Secondary Trauma –

What is it, why should I be concerned about it and what can I do about?

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June 9, 2016

Objectives for today

- Define Secondary Traumatic Stress (STS)
- Identify signs and symptoms of STS
- Identify at least 5 strategies that they can use to mitigate the negative impact of STS.
- Describe at least 2 strategies that supervisors can use to support staff from developing STS.
 Develop a personalized plan for self-care
- Warning: We are going to get personal today. If it is too much at any point feel free to step out.

Compassion Fatigue

• Compassion Fatigue – a potential consequence of working with individuals

- Results in "a loss of ability to empathize with clients" (Knight, 2013, p. 228)
- Fear and anxiety dwell within compassion fatigue (Killian, 2008)

Compassion Fatigue

- Clients do not have to be traumatized for a worker to experience Compassion Fatigue
- Often Secondary Traumatic Stress is associated with Compassion Fatigue
- Importance of doing self-care to reduce likelihood of Compassion Fatigue

Compassion Satisfaction

- Opposite of Compassion Fatigue
- "Sense of reward, efficacy, and competence one feels in one's role as a helping professional" (Killian, 2012, p. 33)

Efficacy – to be beneficial; produce change

Reflection

- What resonates as you think about compassion fatigue? Do you think you have experienced that behavior?
- As you reflect upon compassion satisfaction – what resonates for you? What brings you satisfaction in your current employment?

Burnout

- Burnout 3 dimensions
- Diminished personal accomplishment • Emotional exhaustion
- Depersonalization (feeling detached from oneself or the situation) or cynicism
- Result of chronic exposure to stress in the workplace
- Impact to person's perception of self and others and impacts the work environment
 - Poor job satisfaction

 - Work performance
 Lack of commitment to employer
 Lack of overall well being

Maslach & Jackson (1981); Kim, Ji & Kao (2011); Lizano & Barak (2015)

Burnout

- Gradual process rather than sudden onset
- Clients do not need to have trauma exposure
- Can happen outside of helping profession
- Family conflict combined with continuous work stress can increase likelihood of burnout

Maslach & Jackson (1981); Kim, Ji & Kao (2011); Lizano & Barak (2015)

Reflection

- What stands out for you as you think about burnout?
- What differences do you see between burnout and compassion fatigue?

Secondary Traumatic Stress

- Emotional distress and disruption of functioning caused by associating with someone who has been traumatized (Figley, 1995; Bride 2007)
- "... the stress from helping or wanting to help a stressed person especially a child." (Figley, 1995; Henry, 2012)

Secondary Traumatic Stress

- At least one indirect exposure to traumatic material.
 - Verbally
 - Drawings/paintings
- Sharing life with someone that has been traumatized
- Who can be impacted by STS?
 Helping profession nurses, social workers, doctors, teachers, etc.
- Caring family member or friend
- STS can occur suddenly without warning

Figley (1995); Rzeszutek, Partyka & Golab (2015)

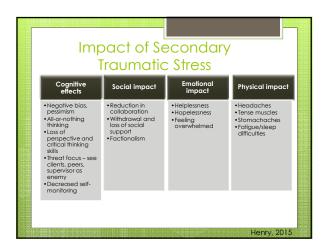
Statistics related to STS

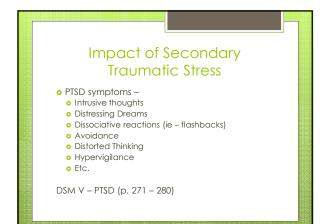
- National Child Traumatic Stress Network (2011) – 6% - 26% of therapists working with traumatized individuals are at high risk of developing STS
- Same study suggest up to 50% of child welfare are at high risk of developing STS

Statistics related to STS

o Bride (2007)

- 249 social workers in the study
- 70.2% experienced at least one symptom of STS in previous week
- 15.2% met criteria for PTSD





Impact of Secondary Traumatic Stress

• Workplace implications –

- Higher rate of absenteeismGreater health care expenses
- Staff client relationship hampered
- What does this do to outcome of services?
- Staff client relationship boundaries blurred
 What can this do to outcome of services?
 Or worse?

Whitfield & Kanter (2014); Knight (2013); Figley (1995)

Reflection

- What resonates with you as you reflect upon Secondary Traumatic Stress (STS)?
 How much of your case load consists of individuals that have been traumatized?
- What differences do you see between compassion fatigue, burnout and STS?

Check In

• If anyone is feeling anxious or concerned about this topic, you are welcome to step out.

• I encourage you to check in with someone.

Self-Assessment

- Professional Qualify of Life Scale (ProQOL)
- Assesses:
- Compassion Satisfaction
- o Burnout
- Secondary Traumatic Stress
- Page 1 Complete Self-Assessment (last 30 days)
- Page 2 Tells you how to score it
- Page 3 Explains your scores

We need to embrace what is happening for each of us ...

- Acknowledge the stress of being in the helping profession
- Feel ok about expressing our feelings to others
- Validating one another
- Understanding that this springs up from our caring and compassion
- Recognize how widely STS is experienced by others

Reducing impact of STS

• Self-Awareness

- Balance personal and professional life
- Ask for help
- Self-Care
 - Physical
 - o Mental
- Emotional
- Spiritual
- Self-Care Assessment Worksheet
- Transforming the Pain: A Workbook on Vicarious Trauma. Saakvitne,

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Pearlman & Staff of TSI/CAAP (Norton, 1996)

Let's Make a Plan

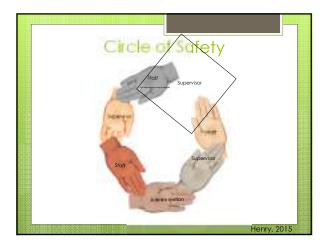
- Personal Plan
- Just for the next 2 weeks ...
- What are you going to do? • Be specific
 - Keep it manageable
- Who is going to do it? Who needs to be involved to make this work?
- When will it be done? Set a date

Looking Ahead

Institute for Healthcare Improvem

- Opportunity to do some self-reflection ...
 What happened as a result of this plan? What did you learn? What should you do different next time?
- Back side is blank for future copy making
- Do this type of activity weekly or bi-weekly
- Take the ProQOL again in the future to stay self-aware
- Email will be sent to Heather
 - ProQOL





The Bigger Picture

• Role of the supervisor • Understand STS

- Provide regular supervision
- Inquire of the staff member's feelings about their work.
 - How are you feeling today?
 - What's your goal for our meeting today?
- Encourage to discuss cases cognitively and affectively
- Caution that supervision does not become a therapy session

The Bigger Picture

- Organizational opportunities to address STS ...
 - Trauma Informed Administration
 - Policies and practices that are realistic
 - Mentoring programs for new staff
 - Support supervisors providing supervision
 Education and training regarding STS for all staff
 - Case assignments being distributed "fairly"
 - Employee Assistance Program

Organizational Self-Assessment

- The Secondary Traumatic Stress-Informed Organization Assessment (STSI-OA)
- Sprang, Ross, Blackshear, Miller, Vrabel, Ham,
 - Henry and Caringi (2014)
- Assesses:
 - Promotion of resilience building activities
 - Promotes safety
 - Examination of policies & proceduresSTS Knowledge
- Accessible through the University of Kentucky, Center on Trauma & Children. http://www.uky.edu/CTAC/node/234

Next Steps

• Share with your table mates ...

- o Identify one thing you are taking away from today?
- Identify one thing you can do for yourself to mitigate the impact of secondary traumatic stress?
- Identify one thing you can share with your supervisor about secondary traumatic stress?

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