



Be your own nurse

Relieve stress with a self-care plan.

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NURSING PRACTICE in the United States is predominantly patient- and family-centered, no matter the care setting, and we're accustomed to having the resources we need, even when faced with rapid practice changes. COVID-19 has changed that. Hundreds of thousands of people have gotten sick, including our colleagues, our own families, and ourselves. Because the virus doesn't have a clear trajectory, we shifted quickly from a patient-centric to a public health focus (the most good for the most people), but resources have been compromised, including supply lines and logistic, jobs, schools, the economy, and leadership at all levels.

This lack of resources and the necessary isolation required to protect each other during the pandemic has created distress (extreme

anxiety, sorrow, and pain), which if not addressed can lead to burnout, compassion fatigue, and secondary traumatic stress. Ultimately, these effects can result in nursing practice issues and moral distress (stress associated with being prevented from doing what we believe is right), which can cause nurses to leave the profession. Ongoing stress can lead to physical harm and disease.

To regain a sense of normalcy and mitigate the effects of the stress nurses experience every day, we must learn how to self-nurse—care for ourselves in mind, body, and spirit.

Self-nursing

What does it mean to have a caring relationship with ourselves? What nursing interventions can we apply to self-care, and how do we create a self-nursing practice that sustains us in times of crisis and joy?

No one answer exists to address our cur-

rent nursing reality. Many excellent evidence-based interventions are appropriate for different people. “Personal control” doesn’t mean we should “suck it up” and just “deal with it,” and self-diagnosis isn’t always the answer. For example, if you broke a bone, you would get an X-ray and have it treated. Psycho-emotional health requires nothing less. Professional mental health services are an important part of any self-care armamentarium.

However, returning to body, mind, and spirit basics reveals three interventions that can kick-start a self-nursing practice: breathing (spirit), intentional conversation (mind), and moving (body). Each intervention impacts the experiences (imprints) we collect over years in nursing and provides opportunities for reflection and perspective. Alone, or more powerfully in combination, these interventions support resilience. (See *Imprinted memories*.)

Breathing

How often do we coach our patients on breathing? We teach very specific breathing techniques to pregnant women and their partners to support them through labor. For those couples, we start early. When the time comes, the breathing techniques have been imprinted in their memories. We instruct a child to focus on our voices as we prompt them to take a deep breath before a vaccination. We coach breathing to all patients as we perform invasive procedures with tubes and needles.

Most body functions—digestion, elimination, glucose/insulin balance—are automatic and out of our control. Breathing is automatic, too, but we also can control it for various effects. Breathing deeply engages our parasympathetic nervous system and creates a calming effect. Taking a mindful moment to breathe deeply creates an interruption in the stress response. No longer controlled by fight, flight, or freeze, we can move a negative imprint aside to think about the reality of the present moment with less influence from a past experience.

Intentional conversation

Nursing requires all types of talking and listening. Giving report, patient teaching, huddles, and other forms of communication support patient care. In gatherings with other nurses, we tell stories and joke for fun. In times of stress, we may vent, complain, and maybe even gossip. All types of conversations create imprints

Imprinted memories

Experiences become memories or imprints on our brains that help us understand the world. We all have positive imprints (the first time we successfully ride a bike or a celebratory event such as a graduation or birth of a healthy new baby) and negative imprints (the unexpected death of a loved one, the first code blue event, or being bullied).

Negative imprints can have great power over our minds, our bodies, and our spirits. Becoming caught up in past negative experiences can affect how we react to and manage current moments of stress.

that we add to our memory banks. How we’ve communicated in the past becomes a filter we use in the present and future.

Intentional conversation as a self-nurse intervention means creating a space to speak with purpose and listen with attention. Speaking intentionally requires thoughtfulness and monitoring. It means that we’re in the present moment and less controlled by past experiences. When we listen with attention, we’re listening to understand the other person. We hear the words, see the body language, and sense the energy of the moment.

An intentional conversation requires thinking critically. It offers the opportunity to pay attention to our thoughts and feelings and reflect how best to share them. The negative imprints that we carry with us can create a hyper-aroused state of stress that keeps us in a reactionary mode. Our feelings can take center-stage without censorship. When we speak intentionally, we move from a state of stress to a state of self-nursing.

Listening with attention means being open and curious. Self-nursing can include giving of oneself through the compassionate act of listening. We offer reflection to the other so they know they’ve been heard. We bear witness without trying to fix, and we acknowledge the other person’s experience without judgement.

Intentional speaking and attentive listening create connection and partnership without domination. During the COVID-19 pandemic, various organizations have offered intentional, facilitated conversations via resources such as Claiming Resilience and Nurses Together. As nurses who participated in groups using these resources began sharing their experiences, they discovered they weren’t alone. The challenges they face as caregivers, not just when caring for patients and their families but also when caring for themselves and their own families, became

Self-nursing resources

Use these resources to help you care for yourself.

Breathing

Simple practice

- Breathe in to a count of 5.
- Breathe out to a count of 5.
- Repeat.

Apps

- Calm (calm.com)
- Headspace (headspace.com)
- Just Breathe (justbreatheproject.com)

Intentional conversations

Use this 3-step method to conduct intentional group conversations:

- 1 Each person speaks with intention about a topic or about what's on their mind while everyone listens with attention.
- 2 After the last person checks in, the conversation opens for reflection about what was shared or what it triggered.
- 3 At the end of the time together, each person checks out by sharing something learned or an action they plan to take while others listen with attention.

Moving

Take these simple steps to incorporate movement into your day:

- When possible, use the stairs instead of elevators.
- Stand when writing reports or using the computer.
- Encourage walking meetings.
- Stretch when seated.
- Participate in step challenges.

Apps

- Apple Health (apple.com/ios/health.com)
- Pedometer++ (pedometer.app)
- 7 Minute Workout (7minuteworkout.jnj.com)

Additional resources

- **American Nurses Association.** Healthy Nurse, Healthy Nation™. nursingworld.org/practice-policy/hnhn
- **American Nurses Foundation.** Well-Being Initiative. nursingworld.org/practice-policy/work-environment/health-safety/disaster-preparedness/coronavirus/what-you-need-to-know/the-well-being-initiative
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less isolating. The conversations helped us remember what it means to be a nurse.

Moving

Stress can result in muscle tension. Moving our bodies can release that tension. The Centers for Disease Control and Prevention recommends starting with a goal of 150 minutes of moderate intensity aerobic activity a week and include two or more days of muscle building. Just as we help our patients plan that first time they get out of bed after surgery, we can create our own self-nursing movement plans. Walking meetings, standing at a desk to chart or do computer work, and stretching while sitting are self-nursing strategies that help relieve stress. Intentionally plan work breaks and mini-workouts during the day, alone or with colleagues.

Sustain your resilience

Nurses continue to face a tremendous event that's left us bruised, maybe a little bloody, and most certainly scarred with memories we weren't expecting. Our scars serve as a reminder of what it means to be a nurse, to care for others in hard times, and to persevere. When we share those scars with our colleagues, we aren't alone.

When we provide ourselves with nursing care and intervene to manage how our past experiences affect our actions and reactions, we engage with our inherent resilience for uplifting, positive change. To sustain your resilience, start with self-nursing basics: breathe, intentionally speak and listen, and move. (See *Self-nursing resources*.)

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