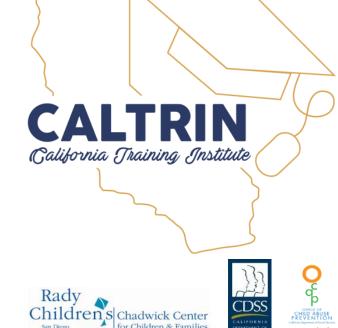


Trauma, Compassion Fatigue & Secondary Traumatic Stress

Presenter: Melissa Bernstein, PhD



Hi, we're CalTrin

- California Training Institute (CalTrin)
- Funded by the State of CA, Dept of Social Services, Office of Child Abuse Prevention (OCAP)
- Comprehensive, science-based professional education program





California Training Institute (CalTrin)

Who We Serve

- Designed to meet needs of California administrators, staff and stakeholders of
 - Family Resource Centers (FRCs)
 - Child Abuse Prevention Councils (CAPCs)
 - Child welfare agencies

What We Offer

- Live webinars
- Online Self-Paced Courses
- Job Aids
- Professional Development



4 Content Pillars

Evidence-based or evidence-informed service delivery

Direct service delivery skills

Trauma informed systems

Management & Leadership



Melissa Bernstein, PhD

- Evidence Based Practices
- Rady Children's Hospital San Diego
- Advancing California's Trauma-Informed Systems (ACTS)
- Trauma-Informed Licensing Team (TILT) Initiatives
- Research centers around supporting systems in planning for, implementing, and sustaining Trauma-Informed change that aligns with best practice and science







Trauma, Compassion Fatigue & Secondary Traumatic Stress

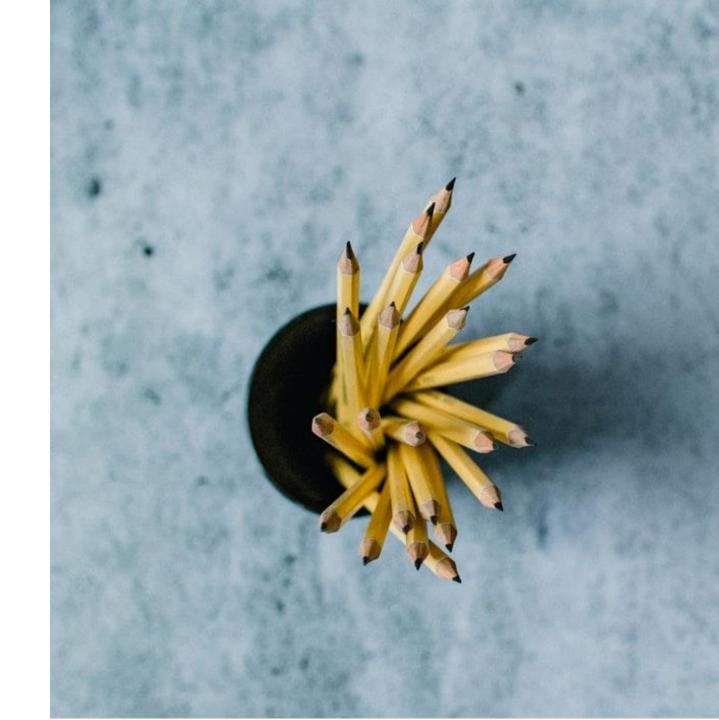
AGENDA

I. TRAUMA 101 REVIEW

II. IIMPACT OF INDIRECT TRAUMA

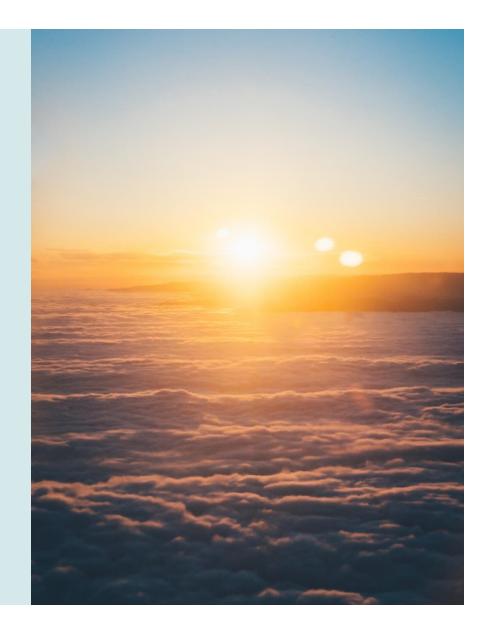
III. TYPES OF INDIRECT TRAUMA

IV. RECOGNIZEING INDIRECT TRAUMA



"Although the world is full of suffering, it is full also of the overcoming of it."

