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What is vicarious trauma?

- **Acute vicarious trauma** is a response to new traumatic material (stories, details, and images of violence and abuse), where workers experience responses that are similar to the responses of trauma victims (e.g. intrusive thoughts, nightmares, hyperarousal).

“I’m Always On Alert” (Physiological Hyperarousal)

- Constantly looking out for danger (hypervigilance)
- Easily startled and jumpy
- Can’t focus/concentrate, easily distracted
- Can’t get to sleep, stay asleep, sleep problems
- Low tolerance for frustration, angry outbursts
- Panic attacks—sudden feelings of terror alongside rapid breathing and fast heart rate
- Physical reactions when reminded of trauma (dizziness, nausea, physical pain)

“I Keep Pushing It Away” (Numbing/Avoidance)

- Numbness-Not feeling emotions, not feeling own body
- Checking out—reduced awareness of self/environment (dissociation)
- Feeling detached/alienated from others or from own body
- Don’t talk about it, avoided thoughts/feelings about it
- Feeling dazed or out of it, can’t think clearly, confused
- Forgetting what happened, memory loss
- Pretending everything is ok and nothing happened
- Avoiding reminders of trauma, staying home, isolation

Impact of Trauma

“I Can’t Deal With My Life Anymore” (Decreased Functioning)

- Difficulty eating
- Difficulty sleeping
- Problems at work
- Struggles in relationships
- Feeling unable to cope with difficulties the person could cope with before
- Difficulty getting out of bed, doing daily activities, caring for children/dependents
- Feel overwhelmed

“I Can’t Get Away From It” (Intrusion)

- Nightmares about trauma
- Suddenly having intense emotions
- Remembering—acting or feeling as if the trauma is happening right now, reliving it as if it were happening now (flashbacks)
- Unable to stop thinking about the trauma, thoughts just popping up about trauma
- Hearing or seeing parts of the trauma
- Physically re-experiencing sensations of the trauma

What is vicarious trauma?

- **Cumulative vicarious trauma** is a response to ongoing engagement with traumatic material over time. These experiences have a cumulative impact on the helper, where the worker's inner experience is transformed, and hope and optimism are challenged. Workers experience responses that are common to survivors of repeated trauma (e.g. challenges to worldview, identity, spirituality or core beliefs, and difficulty managing emotions).

Professional Quality of Life Scale (ProQOL)

Compassion Satisfaction and Compassion Fatigue (ProQOL) Version 5 (2009)

When you [help] people you have direct contact with their lives. As you may have found, your compassion for those you [help] can affect you in positive and negative ways. Below are some questions about your experiences, both positive and negative, as a [helper]. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the last 30 days.

1=Never

2=Rarely

3=Sometimes

4=Often

5=Very Often

1. I am happy.
2. I am preoccupied with more than one person I [help].
3. I get satisfaction from being able to [help] people.
4. I feel connected to others.
5. I jump or am startled by unexpected sounds.
6. I feel invigorated after working with those I [help].
7. I find it difficult to separate my personal life from my life as a [helper].
8. I am not as productive at work because I am losing sleep over traumatic experiences of a person I [help].
9. I think that I might have been affected by the traumatic stress of those I [help].
10. I feel trapped by my job as a [helper].
11. Because of my [helping], I have felt "on edge" about various things.
12. I like my work as a [helper].
13. I feel depressed because of the traumatic experiences of the people I [help].
14. I feel as though I am experiencing the trauma of someone I have [helped].
15. I have beliefs that sustain me.
16. I am pleased with how I am able to keep up with [helping] techniques and protocols.
17. I am the person I always wanted to be.
18. My work makes me feel satisfied.
19. I feel worn out because of my work as a [helper].
20. I have happy thoughts and feelings about those I [help] and how I could help them.
21. I feel overwhelmed because my case [work] load seems endless.
22. I believe I can make a difference through my work.
23. I avoid certain activities or situations because they remind me of frightening experiences of the people I [help].
24. I am proud of what I can do to [help].
25. As a result of my [helping], I have intrusive, frightening thoughts.
26. I feel "bogged down" by the system.
27. I have thoughts that I am a "success" as a [helper].
28. I can't recall important parts of my work with trauma victims.
29. I am a very caring person.
30. I am happy that I chose to do this work.

