

Vicarious Traumatization

The Single Most Important Factor to
Success or Failure in Trauma Work

Our Exposure

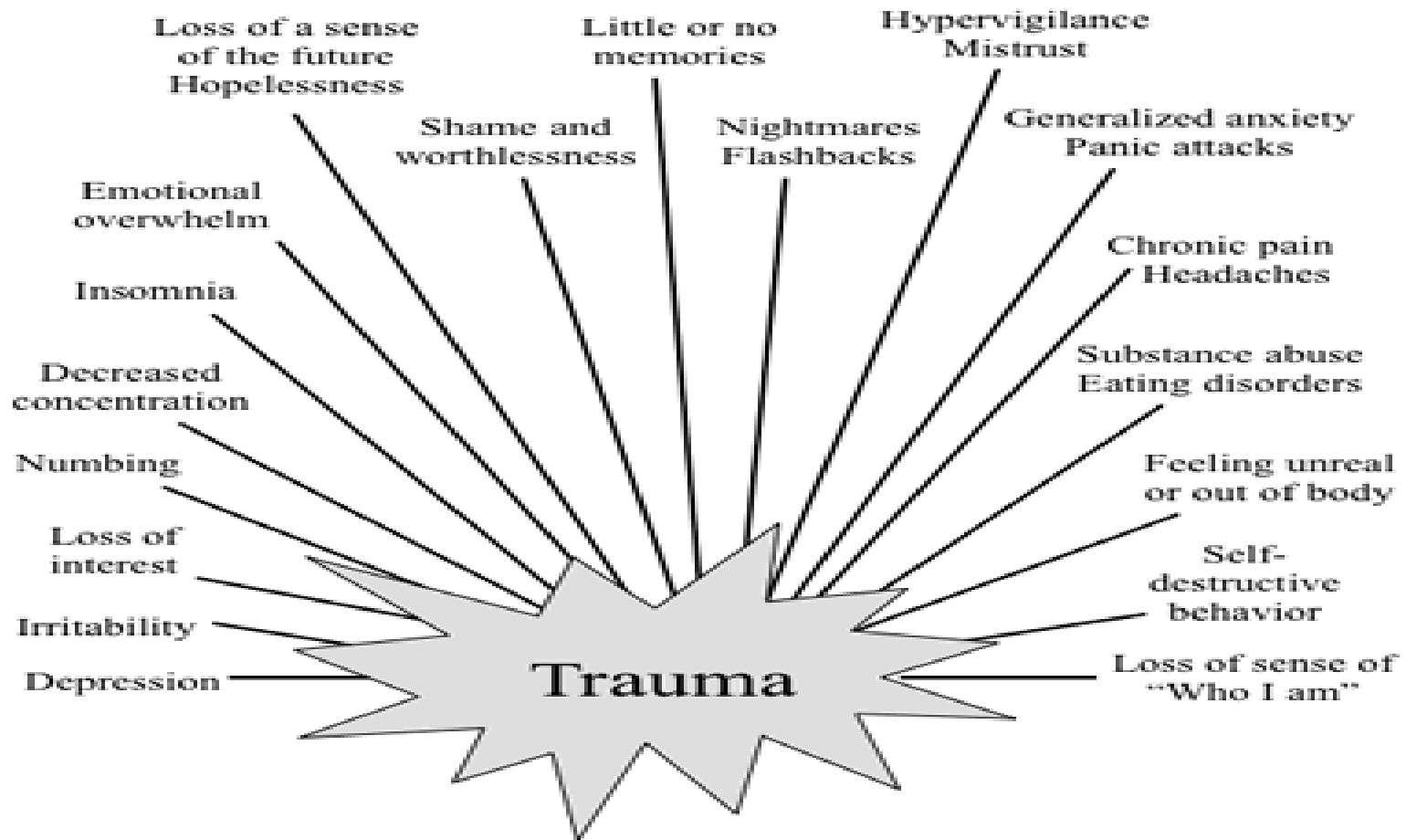
- Clients, Stories, and Conditions that highlight:
- Poverty
- Abuse
- Pain
- Loss
- Anger
- Etc.
- Natural and Human-Made Disasters

