

## The Impact of Burnout, Compassion Fatigue and Vicarious Trauma



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## Introductions

Today we will have a mixture of:

- Learning about the impact of vicarious trauma, secondary stress, burnout & compassion fatigue vs. trauma
- Trauma as a parallel process
- Impact on self, organization and clients
- Practicing self-care activities; to use for self or with clients
- Discussion



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## Why This is Relevant to Your Work

The Impact of Silently Baring Witness...

## Carlisa's Story



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## Understanding the Difference



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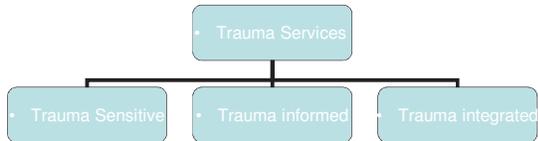
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## A note on Trauma Informed Care as it relates to your work

- Part of a continuum based model that allows providers to understand the level of competence that they are operating when serving working with individuals impacted by trauma



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## In Your work...

“Required skills of a court reporter are excellent command of the language being spoken, attention to detail, and the ability to focus for long periods at a time.”

Verbatim report...

Pace of the information...

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## What then of the accumulative toll?

- We get told to suck it up...be tough
- The damage of "holding it together"
- Death by 1000 cuts
- When exposure changes your world view



"C'mon, c'mon—it's either one or the other."

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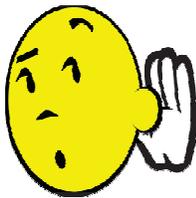
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## Lets Take a Look at the Terminology...



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The experience of feeling overwhelmed, overworked and possibly even traumatized are so common that we now have names to better explain them...

- Burnout
- Secondary Stress/Trauma
- Compassion Fatigue
- Vicarious Trauma



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## Burnout in action



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## Burnout

- **Burnout:** Burnout is a commonly used term to describe when helpers begin to feel exhausted by their work. Burnout usually begins by affecting ones attitude towards clients and the work. If unacknowledged, it may begin to manifest itself in other forms such as physical exhaustion, sense of self as ineffective, avoiding work, and/or irritability. Burnout can happen on an administrative and/or clinical level. It is often relieved with a shift in responsibility, task removal, support or vacation.



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## Ideas for Addressing Burnout

- Being aware of a shift in ones usual perspective towards work or clients
- Acknowledging that a break or shift is needed (self or other)
- Processing
- Paying attention to the basics...eat/sleep
- Taking time for lunch...vacation...personal day
- Self-care

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## Important Hallmarks

- Attitude
- When the humor turns to true negativity
- “Loosing the capacity to believe that we can make change.” (Connie Burk)
- Passion shifts

Trauma  
Stewardship

*An everyday guide to caring for self while caring for others*

A NEW BOOK BY LAURA VAN DERNOOT LIPSKY WITH COAUTHOR CONNIE BURK

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## Compassion Fatigue

- **Compassion Fatigue:** The emotional residue of working with suffering clients; particularly those suffering from traumatic events or those who are in recovery. Professionals who work with people, particularly those who are experiencing despair, must contend with not only the normal stress or dissatisfaction of their work, but also with the emotional and personal feelings for the client and or situation.

Ex: Sidney...traumatic loss...imagining yourself in their situation

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## Possible Symptoms of Compassion Fatigue

- Excessive worry **about clients**
- Thoughts about clients interrupting personal life
- Taking work home... emotionally
  - Case example
- Over-emotional responses/ reactions to client
- Ruminating on work-related topics
- Loss of self outside of work



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### Compassion Fatigue Continued...

- Feeling yourself physically respond to clients
- Taking clients success or failure personally
- Emotional and physical exhaustion
- Compassion fatigue may lead to susceptibility to vicarious trauma
- Loss of identity outside of work roles

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### Secondary Trauma/Stress Definition

Refers to the stress reactions that workers may have from the exposure to the traumatic stories or experiences of another. These reactions are often characterized as psychological or emotional distress. If unaddressed, over time they will negatively impact the worker as likely have impairing effect on the individual.

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### Possible Symptoms of Secondary Trauma/Stress



- Mood disturbance
- Anxiety
- Detachment and isolation
- Change in professional demeanor

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## Kind of Like Math...



Traumatic Event

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Intense Fear, Numbing Terror

=

Behaviors, Symptoms, Trouble with Coping,  
Impairment of Functioning

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## Vicarious Trauma Definition

Vicarious trauma is also known as secondary trauma. Vicarious trauma is the gradual change or disruption of a helper's **inner system** of thoughts, beliefs, feelings/emotions, images, and spirit as a result of repeated exposure to other's traumatic experiences. The worker will begin to experience or re-experience their own symptoms of trauma.

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## Vicarious Trauma



- Workers begin to look symptomatic of trauma without the "event."
- Exposure to the trauma of others/clients becomes a trigger for past trauma and or trauma symptoms.

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## Possible Symptoms of Vicarious Traumatization

- Physical - already existing symptoms can become more severe and even chronic; headaches, migraines, backaches, gastrointestinal problems, etc.
- Mental - inability to complete tasks, dreams/nightmares that may include images or other people's stories of your own
- Emotional - helplessness, hopelessness, feelings of doubt, mistrust, avoidant behaviors, feeling unsafe, intrusive thoughts
- Global (some call it spirit) – changes in one's world view
- Feeling impaired: work, relationships, functioning
- Numb and isolated

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## Possible Risk Factors...

