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Vicarious Trauma in the Legal Profession

By Kyra Hazilla

As a profession, we are snail-paced in our adoption of new ideas, technology, and change. According to Dr. Larry Richard, former lawyer-turned-researcher and consultant on lawyer psychology, lawyers score “very low on openness to change”—lower, in fact, than other change-resistant professions like accountants, engineers, and actuaries. In some areas, however, we are beginning to demonstrate some cognitive flexibility.

The past 20 years have seen a revolution in our understanding of the concept of vicarious trauma in legal practitioners, as well as an about-face in our willingness to talk about our experiences of the cost of caring.

As a fresh-faced, starry-eyed public defender in 2006, my efforts to discuss secondary trauma received a chilly reception. Colleagues and supervisors chuckled nervously, made jokes, and rolled their eyes. While discussions of this topic were commonplace in social work training programs and counseling circles, legal professionals were dismissive. Now, almost two decades later, students are coming out of law school well-versed in the symptoms of secondary trauma and its inevitability. *The biggest shift is widespread acknowledgement that experiences of secondary traumatic stress are ubiquitous for helpers in the legal profession, rather than the result of individual vulnerabilities among practitioners.*

We understand that legal practice is full of suffering. Few people visit lawyers on a good day. In some areas of law—like criminal, immigration, juvenile, civil rights, domestic relations, and many others—heartache, terror, and horrific facts are everywhere. It is now understood that we cannot wade into the cruelty and anguish of the world and emerge unscathed. Even when the facts precipitating the legal case are fairly benign, the historical information is often replete with terrifying stories. If the file is not already full of nightmarish narratives, gathering information from clients or witnesses often results in yet more traumatic material. And for many people (professionals like lawyers and judges included), participating in legal proceedings can be a trauma of its own.

What Is Trauma?

The Diagnostic and Statistical Manual of Mental Disorders (DSM) defines “trauma” as exposure to actual or threatened severe injury, sexual violence, or death to oneself or to significant others.¹ The exposure can be firsthand or learned from a loved one. Most importantly, exposure includes observing “repeated or extreme details” of the traumatizing event through one’s work.² The recognition that we experience trauma from “secondary” exposure is a recent addition to the DSM and thus allows a diagnosis of Post Traumatic Stress Disorder (PTSD) without having directly witnessed the event itself. The practice of diagnosis has caught up with what helpers in many professions have long known—

roles involving repeated exposure to distressing material can create trauma-exposure symptoms in the helper. If those symptoms are severe enough, a helping professional may qualify for a diagnosis of PTSD.

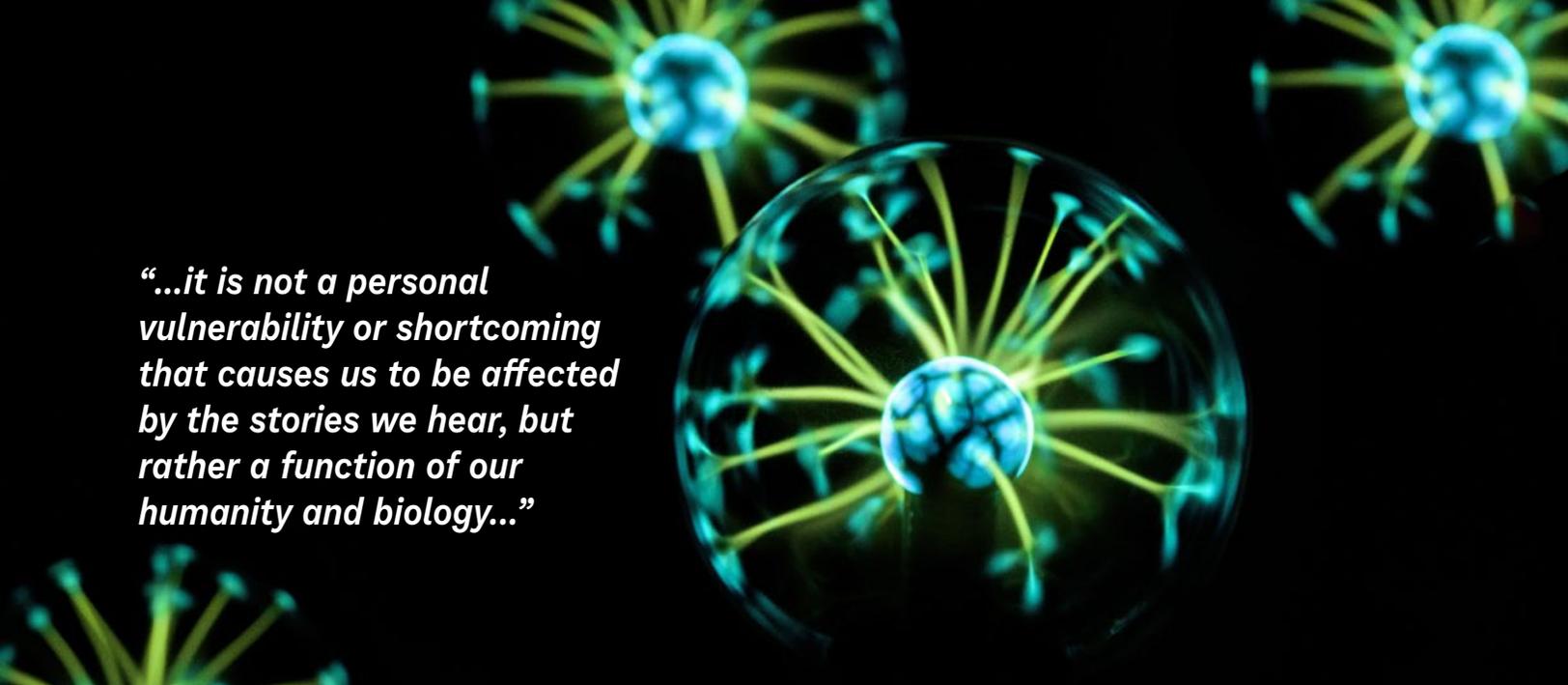
How Does Vicarious Trauma Affect Legal Professionals?