(some) **Physical Consequences**

- Gastrointestinal Problems
- Cardiopulmonary Disease
- Heart Disease
- Ulcers
- Diabetes
- Neurological
- Chronic Exhaustion
- Insomnia
- Headaches (Migraines)
- Heartburn
- Hot/Cold Sweats
- Nausea
- Weight gain/loss
- Skin Breakouts (Hives, eczema)
- Sexual Dysfunction
- Frequent Illnesses

(some) **Mental Consequences**

- Depression
- Anxiety
- Fear
- Guilt
- Reduced Sense of Personal Accomplishment
- Conflict with Coworkers
- Angry Outbursts
- Difficulty Concentrating
- Issues with Safety, Trust, & Control



"Trauma survivors have symptoms instead of memories" [Harvey, 1990]

Adapted from Bremner & Marmar, 1998

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Some call it...

- Job Stress
- Chronic & Toxic Stress
- Vicarious Trauma
- Secondary Traumatic Stress
- Burnout / Toasty / On Edge

Chronic & Toxic Stress



Brief increases in heart rate,
mild elevations in stress hormone levels.



Serious, temporary stress responses,
buffered by supportive relationships.



Prolonged activation of stress
response systems in the absence
of protective relationships.

Vicarious Traumatization

How this work will change you

VT refers to the negative changes in the helper as a result of empathically engaging with and feeling or being responsible for traumatized clients.

Vicarious Traumatization

- We believe that VT is an inescapable effect of trauma work.
- VT is a process, not an event.
- VT happens over time.
- VT is specific to individuals.
- VT includes strong feelings & our defense against those strong feelings.

Vicarious Traumatization

Impacts:

Core beliefs about hope and meaning.

Our identity, worldview, and spirituality.

Our core beliefs about safety, trust, esteem, control, and intimacy.

Our own ability to manage feelings.

Our bodily feelings and experience including our sexuality.

Secondary Traumatic Stress

The natural and consequent behaviors and emotions resulting from knowing about traumatizing events experienced by a significant other – the stress resulting from helping or wanting to help a traumatized or suffering person.

(Figley, 1995)

Burnout/Rust Out

Result of prolonged stress or frustration, resulting in exhaustion of physical strength, emotional strength, and/or motivation

(Maslach, 2003)



Secondary Traumatic Stress and Related Conditions: Sorting One from Another

Secondary Traumatic Stress refers to the presence of PTSD symptoms caused by at least one indirect exposure to traumatic material. Several other terms capture elements of this definition but are not all interchangeable with it.

Compassion fatigue, a less stigmatizing way to describe secondary traumatic stress, has been used interchangeably with the term.



Compassion satisfaction refers to the positive feelings derived from competent performance as a trauma professionals. It is characterized by positive relationships with colleagues, and the conviction that one's work makes a meaningful contribution to clients and society.

Vicarious trauma refers to changes in the inner experience of the therapist resulting from empathic engagement with a traumatized client. It is a theoretical term that focuses less on trauma symptoms and more on the covert cognitive changes that occur following cumulative exposure to another person's traumatic material.

Burnout is characterized by emotional exhaustion, depersonalization, and a reduced feeling of personal accomplishment. While it is also work-related, burnout develops as a result of general occupational stress; the terms is not used to describe the effects of indirect trauma exposure specifically.

| Burnout | Vicarious Trauma, Compassion Fatigue | Secondary Trauma, Indirect Trauma |
|---|---|--|
| Cumulative, usually over long period of time | Cumulative with symptoms that are unique to each service provider | Immediate and mirrors client/patient trauma |
| Predictable | Less predictable | Less predictable |
| Work dissatisfaction | Life dissatisfaction | Life dissatisfaction |
| Evident in work environment | Permeates work and home | Permeates work and home |
| Related to work environment conditions | Related to empathic relationship with <u>multiple</u> client's/patient's trauma experiences | Related to empathic relationship with one client's/patient's trauma experience |
| Can lead to health problems | Can lead to health problems | Can lead to health problems |
| Feel under pressure | Feel out of control | Feel out of control |
| Lack of motivation and/or energy | Symptoms of post-traumatic stress disorder | Symptoms of post-traumatic stress disorder similar to client/patient |
| No evidence of triggers | May have triggers that are unique to practitioner | Often have triggers that are similar to the client's/patient's triggers |
| Remedy is time away from work (vacation, stress leave) to recharge or positive change in work environment (this might mean a new job) | Remedy is treatment of self, similar to trauma treatment | Remedy is treatment of self, similar to trauma treatment |

