

“I do not need help, I am  
a professional !”

## Vicarious Traumatization

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# What is Vicarious Traumatization

“ a transformation in the trauma worker’s inner experience resulting from empathic engagement with the trauma material of a client “ (McCann & Pearlman 1990)

Different from : countertransference, professional burnout and Secondary Traumatic Stress or compassion fatigue

# Other emotional reactions occurring in professional helpers

## Countertransference :

Reactions more related to personal life experiences of the therapist, not necessarily related to the patient's trauma. Of course related to the therapist-client relationship. (Figley, 1995)

## Burnout :

“A state of physical, emotional and mental exhaustion caused by long term involvement in emotionally demanding situations” (Pines and Aronson, 1988)

May result in physical, emotional, behavioural symptoms, work-related and interpersonal problems.

# Other emotional reactions occurring in professional helpers

## Secondary Traumatic Stress

- Behaviours and emotions resulting from helping a traumatized person.
- Focuses on observable symptoms.

## Compassion Fatigue

- A more general term reflecting the ‘Cost of Caring’
- Natural consequence of working with people who have experienced stressful events.(Figley, 1995)

# Trauma and fundamental beliefs

Experienced or observed trauma shakes up such beliefs as :

- People are goodwilling, well intended
- Life is good and meaningful
- I am competent and have value

# Cognitive trauma impact

Has my profession changed my outlook on :

- Myself, humans in general
- My feelings of security
- My sense of power/control over others or myself
- My faith in our system : Judicial, Health, Education
- The society I evolve in

# Cognitive trauma impact

I might have become aware of some painful feelings :

- I feel less secure than before
- Human nature disgusts me at times
- Life is unjust and depressing
- I only feel appreciated by my patients
- My workload is too great, overwhelming
- I have to stay in control all the time

# Constructivist Self-Development Theory (CSDT)

A framework for understanding Vicarious Traumatization

- Based on the belief that:

we construct our realities through development of cognitive schemas or perceptions which facilitate our understanding of life experiences.

- These changes occur to help us adapt to our experiences
- Irrational perceptions develop as self protection.

Pearlman & Saakvitne, 1995



# Cognitive Impact of Trauma

Trauma may disrupt worker's cognitive schemata in any of 5 fundamental need areas:

- Safety
- Trust/dependency
- Esteem
- Control
- Intimacy

# Cognitive Impact

VT can cause disruptions to:

- Ego resources that allow one to connect with others.
- Establishing a sense of self that is consistent over time.
- Frame of reference for interpreting our experiences (identity, world view and spirituality).
- Capacity to tolerate affect.
- Altering sensory memory systems.

# Effects of Vicarious Traumatization

Disturbances in:

- Affect tolerance
- Cognitive frame of reference (Challenges to beliefs and world view)
- Interpersonal relationships
- Psychological needs
- Decreased self-awareness
- Increased defenses
- Challenges to identity

(McCann & Pearlman, 1990 and Pearlman & Saakvitne, 1995)

# Effects of VT

- Hyper arousal (hypervigilance regarding own safety and interpersonal behavior)
- Feeling mistrustful of others
- Suspicion: attributing malevolent motivations to seemingly innocent interactions
- Intrusive thoughts (flashbacks of work material)
- Depression and/or anxiety
- Avoidance behaviours (e.g. substance abuse)
- Somatic complaints
- Dissociation

# Effects of VT

- Depression
- Anxiety
- Isolation
- Vulnerability
- Decreased trust in others
- Emotional hardening , anger, irritability
- Fatigue, frustration, cynicism

# Risk factors

- Gender
- Amount of exposure to traumatized clients
- Length of time providing services
- Clinician's own trauma history

## AND/OR

- High levels of stress
- Negative coping
- Cognitive evaluations

# Effects of VT

So...

The effects are cumulative, may be emotionally intrusive and painful,

but they can be changed..

# Some self inspection :

After this general picture : now focus on you

Three instruments to fill out;

Caveat :

This is information to yourself about yourself.

Later in the workshop sharing is possible, but totally voluntary.



# How can I lessen the impact of trauma

## Cognitive Hygiene :

Regularly ask yourself :

- What can I control and what not
- What belongs to me , what to my client
- How can I defuse certain images, sensations that come clients' stories
- How do I take care of myself : Physically, cognitively and intellectually, emotionnally, spiritually, creatively/artistically, professionally

# How can I lessen the impact of trauma

## Emotional hygiene :

- Body awareness : scan breathing, posture
- Emotional dosage :
  1. Boundaries (me vs other)
  2. Immersion in other's life
  3. Keep check on emotional reaction (volume button)
  4. If I were my client, what would I tell myself

# Emotional hygiene :

## When I feel afraid :

- what are my means of protection/prevention

## When Overwhelmed/helpless :

- Review my mandate
- Seek professional support : supervision, training, tools

# Emotional hygiene :

## After interview :

- Move , stretch, relax
- Scan : emotions, body (tension ?)
- What belongs to me, what to the client
- Countertransference : Helpless, exasperated, sad, angry
- Emotional anchoring : use of appeasing/soothing memory

## End of day :

- Breathing, foresee transition work to home, plan next day

# Individual vs organizational self care

## Organizational Care :

- Provide training
- Normalize/awareness of impact of trauma on workers
- Maintain/review reasonable caseload
- Provide clinical supervision, peer-supervision
- Provide debriefing for critical incidents
- Take care of interpersonal relationships/team spirit

# Individual vs organizational self care

## Individual selfcare :

### 1. Physical :

- food/sleep, exercise, relaxation (Alexander, 365)

### 2. Emotional :

- Foresee replenishment : humor, silence
- Surround self with supportive/loving people
- Allow self to refuse certain cases, variety of clients

# Individual selfcare :

## 3. Spiritual : religion, meditation

## 4. Cognitive :

- Introspection
- Meditate
- Read : professional and fiction
- Distance from Drama
- Awareness of other stressors (eg questionnaire of vulnerabilities)

# Individual selfcare :

## 5. Professional :

- Take time to train, think/read, get supervision
- Beware of what you take on
- Maintain balance professional vs personal life
- Time off/vacations
- Create an environment to your taste
- Maintain a good/playful team spirit
- Don't let problems drag on : be proactive



# Peer groups as tool

- Stressors are accepted as real and legitimate
- Seen as a group not an individual problem
- Solution seeking, not blame-seeking
- High level of tolerance for differences
- Support provided directly and positively
- Communication is open
- High degree of cohesion
- Flexibility of roles
- Resources are available and utilized.

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