



Post-Traumatic Growth

Navigating Beyond the Trauma of the Pandemic: Five Steps to Recovery Dawn Ellison, MD, CPC

Our world has changed. Challenging your brain to think about what is possible beyond the traumatic experience of the pandemic can aid your personal growth and make sense of it all. But how do we get there?

In the aftermath of COVID-19, individuals, healthcare workers, and healthcare leadership have been expected to just move on and pick up the pieces alone—even though many are facing symptoms of post-traumatic stress disorder (PTSD). The patient, the healthcare worker, and the health system all provide significant perspectives in telling the story of moving through the trauma and realizing posttraumatic growth.

As an EM physician and a Physician Peer-Coach, I've seen and heard the direct impacts the trauma from the pandemic has had on healthcare workers. You may relate to one of the example perspectives in this piece. If so, how will you respect what has happened, and find your place in a changed world?

The Pandemic from Multiple Perspectives

The Patient:

The patient presented atypically for a patient with a COVID infection, right before the long list of symptoms became widely known to the medical community as indicators of Coronavirus. He was sent home; but not before he transmitted the virus to multiple medical staff, causing staff shortages. His test came back positive and by day nine, he was in the ICU on a ventilator.

As the pandemic progressed and vaccines were available to any adult who wanted one, the ICUs were populated with those who chose not to be vaccinated. The patients and their families were in disbelief as their loved ones died from a disease that they thought was less worrisome than the vaccination that may have prevented it.

The Healthcare Worker:

The healthcare worker woke up diaphoretic, tachycardic, with memories of a patient who shouldn't have died. He was an unvaccinated young man who landed in the ICU with complications from COVID. In the end, he coded despite the valiant efforts of the ICU team she led. It wasn't the first time she woke to this nightmare. She knew there had been many turning points, that if handled differently, could have saved the patient's life. She reflected on these: ranging from workplace options, to vaccine availability, the availability of a pulse oximeter to her trusting her gut instead of the requests of the family when they, in denial, delayed treatment she knew was necessary.

Along with the thoughts of what could have been, came emotional distress. She was sad, angry and lacking confidence. She dreaded going to work and was lost as to how to enjoy her important connections with her family and community. It was difficult at times to stop the tears.

As the unvaccinated COVID patients continued to come through the doors of the ICU; she realized the trust families had in her to aggressively treat patients with evidence-based medicine was lost. Rather than a hero they treated her as an obstructionist to the "life-saving measures" created by misinformation. Distrust from patients made it worse, adding another cut to the many of this traumatic experience.

The Healthcare Organization:

Beyond absences caused by COVID illness, staff also hesitated to come to work because they were pregnant, caring for an elderly parent or had health conditions of their own. Staff shortages intensified, bringing an already overwhelmed workforce to its breaking point. Frontline workers were forced to work overwhelming hours while organizational leadership had their own struggles: working against supply chain restrictions, everchanging CDC recommendations and staffing shortages. As

institutional stresses intensified, many recognized there was a need for organizational change—and soon. Investments toward creating a culture of well being and resilience are typically viewed as a long-term project. In the near-term, leadership can encourage their staff to reach out for resources that support Post-Traumatic Growth and remove barriers in the system that cause burden.

The Five Steps to Recovery

These examples may feel or sound a little too familiar to you. If so, then you too have experienced an event or series of events that may be causing you trauma. Trauma challenges our ability to regulate emotions, disrupts our beliefs about ourselves and the world and changes our life story. The pandemic has had this effect on many of us in healthcare.

Largely, because of the extensive work of the Veterans Affairs health system, we know a great deal about what it takes to recover and rise above traumatic experiences. Post traumatic growth (PTG) is the process of transformation that can occur in response to a traumatic event. By necessity, people develop a new way of thinking, feeling and behaving because their baseline way of functioning no longer serves them. They ultimately find new meaning in their life. Some can navigate this process naturally without help, others may find a companion or a therapist helpful. The process was first described by psychologists Richard Tedeschi, PhD and Lawrence Calhoun, PhD in the mid-1990s (1). They suggest five steps to positive growth:

The First Element of Recovery:

This involves an awareness of the physiological and psychological response to the traumatic event. Automatic rumination can be understood as a normal response to a painful event. Our brain investigates pain. Evolutionarily, it served humans well to understand and avoid the things that were harmful to us. The physiological response that instinctively gets us out of an acutely threatening event is harmful if operating in a sustained mode. Stress causes disease. Understanding and normalizing this response is the first step to recovery.

Second Element of Recovery:

Management of emotional distress involves handling the anxiety, insomnia and automatic rumination. Our default brain can resort to ruminating in a cycle of unhealthy thoughts. When we are not focused, we have thoughts of regretting the past and worrying about the future rather than being in the present. Practicing techniques such as relaxation, mindfulness and creative endeavors, focus the mind positively, strengthen the connections and increase the real estate in our pleasure centers—reducing the ability of the flight, fight and freeze response to dominate.

Third Element of Recovery:

Self-exploration of intrusive thoughts and effective support from companions is the key to PTG. The disclosure takes many forms. This could be in private with journaling, poetry, art or sharing one-on-one and in support groups. The purpose of self-disclosure is to begin to make sense of what happened, increase control over the thoughts, and move from automatic rumination to intentional constructive thinking. Relational support during this phase can bring perspective to the intentional thoughts that are helpful or merely provide a safe, nonjudgmental space to reveal pain.

Fourth Element of Recovery:

This step integrates the work done in the first three phases to develop a new vision for life. The formidable distress is managed; the disruption of assumptions about the self and what the world holds is resolved; there's a transformation from the work. There's a realization that we alone are the authors of our life story and there is hope once again.

Fifth Element of Recovery:

Through the development of articulated life principles, the traumatized individual is prepared for handling future trauma and developing new purpose in life. The translation of these revelations into daily life is the transformation that can occur with hard work and support from other humans. The patient with the traumatic amputation coaching Special Olympics; the grieving wife of a fallen football player now leading efforts to prevent heat stroke in athletes; the physician with substance abuse disorder working beyond retirement age because of a newfound passion for addiction medicine. These are a few examples of individuals who have been transformed. Some consider the traumatic event as both the worst and best experience of their lives.

An expert companion who is familiar with these five domains of PTG can hold space for and guide the traumatized individual on their journey to transformation.

We Can Help

VITAL WorkLife is here to support and guide you in your own growth to help find meaning and purpose. Reach out today to discuss how we can assist you and your team in respecting what happened, celebrating your strengths and values and thriving as you go forward together.

For coaching, counseling and other resources, contact us at 877.731.3949 or 952.250.5109, through the VITAL WorkLife App or contact us online.

(1) Richard G. Tedeschi, Jane Shakespeare-Finch, Kanako Taku, and Lawrence G. Calhoun in Posttraumatic Growth Theory, Research, and Applications; 2018

Dr. Ellison is an ABEM certified Emergency Medicine physician who has found her encore career in engagement and well-being. Communication, compassion, community and connection are core to her approach. She has collaborated to create accessible resources for well-being during the COVID-19 pandemic. As the president of Influencing Healthcare, LLC she has leveraged her leadership and clinical experience to create collaborative healthcare cultures through coaching, workshops and retreats. She is a global steward of Art of Hosting and uses these skills to create inclusive spaces for robust conversations. Most recently she has been conducting retreats designed for post-traumatic growth. Dr Ellison has been sharing Stress management and resilience training (SMART) techniques with her coaching clients since 2013 and teaching the SMART program since 2018. She is a certified SMART trainer and certified professional coach.

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