Vicarious Trauma Management Training

WSCAP
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she/hers

Agenda

01   Introduction

02   Definition of Terms

Risk Factors & Impact   03

Organizational Strategies   04

Introductions

A little background about me…

- Clinical Psychologist in Private Practice in Bellingham, WA
  - Specialty: Trauma (Interpersonal Violence)

- NTT faculty in WWU's Psychology Department

- Member of Whatcom County's Sexual and Domestic Violence Commission

Introductions

Type in the chat box…

Where are you from and what is your role?

Some Data

Victim Advocates

- Prevalence rate of secondary traumatic stress is about 50% (Benuto et al., 2013)

Social Workers in DV/SA field

- 65% exhibited at least one symptom of secondary traumatic stress (Bride, 2007)

Therapist working with SA

- 70% experienced vicarious trauma (Lobel, 1997)

Take-Away

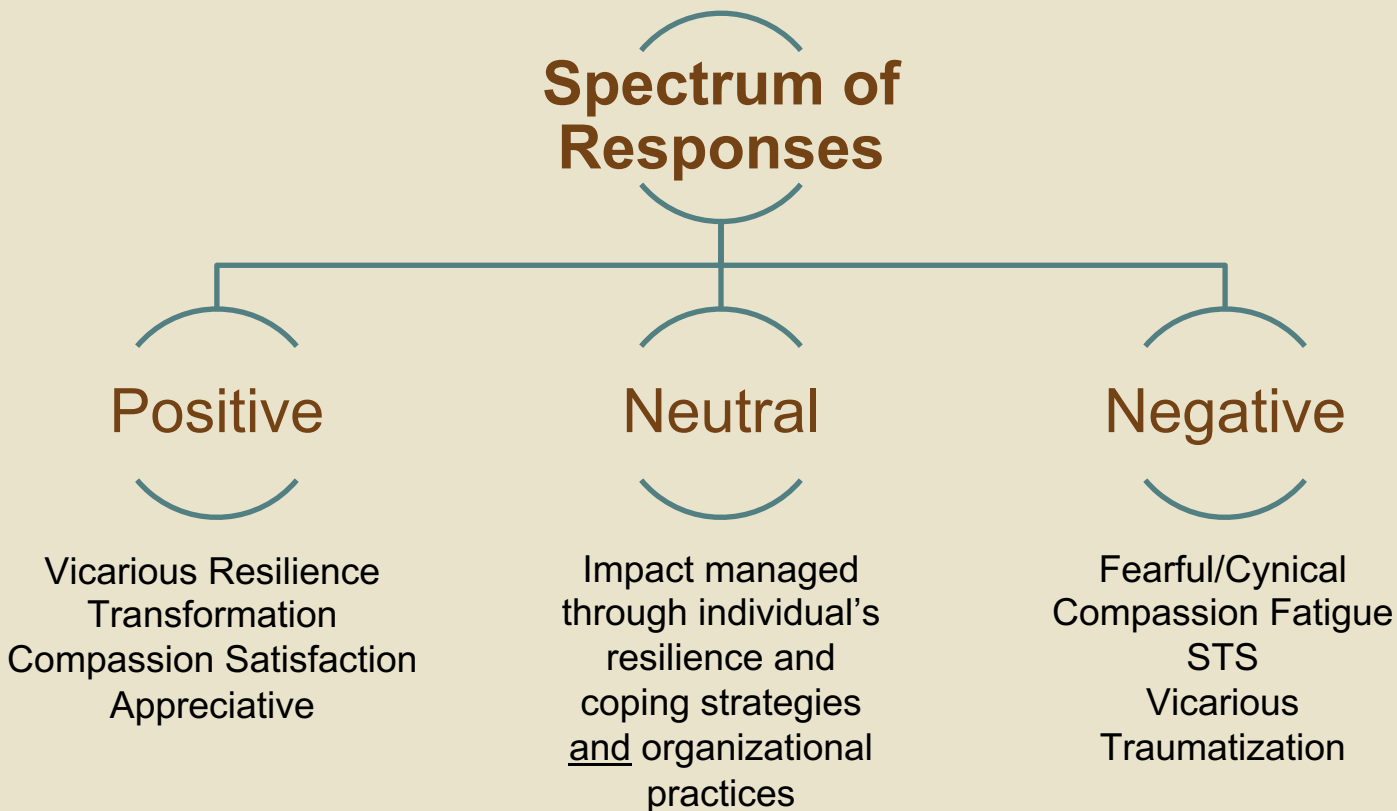- These secondary effects of the work are *expected* – not exceptions.

