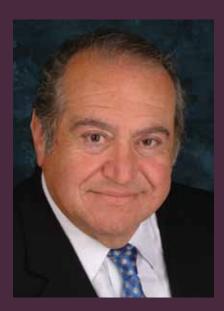
Pacific Clinics SEPTEMBER 2014 | www.pacificclinics.org ADVANCES Understanding TRAUMA

A Message from the President and CEO and the Chairman of the Board



Susan Mandel, PhD President and CEO, Pacific Clinics

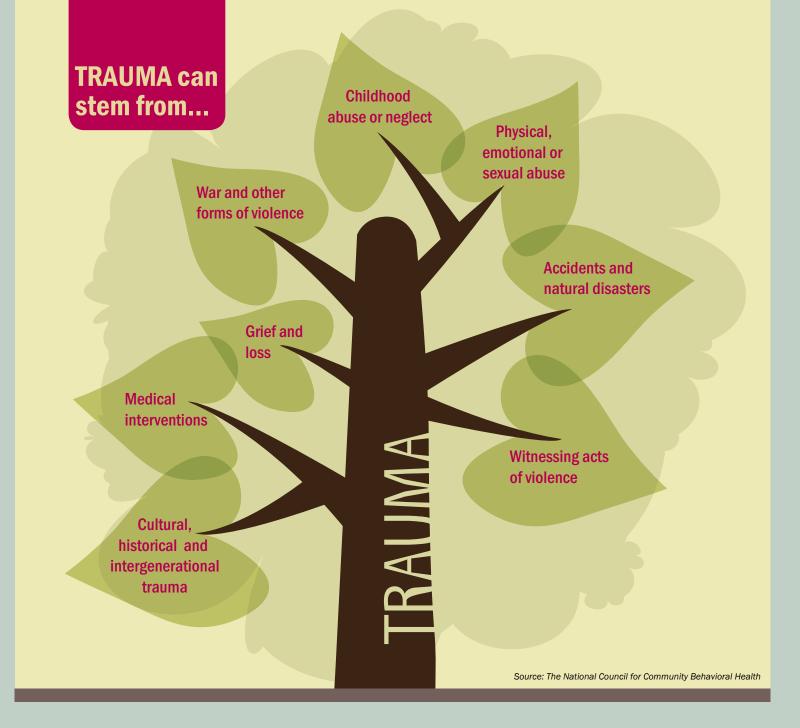


Zaven Kazazian Board Chair, Pacific Clinics

Welcome to the Pacific Clinics September 2014 Advances. This issue is about our work assisting clients of all ages who have been seriously impacted by trauma affecting their mental health.

While many of our clients have challenges stemming from the onset of serious and persistent biologically-based mental illnesses, we realize that most have also suffered from singular or repeated traumatic episodes during their lives, often occurring during childhood. Physical or mental, life-changing trauma can happen at any stage of life and result in serious disruption of a person's emotional and physical health.

When our children's programs began employing a best practice called Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) some years ago, the staff recognized substantial improvement in the ability to help youngsters who were acting out as a result of suffering abuse and neglect. In this issue, you will read about how that practice continues to address the needs of children and teens, as well as adults and older adults, and how a focus on Trauma Informed Care across all age groups may be opening additional avenues to improving the lives and health of our clients.



DEVASTATING EFFECTS OF TRAUMA: Pacific Clinics offers its clients hope so that they can rebuild their lives

"Most everyone will experience some type of traumatic event in their lives, regardless of age," said Joseph Ho, PhD, Pacific Clinics Divisional Director, Child & Family Specialty Services.

Trauma is seen in 90 percent of behavioral health clients receiving treatment according to the National Council for Community Behavioral Health (NCCBH). The long-term effects of complex trauma in children

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can cause serious health problems in adulthood like strokes, heart disease and cancer as outlined in a collaborative study conducted by the Center for Disease Control and Prevention and Kaiser Permanente.

This staggering statistic has led Pacific Clinics to become the only behavioral healthcare agency in California to participate in a year-long self-study program for the NCCBH on how it delivers trauma informed care.

"Trauma is something we have always been aware of. It is often the underlying cause of our clients' behavior. But it hasn't always been the first question we ask when assessing a client. Trauma Informed Care (TIC) begins by asking, 'what happened to you?' This approach opens the door to understanding what prompts a client's behavior and how best we can help them," explained Christopher Leucht, PhD.

