

## 2016 SYMPOSIUM SERIES

Sponsored by:

United Way  
of the Midlands



Sponsoring partners:



# TRAUMA INFORMED CARE: LESSONS LEARNED

## MARCH 2016

A victim of trauma – due to neglect, abuse, violence, disaster or loss – can be forever changed, especially if that trauma is never addressed. It can become disabling; the trauma can spread across generations of families and impact critical community systems, including criminal justice, health care, classroom and workforce settings. For that reason, public, nonprofit and private services must take this into account as they serve our vulnerable neighbors and our community.

To better understand the importance of Trauma Informed Care, United Way of the Midlands and partners – Buffett Early Childhood Institute, University of Nebraska Omaha, University of Nebraska Medical Center and Nebraska Children and Families Foundation – hosted a symposium on the topic on March 15, 2016.

Dr. Howard Liu, Director of the Behavioral Health Education Center of Nebraska at UNMC, led the discussion about prevention and treatment, with Melissa Tibbits, PhD, Assistant Professor of UNMC College of Public Health and Barbara Jessing, Clinical Director of Project Harmony's "Connections" program. The panel explored the challenges and responses to trauma that affects individuals, families, neighborhoods and systems in our metro area.

### Scope of the Challenge:

- National community-based surveys indicate that between 55% and 90% of us have experienced at least one traumatic event – including physical or emotional abuse, abandonment, war or natural disaster – either in childhood or as an adult.<sup>1</sup>
- Among those receiving care in public behavioral health programs, more than 90% of the clients have experienced trauma.<sup>2</sup> While some can cope with it, trauma can become disabling, making an impact on a person's ability to live life in a "normal way."
  - Melissa Tibbits noted "there are several types of trauma, and the most important ones we often focus on and think about are physical and sexual abuse, neglect, domestic violence, which are very serious, traumatic events. Additionally, there are other forms of violence that children are experiencing, like school violence, bullying, community violence – that could involve witnessing or being a victim of violence."
- More than 60% of all children and adolescents are victimized by violence each year<sup>3</sup>, leaving victims to suffer in silence or act out. Yet only 20% of children with mental or behavioral disorders are identified and receive mental health services.<sup>4</sup>
- 61,000 adults and more than 20,000 children in Nebraska live with a serious mental illness.<sup>5</sup>
  - According to Barbara Jessing, "We have kids whose parents are struggling day-to-day with toxic stress and poverty. What kids need to organize their feelings, behavior and learning is the 'surround-and-support' of adults – adults who buffer stress. And when those adults aren't buffered on their own stress, then we have a gap."

***The "Nebraska ACE Count 2010-2011" notes that one-in-five people in the state are at high-risk for having an Adverse Childhood Experience affect their health and their life.***

The Adverse Childhood Experiences (ACEs) study suggested that certain events, early in life, can increase health risk factors as people age, resulting in a poor quality of life, illness and death. ACEs can include the following situations, suffered either by the subject or someone else in the household: physical, sexual or verbal abuse, mental illness, divorce, substance abuse or incarceration.

Tibbits said in early childhood, the constant activation of the physiological stress response impacts brain development – the areas associated with learning, reasoning and affects overall health status.

When a child’s mental health problems are identified and treated early in life, Jessing said they are less likely to turn into more serious problems later in life. The goal is to help the child and family before outside systems like Child Protective Services and Juvenile Services become involved.

***“What we’re finding, as a result, are children who experience this form of toxic stress are having long term consequences in learning and memory, but also physical health, including greater risk of heart disease later in life, anxiety, depression and cancer.”***

***Melissa Tibbits***

### Considering Prevention at the Community Level:

Dr. Howard Liu told event participants that early in his career, he was focused on helping patients one at a time. But he challenged them to consider what he now believes is a critical aspect: addressing mental health care from a larger systems perspective. “It’s important to ask ‘what can we do as a community?’ What more could we do if we could change the home environment? If we could change the poverty that family is living in, if we could help provide reliable transportation to get care where they can talk with very highly skilled and compassionate providers to offer a pathway out of the trauma they’ve suffered.”

Liu cites the need to address the stigma a family might feel when seeking help – and decrease it – by talking about the issues and asking the right questions.

The March 15 panel of presenters agreed it takes a community of engaged and caring people – working together on the many factors of mental health and trauma informed care – to address it from a systems perspective.

***“The right time to address a child’s trauma is now, not 16 years from now.”***

***Dr. Howard Liu***



We invite you to view the print materials and video excerpts from the March 15 symposium on Trauma Informed Care at: [unitedwaymidlands.org/marchsymposium](http://unitedwaymidlands.org/marchsymposium).

- 1 Region 3 Behavioral Health Services
- 2 “How to Manage Trauma”, National Council for Community Behavioral Healthcare
- 3 Finkelhor, Turner, Ormrod & Hamby, 2009
- 4 Centers for Disease Control, 2013
- 5 National Alliance on Mental Illness, State Advocacy 2010