Aim of Manual
The ProQOL Health manual was developed to serve as a resource summarizing key concepts related to healthcare workers’ self-care and the possible impacts of their work on their wellbeing. The manual also provides guidance to healthcare workers on the use of the ProQOL Health measure as a means of monitoring their wellbeing.

Who Can Use this Manual?
This manual is for the use of administrators and managers working within healthcare facilities and/or healthcare workers and for the individual use of healthcare workers.

Table of Contents
ProQOL Health Manual ........................................................................................................................................ 1
Aim of Manual .......................................................................................................................................................... 1
Who Can Use this Manual .................................................................................................................................... 1
Table of Contents .................................................................................................................................................. 1
Introduction ......................................................................................................................................................... 4
   FIGURE 1: Conceptual Model of Professional Quality of Life ............................................................................ 4
Key Terms and Core Concepts ................................................................................................................................. 5
   Perceived Support (PS) ........................................................................................................................................ 5
   Compassion Satisfaction (CS) ............................................................................................................................ 5
   Burnout (BO) .................................................................................................................................................... 5
   Secondary Traumatic Stress (STS) ..................................................................................................................... 6
   Moral Distress (MD) .......................................................................................................................................... 6
   Compassion Fatigue (CF) in Healthcare Workers ............................................................................................. 6
Self-care and Staff care for Prevention and Recovery ............................................................................................... 7
   Organizational Practices: .................................................................................................................................. 8
   Individual Practices ........................................................................................................................................... 8
Guidance on the Use of ProQOL Health: .................................................................................................................... 10
   Administration of the ProQOL Health ................................................................................................................ 10
   Individual administration ..................................................................................................................................... 10
   Group administration ....................................................................................................................................... 10
   Calculating the Scores on the ProQOL Health ................................................................................................. 12
Scale Definitions and Scores in the ProQOL Health ............................................................................................... 12
   Perceived support ............................................................................................................................................. 12
<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compassion satisfaction</td>
<td>13</td>
</tr>
<tr>
<td>Burnout</td>
<td>13</td>
</tr>
<tr>
<td>Secondary Traumatic Stress (STS)</td>
<td>14</td>
</tr>
<tr>
<td>Moral Distress</td>
<td>15</td>
</tr>
<tr>
<td>Annex 1: Handouts on Core Concepts</td>
<td>16</td>
</tr>
<tr>
<td>Handout 1: Perceived Support</td>
<td>17</td>
</tr>
<tr>
<td>Handout 2: Compassion Satisfaction</td>
<td>21</td>
</tr>
<tr>
<td>Handout 3: Burnout</td>
<td>23</td>
</tr>
<tr>
<td>Handout 4: Secondary Traumatic Stress</td>
<td>28</td>
</tr>
<tr>
<td>Handout 5: Moral Distress</td>
<td>33</td>
</tr>
<tr>
<td>Handout 6: Compassion Fatigue</td>
<td>39</td>
</tr>
<tr>
<td>Annex 2: Handouts on Fundamental Skills for Self-Care</td>
<td>44</td>
</tr>
<tr>
<td>Handout 7: Better Sleep</td>
<td>45</td>
</tr>
<tr>
<td>Handout 8: Work-Life Boundaries</td>
<td>49</td>
</tr>
<tr>
<td>Handout 9: Breathing</td>
<td>53</td>
</tr>
<tr>
<td>Handout 10: Intentional Avoidance and Focus</td>
<td>56</td>
</tr>
<tr>
<td>Handout 11: Grounding techniques</td>
<td>60</td>
</tr>
<tr>
<td>Handout 12: Intrusive thoughts and flashbacks</td>
<td>65</td>
</tr>
<tr>
<td>Handout 13: Mindfulness</td>
<td>71</td>
</tr>
<tr>
<td>Handout 14: Nightmares</td>
<td>75</td>
</tr>
<tr>
<td>Handout 15: Progressive Muscle Relaxation</td>
<td>79</td>
</tr>
<tr>
<td>Handout 16: Stretching</td>
<td>81</td>
</tr>
<tr>
<td>Handout 17: Visualization</td>
<td>85</td>
</tr>
<tr>
<td>References</td>
<td>17</td>
</tr>
<tr>
<td>General References</td>
<td>89</td>
</tr>
<tr>
<td>Perceived Support (PS)</td>
<td>90</td>
</tr>
<tr>
<td>Compassion Satisfaction (CS)</td>
<td>90</td>
</tr>
<tr>
<td>Burnout (BO)</td>
<td>90</td>
</tr>
<tr>
<td>Secondary Traumatic Stress (STS)</td>
<td>91</td>
</tr>
<tr>
<td>Moral Distress (MD)</td>
<td>91</td>
</tr>
<tr>
<td>Compassion Fatigue in Healthcare Workers</td>
<td>92</td>
</tr>
<tr>
<td>Better Sleep</td>
<td>92</td>
</tr>
<tr>
<td>Work/Life Boundaries</td>
<td>93</td>
</tr>
<tr>
<td>Breathing</td>
<td>93</td>
</tr>
<tr>
<td>Intentional Avoidance and Focus</td>
<td>93</td>
</tr>
</tbody>
</table>
Grounding techniques............................................................................................................................. 93
Intrusive thoughts and flashbacks .......................................................................................................... 94
Nightmares.............................................................................................................................................. 94
Introduction
Healthcare workers working in difficult humanitarian contexts have direct contact with the lives of their patients and beneficiaries. They frequently work long hours in under-resourced and high-pressure settings and are confronted by suffering and grief daily while working with their beneficiaries. In addition, these beneficiaries’ experiences, especially in the refugee context, add another dimension of possible stress. Healthcare workers may find that their wellbeing is impacted by the stressors and exposure to trauma arising in the context of their work, resulting in increased vulnerability to burnout, compassion fatigue and secondary traumatic stress.

Professional quality of life is the quality one feels in relation to one’s work as a healthcare worker. Both the positive and negative aspects of doing one’s job influence one’s professional quality of life. Existing theoretical models of professional quality of life break the concept into two aspects, the positive (Compassion Satisfaction) and the negative (Compassion Fatigue), with compassion fatigue broken down further into Burnout and Secondary Traumatic Stress. Based on long experience of work in humanitarian contexts and recent empirical research, we have extended this model somewhat.

In this manual, Professional Quality of Life is conceptualized around three components: Compassion Satisfaction, Perceived Support, and Compassion Fatigue. Compassion Fatigue in turn is broken down into three factors: Burnout, Secondary Traumatic Stress, and Moral Distress. This conceptual model is depicted in Figure 1 below, after which each of the components is described in greater detail.

FIGURE 1: Conceptual Model of Professional Quality of Life

Key Terms and Core Concepts

Perceived Support (PS)
Healthcare workers often face long-term chronic stress including witnessing suffering, extensive working hours, shiftwork, exposure to traumatic stories, and challenging working conditions. As a result, they are at risk for compassion fatigue, burnout, secondary traumatic stress and moral distress. One of the key ways that you can guard against these risks is through perceived support. Perceived support is one of the essential building blocks of wellbeing for healthcare workers that has been demonstrated to lower rates of compassion fatigue and burnout.4

Perceived support is defined as an individual’s experience of being cared for or loved, having a sense of being valued and needed by other people, and being part of a mutually supportive network.5

→ Refer to handout on Perceived Support (Annex 1)

Compassion Satisfaction (CS)
Although there are risks to those working in the helping field, there are also rewards and benefits that come from this work. Compassion satisfaction is the positive consequence of helping behavior. Compassion satisfaction is the pleasure you derive from helping, affection for colleagues and a good feeling resulting from the ability to help and make a contribution6. Compassion satisfaction occurs when you find meaning and fulfillment in your work. Compassion satisfaction is the direct opposite of compassion fatigue and can protect you from burnout and secondary traumatic stress7.

→ Refer to handout on Compassion Satisfaction (Annex 1)

Burnout (BO)
Burnout is characterized by feeling emotionally depleted or drained and can result after a period of long-term, work related stress. There are three key aspects to burnout which you may experience in varying degrees8 9.

<table>
<thead>
<tr>
<th>Burnout may include:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Emotional exhaustion</td>
<td>Feeling that your personal energy is gone or depleted</td>
</tr>
<tr>
<td>2. Depersonalization and cynicism</td>
<td>Feeling detached from your work, including a loss of motivation or interest</td>
</tr>
<tr>
<td>3. Feelings of ineffectivity</td>
<td>Feeling helpless or hopeless about your work and a sense of failure to reach your personal work-related goals</td>
</tr>
</tbody>
</table>

5 Ibid.
Secondary Traumatic Stress (STS)
Secondary traumatic stress (STS) refers to the distress and emotional disruption resulting from continued and cumulative contact or after single exposure with individuals who have directly experienced trauma. For example, healthcare professionals hearing about one firsthand trauma experiences of their patients may experience STS with the same intensity as others who hear stories repeated over time. The symptoms of STS usually have rapid onset and may lead to healthcare workers using more sick leave and creating lower morale. This ultimately leads to less effective healthcare workers.

Moral Distress (MD)
Moral distress occurs when health workers in humanitarian settings recognize the appropriate action to take but are unable to act accordingly. It also occurs when health workers must act in ways that are contrary to their personal and professional values, thereby undermining their sense of personal integrity and authenticity. Moral distress typically develops gradually and is characterized by feelings of guilt, frustration and anger, and may resulted in decreased morale, increased negative coping strategies and even self-harm.

Compassion Fatigue (CF) in Healthcare Workers
Most healthcare providers enter the field with the intent to help others and provide empathic care for patients with critical physical, mental, emotional, and spiritual needs. Healthcare providers, however, can be impacted by the continuing stress of meeting the often overwhelming needs of patients and their families which may result in compassion fatigue. Compassion fatigue affects not only the healthcare provider in terms of job satisfaction and emotional and physical health, but also the workplace environment by decreasing productivity, the quality of the work and patient satisfaction and increasing turnover.

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For the purposes of the ProQOL-Health and these particular health worker populations, compassion fatigue (CF) is defined as being composed of the components:

![Diagram showing Moral Distress, Secondary Trauma, and Burnout combining to form Compassion Fatigue]

Compassion fatigue ultimately results in a decreased ability to cope with the everyday environment. It has been defined as a state of emotional distress and exhaustion and biological, psychological and social dysfunction resulting from:

1. Compassion stress
2. Chronic demands associated with caring for patients in significant emotional and physical distress, such as individuals that have experienced trauma.
3. Secondary traumatic stress (STS) combined with cumulative burnout and moral distress. STS is the result of exposure to a patient’s traumatic experiences and cumulative burnout is a result of work related stressors that bring about feelings of frustration, a sense of loss of control, and decreased morale. Moral distress occurs when healthcare workers recognize the appropriate action to take but are unable to act accordingly.

The presence of STS and/or burnout and moral distress can increase the likelihood of developing compassion fatigue.

⇒ Refer to handout on Compassion Fatigue (Annex 1)

**Self-care and Staff care for Prevention and Recovery**

Self-care and staff care practices can help prevent the development of burnout, secondary traumatic stress and compassion fatigue and support compassion satisfaction. It is therefore recommended for individuals to identify and engage in replenishing self-care strategies that promote physical, emotional, and spiritual wellbeing with intentionality. Once you begin to routinely practice healthy self-care habits, they become part of your overall prevention plan. Not only do self-care practices strengthen your ability to cope while in the moment, but they can also help the body remember how to revert back to a healthier state.

Focusing on building strengths and carrying out self-care activities contributes to behavioral, cognitive, physical, spiritual, and emotional resilience which supports the prevention of burnout, secondary traumatic stress and compassion fatigue. In addition, staff care, which includes organizational practices and protocols that support staff wellbeing, is also important in preventing and addressing employee burnout, secondary traumatic stress and compassion fatigue.

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### Strategies include:

**Organizational Practices:**

| Improve Working Hours & Environment | • Reasonable working hours  
• Balance the intensity of work and ensure there is down time  
• Reduce workload intensity and repetitiveness and integrates variety into employee work, where possible |
| Encourage Work/Life Balance | • Encourage rest breaks and employee vacations, facilitate an organizational culture where self-care is valued and seen as necessary for quality work |
| Ensure Roles or Expectations are clear | • Clear job descriptions and ensuring that staff have a clear understanding of their responsibilities  
• Ensure that employees are appropriately trained to meet their work responsibilities |
| Provide Support and Adequate Supervision | • Regular meetings with supervisees/employees and encourage them to seek help as needed  
• Regular team meetings and ensuring effective team work  
• Establish peer support or buddy systems as needed to provide employees with support  
• Practices are implemented that build team cohesiveness. For example, engaging with fellow workers to celebrate successes and mourn sorrows as a group |
| Value wellbeing | • Implement regular team meetings and ensure effective team work  
• Promote the importance of wellbeing  
• Implement systems that celebrate success and show appreciation  
• Ensure that employees know that they are a valued team member  
• Information about stress and its impacts is provided and good coping strategies are encouraged  
• Have a debriefing protocol |

**Individual Practices**

| Behavioral | • Ensure adequate sleep (6-8 hours per night)  
• Seek help from colleagues and/or your supervisor when you need it  
• Develop competence (the skills you need to do your job)  
• Develop confidence (the knowledge that you can do it)  
• Assess the fit between your interests, talents, and skills and your job description  
• Assess your workload |
- Take on new tasks if this balances with your workload. New tasks can give you energy. Reorganizing the way you currently do your work or restructuring your work day can also be helpful<sup>19</sup><sup>20</sup>.
- Seek a mentor, supervisor, experienced healthcare provider who understands the norms and expectations of your work and may assist in identifying strategies that will help you cope with the current work situation, by enhancing the work environment and promoting work-life balance (e.g., changing the work assignment; recommending time off or reducing overtime hours; encouraging attendance at a conference; or becoming involved in a project of interest)
- Seek professional support

### Cognitive

- Assess how well your values and those of your agency fit one another. If fit of values is an issue, it helps to look for commonalities, places where your values match, as well as to think about whether you can learn to value the things your agency thinks are important. You can also consider advocating for values you think are important in your workplace.

### Physical

- Engage in physical exercise regularly
- Ensure a healthy diet (i.e., fruits, vegetables, avoiding processed foods, reduce sugar, salt and caffeine)

### Spiritual

- Make time for your spiritual practice (e.g., prayer, meditation, spending time in nature, engaging in meaningful contributions to others)
- Find meaning or purpose in your daily activities, use strategies to help you remember this sense of meaning every day (e.g., leave yourself notes on your desk, put a photo where you will see it.
- Take time to be alone so you can think, meditate, and rest

### Emotional

- Practice gratitude (e.g., set some time aside each day to reflect on a few things for which you are thankful)
- Ensure that you have good social support (individuals in your personal and professional life from which you can get emotional support and ask to help when you need it) and connect with your social support networks regularly
- Nurture positive personal and professional relationships and develop social support. Make time to communicate and spend time with friends and family
- Try to find things to look forward to
- Build self-awareness capacities (e.g., through mindfulness, reflection practices)

⇒ Refer to handouts on Self-care Strategies (Annex 2)

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Guidance on the Use of ProQOL Health\(^2\):

Administration of the ProQOL Health

The ProQOL Health is not a diagnostic measure and will therefore not provide an official diagnosis. The ProQOL Health can be a guide in regard to an individual’s or organization’s balance of positive and negative experiences related to doing their work and provide healthcare workers with a tool to measure the impact of their work on their wellbeing. For example, for an individual or an organization, high scores on compassion satisfaction are a reflection of engagement with the work being done. Perhaps the most important part of administration of the ProQOL Health is for people to understand what they are being asked to do. If they feel that they are being “observed” and measured for their behavior, they are unlikely to want to participate or, if they do, to provide reliable answers. It is important to explain the logic and purpose of the measure and to engage the person’s desire to take the test. It is therefore important to make clear that the measure can be used as a tool to support the person’s wellbeing and that the person has a right to refuse to utilize the measure.

Individual administration

<table>
<thead>
<tr>
<th>Method 1: Individual Administration</th>
<th>In this type of administration, a person typically takes the test and self-scores.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Data Storage:</strong> In this situation, the data is not recorded elsewhere and the person does not discuss his or her results unless they choose to do so.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Method 2: Individual Administration initiated by an outside source</th>
<th>In this type of administration a person may take the ProQOL Health as part of job counseling or an employee assistance program. They may take the ProQOL Health as part of their ongoing self-care plan.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Data Storage:</strong></td>
<td>The data may or may not be archived. It is important to establish with the individual exactly what will happen with his or her data because data security and privacy are very important issues.</td>
</tr>
</tbody>
</table>

Timing

The individual can complete the ProQOL Health measure at **regular intervals** to monitor their compassion fatigue, secondary traumatic stress, burnout and compassion satisfaction.

Many health workers find that completing the measure on a **quarterly basis** (that is, every three months) and recording their scores is an effective approach to monitoring their quality of life at work. The cumulative data can indicate areas that have improved and worsened and provide guidance on self-care strategies to implement.

Group administration

<table>
<thead>
<tr>
<th>Method</th>
<th>In this type of administration, a group of people complete the ProQOL Health simultaneously.</th>
</tr>
</thead>
</table>

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## Timing
As with the individual administration, you may wish to administer the ProQOL Health at regular intervals to be able to monitor any changes in monitor compassion fatigue, secondary traumatic stress, burnout and compassion satisfaction.