Reflection

What are some of the first signs of "burnout" that you notice in your staff?
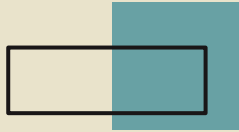
Change in Worldview (Office for Victims of Crime)

Spectrum of Responses

Positive

Vicarious Resilience
Transformation
Compassion Satisfaction
Appreciative

Neutral

Impact managed
through individual's
resilience and
coping strategies
and organizational
practices

Negative

Fearful/Cynical
Compassion Fatigue
STS
Vicarious
Traumatization

Definitions (Nacev, 2013)

Burnout

Cumulative stress
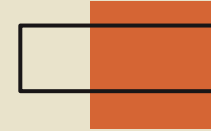
Mental, physical, and emotional exhaustion

Defensive coping strategies

Reduced commitment to profession

Compassion Fatigue

Feeling emotionally depleted and/or preoccupied with the suffering of clients

Secondary Traumatic Stress

Experiences of stress in reaction to knowing about/hearing about another's trauma

Can look similar to PTSD symptoms

Vicarious Traumatization

The **emotional residue** of exposure that providers have from working with people as they are hearing their trauma stories and becoming witnesses to the pain, fear, and terror that trauma survivors have endured. (Perlman & Saakvitne, 1995)

Results from **empathic engagement** combined with a commitment or **responsibility to help** survivors (Pearlman and Caringi, 2009, 202-203)

The only construct that specifically describes a cumulative, long-lasting impact on clinicians' personal beliefs and world view.
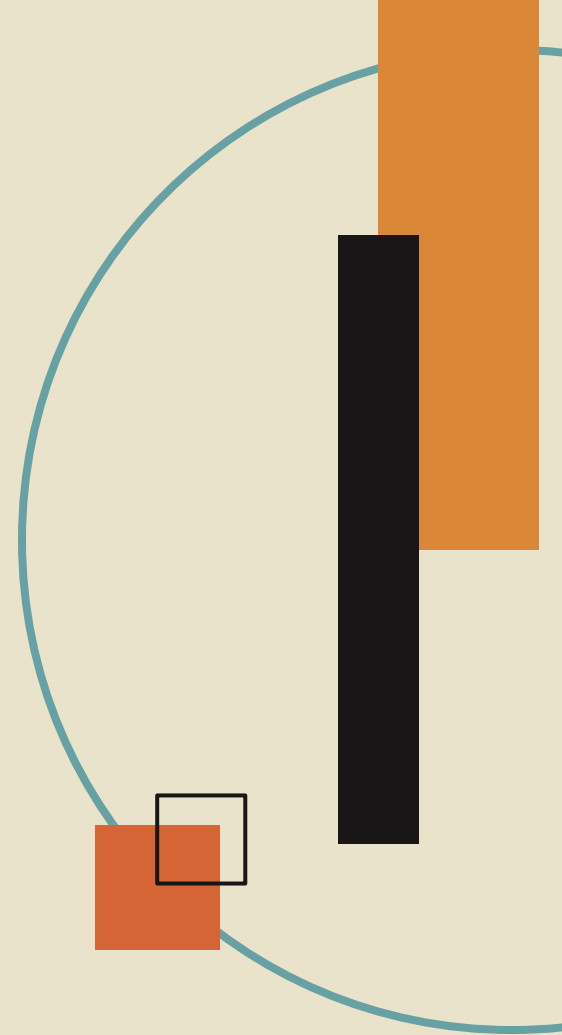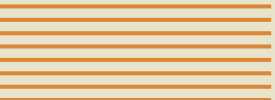
Risk Factors (Office for Victims of Crime)

*anyone who works with trauma is at risk for negative impact

Prior traumatic experiences

Social isolation (both on and off the job)

Tendency to avoid feelings, withdraw, or assign blame to others

Difficulty expressing feelings

Being newer employees and less experienced

Lack of preparation, orientation, training, and supervision in their jobs

Constant and intense exposure to trauma with little or no variation in work tasks

Lack of an effective and supportive process for discussing traumatic content of the work

How does your organization seek to address or prevent one of these risk factors?

Another Risk Factor?

Remote Working

- Work environment might be contributing to vicarious trauma
- What are the most satisfying parts of the job?
  - Direct service and connection to clients
  - Comradery and connection to colleagues
  - Ability to focus on job/tasks uninterrupted

Impact on Work-Life (Nacev, 2013)

Low morale/motivation

Errors in judgment

Increased countertransference

Conflict with peers/staff

Absenteeism, lateness

Decreased ability to work independently

General distrust of coworkers

Increasingly likely to be looking for another job

Decreased team cohesion and communication
(Knight, 2013)

