



STAYING IN *balance*

Healthy Solutions for Managing Workplace Stress



V!brant
Emotional Health



INTRODUCTION



INTRODUCTION TO STAYING IN *balance*

Welcome to ***Staying in Balance***, a resource toolkit for organizations that work with people in the community, including human and social services, civic and arts organizations, and many others in the nonprofit sector. These are the organizations that provide essential support and services to New Yorkers in need. **This toolkit is designed for use by supervisors, managers, and frontline staff, with the goal of helping employees, volunteers, and program participants cope during times of high stress.**

Through good times and difficult times, communities throughout New York City have always come together to meet the immediate needs of neighbors, celebrate strength and resilience, and mobilize for improved conditions and services. **During times of crisis, those on the front lines of providing help and healing to community members are just as affected as those seeking help, and it is essential that any coordinated crisis efforts recognize and respond to the needs of the helpers.**

The first edition of *Staying in Balance* was developed in 2009, in the wake of the economic crisis and great recession. To assess and respond to the emotional impact of the economic crisis on human service program participants and staff, the Vibrant Emotional Health met with organizations from across the city to conduct a needs assessment. After meeting with many organizations, Vibrant Emotional Health learned how an unprecedented demand for services, coupled with shrinking resources, was influencing organizations, the people they serve, and the staff who provide services.

Fast forward to this edition, developed in 2018. Human service and other organizations in the nonprofit sector, and the communities they serve, continue to adapt and respond to urgent needs and crises, both predictable and unpredictable. Many organizations have recognized that doing more with less is not possible, but are continuing to provide and improve vital services through innovation and collaboration. The skills and strengths of those in the helping professions will only become more important, through times of crisis and times of opportunity.

“We were made for these times...Ours is not the task of fixing the entire world all at once, but of stretching out to mend the part of the world that is within our reach. Any small, calm thing that one soul can do to help another soul, to assist some portion of this poor suffering world, will help immensely. It is not given to us to know which acts or by whom, will cause the critical mass to tip toward an enduring good.”

–Dr. Clarissa Pinkola Estés, Poet, Psychoanalyst, and Post-Trauma Specialist “Letter to a Young Activist During Troubled Times”

“We have cut all the low hanging fruit. What cuts we could make, we made during the recession, and now all that is left to cut are services.”

–Nonprofit employee, in “Voices of New York’s Human Services Sector”(2016)¹

“There’s a fear and mistrust around accessing services, especially for the parents of some young people who come from other countries, and we can’t realistically reassure them of safety.”

–Nonprofit director in family support program

“We’re expecting to see more transplanted youth in our city as a result of natural disasters; the layers of trauma due to so many different circumstances are catastrophic. We are trying to prepare the best we can but it’s unclear how this is going to affect our programs.”

–Nonprofit employee serving youth and families

¹ <https://humanservicescouncil.org/wp-content/uploads/Initiatives/RestoreOpportunityNow/Voices-of-Human-Services.pdf>

HOW SOCIAL AND ENVIRONMENTAL STRESS AFFECTS PUBLIC HEALTH



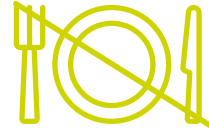
Difficult life circumstances, such as **job loss or sustained unemployment, divorce, prolonged strains in important relationships, the death of a loved one** are associated with increased rates of depression, substance abuse, and marital turmoil—all of which are independently linked to suicide risk.

—American Foundation for Suicide Prevention, 2017



New York State ranks **44th out of 50 states in access to affordable housing**—and has the dubious distinction of being the state with the highest income inequality ratio (comparing highest-income 20 percent to the lowest-income 20 percent of households).

—Center for American Progress, 2017



13 percent of New Yorkers regularly **experience food insecurity**.

—Center for American Progress, 2017²



33 percent of Americans have put off medical treatment—including postponing a health care visit, not filling a prescription, or skipping mental health visits—in efforts to save money.

—Gallup, 2016³

OVERVIEW OF THE MODULES IN THE STAYING IN BALANCE TOOLKIT

This toolkit contains modules to help human service and other nonprofit organizations address the many levels of stress typically experienced by staff members and program participants within our daily work, and particularly during times of increased uncertainty or crisis.

The modules provide information and exercises that focus on:

- **Reducing stress in the workplace**, including an introduction to traumatic stress.
- **Caring for ourselves personally and professionally**, including information about vicarious trauma.
- **Supporting the emotional needs of program participants**, including education on how to know and what to do when someone may need professional mental health services.
- **Working with people across the life cycle**, including responding to challenging behavior and possible abuse or neglect.
- **Continuing the work within organizations to build an ongoing culture of stress management and resilience.**

The final section of this toolkit includes a directory of participating human service organizations and resources, including wellness and mental health resources that complement the toolkit's modules.

Throughout the toolkit, there are discussion starters, brainstorming questions, and exercises that help to draw connections to the unique circumstances of each program. Staff members and teams may find this useful for team meetings, supervisory meetings, and any time when staff have an opportunity to learn from and support one another.

HELPERS NEED HELP, TOO

The Restore Opportunity Now campaign (<https://humanservicescouncil.org/restore-opportunity-now/>), a coalition of human service organizations across New York State,⁴ issued a report in March 2017 that highlighted the ways in which staff, clients, and communities are impacted by the inadequacy of state funding for essential human services

² <https://talkpoverty.org/basics/>

³ <http://news.gallup.com/poll/187190/cost-delays-healthcare-one-three.aspx>

⁴ Co-chaired by the Human Services Council, the Fiscal Policy Institute, and FPWA

provided by nonprofit organizations. Most nonprofit organizations depend on state funding for the majority of their funding, while the state depends on contracts with nonprofit organizations to deliver services that the government is obligated to provide.

Findings include:

- **Average annual pay for human services workers is about \$29,600 in New York City**—only about 40 percent of the average for all workers, and far short of the income needed to meet United Way’s survival family budget needs.
- **Inadequate pay is not just a problem for the lowest-paid human services workers.** Average pay for middle-tier occupations such as social workers and substance and drug abuse counselors is 20–40 percent greater in hospital, school and civic organization settings than in primarily government funded nonprofit human services providers.⁵ So it is not surprising that many providers report that nonprofit employees, who are often motivated to work in the sector by a deep desire to help others and their communities, face the same economic stresses as the client populations they serve.
- **Nationwide, 73 percent of those using at least one public assistance benefit are members of low-wage working families**, including low-wage earners in the social assistance field.⁶

Furthermore, when funding levels do not meet the cost of providing direct services to program participants, nonprofit organizations are even less able to invest in areas that help prevent burnout and high turnover among employees, such as professional development and highly skilled supervisors.

- Historically, government contracts for nonprofits have put unrealistic limits on “indirect costs” or “overhead”—anything not involved in providing direct services to program participants—and private funding sources have prioritized direct services over organizational infrastructure and health. Fortunately, this is beginning to change, as nonprofit coalitions help private funders and government to see that clients and communities are in fact better served when there is investment in the “indirect” costs that help organizations and employees to be healthier.⁷

The organization of this toolkit is intended to “help the helpers” first, so that organizations will be better able to support the needs of their program participants. These modules can stand alone, and organizations should feel free to adapt the information as they see fit to meet the immediate and unique needs of their environments.

ABOUT THIS PROJECT

Nonprofits exist to support, serve, and represent our communities. Those addressing social challenges, inequities, violence, and trauma can experience a particular toll on their health and productivity. As a result, it is critical for organizations working in these capacities to provide safe spaces that support and foster strength in the people entrusted to engage and dismantle harm and injustice. The Nonprofit Coordinating Committee of New York, in partnership with Vibrant Emotional Health, and with generous support from The New York Community Trust, provided a series of workshops on vicarious trauma and shared methods for recognizing trauma and supporting staff needs. This series, **Addressing Trauma: Self-Care Strategies for you and the Communities you Serve**, was offered during the fall and winter of 2017 and 2018. Vibrant Emotional Health further developed and updated this **Staying in Balance** toolkit to help nonprofit organizations cope with stressors in the social environment and to link their staff members and program participants to mental health supports and resources.

Since 1924, The New York Community Trust, through the generosity of its donors, has built a permanent endowment to support the nonprofit organizations that make our city a vital and secure place in which to live and work.



⁵ As of this writing, a series of mandatory wage increases are in effect to bring the minimum wage to \$15.00 for most employees, including nonprofit human service workers: <https://www.ny.gov/new-york-states-minimum-wage/new-york-states-minimum-wage>

⁶ <http://laborcenter.berkeley.edu/the-high-public-cost-of-low-wages/>

⁷ <https://www.councilofnonprofits.org/trends-policy-issues/investing-impact-indirect-costs-are-essential-success>

Vibrant Emotional Health is a nonprofit organization that addresses mental health needs in New York City and across the nation. It is a local organization with national impact and has a three-part mission of advocacy, education and mental health services. Vibrant Emotional Health identifies unmet needs and develops culturally sensitive services and programs to improve lives while promoting the awareness of mental illness.

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A NOTE ON LANGUAGE

Just as the world is constantly changing, **the way we talk about things will continue to change in response to shifts and trends in society.** For example, nonprofit organizations have historically been seen as *charities that help the needy*, which does not accurately reflect the commitment of today's organizations to recognizing the strengths and supporting the self-efficacy of those seeking services. One way that we can fight the stigma of getting services is to be thoughtful about language choices.

In this toolkit, we have chosen to primarily use the term *program participant* (an admittedly imperfect term), with occasional use of the term *client* for clarity. We also draw from the field of *customer service* to discuss nonprofit staff communication skills, although readers may not necessarily use this term in their worksites. Every organization will have unique considerations regarding language, but reflecting on the impact of words commonly used in the service setting can be useful for all organizations.

Nonprofit organizations work with many people and groups who have been labeled, denied the right to self-identify, or targeted based on their identities. Our organizations have an opportunity to ensure a proactively welcoming and inclusive environment for all. **The resources below (not an exhaustive list) are tools to support language that affirms each person's life experiences and social identities.**

B STIGMA-FREE

<http://bstigmafree.org/resources/let-language-empower/>

THE OSBORNE ASSOCIATION

<http://www.osborneny.org/news/we-are-people-resources-for-humanizing-language/>

RACE FORWARD: THE CENTER FOR RACIAL JUSTICE INNOVATION

<https://www.raceforward.org/practice/tools/drop-i-word>

GLAAD

<https://www.glaad.org/reference/transgender>

NATIONAL EMPOWERMENT CENTER

<https://www.power2u.org/what.html>

MENTAL HEALTH AMERICA

<http://www.mentalhealthamerica.net/person-centered-language>



“Our words have power. They shape and color our estimations and judgments. They can build up or tear down.”

— Karol Mason, President of John Jay College of Criminal Justice, former U.S. Assistant Attorney General

MODULE ONE

MANAGING STRESS IN THE WORKPLACE



MODULE ONE

MANAGING STRESS IN THE WORKPLACE



“It has been said that ‘the only thing predictable in life is change.’”

This module is for supervisors, managers, and staff members who want to help keep their organizations healthy by reducing stress in the workplace. This module is for supervisors, managers, and staff members who want to keep their organizations healthy by reducing stress in the workplace. In **NPCC’s Eight Key areas of Nonprofit Management Excellence**, which sets management standards and aspirations that promote nonprofit sustainability, impact and health, Area 5 is devoted to ensuring that human resources are valued and developed.

This requires that organizations “continually works to provide a safe and healthy work environment, protecting clients, employees, and volunteers from harm and unnecessary risk, including regular efforts to ensure standards of prudent care” including “encouraging and ensuring implementation of policies that support work-life balance and the personal needs of all staff.”²

Even in the best of times, nonprofit organizations may find themselves understaffed and overburdened. It is becoming increasingly common for organizations to have to cope with multiple kinds of uncertainty in the workplace, including, but by no means limited to, budgetary concerns, the need to recruit and retain qualified staff, and addressing the multiple and shifting needs of program participants, who may be faced with increasingly complex social and environmental stressors.

Those of us working in the nonprofit sector recognize that there are some things that are within our control or influence, and some things that are not.

How can organizations take steps to ensure that employees feel respected and supported at work, even when they are affected by uncertainty or change?

WHAT EXTERNAL
EVENTS HAVE
IMPACTED YOUR
ORGANIZATION
RECENTLY?
HOW HAVE
EMPLOYEES BEEN
AFFECTED?

IMPORTANCE OF BUILDING HEALTHY WORKPLACES

The average full-time employee in the United States spends 47 hours a week in the workplace and commuting, and New York City tops the charts at nearly 50 hours combined.¹

Plus, technology has extended our working time—for example, 59 percent of employees in the U.S. report that they use their mobile devices to do work after their normal business hours.² Staff in nonprofit organizations, whatever our role, have chosen to spend significant time focused on helping others with life stressors.

Given how much time and effort we put into our jobs, **a healthy work culture makes a big difference, professionally and personally.**

People who feel that their organization provides a supportive, respectful environment—even

¹ https://comptroller.nyc.gov/wp-content/uploads/documents/Longest_Work_Weeks_March_2015.pdf

² <http://www.workplaceoptions.com/polls/americans-doing-more-after-hours-work-from-their-own-mobile-devices/>

when the work is on the front lines of trauma and stress—tend to feel more engaged in their work, more satisfied with their jobs, more effective in the work that they are doing, and less stressed overall.

When employees feel that the environment at work is negative, they lose enthusiasm in their work, their effectiveness decreases, and work becomes an additional life stressor. Stress has a major impact on employee mental and physical health and on how organizations function, as well as on families and communities.

The health of employees is often directly related to the health of the company. Increased job satisfaction, improved morale, reduced injuries and increased productivity are just some of the benefits of a healthy work environment.

This module covers stress in the workplace and steps that you can take right now to help create a culture of resilience in your organization.

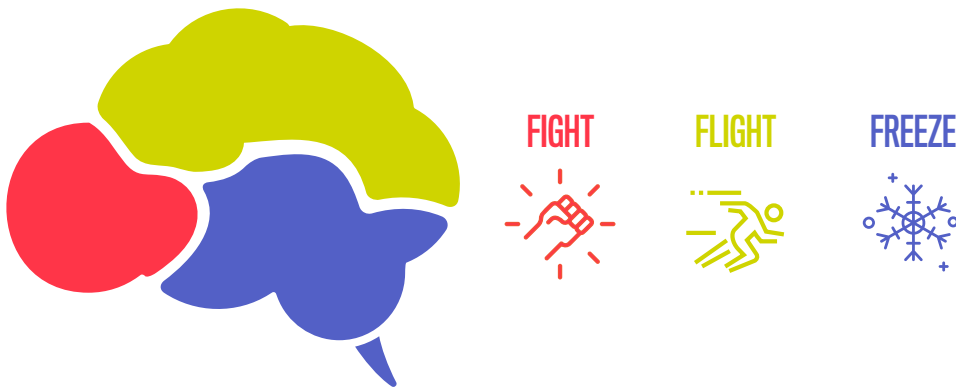
WHAT IS WORKPLACE STRESS?

Human beings have been managing stress since the beginning of time. **Stress can be defined as the way the body and brain respond to challenging changes in the environment,** releasing natural chemicals (hormones) that help us adapt or protect ourselves.

Stress can be positive (called *eustress*), such as the excitement and nervousness of applying for a new job, or the temporary frustration of working through a challenging problem. Without some stress, life would be less interesting and we'd never learn new things.

Stress is also essential for our survival. When the brain and body sense danger, stress hormones receive an instant message and surge to action. This is known as the FIGHT, FLIGHT, or FREEZE response.

Here's a classic example: You start to cross a street, and don't see any cars coming. Suddenly out of nowhere a speeding car turns the corner, headed towards you. You instantly jump back, out of harm's way. There was no time to think about what you were going to do—your stress response took over and made the right choice to keep you safe!³



Stress becomes a problem when it is long-lasting and chronic. When stress hormones keep our brains and bodies on high alert, it's hard to think, relax, and learn. This can have short-term and long-term effects on physical and emotional health, and on quality of life.

ENGAGED EMPLOYEES

are those who are involved in, enthusiastic about, and committed to their work and workplace.

HOW ENGAGED DO MOST EMPLOYEES FEEL NOWADAYS?

Check out news from Gallup's State of the American Workforce survey to find out. <http://news.gallup.com/reports/199961/state-american-workplace-report-2017.aspx>

³ <https://www.cdc.gov/bam/life/butterflies.html>

Workplace stress is defined as the “harmful physical and emotional responses that occur when the requirements of the job do not match the capabilities, resources, or needs of the employee” (National Institute for Occupational Safety and Health⁴). Furthermore, organizations under stress can develop a “toxic culture,” where mistrust, fear, and unmanageable conflict create an environment that is unbearable for many staff.⁵

Employees and volunteers who work with human service organizations may be at particular risk from workplace stress during times of uncertainty, limited resources, and increased levels of program participant distress.

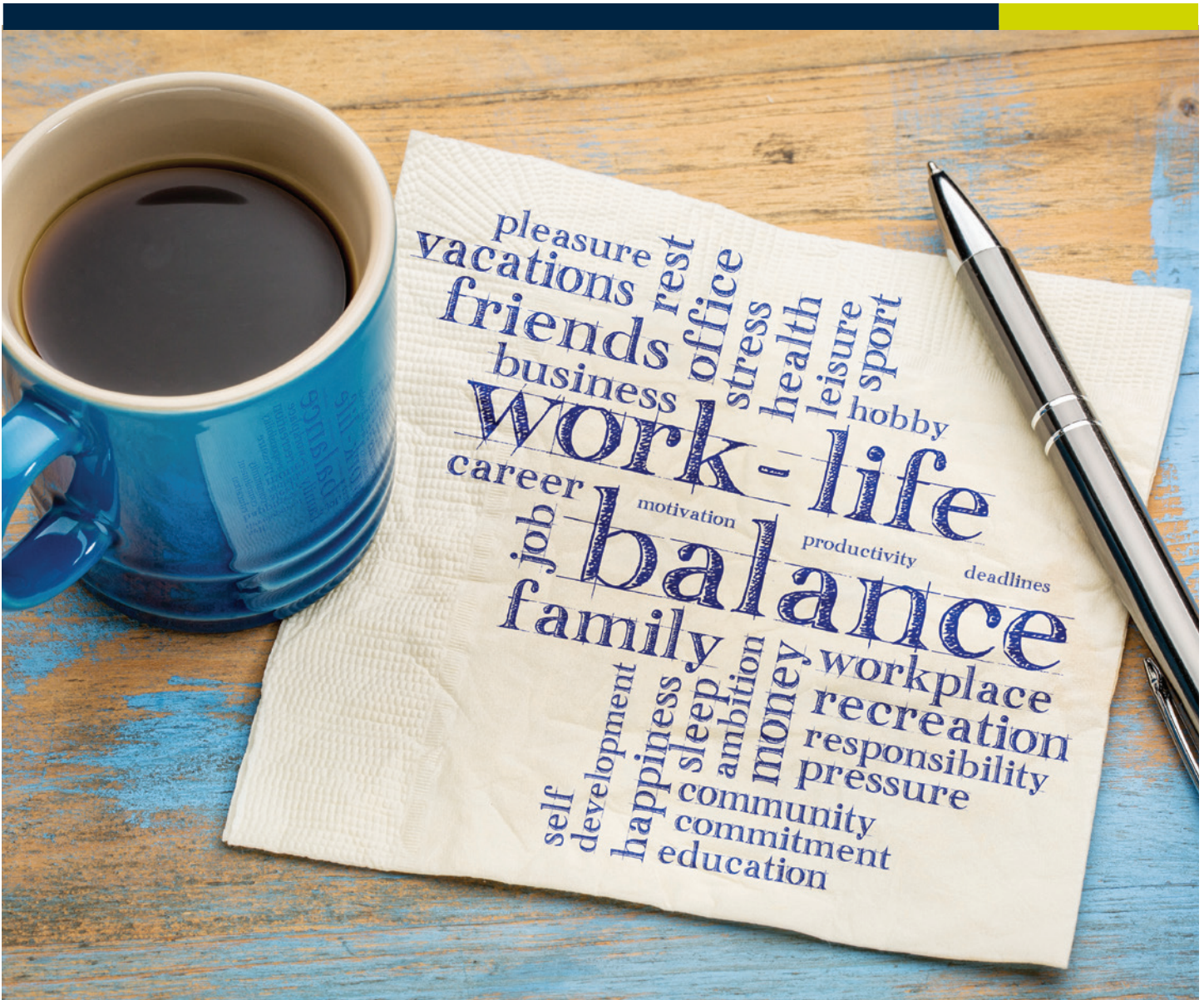
How can individuals and organizations become more resilient in the face of workplace stress? It might involve the provision of information, support, training, or resources to reinforce existing coping skills or to build new ones.

When the leadership of an organization understands the unique needs and characteristics of their staff members, they can take steps to prevent chronic workplace stress and promote a healthy workplace environment.

Resilient organizations are able to bounce back from hardship, prepare for the unexpected, create a culture of hope and action, and encourage healthy stress management for everyone in the organization.

⁴ <https://www.cdc.gov/niosh/index.htm>

⁵ A useful book for assessing organizational culture is The Nonprofit Organizational Culture Guide <http://www.wiley.com/WileyCDA/WileyTitle/productCd-0470891548.html>



INDIVIDUAL CONTRIBUTORS TO WORKPLACE STRESS

In a stressful workplace, every individual will experience a unique response based on their perceptions of the problem and their personal reactions to it. When working with others, it's helpful to learn our own and our colleagues' personal stress management styles.

There's not a "bad" way or a "good" way to cope with stress—each of us has a unique combination of strengths and needs based on a number of factors, including:

- Personality traits.
- Cultural values and heritage.
- Family values.
- Life experiences.
- Education and professional development.
- Genetics.
- Past trauma.
- Physical and mental health.

HOW DO YOU AS
AN INDIVIDUAL
RESPOND TO STRESS
IN THE WORKPLACE?

How do you think
this is similar to or
different from your
colleagues?

COMMON JOB CONDITIONS THAT CONTRIBUTE TO **STRESS**

CAN YOU
RELATE TO
ANY OF THESE
WORKPLACE
STRESSORS?

Check out
our tips for
Responding to
Workplace Stress
on the next page.

WORKLOAD AND JOB EXPECTATIONS

- Heavy workloads and tight deadlines.
- Long shifts with infrequent breaks.
- Feeling that skills are not being well used.
- Uncertainty about what you're supposed to be doing.
- Feeling you have too much (or not enough) responsibility.
- Feeling no sense of control over your work.

RELATIONSHIPS WITH CO-WORKERS AND MANAGEMENT

- Lack of friendliness or collegiality.
- Feeling unsupported or disrespected by co-workers and/or supervisors.
- Feeling isolated on the job, with no sense of being part of a larger organization working through a tough time together.
- Not enough communication between management and staff members.
- Not feeling able to talk honestly with a supervisor without worrying about job security.

JOB SECURITY

- Worry that the economy or budget cuts may lead to layoffs in the organization.
- Not feeling that there is room for growth or advancement.
- Expecting to work extra hours, perhaps without pay.
- Feeling the need to put the job ahead of family or personal life.

WORKPLACE ENVIRONMENT

- Being exposed to air pollution or loud noise, standing all day on concrete floors, or operating equipment that needs repair.
- Sexual harassment or bullying from co-workers or superiors.
- Facing dangerous or potentially violent conditions—sometimes related to serving program participants.

VICARIOUS TRAUMA

- Learning about the traumatic experiences and circumstances of program participants, and not being able to get disturbing stories or images out of your head.
- Identifying closely with program participants, and having a hard time maintaining relationships in your own personal life.
- A change in world view where it feels impossible to have hope.

RESPONDING TO WORKPLACE **STRESS**

This page considers a variety of workplace challenges and offers strategies for quickly creating a less stressful workplace.