We often equate Post Traumatic Stress Disorder (PTSD) with veterans, but most of Pacific Clinics clients suffer from PTSD from various types of trauma. According to the National Trauma Institute, trauma is the number three cause of death overall. No matter their age, children and youth bear emotional scars that can last a life time when they have been physically, sexually or emotionally abused.

"It impacts every part of a person," said Shannon Mayeda, PhD, LCSW, CRADC and Clinical Associate Professor at the University of Southern California. "Trauma changes beliefs about who I am and what I deserve, and those beliefs impact decisions on health, housing, friends, employment... everything."

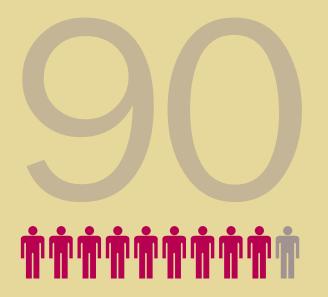
Trauma affects children in a permanent way, according to Mayeda, who teaches at the Pacific Clinics Training Institute. Since children are forming their belief systems, trauma will change their identity and how they respond to situations. Children who are victims of ongoing trauma also learn to tolerate pain, so they grow up unafraid, she said. They tolerate physical and emotional pain as adults and also tolerate being unsafe, having no money or being homeless.

Untreated trauma causes many problems in adults. Children who believe they are not worthy of love or affection grow up into adults who still believe that.



The economic burden of trauma is more than \$406 billion annually.

Source: The National Trauma Institute



Trauma is seen in 90 percent of behavioral health clients receiving treatment

Source: The National Council for Community Behavioral Health

"With adults there might be an expected loss or the end of a job, then all the old losses or trauma comes up," Mayeda said. "If there are symptoms like PTSD, anxiety or a psychotic episode, there is almost always a precipitating event."

Older adults often feel they should be able to accept change. For example, many believe retirement should be something to look forward to, a new chapter, finally time to enjoy family and friends. But, it is also a time when one experiences dramatic life changes — diminished health, loss of a loved one and loss of independence.

"Coping with life changes can be traumatic and lead to depression and isolation especially for older adults who feel hopeless," said Pacific Clinics Corporate Director, Older Adult Services, Donna Benton, PhD. "We teach clients ways to emotionally handle change as it occurs and steps they can take toward a renewed joy in life."

Benton has spent her career serving older adults and their families. Prior to joining Pacific Clinics staff, she was the director of the Family Caregiver Support Program at the University of Southern California's Gerontology Department. For 13 years before that, Benton was the director of the Los Angeles Caregiver Resource Center.

Therapists are also very sensitive to the cultural needs of the clients. Southern California's ethnic diversity has led Pacific Clinics to develop culturally appropriate client and family services. Specialized programs offer behavioral health services by an ethnically diverse staff.

"Emotional instability and mental illness is taboo within Asian cultures. It is seen as bringing shame to a family if someone seeks professional mental health treatment," explained Mengshen Peng, LCSW, Pacific Clinics Asian Pacific Family Center. "They equate emotional pain as physical pain so go to their doctor for help."

This belief is shared within the Latino and Armenian culture as well — two populations served by Pacific Clinics.

Client Diane Ross said she knows about the cultural stigma of mental health firsthand. She grew up in what she called a "classically American dysfunctional" family. To Ross this

means spousal and child abuse, drugs in the home and step parents. At 14, her mother and step father both died.

"I just unraveled and that was the first time I tried to hurt myself," said Ross, who is now getting treatment for depression and suicidal tendencies at Passageways Multiservice Center.

Growing up in an African-American home she said no one ever thought to seek treatment.

"In my culture seeking help is not something we did,' she said. "It's something other people had to do."

Education, religious belief and life experience are all taken into account to develop a personal treatment plan for each client.

