Saint Louis Mental Health and Housing Transformation Grant
Preliminary Evaluation Data

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Agenda

- Transformation project history

- Trauma vs. Trauma Informed Systems of Care

- Persons served

- Screening tools

- What happens if someone is triggered?

- Trauma Recovery and Empowerment Model (TREM)

- Getting started

- Panel Q and A

The Transformation Project

- 2010 SAMHSA awarded 20 grants, second round
- Collaboration between the STL Mental Health Board, Places for People, Saint Patrick Center, Queen of Peace Center, NAMI STL and MIMH
- Partners Saint Louis City Housing, DMH and Consumers
- Focus on homeless and those at risk of becoming homelessness
- Provided for expansion of existing services-Outreach and Assertive Community Treatment

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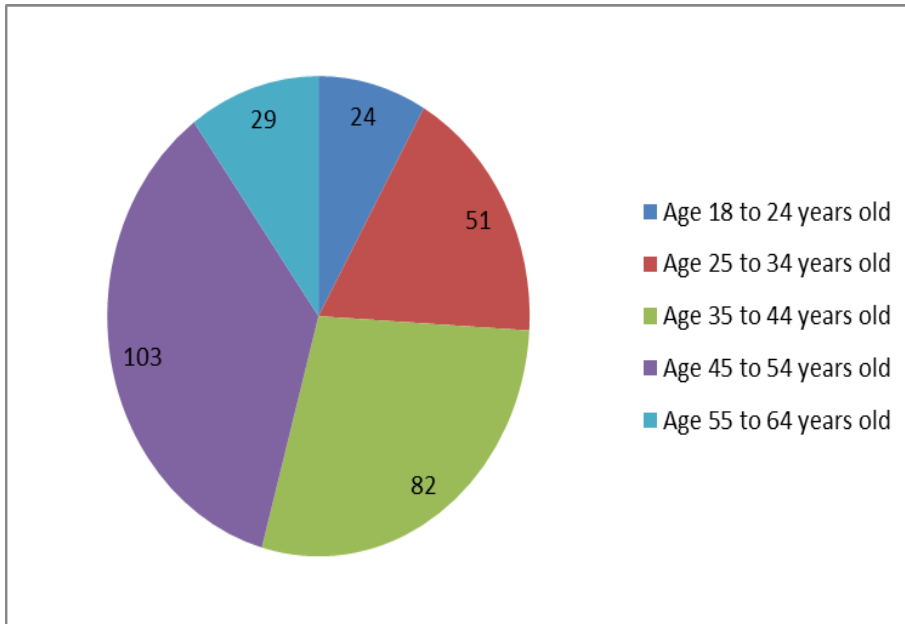*University of Missouri–St. Louis*

Transformation Project

- Provided for implementation of new evidenced based practices
  - Illness Management and Recovery (IMR)
  - Trauma Recovery and Empowerment Model (TREM)
  - Critical Time Intervention (CTI)
- System change
  - Housing funders group
  - Advocacy at the state level
  - Trauma Informed Systems of Care(TISC)

