Trauma-Informed Cognitive Behavioral Therapy

Presented by Traci W. Pirri, MSW, LCSW

Housekeeping

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Comfort Room

O To promote wellness and self-care, a Comfort Room is available in Atrium Room 8 for your use.

O If you need further assistance, please visit the Indian Health Service Division of Behavioral Health booth.

Trauma

• A frightening or overwhelming experience that significantly alters a person's life view or sense of self, as well as altering their daily routine.

Statistics

- O 50 70% of US adults experience a trauma
- O About 30% of those who experience a trauma will suffer from PTSD
 - ~20% women; 8% men
 - ~Women are twice as likely to experience PTSD
- O Those with PTSD are 8 times more likely to attempt suicide than those without
- O This figure doubles if person suffers from PTSD and depression
- O American Indian/Native Alaska children are at 2.5 times greater risk of experiencing a trauma

What is PTSD?

Emotional and Physiological reaction Everyday experiences => crisis situation

Need 3 things:

- 1. Traumatic event (threatens death, serious injury, or physical/emotional integrity of self)
- 2. Response involves intense fear, helplessness, horror, shame
- 3. Symptoms lasting more than 1 month

O Fight, Flight, or FreezeO Complex Trauma

So, how do we treat PTSD?

- O Recommendations of American Psychiatric Association:
 - OCognitive-Behavioral Therapy
 - **O**Exposure Therapy
 - OEMDR
 - O(Eye Movement Desensitization and Reprocessing)
 - OMedications
 - OFDA approved: SSRI's (ie. Zoloft, Paxil)

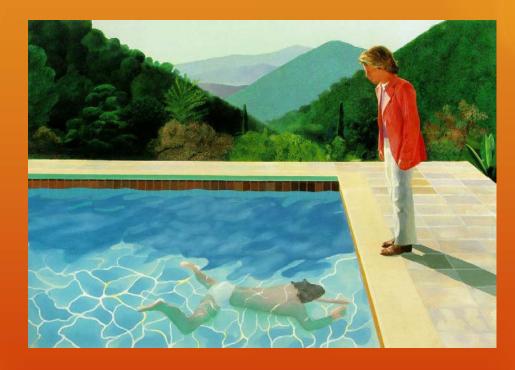
Why Trauma-Informed Cognitive Behavioral Therapy?

- O Combines CBT and Gradual Exposure
- O Emotion regulation
- O Caregivers/natural supports
- O Minimizes therapist avoidance
- O Lends order to a disorder that feels disordered, unpredictable, overwhelming
- O Short term!
- O Effective

Emotional Regulation

- C Learning how and when to intervene with coping skills to moderate emotions
- O Use rating scales
- O Can include:
 - O Dialectical Behavior Therapy (DBT), Mindfulness
 - O Acupuncture, Yoga, Meditation, Exercise, Omega 3
 - O Sleep Hygiene coaching, Gratitude Journaling, Visualization Exercises
 - O Humor, Hobbies, Volunteerism, Spirituality, Journaling***, Art/Dance

Progressive Exposure



Cognitive Restructuring

O Detective Hunt for Untruths
O Example: "It's my fault because I didn't tell anybody"
O Reflect back on psycho-education
O Look for both stated and unstated cognitive distortions

O Maybe a thought is true but unhelpful
O Example: "If I hadn't gone to see Jimmy, this would never have happened."
O Reframe to something more helpful
O Regret versus Responsibility

O Encourage strong, direct language

How to Find TI-CBT?

• www.nctsnet.org
• Ask questions:
• Specified trainings in trauma?
• Experience with progressive exposure?
• Ongoing supervision?

Coordination w/ Community

Education
Avoid doing more harm
Know when to refer
Increased awareness for physicians, mental health professionals, schools, clergy, tribe leadership, social services, etc...
Building a referral network

Crisis Hotline Numbers
O Suicide Prevention Lifeline Number:
1-800-273-TALK (8255)

O National Domestic Violence Hotline:

• 1-800-799-SAFE (7233) or TTY 1-800-787-3224

O National Child Abuse Hotline:

• 1-800-4-A-CHILD

O Sexual Assault Hotline:

• 1-800-262-9800

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