

Self-Care Training: Facilitator's Manual

Learning Materials for “Helping Health Workers Cope,”
a Project of Concern Worldwide’s Innovations for
Maternal, Newborn, & Child Health and the Community
Association for Psychosocial Services (CAPS)

December 2012

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Acknowledgements

This Self-Care Training Manual was developed through a highly collaborative process between The Community Association for Psychosocial Services (CAPS) in Kono, Sierra Leone; Concern Worldwide *Innovations for Maternal, Newborn & Child Health* staff; and a public health consultant with psychosocial expertise (primary writer). The writer would like to express sincere gratitude to the capable CAPS clinical team and senior management staff, as well as the *Innovations* team in Sierra Leone, for their invaluable input, insights and guidance that made this manual possible.

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Disclaimer

This manual was developed to train and support health workers in Kono District, Sierra Leone, to help them understand, cope with and manage stress in their professional and personal lives. All material in this manual was created by the author, a qualified public health and social work professional, unless otherwise noted within the document, in addition to other noted contributors. The content of this manual was developed based on input from the participating organizations and data collected in Sierra Leone. The approach, techniques and activities presented in this training manual have been designed specifically for health workers in Kono District. Any names, examples, situations, or role play scenarios presented in the manual are examples only, and do not refer to actual people or events.

Use of Material

Material contained in this manual may be freely used for non-commercial purposes as long as Innovations for Maternal, Newborn and Child Health is acknowledged as follows: “Material adapted from Concern Worldwide (U.S.) Inc.’s *Innovations for Maternal, Newborn & Child Health* initiative.”

Manual Development

Concern Worldwide's *Innovations for Maternal, Newborn & Child Health Project* ("*Innovations*") and their local non-governmental organization partner, Community Association for Psychosocial Support (CAPS) began implementation of the Helping Health Workers Cope (HHWC) project in Kono, Sierra Leone in August 2011. This project provides local health care workers with counseling and training to strengthen coping skills in the context of their high demand and low resource work environment within the Kono peripheral health system. This project focuses on promoting resilience through skill building, while encouraging mutual support and community among health workers. The ultimate goal of this *Innovations*/CAPS project is to increase health workers' ability to provide quality care, especially to pregnant women, lactating mothers and children under five – the most vulnerable populations within the public health context in Sierra Leone.

In order to equip health workers with the skills they need, *Innovations*/CAPS began providing group and individual counseling for health workers in February 2012. To further support health workers, targeted trainings in stress management, self-care and client care, were designed, and were offered in a group setting following the counseling intervention.

The following manual was created to facilitate health worker training in the area of stress management, in order to enhance coping mechanisms and promote resilience both personally and professionally. This manual was developed through a highly collaborative process that involved participating health workers in Kono district, the CAPS clinical and program teams, the *Innovations* team based in Sierra Leone, and a psychosocial consultant.

In order to develop this manual, in-depth participatory workshops were carried out by the psychosocial consultant, which resulted in a consensus in regards to the goals and topics to be covered in the training by both the project management and implementation teams. The manual content was also informed by clinical assessments carried out with each participating health worker at the start of the project. These individual assessments assisted CAPS/*Innovations* in identifying the main sources of stress for health workers in Kono District.

Once the manual reached final draft stage, a Sierra Leonean consultant reviewed the content to localize and contextualize language, examples, stories and activities. Finally, the project's psychosocial counselors reviewed and further adapted the manual for the target audience. Therefore, the manual went through multiple review processes by *Innovations* staff at central and field levels, a local Sierra Leonean consultant, CAPS' management team, and finally the training facilitators themselves prior to finalization.

I. Training Overview

Purpose of this Manual

This manual is designed to guide the Helping Health Workers Cope (HHWC) staff in the facilitation of the project's Self-Care intervention. The HHWC project is being implemented by the Community Association for Psychosocial Services (CAPS) in Sierra Leone. The target audience for this training is Ministry of Health workers in Kono District serving the maternal, child and newborn population.