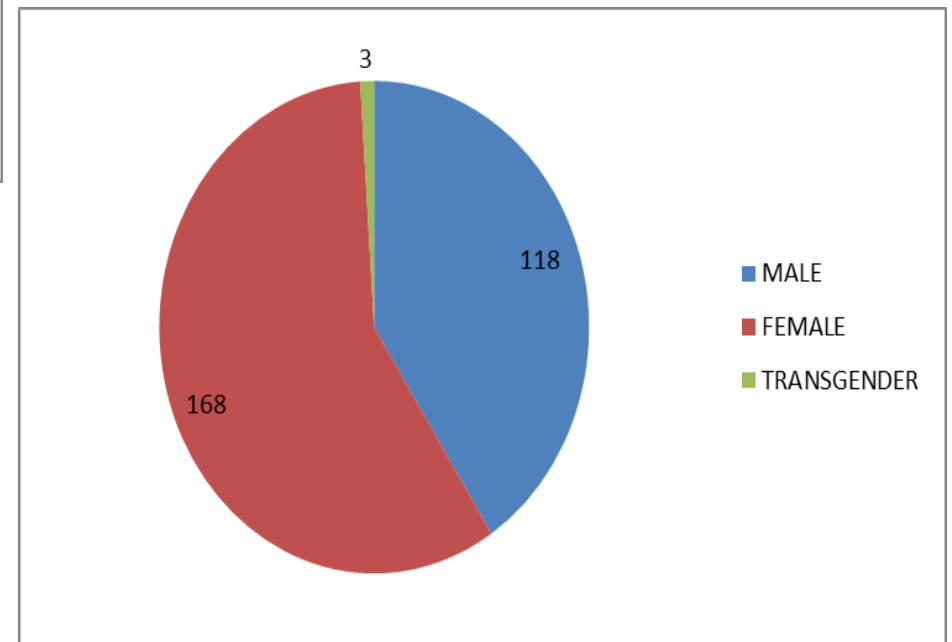# Trauma Interventions vs. Trauma Information Systems of Care

- Trauma Informed Systems of Care addresses how we welcome, treat, interact and care for individuals seeking services that have experienced trauma.

- Trauma interventions are targeted services to reduce trauma related symptoms and promote empowerment and recovery

Persons Served

Age 18 to 24 years old — 24
Age 25 to 34 years old — 51
Age 35 to 44 years old — 82
Age 45 to 54 years old — 103
Age 55 to 64 years old — 29

