Screening and Training Crisis Hotline Specialists

The Importance of Self-Awareness
Screening Applicants

Qualities We Are Looking For

- Compassion
- Empathy
- Tolerance
Screening Applicants
Skills We Are Looking For

- Identification and labeling of emotions
- Ability to put aside personal bias
- Trainability
### Screening Applicants

**Interview Scenarios**

#### Topics
- Domestic Violence
- GLBTQ
- Abortion
- Self-injury

#### Questions
- What is your first reaction?
- What is the first thing you would want to say?
- What emotions do you think the caller might be experiencing?
Applicants are scored on:

- Motivation
- Emotional Aptitude and Communication
- Judgement/Bias
- Reliability and Commitment
- Red Flags
Everyone is right...at least partially...at least sometimes

Replace judgment with curiosity

Instead of “yes, BUT...” try to think “yes, AND...”

Everyone has a right to their feelings

Trust your trainers and try to take risks
• Getting to know myself
• Getting to know each other
• Getting to know our callers
• Learning how to be a phone worker
Stereotyping Exercise

- Brainstorm categories of people they expect to talk to
- Choose a few and put on posters around the room
- Have trainees write qualities they associate with each group. (positive and/or negative)
- Discuss
Senior Citizens

- Useless
- Wiseful
- Waste of space
- Bad drivers
- Can’t learn anything new
- So cute!
Training

Thinking About Privilege

- Experiencing Bias
- Write about a personal experience
- Similar Feelings Exercise
- The Privilege Walk
Training

Putting Ourselves in the Caller’s Shoes

- Hot Topics
- Problem Solving Exercise
Putting Ourselves in the Caller’s Shoes

➢ The Secret Telling

- When I was little my uncle used to get in bed with me...
- My dad is an alcoholic and lives on the street. Sometimes I see him begging...
- Sometimes I cut myself to let out the pain
- I am a sex worker, but none of my friends or family know
• Mentors
• Observing trainees
• Feel all the feelings!
Contact me for more info!

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Vicarious Trauma

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Agenda

- What is Vicarious Trauma
- Similar terms: burnout, secondary traumatic stress and compassion fatigue
- Impact
- Signs/Symptoms to look for within ourselves, equally important to look for in our team/staff
- Strategies to use at each level of practice Macro, Mezzo and Micro
- Charge up with the ABC’s of Self Care (It’s ok If you start singing Michael Jackson)
- References
What is Vicarious Trauma?

- The term **Vicarious Trauma (VT)** is used to describe the emotional and psychological risks associated with providing direct/indirect services to vulnerable populations such as survivors of rape, sexual abuse, domestic violence, refuges, and war. (Perlman and Saakvitne, 1995)

- Perlman and Saakvitnes, gave the following definition for VT “a process of cognitive changes (schema) resulting from **chronic** empathic engagement with trauma survivors”

- Cognitive shift/schema: is an alteration in the beliefs and thoughts of the health care professional with regard to sense of self, safety, trust, control, and spiritual beliefs. They loose the confidence that good is still possible in the word or at home. (Bell, H., Kulkarni, S., & Dalton, L. 2003).
According to the American Counseling Association (ACA) burnout is something that **happens over time** and it can happen at any job. Not exclusive to working with vulnerable populations or exposure to trauma narratives.

Typically not acute and it is suggested that burnout can be resolved by taking time off, a new or different job.

It’s conceptualized as three distinct characteristics:

- **Emotional exhaustion**: emotional resources are depleted
- **Depersonalization**: cynical, negative or excessively detached responses to coworkers or clients
- **Reduced sense of personal accomplishment**: feelings of inadequacy.

Burnout is the extreme end of compassion fatigue because CF or VT has happened over a long period of time.
Similar terms: Compassion Fatigue and Secondary Traumatic Stress

- **Secondary Traumatic Stress (STS)** would probably be the most closely related term to vicarious trauma.

- Researchers have identified the distinction as **vicarious trauma** is the **intrinsic cognitive changes (Cognitive Schemas)** whereas **Secondary Traumatic Stress** is the **outward behavior symptoms** such as PTSD symptoms. Nightmares, chronic irritability, angry outbursts, fatigue, difficult concentrating, avoidance of clients and startle reactions.