Learning Objectives

By the end of this training, participants should be able to:

- Reflect an understanding of self-care and its importance
- Reflect a general understanding of secondary (or vicarious) trauma and its potential impact on health workers
- Identify at least 3 self-care strategies or activities (for workplace or home)
- Report at least 3 activities that could improve workplace/professional self-care

Timeframe

Approximately 5 hours

Training Approaches

- Participatory
- Psycho educational

Methodologies

- Group discussion and brainstorming
- Small group activities
- Individual reflection
- Self-assessment activities
- Experimental learning
- Personal exploration

Preparation and supplies required

- Flip chart, flip chart stand (if needed)
- Flip chart markers
- Extra pens/paper for participants
- Tape (if needed to post flip chart pages on the wall)
- Copies of pre- and post-training assessment forms for each participant
- Copies of Appendices 1 and 2 for each participant
- Flip chart pages prepared by facilitator with headings prior to training (as indicated)
- Refreshments

Self-Care Training Schedule

I. Introduction – 30 minutes

- a. Welcome, introductions, review of objectives and agenda
- b. Administer pre-training questionnaire
- c. Establish ground rules
- d. Expectations from participants

II. What is Self-Care? – 15 minutes

- a. Definitions of self-care
- b. Discussion of why it is important for health workers
- c. Differences and similarities between self-care and stress management

III. Benefits and Stressors of Being a Health Care Worker – 30 minutes

- a. Discussion of health worker stressors
- b. System-related, Patient-related, Exposure to suffering
 - i. Activity 1 (Individual): Rewards of being a health care worker

**** BREAK – 15 minutes ****

(add lunch break if training is done in the morning)

IV. Secondary Stress and Trauma – 30 minutes

- a. Discussion, definition of secondary/vicarious trauma
- b. Signs of secondary stress and trauma
 - ii. Activity 2 (Pairs): Secondary Trauma

V. Strategies for Reducing Secondary Stress and Trauma – 90 minutes

- a. Explanation of A – B – C framework
 - iii. Activity 3 (Small Group): A – B – C applications

**** BREAK – 15 minutes ****

- iv. Activity 4 (Individual): Self-Care Inventory

VI. Wrap up / Closing – 30 minutes

- a. Recap, summary of learning from the day
- b. Brief group evaluation
- c. Revisiting participants' training expectations
- d. Administer post-training questionnaire
- e. Word of thanks, encouragement for continuing self-care efforts

II. Introduction

Opening of Workshop

Welcome, introduction of facilitator, and provision of a brief description of the Helping Health Workers Cope Project to participants. Facilitate the introduction of participant through the following ice breaker.

Ice Breaker

Announce to the participants: You've been exiled to a deserted island for a year. In addition to the essentials, you may take one piece of music, one book, and one luxury item to carry with you (but not a boat to leave the island!).

What would you take with you and why? Allow a few minutes for participants to write their list of three items. Then let them share their names along with their choices with the rest of the group.

In this and other icebreaker and relationship building activities, it is good for the facilitators to join in too!

Overview Statement

Facilitator says – In this training, we will learn about self-care – what it is and why it is important – particularly in the workplace. We will also explore self-care strategies to help you promote better health and buffer the impact of stress.

Briefly review the agenda (preferably on a prepared flip chart) with participants.

Administer Pre-Training Questionnaire

Before starting our work together, we would like your help in filling out a brief pre-training survey (facilitator will pass this out). Please keep in mind that there are no right or wrong answers. The information you provide simply helps us figure out how we are doing in our training efforts with you and to get your feedback.

Establish Ground Rules

We would like to begin our training by establishing some ground rules so we all have a common understanding of what we can expect from one another.

Facilitator asks – What do you feel are important ground rules to establish for our training together today?

