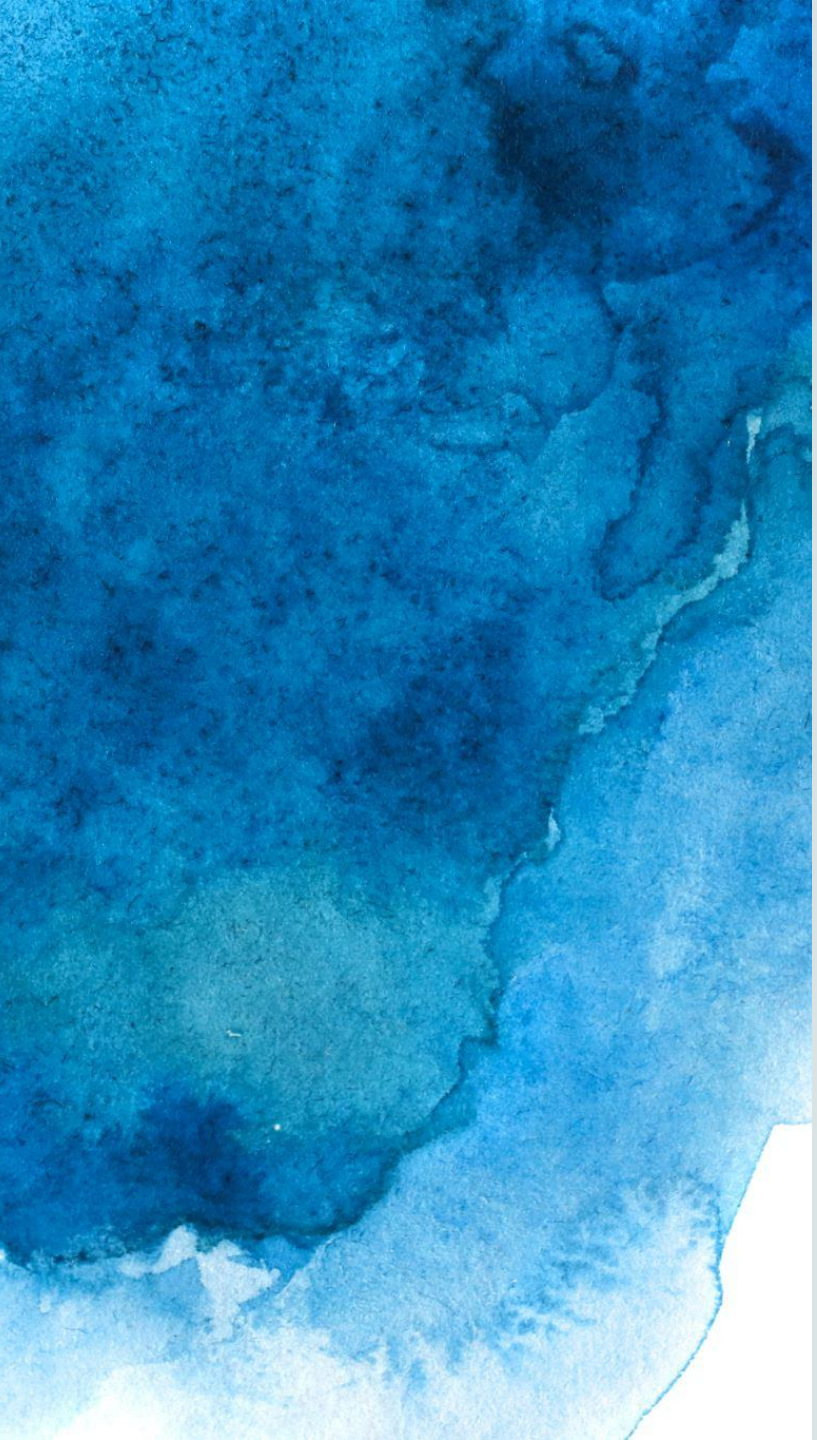


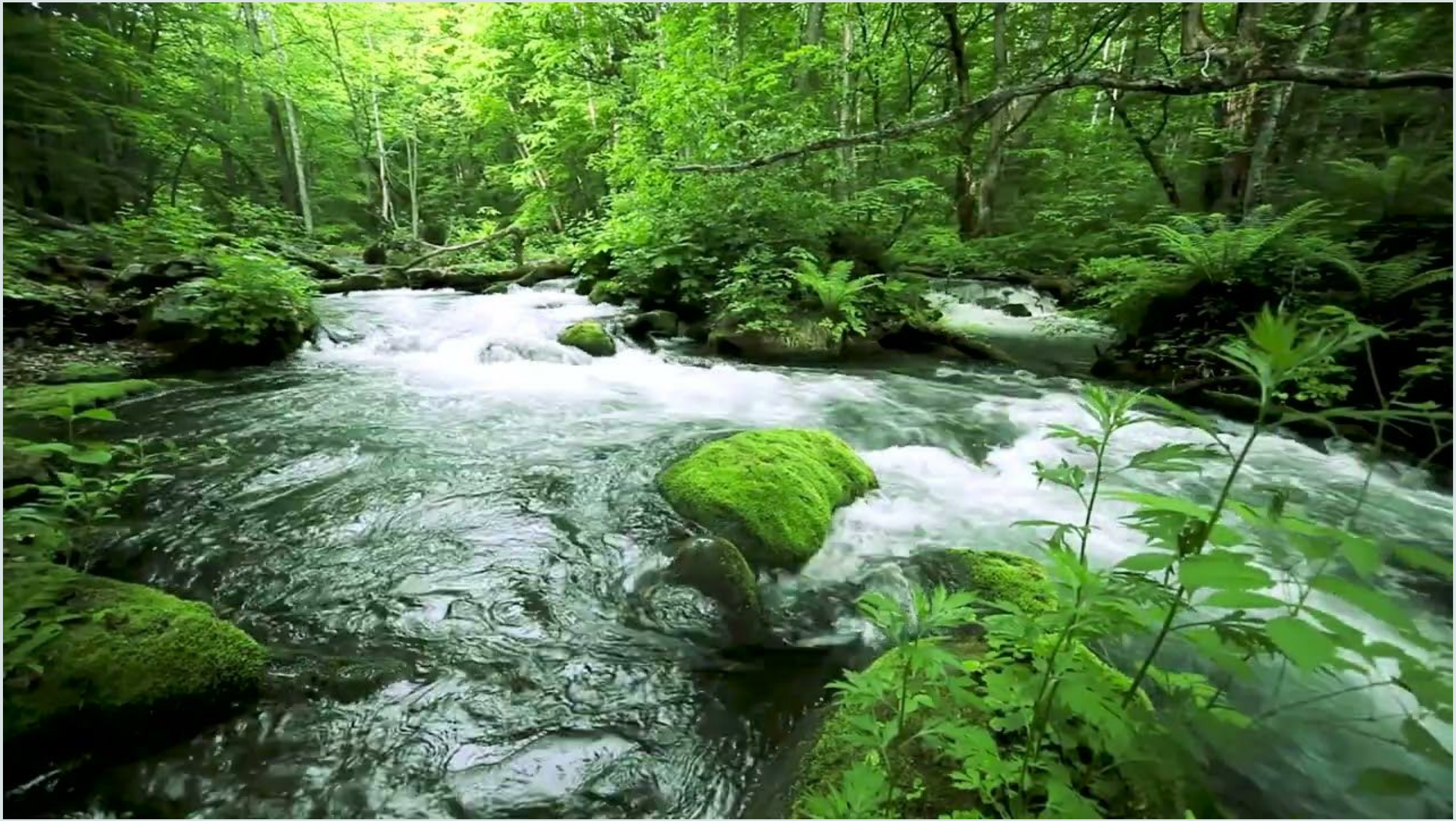
Community Care & Self-Tending

Julie M. Meek, LCSW

SFTi
STRENGTHENING FAMILIES
TRAINING INSTITUTE

Intention for our time together:

That connections formed and information shared provides each individual and our