Trauma, Ethics and Self-Awareness: Understanding Ourselves To Help Others
Steve Harrington

It was a warm spring day and the sun was shining brightly. A woman walked into the lobby of a mental health agency visibly shaken. She had taken advantage of the nice weather to exercise with a brisk walk in her neighborhood. Trembling, she went to the receptionist’s desk and her case manager soon appeared through an open door.

“Karen? What’s wrong?” the clinician asked.

“I was walking and I heard a dog bark,” she said in a whisper.

“So?”

“It sounded like a big dog,” Karen said even more softly as she turned her gaze to the floor.

“Come back when you have a real problem,” the clinician said loudly enough so others in the lobby could hear.

Slowly, the woman looked up, and then around her, and made an exit from the agency.

Unfortunately, this is a true story. What is so unfortunate? The woman was in crisis because she heard a dog bark and she wasn’t taken seriously by her clinician.

But why would a dog’s bark be worthy of concern? I later discovered, as a peer specialist serving this woman, she had been severely bitten by a dog as a child. Scars on her arms were constant reminders of the trauma. The clinician missed it. Karen left the agency distraught and in tears; obviously feeling worse than when she arrived. The message Karen received: “My problem isn’t important.” She may have also left thinking she was not important.

Trauma. It can have different meanings for different people. What one person may see as a minor event may be a major trigger for another. Or, there may be no event at all and a sudden, unexpected memory may enter one’s head to create a serious crisis.

Too often, we judge others from the lens of our own perspectives. We all do that. After all, we only have our own set of experiences to drawn upon to make judgments. But empathy—that ability to imagine how one might be feeling in a circumstance—can be a most powerful tool in providing trauma-informed care.

So often, we think only about physical or sexual abuse when we consider trauma in a person’s life. But trauma can be insidious and take many forms.

Instead of focusing on what a person says and paying attention as to why they are saying what they say, we can begin to build a recovery relationship that fosters wellness—not stigma or even additional trauma. In Karen’s case, for example, she not only relived the trauma of a serious childhood injury but also the trauma associated with serious injury to her self-esteem.

Even though there is mention of things like respect and empathy in most codes of ethics for helping professions, the application of these concepts is often lost when it comes to the day-to-day business of being present with people, such as in Karen’s case. I doubt any code of ethics can really govern this type of clinical behavior because this behavior is derived from one’s self awareness,
especially as it relates to one’s compassion for others. There are no rules that can adequately foster self-understanding and love (for both self and others).

But we are not totally without guidelines that can help mental health professionals understand and take care of themselves so that quality care—through meaningful relationships—results.

There is danger and unfairness in painting with a broad brush. Certainly there are a great many mental health professionals who practice trauma-informed care. But, in general, mental health organizations fail to incorporate such practices throughout systems.

If I were to write a “to do” list for clinicians on trauma-informed service to read before seeing each person, it would include:

- Do not judge the severity of a person’s issue. It is of little consequence whether you deem an issue to be minor or major. It is the judgment of the person you serve that matters.

- Be empathetic. People generally do not want you to feel sorry for them. We prefer you understand our feelings. Empathy is better than sympathy.

- Be aware of your own feelings, emotions and passions. Understand your motivations for working as a mental health professional. Remind yourself of your passion for helping others and use it as a way to maintain a compassionate, caring perspective to form relationships that can have profound, positive effects on others.

- Take care of yourself. People do not want help from a clinician who is unable to handle his/her own issues. Human services can be an extremely stressful occupation. Be certain you are taking time for yourself and doing things you enjoy. This will not only enhance your competence as a clinician, but will prevent job burnout as well.

- Seek counseling, if needed. Counseling and/or therapy are not just for the people you serve. They are for anyone seeking personal insight and strategies for handling life’s challenges. There is no shame—only admiration—for clinicians who have the self-awareness and courage to seek outside help.

- Be honest. It may take some courage to tell another, “I don’t understand why a dog barking is an issue. Can you explain it to me?” Or even, “I’ve had some traumatic events in my life, too. Can I share with you ways I’ve learned to deal with them?”

- Touch appropriately and with permission. Holding another’s hand, a pat on the shoulder or a gentle hug can be appropriate and comforting. Touching also helps form a bond and tells others you care. But, because some people have been physically abused, always be certain to ask permission first. And, of course, be certain the touch cannot be interpreted as anything more than support.

- Use humor appropriately to encourage and, at the same time, boost self-esteem. By sharing a joke or comical insight, you are telling others you care enough about them to relate in a personal manner.
• Smile. People do not expect—or even want—you to share tears. But a comforting smile can tell others you are hopeful at a time they may be totally hopeless.

• Listen actively. Nod. Gesture. Say, “Yes.” or “Uh-huh.” and ask questions to show you are really listening. Listening means caring and people aren’t coming to you for expert advice on how to solve problems or to solve problems for them. People come to you for guidance in the problem-solving process so we can find our own best solutions for the issues we have now and in the future.

• Respect those you serve. Don’t just show respect—feel it. People can spot phony quickly. If you fail to see us as humans worthy of respect, you may be in the wrong profession. If that is the case, find another job. Again, people will respect the insight and the fact you are willing to make such a change instead of risking a traumatic relationship.

• Partner with us not only in treatment, but in policy. We are intelligent with skill sets that can help mental health organizations create and implement meaningful policies that result in true recovery cultures. As these cultures develop, the quality and relevance of treatment increases and we get better more quickly.

Quality, trauma-informed care means more than “doing right” by others. Mental health professionals who adhere to these principles are likely to see fewer recipient rights complaints, people will be more open with personal feelings resulting in better diagnoses and treatment. And people are more likely to move forward in their recovery journeys.

These principles will also likely result in a happier, more meaningful workplace. This is important not only for mental health administrators but for individual workers. Imagine an agency where clinicians are excited about their work, see positive results and return the next day ready and enthused about the challenges they are likely to encounter.

A recent report of a 20-year study showed that emotions are “contagious” and can pass among people like a virus.¹ Imagine a mental health workplace where clinicians pass a feeling of satisfaction, hope and happiness not only among themselves but the people they serve as well!

The current, challenging economy means budget cuts that shrink the workforce at a time when the workload is increasing. This means the risk is greater for poor trauma-informed care and inducing trauma in the mental health setting. It is more important than ever for mental health professionals to carefully examine their values, mental health and passion so they bring vital, effective services to people who are in the most need.

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