Kathryn Dosch Brings New Leadership to the Veterans Health and Trauma Clinic

By Sophie Brickman

A background in mental health leadership and providing trauma-informed care for individuals and families affected by military trauma are just a few of the qualities that brought Kathryn Dosch to her new role as the Director of the Veterans Health and Trauma Clinic. As a Colorado native and the daughter of an air-force officer, Ms. Dosch has been passionate about veterans since childhood. While pursuing her master’s degree in education in preparation for a career in school counseling, she realized the importance of integrating her passion for the military with her clinical work, and began training at the Ft. Wainwright Army Base’s Family Life Center in Fairbanks, Alaska, just a few years after 9/11. She treated children in foster care and developed her private practice with military members and their families, while completing advanced training in EMDR, CPT, and play therapy.

Upon returning to Colorado in 2011, Ms. Dosch continued her clinical work at Aspen Pointe, a community mental health center, culminating in her role as the Director of Integration, in which she fostered systems of integrated care involving mental health practitioners in medical settings. While deeply invested in the integrated care model, Ms. Dosch missed working with veterans, and this longing to return to military work led to her current role at the VHTC.

In addition to overseeing the operation of the clinic, Ms. Dosch will maintain a caseload at the clinic and is actively involved in clinical case consultation, managing grants, and supporting research and student training. She aims to utilize her background in children and family systems to expand the VHTC’s services to children and military families, and is currently involved in a grant awarded by the Colorado Springs Health Foundation focused on interventions for childhood maltreatment. She is “thrilled to join a group of highly educated professionals dedicated to this impactful work.”

Ms. Dosch is particularly excited about HeartMath, a biofeedback program that teaches emotion and behavior self-regulation skills, which she believes are fundamental to building resilience. Regarding trauma recovery, she imparted the following: “Healing from trauma is a personal journey. There is hope, even on days when it feels like it is never going to better, and there are a lot of things people can do to take care of themselves and their families beyond therapy.” Welcome, Director Dosch, to the VHTC!
Awards and Record Attendance at the 2018 ISTSS Conference

By Aaron Harwell

The UCCS trauma program made a strong showing at last year's International Society of Traumatic Stress Studies (ISTSS) conference in Washington DC. Students from the labs of Dr. Charles “Chip” Benight, Dr. Kristi Samuelson, and Dr. Tom Pyszczynski were present at the conference with a total of 13 students attending. Notably, all 10 of the students in PhD program presented research. This research spanned a wide variety of topics including trauma-related physiological arousal, discriminatory police harassment, refugee mental health, as well as several others. Second-year student Maggie Talbot and fifth-year student Carrie Yeager were both nominated as finalists for the ISTSS Student Poster award.

A major highlight of last year’s meeting was Dr. Benight’s receipt of the ISTSS Distinguished Mentorship Award. This award is given out annually to a single mentor who demonstrates strong intellectual leadership, creates a supportive environment for their students, and works tirelessly to prepare the next generation of clinical psychologists. Several current students, former students, and colleagues alike all wrote letters nominating Dr. Benight for the award. Carrie Yeager, one of the students who nominated Dr. Benight for the award stated, “Without his encouragement, I do not think I would be where I am today”. The program plans to make another strong showing at the 35th ISTSS meeting this November in Boston.

More Than a Painting

By Julie Hurd

When we think of therapy, art is not a typical modality that comes to mind. However, Mary Ann Chronister understands the therapeutic utilities of art. Mary Ann received a dual Master’s degree in clinical counseling and art therapy. She currently works at the Veterans Health and Trauma Clinic where she leads Creative Expressions groups for trauma survivors.

When asked about what these groups entail, Mary Ann explained, “There’s a difference between an art studio or art class, and a healing expressions group.” The purpose of an art class is to create a product, but the purpose of a Creative Expressions group is to use art as a form of self-expression. For trauma survivors, this form of therapy uses mechanisms similar to Dialectical Behavior Therapy (DBT) to process the trauma and create a bridge from the verbal processing part of the brain, to the sensory processing region. Mary Ann conveyed, “Engaging in art therapy opens up pathways to understanding yourself and your relationships that is beyond a human’s capacity to express in words.”

Although groups currently focus on trauma survivors, Mary Ann concluded that this modality is a beneficial experience for people of all backgrounds. “Everyone should experience an art therapy group at least once in their life, even if they consider themselves well, it’s a very gratifying experience.”

“Over Troubled Waters”, an original painting by one of Ms. Chronister’s clients.
More than 80% of people will experience at least one traumatic event over the course of their lifetime (Kilpatrick, Resnick, Milanak, Miller, Keyes, & Friedman, 2013). Although most individuals undergo a normal recovery process after trauma, a minority will experience significant symptoms of posttraumatic stress disorder (PTSD). PTSD is characterized by symptoms including intrusive memories of the event, effortful avoidance of reminders of the event, negative thoughts and moods, and hyper-arousal or reactivity (APA, 2013).

Only one diagnosis specific to posttraumatic stress symptoms is currently included in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5; APA, 2013). However, individuals can develop a vast number of psychological symptoms after trauma, and the current DSM-5 PTSD criteria may not capture all of the different symptoms experienced by trauma survivors.

