

Grief, Exhaustion, and finding Vitality in Behavioral Health Care

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**Webinar For Northwest MHTTC
Region 10**

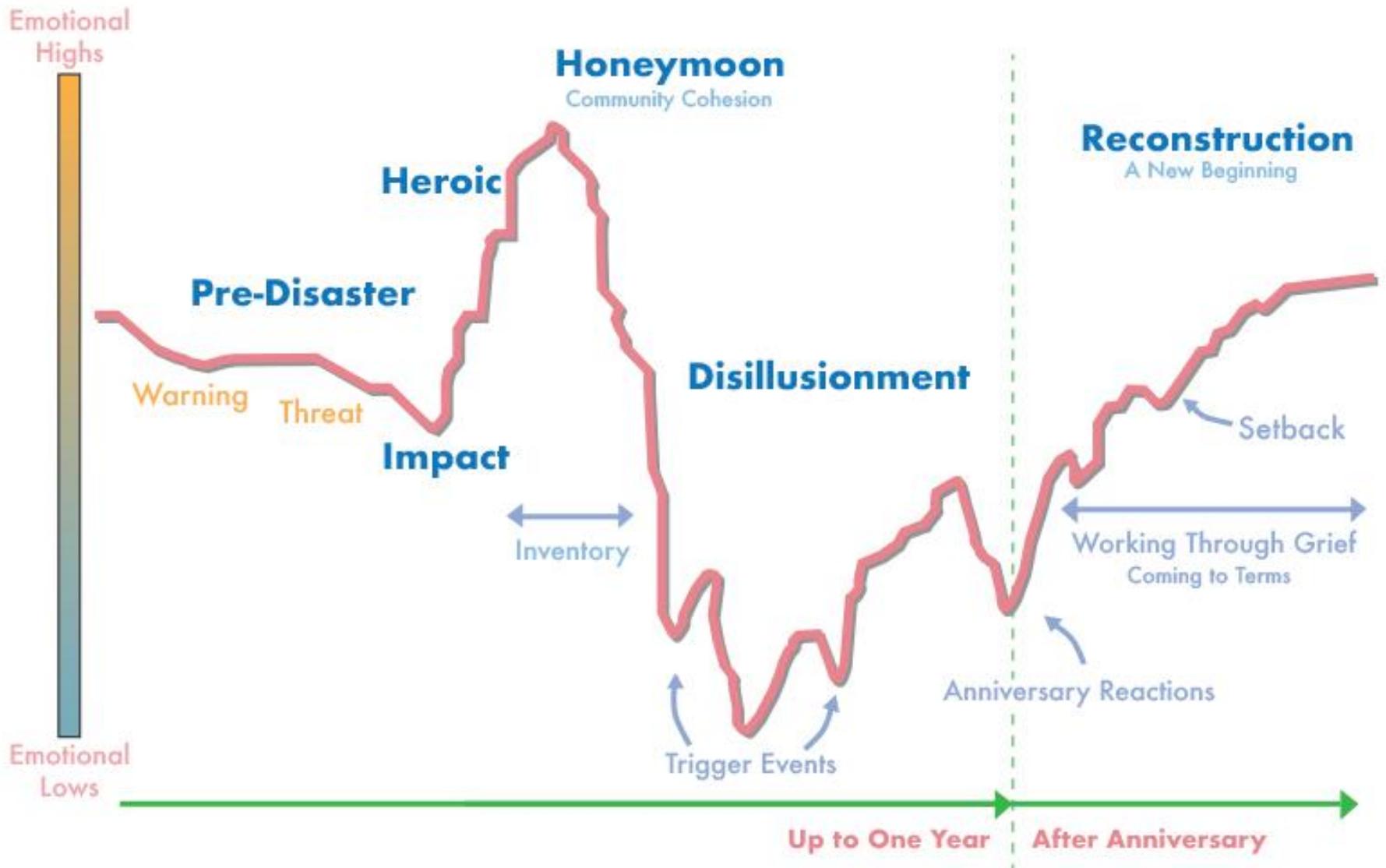
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Agenda

