

<https://www.youtube.com/watch?v=1Evwgu369Jw>

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Prepared By: Colby J. Odom, M.S.W., L.M.S.W.

Green Country Behavioral Health Services

Introductions

I am Colby Odom, a licensed Social Worker who is trained in play therapy, psychoanalysis, and Dialectal Behavioral Therapy. I am currently in the last 4 months of a 24-month training (Post Master's level) to become a Registered Play Therapist.

My work experience includes Oklahoma Child Welfare, Hospice & Palliative Care, and Community Mental Health.

In 2023, I was voted the #1 Hospice Social Worker in Oklahoma, and I currently serve as the Continuing Education Director for the Oklahoma Board of Play Therapy until 2028.

I have worked with cases involving child abuse, homicide, suicide, severe mental illness and everything in-between. I am passionate about helping my community deal with trauma and pain.



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Colby Odom, LMSW



The Healing Relationship: Client-Centered Care, Trauma, and Burnout in Nursing

Prepared By: Colby J. Odom, M.S.W., L.M.S.W.

Green Country Behavioral Health Services

**What is the most powerful
thing you can give to your
patients?**

Not medicine.

Not fancy equipment.

Not the perfect diagnosis.

**What is the most powerful
thing you can give to your
patients?**

Your Presence.

Purpose

The end goal is to develop an understanding of the following purpose driven objectives

PURPOSE 1

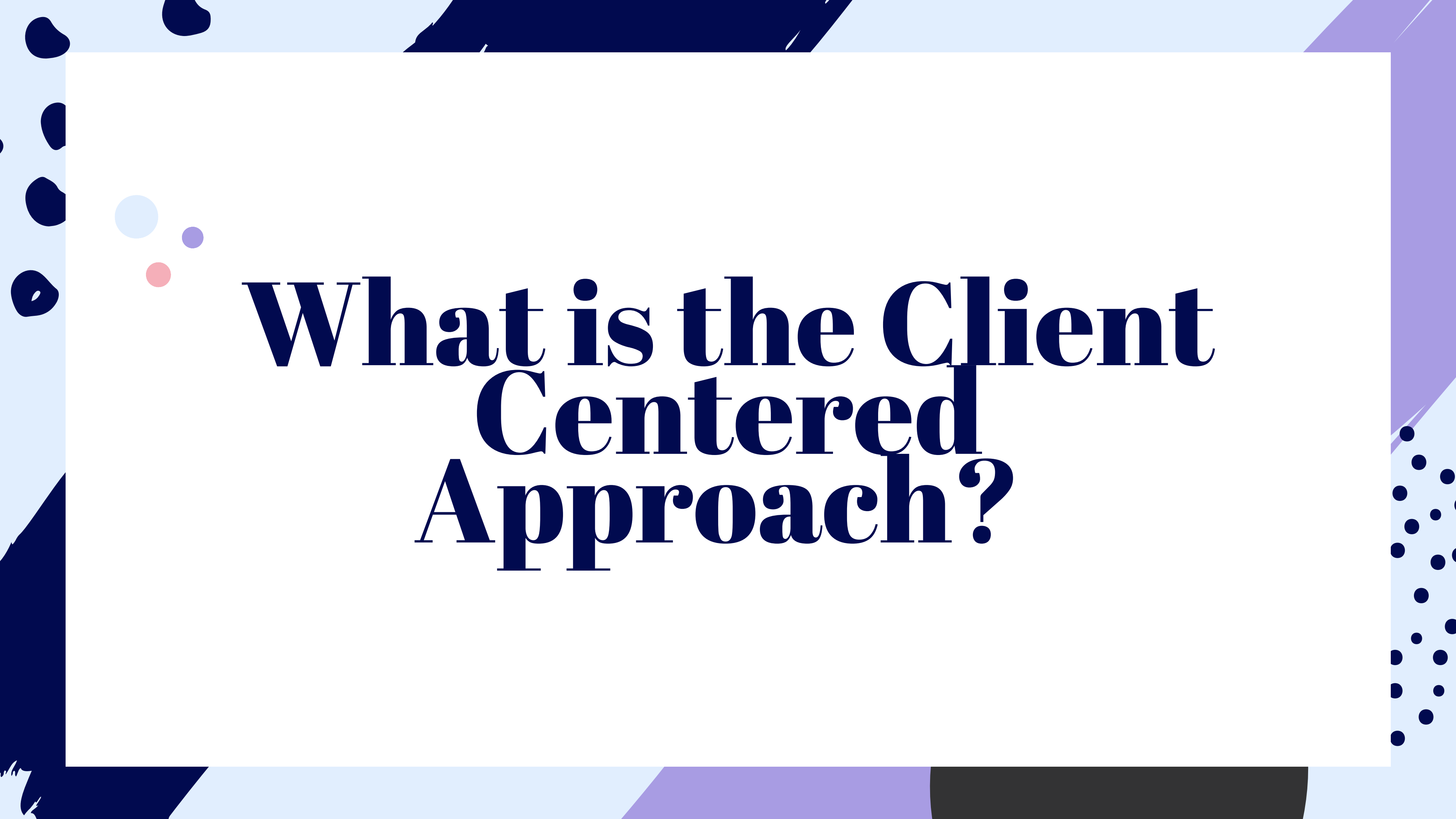
What is client-centered therapy?
How do we apply these
approaches to practice?

