BEST PRACTICES

MOVING TOWARDS HEALING-CENTERED ENGAGEMENT: WHAT TRAUMA-INFORMED CARE CAN TEACH US ABOUT BURNOUT AND HEALING IN THE WORKPLACE

Jessica Barnhill, MD; Joslyn W. Fisher, MD, MPH, FACP; Megan R. Gerber, MD, MPH; Amy Weil, MD, FACP

Dr. Barnhill (jbarnhil@email.unc.edu) is a family physician and postdoctoral research fellow in the Program on Integrative Medicine at the University of North Carolina at Chapel Hill. Dr. Fisher (Joslyn@bcm.edu) is a clinician educator and director of a clinic for survivors of sexual assault and intimate partner violence, Baylor College of Medicine, Houston, TX. Dr. Gerber (Meggerbe@bu.edu) is a general internist and editor of Trauma-informed Healthcare Approaches: A Guide for Primary Care *(Springer, 2019). Dr. Weil (Amy_Weil@med.unc.edu) is a professor of medicine and social medicine and medical co-director of the Beacon Child and Family Program at the University of North Carolina School of Medicine at Chapel Hill.*

Traumatic experiences are common and their effects reverberate within individuals and throughout communities. Much is known now about the neuro-biologic mechanisms and health sequelae of traumatic experiences, and this knowledge offers pathways for understanding and building resilience. For these reasons, trauma-informed care (TIC) seeks to create a framework designed to anticipate, acknowledge, and respond to the effects of trauma on people's lives and, in so doing, mitigate the effects and foster healing.

Healthcare professionals and organizations can respond holistically to trauma by recognizing the interconnectedness between our patients' and our own experience with violence, well-being, and resilience. Thoughtful responses that promote healing and resilience among healthcare workers can reconnect healing professionals to the meaning and purpose that drew them to their work. In so doing, individuals and organizations strengthen their ability to provide trauma-informed care.

The healthcare workforce is not immune to the personal experience of trauma. In fact, healthcare workers are more likely than the population at large to have experienced personal trauma. It is estimated that sixty eight percent of the healthcare workforce have experienced at least one episode of violence, abuse, or neglect.[4] When compared to their colleagues in other industries, they are also more likely to experience workplace violence. A third, and perhaps more insidious, experience occurs when healthcare professionals develop vicarious, or secondary, traumatization through exposure to their patients' stories of violence and trauma. The manner in which healthcare workers receive and respond to vicarious trauma predicts whether they develop secondary traumatic stress.

In the newly released book *Trauma-Informed Healthcare Approaches: A Guide for Primary Care*, authors Kimberg and Wheeler offer the "4Cs" framework for applying trauma-informed principles in clinical care. The following is an excerpt from their chapter, "Trauma and Trauma-Informed Care"[1]:

Calm: Pay attention to how you are feeling when you are caring for the patient. Breathe deeply and calm yourself to model and promote calmness for the patient, yourself, and your co-workers. Practice calming exercises (deep breathing, grounding) with patients. Cultivate understanding of trauma and its effects to promote a calm, patient attitude toward others (patients and co-workers.)

Contain: Asking the level of detail of trauma history that will allow the patient to maintain emotional and physical safety, respects the timeframe of the healthcare interaction, and allows you to offer the patient important treatment options. Providing education, resources, and referrals to trauma-specific care without requiring disclosure of trauma details facilitates an interaction that does not emotionally overwhelm the provider or the patient.

Care: Practice self-care and compassion for yourself, the patient, and your coworkers. Adopt a compassionate attitude toward oneself and others, sharing messages of support, de-stigmatizing adverse coping behaviors, and adhering to the practice of cultural humility to promote healing.

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Fostering Resilience in Patients & Ourselves Toolkit*[5]

