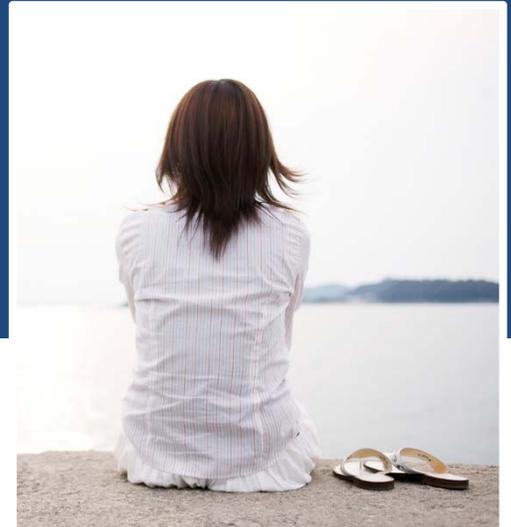


Understanding Secondary Traumatic Stress



What is secondary traumatic stress?

Secondary traumatic stress (STS) is the emotional distress that results when an individual hears about the trauma experiences of another. STS is a trauma condition, and those with symptoms severe enough could be diagnosed with Post-traumatic Stress Disorder (PTSD). Accordingly, individuals affected by STS may find themselves re-experiencing personal trauma or notice an increase in arousal and avoidance reactions related to the indirect trauma exposure. They may also experience changes in memory, mood, and perception; alterations in their sense of self-efficacy; a depletion of personal resources; and disruption in their perceptions of safety, trust, and independence.

Who can be affected by STS?

STS does not just impact clinicians; it is an important issue for the entire MDT. STS can impact anyone in a CAC who comes into contact with traumatic material through hearing client's trauma stories, seeing high levels of distress in the aftermath of a traumatic event, retelling a client's story for forensic purposes, and/or seeing photos or other graphic images related to the abuse. Every member of the multidisciplinary team can be at risk of developing symptoms of STS if they have this type of indirect exposure.

What is the impact of STS on the worker?

The trauma symptoms associated with STS may impact every area of an employee's life. Some employees will experience mild reactions, while others may report a symptom profile consistent with PTSD. Social withdrawal, loss of interest in activities, avoidance, mood changes, and relational disturbance are all common traumatic stress reactions that can lead to functional impairment, if unaddressed. CAC employees may notice a change in their outlook on life, their perceptions of the world as a safe place, and may over or their reaction to danger. If employees are reporting symptoms that are impacting their functioning, they should be referred for a trauma assessment and assistance from a trauma therapist if indicated.

What can CAC's do to address STS?

There are a range of activities that organizational leaders can implement to prevent or address STS. Good supervision allows CAC staff to process the personal impact of the work and sends the message that indirect trauma exposure is an issue that should be monitored and addressed. This allows supervisors to make referrals to resources such as a qualified EAP provider, when additional support and assistance is needed. Sessions where employees can share with peers how they are feeling about a client encounter, without oversharing graphic details of the client's trauma, can decrease the secondary exposure to others, yet allows employees to metabolize the experience and may discharge the potency of its effects. Organizational strategies such as team building, employee recognition, and supporting staff in creating a work-life balance activates and supports the employee's natural coping abilities.