

## Care for the Caregiver: Tips for Families and Educators

Parents, teachers, and other caregivers play a critical role in helping children cope with crises, often ignoring their own needs in the process. However, caregivers must take good care of themselves so they are able to take good care of the children in their charge.

1. A natural instinct for parents and other caregiving adults is to put their personal needs aside in order to ensure the safety and well-being of the children in their care. It is extremely important, though, for caregivers to monitor their own reactions and take care of their own needs, because failure to do so can result in stress and burnout. This is particularly true for crisis situations in which normal support systems and routines have been severely disrupted and for which recovery will take a long time.
2. Burnout interferes with one's ability to provide crisis support and intervention assistance. This can be true in the aftermath of an immediate crisis like a natural disaster or terrorist attack as well as during extended periods of stress and anxiety like war.
3. In addition to burnout, caregivers also may experience secondary trauma or stress that results from learning about another's traumatic experience and/or helping someone who has been directly affected by such tragedy.
4. While any caregiver may exhibit signs and symptoms of stress and secondary trauma, caregivers who have their own histories of prior psychological trauma, loss and grief, mental illness (including substance abuse), or who lack social and family resources will be more vulnerable to these issues.
5. Some reactions are commonly experienced by caregivers after a crisis; however, others may warrant professional support or monitoring. These include:
  - a. *Cognitive reactions* such as an inability to stop thinking about the crisis, loss of objectivity, an inability to make decisions, or an inability to express oneself verbally or in writing.
  - b. *Physical reactions* such as chronic fatigue and exhaustion, gastrointestinal problems, headaches and other aches and pains, loss of appetite, or difficulty sleeping.
  - c. *Emotional reactions* such as excessive worry or anxiety, numbing, irritability, anger or rage, distressing thoughts or dreams, and/or suicidal thoughts and/or severe depression.
  - d. *Behavioral or social reactions* such as alcohol and substance abuse, withdrawal from contact with loved ones, or an inability to complete or return to normal job responsibilities.
6. All caregivers need to consider the following suggestions to prevent burnout:
  - a. *Physical self-care.* Maintain healthy eating habits and drink plenty of water; limit the use of alcohol or other substances; get adequate sleep.

- b. *Emotional self-care.* Know your limitations; recognize that your reactions are normal and occur frequently among caregivers, including many well-trained crisis professionals.
- c. *Social care and connection.* Maintain normal daily routines; connect with trusted friends or family; connect with systemic supports such as your faith and school communities; process or debrief the events at the end of each day with other caregivers or colleagues. This is especially important for crisis responders.
- d. *Adequate support resources.* Acknowledge that you and your family may need additional help. Access crisis support resources provided by community and volunteer services, including social-emotional and mental health supports.
- e. *Systems/procedural care.* Advocate for and set limits on the number of consecutive responses; promote policies that allow for crisis responders to step away from a response if the crisis hits too close to home; ensure that crisis team leaders establish a supportive atmosphere of self-care.

See *Care for the Caregiver: Guidelines for Administrators and Crisis Teams* for additional information for school staff, <http://www.nasponline.org/resources-and-publications/resources/school-safety-and-crisis/care-for-caregivers/care-for-the-caregiver-guidelines-for-administrators-and-crisis-teams>.

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