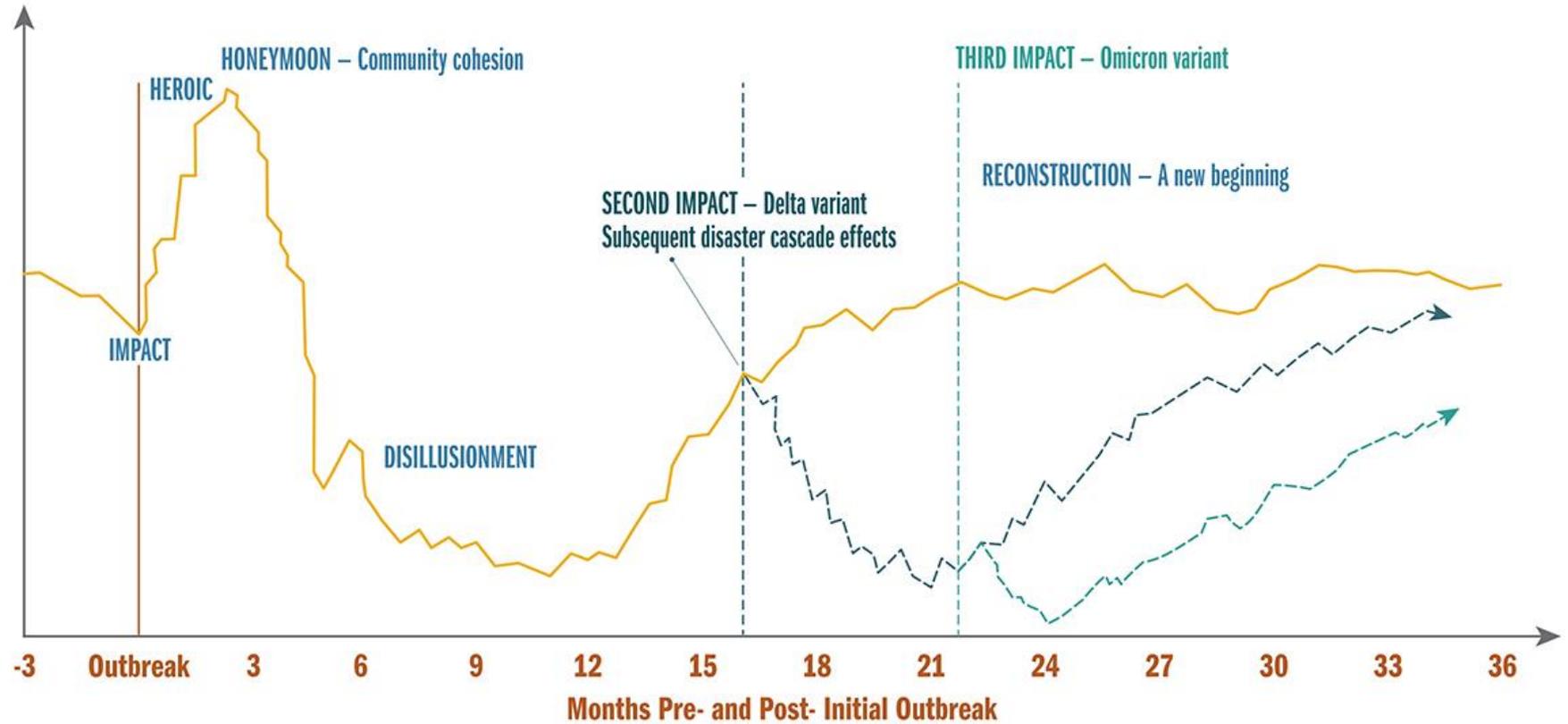
- Current conditions and functional challenges
- Informational and emotional processing
- Working through grief, loss and bereavement
- Areas of focus for functional teams when exhaustion is prevalent





