

# Let's Be Honest

## Addressing workforce needs related to Burnout and Secondary Traumatic Stress



Steve Schmid – MS, LPC, NCC, CCTP-II, CIMHP



# Learning Objectives

## Participants Will:

- ❖ Understand Burnout and Secondary Traumatic Stress, and how these effect staff, teams, and the organization.
- ❖ Explore the causes of Burnout and Secondary Traumatic Stress in congregate care settings
- ❖ Explore prevention, and reducing the effects of Burnout and Secondary Traumatic Stress
- ❖ Examine practices Lad Lake has utilized to address staff wellness, and data points from progress.
- ❖ Discuss practical strategies to implement in your daily work life.



# ▀ The foundation we need to stand on...

- Healthy Relationships
- Integrity
- Belief that excellence is possible for all.....and looks different for all
- Living our values and mission
- Belief in what we are implementing
- All employees need to feel; Safe, Valued, Competent





# Burnout

The World Health Organization (2019) states, “Burn-out is a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed. It is characterized by three dimensions:

- feelings of energy depletion or exhaustion;
- increased mental distance from one’s job, or feelings of negativism or cynicism related to one's job; and
- reduced professional efficacy.

Burn-out refers specifically to phenomena in the occupational context and should not be applied to describe experiences in other areas of life.”

Chronic interpersonal stressors on the job. Extreme and unrelenting pressures or stress at work.

Burnout results from long term non-supportive work environments. Burnout is different from STS in that exposure, or witness, to clients’ trauma is not the precipitating factor (Siegfried, 2008).

## Burnout – What does it look like and lead to?

- Emotional exhaustion
- Depersonalization/Detachment
  - Lack of a sense of personal accomplishment
    - Feelings of cynicism
  - Sense of ineffectiveness
- Can lead to negative physical and mental health outcomes; coronary artery disease, hypertension, sleep disturbances, depression, and anxiety, increased alcohol and drug use.



## ▀ Secondary Traumatic Stress (STS)

STS “refers to a set of psychological symptoms that mimic post-traumatic stress disorder, but is acquired through exposure to persons suffering the effects of trauma.” (Baird, 2006)

STS refers to experiencing a trauma response even though you didn’t experience the trauma directly yourself.

“Enduring conditions of secondhand trauma are defined by chronic exposure and accumulation of strain over time.” (Rauvola, Vega, Lavigne, 2019)

Secondary Traumatic Stress Disorder is “the natural consequent behaviors resulting from knowledge about a traumatizing event experienced by a significant other. It is the stress resulting from helping or wanting to help a traumatized or suffering person.” (Figley, 1995).



## ▀ Secondary Traumatic Stress – What does it look like?

### Cognitive

- Negative bias; Pessimism
- Black/White; All-or-nothing thinking
- Loss of critical thinking skills
- Threat focus – see clients, peers, supervisor as enemy
- Decreased self-monitoring
- Intrusive thoughts

### Social

- Isolation; Withdrawal
- Loss of/difficulty trusting
- Worry about getting close
- Avoidance
- Reduction in collaboration
- Loss of social support

## ▀ Secondary Traumatic Stress – What does it look like?

### Emotional

- Helplessness; Hopelessness
- Feeling overwhelmed
- Anxiety; Depression
- Anger/Irritability
- Numbness
- Safety concerns
- Hypervigilance
- Perfectionism

### Physical

- Head aches
- Tense muscles
- Fatigue/sleep difficulties
- Stomach problems/nausea
- Feeling jittery
- Frequent illness



# The Burnout and STS relationship

Extreme and unrelenting pressures or stress at work.



Stress resulting from helping or wanting to help a traumatized or suffering person.

# Congregate Care Relationship

## Burnout

Remember! "...long term non-supportive work environments."

- Staff attrition/turnover
- Unsupportive direct supervisor/team
- Invalidating environment
- Overtime
- Youth needs not being addressed or perception of
- Not seeing the fruits of their labor

