I CAN'T SELF CARE MY WAY OUT OF THIS

Moving beyond self-care to address workplace trauma at the organizational level

The Social Work Lens

Podcast

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Training, Coaching, & Consulting on Workplace Trauma & Chronic Stress

Agenda

01 What is Trauma Exposure Response?

02 Signs & symptoms

03 HX of Intervention

04 Why isn't it working?

05 What should we do instead?

06 Interventions at every level

07 Questions & Resources!

STRESS VS TRAUMA

Workplace Stress

"Workplace stress… is the harmful physical and emotional responses that can happen when there is a conflict between job demands on the employee and the amount of control an employee has over meeting these demands. In general, the combination of high demands in a job and a low amount of control over the situation can lead to stress."

–Canadian Center for Occupational Health and Safety

Workplace Stress: Common Effects on the Body

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- Headache

- Muscle tension or pain

- Chest pains

- Increased heart rate and blood pressure

- Weakened immune system

- Fatigue / insomnia

- Stomach and digestive issues

- High blood sugar

- Increased cholesterol and fatty acids in blood for energy production systems

-Canadian Center for Occupational Health and Safety

Workplace Stress

—◇—

Stress can affect your mood or thinking by:

• Increasing forgetfulness, anxiety, restlessness, irritability, defensiveness, mood swings, hypersensitivity, anger, etc.

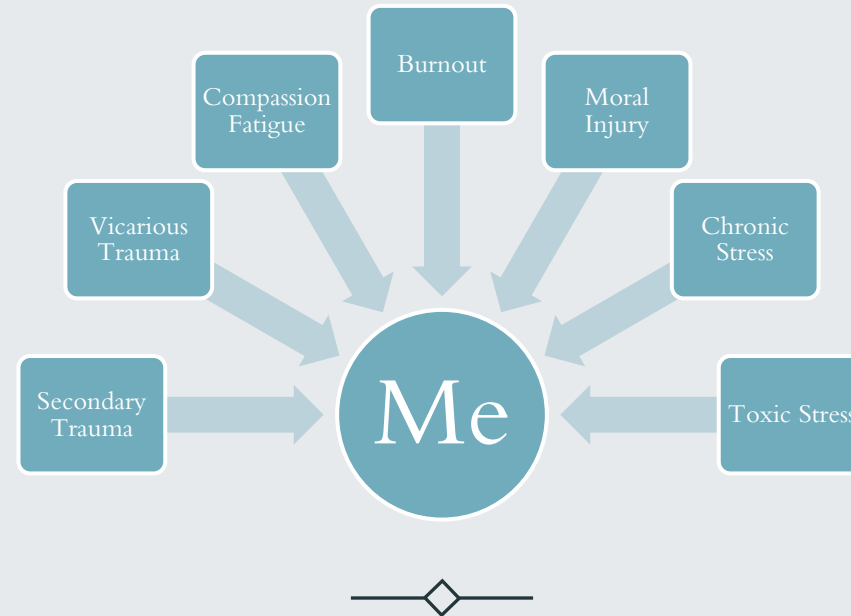• Decreasing ability to think clearly or focus

–Canadian Center for Occupational Health and Safety

SOME OF US MAY ALSO
BE EXPOSED TO
TRAUMA AT WORK

You may have used/heard these terms before…

Moral Injury

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"Moral injury is when one feels they have violated their conscience or moral compass when they take part in, witness or fail to prevent an act that disobeys their own moral values or personal principles."

-Disabled American Veterans

WHAT IS TRAUMA EXPOSURE RESPONSE?

Trauma Exposure Response

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"The transformation that takes place within us as a result of exposure to the suffering of other living beings or the planet… we are talking about the ways in which the world looks and feels a different place to you as a result of doing your work." – van Dernoot Lipsky

Commonalities Across Professions & Roles

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"While most of the research to date has concentrated on the effects of trauma exposure on those who watch humans suffer, we know that responding to trauma exposure is critical for those who witness tragedies afflicting other species as well.

Among those are:

- Veterinarians

- Animal rescue workers

- Biologists

- Ecologists"

Laura van Dernoot Lipsky
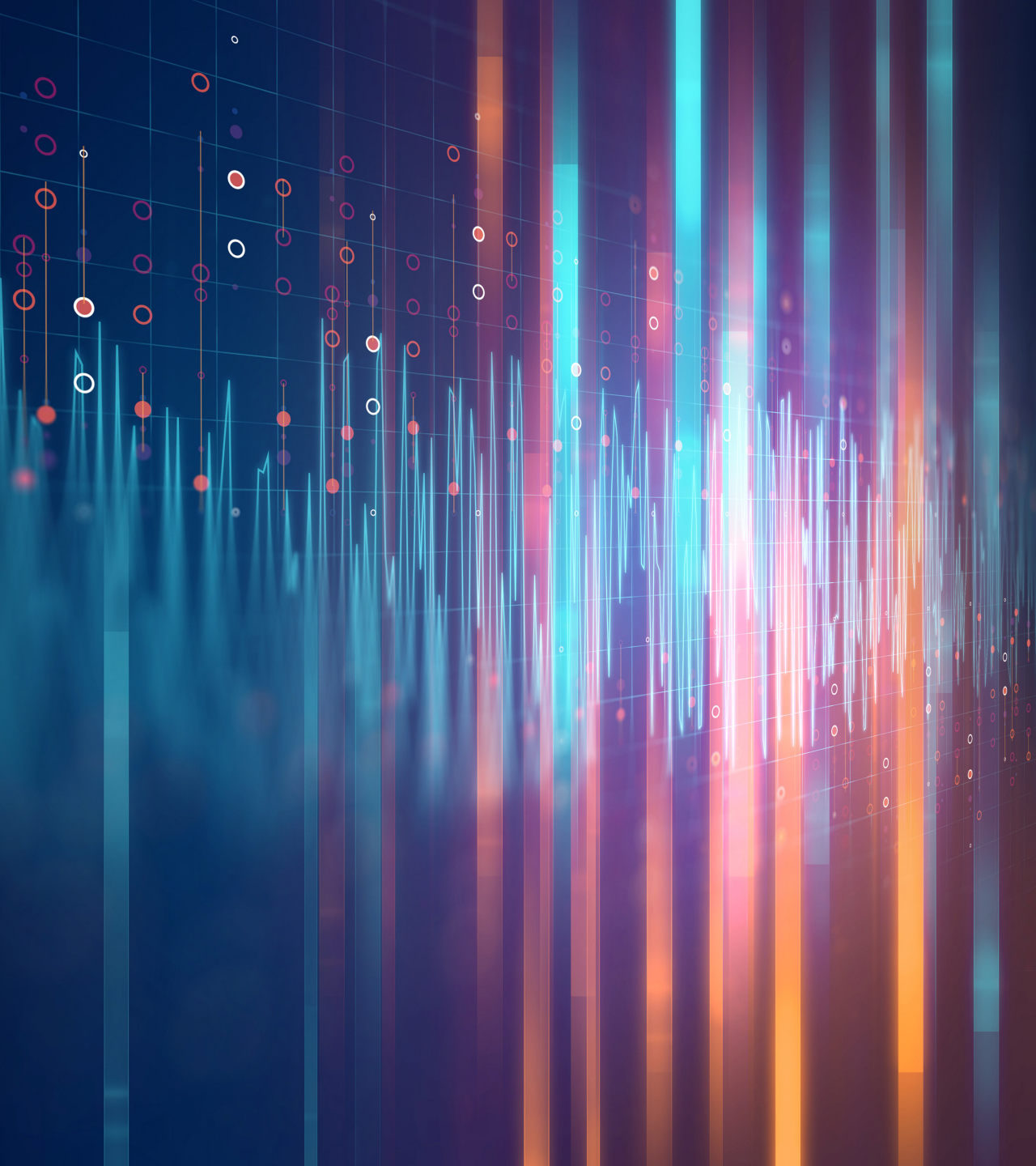
TRAUMA & STRESS EXPOSURE CAN BE CUMULATIVE OR ACUTE

OR BOTH....

