

Jennifer Yanez Pryor (00:01.62)

Hello and welcome to Aging For All. We are your hosts. I'm Jen Yanez -Pryor.

Andrea (00:07.813)

And I'm Andrea Price and thank you all for joining us today.

Jennifer Yanez Pryor (00:12.322)

On today's episode, we have the pleasure of speaking with Paige Hector. Paige is a consultant and nationally recognized as a speaker and writer with over 25 years of experience in post-acute and long-term care settings. She specializes in diverse topics for the interdisciplinary team, person-centered trauma-informed care, nonviolent communication, sustainable process improvement, and advanced care planning.

Paige Hector (00:21.572)

Thank you.

Jennifer Yanez Pryor (00:40.358)

Paige excels at transforming complex issues and content into concepts and strategies that staff can use immediately in any setting. She writes extensively on topics relevant to nursing homes, including multiple chapters of the book, *Managing the Long-Term Care Facility*. It's currently in its second edition and due for publication later this year, so stay tuned.

Paige Hector (00:41.236)

Good.

Jennifer Yanez Pryor (01:05.57)

She serves as the editorial advisory board for *Caring for the Ages*, the publication for AMDA. This is a society for post-acute and long-term care medicine. And she is actively involved in the AMDA education committee, the diversity, equity and inclusion work group and the behavioral health advisory council, as well as national work groups to improve trauma-informed care.

In 2018, Paige was named the Gerontologist of the Year for Arizona Geriatric Society.

Andrea (01:38.618)

Hello and welcome, Paige.

Paige Hector (01:39.968)

Hi, thank you. Thank you. I'm delighted to be here as well.

Jennifer Yanez Pryor (01:40.706)

We're very excited to have you.

Jennifer Yanez Pryor (01:45.954)

We are very excited to have you today.

Andrea (01:46.374)

Right? Yes. So you have a very diverse background in this space. Can you tell us a little bit about why trauma -informed care matters?

Paige Hector (01:59.326)

Yeah, it's a huge question Andrea. And I think it's so important for many different reasons because everybody throughout their lives is going to be exposed to events, whether they categorize them as traumatic or not. They could be on a continuum of very stressful. And these events actually carry with us throughout our lifetime. So when we talk about trauma -informed care, it's the recognition that trauma,

is prevalent around in our society. So it's understanding that these things that happened to us, while they may have happened five, 10, 30, 80 years ago, it impacts the way that I show up today. So whether it's a healthcare setting, a university setting, in a classroom, as the professor, as a student, whatever roles that we have, that experience becomes part of who we are and how we show up.

So trauma -informed care is a way to think about and recognize the impact of these life events. And for me, it's really about having more compassion and understanding about the reasons and the whys that people do and say the things that they do.

Andrea (03:16.934)

Thank you. Speak a little bit more about the compassion piece of trauma -informed care. I think that the last statement you made is so crucial to this work. So can you speak a little bit more to the compassion part of this work?

Paige Hector (03:29.108)

Yeah, absolutely. So to me, compassion and empathy, empathic connection, nonviolent communication, to me, those are all kind of in the same bowl, if you will. It's a way to think about and hold the idea that everything that people do, so this kind of touches a little bit on the nonviolent communication part, everything that people do and say is an attempt to meet a human need. So when I can have...

When I can have a thought process and then I can show up in a way with the things that I do and say by understanding that this person over here, maybe I don't really enjoy what they're doing or saying, but if I can appreciate that what they are doing is actually attempting to meet a human need of which there are many.

it allows me to open my heart a little bit and to have some compassion for this person, especially when they might be doing and saying things that I don't agree with, I don't enjoy, or maybe they're actually triggering a reaction or a response in me. So this is really apropos, you know, in healthcare settings, when we're working with people, you know, by virtue of being

involved in the healthcare setting, and that's my space for almost 30 years, it can be a really difficult space. And I have that experience as a professional.

as a daughter, with older parents. And there are times that it's really difficult to be in that setting. So the more that I can bring that compassion and skills, whether I'm in the role of a patient, a family member, or even in my role as a provider, that really helps me to show up in a way that really lines up with my values, with my integrity.

Jennifer Yanez Pryor (05:16.95)

You know, listening to you talk about that is, I think, really important because it makes you think about how you interact with other people. And I'd love to hear more about the nonviolent communication aspect of this because I think that is probably a real, real significant key to really delivering trauma-informed care.

Paige Hector (05:17.556)

Get out of here.