LISTEN—AND LISTEN OFTEN—TO YOUR CO-WORKERS.

- Open communication strengthens the personal relationships between management and staff members.
- Schedule regular staff meetings.
- Encourage informal conversations among staff members and supervisors.
- If you recognize the need for better communication, try bringing this up to your supervisor as something you think would improve the workplace and your development as a professional.

ACKNOWLEDGE THE GREAT CONTRIBUTIONS YOUR CO-WORKERS MAKE.

- Celebrate successes and reward great work.
- Regularly remind your co-workers of how helpful they are and how important their contributions are to your work.
- Your co-workers will feel appreciated and they will be more likely to bring that attitude into the workplace.

SET PROFESSIONAL BOUNDARIES.

- Professional boundaries help you to define your responsibilities.
- Setting professional boundaries will help you understand your limits so that you can stand up for yourself and start feeling less guilty about putting your own needs first.
- Acknowledge what you can and can't accomplish through your work and praise yourself for the things you can do.
- It may help everyone in the workplace to periodically take a look at roles and responsibilities.
- Include supervisors and co-workers in discussions, and consider whether adjustments are needed.

ENCOURAGE A LITTLE EXERCISE.

- Simple movement can refresh your perspective.
- Consider organizing group walks during lunch or after a shift.
- Technology can be used for stress relief too—your organization might be able to select some “healthy living” apps to make available for employees.
- Share on-the-spot “stress busters” with your co-workers, or ask local resources like gyms or yoga studios to offer your organization reduced memberships.

CREATE OPPORTUNITIES FOR FUN AT WORK.

- Laughter can decompress a tough work situation, relieve tension, and reduce anxiety.
- Humor helps us maintain a healthy perspective and makes us more able to solve problems.
- Be sure to model humor that is appropriate for the workplace.

START EVERY DAY FRESH WITH PROACTIVE PLANNING.

- If it seems as though you are always playing catch-up, consider a policy that encourages your team to take 10 minutes at the top of every day to review the work ahead and prioritize the most important tasks.
- Recognize that planning is a tool to control what you can about your day, and that sometimes less important tasks may need to be moved to another time (or taken off the list altogether).

Adopting one or many of these strategies could be the very thing your workplace needs right now. Down the road, you may find it valuable to take a longer term look at preventing and responding to workplace stress.

WHEN ADDITIONAL SUPPORT IS NEEDED

Some workplace stress is short-lived, and its effects are temporary. We use our usual coping skills to help us get through those times. Maybe we get together with friends to blow off some steam and laugh. Perhaps we participate in a fun activity, cook a favorite meal, or try a crafts project. In other words, we turn to those things in our lives that relax us. In time, we regain a perspective on our problems and lives, and the stress dissolves or becomes something we can manage.

On the other hand, when we're under a heightened level of stress for a long time, our personal coping skills may no longer seem to help as much. We may feel ill or as though we're dragging ourselves around in the world. We may not have had a good night's sleep in a long time. We may be moody and irritable or feel especially anxious or sad. Or, we might turn to alcohol and other drugs as an attempt to self-medicate or help us cope.

Long-term stress often accompanies big changes in personal circumstances—a family illness, financial concerns, or a death in the family. Stress is a normal part of life. But when long-term stress goes unaddressed, it can seriously affect the way we think, act, and feel.



Here's a list of examples of some changes in behavior that we may see in the workplace during times of high stress:

An Urgent Need for Control

Because life feels so out of control, staff members try to control every aspect of their job—right down to the location of paper clips on their desks, for instance. They are easily angered if they think anyone is “interfering” with the way they want to do their work.

A Surprising Loss of Competence and Confidence

We might see great staff members suddenly lose all confidence in their ability to do the job. A year ago, they seemed confident about their work, but now they have become afraid to make decisions for fear of being wrong. They seem afraid to fail, and this fear can be paralyzing.

Excessive People Pleasing

We may know someone who seems to need more positive feedback than usual to boost self-esteem, and may also refrain from having any conversations for fear of displeasing others.

EMPLOYEE ASSISTANCE PROGRAMS

Many organizations offer Employee Assistance Programs (EAPs)—voluntary, work-based programs that offer free and confidential assessments, short-term counseling, referrals, and follow up services to employees who have personal and/or work-related problems.

For more information about EAPs, visit <https://www.easna.org/research-and-best-practices/what-is-eap/>

Impossible Perfectionism

Nobody's perfect, but many of us wish we were. Under usual conditions, most of us realize that perfection isn't possible, but the effects of long-term stress can turn confident staff members into a highly self-critical ones who constantly put down their own work. It's not enough to be great—they have to be perfect—and they may feel the need to stay very late or work extra hours on weekends. This can be especially true if the employees are worried about job security.

Bullying or Harassing Others

Bullying in the workplace is often subtle and under reported, yet the number of people who report they feel threatened or intimidated at work is increasing. One survey shows that 60.3 percent of American employees are affected by workplace bullying.⁶ Healthy organizations create transparent policies that allow staff members to safely report problems to someone other than an immediate supervisor.

We may not always feel that it's appropriate to initiate conversations with co-workers about their own personal stress, but when long-term stress interferes with job performance or the ability to interact with other people, there may be an opportunity to help.

SPEAKING WITH A STRESSED CO-WORKER

When talking with a staff member who is finding it hard to cope with stress in the workplace, it is helpful to have that conversation in a quiet, private place. Tensions may be high, so staying calm is important.

No matter what kinds of stressed behavior we're seeing, **asking a few key questions can help keep the conversation professional and positively focused on the job:**

- Are there things happening right now that are causing you more stress at work?
- How do you think the stress is affecting your performance?
- Is there any specific support you need right now to help you with your work?
- Is there anything I can do to help reduce your stress?

It's important to stay focused on what's happening in the workplace. There's no need to ask direct personal questions like, "What's happening at home?" An encouraging conversation and an offer of support at work may be all that's needed for an employee to relax and refocus.

Even for those of us who are trained mental health clinicians, **it's not generally our role to provide ongoing professional care for a colleague coping with long-term stress. But, any one of us can be ready to offer referrals for professional mental health help to colleagues.** It's important not to pressure anyone to seek help, but we can make a difference by introducing options in a strengths-based, non-judgmental way.

Some people may be reluctant to use mental health services due to past experiences, or may feel that getting counseling is a sign of weakness or personal failure, or may even be worried that getting help will jeopardize their job security.



EMPATHIC

LISTENING

This technique can be used to help make challenging conversations more comfortable. These steps will respectfully show a troubled staff member that you care:

- Focus only on what your co-worker is saying.
- Listen actively by nodding, maintaining eye contact, or using simple words to keep the conversation going.
- Be aware of any personal biases, assumptions, or values you might have.
- Avoid rehearsed responses, and pause to think before answering.
- Ask mostly open-ended questions instead of yes or no questions.
- Repeat back in your own words what you thought you heard the speaker say.

⁶ <http://www.workplacebullying.org/tag/bullying-statistics/>

We can help by:

- Letting them know there is nothing wrong with asking for help.
- Reminding them that helping others requires we help ourselves first.
- Reminding them that even those of us who provide care and support to others us can feel a heavier personal weight in uncertain times.
- Sharing our own perspective or experience of counseling as a positive force.

HOW TO GET HELP

NYC WELL (1-888-NYC-WELL [1-888-692-9355])

<https://nycwell.cityofnewyork.us/en/> is a free confidential crisis and counseling referral service funded by New York City and administered by the Vibrant Emotional Health.

In addition to calling, **NYC WELL can be accessed by texting WELL to 65173, or by pressing the CHAT button on the website.** A translation service for languages other than English is available immediately when requested, and people who are Deaf or hard of hearing can call 711 for relay service.

NYC WELL is available 24 hours a day, 7 days a week. Callers to NYC WELL are connected to trained counselors who assess their situations and link them to the services they need.

Counselors are trained to offer referrals in any of these areas:

- Suicide prevention and crisis counseling.
- Peer support and short-term counseling via telephone, text and web.
- Assistance scheduling appointments or accessing other mental health services.
- Follow up to check that you have connected to care and it is working for you.



A FINAL WORD ABOUT WORKPLACE STRESS

Workplace stress has a great deal to do with the way organizations operate. Healthy workplaces foster respect, gratitude, and good service. Organizations that value and respond to employee needs can ignite passion and purpose in the workforce. It helps us as staff members to know that we are part of something important.

Organizations that make it a priority to regularly recommit to worker health, safety, and satisfaction are most likely to see a reduction in the signs and symptoms of workplace stress. For more resources on workplace stress, visit Module 6 of this toolkit.

IF YOU NOTICE...YOU MIGHT TRY TO...

Your co-workers expressing concerns over the organization or their job security.

Ask for a staff meeting to update everyone on how the organization is doing and encourage staff members to talk about their experiences. Ask your supervisor to keep people notified about the organization on a regular basis through emails or posted notices. Include information about field-wide advocacy efforts.

Office morale is low, and staff members don't appear to be enjoying their work as much as before.

Thank everyone—individually, as a group, or both—for their dedication in helping others through times of challenge. Celebrate accomplishments, as well as personal milestones. In a non-judgmental way, remind staff that self-care, community building, and organizational support are key for managing stress and vicarious trauma.

Staff members seem to be keeping to themselves.

Organize a brown bag lunch or informal staff gathering at which workers can talk about anything that's bothering them, as well as the possible impact of vicarious trauma. Invite staff to offer solutions, too. If a co-worker continues to stay isolated, talk with them privately to see if there is a work-related issue involved.

Co-workers are complaining about aches and pains, especially headaches.

Suggest or organize some activities to get people moving, like yoga at your desk or lunchtime walks. Model and encourage people to take lunch and other allowable breaks!

Staff members seem overworked and overwhelmed.

Talk with co-workers and ask them to identify what feels most challenging to them at work. Ask what they need to feel less stressed, and then work together to find solutions that give them some relief. Be aware that some staff may not be able to make ends meet with their salary, and may be working multiple jobs. Consider when advocacy and support is needed in your organization.

Co-workers are reporting that it is harder to serve program participants.

Validate that program participants are exhibiting more challenging behavior because of the extreme stress that they are under and normalize the possible impact of vicarious trauma. Your co-workers may also need additional training or a refresher in caring for the emotional needs of clients, which is found in Module 2 of this toolkit.


A staff member is having trouble doing their job or getting along with co-workers.

Have a private conversation together. Keep a calm tone and focus on job performance. Don't attempt to provide counseling yourself. If you believe your co-worker needs professional help, ask if they would like information about resources. Have resources posted around your work space to normalize the idea of getting help, so this doesn't only come up when there is a problem.



MODULE TWO

STAYING IN BALANCE
WHILE HELPING
OTHERS



MODULE TWO

STAYING IN BALANCE WHILE HELPING OTHERS

In times of stress and uncertainty, nonprofit organizations have always been on the front lines of responding to short-term and long-term needs of community members. Some participants in our programs may have needed to turn to the service system throughout their lives, while others are turning to it for the first time.

As helping professionals, we can help program participants cope with stress and trauma by helping them feel safe, welcome, and known when they interact with our programs. Everyone responds to stress differently. Some people appear a little more tense than usual, while others seem excessively agitated, on edge, or sad. There are steps that we can take to help others use coping skills to manage stress.

UNDERSTANDING THE NEEDS OF THE PEOPLE WE SERVE

Keep Behavior in Perspective. People in crisis or under long-term stress may have complex reactions to their situations. At times, the level of distress that we see in program participants can be overwhelming. As a helper, it can also be difficult when program participants seem to be angry with us, or treat us as being part of the problem. It is important to understand this behavior in the context of traumatic life events such as job loss, eviction, or difficulty putting food on the table. Keeping program participants' behavior in perspective can help us to access empathetic responses and maintain motivation to help.

Our Role as Helpers. It is natural for us as helpers to want to “fix” problems, and it can be hard for us when it seems that there are no good answers or when program participants don't take the actions or steps that we think will help them the most. Program participants come to us for help, but at the same time they are experts in their own lives and will need to make the decisions that are right for them. The best way to help program participants develop plans that will work for them is to build a collaborative relationship. When seeking help, people may feel demoralized and doubt that they have the power to change their situation. They may even be afraid of losing more by risking further changes. In a professional capacity, the truth is that we may or may not always be able to help people with their concrete needs, but we can always offer our best professional self.

The Golden Rules of Customer Care offer suggestions for being an effective helper in the workplace, especially when confronted with challenging behavior.



THE GOLDEN RULES OF CUSTOMER CARE

Grounding ourselves in the golden rules of customer care can help us to still be empathetic and improve our effectiveness when communicating with frustrated or angry program participants. Providing good customer care will also create a professional atmosphere of mutual respect.

- **Model professional behavior.** As professionals, we can make the first move and set the tone for the working relationship with program participants. When we model respect, others are much more likely to respond in kind. If you feel someone is being disrespectful, stay calm, professional, and focus on how the work that you are doing will be helpful to the program participant.
- **Keep an open mind.** For most of us, it's hard to keep an open mind and be non-judgmental when dealing with others' challenging behavior. It's very easy for us to think "What is wrong with you?" These feelings are understandable, but it's important for us to be non-judgmental in a professional setting. Our goal is to help people in our programs, and to do that we need to understand the circumstances and experiences that led them to us. Program participants may be angry and frustrated, and we may see them in the worst of moods. Instead of reacting to their anger or taking it personally, it is important that we learn about their situation, understand their frustration, and set the tone for a comfortable conversation.
- **Communication is more than language—it's culture, too.** Program participants' perspectives of their situation also may be shaped by their culture and heritage.² Values such as pride in self-sufficiency or belief in community strengths may affect someone's interest in or willingness to accept outside help. Furthermore, many program participants' experiences may have given them good reason not to trust government, health care institutions, or even community-based organizations. As helpers, it's important to remember that trust is earned, not given.

Three commitments we can make to help put these first rules into action:

1. I can do my best to be as free as possible of assumptions and judgments.
2. I can approach each program participant's situation with an open mind and heart.
3. I can keep a curious and supportive stance by asking questions about how each program participant's beliefs and family or community traditions affect their view of their situation.

² Derald Wing Sue (2010). *Microaggressions in Everyday Life: Race, Gender, and Sexual Orientation*. Wiley. pp. xvi. ISBN 0-470-49140-X.

UNCONSCIOUS BIAS

Unconscious bias, also known as implicit bias or hidden bias, refers to our ideas and beliefs—negative or positive—about certain identity groups, including race, culture, gender, sexual orientation, appearance, age, and many others.

We often think of “-isms,” —racism, sexism, homophobia, ableism, and more—as being overt discrimination or prejudice expressed in behavior or words. But many messages of “-isms” are more subtle, and we start absorbing them very early in life through family, community, education, media, and other influences. In our programs, it is important that we never tolerate intentional discrimination and overt prejudice, but it is also important to understand the impact of slights that may be unintentional and unconscious. Unconscious bias leads to **microaggressions**, “brief, everyday exchanges that send denigrating messages to certain individuals because of their group membership.”² There are many examples of microaggressions that could be listed here; however, some classic examples of microaggressions are to ask someone to adopt a different name because their given name is “too difficult” to pronounce, or assuming someone can translate English into Spanish because they have Latinx* heritage.

Many program participants may feel unsafe or targeted based on their identities, and **our programs have the responsibility to ensure that all who enter can feel safe, welcome, and known.**

Check out the Harvard University’s Project Implicit to confidentially test your own implicit biases and, most importantly, help you move beyond them:

<https://implicit.harvard.edu/implicit/education.html>

TIPS FOR BUILDING TRUST

- **Be honest about what you can and can’t do.** Program participants hope that we can solve their problems. Sometimes their expectations may be unrealistic. It is our role to explain to them your organization’s mission and how we can and can’t help them. Being honest about our limitations—and helping to connect program participants to other resources to meet their needs whenever possible—helps to build trust.
- **Hear program participants out—even if you can’t help.** If you can’t help with the person’s immediate needs, you can still be of help to them by listening. Many people come to our programs during challenging times, simply wanting to be heard and to feel understood by someone. If you have to say “no” to a request, it’s important to offer a clear and honest explanation. This simple step shows you have respect and empathy for your client.

Tips for Effective Listening:

- Focus on the person speaking, not on paperwork or the computer.
- Concentrate on what is being said.
- Listen actively by nodding, keeping eye contact, or using simple words to keep the conversation going.
- Be aware of your own personal biases, assumptions, and values.
- Avoid responses that sound “rehearsed.”
- Pause to think before answering.
- Ask mostly open-ended questions instead of yes-or-no questions.
- Repeat back in your own words what you think you heard the speaker say.

* “Latinx” refers to a person of Latin American origin or descent, used as a gender-neutral, non-binary alternative to Latino or Latina <https://en.oxforddictionaries.com/definition/latinx>

When program participants complain, take positive action. No individual or organization is perfect, and sometimes we may fall short in customer care. Additionally, people in our programs who don't fully understand what we can and can't do may feel they have been poorly served. Allowing them to voice their complaints is a two-fold opportunity. If the complaint is valid, we will learn how we can improve services. If the complaint isn't valid, we can still use this opportunity to let people know that their feelings are important.

IF A PROGRAM PARTICIPANT HAS A COMPLAINT

- Allow the person to describe the details of the complaint without interruption.
- Ask for a minute or two to consider a satisfactory solution.
- If you can't think of a solution, ask a co-worker or supervisor for help. Let the program participant know that this is what you are doing.
- Reassure the program participant that resolving the complaint is very important and will be managed as effectively as possible.
- Let the program participant know what your organization's grievance procedure is.

Customer care is a team sport. This rule of customer care also helps you care for yourself. None of us are superheroes, even though we may try to be. If you need help supporting the people you work with, you can ask co-workers, volunteers, or supervisors. The more we work together toward a common goal, the faster it will be achieved, and with less burnout.

As professionals, we can all help each other to help our program participants by:

- Talking as a group about how to meet the needs and handle the demands of people in our programs.
- Asking others for help in solving problems.
- Learning how other organizations can help provide services that we can't.
- Arranging work schedules so that everyone can take a break occasionally.

Acknowledge the strengths of the participants in our programs. Human beings can be remarkably strong and resilient in the face of tough times. We can help people tap into their coping skills when we provide them with feedback about the strength and resourcefulness they have shown. It helps staff and program participants alike when we can join together in our shared humanity—especially important during times of stress.



MAINTAINING A CURIOUS STANCE ABOUT BELIEFS AND CULTURE

Questions like the ones below can help you learn more about program participants' beliefs and values.

CONSIDERING CULTURE

Our city is rich with diversity. We see the multitude of cultures represented as we go about our daily lives each day. Many New Yorkers identify another country as “home”—one in five New Yorkers is an immigrant (born in another country), while another one in six New Yorkers born in the U.S. has at least one immigrant parent. But culture is more than language, clothing, or food. We each belong to a culture, often more than one culture, and this is reflected in our values, beliefs, and assumptions about the world around us. Culture is who we are—our identity.

Culture, then, becomes a larger framework in which to see ourselves as individuals, and includes the way we define our ethnicity and race, social class, language, religious and spiritual beliefs, gender identity, sexual orientation, physical abilities, mental health, and more.

Our ability to serve program participants effectively is enhanced when we take time to learn about the culture, beliefs and values of the people we are working with, and integrate those beliefs and values into any solutions, support systems, or counsel offered. Everyone is much more receptive to information that is presented in a way that makes sense and feels respectful. Furthermore, some program participants and people they know may have been victimized by discrimination and/or violence based on their identities—so it vitally important that nonprofit professionals set the stage for a trustworthy relationship.

We can all cultivate a genuine—and human—curiosity about the diverse cultures we serve by getting to know program participants as individuals, finding out what motivates them, and understanding how they see the world. Use their answers to offer solutions in the context of their cultural beliefs.

An important question to ask ourselves is, “Do I have a good understanding of my own personal and cultural values and beliefs?” This may be a first step in understanding the importance of multicultural identities in the lives of program participants.

- For immigrants: What was it like living in the countries you've lived in before now? Are there any concerns or reasons for distrust within your community about organizations like this?
- What do you think is causing the problem that you are having?
- What is the role of your faith or spiritual practices in guiding your decisions?
- Who do people in your family or community usually turn to when they are having difficulties or emotional problems?
- How are the expectations for men and women different within your culture?
- Are you connected to a wider community in the city that shares your culture? If so, what is that like for you?

Use these suggestions as a starting point for the kinds of questions you might need to ask to develop a genuine and trusting relationship with program participants.

¹ <https://www.americanimmigrationcouncil.org/research/immigrants-in-new-york>



CUSTOMER CARE ON THE PHONE

While we may not necessarily think of our work in nonprofits as customer service, or our program participants as customers, it may be helpful to draw from the field of customer service when dealing with challenging interactions. Whether or not we regularly engage with callers and program participants over the phone, taking a look at what works and what doesn't can offer valuable tips.

Recent studies have found that more than 90 percent of people who contacted customer service departments found the experience frustrating—and that 35 percent of complainants have yelled and 15 percent cursed when speaking to customer service about their most serious problem.³ It turns out that many customers dread making a customer service call and believe that their problems won't be solved despite their efforts.

Of course, customers aren't the only ones who are stressed out by difficult customer service calls. When customer service representatives have been asked to name the most challenging part of their job, the number one answer is "dealing with difficult or insensitive customers."⁴

As nonprofit providers serving people going through stressful times, we have our own challenges when it comes to helping people over the phone. Sometimes it's difficult to get clear information from people. We don't have the benefit of human contact. We can't see the other person or notice their body language. We also may have a difficult time understanding them because of poor phone connections or language barriers. But a helpful, professional, and friendly voice on the phone can help calm a person who's stressed, scared, anxious, or angry.

³ <https://www.customer-care.com/insights/2017-us-customer-rage-study/>

⁴ Customer Care Alliance and Center for Services Leadership. (2005). *Customer rage*. Alexandria, VA: Customer Care Alliance. Tempe, AZ: Center for Services Leadership at the W.P. Carey School of Business, University of Arizona.

CUSTOMER CARE ON THE PHONE



If you regularly provide care over the phone, here are 10 tips to help you get the information you need from callers and to provide them with a positive experience:

1. Since you are not face-to-face, the tone and quality of your voice is the most important measure of good customer care on the phone. Start with a warm, professional greeting that includes your organization's name, your name, and a request for how you can be of help.
2. Follow the number one tip of disc jockeys: smile while you talk. It's hard to sound monotone, abrupt, disinterested, or hurried when you are smiling. Even though the caller can't see you, they can "feel" your smile—and you'll probably feel better, too.
3. Listen closely to the caller to identify their needs, and resist the all-too-human temptation to interrupt or finish their sentences. If the caller is irate or distraught, let them vent.
4. Empathy can help defuse any stress you're hearing from the caller. Use the caller's name and indicate that you want to understand their problem and are sorry to hear of their situation.
5. As you gather information, take opportunities to repeat back what you believe you've heard. This technique will show the caller that they are being heard and treated with respect.
6. If you're having trouble getting the information you need to help the caller, try probing with a set of simple questions that stick to the "who," "what," "when," "where," "why," and "how."
7. If you can't fulfill the caller's direct request, be clear about what you CAN and CAN'T do. It may not be the solution hoped for, but they will likely appreciate your efforts to help.
8. Should you need to put a caller on hold, ask permission first. When you return to the call, address them by name. This illustrates that you respect their time.
9. If you are giving instructions or next steps to the caller, ask them to repeat those instructions back to you. A caller—particularly one who is feeling stressed—may not necessarily hear you correctly the first time.
10. As the conversation winds down, ask the caller if there's anything else you can help them with today. And, of course, it never hurts to say a simple "I'm glad you reached out."

