Finding Your Path to Resiliency:

The Effects of Vicarious Trauma in Adult Protective Services

Presenter:

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2015 NAPSA Conference
Orlando, FL
September 29, 2015

Working in systems that respond to elder abuse can be stressful. In adult protective services, frustrations and stress abound and professionals often must set their own limits. Working closely with traumatized older adults can also have an emotional and psychological impact for an APS professional due to the second-hand exposure to trauma, multiplied case after case, client after client. Vicarious trauma is an occupational hazard for those who serve, treat or represent victims of elder abuse and may affect an individual professional in profound ways. This presentation defines the experience of secondary trauma and its implications for those professionals who work within adult protective services.

Definitions

- Stress: Physiological reaction or response to a stimulus.

- Burnout: Severe reaction to stress in the work environment which results in physical and emotional depletion.

- Vicarious trauma: Passing on of traumatic stress by observation and/or bearing witness to stories of traumatic events.

- Compassion fatigue: Physical and emotional depletion caused by the accumulated memory of victims' stories and experiences or from one's own trauma on the job.

Job Factors That Can Cause Stress and Burnout:

Work overload	Frequent priority changes
Lack of control	Inadequate funding/resources
Frequent work interruptions	Unclear job expectations
Lack of appreciation	Limited upward mobility
Paperwork	Poor leadership

Physical Symptoms of Prolonged Stress

MILD FORM
- headaches
- heartburn
- gastrointestinal problems
- skin rash/hives
- lower immunity
- high blood pressure

EXTREME FORM
- migraines
- gastric ulcers
- colitis
- eczema
- heart attack
- stroke

Burnout Warning Signs:

- Depression

- Feelings of inadequacy or incompetence; self-critical

- Cynicism & pessimism

- Loss of compassion

- Discouragement

- Chronic fatigue

- Irritability & inflexibility

Contributing Factors:

- Professional isolation

- Constant demand to be empathetic

- Ambiguous successes

- Failure to live up to one's expectations

BURNOUT SELF - ASSESSMENT   (Dr. Gail Nagle, Greenville SC)

Choose: **4** *if you strongly agree;* **3** *if you agree;* **2** *if you mildly disagree; and* **1** *if you strongly disagree.*
Put the number on the blank in front of the question. When finished, add the numbers for a total score.

_____ 1.   Do you find yourself frequently upset or irritable?

_____ 2.   Are you performing your job carelessly or mechanically?

_____ 3.   Do activities you once enjoyed no longer interest you?

_____ 4.   Are you withdrawing from key relationships in your life?

_____ 5.   Are you less communicative with close friends or loved ones?

_____ 6.   Have you over-extended or over-committed yourself in terms of time or energy?

_____ 7.   Are you tired of it all, feeling mentally or physically drained?

_____ 8.   Do you find there is no time for relaxation or recreation?

_____ 9.   Have you lost your sense of perspective/view minor setbacks as catastrophes?

_____ 10.   Are you suffering more physical complaints: headaches, insomnia, frequent colds, fatigue?

_____ 11.   Do you have a hostile or cynical attitude toward others?

_____ 12.   Do you have unrealistic standards of behavior or performance for yourself?

_____ 13.   Is your general feeling one of sadness or depression?

_____ 14.   Are you working harder but accomplishing less?

_____ 15.   Do you dread going to work in the morning?

_____ 16.   Do you try to do everything equally well?

_____ 17.   Is your day filled with constant frustration and dissatisfaction?

_____ 18.   Do you feel you are inadequately compensated for the work you do?

_____ 19.   Are you unable to laugh at yourself?

_____ 20.   Do you feel more forgetful than usual? (Example: appointments.)

_____   **TOTAL**

Burnout Self –Test Scoring
20-40: No indication of burnout potential (but if less than 30, not being challenged).
41-50: Have good balance.
51-60: Got some warning signs.
61-70: Mild burnout; probably developing physical symptoms.
71-80: BURNOUT !!!