-Helen Keller



What is Child Traumatic Stress?

- Witnessing or experiencing an event that poses a real or perceived threat
- The event overwhelms one's ability to cope



Types of Trauma

Natural

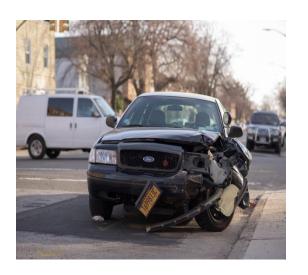
- Illness
- Accidents
- Loss
- Death
- Natural Disasters

Human Made

- Non-Natural Disasters
- Violence
- Abuse



Acute Trauma



Chronic trauma



Complex trauma



Historical Trauma



Child Trauma

1/3 of children who experience a traumatic event will go on to develop PTSD

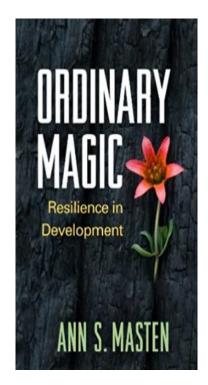
Sources of resilience

- Temperament
- Ordinary Magic
 - Social-emotional supports
 - Learned social-emotional skills

Risk Factors

- Temperament
- Developmental delays
- Limited social-emotional skills
- Previous trauma exposure
- Preexisting psychopathology
- Low social support





Common Effects of Trauma

- Intrusive Symptoms
- Negative Thoughts or Mood
- Avoidance
- Arousal/Reactivity