Lawyers are exposed to a great deal of traumatic material. Contact with this subject matter can be through viewing graphic images or recordings, listening to individuals describe their traumatic experiences, or reading reports or other documentation of traumatic events. It can also be through witnessing firsthand someone’s interaction with the legal system or law enforcement, or seeing the effects of a recent trauma, including physical injuries or psychological symptoms. While lawyers are rarely directly exposed to the events that clients face, repeated or extreme exposure to the aversive details of the incidents necessitating by legal representation will affect the professionals involved. Even if hearing about the trauma does not result in symptoms severe enough to qualify for a diagnosis of PTSD, professionals can and do experience trauma-exposure responses.

The phenomenon of being affected by indirectly experiencing traumatic events in a professional setting has a number of names. This author prefers “vicarious trauma,” but compassion fatigue, secondary traumatic stress, and countertransference are all accepted terms. This experience is often described as “the cost of doing business,” and it is so prevalent among helping professionals that researchers call it “inevitable.”

This is a huge price for lawyers and judges to pay for doing important work. Even lawyers who do not experience significant interference in their functioning—such that would qualify for a PTSD diagnosis—are affected by constant exposure to traumatized people and traumatizing material.

Our capacity for empathy creates this distress when we hear about or see other people’s trauma. Our brains are hardwired to try to understand another’s emotional experiences by feeling the sensation of their emotion inside our own bodies.



“...it is not a personal vulnerability or shortcoming that causes us to be affected by the stories we hear, but rather a function of our humanity and biology...”

The biological mechanism responsible for this phenomenon—mirror neurons—was discovered in the context of physical actions. For example, when we see someone lift a glass and take a sip of water, a small percentage of our glass-lifting-water-sipping neurons light up. The same process happens when we observe someone in physical or emotional pain. Researchers believe around 10 to 20% of our sensory neurons are mirror neurons. We are wired for empathy, which means we actually experience the sensation of someone else’s pain. Our mirror neuron system is also triggered by hearing about or reading descriptions of other people’s life events.

What Does Vicarious Trauma Look Like?

While the idea that legal professionals are affected by the stories they hear is relatively new, some research supports this theory. In a 2003 study of criminal and family court attorneys, lawyers were more affected by secondary traumatic stress than mental health professionals.³ In a 2011 study of public defenders, 34% met the criteria for secondary traumatic stress and 75% met the criteria for functional impairment (the point at which exposure to this material negatively impacts functioning in work, recreation, and home life).

How can a practitioner determine whether they are affected by vicarious trauma? Both juvenile

law-specific professional challenges and personal factors influence our trauma exposure and its effect on us. (The risks are higher for lawyers and judges in juvenile court than for other practice areas because human beings are more impacted by exposure to children’s trauma.) Other challenges specific to this practice area are: high caseloads; resource scarcity; and repeated interactions with other vicariously traumatized professionals. In the 2011 study of public defenders, the researchers found three other contributing factors (which are also issues facing juvenile law attorneys): lack of respect from the public and other lawyers for their work; lack of control in work-life balance; and insufficient time to process issues and give or get support.