PURPOSE 2

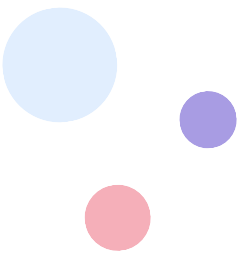
How does trauma impact clients,
caregivers, and self?

PURPOSE 3

What is the evidence to support
this practice with clients and
ourselves?



What is the Client Centered Approach?



Client Centered Therapy was developed by Carl Rogers
in 1957.

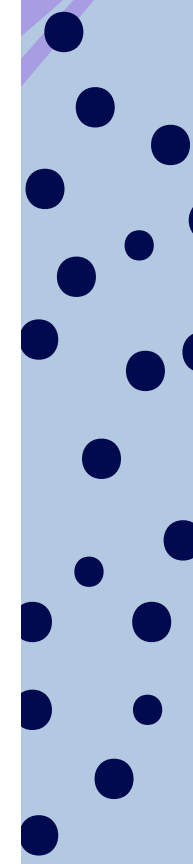
In a plain language, client centered means:

The client is the expert of their experience.

The provider creates a condition for healing.

Change occurs through a safe and empathetic
relationship.

Client Centered Approach



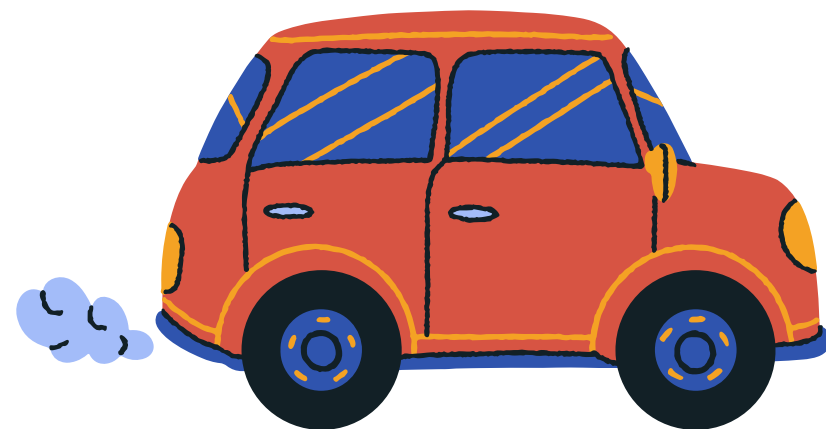
The relationship is the vehicle for change.

No diagnosing

No fixing

No “telling them what to do”

(Rogers, 1957)



Client Centered Approach



YOU are the Intervention

Think about the BEST nurse that you have ever worked with or the one you felt the safest with as a patient.

What did they *actually* do?



YOU are the Intervention

“They LISTENED”

“They did NOT rush me”

