

# NO MORE EMPTY CUPS:

## CREATING MORE ROOM FOR SELF-CARE IN THE WORKPLACE

**Trace Fleming-Trice, LMSW**  
**Sean Creech, LICSW**

WE BET YOU'VE SEEN THIS MEME...





You can't pour  
from an empty cup.  
Take care of yourself first.

© NotGalvan.com

**YOU CAN'T POUR  
FROM AN EMPTY  
CUP. TAKE CARE OF  
YOURSELF FIRST!**

BLACKWORDS.COM



you can't pour  
from an  
empty cup



©FundRazr - raise money for a cause close to your heart. Start today.

HEY, TRACE.



### Trace Fleming-Trice, LMSW

- Pronouns: She/Her/Hers
- Sexual Violence Program Director for 2nd Chance, Inc. in Anniston, Alabama
- Reasonably friendly
- Mostly harmless
- Hufflepuff
- Over the “empty cups” concept

HI, SEAN.



**Sean Creech, LICSW**

- Pronouns: He/His/Him
- Likes pina coladas but not walks in the rain
- Social Work Instructor, Jacksonville State University
- Habitual lock checker (also thinks it's possible he left the iron on)
- Should have been gluten free since 2003

WHAT IF WE TOLD YOU WE CAN DO MORE THAN USE TIRED METAPHORS TO ADDRESS SELF-CARE?



## LET'S TALK ABOUT WHY WE NEED TO TALK ABOUT SELF-CARE IN THE WORKPLACE

Because of the often high stress, highly emotional work that helping professionals are exposed to... we have the work hazards of:

- **Burnout**
- **Compassion Fatigue**
- **Vicarious Trauma**

## HOW DO WE RESPOND TO THESE WORK HAZARDS?

As individuals?

Typically- not great.



As organizations? Also, typically, not great.

SURPRISING?

Not  
really

▪

These issues are being talked about more, but we still have so much to do for the sustainability of our helping professionals.

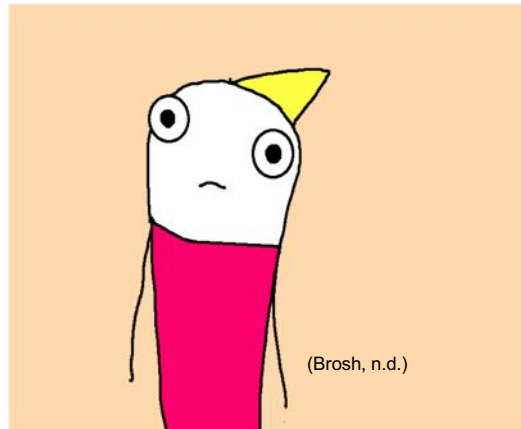
SO... WHY ARE WE TALKING ABOUT THIS TODAY?

- Because self-care is an **ethical** part of our practice.
- Professionals often need help understanding they sometimes need help.
- We're also pretty lousy at asking for and getting help.

## BREAKING IT DOWN FURTHER:

Today, our main focus is going to be on what leaders can do to get started with mitigating

burnout, compassion fatigue, and vicarious trauma in their **organizations.**



## WHAT DOES BURNOUT, COMPASSION FATIGUE, AND VT LOOK LIKE?



## HELPING PROFESSIONALS WITH BURNOUT MAY EXPERIENCE:

- Physical and emotional exhaustion
- Sickness and chronic pain
- Alienation from (work-related) activities
- Find work increasingly stressful and frustrating.
- Cynical about their working conditions & colleagues
- Numbness about work
- Reduced performance-negative about their tasks, find it hard to concentrate, are listless & lack creativity.

(PubMed Health, 2017)

## HELPERS WITH COMPASSION FATIGUE MAY EXPERIENCE:

- Chronic exhaustion (emotional, physical, or both)
- Reduced feelings of sympathy or empathy
- Dreading working for or taking care of another and **feeling guilty** as a result
- Feelings of irritability, **anger**, or **anxiety**
- Depersonalization
- Hypersensitivity or complete insensitivity to emotional material

(Good Therapy, 2016)

## HELPERS WITH COMPASSION FATIGUE MAY HAVE:



(Good Therapy, 2016)

- Trouble sleeping
- Impaired decision-making
- Problems in personal **relationships**
- Poor work-life balance
- Diminished sense of career fulfillment

## HELPERS WITH VICARIOUS TRAUMA

- **Emotional symptoms** can include lasting feelings of grief, **anxiety**, or sadness. Some people may become irritable or angry, become distracted frequently; A person might also begin to feel generally unsafe.
- **Behavioral symptoms** might include **isolation**, increase in alcohol or substance consumption, altered eating habits, and difficulty sleeping.