## Secondary Traumatic Stress

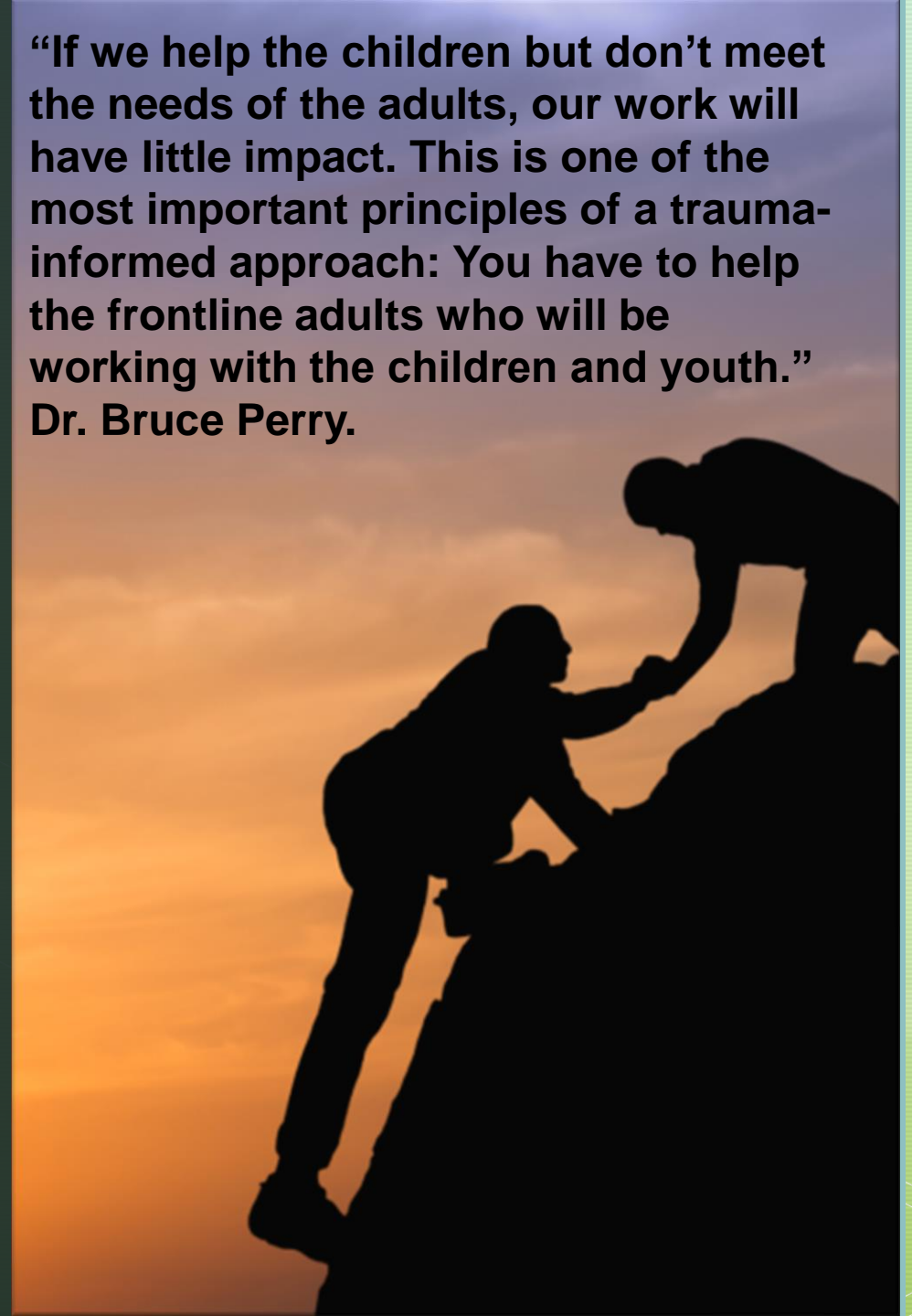
Remember! "...chronic exposure and accumulation of strain over time."

- Hearing stories of trauma. Witnessing traumatic incidents. Reading case files with graphic detail of trauma. (Curiosity killed the cat).
- Providing direct care to clients who have experienced and are still experiencing trauma, live with mental health needs, and are in crisis.

## Why does addressing Burnout and Secondary Traumatic Stress matter?

As organizations, system partners, and advocates, why should we invest time, effort, and resources on something we know is bound to happen?

**“If we help the children but don’t meet the needs of the adults, our work will have little impact. This is one of the most important principles of a trauma-informed approach: You have to help the frontline adults who will be working with the children and youth.”**  
**Dr. Bruce Perry.**





# Organizational and Systemic Implications



- Apathetic work culture
- Turnover; absenteeism
- Higher use of overtime; Risk of injury
- Increased demands = ???
- Higher health care costs from overuse of services and chronic health conditions
- Leaving the professional field!
- Clients not receiving excellent services and care
- Loss of contracts and ability to serve community



## Specific Programming & Initiatives

- EQ2; Risking Connections; Collaborative Problem Solving
- Celebrations Committee; Wellness Committee
- High levels of collaboration (cross-functional teams)
- Growth & Support Team
- SSIT debriefing – Psych Safety
- Assessment: *Indicators of a Trauma Informed Environment*
- Commitment to TIC; DEI; Restorative practices
- Leadership – Visible, Engaged, Available



## ➤ Impact of Lad Lake's efforts to increase employee well-being

- Decreased vacancy rate
- Increased employee job satisfaction
- Increase in employees feeling accepted/included
- Increased committee engagement
- Increased understanding of TIC
- Healing through sense of community
- Increased healthy relationships
- Workplace culture supporting asking for help





# When I go back to work, what can I do?

## Supervisor

- Know the warning signs
- Recognition of work
- Promote and champion renewal/rest
- Build Community (Psych Safety)
- Modeling
- Coaching; Attunement and Empathy
- Be present and available
- Start a committee
- Live your values & mission
- Understand 'support'

## Individual

- Self Care
- Advocate for yourself
- Set boundaries
- Seek out connection
- Limit contact with stressors
- Understand your contributors: Triggers, Personal history, specific population
- No savior complexes
- Rest and slow/rhythmic movement
- EAP or psychotherapy
- Use your vacation time!

## Citations



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