Books		Apps	
Books	Cope, Stephen. *Yoga and the Quest for the True Self* Epstein, Ronald. *Attending: Medicine, Mindfulness, and Humanity (2017)* Hanh, TN. *The Miracle of Mindfulness: An Introduction to the Practice of Meditation* Kabat-Zinn, Jon. *Wherever You Go, There You Are: Mindfulness Meditation in Everyday Life* Remen, Rachel Naomi. *Kitchen Table Wisdom & My Grandfather's Blessings* Schiffman, Eric. Yoga: *The Art of Moving into Stillness* Sood, Amit. *Train Your Brain...Engage Your Heart... Transform Your Life*	**Apps**	Mindfulness Apps: (Number indicates rating by *Journal of Medical Internet Research* (Mani)) *Headspace (Overall Rating 4.0)* *Smiling Mind (Overall Rating 3.7)* *Mindfulness (Overall Rating 3.5)* *Mindfulness Daily (Overall Rating 3.5)* Gratitude 365 (gratitude journaling) Exercise/Yoga: Seven minute workout (iphone or android) Office Yoga (or Lite – Free variety)
Websites	American Medical Association Steps Forward: *https://edhub.ama-assn.org/steps-forward/module/2702509* American Psychological Association: *http://www.apa.org/helpcenter/road-resilience.aspx* Office of Cultural Transformation at the Veteran's Administration: *https://www.va.gov/PATIENTCENTEREDCARE/resources/Mobile_Apps_and_Online_Tools.asp* Whole Health Library: *http://projects.hsl.wisc.edu/SERVICE/curriculum/index.html* ACP https://www.acponline.org/practice-resources/physician-well-being-and-professional-satisfaction ACGME: *http://www.acgme.org/What-We-Do/Initiatives/Physician-Well-Being/Resources* Substance Abuse and Mental Health Services Administration. SAMSA-HRSA Center for Integrated Health https://www.integration.samhsa.gov/clinical-practice/trauma	**Training**	Healer's Art (Naomi Rachel Remen, MD): *http://www.rishiprograms.org/educational-programs/* The Center for Mind Body Medicine: *https://cmbm.org/trainings/mind-body-medicine/* The Institute for Integrative Health: *https://tiih.org/what-we-do/* Center for Mindfulness in Medicine, Health Care and Society: *https://www.umassmed.edu/cfm/* Kripalu: *https://kripalu.org/* Hakomi Institute: https://www.hakomica.org/ Somatic Experiencing®: https://traumahealing.org/learn-se/#programs The Sensorimotor Psychotherapy Institute (SPI): See *http://www.sensorimotorpsychotherapy.org/about.html.*

* This toolkit provides examples of available resources and is not meant to be exhaustive.

Cope: Emphasize coping skills, positive relationships, and interventions that build hope and resiliency. Inquire about practices that help the patient feel better. Provide evidence-based treatment for the sequelae of trauma including substance use and mental illness. Celebrate cultural practices that increase well-being and social connection.

Among healthcare workers, as with the population at large, self-efficacy in the face of traumatic events predicts self-growth. Secondary trauma self-efficacy refers to "the perceived ability to cope with the challenging demands resulting from work with traumatized clients and the perceived ability to deal with secondary traumatic stress symptoms."[2] Individual characteristics (both innate and learned) as well as organizational structures can promote health professionals' self-efficacy.

The promotion of self-efficacy is a strengths-based approach to trauma-informed care that shifts the paradigm toward "healing-centered engagement". In his article "The Future of Healing: Shifting from Trauma-Informed Care to Healing-Centered Engagement," Dr. Shawn Ginwright explains, "A healing-centered approach views trauma not simply as an individual isolated experience, but rather highlights the ways in which trauma and healing are experienced collectively. The term *healing-centered engagement* expands how we think about responses to trauma and offers a more holistic approach to fostering well-being."[3] For example, humans biologically 'co-regulate' with one another, and clinicians can use relaxation of their own bodies and breath to create a calm healing environment for patients and one another.

In summary, healthcare staff are more likely than the general population to have experienced both personal and workplace trauma. Workplace violence includes physical and emotional violence inflicted by clients and colleagues. In addition, healthcare professionals may be vulnerable to vicarious trauma, which refers to the collective burden of witnessing the suffering of others. By promoting safety and self-efficacy, organizations can reduce the risk of trauma in the workplace. As we look to the future, trauma-informed organizations may help build resilience by proactively supporting the health of their employees. Ideally, they will maintain a sense of readiness to recognize the impact of trauma on the lives of their staff and the clients/patients they serve. Healthcare professionals can work

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collaboratively with organizations to create environments that are physically and emotionally safe. They can intervene when needed, adapt to the needs and strengths of their workforce, and provide opportunities for individual growth. Collectively, these efforts build resilience. Ultimately, it is through resilient individuals and organizations that trauma-informed care can be sustained and healing-centered engagement achieved.

References

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