(Good Therapy, 2016)



## MORE ON VT

- **Physiological symptoms**, which affect physical well-being, can appear in the form of headaches, rashes, ulcers, or heartburn, among others.
- **Cognitive symptoms** may take the form of cynicism and **negativity** or lead to difficulty concentrating, remembering, or making decisions in daily life.



## SELF-CARE IS THE ANSWER! RIGHT?



(Brosh, 2013)

Well... yes...  
**But!**

*We have to realize that self-care is not always that easy for our people...*

## WHAT PREVENTS ACCESS TO SELF-CARE?

- **Self-care can be expensive!**
  - “Treat yourself- you deserve it!” isn’t always realistic or a possibility
- **It’s not always truly available!**
  - It’s time consuming
  - Sensitive/inclusive self-care options not always present
  - May have to share the space with clients or “the work”

## WHAT ELSE PREVENTS ACCESS?

- **There’s stigma attached to it!**
  - It’s a “luxury”
  - It’s “selfish”
  - “You’re weak if you need it”
  - You’re taking service time from someone who “truly needs it”
- **Self-Care stereotypes: Hot baths, pedicures, Yoga**

PLUS, OCCASIONALLY, SOME OF US HAVE TROUBLE SUCCESSFULLY RESPONDING TO STAFF MEMBERS...



SO, POSSIBLY, THE FIRST STEP TO UNDERSTANDING A PROBLEM IS ADMITTING THAT THERE MIGHT BE A PROBLEM...



(Brosh, 2010)

## TRUE STORIES...

*“So, I went to talk to my supervisor about how overwhelmed I was feeling and their response was to tell me that if I couldn’t ‘hack’ it, maybe I should be looking for another job.” - Dual DV/SV Program Advocate*

*“I can’t talk to my supervisor about anything. I feel constantly like I’m walking on eggshells in the office. I feel bullied by her and I don’t know how to fix the situation. I love this work, and I really can’t lose my job, but being in the office makes me miserable.” -Sexual Violence Victim Advocate*

## ANOTHER TRUE STORY...

**“I realized something really needed to change when I thought about driving my car off the road one morning when I was headed to the office- not because I wanted to die-- but just so I could have a break from the work.” - Social worker, volunteer dual DV/SV Program**

## BE HONEST... WHAT'S YOUR ORG CULTURE?

**A healthy organizational culture looks everyone in the agency feels respected and safe-**

**There is fairness, clear and strong communication, and shared goals.**

***A vicarious-trauma informed organization is proactive about trauma and addresses emotional hazards through policies, procedures, practices, and programs.***

**(OVC, 2018)**

## ACTIVE LISTENING?



Really listen  
to your team.

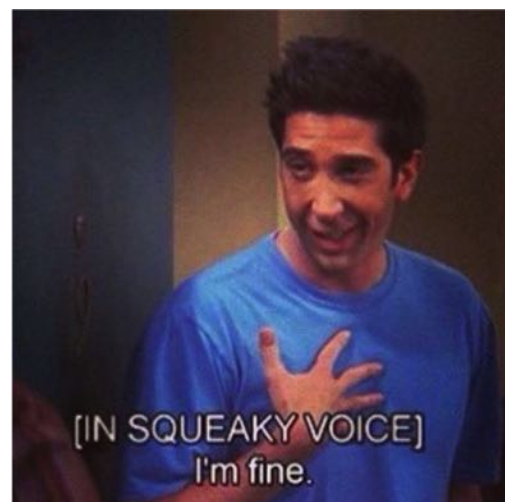
**If someone says  
there is a  
problem, then  
there is one.**

*Even if you don't  
agree.*

## ARE WE PAYING ATTENTION?

**Are your employees at  
risk?**

- **Unclear job expectations.**
- **Dysfunctional workplace dynamics.**
- **Lack of control.**



