

# **Support Guide Two**

The following guide notes are designed for staff to support them having dealt with disturbing records or content and where they are experiencing difficulties coping. This guide will:

- 1. Give understanding of key warning signs and symptoms of secondary trauma and compassion fatigue.
- 2. Give guidance on how to manage these symptoms and the various stages we may go through when suffering from these conditions.
- Give simple principles and techniques which can help manage disturbing thoughts, feelings and images associated with compassion fatigue and secondary trauma.

#### Some terminology and definitions

Secondary traumatisation is also referred to as compassion fatigue (Figley, 1995) and vicarious traumatisation (Pearlman and Saakvitne, 1995).

Learning to recognise one's own symptoms of compassion fatigue / secondary trauma has a two-fold purpose:

- Firstly, it can serve as an important "check-in" process for staff who have been feeling unhappy and dissatisfied, but did not have the words to explain what was happening to them.
- Secondly, it can allow them to develop a warning system for themselves.

# The impact of Compassion Fatigue / Secondary Trauma

These conditions impact upon a whole range of areas and being aware of each can help to manage the impact - these levels include:

- At a Behavioural level
- At an Interpersonal level
- Personal Values / Beliefs
- Job Performance

Although initially aimed at counsellors the **Fact Sheet Number 9 Vicarious Trauma from the American Counselling Associations** is a very useful document to help more fully appreciate the impact at the various levels indicated above.

Click on the following link to download this helpful brief information document.

# PDF - Fact Sheet Number 9 Vicarious Trauma - American Counselling Associations

## Various stages of Compassion Fatigue / Secondary Trauma

Identifying key warning signs is vital to enable us to manage our overall state of mind and body. It is also important to be able to understand and recognise the various stages we can go through. The following are possible stages we may go through as compassion fatigue develops. Recognising the early stages and taking early action can significantly aid recovery. The following is an amended version, adding an additional early stage which for many may be the first indicator of an issue. This has been termed "The Upset/Disturbed stage."

The various stages are:

The Engaged stage - keen and interested in our job.

**The Upset / Disturbed stage** - something is wrong but we try to shrug it off as just being a bit out of sorts. However, it is when this stage persists, and possibly moves on to the next few stages, that we should look towards possibly taking action.

**The Irritability stage** - a little more irritable than is usual for us.

**The Withdrawal stage** - not just from work but interactions with friends and family.

**The Quitting stage** - a real sense of "why bother?" and "I just cannot be bothered".

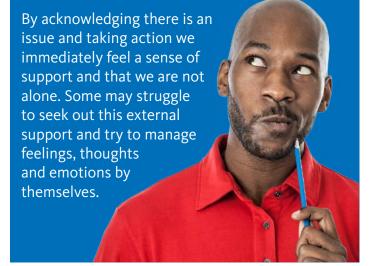
The Pathology vs Renewal / Maturation stage - if not properly checked we can move to severe mental and physical health issues. Alternatively we may also move through and manage our feelings and issues more effectively and hence mature and develop effective resilience.

We want to manage issues at an early stage but whatever point a person is at in this process, it is important to know that it is never too late to start and take control.

# Key things we can do

On a general level, at whatever stage you think you are at, some of the most important actions you can take include:

- Discussing difficult and disturbing cases with a trusted colleague.
- Taking time out to talk with colleagues about work and life in general.
- Seeking support of family, friends and colleagues - it is a fact that this type of support is more important and has more of an impact than formal therapy or mental health interventions. There are many reasons for this, but one significant factor is when we feel supported or have people we can lean on at times, it makes a difference.
- Talking over concerns and issues with your manager if possible. If this is not possible, make a manager aware you are having difficulties.



#### Managing our internal state in times of difficulty

Although trying to manage purely on your own is not ideal it is still important to do things that can help manage what we call our internal state especially when affected by our work.

When we talk about our internal state, the following definitions may be helpful:

**Internal State:** "....is your way of being at any moment, the sum of your thoughts, feelings, emotions, mental and physical energy." Ian McDermott.

**Internal State:** "....the total on-going mental and physical conditions from which a person is acting at any given time" Richard Bandler / John La Valle.

Our internal state is about how we are at any moment in time; we can be affected by many external or internal factors. As these factors affect our internal state they then have an impact upon our motivation and our ability to achieve. Managing this overall general state and changing it is important to managing compassion fatigue and secondary trauma.

### A few useful ways to manage our internal state include:

**Step Back** – This can be done both physically and visually. When we get stressed or anxious we tend to suffer tunnel vision, our mind focuses in on the issue and we cannot seem to pick up on the bigger picture.

**Breathe it out** – Breathing is the one autonomic system we can gain conscious control of very quickly. As you take that physical and visual step back and take in the bigger picture, take a deep steady breath.

Click here to access a simple breathing / Mindfulness exercise which can help

#### PDF - Breathing exercise sheet

**Bodily sensation** - Notice where the negative state manifests itself in your body and how it manifests. Is it heavy or light, fluid or solid, pressure inwards or outwards? Having noticed the negative sensation what might you do to change the sensation to a positive one?

Click here to have a look at an exercise which can help change a negative emotion.

#### PDF - Representational exercise sheet

Widen the view – As well as the physical and visual step back, use your internal dialogue. We talk to ourselves all the time, it is the way we express our thoughts. Listen to the internal dialogue - the language we use has a significant impact on our internal state. If we are giving ourselves a hard time we are simply feeding the negative state. If we continue to use negative self-talk we reinforce the negative patterns we are seeking to change.

Slow the pace – Highly emotional negative states are often linked to speed of thought and movement. Have you noticed when you are anxious or stressed how things seem to move at a much faster pace? By slowing down - chiefly by concentrating on our thoughts and breathing - we can begin to regain control.

Change posture – Our internal state is linked very closely to our physiology. Changing our posture is a perfect way to change our state. Stop for a few minutes; find a large full size mirror and stand in front of it. Notice your posture and how you are standing. Now think of times when you are feeling calmer and in an OK state, how is your posture then? Try to replicate your posture from such a time.

#### Some important final thoughts

It is vital to note that if you feel you cannot cope, if the ideas and techniques we have highlighted here are not helping, and you feel the issue is too much for you, then it is important to get support from others. Try friends, family, colleagues and managers first, as this has been shown to be the most effective support. But you may feel that you need more professional help. If so, there are a number of routes to consider. Options may include:

- Check out if you have a coaching / mentoring programme in your organisation.
- Check out what Occupational Health support you have in your organisation.
- Check out if your organisation has an EAP group (Employment assisted programme) this is a confidential service that can be accessed directly if the organisation has one.
- Your own GP can can always advise and help point you in the direction of professional health care.
- You can contact a counsellor/ psychotherapist. (The BACP has a very good online register of therapists which can be accessed through http://www.itsgoodtotalk.org.uk/therapists)