

SAP COUNTY COORDINATION UPDATE

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Prepared by: PA Network for Student Assistance Services (PNSAS)

www.pnsas.org

PENNSYLVANIA NETWORK FOR STUDENT ASSISTANCE SERVICES INTERAGENCY UPDATE

SAP BACK TO BASICS

Compassion Fatigue What is it and do I have it?

What is compassion fatigue?

Merriam Webster defines compassion fatigue as the physical and mental exhaustion and emotional withdrawal experienced by those that care for sick or traumatized people over an extended period of time. *Merriam-Webster.com*. Merriam-Webster, n.d. Web. 20 Dec. 2016

Some researchers consider compassion fatigue to be similar to [posttraumatic stress disorder](#) (PTSD), except that it applies to those emotionally affected by the trauma of another (e.g., client or family member) rather than by one's own trauma.— Michael K. Kearney et al., *The Journal of the American Medical Association*, 18 Mar. 2009

“Compassion fatigue is also called vicarious trauma or secondary trauma.” (Figley, 1995)

So compassion fatigue is similar to burn out?

No. Burn out is not trauma related, but is described as exhaustion created by an increased workload or overload. People who are experiencing burn out lose the ability to have empathy for others. Those with compassion fatigue still desire to help and empathize with the children and families they serve. However, they become overwhelmed by their own thoughts and feelings to do so.

What are the symptoms?

Symptoms are normal displays of stress resulting from the care giving work performed on a daily/regular basis and include but are not limited to the following:

Exhaustion and physical ailments:

- Constantly feeling tired, even after having time to rest
- Physical tension in the body when it is not needed, i.e., sitting at your desk or on your commute home
- Physical pain throughout the day such as headaches, back pain and wrist pain that you “push through”
- Difficulty falling asleep or excessive sleeping
- Falling sick the moment you are able to rest, such as on a vacation

Emotional shifts:

- Hypersensitivity to emotionally charged material
- Feeling disconnected from your emotions and / or your body

- Guilt for having more resources/opportunities than those you serve
- Feeling like no matter how much you give, it will never be enough
- Feeling helpless or hopeless toward the future
- Increased levels of anger, irritability, resentment or cynicism

Thought patterns:

- Difficulty in seeing multiple perspectives or new solutions
- Jumping to conclusions, rigid thinking, or difficulty being thoughtful and deliberate
- Questioning, *“Is any of this effective? Am I making any difference?”*
- Minimizing the suffering of others in comparison to the most severe incidents or situations
- Intrusive thoughts and imagery related to the traumatic material you have heard / seen

Behavioral shifts:

- Absenteeism and attrition
- Avoidance of work, relationships, responsibilities
- Dread of activities that used to be positive or neutral
- Using behaviors to escape (eating, alcohol/drugs, caffeine, TV, shopping, work)

Relationship changes:

- No separation of personal and professional time, being the helper in every relationship
- Viewing other people as less important who are not involved in your same field
- Difficulty relating to other people’s day to day experiences without comparing them to those your serve or yourself
- Absence of a personal life that is not connected to your work
- Seeing danger everywhere and hypervigilance to the safety of those you care about
- Sense of persecution or martyrdom, holding external forces responsible for personal feelings and struggles
- Isolated self completely from others or only interacting with people who are in your same field or can relate to your experiences

(Note: The list of compassion fatigue symptoms was taken from the Joyful Heart website -

<http://www.joyfulheartfoundation.org/>)

SAP team members, like all caregivers ARE at risk for compassion fatigue. You are NOT exempt!

So what can you do to protect yourself?

“Mother Teresa understood compassion fatigue. She wrote in her plan to her superiors that it was MANDATORY for her nuns to take an entire year off from their duties every 4-5 years to allow them to heal from the effects of their care-giving work.” *(American Institute of Stress website www.stress.org)*

Taking a year off from your duties is probably not an option but practicing good self- care is one that you can easily obtain.

Self-care is critical to combating compassion fatigue and includes:

1. A healthy and well balanced diet
2. Exercise - Regularly
3. Sleep - Make it routine and restful
4. A balance between work, home and leisure activities
5. Be aware of and clarify your personal boundaries
6. Honor your emotional needs

Note: A great 2017 New Year’s resolution for all is to practice GOOD self-care!

