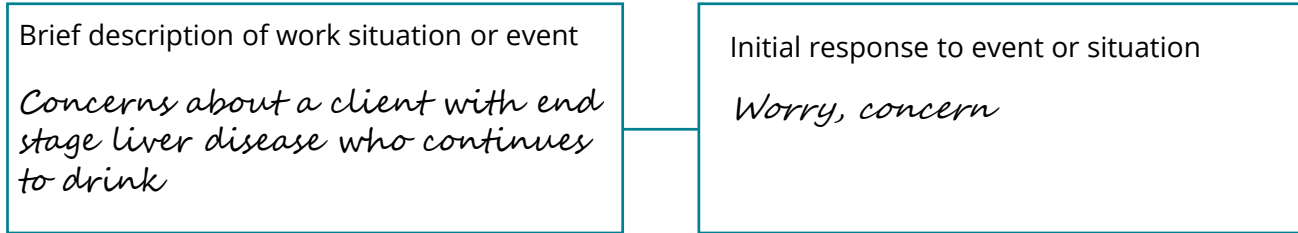


Stress reactivity tool – work example one

PRIMARY STRESSOR



SECONDARY STRESSORS

Thoughts and beliefs	Physical / emotional reactions
<i>Why can't they take my advice, they know the score?</i>	<i>frustration, worry</i>
<i>I'm worried they are going to die and I will have failed them</i>	<i>anxiety, poor sleep</i>
<i>Why aren't the services seeing what we see?"</i>	<i>anger, over tiredness, avoidance</i>

Possible emotionally charged reactions

Feeling overwhelmed, overtired, withdrawn

Potential consequences of secondary stress overtime

Avoiding a situation or client, feeling exhausted, comfort eating, further negative self talk, continued secondary stress and potential burnout

As secondary stressors mainly arise through our thinking, notice the potential they have to lead us from an initial worry or concern about a client to much stronger emotional and physical reactions, like feeling *overwhelmed*, or *overtired*, these stronger reactions perhaps arriving very quickly, or over time if repeatedly exposed to the same or similar events or situations.

How would it be if we were to catch our thoughts earlier on from our initial response to a situation or event? How might this prevent them cascading downwards toward further stress reactivity, and these more emotionally charged reactions.

For instance, in this example, if we were to notice and then respond differently to the more self-critical thought of *'I'm going to fail them'*, how might that influence what happens next?

An alternative way of responding could be to see self-criticism, in this or any situation or event, more as a stream of thoughts, something to be challenged, rather than believed or acted upon. Or, acknowledging how anger or frustration brings little benefit to the situation, and finding a more beneficial response.

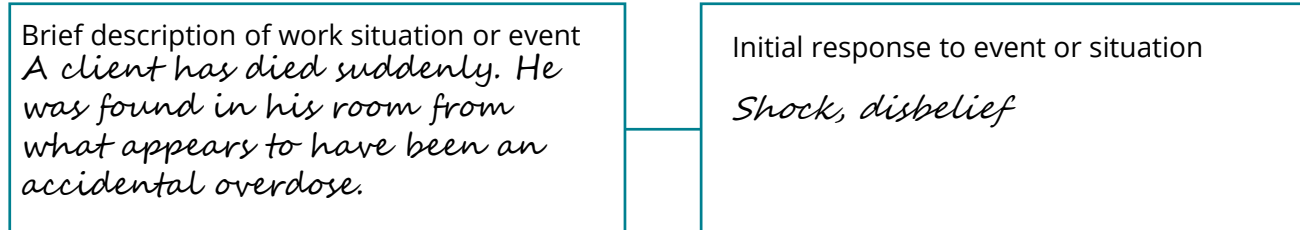
This could include setting up a multi-agency meeting early on to share your concerns, or acknowledging that you are doing the best you can, and are not responsible for 'saving' clients, or keeping them alive.

It is important to note that for some of us, the kinds of thoughts arising from this example may not lead to strong emotional reactions, or may only occur at certain times. This is because our individual beliefs, interpretations and mood at the time, and what else might be going on in our lives, also play a role.

However, there may be other situations and events in which other types of emotionally charged reactions occur that we may struggle with.

Stress reactivity tool – work example two

PRIMARY STRESSOR



SECONDARY STRESSORS

Thoughts and beliefs <i>e.g. negative self talk</i>	Physical/emotional reactions <i>e.g. feeling overtired</i>
<i>Why did he have to die like that??</i>	<i>sadness, shock</i>
<i>There was a change in him. We could have prevented this</i>	<i>Self-blame, worry, guilt</i>
<i>"It's my fault. If I pushed harder about the drugs, would he still be alive??"</i>	<i>Low mood, withdrawal</i>

Possible emotionally charged reactions

shame, anxiety, self-anger

Potential consequences of secondary stress overtime

Avoiding others, poor concentration, feeling distressed, further negative self talk, continued secondary stress and potential burnout

Notice again the way our thoughts (i.e. self-criticism) influence the kind of reactions we feel, and how strongly we feel them

How would it be if we were to catch some of the thoughts we carried with us about how the client died before they began to cascade downward to further stress reactions?

For instance, in this example, if we were to notice and then respond differently to the more self-critical thought of 'It's my fault', how would that minimise the stress we feel, and prevent such thoughts from escalating into further stress reactions?

An alternative way of responding could be to recognize and then acknowledge how little control (if any) we have over the actions of another, and that sudden deaths, as hard as they are, are a part of life, particularly within the homeless sector.

Or perhaps acknowledging how strong emotional reactions such as guilt, or blame, or anger, though natural responses to loss, bring little comfort or relief in coping with the loss of the client.

An alternative response might be to honour and express how you feel with others you feel safe with. The **bereavement section** of the toolkit considers ways in which to support ourselves and colleagues following the death of a client.

We could also recognise what else is going on that might be contributing to these strong reactions arising –such as additional stresses and worries in our lives, and consider how best to respond. The **self-care prompt** in the main toolkit can give you some ideas.