

Secondary Traumatic Stress

Understanding the Impact on Professionals in Trauma-Exposed Workplaces

Developed by the National Child Traumatic Stress Network
Secondary Traumatic Stress Collaborative Group
2022

Goals of this Training

- To learn about the risks associated with working with individuals who are suffering with traumatic stress symptoms
- To learn strategies to reduce the impact of secondary traumatic stress (STS) and support wellness in staff
- To understand how addressing STS is an ethical mandate for organizations and individuals working in trauma-exposed environments





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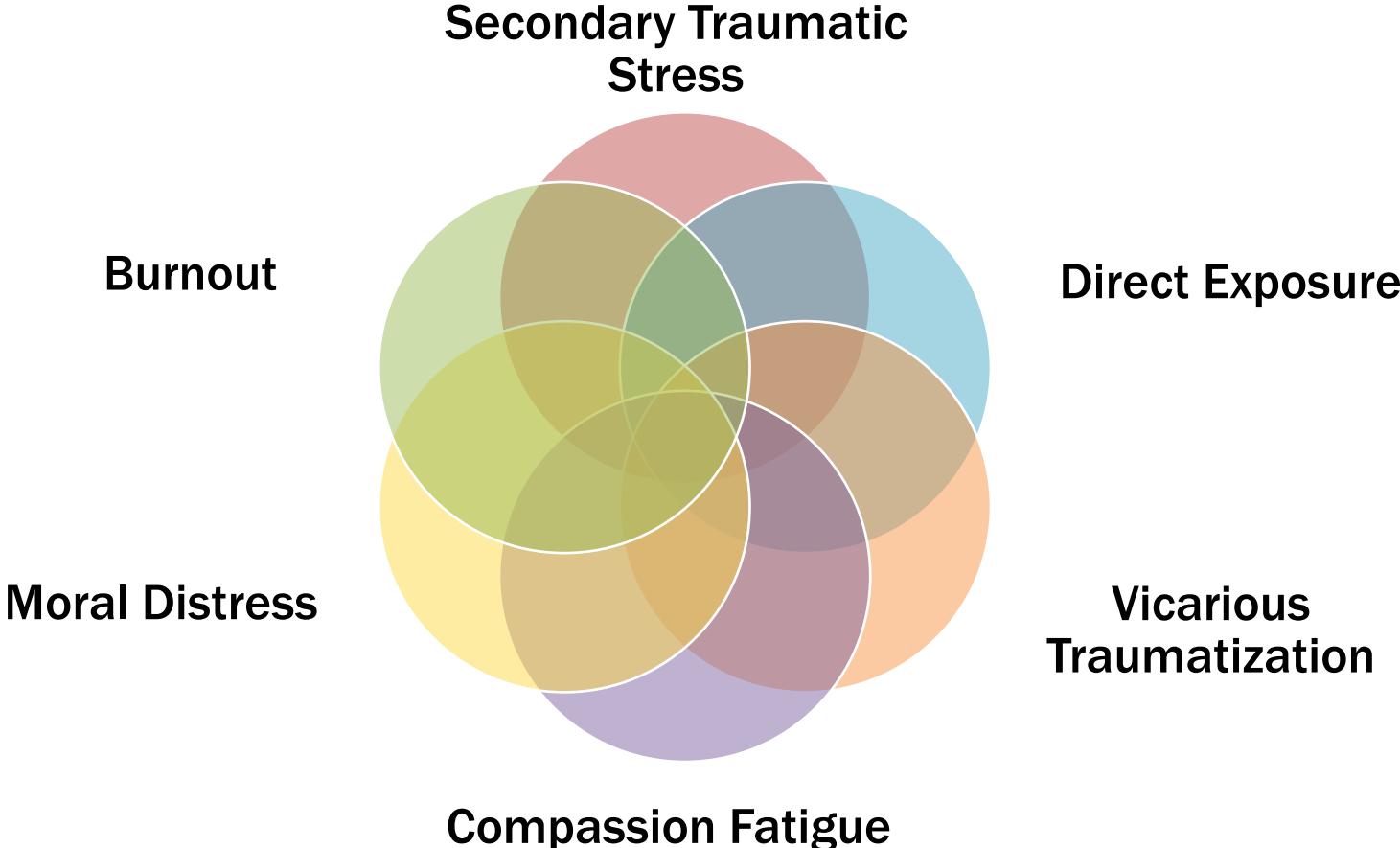
About Secondary Traumatic Stress (STS)

Definition



- Secondary Traumatic Stress is the emotional distress that results when an individual hears about the firsthand trauma experiences of another.
- For individuals who care for children who have experienced trauma and their families, hearing trauma stories can take an emotional toll.
- STS symptoms can range from mild to severe, at which point individuals can develop post-traumatic stress disorder (PTSD).

