

Building Personal Resilience & Stress Inoculation

NYS OVS – November 15, 2022

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Topics

- Understanding stress reactions
- Pandemic-specific stressors
- Pathways to resilience
- Stress Inoculation



Understanding Stress Reactions

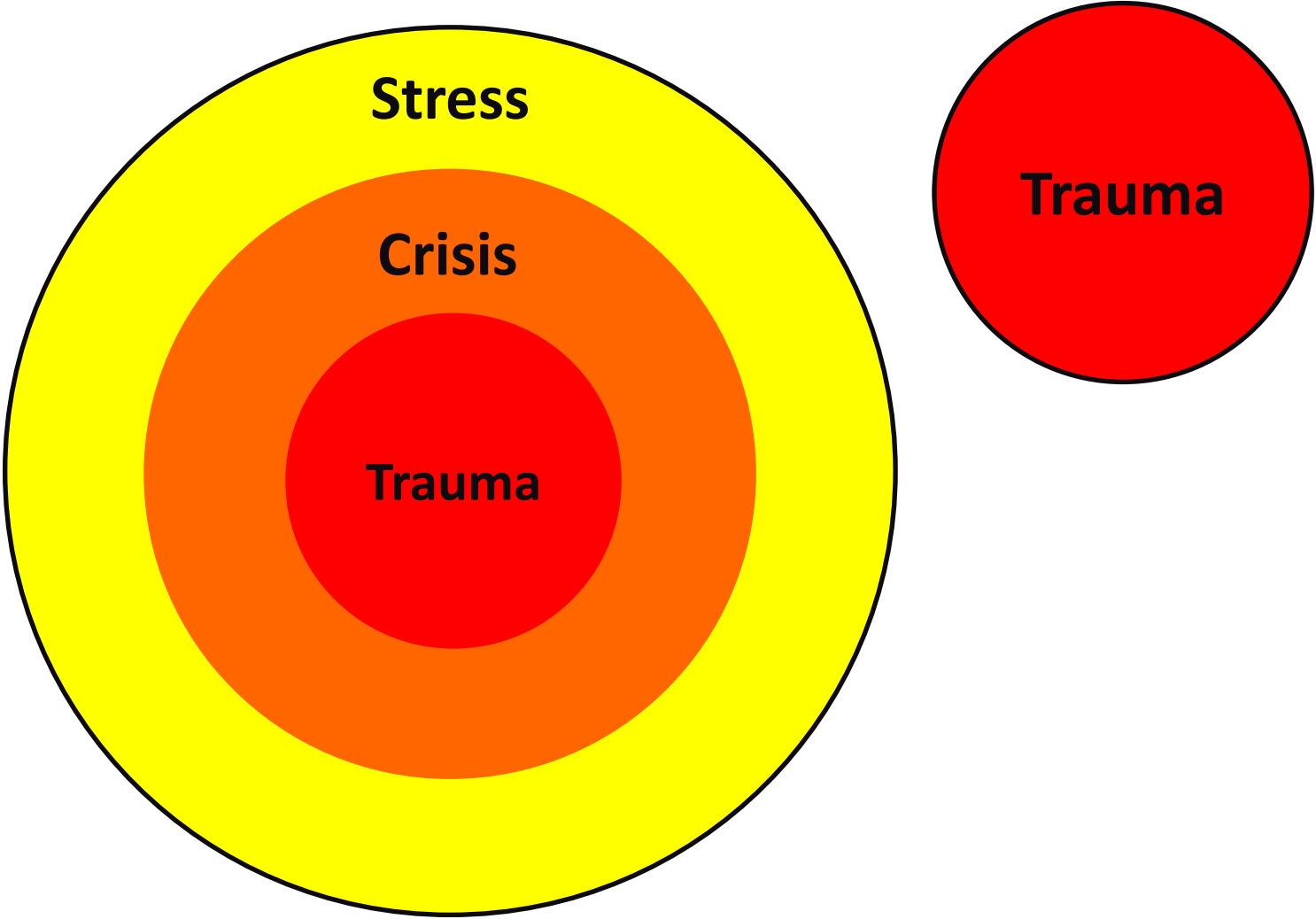
Types of Stress:

- Acute
- Cumulative
- Traumatic

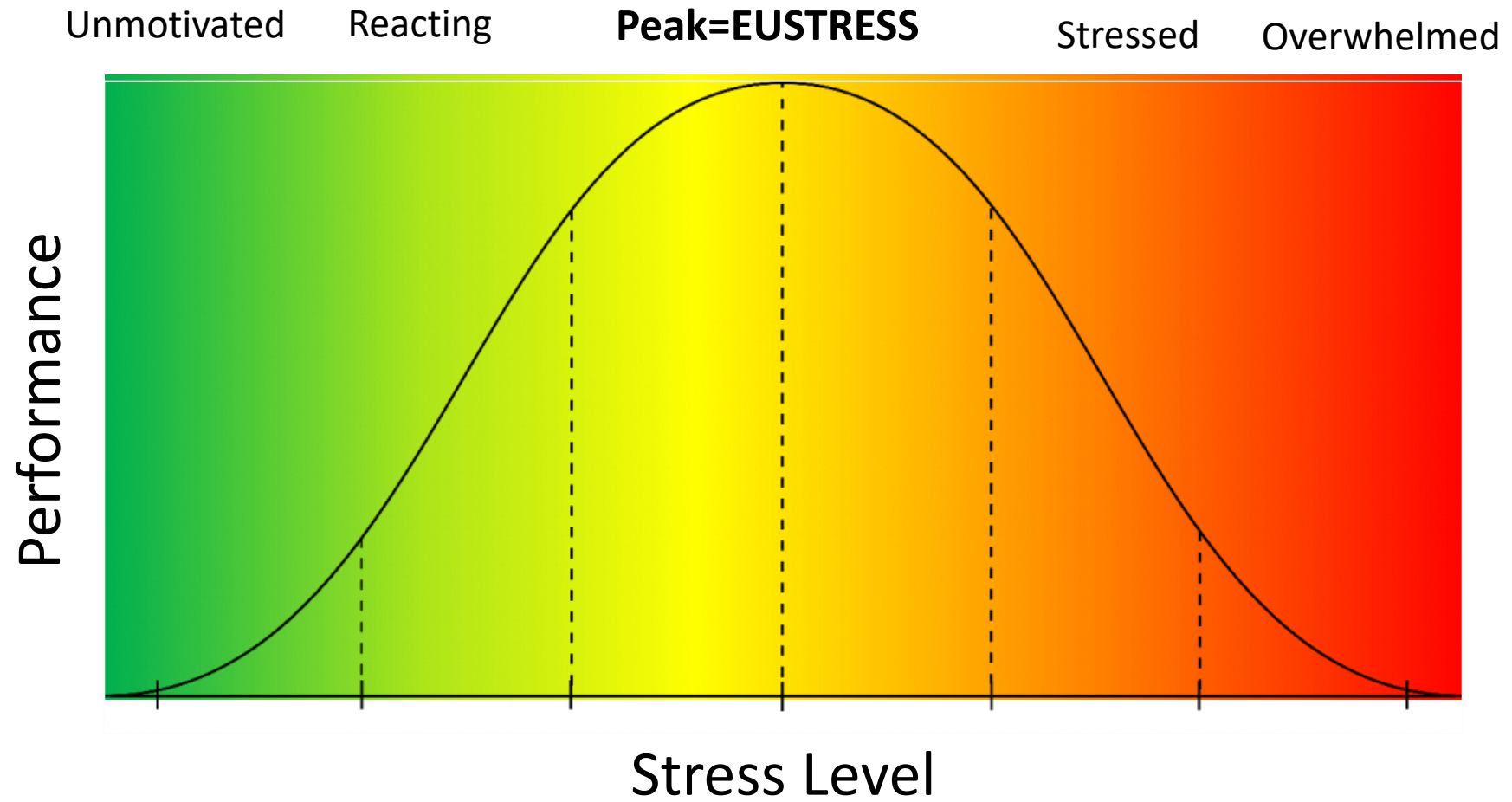




Stress, Crisis, & Trauma



The Stress Response Curve



Stress & Trauma Reactions...

