Secondary Trauma

Working with children who have experienced trauma is inherently stressful. Most people working with children are fairly resilient people but we all have times when our capacity to cope with stress is diminished. To work effectively with children in pain it is important adults need to be empathic individuals. Empathy is rooted in the capacity to accept and share something of the emotional experience of the other person. This requires that adults who are working with traumatised children remain emotionally available to their pain, terror and despair. Any adult working effectively with this group of children is at risk of becoming overwhelmed by this experience and themselves developing disorders of thought, feeling or behaviour. Often we may have fairly transient disorders of feeling or thought which do not translate into behaviour but if these emotions and thoughts persist over time they may have a significant impact on behaviour. It is important to recognise that the very qualities that we search for when recruiting adults to care for or work with these children are the same ones that make them vulnerable to this kind of secondary trauma. It is not a sign of personal failure or incompetence. It can be easy to overlook the signs that we or one of our colleagues may be experiencing the type of stress that can lead to secondary trauma.

Possible signs of stress:

- Changes in emotional functioning such as anger, irritability, sadness, anxiety or hopelessness
- Intrusive thoughts or images such negative thoughts about clients or colleagues or preoccupation with child abuse
- Changes in physical health such as changes in sleeping patterns, appetite, stress related illnesses or increased physiological arousal
- Avoidance

Most people would recognise some of these in themselves and colleagues. They are indicators for concern rather than symptoms of a disorder. If these are persistent rather than transient and if they begin to have a serious impact on behaviour then professional help may be required.

Good organisational provision in the form of supervision, training, consultancy and a rapid response to problems all help to prevent the development of these kind of difficulties but they will not eliminate them completely. All organisations should plan for the predictable reality of secondary trauma and ensure that employees or carers are given the non-judgemental and timely help they require to recover. Individuals also have a responsibility to remain alert to their own and their colleagues' emotional states and provide feedback when required. Developing and maintaining individual self care skills is also helpful in preventing this type of stress becoming overwhelming.