When that exposure builds over time

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We may begin to exhibit specific signs

Signs of Trauma Exposure Response
Laura van Dernoot Lipsky

Anger & Cynicism,

A sense one can never do enough,

Dissociative Moments,

Hypervigilance & Fear,

Guilt,

Inability to Embrace Complexity

Grandiosity,

Chronic Exhaustion/Physical Ailments

Addictions & Numbing

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"It's not my clients,

it's my co-workers…"

The Social Work Context

Sitting with the suffering of our clients-

Severe and Persistent Resource shortage

Someone in the constellation of this case may think *you* made the wrong decision

Worker may be both the Object *and* Agent of Suffering

Our Own Personal & Social Identities

At times we experience direct, not indirect trauma

Intersectionality of Vicarious Trauma & Systemic Oppression

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"Although trauma workers can experience vicarious trauma regardless of their own histories of trauma, it can be especially heightened for those who do currently experience or have historically experienced personal trauma and/or abuse of power …

If you have felt the pain of trauma from systemic oppression and discrimination based on marginalized identities (racism, homophobia, transphobia, misogyny, xenophobia, ableism, etc) and the power of surviving it, it often overlaps with witnessing the same pain and power in your clients' lives."

- Dr. Shobana Powell

NASW Code of Ethics- updated 2021

•The first Section, **_"Preamble,"_** summarizes the social work profession's mission and core values.

•The second section, **_Purpose of the NASW Code of Ethics_**, provides an overview of the Code's main functions and a brief guide for dealing with ethical issues or dilemmas in social work practice.

•The third section, **_Ethical Principles_**, presents broad ethical principles, based on social work's core values, that inform social work practice.

•The final section, **_Ethical Standards_**, includes specific ethical standards to guide social workers' conduct and to provide a basis for adjudication.
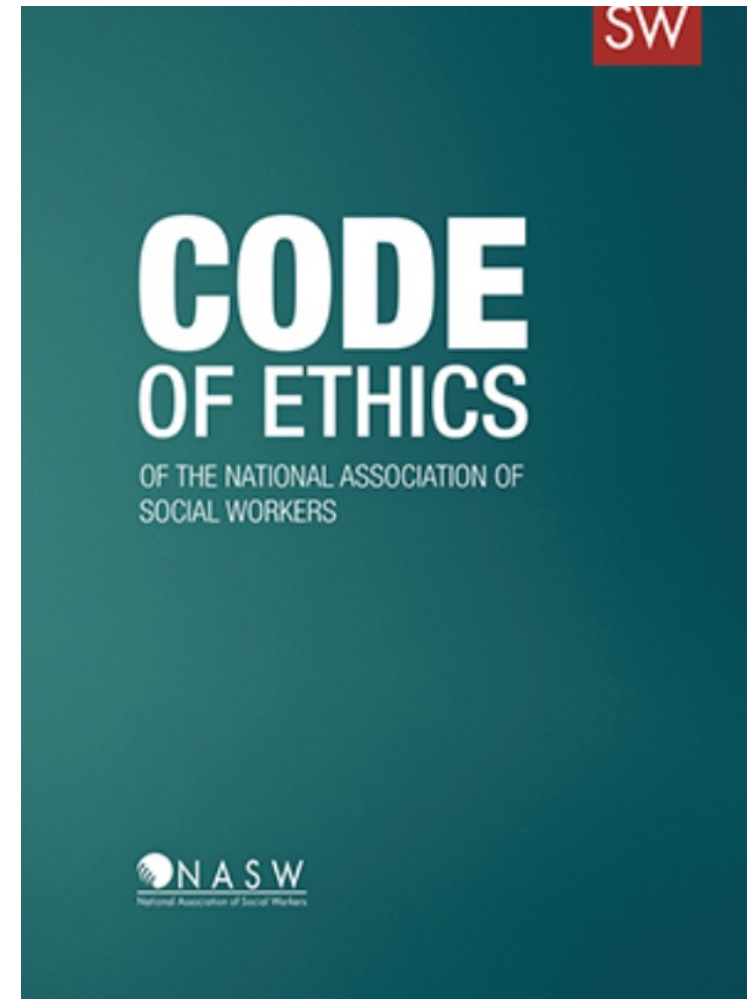
Professional self-care is paramount for competent and ethical social work practice. Professional demands, challenging workplace climates, and exposure to trauma warrant that social workers maintain personal and professional health, safety, and integrity. Social work organizations, agencies, and educational institutions are encouraged to promote organizational policies, practices, and materials to support social workers' self-care.

NASW Code of Ethics:
"Self-Care" added to purpose section in 2021

Value: Integrity

Ethical Principle: Social workers behave in a trustworthy manner.

Social workers are continually aware of the profession's mission, values, ethical principles, and ethical standards and practice in a manner consistent with them. Social workers should take measures to care for themselves professionally and personally. Social workers act honestly and responsibly and promote ethical practices on the part of the organizations with which they are affiliated.

NASW Code of Ethics

4.05 Impairment

(a) Social workers should not allow their own personal problems, psychosocial distress, legal problems, substance abuse, or mental health difficulties to interfere with their professional judgment and performance or to jeopardize the best interests of people for whom they have a professional responsibility.

(b) Social workers whose personal problems, psychosocial distress, legal problems, substance abuse, or mental health difficulties interfere with their professional judgment and performance should immediately seek consultation and take appropriate remedial action by seeking professional help, making adjustments in workload, terminating practice, or taking any other steps necessary to protect clients and others.

NASW Code of Ethics

WHAT STRATEGIES HAVE *YOU, OR YOUR WORKPLACE,* TRIED TO ADDRESS STRESS IN THE WORKPLACE?
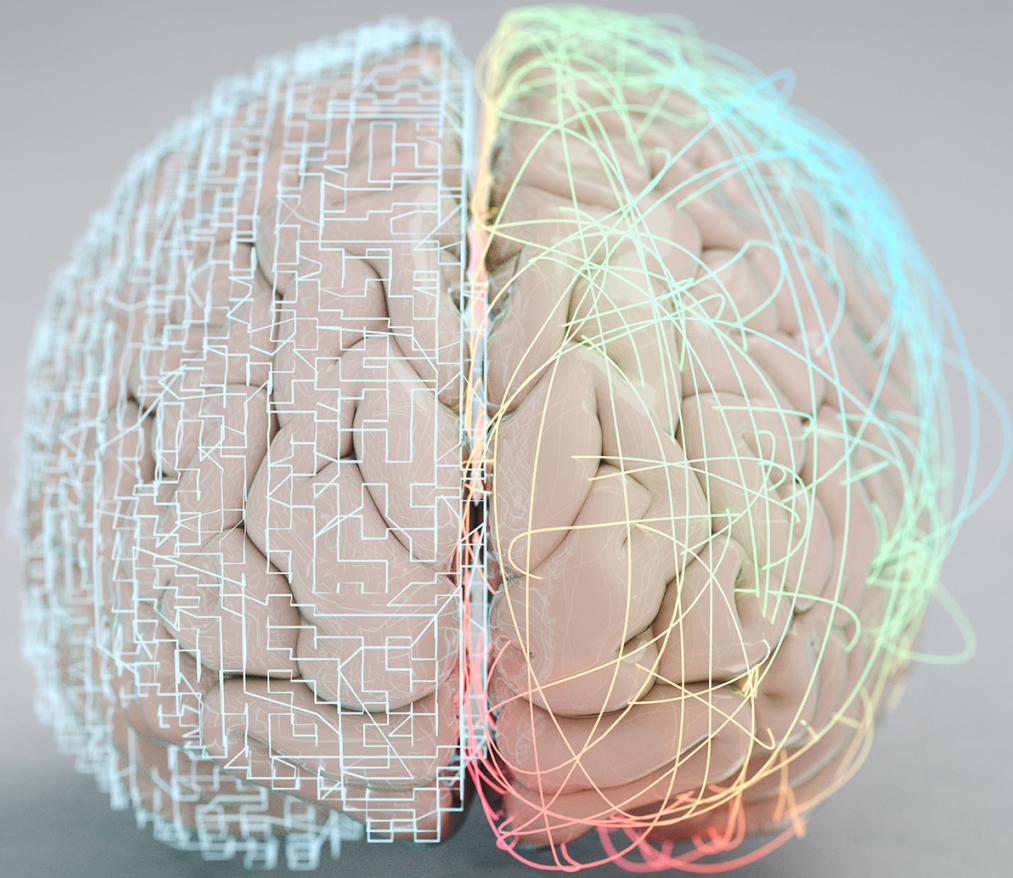
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Type it in the chat…

History of Intervention

❑ Focus on Individual Actions

❑ Focus on Interpersonal Supports

❑ Organizational Policies & Protocols

SO WHY ISN'T IT WORKING?

REASON # 1: IMPACT

⬦
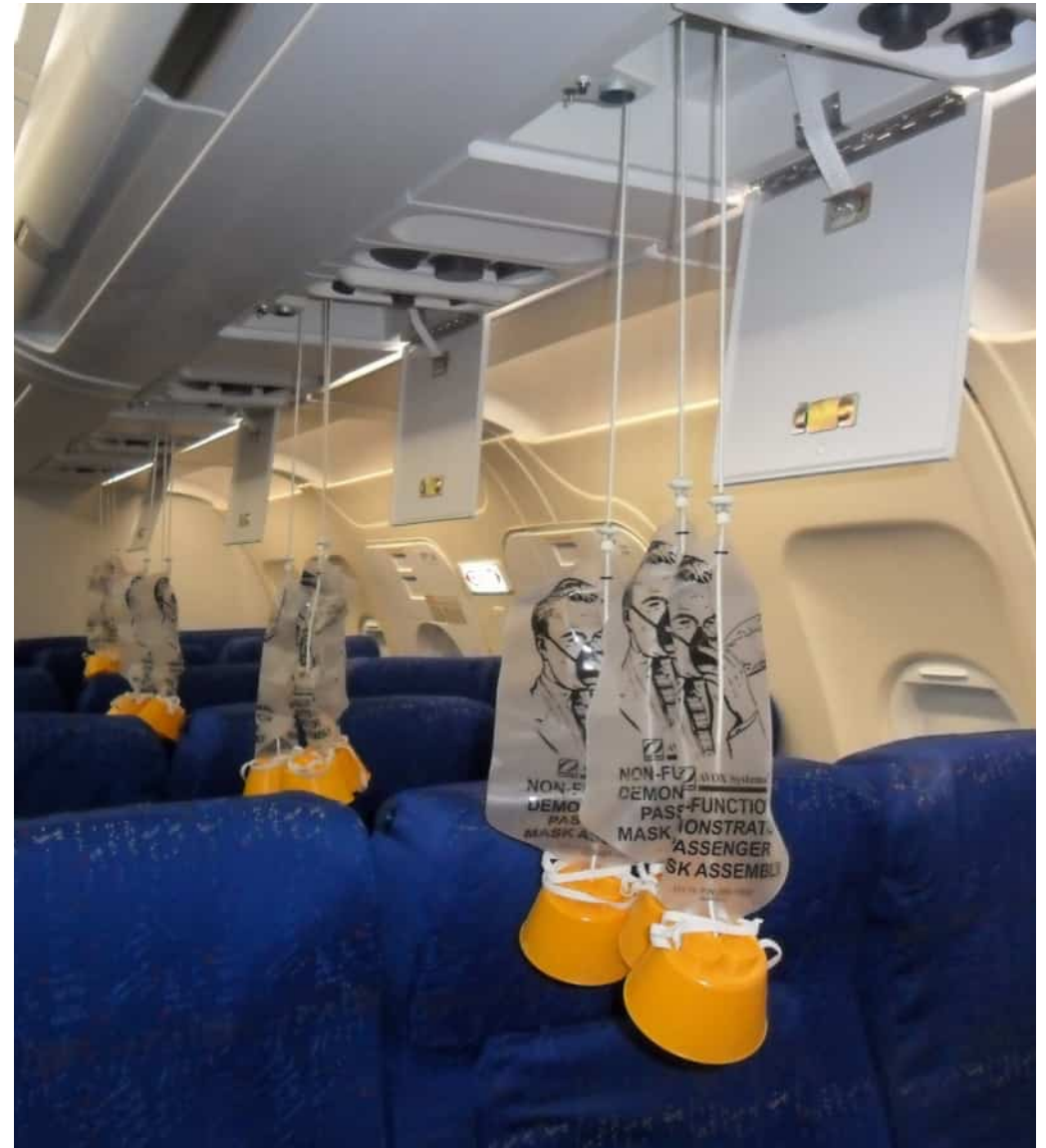
Our ability to self-scale and problem solve may be impacted

Dr. Michael Cull on Oxygen Masks

Oxygen Masks

$\diamond$

"We should be thinking about Resilience as a property of our system, not as a capacity we need to build into humans in our system" Dr. Michael Cull

Reason 2: Scope of Influence

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"When we are blaming the individual for something like burnout we are exonerating the broken social structures." - Pooja Lakshmin, MD

Bea Bischoff,
Immigration Attorney

—◇—

"All the self-care in the world won't change the fact that I work in a place and within a system in which asylum cases are granted only around 3 percent of the time. The odds are always against my clients, and that is the root of the problem. It is hard to experience the relaxation promised by a lavender pillow mist when your clients are trapped in detention centers without access to proper hygiene or food."

People talk about "Self-Care"

It is true… self-care is important!

However, you cannot self-care your way out of a structural problem.

SHOUTING 'SELF-CARE' AT
PEOPLE WHO ACTUALLY NEED
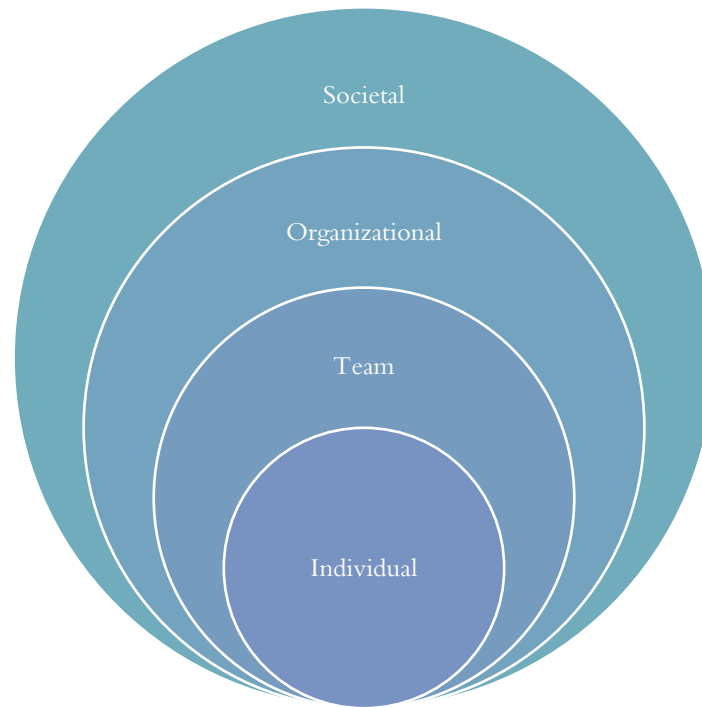'COMMUNITY CARE' IS HOW WE
FAIL PEOPLE."

—◇—

-Nakita Valerio, award-winning writer, researcher, and Muslim
community organizer based in Edmonton Canada. Owner,
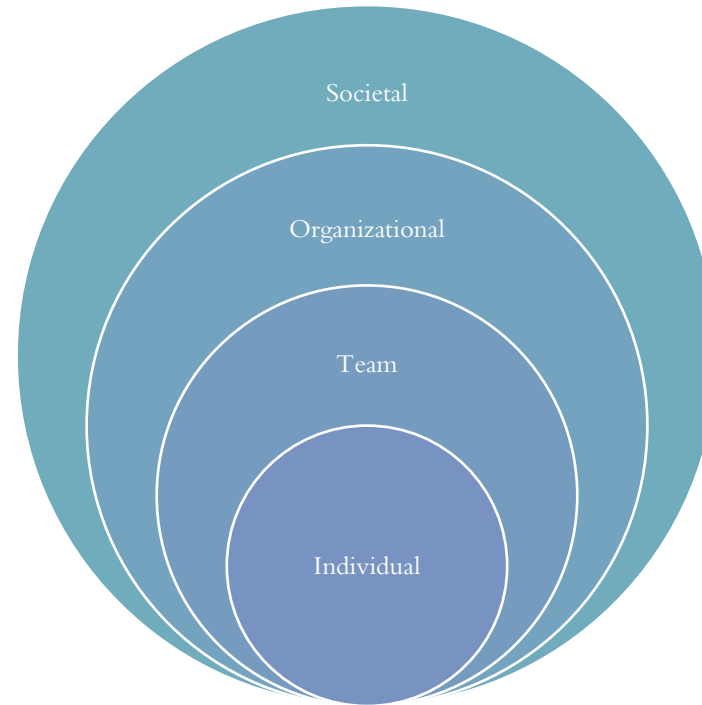Editor-in-Chief, Head Writer/Researcher of the Drawing Board

SO, WHAT
SHOULD WE
DO INSTEAD?

We are exposed to Trauma & Stress at Multiple levels

So intervention must happen at Multiple levels (and in relationship to your colleagues)

Trauma Stewardship
by Laura van Dernoot Lipsky

Trauma Stewardship:

"A daily practice through which *individuals, organizations and societies* tend to the hardship, pain, or trauma experienced by humans, other living beings or the planet itself."

Let's Build a Future That Includes:

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1. A 'healthy' workplace culture

2. Self-care strategies for home and work

3. Psychological safety for staff

4. Mindfully organized roles & teams

5. Organizational prioritizing & resourcing of these things
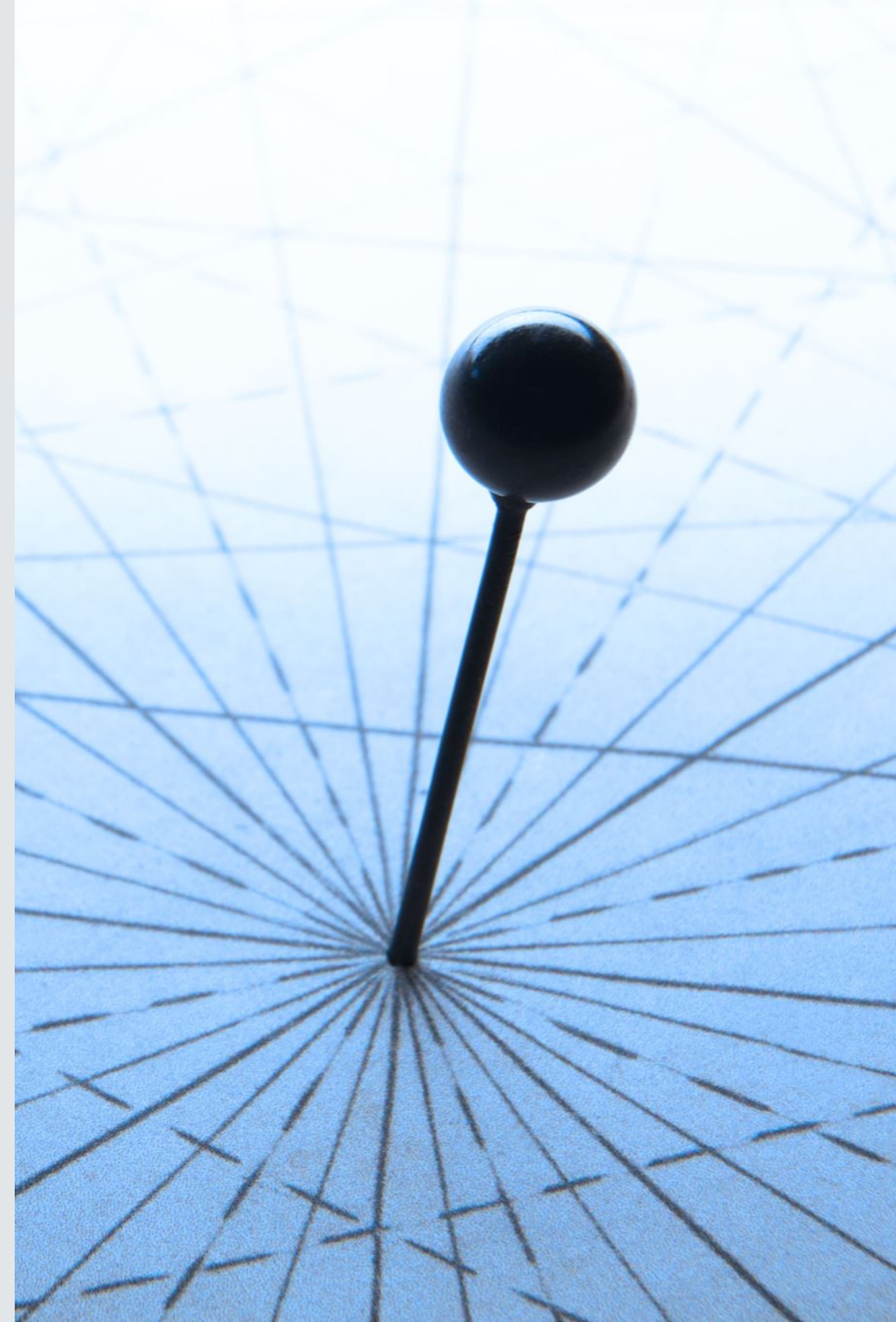
Solutions at all levels

Organization

Team

Individual

ORGANIZATIONAL CIRCLE: ORGANIZATIONAL SKILLS & PRACTICES

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Safety Culture

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"Safety culture is the extent to which an *organization* and its members' values, attitudes, and behaviors align to focus their attention and effort on safety and pursuing reliable, harm-free operations"

(Vogus, Sutcliffe, & Weick, 2010)

Note: Safety in this context does not mean *comfort*

IMPORTANT TO NOTE...

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This is in service to our clients

Safety Culture Looks Like…

- Physical & Psychological Safety for Staff
- Inclusivity & Belonging
- Worker Connectedness
- Stress Recognition
- Mindful Organizing Strategies

INDIVIDUAL CIRCLE:
SELF SKILLS

Individual Strategies

Individual Therapeutic Support

Time Off

Restorative Coping Strategies (Self-Skills)

