Behavioral Health Webinar Series for Primary Care

Wednesday, October 16, 2019
Noon to 1:00 p.m.

Responding to Early Childhood Trauma in the Primary Care Setting

Presented by: Kristopher West, PhD

Join by Phone: 1-415-655-0001  Conference ID: 640 842 508

This session is eligible for 1.0 Category 1 CME credit upon completion of the CME Evaluation Survey.

Speaker, Kristopher West, PhD, discloses he is a Stock Shareholder: Mersana Therapeutics. These conflicts of interest were resolved by the CME Office. No one else in a position to control content has any relationships with commercial interests.

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Reminders

- We have **muted** all participants.
- If you would like to unmute yourself for questions, please see below:

  - **Chat with us during the webinar.** To **type a question or comment** for the speaker or a facilitator, type directly into the WebEx chat box.

- This webinar is being recorded.
Responding to Early Childhood Trauma in Primary Care

Presented by Kristopher West, PhD
Nationwide Children’s Hospital Behavioral Health
Early Childhood Mental Health Program
Objectives

• Understanding trauma in early childhood and Adverse Childhood Experiences
• Understanding the intergenerational transmission of stress and trauma
• Learn about trauma-informed care for patients and families who may experience intergenerational trauma.
• Recognizing trauma-related symptoms in a pediatric visit.
• Learn about resources for evaluation and treatment in early childhood including how treatment works for families with young children
Early Childhood Mental Health

The social, emotional and behavioral well-being of children ages 0-5, including the capacity to:

• Experience, express and manage (regulate) emotion
• Form close, secure relationships (attachment)
• Learn and explore their environment

Early childhood mental health is influenced by:

• Physical health/genetics of the child
• Quality of the adult relationships in the child’s life
• Context of the child in the community (e.g. caregiving relationships, family, socioeconomic status, psychosocial stressors and culture)

Source: OhioMHAS Website; Zero to Three
ECMH is critical to a pediatric behavioral health system

1 in 7 children ages 0-5 develop behavioral health problems.
Yet, many are not identified.

Behavioral health problems in young children include:

- Anxiety and depression
- Stress and trauma due to adverse childhood experiences
- Delays in development and poor school readiness/performance
Very young children with behavioral health problems are a greater risk for other delays

Pre-school patients had strong co-morbid developmental delays

Without intervention…

25%
will require Special Education Programming

50%
will have significant Behavioral Impairments in School

Source: Cincinnati Children’s TIP Program Data
Trauma

- Frightening, dangerous or violent event
- Threatens life or safety of child or loved ones

Traumatic Stress

- Develop reactions that remain and impair functioning
Need in the Community

Population in Franklin and Contiguous

• 134,000 children under age 5
• Given the incidence of behavioral issues in early childhood, it is estimated that 19,000 children have a need for treatment and support

Maltreatment and Foster Care

• Younger children are maltreated at higher rates than older children
• Of children in foster care, over 40% are under age 6.

Source: PCSAO
Per 2016 ACS 0-5 is 88,712 in Franklin County
Economic Implications

• Treatment:
  – ECMH evidence based treatment models produce lifetime benefits to the child of $14-$16 per $1 spent, per participant*

• Prevention:
  – A CDC study on child maltreatment

<table>
<thead>
<tr>
<th>Economic Burden Of Child Maltreatment (Nonfatal) **</th>
</tr>
</thead>
<tbody>
<tr>
<td>Short-term health care costs**</td>
</tr>
<tr>
<td>Long-term health care costs</td>
</tr>
<tr>
<td>Child welfare costs</td>
</tr>
<tr>
<td>Criminal justice costs</td>
</tr>
<tr>
<td>Special education costs</td>
</tr>
<tr>
<td>Reduction in quality-adjusted life years</td>
</tr>
<tr>
<td>Total cost</td>
</tr>
</tbody>
</table>

**incremental health care costs attributable to child abuse from age 6 to age 17

**Source: The economic burden of child maltreatment in the United States, 2015, National Center for Injury Prevention and Control (CDC)
Early Childhood Trauma

Do babies remember?
Adverse Childhood Experiences

Abuse & Neglect:
1. Physical abuse
2. Sexual abuse
3. Emotional abuse
4. Physical neglect
5. Emotional neglect

Family Dysfunction:
6. Mother treated violently
7. Household substance abuse
8. Household mental illness
9. Family member in prison,
10. A parent who disappears through abandonment or divorce.
# Adverse Childhood Experiences

<table>
<thead>
<tr>
<th>Number of Adverse Childhood Experiences (ACE Score)</th>
<th>Women</th>
<th>Men</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>34.5</td>
<td>38.0</td>
<td>36.1</td>
</tr>
<tr>
<td>1</td>
<td>24.5</td>
<td>27.9</td>
<td>26.0</td>
</tr>
<tr>
<td>2</td>
<td>15.5</td>
<td>16.4</td>
<td>15.9</td>
</tr>
<tr>
<td>3</td>
<td>10.3</td>
<td>8.6</td>
<td>9.5</td>
</tr>
<tr>
<td>4 or more</td>
<td>15.2</td>
<td>9.2</td>
<td>12.5</td>
</tr>
</tbody>
</table>

Source: CDC
Lasting Impacts

Early Adversity has Lasting Impacts

Source: CDC
Mechanism by which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan
Understanding the intergenerational transmission of stress and trauma
“…for children, the single most important factor in promoting positive psychosocial, emotional, and behavioral well-being is having a strong, secure attachment to their primary caregivers—usually their mothers.”