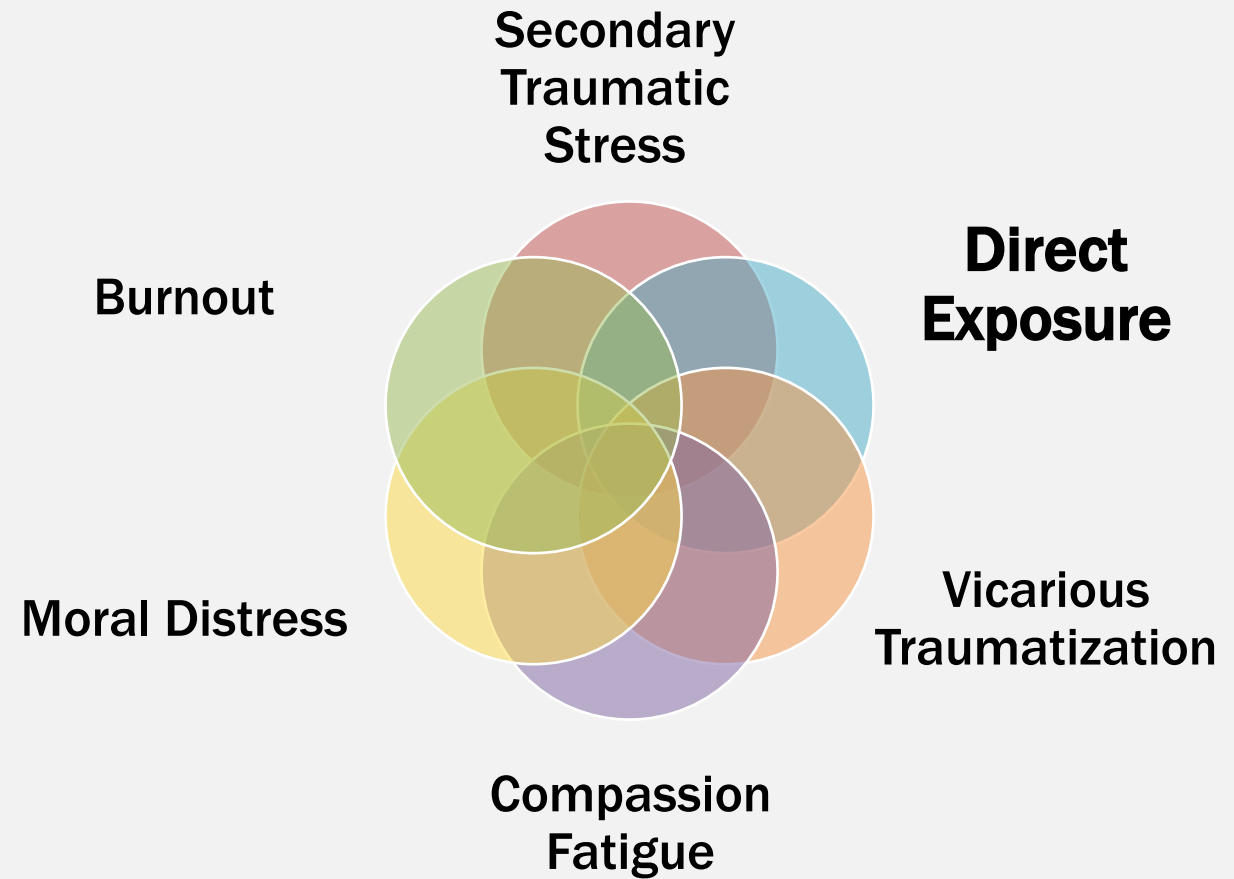
Related Terms



Related Terms

Direct Exposure

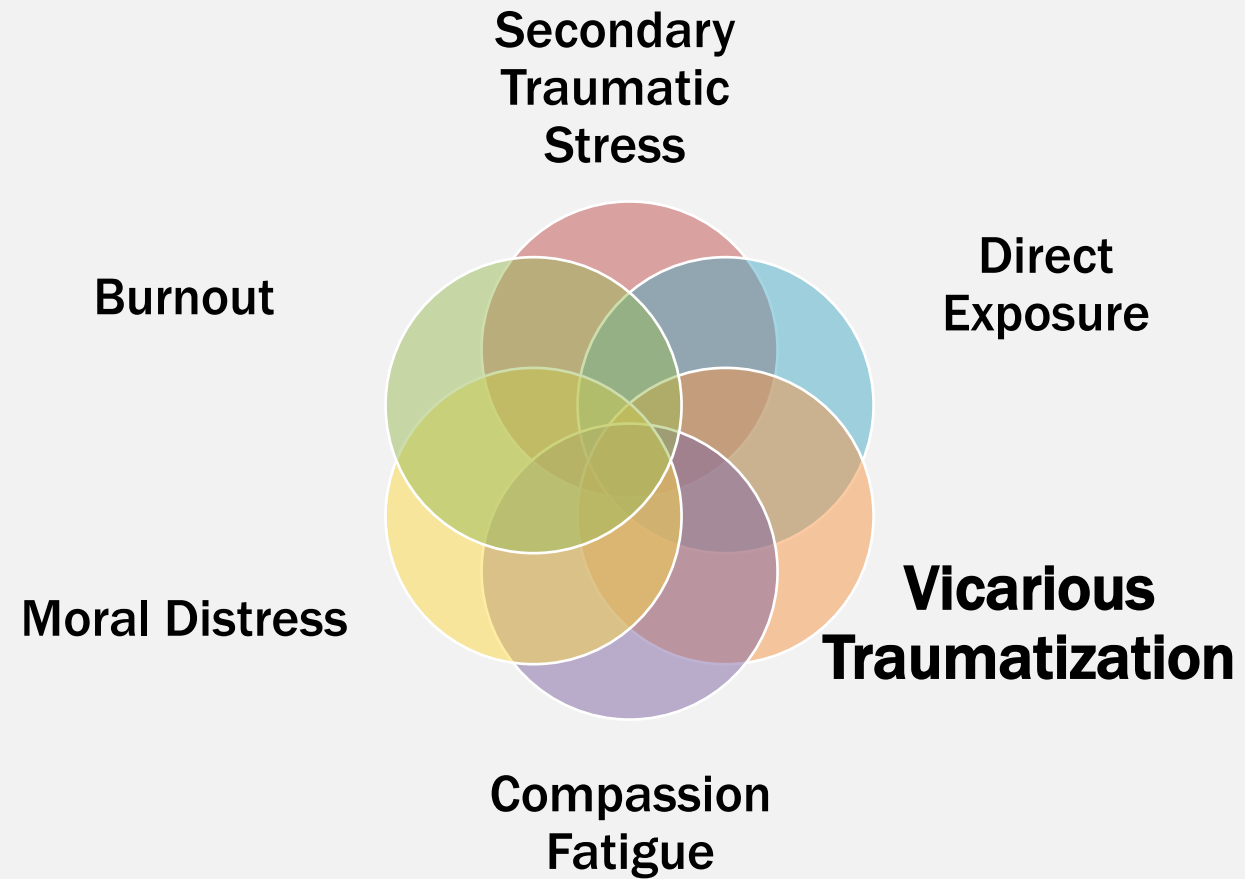
Many child-serving professionals are directly exposed to trauma during the course of carrying out their daily work responsibilities. These are events that involve a direct threat to the provider or witnessing threats to others.



Related Terms

Vicarious Traumatization

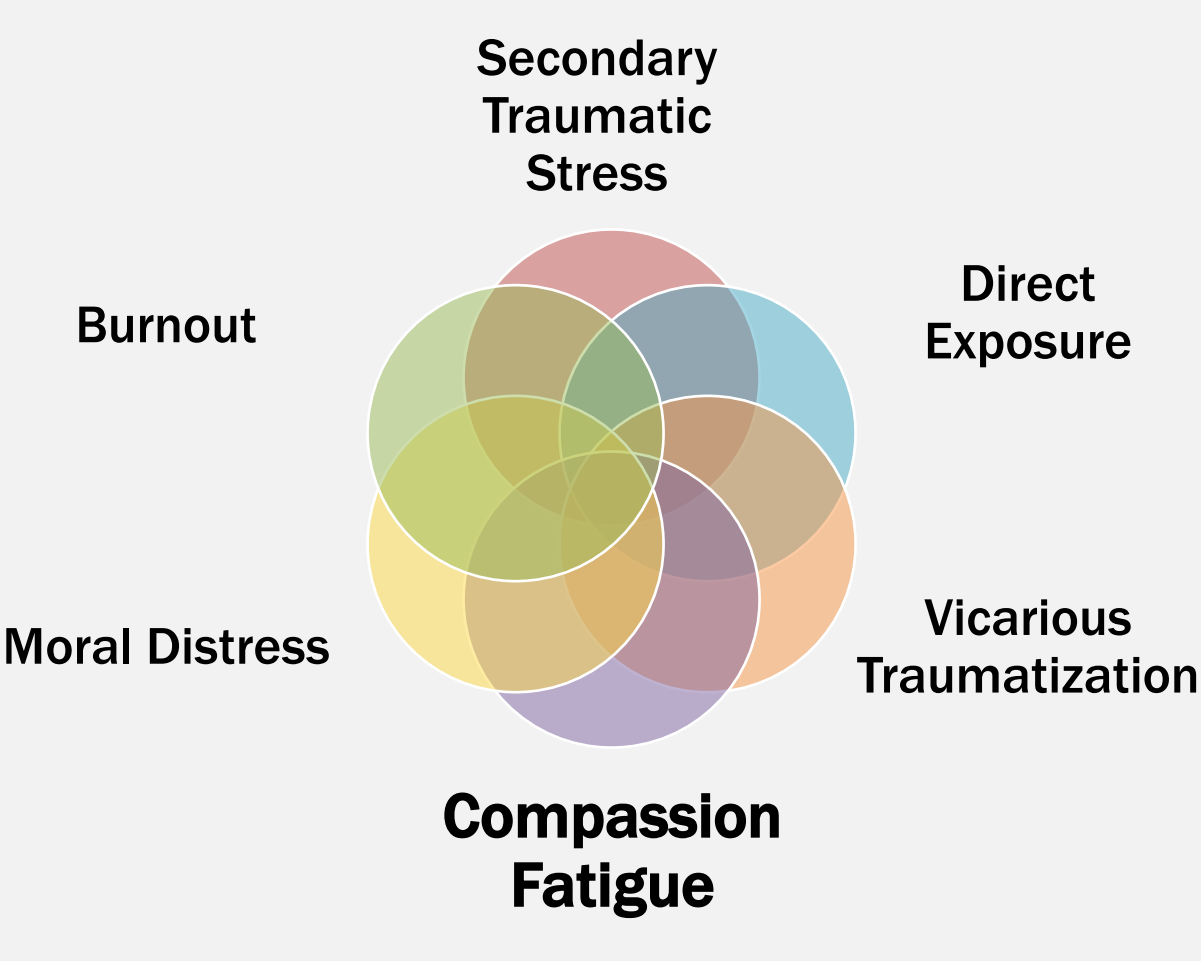
Changes in the inner experience of the provider, such as expectations for trust, safety, control, esteem, or intimacy, that result from cumulative exposure.



Related Terms

Compassion Fatigue

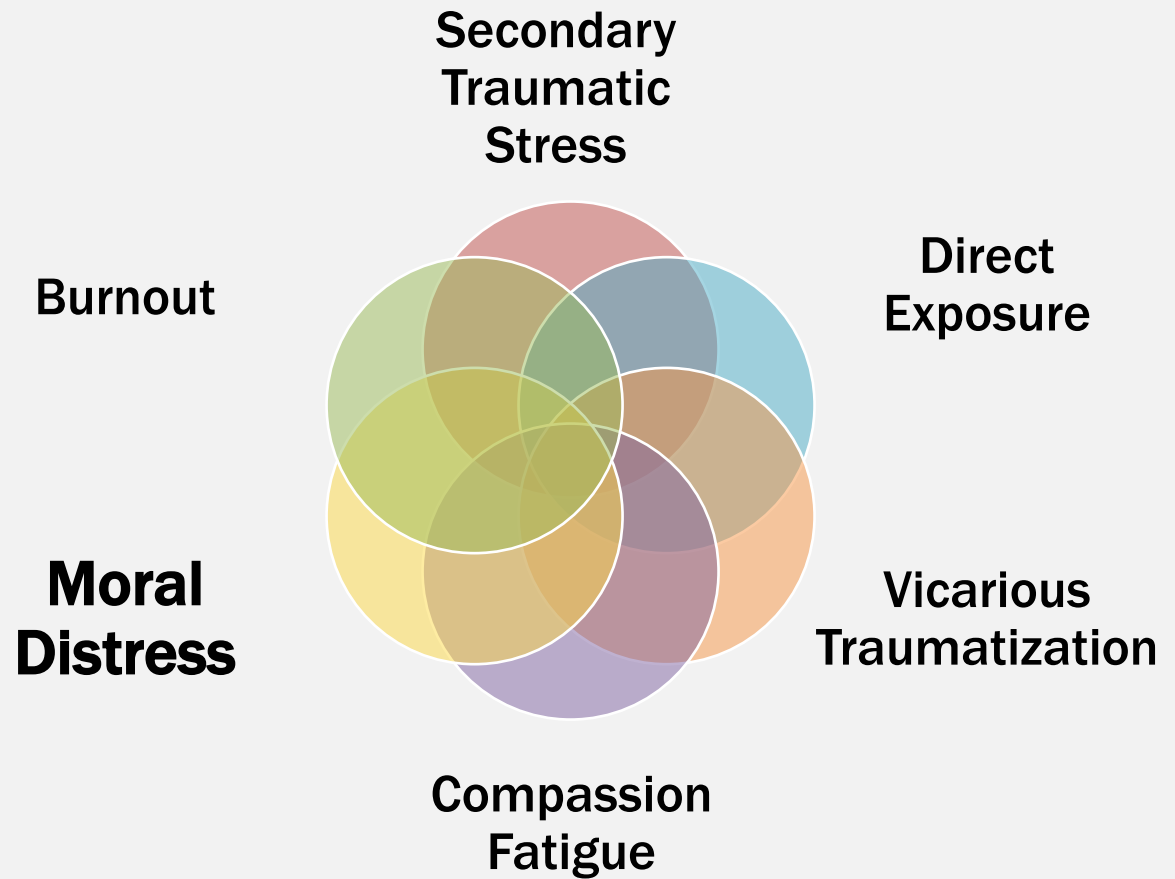
The physical and emotional exhaustion experienced by those who care for others who are in distress.



