

# Staying Well

November 2018

# Aims for today

- Understand secondary and vicarious traumatic stress reactions
- Able to recognise signs of stress and distress in ourselves
- Understand of the protective and risk factors which can affect our resilience as workers
- Know the factors that will support the wellbeing of individuals and teams
- Opportunity to plan for what should be in your Psychological 1<sup>st</sup> Aid kit

# A Critical Occupation

One where there is high risk of exposure to traumatic events or material that may, ***under certain circumstances***, exert critical impact on the psychological well-being of those within it.

(adapted from Paton & Violanti, 1996)

# “It’s just part of the job, don’t do it if you can’t cope...”

- No reliable method of identifying, and therefore screening out, those who will be adversely affected by the work
- 1: 4 people will experience a mental health problem in any year
- In many roles you can’t remove exposure to potentially traumatic material and/or to the intense emotions associated with and expressed by people affected by trauma
- Instead the focus needs to be on promotion of good mental health and support for staff working in high risk roles

# In small groups..

What kinds of things help people to be resilient?

# Resilient people

- **Personal factors:**

- The ability to cope with stress effectively and in a healthy manner
- Having good problem-solving skills
- Believing that there is something you can do to manage your feelings and cope
- Willingness to seek help
- Having an identity as a survivor as opposed to a victim
- Helping others
- Finding positive meaning in the trauma
- Spirituality

- **Interpersonal/social factors**

- Having social support
- Being connected with others, such as family or friends
- Being able to discuss the stress/trauma with loved ones

# Resilient teams

- Looking out for each other – professionally and personally
- Shared sense of purpose
- Mutual respect and trust
- Knowing what your roles are
- Being confident in the knowledge and skills of colleagues
- Adequate resourcing and training
- Knowing each other
- Acceptance and tolerance of different personalities and coping styles
- Open communication
- Humour

# Resilient organisations

- Respected leadership
- Shared sense of purpose and clarity of role
- Good communication especially up + down the organisation
- Hard work is recognised and appreciated
- Staff feel valued (in and out of the organisation)
- Adequate resourcing
- Acceptance of the possibility of emotional or psychological injury and the provision of support when needed



# Traumatic stress as an occupational hazard

- Protective factors?
- Risk factors?



# In small groups..

Discuss and make a note of what you think are:

- (1) the challenges to your wellbeing in your work role and
- (2) the things that protect you / keep you well

# Threats to your wellbeing

- Exposure to accounts of adversity, trauma and loss
- Encountering the aftermath of trauma and loss – people's distress, hurt, anger, distrust
- Witnessing people's ongoing struggles against adversity & disadvantage
- Possible resonance with your own experiences
- Inadequacy of organisational / civic / state response

# Protective factors

- Your professional identity – your role as a helper
- Being able to distance yourself – having a professional rather than personal involvement
- Expectation and readiness - preparation and training
- Sense of competence - knowing what your job is and feeling able to do it effectively
- Social support – from colleagues / being part of a team
- Feeling able to talk about it afterwards and having the opportunity to do so
- Knowing yourself well enough to spot if things aren't OK and being willing to seek help

# Absence of the protective factors

- When you can't detach / identify with people
- When there's overlap with your personal life
- When you're isolated / unsupported
- When you can't talk about it (toxic burden)
- When normal coping is not possible
- When physical resilience is overwhelmed
- If you're blamed / undermined
- When things go wrong and you feel mistakes were made
- If you or colleagues are threatened or in danger

# Organisational threats

- Poor resourcing
- Low morale
- Poor management
- Bullying
- Culture that prevents help-seeking
- Research with other groups suggests that:
  - organisation satisfaction has a significant relationship to burn out
  - good management has a significant relationship to PTS

# How will you know if you're not OK?

- Jot down on a post-it the signs you recognise when you're stressed
- One sign / symptom per post-it