Important Factors

Environment

Examples

- Exposure to trauma stories
- Support of peers
- Supervision
- Organizational culture promotes discussion of VT
- Wider system failures

VT

Treater

Examples

- Current life stressors
- Treater's own history of ACEs and trauma
- Interests outside of work
- Investment in the mission of the work
- Self-care

Important Treater Factors

| Individual Risk Factors | Work Risk Factors | Community Risk Factors |
|------------------------------------|--|------------------------|
| Personality and coping style | Role at work | Culture |
| Current life circumstance | Work setting and exposure | Resources at large |
| Social supports | Work conditions | Community factors |
| Spiritual connection and resources | Agency support | |
| Work style | Affected populations responses and reactions | |
| Personal history | | |

Important Treater Factors

“The most common condition we treat is unhappiness. The greatest obstacle to treating unhappiness is our own.”

Dr. David Loxterkamp, *Journal of a Country Doctor*

Simple Fact

- When we as helpers ignore our stress and emotional experiences, we are more likely to respond in ways (both direct and indirect) that create distance and disconnection from our clients.
- This distance then decreases the likelihood of a healing connection and therefore reduces our effectiveness.

Which of These Rings True to You?

When overwhelmed.....

- Helpers are more likely to fall back on an **“us verses them”** mentality that works against both connection and empowerment.

Which of These Rings True to You?

When overburdened...

- We are more likely to project our anger onto our clients or co-workers.
- Become passive/aggressive in the face of organizational conflict.

Which of These Rings True to You?

When anxious...

- We are more likely to act without reflection or intention.
- We are more likely to fall back to rigid rules.
- We are more likely to have an emphasis on control and restraint.

Diabetes

Heart Disease

Anxiety

Apathy

Ulcers

Blood Pressure

Guilt

Numbing

Anger

Cynicism

Insomnia

Inside Us...

Difficulty
Concentrating

Angry
Outburst

Conflict

Between Us...

Trust
Issues

Control
Issues

The Result of Our Coping Strategies

- All of the things you discussed work against the principles of effective treatment.

Vicarious Traumatization & Hope

- Hope and optimism are essential gifts we bring to our work.
- Just like trauma damages our children's hope; VT damages our hope.
- We have an obligation to our clients, as well as ourselves, our colleagues, and our loved ones, to address the damage created by the work we do.

Addressing and Transforming Vicarious Traumatization

WHAT DO WE DO ABOUT VT?

Anticipate VT and Protect Yourself:

1. First step requires an awareness of the reality of VT.
2. Second step is to recognize those aspects of your work that make you vulnerable to VT.
3. Third Step is to identify specific approaches to minimize or counteract the negative effects of this work.

Self-Awareness

- It is important to assess your own vicarious traumatization regularly and frequently.
- Assessing VT should include several different questions/topics:
 - What is your current emotional experience?
 - Which aspect of yourself is currently being affected?
 - How much and what am I doing for self-care?
 - Keep a catalog of contributing factors?