## Key Considerations

### Impact of group administration:
The key consideration for the group administration is that there are others present who are doing the same activity. In a group administration it is important to consider the group effect on scores. If a few people are quite vocal about their unwillingness to participate, there is an effect on all of the participants. If people feel they are being watched by others, or are embarrassed to be in the group, the scores are unlikely to be valid and privacy rights may have been violated. People should not be singled out so as to cause embarrassment. For example, you should not set up a group administration for all people who made medical errors if the administration is based on the assumption that their mistakes occurred because of burnout.

### Managing revealing data:
When working in group settings, it is not uncommon for one or two individuals to provide revealing personal information that are not appropriate to the group setting. In these cases it is necessary for the measure administrator to contain and refocus the attention of the class. Good ethical behavior suggests the measure administrator follow up with the person in a more appropriate setting. In situations such as these, it is usually appropriate to provide a referral for employee assistance or other help such as mental or physical health care. In the case that the administrator believes that there is an imminent danger, they should take emergency actions and protecting the person, themselves, and others from harm in the best way that they can.

## Presenting the results back to the group
In the case of a self-test, people may be given general information such as “others who score similarly to you...” By contrast, in the case of individual administration, feedback may be much more specific. Feedback in group settings should not be about a single individual but about things that apply to more than one person.

The most important thing about giving feedback is to be prepared. Be prepared to give specific and clear information appropriate to the setting and be prepared to answer questions.

Remember, that a single administration of a short questionnaire like the ProQOL-Health can never capture the full experience of doing health work under difficult conditions. Recent events and your mood at the time that you complete the measure can have a large effect on your scores. You should treat the results of this measures as one piece of information about your emotional health at work.
Calculating the Scores on the ProQOL Health

Instructions for scoring the ProQOL Health are provided on pages 2 and 3 of the measure. Scores for each of the five scales are calculated by adding together the values associated with the respondents’ answers to six questions. The values for responses to all items are indicated on the scale itself, and are as follows:

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Very Often</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 point</td>
<td>2 points</td>
<td>3 points</td>
<td>4 points</td>
<td>5 points</td>
</tr>
</tbody>
</table>

Scale Definitions and Scores in the ProQOL Health

Perceived support relates to an individual’s experience of being cared for and loved, having a sense of being valued and needed by other people, and being part of a mutually supportive network. The essential element of perceived support consists of both personal and professional supports.

The score for Perceived Support is calculated by adding together the points associated with responses to items 5, 11, 13, 18, 23, and 25 of the measure. This produces the lowest possible score of 6 and a highest possible score of 30. Total scores of 12 or less are considered “low”, total scores from 13 to 23 are considered “moderate”, and total scores of 24 or more are considered “high” for perceived support.

Calculating Your Score:
The score for Perceived support is calculated as follows:

<table>
<thead>
<tr>
<th>Step 1</th>
<th>Add together the points associated with responses to items 1, 6, 21, 24, 27, and 30 of the measure.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Remember:</td>
</tr>
<tr>
<td></td>
<td><strong>Never</strong></td>
</tr>
<tr>
<td></td>
<td>1 point</td>
</tr>
</tbody>
</table>

Calculating your score: This produces the lowest possible score of 6 and a highest possible score of 30.

<table>
<thead>
<tr>
<th>Your results for Perceived Support</th>
<th>Low levels of perceived support</th>
<th>Moderate levels of perceived support</th>
<th>High levels of perceived support</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 or less</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13-23</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>More than 24</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Higher scores for perceived support mean that you feel supported by formal and/or informal networks. If your score is 12 or less, you may be at risk for burnout and compassion fatigue due to a perceived lack of support. You may want to consider assessing your current supports and focusing on how you can build both your formal and informal networks.

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22 Pergol-Metko, P., Czyzewski, L. Compassion Fatigue and perceived of social support among Polish nurses. Retrieved from Research Gate, July 2021.
https://www.researchgate.net/publication/341716162_Compassion_Fatigue_and_Perceived_of_Social_Support_Among_Polish_Nurses
Compassion satisfaction relates to the pleasure you derive from being able to do your work well. For example, you may feel that it is a pleasure to help others through your work. You may feel positively about your colleagues or your ability to contribute to the work setting or even the greater good of society. Higher scores on this scale represent a greater satisfaction related to your ability to be an effective caregiver in your job.

Calculating your score:
The score for Compassion satisfaction is calculated as follows:

<table>
<thead>
<tr>
<th>Step 1</th>
<th>Add together the points associated with responses to items 1, 6, 21, 24, 27, and 30 of the measure.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Remember:</td>
<td></td>
</tr>
<tr>
<td>Never</td>
<td>Rarely</td>
</tr>
<tr>
<td>1 point</td>
<td>2 points</td>
</tr>
<tr>
<td>Calculating your score</td>
<td>This produces the lowest possible score of 6 and a highest possible score of 30.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Your results for Compassion Satisfaction</th>
<th>12 or less</th>
<th>Low levels of compassion satisfaction</th>
</tr>
</thead>
<tbody>
<tr>
<td>13-23</td>
<td>Moderate levels of compassion satisfaction</td>
<td></td>
</tr>
<tr>
<td>More than 24</td>
<td>High levels of compassion satisfaction</td>
<td></td>
</tr>
</tbody>
</table>

Understanding your results
If you are in the higher range, you probably derive a good deal of professional satisfaction from your position. If your score is below 12, you are likely to be getting very little pleasure or satisfaction from your work. Since our work is an important part of our identities and the way we spend our time, low compassion satisfaction can have profound negative effects on our overall quality of life. People with low compassion satisfaction scores should look for opportunities to take on more rewarding tasks at work or to find alternate sources of satisfaction and fulfillment.

Burnout is one of the elements of compassion fatigue. It is associated with feelings of hopelessness and difficulties in dealing with work or in doing one’s job effectively. These negative feelings usually have a gradual onset. They can reflect the feeling that your efforts make no difference, or they can be associated with a very high workload or a non-supportive work environment.

Calculating your score:
The score for Burnout is calculated as follows:

<table>
<thead>
<tr>
<th>Step 1</th>
<th>Add together the points associated with responses to items 8, 15, 19, 20, 22, and 29 of the measure.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Remember:</td>
<td></td>
</tr>
<tr>
<td>Never</td>
<td>Rarely</td>
</tr>
<tr>
<td>1 point</td>
<td>2 points</td>
</tr>
</tbody>
</table>
Calculating your score
This produces the lowest possible score of 6 and a highest possible score of 30.

<table>
<thead>
<tr>
<th>Your results for Burnout</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>12 or less</td>
<td>Low levels of burnout</td>
</tr>
<tr>
<td>13-23</td>
<td>Moderate levels of burnout</td>
</tr>
<tr>
<td>More than 24</td>
<td>High levels of burnout</td>
</tr>
</tbody>
</table>

Understanding your results
Higher scores on this scale mean that you are at higher risk for burnout. If your score is 24 or more, you may be at high risk of experiencing burnout. If your score is high, you should consider possibilities for reducing the numbers of hours you work each week, ensuring that you take regular days away from work (such as weekend and time off), and see if there are ways to increase the variety of tasks that you are responsible for at work. If high scores continue over time, you should discuss this with a trusted colleague, your supervisor, or a mental health professional.

Secondary Traumatic Stress (STS) is the second component of compassion fatigue. It refers to your work-related, secondary exposure to extremely or traumatically stressful events. Developing problems due to exposure to other’s trauma is somewhat rare but does happen to many people who care for those who have experienced extremely or traumatically stressful events. For example, you may repeatedly hear stories about the traumatic things that happen to other people. You may see or provide treatment to people who have experienced horrific events. If your work puts you directly in the path of danger, for example due to your work as an emergency medical personnel, a disaster responder or as a medicine personnel, this is not secondary exposure; your exposure is primary. However, if you are exposed to others' traumatic events as a result of your work, such as providing care to people who have sustained emotional or physical injuries, this is secondary exposure. The symptoms of STS are usually rapid in onset and associated with a particular event. They may include being afraid, having difficulty sleeping, having images of the upsetting event pop into your mind, or avoiding things that remind you of the event.

Calculating your score:
The score for STS is calculated as follows:

<table>
<thead>
<tr>
<th>Step 1</th>
<th>Add together the points associated with responses to items 3, 7, 10, 12, 16, and 26 of the measure.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Remember:</td>
</tr>
<tr>
<td></td>
<td>Never</td>
</tr>
<tr>
<td></td>
<td>1 point</td>
</tr>
<tr>
<td>Calculating your score</td>
<td>This produces the lowest possible score of 6 and a highest possible score of 30.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Your results for Secondary Traumatic Stress</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>12 or less</td>
<td>Low levels of STS</td>
</tr>
<tr>
<td>13-23</td>
<td>Moderate levels of STS</td>
</tr>
<tr>
<td>More than 24</td>
<td>High levels of STS</td>
</tr>
</tbody>
</table>
Understanding your results
If your score is 24 or more, you may want to take some time to think about what at work may be frightening to you or if there is some other reason for the elevated score. Situations where we are frightened for our own safety while caring for others are associated with secondary traumatic stress, as are situations involving suffering, violence and death. If high scores continue over time, you should discuss this with a trusted colleague, your supervisor, or a mental health professional.

Moral Distress is the third component of compassion fatigue and occurs when health workers in humanitarian settings recognize the appropriate action to take but are unable to act accordingly. It also occurs when health workers must act in ways that are contrary to their personal and professional values, thereby undermining their sense of personal integrity and authenticity. Moral distress is included as a component of Compassion Fatigue for the purposes of the ProQOL-Health and these particular health worker populations.

Calculating your score:
The score for Moral Distress is calculated as follows:

<table>
<thead>
<tr>
<th>Step 1</th>
<th>Add together the points associated with responses to items 2, 4, 9, 14, 17, and 28 of the measure.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Remember:</td>
</tr>
<tr>
<td></td>
<td><strong>Never</strong></td>
</tr>
<tr>
<td></td>
<td>1 point</td>
</tr>
<tr>
<td>Calculating your score</td>
<td>This produces the lowest possible score of 6 and a highest possible score of 30.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Your results for Moral Distress</th>
<th>12 or less</th>
<th>Low levels of Moral Distress</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>13-23</td>
<td>Moderate levels of Moral Distress</td>
</tr>
<tr>
<td></td>
<td>More than 24</td>
<td>High levels of Moral Distress</td>
</tr>
</tbody>
</table>

Understanding your results
If your score is 24 or higher, you should consider which aspects of your work are causing you the greatest internal conflict, situations where you wish you could act differently for the good of the people you care for. Try talking to trusted colleagues and supervisors, especially those who have more experience that you do to see how they feel about the workplace challenges that you are experiencing. If high scores continue over time, you should discuss this with a trusted colleague, your supervisor, or a mental health professional.
Annex 1: Handouts on Core Concepts
Perceived Support

Definition
Healthcare workers often face long-term chronic stress including witnessing suffering, extensive working hours, shift work, exposure to traumatic stories, and challenging working conditions. As a result, they are at risk for compassion fatigue, burnout, secondary traumatic stress and moral distress. One of the key ways that you can guard against these risks is through perceived support. Perceived support is one of the essential building blocks of wellbeing for healthcare workers that has been demonstrated to lower rates of compassion fatigue and burnout.1

Perceived support is defined as an individual’s experience of being cared for or loved, having a sense of being valued and needed by other people, and being part of a mutually supportive network.1 The essential elements of perceived support consists of both personal and professional supports including:

<table>
<thead>
<tr>
<th>Personal support (Informal)</th>
<th>Professional support (Formal)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family</td>
<td>Supervisor support</td>
</tr>
<tr>
<td>Friends</td>
<td>Organization support and commitment to wellbeing</td>
</tr>
<tr>
<td>Emotional support: the feeling of being listened to, and receiving empathy and caring</td>
<td>Coaching/mentoring</td>
</tr>
<tr>
<td>Instrumental support: when caring others provide direct assistance in accomplishing tasks (for example helping in the home, running errands, etc.)3</td>
<td>Clinical supervision</td>
</tr>
<tr>
<td></td>
<td>Co-worker or peer support</td>
</tr>
<tr>
<td></td>
<td>Therapist or counselor</td>
</tr>
</tbody>
</table>

The key element is the perception of support, the feeling that you have the support necessary to buffer any negative impacts of the work-related stress you face.3 The presence and the perception of support from both personal and professional areas results in improved mental health outcomes, promotes healthy coping strategies, lowers job-related stress, and prevents burnout.6

Strategies for Increasing Support

The first step towards increasing your support is to assess your current network and identify which areas are strong and which ones you could increase. Some questions to ask yourself are:

<table>
<thead>
<tr>
<th>Question</th>
<th>Possible Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you perceive that you have a strong formal support network at the moment?</td>
<td>If not, are there resources you can access to increase your formal supports?</td>
</tr>
<tr>
<td>Question</td>
<td>Response</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Do you have a mentor or a coach?</td>
<td>If you feel this would be helpful, does your organization have a coaching/mentoring program?</td>
</tr>
<tr>
<td>Do you have a supportive supervisor?</td>
<td>If yes, can you talk to them about the norms and expectations of your work and ask them to assist you in identifying strategies that will help you cope with the current work situation. This may include enhancing the work environment and promoting work-life balance (e.g., changing work assignments; recommending time off or reducing overtime hours; encouraging attendance at a conference; or becoming involved in a project of interest)</td>
</tr>
<tr>
<td>If it’s relevant to your role, do you receive clinical supervision?</td>
<td>If not, can you find someone who could support you in your clinical practice? Clinical supervision can provide you with technical recommendations or help you make difficult ethical decisions. Clinical supervision can also be a place where you discuss the impact of the work you are doing and ways that you can support your wellbeing.</td>
</tr>
<tr>
<td>Would you benefit from supports such as a counselor or therapist?</td>
<td>A counselor or therapist can help you to work through challenges you may be facing as a result of your work and assist you in putting positive coping strategies in place.</td>
</tr>
<tr>
<td>Do you have colleagues that you can turn to for support?</td>
<td>If not, can you start a group at your organization where colleagues can meet and support each other?</td>
</tr>
<tr>
<td>Do you perceive that you have a strong informal support network at the moment?</td>
<td>If not, what can you do to increase your informal supports? Are there people that you can reach out to that you feel would be supportive? Perhaps there is a friend, family member or community you used to connect with that you’ve lost touch with or new supports that you feel would be helpful. Could you reach out to them and establish a supportive connection?</td>
</tr>
<tr>
<td>Who do you feel is most supportive to you personally?</td>
<td>Can you reach out to this person/people more often when you need support?</td>
</tr>
<tr>
<td>Are there supports that you have overlooked that may be helpful at this time?</td>
<td>Try making a list of all the supports that you have and who may be most helpful in your current situation that would most assist you with your current needs.</td>
</tr>
</tbody>
</table>

Once you have assessed your support, it’s important to access that support and utilize your networks when needed.
Aranya has been working as a midwife for many years and has been under an increasing amount of stress. She is being asked to take on extremely varied shifts due to short-staffing and has more and more work each week. She is also finding that she is being emotionally impacted by the stories from the women she supports. Many of them have been talking to her about domestic violence in the home and she’s starting to have nightmares at night. She’s having problems sleeping and is feeling increasingly exhausted.

When Aranya first started her job, she used to talk to colleagues regularly, and there was a group of midwives that she met with each week to talk about work and any challenges. She also had a group of friends that she socialized with most weeks. Lately, however, as she’s gotten busier she’s stopped meeting with her colleagues and friends regularly. Now, she is starting to feel isolated and has noticed that her colleagues are no longer inviting her to meet with them. She also feels she hasn’t heard from her friends in a while and is starting to perceive that she doesn’t have a support network.

Aranya decides to talk to her colleagues and they tell her that they thought she didn’t have time to meet with them. She had turned down the last few invitations and they didn’t want to put pressure on her as they were aware of the stress she was under. She let them know that she would still like to be a part of the group and they will continue to invite her, and will reach out to her when she does not attend to make sure she is okay. Aranya also spoke with her friends and they told her that they were worried about her but didn’t know how to address it. They are now organizing a dinner where they can talk about how Aranya is doing and what support they can provide. Aranya has realized that she was perceiving that her support network was no longer there, but that she still did have supports and resources that she could draw on.

Utilizing Your Support Network

It’s important to check-in with your networks to discuss what support you may need to mobilize as well as assess what new supports you could put into place. Sometimes you may perceive that you no longer have a strong support network, but there are still supports available to you when needed. Some key strategies for ensuring you utilize your support network in the best way possible include:

- **Step 1:** Assess your networks. Where can you strengthen them?
- **Step 2:** Utilize your support networks regularly. Don’t leave it until you feel close to burnout to reach for support.
- **Step 3:** Decide which support and when? Make a list of what types of support help you the most and when. For example, if you’ve had a challenging case at work, perhaps talking to a colleague or seeking supervision would feel most supportive.
Through utilizing your supports when needed and accessing them regularly, you can begin to buffer the impacts of the stress you may be facing and avoid long term impacts such as burnout and compassion fatigue.

It’s important to check-in with your networks to discuss what support you may need to mobilize as well as assess what new supports you could put into place.

