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In the Middle of Self-Care: A Mid-Level Professional's Journey to Rebuilding Resilience

Brandin Howard

In American culture, there seems to be a glorification of “being busy” (Bellezza, Pabaria, & Keinan, 2017). Going into my eighth year of working in student affairs and thanks to a new support system and unfortunate health changes, I am now learning the importance of integrating self-care more into my professional and personal life. Through this personal narrative, I hope that my journey with self-care as a mid-level professional helps others begin to start seeking self-care for themselves.

Self-care, or the act of taking care of one's health mentally, physically, spiritually, and otherwise, is not often taught or trained professionally, which could explain why many professionals struggle with having a semblance of self-care and balance in their lives. Guthrie Woods, Cusker, and Gregory (2005) added that “student affairs literature offers comparatively little to practitioners interested in achieving balance as it relates specifically to their profession” (p. 111). What balance or self-care look like when they are achieved can be difficult to conceptualize in literature because it tends to be so individualized. Furthermore, many of us in student affairs struggle to define the term “self-care,” let alone implement it on a personal level, which can have broader implications for our roles as student affairs professionals. Because student affairs professionals are often charged with the holistic education, mentorship, and development of students (Toma & Grady, 2002), they often serve as a role model for students. The potential for students to learn and replicate unhealthy self-care practices exists when student affairs professionals are not able to role model this balance. What message do students receive when the staff instrumental to their college experience are burned out, depressed, or just exhausted? It is a good question for any professional staff member who works directly with students on a daily basis. However, what happens when that question is asked to a mid or senior level administrator---where the audience includes undergraduate, graduate and entry-level professionals? This is not necessarily a question I even knew existed when entering my first entry-level position, but the answer I could give was based on excuses and hypocrisy.

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Excuses and Hypocrisy

When I graduated from my master's program and started as a Residence Life Coordinator, I had never thought about self-care, let alone practiced it for myself at that point in my life. I did not have a primary care physician and I did not schedule regular doctors appointments. I rarely took a vacation, and my supervisor usually sent me home when I was sick. At that point in my career, I felt okay. I did not feel the need to take a vacation, and I felt pretty healthy, so I had figured everything I was (and was not) doing was working. In some ways, I felt invincible. Self-care was something I encouraged other people to do, but not something I did personally, and no one really called me on it. No one told me that I was a hypocrite who did not take care of themselves. Woody Allen once said, "Those who can't do, Teach" (1977) and when it came to self-care, I certainly knew how to teach it. I would push my Resident Advisors to take time off because they had a late duty night, or go home to visit their family because they were homesick. I even remember one spirited conversation I had with a colleague about how they did not go for a check-up, especially after they were sick. It is cringeworthy to look back and have to acknowledge how much of a hypocrite I was.

I became an Assistant Director (AD) a few years later. As an AD, much of my hypocritical ways continued. I insisted that sick supervisees stay home or go on occasional vacations. I would ask why someone was working too late or answering emails from home, neglecting to realize I had to be on my email to know they were sending the email. However, the difference between supervising undergraduate students and professional staff members is that for me, my professional staff were willing to call me in. I had three Residence Directors who were more than willing to ask me, "When are you going on vacation?" or "What were you doing still on emails? It's 11pm." So, hypocrisy met its best friend- Bad Excuses. I had every excuse in the book from "I do not have time to take a vacation" or this is not a good time," "I'll make a doctor's appointment eventually" or "I'll make it a New Year's resolution to cut out soda." Miller (2016) once said "Unfortunately, and all too often, each of us individually and collectively get caught up in the day-to-day minutia of our work and families, overlooking one of the most important aspects of our duties: taking care of ourselves" (p 139), and I fell into that trap. I was too busy working, and trying to learn my job and do it well that I did not think about the basic things I needed to do to take care of myself. This continued for most of my career as a mid-level professional, until 2017.

When Life Forces You to Sit Down Somewhere

By the 2017-2018 school year, I was starting to feel burnt out. I had spent years trying to be everything to everyone, overextending myself in and outside of my department while also trying to navigate being a doctoral student. Brewer and

Clippard (2002) defined burn-out as “the state of fatigue and frustration arising from unrealistic, excessive demands on personal resources and leading to physical and mental exhaustion” (p. 171), which felt like an appropriate descriptor for this period in my career. I tried to hide the fact I was feeling burned out to my new supervisor, but they immediately picked up on it. My supervisor is someone who understands and practices a strong professional-personal balance and they began to be a role model for me in that area. They helped to make self-care a reality in my professional world, which started me on a path to parting ways with many of my old “teach but no do” methods.

One of the things I appreciate about my supervisor is their level of “keeping it 100”, which forced me to have some critical conversations with myself. I had to take responsibility for myself because, for years, I knew what the demands my career path required at times, and yet I did not take the appropriate steps to sustain myself in the long term. Years spent prioritizing my career, working late evenings, checking my email up through one in the morning, still signing up for new tasks or opportunities without taking anything off my plate, and other not-so-great habits started to catch up with me. In many ways, it caught up to me in a significant way in the spring of 2018.

