How Judges Can Respond to Secondary Trauma and Compassion Fatigue

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Disclaimer

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The Problem
The Problem

• We work with people who can be dangerous
  ▫ All of them abuse drugs
    • They are all at risk of overdose
  ▫ Most have histories of trauma
  ▫ Many have considered suicide, and some have tried it
  ▫ Some have histories of violence
• We are likely to experience exposure to all of these
Common Stresses in Family Law Cases

• Hearing traumatic stories of domestic violence, child abuse and neglect, sexual abuse, kidnapping, suicides, and deaths
• Seeing pictures of abused and neglected children
• Exposure to the worst impulses, behaviors, and beliefs in people
• Seeing the effects on the most vulnerable among us
Results of Exposure: Secondary Traumatic Stress
Exposure to trauma, self-harm, suicide, violence, homicide, and drug overdoses can be traumatizing

- Primary traumatization vs. secondary traumatization
- Traumatic grief
- Brownout vs. burnout
- Turnover
What Do We Mean by “Trauma”? (i.e., primary traumatization)

Trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening that has lasting adverse effects on the individual’s functioning and mental, social, emotional, or spiritual well-being.

SAMHSA, 2014
Traumatic Stress and the Brain
A trauma exposure response may be defined as the transformation that takes place within us as a result of exposure to the suffering of other living beings or the planet.

Laura van Dernoot Lipsky, 2010
Post-Traumatic Responses Occur on a Continuum

**Ready**
- Adaptive coping
- Optimal functioning
- Wellness

**Features**
- Well trained and prepared
- Focused
- In control
- Optimally effective
- Behaving ethically
- Having fun

**Reacting**
- Mild and transient distress or loss of optimal functioning
- Always goes away
- Low risk for illness

**Features**
- Irritable, angry
- Anxious or depressed
- Physically too pumped up or tired
- Reduced self control
- Poor focus
- Poor sleep
- Not having fun

**Injured**
- More severe and persistent distress or loss
- Leaves a "scar"
- Higher risk for illness

**Features**
- Life threat
- Loss
- Inner conflict
- Wear and tear

**Ill**
- Persistent and disabling distress or loss of function
- Clinical mental disorder
- Unhealed stress injuries

**Types**
- PTSD
- Depression
- Anxiety
- Substance abuse

**Features**
- Symptoms and disability persist over many weeks
- Symptoms and disability get worse over time
Post-Traumatic Stress Disorder in DSM 5

PTSD is characterized by:

- Exposure to a severe life-threatening event
- Repetitive re-experiencing of the event
- Avoidance of stimuli associated with trauma
- Negative moods and cognitions
- Increased arousal
DSM 5 Criteria for PTSD

Criterion A:
The person was exposed to: death, threatened death, actual or threatened serious injury, or actual or threatened sexual violence, as follows: (one required)

- Direct exposure.
- Witnessing the trauma, in person.
- Indirectly, by learning that a close relative or close friend was exposed to trauma.
- Indirect exposure to aversive details of the event(s), usually in the course of professional duties (e.g., first responders, collecting body parts; professionals repeatedly exposed to details of child abuse).
## Other Versions of Post-Traumatic Responses

<table>
<thead>
<tr>
<th>Disorder</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Adjustment Disorder</strong></td>
<td>• With or without anxious and/or depressed mood</td>
</tr>
<tr>
<td><strong>Acute Stress Disorder</strong></td>
<td>• Looks like PTSD, but lasts less than 30 days</td>
</tr>
</tbody>
</table>
| **Other Trauma or Stressor-Related Disorder** | • Used to be called sub-clinical PTSD  
• Has many of the features of PTSD, but not all                                                 |
| **Complex PTSD**                              | • Multiple traumas experienced over time, usually starting in childhood                           |
What Happens When You Are Exposed to Multiple Traumas?

- We all have a certain amount of resilience
- It can be increased or it can be worn down
- With too much trauma exposure, our cup fills up
- We can only handle so much
How Does Repeated Traumatic Exposure Affect Judges?