Related Terms

Moral Distress

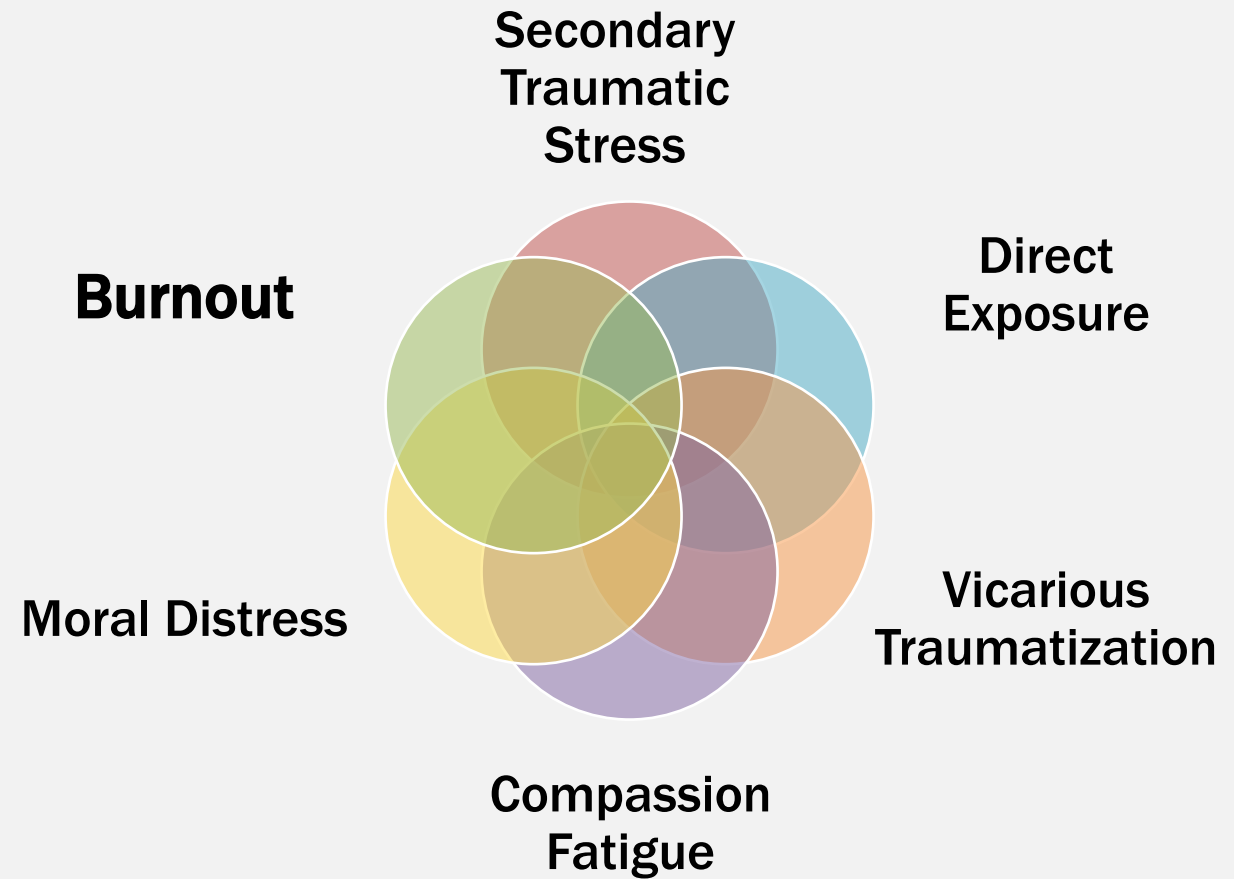
Stress that occurs when one believes they know the right thing to do, but institutional or other constraints make it difficult to pursue the desired course of action.



Related Terms

Burnout

The result of a high workload with little support and few resources. Symptoms of burnout include emotional exhaustion, cynicism, depersonalization, and loss of job satisfaction.



Related Terms

Compassion Satisfaction

Positive aspects of the work, such as inspiring and rewarding work with clients and belief that one's work makes a meaningful contribution to clients and society.



Reflective Exercise

Consider how these descriptions of STS and related terms resonate with your own experiences.

- Can you relate to this?
- What is it bringing up for you?
- How did you first notice the impact your job was having on you?

Why Talking About STS Is Important

- High prevalence of trauma exposure in children, combined with disruptions in well-being and functioning, lead to many children involved with service systems having experienced trauma.
- It is best practice to engage with children empathically. This can include listening and/or processing a traumatic experience with a child.
- Indirect trauma exposure is not the only workplace stressor.
- Many professionals also have their own primary trauma which can increase risk for STS.
- STS and these other stressors can lead to lack of job satisfaction, compromised professional functioning, and diminished quality of life.

Understanding Who Is At Risk of STS

- Any care provider who interacts directly with individuals who have experienced trauma and is in a position to hear the recounting of traumatic experiences
 - Includes front-line staff, supervisors, administrators, peer support providers, and support staff (e.g., receptionists, drivers, maintenance workers)
 - Can also include caregivers, resource parents, family members, and other supportive adults
- Between 6% - 26% of therapists working with populations who have experienced trauma, and up to 50% of child welfare workers, are at high risk of STS.

The Reality of STS

“The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet.”

Rachel Naomi Remen, MD



STS & Culture, Race, and Historical Trauma



- Racism, oppression, and disproportionality can contribute to STS and moral distress, especially among providers of color.
- This can be especially challenging for providers who hold similar marginalized identities to the children and families with whom they work.

STS & Culture, Race, and Historical Trauma

Providers of color and providers who hold marginalized identities may have additional vulnerabilities to STS due to:

- Exposure to the same oppression and institutional racism as client populations.
- Identification with clients of a similar background or with similar experiences.
- Lack of safety or support in their agency.
- Higher caseloads and being asked to take on additional responsibilities, such as translation and contributing expertise about race and marginalized identities.



STS Signs and Symptoms

- Hopelessness
- Inability to embrace complexity
- Inability to listen, avoidance (including of certain clients)
- Anger and cynicism
- Sleeplessness
- Chronic exhaustion and/or physical ailments
- Minimizing
- Guilt
- Preoccupation with clients/client stories
- Intrusive thoughts/nightmares/ flashbacks
- Feeling estranged/isolated/no one to talk to
- Feeling trapped, “infected” by trauma, inadequate, depressed



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Addressing STS at the Organizational Level

Why Is It Essential For Organizations To Address STS?

An exclusive focus on coping strategies for service-providers

(without acknowledging the organization's role)

implies that individuals experiencing STS are at fault!

**Individual Efforts + Systemic Approach →
Resiliency-building Model**



How Organizations Contribute to Individuals' STS



- High dose of exposure to indirect trauma
- Lack of awareness and attention to STS at all levels of the organization
- Inadequate training on STS
- Multiple organizational stressors
- Inequity and discriminatory practices
- Limited opportunities for leadership and professional development
- Lack of risk reduction practices
- Lack of appropriate supervision
- Inexperienced workforce

Impact of STS on Organizations

- Negative impact on work performance, environment, and morale
- Poor relationships between staff and management or co-workers
- Attrition
- Absenteeism and presenteeism
- Ethical breaches



**Increases in
negative outcomes**



**Decreases in job
satisfaction and
connection**

Case Vignette: Alex

- 25-year-old first generation Mexican-American
- Has worked full time at a human services agency for 1 year
- Works with many families who are recent immigrants to the U.S.
- Is the only Latinx, bilingual staff member in her program
- Gets most of the agency referrals for Spanish-speaking children and families, resulting in higher caseloads than co-workers
- Is asked to help co-workers translate with clients and to help agency translate materials into Spanish
- Supervisor notices that Alex seems exhausted but isn't sure how to bring it up

What organizational stressors could be contributing to Alex's experiences of STS?



Organizational Stressors Impacting Alex

- Demanding work
- Full case load of children who have experienced trauma
- Long hours
- Asked to take on more responsibilities than co-workers who are not bicultural or bilingual, such as higher case loads and translation
- Lack of support and experiences of discrimination and microaggressions
- Supervisor does not feel comfortable or equipped to address stressors and challenges



Identifying STS

Supervisors and agency leaders should use both formal and informal methods of identifying STS in their staff and organization

- Provide/discuss information about STS and validate STS as a common occupational hazard
- Make provider self-assessments available
- Utilize reflective supervision to assess STS
- Engage in discussions about the impact of trauma work
- Encourage reflection on providers' own trauma history and emotional relationship with the work and work environment
- Utilize agency-wide organizational assessments
- Communicate and follow policies/practices to protect the privacy and confidentiality of the workforce

Individual Assessment Measures for STS

Secondary Traumatic Stress Scale (STSS; Bride, 2013)

- 17-item measure of STS with sub-scales for intrusion, avoidance, arousal, and negative alterations in cognition and mood
- <https://www.stsconsortium.com/resources-for-individuals-1>

Functional Impairment from Secondary Trauma Scale (FISTS; Bride, 2013)

- 7-item measure assessing psychosocial distress or impairment corresponding to life domains- social, occupational, familial, sexual, psychological, emotional, and physical
- <https://www.stsconsortium.com/resources-for-individuals-1>

Professional Quality of Life-5 (ProQOL-5; Stamm, 2009)

