

Managing Secondary Traumatic Stress

Extending the Shelf-Life of
those who work with Trauma

<http://www.youtube.com/watch?v=XfmVBmDKLZI>

Secondary Traumatic Stress

What is it?

What does it look like?

What can we do about it?

Secondary Traumatic Stress

WHAT IS IT?

- AKA: vicarious trauma, compassion fatigue
- It is the resulting effects of chronic exposure to traumatic material
- Symptoms are the same as those experienced by direct exposure
- First noticed in ER nurses who had “lost their ability to nurture” (Boyle, 2011)

It's just like regular trauma

Hyper vigilance

Abnormal responses to normal situations
(triggers)

Withdrawal

Avoidance

Trauma

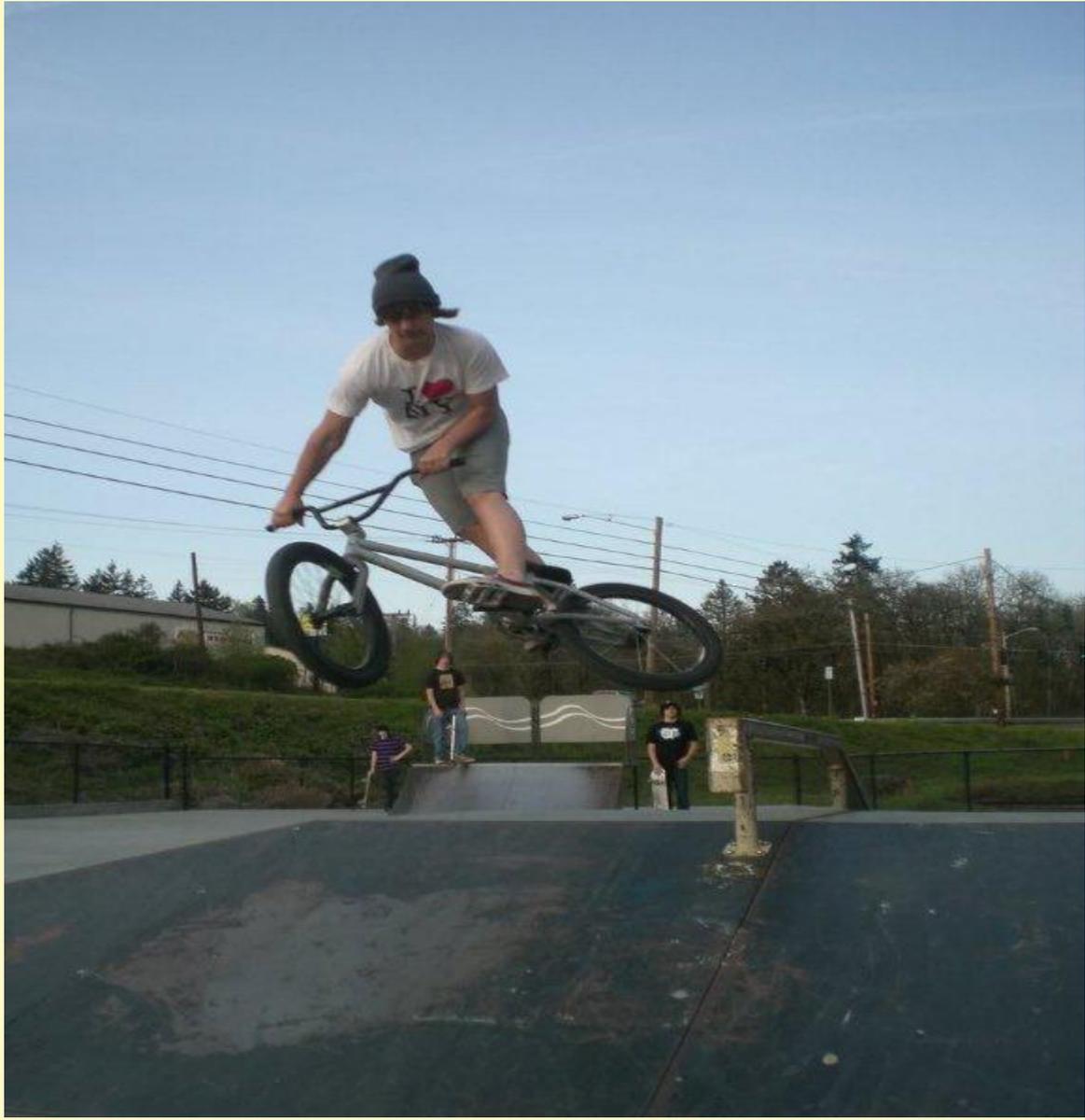
A person has experienced trauma if:

