TEACHING THE EFFECTS OF VICARIOUS TRAUMA TO MEDICAL STUDENTS AND PROFESSIONALS
WELCOME AND INTRODUCTIONS

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LEARNING OBJECTIVES

• Explain purpose of the ACES study and the impact on health
• Identify ways in which the effects of vicarious trauma impact individuals
• Define how mind-body medicine and vicarious trauma education in primary care and educational settings can enhance student learning
• Understand how the outcomes of programming can influence curriculum outcomes
Residents require specialized training in contemporary models of trauma in order to meet the needs of this population.

Trauma knowledge + resident stress reduction training would improve efficacy, attitudes toward, and willingness to serve impoverished patient populations.
PURPOSE OF ACES

Adverse Childhood Events Survey
BEFORE WE GET STARTED... PURPOSE OF ACES

Administration of checklist
Description of ACE study
THE ADVERSE CHILDHOOD EXPERIENCES STUDY
(FELITTI, ANDA, ET AL., 1998)

- Conducted jointly by Kaiser Permanente and the CDC
- Largest longitudinal epidemiology study of its kind (1996-2008, analyses ongoing)
- Originated during mid 1980’s in Felitti’s Positive Choice obesity treatment study
ACE STUDY DESIGN

Aim: understand the relationship between childhood adversity & adult health

- Design: prospective cohort study, baseline data collected in 2 waves between 1995-1997. Longitudinal follow-up, 10 years

  Sample: 17,337 mostly white (75%), middle-class patients of the Kaiser Permanente Medical Care Clinic

  Procedures: comprehensive health assessment & administration of retrospective “ACE Questionnaire”
1. Summed the number of ACEs experienced to create an ACE Score
   - Frequency of categories exposed to (0 to 9)
2. Examined baseline prevalence of ACE exposure
3. Logistical regression with ACEs (IV) and health assessment data (DV) to examine odds and associations (between number of ACES and current health issues)
4. Longitudinal: followed cohort for a decade to determine ACEs and health outcomes
RESULTS: ACE PREVALENCE
(FELITTI ET AL, 1998)

Abuse
- Psychological/emotional abuse (11%)
- Physical Abuse (10.8%)
- Sexual abuse (22.0%)

Neglect:
- Psychological/emotional (15%)
- Physical (10%)

Household dysfunction
- Substance abuser in home (27%)
- Mentally ill caregiver (17%)
- Mother treated violently (13%)
- Parental separation (23%)
ACE STUDY IMPLICATIONS: THE CHANGING FACE OF TRAUMA - MORE COMMON THAN WE THOUGHT

**Traditional Model**

- Trauma is a discrete “event”
- Trauma is the exception rather than the rule
  - Ex: PTSD, 9-11, war

**Emerging Model**

- Trauma as chronic, cumulative circumstances
- Trauma is epidemic
- Ex: toxic stress, complex trauma
HOW DO TRAUMA STUDIES RELATE TO VICARIOUS TRAUMA EDUCATION? EXPERTS WEIGH IN..

Mairean, C. & Turliuc M.N. (2013) “Predictors of Vicarious Trauma Beliefs Among Medical Staff” Journal of Loss and Trauma, 18. 414-428


www.TheNationalCouncil.org
www.headington-institute.org
Rationale: From Patient ACES to Provider Stress

- Overactive stress responses, easily triggered
- Poor health, learned helplessness, poor coping in adulthood
- Overwhelming to residents, appear noncompliant and unmotivated
- Re-traumatization of patients, vicarious traumatization of residents
- Residents feel overwhelmed and burnout, cyclical
- Chronic stress during brain maturation
- Triggers Fight or Flight
- Anxious temperament in Adolescence
- Drugs, sex, smoking, food to soothe anxiety
- Early onset of COPD, DM, CVD, etc.
- ACES in Childhood

Brain and CNS adapt to promote heightened responses to stress
MEDTAPP METHODS

Mind Body Medicine
Trauma Informed Primary Care
Organizational Education
Created by James Gordon, MD

Comprehensive mind-body healing for health professionals

Focuses on mind-body interactions and how emotional + mental social + spiritual issues affect health

