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The Neurobiology of Self Care

Understanding and responding to the impacts of working with traumatised children, families and adults.

Spots and Arrows 2021



1

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The Australian Childhood Foundation acknowledges Aboriginal and Torres Strait Islander people as the traditional custodians of this land and we pay our respect to their Elders past, present and future.




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Learning outcomes

- ✓ Explore the neurobiological impacts of working with traumatised populations
- ✓ Understand the personal, professional and organisational contributors to vicarious trauma and how we might mitigate these factors
- ✓ Explore strategies and activities that can support staff across a range of environments
- ✓ Utilise tools to assess wellbeing and develop a self-care plan
- ✓ Link this knowledge to your current practice and to trauma-responsive leadership strategies



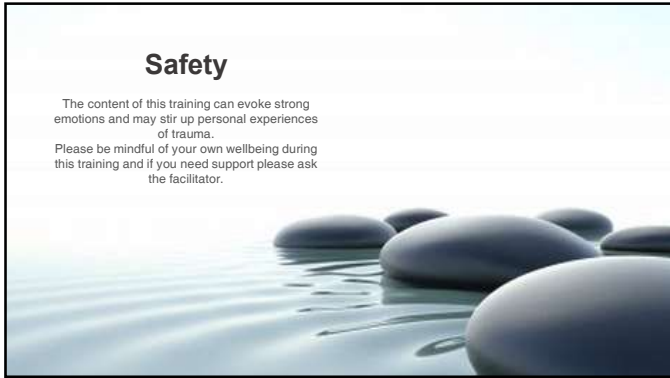
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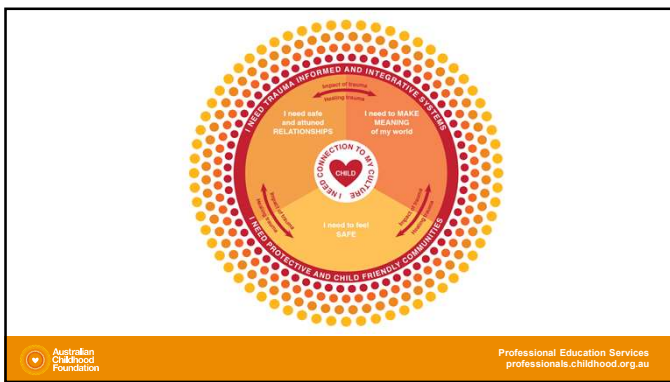
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Safety

The content of this training can evoke strong emotions and may stir up personal experiences of trauma. Please be mindful of your own wellbeing during this training and if you need support please ask the facilitator.



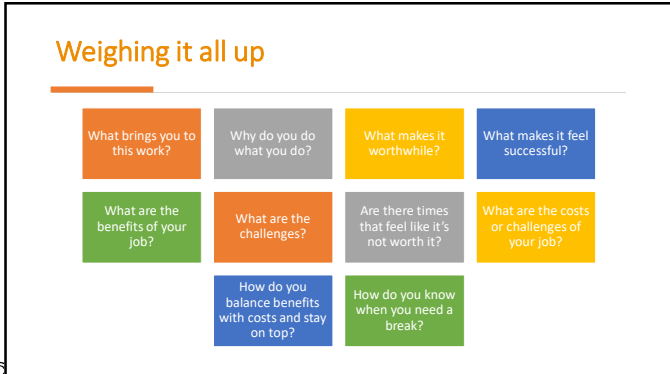
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5

Weighing it all up

What brings you to this work?	Why do you do what you do?	What makes it worthwhile?	What makes it feel successful?
What are the benefits of your job?	What are the challenges?	Are there times that feel like it's not worth it?	What are the costs or challenges of your job?
How do you balance benefits with costs and stay on top?	How do you know when you need a break?		



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6

2

REFLECT ON...

