Introduction and Objectives

• Participants will understand the difference between self-care and self-soothing strategies.
• Participants will learn effective strategies for building community to sustain the self-care plan.
• Participants will develop a personal self-care plan.
• Who are the caregivers?
“Something profound in someone telling you what you already know.” –Bill Hoy
Progressive Muscle Relaxation

BODY SCAN

WHAT WEIGHT HAVE YOUR SHOULDERS CARRIED TODAY? WILL IT GET LIGHTER WITH A DEEP BREATH?

WHAT FEELING DO YOU HAVE IN YOUR GUT? ANXIETY, PEACE, DISCONTENT?

WHAT HAVE YOUR HANDS DONE TODAY? DO YOU KNOW THAT IT WAS ENOUGH?

WHERE HAVE YOUR FEET CARRIED YOU TODAY? IS IT TIME TO BE STILL?

WHAT HAS YOUR HEART FELT TODAY? THERE IS NO WRONG ANSWER.

WHAT THOUGHTS ARE CIRCLING IN YOUR MIND? WHAT CAN YOU REPLACE THEM WITH?
Why Is Caring for Ourselves as the Caregiver Important?

• Self care is not selfish. Self care assists us to become a better caregiver for others; you cannot continue to give if your cup is empty.
• Self care is an important part of managing our trauma intake so we can prevent chronic stress from adversely impacting our physical and mental health.
• Self care helps to boost physical, emotional, and general wellbeing, and helps to provide a sense of balance.
• Self care increases our ability to function in the most effective way in all areas of our lives.
• Incorporating regular self care into our lives assists with increasing our ability to cope with the difficult situations that life brings our way.
My Connection
Diane’s Thoughts

- Allow respite
- Keep planning, even when it doesn’t work
- Concept of time
- Jealousy
- Guilt
- Shifts in supports
- Normalcy of working

“They were an anchor in the sea of insanity.”
Common Caregiver Stressors and Feelings

- Role Changes
- Living in the Unknown, Living in the Gray Space
- Changes in Social Supports/Unmet Expectations of Social Supports
- Faith/Spiritual/Religious Impacts
- Assumptions and Expectations
- Financial Stressors
Common Caregiver Stressors and Feelings

- Balancing Your Own Needs and Commitments with Caregiving Responsibilities
- Loneliness, Isolation and at the same time, Limited Time Alone
- Grief and Loss, and Change
- Guilt

There is no “right or wrong” way to experience or to feel. Every experience has validity.
Symptoms of Stress

- Difficulty sleeping
- Weight gain or loss
- Stomach pain
- Irritability
- Teeth grinding
- Panic attacks
- Headaches
- Difficulty concentrating

"It's okay to do less when you are coping with more."
Caregiver Stress and Burnout

- Increased overwhelmed feelings
- Constant worry
- Increased sadness, hopelessness or helplessness
- Sleep changes (too much or not enough)
- Appetite changes/weight changes (increase or decrease)
- Often fatigued (emotionally, physically)
- Loss of interest in activities you once enjoyed
- Becoming sick, developing pain or other physical concerns
- Withdraw from loved ones
- Substance abuse

*If you have ongoing or increased concerns in any area, it may be helpful to make an appointment with a physician or a therapist to further discuss these concerns.*
Warning Signs of Trauma Exposure

- feeling helpless, hopeless & that one can never do enough
- hypervigilance & always serious
- anger and cynicism
- guilt/fear/complicated grieving
- lack of awe
- sense of persecution
- flight/flight/immobility response
- dissociative moments
- inability to see options & diminished creativity
- physical ailments, depression, anxiety, & other mental health considerations
- chronic exhaustion & saturated nervous system
- pulled toward confirmation bias & away from critical thinking
- lack of presence/deliberate avoidance/cognitive overload
- intense/rigid/controling/unable to embrace complexity
- disheartened & dispirited
- grandiosity
- negativity bias & not assuming well
- difficulty empathizing/minimizing/numbing
- sub-impeccable/toxic conduct & compromised impulse control
- addictions
- loneliness/isolation/strained relationships

When Experiencing Overwhelm & Trauma
Barriers to Caring for Ourselves

- Time limitations
- Lack of energy
- Fear of being perceived as weak or vulnerable
- Other responsibilities
- Believe in the value of production
- Poor ability to self-assess
COMPASSION SATISFACTION is the pleasure one derives from being able to do his/her work well.