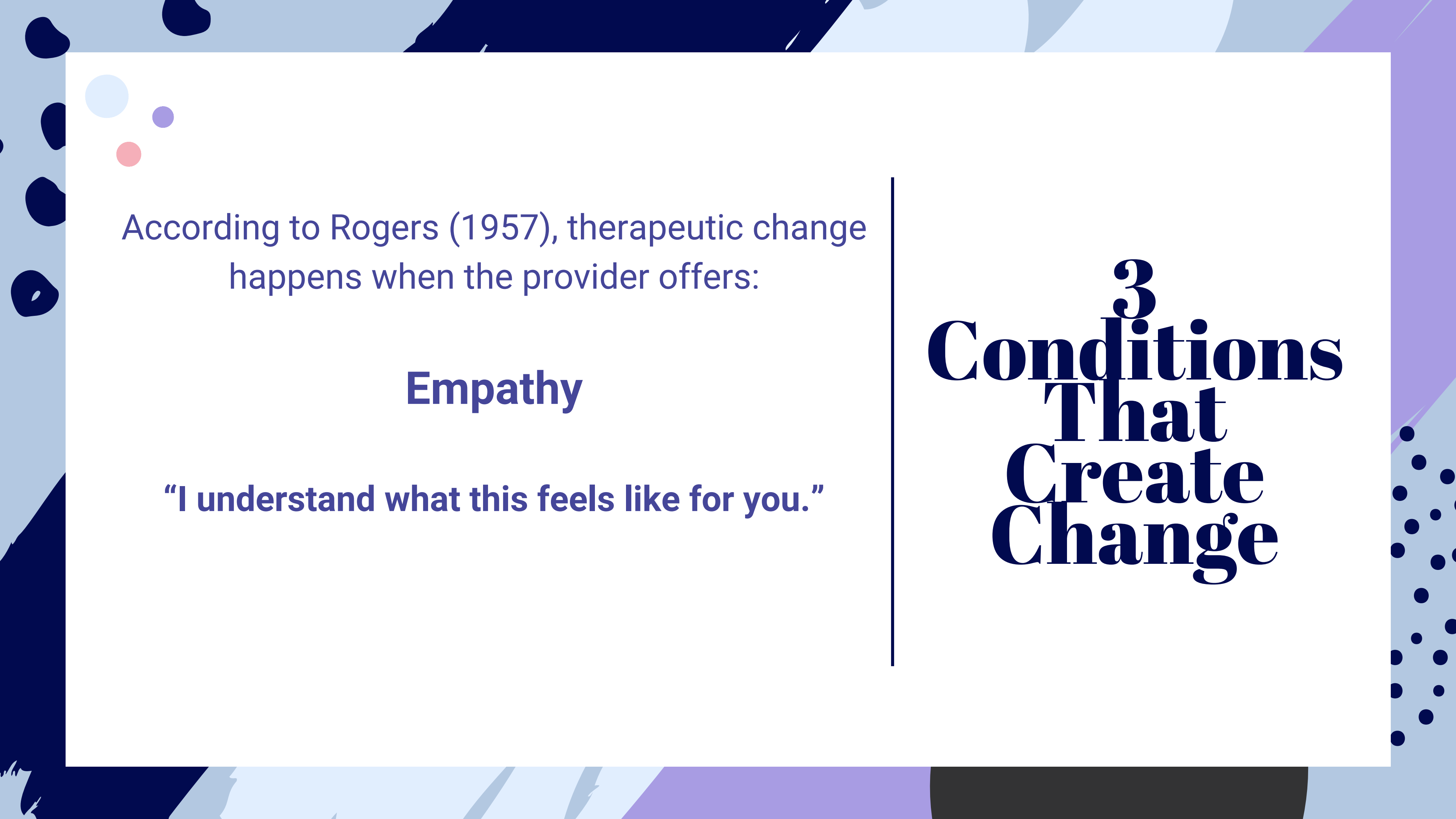
“They did NOT judge me”

“They heard me”

What this is describing is one of the
greatest forms of evidence based therapy.

It is easy to assume that
therapy = techniques

Remember, **the relationship IS the
treatment.**



According to Rogers (1957), therapeutic change happens when the provider offers:

Empathy

“I understand what this feels like for you.”

3 Conditions That Create Change

Unconditional Positive Regard

“You are not broken. You are worthy of care exactly as you are.”

(Rogers, 1957)

