

Good morning. I am Nicole Powasnick and I am the Chief Nursing Officer for the Barnabas Health Behavioral Health Center and for RWJBH Inpatient Behavioral Health Service Line. Thank you for the opportunity to speak with you.

The Behavioral Health Center, a leader in Mental Health in NJ, is a free-standing 100 bed acute-care psychiatric hospital, located in Toms River. We care for individuals 18 and older who have a mental health condition as their primary diagnosis. Our three units care for special populations as well- those with serious mental illnesses (such as schizophrenia), those with dual diagnosis (a mental health diagnosis and substance use disorder) and those who are in the later age of life. We also have Stepping Stones, our intensive outpatient program for those individuals who require treatment 3- 5 days per week. Sessions consist of group therapy as well as individual meetings with the Advanced Practice Nurse for medication management and with the therapist. RWJBH has psychiatric services throughout the State, inpatient, outpatient, and crisis management for children as well as adults.

We believe that our services must not only help individuals to adapt to current challenges, but help them thrive and maintain good health in the long-term. We acknowledge that the people who suffer from mental health concerns are our parents, our children, our friends, and/or our neighbors. It is impossible not to know someone. We also believe that everyone who suffers from mental health concerns deserves kindness, respect, and care. We've discovered that many individuals with mental health concerns also suffer from trauma. With that in mind, we engaged with the Trauma Stress Institute to learn about trauma and its affects and to develop a trauma-informed approach to caring for our patients. Every single team member from housekeeping to our providers receive training on trauma.

Trauma, defined by SAMHSA (Substance Abuse and Mental Health Services Administration) results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being. Trauma can include a variety of experiences, broken down into three main categories: Abuse (which includes emotional, sexual, physical, domestic, and witnessing violence), Loss (which includes sudden death of a loved one or parent, abandonment, separation,

natural disasters), and Chronic Stressors (poverty, family member with mental illness or substance use disorder, racism).

The impact of trauma on the individual is far-reaching: emotional concerns such as difficulty regulating emotions, depression, anxiety, mood swings, and PTSD, behavioral concerns like substance use disorder, self-destructive, reckless behaviors, physical symptoms from the emotional distress such as headaches and fatigue, interpersonal concerns like withdrawal from family and friends and difficulty trusting others and developmental concerns in children who have experienced trauma, whereby there are physical changes in brain development.

I want to spend a moment discussing trauma and its prevalence in children. 3 million children are maltreated or neglected each year; 3.5-10 million children witness violence against their mother each year. 1 in 4 girls and 1 in 6 boys are sexually assaulted before adulthood, and 94% of children in a study of juvenile justice settings have experienced trauma. Additionally, patients with a history of childhood abuse have more frequent and longer mental health admissions, more time seclusion or restraint, a greater likelihood of self-injury or suicide attempt, more medication use, and more severe symptoms.

In terms of substance use disorder, up to 65% of patients in substance use treatment reported a history of child abuse. Over 92% of homeless mothers have severe trauma histories. They have twice the rate of drug and alcohol dependence as those without. And almost 1/3 of all veterans seeking treatment for a substance use disorder have PTSD. And so, mental health, trauma, and substance use disorder can all be interconnected. Additionally, many social determinants of health, such as housing, greatly impact a person's ability to manage these conditions. Homelessness is associated with a higher prevalence of mental and substance use disorders when compared to stably housed individuals.

Our trauma-informed approach to care begins with understanding the widespread impact of trauma and potential paths to recovery and an awareness that the behaviors patients present with are not "problems", they are adaptations the person has learned over time to get their needs met. We recognize signs and symptoms of trauma and we respond by integrating our knowledge about trauma into our policies and practices. We actively resist re-traumatization in every interaction. We seek to build relationships with our patients through safety,

trustworthiness, transparency, collaboration, and empowerment. To shift the paradigm from what's wrong with you to what happened to you. That in turn shifts the message from you are broken to you are a survivor, you are strong. We believe this approach leads to better outcomes for our patients such as decreased emotional reactions, decreased crises, an enhanced sense of safety, and greater collaboration.