

Healthcare Considerations for Patients with Mental Illness and Trauma Survivors

Information for Healthcare Providers (full text)

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Introduction

Misunderstanding, devaluation, and discrimination in healthcare are common experiences among people with mental illness and trauma survivors. The beliefs and attitudes of healthcare providers influence their decisions regarding care, and their behavior towards their patients influence the patients' responses to evaluation and treatment. The pervasive stigma, rejection, and discrimination experienced by those with mental illness in all arenas of their lives might cause more harm and disability than the illnesses themselves, and certainly hinder recovery.

Trauma survivors have specific needs in healthcare since their adverse experiences often affect their responses to both the care and the care providers. The first step towards reducing these problems is healthcare provider education. This short booklet provides important, basic information that all healthcare providers need in their work with patients with mental illness and trauma survivors.

*“Mental illness is nothing to be ashamed of,
but stigma and bias shame us all.”
Bill Clinton*

General

Healthcare providers exert a tremendous influence on their patients, and their behavior towards their patients can greatly impact the success of treatment. This is particularly an issue with patients who experience mental illness, something that affects a large portion of our society yet is terribly misunderstood. Mental illnesses are disorders that affect the brain just as other disorders affect other parts of the body; those who experience such illnesses should be treated no differently. Providers must be aware of the following:

- You are a critical advocate for the proper care of all of your patients.
- Incredible progress has been made in the treatment of mental illness, yet a large percentage of patients have limited or no access to quality care. Given appropriate healthcare, both mental and physical, individuals with mental disorders are just as capable, worthy, and valuable as any others in the general population with the same spectrum of abilities.
- Rampant mental illness discrimination in healthcare, social services systems, and employment settings, in addition to widespread stereotyping and rejection in all parts of society, might cause at least as much impairment as the disorders themselves and greatly hinder recovery. People with mental disorders have made less progress in achieving acceptance in this society than any other diverse group. Appropriate care, support, and acceptance would allow those with mental disorders to achieve greater recovery and higher levels of functioning than current perceptions and practices promote, which would create great strides towards resolving major healthcare and human resources problems in this nation.
- The first steps are to provide patients with a reasonable level of respect as capable individuals, accept that they know their own minds and

bodies, take the time to listen non-judgmentally, and establish a collaborative relationship in achieving and maintaining good health. All patients deserve this basic understanding, acceptance, and expectation of personal competence regardless of any form of illness, diversity, or disadvantage.

- Severe mental illness can reduce judgment and impair self-understanding and decision making; however, that level of impairment is rare. For patients with mental illness who are not dependents, either as minors or as adults under conservatorship, the understanding and expectation must be that they are fully capable of complete independence, accurately understanding themselves and their needs, and responsibly managing their own lives, including their healthcare.
- Stress, psychological or otherwise, weakens the body and leaves it susceptible to a wide variety of illnesses. These illnesses are no less real than if they were caused by anything else nor are the patients any less worthy of proper evaluation and treatment. If left without care, they can result in far more serious problems. If someone has high blood pressure or enters the emergency room with a stress-induced heart attack, you would not tell the patient it is just stress and send him or her home without proper care. Effective identification and treatment before such conditions reach a dangerous level save lives as well as time and expense.
- Only a small percentage of individuals with mental disorders somaticize beyond common stress-induced ailments, and even somatic complaints need appropriate care if for no other reason than if left unattended they can lead to more serious problems requiring extensive intervention. Regardless, such complaints are very real to the person experiencing them and merit due care.
- No one with mental illness is immune from physical disorders; therefore, even those who seem to demonstrate symptoms or have complaints without physiological cause must be evaluated thoroughly and all possible causes ruled out.
- A recurring pattern of confirmed psychosomatic ailments suggests significant, unresolved psychological turmoil, possibly an adaptive

coping mechanism in the face or aftermath of severe trauma, that requires appropriate mental health evaluation and treatment.

- In mental health care, individuals who seem to try to create false problems or illnesses for themselves still need intervention, including an appropriate evaluation of their complaints and attention to the needs that are leading them to call for help in this manner, rather than being dismissed. It is a call for help that cannot be ignored. This is an imperative part of treatment if they are to recover, and they might actually have a legitimate concern that should not be overlooked.
- Mental health and physical health are intertwined and inseparable. Communication and collaboration among all healthcare providers serving a common patient are important, with sensitivity to the patient's rights regarding confidentiality. Each provider may have his or her own specialization, but the efficacy of each emphasis of treatment is dependent on the effectiveness of all others and requires integrated care. No function of the body or mind works in isolation.
- Appropriate standard of care in any healthcare setting involves searching beyond your knowledge base and service limits by facilitating appropriate care through consultation and referral when a patient presents with a problem that you cannot identify or treat. That patient needs your help and it is your responsibility as a healthcare provider to ensure proper care.