collective exactly what is needed for continued healing.



Connect!

1) Get into groups of 3 or 4
2) Create handshake/airshake/elbowshake/hipswings with at least 5 steps and introduce yourselves

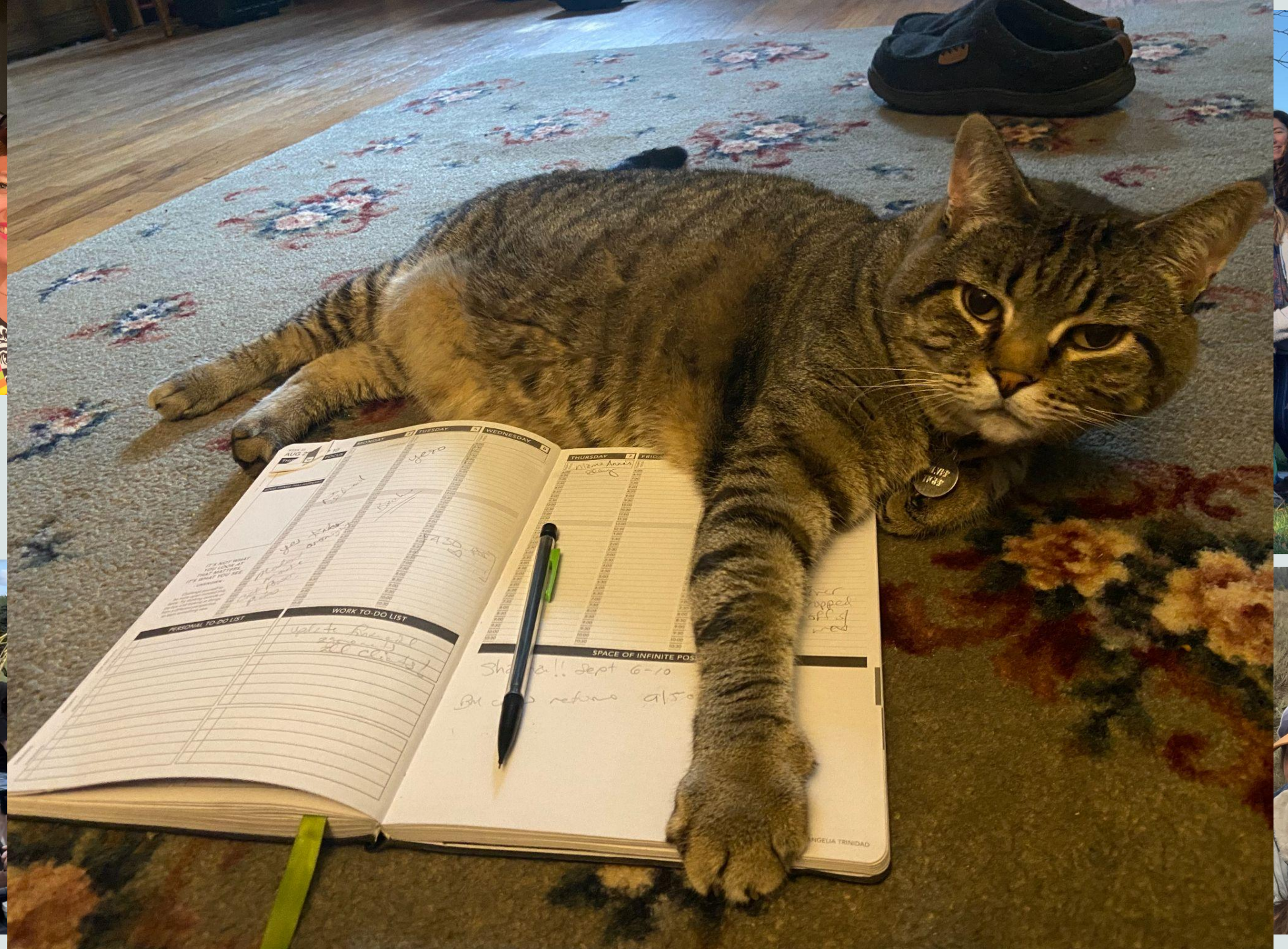
3) Share what brings you to this workshop and what you're hoping for.

