

From First Responder to Secondary Trauma: Vicarious Trauma in the Criminal Justice Field

Presented by
Shenna Oriabure, LMSW

Disclaimer

The views, opinions, and content expressed in this presentation and discussion do not necessarily reflect the views, opinions, or policies of Dallas County.

**WHAT'S ONE OF
THE MOST
IMPORTANT LESSONS
YOU'VE LEARNED
SINCE THE START
OF THE PANDEMIC
TWO YEARS AGO?**

Shenna I. Oriabure

- LMSW
- Criminal Justice, B.S.- SHSU
- MSSW- UT Arlington
- 10+ years of experience providing interventions to individuals entangled in the criminal justice system and experiencing social issues
- Experience with all three components of the criminal justice system: police, courts, and corrections

TYPES OF SOCIAL WORKERS

Social workers hold more than 700,000 jobs in the United States

In thousands of ways, social workers help people help themselves. They assist people of every age and background, in every corner of the country – and in many different industries and settings.



Justice and Corrections Social Workers

- Justice and Corrections social workers can be found in courts, rape crisis centers, police departments, jails and prisons.
- They help inmates focus on rehabilitation by providing therapy, drug or alcohol treatment and life-skills trainings. This helps ex-offenders function once they go back to their communities.
- Social workers can be probation or parole officers. They can help arrange for services such as job training, finding a group home, child care and transportation.
- Social workers can be involved in restitution and victim assistance services.
- They can be expert witnesses in courts or work with attorneys.
- Social workers in police departments can help with domestic disputes or provide trauma and critical incident services to enforcement officers.



Why are you here?

**What do you hope to
gain?**

Trigger Warning

The information presented may be extremely difficult, especially for individuals who have experienced past trauma

The Call

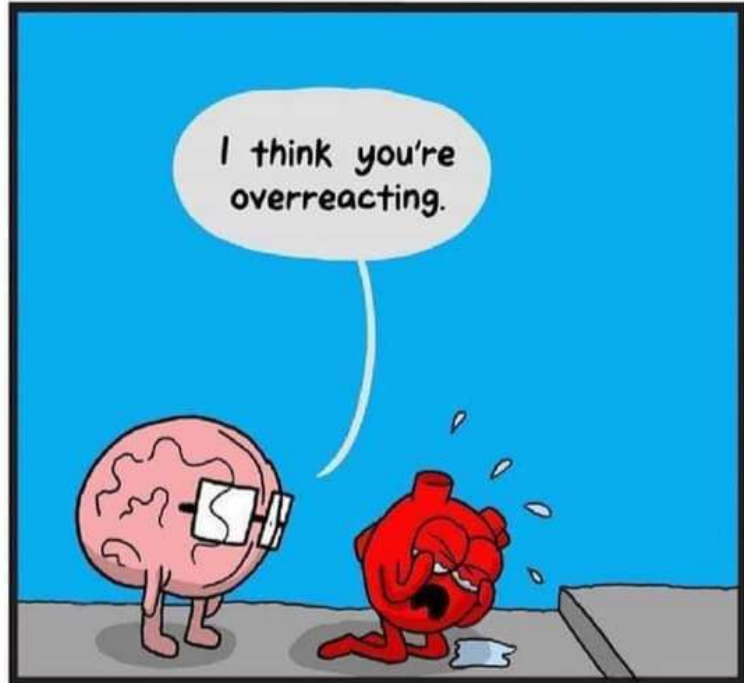
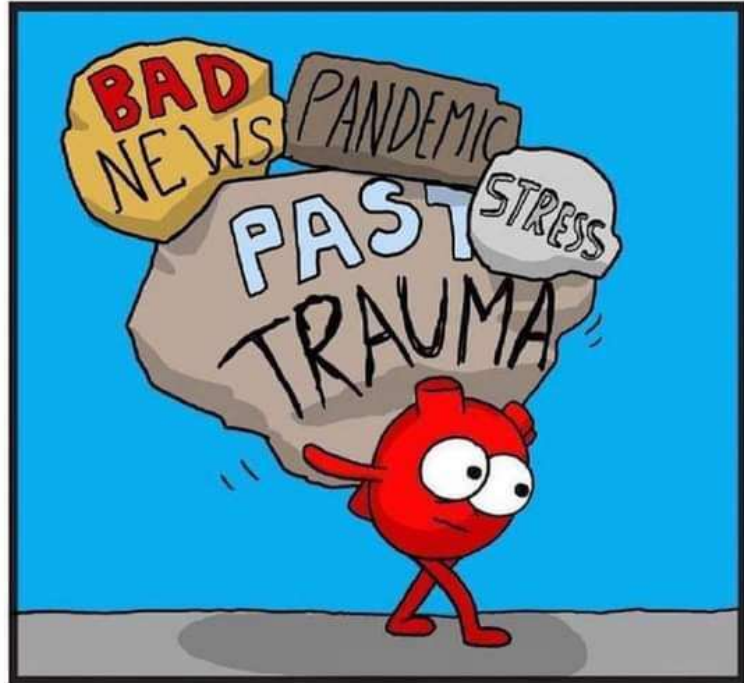
The background features a dark navy blue field on the left, which transitions into a series of overlapping, semi-transparent geometric shapes in various shades of blue (light blue, medium blue, and dark blue) on the right side, creating a dynamic, layered effect.

