

A trauma-informed approach to care is critical in palliative and end-of-life care because underlying trauma is integrated into how patients and their families may react to, and cope with, the challenges of pain and other symptoms, terminal illness, loss of independence, increased vulnerability, and the grieving process.

What is a Trauma-informed Approach to Care?

Lingering effects of trauma may intensify, and superimpose on, challenges that patients are already facing in their illness trajectories. Patients may have difficulties navigating their relationships, emotions, or simply feel unsafe. As healthcare providers, we cannot alter the already lived experiences of patients, but we can create environments where safety, trust, and transparency are supported.

A trauma-informed approach to care is a lens that minimizes harm by shifting the conversation from asking the patient, “What is wrong with you?” to “What has happened to you?”¹⁻² It acknowledges that we need to have a complete picture of a patient’s life to provide care that integrates a healing component. This enables the healthcare provider to form a relationship with the patient, recognize the impact of trauma and its effects on wellbeing, and reduce the harm and risks of re-traumatization.³⁻⁴

Using a trauma-informed approach does not mean that we want our patients to disclose their trauma or that we want to treat their trauma. Rather, it is important we understand the effects of trauma and provide care using a practice where we can support the wishes and needs of our patients.

There are four assumptions that can guide you in your practice to ensure you are providing trauma-informed care to your patients.⁵

1. Realization

Realize that trauma is widespread and can affect all patients and families that are experiencing palliative and end-of-life care. Patient behaviors can change as a way of adapting and coping with overwhelming triggers that elicit past or present trauma

2. Recognition

Be able to recognize the signs and symptoms of trauma in patients who are receiving a palliative approach to care

3. Responding

Assume the presence of trauma in patients and create safe environments for patients and their families through knowledge of trauma-informed practices and procedures

4. Resisting

Prevent organizational practices from creating an environment of re-traumatization (e.g., the use of restraints on a patient who was previously abused may inadvertently illicit feelings of trauma)

Part 2

Trauma Informed Palliative Care

*“Palliative care
acknowledges the
interdependence of the
various causes of suffering”⁶*

Resources:

1. [Trauma and violence-informed approaches to policy and practice - Canada.ca](#)
2. [Trauma-informed Care - Community Mental Health Action Plan](#)
3. Arthur et al. (2013). [Trauma-informed practice guide](#). Published by the BC Provincial Mental Health and Substance Use Planning Council
4. [SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach](#)
5. [What is Trauma-Informed Care? - University at Buffalo School of Social Work](#)
6. [Pallium Canada](#). (2018). The Pallium Palliative Pocketbook: A peer-reviewed, referenced resource. 2nd Cdn Edition. Ottawa, Canada: Pallium Canada.