



IHR

INSTITUTE FOR
HEALTH & RECOVERY

Working with Individuals with Mental Health Issues

HPOG Grantee Meeting

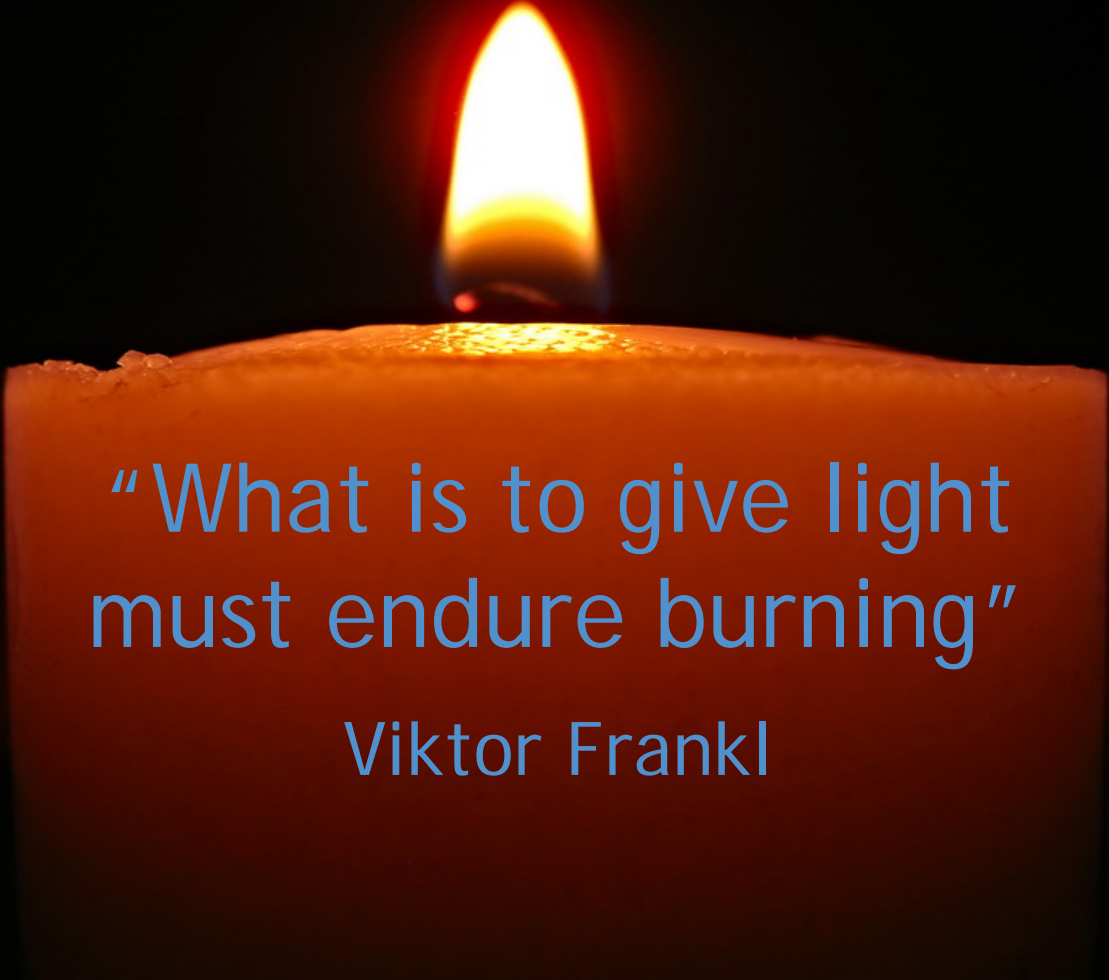
Washington D.C.

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Institute for Health and Recovery

www.healthrecovery.org



“What is to give light
must endure burning”

Viktor Frankl

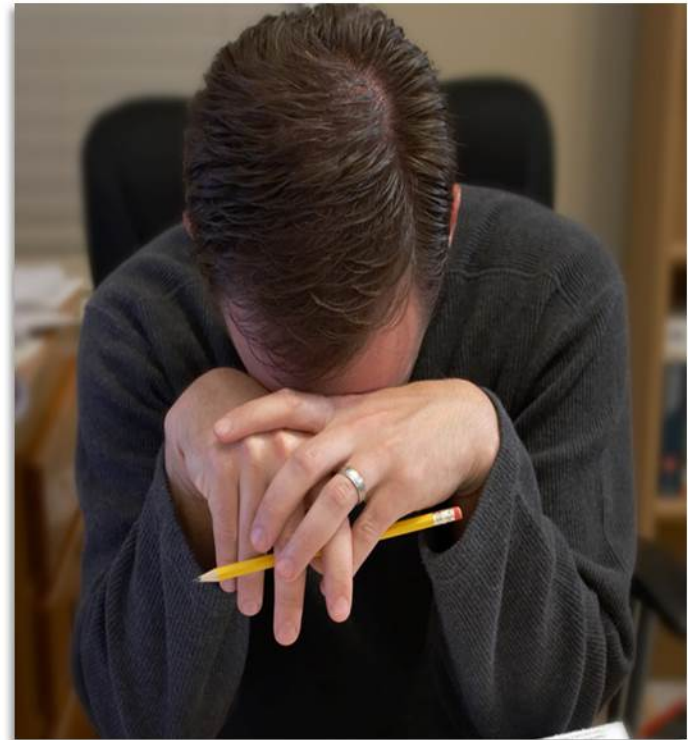
Please Keep in Mind...