(Mayo Clinic, 2015)

## MORE SYMPTOMS OF UNHEALTHY ORGS

- **Mismatch in values.**
- **Poor job fit.**
- **Extremes of activity.**
- **Lack of social support.**
- **Work-life imbalance.**

(Mayo Clinic, 2015)

## BUT WHY?

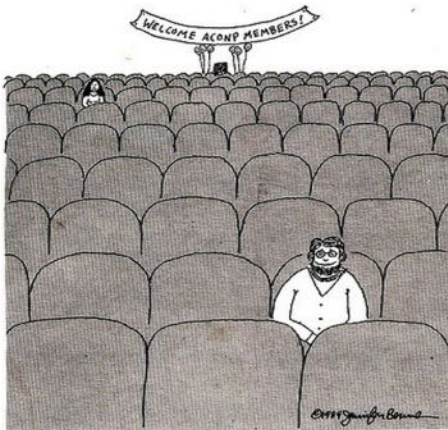
Traumatic events - and chronic stress - can affect organizations in the same ways that they affect people. Without intending to do so, or even recognizing that it has happened, entire systems can become **“trauma-organized.”**

Inadvertently, the organization can begin to repeat the same behaviors as the clients that they are serving. These unhealthy patterns keep the staff “stuck” so that they can’t learn, grow, and change.

(Bloom, 2012).

# ORGANIZATIONAL ALGEBRA

ADULT CHILDREN OF NORMAL PARENTS,  
ANNUAL CONVENTION.



Folks in the helping professions (because they are people on this planet) often have had trauma exposure themselves in their formative years- and may not have had access to services to help them with that trauma, and are then going into work that exposes them to more trauma...

**THEN ADD**

The fact that organizations are not always recognizing this.

**MEANS**





## THINGS BECOME A HOT MESS-



Throw in:

- Increased work loads
- Decreased or insufficient pay
- Limited benefits
- Student loan nightmares
- Ego and project ownership
- Hires with limited experience
- Poor training
- Limited budgets for continuing education, case reviews, supervision...

(Bloom, 2014)

## OH- AND THEN ADD IN...

- A lack of safety, trust, and crisis driven work
  - Loss of emotional management
  - Organizational learning disabilities, dissociation, and amnesia
  - Organizational miscommunication, conflict...
- Authoritarianism, learned helplessness, and silent dissent
  - Punishment, revenge, and organizational injustice
  - Unresolved grief, re-enactment, and decline (Bloom, 2014)



## SO, IS THERE ANY GOOD NEWS?



There are many tools available for those wanting to explore vicarious trauma mitigation for their staff that you can go over and geek out about as much as you want! And sincerely, we hope you will!

Here are a few things to get you started.

## MAKE SURE YOU HAVE THE BASICS...

- Living wages
- Healthcare benefits
- Retirement plans



## THEN TRY MEASURING...

Here are some **free** measurement tools:

### **The Professional Quality of Life Scale (Proqol)**

- It's free!
- It's fairly short- it's a 30-item self report on the positive and negative aspects of caring.
- It measures both compassion satisfaction *and* compassion fatigue

### **The Happy Healthy Nonprofit: The Nonprofit Burnout Assessment**

- Also free!
- Simple to use and measures employee burnout

### **The Vicarious Trauma–Organizational Readiness Guide (VT-ORG) for Victim Services**

- Free as well! Huzzah!
- It can (and should be) customized to each org
- Can be used to address work-related trauma exposure

## THE SANCTUARY MODEL

Created by Sandra Bloom, the Sanctuary Model “represents a theory-based, trauma-informed, evidence supported, whole-culture approach” to help create organizational change.

It uses Quaker philosophy and democratic, social justice minded ideals for trauma recovery.

It operates on the guiding principles called the “Seven Commitments.”

These principles apply to everyone in the organization- and it is expected that leaders be fully committed to the process in order for it to be successful.

<http://www.sanctuaryweb.com>

(Bloom, n.d)

## BRIEF EMOTIONAL SUPPORT TEAMS (BEST)

Developed at Ohio State University as part of the Stress Trauma and Resilience (STAR) Program as a response to helping professionals find emotional support to mitigate secondary trauma symptoms.

