Role of a Caregiver During a Crisis

By Jim Fuller, Pastoral Care, Inc.

Many of you may be facing the most difficult role of your life as a caregiver/minister. You may find yourself in the midst of the most horrible disaster imaginable. Even though it is hard to imagine, God knew beforehand that you will be facing this disaster and He will provide the strength and energy to get you through!

Our concerns as a provider for caregivers and ministers is to provide information and care for you and your family, to ensure that you remain as a pastor without the stress, burnout, or fatigue that can come over time or through a natural disaster. As the largest provider of care for pastors, we are here for you!!! Don’t be afraid to call on us.

Listed below is an outline for your convenience. Please take time to read and share this with your family and staff. Even through tragedy, God’s love and provision will prevail if one is sensible and provide the necessary safeguards to ensure success. God is using you in such a time as this!

**Acute Episodic Trauma** is a life threatening event that occurs to individuals or to an important other, over which they have no control, and is often the result of a natural disaster. The stress people feel can last up to one month without meeting the criteria for post-traumatic stress disorder (PTSD). (Phelps, 2005)

**Post-Traumatic Stress Disorder (PTSD)** is exposure to a traumatic event during which one feels fear, helplessness, or horror. Afterward, victims re-experiences the even through memories and nightmares. In children, it may be expressed by disorganized or agitated behavior. They often avoid the thoughts, feelings, activities, places that may recall the trauma. As symptoms increase, they may have difficulty in falling asleep, displaying irritability or outbursts of anger, difficulty in concentrating, hypervigilance (overly watching or avoiding danger), and displaying exaggerated startled responses. (Barlow, Durand, 2005 & DSM IV)

**Traumatic experiences** shake the foundations of our beliefs about safety and shatter our assumptions of trust. Because they are so far outside what we would expect, these events provoke reactions that are unusual and disturbing, they are typical and expectable. These are normal responses to abnormal events. (Baldwin, 2009)

While the immediate role for a caregiver is to provide support and services for the basic needs and safety of others, a caregiver also provides:

1. Active listening
2. A calm and safe place for others to share
3. Empathy
4. Hope and spiritual comfort.

As a caregiver, one has to be careful that one manages their own feelings and behavior. This provides a calm, safe setting and teaches others to handle stress now and in the future.

Another issue for caregivers is to avoid **Secondary Trauma**. Secondary trauma is also known as vicarious traumatization (Pearlam & Saakvitne, 1995) and compassion fatigue (Figley, 1995).

The people who work with trauma victims, such as counselors, rescue workers, social workers, ministers, etc., can experience PTSD-like symptoms experienced by direct victims in a disaster.

Expect this: If you work with or are exposed to the stories of many disaster/trauma victims, and take steps to protect yourself at the first sign of trouble. Basically, there are three risk factors for secondary traumatization:

1. Exposure to the stories (or images) of multiple disaster victims.
2. Your empathic sensitivity to their suffering, and
3. Any unresolved emotional issues that relate (affectively or symbolically) to the suffering seen.

Aside from using whatever **stress reduction** or **stress management** measures work best for you, there’s little an emergency or disaster worker can do about the first two risk factors, but it does help reduce the risk for vicarious traumatization if you know your own personal vulnerabilities and unresolved upsetting issues. Those are the cases best referred to your colleagues, when possible. Beth Stamm has created a wonderful website particularly on **Secondary Traumatization** that discusses these issues in much greater detail, and Laurie Anne Pearlman has compiled a **selected bibliography** of important references in the areas of vicarious and indirect trauma.

For many exposed individuals, especially those in the at-risk professions, participation in well-run CISD (**Critical Incident Stress Debriefing**) groups may also help resolve upsetting experiences more quickly, as long as participation is voluntary (not mandatory). Group debriefings may be adequate for most, but brief individual sessions might be needed for 10 - 20% of those suffering the most severe exposures. In fact, one value of debriefing groups is to help identify those workers needing additional attention.