Over half between 35-54

58% were female

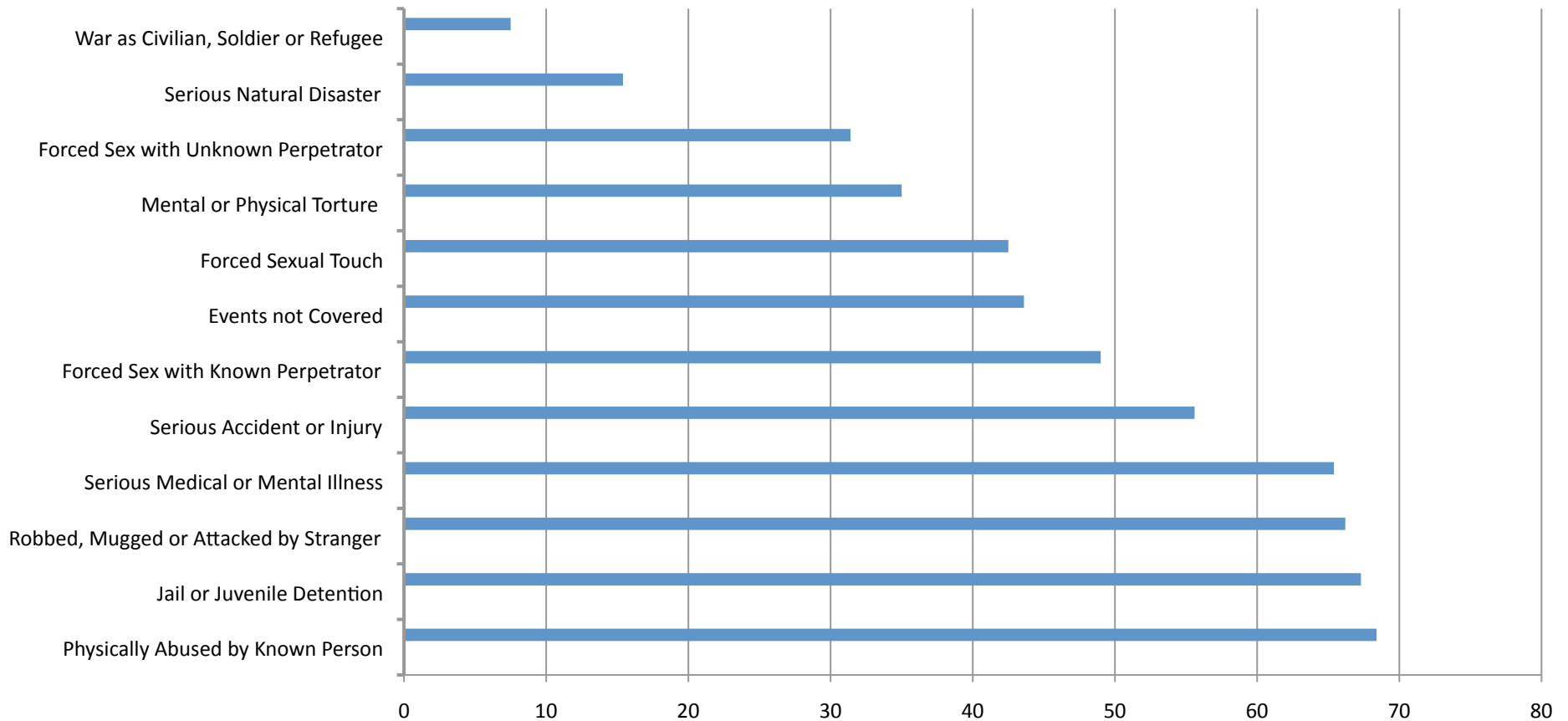MALE — 118
FEMALE — 168
TRANSGENDER — 3

Consumer Report of Any Type of Trauma Experienced in their Lifetime at Initial Interview

- Trauma includes:
  - Physical Abuse
  - Sexual Abuse
  - Emotional/ Psychological Abuse
  - War/ Terrorism
  - Natural Disasters
  - Community School Violence
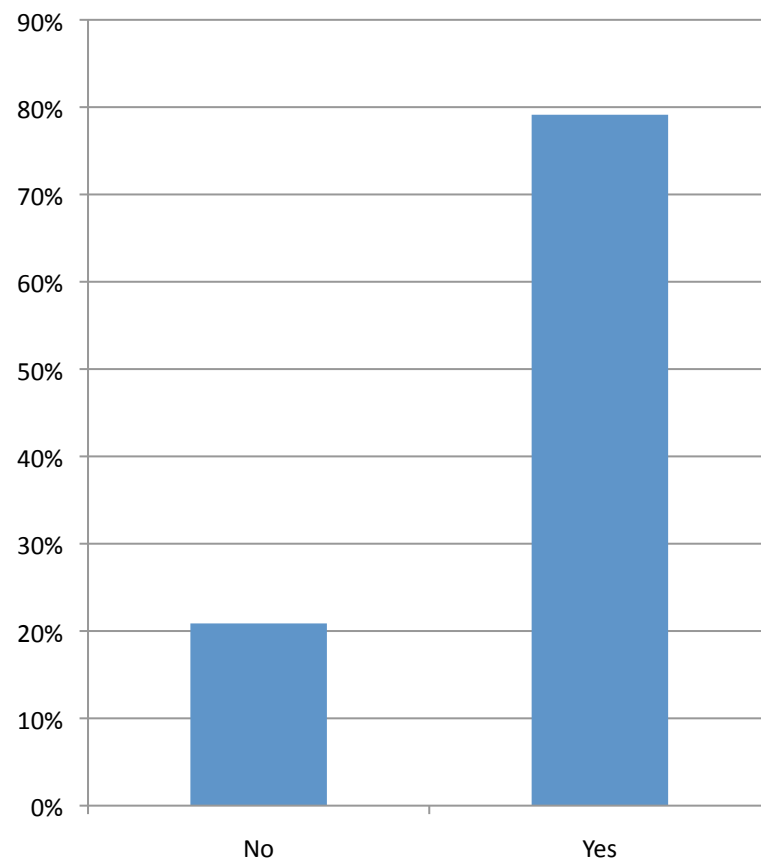
Consumer Report of Any Type of Trauma Experienced in their Lifetime at Initial Interview

Consumer Summary

- 100% Were diagnosed with a mental illness such as depression, anxiety, bipolar disorder or schizophrenia
- 79% Reported a history of trauma
- 86% Had some level of substance use
- 79% Unstable Housing
- 49% Reported Fair or Poor Health
- 92% Reported being disabled or unemployed

