



HARM REDUCTION THERAPY CENTER

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Working with Trauma and Substance Abuse—Part I*

By Jeannie Little, LCSW

Harm reduction therapy, especially in the community drop-in centers where we work with the majority of our clients, demands more from our therapists than any therapist ever imagined. We work with the most complicated people in the United States, in some of the roughest environments. Our clients are poverty-stricken, homeless, and suffer from mental illnesses, social ostracism, and severe medical problems. The therapists dedicated to working with these painful problems go to work every day armed with the belief that even the most hopeless people can change, full of compassion, and determined to work with people who have been relegated to shelters, food lines, and emergency rooms.

The most common characteristic of the people we work with (besides drug use and abuse) is that most have been abused or neglected as children or have been subjected to horrific life experiences as adults. And they live extremely stressful and dangerous lives today.

Most Americans will experience a

traumatic event at some point in our lives, according to Brian Bride, a writer and researcher in the field of trauma, and 8% develop post-traumatic stress disorder (PTSD). For people in mental health treatment programs, almost 95% have experienced trauma and 31 to 42% have symptoms of PTSD.

Reviewing studies of people who abuse drugs and alcohol, Jennifer Plummer, an HRTC therapist, found that teenagers who were abused as children are up to 12 times more likely to have a problem with drugs than those who were not. If they were sexually abused, teenagers are 18-21 times more likely to develop a drug problem. Somewhere between 56% (men) and 90% (women) of adults who abuse drugs and/or alcohol had childhood experiences of abuse.

At HRTC, 100% of our community clients have traumatic histories, and they confront danger every day. Especially in the Tenderloin, life is a war zone.

*This is the first of a 3-part series about HRTC's work with trauma and substance abuse.

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Staff get rejuvenated at the recent staff retreat at Milestones Ranch in Malibu.



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Fundraiser at the Dovre Club a big Success!

On Wednesday, August 3 HRTC held a fun-filled event at the Dovre Club in San Francisco. Thanks to owner Elvis McElhatton, who donated 25% of the proceeds from the club that evening, and to board member Cynthia Hoffman, we had a packed house, a



raucous shut-up karaoke session, and a couple of very competitive raffles.

For those who don't know what Shut Up Karaoke is, it works like this: You pay to sing, other people pay to shut you up, and then you or others pay for you to sing again! *When was the last time you got to raise money by singing badly?* Staff therapist Justin Castello provided \$1/minute chair massage. And Rich Lingbaoan of ReEnergize Bodywork donated 10 massages for our raffle. Board and staff all pitched in to create an amazing group effort.

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Trauma and Substance Abuse, continued

What is trauma?

Trauma refers to *any experience* that 1) is beyond the realm of normal and expected human experience; 2) involves actual or threatened death or injury, either to oneself or close others or witnessed; 3) causes fear or horror and intense physical or emotional distress; and 4) overwhelms one's ability to cope, even for a short time. Traumatic events include *natural disasters* such as earthquakes, fires, or famine; *community or national events* like war, genocide, or immigration; *family circumstances* such as hunger and poverty, domestic violence, child abuse or neglect, or death of a parent, sibling or child; and *personal experiences* such as rape, imprisonment, accident or medical illness. Some people heal from such experiences. Others manage to get through life without major disruption to their ability to work, love, and laugh. Unfortunately, a third group develops symptoms of *post-traumatic stress*.

What is post-traumatic stress disorder (PTSD)?

PTSD is a complex neurological and psychological response to trauma that emerges after the experience is over. Symptoms include:

- ◆ Re-experiencing—intrusive thoughts, flashbacks, or nightmares
- ◆ Avoiding—people, places or things associated with the trauma, or emotional numbness - loss of interest

and detachment

- ◆ Hyperarousal—hypervigilance, anxiety, anger, difficulty falling asleep, or exaggerated startle response
- ◆ Psychological distress—depression, guilt and shame; loss of meaning, loss of faith, cynicism; damage to one's identity and self-esteem
- ◆ Re-enactment—courting danger in high-risk sports or hobbies, or repeatedly getting into violent relationships, either as a victim or as a perpetrator.

