

Trauma, It's More than Physical: Secondary Traumatic Stress



TEXAS A&M HEALTH

Center of Excellence
in Forensic Nursing

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Content Warning

The content in this webinar necessarily discusses dying, adverse childhood experiences including assault, and the trauma of caring. It may be emotionally and intellectually challenging.

We do our best to make this webinar a space where we can engage bravely, empathetically, and thoughtfully with potentially difficult content.



Indian Health Service Statement

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Learning Objectives

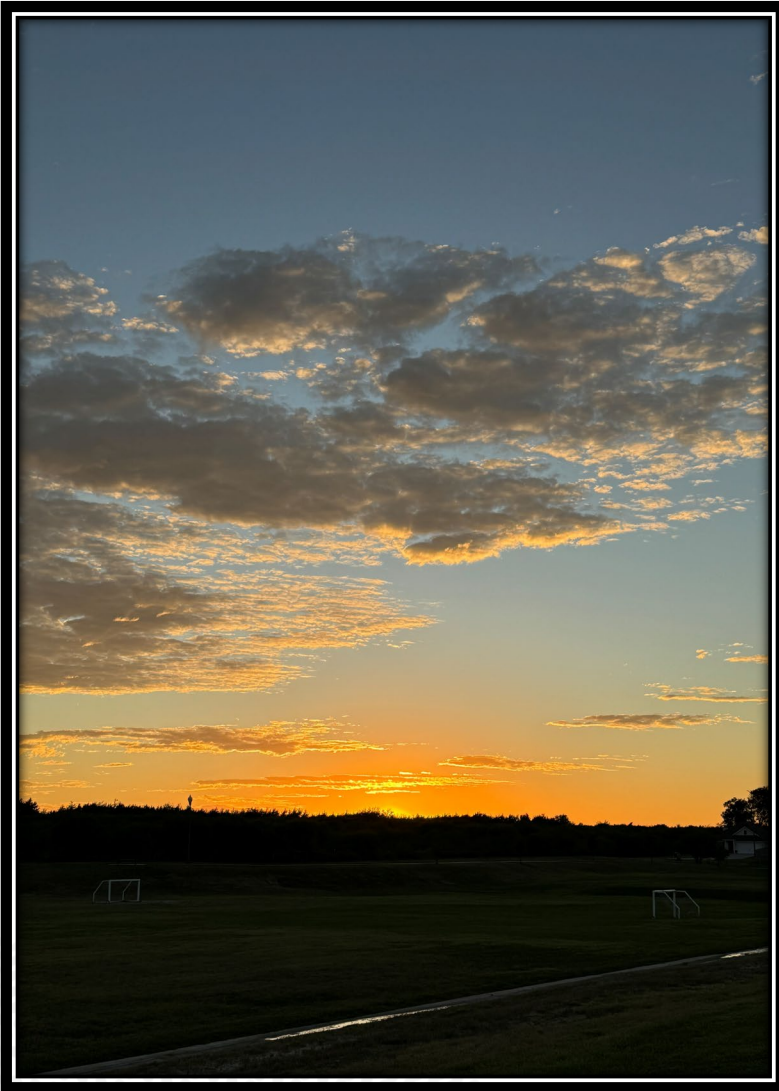
- At the conclusion of this course, 85% of participants will self-report an increase in knowledge of vicarious or secondary trauma and the impact on one's health and well-being.
 - Objective #1 – Define vicarious trauma, secondary traumatic stress, and burnout.
 - Objective #2 – Describe the biopsychosocial impact on the health care professional when engaging with patients who report traumatic lived experiences.
 - Objective #3 – Prioritize a self-care plan of action to navigate and cope with vicarious trauma.



Outline

- Adverse childhood experiences impact
- Lived experience – Adverse childhood experiences, secondary traumatic stress, and suicide.
- Terminology
- Statistics and evidence
- Enhancing and mitigating factors
- Well-being practices and resources





Personal Disclosure

- We do not apologize for expressing most emotions, yet we apologize when we cry.

