

Princeton House Behavioral Health

today

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Trauma from COVID-19

Persists in Health Care Workers



Those in health care professions are used to working through crises, but generally in spurts. Throughout the COVID-19 pandemic, they have experienced chronic and prolonged stress with no break or opportunity for the brain to decompress. These stressors range from the risks inherent in their roles and the heartbreak of losing patients to the fear of bringing the virus home to their families and the countless other challenges that the past year has presented.

Princeton House Community Relations Representative Chrissy Isaac, LCSW, LCADC and Director of Addiction Services Nicole Orro, LPC, LCADC have discussed these struggles with health care staff at Penn Medicine Princeton Medical Center, with Isaac making rounds as a Wellness Ambassador, and Orro providing free therapy sessions for employees through the Penn COBALT network.

"It's no longer possible for them to compartmentalize stress to just work, because anxiety has infiltrated every aspect of our lives," explains Isaac. "Health care workers have not even reached a level of post-traumatic stress yet, because the chronic trauma is still ongoing."

Mental health symptoms have skyrocketed among health care staff across the country. In a recent survey conducted by Mental Health America, 93% of health care workers reported experiencing stress, 86% reported anxiety, 76% reported exhaustion and burnout, and 75% said they were overwhelmed.

"At one time, the expression was to take things day by day," adds Isaac. "Now, it's often a matter of hour by hour or even minute by minute."

Dealing with Prolonged Anxiety

Isaac and Orro offer the following tips that behavioral health providers can share with patients who are frontline workers and others dealing with long-term pandemic stress, including themselves:

- Create as much predictability as possible, with some level of flexibility. For example, waking up at the same time each day can be helpful in framing the day.
- Re-evaluate what's working. Keep track of what you may be overdoing or underdoing, and understand that the right balance probably looks different than it used to. Everyone has their own formula for what works.
- Focus on self-compassion. Give yourself permission to acknowledge difficulty, even if it means taking five minutes to find a solitary space at work to release some tears.
- Take advantage of fellowship and empathy. Connecting with colleagues who understand shared experiences can be powerful.
- Likewise, keep an eye out for changes in colleagues. Simply asking how they are doing can make a difference. Compassion for others can also be therapeutic for oneself.
- Revisit values that led to choosing the health care field. This type of reflection on human connections and healing can keep people going on darker days.

"It's normal for people feel alone in this experience, but no matter what position you hold, you're never alone," says Orro. "This is why behavioral health exists. Talking through our issues helps us survive."

If you are feeling overwhelmed, the CDC provides resources and connections to counselors and crisis hotlines at [cdc.gov/coronavirus/2019-ncov/hcp/mental-health-healthcare.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/mental-health-healthcare.html).

Music Fosters Healing for Teens

From stress relief and self-soothing to emotion regulation and physiological benefits, music plays a powerful role in mental health and well-being for many people. For teens, music often takes on an even greater significance—it can contribute to the process of identity formation.

“A key task for adolescents is to understand who they are as individuals, and music helps define us,” explains Andy Freedman, MA, MT-BC, Allied Clinical Therapist and board-certified music therapist at Penn Medicine Princeton House Behavioral Health’s Moorestown site.

“Throughout the adolescent years, we tend to attach to music in a way unlike any other point in life,” he adds. “Music becomes transitional as teens work through the trials and tribulations of adolescence. It can create a healing environment during a time of uncertainty.”

The COVID-19 pandemic has amplified that uncertainty, leaving many teens with additional stress and higher levels of anxiety and depression. According to Freedman, music can provide emotional relief and help build bonds with others, which is especially needed these days. Listening to music together can still be done virtually—and right now, it’s the format for the outpatient music therapy group at Princeton House.

Virtual Music Therapy

Throughout the pandemic, teens and other outpatients at Princeton House have participated in weekly music therapy via a secure telehealth videoconferencing platform. Sessions begin with an icebreaker and mindful listening to calming or grounding music. Patients often have the opportunity to suggest a song that’s meaningful to them to share with the group, and Freedman acts as a “therapeutic DJ” to facilitate discussion around it.

Group activities have also included progressive storytelling to music and using a shared screen to write song lyrics, which Freedman puts to music. The sessions help patients identify and work through emotions, with music as a tool to help them ride the wave of those emotions.

