

# AOSW 2026



## Annual Conference

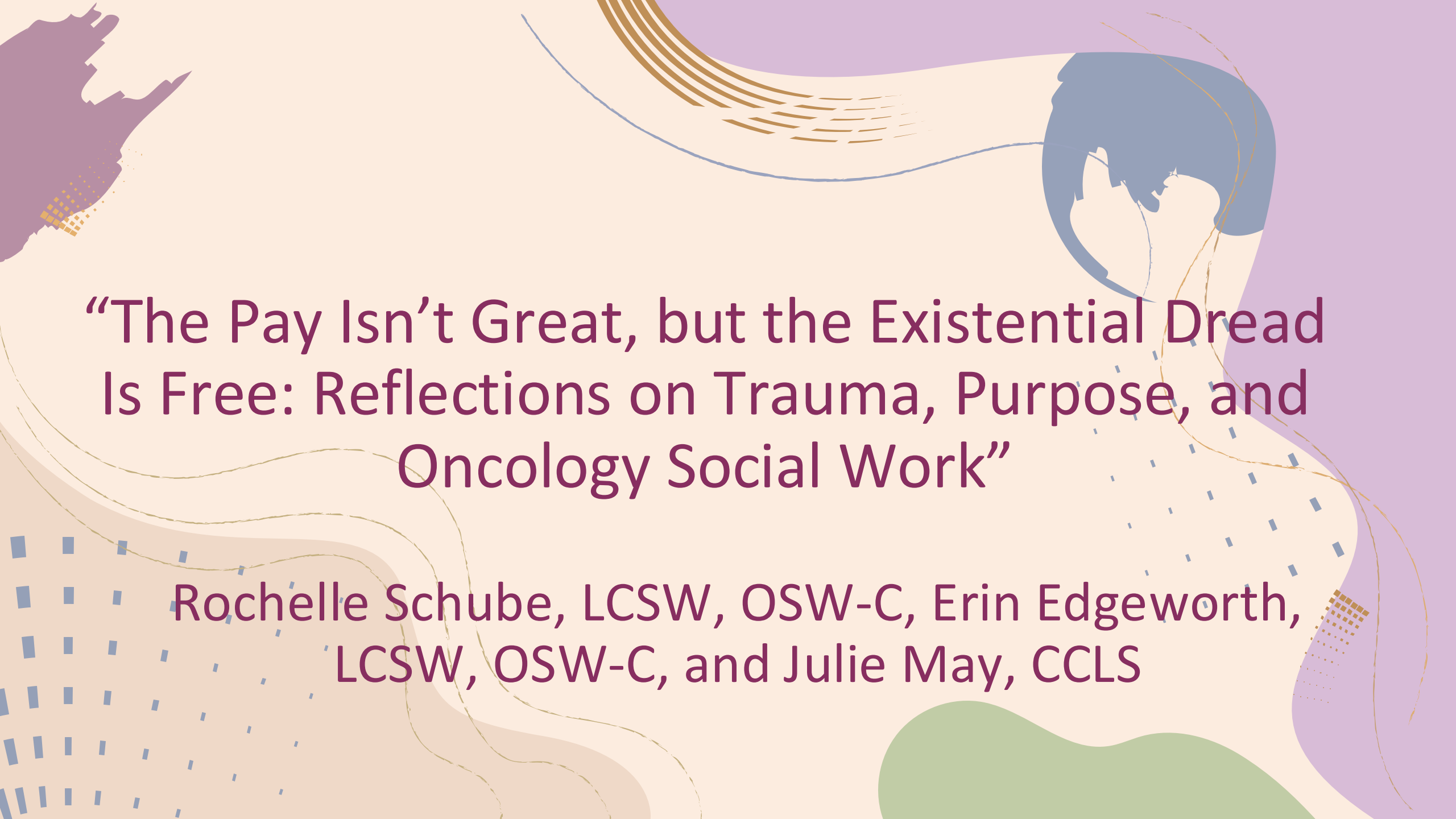
**June 10-12, 2026**

Portland Marriott Downtown Waterfront  
Portland, Oregon USA

**Pre-Conferences: June 9, 2026**

#AOSW2026





“The Pay Isn’t Great, but the Existential Dread  
Is Free: Reflections on Trauma, Purpose, and  
Oncology Social Work”

