

Mini-Conference: Student Parents on Campus—  
Creating Intentional/Supportive Environments to Foster their Success  
WILSON COLLEGE  
Friday March 7, 2014: 11:00 am-12:00 pm

# “Counseling Strategies for Stress Coping and Building Resiliency”

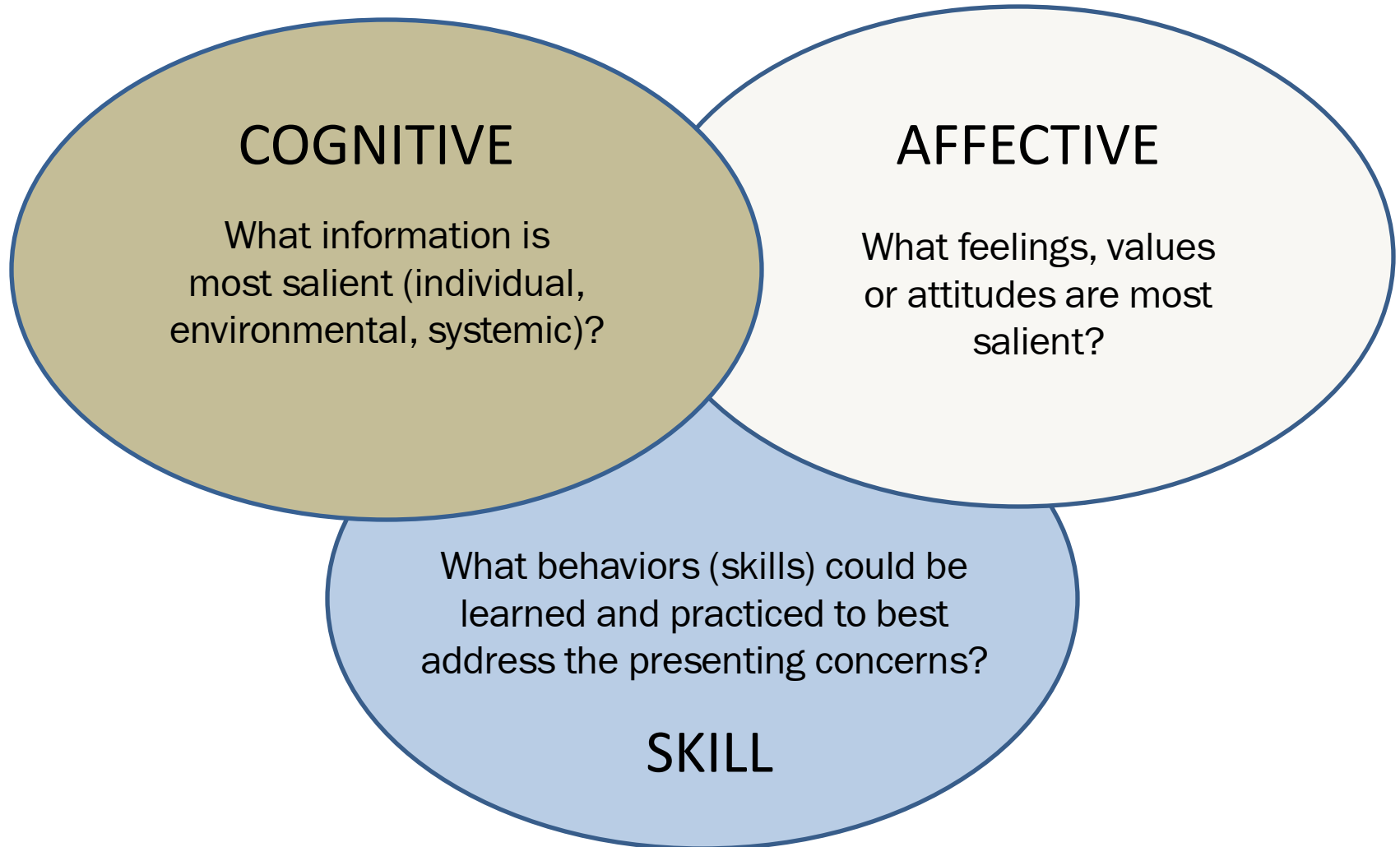
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# LEARNING OBJECTIVES

1. Starting a conversation
2. Overview of the human stress response
3. Assessment tools: symptoms & coping
4. Strategies
5. Resources

# 3 Domains for Learning



# Starting a Conversation

- When you say “I’m stressed”, what do you mean?
  - *Listen for: emotion, behavior, cognitive, social/roles?*
- What do you know about yourself and stress?
  - *What are your “distressing” stressors?*
  - *stress-related symptoms*
  - *ways of coping (healthy, unhealthy/ineffective)*
  - *Strengths*
- What 1 change would reduce stress to manageable level?
  - *Ex: “vent”, support, organize, eliminate, skills, find meaning*

# Defining Stress

- “Stress” is a non-specific term > no direction for change
- DEVELOP a LANGUAGE for CHANGE:
- “**Stress**” = any pressure that creates a response challenge
  - *Stress as a neutral concept, neither good nor bad!*
- “**Stressors**” = types and sources of pressure
- “**Stress response**” = how one perceives the pressure:
  - Distress (dysfunction)
  - Coping (resources & responses)
  - Eustress (growth)

# What are “Stressors”?

- Occur on a continuum: mild to traumatic
- Common “stressors” (sources of pressure):
  - Self-demands, roles, life changes, daily hassles
  - Environmental: people, places, things, events
- Stressors can be:
  - Acute** (intense, time-bound, isolated events)
  - Chronic** (intense or not, ongoing)
  - Expected** or **unexpected**
  - Real** or **imagined**
  - ...or –*most likely-* a combination of any of the above!