- It hurts.
- It can consume their thoughts.
- It creates images they can’t forget.
- It wears away at their resilience.
- It can make them pull away from friends and family.
- It can make them question their faith.
- It may result in secondary traumatization.
Mirror Neurons

- Mirror neurons allow us to imitate each other
- They make up 10-20% of the neurons in certain areas of the brain (Keysers et al., 2011)
- They are responsible for empathy (Rizzolatti and Craighero, 2005)
Secondary traumatic stress is the emotional duress that results when an individual hears about the firsthand trauma experiences of another. Its symptoms mimic those of post-traumatic stress disorder (PTSD).

NCTSN, 2017
What Is Secondary Traumatic Stress?

Unfortunately, we are not able to unhear or unsee the things we see and hear in the courtroom. There is no button to turn off the effects of this when you go to bed at night.

Anonymous judges, quoted in Judicial Edge, October 20, 2017

I will be out running, and suddenly I see the burned-off face of a 5-year-old child in my head, and it won’t go away.
Secondary Traumatization is a normal response to an abnormal level of exposure to traumatic events.
Risk Factors for STS

- Personal history of trauma or something related to the case
- Overidentification with court participants
- Empathic style
- Insufficient recovery time between trauma exposures
- Reactive to children’s vulnerability
- Isolation at work
- Lack of systemic resources
## Symptoms of STS

<table>
<thead>
<tr>
<th>Re-experiencing</th>
<th>Avoidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Intrusive images</td>
<td>• Trying not to talk about it</td>
</tr>
<tr>
<td>• Nightmares</td>
<td>• Withdrawal and isolation</td>
</tr>
<tr>
<td>• Flashbacks</td>
<td>• Being late</td>
</tr>
<tr>
<td>• Being triggered by reminders</td>
<td>• Missing work</td>
</tr>
<tr>
<td></td>
<td>• Not going out in public</td>
</tr>
<tr>
<td></td>
<td>• Increased alcohol and drug use</td>
</tr>
</tbody>
</table>
## Symptoms of STS

<table>
<thead>
<tr>
<th>Negative Thoughts and Moods</th>
<th>Arousal</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Numbness</td>
<td>• Irritability</td>
</tr>
<tr>
<td>• Anxiety</td>
<td>• Anger</td>
</tr>
<tr>
<td>• Depression</td>
<td>• Hypervigilance</td>
</tr>
<tr>
<td>• Helplessness</td>
<td>• Startle responses</td>
</tr>
<tr>
<td>• Cessation of previously enjoyed activities</td>
<td>• Insomnia</td>
</tr>
</tbody>
</table>
RESPONSE TO MULTIPLE TRAUMAS

Terror
Fear
Alarm
Vigilance
Calm

Traumatic Event  Traumatic Event  Traumatic Event  Traumatic Event

After Bruce D. Perry, 1999
Other Common Symptoms of STS

- Worsening eating habits (overeating, junk food)
- Rumination thinking
- Thoughts of retribution
- Fears for own safety and that of loved ones
- Preoccupation with work/working longer hours
- Engaging in excessive screen time (phones, tablets, computers, televisions)
- Feeling cut off from or distrustful of others
It is not unusual to experience one or more of these symptoms from time to time. Normally, these periods do not last more than two weeks.
Skill Break:
The Firehose Technique
• Picture your distressing image
• Pick up the firehose and point it at the image
• Pull back the trigger
• Spray
• What happens?
Preventing Traumatization: Developing Resilience
What is Resilience?

• “Resilience is the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress...”
  ▫ Ordinary not extraordinary
  ▫ It does not mean the absence of distress or emotional symptoms
  ▫ Not a “trait” - involves thoughts, behaviors, and actions

American Psychological Association
Factors Involved in Resilience

1. Supportive relationships inside and outside of one’s family
2. The capacity to make realistic plans and take steps to carry them out
3. A positive view of yourself and the confidence in your strengths and abilities
4. Skills in communication and problems solving
5. The capacity to manage strong feelings and impulses (i.e., distress tolerance)
6. Engaging in self-care

...In other words, these are all things someone can cultivate within themselves....
Self-Assessment: Subjective Units of Distress

