



What Every Dietitian Needs to Know about Trauma and Delivery of Trauma Informed Care

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IAND

Indiana Academy of
Nutrition & Dietetics



Disclosures

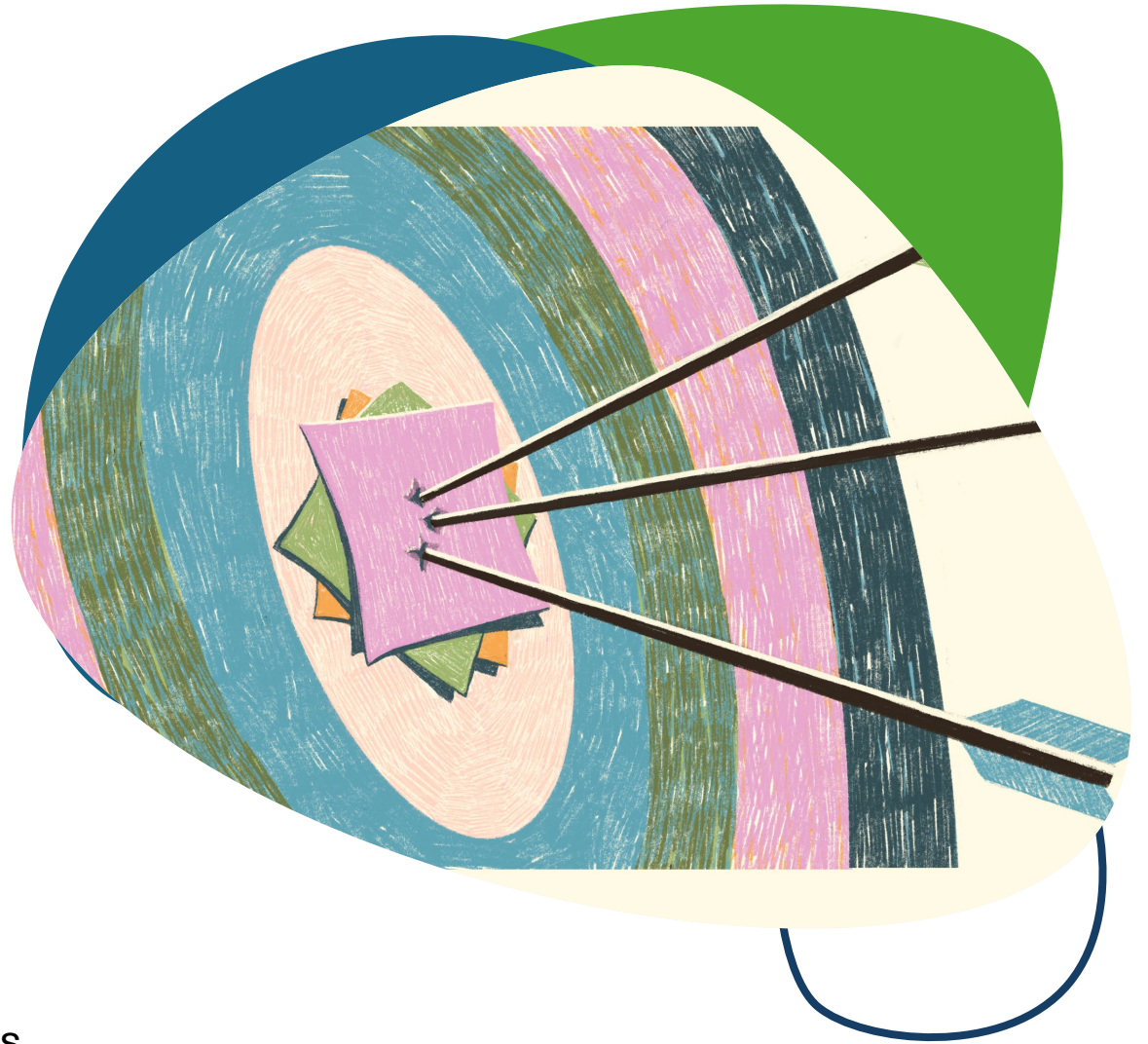
I have no disclosures for today's presentation.

Objectives

Objective 1: After participating in this session, attendees should be able to identify 3 types of developmental trauma and discuss their impact on the decision-making process.

Objective 2: After participating in this session, attendees should be able to integrate the 5 principles of providing trauma informed care.

Objective 3: After participating in this session, attendees should be able to demonstrate a Values Sort exercise in efforts to help facilitate the delivery of trauma informed care.