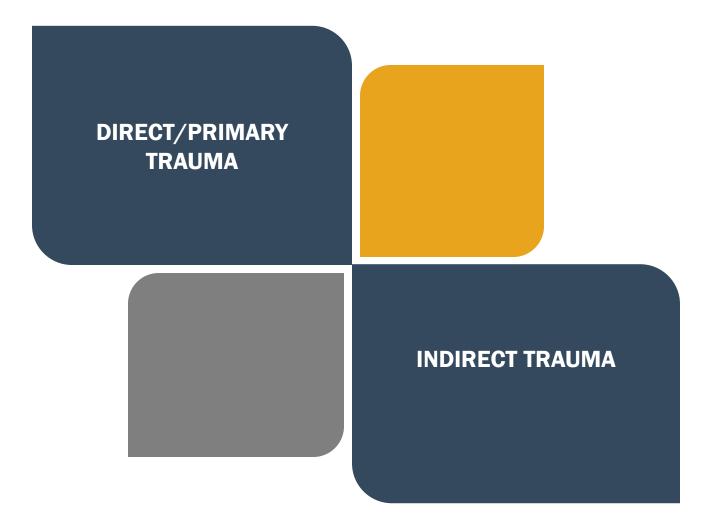




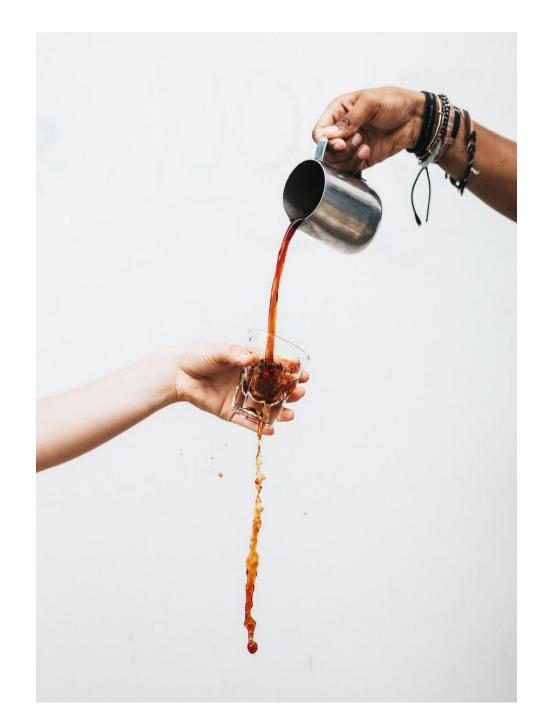


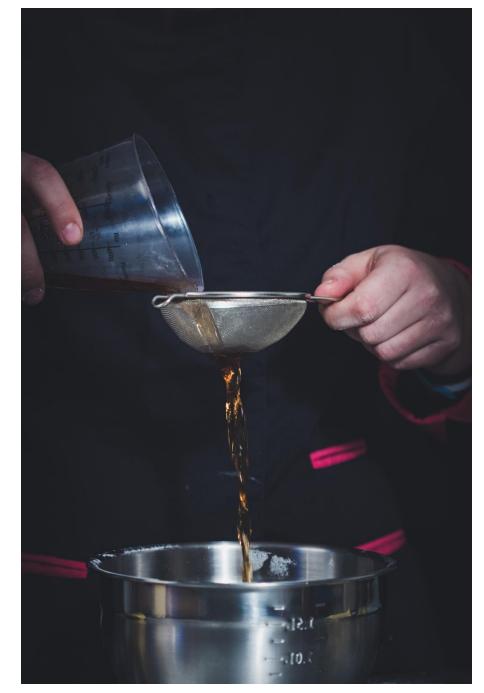


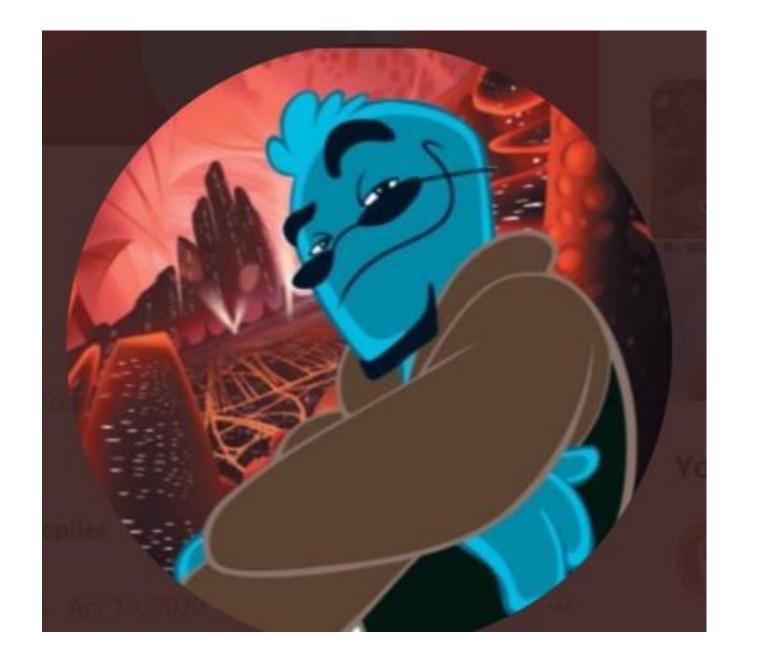
Impact











"If you're tough enough and cool enough and committed to your cause enough, you'll keep on keeping on, you'll suck it up."

"Self-care is for the weaker set."

Trauma Stewardship- Laura van Dernoot Lipsky



"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 through water without getting wet."

Kitchen Table Wisdom
By Rachel Naomi Remen

The Impact of Trauma on the Workforce is Widespread

Social Workers

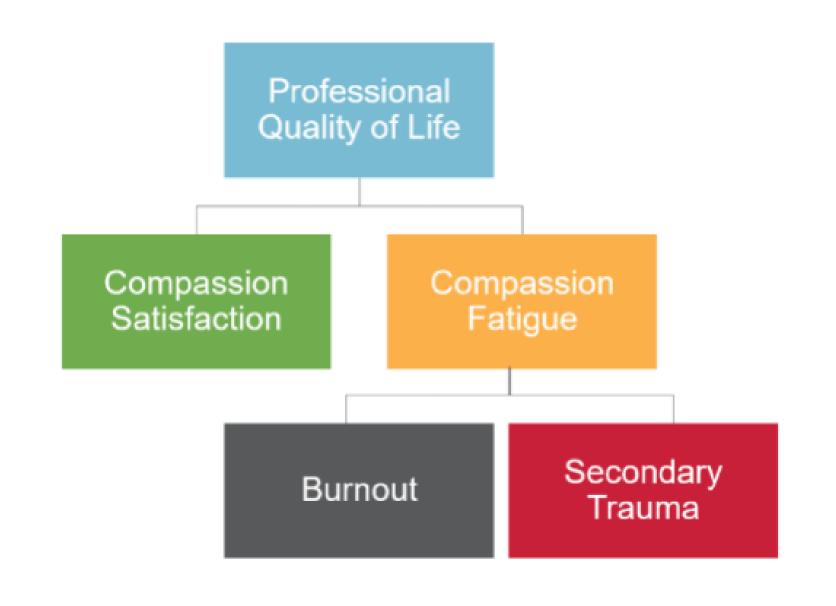
- 65% had at least 1 symptom of STS (Bride, 2007)
- 42% of social workers experienced 4 or more ACES (Thomas, 2016)
- Law Enforcement
 - 37% of correctional officers experienced burnout (Finney et al., 2013)
- Child Welfare Workers
 - 50% had traumatic stress symptoms in the severe range (Bovas, Wind & Ruiz, 2015)
 - Estimated employee turnover rates are between 30-40% nationally
- Preschool Teachers
 - Turnover rate of 25-50% per year (Miller & Bogatova, 2009)







