

This section is set up to provide a ready-made Brown Bag Session for you to use with employees and/or managers. Use as is, or adapt this information for a general employee group. You may reproduce as many copies as needed.

Compassion Fatigue What is it? How does it Relate to Stress & Burnout?

hat is compassion fatigue? Do you, or might someone you know be suffering from it? How does it relate to stress and burnout? The concept of compassion fatigue has emerged in recent years in professional literature. Compassion fatigue is a term coined by an RN, Carla Johnson, in 1992, to describe nurses who were worn down by daily hospital emergencies. Compassion fatigue is the emotional residue from exposure to working with people who are suffering, particularly those hurting from the consequences of traumatic events. Professionals who work with these individuals must contend with not only the normal stress or dissatisfaction with work, but also with the emotional and personal feelings for those who are suffering.

Professionals especially vulnerable to compassion fatigue include, but are not limited to: emergency care workers, counselors, advocate volunteers, and human service workers such as *EA professionals*. An individual who feels as though he/she is losing his/ her sense of self to the clients being served may be suffering from compassion fatigue.

Compassion Fatigue vs. Burnout

It is important to note that compassion fatigue is NOT the same thing as burnout. Burnout is closely associated with stress. It is cumulative and often predictable. However, compassion fatigue involves a state of tension and preoccupation with *another individual* or the cumulative trauma of *clients* (note the plural reference).

Compassion fatigue is similar to critical incident stress, in which the person is traumatized by something he/she has experienced or seen. However, an individual experiencing compassion fatigue is absorbing the trauma through the eyes and ears of someone else (namely, the caring professional's clients). Compassion fatigue may be thought of as secondary post-traumatic stress.

Like other stress and burnout, there are human costs associated with compassion fatigue. Job

performance goes down, while errors go up. Morale drops, and personal relationships are affected. Home lives may deteriorate, and the affected individual's personality may worsen, eventually leading to a decline in the person's overall health.

While starting out with the best of intentions, the professional experiencing compassion fatigue has developed a habit of caring too much for others, and not enough for themselves. The key, as in stress and burnout, lies in *balance*: in nutrition, between work and rest, vocation and recreation, and most of all, balance in perspective.

Stress vs. Burnout

Occupational stress is frequently associated with stressful working conditions, heart disease, depression, alcoholism, drug abuse, work-related and family violence, and divorce.

Most of us become stressed at times, but when stress becomes overwhelming it can lead to burnout. Burnout is a severe form of stress that results from an individual feeling "overtaxed" physically and mentally over an extended period of time.

Coping with Stress

Early warning signs of stress include loss of sense of humor, low tolerance for frustration, hypersensitivity, becoming isolated, and difficulty concentrating or staying focused on work-related tasks. Symptoms of stress include:

- Skin rashes and allergies;
- Depression;
- Use of alcohol and/or other drugs;
- Increased smoking;
- Increased blood pressure;
- Headaches;
- Poor appetite;
- Loss of sexual drive;
- Apathy;
- Irritability;
- Relationship problems;



- Anxiety and crying spells;
- Heart problems;
- Withdrawal;
- Increased sickness;
- Decreased amount of sleep; and
- Increased absenteeism and tardiness.

Other adverse reactions of stress include job dissatisfaction, alcohol dependency or other substance abuse, and mental illness.

Coping with Burnout

Burnout can be indicated by feelings of:

- Hopelessness;
- Helplessness;
- Guilt;
- Inadequacy or failure;
- Cynicism;
- Disillusionment;
- Suspicion; and
- Resignation and indifference.

Correlations of burnout include:

- Overextension, including too much overlap between work and family life;
- Conflicting demands;
- Lack of autonomy; and
- Administrative hassles.

It should also be noted that there is rarely any correlation between burnout and the amount of money earned. An individual earning a large salary might not feel that stressed, and an employee drawing a much lower wage could be experiencing a great deal of stress.

Why Employers Should Care

Regardless of individual differences, research has confirmed the *overall* harm that stress has on employers and employees. Stress is directly related to absenteeism, diminished productivity, increased employee turnover, and direct medical, legal, and insurance fees, accidents, and workers' compensation claims.

An estimated 40% of employee turnover is due to stress. The Xerox Corp. estimates that typical employee turnover costs \$2,000 to \$3,000 per employee. All told the cost to U.S. employers is estimated to be \$200 billion annually.

Are YOU Suffering from Compassion Fatigue or Burnout?

The following self-test may help determine if an individual is suffering from, in particular compassion fatigue, but also burnout. However, it is not intended as a substitute for medical advice or diagnosis. Consult a physician or mental health professional to discuss the results.

(Write in the number of the best response to each of the following questions using one of the following answers: 1 - rarely or never; 2 - attimes; 3 - not sure; 4 - often; 5 - very often.)

