Who helps the helpline workers?

Compassion fatigue and vicarious trauma in the helplines sector

Vicarious trauma is a well-established risk for mental health care providers, helpline teams, first responders and those working to support people who have experienced grief, loss or trauma. It can also be known as secondary traumatisation, secondary stress disorder or insidious trauma.

Helplines take millions of calls a year from vulnerable callers, they can offer generalised, or highly specialist support, and play a critical role within society.

People who contact a helpline may be in distress and may be discussing suicidal feelings, or complex and traumatic incidents that may have occurred in their lives. This can impact on the people who hear and respond to these calls and contacts.
Past experiences

Helpline staff and volunteers come to the sector through different routes. They can have a range of motivations in seeking work within a helpline environment.

Vicarious trauma issues in helpline teams are complex, not least because the impact of challenging call content can affect people in different ways. One individual may experience feelings of trauma after a contact which would not trigger negative emotional states in another individual.

Some people come to the sector having experienced complex challenges within their personal lives, or someone close to them, and want to use that experience to help others. These people, with lived or close experience, may be more susceptible to experiencing vicarious trauma through their role on a helpline.

Approaches to helpline work

There are three different approaches to helpline work that people tend to naturally fall in to:

- **Rescuers** who want to make everything better, over identify with callers and become ‘super-heroes’ that can solve everything.

- **Problem solvers** who are solution focussed and can use a lot of time and energy trying to find resolutions.

- **Call facilitators** who are aware the problem belongs to the caller but the process is their responsibility.

Helpline workers that tend towards the rescuer approach can feel personally responsible, or can trigger memories, stresses or current worries where the subject matter of the call can mirror something in the helpline worker or volunteer’s personal life.

They can feel that they should have been able to fix the situation even when it’s not their role.

Impact on helpline teams

The Covid-19 pandemic has increased the risk of vicarious trauma for many helpline workers as a result of the length, complexity and content of calls and contacts to their service.

In research carried out by Helplines Partnership in July 2020, 70% of members who took part said they had concerns for their helpline team’s wellbeing.

Speaking in the 2020 BBC film ‘Coronavirus: Domestic abuse - ‘You’re with each other 24/7’, Solace, Women’s Aid, said as lockdown restrictions began to lift their helpline team were receiving ‘very long, emotional, exhausted phone calls’.

These types of calls and the volume will impact on the people responding to these calls. For those with lived experience, listening to a distressed caller can return them to a situation they have moved on from.

The lack of a resolution on a call can also be hard, with call handlers sometimes wishing that a particular caller would contact again so that they know they were ok.
What is vicarious trauma?

Vicarious trauma is a term for the emotional changes a person can experience when helping people who have traumatic stories to tell.

Vicarious trauma can also be known as secondary traumatisation, secondary stress disorder or insidious trauma. It can lead to compassion fatigue or burnout, and the symptoms can be like those of first-hand trauma experiences.

The accumulative effect of hearing and responding to traumatic events can negatively impact on social behaviours, emotional wellbeing, physical health, behaviour and cognitive reasoning.

The risks for helpline teams

Helplines are able to focus on a whole systems approach to care and support. Unlike some statutory services, helplines can be accessed without a referral or diagnosis.

The sector supports areas of public service delivery and the intervention from helpline workers helps reduce emergency admissions and support people to access services in the most appropriate way possible. However, as statutory services are cut the complexity and length of the calls is increasing.

In research carried out by Helplines Partnership, members told us that the number of calls between 20-30 minutes has increased by 19% since 2017. Average helpline call length over the last three years is between 10 - 20 minutes.*

Increased call times can mean that it is harder for other callers to get through. The knowledge that potentially vulnerable callers are unable to access the helpline for support over the course of a shift due to lack of capacity can be challenging for helpline teams.

Differences between contact channels

Contact through webchat, email and forums can be particularly challenging for staff.

Helpline teams can find themselves responding to short message written in a very direct way, which in a phone conversation may be more nuanced.

Written messages can allow service users to 'dump and run', to say express some highly challenging and complex issues that they are dealing with, and then leave the chat environment before support can be given.

These situations may be particularly challenging for the people who work and volunteer on helplines because there is no resolution to the problem, no support given with identifying next steps and no end to the story.

In research carried out by Helplines Partnership in 2015, helpline managers reported email contacts as needing extra time and analysis work, because the email has to be 'unpicked' before a response can be written. Telephone contact was viewed as being less of a risk for helpline workers, because it allows more in depth exploration of the issues raised by the person contacting the service.
**Staff support and self-care**

Even with good debriefing and supervision, individuals will feel sad or frustrated about the things people are experiencing - this is part of empathising.

Clear professional boundaries and well honed empathetic skills are essential to protect teams against the risk of vicarious trauma.

Having well communicated and accessible support structures in place to support helpline teams is critical to help mitigate against the risk of vicarious trauma.

Helpline teams themselves need to need to know how to offload and how to take care of themselves, recognising they too have a responsibility to practice self-care.

Types of support used by helpline organisations to support helpline teams include:

- Training on managing calls
- Group debriefs at the end of shifts
- Individual debriefs
- One-to-one support on a regular basis
- Group supervision on a regular basis
- Informal peer support
- Colleagues who provide 'buddy' support
- Reflective practice sessions with an external professional
- Trained counsellors to support teams
- Debriefing after a difficult or challenging call

Helpline teams should have a clear understanding of the process to escalate calls and how to access the help and support of their team leader or helpline manager.

Having clear boundaries on service provision within helplines is recognised as being a characteristic of a well-run and well managed helpline that supports and protects their team members.

Having an optional approach can lead to people who are most in need of support from missing out, or can create an internal culture where people feel that they are perceived as being not as strong if they access support.

Research carried out by Helplines Partnership in 2015 found that helpline managers strongly felt that accessing support services should be mandatory for helpline staff and volunteers.

**Measures to manage the risk**

Vicarious trauma is a real and pressing issue for helplines. It impacts on helpline teams, helpline managers and the service itself.

It presents a significant risk for the wellbeing of staff and volunteers within the sector, and in the provision and delivery of helpline services.

Establishing support structures, training and clear and well-understood policies and procedures, along with a clear focus on self-care helpline teams can mitigate against the risks of vicarious trauma, burnout and compassion fatigue.

**Learn more**

We offer vicarious trauma training, online and face-to-face that explores the signs, the risks and ways to mitigate against them. [Helplines Partnership Training](https://www.helplines.org)