Impact of Adverse Childhood Experiences (ACEs)

ACEs

- **Abuse**

- Emotional
- Physical
- Sexual

- **Neglect**

- Emotional
- Physical

- **Challenges in the Household**

- Violence
- Substance use
- Mental illness
- Divorce/Separation
- Incarcerated family members

- **External factors**

- Historical/generational trauma
- Poverty
- Structural racism



ACEs & Health Outcomes

- 64% of U.S. adults experienced at least once ACE; 17.3% experienced more than four.
- Lifelong impact on health, well-being, and opportunity.
- ACEs are positively linked with social determinants of health (SDOH) – Poverty, under-supported or under-resourced neighborhoods, racism/segregation.
- ACEs and toxic stress negatively impact brain development, the body's immune response, and trauma/stress response which may lead to:
 - Altered attention span,
 - Impacted learning, and decision-making.



Centers for Disease Control & Prevention (CDC), 2025;
Shonkoff et al., 2012; Swedo et al., 2023

ACEs & Risk

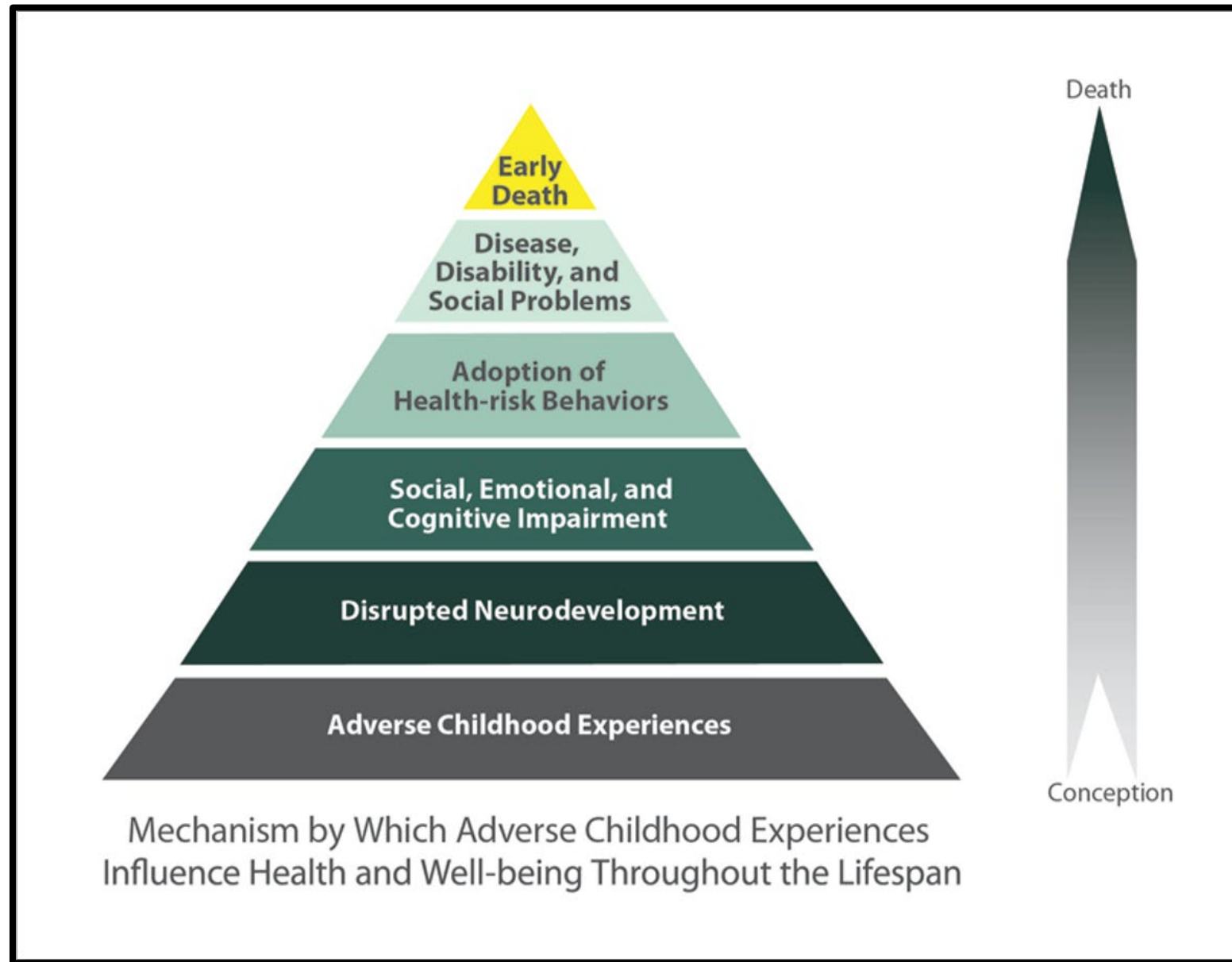
- All children are at risk for ACEs.
- Certain populations have been identified to be at higher risk:
 - Females
 - Non-Hispanic American Indian or Alaska Native



