

Tools for Managing Compassion Fatigue and Vicarious Trauma



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Why I started this journey





children's institute, inc.
safe children, strong families, healthy communities



Children's Law Center
of California
Excellence In Advocacy



FLORIDA DEPARTMENT
OF CHILDREN AND FAMILIES
MYFLFAMILIES.COM



Wyoming Judicial Branch



SickKids

THE HOSPITAL FOR
SICK CHILDREN



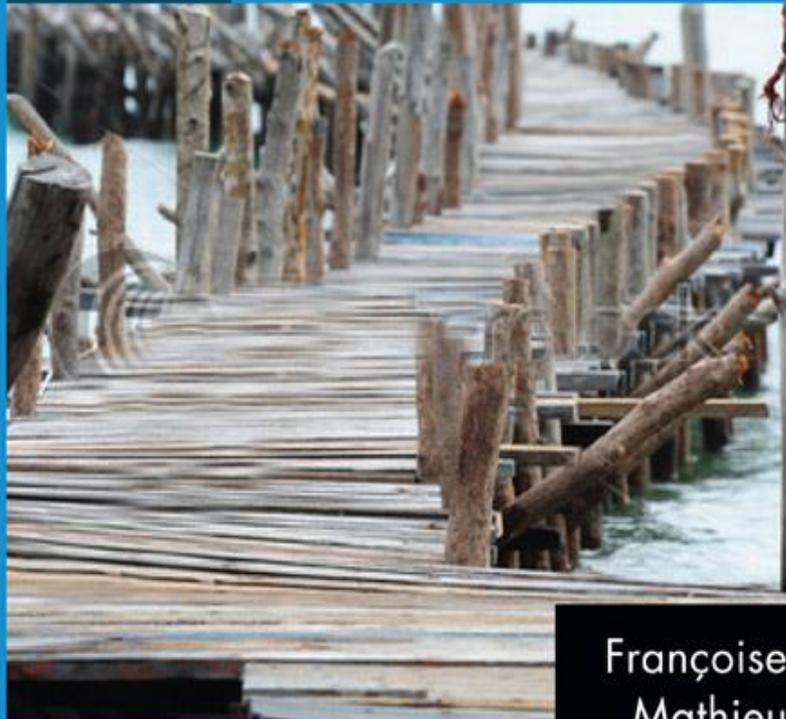
**MOUNT
SINAI
HOSPITAL**



Rady
Children's
Hospital
San Diego

Creative
Tools for
Transforming
Compassion
Fatigue and
Vicarious
Traumatization

THE COMPASSION FATIGUE WORKBOOK



Françoise
Mathieu

McCann & Pearlman, 1990

Journal of Traumatic Stress, Vol. 3, No. 1, 1990

Vicarious Traumatization: A Framework for Understanding the Psychological Effects of Working with Victims

I. Lisa McCann and Laurie Anne Pearlman¹

Within the context of their new constructivist self-development theory, the authors discuss therapists' reactions to clients' traumatic material. The phenomenon they term "vicarious traumatization" can be understood as related both to the graphic and painful material trauma clients often present and to

TR

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For



TRAUMA AND THE THERAPIST

CONCEPTS OF FORCE AND VIOLENCE: IMPLICATIONS
IN PSYCHOTHERAPY WITH ADULTS AND YOUTH

LAURIE ANNE PEARLMAN
KAREN W. SAAKVITNE

LAURIE ANNE PEARLMAN
and The Staff of The Traumatic Stress Institute /
Center for Adult & Adolescent Psychotherapy LLC





BRUNNER/MAZEL PSYCHOSOCIAL STRESS SERIES

COMPASSION FATIGUE

Coping with Secondary
Traumatic Stress Disorder
in Those Who
Treat the Traumatized

EDITED BY
CHARLES R. FIGLEY, Ph.D.