Rochelle Schube, LCSW, OSW-C, Erin Edgeworth,  
LCSW, OSW-C, and Julie May, CCLS

# Introductions:



Rochelle Schube, LCSW,  
OSW-C

- Oncology Social Worker, Atlanta Cancer Care (5 years)
- Support Group Facilitator, Cancer Support Community
- Past President, Georgia Social Work Oncology Group
- Georgia State Representative, AOSW



Erin Edgeworth, LCSW,  
OSW-C

- Senior Oncology Social Worker, Atlanta Cancer Care (12 years)
- Support Group Facilitator, Mind Over Matter
- Past Board Member, Georgia Social Work Oncology Group (6 yrs)



Julie May, CCLS

- National Outreach Coordinator, Wonders & Worries
- Certified, Child Life Specialist (23 years)
- Podcast Host, Wondercast

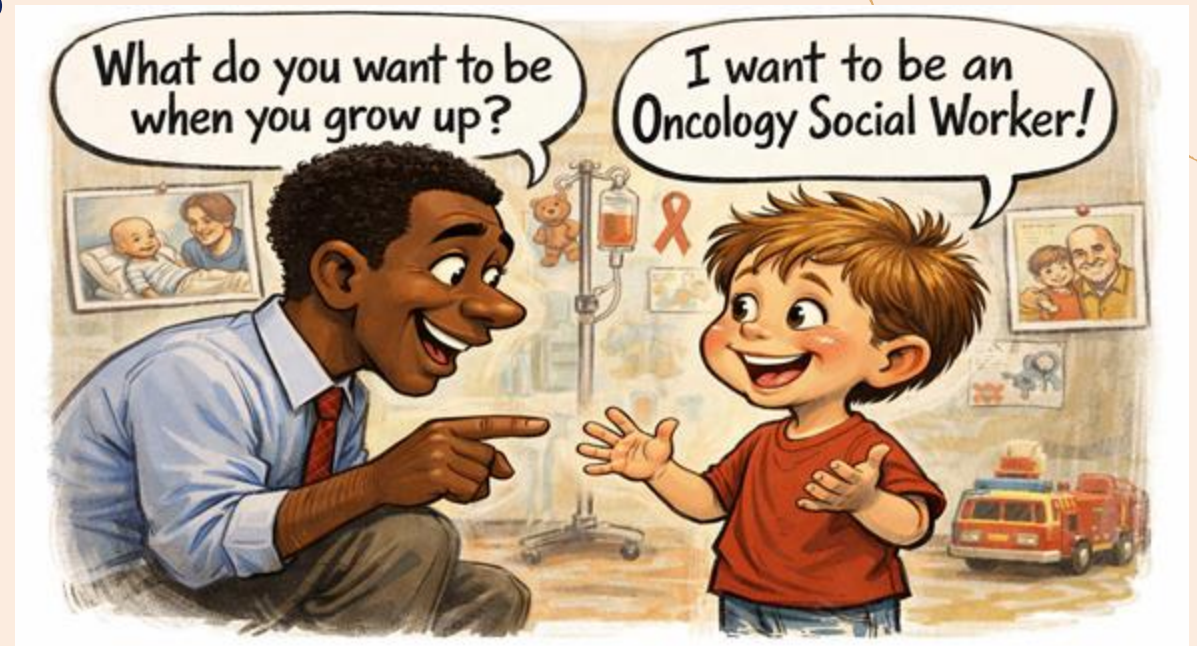
# Learning Objectives:

- Describe how personal trauma, lived experience, and early exposure to illness can influence one's attraction to oncology social work, using frameworks such as the Wounded Healer, transference/countertransference, vicarious resilience, and posttraumatic growth.
- Identify personal triggers and patterns by learning about reflective tools such as the ACE Questionnaire for Adults and understand how personal history may impact clinical practice.
- Through guided activity, demonstrate how focusing on themes of trauma, not details, may influence professional career choice while maintaining healthy boundaries and healing wounds.

• Rochelle Schube, LCSW, OSW-C, Erin Edgeworth, LCSW, OSW-C, and Julie May, CCLS disclose no relevant financial relationships with any entity producing, marketing, re-selling, or distributing healthcare goods or services consumed by, or used on, patients during the past 24 months.

# Do I really love what I do or is this just a trauma response? The answer can be yes, and...

Think about this question. This work isn't arbitrary. Many of us didn't choose this by accident. Is there a direct correlation between your lived experience and choosing this career?