... are *understandable* reactions to abnormal circumstances.

... are not necessarily a sign of pathology.

... can be immediate or delayed; the connection to the traumatic event may or may not be obvious.

... change over time. For most people, distress will lessen and their usual ways of coping will return.

... can include symptoms in multiple realms.

Typical Reactions to Stress Exposure

- **Emotional:** Anxiety, depression, vulnerability, irritability, anger, tearfulness
- **Physical:** Jumpiness, breathlessness, digestive problems, fatigue, sleep disruption, headaches
- **Behavioral:** Social withdrawal, avoidance, neediness, self-medicating with alcohol or drugs
- **Cognitive:** Rumination, preoccupation, forgetfulness, difficulty concentrating
- **Spiritual:** Hopelessness, loss of faith, questioning benevolence

Pandemic-Specific Stressors

Outbreak-Specific Stressors: General Uncertainty & Unfamiliarity

- Threat is invisible, with unclear timing of effects (both personal and societal)
- Unprecedented use of social distancing created both practical and emotional stress
- Rapidly changing and sometimes conflicting information from authorities added confusion and frustration, increases divisiveness
- Impact remains unpredictable (obviously critical, but not clear if it might still get worse / when it will be “over”)

Outbreak-Specific Stressors: Medical Fears

- Will I get sick?
 - If so, how bad will it be?
 - What if I'm infected but asymptomatic and inadvertently infect other people?
 - How bad will the next variant be?
- Will my loved ones get sick?
 - If so, how bad will it be?
 - Are they in high-risk groups?



Outbreak-Specific Stressors: Caregiving Concerns

- If I get sick:
 - How will I continue to care for my dependents?
 - Who will take care of me?
- If my loved ones get sick:
 - How can I care for them while trying to work and meet other obligations?
 - Will they have access to needed medical care if they get seriously ill?

Outbreak-Specific Stressors: Work-Life Balance Concerns

- How can essential/frontline workers balance professional duties with personal safety?
- How can I manage to work effectively from home for an indefinite time while keeping my kids educated / busy / sane?
- How can I set boundaries between work and personal life when there's no physical divide between realms?
- For supervisors: How can I foster a cohesive work environment, effectively manage my team remotely, and support their well-being while maintaining productivity?

Outbreak-Specific Stressors: Social Concerns

- How will this impact my broader community?
- Will this bring us all together or sow further partisan divisiveness?
- How can we navigate disagreements about getting vaccinated?
- Will people around me comply with safety guidelines like mask wearing – and what do I do if they don't?
- How will we make up for missed experiences, like kids' birthday parties or graduating seniors' commencement ceremonies? – or funerals and other death rituals?

Outbreak-Specific Stressors: General Uncertainty & Unfamiliarity

Result: Constant need to adapt, with ratcheting up of our baseline stress levels caused by activation of each new level of response measures!

Building Personal Resilience: Self-Care Beyond Lip Service

The “Self-Care Imperative”

Remember: People who don’t take care of themselves will not be able to take care of others or meet their professional demands.

Therefore, taking steps to manage your own stress and maintain your resilience is not a luxury or a sign of weakness – it’s an **ethical responsibility!**

The Compassion Stress Continuum

Compassion
Satisfaction



Compassion
Fatigue

Compassion Satisfaction

- Positive aspects of helping
- Described as “the pleasure you derive from doing your work” (www.proqol.org)
- Includes:
 - Sense of accomplishment
 - Sense of purpose
 - Sense of competence in being able to help others

Compassion Fatigue

- Caused by overextending one's capacity for selflessness
- Refers to the deep emotional and physical “wearing” down that takes place when helping professionals are unable to refuel and renew
- Experienced as a gradual erosion of all the things that keep us connected to others in our caregiver role: empathy, hope, and compassion – not only for others but also for ourselves

Resilience:

Being able to stay in, or quickly return to, a place of physiological, emotional, and mental balance after being disrupted.