- 30-item measure with sub-scales for compassion satisfaction, burnout and compassion fatigue
- https://www.proqol.org/ProQol_Test.html

Individual Assessment Measures for STS (continued)

Trauma and Attachment Beliefs Scale (TABS; Pearlman, 2003)

- Assesses beliefs/cognitive schema in 5 domains that may be affected by traumatic experiences- safety, trust, esteem, Intimacy, and control
- For purchase at: <https://www.wpspublish.com/tabs-trauma-and-attachment-belief-scale>

Impact of Events Scale - Revised (IES-R; Weiss, 2007)

- 22-item measure of distress stemming from routine life stress to acute stress and trauma
- http://www.emdrhap.org/content/wp-content/uploads/2014/07/VIII-E_Impact_of_Events_Scale_Revised.pdf

Individual Assessment Measures for Wellness

- **Personal Balance Wheel** (Rabideau & CrossBear, 2014)
 - Color-coded self-assessment that evaluates balance in spiritual, emotional, physical, and mental domains
- **Resilience, Balance & Meaning** (Fisher, 2016)
 - Assesses self-care in your workplace and personal life across 6 domains: physical, cognitive, psychological/emotional, behavioral, interpersonal, and existential
 - <https://www.tendacademy.ca/wp-content/uploads/2020/03/Resilience-Balance-Meaning-excerpt-Self-Care-Questionnaires-Dr.-Pat-Fisher-2016.pdf>



Organizational Assessment for STS

The **Secondary Traumatic Stress Informed Organizational Assessment (STSI-OA)** is a 40-item measure that categorizes STS prevention and intervention activities into 6 domains by self-rating the degree to which the organization:

- Promotes resilience-building activities.
- Promotes physical and psychological safety.
- Has STS-relevant policies.
- Exhibits STS-informed leadership practices.
- Exhibits STS-informed organizational practices.
- Evaluates and monitors STS policies/practices in workplace.

THE SECONDARY TRAUMATIC STRESS-INFORMED ORGANIZATION ASSESSMENT (STSI-OA)
©Copyright 2014 Ginny Sprang, Leslie Ross, Kimberly Blackshear, Brian Miller, Cynthia Vrabel, Jacob Ham, James Henry, and James Caringi

Secondary Traumatic Stress refers to the trauma symptoms caused by indirect exposure to traumatic material, transmitted during the process of helping or wanting to help a traumatized person.
Resilience is an individual's ability to adapt to stress and adversity in a healthy manner.
Organization, as used in this context, refers to the workplace setting that will be the target of this assessment.
After reading each item, mark the corresponding box under the appropriate choice as to how the organization performs on that indicator:
1=Not at all; 2=Rarely; 3=Somewhat; 4=Mostly; 5=Completely; 0=N/A

DATE: _____

	1	2	3	4	5	0
1. THE ORGANIZATION PROMOTES RESILIENCE-BUILDING ACTIVITIES THAT ENHANCE THE FOLLOWING:						
a. Basic knowledge about STS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Monitoring the impact of STS on professional well-being	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Maintaining positive focus on the core mission for which the organization exists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. A sense of hope (e.g., a belief in a client's potential for trauma recovery, healing and growth)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Specific skills that enhance a worker's sense of professional competency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Strong peer support among staff, supervisors and staff and/or outside consultants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Healthy coping strategies to deal with the psychological demands of the job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

You can request a free copy at: <http://www.uky.edu/CTAC/STSI-OA>.

When to Assess?



- Individual assessment
 - Informally during supervision
 - Formally as part of the organization's Employee Assistance Program (EAP) or through ongoing training/education for staff
- Organizational assessment
 - During strategic planning
 - When designing a training program
 - To launch a response initiative
 - On an ongoing basis to monitor STS levels and strategies

Remember: Care should always be taken to protect staff privacy!

What Organizations Can Do: Agency Culture and Practices

- Celebrate the shining moments!
- Maintain positive focus on the organization's core mission.
- Convey a sense of hope.
- Build community by providing time, space, and resources for staff to connect and reflect.
- Encourage strong peer support among staff.
- Intentionally provide opportunities for connection and mentorship for new staff.
- Convene optional, informal gatherings after crisis events.
- Provide resources for staff to implement healthy coping strategies to deal with psychological demands of the job.
 - Workplace wellness groups
 - Reflective practice groups
 - Reflective supervision

What Organizations Can Do: Agency Policies and Procedures

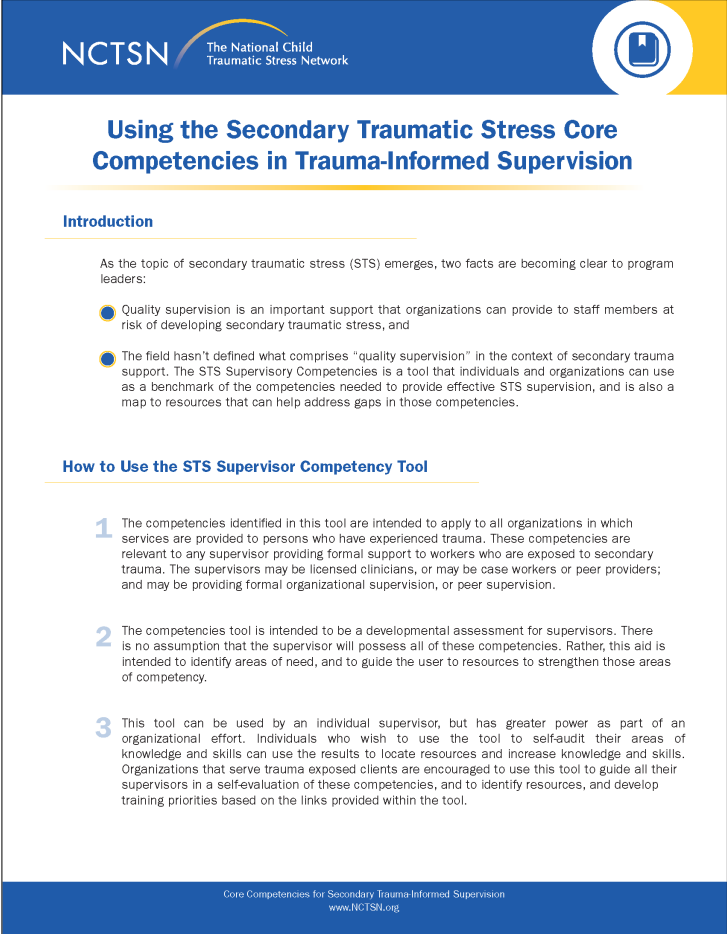
- Prioritize staff input and transparency in agency decision-making processes.
- Ensure that policies and procedures reflect staff's values and enhance safety.
- Allocate resources for STS training and other professional development.
- Ensure that staff at all levels of the agency have access to supportive supervision, peer support, and/or consultation.
- Train supervisors in how to create safer spaces for their teams/supervisees, including reflective supervision and cultural humility.
- Ensure staff have information about Employee Assistance Program (EAP) and/or mental health referrals that are accessible and culturally relevant.
- Allocate adequate resources for translation and service provision in multiple languages.
- Create proactive plans for how to support staff during a crisis.
- Conduct organizational assessments, including STS and diversity, equity, and inclusion.

STS-Informed Practice for Leaders

- Acknowledge and respond to STS as an occupational hazard, not a weakness.
- Be aware that many staff have their own trauma histories and ongoing trauma exposure and bring their own experiences and worldviews into the work.
- Actively encourage and model self-care.
- Enhance and attend to physical and psychological safety of staff.
- Routinely attend to the risks and signs of STS.
- Refer STS-impacted staff to trained and culturally relevant mental health professionals.
- Consider offering flexibility, rebalancing of caseloads, and added supports to STS-impacted staff.
- Ask staff regularly to provide input on ways the organization can improve its policies and practices regarding and impacting STS, including experiences of racism, oppression, and disproportionality.

STS-Informed Practice for Supervisors

- **Be consistent:** Offer a reliable schedule where time is protected from interruptions.
- **Be reflective:** Provide opportunities for providers to reflect and explore the impact of trauma work, as well as issues related to equity, power imbalance, and oppression.
- **Be collaborative:** Share responsibility and control of power.
- **Be self-aware:** Monitor your own STS and take steps as needed toward your own wellness and balance.
- **Be responsive:** Offer additional supervision during times of high risk for STS.
- **Be an advocate:** Advocate for setting aside time for staff to reflect and prioritize their own wellness.



The screenshot shows a document header with the NCTSN logo (The National Child Traumatic Stress Network) and a circular icon containing a book. The title is "Using the Secondary Traumatic Stress Core Competencies in Trauma-Informed Supervision". Below the title is an "Introduction" section with a sub-header "Introduction". The text states: "As the topic of secondary traumatic stress (STS) emerges, two facts are becoming clear to program leaders:" followed by two bullet points. The first bullet point states: "Quality supervision is an important support that organizations can provide to staff members at risk of developing secondary traumatic stress, and". The second bullet point states: "The field hasn't defined what comprises 'quality supervision' in the context of secondary trauma support. The STS Supervisory Competencies is a tool that individuals and organizations can use as a benchmark of the competencies needed to provide effective STS supervision, and is also a map to resources that can help address gaps in those competencies." Below this is a section titled "How to Use the STS Supervisor Competency Tool" with three numbered points. Point 1: "The competencies identified in this tool are intended to apply to all organizations in which services are provided to persons who have experienced trauma. These competencies are relevant to any supervisor providing formal support to workers who are exposed to secondary trauma. The supervisors may be licensed clinicians, or may be case workers or peer providers; and may be providing formal organizational supervision, or peer supervision." Point 2: "The competencies tool is intended to be a developmental assessment for supervisors. There is no assumption that the supervisor will possess all of these competencies. Rather, this aid is intended to identify areas of need, and to guide the user to resources to strengthen those areas of competency." Point 3: "This tool can be used by an individual supervisor, but has greater power as part of an organizational effort. Individuals who wish to use the tool to self-audit their areas of knowledge and skills can use the results to locate resources and increase knowledge and skills. Organizations that serve trauma exposed clients are encouraged to use this tool to guide all their supervisors in a self-evaluation of these competencies, and to identify resources, and develop training priorities based on the links provided within the tool." At the bottom of the document, it says "Core Competencies for Secondary Trauma-Informed Supervision" and "www.NCTSN.org".

