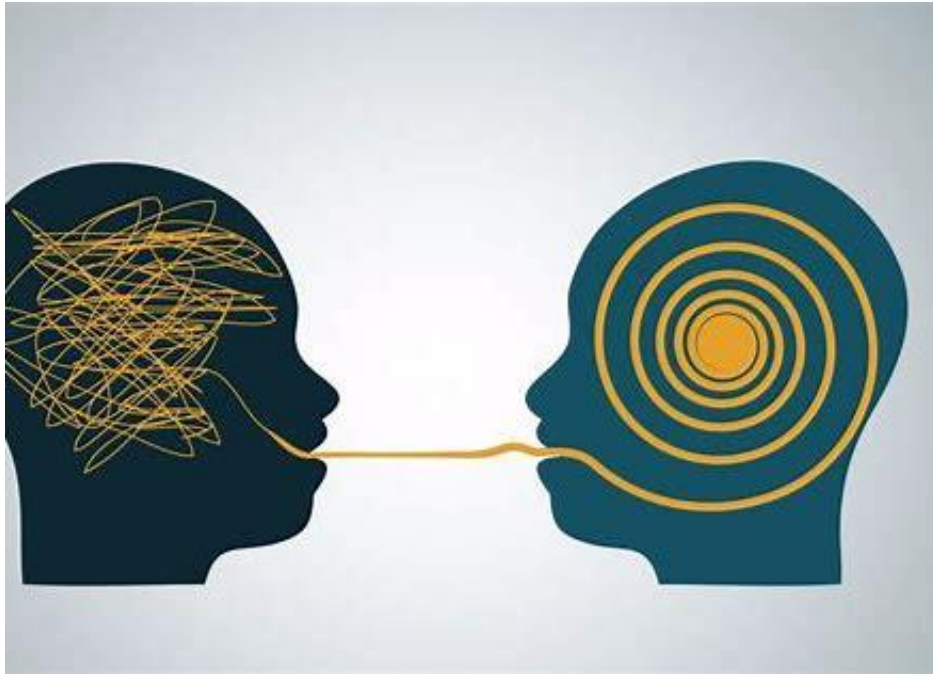


Emotions and the Care Professions: An Interdisciplinary Perspective.



- Professor Karen Healy
- Presentation
- 29/1/2021

Overview

- About heightened emotions in practice
- The concept of emotional regulation
- Understanding the cycle of emotional arousal
- The CSCE model of responding to heightened emotions in practice.
- Our study of 36 social work, midwifery and nursing students.

About Heightened Emotions



Heightened Emotions

- We use the term “heightened emotions” to refer to emotional arousal that is of sufficient intensity to substantially impact on one’s feelings, physiological responses, cognitive processes and actions (see Fox, 2008).
- Negative emotions are emotions are usually associated with a threat to us and “makes us feel agitated or uncomfortable” (Howe, 2008, p. 26). Examples of “negative” heightened states include: sadness; despair; fear; anxiety; anger; shame and disgust.
- They are transient states

The survival value of heightened emotions

FIGHT



FLIGHT oohhala!



FREEZE



Examples of impact

- Emotions have a powerful influence on communication.
- * experienced as urgent (Winkielman, Berridge and Sher, 2011)
- “*embodied* and manifest in clearly recognizable and stereotyped, behaviour patterns and facial expression, comportment and autonomic arousal” (Dolan, 2002, cited in Fox, 2008, p. 25)

- Vocal cues
 - - heightened tone
 - - speeding up
 - - difficulty speaking
- Physiological responses:
 - - flushing/ becoming pale
 - - shaking
 - - flight type responses

Important message

Emotions are powerful (can have “global” effects), intense and transient.