Any attorney with a history of personal trauma is more likely to be negatively affected by vicarious trauma if the historical trauma has not been adequately integrated into the lawyer’s sense of self. Exposure to other people’s trauma can activate one’s previous experiences. In addition, personality characteristics such as perfectionism and a high level of empathy without self-compassion put legal professionals at even greater risk. If a professional’s reserves are low because of personal stressors such as divorce, a sick child or parent, financial stress, or chronic illness, they will be more susceptible when exposed to traumatic material.

The symptoms of vicarious traumatization mirror the symptoms of direct trauma exposure. People

cope differently, but symptoms can include cynicism or change in worldview; irritability; difficulty concentrating; mood swings; feeling isolated or estranged from others; avoidance of thoughts, clients, work, or personal activities; memory changes; hypervigilance and overactive startle response; anxiety; intrusive thoughts or images; nightmares; anger; physical symptoms like stomachaches and headaches; sleep disturbances; and burnout. Practitioners may identify with one or more of these symptoms. For a more in-depth exploration, see the Professional Quality of Life Scale: http://www.proqol.org/uploads/ProQOL_5_English_Self-Score_3-2012.pdf.

How Can We Mitigate Vicarious Trauma?

Looking at other professions with similar (or even more intense) trauma exposure and comparing rates of vicarious trauma as well as protective interventions can be helpful. Fascinatingly, mental health professionals report vicarious trauma and post-traumatic stress symptoms at much lower rates than attorneys and judges. This holds true even when the content that lawyers and mental health professionals are exposed to is almost identical. Researchers hypothesize this is partly because the legal profession doesn't provide lawyers with adequate trauma training or formal structures for "debriefing and supervision" (a term of art mental health providers use to describe professional consultation regarding the emotional content of their work, along with discussions about other issues such as ethics questions, case management, resources, and so on).⁴

Awareness

Building awareness so we can understand the risks and mechanisms for secondary trauma exposure offers some protection against the effects. When we recognize it is not a personal vulnerability or shortcoming that causes us to be affected by the stories we hear, but rather a function of our humanity and biology, we can attend to our experience with equanimity. In other professions like medicine, counseling, and education, practitioners receive ample training in areas such as risk factors, recognizing signs and symptoms, and strategies to address the trauma

that will inevitably flow from the work. The legal profession is beginning these conversations, but additional work is needed, especially for more experienced practitioners who did not benefit from the education and training on this subject that law students receive now.

Balance

Articles and podcasts recommend we seek "balance" when addressing vicarious trauma—but what does that mean? One aspect of balance is creating meaningful variety in the types of matters in a practitioner's caseload. For example, a full caseload replete with children's trauma (for juvenile law attorneys) or cases involving Measure 11 sex offenses (major felony attorneys) or all asylum cases is more likely to cause vicarious trauma than a mixed caseload. Another facet of balance is equilibrium in the way lawyers engage in their work. For legal professionals, specifically, control and autonomy over their work—meaning choosing how, when, and where to do their work—is strongly predictive of protection from the deleterious effects of secondary trauma.⁵

What about fostering work-life balance? Leading researchers warn against white-knuckling through the days or weeks until we can get some respite from the trauma onslaught. The most important skill is learning to achieve some nervous system regulation during the course of every day. "If you are going to stop figuratively holding your breath through the workday, then you must learn to breathe while you are at work."⁶ When we begin to recognize our stress response during the workday (not just when it accumulates over time) and develop the ability to acknowledge both the distress of the work and the good moments, our nervous system is protected.

Developing the skill of noticing that parts of any job in a trauma-rich environment are high stress, parts are low stress, parts are boring or neutral, and some parts are pleasant creates an opportunity for present-moment awareness that counteracts the stress response. As an added benefit, attention placed on your own body language and body regulation is helpful for you and your clients. Using open body language, gentle eye contact, and staying out of a client's physical space without permission calms everyone's body.



“If you are going to stop figuratively holding your breath through the workday, then you must learn to breathe while you are at work.”

When your body is calm and your breathing is deep and slow, that influences the people around you. Mirror neurons can vicariously calm us while we communicate nonverbal cues of safety, reducing stress and reactivity for clients and other court participants.