My Resources

Fill the boxes below with your current resources. You can use words, pictures, or symbols.

Internal Resources: Resources within you—skills, personality traits, experience/knowledge/beliefs you draw from, regular practices, creative/personal work that feeds you

My
Internal
Resources

External Resources: Resources outside of you—friends, family, colleagues, other people/relationships, animals, community/religious resources, places/objects that bring you comfort, community work that feeds you

My
External
Resources

Name: _____ Date: _____



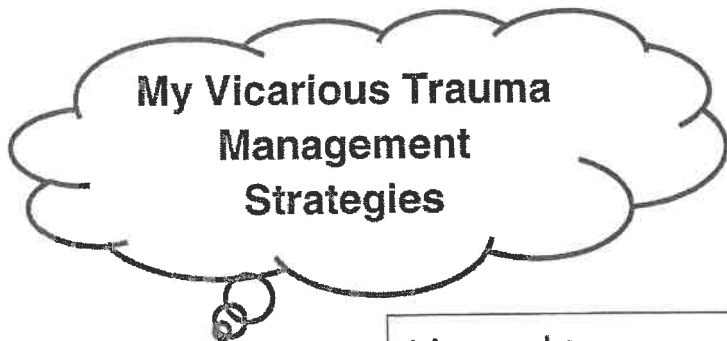
My Vicarious Trauma Management Strategies

Put a CHECK ✓ by what you already do.

Put a STAR ★ by what you intend to try.

- ___ Connect with the reasons I do this work
- ___ Be involved in activism and systems change
- ___ Practice grounding techniques
- ___ Write in a journal
- ___ Plan a fun activity with a coworker
- ___ Talk about vicarious trauma with my supervisor
- ___ Take breaks at work
- ___ Learn a new skill
- ___ Find something to appreciate each day
- ___ Identify what I can change about my life, and what I can't change about my life
- ___ Think about how I have seen myself and my clients grow in this work
- ___ Set personal and professional boundaries
- ___ Remember all of my roles, not just at work (friend, parent, child, etc.)
- ___ Consider whether my role at work is still right for me
- ___ Seek out psychotherapy
- ___ Put visual reminders of my "safe place" where I can see them
- ___ Get regular exercise
- ___ Pair up with a "buddy" for mutual check-ins about stress and vicarious trauma
- ___ Other: _____
- ___ Other: _____

Name: _____ Date: _____



I intend to...

A large, empty rectangular box with a thin black border, intended for the user to write their intended actions.

Some things that could help me do what I intend to do are...

A large, empty rectangular box with a thin black border, intended for the user to list factors that could help them achieve their intentions.

SELF CARE

Finding the Time

Self-care does not have to be time-consuming. As nice as it would be to take a three-week vacation to a tropical island, most of us do not have the time or resources for that. Below are some tips for using the time that you do have effectively.

If you have ...

2 minutes

- Breathe
- Stretch
- Daydream
- Take your stress temperature
- Laugh
- Doodle
- Acknowledge one of your accomplishments
- Say no to a new responsibility
- Complement yourself
- Look out the window
- Spend time with your pet
- Share a favorite joke

10 minutes

- Evaluate your day
- Write in a journal
- Call a friend
- Meditate
- Tidy your work area
- Assess your self-care
- Draw a picture
- Dance
- Listen to soothing sounds
- Surf the web
- Read a magazine

5 minutes

- Listen to music
- Have a cleaning cry
- Chat with a co-worker
- Sing out loud
- Jot down dreams
- Step outside for fresh air
- Enjoy a snack or a cup of coffee/tea

30 minutes

- Get a massage
- Exercise
- Eat lunch with a co-worker
- Take a bubble bath
- Read non-work related literature
- Spend time in nature
- Go shopping
- Practice yoga
- Watch your favorite television show

Excerpts from... *WHAT ABOUT YOU?* THE NATIONAL CENTER ON FAMILY HOMELESSNESS for every child, a chance. "Finding the time" section.