***Even the very best of professionals can develop secondary trauma, which can take on some of the same effects of their clients. In other words, those who spend more time with trauma victims will become more likely to become traumatized themselves. One has to guard being healthy so that you can bring a healthy service to others.
12 Safeguards for Caregivers:

1. Know your limitations.
2. Provide professional help for others—don’t try to be everything to everyone. (Messiah Complex)
3. Form an accountability team to evaluate one’s level of health.
4. Take a break. Many caregivers do not want to leave but often times cannot help others until they become strengthened themselves.
5. Give yourself permission to fully experience emotional reactions. Do not “bottle up” your feelings.
6. Set realistic goals for yourself, your ministry, and your outreach.
7. Learn and practice time management skills. Achieve a sense of balance in your professional and personal lives.
8. Limit what you share with other family members. Your family may not be as strong and carry the same load.
9. Recognize negative coping skills and replace them with positive skills. It is easy to see and feel everything negative. Results only come from positive coping skills.
10. Do not isolate yourself professionally. It is beneficial to have other support systems around you.
11. Remember your spirit-man. Many ministers neglect time in prayer, reading the word, and in prayer when disasters occur. It is essential to maintain through this difficult time.
12. Debriefing may be necessary to “unload”.

How Shall I Help Myself and My Family?

There are a number of steps you can take to help restore emotional well being and a sense of control following a disaster or other traumatic experience, including the following:

- Give yourself time to heal. Anticipate that this will be a difficult time in your life. Allow yourself to mourn the losses you have experienced. Try to be patient with changes in your emotional state.
- Ask for support from people who care about you and who will listen and empathize with your situation. But keep in mind that your typical support system may be weakened if those who are close to you also have experienced or witnessed the trauma.
- Communicate your experience in whatever ways feel comfortable to you - such as by talking with family or close friends, or keeping a diary.
• Find out about local support groups that often are available such as for those who have suffered from natural disasters. These can be especially helpful for people with limited personal support systems.
• Try to find groups led by appropriately trained and experienced professionals. Group discussion can help people realize that other individuals in the same circumstances often have similar reactions and emotions.
• Engage in healthy behaviors to enhance your ability to cope with excessive stress. Eat well-balanced meals and get plenty of rest. If you experience ongoing difficulties with sleep, you may be able to find some relief through relaxation techniques.
• Establish or re-establish routines such as eating meals at regular times and following an exercise program. Take some time off from the demands of daily life by pursuing hobbies or other enjoyable activities.
• Avoid major life decisions such as switching careers or jobs if possible because these activities tend to be highly stressful.

Pastoral Care, Inc. is here to help assist you in good times and those times that are challenging. We can provide a place for you and your family to go to rest and “re-load”. We can provide other professional services of legal help, counseling, medical assistance, artisan, and most of all…a safe and confidential place to call for prayer or just to talk with someone. We are here for you!!!

**How Do People Respond Differently Over Time?**

It is important for you to realize that there is not one 'standard' pattern of reaction to the extreme stress of traumatic experiences. Some people respond immediately, while others have delayed reactions - sometimes months or even years later. Some have adverse effects for a long period of time, while others recover rather quickly.

And reactions can change over time. Some who have suffered from trauma are energized initially by the event to help them with the challenge of coping, only to later become discouraged or depressed.

A number of factors tend to affect the length of time required for recovery, including:

• The degree of intensity and loss. Events that last longer and pose a greater threat, and where loss of life or substantial loss of property is involved, often take longer to resolve.
• A person's general ability to cope with emotionally challenging situations. Individuals who have handled other difficult, stressful circumstances well may find it easier to cope with the trauma.
• Other stressful events preceding the traumatic experience. Individuals faced with other emotionally challenging situations, such as serious health problems or family-related difficulties, may have more intense reactions to the new stressful event and need more time to recover.

Ways Supervisors Can Help Workers Deal with Secondary Trauma

The following is excerpted from Salus (2004):

To avoid burnout and to help caseworkers deal effectively with the effects of secondary trauma, supervisors can:

• Assist caseworkers in dealing with the emotional impact of the work by allowing them to share their thoughts and feelings about it.

• Offer ongoing or further support and validation to workers when a traumatic event occurs. Staff need to be able to express their feelings and have opportunities to talk about their thoughts. If intrusive thoughts extend beyond the trauma experience, caseworkers need to learn to anticipate and manage them effectively. This also may be helpful when the traumas (e.g., floods or terrorism attacks) are not casework-related and may affect the entire community or the caseworker personally.

• Institute a trauma support group. Meetings should be regularly scheduled (e.g., at the same time twice a month) with the focus on the traumatic stress in caseworkers' lives.

• Initiate supportive activities on the unit level. For example, a practice could be started of co-workers helping with paperwork or assisting with home visits during particularly traumatic periods. Supervisors can establish flexible work schedules, including "mental health days" or days spent in the office not making home visits. Another option is to spend time in certain meetings discussing the personal side of work.

• Provide a religious or spiritual consultant to offer solace and counseling when children or fellow staff members are affected.