Agenda

Let's get comfortable

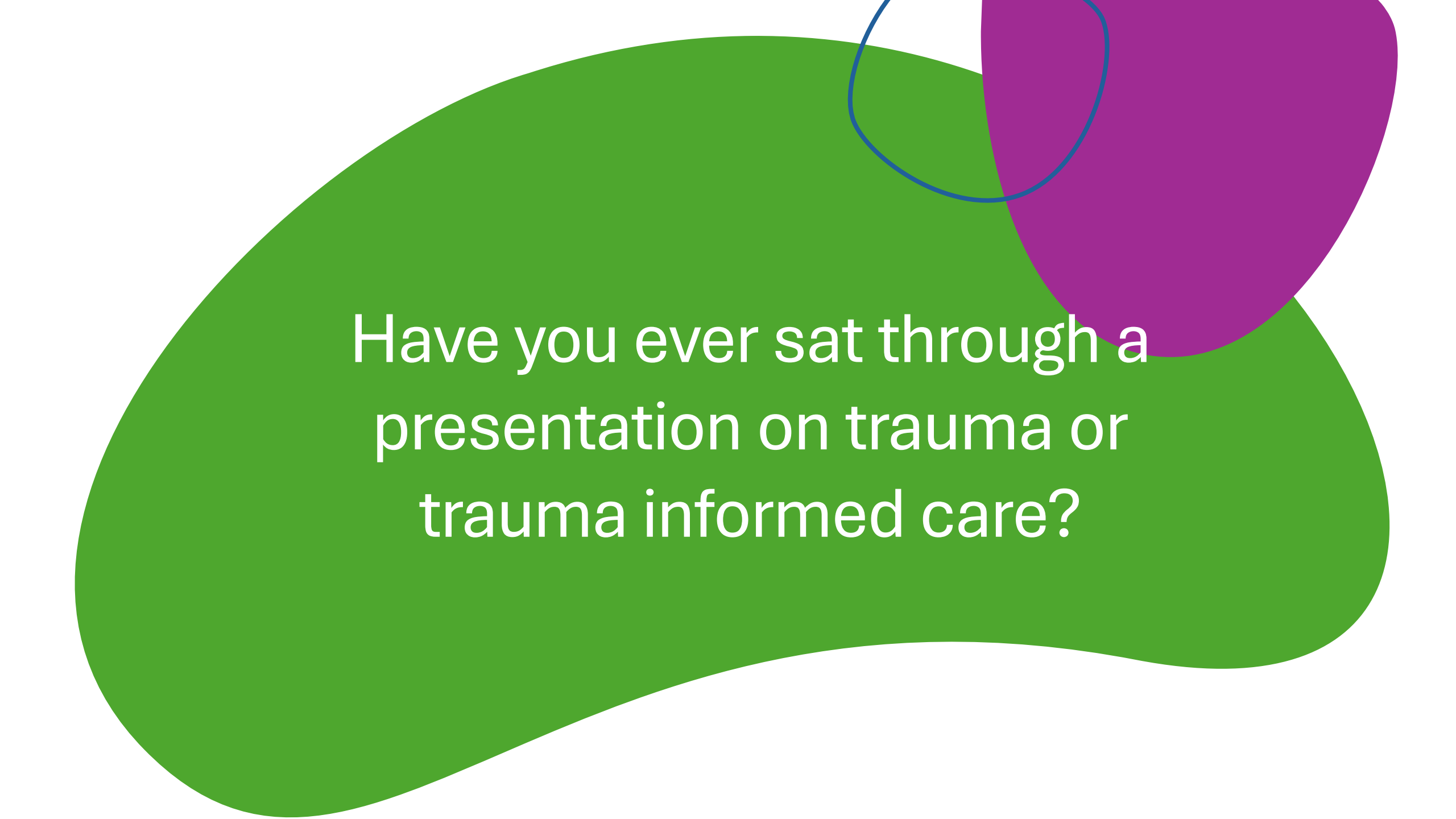
Big Topics = Big Feelings

Define our topic

Understand its scope

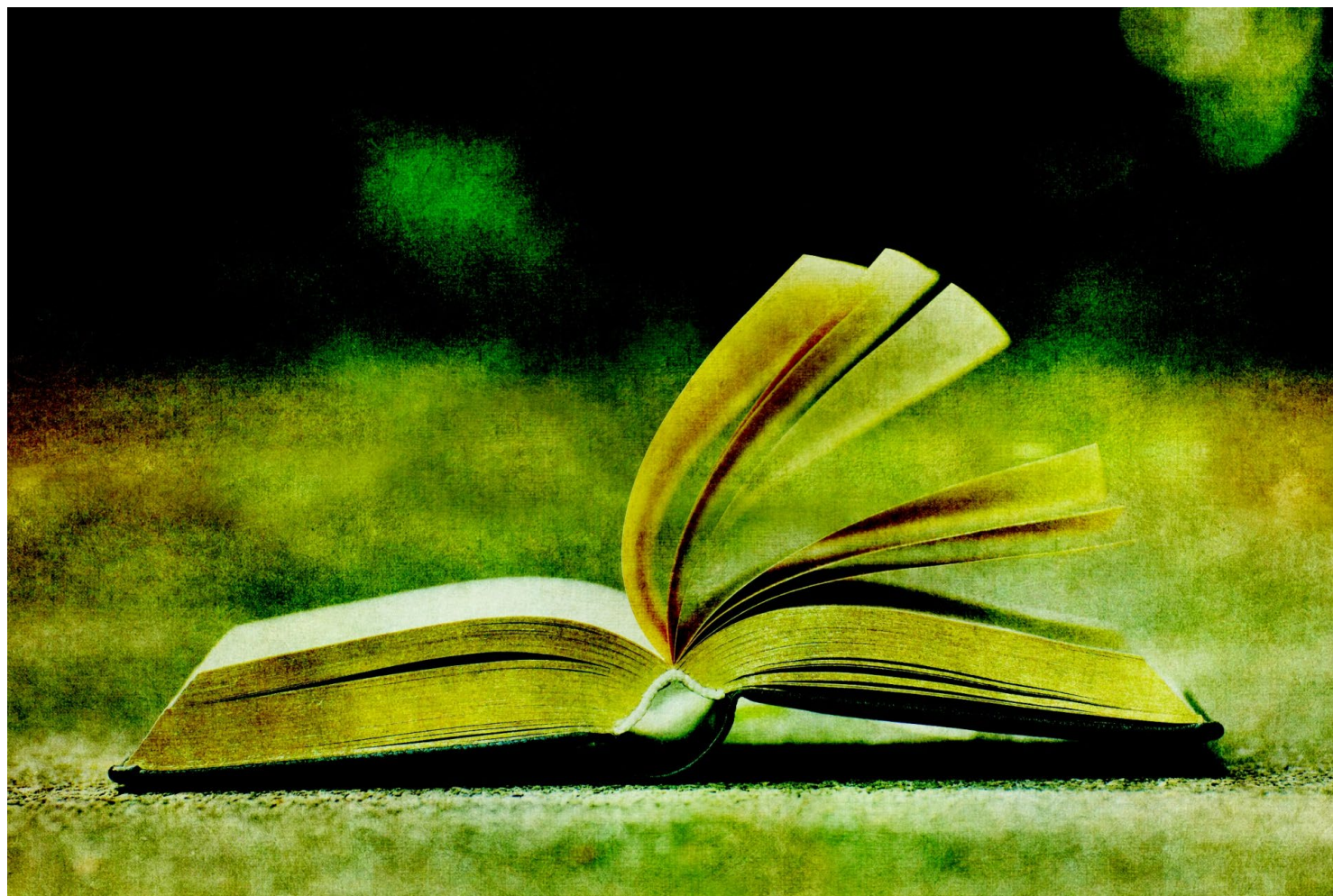
Develop our skills

Practice

The background features a large, irregular green shape on the left and a smaller, irregular purple shape on the right. A thin blue line starts from the top center, curves down and to the right, passing between the green and purple shapes, and then curves back to the left, ending near the top of the green shape.

Have you ever sat through a
presentation on trauma or
trauma informed care?

I want to tell you a story....



Erin

Fatty liver, Obesity

Sexual assault by her professor in college leading to a 10+ year history of binge eating disorder and Bulimia





Sofia

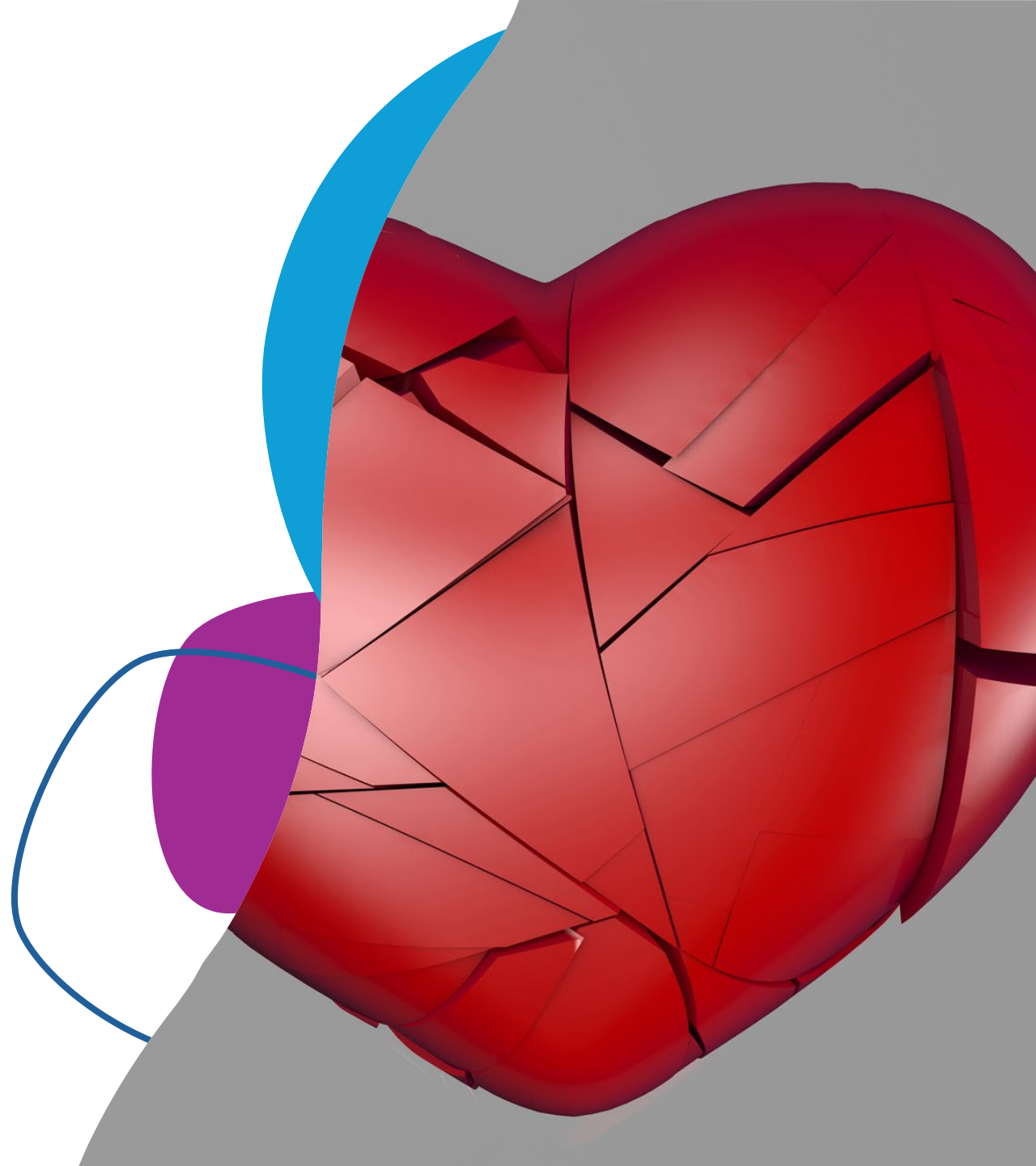
Overweight 17-year-old, juvenile RA, POTS