Reactions and Behavioral Health Symptoms in Disasters – COVID-19

Emotional Response – Lows to Highs



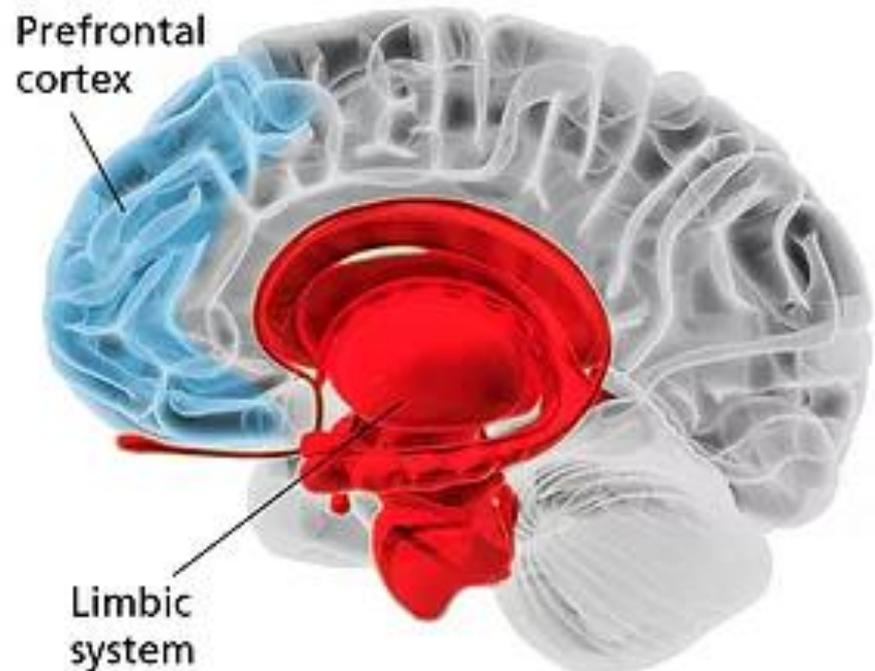
Information & Emotional Processing

- Stress and Trauma relationship
 - All trauma is stressful, but not all stress is traumatic
 - Where are we after (at least) three large scale impacts in 24 months?
- Secondary Traumatic Stress
 - From clients / patients as well as accounts from team members and colleagues
 - One “life ring” we keep passing around to one another
- The degradation of care- the scarce resource phenomena
- Pressures / Demands from all sides
- Slowing down can assist with decision making
- Fundamental Attribution Error



The brain in disaster: how functioning is influenced

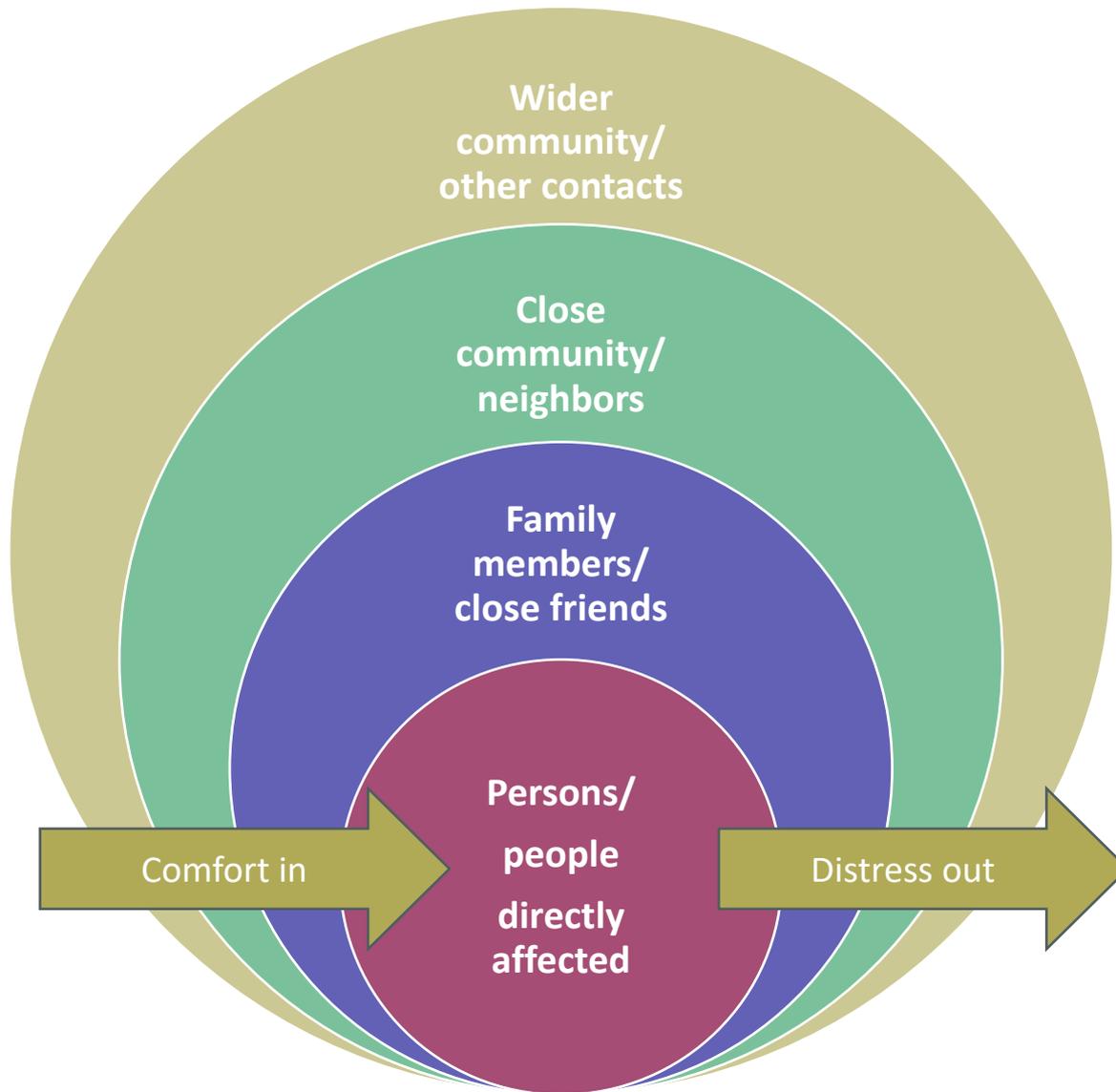
- Prefrontal cortex: higher-level functioning, planning, organization, details, filtering.
- Limbic system: emotion, impulse, pleasure and safety, memory



