

Self-Care Practicalities and Coping Strategies

Why is self-care crucial?

Like any other work situation, GBV work can lead to different levels of stress. In addition to some of the common factors that lead to stress in the workplace (e.g., heavy workloads, irregular and long hours, negative interpersonal relationships at work, lack of recognition of accomplishments), the nature of GBV work and the difficult circumstances in which it often takes place may take a heavy toll on staff.

Working in unstable and often insecure environments, GBV staff may have fears for their personal safety and can also be the target of violence (from angry perpetrators or community members or even co-workers). Their work regularly brings them into contact with human suffering and misery as many of the situations of GBV do not have clear “solutions.” Some GBV case workers have also experienced life-threatening situations in the course of their work. In many cases, GBV case workers may be working and living far from home and from their social support networks, and have to navigate through these challenges without the close support of their families and friends. However, self-care practices can support staff to mitigate the impact of these stressors allowing them to provide optimum support to GBV survivors.

We often talk about “self-care” in our work—or what an individual can do to prevent stress from becoming overwhelming. On a personal level, not practicing good self-care can lead to physical, emotional, mental and spiritual harm. It can disrupt overall well-being, quality of life and personal relationships. While the emphasis of self-care is usually on the individual, self-care is important for organizations as well, as productivity and work often suffer when good self-care is not promoted and encouraged by supervisors and organizations. For these reasons, organizations, particularly those responding to difficult issues such as GBV, also have a responsibility to provide a level of care for their staff. Supervisors and organizations play a critical role in creating an organizational culture that prioritizes the safety and well-being of its staff, especially in humanitarian settings.

Key Self-Care Considerations for Case Workers¹

You can't fix violence against women and girls by yourself



It's important to remember that even when utilizing best practices in care for the survivor, it is not possible to "fix" her experience of GBV or eliminate her pain. We cannot erase the fact that the violence occurred. Gender-based violence is about the survivor's power being taken away from them. Our job is not to take her power away again, but to help her to regain her power over her own life. "Fixing it" would imply we have more power than she does, even if that is what she is asking us to do. Also, expecting ourselves to be responsible for others feelings would set us up for constant failure. Instead of focusing on "fixing it," we should concentrate on being an active listener and on supporting her to get what she needs.

What we CAN do

Even if we cannot "fix" GBV, there are crucial actions we can take as case work staff. This includes:

- Seeking her informed consent so that she is clear that she has agency/control over what happens next for her
- Listening to her experiences and her needs
- Being supportive and non-judgmental
- Following GBV case management guidelines to support her process
- Offering her information and options to enable her to make her own decisions
- Helping her to get her needs met
- Advocating for prevention work to be happening in communities as well.

Remember: in the case management process, it's okay not to know all the answers

We are human! No one knows all the answers. If we don't know the answers, we can ask our supervisors and colleagues for support. We can, however, commit to being honest with the survivors who come to us. If we pretend to know all the answers, that would be dishonest. If, for example, a survivor asks how much hospital services will cost and we tell her something that is not true because we don't know, that makes it harder for her to trust us next time. It's better to say "I don't know, but let's find out"—and then do!

Communication and honest feedback are crucial

Good case management is based on communication, and it is important that we do this with each other. We have to commit to being supportive of each other. This means both a support network of people outside of this work who can help you take care of yourself, as well as a support network within this work. Developing a support network involves being able to give direct and respectful feedback to colleagues or peers about our work, and helping each other improve at what we are doing. This also includes having an open dynamic and beneficiary feedback mechanism where we can receive respectful feedback from the survivors we serve, and create a space where they can be sure their needs are getting met despite any power dynamics there may be.

We can't do this for 24 hours a day

Many peer counselors have found that when they started to work in GBV, people could somehow sense they were a good listener, and everyone starts to open up to you about violence or abuse. At the same time, we can't do this work 24 hours a day, 7 days a week. You can be gentle with people and survivors and let them know when you can see them if it isn't an emergency, if you can't see them right that second—especially if people start coming to you a lot. It's also important to recognize the toll this work takes on your life, and to take care of yourself by knowing when you need to do something nice for yourself to “recharge your batteries” using self-care strategies that are positive for maintaining your safety and wellbeing in this work.