History of Vicarious Trauma

- 1990 — First defined among counselors of incest survivors.
- Later applied to counselors' reactions in work with all sexual abuse victims.
- Then applied to counselors working with all violent crime.
- Now applied to all who work with traumatized persons.

Basic Elements

- Not traumatized *directly*.
- Suffer *gradual* increase of exposure.
- **Second-hand** exposure (multiplied crime after crime, client after client) can traumatize caregivers.
- Parallels experience of **PTSD**.
- Can **reduce** effectiveness & **shorten** tenure.

Vicarious Trauma & Compassion Fatigue

- "The cost of caring."
- Characterized by losing your sense of self to the people you serve.
- Emotional residue of exposure to working with the suffering.
- Must contend not only with normal work stress, but with the emotional and personal feelings for the suffering.
- State of tension and preoccupation with the individual or cumulative trauma of clients.
- You are absorbing the trauma through the eyes and ears of your clients.

Combination of Factors:

- Nature of work
- Nature of clientele
- Cumulative exposure to clients' trauma
- Organizational context of work
- Social & cultural context of work

Why the Work Impacts Us

- We function outside the range of "normal" in our work.
- Exposure to cruelty and graphic info
- Exposure to the impact of crime on victims and communities
- Ongoing awareness of the possibility of crime and victimization
- Isolation

Personal Contributing Factors

- Unrealistic professional expectations
- Personal history of trauma that may be reawakened by client trauma
- Unfounded belief about the value of stoicism at work
- Current stressful personal life

Ways Supervisors Can Help Workers Deal with Secondary Trauma

BROWN BAG TOPIC

Organize a brown bag lunch to share positive experiences you and your colleagues have had working with adult protective services. Discuss constructive ideas for building the resilience of APS professionals. Adopt specific strategies that not only ameliorate the impact of vicarious trauma, but also encourage a work environment that appreciates the positive aspects of APS work and a helping profession.

To avoid burnout and to help caseworkers deal effectively with the effects of secondary trauma, supervisors can:

- Assist caseworkers in dealing with the emotional impact of the work by allowing them to share their thoughts and feelings about it.

- Offer ongoing or further support and validation to line workers when a traumatic event occurs. Staff need to be able to express their feelings and have opportunities to talk about their thoughts. If intrusive thoughts extend beyond the trauma experience, caseworkers need to learn to anticipate and manage them effectively.

- Institute a trauma support group. Meetings should be regularly scheduled (e.g., at the same time twice a month) with the focus on the traumatic stress in caseworkers' lives.

- Initiate supportive activities on the unit level. For example, a practice could be started of coworkers helping with paperwork or assisting with home visits during particularly traumatic periods. Supervisors can establish flexible work schedules, including "mental health days" or days spent in the office not making home visits. Another option is to spend time in certain meetings discussing the personal side of work.

- Deliver training to create self-awareness regarding stress and how to manage it, how to understand the effects of trauma, and how to develop coping skills that enable staff to better manage trauma.

Salus, M. K. (2004). Supervising child protective services caseworkers. *Washington, DC: Office on Child Abuse and Neglect, Children's Bureau of the Administration for Children and Families, Administration for Children and Families.*

Resilience Strategies

Resilience has been defined as "the capacity to bounce back:
to withstand hardship and repair oneself."

For Self-Knowledge and Insight:

- Explore your motivations for working with victims of crime
- Identify your own strengths and challenges
- Identify themes associated with discomfort
- Clarify goals, mission, and boundaries of the organization
- Know your code of ethics

For Sense of Hope:

- Develop opportunities to succeed
- Practice gratitude
- Change or expand your job description
- Give praise
- Diversify client types
- Seek advanced professional development
- Decorate your office
- Find appropriate ways to have fun

For Healthy Coping:

- Learn to identify your physical stress reactions
- Balance your life
- Get adequate sleep
- Change the pace
- Develop calming and modulation techniques
- Assess safety in your work environment