References

   https://www.researchgate.net/publication/341716162_Compassion_Fatigue_and_Perceived_of_Social_Support_Among_Polish_Nurses


Compassion Satisfaction

Although there are risks to those working in the helping field, there are also rewards and benefits that come from this work. Compassion satisfaction is the positive consequence of helping behavior. Compassion satisfaction is the pleasure you derive from helping, positive feelings we have for colleagues and a good feeling resulting from the ability to assist others and make a contribution. Compassion satisfaction occurs when you find meaning and fulfillment in your work. Compassion satisfaction is the direct opposite of compassion fatigue and can protect you from burnout and secondary traumatic stress.

The indicator of compassion satisfaction is the sense of pleasure and fulfillment that healthcare providers derive from their work. Compassion satisfaction associated feelings include fulfillment, reward, achievement, happiness, enrichment, inspiration, energy, gratitude and hope.

Fatimah is a 50-year old nurse who works within an oncology department. Approximately 15 years ago, Fatimah went through a period of feeling fatigued, lacking in motivation and having difficulty finding meaning in her work. At the time, she was working long hours, with a heavy caseload of patients and did not feel supported by her colleagues and supervisor. She experienced low mood, was more irritable with her children and spouse and found it difficult to experience pleasure in the leisure activities she used to enjoy. With the help of a mental health counselor and engaging in counseling, Fatimah realized that she was experiencing burnout and symptoms of compassion fatigue. As a result of this realization, Fatimah began to implement gradual changes in her life. She started by ensuring that she got enough and good quality sleep, improved her diet to eat healthy foods and engaged in moderate exercise. She became intentional in planning activities with her children that both she and her children would enjoy and she and her spouse ensured that they scheduled time together. Fatimah also engaged in a job search and obtained a nursing job in a health facility that was well staffed, had reasonable working hours with scheduled rest periods, and a positive and collaborative relationship amongst team members. She felt supported by her new supervisor who was invested in mentoring Fatimah and providing her with opportunities for her continued professional growth. Over time, Fatimah’s physical and emotional symptoms improved. She found herself enjoying her job once again and feeling especially gratified and fulfilled by her work with patients.
Research indicates that the following elements influence a person’s level of compassion satisfaction: use of professional counseling, co-worker dynamics, time spent in direct client care, longer duration in current position, work hours per shift, older age, hobbies, quality of social supports, and exercise\(^1\). The likelihood of experiencing compassion satisfaction is also increased by developing healthy personal and workplace practices. These include:

| Behavioral         | • Leisure activities  
|                   | • Address and minimize work and personal factors that contribute to stress, burnout, compassion fatigue and secondary traumatic stress. |
| Cognitive          | • Effective decision making  |
| Physical           | • Adequate and restorative rest  
|                   | • Physical exercise  
|                   | • Healthy eating habits  |
| Working Environment | • Effective communication, teamwork and collaboration  
|                   | • Appropriate staffing  
|                   | • A culture of meaningful recognition  
|                   | • Effective leaders that promote a culture of caring  
|                   | • Recognition  
|                   | • Professional development  
|                   | • Debriefing  
|                   | • Eliminating mistrust and intimidating behavior  |

The likelihood of experiencing compassion satisfaction is also increased by developing healthy personal and workplace practices.

Refer to handouts on burnout, compassion fatigue and secondary traumatic stress for additional guidance on self-care practices.

**References**

**Burnout**

**Definition**

Burnout is characterized by feeling emotionally depleted or drained and can result after a period of long-term, work related stress. There are three key aspects to burnout which you may experience in varying degrees.\(^2,3\)

<table>
<thead>
<tr>
<th>Burnout may include:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Emotional exhaustion</td>
<td>Feeling that your personal energy is gone or depleted</td>
</tr>
<tr>
<td>5. Depersonalization and cynicism</td>
<td>Feeling detached from your work, including a loss of motivation or interest</td>
</tr>
<tr>
<td>6. Feelings of inefficacy</td>
<td>Feeling helpless or hopeless about your work and a sense of failure to reach your personal work-related goals</td>
</tr>
</tbody>
</table>

**Signs & Symptoms**

<table>
<thead>
<tr>
<th>Physical</th>
<th>Emotional &amp; Cognitive</th>
<th>Behavioral</th>
<th>Work Related</th>
</tr>
</thead>
</table>
| • Fatigue/exhaustion  
• Headaches  
• Sleep disturbances: difficulty falling or staying asleep increased/decreased sleep  
• Digestive problems  
• Increased physical complaints | • Emotional distress (e.g., feelings of sadness, depression)  
• Anger & irritability  
• Inwardly directed criticism  
• Difficulty concentrating  
• Increased cynicism or negativity  
• Increased doubts and uncertainty | • Excessive use of substances: nicotine, alcohol, illicit drugs  
• Risk-taking | • Avoidance or dread of working with certain patients or colleagues  
• Withdrawing from colleagues  
• Decreased job performance  
• Negative attitude toward the job, organization, and/or patients  
• Depersonalization  
• Absenteeism  
• Lack of satisfaction from achievements  
• Decreased sense of personal accomplishment  
• Feeling unable to help  
• Disillusionment  
• Reduced job commitment  
• Reduced job motivation  
• Low career satisfaction |
Mohamad is a 35-year old gastroenterologist. He was contacted by his supervisor after a heated argument between him and a surgeon. They argued about a critical care case which involved a 26-year old female patient with complicated Crohn’s disease who expired with sepsis. Mohamad’s colleagues report that he has been aggressive with the physician and nurse colleagues and they feel that he is inappropriate in his interactions with them. Mohamad has a reputation for being a hard worker and excellent physician. He spends most of his time at the hospital because of his commitment to his patients and his clinical work. Mohamad is married and his wife is pregnant with their first child. His wife has expressed concerns to another physician’s spouse about Mohamad, stating that he is irritable and not participating in family life when at home. When Mohamad meets with his supervisor to discuss the conflict with his colleague, he denies any problems. He expresses that he did not have much of an impact to help the patient who expired or many others. He feels he has lost some direction, and the conflict with his colleague made him frustrated. He reports feeling worn out and that he is not able to accomplish much in his work.

### Vulnerability Factors

Work-related and organizational factors increase vulnerability to burnout. These factors include:

| Working Hours & Environment | • Long working hours  
| • Difficult work environment  
| • Too much challenge in your work  
| • Not enough control over one’s working conditions  
| • Chronic work-related stress  
| • Intense work demands  
| Work/Life Balance | • Lack of boundaries between work and rest  
| • Limited opportunity for rest and recovery  
| • Continual boredom (this can be either a cause of or a symptom of burnout)  
| Unclear Roles or Expectations | • An unclear or non-existent job description or unclear role in the team  
| • Poor preparation and briefing for work related tasks  
| • A persistent gap between job expectations and one’s skills, abilities, and/or knowledge  
| • A poor match between the job and the person  
| • Not enough signs of effectiveness or progress within one’s work  
| • Challenges in balancing the expectations of managers, co-workers, donors, patients, and family  
| • Responsibility for things you can’t control or experience of lack of control over your work. |
Lack of Support or Adequate Supervision

- Inconsistent or inadequate supervision
- Lack of fairness or feedback
- Lack of support can lead to unresolved conflict and greater risk of burnout
- Limited autonomy at work and a high degree of interference

Lack of value for wellbeing

- Efforts are not being acknowledged and appreciated
- Feeling devalued and not rewarded for your work
- Lack of engagement in the workplace

Prevention & Recovery

Self-care practices can help prevent the development of burnout. Engage regularly in replenishing self-care strategies that promote physical, emotional, and spiritual wellbeing. Once you begin to routinely practice healthy self-care habits, they become part of your overall prevention plan. Not only do self-care practices strengthen your ability to cope while in the moment, they can help your body remember how to bounce back to a healthier state.

Engage regularly in replenishing self-care strategies that promote physical, emotional, and spiritual wellbeing.

By focusing on building your strengths and carrying out self-care activities, you contribute to your behavioral, cognitive, physical, spiritual, and emotional resilience which supports the prevention of burnout. In addition, organizational practices and protocols are important in preventing employee burnout. Strategies include:

Organizational practices:

| Improve Working Hours & Environment | Reasonable working hours
| Balance the intensity of work and ensure there is down time
| Encourage Work/Life Balance | Encourage rest breaks and employee vacations, facilitate an organizational culture where self-care is valued and seen as necessary for quality work
| Ensure Roles or Expectations are clear | Clear job descriptions and ensuring that staff have a clear understanding of their responsibilities
| Ensure that employees are appropriately trained to meet their work responsibilities
| Provide Support and Adequate Supervision | Regular meetings with supervisees/employees and encourage them to seek help as needed
| Establish peer support or buddy systems as needed to provide employees with support
| Value wellbeing | Implement regular team meetings and ensure effective team work
| Promote the importance of wellbeing
| Implement systems that celebrate success and show appreciation
| Ensure that employees know that they are a valued team member |
Individual practices:

Through focusing on your behavioral, cognitive, physical, spiritual, and emotional self-care practices you can begin to build your resilience. Some suggested activities include:

| Behavioral | • Ensure adequate sleep (6-8 hours per night)  
• Seek help from colleagues and/or your supervisor when you need it  
• Develop competence (the skills you need to do your job)  
• Develop confidence (the knowledge that you can do it)  
• Assess the fit between your interests, talents, and skills and your job description  
• Assess your workload  
• Take on new tasks if this balances with your workload. New tasks can give you energy  
• Reorganize the way you currently do your work or restructure your work day to ensure more self-care time.

| Cognitive | • Assess how well your values and those of your agency fit one another. If fit of values is an issue, it helps to look for commonalities, places where your values match, as well as to think about whether you can learn to value the things your agency thinks are important. You can also consider advocating for values you think are important in your workplace.

| Physical | • Engage in physical exercise regularly  
• Ensure a healthy diet (i.e., fruits, vegetables, avoiding processed foods, reduce sugar, salt and caffeine)

| Spiritual | • Make time for your spiritual practice (e.g., prayer, meditation, spending time in nature, engaging in meaningful contributions to others)  
• Find meaning or purpose in your daily activities, use strategies to help you remember this sense of meaning every day (e.g., leave yourself notes on your desk, put a photo where you will see it)

| Emotional | • Practice gratitude (e.g., set some time aside each day to reflect on a few things for which you are thankful)  
• Ensure that you have good social support (individuals in your personal and professional life from which you can get emotional support and ask to help when you need it) and connect with your social support networks regularly

| References |


Secondary Traumatic Stress

**Definition**

Secondary traumatic stress (STS) refers to the distress and emotional disruption resulting from continued and cumulative contact, or after single exposure, with individuals who have directly experienced trauma. Work that involves witnessing a great deal of suffering, either by observing or listening to narratives of trauma, can result in lasting emotional distress to health workers. For example, healthcare professionals hearing about one firsthand trauma experiences of their patients may experience STS with the same intensity as others who hear stories repeated over time. The symptoms of STS usually have rapid onset and may lead to healthcare workers using more sick leave and creating lower morale. This ultimately leads to less effective healthcare workers.

**Work that involves witnessing a great deal of suffering, either by observing or listening to narratives of trauma, can result in lasting emotional distress to health workers.**

**Signs & Symptoms**

STS is a syndrome of symptoms that are identical to post-traumatic stress disorder.

<table>
<thead>
<tr>
<th>Physical</th>
<th>Emotional &amp; Cognitive</th>
<th>Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Difficulty sleeping (nightmares)</td>
<td>Feeling afraid</td>
<td>Heightened startle response</td>
</tr>
<tr>
<td>Hypervigilance</td>
<td>Anxiety</td>
<td>Avoiding places, people, things that remind you of the traumatic event(s)</td>
</tr>
<tr>
<td></td>
<td>Irritability / anger</td>
<td>Increased use of substances: nicotine, alcohol and/or illegal drugs</td>
</tr>
<tr>
<td></td>
<td>Feeling numb and/or detached</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Images and thoughts of the traumatic event(s) popping into your mind without your being able to control these</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Avoiding thinking about the traumatic event(s)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Disrupted beliefs</td>
<td></td>
</tr>
</tbody>
</table>

**Case Example**

Sara is a physician working in the emergency department of a large hospital. She has been engaged in emergency medicine for 10 years. In the course of her work as a physician, Sara has worked with patients presenting with life threatening injuries including victims of traumatic car crash injuries and brain injuries, survivors of physical and sexual assault, as well as other health emergencies such as heart attacks. Sara’s hospital has been short staffed and she has therefore had to frequently work double shifts over the past two months.

Sara is feeling increasingly fatigued as she has been having difficulty falling and staying asleep. Her sleep is interrupted by bad dreams of patients’ injuries. She wakes up from these dreams with a startle, a fast
heartbeat and an extreme feeling of anxiety and fear. Sara is unable to fall back asleep and usually averages about 5 hours of sleep per night. Sara is more irritable with her children and husband and is less able to manage her feelings of anger which has resulted in her having more heated arguments with her husband. Sara has found that she is more jumpy when she hears loud noises and is finding it hard to relax. She increasingly feels dread about going to work and has started taking sick leave more frequently.

Vulnerability Factors

Research indicates that there are several risks that can increase the possibility of developing STS. This includes increased and frequent exposure to others’ trauma stories, feelings of professional isolation and larger patient loads. Another risk factor is related to the type of coping strategy the healthcare worker uses. Healthcare workers who use problem-focused coping tend to have lower rates of STS because problem-focused coping works to reduce or eliminate the source of stress.

In contrast, healthcare workers who use emotion-focused coping often have higher rates of STS. Emotion-focused coping is where the healthcare worker tries to regulate feelings such as anger, sadness, anxiety that have resulted from the stress. Emotion-focused coping has been correlated with higher levels of STS.

Prevention & Recovery

Organizational Practices

Robust organizational practices including the acknowledgement of STS are key to reducing both the stigma and silence around the impact of listening to traumatic stories.

Other methods to prevent and decrease exposure to secondary trauma can include:

| Education and Training | • Education on trauma-informed care including STS to prevent STS and retain healthcare workers  
| | • Trainings to develop an understanding of STS, identify symptoms, and learn prevention and reduction tools  
| Organizational Culture & Dialogue | • In addition, feeling supported and prepared to manage patient cases, particularly those with trauma histories, can reduce the negative impacts on healthcare workers and decrease the potential for STS.  
| | • Senior leadership recognition of STS as a challenge experienced by healthcare workers  
| | • Creating an organizational statement regarding trauma support and ways to access resources  
| | • Organizational encouragement and support of a healthy work-life balance and wellness, including encouraging regular leave  

<table>
<thead>
<tr>
<th>Supervision &amp; Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Regular peer support groups</td>
</tr>
<tr>
<td>• Supervisor trainings around issues of STS and staff support</td>
</tr>
<tr>
<td>• Regular individual supervisor support and STS evaluations</td>
</tr>
<tr>
<td>• Providing staff with time flexibility for self-care</td>
</tr>
<tr>
<td>• Debriefing protocols</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Workload Management</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Decreased exposure by dispersing high trauma cases among healthcare workers</td>
</tr>
</tbody>
</table>

Robust organizational practices including the acknowledgement of STS are key to reducing both the stigma and silence around the impact of listening to traumatic stories.

Individual Practices:
Self-care practices as well as social support are essential elements in preventing the development of STS. It is therefore recommended to identify and engage in replenishing self-care strategies that promote physical, emotional, and spiritual wellbeing with intentionality. Once you begin to routinely practice healthy self-care habits, they become part of your overall prevention plan. Not only do self-care practices strengthen your ability to cope while in the moment, but they can also help your body remember how to bounce back to a healthier state.

By focusing on building your strengths and carrying out self-care activities, you contribute to your behavioral, cognitive, physical, spiritual, and emotional resilience. The following strategies are helpful with building resilience:

<table>
<thead>
<tr>
<th>Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Focus on the four core components of resilience: adequate sleep, good nutrition, regular physical activity, and active relaxation (e.g., yoga, meditation, relaxation exercises).</td>
</tr>
<tr>
<td>• Get enough sleep or at least rest. This is of great importance, as it affects all other aspects of your work—your physical strength, your decision making, your temperament.</td>
</tr>
<tr>
<td>• Take regular breaks or leave away from work to allow your mind to rest.</td>
</tr>
<tr>
<td>• Create individual ceremonies or rituals. For example, write down something that bothers you and then burn it as a symbolic goodbye. Focus your thoughts on letting go of stress or anger or on honoring the memory, depending on the situation. These rituals can also help you set a boundary between work and home, for example changing clothes as soon as you get home, having a shower, or putting on a specific song just before work and when you leave.</td>
</tr>
<tr>
<td>• Be open to learning new skills to enhance personal and professional wellbeing. Brainstorm these with colleagues to learn what others are doing to take care of themselves.</td>
</tr>
<tr>
<td>• Seek professional support if you recognize that you are feeling overwhelmed or your symptoms are interfering with your ability to work or do your daily activities.</td>
</tr>
<tr>
<td>Cognitive</td>
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<td>----------------</td>
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<tr>
<td>Physical</td>
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<td>Spiritual</td>
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<td>Emotional</td>
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By focusing on building your strengths and carrying out self-care activities, you contribute to your behavioral, cognitive, physical, spiritual, and emotional resilience.

References


Moral Distress

Definition

Moral distress occurs when healthcare workers in humanitarian settings recognize the appropriate action to take but are unable to act accordingly. Moral distress occurs when healthcare workers must act in ways that are contrary to their personal and professional values, thereby undermining their sense of personal integrity and authenticity.