HANDLING A CRISIS ON THE PHONE

Always follow your agency's protocol. If your agency does not have one, here are suggested steps:

- First, ask the caller to give you their phone number in case you get disconnected.
- If a caller threatens you, themselves, or someone else, take it seriously. If you believe you or anyone else is in immediate danger, tell your supervisor and call 911.
- If you can keep the caller on the line during a crisis or emergency, tell them that you would like to call 911. If possible, use three-way calling so all of you will be on the same line. If not, ask a nearby colleague to help you by calling 911 while you remain on the phone with the caller.
- Stay on the phone with the caller until help arrives.

So far, this module has focused on communicating with people who come to our programs, and providing the best possible services. With these skills as a foundation, we can be prepared to work collaboratively with program participants to address the issues that are causing them stress, and support their needs and goals.

UNDERSTANDING HOW PEOPLE RESPOND TO STRESS

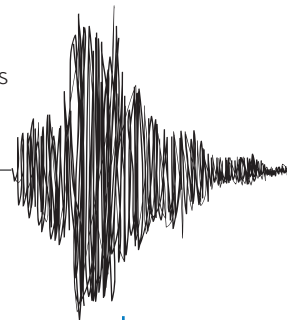
Everyone’s threshold for coping with stress is different; however, it is helpful to know what to look for when people are overwhelmed by stress. Sometimes there is an opportunity to assess someone’s particular needs and strengths around mental health.

Whatever the severity of contributing factors to a person’s stress is, it is helpful to be able to distinguish between temporary responses to stress that will resolve in time and with a little support, and those responses that require more intensive and immediate intervention to restore stability and a sense of hope.

Early intervention can make a big difference in recovery. The next part of this module will help you make those distinctions.

“The first goal of trauma recovery should and must be to improve your quality of life on a daily basis.”

—Rothschild, 2010⁵



SHORT-TERM RESPONSES TO SEVERELY STRESSFUL OR TRAUMATIC EVENTS

This section describes common responses following a single traumatic event, such as a crime, accident, or disaster. It is important to keep in mind that many of the people we serve have experienced repeated trauma and many layers of traumatic conditions, which can make the coping process much more complex.

Intense stress is a reality for many people in our world—for example, financial insecurity, access to healthcare, policy changes with negative impact, exposure to targeted violence and hate crimes, and other concerns that affect every aspect of a person’s life. Similar to when you toss a rock into the water and the ripples spread out until they touch the shore, everyone can be affected.

We all experience stress on many levels: physical, emotional, behavioral, spiritual, and cognitive (how our brains process information). **When something happens that causes severe distress, it is normal for the effects to last for months, as we learn to cope.** Coping effectively with adversity or pain often requires that we strike a balance between living with things that are beyond our ability to change, and funneling our energy to make the changes we can.

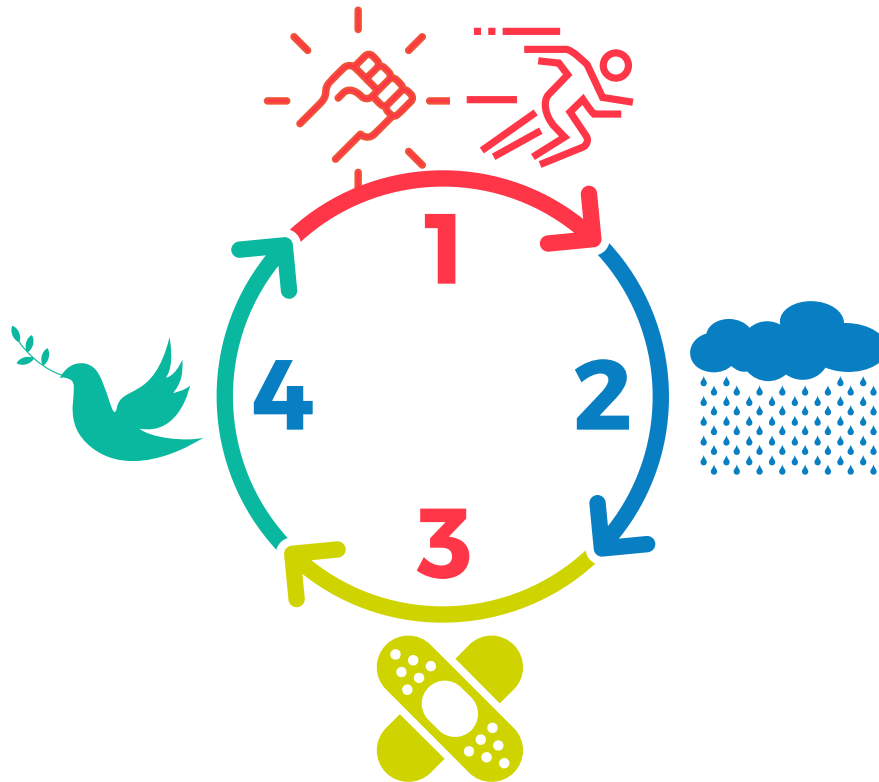
DEFINITION OF PSYCHOLOGICAL TRAUMA

“Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.”

—U.S. Substance Abuse and Mental Health Services Administration⁶

⁵ 8 Keys to Safe Trauma Recovery: Take-Charge Strategies to Empower Your Healing. Babette Rothschild. 2010. W.W. Norton, New York.
⁶ <https://store.samhsa.gov/shin/content/SMA14-4884/SMA14-4884.pdf>

People who experience a traumatic event often pass through four phases in the process of learning to cope. The healing process is not linear, and people may move back and forth across phases over time (especially when the person continues to experience other stressors or trauma). Reading through the list of these phases below, it probably won't be hard for you to imagine the faces and stories of the people you work with in your program.



- 1. Acute phase (minutes to hours or days).** When faced with a traumatic event, people develop a fight-or-flight response. People often describe their immediate emotional reaction to traumatic events as disbelief. During this phase, people often feel numb, irritable, or angry and may look for someone to blame. It is difficult for people in the acute phase to communicate with others and remember things.
- 2. Reaction phase (1–6 weeks).** During this phase, people may experience a delayed reaction to the trauma. Previously repressed or denied feelings may surface, making them feel overwhelmed and powerless. They may experience dreams and nightmares about the source of their stress, as well as anxiety, depression, restlessness, and insomnia. When people do not show signs of beginning to move out of the reaction phase within two months, or when symptoms continue to worsen, it may be time to consider getting professional mental health support.
- 3. Repair phase (1–6 months).** The difference between this phase and the reaction phase is that, while stress reactions continue, feelings are not as intense and overwhelming as before. People have begun to “repair” very strong and disturbing feelings. They now can manage their situation, take an interest in everyday life, and begin to plan their future.
- 4. Reorientation phase (approximately 6 months).** By this time, people are often more able to create their “new normal.” This doesn’t mean that all the pain and grief go away, but they become better able to tap into their resilience, and restore a sense of hope and connection with others.



WHEN TO ACTIVATE IMMEDIATE ADDITIONAL HELP

When faced with trauma, some people will have an easier time continuing to function than others. Difficulty functioning is not a sign of weakness, but a sign of humanity. Some people may be dazed and immobilized.

Others may become extremely emotional and seem unable to regulate their emotions. As helping professionals, we need to know what to look for, so we can make sure that people get immediate help when needed.

A program participant who appears agitated may need help feeling safe and heard before they are able to focus on a conversation with you. There are steps we can take to help someone who is frightened or anxious (later in this module, we will discuss defusing hostile or potentially dangerous situations with program participants). By focusing on the following two pages of questions, we can build the trust that the person may need to move forward.

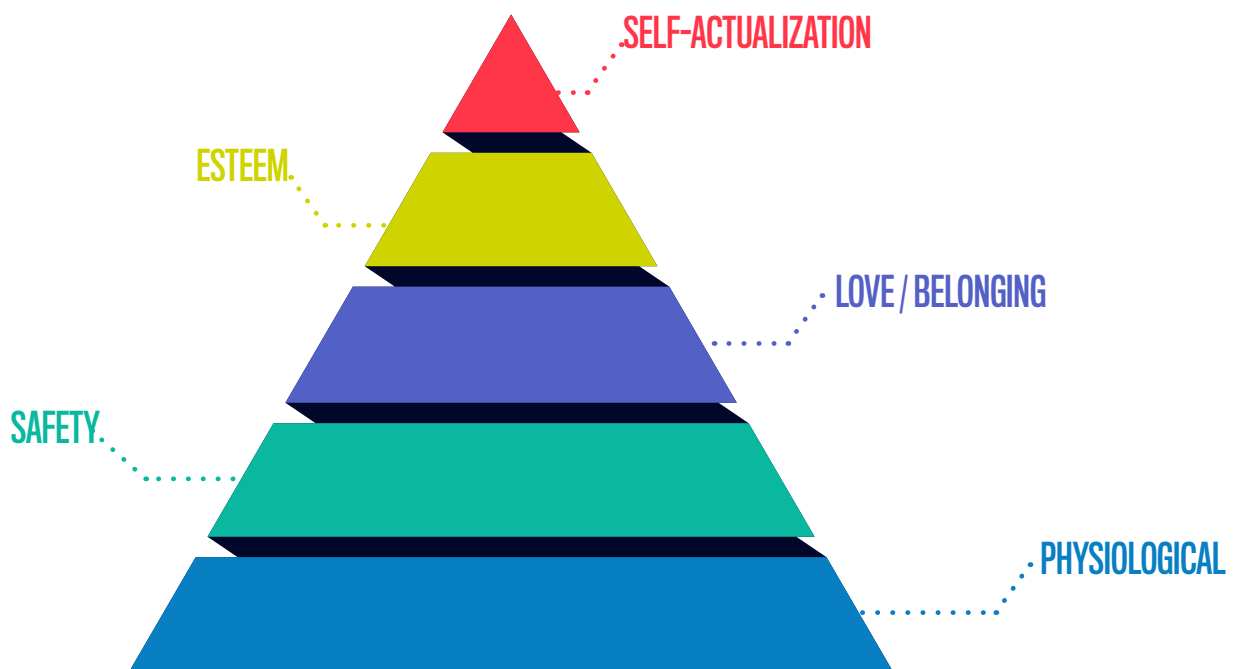
BEST PRACTICES FOR EFFECTIVE COMMUNICATION

- **Are you, yourself, feeling calm and present?**

If the other person can see that you are calm, it will help them to let their guard down, too. Your ability to be balanced in the face of their crisis will also make you better able to think and act effectively on their behalf.

- **Is the person you are speaking with safe in the world?**

For many program participants, safety may be a roof over their head, food and adequate clothing, or medical care and medication. If the person lacks any of these essential basics, you may be able to link them to necessary services. Maslow's "Hierarchy of Needs" is a human development theory that describes the building blocks that everyone needs (like physical and emotional safety, food and shelter, connections to others) in order to learn or make life changes.⁶



As you can see in the illustration, emotional well-being and the capacity to achieve personal goals are most strongly built upon a foundation of physical security and connectedness in important relationships. When those are insufficient for program participants, you may be able to add support for them in these areas through connections to additional services. Once basic needs are better met, you may find that you are able to support program participants to achieve additional personal goals.

- **Are you actively listening?**

Part of the way that people make sense of traumatic experiences is to tell their stories over and over. This is a normal human response. When you hear so many related stories of loss, it can be tempting to "tune out" the details and the pain that accompany the stories. In fact, this is a normal response to vicarious trauma. As you help yourself stay

⁶ <https://www.simplypsychology.org/maslow.html>

present with the survivor in the way that works for you, focus on showing the person that you are interested in how their experience has affected them. This can give the validation needed to keep hope alive.

- **Are you letting the program participant go at their own pace?**

When your waiting room is full or the lines for service are long, it may feel as though there simply is not time to let people talk. By being truthful and offering the person a choice, you can set the tone for a collaborative relationship (for example, an intake worker might say: “The time set aside for each meeting is 30 minutes. What do you think is most important that we focus on first?”). Try to determine up front if the person will need more time than expected, and let your colleagues know if you will need to make schedule adjustments or help connect the person to someone else.

- **Are you being honest with the person you are speaking to?**

Building trust requires that you are honest with program participants. While we often wish we could promise that “everything will be all right,” that is not something we can predict. Reassure the person that you are here to help, and provide them with accurate information. For example, a case manager might say, “You’re eligible for emergency assistance and we will help you apply. Unfortunately, many people find that this takes longer than expected, and I can work with you to make a plan for while you’re waiting.”

- **Are you reinforcing the positive steps the program participant has already taken?**

A person may feel defeated and desperate, but the fact that they have come to you shows that they have strength and resilience. It is important to acknowledge their painful feelings, while also taking time to emphasize the positive ways in which they already coped with their situation and have begun to move forward. It helps to be specific and to use the words that the person uses to describe their situation. For example, if someone says they feel like a failure, it can feel invalidating to say, “But you’re a survivor!” Instead, we might say something like, “It takes a lot of strength to get you and your family to our office when you’re feeling like a failure.”

- **Are you respectful of program participants’ feelings?**

People have a right to their own feelings, and your purpose is to help, not criticize. No one wants to be worried, upset, or depressed—they would stop feeling that way on their own if it were easy. You can show your respect with your patience, reassurance, encouragement, and support.

- **Are you sure they are hearing you?**

People who are anxious, depressed, and traumatized may have a difficult time remembering what you say, and you may need to repeat things several times and write down key information and next steps. You can also ask them to repeat any details to make certain they have heard you, and you can supply handouts with important information in the person’s preferred language.

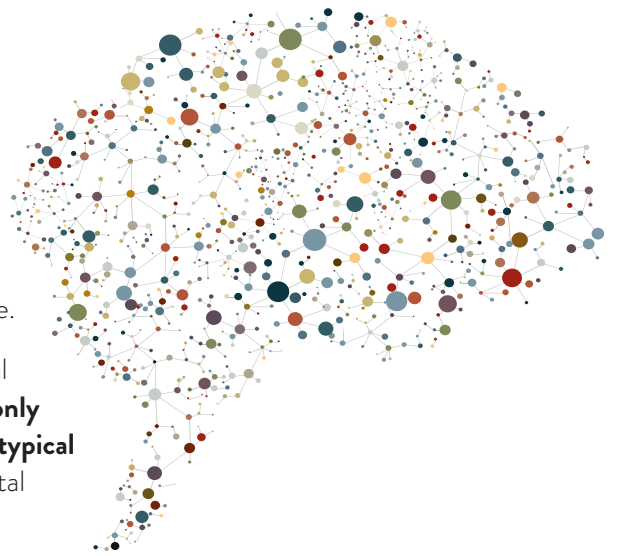
- **Are you playing the “superhero”?**

We all care deeply about our work, and the need is always great. But everyone has physical and emotional limitations. Just as people in crisis cannot always do everything they would like to do, neither can you. You can help others most when you have your own support systems and are clear about your limitations. It also helps to reach out to colleagues to share the burdens of your work and give important peer support.

A BRIEF LOOK AT COMMON MENTAL ILLNESSES

Many people who have a mental illness require social services to support their recovery. People living with a serious mental illness are more likely to be chronically unemployed, underemployed or otherwise living with economic insecurity. Approximately 40% of people experiencing homelessness have a mental health challenge.

A list of some of the most common mental illnesses and their typical symptoms follow. **These descriptions are included for information only and to help you determine whether or not a person is reacting in a typical way to stress.** There is no need for anyone other than a trained mental health professional to attempt to diagnose an individual who may be struggling with symptoms of mental illness.



An excellent source of information about mental illness and its treatment is the website of the National Institute of Mental Health (NIMH): <https://www.nimh.nih.gov/index.shtml>. In addition to web-based information, the NIMH website provides access to free publications about mental health topics that can be ordered or downloaded, such as fact sheets, brochures, booklets and other information: <https://www.nimh.nih.gov/health/publications/index.shtml>.

DEPRESSION

People with depression, a very common mood disorder, experience a number of emotional, physical and cognitive symptoms, including: down or depressed mood; loss of interest or pleasure in doing things that were formerly enjoyed; feelings of worthlessness, hopelessness or inappropriate guilt; changes in eating and sleeping patterns; fatigue; inability to concentrate; physical symptoms such as headaches, stomachaches, and unexplained aches and pains; and suicidal thoughts or behaviors.

ANXIETY

While anxiety is a normal response to usual stressors, such as when making an important decision or when managing a problem at work or in one's personal life, it usually goes away after a stressful event is over. However, some people may find that their anxiety is not relieved over time. Excessive anxiety is characterized by extreme worrying that interferes with a person's ability to work, learn, enjoy their relationships and otherwise live their lives as they normally would. In addition to worry, other symptoms of anxiety include fatigue; headaches; muscle tension; trembling; twitching; sweating; shortness of breath; and irritability. There are several different types of anxiety disorders; the most common type is generalized anxiety disorder.

BIPOLAR DISORDER

This condition used to be known as manic-depressive illness, and is characterized by extreme mood swings, with episodes of depression and episodes of mania, coupled with periods of calm mood and behavior. During manic phases, people living with bipolar disorder will experience expansive or irritable mood; inflated self-esteem; decreased need for sleep; increased energy; racing thoughts; feelings of invulnerability; poor judgment; risk-taking behavior; and difficulty recognizing that these feelings, thoughts and behaviors are unusual. In depressive phases, people living with bipolar disorder experience symptoms typical of depression as listed above. Both manic and depressive phases may last for weeks or months.

SCHIZOPHRENIA

This disorder affects people by causing thoughts that are fragmented and not in sync with reality. Typical symptoms may include delusions (fixed beliefs that are firmly maintained despite rational evidence of commonly accepted reality) and/or hallucinations (an experience of hearing, seeing, smelling or feeling something which does not exist in reality), along with disorganized speech and behavior, leaving the individual frightened, anxious and confused.



WHAT ABOUT SUICIDE?

Nonprofit organizations are often on the front lines of noticing and responding when someone is in crisis. It's important that all staff members know what to look for and how best to help. Preparation is key.

If you are concerned about someone's risk for suicide, always follow your agency's protocol. If your agency does not have one, here are suggested steps:

- If a person hints at or directly mentions thoughts of suicide, **immediate professional help is available by calling 1-888-NYC-WELL (1-888-692-9355).**
- **Stay with the person until a course of action is determined.**
- **If you believe there is immediate life-threatening danger to the program participant, you, or others nearby, call 911 immediately.**
- **Afterwards, create a follow up plan.** Discuss with all staff involved and, if applicable, the program participant's community.

The next pages provide suicide prevention tips from the National Suicide Prevention Lifeline <https://suicidepreventionlifeline.org/>

USE THE DO'S AND DON'Ts

Talking with and finding help for someone that may be suicidal can be difficult. Here are some tips that may help:

- Be direct. Talk openly and matter-of-factly about suicide.
- Be willing to listen. Allow expressions of feelings. Accept the feelings.
- Be non-judgmental. Don't debate whether suicide is right or wrong, or whether feelings are good or bad.
- Don't lecture on the value of life.
- Get involved. Become available. Show interest and support.
- Don't dare the person to do it.
- Don't act shocked. This will put distance between you.
- Don't be sworn to secrecy. Seek support.
- Offer hope that alternatives are available but do not offer easy reassurances.
- Take action. Remove means, like weapons or pills, or help the person to remove those means from their access, if possible.
- Get help from people or agencies specializing in crisis intervention and suicide prevention.

People having a crisis sometimes perceive their dilemma as inescapable and feel an utter loss of control. If you or someone you know are feeling this way, call NYC WELL at 1-888-NYC-WELL (1-888-692-9355).

These are some of the feelings and thoughts people experience in crisis:

- Can't stop the pain.
- Can't think clearly.
- Can't make decisions.
- Can't see any way out.
- Can't sleep, eat or work.
- Can't get out of depression.
- Can't make the sadness go away.
- Can't see a future without pain.
- Can't see themselves as worthwhile.
- Can't get someone's attention.
- Can't seem to get control.⁷

KNOW THE RISK FACTORS

Risk factors are characteristics that make it more likely that someone will consider, attempt, or die by suicide. They cannot cause or predict a suicide attempt, but they are important to be aware of so you can better assist someone who might be considering suicide.

- Mental disorders, particularly mood disorders, schizophrenia, anxiety disorders, and certain personality disorders.
- Alcohol and other substance use disorders.
- Hopelessness.
- Impulsive and/or aggressive tendencies.
- History of trauma or abuse.
- Major physical illnesses.

⁷ <https://suicidepreventionlifeline.org/help-someone-else/>

- Previous suicide attempt(s).
- Family history of suicide.
- Job or financial loss.
- Loss of relationship(s).
- Easy access to lethal means.
- Local clusters of suicide.
- Lack of social support and sense of isolation.
- Stigma associated with asking for help.
- Lack of healthcare, especially mental health and substance abuse treatment.
- Cultural and religious beliefs, such as the belief that suicide is a noble resolution of a personal dilemma.
- Exposure to others who have died by suicide (in real life or via the media and internet).

KNOW THE WARNING SIGNS

Some warning signs may help you determine if someone is at risk for suicide, especially if the behavior is new, has increased, or seems related to a painful event, loss, or change. If you or someone you know exhibits any of these, seek help by calling NYC WELL (1-888-692-9355):

- Talking about wanting to die or to kill themselves.
- Looking for a way to kill themselves, like searching online or buying a gun.
- Talking about feeling hopeless or having no reason to live.
- Talking about feeling trapped or in unbearable pain.
- Talking about being a burden to others.
- Increasing the use of alcohol or drugs.
- Acting anxious or agitated; behaving recklessly.
- Sleeping too little or too much.
- Withdrawing or isolating themselves.
- Showing rage or talking about seeking revenge.
- Extreme mood swings.⁸

HOW TO RECOMMEND PROFESSIONAL MENTAL HEALTH SUPPORT

Even with compassionate support, it will be hard for some people to return to their earlier levels of functioning after being in crisis. Program participants whose sadness, anger, fear, and anxiety are not responding to available help may need additional mental health support.

It may not be our job to make a mental health assessment or provide psychological counseling. But we can all look for signs of prolonged and excessive stress, such as when someone:

- Can't stop thinking about the trauma.
- Remains upset or fearful.
- Is unable to escape intense, ongoing, distressing feelings.
- Finds important relationships are suffering.
- Feels jumpy.

⁸ <https://suicidepreventionlifeline.org/how-we-can-all-prevent-suicide/>

- Has nightmares related to trauma.
- Is unable to enjoy life because of the trauma.
- Has symptoms that are interfering with usual activities.⁹

Mental health supports can come from many places. While some program participants may benefit from seeing a trained therapist or counselor, they might also find the support they need from a faith organization, a cultural organization, their family physician, or another community support. Many times, people are far more comfortable working through channels like these than meeting with a mental health professional.

There are times, however, when professional help is also needed. Suggesting mental health support—particularly from a mental health professional—is hard. A program participant might feel stigmatized and shamed by mental health issues, or they may believe that the need for mental health supports is a personal weakness. Nonprofit organizations’ providers can play an important role in helping to de-stigmatize mental health care and normalize getting treatment to help cope with the enormity of stress that can come with major life changes.

Any signs and symptoms of stress demonstrated over an extended period of weeks and months could mean that a program participant could benefit from mental health support. **We can normalize the experience of seeking help by letting program participants know that seeking mental health support is another positive step toward health and a better future.**

Here are some positive ways to approach the subject:

- **Talk about seeing a mental health professional when the person is not in crisis.**

Mentioning mental health services when the person is agitated may result in an argument. (Follow crisis protocols if the person is showing unsafe behavior toward themselves or others.)

- **Start the conversation with expressions of care.**

People are more likely to hear suggestions positively if we begin with compassion. Try something like, “You have so much to handle right now. I see that you’re in pain. I think it might help to find someone to continue to talk with about what you’ve been going through.”