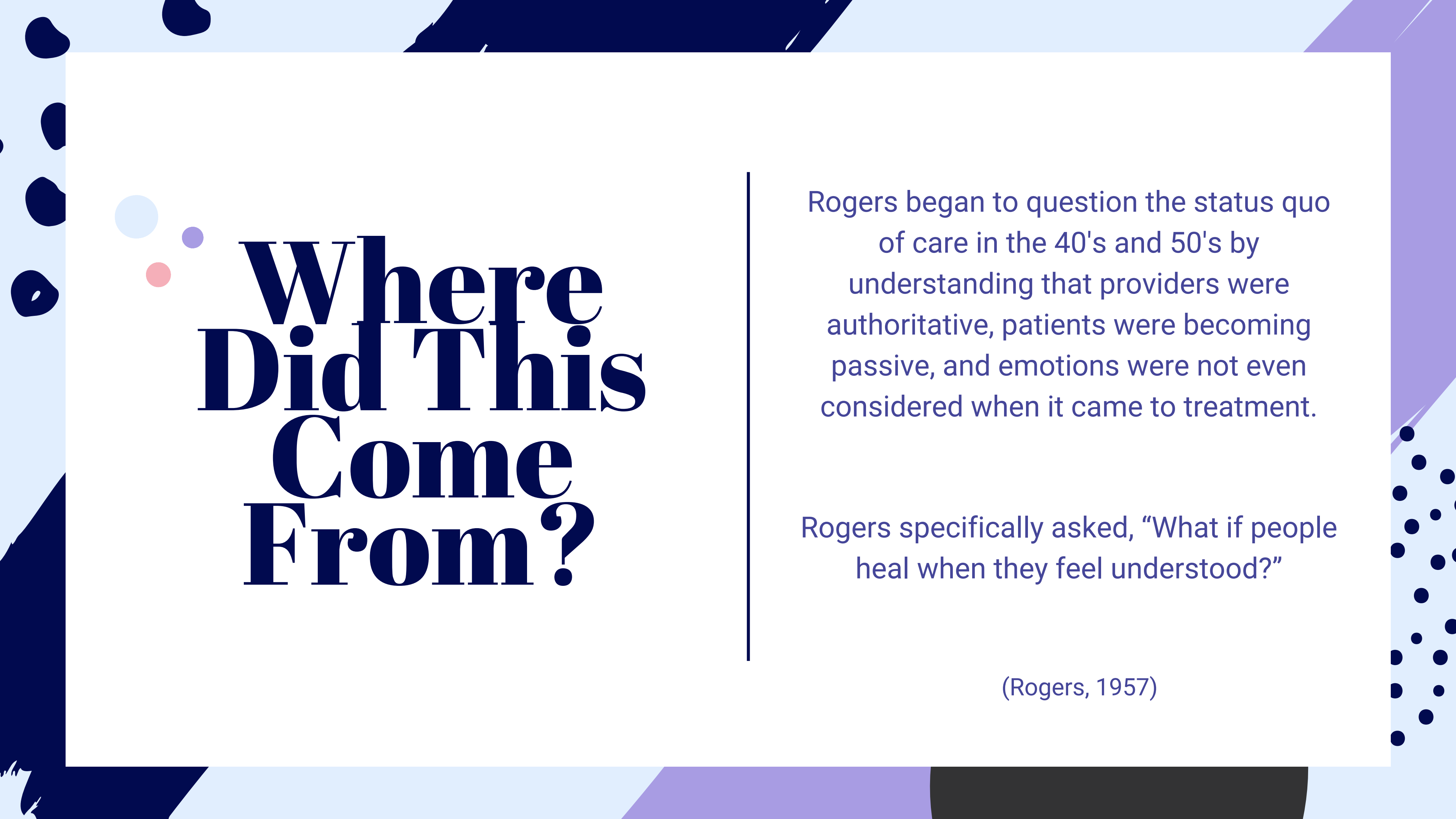
3
Conditions
That
Create
Change

Genuineness

“I am real and I am not performing a role.”

(Rogers, 1957)

3 Conditions That Create Change



Where Did This Come From?

Rogers began to question the status quo of care in the 40's and 50's by understanding that providers were authoritative, patients were becoming passive, and emotions were not even considered when it came to treatment.

Rogers specifically asked, “What if people heal when they feel understood?”

(Rogers, 1957)



Where Did This Come From?

Years later, evidence-based research confirmed that Client Centered therapy is effective across many different diagnosis.

It also showed outcomes comparable to more directive forms of therapy.

(Elliot et al., 2013)



Why Does This Matter to Nurses?

Nurses may not be “doing therapy” but they are **constantly** developing relationships in a therapeutic way.

Examples:

Delivering bad news

Managing chronic illnesses

Responding to distress

Caring for trauma exposed patients



Why Does This Matter to Nurses?

Research shows:

Patient centered communication improves satisfaction, understanding, and outcomes.

Empathy and relationship matter even in brief encounters

(Dwamena et al., 2012)

What it sounds like:

“That sounds overwhelming.”

“You have been dealing with a lot.”

“Help me understand what this has been like for you.”

What it avoids:

“At least...”

“You should...”

“Try not to think about it.”

