

Vicarious Trauma in the DSS Human Services Workforce

Preview of Findings

Analysis by Sarah Smith, PhD and Sandra Lamm, PhD

Research Questions

- >> What are human services workers' experiences with vicarious trauma?
 - How has COVID-19 impacted their experiences with vicarious trauma?
- » What coping strategies do workers use to mitigate vicarious trauma?
- » What management practices and/or strategies are being used to mitigate vicarious trauma?
 - How have those practices and/or strategies changed since the COVID-19 pandemic?



Research Design

- » Office of Trauma and Resilience Policy (OTRP) hosted 20 focus groups for 65 current workers
 - Benefits and Family Services
 - Frontline staff, supervisors, Practice Consultants
- » Organized by region, service, role
- **»** Format: virtual, 75 minutes
- » Office of Research and Planning conducting analysis- work in progress!
 - Presenting on major themes
 - All results are preliminary
 - Final report will provide much more detail, context, and analysis (ex: comparing by service)



Vicarious Trauma Experiences

"And now when I go home I'm just so beat by the end of the day and I'm not able to leave my work at work because I can't get it all done in 8 hours. That has definitely...made the vicarious trauma a lot worse. It's just the influx of the amount of families and that trauma that I'm being exposed to."

» Majority of participants had some understanding of vicarious trauma

- Recognize as "secondary" trauma mirrors clinical definition
- Their conceptualization has evolved over time

» Perceived antecedents of vicarious trauma

- Exposure to others' trauma
- Repetitive exposure
- Workload



Effects of Vicarious Trauma

Participants had more to say about the psychological effects of vicarious trauma than other dimensions » Negative psychological impacts (i.e. anxiety, burnout, frustration, overwhelmed, disconnected)

» Organizational effects

- Turnover
- Professional capacity

» Personal life

- Lack of boundaries between work and home
- Relationships feeling disconnected from family and friends
- Parenting and children
- » Physical well-being (i.e. insomnia or generally not feeling well)



Personal Coping Strategies

Wide variety of coping mechanisms deployed by personnel

"When I'm walking out the door, I just imagine that everything stays here and my personal life starts as soon as I leave work and vice versa." » Maintaining work/life boundaries
 » Media– books, tv, podcasts, music
 » Maintaining relationships with family and friends

• Pets

» Exercise

» Connecting with nature
» Hobbies (e.g., gardening)
» Counseling or therapy



Vicarious Trauma Management Policies & Practices

"And I would have workers *come into my office and we'd have sessions where* basically I felt like I was a therapist. I'm talking to them and I'm trying to let them know it's okay to feel the way you feel. It's okay to process this information the way you are, just trying to work through it ..."

» Participants report <u>informal</u> <u>sources of support</u> within their agencies

- Supervisors utilize supportive management styles (e.g., encourage staff to use PTO)
- » Many participants <u>did not observe</u> <u>any strategies</u> related to vicarious trauma in their agencies
- » Existing org policies and programs include: training, teambuilding/retreats, EAP



Barriers to Vicarious Trauma Mitigation in Agencies

"And I really want to be more present to be able to debrief. But again, we don't have the time to do it. I feel like there's no break, there's no room to really set the time apart and debrief and have a process in place because just of the sheer amount. The pace that we're moving at doesn't allow it."

- » Participants brought up roadblocks to change in social services
- » Time constraints, workload
- » Workplace culture
- » Lack of prioritization or staff buyin



Recommendations from Participants

"I think that there needs to be a public movement to see us as <u>first responders</u>. And I think that seeing the people who do this work, benefit services, foster care, CPS, seeing us as first responders would change a lot of the systemic stuff that's broken for us."

» Change workplace culture– less punitive

- Acknowledge vicarious trauma
- » Augment salaries and benefits
 - More leave to decompress
- » Address lack of staff and/or decrease workload

» New protocols and resources

- Vicarious trauma debriefing either routine or episodic
- Access to therapists and/or personal support specialist
- Peer support groups



Role of Pandemic

» COVID added an additional layer of complexity

• Transitioning to telework

» Participants noted the challenges associated with the pandemic

- Social isolation
- Magnified psychological effects

» Changes in mitigation?

- Participants divided between noting some changes in org approaches to vicarious trauma mitigation and noting no changes
- Mixed conclusions regarding personal coping strategies— some participants identified changes (frequency, type), while many also didn't alter their approach