Write ground rules on the flip chart and review them together to make sure there is an agreement among all participants that they can follow them.

Ground rules should include (add if not mentioned):

Maintaining confidentiality (what is said here stays here); listening to and respecting everyone's input; turn off cell phones; not interrupting one another (listening); everyone participates; there are no right or wrong comments or questions.

Expectations

Facilitator asks -What are your hopes and expectations for this self-care training today?

Elicit input from the participants and write expectations on the flip chart (put on the wall and save to review at the end of the training).

Then, share learning objectives of this training with the group:

Learning Objectives:

- Understand self-care and why it is important for health care workers
- Define secondary/vicarious stress and trauma and its potential effects on health workers
- Identify strategies to promote resilience and self-care in the workplace

In this process, we hope to:

- Facilitate group learning and peer support
- Have fun!

You can observe that some of these above objectives coincide with participants' expectations mentioned in their own brainstorming process (on flip chart) and as appropriate, mention how you will try to integrate some of their other priorities into the training day.

III. What Is Self-Care?



Brainstorm

Facilitator asks – How would you define self-care? Why do you think self-care is important for health workers?

Encourage input from the group and summarize responses on the flip chart (if desired).

Facilitator asks – What differences, if any, do you see between stress management and self-care? Facilitate a brief discussion on what differences and similarities participants see between these terms.

Then share observations – Over time, the concepts of self-care and stress management have become somewhat blurred, and now people often use these terms interchangeably. Stress management and self-care reflect similar and overlapping concepts. The similarity is that both of these strategies help us to alleviate stress in our lives.

Here are some definitions that may help us clarify and bring a common understanding of these terms we are discussing:

Stress Management is a way of dealing with or coping with the negative effects of the stress we confront in our lives. We often think of stress management “techniques” to relieve stress, such as deep breathing, meditation or exercise.

Self-Care is the ability to proactively enhance our health by building resilience and preventing illness and disease. It has a preventive focus. It is a process whereby a person looks at ways we can become responsible for promoting our own overall well-being.

The World Health Organization (2009) defines self-care as:

“The ability of individuals, families and communities to promote health, prevent disease, and maintain health and to cope with illness and disability without the support of a health-care provider.”

Facilitator asks – What do you think of these definitions of self-care? What definition makes sense to you? Is there anything you would add to these definitions based on your understanding of self-care? Allow for group discussion based on these guiding questions so participants can explore their thoughts about what self-care is.

Facilitator concludes – As we have discussed, there are several important aspects to self-care. We might best conclude that **self-care is:**

A personal, individual process that involves looking holistically into several levels of well-being – including physical, psychological, emotional, spiritual and professional levels. In this training, we will engage in several activities that help us individually explore these important aspects.

IV. Benefits and Stressors of Being a Health Care Worker

Facilitator says - Let's now start to think about your realities as health workers. Away from our work settings, we can take a moment to think about some of the benefits of being a health worker, and also why being a health worker can be so stressful. We know that work in the health care field can be one of the most rewarding and worthy professions, offering valuable and critical services in our communities. As a health worker you can save lives, combat disease, and help people overcome physical (and emotional) suffering. It can also be difficult to sustain your care giving role over time. So why is it so challenging to be a health care worker? Let's think about that.

As you are aware, the rewards of being a health worker can come at a personal cost due to difficult working conditions, lack of resources, and everyday pressures with patients. In fact, the challenges you face as health workers can probably seem overwhelming at times.



Brainstorm

Facilitator asks – What are some of the stressors you are exposed to as health workers?

Note to facilitator: Prepare flip chart pages with the 3 headings below on separate pages to guide the brainstorming discussion among participants. This is a brief group discussion only to frame context for self-care and secondary trauma. Record participant contributions on the flip chart under the relevant headings:

- **System-related issues**
- **Patient-related issues**
- **Witnessing of suffering** (from patients and families)

Allow participants to brainstorm about some of their main work stressors that fall under these three categories. Build on to some of the work stressors that participants mentioned; clarifying/adding as appropriate.

