# Vicarious Trauma, Compassion Fatigue, and Burnout

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### UNDERSTANDING AND ADDRESSING VICARIOUS TRAUMA

### By the end of the day we should be able to answer the following questions:

- 1. What is vicarious trauma (VT)?
- 2. What are things that put you most at risk for VT?
- 3. What are common signs of VT?
- 4. What helps? How can you address VT by taking care of yourself and working protectively?
- 5. What can organizations and managers do to help?

### PART 1: What is vicarious trauma?

- VT can be thought of as the negative changes that happen to humanitarian workers <u>over time</u> as they witness other people's suffering and need.
- VT is the process of change that happens because you care about other people who have been hurt, and feel committed or responsible to help them. Over time this process can lead to changes in your psychological, physical, and spiritual well-being.
- Q. Looking at the definition, what questions do you have about vicarious trauma?
- Q. What are some ways that you have changed over time because of your work?
  - VT happens because you care about people who have been hurt because you empathize with people who are hurting.
    - Empathy is the ability to identify with another person, to attempt to understand and feel for another person's pain and joy.
  - When you identify with the pain of people who have endured terrible things, you bring their grief, anger and despair into your own awareness and experience.
- Q. What sort of problems or people do you find it especially easy to empathize with?
- Q. What are some ways that caring about people who have been hurt affects you?
  - Your commitment and sense of responsibility can lead to high expectations and eventually contribute to your feeling burdened, overwhelmed, and perhaps hopeless.
- Q. How does your sense of commitment and responsibility to your work help you?

*Q.* Are there ways in which your sense of commitment and responsibility to your work might hurt you? How?

### Spirituality

• Over time, vicarious trauma leads to changes in your own psychological and spiritual well-being.

 A key component of vicarious trauma is changes in spirituality. Vicarious trauma, like experiencing trauma directly, can deeply impact the way you see the world and your deepest sense of meaning and hope.

Q. What are two ways you feel your work has had a positive influence on the way you see the world, yourself, or what matters to you (i.e. your sense of meaning and purpose, hope and faith)?

Q. What are two ways you believe your work has had a negative influence on the way you see the world, yourself, or what matters to you (i.e. your sense of meaning and purpose, hope and faith)?

### PART 2: Risk Factors for Vicarious Trauma

### Characteristics of the CLIENT that can contribute to VT

- Work with demanding clients who evidence behaviors that may interfere with treatment (i.e. no shows, noncompliance with treatment, etc.)
- Work with clients who may relate trauma stories of human cruelty and intense suffering
- Work with survivors who are also perpetrators

### Characteristics of the JOB/WORK SETTING that can contribute to VT

- Large caseloads
- Large percentage of clientele who have trauma experiences and suffer PTSD
- Barriers to achieving intervention goals
- Cumulative exposure to traumatized clients over time

### Characteristics of the HELPER that can contribute to VT

- Personal victimization history that is unresolved (i.e. issues of shame, guilt, anxiety, anger)
- Lack of experience novice workers are at greater risk
- Additive effects of trauma and other stressors
- Lack of coping skills impose excessive demands from self, others or work situation
- Current personal stress experience
- Unrealistic expectations around recovery of clients

### PART 3: Signs and Symptoms of Vicarious Trauma

- Feeling...
  - Overwhelmed... drained... exhausted... overloaded... angry... sad... guilty... shame... selfdoubt... isolated... detached
- Thinking
  - Preoccupied with clients outside of work... overidentification with clients... loss of hope... cynicism... question worth and competence... heightened sense of vulnerability and personal threats
- Doing
  - Detachment... cutting clients off... avoiding clients... personal relationship suffer... overextend self... high overall distress... difficulty in maintain boundaries with clients

### PART 4: What helps: Addressing Vicarious Trauma

### Coping

- Good coping strategies are things that help you take care of yourself especially things that help you escape, rest and play. These might include:
  - **Escape** Getting away from it all, physically or mentally (books or films, taking a day or a week off, playing video games, talking to friends about things other than work?;
  - **Rest** Having no goal or time-line, or doing things you find relaxing (lying on the grass watching the clouds, sipping a cup of tea, taking a nap, getting a massage; and
  - **Play** Engaging in activities that make you laugh or lighten your spirits (sharing funny stories with a friend, playing with a child, being creative, being physically active.

*Q.* What are three activities you do regularly or enjoy doing that can help you cope with vicarious trauma?