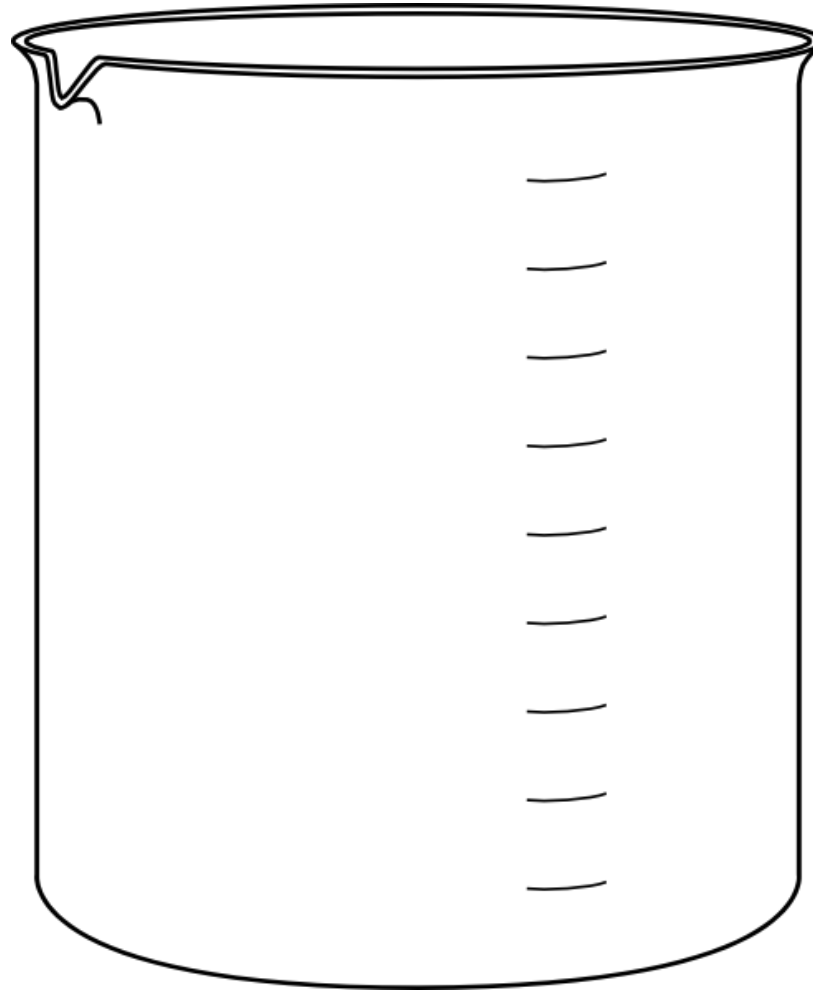
Self-Awareness

- Complete PROQOL by yourself.
- Split into the following groups:
 - 1 month to 4 months
 - 5 months to 11 months
 - 1 year to 3 years
 - 3 years to 5 years
 - 5 years to 10 years
 - 10 years +
- Discuss what you are comfortable sharing?
- Be Brave

