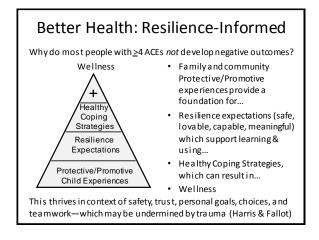
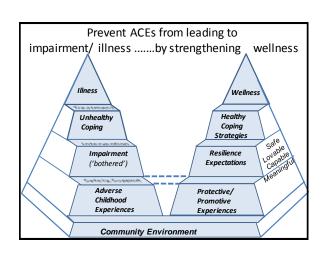
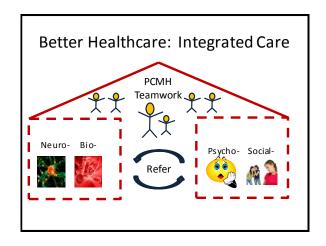
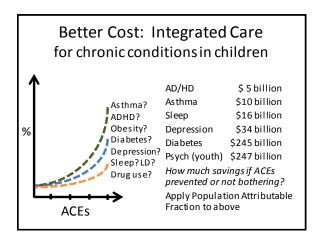
SAMHSA/NCTSN: Pediatric Integrated Care Collaborative

Better Health: Trauma-Informed How do adverse experiences lead to illness? Illness Trauma-Informed Advers e experiences can lead to neuro-bio-psycho-social Health impairment which may also Risk be managed with unhealthy Behaviors coping, leading to negative be havioral and health Impairment outcomes (illness). Neurobiopsychosocia When focusing on upper Adverse levels, considers creening the Childhood Experiences lower











SAMHSA/NCTSN: Pediatric Integrated Care Collaborative

How can child traumatic stress services be better health-informed?

- Chronic (unsoothed) stress responses can involve significant disturbance in neuroendocrine immune (NEI) systems.
- Subclinical mental health problems may still result in clinically significant physical problems, especially with cumulative exposure.
- Stress-reactivity may mediate response to trauma & intervention.
- Accordingly, integrated mental health and primary care screening could help inform or triage limited traumatic stress services
- Trauma screening is important for physical, as well as mental
 health
- Integrating mental health with physical health care is the model for future healthcare funding

How can medical services be better trauma-informed?

"Toxic stress shapes the development and calibration of the neuroendocrine-immune (NEI) network...not only immune competence, but also the building blocks of brain development, including neurogenesis and neural signaling," as well as "a multitude of health outcomes in adulthood ranging from cardiovascular and obstructive pulmonary disease to cancers, as thma, autoimmune disease, and depression." (Johnson, et al, 2013, p 320).

 Within practice guidelines for such conditions are there opportunities for traumatic stress screening and assessment to improve differential diagnosis and trauma-focused interventions to enhance outcomes?

How can both become better relationship-informed?

Parenting capacity and parent-child relationship play a significant role in "soothing" early childhood stress—bringing stress response back to baseline and preventing "toxic stress" effects.

- This is especially critical during development in early childhood.
- How to screen for relationship difficulties and intervention needs?
- How to evaluate impact of relationship-focused therapeutic interventions on child health and health care utilization?

Management of stress and chronic conditions (e.g. asthma) may be complicated by inadequate provider-parent-youth relationship factors.

- How to engage and develop teamwork with parents and youth?
- Consider "non-specific" screening for cumulative risk/resilience.

Cumulative Risk/Resilience Screening

Please mark one circle for each category of stressful events that you (your child) experienced, without identifying each specific event

000000000 __ Total # experienced

Please mark a circle for each of the stressful events that still bothers you (your child).

000000000 __ Total # still bother

How would children's health benefit from the above?

"...the roots of unhealthy lifestyles, maladaptive coping patterns, and fragmented social networks are often found in behavioral and physiologic responses to significant adversity that emerge in early childhood...the prevention of long-term, adverse consequences is best achieved by the buffering protection afforded by stable, responsive relationships that help children develop a sense of safety, thereby facilitating the restoration of their stress response systems to baseline." (Shonkoff, Garner, et al, 2011, e225)

- 1. Berwick, D. et al, (2008) The Triple Aim: Care, Health, And Cost. Health Affairs, 27, 759-769. http://content.healthaffairs.org/content/27/3/759.full.html
- Garner, AS, Shonkoff, JP. (2012). Early childhood adversity, toxic stress, and the role of the pediatrician: translating developmental science into lifelong health. *Pediatrics*. 129(1).

www.pediatrics.org/cgi/content/full/129/1/e224

- 3. Harris, M, Fallot, R. (2001). *Using Trauma Theory to Design Service Systems*. Jossey-Bass.
- 4. Johnson, SB, Riley, AW, Granger, DA, and Riis, J. (2013). The Science of Early Life Toxic Stress for Pediatric Practice and Advocacy. Pediatrics. http://pediatrics.aappublications.org/content/early/2013/01/15/peds _2012-0469
- Shonkoff, JP, Garner, AS. (2012). The lifelong effects of early childhood adversity and toxic stress. *Pediatrics*. 129(1).
- www.pediatrics.org/cgi/content/full/129/1/e232
- National Child Traumatic Stress Network: <u>www.NCTSN.org</u>