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THE NEW YORK  
SOCIETY  
FOR THE PREVENTION  
OF CRUELTY  
TO CHILDREN

## Take a Deep Breath: Stamina for Child Protection Professionals during COVID-19, July 14, 2021

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By Mary L. Pulido, PhD, Executive Director

The New York Society for the Prevention of Cruelty to Children

## Common Stress Reactions - A Self-Assessment

Think about how you know you are experiencing stress by marking the reactions you commonly have. This is for your personal use and will not be shared. (This chart was adapted from CMHS. Rev. Ed., 2002).

### Behavioral:

- Change in activity level
- Decreased efficiency and effectiveness
- Difficulty communicating
- Increased sense of humor/gallows humor
- Irritability, outburst of anger, frequent arguments
- Inability to rest, relax or let down
- Change in eating habits
- Change in sleep patterns
- Change In job performance
- Periods of crying
- Increased use of tobacco, alcohol, drug, sugar or caffeine
- Hyper-vigilance about safety or the surrounding environment
- Avoidance of activities or places that trigger memories
- Accident prone

### Physical:

- Increased heart rate and respirations
- Increased blood pressure
- Upset stomach, nausea, diarrhea
- Increased or decreased appetite which may be accompanied by weight loss or gain
- Sweating or chills
- Tremor or Muscle twitching
- Muffled hearing
- Tunnel vision
- Feeling uncoordinated
- Headaches
- Sore or aching muscles
- Light sensitive vision
- Lower back pain
- Feeling a "lump in the throat"
- Easily startled
- Fatigue that does not improve with sleep
- Menstrual cycle changes
- Change In sexual desire or response
- Decreased resistance to cold, flu, infections
- Flare up of allergies, asthma, or arthritis

- Hair loss

### Psychological / Emotional:

- Feeling heroic, euphoric, or invulnerable
- Denial
- Anxiety or fear
- Worry about safety of self or others
- Irritability or anger
- Restlessness
- Sadness, moodiness, grief or depression
- Vivid or distressing dreams
- Guilt or "survivor guilt:
- Feeling overwhelmed, helpless or hopeless
- Feeling isolated, lost, lonely, or abandoned
- Apathy
- Over identification with survivors
- Feeling misunderstood or unappreciated

### Cognitive:

- Memory problems / forgetfulness
- Disorientation
- Confusion
- Slowness of thinking, analyzing or comprehending
- Difficulty calculating, setting priorities or making decisions
- Difficulty concentrating
- Limited attention span
- Loss of objectivity
- Inability to stop thinking about the stressor

### Social:

- Withdrawing or isolating from people
- Difficulty listening
- Difficulty sharing Ideas
- Difficulty engaging in mutual problem solving / working with others
- Blaming
- Criticizing
- Intolerance of group process
- Difficulty in giving or accepting support or help
- Impatient with or disrespectful to other

**TABLE 10.1****Cognitive Restructuring: Ten Styles of Distorted Thinking**

Distortion	Mental key
1. Filtering: You take the negative details and magnify them while filtering out all the positive aspects of a situation.	Don't magnify
2. Polarized thinking: Things are black or white, good or bad. You have to be perfect or you're a failure. There is no middle ground.	Think in percentages.
3. Mind reading: Without them saying so, you think you know what people are feeling and why they act the way they do. In particular, you are able to divine how people are feeling toward you.	Check it out.
4. Catastrophizing: You expect disaster. You notice or hear about a problem and start what ifs: What if tragedy strikes? What if it happens to me?	Calculate the realistic odds.
5. Control fallacies: If you feel externally controlled, you see yourself as helpless and a victim of fate. The fallacy of internal control has you responsible for the pain and happiness of everyone around you.	Discriminate between/make it happen and <i>they</i> make it happen.
6. Fallacy of fairness: You feel resentful because you think you know what's fair, but other people don't agree with you.	Think of preference, not fairness.
7. Shoulds: You have a list of ironclad rules about how you and other people should act. People who break the rules anger you.	Develop flexible rules.
8. Fallacy of change: You expect that other people will change to suit you if you pressure or cajole them enough. You need to change people because your hopes for happiness seem to depend entirely on them.	Assert, my happiness depends on <i>me</i> .
9. Being right: You are continually on trial to prove that your opinions and actions are correct. Being wrong is unthinkable and you will go to any length to demonstrate your rightness. You don't listen well.	Use active listening.
10. Heaven's reward fallacy: You expect all your sacrifice and self-denial to pay off, as if there were someone keeping score. You feel bitter when the reward doesn't come.	Recognize that the reward is <i>now</i> .

*Note.* From *Stress Management for Wellness* (pp. 225-227), W. Schafer, 1987, New York, NY: Holt, Rinehart & Winston. Copyright 1987 by (engage). Adapted with permission.

## Reframing Negative Thoughts

Sometimes our automatic thoughts can be negative and irrational. If we can become aware of these negative automatic thoughts and replace them with new rational thoughts, we can improve our mood and behavior. Following the example below, practice reframing negative thoughts into positive ones.