It's maintaining the ability to
respond vs. react
to difficult situations.



Responding vs. Reacting

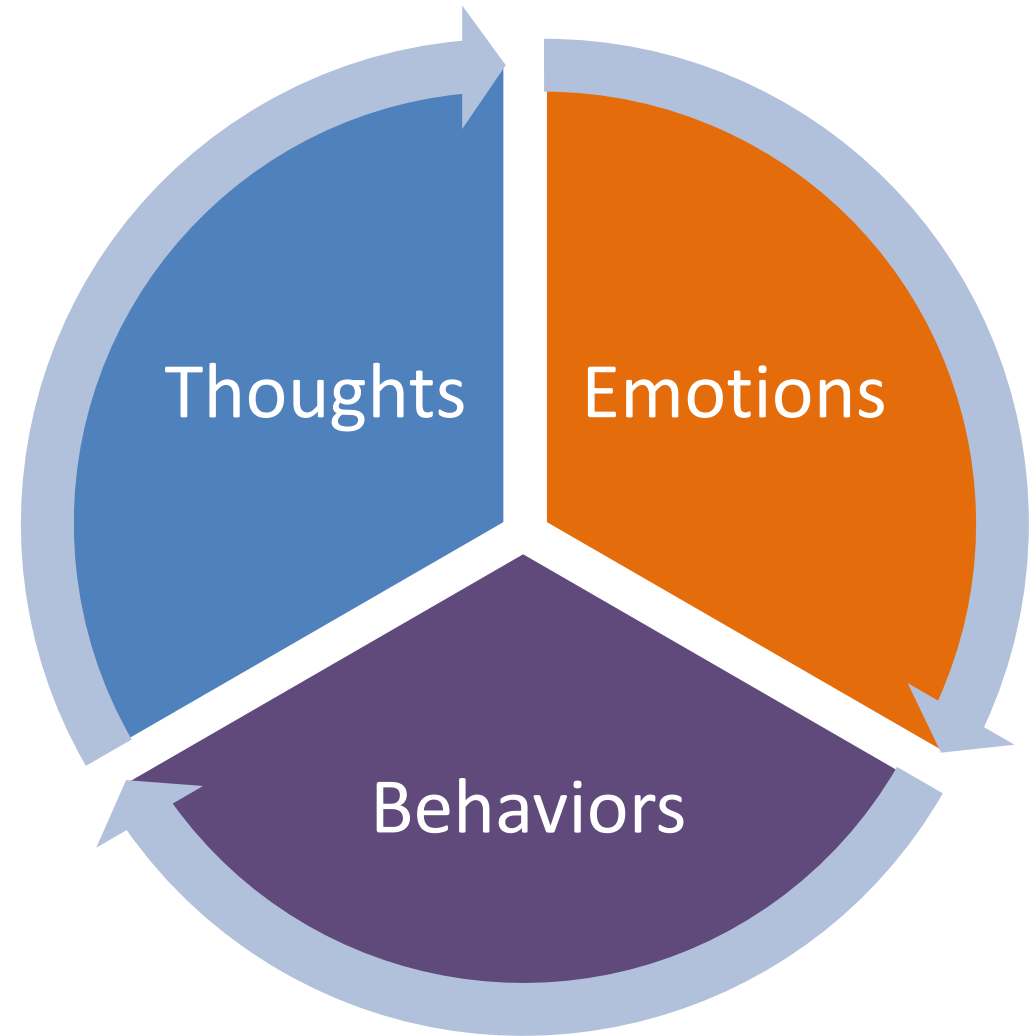
Responding = Green Zone

- Emotional and rational brain are in balance
- Body is in its resting state
- Restoring & refueling
- Acting from a sense of perceived safety and stability

Reacting = Red Zone

- Brain is in “fight or flight” mode
- Body’s immune, cardiovascular, hormonal, and digestive systems are disturbed
- Acting from a sense of perceived deficit and disturbance