Swedo et al., 2023



ACEs Pyramid



CDC, 2020

One Trauma Nurse's Life

Actively Addressing Traumatic Stress



Laurie has the family's approval to retell this history.

Transformation and Rebirth

- This pole depicts the story of a transformation in life. The bottom figure signifies a Man on a vision quest. During this rite, an eagle carries him away.
- When he returns as a young person, the eagle with the wings wrapped around him represents his Guardian Spirit.
- His life starts, like a rebirth, or a second chance to change his ways.
- The Eagle represents wisdom, great vision, and healing.



Chief Swaletthul't'hw (Harvey Alphonse), Artist, 2012

Vicarious Trauma



Vicarious Trauma

- Trauma related to hearing or seeing the distressing experiences of our patients.
- Health care professionals may experience vicarious trauma when:
 - Providing direct patient care,
 - While completing mandatory reporting,
 - Viewing images of exploitation, abuse, violence or trauma,
 - Reviewing case files,
 - Preparing for testimony,
 - Post-terrorism, mass violence events, or disaster response, or
 - Counseling staff.



Office for Victims of Crime, n.d.

Vicarious Trauma Toolkit

- Office for Victims of Crime (OVC) - The vicarious trauma toolkit:
<https://ovc.ojp.gov/program/vtt/introduction>



Secondary Trauma and Health Care Professionals



Secondary Traumatic Stress (STS)

- “[B]ehaviors and emotions resulting from knowledge about a traumatizing event experienced by a significant other...the stress resulting from helping...a traumatized or suffering person” (Figley, 1995, p. 10).
- Two key ingredients are empathy and exposure.
- Unresolved trauma in one’s own life is a risk factor.
- Exposure to child trauma as a caregiver is a significant risk factor (Figley, 1995).
- May “develop suddenly and without much warning” (Beck, 2011, p. 3).



Beck, 2011; Figley, 1995

Secondary Trauma Symptoms

Increased crying

Depression

Anger outbursts

Nightmares

Insomnia

Social isolation

Helplessness, hopelessness

Intrusive thoughts

Lowered frustration tolerance

Difficulty separating work from personal life

Dread of working with certain individuals

Ineffective or self-destructive coping behaviors

Decreased feelings of work competence

Diminished career purpose/enjoyment

Lowered functioning in personal life

Bober & Regehr, 2006; Gentry et al., 2002

Empathy & Burnout



Empathy's Impact on Brain

- Mirror neurons in the brain suggest our neurobiology may mimic what is occurring in the brains of persons experiencing trauma (Lanzoni, 2016; Reiss, 2011).
- Health care professionals may experience elevated stress-response when caring for patients who have experienced trauma (Flarity et al., 2016).
- Stress can alter cognition, decision-making, anxiety, and mood alterations (Bhattarai et al., 2025).
- The impact is greater for those with history of personal trauma.



