Compassion Fatigue

As we give of ourselves to our patients or clients, it is so easy to get lost or out of focus. What started out to be our strength turns on us and becomes our enemy. That strength, if we are in this business, is usually compassion. But compassion has its boundaries, if it is not fed and nurtured. Without the self care and supervision we all need, a subtle but overwhelming exhaustion can set in. Compassion-fatigue is something that often just sneaks up and surprises us with its vengeance.

The following is a list of statements made by persons who have been impacted by their work with traumatized clients. This self-test is not intended to provide medical advice or diagnosis. Consult a physician or mental health professional if you think you might be suffering from Compassion Fatigue.

Consider each of the following characteristics about you and your
current situation. Write in the number for the best response. Use
one of the following answers.
1= Rarely/Never
2= At Times
3= Not Sure

4= Often 5= Very Often

1. I force myself to avoid certain thoughts or feelings that remind me of a frightening experience.
2. I find myself avoiding certain activities or situations because they remind me of a frightening experience.
3. I have gaps in my memory about frightening events.
4. I feel estranged from others.
5. I have difficulty falling or staying asleep.
6. I have outbursts of anger or irritability with little provocation.
7. I startle easily.

8. While working with a victim I thought about violence against the person or persons who victimized.	
9. I am a sensitive person.	
10. I have had flashbacks connected to my clients and families.	
11. I have had first-hand experience with traumatic events in my adult life.	
12. I have had first-hand experience with traumatic events in my childhood.	
13. I have thought that I need to "work-through" a traumatic experience in my lif	e.
14. I have thought that I need more close friends.	
15. I have thought that there is no one to talk with about highly stressful experiences.	
16. I have concluded that I work too hard for my own good.	
Items about your clients and their families:	
17. I am frightened of things traumatized people and their family have said or do to me.	ne
18. I experience troubling dreams similar to a client of mine and their family.	
19. I have experienced intrusive thoughts of sessions with especially difficult clients and their families.	
20. I have suddenly and involuntarily recalled a frightening experience while working with a client or their family.	
21. I am preoccupied with more than one client and their family.	
22. I am losing sleep over a client and their family's traumatic experiences.	
23. I have thought that I might have been "infected" by the traumatic stress of my clients and their families.	ÿ

24. I remind myself to be less concerned about the well-being of my clients and their families.	
25. I have felt trapped by my work as a helper.	
26. I have felt a sense of hopelessness associated with working with clients and their families.	
27. I have felt "on edge" about various things and I attribute this to working with certain clients and their families.	l
28. I have wished that I could avoid working with some clients and their families	3.
29. I have been in danger working with some clients and their families.	
30. I have felt that some of my clients and their families dislike me personally.	
Items about being a helper and your work environment:	
31. I have felt weak, tired, rundown as a result of my work as a helper.	
32. I have felt depressed as a result of my work as a helper.	
33. I am unsuccessful at separating work from personal life.	
34. I feel little compassion toward most of my co-workers.	
35. I feel I am working more for the money than for personal fulfillment.	
36. I find it difficult separating my personal life from my work life.	
37. I have a sense of worthlessness/disillusionment/resentment associated with m work.	ıy
38. I have thoughts that I am 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 have 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 41 or more = Extremely HIGH risk

To determine your risk of **Burnout**, ADD the numbers you wrote next to the items NOT circled.

Note your risk of Burnout

19 or less = Extremely LOW risk
20 to 24 = LOW risk
25 to 29 = Moderate risk
30 to 42 = High risk
43 or more = Extremely high risk

Copyright 1994, Florida State University Psychosocial Stress Research Program

Things to remember when trying to understand disaster events

- Profound sadness, grief and anger are normal reactions to an abnormal event.
- No one who sees a disaster is untouched by it.
- It is normal to feel anxious about you and your family's safety.
- Acknowledging your feelings helps you recover.
- Focusing on your strengths and abilities will help you to heal.
- Accepting help from community programs and resources is healthy.
- We each have different needs and different ways of coping.
- It is common to want to strike back at people who have caused great pain. However, nothing good is accomplished by hateful language or actions.