(Rogers, 1957)

Care in Action

Client Centered Care Asks Nurses To:

Be emotionally present

Tolerate Uncertainty

Resist the urge to “fix” too quickly

Client centered care is not “doing more”
It is **doing differently.**

(Dwamena et al., 2012)

What This Asks of Nurses



Things to Remember

Client centered therapy is grounded in **empathy, respect, and authenticity**

It was founded by Carl Rogers and is strongly supported in research

Most nurses already practice these techniques, often without a name.

The relationship is not extra- **it's central**

Your presence matters more than you think.

Burnout & Trauma Among Nurses

Why Does This Matter?

Reason 1

Nursing students are not immune to trauma.

In fact, research suggests that nurses and nursing students experience trauma before they graduate. Many reasons for this include:

Clinical Demands

Academic Pressure

Emotional Strain



Why Does This Matter?

This matters because it directly impacts a student's mental health.

Your mental health is already shown to affect your capacity to learn, your ability to perform clinical tasks, and your ability to transition into the nursing profession.

Burnout and stress reduce two major skills.

Empathy & Compassion

*Two skills which are **essential** to nursing practice.*

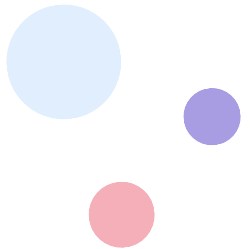


According to Ferri et al. (2015), Empathy is not only needed but necessary for high quality care within the nursing profession.

In other words, you cannot have high quality care **without** having empathy.

The studies have overwhelmingly shown that the higher level of empathy- the lower the risk of burnout in both nurses and nursing students.