“Relating to teens through something they enjoy can help build the therapeutic relationship,” adds Freedman. “Music can also be especially helpful for patients who struggle with verbal expression.”

For ideas on how to incorporate music into patient therapy sessions, visit the American Music Therapy Association’s website at musictherapy.org.



Creating a Mental Health Playlist

As “pandemic playlists” have become popular, Freedman notes that mental health playlists can be particularly beneficial for those who are struggling. In the digital age, creating these playlists has become easier using music apps. Options include creating playlists of songs that:

- Feel supportive and grounding
- Match one’s mood to help process emotions, like sadness, anger, or happiness
- Progress from matching a difficult emotion to a more desired emotional state—helping listeners ride the emotional wave

“Listening to a happy song when you’re angry might make you feel invalidated,” says Freedman. “But if you’re playing music that matches a difficult emotion, it’s important to be mindful of mood so you know when to switch gears to help you achieve a more desired emotional state.”

Protecting Children of First Responders from Trauma

As behavioral health providers know, trauma doesn't only affect the mind or body—it can change a person's life. Unfortunately, this concept can also extend to the children of those experiencing trauma, including to the families of first responders.

"When children witness the effects of trauma on their parents, it can change how they see the world," explains Iris Perlstein, LCADC, LPC, ATR-BC, Clinical Specialist/Coordinator with First Responder Treatment Services at Princeton House. "They may become more anxious or fearful about life, or feel an intense sense of responsibility to anticipate moods and try to keep their parents calm and happy. This secondary exposure can cause considerable suffering in a child's life."

Likewise, when parents deal with overwhelming trauma as part of their jobs, the anxiety about how their stress responses might be impacting their children can compound their own symptoms.

This shared emotional cauldron has been magnified by the COVID-19 pandemic and the fear of bringing disease home to one's family. In fact, the germ theory model of how infection can spread to exposed individuals has many parallels with secondary trauma and its long-term, multigenerational impact, according to Perlstein.

"The difference is that traumatic response is an epidemic that does not benefit from masks," she says. "The best prevention and treatment can begin by acknowledging the problem, not covering it up."

Perlstein notes that whenever possible, it's beneficial for behavioral health providers to examine how the family is functioning as a whole. When working with first responders individually, she recommends focusing on validation to help them create a safer space to communicate more openly with their children. She offers these tips that first responders can use with their children:

PAY ATTENTION. It's important to tune in to children and show them that they have your full attention. Setting aside at least 15 minutes every day to have a conversation can be beneficial.

LISTEN REFLECTIVELY. This involves repeating back what was said and asking if you got it right.



READ BETWEEN THE LINES. A parent can usually sense when something is off. In addition to what is being stated, consider what is not being said.

BE UNDERSTANDING. Telling a child that you understand how they feel goes a long way.

ACKNOWLEDGE THE VALID. Acknowledge that the child's feelings and behavior make sense when there are facts and logic that support it.

SHOW EQUALITY. Demonstrate that even though children are young, their feelings carry equal weight as part of the family.

"First responders are taught to call for backup in crisis situations, but they also need to apply that to themselves," adds Perlstein. "When they seek the help of a behavioral health provider and begin to understand their own trauma, they can start managing and protecting their health and the well-being of their entire family."

In addition to inpatient services for first responders and adults, Princeton House offers intensive outpatient treatment services for children, adolescents, and adults, currently via telehealth.

Regaining Control with the Help of *Self-Compassion*

The COVID-19 pandemic has turned countless lives upside down. For women in particular, it has added numerous challenges and stressors to an already heavy load while making their traditional social outlets less available.

“Women are stretched thin in trying to take care of others while juggling work, at-home schooling, finances, and other concerns, and we’re seeing personal well-being take a back seat,” says Sarah Carstens, LCSW, LCADC, Clinical Manager of the Women’s Program at the Eatontown site. “It’s astounding how so many women are having trouble meeting basic needs like getting enough sleep and adequate nutrition during this time.”

In working with patients in Princeton House’s Emotion Regulation track—which helps women build self-compassion as they approach the difficulties they are experiencing—Carstens stresses the importance of first caring for the physical self. The creation of a baseline of self-care can in turn reduce vulnerability to the more intense negative emotions.

