VICARIOUS TRAUMA: LOOKING AFTER YOURSELF AT WORK

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OVERVIEW

- Vicarious trauma - what is it?
- Main risk and protective factors
- Promoting resilience - strategies for individual workers and managers
- Practical tools to help manage the emotional impact of working with survivors of violence
- When to get help - signs you or colleagues are not coping
- Getting help that works
I have worked in child protection for 2 years. I came to the job right after finishing my degree. I thought I was doing OK, but then I started feeling overwhelmed...like nothing I did could possibly make a difference. Now, I’m often staying late at work trying to get on top of things but the files just keep piling up.

I don’t sleep well and when I do, I have bad dreams, especially about one of the cases I handled six months ago, a toddler being abused that I couldn’t help. I keep seeing her getting abused...and I can’t stop it from happening.

I mentioned struggling with a couple of cases to my manager. She suggested I ring the EAP. In my team, we talk about cases and the stress of having pending files but we don’t really talk about ourselves. My partner knows nothing about it.
**WHAT IS VICARIOUS TRAUMA?**

**Vicarious Trauma vs Burnout: is there a difference?**

Research shows a large overlap & stronger link between burnout and ongoing worker distress

**Burnout**
- Linked to cumulative stress
- Work-related dissatisfaction, sense of hopelessness and inefficacy
- Can lead to serious emotional and health problems

**Vicarious Trauma**
- Results from secondary exposure to traumatic events
- Can lead to symptoms similar to PTSD and depression including feeling wound-up or hopeless, or having nightmares and intrusive thoughts about clients’ traumatic material
- Can affect workers’ view of self & the world particularly their sense of safety, control and trust in others
RISK FACTORS

Organisational Environment
- No social support
- Lack of safety
- Inadequate training
- Unbalanced workload

Worker’s Experience
- New to the job
- Diminished job satisfaction—feeling ineffective
- Previous trauma history? *It depends*

Working with Clients
- Feeling unsafe with clients
- Exposure to traumatic materials? *It depends*
- Managing client risk

*It depends*
WHAT WILL HELP PROTECT YOU MOST?

Working with survivors of violence

Protection factors

Social support: peer groups, supervision etc...

Safety: Processes & support to deal with client related threats

Effectiveness & satisfaction: Access to the right training & supervision or having systems that help clients

Clients at risk or that threaten you

Working with traumatic material

Working in system that is under-resourced or pressured
PROMOTING A RESILIENT WORKPLACE

Team leaders and managers’ checklist:

✓ Clear policies and procedures regarding helping people who have experienced violence
✓ Regular ongoing skills development in evidence-based practice - reporting procedures, trauma-informed care, trauma-focused treatment etc...
✓ Regular opportunity to discuss working with survivors of violence as a team and individually - team meeting item, case discussions, part of supervisory process (e.g. reflective supervision)
✓ Clear process to access support (not just WHO but WHAT kind of support and HOW it is provided)
✓ Workload balance and ensuring appropriate support for dealing with client threats
WHAT ABOUT WORKER SELF-CARE?

C onnection - seek meaningful support and ensure it’s part of your routine

A wareness - monitor yourself and be aware of the impact of trauma and your needs

R esourcing - focus on work-life balance & health, practice strategies that help you tolerate negative emotions and look at adverse events in a flexible and realistic manner

E ffectiveness - make sure you have the right training and supervision so that your work has meaning & purpose
Manager’s support
Reflective supervision- not just task or procedure focussed

Work community
Team in which impact of working with violence is acknowledged
Regular opportunities for sharing, problem solving and support

Family and friends
Provide support and a sense of belonging and meaning beyond work
POLL
To manage strong negative emotions:

- Be prepared-rehearse 2 skills as part of your routine:
  1. Learn to ride the wave- don’t avoid or dwell (mindfulness)
  2. Use techniques that help decrease intensity of feelings e.g. distraction (grounding) and breathing

- Make sure you keep accessing positive emotions and engage in activities that give your life meaning

- Don’t use drugs and alcohol to cope or numb yourself
RESOURCING- COMMON THINKING TRAPS

**Black & white thinking**

“I am completely responsible for my client’s care”

**Making judgments based on outcomes**

“My client got hurt because I didn’t do enough”

**Catastrophising**

“Something terrible will happen”

- Overwhelmed, increase time at work
- Guilty, disengage from work
- Anxious, use alcohol to stop thinking about it
Monitor your thinking

If you fall into thinking traps, challenge them by:

• Asking yourself if they are based on facts
• Examining how much control you really have
• Noticing if you use black and white terms like always, never, everyone, no one
• Coming up with an alternative statement and,
• Rehearsing it
Emotions:
Increased anger, irritability or anxiety. Feelings flat, helpless, hopeless or numb.

Thoughts:
Unwanted and recurring memories or dreams of client’s trauma Preoccupation with clients or work; dreading to go to work; thinking that work is meaningless or that you are not competent.

Physical symptoms:
Sleep problems, tension, headaches, stomach aches, increased fatigue or illness, change in appetite.

Behaviour at work:
Avoiding certain clients or spending too much time on them, increased mistakes, getting in late or taking a lot of days off.

Behaviour at home:
Withdrawing from friends and family, no longer doing things you like, increased alcohol, drug or medication use.
Sometimes it’s hard to see problems emerging. Additional ways to monitor yourself include:

1. Asking friends or family about whether you have changed in any way, or how they view the impact of your work

2. Keep a daily diary for a week or two:
   - how much of your time did you spend at work, thinking about work or avoiding work?
   - how does that compare to time dedicated to rest, entertainment, social life and exercise?

3. Use self report scales such as the Professional Quality of Life Scale: [http://proqol.org/ProQol_Test.html](http://proqol.org/ProQol_Test.html)
Upset by a recent contact with a trauma survivor?

Talk to a peer or manager you trust

Everyone is different - initially you may need:

1. practical help (e.g. help with paperwork or temporary change in workload)
2. emotional support (e.g. acknowledgement of what you are going through by a colleague or by friends and family)
If you are not coping:

Get professional help early, before problems become entrenched
Your EAP is a good place to start
Effective help usually includes being taught strategies:

• to help you re-engage in activities and relationships that give your life meaning or give you pleasure
• to tolerate and manage negative emotions
• to change your thinking and solve problems effectively
RESOURCES AND REFERENCES

A list of resources can be found at:
A http://www.nctsnet.org/resources/topics/secondary-traumatic-stress


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