Free download: www.familyhomelessness.org/media/94.pdf

CONNECTING WITH OTHERS

Finding the Time

We all lead very busy lives. We don't always have the luxury of extended periods of time to build and sustain connections with others. Below are some tips for sustaining relationships that are important to our health and well-being, whether you have two minutes or half an hour. These represent just a few of the many possible ways to stay connected to family and friends. Hopefully, after reading these tips, you will come up with new creative ideas or your own!

If you have...

2 minutes

- Leave a message or send an email to someone important to you, letting them know that you're thinking of them.
- Say goodbye when you leave.
- Leave post-it notes on the fridge with little messages for your partner/child/roommate.
- Let someone know that you need some time to talk later in the day.

5 minutes

- Check with your family/friends to see how they are doing, either by phone or in person.
- Mail a card or send or send an e-greeting.
- Give people in your life a quick update on how you are doing and what are you doing.
- Send someone a list of possible dates to spend some time together and/or coordinate an activity.
- Look at pictures or family members.
- Send an email to a friend about a funny thought you had.

10 minutes

- Have breakfast with your family.
- Look up a community group you may be interested in joining or learning more about.
- Talk to a friend, family member or co-worker about a problem or frustration.
- Take some quiet time to reflect on what you need from others in your life and how you can ask for those things.

30 minutes

- Play a game with your child.
- Read to your child.
- Go for a walk with a friend or family member.
- Cook with your family/friends.
- Sit with your family/friends to enjoy a meal.
- Write a letter to someone.
- Watch a TV show with someone you like to spend time with.

Excerpts from... *WHAT ABOUT YOU?* THE NATIONAL CENTER ON FAMILY HOMELESSNESS for every child, a chance. "Finding the time" section.

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ON THE JOB

Finding the Time

Providers often have limited time to complete all the work that has to be done. It may feel like incorporating one more practice, even if it is related to self-care, is too much to ask. This is exactly the time when self-care is most important to keep in mind! It is essential to find the time to create daily self-care rituals that are realistic and manageable for providers so that they will be sustainable over the long-term. The following are some tips and strategies for incorporating self-care strategies no matter how busy you are:

If you have...

2 minutes

- Smile
- Make coffee
- Sign up for training opportunity
- Thank someone

5 minutes

- Respond to an email that has been nagging you
- Have a conversation with someone you don't usually work with
- Schedule a team meeting
- Straighten up one of the common areas (e.g., copy machine, kitchen, hallway, waiting room)

10 minutes

- Clean up your workspace (or at least a part of it!)
- Plan a party to celebrate an accomplishment or milestone (e.g., colleague's birthday, meeting a fundraising goal, etc.)
- Discuss training opportunities with your supervisor
- Do one of the activities in this workbook with your colleagues at a staff meeting

30 minutes

- Eat lunch with your colleagues
- Discuss self-care, burnout and compassion fatigue at a staff meeting
- Have a "walking meeting," where you walk outside with a colleague rather than meet in the office.

Excerpts from... *WHAT ABOUT YOU?* THE NATIONAL CENTER ON FAMILY HOMELESSNESS for every child, a chance. "Finding the time" section.

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DETACHING FROM EMOTIONAL PAIN (GROUNDING)

Lisa Najavits, PhD

WHAT IS GROUNDING?

Grounding is a set of simple strategies to *detach from emotional pain* (for example, drug cravings, self-harm impulses, anger, sadness). Distraction works by focusing outward on the external world—rather than inward toward the self. You can also think of it as “distraction”, centering, “a safe place,” looking “outward,” or “healthy detachment.”

WHY DO GROUNDING?