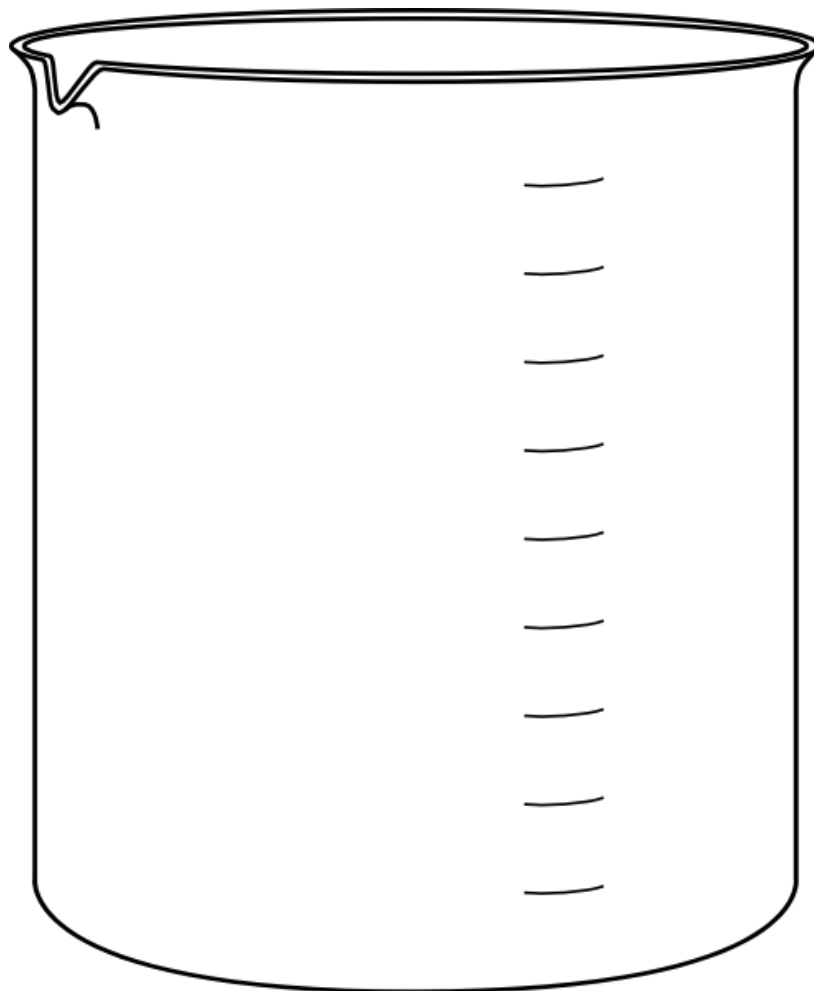
Self-Awareness

- It is imperative to discuss VT with others. Speak your Truth!
- Self-awareness is a jumping off point for discussions with a single colleague, a supervisor, or members of a VT Support group.
- The MORE we treat VT assessment and discussion as an automatic necessary part of our work, the greater protection we will have.

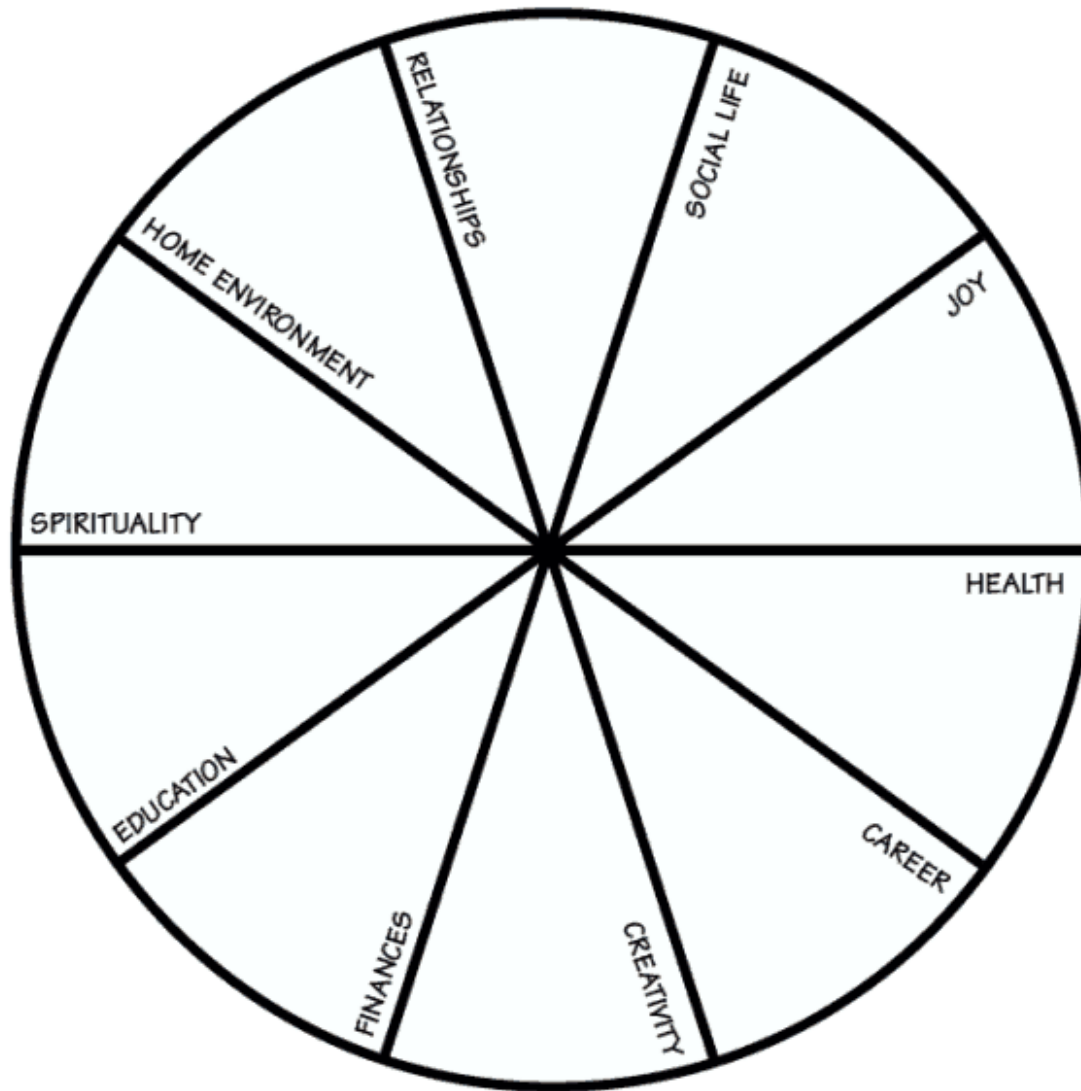
How Much Hope Did I Have?