Self-Scaling

Engaged vs Disengaged Coping Strategies

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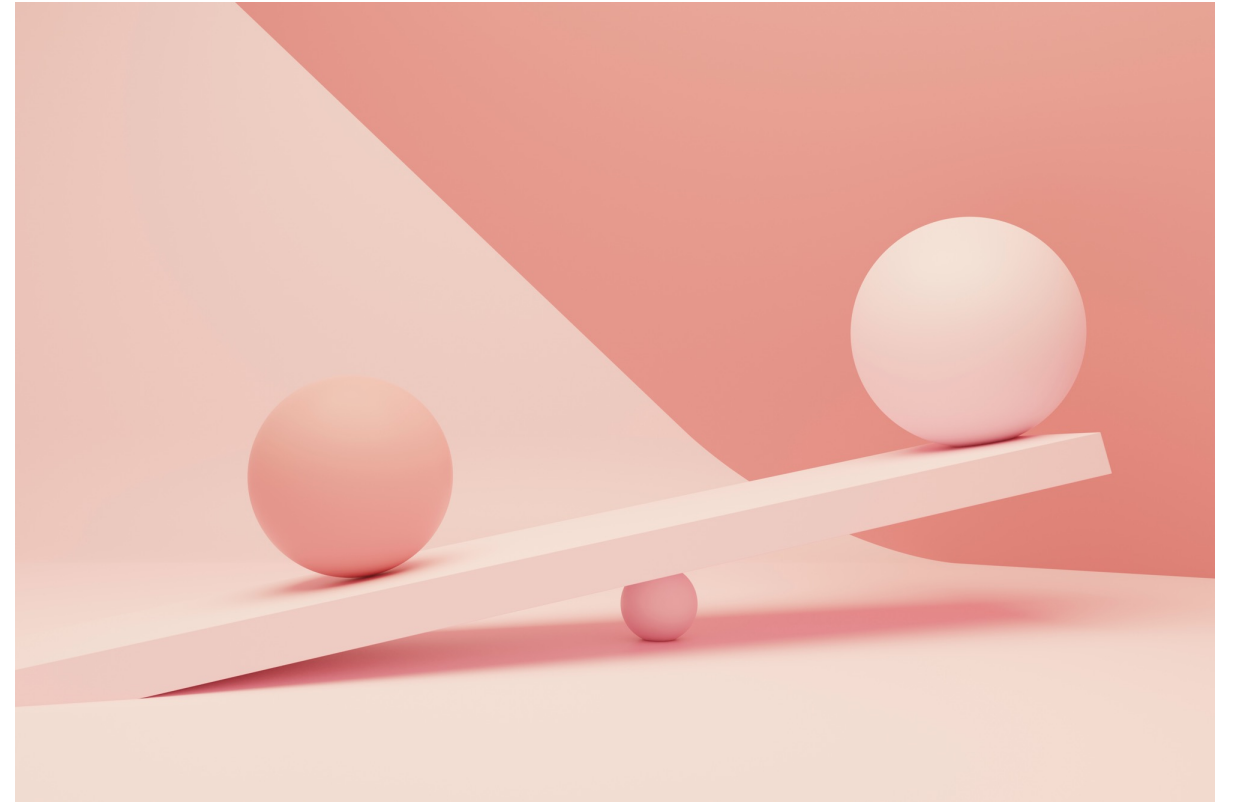The **"*disengagement*"** category of coping involves strategies that are aimed at diverting from the stressor and/or its related emotions.

- Avoiding the stressor

The **"*engaged*"** category of coping reflects coping strategies in which "a person takes charge in tone" by facing the stressor and/or its related emotions.

- Facing the stressor

Activity

—◇—

Take a moment and write down for yourself:

❑ What coping strategies do you typically use?

❑ Identify which ones are engaged? disengaged?

❑ How do you know when you need them?

SELF SCALING

RESPONDER STRESS CONTINUUM

READY	REACTING	INJURED	CRITICAL
	Sleep Loss	Sleep Issues	Insomnia
Sense Of Mission	Change In Attitude	Emotional Numbness	Hopelessness
Spiritually & Emotionally Healthy	Criticism	Burnout	Anxiety & Panic
Physically Healthy	Avoidance	Nightmares	Depression
Emotionally Available	Loss Of Interest	Disengaged	Intrusive Thoughts
Healthy Sleep	Distance From Others	Exhausted	Feeling Lost Or Out Of Control
Gratitude	Short Fuse	Physical Symptoms	Blame
Vitality	Cutting Corners	Feeling Trapped	Hiding Out
Room For Complexity	Loss Of Creativity	Relationships Suffering	Broken Relationships
	Lack Of Motivation	Isolation	Thoughts Of Suicide
	Fatigue		

ADAPTED FROM COMBAT AND OPERATIONAL STRESS FIRST AID BY LAURA MCGLADREY | RESPONDERALLIANCE.COM

Activity– Self Scaling

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❑ Take a look at the stress continuum–where would you put yourself right now?

❑ If you are in orange or red, does anyone know?

❑ Identify at least one activity that soothes you and helps get you back towards 'your green'

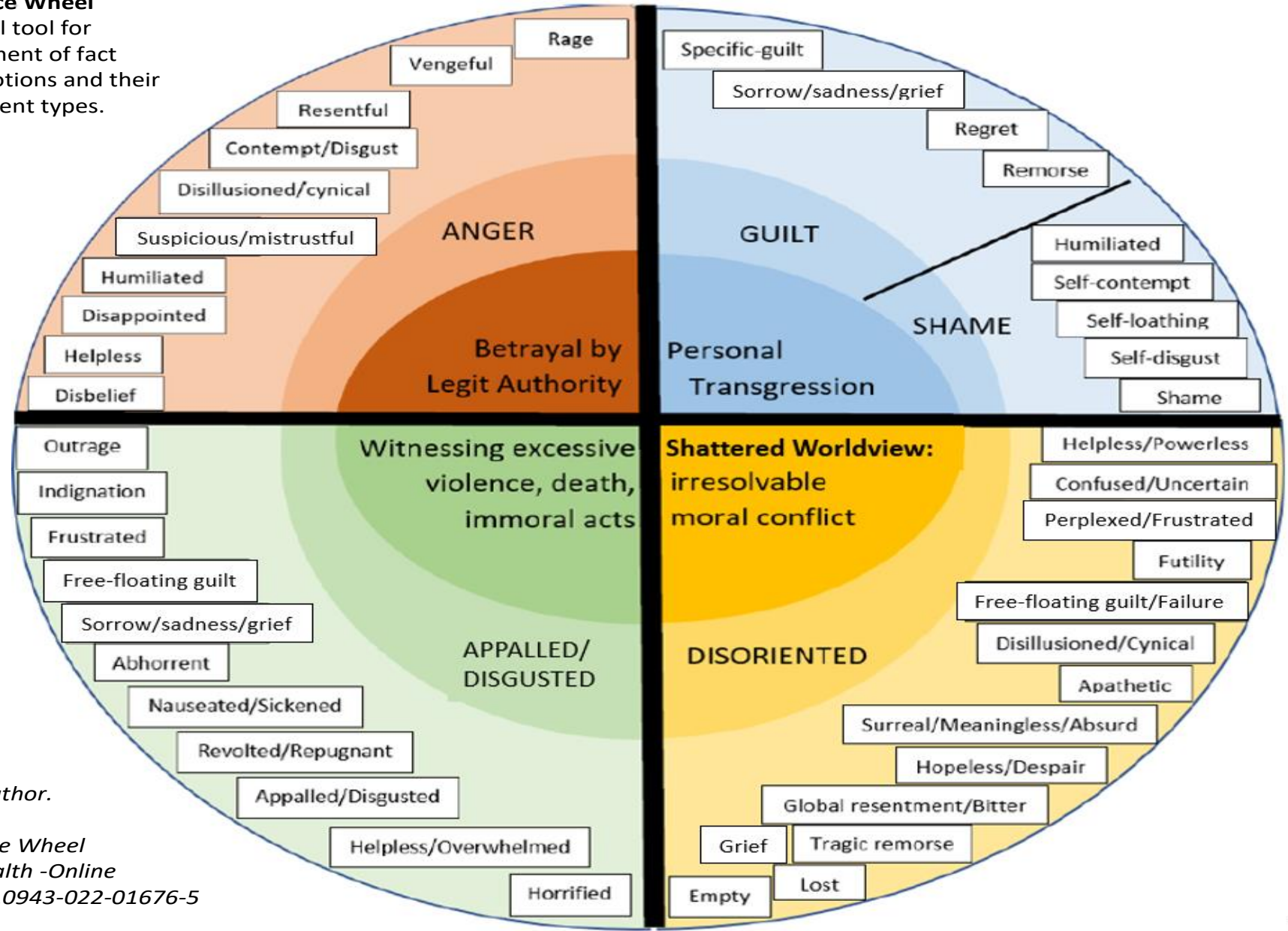## RESPONDER STRESS CONTINUUM

READY	REACTING	INJURED	CRITICAL
	Sleep Loss		
	Change In Attitude	Sleep Issues	Insomnia
Sense Of Mission	Criticism	Emotional Numbness	Hopelessness
Spiritually & Emotionally Healthy	Avoidance	Burnout	Anxiety & Panic
Physically Healthy	Loss Of Interest	Nightmares	Depression
Emotionally Available	Distance From Others	Disengaged	Intrusive Thoughts
Healthy Sleep	Short Fuse	Exhausted	Feeling Lost Or Out Of Control
Gratitude	Cutting Corners	Physical Symptoms	Blame
Vitality	Loss Of Creativity	Feeling Trapped	Hiding Out
Room For Complexity	Lack Of Motivation	Relationships Suffering	Broken Relationships
	Fatigue	Isolation	Thoughts Of Suicide

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The Moral Injury Experience Wheel
Note: Instrument is a useful tool for discussion and not a statement of fact about particular moral emotions and their association with specific event types.