1995

Dr Charles Figley
“The cost of caring”

Multiple Exposure: Increased Risk



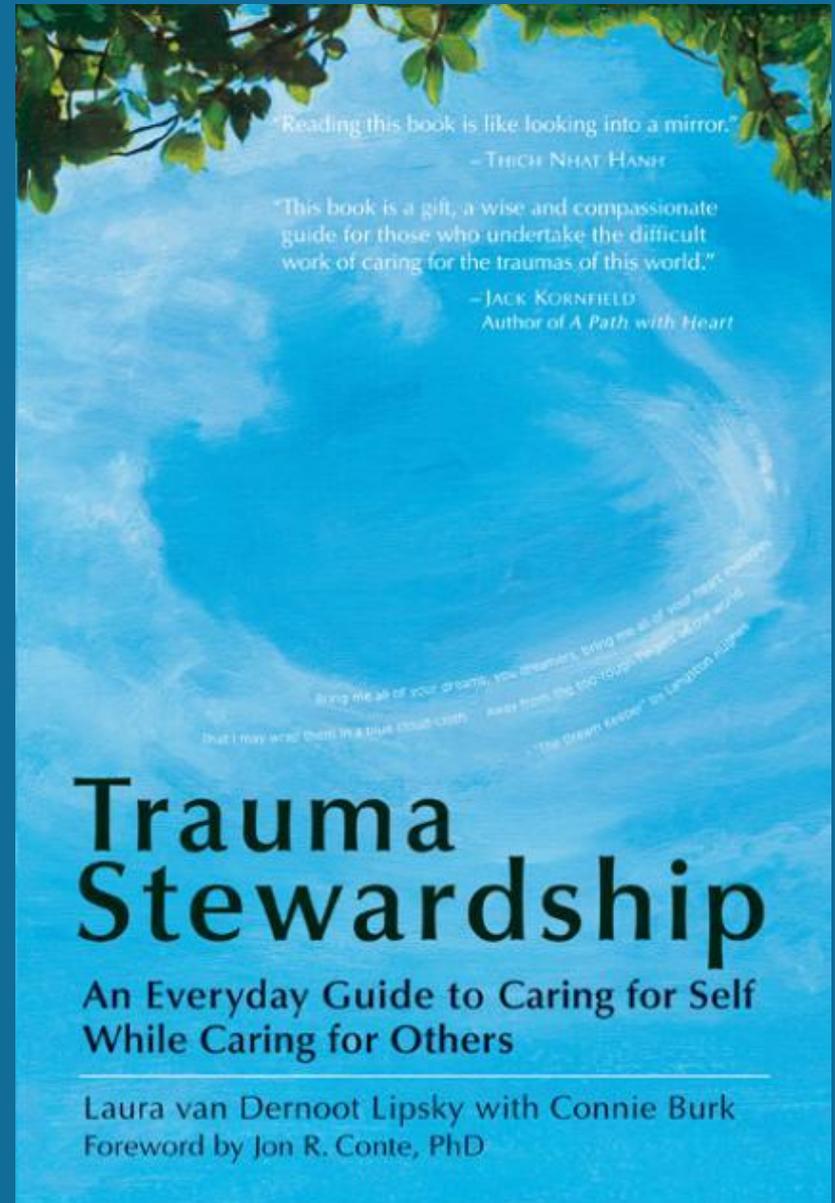
Moral Distress



“[...] happens when there are inconsistencies between a [helper’ s] beliefs and his or her actions in practice” (Baylis 2000)

- “when policies or routines conflict with [...] beliefs about [...] patient care” (Mitchell 2000)

Laura Van Dernoot Lipsky



The Ripple Effect





SO, is Self Care Enough...?



Bober & Regehr Study, 2005

Brief Treatment and Crisis Intervention Advance Access published December 30, 2005