# Role of Perception

- Perception of stressor/s correlates with response type
- Perception is processed through assessment:
  - of stressor: threat/ no threat?
  - of coping resources: can I handle this?
  - of expected outcome: will I succeed or fail?
- Implications:
  - We may or may not have control over stressors
  - We DO have the ability to adjust our perceptions

# Stress Appraisal & Response

- Initial appraisal:
  - Primary: significance? (threat/no threat)
  - Secondary: capacity to respond? (low/high)
- Signs of **Distress** appraisal:
  - Emotional, dramatic, catastrophic (fight/flight, or freeze)
  - Inability to access and/or use available resources
- Signs of **Eustress** appraisal:
  - Realistic, control/confidence/efficacy, hopefulness
  - Can distinguish actual problem from emotional response
  - Effective use of available resources



# Stress & the Nervous System

## **Primitive Response**

Limbic system (amygdala)/brain stem

The “emotional brain”; “fight or flight”; the freeze response

## **Cognitive Response**

Frontal lobe

“Directed attention”, “willful activity”

Emotional intelligence

## **Info Transfer Bi-Directional**

CNS/brain & spinal cord  $\leftrightarrow$  sensory receptors/body

Can use brain and/or body to prevent and interrupt unhealthy stress responses (cognitive and/or behavioral interventions)

# Consequences of Chronic Stress

## **SYMPTOMS: Social, physical, mental, emotional**

- **Functional Impairment**
  - Interpersonal (dysfunction, isolation)
  - Work (over/underwork)
- **Physical Health**
  - Cardiovascular disease, sleep disorders, digestive problems, obesity, skin conditions, impaired immunity (asthma, allergy)
- **Mental Health**
  - Mood disorders (depression, anxiety)
  - Substance abuse and behavioral addictions
  - Cognitive impairment (processing, decision-making)

# Defining Resilience

- “Adapting well in face of adversity” (Southwick, 2011)
  - *Allostatic: returning to normal functioning*
  - *Green twig analogy*
- Three core psychological attributes (Buckwalter, 2011):
  - *Strength*
  - *Meaning/purpose*
  - *Pleasure*
- Multidimensional (varies across domains)
- Possible to increase resiliency

# Resilience: Psychosocial Factors

(NCPTSD: Southwick, 2011)

- “...can be enhanced through learning and training”
  - Engaging neuroscience: plasticity and the brain
- Mediating factors:
  - *Genetic, developmental, neurobio, **psychosocial**, spiritual*
  - *Need for accurate assessment (multiple instruments)*
- Psychosocial factors:
  - *Role models, positive emotions, emotional regulation, cognitive flexibility, coping style, spirituality, moral code, social support, training, rapid recovery, purpose and meaning*

# **ASSESSMENT TOOLS & STRATEGIES**

# Awareness

## SELF-INVENTORIES: STRESS COPING

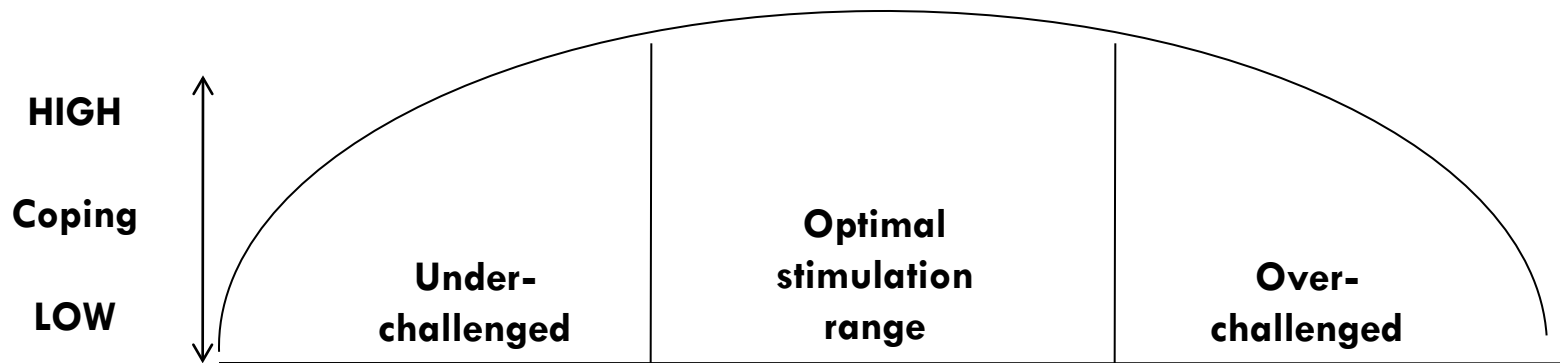
### Tools:

- Identify, quantify & explore **STRESSORS**
- Identify, quantify & explore **STRESS SYMPTOMS**
- Identify, quantify & explore **COPING RESOURCES**

### **AWARENESS** facilitates ability to:

- **MONITOR** stress
- **INTERRUPT** and **AVOID** stressors

# Monitoring Stress Arousal



- Awareness of optimal stimulation range
- Practice body scanning (physical awareness)
- Adjust demands level
- Check your pacing
- Avoid rapid shifts in pacing
- Record patterns

# Interrupting Stress Arousal

- **Interruption** of neurological stress response:
  - Accurate assessment of stressor / coping resources
  - + Intentional change in cognition or behavior (willful activity)
  - = Alteration of neurochemistry & information flow
    - Diffusion of adrenaline and cortisol
- **ACTIVITIES:**
  - Laughter
  - Mindfulness practices
    - Walking, moving, sitting; prayer, contemplation; drawing
  - Aerobic exercise (breathing exchange of gasses)
    - *Any cardio, yoga, kickboxing, hiking, swimming, walking*



# Resources & Wrap Up

- Resources: see handout