

Trauma- and Violence-informed Care in Nurse Home Visiting Practice

Nurse-Family Partnership® (NFP) nurses work with many individuals who have experienced trauma.

DIFFERENT TYPES OF TRAUMA:

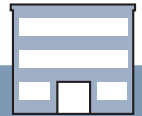
interpersonal
childhood maltreatment, intimate partner violence, sexual coercion or assault, exposure to violence in the home



external
being in a natural disaster, sudden death of a loved one, unexpected losses of things like a job, housing, or a relationship

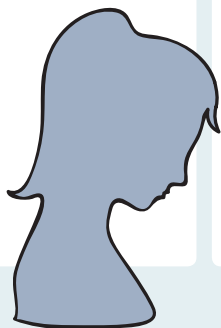


structural violence
systematic ways in which social structures (schools, government agencies, health institutions) cause harm or otherwise disadvantage people through discrimination (sexism, ageism, racism) or other forms of institutionalized violence



The principles of **NFP Client-Centered Care** and **Trauma-and Violence-informed Care**¹ are complementary. There are many ways that NFP nurses can use these principles to support woman and girls to feel safe in a home visit and to identify strength-based solutions that make the most sense to them.

Understand trauma, violence & its impacts



- Recognize that individuals with a history of trauma may engage in health risk behaviours (e.g. substance use) and may experience short-and-long term health effects (e.g. depression, anxiety, PTSD, chronic pain).
- Reframe your thinking from “what is wrong with this person?” to “**what has happened to this person?**” and “**what makes this person strong?**”
- Be knowledgeable about “red flags” that might indicate an individual has a history (or current experiences) of trauma.
- When conducting a nursing assessment, allow the client to determine how much information they feel safe sharing with you. It is not necessary to ask about all the details of a trauma or exposure to violence.
- If a client discloses a trauma – actively listen without interruption, validate her experience, recognize strengths, and express concern for well-being and safety.

Create emotionally & physically safe environments

- **Apply “universal precautions.”** Approach all clients and their family members with respect and without judgment, so each individual feels accepted and deserving of care.
- Nurture the therapeutic nurse-client relationship by fostering connections and trust.
- Provide anticipatory guidance in relation to all nursing assessments and interventions, including referrals to other agencies. This means sharing information about “why” an action is occurring, “who” will be involved, “when” it will occur and “what” will happen next.

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The client is the expert on her life
Foster opportunities for choice, collaboration & connection

- Focus on learning more about what the client knows will work in her life, relationship, culture or community through active-listening.
- A client may ask for information and support, in response, the nurse can provide appropriate and meaningful options that are tailored to the client's needs and circumstances.



Follow the client's heart's desire



- To facilitate the behaviour change process, ask your client, **"What matters most to you?"**
- Understand that a client's energy, time and attention will be devoted to changes in her life based on what she desires deep in her heart.

Only a small change is necessary

- **Behaviour change takes time.**
- Reassure your client that life-transforming changes often begin with the smallest of steps.



Focus on strengths
Use a strengths-based approach

- Acknowledge the effects that historical, social and structural conditions may have on your client's life experiences as well as her health and well-being.
- Reframe challenging situations or "problems" by identifying the client's strengths, sharing what she is doing well, and highlighting what she has accomplished.

Focus on solutions
Use a capacity-building approach

- Collaborate with clients to envision success, or accomplishment of their personal goals, by focusing on solutions - instead of focusing on problems.
- Focus conversations on identifying strategies for moving forward rather than remaining "stuck" and talking about past and present difficulties.
- Be aware that there may be conversations or situations where your client experiences distress, physiological responses (increased heart rate, sweating), difficulty concentrating, becomes irritable or wants to avoid the topic/situation.
- Help your client learn to recognize these triggers – and teach her new coping skills such as deep-breathing, mindfulness, progressive muscle relaxation, or centering.