When the well runs dry: facing compassion fatigue in professional practice

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The presenter has nothing to disclose.
Caring professionals may be deeply challenged by their work

- You bear witness to suffering
- You are intimately touched by the experiences of those you care for
- You learn about the inescapable reality of loss
- You are confronted with existential questions of meaning
How does your work affect your worldview?

- Does it help you appreciate life?
- Does it make you fear what “might” happen?
- Does it make you less tolerant of other issues?
The Gifts…

◆ We see glimpses of:
  ❖ Love and compassion
  ❖ Faith
  ❖ Acceptance
  ❖ Humor
  ❖ Wisdom
  ❖ Courage
The privilege:

- Lessons learned often add meaning to personal and professional lives
- The dying teach us how to live
Still....

- Sometimes we witness things that are difficult to see.
- We must hold the “unfairness” of things that happen.
The challenges

◆ Professional Anxiety:
  ❖ Can be easily aroused when confronted with the suffering of others
  ❖ Accumulation of grief related to multiple losses
  ❖ Professionals working with the dying may fluctuate between experiencing grief, and avoiding it
Disenfranchised Grief

- Experienced when the professional’s grief is not viewed as legitimate, and when they feel they don’t have the “right” to grieve
- Chronic bereavement
The impact of continued exposure may result in:

- Compassion fatigue
- Burnout
- Vicarious traumatization
- Existential or spiritual distress
Are compassion fatigue and burnout the same thing?

- Similar, but have different qualities
- *Burnout is grounded in our reaction to the work environment*
- *Compassion fatigue is grounded in the clinical work and our reaction to it*
- With burnout the source of the stress is the system, the context in which we work and working conditions
What is burnout?

- **External locus of control**
  - Insufficient resources to do the job
  - Unrealistic expectations
  - Inadequate compensation
  - Feeling overworked
  - Leads to feeling overwhelmed and loss of control

- **Characterized by:**
  - Persistent exhaustion
  - Constant frustration
  - Sense of inability to accomplish tasks
  - Source of ongoing stress
Definitions:

◆ Burnout:

“The progressive loss of idealism, energy, and purpose experienced by people in the helping professions as a result of the conditions of their work.”

◊ (Freudenberger)

◊ Prevalence: 30% among physicians and nurses
“Listen—just take one of our brochures and see what we’re all about. ... In the meantime, you may wish to ask yourself, ‘Am I a happy cow?’”
6 Major Organizational Antecedents of Burnout

- