Self-Care

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Self-Care for the Caregiver

- Multiple Role of the Staff:
- Compassion fatigue
- Effects of working with victims exposed to traumatic events, violence, disasters, war, humanitarian crisis, loss of loved ones, community
- Secondary traumatic stress; Vicarious trauma; Indirect trauma
- Stress Management and Relaxation
- SAFETY!!!!!!!!!!!!

Challenges

- Emotional drain from empathizing
- Difficult client population
- Long hours with few resources
- Ambiguous success
- Unreciprocated giving and attentiveness
- Failure to live up to one's own expectations
- Professional isolation

Compassion Stress

- Compassion stress is seen as a *natural* outcome of knowing about trauma experienced by a client, friend, or family member, rather than a pathological process. It can be of sudden onset, and the symptoms include:
- Helplessness
- Confusion
- Isolation

Compassion Fatigue

- Considered a more severe example of cumulative compassion stress. It is a defined as "a state of exhaustion and dysfunction, biologically, physiologically, and emotionally, as a result of prolonged exposure to compassion stress

Posttraumatic Stress Disorder (PTSD)

- Re-experiencing
  - Awake/Asleep
  - Biopsychological Distress
  - Secondary Reminders
- Avoidance/Numbing
  - Emotional Numbing
  - Social Detachment
  - Memory Loss
- Hyperarousal
  - Anxiety
  - Irritability
  - Insomnia
  - Poor Concentration
  - Hypervigilance

Vicarious Trauma

Vicarious Trauma: Normal cognitive or emotional changes when working with trauma survivors

- Becoming judgmental of others
- Having a reduced sense of connection with loved ones and colleagues
- Becoming cynical or angry and losing hope or a sense of meaning
- Rescue fantasies, becoming over involved
- Heightened protectiveness/decreased sense of the safety of loved ones
- Avoiding work and social contact

Secondary Traumatic Stress

Secondary trauma: Symptoms of PTSD that mirror those experienced by clients

- **Hyper-arousal (heightened reactivity -- startle, heart rate, pulse)**
- **Intrusive symptoms**
- **Avoidance or emotional "numbing"**
- **Anxiety**
- **Depression**


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Who and When is at greatest risk?

- Exposure to life threatening danger or physical harm (especially to children)
- Exposure to gruesome death, bodily injury, or dead or maimed bodies
- Extreme environmental or human violence or destruction
- Loss of home, valued possessions, neighborhood, or community
- Loss of communication with or support from close relations

Who and When is at Greatest Risk?

- Intense emotional demands (such as searching for possibly dying survivors or interacting with bereaved family members)
- Extreme fatigue, weather exposure, hunger, or sleep deprivation
- Extended exposure to danger, loss, emotional/physical strain
- Exposure to toxic contamination (such as gas or fumes, chemicals, radioactivity)
- Exposure to other traumas
- Chronic medical illness

Where do we want to be?

- Relationship with meaning and hope
- Ability to get one's psychological needs met
- Intelligence
- Willpower
- Sense of humor
- Ability to protect oneself
- Memory/Imagery

What is important?

- Existential sense of connection to others
- Self-capacities, including:
- The enduring ability to maintain a steady sense of self
- Tolerance for a range of emotional reactions in one's self and others
- A sense of inner connection to others
- A sense of self as viable, worth loving, deserving
- A sense of self that is grounded

Managing Providers in Disasters

- Mandated rotation:

Move providers from the most highly exposed assignments to varied levels of exposure

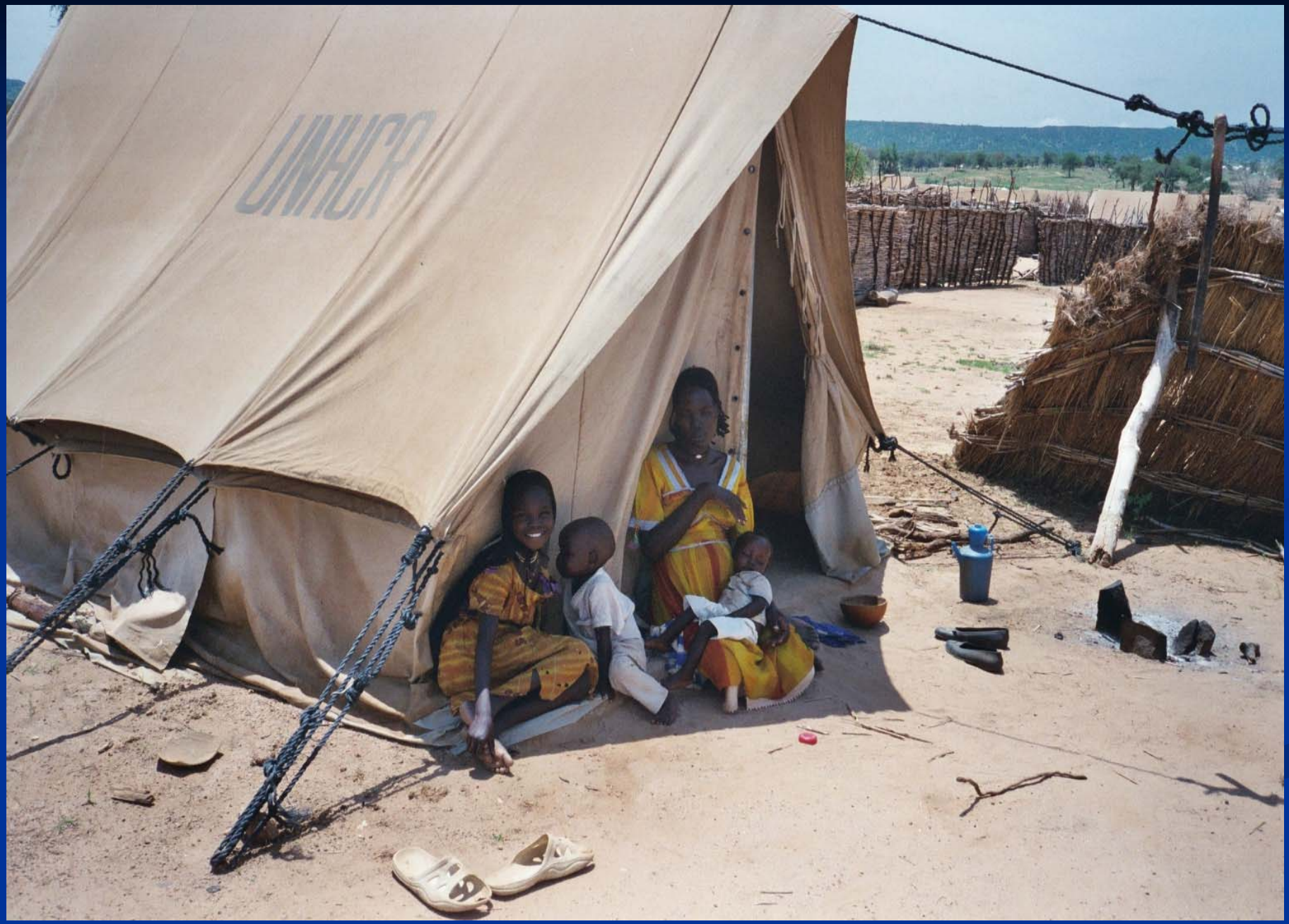
- Enforced Support:
  - Supervision
  - Case conferences
  - Appreciating staff contributions
  - Peer partners and peer consultation
- Monitor providers who meet certain high risk criteria (use of standardized measures)
- Conduct trainings on stress management practices

Personal Preparation

- Limit daily numbers of most severe cases
- Utilize buddy system to share distressing emotional responses
- Use benefit time—vacations, personal time
- Access supervision routinely
- Practice stress management exercises during relief work shifts
- Stay aware of limitations and needs

Before

- Personal preparation
- Stress and strain monitoring
- Relaxation, recreation, intimacy
- Managing personal resources
- Planning for family/home safety
- Team and organizational preparation
- Using standardized measures to assess stress levels
- Defining roles and rehearsing team interventions
- Insuring a coordinated organizational plan for disaster response
- Educate coworkers and management
- Bring items necessary to survive in disaster area
- Bring materials to use when not doing relief work (Ipod; Books: portable DVD/CD players, magazines, etc.)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During

Make every effort to:

- Self-monitor and pace your efforts
- Maintain your boundaries
- Regularly check-ins with colleagues, family, and friends
- Work with partners or in teams
- Take brief relaxation/stress management breaks
- Use regular peer consultation and supervision
- Take time-out for basic bodily care and refreshment
- Accept that you cannot change everything
- Try to be flexible, patient, and tolerant

During

- Make every effort to avoid engaging in:
  - Working too long by yourself without checking in
  - Working “round the clock” with few breaks
  - Feeling like you are not doing enough
  - Excessive intake of sweets and caffeine

- Common obstacles to self-care:
  - “It would be selfish to take time to rest.”
  - “Others are working around the clock, so should I.”
  - “The needs of survivors are more important than the needs of helpers.”
  - “I can contribute the most by working all the time.”
  - “Only I can get the job done.”

After

- Expect a readjustment period upon returning home
- Schedule time for a vacation or gradual reintegration into your normal life
- Make personal reintegration a priority for a while
- Make every effort to engage in rejuvenation activities
- Find things that you enjoy or make you laugh
- Discuss situation with coworkers and management
- Participate in formal help if extreme stress persists
- Ask help in parenting, if you feel irritable or have difficulties adjusting

After

- Prepare for worldview changes that may not be mirrored by others in your life
- Increase experiences that have spiritual or philosophical meaning to you
- Shift Frame from Helper
  - Practice receiving from others
  - Try at times not to be in charge or the “expert”
  - Let go what you can’t control
  - Know the world won’t fall apart without you
- Make meaning of the work


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After

- Make every effort to avoid:
  - Excessive use of substances
  - Making any big life changes immediately after returning from relief work
  - Negatively assessing your contribution to relief work
  - Worrying about readjusting
  - Obstacles to better self-care:
    - Keeping too busy
    - Making helping other more important
    - Sharing constantly about experiences and telling graphic “war stories” with those not familiar with relief work

Managing Stress:

- Connection with coworkers
- Take a breaks
- Defuse briefly whenever you experience troubling incidents and after each work shift.
- Talk about events as they arise
- Don't take anger too personally - it's often an expression of frustration, guilt, or worry.
- Mood swings will diminish with time.
- Don't overwhelm children or your families with your experiences
- Other forms of expression such as journal writing, hobbies, and exercise are recommended.

Compassion Satisfaction

Work that brings meaning into your life, increased sense of purpose and strength, and heightened their sense of connection with others. Often these individuals took breaks, sought assistance or mentoring, or increased self-care when they began to see signs of negative effects. These professionals were able to resume their work and/or feel decreased stress and an overall gratitude for this work with time.

- Sense of strength
- Self-knowledge
- Confidence
- Sense of meaning
- Spiritual connection
- Respect for human resiliency

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