Signs that adults need stress management assistance

- difficulty communicating thoughts
- difficulty sleeping
- difficulty maintaining balance

- easily frustrated
- increased use of drugs/alcohol
- limited attention span
- poor work performance
- headaches/stomach problems
- tunnel vision/muffled hearing
- colds or flu-like symptoms.
- disorientation or confusion
- difficulty concentrating
- reluctance to leave home
- depression, sadness
- feelings of hopelessness
- mood swings
- crying easily
- overwhelming guilt and self-doubt
- fear of crowds, strangers or being alone

Ways to ease the stress

- Talk with someone about your feelings—anger, sorrow and other emotions—even though it may be difficult.
- Don't hold yourself responsible for the disastrous event or be frustrated because you feel that you cannot help directly in the rescue work.
- Take steps to promote your own physical and emotional healing by staying active in your daily life patterns or by adjusting them. This healthy outlook will help yourself and your family. (i.e., healthy eating, rest, exercise, relaxation, meditation.)
- Maintain a normal household and daily routine, limiting demanding responsibilities of yourself and your family.
- Spend time with family and friends.
- Participate in memorials, rituals and use of symbols as a way to express feelings.
- Use existing support groups of family, friends and church.
- Establish a family emergency plan. Feeling that there is something that you can do can be very comforting.

© 2001 U.S. Department of Health and Human Services

Source: The Center for Mental Health Services, U.S. Department of Health and Human Services,

http://mentalhealth.samhsa.gov/publications/allpubs/KEN-01-0097/default.asp

Preventing and alleviating "compassion fatigue"

There are several points covered below—do not expect all of them to apply to you. Please take what is useful for you and disregard what is not.

- First and foremost, you must take care of yourself as much as possible.
 Remember, if you don't take care of your own basic needs, you will not be able to care for others in the long run. If you burn out, who will take your place? In some situations this will be more possible than in others, but you must do the best you can!
 - o Get adequate sleep.
 - o Eat regular meals.
 - o Take breaks.
 - o Get exercise: run, walk, lift weights.
 - o Talk with family and friends often.
- In a crisis, you may be working seven days a week; however, as soon as
 possible reduce your work week to four to five days. What you are doing is so
 demanding and exhausting, you absolutely need time to rest and take care of
 basic things.
- Carry your resources with you in your mind, and with pictures or small objects that remind you of them. Create comforting images of favorite people, places and activities. Take mini-breaks frequently to call up these images in as much detail as possible. You need to remember you have a life and pleasures separate from the distressing (albeit valuable) work you are doing.
- Accentuate the positive. Rather than focusing most of your thoughts on the tragedy at hand, spend blocks of time thinking about the good you and the other helpers are doing. Pay attention to how many lives you are helping and saving more than how many were lost or destroyed.

Preventing and alleviating vicarious traumatization

When a helper "catches" the trauma of those being helped, vicarious trauma can develop. There are some simple things you can do to reduce your risk and possibly prevent this:

- Remember that you are not a victim, you are a helper. That means you have strength and resources available to use to assist others who do not have those abilities right now.
- You may feel "survivor guilt" that you have not suffered as much as those you are assisting. It is critical to remember that if you had, you would not be in a position to help!
- When hearing survivor stories, or when reflecting on your work, it is common to consciously or unconsciously create visual or auditory images of what has

happened to the victims, or to try to feel what it was like. This can actually be very harmful to you. Such imagery is a major factor in vicarious trauma because it makes you feel like a victim and/or eye witness. When possible, avoid the creation of such images and states. Instead, create other images—neutral or pleasant—to keep up your mood and strength.

If you find that visual and/or auditory images are inevitable, you can learn to control them. Try putting the visual image on a "screen" and the auditory ones on a "tape player" in your mind. Then practice manipulating the controls. For visual images, change the size and distance of the screen.

Slow down the action and speed it up. Change the color mix to black and white or sepia, etc. For auditory images, speed it up and slow it down, change the pitch, add in other sounds that might not belong; if there are speakers, change their voices. The idea is for you to learn that these are 100 percent your images and

you can control them rather than feeling victimized by them.

• As much as possible, avoid over-identifying with the people you are assisting. Internal language like, "That could have been me," "What if that happened to my child (parent, sister, etc.)?" "How could I ... if ..." etc. will all make your job harder. Remember, the advantage you have as a helper right now is that it did NOT happen to you. Because of that you have resources to help. Over-identification could risk sapping those resources.

If you continue to have difficulty with compassion fatigue or vicarious trauma, seek professional help.

By Babette Rothschild, MSW, LCSW

© 2005 Babette Rothschild, MSW, LCSW. Used with permission.