- **Provide program participants with the information they need to get help.**

If the person is open to speaking with a counselor, they can receive the support and information they need by contacting NYC WELL (<https://nycwell.cityofnewyork.us/en/>), a free, confidential crisis and counseling referral service offered by the Vibrant Emotional Health.

NYC WELL can be accessed by calling 1-888-NYC-WELL (1-888-692-9355), texting WELL to 65173, or by pressing the CHAT button on the website. Translation services for languages other than English, Spanish, Mandarin and Cantonese is available immediately when requested, and people who are Deaf or hard of hearing can call 711 for relay service. NYC WELL is available 24 hours a day, 7 days a week. Callers to NYC WELL are connected to trained counselors who assess their situations and link them to the services they need.

Counselors are trained to offer referrals in any of these areas:

- Suicide prevention and crisis counseling.
- Peer support and short-term counseling via telephone, text and web.
- Assistance scheduling appointments or accessing other mental health and substance abuse services.
- Follow up to check that you have connected to care and it is working for you.

⁹ <https://www.mentalhealthfirstaid.org/id.org/>

It is important not to argue with the person if they say that they are not interested in seeking professional help.

We are all more likely to try something new if we make the decision on our own, instead of feeling pressured by someone else. Ensure that information is available for the program participant to access when they wish; for example, in posters or pamphlets displayed in the program. If we'll be seeing this person again, the discussion can be continued in the near future if they are still showing unresolved signs of prolonged stress.

DEFUSING A POTENTIALLY DANGEROUS SITUATION

Quite understandably, people whose lives have been turned upside down or made worse by circumstances outside of their control can feel frustrated and hopeless. Sometimes program participants can come across as verbally or physically aggressive.

When we encounter program participants who are expressing their anger and frustration in loud or disruptive ways, can take steps to help them feel heard and respected, and to bring down their level of agitation so that they can get the help they need.

“Rechanneled rage can be a powerful energy source.”¹⁰

—Dr. Kenneth Hardy¹⁰

THE CHALLENGE: STAY CENTERED

Our own behavior and attitude toward a program participant who behaves in a hostile or threatening manner can significantly affect whether a situation becomes more or less threatening. When confronted by an agitated person, it's important to realize that we are probably not the cause of this anger, even though we may feel like the target. It can be easier said than done, but “try not to take the behavior personally” is often the most important advice we can follow.

We all have bad days, too, and a bad day gets worse when encountering a hostile program participant. Sometimes we might want to respond in kind, but **showing anger or annoyance may increase the chances of an argument or a physical confrontation.**

The challenge, then, is to stay calm. We can manage our own “fight, flight, or freeze” stress response by using the stress management tools that work best for us personally—for example, a few deep breaths, a few silent words of encouragement, pressing our feet into the floor. If we are really upset at what the program participant is doing, it is good to take a brief “timeout” when that is possible, to bring emotions under control. If we are not able to respond to the client in a professional manner, it may be best to ask a colleague to take over.

Our responsibility is to model respectful behavior, including what is said and how it is said.

¹⁰ (2013) Healing the Hidden Wounds of Racial Trauma, pp. 24-28 in Reclaiming Children and Youth.
<https://static1.squarespace.com/static/545cdfcfe4b0a64725b9f65a/t/54da3451e4b0ac9bd1d1cd30/1423586385564/Healing.pdf>



VOICE AND LANGUAGE TO DEFUSE A TOUGH SITUATION

SPEAK FIRST.

You can probably tell if a person is angry, before they say the first word, by the way they approach you. A friendly and genuine welcome is an effective way to begin to defuse anger. Something as simple as a polite, “What can I do to make your day a little easier?” can set a calming and respectful tone for your interaction.

MODEL BRINGING THE VOLUME DOWN.

People who are agitated tend to talk quickly and loudly, which causes other people to speak faster and raise their voices. Even though your impulse may be to try to control the situation by speaking even more quickly and loudly than the other person, it is important to remain calm and professional. Speaking calmly and softly can help send a message that everyone is safe in this moment. To avoid sounding condescending to the person, you can start by matching the person’s volume and tone, and gradually lower it until you are speaking slowly and softly. You may notice that the other person responds by lowering their voice, too.

WATCH YOUR TONE.

It is critical to be mindful of the tone of voice we are using when speaking to program participants who are angry or in distress. How you say something is as important as what you are saying. No matter how supportive your words, if they are not conveyed in a tone that reflects empathy and concern, program participants may feel judged or blamed, or may feel that you are being dismissive or condescending.

KEEP IT SIMPLE.

People who are highly stressed may have a tough time understanding what you’re saying, and their confusion can increase their agitation. Giving simple, clear information will help them better understand you. It can also help to ask them to repeat what you have said. This way, you can be certain that they have understood the information, as well as what steps to take next. This may feel like an “extra step” that requires as much patience as you can gather, but it can help keep a stressful situation from escalating.

LISTEN WITH EMPATHY

People who are under severe stress are not always able to think clearly and rationally—in fact, this is part of the human stress response that has kept us alive since the beginning of time. Our brains simply cannot be in “fight or flight” mode and in “thinking and learning” mode at the same time. **When we are working with people who seem overwhelmed by distressing emotions—worried, hopeless, frustrated, angry, hostile—the most helpful approach is to acknowledge and validate their feelings. When we feel heard and understood, our brains and bodies get the message that it’s okay to let our guard down.**

Understanding the problem requires that we use empathic listening skills.

Increasingly, the importance of training in this technique is being emphasized for all kinds of first responders, including emergency medical technicians and police officers, in order to prevent highly emotional people or situations from becoming more dangerous.

Empathy is the ability to understand a problem from another person’s viewpoint. Listening is critical because what a person says—and how they say it—helps the listener to better understand the reason for this heightened emotional state. Listening also gives time to figure out whether the person needs immediate emergency response, or other less immediate crisis intervention services such as **NYC WELL (1-888-NYC-WELL or 1-888-692-9355)** or mobile crisis services (which can be accessed through NYC WELL).

Empathic listening occurs when we give a person your undivided and non-judgmental attention. Empathic listening is not about trying to analyze a problem or even find a solution. Instead, when we listen with empathy, our only task is to let the other person speak and to focus on their feelings.

An important part of empathic listening is to reflect to the other person what we think they said. For example, we might say, “Let me make sure that I understand what you just said, which is that you need/want...” This step is important because it shows the other person that we want to understand. If we didn’t hear correctly or completely, the other person now has an invitation to provide clarifying information. In either case, we are communicating a genuine interest in the other person, and the desire to keep the lines of communication open.

An agitated person may feel relieved to speak with someone who is just willing to listen without judgment, and it may be all that’s needed to defuse a tough situation in the moment. From here, it’s possible to start looking for solutions together.

BODY LANGUAGE CAN SPEAK VOLUMES

Body language is a non-verbal communication that we all respond to, whether we are aware of it or not. The way we greet a program participant, stand at a counter, or sit at a desk has meaning to the other person. Every time we work with a program participant, we have an opportunity to show undivided attention.

LET
PROGRAM
PARTICIPANTS
SEE THAT
YOU CARE

Body language can speak volumes, and it doesn’t take much to show someone that you’re really there to help.

- Face the person when they speak.
- Look at them and not at paperwork or the computer. If you need to look at something or to step away, tell them the reason.
- Show your engagement through physical gestures like nodding your head.

Many, if not most, of the program participants we work with have had experiences in service systems where there is little respect shown to them. Body language is a powerful way to convey respect and build trust. Other small gestures, like turning off a phone's volume or nodding in acknowledgement as people tell their stories, also help.



CREATING A SAFE WORKPLACE

The strategies described above can de-escalate tensions in many, if not most, instances, but **there may be times that efforts to defuse a threatening situation do not work. It is important to plan for such times, even if the plans are never needed.**

Every organization should have an overall workplace safety plan that includes steps for defusing escalated program participants, or responding to a person who may be having a mental health crisis. Although safety plans will differ from organization to organization because of differences in staffing and unique features of the site, all safety plans should specify protocols for:

- When and how staff members should call for outside help.
- Defusing threatening situations.
- Debriefing after the crisis is over to share and learn from staff members' experiences.

Bear in mind that your workplace safety plan is only as good as team members' familiarity with and understanding of it. Making sure that all staff members are trained and comfortable implementing the plan is crucial for its success. The opportunity to debrief after a crisis is particularly important in helping to reduce stress among staff members who are either directly or indirectly affected by the crisis.

While all organizations benefit from creating a workplace safety plan—and regularly revisiting existing plans—**this module specifically addresses skills that individual employees need to defuse a threatening situation, as well as guidance about how to get immediate help for a person in crisis and how to make a mental health referral.**



MODULE
THREE CARING FOR
OURSELVES

A woman with dark hair, wearing a light-colored jacket, is seen from the chest up, looking out over a city skyline from a boat. The city buildings are in the background, and the water is in the foreground. The text "MODULE THREE CARING FOR OURSELVES" is overlaid on the image.

MODULE THREE

CARING FOR OURSELVES

“Caring for myself
is not
self-indulgence,
it is self
preservation.¹”

—Audre Lorde
Poet, Author,
Civil Rights Activist

When your job is to help or support others, it is especially important to take care of yourself. For many of us, that’s easier said than done when we’re balancing multiple responsibilities at work, at home, and in our communities. Yet **we know that we are better able to meet the needs of others when we are not stressed out** and feeling tired, depressed, angry, or resentful. Self-care looks different for different people, but there is one thing that is helpful for all of us to remember—**sometimes, it does need to be all about you.**

As nonprofit professionals, we deal with a combination of stressors. Many of these stressors could be part of any kind of workplace—expectations that seem unrealistic, highly distressed or rude customers, long commutes. Some workplace stressors are especially common in nonprofit organizations due to the realities of inadequate funding and funding uncertainties. **Helping professionals also face a workplace hazard that is unique to our profession—the stress that comes from caring about others who have experienced psychological trauma** (defined as events or circumstances that are harmful or life-threatening, and have lasting effects on a person’s well-being).

Creating healthy working environments is a collective effort, and it’s important for organizational leaders, decision-makers, and funders to remember that employee self-care alone won’t solve problems with workloads, lack of job security, exposure to trauma, and other stressors. But **encouraging and modeling self-care so that self-care can be an on-the-job priority, not an “extra” that people need to do outside of work, can make an enormous difference for employees and for the program participants that they help.**

This module looks at personal stress for helping professionals—how to recognize it, respond to it, and manage it.

¹ Lorde, Audre. (1988). *A Burst of Light: Essays*. Ithaca, N.Y. Firebrand Books.

STRESS

SYMPTOMS

DO YOU
RECOGNIZE
ANY OF THESE
SYMPTOMS
OF STRESS
IN YOURSELF?

Take a look at the signs and symptoms of stress on this page.

Do you see yourself in this list? If so, it may be time to try some proven stress reduction strategies.

Check in with yourself. It's healthy to acknowledge what you can and can't get done and appreciate what you've accomplished.

If you feel like you are having a hard time staying in balance, the ideas, exercises, and self-care plan in this module can help you better manage your stress.

DO YOU FEEL...

- Anxious or full of worry?
- Unable to concentrate?
- Achy or sick more than usual?
- Sad or generally unhappy?
- Overwhelmed?
- Irritable or short tempered?
- Lonely or alone?

ARE YOU HAVING TROUBLE...

- Concentrating or remembering things?
- Relaxing?
- Getting your work done?
- Making good decisions?

HAVE YOU...

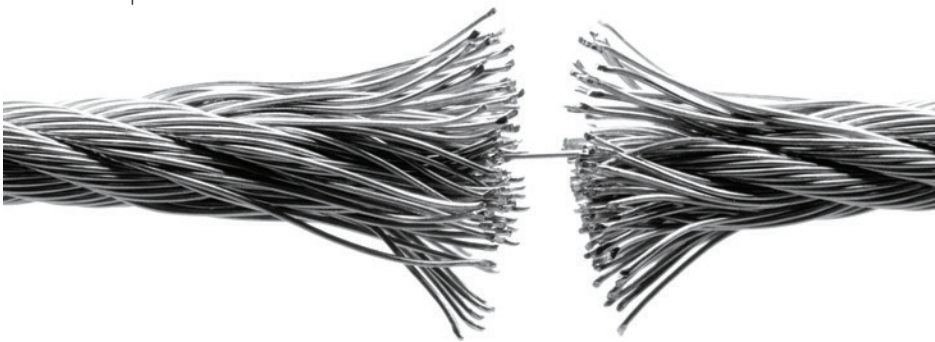
- Lost your sex drive?
- Used alcohol, cigarettes or drugs to "feel better"?
- Been sleeping too much or too little?
- Been eating too much or too little?
- Isolated yourself from friends and family?
- Neglected responsibilities?

These can all be signs and symptoms of stress overload. If you think stress overload might be affecting your life, there's something you can do about it.

LEARNING ABOUT STRESS

Stress is the way that we react physically and emotionally to changes around us. In situations that we experience as difficult, threatening, or unmanageable, our brains and bodies get the message that we could be in danger. This triggers the “fight or flight” response that has helped humans survive since the beginning of time, and includes the following physiological responses:

- Nervous system releases stress hormones
- Heartbeat quickens
- Muscles tighten
- Blood pressure rises
- Breath quickens



Stress is normal. Some stress can be a good thing. It keeps us alert and protects us in times of danger or when we need to act or think quickly. After a stressful situation has passed, the amount of time it takes for the stress hormones to leave our system will vary, but for most people it takes anywhere from 20 to 90 minutes for the body to get the message that it is out of immediate danger. Then, the brain can get out of “fight or flight” mode and get back to the “learning and thinking” mode, where we can make plans, gain perspective, comfort ourselves, or seek help.

Long-term stress takes a toll on our health. When we experience heightened levels of stress for prolonged periods of time, stress can be harmful and interfere with our ability to cope. The nervous system stays on alert, and continues to pump out extra stress hormones over an extended period. This can wear out the body’s reserves, leave a person feeling depleted or overwhelmed, weaken the body’s immune system, and cause other problems. Protracted stress may become natural to us, and we may not notice that our bodies are operating in “stress mode”.

Trauma is extreme stress. It is safe to say that all human beings experience stress at some point. It is also very common to experience traumatic stress; recent studies tell us that more than 70 percent of adults in the U.S. have survived events or conditions that could be considered traumatic.² Stress becomes “trauma” when an event, multiple events, or ongoing circumstances take away our sense of control and make us fear for our lives, physical safety,

TRAUMA, HEALTH AND HEALING

UNDERSTANDING ACEs

WHAT ARE ACEs?

“ACEs” stands for *Adverse Childhood Experiences*, and is a term developed by public health researchers who wanted to understand the impact of childhood traumatic stress on adults’ health. ACEs research has shown that most adults in the U.S. have experienced at least one traumatic event or series of events during childhood, such as child abuse, sexual assault, witnessing violence in the home or community, incarceration of a parent, a parent’s drug or alcohol abuse, or death of a loved one. Enduring systemic conditions such as racism, being targeted or displaced because of one’s identity, and an ongoing scarcity of financial or material resources and necessary supports are also traumatic. Natural or human-caused disasters such as floods, earthquakes, and war may also be sources of trauma.

and/or emotional safety. The good news is that today, more and more people, communities, and organizations are working together to reduce the frequency of trauma, and to create safety and healing for trauma survivors.²

So, the bottom line is...

Stress can affect every part of our lives:

- **How we think.**

Examples: trouble concentrating, racing thoughts

- **How we feel emotionally.**

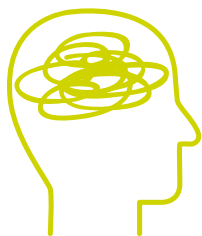
Examples: feeling anxious, edgy

- **How we feel physically.**

Examples: body aches, headaches

- **How we interact socially.**

Examples: quick temper, withdrawing and isolating from others



TRAUMA, HEALTH AND HEALING

UNDERSTANDING ACEs

WHAT DO ACEs MEAN FOR OUR HEALTH?

The more ACEs we experienced as children, the more likely we are to experience chronic health problems as adults such as heart disease, diabetes, cancer, addiction, and depression. This is because of the long term effects of stress overload. The body and brain's stress response—which has kept humans alive since the beginning of time—literally becomes toxic when the body and brain can't stop being in high-alert mode.

However, **with the right supports over time, anyone at any age can heal.** We can't change what's happened to us, but when we are able to feel physically and emotionally safe, our brains and bodies can relax enough to learn new techniques for managing stress. This is known as **resilience.**

Visit <https://acestoohigh.com/> for more information and resources.

²National Council for Behavioral Health <https://www.thenationalcouncil.org/wp-content/uploads/2012/11/Trauma-Infographic-Print.pdf>



STRESS VS BURNOUT

What are some of the ways that stress affects you?
How do you respond to stress?

If you feel like the stressors in your life have left you completely worn out, you may be experiencing burnout.

Burnout is a state of emotional and physical exhaustion caused by excessive and prolonged stress. Burnout reduces your productivity, saps your energy and leaves you feeling hopeless, cynical, and maybe even a little resentful.

You may be on the road to burnout if:

- Every day is a bad day.
- Caring about your work life seems like a total waste of energy.
- You're exhausted all of the time.
- The majority of your day is spent on tasks that you either find boring or overwhelming.
- You feel like nothing you do makes a difference.
- You feel like nothing you do is appreciated.

OVERVIEW OF COMMON RESPONSES TO STRESS VS. COMMON RESPONSES TO BURNOUT

| STRESS | BURNOUT |
|-----------------------------------|----------------------------|
| OVER ENGAGEMENT | DISENGAGEMENT |
| EMOTIONS ARE OVERACTIVE | EMOTIONS ARE BLUNTED |
| FEEL SENSE OF URGENCY/HYPERACTIVE | FEEL HELPLESS AND HOPELESS |
| HAVE LITTLE ENERGY | HAVE LITTLE MOTIVATION |

The unhappiness and detachment burnout causes can threaten your job, your relationships, and your health—**but you can recover from burnout!**

If you recognize the signs and symptoms of burnout in its early stages, simple stress management strategies may be enough to solve the problem. In the later stages of burnout, recovery may take more time and effort, but you can still regain your balance by reassessing your priorities, making time for yourself, and seeking support.

IS IT WORKPLACE STRESS, BURNOUT, OR... VICARIOUS TRAUMA?

Stress and burnout can happen in any profession and any kind of workplace, especially when resources are limited, change happens frequently and suddenly, and workloads are high. This describes a lot of nonprofit organizations and human service departments!

But, imagine for a moment that your organization was able to offer terrific salaries, unlimited time off, no paperwork, and a spa-like office... Do you think you'd still feel stressed? If so, you might be experiencing **vicarious trauma**.

Vicarious trauma happens when we bear witness to and carry the stories of trauma with us—including images, sounds, and resonant details—we have heard, which then come to inform our worldview.”³ —The Joyful Heart Foundation

In other words, vicarious trauma is an often experienced workplace hazard for those of us who work in the helping professions. Many of our program participants are in crisis and/or are living with the long-term effects of trauma (whether the program is aware of it or not). One of the most important strengths a helping professional can have—empathizing with the people we work with—is the very thing that makes us sensitive to their pain.

Vicarious trauma is experienced differently by different people, but some of the ways that it can show up include:

- Learning about the traumatic experiences and circumstances of program participants and not being able to get disturbing stories or images out of your head.
- Identifying closely with program participants and having a hard time maintaining relationships in your own personal life.
- A change in world view where it feels impossible to be hopeful.

Vicarious trauma can't always be prevented, but it can be managed!

Awareness is the first step. When we're not feeling well emotionally or physically, it can be helpful to think about what could be causing it—stress overload, burnout, vicarious trauma, our own personal trauma history, or a combination. This can help us try the techniques or get the help that will make a difference.

LEARNING HOW TO REDUCE STRESS

Letting go of stress is easier said than done. But, just like you can learn other skills, **you can learn techniques that help you relax.**

Give yourself the gift of time. These days, it may feel as though every minute in the day is “scheduled” and there is no time to catch your breath. Give yourself a break. Identify activities that you enjoy—and make time for yourself to enjoy them.

VICARIOUS RESILIENCE

We can experience both vicarious trauma and vicarious resilience. Many helping professionals say that their work has helped them learn about the amazing human ability to cope and heal, and has supported them in having a more hopeful outlook on life. This doesn't mean ignoring pain and injustice, but it does mean knowing that you are not alone and that you are making a difference.⁴

³ <http://www.joyfulheartfoundation.org/learn/vicarious-trauma>

⁴ Hernandez, P., Gangsei, D. and Engstrom, D. (2007). Vicarious Resilience: A New Concept in Work with Those Who Survive Trauma. *Family Process*, 46: 229–241.

Keep yourself active with a little exercise. For a lot of us, exercise consists of running after the bus as it pulls away. But exercise tones more than our bodies. It also improves our mood, reduces anxiety, eases stress, and gives us a sense of control over our bodies and our lives. The reason lies in our hormones and brains. Virtually any form of exercise decreases hormones that cause stress while increasing feel-good neurotransmitters called endorphins.

You don't have to exhaust yourself to feel the benefits of exercise and it doesn't have to cost much, either—walking is free! New York City's Parks and Recreation Department also offers low-cost memberships to recreation centers: [https://www.nycgovparks.org/facilities/recreation centers](https://www.nycgovparks.org/facilities/recreation-centers)

Build Resilience. There are many factors that influence our ability to tolerate stress and to bounce back in the face of challenge or adversity. Some of these factors include:

- **Support Networks**

Reach out to family and friends and re-connect.

- **Sense of Control**

Having confidence in yourself and in your ability to confront challenges helps you stay cool when the heat is on.

- **Attitude & Outlook**

Your ability to stay optimistic, embrace challenges, keep a sense of humor, and/or believe in a higher power or purpose will help you stay positive during times of distress.

- **Ability to Regulate Your Emotions**

Get to know yourself. How do you respond when you are distressed? How do you cope?

Knowing how to calm and soothe yourself is a valuable tool.

- **Knowledge & Preparation**

If you anticipate being confronted by a stressful situation, try to prepare yourself for it. How much you know about a stressful situation can help you when you are in distress.

Building emotional resilience will help us to remain focused, flexible, and positive in difficult times as well as good.

RELAXATION TECHNIQUES

These techniques can help you feel less stressed because they bring your mind and body together in harmony.

DEEP BREATHING

This technique focuses on breathing slowly and regularly, which creates the physiological conditions that allow the mind to let go of all other thoughts and just relax.

1. Sit back in your chair and slowly relax your body.
2. Begin by slowly inhaling through your nose. Fill the lower part of your chest first, then the middle and top parts of your chest and lungs. Do this slowly, over 8 to 10 seconds.
3. Hold your breath for a second or two.
4. Quietly and easily relax and let the air out.
5. Wait a few seconds, and then repeat this cycle. If you find yourself getting dizzy, you are overdoing it. Slow down.

Deep breathing is an excellent way to remove your stress and can be performed at work, on the subway, or anywhere you find yourself needing to focus or just take it easy on yourself.



GUIDED IMAGERY

The goal of this exercise is to help you relax by imagining a place where you feel at peace. Your body will follow (i.e., your muscles should relax), creating mind-body harmony and relaxation.

1. Sit or lie back with your eyes closed.
2. Imagine a favorite, peaceful place, such as a favorite chair, a quiet park, or the beach. Any place that you find relaxing will do.
3. Imagine you are in that place. See and feel your surroundings. For example, if your place is the park, hear the sounds of birds chirping, smell the fresh-cut grass, and feel the warmth of the sun on your back and the breeze on your skin. Relax and enjoy it.

Return to this place any time you need to relax.

There are a number of websites and apps for guided imagery and mindfulness. One site to start with is <https://www.mindful.org/about-mindful/>.