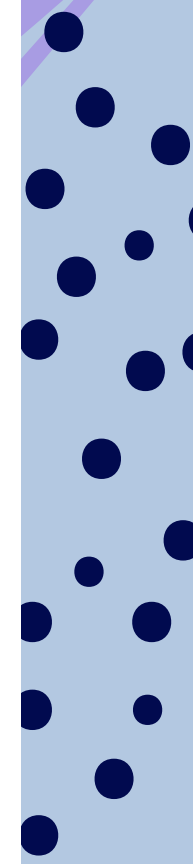
Empathy & Compassion

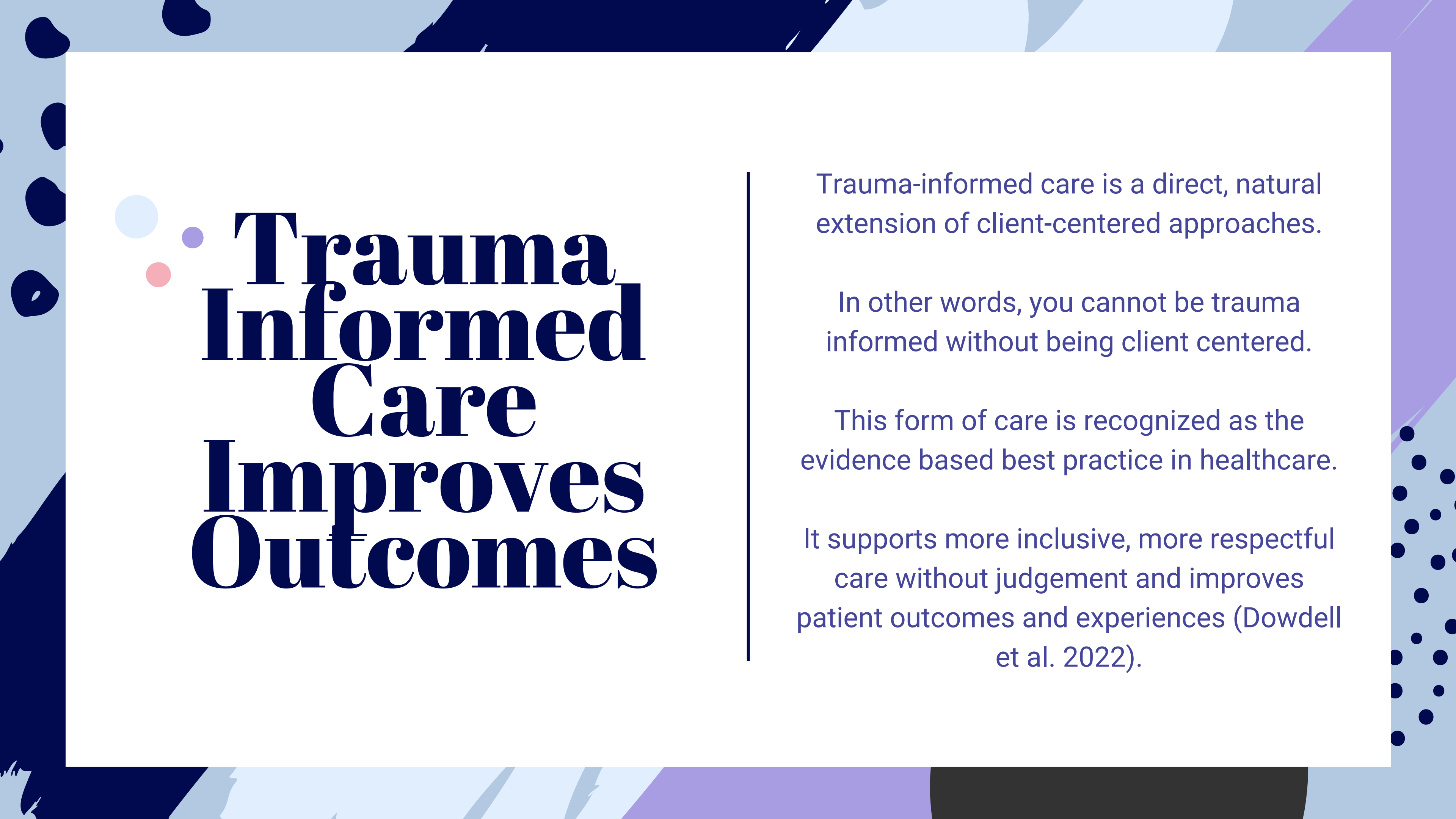


Empathy strengthens therapeutic communication and trust with patients.

When students and nurses understand how burnout removes empathy, we become more motivated to practice our own self-care and resilience to maintain higher qualities of care (BMC Nursing, 2024).

**How does
this
relate to
students?**





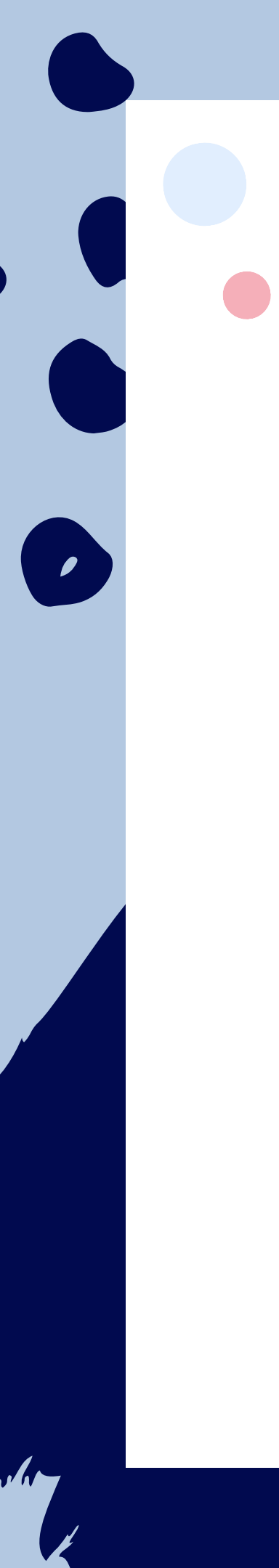
Trauma Informed Care Improves Outcomes

Trauma-informed care is a direct, natural extension of client-centered approaches.

In other words, you cannot be trauma informed without being client centered.

This form of care is recognized as the evidence based best practice in healthcare.

It supports more inclusive, more respectful care without judgement and improves patient outcomes and experiences (Dowdell et al. 2022).

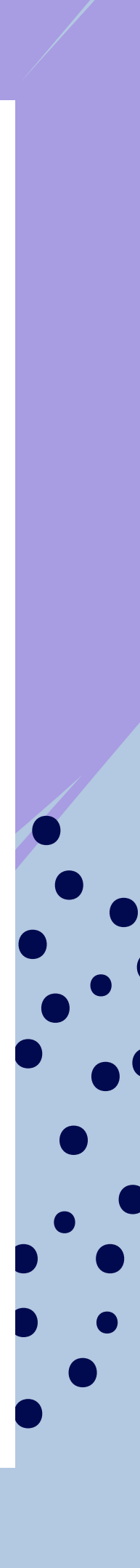


Nurses see patients every single day with trauma history across every single setting which includes emergency room, hospice settings, family medicine, and more...

(I think you all might be the experts in this area but know that even a simple interaction can encounter a history of trauma!)

Understanding trauma can help students and nurses avoid retraumatizing patients *and* foster a deeper therapeutic support.
(Dowdell et al. 2022).

