A close-up photograph of a doctor in a white lab coat holding the hand of a patient. The doctor's stethoscope is visible around their neck. The patient is wearing a grey and white striped shirt. The background is a bright, clinical setting.

Compassion Fatigue: Navigating the Unknown, Taking Time for Self- Compassion and Resilience

National Center for Health in
Public Housing



January 26, 2022

Housekeeping

- All participants muted upon entry
- Engage in chat
- Raise hand if you would like to unmute
- Meeting is being recorded
- Slides and recording link will be sent via email

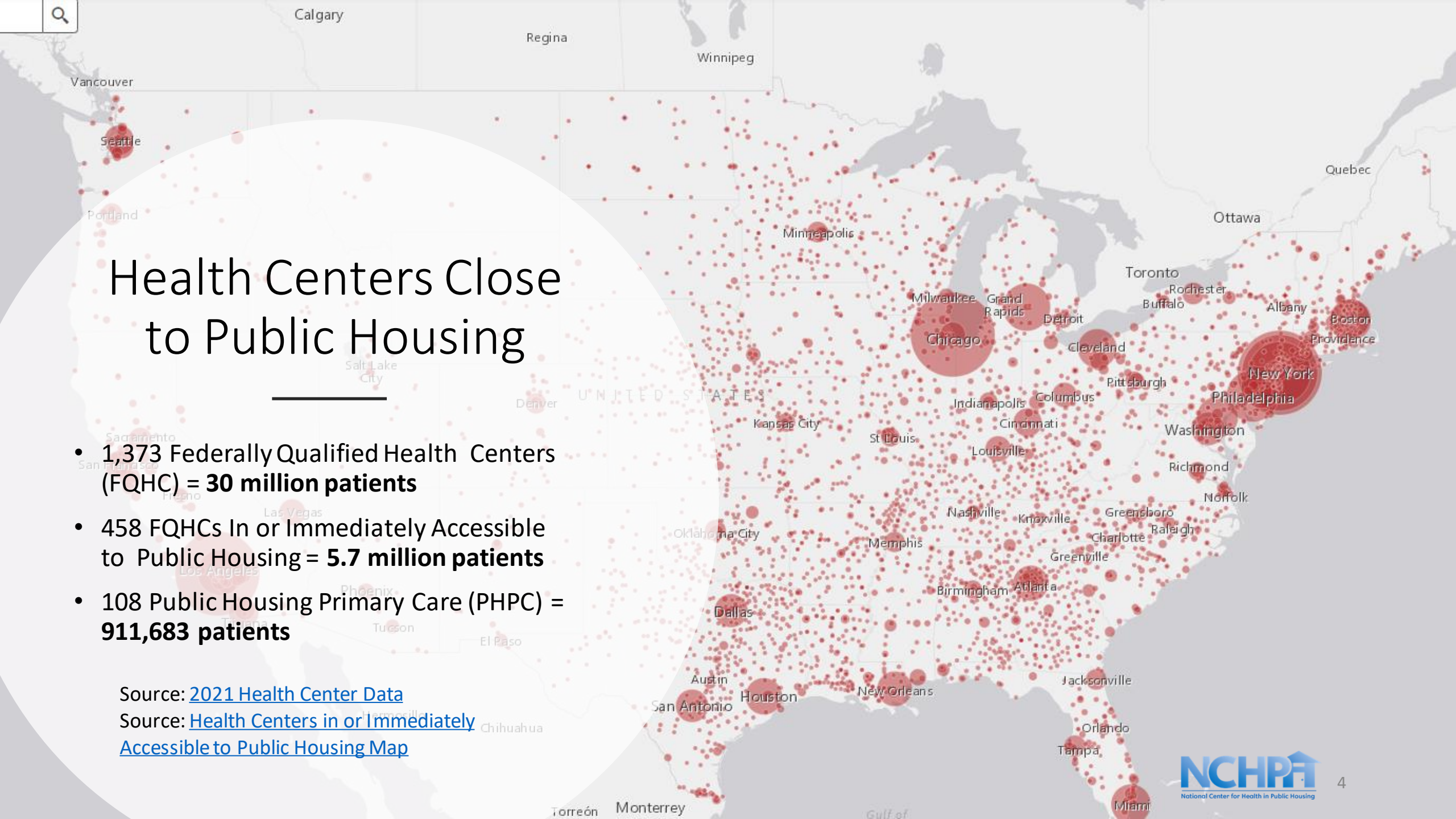
zoom



National Center for Health in Public Housing (NCHPH)

- The National Center for Health in Public Housing (NCHPH) is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U30CS09734, a National Training and Technical Assistance Partner (NTTAP) for \$2,006,400 and is 100% financed by this grant. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.
- The mission of the National Center for Health in Public Housing (NCHPH) is to strengthen the capacity of federally funded Public Housing Primary Care (PHPC) health centers and other health center grantees by providing training and a range of technical assistance.