Three Pathways to Resilience



Behavior-Based Resilience Strategies

Goals:

- Completing the stress response cycle
- Communicate to the brain that the threat is over

Strategies:

- Physical activity
 - Exercise
 - Breathing
 - Laughter (or a good cry)
 - Positive social interaction
 - Creative expression
- Progressive Muscle Relaxation

Emotion-Based Resilience Strategies

Goals:

- Strengthen brain's ability to stay in balance
 - Mental Muscle
 - Habit Formation
- Regulate attention to allow us to hold our focus
- Noticing (and accepting) your reactions gives you more control over them

Strategies:

- Mindfulness
- Meditation
- Relaxation/Breathing
- Yoga

Cognition-Based Resilience Strategies

Goals:

- Use active practices to reduce or prevent unnecessary activation of the “fight or flight” response
- Combat the brain’s negativity bias

Strategies:

- ‘Self-Talk’
 - What is the chatter in your head?
 - Is it full of self-criticism, resentments, etc.?
 - Can you replace these negative cognitions with more neutral/realistic/helpful thoughts?

- Stress Inoculation

Stress Inoculation



Stress Inoculation

- Goal is to **manage stress** – not to get rid of it!
- Preparing in advance for the realities of an experience will help you:
 - Acknowledge that the stress exists and will impact you
 - Manage your expectations of the event and of yourself
 - Predict the intensity of emotions and interpersonal interactions you're likely to experience
 - Practice or mentally prepare for what you might encounter

Stress Inoculation

Components:

1. Identify potential stressors
2. Appraise stressors
3. Identify personal coping strategies
 - Problem-focused
 - Emotion-focused

Stress Inoculation:

1. Identify Potential Stressors

- Trying to identify personal potential stressors allows for preparation and realistic expectations for your response – a kind of mental rehearsal, giving you a chance to predict what may happen and how you could most effectively respond
- Think as specifically as possible about what you might find most stressful:
 - Sights, sounds, smells
 - Exposure to other people's distress
 - Feeling unconfident / unequipped to deal with a new experience
 - Uncertainty about the future

Stress Inoculation:

2. Appraise Potential Stressors

- People experiencing stress make a subjective evaluation balancing the stressful situation with their perceived ability to meet the demands.
- Behavior depends on which appraisal is made:
 - that the situation is a **threat**
 - that the situation is a **challenge**

Stress Inoculation:

2. Appraise Potential Stressors

If situation is appraised as a **threat**:

- Available coping mechanisms can become overwhelmed, and anxiety and stress can continue to build
- You may limit your coping skills to one or two that may be minimally effective in dealing with the stress
- You may become paralyzed in terms of thinking and be unable to organize, prioritize, or develop a plan of action
- If you're confronting a perceived challenge you're likely to think things like "This is awful!" or "I can't do this"
- This appraisal is likely to lead to an inability to cope or problem-solve

Stress Inoculation:

2. Appraise Potential Stressors

If situation is appraised as a **challenge**:

- You're more likely to mobilize the psychological resources at your disposal
 - Coping skills used are likely to be varied and potentially new
 - You'll be more able to break the situation into manageable pieces
 - You can create or follow a plan for helping others
- When you confront a perceived challenge you're more likely to think things like "I can handle this" or "Where do I start?"

Stress Inoculation:

2. Appraise Potential Stressors

- Assess whether perceived stressors are:
 - Under one's control
 - Not under one's control

In other words, can you actually change the source of the stress?

- If so, how will you do that?
- If not, how will you still cope with what can't be changed or avoided?