Used with permission of author.
Fleming, W.H. (2023).
The Moral Injury Experience Wheel
Journal of Religion and Health -Online
*https://doi.org/10.1007/s10943-022-01676-5*

Activity

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Take a moment to explore the moral injury wheel

❑ Are you currently experiencing any moral injury?

❑ Which part of the wheel might it fall in?

The Moral Injury Experience Wheel
Note: Instrument is a useful tool for discussion and not a statement of fact about particular moral emotions and their association with specific event types.

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The Moral Injury Experience Wheel
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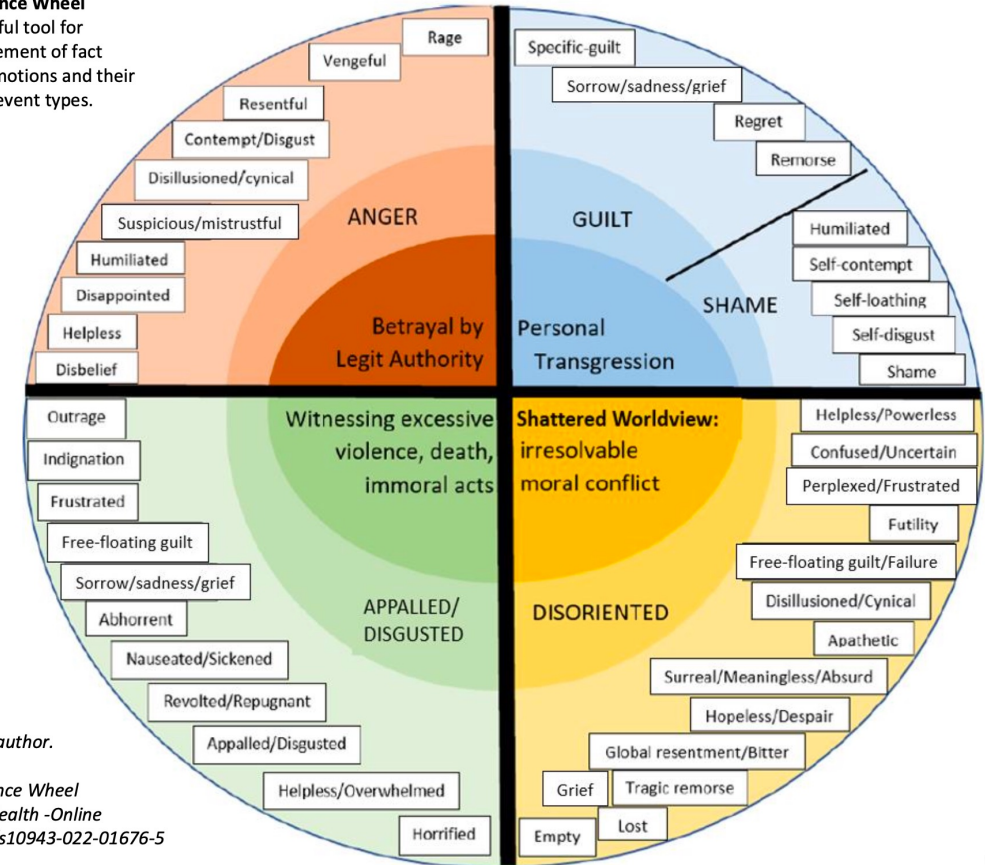
TEAM CIRCLE:
TEAM SKILLS & PRACTICES

Team Based Strategies

Team Scaling

Mindful Organizing

Team as a Secure Base Model

Attention to Psychological Safety

Mindful Organizing

❖

Use of habits and opportunities to *plan ahead* and *reflect back*, which may include:

- discussing potential sources of system failure,

- questioning assumptions and perceived wisdom about the work,

- discussing ways to learn from errors and near misses, and

- drawing on and deferring to each other's expertise when needed.
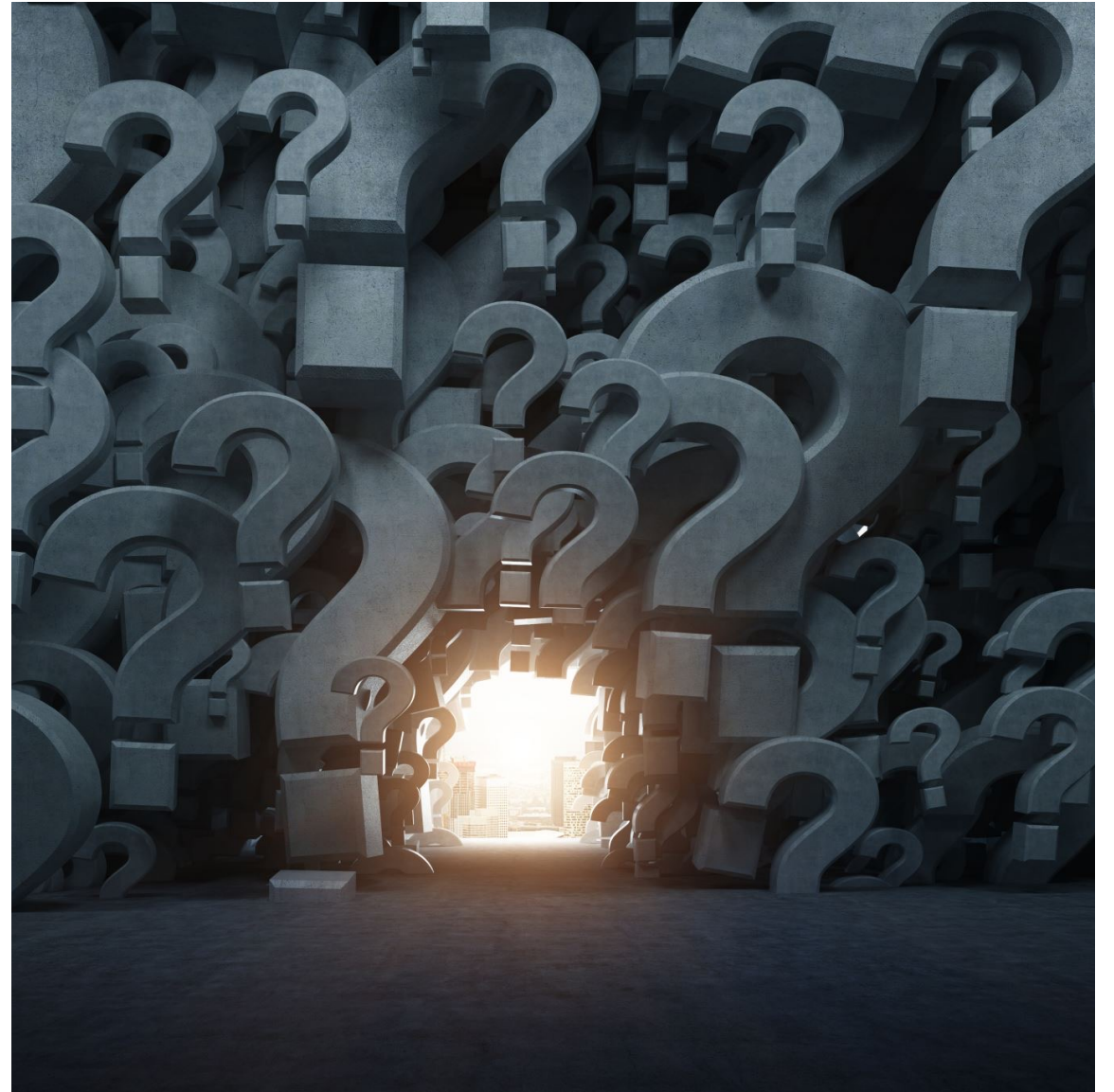
– Casey Family Programs