- To provide quality care, one must bear witness
- It is *Normal* to be effected by what you witness
- Profound sadness, grief and anger are normal reactions
- Acknowledging one's own feelings gives perspective and lessens the burden
- No sector of our society is untouched by abuse

What We Do Impacts Us

Burnout

Exhaustion of physical or emotional strength usually as a result of prolonged stress or frustration





Compassion Fatigue

Changes in the inner experience of service providers that come about as a result of empathic engagement with the participant's experience of trauma.



Impact of Compassion Fatigue

- We may take things out on ourselves
- We may take things out on other staff
- We may take things out on clients

“It’s the kind of TIRED that sleep can’t fix.”

Anonymous

Resiliency Factors

Awareness

- Of all aspects of one's experience
- Needs, limits, emotions, resources

Balance

- Time for reflection

Connection

- Social support



What You Can Do

Address the stress

- Self-care
 - Balance, limits, healthy habits, connection with others
- Nurturing activities
 - Gentleness, pleasure, comfort, relaxation play
- Escape
 - Activities that allow one to forget about work



What You Can Do

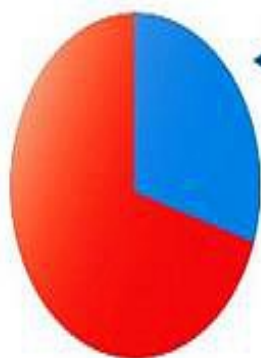
Utilize Available Support

- Let your supervisor know when you are overwhelmed
- Seek peer support
- Social activities with colleagues to build connection
- NOTE: The more we talk about concerns the less likely we are to act out

Self-Care Checklist

Staff Self-Care Plan

PTSD Rates in the United States



70% of adults in the U.S. have experienced some type of traumatic event at least once in their lives. This equates to approximately 223.4 million people



Up to 20% of these people go on to develop PTSD. As of today, that equates to approximately 44.7 million people who were or are struggling with PTSD.



An estimated 8% of Americans – 24.4 million people – have PTSD at any given time. That is equal to the total population of Texas.



An estimated one out of every nine women develops PTSD, making them about twice as likely as men.

Trauma and Mental Health (MH) Disorders

- Trauma increases the risk of developing a mental health disorder (Kessler, et al, 2005)
- Trauma also increases the severity of other MH disorders (Spitzer et al, 2007)



PTSD and other MH Disorders

88% of men and 79% women have at least one other diagnosis


Significantly higher rates of:

- Mood Disorders
- Other Anxiety Disorders
- Impulse Control Disorders

(Kessler et al, 2005)



Trauma and Substance Use Disorders (SUD)

- Trauma exposure increases the risk of developing an SUD (Farley et al, 2004)
 - The use of drugs and alcohol increases the risk of trauma exposure (Farley et al, 2004)
 - A diagnosis of PTSD increases the likelihood of a later diagnosis of an SUD by 2-4X (Kessler et al, 1995)
 - Using substances increases severity of PTSD (McCarthy and Petrakis, 2010)
- 

Trauma and Smoking



Both trauma exposure and PTSD related to smoking

- More than 45% of people with PTSD smoke, which is twice the rate of those without PTSD (Feldner et al, 2007)
- Trauma is associated with smoking even without PTSD, esp. high for sexual trauma and women who have been physically assaulted (Fetzner, et al, 2011)

Integrated Service Delivery

- *Engage* the survivor by highlighting the determination, creativity and courage of the survivor spirit
- *Build trust* through consistency and follow-through
- *Listen* for what is not being said and consistently point out strengths
- *Have conversations* focusing on the element of choice and strategize alternative options that encourage different, safer outcomes
- *Remember*, we cannot undo the horror of the past but we can facilitate changes in the present that result in safer outcomes in the future

Core Competencies

- Use an empowerment approach
- Build safe relationships
- Understanding/Explaining Behavior

Clients with Mental Health Issues Need...