RELAXATION TECHNIQUES

These techniques can help you feel less stressed because they bring your mind and body together in harmony.

PROGRESSIVE MUSCLE RELAXATION

This technique helps you to reduce tension in your body and mind together.

1. Sit (or lie) quietly. Close your eyes.
2. Pay attention to your feet. Sense their weight. Consciously relax them by releasing the tension in your feet and letting them sink into the floor.
3. Repeat these steps—feel, sense, relax—as you move up your body, focusing on one part at a time. Continue with your toes, ankles, knees, upper legs, and thighs. (To promote sleep, feel the tension slipping from your body parts and sinking into the bed.)
4. Notice your buttocks. Sense their weight. Consciously relax them by releasing tension and letting them sink into your chair.
5. Focus on your abdomen and chest. Sense your breathing. Consciously will them to relax. Deepen your breathing slightly.
6. Pay attention to your hands. Sense their weight. Consciously relax them by releasing the tension in your hands and letting them sink into your chair.
7. Continue with your upper arms, shoulders, neck, and head.
8. Focus on your mouth and jaw. Consciously relax them. Pay particular attention to your jaw muscles and unclench them if you need to.
9. Pay attention to your eyes. Sense if there is tension in your eyes. Sense if you are forcibly closing your eyelids. Consciously relax your eyelids and feel the tension slide off the eyes.
10. Notice your face and cheeks. Consciously relax them and feel the tension slide off.
11. Mentally scan your body. If you find any place that is still tense, consciously relax that place.

Progressive relaxation is a very effective way to help you unwind at the end of a long day and helps many people fall into a restful sleep.



SELF-MASSAGE

This simple self-massage technique will help release tense muscles:

- Place both hands on your shoulders and neck.
- Squeeze with your fingers and palms.
- Rub vigorously, keeping shoulders relaxed.
- Wrap one hand around the other forearm.
- Squeeze the muscles with thumb and fingers.
- Move up and down from your elbow to fingertips and back again.
- Repeat with other arm.

RELAXATION TECHNIQUES

These techniques can help you feel less stressed because they bring your mind and body together in harmony.

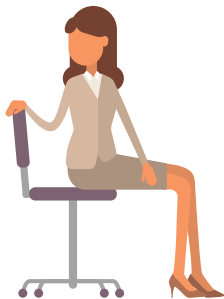
YOGA AT YOUR DESK

Yoga stretches keep you alert during the workday and help you to release stress.



ARM STRETCH

1. Interlock your fingers and extend your arms outward, straight in front of your shoulders. Your palms should be facing outward.
 2. Slowly raise your hands overhead, stretching all the way from the waist. Work on straightening your elbows.
 3. Hold for 30 to 45 seconds. Relax and try again.
-



CHAIR TWIST

1. Sit on the edge of your chair, sideways, with your left side facing the chair back.
 2. Throughout the pose, keep your feet and knees together and even.
 3. Wrap your hands around the back of your chair.
 4. Inhale while straightening your spine.
 5. As you exhale, twist toward the back of the chair, twisting from the very bottom of your spine, pushing with your left hand, and pulling with your right hand.
 6. Repeat the inhalation/straighten and exhalation/twist series several times.
 7. Release and switch sides.
-



CHAIR LOWER BACK STRETCH

1. Sit in your chair and separate your legs so they are wider than hip-distance apart.
2. Bend forward at your hips and allow your entire body to relax. You can round your back. Drop your head and completely relax your neck.
3. If you are not completely comfortable, try putting a rolled blanket or towel at your hips, then lean over again.
4. Hold this pose as long as you like, allowing each exhalation to relax your body and mind a little more.
5. Sit up on an inhalation, pause for a few moments, and then try again.

SELF-CARE

ACTION PLAN EXERCISE

Fill out the self-care assessment checklist by putting a number from 1-5 in the checkboxes next to each item.

1 = FREQUENTLY

2 = OCCASIONALLY

3 = SOMETIMES

4 = RARELY

5 = NEVER

Self-care, like the term suggests, is what we do to take care of ourselves.

When we're stressed out or feel as though there are too many things to do in our lives, many of us stop paying attention to the things that might make us feel better. We stop being engaged in our own lives and well-being.

As you consider your own stress levels, it's worth taking a minute to see how well you're taking care yourself right now. It might help you decide how to take care of yourself going forward.

PHYSICAL SELF-CARE

- Eat regularly (i.e., breakfast, lunch, and dinner)
- Eat healthy foods
- Avoid use or misuse of tobacco and alcohol
- Maintain a healthy weight
- Exercise regularly
- Take time off when sick
- Dance, swim, walk, run, or do some other physical activity that I enjoy
- Get enough sleep
- Wear comfortable clothes
- Make time away from telephones
- Avoid or limit time in places where the noise is excessive

PSYCHOLOGICAL SELF-CARE

- Make time for self-reflection (i.e., think about my values, experiences, and future plans)
- Engage in personal psychotherapy (i.e., think about who I am, what makes me behave or think the way I do, and what I might change to be the person I want to be)
- Write in a journal
- Read books or magazines that are unrelated to work
- Do something in which I am not an expert or the person in charge
- Let others know what I need and want to feel happy or secure
- Let others take care of me occasionally
- Say "no" to extra responsibilities when I already have enough
- Try new things

SELF-CARE

ACTION PLAN EXERCISE (continued)

Fill out the self-care assessment checklist by putting a number from 1-5 in the checkboxes next to each item.

1 = FREQUENTLY

2 = OCCASIONALLY

3 = SOMETIMES

4 = RARELY

5 = NEVER

EMOTIONAL SELF-CARE

- Spend quality time with people whose company I enjoy
- Maintain contact with people I value
- Treat myself with love and respect by reflecting on my good qualities and accepting that I can't be perfect
- Take time for comforting activities, people, relationships, and places
- Allow myself to feel and express emotions (i.e., laugh, cry)

SPIRITUAL SELF-CARE

- Spend time with nature
- Participate in a spiritual community
- Be open to inspiration
- Cherish my own optimism and hope
- Value the non-material aspects of life
- Cultivate my ability to identify what is meaningful and its place in my personal life
- Meditate/pray
- Support causes I believe in (i.e., by volunteering)

If you filled in most boxes with 1 or 2, congratulations! You are taking good care of yourself, something that will fortify you as you take care of others.

If you filled in most boxes with 3, 4, or 5, you probably are approaching stress overload and may need to find a healthier balance between your needs and those of everyone around you.

The next exercise will allow you to commit to taking care of yourself and reduce your stress. **Based on the results of your self-care assessment, make a list of activities that you can do that will help reduce your stress.** Try to make the activities as specific as you possibly can. For example, if you had a score of 3, 4, or 5 in “Eat healthy foods,” you could modify that activity to be “eat one piece of fruit at lunch each day,” to make it as clear and actionable as possible.

Adapted from Caring for Children Who Have Experienced Trauma: A Workshop for Resource Parents, developed by the National Child Traumatic Stress Network.

⁵ http://nctsn.org/nctsn_assets/pdfs/rpc/RPC_ParticipantHandbook_FINAL.pdf

SELF-CARE ACTION PLAN

Self-care means that you find time for yourself and the activities that will keep you healthy and in balance as you face the demands of work, home, and life in general.

Refer back to your self-care assessment. Look at the areas where you scored a 3 or above. Where can you fit activities that are important to you into your schedule?

Consider adding activities from all the areas in the self-care assessment: physical, psychological, emotional, and spiritual self-care.

From now on, I'll make time to take care of myself by doing the following at least...

ONCE A DAY

ONCE A WEEK

ONCE A MONTH

WHENEVER I NEED IT!

If you continue to struggle with stress, anxiety, or sadness, you may appreciate talking with a professional.

Reaching out to NYC WELL will link you to a trained counselor, who can help you get the help you need, available 24 hours a day, 7 days a week.

NYC-WELL (<https://nycwell.cityofnewyork.us/en/>) **is a free, confidential crisis and counseling referral service offered by the Vibrant Emotional Health. It can be accessed by calling 1-888-NYC-WELL (1-888-692-9355), texting WELL to 65173, or by pressing the CHAT button on the website.** A translation service for languages other than English is available immediately when requested, and people who are Deaf or hard of hearing can call 711 for relay service.

Counselors are trained to offer referrals in any of these areas:

- Suicide prevention and crisis counseling.
- Peer support and short-term counseling via telephone, text and web.
- Assistance scheduling appointments or accessing other mental health services.
- Follow up to check that you have connected to care and it is working for you.



MODULE FOUR

WORKING
ACROSS THE
LIFE SPAN



MODULE FOUR

WORKING ACROSS THE LIFESPAN

Nonprofit organizations are often called upon to support whole families and communities, from newborns to older adults. Even when our programs are designed to serve a particular age group or population, we may learn about needs or issues involving other individuals in our clients' lives. In times of stress and uncertainty, all members of a family, extended family, and community can be affected.

This section highlights some of the effects of severe stress and uncertainty on populations on either end of the life cycle, children and older adults, as well as ways organizations can help meet their special needs.

THE SPECIAL NEEDS OF CHILDREN

When parents are worried, stressed, or in crisis, tension can mount and spill over into every other area of life. Severe stress and parents' past or present trauma can take a toll on the child-parent relationship and child development.

The Adverse Childhood Experience Study (ACES) found that two-thirds of adults report having experienced traumatic situations during childhood—and that the more childhood traumatic experiences a person has had, the more likelihood they will have physical and mental health problems as an adult. There is growing awareness that by providing intervention and support across the lifespan, childhood trauma—including abuse—can be prevented.¹

As nonprofit professionals, we might work in organizations that serve children directly, or that serve adults who bring their children with them to the program. We may have seen child-parent relationships that are concerning—particularly in families who are facing great stress. This may include parents appearing overwhelmed, criticizing their children more harshly than usual or complaining about them to others, or making demands on the child that are beyond their developmental stage.

There will likely be times in our careers when we may witness or suspect child abuse and neglect. Most staff and volunteer roles in human service organizations are considered “mandated reporters.” **This means we are required to report suspected abuse or neglect to the New York State Central Register of Child Abuse and Maltreatment Hotline, (1-800-342-3720)** so that the situation can be assessed, investigated if necessary, and appropriate support and safety measures taken. **It's important that we know our organization's policies and procedures for what to do and who to notify when there are concerns about child abuse or neglect.**

SPECIAL REQUIREMENTS FOR REPORTING SUSPECTED CHILD ABUSE

While everyone is encouraged to report suspected child abuse or maltreatment, some people are mandated to report it in New York State. Mandated reporters come from a cross-section of professions that include:

- All health care providers
- Any officer of the courts
- Mental health professionals
- School officials and staff
- Substance abuse counselors
- Daycare providers
- Social service workers
- Childcare workers
- Law enforcement officials
- Foster care workers

¹ <https://acestoohigh.com/aces-101/>

When calling a hotline to report concerns about suspected cases of abuse or neglect, we are not required to prove that the abuse or neglect has happened. As professionals, when we make a report and during an investigation, we will generally be asked to provide whatever information we know about the situation, and the identities and whereabouts of those involved.

Reports of suspected child abuse and maltreatment can be made 24 hours a day by calling the New York State Central Register (SCR) Child Abuse and Maltreatment Hotline. All calls are confidential.

- **New York State General Public Reporting Hotline:** 1-800-342-3720 (or call 311)
- **New York State Mandated Reporting Hotline:** 1-800-635-1522

For more information about who is a Mandated Reporter and what happens when a report is made, please visit: <http://ocfs.ny.gov/main/publications/Pub1159.pdf>

Given the strain on families who have come to us for help, it's important to look at ways to provide an atmosphere that is as family-friendly as possible, and that support healthy parent–child relationships. Some organizations have even found that interior design firms or college departments are willing to volunteer to provide specialized design services.² Having a budget is helpful, but even when resources are limited, often staff teams, volunteers, or local businesses can contribute supplies and materials that are new or in good shape.

HERE ARE FIVE FAMILY-FRIENDLY IDEAS TO START WITH:

- 1. Offer a simple tip sheet to parents on how to help them talk with their kids during tough times,** in the parent's preferred language when possible. The tip sheet at the end of this module can be copied as is, or modified as needed, and distributed to parents. The National Child Traumatic Stress Network also has reproducible guidance for parents, available at <http://www.nctsn.org/resources/audiences/parents-caregivers>.
- 2. Create a child-friendly area in the waiting room.** Are there coloring books and crayons, safe and soft toys, or activities that children of different ages might enjoy? Is there opportunity for children to make choices, but not so many choices that they can become overwhelmed? Make it easy to find things and clean up, with labeled containers or compartments. Have a regular cleaning plan, including wiping down toys and spaces to prevent germs spreading.
- 3. Provide guidance to parents on what's expected of them and their children while they are at the program or in the office.** Demonstrate respect for parents' time and responsibilities, and make the setting as comfortable for them as possible—for example, by having refreshments and tissues available, comfortable chairs, and/or access to phones or computers. Try to ensure that children can play safely while waiting, without their parent having to constantly monitor them.
- 4. Create a calm environment.** For example, aquariums have been shown to have a calming effect on adults and keep children engaged (consider what is realistic for staff cleaning and maintenance responsibilities!). Plants can also have a peaceful effect. Certain colors are known to have a calming effect—be creative in bringing in a color scheme that will be pleasing to both staff and clients.
- 5. Help defuse a tense moment by providing immediate and positive support to a parent who appears to be “losing it.”** Deeper guidance on defusing tense or hostile situations can be found in Module 2 of this toolkit.

² <https://www.nysid.edu/news-events/blog/Trauma-informed-Design-Creates-a-Safe-Space-for-Children>



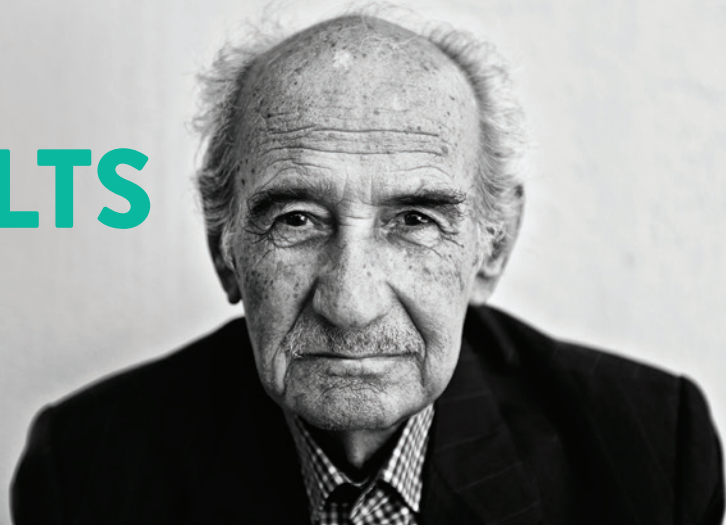
TIPS FOR PARENTING UNDER **STRESS**

Hard times can be hard on the whole family, and talking with children about painful or difficult situations can be challenging.

By understanding your children's concerns, you can help them cope with their fears so they don't become overwhelming.

- **Don't assume** that you know what your children are thinking and feeling about what your family is going through. Ask them before you offer reassurance.
- **Validate** your children by letting them know that their feelings matter. Explore what you can do together to help them feel better.
- **Remind** your children of ways that they have successfully coped with distressing feelings in the past.
- **Be honest**, but don't overwhelm your children with too much information.
- **Involve them** in choosing free or low-cost alternatives when possible, if you need to cut back on purchases or activities for your children.
- **Try to keep routines** that children like when there is a lot of change in their lives, such as reading bedtime stories, watching a favorite TV show together, and having play dates with friends.
- **Let the kids contribute**, and give them a chance to help lighten your load when appropriate. Helping you can relieve their sense of powerlessness and build their sense of effectiveness and self-esteem.
- **Get support if you need it.** If you're having trouble parenting or dealing with other day-to-day responsibilities, reach out to friends, family, religious communities, family advocates, counseling services, or other neighborhood resources. Contact **1-888-NYC-WELL or 1-888-692-9355** for confidential support and connection to resources.
- **Talk with a guidance counselor, school social worker, or your children's doctor** if your children continue to show signs of stress—like trouble sleeping, headaches, or acting angry or sullen. **NYC WELL (1-888-NYC-WELL or 1-888-692-9355)** can also help you locate a mental health professional for your child.

THE SPECIAL NEEDS OF **OLDER ADULTS**



Older adults may be especially vulnerable to the impact of stressful or uncertain times.

Challenges may include living on fixed incomes, rising housing costs, and loss of social supports.

Stress for older adults may also be increased when their adult children who have been helping out become less available due to their own challenges, such as economic hardships. Many older adults may have to manage fluctuations in their retirement savings due to unexpected changes in the economy.

In addition to financial stressors, older adults may have physical and mental health concerns. When most people think about mental health issues among older adults, they may think of either depression or dementia. While these are common conditions that may affect older adults, the sorts of mental health issues that affect older adults are diverse. It is important to distinguish among:

1. People with severe long-term psychiatric disabilities that began when they were young.
2. People with mental health concerns that began or got worse in older age.
3. People with substance abuse problems.
4. People who have difficulty managing the developmental challenges of older age, such as retirement and losses of family and friends.

Becoming older involves many changes in social roles, abilities, and relationships, including retirement, loss of social status, caregiving responsibilities for their own parents or for grandchildren, decline of physical and/or mental abilities, increasingly frequent deaths of family and friends, and preparing for one's own death.

These changes often stir up considerable emotional distress for the aging adult.

Older adults may live alone and/or are homebound. Contact with human service organizations may be among the few regular social connections they maintain. **As nonprofit professionals, we may be the first to realize that an older person could benefit from additional services to which they do not have access.**

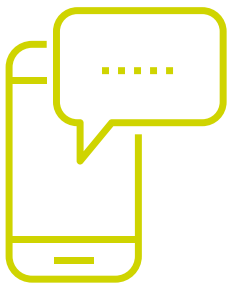
In New York City, the Department for the Aging (DFTA) offers information on Senior Services, Housing, Caregiver Support, Health & Wellness and Volunteer and Job Opportunities. The Department for the Aging can be reached through 311 or online at: <http://www1.nyc.gov/site/dfta/index.page>.

WHEN A REFERRAL FOR MENTAL HEALTH SERVICES IS NEEDED

It may not be part of our job description to make a mental health assessment or provide psychological counseling. But we can look for signs of prolonged and excessive stress among older adults we encounter, such as when someone:

- Can't stop thinking about the experience or issue that is causing them distress.
- Remains upset or fearful.
- Is unable to escape intense, ongoing, distressing feelings.
- Has nightmares related to a traumatic experience.
- Is unable to enjoy life because of their stress or a traumatic experience.
- Has symptoms that are interfering with usual activities.³

People experiencing a mental health crisis need special care. We don't want to add to their stress, or the stress of the moment, by putting pressure on them or by causing them to feel judged. We can calm the concerns of a program participant in crisis by assuring them that we are there to help, and by using the techniques in Module 2 of this toolkit to help prevent escalation.



MENTAL HEALTH HELP IS A PHONE CALL, CHAT OR TEXT AWAY

We may not be mental health professionals, but all of us working directly with people have the opportunity to make use of NYC WELL, New York City's mental health support hotline that is available 24 hours a day, 7 days a week. **You can reach NYC Well by calling 1-888-NYC-WELL (1-888-692-9355) on behalf of a program participant who is experiencing emotional distress, or visit online at <https://nycwell.cityofnewyork.us/en/>. You can also text WELL to 65173, or click on the CHAT button on the website.** For languages other than English, Spanish, Mandarin, or Cantonese, immediate translation services are available.

NYC WELL is a confidential information and referral helpline operated by the Vibrant Emotional Health. NYC WELL can link callers to a continuum of mental health services and has authorized linkages with all of New York City's mobile crisis teams and emergency medical services.

Providing people in crisis with a sense of direction can help them feel a sense of security and hope.

We can help keep the situation calm by:

- Giving accurate information about the resources we can offer the person, being transparent about our role and responsibilities, and helping the person make the decision that is right for them at this moment (while keeping safety the top priority).

³ <https://www.mentalhealthfirstaid.org/>

- Letting them know how common it is to need help coping at different times in life, and that many people find that options like counseling, emergency hospitalization, or medication help them to get through the most painful times and find or regain their quality of life.
- Assuring them that, in considering these resources, they have already taken the first step toward helping themselves.

While these tips are designed to support face-to-face encounters, the same steps can be used to get support for people who may be calling, texting or chatting in crisis. In addition to following the guidance above, when possible we want to keep the caller on the line and use a different phone line to contact NYC WELL. We can assure the caller that we will stay with them on the line until help arrives.

RESPONDING TO SIGNS OF VIOLENCE, ABUSE, AND NEGLECT

It is important for all staff members of nonprofits and human service organizations to be familiar with the signs of possible abuse, such as domestic violence (including teen dating violence), child abuse, elder abuse, and human trafficking.

Recognizing the Signs of Violence, Abuse and Neglect:

When people or communities experience high levels of stress, the likelihood of violence, abuse, and neglect increases. People who engage in abusive behaviors may share some common experiences and behaviors, including:

- A history of having been abused or of witnessing abuse.
- A history of bullying.
- Exhibiting unpredictable mood swings and/or angry outbursts.
- Abusing alcohol and/or other drugs.
- Isolating their victims from family, friends and community.
- Engage in verbal abuse or threaten violence.

Survivors of violence and abuse across populations may also share some common experiences and behaviors. Although there are specific resources and supports for victims of domestic violence, teen dating violence, child abuse, and elder abuse, all survivors may present as depressed, anxious, or possibly suicidal. Survivors may also share similar signs or symptoms:

SIGNS/SYMPTOMS OF VIOLENCE OR ABUSE

ACROSS MULTIPLE POPULATIONS

SIGNS OF...

MAY APPEAR AS...

PHYSICAL ABUSE

- Unexplained signs of injury, such as bruises, burns, broken bones, sprains or dislocations—all of which the survivor may explain as “accidents.”
- Broken eyeglasses/frames, or other needed assistive devices commonly used by the survivor.
- Frequently missed appointments, absences from work, school or other obligations without explanation.
- Signs of restraint, such as rope marks on wrists.
- Clothing worn to hide signs of physical injuries; for example, wearing long sleeves in the summer or sunglasses indoors.

EMOTIONAL/ PSYCHOLOGICAL ABUSE

- Reports of, or witnessing, behavior that is threatening, belittling, jealous, or controlling of a partner, parent, or caregiver.
- Evidence that the survivor seems afraid of, or overly anxious to please, their parent, partner or caregiver.
- Changes in behavior; for example, an apparently happy child becoming anxious, withdrawn, or angry.
- Always waiting for something “bad” to happen.
- Signs of having very low self-esteem, or blaming themselves for their problems; for example, frequently stating “It’s all my fault.”

SEXUAL ABUSE

- Any reports from possible survivors that suggest they were unwillingly touched, molested, or raped.
- Difficulty walking, standing, or sitting.
- Development of sexually transmitted infections (STI); especially for children.

NEGLECT BY CAREGIVERS

- Unusual weight loss or evidence of malnutrition or dehydration.
- Reports or evidence of unsanitary or unsafe living conditions.
- Changes in cleanliness, such as wearing soiled clothing, evidence of lack of personal hygiene, disheveled personal appearance.
- Refusal of caregivers to allow anyone to see the care recipient alone.
- Lack of medical care, needed medications, or assistive devices.
- For children/youth, frequent or long absences from school or parents/caregivers keeping children/youth out of school for impermissible reasons, increasing the risk of or resulting in an adverse effect on educational progress.

Please note that there may be crossover in the categories above. For instance, a child who has experienced sexual abuse is also likely to show signs of emotional abuse, such as sudden changes in behavior.

