Cristina Garcia
DOLAN LAW FIRM, P.C.

Understanding secondary traumatic stress suffered by PI attorneys

THE EFFECTS OF VICARIOUS TRAUMA ON TRIAL LAWYERS WHO REPRESENT CLIENTS SUFFERING FROM CATASTROPHIC INJURIES

When was the last time you intentionally took time away from your professional responsibilities to engage in an activity that brought you genuine enjoyment or restoration? If that question gives you pause, you are not alone. As trial lawyers, our profession often demands sustained intensity and unwavering focus, particularly in the weeks and months leading up to trial. Within this environment, personal well-being can easily become secondary to the needs of our clients.

Trial lawyers who represent individuals suffering from catastrophic injuries or survivors of sexual abuse are routinely exposed to the trauma experienced by their clients. Effective advocacy requires careful review of medical records, personal histories, and other material detailing profoundly distressing experiences. This is all necessary to properly tailor the written discovery as well as to prepare for depositions. In addition, attorneys must repeatedly recount their client's traumatic incident to opposing counsel, mediators, and juries. Over time, this continual engagement with traumatic content can lead to secondary traumatic stress, posing significant yet often underrecognized implications for attorney mental health and overall well-being.

The Raging-River Analogy

The impact of secondary trauma can be effectively illustrated through the Raging-River Analogy, a conceptual framework frequently used to explain trauma exposure across professional settings. In this analogy, imagine that the client lives at the center of the raging river, which represents the ongoing stressors in their daily life. Their lawyer stands at the edge of the river as a huge boulder is dropped just in front of the client. The resulting surge creates towering waves that immediately engulf the client, knocking them off balance and repeatedly submerging them. The force of the water overwhelms the client, who struggles to remain standing amid the relentless current.

Although positioned at the river's edge, the lawyer is not immune to the effects of the disturbance. Over time, the waves and ripples generated by the boulder reach the lawyer as well. While these waves differ in intensity from those experienced by the client, they share the same origin and characteristics. Compounding this effect, lawyers stand at the intersection of many such rivers, simultaneously receiving waves and ripples from different directions, symbolizing the various traumatic events experienced by different clients.

The Raging-River Analogy offers a useful visual framework for understanding vicarious trauma, secondary traumatic stress, and compassion fatigue. The raging river represents the client's ongoing exposure to stress and adversity. The boulder signifies the traumatic event itself. The initial, powerful waves reflect the client's direct experience of trauma, while the subsequent ripples and lesser waves illustrate the secondary trauma experienced by the lawyer through repeated exposure to the client's narrative and suffering.

As litigators, attorneys are required to maintain rigorous focus on the facts and procedural posture of each case. At the same time, as counselors, lawyers must provide reassurance and support to their clients. An obligation that necessarily calls for empathy and compassion. When this emotional engagement is combined with repeated exposure to client trauma, attorneys may experience significant physical and emotional depletion over time.

What are vicarious trauma and secondary traumatic stress?

Vicarious trauma refers to the profound impact that repeated exposure to others' traumatic experiences can have on helping professionals' own emotional and or mental well-being. Through sustained engagement with clients' pain and suffering, attorneys may begin to internalize aspects of that trauma, particularly when empathy and compassion are consistently required as part of effective representation. Over time, this process can lead to vicarious traumatization.

Two related concepts to vicarious trauma are compassion fatigue and secondary traumatic stress, which arise from indirect or secondary exposure to trauma rather than from firsthand experience. Compassion fatigue was initially studied among first responders, nurses, and physicians who routinely encounter the trauma of those they serve. It is now widely recognized, however, that lawyers and other helping professionals face similar risks due to the emotional demands and cumulative effects of their work.

Compassion fatigue

Charles R. Figley, Ph.D., founder of the Traumatology Institute and holder of the Paul Henry Kurzweg, M.D. Chair in Disaster Mental Health

at Tulane University, is widely recognized for his seminal work on compassion fatigue. Dr. Figley describes compassion fatigue as the emotional and physical exhaustion that can develop in helping professionals as a result of prolonged exposure to others' suffering. Over time, this depletion may lead to diminished empathy, as empathy itself is a finite resource. The emotional cost of sustained, high levels of empathic engagement in professional settings is often reflected in an individual's reduced capacity to connect compassionately outside of work with family, friends, or even oneself.

As noted in *Compassion Fatigue in Emergency Medicine: Current Perspectives*, "The cognitive, emotional, psychological, and physical investment of caregivers is a zero-sum prospect; they only have so much to give and, when pushed beyond their limits, they can no longer effectively care for the needs of others." (See Jeanmonod, Irick, et al. (1995), National Library of Medicine.)

In 1995, Dr. Figley refined the concept of compassion fatigue to apply principally to secondary traumatic stress (STS), a term used to describe trauma experienced indirectly through exposure to the traumatic experiences of others rather than through direct personal experience. His work has been instrumental in advancing the understanding of stress-related conditions among helping professionals, emphasizing that compassion fatigue represents the "cost of caring" and may manifest symptoms similar to Post-Traumatic Stress Disorder (PTSD) in those affected by secondary trauma. (See Figley, C.R. (Ed.), (1995) *Compassion Fatigue: Coping with Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized*.)

