

WORK-RELATED STRESS & TRAUMA: SUPPORTING THE MENTAL HEALTH OF HEALTH PROFESSIONALS

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The relationship between healthcare professionals and their patients/clients is often very close, and this proximity can expose healthcare staff and volunteers to the distress and trauma experienced by the individuals they help. Healthcare professionals are often providing care to individuals who have been affected by trauma, violence, abuse, death, etc. – along with a myriad of other physical and mental health issues. Empathy and the desire to alleviate the pain and suffering of patients and clients can dramatically enhance the connection between patients/clients and healthcare professionals. Unfortunately, this connection can also have a serious psychological impact on health professionals with long-term consequences if left unaddressed or untreated.

STRESS & TRAUMA TERMINOLOGY

There is a great debate on the correct terminology for this type of trauma, with a range of descriptions that are often confused with each other. Vicarious trauma, secondary traumatic stress, compassion fatigue and burnout are, unfortunately, often used interchangeably. Although there is some discrepancy in the definitions, and an individual, group, and/or organization can be collectively experiencing more than one at a given time, it is important to be able to differentiate between the terms. This will help how individuals and organizations identify, respond, and prevent the emotional impact of work-related stress and trauma.

- **Post-Traumatic Stress Disorder (PTSD)**

A disorder in which a person has difficulty recovering after experiencing or witnessing a terrifying event. The condition may last months or years, with triggers that can bring back memories of the trauma accompanied by intense emotional and physical reactions. Symptoms may include nightmares or unwanted memories of the trauma, avoidance of situations that bring back memories of the trauma, heightened reactions, anxiety, or depression. Treatment includes different types of trauma-focused psychotherapy and potentially medications to manage symptoms.

- **Secondary Traumatic Stress**

Secondary trauma is the development of PTSD-like symptoms without directly witnessing or being involved in a traumatic event. In healthcare, the traumatizing event of a patient or client can become a traumatizing event for the healthcare professional. Unlike vicarious trauma, which accumulates over time, secondary trauma can occur unexpectedly and suddenly.

- **Vicarious Trauma**

Vicarious trauma occurs from repeated exposure to other people's trauma. Vicarious trauma can be described as a cumulative 'negative transformation' that impacts the physical and mental health of a healthcare professional, permeating all aspects of work and home life. It builds up over time, intruding on everyday life, and has the potential to drastically alter an individual's character and belief systems.

- **Compassion Fatigue**

Compassion fatigue is a type of indirect trauma specific to healthcare professionals, caused by the emotional toll of working with those who have experienced trauma. In an attempt to compartmentalize and/or create distance from the emotional experiences of patients/clients, it may also cause emotional exhaustion, depersonalization, and a lack of empathy towards patients or clients.

- **Burnout**

Burnout is caused by excessive and prolonged stress and can result in emotional and psychological exhaustion related to an individual or group's work environment. It is not a form of trauma and can be potentially addressed by shifting to a new work environment or adjusting their workload and/or schedule.

- **Traumatic Countertransference**

Traumatic countertransference is when a healthcare professional relates to a patient or client in such a way that they unconsciously connect the patient or client with an existing relationship in their own life. This can occur in many situations (not just in a medical setting) where there is a connection developed between people based on empathy. This can be harmful in several ways because, as a healthcare professional, the relationship should always be compassionately professional along with the appropriate and necessary boundaries, and not a relationship dynamic influenced on the premise that the client reminds the healthcare professional, for example, of their mother or child.

BEHAVIOR & SYMPTOMS

The human response to stress and trauma is involuntary and unconscious, but the chemical and biological process that causes a person to experience stress and trauma are the same. This stress response is not subject to cognitive or rational processing, and therefore two individuals can perceive and react in a different manner to the same event.

Healthcare workers who are experiencing work-related stress or trauma may experience:

- Headaches, heartburn or rashes
- Emotional volatility
- Irritability, grief, anxiety, and anger
- Social withdrawal
- Disrupted personal relationships
- Addictive behaviors that can be self-destructive and self-soothing
- Feelings of disconnection, loss of purpose, or hope, etc.

If left untreated, these symptoms can potentially develop into serious concerns including mental health disorders, detachment and social isolation, emotional distress, and substance abuse.

PREVENTION & PROTECTION

Exposure to stressful working conditions can have a direct influence on any individual's health and safety. Coping with these stresses requires protective measures that not only stem from the individual but should also be structured within the professional organizations they work for.

Individual Strategies

Individual strategies to avoid work-related stress and trauma can include:

- A good work/life balance and boundary setting
- Maintaining personal and social connections
- Pursuing diverse hobbies/interests outside of one's profession
- Motivation to learn and grow professionally and emotionally
- Reflective practices or relaxing activities
 - Avoid habitually relying on substances to decompress after a stressful day
- Drawing on your social support network and/or receiving regular mental health supports from qualified professionals
- If you notice changes in your or a colleague's mental or emotional health, please consider reaching out to a mental health professional for support.

Many healthcare workers will experience compassion satisfaction, which refers to positive feelings associated with the belief that they have contributed or helped in a positive way. Individual and organizational processes that enhance compassion satisfaction can significantly help protect an individual from work-related stress and trauma.

Organizational Strategies

Like in many aspects of health, the most important thing organizations can do is focus on prevention. Work-related stress and trauma must be addressed structurally as well as individually. Because this is a hazard for all who work in healthcare settings, managers, supervisors, and institutions must partner with staff and volunteers to develop ways to regularly combat the potential for work-related stress and trauma, in order to promote overall health and wellbeing.

From an organizational level, there should be policies and procedures that recognize and prevent risk factors for work-related stress and trauma. Organizational wellbeing programs and employee assistance programs also have a role in reducing the impact among staff. There are a number of potential preventive strategies, including balancing caseloads, offering additional leave time and counseling resources to workers, and developing a workplace culture that encourages and allows time for personal care. Notably, a programmatic approach should also include the provision of educational material about mental health concerns and the support systems that are available to all organizational members. Consider the following:

In your organization:

- What is your organization doing systemically to address work-related stress and trauma at the origin of distress?
- What are the current practices or policies at your organization that may be unintentionally causing or magnifying work-related stress and trauma?
- In what ways does the organization recognize that all staff and volunteers may be negatively affected by the work they do?
- In what ways does your organization explicitly value and support work-life balance for everyone?
 - How does your organization know that these are the ways your members want to be valued and supported in their wellbeing?
- How does your organization support supervisors trying to manage their team's exposure to long-term stress and trauma with meaningful supports and organizational resources that create impact?

In your teams:

- How do you help to address work-related stress and trauma for those you supervise or mentor?
- Does your team intentionally build in ways to acknowledge the impact of particularly challenging cases and debrief together?
- How is your team's time scheduled? Is it scheduled in such a way that each member can take adequate breaks to provide daily relief from the work environment?
- In what ways do you advocate for colleagues who may be showing signs of distress? What resources are available to you as a supervisor?

Organizations have a key role to play in prevention and mental health promotion. Health systems have a responsibility to build in robust organizational supports for healthcare staff and volunteers to address work-related distress at the origin rather than managing the symptoms of distress. AAVMC is here to help our member organizations define and achieve their goals for supporting and protecting the wellbeing of their communities.

CITATION

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