It can be incredibly hard to have self-compassion during this time, especially for those with perfectionist tendencies, but one key is recognizing that the pre-pandemic “rulebook” of what needs to be accomplished on any given day is no longer realistic.

To stop the cycle of emotional distress, Carstens suggests helping patients to:

Ask themselves if what they’re doing is working for them in the present time. Very often, the answer is no.



Imagine what it might be like to do things a little bit differently, even if that means simply getting up five minutes earlier to start the day with a mindfulness activity.

Begin to slowly shape things within their grasp and notice the differences in what’s working.

Be mindful of the way emotion is experienced in the body, and explore coping skills to match. For example, if a bodily response to anger is muscle tension, deep breathing may not be enough to help regulate that emotion. Instead, a more physical release such as intense exercise may be needed.

Try engaging the five senses—from using aromatherapy to wrapping up in a blanket warmed in the dryer.

Look for balance and delegate when appropriate. For example, children in middle school may be able to prepare their own lunch or help with laundry.

“There’s no one-size-fits-all approach to coping,” adds Carstens.

“Even for our staff, the challenges and complexities of this time are not lost on us. We try to build flexibility into virtual treatment sessions and consider individual circumstances so that the ability to access care isn’t another stressor.”

New Director of Inpatient Admissions



Jon T. ("JT") Higgeson, MA, has been appointed Director of Inpatient Admissions at Princeton House and the Behavioral Health Emergency Department at Princeton Medical Center, which is dedicated to providing acute care for behavioral health patients in a safe environment. Higgeson joined the Princeton House Admissions Department in 2017 as a crisis clinician and became Manager of Inpatient Admissions in 2019.

"I always tell admissions clinicians that they are problem solvers for those who cannot visualize their next steps," he says. "We can represent hope and a chance for change for our patients. The most important thing we can do is to connect with people and reassure them that this is the place where change can begin."

Prior to his work with Inpatient Admissions, Higgeson spent 13 years with Princeton House as a case manager with NuView Academy in Middlesex County.

With an extensive background in child and family counseling and case management, he understands the significance of how helping struggling parents can have a profound impact on their children. He has also worked as an instructor training professional rescue agencies, military organizations, commercial guides, and fire/EMS teams in swiftwater and flood rescue techniques.

To reach the Admissions Department at Princeton House, please call 888.437.1610 (option 1 for inpatient admissions).

For additional questions about inpatient admissions, Higgeson can be reached directly at 609-497-3329 or Jon.Higgeson@PennMedicine.UPenn.edu.

Chaplain Educator Joins Princeton House Team



Imam Jawad Bayat, MA, ACPE Certified Educator, has joined Princeton House as Manager of Pastoral Care and Clinical Pastoral Education. A son of refugees and a first-generation Afghan-American who was raised in New Jersey, he recently returned to the region after serving in chaplain and educator roles at the Cleveland Clinic, where he completed his multi-year ACPE educator certification. His prior roles include serving as University Chaplain at Fairfield University and as Psychiatric Chaplain at Greystone Park Psychiatric Hospital in Morris Plains, New Jersey.

Committed to the spiritual care of all people, Imam Bayat is one of the first Muslims and the first Afghan-American to be a certified educator with the Association of Clinical Pastoral Education (ACPE). His role at Princeton House combines his passion for education with his interest in helping marginalized

populations. He serves as primary chaplain for inpatients, provides outpatient coverage, supports staff members, and supervises chaplain interns throughout Princeton House.

"I focus on transformative learning for interns to help them become more aware of their own stories and how their journeys intersect with others, which can assist them in delivering spiritual care," explains Imam Bayat. "Our patients are on a journey as well, and I'm happy to serve as one of many guides to help them find meaning along the way."



Nursing Residency Program Expands to Princeton House

Nursing residency programs are an invaluable resource to help new RNs transition from the role of a nursing student to an expert in clinical practice by providing holistic support via peer interactions, clinical experiences, and mentoring. The Penn Medicine Princeton Health Nurse Residency Program was recently broadened to include nurse residency opportunities at Princeton House. These nurse residents will also rotate through Princeton Medical Center, learning from experienced medical/surgical nurses. The 12-month program accepted its first nursing resident in March.