Raped by her boyfriend at age 15

Shannon

Anorexia post gastric-bypass surgery, prior history of binge eating disorder

Molested by her school custodian as an elementary student, in an abusive marriage



There are a million more stories



Jessica

Obesity

Lost her father to heroine addiction



Amber

Wants to Lose Weight

Lost her father and her husband in a span of 2 years



Amy

Obesity, Type 2 DM

Middle Child, Extremely thin mom and sister



Grace

Overweight

Twin brother who is a star athlete, very thin pretty mom

There are a million more stories



Leon

Obesity

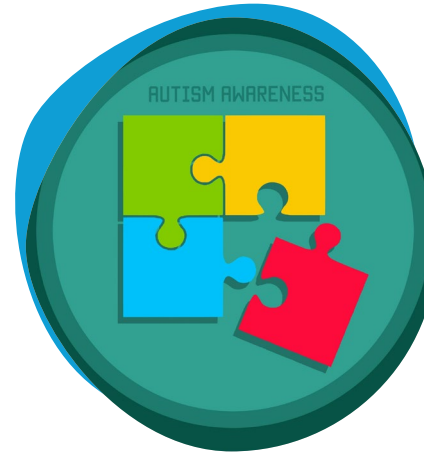
Neglectful parents,
unfulfilling career



Jay

Wants to Lose Weight

Successful accountant with a
history of dyslexia



Chris

Overweight, Hypertension

Father w a demanding job
and a 21-year-old son with
severe autism



Ann

Overweight

Divorced middle child, lost
her brother to alcoholism

We All Know This Story

Our Work

- This story is as much about us as it is about our clients and patients.

Understanding

- When we understand how our clients exist and survive in their lives, we can more easily meet them where they are.

Skill Development and Hope

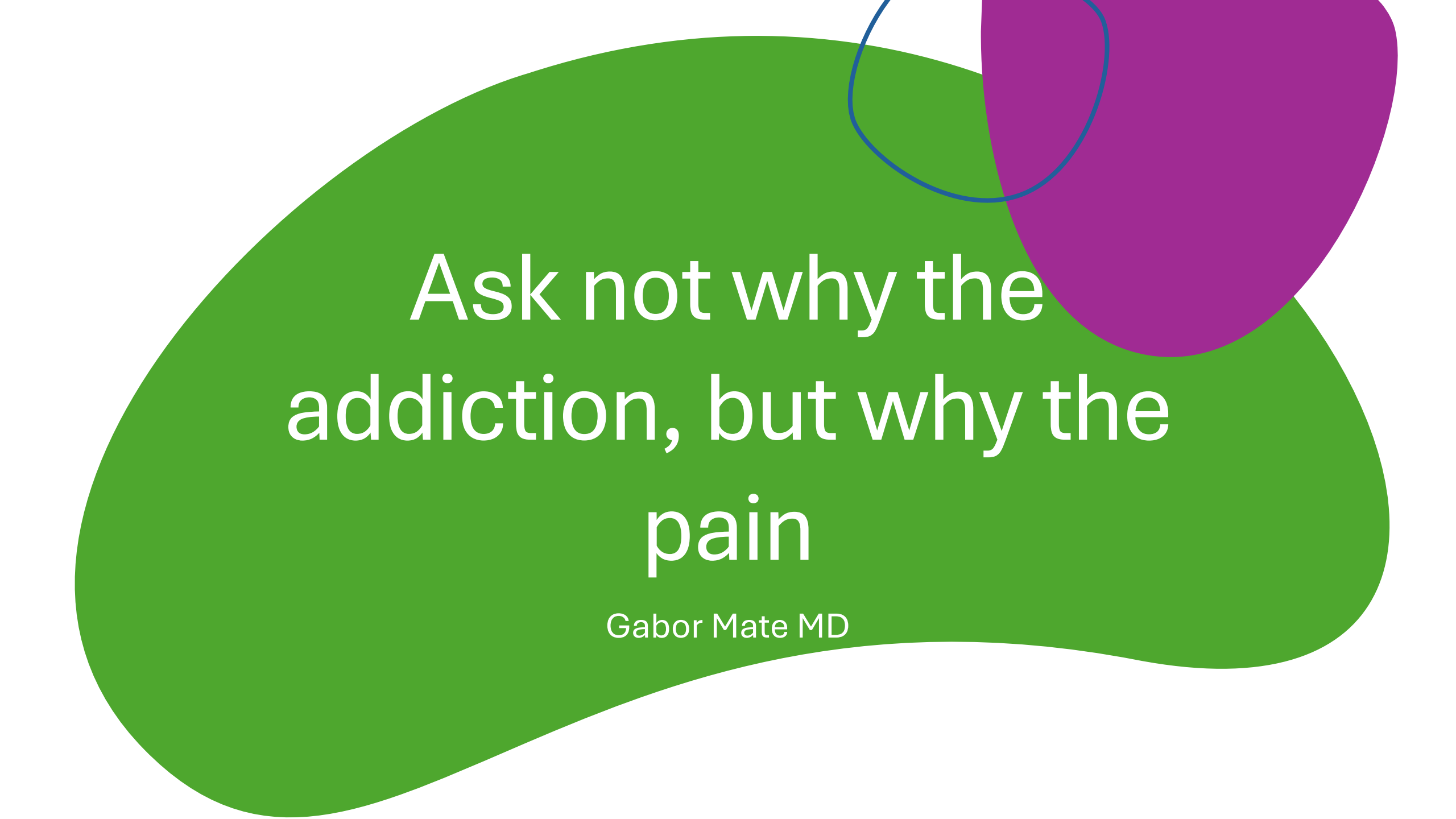
- Building your confidence as a clinician in this area will enhance your work and your patient's outcomes.



What we thought
was our work!



Where our work really starts!