# Warning signs

- **Physical / behavioural**

- Poor sleep
- Feeling on edge / jumpy
- Avoiding things / places that prompt memories
- Distancing yourself from family/friends
- Self-medication with alcohol or drugs

- **Emotional / psychological**

- ++ irritability/anger
- ++ distress
- Feelings of dread
- Numbness
- Avoiding thinking or feeling
- Intrusive memories
- Concentration problems



# Risks of caring..

- **Secondary traumatic stress**
  - Person experiences symptoms which echo those of the primary victim (intrusions, anxiety, avoidance)
- **Vicarious traumatisation**
  - Negative changes to views of self/others/world
- **Burnout**
  - Emotional exhaustion
  - De-skilled / reduced personal accomplishment
  - Despair (overwhelming scale of problem, devastating impact on people's lives, inadequacy of civic response)
  - Idea of ethical or spiritual pain

# Other impacts

- **Low mood and depression**
  - Rumination
  - Difficulty making decisions
  - Loss of confidence
  - Feelings of guilt, anger, frustration, inadequacy
  - Decreased sensitivity & dulling of emotions
  - Loss of pleasure
  - Withdrawal

# Positive outcomes

- Being part of a important, reparative process
- Enjoyment of role
- Professional beliefs
- Sense of expertise
- Connection to colleagues
- Status and respect

# Post traumatic growth

- Greater appreciation of life
- Warmer closer relationships
- Greater sense of personal strength
- Recognition of new possibilities in life
- Spiritual development

# What's your profile?

# Rumination (R)

- **Rumination** measures the tendency to ruminate about emotionally upsetting events that have occurred in the past or might occur in the future. This type of rehearsing has the effect of maintaining physiological arousal, so that levels of hormones such as cortisol and adrenaline remain high; hence the lower the score the better.

- The **Rumination** measure is quite stable over time, and therefore represents a consistent and habitual way of responding. However, a high score does not consign you to a life of stress – it is simply a reflection of a long-standing habit and like all habits, can be changed.

# Emotional Inhibition (EI)

- **Emotional Inhibition (EI)** measures the tendency to inhibit the expression of emotional experiences. It is not a measure of how emotional you are, rather the extent to which you bottle it up. It is independent of Rumination, so that you can have a high score on one and a low score on the other, but the combined effect of inhibiting emotion and persistently ruminating over emotional upset is particularly damaging.



- Low scores are preferable for Emotional Inhibition, although the expression of emotion needs to take account of time and place. EI is closely related to social support, since this is generally where emotion is expressed and there is a gender difference, with women tending to be more emotionally expressive than men.

# Sensitivity (SENS)

- **Sensitivity** (SENS) describes the ability to perceive and understand other people's emotions, and is a classic two-edged sword. Being able to respond accurately to others' emotional feelings can be immensely beneficial, in fact it is integral to many high risk jobs. However, unless we can keep the emotional upset in perspective, we might ourselves become subject to it.
- High scores are indicative of sensitivity: low scores indicate a preoccupation with one's own emotional state.

# Perspective Taking (PT)

- **Perspective Taking (PT)** one of the 4 dimensions of empathy, considers “other-oriented” reactions to the distress of others. It recognises more cognitive aspects of empathy, unlike Sensitivity which is more affective in nature.
- Higher levels of PT have been associated with lower levels of work related distress, possibly because putting things into perspective removes the potential for more personal reactions to events, and therefore higher scores are preferable.

# Detachment (DET)

- **Detachment** describes a strategy for disengaging oneself from the crippling emotion associated with the problem – in other words being able to see it in perspective.
- High scores indicate greater detachment and are preferable. Low scores represent the tendency to become overwhelmed by negative emotion.

- It's important to recognise that Detachment is not at all like avoidance – it does not involve suppression or denial of emotion. Neither does it imply being cold or unemotional. It's about seeing things for what they really are, without the attachment to them.

