Vicarious Trauma, Professional Wellness & Self-Care

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Transference & Counter-Transference

- Clinicians who conduct physical and psychological evaluations should be aware of the potential emotional reactions that evaluations of severe trauma may elicit in the interviewee and interviewer.

- These emotional reactions are known as transference and counter-transference.

Transference

- The feelings a survivor has towards the clinician that relate to past experiences but which are misunderstood as directed towards the clinician personally

- The evaluator's questions may be experienced as:
  - forced exposure akin to an interrogation
  - sign of mistrust or doubt on the part of the examiner

- The evaluator may be perceived as:
  - voyeuristic and sadistic motivations
  - as a person in a position of authority (in a positive or negative sense)
  - the interview situation may be perceived as resembling more strongly the torture situation
  - being on the side of the enemy

Counter-Transference

- The clician's should also be aware of his/her potential personal reactions, feelings that might influence the interviewer's perceptions and judgments

Counter-Transference

- The clician's personal reactions: feelings that might influence perceptions and judgments

- Common counter-transference reactions include:

  - Avoidance, withdrawal, defensive indifference,

  - Disillusionment, helplessness, hopelessness and over-identification,

  - Omnipotence and grandiosity in the form of feeling like a savior, the great expert on trauma or the last hope of the survivor,

  - Feelings of insecurity, feelings of guilt, excessive rage toward torturers and persecutors or toward the individual

Possible Effects of Counter-Transferrence Reactions

- Underestimating the severity of the consequences of torture

- Forgetting some details

- Leading to disbelief regarding the veracity of the alleged torture

- Failure to establish the necessary empathic approach

- Over-identification with the torture survivor

- Vicarious traumatisation, burn-out

- Difficulty in maintaining objectivity

Vicarious Trauma → Burnout

- Transformation of the worker's inner experience as a result of empathic engagement with clients and their trauma material (*Pearlman & Saakvitne, 1995)*

- Syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment

- Occurs among individuals who work with people in some capacity (*Maslach, Jackson, & Leiter, 1996*)

Signs & Symptoms of Burnout

- Apathy
- Feeling of hopelessness
- Rapid exhaustion
- Disillusionment
- Melancholy
- Forgetfulness
- Experiencing work as a heavy burden

- Alienated, impersonal, uncaring and cynical attitude towards clients
- Tendency to blame oneself
- Feeling of failure
- Irritability

Characteristics of Vicarious Trauma

- Cumulative

- Inevitable

- Developmental

- Modifiable

Professionals at Risk?

- Lawyers, judges
- Health care workers
- Police officers/soldiers
- Social workers
- Emergency and humanitarian workers
- Care givers
- Interpreters
- Journalists
- HR investigators/researchers

Note: family members, friends, & associates of trauma survivors also at risk

Areas of Impact

- Personal Well-Being
  - Physical
  - Psychological (thoughts, emotions, behavior)
  - Sense of meaning & purpose
  - Beliefs & attitudes, spirituality/faith
- Interpersonal Relationships
  - Family, friends, co-workers
- Professional
  - Work performance & job satisfaction

Risk Factors

- Personal trauma history & current life circumstances

- Personality, work style & coping style

- Professional role, work setting, and exposure

- Inadequate work & social support

- Lack of supervision/training on trauma and its effects

- Working in cultures characterized by self-neglect, toughing it out, risk-taking, and denial of personal needs

- Lack of systematic attention to self-care

Signs & Symptoms of Vicarious Trauma

- Physical

- Cognitive

- Affective

- Behavioral

- Frame of reference

Signs & Symptoms of Vicarious Trauma

- Signs and symptoms parallel direct trauma
  - PTSD, anxiety, depression, social withdrawal, emotional liability, aggression, greater sensitivity to violence, somatic symptoms, sleep disturbances, cynicism, changes is trust, self-esteem, intimacy and control
  - Alterations in sensory experiences (intrusive imagery, dissociation, depersonalization)