For example:

System-related issues

- Lack of appropriate medications/basic supplies needed to treat patients
- Lack of personnel – too many patients to see in one day
- Long work hours
- Poor mobility/transport for patients

- Lack of support or poor communication with supervisor
- Inability to resolve conflicts with co-workers
- Unexpected or unwanted transfers to a new health facility
- Lack of places to refer patients for needed services (when needs are out of the health workers scope)

Patient-related issues

- Complaints due to long wait times
- Mothers not seeking care for herself or baby (going to traditional healer)
- Difficult communication with patients
- Lack of resources or support for follow up with patient care plans after visit
- Patients with malaria not taking anti-malarial medication due to lack of drugs
- Patients not coming to the health center when scheduled
- Patients yelling at or abusing health workers

Exposure/witness of suffering (from patients and families)

- Hearing upsetting stories of a personal nature
- Exposure to death (loss of a patient)
- The effects of violence
- Witnessing traumatizing situations
- Exposure to physical and emotional suffering

Facilitator observes – As you have pointed out, being a health care worker is not easy – especially in these times with the Free Health Care Policy and its implications for providing expanded maternal and child health care within the context of extremely limited resources.

You have a very important but tough job.

Activity: Personal Reflection

Introduce activity – We just discussed some of the stressful aspects of being a health care worker. We also know there can be many positive aspects of working in your profession. We are now going to do an exercise that will allow you an opportunity for personal reflection about how being a health care worker might reward you or improve you as an individual.

ACTIVITY 1 – Personal Reflection on Rewards of Being a Health Care Worker

Share the following instructions:

Individually (silently), take a few minutes to think about what we have discussed and reflect on any possible benefits you see for working under some of the challenging conditions we have discussed.

Post the two questions below on a flip chart in front of the room for all to read. Make sure that each participant has paper and a pen. Ask them to work quietly on their own to write down the answers to the questions on a sheet of paper (5 minutes or less). Remind them that what they write is only for them and will be shared with the group later only if they choose.

Note to facilitator: Write the two questions below on a flip chart page (prepared in advance).

- 1) What do you find most rewarding about being a health worker?
- 2) How have your challenging experiences as a health worker improved you, your work or your home life?

Allow sufficient time for each participant to reflect and take notes on their answers to these questions.

Facilitator asks – Would anyone like to share their responses to these questions?

Clarify that sharing their responses is voluntary. For those participants who share their answers, jot down their input on flip chart pages (as appropriate) with their input under categories of:

- Health worker rewards
- How being a health care worker improves me/my life.

Provide encouragement to those who share their responses and allow an open discussion on what it was like for participants to do this exercise. Share any observations you would like to add from the discussion. As appropriate, add the following ideas as possible positive outcomes or experiences that come out of being a health care worker:

Rewards of being a health care worker

- Helping others
- Contributing to the improvement of health conditions of people in the community
- Constantly learning about new health issues and conditions

- Experience a variety of situations, challenges
- Chance to meet people from all walks of life
- Provide essential care and support to pregnant, birthing, post-partum women and their children
- Have the opportunity to get to know families and watch children grow over time.

Ways that work challenges have improved you, your work or home life

- I am more grateful for my family and the resources I have
- I have become better at prioritising tasks when I am busy
- I have learned advocacy skills (for myself, patients)
- I have learned to find activities outside of work that relieve stress
- I have learned to set limits and say “no” to my boss when I know I am overloaded and cannot take on additional tasks
- I have learned to set some boundaries between my work and home life

Facilitator then asks – Do you have any new observations or insights about yourself in relation to your work after doing this personal reflection activity? If so, what are they?

Do you see any positive benefits from being a health care worker you did not see before?

Allow the group to discuss any thoughts or reactions from doing this exercise. Encourage discussion on how important it is to strive to see the positive side of things, even in difficult situations.

