Welcome, your facilitator will be:
Samson Teklemariam, LPC, CPTM
- Director of Training and Professional Development for NAADAC
- NAADAC, the Association for Addiction Professionals
- www.naadac.org/education
- Steklemariam@naadac.org

www.naadac.org/webinars
Using GoToWebinar
(Only Participants Only)

- Control Panel
- Asking Questions
- Audio (phone preferred)
- Polling Questions

Sarah Buino, LCSW, RDDP, CADC, CDWF (she/her/hers)
- Founder - Head/Heart Therapy, Inc
- Adjunct Professor - Loyola University and Fordham University
- Chicago, IL
- www.headhearttherapy.com

Webinar Learning Objectives

- Participants will differentially define burnout, compassion fatigue, and vicarious trauma.
- Participants will explain the eight areas of wellness and how they support a healthy therapist/counselor.
- Participants will analyze current self-care strategies to create an individualized plan to decrease stress.

Presented by:
Sarah Buino, LCSW, CADC, CDWF
Who is a wounded healer?

Why Do We Become Helping Professionals?

Many possible reasons...

- Desire to help others
- Want to do meaningful work
- Recognize that our values match well with our work
- Other reasons?
Don't bleed on your clients

Why Might We Struggle to Do Our Self-Work?

- Fear
- Shame
- Pride
- Not valuing importance of inner life
- Others?

Empathy and the Therapist

Empathy is the resonant, felt experience of what the other is experiencing (mirror neurons, social brain circuitry)

- Benefits of empathy
  - Allows us to meet the other where they are
  - Deepens awareness and understanding
  - Opportunity for creating safe and secure relationships
  - Opportunity for enhancing connection and shared pleasure
- Risks of empathy ("unmanaged empathy")
  - Emotional contagion
  - Blurring boundaries (what's theirs and what's mine?)
  - Being triggered (frustrated, distressed, hopeless)
  - Feeling overly responsible/hurdened
Empathy and the Therapist cont...

- When we empathize, we become vulnerable to the feelings associated with not being able to effect change in our clients’ suffering.
- How do we sit with the suffering of another?
- Are we able to stay present, or do we try to compulsively effect change?
- Our presence is cultivated from BEING, not DOING: the quality of our connection to ourselves affects our ability to connect to others.
- Out of BEING emerges attunement and engagement with the impulses toward greater connection, integration, healing and growth.

Polling Question #1

What were you taught about countertransference?

A. Countertransference should be avoided
B. Countertransference was normal and good info for the session
C. Countertransference was my problem
D. Countertransference means I’m working harder than the client
E. I did not learn about countertransference

Unmanaged Empathy

- Unmanaged empathy can look like caring and precise attunement, but fueled by our own countertransference, our need to be there for others and to give in a specific way.
- Unmanaged empathy points to places where the therapist needs to heal.
- Countertransference is not bad or wrong, but MUST be acknowledged and used in the conception of each case.
Hazards of the Helping Field

What are:
- Rust out
- Burn out
- Compassion fatigue
- Secondary trauma

Rust Out

Some people in our profession may have lost the "fire" to do this work and may continue working for years without pursuing clinical development to enhance their knowledge and skills.

Professional Burnout

"Deterioration in job performance due to continued contact in high-stress work environments"
- Bill White, Incest in the Organizational Family
Symptoms of Burnout

- Feeling chronically fatigued
- Hyper-critical self-talk
- Changes in eating and sleeping patterns
- Anxiety and irritability

Factors Leading to Burnout

- High caseloads of clients
- Increased documentation demands
- Unmanageable pace of change
- Limited training on complex issues
- Inadequate professional support
- Ineffective self-care practices

Vicarious Traumatization

What is it?
- Sometimes called secondary trauma
- Root cause is exposure to reports of trauma given to us by our clients
- Typically a result of many such stories, but may occur following a vivid, severe experience

What are VT symptoms?
- Similar to PTSD symptoms:
  - Increased anxiety and hypervigilance
  - Preoccupation with the incident(s)
  - Nightmares
  - Personalization of the trauma
  - Becoming overprotective of loved ones
  - Efforts to avoid similar interactions
Polling Question #2

At what point in your career have you experienced some level of compassion fatigue?