The scale and scope of humanitarian situations (including pandemics, natural disasters and wars) challenge the values, commitments and morals that are the foundation of healthcare and the professional identities and moral agency of health workers. In these situations, health workers are called upon to make impossible choices that cause conflict between their personal values and the realities of their situation. Potentially morally injurious events may arise from either action (for example, choosing to remove a patient from life-support equipment in order to provide another patient with care) or inaction (for example, failing to thoroughly sanitize due to a lack of supplies resulting in infection).

Moral choices are further complicated by the conflicting demands of work and families. By going to work each day they are not only putting themselves but also their families at risk, families that may include young children, elderly people and other higher risk individuals. Survivors guilt, a well-documented aspect of trauma response in military and other settings, manifest slightly differently in association with moral injury. Compounding the fear of getting sick is the potential for feeling guilty for surviving in the face of so much suffering and death.

Although the early theory underpinning Moral Distress comes largely from professional nurses working in relatively well-resourced contexts, more recent work focusing on the experience of health workers in humanitarian contexts draws on the work of military psychologists and the concept of Moral Injury. In the humanitarian setting both concepts resonate with the experience of many people who advocate for the needs of their patients on a daily basis in the face of overwhelming external stressors and constraints.

<table>
<thead>
<tr>
<th>Physical</th>
<th>Emotional &amp; Cognitive</th>
<th>Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Exhaustion</td>
<td>• Self-blame and guilt</td>
<td>• Avoidance of aspects of the job, or work in general</td>
</tr>
<tr>
<td>• Difficulty falling asleep</td>
<td>• Shame</td>
<td>• Emotional withdrawal from patients</td>
</tr>
<tr>
<td>• Difficulty staying asleep</td>
<td>• Anger and frustration</td>
<td>• Social withdrawal from colleagues</td>
</tr>
<tr>
<td>• Headaches</td>
<td>• Helplessness</td>
<td>• Resigning from work and leaving the profession</td>
</tr>
<tr>
<td>• Heart palpitations</td>
<td>• Intrusive thoughts</td>
<td></td>
</tr>
<tr>
<td>• Difficulty breathing</td>
<td>• Spiritual distress</td>
<td></td>
</tr>
<tr>
<td>• Increased general health complaints</td>
<td>• Demoralization</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Loss of sense of self-worth</td>
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</table>
Vicente is a psychiatric nurse who is passionate about his work with elderly people suffering from Alzheimer’s Disease and other forms of dementia. He knows he can make a difference, especially since the clinic where he works is in a poor neighborhood and is part of an underfunded health system in which few resources are made available for the elderly or for mental health care.

As is often the case, patients with dementia can become extremely agitated and even aggressive. He understands that sometimes, these patients need to be physically restrained for their own protection and for the protection of others in the vicinity. Although he doesn’t like this part of his job, he clearly recognizes that such restraint is necessary and in the patients’ best interest. For this reason, he is able to perform this part of his job with a clear conscience and his discomfort in the moment quickly passes as soon as the patient is sedated and calm.

What upsets Vicente much more is that at times his colleagues use bedsheets to keep patients in their chairs for many hours during the day, or in their beds at night. At times, he himself has resorted to this method of managing the people in his care and he feels ashamed of this. He believes that this kind of restraint is inappropriate, causes distress to patients, and he worries that it might even endanger the more physically frail patients as they try to free themselves.

Vicente raises this with his team supervisor who agrees with him but points out that they don’t have enough staff to watch all the patients all the time, and that they haven’t received sufficient medication to manage all the highly agitated clients chemically. He promises to take it up with the facility director. Sadly, over the six months nothing changes and the practice of restraining patients continues.

For months Vicente feels angry and frustrated every time he sees a patient struggling to free themselves and he starts to avoid going into the common patient area so he doesn’t have to see this. He also avoids his colleagues and supervisor, especially those who most commonly use this practice or tie the sheets too tightly. He lies awake at night worrying about this problem, rehearsing angry conversations with his supervisor and the director, but ultimately feels helpless when he realizes that there isn’t much that he or they can do to solve the problem. He is always tired, constantly irritable at work and at home, and pays less attention to his work. Gradually he feels himself withdrawing emotionally from his patients. He does his job but when they complain about the sheets, he pretends not to hear them. He always feels guilty when this happens but it helps him get through the day. One day, when an old-school friend offers Vicente a job, Vincente jumps at the opportunity, leaving behind the work that he was once so passionate about.

Research on moral distress among health workers in humanitarian contexts is limited. However, research from military and other healthcare contexts suggest the following risk factors for moral distress:

<table>
<thead>
<tr>
<th>Inability to forgive oneself</th>
<th>Increased use of substances: alcohol and legal or illegal drugs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loneliness</td>
<td>Self-harming behaviors including suicide</td>
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<tr>
<td>Depression</td>
<td></td>
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<tr>
<td>Survivor guilt</td>
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</table>

Vulnerability Factors

Research on moral distress among health workers in humanitarian contexts is limited. However, research from military and other healthcare contexts suggest the following risk factors for moral distress:
Ethical Climate

There is greater risk of moral distress in contexts where health workers believe that their managers and colleagues place insufficient importance on standards of patient care and ethical practice. When an organization’s general ethical climate is perceived by staff to be lax, the risk of moral distress is greater.

Lack of Agency/Power

Moral distress is closely linked with agency, the capacity to advocate for patients and to ensure that their rights are protected. For this reason, health workers who witness patient suffering and death, but have little or no power to influence decisions feel greater moral distress. Who does and does not have the social power to influence decisions and policies varies greatly between contexts and between organizations. However, in many cases, greater power is located with some professionals (for example, doctors and psychiatrists), some roles (for example, senior administrators and managers), ex-patriate workers, white people, and men. Health workers who do not fall into these categories, might have less capacity to influence patient care and may be at greater risk of moral distress.

Age

Older health workers and workers who have more experience in their roles report moral distress more frequently, but the intensity of distress they describe is less than that described by their younger and less experienced colleagues. This suggests that some health workers find a sustainable compromise between the realities of their work contexts, and their personal and professional moralities. Less experienced colleagues may still be struggling with these internal conflicts and so report more intense distress as a result.

Patient Factors

Patient factors are also important predictors of moral distress. Health workers who work predominantly with children and young adults are at greater risk of moral distress, than those that work with geriatric populations. Risk of moral distress is also greatest when patients are experiencing a high level of suffering and little can be done to relieve their pain and distress.

Role of Blame

When health workers experience blame for poor health outcomes as expressed by patients, family members, colleagues, supervisors, members of the community, and on social or mainstream media, the risk of moral distress is greatly increased.

**Organizational Practices**

Responsibility for preventing and responding to moral distress in health workers lies in large part with the institutional structures within which these people work. Good practices include:

**Organizational Culture**
Facilitate the development of organizational culture that foregrounds ethical work and quality care
| Supplies & Equipment | As humanitarian conditions allow, ensure that health workers have:  
|• Medical supplies and equipment necessary to provide the appropriate services.  
|• Equipment that they need to provide such services without increased risk to themselves and their families. |
| Protocols | Develop clear protocols for patient-care decision-making and responsibility, and ensure that:  
|• Decision-making is appropriately shared  
|• Decision-making protocols are communicated to, and understood, by all staff |
| Management Support | Managers should proactively:  
|• Monitor adherence and correct departures from decision-making protocols  
|• Manage conflict relating to patient-care decisions  
|• Interrupt the expression of blame for patient outcomes outside of appropriate ethical channels  
|• Provide positive reinforcement for adherence to protocols regardless of patient outcomes |
| Communication | Communicate frequently and transparently with staff about the current and future availability of medical supplies, equipment and protective equipment  
|• When facing shortages in equipment and supplies, invite health worker participation in problem-solving and decision-making. |
| Emotional Support | Offer emotional support early and often to health-workers who have lost patients or colleagues. |

**Individual Practices:**  
Fundamental to creating a fulfilling career in healthcare in humanitarian settings is understanding and learning to manage moral distress. Here are some things that other health workers and the research suggest might be helpful:

| Acceptance & Focusing on Positives | • Recognize and accept that compromise is an unavoidable part of work in humanitarian settings and that this can be extremely difficult. Note that this does not mean that you shouldn’t advocate strongly on behalf of your patients or accept unethical practice from your colleagues. But it does mean accepting that not all things are possible in all situations. Allow this acceptance to become part of the values and principles that sustain you in your work.  
| | • Without avoiding or ignoring problems learn to focus your attention in ways that help you to be effective and healthy at work. One of the ways to do this is to make sure that you do the things you can do for patients to the absolute best of your ability. Sometimes going the extra mile in being kind to a patient can help us feel better about all the things that we may not be able to do for that person. |
| Collaboration, Cooperation & Support | • Work actively with team members, supervisors and managers to find solutions to the challenges that affect the quality care. When you are actively engaged in problem solving you are less likely to be impacted by moral distress.  
• Recognize that the challenges in providing health services in humanitarian settings with limited resources are complex and that problem-solving conversations can become conflictual. Work hard to remember that everyone wants the same positive outcomes and try to see the problem from the perspective of people whose role is different to yours. Proactively seek out more experienced colleagues and initiate conversations about moral distress. Find out how they think about these problems and cope with the negative feelings associated with moral distress. Such conversations serve the functions of (a) reducing your risk of moral distress and providing support, and (b) offering support and understanding to colleagues.  
• If you notice that the quality of your work or personal life is suffering because of issues of moral distress, reach out for professional support. It is always better to get help sooner than later. |
| Self-Care | • Continue to develop your self-awareness (for example through mindfulness and reflection practices) to deepen your conscious awareness of the internal moral conflicts that are causing your distress.  
• Seek out the guidance of spiritual leaders and mentors to help you make sense of the moral conflicts that are part of this work. |

Fundamental to creating a fulfilling career in healthcare in humanitarian settings is understanding and learning to manage moral distress.

**References**


Compassion Fatigue

**Definition**

Most healthcare providers enter the field with the intent to help others and provide empathic care for patients with critical physical, mental, emotional, and spiritual needs. Healthcare providers, however, can be impacted by the continuing stress of meeting the often overwhelming needs of patients and their families which may result in compassion fatigue. Compassion fatigue affects not only the healthcare provider in terms of job satisfaction and emotional and physical health, but also the workplace environment by decreasing productivity, the quality of the work and patient satisfaction and increasing turnover.

Compassion fatigue affects not only the healthcare provider in terms of job satisfaction and emotional and physical health, but also the workplace environment by decreasing productivity, the quality of the work and patient satisfaction and increasing turnover.

Compassion fatigue (CF) results in a decreased ability to cope with the everyday environment. It has been defined as a state of emotional distress and exhaustion and biological, psychological and social dysfunction resulting from:

4. Compassion stress
5. Chronic demands associated with caring for patients in significant emotional and physical distress, such as individuals that have experienced trauma.
6. Secondary traumatic stress (STS) combined with cumulative burnout. STS is the result of exposure to a patient’s traumatic experiences and cumulative burnout is a result of work related stressors that bring about feelings of frustration, a sense of loss of control, and decreased morale¹, ², ³.

The presence of STS and/or burnout can increase the likelihood of developing compassion fatigue.

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<tr>
<th>Physical</th>
<th>Emotional &amp; Cognitive</th>
<th>Behavioral</th>
<th>Work Related</th>
<th>Spiritual</th>
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</thead>
<tbody>
<tr>
<td>• Headaches</td>
<td>• Mood swings</td>
<td>• Excessive use of substances: nicotine, alcohol, illicit drugs</td>
<td>• Avoidance or dread of working with certain patients or colleagues</td>
<td>• Questioning the meaning of life</td>
</tr>
<tr>
<td>• Digestive problems: diarrhea, constipation, upset stomach</td>
<td>• Restlessness</td>
<td>• Isolation/Introversion</td>
<td>• Loss of purpose</td>
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<tr>
<td>• Muscle tension</td>
<td>• Anger and irritability</td>
<td>• Increased interpersonal conflict</td>
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<td></td>
<td>• Oversensitivity</td>
<td>• Pessimism</td>
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<td>• Anxiety</td>
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<td>• Depression</td>
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Secondary Trauma + Burnout = Compassion fatigue¹
### Vulnerability Factors

- Sleep disturbances: difficulty falling or staying asleep, increased sleep, nightmares
- Tiredness & Fatigue
- Cardiac symptoms: chest pain/pressure, palpitations, tachycardia
- Increased incidents of illness or accidental injury
- Anger and resentment
- Loss of objectivity
- Memory issues
- Poor concentration and focus
- Impaired judgment
- Reduced empathy
- Hyperarousal/Excessive alertness
- Difficulty with decision making
- Inability to separate personal from professional life
- Moodiness
- Hypervigilance
- Increased startle response
- Reduced ability to feel empathy towards patients or their families
- Frequent use of sick days
- Absenteeism
- Loss of or decreased joy and satisfaction in work
- Decreased ability to care for patients
- Loss of productivity
- Reduced standards of care
- Clinical mistakes in patient care
- Feelings of incompetence and inefficiency
- Lack of self-satisfaction
- Anger at God,
- Questioning religious beliefs
- Loss of faith
- Skepticism

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**Case Example**

Noor attended nursing school and planned a career in cardiac nursing. After graduation, she began working on a busy unit in which several patients experienced multiple admissions to the unit. Noor was excited about her work and rarely took breaks during the workday. Her investment in her patients’ wellbeing manifested in long work hours and in her trying to provide emotional support to patients’ family members. She quickly gained the skills needed to work on this unit and was promoted to a leadership position within the unit.

Within a short time span three of Noor’s primary patients died. Her workload remained intense and Noor began viewing her work as drudgery. She could barely arrive at work on time and avoided working with patients whose illness required more demanding care. Noor’s co-workers observed her changing behavior as she struggled to find a work-life balance. This changing behavior was also noticed by the nurse manager who attempted to adjust Noor’s schedule to work shorter shifts. However, this new schedule did not decrease Noor’s over involvement with certain patients and their families. Noor also continued to care for patients with end-of-life, cardiac disease processes. Eventually, Noor left her position to pursue less stressful work.

(Case example adapted from: Lombardo, B., Eyre, C. (2011). Compassion Fatigue: A Nurse’s Primer. OJIN: The Online Journal of Issues in Nursing, 16 (1), Manuscript 3.)
Vulnerability factors for compassion fatigue can result from several areas, the first being a combination of empathy and a lack of boundaries. It is essential for healthcare providers to have an empathetic relationship with their patients but if this is combined with a lack of boundaries, compassion fatigue can result.

Empathy requires that the provider understand, both emotionally and cognitively, the experience of their patient and be able to communicate this understanding. This brings the provider closer to the patient but it can result in them more directly experiencing the patient’s distress\textsuperscript{5}. Healthcare providers who are not able to find a balance of sufficient empathy with their patients and sufficient protective boundaries for their own emotions are more vulnerable to compassion fatigue.

Additional factors that have been identified as increasing vulnerability for compassion fatigue include: \textsuperscript{3, 5}.

| Working Environment & Workload | • A high intensity workload  
|                               | • Physically and emotionally demanding assignments  
|                               | • Additional workdays  
|                               | • Task repetitiveness  
|                               | • Perceived lack of control in the workplace/work  
|                               | • Low job satisfaction  
|                               | • Unclear outcomes or successes at work  
| Work/Life Balance             | • Inadequate rest time during the workday and leave from work  
| Lack of Support               | • Lack of meaningful recognition  
|                               | • Poor managerial support  
| Personal Self-Care            | • Poor personal resilience and coping capacities  

Self-care practices can help prevent the development of CF. It is therefore recommended to identify and engage in replenishing self-care strategies that promote physical, emotional, and spiritual wellbeing with intentionality. Once you begin to routinely practice healthy self-care habits, they become part of your overall prevention plan. Not only do self-care practices strengthen your ability to cope while in the moment, but they can also help your body remember how to bounce back to a healthier state\textsuperscript{3, 6}.

By focusing on building your strengths and carrying out self-care activities, you contribute to your behavioral, cognitive, physical, spiritual, and emotional resilience. The following strategies are helpful with building resilience:
| Behavioral | • Focus on the four core components of resilience: adequate sleep, good nutrition, regular physical activity, and active relaxation (e.g., yoga, meditation, relaxation exercises).  
• Engage in practices that build team cohesiveness. For example, engage with your fellow workers to celebrate successes and mourn sorrows as a group.  
• Reduce workload intensity and repetitiveness and integrate variety into your work, where possible.  
• Seek a mentor, supervisor, or experienced healthcare colleague who understands the norms and expectations of your work and may assist in identifying strategies that will help you cope with the current work situation, by enhancing the work environment and promoting work-life balance (e.g., changing the work assignment; recommending time off or reducing overtime hours; encouraging attendance at a conference; or becoming involved in a project of interest).  
• Take time away from work when possible.  
• Try to find things to look forward to, even if they are small.  
• Nurture positive personal and professional relationships and develop social support. Make time to communicate and spend time with friends and family.  
• Seek professional support  
• Be open to learning new skills to enhance personal and professional wellbeing. |
|---|---|
| Cognitive | • Take time to be alone so you can think, reflect, practice grounding and rest.  
• Challenge any negative internal dialogue and focus on changing negative automatic thoughts and beliefs to reflect a more positive outlook. |
| Physical | • Get enough sleep or at least rest. This is of great importance, as it affects all other aspects of your work—your physical strength, your decision making, your temperament.  
• Drink enough fluids to stay hydrated throughout the day, and eat a balanced, healthy diet. |
| Spiritual | • Try to spend time in nature regularly.  
• Build self-awareness capacities (e.g., through mindfulness, reflection practices)  
• Practice your spiritual beliefs or reach out to a faith leader for support. Find meaning or purpose in your daily activities and use strategies to remind yourself of the meaning of your work such as putting a reminder in your phone or a note on your desk. |
| Emotional | • Make time to learn about the people with whom you work. Taking time for conversations will help foster feelings of positive regard toward yourself and others.  
• Create individual ceremonies or rituals. For example, write down something that bothers you and then burn it as a symbolic goodbye. |
Focus your thoughts on letting go of stress or anger or on honoring the memory, depending on the situation. These rituals can also help you set a boundary between work and home, for example changing clothes as soon as you get home, having a shower, or putting on a specific song just before work and when you leave.

