

Guidelines for a Vicarious Trauma-Informed Organization

Employee and Volunteer Assistance Program

WHAT IS A VICARIOUS TRAUMA-INFORMED ORGANIZATION?

Vicarious trauma (VT), the exposure to the trauma experiences of others, is an occupational challenge for the fields of victim services, emergency medical services, fire services, law enforcement, and others. Working with victims of violence and trauma changes the worldview of responders and puts individuals and organizations at risk for a range of negative consequences (Bell, Kulkarni, and Dalton, 2003; McCann and Pearlman, 1990; Newell and MacNeil, 2010; Vicarious Trauma Institute, 2015; Pearlman and Saakvitne, 1995; Knight, 2013). A **vicarious trauma-informed organization** recognizes these challenges and proactively addresses the impact of vicarious trauma through policies, procedures, practices, and programs.

For more information on vicarious trauma and its effects, visit <https://vtt.ovc.ojp.gov/>.

(NOTE: Although these guidelines were created by a victim services organization, they contain insights and practices that first responder organizations can modify for their own use.)

What Is an Employee and Volunteer Assistance Program?

Many organizations provide access to an employee assistance program (EAP). However, not all EAPs offer services to volunteers or have counselors with an awareness of and training on the impact of VT. To complement this type of service, an organization may want to establish an employee and volunteer assistance program (EVAP), an internal vicarious trauma-informed resource for both staff and volunteers. A vicarious trauma-informed EVAP provides free, confidential services from a senior clinical staff member (or an external consultant) who has experience and a solid knowledge base of trauma and vicarious trauma. These services include referrals for counseling and other support services. This model can be modified depending on the size, needs, and resources of the organization.

How Does an EVAP Address the Effects of Vicarious Trauma?

- It demonstrates leadership's understanding of VT as an occupational challenge and their moral and ethical responsibilities to concretely address the needs of their staff and volunteers (Bell, Kulkarni, and Dalton, 2003; Hesse, 2002; Johnson, 2012).
- It provides a supportive and confidential setting, available at flexible times, where staff and volunteers can discuss the individual challenges they face because of their trauma exposure.
- It lessens the stigma of seeking help and empowers staff and volunteers to use its services.
- It assesses the need for referrals to outside services and provides opportunities for individuals to make broader and beneficial community connections (Bell, Kulkarni, and Dalton, 2003; Choi, 2011).

Recommendations for Establishing an EVAP

- Articulate, both verbally and in writing, the rules and limitations of confidentiality, recordkeeping, and whether recommendations made in EVAP sessions are suggestions or mandates.
- Explain the broad range of issues and situations that staff and volunteers can bring to an EVAP and the assistance it can provide, including but not limited to—
 - crisis stabilization plans,
 - assessment of personal supports,
 - referrals to counseling, and
 - discussion of self-care strategies for relaxation, mindfulness, and other forms of healing.
- Identify consultants, staff members, or others to lead the EVAP, preferably individuals who understand the organization's internal structure. However, these individuals must not be the direct supervisors of the EVAP participants.

- Develop creative ways to address the needs of particular subgroups of employees (e.g., employees and volunteers who are also parents, clinicians who are bilingual, people whose work isolates them either physically or geographically).
- Create mechanisms for soliciting and responding to feedback about the accessibility and usefulness of the EVAP.
- Maintain accurate and up-to-date information about the resources available to staff and volunteers, costs of external services, and insurance and other financial support options.

Recommendations for Providing EVAP Services

- Begin EVAP sessions by discussing ground rules and expressing appreciation for the individual's use of the service.
- Educate EVAP participants about VT.
- Reduce the stigma associated with using the service by making its use a regular, normal part of working as victim service providers (Bell, Kulkarni, and Dalton, 2003).

Alternatives to Establishing an Internal EVAP

- Establish linkages with allied or partner organizations that can provide VT-relevant services to staff and volunteers.
- Develop a list of resources for staff and volunteers with details about the purpose of the outside services and how to access them.

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This product was produced by Northeastern University's Institute on Urban Health Research and Practice, in collaboration with the Boston Area Rape Crisis Center, and supported by grant number 2013-VF-GX-K011, awarded by the Office for Victims of Crime, Office of Justice Programs, U.S. Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this product are those of the contributors and do not necessarily represent the official position or policies of the U.S. Department of Justice.

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