Compassion Fatigue

Part I: What is compassion fatigue and do I have it?

The term compassion fatigue was coined in 1992 to describe the level of burnout experienced by caregivers and physicians who were worn down by caring for patients in post-traumatic stress disorder clinics and emergency rooms. This phenomenon has been known by other names including secondary traumatic stress, secondary victimization, and secondary survivor. Caregivering is noted to be among the top 10 most stressful jobs and burnout has been an issue as long as caregiving has been a career. Given the fact that caregiving is stressful and we already have a global caregiving shortage, it is important that we examine the phenomenon known as compassion fatigue and work to prevent it when possible and heal when it occurs in order to keep caregivers functional.

The importance of compassion in dealing with extremely difficult or resistant patients is well known; but what does compassion really mean? The dictionary defines compassion as "a feeling of great sympathy and sorrow for another who is stricken by suffering or misfortune, accompanied by a strong desire to alleviate the pain or remove the cause". This is almost a definition of the caregiving profession in general, particularly caregivers who work with extremely vulnerable populations such as elders with dementia. The task of daily caring for patients with this debilitating disease can take a heavy toll on healthcare professionals leading over time to a decline in their ability to care for others.

Compassion fatigue allows caregivers to become emotionally drained, suffer from a myriad of stress-related illnesses, and eventually leave their profession if they are not helped to deal with this debilitating situation.

You must first learn to recognize when you are wearing down and then get into the habit of doing something each day that will replenish you. That's not as easy as it sounds, I know. Old habits are oddly comfortable, even when they are bad for us, and real lifestyle changes take time, energy, and desire.

Your first step is learning how to care for yourself as if you were a patient or family member back when you first began your caregiving career. Start spending some quiet time alone each day even if you must hide in a closet to do it. Learn to recognize a higher power than yourself (and yes, there is one). Firs let's review signs of compassion fatigue because to fight an enemy, we must be able to recognize it. Listed are signs of compassion fatigue that I am sure you have noted either in yourself or in your peers.

Part II: Signs of Compassion Fatigue

- 1. Abusing drugs, alcohol, food, or sex
- 2. Anger without cause
- 3. Blaming your spouse, peers, family for all of your problems
- 4. Chronic lateness
- 5. Depression
- 6. Diminished sense of personal accomplishment
- 7. Exhaustion (mental or physical)
- 8. Frequent headaches
- 9. Gastrointestinal complaints
- 10. Overly high expectations of self or others
- 11. Feelings of hopelessness
- 12. Hypertension
- 13. Inability to maintain balance of empathy and objectivity
- 14. Increased irritability
- 15. Decreased ability to feel joy
- 16. Low self-esteem
- 17. Sleep disturbances
- 18. Workaholism (never taking time off for yourself)

Part III: Coping Skills

To combat compassion fatigue we must know what skills are necessary. Listed below are coping skills that are divided into two areas: those that increase social support and those that help to maintain task-focused behaviors. It is also important to banish negative feelings. If you want to banish feelings of self-blame or guilt you must realize not all events can be controlled. If you are depressed and suffer lack of interest focus on the future or discuss only enjoyable topics. Refuse to give in to feelings of helplessness or hopelessness by sharing experiences with your peers or participating in community or charity events. If you experience restlessness then participate in activities that promote relaxation or do work for those who are not as strong as you are.

To increase social support you should:

- 1. Ask for assistance or emotional support from your peers and give it in return
- 2. Smile and make eye contact with peers
- 3. Talk to peers about how they handle stress
- 4. Use humor frequently to decrease tension and anxiety
- 5. Give comfort through physical contact (touch, hold, or hug peers when they are distraught)
- 6. Take breaks with peers
- 7. Share food and laughter with others

To maintain task-focused behaviors:

- 1. Use your problem solving tools (think and plan what needs to be done and take an active approach to helping others
- 2. Generate solutions to problems (both yours and peers)
- 3. Request help when needed
- 4. Focus on task at hand

Part IV Prevention

But, as we all know, prevention is easier than cure! It is important for healthcare professionals to become alert to the warning signs of compassion fatigue and take action before they become so stressed out or burned out that they just no longer care and begin to suffer from helplessness, hopelessness, cynicism, and finally simply leave their profession.

Tried and true prevention strategies include:

- 1. Let go of idealism. One's life work is less difficult if you expect it to be difficult.
- 2. Adhere to a commitment for regularly scheduling time off from work.
- 3. Renounce perfectionism. This is not a world of perfect people or situations.
- 4. Join a peer support group. If necessary, form one!
- 5. Fearlessly examine and re-examine your helping and care giving motivations. Do you 'give to get'? If so, you are bound to be disappointed.
- 6. Attend to your spiritual and creative life
- 7. Remember to have fun. Laughter is the best medicine
- 8. Cultivate life and nourishing relationships
- 9. Eat sensibly, exercise regularly, and sleep at least 7 hours per night
- 10. Spend time alone and with others in natural settings
- 11. Seek help from someone who knows more than you do (and yes, those people exist)
- 12. Identify what is important and live in a way that reflects it
- 13. Identify ways to cope with stress and reconnect with the world outside of work and care giving (and yes, there is one).

We, as caregivers, must all recognize compassion fatigue if we are to help each other and provide the best care possible to our elders. We are all in caregiving because we care, most of us are geriatric caregivers whether we wish to look at it this way or not (think about the average age of your patients), and we all want to do the best we can. Elders are the most vulnerable segment of our population and it is up to us as a professional to protect and care for them, for so very soon 'we' will become 'them'.

Edited version taken from Alabama Nurses (magazine) March-May 2004, Joyce M. Varner