KSDE TASN School Mental Health Initiative Webinar Series

School Mental Health Initiative

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Presenter Information

Leora Wolf-Prusan, EdD

Director of Partnerships & Learning

Center for Applied Research Solutions

Learner Objectives

- ❑ **Gain language and frameworks for why and how supporting educators is critical to burnout, secondary stress, and compassion fatigue prevention**
- ❑ Build and enhance the foundation of knowledge on the impact of trauma and stress, as well as the critical role of healing and resilience in work environments
- ❑ **Begin to identify strategies, reflection and choice points that will support all stakeholders to access well-being, care, and resilience at work.**

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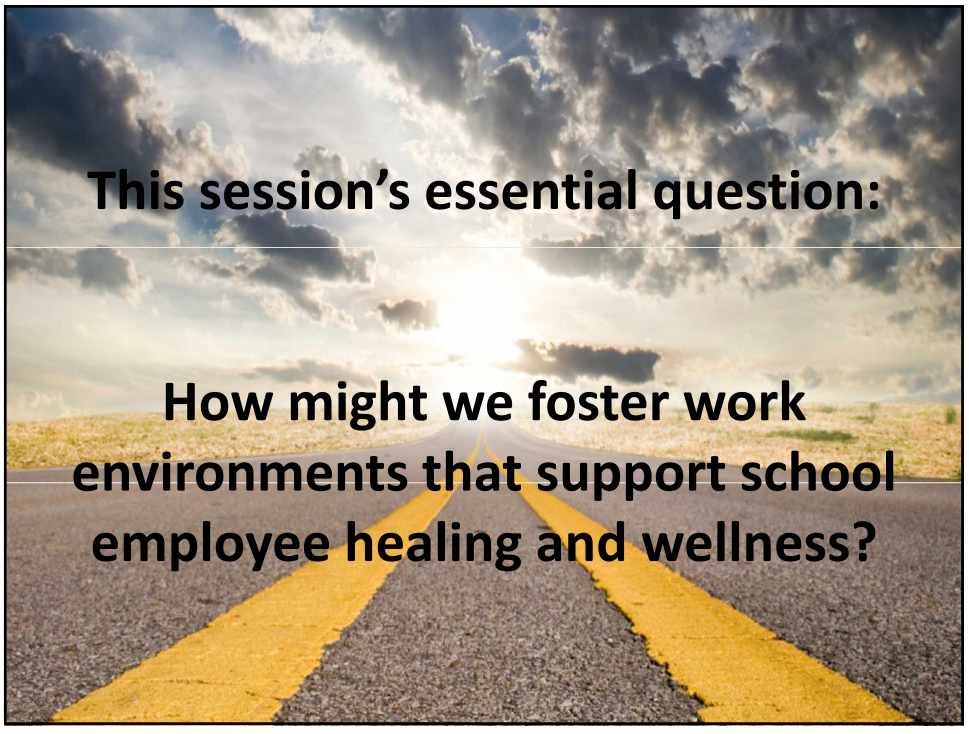


Occupational stress is an inevitable, even at times necessary, element of the work environment, but it does not have to translate into organizational dysfunction nor medical, psychological, or behavioral distress.

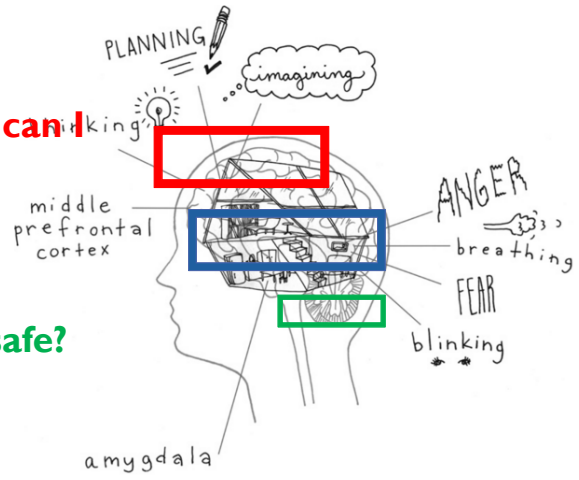
- Quick & Henderson, 2016

Our Beautiful Brains

NeoCortex: What can I learn from this?