Paige Hector (05:41.94)

Mm -hmm. Yeah, it certainly is Jennifer. So here's how I hold this together. So we have events and experiences in our life that may or may maybe categorize as traumatic and however that's defined. I don't really want to get bogged down with the definitions per se, but it can be an event, a series of events or a set of circumstances. And then we have this thing called trauma-informed care, which is really a grouping of principles. For example, empowerment, voice and choice, safety, trust.

transparency, all of these things here, those are the principles. So when I talk about principles, sometimes people will say, well, that's really nice. But then what do I do with them? Like this set of principles, they sound lovely. They look nice on paper. They look nice. Maybe in the mission statement or in a policy. But how do I make them come alive? What do I do to really make whether it's at the bedside in a health care setting, in a board meeting, in a classroom?

in a community meeting, no matter where people come together, how do we make the principles come alive? To me, the answer is nonviolent communication. So nonviolent communication is a set of skills that supports a communication model based on empathy. It's really, for me, it's the how to. So when I think about, oh, how might I bring trust, transparency, peer support, empowerment, and voice and choice?

How do I bring those alive in my work every day when I'm interacting with an interdisciplinary team in a nursing home or in a hospital or at my son's school, for example? How do we bring those alive? To me, the set of skills, the practices is the nonviolent communication piece. So to me, they go hand in hand.

Andrea (07:32.934)

All right, so we go from the principles to the action. So this is something that can be implemented across disciplines, across teams, across healthcare settings. So how do you break that down from concept to this is what I'm doing at the bedside with this patient?

Paige Hector (07:51.188)

Well, I think you have to, there's, you need to know a little bit about the skill set of nonviolent communication, which is really based on empathy. If you were to look up the word empathy, there's many different definitions. I think of empathy as a way of showing up. It's a quality of understanding another person's experience without judgment.

It's simply being present and seeking to understand what is it like for this other person? What might they be feeling? What needs are they seeking to meet? And with that empathy, I can then make a different choice. So rather than stepping forward with, and when I say judgments, that's such a big category. It could be anything like, oh, that person is so rude or that person is disrespectful or you really have to do this or those are.

different types of judgments that we might hold about other people. And keeping in mind, I can also hold those about myself. I'm not good enough. I didn't do a well enough job. I don't deserve this. So we are living at a time when these sorts of judgments are just prevalent. So they're prevalent as very young children, as we grow into teens and as we become adults. And those adults are in the healthcare settings and...

in the school settings wherever we live, work and play. So it's how we can bring the empathy of really seeking to understand what is truly going on for this other person with removing any sort of judgment from it and just attuning to what it is that they are what they are needing in that moment.

Jennifer Yanez Pryor (09:35.618)

you really clicked a light bulb for me too. Listening to you talk...

We all have.

Jennifer Yanez Pryor (09:47.202)

to provide care for others or when we're trying to interact with just another person, whether it's at work or school or in the community, you know, I think a lot of people might hear this and be like, okay, well, I could try to do this, but how do we make sure that we check in with ourselves first? Is there a process that you kind of recommend kind of kicks off this nonviolent communication process to protect ourselves as well as help others?

Paige Hector (10:17.332)

Yeah, so I think what really starts for me is checking in, is becoming more attuned to what's happening inside of me. So not only my thought processes, but my body awareness. And that's a concept that we are really attuned to in our culture. We tend to be a very much thought

processing oriented people. We kind of, I would say, get stuck in our thoughts a little bit. And we really have not, we've gotten away from integrating what is my body telling me? For example,

If I'm in a situation where I'm feeling uncomfortable and I'm noticing if I can pick up, oh, I don't like what that person's doing. They don't care about other people. They're really being rude and inconsiderate or how I can't believe they did that. And I'm having the stories that are going on in my head. I might also at the same time become aware of, oh, I'm feeling really tight in my abdomen. I'm clenching my teeth. My face is frowning, you know, or my eyebrows are squished together.

my breathing is changing. So there's a lot of physiological changes that happen that give us clues when we are in a place that we may not be comfortable with. That we might be in a situation that's stimulating some distress, which is a very broad term. So it could be a sense of overwhelm or conflict or disagreement or panic or worry. There's all sorts of things that are going on. So the more that we become aware of what's happening, what I'm thinking and what I'm feeling and how it's showing up in my body,

Jennifer Yanez Pryor (11:23.906)  
you

Paige Hector (11:45.94)