guideposts

review the impacts of burnout, compassion fatigue in our current lifeworld context

review and practice collective tending

create an intention for honoring our whole selves moving forward in our important work


WEDNESDAY
THURSDAY
PERSONAL TO-DO LIST
WORK TO-DO LIST
SPACE OF INFINITE POS

Key Terms

- Burnout & Compassion Fatigue
- Secondary Traumatic Stress/ Vicarious Trauma
- Compassion Satisfaction
- Self-care
- Community Care

What is meant by “integrated community care?”

“How do you purposely cultivate your ability to be present?” – Laura Van Dernoot Lipsky

"That which is to give light must endure burning." -Frankl


TRAINWRECK
POOP CRUISE

Compassion Fatigue vs. Burnout

COMPASSION FATIGUE

- Exhaustion from repeated/prolonged exposure to others' suffering or trauma
- Typically refers to those in helping professions
- Can come on more suddenly (I'm fine until I'm not)

BURNOUT

- Exhaustion from being overworked
- Common in any job but mostly from a stressful workplace
- Develops over time, harder to combat

We can experience either, or both!

Compassion Fatigue vs. Burnout: What's the Difference? - 2024 - MasterClass

What do we know about what causes burnout/CF?

What do we already know about what mitigates or prevents burnout/CF?

What are three categorical characteristics of burnout?

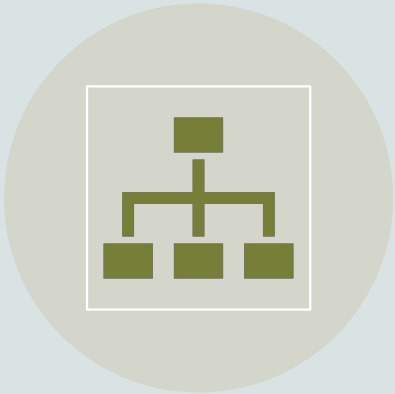
What are at least three levels at which burnout/CF factors can be influenced?

Areas of Impact

Body • Lack of energy • Increased substance use • Muscle tension • Insomnia • "Wired but tired" • Digestive challenges • Syndromes • ...and on	Mind • Difficulty focusing • Brain fog • Indecision • Indifference • Negative outlook • Distraction • ...and on
Emotion • Mood swings • Irritability • Apathy • Guilt and shame • Depression • Numb • ...and on	Spirit: • Disconnection • Lack of desire to engage in spiritual practices • Feelings of aloneness • Harder to see the "bigger picture" • ...and on

Image credit: Decolonize and Rize, Ariana Fontiakis and Vanessa Lesperance

Levels of Burnout



TRAIT
(ENCOMPASSING)

STATE (PERIODIC OR
SITUATIONAL)

ACTIVITY-BASED

James & Gilliland, 2017; slide credit: Lori Sirs, DSW, LICSW

Stages of Burnout

Stages

- Enthusiasm (high hopes!)
- Stagnation (unmet needs)
- Frustration (questioning)
- Apathy (chronic indifference)

Antidotes/Response

- Orientation/adjust expectations
- Provide incentives, reinforcement foster compassion satisfaction
- Confront the problem, provide support
- Psychotherapy to manage this crisis

James & Gilliland, 2017

Secondary/Vicarious Trauma

- STS can build over time and symptoms may not be noticeable until very problematic.
- Occurs when helper is exposed either directly or indirectly to the traumatic experiences of their client.
- STS is said to be “catching the symptoms” of the client, including intrusive images, difficulty sleeping, nightmares, hypervigilance, suspicion of others, high anxiety, numbness, shame, guilt, and inability to experience pleasure.