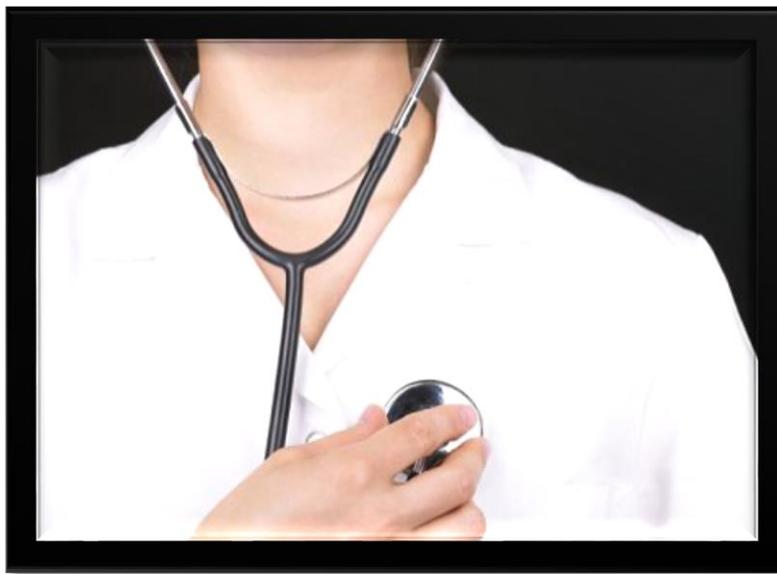
Strategies for Reducing Secondary or Vicarious Trauma: Do They Work?

Ted Bober, MSW

Cheryl Regehr, PhD

This cross-sectional design study sought to assess whether therapists believed and engaged in commonly recommended forms of prevention for secondary and vicarious trauma and whether engaging in these activities resulted in lower levels of distress. In this study of 259 therapists, time spent with counseling trauma victims was the best predictor of trauma scores. Although participants generally believed in the usefulness of recommended coping strategies including leisure activities, self-care activities and supervision, these beliefs did not translate into time devoted to engaging in the activities. Most importantly, there was no association between time devoted to coping strategies and traumatic stress scores. Intervention strategies for trauma counselors that focus on education of therapists and augmenting coping skills unduly individualize the problem.

KEY WORDS: secondary traumatic stress, vicarious trauma, coping, self-care, supervision.



Bober & Regehr (2005)

- *Believing* in self care did not equal more engagement
- Engaging in self care did not reduce trauma scores

Blaming the service providers



“If you had better self care, and work-life balance....”

Kyle Killian, Traumatology, June 2008

Helping Till It Hurts
Study of Compensation
and Self-Care
With Trauma S

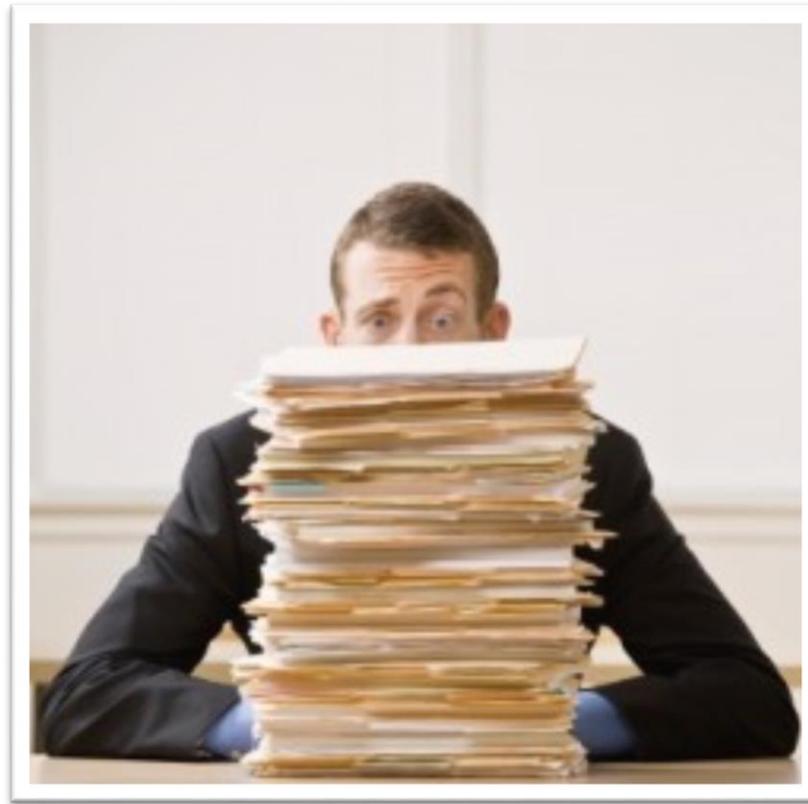
Kyle D. Killian

Organizational changes which offer “better working conditions, more control over their schedule, good quality supervision and a reduced exposure to trauma.”