Psychological Safety

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Psychological Safety In The Workplace

"The belief that one will not be punished or humiliated for speaking up with ideas, questions, concerns, or mistakes, and that the team is safe for interpersonal risk taking"

Amy Edmondson, 1999
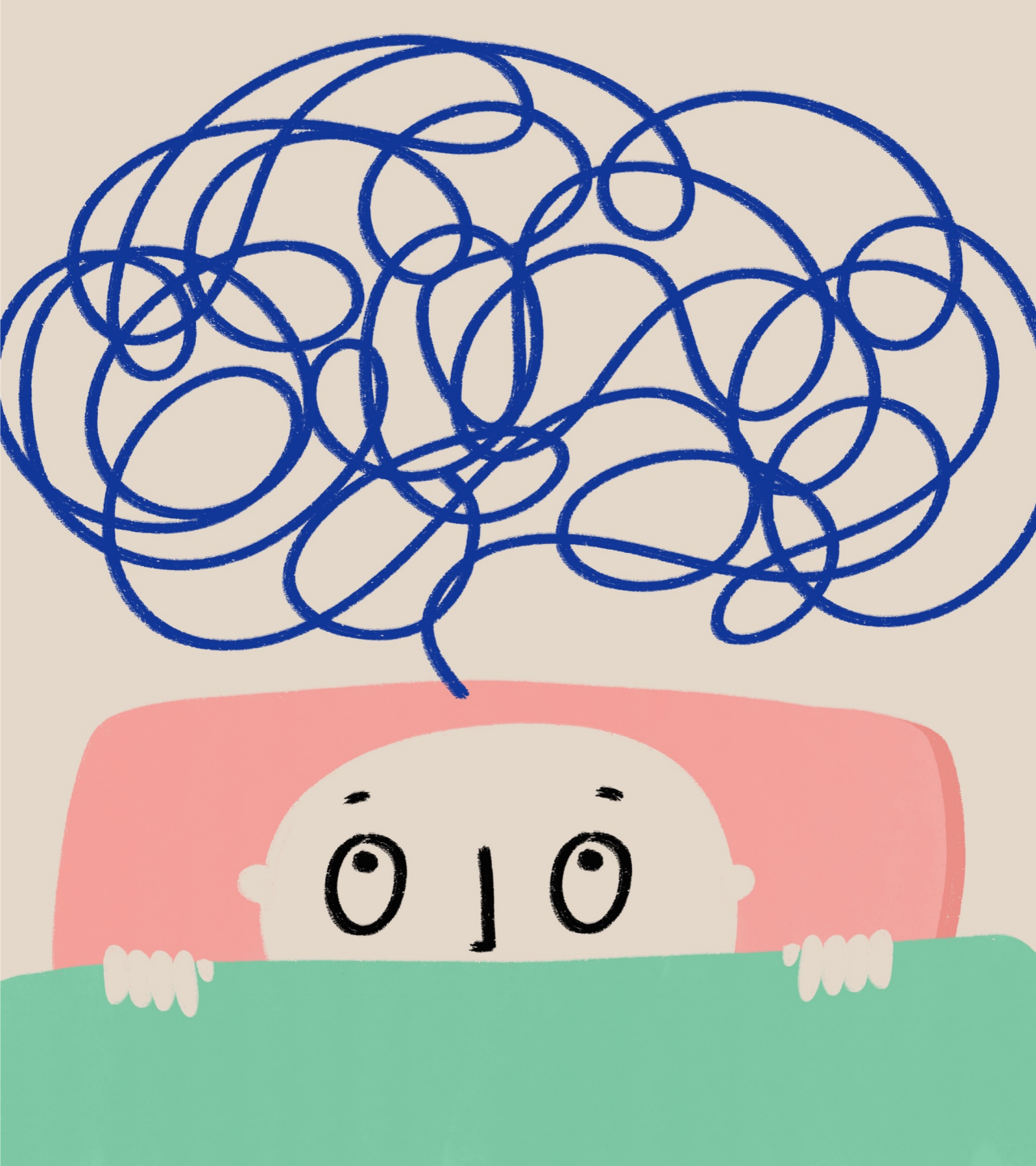
Let's Talk about 'Mistakes'

- ❑ What are your thoughts about mistakes in general?
- ❑ How do *you* feel when *you* make a mistake?
- ❑ How do you feel when *someone else* does?
- ❑ Is it different? If so, why?

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RESPONDER STRESS CONTINUUM

READY	REACTING	INJURED	CRITICAL
Sense Of Mission	Sleep Loss	Sleep Issues	Insomnia
Spiritually & Emotionally Healthy	Change In Attitude	Emotional Numbness	Hopelessness
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	Fatigue		

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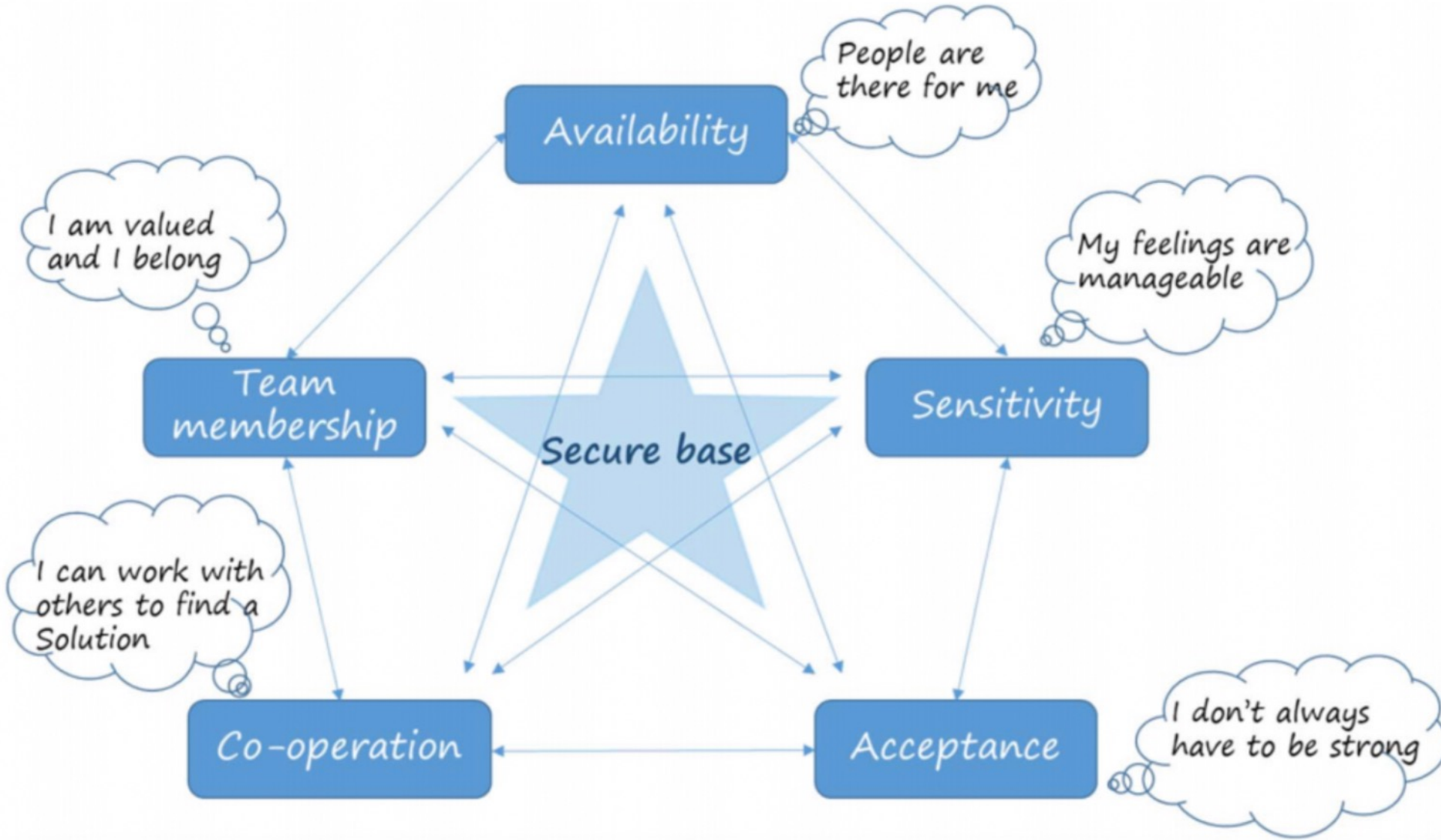# SUPERVISION & SELF SCALING (AS A TEAM)

Activity – Self-Reflection

❑ Do you have a standing 'check in' on your team?