PARALLEL PROCESS



ACTIVITY

The "cost of caring" for others in pain, characterized by reduced empathy and energy for their patients, loved ones and co-workers.

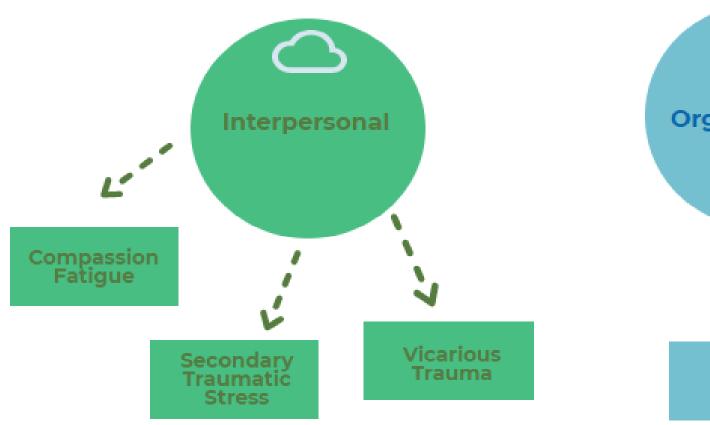
The emotional duress that helping professionals involved in the care of traumatized children can experience

Chronic workplace stress that has not been successfully managed

The pleasure you derive from being able to do your work

- A. Vicarious Trauma/STS
- **B.** Compassion Satisfaction
- C. Compassion Fatigue
- D. Burnout

Stress







Compassion Fatigue

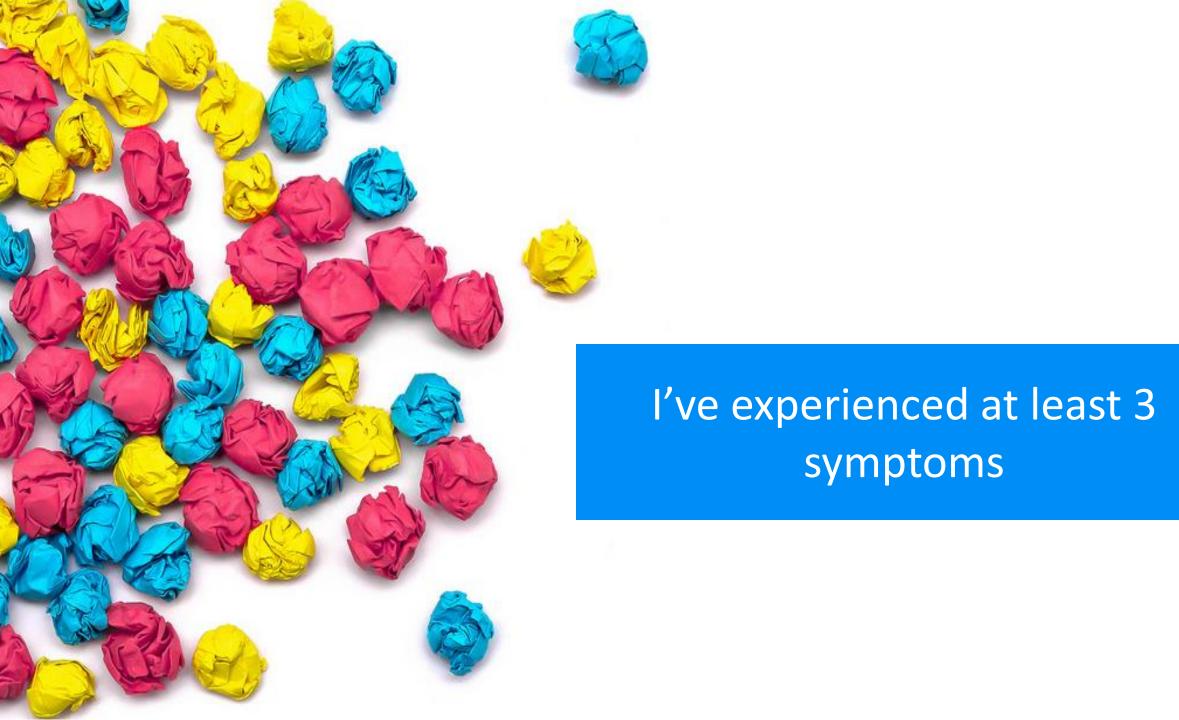
- Exhaustion
- Anger and irritability
- Increased use of alcohol or substances
- Dread of working with certain clients/patients
- Diminished sense of enjoyment of career
- Heightened anxiety or irrational fears
- Difficulty separating work life from personal life
- Absenteeism missing work, taking many sick days
- Impaired ability to make decisions and care for clients/patients
- Problems with personal relationships



Compassion Fatigue

CONTRIBUTING FACTORS

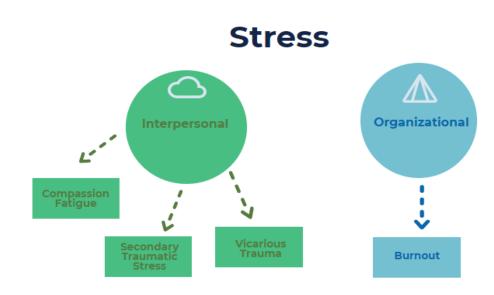
- ☐ Personal Vulnerabilities
- ☐ Current Life Circumstances
- ☐ Coping Style
- ☐ Working Conditions



Secondary Traumatic Stress

 The emotional duress that helping professionals involved in the care of traumatized children can experience

 A response that looks similar to the symptoms of PTSD



Secondary Traumatic Stress

- Avoidance (including of certain clients, etc)
- Preoccupation with stories
- Intrusive thoughts or nightmares
- Arousal symptoms
- Feeling isolated/having no one to talk to
- Feeling trapped, "infected" by trauma, hopeless, inadequate, depressed
- Having difficulty separating work from personal life
- Treating own family/kids differently less patience

In a sample of CWS workers:

 15.2% met full criteria for PTSD due to indirect trauma exposure

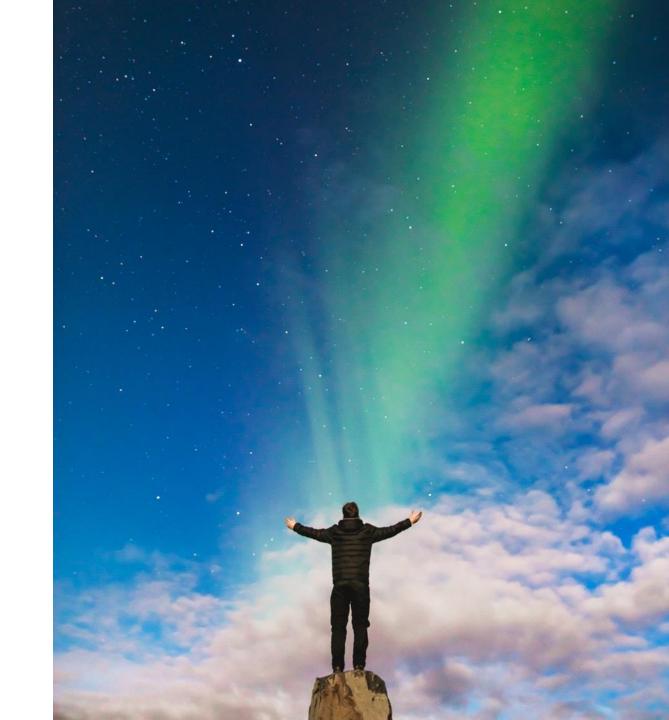
45.4% endorsed intrusive thoughts



We have options!

We can make a difference without suffering.

