

About CCOR™

Client-Centered Outcomes Research
in Public Mental Health (CCOR-PMH)

Felton's CCOR (see-core) Division, one of only a handful of public mental health-focused community-based research centers in the United States, grounds its work in the belief that stakeholder and community insights are fundamental to transformative change.

Felton CCOR aspires to leverage client- and community-centered research and program evaluation in the service of innovation, health equity and sustainable impact.

CCOR partners across the public and private sectors, pursuing research and research-driven program development with the agility and flexibility that a community-based organization affords. Attention to the intersection of culture/race/ethnicity, social adversity and access to quality services is at the forefront of all of CCOR's work.

CCOR works hand in hand with Felton Institute's award winning direct service programs and divisions as well as Felton Institute training and technical assistance initiatives throughout California and across the United States.

For more information please contact:

Nev Jones

Director of Research

415.474.7310 x731

njones@felton.org

or

Anthony Vasquez

Stakeholder Engagement Manager

415.474.7310 x707

avasquez@felton.org

Please visit our website:

www.felton.org/research

Interested in informing CCOR's research and program development in early psychosis? Felton is currently forming an early psychosis/early intervention stakeholder research advisory board. Please contact us for an application and additional information.

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Trauma & Early Psychosis

what you need to know about

MAKING THE CONNECTION
A PEER'S PERSPECTIVE
TRAUMA STATISTICS

www.felton.org | 415.474.7310
1500 Franklin St. San Francisco, CA 94109

MAKING THE CONNECTION

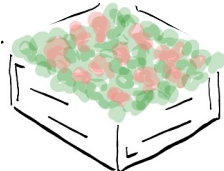
Trauma is one of the most significant risk factors for developing psychosis.

Although there are now dozens of studies linking childhood adversity, trauma and other major life stressors to psychosis, these relationships remain under-recognized by members of the public and by mental health professionals.

Types of trauma or adversity that have been **connected to the development** of psychosis include sexual and physical abuse, bullying, neighborhood violence, and early disruptions to relationships with primary caregivers (for example passing through multiple foster care placements or experiencing the death or incarceration of a parent).

Structural discrimination (for example racism, racial segregation, and poverty) also significantly increases the risk of developing psychosis.

In addition, many forms of trauma experienced **after (or stemming from) a diagnosis** can significantly shape the experience of voices, psychosis and/or distress, such as hearing the voice of an abuser. These include trauma experienced due to involuntary treatment, discrimination and/or social exclusion.



A PEER'S PERSPECTIVE



“My voices started when I was a kid, in the midst of experiences of serious abuse, and I always knew they were connected.

Other things that happened later in my life have also clearly influenced my voices. However, in my experience clinicians rarely ask me about these connections and I feel like trauma mostly just gets swept under the rug.”



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TRAUMA & PSYCHOSIS STATS

A growing body of research attests to the high prevalence of trauma among individuals with psychosis and to the developmental links between adversity and psychosis onset.

- The attributable increased risk for psychosis from **childhood adversity** is 33% (Varese et al., 2015).
- **Childhood trauma** is significantly more prevalent in young people at ultra high risk for psychosis compared to healthy controls, with a mean prevalence rate of 86.8% (Kraan et al., 2015).
- Patients attending early psychosis clinics report high rates of **childhood trauma**: 54% report emotional abuse, 23% report physical abuse, 28% report sexual abuse, 46% report emotional neglect and 42% report physical neglect. Women are significantly more likely to experience emotional and sexual abuse (Duhig et al., 2015).
- People who have been **sexually assaulted** as children are 3.3 times more likely to see visual hallucinations and 3.5 times more likely to hear voices than those who have not (Shevlin et al., 2011).
- Rates of psychosis are significantly higher in certain **ethnic minority groups** because rates of **childhood adversity** are higher (Berg et al., 2015).
- While sexual abuse has been linked most strongly to voices, experiences that disrupt **child-parent attachment bonds** such as neglect or abandonment, are more strongly correlated with the later development of delusions and paranoia (Bentall et al., 2014).