In a review of HRTC's community clients, we found that almost 100% had histories of serious trauma and all live in dangerous or highly stressful situations now.

Why does PTSD develop in some people exposed to trauma and not others?

The younger a person when the trauma occurs, the more likely it is that PTSD will develop. Prolonged or repeated trauma also predicts PTSD.

Two scholars** in the field of PTSD often refer to it as a “disorder of repair”. After a traumatic event, we need to **VENT**, we need to be **SOOTHED** by comforting words and

gestures, and we need to be **PROTECTED** from further harm. These “interventions” help us to discharge the tension aroused during a trauma, then to bring our neurobiological responses back to normal. If we do not have these opportunities to recover, then our crisis state starts to create permanent changes to our brain chemistry and our psychology. This is when we are at high risk for developing PTSD.

What is the relationship between trauma and substance abuse?

Most of our readers know that the first principle of harm reduction therapy is *people use drugs for reasons*. We subscribe to the self-medication hypothesis of drug abuse. Alcohol can be, as one client said, “like a warm blanket that I wrap myself in every night.” Pot does a great job of dulling memory, and is relaxing for most folks. Heroin and other opiates are very soothing drugs. Or, if alertness is important to survival, then stimulants enhance one's attention and vigilance.

By starting with this premise, HRTC therapists are able to join with our drug-using clients and begin the work of healing trauma.

Part II of the series will present how we work with trauma.

Part III will address how this work affects the therapist.

**Bessel van der Kolk and Daniel Siegel.

Letter from the Executive Director Jeannie Little, LCSW

Welcome! In this first letter to you, I would like to share my appreciation for HRTC's staff, who work in the most difficult environments with people long considered to be "untreatable". Our front-page story tells you some of what staff faces each day they go to work.

I can honestly say that HRTC's therapists are the most skilled I have ever met, or could ever imagine. They grow in popularity among clients, and in reputation around the Bay Area and the country, every year. At the Homeless Youth Alliance, where young homeless participants are notoriously averse to, and traumatized by, mental health

institutions, *our rating in the agency's recent client satisfaction survey topped 95%.*

At our community programs, cries of "Jamie" "Jen" "Celia" "Mariko" "Justin" "Jenn" "Vilma" "Dr. Zevin" "Carey" ring out every time they walk through the drop-in centers. Our 10 weekly drop-in groups are full to bursting, often with standing room only. Our 7 community therapists and two community medical staff work with 800+ homeless clients per year, often in crisis, sometimes daily, always with compassion. How?

They believe —that the most chaotic of drug users can

benefit from therapy if it is accessible; that, given *options* rather than *mandates* for change, people will move toward health. And we continue to offer staff a rich program of supervision, support and training.

Not only is it challenging to sustain daily support for 100's of people with devastated lives, but the therapy we provide is unparalleled in its skill. Never has such a socially marginalized group of people received such high quality and loving care.



HARM REDUCTION IN THE NEWS

"Faced with rising drug overdose deaths, New York is the latest -- and largest -- state to pass a 911 Good Samaritan law allowing people to seek help without fear of prosecution. New York Gov. Andrew Cuomo signed into law on July 20 legislation aimed at reducing the number of preventable drug overdose deaths in the Empire State. The new law gives protection from prosecution for drug possession offenses to overdose victims seeking medical help or to people seeking medical help for them." — Philip Smith, 7/22/11. See the whole article on: [Stop the Drug War.com](http://StoptheDrugWar.com)

FUNDRAISER, continued



Justin giving a chair massage! Friend Lila Louie also volunteered to lend a hand.

The night was one of our best fundraisers so far and we hope to have more such fun nights in the future.



Raising money for HRTC and having a great time — what could be better?



Is moderation a reasonable treatment goal?