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Screening Tools

- Posttraumatic Diagnostic Scale (PDS)
  - Clinician administered 30 items, experiences and symptoms
- Life Event Checklist
  - 17 items self administered, experiences only
- PCL-C (PTSD Checklist-Civilian Version)
  - Self administered, 17 items, symptoms only

PDS Questions

- Serious Accident
- Natural Disasters
- Physical abuse by a known or unknown person
- Forced sex with a known or unknown person

- War, Civilian Soldier or Refugee
- Sexual touching
- Jail/ Juvenile Detention
- Torture
- Serious Illness
- Open ended

PDS Symptom Questions

- Upsetting thoughts or images
- Bad dreams or nightmares
- Reliving the event
- Upset/ Physical reactions when reminded
- Tried not to think about it
- Avoidance of reminders
- Not been able to remember

- Less interest in activities
- Felt distant from others
- Felt emotionally numb
- Future plans won't come true
- Sleep disturbance
- Irritable, angry
- Overly alert
- Easily startled

Life Event Checklist

- Natural Disaster
- Fire or explosion
- Transportation accident
- Serious work, home, recreational accident
- Exposure to toxic substance
- Physical assault
- Assault with a weapon
- Sexual assault
- Uncomfortable sexual experience

- Combat or war exposure
- Captivity
- Life threatening illness or injury
- Severe human suffering
- Sudden violent death
- Sudden death of someone close to you
- Serious injury, harm or death you caused
- Any other very stressful event

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PCL-C

- Disturbing memories
- Disturbing dreams
- Reliving the event
- Feeling upset when reminded
- Physical reactions
- Avoiding thinking about
- Avoiding activities
- Trouble remembering

- Loss of interest
- Feeling distant
- Feeling emotionally numb
- Feeling future cut short
- Sleep disturbance
- Irritable, angry
- Difficulty concentrating
- Being super alert
- Feeling Jumpy

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What happens when someone is triggered?

- Grounding is a particular type of coping strategy that is designed to immediately connect an individual with the present moment and is used as a way of coping with flashbacks or dissociation.

- Grounding techniques often use the five senses (sound, touch, smell, taste, and sight) to immediately connect people with the here and now.

The TREM Model History

- Community Connections, Washington DC. (1984)

  - No effectiveness without addressing history of trauma.

- 5 years, 27 Clinicians, 500 Participants through consensus

- 30 States, 1500 Facilitators

- Evidenced Based Practice (nrepp.samhsa.gov)

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TREM Model at a Glance

- Group Educational Intervention
- Co-facilitated with gender requirement
- Group size varies 8-10 (varies based on symptoms and communication)
- Goal is not to reprocess traumatic experiences
- Empower, educate, develop skills and reduce symptoms
- 30 or 26 Sessions
- 75 minutes each
- Consecutive weeks

TREM Modules Basics

- Each session lists a session rationale
- Each session has stated goals
- Each session has a list of questions
- Each session has an experiential exercise
- Each session lists typical consumer responses
- Many sessions have personal stories
- Leader's notes

TREM Modules-Empowerment

- Introductory session

- What it means to be a woman

- What do you know and how do you feel about your body

- Physical boundaries

- Emotional boundaries: Setting limits and asking for what you want

TREM Modules-Empowerment

- Self Esteem

- Developing ways to feel better: Self soothing

- Intimacy and trust

- Female sexuality

- Sex with a partner

- Transition sessions from empowerment to trauma recovery

TREM Modules-Trauma Recovery

- Gaining an understanding of trauma
- The body remembers what the mind forgets
- What is physical abuse
- What is sexual abuse
- Physical safety
- What is emotional abuse
- Institutional abuse

TREM Modules-Trauma Recovery

- Abuse and psychological or emotional symptoms

- Trauma and addictive or compulsive behavior

- Abuse and relationships

TREM Modules-Advanced Trauma Recovery Issues

- Family-myths and distortions
- Family life: current
- Decision making: trusting your judgment
- Communication: making yourself understood
- Self-destructive behaviors
- Blame, acceptance and forgiveness
- Feeling out of control