Reflective Supervision

- An important resilience-building and relationship-based practice
- Our work with children and families can take a toll on staff, personally and professionally. It changes us over time.
- Develop capacity to reflect about the impact of working with individuals who have experienced trauma.
 - Monitor changes in thoughts, feelings, worldview and expectations.
 - Recognize that service providers often have personal histories of adversity.
 - Recognize that structural inequities in service systems can compound these adversities.

Reflective Supervision: Guiding Questions for Supervisors

- How did you feel? What did you notice in yourself?
- Did you have any strong reactions during this interaction?
- How do you think *[other person in interaction]* was feeling? What was their perspective?
- What did you think was going to happen? Why do you think it did or didn't go as planned?
- What do you think was driving your stress reaction?
- Are there aspects of the interaction that remind you of your own experiences or history? How might this have influenced you?

Supervising STS-Impacted Staff

- Recognize signs of STS in staff
- Normalize STS responses
- Teach/model coping skills (e.g., emotional regulation, mindfulness, cognitive coping skills)
- Use reflective practice to help staff process their reactions and identify their STS-related needs
- Advocate for staff's identified needs to leadership
- Offer additional support (e.g., supervisory, peer)
- Refer to Employee Assistance Program (EAP) and/or suggest mental health treatment as needed



Alex's Supervisor: Kelly

- White 50-year-old supervisor at a human service agency
- Is a lesbian and has come out to only a few colleagues
- Was promoted to a supervisor role with little training
- Is impacted by STS through her own and supervisees' cases
- Feels responsible for the outcomes of her supervisee's cases and worries about many of her staff, especially Alex
- Is frustrated by unequal caseloads assigned to Alex but feels that she doesn't have the power to change it

What organizational stressors could be impacting Kelly?

What strategies could Kelly use to better support Alex?

What strategies could the organization use to better support both Kelly and Alex?



Strategies to Support Alex and Kelly

What strategies could Kelly use to better support Alex?

- Consistency
- Reflective supervision
- Collaboration
- Self-awareness
- Responsiveness to Alex's needs
- Advocacy

What strategies could the organization use to better support both Alex and Kelly?

- Organizational policies and practices
- Training and support for supervisors
- Assessment
- Peer support
- Organizational community-building



3

Individual STS

Trauma Stewardship

“...We are stewards not just of those who allow us into their lives, but of our own capacity to be helpful...”

Laura van Dernoot Lipsky



van Dernoot Lipsky, L. (2009). *Trauma Stewardship: An everyday guide to caring for self while caring for others*. San Francisco: Berrett-Koehler Publishers.

Risk Factors for Individuals

Gender

Dose of Exposure

Unresolved
Direct Trauma
Exposure

Level of Support

Fewer Years of
Experience

Sense of
Competence

Negative/Passive
Coping

Case Vignette: Toni

- 32-year-old woman who identifies as African American and who works at a child welfare agency in the county where she lives
- Was recently promoted to child welfare supervisor with minimal training
- Supervises a unit of front-line workers with high case loads
- Distressed by the numbers of Black youth in care
- Often provides consultation to co-workers with Black families on their caseloads
- Experiences microaggressions from co-workers and supervisees
- Members of Toni's extended family and community often express disapproval for her working for child welfare
- Toni is hesitant to talk about what she's experiencing, because she doesn't want to be perceived as difficult to work with

What risk factors may be impacting Toni's susceptibility to STS?

Which of these are organizational risk factors, and which of them are individual risk factors?



Individual Risk Factors Impacting Toni

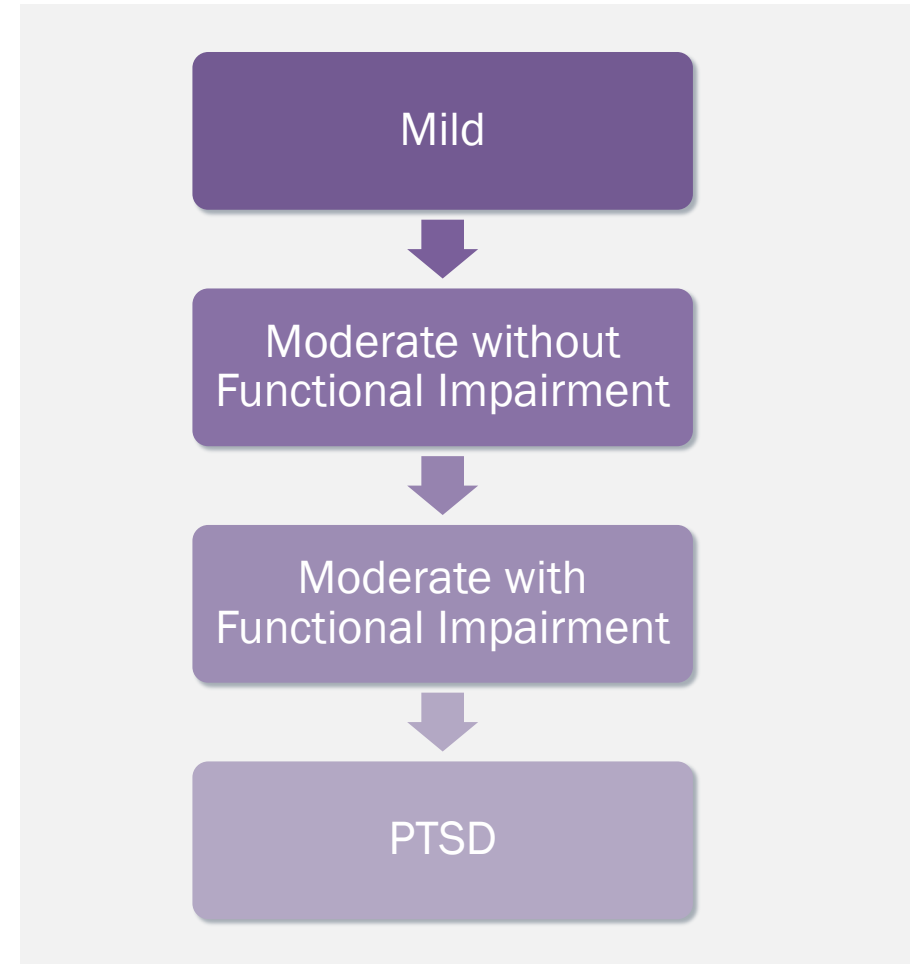
- Gender
- Dose of exposure
- Unresolved direct trauma exposure
- Support
- Fewer years of experience
- Sense of competence



STS Impact on Individuals

STS stems from indirect exposure to traumatic material that can result in Post Traumatic Stress Disorder (PTSD) symptoms in the provider.

- Intrusive, negative thoughts about work
- Negative expectations about self, others, and the future
- Increased arousal
- Sleep disturbance
- Internalizing distress/somatization
- Mood disturbance
- Feelings of hopelessness and inadequacy
- Withdrawing from relationships
- Avoidance



