

Taking care of myself as a helper in the light of encountering trauma and strong emotions

Helen Christie and Elisabeth Ng Langdal



Mental Health and Human Rights Info is a resource database providing free information about the consequences of human rights violations on mental health in contexts of disaster, conflict and war.

www.hhri.org

We share information in English and Spanish through:

- A database with more than 800 links
- A thematic page with selected topics
- A page for our Gender based violence manual (women, men, girls and boys)
- A page for you as a survivor



What MHHRI can offer

Webinar with discussion:

- How to help children and youth during war and crisis -
- Sexual violence during war is a crime against humanity. How to support helpers who work with women who have experienced sexual violence
- Psychological first aid - Support for victims of gross violations of human rights
- Helping a helper, taking care of yourself as a helper.

Discussion group

With one psychologist and 3-4 participants meeting once a week

Training on different topics

Sessions with 20 minutes film on a topic then a 60 minutes discussion.

Topics:

- Mental Health, Trauma and Stabilization Techniques
- Psychosocial support to children (6-12 years) in war
- How to assist children in time of war and crisis
- Sexual violence in war and conflict
- How to assist children and youth in time of war and crisis.

introduction

Why this topic?

*"The capacity for compassion and empathy seems to be at the core of our ability to do the work,
- and at the core of our ability to be wounded at work"*

Figley

WHO: Psychological First Aid

"PAY EXTRA ATTENTION TO YOUR OWN WELL-BEING.

Take care of yourself, so that you can best take care of others"

WHY IS THIS SO HARD TO PRACTICE??

WHO. PFA (Psychological First Aid)- advices to helpers:

- Check: what has helped you cope before?
- Take time to eat, rest, relax
- Keep reasonable working hours
- Be aware of your limits, you cannot be responsible for all.
- Minimize alcohol, coffee, nicotine
- Check in with your fellow helpers, and have someone check in with you
- Talk to friends, loved ones or someone you trust



Group reflections

1. Why do we seem to be less careful in taking care of ourselves when helping traumatized people?
2. Which of the advices mentioned above is most difficult to follow?

Professional Responsibility - Whose Responsibility

- **Employer:** working conditions physically, work quantity, de-briefing possibilities, variation in tasks, support, feed-back, refill etc.
- **Colleague group:** mutual support, sharing experiences, good feedback processes, good rules (e.g. not talking during lunch), co-creating a good company culture etc.
- **Individual:** ability to self-observation, attentive attitude and awareness to own reactions (both in concrete situations and possible signs of wear and fatigue over time)

Risk factors

Total workload

- When working with traumatized, people under persecution, oppression,
 - Frustrated, fearful, suffering

Personal risk factors:

- too high demands on oneself
- Unrealistic demands on own abilities
- Difficulty in setting boundaries

Risk in the organisation

- Unrealistic demands on work performance
- Little influence over own work situation
- Lack of interest from colleagues, lack of feedback ,
- Isolation at work, lack of opportunity to exchange experiences
- Critical attitude from management

Take a minute to write down the risk factors in your present job-situation

Some typical examples of poor protection methods

Overinvolvement

The helper becomes so anxious about what the help seeker expresses, that one initiates a series of attempts at change without understanding well enough what the pain is an expression of, and before the help seeker has time to find their own solutions.

Sub-involvement – distancing

The helper does not really have the time, capacity to receive (or follow up) the help-seeker and what he / she conveys, - and instead thinks "This is not relevant to us", "This must be taken care of by others", etc

Diagnosis

Helper is not happy with how the help works, -and places responsibility for this on the help seeker: "She has a personality disorder", "He is completely impossible", "She is so restless / has a very bad breath", etc etc

Examples of over-involvement

The therapist becomes full of emotions and feels vulnerable and unstable

"This client is a very special case and has suffered a lot. I have to help and if necessary, I will do more than what is 'recommended', precisely because it is a special case ".

"In this special situation, I can give up my private phone number because no one else will be able to understand

"My contribution to help this client is absolutely crucial for the future of the client."

"... And none of my colleagues will understand, so I do not talk about this with anyone".

Examples distancing

Withdraws, belittling or denying discomfort:

"Whatever I do is not good enough; all my attempts to help are rejected "

This client is so demanding and takes all my time and energy; and does not take responsibility for herself "

"I can not stand this client and this hopeless case. I want to refer her further but feel trapped "

"I am a disaster as a helper. I'm as hopeless as the client and I'm ashamed of it. "

3 important questions for the day

What triggers / burdens you

- In the situation
- In the long term

How do you notice signs of triggers/ or stresses

- In the situation
- In the long term

What do you think is helpful?

- What coping strategies can you find?
- What do you need from your environment?

What
triggers /
burdens you

- In the situation

- In the long term

How can we as helpers get hurt?