❑ How does it work?

❑ What would it take to go deeper?

❑ What worries, if any, does that bring up for you?

The Team as Secure Base

Availability — People are there for me

Team membership — I am valued and I belong

Sensitivity — My feelings are manageable

Secure base

Co-operation — I can work with others to find a Solution

Acceptance — I don't always have to be strong

With permission: Biggart, L., Ward, E., Cook, L., & Schofield, G. (2017).
The team as a secure base: Promoting resilience and competence in child and family social work. Children and Youth Services Review, 83, 119-130.

Team Scaling

STRESS CONTINUUM FOR THE TEAM

READY	REACTING	INJURED	CRITICAL
Transparency	Normalizing Depletion	Resources Scarce	Cliques And Hierarchy
Sense Of Mission	Staff Dreading Work	Rigid Perspectives	Lack Of Trust
Requests For Help Met With Support	Mistakes Are Personal	Members Undervalued	Gaslighting
Connection	Transactional Communication	Communication Silos	Culture Of Blame
Team Approach To Overwhelm	Requests For Help Are Criticized	Suffering In Silence	Vulnerability Punished
Curiosity Culture		Helplessness	Fear At Work
			Hopelessness
Mission Satisfaction	**Mission Drift**	**Mission Fatigue**	**Moral Injuries**

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Activity – One Last Reflection

Do you have a discrete Team?

How would you rate the functioning of that team in terms of:

❑ Psychological Safety?
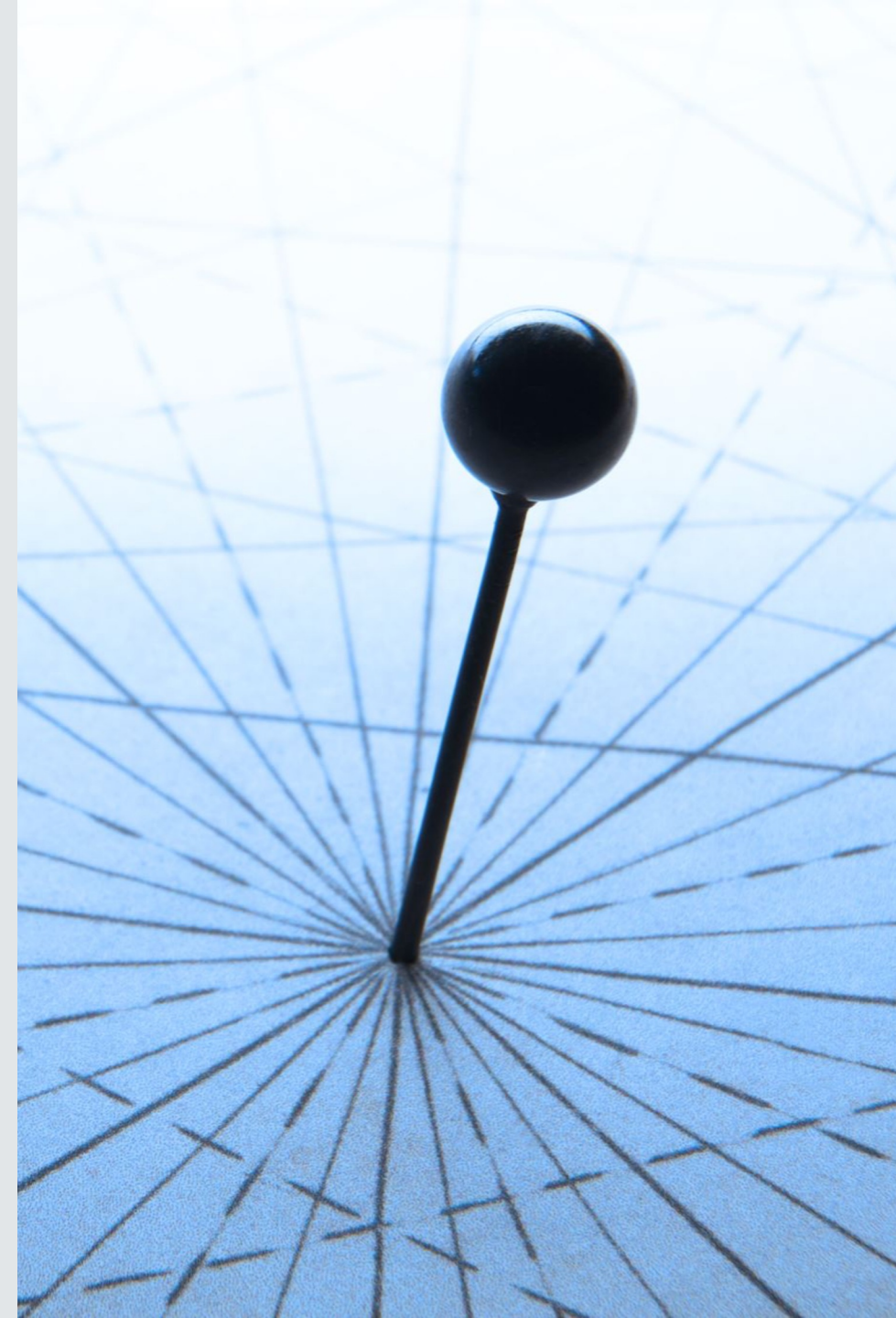
❑ Team as a Secure Base?

❑ Stress Continuum?

What is one thing you want to bring back to discuss with your team after this workshop?

Let's Build a Future That Includes:

—◇—

1. A 'healthy' workplace culture

2. Self-care strategies for home and work

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4. Mindfully organized roles & teams

5. Organizational prioritizing & resourcing of these things

TAKE AWAYS

What will you bring back with you after today?

Resources

- STS consortium

- Trauma Stewardship Institute

- Center for Innovation & Population Health (Safety Culture)

- Team as a Secure Base

- Responder Alliance

- The Social Work Lens Podcast

  Trauma Stewardship

  Safety Culture

  Workplace Connectedness

  Team as a Secure Base

Weblinks

STS consortium

https://www.stsconsortium.com/

Trauma Stewardship Institute

https://traumastewardship.com/

Safety Culture

http://leadteamfirst.org/

Team as a Secure Base

https://www.uea.ac.uk/groups-and-centres/centre-for-research-on-children-and-families/secure-base-model/secure-base-in-teams

Responder Alliance

https://www.responderalliance.com/

QUESTIONS?

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Biggart, L., Ward, E., Cook, L., Schofield, G. (2017), The team as a secure base: Promoting resilience and competence in child and family social work. *Children and Youth Services Review, 83 (Supplement C),*119-130. doi.org/10.1016/j.childyouth.2017.10.031

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Sull, Charles, Sull, Donald, Cipolloi, W, Brighenti, C. (2022). Why Every Leader Needs to Worry About Toxic Culture. *MIT Sloan Management Review*, March, 16. https://sloanreview.mit.edu/article/why-every-leader-needs-to-worry-about-toxic-culture/

Vogus, T. J., Sutcliffe, K. M., & Weick, K. E. (2010). Doing no harm: Enabling, enacting, and elaborating a culture of safety in health care. *Academy of Management Perspectives,* 24(4), 60–77