Case Vignette: Tobey

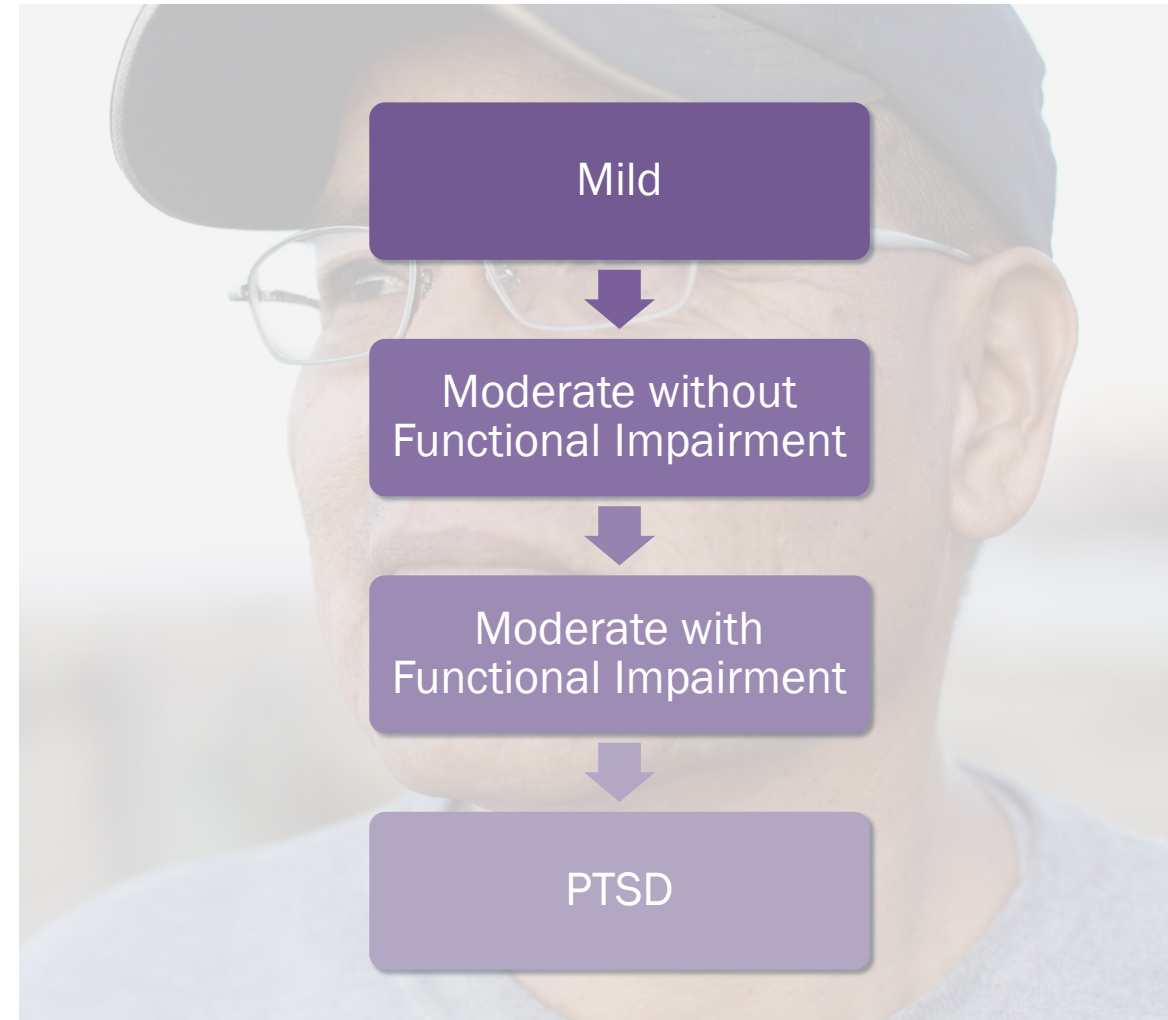
- 60-year-old Native American man
- Is a mental health provider in an Indian Health Service unit in community where he also lives
- Hears stories from clients about abuse, violence, and historical trauma, some of which are similar to his own experiences
- Is constantly exhausted but has trouble sleeping
- Has frequent headaches and back pain
- Thinks about clients even when he doesn't want to
- Has called in sick to work more often than is typical for him
- Feels depressed and stays in bed all day on the weekends
- Feels on edge around others so often avoids interaction

What impacts of STS could Tobey be experiencing?



STS Impact on Tobey

- Intrusive, negative thoughts
- Increased arousal
- Sleep disturbance
- Internalizing distress/somatization
- Mood disturbance
- Feelings of hopelessness and inadequacy
- Withdrawing from relationships
- Avoidance



Importance of Self Assessment and Self Awareness

Assessment tools:

- Secondary Traumatic Stress Scale
- Functional Impairment from Secondary Trauma Scale
- Professional Quality of Life-5
- Trauma and Attachment Beliefs Scale
- Impact of Events Scale – Revised
- Self-Care Assessment
- Elements of Wellness Wheel
- Personal Balance Wheel

Reflective Exercise

Consider how the information shared so far in this training leads you to reflect upon your own experiences.

- What are the most salient signs and symptoms of STS for you?
- What are your particular vulnerabilities or risk factors?
- How do you protect yourself while doing the challenging work that you do?
- What do you do at the end of a workday to put difficult client stories away before you go home?

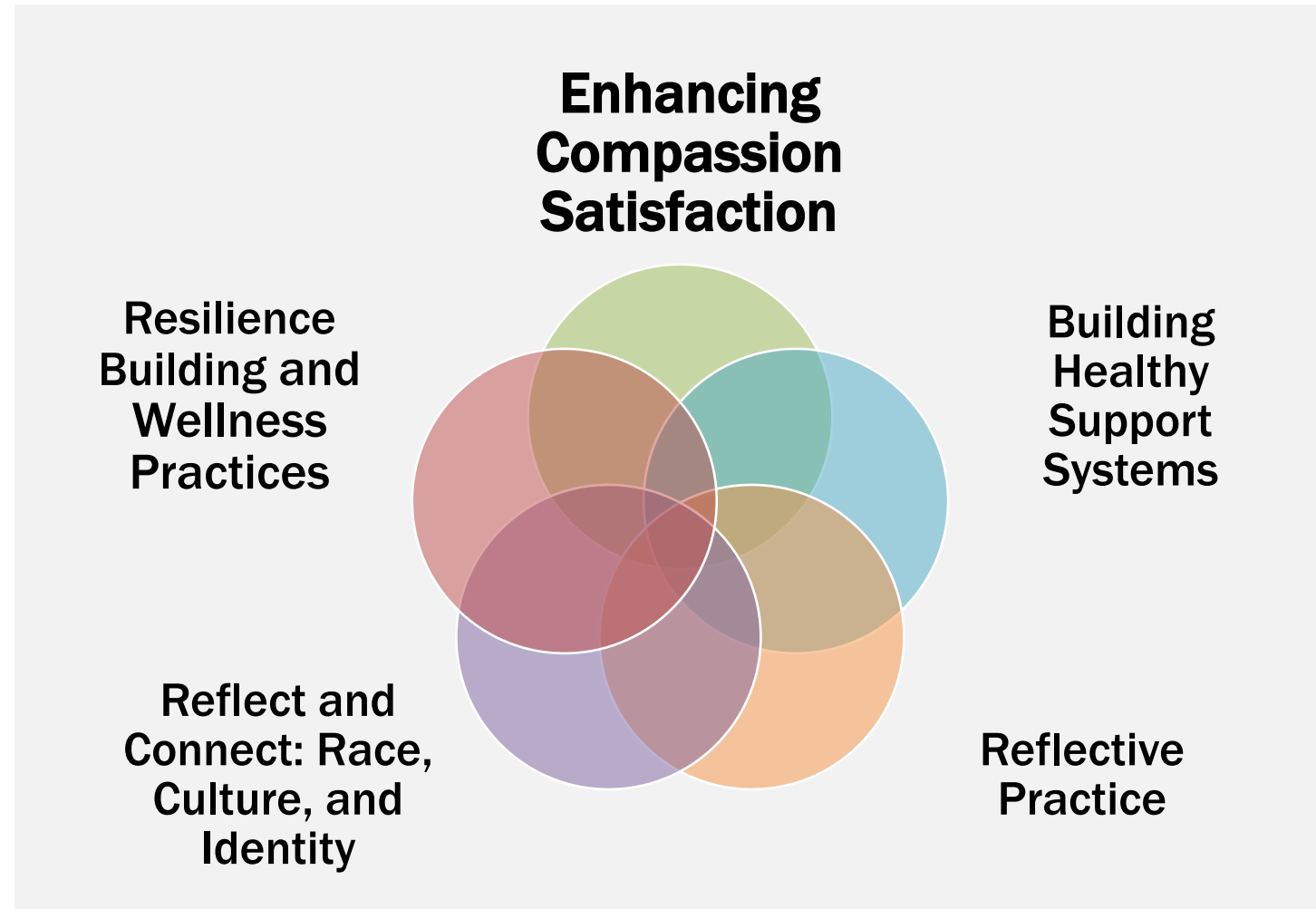
Recommended Strategies To Mitigate STS



Recommended Strategies To Mitigate STS

Enhancing Compassion Satisfaction

Enhance ways to reflect the positive feelings and rewards that come with the work, and the conviction that one's work makes a meaningful contribution to clients and society.



Activity: Remembering Your Whys

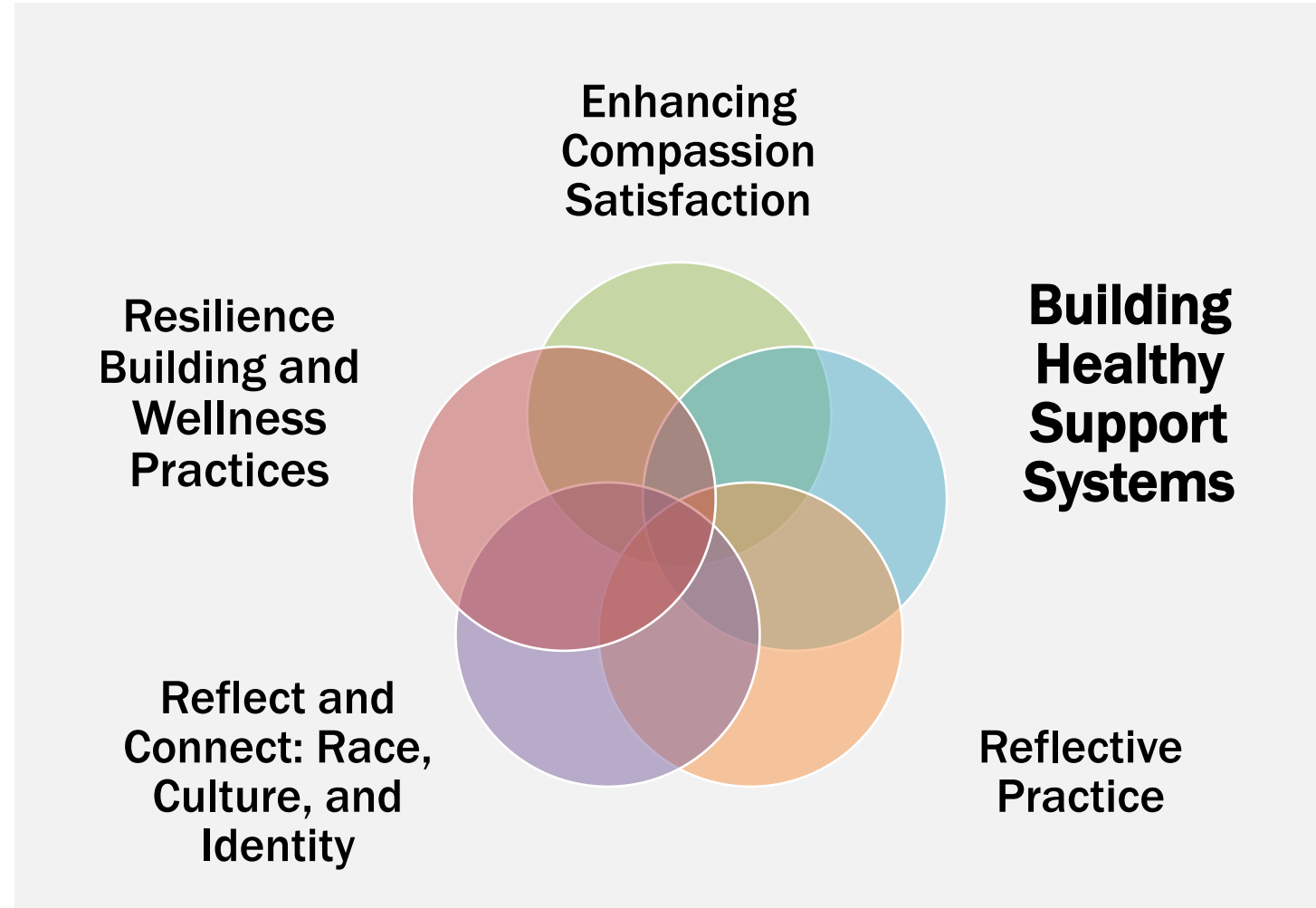
We all have bad days at work, but there are also moments that remind us why we do this work.