"We can enjoy the world and set it straight"



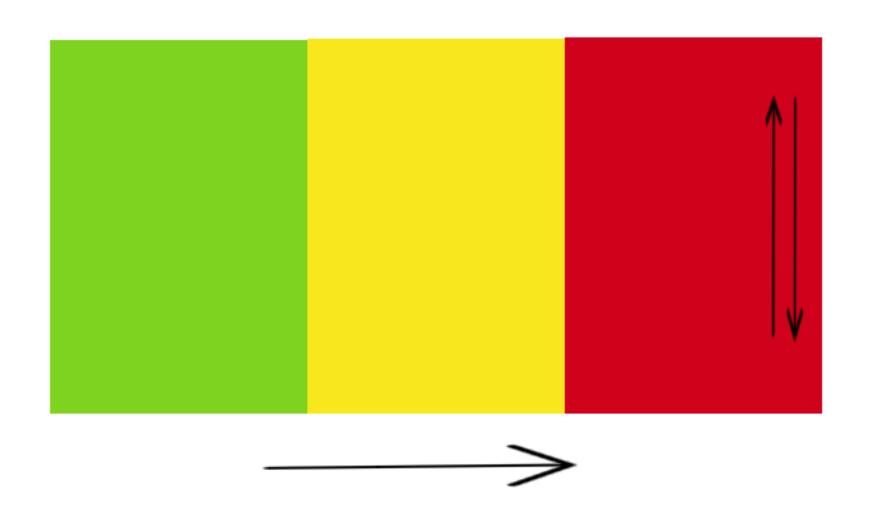
Exhaustion

Recognizing Symptoms

- Anger and irritability
- Increased use of alcohol or substances
- Dread of working with certain clients/patients
- Diminished sense of enjoyment of career
- Heightened anxiety or irrational fears
- Difficulty separating work life from personal life
- Absenteeism missing work, taking many sick days
- Problems with personal relationships
- Trouble sleeping
- Headaches
- Feelings of helplessness



Developing a Warning System



Recognizing CF and STS

- Enjoying my drive to work
- Looking forward to seeing clients
- Energized
- Sharing positive work stories with friends
- Going to the gym
- Eating well
- General sense of feeling proud

- Sensitive to TV
- Body is tense
- Picking at my nails
- Drinking more frequently
- "Must be nice"
- Relieved when clients cancel
- Less interested in socializing

- Emotional exhaustion
- Distancing
- Dreading work
- Helplessness
- Missing work
- Nightmares



Emotion Thermometer

Furious

Angry

Frustrated

Bothered

Calm

How do you feel?

5

4

3

2

1

0

Yelling kicking

refusing to answer

groaning whining

sighing

smiling listening

What are you doing?

Social Emotional

Workshop

MORE THAN A NAP AND A SPA?



Your Strategies

- TALK ABOUT THE SITUATION!
 - Communicating with supervisors
 - Debrief with boss
 - Talking to colleagues

- Requesting time off
- Delegate tasks when needed

- Walk during break time
- Listening to music
- Exercise
- Virtual socials
- Practice self-reflection
 - Prayer
 - Meditation

6. Learn to say no (or yes) more often

If you take on a lot of tasks, such as being involved in work committees or volunteering this can be very emotionally draining. For many helpers saying no is fraught with self-esteem and other personal issues and triggers. If you are not good at setting limits, explore the underlying reasons.

Try to identify one thing you could do to say no a bit more often. Conversely, maybe you need to stop saying yes to all requests, because you are feeling so depleted and burned down, feel resentful and taken for granted. Do you need to learn to say no or yes more often?

7. Assess your Trauma Inputs

Take a trauma input survey of a typical day in your life. Answer the following questions:

- Do you work with clients who have experienced trauma?
- Do you read about, see photos of, and are generally exposed to difficult stories and images at home or at work?
- At your work how many difficult stories do you hear, whether it be in a case conference, debriefing a colleague or reading files?

It is important to recognize the amount of trauma information that we unconsciously absorb during the course of a day. There is a lot of extra trauma input outside of client work that we do not necessarily need to absorb or to hear about.

8. Learn more about Compassion Fatigue and Vicarious Trauma

Learn more about CF and VT, including ways to recognize the signs and symptoms and strategies to address the problem by attending a workshop or read more on the topic.

9. Consider Joining a Supervision/Peer Support Group

Not all places of work offer the opportunity for peer support. You can organize such a group on your own (whether it be face to face meetings or via email or phone).

10. Attend Workshops/Professional Training Regularly

Researchers in the field of CF and VT have identified that attending regular professional training is one of the best ways for helpers to stay renewed and healthy.





