

S.U.R.V.I.V.A.L.

Guide for the Compassionate Caregiver

Kerry Todd

Set limits! We care. That's why we do what we do. But in order to continue to help others effectively, we need to start with ourselves. We can't help anyone if we go belly-up in the process! Maintain clear boundaries between work and play. Say "no!" if your plate is full. Don't take on more than you can handle. Seek out emotional support from others, whether it's from co-workers, friends or family members. Seek out supervision as needed. Limit exposure to traumatic materials! Forget the 6 p.m. news for a night, or reading the newspaper. Develop strategies to take care of yourself!

Understand that secondary trauma and compassion fatigue really does exist! Anyone who has exposure to trauma victims is at risk of experiencing secondary trauma at some point. It can happen to anyone by simply learning about the traumatic event. Compassion fatigue, (a term coined by Charles Figley, is, "A state of tension and preoccupation with the individual or cumulative trauma of clients." Until recently, it was believed that only those who experienced the trauma first-hand were "traumatized". We now know that those who help traumatized persons are also at risk of developing the same symptoms. It's important for those caring for victims in any capacity to understand that even a seasoned professional can suddenly feel a sense of hopelessness and despair.

Recognize the signs and symptoms of secondary trauma and compassion fatigue not only in ourselves, but in our co-workers as well. Symptoms may overlap with burn out or stress, but, key signs of secondary trauma are: anger; anxiety; depression; sadness; low self-esteem; emotional exhaustion; difficulty making decisions; difficulty concentrating; difficulty remembering things; fatigue; irritability; headaches or body aches; changes in eating or sleeping habits; increase in addictive behaviors; withdrawal from others. Symptoms of compassion fatigue are re-experiencing the traumatic event, avoidance or numbing of reminders of the event, and persistent arousal. There may also be symptoms commonly found in Posttraumatic Stress Disorder, or Acute Stress Disorder, such as intrusive thoughts, recurrent dreams, and intense psychological distress when thinking about or hearing about trauma.

Vacation! 5 minutes, 5 days, 5 weeks. Take time out for yourself and what's truly important in your life! Allow yourself a mental health day now and then! Take a break from your routine.

Identify stressors in your own life. In a recent workshop with program managers for Washington Court Appointed Special Advocates for Children, a list of stressors was generated that included: family; kids in college; the job; health; financial; pressures from the families served; system failures; and dealing with the outcome of bad decisions made for children and families served. Identify your own stressors and look at ways to eliminate some of these!

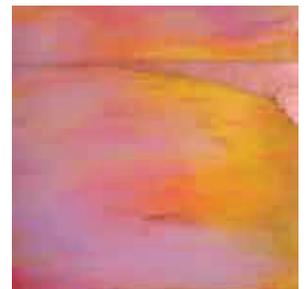
Vulnerability: As stated by Jon Conte, Ph.D., University of Washington School of Social Work, we need to be able to identify our own "hot spots". What are our triggers? What hits home for us? By having an awareness (continued)

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of what our triggers or “hot spots” are, we create an awareness that will help us be better prepared to deal with these situations. Or...understand what situations we would be better to avoid. Not only is this self-preservation, but it will be in the best interest of those you are working with, as well.

Accept your reactions! Reactions to hearing horrible things are normal! Fear, anxiety, depression, grief, irritability, emotional numbness, emotional distancing, intrusive thoughts, confusion, impaired memory, flashbacks, fatigue, sleep disturbances, sexual dysfunction are all normal ways of coping with abnormal situations. Don't be embarrassed or ashamed to talk to someone about these reactions. If these reactions or symptoms continue for more than a month, consider seeking professional help.

Live, love, laugh! Nothing is more important than achieving a balance in your life. Two of Dr. Conte's most important messages at his workshops about secondary trauma is “discharge” and “balance” Get rid of whatever it is that's eating at us and find ways to balance the stress of your work with play. How we accomplish that is up to each one of us! Rollerblade, take your kids fishing, take your dog to the park, kayak, do karaoke, plant a garden, seek spiritual guidance, take a long walk, ride your bike, paint, call a long-lost friend, take a bubble bath, compose a poem, ride a mechanical bull for the first time! Try something new or stick with something you enjoy. There will always be tragedies in our world. But the real tragedy would be if no one was there to care any more. Take of yourselves!



*Beach Mediation
N.4, N.5, N.6*

Kerry Todd is currently a social worker at Harborview Center for Sexual Assault and Traumatic Stress, Education and Training. She provides national, state-wide, and local training in the area of child sexual abuse as well as continues to provide counseling for children and youth. Ms. Todd previously provided evaluations and treatment for child victims of sexual assault and trauma at Children's Response Center (affiliated with HCSATS) for almost 13 years. Prior experience includes one year as a forensic child interviewer at San Diego's Chadwick Center and 3 years as an investigator for Child Protective Services in California.