

# The Challenging Dynamics of Survivor Caregivers

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You are amazing! Yes you are! You have experienced some form of trauma in your life and yet you still care about others and want to give back to the world. It's part of who you are and why you became a midwife. But maybe you keep bumping into some of your own personality dynamics or coping mechanisms that get in the way of your relationships with your clients, your co-workers and even with yourself. You may not even really understand where these troubles are coming from or what you can do about them. This handout is just a starting place to self-examine and clarify what some of your challenges might be so that you can begin to make plans to turn those challenges into strengths. It can also give you some insight into your clients who happen to also be trauma survivors. What is important, when using this handout, is not to over-analyze or compartmentalize yourself or your clients. All of us have certain of these coping characteristics at some time or other and there is a lot of spill-over into each category. These categories have only been created to help you identify your own needs. These ideas will also guide you in meeting the needs of your clients on a more individualized basis so that you can provide the most meaningful, interpersonal style of relationship for each woman. As you read, take a pen and try to identify your own relational traits, underlining the ones that jump out to you in order to gain clues about your own needs. Ask yourself how your own traits have been positively or negatively impacting your client and co-worker relationships. Get ready to begin the journey of personal growth.

**The Relationally Frustrated You.** You can identify this as a self trait if your relationships are usually shorter term because they tend to begin with intense interest and passion but eventually dissolve into disappointment. Do you over idealize people until you really get to know them? Do you seem to have a series of mini-crisis in your life and wonder if it's just your fate or if you are somehow contributing to the chaos that keeps everything in crisis around you? Do you perceive events and people as either all good or all bad? Is your engagement in activities all or nothing? Do you often feel alone, misunderstood or have a need so deep you wonder if it can ever be filled? Is anger a bothersome constant companion even if it seems justifiable?

**Your Needs:** While you may not like them, boundaries in your practice are crucial to you in every way. Don't get so captivated by an interesting client that you are tempted to violate your established provider/client boundaries. This will include times to call and not to call, limits on prenatal or phone call length or what tasks fall within your scope of services. If a client or a co-worker lets you down or violates your trust, don't assume that they are aware of your feelings. Ask yourself if you are expecting them to mind read. Resist automatically playing the silence and distancing card. Try not to go to another team member with your complaint. Directly go to the person who let you down and ask them, "When you did/said (whatever) it made me feel/think this way. Is that what you meant to do/say?" If a client has a challenging personality or pregnancy and labor get complicated, guard against emotionally backing off and becoming less involved. Stay in the care, practicing empathy and active problem-solving. Refuse to use anger to control clients or co-workers. Utilize reality checks with your co-workers when you are feeling disappointment with a client. Practice moving away from "A or B" problem solving with polarized solutions, but work to stay more in the middle by exploring the creative, grey options of care giving. Seek consistency by communicating your expectations with others. Make it clear that you do not want co-workers to make any commitments to you that they cannot keep. Be aware of your tendency to test the rules or the sincerity of others. They didn't sign up for a values test and it will only make them frustrated with you. Accept that trust is selective and progressive and it's okay that trust will be challenged at some time. Be self-aware of your tendency toward negativity. It's important to intentionally develop the skill of speaking positively to clients and to co-workers.

**The Self-Referential You.** Many survivors can have these traits at one time or another. This is a normal phase in the reparative processes of your own experience. Are you self-focused and do you relate everything around you to yourself, your own experience and your own interpretation of the world? Is it hard for you to connect with others and allow them to have a stand-alone, unique experience without you wanting to redefine their interpretation or share your comparative story? Do you find it challenging to have empathy for the emotional processes of others when their feelings do not relate to your own processing needs? Do you generally tend to lean towards having a more outgoing personality? Do you struggle with being aware or concerned about the time constraints of others? Do you find yourself calling clients and co-workers at hours that are inconvenient for them? Do you portray yourself as strong, but secretly harbor low self-esteem? Do you have persistent, strong negative reactions when your clients or co-workers express a disappointment in you or question your care plan? Do you find that you prefer the role of catching the baby, but hate the responsibilities of labor support and clean up? Do you feel upset when a client bonds with another team member instead of you?

