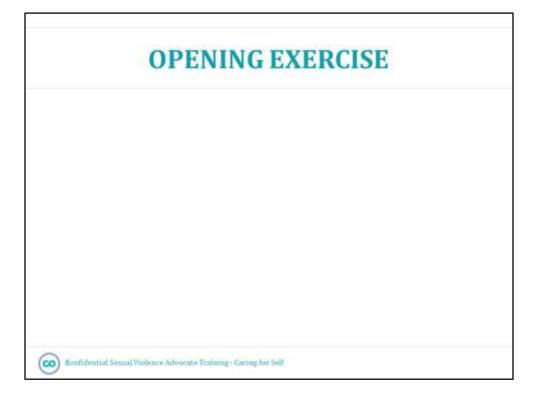


CARING FOR SELF



Increasing positive and productive responses from helpers working with survivors of trauma







BEARING WITNESS TO PAIN

CO Confidential Sexual Violence Advocate Training - Caring for Self



Describe various responses among helpers working with survivors of trauma.

Training notes

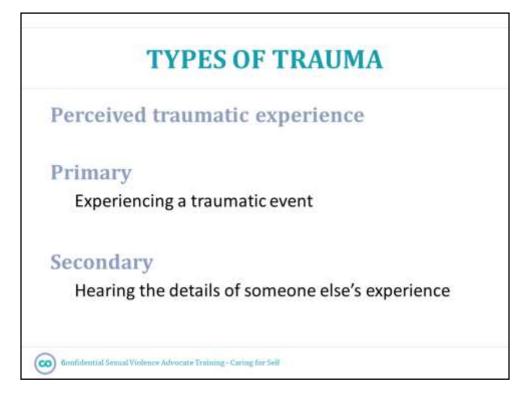
•Research has shown that some professionals and adults working with survivors of trauma are often affected by the experiences that are shared with them.

•These responses are connected to empathizing with someone and hearing their experience and pain.

•This conversation will explore some of those response and ways to take care of yourself and other in order to prevent long-term detrimental effects.

•Available research

•Collective journey/evolution of what we know about people's responses to hearing others' experiences with trauma and violence.



Describe various responses among helpers working with survivors of trauma.

Training notes

•Trauma – when internal and external resources are not enough to cope with a stressor or event. (*Link to discussions of crisis response and feelings during a crisis*).

•We will be talking/have talked about trauma and exploring the different reactions or outcomes of empathizing with survivors of trauma.

• Primary: Firsthand experience or observation of life-threatening or dangerous situation.

•Secondary: Bearing witness to someone else's pain

• Discussion Questions:

Have you ever had an experience where someone's pain impacted your life? (Don't have to share the story – just share the feelings or thoughts YOU had).
What are some distinctions between these types of trauma? What are some similarities?



Describe various responses among helpers working with survivors of trauma.

Training notes

• Connection to ethics and ethical practice: Identifying our own needs and trauma histories, recognizing triggers or difficult situations, and seeking support when needed.

• Countertransference means that, because of their own history or experiences, the helper cannot objectively or productively assist the person in need. (For example being the daughter of an alcoholic while working with a survivor using alcohol as a coping mechanism or is abusing alcohol in the wake of an assault).

• Feelings come up during or around the session or interaction (Trippany, Kress, & Wilcoxon, 2004). Feelings of anger, profound sadness, attraction, or preoccupation are associated specifically with a person or situation, not something that permeates work or thoughts.



Describe various responses among helpers working with survivors of trauma.

Training notes

• Burnout is the physiological and psychological impact of stressors. Burnout can happen in any profession from overwork, overwhelm, lack of resources, etc.

• It is a gradual process, often leading to physical symptoms and some short-term emotional changes.

• Discussion Questions:

• Does anyone want to share their own experience of burnout? Either seeing the effects in themselves or another person?



Describe various responses among helpers working with survivors of trauma.

Training notes

• Our energy and capacity for compassion is a reservoir – we need to take time to refill or replenish from time to time. When we spend a lot of time caring for others, we may begin to feel overwhelmed or unable to give any more of ourselves.

• This concept has been explored for decades, initially with nurses and medical professionals (Bloom, 2003).

- •People caring for family members or parents
- People working with survivors of trauma

• Compassion fatigue was used for a very long time – "help for the helper" and related efforts to address the impact of witnessing violence or working with survivors of trauma.

• This could be seen as the initial response to hearing others' pain, whereas other responses to trauma, such as vicarious trauma, has some more deeply-embedded consequences.



Describe various responses among helpers working with survivors of trauma.