Must feel fear, helplessness or horror (APA, 2000)

Our response to trauma is innate-our body is built to respond to trauma

**“ A normal reaction to an abnormal event”
that can result in...**

An abnormal reaction to a normal situation



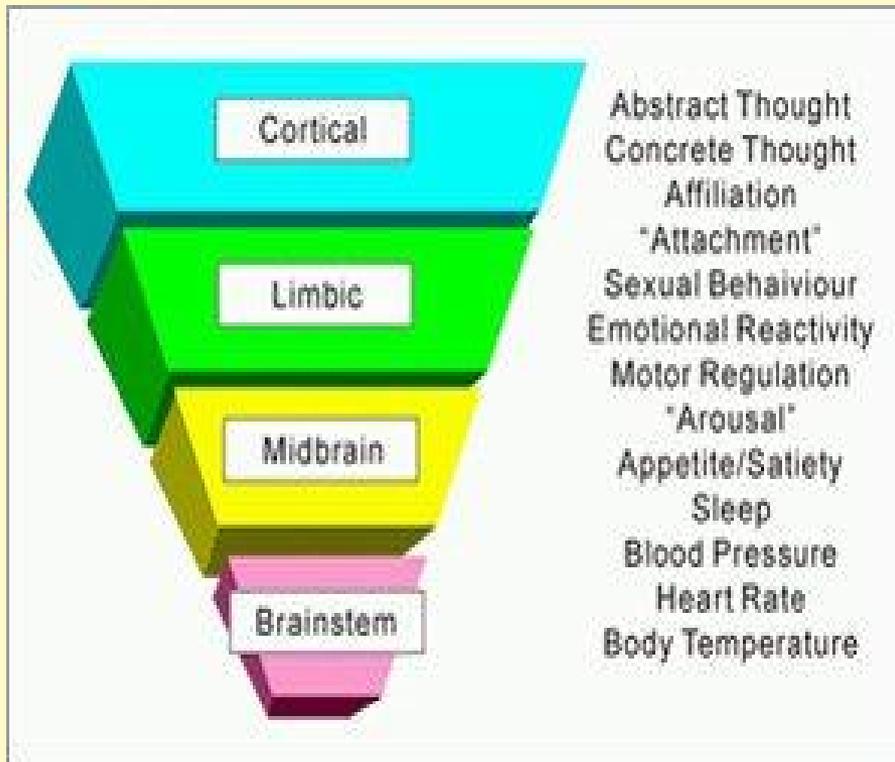
Abnormal Responses to Normal Situations

http://www.youtube.com/watch?v=3sOXN_80ohM

“Most of us are abnormal in one way or another. The thing that separates us is not the presence or absence of abnormality but rather the depth at which our abnormalities control our lives”