Stress Inoculation:

3. Identify Personal Coping Strategies

Threat IS Under Your Control:

If aspects can be changed or resolved, **a problem-focused coping strategy** can involve:

- Breaking problems into manageable parts
- Problem-solving
- Brainstorming
- Skill development

Stress Inoculation:

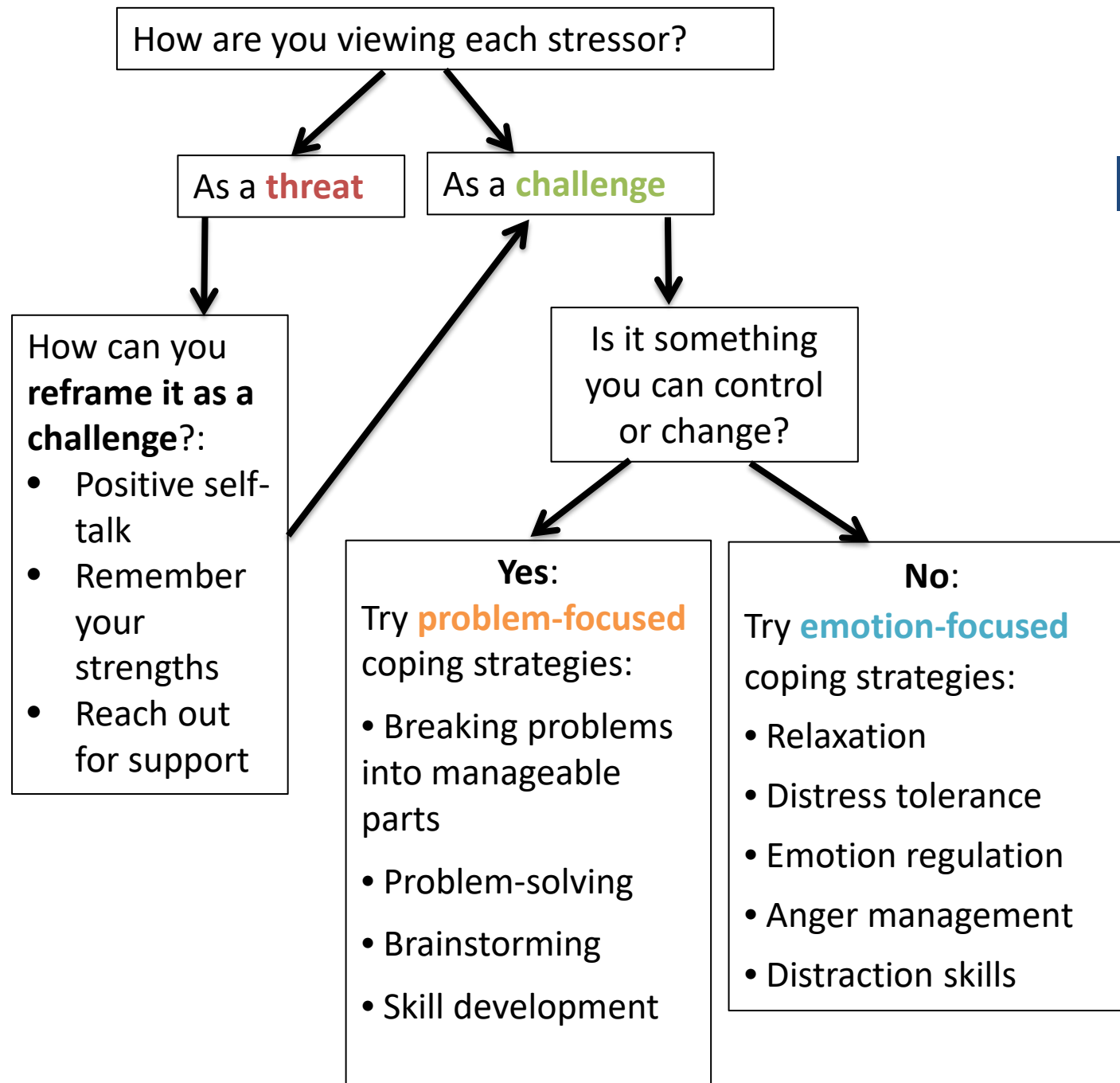
3. Identify Personal Coping Strategies

Threat is NOT Under Your Control:

If little or nothing can be changed about the event or the response, then **emotion-focused strategies** will be most helpful:

- Distress tolerance
- Relaxation
- Emotion regulation
- Anger management
- Distraction skills

Stress Inoculation Flowchart



Questions? Comments?

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