Positive Approaches to Self-Care

Self-care is critical in this work and involves several factors. First, awareness of our own needs, limits, emotions and resources. Second, finding a balance of work and play, of taking care of yourself and others. Finally, seeking connection – to yourself, to others, and to something larger. To do this, there are a lot of actions you can take:

- (Re)set your boundaries. This might mean: not giving beneficiaries money, not working after a certain time, not answering the phone at night (if you are not on call for emergencies), balancing work and home life, and not working on weekends unless essential.
- Ask for help when you need it from people you trust: your supervisor, your colleagues, your family and friends.
- Create support systems at work: celebrate the small successes, set smaller goals, focus on one thing at a time, say no, delegate tasks, clarify your job description, ask for new challenges, or create a self-care space in the office for use during break times.
- Create support systems at home. This can be your space to practice your self-care strategies and plans.
- Practice effective self-care strategies. Examples of effective self-care strategies may include: taking regular short breaks, eating regular meals, practicing relaxation or meditation techniques, making time for physical activity such as walking, dancing or running.
- Do a periodic self-check in on your wellbeing and what self-care strategies work well for you and which need shelving/discarding and replace with trying something new.
- Develop realistic expectations for yourself and your co-workers.
- If possible, set aside time in your staff meetings to allow people to share their feelings and coping/self-care strategies that help them.
- Confirm the positive experiences and ways in which your work enriches your life.
- Maximize collegiality and support from colleagues to avoid isolation.
- Plan workload, allowing space and time in between exposure to traumatic materials.

- Adopt a healthy lifestyle to ensure physical wellness (diet and exercise).
- Learn about the topic of the research and explore one's own personal attitudes towards victims and perpetrators.
- Reflect on personal experiences with the topic.
- Find the 'humor' in situations to alleviate stress and tension.
- Learn how to identify early warning signs of vicarious trauma and emotional distress.
- Know that this is a normal reaction to doing work on traumatic material.
- Develop and employ self-care strategies, including personal debriefing and safety plans.
- Don't expect quick fixes – everything takes time.

Additionally, limiting exposure to traumatic situations is likely the best form of prevention and treatment for vicarious trauma. While the nature of the work requires a focus almost exclusively on human suffering, there are ways in which the risks to their own health and well-being can be minimized. For case workers who are able to (such as expatriates or those moving between short term contracts), consider planning your career in a way that alternates assignments and duty stations with a high level of exposure to traumatic situations with functions that require minimal contact with traumatic material.

Another way in which vicarious trauma can be minimized is to set and observe boundaries. GBV staff may find themselves becoming overwhelmed with the needs of the people they see. They may feel responsible and be tempted to go beyond the mandate of the organization. Over time, this can deplete their energy and limit their effectiveness in their work. Maintaining appropriate boundaries will help to keep staff focused on their work and what they are able to achieve.

GBV staff may want to consider speaking to a professional about their feelings. Case workers who have experienced a traumatic event themselves should consider how that history will affect their work. Having a personal trauma history certainly does not preclude someone from being an effective GBV worker; it does, however, suggest a need for more active self-care. Case workers with a personal trauma history may find that hearing about similar kinds of traumas stirs their feelings and memories of their own experiences. It takes a good level of awareness to ensure that this does not interfere with professional objectivity. Any case workers who find that they are unable to remain objective or are suffering distress because of their exposure to the trauma of others should consider seeking professional help.

GBV staff can limit their exposure to traumatic situations and material outside of the work setting. For instance, when feeling exposed to or affected by trauma, staff should avoid films or books depicting violence and human rights violations. They may want to focus instead on uplifting stories to help

counter the messages of despair and depravity they are exposed to at work. Similarly, while on leave or between contracts, staff should pursue activities that will remind them of the good in the world. In the work setting, the role of the team and the support it can provide are important. Team members should be proactive in helping each other under the guidance of their manager. Staff and supervisors can explore if there is a way they can distribute exposure to human suffering among GBV case workers. Staff should identify what kinds of traumas are the most difficult for them to hear and compare this with their colleagues. The team members may be able to work together to protect each other as much as possible from their vicarious trauma triggers. The team may also work together to see how best to distribute activities throughout the week. If possible, periods of intense information gathering could be interspersed with other less intense activities.

What is burnout?

Burnout or, as it is sometimes known, compassion fatigue, is a sense of being completely overwhelmed and unrewarded. Several factors contribute to burnout including working conditions, (too many survivors, too much paperwork, low pay, lack of decision making power); the multitude of support services needed by survivors (problems that cannot be easily fixed, frustration or anger with service providers, suicidal threats); and feelings of isolation in doing this work.²

The following are some of the signs of burnout. Please note this list is in no way exhaustive and there are many other ways in which burnout can manifest itself.

- **Physical:** feeling tired or drained (exhaustion), change in appetite, change in sleeping habits, nightmares, hyper-vigilance to stimuli
- **Emotional/psychological:** self-doubt, sense of failure; feeling alone, overwhelmed, or indispensable; having a cynical or negative outlook; suspicion of other people's motives and behavior; intrusive images; anxiety; numbness; diminished pleasure; sense of shame at compassion fatigue; depression
- **Behavioral:** self-isolation, anger, blaming others, withdrawing from responsibility, being late for work/absenteeism, excessive caregiving at home and work, increased self-criticism, tired of thinking, overthinking, difficulty concentrating, difficulty in making decisions, substance abuse, self-medication, not taking leave
- **Spiritual:** loss of faith, immersion in faith, questioning values and beliefs

Restructuring work or changing responsibilities can provide relief from the aspects of the job that are causing the burnout. In addition, professional help from a psychologist or counsellor may assist with the recovery and with building tolerance to stress so as to prevent burnout in the future.