What is your origin story?



# Journaling Prompts: The Wounded Healer in Practice

## Origin Story: “Why This Work?”

- What early experiences shaped my relationship with illness, caregiving, or grief?
- When did I first learn to be “the strong one” or “the helper”?
- What part of my story feels most connected to why I chose this field?

“Without sharing details, what *theme* from your life may have drawn you to healthcare?”

- Caregiver Identity
- Early Loss
- Medical Mistrust
- Fixer Role
- Meaning – Making
- Justice Orientation

Therapist: any **trauma**?

Me: only the normal amount

Therapist: the normal amount is zero

Me:



# When Pain Becomes Purpose

“The Wound is the place where the light enters you” -Rumi

## Post Traumatic Growth:

Positive psychological change that occurs as a result of struggling with highly challenging life experiences.

## This often looks like:

- A deeper capacity for empathy and presence
- Meaning making in the face of suffering
- A strong pull toward advocacy and caregiving
- The ability to sit with what others avoid

# Journaling Prompts: The Wounded Healer in Practice

## Posttraumatic Growth & Meaning-Making

- What strengths have emerged from my hardest experiences?
- Where do I see growth in myself because of this work?
- How can I use my story intentionally, rather than unconsciously?

# Triggers and Emotional Response:

## The Internal Chain Reaction

Trigger → Perception → Emotional Response → Behavior



### TRIGGER

- Patient story
- Tone
- Diagnosis
- Family dynamic



### PERCEPTION

*"This is familiar...  
this feels urgent...  
this matters more"*



### EMOTIONAL RESPONSE

- Anxiety
- Sadness
- Anger
- Urgency
- Protectiveness



### BEHAVIOR

- Over-functioning
- Shutting down
- Rescuing
- Avoiding



*Remember:* We don't respond to events—we respond to our interpretation of them.

# Journaling Prompts: The Wounded Healer in Practice

## Triggers & Emotional Activation

- What types of patients or situations activate me most quickly? Why might that be?
- What does activation feel like in my body?
- When I feel urgency, what story am I telling myself in that moment?

# Career as a Trauma Response:

Early experiences with trauma can shape professional identity.

This work becomes a way to:

- Reclaim control
- Create meaning from pain
- Stay connected to what was once lost

## Dual Reality:

Strengths: insight, compassion, purpose

Risks: over-identification, blurred boundaries, emotional exhaustion

# Journaling Prompts: The Wounded Healer in Practice

## Career as a Trauma Response

- In what ways might my career be an adaptation to past experiences?
- What am I trying to understand, repair, or reclaim through this work?
- What feels hard to step away from, even when I need rest?

# Ethical self disclosure:

“We are more often frightened than hurt; and we suffer more from imagination than from reality” -Seneca

## When it can be helpful:

- Builds rapport and trust
- Normalizes patient experiences
- Reduces isolation (someone else understands)

## When it can be hurtful:

- Shift focus away from the patient
- Meets the clinician's emotional needs
- Blurs boundaries or invites role confusion

## Guidelines for ethical use:

- Keep it brief and relevant
- Avoid unresolved or emotionally charged content
- Bring the focus back to the patient

# Jung-The Wounded Healer

Many helping professionals are drawn to the field because of their own wounds or lived experiences

Carl Jung: “Only the wounded physician heals.”

Personal trauma can shape empathy and connection to patients

## Strengths

Deep compassion  
Meaning-making

## Risks

Over-identification with patients  
Blurred boundaries  
Countertransference

# Journaling Prompts: The Wounded Healer in Practice

## Integration: Moving Forward with Intention

- What is one boundary I want to strengthen?
- What is one grounding practice I can realistically use in my workday?
- How do I want to show up differently—with more awareness and choice?