- To Learn and Practice Safer Coping Skills
 - Education about the link between past trauma, substance use and other life problems
 - Emotional Self-awareness
 - *What are you feeling? How strong on a scale of 1-10*
 - Emotional Regulation/Grounding
 - *What helps you calm down when you upset?*
 - *Elicit self-soothing strategies*
 - Making Safer Choices
 - *Will this choice result in a safe or unsafe outcome?*

- Rely on the person's knowledge of her/ himself
- When do you think your life was going well?
 - What was going on?
 - What were you doing? What choices did you make?
 - What changed?
- When things get rough, what do you do?
 - What helps?
 - Who do you go to?
 - What choices do you think you have? What might be alternative choices?

Strategies to Employ

- Focus on what is right rather than what is wrong
- Recognize the courage it takes to try something new
- Acknowledge the presence of fear, guilt and shame in many clients and how these can prevent exploring different choices

More Strategies...

- Take advantage of opportunities to educate and encourage changes in thinking, attitudes and behaviors
- Recognize and celebrate any movement in a safer, healthier direction
- Encourage connection to others in the program to promote growth and change

Crisis Prevention



- Find out what actions or events cause distress for each individual
- Help identify early warning signs
- Find out what each individual knows about what helps them calm down

Procedures or Situations That May Trigger Emotional Distress

- Lack of control-powerlessness
- Threat or use of physical force
- Observing threats, assaults, others engaged in self-harm
- Isolation
- Being in a locked room or space
- Physical restraints
- Interacting with authority figures
- For some women, interacting with men in general
- Lack of privacy
- Removal of clothing - medical exams
- Being touched
- Being watched - suicide watch
- Loud noises
- Fear based on lack of information
- Darkness
- Intrusive or personal questions

When an event is likely to create distress:

- **Acknowledge**
- Help the participant to **predict** what will happen
- Give as much **choice and control** as possible
- Encourage use of **self-regulation** strategies during the event
- Make **space for recovery** after event
- Encourage and support **self-soothing** after the event

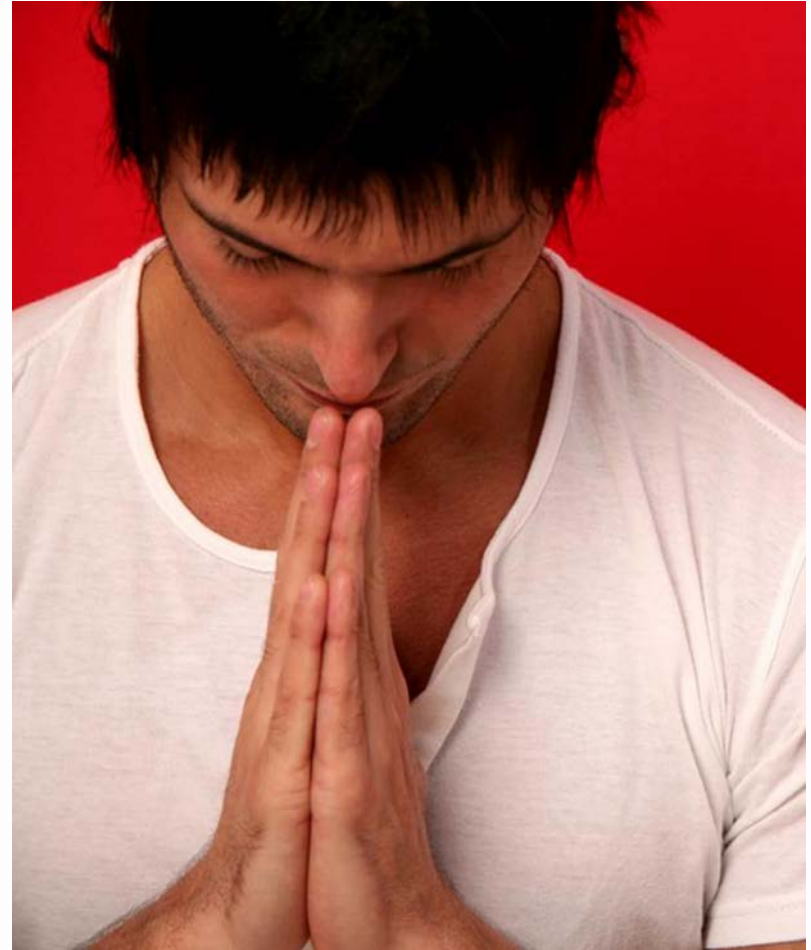
Appropriate Crisis Management

- Stay calm
- Make eye contact
- Keep appropriate physical distance
- Ask simple questions
- Validate feelings
- Be respectful and non-judgmental
- Offer options



Pause and notice...

- Am I safe?
- Am I calm?
- Create safety
- Create calm
- Ask: *“What is a helpful response?”*



“I’ve learned that people
will forget what you said,
people will forget what you did,
But, people will never forget how
you made them feel.”

Anonymous

Thoughts/ Questions/ Comments/Evaluations