OTHER SIGNS/SYMPTOMS OF VIOLENCE OR ABUSE

In addition to the common signs and symptoms of violence, abuse and neglect, there are additional indicators that may be more specific to different populations:

DOMESTIC VIOLENCE

- Abuser restricts the survivor from seeing friends or family or going out in public alone, including to the survivor's job.
- Evidence or reporting by client a lack of access to, or control of, personal belongings, transportation, or financial resources.

CHILD ABUSE & MALTREATMENT

- Child has learning problems or trouble concentrating that cannot be attributed to specific physical or psychological causes.
- Parent and child rarely look at or talk to each other.
- Child lacks regular adult supervision and may fear other adults.
- Child comes to school early, stays late, and does not want to go home (conversely, child may have excessive absences from school).
- Child has unusual knowledge of sex or sexual behavior; using "adult" words to describe sexual organs or behaviors.
- Sexual acting out behaviors (with other children/youth or adults).
- Parent or caregiver cannot provide a convincing explanation of injuries or absences.

TEEN DATING VIOLENCE

- Youth's grades quickly fall across all or most subjects.
- Youth insists on an unusual amount of privacy and withdraws from family and friends.
- Abuser restricts the youth from seeing friends or family or going out in public alone.
- Running away from home.
- School absences.

ELDER ABUSE AND NEGLECT

- Older adult appears either over- or under-medicated.
- Older adult shows uncharacteristic behavior that mimics dementia, such as rocking, thumb sucking, or mumbling to oneself.
- Older adult develops signs of anxiety or depression.
- Sudden development of new intimate friendships or romantic relationships, particularly with people who are significantly younger; especially if the older adult is providing funds to the new friend or partner. ("sweetheart scams").
- Older adult's financial circumstances suddenly change, including withdrawals of funds from bank accounts, addition of new authorized names to bank accounts, large or unusual charges on credit cards, or sudden changes to wills, powers of attorney, titles and insurance policies.
- Signs of medical neglect, such as stopping of medication, lack of routine medical care, or removal of or not replacing assistive devices.
- Older adult's personal hygiene appears to be declining, including disheveled appearance, lack of being bathed, or evidence of unattended incontinence.
- The appearance of bedsores.

If you witness or suspect violence, abuse or neglect of any kind, you may be reluctant to get involved; but you can and should take positive action that can let a potential survivor know that you care. You could even end up saving a life!

In times of stress and uncertainty in communities and families, instances of abuse, neglect, and violence often increase.⁴ This is particularly true for our most vulnerable populations—children and older adults. Both groups often rely on others for basic care, and they may be unable to advocate on their own behalf. Research in New York State found that over the course of just one year (2008), 260,000 (or 1 in 13) adults over age 60 reported having been injured, exploited, or otherwise mistreated by someone on whom they depended for care or protection.⁵

As nonprofit professionals, our concern can make a true difference in the life of someone who has been victimized.

TALKING WITH VICTIMS

It's not easy to speak with people about abuse and crime, but it can help put them at ease when we let them know that we care about their safety and respect their confidentiality. Victims of all ages and social identities may be reluctant to open up, or may even say that they don't think they need help, but it can help build trust when we stay calm and non-judgmental while asking key questions and offering information. If a victim is comfortable talking with us, we can learn what they are most concerned about and help them weigh the pros and cons of their different options.



⁴ Jack P. Shonkoff, Andrew S. Garner, The Committee on Psychosocial Aspects of Child and Family Health, Committee on Early Childhood, Adoption and Dependent Care, and Section on Developmental and Behavioral Pediatrics, Benjamin S. Siegel, Mary I. Dobbins, Marian F. Earls, Andrew S. Garner, Laura McGuinn, John Pascoe, David L. Wood (2012). The Lifelong Effects of Early Childhood Adversity and Toxic Stress Pediatrics Jan 2012, Vol 129 (1) e232-e246; DOI: 10.1542/peds.2011-2663

⁵ Lifespan of Greater Rochester, Inc., Weill Cornell Medical Center of Cornell University, & New York City Department for the Aging. (2011). Under the Radar: New York State Elder Abuse Prevalence Study (PDF).

IMPORTANT HOTLINES

AND RESOURCES FOR VICTIMS OF ABUSE AND CRIME



If a person is in immediate danger, follow your agency's safety protocols, which may include calling 911. When a person is in a place to seek help to address their situation, contacting a hotline is often a helpful place to get started.

The specialized hotlines listed below can help victims connect to services including:

- Confidential emergency shelter.
- Support services.
- Legal information, often provided for free or at a discount.

Hotline staff can also provide a listening ear to support callers as they consider their options.

HOTLINES FOR DOMESTIC VIOLENCE, INCLUDING STALKING AND TEEN DATING VIOLENCE

Domestic violence is a pattern of behavior in which one person attempts to exert power and control over someone with whom they are in a relationship. Domestic violence can be physical, sexual, emotional, verbal, or economic, and can affect people from every gender, sexual orientation, culture, and socioeconomic status.

New York City Domestic Violence Hotline: 1-800-621-HOPE (800-621-4673) (or call 311 and ask for the Domestic Violence Hotline)

The NYC Domestic Violence Hotline serves callers of all gender identities, sexual orientations, and physical abilities. However, callers may prefer to interact with these specialized hotlines, run by organizations that are dedicated to culturally competent services for specific populations:

- **NYC Gay and Lesbian Anti-Violence Project:** 212-714-1141
- **Barrier Free Living (people living with disabilities):** 212-533-4358

For more details and resources, please visit:
<https://www1.nyc.gov/nyclope/site/page/home>

HOTLINES FOR HUMAN TRAFFICKING

Trafficked individuals are forced, tricked, or coerced to work in a variety of jobs or in the sex industry. Traffickers often prey on individuals who are emotionally and economically vulnerable, including but not limited to immigrants (regardless of citizenship), and young people who have been abused or rejected by their families. Traffickers can also be one's own family member.

- **New York City Crime Victims Hotline:** 866-689-HELP (4357)
- **New York City Domestic Violence Hotline:** 1-800-621-HOPE (800-621-4673)
- **National Human Trafficking Hotline:** 1-888-373-7888

For more details and resources, please visit: <http://www1.nyc.gov/site/endhumantrafficking/index.page>

HOTLINES FOR CRIME AND ASSAULT, INCLUDING RAPE AND HATE CRIMES

Trained rape and sexual assault advocates can guide victims through their options, including reporting and medical care, and provide referrals for support.

- **New York City Rape and Sexual Assault Hotline:** 212-227-3000
- **National Sexual Assault Hotline:** 1-800-656-HOPE (4673)
- **New York City Gay and Lesbian Anti-Violence Project:** 212-714-1141

Hate crimes target individuals, groups of individuals or property because of a perception or belief about race, ethnicity, gender, sexual orientation, religion or other characteristic defined under law.

- **New York City Crime Victims Hotline:** 866-689-HELP (4357)
- **New York City Gay and Lesbian Anti-Violence Project:** 212-714-1141

For more information, please visit: **New York City Alliance Against Sexual Assault:** <http://www.svfreenyc.org/>

HOTLINES FOR ELDER ABUSE AND NEGLECT

Trained hotline staff can be accessed by calling 311 between 9am and 5pm Monday through Friday, and asking for the Elderly Crime Victims Resource Center.

If it is after hours, ask to be connected to Safe Horizon for help, or dial their crime victim's hotline directly at **1-800-621-HELP (1-800-621-4357)**. The following numbers also can help clients find resources and support:

- **Senior Citizen's Helpline at the New York Department for the Aging:** 1-800-342-9871
- **National Center for Elder Abuse Hotline:** 1-800-677-1116

ADDITIONAL
RESOURCES FOR
SPECIAL
POPULATIONS

IMMIGRATION LEGAL HELP

In a rapidly changing environment regarding U.S. immigration policy, with rising instances of intimidating law enforcement practices and anti-immigrant hate crimes, immigrants who are victims of crime may be understandably hesitant to contact police or access the courts. ActionNYC is an initiative of the City of New York which connects immigrants to a trusted network of free, safe immigration legal help.

To make an appointment, call 1-800-354-0365 between 9am-6pm, Monday through Friday or call 311 and say “ActionNYC.”

For more information, please visit <http://www1.nyc.gov/site/actionnyc/index.page>

EMERGENCY SHELTER FOR YOUTH

Unfortunately, many youth and young adults do not have access to safe and affordable housing, particularly those who have aged out of foster care, been involved in the juvenile or criminal justice system, been rejected due to their gender identity or sexual orientation, and/or fleeing abuse. These young people are particularly vulnerable to crime and violence, and often feel unsafe in the adult shelter system.

The New York City Department of Youth and Community Development operates a Youth Connect warm line for information about emergency housing and many other resources.

Youth Connect: 1-800-246-4646 (OUTSIDE NYC: 1-646-343-6800)

<https://www1.nyc.gov/site/dycd/services/runaway-homeless-youth.page>

Youth and young adults up to age 24 may be eligible for emergency or transitional options. Visit for an overview of services and eligibility: <https://www1.nyc.gov/site/dycd/services/runaway-homeless-youth.page>

Age limits are (or may have just been) expanded http://www.nyc.gov/html/om/pdf/2010/pr267_10_report.pdf

Youth up to age 24:

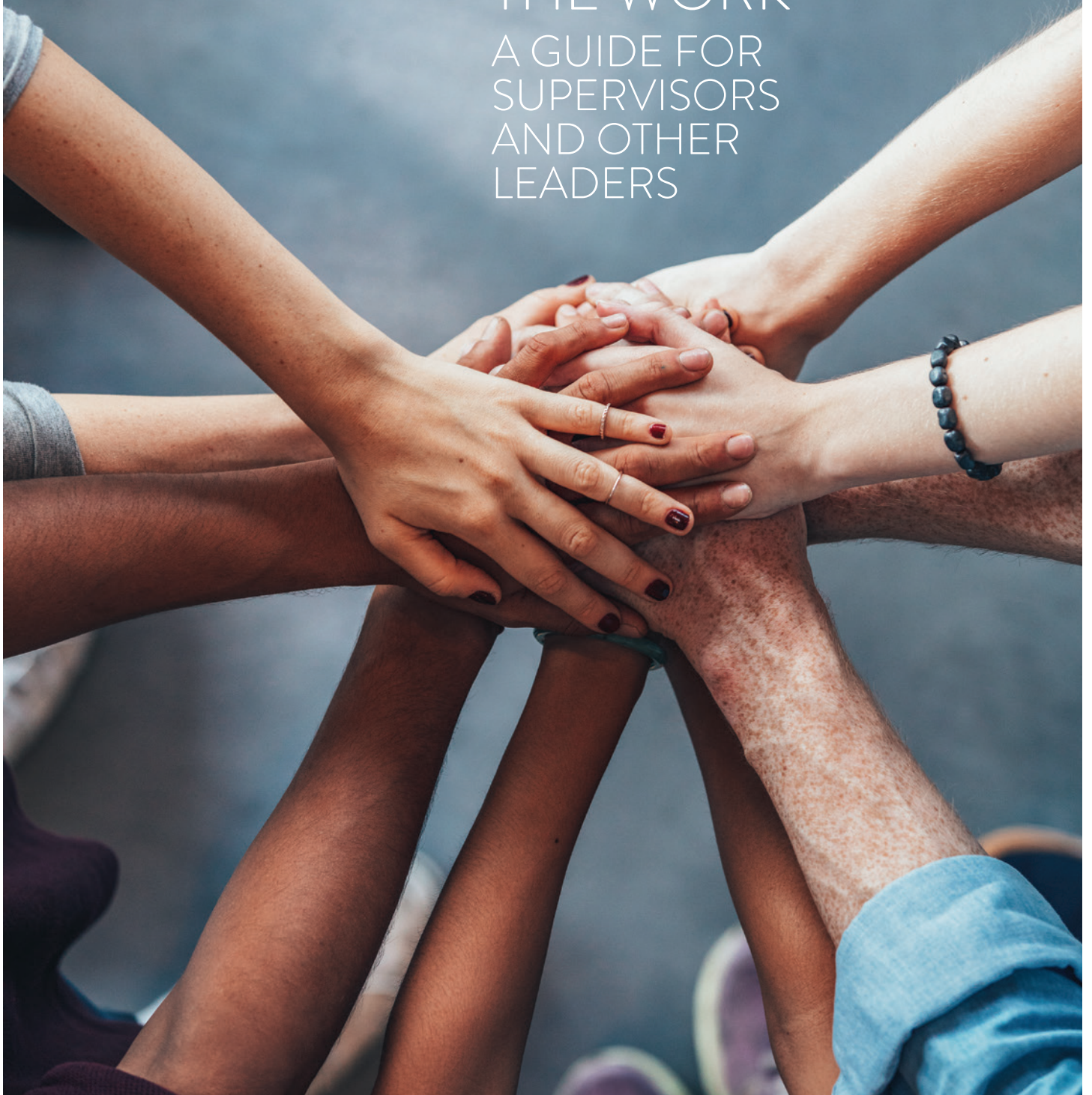
<http://www1.nyc.gov/site/dycd/services/runaway-homeless-youth/borough-based-drop-in-centers.page>

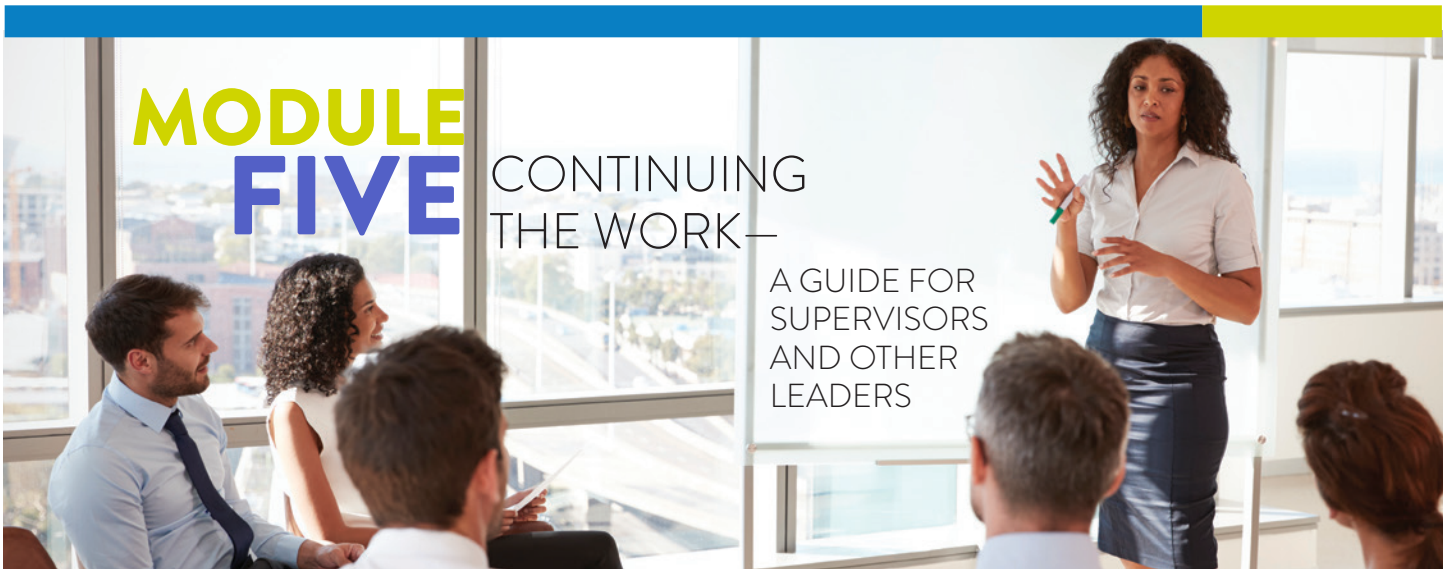
Youth up to age 21:

<https://www1.nyc.gov/site/dycd/services/runaway-homeless-youth/crisis-shelters.page>

MODULE FIVE

CONTINUING
THE WORK—
A GUIDE FOR
SUPERVISORS
AND OTHER
LEADERS





As leaders in nonprofit organizations, part of our job is to think about what’s new and what’s next—maintaining awareness of the current, emerging, and future challenges that may be faced by the communities we serve. Yet, while simply providing current programming often takes all our resources and energy, unexpected crises will always be part of the job.

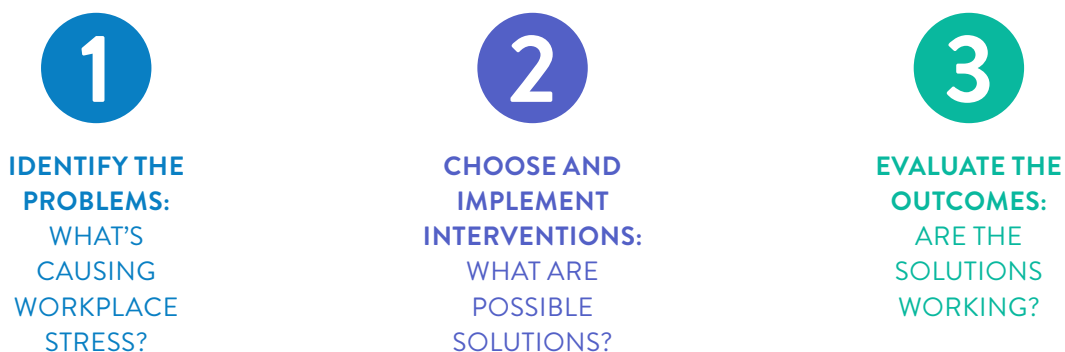
How can leaders ensure that the most crucial resource within our organizations—the staff—feel prepared and supported to stay resilient in tough times? When we work so hard to keep up with the city’s needs, it’s important to occasionally take a collective breath, regroup, and look at how our organization is holding up.

There will always be opportunities to incorporate what we know about managing stress in times of crisis, and to maintain a long-range plan to keep employee stress manageable and morale high. As with every module in this toolkit, the guidance provided in this module can be adapted to fit the specific needs and priorities of your organization. There is never a “one size fits all” solution, but these strategies can help to increase the resilience of any organization.

A LONG-RANGE APPROACH TO ADDRESSING WORKPLACE STRESS

The tips and strategies from Modules 1 to 4 of this Staying in Balance toolkit provide a foundation on which we can build longer range approaches to organizational health and employee wellness. **Experts in the field of workplace stress agree that organizations can improve both employee satisfaction and productivity with a commitment from management to take a long-term look at reducing workplace stress.**¹

IT’S A THREE-STEP PROCESS TO:



¹ Scott, R. (2015, August 3). Designing and Effective Employee Wellness Program. RISE. <https://www.shrm.org/resourcesandtools/tools-and-samples/toolkits/pages/designingandmanagingwellnessprograms.aspx>

STEP 1

WHAT'S

CAUSING THE

STRESS IN YOUR

WORKPLACE?

This step asks organizations to identify the sources of job stressors. It's done by gathering honest input from employees through formal and informal approaches, such as:

- Surveys.
- Focus groups.
- Formal interviews.
- Informal and casual conversation.

While larger organizations may choose to gather as much information as possible from surveys, many smaller organizations find it just as effective to hold casual discussions over coffee between colleagues. If employees are feeling isolated, pulling them together as a group to talk may be especially valuable. In planning how to gather input, it's important that we consider our organization's size and resources.

Each person in an organization may have a unique perspective on how the work is proceeding and what is causing stress, so it is critical to get input from employees and/or volunteers at all levels of responsibility. As leaders, we may have hunches and make assumptions about the reasons behind problems, and they may be correct—but taking an objective look at what different people have to say, and where there are common themes or differences in their feedback, can often lead to new insights and solutions.

There are other important reasons to involve staff members in identifying workplace stressors right from the start. Authentic encouragement to participate in the process helps illustrate that the organization respects employees' viewpoints and cares about their well-being. As a result, there is likely to be more support from staff members for the solutions the organization chooses to implement. Simply having an opportunity to provide candid feedback without fear of repercussion can help begin the process of defusing any office tensions.

BEST PRACTICE TIP

Make sure that staff members' involvement in organizational self-assessment won't add more time or stress to their day! Determine the time and effort required for each activity (surveys, meetings, interviews, etc.), and let staff know their options for participating within their normal working hours. Supervisors can proactively help to adjust tasks or schedules as needed.

STARTING POINT QUESTIONS

FOR ASSESSING ORGANIZATIONAL STRESS



Organizations and teams might find some or all of these questions useful as a starting point for one-to-one conversations, small group discussions, or survey questions.

- Do you have any concerns about your safety here at work? In what ways?
- How is the workload? Do you feel like there's too much to do?
- Do you need additional support to get your work done? What do you wish you could have to make your job more manageable?
- Are there ways you'd like to see this organization communicate better with staff members? Do you get all of the information you would like to receive?
- Are there other work-related issues that may be making your life more difficult these days?
- What could our program's leadership do to help make your job more satisfying?
- Do you think our organization provides good service to program participants? Are there ways you think the organization could do a better job helping program participants?

Feedback from staff will provide a clearer picture of the stressors affecting their work. This process could identify common themes related to stress that exist throughout the organization, or it could also reveal that major stress is a problem in only one or two departments. With this information, interventions can be designed that target a specific problem and are more likely to succeed.

STEP 2

WHAT

SOLUTIONS

WILL WORK

FOR YOUR

ORGANIZATION?

Planning any project or initiative depends on the organization's size, resources, and the specific problems to be solved. **Workplace stress usually has a number of causes; as a result, more than one solution is often necessary to see real change.** Feedback from staff in the beginning stages of this process may provide all of the needed solutions, and prevent unsuccessful initiatives. Ideas that come from the people most directly impacted are more likely to succeed.

Common areas of organizational workplace stress are listed below, along with a number of possible solutions that have worked for organizations:

- **Improve direct organizational communications with staff members.**

Stress can be present if staff members report that they don't feel as though they are part of a larger organization or if they don't see how they fit into the organization's "big picture." It can even result in concerns about their own job security.

Consider ways to keep everyone posted on developments in other departments, including summarizing the initial feedback gathered from staff on causes of stress—and the organization's commitment to follow up with solutions. Newsletters, brief videos, company-wide meetings or events, and bulletin boards are all possibilities. Ask staff members what forms and methods of communication would work best for them. These days, we are often flooded with a great deal of information through email, social media, posters, and other sources—so providing information in multiple ways is important to ensure that employees are aware.

- **Consider improving two-way communications with staff members.**

Stress can occur when employees and volunteers feel that they have no voice within the organization or are afraid to speak their minds for fear of losing their jobs. Organizations can combat this stress with policies that invite honest feedback from staff members without fear of repercussions.

When considering policies on soliciting employee feedback, bear in mind that sometimes employees' greatest source of stress may be their relationships with their immediate supervisors, and policies should provide a safe path for addressing issues with someone else. Organizations can also establish opportunities for staff members to work together to identify ongoing workplace issues and needs and suggest solutions to management collectively, which often feels more comfortable for employees.

- **Recognize great work.**

Sometimes it's as simple as recognizing the great work of one person or the hard work of many. Some organizations do this through small awards or certificates for individuals, or the occasional party or social event. Exceptional work can be highlighted in the organization's newsletter, website, or on social media.

One of the best ways to acknowledge employee efforts is through a consistent, transparent employee review process that incorporates goals and professional development. Your organization may not always be in a position to give annual raises, but you may be able to provide meaningful compensation in other ways—a gift certificate, some flextime, or an extra day of paid vacation.

- **Look for ways to reduce heavy workloads.**

Even in the best of times, human service and other nonprofit organizations cope with limited resources and minimal staff to address the significant needs of program participants and the many administrative requirements of funders and other stakeholders. Heavy workloads can be one of the highest causes of stress. Invite employee input on how the organization might better manage this work. Managers can then redefine expectations and job descriptions to reduce non-essential tasks.

