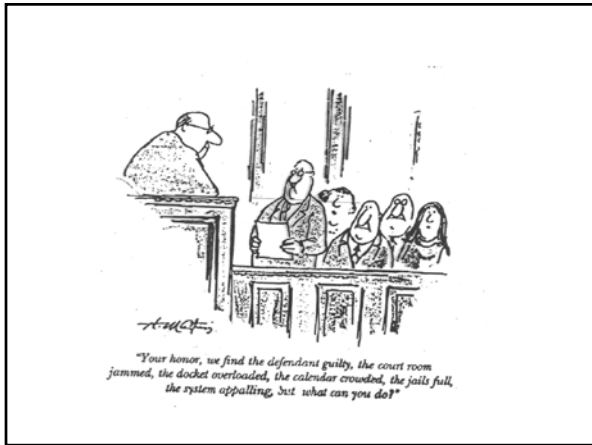


BUILDING RESILIENCE:
UNPACKING COMPASSION FATIGUE AND
VICARIOUS TRAUMA

Judge Michael A. Town
Jackson Hole, Wyoming
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Definitions

- Resiliency: The “Bounce” factor”
- Vicarious Trauma: World Trade Center
- Compassion Fatigue: “Pecked to death by ducks”
- Stress: “How was your day, dear?”

Resilience!



"He's 104. He always comes back on his birthday - I worked out he'd be gone at 69."

Vicarious Trauma.....



Pecked to Death by Ducks!



Stress.....



Brief Breakout (3 minutes)

- Please talk with a colleague next to you about a tough issue at work that troubled you. Perhaps one you kept thinking about.
- How did it affect you? Why do you still remember it?

Who Suffers from Vicarious Trauma and Compassion Fatigue?

Study:

- 105 judges self-reported (out of approx. 500) at DV conferences
- Judicial experience averaged 10 years, average age of 51
- 54% male/46% female responded.

More on Study

- 63% of judges reported one or more symptoms
- Female judges reported greater incidence of vicarious trauma
- The 7 year adjustment “itch?” was significant

All Helping Professionals Are at Risk

- “Clinicians who worked with sexual abuse survivors experienced more evidence of vicarious trauma than those who worked with clients who had cancer.” (Cunningham 2003)
- Research: psychologists (Pearlman & Saakvitne, 1995); rape crisis workers (Clemans, 1999); child welfare workers (Dane, 2000); child sexual abuse therapists (Cunningham, 1999); and researchers (Campbell, 2002).



Microwave Breakout!

- Chat with a colleague for 2 minutes.
- Please list the top three stressors you encounter as a social services professional.



What are the Symptoms?

- Interpersonal difficulties (e.g., irritability, lack of empathy)
- Emotional difficulties (e.g., depression, sense of isolation)
- Physical signs: lack of sleep, tired, bored annoyance (ennui)
- Cognitive problems: concentrating, organizing and deciding promptly (disposophobia)



What Factors Contribute to our Susceptibility?

- Individual
- Organizational (support?)
- Normal life milestones/events
- Budget concerns/challenges
- We are more likely to experience VT if we were victims of domestic abuse



What Factors Contribute to our Susceptibility?

- Social workers and advocates are blamed by clients in need in times of perceived crisis.
- Staff must balance demands to speak with social workers/advocates who are busy.
- Staff may want more authority or discretion on administrative matters but don't have it.

Brief Breakout: Coping/Prevention

- What do you do to put the day and the stress behind you?
- What really works and what does not?

How to Cope Effectively? What works best?

- ⦿ Personal: regular physical activity, proper nutrition, healthy lifestyle including rest and relaxation
- ⦿ Professional: attend workshops, seek peer support, effective communication techniques, learn the lessons of 9/11 aftermath.
- ⦿ Organizational/Administrative support is a major complaint: The next study!



Appreciating our Families!



Prevention I (protective factors):



- ⦿ ABCs: AWARENESS, BALANCE AND CONNECTION
- ⦿ Do you carefully balance home and work?
- ⦿ Do you have a solid grounding in your community, your faith &/or your culture?
- ⦿ Do you have a healthy sense of humor?

Prevention (continued)

- ⦿ How are your communication skills? E.g. active listening?
- ⦿ Is your “voice” authentic?
- ⦿ Are you coachable or mentorable?
- ⦿ Do you possess a teachable spirit?
- ⦿ Growth versus fixed mindsets (Carol Dweck)



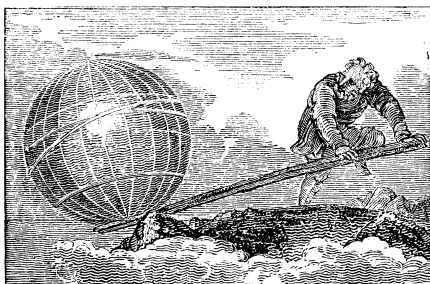


RESILIENCE:
What is your personal strategy?

Some suggestions from the literature:

- Keep things in perspective
- Take real good care of yourself
- Make timely decisions (no procrastination)
- Avoid “catastrophic thinking” (the insurmountable crisis mentality)
- Find opportunities for self-discovery





Archimedes of Syracuse (287 – 212 B.C.)

THANK YOU ALL!

QUESTIONS?

GROUP DISCUSSION?

CASE SCENARIOS:
Scenario 1

- A client becomes most unhappy with a colleague's advice, hurts himself and is hospitalized.
- Your colleague is most distressed at this outcome.
- What should you do?

Scenario 1: Choices

1. Nothing. You are no expert. Stay out of this.
2. Talk with him and tell him gently to "deal with it" privately as this just happens.
3. Talk with his supervisor or administrator.
4. Call confidential/safe resource for help.
5. Refer him to cognitive therapy.

Scenario 2

- Your job description does not cover the multiple tasks you in fact do as administrator with constant demands and interruptions.
- You are starting to get short with staff. Your spouse/partner/close friend asks if everything is OK at work.
- What should you do?

Scenario 2: Choices

1. Nothing. Talking about it will only let others know of your weaknesses.
2. Speak with your superior about redefining the job.
3. Talk with your spouse/partner/close friend.
4. Meet with your staff and develop some creative ways to address this (setting aside blocks of time without interruptions).

Scenario 3

- A colleague's spouse/partner, whom you know well, calls you at work and tells you that she/he is not only under great stress at work but drinks alcohol nightly to excess.
- There have been rumors about this and folks are starting to talk.
- What should you do?

Scenario 3: Choices

1. Nothing. This is personal and none of anyone's business but his own.
2. Talk directly with your colleague and actively listen to him/her.
3. Talk with others.
4. Call the right group to intervene.

Scenario 4

- You notice a colleague gets along with few other others and is adversarial with the agency and his/her colleagues over a variety of issues.
- Your staff look to you for some leadership or suggestions.
- What should you do?

Scenario 4: Choices

1. Get some kind of mediation or intervention.
2. Bring this to the colleague's attention gently.
3. Keep careful notes and let others know
4. All the above
