

# ANYONE CAN DO SOMETHING FOR 15 MINUTES... EVEN SELF-CARE!

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Mental health practitioners often answer the call to respond to man-made and natural disasters. We make the transition from mental health practitioners to mental health responders in critical incidents with what seems a great deal of ease. At our very core is the desire to help others. However, underneath our wish – if not need – to help is the question, “At what cost?”

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Our graduate programs and even our conferences rarely address this issue, resulting in the unspoken inference that we are to “soldier through” our work/calling with little thought to our own needs and/or wellbeing. However, it is becoming clear that to take care of others well, we need to take care of ourselves. The premise that “Anyone can do something for 15 minutes” came from a client who was having a hard time doing her own self-care tasks. One day she walked in and said “Anyone can do something for 15 minutes” and she began to do so. Taking her lead, I am suggesting to you that even in the frenzy of a busy day or a catastrophe, there is time to do something for 15 minutes. In this case, it is self-care. This brief article is to support you creating your own user’s manual of self-care resources.

To start, let’s look at the Green Cross Academy of Traumatology Guidelines for Self-Care (2005) that emphasize the following:

1. Do no harm to yourself in the line of duty when helping/treating others
2. Attend to your physical, social, emotional and spiritual needs as a way of ensuring

high quality services for those who look to you for support as a human being. When you think of the way that you conduct your life, how are you doing?

Neal Daniels (2014) was one of our colleagues who was concerned about his staff’s wellbeing at the Philadelphia VA Medical Center. He introduced the idea of taking care of “peskies” which were the result of listening daily to their patients daily recounting of war, its aftermath and other life issues. Understanding the toll of vicarious traumatization, Daniels asked his staff to bring up the image of the patient/difficult situation, do 10-15 Butterfly hugs, while noticing the positive cognition that comes to mind. Then, install the PC with the patient’s image or the situation. You can try this on one of your peskies to get you started on creating your own user’s manual that supports self-care.

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Now that you have created a more positive state, think about what good health and balance would look like in your life where you are sound in body, mind and spirit. Next, take this goal of health and access your own “internal resource state” (Popky, 2009) as you remember a time that you felt healthy and your life was in balance. If you can’t think of one, make it up or think of how a healthy friend would approach it. Note what you see, hear, smell, taste and any other relevant positive sensory data, then do BLS/ the Butterfly Hug. Give this state a name, such as “I’m healthy and in balance,” and

use BLS again. If it turns negative, look for another positive experience. If it is positive, enjoy the experience of your balanced and healthy state as often as you like.

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Catherine Butler (2016) is another of our colleagues who supports self-care. She suggests using the “Compassion Fatigue Awareness Project” ([www.commpassion-fatigue.org](http://www.commpassion-fatigue.org)) so you can evaluate how you are doing in this area and know the signs of when you are out of balance. Please check it out. If you are doing okay, give yourself a pat on the back. If not, get some help. In “Vicarious Trauma and EMDR,” Derek Farrell (2014) wrote about the impact of the volunteer work he did supporting colleagues and survivors of the 1999 Marmara earthquake in Turkey. Not recognizing his own symptoms, Farrell descended into the nightmare of vicarious traumatization. He came out with a list of signs of Secondary PTSD and many other helpful suggestions.

Do you have any of these symptoms?

Symptoms of posttraumatic stress disorder:

- ☐ Nightmares, sleeplessness, intrusions, avoidance behavior, irritability
- Denial of client’s trauma
- ☐ Over-identification with client
- ☐ No time and energy for oneself
- ☐ Feelings of great vulnerability
- ☐ Insignificant daily events are experienced as threatening
- ☐ Feelings of alienation

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- ☐ Social withdrawal
- ☐ Disconnection from loved ones
- ☐ Loss of confidence that good is still possible in the world
- ☐ Generalized despair and hopelessness
- ☐ Loss of feeling secure
- ☐ Increased sensitivity to violence
- ☐ Cynicism
- ☐ Feeling disillusioned by humanity
- ☐ Disrupted frame of reference
- ☐ Changes in identity, world-view, spirituality
- ☐ Diminished self-capacities
- ☐ Impaired ego resources

Check off those you recognize and ask a close friend to give you his/her point of view. If you have some, it would be helpful to get some help because Butler (2014) says, "Compassion fatigue is like standing out in the hot sun, with no hat, sunscreen, water or shade and simply willing yourself not to get burned and dehydrated. Eventually, despite mentally commanding yourself to avoid becoming a lobster, it will happen and your body will pay the price." Compassion fatigue can creep up on you.

Karen Alter Reid (2014) in her article, "Community Trauma: A Blueprint" gives us a list of the self-care techniques her Trauma Recovery Network teammates used while coming to the assistance of their Newtown, CT colleagues and survivors:

- ☐ Feeling valued in the group
- ☐ Keep schedule intact: eating, enough sleep, extra TLC
- ☐ Utilize the light bar in office and run through the things seen and heard that day
- ☐ When tapping, follow my own hands

with my eyes

- ☐ Take a deep breath between sets with clients
- ☐ Cut down on too much media
- ☐ Enjoy escapist movies and comedies
- ☐ Say, "No," to requests that exceed my coping abilities at the moment
- ☐ Trust others will pick up the slack
- ☐ Embrace support
- ☐ Ask for help
- ☐ Be content with doing the best I can do  
Get support from other EMDR therapists  
Connect daily with people on my team  
– I am not alone
- ☐ Use physical release in client sessions  
such as deep breathing, shaking arms  
and legs to get to the nasty feelings
- ☐ Grab respite and rejuvenation when I can
- ☐ Do body work such as qigong,  
pedicure or massage
- ☐ Morning exercise
- ☐ Epsom salt baths
- ☐ Time with significant other
- ☐ If it is not necessary, it is off my list
- ☐ Go to monthly women's/men's group

It would be helpful for you to write down some of these resources in your manual so that you can pull them out when you need some gentle reminders of self-care resources and add the ones you already have. It is a list that can keep growing as you find new ones.

This article is only a way to begin (or continue) your user's manual of self-care resources while engaged in EMDR Early Interventions and/or while working in your office. It can also be helpful to engage a "buddy" so that you can support each other because, after

all, anybody can do anything for 15 minutes a day...even self-care! Even you!

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