- Practice self-compassion.

By focusing on building your strengths and carrying out self-care activities, you contribute to your behavioral, cognitive, physical, spiritual, and emotional resilience.

Lastly, compassion satisfaction (CS) refers to the sense of fulfillment you feel from the work you do. It can be a source of hope and physical and emotional resilience. CS, which can be developed with intentionality, serves as a protective factor against CF. Refer to the handout ‘Compassion Satisfaction’ for a definition and discussion on CS.

**References**

Annex 2: Handouts on Fundamental Skills for Self-Care
Better sleep

Introduction

All of us can experience moments of sleep disturbance or problems sleeping well for a variety of reasons including stressful events during the day, anxiety problems, trouble at work or in our private life. Those who work in humanitarian settings may be particularly vulnerable to developing sleep disorders. Working in intensive, high risk or unpredictable environments with traumatized clients can create conditions such as secondary or vicarious trauma and burnout, where affected sleep is a common experience. Furthermore, we may consider sleeping well a luxury and/or feel guilty because refugees or other populations we are working with cannot. This can result in underestimating our need for a good sleep.

Getting enough sleep is vital for mental and physical health, and it is necessary to help our bodies to recover and regenerate. Good sleeping is composed of two aspects: duration and continuity. Most adults, need to sleep an average of 8 hours and if sleep is frequently disrupted, it interferes with our natural sleep cycle.

All research agrees that a good amount of sleep is also necessary to improve learning, memory and stabilize our mood, while lack of sleep can affect us in many ways. Immediately following a poor night’s sleep, there may be reduced concentration or low energy. Over time, a lack of sleep can have an impact on all body systems increasing the risk of developing chronic conditions such as diabetes, depression, heart disease, stroke and other systemic problems.

Getting enough sleep is vital for mental and physical health, and it is necessary to help our bodies to recover and regenerate.

<table>
<thead>
<tr>
<th>Signs you have sleeping problems</th>
<th>Signs you are sleeping well</th>
</tr>
</thead>
<tbody>
<tr>
<td>Waking up tired or feeling slow</td>
<td>Waking up feeling refreshed in the morning</td>
</tr>
<tr>
<td>Taking more than 30 minutes each night to fall asleep</td>
<td>Having lots of energy during the day</td>
</tr>
<tr>
<td>Consistently waking several times each night and then having trouble falling back to sleep, or waking too early in the morning</td>
<td>Feeling clear-headed</td>
</tr>
<tr>
<td>Difficulty focusing or maintaining attention during the day</td>
<td></td>
</tr>
<tr>
<td>Feeling ‘foggy’ or down as well as concentration and memory problems</td>
<td></td>
</tr>
<tr>
<td>Easily angry or irritable</td>
<td></td>
</tr>
<tr>
<td>Desire to sleep or falling asleep during the day</td>
<td></td>
</tr>
</tbody>
</table>

In order to have healthy and refreshing sleep, there are some actions you can take and others you can avoid. Here is a Checklist to help you have a better night’s sleep:

**Do**

- **Routine**: Create your own routine. For example, a small ritual you can do before going to sleep, such as switching off all electronic devices, saying good night to loved ones, wearing comfortable clothes, listening to music or talking calmly with someone can help with sleep.
- **Close the work window**: Stop working or thinking about work at a planned time. For some people, preparing a plan or a schedule for the next day is helpful in having a clear idea of what it is expected the next day.
- **Sleep environment**: Minimize environmental factors that can disrupt your sleep as much as possible. For example, create a dark and quiet room or have a friend or a family member with you if that is what you prefer. Consider using ear plugs or a sleep mask. Check the temperature of the room is comfortable for you. As much as is possible use comfortable and supportive pillows and mattress.
- **Use your bed for sleeping**: It is preferable to use the bed just for sleeping and not doing other activities such as watching TV, using a laptop or eating. In this way, you associate the bed with sleep.
- **Get up if you can’t sleep**: If you do not fall asleep within 20-30 minutes, get up and do something relaxing outside of the bedroom and return to bed when you feel tired. This might include a relaxation exercise. Avoid watching the clock when you are struggling to sleep.
- **Relaxation techniques**: If you need to stay in bed, then use some relaxation exercise such as breathing, grounding or progressive muscle relaxation (see handouts).
- **Daily exercise**: Do some daily exercise for around 30 minutes to raise your heart rate. Avoid, however, heavy exercise just before bed as this can actually wake your body up. It’s better to do some gentle and relaxing exercise such as stretching.
- **Reading**: Some people find it useful to read a book before sleep.
- **Sleep schedule**: Define a sleep schedule and try to stick to it as much as possible. For example going to sleep and wake up every day at the same time.

**Avoid**

- **Screens**: Switch off all electronic devices, computers, smartphones, tablets, and video games around 1 hour before going to sleep. Such devices stimulate your nervous system, the opposite of what you need to sleep. For the same reason it is better not sleep with the TV or laptop screen on.
- **Food**: Avoid heavy meals right before going to sleep as this requires your body to work hard to digest the food. If you need to eat before bed, a small snack would be better.
- **Caffeine**: Avoid caffeine and other stimulants before going to sleep, such as black tea, coffee, chocolate or energy drinks. It is preferable to stop such liquids a few hours earlier.
- **Stressful Television/Social Media**: Avoid watching or listening to news, television programs or social media that you find stressful before going to sleep, particularly if you are living in a conflict zone or high stress area.
Daytime napping: It can be helpful to resist sleeping during the day as your body will then be more tired at night.

Sleep Positions

Pain or discomfort is a common contributing factor to poor sleep. Below are some simple suggestions on positioning which may help create more comfort and allow you to have a better night’s sleep.

**Sleeping on your side**
Placing a pillow between your legs can help to prevent back and hip pain that comes from twisting at night.

**Sleeping on your back**
Place a pillow under your knees and under your head to support your neck. You can also place a small, rolled towel under the small of your back.

**Sleeping on your abdomen**
This position can be particularly hard on your back. To help lessen the stress on your back you can place a pillow under your hips. You can also use a pillow under your head if it is comfortable to do so.

Where you have limited pillows, a rolled up towel or small cushion can be used instead.
References & Further Reading

1. Healthy Sleep In Adults, American Thoracic Society
2. How to get to sleep; NHS (National Health Service – UK) - https://www.nhs.uk/live-well/sleep-and-tiredness/how-to-get-to-sleep/
Work-Life Boundaries

**Introduction**

Many people in caring professions, including healthcare professionals, struggle to set boundaries between work and personal life. The need for services does not end at 5pm and it is not possible to resolve every difficult situation a caring professional encounters. It can feel natural to work long hours or to continue thinking about work after returning home. Many people in caring professions do this type of work because they feel it is a calling or a mission and the work gives their life purpose. This sense of meaning can be an important contributor to our feeling of compassion satisfaction. However, without good boundaries that give our bodies and minds a chance to rest, the resulting overwork and boundless emotional investment can impact our bodies, minds and relationships negatively.

The purpose of setting boundaries is to achieve balance between our commitments to work, to our family and friends, and to ourselves. By keeping our social support networks and our personal resources healthy, like a fully-charged battery, this allows us to be our most focused, energetic selves at work and enables us to provide consistent, quality care without burning out. There are 168 hours in the week: we need to determine how we divide this time between work, social and personal needs so that we can remain healthy. Your healthy life balance may change over the course of your life, as your roles at work change, and as your family status and commitments change. Personal events, such as an illness or the loss of a close other, may also temporarily change your balance, as you may need to devote more time to taking care of yourself and have less energy to direct at work. This is normal. Professional events may also shift our balance temporarily, such as a crisis or disaster which increases the workload. It is important to be aware of our balance and how it is being affected, so that we can be mindful of the need to return to our healthy boundaries once the acute event has resolved.

**Steps**

By keeping our social support networks and our personal resources healthy, like a fully-charged battery, this allows us to be our most focused, energetic selves at work and enables us to provide consistent, quality care without burning out.

**Boundaries at work**

It can be difficult to set boundaries within the workplace, especially when you see your colleagues not doing this well. There may even be a culture of “heroism,” or self-sacrifice and pushing yourself to the limit to gain attention and respect. It takes courage to advocate for yourself, and it may feel selfish or even weak. It is important to remember that a lamp that burns moderately but constantly is more useful and effective than one that burns brightly and then goes out. Self-care is the opposite of selfishness or weakness: You can do your best service to your organization, your colleagues and those you care for if you set good boundaries and take care of yourself so that you are able to do your work consistently and sustainably. To do this, it is necessary to say no when you need to. This could take the form of saying no to additional work or duties that will overload you, or setting clear times of the day/week when you will not be checking your email or phone (you can even turn on an automated response during these times).
This could also take the form of actually using your vacation time and making sure that you completely disconnect from work during this period so that you can return to work re-energized.

**Boundaries at home**

It may not be possible to the healthcare professional you want to be AND be the spouse/parent/child/sibling/friend you want to be all the time. There will be times when more of your energy and mental and emotional capacity need to go to work, and times when it needs to be more directed in your personal life. When you have to put more focus on work, communicate this clearly to your loved ones and your social network. Make a plan for what duties you have at home that you will need help with at this time, and, if possible, give your loved ones a timeline for when they can expect your balance to shift back to what it normally is. It can be helpful to plan leave days following the end of your intensive work period, if this is predictable, so that you can spend quality time with your loved ones to regain balance. It is also important that you get personal time to have your own needs met in order to be an effective healthcare worker and family member. This means recognizing, accepting and making time for your physiological needs: sufficient sleep, nutritious food and regular exercise. It also means recognizing, accepting and making time for your emotional and spiritual needs: activities that enrich your life, spending time outside in nature, following your spiritual practice (if you have one), and connecting to a creative outlet such as listening to or playing music, reading or writing, drawing, building, gardening, etc. It is important to prioritize yourself and your own needs sometimes; this is a key part of staying healthy.

**Boundaries between work and home**

Our healthcare professional mode (efficient, focused, non-emotional) serves us well at work, but it is often not as useful in our personal life and can even cause tension in our relationships. To help your mind and body shift from “work mode” to “personal mode” it is important to create symbolic boundaries between work and home. This is like building a switch in your brain: you can imagine a light switch, where you can turn your healthcare professional self “on” at the beginning of your work day and “off” at the end of your work day when you reach home. These symbolic actions send subconscious signals to your brain and body that it is time to make a shift. To do this it is helpful to build a ritual that you do as you begin work and another ritual that you do at the end. It is important to practice these rituals regularly to calibrate your mind and body.
Important factors in a boundary ritual are:

**Designate a dedicated working space**
- It is better if this is a separate room in your house, but if that is not possible, set up a corner where you have all of your work materials and where you do the majority of your work. This helps to set a spatial boundary between work and personal life.

**Try to dress for work**
- Changing your clothes helps you enter the mindset of working and changing again at the end of the day helps you enter the mindset of home. This helps to set a psychological boundary between work and personal life.

**Establish a routine**
- Organize your day into chunks of hours designated for work and other home activities. Set limits to your work hours so that you are not working 24 hours per day. Plan breaks, including meals (away from your desk), with both social time and personal time. This helps to set a time boundary between work and personal life.

**Practice Boundary Rituals**
- It may not be practical to practice a boundary ritual every time, but have little habits or things you say to yourself as you switch, for example: “I am a parent now” as you move from your workspace to your personal space, or “I am a healthcare professional now” as you move from your personal space back to your work space.

---

**Boundaries when working from home**

Working from home presents some challenges to maintaining boundaries between work and personal life. You are now working in the same space that you live in, and you may have to switch back and forth between work-mode and personal-mode more frequently throughout the day.

The following actions are helpful to establishing healthy boundaries in a work-from-home environment:

<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
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<tbody>
<tr>
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<tr>
<td><strong>Try to dress for work</strong></td>
<td>Changing your clothes helps you enter the mindset of working and changing again at the end of the day helps you enter the mindset of home. This helps to set a psychological boundary between work and personal life.</td>
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</tr>
<tr>
<td><strong>Establish clear, shared rules</strong></td>
<td>If you live with others, discuss and establish clear, shared rules for your work time and space to prevent disruption. This helps to set a social boundary between work and personal life.</td>
</tr>
<tr>
<td><strong>Establish a routine for home task sharing with others in your household</strong></td>
<td>This will help to ensure that your responsibilities are clear and you can schedule them appropriately. Plan your work time when there are fewer household tasks, and your household tasks when you do not have urgent work activities. This helps to set a time boundary between work and personal life.</td>
</tr>
<tr>
<td><strong>Set realistic goals for yourself</strong></td>
<td>Small, achievable goals with respect to your work as well as small, achievable goals for your personal life focused on the question “what can I achieve today?” helps to build a sense of accomplishment. Separate goals in each domain (work, social, personal fulfillment) helps to set a psychological boundary between work and personal life.</td>
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</tbody>
</table>

**Tips**

- Remember that setting and keeping your work and personal life boundaries is a process. There are times this will be easier and times it will be harder, and that is completely normal.
- Prioritize the things that you value and plan for them.
- Give yourself time just to be present in the moment; not busy with any task or running from one place to another.
- Practice self-care, using small actionable steps so that you are able to do them regularly.

**References & Further Reading**

Breathing

When we start to feel anxious, upset or uncomfortable, our breathing is one of the first things that changes. It usually becomes faster, shallower and less smooth. This happens in response to a release of chemicals in our bodies which are preparing us to deal with a threat. Therefore, the change in our breathing is a signal to our brains that something is wrong. By noticing the change in our breathing, recognizing that there is no present threat, and making a conscious change in our breathing rate and depth, we can signal our brains and bodies that we are safe, which allows our whole system to calm down. This is called regulation.

This type of deep, slow breathing is called diaphragmatic breathing, or belly breathing. It is called this because it uses a muscle that stretches between our lungs and our abdomen, and which helps to expand and contract our lungs and sends the message to our brain to calm our body down. Breathing in this way is a simple, but powerful exercise for our physical and mental health.

Breathing in this way is a simple, but powerful exercise for our physical and mental health.

<table>
<thead>
<tr>
<th>Steps</th>
<th>Description</th>
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<tbody>
<tr>
<td>Step 1: Find a comfortable position that allows your chest to feel open and not constricted</td>
<td>This could be standing with your feet hip-distance apart, shoulders rolled back and arms hanging comfortably at your side. It could be sitting comfortably with your feet on the ground and your back supported by the chair. It could also be lying down on your back on a flat surface and your knees bent, feet flat on the floor. Begin by becoming aware of your body, particularly any areas of tension, as well as the points of contact between your body and the floor.</td>
</tr>
<tr>
<td>Step 2: Place one hand gently on your stomach and one hand gently on your chest</td>
<td>Now bring your attention to your breath. Notice the speed of your breath. Is the hand on your chest moving up and down as you breathe? Is the hand on your belly moving? Most people will find at this stage that the hand on their chest is moving more than the hand on their belly, and their breath is relatively fast.</td>
</tr>
<tr>
<td>Step 3: Now focus on bringing more of your breath into your stomach</td>
<td>Inhale as smoothly as possible. Inhale through your nose and feel the air moving all the way down to your stomach so that your hand rises as your stomach extends. See the diagram below. You can imagine your stomach as a balloon filling with air as you inhale. When it is full, allow your stomach to recede as you breathe out as smoothly as possible, emptying it of air. You may choose to exhale either through your nose or your mouth. Pause, then inhale again, bringing air all the way down into your stomach. You may notice that you are able to inhale for longer this time, bringing</td>
</tr>
</tbody>
</table>
more air into your body. Although when you first try this exercise, it may feel strange and less comfortable because your muscles are moving in a new way, and we may not be used to slowing down and relaxing, but with each breath it should feel more natural and easier. You should notice that with this type of breath, the hand on your stomach moves more than the hand on your chest. You may also notice your breath slowing down as they get deeper.

<table>
<thead>
<tr>
<th>Step 4: Continue breathing like this for at least five breaths</th>
<th>Notice how you feel after practicing diaphragmatic breathing.</th>
</tr>
</thead>
</table>

Try to practice diaphragmatic breathing for at least 5 breaths, three times per day.

Some people find it useful to:

- **Count in their head** as they inhale and exhale. A common count is inhale for four, exhale for four, pause for two.
- **Imagine a triangle** as they breathe, where their inhale moves them up one side of the triangle, their exhale moves them down the other side, and the brief pause between breaths is the bottom of the triangle.
- Imagine as they inhale that they are breathing in **cool white light**, and as they exhale, they are breathing out hot dark heaviness.

**Breath and pain:** When we anticipate pain, we tend to hold our breath, which actually can increase the sensation of pain as we tense the muscles around that place. Focusing on our breath can help move our mind’s focus away from pain and help the painful area relax, which reduces the sensation of pain. You
can also imagine breathing in care and warmth to the area of your body that needs it and exhaling the pain and tension.