In 2018, I ended another day of work and school, got in bed with a sweet cold Pepsi, Pork Rinds from the gas station, and my computer to do some work before going to sleep. As I got comfortable in bed with my laptop, I shifted slightly, and suddenly my side started to hurt. Hurt to yawn, laugh, or even lay on it. I figured it was something that would go away overnight, so I took some Tylenol and went to sleep. I woke up the next morning and the pain was still there in full force, but I ignored it. I got up, got ready for work, and out the door I went. I went to a group meeting for an academic project, sat for an on-campus interview, and continued with my morning- all while the sharp pain in my side persisted. The other ADs were telling me to go to the doctor, and I remember saying “I will if it doesn’t go away soon.” I walked out of the interview, got in my car and was going to drive to lunch, but changed my mind. My spirit, my heart, and my body were all saying one thing: go to the doctor.

I drove to the Urgent Care across town and waited a couple of hours in a room while they ran a battery of tests to find out what was wrong. Two hours later, the doctor came back into the room with that “you are not going to like what I have to say” look on her face. She looked at me and said, “you have blood clots in your lungs, and you need to go to the emergency room (ER) immediately”. “Immediately” translated to “stop by the apartment to pack some clothes and my laptop” before checking myself into the hospital and my priority was to not have to spend the night because “I have things to do”. Everything else was a priority to me than figuring out what was going on with me physically, which makes

me feel even more thankful I had colleagues whose priority at that time was to make sure I took care of myself. It felt like everyone else in the world was taking my health more seriously than I was. Doctors, my colleagues, my supervisor, my mother who flew up from North Carolina, everyone. I left the hospital the next day and with my mother in town, I was forced to prioritize my health. It took me a while to understand the truth about this situation: blood clots in your lungs have the potential to kill you and quickly. I had to come to grips with a truth my 23-year-old-self did not understand: I was not invincible. This kind of realization prompted a lot of reevaluation, reflection, and change in my life.

Lessons Learned

Since April, my journey to self-care and taking better care of myself is still not complete, but I believe it is further along than before. I started to care more about my health and rebuild my resilience for the work that I do. Professionally, I committed to limit the amount of work I take home, and I am more critical in my evaluation of what needs an immediate response and what can wait. I started cutting back on what I call my “professional co-curricular activities,” such as my involvements in professional organizations and other tasks not central to my job or school. I slowed down on my doctoral work to a more even pace, where I have cut down on the number of classes I take a semester.

My health is now the number one priority in my life. I committed myself to make doctors appointments every few months for check-ups. Some of these appointments have required me to lose a little weight, make changes to my diet, and live a more active lifestyle than I currently do. While I have not fully adopted a new active lifestyle yet, it is something that I am working towards. I am attempting to take a least one vacation or staycation a semester and working with my supervisor to take more time off.

As I close, I would like to offer advice for entry and other mid-level professionals who may also be struggling with self-care. One of the things I wish I learned early in my career is that taking control of my self-care is no one’s responsibility but my own. To me, taking control of my self-care means it is my responsibility to know how I am feeling physically and mentally and take appropriate steps to take care of myself. Find ways to take care of yourself proactively instead of relying on others to look out for you. While it is great having a community of supportive family, friends, and colleagues to encourage your self-care, the responsibility of taking care of ourselves is ours and ours alone.

In the journey to self-care, it is essential to venture down a balanced path. We may not always be able to take time for ourselves exactly when we want to and there will be times where our job has to take priority. Yet our careers should not always

determine how and when we take care of ourselves. We should not default to waiting for that golden time to take time off where nothing is going on, and we have limited work to come back to (i.e., holiday breaks, the summer, etc.). There may not be a “convenient” time to take time off, and the best time may mean a time where there is not many “must go to” meetings or critical deadlines immediately ahead. Sometimes, just taking a week off to recharge, reset, and rest is more beneficial to your wellbeing and your work than not taking time off and powering through until you get to a “better time.” View self-care, not as a “my way only” in which can you expect your department to bend over backward to accommodate but as something that may require some negotiation to make it work.

One of the most significant pieces of advice I can offer for new and mid-level professionals is not to neglect the little things. I find that when folks think about “self-care” they think about two-week vacations or completely stress-free environments. Self-care can mean setting that doctor’s appointment every six months for a check-up, taking a hot shower consistently, making sure you are eating healthy, taking the time to exercise or do some activity to stay healthy, and even getting a reasonable amount of sleep nightly. Sometimes, you may feel like getting in bed and skipping that shower or that the last thing you want to do is go to the gym. However, being dedicated to finding time to do the small self-care things is even more critical than planned vacations and do not require much pre-planning. These little everyday moments of self-care can genuinely make a difference in how we care for and love ourselves.

Self-care is not always easy to navigate. It often involves a level of understanding of where you are physically and mentally, negotiation with work responsibilities, and conversations with your supervisor as well as yourself. Despite it not being easy to navigate, it is something that is essential for longevity in a profession which often requires we give so much of ourselves to serve our students.