Published on *University of Colorado* (https://www.cu.edu)

Colorado EAP gives CU staffer tools to overcome trauma [1]

January 8, 2024 by ES and UIS Communications [2]

Gwendolyn D'Elia heard something in a department meeting that saved her life.

In the October 2022 meeting, shortly after returning from maternity leave, she listened as her department's human resources leader mentioned that he used the Colorado State Employee Assistance Program (EAP) [3] to discuss a personal issue. EAP is a confidential resource for State of Colorado and University of Colorado employees, which provides no-cost access to counseling, professional coaching and more.

"He did not get into the nitty, gritty details, and he didn't have to. All he said was, 'I just want to remind everyone this is a benefit you could use,'" said D'Elia, a training specialist with Advancement at CU System Administration.

It was exactly what D'Elia needed to hear, and it guided the new mother to resources that helped her heal from Post-Traumatic Stress Disorder (PTSD).

When D'Elia gave birth to her daughter on June 20, 2022, nothing went as planned. Her 55 hours of labor ended with an emergency C-section, during which her epidural failed and she felt every incision. She and her daughter were discharged from the hospital, only to be readmitted 24 hours later for three more days, which her daughter spent in the neonatal intensive care unit.

"After the fact, in speaking with billing and some nurses and while reviewing the hospital records, we came to the conclusion that they shouldn't have discharged us when they did but did so because they'd reached the maximum that they could bill. By discharging us and readmitting us, they were able to restart that clock," D'Elia said.

In the subsequent months, D'Elia was grateful to have a healthy daughter, but still grappling with the way she came into the world. She had nightmares and night terrors every night. She couldn't sleep. She disassociated, trying not to think about her experience but unable to not think about it. And she couldn't talk about it without breaking into tears.

When she did talk about the birth to doctors, relatives or friends, they'd reply with common aphorisms — baby blues are normal, being a new parent is hard, or anxieties are normal. Sharing experiences with friends on social media led to comments like, "Yeah, but your baby's okay," or a private message to stop talking about her experience because she would "scare other people from wanting to have a child one day."

“There were two people who went through this process. One of them was 6 days old. She was perfectly okay, and that was such a blessing,” D’Elia said. “The other person, who went through this was 28 years old, and she was not okay.”

Hearing about EAP, she completed the counseling application immediately and within two weeks had an appointment with a therapist.

In the appointment, D’Elia told her therapist about why she was reaching out at a high level. At first, he said a lot of new moms have anxiety but encouraged her to talk through what was causing her anxiety. She told him the full story through tears.

“I stopped talking, and the next words out of his mouth were, ‘You are experiencing a trauma response,’” she said. “There was a light at the end of the tunnel because I finally felt like someone heard me.”

The counselor told her she needed to find a therapist who specialized in eye movement desensitization and reprocessing (EMDR), which focuses on changing the emotions, thoughts or behaviors that result from a distressing experience. He gave her useful tips for connecting with a long-term therapist — to interview several therapists to find someone she clicked with and felt comfortable talking to, and to look for red flags, such as promises that treatment would be complete in a three- to six-month time frame.

“I wanted to feel like I was being heard, especially because my trauma was so connected to not feeling heard during my delivery,” she said.

After the EAP session, D’Elia found a therapist and was formally diagnosed with PTSD related to her labor and delivery. D’Elia began weekly virtual EMDR therapy sessions, which aim to remap how the brain processes traumatic events and allow the patient to process and heal.

“The way it was explained to me is that when you’re going through trauma, part of what happens is that the two sides of your brain aren’t talking to each other anymore,” she said. “During a trauma response, that’s why you can feel like you’re stuck or like, you’re reliving certain things over and over.”

During EMDR sessions, D’Elia talked about her trauma in small, manageable sequences. On one monitor, she would see and talk to her therapist, who listened, took notes, and then asked her to rate her pain and distress on a 1-10 scale. On the other monitor, there was a small moving ball her therapist controlled. After discussing an element of her experience, D’Elia’s therapist would move the ball and she would follow it with her eyes.

They repeated the therapy — discussing the birth, rating her feelings, followed by eye movement sessions — for each aspect of her experience until eventually her ratings lowered. D’Elia was able to dictate the elements they discussed. Once they finished the whole experience, they repeated the process, in case new feelings arose. In September 2023, she completed EMDR therapy after 10 months.

Recovering from her trauma, D’Elia is now “cautiously nervous and patiently optimistic” about the possibility of having another child. She now has better tools to advocate for herself, communicate her needs and say no with confidence when something isn’t right.

Looking back on her journey, D'Elia realized the importance of talking about her experiences. Nothing — no birth class, no influencer, no stories she heard — prepared her for what she experienced. Later, she realized she knew other people who had similar experiences, but never sought help.

"In talking about it, if I can just help one person know that they're not alone, that's worth it," she said. "Don't give up advocating for yourself to try to get the help that you need, because you deserve the help and it's out there. You just need to find the right avenue for you to get it."



Whenever D'Elia sees Josh Brumley, assistant director of Organizational Development at CU System Advancement, she tells him that mentioning EAP in a meeting saved her life.

"It was Josh mentioning EAP in a meeting, because I think if it had just been in an email or in passing, I wouldn't have noticed it," she said. "I'm like, 'Josh, you saved my life,' and he's like, 'Oh, stop.' But it's true. I really do feel that way, like Josh and EAP got me on the path that I needed to feel like myself again."

Learn more about the Colorado State Employee Assistance Program (EAP) [3] or other mental health resources [4]available to CU faculty and staff.

benefits [5], Wellness [6]
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