The Network Pennsylvania for Student Assistance Services wishes all SAP team members, liaisons and SAP professionals a very happy and healthy New Year!

RESOURCES

National Drug & Alcohol Facts Week- Monday, January 23rd through Sunday, January 29th

National Drug & Alcohol Facts WeekSM (NDAFW) is a national health observance for teens to promote local events that use NIDA science to SHATTER THE MYTHS^{TM,SM} about drugs. The event links students with scientists and other experts to counteract the myths about drugs and alcohol that teens get from the internet, social media, TV, movies, music, or from friends. It was launched in 2010 by scientists at the National Institute on Drug Abuse (NIDA) to stimulate educational events in communities so teens can learn what science has taught us about drug use and addiction. The National Institute on Alcohol Abuse and Alcoholism became a partner starting in 2016, and alcohol has been added as a topic area for the week. NIDA and NIAAA are part of the National Institutes of Health. Go [here](#) to view resources, videos and activity ideas.

Caring for Kids: What Parents Need to Know

Caring for Kids: What Parents Need to Know, a product developed by the NCTSN Child Abuse Committee, tells parents and caregivers how to protect their children from—and how to help children who have experienced—sexual abuse. *Caring for Kids* defines sexual abuse, describes steps to take if their child discloses sexual abuse, dispels the myths of sexual abuse, and details both impact of sexual abuse on children and the signs of posttraumatic stress.

This compilation of handouts, fact sheets, and Q & A's addresses these topics:

- Child Sexual Abuse Fact Sheet: For Parents, Teachers, and Other Caregivers
- Question & Answers about Child Sexual Abuse: An Interview with Esther Deblinger, PhD
- What to Do If Your Child Discloses Sexual Abuse: Information for Parents and Caregivers
- Coping with the Shock of Intrafamilial Abuse
- Acquaintance Rape: Information for Parents
- Preventing Acquaintance Rape: A Safety Guide for Teens
- What Do I Do Now? A Survival Guide for Victims of Acquaintance Rape
- Sexual Development and Behavior in Children: Information for Parents and Caregivers
- Understanding and Coping with Sexual Behavior Problems in Children: Information for Parents and Caregivers
- Child Sexual Abuse: Coping with the Emotional Stress of the Legal System

Caring for Kids includes information on understanding sexual development in children, on talking to children about sexual issues and body safety, on acquaintance rape, and on reducing risk of victimization. Download *Caring for Kids* [here](#).

SAMHSA PSAs Support Mental Health in Our Communities

One in five people in the United States has a mental health condition, so it's important that we learn [the five signs](#) of emotional suffering and how to help individuals in need. SAMHSA, along with its partner Give an Hour, is proud to release a new collection of [public service announcements \(PSAs\) for the Campaign to Change Direction](#). These PSAs aim to change the culture of mental health in America by raising awareness about the signs of emotional distress and addressing common barriers to understanding these conditions. Watch the PSAs, including ones for adolescents, [here](#).

Creating Digitally Responsible Citizens

A group of Texas A&M researchers have created a social network for students to learn how to appropriately engage in online activity. Inspired by one of the researcher's personal experience with cyber bullying, the group is hoping to teach 7-12 year olds how to recognize cyberbullying and what to do to stop it. Through games, quizzes and interactive programming, children between 7 and 12 learn how to recognize cyberbullying and how to help stop it. Similar to the "like" button we see on Facebook, one of the main features of KidGab is the "Not OK" button, allowing them to react and learn from what they see. Dr. Stephanie Valentine, one of the creators of Kid Gab, says, "The Not OK button provides kids the opportunity for themselves to decide what's appropriate and not appropriate. It teaches them to question is this okay? Is this something I want on the community I'm a part of?" Dr. Tracy Hammond, the co-creator of the creation of the network, and Dr. Valentine also designed algorithms that monitor what's happening on the site, so they can better understand how the kids interact and why. Read more about KidGab [here](#).

