

Trauma Informed Care and Cultural Safety



Host: Diana Vincze

Presenter: Rami Shami

Date: October 18, 2023

Territorial Honouring



The Palliative Care ECHO Project

The Palliative Care ECHO Project is a 5-year national initiative to cultivate communities of practice and establish continuous professional development among health care providers across Canada who care for patients with life-limiting illness.

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The Palliative Care ECHO Project is supported by a financial contribution from Health Canada. The views expressed herein do not necessarily represent the views of Health Canada.



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BY



LEAP Core

- Interprofessional course that focuses on the essential competencies to provide a palliative care approach.
- Taught by local experts who are experienced palliative care clinicians and educators.
- Delivered online or in-person.
- Ideal for any health care professional (e.g., physician, nurse, pharmacist, social worker, etc.) who provides care for patients with life-threatening and progressive life-limiting illnesses.
- Accredited by CFPC and Royal College.



Learn more about the course and topics covered by visiting

www.pallium.ca/course/leap-core

Introductions

Host

Diana Vincze

Palliative Care ECHO Project Manager
Pallium Canada

Presenter

Rami Shami

Kensington Health

ECHO Support

Aliya Mamdeen

Program Delivery Officer
Pallium Canada

Conflict of Interest

Pallium Canada

- Non-profit
- Partially funded through a contribution by Health Canada
- Generates funds to support operations and R&D from course registration fees and sales of the Pallium Pocketbook

Host/Presenter

- Diana Vincze: Nothing to disclose
- Rami Shami: Nothing to disclose

Disclosure

Mitigating Potential Biases:

- The scientific planning committee had complete independent control over the development of course content

Welcome and Reminders

- For comments and introductions, please use the chat function.
- For questions, please use the Q&A function.
- This session is being recorded—this recording and slide deck will be emailed to registrants within the next week.

Trauma Informed Care and Cultural Safety



I ACKNOWLEDGE

the land I am standing on today is the traditional territory of many nations including the Mississaugas of the Credit, the Anishnabeg, the Chippewa, the Haudenosaunee and the Wendat peoples and is now home to many diverse First Nations, Inuit and Métis peoples. I also acknowledge that Toronto is covered by Treaty 13 signed with the Mississaugas of the Credit, and the Williams Treaty signed with multiple Mississaugas and Chippewa bands.



Tkaronto is built on sacred land that is part of an agreement between Indigenous peoples and then extended to allied nations to peacefully and respectfully care for it. By personally making a land acknowledgement you are taking part in an act of reconciliation, honouring the land and Indigenous heritage, which dates back over 10,000 years.



TorontoForAll.ca



Learning Objectives

By the end of the session, participants will be able to:

Contextualize
Trauma within
PSW role

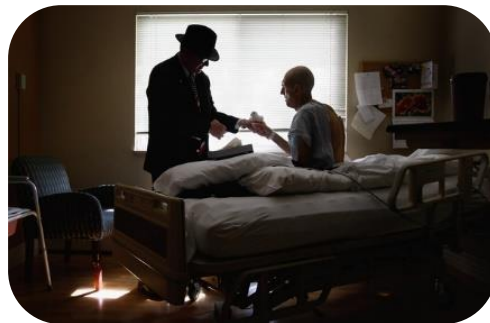
Apply Trauma
Informed
Approach to care

Utilize Culturally
Humble and Safe
Principles

Listen at your own risk







A Bit of a Background...



Kensington Health



Lighthouse for Grieving Children



*Why are we not talking more about **trauma** in Healthcare?*

COVID 19 Pandemic
Intergenerational
Intellectual and Development
Racial
Gender Specific
Colonial
Child Maltreatment
Domestic Violence
War Related
Genocide
School and Community
Medical Trauma
Vulnerable Housing
Sexual Assault
Accident
Immigration
Refugee
Natural Disasters



Trauma is perhaps
the most
avoided, ignored,
belittled, denied,
misunderstood,
and untreated cause
of human suffering.

Peter Levine

carriedejong.com

Trauma?

