Welcome

Self-Care Basics in HCH Settings

Tuesday, January 8, 2013

We will begin promptly at 1 p.m. Eastern.

Event Host:

Victoria Raschke, MA
Director of TA and Training

National Health Care
for the Homeless Council

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Presenter

Nicholas Apostoleris, PhD

Clinical Associate Professor of Family Medicine & Community Health, University of Massachusetts Medical School

Health Center Director, ACTION Health Services

Psychologist & VP of Behavioral Health Services, Community Health Connections, Inc.

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Objectives for this Webinar

The learner will:

- o Understand what is meant by self care, vicarious traumatization, and compassion fatigue

- o Understand signs that more effective self care is needed

- o Understand what an individual can do to better their own self care

- o Understand what an organization can do to promote self care in its employees

What is meant here by self care?

the caregiver caring for his or her

emotional,

physical,

and spiritual self

so as to strengthen and make her or him more resilient and healthy

Not...

...so that you can see more patients.

Self Care as...

Self-awareness

Self-regulation

Finding balance

Baker (2003)

Self-awareness

We all have our histories

Our areas where we're sensitive

Areas where we are A OK and can handle tough situations

Areas where we need support, consultation, or supervision

Self-regulation

Self-awareness is necessary but not sufficient for self-care

Self-awareness as 'assessment'

Self-regulation as determining a plan to address the needs found in the self awareness assessment and then...

taking action to carry out the plan

Finding balance

Determining the major fault lines and the direction of the stresses pulling along those fault lines

Determining what needs to be balanced

This will likely differ from person to person

Stress and tension are not necessarily to be eliminated

Stress and tension can be drivers of innovation and change

Stress and tension can also be destructive

Where are the fault lines or potentially destructive stresses in your life?

Assessing stresses

For some, life without stress is boring or unfulfilling

For all, poorly managed chronic stress is a health and wellbeing hazard

So the key task is determining which stresses are manageable and which are not

- Self-awareness

- Using people who know you well to reflect outward signs of poorly managed or overwhelming stress

- Accessing professionals

Examples of stresses expected in HCH settings

Boundary-related stresses

- Helping versus going 'too far'
- Being asked to provide services beyond level of competence when there are no good alternatives for the patient

Empathy-related stresses

- Provide empathetic listening versus protect one's self against vicarious traumatization
- Empathizing with a client who has committed grave offenses

Frustration-related stresses

- Overwhelming number or severity of problems
- Hard to see progress
- System related inefficiencies or impediments

Insufficient self care is associated with...

Burnout
(Miner, 2010)

Burnout defined as emotional exhaustion, depersonalization towards clients,
   reduced sense of personal accomplishments regarding work
(Maslach 1986)

Work-related manifestations of burnout include:
   Diving in to the work at the expense of self-care
   Giving up on the work (going through the motions)
   Slowing down, reducing productivity
(Farber 1990)

These last two symptoms may come on swiftly...

Compassion fatigue

A symptom appearing in caregivers

- Exhaustion in many areas of life, but centered on work life

- Previously evident compassion is replaced with depressed feelings about helping identify; physical symptoms; often continuing the work routine but without the intrinsic motivation to do the work

- The work can seem very effortful and without emotional reward

Experiences of burnout

- Physiologic
  - Fatigue
  - Insomnia
  - Gastrointestinal problems

- Attitudinal/psychological
  - Developing negative feelings towards clients
  - Alienation from social supports
  - Feelings of overwhelming frustration
  - Feeling unappreciated
  - Feelings of lacking accomplishment
  - OVERWHELMED (and maybe checking out)

- Destructive coping through substances

There is a LOT of trauma out there

HCH clients often have extreme trauma histories

Many of our clients experience ongoing traumatization in their lives in the community

The experiences of trauma are sometimes revealed unexpectedly

When a large percentage of our day is spent being with people who have experienced significant trauma, we may have our expectations of what is normal shift

Vicarious traumatization

This is a very serious concern for caregivers in HCH situations

The assumption is that the person is being harmed by the exposure to the shared experiences of traumatized individuals

It is considered to have a long term effect on cognitions and beliefs about others

Unlike countertransference, the source of the negative change is external traumatizing events

The effects of this secondary trauma are spread in the care giver beyond the relationship in which the trauma was conveyed

So what to do?