Dr. Greg Moffatt, *Survivors*, p.50

So about trauma: It's a biology/chemistry thing



Trauma

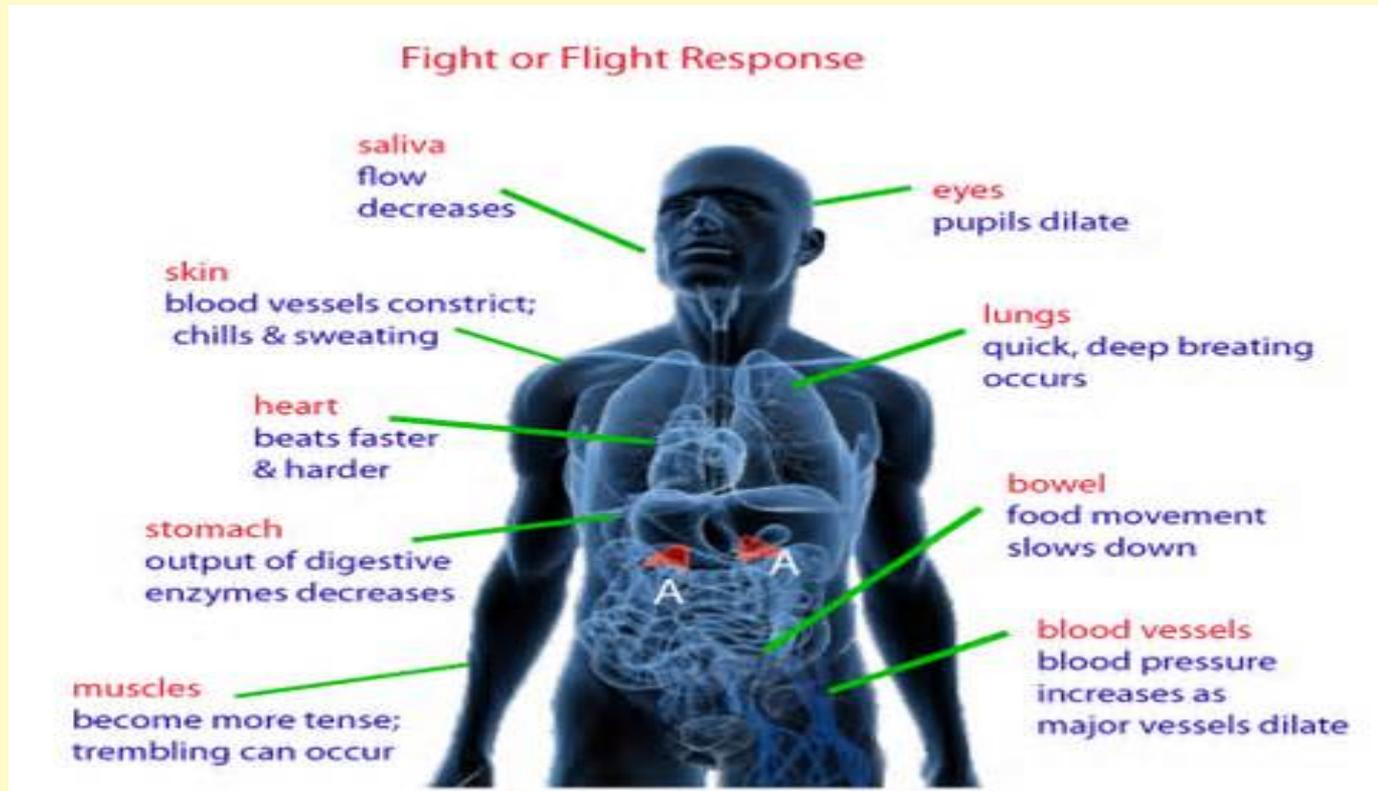
It is subjective

And it messes with our thinking



Fight-Flight-Freeze

How do we respond?



<http://www.youtube.com/watch?v=OdOOlxcUjAs>

“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 on water without getting wet. This sort of denial is no small matter”

Rachael Naomi Remen, M.D.