Limbic System: Am I loved?

Brain Stem: Am I safe?



SAFETY.

Trauma, Stress, & Burnout

As individuals, teams, organizations, and systems

Belief Systems of People Living With Toxic Stress

(BLOOM)

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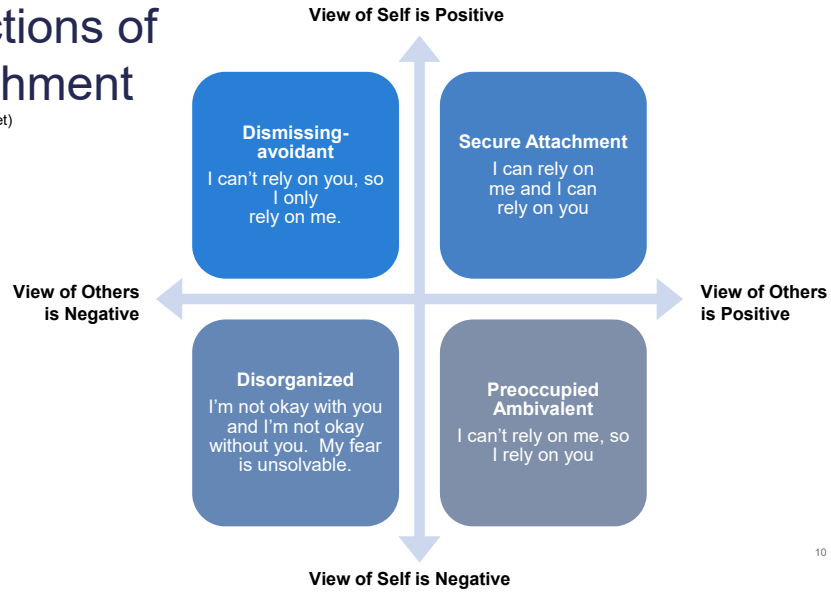
Directions of Attachment

(Dr. Chris Blodget)



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Trauma:
Experiences or situations that are emotionally painful and distressing, and that overwhelm people's ability to cope, leaving them powerless.

- The Center for Nonviolence & Social Justice

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What are we actually experiencing?

Destabilization: Exposure to Suffering	Buoyancy: Intentional Interventions
Moral Stress	Neuroplasticity
Burnout / Vital Exhaustion	Well-Being Promotive Factors
Vicarious Trauma	Vicarious Resilience
Compassion Fatigue / Sorrow	Compassion Satisfaction

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Compassion Fatigue	The emotional residue or strain of exposure to working with those suffering from the consequences of traumatic events. It differs from burn-out, but can co-exist. Compassion Fatigue can occur due to exposure on one case or can be due to a "cumulative" level of trauma. Charles Figley (1995)
Secondary/Vicarious Trauma	"The natural consequent behaviors resulting from knowledge about a traumatizing event experienced by a significant other. It is the stress resulting from wanting to help a traumatized or suffering person." Charles Figley (1995)
[Provider] Burnout	"A state of physical, emotional, and mental exhaustion caused by long term involvement in emotionally demanding situations." Characterized by emotional exhaustion, depersonalization and a reduced feeling of personal accomplishment. Burnout is a condition that begins gradually and becomes progressively worse. Makalah-Pines, Aronson and Kafry (1981)
Stress	Pervasive & Toxic Stress: experiences that lead to strong, frequent or prolonged activation of the body's stress response system. National Scientific Council on the Developing Child (2005)
	Moral Stress: caused by a conflict between our deepest values and the work that we are required to do. Francios Mathieu (2016)