What people who have lost someone might want you to know:

1. Even during “happy” experiences, there is an awareness that someone is missing.
2. Small talk, social situations and superficial interactions are exceptionally hard.
3. Grief is often awkward with people who know you best- don’t try to “avoid” talking about the person who as been lost.
4. Emotions, including tears, are going to happen when then happen.
5. Grief comes in waves. Things may feel “ok” in some moments and crushing in the next.





Considerations for Working With Grief, Loss, and Bereavement

- Facilitate problem solving and decision making to **prevent impulsive or risky decisions** (e.g., precautionary health measures, burial decisions).
- **Help them to modify coping plans** if traditional strategies aren't possible (e.g., gathering with family to grieve through online video chat).
- Rather than vague offers of help, ask specifically if you can do a discrete task (laundry, getting groceries, watching kids, etc).
- Don't put the grieving person in a position of supporting you- remember the unidirectional process of comfort in and distress out.
- Help the person identify what has helped them in times of great distress or difficulty in the past.
- Use active listening- open ended questions; It's ok to ask directly about the loss, or to ask the person if they are ok talking directly about the loss.

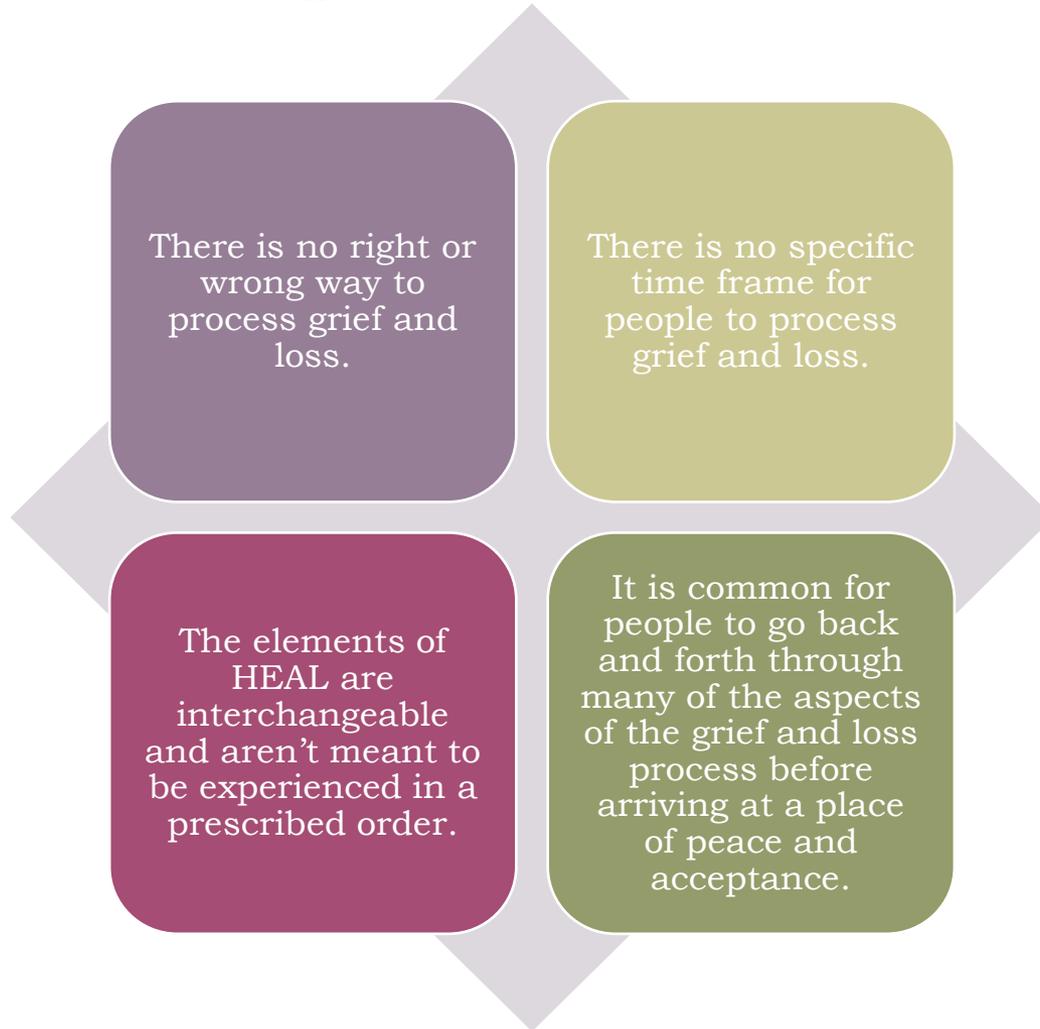


HEAL model[®] starting points

- It is important to note that the grief and loss process is not specific to the loss of a person or the death of a loved one.
- Many people go through the grief and loss process when there is something else (besides a person) that has been lost. Examples include:
 - The loss of identity (such as might take place after a personal assault or rape),
 - The loss of meaning (such as might take place after a life transition or move)
 - The loss of an idea or principle (a shift in world view that is brought about after a disaster or major event)



HEAL model starting points



HEAL

H= Honor

Honor the loss by participating in rituals, ceremonies or other events when possible (even online)

Rather than avoiding memories, an important part of healing is to honor the memory of the person or idea, situation or experience that was so significant.

Write in a journal, share stories, look at pictures, reflect on memories.



HEAL

E = Express

Express emotion. There are no wrong emotions.

Being angry is a common emotion that many people experience in grief. Often, anger protects us from experiencing fear or sadness.

In the case of the loss of a loved one, it is not uncommon for people to feel angry towards that person, and then feel guilty for being angry. This is normal, and it is OK to express these feelings.

Deep sadness as well as emotional flattening (not expressing much of anything) are also common in the grief process.



HEAL

A = Acknowledge

- **Acknowledge the obstacles** that may be blocking the healing.
