus on interpersonal trauma
- Over focus on trauma

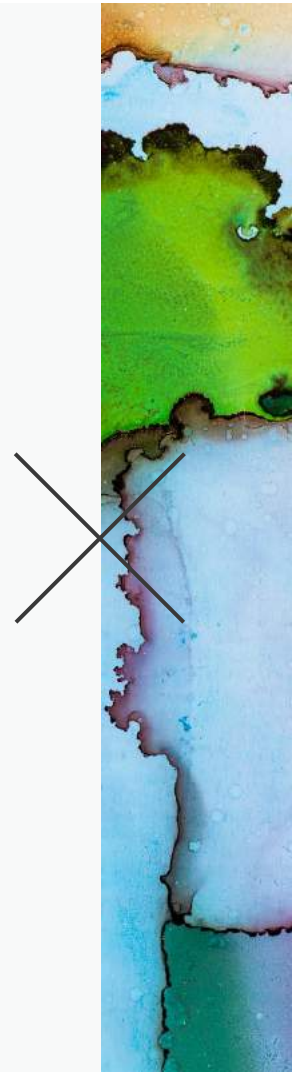


Resilience-Informed Paradigm Shift

What happened to you?



What's right with you?



The background of the slide is a light gray color with a pattern of faint, overlapping question marks and geometric shapes like squares and circles. A prominent, larger question mark is centered on the right side of the slide. The word "Questions" is written in a bold, black, sans-serif font on the left side, enclosed within a white rectangular box that has a thin black border. The overall design is clean and modern.

Questions

Contact

Nkem Ndefo | Lumos Transforms

Email [*nkem@lumostransforms.com*](mailto:nkem@lumostransforms.com)

Twitter [*@NdefoNkem*](https://twitter.com/NdefoNkem)



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