This may also be an opportunity to look at how personal lives intersect with work. Stress levels for some staff members may be reduced through flexible hours, job sharing, or occasional telecommuting opportunities. Consider developing employee policies on work-life integration, knowing that, by necessity, this will look different in different programs, and keeping equity in mind. By formalizing such policies, organizations can help ensure that options for flexibility are accessible to all employees, especially to those in higher-stress and/or lower-paid roles. Flexibility policies most often extend to full-time employees, but don't forget to acknowledge those in part-time or hourly roles without benefits, who may be especially stressed juggling other jobs and commitments.

- **Improve workplace safety.**

As nonprofit organizations, we provide services to in any number of environments in New York City—from storefronts to church basements to crowded offices, participants' homes, and more. While making sure that the individuals and families we serve feel comfortable wherever we are meeting with them, it is also important that employees and volunteers feel confident at all times in their safety at work. Read further in this module for guidance on creating or revising a workplace safety plan.

- **Provide stress reduction education and supports for everyone.**

Organizations can make a commitment to provide every staff member with tools and skills for reducing the causes and impact of personal stress. With limited resources, it is often helpful to collaborate with other internal departments or other organizations to bring a diverse set of resources to meet the varied needs of staff. In some cases, health insurance providers offer incentives and supports for wellness activities, such as gym memberships, walking groups, or smoking cessation. Employees themselves are also often a great source of expertise and referrals.

Consider offering group workshops on wellness topics like healthy eating or mindfulness, classes like yoga or dance, or creative arts activities. Educating all staff on the impact of trauma and vicarious trauma in our work and personal lives can play an important part of stress management in the human services field. Many staff may also appreciate access to confidential financial wellness counseling. Module 6 of this toolkit includes guidance for organizations to find resources like these and more.

Organizations can communicate that each staff member is valued as a whole person, not just an employee. Make it easy for staff to leave on time at the end of the day so they can engage in their personal lives. Normalize the idea of professional mental health support, so that it will feel more natural to bring this up if it seems someone would benefit from help for emotional distress or substance abuse issues. Module 2 of this toolkit is dedicated to this topic.

Some of these solutions or interventions may be quick to implement, while others might take more time if they require that an organization change the way things are done. Choose realistic solutions based on staff feedback and the available resources and capacities. Any steps—even small ones—taken at the organizational level can help reduce workplace stress for everyone.

After deciding which interventions to try, the next step is to consider the timeline for implementation. What can happen within the next three months? The next year? Seek feedback on a draft plan from representative staff throughout the organization, and share goals and progress with all staff. It can help alleviate stress just to know that help is on the way, and morale may increase when employees see that commitments are being kept by the organization—and that challenges or changes are shared with transparency and timeliness.



STEP 3

ARE

YOUR

SOLUTIONS

WORKING?

It's never enough to implement ideas without following up to see how they are working in real life. That's why the third step is so important. It is necessary to look at which solutions are working, as well as which solutions aren't making much of a difference.

Evaluating efforts doesn't have to be hard. The same methods used to identify problems up front can be used to evaluate outcomes. Formal and informal meetings, surveys, focus groups, and small group discussions can provide insights, as can observations of daily life in programs. As with the first step in this process, consider:

- Are employees satisfied with their jobs overall?
- Are staff members feeling less overwhelmed by their job demands?
- Are employees' skills increasing, and are those skills being effectively used?
- Does the climate of the workplace feel happier and more relaxed?
- Is there less evidence of sadness, anxiety, or physical ailments?
- Are employees saying that they feel valued and valuable?

Here are two other ways to assess whether the plan is working and whether staff members might be more satisfied overall:

- Take a look at attendance and absenteeism rates over the past year or so. Have they gone down since beginning the organization's solutions? If so, the efforts are probably on the right track.
- What are managers and supervisors saying? Do they think staff members seem to be happier on the job, that program participants don't seem to have many complaints or problems, or that productivity is up? If so, then the solutions are probably working.

If it turns out the interventions are not having the impact hoped for, it may be time to check back in with staff members. Reassess current workplace stress levels—the causes may have changed over time—and consider alternative solutions that might make more sense for your organization.

CREATE (OR REVISIT) YOUR WORKPLACE SAFETY PLAN

One of the greatest sources of workplace stress is employee perceptions of their own safety. Workplace safety is often a matter of planning, and every organization benefits from having a plan. Even when an organization has one, it is wise to look at it periodically with fresh eyes and see if any components need to be updated. Many organizations ask staff members from all levels and departments to volunteer to help develop a strong plan; the input of employees outside of management can provide an important perspective on safety.

Because organizations are structured differently, and because the buildings in which we operate can have different facilities and features, each plan will look different. Some buildings in New York City have mandated procedures for all tenants in the event of an emergency. If such is the case with your organization, follow your building's requirements and consider supplementing the building's plan with procedures for safety inside your office.

COMPONENTS OF A WORKPLACE SAFETY PLAN

Because plans focus on a wide array of safety issues, this section cannot provide a comprehensive checklist that meets the safety needs of every organization. However, there are key areas and procedures that any workplace safety plan should address. They include:

- **Staff and client safety:** It is helpful to have a protocol to handle threatening or potentially dangerous situations. The protocol should specify when it is necessary to call 911, when and how a person may be asked to leave the premises, and what procedures to use for notifying other staff members and supervisors about the situation. Survey the environment and make note of whether workspaces are set up to allow safe and quick exits. Consider adopting a “code word” that any co-worker can use to alert other staff members to call 911 without being obviously detected.
- **Communicating with staff during an emergency:** To ensure that accurate information is provided in cases of emergency where people may not be able to come into their worksites, organizations may activate a “phone tree” or an employee hotline, post on social media, use email blasts or text messages, or a combination of these methods. It is a good idea to maintain an up-to-date list of everyone's primary and secondary contact numbers, as well as emergency contacts.
- **Fire safety:** Where are the fire extinguishers in each building? Does everyone know how to best protect themselves in a fire? Are there smoke alarms or sprinkler systems in each building? Monitor smoke alarms and carbon dioxide detectors on a regular schedule, document each test in a centralized location, and change batteries twice per year.
- **Security of entrances:** Are the exterior doors strong and secure? Can all the keys or keycards for each worksite be accounted for? If there are electronic entry codes, are there updated records of everyone who has each code? Is there a process for collecting keys or changing electronic codes periodically or when staff turns over? If the worksite is a storefront, is there a pulldown gate or some other way to secure the front entrance when no one is there?
- **Security of windows:** If the workplace windows open, are there secure locks on them? If worksites are on the ground floor, are there frosted windows or other safety measures?
- **Alarms:** Is it necessary to have an alarm system to detect unauthorized entry after hours? Would it make sense to have “duress” alarm system that would allow staff members to call for help without being obvious to the person causing a threat? (Both kinds of systems may be monitored by a commercial alarm company). For any alarm system, it is important to test it periodically.

³ <https://www.nonprofitrisk.org/resources/tutorials/workplace-safety-toolkit-public-sector/>

- **Safety from bullying and sexual harassment:** Does the organization have a zero tolerance policy for bullying and sexual harassment? Do employees know how to report an incident safely? If an employee feels their supervisor is engaging in bullying or harassing behavior, to whom they can report it? Is there a clear policy on how the organization follows up with complaints and reports back to involved parties?
- **Emergency medical situations:** Does everyone know how and when to call 911 in a medical emergency, and what to do during a call, including staying on the line to follow the instructions given until help arrives? Are there staff members trained in first aid and CPR, and does everyone know who they are and where to find them? Is there a continually-stocked first aid kit, and does everyone know where it is? In some programs, an on-site defibrillator may be required; other sites may want to consider whether a defibrillator is a wise investment based on the population served. Ensure that centralized locations, such as break rooms, have posters on first aid and CPR. Also consider accessing resources and posting information on reversing a suspected opioid overdose (i.e., Naloxone/Narcan).

TAKE SHELTER (LOCKDOWN) OR EVACUATE?

When confronted with danger, we may not always know if it's safer to evacuate the premises or to take shelter and hide. Security experts recommend the following guidance:

- Evacuate if the danger is in your workplace but does not block escape routes. Get to a safe location and call 911.
- Take shelter and hide if the danger is outside of the workplace. Lock and secure exterior doors and windows. Gather in a room that has limited visibility from the outside and can preferably be locked. Stay down on the floor. Call 911 and wait for official clearance that the threat or danger has subsided.

INSTITUTIONALIZING YOUR PLAN

A plan only works if everyone knows about it and puts it to use. When rolling out a new or updated plan, it is helpful to schedule a training for existing staff members to learn about it, and to include this training as part of your orientation procedure for new employees and volunteers going forward. And consider reviewing procedures or conducting safety drills at least twice a year.

It is an organization's responsibility to plan for the safety and well-being of staff members, volunteers, and program participants. But every environment is safer when all of the individuals within it share responsibility for safety. Consider asking employees and volunteers to agree to:

- Report any safety concerns to their supervisor or a human resources department.
- Report persons/events that seem potentially dangerous to their supervisor.
- Do their best to maintain personal safety.
- Maintain workplace safety (i.e., locking doors behind them).

Encourage a culture of promptly reporting observations of concerning behavior, as opposed to suspicions which may be based on subjective characteristics. Review realistic examples of behavior that staff might encounter that could cause concern, such as seeing a stranger wander around the office, claiming to be looking for a public restroom.

The U.S. Department of Labor's Occupational Safety and Health Administration (OSHA) offers posters, fact sheets, brochures, pocket guides, and more, to help organizations ensure compliance and reinforce their commitment to employee safety.

Visit <https://www.osha.gov/>



AFTER A CRISIS

While we always hope that organizations can remain free of crisis, emergency, or danger, **at some point most organizations will need to put parts of their workplace safety plan to the test. Being prepared for this will help keep staff members, program participants, and property safe.**



Reviewing what happened with and providing support for staff members and program participants after any crisis incident is important for everyone. Employees may be feeling excessive levels of stress. They may benefit from discussing the experience with colleagues, and leadership may find in this process that certain staff members will need extra support to feel safe in the workplace again. It is important, however, that as we discuss the crisis with staff, that we do not inadvertently create more stress by doing so. Certain commonly used methods of debriefing, such as Critical Incident Stress Debriefing (CISD), are controversial because they have the potential to increase emotional distress. Often, we can best help our colleagues and program participants by insuring that basic needs are being met after a crisis, such as ensuring the environment is safe, providing access to food and other concrete resources as necessary, and connecting people with trusted sources of support, such as family or friends, and providing mutual support.



The other critical reason to review the incident is to assess the effectiveness of the workplace safety plan. This type of conversation is known as an operational debriefing. Did everything go according to plan? Did people feel equipped to respond appropriately? If not, where did responses differ? Did the plan overlook any of the circumstances involved in the crisis incident? A conversation with management and staff members to answer these questions will help the plan to evolve and further ensure everyone's safety.



COMMUNITY BUILDING AND COMMUNITIES OF CARE

There are times when events or circumstances in the social environment will affect many people in a community, and can have a ripple effect felt in many domains of someone's life. An example of this ripple effect was seen during the economic crisis that began in 2008 and continued for several years afterward. This event, which affected people not only in New York City, but also all over the United States, demonstrated that when economic crises strike, virtually every part of a person's life is affected. This snowball effect was described well in the September 13, 2009, issue of the *The New York Times*: Because a woman couldn't afford to renew her car's registration, she lost her car. Without a car, she couldn't get to work and lost her job. Without a job, she lost her home. Without a stable home, it was hard to look for a job. Her health began to suffer. "Every day," she said, "I feel like I'm losing a piece of myself."



Working in individual organizations, you may find it's hard to help program participants pull together all of the pieces of their lives. But together, as a community of organizations, it's possible for us to create larger circles of support, weaving a strong community fabric that is better able to serve all those in need with the resources at hand.

Community building means creating *communities of care* in which organizations pool resources, strengthen client referral networks, and create sustainable solutions that help our clients gain or regain their economic stability.

In creating communities of care, it helps to reach out to as many organizations as possible. Every organization in a community has a stake in the well-being of its members and can make a significant contribution to creating community solutions.

Churches, schools, senior centers, community centers, cultural organizations, block associations, and even for-profit businesses have something to contribute. Many already want to help and simply are waiting for guidance. It means involving neighbors, as well, in the conviction that citizens and organizations working together are best poised to solve community problems.

Community building is a powerful approach to supporting each other as we support the program participants we serve.

Here are several online resources and models for community building:

- **The Community Building Institute**
<http://communitybuildinginstitute.org>
- **The Aspen Institute Roundtable on Community Change**
<http://www.aspeninstitute.org/policy-work/community-change>
- **NeighborWorks Community Building Initiative**
<http://www.nw.org>

Here are a few resources in New York City that help to build community among nonprofit organizations through information, free or low-cost training, and advocacy:

- **New York Nonprofit Media** provides free e-newsletters with the latest news of interest to the nonprofit community, as well as conferences and other opportunities to connect. <http://nynmedia.com/>
- **The Support Center for Nonprofit Management** offers low-cost training and other capacity building supports for the broad NYC nonprofit community. <http://supportcenteronline.org/>
- **The Nonprofit Coordinating Committee of New York** offers trainings that are free to staff of its member organizations, and low-cost for non-members. It also engages in advocacy on behalf of the New York City nonprofit community, provides policy updates, and operates the annual Nonprofit Excellence Awards. <https://www.npccny.org/>

“
At the heart of all that civilization has meant and developed is ‘community’—the mutually cooperative and voluntary venture of man to assume a semblance of responsibility for his brother.”

—Dr. Martin Luther King, Jr.

- **The Federation of Protestant Welfare Agencies (FPWA)** provides opportunities for faith-based organizations for advocacy opportunities, effective strategies for mobilizing communities, and free training for staff of member organizations. <http://fpwa.org/our-work/faith-based-initiatives/>
- **Mental Health First Aid** training is also a useful way to connect with a growing network of nonprofit professionals committed to fostering safety and healing for community members facing mental health and addiction issues. Through the ThriveNYC initiative, free trainings are available. Visit <http://www1.nyc.gov/site/thrivelearningcenter/resources/mental-health-first-aid.page>. Trainings outside of New York City may be found at the www.mentalhealthfirstaid.org website.

As part of community building in New York City, diverse organizations have come together to collectively strengthen the ability to prepare and respond to crises that impact New Yorkers in need. This includes preparing for constantly changing conditions in the funding environment, and creating streamlined systems for sharing resources and information.

Here are resources on organizational and city-wide crisis and risk management:

- **The Human Services Council** has published a guide, informed by a cross-section of organizations that identified lessons learned and best practices for coordinated disaster response. It is available for free download at: <https://humanservicescouncil.org/wp-content/uploads/Initiatives/DisasterPreparedness/NYC-Human-Services-Sector-Framework-for-Serving-New-Yorkers-After-Major-Disaster.pdf>
- **Community Resource Exchange** has developed an online organizational self-assessment (The CRE Fitness Test, or CREFT) to help measure an organization's preparedness for a wide range of risk, and implement solutions to ensure organizational sustainability. More information is available at: <https://www.crenyc.org/our-services/creft/>

MODULE SIX

ADDITIONAL
RESOURCES



MODULE SIX ADDITIONAL RESOURCES

Building a community of care requires all of us to use all of our available resources. The following guide is designed to provide nonprofit organizations with the ability to network with each other and tap into other sources of information and assistance. Here, you will find general information about safety net resources for New Yorkers, as well as a guide to support the work of nonprofit service organizations.

GENERAL SAFETY NET ORGANIZATIONS

THE BRIDGE FUND OF NEW YORK CITY, INC.

The mission of The Bridge Fund is to prevent homelessness for vulnerable, working poor individuals and families who are threatened with the loss of their housing, but often do not qualify for emergency government assistance. The Bridge Fund's staff members also provide applicants with compassionate listening, intensive budget counseling, benefits assessment and advocacy, information and referrals. <http://thebridgefund.org/>

CITY HARVEST

City Harvest is the world's first food rescue organization, dedicated to feeding New York City's hungry residents. Today, nearly 1.3 million New Yorkers struggle to put meals on their tables. City Harvest will collect 59 million pounds of excess food this year and deliver it free of charge to 500 soup kitchens, food pantries and other community food programs across the five boroughs. By redirecting this nutritious food from supermarkets, manufacturers, farmers markets, and restaurants to our neighbors in need, we support our local communities and reduce the environmental impact of food that would otherwise go to waste. <https://www.cityharvest.org/>

CITYMEALS-ON-WHEELS

Citymeals on Wheels provides a continuous lifeline of nourishing meals and vital companionship to our homebound elderly neighbors who can no longer shop or cook for themselves. Citymeals-on-Wheels raises private funds to ensure no homebound elderly New Yorker will ever go a day without food or human company. <https://www.citymeals.org/>

FOOD BANK FOR NEW YORK CITY

Food Bank for New York City's mission is to end hunger by organizing food, information and support for community survival, empowerment, and dignity. Food Bank for New York City has been working to end food poverty in our five boroughs for 35 years. As the city's largest hunger-relief organization, Food Bank for New York City employs a multifaceted approach centered on helping low-income New Yorkers overcome their circumstances and achieve greater independence. <https://www.foodbanknyc.org/>



LEGAL SERVICES NYC (LSNYC)

LSNYC is exclusively devoted to providing free civil legal services, with neighborhood offices in every borough of New York City. LSNYC's core practice areas are family, housing, benefits, consumer, and education law. The organization response to legal needs that may be particular to a group of people, neighborhood or period of time. In addition, LSNYC maintains special projects addressing the needs of older adults, victims of domestic violence, victims of predatory lending practices, immigrants and people living with HIV. <http://www.legalservicesnyc.org/>

VIBRANT EMOTIONAL HEALTH

For more than 50 years, Vibrant Emotional Health has been committed to changing attitudes about mental illnesses, improving services for children, youth and adults living with mental health challenges. Vibrant Emotional Health works to shape the public policies that benefit those who have psychiatric disabilities, facilitating access to treatment, and promoting mental health in the community through advocacy, public education, and direct services to New Yorkers. Vibrant Emotional Health operates NYC WELL, the 24-hour phone, text and chat service that provides counselling, crisis intervention, information and referral for people experiencing emotional distress and other behavioral health challenges. <http://www.vibrant.org>

UNITED NEIGHBORHOOD HOUSES (UNH)

As a membership organization of 38 settlement houses and community centers in New York City, UNH promotes and strengthens the neighborhood-based, multi-service approach to improving the lives of New Yorkers in need. The UNH network of nonprofit organizations serves over 750,000 residents each year, and UNH supports this work through policy development, advocacy, and capacity-building programs and activities. <http://www.unhny.org/>

HOTLINE HELP

NYC Domestic Violence Hotline: 1-800-621-4673 (1-800-621-HOPE)

Operates 24 hours a day in all languages and can link clients to confidentially located emergency shelters, counseling, legal assistance, and additional benefits.

Community Health Centers Locator: <https://findahealthcenter.hrsa.gov/beta/>

<http://www.chcanys.org/>

Search for a community health center online.

Mental Health (NYC WELL):

Call 1-888-NYC-WELL (1-888-692-9355)

Español: 1-888-692-9355, Press 3

Chinese: 1-888-692-9355, Press 4

Text "WELL" to 65173

Chat by clicking "chat" feature on <https://nycwell.cityofnewyork.us/en/>

Call **711** (Relay Service for Deaf/Hard of Hearing)

Suicide Prevention: 1-800-273-TALK (1-800-273-8255)

National Suicide Prevention Lifeline (<https://suicidepreventionlifeline.org/>)

Legal Help: 212-626-7373

New York City Bar Association

<http://www.nycbar.org/get-legal-help/>

Emergency Food Assistance: 1-866-888-8777

<http://www1.nyc.gov/site/foodpolicy/help/emergency-food-assistance.page>

Growing Up Healthy Hotline (Prenatal Care Assistance Program): 1-800-522-5006

<https://www.health.ny.gov/contact/doh800.htm>

NYPD Rape/Sexual Assault Hotline: 212-267-RAPE (7273)
<http://manhattanda.org/sexual-assault-and-criminal-justice-system>

Child Abuse & Maltreatment (New York State Central Register): 1-800-342-3720
Deaf/Hard of Hearing: 1-800-638-5163 (TDD/TTY)
Video Relay System: 1-800-342-3720
<http://ocfs.ny.gov/main/cps/>

Dial 311 to access additional services: <http://www1.nyc.gov/311/index.page>

ADDITIONAL RESOURCES TO SUPPORT THE WORK OF NONPROFIT ORGANIZATIONS

On the following page you will find additional resources to supplement each of the modules in this toolkit:

REDUCING WORK PLACE STRESS

Web-based Resources on Stress in the Work Place

- American Institute of Stress: <https://www.stress.org/>
- International Stress Management Association: <http://isma.org.uk/>
- American Group Psychotherapy Association: <http://www.agpa.org/>
- 5 Things You Should Know about Stress: <https://www.nimh.nih.gov/health/publications/stress/index.shtml>

Support for the Development of Nonprofit Organizations

- United Way Strengthening New York City Nonprofits: <http://unitedwaynyc.org/pages/SNYCN>
- Nonprofit Coordinating Committee of New York: <https://www.npccny.org/>
- Support Center for Nonprofit Management: <http://supportcenteronline.org/>

Local Resources for Organizations to Help Reduce Work Place Stress

- **Mindfulness Based Stress Reduction:** 212-316-7855
<http://www.mbsr-nyc.com/>

- **Yoga to the People**
12 St. Mark's Place, New York, NY 10003
<https://yogatothepeople.com/>

- **New York City Parks & Recreation Department**

Provides an affordable and extensive network of recreational services throughout New York City. To find a center near you, dial 311 and ask for Parks and Recreation in your area or visit: <https://www.nycgovparks.org/>

CARING FOR OURSELVES

FREE AND LOW-COST RESOURCES FOR STAFF MEMBERS

Our employees and volunteers may be so stressed that they do not realize that opportunities to enjoy the city are still everywhere around us. This list of web sites connects New York City adults, youth and children to listings of free events citywide, including fine arts, comedy, music, museums, cultural tours, excursions and recreation:

Free museums in NYC: <https://www.nycgo.com/articles/free-nyc-museums>

Club Free Time: <https://www.clubfreetime.com/>

NYC Go: <https://www.nycgo.com/> (has listings of free events citywide)

Gathering with friends and neighbors to relax and blow off steam is a wonderful stress reliever. Whether it's joining others to take a walk around the block, running errands, or participating in city events, you can encourage your staff members to take time to be in places they enjoy with people who make them feel good.

Meetup.com is an excellent resource for anyone who would like to meet groups of people with similar interests: books, pets, movies, politics, parenting—almost anything! Users enter their zip code, and events in their area are listed by interest. <https://www.meetup.com/>

Reconnecting to or discovering faith can be a source of great relief and support to many. There are many more places of worship in New York City than any single directory could list; however, this directory provides listings to a number of places of worship: <http://webapp.mmm.edu/live/files/328-places-of-worship.pdf>

COPING SKILLS AND PERSONAL STRESS REDUCTION

An abundance of resources are available for those who wish to reduce their stress by learning coping skills. A few resources include:

- **21 Stress Reducing Techniques**

<https://www.livestrong.com/slideshow/1011067-15-stressreducing-techniques/>

- **Self-Help Techniques for Managing Stress**

<https://www.helpguide.org/articles/stress/stress-management.htm>

- **Stress Management from Mayo Clinic**

<https://www.mayoclinic.org/healthy-lifestyle/stress-management/basics/stress-basics/hlv-20049495>

HEALTH CARE

Community health centers can provide families with high-quality, affordable and accessible primary and preventive care. For an up-to-date list of the community health centers in New York City, use the community health centers locator on the website of the Community Health Care Association: <https://findahealthcenter.hrsa.gov/beta/>.

