## Behavioral Health Is Essential to Health: Prevention Works, Treatment Is Effective, People Recover

2012 Volunteer Symposium: Recovery, Resilience, and Hope After Disaster

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## **Faculty**

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## **Goals and Objectives**

- Goal
  - Participants will understand and address their risks and responses to vicarious trauma, secondary traumatic stress and burnout

## **Goals and Objectives**

- Objectives
  - To be able to identify the risks and symptoms of vicarious trauma as well as the body and mind's responses to stress
  - Learn how to mitigate and address these responses by implementing skills and self-care

#### **Vicarious Trauma**

 Vicarious trauma is the experience of trauma symptoms in the counselors as a result of listening to the trauma material of clients

#### **Differentiations**

 Vicarious trauma differs from compassion fatigue and secondary traumatic stress (which are most similar in meaning) in that it is a build up of symptoms over a series of experiences

- Pearlman and Saakvitne, 1995; Figley, 1999; Stamm, 1999

#### **Differentiations**

- · Not burnout, but can lead there
  - Figley, 2002
- Unlike countertransference
- Green, 199

## **Symptoms**

- Posttraumatic stress disorder symptoms
- · Negative cognitive schemas
- · Questioning beliefs
- Sense of helplessness
- Isolation
- Depression

## **Symptoms**

- · Increased substance use
- Increased rates of physical illness
- Lower staff morale and productivity
  - -Higher turnover and errors

## **Symptoms: Trauma Specific**

- High adrenaline, physical euphoria, numbness - the endorphin effect disguises distress
- Coupled with fatigue, cognition can change and create an inability to recognize poor judgment
- Anger is a common defense against recognizing the problem

## **High Risk Symptoms**

- · Medicating or narcotizing
- · Overeating, excessive drinking
- Extramarital affairs
- Suicidal gestures

## Long-Term Exposure Symptoms

- Tiredness/weariness yet insomnia
- Brooding, wistful, mournfuldepressive
- Increasing demoralization
- Intellectualizing/religionizing the work

# Long-Term Exposure Symptoms

- Grandiosity
  - -I can handle this myself
  - -Don't consider asking for help

## **Risk Categories**

- Public health, mental health, social services providers
- Staffs with clients who experience profound suffering
- · Highly exposed response staffs
  - Media, clergy, caregivers

## **Risk Categories**

- · Inhibited individuals in these groups
  - More likely to have dissociative responses

#### **Narrative Exercise**

 What problem(s) does this work bring to your life? (e.g. excessive worry). Begin your response:

"Being	a	health	care	W	orker	brin	gs
			to r	nv	life .	"	

#### **Narrative Exercise**

2. How has this problem affected your family life or other relationships?

Begin your response:

"This problem,	, has
affected my life by	."

#### **Narrative Exercise**

3. What have you done to cope with or address this problem? Begin your response:

"To cope with this problem, I have . . . "

## The Concept of Stress Is Controversial

- · It's not as simple as once thought
- Everyone perceives stress differently
- Stress is geographic and culture based

## The Physiology of Stress

- Good stress allows us to perform at a higher level
  - -Fight, flight, or freeze
- The production of Cortisol improves memory and enhances immune function
- Spikes in blood pressure flood our muscles and brain with oxygen

## The Physiology of Stress

- · Bad stress is the overload
- The allostatic system becomes too charged with no chance to vent the build-up of energy
- An overload of Cortisol will damage memory, hurt immune system, and enlarge your stomach
  - -Increasing risk for heart disease

#### **Work Stress**

- Stress measured by blood pressure increases and is generally twice as high during the work day compared to when at home or time off
- The worst work-related stress is caused by jobs where people have little control over the activities and the rate at which they have to deal with it

#### **Translation**

- When you feel helpless, that's bad
- Then you drop into a 'depressed' state and have much higher cortisol level
- Too much cortisol causes damage
- · Race is also a factor

#### **Translation**

- A high fat, high salt diet contributes
  - -Blood pressure increases
- Professional woman with children suffer more
  - -e.g. blood pressure does not go down at home

### **Automatic Responses**

- Law enforcement, rescue staff, fire personnel, emergency room and other medical personnel staff are trained to react quickly
- Physical reactions to stressful situations can occur without the benefit of thought

### **Automatic Responses**

- Cognitive reactions reinforce physical reactions
  - -Our thinking controls our actions

## **Psychological Resilience**

- Resilience refers to one's capacity to adapt to stressful situations or crises
  - More resilient people are able to adapt to adversity without lasting difficulties
  - Less resilient people have a harder time with stress and life changes

## **Psychological Resilience**

- Some people are born with more traits than others
  - Psychological resilience can be developed

# Resilience Development for Responders

- Learn how to build your own emotional resilience
- Build and maintain support systems at home and work
- Practice our own emotional resilience techniques to keep your stress at a healthy level

## **Get the FACTS About Resilience**

- Foster hope
- Act with purpose
- Connect with others
- · Take care of yourself
- · Search for meaning

#### The List of 10

- 1. Develop a good attitude
- 2. Develop self-awareness
- 3. Develop emotion regulation
- 4. Develop optimism
- 5. Use your social supports

#### The List of 10

- 6. Develop humor
- 7. Engage in exercise
- 8. Consider spirituality
- 9. Practice perseverance
- 10. Practice patience

#### **Attitude**

- Give yourself positive messages
- Remind yourself that you are strong and can grow stronger and more wise as you handle life's challenges

#### **Self-Awareness**

- Develop self-awareness
- Understand what you're feeling and why

#### Internal Control

- Develop internal control, emotion regulation, however you refer to it
  - It is the ability to get your emotions in check
- Know that you are in control of your life

