

Case study 1:

Nurse, 26 years old, female, works in Cancer Hospital, USA

Feels overwhelmed. In a bad week so many patients may die that she has little time to cope. She tries her best to care for them.

There is considerable turnover of staff, absenteeism and low morale.

'I get discouraged when patients families are not satisfied with the care and (because of the illness) have their own negative outlooks'

'The pressure is on every day, every day I see sad things and death'

'I feel emotional and physical stress and sometimes I have to disengage from my patients'

'Nurses can lose empathy so that they dread or avoid some patients which risks substandard care.'

'Nurses can become rude and cynical so that patients do not ask for help. The nurse patient relationship breaks down'

Modified from an article:

<http://online.wsj.com/article/SB10001424052970204720204577128882104188856.html>

Case study 2:

Family doctor, 38 years old, male, works in USA

He is tired, cynical and lonely.

He is angry because the system forces him to see more patients for less time.

He feels annoyed with some patients who seem to be so demanding.

Even talking with his wife no longer helps him to feel less isolated.

Many doctors may feel:

- That they see more patients, do more paperwork, negotiate more contracts yet have less autonomy. But they have their own high standards to maintain. And can't.
- In the past the relationship they had with patients and their families helped them to do the job. Now they don't have the time to appreciate the respect and appreciation that patients want to share with them.
- To save time they eat lunch whilst dictating patients' notes or returning phone calls. They don't have the time to do the things that would help them, like taking exercise, having a hobby, sharing meals with their family or just quiet thinking.
- They may think 'If only other people would do their job properly and not make mistakes then I would have more time.'
- They wake up feeling tired 'Sometimes I feel I don't have any compassion left to give, even after a restful weekend.'

Modified from an article:

<http://www.aafp.org/fpm/2000/0400/p39.html>

Case study 3:

A volunteer worker at an animal shelter for unwanted, abandoned and stray animals.

Case study 4:

The manager of the animal shelter. 2 other paid staff and 10 volunteer staff.

Disclaimer: RSPCA and Humanebeing do not necessarily endorse or recommend any of the above sources of information. Information is provided in good faith for individual study only

The Five Freedoms

- Freedom to express normal behaviour
- Freedom from fear or distress

Definitions of Welfare

- Duncan I & Dawkins MS (1983):
'(Welfare) is a broad concept that encompasses such notions as physical and mental health, harmony with the environment, the animal's feelings and adaptation without suffering'

Professional Quality of Life

Compassion Satisfaction	Compassion Fatigue
<ul style="list-style-type: none">• The positive aspects of helping• The 'good things'	<ul style="list-style-type: none">• The negative aspects of helping• The 'bad things'

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Compassion Satisfaction

Stress Work-related stress Post-traumatic stress

Compassion Fatigue

Secondary traumatic stress Burnout Depression

The stress response ~

Brain goes on alert, prepares the body to respond eg: releases

- Adrenaline; > strength and speed for fight or flight
- Cortisol;
 - Generates extra energy to focus on stress
 - Limits immune system and abilities to anticipate, think, empathise
- Endorphins; freeze response, numbs pain

~ Staffordshire County Council EPS (UK)

Cortisol ~

- When exposed to trauma, chemical reactions in the body and brain can remain switched on and ready for action – eg. high levels of cortisol
- Being startled or experiencing sensory reminders of past trauma/stress instantly puts body into survival mode, even if there is no real need.
- Prolonged high levels of cortisol can be damaging;
 - cell death in brain hippocampus (memory and learning)
 - triggers dysfunctional fight/flight (hyper-arousal)

~ Gerhardt 2004 & Staffordshire County Council EPS (UK)

Compassion Fatigue Symptoms*

Work Related

- Avoidance or dread of working with certain patients
- Reduced ability to feel empathy towards patients or families
- Frequent use of sick days
- Lack of joyfulness

*

Source: American Nurses Association

<http://online.wsj.com/article/SB10001424052970204720204577128882104188856.html>

Compassion Fatigue Symptoms*

Physical

- Headaches
- Upset stomach, digestive problems
- Muscle tension
- Insomnia, too much sleep
- Fatigue
- Chest pain/pressure, palpitations, elevated heart rate