Helping Justice-Involved Youth Transition Back to School

The Department last week released [new guides and resources](#) to help incarcerated youth transition back to traditional school settings. “It is in the interest of every community to help incarcerated youth who are exiting the juvenile justice system build the skills they need to succeed in college and careers and to become productive citizens,” said Secretary King. The resources include a “[You Got This: Educational Pathways for Youth Transitioning from Juvenile Justice Facilities](#)” guide written for incarcerated youth; a newly updated [transition toolkit and resource guide](#) for practitioners in juvenile justice facilities; a [document detailing education programs in juvenile justice facilities](#) from the most recent Civil Rights Data Collection; and a website that provides [technical assistance to support youth with disabilities](#) with transitioning out of juvenile justice facilities.

TRAINING OPPORTUNITIES

Center for Safe Schools - 2016-17 Third Thursday Online Learning Series

Teach Me to Think: Fostering Children's Social Emotional Learning
Thursday, January 19, 2017
3:00 PM – 4:15 PM

Mean on Purpose? Bullying Prevention in Early Childhood
Thursday, February 16, 2017
3:00 PM – 4:15 PM

Implications of the Recently Released National Academies Report Preventing Bullying through Science, Policy and Practice: How to Use the Report to Further Your Bullying Prevention Efforts
Thursday, May 18, 2017
3:00 PM – 4:15 PM

Go to <http://www.safeschools.info/bullying-prevention/professional-development> for more information and to register for each program.

PASAP-PAMLE Conference

February 26-28, 2017
Penn Stater Conference Center Hotel
State College, PA
Register at www.pasap.org

2017 Social and Emotional Learning Conference

Building Skills for Lifelong Success
March 13, 2017
Harrisburg, Pa.
Register at <https://selconference.center-school.org/>

SAVE THE DATE

2017 Pennsylvania Positive Behavior Support (PAPBS)

Implementer’s Forum
May 16-17, 2017
Information will be available at www.papbs.org and www.pattan.net.

NEWS

Teens Called on Tackle Opioid Crisis through a Nationwide Peer-to- Peer Video Competition

Prescription opioid misuse has reached epidemic levels — with hospitalizations spiking among children and teens for opioid painkiller overdoses in recent years. That’s why the United States [Drug Enforcement Administration](#) (DEA), [DEA Educational Foundation](#) and [Discovery Education](#), are launching the [Operation Prevention Video Challenge](#) that gives students the power to send a message to their peers about the dangers of opioid misuse.

For the first time, the Operation Prevention Video Challenge invites teens across the country to create a unique 30-60 second public service announcement, aimed to reach other teens about this widespread issue. The question: “If your friends were going to watch ONE video that made them think twice about misusing prescription opioids, what would that video be?”

The challenge is part of a joint nationwide education initiative called Operation Prevention that educates students about the science behind addiction and its impact on the brain and body. Available at no cost, the program’s resources help initiate lifesaving conversations in the home and classroom.

A panel of judges from Discovery Education and the DEA, as well as community leaders, educators, and communications experts, will select the winners for three DEA Educational Foundation scholarships. The grand prize winner will receive \$10,000, the second place winner will receive \$5,000, and the third place winner will receive \$1,000.

One People’s Choice winner will also be selected through public vote in April 2017 and will win a trip provided by the DEA for an exclusive behind-the-scenes tour of DEA agent training at the DEA’s Training Academy in Quantico, Virginia. Winning PSAs will also be featured on-air and across DEA’s digital and social media platforms.

Students must be at least 13-years-old and enrolled in 9th through 12th grade. Video entries will be evaluated based on their creativity, content, persuasiveness and overall effective communication. No violent, dangerous, or illegal behavior in creating the Entry Video is allowed. Teens can register and submit their entries today through March 28, 2017 at <https://www.operationprevention.com/video-challenge>.

Depression in Young People Affects the Stomach, Anxiety the Skin

Mental disorders and physical diseases frequently go hand in hand. For the first time, psychologists at the University of Basel and Ruhr University Bochum have identified temporal patterns in young people: arthritis and diseases of the digestive system are more common after depression, while anxiety disorders tend to be followed by skin diseases. In a project financed by the Swiss National Science Foundation, a research group led by PD Dr. Marion Tegethoff in collaboration with Professor Gunther Meinschmidt from the University of Basel's Faculty of Psychology has now examined the temporal pattern and relationship between physical diseases and mental disorders in children and young people. In the journal *PLOS ONE*, they analyzed data from a representative sample of 6,483 teenagers from the US aged between 13 and 18.

