

What are Vicarious Trauma and Secondary Traumatic Stress?

VICARIOUS TRAUMA (VT) AND SECONDARY TRAUMATIC STRESS (STS) ARE FREQUENTLY USED INTERCHANGEABLY TO REFER TO THE INDIRECT TRAUMA THAT CAN OCCUR WHEN WE ARE EXPOSED TO DIFFICULT OR DISTURBING IMAGES AND STORIES SECOND-HAND.

This can occur by viewing graphic news reports, gruesome or frightening television shows and various other media, hearing a detailed traumatic story from another person, viewing crime scene evidence, working in a court room, attending a debriefing or a conference where disturbing images are described or shown, and many other ways in which we can be indirectly affected by the content or visuals of some other living creature's suffering.

The term Vicarious traumatization (VT) was coined by Pearlman & Saavikvitne (1995) to describe the profound shift in world view that occurs in helping professionals when they work with individuals who have experienced trauma: helpers notice that their fundamental beliefs about the world are altered and possibly damaged by being repeatedly exposed to traumatic material. A domestic violence shelter worker may stop being able to believe that any relationship can be healthy. A child abuse investigator may lose trust in anyone who approaches their child. Again, examples of this abound and vary based on the type of work that we do.

Secondary Traumatic Stress (STS) is a concept that was developed by trauma specialists Beth Stamm, Charles Figley and others in the early 1990s as they sought to understand why service providers seemed to be exhibiting symptoms similar to Post Traumatic Stress Disorder (PTSD) without having necessarily been exposed to direct trauma themselves.

VT/STS can occur in professionals who work in high-stress and trauma-exposed fields (child abuse investigators, prosecutors, judges, therapists, health care professionals, animal shelter workers and many others) but it can also affect civilians who do not work in high-trauma fields but are deeply impacted by stories that they are exposed to (maybe graphic



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news accounts, a friend sharing details of a traumatic event they experienced, again, there are many examples of ways in which this may occur.)

Direct trauma, in contrast, refers to a traumatic event that occurs directly to us. A paramedic who is called to a catastrophic car accident may have direct trauma as a result of what he/she sees at the crash site. The person in the car may also experience a direct trauma experience. Individuals who hear details of the crash after the fact, or see it on the news may have indirect trauma exposure as a result.

Whether someone will develop serious negative consequences as a result of VT/STS exposure depends on many factors which we will review in the backgrounder “Warning Signs of Vicarious Trauma, Secondary Trauma and Compassion Fatigue”.

When you look through the literature, you may see these terms used interchangeably, and sometimes they are referred to as “Compassion Fatigue” or “Burnout”. At TEND, we believe that Compassion Fatigue and Burnout are related phenomenon but do not necessarily always co-occur.

At the end of the day, whether you call it STS or VT, what we are referring to is the impact of indirect exposure to difficult, disturbing and/or traumatic images and stories of the suffering of others – humans and sometimes animals and the way that it might impact us as individuals and as professionals.

Over time, repeated exposure to difficult content can have a negative impact on our functioning and overall mental health, and it is important to develop a sense of our individual warning signs and develop tools to mitigate these negative effects.

For more information and resources, go to www.tendacademy.ca