References & Further Reading

3. https://uhs.berkeley.edu/sites/default/files/breathing_exercises_0.pdf
Intentional Avoidance and Focus

Introduction

An amazing ability that may be unique to humans is the ability to think about our own thinking. This ability gives us some powerful tools for managing the ways we respond to distressing and exhausting experiences, including our work.

One of these tools is the ability to notice which aspects of our world are receiving the greatest part of our attention, and which aspects we are giving less attention to. Remember that our world includes both our external world (the environment, people, noises and other things around us) and our internal world (the feelings in our bodies, our thoughts and feelings). Are we focusing on the things in our worlds (both external and internal) that inspire and refresh us? Or are we focusing on the things that add to our unhappiness and tiredness?

Note

Intentional avoidance and focus are not the same as denial or avoidance. Denial is when we pretend to ourselves that serious problems are unimportant and so do nothing about them. Avoidance is when we fail to solve serious problems because we are afraid of conflict, feel embarrassed, or for other reasons. Intentional avoidance and focus are not about avoiding or denying our problems.

Intentional avoidance means that we intentionally reduce the amount of attention that we are giving to unimportant things that add stress and unhappiness in our working lives. Focus is about making sure that we do give attention to those aspects of our lives that make us feel good about our work and about our lives. Below are two different tools that you can practice to help you become more aware of how you are directing your attention, and how to intentionally shift that focus to increase your compassion satisfaction, and decrease the risks of burnout, secondary trauma, and moral distress.

“Switching Off” and “Switching On”

Many people who work in stressful jobs that bring them into contact with suffering find it useful to prepare themselves emotionally before entering their workplace. Sometimes this is called “switching off” as it involves reducing our emotional vulnerability to the world. To intentionally “Switch Off” before entering work, a particularly difficult space or duty, you can make use of your thoughts, images, and actions.
Every person uses different thoughts, images and actions depending upon their personalities, beliefs and culture. Experiment with different ideas until you find something that works for you. At the end of the day it is important to use the same process to “Switch On” again.

Consider the example of Lela, an orthopedic nurse who works with children. It is very difficult to see small children struggling with pain and immobility, and she knows that witnessing their suffering every day can have a negative impact on her life. She intentionally uses the switch to help her during the day (switching off). Before she enters the rehabilitation unit where she works she pauses for a minute and does three things.

1. She repeats to herself “I have a deep pool of strength within me that flows from God” (thought).
2. She closes her eyes and visualizes a pool of golden, energy-filled, liquid like honey (image).
3. She pins a large badge with a smiley face to her clothes (action). It makes the children smile, but it also reminds her that she is about to start work.

As Lela does these things, she focuses on the feelings of calm competence and relaxation that flow from this quiet moment before starting work. When she has opportunities during the day for a short break she will intentionally use the thoughts and image to refresh her focus on her inner strength and resilience.

When Lela finishes work, she uses the switch again to switch back on before she goes home to her husband and children (switching on). Again, she uses, thoughts, images and actions to intentionally switch her focus.

1. She repeats to herself “I am a human being who thrives in loving relationships” (thought).
2. She closes her eyes and visualizes a beautiful flower growing in a warm, soft rain (image).
3. She takes off the large badge with the smiley face, a signal to herself that she is done with work for the day. (action)

As Lela does this she allows herself to feel the tiredness that has built up over the day and looks forward to returning to her family and home.

<table>
<thead>
<tr>
<th>Thought</th>
<th>Image</th>
<th>Action</th>
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<tbody>
<tr>
<td>• You might have a particular phrase that you repeat to yourself in your head (thoughts)</td>
<td>• You may have a picture that you hold in mind (image)</td>
<td>• There may be certain actions that you intentionally use to prepare yourself for the difficult work that lies ahead.</td>
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</table>
It is essential that there are always two switches. Nobody can be “Switched On” or “Switched Off” all the time. We need time when we focus on our inner needs and allow ourselves to be nurtured by those around us, and there are times when we are at work and we need to focus on the needs of others. The skill is to intentionally manage the switch between these two ways of interacting with the world. Like all skills, this takes practice.

“Tuning Out” and “Tuning In”

The human brain is designed to pay special attention to unpleasant parts of our environment. This is because these unpleasant sensations are often warnings of danger and we need to pay attention to stay safe. Of course, there are many unpleasant sensations in our workplaces that are not actual danger signals, they are merely constant unpleasant irritations – irritating noises, bad smells, overly bright lights, a nagging pain in our back. These unpleasant aspects of our work environments add a great deal of stress to our day and unfortunately our brains are still drawn to give them extra attention. As a result, these small irritations can end up taking up much more space in our experience of the world than they deserve.

However, because of our special ability to think about our own thinking, it is possible to make ourselves more aware of these patterns and to change them. To do this, try the following steps:

1. Make a list of the unpleasant sensations in your work environment that add to your daily stress
2. There might be some things on that list that you can fix, in which case do so and cross them off the list
3. But there will be some things that you just cannot change, so start to pay attention when one of those irritating things is constantly drawing your attention and adding to your stress
4. When you notice this happening, intentionally work on focusing your attention away from the unpleasant sensation (tuning out) and towards something that is associated with good feelings (tuning in)
5. As you practice this you will find that you can take more and more control over some of the stressful aspects in your work environment

Note: Make sure that you never tune out actual warning signals like those from medical monitors.

References & Further Reading

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2. How to Reframe Situations So They Create Less Stress
3. Improve Your Life by Paying Attention
   https://fs.blog/2013/10/improve-your-life-by-paying-attention/
4. Quick Stress Relief
5. Why Attention Matters for Stress Management & How to Train it
   https://www.stressresilientmind.co.uk/articles/why-attention-focus-key-for-stress-management
Grounding techniques

Grounding is set of helpful strategies that can be utilized when we are feeling overwhelmed or in distress. Grounding helps to reorient the mind and body, bringing you back into the present moment where you can experience a current state of safety and move away from symptoms of distress. The distress and anxiety you are feeling may be a result of painful memories of a traumatic experience (included secondary traumatization) or simply an intense and challenging emotion. Grounding is an effective way for you to calm you down, regain a sense of control, and also improve your capacity to tolerate uncomfortable feelings.

Grounding is an effective way for you to calm you down, regain a sense of control, and also improve your capacity to tolerate uncomfortable feelings.

Note
Grounding is a short-term technique to manage discomfort and regain self-control in the here and now when feeling overwhelmed or anxious. It isn’t a replacement for therapy which can help to address the underlying issues that may be causing the feelings of overwhelm and anxiety.

General Grounding Guidelines
The objective of grounding is to calm your thoughts and feelings by calming your body when you are experiencing distress. For example, imagine a stormy day where the clouds are thick and there is thunder. Our worries can feel like this. They can feel like thick clouds that surround us. Grounding helps the clouds to break up and the sun to shine through. We begin to feel calmer and the storm passes. Some general guidelines to follow for grounding include:

<table>
<thead>
<tr>
<th>Where</th>
<th>You can practice grounding anywhere</th>
</tr>
</thead>
<tbody>
<tr>
<td>When</td>
<td>Grounding can be done anytime you are triggered by a negative emotion. It can also be used as a general calming technique to bring you back to the present moment.</td>
</tr>
<tr>
<td>How</td>
<td>Grounding can be done in a variety of ways but the key element is to shift attention to feeling your feet on the ground, feeling supported by the earth (or floor or a chair or mat where you are sitting). This reorients the mind and body to a current state of safety and away from symptoms of distress.</td>
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Playing with the five senses
A simple way to practice grounding is to involve your five senses.

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<tr>
<th></th>
<th>Preparation</th>
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<tbody>
<tr>
<td></td>
<td>• First, find a space that is calm, and you can sit comfortably.</td>
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<tr>
<td></td>
<td>• Take a few deep breaths and notice your breathing.</td>
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<table>
<thead>
<tr>
<th></th>
<th>What do you see</th>
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<tbody>
<tr>
<td></td>
<td>• Next, look slowly around in the room that you are in and begin to notice what is around you.</td>
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<tr>
<td></td>
<td>• What do you see? Notice the colors, the objects.</td>
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<td></td>
<td>• Stop for a moment and focus on something that looks interesting to you such as a spot in the ceiling, or an object that you choose. Name the object in your mind as you keep looking at it and describe to yourself the color, the luminosity, the texture of that object. Imagine you are a painter and you want to draw that object from memory, so keep looking at it and try to capture all its physical characteristics.</td>
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<td></td>
<td>• Move on to another object and repeat this exercise with five objects in the room.</td>
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<tr>
<th></th>
<th>Breathe</th>
<th></th>
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<tbody>
<tr>
<td></td>
<td>• Take another breath, slowly and deeply breathing in and focus on breathing out slowly and completely emptying the air on your lungs.</td>
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<table>
<thead>
<tr>
<th></th>
<th>What do you hear</th>
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<tr>
<td></td>
<td>• Now, focus on the sounds that you hear.</td>
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</tr>
<tr>
<td></td>
<td>• Imagine you are a musician and want to reproduce those sounds later in a song. Notice if you recognize those sounds, explore how they sound, if they are sudden or constant, if they are in the background or more evident.</td>
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</tr>
<tr>
<td></td>
<td>• Notice the location of the sound, where does it come from? Notice the tone, volume, and the time in which they appear and disappear.</td>
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<tr>
<td></td>
<td>• Hear the rhythm of the sounds, how they relate to each other, the sort of music that they have between them, and what spaces of silence they have between them.</td>
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<tr>
<td></td>
<td>• Do this for three minutes, exploring all the sounds that come to you.</td>
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<thead>
<tr>
<th></th>
<th>Breathe</th>
<th></th>
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<tbody>
<tr>
<td></td>
<td>• Take another breath, slowly and deeply breathing in and focus on breathing out slowly and completely emptying the air on your lungs.</td>
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<table>
<thead>
<tr>
<th></th>
<th>What do you feel/touch</th>
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<tbody>
<tr>
<td></td>
<td>• Focus on the sensations that you have.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Notice how your clothes feel in your body, if the fabric is soft or rough. If you are seated, feel the texture of your chair. Your skin is all around you, notice how the contact with your skin feels like in your feet, your legs, your hips, your trunk, your chest, your arms, your neck, and your head.</td>
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<tr>
<td></td>
<td>• Notice the temperature in the room, if you feel cold or hot in general, if one part of your body is hotter or colder than the others. You can bring an object such as blanket or a stuffed animal or anything else such as a cup. Touch that objects and feel its texture, shape, temperature, humidity.</td>
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<tr>
<td></td>
<td>• Do this for three minutes at least, exploring all the textures and temperatures of your surrounding or the object that you chose.</td>
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</tr>
<tr>
<td>Breathe</td>
<td>What do you smell/taste</td>
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<td>---------</td>
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</tbody>
</table>
| • Take another breath, slowly and deeply breathing in and focus on breathing out slowly and completely emptying the air on your lungs. | • Focus now on the smell and taste.  
• Notice any distinctive smells surround you. Sometimes you can notice if a room is humid or dry with your sense of smell.  
• Notice if you can detect your own smell. Notice the taste in your mouth. Spend some time trying to detect smells and tastes, even if at first you don’t. You can take something small to eat, such as a candy, a chewing gum or an herb (for instance, peppermint).  
• First, bring the item to your nose and smell it. Try to describe the smell. Then put it in your mouth, let it stay there without chewing it, play around with it with your tongue. Notice its texture, smell, flavor, and taste in your mouth. You can chew it a little bit and see how it changes, if the taste intensifies.  
• Take your time on doing this, if it is gum, chew it slowly, if it is a candy let it dissolve in your mouth. |

Finally, take a deep breath and release the air slowly. Notice how you feel after this exercise. Move your arms and your shoulders to release any tension, open and close your mouth to release any tension there as well.

You can also do this exercise while performing an activity. For example, if you are knitting, you can slow down the process and see how the yarn looks, sound, feels and smells. Take time to notice the movement you do with the needles and yarn and pay attention to as many details as possibly.

Take your time, do it slowly.

**Connecting body and mind through breath**

Another way of grounding is an exercise that connects your body and mind through breath. You can choose to either sit comfortably in chair for 20 minutes or stand or if you prefer.

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<tr>
<td><strong>Sit (or stand) with both feet firmly on the ground. Feel your feet make full contact with the floor, so you can feel the ground beneath you. Imagine that roots are growing from your feet into the ground making you feel strong and sturdy</strong></td>
</tr>
<tr>
<td>Adjust your posture so you are upright but comfortable. Feel your body being supported by the chair. Notice where your legs and back make contact with the chair.</td>
</tr>
<tr>
<td>Gently relax your eyes and let them settle on a point in front of you on the ground.</td>
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</tbody>
</table>
Breathe in through the nose and breathe out through the mouth and take a few breaths and notice your breathing.

Notice your inhale and then your exhale. Now for the next five breaths when you exhale, press your heels into the floor, feeling like your feet are taking root in the ground.

Take a moment to fully relax as you feel the support of the ground and the chair.

After you have completed the grounding, spend a few minutes reflecting on:

- How did you feel while doing this exercise?
- Did you notice an increased sense of support from the ground/earth? From the chair?
- Did you notice any changes in your body? Are you aware of a sense of stability and calmness in your body?
- Did you notice any changes in your thoughts?

Note

At the beginning you may feel anxious doing this exercise, which is a normal reaction and usually with practice it becomes easier. If you feel anxious, take a deep breath, say to yourself that you are doing this to take care of yourself and continue the exercise.

Additional recommendations

- Grounding is a technique that is deepened through regular practice so make time to practice grounding as often as you can
- The duration of grounding can vary; however, it is suggested to practice for at least 20 minutes
- Try more than one technique until you find one that feels that it is the right fit for you
- Once you have acquired some experience you can create your own method
- It is recommended to start your grounding practice as soon as you feel a negative or a painful emotion
- You can practice alone, or you can involve a friend or a relative

References & Further Reading

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   https://www.healthline.com/health/grounding-techniques#mental-techniques
2. Detaching from Emotional Pain (Grounding)
3. Grounding Techniques

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26 Icon made by Freepik from www.flaticon.com
4. Grounding exercises

5. How to Ground Yourself during an Anxiety Attack | Anxiety Treatment Wisconsin
   https://shermanconsulting.net/grounding-methods-anxiety-attacks/
Intrusive thoughts and flashbacks

What are intrusive thoughts?
Occasionally, people that have been exposed to traumatic stories might have intrusive thoughts, which are distressing ideas and memories that suddenly and unexpectedly come to mind and trigger a response of fear, worry, or grief.

What are flashbacks?
At times thoughts and memories can be so strong that they feel like they are really happening, or that the person is transported to the traumatic event. These are called flashbacks. Sometimes professionals may have a very vivid imagination, so when a person is talking about a traumatic experience, it plays “like a movie” in their mind. The imagery is then repeated intrusively. While flashbacks are not common in secondary trauma, repetition in our minds of scenarios from what our clients have shared with us is more common.

Why do they occur?
Intrusive thoughts and flashbacks happen as we are trying to process information that is difficult. Our brain tries to make sense, to see the logic of an event, but cannot. They can also occur in response to triggers, which also might be difficult to pinpoint, as they can happen very quickly. The triggers, as well as flashbacks and intrusive thought at times activate the emergency response in our system, and so they feel as if we are in danger even if the current situation is perfectly safe.

What to do about them?
First, observe the severity. You can notice if intrusive thoughts or flashbacks are affecting your work, or your spare time, and if they are affecting activities that you used to do. Even if they are not, they might be very distressing when they happen. If so, the best idea is to seek help. A trauma-informed counselor can provide supportive counselling using some of the tools and techniques that are outlined below. You can also try some of the strategies below on your own, ensuring you seek help and support when needed.

Below are some fundamental tools and techniques that will prepare you for working with intrusive thoughts and flashbacks. Prior to trying any of these tools, it is important to prepare yourself and ensure that you are feeling well and healthy.
Preparing yourself
All secondary trauma, and in particular intrusive thoughts and flashbacks, are ways in which your mind and body try to face the challenge of a traumatic memory. Before we look at tools to manage the thoughts, it’s important to start with your body. Imagine that you are going to run a marathon. You would not do it without training or preparation and it’s important to ensure you are ready. The suggestions below are designed to prepare you physically so that you are ready to work through the challenges presented by secondary trauma.

<table>
<thead>
<tr>
<th>Physical Activity</th>
<th>Any physical activity that gets your heart and brain working and brings on a sweat can be helpful for ensuring you are getting enough exercise daily. Aerobic exercise is best for this (as opposed to lifting weights, for example). If mild, such as walking, it might take a good 40 minutes to achieve this state. If more intense, such as jogging, 15 minutes should suffice. Any activity that raises your heart rate such as swimming, dancing, and bike riding can also be beneficial. If you are just starting physical activity after a period of inactivity, be patient and start slowly depending on your level of fitness. It is a good idea to consult a physician if you have injuries or conditions that might affect your physical activity.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eating well</td>
<td>Secondary trauma can impact your appetite and you may find that you are either eating less or more than usual. It is recommended to have a healthy selection of food to ensure that your body is receiving a balanced diet. Try to avoid simple sugars, such as refined flours, foods with high levels of sugar or sugary drinks. If you do have sugar, try to combine it with food that has fiber such as fruit and nuts. The reason to avoid sugar is that it is processed very quickly in your body, giving you a “high” that unfortunately might trigger your emergency response system. This can make flashbacks and intrusive thoughts worse. By combining sugar with fiber, the sugar is processed in the body more slowly, giving a different effect.</td>
</tr>
<tr>
<td>Sleeping well</td>
<td>If the intrusive thoughts and flashbacks are worse in the evening, sleeping might be a problem. Try to improve sleep habits, such as getting to bed at the same time, avoiding screens one hour before bed, and doing a calming activity just before sleep such as having a bath, meditating, or reading a book.</td>
</tr>
</tbody>
</table>

Fundamental Skills
Below are some fundamental skills that you may wish to try to begin managing intrusive thoughts and flashbacks. It is recommended that you work through these tools step by step, only moving onto new tools after you have mastered the previous skill. It is also recommended that you try these exercises at a
specific time of the day when you know you can be more relaxed. You may wish to take time in the middle of the day to diminish stress and to engage in a bit of self-care.

