



Trauma & Resiliency Informed Care: Focus on Older Adults & Care Partners

Reimagining LTC BC Collaborative
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Health Quality BC, which does its work throughout the province, would like to acknowledge that we are living and working with humility and respect on the traditional territories of the First Nations peoples of British Columbia.

We specifically acknowledge and express our gratitude to the keepers of the lands of the ancestral and unceded territory of the xʷməθkʷəyəm (Musqueam), Skwxwú7mesh (Squamish), and səlilwətaʔ (Tsleil-Waututh) Nations, where our main office is located.

Health Quality BC also recognizes Métis people and Métis Chartered Communities, as well as the Inuit and urban Indigenous peoples living across the province on various traditional territories.





Intentions

1. Raise awareness about trauma
2. Special considerations in the older adult
3. Become familiarized with resiliency
4. Where to go for more information



Caution

1. Someone at this webinar may have a reaction to the content
2. If you need to step away as a result, let someone know
3. If more support is needed reach in to your human resource services



One definition ..

“Trauma is when we have encountered an out of control, frightening experience that has disconnected us from all sense of resourcefulness or safety or coping or love”

Tara Brach, 2011 <https://trauma-recovery.ca/introduction/definition-of-trauma/>



Some types of trauma

Simple or single

Complex or repetitive

Developmental

Intergenerational

Historical

Social



Trauma and Older Adults

- Research into trauma & Veterans and childhood trauma
- Canadian Longitudinal Study on Aging

Mian et al. (2022)

- Up to 90% of older adults, aged 65 and up, have experienced at least one traumatic event in their lifetime

US Department of Veterans Affairs (2022)

- Not all trauma results in Post-Traumatic Stress Disorder (PTSD)



Effects of trauma can be felt across the lifespan

- ***Changes to the brain***
- ***Increased physical and mental stress***
- ***Compromise immune system***
- ***Decrease trust***
- ***Attachment difficulties***
- ***Conflictual relationships***
- ***Hyper arousal and hypervigilance***
- ***Rigid or chaotic behaviour***



What gets in the way of us knowing more?

Reluctance to ask

**Plus cohort values – self-reliance,
protection, shame**

**People haven't been asked or given
permission or opportunity**

Don't want to burden family members



Trauma and Dementia (Neurocognitive Disorder)

- *Both trauma & dementia change the brain*
- *90% of people living with dementia experience behavioural and psychological symptoms of dementia (BPSD) over a lifetime*
- *Similarity between BPSD & PTSD symptoms*
 - *When threat is perceived it can activate the fight or flight response*
 - *Unable to suppress traumatic memories or to self-regulate emotions*
- *Knowing person's past and how they coped can help relieve suffering and potentially prevent behavioural responses*

Estabrooks et al., 2022; Thorne et al., 2022; Siple, 2023



What might a trauma response look like in people living in long-term care?

- Need for control (upset if routine is changed, upset if you are moving too fast dressing them, hoarding, obsessive compulsive tendencies)
- Clinging behaviour, need a lot of reassurance
- Hitting, yelling, irritability
- Preoccupation with physical problems
- Restlessness, agitation, pacing
- Withdrawn, mistrustful
- Sleep problems

“Rejection of Care”



What might a trauma response look like in family members?



- Distrustful of care providers
- Need to control
- Emotionally upset
- Being very protective of loved one & self
- Seen as “demanding”, argumentative”, “criticizing”, “questioning everything we do”
- Family coping styles different - conflicts

Trauma Informed Perspective

Challenging behaviours may be ways of coping with trauma (what happened/is happening)

Understands that difficult behaviours may be an automatic stress response

Focuses on changing the environment

Care providers need to offer flexibility and choice

Positive, strengths-based approaches are most effective

Support for people exposed to trauma is the shared responsibility of all who provide support



Trauma Informed Practice

“Trauma-Informed Practice is a strengths-based framework grounded in an understanding of and responsiveness to the impact of trauma. It emphasizes physical, psychological, and emotional safety for everyone, and creates opportunities for survivors to rebuild a sense of control and empowerment.”