- Most people tell themselves things that prevent them from really accepting the loss. Acknowledging those obstacles tends to remove them, and helps with healing.
- **Be aware of “But if..... Then...” thinking and statements**
- **Common obstacles** that get in the way of acknowledgement (and then accepting) the loss include:
 - Avoiding or denying the loss
 - Wishing things were different than they are (if only)
 - Wondering what could have caused a different outcome (but if)



HEAL

L = Live

- Living is more than simply existing, but just breathing is a good place to start.
- Some days, following a loss, all someone can do is make it through the day.
- Over time, as the healing process continues, it becomes important to focus on life and **active** living, rather than just surviving or existing, but there is no specific time frame for this.
- When ready, shift focus on living by engaging, learning, participating, doing and feeling.
- The active development of the elements of resilience can help with this.



Connecting with Vitality

- Consider the development of a Personal Coping Plan- get it down on a piece of paper that is accessible on a daily basis

Note: What are your resources, what are your “go-to” healthy supports when needed and what are the parameters for each?

Issue	Options	Time frame
Anxiety	Sensory – ice, shower, music	Any time
Hopelessness	Connection- pets, help neighbors	Evenings
Sadness	Outside time – walk, garden	Weekends
Supports		
Name	Contact	



Orientation around Core Values

- Identify 3-5 KEY CORE VALUES
 - These are guiding characteristics that you would like to develop or “live” more consistently in all “roles” that you play.
- Pick one that is the highest priority
- Identify an example of how that value is (or can) manifest itself in the workplace
- Identify an example of how that value is (or can) manifest itself in a personal or home context



Practice the REST Model

Reward: Reward yourself for a job well done. Build reinforcements into your work. Help pay attention to this aspect for maintaining resilience.

Establish: Establish healthy boundaries. When you are off duty, stick to that boundary.

Share: Share your feelings, concerns, and stories. Participate in support and consultation groups. Make time for connections and activities in your life.

Trust: Trust your support network and reach out as needed. Refer people elsewhere if you are too tired or compromised emotionally to be able to offer support.



Resilience Development

Purpose

- What motivates you? What goals do you have right now? (don't think too long term or big picture).

Connection

- To whom or what are you connected? Connection can be anything that prevents isolation.

Adaptability

- How can you make adjustments that are needed, to time, space, fun, expectations, etc?

Hope

- How can you shift your thinking from 'threat' to 'challenge' and what are the realistic opportunities you have?