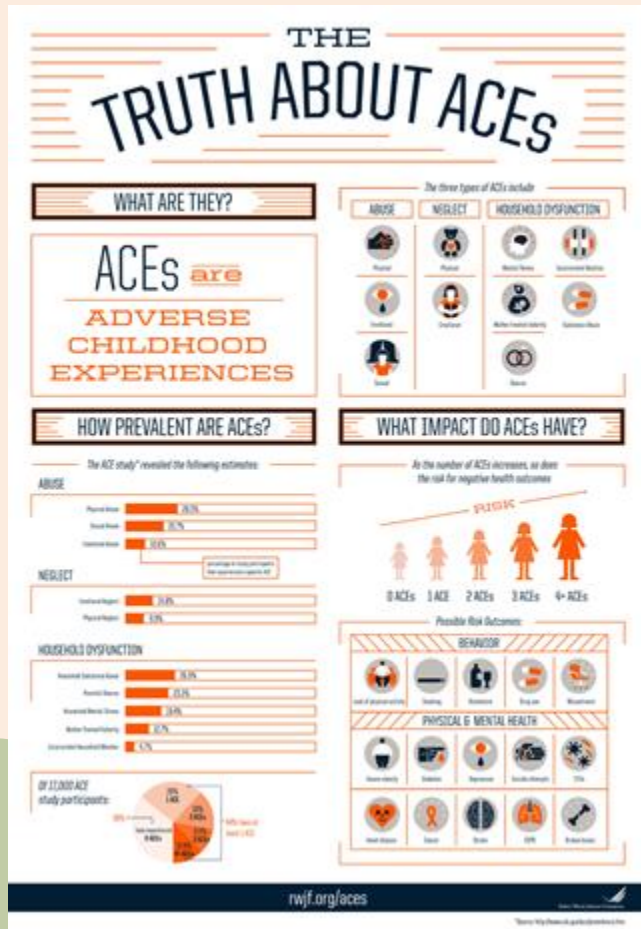
# ACE-Adverse Childhood Experiences

Early adversity can shape emotional responses, stress intolerance, and professional triggers

Higher ACE scores can increase risk for chronic illness, mental health challenges, and heightened stress activity

In oncology work  
It may translate to reaction to illness, loss, and suffering  
Can shape boundaries and coping patterns

## ACE Questionnaire



Robert Wood Johnson Foundation. (n.d.).  
*Adverse childhood experiences (ACEs)*. Retrieved  
March 20, 2026, from  
<https://www.rwjf.org/en/insights/collections/adverse-childhood-experiences.html>

# Boundaries

“The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet” -Dr. Naomi Rachel Remen

## Countertransference:

- Your emotional reactions shaped your own story
- Risks:
  - Over-identifying
  - Urgency to fix or rescue
  - Avoidance of certain patients or topics

## Empathic Strain:

- The cumulative cost of caring
- Shows up as:
  - Emotional exhaustion
  - Numbness or irritability
  - Reduced capacity for empathy

# Journaling Prompts: The Wounded Healer in Practice

## Countertransference Awareness

- When have I felt unusually connected, or disconnected, from a patient?
- Have I ever seen someone in a patient (a parent, child, or past version of myself)?
- When do I feel the strongest pull to go above and beyond?

# Boundaries

“Until you make the unconscious conscious, it will direct your life, and you will call it fate” -Carl Jung

## Boundaries in Action:

- Pause: What am I feeling right now and where is it coming from?
- Name it: Internal awareness without judgement
- Anchor: Return to your role, not your story
- Contain: Support without overextending

# Journaling Prompts: The Wounded Healer in Practice

## Boundaries & Self-Protection

- Where do my boundaries feel clear and strong? Where do they feel shaky?
- When have I crossed a boundary (even subtly)? What was driving that?
- How do I know when I am giving from a grounded place vs. an activated one?

# Cultivating Resilience

*Resiliency is not built in isolation. Healing-centered work requires connection, reflection, and sustainable support systems.*

- Protective Factors That Support Resiliency
- Building Resiliency in Daily Practice



# MASK ACTIVITY

**We all wear masks in professional spaces.**  
They help us function, connect, and care for others.



- What does your “professional mask” show the world?
- What might your “inner self” be holding?
- Where is the balance?

# Masking Activity

## Naming the Mask

- What emotions do I carry home but don't always name?
- What feels heavy in my body lately?
- What feelings feel 'unprofessional' to admit, but very real?

## Permission to UnMask

- Feeling burdened does not mean you lack resilience.
- Feeling angry does not mean you lack compassion.
- Feeling tired does not mean you lack purpose.

# Questions to Consider While Unmasking

- What parts of my story quietly followed me into this room?
- What losses, fears, or wounds still feel tender beneath the surface?
- What do I carry professionally that others may not see?
- What drew me toward helping work in the first place?
- Was there a time in my life when I learned that caring for others created safety, connection, or purpose?
- What am I still trying to understand, repair, or make meaning of through this work?
- In what ways has my pain shaped my empathy?