- Counter-transference (clinician's personal reactions):
  - Avoidance, withdrawal, defensive indifference, omnipotence
  - Disillusionment, helplessness, hopelessness and over-identification with client
  - Anger, fear, guilt, shame, denial of client trauma

Behavior and Relationship Signs of Vicarious Trauma

- Difficulty setting boundaries and separating work from personal life
- Feeling like you never have time or energy for yourself
- Feeling disconnected from loved ones
- Increased conflict in relationships
- General social withdrawal
- Irritable, intolerant, agitated, impatient, needy, and/or moody
- Increased dependencies or addictions
- Sexual difficulties
- Impulsivity

Changes in World View or Frame of Reference in Vicarious Trauma

- **Changes in beliefs**: i.e. regarding safety, control, trust, esteem, and intimacy that may influence thoughts of vulnerability and mistrust

- **Changes in identity**: as a professional, friend or family member

- **Changes in spirituality**: meaning, purpose, causality, connection, hope, and faith, often in the form of questioning prior beliefs and the meaning and purpose in life and can result in hopelessness, and cynicism

Preventing Burnout and Vicarious Traumatization

- Self care
- Solid professional training in diagnosis and (psycho)therapy
- Therapeutic self-awareness
- Regular self-examination by collegial and external supervision
- Limiting caseload
- Continuing education and learning about new concepts in trauma
- Opportunities for research and training sabbaticals
- Balance between empathy and a proper professional distance
- Social recognition for caregivers
- Alliance with medical mainstream and academic medicine

Self-Care

- Three ways to change the impact of a situation

  - Change the situation

  - Change our attitude towards the situation

  - Health-promoting behavior

Individual Strategies Self-Care

- Physical

- Psychological

- Emotional

- Spiritual

- Workplace/Professional

The ABCs of Self-Care

- <u>A</u>wareness
  - Know that vicarious trauma is predictable, cumulative and has negative consequences
  - Know your needs, your strengths and your limits
  - Identify the signs and symptoms of vicarious trauma in yourself
  - Mindfulness: purposeful, nonjudgmental attention
- <u>B</u>alance
  - Work, personal/family life, rest/pleasurable activities
- <u>C</u>onnection
  - Maintain supportive relationships with your colleagues, friends, family, community and your faith

Self-Care: Working Protectively

- How you think about your work plays a big role in helping keep you healthy and balanced

- Important questions to answer
  - Why do you do this work?
  - Do you know what you're doing in your work and why?
  - How do you measure success in your work?
  - What can you control in your work?
  - What are the costs and rewards of this work, and how are you personally changing?

Making a Personal Commitment to Self-Care: How?

- Work with others – a colleague or a group

- One day at a time

- One change at a time

- Use a variety of self care strategies

- Increase consciousness and self acceptance

- Don't forget and don't give up

Coping with & Transforming Vicarious Trauma

- **Coping with**: "Good coping strategies are things that help you take care of yourself – especially things that help you *escape, rest,* and *play*."

- **Transforming**: "At the deepest level, *transforming* vicarious trauma means identifying ways to nurture a sense of meaning and hope."

Make an Action Plan

- List your risk factors for vicarious trauma (personal factors current situation, cultural context)

- List any signs or symptoms of vicarious trauma that you are experiencing

- List what you can do to cope better with these symptoms & transform your vicarious trauma on a deeper level

- Identify obstacles that may interfere with your ability to cope with and transform your vicarious trauma

- What might you to do overcome the obstacles you identified?

Organizational Strategies

- A team culture of self and group care

- Planning and working for the long haul

- Creating a safe environment to express feelings

- Valuing socializing, fun and humor

- Education and workshops -vicarious trauma-

- Ensuring some non-trauma component of work

Vicarious Resilience

- **Resilience**: the ability to bounce back, to recover quickly from illness, change or misfortune

- **Vicarious Resilience**: the experience of empowerment deriving from exposure to the resilience of trauma survivors with whom we work

In Other Words… Vicarious Resilience Means

- Conscious recognition and celebration of the successes and satisfactions of our work

- We draw strength from the human capacity for healing by our exposure to our clients' abilities to go forward in life after torture and loss