When you are overwhelmed with emotional pain, you need a way to detach so that you can gain control over your feelings and stay safe. As long as you are grounding, you cannot possibly use substances or hurt yourself. Grounding ‘anchors’ you to the present and to reality.

Many people with PTSD and substance abuse struggle with either feeling too much (overwhelming emotions and memories) or too little (numbing and dissociation). In grounding, you attain balance between the two—conscious of reality and able to tolerate it.

GUIDELINES

- Grounding can be done *any time, any place, anywhere* and no one has to know.
- Use grounding when you are: *faced with a trigger, having a flashback, dissociating, having a substance craving, or when your emotional pain goes above 6 (on a 0-10 scale)*. Grounding puts healthy distance between you and these negative feelings.
- *Keep your eyes open, scan the room, and turn the light on* to stay in touch with the present.
- *Rate your mood before and after* to test whether it worked. Before grounding, rate your level of emotional pain (0-10, where 10 means “extreme pain”). Then re-rate it afterwards. Has it gone down?
- *No talking about negative feelings or journal writing*. You want to distract away from negative feelings, not get in touch with them.
- *Stay neutral*—no judgments of “good” and “bad”. For example, “The walls are blue; I dislike blue because it reminds me of depression.” Simply say “The wafts are blue” and move on.
- *Focus on the present, not the past or future*.
- *Note that grounding is not the same as relaxation training*. Grounding is much more active, focuses on distraction strategies, and is intended to help extreme negative feelings. It is believed to be more effective for PTSD than relaxation training.

WAYS TO GROUND

Mental Grounding

- ♣ *Describe your environment in detail* using all your senses. For example, “The walls are white; there are five pink chairs, there is a wooden bookshelf against the wall...” Describe objects, sounds, textures, colors, smells, shapes, numbers and temperature. You can do this anywhere. For example, on the subway: “I’m on the subway. I’ll see the river soon. Those are the windows. This is the bench. The metal bar is silver. The subway map has four colors...”
- ♣ *Play a “categories” game* with yourself. Try to think of “types of dogs”, “jazz musicians”, “states that begin with “A”, “cars”, “TV shows”, “writers”, “sports”, “songs”, “European cities.”
- ♣ *Do an age progression*. If you have regressed to a younger age (e.g., 8 years old), you can slowly work your way backup (e.g., “I’m now 9”; “I’m now 10”; “I’m now 11...”) until you are back to your current age.
- ♣ *Describe an everyday activity in great detail*. For example, describe a meal that you cook (e.g., First I peel the potatoes and cut them into quarters, then I boil the water, I make an herb marinade of oregano, basil, garlic, and olive oil...”).
- ♣ *Imagine*. Use an image: Glide along on skates away from your pain; change the TV channel to a better show think of a wall as a buffer between you and your pain.
- ♣ *Say a safety statement*. ‘My name is _____; I am safe right now. I am in the present, not the past.

I am located in _____ the date is _____.

- ♣ **Read something, saying each word to yourself.** Or read each letter backwards so that you focus on the letters and not on the meaning of words.
- ♣ **Use humor.** Think of something funny to jolt yourself out of your mood.
- ♣ **Count to 10 or say the alphabet** very s.l.o.w.l.y.
- ♣ **Repeat a favorite saying** to yourself over and over (e.g., the Serenity Prayer).

Physical Grounding

- ✦ **Run cool or warm water over your hands.**
- ✦ **Grab tightly onto your chair as hard as you can.**
- ✦ **Touch various objects around you:** a pen, keys, your clothing, the table, the walls. Notice textures, colors, materials, weight, temperature. Compare objects you touch: Is one colder? Lighter?
- ✦ **Dip your heels into the floor**— literally “grounding” them! Notice the tension centered in your heels as you do this. Remind yourself that you are connected to the ground.
- ✦ **Carry a ground object in your pocket**—a small object (a small rock, clay, ring, piece of cloth or yarn) that you can touch whenever you feel triggered.
- ✦ **Jump up and down.**
- ✦ **Notice your body:** The weight of your body in the chair; wiggling your toes in your socks; the feel of your back against the chair. You are connected to the world.
- ✦ **Stretch.** Extend your fingers, arms or legs as far as you can; roll your head around.
- ✦ **Walk slowly, noticing each footstep,** saying “left,” “right” with each step.
- ✦ **Eat something. Describe the flavors** in detail to yourself.
- ✦ **Focus on your breathing.** Noticing each inhale and exhale. Repeat a pleasant word to yourself on each inhale (for example, a favorite, color or a soothing word such as “safe” or “easy”).