Based on the finding that “up to 80% of all illnesses are related to chronic stress” (http://cmbm.org/about/what-is-mind-body-medicine)
MIND-BODY SKILLS GROUPS GUIDING PRINCIPLES

Self care is at the center of wellness
- Safe place
- Respect
- Educational
- Staying in the moment
- Meditation is the ground in which we grow
- Compassion for self and others
- Using the group as a growth vehicle
1. Mind-body skills group trainings in Israel result in increased personal and professional use of mind-body skills among healthcare professionals resulting in increase in optimism, decrease in anxiety, anger and improved spirituality scores

2. Mind-body skills group training results in decreased PTSD symptoms, improved mood, and enhanced spirituality in healthcare professionals following Hurricane Katrina

3. Survey of training program participants 1995 – 2008 shows mind-body skills reach over 20,000 individual

www.cmbm.org/research/program-evaluations/
FAMILY MEDICINE RESIDENCY CLINIC

• Primary training site for 10-14 family medicine residents and interns

• Approximately 40% of patients are uninsured, 40% have Medicaid/Medicare, 20% private insurance

• Services predominantly poor Appalachian residents with multiple chronic illnesses and numerous unmet medical, psychiatric, and/or socioeconomic needs
Put on your own oxygen mask before helping those around you.

VICARIOUS TRAUMA IN A CLINIC SETTING
ONE PART OF THE TRIUMVIRATE

MEDTAPP as a 3 part series

1. Mind Body Skills Group
2. Residency Didactics
3. Trauma Informed Primary Care Training Program

TODAY –we will focus primarily on #3
EDUCATIONAL OBJECTIVES IN TEACHING

• Build an awareness of what Vicarious Trauma (VT) is
• Educate healthcare professionals on the impact of VT on one’s self, office, organization, and each patient
• Teach relaxation and stress management skills
• Promote reflection and self-awareness
• Encourage increased understanding among members of the team
Common Causes of Trauma in Our Region

Generational incest
Substance Abuse
Domestic Violence
Unintentional Injuries
  - Farming
  - Coal mining
  - ATV
  - Logging
  - Overdoses

Secondary trauma
Chronic poverty
Suicide
High access to firearms
Child abuse/neglect
Joblessness
Chronic illness
Indicators of Vicarious Trauma

• Intrusive experiences
• Strong reactions and feelings, such as grief, anger, shock or sadness
• Change in your beliefs about safety, trust, esteem, intimacy and control
  • Cynicism or pessimism
• Increased fear for safety of children or loved ones
• Difficulty making decisions
• Reduced productivity
• Less time spent thinking about your own experiences
Date: January 22, 2015

Topic: The Experience of Stress in the Workplace

Summary: The initial session focused on the purpose of the trauma informed care project and how the leaders could assist staff in becoming a more trauma informed organization. Basic concepts of the effects of stress and vicarious trauma were discussed. A facilitated discussion was led regarding how the patient population impacts the healthcare professional and the organization as a whole.

Assessment: Each participant was given a note card to give qualitative descriptions of what they learned about themselves (on one side of the card) and what could be improved in the session (on the others side). This was an informal survey of what each participant gained from the initial session. The group was given a compassion fatigue assessment to survey the most common sources of stress within the workplace.
PARTICIPANTS

Rural OB/GYN Clinic: High Medically Underserved Population

8 LPNs
2 CMAs
1 CNP
7 DO/MDs
5 front desk
3 billing (& other including surgery and pre-cert nurse)
2 ultrasound techs
TRAINING AT OHIO HEALTH ON VICARIOUS TRAUMA