Bhattarai et al., 2025; Flarity, 2016; Lanzoni, 2016; Reiss, 2011

Burnout

- Caused by “unmanaged, chronic workplace stress” (American Nurses Association [ANA], 2025, para.2).
- Symptoms include:
 - Job cynicism
 - Reduced efficacy
 - Mental and hysical exhaustion
 - Distancing oneself from one’s job



ANA, 2025

Personal History & STS

- Systematic review ($n=39$), most were quantitative studies (37 out of 39).
- Variability among research methods.
- However, personal history of trauma is positively associated with higher rates of secondary traumatic stress and vicarious trauma.

Job Satisfaction & STS

- Main predictor of STS symptoms in one study was shown to be satisfaction with the job ($n=419$ medical professionals – physicians, nurses, and paramedics).
- Indirect trauma exposure may lead to secondary traumatic stress.
- Cognitive trauma processing:
 - Decreases negative emotions, including feelings of guilt and shame.
 - Assimilates the traumatic events' information.
 - Perceives positive aspects of the event.
- Cognitive trauma processing occurs through purposeful coping strategies.

Health Care Professionals can be at HIGH risk for STS



Impact of Stress: Suicide Rates

- In the U.S., suicide is in the top nine leading causes of death (ages 10-64).
- Second leading cause of death for ages 10-14 and 20-34.
- 48,183 Americans > 10 years of age died from suicide in 2021.
- 1.7 million attempted suicide and 3.5 million made a suicide plan.



CDC, 2023

Increases Risk for Suicide

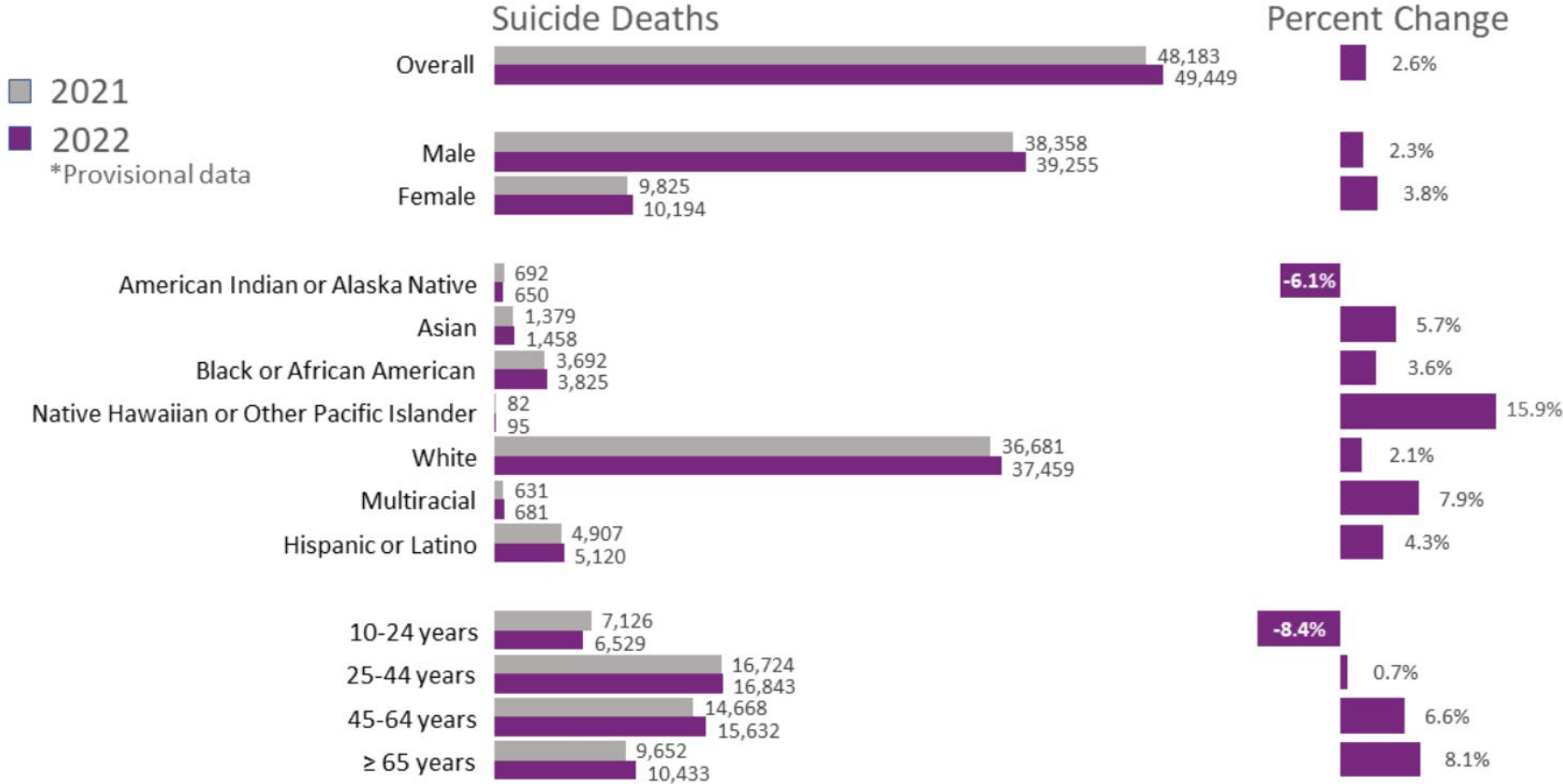
- Substance abuse
- Depression or mood changes
- Sleep disruption
- Weight changes or poor diet
- Chronic pain
- Stress-related diseases (e.g., cardiovascular disease, diabetes, ulcers, IBS, auto-immune disorder)