100  Highest anxiety/distress that you have ever felt.
90   Extremely anxious/distressed.
80   Very anxious/distressed; can't concentrate. Physiological signs present.
70   Quite anxious/distressed; interfering with functioning. Physiological signs may be present.
60   Moderate-to-strong anxiety or distress.
50   Moderate anxiety/distress; uncomfortable, but can continue to function.
40   Mild-to-moderate anxiety or distress. ***Intervene here
30   Mild anxiety/distress; no interference with functioning.
20   Minimal anxiety/distress.
10   Alert and awake; concentrating well.
0    No distress; totally relaxed.
Assess for STS

- Conduct periodic self-assessments
- Use evidence-based assessment instruments:
  - Professional Quality of Life Scale
  - Secondary Traumatic Stress Scale
Secondary Traumatic Stress and Related Conditions: Sorting One from Another

Secondary Traumatic Stress refers to the presence of PTSD symptoms caused by at least one indirect exposure to traumatic material. Several other terms capture elements of this definition but are not all interchangeable with it.

Compassion fatigue, a less stigmatizing way to describe secondary traumatic stress, has been used interchangeably with the term.

Vicarious trauma refers to changes in the inner experience of the therapist resulting from empathic engagement with a traumatized client. It is a theoretical term that focuses less on trauma symptoms and more on the covert cognitive changes that occur following cumulative exposure to another person’s traumatic material.

Compassion satisfaction refers to the positive feelings derived from competent performance as a trauma professional. It is characterized by positive relationships with colleagues, and the conviction that one’s work makes a meaningful contribution to clients and society.

Burnout is characterized by emotional exhaustion, depersonalization, and a reduced feeling of personal accomplishment. While it is also work-related, burnout develops as a result of general occupational stress; the term is not used to describe the effects of indirect trauma exposure specifically.
Assess for STS

• Helpers tend to underestimate their secondary traumatic stress
• The best evaluators tend to be their spouses/partners (Jaffee et al., 2003)
  ▫ Also close family members and close friends
  ▫ Ask them if you’ve changed/if you show signs of STS
Address Systemic Safety Concerns

- Trauma-related symptoms may be the result of feeling unsafe with offenders
- Address practical concerns with practical solutions wherever possible
- Review best practices for courtroom safety
- If your court does not have an emergency management plan, create one
Preventing Secondary Traumatization

1. Know the signs and symptoms of STS
2. Assess yourself annually
3. Take breaks at work
4. Ensure 6.5-7.5 hours of sleep/night
5. Eat healthy foods in healthy amounts
6. Exercise regularly
Preventing Secondary Traumatization

7. Engage in a spiritual life
8. Engage in a hobby that has nothing to do with work
9. Set boundaries between work and home
10. Schedule and accumulate pleasant activities
11. Deal with your personal history
12. Obtain regular training on trauma and its effects
Skill Break: 
Drop Three
Research on Secondary Traumatic Stress in Judges
In October, 2017, nearly 800 judges participated in a National Judicial College survey.

They were asked “Have you suffered secondary traumatic stress from being a judge?”

45% answered yes.
The Main Study: Jaffe et al., 2003

- 105 judges, 54% M and 46% F
- 81% had criminal court duties, 54% had domestic court duties, and 30% had juvenile court duties
- 63% reported one or more symptoms of STS
- Female judges reported more internalizing symptoms
- Judges with more than six years of experience were more likely to report more externalizing/hostile symptoms
The fact that 46-63% of judges experience some symptoms of secondary traumatization suggests that 37-54% do not.
Responding to Traumatization
A judge was asked, “How do you cope with all the stress associated with being a judge?”

He answered, “With golf and alcohol.”
Intervening When You Experience STS

1. Engage or re-engage your support network
2. Re-balance work and life
3. Reduce exposure to work-related and trauma-related books, movies, internet content, and news
Intervening When You Experience STS

4. Practice self-soothing: baths, music, massages, etc.
5. Take vacations
6. Start a journal, including what you are grateful for
7. Be creative: sing, dance, write, draw, sculpt
8. Spend time with healthy children
9. Practice self-compassion
Intervening When You Experience STS