Situation	Automatic (negative) Thoughts	Emotion	<i>Reframed (positive/rational) Thoughts</i>	New Emotion
<p><u>Example:</u></p> <p>Having difficulty making friends in a new workplace</p>	<p>No one likes me</p> <p>I'm not interesting</p> <p>This is impossible</p> <p>My coworkers must be talking about me</p>	<p>Frustrated</p> <p>Sad</p> <p>Lonely</p> <p>Stalled</p>	<p>I have lots of friends from my last workplace</p> <p>I have a lot to offer in a relationship</p> <p>It takes time to get to know people</p> <p>It's normal to feel nervous in a new environment</p>	<p>Hopeful</p> <p>Energized</p> <p>Grateful</p> <p>Confident</p>



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## Comparison of the symptoms of PTSD with STS Symptoms

### PRIMARY

#### A. Stressor

1. Experience, witnessed, or been confronted with an event or events that involve actual or threatened death or serious injury, or a threat to the physical integrity of oneself or others
2. the person's response involved "intense fear, helplessness or horror";  
an event such as
  - a. serious threat to self
  - b. sudden destruction of one's environment

#### B. Re-experiencing Trauma Event

1. Recollections of event
2. Dreams of the event
3. Sudden re-experiencing of event
4. Distress over reminders of event

#### C. Avoidance/Numbing of Reminders

1. Efforts to avoid thought/feelings
2. Efforts to avoid activities/situations
3. Physiologic amnesia
4. Diminished interest in significant activities
5. Detachment, estrangement from others
6. Diminished affect
7. Sense of Foreshortened future

#### D. Persistent Arousal

1. Difficulty falling/staying asleep
2. Irritability or outbursts of anger
3. Difficulty concentrating
4. Hypervigilance for self
5. Exaggerated startle response
6. Physiologic reactivity to cues

### SECONDARY

#### A. Stressor

1. Experienced, witnessed, or been confronted with an event or events that involve actual or threatened death or serious injury, or threat to the physical integrity of oneself or others;
2. The person's response involved "intense fear, helplessness or horror";  
an event such as
  - a. serious threat to traumatized person TP
  - b. sudden destruction of TP's environment

#### B. Re-experiencing Trauma Event

1. Recollections of event/TP
2. Dreams of the event/TP
3. Sudden re-experiencing of event/TP
4. Reminders of TP/event distressing

#### C. Avoidance/Numbing of Reminders

1. Efforts to avoid thought/feelings
2. Efforts to avoid activities/situations
3. Physiologic amnesia
4. Diminished interest in significant activities
5. Detachment, estrangement from others
6. Diminished affect
7. Sense of Foreshortened future

#### D. Persistent Arousal

1. Difficulty falling/staying asleep
2. Irritability or outbursts of anger
3. Difficulty concentrating
4. Hyper vigilance for TP
5. Exaggerated startle response
6. Physiologic reactivity to cues

(Adapted from Figley, 1995)

## Self-Care Inventory

Rate the following areas in frequency:

- 5** = Frequently
- 4** = Occasionally
- 3** = Rarely
- 2** = Never
- 1** = It never occurred to me

Physical Self-Care	
	Eat regularly (e.g. breakfast, lunch and dinner)
	Eat healthy
	Exercise consistently
	Get regular medical care for prevention
	Get medical care when necessary
	Take time off when sick
	Dance, swim, walk, run, play sports, sing or do some other physical activity that is enjoyable to self
	Take time to be sexual
	Get enough sleep
	Take vacations
	Wear clothes you like
	Take day trips or mini-vacations
	Make time away from telephones
	Other _____

Psychological Self-Care	
	Make time for self-reflection
	Engage in personal psychotherapy
	Write in a journal
	Read literature that is unrelated to work
	Do something in which you are not an expert or in charge

	Cope with stress in personal and/or work life
	Notice inner experience (e.g., listen to and recognize thoughts, judgments, beliefs, attitudes and feelings)
	Provide others with different aspects of self (e.g., communicate needs and wants)
	Try new things
	Practice receiving from others
	Improve ability to say “no” to extra responsibilities
	Other _____

### Emotional Self-Care

	Allow for quality time with others whose company you enjoy
	Maintain contact with valued others
	Give self affirmations and praise
	Love self
	Reread favorite book or review favorite movies
	Identify and engage in comforting activities, objects, people, relationships and places
	Allow for feeling expression (laugh, cry, etc...)
	Other _____

### Spiritual Self-Care

	Allow time for reflection
	Spend time with nature
	Participate in a spiritual community
	Open to inspiration
	Cherish own optimism and hope
	Be aware of nonmaterial aspects of life
	Cultivate ability to identify what is meaningful and its place in personal life
	Meditate/pray
	Contribute to causes in which you believe
	Read inspirational literature (lectures, music etc...)

Workplace or Professional Self-Care	
	Allow for breaks during the workday
	Engage with co-workers
	Provide self quiet time/space to complete tasks
	Participate in projects or tasks that are exciting and rewarding
	Set limits/boundaries with clients and colleagues
	Balance workload/cases
	Arrange work space for comfort
	Maintain regular supervision or consultation
	Negotiate needs (benefits, bonuses, raise, etc...)
	Participate in peer support group
	Other _____

\* Review assigned numbers. Appreciate areas of strengths while making positive changes in areas with significantly low scores to improve balance in life.

*Adapted by Mental Health Services for Homeless Persons, Inc. (MHS), Cleveland, OH. Used with permission. Original source: Unknown.*