

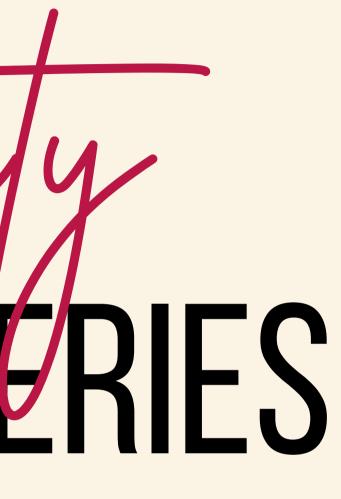
#### **Obesity Tramua Series**

Chikeitha Owens LPC, CBC September 20-22 12pm-1pm EST

www.dfwwaitloss.com

# **DAY 2** TRAUMA SERIES

#### BY CHIKEITHA OWENS LPC CBC, CCTP







# PURPOSE

The role of a Dietitian is very important in the life of Bariatric patients. This makes you an ideal audience training which for this Obesity and Trauma Series and hopefully will ultimately improve patient care relationships and overall health outcomes with your patients.

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# **BRIEF SUMMARY**

- Understand Trauma
- Understand how Trauma plays a major role in obesity
- Raise the Level of Compassion and Emotional awareness
- Gain Tips to help with Initial Consultation
- How to create a Safe Space and build rapport
- How to be more non-judgmental and be a better support to their patients
- Understand the Emotional Power of Language
- Understand the Emotional Power of Food

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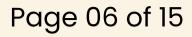
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# STORY TIME



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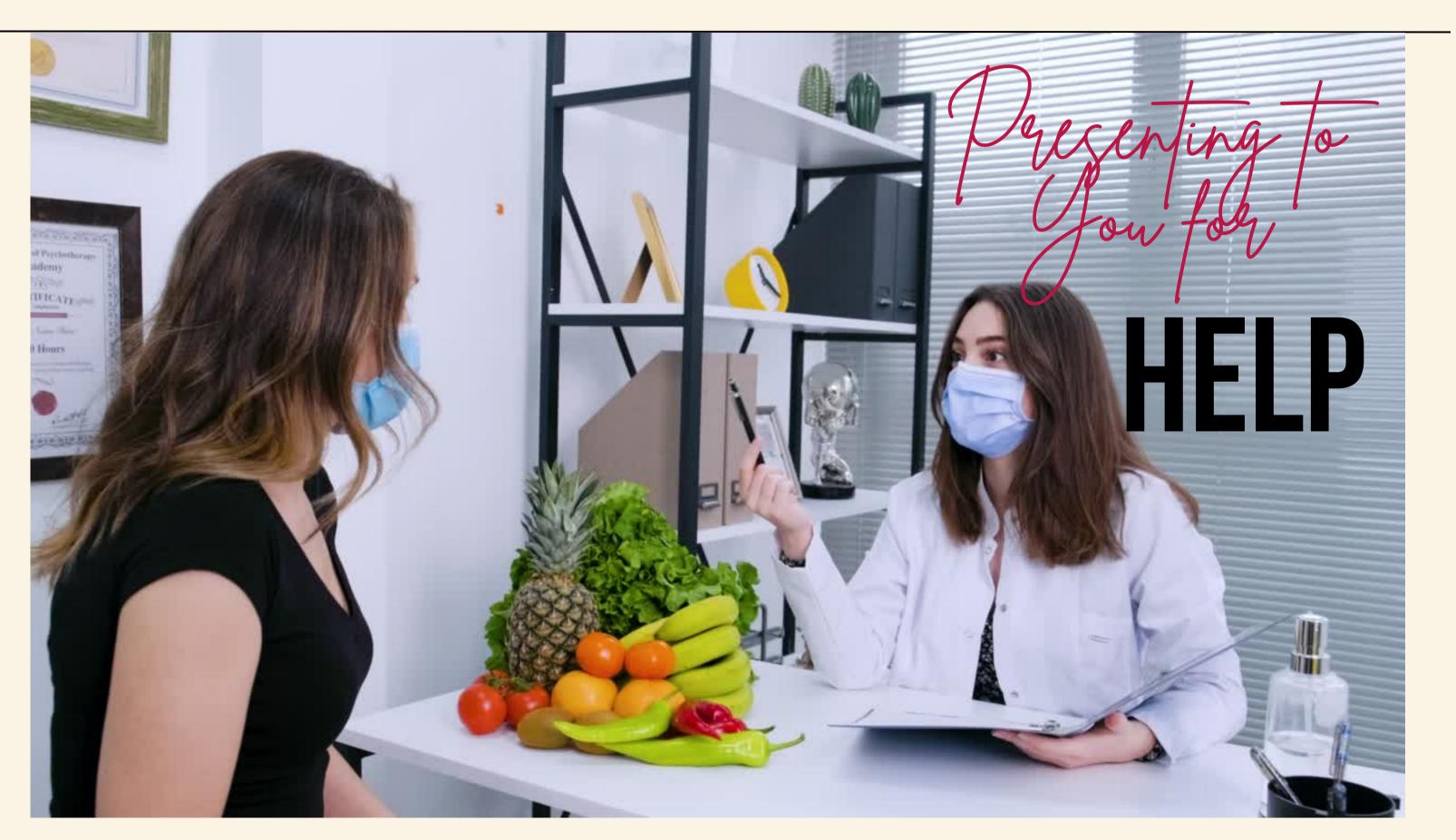
## ACES ARE NOT ONLY ABOUT KIDS?