- **This program has been recognized as best practice by the Joint Commission.**

(Yeager, 2018)

<https://wexnermedical.osu.edu/neurological-institute/departments-and-centers/departments/department-psychiatry-and-behavioral-health/star>

# THE OFFICE OF VICTIMS OF CRIME VICARIOUS TRAUMA TOOLKIT

Has excellent information for leaders working to create vicarious trauma-informed workplaces. They offer information on vicarious trauma for:

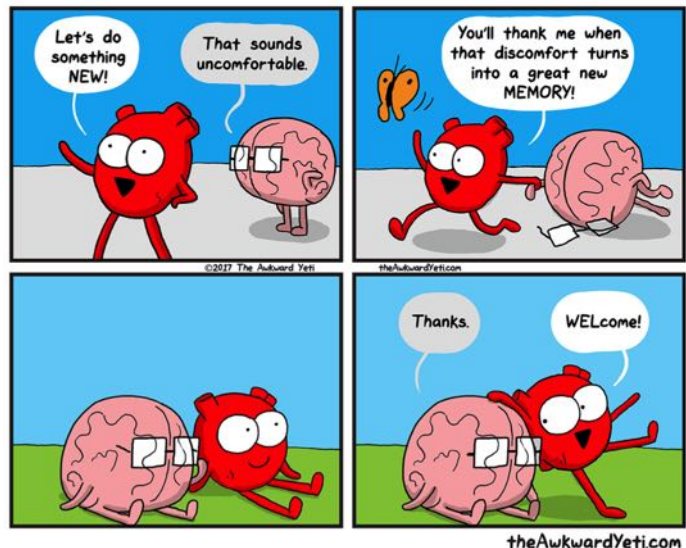
- Victim Service Professionals
- EMS
- Fire Service Professionals
- Law Enforcement

(VTT, 2018)

## CULTURE SHOCK!

Some other things organizational leadership can do to make some positive changes:

- Make self-care part of your mission statement
- Start talking about self-care during the first job interview



(Bell, Kulkarni, Dalton 2003)

## CULTURE SHOCK CONTINUED...

- Vary workload- mix things up
- Allow-- heck! Encourage!-- staff taking vacations and time off when they are ill
- Let staff personalize their work space
- Provide comforts like snacks, music, furniture *they* pick out
- Create policies and procedures based on supporting vicarious trauma mitigation

## CULTURE SHOCKING SOME MORE!

- Talk about self-care in staff meetings and in supervision
- “Wellness Fairies”
- Work on basic safety- what would make the staff feel more physically safe in the buildings where they work?
- Let staff pick your holidays each year

(Bell, Kulkarni, Dalton 2003)

BUT WAIT... THERE'S MORE...



The fine folks of Alice Springs Women's Shelter (Alice Springs, Northern Territory, Australia) have written a great P&P on vicarious trauma. They've placed it online and we'd like to share it with you!

AND OUR PRIDE AND JOY

## Self-Care for Advocates



Anti-Violence &  
Social Justice  
Movement  
Advocates



A Safe  
Community



Intersectional  
Feminism



Joy, Laughter  
& Fun



Information &  
Education



Empowerment  
& Support

## SELF-CARE FOR ADVOCATES- FTW!

Created in 2014, this space is growing daily (over 2500+ members!).

It's filled with a ton of cool advocate kids just waiting for you and your teams are welcome to join.

Find us on Facebook:

<https://www.facebook.com/groups/Selfcareforadvocates>

### FINAL THOUGHTS...

You can do this.

Your team can do this.

Your organization can do this.

Change is difficult, not impossible. Just start.

**You will mess up. It will get messy.**

**It will be worth it.**



**WE BELIEVE IN YOU!**



# WANT TO TALK LATER?



# YAY! US TOO!

Here's how to find us:

Trace Fleming-Trice

[trace@2ndchanceinc.org](mailto:trace@2ndchanceinc.org)

Sean Creech

[sccreech@jsu.edu](mailto:sccreech@jsu.edu)

## REFERENCES

Alice Springs Women Shelter. (n.d.). Vicarious Trauma Policy and Procedure. Retrieved February 01, 2018, from [asws.org.au](http://asws.org.au)

Bell, Kulkarni, Dalton. (2003). Organizational Prevention of Vicarious Trauma. *Families in Society: The Journal of Contemporary Human Services*, 463-470. Retrieved February 01, 2018, from [https://vt.ova.ojv.org/asset/Documents/OS\\_Organizational\\_Prevention\\_VT-508.pdf](https://vt.ova.ojv.org/asset/Documents/OS_Organizational_Prevention_VT-508.pdf).

