

# Contexts of Best Practices for Addressing Vicarious Trauma in a VAW Setting

A Review of the Literature

Jill Shakespeare M.S.W.

Ginette Lafrenière

June 15th, 2012

# What is Vicarious Trauma?

- Vicarious trauma can have a profound effect on therapists' world and self-view, sense of meaning and identity, professional functioning, and personal relationships (Pearlman & Saakvitne, 1995).
- While secondary traumatic stress is very similar to vicarious trauma, disrupted cognitions about self, or the beliefs that clinicians have about themselves are an important distinction of vicarious trauma (Way, VanDeusen, & Cottrell, 2007)

# Vicarious Resilience

Engstrom, Hernandez, & Gangsei (2008)

3 components of Vicarious Resilience that contribute to the empowerment of a counsellor:

1. cognition of the human capacity to thrive
2. altering of perspectives of one's life through behaviours, emotions and cognitions
3. reaffirming the value of therapy

In order for these processes to occur and for vicarious resilience to be realized:

1. the counsellor must engage empathically with the client
2. must engage in conscious exploration of the phenomenon of vicarious resilience

# Vicarious Resilience

Jenkins, Mitchell, Baird, Whitfield & Meyer (2011)

- majority of participants discussed positive changes in themselves as a result of trauma work (while still indicating experiencing symptoms of vicarious trauma)

This concept of vicarious resilience and positive changes from trauma work is virtually absent from the literature!

# Incidence of Trauma in VAW Workers

(Choi, 2011)

- Survey of service providers working with survivors of family and sexual violence
  - over 80% of the workers identified as having experienced at least one traumatic event
  - over 70% of workers identified as having experienced traumatic events related to family violence or sexual assault.

# Addressing Structural Issues

Bober & Regher (2005)

- Efforts to address vicarious and secondary trauma with staff needs to shift from worker education to employer advocacy for improved and safer working conditions.
- Importance of ensuring that the strategies set up within an organization to address vicarious trauma, are free from the barriers that may limit safety
- One of the primary predictors for vicarious trauma is the number of hours per week spent working with traumatized people

# Structural Issues

- More diverse caseload with a greater variety of client problems, as well as participating in research, education, and outreach appear to mitigate the effects of traumatic exposure (Bell et al. 2003; Brady et al. 1999)
- Staff spending time in work activities other than working with trauma clients

# Validation of Personal Accomplishment

Baird & Jenkins(2003)

- validation of personal accomplishment is a protective factor for vicarious trauma

Ben- Porat & Itzhaky (2011)

- When a worker is able to increase their perceived role competence the prevalence of vicarious trauma is decreased



# Specific Issues Related to Trauma Supervision

Bober and Regher (2005)

- supervisors were more likely to believe in the value of supervision than frontline workers

Bell et al. (2003)

- If at all possible, supervision and evaluation should be separate functions in an organization
- Practice of contracting out for supervision to avoid dual roles of supervision/evaluation

# Gaps in Supervision Research

- How do differences of race, culture, faith and ethnicity affect the quality of the relationship between supervisor and advocate, as well as the overall emotional well-being of the advocate?
- How do unionized environments affect supervision and vicarious trauma in VAW work?

# Self-Care and Acute Distress

Bober and Regher (2005)

- No association found between the belief that leisure and self-care were useful and the time allotted to engage in these activities.
- No association between time devoted to leisure, self-care, research and development, or supervision and traumatic stress scores.

# Spirituality: Chicken or the Egg

Brady, Guy, Poelstra & Brokaw (1999)

- Therapists' shared central tenants of life:
  - meaning, hope, connection, and idealism
- Consequently, this research found a strong link between a high case load of trauma clients and increased spiritual well-being.
- Had the high number of trauma cases resulted in the need to increase spiritual well-being or are those with established spiritual well-being better suited to and more apt to engage in trauma work?

# Caring & Caring Too Much

Maltzman (2011)

- Found the need for both self-directed and formal education for workers, in defining and maintaining boundaries with their clients, in order to prevent over identification with their clients.
- It is also significant to consider the relief expressed by the participants of this study in regards to hearing that emotional boundaries between self and client are professionally necessary.

# VT: Knowledge is not Enough

Campbell (2008)

- “As participants’ level of knowledge (of vicarious trauma) increased, so did their symptoms of vicarious trauma. That would suggest that although one is aware of vicarious trauma and can report an increased knowledge base regarding vicarious trauma, that same knowledge base does not translate into skills for minimizing vicarious trauma”.