Key Elements

- Regular rotation of heavy traumatic caseload



Sources: Fisher (2012), Killian (2008), Duxbury (2009), Bober (2006).

What works?

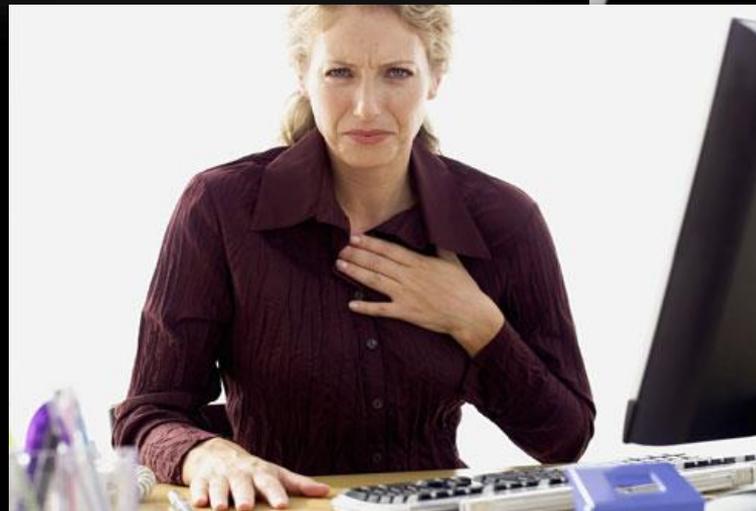
Self Awareness



The Warning Signs Continuum

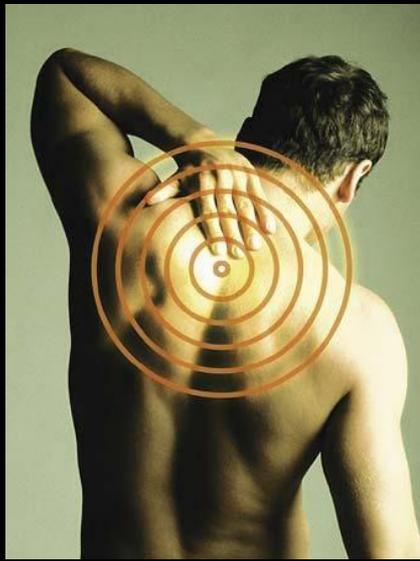


Physical Symptoms



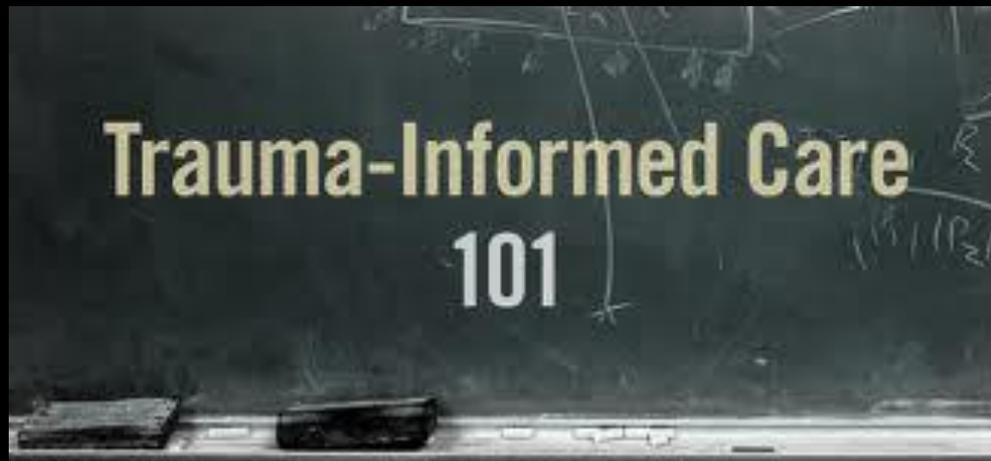
How we transition...