Q. Why do these activities help you in coping with vicarious trauma?

### Transforming

Transforming vicarious trauma means identifying ways to nurture a sense of meaning and hope.
What gives life and work meaning, and what instills or renews hope?

You likely have sources of meaning, purpose, hope, and perspective in your life. Some ways to connect, or reconnect, with these may be:

- Reminding yourself of the importance and value of humanitarian work;
- Staying connected with family, friends, and colleagues;
- Noticing and deliberately paying attention to the "little things" small moments like sipping a cup of coffee, the sound of the wind in the trees, or brief connections with others;
- Marking transitions, celebrating joys, and mourning losses with people you care about through traditions, rituals, or ceremonies;
- Taking time to reflect (e.g., by reading, writing, prayer, and meditation);
- Identifying and challenging your own negative beliefs; and
- Undertaking growth-promoting activities (learning, writing in a journal, being creative and artistic.

*Q.* What are three activities you do regularly or enjoy doing that could help you transform vicarious trauma on a deeper level?

*Q.* What do you think the difference is between a coping and a transforming activity? Could something help you cope and be transformational at the same time? How?

## PERSONAL VT, CF, and/or Burnout PLAN



### PROFESSIONAL QUALITY OF LIFE SCALE (PROQOL)

### COMPASSION SATISFACTION AND COMPASSION FATIGUE

(PROQOL) VERSION 5 (2009)

When you [*help*] people you have direct contact with their lives. As you may have found, your compassion for those you [*help*] can affect you in positive and negative ways. Below are some-questions about your experiences, both positive and negative, as a [*helper*]. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the <u>last 30 days</u>.

I=Neve	er 2=Rarely	3=Sometimes	4=Often	5=Very Often
١.	l am happy.			
2.	I am preoccupied with more	e than one person I [helb].		
3.	l get satisfaction from being			
4.	I feel connected to others.			
5.	I jump or am startled by une	expected sounds.		
6.	I feel invigorated after work	ing with those I [help].		
7.	I find it difficult to separate r	ny personal life from my life a	as a [helper].	
2. 3. 4. 5. 6. 7. 8.	l am not as productive at wo [help].	ork because I am losing sleep	over traumatic ex	periences of a person I
9. 10. 11. 12. 13. 14.	I think that I might have bee	n affected by the traumatic st	ress of those I [hel	þ].
10.	I feel trapped by my job as a	[helþer].		
11.	Because of my [helping], I ha	ave felt "on edge" about vario	us things.	
12.	I like my work as a [helper].			
13.	I feel depressed because of t	he traumatic experiences of	the people I [helþ].	
14.	I feel as though I am experie	ncing the trauma of someone	e I have [helped].	
15.	I have beliefs that sustain me	2.		
16.	I am pleased with how I am	able to keep up with [helping]	techniques and pr	rotocols.
17.	I am the person I always war	nted to be.		
18.	My work makes me feel sati	sfied.		
19.	I feel worn out because of m	ny work as a [helþer].		
15. 16. 17. 18. 19. 20. 21. 22.	I have happy thoughts and fe	elings about those I [help] an	d how I could help	them.
21.	I feel overwhelmed because	my case [work] load seems e	endless.	
22.	I believe I can make a differe	nce through my work.		
23.	I avoid certain activities or s people I [help].	ituations because they remine	d me of frightening	experiences of the
24.	I am proud of what I can do	to [helþ].		
25.	As a result of my [helping], I	have intrusive, frightening the	oughts.	
26.	I feel "bogged down" by the	system.		
27.	I have thoughts that I am a "	success" as a [helper].		
24. 25. 26. 27. 28. 29. 30.	I can't recall important parts	of my work with trauma vict	tims.	
29.	I am a very caring person.			
30.	I am happy that I chose to d	o this work.		

### YOUR SCORES ON THE PROQOL: PROFESSIONAL QUALITY OF LIFE SCREENING

Based on your responses, place your personal scores below. If you have any concerns, you should discuss them with a physical or mental health care professional.

### Compassion Satisfaction \_\_\_\_

Compassion satisfaction is about the pleasure you derive from being able to do your work well. For example, you may feel like it is a pleasure to help others through your work. You may feel positively about your colleagues or your ability to contribute to the work setting or even the greater good of society. Higher scores on this scale represent a greater satisfaction related to your ability to be an effective caregiver in your job.