**** Break 15 minutes ****

V. Secondary Stress and Trauma

Facilitator says - Some of you may have heard the term **secondary trauma** (also called vicarious trauma) before. It is helpful to talk about this briefly, since we know that being aware of *how* stress affects us is the first step in improving our responses to stress.



• **Brainstorm**

Facilitator asks – How many of you have heard of the term secondary trauma? What does this mean to you?

Encourage participants to discuss and share their thoughts and impressions with the group.

Facilitator then shares the following story of a secondary trauma experience:

Story of a secondary trauma experience

Henri is a medical provider in a refugee camp and day after day he hears stories of violence and trauma from his patients. After awhile, he notices that he starts to experience some of the same stress reactions he sees in his patients, even though he did not directly experience the traumatic events himself. He begins to get headaches, experiences nightmares of violent events and begins to feel easily startled or “jumpy.”

Secondary trauma, also called **vicarious trauma**, is a reaction that can occur (most often with care givers or service providers) as a result of witnessing or learning about traumatic events that have happened to others. The other people (such as your patients) are the victims of distress, but by your exposure to them, your own inner experience changes. Secondary traumatization can be a slow, gradual process and health workers can be especially vulnerable since they may be exposed to not only the distress and trauma of their clients but also their co-workers who are coping with various workplace pressures. Often, we are not aware we are suffering from secondary trauma because our exposure to trauma in our workplace (or lives) is gradual and can become “normal” to us.

Facilitator observes – This sort of secondary (or “second hand”) trauma that Henri is experiencing can really affect him in a negative way. And as you just heard, he begins to experience ill-health just like his patients, even though Henri did not experience the trauma first hand.

Facilitator asks – What are your observations in regards to Henri’s experience? Do you have any thoughts or reactions from hearing this story? Encourage a short discussion with participants about their reactions to Henri’s secondary trauma story.

Facilitator reviews – Causes of secondary trauma include:

- Exposure to stories of trauma and distress
- Desire to help or change a traumatized person's situation
- Feeling powerless to help, yet wanting to assist in some way
- Over-identifying with those who are traumatized

The following definition points out the many levels that secondary or vicarious trauma can affect us. Secondary trauma is:

"The cumulative transformative impact upon those working with survivors of traumatic events....The pervasive effect of doing this work on the identity, world view psychological needs and beliefs and memory (of the worker). (Saakvitne and Pearlman, 1996)

As health workers, this concept of cumulative stress is important, since as part of your job you may have exposure to both traumatic as well as chronic lower intensity stressors that can "pile up" and eventually become serious. This can ultimately affect your emotional and physical health. What this definition is trying to tell us is that secondary trauma can change us – and our view of the world.

Signs of Secondary Trauma

Facilitator says – Let's look at some of the warning signs of secondary stress and trauma so we can get a better idea of how it can affect us. What we know is that if we learn to recognize the signs, we are more likely to be able to do something about it.

Some of the most common signs of secondary stress are:

- Anxiety
- Startle responses
- Addiction (alcohol, drugs, gambling, etc.)
- Denial or numbing
- Social withdrawal
- Sleep disturbances
- Nightmares
- Polarized thinking (feeling that there is "right and wrong" way)
- Depression
- Entrenched cynicism (perceiving that things are bad and can't get better)
- Obsession with bad people or things
- Reawakening of a person's own past trauma (thinking you had "recovered" from a past traumatic event but it resurfaces again).

Activity: Discussion in Pairs

Introduce activity – We are now going to do an activity that will help us to think further about secondary trauma and how it might affect us as health workers.

ACTIVITY 2: Discussion in Pairs – Secondary Trauma

Have participants find a partner (preferably someone they do not know well or from another health facility). Post the following questions in front of the room on a flip chart (prepared ahead of time). Ask participants to take turns interviewing one another by asking the following questions (about 5 minutes for each person). Remind participants (refer to ground rules as appropriate) to be a good listener, allow silence when listening to their partner. Also remind them that what is said in the training stays in the training (confidentiality). This activity is for discussion purposes only and no one is required to share their responses with the larger group afterwards.