What works?

Get more training

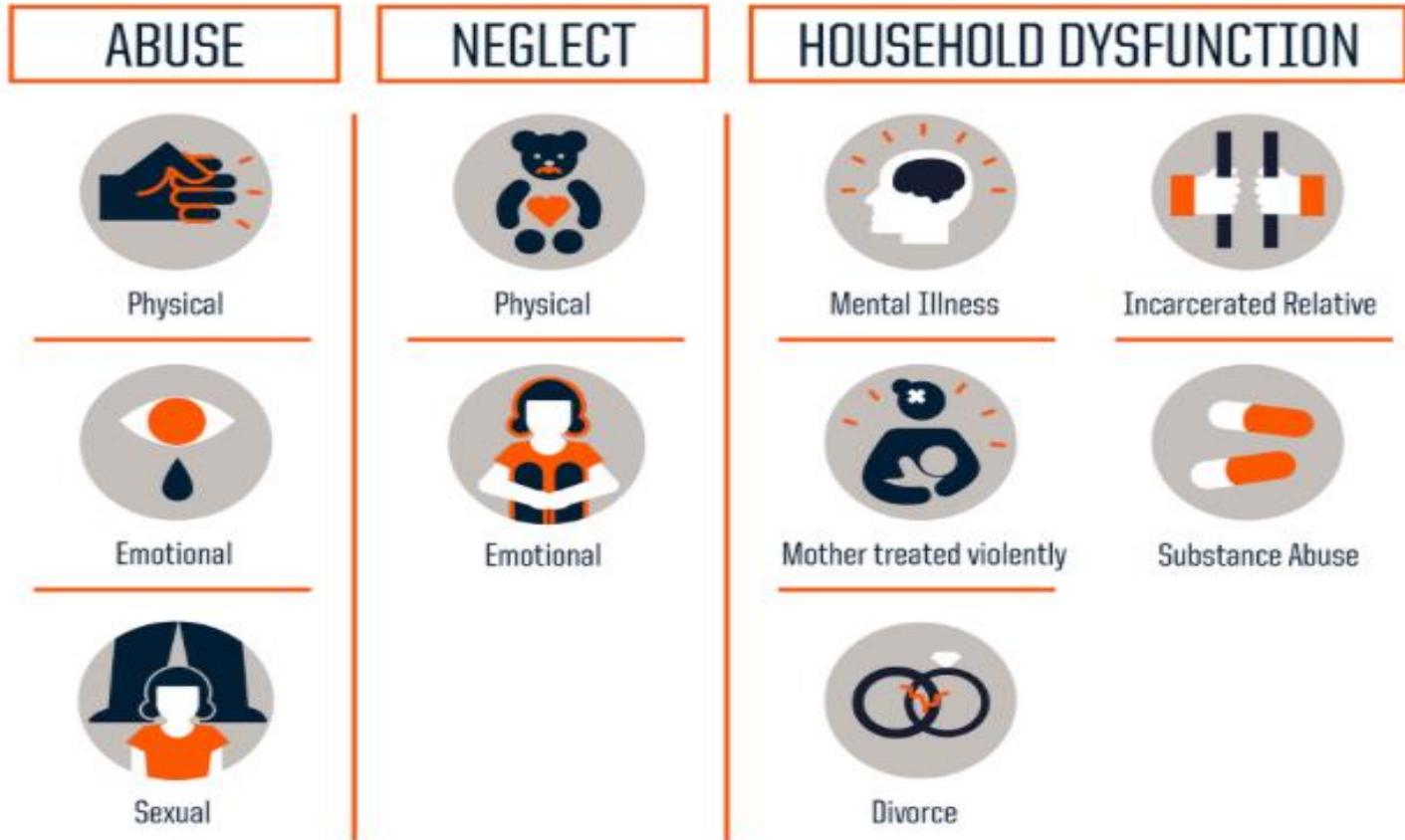


Ted Talk: Nadine Burke Harris



Nadine Burke Harris: How childhood trauma affects health across a lifetime

Three Types of ACEs



Source: Centers for Disease Control and Prevention

Credit: Robert Wood Johnson Foundation

BEHAVIOR



Lack of physical activity



Smoking



Alcoholism



Drug use



Missed work

PHYSICAL & MENTAL HEALTH



Severe obesity



Diabetes



Depression



Suicide attempts



STDs



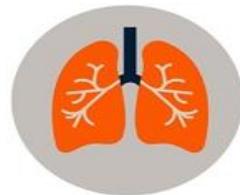
Heart disease



Cancer



Stroke



COPD



Broken bones

What works?

