So You Didn’t Receive a Hard Hat at Orientation? Understanding and Addressing Compassion Fatigue

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Goals and Objectives

Goal: To increase knowledge and understanding of how working with those who have experienced trauma can impact us and how to manage the related challenges.

Objectives

- Participants will understand the distinctions between compassion satisfaction, burnout, and compassion fatigue
- Participants will be able to identify compassion fatigue related reactions in themselves and others and how these reactions impact professional and personal relationships
- Participants will learn strategies to manage compassion fatigue and increase personal resilience
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- A SAMHSA funded National Child Traumatic Stress Network (NCTSN) project site.
- A state-wide trauma-informed system of care for children who are suffering as a result of exposure to violence and trauma.
- Provides education, training, evidence-based treatment, and coordination of care to children who are suffering as a result of exposure to violence and trauma.
Stress Test
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“The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet.”

Rachel Naomi Remen, *Kitchen Table Wisdom* 1996
The Impact of Complex Trauma

Chronic childhood traumatic experiences, including exposure to violence, often impacts fundamental, psycho-social development. Primary domains of impairment include:

- Attachment
- Biology
- Affect Regulation
- Dissociation
- Behavioral Control
- Cognition
- Self-concept
Traumatic Stress and Substance Use: A Complex Relationship

- Trauma is a risk factor for substance abuse.
  - Self medication strategy to cope with traumatic stress symptoms.
  - Traumatic stress may make it more difficult for people to stop using (trauma reminders increase substance cravings).
- Substance abuse is a risk factor for traumatic stress.
  - Substance abuse leads to an increase in risky behaviors.
  - People already abusing substances may be less able to cope with a traumatic event.

Why Are They Acting This Way?

**Guilt + consumer = _______.**

- **Anger** – anger at self is displaced onto:
  - Providers: argumentative = “What do you mean I can’t get that service?”
  - Children: irritable, misattributions
  - Self: self-destructive, shame, relapse??

- **Anxiety** – withdrawn, disorganized
  - Can be triggered by substance withdrawal symptoms

- **Fear/Shame**- hypervigilant, “paranoid”,
  - Can I care for my family?
  - Are you judging me?
  - I’m not good enough.

Working with Others

STAND UNDER

Remember!

BUILD!

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Compassion Satisfaction

*Compassion Satisfaction* refers to “the pleasure you derive from being able to do your work well”

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Stamm (1999)
Burnout

*Burnout* is “a state of physical, emotional, and mental exhaustion caused by long term involvement in emotionally demanding situations”

Related to “lack of fit” in...

- Workload – workload vs. resources
- Control – influence vs. accountability
- Reward – pay, recognition, satisfaction
- Community – relationships
- Fairness – equal treatment
- Values – ethical/moral

Pines, Aronson, & Kafry (1981)
Maslach & Leiter (2005)
Compassion Fatigue (CF)

*Compassion Fatigue* is “the emotional distress one may experience when having had close contact with a trauma survivor”

Vicarious Trauma (VT)

Secondary Traumatic Stress (STS)

Trauma Exposure Response
Prevalence

- **Nurses (mixed sample) (Laposa & Alden, 2003)**
  - 20% reported sx that met some criteria for PTSD
  - 12% reported sx that met full criteria for PTSD

- **Substance Abuse Counselors (N = 936) (Bride & Roman, 2011)**
  - 54% met at least one of the core criteria for PTSD.
  - 16% scored above the clinical cutoff.
  - 13% met the core criteria for PTSD.

- **Medical Workers (N = 7,288) (Shanafelt, et al., 2012)**
  - 45.8 reported at least one symptom of burnout.

- **Social Workers (N=529) (Bride & Lee, 2012)**
  - 48% met at least one of the core criteria for PTSD
What does this mean?

.....Occupational Hazard

Munroe (1999)
Risk Factors

- Exposure
- Interaction
- Lack of experience
- Personal trauma history
- Empathy

Perry (2003); ACS-NYU Children’s Trauma Institute (2012)
Empathy vs. Sympathy
Personal Impact of CF

- **Physical**
  - Changes in sleep, appetite, low energy, somatic complaints

- **Emotional**
  - Mood changes (including rapid changes), loss of empathy, emotional shutdown

- **Behavioral**
  - Changes in routine, self-harming, accident prone, nightmares, elevated startle response

- **Cognitive**
  - Concentration changes, loss of focus or perspective, hypervigilance, difficulty making decisions

- **Relational**
  - Withdrawal from connections, intolerance, change in interest in intimacy, mistrust, change in parenting behaviors

- **Spiritual**
  - Disconnection from spiritual supports, sense of unfairness and lack of support, loss of purpose

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Professional Impact of CF

- **Job Tasks**
  - Decrease in quality/quantity, increased mistakes, perfectionism

- **Morale**
  - Loss of interest, negative attitude, detachment, decrease in confidence

- **Interpersonal**
  - Withdrawal from colleagues, poor communication, staff conflicts, impatience

- **Behavioral**
  - Exhaustion, absenteeism, irritability, frequent threats to resign or quit, overworking

- **Silencing Response**
  - Wishing one would get over it, seeing clear signs of trauma and ignoring it, fearing what a someone will say whenever they come to talk with you, using anger or sarcasm towards someone when they are manifesting trauma related symptoms
Preventing/Managing CF

- Building awareness
- Avoid “self care” pitfalls
- Build and maintain connections
- Know your “triggers”
- Finding Inspiration: what motivates you?

Adapted from: ACS-NYU Children’s Trauma Institute, September 2011. The resilience alliance. New York University Langone Medical Center: New York City, NY.
What Motivates You...?
Building Resiliency

Counter Isolation
Mindful Awareness
Embracing complexity
Optimism
Holistic Health Care
Limits and Boundaries
Empathic Engagement
Satisfaction with Job
Making Meaning

Life is not about how fast you run or how high you climb but how well you bounce.

~Vivian Komori

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Finding Meaning

Dwelling on the days that make you want to come back....

- Write down the most rewarding moment in your job
- Write down 3 compliments you have received from a co-worker or client
- Think about 3 people whose lives you have touched
"We're encouraging people to become involved in their own rescue."
Specific Self Care Tools

- Stretching, exercise, getting fresh air, taking a time out
- Music
- Healthy eating
- Scents (lavender, citrus, sage)
- Engaging in a hobby or creative activity
- Professional supervision and/or support from co-workers
- Self-care buddy
- Vacations – take them!!
- Transition to home – leave it at the office
- Humor!
- Knowing your limits
- Develop/implement plan to increase personal wellness/resilience
- Support from family and/or friends
- Professional counseling

"Can I call you back, Ed? I'm in the moment here."
In the Moment Strategies

- Breathe
- Grounding
- Mindfulness
- What works for you

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Resources...

Professional Quality of Life Screening (ProQOL)
- http://www.proqol.org/ProQol_Test.html

The Role of Trauma Among Families Struggling with Substance Abuse: Speaker Series

NCTSN STS Webpage

Trauma Stewardship
- Laura van Dernoot Lipsky with Connie Burk

ACS-NYU Children’s Trauma Institute – The Resilience Alliance
- Promoting Resilience and Reducing Secondary Trauma Among Welfare Staff – Training Manual
Contact Us

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Discussion Questions

1. What can you do to build resiliency at work?

2. What stressors have you experienced in your work?

3. What are some strategies you use to cope with compassion fatigue at work?