Leading Causes of Death in Texas

1. Heart Disease
2. Cancer
3. Accidents
4. Stroke
5. Chronic Lower Respiratory Disease
6. Alzheimer's Disease
7. Diabetes
8. Chronic Liver Disease/Cirrhosis
9. Kidney Disease
10. Suicide

Goal

Increase trauma awareness and promote introspection and healing



Learning Objectives

- ▶ Define and describe trauma, vicarious trauma, and other key terms
- ▶ Discuss examples of traumatic events
- ▶ Describe the pervasive impact trauma can have on an individual's life

Learning Objectives

- ▶ Discuss how vicarious trauma can impact individual well-being and work performance for criminal justice professionals
- ▶ Identify symptoms of vicarious trauma
- ▶ Provide resources for self-evaluation for trauma and vicarious trauma

“

I had a student who was late to class come up to me afterward. “I’m sorry I was late,” he said. “My mom died this morning and I didn’t know where to go, so I came here.” That was the day I decided to treat every single student as if I have no idea what they were going through.

—Heather Thompson Day, Educator

Definition

Individual trauma results from an **event**, series of events, or set of circumstances that is **experienced** by an individual as physically or emotionally harmful or threatening and that has lasting adverse **effects** on the individual's functioning and physical, social, emotional, or spiritual well-being (SAMHSA, 2014)