Connection

The idea that we ought to notice how we are faring in our workplaces in the moment, and make space for the distressing events rather than trying to avoid them (or bear them only as long as we have to), and then leave our work at work, is novel for many of us. We need allies in our professional lives who allow us to hold space in this way. Learning to speak with each other about the emotional content of our work is one of the most protective actions lawyers can take. One strategy is to engage in debriefing with supportive colleagues. This involves talking with coworkers or other practitioners one-on-one or in a group about the emotional responses we have to our cases and our work. This debriefing is different from the typical case consultation, strategic planning, or venting about the frustrations of practice. Developing and maintaining relationships with people who understand your work and buoy your spirits uses the social engagement system of your brain to soothe the trauma response. Feeling connected to the meaning of your work or something larger in the community can help combat many of the symptoms of vicarious trauma. Connection can also mean reaching out to

professional supports like a mentor, a therapist, or an attorney counselor at the Oregon Attorney Assistance Program.

Attending to and discussing the hard parts of trauma-heavy work is only half of the equation. Nurturing our “compassion satisfaction”—the positive emotional experiences we have in response to the professional help we provide to others—is an important part of protecting ourselves. When we do this in the moment, throughout our day, we care for our nervous system and its need for down regulation and recognition that “stressful work” does not mean ceaseless stress. When we engage in regular conversations with peers and supervisors about what feeds us in our work, we again lower our risk.⁷ Professions with a structure for this conversation, such as clinical supervision for counselors, see fewer trauma exposure responses.

The OAAP has developed a support group model called Engagement Groups to help practitioners in high-trauma environments access support for the challenges in this type of legal work. These groups borrow from other professions: the Balint group processes for physicians (offering a place for medical professionals to speak about the emotional content of their work) and group supervision or consultation for therapeutic clinicians. Having a safe space to discuss the challenges and heartache of this difficult work protects practitioners. Sharing mistakes, despair, overwhelm, and other reactions to the work

of helping professions, as well as common trauma symptoms, reduces isolation and shame. Participants also assess their own compassion satisfaction and highlight the positive moments that sustain them.

If you are practicing in a high-trauma area of law, you are being exposed to trauma and are thus at risk for vicarious trauma. If you notice that exposure to suffering people and hard stories are getting to you, great job at having this awareness! There are many things you can do to take care of yourself, and you are welcome to reach out to the OAAP for free and confidential support. If you feel that an Engagement Group could be helpful to you or your workplace, please get in touch with the OAAP to join a group or to partner with you in bringing this to your community. ●

– **KYRA HAZILLA**
JD, LCSW, Director and
Attorney Counselor, OAAP



OTHER WORKS BY KYRA HAZILLA AT OAAP.ORG

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- What Is Mindful Listening and How to Build Your Listening Muscles (Spring 2025)
- How to Be an Ally for Nondrinkers (Fall/Winter 2024)
- Voices of Well-Being in the Legal Community, coauthored with Tanya Hanson (Summer 2024)

Sidebar: Trauma Exposure Responses

1. Helplessness and hopelessness
2. A sense that one can never do enough
3. Hypervigilance
4. Diminished creativity
5. Inability to embrace complexity
6. Minimizing
7. Chronic exhaustion and physical ailments
8. Inability to listen and deliberate avoidance
9. Dissociative moments
10. A sense of persecution
11. Guilt
12. Fear
13. Anger and cynicism
14. An inability to empathize or numbing
15. Addictions
16. Grandiosity

Source: Laura van Dernoot Lipsky, *Trauma Stewardship: An Everyday Guide to Caring for Self While Caring for Others* (2009)

ENDNOTES

1. DSM 5
2. DSM 5
3. As a dually trained lawyer and mental health professional, this makes perfect sense to this author because mental health practitioners have been talking about vicarious trauma—by any of its many names—for years. Legal professionals, on the other hand, are expected to be emotionless, logical pinnacles of reason. Having feelings in response to our cases was historically seen not as a sign of our common humanity but rather as a sign of susceptibility or weakness.
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5. Varker, T., Denison, M., Fredrickson, J., Lethbridge, R. & Phelps, A., “Literature review: Strategies to Address Vicarious Trauma in the Legal Profession,” \ Victorian Legal Services Board & Commissioner, September 5, 2024, <https://lsbc.vic.gov.au/resources/literature-review-strategies-address-vicarious-trauma-legal-profession>
6. Miller, Brian, *Reducing Secondary Traumatic Stress: Skills for Sustaining a Career in the Helping Professions* (Routledge, 2025).
7. Dehlin and Lundh, “Compassion fatigue and compassion satisfaction among psychologists: Can supervision and a reflective stance be of help?,” *Journal for Person-Oriented Research*, National Library of Medicine, December 26, 2018, <https://pubmed.ncbi.nlm.nih.gov/33569136/>

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