Before you begin any exercise, start by breathing and grounding. Then, begin your chosen exercise. If thoughts or images come at another time of the day, remind yourself that you are doing something about them, that you are taking care of yourself, and there is a time to address them during the day. If they persist, you can do breathing and grounding as outlined. The important thing is that you set aside time to practice regularly and you don’t miss the time you have allocated to complete the exercises. Little by little, over time, thoughts and images will reduce.

If at any point, however, you feel overwhelmed or the thoughts and flashbacks are worsening, it’s important to seek professional help.

<table>
<thead>
<tr>
<th>Thought stopping</th>
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</thead>
<tbody>
<tr>
<td>Distressing thoughts can happen when triggered or at times emerge without noticing. If you try to fight too hard against them, the thoughts can become stronger and harder to let go of. Instead of pushing thoughts away quickly, the first step is to recognize them.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Three Repetitions</th>
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</thead>
<tbody>
<tr>
<td>You can do this with three repetitions.</td>
</tr>
<tr>
<td>1. When you have distressing thoughts, say to yourself “I’m thinking…” and repeat it three times.</td>
</tr>
<tr>
<td>2. Next you move to the things that you notice in your body. Say to yourself, “I’m feeling…” and repeat it three times.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Let go</th>
</tr>
</thead>
<tbody>
<tr>
<td>The main idea is that thoughts come and go, and when we notice them, we can move on to other things that we notice in our bodies. Maybe, you have other thoughts that emerge. Each time, repeat the three repetitions and then let them go.</td>
</tr>
</tbody>
</table>

The important thing is that you then come back to your body each time, focusing on what you are feeling, or sensing. The longer you practice, you’ll notice fewer and fewer thoughts arising, and you’ll be able to notice more what you perceive outside and inside your body. This is also a good way to start practicing grounding.

<table>
<thead>
<tr>
<th>Grounding: tools that bring you back to the present moment.</th>
</tr>
</thead>
<tbody>
<tr>
<td>As outlined in the introduction, intrusive thoughts and flashbacks can occur when you have been exposed to traumatic stories. These distressing ideas, images and memories can occur suddenly and unexpectedly and your body reacts with the same response as if the threat were in the present moment. By grounding, you are bringing your body and mind back into the present moment.</td>
</tr>
</tbody>
</table>

For a full outline of grounding tools, please see the grounding handout for more tips on practicing this skill.
Imagery Control

Imagining the stories our clients tell usually serves as a way to generate empathy. The images, however, can become intrusive and you may experience the emergence of the images at times when you are triggered. Because the imagery is something we generated in our minds (as opposed to memories of the images we saw in person), it is important to learn that we are able to have control over the images. The following exercise can be done as a preventative measure, and then later as a way of controlling images that may emerge from the stories we hear.

<table>
<thead>
<tr>
<th>TV Exercise</th>
<th>(Adapted from Rothschild, B. 2006. p154)</th>
</tr>
</thead>
<tbody>
<tr>
<td>First, ground yourself so that you are fully present.</td>
<td></td>
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<tr>
<td>Next, imagine you are in a room that is calm and relaxing with a TV.</td>
<td></td>
</tr>
<tr>
<td><strong>Step 1:</strong> Imagine what the room is like, what type of seating, the source of light and how the TV looks. You have the TV control in your hand.</td>
<td></td>
</tr>
<tr>
<td><strong>Step 2:</strong> Turn the TV on and imagine that you are watching a pleasant or neutral program. You have the TV controller in your hand and you can adjust and alter the picture, color and speed of the images as you wish.</td>
<td></td>
</tr>
<tr>
<td><strong>Step 3:</strong> Practice changing the images, the picture, the quality of the image and the speed until you feel that you have control over the images.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>When flashbacks occur</th>
<th>When a flashback or an intrusive image occurs, use the skills that you have been practicing.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Step 1:</strong> See the images that are happening and distance yourself from them.</td>
<td></td>
</tr>
<tr>
<td><strong>Step 2:</strong> Use the skills that you learned from the TV exercise. Try techniques such as blurring the image, moving away from them, or turn the image off all together.</td>
<td></td>
</tr>
<tr>
<td><strong>Continue to practice grounding exercise and seek support from a professional if you find you are not able to control the images.</strong></td>
<td></td>
</tr>
</tbody>
</table>
Using the expressive arts

The expressive arts can be very useful tools for processing distressing thoughts and images. You can try these techniques on your own or you may wish to work with a counsellor or expressive arts therapist.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Description</th>
</tr>
</thead>
</table>
| Writing           | You may wish to try writing a poem. It does not have to be very complicated, just reflect on your thoughts and images and write what you feel like with a metaphor or simile. For instance, “when I see these images it feels like…” or “these thoughts are like…”.

| Painting or drawing | Drawing and painting can be effective ways of processing images and can also be very calming and increasing mindfulness. If you are feeling distressed, using colored markers or pencils to create abstract images can help to soothe and relieve stress. If you would like to draw and process the traumatic images you are experiencing, it is recommended that you do this with a counsellor or expressive arts therapist. |

| Creating a safe place image | It can be very helpful to have a place in your mind that you can go to where you feel safe. You can bring up the image of this place at anytime when you feel triggered or unsafe. In order to help with remembering the image of the safe place, you may wish to draw, paint or write about it. You can then keep the image near you and if you are feeling triggered, reflect on the image, breath, ground and remember that you are safe.  
Steps:  
1. Imagine a place (real or imaginary) where you feel completely safe.  
2. What do you see around you?  
3. What can you touch, see?  
4. As you imagine yourself in this space, how do you feel?  
5. Where in your body do you feel this?  
6. Is there a word that you can give to your safe space?  
7. Imagine yourself there now and breathe deeply, feeling the calm and the peace.  
Then, draw, paint or write about the image so it is there for you whenever you need it. |

Finally, and very importantly, if you feel that these thoughts or images are:

- Affecting the way you work, live, or spend your free time
- Are interrupting or complicating your relationships,
- Influencing your use (or overuse) of alcohol or other substances (for example, sugar, marijuana or other drugs)

Please seek help from an experienced trauma counselor.

References & Further Reading


Mindfulness

Introduction

Our bodies and brains communicate with each other through chemical and electric signals. This means that when we think about stressful, frightening or upsetting things, our bodies begin to feel tense, our digestion becomes more difficult, and we have difficulties sleeping. The tension in our bodies then sends signals back to our brains that they are tense, which can increase our level of mental stress. We can break this cycle in the body with exercises like breathing, stretches or progressive muscle relaxation (PMR) or we can break it in the mind using mindfulness, visualization or grounding exercises. This handout will guide you through the principles and practice of mindfulness.

Mindfulness is paying attention, on purpose, to the present moment. This may include paying attention to your surroundings and things outside your body, or paying attention to your internal state, what is happening for you mentally, emotionally and physically. Mindfulness means noticing our thoughts, our feelings, what we hear, see, taste, smell and our body sensations. With practice, mindfulness helps us to be aware of our habitual patterns of thinking, feeling and acting, and to let go of these patterns when they are not healthy for us.

An important part of mindfulness is noticing your current state and environment without judgment. Labels like “good,” “bad,” “like” or “dislike” are all judgments. When you practice mindfulness, try to move away from these and just pay attention to what is there without adding your assessment of it. Pay attention in a friendly, open and curious way. For example, try to see pain, discomfort or distress as your body or mind communicating with you, without getting stuck on the fact that it is uncomfortable. Mindfulness is a reflective process that allows us to slow down for a period of time and have clarity on the present moment. It helps us not to focus too much on past events or experiences or overthink or worry too much about what is coming in the future. We can find a healthy, safe moment in the present, which gives our bodies and minds a break from our patterns of stress. This helps us with our emotional management and when we practice it regularly it can reduce feelings of distress and help us improve our focus and concentration.

Steps

There are many ways to practice mindfulness. We will present seven brief mindfulness exercises that you can try, each with a different focus, to find one which is a good fit for you.

Personal weather report

For this exercise you will pay attention to your internal sensations and feelings, however you will describe them to yourself using words that you would usually use to describe the weather. This helps to remove judgment and allows us to notice these feelings differently.
<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>27</td>
<td>Sit comfortably, with your body supported by the chair or floor. You may close your eyes or let them lower to a point on the floor.</td>
</tr>
<tr>
<td>28</td>
<td>Take three deep breaths.</td>
</tr>
<tr>
<td></td>
<td>Now turn your attention inward and notice how you are feeling. Is it bright or dark inside you? Sunny? Cloudy? Stormy? Windy? Still? Is there different weather in different parts of your body? Move your attention through your body to check the weather in each place, making sure that you check your stomach/abdomen, your heart/chest, your throat/neck, and your face/head.</td>
</tr>
<tr>
<td></td>
<td>See if you can find a place in your body where the weather is slightly more pleasant than in other places and stay there for a few minutes. When you are ready, return your attention to the outside world.</td>
</tr>
</tbody>
</table>

**Mindful seeing**

You can do this exercise anywhere, but it is helpful to do it outside in nature.

- Find a place where you can sit or lie back comfortably with something in your environment that is gently moving. For example, this may be clouds in the sky, leaves blowing in the wind, or water moving in a stream.
- Pay attention to the movement, noticing the many different colors, the textures, the speed and the patterns that you see. Notice the light and shadows caused by the movement. Really pay attention: do you notice anything that is different, that maybe you have not noticed before?
- If thoughts come into your mind, release them and come back to focusing on your natural environment. Do this for a minimum of 5 minutes.

**Note:** This exercise can also be done as a “noticing walk” where you walk silently through your environment and pay close attention to each thing that you see, from the gravel or pavement on the ground to the colors of the plants or building, to the texture of the clouds in the sky. Slowly move your attention from ground up to sky and back again, repeatedly.

**Mindful listening**

For this exercise you can use a bell, an instrument, or a chime app on your phone.

- Find a place where you can sit comfortably and which is relatively quiet. You can have your eyes open or closed, however you feel most comfortable.
- Chime the bell, pluck the instrument or play the sound app. Try to listen carefully to the sound: Notice how it changes, if the tone shifts, if it starts loud and then gets quieter. Listen closely until you can no longer hear the sound. Take a moment and listen to the silence, without the sound in it. Then play the sound again.

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28 Icon made by Freepik from www.flaticon.com
Mindful sensation
This exercise focuses on the physical sensations we feel in our bodies.

Start by bringing your attention to the soles of your feet. How do they feel? Are they in shoes or barefoot? Do they have space to move or are they held tightly? Are they touching the ground? Is the pressure of the ground on your feet even or is it more in one part than another?

Now slowly move your attention up to your legs. How do they feel? Are they touching the chair or your clothing or can you feel the air on your skin? Do they feel warm or cool? Do they feel painful or comfortable? Are the muscles tight or relaxed?

Slowly move your attention up through your body, to your hips and lower back, then to your abdomen and stomach, then to your chest and heart, then to your hands, then to your arms, then to your upper back and shoulders, then to your neck and throat, and finally to your face and head. For each part of your body really focus and pay attention to how that part feels, without feeling the need to change it.

If you have parts of your body that are painful, you can choose to spend more time focusing on parts of your body that feel comfortable; this can help relieve your overall feeling of pain.

Mindful walking
For this exercise you are going to walk slowly: this can be done either inside or outside.

Start by standing still.

Then, very deliberately, take a step. As you step, try to pay attention to the sensation in your muscles as you lift your leg. Can you feel them tighten? Are you shifting your weight? Is your posture changing?

Then put your foot down and really pay attention to the sensation of the sole of your foot on the ground. What part touches the ground first? Where is there the most pressure? How do your legs feel as you put that foot down? How does your weight shift now that both feet are on the ground?

Repeat this for at least 5 steps.

Mindful eating

Sit comfortably so that your body feels supported by the chair or by the floor.

Put a bite-sized piece of food in front of you. Look at the food: What color is it? What is the texture? Notice the smell. What sensations are coming into your body as you look at and smell the food?
Now pick up the food slowly. If you can hold it in your fingers do this, otherwise use a utensil. What does the food feel like in your hand? What is the temperature? The weight? The texture? Is it smooth or rough? Soft or hard? Wet or dry? Hot or cold? Now bring the food slowly to your lips and put it in your mouth. Do not bite the food yet, take a moment to feel what the food is like on your tongue: the temperature, the texture, the taste.

Now bite into it slowly; do not swallow yet. What changes? Does the taste change? Does the texture change? Pay attention to how the food changes in your mouth as you chew. Now swallow the food. Feel the food move down your throat as you swallow. Notice what sensations come from your throat and your stomach.

You can choose to repeat the exercise with another bite of food, or to start at least one meal a day with a mindful bite of food.

Mindful gratitude

Find a quiet place and sit comfortably so that your body feels supported by a chair or the ground beneath you.

You may close your eyes or leave them open and let them relax to look down to the floor. Take three deep breaths, paying attention to the feeling of the air coming in through your nose and filling your lungs.

Now take a moment to notice your heartbeat.

Now think of one thing in your life that you are grateful for. This could be a big thing or a small thing, it could be a person, a place or an opportunity. Consider all aspects of that thing: what sights, smells, sounds and sensations do you associate with that thing? How does that thing make you feel?

Spend at least three minutes thinking about that thing and focusing on the feeling of gratitude for having that thing in your life.

References & Further Reading

Nightmares

Nightmares are a common problem for trauma survivors. Along with flashbacks and unwanted memories, nightmares are one of the ways in which a trauma survivor may relive the trauma for months or years after the event.

Post-traumatic stress-induced nightmares are generally defined as threatening or frightening dreams that can wake a person up and may be marked by any intense negative emotions, such as fear, anger, or even sadness. These nightmares cause significant distress (both during the dream, and after awakening) and may occur several times a week.

Nightmares are part of the post traumatic symptoms associated with re-experiencing, commonly known as flashbacks. This is when the memory of a trauma is involuntarily recalled, either while awake in the form of flashbacks, or at night in the form of nightmares. These intrusive trauma memories can be remarkably vivid, overwhelmingly emotional, and are experienced as if they were really happening right then and there. They are accompanied by intense feelings of fear and anger, often similar to the emotions that were experienced during the traumatic event itself. The body reacts in a stress response while remembering the event: the person's heart beats fast, they begin to sweat, and painful bodily sensations may arise. The memories may come back repeatedly no matter how much the person does not want to remember. Nightmares wake people up and cause sleep disturbances. Often people are unable or afraid to go back to sleep, so they cause sleep deprivation and issues with insomnia which have health and wellbeing implications.

There is an ongoing debate with no consensus for why we have nightmares. Many experts believe that dreaming is part of the mind’s way of processing emotions and consolidating memory. Bad dreams and nightmares, then, may be a component of emotional response to fear and trauma, but more research is needed to definitively explain why nightmares occur. Deirdre Barrett (1996), a psychologist at Harvard University, theorizes that nightmares are helpful to our survival or else they probably would have been done away with by evolution. She states that nightmares act as the brain's way of focusing a person’s attention on issues they need to address.
Fortunately, there are steps you and your counselor, if you are working with one, can take to lessen the frequency of your nightmares and the effect they are having on your life.

First, behavioral changes and steps you can take on your own that may reduce the nightmare frequency include:

- Keep a regular wake-sleep schedule. This means going to sleep and waking up at the same time each day.
- Engage in regular exercise, which may help alleviate nightmare-causing anxiety and stress.
- Some form of meditation practice may also be helpful.
- Practicing good sleep hygiene. This includes making your bedroom a relaxing and peaceful place reserved for sleep, and being cautious about the use of alcohol, caffeine, and nicotine, which can disrupt sleep patterns, and not watching TV or using electronics (e.g., phone, computer) right up to your bedtime. It is best to stop TV viewing and electronics use at least one hour before your bedtime; and avoid dinner and snacks close to bedtime.

Below are 2 protocols developed by experts to help with nightmares:

**Nightmare Protocol 1**  
*Developed by Babette Rothschild (2000)*

This is a step by step guide to halting traumatic memories. When you use it for the first time it should be under the guidance of a mental health counselor and practiced in a counseling session. Afterwards you can read the statement before bed (reading out loud is best) and follow the protocol if you are woken up by a nightmare. It takes time to reduce nightmares, but with practice it is possible.

Read the sentences below aloud, filling in the gaps:

1. Today I have been feeling really worried about/scared of ________________.

2. So, I might have a nightmare and wake up feeling ___________. (name the feeling: e.g. scared, sick, angry, sad)

3. If that happens, I will tell myself that I had the nightmare because I am remembering _________________. (Name the event, but no details: e.g. “the bad thing that happened,” “the bad person,”).