Health Centers Close to Public Housing

- 1,373 Federally Qualified Health Centers (FQHC) = **30 million patients**
- 458 FQHCs In or Immediately Accessible to Public Housing = **5.7 million patients**
- 108 Public Housing Primary Care (PHPC) = **911,683 patients**

Source: [2021 Health Center Data](#)

Source: [Health Centers in or Immediately Accessible to Public Housing Map](#)

Public Housing Demographics



1.5 Million
Residents



2 Persons
Per Household



38% Disabled



52% White



91% Low
Income



43% African-
American



26% Latinx



19% Elderly



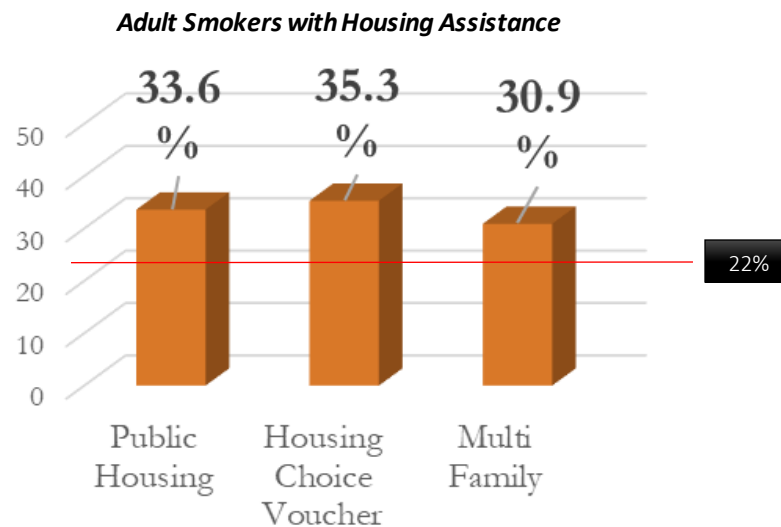
36% Children



32% Female Headed
Households with
Children

A Health Picture of HUD Assisted Adults, 2006 -2012

- Adults in HUD-assisted housing have higher rates of chronic health conditions and are greater utilizers of health care than the general population.



Source: [Helms, V. E., 2017, Sperling, J., & Steffen, B. L.](#)

	HUD-Assisted	Low-income renters	All Adults
Fair/Poor Health	35.8%	24%	13.8%
Overweight/Obese	71%	60%	64%
Disability	61%	42.8%	35.4%
Diabetes	17.6%	8.8%	9.5%
COPD	13.6%	8.4%	6.3%
Asthma	16.3%	13.5%	8.7%

Effects of Compassion Fatigue

- During the COVID-19 pandemic, thousands of health workers lost their lives. They put their own health and safety at risk so they could heal and comfort others.
- *More than 3,600 healthcare workers died during the first year of the COVID-19 pandemic
- *WHO estimates that between 80 000 and 180 000 health and care workers could have died from COVID-19 in the period between January 2020 to May 2021, converging to a medium scenario of 115 500 deaths



COVID-19 and Burnout

Staffing to administer vaccine –

“Staffing continues to be a struggle. The salaries people are requesting are too high for a community health center to sustain. Individuals are wanting to leave the healthcare industry due to exhaustion and not enough pay.”

“We are having difficulty finding adequate staffing. We are experiencing turnover from staff with burnout or higher salaries being offered at other employment.”

“Tired workers, not enough workers.”

“We are working to train our staff with all the new vaccine updates. This has been a challenge, in addition to hiring and training new employees.”

“We are experiencing a tremendous staff shortage.”

Source: [Health Center COVID-19 Survey](#)



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Today's Presenter

Amelia Roeschlein DSW, MA, LMFT

Pronouns: She/Her/Hers

*Consultant, Trauma Informed, Resilience-
Oriented Services*

National Council for Mental Wellbeing

Navigating the Unknown, Taking Time for Self-Compassion and Resilience

Poll Question: What contributes most to having a safe, nurturing and thriving work environment & culture?

- a) Learning Environment
- b) Cultural Humility
- c) Curiosity
- d) Clear Policies & Procedures
- e) Safety
- f) Connection

Learning Objectives

Understand	Understand the importance of manifesting safety and self-compassion
Learn	Learn how taking a resiliency and design thinking approach will allow us to navigate crisis and uncertainty
Practice	Practice the tools to develop wellness in ourselves and those we serve alongside during challenging times

