

Preventing & Responding to Workplace Violence



2014 NATIONAL HEALTH CARE FOR THE
HOMELESS CONFERENCE & POLICY SYMPOSIUM

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- Have Fun!!

- Informal

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for Social and Health Innovation

Escalation



THE FUN OF DIRECT CARE!

Robustness: Levels & States

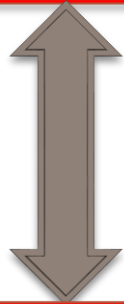


Window of Tolerance

Hyperarousal Zone (Flight/Fight): Increased sensation; emotional reactivity; hypervigilance; disorganized cognitive processing

Rigidity

Chaos



Window of Tolerance: Flexible; adaptive; coherent; energized; stable

Rigidity

Chaos

Hypoarousal Zone (Freeze): Relative absence of sensation; numbing of emotions; disabled cognitive processing; reduction of physical energy

What we know about our Clients



Trauma – Lowered States

- Unresolved trauma
- Unhealthy lifestyles
- Poverty
- Addiction
- Domestic abuse
- Chronic disease
- Death of loved ones
- Stigma
- Etc.....

Stress – Higher Levels

- Illness
- Homelessness
- Medication side effects
- Diet
- Unstable housing
- Drugs abuse
- Relationships
- Public transportation
- Etc.....

Impacts of Living Outside the Window



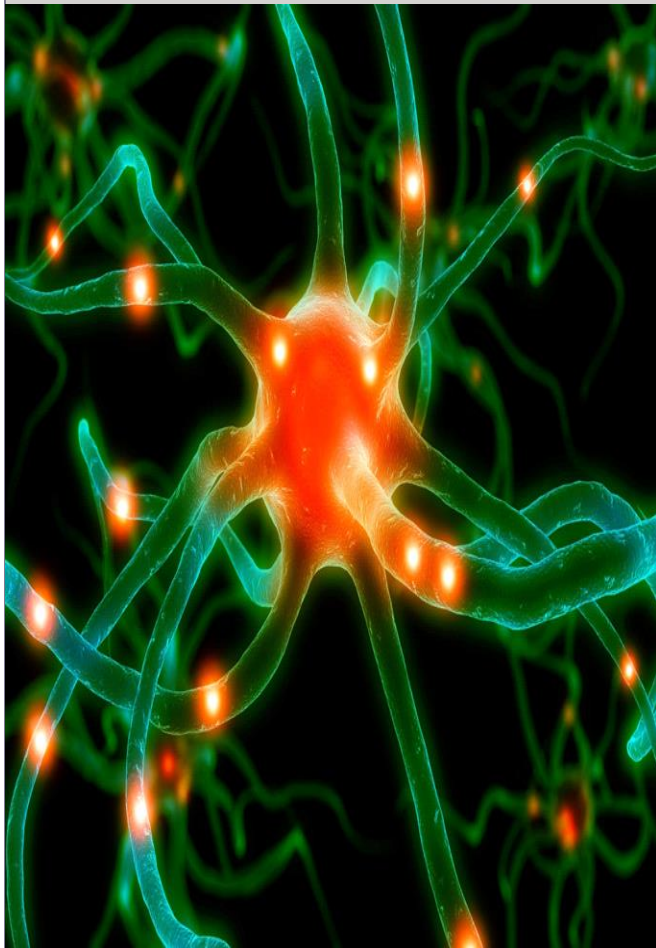
- Numbing of normal emotions
- Explosive emotions
- Disconnection from body sensations
- Feelings of being ‘unreal’
- Increase in traumatic memories