Recognizing STS

MANIFESTATIONS

Emotional
Intellectual
Physical
Social
Spiritual
Work

Recognizing STS

Emotional:

Anger

Apathy

Cynicism

Desensitization

Discouragement

Irritability

Lessened Enthusiasm

Hopeless

Sarcastic



Recognizing STS

Intellectual/Cognitive

Difficulty concentrating

Weakened attention to detail

Disorderliness

Recognizing STS

Physical:

Increased somatic complaints

GI, headache, insomnia

Lack of energy/endurance

More prone to accidents

Weariness, fatigue, exhaustion

Recognizing STS

- **Social:**

Callousness

Loss of interest in
activities once
enjoyed

Feelings of
alienation,
estrangement,
isolation

Unresponsiveness

Indifference

Withdrawal from
family &/or friends

Stress & Immunity

32 men

1 time paced memory test (active coping)

1 "gruesome" surgical video (passive coping)

1 control TV show

OSU Researchers measured their saliva for levels of S-IgA...immunoglobulin that regulates immune and inflammatory responses and protecting mucosal surfaces against invasion by parasites

What they found

1. Taking the test increased the output of S-IgA
2. Within 10 minutes of watching the video- output of S-IgA decreased.

“ We conclude that acute stress can have both enhancing and suppressive effects on secretory immunity, the IgA1 subclass in particular”

(Bosch,J. et al; 2001)

Type of stress matters.

Recognizing STS

- **Spiritual:**

Decrease in discernment

Disinterest in introspection

Spiritual awareness

Poor judgment



HECK WITH THIS
I'm going home

Recognizing STS

- **Work**

Absenteeism/Tardiness

Avoidance of intense client/victim/patient situations

Desire to quit

Diminished performance

Stereotypical/impersonal communication

- Negative bias, pessimism
- Loss of perspective and critical thinking skills
- Threat focus – see clients, peers, supervisor as enemy

(Tullberg, 2012)



“My glass is not only half-empty, I'm convinced someone spit in it.”

— [Judy Nichols, *Sportsman's Bet*](#)



System-Level Impact

Distrust among collaborators/co-workers

(Hyperarousal)

+

Decreased motivation/increased absenteeism

(Withdrawal)

+

Compromised ability to manage clients' trauma reactions

(Avoidance)

+

Loss of perspective and critical thinking

(Hyperarousal)

=

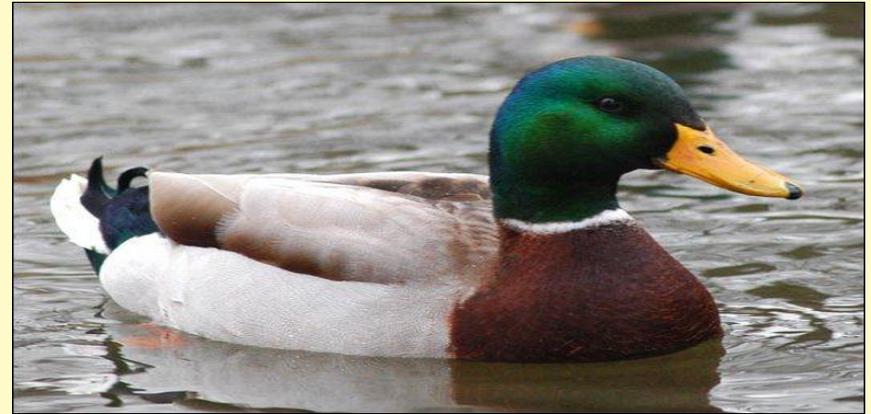
System Level Impact

Professionals that don't show up 100%
&
Poor outcomes

So now what??

Resilience

1: the capability of a strained body to recover its size and shape after deformation caused especially by compressive stress



2: an ability to recover from or adjust easily to misfortune or change



(Merriam-Webster, retrieved 2012)

Resilience

Resilience is not a trait that people either have or do not have.