Continuous secondary exposure to traumatic material can result in vicarious trauma. Psychologists Laurie Anne Pearlman and Kay Saakvitne coined the term "vicarious trauma" to describe the profound and enduring shift in worldview that occurs in helping professionals who work extensively with traumatized individuals. Through repeated exposure to clients' traumatic experiences, trial lawyers may experience alterations, and in some cases damage to their fundamental beliefs about safety, trust, and the nature of the world. (See Saakvitne, K.W.; Pearlman, L. A., & the Staff of the Traumatic Stress Institute (1996): *Transforming the pain: A workbook on vicarious traumatization*. New York: W.W. Norton.)

In the American Diagnostic and Statistical Manual of Mental Disorders – Fifth Edition (DSM-5), trauma is described briefly as "Exposure to actual or threatened death, serious injury, or sexual violence." (American Psychiatric Association. (2013) (5th ed.).) Secondary trauma is a concept that has received significant scholarly attention in recent years. In *Therapy After Terror: 9/11, Psychotherapists, and Mental Health*, Karen M. Seeley examines the 2001 World Trade Center attack from the perspectives of New York City mental health professionals who treated the psychologically wounded following the attack. (Seely, K.M. (2008). Cambridge, UK; Cambridge University Press.)

Seeley, a licensed clinical social worker, offers a comprehensive examination of the work and experiences of psychotherapists in the aftermath of 9/11. At the heart of the book, she examines the ways in which the psychotherapists were affected by the constant exposure to their patients' trauma. She highlights that many counselors working with survivors began to display symptoms of PTSD.

Seeley referred to this phenomenon as trauma contagion. Although she distinguished trauma contagion from vicarious trauma, the effects are very similar. The constant exposure to the trauma causes the helping professional to develop symptoms similar to those of PTSD. In 2013, DSM-5 introduced an additional category of causation of PTSD by repeated or extreme exposure to details of the event(s), i.e., vicarious trauma, and usually in the course of professional duties.

Based on a growing body of research, it has become apparent that professionals exposed to descriptions, images, or recordings of their clients' trauma may experience harmful secondary effects. Unfortunately, within the legal profession, trauma is often addressed through a conventional lens that minimizes its existence or urges lawyers to acclimate to it. Adopting a trauma-informed approach provides lawyers with meaningful opportunities to forgo destructive coping mechanisms and instead thrive in their profession while reducing the risk of burnout. By overcoming stigma and maximizing protective strategies, lawyers can prioritize their mental health, thereby enhancing their capacity to advocate effectively for their clients. Vicarious trauma manifests through both physical and emotional symptoms that, if left unaddressed, may give rise to maladaptive behaviors, including substance abuse.

Symptoms of vicarious trauma

Vicarious trauma (VT) is cumulative in nature and may have profound effects on an attorney's personal and professional functioning over time. Attorneys experiencing VT often exhibit a range of physical and emotional symptoms that signal the impact of sustained secondary exposure to traumatic material. One hallmark feature of vicarious trauma is a shift in fundamental beliefs about the world, including altered perceptions of safety, trust, and human nature.

Repeated engagement with clients' trauma may lead some attorneys to adopt increasingly cynical worldviews, characterized by an exaggerated sense of danger or a belief that others are inherently harmful.

These cognitive shifts frequently extend beyond the workplace and affect personal relationships with family and friends. For example, attorneys who are parents may become excessively controlling or overprotective, restricting their children's independence due to heightened perceptions of risk. While legitimate dangers undoubtedly exist, vicarious

trauma can result in hypervigilance and disproportionate fear responses that exceed objective assessments of risk. Such changes underscore the far-reaching consequences of vicarious trauma and its potential to disrupt both professional effectiveness and personal well-being.

Physical and emotional symptoms

The secondary stress experienced by personal injury trial lawyers can manifest in both physical and emotional symptoms. Attorneys experiencing VT may exhibit physical signs such as elevated levels of cortisol, sleep disturbances, hair loss, gastrointestinal problems, weight gain, chronic fatigue, headaches, impaired immune response, and an increased heart or respiratory rate. In addition to physical symptoms, attorneys experiencing VT can also experience the following emotional symptoms: emotional numbness, hopelessness, irritability, feeling disillusioned by humanity, cynicism, and hypervigilance.

The impact of vicarious trauma extends beyond individual well-being, affecting both professional and personal relationships. Attorneys experiencing VT may withdraw or isolate themselves from colleagues, friends, and family. Activities that were once pleasurable may no longer provide satisfaction, and interpersonal connections at work and home may weaken. Sustained VT can erode an attorney's capacity for compassion, resulting in diminished empathy or sympathy for others. In some cases, individuals may feel that they have lost the ability to connect emotionally with friends, family, or even themselves. Emotional numbness, often functioning as a psychological defense mechanism, can further strain relationships. For example, an attorney may respond to a loved one's difficulties with detachment or unconsciously compare personal or familial challenges to the traumatic experiences of clients, thereby amplifying feelings of disconnection.