Ask not why the
addiction, but why the
pain

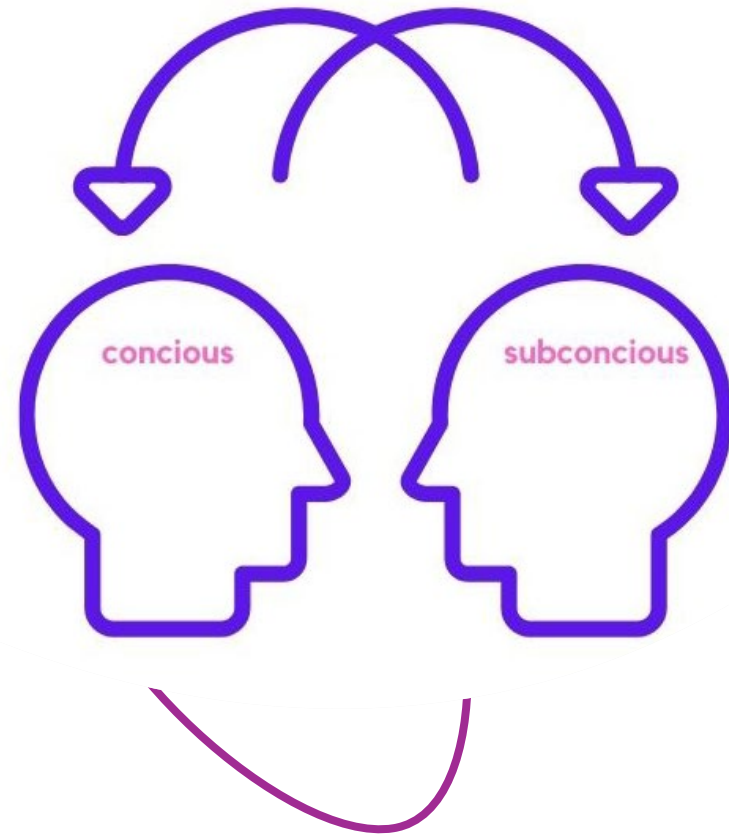
Gabor Mate MD

Why I Eat

Conscious

v

Subconscious



Traditional Medical Nutrition Therapy

- What's wrong with you? Labs, Anthropometrics, Diagnosis

Trauma Informed Nutrition Therapy

- What happened to you? Tell me about you

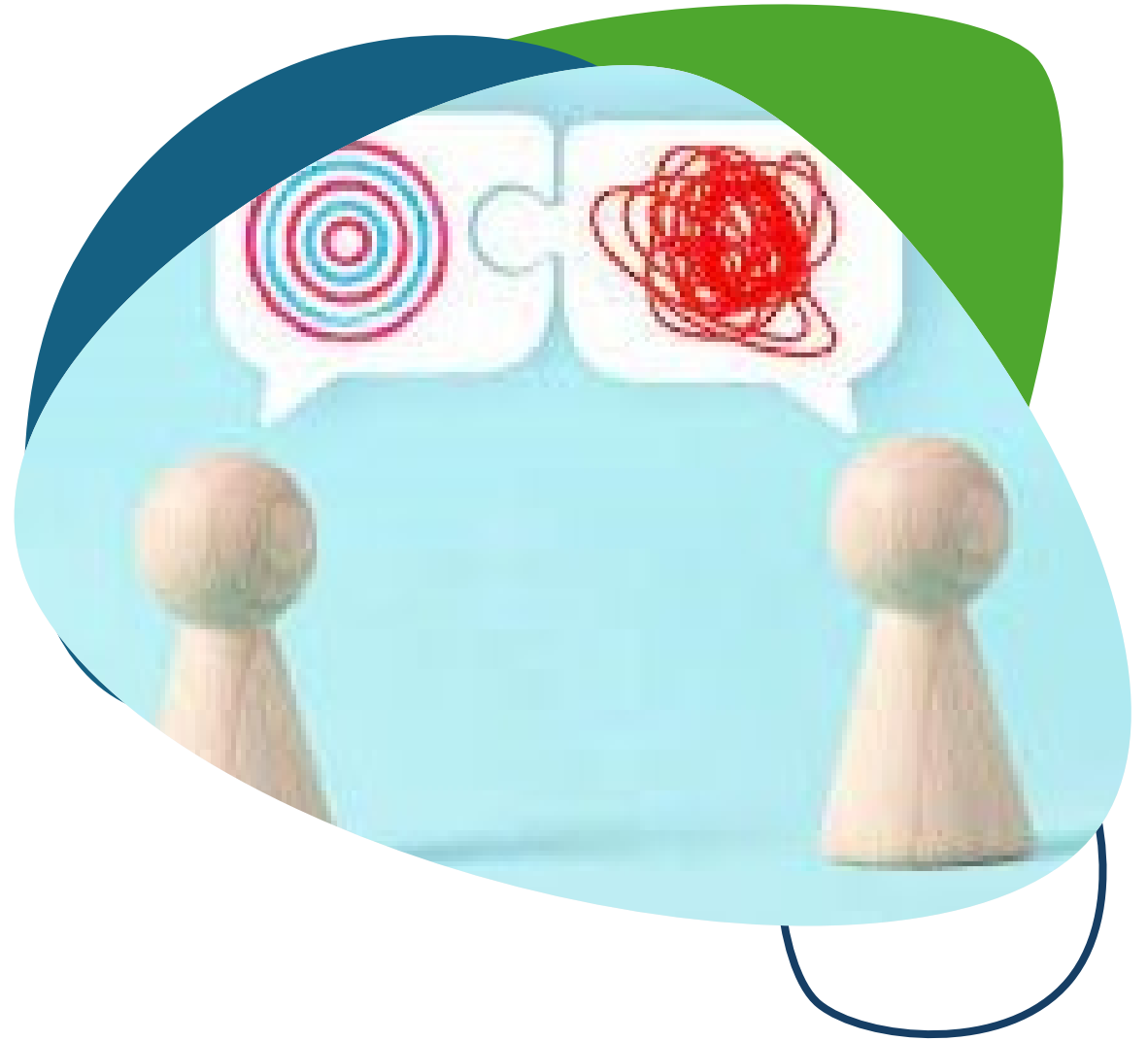


What Most Clients Say....

I just really need you to just tell me what to do and I'll do it!

I really like just having a plan to follow.

But then they don't!!!!!!





Pre-Frontal Cortex

Allows us to make educated, well thought out decisions.

We access this part of our brain by actively crossing over the bridge.

Emotions often flood out this bridge making our best choices inaccessible to us.

This is why we can't just educate on nutrition to be successful.
Knowledge is a lot but its not everything!

The image features a large, organic green shape on the left and a smaller, purple shape on the right. A thin blue line curves from the top center, passing between the two shapes. The text "THE DISCONNECT" is centered within the green shape in a white, sans-serif font.

THE DISCONNECT

A photograph of a person's hands covering their face, suggesting distress or trauma. The image is partially obscured by a large, stylized graphic consisting of overlapping circles in blue, orange, and purple. The blue circle is at the top, the orange circle is in the middle, and the purple circle is at the bottom, all overlapping each other and the photograph.

Psychological Trauma

Psychological trauma is a **response** involving complex debilitation of adaptive abilities—emotional, cognitive, physical, spiritual and social—following an event that was perceived by our nervous system as life-threatening to oneself or others (especially loved ones).

Trauma can be a one-time event, a prolonged event or a series of events. Trauma that affects a community or a country is called collective trauma.

TRAUMA IS RELATIVE AND EXISTS ON A SPECTRUM.

What is Developmental Trauma?

Reach

Broad, Cumulative and Lasting Effects

Problem

Children lack the cognitive and behavioral capacities to understand and respond to traumatic circumstances effectively.

Attachment

Early, repeated interpersonal traumas can interrupt the development of secure attachment and **cause the development of chronic and severe traumatic adaptations.**

Coping

Children **may re-enact their traumas through defensive (protective) expressions** of anger and aggression (because they fear emotional vulnerability and experiencing additional traumas) and **by coping with alcohol, drugs, food and self-inflicted injuries to numb their emotional pain and suffering.**