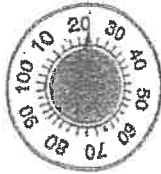
Soothing Grounding

- ♥ **Say kind statements,** as if you were talking to a small child. E.g., “You are a good person going through a hard time. You’ll get through this.”
- ♥ **Think of favorites.** Think of your favorite color, animal, season, food, time of day, TV show.
- ♥ **Picture people you care about** (e.g., your children; and look at photographs of them).
- ♥ **Remember the words to an inspiring song, quotation or poem** that makes you feel better (e.g., the Serenity Prayer).
- ♥ **Remember a safe place.** Describe a place that you find very soothing (perhaps the beach or mountains, or a favorite room); focus on everything about that place—the sounds, colors, shapes, objects, textures.
- ♥ **Say a coping statement.** “I can handle this”, “This feeling will pass.”
- ♥ **Plan out a safe treat for yourself,** such as a piece of candy, a nice dinner, or a warm bath.
- ♥ **Think of things you are looking forward to in the next week.** Perhaps time with a friend or going to a movie.

WHAT IF GROUNDING DOESN'T WORK?

- ♣ **Practice as often as possible.** Even when you don’t “need” it, so that you’ll know it by heart.
- ♣ **Practice faster.** Speeding up the pace gets you focused on the outside world quickly.
- ♣ **Try grounding for a looooooonnnng time (20-30 minutes).** And, repeat, repeat, repeat.
- ♣ **Try to notice whether you do better with “physical” or “mental” grounding.**
- ♣ **Create your own methods of grounding.** Any method you make up may be worth much more than those you read here because it is yours.
- ♣ **Start grounding early in a negative mood cycle.** Start when the substance craving just starts or when you have just started having a flashback.

from Growing Beyond Survival: A self-help tool kit for managing traumatic stress by Elizabeth Vermilyea. © 2000, Sidran Institute Press.



Tool: Gauge

Remember that imagery provides a way of using your imagination to soothe yourself, to set and plan for goals, and to practice steps toward achieving goals. Safe places can help with the self-soothing, but you will need more tools to help you with your goal of increased self-awareness. The next few pages introduce tools that you can use to keep track of your thoughts, feelings, and impulses. These imagery techniques will help you to be more self-aware, and will probably lead to some discomfort since traumatic experiences may have led to habits of reduced self-awareness. The following tools will help you reduce the intensity of feelings to more tolerable levels.

Idea: The three main categories of images for addressing thoughts, feelings, and impulses are gauges, regulators, and containers. These images are tools that assist in the toleration and management of thoughts, feelings, and impulses.

• **Gauges**—an image, a picture, or visualization of something that measures intensity. A gauge will let you know if pressure is too high or too low. Gauges are used to predict danger or to determine how well something is functioning. Your gauge can be a meter with one or several dials that measure different things like:



- racing thoughts
- intrusive emotions
- dangerous impulses
- the need for help

These gauges can be used to let you know when you are in the "red" or Danger Zone. You could use them to see how close you are to acting on impulses.

This gauge could be used to monitor four different things at one time. Using this type of image, you can check on the intensity of thoughts, feelings, impulses, and safety.



Whatever images you use to gauge intensity, you need to make sure that you set aside time to practice checking in with yourself. Practice will help the technique to become second nature and to work more effectively when you are having trouble.