Compassion Fatigue Symptoms*

Emotional

- Mood swings
- Restlessness, Irritability, Oversensitivity, Anxiety
- Excessive use of nicotine, alcohol, illicit drugs
- Depression, Anger and resentment
- Loss of objectivity
- Memory issues, Poor concentration, focus and judgment

Compassion Fatigue - Warning signs

Personal

- Blaming
- Diminished sense of personal accomplishment
- High expectations
- Inability to maintain balance of empathy and objectivity

Organisational

- Blaming
- Late for work
- Workaholic culture
- Low morale

Modified from an article:

<http://www.aafp.org/fpm/2000/0400/p39.html>

Develop your own self-care plan ^

- (For carers).. your personal identity is closely tied to your professional role
- try not to attribute compassion fatigue to a character flaw
- the pain of compassion fatigue is uncomfortable but normal
- it will reduce once you start caring for your physical and emotional needs

[^] Modified from an article: <http://www.aafp.org/fpm/2000/0400/p39.html>

Develop your own self-care plan ^

- Spend plenty of quiet time alone: Reconnect with your inner, spiritual self
- Daily maintenance: diet, exercise
- Hold one focused, connected and meaningful conversation each day: Time with family and close friends is often lost first

[^] Modified from an article: <http://www.aafp.org/fpm/2000/0400/p39.html>

Develop your own self-care plan ^

Do:

- Get enough sleep.
- Take some time off.
- Develop interests outside of work.
- Identify what's important to you.

[^] Modified from an article: <http://www.aafp.org/fpm/2000/0400/p39.html>

Develop your own self-care plan ^

Don't:

- Blame others
- Work harder and longer
- Self medicate
- Neglect your own needs and interests

^ Modified from an article: <http://www.aafp.org/fpm/2000/0400/p39.html>

Organisational strategies

- Avoid transferring stress from one person to another
- Consider job rotations
- Avoid accepting workaholic habits
- Provide time out to talk, reflect
- Find out about 'Schwartz rounds'
(<http://www.guardian.co.uk/society/2013/jun/04/us-strategy-combat-compassion-fatigue-healthcare>)
- What else could YOU do?

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Title: Defeating Compassion Fatigue.
Authors: Joslyn, Heather
Source: Chronicle of Philanthropy. 4/4/2002, Vol. 14 Issue 12, p37. 3p. 1
Color Photograph.

DEFEATING COMPASSION FATIGUE

Charities seek ways to prevent employees from burning out

Diane Less Baird, president of Angels for Animals, a shelter and pet-owner education center in Greenford, Ohio:

Employees of animal-related charities, such as shelters that euthanize unwanted pets, can also be hit hard by compassion fatigue -- and contribute to high annual turnover rates at some shelters. Unlike every other type of charitable work, killing is a part of the job at most animal shelters. "You can only hold so many animals in your arms and feel the life go out of them," she says, "without it starting to suck the life out of you."

Carol A. Brothers, a clinical psychologist in Annapolis, Md., who conducts compassion-fatigue workshops for animal shelters around the country: ... Shelters tend to encourage workers to remain stoic when euthanizing or turning away unwanted pets, and those workers may be less likely than other charity employees to get support from people outside of work, either. "People in their lives start saying to them, 'Oh, my God, it's only a dog,'"

For those who wish to prevent compassion fatigue -- or manage it effectively when it occurs -- charity managers and traumatic-stress experts offer the following advice:

1. Tell new or prospective employees what to expect. "Any person being interviewed for a job needs to be informed of what the toll will be," says Mr. Figley. "Many organizations don't do that, and that's a mistake."..... "We recognize that compassion fatigue is probably inevitable in the work we do" Barbara L. Bouton, animal center director.

2. Establish support systems. Giving employees opportunities to talk about the emotional aspects of their workWhere possible, some charities might consider rotating people out of particularly tough assignments after a period of time, says Garnie Mitchell, Hospital manager. Her organization shifts employees between inpatient and outpatient duties to prevent work-related stress. Informal support can also help, such as providing timeout rooms for employee use, says Ms. Brothers.

3. Encourage workers to talk about their feelings. After a particularly traumatic event occurs at work, start a conversation about it. "People worry that if employees start showing their feelings, they'll just start breaking down all over the place and they won't do their jobs," says Ms. Brothers. "The truth is, when people can show their feelings, they do better work. They have more energy."