Vicarious trauma and substance abuse

Unfortunately, repeated exposure to client trauma can increase the risk of substance abuse. Chronic stress associated with VT can impair impulse control, learning, and memory functions. As a result of the physical and emotional symptoms caused by VT, the person may resort to alcohol and/or drugs as a coping mechanism or a method of self-medication for the symptoms. Attorneys suffering from VT may also resort to destructive coping behaviors such as gambling, taking undue risks, or over/under eating. In addition, aggressive, explosive, or violent outbursts and behaviors are also destructive coping behaviors that are commonly exhibited by individuals experiencing VT. For this reason, it is crucial to recognize the signs of VT early to address the issue effectively and prevent further harm.

Preventing burnout

Vicarious trauma and burnout are distinct conditions, though they can overlap in symptoms and impact. VT and compassion fatigue may contribute to burnout, which is a state of physical, emotional, and mental exhaustion caused by long-term exposure to and involvement with emotionally demanding situations. Burnout may lead to attorneys leaving their jobs or the practice of law entirely. To prevent burnout, attorneys should conduct regular self-assessments to identify symptoms of vicarious trauma and address them proactively.

Perform self-assessments

It is important to conduct a self-assessment or check-ins with yourself to determine if you are experiencing VT. In many instances, attorneys will continue to advocate for and engage with their traumatized clients but fail to realize that they are ignoring or suppressing their own vicarious trauma to continue their work.

VT symptoms such as energy depletion or exhaustion, and feelings of cynicism, may also lead to burnout. Therefore, attorneys who do not recognize the VT symptoms may be placing themselves at higher risk for burnout and compassion fatigue, which can affect both their interactions with clients and overall life functionality. There are several VT assessments online that attorneys can access to self-evaluate. The following is only one of many VT assessments available online: https://www.vcba.org/wp-content/uploads/2025/08/1-Trauma-Toolkit-Vicarious-Trauma-Assessment.pdf

Self-care is central to the capacity to care for your clients

An attorney cannot provide the empathy and support necessary for effective client representation if they are emotionally numb or detached. Fortunately, attorneys can be proactive in identifying VT symptoms and mitigating its negative effects. While there are steps that can be taken at an organizational level to support a firm's attorneys and help reduce VT, there are also certain proactive measures that attorneys may implement at an individual level to avoid or alleviate the negative effects of vicarious trauma.

Although self-care will vary for each individual, experts recommend strategies such as setting clear boundaries, taking regular vacations, and making time for hobbies and leisure activities. Pursuing interests outside of work allows attorneys to build relationships with people outside their profession, creating opportunities for conversations that are not work-related. Examples of hobbies and leisure activities include gardening, baking, hiking, golfing, journaling, painting, and cycling.

Additionally, experts emphasize the importance of regular exercise, meditation, and sufficient sleep as part of a comprehensive self-care plan. Finally, it is important to connect with others, by maintaining nurturing relationships and meaningful contact with family, friends, and colleagues.

Lawyers exposed to prolonged secondary trauma who exhibit symptoms of vicarious trauma or burnout should consider therapy or other forms of professional counseling. There are several trauma-informed modalities, such as Eye Movement Desensitization and Reprocessing (EMDR), Acceptance and Commitment Therapy (ACT), and Cognitive Behavioral Therapy (CBT), which can be highly effective. Although these approaches differ in methodology, each is designed to address and mitigate the impact of trauma on the individual. Scholars in the field recommend seeking early therapeutic intervention to mitigate the negative effects of VT.

Why does this matter?

In California, lawyers have a fundamental ethical duty under Rule 1.1 Competence to maintain the mental, emotional, and physical fitness required to provide competent representation. It is well established that substance abuse impairs a lawyer's ability to competently represent their client and is a serious violation. Therefore, an attorney experiencing symptoms of vicarious trauma may also be at risk of being mentally, emotionally, or physically unfit to provide effective representation. VT can impair judgment and increase mental health issues, substance abuse, and burnout. Therefore, it is crucial to engage in self-assessments, pursue hobbies or leisure activities, take vacations, and seek therapeutic intervention.

Representing individuals who have experienced trauma can be demanding, unremitting, and at times overwhelming, yet it is also deeply meaningful work. Attorneys have the privilege of hearing their clients' stories during some of the most painful moments of their lives and bear the responsibility of advocating vigorously on their behalf. Therefore, it is essential for attorneys to prioritize their well-being so that they can effectively advocate for their clients.

Cristina Garcia is a trial attorney with the Dolan Law Firm, P.C. *Her practice focuses on litigating catastrophic injury and wrongful death cases arising from vehicle collisions, premises liability, and product liability. She also focuses on sexual abuse and neglect in school cases. She serves as one of the vice chairs for the CAALA Diversity, Equity, and Inclusion Committee. Cristina may be reached by email at Cristina.Garcia@dolanlawfirm.com.*