That's the first part of nonviolent communication, becoming very attuned to what is happening for me because if I am stimulated, so if I can tie this into trauma -informed care, if something in the environment has triggered a reaction in me, okay, something is happening, you know, something, maybe I'm witnessing something, maybe I'm involved in something that's just uncomfortable for me, it's triggering some kind of a reaction, becoming more attuned to what's happening for me,

getting myself aware of what is it I need in this moment, then I would be able to show up and be present for the other person or the situation. So attuning to what's happening to me then affords me the ability to be more fully present without my judgments and hopefully in a more grounded, settled state.

where I can actually, what I would call is be in choice. So in other words, when I'm stimulated and reacted because something around me is going on, I'm in a mode of where I am reacting to the environment. It's knee -jerk. I'm going to do something because I'm in a mode of protection versus response. When I can get myself to a place of how do I wish to respond, that means I'm in choice.

I'm going to show up in this particular pit and respond, not react. And that's a really key trauma -informed care principle as well, because when I can ground myself and I can choose to respond, my empowerment, my voice, my choice, I'm going to hopefully create an environment that is trauma -informed for myself and for other people.

Andrea (13:34.118)

Thank you. I love the respond and not react. Have you seen this also serve as a trust building practice between the provider or maybe in the patient?

Paige Hector (13:37.492)

Thank you.

Paige Hector (13:47.078)

Oh my gosh, absolutely. Because when we can get, so again, trust, I want to pinpoint that trust and transparency are incredibly important trauma informed care principles. So when I can get to a place where I'm creating an environment where a patient, and in my world of nursing homes, it could be a patient, a short -term stay person in a nursing home for rehab or a long -term care person that's going to live there all of their life.

You know, we all want to live in an environment where we feel safe, morally, physically, psychologically safe, but that also the people that are interacting with me, I have a sense of trust that the, and transparency about what's going on around me, that I'm involved, that I matter. So the more that we can cultivate nonviolent communication skills as healthcare providers, it really invites a sense of trust within the relationship.

with the person I'm working with because what I'm gonna do is I'm gonna make very clear choices that when a person is sharing something with me, maybe a part of their history or what's going on in the present moment or something that's happened or something they're upset about, I can really stay very present and spend that precious few moments really understanding where they're coming from without my socialized habitual...

reactions of, oh, well, let me fix that for you. Well, I think you should or have you tried this or don't worry, things are going to be fine. Those are the types of things that I call those empathic blocks. That's what they're known in nonviolent communication. That when we do things that block communication, we block the empathy. It shuts people down because especially if that patient in that moment wasn't actually seeking advice or reassurance or to be fixed with something.

Maybe they just needed to have some of the very core human needs to be acknowledged for their experience, to be understood for their experience, to have choice around their experience. That's what the connection is. That's where the beautiful, juicy, yummy empathy comes in, when we can actually give that experience to that other person without bringing that whole ball of socialization and...

Paige Hector (16:09.428)

Oh, there's a problem, let me fix it. Or have you tried this? Or we should really do that. Or no, that's not really what happened. Choosing to step away from those habitual responses and do it differently. That's where we bring trust in a relationship.

Jennifer Yanez Pryor (16:27.394)

this and you know, I see this being very empowering as well because you're saying I get to choose how I respond to something and how, you I interpret this and I shouldn't be feeding my own thoughts right into what this other person's experience is, you know. It kind of also has me thinking that, you know, when we provide care in such a way or interact with other individuals in such a way as this,

there is almost that therapeutic element there. And I'm wondering if you, you know, recommend or if it's standard practice then to include, you know, therapists and counselors on the team who can help not only mitigate some issues that, you know, patients or others have, but also the care professionals who are, like we said before, you know, we have our own stuff. So helping me work through my thing so I can be a better healthcare provider.

Andrea (17:13.912)

you

you

Paige Hector (17:27.864)

So I think what I'm hearing Jennifer is just is this content is nonviolent communication the principles and practices of nonviolent communication Do they apply to everyone and can we all? shore up our skills in this way and Bring it to the relationship So whether to what I'm hearing is that whether it's my interaction with a patient or a resident or my interactions with staff Or in a team meeting these are skills that we can all cultivate and bring

bring ourselves into a different awareness. Okay. So to me, it helps all of us do that. So in my role, whether I'm in the role of a consultant or in the role of a social worker or a trainer or a presenter or a parent, a partner, a spouse, a friend, all of our roles can benefit from these skills. And it really is, it's actually beautifully quite simple, but at the same time,

it takes effort. So to really understand, how do I bring empathy to this? How do I bring a different way of thinking and speaking and behaving to these relationships? It takes effort. So.

you know, there's a little bit of a learning curve with some of this because it really is catching how I'm thinking, catching what I might be showing up with in a way that I may not appreciate and trying something different. So there's a period of time when people first start using nonviolent communication skills in the language. It sounds a little clunky maybe. It sounds a little mechanical, if you will, a little robotic. In fact, when I first started, I can go back years and my son would say, mom, don't talk to me like that.