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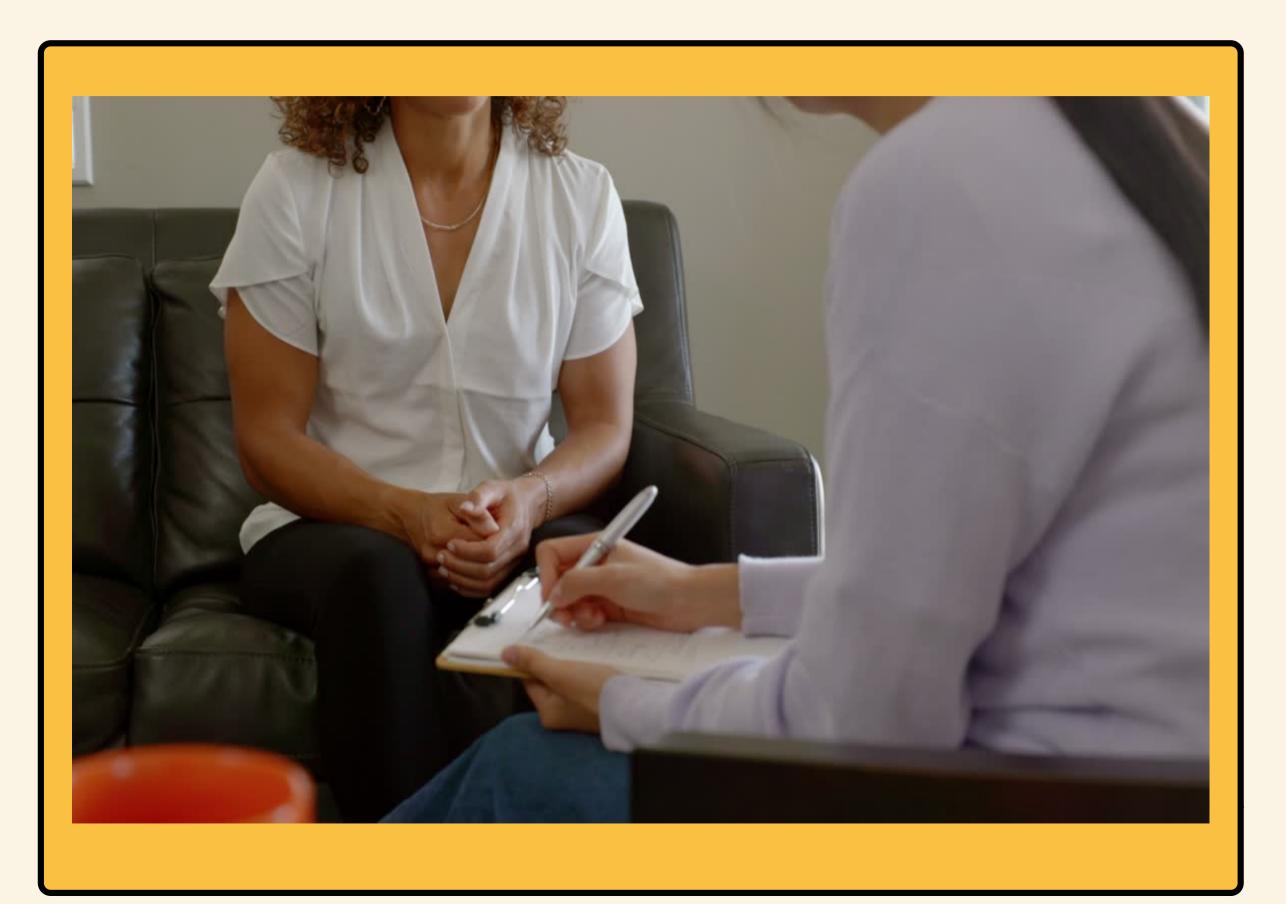
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## Consent Forms