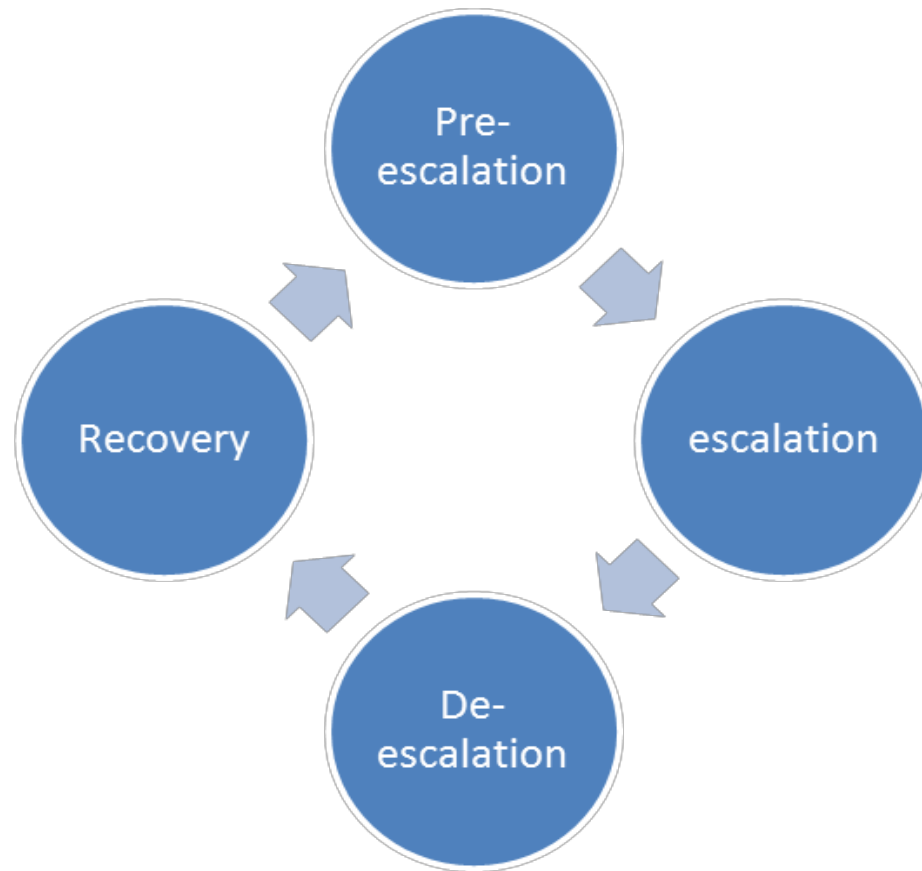
Understanding and responding to heightened emotions are important

- Heightened emotional responses are inevitable.
- Emotions contain important information: survival value
- How we manage emotionally charged encounters can have a very strong impact on our relationship with the patient/ client.
- Some forms of heightened emotions can be associated with high risk/ danger.
- Note that sometimes emotional expression can be strategically used to distract from your professional purpose.

Our interest in emotional regulation

- Our goals are to respond to heightened emotional states in ways that build and maintain the working alliance and to assist people to regulate their emotions so as to build their capacity to respond thoughtfully to their situation, to reduce the risk of harm to self and others.
- Werner and Gross (2008, p. 17) define emotional regulation as “processes that serve to decrease, maintain or increase one or more aspects of emotion.”
- Understanding the cycle of emotional arousal
- Promoting emotional regulation in ourselves and others

Cycle of emotional arousal



Pre-escalation and Prevention

- By being attuned to signs of emotional distress at this stage we can intervene to prevent further escalation of emotions. Signs of emotional distress can include:
- Physiological
- Vocal and Verbal expressions, such as expressions of frustration
- Actions that a fight or flight state

What can you do?

- Provide distraction or distance from the trigger event or experiences.
- Sharing your observations that they appear to becoming distressed and ask what support they need.
- Provide genuine reassurance of emotional and physical safety
- Engage in activities that help to reduce the heightened physical arousal.
- Empower the person to recognise their strengths and capacities to manage the emotions they are experiencing.

Signs of escalation

Heightened emotional states are often expressed in way that are instantly recognisable such as:

- crying or wailing;
- verbal defensiveness;
- heightening or increased pitch of vocal tone;
- physiological changes such as: heart palpitations; increased breathing rate; and hypersensitivity to stimuli such as sound, light or colours.

Reasoning and emotions

Heightened emotional states can negatively impact on the person's capacity:

- to listen, to store or to retrieve information
- to reason
- to manage aggression
(eg. May “hit out” verbally or physically).

