The Hong Kong Council of Social Service

Trauma-informed Human Services Implication of the trauma informed human services to the mental health professionals

C S Yu thought on trauma?

Therapist with interest in the mind.
Review what causes fear, horror and helplessness.

Avoid harming the patient or client

•Understand the initial reaction as adaptive.

•Majority people has severe initial reaction but minority people develop PTSD after 1 month.

•Acute stress disorder has dissociative symptoms and is diagnosed in 20% of survivors of civilian trauma.

Trauma創傷

- Trauma can describe one-time incidents or chronic or repetitive experiences.
- Trauma is physically, socially and psychologically damaging.

What percentages of mental health client have histories of trauma?

certainly very high percentage

- ·有mental 或 substance abuse
- ·其實極其之不妙
- ·男和女都易受創
- ·無家可歸女誰照

Trauma

- Trauma can be an underlying factor of substance abuse or a mental disorder. It affects emotion and behaviour- the very 2 essence of mental psychiatric world.
- Untreated traumatic experience in childhood affect brain development and might result in mental problems.
- Their own trauma may have a further negative effect on the future development of the next generation.

5 Core Elements of a Trauma-Informed System

- 1. 4M-Administrative Commitment
- 2. Hiring and Human Resources Practices
- 3. Universal Screening for Trauma Histories
- 4. Review of Provision of Services and Polices
- 5. Training and Consultation

Implication to mental health 4M

- Many patients with psychiatric problems or substance abuse problems are victims with traumatic experiences.
- Committment and priority have rooms for improvement.
- 43% of psychiatric inpatients reported history of physical or sexual assault (Carmen, 1984).
- Presentations of patients are usually masked by other domineering psychiatric problems.
- Substance abuse is seen in majority of people with sexual and physical abuse.
- Such trauma experiences easily complicating diagnosis, treatment and rehabilitation of the psychiatric disorders.

Implication to mental health

- Additional treatment of the trauma might be an effective adjunct system of care approach.
- People may not seek for assistances directly for problems caused by trauma they experiences.

Implication to mental health

- Not recognizing the impact of trauma can results in misdiagnosis, actions that increase traumatic reactions, and other undesirable consequences.
- It also discourage clients compliances in further follow up. Cooperation with treatment may be doubtful.

Implication to mental health

- A trauma-informed care system helps relieving the impacts of trauma towards mental health.
- It aims to promote screening to identify symptoms and problems related to the trauma, and offer and develop services to facilitate recovery.
- Policies and procedures will be developed by service agencies that are both trauma informed and trauma focused.

Trauma informed

- A culture, gender and age sensitive service systems
- recognize and address the presence and long term effects of abuse and other traumatic experiences of people requiring mental health and medical services.

Trauma focused- 3 S

- screening for psychological trauma
- staff training
- services for people with impaired functioning as a result of long-term effects of psychological trauma.

Richard R. Bebout

 A trauma-informed practice or policy, "they do not trigger trauma reactions or retraumatize, are welcoming, assist trauma survivors to participate, and provide a healing and safe climate"

- Identification of trauma:
 - Uncontrolled emotions
 - Low temper threshold
 - Poor attention and concentration
 - Self harm
 - Unmanageable behaviors problems
 - Low self esteem
 - Mistrust of others and unsatisfactory interpersonal relations.
 - Lack of complete clinical recovery.

trauma related psychiatric problems

- Acute stress disorder
- Post Traumatic Stress Disorder (PTSD).
- Depression
- Anxiety disorder

Service Consideration

- Coordinate at high government level to lead the implementation of the policy
- Traumatized individuals should be involved in the planning and evaluation of services.
- They can involve family or friend in the process.
- Policies and procedures should consider ways to avoid the inadvertent traumatizing or retraumatizing of people receiving mental health, medical treatment and services.

Service Consideration

- Establish community partnerships to enable screening and appropriate referral for people who exhibit long term effects of psychological trauma and who are significantly impaired.
- Training should be provided for staff of partners on secondary or vicarious trauma.
- Ensure everyone within the system and people in the community be aware of the trauma sensitive services.
- The service should avoid retraumatization

- Support for workers serving the community.
- Education.
 - Identification and screening
 - Avoid retruamatization.
 - Aims at recovery.

- Review of service provision.
 - Support and collaboration.
 - As trauma can affect many biopsychosocial aspects of people, it is important to enhance cooperation amongst services.
 - Diversification of service provision to trauma survivors in the community.
 - Improve accessibility of psychiatric services.
 - Direct provision of services.
 - Hospital based community services under the umbrella of Hospital Authority.

– Resource for

- Screening & subsequent intervention
- Knowledge and readiness of staff.
 - Supporting supervisors
 - Peer processing
 - Self-soothing skills
- Decrease the complexity of reporting system to enable a more accessible service.