- 1. Do you suspect that you or a co-worker has ever experienced secondary trauma? If the answer is yes, what were some of the signs you noticed in yourself or your co-worker?**
- 2. What advice could you give yourself or a co-worker about how to avoid or reduce the effects of secondary trauma?**

Bring participants back to the larger group.

Facilitator asks – Does anyone want to share any observations they had from the activity? Make it clear that their sharing is voluntary. What ideas did you and your partner come up with for avoiding or reducing the effects of secondary trauma?

Encourage discussion and congratulate participants on their new insights and ideas they shared. Stress to them that it is important to try to protect ourselves from the effects of secondary trauma.

Facilitator concludes – If you notice signs of secondary trauma in yourself, or if any of this resonates with you, it is important to remember to take a break for self-reflection, talk to others you trust for support (friend, family members or a counsellor) and schedule in extra time for rest.

As we will discuss in more depth later in our training today, it is important to begin to focus on ways you can build self-care strategies into each day.

VI. Strategies for Reducing Secondary Stress and Trauma

Facilitator says – Let’s discuss some strategies that can help reduce secondary stress and trauma. One framework that can assist us is the following:

A – Awareness – Be attuned to your needs, limits, emotions and resources. Practice self-acceptance. Look for early signs of secondary stress and trauma so you can focus on self-care to prevent further problems. Develop the habit of “checking yourself.”

B – Balance – Maintain a healthy balance among your activities. Balance work, family life, rest and leisure. Remind yourself that you deserve to have a meaningful and enjoyable life outside of work.

C – Connection – Maintain supportive relationships. Establish positive relationships with co-workers, friends and family to elicit support and avoid isolation. Communication with others breaks the silence of unacknowledged pain. Connections can also increase feelings of hope.

(Adapted from: Reproductive Health Response in Crises Consortium, “Self-Care and Managing Stress”)

Activity: Small Group Discussion

Introduce activity – We are now going to do an activity where we will split up into groups and explore how this A-B-C framework might be useful to us.

ACTIVITY 3: Small Group Discussion – A-B-C Framework

Instruct participants to split into groups of approximately 4-6 participants each (Note: size of groups will depend on the total number in training. Divide participants into equal groups and ensure that there is a good mixture of those from different positions, PHU locations, etc.).

Explain the group assignment:

Using the model of A (Awareness) – B (Balance) and – C (Connection) above, have your group **discuss specific strategies or actions you could implement to support each component (A, B, C).**

What steps could you propose to promote:

- ✓ **Awareness**
- ✓ **Balance and**
- ✓ **Connection** within the next few weeks?

Have the participants brainstorm in their groups and write down their ideas for A, B and C. Each group should designate a person to report to the larger group.

Then, have the participant representing each group report to the larger group while the facilitator writes their ideas on flip chart pages under the following headings:

A (Awareness)

B (Balance)

C (Connection)

Some example responses might be: Awareness - recognize when I am short tempered or sad. Balance - get to bed by 10 PM each night to get adequate rest. Connection – ask a co-worker for lunch to get to know him/her better.

Facilitator asks the larger group – What do you think of these ideas presented?

Are there certain ideas that seem especially relevant or would be easy to implement?

What reactions or observations did you have working with your group on this exercise?

Encourage discussion of participants' experiences working through the A-B-C framework and how looking through the lens of these three components might be helpful.

**** Break 15 minutes ****

Self-Care Inventory

Facilitator introduces next exercise – Before the break, we started a discussion (through the A-B-C framework) about ways that we can work on stress reduction and self-care. One thing we know is that every person is unique. Therefore, each person's approach to self-care will vary according to their experiences and what works best for them. For these reasons, we are going to have you do an individual exercise to think more about your own self-care practices. We think this is important because we want each of you to take home some concrete ideas of what you can do to improve your own self-care after this training.