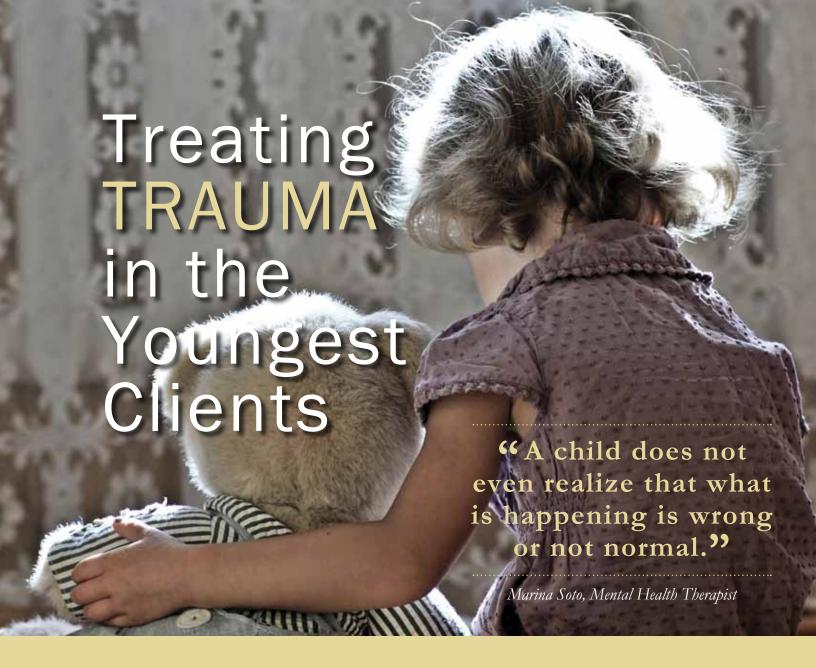
Pacific Clinics recognizes that the devastating effects of long term trauma contribute to a client's physical health as well.

"Our Integrated Health Services enables us to treat our clients' emotional and physical health care needs simultaneously," said Pacific Clinics President and CEO Susan Mandel, PhD. "Many of our clients carry inside the pain of unspeakable trauma. They have experienced or witnessed horrific violence perpetrated by the very people whom they loved and trusted. On top of that, they are struggling to overcome substance abuse and mental illness. We are here to help them learn to trust again so that they can move forward on their recovery goals."

Trauma Informed Care will enhance the way Pacific Clinics treats trauma victims

This past year, Pacific Clinics Child and Family Specialty Services Division participated in a pilot study of Trauma Informed Care (TIC) sponsored by the National Council for Behavioral Healthcare.

A Core Implementation Team is developing age-specific trauma handouts and one-hour, half-day and full-day training modules on Trauma Informed Care to be offered by Pacific Clinics Training Institute.



A brother and sister came to Marina Soto's office. They had been physically abused and removed from their home. They had witnessed drug abuse and violence. They did not understand why they could not be with their mother. They did not want to talk and did not know what happened to them was not normal. These are the stories that therapist Marina Soto, Mental Health Therapist, hears every day counseling children who are in the foster care system.

Eighty to 90 percent of the children who come to the children's program suffer from trauma. Many have Post Traumatic Stress Disorder (PTSD) and all, Soto said, will have lifelong consequences from it. Early intervention is key, so programs at Pacific Clinics are designed to help even the youngest client.

"In my opinion, trauma does the most damage to the younger children," Soto said. "When you are older you have more resources to fight what is going on, but a child does not have that. They do not even realize that what is happening is wrong or not normal."

Trauma in children can come in many forms: physical, verbal or sexual abuse, neglect, removal from the home, growing up in a violent area or witnessing a violent act. When children are exposed to trauma the fear is carried with them.

"When children experience PTSD it never goes away," Soto said. "It's a big giant that is always there waiting to come out and start again. When a child is abused their core is broken.

"The treatment goal is not only for us to help the child, but for the parent or caregiver to be able to help the child." ~ Esther Chon, PhD

The center of the child is shattered to pieces and we have to reconstruct that through the healing process."

Children with trauma often are depressed, anxious, have poor self-esteem, have developmental delays and do not socialize well. This can be seen in even the youngest clients.

"Mostly the trauma I see in children is neglect," said Esther Chon, PhD, a mental health therapist who specializes in children birth to five years old. "For children, this can really be a huge issue. Sometimes it is the parent who is traumatized, but the child suffers because the adult is not treated."

Diagnosing a child who can barely talk is challenging so Chon looks at how the child plays. A child with trauma will act out injury or aggression repetitively, and then reject help by the therapist. When a child is neglected they will have developmental delays, so a 2-year-old might play like a six-month-old. In infants, Chon looks for rigid arms or legs, or if the child is weak.

"In infants there will be a lot of inconsolable crying and pediatricians will think the kid is colicky," she said. "For children with trauma a huge problem is misdiagnosis. The symptoms of trauma look like autism or Attention Deficit Hyperactivity Disorder (ADHD)."