- Think about a rewarding moment at your job.
- What are 3 things that you love/enjoy about your job?
- Think about 5 people whose lives you've touched.
- Why did you take your current job?
- What are 3 compliments you have received from your co-workers, or 3 things you think you do well?

Recommended Strategies To Mitigate STS

Building Healthy Support Systems

Build healthy support systems in and outside of your workplace.



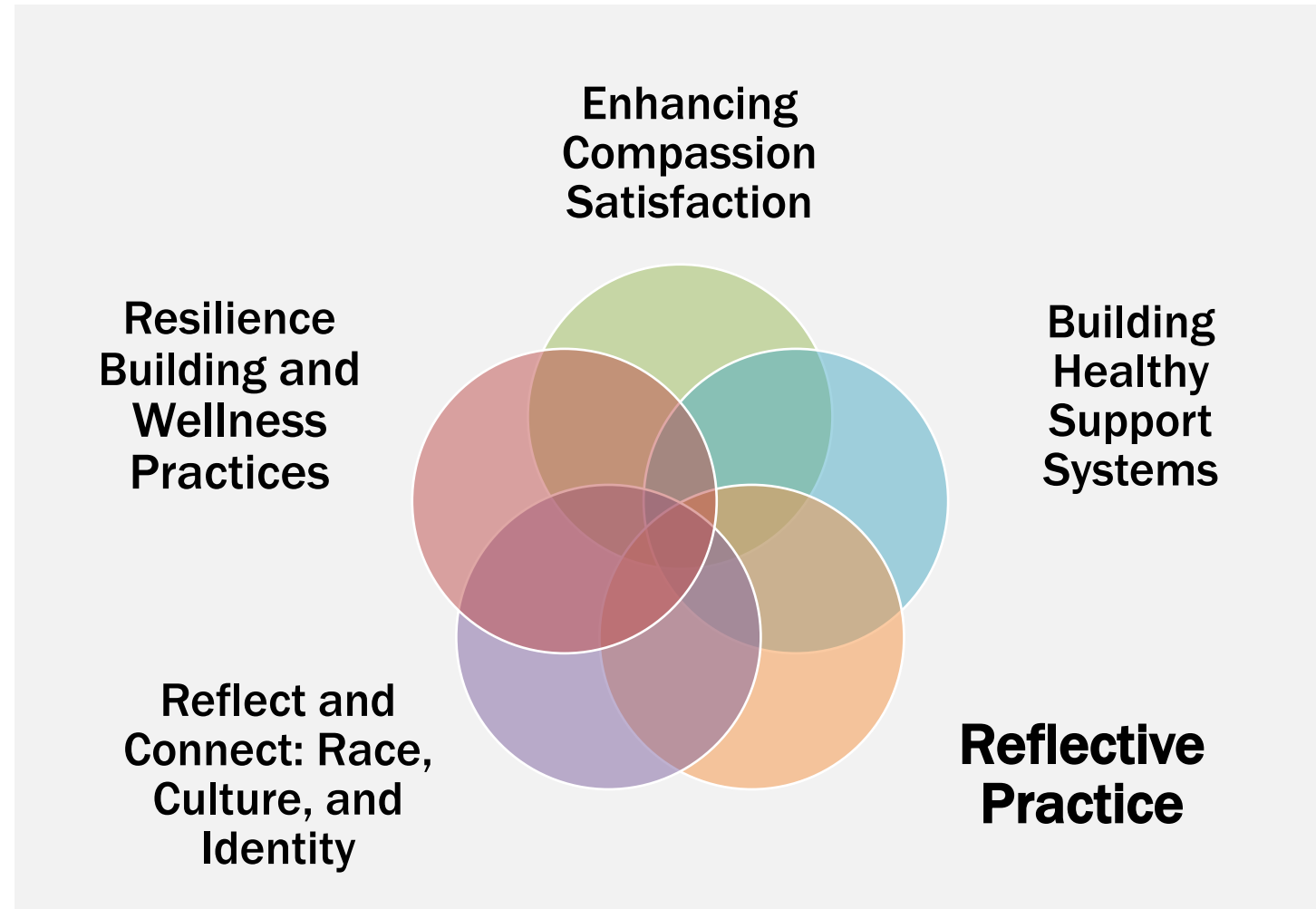
Example Activities for Building Workplace Supports

- Form or attend a process/consult group.
- Ask to take a walk and/or debrief with a co-worker.
- Leave a note of gratitude for a co-worker.
- Give a compliment or praise for a job well done.
- Share “moments of grace & goosebumps” with your team.
- Eat lunch together, go for a coffee/tea break, or bring snacks to a meeting.
- Tell a joke/funny story or show photos to a co-worker.

Recommended Strategies To Mitigate STS

Reflective Practice

Learn to pay attention to the types of events that trigger you or get you feeling unsafe, out of control, or alarmed.



Reflective Practice: Guiding Questions

- What are your most salient signs and symptoms of work distress? When are you most likely to notice these come up, and when could you take stock on a regular basis?
- What client encounters or histories/stories tend to bring up strong emotions and reactions in you? How might this connect to your own history, family norms, or personal vulnerabilities? How might this influence or change your interactions with clients/situations that tend to activate these “hot or soft spots” for you? What has helped you to respond effectively in the past?
- What emotions tend to be most difficult for you to feel during the work day (with clients or co-workers)? How might this relate to the way emotions were handled in your own family of origin (e.g., which emotions were “allowed” or not) or from other key influences?

Reflective Practice With Co-Workers: Low-Impact Processing

- Have conversations in private.
- Engage in Low-Impact Processing with co-workers when you feel stuck or ruminative.
 1. Self-Awareness
 2. Fair Warning
 3. Consent
 4. Limited Disclosure (avoid “**sliming**” your co-workers!)
- Refrain from one-upmanship when describing trauma or workplace stressor stories.