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A tool for
implementation



**FOSTERING
RESILIENCE AND
RECOVERY:**

**A Change Package for Advancing
Trauma-Informed Primary Care**

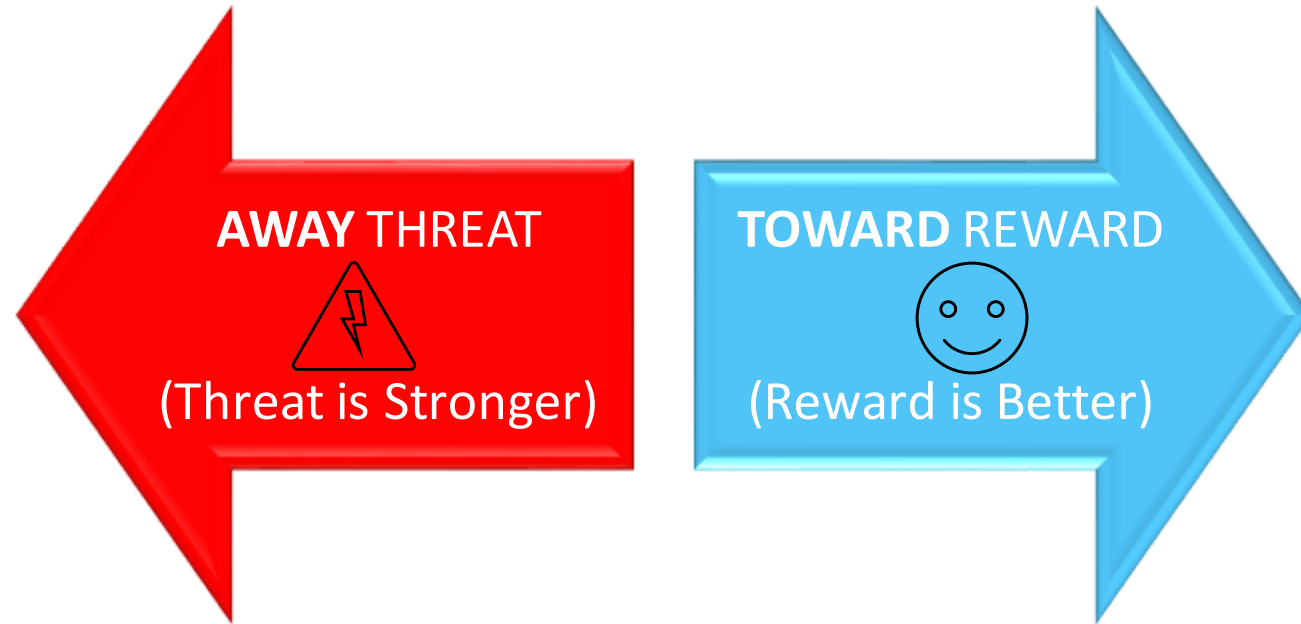
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The impact of stress- what we know



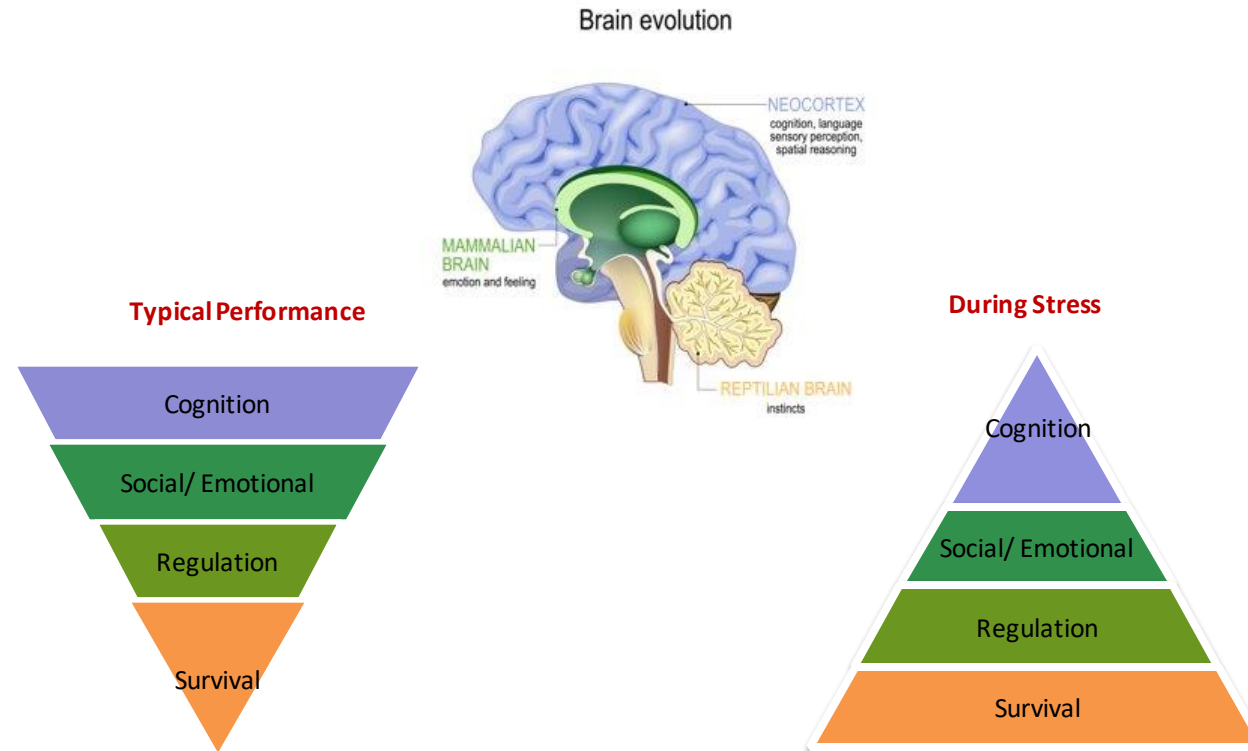
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The Brain's Threat Network