• Deliver training to create self-awareness regarding stress and how to manage it, how to understand the effects of trauma, and how to develop coping skills that enable staff to better manage trauma.

***Listed below are a few other resources I have written. They are also on our website: www.pastoralcareinc.com
Compassion Fatigue

Compassion fatigue is defined as a natural consequence and by-product of caring for, listening to and helping those traumatized or learning about and hearing stories of those traumatized.

Who is Vulnerable?

* Those of us who have empathy and are exposed to a number of people with problems, exposed to trauma or who are traumatized.
* Trauma workers include police, emergency workers, therapists and pastors.
* We who have experienced trauma and trauma that remains unresolved. (The hurts and wounds of being a pastor)
* Those of us who view ourselves as saviors or rescuers.

Comparing Compassion Fatigue to Burnout:

Compassion Fatigue:

* Preoccupation with absorbing trauma and emotional stresses of others.
* Symptoms similar to burnout, but onset is faster, with better opportunity to recover.
* May lead to burnout.

Burnout:

* Subtle, over time and leads one to believe he or she is not meant for this type of work.
* Feelings of being ineffective, callous, negative, emotional absence, sarcastic and "stuck".

Solutions:

* Jesus Himself too had a "time out" for prayer, meditation and rest!
* We have a tendency to do more, only to accomplish less! Time management is one of our biggest problems - "burning a candle at both ends"!
* Be aware of the enemy! Exercise, eat relaxed meals, spend time with your family and friends, develop outside interests, before counseling-reflect and reorganize thoughts, spend time for prayer and meditation and celebrate closures.

Remember...You are the most important person in your life! You cannot help others unless you take care of yourself!! "Love your neighbor as yourself". Lev 19:18; Luke 10:27; Galatians 5:14.

Self Assessment for Compassion Fatigue

1. _____ Professional concerns commonly intrude on my professional role.
2. _____ My colleagues or church members seem to lack understanding.
3. _____ I find small changes are enormously draining.
4. _____ I can't seem to recover quickly after association with a traumatic event.
5. _____ Association with trauma affects me very deeply.
6. _____ My client's stress affects me deeply.
7. _____ I have lost my sense of hopefulness.
8. _____ I feel vulnerable most of the time.
9. _____ I feel overwhelmed by unfinished business, both personal and church.
Stress & Burnout

STRESS

It is impossible to live in a world without stress. It is natural and can be managed to what is felt or interpreted. Stress is a response your body makes to any demand placed upon it. When we think of stress, we often think negatively but there is also good stress.

* Good Stress (eutress) is associated with feelings of joy, fulfillment and achievement.
* Bad Stress (distress) may involve prolonged and frequent transactions that takes place between you and your environment.

These outside events impinges on your belief system, your brain interprets what is happening and tells your body how to respond. Many people will "fight or flight" when this occurs. Adrenalin is pumped into the bloodstream, blood is diverted from various organs to the brain and muscles, pupils dilate, hands and feet perspire, breathing and heart rate increases, etc. The body is on alarm response.

There are many reasons for stress:

- The disparity between idealistic expectations and reality.
- Lack of clear defined boundaries-tasks never get done, workaholic, "I have to do everything" mentality.
- Peter Principle-feeling inadequate in leading an army of volunteers.
- Conflict in being a leader, trying to please everyone.
- Trying to be a "servant" to everyone.
- Time management problems.
- Problems with self-esteem.
- Multiplicity of roles.
- Inability to produce a "win-win" conflict resolution.
- Clergy being basically insecure, lonely and too serious.

Contributors to Stress

* Bio-ecological factors related to poor diet-too much caffeine, refined white sugar, processed flour, salt and poor exercise habits.
* Vocational factors include career uncertainty, role ambiguity, role conflicts, role overload and many more listed above.
* Psychological factors relate principally to the great life stressors-loss of loved one, divorce, personal injury or illness, financial difficulties, etc.
* Spiritual factors that cause stress include temptations of all kinds, pornography, sexual fantasies or sexual inappropriateness, despair if your church isn't growing, jealousy of the success of others and any other way you feel the devil can get to you.

Possibilities from Chronic Stress

* Heart problems, high blood pressure, stroke, rapid heart beat.
* Headaches, ulcers, backaches, jaw pain, arthritis, allergies, colds.
* Nervous tics, anxiety, hives, diarrhea, sexual problems, eating problems, insomnia.
* Immune system problems, cancer, mental lapses, infections.