Cultivating Resiliency

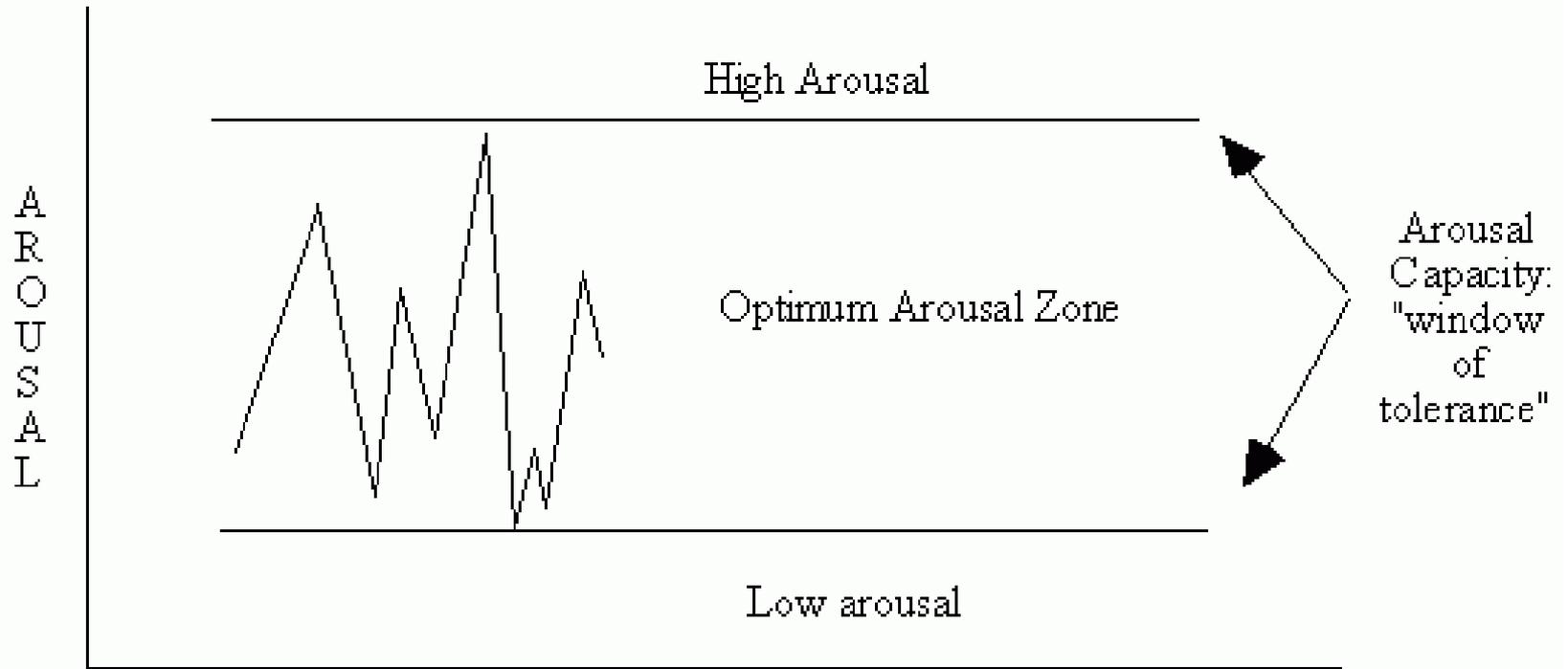


Mindfulness App

Headspace.com



Window of Tolerance Framework



Ogden et al 2006, Corrigan et al 2010

Free iChill App



Reflection:

Practices that are essential to my well-being



My Map

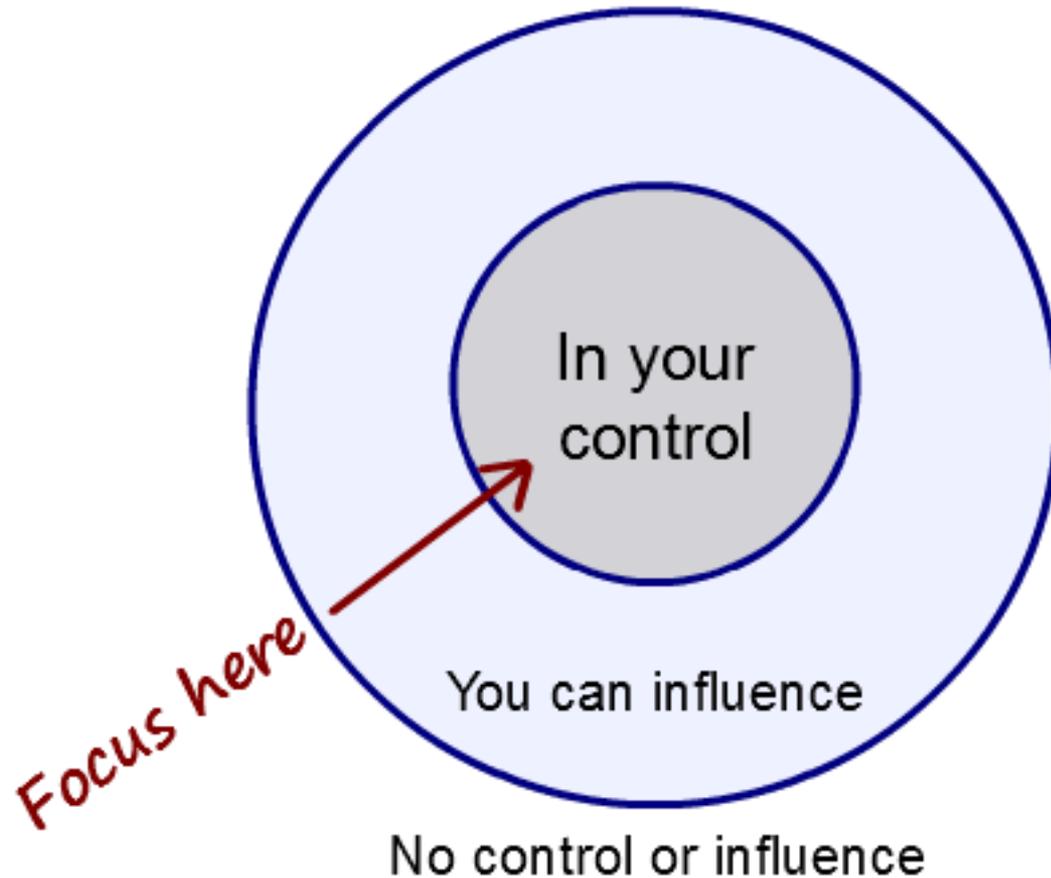
Simplifying	Physical Health	Stress relief
Understanding how I react to change	Social/Emotional supports	Stimulating & engaging work and hobbies
<i>“Trauma stewardship”</i>	Managing occupational stress/resentment	Giving Back

Your Balance Map

Your support System?



What works?



Making a 1% change



- Get more training in trauma-informed care
- Develop and enhance your social supports
- Identify your warning signs
- Develop a wellness practice and grounding skills
- Advocate for change
- Decide what you can control

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Resources

Beyond Kale and Pedicures: Can We Beat Burnout and Compassion Fatigue?

By Françoise Mathieu, M.Ed., CCC.

I have been locked out of the seminar room.

Peering through the glazing, I can see two dozen operating room nurses in scrubs, milling about inside the auditorium. The space is nearly full, and they are chatting and eating lunch. The

Many of my audiences express growing frustration at working in a system that feels broken, and no amount of kale and yoga can fix that overnight.

Have car, will travel

TORONTO, June 23, 2017

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4YOU**

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June 23, 2017



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