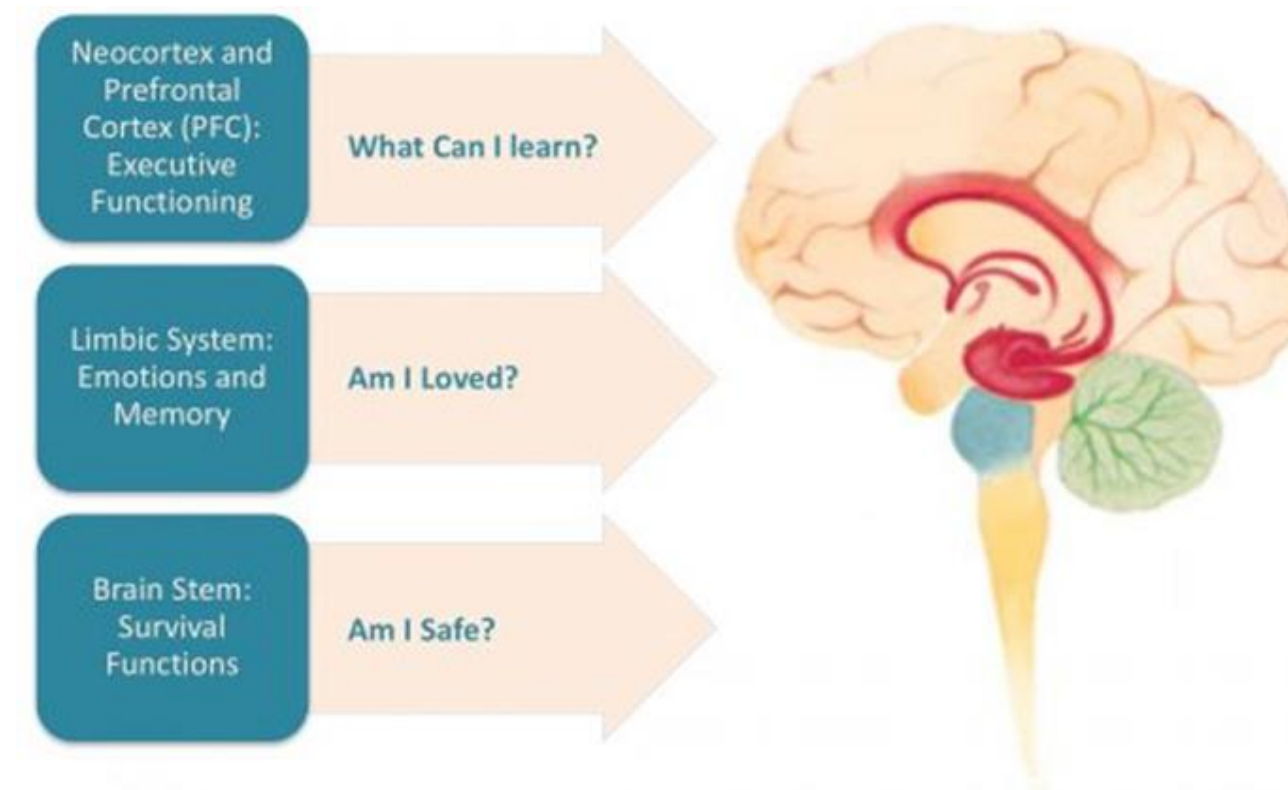
Source: NeuroLeadership Institute 2018

Impact of Stress on Brain Energy

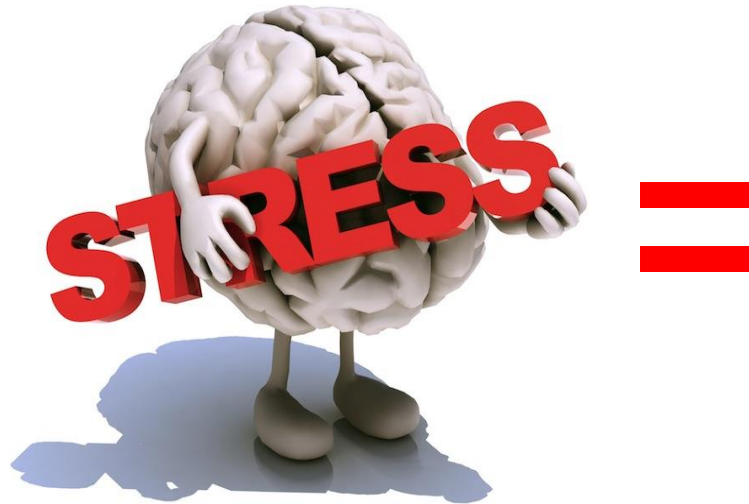


<https://www.neurosequential.com/covid-19-resources>

Brain Based Science



Survival Mode Response



Inability to

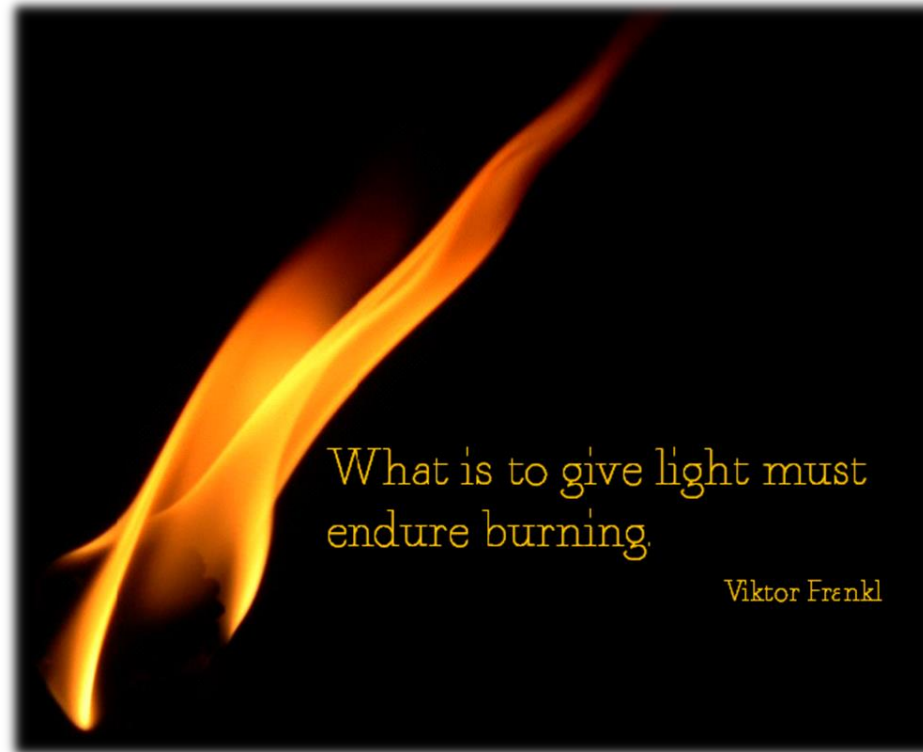
- Respond
- Learn
- Process

Reflections

- What is one practical way that you might bring this science into your daily work?
- Anything you might want to START or STOP doing?

Healthcare Staff/Social Service Workers

- Often have their own traumatic histories
- Seek to avoid re-experiencing their own emotions
- Respond personally to others' emotional states
- Perceive behavior as personal threat or provocation