## Introduction







#### Include the ACE Assessment in Your Initial Assessment



#### Adverse Childhood Experience (ACE) Questionnaire Finding your ACE Score maker 10 24 06

While you were growing up, during your first 18 years of life:

 Did a parent or other adult in the household 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? Yes No If yes enter 1

2. Did a parent or other adult in the household **often** ... Push, grab, slap, or throw something at you? or Ever hit you so hard that you had marks or were injured? Yes No If yes enter 1 \_\_\_\_\_\_

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
or
Try to or actually have oral, anal, or vaginal sex with you?
Yes No
If yes enter 1

4. Did you 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?

If yes enter 1 Yes No 5. Did you 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? Yes. No. If yes enter 1

If yes enter 1

If yes enter 1

If yes enter 1

6. Were your parents **ever** separated or divorced? Yes No

7. Was your mother or stepmother: Often pushed, grabbed, slapped, or had something thrown at her?

or Sometimes or often kicked, bitten, hit with a fist, or hit with something hard? or Ever repeatedly hit over at least a few minutes or threatened with a gun or knife? Yes No If yes enter 1

8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs? Yes No If yes enter 1

9. Was a household member depressed or mentally ill or did a household member attempt suicide? Yes No If yes enter 1

10. Did a household member go to prison?

Now add up your "Yes" answers: \_\_\_\_\_ This is your ACE Score





#### **TRAUMA INFORMED PRACTICES** THE CORE TRAUMA-INFORMED PRINCIPLES ARE:

- Acknowledgement recognizing that trauma is pervasive
- Safety
- **Trust**
- Choice and control
- Compassion
- Collaboration
- Strengths-based

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#### **TRAUMA INFORMED PRACTICES** THE CORE TRAUMA-INFORMED PRINCIPLES ARE:

Build relationships based on respect, trust and safety

Use a strengths-based perspective. (Cognitive Behavior Therapy Techniques)

Frame questions and statements with empathy, being careful not to be judgmental.

#### Build relationships based on respect, trust and safety



#### TRAUMA INFORMED PRACTICES The core trauma-informed principles are:

Help the client regulate difficult emotions before focusing on recovery. (CBT)

Frame the client's coping behaviors as ways to survive, and explore alternative ways to cope as part of the recovery process. Respond to disclosure with belief and validation that will inform practical issues related to care (Havig, 2008).



Acknowledge that what happened to the client was bad, but that the client is not a bad person.

Provide an appropriate and knowledgeable response to the client that addresses any concerns they may have about the services offered to them

Recognize that the client had no control over what happened to them.

Watch for and try to reduce triggers and trauma reactions

## **VIEWING TRAUMA AS AN INJURY SHIFTS THE CONVERSATION FROM ASKING**

### **"WHAT IS WRONG WITH YOU?"** ΤΠ **"WHAT HAS HAPPENED TO YOU?"**



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## **TRAUMA INFORMED PRACTICES**

