Trauma

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The Ubiquity of Trauma

- **Adverse Childhood Experiences (ACES) study**
  - Surveyed 17,000 HMO members
  - 2/3 of population reported at least 1 ACE
    - Over 20% reported 3 +
  - Graded dose-response relationship to later-life health, well-being
    - Various negative social, health, economic outcomes
- **All forms of abuse/neglect/violence likely under-detected in primary care**
Trauma and PCBH

• **Prevention**
  - Enhanced behavioral screening during physicals
  - Delivery of anticipatory guidance
  - Creating trauma-informed clinic

• **Acute**
  - Normalize reaction
  - Mobilization of support
  - Education for healthy coping
Trauma and PCBH

• **Chronic**
  • The Myth of the Superficial BHC Intervention
    • Reality: Trauma must often be part of BHC visit
    • Is the trauma influencing the current health issue?
    • Is the trauma relevant to overall health?
    • Patient’s need to be heard
    • Relationship-building
    • Disclosure need not be time-consuming
  • Treat functional problems, not the trauma
Interventions for Trauma-Related Functional Problems

• **Sample interventions for functional problems**
  • Relaxation training
  • Mindfulness training
  • CBTI for impaired sleep
  • Exposure-based exercises
  • Self-help reading
  • Communication skills training
  • Anger management skills training

*Willingness to engage with trauma is a core BHC attribute*