Supporting Psychological Safety & Well-being for All



What to consider regarding trauma in the context of aging?

- All the direct care we provide can actually, by the person, be viewed as traumatic
- Trauma tends to accumulate with increasing age
- Even if NO other trauma exists, just growing older can in and of itself be traumatic (Life Review)
- Varying degrees of cognition- how do we intervene?



Re-activation of trauma responses:

- Life-changes
- Increase in vulnerability and helplessness
- Loss of control over themselves and their environment
- Loss of their identity and self-esteem
- Loss in social connection
- More time to think
- Illness
- Loss of function
- Changes in roles



Enid



- Long Term Care
- CHF and COPD , significant frailty, and spinal stenosis
- Uses a wheelchair
- No significant dementia
- **Enid has stopped sleeping at night**

More: stays up all night watching TV in common room or sitting in the hallway closest to staff. If made to stay in her room, she turns on all lights and wakes up her roommate. Napping on and off during the day. Less participation. Staff are getting frustrated.



Esther



- Mid to late-stage Alzheimer's
- Language deteriorating
- Has recently become combative during personal care

More: she had appropriately cheery relationship with her caregiver, as if he were a grandson. As dementia progressed, she became less verbally expressive and now seems to exhibit rage when the caregiver whistles around her.

Next: staff reach out to family to see if whistling may be a trigger for this resident.

What do you think a solution might be in this scenario?

Adapted from Cheatham, C. (2021). Ithaca College Gerontology Institute



Why its important to be aware of trauma

- ✓ **To optimize person-centred care**
- ✓ **Avoid triggering/activating a trauma response and/or re-traumatization**
- ✓ **To help an older adult develop trust, feel safe and connected**



Supporting Psychological Safety & Well-being for All



A Trauma Informed System

REALIZES the widespread impact of trauma and understands potential paths for healing.

RECOGNIZES the signs and symptoms of trauma in staff, clients, and others involved with the system.

RESPONDS by fully integrating knowledge about trauma into policies, procedures, practices, and settings.

Resourcing for Trauma

Resilience: ABC



Awareness: Being attuned to one's needs, limits, emotions and resources

Balance: Maintaining balance among activities, especially work, play and rest

Connection: Connecting with yourself, to others and community



Self-compassion

- Is about kindness to self as opposed to evaluation of self
- Emphasizes common humanity, not differences
- Builds from mindfulness—the awareness that we all make mistakes and can learn from them
- Can help calm the inner critic in our head



The Inner Critic

**What are some critical words and phrases
we say to ourselves
when things don't go as
planned?**



Befriending the Inner Critic



What are some compassionate words and phrases we say to ourselves when things don't go as planned?

Befriending the Inner Critic



1. Recognize your inner critic and when it is getting louder and taking over.
 - **Is it a voice, thought, feeling?**
2. Welcome it and perhaps give it a name. What is the inner critic trying to really tell you? Is it the need to pause, breathe and slow down?
 - **“Gosh I am being hard on myself in this moment. Let me take a few breaths and sips of water**
3. After caring for yourself on the moment, separate yourself and don't act on the inner critic's directives. Replace it with a compassionate voice. Respond to situation like you would for a friend
 - **“Everyone makes mistakes, and I am not alone. This doesn't define me. What can I do and learn from this”**



In conclusion

- Trauma can affect our sense of belonging, safety and trust in others
- It's not necessary to know all the details of a person's trauma to provide trauma informed care
- Trauma-informed care is person and family centred care
- Trauma informed care requires systems and organization support
- Practicing self compassion and befriending the inner critic can help in your personal life and at work



Where to go for more information

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6. Check with your Human Resources or Health Authority Programs
7. SafeCare BC <https://www.safecarebc.ca/2022/11/16/working-mind-program-for-long-term-care/>



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