

# PART 3: STRESS, TRAUMA AND YOU Stress, burnout & trauma

Welcome to a five part series of Fact Sheets on stress and trauma. The series will be looking at different aspects of stress and trauma, the differences and similarities, their impacts on emergency services workers, and ways to manage your reactions.

Stress and burnout are closely linked, but are not the same thing. Stress and trauma also share similarities, but are different. So what are the differences, and how can I tell?

We looked at stress in detail in Part 1 of the Stress Series (*Stress and Switching Off*), where we learned that stress is a response (physiological and psychological) to demands placed on an individual. Where it is experienced as negative, stress refers to the strain experienced when the demands exceed one's ability to cope.

A stressful lifestyle can put people under pressure to the point they feel exhausted, empty, burned out and unable to cope. Exhaustion is a normal reaction to stress, however when does stress become or contribute to the onset of burnout?

#### What is Burnout?

The term burnout originated in the 1970s to describe the consequences of severe stress and high ideals in "helping" professions.

Burnout refers to a condition that can result from prolonged stress and can be defined as a state of mental, emotional and physical exhaustion that results in loss of interest, cynicism, depersonalisation (a loss of empathy and connection to others), and

















decreased performance. The Black Dog Institute notes that it can cause a range of mental and physical symptoms, and has been linked with depression.

It is closely related to the work environment and often stems from your job, however lifestyle stress, thinking patterns and personality traits such as perfectionism or pessimism can also contribute. While much of the focus has been on occupational demands, other situations and roles can also cause burnout, such as study commitments for students, or caring duties.

The World Health Organisation (WHO) has identified consistent evidence that high demands, low control, and an imbalance between reward and effort are risk factors for mental and physical health problems. A Victoria Police Mental Health and Wellbeing Study (2017) of 5,884 employees found that almost 90% of respondents experienced burnout from their work to some degree.

Stress can be short term or chronic, and refers to the sense of "too much", i.e. the tension that results from demands, while burnout is more gradual and develops over time.

Some of the symptoms of burnout include:

- Physical and emotional exhaustion
- · Cynicism
- · Detachment and depersonalisation
- · Lack of empathy for others
- Feelings of ineffectiveness
- Apathy
- · Loss of motivation
- · Poor concentration
- · Sleep difficulties
- Physical symptoms headaches, gastrointestinal upset, increased illnesses
- · Changes in appetite
- Negative emotions such as irritability, frustration, anger
- Anxiety and worry

As you can see, some of them are the same as stress symptoms, however it is those hallmarks of emotional exhaustion, cynicism and reduced accomplishment that distinguish the burnout symptoms from general stress.

Compassion fatigue is another related term you may come across. The concepts of compassion satisfaction and compassion fatigue refer to the positive and negative

aspects of helping others, and are considered to make up one's overall *professional quality of life*.

Compassion fatigue refers to the negative aspects of being in a helping role, and is considered to be a combination of burnout and secondary trauma brought on by the care and helping provided by "helping" professions. Secondary trauma is akin to vicarious trauma and the terms are often used interchangeably. They describe the indirect exposure to trauma that results in trauma symptoms.

Most of us have days where we feel overloaded and overwhelmed. If you feel like this most of the time however, you could be heading for burnout. Burnout is a gradual process, so learning about the signs can help you recognise them sooner rather than later, and use strategies to help yourself. Apps have been developed to assist. One such app is *Provider Resilience* which was developed by the Defence Health Agency in the US. It offers psychoeducation and self-assessment on professional quality of life, burnout and compassion fatigue.







Provider Resilience app.

## So where does trauma fit in?

The key differences lie in the causes, their impact and how they manifest in symptoms, but we can think of trauma as a specific type of stress response that occurs under certain conditions.

The word trauma comes from the Greek word for wound or injury. Like a physical trauma causes a physical wound, so can a traumatic event cause a psychological wound. The term trauma can be used to both refer to the event itself, as well as the impacts of the event.

A traumatic event is defined as one that involves experiencing or witnessing events that are typically (but not always), sudden and unexpected, where there is a real or perceived threat to life or physical integrity, and outside the range of normal human experiences.

