



TIS – risk factors of secondary traumatic stress or vicarious trauma

Although trauma-focused supervision is based on classic clinical supervision, there are differences. In addition to the methods of classical clinical supervision, trauma-focused supervision should also be more focused on determining the presence of possible impacts of such work (e.g., compassion fatigue, secondary traumatic stress (STS), or vicarious traumatization, etc.). Consequently, the exercises themselves within the framework of such supervision can be enriched more with self-care topics.

As a supervisor look for and be watchful about possible risk factors that can lead to higher prevalence of negative impact of work with trauma-exposed clients.

Risk factor can be both on the side of organization and also on the side of helper.

Organizational risk factors for STS:

- Direct work with individuals and hearing about traumatic experiences
- Heavy caseloads of traumatized children
- Long tenure in the field
- Working more than 40 hours per week
- Social or organizational isolation
- Inadequate training

Personal risk factors for STS:

- How the worker experiences the client's story
- How the worker interacts with the client
- Imagining trauma story from client's perspective

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- Thinking about what it was like for the client
- Loss of control over the conversation
- Lack of choice re: interventions and strategies
- Insufficient time to recover from trauma exposure
- Firsthand exposure to trauma, personal trauma history

Symptoms of secondary traumatic stress

Supervisor have to also be able to recognize a symptoms of STS. Most common STS are:

- Difficulty talking about feelings
- Free floating anger and/or irritation
- Increased caffeine and/or alcohol consumption
- Difficulty falling asleep and/or staying asleep
- Losing sleep over clients
- Worrying that you are not doing enough for your clients
- Dreaming about clients' traumatic experiences
- Inappropriate sarcasm, mocking of clients
- Diminished joy towards things you once enjoyed
- Feeling trapped by the work
- Feeling hopeless about clients
- Blaming others
- Having intrusive thoughts about clients

Red flags (other signs which are obvious symptoms that helper have problems):

- Client behavior are viewed as deliberate, and staff is not working to figure out how they might be adaptive for client.
- Clients are described in negative terms like „manipulative“ or trying to get over“, or referred using their mental health diagnoses „borderline“.
- Staff assume the worst about a client instead of giving them the benefit of the doubt. Staff are cynical about clients and blame them for bad choices or lack of appreciation for services

<https://www.pacesconnection.com/g/becoming-a-trauma-informed-and-beyond/fileSendAction/fcType/0/fcOid/475599658546455450/filePointer/475599658546455545/fodoid/475599658546455539/3rd%20Edition%20TI%20Supervisor%20Workbook.pdf>