TREM Modules-Advanced Trauma Recovery Issues

- Relationships
- Personal healing

TREM Modules-Closing Rituals

- Truths and myths about abuse

- What it means to be a woman

- Closing ritual

Sample TREM Exercise

Topic 4: Physical Boundaries

TREM Module Modifications

- Women diagnosed with serious mental illness
- Incarcerated women
- Women who are parents
- Woman who abuse
- Male survivors (MTREM)
- Piloted in Missouri at Places for People (TTREM) for transgendered individuals

A Sample of Individuals Receiving TREM Services
Report of Symptoms Before and After

Average symptom scores on the PDS before and after TREM participation
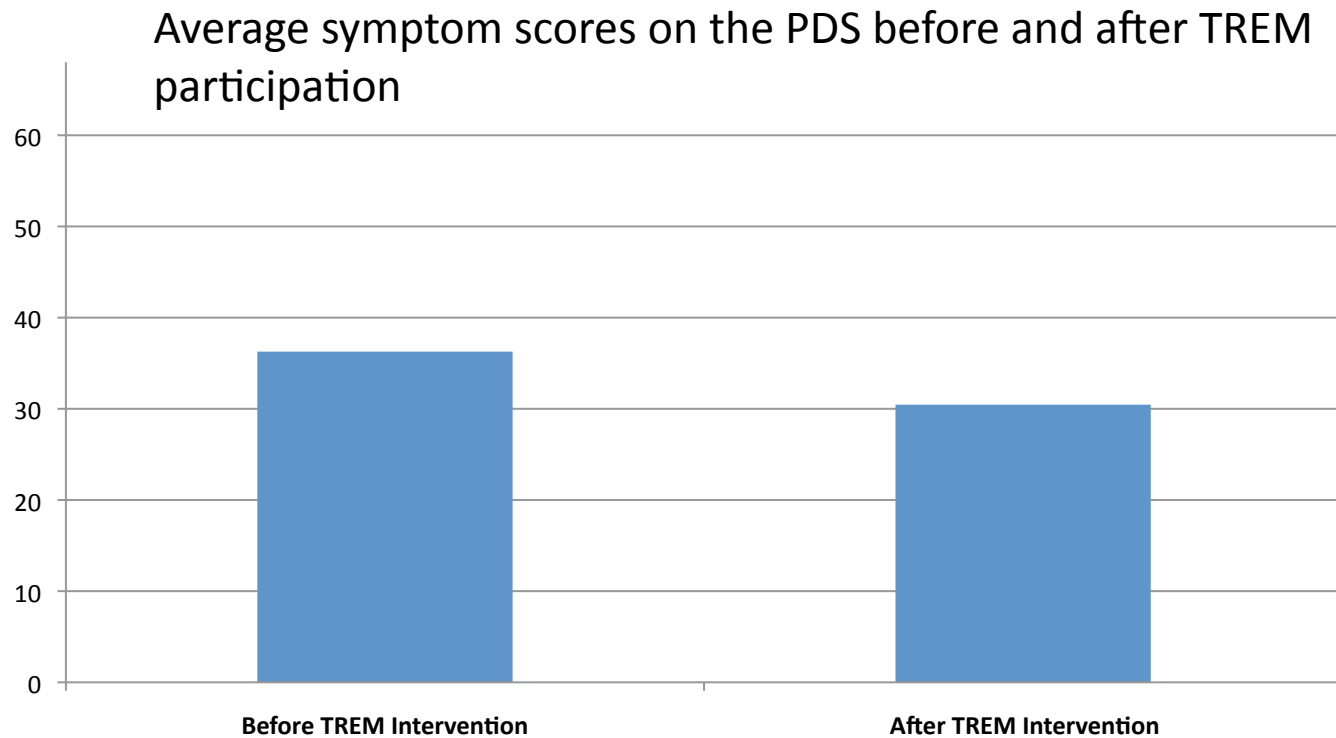
"TREM has been a diamond in the rough to for me. I learned so much about myself in conjunction to trauma, abuse, and neglect, that I feel that I have become a new individual. I feel I have matured and can face reality, life on life terms a lot better. It has given me emotional strength and courage to face the day. It taught me I am not just an important individual, but a loving human being." – *TREM Graduate*

