

For Information, Contact:
Gyl Switzer, Public Policy Director
512.454.3706 x203 or gyl@mhatexas.org

Our Position

Mental Health America of Texas supports the use of trauma-informed care in systems of treatment and service delivery. Trauma-informed care prioritizes empowerment, safety, and collaboration, and therefore we believe that all organizations and systems should adopt a trauma-informed approach to best support a recovery-based model of treatment and support.

Background: What is Trauma?

The American Psychological Association defines trauma as “an emotional response to a terrible event like an accident, rape or natural disaster.”¹ Other traumatic events can include domestic violence, abuse or neglect, combat and war, learning of the death of a loved one, or any life-threatening situations.² People commonly experience immediate shock or denial after experiencing a traumatic event. However, trauma can also manifest over time, through things like “unpredictable emotions, flashbacks, strained relationships and physical symptoms like headaches or nausea.”³ The difficulty someone experiences moving on with his or her life varies from person to person; some people can experience trauma without lasting effects, especially those with strong support networks and few prior experiences with trauma.⁴ For others, the effects of trauma may persist throughout one’s life or develop into Post-Traumatic Stress Disorder (a significant anxiety disorder that affects about 8 million adults in the United States).⁵

Even though people can have drastically different reactions after experiencing trauma, research shows that traumatic experiences are associated with chronic physical health conditions, substance use disorders, mental health problems, and other risky behaviors. All of these potential consequences of trauma can affect a person’s ability to navigate traditional service provision for mental health and/or substance use disorders.⁶

Trauma-Informed Care

Trauma-informed care is “an intervention and organizational approach that focuses on how trauma may affect an individual’s life and his or her response to behavioral health services from prevention through

¹ Trauma, AMERICAN PSYCHOLOGICAL ASSOCIATION, <http://www.apa.org/topics/trauma/index.aspx> (last visited Oct. 8, 2015).

² Post-Traumatic Stress Disorder, MENTAL HEALTH AMERICA, <http://www.mentalhealthamerica.net/conditions/post-traumatic-stress-disorder> (last visited Oct. 8, 2015).

³ AMERICAN PSYCHOLOGICAL ASSOCIATION, *supra* note 1.

⁴ Trauma and Violence, SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION, <http://www.samhsa.gov/trauma-violence> (last updated Sep. 15, 2015).

⁵ How Common is PTSD?, U.S. DEPARTMENT OF VETERANS AFFAIRS: NATIONAL CENTER FOR PTSD, <http://www.ptsd.va.gov/public/PTSD-overview/basics/how-common-is-ptsd.asp> (last updated Aug. 13, 2015).

⁶ SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION, *supra* note 4.

treatment.”⁷ Trauma-informed care in service delivery means that all aspects of the system are assessed and potentially modified to incorporate a basic understanding of the impact that trauma has on the life of the person seeking services. The National Center for Trauma-Informed Care outlines four main tactics for organizations to adopt for a trauma-informed care approach:

1. Realize the widespread impact of trauma and understand potential paths for recovery;
2. Recognize the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
3. Fully integrate knowledge about trauma into policies, procedures, and practices; and
4. Seek to actively resist re-traumatization.⁸

Additionally, the National Center for Trauma-Informed Care also outlines the six key principles that inform the approach to trauma-informed care:

1. Safety;
2. Trustworthiness and Transparency;
3. Peer Support;
4. Collaboration and Mutuality;
5. Empowerment, Voice and Choice; and
6. Cultural, Historical, and Gender Issues.⁹

Trauma-informed care is an important approach to adopt for any person, organization, or system that interacts with people who may have experience with trauma. For example, in 2013 the Substance Abuse and Mental Health Services Administration drafted an issue brief regarding strategies and resources to assist judges in incorporating trauma-informed care into their courtrooms and judicial programs.¹⁰

For more information about trauma-informed care and interventions, visit the website for the National Center for Trauma-Informed Care¹¹ or read their brief on trauma-informed care, Changing Communities, Changing Lives.¹²

Recommendations

Mental Health America of Texas believes that trauma-informed care should be incorporated into systems of treatment and service delivery to the greatest extent possible, focusing on engagement, empowerment, and collaboration with people with mental health conditions or substance use disorders and their communities. Additionally, we support efforts to educate and inform health professionals and the public about the impact of trauma and the importance of trauma-informed care.

⁷ CENTER FOR SUBSTANCE ABUSE TREATMENT, TRAUMA-INFORMED CARE IN BEHAVIORAL HEALTH SERVICES (2014), <http://www.ncbi.nlm.nih.gov/books/NBK207195/>.

⁸ Trauma-Informed Care and Trauma Services, SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION, <http://www.samhsa.gov/nctic/trauma-interventions> (last updated Aug. 14, 2015).

⁹ Id.

¹⁰ Susan Wells & Jenifer Urff, Essential Components of Trauma-Informed Judicial Practice, SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (2013), http://www.nasmhpd.org/sites/default/files/JudgesEssential_5%201%202013finaldraft.pdf.

¹¹ SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION, *supra* note 8.

¹² NATIONAL CENTER FOR TRAUMA INFORMED CARE, Changing Communities, Changing Lives, SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (Sep. 2012), [http://www.nasmhpd.org/sites/default/files/NCTIC_Marketing_Brochure_FINAL\(2\).pdf](http://www.nasmhpd.org/sites/default/files/NCTIC_Marketing_Brochure_FINAL(2).pdf).