The Triad of Childhood Trauma, Mental Illness, and Substance Abuse: Applying Trauma-Informed Care

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Objectives
• Discuss the prevalence of adverse childhood experiences  
• Differentiate among complex, high-betrayal, and low-betrayal trauma  
• Describe the impact of childhood trauma on health  
• Discuss current literature on the relationship of early trauma to mental illness and substance use disorders

Prevalence of Trauma in the General Population—the ACE Study
• Kaiser-CDC study of 17,000 Kaiser patients found 2/3 of patients had experienced trauma in childhood  
• ACE scores: sum of 9 types of trauma  
• 16% have 3 or more

What is childhood trauma?
• Victimization including sexual/verbal/physical abuse, neglect, loss, domestic violence and/or the witnessing of violence, terrorism or disasters  
• May involve the intentional infliction of mental anguish or physical harm  
• High-betrayal vs. low-betrayal trauma  
• Complex trauma  
• Childhood vs. adult trauma

ACE Study: Prevalence of the 9 categories of trauma
• recurrent and severe physical abuse (11%)  
• recurrent and severe emotional abuse (11%)  
• contact sexual abuse  
  (men 16%, women 28%)  
• physical neglect (11%)  
• emotional neglect (15%)  
• household trauma

(Felitti & Anda, 2010)
ACE Study: Prevalence of the 9 categories of trauma

- household trauma: family member
  - alcoholic or drug-user (27%)
  - imprisoned (6%)
  - mentally ill, chronically depressed, or institutionalized (17%)
  - mother treated violently (13%)

(Felitti & Anda, 2010)

Research examples

- Persons with severe mental illness (851):
  - Average = 7 types of traumas
  - CSA (22%) was most common and most likely to lead to PTSD symptoms
  - PTSD symptoms after 20 years

(Lu et al. 2013)

- Women with schizophrenia/schizoaffective disorder and SUD (54):
  - 80% had both childhood and adult trauma
  - Average = 8
  - CSA significantly associated with PTSD and revictimization

(Gearon 2003)

Behavioral Risk Factor Survey

- 26,000 adults in 5 states
- 60% had 1 ACE
- 9% had 5 or more ACEs
- Common among all races/ethnicities

(MMWR Dec 17, 2010)

Childhood life events

- Divorce
- Loss of a parent
- Placement

Childhood trauma

- Abuse
- Neglect

*Predicted anxiety, depression, or both

(Hovens 2010)

Higher Prevalence of Trauma in Special Populations

- Patients in substance abuse treatment
- Patients with severe mental illness
- Incarcerated persons
- Homeless persons

What does childhood trauma do?

Trauma shapes a child's basic beliefs about identity, world view, spiritual sense

- Negative beliefs and views require adaptations
- Some symptoms and behaviors may be seen as adaptations

(Saakvitne, Gamble, Pearlman & Lev, 2000)
Health risk behaviors are sometimes used as coping mechanisms or “adaptations”

- eating disorders
- smoking
- substance abuse
- self harm, cutting
- sexual promiscuity

(Feiteli et al., 1998)

Trauma: Impact and Expression

- Psychological/emotional
- Cognitive
- Social/behavioral
- Psychiatric
- Biologic

Emotional consequences

- Feeling worthless
- Guilt and shame
- Anger
- Intrusive thoughts
- Anxiety
- Depression

Impulse control

- Substance abuse
- Self-harm
- Social/behavioral consequences
- Interrupted education
- Suicide and victimization

PTSD

- Personality disorders
- Psychiatric consequences
- Ancestry
- Somatic complaints
- Eating disorders and compulsions

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Recent research: 34,000 US adults
- Childhood trauma or PTSD predicted alcohol use disorder
- Those with childhood trauma without PTSD less likely to have alcohol use disorder

(Fetzner et al 2011)

Recent research: 7,279 adult Kaiser patients
- Alcohol problems associated with adverse childhood experiences were mediated by psychological distress

(Srine et al 2012)

Recent research: 7,076 in general population
- Anxiety disorders precede alcohol dependence
- Stronger associations in women with trauma history