Training notes

• "Symptoms" or indicators of compassion fatigue include:

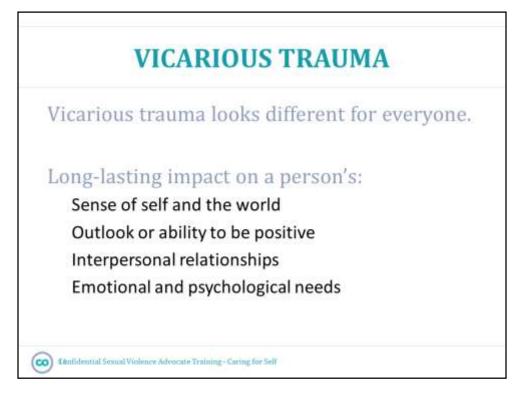
Sleep Disturbance Exhaustion Avoidance Isolation Self-doubt of ability to help Secretly wishing clients *don't* show up! Anxiety Irritability Missing meetings or peer supervision Overworking or being unable to pull yourself away from work

• This isn't an exhaustive list – but it point to some core issues with compassion fatigue and responses to hearing traumatic experiences. We begin to shut down or close ourselves off in an effort to protect ourselves if we do not have the skills and support we need.

• Discussion Questions:

• What do you notice about this list?

• We will be discussing some ways to prevent and address these responses a little later, so think of things that could help alleviate the things on this list.



Describe various responses among helpers working with survivors of trauma.

Training notes

• Vicarious trauma (VT) has been discussed or observed in a wide range or helping professions: ER doctors and nurses, police officers, faith leaders, social service workers, and witnesses of crimes or violence. Relatively new concept/term, but studies have shown that people who serve survivors of DV and SA (including children) have many indicators of VT.

•Humans are social creatures and seek connection. This connection can make witnessing or hearing about traumatic events damaging to our sense of self or safety. VT responses are "normal" and appear to be a part of being a helper or in a helping professional – specifically working with survivors of certain types of trauma.

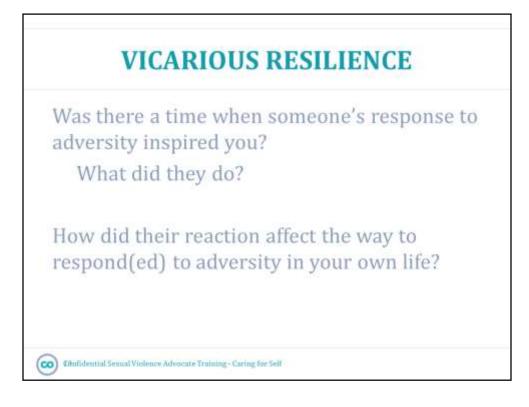
•The effects of VT are similar to PTSD (e.g. hypervigilance, numbing, avoidance, etc.), with a significant shift in values, perspectives, and views on the world. Seeing people as inherently good or being hopeful gradually lessens, being replaced by feelings of hopelessness, being convinced people are bad or out to hurt others. People may also distance themselves from activities or practices that once brought them joy or hope, such as spiritual practices, art and expression, exercise, socializing, and learning new things. People experiencing VT may also be preoccupied with the safety of other people, have a hard time trusting others, and have a hard time maintaining emotional or physical intimacy.

• VT is connected to physical symptoms of burnout, but extend beyond the work environment and into deeply-embedded cognitive patterns. It can also have similar symptoms to countertransference, but again, VT is wider-reaching and

•Discussion Questions:

How/Do these responses have a possibility for POSITIVE personal changes or growth?
 •VT has the potential for positive change: transformation and higher-level thinking is possible when something interrupts our established patterns of thinking. We must seek balance and wellness as we navigate helping others and bearing witness to the trauma of others.





Describe various responses among helpers working with survivors of trauma. Identify wellness activities.

Engage in self-care activities regularly.

Training notes

• We've talked about the potential for transformation and growth as a result of vicarious trauma, but what about the resilience and transformation we WITNESS when working with survivors and communities?

• Vicarious resilience (Hernandez, Gangsei, & Engrstom, 2007) is

• Discussion Questions:

• Was there a time when someone's response to adversity inspired you? What did they do?

•How did their reaction affect the way to respond(ed) to adversity in your own life?



Identify wellness activities. Engage in self-care activities regularly.

Training notes

• Preventing and addressing vicarious trauma and the responses we talked about. Research has found that socializing with friends and family, being involved in creative activities, and being physically active helps maintain a sense of personal identity and maintain feeling "like yourself." For example, we can make sure we do not withdraw from social interactions by setting a standing date with friends each month.

- ACTIVITY:
 - Materials needed: Peaceful Activities handout

• People work individually on listing, selecting, and scheduling peaceful activities into their life.