ACTIVITY 4 – Self-Care Inventory

*Facilitator passes out Self-Care Inventory from **Appendix 1**.*

Ensure that the rating scale is clearly explained to participants.

Explain individual assignment:

I am passing out a copy of a Self-Care Inventory. We would like you to fill it out quietly and individually. It will take you about 5-7 minutes to complete, and the results are only for you and can be taken home at the end of this training.

The purpose of this exercise help you assess your own level of self-care and to help you think about possible ways you might add to your personal wellness plan.

After participants have completed the Self-Care Inventory, ask them to discuss the ideas and issues it raised (this can be done in pairs, small groups or the entire group, depending on the facilitator's observations regarding the needs of participants).

Encourage group discussion on how participants perceive strengths (and gaps) in their self-care according to the assessment, and ideas they have on what they can do to improve positive self-care activities and behaviors. To encourage discussion, facilitator can ask some of the following questions.

Facilitator asks –

- Were there any surprises or “aha” moments for any of you when filling out this Self-Care Inventory?
- Did the assessment present any new self-care ideas you had not thought of before?
- Which activities on the Inventory were you already doing?
- What activities seem unrealistic or would be burdensome to you to do?
- Are there any activities on the Inventory that particularly spark your interest?
- What is one activity you might be able to “test out” starting now or as soon as possible?

Pass out *Appendix 2, Prevention Strategies for Health Workers*. Explain that this is a resource for them to take home that outlines some possible self-care strategies for work and home. They may be able to refer to it later to build on their personal self-care plans. Also mention that the Inventory they just completed (which they will take home) is something they can use after the training to give them further ideas on self-care.

VII. Wrap Up / Closing

Recap

In our training today, we:

- Defined self-care and talked about its relationship to stress management
- Discussed stressors health workers are frequently exposed to (systems, patient and exposure to suffering)
- Reviewed some of the benefits and rewards of being a health care worker
- Defined and discussed secondary or vicarious trauma (its causes, effects, warning signs)
- Talked about strategies for reducing secondary stress and trauma (using the A-B-C framework)
- Explored some specific self-care activities that can support personal wellness (through the Self-Care Inventory)
- Discussed how we might be able to integrate new self-care ideas into our lives.

Facilitator asks – Does anyone want to add anything else that they feel is important to mention?

Allow participants to add any additional thoughts or observations to your recap of the day.

Group Evaluation

Facilitate a group evaluation by asking for what participants viewed as positive or helpful aspects of the training and aspects they did not like or think could be improved. Emphasize that this feedback is valuable as we conduct more of these trainings.

Label flip chart pages with “I liked...” and “I wish we had...” (If you prefer, use some other wording or illustration to capture this concept such as a sun for what they like and a cloud for what they wished for) to elicit group participants’ feedback on the training.

Facilitator asks – Did we accomplish your expectations for this training today? Post the flip chart page with participant expectations (from beginning of training) and have participants reflect on the day.

Discuss whether or not their expectations were met. Emphasise that self-care is a longer journey than what is covered in the training today and that we hope their efforts will be on-going.

Post-training questionnaire

Facilitator should now pass out the post-training questionnaire and ask each participant to complete and return it to you before departing.

Closing words, vote of thanks

Before closing, thank participants for their participation and thoughtful contributions. Encourage them regarding their self-care efforts. Suggest that they support one another as colleagues by reminding each other to continue this important self-care work. In order to sustain their important health worker efforts, they will need to prioritize taking care of themselves.

End session with a song if appropriate.

Appendices

Appendix 1 – CAPS Self-Care Training

Self-Care Inventory

Instructions: Rate how you are doing in self-care, using the numerical scale to fill each of the empty boxes.