Shared Traits of PTSD/Trauma/Long Term Dieter/Overweight/Obesity/ED Response

thoughts •

Intrusive and distressing thoughts

behaviors •

Dissociative behaviors

reactions •

Physiological Reactions

tendencies •

Avoidance

self •

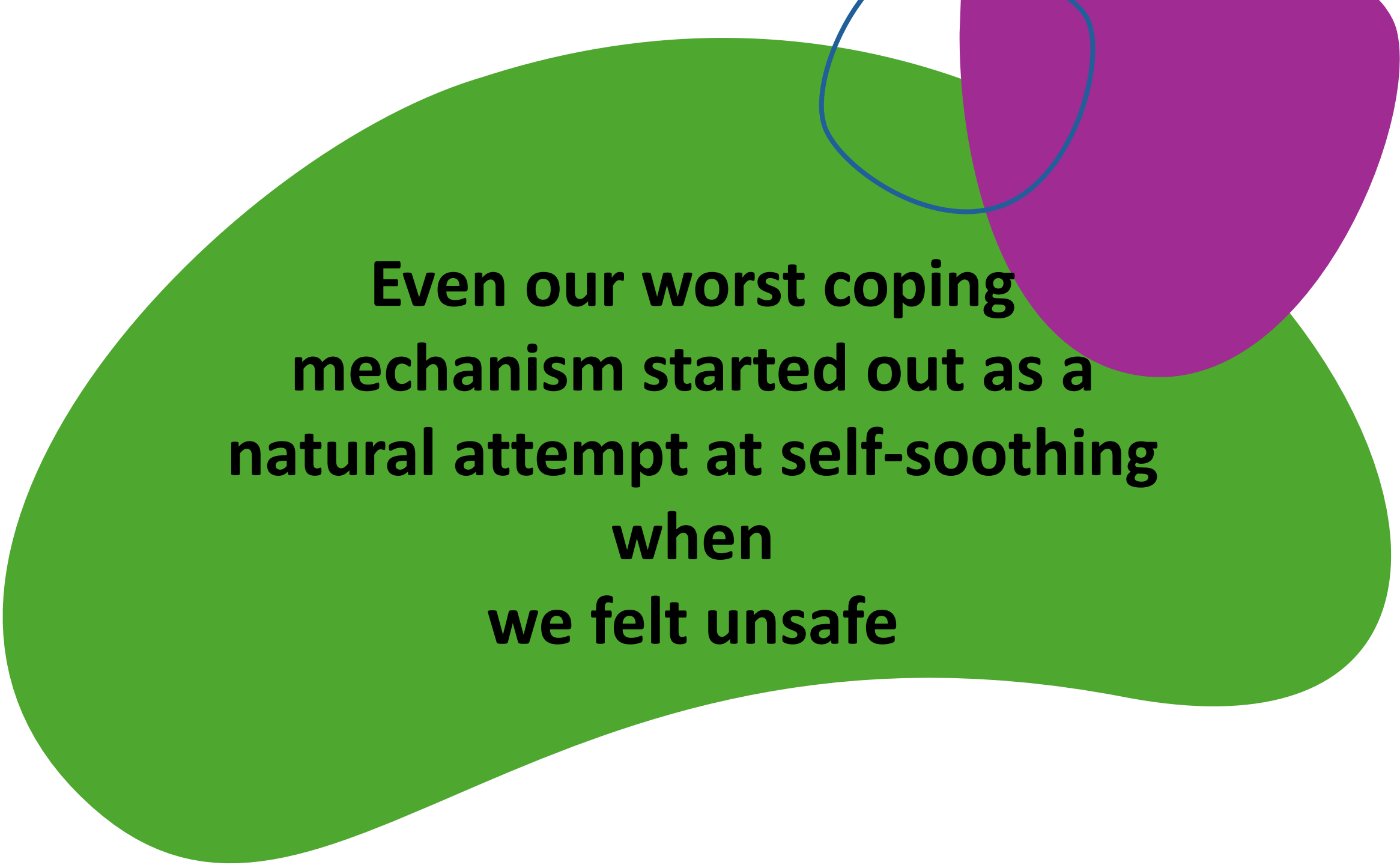
Negative Self Beliefs and Self Blame

choices •

Reckless and Self-destructive behavior

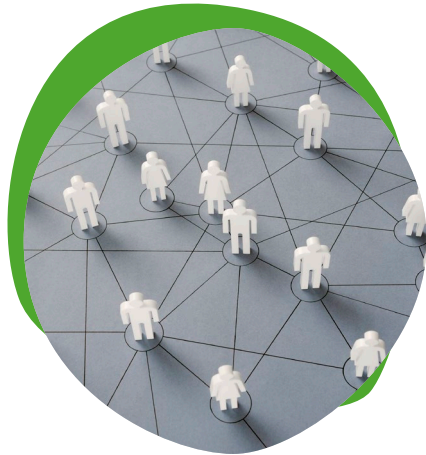
duration •

Lasts longer than 1 month and impairs social, occupational and other areas of functioning



**Even our worst coping
mechanism started out as a
natural attempt at self-soothing
when
we felt unsafe**

The Trauma of Weight



Social Stigma
Social Media



Discomfort



Weight Bias



Fear

The Weight of Trauma

Trauma's Effect on Systems



Cognitive

Affects the ability to process thoughts and make good judgments and leads to poor impulse control.



Emotional

Creates looping cycles of emotions of **shame**, **guilt**, fear, anger and pain.



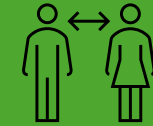
Physical

It affects our muscles, joints, digestion and metabolism, temperature, sleep, and the immune system. Leads to Hypothalamic-pituitary-adrenal axis dysregulation and alters hormonal stress response.



Spiritual

Affects our worldview, the lenses with which we see reality (typically so we see it as unsafe), our understanding and meaning of life, society, and the world



Social

Affects relationships with spouses, family, friends, colleagues, and strangers (because it affects so many so deeply, it affects structures of societies)

The Study of Trauma and Health Outcomes

Has its birthplace in 1985 in an obesity clinic in California headed by Dr. Vincent Felitti





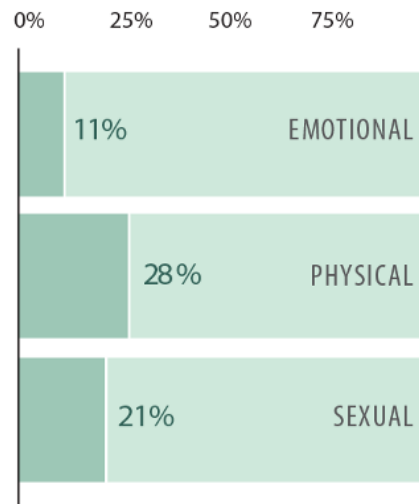
- The ACE study was conducted at Kaiser Permanente from 1995 to 1997 with two waves of data collection.
- It is one of the largest investigations of childhood abuse and neglect and household challenges and later-life health and well-being.
- The investigation had its origins in Dr. Vincent Felitti's Obesity Clinic in 1985 in San Diego.



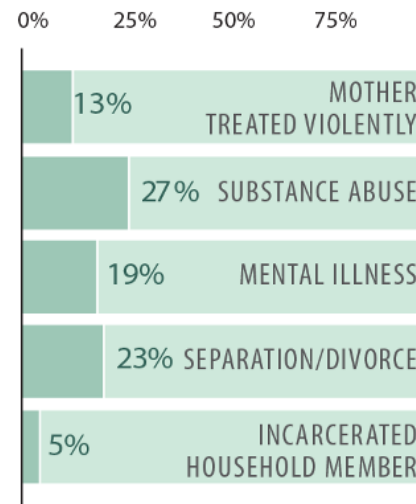
TYPES *of* ACES

The ACE study looked at three categories of adverse experience: **childhood abuse**, which included emotional, physical, and sexual abuse; **neglect**, including both physical and emotional neglect; and **household challenges** which included growing up in a household where there was substance abuse, mental illness, violent treatment of a mother or stepmother, parental separation/divorce or had a member of the household go to prison. Respondents were given an **ACE score** between 0 and 10 based on how many of these 10 types of adverse experience to which they reported being exposed.

