



# Understanding burnout, vicarious trauma & secondary traumatic stress

Symptoms to look out for in staff working in the homelessness sector.

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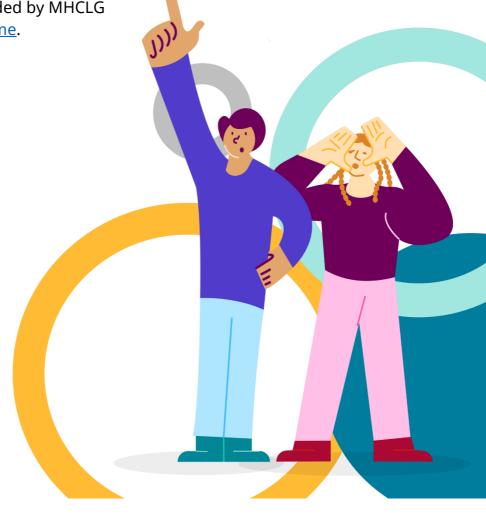
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# Introduction

Individuals working in the homelessness sector often face challenges in the workplace and can be exposed to both those who are traumatised and to traumatic situations.<sup>1</sup> Over time, this can lead to what is called vicarious trauma or secondary traumatic stress. These terms are often used interchangeably, with both being a type of indirect trauma experienced by an individual as a result of working closely with trauma survivors.

Burnout can occur in individuals as a result of chronic workplace stress that has not been successfully managed.<sup>2</sup> It can consist of multiple symptoms, both physical and psychological<sup>3</sup>, for example, an overwhelming sense of exhaustion; feeling unable to cope; and feeling emotionally detached and cynical.<sup>4</sup>

It is important for everyone working in frontline homelessness services to understand and recognise the symptoms of vicarious trauma, secondary traumatic stress, and burnout, to ensure those affected can be adequately supported. So often, it is accepted that working in the homelessness sector comes with a high level of stress and therefore symptoms go ignored and somewhat normalised.

This briefing will set out the key symptoms of burnout, vicarious trauma, and secondary traumatic stress to look out for, as well as guidance and resources on the support available.

<sup>&</sup>lt;sup>1</sup> https://link.springer.com/article/10.1007/s10597-018-00364-7

<sup>&</sup>lt;sup>2</sup> https://www.who.int/news/item/28-05-2019-burn-out-an-occupational-phenomenon-international-classification-of-diseases#:~:text=%E2%80%9CBurn%2Dout%20is%20a%20syndrome,related%20to%20one's%20job%3B%20and

³https://www.homelesshub.ca/sites/default/files/attachments/PTSD%20and%20Burnout%20in%20Edmonton%20February%202016.pdf

<sup>&</sup>lt;sup>4</sup> Maslach C., Schaufeli W., Leiter M. Job burnout. *Annual Review of Psychology*. 2001;**52**:397–422.

# **Burnout**

Burnout is a state of physical and emotional exhaustion. It can occur when you experience long-term stress in your job, or when you have worked in a physically or emotionally draining role for a long time.<sup>5</sup> In general, burnout is characterized by three dimensions: emotional exhaustion, depersonalisation, and diminished feelings of personal accomplishment.<sup>6</sup>

Emotional exhaustion includes feeling like your physical and emotional resources are depleted<sup>7</sup> as well as extreme fatigue/insomnia. Depersonalisation, in this context, describes when individuals start to become more distant from their work, which can involve developing detached attitudes and feelings towards work and service users.<sup>8</sup> Diminished feelings of personal accomplishment is when individuals feel that they no longer have a meaningful role in helping others.<sup>9</sup>

Burnout can ultimately lead to a high turnover of staff in organisations, putting pressure on other members of staff, resulting in increased absenteeism, low morale, inefficiency, and increased number of sick days taken.<sup>10</sup>

<sup>&</sup>lt;sup>5</sup> https://mentalhealth-uk.org/burnout/

<sup>&</sup>lt;sup>6</sup> Baker, L. M., O'Brien, K. M., & Salahuddin, N. M. (2007). Are shelter workers burned out?: An examination of stress, social support, and coping. Journal of Family Violence, 22(6), 465-474.