*“Empathy means realizing no trauma has discrete edges. Trauma bleeds.”
Leslie Jamison, The Empathy Exams: Essays*

The Special Needs of Trauma Survivors

A large percentage of your patients have experienced significant psychological trauma. Trauma occurs in many forms, and it is part of the human experience that we all share. The experience of psychological trauma in any form can cause mental and behavioral health problems that trigger negative reactions, devaluation, and rejection from those they turn to for support and care. Interpersonal trauma and violence in particular often create serious impairments in how the survivors relate to, interact with, and respond to others, including those who are in a helping or care-giving role. Trauma-informed mental healthcare and sensitivity to the special needs of trauma survivors in all healthcare settings are critical for these patients' health and wellbeing.

Childhood trauma, especially abuse and neglect, is a pervasive problem at all levels of society that is now possibly the number one healthcare crisis in this nation. Child maltreatment alone may affect as many as one-third of our children and adolescents, not counting experiences of psychological abuse alone, with up to three million new cases reported or confirmed each year in the United States. The lifelong effects of such trauma are devastating to the individuals and those they influence, and incur incredible costs to society in healthcare, social support services, unemployment and under-employment, criminal behavior and corrections, violence, and reduced or impaired human resource capabilities and productivity in the workforce. Without proper care, such trauma can result in increased susceptibility to illness and serious health problems throughout life that may even lead to early death, assuming they survive the childhood experiences in the first place.

Child maltreatment, exposure to serious violence, or physical or sexual assault at any age can alter the survivor's responses to common practices in healthcare and the effects need to be monitored and addressed. Effective

care and recovery for both physiological and mental health conditions require attention and sensitivity to the following issues:

- Child victims of abuse or neglect often receive rejection or punitive or abusive responses from their caregivers when attempting to ask for help or communicate their needs, and many learn that they cannot trust those who are charged with their care to meet their basic needs. This can lead to significant difficulty in asking for and accepting help at any age, in addition to impaired ability to communicate their concerns or needs. They also may downplay their symptoms or level of distress or experience reduced awareness of their own symptoms or internal states and processes (physical and mental) since they had been forced to stifle them as children, which can result in inadequate care. Others may exaggerate their complaints since they were never heard as children. A relationship of compassion and respect along with attentive listening and sensitive exploration of their concerns and symptoms are critical.
- Abuse and assault can create undue defensiveness, heightened sensitivity, or fear reactions to physical contact or evaluation and treatment of parts of the body and conditions involving elimination and sexual/reproductive functions. Increasing the patient's comfort level by demonstrating warmth and caring and maintaining awareness and responsiveness to signs of discomfort or distress are imperative. The minds and bodies of victims of child abuse were violated by those they depended on for care and protection and these experiences are often carried into their adult lives. This affects their responses to both the care and the care providers in healthcare settings.
- Chronic trauma results in ongoing high stress levels that can weaken the body and even damage the brain. This can leave the survivor susceptible to both physical and mental illnesses and can also result in learning, verbal, cognitive, behavior, executive function, and emotional regulation problems. These problems are very real and should be looked for and given proper evaluation and care without judgment. This susceptibility can last the lifetime and might not manifest until long after the trauma is resolved.

- Awareness of the ongoing health risks and effects of trauma is important. Attention to survivors' lifestyle habits that can affect their health, such as drug or alcohol abuse, involvement in unhealthy or abusive relationships, unhealthy sexual behaviors, or inadequate or harmful self-care (e.g., practices involving nutrition, hygiene, medical or dental care, treatment or medication compliance, sanitation, or shelter) is necessary. Increased risk of prescription drug abuse should also be kept in mind.
- As noted earlier, mental and physical health are intertwined and inseparable. Care for both should be provided in collaboration if either is to be successful. Many trauma survivors and many with mental illnesses are reluctant to seek necessary mental health care due to shame, fear, or avoidance, do not know how to go about doing so, or have limited resources in acquiring such care. Sensitive patient education and support, including guidance and referral, are often needed.
- Any patient of any age who reports or demonstrates signs of assault, abuse, neglect, or suicidal ideation needs immediate referral for assessment and intervention, with emergency services provided if the patient is in imminent danger. If the patient is a child or adolescent, any reasonable suspicion of maltreatment by a caregiver or of danger to self or others must be reported to the appropriate child protective agency or law enforcement. If you are unsure if a referral or report is necessary or appropriate call the protective agency and let the staff there make that decision; document the contact and response, including any declination. That is their job, and you do not want to end up responsible if something goes wrong.

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