

SOAR Dialogue Highlights 6/18/19

Attendees: Emily Carmody, Kisha White, Gloria Turner, Stacey Costner, Vickie Payne, Christina Heggins, Candice Chilton, Malik Kennedy, Natasha Posey, Connie Ness, Mineko Holloway, Kathryn Coiner-Collier

Introductions

- Emily Carmody, NCCEH, Raleigh- Looking to schedule our trainings for the coming year, will post when we have them
- Kisha White, Supportive Housing Communities, Charlotte- no updates
- Gloria Turner, WakeMed PATH, Raleigh- no updates
- Stacey Costner, Mental Health Association of Cleveland County- waiting on Recon cases and submitting 2 applications
- Vickie Payne, Vocational Rehab, Burlington- no updates
- Christina Heggins, Mecklenburg County, Charlotte- waiting on decision about ESG grant for an additional SOAR caseworker
- Candice Chilton, Duke Health Systems, Durham- no updates
- Malik Kennedy, DUPD-HAT, Durham- 2 cases pending
- Natasha Posey, Southlight, Raleigh- lots of cases pending
- Connie Ness, Southlight, Raleigh- no updates
- Mineko Holloway, Craven County DSS- still learning
- Kathryn Coiner-Collier, Atrium Health, Charlotte- starting a few new cases

Announcements

- Be sure to submit SOAR outcomes to Emily! Annual outcome data will be due by June 30th which will be here before you know it. Please make sure your SOAR outcomes are up to date so your great work can be counted.

Secondary Trauma and Burnout

Overview

SOAR caseworkers in the field often feel the impact of secondary trauma and burnout. Many SOAR applicants that we work with have experienced first-hand trauma that SOAR caseworkers hear about over the course of completing SOAR applications. Secondary trauma can result from hearing these stories and may result in physical and emotional duress. Secondary trauma can also contribute to burnout on the job.

Burnout is an accumulation of excessive and ongoing stress that can result in physical, emotional, and mental exhaustion. Burnout can come from multiple sources, including interpersonal relationships and a lack of control of environmental factors that impact job duties. Burnout symptoms can also range from mild to more severe burnout which often mirrors depression.

Because SOAR caseworkers are at risk of burnout, it is important to discuss ways to recognize burnout and ways to overcome feelings of burnout.

What impacts have you felt from secondary trauma?

- When helping adults after a natural disaster, experienced secondary trauma after working with people who were traumatized
 - Lots of negative thinking that was draining
 - Difficult not to be overly reassuring and unrealistic
 - Had to take frequent breaks and schedule appointments with breaks after
- Felt like hit a brick wall after doing a high number of SOAR cases
 - Difficult to go to work
 - Thoughts were overwhelmingly negative
- Disconnection from life and other people
- Energy level is low
- Impacted my mood and demeanor with my children
 - Repeated stories of childhood abuse and trauma
 - More controlling of kids and what activities they did as a protective measure

On a day-to-day basis, what are strategies that you use to reduce secondary trauma?

- Give the applicant back their stories
 - Turning of the switch in my mind
 - Focusing on the effort — I helped in the best way I could
- Take my lunch break before I go home — allows for quiet time in a peaceful place to let the work roll off of me
- To the best you can, look at starting and ending your day in calm settings
- Meditation or prayer
 - Loving kindness meditations can be useful in offering love to others and distinguishing boundaries
- Lighting a candle for your clients
- Mimicking wiping off yourself to “wipe off the day” at the end of the day before going into your home
- Recognizing it is their journey, not mine and recognizing where we do not have control
- Taking time off as needed
- Reducing the number of cases that you are working on

What are some symptoms or signs that you are becoming burnt out?

- Dreams about patients or work and waking up not feeling rested
- Fatigue
- Being short-tempered or easily frustrated
- Being tearful
- Headaches and other physical aches and pains

- Feelings of guilt
- Feeling tired after activities that usually provide energy (working out, socializing, time alone, etc.)
- Increases in cynicism and detachment from the people I work with
 - Tendency to blame the victim
 - See clients in a negative light
 - Overly critical
 - Feeling contempt towards clients
- Increases in numbing activities (smoking, drinking, tv watching, shopping, etc.)
- Reactive/rash decision making to make a change
- Sleep patterns are disrupted
- Increase in job searching and fantasies about other jobs

What are some strategies you utilize to overcome burn out?

- Talk with supervisor
 - Ask for support
 - Set expectations on workload and response times
 - Ask for a decrease in workload
- Many people in helping professions have problems with asking for help
 - DEARMAN is an exercise from DBT that can help to frame an ask for help
 - Emily will send out link to DEARMAN exercise
- Create a way to learn something new on the job (new skill, new area of interest, etc.)
- Look at routines to see where creating unnecessary work and create more efficient routines
- Reach out to other people for support – often they can see your burn out before you can
- Keeping personal lives full – find a passion outside of work and something to look forward to
- Turn work phone off at home and do not turn on until the next day if possible
- Avoid working at home so that you have a haven from work
- Turn off phone notifications to reduce alerts and follow positive messaging on social media
- Create a small list (1-3 things) that you can do on a regular basis that you know give you positive energy (workout, call a friend, etc.)
- Give yourself personal time in the morning before you day begins
- Develop rituals like a bedtime to help yourself get 7-8 hours of sleep

Next SOAR Dialogue Call will be August 20th at 10 AM: <https://www.ncceh.org/events/1348/>