<sup>&</sup>lt;sup>7</sup>https://www.homelesshub.ca/sites/default/files/attachments/PTSD%20and%20Burnout%20in%20Edmonton%20Febru ary%202016.pdf

<sup>&</sup>lt;sup>8</sup>https://www.homelesshub.ca/sites/default/files/attachments/PTSD%20and%20Burnout%20in%20Edmonton%20Febru ary%202016.pdf

<sup>&</sup>lt;sup>9</sup> Demerouti, E., Karina Mostert, K., & Bakker, A. (2010). Burnout and work engagement: A thorough investigation of the independency of both constructs. Journal of Occupational Health Psychology, 15(3), 209-222.

<sup>&</sup>lt;sup>10</sup> Wright, T. A., & Cropanzano, R. (1998). Emotional exhaustion as a predictor of job performance and voluntary turnover. Journal of Applied Psychology, 83(3), 486.

# **Common symptoms of burnout**

Fatigue & Insomnia

**Frustration & Anger** 





Feeling helpless, trapped and/or defeated

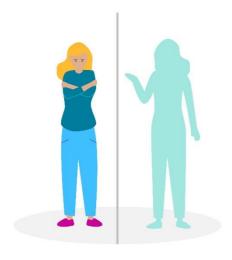
Diminished feelings of personal accomplishment & self-doubt





Depersonalisation (feeling detached/alone)

Procrastinating & taking longer to do things





Having a cynical/negative outlook

Feeling overwhelmed





# Vicarious trauma & Secondary Traumatic Stress (STS)

Vicarious trauma and Secondary Traumatic Stress (STS) are terms that are often used interchangeably to refer to indirect trauma that can occur when someone is exposed to difficult or disturbing images and stories second-hand.<sup>11</sup>

The term 'vicarious traumatisation' was coined by Pearlman & Saakvitne (1995)<sup>12</sup> to describe the shift in world view which can occur in professionals when they work with individuals who have experienced trauma.<sup>13</sup> It is the process of change resulting from empathetic engagement with trauma survivors.<sup>14</sup> Vicarious trauma is more about the cognitive shift that happens in individuals, for example, changes in their world views and how they think about themselves and others, after repeated prolonged exposure to other people's suffering. For example, individuals working with survivors of domestic violence may start to find it difficult to feel safe in intimate relationships and may lose trust in their partners.

Secondary Traumatic Stress (STS) is a set of observable reactions to working with people who have been traumatised and mirrors the symptoms of post-traumatic stress disorder (PTSD).<sup>15</sup> STS can occur after an individual has heard someone's experience of trauma even just one time, whereas vicarious trauma is a shift which happens in an individual after frequent exposure.

<sup>11</sup> https://www.tendacademy.ca/resources-2/defining-vicarious-trauma-and-secondary-traumatic-stress/

<sup>&</sup>lt;sup>12</sup> Pearlman, L. A., & Saakvitne, K. W. (1995). *Trauma and the therapist: Countertransference and vicarious traumatization in psychotherapy with incest survivors.* W. W. Norton & Company.

<sup>&</sup>lt;sup>13</sup> https://www.tendacademy.ca/resources-2/defining-vicarious-trauma-and-secondary-traumatic-stress/

<sup>&</sup>lt;sup>14</sup> https://www.bma.org.uk/advice-and-support/your-wellbeing/vicarious-trauma/vicarious-trauma-signs-and-strategies-for-coping

<sup>&</sup>lt;sup>15</sup> Osofsky, J.D., Putnam, F.W., & Lederman, C. (2008). How to maintain emotional health when working with trauma. *Juvenile and Family Court Journal*, *59* (4), 91-102.