Tool: Gauge

Imagery Worksheet 4

Add to the list of common images used to gauge how a person is doing inside:

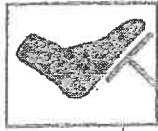
- speedometer
- thermometer
- pressure gauge
- blood pressure cuff
- gas gauge
- volume dial
- weather patterns (storm blowing in, calm, hazy)
- scuba gauge
- volcano
- clock (1=low intensity, 12=high intensity)



colors (gray = numb, blue = sad, red = overwhelmed)

10 Point scale 1-2-3-4-5-6-7-8-9-10 (1=low, 10=high)

In the space below, draw some of the images you added to the list.



Tool: Regulator

Idea:

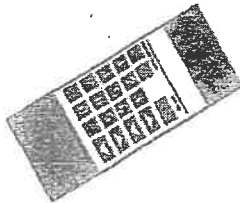
⊙ Regulator—an image that helps you to control the intensity of internal states. Regulators help you to manage whatever you have measured with your gauge. Your regulator needs to be able to turn things both up and down so that you can increase *and* decrease feelings. This is important because feeling numb is a danger sign and feeling overwhelmed leads to impulsivity. Your regulator needs to work in both directions. You may need different regulators to manage different problems like the following:

- ⊙ intense or numb feelings
- ⊙ intrusive visual hallucinations
- ⊙ racing thoughts



Your regulator might turn things down or dim them out; it might have a different effect on different problems. It's all up to you.

... ⊙ This regulator is a dial that can be used to turn painful feelings down or to turn pleasant feelings up. You could use it to turn sounds down inside when it's too noisy or to dim out scary images.



⊙ This image of a remote control device can be used to control intrusive sounds and images. You might want to "change channels" from flashback images to safe place images, or you may want to watch the reality channel. You could use this image to "mute" scary sounds that you hear in your head or to fast forward through flashbacks. You could turn the volume up or down.

Images commonly used for regulating thoughts, feelings and impulses:

gas pedal/brake	faucet	thermostat
volume dial	waterfalls	remote control
weather (gentle rain expresses sadness, cool breeze reduces anger)		

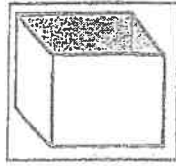


Tool: Regulator

Practice

It is important to remember that whatever image you use to regulate intensity, you should set aside time to practice. Practice will help the tool to become second nature and will allow it to work more effectively when you are having trouble. It often helps to first practice turning pleasant feelings up and down. And don't forget to breathe! Sometimes tension can build when practicing or using new techniques. Focusing on your breathing may help you reduce tension and anxiety. Breathing is very basic and can help you to get centered.

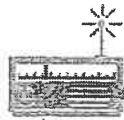




Tool: Container

Idea: ^{all}

• **Containers**—provide a holding tank for intrusive, painful or disruptive thoughts, images, and feelings. A container will allow you to postpone working with something until you are ready. Containers work best when they seem to match your difficulty. If you are having intrusive pictures in your head, you might visualize a photo album that can be closed with the pictures inside. If your feelings are like floodwaters, you might need a strong dam with a spillway to contain them. Use your imagination. Different containers can be used for different problems. Scary intrusive images may be contained by using a TV, VCR, and remote control to stop the image, fast forward it, turn down the sound, turn the image off or eject the “tape” of the image.



• Racing thoughts can be contained by imagining they are on a radio; you can change the channel to soothing thoughts or a safe music station.



• Dangerous impulses could be contained in a safe with a time lock or a bank vault with safety deposit boxes

• Intense feelings could be contained in a dam with a spillway

Use the following worksheet to identify other useful containment images.



Tool: Container

Imagery Worksheet 7

Add your ideas to the list of common images frequently used as containers:

Tupperware	hot air balloons	boxes	a safe with a time lock	photo album
scuba tanks	genie bottles	crates	vacuum cleaners	library
bank vaults	safe deposit boxes	bottles	computer disks	

In the space below, draw some of the images you have added to the list.