CDC, 2023

U.S. Suicide Rates, 2021-2022

Overall, the number of deaths by suicide **increased** 2.6% from 2021 to 2022*, but **decreased** among American Indian/Alaska Native people and Youth



Suicide Rates by Gender 2021-2022

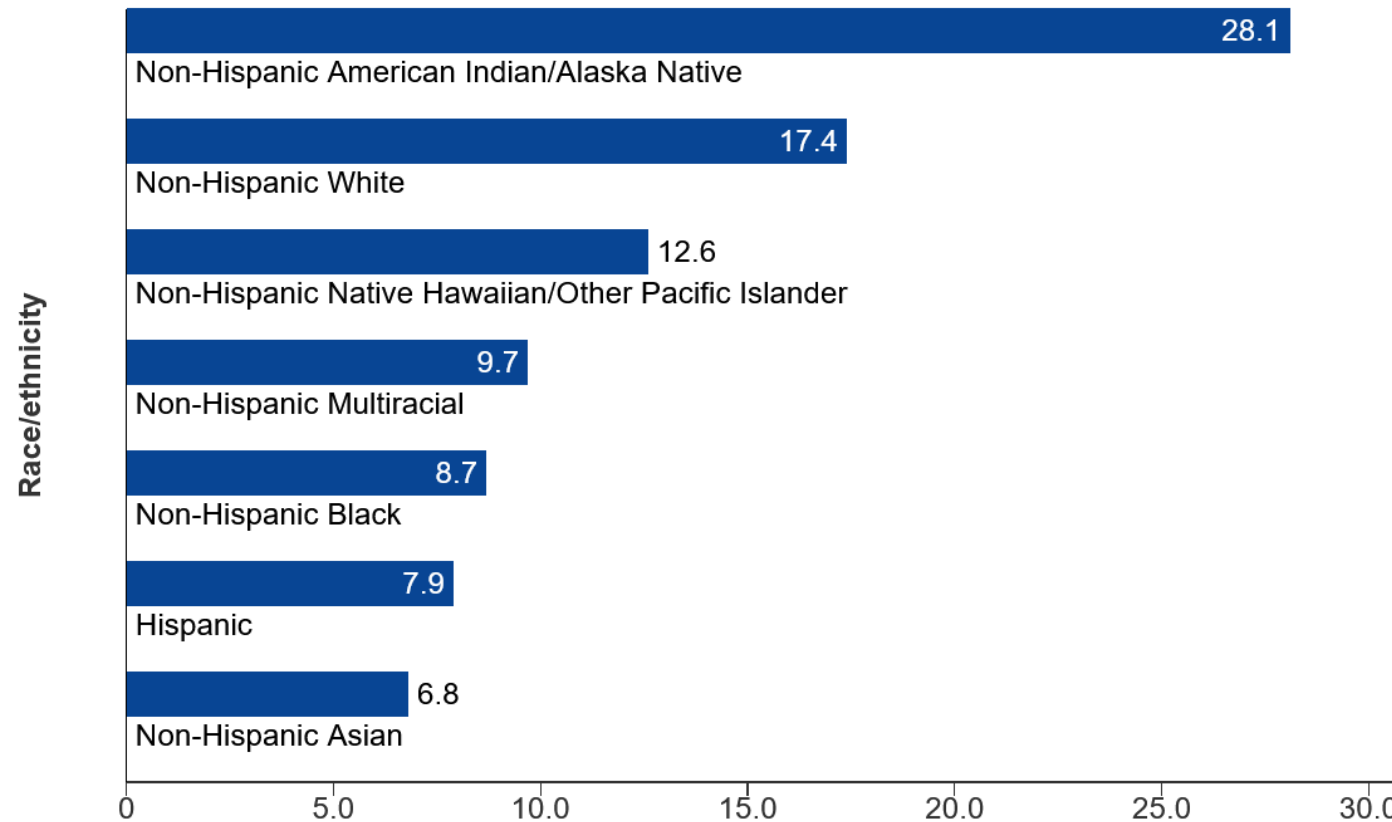
Suicide Deaths in the United States Overall and By Select Demographic Characteristics, 2021-2022