# Self-Care Strategies: Barriers

Maltzman, 2011

- Themes that emerged included workers' beliefs that:
  1. there were organizational expectations about which reactions to traumatic material were considered "normal"
  2. the organization also expected staff to be nonreactive to traumatic events and that any reaction of anxiety or sadness was perceived as weakness
  3. self-deprecating behaviour or the sacrificing of one's well-being for the greater good of the clients and the organization were considered normal and expected practice.

# Peer/Group Support

Bell, Kulkarni, Dalton (2003)

Peer support groups, team debrief groups, and reading groups (reading books and articles related to vicarious trauma) were invaluable venues for workers to

1. express their fears and vulnerability
2. normalize their reactions to clients
3. gain an understanding of the normal and acceptable reactions and behaviours for clients dealing with trauma.



# Moving Forward...

- Vicarious trauma is a very real and complicated issue for VAW workers and requires focussed and dedicated attention in the areas of:
  1. self-care
  2. peer and group supports
  3. training and education
  4. supervision/innovations in supervision
  5. organizational practice
- No one intervention or strategy was seen as capable of or pivotal to prevention or treatment
- Research!

Thank You

Questions?

# References

- Adams, S. A., & Riggs, S. A. (2008). An exploratory study of vicarious trauma among therapist trainees. *Training and Education in Psychology, 2*(1), 26-34.
- Baird, S., & Jenkins, S. R. (2003). Vicarious traumatization, secondary traumatic stress, and burnout in sexual assault and domestic violence agency staff. *Violence and Victims, 18*(1), 71-86.
- Bell, H., Kulkarni, S., & Dalton, L. (2003) Organizational prevention of vicarious trauma. *Families in Society, 84* (4), 463-470.
- Ben-Porat, A., & Itzhaky, H. (2009). Implications of treating family violence for the therapist: Secondary traumatization, vicarious traumatization, and growth. *Journal of Family Violence, 24*(7), 507-515.
- Ben-Porat, A., & Itzhaky, H. (2011). The contribution of training and supervision to perceived role competence, secondary traumatization, and burnout among domestic violence therapists. *The Clinical Supervisor, 30*(1), 95-108.
- Berceli, D., & Napoli, M. (2006). A proposal for a mindfulness-based trauma prevention program for social work professionals. *Complementary Health Practice Review, 11*(3), 153-165.

- Berger, R., & Gelkopf, M. (2011). An intervention for reducing secondary traumatization and improving professional self-efficacy in well baby clinic nurses following war and terror: A random control group trial. *International Journal of Nursing Studies*, 48(5), 601-610.
- Betts Adams, K., Matto, H., & Harrington, D. (2001). The Traumatic Stress Institute Belief Scale as a Measure of Vicarious Trauma in a National Sample of Clinical Social Workers. *Families in Society* 82 (4), 363-371.
- Bober, T., & Regehr, C. (2006). Strategies for reducing secondary or vicarious trauma: Do they work? *Brief Treatment and Crisis Intervention*, 6(1), 1-9.
- Brady, J. L., Guy, J. D., Poelstra, P. L., & Brokaw, B. F. (1999). Vicarious traumatization, spirituality, and the treatment of sexual abuse survivors: A national survey of women psychotherapists. *Professional Psychology: Research and Practice*, 30(4), 386-393.

- Bride, B. E. (2007). Prevalence of secondary traumatic stress among social workers. *Social Work, 52*(1), 63-70.
- Burke, P. A., Carruth, B., & Prichard, D. (2006). Counselor self-care in work with traumatized, addicted people. *Journal of Chemical Dependency Treatment, 8*(2), 283-301.
- Campbell, K. M. (2008). An analytical understanding of administrative practices minimizing vicarious traumatization in domestic violence organizations in Florida. (Doctoral Dissertation, University of Central Florida, 2008). *Dissertation Abstracts International, A: The Humanities and Social Sciences, 70* (10).
- Choi, G. (2011a). Organizational impacts on the secondary traumatic stress of social workers assisting family violence or sexual assault survivors. *Administration in Social Work, 35*(3), 225-242.
- Choi, G. (2011b). Secondary traumatic stress of service providers who practice with survivors of family or sexual violence: A national survey of social workers. *Smith College Studies in Social Work, 81*(1), 101-119.