- **Compassion Fatigue** when the helper begin to lose the ability to feel empathy, or feel like they have nothing left to give.

- compassion fatigue and Vicarious Trauma can lead to burnout.
Impact

- Studies have shown "approximately 38% of social workers experience moderate to high levels of secondary traumatic stress" (Bell, H., Kulkarni, S., & Dalton, L. 2003).

- Other direct service workers or health care professionals such as emergency workers, police officers, sexual assault counselors, child protective workers and trauma therapist have reported developing PTSD symptomology as a result of their exposure to trauma narratives. (Bell, H., Kulkarni, S., & Dalton, L. 2003).

- In 1995, 148 counselors were surveyed of which 60% reported significantly more vicarious trauma symptoms as a result of hearing the trauma stories of sexual violence survivors. (Bell, H., Kulkarni, S., & Dalton, L. 2003).

- Another report showed 82% of substance abuse workers reported high psychological stress, 33% emotional exhaustion and 36% diminished feelings of personal accomplishment. (Pierson, J)
Signs and Symptoms of Vicarious Trauma

- Having difficulty talking about their feelings
- Anger and or irritation
- Startled effect/being jumpy
- Over or under-eating
- Sleep hygiene interruptions; difficulty falling and staying asleep
- Worried that they are not doing enough for clients
- Dreaming about their client traumatic experience
- Diminished joy, satisfaction and personal accomplishment
- Intrusive thoughts of client(s), especially trauma histories
- Feelings of hopelessness associated with their work with clients
Additional signs and symptoms

- Staff conflict
- Poor communication and impatience
- Avoiding working directly with patience with a trauma history
- Change in relationship with colleagues, friends and family. They become more isolative and has difficulty maintaining rewarding relationships
- Increased errors and decreased quality with job duties
- Lack of flexibility
- Apathy, detached, lack of interest and ability to care
- Feeling disillusioned by humanity
- **Predictors**: staff who have experienced trauma, their need to heal others as a result of their own unprocessed trauma, through their own trauma posses a greater capacity for empathy and need to heal others.
Strategies

- **Macro:** Decreasing case loads, safe work environment, allowing a format where staff have input in designing policy/procedures that include self-care practices (i.e. sacred space for spiritual practices time allotted to use space), ensuring consequences and disciplinary actions are fair. At the collegial level: incorporating self-care techniques along with warnings and symptoms in their Macro classes (Human Behavior).

- **Mezzo:** workplace psychotherapy trainings and education (learn new concept in trauma), supervision, ensuring peer support, mix up job duties so that the entire shift is not dedicated to crisis/trauma work, supervisors regularly examine the behaviors of your staff, “Don’t leave the picture in the game too long”, Debriefings and Self-care plans.

- **Micro:** regularly self examination, keep a balance between empathy and a proper professional distance to clients, avoid being a workaholic, make time for leisure, family, spiritual practices, breathing/meditation, spiritual practices and mindfulness during break (after a draining meetings, lie down, close eyes and breathe deeply for a few minutes).

Research suggest that strategies such as the for mentioned ones have been effective in buffering the effects of VT (Finklestein, M., Stein, E., Greene, T., Bronstein, I., & Solomon, Z. 2013).
Ways to assess

- [http://proqol.org/uploads/ProQOL_5_English.pdf](http://proqol.org/uploads/ProQOL_5_English.pdf) Professional Quality of Life Scale
- [http://www.nctsnet.org/nctsn_assets/pdfs/measure/TABS.pdf](http://www.nctsnet.org/nctsn_assets/pdfs/measure/TABS.pdf) Trauma and Attachment Belief Scale
“If your compassion does not include yourself, it is incomplete”. Buddha

- Cellphone/ Self
- ABC’s of self care (Yes! sing the Michael Jackson song if it helps)
- Awareness of own needs, limits, emotions and resources
- Balance of work and play, taking care of others and taking care of yourself
- Connections to oneself, others and to something larger (Pierson, J)
References


*Vicarious Trauma: Fact Sheet #9*. American Counseling Association

Pierson, Judith E., Vicarious Trauma and Self Care