# Regulation Reset



## 5 4 3 2 1 Grounding Exercise

Start with 3 calming belly breaths.

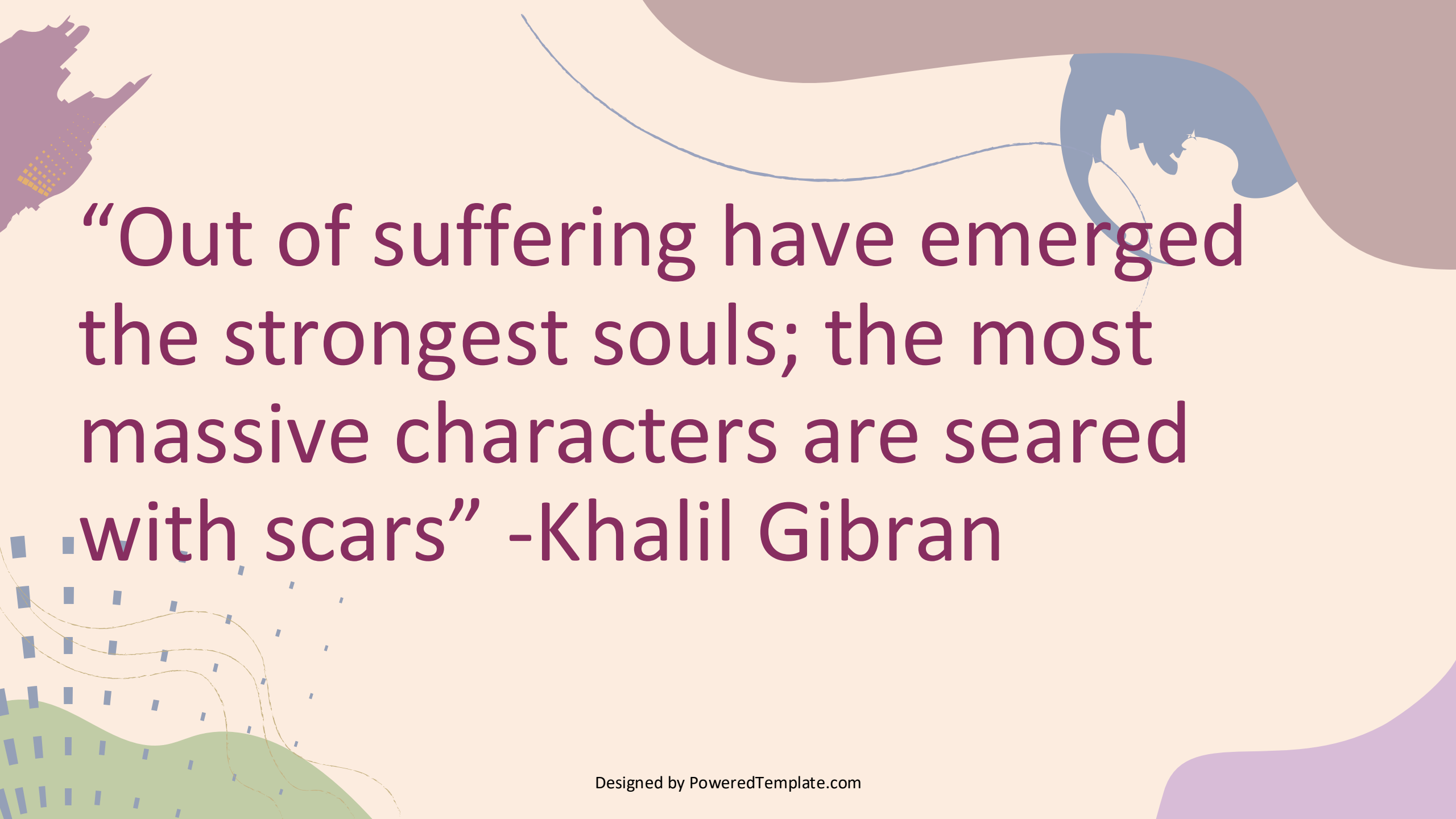
- 5 things you can see
- 4 things you can feel
- 3 things you can hear
- 2 things you can smell
- 1 thing you love about yourself





# Journaling Prompts: The Wounded Healer in Practice

**“What part of my story am I ready to hold with more awareness, compassion, and intention?”**

The background features abstract, organic shapes in shades of purple, blue, and green. A prominent blue shape resembling a hand or a leaf is positioned in the upper right. The overall aesthetic is soft and artistic.