Triggers – When Robustness is depleted



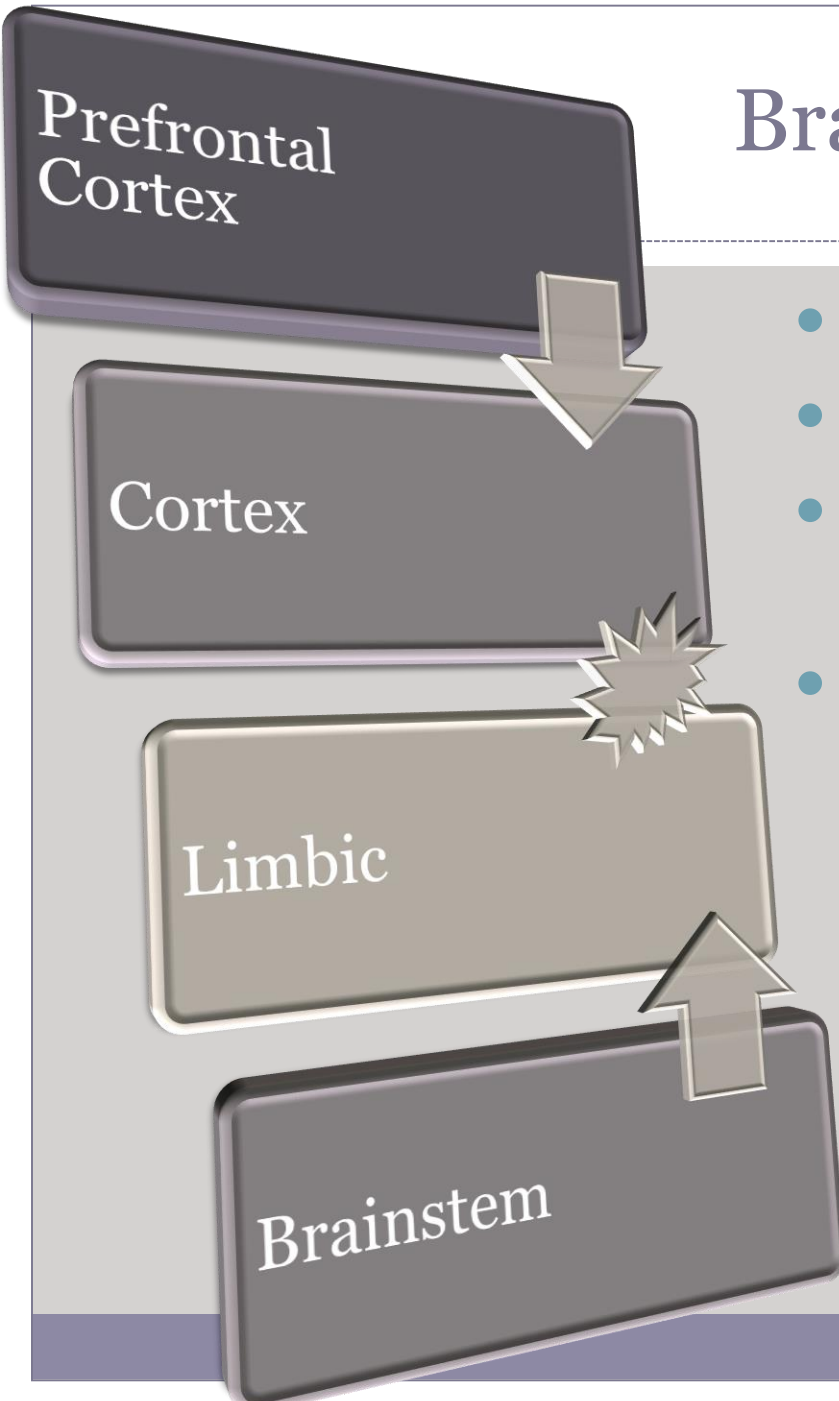
- Trigger – Environmental stimulus (stressor) which decreases access to cognitive capacity and elicits a limbic based survival response
- If stress levels are already high, reactions will appear to be extreme and illogical
- Reactions to triggers are survival techniques designed to keep us safe from further harm

Triggers, Trauma and the Brain



- New nerve cells created during and after a stressful event survive longer than cells created normally
- Less resilient created many more new connections in the hippocampus than in more robust mice
- The traumatized brain will interpret a wider range of situations as threatening

