

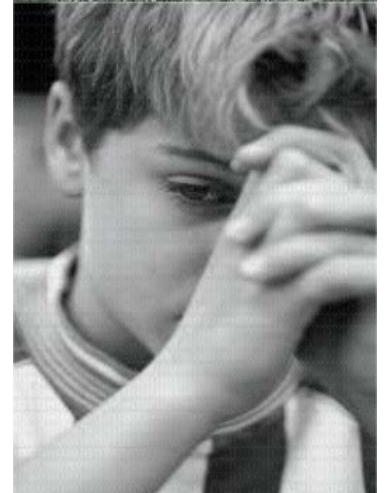
# ASSESSMENT OF TRAUMA AND TRAUMA-INFORMED CARE IN PRIMARY CARE AND SCHOOL SETTINGS

PART 2 OF A 4-PART SERIES ON TRAUMA IN  
CHILDREN AND ADOLESCENTS

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THE UNIVERSITY *of*  
NEW MEXICO

# GOALS FOR THIS PRESENTATION:

Signs and symptoms of trauma and traumatic grief across development

How trauma presents in schools and primary care settings

How *you* can help to identify those who are experiencing trauma symptoms

Simple screening questions to identify those who should be referred for trauma-focused treatment

Resources and referrals for traumatized youth and families

# CHILDHOOD TRAUMA

Up to 67% of youth in US have experienced at least one traumatic event during childhood

Children often do not disclose these events

- ❑ Lifetime victimization in 2-17 year olds (*Finkelhor et al., 2009*)
  - 80% reported at least 1 victimization (69% in last year)
  - Multiple types of victimization are common
  - Mean number of victimizations = 3.7

*Costello, Erkanli, airbank, & Angold, 2008;*  
*Copeland, Keeler, Angold, & Costello, 2007;*

[www.nctsn.org](http://www.nctsn.org)





- ▶ Prevalence of childhood trauma  
Nationally representative sample of 12 to 17 yr-olds  
(Kilpatrick, Saunders, & Resick, 1998)
  - 8% reported experiencing sexual assault/ abuse
  - 17% experienced physical abuse
  - 39% witnessed violence in their homes, schools, or neighborhoods

### **Prevalence of childhood grief**

75% of children will experience the death of a family member or friend before age 10



# WHY IS SCREENING IN COMMUNITY SETTINGS IMPORTANT?

Children's functioning is significantly affected by trauma, and many children remain silent about traumatic events until they are asked

Teachers, nurses, doctors, health professionals, and other child-serving professionals are important sources of support and guidance

Children or parents may need or want to talk with *you*

Families may be more likely to accept help or referrals from professionals they know and trust



# WHAT IS TRAUMA?

**Trauma is an emotional or physical reaction to an event that is witnessed or experienced as deeply disturbing.**

## **Types of traumatic events include:**

Being a victim of physical, emotional or sexual abuse

Witnessing family or community violence

Neglect and/or abandonment

Loss of a relative or friend due to accident, illness, disease, natural disaster, or violence

Involvement in a serious accident, dangerous/scary/painful medical procedures, or natural disaster

# TYPES OF POST-TRAUMATIC RESPONSES

The impact of psychological trauma cannot always be encompassed by a list of symptoms or disorders.

Common responses include:

PTSD and/or Acute Stress Disorder

Complicated or Traumatic Grief

Major Depression

Generalized Anxiety, Phobias, Panic

Dissociation

Somatization, Conversion Disorder

Drug and Alcohol Abuse

Borderline Personality Disorder

Culture-Bound Stress Responses

# RECOVERY AND RESILIENCY

Remember that PTSD is only one possible outcome of trauma

Health, resiliency, recovery, and post-traumatic growth are very common!