The CSCE model for responding to heightened emotions

- **Communicating Confidence, calmness and non-reactivity**
- **Achieving physical and emotional Safety**
- **Promoting Collaborative communication**
- **Prioritising Empowerment**

Communicating Confidence, calmness and non-reactivity



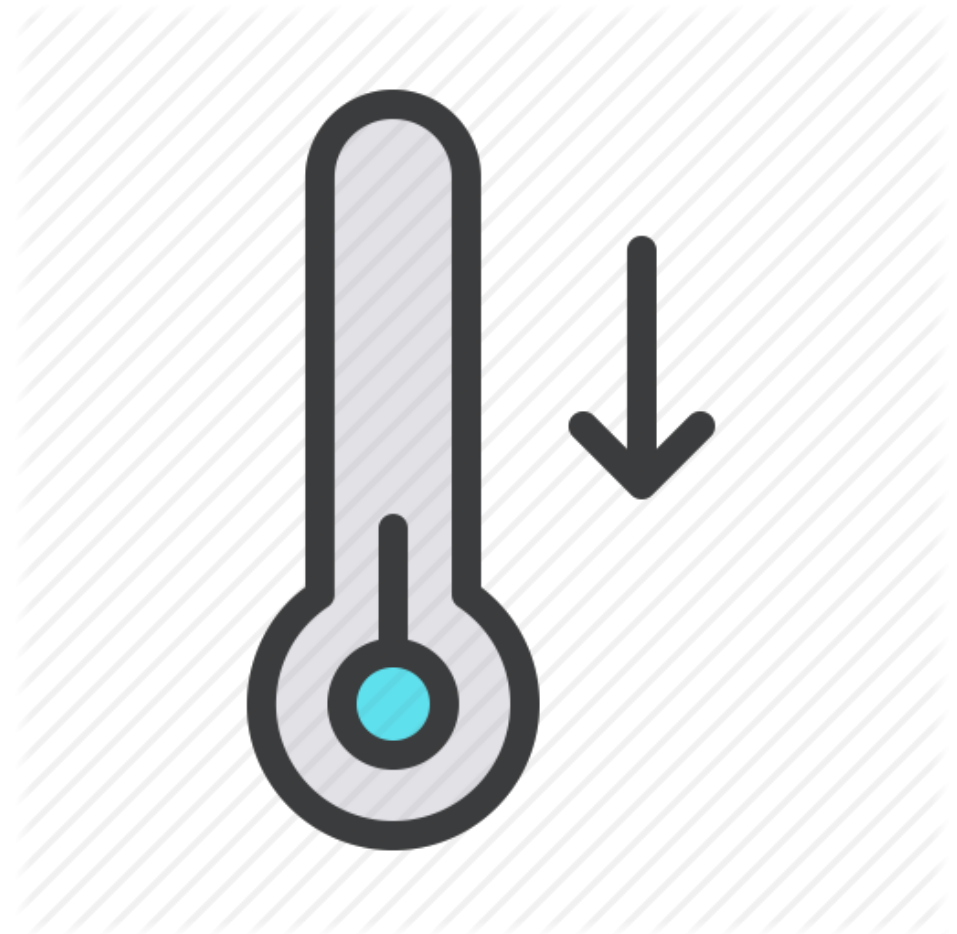
BREATHE
You got this

- Reduce emotional arousal by expressing confidence in ourselves and others, calmness and non-reactivity.
- “response modulation” - containing our own emotional responses for a purpose. Response modulation has both **thinking** and **behavioural** elements.