Two sides of the same coin…

Burnout/STS –

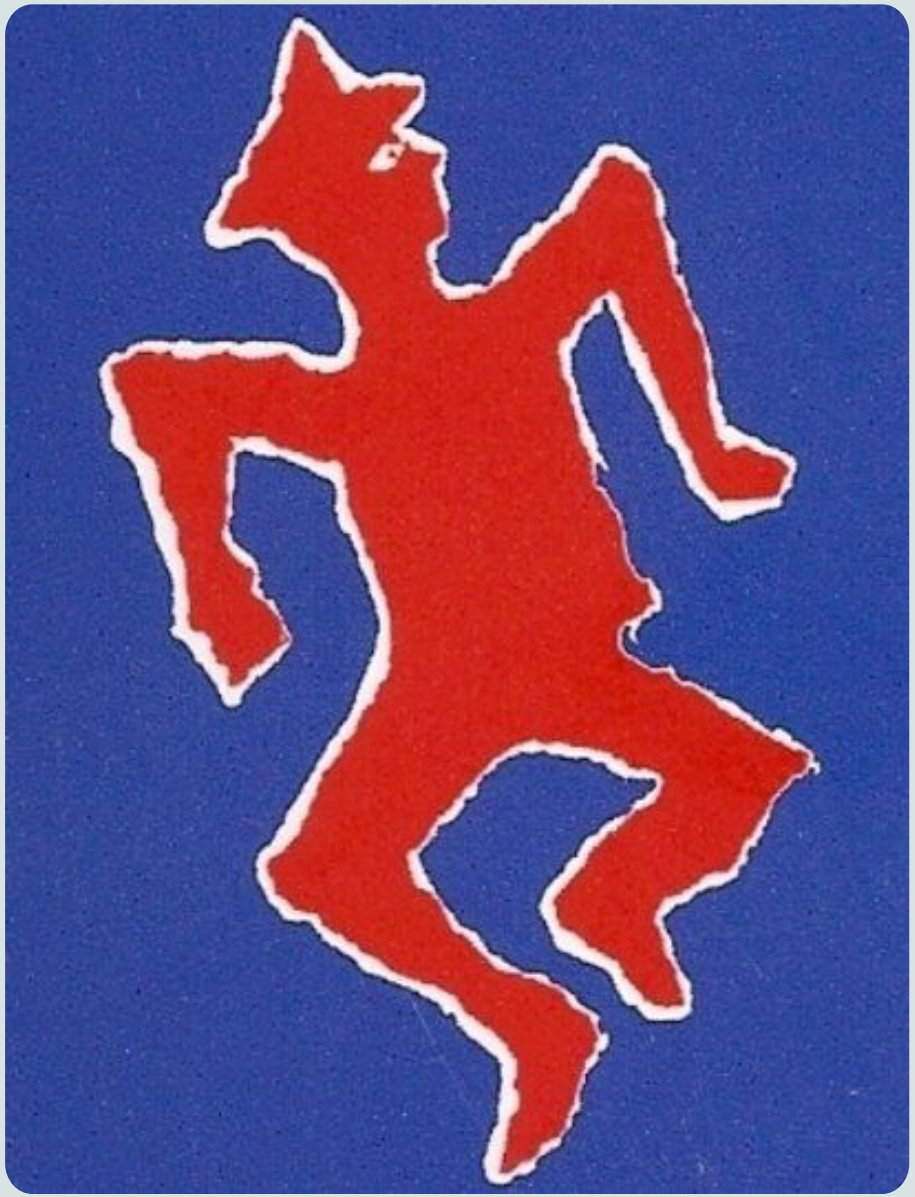
- *Is* the result of our high-demand roles and inherently oppressive environments
- A job hazard/risk
- *Is not our fault*

Burnout/STS –

- Is compounded by how we respond to these environments and demands
- Our professional responsibility to manage
- Our collective responsibility to steward

Caregiving Timeline and Narrative

- Sharing our stories is one of the most powerful processing tools we have
- Providing that space for others to share is also healing
- Use front side to graph seminal events in your life as a caregiver
- Use back side to write narrative based on your timeline

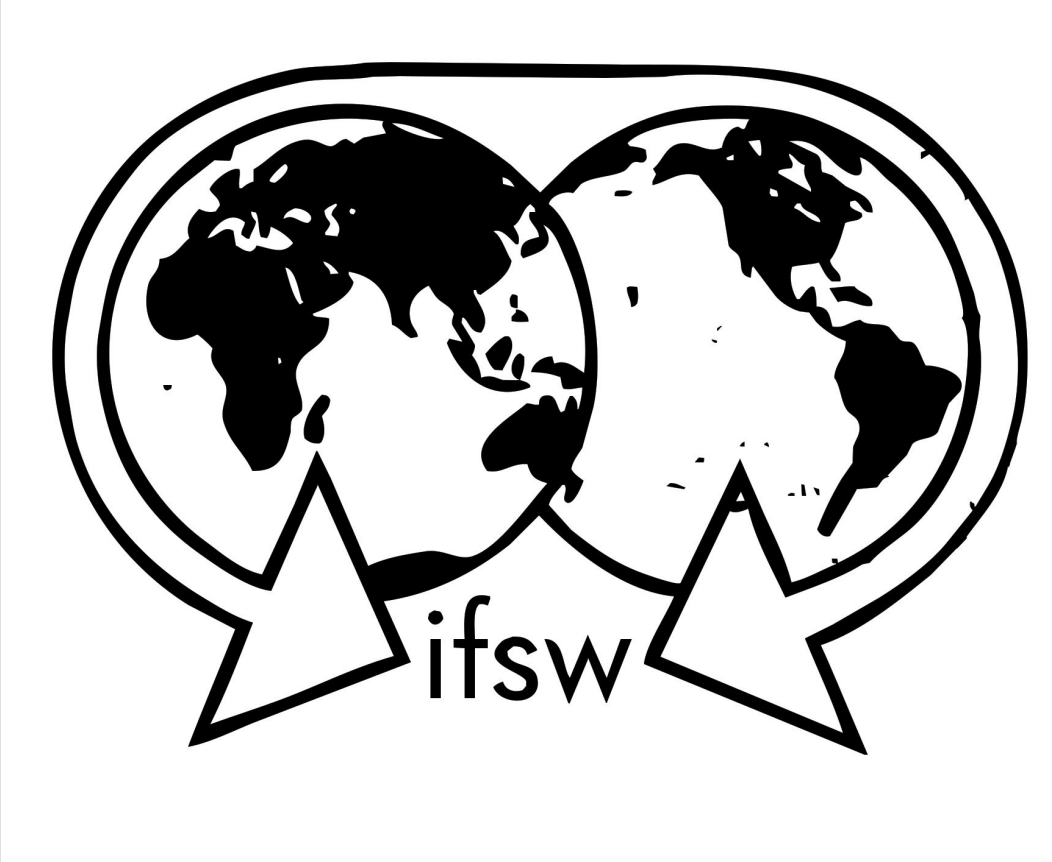


The Catch-22

- The very thing that gives workers in the helpful professions the ability to do their work and do it well is the very thing that can make the it most challenging.