Secondary Traumatic Stress and Related Conditions: Sorting One from Another

Secondary Traumatic Stress refers to the presence of PTSD symptoms caused by at least one indirect exposure to traumatic material. Several other terms capture elements of this definition but are not all interchangeable with it.

Compassion fatigue, a less stigmatizing way to describe secondary traumatic stress, has been used interchangeably with the term.

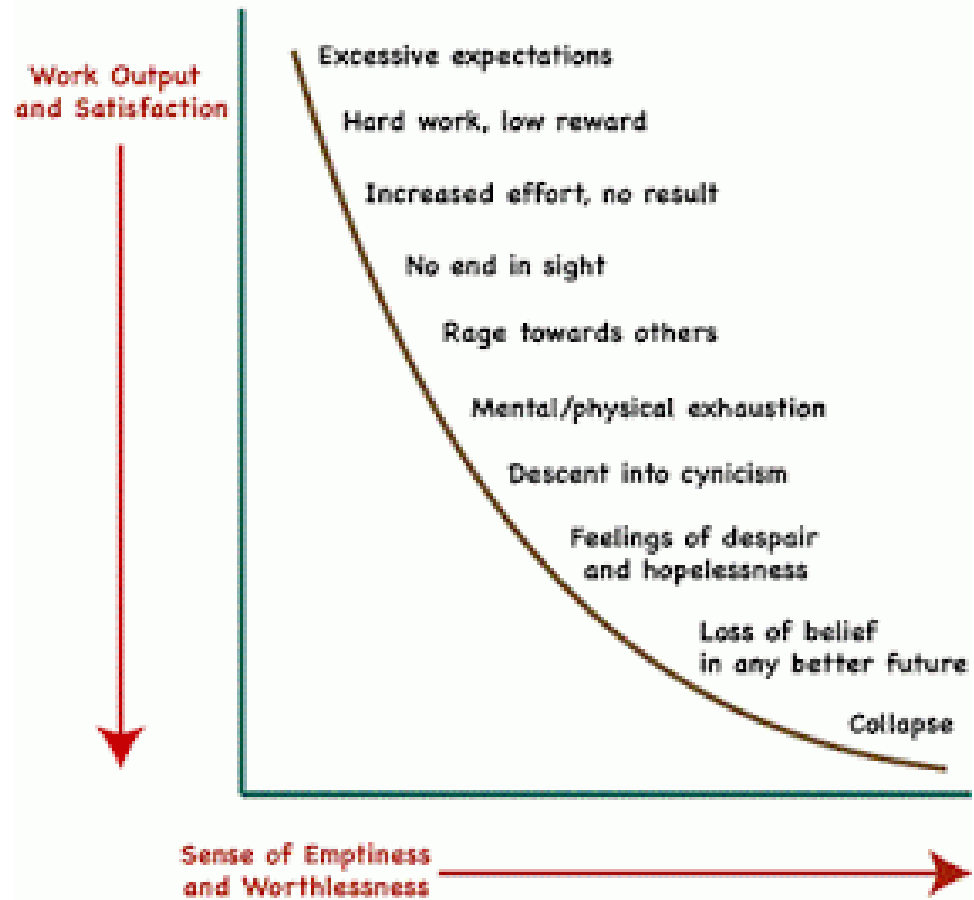
Compassion satisfaction refers to the positive feelings derived from competent performance as a trauma professional. It is characterized by positive relationships with colleagues, and the conviction that one's work makes a meaningful contribution to clients and society.