COMPASSION FATIGUE is emotional residue or strain of exposure to working with those suffering from the consequences of traumatic events.

BURNOUT refers to the cumulative process marked by emotional exhaustion and withdrawal associated with increased work load and institutional stress, not trauma-related.
Apathy
Sleep disturbances
Reduced job satisfaction
Reduced performance
Depression and anxiety
Somatic symptoms
Turnover
Fatigue
Depersonalization
Caused by exposure to client trauma/distress
May present rapidly or progress over time
Decreased ability to feel compassion for others
Feeling burdened by others’ suffering
Bottling up of emotions
Denial
Avoidance of tasks
Caused by high demands of work
Progresses over time
Excessive stress
Work-life imbalance
Feeling out of control of work, personal life, or both
Having to “drag oneself to work”
Reduced productivity
Depersonalization
Excessive stress
Progresses over time
Work-life imbalance
Feeling out of control of work, personal life, or both
Reduced job satisfaction
Reduced performance
Depression and anxiety
Somatic symptoms
Turnover
Fatigue
BURNOUT
COMPASSION FATIGUE
Excessive stress
Progresses over time
Work-life imbalance
Feeling out of control of work, personal life, or both
Reduced productivity
Depersonalization
<table>
<thead>
<tr>
<th>Compassion Fatigue Risk Factors</th>
<th>Compassion Satisfaction Supporters</th>
</tr>
</thead>
<tbody>
<tr>
<td>High expectations of work</td>
<td>Adjusting expectations in response to reality</td>
</tr>
<tr>
<td>Idealistic worldviews</td>
<td>Focusing on the good</td>
</tr>
<tr>
<td>The view that self-care is selfish</td>
<td>Accepting the bad</td>
</tr>
<tr>
<td>A lack of strong personal boundaries</td>
<td>Viewing self-care as essential to mental and physical health</td>
</tr>
<tr>
<td>An overdeveloped sense of responsibility</td>
<td>Setting compassionate boundaries</td>
</tr>
</tbody>
</table>
High Cost of Burnout

• Physiological impacts of chronic stress
  • Hypertension, skin conditions, GI distress, diabetes, weight changes

• Depression, anxiety, trauma symptoms (e.g. disturbing dreams, intrusive thoughts)

• Impacts on personal life
  • Irritability
  • Exhaustion
  • Disengaging from loved ones

(Jackson, 2014)
Impact on Clients

- Turnover of trusted professionals
- Disrupts continuity of care
- Impacts clinical judgment and decision-making
  - Assessment and intervention skills
  - Engagement with clients
- Negatively impacts quality and consistency of services
- May lead to client mistrust

(Jackson, 2014; Kim & Stoner, 2008)
Self-Care Iceberg

**THE SELF-CARE ICEBERG**

WHAT WE "THINK" SELF-CARE LOOKS LIKE
(WHAT WE "SEE")

- Exercise
- Bubble baths
- Skin care
- Spa days
- Massages

WHAT SELF-CARE REALLY LOOKS LIKE
BEHIND THE SCENES

- Trauma healing
- Purging negativity
- Inner child healing
- Crying/feeling emotions
- Setting boundaries
- Getting proper rest
- Letting go of attachments
- Meditation
- Learning from triggers
- Nourishing your body
- Difficult conversations
Self-Awareness

• What is your trauma intake level right now?
• Awareness
• Balance
• Connection
• Good Communication

(Gamble, 2002)
Self-Care Assessment

This is my cup of care.