4. I will then turn on the light and look around my room and name 5 things that I see in the room.
5. And I will then tell myself that I just had a nightmare and that ________________ (the event) is not happening to me now or anymore.

6. If necessary, I will get up from bed and do something for 10 minutes or more (e.g. have a glass of water; look at, name and touch 5 objects; listen to some calming music; talk to somebody) that will help remind me of where and when I am and that what I am remembering is not happening right now.

7. When I am sufficiently calm I will return to bed.

8. I will repeat this protocol every time I have a nightmare.

Nightmare Protocol 2
Step by Step When Nightmares Keep You from Sleeping

<table>
<thead>
<tr>
<th>Action</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Practice relaxation, pleasant imagery, and coping skills first, to be sure you are ready to work on changing your nightmares. Do progressive relaxation, and/or slow deep breathing exercises; listen to music or guided imagery.</td>
</tr>
<tr>
<td>2.</td>
<td>Choose a recurring nightmare you would like to work on. This will be your target nightmare. Select a nightmare you can manage now. Put off trauma nightmares until you are ready to work with them.</td>
</tr>
<tr>
<td>3.</td>
<td>Write down your target nightmare. Include sensory descriptions (sights, smells, sounds, tastes, etc.). Also include any thoughts, feelings, and assumptions about yourself during the dream.</td>
</tr>
<tr>
<td>4.</td>
<td>Choose a changed outcome for the nightmare. The change should occur BEFORE anything traumatic or bad happens to you or others in the nightmare. Essentially, you want to come up with a change that will prevent the bad outcome of the usual nightmare from occurring. Write an ending that will give you a sense of peace when you wake up. Note: Changes in the nightmare can be very unusual and out of the ordinary (e.g., you might become a person with superhuman powers who is able to escape to safety or fight off attackers). Changed outcomes can include changed thoughts, feelings, or assumptions about yourself.</td>
</tr>
<tr>
<td>5.</td>
<td>Write down the full nightmare with the changes.</td>
</tr>
<tr>
<td>6.</td>
<td>REHEARSE and RELAX each night before going to sleep. Rehearse the changed nightmare by visualizing the entire dream with the changes each night, before practicing relaxation techniques.</td>
</tr>
<tr>
<td>7.</td>
<td>REHEARSE and RELAX during the day. Visualize the entire dream with the change, and practice relaxation as often as possible during the day.</td>
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</tbody>
</table>
Progressive Muscle Relaxation

Introduction

Our bodies and brains communicate with each other through chemical and electric signals. This means that when we feel stressed our muscles can tense up. The tension in our muscles then sends signals back to our brains that they are tense, which can increase our level of mental stress. We can break this cycle in the mind using mindfulness, visualization or grounding exercises, or we can break it in the body with exercises like breathing, stretches or progressive muscle relaxation (PMR).

It can be difficult to tell your muscles to relax, sometimes even difficult to tell where your body is tense. Progressive muscle relaxation is an exercise where we tense each muscle group in our body in turn and then release it. This relaxes the muscle group and also helps you to recognize the difference in how it feels for those muscles to be tense or relaxed. For this exercise we want to tense each muscle group gently and then release it. At no point should your muscles feel strained. If you have an injury or intense pain in an area of your body, you may want to skip that place until it is healed or the pain feels less intense.

Steps

PMR can be practiced standing, sitting, or lying down on your back on a firm mattress or other comfortable but supportive surface. It can be a particularly good practice to do right before bed to help you sleep. It can help start by grounding briefly or taking three deep breaths.

As you practice, it is important to breathe normally throughout this exercise; do not hold your breath. It can be helpful to match the tensing of your muscles with an in-breath and the relaxing of your muscles with an out-breath. Pay particular attention to the feeling of the muscles releasing. You can even visualize the tension leaving your body as you exhale.

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Start in your feet. As you inhale, curl your toes and push them forward and down, feeling the tension in your arches and even in your ankle. Hold your feet like this for 5 seconds while you count slowly. Now release your toes and let your foot relax as you breathe out.</td>
</tr>
<tr>
<td>2</td>
<td>Next, inhale and pull your toes up and back towards you and tense your calf muscle. Hold this tension for 5 seconds. Now release your foot and let your calf relax as you exhale.</td>
</tr>
<tr>
<td>3</td>
<td>Next, inhale and tense your thighs. You can do this by pushing the back of your knees towards the ground. Hold this tension for 5 seconds. Now release your thighs and feel them relax as you breathe out.</td>
</tr>
<tr>
<td>4</td>
<td>Next, inhale and tense your buttocks. Hold this tension for 5 seconds. Now release your buttocks muscles and allow the area to relax as you exhale.</td>
</tr>
<tr>
<td>5</td>
<td>Next, inhale and tense your stomach and abdominal muscles by pulling your stomach inwards and backwards. Hold this tension for 5 seconds.</td>
</tr>
</tbody>
</table>
Now release your abdominal muscles and allow them to relax as you exhale.

Next, tense the muscles in your back and shoulders by pulling your shoulder blades together and arching backwards slightly as you inhale. Hold this tension for 5 seconds. Now release your shoulders and allow your back muscles to relax as you exhale.

Next, tighten your hands into fists and tense up all the muscles in your arms as you inhale. Hold them tight like this for 5 seconds. Now release your hands and relax your arms back down to your sides, letting them hang loosely as you exhale.

Next, tense your shoulders and neck muscles by bringing your shoulders up to your ears as you inhale and holding them there for 5 seconds. Now release your shoulders, letting them relax back down away from your ears as you exhale.

Next, tense the muscles in your face, clenching your jaw, pressing your lips against each other, and squeezing your eyes shut tightly, as you inhale. Hold this tension for 5 seconds. Now let the muscles in your face release and relax, allowing your jaw to loosen so that your mouth is slightly open as you exhale.

Finally, tense your entire body by pulling your arms and legs in together and tightening into a ball as you inhale. Hold this tension throughout your entire body for 5 seconds. Now exhale and release your body and let your limbs relax out. Allow your whole body to relax and feel as though it is melting into the floor or chair or mattress. Feel the tension slowly leaving your body. Pay attention to the feeling of relaxation. Notice how your body feels different now that it is allowed to relax. Stay with this feeling for at least 10 seconds.

If you are not going to sleep, begin to move your body slowly, taking a moment to feel your muscles waking up. When you feel ready, stretch your arms and legs and if your eyes have been closed, open them now.

References & Further Reading


Stretching

Introduction

Our bodies and brains communicate with each other through chemical and electric signals. This means that when we feel stressed our muscles can tense up. The tension in our muscles then sends signals back to our brains that they are tense, which can increase our level of mental stress. We can break this cycle in the mind using mindfulness, visualization or grounding exercises, or we can break it in the body with exercises like breathing, stretches or progressive muscle relaxation (PMR). This handout will talk about stretching.

We can break the cycle of muscular tension and anxiety by paying attention to our posture and stretching our bodies.

The vagus nerve is one of the main lines of communication between the brain and the body. It runs along the spine and connects with every organ and many muscle groups. The vagus nerve is key to the autonomic nervous system which controls our automatic responses, and can signal our sympathetic response (high alert, fight/flight) and our parasympathetic response (relax, “rest & digest”). When our muscles are tense this contributes to keeping our vagus nerve in the high alert, sympathetic state, which has health and wellbeing impacts for our minds and our bodies. Stimulating the vagus nerve to move into parasympathetic shuts down the inflammatory activity within our organs and helps our bodies and minds to calm down and return to a more healthful state. We can do this with some simple stretches, focused on the neck and shoulders.

We can break the cycle of muscular tension and anxiety by paying attention to our posture and stretching our bodies.

First of all, paying attention to our posture can help. When we are in a sympathetic response we tend to push our heads forward and to hunch our shoulders. Noticing that we are sitting or standing like this, and taking a moment to make sure that our heads and necks are aligned over our shoulders can help shift the stress signals our body is sending our brain. If you are having a hard time sensing whether your head is aligned with your shoulder, you can lie on your back on a flat, firm surface and let your head rest, making sure that your chin is straight, not pointed up towards the sky or tucked down towards your feet. If you want, you can interlace your fingers behind your head around base of skull, hold your head stable, and pull gently to give more space to your neck.

Once you have brought your head into alignment, try a few of the following exercises. Learning new movements always takes some practice before they feel comfortable. Start by trying between one and three per day, and once you gain comfort with those, add a new exercise.

Table: Move 1: Neck Extension and Flexion

<table>
<thead>
<tr>
<th>Steps</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Stand straight, preferably facing a wall.</td>
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</tbody>
</table>
2. Look straight ahead at the wall and then slowly tilt your head backward (without arching your back), so that your eyes move up the wall to the ceiling.
3. Try to hold for five seconds.
4. Slowly tilt your head back, with your eyes following the wall until you are in your original neutral position.
5. Now slowly tilt your head downward, allowing your eyes to follow the wall until you are looking at the floor near your feet.
6. Try to hold for five seconds.
7. Now slowly tilt your head up, with your eyes following the wall until you are back in your neutral position.
8. Do 5 repetitions.

Move 2: Neck Rotation
1. Keeping your shoulders facing forward.
2. Slowly turn your head to the right.
3. Hold for 5 seconds.
4. Repeat on the left side.
5. Do 5 repetitions.

Move 3: Lateral Extension
1. Start by keeping your head straight and aligned.
2. Try to avoid tipping your shoulders as you slowly tilt your head to the right.
3. You may find it helpful to add a little pressure by placing your right hand on your left temple and applying a gentle stretch.
4. Hold for five seconds.
5. Repeat on the left side.
6. Do 5 repetitions.
Move 4: Tilted Forward Flexion

1. Tilt your head to the right (as before).
2. Slowly drop your head towards your chest.
3. Hold for five seconds.
4. Repeat on the left side.
5. Do 5 repetitions.

Move 5: Deep Stretching

1. Sit on a chair and keep your back, neck and head straight.
2. Drop your head towards your right shoulder.
3. Use your right hand on your left ear to pull your head down further. You can brace your left hand on the arm of the chair for support.
4. Try for 10 seconds.
5. Repeat on the left side.
6. Do 3 repetitions.

Move 6: Towel Pull
1. Roll up a towel and place it behind your neck, holding the ends in your hands.
2. Slowly tilt your head backward so that you’re looking up.
3. As your head rolls against the towel, apply gentle pressure on the towel, using it to support your neck.
4. Return to the starting position without holding the stretch.
5. Do 5 repetitions.

Tips

- You should feel a strong stretch while doing each of these exercises, but if you feel a pinching sensation on the other side of the neck, or any acute strain, release a little bit to see if that alleviates the discomfort. Stop the stretch if the discomfort does not go away.

- Try to increase the time you hold each stretch gradually so that eventually you are holding each stretch for 30 seconds.

References & Further Reading

Visualization

Our bodies and brains communicate with each other through chemical and electric signals. This means that when we think about stressful, frightening or upsetting things, our bodies begin to feel tense, our digestion becomes more difficult, and we have difficulties sleeping. The tension in our bodies then sends signals back to our brains that they are tense, which can increase our level of mental stress. We can break this cycle in the body with exercises like breathing, stretches or progressive muscle relaxation (PMR) or we can break it in the mind using mindfulness, visualization or grounding exercises. This handout will talk about visualization.

Visualization is a useful technique for breaking your stress cycle in your mind when your physical surroundings are contributing to your feelings of stress. Visualization gives you a break from your present setting, and with it, your present emotional state. There are many visualizations that you can do; in this handout we will discuss three simple techniques to get you started.

**Visualization is a useful technique for breaking your stress cycle in your mind when your physical surroundings are contributing to your feelings of stress.**

**Steps**

For all of these visualizations, begin by sitting in a comfortable position, where your body and back are supported by a chair or the floor. Close your eyes if you are comfortable, or let them rest, unfocused, on a spot on the floor. Feel your feet solidly connected with the ground. Let your shoulders relax and release your jaw so that your mouth is slightly open. Take three deep breaths and pay attention to the feeling of the air coming in through your nose and filling your lungs, then releasing out through your mouth.

**Calming color visualization**

This is a simple visualization to start your practice with. The colors can help to relax your mind without bringing any associated thoughts with them. If you are finding that any color(s) are triggering for you or remind you of something upsetting, skip over that color. If any colors are particularly calming or comforting for you, spend more time with those colors.

Start by focusing on the color red. Imagine this color in its many shades: dark red, bright red, pale red. Select your favorite shade of red and let that color spread across your mind’s visual field, so that your whole mind is wrapped in that color. Enjoy this color Red.
Now slowly allow the color red to shift to orange. Imagine this color in its many shades: dark orange, bright orange, pale orange. Select your favorite shade of orange and let that color spread across your mind’s visual field, so that your whole mind is wrapped in that color. Enjoy this color Orange.

Now slowly allow the color orange to shift to yellow. Imagine this color in its many shades: dark yellow, bright yellow, pale yellow. Select your favorite shade of yellow and let that color spread across your mind’s visual field, so that your whole mind is wrapped in that color. Enjoy this color Yellow.

Now slowly allow the color yellow to shift to green. Imagine this color in its many shades: dark green, bright green, pale green. Select your favorite shade of green and let that color spread across your mind’s visual field, so that your whole mind is wrapped in that color. Enjoy this color Green.

Now slowly allow the color green to shift to blue. Imagine this color in its many shades: dark blue, bright blue, pale blue. Select your favorite shade of blue and let that color spread across your mind’s visual field, so that your whole mind is wrapped in that color. Enjoy this color Blue.

Now slowly allow the color blue to shift to purple. Imagine this color in its many shades: dark purple, bright purple, pale purple. Select your favorite shade of purple and let that color spread across your mind’s visual field, so that your whole mind is wrapped in that color. Enjoy this color Purple.

Now slowly allow all color to fade to white. Feel the white spread, surrounding your body with light. Take three deep breaths and when you are ready, open your eyes.

Protective light visualization:
This visualization can be useful when you are feeling vulnerable. This could be a result of something that has happened in your day that made you feel unsettled or even hurt, or it could result from your exposure to someone else’s overwhelming pain, grief, fear or trauma.

As you breathe in, imagine white light shining on the top of your head. With each breath, imagine that light spreading down over your forehead and face, and the back of your head, then down your neck, over your shoulders and around your body.

Breathe out and imagine that light expanding around you like a bubble, with your body inside. With each breath the bubble grows brighter and stronger. All the fear and pain is stuck outside the bubble. Inside the bubble you feel peaceful, calm and strong. Stay here as long as you need to, feeling the protection of your healthy boundaries, breathing in the cool white light, and letting anything painful or stressful float away from you, pushed outside the bubble.

When you are ready, take three deep breaths and open your eyes. Carry the image of your protective boundary with you throughout the rest of your day. This boundary does not mean that you do not care for others, but rather that you are able to keep yourself safe and strong so that you can support them.

Nature walk visualization:
This visualization is good to refresh your body and mind. Chose a location that is peaceful and beautiful place for you: For some people this may be a forest, for some it may be some place near water, a beach
or river, for some it may be the mountains, or even the desert. The important thing is that it is a place where you feel calm and happy.

<table>
<thead>
<tr>
<th>![Path]</th>
<th>Imagine yourself on a path in a nature place. The earth is soft beneath your feet. It is your favorite time of day and the light is shining gently around you, it feels pleasantly warm on your skin. As you breathe in you can smell the freshness in the air.</th>
</tr>
</thead>
<tbody>
<tr>
<td>![Walking]</td>
<td>You begin to walk along the path. The temperature is comfortable. You can hear the sounds of the place, of the breeze, maybe of birds. With each step you take along the path, you feel some of your worries and stress drop off behind you, all the weights of the day falling off onto the path behind you, and your body feels lighter and more relaxed. You can feel the muscles in your arms and legs stretching and lengthening comfortably. Your back and neck feel longer and straighter too, carrying less tension and weight.</td>
</tr>
<tr>
<td>![Scenery]</td>
<td>You admire the scenery around you, noticing all the things you love about this place: the colors of the sky and the land, the textures of the landscape, the plants and maybe animals. Your feet feel comfortable and supported as you step on the soft earth of the path.</td>
</tr>
<tr>
<td>![Breathe]</td>
<td>Walk to a beautiful point in this place, a view that you love. Find a place that is comfortable and sit down to admire the beauty and peacefulness of this place. Notice the details of what you can see, what you can smell, what you can hear and what you can feel here. The breeze lightly brushing your skin. The sound of the wind or of the water near you. If you are in a forest, you can watch the leaves of the trees rustling in the wind and listen to the calls of the birds. If you are by water, you can watch the waves slowly moving and listen to the sound of the water over rocks or sand. If you are on a mountain, you can watch the clouds moving in the sky above you and listen to the sound of the wind. If you are in the desert, you can watch the colors of the sunset on the sand and the stars emerge, sparkling above you. You are safe and protected in this place. Stay here as long as you need to.</td>
</tr>
</tbody>
</table>

When you are ready, take three deep breaths, moving your fingers and toes slightly to awaken your body. Then slowly open your eyes. Take a moment to sit quietly as you adjust to returning to the world. Pay attention to the feeling of calm in your body and mind. You can carry the peacefulness and security of this place with you throughout the rest of your day.


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Burnout (BO)


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**Moral Distress (MD)**


**Compassion Fatigue in Healthcare Workers**


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Intrusive thoughts and flashbacks


Nightmares
