

## Treating Complex Trauma in the COVID-19 Era

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1

## Disclosure

I, Julian D. Ford, am a  
Consultant to Advanced Trauma  
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2

## Overview

- Understanding the impact of the pandemic on people with complex trauma histories
- Adapting complex trauma treatment to meet pandemic-related challenges
- Therapeutic Psychological First Aid – 3 Basic Principles and 7 Essential Elements
- Impact of the pandemic on a high risk group: front-line healthcare workers: Interviews with front-line workers
- Recognizing and managing secondary traumatic stress

3

## Learning Objectives

- Attendees will be able to--
- 1. Describe 3 ways in which the COVID-19 pandemic exacerbates chronic complex trauma symptoms
- 2. Recognize how the reactions of front-line coronavirus healthcare workers parallel complex trauma symptoms
- 3. Apply the 7 essential elements of Therapeutic Psychological First Aid to intervening to support the resilience and recovery of both traumatized front-line health care workers and ongoing clients with complex trauma symptoms

4

**COVID-19 Pandemic**

**Human Toll (@July 22, 2020)**

**14 million cases**

**13,000 in Australia & New Zealand**

**600,000 deaths**

**140 in Australia & New Zealand**

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5

**COVID-19 Pandemic**

**Economic Toll (@July 10, 2020)**

Coronavirus fallout could take Australian economy decade to recover from, despite 11 billion stimulus through July

Virus following Wildfires and Drought Likely to End 3 Decades of Australian Economic Growth

The borders between Australia's two most populous states - New South Wales and Victoria – closed indefinitely on 7 July for the first time since the Spanish Flu pandemic 100 years ago, after a surge in cases in Melbourne

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6

**Impact of the COVID-19 Pandemic on Clients Recovering from Complex Trauma**

**Heightened Frequency and Intensity of Post-Traumatic**

**Intrusive Re-Experiencing**

**Due to Reminders and Separation/Isolation**

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7

**Impact of the COVID-19 Pandemic on Clients Recovering from Complex Trauma**

**Heightened Frequency and Intensity of Post-Traumatic**

**Hypervigilance and Hyperarousal**

**Due to Reminders and Separation/Isolation**

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8

**Impact of the COVID-19 Pandemic on Clients  
Recovering from Complex Trauma**

**Heightened Frequency and  
Intensity of Post-Traumatic  
Anticipatory/Actual Bereavement  
Due to Reminders and  
Separation/Isolation**

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9

**Impact of the COVID-19 Pandemic on Clients  
Recovering from Complex Trauma**

**Correspondingly Heightened  
Frequency and Intensity of  
Emotional Lability, Numbing,  
Dissociation, and Dysregulation**

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10

**Impact of the COVID-19 Pandemic on Clients  
Recovering from Complex Trauma**

**Inspiring Signs of Resilience  
Courage to Face Trauma Memories  
Renewed Self-Confidence  
Trust in the Therapeutic Relationship**

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11

**Treating Complex  
Traumatic  
Stress Disorders  
in Adults**

**SECOND EDITION**

Scientific Foundations  
and Therapeutic Models  
edited by Julian D. Ford  
and Christine A. Courtois

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12

## Psychological First Aid (PFA) Brief Overview

1. Contact and Engagement
2. Safety and Comfort
3. Stabilization
4. Information Gathering: Current Needs/Concerns
5. Practical Assistance
6. Connection with Social Supports
7. Information on Coping and Links to Resources

13

## Therapeutic Psychological First Aid: **VCR**

**Validate** the worker's perspective + show respect for their dilemmas

**Clarify** the worker's long- and short-term goals based on their core values

**Reframe** highlighting strengths and what they already are accomplishing (**which they often cannot see or minimize**)

14

## 7 Essential Elements of Therapeutic PFA

1. A high impact moment of **stress/challenge**
2. A moment of highest or lowest **emotional intensity**
3. A moment that was **inspiring or poignant**
4. One thing **someone else did that made a difference**
5. One thing **s/he did that made a difference**
6. A **core value** s/he is striving to uphold
7. One thing s/he **chooses to do going forward**

15

## Stressors Facing Front-line Healthcare Responders Caring for COVID-19 Patients

### **WORKPLACE STRESSORS**

"I've seen more death in 2 weeks than my 3 years as a resident"

- ✓ Risk contracting COVID-19 virus from patients/co-workers
- ✓ Inadequate/unhygienic personal protective equipment (PPE)
- ✓ Insufficient staffing of MDs, nurses, respiratory therapists
- ✓ Inadequate/unavailable ventilators and ICU beds
- ✓ Inadequate/unavailable cleaning/disinfectant supplies
- ✓ Insufficient/unavailable vital drugs, medical or testing supplies

16

## Stressors Facing Front-line Healthcare Responders Caring for COVID-19 Patients

### WORKPLACE STRESSORS

“Nurses are working with tears in their eyes and the taste of death in their mouth”

- ✓ Extreme suffering and desperation of patients
- ✓ Inconsolable family members unable to be with loved ones
- ✓ Deaths of patients after days/weeks of heroic efforts
- ✓ Illness and uncertain recovery, or deaths, of co-workers
- ✓ Never getting to know or communicate with dying patients
- ✓ Separation from and fears for the safety of co-workers
- ✓ Moral dilemmas and moral injury re: rationing lifesaving care

Nurses at Jacobi Medical Center in the Bronx gathered to protest a shortage of protective equipment, including N95 masks.