A. During grad school
B. Early in my career
C. Towards the end of my career
D. Life circumstances unrelated to work

Adverse Childhood Experiences (ACEs)

Multiple studies report that the more ACEs a therapist has, the more susceptible they may be to burnout and secondary trauma.

Compassion Fatigue in Addiction

Addiction Counselors and Secondary Traumatic Stress
- 59% met at least 1 criterion for PTSD
- 28% met 2 criteria for PTSD
- 19% met full criteria for PTSD
- Counselors who score higher on secondary trauma scale also report lower job satisfaction

Bride, Hatcher & Humble (2009)
Healing the Wounds
Post-Traumatic Growth

What is resilience?

- A resilient person has a “set of qualities that foster a successful process of adaptation and transformation, despite significant risk and adversity in their lives” (McElwee, 2007, p. 59)
- The ability to bounce back after adverse event
- Resilience is not static, so it needs to be maintained... (stay tuned for how!)

Social Justice and Self-Care

- Self-soothing
- Self-care
- Community care
- Structural care

Self-soothing Activities that provide distraction and comfort in difficult times

Presented by:
Sarah Buino, LCSW, CADC, CDWF
SAMHSA’S EIGHT AREAS OF WELLNESS

- Recovery is possible
- Underlying trauma or anxiety affects our mental and physical health
- Recovery involves balance
- Recovery requires community support
- Routine/regular habit supports recovery

WELLNESS Instead of ILLNESS

Before we dive into an examination of our self-care practices…

Have you ever set a self-care goal for yourself, then failed to reach or maintain that goal?
- Was your goal too big?
- Did your goal actually belong under community care or structural care?
- Are there barriers to your goal outside of your control?
- Was your goal actually YOUR goal, or was it based on someone else’s idea of what you should do?
### 8 Areas of Wellness

<table>
<thead>
<tr>
<th>Physical</th>
<th>Emotional</th>
<th>Cognitive</th>
</tr>
</thead>
<tbody>
<tr>
<td>The things I do to take care of my body in healthy ways. Examples include: sleep; nutrition; exercise; sexual activity; and, regular health care visits.</td>
<td>The things I do to take care of my feelings in healthy ways. Examples include: maintaining personal and professional support systems; counseling and/or therapy as needed; journaling; and, talking about feelings in healthy ways.</td>
<td>The things I do to take care of my mind and understand myself better. Examples include: reading for pleasure or work; writing; creating; taking a class; and, engaging in continued education for additional knowledge/skill.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Social</th>
<th>Financial</th>
<th>Spiritual</th>
</tr>
</thead>
<tbody>
<tr>
<td>The things I do in relation to others. Examples include: spending time with friends, family and colleagues you enjoy; having fun and playing; belonging to groups, communities and activities that encourage positive social connections.</td>
<td>The things I do to spend and save responsibly. Examples include: balancing a checking account; planning for the future; and spending money in thoughtful and productive ways.</td>
<td>The things I do to gain perspective on my life. Examples include: prayer; meditation; contact with nature; connection with a Higher Power or something bigger than myself; participating in a spiritual community.</td>
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<thead>
<tr>
<th>Environmental</th>
<th>Occupational</th>
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<tbody>
<tr>
<td>The things I do to create a livable space/environment. Examples include: creating a space to engage in activities free from distractions (noise pollution, clutter, to do lists, etc.); allowing myself to disconnect from screens; allowing myself down time and adequate space to cultivate play.</td>
<td>The things I do to make sure I’m aligned with my work/life purpose. Examples include: allowing myself to take breaks; noticing when I’m experiencing burn out and talking to my supervisor; asking for help with difficult tasks.</td>
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</tbody>
</table>
Polling Question #3
The areas of wellness I struggle most to balance is:

A. Physical / Cognitive  
B. Emotional / Spiritual  
C. Social / Environmental  
D. Financial / Occupational

Self-Compassion Supports Self-Care
- Compassion means “to suffer with”  
- Recognition that you’re experiencing suffering and being kind to yourself in that moment  
- Self-compassion is a practice of goodwill, not good feelings. We’re not trying to make bad feelings go away or pretend they aren’t there. Just holding loving space for ourselves when we do feel negative emotions.

What Self-Compassion is Not
- Self-pity  
- Self-indulgence  
- Self-esteem  
- Weakness
What is Self-Compassion?

1. Mindfulness versus over-identification
2. Self-kindness versus self-judgement
3. Common humanity versus isolation

Neff, 2019

In Conclusion

1. Wellness takes commitment to a practice.
2. We can help our clients more effectively when we help ourselves.
3. Wellness takes a combination of individual agency and collective support.

Resources/References

- At Risk Children and Youth: Resilience Explored, McElvee (2007)
- Creating a Healthier Life: A Step by Step Guide to Wellness
  WWW.SAMHSA.GOV/WELLNESS-INITIATIVE
- Professional Quality of Life Measure, Stamm/Center for Victims of Torture
  www.proquol.org
- Self-Compassion, Neff (2015)
- The Unspoken Complexity of “Self-Care”, Zandt (2019)
  https://blog.usejournal.com/the-unspoken-complexity-of-self-care-8c9f30233467
Thank You!
Let’s Connect

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UPCOMING WEBINARS

February 26th, 2020
Cultivating Greater Meaning and Purpose to Prevent Relapse
By: Garret Biss, CAPP, MRED

The Progress Note: Where Law & Ethics Meet Efficiency
By: Elizabeth “Beth” Iwas, MS, LMFT

Social Media and Ethical Dilemmas for
February 26th, 2020

“The Wide World of Sports…” Wagering
By: Dan Tricario, MS

March 11th, 2020
Peer Recovery Support Series, Section I: Building a Successful Culture in Your Organization
By: Kris Kelly, BS, Jenna Neasbitt, MS, LCDC, MAR, and Phaeander E. Moore, Sr., MA, LCDC

March 25th, 2020
Social Media and Ethical Dilemmas for

March 27th, 2020
Peer Recovery Support Series, Section II: "The Power of the Right Words"
By: Kris Kelly, BS, Jenna Neasbitt, MS, LCDC, MAR, and Phaeander E. Moore, Sr., MA, LCDC

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The Wounded Healer:
Helping the Helping Professional

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<tr>
<th>Date</th>
<th>Topic</th>
<th>Presenters</th>
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<tr>
<td>March 27th</td>
<td>Building a Successfully Culture in Your Organization</td>
<td>Kris Kelly, BS, Jenna Needstill, MS, LCDC, MAT-R, and Philander E. Moore, Sr., MA, LCDC</td>
</tr>
<tr>
<td>April 10th</td>
<td>The Participatory Process for Solutions to Addiction</td>
<td>John Shinholser and Honesty Liller, CPRS</td>
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<td>April 17th</td>
<td>Supervision and Management</td>
<td>Wes Van Epps, SAC-IT, PRC, Dana Demirovic, MHS, Misra Herrera, MA, MTBC</td>
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<tr>
<td>April 15th</td>
<td>Understanding the Pathway and the Process</td>
<td>Carlo DiClemente, PhD, ABPP</td>
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<tr>
<td>April 24th</td>
<td>A Deeper Dive into Coaching Recovery</td>
<td>Phil Valentine, RCP</td>
</tr>
<tr>
<td>May 15th</td>
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CONFERENCES

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Thank you for joining!

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