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Resilience, Care, & Well-Being

As individuals, teams, organizations, and systems

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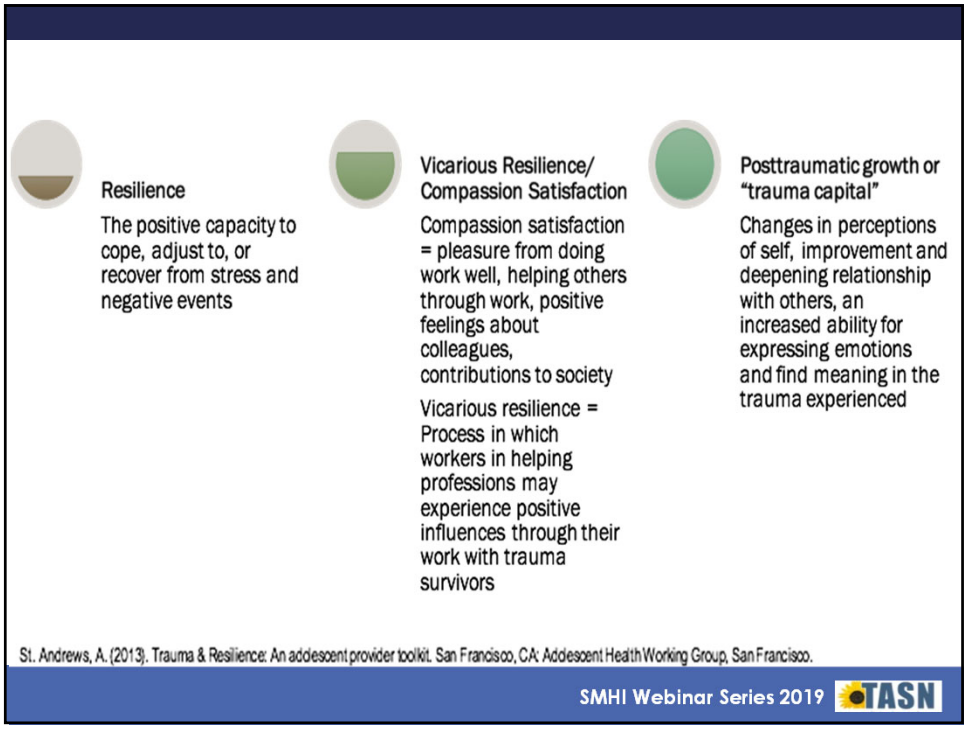
Resilience
The positive capacity to cope, adjust to, or recover from stress and negative events
Vicarious Resilience/ Compassion Satisfaction
Compassion satisfaction = pleasure from doing work well, helping others through work, positive feelings about colleagues, contributions to society
Vicarious resilience = Process in which workers in helping professions may experience positive influences through their work with trauma survivors
Posttraumatic growth or "trauma capital"