Two main areas:

- Personal responses
  - What can the individual do?

- Institutional/contextual responses
  - What can the workplace do?

Self care to protect and nurture:
Values and vulnerabilities

Go back to your self assessment (self care as requiring self-awareness)

Consider fundamentals

- What do I value?

- What are my major stress vulnerabilities/fault lines?

- How does my work play into these values and fault lines?

- Is my work something I feel I wish to continue doing in its current form?
    - If not, can it be changed or transformed into something intrinsically motivating to do?

Self care to protect and nurture: Individualized approaches

- Take the time to reflect on what has been rejuvenating, refreshing, healing in your life experience

- This may not be what you read about as a self-care technique

- Pursue your own genuine self, consciously resisting what you think will be highly regarded by others or by your sense of 'should'

- People in helping professions often have overdeveloped senses of responsibility to others and need to be prompted to care for themselves in their own ways (not including working harder in the care of others!)

Self care to protect and nurture: Generalizable approaches

- Countering isolation

- Developing self-awareness

- Expanding perspectives to embrace complexity

- Developing a sense of 'active optimism'

- Using a holistic view of self care

- Maintaining boundaries and respecting limits

- Embracing empathy ('exquisite empathy')

- Experiencing professional satisfaction

- Create meaning
(Harrison & Westwood 2009)

Countering isolation: You and your work setting have a role

- Personal life
  - Taking special time and attention for important relationships
  - Seeking community experiences
    - This helps counter inaccurate norming from the professional experiences with very traumatized or ill clients

- Spiritual life
  - Connecting in some way with a larger reality

- Professional life
  - Supervision
  - Training
  - Development
  - Overall organizational support
  - Being with people at some time who know exactly what you do

Mind-body approaches to self care

Meditation, self-hypnosis, mindfulness training all tap into the relationship (and essential unity) of mind and body

Often learning about specific techniques will open up the learner to different attitudinal approaches

Contextual/workplace factors

- Working towards 'trauma-informed care' as an institutional goal

- Understanding that supervision time is necessary

- Providing useful training

- In the performance review process, is there an active attempt to determine 'what's next' in the professional development of the worker?

- Not rewarding a more-more-more approach towards client encounters

- Having leadership in the organization express appreciation for the work

Moving forward...

Some people move forward in the work while wounded

Others choose to heal away from the source of the wound

Being supportive of colleagues whichever route they choose

Leaving the field is not necessary a bad or wrong thing...

Recognizing the privilege of working with people in need, understanding and responding to the risks involved

Q & A

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References

Arvay, M (2001). Secondary traumatic stress among trauma counselors. <u>Intl J for Advancement of Counseling</u>

Baker, K (2003). Caring for ourselves: A therapist's guide to personal and professional well being. <u>APA</u>

Farber (1990). Burnout in psychotherapists: Incidence, types, and trends. <u>Psychotherapy in Private Practice.</u>

Harrison & Westwood (2009). Preventing vicarious traumitization of mental health therapists. <u>Psychotherapy Theory</u>.

Miner, Ann M. (2010). Burnout in Mental Health Professionals as Related to Self-Care (Doctoral dissertation, Pacific University). Retrieved through OVID from: http://commons.pacificu.edu/spp/129

Sheehy Carmel & Friedlander (2009). The relation of secondary traumatization to therapists' perception of the working alliance of clients who commit sexual abuse. <u>J of Counseling Psychology.</u>

Showalter (2010). Compassion fatigue. <u>Am J of Hospice and Palliative Med</u>.

White (2006). The hidden costs of caring: What managers need to know. <u>Health Care Manager.</u>

Zerubavel & Wright (2012). The dilemma of the wounded healer. <u>Psychotherapy.</u>

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Resources

Center for Mindfulness in Medicine, Health Care, and Society
   http://umassmed.edu/cfm

National Health Care for the Homeless Council Self-Care Podcasts
   http://www.nhchc.org

2013 National Health Care for the Homeless Conference and Policy Symposium
http://www.nhchc.org/training-technical-assistance/2013-national-conference/

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