10. Practice mindfulness meditation
11. Engage in regular yoga
Mindfulness Meditation

- Mindfulness shifts the brain into a state of calm
- Regular practice shifts the nervous system baseline
<table>
<thead>
<tr>
<th>Physical</th>
<th>Mental</th>
</tr>
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<tbody>
<tr>
<td>Boost energy levels</td>
<td>Relieves stress</td>
</tr>
<tr>
<td>Improves sleep</td>
<td>Reduces anxiety</td>
</tr>
<tr>
<td>Reduces chronic pain</td>
<td>Improves mood and happiness</td>
</tr>
<tr>
<td>Improves heart function</td>
<td>Boosts concentration and focus</td>
</tr>
<tr>
<td>Helps with digestive problems</td>
<td>Improves self-esteem</td>
</tr>
</tbody>
</table>
Mental Health
Benefits of Yoga

Decreases Stress & Anxiety
Helps You Focus
Creates Mindfulness
Increases Self-Esteem
Boosts Confidence
Increases Awareness
Encourages Self Care
Improves Meditation
Increases Happiness
Promotes Well-Being
Q: How do you know when primary trauma and/or secondary traumatic stress becomes a significant problem?

A: When your symptoms become constant and/or pervasive.
Know when your cup is running over.
Self-Soothing

(Comforting yourself through your five senses)

1. **Something to touch**
   (ex: stuffed animal, stress ball)

2. **Something to hear**
   (ex: music, meditation guides)

3. **Something to see**
   (ex: snowglobe, happy pictures)

4. **Something to taste**
   (ex: mints, tea, sour candy)

5. **Something to smell**
   (ex: lotion, candles, perfume)
Everyone Needs One Person in Whom to Confide

• Trauma dissipates in waves
• Each of us needs one person to talk with:
  ▫ A partner or spouse
  ▫ A close friend
  ▫ A family member
  ▫ A minister/pastor/priest/rabbi
  ▫ A therapist
Obstacles to Judicial Self-Care

• Neither secondary traumatization nor self-care are taught in many law schools (Perry, 2014)

• Judges are reluctant to admit to their own suffering (Chamberlain & Miller, 2009)

• Judges may feel they need to be perfect role models (Chamberlain & Miller, 2009)

• Judges are reluctant to engage in lawyer assistance programs, because they may know other participants (Chamberlain & Miller, 2009)

• Judicial isolation (Jaffe et al., 2003)
SAMHSA’s Four R’s of Trauma-Informed Courts

01 Realize the widespread impact of trauma and understand potential paths for recovery

02 Recognize the signs and symptoms of trauma in participants, families, and staff

03 Respond by integrating knowledge about trauma into policies, procedures, and practices

04 Actively resist re-traumatization
Develop a Self-Care Action Plan

- Use the ideas above, and add your own
- Make a plan how you will leave work at work
- Identify your triggers and how you will handle them
- Set aside at least one hour daily for self-care
- What gives you joy?
- What gives you meaning?

Start a plan within the next week
Skill Break: Mindfulness of the Breath
Recognizing When You Need Outside Help
Signs of Deepening Problems

- Drinking more than two standard drinks/day
- Misusing prescription medication
- Using illicit drugs
Signs of Deepening Problems

- Becoming a couch potato
- Insomnia lasting more than two weeks
- Panic attacks
- Isolation from family and friends
- Despair about the world
- Loss of faith
- Thoughts of suicide
Deepening Problems in Court

- Inability to balance compassion and impartiality
- Numbness
- Unstable moods
- Emotional acting out towards participants
- Spacing out/dissociation
Deepening Problems in Court

- Decreased motivation
- Decreased productivity
- Decline in quality of work
- Avoiding or becoming less responsive to others
- Impaired judicial functioning
When STS Becomes a Serious Problem

- Seek consultation from a peer
- Use state assistance programs for attorneys or clinicians
- Use the employee assistance program
- Engage in psychotherapy
Brownout

• Brownout precedes burnout
• It occurs when someone disengages, becomes discontent and lethargic, and loses interest in work
• It may result in sick leave and/or vacation in an attempt to recharge
• A survey of 1,000 executives by Corporate Business Concepts found:
  ▫ Brownout is more prevalent than burnout
  ▫ 40% of the population experiences brownout
  ▫ 5% of the population experience burnout

