



Coping with Compassion Fatigue: An Ecological Approach

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Disclosures

The presenters have no disclosures to report.

Objectives

Describe

- Describe strategies to prevent, identify, and address secondary traumatic stress in the workplace.

Connect

- Connect ecological approaches to addressing traumatic stress.

Apply

- Apply an ecological framework to reduce frontline workforce burnout.

Create

- Create a plan for implementing a burnout prevention program at an agency workplace.

Agenda

Introductions

What is Compassion Fatigue/Secondary Traumatic Stress?

Recognizing Effects and Factors of Traumatic Stress

Supporting the Frontline Workforce through Burnout Prevention

Promoting Burnout Prevention at Your Workplace

Direct versus Indirect Trauma

Direct Trauma

- Threatened death
- Actual or threatened serious injury
- Actual or threatened sexual violence

Indirect Trauma

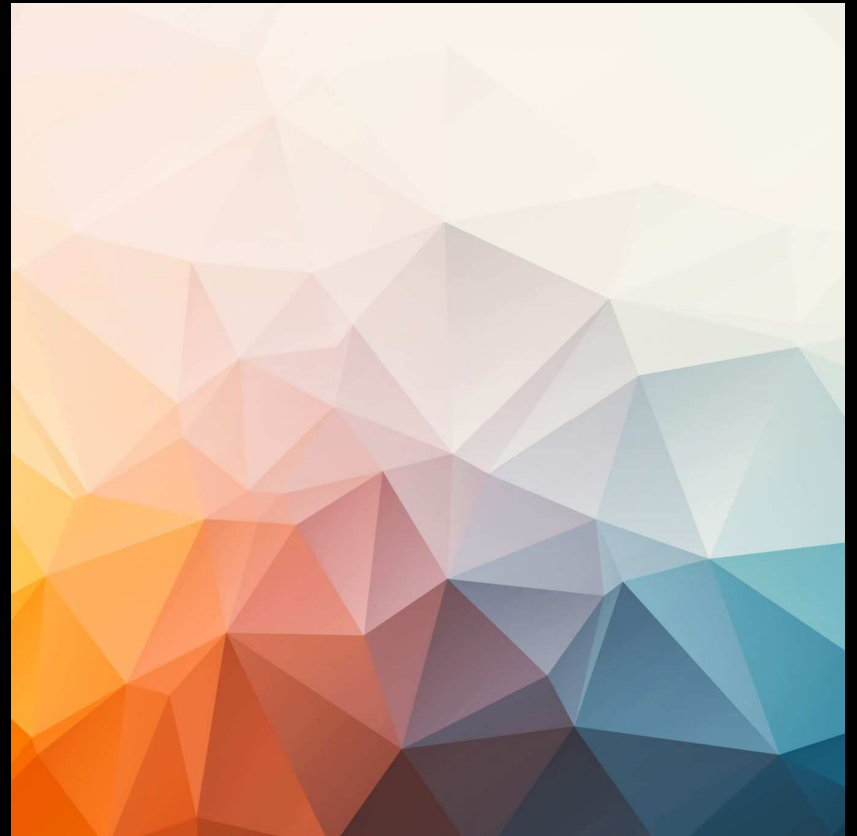
- Witnessing the trauma
- Learning that a relative or close friend was exposed to a trauma.
- Repeated exposure to a client's experience of trauma

Types of Trauma

Acute trauma results from a single incident.

Chronic trauma is repeated and prolonged such as domestic violence or abuse.

Complex trauma is exposure to varied and multiple traumatic events, often of an invasive, interpersonal nature.



What is Compassion Fatigue?

Continuous exposure to victims of trauma and violence, typically occupationally related (Office for Victims of Crimes, n.d.)

‘The Cost of Caring’

Compassion Fatigue is also known as Vicarious or Secondary Trauma



Defining Compassion Fatigue

- Vicarious trauma describes profound negative changes in our worldview due to the exposure to traumatic content of clients.
- Secondary traumatic stress is the result of being a witness to a traumatic event or series of traumatic events, which can lead to negative thoughts, defense mechanisms, and PTSD-like symptoms
- Compassion Fatigue is different than ***Burnout*** which represents a psychological syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment that can occur in any profession.
- Compassion Fatigue mainly impacts health care professionals and/or frontline workers who provide direct care.

