## Staff Self-Care Plan

Whether I've personally been affected by trauma or not, there are times when I feel stressed. As a human being, I can be affected by the trauma experienced by others. I need to know myself and my reactions well enough to devise my own plan for maintaining good mental health under stress.

1. Things I do regularly to take care of myself.

| 1 | Physical Self-Care                                     | J | Psychological Self-Care  |
|---|--|---|--|
| 0 | Do physical activities that are fun for me             | 0 | Be curious   |
| 0 | Eat regular, healthy meals (e.g., breakfast and lunch) | 0 | Do something at which I am a beginner  |
| 0 | Exercise   | 0 | Engage my intelligence in a new area: museum, art, performance, sport event, other culture |
| 0 | Get enough sleep                                       | 0 | Let others know different aspects of me  |
| 0 | Get massages or other body work                        | 0 | Make time for self-reflection  |
| 0 | Get medical care when needed                           | 0 | Meditate   |
| 0 | Get regular medical care for prevention                | 0 | Notice my inner experience: dreams, thoughts, imagery, feelings                            |
| 0 | Practice martial arts                                  | 0 | Practice receiving from others   |
| 0 | Stretch  | 0 | Read literature unrelated to work  |
| 0 | Take a break from demanding technology                 | 0 | See a psychotherapist or counselor for myself  |
| 0 | Take day trips or mini-vacations                       | 0 | Spend time outdoors  |
| 0 | Take time off when I'm sick                            | 0 | Say no to extra responsibilities sometimes   |
| 0 | Take time to be sexual                                 | 0 | Take steps to decrease stress in my life   |
| 0 | Take vacations   | 0 | Write in a journal   |
| 0 | Wear clothes I like                                    | 0 | Other:   |
| 0 | Other:   | 0 | Other:   |

| J | Workplace/Professional Self-Care  |   | Workplace/Professional Self-Care                                |  |  |  |
|---|---|---|---|--|--|--|
| 0 | Arrange my workspace so it is comfortable and comforting                      | 0 | Negotiate for my needs (benefits, quiet time, raises, time off) |  |  |  |
| 0 | Ask for help when I need it   | 0 | Set limits with clients and colleagues                          |  |  |  |
| 0 | Balance my workload so no one day is too much                                 |   | Take a real break every few hours                               |  |  |  |
| 0 | Get regular supervision or consultation                                       |   | Take time to chat with coworkers                                |  |  |  |
| 0 | Have a peer support group   | 0 | Take time to eat lunch  |  |  |  |
| 0 | Identify projects or tasks that are exciting, growth-promoting, and rewarding |   | Use paid time off   |  |  |  |
| 0 | Make quiet time to complete tasks   | 0 | Other:  |  |  |  |

| 1 | / Emotional Self-Care  |   | Spiritual Self-Care   |  |  |  |  |
|---|--|---|---|--|--|--|--|
| 0 | Allow myself to cry  | 0 | Cherish optimism and hope   |  |  |  |  |
| 0 | Express my outrage in constructive ways                              | 0 | Be open to mystery, to not knowing                                      |  |  |  |  |
| 0 | Feel proud of myself   | 0 | Express gratitude   |  |  |  |  |
| 0 | Find things that make me laugh                                       | 0 | D Be open to inspiration  |  |  |  |  |
| 0 | Maintain contact with supportive people                              | 0 | Appreciate life's nonmaterial aspects                                   |  |  |  |  |
| 0 | Nurture others   | 0 | Have awe-filled experiences   |  |  |  |  |
| 0 | Play with children   |   | Celebrate with rituals meaningful to me                                 |  |  |  |  |
| 0 | Pursue comforting activities, objects, people, relationships, places | 0 | Identify that which is meaningful to me and notice its place in my life |  |  |  |  |
| 0 | Reread favorite books, rewatch favorite movies                       | 0 | Read inspirational literature   |  |  |  |  |
| 0 | Spend time with others whose company I enjoy                         | 0 | Memorialize loved ones who have died                                    |  |  |  |  |
| 0 | Stay in contact with important people in my life                     | 0 | Make time for prayer, meditation, reflection                            |  |  |  |  |
| 0 | Stop and breathe deeply as needed                                    | 0 | Sing  |  |  |  |  |
| 0 | Support causes I believe in  | 0 | Spend time in nature  |  |  |  |  |
| 0 | Talk to myself kindly  | 0 | Listen to inspiring music   |  |  |  |  |
| 0 | Other:   | 0 | Participate in a spiritual gathering or group                           |  |  |  |  |
| 0 | Other:   | 0 | Other:  |  |  |  |  |