How Much Hope Do I Have?



Which aspect are being affected?



Creating a Safe Place

Suggestions for talking about our own Vicarious Traumatization?

- What do you need?
- What does the group need?
- What are barriers?



What To Do About VT

Environment

Examples

- Organization communicates that VT is normal, inevitable, and should be discussed
- Staff recognition and celebration
- Control for overtime worked
- Provide gym memberships
- Regular supervision
- Foster teams that give and accept help.

VT

Treater

Themes to Address

- Anticipate VT and build in protection
- Address signs of VT when they arise
- Transform the pain of VT
- Build resilience against VT

Six Environmental Conditions Required for Health & Growth

1. Safety
2. Belonging
3. Consistency/Predictability
4. Opportunity
5. Acceptance/Love
6. Hope

Anticipating VT and Build In Protection (The ABCs)

Awareness

Be attuned to one's needs, limits, emotions, resources.

Heed all sources of information—thoughts, feelings, bodily signs, intuition.

Practice mindfulness and acceptance.

Balance

Among work, play, and rest

Connection

To oneself, to others, and to something larger

WHAT DO TREATERS DO?

Addressing Signs of VT:

- Self-Care
 - attend to your physical, emotional, psychological and spiritual health.
- Self-Nurture
 - Do things that nurture you. Take/Make time for things and activities that contribute to your growth and well-being.
- Escape
 - The things we do to get away; sleep, read, perform, travel, movies, television, music or guided imagery.

Transforming the Pain of VT

From Vicarious Traumatization



To Vicarious Transformation

Vicarious transformation describes the positive growth and transformation of treaters **as people**, as a result of the work they do.

Pearlman & Saakvitne, 2015

Transforming the Pain of VT

Pain of VT often leads us to search for hope and meaning.

Working with people who have suffered teaches us about:

- Courage and human resilience

- Possibility of transformation

- Gratitude in our own lives

- Power of hope

Creating meaning in our lives and work helps us endure and transform VT

Transforming the Pain of VT

There is a privilege working with people on the edge of life. The view from the edge of life is so much clearer.

Remen, 2006

Transforming VT

- The most important of all responses to VT.
- Transforming truly changes the negative impacts of VT.
- Any time we actively challenge, or allow our experiences to challenge cynicism and negativity, we are reclaiming meaning and transforming our VT.

Four Ways to Transformation

Create Meaning:

- When we believe that our work and pain have some meaning, we can find hope alongside despair, purpose in routine and connection in our actions.

Infuse Current Activities with New Meaning:

- Often we do things automatically or without conscious awareness or thought. When we turn our attention to our actions, we begin to connect ourselves with our behavior.

Four Ways to Transformation

Challenge Negative Beliefs and Assumptions:

- Because VT can affect all our beliefs about world, it takes conscious effort to notice that and to decide if we accept these thoughts.
- We diminish ourselves and our work when we work from a place of hardened cynicism without hope. None of us can afford to lose hope.

Participate in Community-Building Activities:

- VT, like trauma, is inherently isolating.
- Community inherently challenges isolation.
- We cannot do trauma work alone.
- When we can remember that our work is apart of something larger, our isolation is transformed.

Assessment of Self-Care Worksheet 5.4

- Complete worksheet 5.4 by yourself.
- Find a person you do not already know.
- Discuss what you are comfortable sharing?
- Be Brave

Addressing & Transforming Vicarious Traumatization Worksheets 5.5 & 5.6

- Complete worksheets.
- Make a plan.
- Tell someone about it!!