All the Pacific Clinics children's programs utilize Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). This evidence-based intervention integrates cognitive and behavioral therapies focusing on trust and empowerment.

A large part in therapy for children is including the caregiver. For older children caregivers are given the tools for helping children through difficult times and for younger children the caregivers use play to help.

"The treatment goal is not only for us to help the child, but for the parent or caregiver to be able to help the child," Chon said.

A 4-year-old boy was seen in Chon's office after his father sexually abused his sibling. He would often play out a situation where his father hurt his sister. His mother denied that anything had happened. He came to therapy with his aunt, but would cling to her. After receiving her own treatment, the mother came to therapy too and after seeing her son acting out the abuse was shocked. She initially would tell her son that it was not a "nice way" to play, but learned that this was her son's way of processing trauma. After a year he was freely telling mom what he was feeling. His mother learned to be acknowledging and validating.

"In the end, is there success? PTSD is something the children will have to manage their whole lives," said Soto. "The severe cases are a challenge. I will do everything in my power to help them come out of their suffering. To open a window to a different world. What happened in the past happened, but there are good people who want to help them."

SICH When Name-Calling Mental Health Color of the Color

"Bullying is not a conflict it is an abuse," said Pacific Clinics Program Director, Maribel Contreras, PsyD, MFT. Contreras teaches a course about bullying for clinicians at Pacific Clinics Training Institute.

More than 160,000 students stay home from school every day because of fear of getting bullied.

Children at the highest risk are those with a different sexual orientation. Other likely targets are children with disabilities, a mental illness and those who lack strong social skills and won't fight back.

"Long-term bullying can lead to post traumatic stress disorder, anxiety, eating and sleeping disorders, and depression," said Contreras.

Many of Pacific Clinics clients have been victims of bullies. "What is very important to understand is that a bully was a victim in the past, said Pacific Clinics Corporate Director, Prevention and Early Intervention Services, C. Rocco Cheng, PhD.

"Whether the child is a bully or a victim, unless we can change their behavior it will have long-term consequences," he said.

Bullying: From Awareness to Action is the topic of Pacific Clinics' 23rd Annual MILES (Mental Illness and Law Enforcement Systems) Conference to be held in October.



The MILES (Mental Illness and Law Enforcement Systems) coalition, a partnership of Pacific Clinics, the San Gabriel Police Chiefs' Association and the Los Angeles County Sheriff's Department, has worked together since 1991. The annual MILES Conference, hosted by Pacific Clinics, addresses a variety of topics to expand mental health and law enforcement professionals' understanding of the complexities of working with people with mental illness.

A Mother and Daughter are Inseparable, Even When Things Get Bad

Standing on the blacktop, Pamela listened as her daughter's teacher told her that homework assignments had gone undone. Her daughter, 11-year-old Belinda, listened growing more and more agitated. Denying that there was anything wrong, Belinda started yelling and ran into the street. She "went berserk," Pamela said. Pamela convinced her daughter to walk to an office to drop off some paperwork, but the minute her back was turned Belinda disappeared.

"It scared the heck out of me," Pamela said. "She was just gone."

Friends, the office workers and Pamela searched. Belinda finally made her way to the group home the family was living in about a mile away. When asked why she left, Belinda shrugged but her eyes fill with tears.

The day was a shock, but it wasn't the beginning of their problems. Belinda had been acting up for a long time – refusing to go to school, throwing violent fits, stealing, lying - and Pamela, was herself working on her sobriety and childhood trauma. Pamela, already a Pacific Clinics patient, asked if Belinda could get help. She started therapy a year ago.

Sitting in a conference room the pair communicates like a typical mother and daughter. Pamela is a well-spoken woman and Belinda, with newly died purple hair, is a tween who would rather play her video games on an old phone than talk.

"Belinda is creative and independent; She's a real trooper," Pamela said. "But we had to get help. I couldn't keep my sanity and keep clean and sober. It was beyond me to help her."



Pamela's father was verbally and physically abusive, and her parents divorced when she was young. She started using drugs.

"I feel like I was an addict from my first drink, my first hit," said Pamela. "I'm still a work in progress. The trauma was set in deep."

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"We try and practice ways of living, ways of thinking, ways of solving problems." ~Pamela

Pamela never addressed the abuse she endured as a child or sought help for her drug abuse. She married and had four daughters. Belinda is the youngest. The parents' relationship was volatile with fighting and yelling. Both abused drugs.