**Your Needs:** Practice using conversation that is loaded with open-ended questions. This process will help you to learn a style of communication that allows all opinions on the table without pointing out the deficiencies of others. Instead, it keeps the focus on decisions, policy change and plan of action. Refuse to respond to your client's disclosure of a traumatic experience by sharing an experience of your own. Resist interpreting your client's experience for them or deciding what they need. It is okay to clinically diagnose your client for medical needs, but you are not a psychologist so don't label your client. Just listen and acknowledge. Consider taking courses on anger management, non-violent communication and being in the moment. Gather your team for a meeting and create a list of Jobs for each member where everyone has input. Think of it as a fun personal experiment to plan ways to "disappear" from the Client's awareness during a birth. Work very diligently to learn how to present informed consent in ways that don't force your bias onto the client.

**The Worry-Wart You.** Do people frequently tell you that you are over-dramatic, sensitive, fragile, overly detail oriented? Does worry drive you to make detailed plans to feel in control? Do you create things to worry about and experience life as a constant crisis? Do you feel the most comfortable when others are focused on you? Are you a high adrenalin junkie who needs to be constantly involved? When things are calm and peaceful, do you begin to fear that you will be blindsided by something bad? Do you want to be your client's "favorite provider on the team" and have a hard time accepting when you are not? Do you have repetitive behaviors or are super picky about how everything in the practice is arranged to create order and be in control? Is safety an overtly BIG issue?

**Needs:** Find someone to provide a reality check for you when you are feeling anxious. Choose one thing in your practice that doesn't have to be perfect and experiment with making it creative rather than perfect. Learn centering techniques, self-talk statements and other internal approaches to addressing fears. Be as prepared as you can, then practice walking away from planning. Beware of feeling invested in a perfect, projected scenario. Practice listening to your co-workers feelings about a challenging birth before speaking yourself. Practice intentionally letting a client bond with another provider on the team. If you have repetitive behaviors, repair your gut biome and consider the need to connect with a counselor. Be proactive in ways that you can feel special without it having to be centered on your midwifery practice. When a client has a complication focus on her fears, not your own. When you assist other providers, ask for clear/concise directions and make a list. You may not feel at home with relaxation methods, but try using some of the same supports you provide your own clients, such as hypno-birthing, meditation or yoga.

**The Super-Considerate You.** Do you tend towards co-dependency? Do you often find it challenging to make your own choices, whether that involves a restaurant menu, client care or life decisions? Do you frequently find yourself too busy taking care of others to care for yourself? Is caring for others the primary source of your identity and worth? Do you hesitate to bother others with legitimate concerns? Are you a sincere person who is well-loved, but often taken advantage of? Have you ever had controlling or abusive relationships, whether in midwifery, friendships or romance? Do you sometimes feel like you are hiding your true self? Is it hard to say what you truly feel and think, especially when it isn't in agreement with others? Is this difficulty complicated by religious constraints, extended family or a belief that others are more qualified? Do you always second-guess yourself? Do you ever find yourself resenting how others are using you but are unable to make choices to extract yourself from serving their needs? Do you avoid seeking help because you don't want to be a bother? Do you carry the weight of the practice unintentionally? Do you sometimes feel that you are the only responsible person around? Do you put off obtaining help for yourself because you assume others are more important and need help first?

**Needs:** Caring for others is how you feel important and worthwhile. That's lovely, but you must also learn to accept that you cannot be all things to all people all of the time. Instead, work to contain your care-giving to specific time frames and make room to give care to yourself as well. Be careful to separate family time and client time. You will tend to neglect your own needs for food, sleep etc. Remind yourself that taking care of yourself is taking care of your clients and your family. You are the most important person to care for them so you must be well nourished and rested. Don't take on the needs of others or causes outside of the priorities of yourself, family, clients and one specific activity that brings you great joy. Do NOTHING extra out of obligation. Choose and arrange for at least one person whom you are allowed to call at any time with your own needs without apology. Talk with your team about keeping their questions to you simple; no multiple, complex decisions at once. Mark out your off-call time on the calendar and KEEP IT. Ask your co-workers to help you keep it. Ensure that everyone on the team have equal access to off-call time ahead of time and STICK to it except for emergencies. Refuse to feel guilt for saying no to covering their responsibilities, reminding yourself that it all was delegated equally and fairly. If you feel stuck, ask a trusted co-worker to help you make a decision. It's okay. That's why you are a team. If you sometimes wonder if you are in an unhealthy relationship, get counseling now! Don't wait. It won't get easier by trying harder. You need another voice to give you perspective. Your relationship should either improve or it should end.