Our ethical obligation

- ***9.6 Social workers have a duty to take the necessary steps to care for themselves professionally and personally in the workplace, in their private lives and in society.***
- https://www.ifsw.org/global-social-work-statement-of-ethical-principles/



Neurophysiology of Stress

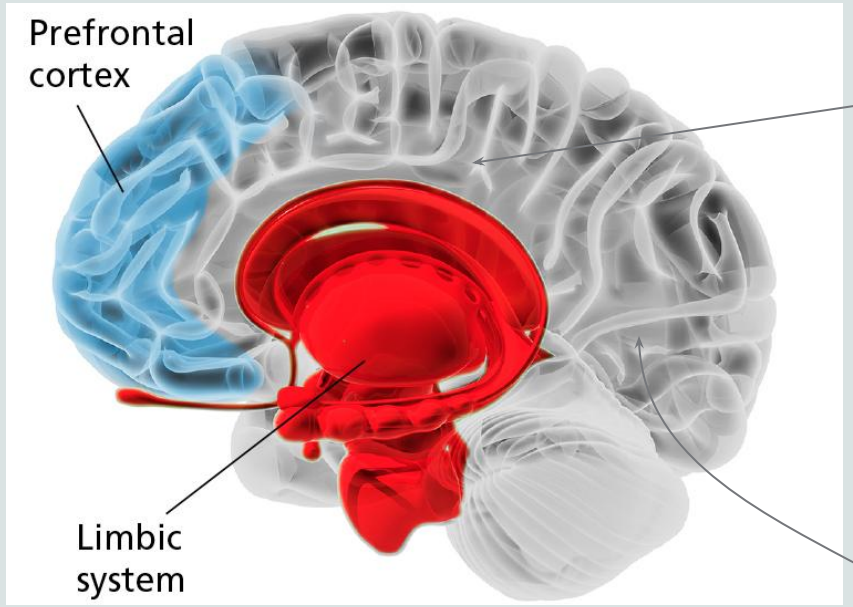


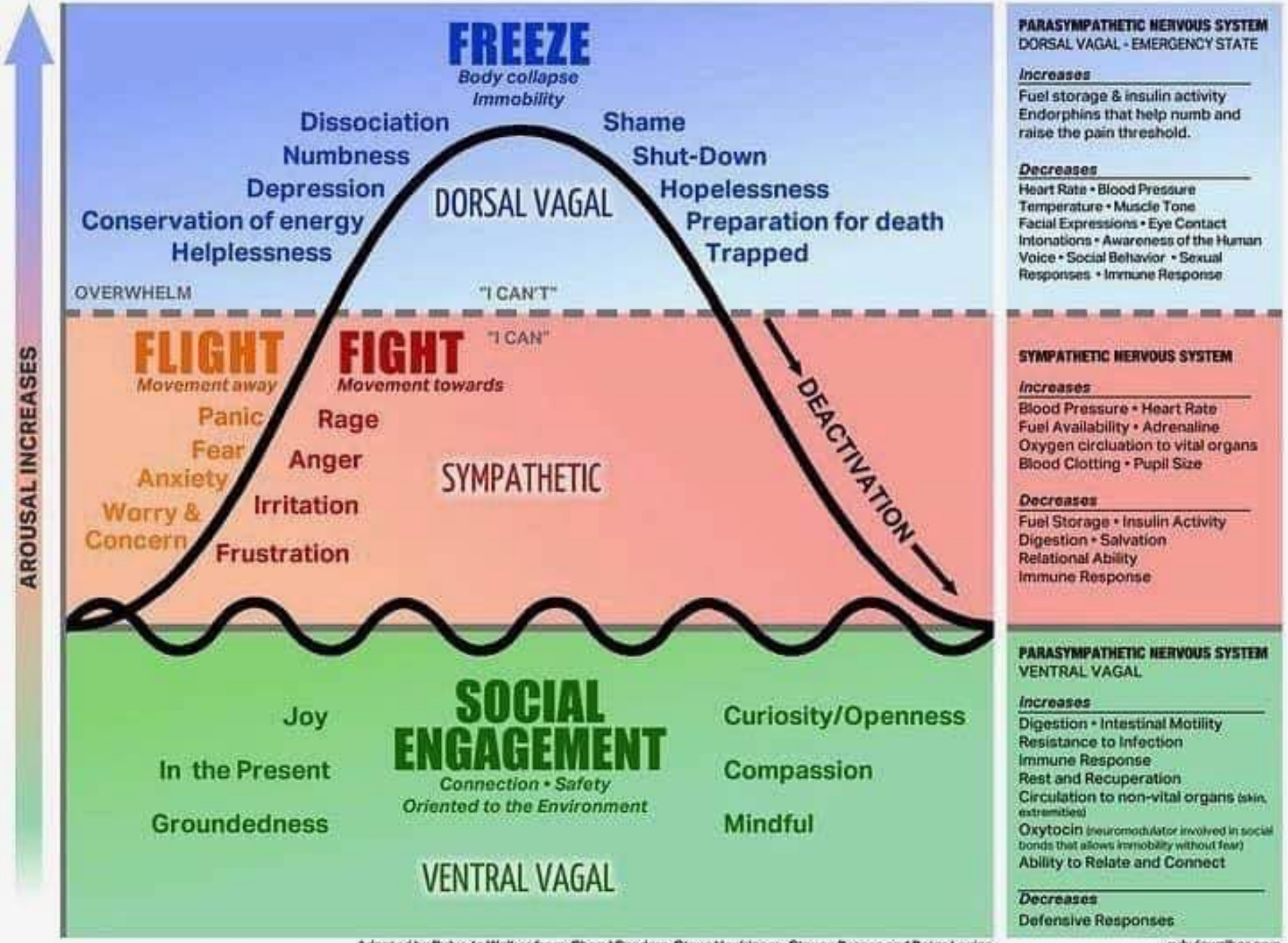
Image source: Claus Lunau/Science Source

PFC

- Self-regulation
- Executive functioning
- "Wise Brain"
- "Cool" system
- "Upstairs"

