

Trauma-Informed Care

Many pregnant women with opioid use disorder (OUD) have experienced significant traumatic events, adversity, and toxic stress in their lives, including sexual abuse and other Adverse Childhood Experiences (ACEs). Trauma refers to intense and overwhelming experiences that involve serious loss, threat, or harm to a person's physical and/or emotional well-being. These experiences may occur at any time in a person's life; they may involve a single traumatic event or may be repeated over many years. These traumatic experiences often overwhelm a person's coping capacity. In many cases, prescription and/or illicit opioid use begins as a coping mechanism to manage the symptoms of post-traumatic stress disorder (PTSD).

Trauma-Informed Care acknowledges a patient's life experiences as key to improving engagement and outcomes while lowering unnecessary utilization. It changes the paradigm from one that asks, "What's wrong with you?" to one that asks, "What has happened to you?" Just as with "universal precautions" for infection control, Trauma-Informed Care necessarily assumes that every patient, and indeed every provider or staff person, has a history of traumatic stress.

Step 1: Implement Trauma-Informed Care to Optimize Patient Engagement (adapted from [CMQCC Toolkit](#))

- **Step 1a: Review [SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach](#)**, which offers first steps to organizational assessment and development around the Trauma-Informed Care model of care. Identify how this model of care can be integrated into your current care model.
- **Step 1b: Create a comprehensive organizational structure**, whereby the entire workforce operates under a Trauma-Informed Care model, such as [The San Francisco Department of Public Health Workforce Training Model and The Sanctuary Model](#)
- **Step 1c: Start to adopt new organizational and clinical practices** that address the impact of trauma on patients and staff, including but not limited to:
 - Engage patients in organizational planning and shared decision making about treatments
 - Train both clinical and non-clinical staff in trauma-specific approaches and build a trauma-informed workforce
 - Create a safe physical and emotional environment
 - Prevent secondary traumatic stress in staff
 - Engage referral sources and partner organizations that are also trauma-informed

Additional Resources:

- [The Trauma-Informed Care Implementation Resource Center](#) offers a one-stop information hub for health care providers interested in implementing Trauma-Informed Care.
- [Substance Abuse and Mental Health Services Administration. Trauma-Informed Care in Behavioral Health Services. Treatment Improvement Protocol \(TIP\) Series 57. HHS Publication No.](#)

[\(SMA\) 13-4801. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.](#)

- [Institute of Trauma and Trauma-Informed Care. Trauma-Informed Organizational Change Manual. Buffalo Center for Social Research. University at Buffalo, 2019.](#)
- [A Collaborative Approach to the Treatment of Pregnant Women with Opioid Use Disorders. SAMHSA.](#)
- S.E.L.F.: A Trauma-Informed Psychoeducational Group Curriculum. The Sanctuary Model.