- Clemans, S. E. (2004). Recognizing vicarious traumatization: A single session group model for trauma workers. *Social Work with Groups*, 27(2-3), 55-74.
- Chouliara, Z., Hutchison, C., & Karatzias, T. (2009). Vicarious traumatization in practitioners who work with adult survivors of sexual violence and child sexual abuse: Literature review and directions for future research. *Counselling and Psychotherapy Research*, 9(1), 47-56.
- Engstrom, D., Hernandez, P., & Gangsei, D. (2008). Vicarious resilience: A qualitative investigation into its description. *Traumatology*, 14(3), 13-21.
- Estassi, N. E. Self-care practices of therapists in avoiding burnout and vicarious traumatization while working with families who have been exposed to violence. *Dissertation Abstracts International: Section B: The Sciences and Engineering*,

- Goldblatt, H., Buchbinder, E., Eisikovits, Z., & Arizon-Mesinger, I. (2009). Between the professional and the private. *Violence Against Women, 15*(3), 362-384.
- Harrison, R. L., & Westwood, M. J. (2009). Preventing vicarious traumatization of mental health therapists: Identifying protective practices. *Psychotherapy: Theory/Research/Practice/Training, 46*(2), 203-219.
- Jenkins, S. R., Mitchell, J. L., Baird, S., Whitfield, S. R., & Meyer, H. L. (2011). The counselor's trauma as counseling motivation: Vulnerability or stress inoculation? *Journal of Interpersonal Violence, 26*(12), 2392-2412.
- Killian, K. (2008). Helping till it hurts? A multimethod study of compassion fatigue, burnout, and self-care in clinicians working with trauma survivors. *Traumatology, 14*(2), 32-44.
- Lerias, D., & Byrne, M. K. (2003). Vicarious traumatization: Symptoms and predictors. *Stress and Health, 19*(3), 129-138.

- Maltzman, S. (2011). An organizational self-care model: Practical suggestions for development and implementation. *The Counseling Psychologist, 39*(2), 303-319.
- McCann, L., & Pearlman, L. A. (1990). Vicarious traumatization: A framework for understanding psychological effects of working with victims. *Journal of Traumatic Stress, 3*, 131-149.
- McNamara, P. M. (2010). Staff support and supervision in residential youth justice: An Australian model. *Residential Treatment for Children & Youth, 27*(3), 214-240.
- Pack, M. (2008). "Back from the edge of the world" Re-authoring: A story of practice with stress and trauma using gestalt theories and narrative approaches. *Journal of Systemic Therapies, 27*(3), 30-44.



- Pearlman, L. A. (1996). Psychometric review of TSI Belief Scale, Revision L. In B. H. Stamm (Ed.), *Measurement of stress, trauma, and adaptation* (pp. 415-417). Lutherville, MD: Sidran Press.
- Pearlman, L. A., & Saakvitne, K. W. (1995). *Trauma and the therapist: Countertransference and vicarious traumatization in psychotherapy with incest survivors*. New York: Norton.
- Sabin-Farrell, R., & Turpin, G. (2003). Vicarious traumatization: Implications for the mental health of health workers? *Clinical Psychology Review, 23*(3), 449-480.
- Slattery, S. M., & Goodman, L. A. (2009). Secondary traumatic stress among domestic violence advocates: Workplace risk and protective factors. *Violence Against Women, 15*(11), 1358.
- Sommer, C. A. (2008). Vicarious traumatization, trauma-sensitive supervision, and counselor preparation. *Counselor Education and Supervision, 48*(1), 61-71.
- Sommer, C. A., & Cox, J. A. (2006). Sexual violence counselors' reflections on supervision: Using stories to mitigate vicarious traumatization. *Journal of Poetry Therapy, 19*(1), 3-16.

- Trippany, R. L., & White Kress, V. E. (2004). Preventing vicarious trauma: What counselors should know when working with trauma survivors. *Journal of Counseling and Development: JCD*, 82(1), 31-37.
- Urquiza, A., Wyatt, G. & Goodlin-Jones, B. (1997). Clinical interviewing with trauma victims: Managing interviewer risk. *Journal of Interpersonal Violence* 12 (5), 759-772.
- VanDeusen, K. M., & Way, I. (2006). Vicarious trauma: An exploratory study of the impact of providing sexual abuse treatment on clinicians' trust and intimacy. *Journal of Child Sexual Abuse*, 15(1), 69-85.
- Way, I., VanDeusen, K., & Cottrell, T. (2007). Vicarious trauma: Predictors of clinicians' disrupted cognitions about self-esteem and self-intimacy. *Journal of Child Sexual Abuse*, 16(4), 81-98.