Limbic System

- Fight, flight, freeze, faint, fawn
- Creates emotions
- "Survival Brain" – "Downstairs"
- "Hot" system, Attachment


AROUSAL INCREASES
FREEZE
Body collapse
Immobility
Dissociation
Numbness
Depression
Conservation of energy
Helplessness
DORSAL VAGAL
Shame
Shut-Down
Hopelessness
Preparation for death
Trapped
OVERWHELM
"I CAN'T"
FLIGHT
Movement away
Panic
Fear
Anxiety
Worry &
Concern
FIGHT
Movement towards
Rage
Anger
Irritation
Frustration
"I CAN"
SYMPATHETIC
DEACTIVATION
Joy
In the Present
Groundedness
SOCIAL
ENGAGEMENT
Connection • Safety
Oriented to the Environment
Curiosity/Openness
Compassion
Mindful
VENTRAL VAGAL
PARASYMPATHETIC NERVOUS SYSTEM
DORSAL VAGAL - EMERGENCY STATE
Increases
Fuel storage & insulin activity
Endorphins that help numb and raise the pain threshold.
Decreases
Heart Rate • Blood Pressure
Temperature • Muscle Tone
Facial Expressions • Eye Contact
Intonations • Awareness of the Human Voice • Social Behavior • Sexual Responses • Immune Response
SYMPATHETIC NERVOUS SYSTEM
Increases
Blood Pressure • Heart Rate
Fuel Availability • Adrenaline
Oxygen circluation to vital organs
Blood Clotting • Pupil Size
Decreases
Fuel Storage • Insulin Activity
Digestion • Salvation
Relational Ability
Immune Response
PARASYMPATHETIC NERVOUS SYSTEM
VENTRAL VAGAL
Increases
Digestion • Intestinal Motility
Resistance to Infection
Immune Response
Rest and Recuperation
Circulation to non-vital organs (skin, extremities)
Oxytocin (neuromodulator involved in social bonds that allows immobility without fear)
Ability to Relate and Connect
Decreases
Defensive Responses
Adapted by Ruby Jo Walker from: Cheryl Sanders, Steve Hoskinson, Steven Porges and Peter Levine
rubyjowalker.com

The Self-Care Wheel

@counsellorcronan

CARING FOR YOURSELF IN THE FACE OF DIFFICULT WORK

Our work can be overwhelming. Our challenge is to maintain our resilience so that we can keep doing the work with care, energy, and compassion.

10 things to do each day

1. Get enough sleep.
2. Get enough to eat.
3. Vary the work that you do.
4. Do some light exercise.
5. Do something pleasurable.
6. Focus on what you did well.
7. Learn from your mistakes.
8. Share a private joke.
9. Pray, meditate or relax.
10. Support a colleague.

For More Information see your supervisor or visit www.istss.org, www.proqol.org and www.compassionfatigue.org

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FOCUSING YOUR EMPATHY

Your empathy for others helps you do your job. It is important to take good care of your feelings and thoughts by monitoring how you use them. The most resilient workers are those that know how to turn their feelings to work mode when they go on duty, but off-work mode when they go off duty. This is not denial; it is a coping strategy. It is a way they get maximum protection while working (feelings switched to work mode) and maximum support while resting (feelings switched off-work mode).

How to become better at switching between Work and Off-Work Modes

1. Make this a conscious process. Talk to yourself as you switch.
2. Use images that make you feel safe and protected (work-mode) or connected and cared for (non-work mode) to help you switch.
3. Develop rituals that help you switch as you start and stop work.
4. Breathe slowly and deeply to calm yourself when starting a tough job.

Body check-in

Compassion Satisfaction

- "Compassion satisfaction is about the pleasure you derive from being able to do your work. For example, you may feel like it is a pleasure to help others through what you do at work. You may feel positively about your colleagues or your ability to contribute to the work setting or even the greater good of society through your work with people who need care." (ProQol.org)
- CS is something you can intentionally grow and cultivate in yourself and in your organization.

Contributing Factors

- Balancing your workload
- Setting realistic expectations for yourself and your staff
- Balancing your work/play/recharge activities
- Connecting with and supporting your colleagues frequently and meaningfully
- Regularly and actively engaging in self-care and intentional self-regulation
- Shifting to principle-driven rather than outcome-driven professional behavior
- Internalizing one's locus of control
- Utilizing evidence-based mental health treatment

On index cards:

-Write 2-4 sentences:
-recent positive memories that exemplify why you do the work you do, or
-ways you have felt supported in your circles, organization, or community lately
-or both!

What is community care?

"Self-care and community-care are very much linked. There is only so far self-care can go without a community around you to help support you in the moments when you may not be at your best. True self-care does not look like the hyper-individualism we have been taught."

– Donna Oriowo, PhD

Organizational Care	Greater Community Care
Virtual Staff Lounge (online forums, text threads)	Mutual support networks
Co-listening partnerships	Neighborhood networks
Reflective Supervision, accessing supervision often	Friendship text thread circles (WhatsApp, Signal)
Mental Health Days, encouraging healthy work/life balance, celebrating healthy boundaries	Meal sharing, childcare exchange, clothing/item swaps, coordinating to-dos with partner or best friend or close family member
Sharing opportunities for yoga, potlucking, meditation, support groups, counseling (EAP)	Checking in on quiet friends and family; reaching out when you're in need (like you wish they would when they need support)
Organizations actively seeking to relieve burden from their employees who belong to historically oppressed groups	

TEND & BEFRIEND STRATEGY: CREATING CARING CONNECTIONS

- On the other side of your index card, draw a large circle with your name in the center.
- Give this some thought. Who is your true core team of people you trust? Who do you hope would reach out to *you* if they were having a hard time?
- Write their names around your name. Feel free to add flare :)
- Try to reach out to, talk to, text, send a meme or song to at least one of them each day <3

The elephant in the room

What *actually* gets in the way of self-care?