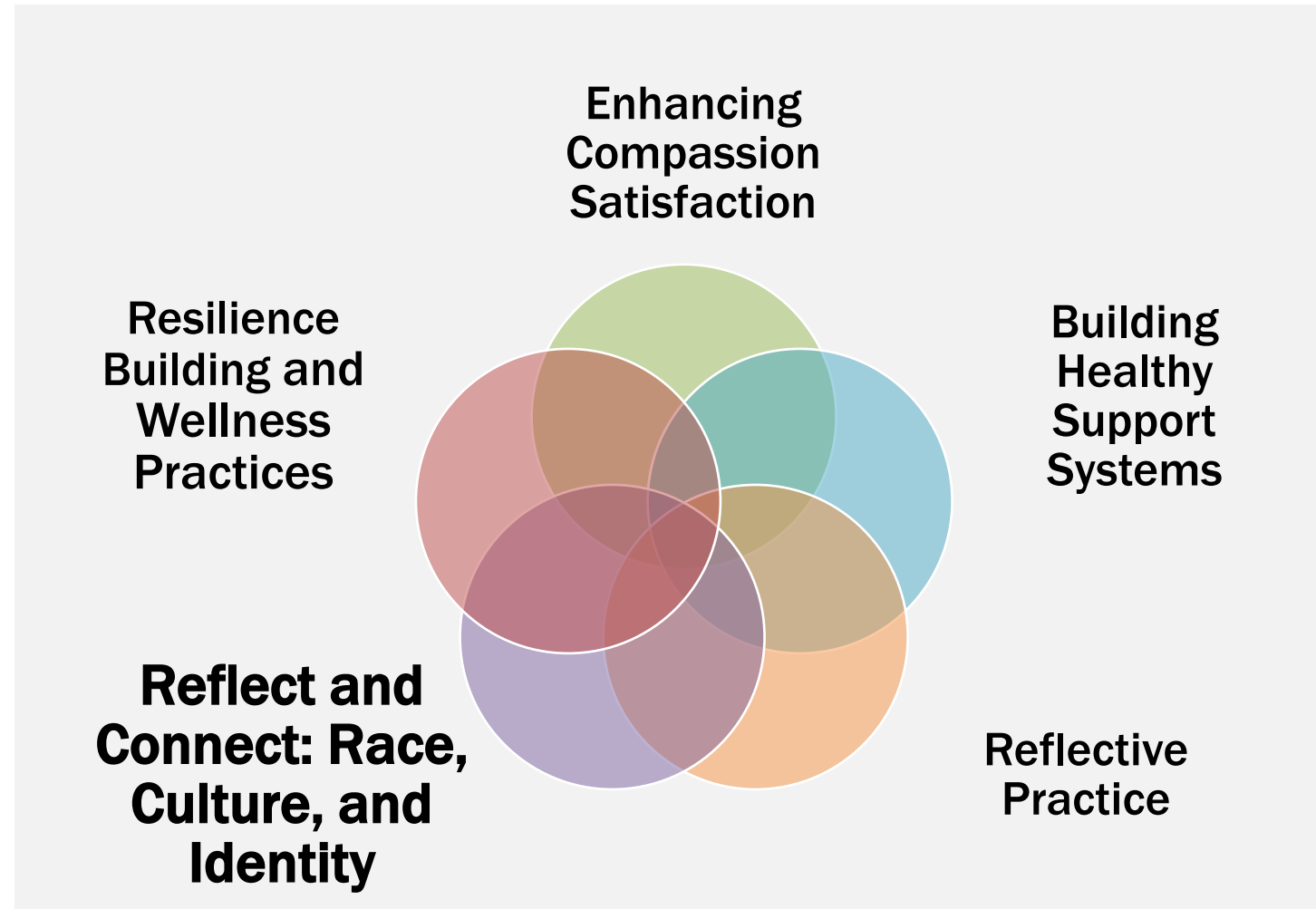
Mathieu, F. (2013). *Low-Impact Debriefing: Preventing Retraumatization*. Kingston, ON: Compassion Fatigue Solutions.
Can be accessed at: <http://www.tendacademy.ca/wp-content/uploads/2013/05/Short-LID-article.pdf>.



Recommended Strategies To Mitigate STS

Reflect and Connect: Race, Culture, and Identity

Take time to reflect and build mutual support around the ways in which your identities, cultures, race, and history may affect your responses to working with trauma-exposed individuals and communities.



Reflect: Culture, Race, and Identity



- **Consider your own identities. How do your identities influence...**
 - ...the way you see the world?
 - ...the way you see your work?
 - ...the way you understand the children and families with whom you work?
- **Check in with yourself...**
 - When you think about your work and your community, how do you feel?
 - How do factors related to your identities contribute to your resilience and/or your experience of STS?
 - Do you have someone to talk to about how you are feeling?

Connect: Culture, Race, and Identity

- Connect with others to build mutual support around how your identities, cultures, race, and history may affect your responses to your work.
 - Informal, supportive discussions with peers
 - Regular peer processing groups
 - Peer support and/or mentorship outside of your organization
- Seek out and participate in traditional, cultural, and community healing, ceremonies, and supports.
- Be honest and real about current injustices and challenges while also holding space for idealism, hope, and building change for future generations.



Recommended Strategies To Mitigate STS

Resilience Building and Wellness Practices

Resilience building practices include stress reduction and calming, regulating, enjoyable activities that motivate you and help you to center yourself.

Wellness practices include activities that help you to get the proper rest, nutrition, and exercise you need to feel your best.

Resilience Building and Wellness Practices

Enhancing Compassion Satisfaction

Building Healthy Support Systems

**Reflect and Connect:
Race, Culture, and Identity**

Reflective Practice



Activity: WTF Protocol - “Walk, Talk, Flush” It Out!



- How do the different elements of the WTF protocol fit into your workday?
- How might you super charge it by selecting a co-worker to engage in some of the elements at the same time?

Tikasz, D., adapted from Fisher, P. (2012). Hot Walk and Talk Protocol.
<https://www.tendacademy.ca/hot-walk-and-talk-protocol/>

Pause-Reset-Nourish (PRN) Framework

- **Pause:** Conscious breathing practices
 - Take 3 deep breaths, 4-7-8 breathing
- **Reset:** Relaxation activities
 - Meditation, mindfulness, mindful movement (e.g., yoga, tai chi, martial arts), hiking, biking, birdwatching, other outdoor activities
- **Nourish:** Ways to replenish and feed Mind-Body-Heart-Soul
 - Laughing, singing or chanting, dancing, other ways of being playful or light-hearted, engaging in meaningful cultural practices or rituals
 - Connecting with a loved one or a beloved pet

<https://www.nctsn.org/resources/prn-to-promote-wellbeing-as-needed-to-care-for-your-wellness>

Activity: Finding the Time for Workplace Wellness

If you have:

2 minutes

Smile
Sit quietly, relax
Breathe deeply
Stretch
Thank someone
Tell a joke to a co-worker
Have a 2-minute dance party

10 minutes

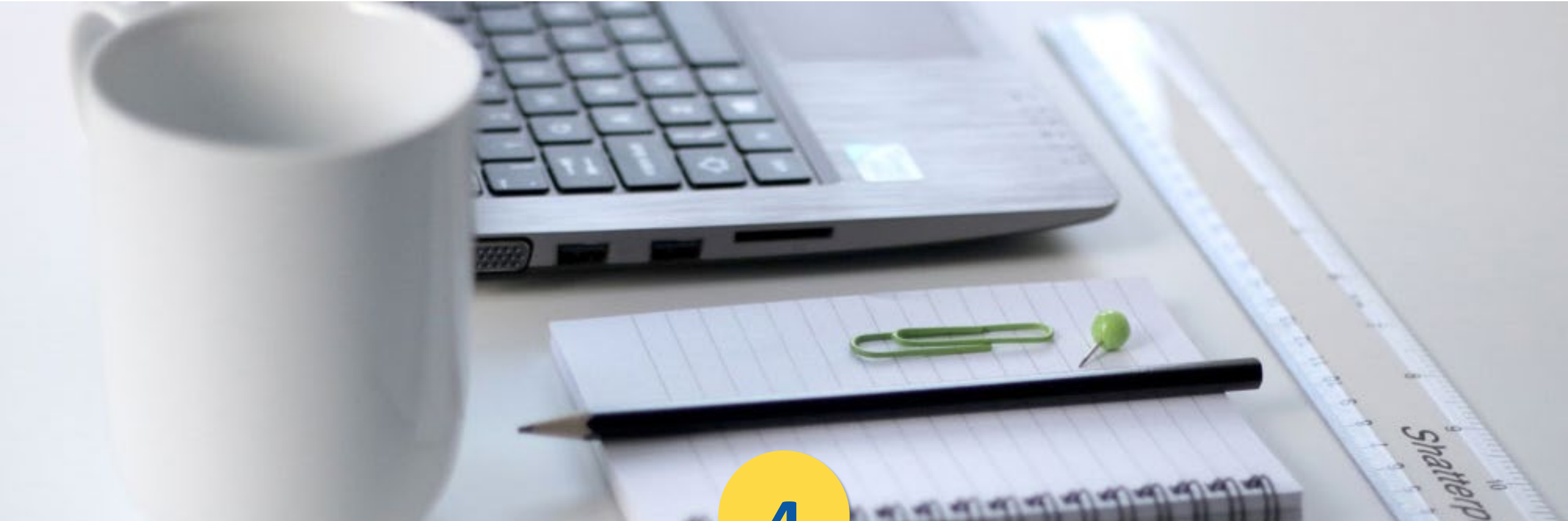
Plan a party to celebrate an accomplishment or milestone
Write down your thoughts
Clean up your locker/workspace
Do a wellness activity with your co-worker(s)
Sit outside, take in 5 senses

5 minutes

Get coffee, tea, or water
Have a snack
Have a conversation with someone who you don't usually talk to at work
Do a mindfulness practice
Listen to music
Tell a story to a co-worker

30 minutes

Eat lunch with your co-worker
Take a walk outside
Mindful movement
Assess your wellness plan
Debrief with a co-worker about something stressful
Complete a task that has been nagging at you



4

Resources

NCTSN Resources

- **NCTSN STS Fact Sheets**
 - For Child-Serving Professionals
 - For Community Violence Workers
 - For CAC Workers
 - Guidance for Supervisors and Administrators
- **STS Supervisor Competencies**
 - Supervisory Competencies
 - Supervisor Self-Rating Tool

All resources can be accessed at:

<https://www.nctsn.org/trauma-informed-care/secondary-traumatic-stress>

NCTSN Webinars

- **Secondary Traumatic Stress Series:**
 - https://www.nctsn.org/resources/secondary-traumatic-stress?utm_source=spotlight&utm_medium=email&utm_campaign=nctsn-spotlight
- **Cultural Implications of Secondary Traumatic Stress:**
 - English: <https://learn.nctsn.org/enrol/index.php?id=234>
 - Spanish: <https://learn.nctsn.org/course/view.php?id=233>
- **Trauma-Informed Care: Understanding and Addressing the Needs of Unaccompanied Children. NCTSN 4-Part Webinar series, Part 4 on STS:**
 - English: <http://bit.ly/unaccompanied-children-english>
 - Spanish: <http://bit.ly/unaccompanied-children-spanish>
- **Emotional Challenges and Self-Care for Those Working with Young Traumatized Children:**
 - <https://www.nctsn.org/resources/emotional-challenges-and-self-care-those-working-young-traumatized-children>



Questions