For Strong Relationships:

- Enhance communication skills
- Learn boundaries of confidentiality
- Collaborate
- Discuss cases
- Seek inclusiveness and diversity
- Foster a team approach
- Address conflict-resolution proactively
- Strive to be genuine, empathetic, and warm

For Personal Perspective & Meaning:

- Assess your personal values
- Integrate new understanding in your work
- Assess your perspective of suffering
- Question old beliefs
- Foster altruism
- Engage in social activism
- Include meaning and values in assessment of victims' strengths
- Discard activities that are not coherent with values

The ABCs of Managing Secondary Trauma—
*A*wareness, *B*alance, and *C*onnection

Being aware of how our work can impact us, and achieving and maintaining a sense of balance and connection in our lives, can prevent us from experiencing secondary trauma and/or mitigate its harmful effects. Listed below are several ways in which you can decrease your risk of experiencing—or reduce the impact of—secondary trauma.

Awareness
- *Know your own "trauma map."* Acknowledge your own history of trauma and be aware that it can affect how you view and do this work.
- *Inventory your current lifestyle choices and make necessary changes.* Do you get enough sleep? Do you allow yourself downtime? Do you exercise regularly? Try to do these things.
- *Take care of yourself.* Create a self-care list and post it prominently in your home or office. A sample self-care list may encourage you to:
  - Be creative;
  - Get away;
  - Get outside and appreciate the weather;
  - Enjoy other environments;
  - Have fun; and
  - Socialize with people who aren't criminal!

Balance
- *Give yourself permission to fully experience emotional reactions.* Do not keep your emotions "bottled up."
- *Maintain clear work boundaries.* Avoid working overtime and do not spend all of your free time socializing only with coworkers, discussing the negative aspects of your job.
- *Set realistic goals for yourself.* Know your limits and accept them.
- *Learn and practice time management skills.* These skills will help you achieve a sense of balance in both your professional and personal lives.
- *Seek out a new leisure activity.* Choose a leisure activity unrelated to your job.
- *Recognize negative coping skills and avoid them.* Substitute these coping skills with the more positive coping skills included in your self-care list!

Connection
- *Listen to feedback from colleagues, friends, and family members.* Have a family member or friend conduct periodic "pulse checks."
- *Avoid professional isolation.* While it is best to not spend all of your time with coworkers, it is beneficial to be connected with and supported by your coworkers on the job.
- *Debrief after difficult cases.* Now is the time to talk to and connect with another coworker!
- *Develop support systems.* Start an informal peer support group, seek out a mentor, or be a mentor to someone else.
- *Seek training to improve job skills and capacity.* Training will not only allow you to stay abreast of new issues emerging in the field but will also allow you to connect with others who do this work
- *Remember your spiritual side.* While often neglected when stress occurs, this aspect can be most helpful to coping with secondary trauma.

Next Steps in Responding to Secondary Trauma

Being aware of what you need in order to take care of yourself in this work is an important step in responding to secondary trauma. Take a moment to reflect on your specific needs and complete the handout below.

1. Write down three things you could do to address secondary trauma for each of the following areas of your life and work: *personal*, *professional*, and *agency*.

Personal:

_____
_____
_____

Professional:

_____
_____
_____

Agency:

_____
_____
_____

2. Place an asterisk (*) beside every strategy you could implement during the next month.

3. Circle one in each category that you will try to do during the next week.

4. Identify three personal satisfactions you derive from doing this work.

_____
_____
_____

RECOMMENDED READING ON SECONDARY TRAUMA

Anderson, D. (2000). *Coping Strategies and Burnout Among Veteran Child Protection Workers*. Child Abuse & Neglect, Vol. 24, 6, pp. 839-848.

Figley, C.R. (Ed.). (1995). *Compassion Fatigue: Coping with Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized*. New York: Brunner/Mazel.