The New York State Department of Health can provide information about a number of health insurance programs, including health insurance for children and Medicaid. Visit https://www.health.ny.gov/health_care/ or visit ACCESS NYC here: <http://www1.nyc.gov/nyc-resources/service/4866/access-nyc>

STAYING IN BALANCE WHILE HELPING OTHERS

CUSTOMER CARE AND CUSTOMER CARE RESOURCES

Several of the resources listed above may also be of help to our program participants. The resources below look at providing quality customer care as well as additional services for people who are in significant crisis.

A powerful report assessed the impact of the 2008 economic crisis, and encouraged nonprofit organizations to view this and other crises as opportunities to improve client service and relationships: *Through a New Lens: Toward a Fundamental Reframing of “The Client”*. Published by the Family Strengthening Policy Center/National Human Services Assembly and funded by the Annie E. Casey Foundation. <http://nationalassembly.org/fspc/documents/PolicyBriefs/ThroughANewLens.pdf>

Clients who are new to accessing services may not yet be familiar with 311 and ACCESS NYC. Both of these services can link clients to an array of support services.

- **311** provides access to non-emergency City services and information about City government programs. NYC311 is available online and by phone. To contact NYC311 by phone, call 311 from within the City or (212) NEW-YORK or (212) 639-9675 outside the five boroughs. TTY service is also available by dialing (212) 504-4115.

<http://www1.nyc.gov/311/index.page>

- **ACCESS NYC** is an online public screening tool that people can use to determine the City, State, and Federal health and human service benefit programs for which they are potentially eligible to enroll. People will need to answer a set of questions and a list of programs that they are eligible for will be provided. In addition to screening, people can learn about the programs, how to apply, where to go, and access to printable forms.
<http://www1.nyc.gov/nyc-resources/service/4866/access-nyc>

Our clients may need legal support or help managing their finances. Additional resources may also be helpful:

- **LawHelpNY.org:** This site provides a clearinghouse of legal services and associations in New York State:
<https://www.lawhelpny.org/>
- **MyBenefits.gov:** This site provides a central place where clients can apply for New York State benefits, including tax credits, food stamps, temporary assistance and health insurance: <https://mybenefits.ny.gov/mybenefits/begin>

For clients in need of support for emotional distress or crisis, mental health challenges, or substance misuse, NYC WELL provides New Yorkers with the opportunity to speak confidentially with trained counselors 24 hours a day. Counselors can help people access the services they need including help for:

- Family difficulties.
- Drug or alcohol abuse.
- Mental health concerns, such as depression and anxiety, eating disorders, bipolar disorder, schizophrenia or other psychotic disorders.
- Suicide prevention and crisis counseling.
- Peer support and short-term counseling.
- Assistance scheduling appointments or accessing other mental health services.
- Follow up to check that connections to care have been made and that care is working.

New Yorkers can access NYC WELL counselors by:

- **Calling 1-888-NYC-WELL** (1-888-692-9355)
- Español: 1-888-692-9355, Press 3
- Chinese: 1-888-692-9355, Press 4
- Call 711 (Relay Service for Deaf/Hard of Hearing)
- Texting “WELL” to 65173
- Going to the NYC WELL website <https://nycwell.cityofnewyork.us/en/> and clicking “chat” to chat with a counselor
- Interpreters are available for 200+ languages.

STAYING IN BALANCE WHILE HELPING OTHERS

De-escalation Strategies

These resources provide tips on de-escalating challenging behaviors while listening to clients’ needs:

- **Crisis Prevention Institute:** <https://www.crisisprevention.com/>
- **Empathic Approach: Listening First Aid. University of California, Berkeley:**
https://nature.berkeley.edu/ucce50/ag-labor/7article/listening_skills.htm
- **Life Space Crisis Intervention:** <https://www.lsci.org/>

SUPPORT FOR VICTIMS OF VIOLENCE, ABUSE OR NEGLECT

All survivors of violence, abuse or neglect can find help by calling 311 or having someone call on their behalf. The information below provides additional resources for victims, as well as information for anyone wishing to learn more:

The New York City Mayor's Office to Combat Domestic Violence: <https://www1.nyc.gov/nychope/site/page/home>

New York City Domestic Violence Hotline: <https://www.safehorizon.org/>
1-800-621-HOPE (1-800-621-4673); TTD: 1-800-810-7444

Calls to the hotline are confidential and translators are available for non-English speakers. Calls are taken 24 hours a day and can link survivors to emergency shelters at confidential locations citywide, as well as to counseling and legal services.

National Domestic Violence Hotline: <http://www.thehotline.org/>
1-800-799-SAFE (1-800-799-7233); TTY: 1-800-787-3224

National Coalition Against Domestic Violence: <http://www.ncadv.org/>
1-303-839-1852

NCADV serves as a national information and referral center for the general public and survivors.

Office on Violence Against Women: <https://www.justice.gov/ovw>
1-202-307-6026; TTY: 1-202-307-2277

The Office on Violence Against Women (OVW) provides federal leadership in developing the national capacity to reduce violence against women and administer justice for and strengthen services to victims of domestic violence, dating violence, sexual assault, and stalking. OVW does not provide direct services to individuals.

New York City Health and Hospitals (<https://www.nychealthandhospitals.org/services-for-victims-of-domestic-violence/>) maintains a variety of programs and services to support and assist survivors of domestic violence and other forms of abuse, including:

- **Domestic Violence Coordinators:** Domestic violence coordinators are specially-trained professionals who work throughout the NYC Health and Hospitals system with people who are survivors of intimate partner abuse, elder abuse, or sex trafficking. People are referred to the coordinators by a member of their health care team. The coordinators provide screening, referrals, documentation of injuries, photographs of injuries if the survivor wants that service, and help in developing a safety plan. Once the survivor leaves the hospital or doctor's office, the coordinator follows up within a week to offer additional help, if needed.
- **Services in the Emergency Department:** Many survivors of domestic violence enter the health care system through the emergency department. When a person confides that they have experienced domestic violence, their service is expedited and they are immediately taken out of the waiting room and brought to a safe space in the hospital. They receive medical treatment, a social work assessment, help in filling out a police report if they wish to do so, and safety planning.
- **Sexual Assault Response Teams:** If a sexual assault occurs during domestic violence, survivors are seen by specially trained teams of experts, including forensic examiners and rape crisis counselors. The forensic examiners properly identify, collect and store forensic evidence, and document injuries. Rape crisis counselors are specially trained to help survivors through the emotional trauma of a sexual assault.
- **NYC Family Justice Centers (FJC):** Family Justice Centers (FJCs) provide legal services, case management, safety planning, job training and referral for survivors and their children. Anyone can receive services at FJCs simply by walking into the office—no referrals are necessary. Mental health professionals are co-located at the FJCs and can provide psychiatric evaluations, prescribe medication and provide psychotherapy for up to eight months.

Family Justice Center Locations:

•NYC Family Justice Center, Bronx

198 East 161st Street, 2nd Floor
718-508-1220

Subway: 4 B D to Yankee Stadium

Bus: BX1, BX2, BX6, and BX13

•NYC Family Justice Center, Brooklyn

350 Jay Street
718-250-5111

Subway: A C F R to Jay Street –or– 2 3 4 5 to Borough Hall

Bus: B25, B26, B38, B54, B57, B61, B62, B65, B67, B75, and B103

•NYC Family Justice Center, Manhattan

80 Centre Street
212-602-2800

Subway: 4 5 6 to Brooklyn Bridge-City Hall

J Z to Chambers Street

N Q R to Canal Street

1 2 3 A C to Chambers Street

Bus: M5, M9, M22, and M103

•NYC Family Justice Center, Queens

126-02 82nd Avenue
718-575-4545

Subway: E F to Kew Gardens-Union Turnpike

Bus: Q10, Q37, Q46, and Q60

•NYC Family Justice Center, Staten Island

126 Stuyvesant Place
718-697-4300

Close to the St. George Ferry Terminal

Staten Island Railroad to St. George

Bus: S40, S42, S44, S46, S48, S51, S52, S61, S62, S66, S74, S76, S78, S81, S86, S90, S91, S92, S94, S96, and S98

RESOURCES ON TEEN DATING VIOLENCE AND OTHER SUPPORTS FOR YOUTH

New York City Domestic Violence Hotline: <https://www.safehorizon.org/>

1-800-621-HOPE (1-800-621-4673); TTD: 1-800-810-7444

Youth over age 16 may be eligible for emergency shelter, as well as other services provided to survivors of domestic violence.

National Teen Dating Abuse Helpline

1-866-331-9474; TTY: 1-866-331-8453

Chat at <http://www.loveisrespect.org>

Text “loveis” to 22522

National 24-hour resource by phone or online, specifically designed for teens and young adults with real-time one-on-one support from trained Peer (Teen) Advocates.

Day One: <https://www.dayoney.org/>
1-800-214-4150

The mission of Day One is to partner with youth to end dating abuse and domestic violence through community education, supportive services, legal advocacy and leadership development. Their direct services include: legal advice, information, and full representation for youth seeking orders of protection, custody/visitation, child support and/or domestic violence-based immigration help, individual and group counseling and case management services, advocacy and support navigating the criminal court system with the goal of obtaining an order of protection and advocacy in an educational setting, such as assistance in obtaining a school safety transfer.

Youth Connect: <http://www1.nyc.gov/site/dycd/connected/youth-connect.page>
1-800-246-4646 (NYC); Outside of New York City: 1-646-343-6800

Youth Connect is a project of the New York City Department of Youth and Community Development, and is a resource and referral service for youth, families and community-based organizations (CBO) utilizing web-based strategies and confidential toll-free hotline. Youth Connect's mission is to increase access to and visibility of New York City's opportunities for young people by serving as a one-stop shop for all youth-related resources in NYC. DYCD Youth Connect provides information and assistance to callers in over 180 languages.

Break the Cycle: <http://www.breakthecycle.org/>

Break the Cycle works with youth aged 12-24 to build healthy relationships and create a culture without abuse, and centers young people, caring adults, and communities in their prevention and intervention efforts. The Break the Cycle website provides youth with extensive education on healthy dating relationships and engages them to speak out against domestic violence. Break the Cycle has offices in Washington, DC, Austin, TX and Los Angeles, CA. Contact information for each office can be found at <http://www.breakthecycle.org/contact>.

American Psychological Association: <http://www.apa.org/pi/families/resources/love-teens.aspx>

The APA has produced a youth-friendly guide entitled "Love Doesn't Have to Hurt" to help young people recognize the signs of abuse and provides them with useful guidance.

Safe Horizon Child Advocacy Centers: <https://www.safehorizon.org/child-advocacy-center/>

Child Advocacy Centers (CACs) work with children and youth who have suffered sexual abuse or severe physical abuse, who are treated by caring teams who are dedicated to ending child abuse and helping children and families heal. Child Advocacy Center teams meet the needs of child survivors of abuse and their impacted family members by addressing their safety, tending to their physical injuries and emotional needs, and bringing abusers to justice. CACs provide coordinated services located in the same site to reduce the number of times children have to retell details of their abuse experience. CACs provide comprehensive wraparound care for children who have been abused and their families.

CACs are not walk-in facilities. Each case of child abuse must be reported to the New York State Central Register of Child Abuse and Maltreatment or to the police for it to be referred to a Child Advocacy Center. CAC offices are at the following locations in each borough:

• **Bronx Child Advocacy Center**

1775 Grand Concourse, 5th Floor
Bronx, NY 10453
Monday-Friday 9am-9pm

• **Brooklyn Child Advocacy Center**

320 Schermerhorn Street
Brooklyn, NY
Monday-Friday 9am-10pm
Saturday and Sunday 10am-6pm

• **Manhattan Child Advocacy Center**

1753 Park Avenue, 2nd Floor

New York, NY 10035

Monday-Friday 9am-9pm

• **Queens Child Advocacy Center**

112-25 Queens Boulevard, 3rd Floor

Forest Hills, NY 11375

Monday-Friday 9am-10pm

Saturday and Sunday 11am-7pm

• **Staten Island Child Advocacy Center**

130 Stuyvesant Place, 5th Floor

Staten Island, NY 10301

Monday-Friday 9am-8pm

Prevent Child Abuse New York: <http://preventchildabuseny.org/>

1-800-CHILDREN (1-800-244-5373)

This statewide coalition provides public education, advocacy, and support services. They maintain a helpline to support families which can be reached at the number above from 9am-10pm.

RESOURCES FOR ELDER ABUSE AND NEGLECT

New York City Department for the Aging (DFTA): <http://www1.nyc.gov/site/dfta/services/elder-abuse-crime.page>

DFTA provides information on elder abuse and resources to prevent and report suspected cases. DFTA's Elderly Crime Victims Resource Center helps older victims of crimes committed by strangers. Crimes can be financial, physical, emotional, and include neglect—the same crimes that are committed in elder abuse cases. Perpetrators who don't know their victims often target them for money through IRS, investment, home-improvement, charity, and other types of scams. To access DFTA and its elder abuse services, call 311.

New York City Elder Abuse Center: <https://nyceac.org/>

The New York City Elder Abuse Center's goal is to address the need for a multidisciplinary approach to elder abuse across the city and to create solutions for the growing number of complex cases of elder abuse. The Center's mission is to prevent abuse and assist people 60 and over who are abused or at risk of abuse—as well as their family members, friends, neighbors, caregivers and witnesses. It does this by helping to improve how professionals, organizations and systems respond to their needs—and by developing direct services to meet unmet needs.

New York State Office for the Aging (NYSOFA): <https://aging.ny.gov/>

Senior Citizens' Helpline: 1-800-342-9871

NYSOFA provides information, resources and support for older adults throughout New York State. NYSOFA maintains a Senior Citizens' Helpline which is staffed by representatives who may be reached Monday through Friday from 8am-4pm. If all representatives are busy, callers hear a recorded message advising them to leave a message and staff will return the call, and during non-business hours callers are advised to call during regular office hours.

CONTINUING THE WORK

COMMUNITY BUILDING

As discussed in an earlier module, community building is a powerful approach to supporting each other as we support our clients. Here are several online resources and models for community building:

- **The Community Building Institute:** <http://www.cbi-net.org/>
- **The Aspen Roundtable on Community Change:**
<https://www.aspeninstitute.org/programs/roundtable-on-community-change/>
- **The Community Building Initiative of Charlotte-Mecklenburg, NC:** <http://cbicharlotte.org/>
- **NeighborWorks Community Building Initiative:**
<http://www.neighborworks.org/Community/Engagement/Program-Overview>

ORGANIZATIONAL RESOURCES FOR REDUCING WORKPLACE STRESS

- **National Institute for Occupational Safety and Health (NIOSH) booklet “Stress...at Work”**
<https://www.cdc.gov/niosh/docs/99-101/> (Publication No. 99-101). For more information and resources, refer to NIOSH page about workplace stress—<https://www.cdc.gov/niosh/topics/stress/default.html>
- **Advisory, Conciliation and Arbitration Service of the United Kingdom (ACAS) booklet “Stress at Work”**
<http://www.acas.org.uk/media/pdf/q/c/Stress-at-work-advisory-booklet.pdf>. For more information and resources, refer to ACAS page “Dealing with Stress in the Workplace”—<http://www.acas.org.uk/index.aspx?articleid=6062>
- **American Psychological Association (APA) publication “Mind/Body Health: Job Stress”**
<http://www.apa.org/helpcenter/job-stress.aspx>. For more information and resources, refer to APA page “Work, Stress and Health Resources”—<http://www.apa.org/pi/work/resources/index.aspx>
- **Fairleigh Dickinson University article “Stress in the Workplace: A Costly Epidemic”**
<http://www.fdu.edu/newspubs/magazine/99su/stress.html>
- **The American Institute of Stress (AIS) “Workplace Stress” page**—<https://www.stress.org/workplace-stress/>
- **World Health Organization (WHO) “Stress at the Workplace” page**
http://www.who.int/occupational_health/topics/stressatwp/en/

ORGANIZATIONAL RESOURCES FOR IMPROVING WORKPLACE SAFETY

- **Workplace Safety: “Workplace Safety: A Guide for Small and Mid-Sized Companies.”**
<http://workplacesafetynow.com/>
- **Nonprofit Risk Management Center**
Comprehensive toolkits for nonprofits and public sector organizations to help them build effective safety plans—<https://www.nonprofitrisk.org/?s=workplace+safety+toolkit>
- **Occupational Safety and Health Administration (OSHA)**—<https://www.osha.gov/>
This office, part of the United States Department of Labor, has a website containing extensive Federal resources on workplace safety and health. Refer to their “Publications” page (<https://www.osha.gov/pls/publications/publication.html>) for an extensive list of posters, fact sheets and other resources you can order for your workplace.
- **National Safety Council (NSC): “Safety at Work” resources page**
<http://www.nsc.org/learn/Pages/safety-at-work.aspx>

CITATIONS AND RECOMMENDED READING

MODULE ONE

- **The Nonprofit Organizational Culture Guide: Revealing the Hidden Truths That Impact Performance**, 1st Edition by Paige Hull Teegarden, Denice Rothman Hinden, and Paul Sturm (ISBN: 978-0-0470-89154-4)
- **HERO Scorecard**—<http://hero-health.org/scorecard/>
- **Building Movement Project Tools for Social Justice Organizations**—http://www.buildingmovement.org/our_tools
- **Management Center Tools Library**—<http://www.managementcenter.org/tools/>

MODULE TWO

- **New York Times: Tapping a Troubled Neighbor's Inner Strength**
<https://www.nytimes.com/2016/08/10/opinion/tapping-a-troubled-neighborhoods-inner-strength.html>
- **Washington Post: While I Will Not Share the Video of Alton Sterling's Death**—<https://www.washingtonpost.com/posteverything/wp/2016/07/06/why-i-will-not-share-the-video-of-alton-sterlings-death/?utmterm=.369be36eb483>
- **Hidden Bias: Test Yourself for Hidden Bias**
<https://www.tolerance.org/professional-development/test-yourself-for-hidden-bias>
- **Mental Health First Aid**—<https://www1.nyc.gov/site/doh/health/health-topics/mental-health-first-aid.page>
- **National Registry of Evidence Based Programs**
<https://www.samhsa.gov/capt/tools-learning-resources/national-registry-evidence-based-programs>
- **Dr. Vivian Chávez, San Francisco State University: Video (30 mins) on Cultural Humility**
<https://www.youtube.com/watch?v=SaSHLbS1V4w>
- **National Child Traumatic Stress Network: Youth-produced video on complex trauma**
<https://www.youtube.com/watch?v=y8XaYdQfV3A>
- **Crisis Prevention Institute**—www.crisisprevention.com
- **Kenneth V. Hardy, PhD, Drexel University: Healing the Hidden Wounds of Racial Trauma**—<https://static1.square-space.com/static/545cdfcce4b0a64725b9f65a/t/54da3451e4b0ac9bd1d1cd30/1423586385564/Healing.pdf>

MODULE THREE

- **Sanctuary Model**—<http://sanctuaryweb.com/>
- **Risking Connection Model**—<http://www.riskingconnection.com/>
- **How to Increase Resilience**—<http://www.socialworker.com/feature-articles/practice/resilience-for-social-workers-how-to-increase-flexibility-energy-engagement-in-face-of-challenge/>
- **Self-Care After Emotional/Psychological Trauma**
<http://www.justjasmineblog.com/blog-1/self-care-for-people-of-color-after-emotional-and-psychological-trauma>
<https://www.compasspoint.org/blog/12-resources-your-self-care-starter-kit>
- **Mindfulness Apps**—<https://www.mindful.org/free-mindfulness-apps-worthy-of-your-attention/>

- **Adverse Childhood Events**—<http://protomag.com/articles/scars-that-dont-fade>
<https://acestoohigh.com/>
- **Counseling.org: Vicarious Trauma Fact Sheet**
<https://www.counseling.org/sub/dmh/Fact%20Sheet%209%20-%20Vicarious%20Trauma.pdf>
- **Vicarious Resilience**—<https://www.psychologytoday.com/blog/intersections/201703/vicarious-resilience-and-healthy-helping-professionals>

MODULE FOUR

- **Mental Health First Aid**—<https://www.mentalhealthfirstaid.org/>
- **Mental Health America**—<http://www.mentalhealthamerica.net/>
- **National Alliance on Mental Illness**—<https://www.nami.org/>
- **Essentials for Childhood: Steps to Create Safe, Stable, Nurturing Relationships and Environments**—
https://www.cdc.gov/violence-prevention/pdf/essentials_for_childhood_framework.pdf
- **Rise Magazine**—<http://www.risemagazine.org/>
- **Early Childhood Self-Assessment Tool**
https://www.acf.hhs.gov/sites/default/files/ece/ece_family_supportive_housing_self_assessment_tool.pdf
- **National Center on Elder Abuse**—<https://ncea.acl.gov/>
- **Crossroads: The Psychology of Immigration in the New Century**
<http://www.apa.org/topics/immigration/immigration-report.pdf>
- **Nonprofit Resource Center: National Immigration Legal Services Directory**
<https://www.immigrationadvocates.org/nonprofit/legaldirectory/>
- **National Registry of Evidence Based Programs and Practices**
<https://www.samhsa.gov/capt/tools-learning-resources/national-registry-evidence-based-programs>
- **New York City Let's End Human Trafficking**—<http://www1.nyc.gov/site/endhumantrafficking/index.page>

MODULE FIVE

BOOKS & ARTICLES ON EMPLOYEE ENGAGEMENT, PERFORMANCE MANAGEMENT AND RESILIENCE

- **Stories of Transformative Leadership in the Human Services**
<https://us.sagepub.com/en-us/nam/stories-of-transformative-leadership-in-the-human-services/book233229>
- **Leap to Reason: Managing to Outcomes in an Age of Scarcity (free downloads available)**
<http://leapofreason.org/get-the-books/>
- **Trauma Stewardship: An Everyday Guide to Caring for Self while Caring for Others**
<http://traumastewardship.com/inside-the-book/>
- **Organizational Prevention of Vicarious Trauma**
https://ncwwi.org/files/Incentives_Work_Conditions/Organizational_Prevention_of_Vicarious_Trauma.pdf
- **Race to Lead- Confronting the Nonprofit Racial Leadership Gap**
http://www.buildingmovement.org/pdf/RacetoLead_NonprofitRacialLeadershipGap.pdf

ONLINE TOOLKITS FOR GOING DEEPER TO SUPPORT NONPROFIT ORGANIZATIONAL & STAFF WELLNESS

- **Child Welfare Workforce Institute: Workforce Development Planning and Supports Toolkit**
<http://wdf toolkit.ncwwi.org/index.html>

- **Investing in Nonprofit Talent—Fund the People Toolkit**—<http://fundthepeople.org/toolkit/>
- **Building Movement Project**—http://www.buildingmovement.org/our_tools
<http://tools2engage.org/>

CRISIS MANAGEMENT, DISASTER PREPARATION AND WORKPLACE SAFETY RESOURCES

- **Crisis Prevention**—<https://www.crisisprevention.com/Resources/Complimentary-eBook>
- **Disaster Preparedness**
<https://humanservicescouncil.org/wp-content/uploads/Initiatives/DisasterPreparedness/NYC-Human-Services-Sector-Framework-for-Serving-New-Yorkers-After-Major-Disaster.pdf>

NYC NONPROFIT ALLIANCES

- **Anti-Racist Alliance**—<http://www.antiracistalliance.com/>

ORGANIZATIONAL RESOURCES FOR WELLNESS

- **Employee Financial Wellness**—<https://prosperitynow.org/workplace-financial-wellness>
<https://thefinancialclinic.org/work-with-us/ways-to-partner/>
- **Trauma-informed Yoga**
<http://exhaletoinhale.org/free-public-trauma-informed-yoga-classes/>