# Common symptoms of vicarious trauma & STS

A change in word view and in your beliefs about yourself, other people, and the world (specifically for vicarious trauma)

Experiencing nightmares, flashbacks and/or intrusive thoughts





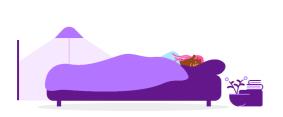
Hypervigilance & difficulty concentrating

Difficulties in relaxing & falling asleep





In addition, symptoms attributed to burnout could also be an indication that someone is experiencing vicarious trauma or secondary traumatic stress.

















# **Staff Support & Resources.**

### **Reflective Practice**

Reflective practice describes an individual or team taking time to think about their role, including what is going well, what is difficult, how they are feeling, and how they make others feel. Embedding reflective practice into homelessness organisations is essential to enable individuals to take a step back from their work and make sense of their experiences and responses in the workplace.

Reflective Practice
Briefing

Reflective Practice
Webinar

Reflective Practice
Training

# **Supervisions/1:1 Meetings**

Managers should ensure that they are having regular supervision/1:1 meetings with staff members, dedicating sufficient space for reflection and a wellbeing check-in. Providing space for individuals to acknowledge that things can be difficult can alleviate that person's pain and give them more ability to cope. It is important that supervision should not only be about performance or absence management, but also a supportive space where staff can talk through how they are feeling at work. Homeless Link have developed a briefing on things to consider in order to have a psychologically informed 1:1 meeting and training on supervision skills for managers.

Staff Supervision Skills
Training

Guidance on Psychologically Informed 1:1 Meetings

# **Debriefing**

Debriefing is a process which can be adopted by teams to help them cope with stressful situations and challenging incidents at work. Debriefing is essential to allowing staff to unpack a situation, reflect on what happened, and learn from the experience. Allowing time to debrief helps people make sense of difficult workplace experiences and reduces the chance that these incidents will have a negative impact on staff.

<sup>&</sup>lt;sup>16</sup> https://homelesslink-1b54.kxcdn.com/media/documents/Reflective practice briefing March2017.pdf

Aneemo<sup>17</sup>, a Homelessness Training Platform has free debriefing resources, a worksheet, and a training video by Dr Emma Williamson (Consultant Clinical Psychologist).

### **Debrief Resources**

# **Employee Assistance Programme (EAP)**

Employee Assistance Programmes are intended to support staff with personal challenges which may impact their health, wellbeing, and performance at work. EAP's often include the option for short-term counselling. Organisations should aim to have an EAP in place to ensure staff can access additional professional support where necessary.

# **NHS Support**

The NHS has developed a self-assessment tool for individuals working in the Health & Social Care sector with a direct link to mental health support. The questionnaire<sup>18</sup> (which takes around 10-15 minutes to complete) asks questions about your level of anxiety, your mood, your reactions to traumatic experiences, and use of alcohol and other substances. You will then be linked directly to a Staff Mental Health and Wellbeing Hub<sup>19</sup> in your local area where you can access dedicated support and advice.

The hubs have been set up to provide health and social care colleagues rapid access to assessments and local mental health services and support where needed. You can access a clinical assessment and be referred to local services; this being separate and confidential from your organisation. The hub offer is confidential, free of charge, and you can self-refer or even refer a colleague (with their consent).

Complete the self-assessment tool.

Find your local mental health & wellbeing hub.

<sup>&</sup>lt;sup>17</sup> https://www.aneemo.com/

<sup>&</sup>lt;sup>18</sup> https://checkwellbeing.leadershipacademy.nhs.uk/

<sup>&</sup>lt;sup>19</sup> https://www.england.nhs.uk/supporting-our-nhs-people/support-now/staff-mental-health-and-wellbeing-hubs/

## What We Do

Homeless Link is the national membership charity for frontline homelessness services. We work to improve services through research, guidance and learning, and campaign for policy change that will ensure everyone has a place to call home and the support they need to keep it.

# **Homeless Link**

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www.homeless.org.uk @HomelessLink

Seless, org. uk Let's End Homelessness **Together** 