TEXASTRIBUNE.ORG

At least 111 people died in Texas during winter storm, most from hypothermia

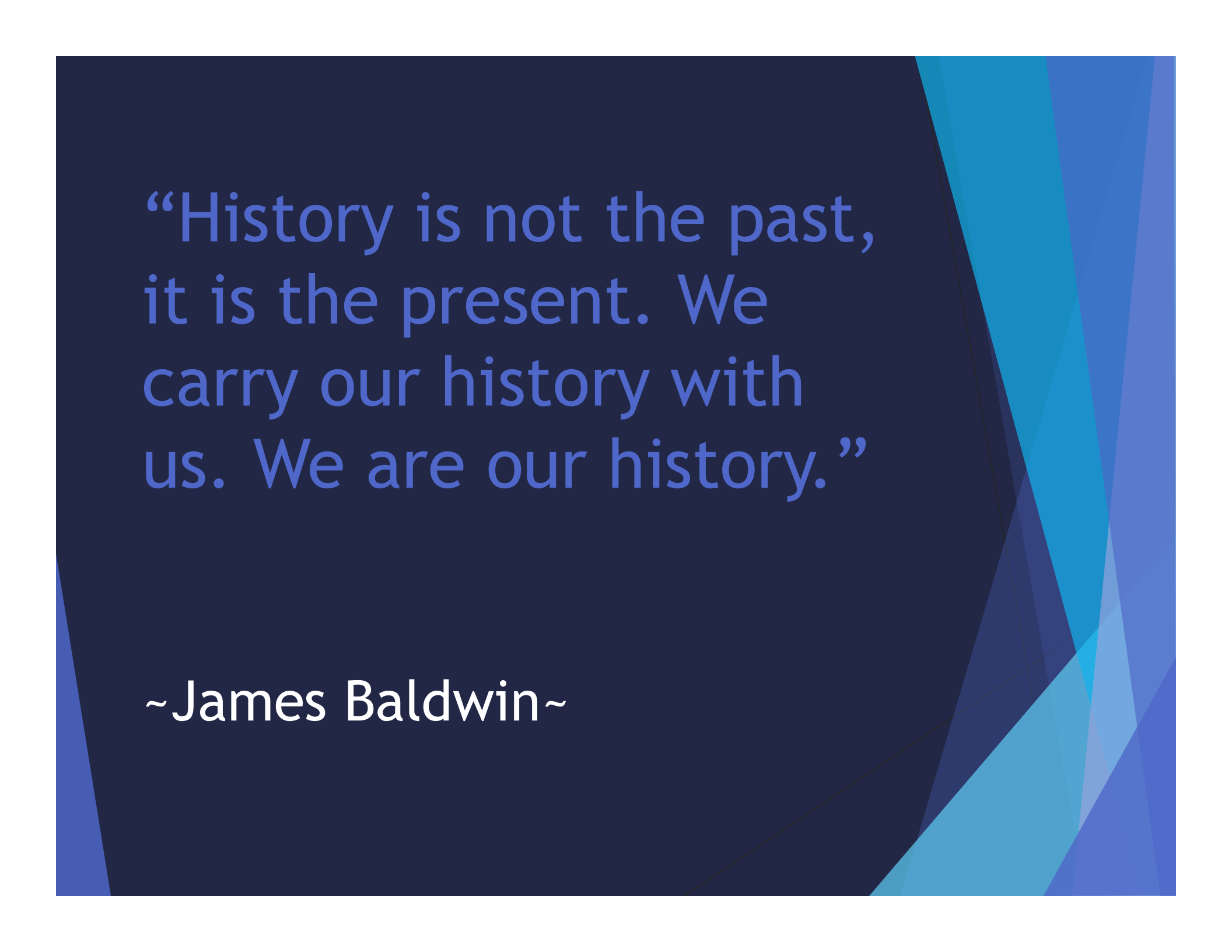
Types of Trauma

- ▶ Physical Abuse and/or Neglect
- ▶ Natural Disasters/Accidents
- ▶ Combat/Victim of War
- ▶ Sexual Abuse
- ▶ Secondary/Vicarious Trauma
- ▶ Historical/Community Trauma



"The past is never dead. It's not even past." **William Faulkner**

NOT EVEN PAST




“History is not the past,
it is the present. We
carry our history with
us. We are our history.”

~James Baldwin~

The background features a dark blue field on the left, transitioning into a complex, multi-colored geometric pattern on the right. This pattern consists of overlapping triangles and polygons in various shades of blue, from light sky blue to deep navy blue, creating a dynamic, layered effect.

Pervasive Impact of Trauma

The background features a dark blue trapezoidal shape on the left side, which tapers towards the right. On the right side, there are several overlapping, semi-transparent geometric shapes in various shades of blue, including light blue, medium blue, and dark blue, creating a layered, abstract effect.

Impact on Well-being & Work Performance

Where do you sit?

Vicarious Trauma

The emotional residue of exposure to traumatic stories and experiences of others through work; witnessing fear, pain, and terror that others have experienced; a pre-occupation with horrific stories told to the professional

Also Known As

- ▶ “secondary trauma”
- ▶ “cost of caring”
- ▶ “secondary traumatization”
- ▶ “secondary stress disorder”
- ▶ “insidious trauma”

The background features a dark navy blue field on the left, which transitions into a series of overlapping, semi-transparent geometric shapes in various shades of blue (light blue, medium blue, and dark blue) on the right side. The shapes are angular and layered, creating a sense of depth and movement.

Exposure to Vicarious Trauma

Symptoms

- ▶ Behavioral
- ▶ Interpersonal
- ▶ Personal Values/Beliefs
- ▶ Job Performance
- ▶ Behavioral
- ▶ Physical
- ▶ Cognitive
- ▶ Emotional
- ▶ Social

Burnout

- ▶ Long term stress reaction and process that occurs among professionals who work with people in some capacity

Symptoms


- ▶ Helplessness
- ▶ Hopelessness
- ▶ Anger
- ▶ Boredom
- ▶ Cynicism
- ▶ Loss of Confidence
- ▶ Impatience
- ▶ Irritability
- ▶ Paranoia
- ▶ Denial of Feelings
- ▶ Rigid Perception
- ▶ Physical Ailments

Compassion Fatigue

- ▶ Includes negative effects such as exhaustion, frustration, and anger that some professionals experience when working with people who have trauma histories

Controlled Empathy

- ▶ Constant monitoring of emotions so as to not react to stories and testimonies, absorbing the information without showing emotion

The background features a dark blue field on the left and a complex, multi-colored blue geometric pattern on the right, composed of various shades of blue and cyan triangles and polygons.

Professional Quality of Life Scale (ProQOL)

The background features a dark blue field on the left, transitioning into a complex geometric pattern of overlapping triangles in various shades of blue (medium, light, and bright) on the right side.