Oh look, it's empty!
Measures that Help Prevent Burnout

- Mindful meditation and reflective writing
- Adequate supervision and mentoring
- Sustainable workload
- Supportive work and family community
- Promotion of fairness and justice in the workplace
- Development of self-awareness skills
- Practice of self-care activities
- Continuing educational activities
- Accepting what you cannot control
THINGS YOU CAN CONTROL

YOUR SLEEP ROUTINE
HOW YOU SPEAK TO YOURSELF
WHO YOU FOLLOW ON SOCIAL MEDIA
WHAT YOU EAT
YOUR MINDSET
THE WAY YOU TREAT OTHERS
YOUR LEVEL OF HONESTY
YOUR OUTLOOK
HOW SOON YOU TRY AGAIN AFTER YOU FAIL

@thefabstory
Reduce Shaming Language

Talk to yourself as if you would talk to...

A CHILD
- It's ok to be sad. I am here for you. I won't leave you alone.
- You rock! I am so proud of you. You deserve the best.

A STRANGER
- Would you like me to help you with that?
- You are the cutest thing I've ever seen.

YOUR BEST FRIEND
- You light up my day & warm my soul.
- You are worth every single dollar I invest in you.

YOUR PET
- You are the cutest thing I've ever seen.

THE SUN
- You light up my day & warm my soul.

YOUR FAVORITE TREAT
- You rock! I am so proud of you. You deserve the best.

Nila @about.the.good.life
What do we need in our toolkit?

- Recognition of our own basic needs for good nutrition, ample sleep, lots of water, and exercise/movement
- Supportive friends we can trust and rely on
- Honor our emotional and spiritual needs
- Readily accessible self-soothe strategies
- Laugh out loud

(Jackson, 2014)
Advice from 4-year-old

• Take a breath
• Take a bath
• Hold hands with a friend
• Go poop
Stress Management Techniques

- Exercise
- Meditation or Mindfulness
- Taking a break
- Eating a healthy meal
- Vent about the situation
- Prioritize and schedule

- Reduce workload
- Take a vacation
- Avoid caffeine, alcohol, and nicotine
- Get more sleep
- Talk to someone
- Rest, if you are sick
Self-Care Essentials

• Look for signals in your body that you need to slow down
• Identify values and priorities
• Awareness of capabilities and limitations
• Create and maintain boundaries
• Learn when to say “No.”
• Permission and encouragement to NOT work harder and longer

(Jackson, 2014)
THE TRAUMA STEWARDSHIP INSTITUTE’S
SURVIVAL GUIDE

PROTECT YOUR MORNINGS
[or whenever you wake up]
less cortisol, more intentionality.

GO OUTSIDE
[or look outside]
perspective, context + something larger than this.

BE ACTIVE
[avoid stagnation]
in body, mind, spirit.

CULTIVATE RELATIONSHIPS
those that are edifying + healthy.

NURTURE GRATITUDE
what is one thing, right now, that is going well?

DETOX
if navigating addictions, be wise + safe
limit news + social media.

SPEND TIME WITH ANIMALS
↓ stress hormones, ↑ comfort.

METABOLIZE ALL YOU ARE EXPERIENCING
re-regulate your nervous system.

SIMPOLIFY
[less is more]
be aware of decision fatigue + cognitive overload.

ADMIRE ART
the gift of feeling transported.

LAUGH
pure humor = a sustaining force.

FOSTER HUMILITY
& EXTEND GRACE
self-righteousness + hubris = unhelpful.

SLEEP
to cleanse + repair brain + body.

CLARIFY INTENTIONS
how can i refrain from causing harm, how can i contribute meaningfully?