How does VT express itself for you?
How does VT impact your personal life?
How does VT impact your professional life?
How does VT impact your organization?
How do you take care of yourself?
How do you take care of one another?
How WILL you take care of one another in the future?
• Love hearing good and bad stories from the staff
• Learning what to do to get rid of stress
• How to keep calm and de-stress quickly in situations with coworker or patient when you can’t walk away
• Really enjoyed group conversation and laughter
• We enjoyed the list of de-stressors
• You all are awesome
• Great material
• Love your humor
• Understanding that everyone is going through the same things that you are
• Today’s meeting, as well meetings with you all was great, informative and helpful in our work life as well as our everyday lives with our families. It’s always a pleasure meeting with all of you
• Look forward to this every time. How I decrease stress is helping others. Thank you for the help
• It makes me realize some of the feelings in my head to feel is okay to de-stress
• I think asking the staff what their stressors are was very helpful
• Taking the time to spend with co-workers really helps. You guys always have useful information
<table>
<thead>
<tr>
<th>What I LEARNED:</th>
<th>What I’LL APPLY:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Everyone has trauma</td>
<td>Make time for myself</td>
</tr>
<tr>
<td>Learning how to leave stuff at work and not take it home!</td>
<td>Keeping a positive attitude in my working environment</td>
</tr>
<tr>
<td></td>
<td>Knowing how to react to people in situations</td>
</tr>
<tr>
<td>How to maintain stress level</td>
<td>Take time for myself</td>
</tr>
<tr>
<td>Everyone has stressors</td>
<td></td>
</tr>
<tr>
<td>Everyone deals with them differently</td>
<td></td>
</tr>
<tr>
<td>Everyone needs stress release time</td>
<td></td>
</tr>
<tr>
<td>Everybody has different challenges and difficulties</td>
<td>Laugh! Smile!</td>
</tr>
<tr>
<td>Vicarious trauma is often unnoticed</td>
<td>Take time to laugh</td>
</tr>
<tr>
<td>Rob’s childhood trauma has long-term effects</td>
<td>Share feelings of stress with others</td>
</tr>
<tr>
<td>Learned how to accept other people’s trauma and what I could do to help them</td>
<td>help them relax</td>
</tr>
<tr>
<td>It’s important to take time for yourself, debrief, distress, so it doesn’t affect home life or anyone else negatively</td>
<td>Do something for myself everyday</td>
</tr>
<tr>
<td>We experience stress that builds up everyday</td>
<td>Laughter helps a lot</td>
</tr>
<tr>
<td>Self-care in the moment</td>
<td>Breaks help to relieve stress</td>
</tr>
<tr>
<td>I’m not the only one impacted by work stress</td>
<td>I will work to support/be supportive for my work family</td>
</tr>
<tr>
<td>1 or 2 things learned in the brain</td>
<td>Making time for myself</td>
</tr>
<tr>
<td>The importance of de-stressing</td>
<td>Driving the long way home giving myself time to settle down</td>
</tr>
<tr>
<td>Sharing thoughts and feelings with coworkers is helpful</td>
<td>Talk more with co-workers about stressful situations</td>
</tr>
<tr>
<td>We don’t always know what people (patients) are dealing with—don’t be judgmental</td>
<td>Smile more, remember to laugh; adjust to change; chocolate is the code word</td>
</tr>
<tr>
<td>Stress is contagious</td>
<td>Take a walk when the stress takes over; laughter makes you feel better</td>
</tr>
<tr>
<td>Being aware of yourself and others is important</td>
<td>Take breaks throughout the day</td>
</tr>
<tr>
<td>Take time to unwind</td>
<td>Decompress in the morning and after work</td>
</tr>
<tr>
<td>Take time to relax at work; take walks, ask for a joke</td>
<td>Find rituals to help with stress</td>
</tr>
<tr>
<td>Share/help coworkers with work stress/difficult patients</td>
<td>Phone a friend</td>
</tr>
<tr>
<td>Need a de-stressor</td>
<td>De stress with my co-workers</td>
</tr>
</tbody>
</table>
How does patient trauma and stress affect your clinic?
The Top Symptoms of Vicarious Traumatization in Providers and Staff

**OUTCOMES**

- **Everyone (Staff + Providers)**
  - #1 (91%) Strong emotional reactions and feelings—grief, anger, shock, sadness
  - #2 (65%) Thinking/Talking about work too much
  - #3 (61%) Feeling Like You Have No Time or Energy for Yourself
  - #4 (57%) Numbing and Feeling Shut Down

- **Providers**
  - #1 (69%) Strong Emotional Reactions
  - #2 (67%) Intrusive Experiences about Patients’ Traumas
  - #3 (58%) Overwhelmed by Feelings, No Time or Energy
  - #3 (56%) Avoidance of Violence, Trauma, or Stressful Events in News, Movies,