Note that this self-assessment tool provides a *representative* list of self-care activities (not a comprehensive one) and is designed to give you a snapshot of your current attention to personal wellness.

Physical Self-Care

- ☐ Eat regular, healthy meals
- ☐ Engage in regular physical activity/exercise
- ☐ Get regular medical care for prevention and when sick
- ☐ Take time off work when sick
- ☐ Say “no” to extra responsibilities
- ☐ Get enough sleep
- ☐ Take vacation days
- ☐ Take at least one day a week completely off work
- ☐ Make time away from technology – phones, TV, internet, text pages, etc.
- ☐ Keep home organized, safe and clean

5 = Frequently
4 = Occasionally
3 = Sometime
2 = Never
1 = It never occurred to me

Psychological Self-Care

- ☐ Make time for self-reflection
- ☐ Read books/literature unrelated to your work
- ☐ Do something at which you are a beginner/learner
- ☐ Spend time with children
- ☐ Write in a journal
- ☐ Meditate, pray
- ☐ Sing, dance or listen to music
- ☐ Engage your intelligence in a new area – art, cultural activity, sporting event, etc.
- ☐ Make time to enjoy the outdoors

Emotional Self-Care

- ☐ Spend time with people you enjoy; limit time with those who drain you
- ☐ Stay in contact with important people in your life
- ☐ Treat yourself kindly (for example, forgive yourself when you make a mistake)
- ☐ Find things that make you laugh
- ☐ Allow yourself to cry
- ☐ Express disagreements with others in a constructive way
- ☐ Connect with neighbors
- ☐ Seek out and enjoy comforting people, objects and places
- ☐ Express opinions and make contributions to your community

Spiritual Self-Care

- ☐ Make time for self-reflection
- ☐ Participate in a spiritual or religious gathering, community or activity
- ☐ Express gratitude
- ☐ Take time to celebrate rituals important to you
- ☐ Read inspiring literature or poetry
- ☐ Listen to inspiring music
- ☐ Practice receiving kind words and actions from others
- ☐ Remember and memorialize loved one who are deceased
- ☐ Contribute to causes you believe in

Workplace/Professional Self-Care

- ☐ Take time to eat lunch with co-workers
- ☐ Take time to chat with co-workers
- ☐ Take a break during the work day
- ☐ Arrange your work space so it is comfortable
- ☐ Make time to complete tasks
- ☐ Get regular supervision, consultation or mentoring from your supervisor or peers
- ☐ Negotiate your needs, such as work location, salary, etc.
- ☐ Identify and seek out projects that are exciting and rewarding
- ☐ Set appropriate limits with your clients and co-workers

Adapted from: Transforming the Pain: A Workbook on Vicarious Trauma by Karen Saakvitne and Laura Ann Pearlman, published in 1996.

Appendix 2 – CAPS Self-Care Training

Prevention Strategies for Health Workers

Here are some ideas for self-care and burnout prevention:

1. Observe days off work
2. Take “mini breaks” during the work day
3. Observe the lunch hour
4. Get to know and support your co-workers
5. Engage in physical exercise such as walking most days
6. Establish on-going communication with your supervisor
7. Arrive to work on time and go home on time
8. Maintain good relationships with colleagues
9. Do deep breathing exercises
10. Do positive imagery/visualization
11. Try progressive muscle relaxation
12. Eat regular meals, maintain a healthy diet
13. Move your body – Exercise and stay active
14. Take vacations when you can
15. Laugh, play and have fun with children
16. Partake in activities that you enjoy
17. Do something every day that makes you laugh
18. Meditate
19. Engage in self-reflection
20. Spend time with supportive friends or family members
21. Dance, listen to music or sing
22. Forgive yourself for making mistakes
23. Get involved in community events and activities
24. Drink water from a safe source
25. Sleep under a treated bed net
26. Seek out treatment immediately when feeling ill

Your ideas:
