



Resource Article

**INSIDE
THIS
ISSUE**

**EI PROVIDER
RESILIENCY**

We begin the New Year with a KIT series on provider resiliency. In the field of education, teacher attrition has long been a problem. Teachers get burned out, become stressed and overloaded with a variety of bureaucratic responsibilities, and many good teachers leave the field or become less enthusiastic and effective. Historically, teacher attrition has been the means for discussing this problem; research is now shifting to the subject of resilience. Instead of “*Why they leave?*” the question has become “*What makes them stay?*”

In their article, “Don’t Sweat the Small Stuff: Understanding Teacher Resilience at the Chalkface.” Mansfield, Beltman, Price, and McConney sought to gain a better understanding of teacher resilience by asking graduating and early career teachers how they perceive teacher resilience. The researchers analyzed the responses and created a framework to conceptualize this subject.

Data were collected from 125 graduating and 75 early career teachers. The respondents were

asked the open-ended question, “How would you describe a resilient teacher?” Responses were analyzed for content and themes. Twenty-three common aspects of resilient teachers emerged, including descriptions such as *committed to students, reflects, cares for own well being, manages emotions, persists, has confidence and self-belief, and seeks help and takes advice*. These aspects were further organized into four broad dimensions: 1) Emotional, 2) Motivational, 3) Professional-related, and 4) Social. When examined more closely, the interplay between these dimensions became apparent, and a four dimensional framework of teacher resiliency was constructed (see page 45 of the full text article, URL follows).

KIT Newsletters are
available online at
www.edis.army.mil

Resource Article	1
On the WWW	2
What do the data say?	3
Consultation Corner	4
Continuing Education	5

KEEPING IN TOUCH



Resource Article (continued)

Although data indicated that aspects of the emotional dimension was most commonly listed (61% of respondents) and the aspects of the social dimension was listed least often (34% of respondents), the authors reported "...the majority of respondents indicated aspects that referred to more than one dimension, reflecting the view that resilience is perceived as a multi-faceted construct." In fact, 80% of respondents listed more than one dimension as contributing to resilience. Results also suggested some differences based on career stage. The ability to *bounce back* as characteristic of resilient teachers was listed by 14% more graduating teachers than early career ones. While early career teachers reported the importance of *self-care and maintaining work-life balance* 10%

more frequently than graduating teachers.

The significance of resiliency cannot be underscored. Given the interconnectedness of the dimensions, resilience is not simply a list of traits or personality characteristics but instead an ongoing process of the interaction of person with environment. By having a better understanding of resilience, providers can bolster their skills and work to enhance their program's capacity to development and support of provider resilience.

Mansfield, C.F., Beltman, S., Price, A. and McConney, A. (2012). Don't sweat the small stuff: Understanding teacher resilience at the chalkface. *Teaching and Teacher Education*, 28 (3). pp. 357-367. Accessed December 2012 from http://researchrepository.murdoch.edu.au/6291/1/Dont_sweat_the_small_stuff.pdf



On the WWW

The website this month is "Compassion Fatigue Awareness Project" (CFAP).

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

The opening statement on the home page reads, "Did you know...caring too much can hurt." The mission of this

project is to promote awareness and understanding of compassion fatigue and its effect on caregivers. The site includes information about what compassion fatigue is, what are signs for recognizing it, and what can be done. Within the resource section of the website are further awareness articles and resources.



What do the data say?

What are common stress reactions in healthcare-related providers?

As early intervention providers, you support families in numerous ways, including helping them cope with stressors that occur during their day-to-day routines and activities. While the work of early intervention can be extremely satisfying and rewarding, it can also be stressful. Overtime stress can build up and become compassion fatigue. Being aware of stress reactions and supporting team members are important for promoting resiliency.

So what are common stress reactions in healthcare-related professionals? To answer this we look to resources from the Real Warriors Campaign. Following are some of the behaviors identified:

- Nervousness and anxiety
- Anger and irritability
- Mood swings or emotional outbursts
- Lowered self-esteem and feelings of helplessness
- Feeling cynical, jaded or less able to trust others
- Difficulty concentrating
- Withdrawal from others
- Trouble sleeping because of concerns regarding individuals on their caseload

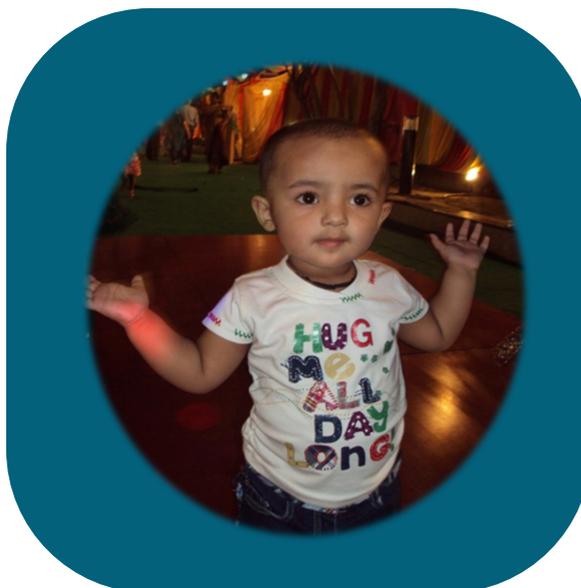
Of course, being aware of these behaviors is only a first step. The next question to ask and answer is “What can be done?” Following is a list of strategies that can be helpful in resiliency building. These are self-care strategies as well as suggestions that team

members can share and talk about with their colleagues.