"Beyond the ability to manage physiological symptoms, behavioral health nurses need very strong clinical assessment skills to be able to provide holistic care for a patient population that may not always be able to communicate information based on their disease processes," explains Sonora Reynolds, DNP, RN, Director of Patient Care Services at Princeton House. "In addition to providing transitional support, this program helps nurses foster the development of specific skill sets so they can facilitate optimal outcomes for our patients."

Nursing resident positions will open periodically throughout the year and can be found at pennmedicine.org/careers-at-penn-medicine.

Dr. Steinberg Named Distinguished Life Fellow



Susanne Steinberg, MD, Medical Director of Princeton House's Moorestown outpatient site, has been elected to Distinguished Life Fellow of the American Psychiatric

Association. With this distinction, she joins an elite group of psychiatrists who continue to make significant contributions to the field of psychiatry. Distinguished Life Fellow is the highest honor that the American Psychiatric Association bestows upon its members.

Podcast Series Earns PeRCy Award



Princeton House's Mind on Mental Health podcast series earned a 2020 PeRCy Award from the Healthcare Planning

& Marketing Society of New Jersey in the category of Special Recognition for Niche Marketing. The society presents the PeRCy Awards annually to recognize the best marketing and communications campaigns by New Jersey hospitals and health care systems.

The podcast series was launched in 2020 to provide professional guidance and perspectives on a variety of mental health and substance use-related topics. Facilitated by Senior Community Relations Specialist Andrew Dean, LCSW, each episode features insight from Princeton House experts on issues such as managing anxiety, coping, and building resiliency during the COVID-19 pandemic.

Social Justice Panel Discussion



On January 28, **Nicole Glover, BCC, LPC, LCADC, ACS**, Clinical Manager of the Princeton House Women's Program at the Hamilton outpatient site, participated in a panel discussion on "The Intersectionality of

Race, Culture, and Life" as part of the South Brunswick School District Winter Parent Academy Series. In this webinar, participants from diverse backgrounds shared their personal experiences and perspectives on the interconnected nature of social categorizations, particularly as they relate to implicit bias and marginalized groups.



For a fresh perspective on coping with today's challenges, check out the **Mind on Mental Health** podcast series—available free, wherever you get your podcasts, or via mindonmentalhealth.podbean.com.

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Serenity While Sitting

Chair Yoga Makes this Allied Health Therapy More Accessible

As a yoga teacher for more than 20 years, Morgan Mahoney, ATR-BC, Senior Allied Clinical Therapist at Princeton House's Hamilton outpatient site, has noticed that chair yoga is great way to broaden accessibility and enhance the comfort level for this therapeutic modality. With telehealth as the primary outpatient therapy vehicle over the past year, chair yoga has fit in perfectly for Princeton House adult and women's groups.

"Not everyone has the space or ability to get down on the floor to do yoga," explains Mahoney. "Chair yoga can accommodate every age and skill level, and we can modify movements according to physical health. Plus, during telehealth sessions, we're all sitting in chairs already."

The benefits of yoga include improving flexibility and balance, reducing blood pressure, and easing anxiety and depression. With practice, yoga helps people reunite the breath and the body to connect with the energy within themselves.

Each chair yoga session features stretches and focused breathing exercises that patients can later practice on their own. Mahoney often suggests setting an intention for each practice, such as gratitude. She provides insight on how the movements positively impact the body and mind, and participants share feedback with the group. In addition, depending on group preference on any given day, Mahoney may supplement chair yoga with art therapy to offer participants another way to express themselves.

"We keep our practice light and build in laughter," says Mahoney. "With the collective benefits of yoga and the support of the group practicing together, patients can minimize isolation and uplift their mood."

A Focus on Breathing

Helping patients reconnect with their breath can bring them from a sympathetic nervous system response to a parasympathetic response, decreasing the heart rate and pulse. Mahoney recommends this simple exercise:

Inhale

to the count of 5, thinking of the word inhale.

Pause

to notice the energy exchange between the inhale and exhale.

Exhale

to the count of 6 or 7, thinking of the word exhale.