It involves behaviors, thoughts, and actions that can be learned and developed in anyone (APA, retrieved 2012)

Individual Level

Compassion Satisfaction

Social Support

Positive emotions

Intentional Optimism

Managing STS

Compassion satisfaction



A sense of reward,
efficacy and
competence in the
role of helping others

Killian (2008)

ProQOL

<http://proqol.org>

Social Support



Check in with colleagues

- they understand your language/humor
- confidentiality

Have "normal" friends

- reciprocate

Formulate an "A-Team"

Positive Emotions

They are developed in times
of safety and rest

Positive emotions have the
ability to undo the
negative effects of
traumatic stress

-decrease heart rate,
vasoconstriction, blood
pressure

-increases cognitive ability



Positive emotions

JOY



Positive Emotions

GRATITUDE
TURNS
WHAT
WE
HAVE
INTO
ENOUGH

GRATITUDE



Positive Emotions

SERENITY



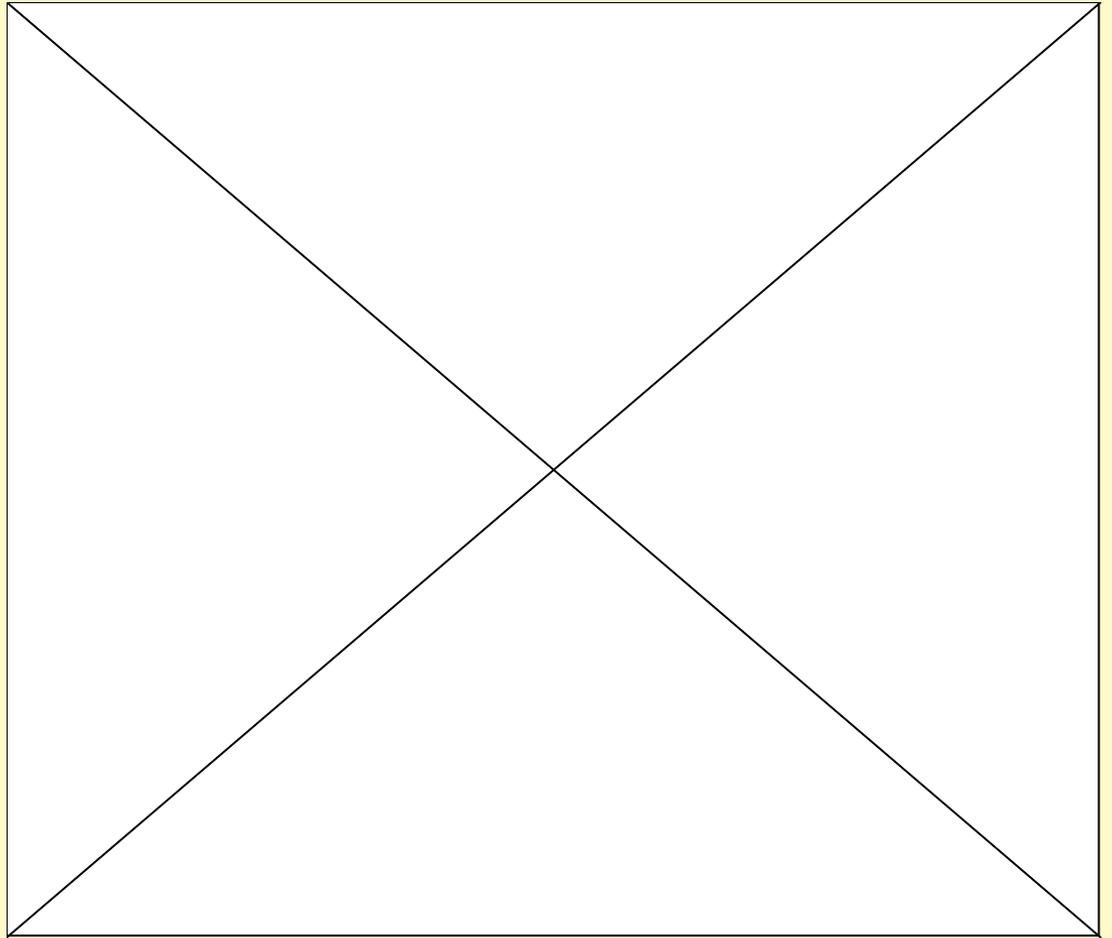
Positive Emotions

INTEREST



Positive Emotions

AMUSEMENT



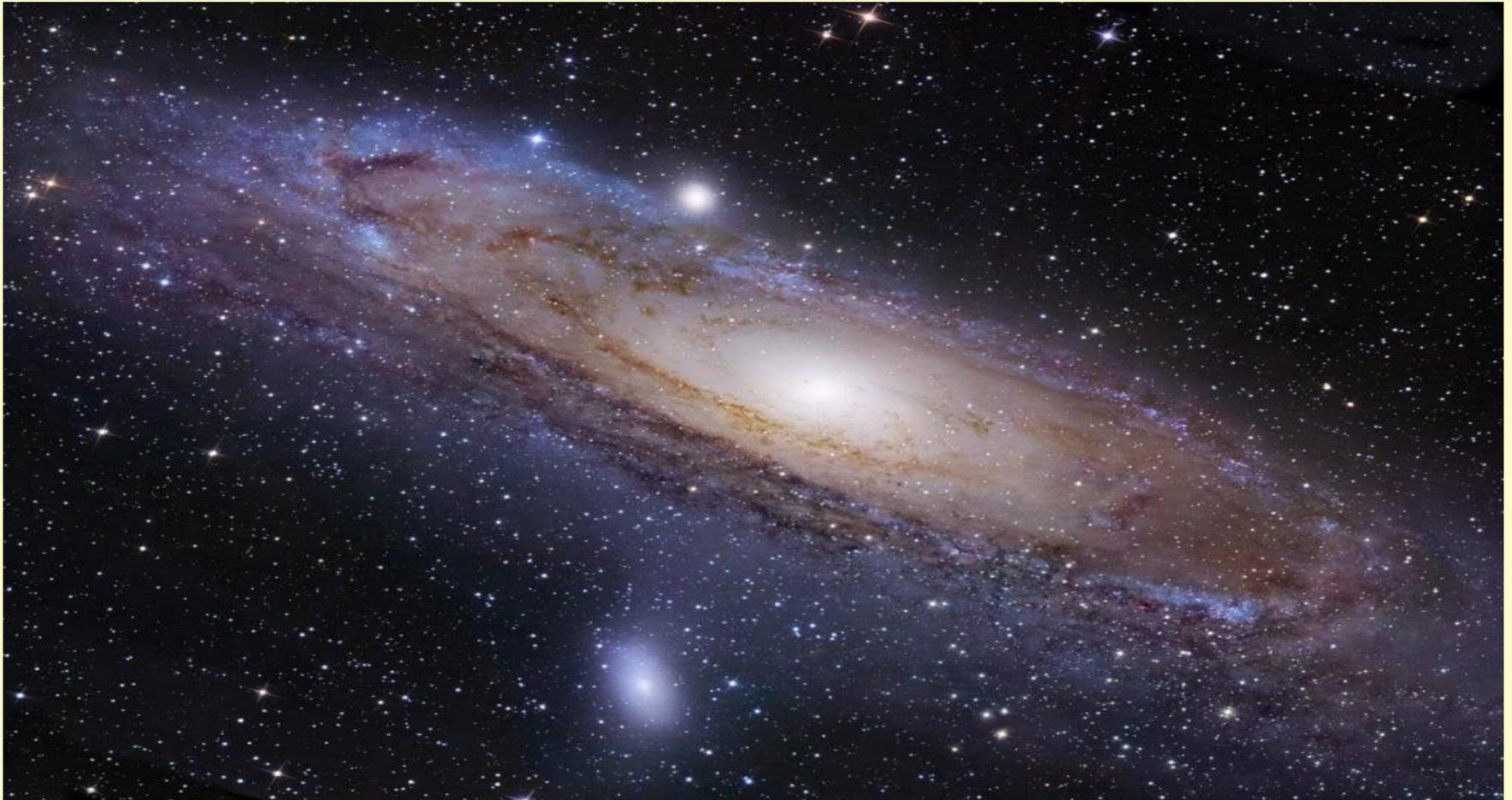
Positive Emotions

INSPIRATION



Positive Emotions

AWE



Positive Emotions

PRIDE



Positive Emotions

HOPE



Positive Emotions



LOVE

Intentional Optimism

To interpret situations
in the best possible
light

Anticipate the best
possible outcomes

On purpose



Perspective is everything

“Everything can be taken from a man but one thing: the last of the human freedoms- to choose one’s own attitude in any given set of circumstances, to choose one’s own way.”