(Marquenie et al, 2007)
Case example: Deanna

- Physically and emotionally abused by parents
- Sexually abused by uncle
- Only help from school nurse
- Her 1st drink: “It felt like the depression went away” (age 14)
- “I've spent most of my life feeling dirty”
- Bipolar, PTSD, GAD
- Addictions: cocaine, MJ, PCP, ETOH

Recent research:
216 youth in outpatient drug treatment

- Considered all types of childhood trauma
- Strongest association: emotional abuse
- No effect of concurrent trauma

(Rosenkranz 2012)

Recent research:
564 young adults in the community (Teicher 2009)

- 29 with childhood sexual abuse exclusively
- 62% of these developed MDD
- Time between abuse and onset of depression = 9.2 years
- onset of PTSD = 8 years
- Need to screen adolescents for depression and monitor abused children through puberty

Recent research: 1,634 drug users

- Severe sexual, physical, and emotional childhood abuse:
  - higher risk of repeated suicidal behavior in adulthood

(Marshall et al. 2013)

Recent research: 117 youth in child protection services

- Emotional abuse was significantly associated with reduced self-compassion
- Low self-compassion associated with psychological distress, problem alcohol use, and serious suicide attempt

(Tanaka 2011)

Polysubstance dependent

- Higher childhood trauma scores (emotional/physical neglect)
- More psychosis, aggression, impulsivity, suicide attempts

Monosubstance dependent

- More Axis I disorders
- Higher depression scores

Recent research: 752 substance dependent adults (Marinotti 2009)
Recent research: 459 drug and/or alcohol dependent adults

More dissociation:
- Drug addicts vs. ETOH abusers
- Emotional abuse
- Female gender, younger age

(Schafer et al. 2010)

Case example: Quanda

- Raised by grandmother
- Molested by uncle for some years
- Excellent student
- Reported molestation
- Case investigated
- Drinking at 13
- Early sex
- Pregnant at 14
- Anxiety, insomnia, depression
- Addiction

Recent research:

111 incarcerated women with CSA

- Trauma symptoms predicted severity of substance use consequences

(Asberg 2012)

Recent research: 77 women with PTSD and substance dependence

- More dissociation with
  - trauma-related symptoms
  - emotional abuse and physical neglect
- High-dissociation group expected that substances could manage their psychiatric symptoms

(Najavits & Walsh 2012)

Recent research: 103 persons in substance abuse treatment

- >75% had childhood trauma and >1/2 CSA
- Longer duration of PTSD
- More extensive lifetime trauma
- Earlier age of 1st intoxication

(Farrugia et al. 2011)

Recent research: 64 women with borderline personality disorder

- Trauma-dissociation and trauma-PTSD
  - before age 16
  - more than 1 year
  - more than 1 perpetrator

No association for substance abusers

(Van Den Bosch 2003)
What is Trauma-Informed Care?

- Nursing care that incorporates:
  - An awareness of the high prevalence of traumatic experiences in persons who receive health services in any setting
  - A thorough understanding of the profound neurological, biological, psychological and social effects of trauma and violence on the individual
  - A trauma framework: the effects of trauma can be addressed and a patient can heal from trauma, mental distress or illness, and substance abuse

“Someday, maybe, there will exist a well-informed, well considered and yet fervent public conviction that the most deadly of all possible sins is the mutilation of a child’s spirit; for such mutilation undercuts the life principle of trust…”

(Erik Erikson 1958)

The Triad

Individual and family toll; Marginalization
Losses to society; Recurrent trauma

Prevention Efforts

Goals
- reduce ACE rates
- improve functioning of persons with high ACE scores

Activities
- 18 states collecting data on ACEs

Interventions
- home visits to high-risk mothers by nurses
- parenting programs

Good news

Rates of childhood maltreatment are dropping (2003-2008)
Declines: physical, sexual assault, bullying, emotional abuse

National Organizations
- SAMHSA
- Stop It Now
- Prevent Child Abuse
- National Child Traumatic Stress Network
Questions?

Thank you!
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