General Helper Card

Recommendations

Awareness, Balance, & Connection

Resources

- Suicide Hotline 1-800-273-8255
- Employee Assistance Program (EAP)
- Friends and Family
- Spiritual Advisors

Self-Care

- ▶ One thing I already do
- ▶ One thing I used to do that worked
- ▶ One new thing I'm thinking of trying

References

- ▶ Substance Abuse and Mental Health Service Administration SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-4884, Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.
- ▶ The Center for Victims of Torture
 - ▶ www.cvt.org
- ▶ www.ProQOL.org
- ▶ www.cdc.org

The background features a dark navy blue field on the left, transitioning into a complex geometric pattern of overlapping triangles in various shades of blue (medium, light, and bright cyan) on the right. The word "Reflections" is centered in a light blue, sans-serif font.

Reflections

Contact Information

**Shenna
Oriabure**
(she/her/hers)

**214-875-
2429**

shenna.oriabure@dallascounty.org



PROFESSIONAL QUALITY OF LIFE SCALE (PROQOL)

Compassion Satisfaction and Fatigue (ProQOL) Version 5 (2009)

When you [help] people you have direct contact with their lives. As you may have found, your compassion for those you [help] can affect you in positive and negative ways. Below are some-questions about your experiences, both positive and negative, as a [helper]. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the last 30 days.

1=Never

2=Rarely

3=Sometimes

4=Often

5=Very Often

- _____ 1. I am happy.
- _____ 2. I am preoccupied with more than one person I [help].
- _____ 3. I get satisfaction from being able to [help] people.
- _____ 4. I feel connected to others.
- _____ 5. I jump or am startled by unexpected sounds.
- _____ 6. I feel invigorated after working with those I [help].
- _____ 7. I find it difficult to separate my personal life from my life as a [helper].
- _____ 8. I am not as productive at work because I am losing sleep over traumatic experiences of a person I [help].
- _____ 9. I think that I might have been affected by the traumatic stress of those I [help].
- _____ 10. I feel trapped by my job as a [helper].
- _____ 11. Because of my [helping], I have felt "on edge" about various things.
- _____ 12. I like my work as a [helper].
- _____ 13. I feel depressed because of the traumatic experiences of the people I [help].
- _____ 14. I feel as though I am experiencing the trauma of someone I have [helped].
- _____ 15. I have beliefs that sustain me.
- _____ 16. I am pleased with how I am able to keep up with [helping] techniques and protocols.
- _____ 17. I am the person I always wanted to be.
- _____ 18. My work makes me feel satisfied.
- _____ 19. I feel worn out because of my work as a [helper].
- _____ 20. I have happy thoughts and feelings about those I [help] and how I could help them.
- _____ 21. I feel overwhelmed because my case [work] load seems endless.
- _____ 22. I believe I can make a difference through my work.
- _____ 23. I avoid certain activities or situations because they remind me of frightening experiences of the people I [help].
- _____ 24. I am proud of what I can do to [help].
- _____ 25. As a result of my [helping], I have intrusive, frightening thoughts.
- _____ 26. I feel "bogged down" by the system.
- _____ 27. I have thoughts that I am a "success" as a [helper].
- _____ 28. I can't recall important parts of my work with trauma victims.
- _____ 29. I am a very caring person.
- _____ 30. I am happy that I chose to do this work.

What is my score and what does it mean?

In this section, you will score your test and then you can compare your score to the interpretation below.

Scoring

1. Be certain you respond to all items.
2. Go to items 1, 4, 15, 17 and 29 and reverse your score. For example, if you scored the item 1, write a 5 beside it. We ask you to reverse these scores because we have learned that the test works better if you reverse these scores.

You Wrote	Change to
1	5
2	4
3	3
4	2
5	1

To find your score on **Compassion Satisfaction**, add your scores on questions 3, 6, 12, 16, 18, 20, 22, 24, 27, 30.

The sum of my Compassion Satisfaction questions was	So My Score Equals	My Level of Compassion Satisfaction
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

To find your score on **Burnout**, add your scores questions 1, 4, 8, 10, 15, 17, 19, 21, 26 and 29. Find your score on the table below.

The sum of my Burnout questions	So My Score Equals	My Level of Burnout
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

To find your score on **Secondary Traumatic Stress**, add your scores on questions 2, 5, 7, 9, 11, 13, 14, 23, 25, 28. Find your score on the table below.

The sum of my Secondary Traumatic Stress questions	So My Score Equals	My Level of Secondary Traumatic Stress
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

YOUR SCORES ON THE PROQOL: PROFESSIONAL QUALITY OF LIFE SCREENING

Based on your responses, your personal scores are below. If you have any concerns, you should discuss them with a physical or mental health care professional.

Compassion Satisfaction _____

Compassion satisfaction is about the pleasure you derive from being able to do your work well. For example, you may feel like it is a pleasure to help others through your work. You may feel positively about your colleagues or your ability to contribute to the work setting or even the greater good of society. Higher scores on this scale represent a greater satisfaction related to your ability to be an effective caregiver in your job.

