

## RESOLUTION

Subject: Comprehensive Trauma-Informed Care Practices

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Referred to: Reference Committee

WHEREAS, trauma is a physical or psychological response to a stressful event such as abuse, witnessing of violence, familial instability and incarceration, displacement, familial substance use, over policing of neighborhoods, food insecurity, or racism/discrimination<sup>1-3</sup>; and

WHEREAS trauma-Informed Care (TIC) is a clinical approach that asks patients' 'what happened to you' instead of asking 'what is wrong with you,' and recognizes the presence of trauma symptoms in an individual's life and health<sup>1-3</sup>; and

WHEREAS, TIC helps address the complex combination of social, behavioral, and physical factors affecting patients' well being<sup>4,5</sup>; and

WHEREAS, in 2017 and 2019, it was estimated that 25.8% of Kentucky youth ages 0 to 17 experienced two or more adversities; including witnessing domestic violence, witnessing community violence, living with someone with mental illness, and racial/ethnic discrimination<sup>6,7</sup>; and

WHEREAS, trauma, especially incurred during childhood, can lead to increased risks of health issues such as chronic liver and lung disease as well as a higher likelihood of depression, sexually transmitted diseases, and substance use<sup>7</sup>; and

WHEREAS, many marginalized and minority communities face higher rates of trauma, while healthcare institutions that have gaps in TIC screening and treatment may lead to the re-traumatization of patients and a failure to provide appropriate referrals<sup>5-12</sup>;

WHEREAS, healthcare providers have limited opportunities to receive regular training in TIC<sup>13</sup>; and

WHEREAS, there is limited community-based research on TIC in marginalized populations; therefore, evidence-based interventions have limited generalizability<sup>14,15</sup>; and

WHEREAS, comprehensive TIC for children is financed through sources such as Medicare, Medicaid, commercial insurance, out of pocket payment, state and federal grants, private philanthropy, and military funding<sup>16</sup>; and

WHEREAS, there are a range of billing codes that cover TIC screenings, group sessions, evidence-based treatments, and referrals for children<sup>16</sup>; now, therefore, be it

RESOLVED, that the KMA recognizes trauma-informed care (TIC) as both a preventative and interventional measure that accounts for the trauma experienced by patients and its impact on their

health. Therefore, the KMA acknowledges the need to address the impact of trauma among Kentucky residents; and be it further

RESOLVED, that the KMA supports the use of evidence-based trauma-informed care and safety practices in health care settings; and be it further

RESOLVED, that the KMA supports access to optional evidence-based trauma-informed care (TIC) education for clinical and administrative staff and students as well as opportunities to increase Kentucky focused research on TIC; and be it further

RESOLVED, the KMA supports medical system adjustments and integrations to make it easier to document and code trauma-informed care encounters; and be it further

RESOLVED, the KMA supports Medicaid and Medicare coverage of trauma-informed care practices in adult KY populations in addition to its focus on at-risk youth populations.

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## References:

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