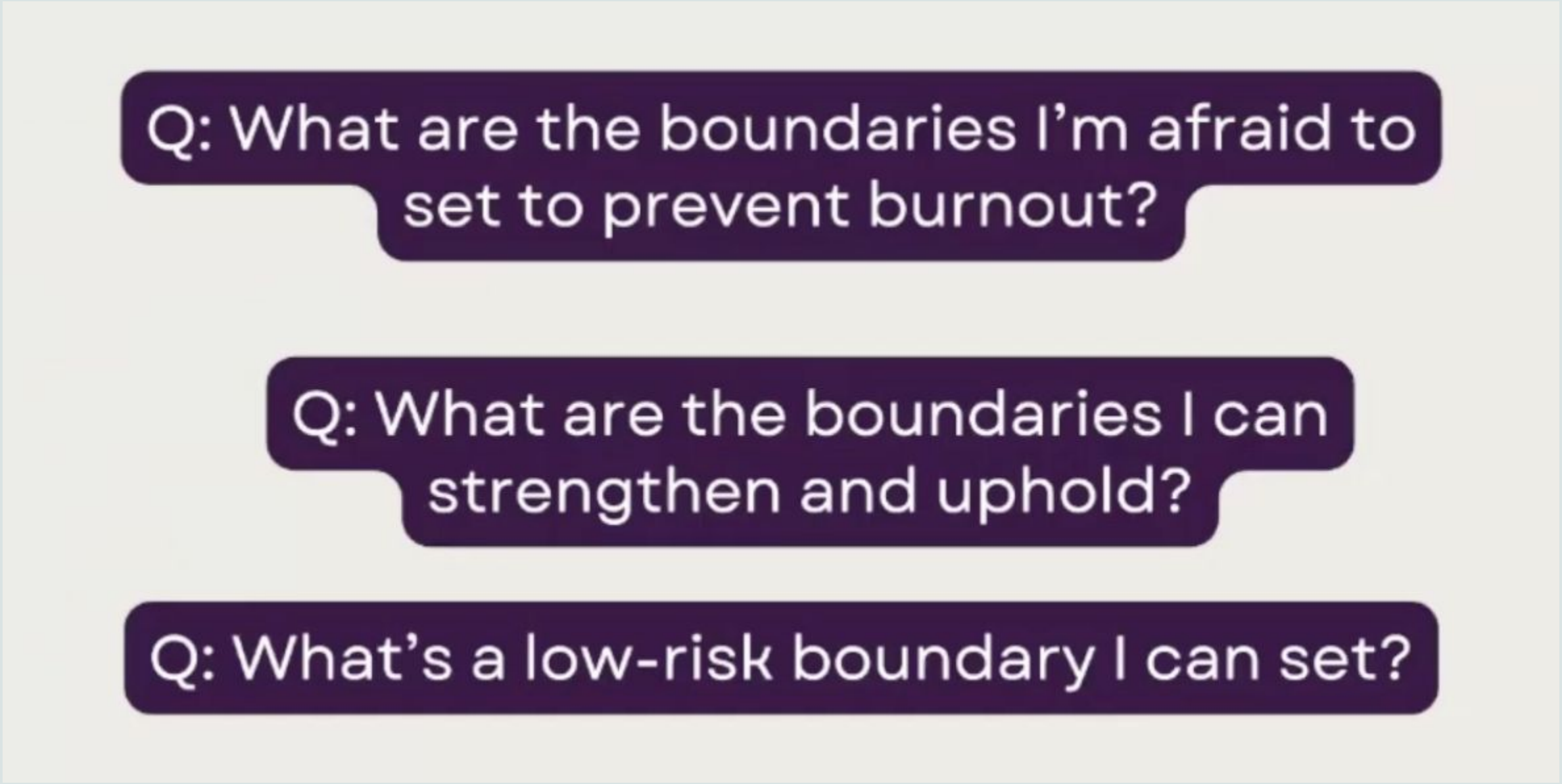


Image credit: Decolonize and Rize, Ariana Fontiakis and Vanessa Lesperance

Final Reflections:

-What are you taking from this workshop?

-What care for yourself would you like to continue doing, and/or, what supports would you like to strengthen on the individual, organizational, or community level?

-How will you remember to connect with at least one supportive person per day?

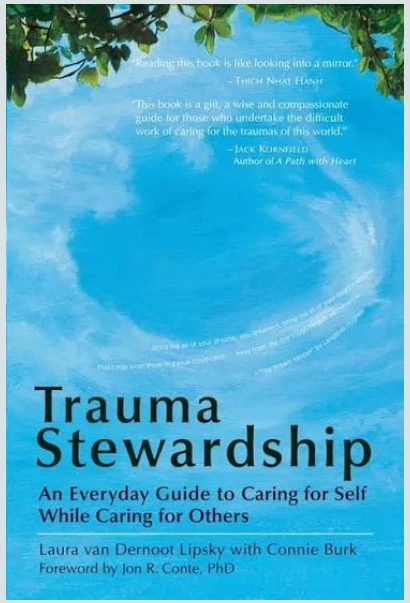
-What are you still curious about, or what were you hoping we could cover that we didn't?