Rigby, 2015
Top 10 Signs of Brownout

1. You work **long hours**, but without any real interest in your job. The work itself is a dull slog and lacks intellectual challenge or stimulation.
2. You feel as if you **never really finish tasks**. There’s always more to do.
3. You no longer know where your career is going and **don’t make important decisions**.
4. You **contribute the minimum** in meetings and have little interest in new suggestions. You’re the person who pours cold water on other people’s ideas.
5. You’ll **use any excuse not to show up**. A headache becomes a migraine and a cold is always flu.
6. You check emails when you get up in the morning and in bed before you go to sleep. You are **glued to your smartphone** on holidays, on weekends and even during social occasions.
7. **Physically you’ve started to suffer**. You’re out of shape, you eat junk food, you don’t get enough sleep and you’ve given up exercising.
8. You’ve **lost your sense of humor** and tend towards passive aggressiveness and surliness. If anyone (in work or outside) asks you how things are going, you tend to snap or answer in monosyllables.
9. **Family life is no longer what it once was**. You come home late to watch TV and show little interest in your spouse and children. Friendships have withered on the vine and outside interests have been forgotten.
10. You don’t **hate your boss**, but they’re moody and unpredictable. You never know whether they’ll like or hate a given piece of work.

Rigby, 2015
Signs of Burnout

- Chronic exhaustion
- Problems with attention and focus
- Headaches, stomach aches, chest tightening, dizziness, etc.
- Increased illness
- Loss of appetite or heavy overeating
- Cynicism and detachment
- Feeling ineffective
Skill Break: Envision a Calm Place
A Final Thought
We have an obligation to our clients, as well as to ourselves, our colleagues, and our loved ones, not to be damaged by the work we do.

P.S. Please keep an eye out for your colleagues, too.

Karen Saakvitne and Laurie Pearlman, 1996
Resources
Self-Screening Tools

• Secondary Traumatic Stress Scale:
  https://www.naadac.org/assets/2416/sharon_foley_ac15_militarycultureho2.pdf

• Professional Quality of Life Scale
Dealing with Trauma Exposure

- *Trauma Stewardship: An Everyday Guide to Caring for Self While Caring for Others* by Laura van Dernoot Lipsky
- *Transforming the Pain: A Workbook on Vicarious Traumatization* by Karen Saakvitne and Laurie Pearlman
- *The Resilient Practitioner: Burnout and Compassion Fatigue Prevention and Self-Care Strategies for the Helping Professions, 3rd Edition* by Thomas Skovholt and Michelle Trotter-Mathison
Dealing with Trauma Exposure

• Self-Care Workbook:  

• When Compassion Hurts:  
https://www.beststart.org/resources/howto/pdf/Compassion_14MY01_Final.pdf

• Secondary Traumatic Stress in child-serving systems:  
Mindfulness Books

- *Mindfulness for Beginners: Reclaiming the Present Moment and Your Life* (2011), Jon Kabat-Zinn
- *Radical Acceptance* (2012), Tara Brach
- *The Miracle of Mindfulness* (1999), Thich Nhat Hanh
- *Meditation for Beginners* (2008), Jack Kornfield
- *How to Meditate* (2013), Pema Chodron
Mindfulness Meditation CDs

- *Guided Mindfulness Meditation Series 1, 2 & 3*, Jon Kabat-Zinn
- *Mindfulness Meditation*, Tara Brach
- *Natural Awareness*, Pema Chodron
- *Guided Meditation*, Jack Kornfield
- *Plum Village Meditations*, Thich Nhat Hanh
Online MBSR Courses

• Free online MBSR course: http://palousemindfulness.com/selfguidedMBSR.html
• Online video course: http://www.soundstrue.com/store/the-mbsr-online-course-3226.html
Guided Mindfulness Meditations

- [http://health.ucsd.edu/specialties/mindfulness/programs/mbsr/Pages/audio.aspx](http://health.ucsd.edu/specialties/mindfulness/programs/mbsr/Pages/audio.aspx)
- [http://marc.ucla.edu/body.cfm?id=22](http://marc.ucla.edu/body.cfm?id=22)
Self-Help Mobile Applications

http://www.t2health.org/mobile-apps

• Breathe 2 Relax
• PTSD Family Coach
• Stop, Breathe, and Think
• Mindfulness Coach
Self-Help Mobile Applications

http://www.militarymentalhealth.org/articles/media

• Positive Activity Jackpot

• Virtual Hope Box

• Provider Resilience
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