Becoming "Vicarious Trauma-Informed"
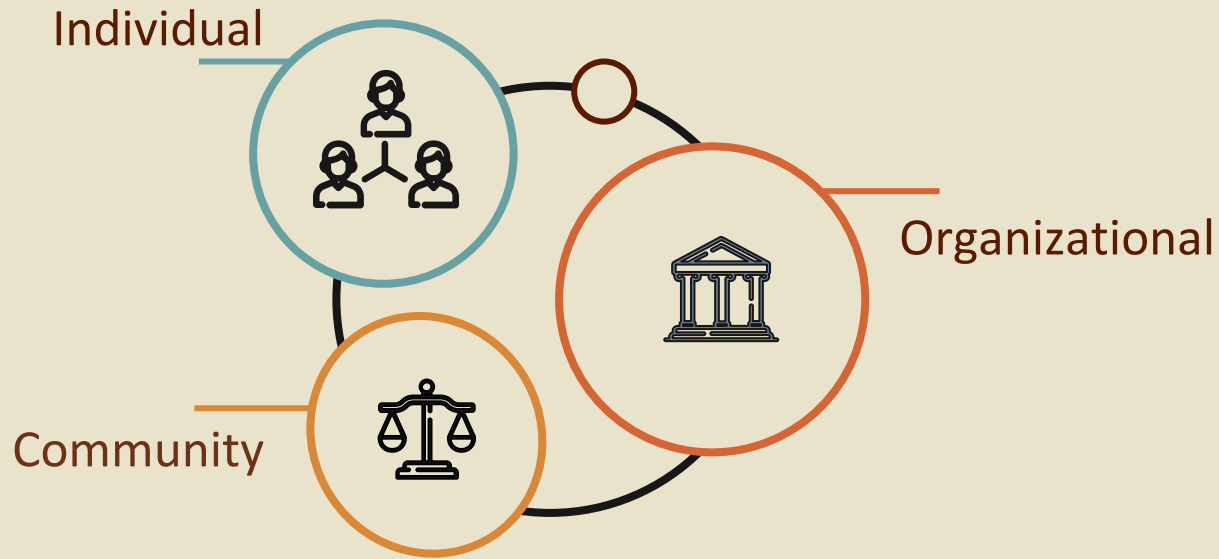
Organizational Strategies

(From OVC - The Vicarious Trauma Toolkit)

Leadership & Mission

Employee Empowerment & Work Environment
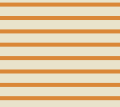
Management & Supervision

Training & Professional Development

Staff Health & Wellness

Organizational Strategies

Many Benefits of Organizational Support

- Advocates who received more support experienced lower levels of secondary traumatic stress (Slattery and Goodman 2009)

- Of those who did experience vicarious trauma, a supportive work environment reduced the negative impact (Bell, Kulkarni, and Dalton 2003; Slattery and Goodman 2009).

- Quality supervision—when staff feel safe and respected—enables staff to overcome high workloads and stay on the job (Slattery and Goodman 2009; Bednar 2003)

- Being trained in vicarious traumatization benefits both participants and the populations they serve (Gentry, Baggerly, and Baranowsky 2003)

# What does a "vicarious trauma-informed organization" look like?
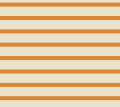
Healthy Work Environment

- Foster teamwork and encourage collaboration inside and outside the organization
- Create opportunities for staff to connect
- Offer opportunities to diversify job tasks

Quality Supervision

- Have a structured protocol in place for case review (Howlett and Collins 2014; Geller, Madsen, and Ohrenstein 2004)
- Prevent "top-down" leadership, which can invalidate direct service staff's knowledge and experience (Perlman & Caringi, 2009)
- Show appreciation for staff and respond to their needs/requests
- Foster supportive relationships based on inclusivity, mutual respect, and trust

(From OVC - The Vicarious Trauma Toolkit)

Culturally Responsive Leadership (WSCAP, 2017)
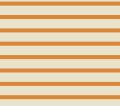
What about advocates and staff of color?

Compounding Effects on Vicarious Trauma
- Racist interactions are likely to occur before, during, and after work hours

With issues, concerns, or suggestions… lead with curiosity and respect
- Do not insert your own beliefs or try to "fix" someone's experience
- Do not minimize
- Respect their lived experiences

Build awareness
- Power imbalances
- Notice retention issues
- Regularly check in with ESL staff members (Resource Sharing Project, 2008)

What does a "vicarious trauma-informed organization" look like?
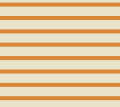
Training and Professional Development

- Job-specific training strengthens confidence and competence in performance and builds networks (Saakvitne and Pearlman 1996; Bell, Kulkarni, and Dalton 2003; Howlett and Collins 2014)
- Offer training specific to vicarious trauma to increase staff awareness around warning signs and impact

Self-Care & Staff Wellness

- Devote time and resources to promoting staff well-being
- Incorporate self-care into policies and practices
- Staff support groups

(From OVC - The Vicarious Trauma Toolkit)

Closing Summary

Vicarious Trauma is common and likely to show up among staff

The impact can range from mild burnout to significant impairment in both personal and professional life

Organizational support can mitigate the presence and severity of vicarious trauma

Thank You!

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