CLINICIAN SELF CARE:

1. To wash away stress, try taking a 20-minute "sound bath." Put some relaxing music on your stereo, then lie in a comfortable position on a couch or on the floor near the speakers. For a deeper experience, you can wear headphones to focus your attention and to avoid distraction. You can do this in the office, between sessions, with headphones/ipod etc.

Choose music with a slow rhythm - slower than the natural heart beat which is about 72 beats per minute. Music that has repeating or cyclical pattern is found to be effective in most people.

As the music plays, allow it to wash over you, rinsing off the stress from the session/day. Focus on your breathing, letting it deepen, slow and become regular. Concentrate on the silence between the notes in the music; this keeps you from analyzing the music and makes relaxation more complete.

This can be adapted for clinical work, as well.

2. If you need a stimulation after a day of work, or for clients who are avoidant, dissociative, immobilized, or disconnected, go for a faster music rather than slow calming music. Connect the music to breathing, walking, memories and images, meaning.

When going gets tough, go for a music you are familiar with - such as a childhood favorite or favorite oldies. Familiarity often breeds calmness.

Take walks with your favorite music playing on an
ipod/walkman. Inhale and exhale in sync with the music. This is a great stress reliever by combining exercise (brisk walk), imagery and music.

Listening to the sounds of nature, such as ocean waves or the calm of a deep forest, can reduce stress. Try taking a 15- to 20-minute walk if you're near the seashore or a quiet patch of woods. If not, you can buy tapes of these sounds in many music stores.

(From Music Therapy Holistic therapy Online, 2010)

3. Here is something I did in Haiti a lot to assist with sleeplessness, nervousness, pervasive fear at night, shortly after the earthquake: Have clients identify a favorite song, album, artist etc. that is calming and relaxing. If they can play music on an ipod or walkman, have them listen to music and regulate (i.e synch) their breathing with the music.

4. For clients with flashbacks or night terrors (especially in the middle of the night), and with adult onset stutter: Have clients who enjoy singing, sing a familiar song into a tape recorder and record them. Offer to sing with them (or sing after them, so they can hear you) into the tape or recording device. If they have a way to play the tape/song at home (I have managed to get several old tape recorders donated for those who don’t, or it can be done through a computer for more high tech systems/people) they can play it during “scary nights” (or days, for that matter). Playing the song in the middle of the night, singing along with it, can help restore connection to the present so that these symptoms are less distressing and eventually, are minimized.
5. The Three Dimensions of Breath:

Our breath is directly linked to our nervous system—and, is the motivator of movement. Working with breath can assist those who are experiencing a stress reaction to calm down. If someone is very stressed or agitated, and, if someone is traumatized, its important not to direct them to change the breath too much (as in asking them to take a big, deep breath). This activity is about just noticing something that is already going on with the breath. Ask clients to get comfortable—they can stand up, sit in their chairs, or even lie down! Begin by directing client to notice their “internal landscape”, or the inside of their bodies. For example: “Just take a few moments to notice what’s going on inside your body. Can you feel tension or relaxation, tightness or softness, pain or no pain? Can you notice your breath and heartbeat? Now, notice how you are breathing—we’ll call this your “signature or regular breath.” Notice the length of your inhale and exhale, notice how deep your breath does or does not go. In what areas of your body do you feel your breath? Now I am going to guide you through 3 dimensions of breath. These dimensions are present in every breath we take, even if we don’t notice them. Here we go:

1. We’ll start with the “widening” breath. On your inhale, notice if your ribs get wider, so that you grow wider side to side. Take 3-5 breaths like this. On the fourth or fifth breath, notice if other areas of your body are widening, too. Now go back to your signature breath, and see if anything has changed.

2. Now we’ll do the long or lengthening dimension of breath. When you inhale, notice if your spine grows longer, like an accordion opening, or like a flower stem unfolding so a flower reaches for the sun. Do this 3-5 times, and again, notice if other parts of your body lengthen, too. Now go back to your regular breathing. Has anything changed? What do you feel
like now?
3. The third dimension is the “Deep” dimension, also called front-to-back. Here, we get thicker, or deeper, front to back. So our sternum, or breast-bone, gently rises outward, or forward, and our spine gently pushes backward. If you were standing between two walls, your front and back would touch them. Again, do this 3-5 times, and notice how much of the rest of your body is involved. Then go back to your regular breathing and see what’s changed. Take a few moments to notice the changes in your breathing and in your body, and when you’re ready, open your eyes and let’s go back to our seats.

What did you notice?

*Note to clinicians: these 3 dimensions correspond directly with developmental stages in movement and personality development: The widening breath relates to the horizontal dimension in human development and movement. This is the earliest dimension (think infant), and is when we explore space. People who are “traumatized”, by definition (especially in captivity), can be frightened of space. The “long” dimension relates to verticality: coming into our own. Using our weight. Taking a stand. Growing up. I have observed a “loss” of verticality, or a loss of effective “push” or “strength” in verticality, in many survivors. The “deep” dimension relates directly to our ability to move forward, backwards, sideways—in multiple directions. It’s about our relationship to time, and to the environment (including people). I move towards what I love, or want; I withdraw from what I dislike, or frightens me. This capacity can be diminished in survivors of torture, who no longer feel they have control over relationships with other people or with their surroundings.
6. Group Activity: The Rhythm is Gonna Get You...10+ Minutes

This activity can be a fun way to explore non-verbal communication. It’s kind of like the telephone game, and it can also be used to demonstrate how a team works—and plays! Together.

Have the participants form a circle. The facilitator leads the activity.

“We’re going to send a rhythm around our circle. I’ll start. Listen to the rhythm (facilitator claps a SIMPLE rhythm). Now let’s sound it around the circle, keeping it exactly the same---pauses and everything.”

After the team has successfully (i.e. the rhythm stays basically the same, including sound of the clapping, pauses and spaces between the sound) the facilitator can make it more challenging:

“Now we are going to make it a little more challenging. We’ll send the rhythm around, but this time, we have the option to change the rhythm. Any one of us can change the rhythm---so, if you feel like changing it, just clap two times (instead of playing the rhythm), and then play a new rhythm...and we’ll keep sending that rhythm around in the same direction. Let’s try to do it without missing a beat!”

Once this has been done “successfully,” the facilitator can make it even more challenging by saying: “Now we can change the rhythm and the direction. So, we’ll start with this simple rhythm (facilitator claps another simple rhythm), and if you want to change direction and rhythm, clap three times, and then clap
the new rhythm…and we’ll send it around in the other direction.”

The objective is to send a rhythm around the circle, and be flexible and adaptive enough to change both the rhythm and direction, and keep a fluid beat.

Processing questions for team-building/communication can include:

1. What made this exercise challenging for the team?
2. What made it fun?
3. Did you ever get frustrated? What frustrated you?
4. How is this activity like communication?
5. What happens when the rhythm suddenly changes?
6. Therapeutic

Therapeutic processing questions can include
1. What did you feel when the activity got more challenging?
2. What did you notice in your body, and did it change, from round to round?
3. What feelings came up for you?