• Discussion Questions:

- What is it about these activities that makes you feel peaceful or relaxed?
- How can we make sure these activities are built into our lives and routine?



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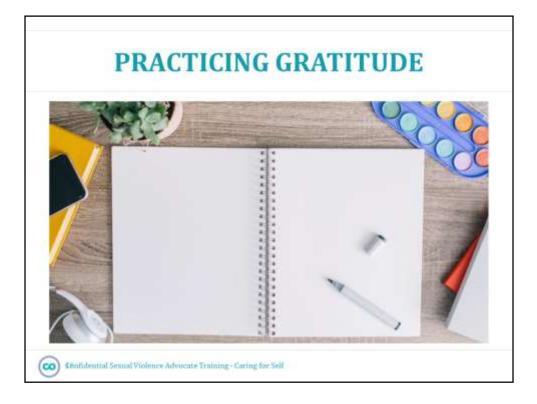
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Identify wellness activities. Engage in self-care activities regularly.

Training notes

• Even though we may not feel comfortable, it is important we recognize aspects of our life where we can be grateful. From the smallest encounter (e.g. a courteous checkout clerk at the grocery store) to a bigger situation (e.g. a child in your life achieves a big dream), we each have incidences where we can practice gratitude.

• ACTIVITY:

- Materials needed: Pen and notebook paper
- Take a few minutes to write down three things:
 - The first happy thing that happened to you so far today.
 - The next happy things that happened.
 - What you are looking forward to in the near future.

• Discussion Questions:

- What is it about these activities that makes you feel peaceful or relaxed?
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Identify wellness activities.

Engage in self-care activities regularly.

Encourage colleagues and peers to engage in self-care activities regularly.

Training notes

• Preventing and addressing vicarious trauma is a collective process too. Advocates can relate to one another because they share similar fist-hand experiences.

• A powerful way to help a colleague, friend, or fellow volunteer is by highlighting their strengths and unique skills. We are all pieces of a larger puzzle – help them (and yourself in the process) find their piece by bringing their focus back to what they contribute.

• This is also a great self-esteem builder! And another skill in preventing VT and fatigue.

• Discussion Questions:

• What is it about these activities that would makes you feel peaceful or relaxed?

• How can we make sure these activities are built into our lives and routine?



Identify wellness activities.

Engage in self-care activities regularly.

Encourage colleagues and peers to engage in self-care activities regularly.

Training notes

• Preventing and addressing vicarious trauma is a collective process too. Advocates can relate to one another because they share similar fist-hand experiences.

• A powerful way to help a colleague, friend, or fellow volunteer is by being present for and validating the challenges of responding to survivors of trauma.

We know that listening is a powerful tool when working with survivors, but it can be just as powerful when we are helping each other process the challenges of this work.
Revisit/Review confidentiality and the importance of supervision and referring folks to program staff with burnout, fatigue, or VT concerns.

• Discussion Questions:

• What is it about these activities that would makes you feel peaceful or relaxed?

• How can we make sure these activities are built into our lives and routine?



REFERENCES	
Ethica Stress Sidrar	n, S. L. (1995) <i>The Germ Theory Of Trauma: The Impossibility of I Neutrality</i> . (1995) B.H. Stamm, (Ed). Secondary Traumatic : Self Care Issues for Clinicians, Researchers and Educators. : Foundation. (pp: 257-276). Retrieved from <u>/www.sanctuaryweb.com/PDFs_new/Bloom%20Germ%20T</u> pdf
Vicari (Eds.)	n, S. L. (2003) <i>Caring for the Caregiver: Avoiding and Treating</i> <i>pus Traumatization</i> . In A. Giardino, E. Datner and J. Asher Sexual Assault: Victimization Across the Lifespan. Maryland ts, MO: GW Medical Publishing. (pp. 459-470). Retrieved
http:/	/www.sanctuaryweb.com/PDFs_new/Bloom%20Caring%20 Caregiver.pdf
	ntial Sexual Violence Advocate Training - Caring for Self

Hernandez, P., Gangsei, D., & Engstrom, D. (2007). Vicarious resilience: A new concept in work with those who survive trauma. *Family Process*, (46/2), 229-241.

Kadambi, M.A, & Truscott, D. (2004). Vicarious trauma among therapists working with sexual violence, cancer, and general practice. *Canadian Journal of Counseling*, (38/4), 260-276.

Trippany, R.L., White Kress, V.E., & Wilcoxon, S.A. (2004). Preventing vicarious trauma: What counselors should know when working with trauma survivors. *Journal of Counseling & Development*, (1/82), 31-37.

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