Changes in perceptions of self, improvement and deepening relationship with others, an increased ability for expressing emotions and find meaning in the trauma experienced
St. Andrews, A. (2013). Trauma & Resilience: An adolescent provider toolkit. San Francisco, CA: Adolescent Health Working Group, San Francisco.
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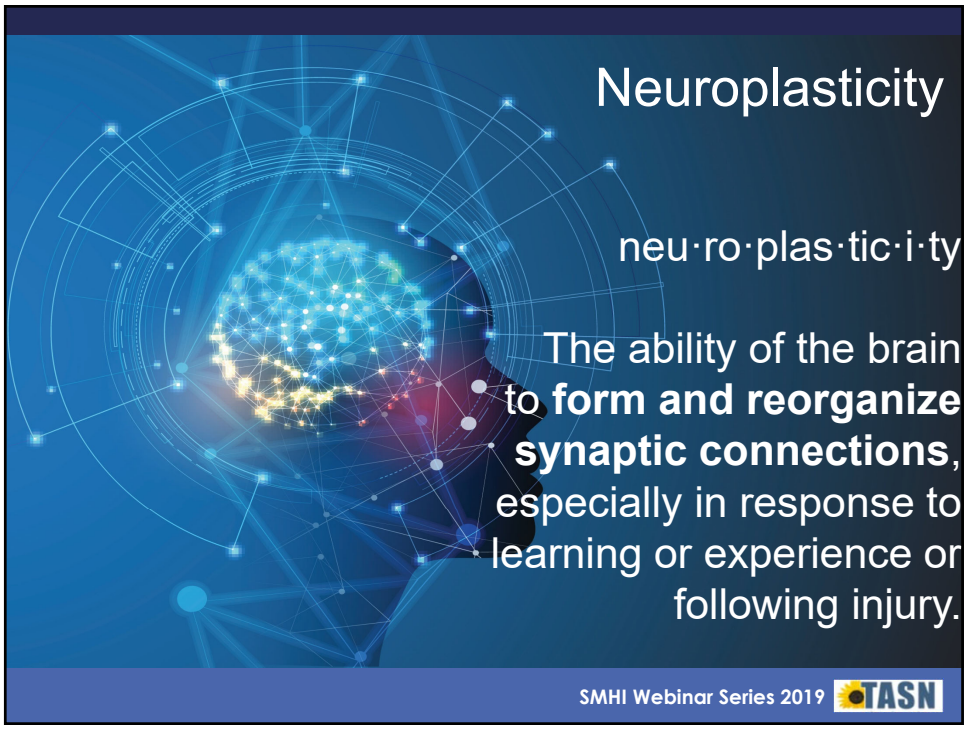
Neuroplasticity
neu·ro·plas·tic·i·ty
The ability of the brain to **form and reorganize synaptic connections**, especially in response to learning or experience or following injury.
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"…Place the oxygen mask on yourself first before helping small children or others who may need your assistance."