Viktor Frankl, 1945

Intentional Optimism

when i get sad,
I stop being sad and be
AWESOME instead.

TRUE STORY.



Train Your Brain

Practice intentional
optimism

Anticipate the best
possible
outcomes...

On purpose.



Louis CK on perspective:

http://www.liveleak.com/view?i=aba_1332656862

Perspective is everything

“Everything can be taken from a man but one thing: the last of the human freedoms- **to choose one’s own attitude in any given set of circumstances**, to choose one’s own way.”

Viktor Frankl, 1945

And one more thing...

Mindfulness is good for your brain.

<http://www.youtube.com/watch?v=L-IZArfQH0o>

Supervisor Level

Organizational Level

Change in work culture

Top level "buy in"

Difficult case processing/ formal &
informal

Trauma Informed Care

Organizational Level

- Why should they care?
- What can they do?

How does your organization support you with your stress?

Stress Reduction Kit



Directions:

1. Place kit on FIRM surface.
2. Follow directions in circle of kit.
3. Repeat step 2 as necessary, or until unconscious.
4. If unconscious, cease stress reduction activity.

Impact on Organizations

- Prevent worker turnover
- Costs of hiring and training new employees
- Long-term effects on the mental and physical health of people

Impact on Organizations

- Addressing the occupational hazard of STS is in the best interest of all involved:
 - Vulnerable children
 - The organizations responsible for their care and protection
 - The workers doing the work
 - Society

Organizational Risk Factors

- Extraordinary high caseloads
- High administrative burden
- Difficult clients
- Conflicts with co-workers or supervisors
- Climate of pervasive, ongoing change
- Excessive emphasis on efficiency, cost-effectiveness and competition
- Unforgiving environment. "If you can't handle it, move aside....you'll be replaced"

Organizational Strategies for managing STS

- Work-related stress is accepted as real and legitimate
- Problem is owned by organization (not merely “problem” workers)
- Secondary trauma responses are recognized as normal responses
- Focus is on solutions (not blaming)
- Support and tolerance clearly expressed to worker
- Other “climate” issues (caseloads, official policy, EAP)

» Source: Sexton, 1999

Other Organizational Responses

- In-service training
- Policy on secondary trauma
- Ongoing program to manage secondary trauma
- Regular supervision, consultation and support groups
- Professional development opportunities
- Rotation in caseload and job responsibility
- Health care plan with adequate health care coverage

» Source: Nelson-Gardnell & Harris, 2003

Other Organizational Responses

- Enhance the physical safety of staff
- Workplace self-care groups
- Flextime scheduling
- Creating external partnerships with STS intervention providers
- Train organizational leaders and non-clinical staff on STS
- Provide ongoing assessment of staff risk and resiliency

» Source: *National Child Traumatic Stress Network*

- <https://www.dmgov.org/Departments/Police/Pages/DMPDPeerSupport.aspx>

- <http://safecallnow.org/>

- http://www.youtube.com/watch?feature=player_embedded&v=9ZvAjk9_INQ



Self-care is not selfish
or self-indulgent. We
cannot nurture others from a
dry well. We need to take care
of our own needs first, then we
can give from our surplus, our
abundance.

Jennifer Loudon





“It's not selfish to love
yourself, take care of
yourself, and to make
your happiness a
priority. It's necessary.”
-Mandy Hale

Final thoughts

Questions?

Contact information

Brenda Bash, MS
Polk County Crisis & Advocacy Services
515.286.2020
Brenda.bash@polkcountyiowa.gov

Darci Patterson
Department of Human Services
515.725.2719
dpatter1@dhs.state.ia.us

Jennifer Sleiter MSN, ARNP
Blank Children's Hospital
515.241.4311
Jennifer.sleiter@unitypoint.org