	2021 Final Deaths	2022 Provisional Deaths	2021-2022 Percent Change
Overall	48,183	49,449	2.6
Gender			
Male	38,358	39,255	2.3
Female	9,825	10,194	3.8

Suicide Rates by Race & Ethnicity 2021-2022

Some groups have disproportionately high rates of suicide.

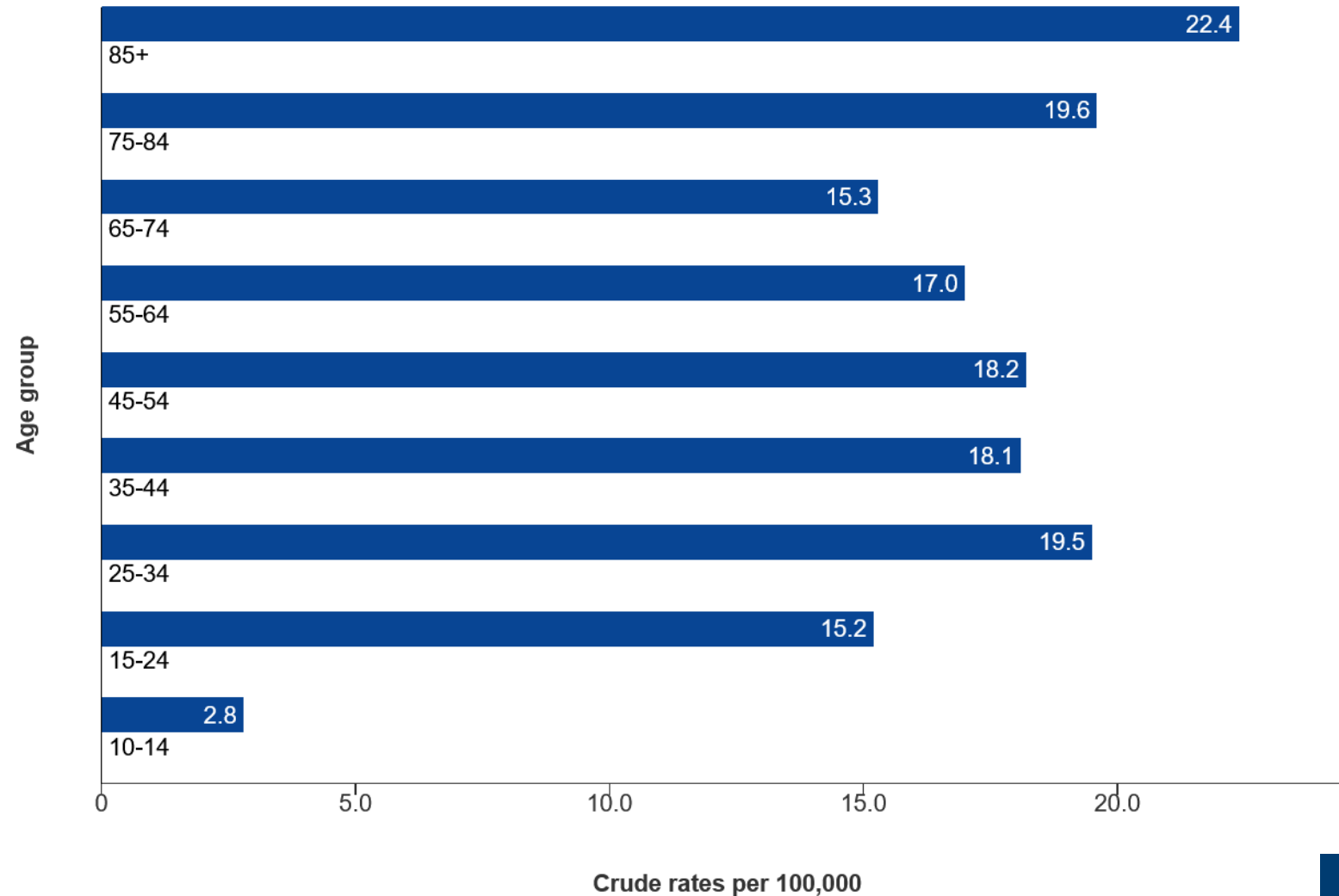
The racial/ethnic groups with the highest rates in 2021 were non-Hispanic American Indian and Alaska Native people and non-Hispanic White people.