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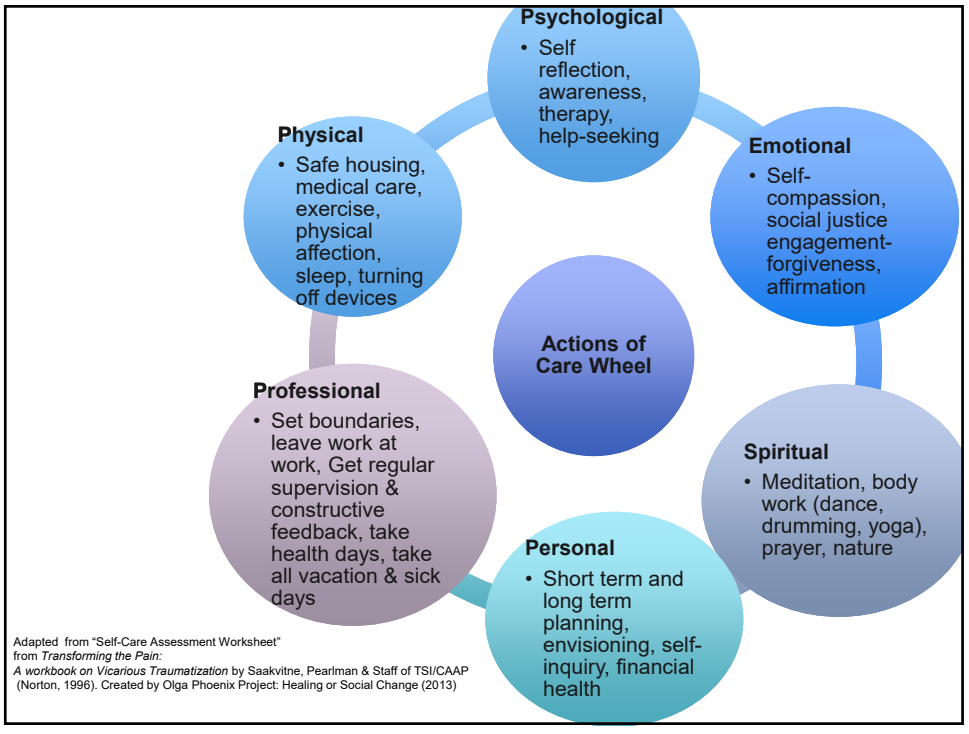
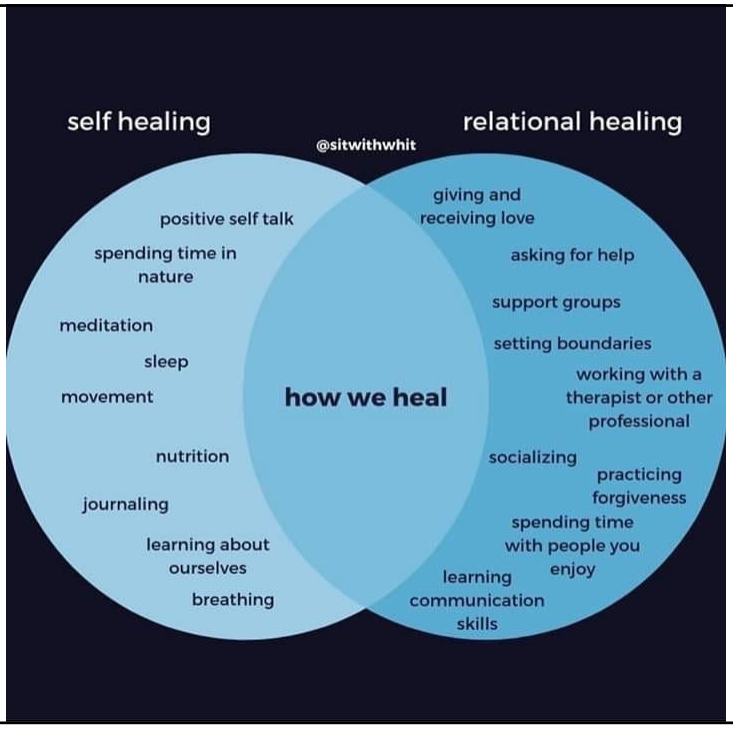
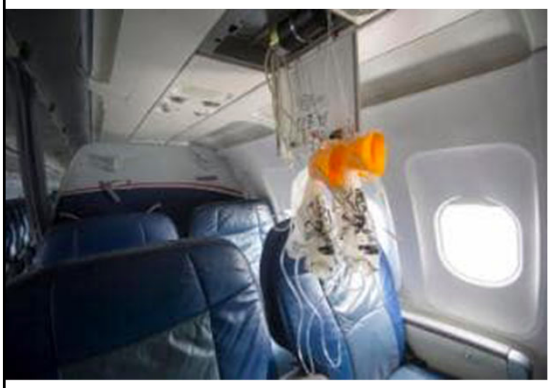


