SELF-CARE FOR HEALTHCARE WORKERS
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NM Annual HIV & HCV Update Conference
May 5, 2017

OBJECTIVES

○ To gain an understanding of Trauma Informed Care and how our patient trauma may collide with our own trauma.

○ To learn strategies to effectively interact with patients in our daily experiences

○ To practice mindful meditation, become aware of mindfulness exercises and commit to taking care of us.
TO GAIN AN understanding of TRAUMA INFORMED Care AND how our Patient trauma may collide with our own trauma.

- Empathy: The Human Connection to Patient Care - You Tube
TRAUMA-INFORMED CARE

“Traumatization occurs when both internal and external resources are inadequate to cope with external threat.”

-Van der Kolk, 1989

TRAUMA

- Trauma can result from a range of experiences that impact one’s ability to cope.
  - Violence
  - Physical injury
  - Abuse
    - Physical
    - Sexual
    - Emotional
  - Neglect
  - Vicarious for care givers
- Affects staff/volunteers, as well as patients
  - Our own trauma history may shape how we respond to others.
EFFECT OF TRAUMA ON HEALTH

- Trauma affects the limbic system and creates a fight, flight or freeze response
- Adverse Childhood Experiences (ACE) Study
  - CDC and Kaiser Permanente Health System
  - 17,000 individuals in the ‘90s
  - Shows relationship from ACEs to many negative health outcomes
    - Ranges from smoking, alcoholism, depression, drug abuse, inactivity, obesity, chronic illness, increased number of sexual partners and STIs, cancer, chronic lung disease

TRAUMA RESPONSE/TRIGGERS

- Triggers are a reminder of a past traumatic experience.
  - Often these can be seemingly otherwise “ordinary” events
  - Some common triggers:
    - Smells or Colors
    - Tone of voice
    - Waiting for long periods of time to receive services
    - Closed doors/small spaces
    - Lack of choice or options
    - Having to repeat one’s story multiple times
    - Filling out forms

- Trauma Response – person relives experience because of trigger. Re-engages the limbic system (fight, flight, freeze) response
WHAT IS TRAUMA INFORMED CARE?

- Shifting the conversation from “What is wrong with you” to “What happened to you.”

- Trauma informed practices are based on an understanding of the vulnerabilities or triggers of trauma survivors that traditional service delivery approaches may exacerbate, so that these services and programs can be more supportive and avoid re-traumatization.

- Culture change effort

SECONDARY TRAUMA AND VICARIOUS TRAUMATIZATION – POST TRAUMATIC STRESS

- Social workers are affected by exposure to their clients' traumatic life experiences and behaviors.

- Research has demonstrated that secondary traumatic stress (STS) - also referred to as vicarious trauma, compassion stress, or compassion fatigue is prevalent among mental health and health care professionals who work with traumatized clients

(Fahy, 2007; Figley, 2002b; Jacobson, 2006; Jenkins & Baird, 2002; McCann & Pearlman, 1990)
**Symptoms of Secondary Traumatic Stress**

- Increased sensitivity to violence
- Not laughing as easily
- Trouble Sleeping
- Difficulty thinking or making decisions
- Lack of empathy
- Intrusive thoughts and traumatic images
- Feeling emotionally numb
- Physical complaints
- Excessive use of alcohol or drugs
- Detachment


**To Learn Strategies to Effectively Interact with Patients in Our Daily Experiences**
**TRAUMA INFORMED SENSITIVE PRACTICE**

**Safety**
- Allow person to be comfortable in the space
- Ask about comfort level
- Share control
- Show respect
- Use warm and compassionate manner

**Choice**
- Ask if you can close the door
- Allow the patient to decide where to sit
- Explain why you’re meeting and outcomes

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**TRAUMA INFORMED SENSITIVE PRACTICE**

**Empowerment**
- Ask “What happened to you,” not “what is wrong with you?”
- Take time with the patient so they feel genuinely heard
- Ask if you can do anything to help relax the patient is an issue is difficult
- Pay attention to body cues

**Collaboration**
- Share information
- Encourage the patient to make decision; make it a partnership
TO PRACTICE MINDFUL MEDITATION, BECOME AWARE OF MINDFULNESS EXERCISES AND COMMIT TO TAKING CARE OF US.

MINDFULNESS EXERCISE

For 5 minutes:
- Follow your breath
- Do NOT have any expectations
- Notice distractions, thoughts, emotions/feelings, sensations
- Always come back to your breath

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## Top Self-Care Tips

1. **Physical Self Care** – eat well, exercise, get enough sleep, get medical care
2. **Psychological Self Care** – reflect, journal, engage in leisure activities, let others help you
3. **Emotional Self Care** – Have pleasant thoughts about your self, engage in laughter/play, express emotions in appropriate channels
4. **Spiritual Self Care** – Pray, Mindfulness Meditation

## Top Self-Care Tips

1. **Create Team Rituals** – Healing Circles, Drumming, Light a Candle, Burn Regrets
2. **Professional Self Care** – take a break, take a vacation, balance case load
3. **Create Balance** – work, family, relationships, play, rest

Cox and Steiner, 2013
SIMPLE THINGS YOU CAN DO

- Goof around
- Unplug
- Be around pets
- Have a good laugh
- Stretch out your kinks
- Be still
- Take a different route to work
- 15 minutes of sun
- Power nap

SIMPLE THINGS YOU CAN DO

- Go dancing
- Help someone
- Splurge a little
- Ask for help
- Plan a two day holiday for the weekend (hide)
- Walk on the beach
- Enjoy the sunrise or sunset
- Choose who you spend time with
**HOW ORGANIZATIONS CAN FOSTER SELF CARE**

- Encourage – allow time for staff to meet with Mentors/Team
- Create Wellness Programs – Including EAP
- Create a climate where sharing frustrations is “Normal” and help staff develop ways to Let the Frustrations Go!
- Offer skill building opportunities
- Employee Recognition Programs
- Flex Time – Generous Vacations – Realistic Productivity Expectations
- Improve Orientation and Performance Reviews

**REFERENCES**

- Fahy, 2007; Figley, 2002b; Jacobson, 2006; Jenkins & Baird, 2002; McCann & Pearlman, 1990 Risk of Compassion Fatigue and Burnout and Potential for compassion Satisfaction Among Employee Assistance Professionals Protecting the Workforce.
- Ellen Bard www.tinybuddha.com
- Cox and Steiner, 2013. 'Self -Care in Social Work
- Colleague- Makini King at KC CARE Clinic
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