**The Control-Freak You.** Do you find yourself always filled with anxiety? There are sometimes physical reasons for extreme anxiety, (i.e. hyperthyroidism) so be sure you are aware of them and rule them out. Once done, it's time to address them face on. Many of the traits of a control freak are similar to the worry-wart person. The difference is that you are more fear-driven rather than driven by the need to be loved and accepted or the center of attention. You tend to be overly detail-oriented and worried about everything. You make many lists and may lie awake at night planning and thinking contingency plans. You may have difficulty coping with changes in your plans or adjusting to deviations from your schedule. It can actually feel foreboding for you to experience prolonged periods of joy and contentment. You may even have developed a coping mechanism whereby you create a crisis when there has been a period of peace so that you can then manage the known crisis instead of waiting for one to unexpectedly broadside you. This pattern brings some relief to your feelings of foreboding. Do your co-workers complain that you are too picky about how things are done? Do you find it hard to share the load of work because you are afraid that it won't be done right?

**Needs:** Get a flavor of your fears. Ask yourself what helps to diminish the anxiety and change your focus. Practice anxiety reducing exercises (self-statements, deep breathing, visualize a safe place, lie down and relax). Talk to a co-worker and ask them to help you put your fears back into the present reality. Avoid indulging in “what if’s”. Usually fears are about the future which is not controllable. If you can bring yourself back into the present you can relax. Ask yourself, “Am I safe right now? Is everything okay now?” Remember, 99.9% of future fears don’t happen. Pretend that you are confident by trying to convey it in your voice and your body language. NEVER communicate YOUR future fears to a client. Do not say, “If such and such doesn’t happen/does happen then.....” Just give your client simple and straightforward choices whenever possible. This way she feels in control of what is happening to her body and the decisions that are being made relative. Then you indulge yourself by absorbing some of her confidence, knowing that you are serving her choices rather than your fears. Even in an emergency transport, don’t second guess yourself. Choose to feel in control of your choices: If it feels out-of-control, then find something small where you CAN be in control (I CAN communicate clearly to hospital personnel, I CAN grab my client’s favorite comfort pillow as we dash out the door) Have staff meetings where roles are openly discussed and clearly defined. If there is an exact process you want done, such as how equipment is cleaned, write it down and put it in a staff handout/notebook, then let go of the job if it is assigned to someone else. Change is hard for you, so consider having “out-of-the-box thinking” planning meetings at least twice a year where everyone offers new ideas so you can continue to grow and change up your way of doing things.

**The Detached You.** You tend to live in your head. Sometimes you’re just not completely in your body and aware of sensations and emotions. If asked about them, you can’t you easily describe them. Do you sometimes have difficulty staying in the present or have trouble clearly relating your life to time frames? Do others mention that you seem disoriented at times or have difficulty keeping track of what is going on despite being quite intelligent and creative? Are you unsure about how much childhood trauma you really experienced or don’t trust your own perceptions about it? Maybe you simply don’t remember a whole lot about your younger years. Do you ever feel like you are a different person or other people tell you that they can’t figure out who you are? Do you often have trouble remembering events that have taken place? Do you even feel as if you have an emotional shut-off switch over which you have little control? Does your approach to problem solving change dramatically from time to time? Does the world ever feel unreal or your own body feel far away? Do you have a high pain threshold or are you able to leave your body? Is hypnosis easy for you?

**Needs:** When you are stretched thin or are triggered at a birth, you may need help from your team to describe or interpret your feelings and physical sensations and keep you present. You may need a team mate to provide you with a selection of word options to choose from in order to identify your sensations. There are two ways to look at the fact that you can turn off emotions or “leave” your body. One is that you are so good at the skill of moving away from pain, you may as well be left alone to use it when it’s needed to keep physically going or to assist a client during a difficult birth without succumbing to your own emotions or fatigue. The other way to look at it is that you may miss key experiences and the joy of celebration. That can leave you feeling disconnected from the birth, from the people around you and from your career. If you can’t recall the actual details about a woman it can certainly affect care-giving. Make it a practice to either review the chart before each visit or write a “care story” for each woman to keep her fresh in your mind. You may need to connect periodically with your co-workers or review the chart in order to have a sense of time passage and continuity of events. If you drift, you may need to be brought back to the present and into your body by grounding techniques that involve sensations, such as touching things in your physical surroundings, drinking a cold beverage or having your co-worker give you a back massage. If necessary, help yourself find a more beneficial state by asking yourself questions or engaging in discussion that requires a different level of thinking.