VICARIOUS TRAUMA & WHY IT MATTERS

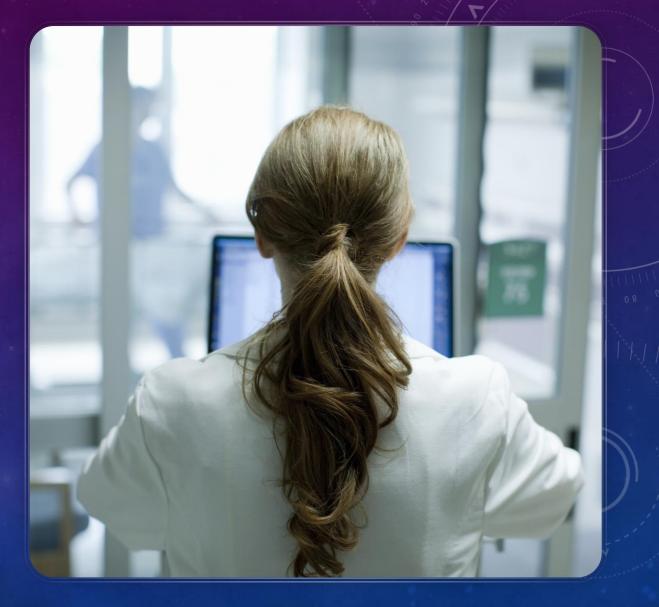
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 It is the trauma you get from hearing about someone else's trauma and it feels like it's happening to you

WHAT IS VICARIOUS TRAUMA?

WHO DOES IT AFFECT?

 Workers whose job it is to witness, read or hear the stories of traumatic events happening to the group they work with. Commonly that is those working in police, emergency services, army, criminal law, family, law, sexual assault, domestic and institutional violence, child protection, immigration and medical, disaster and war settings are most at risk.



HOW DOES IT WORK?

 As a species we have developed empathy, i.e. the capacity to imagine what it might have been like for the person going through it. This empathy mediated through our mirror neurons allows us to feel some of what they went through. Since the brain cannot make a distinction between a thought and an action it then responds as if it is happening to us. Hence we develop the symptoms of trauma similar to our clients. The longer you work, the more stories you hear, the worse the symptoms.



HOWEVER

 Many people are unaware they are affected until there is a major, unexpected incident that triggers a major response. "The straw that broke the camel's back" if you like. The symptoms often have been developing slowly and as many of our colleagues have it too, no-one notices.



WHAT ARE THE SYMPTOMS

Hyperarousal – having trouble sleeping, short fuse, startle affect, over reactions, rescue mentality, feeling like you can never do enough.

Hypo arousal – withdrawal, tiredness, lack of motivation, difficulty getting things done, flat emotion.

These two can alternate

Avoidance- avoiding certain types of matters, or clients, forgetting, avoiding meetings, sickness



• Somatic disturbance- aches and pains, lowered immunity, reactions smells and sounds, headaches, tiredness and accidents and injuries.



ANY FINALLY

Your world view starts to change- you see victims and perpetrators everywhere, you become more anxious about your life and worried for those you love and more protective and conservative or

You become addicted to adrenalin and take more risks in your personal life and become indifferent to the needs of you love ones, colleagues and clients

These two can alternate.

OF COURSE

- The clients have these symptoms too, and long with depression, anxiety and the personality disorders associated with trauma. So working together can become fraught with difficulty. Workers commonly feel guilty about their own reactions in the light of what their clients have experienced. This causes some staff to become over involved and ignore their own symptoms whilst others will withdraw from clients and even resent and punish them.
- Both reactions are not helpful and make the worker feel worse.

WHAT CAN THE WORKPLACE DO?

- Recognise and validate the condition
- Provide supervision, mentoring and counselling
- Provide training
- Celebrate skills and successes
- Value the work, the workers and the clients





- Manage workloads
- Enforce holidays and breaks
- Allow for rotation of duties
- Provide debriefing and peer and professional support

KEEP THE WORKPLACE SAFE BY

- Good occupational health and safety policies
- Stamp out bullying, remembering 96% of bullies are unintentional, but doing harm none the less
- Meeting with staff regularly face to face
- Wellbeing committees and practices
- Fun in the workplace that does not include cynical or destructive humour



AND

- Manage change well as it adds to anxiety
- Manage conflict affectively and in safe timely manner
- Communicate and collaborate staff and clients
- Treat all staff with the same courtesy and care as you would the clients

FINALLY

BE GRATEFUL TO YOUR STAFF AND THANK THEM WITH WORDS AND GESTURES ON A REGULAR BASIS.

SUPERVISORS & MENTORS

- Meet with you direct reports or mentorees at least monthly
- Ask directly about workload and help them plan to manage it
- Ask : Have there been any matters that have stayed in your head longer than usual?
- What was the worst aspect of that matter for you?
- How are you managing it now?

TALK ABOUT

- What strategies do we need to add?
- What did you do well in the matter?
- What have you learnt?
- Is there something we need to change here in the light of this experience?