Traumatic stress (or post-traumatic stress) refers to the reactions that occur in response to a traumatic event. While many people experience negative events that can have profound impacts, such as the death of a loved one, family breakdown or a chronic illness, these are not thought of in the same way as trauma, as they are considered within the range of human experience.

As a result of their occupational duties, emergency services workers are routinely exposed to traumatic events in the course of their work. *Beyond Blue* found that around half (51%) of all employees had experienced traumatic events that significantly affected them.

The following are common traumatic stress reactions. You will notice many of them are also general stress reactions, although there are some differences:

#### **PHYSICAL**

- Fatigue/lethargy
- · Tremors or shakes
- Increased heart rate, blood pressure
- Headaches
- · Muscular tension/aches
- Nausea
- Upset stomach/gastrointestinal symptoms
- Sweating
- Teeth grinding
- Dizziness
- Agitated

#### **EMOTIONAL**

- Numbness
- · Low frustration tolerance
- Anxiety
- Easily upset
- Fear
- Agitation
- Horror
- Irritability/Anger
- Overwhelmed
- · Disconnected or numb
- Shock
- Guilt

#### COGNITIVE/MENTAL

- Changes in alertness
- Trouble remembering parts of the incident
- · Problems with memory
- Time distortion
- Disturbed dreams
- Preoccupied with memories of the incident
- Intrusive thoughts
- Confusion
- Poor attention/concentration
- Easily distracted
- Self-doubt
- · Change in world view

#### **BEHAVIOURAL**

- Inability to rest
- · Wanting to be alone
- Hypervigilant
- Changes in interest/ participation in social activities
- Feeling jumpy or easily startled
- Changes in appetite, activity, sleep, sex
- Increased alcohol, smoking, drugs or food intake

Put it this way - traumatic experiences are always stressful, however stressors are not always traumatic.

## What can I do about them? Is it all doom and gloom?

The causes and symptoms may be different, but many of the strategies and skills used to manage stress, burnout, and traumatic responses are similar. Part 1 of this Series "Stress and Switching Off" has a lot of helpful information.

The emergency services are one of a number of groups who are at a higher risk of exposure to multiple traumatic events, however developing long term problems is not an inevitable outcome. While we have explored a lot of the negative impacts of stress and trauma, we need to maintain a focus on the things we can do every day that set us up for good mental health and wellbeing. Having good routines and paying attention to our sleep, diet, exercise, social supports and mood will ensure we are in a good position to be resilient and withstand the challenges that come our way.

## Want further help or resources?

The following apps have tools, strategies and resources to help track and manage symptoms of stress, burnout and trauma:

**Equipt** - developed by Victoria Police, The Police Association Victoria and Phoenix Australia

**PTSD Coach** - designed for the military by Phoenix Australia

**Provider Resilience** - developed by Defence Health in the US

**High Res** - developed by the Australian Dept of Veteran's Affairs

MyPulse is here to help manage your health and wellbeing today for a better tomorrow. For more information on mental health and wellbeing check out other posts and resources available through MyPulse (www.mypulse.com.au).

Printed Fact Sheets are available from Wellbeing Support (wellbeing@dpfem.tas.gov.au) Further information is also available at

**www.phoenixaustralia.org** -Phoenix Australia, Centre for Posttraumatic Mental Health

www.positivepsychology. com/stress-managementtechniques-tips-burn-out/

www.mindtools.com/pages/ main/newMN\_TCS.htm

www.bebrainfit.com/category/ stress-relaxation/













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#### **GET HELP NOW**

You can access a range of confidential services, which are designed specifically for the Tasmanian emergency services community from Wellbeing Support.

Ambulance Tasmania Peer Support 6166 1994

CISM 0427 181 207 | manager@cism.tas.gov.au

**Wellbeing Support Psychological Services** 

Phone (office hours) 6173 2188 | wellbeing@dpfem.tas.gov.au

Wellbeing Support Officers:

South 0429 453 689 or 0436 800 604 North 0436 812 038 North West 0419 126 551

Further general information is available at mypulse.com.au

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