Vicarious trauma refers to changes in the inner experience of the therapist resulting from empathic engagement with a traumatized client. It is a theoretical term that focuses less on trauma symptoms and more on the covert cognitive changes that occur following cumulative exposure to another person's traumatic material.

Burnout is characterized by emotional exhaustion, depersonalization, and a reduced feeling of personal accomplishment. While it is also work-related, burnout develops as a result of general occupational stress; the term is not used to describe the effects of indirect trauma exposure specifically.



THE BURNOUT CURVE



What has happened to you?

To you

- Messages of worthlessness
- Never ending paperwork
- Hypocrisy
- Experiences of being dismissed as unimportant, less than
- When you were harmed for helping people
- When doing no harm causes harm to you
- When having to choose between work and family; work and self

Impact of Moral Distress on Organizations

- Compassion Fatigue/Burnout
- Turnover Rates
- Staff Engagement
- Organizational Resilience/Wellness



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Moral Safety

- The never-ending quest for understanding how organizations function in the healing process
- An attempt to reduce the **hypocrisy** that is present, both **explicitly and implicitly**
- A morally safe environment struggles with the issues of **honesty and integrity**

-Bloom, 2013



Want to learn more?

See Change Concept 1: Help all Individuals Feel Safety, Security and Trust

Safety and Respect: Creating a Safe and Secure Environment for EVERYBODY

- We need to create a mutually respectful interpersonal climate that fosters safety, trust, choice, collaboration, and empowerment
- **“Mistakes made here often.”**



We need to have...



Want to learn more?

See Change Concept 2: [Develop a Trauma-Informed Workforce](#)

Change Concept 3: Build Compassion Resilience in the Workforce

Compassion Resilience

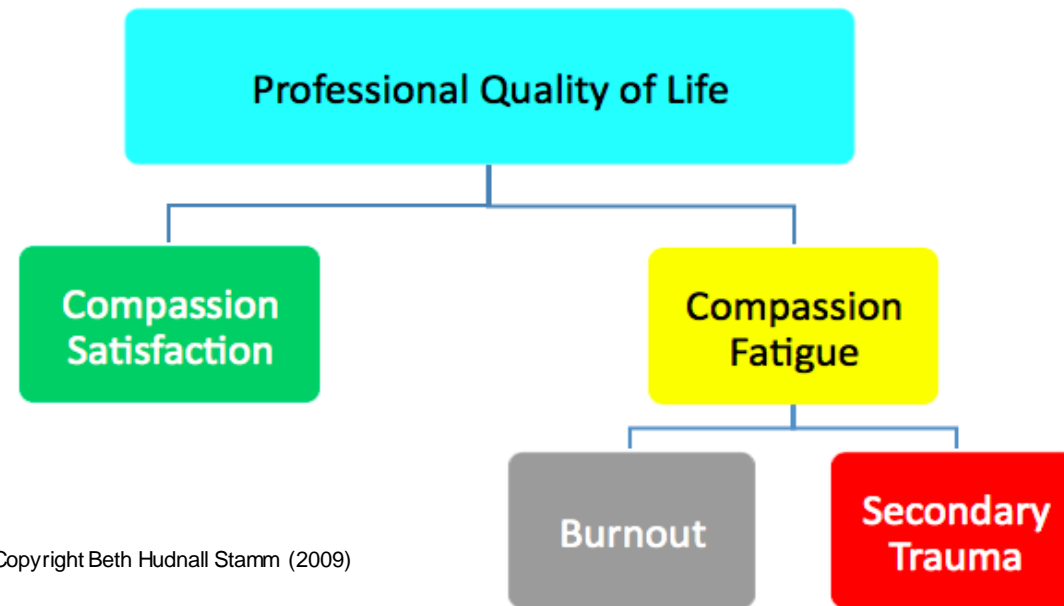
The ability to maintain our physical, emotional and mental well-being while responding compassionately to people who are suffering