Compassion Fatigue in Human Services

Continued exposure to recounting of traumatic events may lead to vicarious, or secondary trauma for those working in human services.

Some workers report intrusive thoughts and use negative defense mechanisms as a result of traumatic experiences (Harr et al, 2014).

Some workers self-monitor emotional responses, maintain support networks and personal interests, and obtain additional education (Marriage & Marriage, 2005).

Workforce Retention

Greater than 60% annual turnover rates for mental health employees (Ben-Dror, 1994)

20% annual turnover rate for community mental health workers (Blankertz & Robinson, 1997)

30-60% annual turnover rates in child welfare, social work and community mental health (Mor Barak et al, 2001)

Vicarious
trauma can
lead to
burnout in
the
workforce.

Work-life balance challenges in front line workers increase burnout (Sasangohar et al, 2020)

More than 50% of doctors and 30% of nurses experience burnout (Reith, 2018)

Burnout is associated with intent to leave practice (Hague and Huntington, 2019)

Some studies rate clinician burnout rate at over 50% (AHRQ, 2017)

Symptoms of Compassion Fatigue

- Psychological Consequences
 - Disassociation
 - Withdrawal
 - Isolation
 - Anxiety



Symptoms of Compassion Fatigue

- Emotional Consequences
 - Sadness
 - Anger
 - Irritability
 - Helplessness/powerlessness

When you get so stressed that your stress starts stressing you out to the point where you're too stressed to deal with your stress



Symptoms of Compassion Fatigue

- Physical Consequences
 - Fatigue
 - Headaches
 - Nausea
 - Upset stomach
 - Dizziness

AT WORK LIKE



I CAN'T!

Why must organizations support an increased resiliency in the workforce to combat compassion fatigue and burnout?

Human service professionals are serving high needs and vulnerable populations.

Post-pandemic- workforce shortage, increased case loads, increased substance use and mental health concerns.

Workers feeling burned out will often either leave the profession or stay in the profession and not delivery empathetic or high-quality services. This leads to poor quality of services and shortages in the availability of services.

The Social Ecological Model for Burnout Prevention



- Multi-level framework to increase frontline worker resiliency
- Across-system interventions to buffer workforce against secondary traumatic stress (Krug, Dahlberg, Mercy, Zwi & Lozano, 2002)
- Socio-Ecological Model of Burnout Prevention (Habeger et al, 2022) identifies system level interventional opportunities to prevent burnout in the workforce