- **Staff**
  - #1 (83%) Strong Emotional Reactions
  - #2 (78%) Talking & Thinking about Work Too Much
  - #3 (64%) Difficulty Trusting Others
  - #3 (64%) Increased Illness, Fatigue, Aches, Pains
  - #4 (57%) Easily Frustrated with Coworkers
  - #4 (57%) Less Motivation and Energy
  - #4 (57%) Intrusive Experiences about Patients’ Traumas
  - #5 (62%) Lowered Self-Esteem, Lowered Sense of Competence in One’s Work
  - #3 (56%) Cynicism or Pessimism

- **Symptoms**
  - #3 (64%) No Time, Energy, Shut Down
  - #3 (64%) Intrusive Experiences about Patients’ Traumas
  - #3 (64%) Overwhelmed by Feelings, No Time or Energy
  - #3 (58%) Avoidance of Violence, Trauma, or Stressful Events in News, Movies,
<table>
<thead>
<tr>
<th>#</th>
<th>Vicarious Trauma Indicator</th>
<th>Total (n=23)</th>
<th>Staff/Other (n = 14)</th>
<th>Providers (n = 9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Strong reactions and feelings, such as grief, anger, shock or sadness</td>
<td>21 (91.3%)</td>
<td>13 (92.8%)</td>
<td>08 (88.9%)</td>
</tr>
<tr>
<td>2</td>
<td>Intrusive experiences—dreams, nightmares, recounting pts’ traumas</td>
<td>12 (52.2%)</td>
<td>06 (42.8%)</td>
<td>06 (66.7%)</td>
</tr>
<tr>
<td>3</td>
<td>Feeling easily overwhelmed by feelings</td>
<td>14 (60.9%)</td>
<td>09 (64.3%)</td>
<td>05 (55.5%)</td>
</tr>
<tr>
<td>4</td>
<td>Feeling as though they have no time or energy for themselves</td>
<td>14 (60.9%)</td>
<td>09 (64.3%)</td>
<td>05 (55.5%)</td>
</tr>
<tr>
<td>5</td>
<td>Cynicism or pessimism</td>
<td>11 (47.8%)</td>
<td>06 (42.8%)</td>
<td>05 (55.5%)</td>
</tr>
<tr>
<td>6</td>
<td>Sensitivity to and avoidance of violence (news, movies, stories)</td>
<td>08 (34.8%)</td>
<td>03 (21.4%)</td>
<td>05 (55.5%)</td>
</tr>
<tr>
<td>7</td>
<td>Lowered self-esteem, lowered sense of competence in one’s work</td>
<td>08 (34.8%)</td>
<td>03 (21.4%)</td>
<td>05 (55.5%)</td>
</tr>
<tr>
<td>8</td>
<td>Finding they talk about work too much</td>
<td>15 (65.2%)</td>
<td>10 (71.4%)</td>
<td>04 (44.4%)</td>
</tr>
<tr>
<td>9</td>
<td>Emotional numbing, feeling ‘shut down’</td>
<td>13 (56.6%)</td>
<td>07 (50.0%)</td>
<td>04 (44.4%)</td>
</tr>
<tr>
<td>10</td>
<td>Increased illnes or fatigue, ashes, and pains</td>
<td>09 (39.1%)</td>
<td>05 (35.7%)</td>
<td>03 (33.3%)</td>
</tr>
<tr>
<td>11</td>
<td>Loss of hope</td>
<td>07 (30.4%)</td>
<td>04 (28.6%)</td>
<td>03 (33.3%)</td>
</tr>
<tr>
<td>12</td>
<td>Feeling guilty for the privileges you have [safe home, support]</td>
<td>07 (30.4%)</td>
<td>04 (28.6%)</td>
<td>03 (33.3%)</td>
</tr>
<tr>
<td>13</td>
<td>Change in your beliefs about safety, trust, esteem, intimacy, control</td>
<td>07 (30.4%)</td>
<td>04 (28.6%)</td>
<td>03 (33.3%)</td>
</tr>
<tr>
<td>14</td>
<td>Withdrawn from others</td>