Compassion Satisfaction

The ability to experience pleasure from doing the work

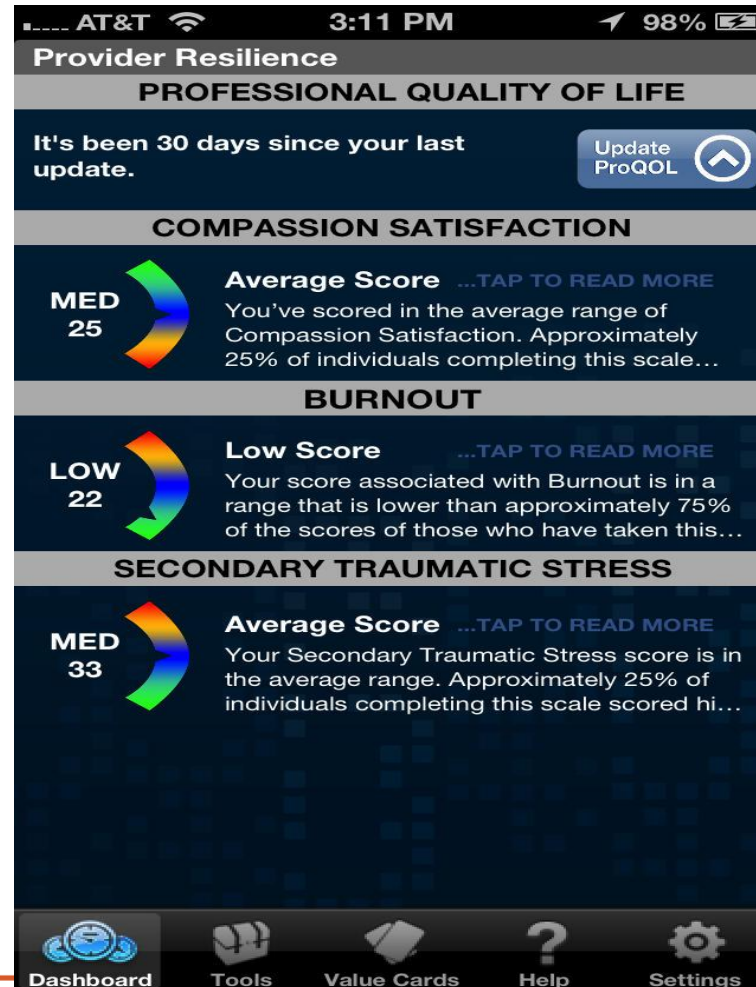
Professional Quality of Life Model



Copyright Beth Hudnall Stamm (2009)

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Provider Resilience App



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A Break for our SPIRIT

- When do you feel most alive, most like yourself? What are you doing?
- What or with whom are you surrounded?



Resources

- <https://www.thenationalcouncil.org/fostering-resilience-and-recovery-a-change-package/>
- <https://www.healthline.com/nutrition/16-ways-relieve-stress-anxiety#section1>
- <https://www.helpguide.org/articles/anxiety/coronavirus-anxiety.htm>
- <https://adaa.org/tips-manage-anxiety-and-stress>
- <http://mentalhealthchannel.tv/episode/youre-wired-for-anxiety-and-youre-wired-to-handle-it>
- <https://compassionresiliencetoolkit.org/staying-resilient-during-covid-19/>
- <https://www.neurosequential.com/covid-19-resources>

Questions?



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Thank You!

amir@thenationalcouncil.org

References

- American Psychological Association. (2015). Guidelines on Trauma Competencies for Education and Training. Retrieved from: <http://www.apa.org/ed/resources/trauma-competencies-training.pdf>
- Anda, R. F., Porter, L. E., & Brown, D. W. (2020). Inside the Adverse Childhood Experience Score: Strengths, Limitations, and Misapplications. *American Journal of Preventive Medicine*. doi: 10.1016/j.amepre.2020.01.009
- Baker, C. N., Brown, S. M., Wilcox, P. D., Overstreet, S., & Arora, P. (2015). Development and Psychometric Evaluation of the Attitudes Related to Trauma-Informed Care (ARTIC) Scale. *School Mental Health*, 8(1), 61-76. doi:10.1007/s12310-015-9161-0
- Benard, B. (2004). *Resiliency: What we have learned*. San Francisco, CA, WestEd.
- Cook, J., & Newman, E. (2014). A Consensus Statement on Trauma Mental Health: The New Haven Competency Conference Process and Major Findings. *Psychological Trauma*, 6(4).
- Dezelic, M. S., & Ghanoum, G. (2016). *Trauma treatment: healing the whole person: meaning-centered therapy & trauma treatment foundational phase-work manual*. Dezelic & Associates, Inc.
- Diener E., Seligman M.E.P. Beyond money: Toward an economy of well-being. *Psychol. Sci. Public Interest*. 2004;5:1–31. doi: 10.1111/j.09637214.2004.00501001
- Guarino, K., Soares, P., Konnath, K., Clervil, R., and Bassuk, E. (2009). *Trauma-Informed Organizational Toolkit*. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, and the Daniels Fund, the National Child Traumatic Stress Network, and the W.K. Kellogg Foundation. Available at www.homeless.samhsa.gov and www.familyhomelessness.org.
- Hellebuyck, M., Nguyen, T., Fritze, D., & Kennedy, J. (2017). *Mind the workplace*(pp. 1-25, Rep.). Alexandria, VirginiaVA: Mental Health America. <https://www.mentalhealthamerica.net/mind-workplace-2018>
- Institute for Health & Recovery. (2014). *Developing Trauma-Informed Organizations: A Toolkit, Second Edition*. Retrieved from <http://www.healthrecovery.org/publications/detail.php?p=30>