BE REALISTIC + COMPASSIONATE
[with yourself]
be mindful of the quality of your presence, it means so much to others.
Tips for Utilizing Self Care

• Have at least one tool that can be used anywhere, anytime
• Make your self-care goals realistic and attainable
• Making self-care intentional, schedule you first
• Reduce trauma intake
• Have routine for commute or arrival at home
• Be a “mirror” not a “sponge”
Communication

Analysis Paralysis

- Bring food?
- But I can't cook.
- Should I call?
- Is email weird?
- Flowers? No.
- Maybe I'll just wait.
What You Say

STAY STRONG.
What They Hear

YOUR SAONESS IS A WEAKNESS.
What You Say

YOU ARE NEVER GIVEN MORE THAN YOU CAN HANDLE.
What They Hear

YOU SHOULD HAVE NO PROBLEM HANDLING THIS.
What You Say

I know how you feel.
What They Hear

I assume all grief is the same.
What You Say
What They Hear

[Image: Two women, one comforting the other. Speech bubble says: "You have a time limit on grieving for your loved one."
What You Say

LET ME KNOW IF YOU NEED ANYTHING.
What They Hear

YOU'RE NOT GOING TO HEAR FROM ME IN A WHILE.
Having good intentions:

Let me know if I can do anything.

Okay...

Showing up:

I'm bringing you dinner tonight. What time is good?

Thank you so much.

I need to rest, to talk, to help, to run from, to clean, to cry.
What NOT to Say

- “I know how you feel.”
- “Just get over it.”
- “You’re so brave and strong.”
- “Remember, there is always someone worse off than you.”
- “I know how you feel.”
- “How are you, really?”
What to Say

- “I don’t know what to say.”
- “I am here.”
- “Have you seen...?”
- “Would you like to talk about it?”
- “I will not forget (insert name).”
- “How is today?”
Instead of “How Are You?”

@KEEBLEYSHAWART

- How have you been sleeping?
- What color is your heart today? Why?
- What lies do you find yourself believing?
- What thoughts have been circling in your brain?
- How can I support you?
- What are your top three feelings today?
- What have you done just for you today?
“In tragedy, there’s not a lot you can say to make it better. But there is a lot you can say that makes it worse.”

--The Morning Show
Empathy vs. Sympathy

Empathy: “feeling with”

Sympathy: “feeling for”
Empathetic Listening
(I want to hear you)
- I'm listening
- That sounds heavy
- How can I show up for you moving forward?
- Is there more?
- You're saying... is that accurate?

Dismissive Listening
(I want to fix you)
- What if you try this?
- The same thing happened to my friend...
- It could be worse
- You should read/listen/follow
- You'll be fine!
- I totally get it... one time.

@KEELEYSHAWART
Community Care

Shouting "self-care" at people who actually need "community care" is how we fail people.

- Nakita Valerio
Community Care

- Perceived social support in the workplace decreases likelihood of burnout and turnover
- A trusted colleague may be better equipped to identify signs of overwork and point them out
- Recognize there is no one-size-fits-all approach to self-care

(Kim & Stoner 2008, Rossi et al. 2012)
6 Ways to Practice COMMUNITY CARE

- Cook a meal for someone who is sick
- Volunteer
- Donate to community organizations
- Offer childcare to a friend
- Check in on neighbors
- Donate services or resources
Outcomes

• By practicing community care we can:
  • Reduce compassion fatigue and burnout
  • Increase engagement
  • Promote retention
  • Become better stewards of our limited resources

• These all lead to what is most important: the best possible service for our clients
Planning

• What matters most to you in your daily life?
• What routines are non-negotiable to feeling like yourself?
• When do you feel healthiest? Least healthy?
• What aspects of your work life do you find most enjoyable? Most stressful?
• What aspects of your life outside of work do you find most enjoyable? Most stressful?
• How do you recognize that you need to slow down?
• How could your community recognize that you might need help?
Self-care vs. Self-Soothing

- Self-care is what you do preventatively to keep from getting upset.

- Self-soothing is what you do to calm down and reset when you are upset.

