THE PTSD OF COVID
THE HEART OF THE MATTER
The speaker has no relevant financial relationship(s) to report.
WEBINAR OBJECTIVES

To identify areas of risk that are hindering Compassion Satisfaction in the workplace and establish common language to normalize these struggles in the workplace.

To identify Parts of the Self that can be better attended to in promotion of provider self-compassion.
WHAT I WON'T BE SAYING…

Take a bubble bath.
Get your nails done.
Go on a vacation.
Eat better, exercise more, and get more sleep.
Breathe.
Meditate.
Get more “me time.”
Perhaps this is you.
When I'm feeling overwhelmed by all the things I have to do, I close my eyes, take a deep breath, and do none of those things; then I freak out later when I have to do all of them at once.
Every night before work:

“I’m gonna wake up early and get cute.”

And then, there’s me every morning when I get to work.
every time i say "i don't know" and my therapist says "i think you do know"

THIS IS ME...
I AM NOT OK.
And that is ok.
The Great Resignation

• "Most people are less than thrilled to work from the office."
• "1 in 3 workers are considering leaving their jobs."
• "It's a good time to look for a new job or even change careers because there are lots of job openings."
Prior to COVID, Health & Human Services at large was struggling with an Epidemic of Professional Burnout!

- Nationally, physicians experience higher rates of professional burnout than the general population. (Shanafelt, Boone, & Tan, 2012)
- Professionals with an MD or DO degree are at a greater risk of burnout than those with a bachelor’s or master’s degree. (Shanafelt, Boone, & Tan, 2012)
- Suicide rates may be 2–3x higher in healthcare providers. (National Post, https://nationalpost.com/features/wounded-healers)
- For nurses, significant attrition occurs during the first 5 years of entering the profession. (Kovner, Brewer, Fatehi, & Jun, 2014)
- Younger caregivers are at a higher risk of burnout, as they report and demonstrate more stress with fewer coping strategies, unlike caregivers with more years of experience. (Kearney et al. 2009)
- The millennial generation has become the most difficult population to retain for companies, often leaving employment positions in fewer than 3 years. (Sears, 2017)
AN EPIDEMIC IN HEALTHCARE SERVICES: EMPLOYEE ATTRITION

What’s causing this?

- Inadequate education for job duties
- Perception of work supports (lack of consistent supervision, inadequate resourcing for unwell employees)
- Organizational climate (workplace toxicity, poor leadership style)
- Personal values (loss of commitment to the mission of practice)
- Competitive job market with better pay or benefits
- Demands of the work (traumatic exposure, emphasis on productivity, overloaded caseloads)
- Millennials...
And then we add the pandemic of COVID
COVID PTSD

SAFETY (vulnerability): I can't trust anyone... I am not safe... I am in danger... I am going to die... It's not ok to feel or show my emotions... I can't protect myself...

POWER (control): I am powerless/helpless... I cannot get what I want... I cannot let it out... I will fail... I can't handle it... I can't be trusted...

RESPONSIBILITY (defectiveness and action): I did something wrong... I am incompetent... I am weak... I should have known better... I'm not good enough...
Defining Provider Sustainability

Maintaining your pace in which personal values are congruent with practice and communication so that you uphold the boundaries that are necessary to stay healthy, engage others wholly, and succeed in your profession.

"I should be here."
"The rewards of my job far outweigh the challenges."
"I show up on my own behalf."
"I can give to myself so I can continue to give to the world."
"My values are showing up in my life."
"I am the most important resident on my caseload."
PSP Continuum Model of Compassion Satisfaction

- Basic Self-care
- Safety
- The Business Model
- Your Tribe
- Season

Compassion Distress

- Moral Distress
- Secondary Traumatic Stress
- BURNOUT
- Vicarious Traumatization
- Compassion Fatigue

Compassion Satisfaction

- Work Culture
- Systemic Constraints
- Spirituality
- Systemic Racism & Oppression
- Time Management
MORAL DISTRESS & MORAL INJURY

Perpetrating, failing to prevent, bearing witness to, or learning about acts that transgress one’s deeply held moral beliefs, values, and expectations.

Examples:
- Maintaining silence due to power differential
- Being forced to act outside of competency
- Using finite resources that don’t meet the needs
<table>
<thead>
<tr>
<th>Cognitive</th>
<th>Emotional</th>
<th>Behavioral</th>
<th>Physical</th>
<th>Interpersonal</th>
<th>Spiritual</th>
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<tbody>
<tr>
<td>Diminished concentration</td>
<td>Powerlessness</td>
<td>Impatient</td>
<td>Exhaustion</td>
<td>Withdrawn</td>
<td>Questioning the meaning of life</td>
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<td>Confusion</td>
<td>Anxiousness/Worry</td>
<td>Irritable</td>
<td>Lethargy</td>
<td>Isolation from friends</td>
<td>Loss of purpose</td>
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<td>Loss of meaning</td>
<td>Exhaustion</td>
<td>Hypervigilant</td>
<td>Headaches or other pain</td>
<td>Decreased interest in sex</td>
<td>Loss of hope</td>
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<td>Perfectionism</td>
<td>Guilt or Survivor Guilt</td>
<td>Increased use of alcohol/drugs</td>
<td>Insomnia or Hypersomnia</td>
<td>Mistrust</td>
<td>Lack of self-satisfaction</td>
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<tr>
<td>Preoccupation with trauma</td>
<td>Anger/Rage</td>
<td>Other addictions</td>
<td>Anxiety</td>
<td>Impact on parenting</td>
<td>Anger at God</td>
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<td>Trauma images</td>
<td>Hypersensitivity</td>
<td>Appetite changes</td>
<td>GI distress</td>
<td>Projection of anger or blame</td>
<td>Questioning prior faith-based beliefs</td>
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<tr>
<td>Apathy</td>
<td>Numbness</td>
<td>Nightmares</td>
<td>Autoimmune flare ups</td>
<td>Intolerance</td>
<td>Loneliness</td>
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<td>Minimization</td>
<td>Fear</td>
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<td>Weight gain or weight loss</td>
<td>Loneliness</td>
<td>Hypersensitivity</td>
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<td>Racing thoughts</td>
<td>Helplessness</td>
<td>Absenteeism</td>
<td>Somatization/ hypochondria</td>
<td>Hypersensitivity</td>
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<tr>
<td>Cynicism</td>
<td>Sadness</td>
<td>Impaired decision–making</td>
<td>Increased illness</td>
<td>Resentment</td>
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<td>Diminished enjoyment of career</td>
<td>Hopelessness</td>
<td>Hyper sense of responsibility</td>
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<td>Reduced ability to feel sympathy or empathy</td>
<td>Avoidance of clients</td>
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YOU ARE NOT REQUIRED TO SET YOURSELF ON FIRE TO KEEP OTHER PEOPLE WARM.

UNKNOWN
PROVIDER SELF-CARE IS NOT THE SOLE SOLUTION

• Bober and Regehr (2006) found that when therapists did take better care of themselves, symptoms of STS did not improve. The most effective solutions to reduce STS symptoms are correlated with workload, reduced exposure to trauma, social support, staff competency, and service delivery.

• The economic system directly impacts provider services: availability of resources and the needs of consumers.

• Barkin (2011) suggests that agencies hold high responsibility in provider VT/CF due to focusing on the business of the organization rather than quality of care (productivity, service reimbursement, documentation). She also maintains that the lack of peer supervision and lack of emphasis on safety (for staff and consumers) directly impacts VT/CF.

• Killian (2008) confirmed that social support is vital to a healthy workplace and that this leads to greater compassion satisfaction.
The biology of safety and danger is rooted in the interplay between the visceral reactions of our own body and the voices and faces of people around us. Our vagus nerve stems from our brain to our colon, directly influencing the somatic experiences we have from our head to our gut, and this nerve system directly responds to perceived threat and perceived social support in a top-down process. This theory explains why a kind face or soothing tone can dramatically alter how we feel, and why feeling heard and understood by important people in our lives can make us feel calm, and why being ignored or dismissed can trigger feelings of rage or withdrawal. Our mammalian brains are designed to help us function as members of a tribe, as most of our energy is devoted to connecting with others.
"Being able to feel safe with other people is probably the single most important aspect of mental health. Numerous studies of disaster response around the world show that social support is the most powerful protection against becoming overwhelmed by stress/trauma. The critical issue is *reciprocity*: the experience of being truly heard and seen by the people around us, feeling that we are held in someone else’s mind and heart."
SHIFT THE LANGUAGE OF BLAME

- Normalize language that promotes employees feeling heard, valued, and safe.
- Protect employees from workplace hazards.
- Facilitate regular supervision or team meetings.
- Remind employees of their values and the evidences of their successes.
- Encourage mental health support.
VALUES

What brought you to this profession?

Why have you chosen to stay, even now?

As you do this work, what do you want to see the most in your actions?

As confused or hurt or angry as you may feel, why do you continue to fight to save lives and care for your residents?

What can you do to lean into that value even further?
avoid Sliming: improper case debriefing by disclosing unnecessary and graphic details of a case to a recipient who has not consented to receive this information.

avoid Common Enemy Intimacy: a counterfeit connection with others rooted in dislike for the same people or having contempt for the same ideas, “You’re either with us or against us.”

practice Low Impact Debriefing:
(F. Mathieu’s Compassion Fatigue Workbook)
1. Self-awareness of the story
2. Desired outcome of the debrief
3. Fair warning, including spoken desired outcome
4. Consent by recipient
5. Limited disclosure

practice Temperature Readings:
(V. Satir)
1. Express appreciations and excitements
2. Complaints with recommendations
3. Puzzles, gossip, and rumors
4. New information
5. Hopes and wishes
BECOMING KNOWN

The Part of me that feels Powerless.
THE PART OF ME THAT FEELS
THE FLOATBACK METHOD
Francine Shapiro

As you connect with this Part of you, notice how you feel emotionally and how you feel in your body. Allow yourself to float back in time as far as you can go and reflect on other experiences in which you felt similarly.

**Ask Yourself**
What do I truly need in this moment? And, what am I willing to do about it?
BUTTERFLY HUG RESOURCE
THANK YOU!
REFERENCES


• Burchard, B. High performance habits (2017).

• Burton, J. The truth about self-care (2016).


• Mathieu, F. (2015). Beyond kale and pedicures: Can we beat burnout and compassion fatigue?


• Niequst, S. Present over perfect (2016).


• Rothschild, B. Help for the helper (2006).


REFERENCES


• Stamm, B. Professional Quality of Life. www.ProQOL.org.