Trauma is a lasting emotional response that often results from living through a distressing event.

CAMH

Trauma – is the event

Traumatization – refers to the response to the traumatic event

Traumatic Event:

- One that leaves a person feeling overwhelmed
- The situation is perceived as threatening
- It leaves person feeling out of control, helpless, unable to assimilate or integrate the event
- An event that overwhelms person's ability to cope with the trauma

Clark, Classen, Fournier, Shetty
Treating the Trauma Survivor, 2014

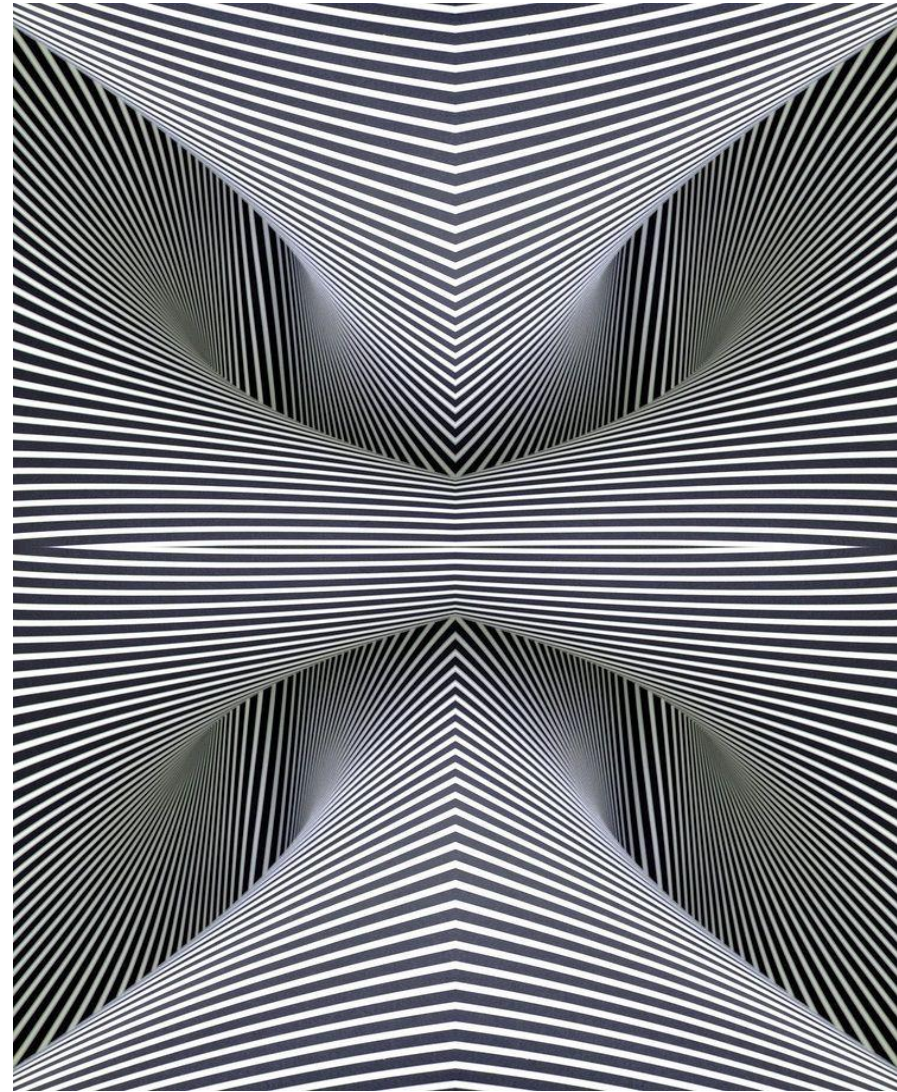


Memory

76%

Van Amweringen et al., 2008

An individual's **PERCEPTION** of an event as threatening is key to traumatization by the event. It's how the person experiences the event that will determine whether or not it is traumatic.