<td>07 (30.4%)</td>
<td>04 (28.6%)</td>
<td>03 (33.3%)</td>
</tr>
<tr>
<td>15</td>
<td>Increased fear for safety of children or loved ones</td>
<td>06 (26.1%)</td>
<td>03 (21.4%)</td>
<td>03 (33.3%)</td>
</tr>
<tr>
<td>16</td>
<td>Feelings of despair and hopelessness</td>
<td>05 (21.7%)</td>
<td>02 (14.3%)</td>
<td>03 (33.3%)</td>
</tr>
<tr>
<td>17</td>
<td>Difficulty making decisions, or making poor decisions</td>
<td>05 (21.7%)</td>
<td>02 (14.3%)</td>
<td>03 (33.3%)</td>
</tr>
<tr>
<td>18</td>
<td>Difficulty trusting others</td>
<td>11 (47.8%)</td>
<td>07 (50.0%)</td>
<td>02 (22.2%)</td>
</tr>
<tr>
<td>19</td>
<td>Loss of control over work and life in general</td>
<td>09 (39.1%)</td>
<td>07 (50.0%)</td>
<td>02 (22.2%)</td>
</tr>
<tr>
<td>20</td>
<td>Loss of enjoyment of sexual activity</td>
<td>07 (30.4%)</td>
<td>05 (35.7%)</td>
<td>02 (22.2%)</td>
</tr>
<tr>
<td>21</td>
<td>Feeling they cannot discuss work with family or friends</td>
<td>06 (26.1%)</td>
<td>04 (28.6%)</td>
<td>02 (22.2%)</td>
</tr>
<tr>
<td>22</td>
<td>Greater problems with boundaries and limit-setting [work or home]</td>
<td>06 (26.1%)</td>
<td>04 (28.6%)</td>
<td>02 (22.2%)</td>
</tr>
<tr>
<td>23</td>
<td>Loss of meaning</td>
<td>04 (17.4%)</td>
<td>02 (14.3%)</td>
<td>02 (22.2%)</td>
</tr>
<tr>
<td>24</td>
<td>Reduced sense of respect for the people with whom they work</td>
<td>09 (39.1%)</td>
<td>08 (57.1%)</td>
<td>01 (11.1%)</td>
</tr>
<tr>
<td>25</td>
<td>Reduced motivation for work</td>
<td>09 (39.1%)</td>
<td>08 (57.1%)</td>
<td>01 (11.1%)</td>
</tr>
<tr>
<td>26</td>
<td>Avoidance of intimacy</td>
<td>03 (13.9%)</td>
<td>02 (14.3%)</td>
<td>01 (11.1%)</td>
</tr>
<tr>
<td>27</td>
<td>Reduced productivity</td>
<td>03 (13.9%)</td>
<td>02 (14.3%)</td>
<td>01 (11.1%)</td>
</tr>
<tr>
<td>28</td>
<td>Loss of a sense of spirituality</td>
<td>02 (08.7%)</td>
<td>01 (07.7%)</td>
<td>01 (11.1%)</td>
</tr>
<tr>
<td>29</td>
<td>Reduced interest in spending time alone</td>
<td>01 (04.3%)</td>
<td>01 (07.7%)</td>
<td>01 (11.1%)</td>
</tr>
<tr>
<td>30</td>
<td>Loss time spent thinking about your own experiences</td>
<td>05 (21.7%)</td>
<td>05 (35.7%)</td>
<td>--</td>
</tr>
<tr>
<td>31</td>
<td>Increased sense of danger [reduced sense of safety]</td>
<td>02 (08.7%)</td>
<td>02 (14.3%)</td>
<td>--</td>
</tr>
<tr>
<td>32</td>
<td>Increased absenteeism (sick days)</td>
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</tbody>
</table>
IN SUMMARY...WE HOPE YOU TAKE AWAY AN UNDERSTANDING OF...

The ACES Study
Impact on Provider Stress
Cyclical nature of vicarious trauma and Effects on Individuals
Mind Body Medicine
Vicarious Trauma Curriculum
Ways to Incorporate Interventions into Your Own Teaching/Learning
GO FORTH AND SERVE-
THANK YOU!