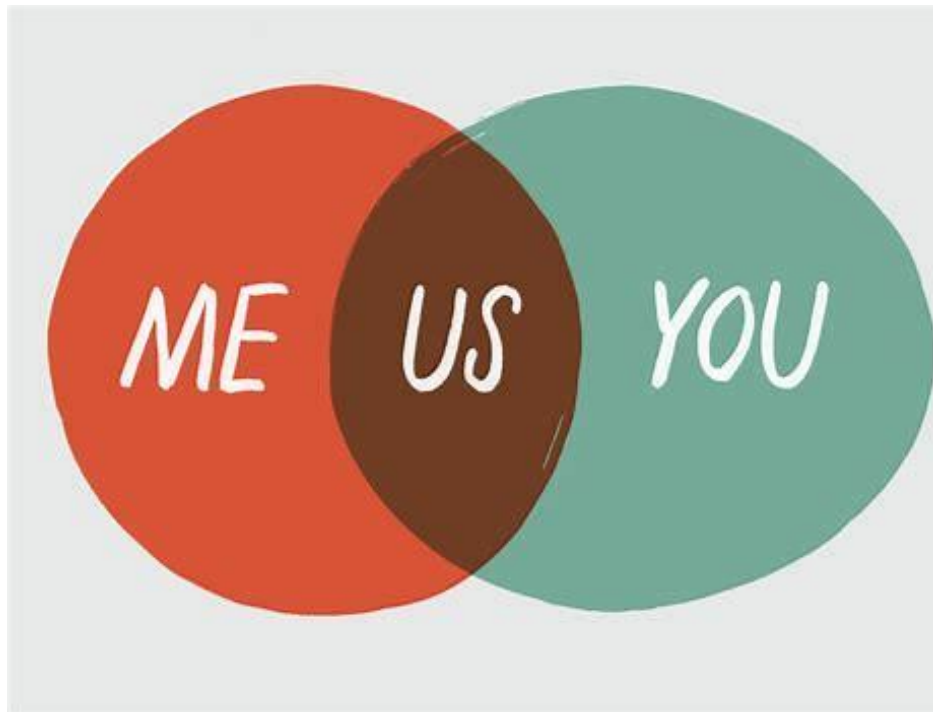
Achieving physical and emotional Safety

We need to reduce the sense of threat in the environment

- Physical safety involves minimising actual or perceived physical threats in the environment:
- Reducing sensory arousal of the environment
- Addressing potentially threatening aspects of the environment



Collaborative communication



Building and maintaining the working alliance.

- encouraging the “open expression of emotions and thoughts”
- helping the person to focus their thoughts.
- demonstrating reflective listening.
- providing space to calm one’s emotions.

Prioritising Empowerment

- What have you tried so far to deal with the situation?
- What have you thought about trying?
- Right now, what other possibilities come to mind?

buildingstrengths



Our Study



- Stage 1: 36 students across the three disciplines. Survey on identifying the types of emotions students expected to encounter in themselves and patients or service users during placement and confidence.
- Stage 2: Participants (25) then agreed to participate in an educational intervention introducing them to concepts of emotion regulation and evidence-informed principles responding to heightened emotions in themselves and in others.

Participants

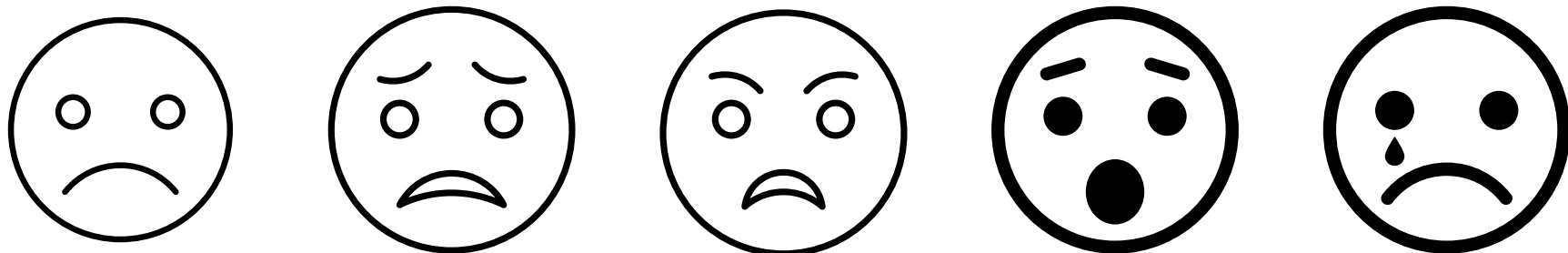
Pre-seminar survey	MSW (Q)	B.N.	B.M.	B.N./B.M.	BSW
Number	7	12	2	6	9
Av. Age	33.4	26.8	22.5	22.3	29.3
Post-seminar survey					
Number	5	9	0	5	6
Av. Age	36.4	24.8	–	24.4	28.7

Table 1: Participant disciplinary groups and average age of participants in each group.