Effects of **trauma** include:

- Changes to the brain
- Increased physical and mental stress
- Affect Dysregulation
- Dissociation and changes in consciousness
- Changes in self-perception
- Disturbance in relationships
- Somatization
- Somatization
- Alterations in systems of meaning
- Decreased trust
- Attachment difficulties; conflictual relationships
- Hyperarousal and hypoarousal
- Rigid or chaotic behaviour

Effects of trauma are felt across the life span

Tension **Reducing** Behaviours:

- Substance Use
- Suicidality
- Hypersexuality
- Binge Eating
- Overeating
- Spending Sprees
- Self-harm (Self-preservation)





**How can we use a
Trauma Informed Approach
in ALL Care Settings?**

The Trauma Informed Approach...

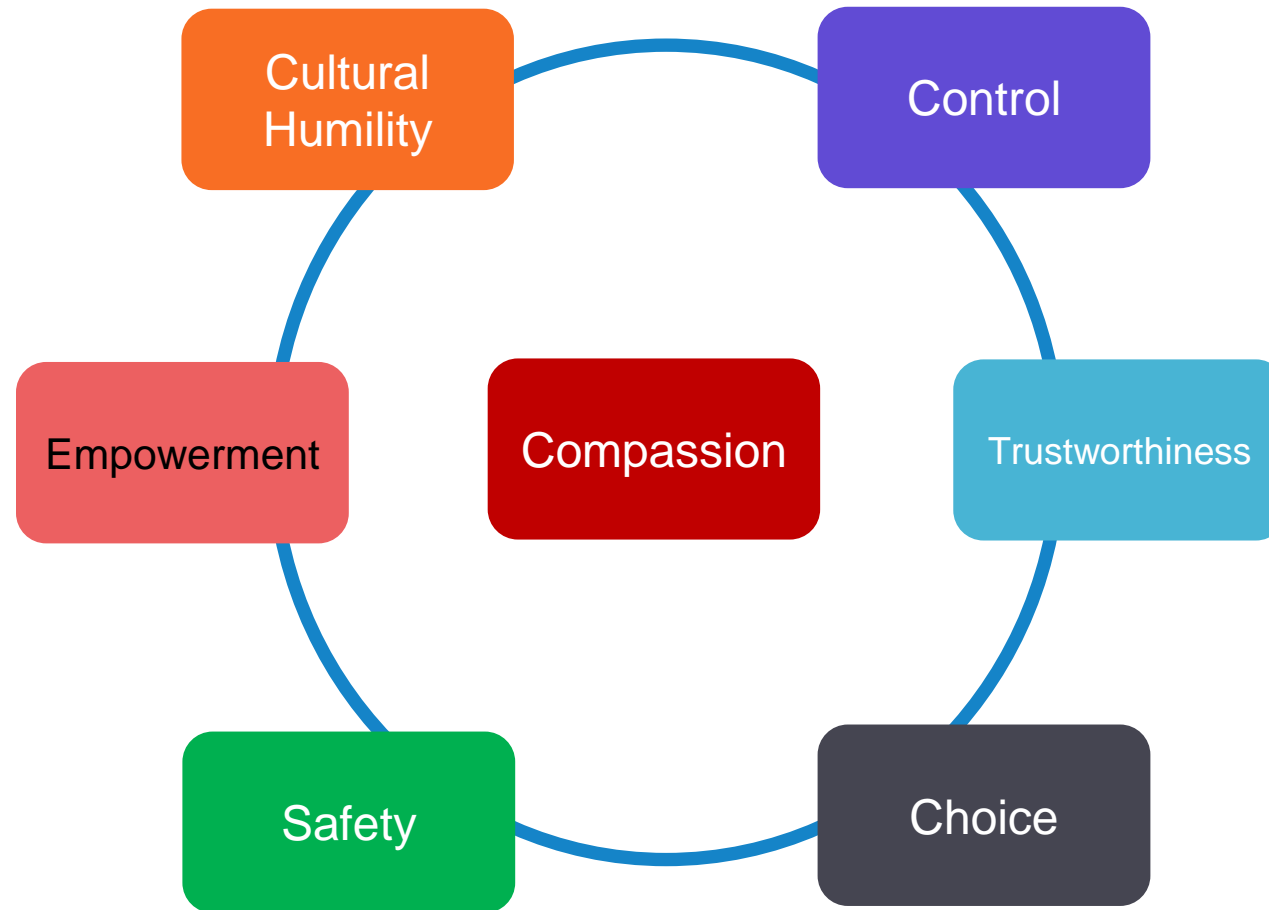
Assumes that every client/resident/patient may have experienced some form of trauma.