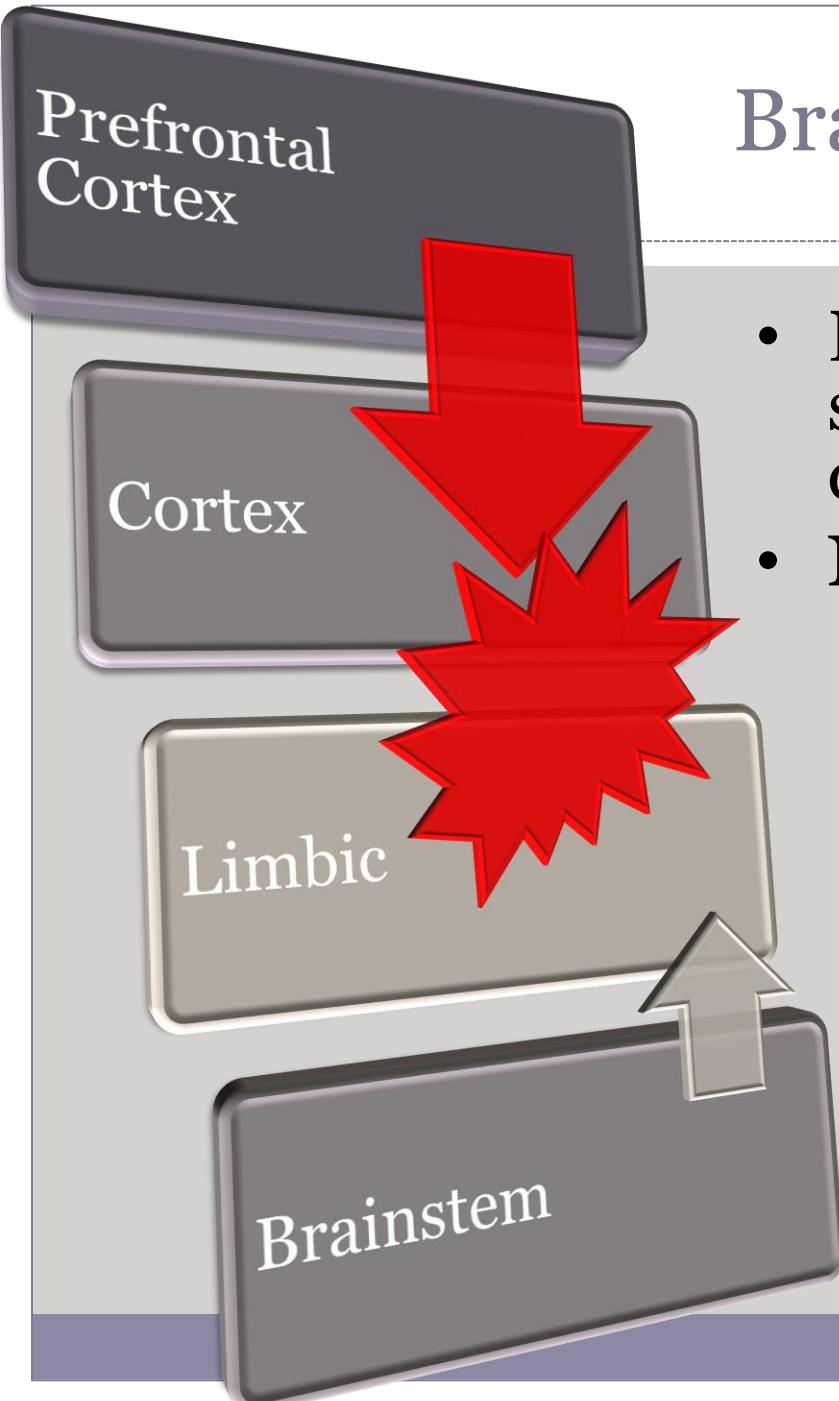
Brain Structure & Processing



- Brainstem – Basic processes
- Limbic – Emotions & Survival
- Cortex – Guides us in the physical world
- Prefrontal Cortex – Thinking & Conceptualization

Bottom-up processing (sensations) meet top-down processing (memories) to create our experience of the world

Brain Structure & Processing



- Limited ability to regulate survival reaction through top down processing
- Neuropathway development
 - Experience lays down traces that permanently alter brain structure
 - Intensity or repetition consolidates and strengthens structure
 - Difficult for new structures to develop and ‘degrees of freedom’ limits potential of a consistent integrated self

Reexperiencing Trauma



- Re-traumatization is the reexperiencing of the traumatic event(s) triggered by something in the environment
- Mind's attempt at integrating the experience into the personality
- As long as the trauma can not be put into words it will be relived through emotions and behaviors
- The emotions that are experienced are the emotions that need to be overcome in order to gain mastery over the trauma that they could not stop

Phases of Escalation



- **Regulating State – Fully engaged in the environment**
- **Reading State – Encounters trigger stimulus**
 - Coping skills are utilized to calm and sooth
 - Seek help and regulation from others
 - Increased anxiety, disorientation and confusion
- **Reexperiencing State – Flood of traumatic memories**
 - Everything becomes about survival in the moment
 - Becomes disoriented to time and place
 - Consciousness is being taken over by emotion
- **Reconstituting State – Transitioning back to emotion regulation**
 - Time is needed to re-orientates to surrounding
 - Again can attempt to utilize coping skills

Approaches



WHAT CAN I DO?

Important Program Strategies: Before



- Create a welcoming environment – see through client’s eyes
- Decrease stress for client when possible
- Consider safe space set up
- Have strategies for predictable heightened emotional situations
- Have a system to alert colleagues

Important Client Strategies: Before



- Develop rapport and trust – the stronger the relationship the less likely violence will occur
- Set expectations for interactions and program rules
- Practice empathy when delivering difficult news
- Understand history and possible triggers
- Refer & support – Mental Health & Substance Abuse

Important Strategies: During



- Slow Down or Stop!
- Isolate the conversation (don't get cornered & avoid crowds)
- Use empathy & agree as often as possible
- Support more than confront
- Remain calm & predictable
- Speak slowly, quietly, assertively & respectfully
- If the client stands or raises voice; you stand & open door

Important Strategies: After



- **Debrief with co-workers – regulating yourself and team**
 - What caused the event
 - What worked
 - What didn't work
 - Have a plan for next time
 - Support each other
- **Come back together with client if possible**
 - Work from a place of empathy and support more than confrontation
 - Reset expectations – program rules and service delivery
 - Re-traumatization or reliving trauma can be THE opportunity to get the client the care they need
- **Refer & support – Mental Health & Substance Abuse**

Question & Comments



PLEASE COMPLETE AN EVALUATION!

References & Resources 1



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