Over the past three decades, a significant amount of attention has been paid to the idea that a related but distinct set of symptoms is experienced by some individuals affected by PTSD. In an effort to formally recognize the other symptoms that can develop after trauma, a Complex PTSD diagnosis has been created and included in the most recent version of the World Health Organization’s International Classification of Diseases (ICD-11; WHO, 2018).

The criteria for CPTSD consist of three areas referred to as Disturbances in Self-Organization: 1) affective dysregulation, 2) a negative self-concept, and 3) disturbances in relationships (WHO, 2018). The symptoms of Complex PTSD have been observed to occur most commonly after certain types of trauma, and specifically traumas that 1) are repetitive and prolonged, 2) involve harm or abandonment by caregivers or other attachment figures, and/or 3) occur during early childhood or adolescence.

These types of traumas can impact the development of the brain areas responsible for regulating emotions and processing information gathered about the world and other people. These early changes in the brain can continue to impact how a person approaches life experiences throughout adulthood and are believed to result in the symptoms that comprise the ICD-11’s Complex PTSD diagnosis (Ford, 2009). This type of symptom presentation has been associated with greater difficulties in daily functioning than traditional PTSD symptoms, and current evidence-based PTSD treatments do not directly address the symptoms unique to Complex PTSD (Brewin et al., 2017; Cloitre et al., 2011; Ford, 2009).

Specialized treatments have therefore been developed to address the specific challenges faced by individuals who develop Complex PTSD symptoms. These treatments typically take a phase-based approach to trauma treatment. For example, patients may first learn skills to manage strong emotions and the distress caused by their posttraumatic symptoms, and then they engage in processing the trauma memory. One such treatment approach is Skills Training in Affective and Interpersonal Regulation followed by a modified form of Prolonged Exposure therapy (STAIR-modified PE).

Future research will hopefully clarify how and when Complex PTSD symptoms are most likely to develop and increase the number and efficacy of evidence-based treatments for this disorder.
In this edition of the Director’s Corner, I wanted to share about an important collaboration that offers some very exciting opportunities for the Trauma, Health & Hazards Center (THHC) and the UCCS Public Safety Initiative (PSI). It should be noted that our mutual commitment to first responders and military resilience have been generously supported by philanthropic gifts from Ms. Lyda Hill. School of Public Affairs Dean, George Reed, and I had an initial lunch more than 2 years ago and discussed possible ways we could work together.

The connecting point emerged with the PSI which launched in 2017. The PSI is an incredibly important program that focuses on leadership development, ethics, resilience, officer wellness, school safety, diversity and policing in multicultural settings, and cybercrime among other topics. Under the leadership of Rod Walker, senior instructor and retired Deputy Chief of Police for the CSPD, this initiative has already made a difference for the Pikes Peak region. Through a series of strategic trainings, the PSI is lifting the readiness level for our first responder organizations. Additionally, the THHC and the PSI are working jointly to support first responder health and wellness. Janet Van Kampen, also a retired CSPD employee, is working directly with Dr. Lori Bryan at the THHC to promote “crossover success” between the THHC and the PSI.

One of these successes emerged last Fall. The PSI and THHC hosted the inaugural “Resilience in our First Responder Community: A Wellness Event” where I spoke about the unique trauma-related challenges faced by first responders across the nation. One point I emphasized during the talk was the tremendous load these individuals face each day combined with a culture that supports stoicism and toughness. I challenged this line of thought with the idea that all of us have a critical threshold where the demands can exceed our ability to cope. The key is to develop targeted resilience surveillance and coping skills. This conference was a huge success with first responders in attendance and many expressing appreciation and interest in future events.

Future collaborations between the PSI and the THHC are already being planned, including a larger, annual Wellness and Resilience Conference and other training possibilities where we exploit the unique resources and expertise that each organizational partner can provide. We are also working on developing innovative technological approaches to resilience for this population. Additionally, Dr. Kristi Samuelson, a UCCS trauma psychology faculty member affiliated with the THHC, is working with the PSI to advance resilience training in first responder training academies and programs. She has developed an innovative program combining cognitive and physical fitness training to promote mental flexibility and resilience, skills essential in the dynamic work situations faced by first responders. Clearly, the collaborative synergy generated by our work together is truly greater than what the sum of our independent contributions could possibly provide to the first responder and military communities. We look forward to sharing more updates as this partnership flourishes over the coming months.

**Public Safety Initiative and Trauma, Health & Hazards Center Events**

**4/10 – McConkie Leadership Conference**
Ent Center for the Arts, 7:30-4:30
Theme: Leading Teams with Moderator Roland DeRenzo
Speakers: Karl Mecklenburg, Lt. General (ret.) David Quantock, Dr. Constance Staley (UCCS)
Panel discussion – Mayor John Suthers

**5/15 – Dr. Kevin Gilmartin, Author of Emotional Survival**
Ent Center for the Arts, 7:30-4:30
http://emotionalsurvival.com/author.htm

**6/2019 – Human Trafficking Conference**

**8/2019 – Trauma Informed Sexual Assault Investigation Training**
International Association of Chiefs of Police (IACP)

For more information, please contact Janet Van Kampen (jvankamp@uccs.edu)