Adapted from "Self-Care Assessment Worksheet" from *Transforming the Pain: A workbook on Vicarious Traumatization* by Saakvitne, Pearlman & Staff of TSI/CAAP (Norton, 1996). Created by Olga Phoenix Project: Healing or Social Change (2013)





What if we not only looked at the passengers, but the whole plane's structure, culture, policies and practices?

Wellbeing is defined as people's positive evaluations of their lives, (which) includes positive emotion, engagement, satisfaction, and meaning

- Diener & Seligman, 2004

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The Healthy Workplace

Opportunity for personal control, covering variables conventionally labeled as discretion, decision latitude, participation	Opportunity for skill use and acquisition	Externally generated goals ranging across job demands, underload and overload, task identity, and work-home conflict
Variety in job content and location	Environmental clarity, role clarity, task feedback, and low future ambiguity	Social support, quality and quantity of social interactions
Availability of money and resources	Physical security—working conditions, degree of hazard, and similar themes	Valued social position in terms of the significance of a task or role
Supportive supervision	Career outlook, either as job security, as opportunity for advancement, or for a shift to other roles	Equity as justice both within one's organization and in that organization's relations with society

Happiness and Mental Health-A Framework of Vitamins in the Environment and Mental Processes in the Person (Warr, 2017)

Attributes of Resilience

Bonnie Bernard

Social Competence	• Ability to elicit positive responses from others creating positive relationships with both adults and peers;
Problem-solving skills	• Facilitating seeing oneself in control and resourcefulness in seeking help from others;
Autonomy	• Developing or fostering a sense of one's own identity and an ability to act independently and exert some control over one's environment;
A sense of purpose and future	• Articulated goals, educational aspirations, persistence, hopefulness, and a sense of a bright future.

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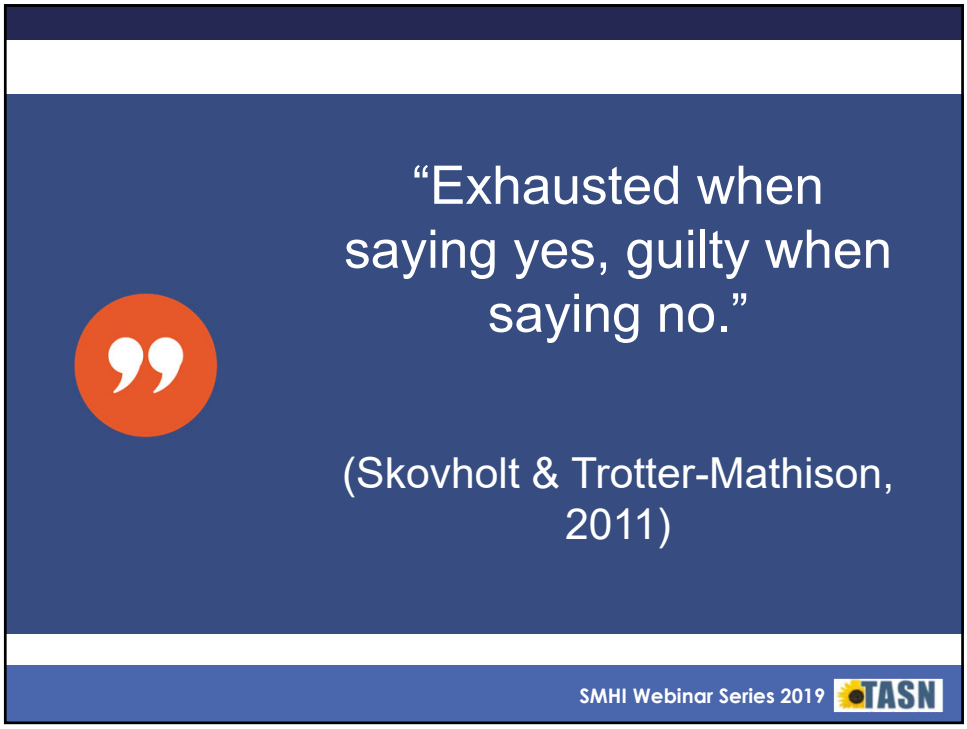

Doom and Gloom Stressors	Doom and Gloom Preventers/Interrupters
Overextension due to work demands	Accesses support networks
Large percentage of students who have trauma experiences	**Seeks support from colleagues**
Cumulative exposure to students who have trauma experiences over time	Institutes an accountability/buddy system
Lack of personal support in the workplace	**Engages in healthy debriefing**
Absence of peer support and supervision	Identifies areas to get trained and boost your competency
Professional isolation	**Provides community building activities**
Cultural clash between students and school	Schedules emotional check-ups (norm sharing during team meetings)
Lack of resources, personnel, and time to complete a job	**Employer provides on-going supervision and growth mindset-oriented feedback.**
Barriers to achieve intervention goals	Employer encourages and ensues professional development that is balanced in focusing on student and educator welfare

Barriers to helper seeking help-concerns about confidentiality, fear and stigmatization Miechenbaum (n/d)

What it would feel like if your SCHOOL team/agency/system had a culture of wellness & mental health?