Key emotions students anticipated they would experience on placements

	MSWQ	B.N.	B.M.	B.N./ B.M.	BSW
1.	Anxiety (6)	Anxiety (9)	Anxiety (2)	Joy (6)	Sadness (6)
2.	Fear (5)	Sadness (7)	Sadness (2)	Anxiety (6)	Anxiety (5)
3.	Sadness (4)	Fear (5)	Joy (2)	Sadness (4)	Fear (4)

Table 2: Emotions participants anticipated in themselves on placement by disciplinary group.



Participants' expectations about emotions they would experience in others

	MSWQ	B.N.	B N./ B. M.	BSW
1.	Sadness (5)	Sadness (8)	Joy (5)	Anger (6)
2.	Anxiety (5)	Anxiety (7)	Anger (5)	Anxiety (6)
3.	Anger (4)	Anger (5)	Fear (4)	Despair (6)

Table 3: Participants expectations about the emotions they expect to encounter in others while on placement.



Respondents' confidence

	MSWQ	BN	BN/BM	BM	BSW	overall
Sadness	3.4	3.5	3.7	4.0	4.0	3.7
Despair	2.9	3.3	3.8	3.5	3.3	3.3
Fear	3.6	3.3	3.7	4.0	3.7	3.5
Anxiety	3.1	2.9	3.8	2.5	3.4	3.2
Anger	4.0	3.7	4.2	4.0	3.7	3.8
Shame	2.7	3.1	3.8	4.5	3.0	3.2
Disgust	3.4	3.3	4.3	4.5	3.2	3.5

Table 4. Respondents' confidence in managing heightened emotions by discipline group.

Feeling unprepared

One respondent stated:

- Its [heightened emotions] kind of my biggest fear” (Bachelor of Nursing student).
- Another respondent remarked:
- I believe that students are not being prepared for the heightened emotions experienced in placement and that is why some people change to a different degree. I do think it needs to be better addressed and that strategies need to be provided to students. (Bachelor of Nursing student)
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Opportunities to discuss emotions

- I am grateful for the opportunity to discuss management of heightened emotions. I think it is a very valuable tool for work in the health care environment. We talk about needing to develop a thick skin but that seems akin to losing our sensitivities...that very thing that makes us compassionate people. (Bachelor of Midwifery and Bachelor of Nursing student)

Evaluation of the model

- Useful in helping them identify and respond to heightened emotions in others
- Useful (but less so) in helping them identify and respond to heightened emotions in themselves
- Reasonably easy to use (but room for improvement)

Keeping in “control”

“I experienced a client with heightened emotions shortly after we learned about the model. I felt that knowing there was a framework I could use really helped me to remain calm and *in control* of my own emotions when faced with the outward display of the client’s emotions. It also helped me to attempt to empathise and understand the issues underlying the heightened emotions.” (Master of Social Work Studies student, italics added)

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Similarly, a Bachelor of Nursing student stated:

“The model is effective as it gives us an idea on how to handle heightened emotions particularly in others which is very important in a clinical setting. This model also gives a sense of being *in control* of the situation.” (Bachelor of Nursing, italics added)

Values alignment

Some respondents from the social work discipline group, identified an alignment between their professional values and the model.

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- I like that it [the model] incorporates empowerment when communicating, underlining social work values in a functional aspect of practice. (Bachelor of Social Work student)

But is it too “rational”?

“The model could be a very useful tool to help in maintaining calm in the face of difficult situations and intense emotional responses both in ourselves & others. I think it could be improved by also placing further emphasis on the importance of acknowledging the feelings & perspective of others such situations, allowing us as social workers to display a genuine interest in gaining insight & understanding of a person’s perspective, and in this way demonstrating respect.” (Bachelor of Social Work student)

The need for greater ease of recall

- The model requires conscious effort to memorise and understand the content in a fashion that makes that knowledge easily accessible in times it may be applied, and split second decision making may not always allow for this. (Bachelor of Social Work student)
- ? Only learnt in one session (would repetition help)?
- Is there scope to simplify further (e.g. what is the most important element of the model)?
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Next steps?

- A systematic review
- A large scale study to identify and streamline most important elements
 - Interdisciplinary study
 - International comparative study



Reference

- This paper is based on:
- Healy, K., Tower, M., & Hawley, G. (2020). Preparing students to respond to heightened emotions in field practice: A multi-disciplinary study. *Advances in Social Work and Welfare Education*, 22(1), 64-80.
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