Adapted from Volk, K. T., Grandin, M., & Clervil, R. (2008). What about you? A workbook for those who work with others. Toronto, Ontario: The National Center on Family Homelessness.

| 2. Situations or experiences that I tend to find stressful or overwhelming. |  |
|---|--|
|   |  |
|   |  |

| 7. | √<br>0<br>0<br>0<br>0<br>0<br>0<br>0 | Activity  Deep breathing  Drawing or painting  Exercising  Having someone give me suggestions  Having someone sit and listen  Having time and space to calm down  Listening to music  Looking at pictures  Other: | O O O O O O O O O O O O O O O O O O O | Activity  Reading Taking a nap Taking a shower  Walking Watching TV  Writing in a journal  Yoga or stretching Other: Other: |  |  |  |  |
|----|--------------------------------------|---|---------------------------------------|---|--|--|--|--|
|    | 0 0 0 0 0                            | Activity  Deep breathing  Drawing or painting  Exercising  Having someone give me suggestions  Having someone sit and listen  Having time and space to calm down  Listening to music  Looking at pictures         | 0<br>0<br>0<br>0<br>0                 | Reading Taking a nap Taking a shower Walking Watching TV Writing in a journal Yoga or stretching Other:                     |  |  |  |  |
|    | 0 0 0 0                              | Activity  Deep breathing  Drawing or painting  Exercising  Having someone give me suggestions  Having someone sit and listen  Having time and space to calm down  Listening to music                              | 0<br>0<br>0<br>0<br>0                 | Reading Taking a nap Taking a shower Walking Watching TV Writing in a journal Yoga or stretching                            |  |  |  |  |
|    | 0 0 0                                | Activity  Deep breathing  Drawing or painting  Exercising  Having someone give me suggestions  Having someone sit and listen  Having time and space to calm down  | 0 0 0                                 | Reading Taking a nap Taking a shower Walking Watching TV Writing in a journal   |  |  |  |  |
|    | 0 0 0                                | Activity  Deep breathing  Drawing or painting  Exercising  Having someone give me suggestions  Having someone sit and listen  | 0<br>0<br>0<br>0                      | Reading Taking a nap Taking a shower Walking Watching TV  |  |  |  |  |
|    | 0 0                                  | Activity  Deep breathing  Drawing or painting  Exercising  Having someone give me suggestions   | 0 0                                   | Reading Taking a nap Taking a shower Walking  |  |  |  |  |
|    | 0                                    | Activity  Deep breathing  Drawing or painting  Exercising   | 0 0                                   | Reading Taking a nap Taking a shower  |  |  |  |  |
|    | 0                                    | Activity  Deep breathing  Drawing or painting   | 0                                     | Reading Taking a nap  |  |  |  |  |
|    |                                      | Activity Deep breathing   | 0                                     | Reading   |  |  |  |  |
|    | <b>√</b>                             | Activity  |                                       |   |  |  |  |  |
|    | <b>J</b> _                           |   | J                                     | Activity  |  |  |  |  |
|    |                                      |   |                                       |   |  |  |  |  |
| 6. |                                      | 6. Things I find helpful when I feel upset, stressed out, or overwhelmed (things that I do for myself and ways that people can help me).  |                                       |   |  |  |  |  |
| 5. | My a                                 | ctions when I lose it (e.g., yell, cry, shut down,  | get aggress                           | sive).  |  |  |  |  |
|    | to lis                               | ten, blaming, walking away).  |                                       |   |  |  |  |  |
|    | -                                    |   | ontrol (e.g.,                         | red face, excessive politeness, swearing, not able  |  |  |  |  |
|    |                                      |   |                                       |   |  |  |  |  |
|    |                                      |   |                                       |   |  |  |  |  |
| 3. | _                                    | s that I am becoming stressed or overwhelmed cial life, strong reactions to minor issues).  | d (e.g., raise                        | d voice, upset face, impatience, exhaustion, loss   |  |  |  |  |

| J | Not Helpful           | 1 | Not Helpful                |
|---|-----------------------|---|----------------------------|
| 0 | Suggestions or advice | 0 | Raising their voices       |
| 0 | Touching me           | 0 | Talking to me              |
| 0 | Telling me what to do | 0 | Telling me it will be fine |
| 0 | Other:                | 0 | Other:                     |
| 0 | Other:                | 0 | Other:                     |

| o. reopi | e i cari go to io | a support when i | need it. |  |  |
|----------|-------------------|------------------|----------|--|--|
|          |                   |                  |          |  |  |
|          |                   |                  |          |  |  |
|          |                   |                  |          |  |  |