#### Internal Control

- You can't control your circumstances, but you can control how you respond to those circumstances
  - That makes all the difference in your attitudes and in the course your life takes

## **Optimism**

 Developing a more optimistic world view can help you become more resilient

## **Social Support**

 Those with strong networks of social support tend to stay healthier and happier throughout life, and tend to cope well with stress

#### Humor

- Those with a sense of humor about life tend to experience life as less stressful, are able to bond with others during difficult times
- If you can take a step back from difficult situations long enough to maintain your sense of humor, you will be more resilient

#### **Exercise**

- Exercise has been correlated with stronger levels of resilience
  - This may be due to the effects of endorphins on one's mood, or the physical health benefits to those who exercise, or both

## **Spirituality**

 Studies have shown that those who are more spiritual tend to be more resilient as well

#### **Perseverance**

- Don't give up on your situation; don't stop working toward getting through it
  - -Trust the process

#### **Patience**

 Be patient with yourself, and just do your best

## **Physical Tools**

- · Breathing retraining
- Stretching
  - -Gentle, yoga
- Walking
- Exercise
  - -Body movement
- · Eat healthily
- Return to 'normal' routines

## **Cognitive Tools**

- · Interrupt the automatic response
- Thought stopping
- Thought insertion
- · Cognitive switching
- · Cognitive messaging
- Visualization
- Meditation

#### **Emotional Tools**

- Create a quite place for yourself/safe space
- Music
  - -Timed to the breath
- · Practice self-righting

#### **Emotional Tools**

- Social connectedness and social supports
  - -Connect with family and friends
- Group support
  - -Spending time with those who have similar experiences
- · Spiritual rituals/activities

#### **Behavioral Tools**

- Distress that does not dissipate on its own requires change in thinking and behavior for change to occur
- Change your routine, your rituals
- Create a new narrative, a different story
- Consider journaling

#### **Behavioral Tools**

- Identify problem behaviors or negative coping and what you would like to do differently
- Schedule leisure activities, pleasant activities

## **Tools: Creativity**

- · Use different methods of coping
  - -Try acupuncture or art
  - Include various types of body work in your stress management routine

### **Tools: Creativity**

- · Try other ways to release stress
  - -Cook, dance, dream, draw, exercise, enjoy, explore, go home, kick-box, laugh, loosen up, listen to music, massage, meditate, practice yoga, paint, pet the pet, sing, sit quietly, start a book, stretch, talk to yourself, family and friends, wade, walk, watch a bug (or a movie), whistle

### **Tools: Creativity**

· Do something other than work!

# Peer to Peer Resilience Building

- Engage in group training so everyone is on the same page
- Know the language and concepts
- · Designate contacts
- Implement the "buddy system"

## Peer to Peer Resilience Building

- Schedule and expect that all responders attend pre-deployment operational briefings
- Schedule and expect that all responders attend post-deployment debriefings

### **Building Resilience in Groups**

- · Know each other
- Be aware of and respect each responder's defined roles and responsibilities
- Define the rules of your team
- Attend operational briefings together

### **Building Resilience in Groups**

- Attend post-deployment debriefings together
- Wind down together and check in with each other at designated time frames

## **Peer Groups**

- · Should be homogenous
  - -Same exposure levels
- Focus on strategies for addressing difficult experiences
- Occur when people provide emotional or practical help
- Requires everyone to meet as equals in reciprocity

## **Peer Groups**

- Implies that one person has no more expertise than another
- Advice is based solely on personal experience
- The peer support relationship is one of EQUALITY

## **The Buddy System**

- Everyone should identify their buddy
- Buddying and peer support should not take the place of formal supervision
  - Except when such is not available as needed

## **The Buddy System**

- It is understood that discussions remain confidential and that survivors names are not necessary
- Like crisis counseling, it's 90% listening

#### In the Field

- Follow the command structure at all times
- Work within your own skills and capabilities
  - -Only where you are competent
- · Rely on your team
  - -Engage with each other
- Embrace flexibility

#### In the Field

- Expect, seek, and accept peer support
- Master controlled, limited empathy
- Define structure and boundaries
- Monitor overidentification
- Self assess
  - -Use the PRO QUO
- Commit to implementing self-care

#### **Affirmations**

- Familiarize yourself with the action of affirmations both auditory and visual
- · Sample different expert's work
  - Choose voices and images that are pleasant to your eyes/ears
- Schedule the use of these tools to obtain maximum benefit

#### About SAMHSA

- The Substance Abuse and Mental Health Services Administration (SAMHSA) is a branch of the U.S. Department of Health and Human Services (HHS)
- SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities

#### **Center for Mental Health Services**

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#### **About SAMHSA DTAC**

Established by SAMHSA, the
 Disaster Technical Assistance Center
 (DTAC) supports SAMHSA's efforts
 to prepare states, territories, and
 tribes to deliver an effective
 behavioral health (mental health and
 substance abuse) response to
 disasters

## New Disaster Behavioral Health Information Series Resources

- Disaster specific
  - Behavioral health and response/ recovery issues specific to disasters such as floods, fire, or terrorism

## New Disaster Behavioral Health Information Series Resources

- Tribal organizations
  - Cultural considerations and outreach strategies
- Languages other than English
  - Disaster preparedness and response materials and behavioral health information in a variety of languages

#### New Disaster Behavioral Health Information Series Resources

- Persons with disabilities and other access and functional needs
  - Disaster preparedness and response challenges and tips, behavioral health impact, and outreach strategies

#### Contact Us

For Training and Technical Assistance Inquiries:

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