The researchers noted that some physical diseases tend to occur more frequently in children and adolescents if they have previously suffered from certain mental disorders. Likewise, certain mental disorders tend to occur more frequently after the onset of particular physical diseases. Affective disorders such as depression were frequently followed by arthritis and diseases of the digestive system, while the same relationship existed between anxiety disorders and skin diseases. Anxiety disorders were more common if the person had already suffered from heart disease. A close association was also established for the first time between epileptic disorders and subsequent eating disorders.

From a health policy perspective, the findings underscore that the treatment of mental disorders and physical diseases should be closely interlinked from an early age on. Read more [here](#).

How to Avoid Feeling Depressed on Facebook

Comparing yourself with others on Facebook is more likely to lead to feelings of depression than making social comparisons offline. That’s one of the findings from a review of all the research on the links between social networking

and depression by David Baker and Dr. Guillermo Perez Algorta from Lancaster University. They examined studies from 14 countries with 35,000 participants aged between 15 and 88.

There are among 1.8 billion people on online social networking sites worldwide, with Facebook alone having more than 1 billion active users. Concerns over the effect on mental health led the American Academy of Pediatrics in 2011 to define "Facebook depression" as a "depression that develops when preteens and teens spend a great deal of time on social media sites, such as Facebook, and then begin to exhibit classic symptoms of depression." In cases where there is a significant association with depression, this is because comparing yourself with others can lead to "rumination" or overthinking.

The Lancaster University review of existing research found that the relationship between online social networking and depression may be very complex and associated with factors like age and gender. The review showed that women and people with neurotic personalities are more likely to become depressed. But the researchers stressed that online activity could also help people with depression who use it as a mental health resource and to enhance social support. Learn more [here](#).

Teen Violence Can Be Contagious, Study Contends

Violence could be contagious among teens, according to Ohio State University researchers.

The researchers studied data collected in the mid-1990s from more than 5,900 seventh- through 12th-graders at 142 U.S. schools. Their key finding: Students were far more likely to engage in a violent act if a friend had also done so. The researchers also found that the spread of violence isn't limited to close friends. It can spread from one person to a friend, to the friend's friend and two more friends beyond, according to the study published online December 20 in the *American Journal of Public Health*.

Previous research has shown that a number of characteristics and behaviors such as happiness, obesity and smoking spread within social networks.

"We now have evidence that shows how important social relationships are to spreading violent behavior, just like they are for spreading many other kinds of attitudes and behaviors," said study co-author Brad Bushman, a professor of communication and psychology.

The researchers said the study results highlight the importance of anti-violence programs. "If we can stop violence in one person that spreads to their social network. We're actually preventing violence not only in that person, but potentially for all the people they come in contact with," Bond said. Read more [here](#).

Life after Juvenile Detention Isn't Easy, Especially for Minorities

Many people have difficulty getting their lives back on track after being released from juvenile detention, especially those from racial and ethnic minorities, a new study shows.

Delinquent youth are at high risk for problems in adulthood. Some of the reasons why include a background of significant trauma and loss, limited social support or adult guidance, and limited academic success, according to study author Karen Abram. She is an associate professor of psychiatry and behavioral sciences at Northwestern University in Chicago.

The study included more than 1,800 people who had been in juvenile detention. The researchers checked in on them five and 12 years later. The investigators looked for educational achievement, independent living, no criminal activity, no substance abuse, parenting responsibility, relationships and gainful activity.

Twelve years after detention, only half of the participants had a high school degree or equivalent. Just one-fifth of males and one-third of females were working full time or in school, the study found. Black and Hispanic males had worse outcomes than white males. Males had worse outcomes than females, the study revealed.

"Our findings highlight the need to address racial and ethnic disparities, because who gets arrested and detained? It's poor kids," Teplin said. "And disproportionately, racial and ethnic minorities."

The study was published online December 19th in the journal *JAMA Pediatrics*. Read more [here](#).