- What would be different?
- What would you be doing more of or less of?
- How might you respond to one another's requests differently?
- How might you make requests differently?
- How would you make reflection, resilience and renewal a priority?

Adapted from: https://www.compasspoint.org/blog/organizational-self-care-why-it-matters-and-what-it-could-look-your-organization

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Safety.
Competence.
Autonomy.
Significant relationships.
Belonging.
Reflection.

It's possible, doable, and totally necessary at the individual, team, and systems levels.

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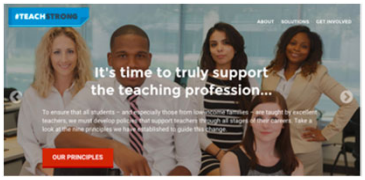
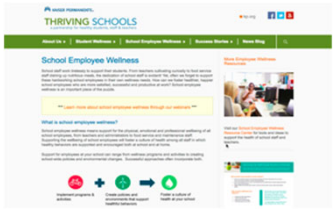
http://www.theteachingwell.org/

https://happyteacherrevolution.com/



https://teachstrong.org/about/

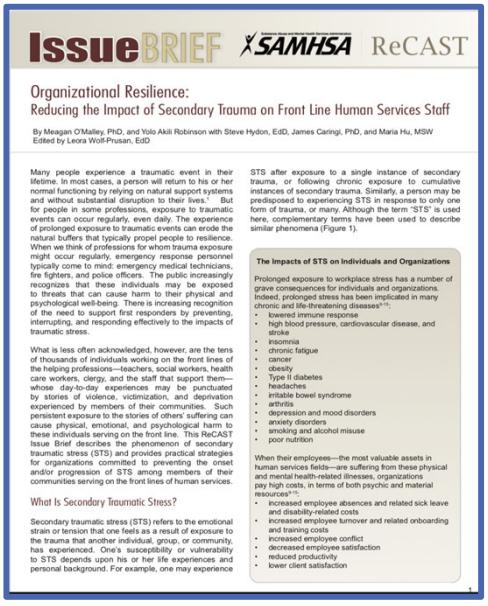


https://thrivingschools.kaiserpermanente.org/

http://www.apa.org/education/k12/teacher-stress.aspx

https://www.garrisoninstitute.org/what-were-working-on/care-for-the-caregivers/care-for-teachers/

"Organizational Resilience: Reducing the Impact of Secondary Trauma on Front Line Human Services Staff"
(SAMHSA, 2018)


IssueBRIEF SAMHSA ReCAST

Organizational Resilience:
Reducing the Impact of Secondary Trauma on Front Line Human Services Staff

By Meagan O'Malley, PhD, and Yolo Akili Robinson with Steve Hydon, EdD, James Caringi, PhD, and Maria Hu, MSW
Edited by Leora Wolf-Prusan, EdD

Many people experience a traumatic event in their lifetime. In most cases, a person will return to his or her normal functioning by relying on natural support systems and without substantial disruption to their lives.[1] But for people in some professions, exposure to traumatic events can occur regularly, even daily. The experience of prolonged exposure to traumatic events can erode the natural buffers that typically propel people to resilience. When we think of professions for whom trauma exposure might occur regularly, emergency response personnel typically come to mind: emergency medical technicians, fire fighters, and police officers. The public increasingly recognizes that these individuals may be exposed to threats that can cause harm to their physical and psychological well-being. There is increasing recognition of the need to support first responders by preventing, interrupting, and responding effectively to the impacts of traumatic stress.