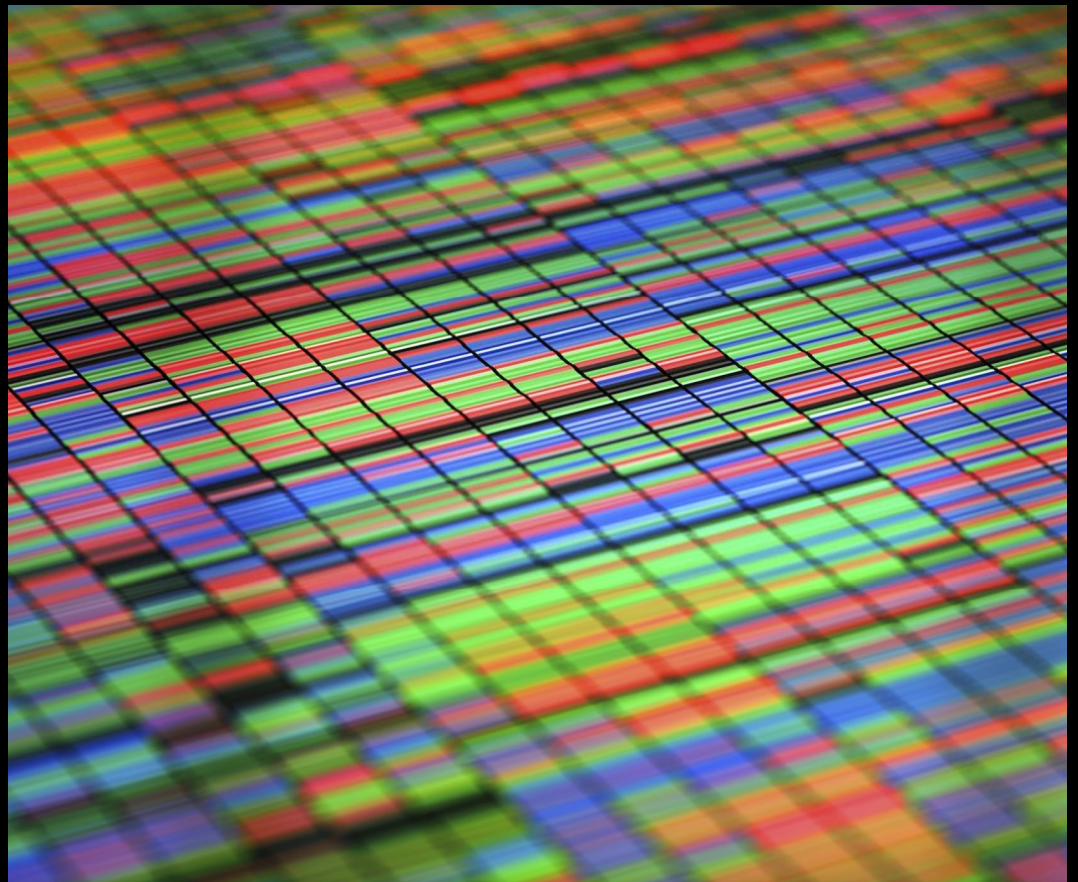
Individual Level

Characteristics include:

- Demographics
- Educational status
- Self-concept
- Developmental history

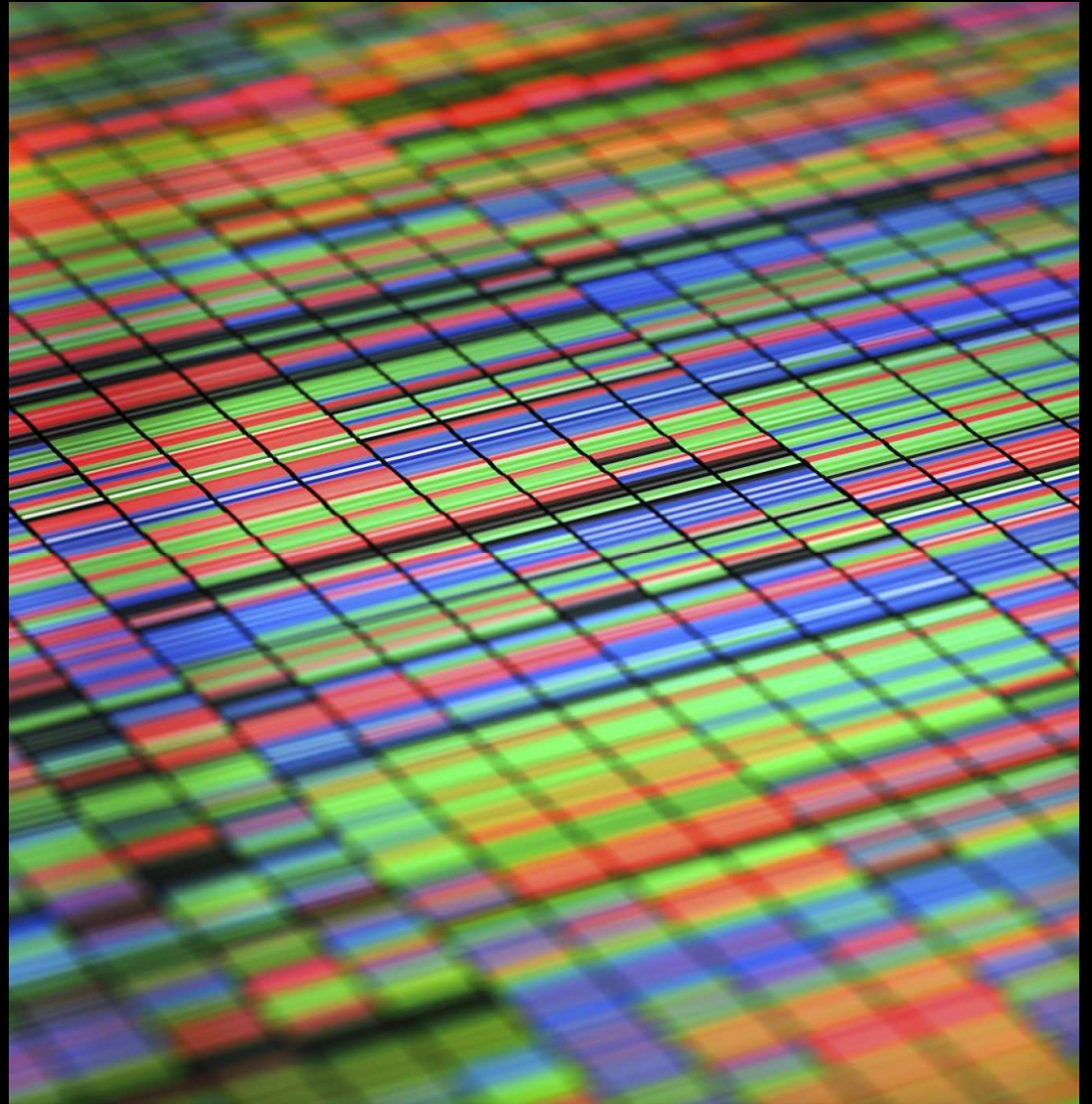
Burnout prevention focus areas:

- Training
- Mindfulness practice
- Self-care
- Achieving a work-life balance



Interpersonal Level

- Mentorship
- Peer Relationships
- Supervision Techniques
 - Administrative
 - Educational
 - Supportive



Organizational Level



Measurement of Compassion Fatigue and Burnout

Kumar (2018) – screening signal
areas

- Affective, cognitive, behavioral,
and motivational



Staffing and Training



Organizational Culture

Community / Societal Level



Characteristics include:

Collaborative efforts among community groups and industries.

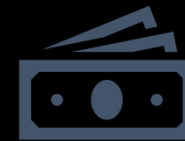
Advocating for macro-level policy and systematic change



Burnout Prevention

Interdisciplinary Licensing Efforts

Access to Training



Funding

Selfcare Application

If “an ounce of prevention is worth a pound of cure”, then the best way to beat burnout is to keep it from happening in the first place. In other words, grab your life jacket before trying to help others.

Can you relate to any of these statements?

- I have the tendency to overwork myself. I have difficulty saying no and setting boundaries.
- Sometimes I feel that self-care is difficult to implement for myself.
- Sometimes I feel guilty for taking care of myself.
- Even though I enjoy my job I feel very exhausted by the end of the day.
- I'm great at helping others but not at helping myself.
- I have a challenging time practicing self-care.
- Sometimes I feel like I am running on empty, but I still try to do more.

DAILY CARE
VERSUS
AFTER CARE



Self-care knowledge & tools for burnout prevention

- Identify your risk factors and symptoms.
- Deepen your understanding of why self-care is so important.
- Learn individual self-care practices.
- Implement daily self-care to manage your stress and promote wellbeing.



IDEAS FOR EMPLOYERS

1

Recognize the role employers/agencies play in employee burnout.

2

Accept the role and be willing to implement a plan.

3

Incorporate self-care practices in performance evaluations and improvement plans.

4

Work with the staff to integrate self-care practices into the work week.

Stress Management Technique

- <https://www.youtube.com/watch?v=ybnzd4zu8xs&t=15s>

5-4-3-2-1 Grounding Technique

Stress Reduction Strategy



Additional Stress Reduction Strategies

- Meditation Techniques
 - Find a Cozy corner at the office
 - Be accountable for your own self-care
 - Aromatherapy
 - Candles
 - Warming oils
- Unplug from technology
- Empty your mind
 - Journal your thoughts
 - Speak with a therapist
- Have fun! And Love Yourself!



“Better information
means better ideas,
means better
protection.”

--Dr. Emily So



Discussion

Thank you!



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