Recovery from trauma is the primary goal of trauma-informed services

Under the right circumstances, resiliency can be promoted in all individuals





# REACTIONS TO TRAUMA AND LOSS

Trauma is experienced differently depending on:

Victim's age and level of development

How the family and community responds & reacts

Cultural background/beliefs



Individual reactions to trauma vary:

Some will show symptoms immediately, others will take longer to react

Some will show distress for a short time, others in bursts that come and go

Acute stress reactions in the aftermath of traumatic events have much greater probability of developing PTSD

# HOW DO PRESCHOOL CHILDREN REACT?

Feelings of helplessness and generalized anxiety

Difficulty expressing what is bothering them

Loss of previously acquired skills  
(e.g., language, toileting)

Increased attachment needs

Need to “play out” traumatic  
event

Sleep and eating problems

Fears of the dark/ night



# HOW DO SCHOOL-AGE CHILDREN REACT?

Persistent concerns over safety

Constant retelling of traumatic event

Feelings of guilt or shame

Overwhelming fear or sadness

Aggression, irritability

Diminished attention, memory

Psychosomatic (body) complaints

Avoiding social activities

Sleep problems



# HOW DO ADOLESCENTS REACT?

Self-consciousness about emotional responses

Concern over being labeled “abnormal”

Withdrawal from family and friends

Feelings of shame and guilt

Fantasies of revenge and retribution

Radical shift in perceptions of the world

‘Pretend it didn’t happen’

Self-destructive behavior

Diminished attention, memory



# WHAT YOU CAN DO TO HELP

Reassure youth that you and other people will do everything you can to keep them safe...and follow through!

Asking simple screening questions about traumatic events communicates that you would like to help

Remember that you do *not* have to have the answers or solutions!

Be a good listener

Give simple and realistic answers to their questions; saying I don't know is okay too!

Show that the community supports and accepts survivors of trauma

Encourage them to discuss the traumatic event or their behavior with a professional or someone they trust...when *they* are ready!



# SCREENING FOR TRAUMA

**Who** should screen for trauma?

Doctors and other health  
or mental health providers

Teachers and school personnel

Other youth service agencies



**How** can doctors' offices, schools, and other community agencies who serve children & families screen for trauma in sensitive, brief and effective ways?

Educate yourself about the signs & symptoms!

Informal observations & formal screening questions

Has your child experienced or witnessed an event that caused, or threatened to cause, serious harm to him or herself or to someone else? Please check any and all events (and age(s) of your child at the time of the event or events) below-

- |                   |       |              |                     |       |              |
|-------------------|-------|--------------|---------------------|-------|--------------|
| 1) Car Accident   | _____ | Age(s) _____ | 5) Physical Illness | _____ | Age(s) _____ |
| 2) Other Accident | _____ | Age(s) _____ | 6) Physical Assault | _____ | Age(s) _____ |
| 3) Fire           | _____ | Age(s) _____ | 7) Sexual Assault   | _____ | Age(s) _____ |
| 4) Storm          | _____ | Age(s) _____ | 8) Any Other Event  | _____ | Age(s) _____ |

**0 = Not True (as far as you know) 1 = Somewhat or Sometimes True**  
**2 = Very True or Often True**

- 0 1 2** 1) Child gets very upset if reminded of the event.
- 0 1 2** 2) Child reports more physical complaints when reminded of the event.  
For example, headaches, stomach-aches, nausea, difficulty breathing.
- 0 1 2** 3) Child reports that he or she does not want to talk about the event.
- 0 1 2** 4) Child startles easily. For example, he or she jumps when hears sudden or loud noises.

# STUDENT HEALTH QUESTIONNAIRE

Are you having any of the following problems at home?

- *Includes:* violence, fighting

Are you having any of the following problems at school?

- *Includes:* bullying (in person or through social media)

Is there someone at home, school, or anywhere else who has made you

- feel afraid, threatened you or hurt you?

Have you ever carried a weapon to protect yourself?

Have you ever been physically, sexually or emotionally abused?

In the past 12 months, did your boyfriend/girlfriend ever hit, slap, or hurt you on purpose?

Have you ever been in foster care, a group home, or homeless?

Do you often worry about or feel like something bad might happen?



# CREATING A SUPPORTIVE ENVIRONMENT

Screening helps to identify children & families in need of resources and referrals

## Build relationships

Support children and families

Listen, accept and validate all feelings

You don't have to be a counselor to help!

Keep in mind that your role is *not* to ask for the detailed trauma story – that typically occurs in treatment, and only when the youth feels ready to disclose



# THINGS KIDS HEARD THAT HELPED

“I’m ready to listen when you’re ready to talk.”