Implementation: Getting your program off the ground

- Organizational Implementation Strategies
  - Change Team that is empowered
  - Implementation plan and staff and management buy In
  - Identify screening tools, determine thresholds
  - Train facilitators
  - Market the group

Implementation

- Provide for facilitator consultation/ supervision

- Consider using three facilitators to start

- Review fidelity

- Determine consumer outcomes to track

- Screen participants for group readiness

- Revise Policies and Procedures

- Train the remaining staff to recognize trauma and trauma symptoms.

Lessons Learned

- Participation must be voluntary
- Closed groups with commitment by participants
- Minimum of Two facilitators
- Screening and recruitment, expect about 50% to finish
- Be flexible with attendance
- Consistent follow up and support for both participants and facilitators
- Allowing individuals to repeat the group if they want
- Condensing the curriculum leads to problems

Fidelity

- TREM fidelity includes session recording and coding of facilitator responses

- Integrate fidelity measures as part of the programs QI process

- Set goals and track outcomes

- Consider outside fidelity reviewers

- Participate in facilitator networks, clinician support forums

Questions
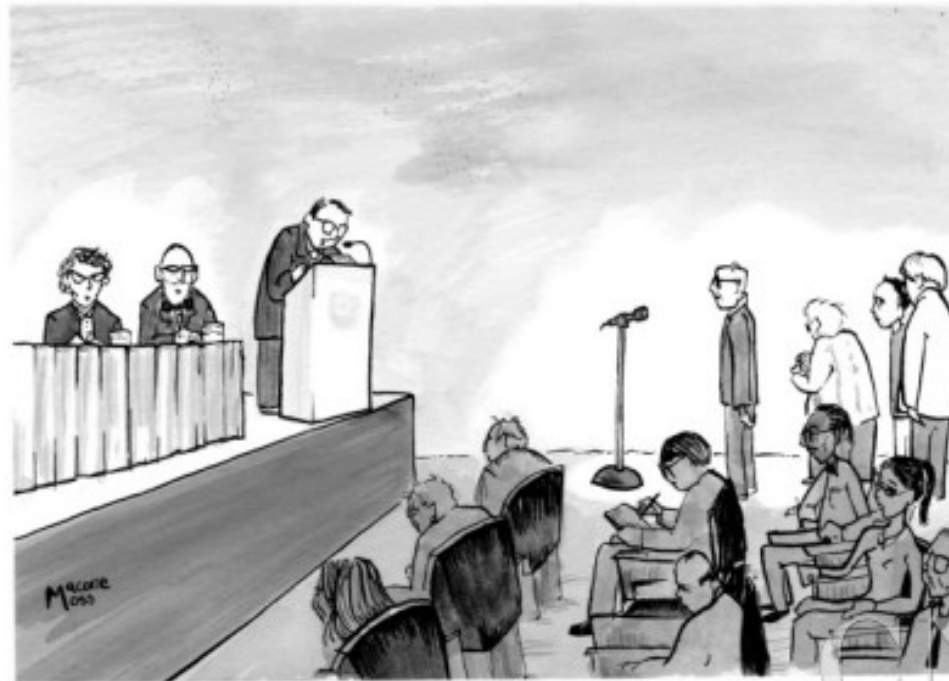
"We'd now like to open the floor to shorter speeches disguised as questions."

Resources

- Community Connections
  - www.Communityconnectionsdc.org
  - 202-546-1512
  - Provides training, consultation and materials
- National Registry of Evidenced Based Practices
  - www.nrepp.samhsa.gov
  - Provides research, costs, and dissemination information

Special Thanks

- TREM facilitators at Queen of Peace Center

- TREM facilitators at Places for People

- TREM Facilitators at Saint Patrick Center

- Saint Louis National Alliance on Mental Illness

- Participants in the TREM groups and the PhotoVoice project

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