**BURNOUT**

Burnout is emotional exhaustion. Burnout can cause you to give up on something you have passionately committed to. Burnout can cause you to:

- Leave your church too soon.
- Quit doing what God has called you to do.
- Give up on your dreams.
- Change your attitude and personality.
- Damage your most important relationships.
- Be lead to moral failure and sexual sin.

Burnout is not usually found in lazy people. Men and women who suffer burnout are usually purposeful, committed, unselfish and somewhat idealistic servants of God. Burnout often hits people who believe, commit and serve with all their heart, in the area which they believe God has directed their commitment and involvement toward.

Burnout can lead to depression, discouragement, isolation, chronic fatigue, paranoia, becoming critical and judgmental of others, martyr complex, rejection, messiah complex and a lack of inspiration in your teaching or preaching.

**Symptoms of Burnout**

Fatigue... frequent illnesses... sleep problems... disillusionment with work... cynicism toward people and church... sense of helplessness and hopelessness... feeling of powerless to change events... anger toward the "system"...depression and isolation... detachment from others... absenteeism... harshness in dealing with colleagues... reduced commitment to work.

**Causes of Burnout**

Burnout is not a part of God's divine plan for your life. It happens when you get things out of order or because you are misused or abused by others. Here are some reasons why burnout occurs:

- Working too long and hard without a break.
- Reaching a goal after long hard work and not having a vision or purpose to go forward from there. (Very typical after a church building program).
- Feeling you are betrayed by those you are serving.
- Feeling betrayed by those you are serving under.
- Having done all you can in a position or place but not letting go or move on.
- Feeling used or not cared for.
- Sin, unconfessed and unrepented.
- Wrong priorities in the use of time and energy. (Becoming a workaholic).
- Violating the weekly "Sabbath" principle. Being on duty 24/7.
- Disappointment and disillusionment with a leader you have faithfully served.
- Failure of a project or ministry in which you have invested of yourself.
- Frustration with others.
- Unfulfilled expectations of success, recognition or reward.
- Lack of focus. Energies and activities scattered in too many directions.
- Trying to do the job you are not called, gifted or properly trained to do.
• Working for the wrong motives.
• In over your head without adequate support.
• Occupying a position rather than fulfilling the call.

Prevention

Is it possible not to experience burnout? We can develop actions to improve our attitude to prevent burnout. Here are a few:

• Be aware of the potential problem with burnout. Face the realities of the stressors and pressures of being "called" into the ministry.
• Accept your limitations. Jesus was the only Messiah! We are all limited on what we can and must do. God will help you whenever you need it.
• Use common sense. Think about what you are doing and how it might affect your family and those around you. How are you managing financially, physically, emotionally and spiritually? Are things getting better or worse?
• Balance the important elements of your life. Relationships are important to you. You are not what you do but who you are! Get a life that allows you to have a personality, friendships, have hobbies, have the ability to pay your bills and have a little fun!!! These are more important than position, projects and possessions.
• Practice the "Sabbath" principle. Delegate responsibility to others so that you can have a day off. Even Jesus needed rest! God created a principle of working six days and resting one.
• Deal with disappointments, offenses and betrayal of others quickly! Forgive from the heart. No one can allow anger and frustration to linger and grow. It will only lead to destruction.
• Get into the aspect of ministry that you are "called" and "gifted" to do. You are unique—don't try to copy others!

Stress & Burnout Differences

* Burnout is a defense characterized by discouragement. Stress is characterized by over engagement.
* In Burnout, the emotions become overactive. In stress, the physical damage is primary.
* The exhaustion of burnout affects motivation and drive. The exhaustion of stress affects the physical energy.
* Burnout is demoralization. Stress can be best understood as a loss of fuel and energy.
* The depression of burnout is caused by grief engendered by the loss of ideals and hope. The depression of stress is produced by the body's need to protect itself and conserve energy.
* Burnout produces a sense of helplessness and hopelessness. Stress produces paranoia, depersonalization, detachment, panic, phobias and anxiety type disorders.
* Burnout may never kill you but your life may not seem worth living. Stress may kill you prematurely and you won't have enough time to finish what you have started.
* Stress contributes to 90% of all diseases! Half of all visits to doctors are stress related. Anxiety reduction may be the largest single business in the western world.
* Doctors, lawyers and clergy have the most problems with drug abuse, alcoholism and suicide.

If you have a problem with stress and burnout, please get the help you need! Life is too short!!! I firmly believe you are "called" for such a time as this but you must guard against not fulfilling your call.

Satan is working overtime to discourage and hinder our ministers. Too many pastors are leaving the ministry and too many churches are closing their doors. Let Pastoral Care Inc. help you.