“Out of suffering have emerged  
the strongest souls; the most  
massive characters are seared  
with scars” -Khalil Gibran

# THANK YOU!

Do you have any questions or comments?

- Rochelle Schube, LCSW, OSW-C  
[rschube@atlantacancercare.com](mailto:rschube@atlantacancercare.com)
- Erin Edgeworth, LCSW, OSW-C  
[eedgeworth@atlantacancercare.com](mailto:eedgeworth@atlantacancercare.com)
- Julie May, CCLS  
[julie@wondersandworries.org](mailto:julie@wondersandworries.org)

# References:

ACEs Hub. (2026). *ACE questionnaire* [PDF]. <https://aceshub.org/wp-content/uploads/2026/02/ACE-Questionnaire.pdf>

ACEs Hub. (n.d.). *About ACEs*. <https://aceshub.org/about-aces/>

Bester, M. (2024). *Transmuting childhood trauma: A case study exploring the impact of childhood trauma on the career choice and teaching experiences of special education teachers* (Doctoral dissertation). University of Memphis. Digital Commons.

Bowman, J. (2023). *Trauma history influencing vocational choice* (Publication No. 701fcfe7-9586-40de-82ac-e06bdf89dd5f) [Unpublished master's thesis]. Purdue Global University Archive.

Elwell, M. L. (2012). *Social work as a healing vocation: The exploration of clinicians' trauma histories and implications for practice* (Master's thesis, Smith College). Smith ScholarWorks. <https://scholarworks.smith.edu/theses/908/>

Koçak, O., Ergin, M., & Younis, M. Z. (2022). The associations between childhood experiences and occupational choice capability, and the mediation of societal gender roles. *Healthcare*, 10(6), 1004. <https://doi.org/10.3390/healthcare10061004>

Kremer, K. P., Colburn, A. R., Carnes, R. J., & Jackson, D. B. (2024). Adverse childhood experiences among social service majors. *Families in Society*, 105(2), 334–348. <https://doi.org/10.1177/10443894231163972>

Lawson, K., Werner-Lih, A., Fitzgerald, F., & Zabora, J. R. (2022). Defining self-disclosure of personal cancer coping experiences in oncology social workers' helping relationships: When cancer "hits home". *Journal of Psychosocial Oncology*, 40(3), 288–302. <https://doi.org/10.1080/07347332.2021.1914270>

# References:

Lilliehorn, S., Isaksson, J., & Salander, P. (2021). Two sides of the same coin: Oncology social workers' experiences of their working life and its pros and cons. *Nordic Social Work Research*, 13(2), 267–279.

<https://doi.org/10.1080/2156857X.2021.1958907>

McLean, G., & Kim, D. (2022). *The impact of adverse childhood experiences in social work students* (Master's project). California State University, San Bernardino. CSUSB ScholarWorks.

Raab, D. (2022, January 26). *Are you a wounded healer?* *Psychology Today*. <https://www.psychologytoday.com/us/blog/the-empowerment-diary/202201/are-you-a-wounded-healer>

Seeger, L. R. (2023). *The impact of childhood adversity on career decision-making in licensed mental health clinicians: ACEs and the helping profession* (Doctoral dissertation, Liberty University). Liberty University Institutional Repository.

<https://digitalcommons.liberty.edu/doctoral/4440>

Steen, J. T., Senreich, E., & Straussner, S. L. A. (2021). Adverse childhood experiences among licensed social workers. *Families in Society: The Journal of Contemporary Social Services*, 102(1). <https://doi.org/10.1177/1044389420929618>

Tracy, S. K., Allen, A., Ruiz, C., & Schurter, B. (2025). Childhood trauma and the route to resilience: A career analysis. *Journal of Interpersonal Violence*. Advance online publication. <https://doi.org/10.1177/08862605251353496>

Ungvarsky, J. (2023). *Wounded healer*. EBSCO Research Starters: Health & Medicine.

# Credits.

Presentation Template: [poweredtemplate.com](http://poweredtemplate.com)

Sample Images: [Unsplash](https://unsplash.com), [pexels](https://pexels.com)

Fonts used in this presentation: **You2013** and **Calibri**  
(Body)