

## Access supports and resources

### Peer/whānau support:

It takes courage to acknowledge that you need to talk about what happened and how you are feeling about it, but it will help. Take the step to connect with other family members, with other parents, with colleagues or other social supports you have access to such as a sports buddy, church member, social group member, neighbour. Many workplaces also have peer support programmes.

### Access health professional support

Make time to have a chat to your GP and let them know what happened, access your workplace Employee Assistance Programme supports, your Kaitiaki supports, texting 1737, or accessing online support such as justathought.co.nz.

### Professional supervision

For professionals, one of the most effective strategies to reduce the impact of exposure to trauma is regular supervision with a suitably qualified professional. This provides a confidential space in which to reflect and to explore issues within the workplace and the impact that they may be having both professionally and personally.

### Organisational supports

Professionals involved in a workplace incident are encouraged to activate their professional organisational support, as well as liaising with their managers. Debriefing can be part of workplace support, but this needs to be done with professional facilitation making sure confidentiality, accessibility and a focus on processes rather than individual responses is undertaken.

### Trauma informed care

Workplaces are encouraged to provide time away from the event for those involved to compose themselves if needed. Trauma informed care principles such as: **safety, trustworthiness, choice, collaboration, empowerment** and to be transparent about any investigation processes related to critical incidents or complaints.

### Online critical incident support

Diana Austin's eBook; Critical Incidents - Support Tools for Health Professionals, published by AUT, provides excellent multimedia resources and support for health professionals who have experienced critical incidents in Aotearoa New Zealand.

### Helping a colleague; what your colleague needs you to do:

- acknowledge that it's okay to be upset
- ask how they are the next day, next week, next month
- still value them as a team member/leader
- be available to listen to their story
- offer to go with them to any meeting about the incident
- advise them of formal supports available if they remain distressed

Don't be silent, avoid them, dismiss the emotional impact, talk to others, provide false reassurances, or make judgments about anyone's actions.

**In a nutshell, vicarious trauma can cause us to NOT FEEL SAFE and to feel alone, with changes in our mental, emotional, spiritual, physical and relational wellbeing.**

### Talk to someone who:

**is kind and caring** - has good listening skills and can give perspective

**feels safe** and confidential

**has time** to connect - within two weeks of the event is best

**is non-judgmental** - provides a no blame, no shame space



### Helpful resources

'Critical Incidents -Support Tool for Health Professionals' by Diana Austin, published by AUT:

<https://indd.adobe.com/view/3d862db3-af27-4197-8bf4-825f46565ad1>

'Trauma Informed Approaches' by Te Pou:

[www.tepou.co.nz/initiatives/trauma-informed-care/181](http://www.tepou.co.nz/initiatives/trauma-informed-care/181)

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## Understanding vicarious trauma

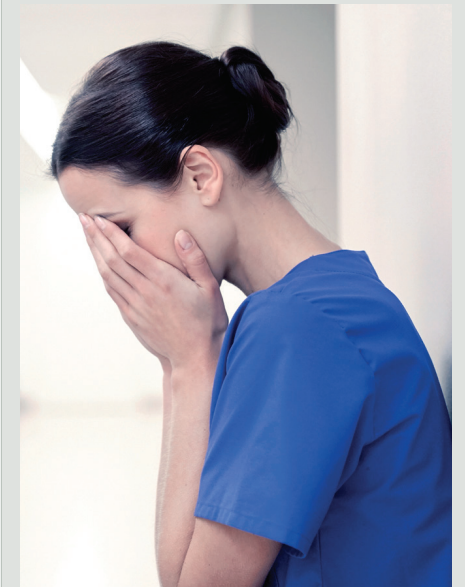
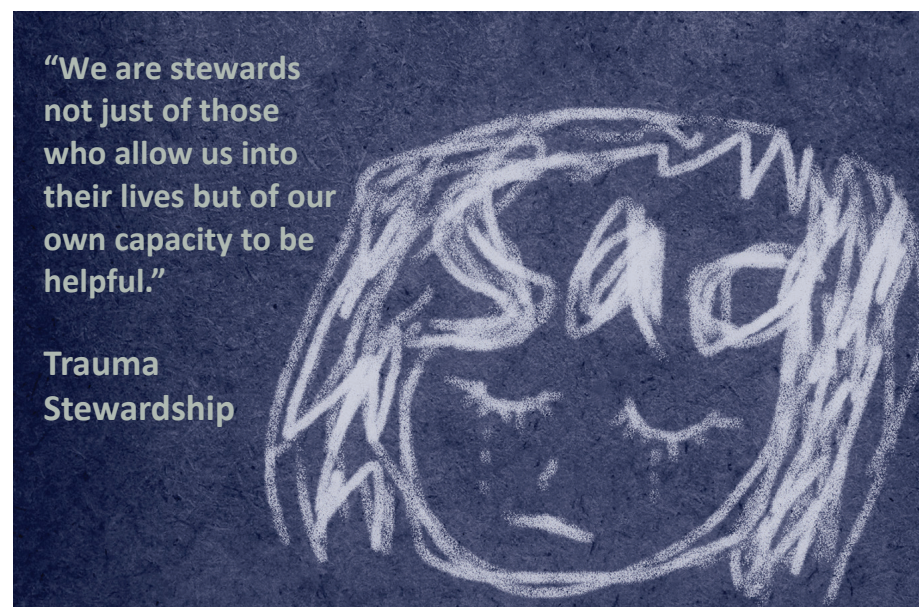
Vicarious trauma (VT) is a stress reaction that may be experienced by helping professionals, family members, friends or others involved in supporting those who have gone through a traumatic event.