"I can't know how you feel, but I want to help you in any way that I can."

“I know that you are sad.

It's OK to cry."

“I'm sorry that \_\_\_\_died."



# THINGS KIDS HEARD THAT *DIDN'T* HELP

“I know how you feel.”

“It's been four months now, you should be over it.”

“You'll get over it in time. Just try not to think about it.”

“Just concentrate on what you have left.”

“You shouldn't be this angry. Being angry won't bring your brother back.”

# RESOURCE LIST - NATIONAL

Substance Abuse and Mental Health Services Administration (SAMHSA)

<http://www.samhsa.gov/trauma-violence>

National Child Traumatic Stress Network (NCTSN)

[www.nctsn.org](http://www.nctsn.org)

Child Trauma Toolkit for Educators - Fact sheets and info for teachers and parents.

<http://www.nctsn.org/products/child-trauma-toolkit-educators-2008>

The National Council for Community Behavioral Healthcare

[www.thenationalcouncil.org](http://www.thenationalcouncil.org)





## NCTSN MISSION:

The mission of the National Child Traumatic Stress Network is to raise the standard of care and improve access to services for traumatized children, their families, and communities throughout the United States.

**Terrorism & Disasters**  
Readiness, Response, Recovery

Tools, PFA, and SPR.

**LEARNING CENTER**  
FOR CHILD AND ADOLESCENT TRAUMA

Education and online community.

**Understanding Child Traumatic Stress**

What it is. Why it matters.

**Information Resource Tools**

- Knowledge Bank
- Measures Review Database
- Military Families Knowledge Bank

### What's New?

- Helping Youth After Community Violence Trauma: Tips for Educators
- Working with Unaccompanied and Immigrant Minors

### Public Awareness

- Bullying Prevention Awareness Month (October 2014)
- Domestic Violence Awareness Month (October 2014)

### Upcoming Events

- [ISSTD 31st Annual Conference: Exploring and Learning Together: What We Now Know about Trauma & Dissociation \(October 23-27, 2014\)](#)

**Looking for help?**  
[click here](#)

- For Parents & Caregivers
- For Professionals
- Military Children & Families
- For Educators
- For the Media
- Información en Español

For more information:

<p><b>TRAUMA TOPICS</b></p> <ul style="list-style-type: none"> <li>Child welfare</li> <li>Culture and trauma</li> <li>Economic stress</li> <li>Facts and figures</li> <li>Juvenile justice</li> <li>Special populations</li> </ul>	<p><b>TREATMENT &amp; SERVICES</b></p> <ul style="list-style-type: none"> <li>Evidence-based treatment: Audio presentations</li> <li>Evidence-based treatment: Fact sheets</li> <li>Finding help</li> <li>Learning Collaboratives</li> <li>Training and education</li> <li>Training events</li> </ul>	<p><b>SUSTAINABILITY &amp; POLICY</b></p> <ul style="list-style-type: none"> <li>Building sustainable programs</li> <li>Creating trauma-informed systems</li> <li>Funding opportunities</li> <li>Information for grant applicants</li> <li>Policy issues</li> </ul>	<p><b>THE NETWORK</b></p> <ul style="list-style-type: none"> <li>Contact us</li> <li>Mission and vision</li> <li>National Center</li> <li>NCTSN affiliated professionals</li> <li>NCTSN national advisory board</li> <li>NCTSN organizational members</li> </ul>
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# RESOURCE LIST - REGIONAL

- University of New Mexico ACTION Clinic: Addressing Childhood Trauma through Intervention, Outreach, and Networking  
<http://psychiatry.unm.edu/centers/crcbh/action/>
- New Mexico Child Abuse Prevention Partnership (NM-CAPP)  
<http://nmcapp.unm.edu>
- Kempe Center for the Prevention and Treatment of Child Abuse and Neglect at The University of Colorado
- Indian Country Child Trauma Center (ICCTC) at the Oklahoma University Health Science Center (OUHSC), [www.icctc.org](http://www.icctc.org)
  - Trauma fact sheet for parents: <http://www.icctc.org/what%20is%20trauma-final.pdf>



THE KEMPE CENTER FOR THE PREVENTION AND  
TREATMENT OF CHILD ABUSE AND NEGLECT

