Compassion Fatigue: Do You Have It? How to Treat it?

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Compassion Fatigue vs. Burnout

- Cost of empathy
- Specific reaction to working with trauma history of survivors
- Occurs only with specialized work
- Onset often sudden
- May lead to changes in trust, feelings of control, intimacy issues, safety concerns, intrusive imagery

- Generalized stress of working with difficult clients & situations
- Occurs in any profession
- Feeling overloaded
- Progresses gradually
- Emotional exhaustion
- Does not necessarily lead to changes associated with personal life
Commonalities

- Physical symptoms
- Behavioral symptoms
- Work-related issues
- Interpersonal problems
- Decrease in concern & esteem for clients
- Decline in quality of care
SYMPTOM CATEGORIES: Physical Symptoms

- Fatigue (physical exhaustion)
- Sleeping difficulties
- Somatic problems
SYMPTOM CATEGORIES: Emotional Symptoms

- Irritability
- Anxiety
- Depression
- Guilt
- Sense of helplessness
SYMPTOM CATEGORIES: Behavioral Symptoms

- Aggression
- Callousness
- Pessimism
- Defensiveness
SYMPTOM CATEGORIES: Behavioral Symptoms

- Cynicism
- Avoidance of clients
- Substance abuse
- Physically or Verbally Acting-out
SYMPTOM CATEGORIES: Work-Related Symptoms

- Quitting the job
- Poor work performance
- Absenteeism
- Tardiness
- Constantly seeking avoidance of work
- Risk-taking
SYMPTOM CATEGORIES: Interpersonal Symptoms

- Perfunctory communication
- Inability to concentrate
- Social withdrawal
- Lack of a sense of humor
- Poor client interactions
Definition of Compassion Fatigue

- Compassion fatigue is a state of tension and preoccupation with traumatized clients by:
  - re-experiencing the traumatic events
  - avoidance/numbing of reminders
  - persistent arousal (e.g., anxiety)
THE COMPASSION TRAP

- It is the inability to let go of the thoughts, feelings and emotions useful in helping another, long after they are useful.
Compassion Fatigue is characterized by a set of symptoms sometimes disconnected from real causes, a set of symptoms triggered by other experiences, and being highly treatable once the worker recognizes and acts.
## Professional Quality of Life Scale

<table>
<thead>
<tr>
<th></th>
<th>Compassion Satisfaction</th>
<th>Burnout</th>
<th>Compassion Fatigue</th>
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</thead>
<tbody>
<tr>
<td><strong>Bottom Quartile</strong></td>
<td>32</td>
<td>19</td>
<td>8</td>
</tr>
<tr>
<td><strong>Average</strong></td>
<td>37</td>
<td>23</td>
<td>13</td>
</tr>
<tr>
<td><strong>Top Quartile</strong></td>
<td>41</td>
<td>28</td>
<td>17</td>
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Burnout

**DEFINITION:** A state of extreme dissatisfaction with one’s work.

Work-Climate View (Christine Maslach):

“Burnout is not a problem of the people themselves but of the social environment in which people work.”

(Maslach & Leiter, 1997)
Key Work Dimensions

Fully Engaged  versus  Burned Out
Energy             Exhaustion
Involvement        Cynicism
Efficacy           Ineffectiveness

- The client cannot function psychologically at a higher level than the helper.
- In a parallel fashion, it is hard for a worker to function at a higher level than the boss.
- Only energized people can continually care for others in need and do it over and over again.
Six Work Environment Sources of Burnout

1. Work overload vs. Sustainable workload
2. Lack of control vs. Feelings of choice/control
3. Insufficient reward vs. Recognition/reward
4. Unfairness vs. Fairness, respect, justice
5. Breakdown of Community vs. A sense of community
6. Value conflict vs. Meaningful, valued work
Negative Work Culture

- Negativity is easy to catch.
- Negativity is seductive—at first when one gets it; he/she feels better. Venting helps initially, but does not lead to solutions; instead leads to more venting.
- Difficult to offer hope to clients within a critical, cynical work environment.

Solution: May include using an external consultant to turn work environment into a burnout prevention culture rather than a burnout creation one.
Creating a Positive Work Structure Within the Organization

1. Caring, competent, and committed leadership that promotes a healthy work environment.
2. Mentor and peer support are critical at the novice/new worker phase.
3. Workers need to have ongoing and enriching peer relationships.
4. Workers also need to be involved in creating health-promoting work environments.
Strengths-Based Supervision: Role of Supervisor

- Dual focus on both evaluating the worker and responsible for professional development of worker
- Serve as a role model
- Interpret and implement agency policies
Assumptions of Solution-Focused Supervision

- Supervisor provides opportunity for a worker to draw upon one’s inner resources.
- Resistance is viewed as “stuckness.” Collaborative atmosphere allows worker to be open to new options.
- Focus on the positive changes in workers behavior and skills.
- Small change leads to bigger changes.
- No single best way to do something.
Things a solution-focused supervisor says:

- Tell me about the best thing you did with a client this week
- What aspect of your job have you noticed you getting better at since the last time we met?
- What job responsibilities would be the most productive for us to focus on today?
When the worker brings up negative things, the supervisor says:

- Acknowledge the problem and then say: “as you begin to get better at dealing with this situation, how will you know that you have become good enough at it so you can handle it on your own?”

- What would you be doing differently?

- When you get to the point that you don’t need to deal with this issue in supervision anymore, how will you know?
Setting Expectations of Success

- On a scale of 1 to 10, with 1 being the problem at its worst, and 10 being the problem is completely solved, where would you say you are today?
- When you are on your way to the next highest number, how will you know?
- What in particular, will be different about the way you handle the situation?
- How will you have changed as an advocate?
Handling discouragement

- Even experiences that seem to be complete failures have small victories that have been overlooked.
- Tell me about a time when a small piece of change was already happening.
- When was there a time you felt you were going to be able to solve this problem?
Do’s and Don’ts of Phrasing Questions

- Avoid: subjunctive language: supposing a possibility:
  - Can you think of a time you were in tune with this client?

- Instead use: presuppositional language: assuming an actuality
  - Tell me about a time you were more in tune with this client:
    - How did you know to do that at just that moment?
    - Wow, what part of your experience did you tap into to come up with that?
Protective Factors for Workers

1. Workers directly engage in highly stressful professional dilemmas.
2. Workers confront and resolve personal issues.
3. Highly engaged learning is a powerful source of renewal for Workers.
Characteristics of Master or Well-Regarded Practitioners that Avoid Burnout and Compassion Fatigue

Cognitive Domain:

- Voracious Learners, insatiably curious.
- Accumulated experiences and thus wisdom are a major resource.
- Value cognitive complexity and the ambiguity of the human condition—profound understanding and acceptance of the human condition.
Emotional Domain:

- Emotional Receptivity defined as being self-aware, reflective, non-defensive, and open to feedback.
- Mentally healthy and attend to their own emotional well-being.
- Aware of how their emotional health affects the quality of their work.
- Deep acceptance of self.
- Intense will to grow.
- Passionately enjoys life.
Relational Domain

- Possess strong relationship skills—able to intensely engage others.

- Establish a strong working alliance with clients—believe in a client’s ability to change; the client’s ability for self-healing; helping paradigms: solution-focused, strengths-oriented;

- Have a strength of character and a personal power that enables them to face tough issues and challenge clients when needed.
Nurturing self through solitude and relationships

1. Participants foster professional stability by nurturing a personal life.
2. Participants invest in a broad array of restorative activities.
3. Participants construct fortifying personal relationships.
4. Participants value an internal focus.
References