- What are some ways that you have changed over time because of your work?
- What sort of problems or people do you find it especially easy to empathise with?
- What sort of problems or people do you find it especially difficult to empathise with?
- What are some ways that caring about people who have been hurt affects you?

Levels of Impact

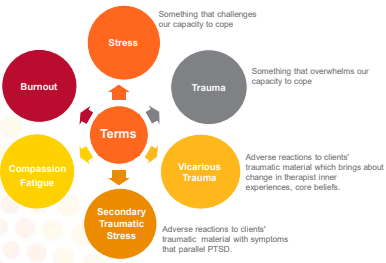
“Caring deeply about others makes us emotionally vulnerable to the catastrophes that affect them” – Charles Figley

Defining the terminology

Related to a feeling of being overloaded which is primary to client problems of chronicity and complexity, but can occur in any profession

A state of exhaustion & dysfunction – biologically, psychologically, & socially – as a result of prolonged exposure to compassion stress (Figley)

“Compassion fatigue”, “Secondary Traumatic Stress” & “Vicarious Trauma” are often used interchangeably. (Figley 1995; McCann & Saakvitne, 1995)



Empathy – a strength and a vulnerability

If empathy is to 'walk a mile in someone's shoes' we need to ensure we step out of those shoes at the end of the mile or we will wear those shoes all the time....and that is vicarious trauma.

- Somatic empathy (Rothschild 2004)
- Limbic resonance
- Cortical empathy



10

Somatic Empathy – mirroring body states

- An angry parent
- An exhausted Carer
- A frightened child
- A depressed teenager
- A calm, relaxed worker



11

Limbic Resonance & Cortical Empathy

Limbic Resonance (SUB-CORTICAL)

Our emotional state adjusts to match the emotional state of the person or people we are with

Cortical Empathy (PRE-FRONTAL CORTEX)

Our attempts to step outside our own experiences and imagine the experience and perspective of others

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12

Stress, trauma and the brain

● Neocortex
 ● Limbic
 ● Hippocampus
 ● Amygdala
 ● Diencephalon
 Hypothalamus
 Thalamus
 ● Corpus Callosum
 ● Cerebellum
 ● Brainstem

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The brain's response to uncertainty

- Survival as number 1 priority
- Unknowns are perceived as threats
- The brain activates a negative bias to prepare itself for 'worst case scenario'
- Threat responses are activated
- Explicit memory is compromised
- Executive functions go offline (concentration, rational thinking, problem solving, planning etc)

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14

Brain-Body implications of chronic stress - HPA Axis

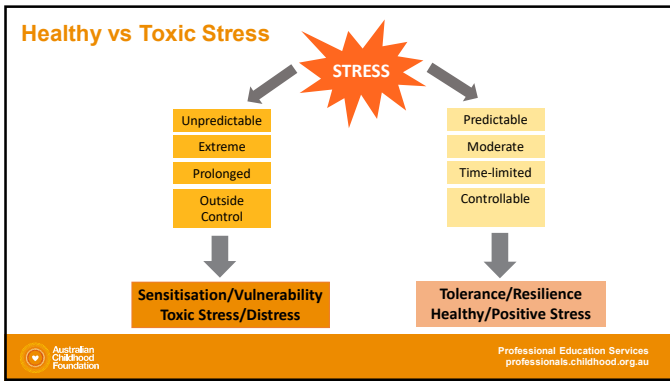
HYPOTHALAMUS
 CORTICOTROPIN-RELEASING HORMONE (CRH)
 PITUITARY GLAND
 ADRENOCORTICOTROPIC HORMONE (ACTH)
 NEGATIVE FEEDBACK
 CORTISOL