Once a GBV case worker is suffering from severe chronic stress or burnout, it is more difficult to implement a self-care plan without first taking time off for

recuperation. Once burnout has set in, it is difficult to identify strengths and commit to practicing stress management. Motivation will likely be very low and without taking an objective test, GBV case workers may not even be aware they are burned out. A lengthy period of rest (e.g. at least one month) may be necessary to allow them to recover from burnout. While time away from work may be ideal, even a change in activities can help. Before reaching the point of burnout, supervisors should promote self-care practices with their staff as this can be preventative.

Negative Coping Mechanisms

Negative approaches to self-care may include denying or minimizing you are stressed, ignoring signs of burnout and continuing to work with GBV survivors when you yourself have valid help and support needs. Being unable or unwilling to accept help (when you are struggling to manage tasks whether at home or work) when it is offered can also demonstrate a negative approach to supporting your self-care which, in and of itself, warrants a second look from you. Self-care is not a sign of weakness, it is a sign of strength that you want to overcome the challenges you face and be resilient to perform at your best.

The use of negative harmful coping strategies that adversely affect you, your health, and/or your work. Harmful stress coping strategies may include:

- Alcohol/substance abuse
- Smoking
- Self-harm (e.g. cutting, burning)
- Risky/unprotected sex
- Risky choices/thrill seeking behavior to avoid numbing
- Poor eating habits, eating disorders
- Not sleeping/resting – pushing self to the limit
- Dismissing your co-workers attempts at self-care

It is important to be mindful of the ways in which we speak/act about self-care and to respect those that are trying to implement their self-care strategies.

Providing support for staff in crisis

Caseworkers are often the people working closest with survivors, hearing their experiences of GBV, and responding with care, compassion, and concern. Over time, without appropriate support and supervision, caseworkers may begin to feel overwhelmed and tired, and may even begin to feel hopeless and helpless. In order to prevent caseworker burn-out and to facilitate caseworkers' capacity to provide the best care and services to survivors, supervisors (and organizations) need to make explicit a commitment to staff well-being and implement specific strategies for promoting it. While every organization will need to develop its own strategies and approaches for staff care based on resources and structure, supervisors can promote the care of casework staff. It is also important to practice collective care and seek out ways to support colleagues who are struggling

with stress. If you're in a management position then how you behave and talk about self-care is likely to have a significant impact on your team so make sure you are trying to model/support positive self-care practices so that you have a safe, healthy and effective team!

When staff are in crisis either because of a professional or personal experience that may be impacting their work, the following may be important:

- Create opportunities for staff to share experiences and stressors (e.g. through supervision)
- Watch for caseworkers who may be suffering in silence and actively reach out to them.
- Connect them to support services/structures – if available in the context, e.g. social support from friends and family, connect staff to mental health professionals on a regular basis, support for substance abuse.

Setting up a Stress Management Plan

GBV case work staff should be supported by supervisors to set realistic and achievable goals for themselves when developing a stress management plan. The goal of stress management is to reduce stress to a tolerable level and to recover from stressful periods as quickly as possible. It is not feasible, nor necessarily desirable, to eliminate stress altogether, as stress is important to activate physical and behavioral responses that can help overcome difficult situations. Setting unrealistic goals, such as eliminating all stress, can hamper efforts to persevere with stress management. The more staff are able to adopt realistic expectations for stress management, the more motivated they will be to continue using stress management techniques. A self-care plan can include answers to these questions:

- What are three things you like about your work?
- What are three things you find stressful about your work?
- What are the top causes of stress in your life right now?
- What signs or symptoms do you notice in yourself when you are stressed?
- What are three self-care strategies that already help you cope with the unavoidable stress in your life?
- What are two other self-care strategies that might help you cope better with the unavoidable stress in your life?
- What are three things you could do to reduce a cause of stress in your life (hint: think about problem-solving, assertiveness, and communication skills)?
- What are two things you can do during the next month to manage stress in your life?
- Write these things down as goals (e.g., I will...). These goals should be specific, realistic, and achievable.
- When will you do these things?

- As a manager, what are three things you can do to ensure your team members are prioritizing their self-care?



¹ Adapted from Rape Victim Advocacy Program. (2000). *Crisis Line Trainer's Manual*. Unpublished. Iowa City: RVAP.

² *Vicarious Trauma & Self Care*. Adapted from original presentation from Dr. Judith E. Booth, Psychologist