- Note any changes in demeanour and attitude over time and raise them
- Work out a list of personal strategies your mentoree can put in place and check on how they are going and what more can be added over the times you meet.



AND

- Check what is going on at home
- Take note of and discuss any drop off in performance
- Refer for clinical assessment should you become concerned
- Follow up to check progress of clinical intervention

YOU AS THE WORKER

- Remember you chose to work in this field, you can change your mind at any time, the clients cannot
- Remember it is NOT happening to you and be grateful not guilty
- Feel proud of what you can do and work on increasing your skills
- Cultivate empathy approach rather than avoid.

SEEK FOR YOURSELF

- Mentors
- Clinical supervisors
- Training and professional development
- Opportunities to mentor others
- Keep reading, keep thinking be creative with what you try in your work

ALSO

- Take breaks
- Keep your social life up outside work
- Cultivate and eclectic mix of friends
- Develop and sustain new and varied interests and hobbies

INDIVIDUAL STRATEGIES FOR DEALING WITH DIFFICULT CONTENT

- Consciously approach content, images or people with your professional hat firmly on
- Take regular breaks and walk away from the material from time to time throughout the day and redirect your attention to something positive or do a mindfulness practice before returning to the work



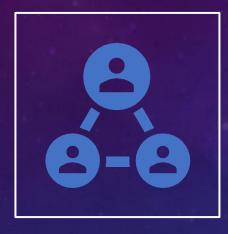
AND

- Change body posture if you are becoming distressed, stand up, get a good lung full of air and straighten you back. Changing posture changes mood
- Only deal with material, the role demands

REMEMBER

- If you are getting unpleasant content stuck in your head, acknowledge as such, hold it there for a minute and then consciously bring forward a positive memory. Go between the two for a minute and notice the difference in how you feel. Then focus on the positive one
- Developing a mindfulness practice will help you

BE PREPARED

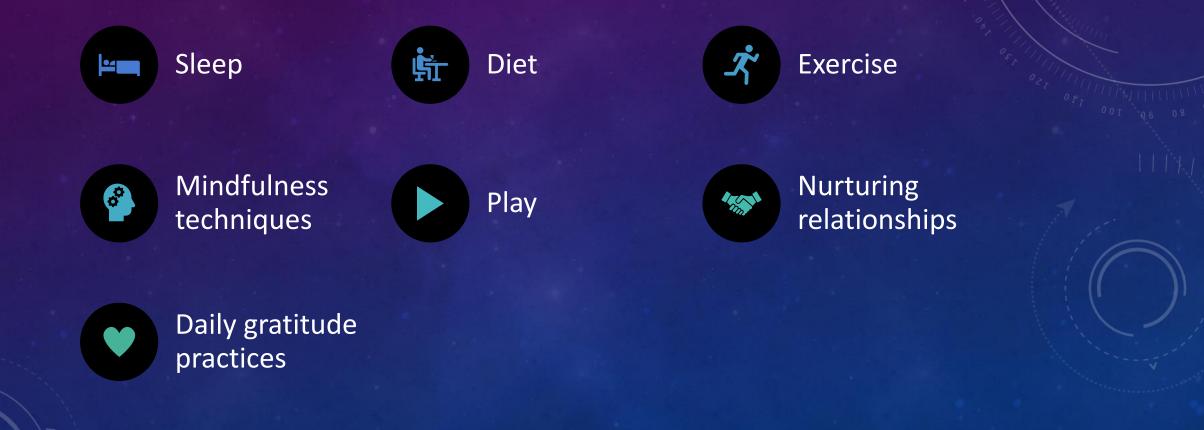


To respond positively to feedback from your supervisor, colleagues, mentors and friends if they are concerned about you.



Seek help if the above strategies are not helping you

AND DON'T FORGET



FINALLY

- Plan your career
- Ask yourself every year if you want to keep doing this
- Take long breaks from time to time
- Go do something else when you feel you have had enough
- Be aware of adrenalin addiction

AND

- Be as kind to yourself and your colleagues as you wish to be to your clients
- In bearing witness to their pain, you are helping them,
- BE PROUD OF WHAT YOU DO



AND FROM ME A VERY HEARTFELT THANKS FOR THE VERY IMPORTANT AND SKILLFULL WORK YOU DO ON MY BEHALF AND THAT OF THE COMMUNITY. I AM GRATEFUL TO YOU ALL EVERY DAY

ROBYN BRADEY



REFERENCES

FRANKL VICTOR, MAN'S SEARCH FOR MEANING FIGLEY CHARLES, COMPASSION FATIGUE VAN DERNOOT LIPSKY, L & CONTE, J.R. TRAUMA STEWARDSHIP WAX, RUBY, MINDFULNESS FOR THE FRAZZLED BRADEY, R. THE RESILIENT LAWYER <u>http://www./lawcover.com.au/personal-wellbeing/ www.wellbeingatthebar.co.uk</u> http://www.judicialcollege.vic.edu.au/sites/default/files/Helipern%20TJMF%20Lecture%20Liftin

g%20the%20Judicial%20Veil.pdf