References for Trauma and Vicarious Trauma Training

- Bell, H., Kulkarni, S. & Dalton, L. (2003). Organizational prevention of vicarious trauma. *Families in Society*, 84 (4), 463-470.
- Bride BE. Prevalence of secondary traumatic stress among social workers. *Social Work*. 2007;52:63–70.
- Bryant-Davis, T. & Ocampo, C. (2005). The Trauma of Racism: Implications for Counseling, Research, and Education. *Counseling Psychologist*, 33(4), 574-578.
- Carter, R. (2007). Racism and psychological and emotional injury: Recognizing and assessing race-based traumatic stress. *Counseling Psychologist*, 35(1), 13–105.
- Cook, A., Blaustein, M., Spinazzola, J., & van der Kolk, B. (Eds.) (2003). *Complex trauma in children and adolescents*. White Paper from the National Child Traumatic Stress Network Complex Trauma Task Force
- Fallot, R. & Harris, M. (2009). *Creating cultures of trauma-informed care (CCTIC): A self-assessment and planning protocol*. Washington, DC: Community Connections. Retrieved from <http://www.annafoundation.org/CCTICSELFASSPP.pdf>
- Helms, J., Nicholas, G., & Green, C. (2010). Racism and ethnoviolence as trauma: Enhancing professional training. *Traumatology*, 16, 53-62.
- Hopper, E., Bassuk, E., & Olivet, J. (2007). *Shelter from the storm: Creating trauma-informed homeless service systems*. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration.
- Matsakis A (1992) *I can't get over it: a handbook for trauma survivors*. Oakland, California: New Harbinger Publications.
- Najavits, L. (2002). *Seeking safety: A treatment manual for PTSD and substance abuse*. New York: Guilford.
- National Child Traumatic Stress Network (2011) Secondary Traumatic Stress: A Fact Sheet for Child-Serving Professionals Retrieved from <http://www.nctsnet.org/>
- Prescott, L., Soares, P., Konnath, K., and Bassuk, E. (2008). *A Long Journey Home: A Guide for Creating Trauma-Informed Services for Mothers and Children Experiencing Homelessness*. Rockville, MD: Center for Mental Health Services, Substance Abuse and Mental Health Services Administration; and the Daniels Fund; National Child Traumatic Stress Network; and the W.K. Kellogg Foundation. Retrieved from <http://www.homeless.samhsa.gov/>
- Richardson, J. (2001). *Guidebook on Vicarious Trauma: Solutions for Anti-Violence Workers*. Ottawa: National Clearinghouse on Family Violence.
- Saakvitne, K.W., Gamble, S.G., Pearlman, L.A., & Lev, B.T. (2000). *Risking connection: A training curriculum for working with survivors of childhood abuse*. Lutherville, MD: Sidran Foundation and Press.
- Saakvitne, K. & Pearlman, L. (1996). *Transforming the pain: A workbook on vicarious traumatization*. New York: WW Norton.
- Van Dernoot Lipsky, L. (2009). *Trauma Stewardship: An everyday guide to caring for self while caring for others*. San Francisco: Berrett-Koehler Publishers.
- Van der Kolk, B.A. (2003) The neurobiology of childhood trauma and abuse. *Child and Adolescent Psychiatric Clinics*, 2003 Apr;12(2):293-317
- Vermilyea, E. (2000). *Growing beyond survival: A self-help tool kit for managing traumatic stress*. Baltimore, MD: Sidran Institute Press.
- Volk, K.T., Guarino, K., Edson Grandin, M., & Clervil, R. (2008). *What about you? A workbook for those who work with others*. The National Center on Family Homelessness: Newton Centre, MA.
- Wasco, S., Campbell, R., & Clark, M. (2002). A multiple case study of rape victim advocates' self-care routines: The influence of organizational context. *American Journal of Community Psychology*, 30, 731-760.
- Wilcox, P. (2011) *Remaining Hopeful in the Midst of Pain: Recognizing and Addressing Vicarious Traumatization*. Presentation at Detroit National Healthcare for the Homeless Regional Training

