

## **The LINCS Program: An Outpatient, Community Based Trauma Treatment Program**

**“What is LINCS?”** This is a question often asked of us by client/consumers, community members, medical providers, and workers from social service agencies in our community. People wonder, where does LINCS fit into the large agency we know as Washington County Mental Health Services (WCMHS) and what makes it a program distinct from traditional outpatient therapy?

As part of Adult Outpatient Services, the LINCS Program is designed specifically to provide treatment for adult individuals who have experienced psychological trauma, and who may encounter significant life challenges as a result. LINCS is an acronym that stands for **L**INking **C**ommunity **S**upport. The name highlights the fact that because traumatic experiences can present ongoing interpersonal, vocational, recreational and even physiological problems, an individual’s therapeutic process will support recovery in all these areas. For this reason, the LINCS treatment protocol includes both office and community-based services that are determined in collaboration with the client and prioritize the most pressing needs. Services may range from providing support to secure housing, to helping clients learn ways to steady unpredictable emotions, thereby increasing an individual’s confidence and capacity to participate fully in life. The focus of treatment is to foster resiliency and the capacity to create a fulfilling life, while addressing the impact of trauma.

**What is trauma?** A potentially traumatic event is defined as a powerfully upsetting intrusion into daily life, which is experienced as life threatening or a serious threat to a person’s physical or psychological wellbeing. Potentially traumatic events may be one-time occurrences such as a car accident, a fire or a flood, or they may be ongoing situations of interpersonal violence, abuse during childhood, or chronic illness. From ancient Greek, the word “trauma” has been noted since the 17<sup>th</sup> C. in medical terminology to refer to a “physical wound;” by the 19<sup>th</sup> C. it was also being used to describe a “psychic wound” causing unusual distress. Today research has shown us that trauma affects both mind and body and leaves an imprint that creates disturbances in an individual’s cognitive, emotional, behavioral and physical functioning. For some, these responses are relatively temporary and dissipate on their own. For others these reactions can be more severe, last longer, and begin to disrupt their lives in undesirable ways.

Individuals affected by trauma develop ways to cope with traumatic events and to manage associated stress, mood fluctuations or uninvited memories. Some of these adaptations may be healthy and helpful, such as practicing self-care, seeking support from a counselor, or talking with trusted friends or family. Other coping strategies may take the form of drug or alcohol use, self-harm, aggressive or compulsive behaviors. While these may help quiet trauma-related responses for a time, ultimately these activities interrupt or obstruct the trauma recovery process.

LINCS providers recognize that asking for help is often a major obstacle to embarking on the path to recovery after experiencing trauma, and that finding a way to focus and to be calm in response to reminders of the past is foundational to recovery. The impact of trauma can show up in many forms. Perhaps relationships are chronically challenging or unsatisfying, or emotions may be continuously overwhelming and hard to manage. It could be very difficult to maintain a

job or be around people or go out into public spaces. Many people find it very hard to feel good about who they are, or question whether they are good parents, or wonder what the future holds for them. The LINCS program aims to help our clients improve the quality of their lives and attain their desired levels of emotional stability and functioning in all aspects of life, beginning with steps to establish safety and stabilization.

**Why does treatment start with a focus on safety and stability?** We look at the trauma recovery process as having 3 stages, although the stages are not as distinct as they sound – it is a way of talking about what we do. “Stage one” work is all about Now. We help people establish a sense of safety while navigating current life challenges – perhaps someone needs housing, or help connecting with employment opportunities; alleviating environmental stressors allows an individual to be more available to practice self-care and develop healthy coping skills. As an individual achieves a sense of safety and increased emotional stability, he or she may progress into “stage two” work and focus on understanding how past issues may have contributed to current issues. In “stage three” past experiences become more firmly anchored in the past, allowing a person to move forward into a life no longer disrupted by overwhelming feelings or fears related to past events. Safety and stabilization skills are woven throughout all treatment stages, strengthening and reinforcing the process of recovery.

**What do LINCS services look like?** Shaped by a holistic approach to recovery, LINCS services may be office or community based and are coordinated by a collaborative team approach that may include the client, a treatment resource coordinator, a LINCS recovery skills group, a therapist, a psychiatric provider, and community partners, as applicable. The LINCS program staff often collaborates with other WCMHS divisions to create suitable supports for each client and/or their families.

In addition to individual therapeutic and case management supports, the LINCS program hosts a growing number of groups currently for women, although men’s groups can easily form in response to interest. LINCS groups provide a safe, compassionate atmosphere in which women survivors enjoy the support of others, as they build knowledge and skills that will help them develop a fuller understanding of the impact of trauma and to practice healthy coping strategies for long-term recovery. Groups are structured around topics that clients have told us are important to them, such as understanding trauma and memory, practicing emotion regulation, and creating healthy relationships. LINCS clients often take part in Wellness Collaborative Groups to reinforce self-care skills, reduce stress, and to conceptualize wellness as a critical component of trauma recovery.

**What does progress look like?** While we continue to develop reliable measures to create data that can inform this question, hearing from our clients is in many ways the best possible answer and the most helpful outcome report that we can hope to receive, as we continue to improve LINCS services. Out of 49 responses on our Annual Client Satisfaction Survey, 94% of LINCS clients told us that the services they received made a difference, 100% that they were treated with respect, and 96% reported satisfaction with services received.

**Individual stories:** Two stories of how a few of our clients (names changed) have been empowered to make positive changes in their lives fill out the picture.

- Due in large part to the impact of past trauma, Audrey was homeless and living in the shelter when she was referred to LINCS by the Adult Access program. The LINCS Community Support Specialist (CSS) worked with Audrey and our community's Housing Review Team to obtain an apartment for a year and establish a good reference for more permanent housing. Because she was safely housed, Audrey was able to utilize her support team to find and maintain employment and develop positive outlook for her future, including renewing her relationship with her children. Audrey worked with the CSS and her psychiatric provider, ultimately moving to permanent housing and deciding that she felt settled, safe and able to manage life on her own.
- When Sally first met with the LINCS Treatment Resource Coordinator, high anxiety and fearfulness made it almost impossible for her to be among people in the waiting room or to engage in group therapy. With her clinician, Sally developed an understanding of how her past interfered with her current emotions and contributed to multiple hospitalizations. Sally began to work on skills to establish safety and stability. Her LINCS clinician connected Sally with a WCMHS psychiatric provider, continued the focus on skills practice, and helped Sally navigate her daily needs, including new housing, getting a car, and engaging in some empowering self-care practices. In time, Sally also began meeting with a DBT therapist. Sally has gained confidence and currently engages with others in the community to advocate for services for her children.

**Group responses:** Data gathered on group evaluation forms completed by eighteen women who have participated in LINCS groups shows a high percentage of “5’s” on a scale of 1 to 5 with regard to questions that asked if the group helped group members to: “improve my ability to manage my emotions;” “improve my relationships;” “feel less alone with my challenges;” and “feel better about my future.” In answer to *what was the most helpful thing you learned in this group?* One client wrote, *“To tell a new story about myself; discover my own truths and dare to live out who I am.”* To the same question another client responded, *“How to use coping skills and that I am not alone!”* In a section reserved for additional comments, one woman noted, *“I totally enjoyed this class. It was great feeling like I had support. I didn’t feel so alone in many ways.”* And a second woman wrote, *“Thanks for always being there for me to help me get through hard times and have fun doing it. You all are amazing!”*

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