A number of concepts are used in the trauma field

- Secondary traumatic stress (STSD)
- Vicarious traumatisation
- Burned out / compassion fatigue

but also:

- Passion for your work
- Post-traumatic growth

The three main concepts

- 1 secondary traumatization
2. vicarious traumatization
3. Compassion fatigue

secondary traumatization

When listening to severe traumatic stories:

- Develops PTS-like reactions such as:
 - Intrusive images/dreams, intrusive thoughts
 - Avoidance signs: distancing, denying
 - Increased activation, sleep disturbances and irritability

Vicarious traumatization

Cognitive reactions over time:

- More pessimistic, cynical
- more devaluating yourself and other people
- more coldhearted
- more negative view on meaning and reality

compassion fatigue

Mixed somatic, emotional, social, and cognitive reactions /high degree of exposure:

- tired, exhausted,
- sleep problems
- somatic complaints
- depression, boredom and hopelessness

Different dimensions within the helper

- The emotional state and reactions
- Symptoms and behaviour
- Cognitive style - belief systems
- Stress management

What physical
reactions
should you
be aware of:

Muscle pain

- Neck, shoulders, back, cheek

Digestion

- Stomachache, changes in appetite, etc.

Headache, dizziness

Blood pressure,

Which emotional
reactions:

Stressed

Irritable

Less tolerance for everyday problems

Mood swings

Depressed mood

Insensitive - "cold"

Which cognitive changes:

Function:

- Shorter concentration span, weekend focusing ability
- Gaps in memory

Content in mind/thoughts:

- More cynical
- More pessimistic
- More suspicious
- More self-critical (I'm not good enough, not nice enough..)

Which social changes:

Withdrawal

Isolation

More critical/judgmental

Does not want to get involved in other people's problems when in spare time

Other possible behavioural changes:



Sleeping problems



sleeps more, always three, never fully rested



Eating more or less



Exercise less



Drinking alcohol more often



Do not want to watch movies or read books that are demanding or contain pain

Why this description of misery?



Reflection exercise

Reflection

- How do you notice that something you are working on is overloading you / getting to you?
- Physical signs
- Thoughts
- Feelings
- Actions

In what way do you think your colleagues can see/notice it in you?

-What do you need from your colleagues when you feel like this?

-What do your colleagues already do?

What helps, and what do you need

- from yourself,
- from your colleagues
- From your employer

Why do most people thrive for many years?


- **Situational factors:**, good working environment, supportive relationships, variety -(both in tasks and in approach)
- **Individual factors:** personality, capacity for flexible adaptation to challenges, pragmatic coping, and constructive coping strategies (self-enhancement, not expressing negative emotions?)
- **Most common notions of growth:**
 - More open,
 - communicates better,
 - learned how amazing people can be,
 - more tolerant,
 - know I can handle difficulties myself,
 - value my own life.

What helps - Protective factors

- Good health
- Recreation, interests
- Meaningful relationships
- Creativity
- Perception of control/influence
- Dignity feeling, feeling of value
- Meaning and context
- Self enhancement
- Receiving support and help
- Part of a whole

What helps
you,
what do you
need

- from yourself,
 - from your colleagues
 - From your employer
-



Do you
know what
gives you
energy

Think about what gives you a boost:

- Social interaction - family, friends
 - Or alone time
- Exercise, running, yoga, dancing etc.
 - Or rest, sleep, tranquility
- Nature
 - In-door activity
- Art - music, literature, good films, humour,
 - What else?

All coping strategies in one model

BASIC-Ph

B- Belief and value system

- Remind yourself of the values and meaning behind why we do what we do - values in general (religious, political, humanitarian)
- clearly seems to have a protective effect

A- Affect

- Having access to own feelings, being able to own them, being able to voice them without judgment, being able to regulate them, being able to express them, share them, having self-compassion (not self-pity)
- Also appears to have a strong protective effect

S- social

- To have and to be able to use social support, both for talking about sharing, but also for replenishment (in job counselling, guidance, debriefing)

I - imagery

- Everything related to imagination, play, art seems to strengthen our life

C- Cognition,

- Learning. Understand , develop in a job context. The enormous importance of curiosity

Ph- Physical

- Relaxation techniques, meditation, mindfulness, running, training -
- Even something that requires a little concentration and coordination of several senses

Exercise:

What is your favourite strategy?

If you had to choose one or two more, which is closest?

What concrete things can you do to challenge yourself to expand your coping strategy?

Is your favourite strategy effective? When might it be destructive? (e.g., lots of coffee, soap operas, alcohol, sweets, etc.)

- Psychological first aid: Guide for field workers
- [9789241548205_eng.pdf;jsessionid=A106F099C33F62C3675B5EA0A4851AE5 \(who.int\)](#)
- [Doing What Matters in Times of Stress \(who.int\)](#)
- [Manual – Mental health and gender based violence in conflict:
www.hhri.org](#)

SELF-COMPASSION

- Give yourself permission for self-protection and self care
- Give attention and friendliness to your own reactions
- Everything that is good (for you) helps against mental strains
 - E.g.: walk, read a book, sit on a sofa, be with others.