The average score is 50 (SD 10; alpha scale reliability .88). About 25% of people score higher than 57 and about 25% of people score below 43. If you are in the higher range, you probably derive a good deal of professional satisfaction from your position. If your scores are below 40, you may either find problems with your job, or there may be some other reason—for example, you might derive your satisfaction from activities other than your job.

#### **Burnout**

Most people have an intuitive idea of what burnout is. From the research perspective, burnout is one of the elements of Compassion Fatigue (CF). It is associated with feelings of hopelessness and difficulties in dealing with work or in doing your job effectively. These negative feelings usually have a gradual onset. They can reflect the feeling that your efforts make no difference, or they can be associated with a very high workload or a non-supportive work environment. Higher scores on this scale mean that you are at higher risk for burnout.

The average score on the burnout scale is 50 (SD 10; alpha scale reliability .75). About 25% of people score above 57 and about 25% of people score below 43. If your score is below 43, this probably reflects positive feelings about your ability to be effective in your work. If you score above 57 you may wish to think about what at work makes you feel like you are not effective in your position. Your score may reflect your mood; perhaps you were having a "bad day" or are in need of some time off. If the high score persists or if it is reflective of other worries, it may be a cause for concern.

### Secondary Traumatic Stress

The second component of Compassion Fatigue (CF) is secondary traumatic stress (STS). It is about your work related, secondary exposure to extremely or traumatically stressful events. Developing problems due to exposure to other's trauma is somewhat rare but does happen to many people who care for those who have experienced extremely or traumatically stressful events. For example, you may repeatedly hear stories about the traumatic things that happen to other people, commonly called Vicarious Traumatization. If your work puts you directly in the path of danger, for example, field work in a war or area of civil violence, this is not secondary exposure; your exposure is primary. However, if you are exposed to others' traumatic events as a result of your work, for example, as a therapist or an emergency worker, this is secondary exposure. The symptoms of STS are usually rapid in onset and associated with a particular event. They may include being afraid, having difficulty sleeping, having images of the upsetting event pop into your mind, or avoiding things that remind you of the event.

The average score on this scale is 50 (SD 10; alpha scale reliability .81). About 25% of people score below 43 and about 25% of people score above 57. If your score is above 57, you may want to take some time to think about what at work may be frightening to you or if there is some other reason for the elevated score. While higher scores do not mean that you do have a problem, they are an indication that you may want to examine how you feel about your work and your work environment. You may wish to discuss this with your supervisor, a colleague, or a health care professional.

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### WHAT IS MY SCORE AND WHAT DOES IT MEAN?

In this section, you will score your test so you understand the interpretation for you. To find your score on each section, total the questions listed on the left and then find your score in the table on the right of the section.

### **Compassion Satisfaction Scale**

Copy your rating on each of these questions on to this table and add them up. When you have added then up you can find your score on the table to the right.	3 6 12 16 18 20.	The sum of my Compassion Satisfaction questions is	So My Score Equals	And my Compassion Satisfaction level is
	22 24	22 or less	43 or less	Low
	27 30	Between 23 and 41	Around 50	Average
	Total:	42 or more	57 or more	High

### **Burnout Scale**

On the burnout scale you will need to take an extra step. Starred items are "reverse scored." If you scored the item 1, write a 5 beside it. The reason we ask you to reverse the scores is because scientifically the measure works better when these questions are asked in a positive way though they can tell us more about their negative form. For example, question 1. "I am happy" tells us more about

Change	the effects		
to	of helping		
5	when you		
4	are <i>not</i>		
3	happy so		
2	you reverse		
I	the score		
	•		

\*1. \_\_\_\_ = \_\_\_\_ \*4. \_\_\_\_ = \_\_\_ 8. 10. \*15. \_\_\_\_ = \*17. \_\_\_\_ = \_\_\_ 19. 21. 26. \_\_\_\_\_ \*29. =

The sum of my Burnout Questions is	So my score equals	And my Burnout level is
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

Total: \_\_\_\_

### Secondary Traumatic Stress Scale

Just like you did on Compassion	2			
Satisfaction, copy your rating on each of	5	The sum of	So My	And my
these questions on to this table and add	7	my	Score	Secondary
them up. When you have added then up	9	Secondary	Equals	Traumatic
you can find your score on the table to the right.	11	Trauma		Stress level
the fight.	13	questions is		is
	14 23.	22 or less	43 or less	Low
	25 28	Between 23 and 41	Around 50	Average
	Total:	42 or more	57 or more	High

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