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## After Abuse, Trauma Remains: Basic Trauma-Informed Care for Healthcare Professionals

Childhood trauma, which includes experiences such as abuse and neglect, is one of the most concerning health problems of our time. According to the Centers for Disease Control and Prevention, nearly one-third of all children worldwide are abused physically while approximately one-in-four girls and one-in-five boys are sexually abused at least once before their eighteenth birthdays. In the United States alone, over three million cases of suspected child abuse are reported every year; of those, over one million are later substantiated. Not only is childhood trauma extremely common, it can also have a profound negative impact on survivors' overall health and wellbeing.

Consequences stemming from childhood trauma are rarely confined to childhood, however. Devastating and long-lasting, the effects of these traumatic experiences remain even after the abuse has ended. In the largest study ever to examine the effects of childhood trauma, researchers discovered that children who reported having been abused were more likely to develop a number of serious health problems later in life. Living in constant fear, always ready to respond to danger, puts an enormous amount of stress on the body. Over time, this kind of stress takes a significant toll on survivors, affecting them biologically, psychologically, socially, and spiritually. (See Table)

Symptoms in Adults that may be Associated with Childhood Trauma*	
Biological	<ul style="list-style-type: none"><li>• Digestive problems</li><li>• Chronic pain</li><li>• Autoimmune diseases</li><li>• Cardiopulmonary symptoms</li><li>• Sexual problems</li><li>• Amnesia and/or transient dissociative episodes</li></ul>
Psychological	<ul style="list-style-type: none"><li>• Difficulty regulating emotions</li><li>• Intense anger</li><li>• Feelings of responsibility, guilt, and shame</li><li>• Lack of self-worth</li><li>• Self-destructive and/or risk-taking behaviors</li><li>• Deficits in cognition and attention</li></ul>
Social	<ul style="list-style-type: none"><li>• Inability to trust others</li><li>• Lack of intimacy in relationships</li><li>• Socially isolative</li></ul>
Spiritual	<ul style="list-style-type: none"><li>• Despair and/or hopelessness</li><li>• Loss of previously sustaining beliefs</li><li>• Feeling punished and/or abandoned by God</li></ul>
*Common sources of childhood trauma include: abandonment, betrayal, physical abuse, sexual abuse, threats to bodily integrity, coercive practices, emotional abuse, witnessing violence or death	

Because childhood trauma is so common, it is likely that healthcare professionals will encounter patients with such a history with some regularity. Therefore, in addition to gathering information related to developmental milestones and family medical history, healthcare professionals should carefully inquire about any traumatic experiences in their patients' backgrounds. Also, since the underlying cause of many medical problems may be related to traumatic experiences, healthcare professionals can play an important role in caring for adult survivors of childhood trauma. An easy way to implement trauma-informed care principles

*(Continued on opposite side)*

into healthcare is by using the D-E-F Protocol, a straightforward and reliable method for addressing any possible traumatic stress reactions in patients with a history of childhood trauma. (See Table below)

Collaborating with mental health professionals can help ensure that patients receive high quality, comprehensive health care. Know that the therapists at Tapestry Associates are always available for consultation or referral.

DEF Protocol	
D – Reduce Distress	<ul style="list-style-type: none"> <li>• Assess and manage pain</li> <li>• Ask about fears and worries</li> <li>• Consider grief and loss</li> </ul>
E – Promote Emotional Support	<ul style="list-style-type: none"> <li>• Ask: Who and what does the patient need right now?</li> <li>• Identify barriers to mobilizing and existing support</li> </ul>
F – Remember the Family	<ul style="list-style-type: none"> <li>• Assess family members’ distress</li> <li>• Gauge family stressors and resources</li> <li>• Address needs beyond the medical</li> </ul>



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