References

- Klunder C.S. Preventive stress management at work: The case of the San Antonio Air Logistics Center, Air Force Materiel Command (AFMC); Proceedings of the Managing & Leading, Society of Psychologists in Management Conference and Institutes; San Antonio, TX, USA. 29 February 2008
- Mathieu, F. (2012). The compassion fatigue workbook: Creative tools for transforming compassion fatigue and vicarious traumatization. New York, NY: Routledge.
- Masten, A. S. 2001. Ordinary magic: resilience processes in development. *American Psychologist* 56(3):227-238.
- Meyers, L. (September 27, 2018). Could Toxic workplaces be killing your clients. *Counseling Today*. Retrieved June 23, 2019, from <https://ct.counseling.org/2018/09/could-toxic-workplaces-be-killing-your-clients/>.
- Posen, D. B. (2013). *Is work killing you?: A doctor's prescription for treating workplace stress*. Toronto: Anansi.
- Quick, J. C., & Henderson, D. F. (2016). Occupational Stress: Preventing Suffering, Enhancing Wellbeing. *International journal of environmental research and public health*, 13(5), 459. doi:10.3390/ijerph13050459
- Sege and Browne. Responding to ACEs with HOPE; Health Outcomes from Positive Experiences. *Academic Pediatrics* 2017
- Stamm, B.H. (2005). *The ProQOL Manual: The Professional Quality of Life Scale: Compassion Satisfaction, Burnout and Compassion Fatigue/Secondary Traumatic Stress Scales*. Washington, DC: Register Report: A Publication of the National Register of Health Service Providers in Psychology.
- Substance Abuse and Mental Health Services Administration. SAMHSA's Concept of Trauma and Guidance for a Trauma- Informed Approach. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.
- Sprang, G., Ross, L., Blackshear, K., Miller, B. Vrabel, C., Ham, J., Henry, J. and Caringi, J. (2014). The Secondary Traumatic Stress Informed Organization Assessment (STSI-OA) tool, University of Kentucky Center on Trauma and Children, #14-STSO01, Lexington, Kentucky.
- The Fear of Feelings at Work (Lam, The Atlantic, 2017)
- Townsend, V. (2015, January 2). https://www.washingtonpost.com/opinions/what-doesnt-kill-you-doesnt-necessarily-make-youstronger/2015/01/02/939f250e-8f7e-11e4-ba53-a477d66580ed_story.html [Editorial].
- Ungar, M. (2013). Resilience, Trauma, Context, and Culture. *Trauma Violence Abuse*. 14(3) 255-266.
- Van der Kolk, B. (2015). *The body keeps the score: Brain, mind, and body in the healing of trauma*. Penguin Books.





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PARTNERSHIPS TOOLKIT NOW AVAILABLE!

Check out our new partnerships toolkit, *Healthy Together: A Toolkit for Health Center Collaborations with HUD-Assisted Housing and Community-Based Organizations*, in collaboration with NNCC!

To view the toolkit and interactive version, click here.

Welcome to The National Center for Health in Public Housing

About
The National Center for Health in Public Housing (NCHPH) is a part of the U.S. Department of Health and Human Services, Health Resources and Services Administration (HHS/HRSA). For more information, click here. What is the Health Resources and Services Administration (HRSA)?

Health Behaviors and Public Housing
Health behaviors are detrimental actions that heightened the odd of illness and impede recovery. This map depicts some health behaviors by county and the location of PHPC health centers in the nation.

[VIEW MAP](#)

Health Outcomes and Public Housing
This interactive map explores the prevalence of diabetes, low birth weight, poor or fair health and HIV in the U.S. by county, so health centers can compare their performance measures and establish or modify health interventions addressing the health care needs of their communities.

[VIEW MAP](#)

Socioeconomic Health Factors and Public Housing
Social and economic factors are strong drivers of how well we live. Across the U.S., people who live in the bottom performance counties face higher rates of

Contact Information

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Thank you!