**Forms of Self-Care That Aren’t So Pretty**

- Therapy
- Setting Boundaries
- Saying No
- Asking for Help
- Crying it Out
- Being Alone

@karissaleifken
Grounding

SIX WAYS TO PRACTICE GROUNDING
with anxiety + intense emotions

- **body**
  - lay on the ground, press your toes into the floor, squeeze playdough

- **5 senses**
  - wear your favorite sweatshirt, use essential oils, make a cup of tea

- **self-soothe**
  - take a shower or bath, find a grounding object, light a candle

- **observe**
  - describe an object in detail: color, texture, shadow, light, shapes

- **breathe**
  - practice 4-7-8 breathing: inhale to 4, hold for 7, exhale to 8

- **distract**
  - find all the square or green objects in the room, count by 7s, say the date

*THE GROWLERY*
• “Maybe it’s okay to allow it all to exist without necessarily compartmentalizing it, to accept without guilt that we can have fulfilling parts of our lives even as we feel sorrow about illness and also grieve the loss of our patients, and to find room for all of it happen: room for grief, for relief, for misery, for joy.”

(Chodron, 2000)
The Antidote to Burnout

• Fostering a healthy organizational culture that encourages and affirms community and self-care.
Caring for Those Who Care
Meeting the needs of diverse family caregivers

diverseelders.org/caregiving
HOW CAN PROVIDERS BETTER SUPPORT AFRICAN AMERICAN AND BLACK FAMILY CAREGIVERS?

- Identify and include relevant family members in person-centered care planning
  - Revise Patient Demographic Forms and/or Adult History forms to identify whether a patient is proving care for a friend or family member
  - Expand your organization's definition of “family” to include friends, neighbors, and others outside of the traditional family structure
HOW CAN PROVIDERS BETTER SUPPORT AMERICAN INDIAN AND ALASKA NATIVE FAMILY CAREGIVERS?

- Develop culturally and linguistically competent in-office material for training, information on caregiving, disease information, and intervention outreach
  - Avoid words such as “caregiver burden”
  - 6th grade reading level or lower
  - Use images with representation of American Indians/Alaska Natives
HOW CAN PROVIDERS BETTER SUPPORT ASIAN AMERICAN FAMILY CAREGIVERS?

- Provide culturally competent referrals and resources
  - Dissemination of culturally competent in-office material for training and information
  - Affordable and in-language referrals

- Develop in-language caregiver support groups
  - Resolve social and linguistic isolation
  - Provide support network for older adult LEP caregivers
Recruit, promote, and support a diverse workforce that understands/represents the culture of the community

- Cultural representation among providers is important for Hispanic/Latinx caregivers and older adults (Terlizzi et al., 2019)

- Easier communication, improved patient and caregiver outcomes
HOW CAN PROVIDERS BETTER SUPPORT SOUTHEAST ASIAN AMERICAN FAMILY CAREGIVERS?

- **Disaggregate data that is collected on intake forms and in healthcare settings**
  - Better understanding of challenges and resiliencies unique to SEAA communities

- **Development of in-language caregiver support groups**
  - Nearly half of SEAA caregivers indicate being the only person available to provide care
  - Improve mental health and reduce isolation
  - Creation of safe place to share concerns and learn from others
  - Better caregiver outcomes
HOW CAN PROVIDERS BETTER SUPPORT LGBT FAMILY CAREGIVERS?

- Collect information on gender identity and sexual orientation to better understand the needs your patients and caregivers
  - Edit demographic intake tools to collect information about sexual orientation and gender identity
  - Reflect the words people use to describe their identities and relationships

- Ensure that your organization’s nondiscrimination policy includes sexual orientation and gender identity, and any use of the word of “family” makes it clear that chosen families also count.
References


• Rossi, A., Cetrano, G., Pertile, R., et al. (2012). Burnout, compassion fatigue, and compassion satisfaction among staff in community-based mental health services. Psychiatry Research, 200(2-3), 933-938
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