Friedman, R. (2002). *The Importance of Helping the Helper*. Best Practice Next Practice, Winter, 2002, p. 20.

Geller, J., Madsen, L., and Ohrenstein, L. (2004). *Secondary Trauma: A Team Approach*. Clinical Social Work Journal, Vol. 32, 4, pp. 415 – 430.

Herman, J. (1997). *Trauma and Recovery*. New York: Basic Books.

Horwitz, M. (1998). *Social Worker Trauma – Building Resilience in Child Protection Social Workers*. Smith College Studies in SW, June 1998, p. 4.

Maslach, C. (1982). *Burnout: The Cost of Caring*. Englewood Cliffs, NJ: Prentice Hall.

Maltz, W. (1992). *Caution: Treating Sexual Abuse Can Be Hazardous to Your Love Life*. Treating Abuse Today, Vol. 2, 2, pp. 20-24.

McCann, I.L., & Pearlman, L.A. (1990). *Psychological Trauma and the Adult Survivor: Theory, Therapy, and Transformation*. New York: Brunner/Mazel.

McCann, I.L., & Pearlman, L.A. (1990). *Vicarious Traumatization: A Framework for Understanding the Psychological Effects of Working with Victims*. Journal of Traumatic Stress, Vol. 3, pp. 131 - 149.

Neumann, D.A., & Gamble, S.J. (1995). *Issues in the Professional Development of Psychotherapists: Countertransference and Vicarious Traumatization in the New Trauma Therapist*. Psychotherapy, Vol. 32, 2, pp. 341-347.

Pearlman, L.A. (1995). *Self-care for Trauma Therapists: Ameliorating Vicarious Traumatization*. In B.H. Stamm (Ed.), *Secondary Traumatic Stress: Self-care Issues for Clinicians, Researchers, and Educators*, pp. 51-64. Lutherville, MD: Sidran Press.

Pearlman, L.A., & Mac Ian, P.S. (1995). *Vicarious Traumatization: An Empirical Study of the Effects of Trauma Work on Trauma Therapists*. Professional Psychology: Research and Practice, Vol. 26, 6, pp. 558-565.

Pearlman, L.A., & Saakvitne, K.W. (1995). *Treating Therapists with Vicarious Traumatization and Secondary Traumatic Stress Disorders*. In C. Figley (Ed.), *Compassion Fatigue: Coping with Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized*, pp. 150-177. New York: Brunner/Mazel.

Pearlman, L.A., Saakvitne, K.W., et al. (1995). *Vicarious Traumatization: The Cost of Empathy*. Ukiah, CA: Cavalcade Productions, Inc.

Regehr, C., Hemsworth, D., Leslie, B., Howe, P. & Chau, S. (2004). *Predictors of Posttraumatic Distress in Child Welfare Workers: A Linear Structural Equation Model*. Children and Youth Services Review, Vol. 26, 331-346.

Rosenbloom, D.J., Pratt, A.C., & Pearlman, L.A. (1995). *Helpers' Responses to Trauma Work: Understanding and Intervening in an Organization*. In B.H. Stamm (Ed.), *Secondary Traumatic Stress: Self-care Issues for Clinicians, Researchers, and Educators*, pp. 65-79. Lutherville, MD: Sidran Press.

Rycraft, J.R. (1994). *The Party Isn't Over: the Agency Role in the Retention of Public Child Welfare Caseworkers*. Social Work, Vol. 39, pp. 75-80.

Saakvitne, K.W., Pearlman, L.A., & the Staff of the Traumatic Stress Institute (1996). *Transforming the Pain: A Workbook on Vicarious Traumatization*. New York: W.W. Norton.

Stamm, B.H. (Ed.), (1999). *Secondary Traumatic Stress: Self-care Issues for Clinicians, Researchers, and Educators, 2nd Edition*. Lutherville, MD: Sidran Press.

White, W. (1997). *The Incestuous Workplace: Stress and Distress in the Organizational Family*. Center City, MN: Hazelden.