

Rupture and Repair: Facilitating Trauma-Informed Communication in the NICU

Samira Amirazizi, PhD; Neda Awad, PsyD; Jennifer Yuen, PsyD; Angelica Moreyra, PsyD



BACKGROUND

The NICU is an inherently high stress environment. Vulnerability of infants in critical care & uncertainty of medical outcomes can create stress & potential traumatic experiences for families.

Trauma is defined as exposure to a traumatic event in which a person experiences, witnesses, or is confronted with events that involve actual or threatened death, serious injury or threat to physical integrity.

In the NICU this might be related to preterm diagnosis, labor/delivery, separation from caregivers, admission, life threatening diagnoses, medical/surgical invasive procedures, tube feeding, prolonged hospitalizations, codes, etc.

Trauma responses are related to person's subjective experience of the medical event rather than its objective severity – perception of level of threat rather than reality of level of threat.

Trauma-informed communication can be utilized as a framework in medical settings to enhance psychological safety & improve communication. Stress and trauma associated with NICU can create barriers to communication.



CONTENT/ACTION

Fight

Possible Presentation

- Raising voice
- Requesting frequent updates
- Disagreeing with team
- Defensiveness

Trauma-Informed Strategies:

- Remain calm and grounded
- Reflect and validate emotions without personalizing behavior
- Offer choices to restore a sense of control & empowerment
- Acknowledge parents' expertise in child

Flight

Possible Presentation:

- Avoiding the unit
- Not answering calls
- Avoiding eye contact
- Quiet during medical updates

Trauma-Informed Strategies:

- Acknowledge difficulty in being present
- Normalize "information overload"
- Reach out without pressure or judgement
- Provide flexible communication options

Freeze

Possible Presentation:

- Body frozen in spaces, stuck, or unable to move
- Decision fatigue
- Feeling "numb"

Trauma-Informed Strategies:

- Slow down communication; avoid information overload
- Use simple, clear language
- Pause and repeat as needed
- Allow extra time for questions and decisions
- Use visuals or written summaries to aid processing

Fawn

Possible Presentation:

- Overly agreeable
- Deferring medical decision to providers
- Apologizing frequently

Trauma-Informed Strategies:

- Encourage honest feedback and create a safe space for disagreement
- Ask open-ended questions
- Support self-advocacy and shared decision-making
- Reinforce their value in the care team and their baby's journey

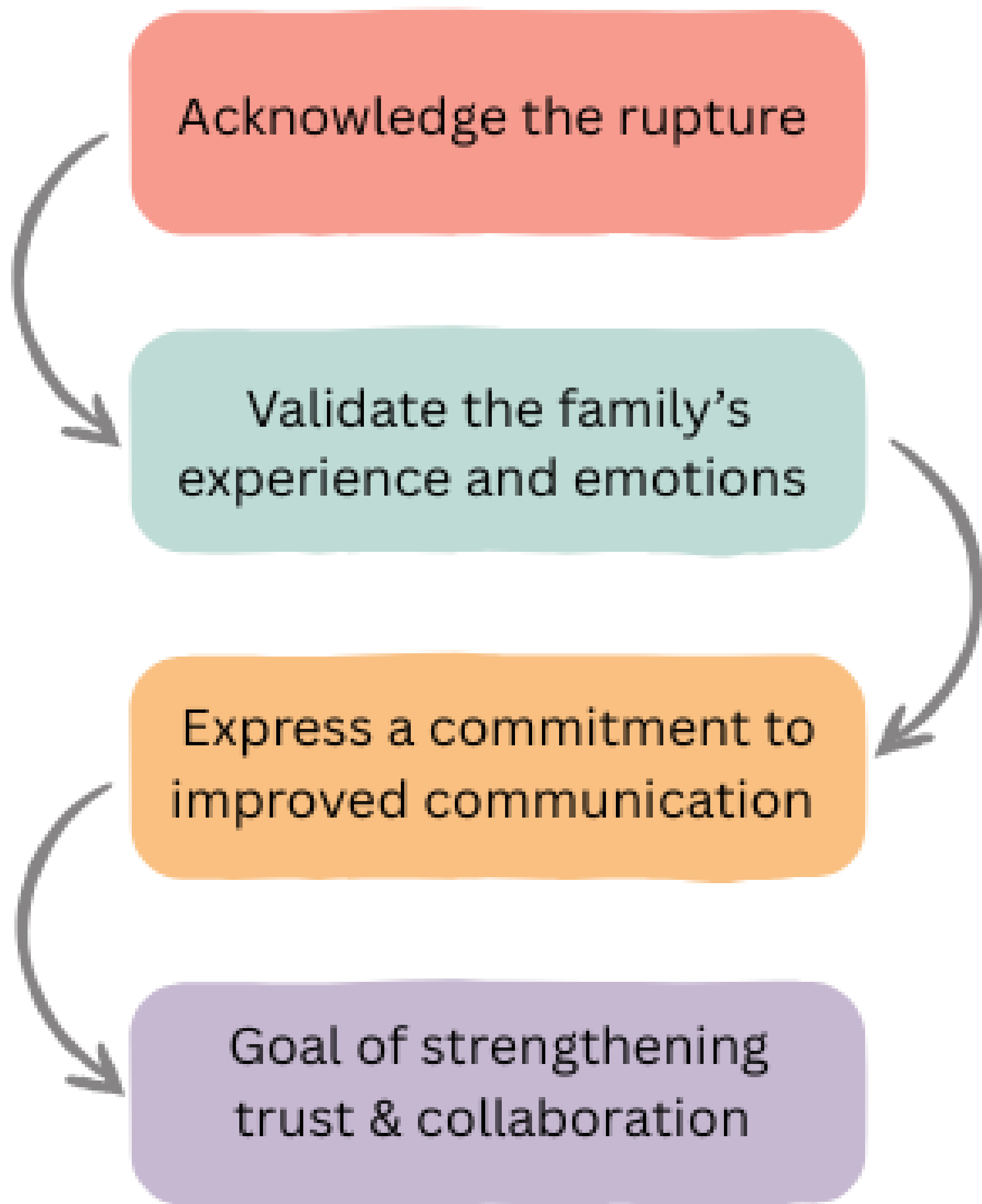
RESULTS/IMPLICATIONS FOR PRACTICE

Understanding diverse family dynamics and cultural backgrounds can support communication strategies that are inclusive & effective (cultural humility & honoring generational trauma).

Standardizing training on trauma responses and effective communication techniques can empower healthcare teams to navigate difficult interactions with sensitivity and confidence.

By promoting trauma-informed communication, hospitals can enhance family-provider collaboration, reduce stress-related barriers to care, and create a more supportive environment for families and providers.

When Ruptures Occur:



ACKNOWLEDGEMENTS

The Stein Tikun Olam Early Connections Program at Children's Hospital Los Angeles is grateful for generous support from the Tikun Olam Foundation of the Jewish Community Foundation of Los Angeles.

REFERENCES & CONTACT INFO

For a list of references, please contact Samira Amirazizi, PhD, at samirazizi@chla.usc.edu