We don't necessarily need to question about their experiences, rather just assume a possible history of trauma.

Harvard Health



Principles of Trauma Informed Care



Fallon and Harris, 2009

Cultural Safety

*“Cultural safety is an outcome based on respectful engagement that recognizes and strives to address **power imbalances** inherent in the health care system. It results in an environment **free of racism and discrimination**, where people feel safe when receiving health care.”*

from Creating a Climate for Change
First Nations Health Authority
#itstartswithme

Cultural Humility

*“Cultural humility is a process of self-reflection to understand **personal and systemic biases** and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as **a learner** when it comes to understanding another’s experience.”*

from *Creating a Climate for Change*
First Nations Health Authority
#itstartswithme



Normalizing and validating someone who has experienced trauma can be one of the most powerful interventions that a staff can make.



Trauma Glasses – **On and Off**

Personal Account: Part 1

Sunita is a resident recently admitted to a Hospice residence during COVID-19. She has a progressive life-limiting illness. She is married, her wife's name is Rachel. She's stated that she has 'no other family'.

Upon arrival she asks that her bed be repositioned repeatedly, until she felt it was in the position she wanted.

Staff and volunteers report Sunita is constantly asking for things and asking repeated questions. In rounds it is stated that she can be brash and at times "demanding." She has raised her voice several times when she doesn't get what she's asking for.

MD orders lorazepam prn.

Personal Account: Part 2

Staff and volunteers claim that she is a “difficult resident/patient” and suggest “not give in to her demands.”

One night Sunita repeatedly pulls the call bell for the nurse. She says the nurses aren't coming to her and giving her her hydromorphone quickly enough.

Sometimes she says she is ‘waiting hours’ for help. She states that if she doesn't get it quickly, she will baracade her door, or leave the hospice.

Trauma Glasses ON: Summary

- Getting needs met in ways that have worked in the past
- Threatened, unsafe, out of control, fearful, retraumatized
- Out of her comfort zone, unfamiliar with the environment
- Depressed, alone, overwhelmed, and in 'fawn' of the flight or fight response
- Mistrustful, progress, repeated losses



Kintsugi: The Art of Precious Scars



iTunes
Google Podcast
iHeart Radio
Podbean
Spotify



The podcast cover art features a central logo with a lighthouse icon inside a circle, with the words "Light House" in orange and blue, and "Beacon" in large black letters. Below the title, it says "PODCAST" and "EXPLORING GRIEF IN CHILDREN & YOUTH". Two circular portraits of the host and guest are shown, flanked by yellow radio wave icons. At the bottom, the episode title and number are listed.

Light House Beacon
PODCAST
EXPLORING GRIEF IN CHILDREN & YOUTH

Guest | Andrea Warnick Host | Rami Shami

EPISODE #: 10
Exploring Inequitable Access to Children's Grief Support During COVID-19

Final Points

- Trauma affects how we see the world, how we interact with others, and how we cope.
- You don't need to know someone's trauma history to provide trauma-informed care.
- Trauma-informed care is person-centered care. It focuses on trust, safety and empowerment.
- Experiences of trauma can cause suffering. Our actions as healthcare providers can either help alleviate or exacerbate suffering.
- Having an understanding of structural vulnerability, harm reduction, cultural humility, safety & anti-oppressive practices will enhance your ability to provide trauma-informed care.

Q & A

Session Wrap Up

- Thank you for joining us!
- Please fill out the feedback survey following the session—a link has been added into the chat

Thank You



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