Andrea (18:52.102)

you

Paige Hector (19:02.612)

He just knew something was different. Mom was doing something different, but he couldn't quite figure out what. Now, years later, I'm much more fluid and it's more natural, but it's like physical. If you want to learn a hobby or grow muscle mass, you got to put the reps in, right? You got to go to the gym or get your weights out. It's the same thing that when we are trying to change how we are showing up and how we are doing things, it takes practice. It takes practice to figure out this new way of thinking and being.

Andrea (19:32.582)

Thank you, Paige. And I hear transformation, and it takes a while for this to happen. So in your experience, what have you seen in terms of the transformation in places where people accept trauma-informed care and nonviolent communication as a tool for working with patients? What has the transformation looked like?

Paige Hector (19:56.468)

Well, I think that it could be individual and it could be collective, right? It can be at the end of it. So to me, when there is empathy, when there is a connection between people and they experience the sense of being, it's the sense of being gotten, that's not quite proper English I know, but it's the expense of being gotten, like the experience of, oh, that person gets me, I'm gotten now.

Andrea (20:24.934)

Yeah.

Paige Hector (20:24.98)

It is the most magical thing that happens. There is actually, I have a side when I teach it, it's just a sense of the shoulders come down, there's an exhale, there is just, they understand me, I feel understood. It's such a beautiful transformation that happens and it's something that you wanna keep doing. Like when I can give that gift to somebody,

It doesn't mean I agree with them. I want to make that very clear. Empathy doesn't mean that I have to agree or even like another person. There's no expectation. But what it is, it's the ability to really understand where they're coming from and to appreciate what they're trying, you know, what needs they're trying to meet for themselves. So when people really can dive into this and begin, I like to bring playfulness to my work, start playing with it. And I tell staff all the time, just tell people you're doing something different. It might sound a little

strange or off or but bring a lightness to it and the more that we can have staff and providers in whatever role they are start playing with this and start doing it. You know you could just say I'm trying this nonviolent communication it's a it's a different way of thinking and showing up. I hope that you'll play with me a little bit this is what I'm going to try. It really can be very magical the transformations and the changes that we see in people because what I think happens

The beautiful part of that is we can shift away from the defensiveness, the argumentativeness, the criticism, all of those things that we're socialized and habituated to do. Like if we're having a

conversation and I may not agree with something that either of you have said, what I've been taught and socialized to do is argue with you, counterpoint. Then you're gonna counterpoint me and point and counterpoint. And we're doing this dance and I don't wanna dance anymore. So what I'm doing is I'm stepping out of that socialized way of being.

And I'm saying, I'm going to show up differently. I really want to understand. I want to get this person. What is it they're trying to express here? And then I'm going to make a request, which is a beautiful part of nonviolent communication of actually asking for what you need, making a request. Andrea, I hear that this was what was important to you. I'm wondering if it was like this. And you're like, oh, yes, that's it. And you have the experience of feeling heard and understood. And then I might say to you, golly, would you be willing to listen to me and let me share with you what.

Paige Hector (22:45.844)

this was going on for me. I'm wondering if you'd be open to see now I'm asking you and I'm only doing that when you have had the experience of fully being understood for what's important to you. So imagine doing that at bedside with a patient or a family member or a colleague is just the most beautiful thing to me when that happens.

Jennifer Yanez Pryor (23:08.314)

Paige, I know we've been talking about some really honestly complex concepts here and we've, you know, I think boiled them down in a way that beautifully captures the why. Why would we want to do this, right? And you've provided some really great resources that we have linked on our blog for our listeners and I was wondering if you could talk about what we...

can further dive into with these resources because I think by now they may be thinking, this sounds great, but I don't really still know what I'm supposed to do or how to approach it.

Paige Hector (23:46.1)

Okay, so I love that question. So now this is getting into, how do we do this? Like, right, where do we start? So to me, there's a different things. So the resource you're talking about, Jennifer, I've called all of the things that I have in my office, just reams and books and files and accordion files, it's all over the place. It's just, I've really delved into this and I wanted to create a handout that could give people, first of all, it's open access, they're free resources, there's lots of content out there.