Traumatic events that happen in pregnancy, birth and after having a baby can feel particularly impacting. We often expect having a baby will be a happy and celebratory time, so when traumatic events occur we can feel shocked, overwhelmed and unprepared. Witnessing trauma happening at these times can cause psychological, relational, emotional and spiritual disruptions in the way we see ourselves and the world.

**The effects of repeated exposure to trauma and human distress needs to be recognised and can be a significant contributor to long-term stress-related conditions such as post-traumatic distress, burnout and relationship breakdown.**

Trauma can be made worse by feeling alone and having insufficient supports or resources to process things in healthy ways. Often professionals and support people minimise the effects of being exposed to traumatic events. Some may believe that keeping an emotional distance or compartmentalising may protect them, while others may believe that their own needs are not important. Many believe they are somehow uncaring if they notice their own distress.

**The social stigma around admitting emotional distress, and concerns about confidentiality, can also be barriers to seeking help when symptoms of vicarious trauma occur.**



## PADA

Perinatal Anxiety and Depression Aotearoa is the national organisation committed to eliminating the stigma around perinatal mental health in Aotearoa New Zealand.

We do this by championing awareness and facilitating best practice in perinatal mental health and wellbeing to ensure all families/whānau have access to appropriate information and support.

This resource is freely available to assist in raising awareness of anxiety and depression in new parents.

Prepared in consultation with MindCare Counselling & Training Ltd

[www.mindcare.nz](http://www.mindcare.nz)



[www.pada.nz](http://www.pada.nz)



## What to look out for

The symptoms of vicarious trauma can be similar to those of PTSD (post traumatic stress disorder), acute stress disorder, burnout and compassion fatigue. It can affect anyone who has had personal or professional exposure to the traumatic experience of another.

MENTAL (cognitive) symptoms of vicarious trauma:

- Can't stop thinking about what you have seen/heard; feeling stuck on certain images
- Decreased concentration
- Flashbacks/nightmares
- Absent-mindedness
- Decreased problem solving
- Increased guilt regarding your own pleasure/survival
- Loss of confidence
- Feeling disconnected/numb/distanced/alone/withdrawn
- Avoidance of the situation/environment where it happened/talking about it
- Increased impulsivity
- Increased conflict in relationships

PHYSICAL (body) symptoms of vicarious trauma:

- Tiredness/fatigue
- Sleeplessness
- Inability to relax
- Sick/numb feeling causing changes in appetite
- Feeling on edge; increased irritation, agitation, reactivity
- Increased sensitivity to noise/movements
- Sexual difficulties

B.R.E.A.T.H.E. technique

- Breathe
- Reflect
- Empathise
- Accept
- Thank
- Hearten
- Engage

### B.R.E.A.T.H.E.

When we see something distressing, it activates the fight/flight response and our breathing becomes fast and shallow, which increases our anxiety and gives our emotions momentum.

Research shows that slow, steady, deep breathing activates the vagus nerve which comes from the brain and controls the parasympathetic nervous system, controlling the relaxation response.

A few deep breaths will help you feel calmer.



### Feel your body

When you're witnessing strong emotions in others, try to stay with yourself rather than getting caught up in their experience.

Feel your feet on the ground and wiggle your toes. Bend your knees slightly if you are standing, and feel the chair supporting you if you're sitting.

Be aware of body sensations and imagine yourself holding the sensations and emotions as they move through your body. And of course, keep the option open to physically remove yourself from situations that become too distressing.

[www.psychologytoday.com](http://www.psychologytoday.com)



## Factors that affect susceptibility to vicarious trauma

### Individual

previous history of trauma, personality type, sense of responsibility, level of perfectionism, ability to acknowledge own vulnerabilities

### Life situation

current circumstances, supports available, spiritual resources, work style



### Organisational / cultural

professional role, amount and frequency of traumatic exposure, level of agency support, culture of intolerance or acceptance of human error, how we express distress/receive help

## How to help yourself

**Talk to someone! Being part of a traumatic event is usually a shared experience, even if you feel alone**

Often people are worried they caused the traumatic event or contributed to it, fear the organisation or person/family blames you, or feel overwhelmed with emotions. Compartmentalising or 'boxing things off' is often used to manage the distress of being exposed to a traumatic incident, but over time this technique of suppressing emotions and reactions can take its toll in putting more stress on professional and personal wellbeing.

Too much empathy can be debilitating. When we become too distressed about the suffering of others, we don't have the cognitive and emotional resources available for ourselves or others.

**Take time out, get perspective, look after yourself. Caring needs boundaries.**

Too much empathy can be debilitating. When we become too distressed about the suffering of others, we don't have the cognitive and emotional resources available for ourselves or others. Having compassion, a cognitive understanding how they're feeling, is better for our own wellbeing and the wellbeing of those in need.

- Tara Well, PhD