Compassion Satisfaction

The pleasure you derive from being able to do your work

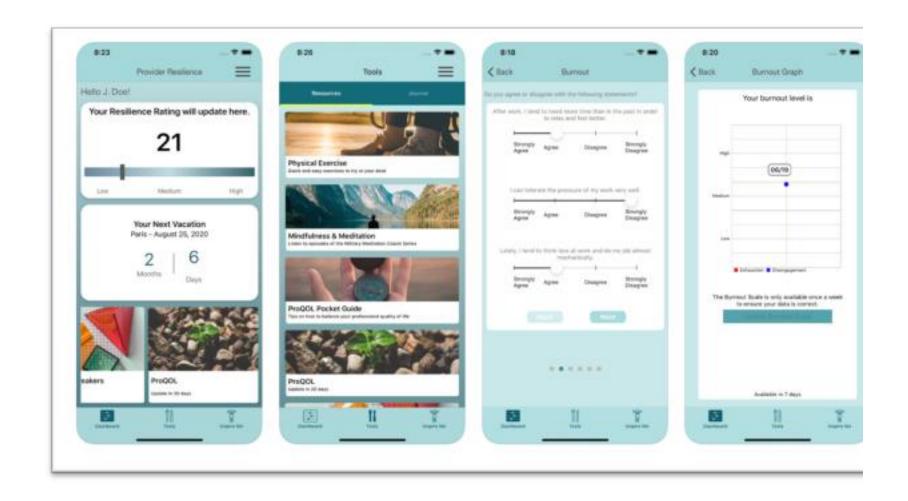


Day to Day Trauma-Informed Practices

- How we begin and end a meeting
- Consistent, transparent communication
- Recognizing the goosebumps
- Individual recognition
- Reinforcing well-being



Provider Resilience App



Terror Next Have

This book is a gift of wise and compassionale guide for those who undertake the difficult work of canning for the traumas of this world."

> -BACK KONNINGED Author of A Path with Frant

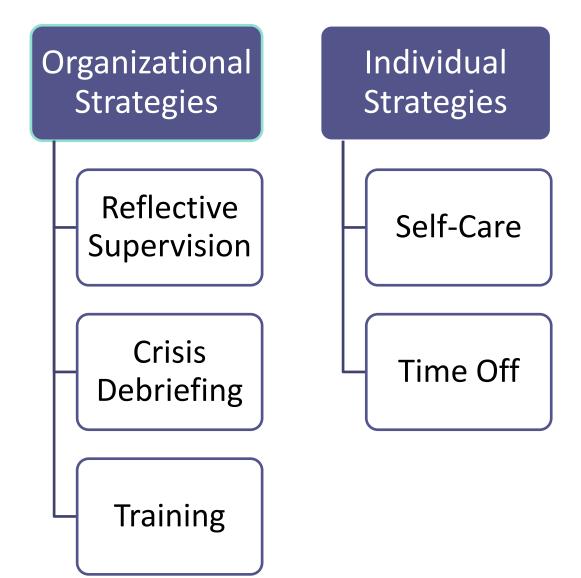
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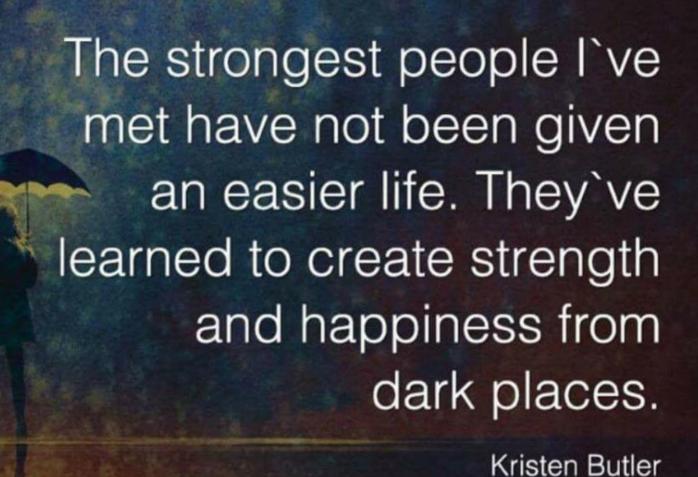
Trauma Stewardship

An Everyday Guide to Caring for Self While Caring for Others

Laura van Dernoot Lipsky with Connie Burk Foreword by Jon R. Conte, PhD

Addressing STS







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