If a manager notices an employee's behavior has changed, he or she should take the initiative and gently address the issue, says Ms. Mitchell. Persuade the worker to take a self-test that measures compassion fatigue, she says, and encourage him or her to seek help if needed.

Be careful about making conclusions about how employees will handle a traumatic event at work. Some will already have healthy coping skills. Be sensitive. Professor Stamm, Idaho State University.

Employees may worry that talking about their feelings will adversely affect their careers."They need to realize, 'No, there isn't anything wrong with me. I just need a little help.'" Ms. Dillon

4. Consider seeking outside help. If an organization performs a lot of work with traumatized patients or clients, it might want to seek training for its counselors in treating secondary traumatic stress.

5. Look out for your own needs and encourage employees to do the same. A healthier environment for helping professionals, says Mr. Gentry, begins with the people in charge. "They can learn to manage themselves to lower their own anxiety," he says, "so they don't (transfer) their anxiety on to their staff."

Above all, Mr. Figley suggests that professionals who suffer from compassion fatigue give themselves a break. He says they should focus on the things they are doing right. "Think logically," he advises. "What are your responsibilities, your limitations? Have you given yourself the same support you give your patients?"

Extracts above have been edited

Title: Burnout or compassion fatigue?
Authors: Frandsen, Betty MacLaughlin¹
Source: Long-Term Living: For the Continuing Care Professional. May2010, Vol. 59 Issue 5, p50-52. 3p.

"Preventing Burnout" by psychologists Herbert Freudenberger and Gail North

10 phases of burnout:

1. A compulsion to prove oneself,
2. working harder,
3. neglecting one's own needs,
4. displacing conflicts by ignoring the root cause of the distress,
5. revision of values in which friends or hobbies are ignored,
6. denial with emergence of cynicism and aggression,
7. withdrawing from social contacts and/or
8. using alcohol or substances to cope,
9. inner emptiness,
10. depression, and actual burnout syndrome.

Work-related causes of burnout for individuals include:

- feeling little or no control over their workload,
- a lack of recognition or rewards for good work,
- and working in a high-pressure environment.

Lifestyle causes include:

- working too much without time for relaxing,
- taking on too much responsibility without adequate help from others,
- not getting enough sleep,
- and lack of supportive relationships.

Personality traits make some individuals more likely to experience burnout and include perfectionist tendencies, a pessimistic view of self, reluctance to delegate, and a Type A, high-achiever personality

Compassion Fatigue occurs as caregivers consistently give out more energy and compassion than they receive, and manifests itself as physical, emotional, and spiritual exhaustion.

Extracts above have been edited

Psychology Today:

Compassion Fatigue

Bodily symptoms of empathy

Published on July 4, 2012 by Susanne Babbel, Ph.D., M.F.T. in Somatic Psychology

Medical professionals such as physicians, nurses, psychotherapists, and emergency workers who help traumatized patients may develop their own Post Traumatic Stress Disorder (PTSD) symptoms as an indirect response to their patient's suffering. This phenomenon has been referred to as compassion fatigue, vicarious traumatization or secondary traumatic stress.

Researchers and authors such as Babette Rothschild, Charles Figley, Laurie Anne Pearlman, Karen Saakvitne, and B. Hudnall Stamm have recognized that medical personnel and psychologists may experience trauma symptoms similar to those of their clients. They speculate that the emotional impact of hearing traumatic stories could be transmitted through deep psychological processes within empathy. Further, Babette Rothschild hypothesizes that it is the unconscious empathy, the empathy outside awareness and control, that might interfere with the well being of the caregiver.

Since caregivers commonly dissociate, staying connected or reconnecting to one's identity and physical presence has been rated as very important as well. Some professional helpers use visual or kinesthetic reminders of their lives outside of their work. Visual reminders might be placing pictures of family, certificates, and favorite artwork in the office. Kinesthetic reminders bring awareness back to the body and might be accomplished by feeling one's feet on the floor, intentionally fiddling with a wedding ring or holding the office chair. One caregiver expressed that every time she closes the office door she uses the door as a kinesthetic reminder and says, "This is my life outside and that's where I'm entering."

<http://www.psychologytoday.com/blog/somatic-psychology/201207/compassion-fatigue>

Extracts above have been edited

Other sources of information:

Compassion Fatigue Awareness Project

<http://www.compassionfatigue.org/index.html>

Professional Quality of Life

http://www.proqol.org/Home_Page.php

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