CDC, 2023

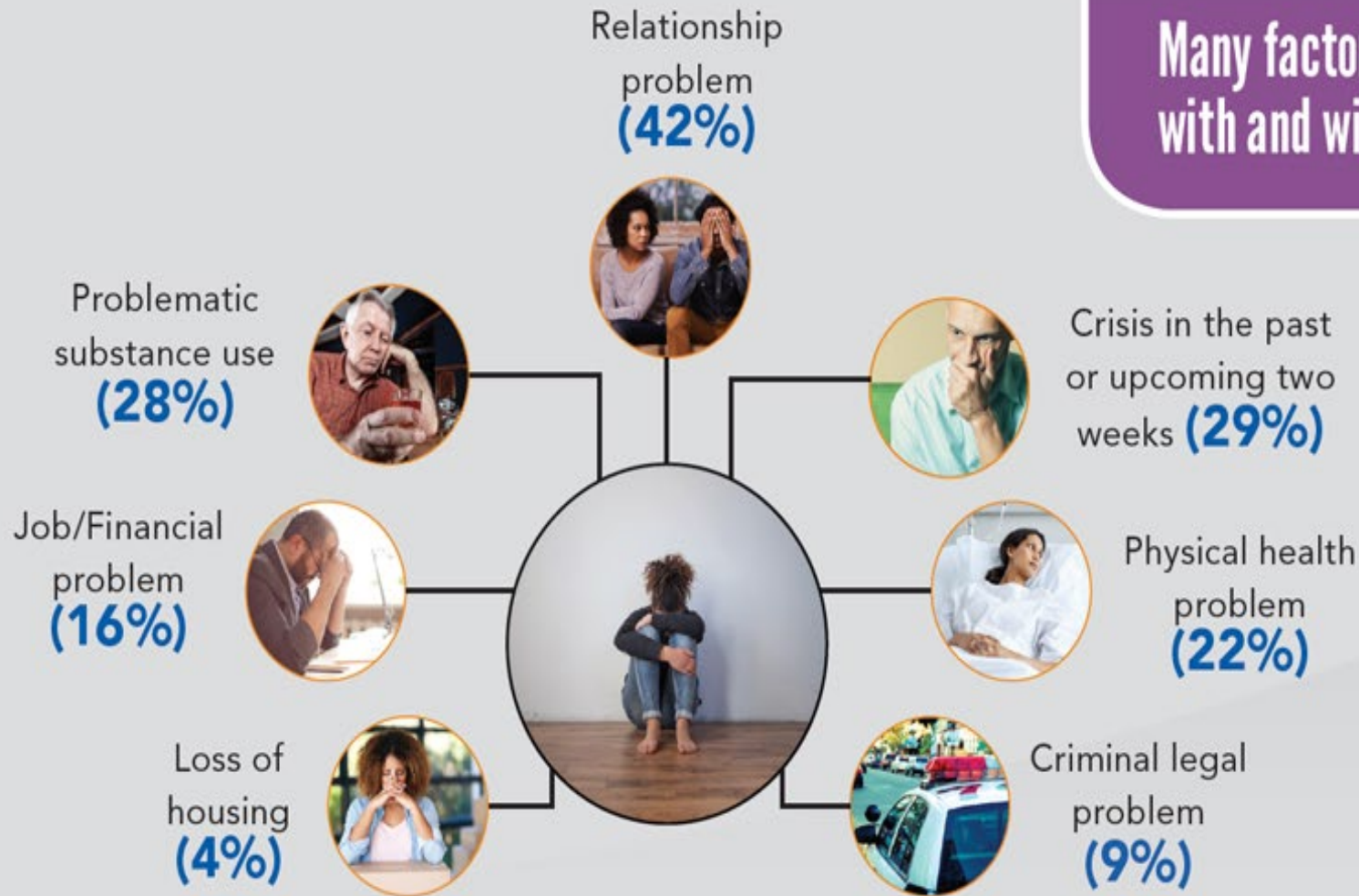
Suicide Rates by Age, 2021-2022

People ages 85 and older have the highest rates of suicide.



CDC, 2023

Many factors contribute to suicide among those with and without known mental health conditions.



Note: Persons who died by suicide may have had multiple circumstances. Data on mental health conditions and other factors are from coroner/medical examiner and law enforcement reports. It is possible that mental health conditions or other circumstances could have been present and not diagnosed, known, or reported.

SOURCE: CDC's National Violent Death Reporting System, data from 27 states participating in 2015.

(CDC, 2015)

What Can Be Done?



Well-Being

- The practice of well-being is “an active state of mindfulness for identifying and adopting attitudes and practices that can mitigate or manage the stressors that can lead toward burnout.”



Richard Bogue kindly collected this data and created this slide

Bogue et al., 2017

Therapeutic Strategies

- Routinely check in on your own physical, emotional, social, and spiritual health.
- Overcome professional distance and reluctance to admit that you're concerned about yourself. Practice saying it aloud (to people you trust).
- When needed, please seek professional counseling early.
- Check in with one another, especially after a difficult or traumatic event.
- Empower others to check in on you.



Richard Bogue created this slide

Self-Care Practices



Resources



Resources

- IHS Employee Assistance Program:
<https://www.ihs.gov/OHR/working-at-ihs/employee-assistance-program/>
- National Alliance on Mental Illness resources for health care professionals:
<https://www.nami.org/Your-Journey/Frontline-Professionals/Health-Care-Professionals/>
- ProQOL self-care tools for breathing exercises, mindfulness activities and grounding techniques:
<https://proqol.org/>
- CDC support for health professions:
https://www.cdc.gov/mentalhealth/public-health-workers/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fmentalhealth%2Fstress-coping%2Fhealthcare-workers-first-responders%2Findex.html



Books

- Trauma Stewardship by Burk & Lipsky
- Surviving Compassion Fatigue by Kyer
- Help for the Helper: Preventing Compassion Fatigue and Vicarious Trauma in an Every-Changing World by Rothschild



Questions?



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