As with everything in harm reduction, it depends on many factors, but "research suggests there is no added harm in patients trying moderation as opposed to abstinence. In fact, offering options increases optimism, so the balance of clinical advantage lies in widening treatment access by permitting choice"

[Initial preference for drinking goal in the treatment of alcohol problems: II. Treatment outcomes.](#)

Adamson S.J., Heather N., Morton V. et al. *Alcohol and Alcoholism*: 2010, 45(2), p. 136-142.

Attend the

**2011 International Conference
on Drug Policy Reform
Los Angeles, California
November 2-5**

www.drugpolicy.org/



It's All About Playing And Healing Together by Celia Sampayo Perez, ASW

It has been over six months since we started our first drumming group back in December of 2010. Thanks to collaboration between HRTC and Central City Hospitality House, our dream came true. We now have for the community of the Tenderloin an established drumming healing group funded by the CA Mental Health Services Act Holistic Wellness program: Healing, Organizing, and Leadership Development.

Jamie Lavender, LMFT, and I, both HRTC therapists and drummers, facilitate our drumming group. Drumming is an ancient practice and rhythm is our natural birth force. The group has established a regular membership and has many newcomers who testify about the benefits of playing together. Some have said they experience an increase of energy, motivation, and connectedness, less depression and anxiety, better

sleep, increase of alertness, concentration and self-control. Others have said that they feel calm, focused and grounded every time they play drums. Our participants are very diverse, and include many women (in a male-dominated center), older adults, and even a 2-1/2 year old child accompanied by his dad. The healing intention of our journey of playing drums is to create community. It is all about playing, having fun, and healing together.

Harm Reduction Therapy Center

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The Harm Reduction Therapy Center has a mission to practice and promote a model of integrated mental health and substance abuse treatment that welcomes under-served substance users with serious emotional problems. The treatment, harm reduction psychotherapy, is based on the importance of "Any Positive Change". Harm Reduction Therapy does not require abstinence as either a condition of, or a goal of, treatment. HRTC's highest value is client choice — we put the reduction of harm before any other ideals.

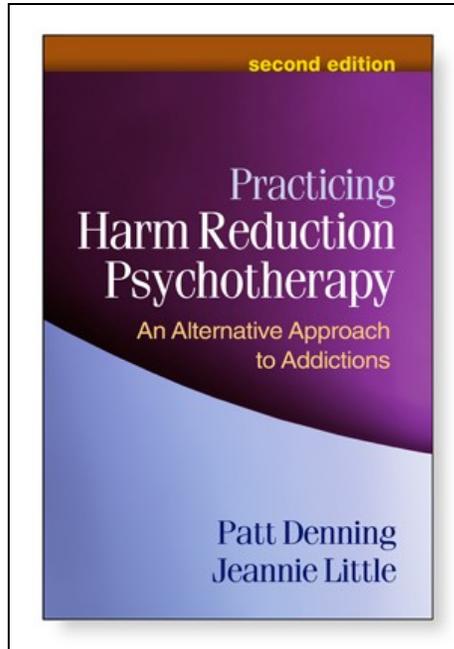


Karaoke fun at HRTC's recent event at the Dovre Club in San Francisco.

Check out our new website—
it's much easier to navigate!
www.harmreductiontherapy.org

LOOKING FORWARD

Upcoming events and news—



A major revision of Practicing Harm Reduction Psychotherapy is due out in October. It is rich with 10 more years of practice and research; it includes new chapters on trauma, community treatment, group treatment, family treatment, and ethics.

Save the Date!

Friday evening, November 18th

Come celebrate HRTC's 11th anniversary and the publication of the 2nd edition of Practicing Harm Reduction Psychotherapy. Hear powerful guest speaker, neuroscience journalist **Maia Szalavitz**, whose amazing writings on addiction can be found at <http://time.healthland.com/author/maiasz>. Check our website, and our Facebook page for more details!

www.harmreductiontherapy.org

Stay tuned in early September for the SF Drug Users Union in the New York Times

We have moved our offices in San Francisco. We now have our own center!! Note our new address in the sidebar to left.

www.harmreductiontherapy.org

Harm Reduction Therapy Center

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