- Focus on the positive impact of your work.
- Talk to your colleagues for support.
- Set boundaries for yourself.
- Stay physically fit.
- Reduce everyday stressors.
- Avoid comparing yourself with others.
- Be patient with yourself.

Just as early intervention providers work hard to foster resiliency in families, it is important to promote resiliency in early intervention teams.

<http://www.realwarriors.net/healthprofessionals/militaryculture/compassionfatigue.php>





Consultation Corner

Beginning this month through April 2013, we are excited to have Dr. Lisa Naig Hodges as our consultation corner expert. Lisa will address the topic *Early Intervention Provider Resiliency*.

Lisa Naig Hodges has been in the field of early childhood special education (ECSE) for 20 years. She is currently an ECSE consultant for Heartland Area Education Agency 11 (AEA) in Iowa and serves four school districts. Her responsibilities include working with children, birth through age five, with and without special needs as well as helping preschool teachers through the Quality Program Preschool Standards (QPPS) process toward meeting verification requirements. In August 2010, she graduated from Iowa State University with a Ph.D. in ECSE Leadership. Her research interests included professional burnout and compassion fatigue in ECSE providers, emotional support for families and professionals, and the effectiveness of the early intervention system.

What are basic stressors ECSE providers face that may lead to professional burnout and compassion fatigue?

This month we'll look at *the common stressors* and next month we'll begin to explore how do ECSE providers cope with stressors. As you read about the following common stressors take time to reflect on any stressors you may be experiencing and begin thinking about how to lessen them.

ECSE providers may experience stress from working with difficult team members and colleagues, providing services to families who they perceive as challenging, and conforming to job demands, such as fluctuating caseloads, paperwork requirements, agencies that do not fully understand what they do, and trying to adapt to their office environments.

Working as a Team with Colleagues: For many ECSE providers, working within teams can be stressful. Colleagues may be from their own agencies or may work for different programs. Unfortunately, dysfunctional teaming and issues with communication and power can be common for ECSE providers. When faced with teaming issues, they may react in different ways. At first, they may try to befriend colleagues or give them the benefit of the doubt. However, when those efforts do not work, ECSE providers may try to ignore and avoid colleagues, (e.g., not going to the office when they notice the colleagues' vehicles in the parking lot) and only interacting with them when necessary. At different times, they may start to second-guess their own abilities or become critical of their colleagues' abilities, especially when they feel families and children are being affected.

ECSE providers may feel stress from colleagues who work for the same agency but serve a different population or have a medical versus educational focus and do not understand the importance of early childhood. With these colleagues, ECSE providers may feel early intervention services for children and families are not as valued as other services. Staff from other programs may also contribute to stressful experiences for ECSE providers. For example, ECSE providers' might feel like their recommendations or input area not taken into consideration. Experiences with administrators can be stressful when ECSE providers feel as if an administrator is not allowing appropriate programming for children and families.

Supporting Families Who Face Challenges: A second stressor for ECSE providers can be working with families who are facing challenges. For the most part, ECSE providers can become frustrated when families do not keep appointments, require too much of a providers'

Consultation Corner (continued)

time, do not follow through with agreed upon plans, and/or may not have wanted services in the first place. When families cancel appointments, ECSE providers may start to question the benefit of their efforts. Sometimes, ECSE providers may have feelings about children only getting stimulation when they or other providers are in the families' homes. Thus, based on their perceptions about families' choices, providers may have feelings that families do not value education for their children.

ECSE providers also may experience situations when they feel families are taking advantage of them, believe they are not getting anywhere with families, or feel they have done everything for families. In these situations, ECSE providers may become critical of families and change their approach to services. On the other hand, ECSE providers may also try to be more understanding and empathetic to families' situations and choices. In stressful situations with families it is always wise to ensure all efforts are in synch with quality family-centered practices. Being empathetic and meeting families where THEY are is essential.

Conforming to Job Requirements: The third stressor includes job aspects that are beyond ECSE providers'

control. These include caseload sizes, paperwork demands, agencies having a lack of understanding for what they do, and stressful office environments. Not surprising, many ECSE providers express frustration with high caseloads and paperwork requirements. However, many ECSE providers probably also understand and accept how caseloads fluctuate, although, they may wish the paperwork could stay consistent from year-to-year and not be as time consuming. In addition, ECSE providers may not always feel valued in their jobs by others in their agencies and realize that everyone does not understand early childhood.

The office environments of some ECSE providers can be stressful, especially very large spaces and sharing space with many colleagues. Depending on the day's schedule, they may spend varying amounts of time in the office and have to deal with varying noise levels and distractions. Some ECSE providers start or end their day in the office, but sometimes the schedule warrants going straight from home to the first appointment or meeting. Finally, the office environment can also be stressful when ECSE providers do not have ample access to natural lighting or the ability to see outside.

Stressors come and go, but being aware of them is an important step to alleviating them.



Continuing Education for KIT Readers

The Comprehensive System of Personnel Development (CSPD) is offering a continuing education opportunity for KIT readers.

In line with the focus on *Early Intervention Provider Resiliency*, readers are invited to receive continuing education contact hours for reading the monthly KIT publications (January through March 2013) and completing a multiple

-choice exam about the content covered in these KITs.

KIT readers will receive the exam in April 2013. There is no need to register for the CEUs. Rather, if you are interested complete the exam online at www.edis.army.mil Upon successful completion of the exam, you will receive a certificate of non-discipline specific continuing education contact hours.

Thank you for your continued interest in the KIT.
Please share your KIT questions/ideas via email to
EDISCSPD@amedd.army.mil