- Being a trauma survivor
- Addiction history
- History of depression
- History of anxiety
- Unresolved personal issues
- Not having a place to process



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## Definition: Countertransference

In [psychoanalytic theory](#), counter-transference occurs when the therapist begins to project his or her own unresolved [conflicts](#) onto the client. While transference of the client's conflicts onto the therapist is considered a healthy and normal part of psychodynamic therapy, the therapist's job is to remain neutral. At one time, counter-transference was widely believed to contaminate the therapeutic relationship. Current thinking is more complex. (Fritcher, 2009)

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## Countertransference in Action

- Unexplained dislike
- Inability to empathizes
- Over emotional response
- Unprovoked hostility not otherwise accounted for (we all can have a bad day)
- Excessive like for supervisee
- Over empathy

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## Continued

- Over empathy (challenge for helping professional supervisors)
- Dread of supervision
- + or – preoccupation with supervisee...intrusive thoughts
- Difficulty paying attention to them
- Feeling “hurt” when challenged
- Continued miscommunication

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## More on what it looks like in action...

- Provoking and affect
- Over concern...over protection
  - This can destroy a team
- Special considerations not extended to others
- Interest in a worker beyond the norms
  - Ex: should not know about the sex life of workers
- Secrets

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## Good News

- Awareness can be a wonderful tool for professional and personal growth
- Its inevitable and not a weakness



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## How These Principals Apply to Your Work?

- Take a few Minutes in Small Group and see if/how you are impacted by the work from a content stand point?
- Is there something else about the nature of the work that gets to you?
- How do you shake it off?
- What do you/can you do to prevent getting the “ick-ee’s” (that’s the clinical term).

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## We Understand It... Now What Do We Do?

- This issue needs to be addressed on all levels of system
- We need to start from the beginning
- We cannot be afraid to talk about it...normalize it as part of the profession and not a sign of personal weakness



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## Debriefing as a Tool

- One-on-one or group
- Facilitator for formal debriefing
- The telling of the story from ones perspective...no judging or correcting
- Interpretations belong to the speaker
- Can provide voice to questions even if the questions have no substantive answer
- Reduces isolation



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## Debriefing the Work

### Informational:

- Allows for perspective building
- Enhances understanding and learning
- Meaning making

### Emotional:

- Allows the processing of emotions
- Reduces isolation
- Normalizes the reaction..."not crazy"

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## Debrief the Work

### Formal:

- Is facilitated
- Has a time structure
- Follows a model for critical incident
- Visioning
- Allowing for each person to speak

### Informal:

- Creating a narrative and sharing it
- Having a group to discuss
- Lunch with another court reporter who has a similar assignment.

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## Connection to Community, Work Environment, and Self



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## A-B-C's

Addressing vicarious trauma and compassion fatigue in your organizational setting and personal practice

– Saakvitne and Pearlman (1996)

- Awareness
- Balance
- Connection



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## Trauma Informed Organizations

- Provide supervision
- Have good benefits
- “Force” people to take their time
- Not overwhelm with case loads
- Spread acuity around



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### More...

- Properly train workers
- Recognize that impact is normal and address it as a constant
- Develop a culture of support (formal and informal)
- No shame



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### Peter Levine's Contributions

- Most people compress their trauma feelings
- Act of compressing energy/emotion is exhausting
- The disconnection is part of the trauma experience...survival mechanism
- Leaning into self first and then others is essential to making the connections necessary for recovery.

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### Impact on Us and Our Work

- Avoidance
- Dissatisfaction
- Physical
- Concentration...especially difficult in your work
- Changing perspective/world view

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### Responsibility to Self and Co-workers



- We are herd animals.
- Healing from trauma best happens in community. Ex: war buddies
- Having people who understand our experience.
- Notice...ask...listen...intervene.
- Not be afraid of what we hear...it is not about us.

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### More on responsibility...

- Reframe it as an honor to keep a fellow human company while they struggle
- Not allow the struggles of our co-workers to be gossip
- Don't take out our stress and aggression on each other
- Work together to provide formal and informal support

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Laura van Dernoot Lipsky

“Cultivating the capacity to be present.”

Allowing self to not be numb as the primary skill for coping with trauma.

Connecting and being present.

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## Minute Meditation a Self Care Exercise



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## Self-Care as a PRIORITY (an ethical obligation)

- Shift your thinking. Self-care is not selfish. See it as something you deserve.
- Develop and implement individual self-care. Set a pace that is reasonable and works for you.
- Leisure time
- Challenge your own negative beliefs.
- Personal objects of comfort and making your space pleasant.
- Humor and laughter



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## A reminder...for the *To DO:* list

Practicing professional self-care in this way doesn't mean you are less dedicated. It means you have made an active commitment and choice to maintain your effectiveness as a social worker.

~NASW news, November 2008

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### Malory's Life Lessons in Self-Care

- 1. You should always have plenty of fresh, chilly water available. (preferably with three ice cubes in it).
- 2. Two treats first thing in the morning sets a positive tone for the day.
- 3. When you have got to go...go!
- 4. A breath of fresh air and a short walk (no matter the weather) almost always makes you feel better.
- 5. Sleep is important and especially great if you can find a sunny place to sleep.
- 6. A belly scratch is more important than reading your mail or answering the phone when you walk into the house.
- 7. If you need something from someone, stare at them until they notice you. If that doesn't work, keep staring, then bark...(one should do it) and then keep staring. Your needs cannot be avoided forever.
- 8. Breathe...take several deep dog sighs during the day.
- 9. Connect with your pack, huddle in for warmth and comfort. You do not need to manage it all on your own.

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Thank you for your time and energy today!  
Please contact me for more information about our trainings and self-care tools.

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