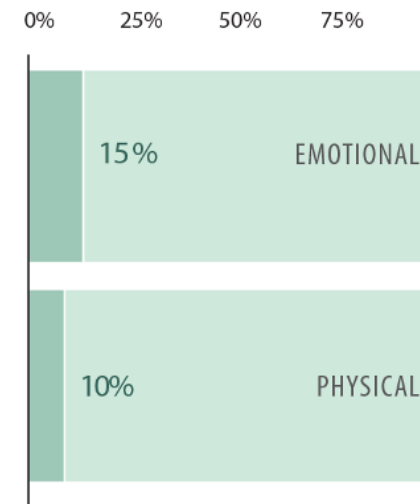
ABUSE

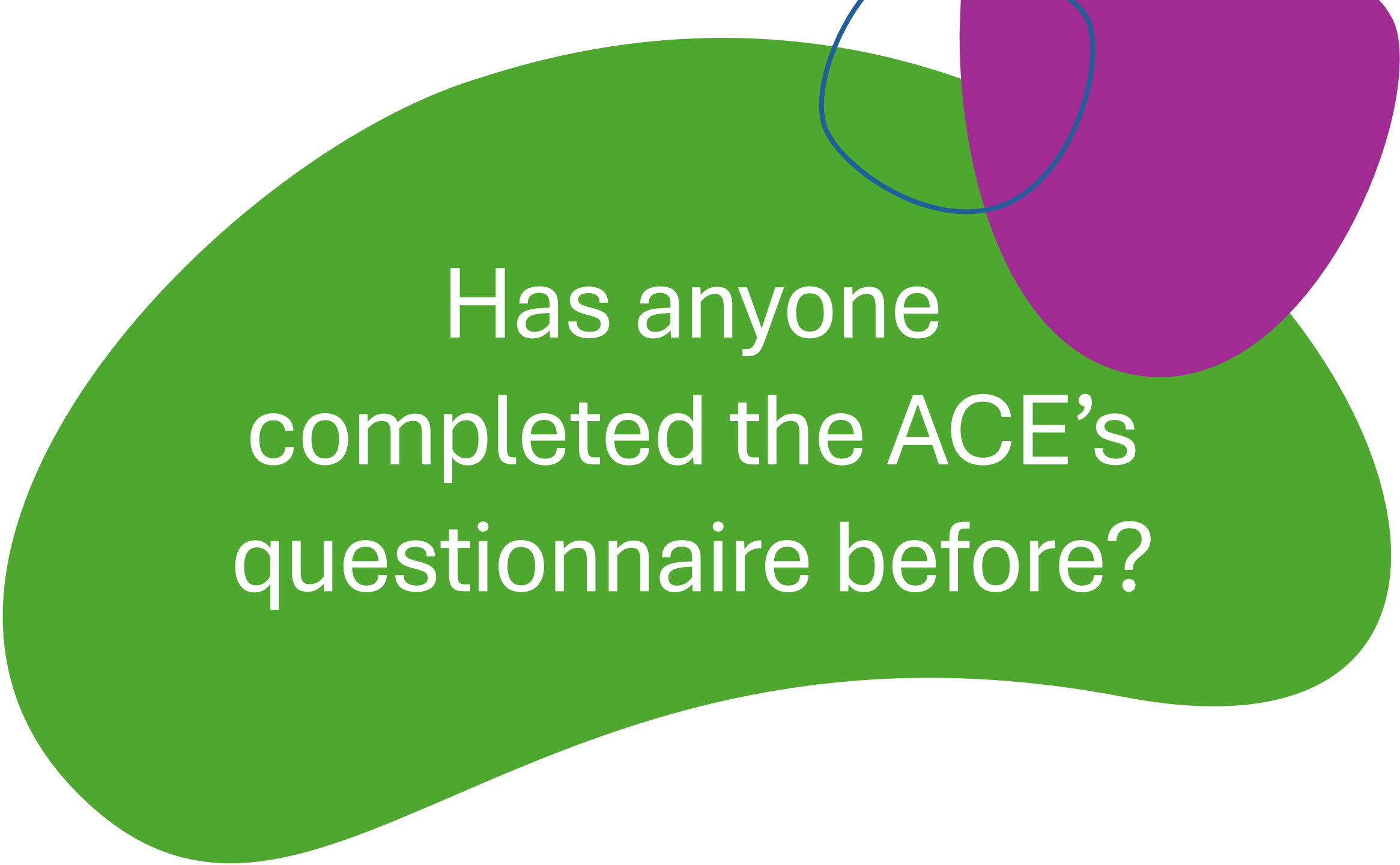


HOUSEHOLD CHALLENGES



NEGLECT





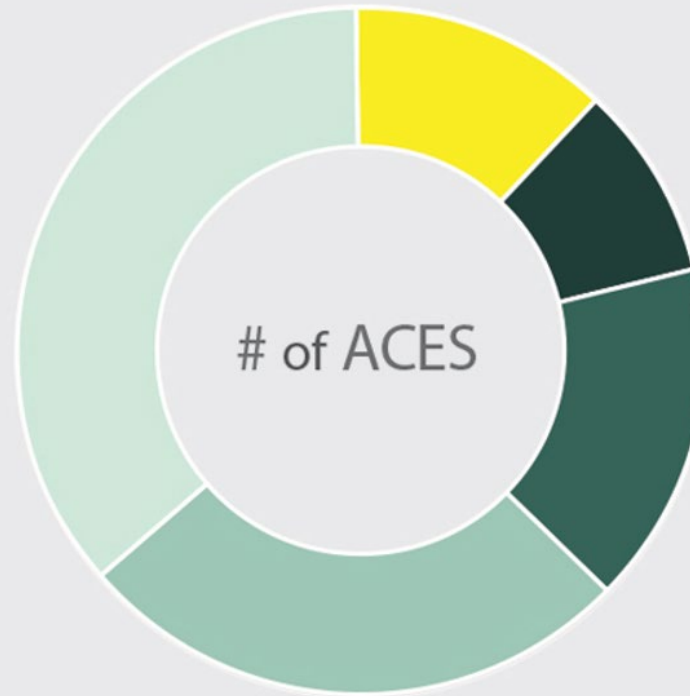
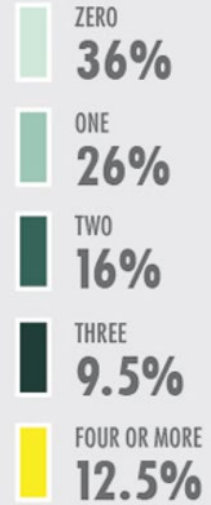
Has anyone
completed the ACE's
questionnaire before?

ACE Questionnaire

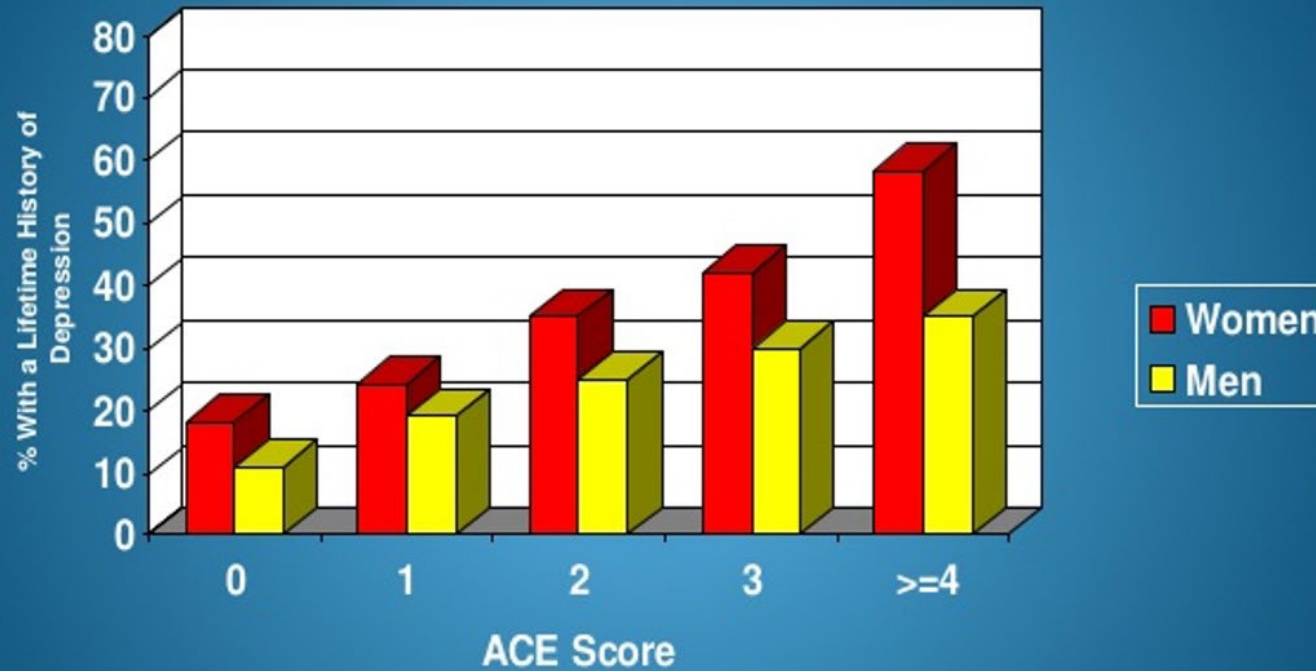
- While you were growing up, during your first 18 years of life:
- 1. Did a parent or other adult in the household often or very often... Swear at you, insult you, put you down, or humiliate you? Or Act in a way that made you afraid that you might be physically hurt?
- 2. Did a parent or other adult in the household often or very often... Push, grab, slap, or throw something at you? Or Ever hit you so hard that you had marks or were injured?
- 3. Did an adult or person at least 5 years older than you ever... Touch or fondle you or have you touch their body in a sexual way? or Attempt or actually have oral, anal, or vaginal intercourse with you?
- 4. Did you often or very often feel that ... No one in your family loved you or thought you were important or special? Or Your family didn't look out for each other, feel close to each other, or support each other?
- 5. Did you often or very often feel that ... You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? or Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?
- 6. Were your parents ever separated or divorced?
- 7. Was your mother or stepmother: Often or very often pushed, grabbed, slapped, or had something thrown at her? Or Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? Or Ever repeatedly hit at least a few minutes or threatened with a gun or knife?
- 8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?
- 9. Was a household member depressed or mentally ill, or did a household member attempt suicide?
- 10. Did a household member go to prison?
- Now add up your "Yes" answers: _____ This is your ACE Score.