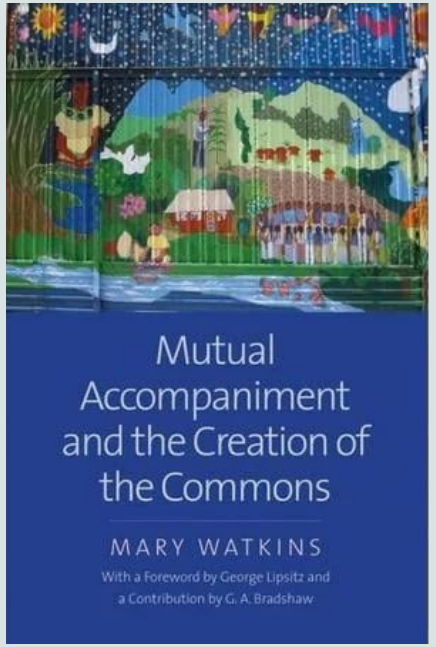
Favorite Current Resources

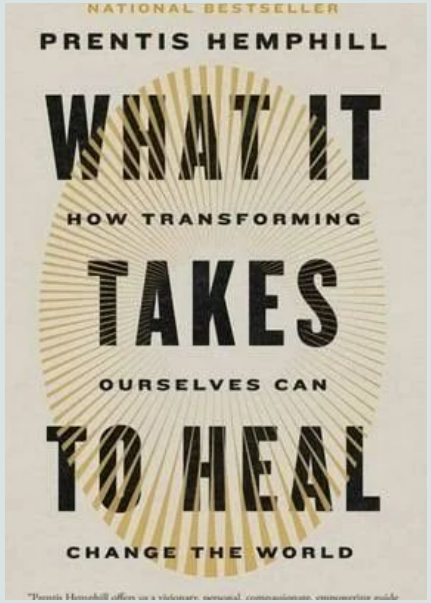
-Codependents Anonymous - **CoDA.org**

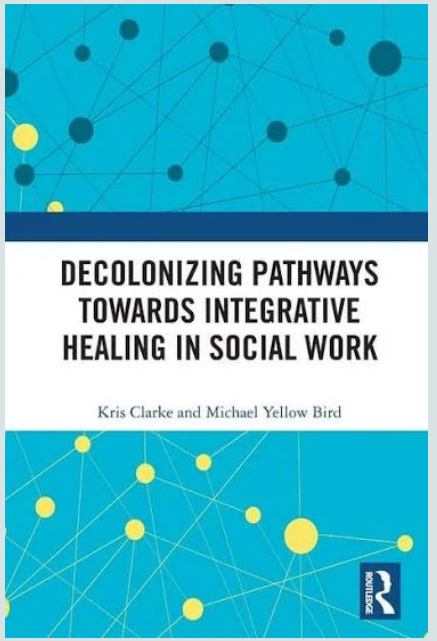
-**Dr. Raquel Martin** - tons of free materials, especially one on the difference between a *boundary, standard, and a rule*!

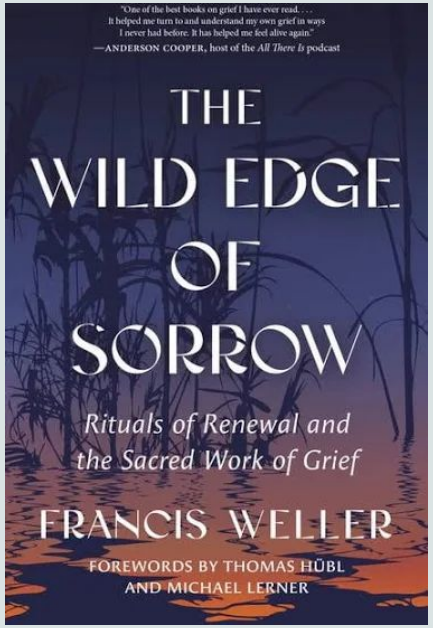
-Local amazing group of therapists focused on connecting & decolonizing their clinical work and other workshops: **Boise Experiential Therapy Collective - boiseexperientialtherapy.com**











If grief can be a doorway to love
then let us all weep
for the world we are breaking apart
so we can love it back to wholeness again.

~ **Robin Wall Kimmerer**

Art by Raven Chalk

What questions/comments do you have?

Please approach me after for additional support!

- jmeeklcsw@gmail.com
- Resource Folder! ←

References

Batacharya & Wong. (2018). *Sharing Breath: Embodied Learning and Decolonization*. AU Press.

Bloomquist, K. R., Wood, L., Friedmeyer-Trainor, K., & Kim, H. W. (2015). Self-care and professional quality of life: Predictive factors among MSW practitioners. *Advances in Social Work Vol. 16 No. 2 (Fall 2015), 292-311,* doi: 10.18060/18760.

Cox, K. & Steiner, S. (2013). *Self-care in social work*. Washington, D.C.: NASW Press.

Felder, A.J. & Robbins, B.D. (2011). A cultural-existential approach to therapy: Merleau-Ponty's phenomenology of embodiment and its implications for practice. *Theory & Psychology 21(3) 355–376.*

Hinz, L. (2018). *Beyond self-care for helping professionals: The expressive therapies continuum and the life enrichment model.* Abingdon, UK: Routledge Press.

James, R.K., & Gilliland, B.E. (2017). *Crisis Intervention Strategies, 8th Ed.* Cengage Learning.

Malchiodi, C. (2020). *Trauma and expressive arts therapy: Brain, body, & imagination in the healing process*. New York, NY: Guilford Press.

McGarrigle, T. & Walsh, C. (2011). Mindfulness, self-care, and wellness in social work: Effects of contemplative training. *Journal of Religion & Spirituality in Social Work, 30(3), 212-233.*

Miller, J., Grise-Owens, E., Owens, L., Shalash, N., & Bode, M. (2020). Self-care practices of self-identified social workers: Findings from a national study. *Social Work (New York), 65(1), 55-63.*

National Association of Social Workers. (2017). NASW code of ethics. Retrieved September 25, 2022, from https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English

Raimondi, Gwynn (2019). *Soothe your nervous system*. www.gwynnraimondi.com

Sirs, L. & Meek, J. (2021) Embodiment Practice: Using Poi Spinning in the Healing Process, *Australian Social Work*, 74:2, 243-249, DOI: 10.1080/0312407X.2020.1847307