Pamela split with her husband but was still abusing drugs. The family bounced from house to house. It was difficult on her youngest daughter. She has attended many schools. Many of the homes weren't in the "best places."

"Once I was out of my marriage I really had to look at myself," Pamela said. "I had to look at helping myself."

Pamela decided to get sober. She entered treatment and spent time at Casa Maria, a transitional housing program for homeless women operated by URDC Human Services Corporation. While the time in rehab was important to Pamela, Belinda was stressed and didn't like the uncertainty. She never talked about her mother's substance abuse and she never saw her father.



"Belinda was always traveling the road with me, even when things were really, really bad," Pamela said. "She never learned to cope with how she felt. She didn't know any better."

The mother and daughter go to therapy together and separately. Belinda said she has learned tips on how to handle anger and what to do when she feels out of control. She said it is good to have someone to talk to. Pamela is also working to help Belinda when things are stressful.

"We are going through this together," Pamela said. "We try and practice ways of living, ways of thinking, ways of solving problems."

Belinda talked about what she likes — comic books, baseball, music — and the middle school she hopes to attend with school friends. Her mother reminds her that their housing situation is still up in the air and that she may not attend that school. Belinda's face turns to disappointment tinged with anger.

"She knows," Pamela said. "It's difficult, but she knows."



Pacific Clinics Awarded the Partner of the Year Award from the Foothill Workforce Investment Board

Pacific Clinics was presented with the Partner of the Year Award from the Foothill Workforce Investment Board for its trainings offered by Pacific Clinics Training Institute and Pacific Clinics Wellness Works programs to young people seeking jobs and unemployed/underemployed veterans.



Barbara Silverman Receives Heart of Social Work Award from USC

Pacific Clinics Clinical Supervisor, Barbara Silverman, LCSW, received the coveted Heart of Social Work Award from the USC School of Social Work for her excellence in field instruction. Many of the interns that have been supervised by Silverman have become staff at Pacific Clinics.

New Family Resource Center Opens in Yucca Valley

Pacific Clinics services in the Morongo Basin in San Bernardino County officially opened a Family Resource Center



last month to give family members of all ages a place to connect with local community resources and obtain assistance with substance use, offer support groups, parent training and education, and counseling for all ages. Pacific Clinics Family Resource Center services are provided in collaboration with the County of San Bernardino Behavioral Health and funded by the Mental Health Services Act (Proposition 63).

Fall 2014 Calendar of Events

Wednesday, October 8

8am - 3:30pm

Best Practices in Our Communities Conference

Hilton Los Angeles/San Gabriel 225 W. Valley Blvd., San Gabriel

Contact: Eva Valdez (626) 254-5063 evaldez@pacificclinics.org

Thursday, October 9

6:30pm - 9pm

Strike Out Stigma

Bowlmoor

3545 E. Foothill Blvd., Pasadena

Fundraiser to heighten awareness about the shame or stigma surrounding mental illness.

Contact: Ivan Rodriguez (626) 254-5076 irodriguez@pacificclinics.org

Saturday, October 11 NAMI Walks 2014

Pacific Clinics' teams join with thousands of advocates to support NAMI's ongoing mental health awareness efforts.

Grand Park

200 N. Grand Avenue in downtown Los Angeles

Contact: Ena Volic (626) 254-5000 evolic@pacificclinics.org

Wednesday, October 14

10am - 2pm

Annual Passageways Homeless Connect Day Resource Fair

Over 60 social service agencies offer free tests and linkage to community resources.

Salvation Army 180 N. Mentor, Pasadena

Contact: Peggy Baddin (626) 403-4888 evolic@pacificclinics.org

Tuesday, Oct 21

8am - 12pm

23rd Annual MILES Conference -"Bullying: From Awareness to Action"

Educational conference for law enforcement and mental health professionals.

Hilton Los Angeles/ San Gabriel 225 W. Valley Blvd., San Gabriel

Contact: Lindy Russell (626) 254-5023 Irussell@pacificclinics.org



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Pacific Clinics, a non-profit agency, has been providing mental health care and substance abuse services to individuals and families since 1926. Today the agency has 81 locations in Los Angeles, Orange, San Bernardino, Riverside and Ventura counties, and serves children, adults, older adults and families.