- 1. <u>I</u> force myself to avoid certain thoughts or feelings that remind me of a frightening experience.
- 2. <u>I find myself avoiding certain activities or</u> situations because they remind me of a frightening experience.
- 3. <u>I have gaps in my memory about frighten-</u> ing events.
- 4. ____ I feel estranged from others.
- 5. _____ I have difficulty falling or staying asleep.
- 6. <u>I have outbursts of anger or irritability</u> with little provocation.
- 7. _____ I startle easily.
- While working with a victim I thought about violence against the person(s) who victimized.
- 9. ____ I am a sensitive person.
- 10. _____ I've had flashbacks connected to clients and families.
- 11. ____ I've had first-hand experiences with traumatic events in my adult life.
- 12. _____ I've had first-hand experiences with traumatic events in my childhood.
- 13. ____ I've thought that I need to "work through" a traumatic experience in my life.
- 14. _____ I've thought that I need more close friends.
- 15. _____ I've thought that there is no one to talk with about highly stressful experiences.
- 16. ____ I've concluded that I work too hard for my own good.



Items about clients and their families:

- 17. ____ I'm frightened of things traumatized people and their family have said or done to me.
- 18. ____ I experience troubling dreams similar to a client of mine and their family.
- 19. _____ I've experienced intrusive thoughts of sessions with especially difficult clients and their families.
- 20. <u>I've suddenly and involuntarily recalled</u> a frightening experience while working with a client or their family.
- 21. ____ I'm preoccupied with more than one client and their family.
- 22. ____ I'm losing sleep over a client and their family's traumatic experiences.
- 23. <u>I've thought that I might have been</u> "infected" by the traumatic stress of my clients and their families.
- 24. ____ I remind myself to be less concerned about the well-being of my clients and their families.
- 25. I've felt trapped by my work as a helper.
- 26. _____ I've felt a sense of hopelessness associated with working with clients and their families.
- 27. ____ I've felt "on edge" about various things that I attribute to working with certain clients and their families.
- 28. ____ I've wished that I could avoid working with some clients and their families.
- 29. _____ I've been in danger working with some clients and their families.
- 30. _____ I've felt that some of my clients and their families dislike me personally.

Items about being a helper and your work environment:

- 31. ____ I've felt weak, tired, and run down as a result of my work as a helper.
- 32. ____ I've felt depressed as a result of my work as a helper.
- 33. <u>I am unsuccessful at separating work</u> from personal life.
- 34. ____ I feel little compassion toward most of my co-workers.
- 35. <u>I feel I am working more for the money</u> than for personal fulfillment.
- 36. <u>I find it difficult separating my personal</u> life from my work life.

- 37. <u>I have a sense of worthlessness, disillu</u>sionment, resentment associated with my work.
- 38. ____ I have thoughts that I'm a "failure" as a helper.
- 39. ____ I have thoughts that I am not succeeding at achieving my life goals.
- 40. ____ I have to deal with bureaucratic, unimportant tasks in my work life.

SCORING INSTRUCTIONS:

Make sure you responded to ALL questions. Next, circle the following 23 items: 1-8, 10-13, 17-26 and number 29. Now, ADD the numbers you wrote next to the items circled. Note your risk of compassion fatigue:

26 or less – Extremely low risk 27 to 30 – Low risk 31 to 35 – Moderate risk 36 to 40 – High risk

To determine the risk of **burnout**, add the numbers you wrote next to the items NOT circled. Note the risk of burnout:

19 or less – Extremely low risk 20 to 24 – Low risk 25 to 29 – Moderate risk 30 to 40 – High risk

Summary

Whatever specific form the stress takes (i.e. burnout, compassion fatigue, etc.) when stressful situations (at work) go unresolved, the body is kept in a constant state of activism, which increases the rate of wear and tear on biological systems. Ultimately, fatigue or damage results, and the ability of the body to repair and defend itself can become seriously compromised. As a result, the risk of injury or disease escalates.

The costs associated with stress, burnout, and compassion fatigue, as cited earlier, are substantial – not only on a personal level, but on a company's bottom line. Businesses that ignore these issues do so at their own peril.

Sources: Gary Yeast, BA, MS, MS, LMFT, Fellow AAMFT; Ace-Network; National Institute for Occupational Safety and Health; and Florida State University Psychosocial Stress Research Program.



You've Heard it Before but ... Take Care of Yourself



... Professionally

- Work with management to develop an organizational plan to address work-related stress and staff self-care.;
- Integrate "self-care" into supervision sessions.;
- Recognize and acknowledge that compassion fatigue is occurring.;
- Control the amount of stress and duration of stress when delivering services.; and
- Take breaks from serving others.

...Personally

- Physical exercise;
- Adequate sleep and rest;
- Healthy diet;
- Slow down and relax;
- Set realistic expectations for yourself;
- Decide what are real priorities;
- Look and find things you enjoy in life; and
- When helping "hurts," take extra care of yourself.

... Overcoming barriers to self-care

- Good relationships;
- Common sense;

- Moderation; and
- Open to corrective feedback.

... Organizational interventions

- Providing a safe environment;
- Improving communication;
- Including employees in decision making;
- Assessing and modifying the job; and
- Developing peer support groups, quality circles, etc.

... Coping strategies

- Training in assertiveness and self-control;
- Social support and supportive relationships;
- Lifestyle management (i.e. work/life balance, etc.);
- Humor;
- Recommendations from EAPs; and
- Methods to increase relaxation, including exercise, music, reading, and other hobbies and recreation.

Source: Gary Yeast, BA, MS, MS, LMFT, Fellow AAMFT.