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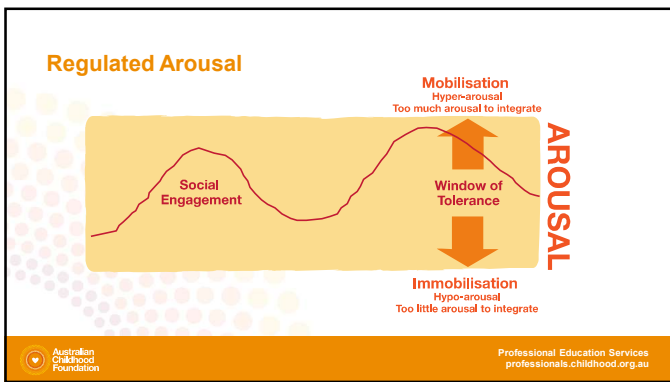
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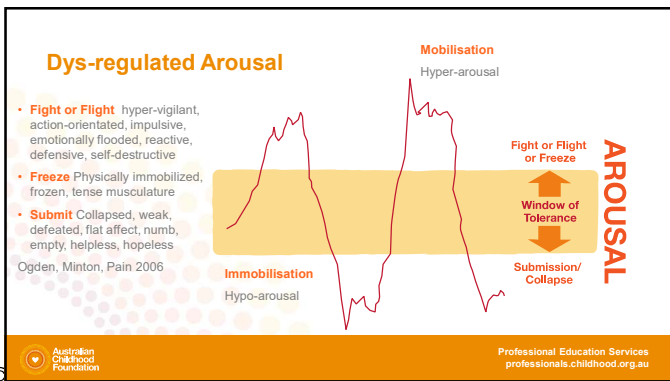
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16



17



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18

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Self assessment

- Useful to monitor impact on the practitioner
- E.g. tools: **Self Assessment Tool** and **ProQol** (Professional Quality of Life)
- <https://www.proqol.org/>
- NB. These provide a **snapshot in time** of how a worker is travelling re their sense of self in the work.


Consider ways you might use these in your own workplace and/or practice



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Contributing and Protective Factors

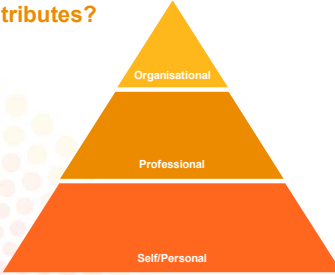


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What Contributes?



Organisational

Professional

Self/Personal

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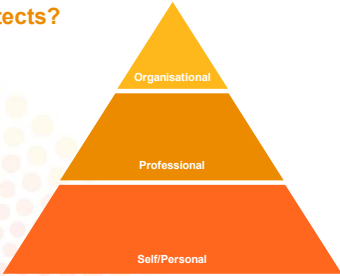
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<p>Organisational</p> <ul style="list-style-type: none"> • Poor caseload management • Lack of reflective supervision • Organisational culture that is not trauma-informed (impacts are not understood or acknowledged) • Workplace culture promotes ineffective coping strategies such as minimising, denial or "competitive stressing" • High level unpredictability or inflexibility 	<p>Professional</p> <ul style="list-style-type: none"> • Nature of work • Complex client relationships • Poor boundaries • Not accessing or making the most of supervision 	<p>Personal</p> <ul style="list-style-type: none"> • Lack of self-awareness (re levels of anxiety, stress and fatigue) • Poor work-life boundaries and balance • Ineffective coping strategies • No built in self-care/wellbeing activities • Unresolved or non-integrated personal trauma experiences • Lack of social support • Additional personal stressors such as health, family or finances
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What Protects?



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<p>Organisational</p> <ul style="list-style-type: none"> • Effective caseload management • Regular and effective reflective supervision • Trauma-informed organisational culture • Workplace culture promotes effective coping strategies such as self-care and honest debriefing • Workplace characterised by predictability and flexibility 	<p>Professional</p> <p>?</p>	<p>Personal</p> <p>?</p>
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Why does it matter?

The impacts of vicarious trauma

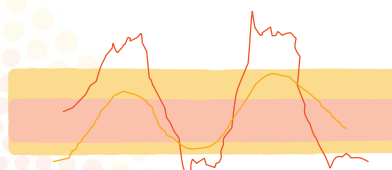


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Why does how I'm doing matter?