Source: NASEM, 2019
Attachment
Intergenerational Transmission of Stress and Trauma

• Epigenetics
• Stress management, Mental Health
• Social learning, Attachment
Mechanism by which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan
Lick Your Rat

A pup that is raised by an anxious, low-nurturing mother becomes an anxious adult.

A pup that is raised by a relaxed, high-nurturing mother becomes a relaxed adult.

Genetic Science Learning Center,
University of Utah,
Co-Regulation


NATIONWIDE CHILDREN’S
When your child needs a hospital, everything matters.
Key Points

• Toxic Stress & Potentially traumatic events do happen in the first few years of life.
• Very young children are impacted; they just remember differently
• Significant problems can and do occur in young children
• It’s never too late, but earlier is better
• Caregiver-child relationships
Trauma-Informed Practice

Recognizing adversity and trauma in a pediatric visit
Early Childhood Trauma-Informed Practice

- Office Policies, Practices and Environment
- Routine Surveillance – Screening
- Parent Support and Education
- Referrals
- Community Engagement/Partnerships
- Advocacy
Office Environment

- Safe, supportive, reliable
- Stigma reducing
- Resources to build competency and reduce stress
Screening for Development

Regular developmental and social/emotional screening

- ASQ-3 and ASQ: SE
- Pediatric Symptom Checklist or Strengths and Difficulties Questionnaire
- [https://toolkits.solutions.aap.org/ss/screening_tools.aspx](https://toolkits.solutions.aap.org/ss/screening_tools.aspx)
Screening for Adverse Experiences/ Trauma

Questions about parenting/relationships/stressors

- *How do you feel about parenting?*
- *Has anything scary or upsetting happened since I last saw you?*

ACE screen

- Childhood Trust Events Survey –Caregiver Version
- Adult ACE questionnaire
Asking makes a difference
Screening for Caregiver Mental Health

- **Depression (Edinburgh Postpartum & PHQ-9)**
  - [https://www.knowppd.com/screening/how-to-screen/?utm_source=bing&utm_medium=cpc&utm_campaign=B_HCP UB_Screening%3BS%3BPH%3BU%3BWPH%3BHCP%3BCON&utm_content=EPDS_Postnatal_E&utm_term=edinburgh+depression+scale+postnatal&gclid=CMjnwfXum-UCFQodQodoP4MvA&gclsrc=ds](https://www.knowppd.com/screening/how-to-screen/?utm_source=bing&utm_medium=cpc&utm_campaign=B_HCP UB_Screening%3BS%3BPH%3BU%3BWPH%3BHCP%3BCON&utm_content=EPDS_Postnatal_E&utm_term=edinburgh+depression+scale+postnatal&gclid=CMjnwfXum-UCFQodQodoP4MvA&gclsrc=ds)

- **Anxiety (GAD-7)**

- **Both (Patient Stress Questionnaire)**
  - [https://www.integration.samhsa.gov/Patient_Stress_Questionnaire.pdf](https://www.integration.samhsa.gov/Patient_Stress_Questionnaire.pdf)
Screening for Caregiver Mental Health

• Substance abuse:
  – SBIRT
    • https://www.integration.samhsa.gov/clinical-practice/sbirt
    • https://mha.ohio.gov/Health-Professionals/Training-and-Workforce-Development/SBIRT
Parent Support/Education

• Role of toxic stress/trauma in presentation

• Parent Support
  – Safe, nurturing & consistent relationships
  – Build core life skills
  – Reducing sources of stress

• Observe, teach positive parenting moments and common parenting struggles

• Encourage play
Evaluating Attachment Behavior

Primary Care Giver:

- Post Partum Depression (affect, energy level, hygiene, level of interaction)
- Maternal Behavior
  - Attentive and asking questions Answers relevant questions (feeding times, sleep schedule, preferences)
- Interaction During Visit
  - Attuning to cues

Infant:
An attached child seeks proximity to the caregiver if the caregiver provides safety and protection

- Seeks out the caregiver
- Soothes easily with voice and touch
- Reciprocal Interaction
Play

• Remind/Teach Parents:
  – Child directed and use of toys, not screens
  – Unscheduled and spontaneous
  – Positive Discipline