How Common are ACES?

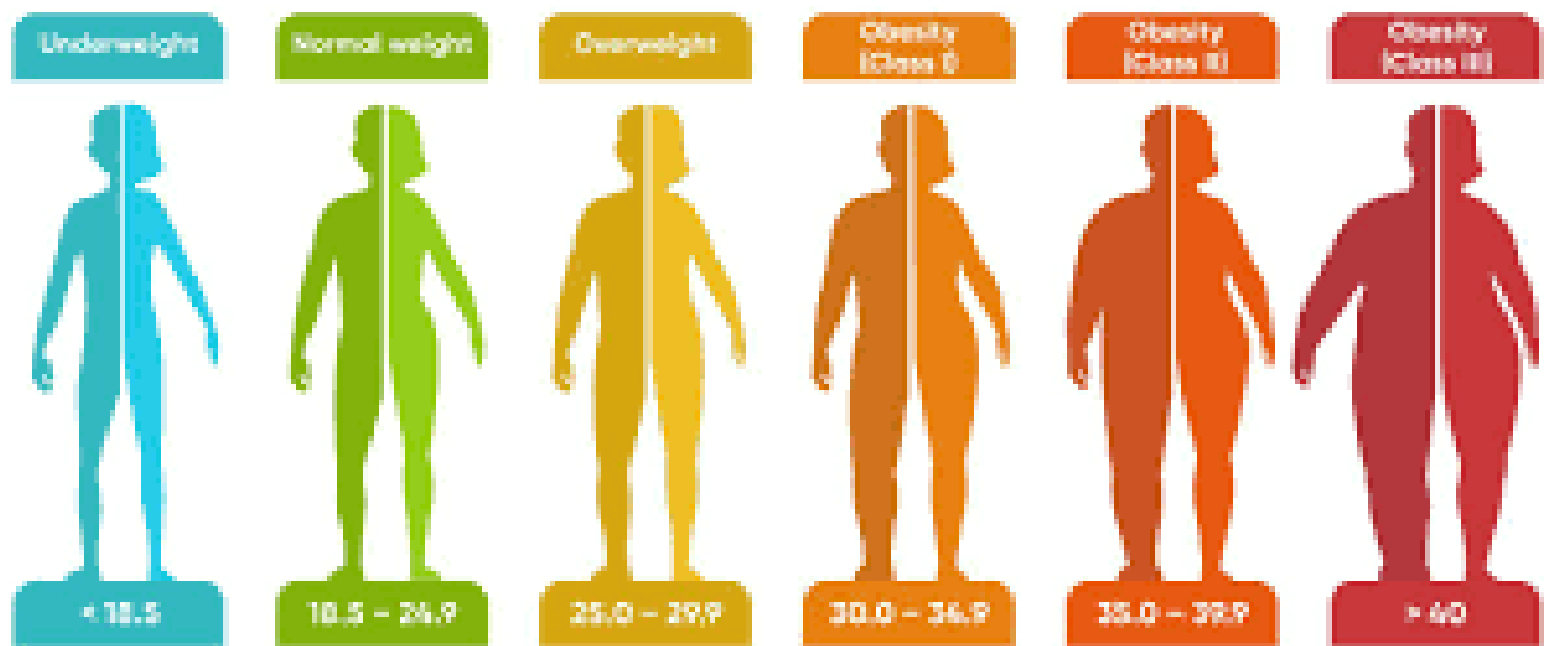
ACE Study



Chronic Depression



Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P., & Marks, J. S. (1998). *Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study*. American Journal of Preventive Medicine, 14(4), 245–258. [https://doi.org/10.1016/S0749-3797\(98\)00017-8](https://doi.org/10.1016/S0749-3797(98)00017-8)



Severe obesity ^d (BMI ≥ 35)	Total	8,018	8.6	—	—
	0	3,850	5.4	1.0	Referent
	1	2,004	7.0	1.1	(0.9–1.4)
	2	1,041	9.5	1.4	(1.1–1.9)
	3	590	10.3	1.4	(1.0–1.9)
	4 or more	543	12.0	1.6	(1.2–2.1)

Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults

The Adverse Childhood Experiences (ACE) Study

Vincent J. Felitti, MD, FACP, Robert F. Anda, MD, MS, Dale Nordenberg, MD, David F. Williamson, MS, PhD, Alison M. Spitz, MS, MPH, Valerie Edwards, BA, Mary P. Koss, PhD, James S. Marks, MD, MPH

Probability of Outcomes

Given 100 American Adults

33 No ACEs	51 1-3 ACEs	16 4-8 ACEs
<u>WITH 0 ACEs</u> 1 in 16 smokes 1 in 69 are alcoholic 1 in 480 uses IV drugs 1 in 14 has heart disease 1 in 96 attempts suicide	<u>WITH 3 ACEs</u> 1 in 9 smokes 1 in 9 are alcoholic 1 in 43 uses IV drugs 1 in 7 has heart disease 1 in 10 attempts suicide	<u>WITH 7+ ACEs</u> 1 in 6 smokes 1 in 6 are alcoholic 1 in 30 use IV drugs 1 in 6 has heart disease 1 in 5 attempts suicide

Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P., & Marks, J. S. (1998). *Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study*. American Journal of Preventive Medicine, 14(4), 245–258. [https://doi.org/10.1016/S0749-3797\(98\)00017-8](https://doi.org/10.1016/S0749-3797(98)00017-8)



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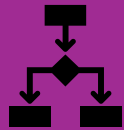
The 5 Principles of
Creating a Trauma
Informed Environment”

5 Principles of Trauma Informed Care



Safety

- Furniture choice
- Strategic use of scale
- Tone of Voice
- Language
- Address Shame and Guilt



Choice

- Varied Agenda
- Meeting a client on their path
- Avoid assumptions
- HAES
- ED Informed



Collaboration

- Partner with other providers
- Partner with other key players (family, friends)
- Refer as necessary



Trustworthiness

- Adhere to privacy guidelines
- Use mirroring
- Share appropriately



Empowerment

- Express hope
- Unlocking the mystery
- Use the word “we”
- Create a method of communication
- Values Work

Tools to Enhance Your Trauma Informed Practice

The Decision Line (Values Work)

- Multiple studies have shown efficacy in using Value-Driven therapy (Think ACT) to create and maintain lifestyle behavior modification as compared to standard behavioral therapy.
- A simple visual model like the decision line allows clients to begin the process of being curious about their decisions rather than judgmental about them.