Bloom, S. L. (2005) The Sanctuary Model of Organizational Change for Children's Residential Treatment. *Therapeutic Community: The International Journal for Therapeutic and Supportive Organizations* 26(1): 65-81.

Bloom, S. L. (2012). *Trauma-Organized Systems*. Encyclopedia of Trauma. C. R. Figley. Thousand Oaks, CA, Sage: 741-743.

Brosh, A. (n.d.). Boyfriend Doesn't Have Ebola. Probably. Retrieved February 01, 2018, from <http://hyperboleandahalf.blogspot.com/2010/02/boyfriend-doesnt-have-ebola-probably.html>

Delaney, H. (2018, June 15). Perpetual Guardian's 4-day workweek trial: Qualitative research analysis. Retrieved August 30, 2018, from [https://static1.squarespace.com/static/5a93121d3917ee828d5f282b/t/5b4e425c8a922dd864bd18d0/1531855454772/Final Perpetual Guardian report\\_Dr Helen Delaney\\_July 2018.pdf](https://static1.squarespace.com/static/5a93121d3917ee828d5f282b/t/5b4e425c8a922dd864bd18d0/1531855454772/Final+Perpetual+Guardian+report_Dr+Helen+Delaney_July+2018.pdf)

Good Therapy. (2018, January 09). Job Burnout. Retrieved February 1, 2018, from <https://www.goodtherapy.org/blog/psychpedia/job-burnout>

Good Therapy. (2017, August 30). The Cost of Caring: 10 Ways to Prevent Compassion Fatigue. Retrieved February 1, 2018, from <https://www.goodtherapy.org/blog/the-cost-of-caring-10-ways-to-prevent-compassion-fatigue-0209167>

Happy Healthy Nonprofit. (n.d.). Happy Healthy Nonprofit Burnout Assessment. Retrieved February 01, 2018, from <https://training.fws.gov/topic/online-training/webinars/documents/fws-friends/HH-NPburnout-assessment.pdf>

Mayo Clinic. (2015, September 17). Know the signs of job burnout. Retrieved February 01, 2018, from <https://www.mayoclinic.org/healthy-lifestyle/adult-health/in-depth/burnout/art-20046642>

# REFERENCES CONT.

Northeastern University's Institute on Urban Health Research and Practice. (2018, March). Vicarious Trauma–Organizational Readiness Guide for Victim Services. Retrieved March, 2018, from [https://vt.ovc.ojp.gov/ojpasset/Documents/OS\\_VT-ORG\\_Victim\\_Services-508.pdf](https://vt.ovc.ojp.gov/ojpasset/Documents/OS_VT-ORG_Victim_Services-508.pdf)

Office for Victims of Crime. (2018). The Vicarious Trauma Toolkit. Retrieved April, 2018, from <https://vt.ovc.ojp.gov/tools-for-ems/management-and-supervision>

Office for Victims of Crime. (2018). Guidelines for a Vicarious Trauma-Informed Organization. Retrieved March, 2018, from [https://vt.ovc.ojp.gov/ojpasset/Documents/IMP\\_Making\\_The\\_Business\\_Case-508.pdf](https://vt.ovc.ojp.gov/ojpasset/Documents/IMP_Making_The_Business_Case-508.pdf)

Perpetual Guardian. (n.d.). A Resounding Success: Researchers Find that Four Day Work Week is Doable. Retrieved from <https://www.4dayweek.co.nz/>

Professional Quality of Life. (n.d.). Professional Quality of Life. Retrieved February 01, 2018, from <http://www.proqol.org/>

Pub Med Health. (2017, January 12). Depression: What is burnout? Retrieved February 01, 2018, from <https://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0072470/>

Yeager, Kenneth. (2018). How to Implement Brief Emotional Support Teams (BEST). The Ohio State University, Wexner Medical Center.