The average score is 50 (SD 10; alpha scale reliability .88). About 25% of people score higher than 57 and about 25% of people score below 43. If you are in the higher range, you probably derive a good deal of professional satisfaction from your position. If your scores are below 40, you may either find problems with your job, or there may be some other reason—for example, you might derive your satisfaction from activities other than your job.

Burnout _____

Most people have an intuitive idea of what burnout is. From the research perspective, burnout is one of the elements of compassion fatigue. It is associated with feelings of hopelessness and difficulties in dealing with work or in doing your job effectively. These negative feelings usually have a gradual onset. They can reflect the feeling that your efforts make no difference, or they can be associated with a very high workload or a non-supportive work environment. Higher scores on this scale mean that you are at higher risk for burnout.

The average score on the burnout scale is 50 (SD 10; alpha scale reliability .75). About 25% of people score above 57 and about 25% of people score below 43. If your score is below 18, this probably reflects positive feelings about your ability to be effective in your work. If you score above 57 you may wish to think about what at work makes you feel like you are not effective in your position. Your score may reflect your mood; perhaps you were having a “bad day” or are in need of some time off. If the high score persists or if it is reflective of other worries, it may be a cause for concern.

Secondary Traumatic Stress _____

The second component of Compassion Fatigue (CF) is secondary traumatic stress (STS). It is about your work-related, secondary exposure to extremely or traumatically stressful events. Developing problems due to exposure to other’s trauma is somewhat rare but does happen to many people who care for those who have experienced extremely or traumatically stressful events. For example, you may repeatedly hear stories about the traumatic things that happen to other people, commonly called Vicarious Traumatization. You may see or provide treatment to people who have experienced horrific events. If your work puts you directly in the path of danger, due to your work as a soldier or civilian working in military medicine personnel, this is not secondary exposure; your exposure is primary. However, if you are exposed to others’ traumatic events as a result of your work, such as providing care to casualties or for those in a military medical rehabilitation facility, this is secondary exposure. The symptoms of STS are usually rapid in onset and associated with a particular event. They may include being afraid, having difficulty sleeping, having images of the upsetting event pop into your mind, or avoiding things that remind you of the event.

The average score on this scale is 50 (SD 10; alpha scale reliability .81). About 25% of people score below 43 and about 25% of people score above 57. If your score is above 57, you may want to take some time to think about what at work may be frightening to you or if there is some other reason for the elevated score. While higher scores do not mean that you do have a problem, they are an indication that you may want to examine how you feel about your work and your work environment. You may wish to discuss this with your supervisor, a colleague, or a health care professional.

CARING FOR YOURSELF IN THE FACE OF DIFFICULT WORK

Our work can be overwhelming. Our challenge is to maintain our resilience so that we can keep doing the work with care, energy, and compassion.

10 things to do for each day

1. Get enough sleep.
2. Get enough to eat.
3. Do some light exercise.
4. Vary the work that you do.
5. Do something pleasurable.
6. Focus on what you did well.
7. Learn from your mistakes.
8. Share a private joke.
9. Pray, meditate or relax.
10. Support a colleague.

For more information see your supervisor and visit www.psychosocial.org or www.proqol.org

Beth Hudnall Stamm, Ph.D., *ProQOL.org and Idaho State University*
Craig Higson-Smith, M.A., *South African Institute of Traumatic Stress*
Amy C. Hudnall, M.A., *ProQOL.org and Appalachian State University*
Henry E. Stamm, Ph.D., *ProQOL.org*

SWITCHING ON AND OFF

It is your empathy for others helps you do this work. It is vital to take good care of your thoughts and feelings by monitoring how you use them. Resilient workers know how to turn their feelings off when they go on duty, but on again when they go off duty. This is not denial; it is a coping strategy. It is a way they get maximum protection while working (switched off) and maximum support while resting (switched on).

How to become better at switching on and off

1. Switching is a conscious process. Talk to yourself as you switch.
2. Use images that make you feel safe and protected (switch off) or connected and cared for (switch on) to help you switch.
3. Find rituals that help you switch as you start and stop work.
4. Breathe slowly and deeply to calm yourself when starting a tough job.

We encourage you to copy and share this card. This is a template for making the pocket cards. You may make as many copies as you like. We have heard from some organizations that they have made thousands of copies. Some people find that it is helpful to laminate the cards for long-term use. The ProQOL helper card may be freely copied as long as (a) author is credited, (b) no changes are made other than those authorized below, and (c) it is not sold.
www.proqol.org