What is less often acknowledged, however, are the tens of thousands of individuals working on the front lines of the helping professions—teachers, social workers, health care workers, clergy, and the staff that support them—whose day-to-day experiences may be punctuated by stories of violence, victimization, and deprivation experienced by members of their communities. Such persistent exposure to the stories of others' suffering can cause physical, emotional, and psychological harm to these individuals serving on the front line. This ReCAST Issue Brief describes the phenomenon of secondary traumatic stress (STS) and provides practical strategies for organizations committed to preventing the onset and/or progression of STS among members of their communities serving on the front lines of human services.

What Is Secondary Traumatic Stress?

Secondary traumatic stress (STS) refers to the emotional strain or tension that one feels as a result of exposure to the trauma that another individual, group, or community, has experienced. One's susceptibility or vulnerability to STS depends upon his or her life experiences and personal background. For example, one may experience STS after exposure to a single instance of secondary trauma, or following chronic exposure to cumulative instances of secondary trauma. Similarly, a person may be predisposed to experiencing STS in response to only one form of trauma, or many. Although the term "STS" is used here, complementary terms have been used to describe similar phenomena (Figure 1).

The Impacts of STS on Individuals and Organizations

Prolonged exposure to workplace stress has a number of grave consequences for individuals and organizations. Indeed, prolonged stress has been implicated in many chronic and life-threatening diseases[9-15]:

- lowered immune response
- high blood pressure, cardiovascular disease, and stroke
- insomnia
- chronic fatigue
- cancer
- obesity
- Type II diabetes
- headaches
- irritable bowel syndrome
- arthritis
- depression and mood disorders
- anxiety disorders
- smoking and alcohol misuse
- poor nutrition

When their employees—the most valuable assets in human services fields—are suffering from these physical and mental health-related illnesses, organizations pay high costs, in terms of both psychic and material resources[9-15]:

- increased employee absences and related sick leave and disability-related costs
- increased employee turnover and related onboarding and training costs
- increased employee conflict
- decreased employee satisfaction
- reduced productivity
- lower client satisfaction

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THANK YOU. No, really.

Leora Wolf-Prusan – Director of Partnerships & Learning – Lwolf@cars-rp.org

Center for Applied Research Solutions (CARS)

@Leorawp
@CARSRP
CARS.RP

708 College Avenue
Santa Rosa, California 95404
707.568.3800 Phone
www.cars-rp.org

Resources

TEND ACADEMY: https://www.tendacademy.ca/what-is-compassion-fatigue/ http://www.tendacademy.ca/category/organizational-health/

Strategies for Encouraging Staff Wellness in Trauma-Informed Organizations: http://www.chcs.org/resource/strategies-encouraging-staff-wellness-trauma-informed-organizations/

"Beyond Debriefing: How to Address Responders' Emotional Health": http://www.govtech.com/em/training/Beyond-Debriefing-Responders-Emotional-Health.html

"A guide to caring for yourself in the wake of traumatic police shootings" http://mashable.com/2016/07/08/police-shootings-mental-health/#vA4FTq7JFOqs

"How to Support Stressed-Out Teachers"
http://greatergood.berkeley.edu/article/item/how_to_support_stressed_out_teachers

Self-Care Readings compiled by the University of Buffalo: http://socialwork.buffalo.edu/resources/self-care-starter-kit/additional-self-care-resources/self-care-readings.html

"ORGANIZATIONAL SELF-CARE: WHY IT MATTERS AND WHAT IT COULD LOOK LIKE IN YOUR ORGANIZATION": https://www.compasspoint.org/blog/organizational-self-care-why-it-matters-and-what-it-could-look-your-organization

"Managing teams in times of political trauma—what to do, what to say to boost psychological safety" https://medium.com/awaken-blog/managing-teams-in-times-of-political-trauma-what-to-do-what-to-say-to-boost-psychological-safety-b5782969d6fa

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