And I wanted to say, hey, if you're interested, if this is exciting for you, start with those resources. Some of them are just a page or two handouts. It just might talk about some of the principles and practices of nonviolent communication. So it just gives people what I call a springboard, like, oh, where do we go now? Oh, I like this one. This works for me, or this really spoke to me. There's not a right or wrong with this. I just want to bring this idea of curiosity and playfulness to this work.

that this is not, I don't want it hanging on people like, oh, I have to do this because it's not at all. It's really thinking, oh, I really could show up differently. So those resources, they're available. There's tons of books. I have all those listed as well. The library is expensive, extensive in terms of what the books are. I would probably say to start with the original book by Marshall Rosenberg, who was the founder psychologist. He died several years ago, but he is like, I guess the father, if you will.

of nonviolent communication, he brought it into the world. This was his idea. And then from here, people, colleagues and people that have just taken it and created more beautiful, diverse resources in the form of books and videos and websites. There's so much out there that's available. The other thing, too, and I'm going to do a little and I know people will hopefully be able to hear this, so listen closely.

That's a laminated sound, okay? I have a little sound effects on your podcast. So what I'm looking at that you can't see, but hopefully you heard is a feelings and needs list. And this was a huge thing for me to be able to actually appreciate the big part of nonviolent communication is our shared human needs. So the two of you, my family, your family, people across the world in different countries, different ages, socioeconomic statuses,

Paige Hector (26:04.148)

All of us as human beings share human needs. And this is a list. So if you were to Google, you know, nonviolent communication, human needs, you're going to get variations of these resources. I keep this on my desk. And what it has done over me for me over the years is help me expand my vocabulary. It was a conscious choice to say, oh, I've got an email. Not really sure what to do with this. What am I feeling? What am I needing right now? What's going on for me? And then I can choose how to show up.

So the more you become your vocabulary around what it is you're feeling and what needs of yours are met or not met. So let me just give you a few examples. I want to make it more, a little bit more granular. When I talk about human needs, human needs for harmony, for peace, for laughter, for fun, consideration, for choice, to be understood, for self -compassion, for celebration and gratitude and food and water and comfort and exercise. There's,

I could just go on and on. So what is the need that I'm trying to meet in this moment? And that as we expand our vocabulary around those, it's really quite fun because then I can start guessing for other people. Oh, I'm wondering if they're meeting this need. Oh, interesting. I'm driving to the grocery store and this person over here is doing something in their car that's I'm feeling really nervous. Are they meeting a need for this? What is my need? So I begin to have an unconscious dialogue around this that just naturally bubbles up.

And that's what happens that the more that you, you bring it into your life and commit to looking at resources and practicing, that's where I would start.

Andrea (27:45.03)

Thank you very much, Paige. Your passion for this work is clear. It comes through the enthusiasm. And I have learned so much in our brief time together. I have tons of notes I've written. Showing up differently is okay. If I don't take anything from this, this work, if we are showing up differently, it's okay. So thank you for that. Our time is coming to a close. Is there anything else you would like to share with our listeners?

And before we wrap.

Paige Hector (28:16.852)

Well, just to express appreciation for the two of you, what you're doing with this podcast series. And I want to just bring, I want to be a wellspring of hope for people. Like when I look and I really don't look at the internet very much, because it's just incredibly, I feel incredibly sad and discouraged and a sense of despair at times. I want to say that there are really good things happening as well that we can choose to show up differently as individuals in all of the roles that we have. And I think that that's why nonviolent communication, when I,

I'm teaching this across the country and people when they hear it, they're like, just a quick story. I was at a conference last week and I taught a session on trauma informed care and the process, the practice of mourning, which is a huge part of nonviolent communication to express our grief in the morning. I had a medical student come up to me, literally tears in her eyes and she said, thank you so much. We didn't get any of this in medical school. And by this time we're both got tears running down our face because it was so human.

So not only could she have it for herself, but she'll bring it to her patients. So there is something that we can do. We do have hope and together we can make a difference for all of us.

Jennifer Yanez Pryor (29:28.13)

Well, thank you so much, Paige, for joining us today. And I want to thank our listeners for tuning in. It has been such a pleasure. Andrea, I have learned so much today that I can't wait to dig into later.

Andrea (29:31.672)

you

Andrea (29:42.47)

Thanks again and please join us next week for another amazing episode of Aging For All.

Paige Hector (29:49.652)

Thank you.