• Serve & Return
Referrals

• Parenting is Hard
• Parenting skills and confidence:
• Child behavior or delays
• Parent stress/struggles
# Symptoms that Overlap with Child Trauma and Mental Illness

<table>
<thead>
<tr>
<th>Mental Illness</th>
<th>Overlapping Symptoms</th>
<th>Trauma</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attention Deficit/ Hyperactivity Disorder</td>
<td>Restless, hyperactive, disorganized, and/or agitated activity; difficulty sleeping, poor concentration, and hypervigilant motor activity</td>
<td>Child Trauma</td>
</tr>
<tr>
<td>Oppositional Defiant Disorder</td>
<td>A predominance of angry outbursts and irritability</td>
<td>Child Trauma</td>
</tr>
<tr>
<td>Anxiety Disorder (incl. Social Anxiety, Obsessive-Compulsive Disorder, Generalized Anxiety Disorder, or phobia)</td>
<td>Avoidance of feared stimuli, physiologic and psychological hyperarousal upon exposure to feared stimuli, sleep problems, hypervigilance, and increased startle reaction</td>
<td>Child Trauma</td>
</tr>
<tr>
<td>Major Depressive Disorder</td>
<td>Self-injurious behaviors as avoidant coping with trauma reminders, social withdrawal, affective numbing, and/or sleeping difficulties</td>
<td>Child Trauma</td>
</tr>
</tbody>
</table>

(Griffin, McClelland, Holzberg, Stolbach, Maj, & Kisiel, 2012)
Early Childhood Mental Health Treatment

How ECMH treatment works
Child-Parent Psychotherapy

- Child-Parent Psychotherapy focuses on the development of secure parent-child attachment and the *reduction of the intergenerational transmission of trauma*.

- Evidence-based, attachment-focused therapy help caregivers understand how a secure attachment with their children should look and how their own histories of being parented impact their *current parenting behaviors*. 
Child-Parent Psychotherapy

• Safety of the caregiving relationship is the secure base/foundation that enables social, emotional and cognitive development

• Secure attachment can buffer the impact of trauma but trauma can disrupt attachment
Child Parent Psychotherapy

• Within the caregiving relationship, the child develops internal working models that serve as templates for understanding and forming expectations about the world, the self and others.
Early childhood is a key window for intervention and prevention

Risk for:
- Behavioral health disorders
- Poor academic performance
- School expulsion
- Juvenile justice
- Out of home placements

Can we chart a new course with early intervention?
Building Resiliency

- **Strengthen economic supports to families**
  - Strengthening household financial security
  - Family-friendly work policies

- **Change social norms to support parents and positive parenting**
  - Public engagement and enhancement campaigns
  - Legislative approaches to reduce corporal punishment

- **Provide quality care and education early in life**
  - Preschool enrichment with family engagement
  - Improved quality of child care through licensing and accreditation

- **Enhance parenting skills to promote healthy child development**
  - Early childhood home visitation
  - Parenting skill and family relationship approaches

- **Intervene to lessen harms and prevent future risk**
  - Enhanced primary care
  - Behavioral parent training programs
  - Treatment to lessen harms of abuse and neglect exposure
  - Treatment to prevent problem behavior and later involvement in violence


Nationwide Children's
When your child needs a hospital, everything matters.
Leadership and Advocacy

• Zero to Three
  – https://www.zerotothree.org/

• Ohio Infant Mental Health Association
  – http://www.oaimh.org/
  – https://www.facebook.com/OAIMH/
Babies Need...

- strong parents
- economically stable families
- healthy bodies, healthy minds, and healthy parents
- high-quality child care and early education opportunities

Source: ZERO TO THREE and the Center for Law and Social Policy’s (CLASP)
Thank you for participating!

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https://www.surveymonkey.com/r/27MTD7M

Please note:
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Live streaming to additional locations

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Series Name: Behavioral Health Webinar Series for Primary Care

Date: October 16, 2019 / Noon-1PM

Presentation Title: Responding to Early Childhood Trauma in the Primary Care Setting

Speakers Name(s): Krystopher West, PhD

Planning Committee: Jennifer White, MD; William Long, MD; Nancy Cunningham, PsyD; Alex Bishara; Sherry Fletcher; Jessica Dudley

Speaker, Krystopher West, PhD, discloses he is a Stock Shareholder Hernana Therapeutics. These conflicts of interest were resolved by the CME office. No one else in a position to control content has any relationships with commercial interests.

Session Objectives:
At the conclusion of this activity, participants will:
1. Gain an understanding of trauma in early childhood including adverse childhood experiences.
2. Gain an understanding of the intergenerational transmission of stress and trauma and its impact on development.
3. Understand how to provide trauma informed care for patients and families who may experience intergenerational trauma.
4. Learn about recognizing trauma-related symptoms and resources for evaluation and treatment considerations in early childhood, including how treatment works for families with young children.

Commercial Support: N/A

Join by Phone: 1-415-655-0001
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Thursday, November 21, 2019

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