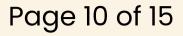
#### **CREATE A SAFE SPACE**

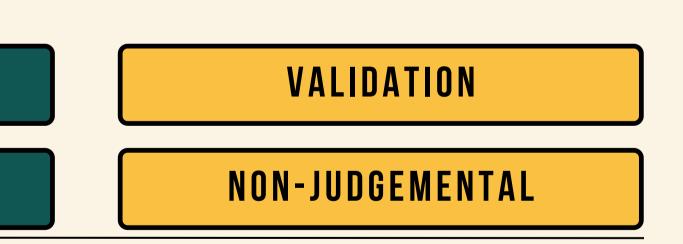
**BUILD RAPPORT** 

SHOW COMPASSION

SHOW UNDERSTANDING

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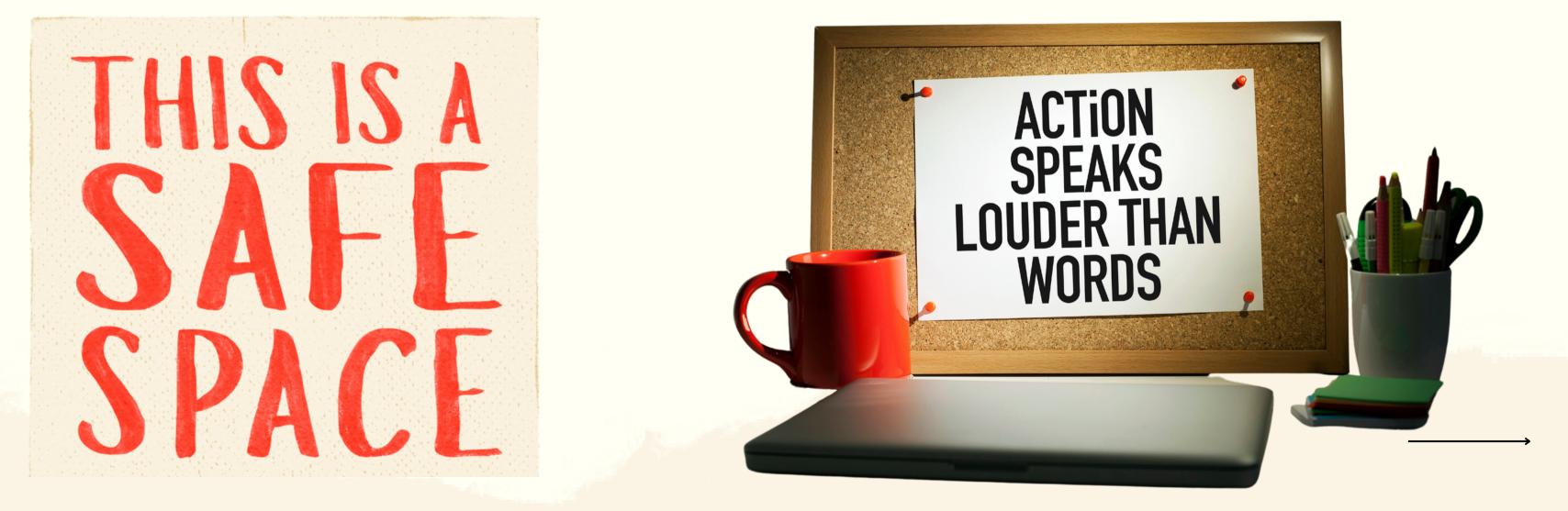
#### **INCLUDE THEM IN TREATMENT PLANNING**

**HELPS WITH GOAL SETTING** 

**REVIEW RESULTS FROM ACES AND SEE HOW IT MAY CORRELATE WITH THEIR RELATIONSHIP WITH FOOD** 

# TIPS

#### SET THE EXPECTATION FOR THE PROGRAM



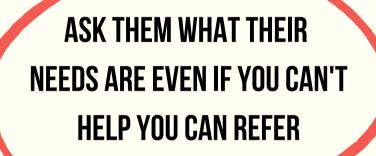
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#### **INCLUDE THEM IN TREATMENT PLANNING**

# TIPS

#### SET THE EXPECTATION FOR THE PROGRAM



**GIVE THEM CHOICES** 

REVIEW RESULTS FROM ACES AND SEE HOW IT MAY CORRELATE WITH THEIR RELATIONSHIP WITH FOOD

TALK ABOUT WHAT'S WORKING

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#### INCLUDE THEM IN TREATMENT PLANNING

#### **GAUGE AND INCREASE SESSIONS**

#### **IF NECESSARY**

# A TOOL YOU CAN USE



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# AGREE DISAGREE Contraction of the cont





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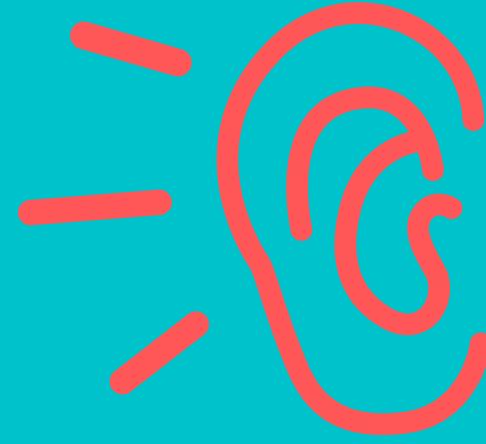
# Validating Feelings Does not mean you are validating Behavior.



# Parroting Repeating what your patient is saying.



## Reflective Listening Paraphrasing what your patient is saying.



### **Additional Tips**

Have an Agenda for each appointment with 2-3 items to COVER

Explore emotions when discussing difficult topics

Encourage honesty about discussing difficult topics Past relationships with other health professionals Review Previous Session

#### Spiritual/Cultural

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