How does this relate to students?



Burnout



Burnout among nurses has shown direct and consistent evidence with:

A decrease in patient safety

A lower quality of care

Reduced patient satisfaction

Regardless of **nurse experience or clinical setting**

(Li et al, 2024)

• Burnout



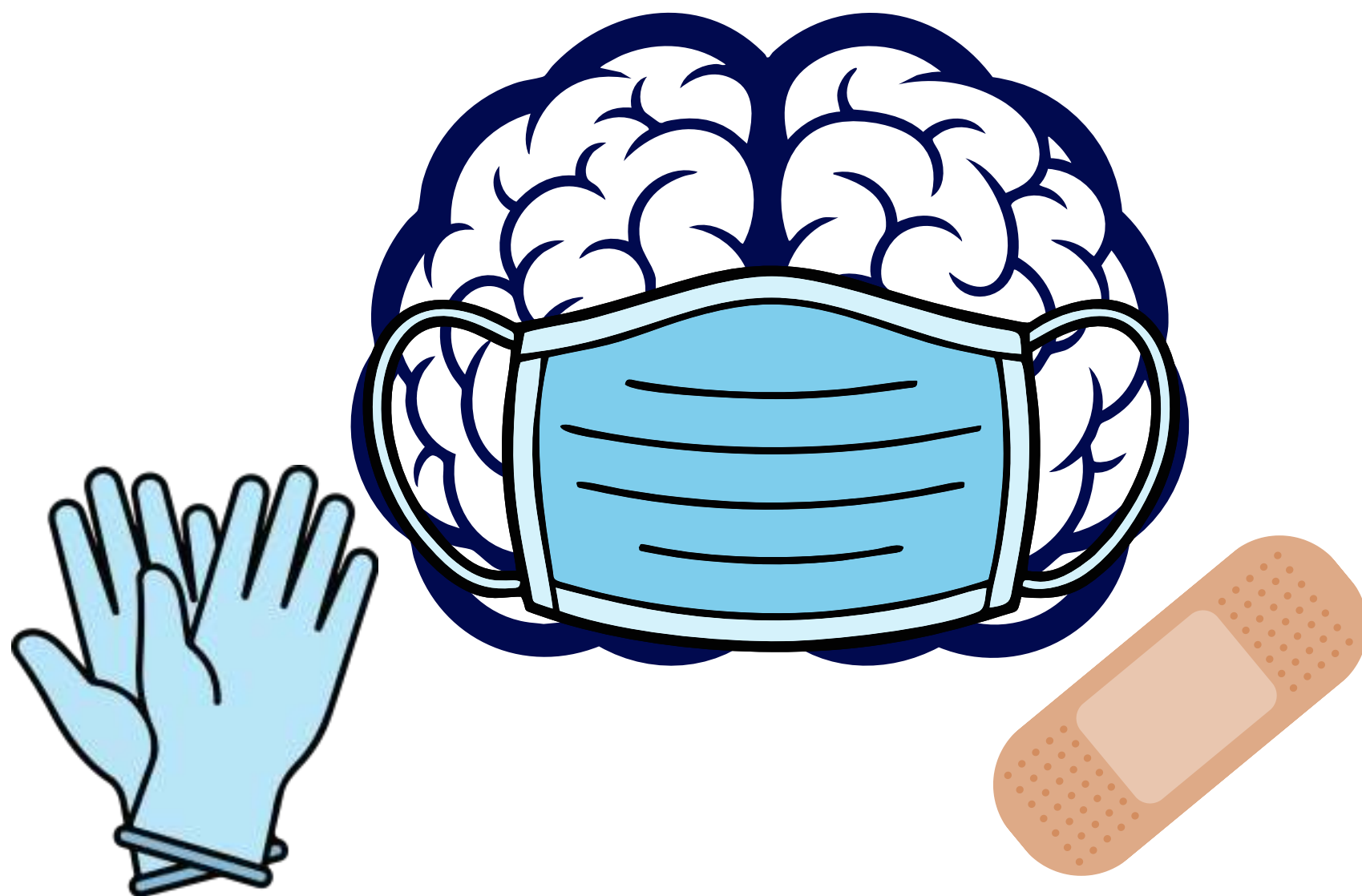
It's kind of a big dill

As future nurses, you are tasked with taking in the clinical knowledge, maintaining a high quality of care, and meeting the standard for safety and security

Burnout undermines **all of these things.**

(Alhalal et al, 2025)