## Stressors Facing Front-line Healthcare Responders Caring for COVID-19 Patients

### HOME FRONT STRESSORS

“My family locked me out of our home, I feel totally isolated”

- ✓ Fear of contaminating children, spouse/partner, parents
- ✓ Forced separation from children/spouse for weeks at a time
- ✓ Inability to be with children/spouse due to work/exhaustion
- ✓ Disconnection from friends and personal support system
- ✓ Unable to eat well, exercise, sleep, maintain normal routines
- ✓ Unable to share in childcare, and guilt for burdening others

## Stressors Facing Front-line Healthcare Responders Caring for COVID-19 Patients

### HOME FRONT STRESSORS

“My family always stays close but now I’m isolated from them”

- ✓ I feel alone when I can’t be together with all of my family
- ✓ I have to pretend that everything is OK so they don’t worry
- ✓ I don’t want to burden my family with my fears and sadness
- ✓ My children and my parents don’t want me to go to work because they think I’ll get sick and die or make them sick
- ✓ I can’t take care of myself because I have to be the one who takes care of my family – so I’m, never off duty

## Stressors Facing Front-line Healthcare Responders Caring for COVID-19 Patients

### HOME FRONT STRESSORS IN THE COMMUNITY

“People accuse me of causing the virus or spreading it to them”

- ✓ I feel like a stranger in my own home neighborhood – I rarely see neighbors, and when I do they tell me I’m a hero but also seem to want to get away from me like I have the plague
- ✓ I’m afraid of being attacked whenever I leave the hospital
- ✓ I have to live in two worlds: my community where I’m with people like me, and my work where I have to try to fit in

21



This is the face of a front line health care worker who just spent 9 hours in personal protective equipment moving critically ill Covid19 patients .

I feel broken - and we are only at the start. I am begging people, please please do social distancing and self isolation #covid19

22

## Complex Trauma and Front-line Healthcare Responders Caring for COVID-19 Patients

Interview with a Front-line Physician – Dr. Steven Novella

<https://youtu.be/zaR6f5tkGeQ> #9:15-10:10; 40:00-43:00

Interview with a Front-line Nurse Practitioner and Skilled Nursing Facility Administrator – Brian Geyser, APRN

<https://youtu.be/gGCzPfVvMN6Q> #2:20-7:05

23

## Stressors Facing Front-line Healthcare Responders Caring for COVID-19 Patients

### Traumatic Impact on Healthcare Responders

More than Anxiety, Depression, or Acute Stress Disorder

**Complex Trauma**

**Complex Bereavement**

**Complex Guilt and Moral Injury**

Traumatic victimization + loss/unavailability of security provided by emotional bonds in primary relationships

24

*Therapeutic Response to Fear of Failure*

“Every patient is another death waiting to happen, and now I’m bringing the virus home to my family. If I get sick, or I make them sick, I’ve failed in my duty, and let my family, my community and my co-workers down.”

Reframe: valuing relationships, courage, compassion, altruism, skill, caution, dedication, perseverance, determination, honesty

25

*Therapeutic Response to Hypervigilance*

“I’m not afraid doing my job, but I can’t relax because I know the time is coming when PPEs will run out and beds and ventilators will be full and we’ll lose patients we could have saved.”

Reframe: altruism, alertness, foresight, awareness, focused, proactive, courageous, determination, dedication, protectiveness

26

*Therapeutic Response to Avoidant Coping* “I never let up or stop doing everything I can for my patients and to cover my team members’ backs. They say I take too many risks and worry too much about them. I don’t let them see when I fall apart when I’m home alone.”

Reframe: dedication, immersion, integrity, self-awareness, titrating the emotion impact, overcoming barriers, self-care and re-setting, being a role model

27

Close the session by **summarizing the re-frames** to highlight what they have learned about themselves that helps them **make sense of the distress** s/he is experiencing as an understandable reaction to significant adversity and shows how they **are (or intend to be) using personal strengths to make a positive contribution** consistent with their core values

28

### Goals for Therapeutic PFA

**Create safety** by listening attentively, nonjudgmentally, and with a focus on core values/strengths

### Goals for Therapeutic PFA

**Create Calm:** the psychological space is calming as a respite for **reflection** and **self-awareness**, rather than **reactivity**

### 6 Goals for Therapeutic PFA

**Create self- and collective efficacy:** listen carefully and genuinely validate what they already are doing to care for and protect others and self

### Goals for Therapeutic PFA

**Create Connection:** the key is empathic listening to understand what they are feeling and thinking that provides a path forward



### Goals for Therapeutic PFA

**Create hope** by helping them to focus on small steps/wins that have large **meaning based on their core values**

33

*DO explain that you'll listen and help the worker sort out their thoughts and feelings however they feel is most helpful*

DON'T offer generic reassurance or coping tactics, false encouragement, false hope, or promises that you cannot fulfill

34

*DO nonjudgmentally acknowledge distress as understandable in the circumstances and relate it to their core values*

DON'T provide simplistic reassurance or advice, or attempt to convince them to feel or think differently

35

*DO creatively build on their strengths, interests, and talents to brainstorm modified or alternative coping tactics*

DON'T teach generic pre-packaged coping tactics that are not tailored to their personality, culture, and preferences

36

*DO identify and reinforce ways they are (or want to) engage in practical self-care, and small steps to doing so including faith practices (e.g., prayer)*

DON'T suggest simplistic "solutions" or coping tactics that are unrealistic or that are not tailored to the individual

*DO make sure they leave the session with at least one thought or tool that provides a sense of a way forward*

DON'T end the session without an integrative conclusion that highlights their accomplishment(s) in the session

### Take Home Message

Each session is an opportunity to help your client to recognize and reaffirm their core values, to make sense of their distress and confusion, and to receive an authentic message of respect for making the world a better place in this time of crisis.