The Decision Line

Fear
Pain
Anxiety
Stress
Frustration
Shame
Guilt
Trauma



Values

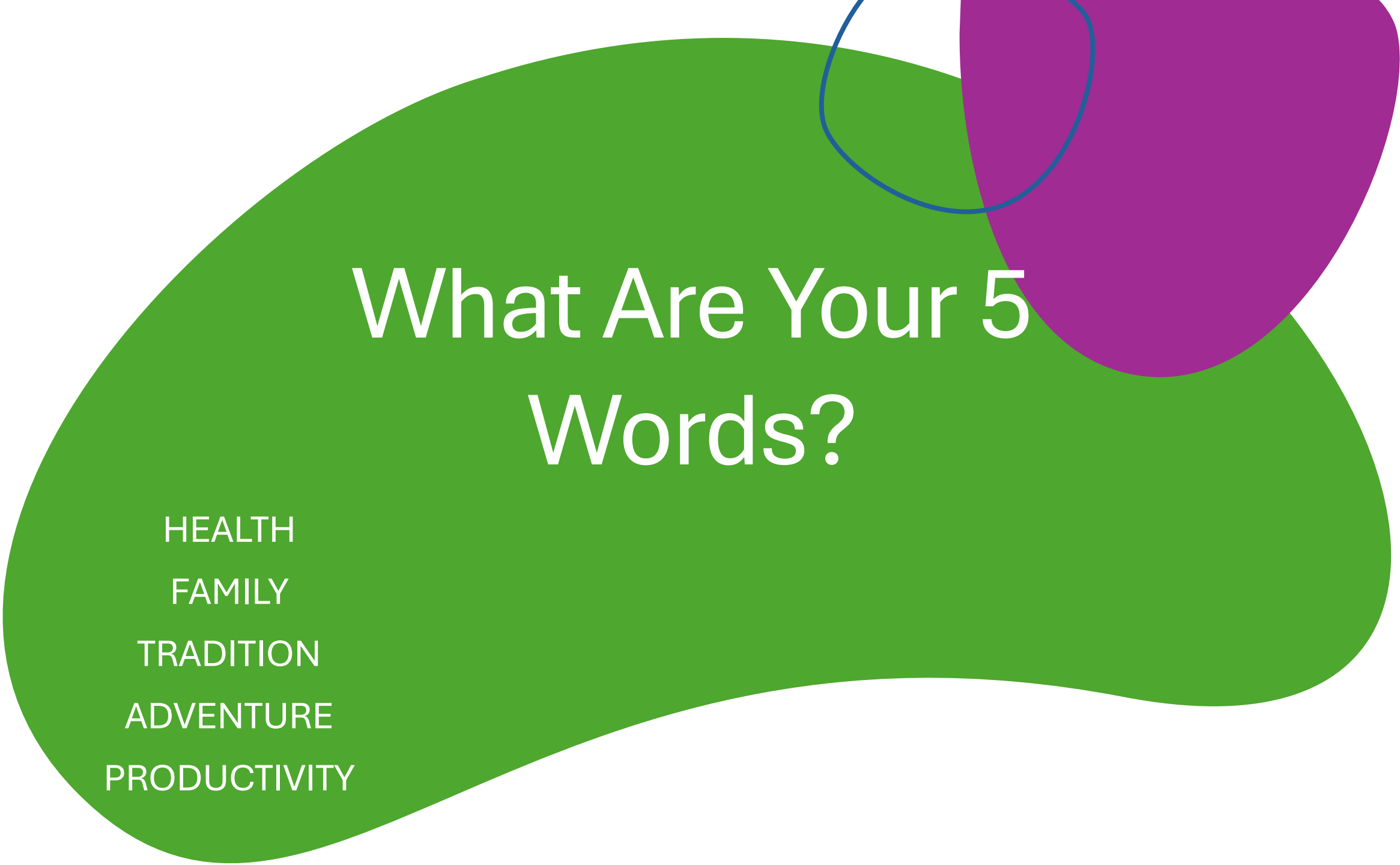


Values Sort

- Powerful opportunity to think deeply about what motivates you, about what you want more of in your life.
- The goal is to choose 5 words that will serve as the pillars of your personal mission statement.
- Ask yourself:
 - Will this word help me make a decision?
 - Will it guide me along my path?

Values Words

- Health
- Humor
- Serenity
- Parenting
- Surrender
- Service
- Sacredness
- Imagination
- Dignity
- Intellect
- Pride
- Wealth
- Excellence
- Attention
- Reliability
- Dependability
- Respect
- Equanimity
- Enlightenment
- Wholeness
- Spirituality
- Integrity
- Control
- Home
- Self-Expression
- Trust
- Friendship
- Safety
- Relationship
- Learning
- Consistency
- Courage
- Winning
- Truth
- Rituals
- Spontaneity
- Admiration
- Honor
- Grace
- Fairness
- Family
- Vitality
- Community
- Kindness
- Honesty
- Passion
- Sexuality
- Appreciation
- Partnership
- Creativity
- Feelings
- Empathy
- Fun
- Connection
- Happiness
- Support
- Calm
- Pleasure
- Security
- Rules
- Belief
- Faithfulness
- Discovery
- Persuasion
- Structure
- Quiet
- Leadership
- Order
- Accomplishment
- Encouragement
- Patience
- Hope
- Openness
- Justice
- Intuition
- Independence
- Change
- Play
- Growth
- Gratitude
- Self-Respect
- Inner Strength
- Challenge
- Adventure
- Sensuality
- Tradition
- Self-Control
- Power
- Contribution
- Strength
- Peace
- Invention
- Beauty
- Work
- Risk
- Loyalty
- Planning
- Action
- Freedom
- Mastery
- Nature
- Understanding
- Nurture
- Joy
- Laughter
- Love
- Inspiration
- Compassion
- Recovery



What Are Your 5 Words?

HEALTH

FAMILY

TRADITION

ADVENTURE

PRODUCTIVITY

My 5 Words In Action



HEALTH

SCHEDULING A
DOCTOR APPT

MAKING A COLORFUL
SALAD FOR LUNCH
WITH PROTEIN

PURCHASING A
PRETTY WATER
BOTTLE



FAMILY

ENJOYING A SLICE OF
BIRTHDAY CAKE AT MY
CHILD'S PARTY

TAKING A BIKE RIDE
TO A COFFEE SHOP
OR ICE CREAM STORE

MISSING WORK TO
ATTEND AN EVENT



TRADITION

ENJOYING FOODS
THAT PERTAIN TO
HOLIDAYS

A DRINK TO MAKE A
TOAST

VISITING THE SAME
RESTAURANT ON
VACATION



ADVENTURE

TRYING A NEW FOOD
IN A NEW PLACE

TRYING A NEW
RECIPE

SPENDING MONEY
ON A FAMILY
VACATION



PRODUCTIVITY

WORK LIFE BALANCE

WAKING UP EARLY TO
WORKOUT

INVESTING IN
EDUCATION

EATING A BAR INSEAD
OF A FULL MEAL
SOMETIMES

Putting Values to Work



Connection

Sharing an appreciation for a client's values helps them to feel heard and seen.



Goals

Recognizes that the client's goals (hopes and dreams) may differ from traditional nutrition frameworks.



Erases Black and White Thinking

Eliminates good and bad or black and white thinking around choices. Helps to uncover the "why"



Wide Applicability

Money, Relationships, Career, Time: can be seen through the values lens (lots of opportunity to practice!)



Evolving

Our values don't have to be static- they can adjust to our stage of life to create self-compassion and grace.

Providing Trauma Informed Care in EVERY Setting

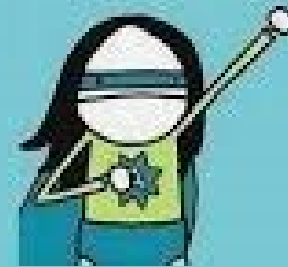


Don't Forget

- Fear of Change
- Fear of Past
- Fear of Hopelessness
- Repeated failed attempts at weight loss can trigger PTSD like symptoms for many.

ANXIETY GIRL!

able to jump to the worst conclusion
in a single bound!





Staying In Our Lane

- What is role of the RDN?
- When should you refer?

We Get to Help Our Clients

- Heal.
- Develop new coping skills.
- Practice awareness without judgement.
- Reframe their experiences.
- Grow and learn.

While we cannot undo what is done, we can see it, understand it, learn from it and change so that every new moment is spent not in regret, guilt, fear or anger but in wisdom, understanding and love.

Heartfeltquotes.blogspot.com

There is hope in knowing
our stories...

Thank you for letting me be a part of yours!

Julie



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