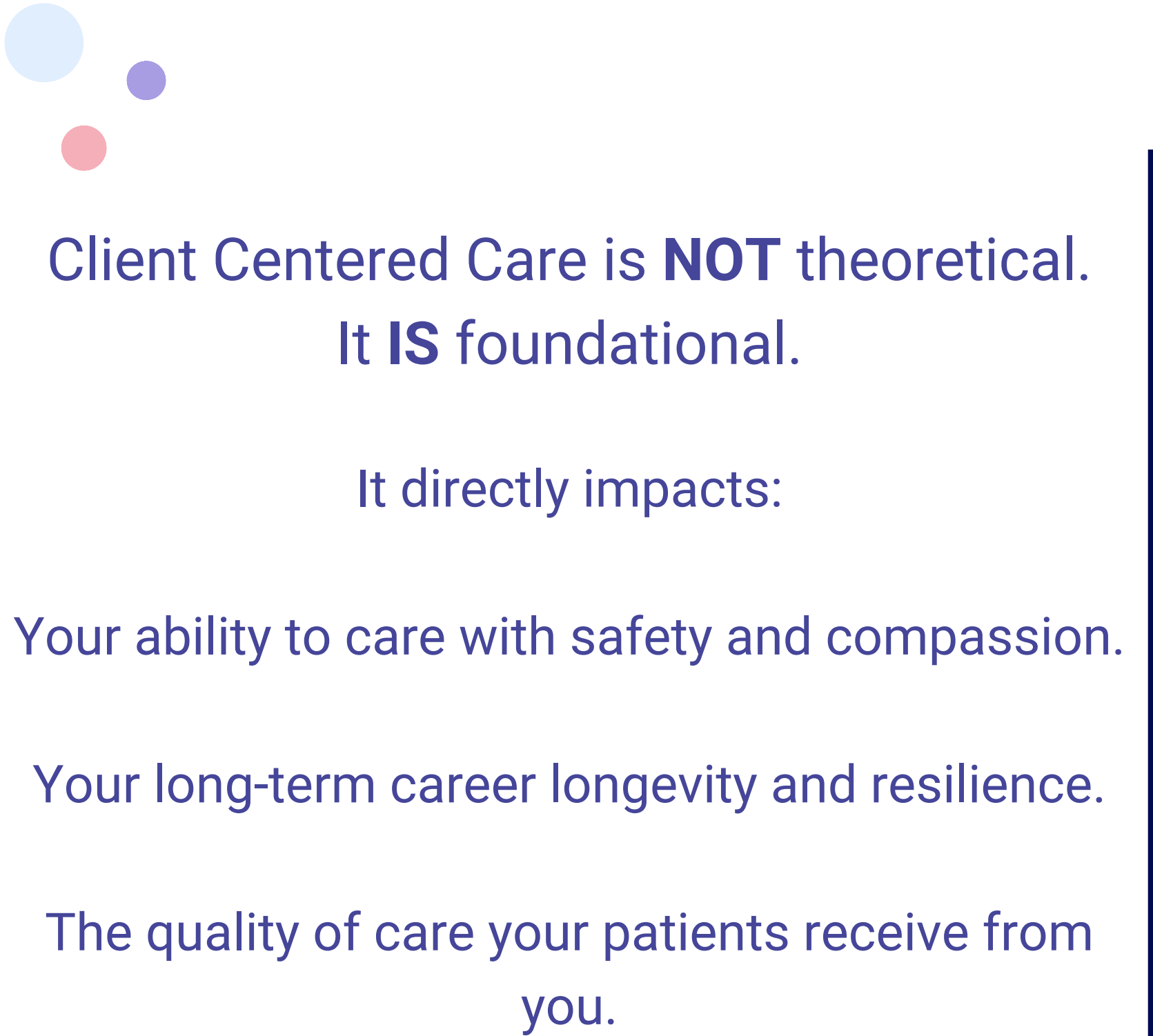
Protective



Trauma Informed and Client Centered approaches are not just “ways to be nice” but are scientifically linked to better outcomes for nurses which include lowering the risk for secondary trauma and burnout.

Learning these skills early builds psychological resilience and protects you from burnout and compassion fatigue.

(Alhalal et al, 2025)



Client Centered Care is **NOT** theoretical.
It **IS** foundational.

It directly impacts:

Your ability to care with safety and compassion.

Your long-term career longevity and resilience.

The quality of care your patients receive from
you.

Key Takeaways



TAKEAWAY



I appreciate your feedback

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