Trina Thorne – University of Alberta

Project: *Developing a trauma informed intervention to reduce responsive behaviours in persons with moderate to severe dementia.*

Biography

Trina has been a registered nurse in Edmonton for over 17 years. After completing her MN - Nurse Practitioner (NP) program at the University of Alberta in 2014, she began working as an NP in a variety of Continuing Care settings.

Trina started her PhD program in 2019. Her research aim is to develop interventions that will improve the experience of both providing and receiving care in long-term care settings. Her nursing background helps her understand the factors that affect best practice implementation and how individuals with dementia experience the health system.

Project Summary

Past trauma exposure is common and under-assessed. Psychological trauma can result in devastating health outcomes such as post-traumatic stress, depression, anxiety, cognitive dysfunction, chronic disease and premature death. Exposure to traumatic events alters both brain function and structure, affecting responses to stress. Undetected histories of trauma for people living in long-term care (LTC) settings can create major problems for both residents and caregivers. Even when a history of trauma is known, frontline staff have little guidance on effective strategies to manage the consequences of psychological trauma.

In LTC, residents can experience numerous trauma-related stimuli or triggers that elicit exaggerated behavioural responses as reactions to fear, disempowerment and loss of control. A common trigger is bathing and intimate hygiene, which may be interpreted as danger by the reactive areas of the brain (lower regions), eliciting emotional, physiological and behavioural responses for survival and safety. These responses are rarely treated appropriately as care providers do not understand the origin or how to use trauma-informed strategies based on neuroscience to limit the reaction. Thus, preventive strategies are rarely

employed.

Although specific sub-groups are known to experience severe trauma responses in LTC (veterans, holocaust survivors), few studies have evaluated the impact of past trauma or stress injury on behaviour in residents with moderate to severe dementia.

No studies in LTC have specifically evaluated outcomes of trauma-informed, neuroscience-based interventions. Trina´s research will provide an empirical foundation for interventions with the potential to reduce emotional and psychological symptoms as well as aggressive behavioural responses to trauma triggers.