In relationships, one's ability to regulate one's window of tolerance will affect the other's ability to regulate their own window of tolerance



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The impacts of vicarious trauma in the workplace

- Impacts of protective/defensive responses in the office – reduced team cohesion, poor morale, less collaboration
- Impacts for clients: staff have reduced capacity for attunement, tolerance, problem solving. Clients stop experiencing safety in therapeutic relationship. 'Blocked care'
- Impacts of rigidity – resistance to any changes (staff meetings changing format, new policies re room or car bookings, etc)
- Impacts of chaos – paperwork not completed, meetings missed, 'contagious anxiety'
- Reduced productivity, increased sick leave, poor client outcomes


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30

Personal and Organisational Responses

- Prevention
- Management
- Repair






31

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Prevention

Reducing the risk of vicarious trauma

32

Prevention: Personal level

- Maintaining self care and prioritising healthy lifestyle/personal wellbeing
- Life outside of work incorporates: social, relaxing, spiritual, fun aspects
- Supportive and healthy relationships
- Work-life balance : maintaining healthy boundaries
- Personal & professional values align with the work
- Personal wellbeing plans are well-integrated & effective





33

Staying regulated during client work

- **IN THE MOMENT:**
 - Physically (regulate our body systems)
 - Mentally (keeping our cortex online)
- **AFTER THE MOMENT:**
 - Debrief (social engagement system!)
 - Physically - regulate body systems
- **BEFORE THE MOMENT (and all the time)**
 - Effective self care
 - Organisational culture



34

Prevention: Organisational Level

Factors that contribute to an effective organisational culture:

- Clear organisational purpose
- Focus on empowerment
- Participation in decision making
- Promote sense of belonging
- Have trust and confidence in workers
- Recognition and reward
- Caring attitude
- Emphasize integrity
- Provide diversity
- Promote excellence

35

Organisational factors

- Humour and fun
- Predictability and Flexibility
- Shared vulnerability – vicarious trauma is understood and acknowledged
- Acceptance rather than judgement
- Reflective supervision – accessible, regular and effective
- Supportive environment with shared goals and meaning
- Policies & procedures – protect workers, allow for flexibility, support healthy boundaries

36

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Management

Responding to vicarious trauma



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Management: Personal level

- Maintain self care routine and increase activities that promote wellbeing where possible
- Acknowledge impacts and practice self compassion
- Utilise leave entitlements, supervision, de-briefing
- Review boundaries and consider any changes that need to be made
- Regular mindfulness practice (set realistic goals for implementing this if not already part of daily routine)

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The role of Mindfulness in Self Care



Disactivation

Medial Pre-Frontal Cortex
the centre of Mindfulness/Self-awareness.

Mindfulness deactivates the Amygdala (the 'smoke-detector' of the brain) helping us to calm.

Mindfulness also develops the Medial Pre-Frontal Cortex, helping us to develop reflection and empathy for others.

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Management: Organisational Level

- Consider staff needs for: Trust/Dependence and Control
- Ensure access to supports: TIL, Annual Leave, Supervision, De-briefing
- Encourage self-care and support this however possible
- Create/maintain an environment of safety, predictability, openness



40

Repair

Promoting recovery from vicarious trauma



41

Repair: Personal level

- Utilise leave entitlements
- Access therapy/counselling and/or external supervision
- Remember that VT is diagnostically almost identical to PTSD, so consider what you would recommend for a client with PTS response
- Activities/strategies that promote nervous system regulation
- Prioritise sleep, rest, healthy lifestyle (reduce/avoid alcohol, caffeine, etc)
- Remain socially connected



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Your next steps to self care

- What are your next steps to self care?
- What are the opportunities to create self care and support across the program/organisation?





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Thank you for your participation today



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47