# Less helpful combinations:

- High Rumination + high Emotional Inhibition
- High Rumination + low Detachment
- Low Perspective Taking + High Sensitivity
- Low Detachment + High Sensitivity

# A psychological first aid kit



- Some factors are static – temperament / personality / genes
- Others dynamic – context, circumstance
- Either way can learn to manage risky ones and can develop new skills

# Stress management / self care

- Leaving work at work
- Knowing what makes you feel happy and relaxed
- Exercise and relaxation
- Spending time with (and talking to) friends and family
- Good food and sleep routines
- Monitoring your alcohol intake
- Taking your holidays



# Self-care

- Please ask your colleague to identify at least one thing they do to take care of themselves.
- N.B. If it's exercise (that's great!) but get something else as well
- You're going to feedback on their behalf.

# Managing rumination

“Some of the worst things in my life never happened.”

Mark Twain

# Managing rumination

- Recognising the interaction between thoughts, emotions, physiology and behaviour
- Thoughts not facts
- Self compassion (*what would you say to a friend?*)

# Research indicates that writing..

- Has salutary effects on health (King, 2000; Pennebaker, 2000)
- Improves immune function (Esterling et. al 1994)
- Enhances positive self perception (Pennebaker & Keough, 1999)
- Builds more resilient self-concept (Pennebaker & Keough, 1999)
  - Optimism
  - Personal control
  - Positive regard
  - Sense that life is meaningful
- Results in long-term improvements in mood (Pennebaker, 1997)

# Managing stress - exercise



- Compensating for the effects of staying in alarm mode (hyperarousal)
- Importance of regular exercise to use up the adrenalin
  - Be careful with high adrenalin exercise
- Can also help to interrupt rumination

# Managing stress - relaxation



- Relaxation techniques (to interrupt the production of adrenalin)
  - Controlled breathing
  - Progressive muscular relaxation
  - Visualisation, mindfulness

# Maximising your chance of a good sleep

- Try to have a routine
  - Bed at the same time each night
  - Relaxing / self-soothing activities
- Calming environment (dark / uncluttered)
- Avoid over-stimulation before sleep
  - Minimise computers and bright lights after 9pm
  - Limit aerobic exercise
- Limit alcohol intake

# Food and stress

- Adrenalin switches digestion off / nor-adrenalin switches it back on
- Queasiness, diarrhoea, indigestion, acid reflux - common side effects of stress
- >> people eat less..
- 
- **Maintaining good diet and eating regular meals essential**



# Watch out for alcohol...



- Depressant
- Blocks cognitive and emotional processing

# Surviving trauma exposure - Psychological First Aid

- Recognising that you've been affected
- Understanding what's going on
- Tolerating rather than avoiding your reactions
- Taking care of yourself
- .. so that processing , memory making and learning can occur
- Seeking help if necessary

# Dealing with post traumatic reactions

- Intrusive memories
  - Grounding techniques to orient in present and recognise current safety
  - Trust your brain, this is material it needs to process
- Aiming for distress tolerance rather than chasing emotions away

# Avoiding avoidance

- *What we resist persists*
- Tolerating and allowing natural processing
- Recognising unhelpful avoidance (including self-medication)
- Doing something positive about it

# Peer and social support

- Developing and maintaining significant interpersonal relationships
- Work / life balance and boundaries
- Who do you talk to when you're distressed about work?
- Role of formal and informal peer support (supervision, coffee breaks)

# Bedrock of resilience

- Connectedness
- Emotion regulation
- Cognitive flexibility
- Self-efficacy



# Your psychological first aid kit

How's yours looking?

Does anything need replenished?

Is there anything missing?



Identify two things that you're going to keep doing, start or re-start as part of your self-care plan

# Team-care

- In small groups (and if you have a team) please discuss what currently works for your team
- Is there anything else you can think of that might help you all stay well?



# Staying well

- Most of you most of the time will cope well with the stressors you face
- Make sure you know what it is that keeps you well
- And if you find that you're not coping, seek help so that you recover as quickly as possible

- Gill Moreton

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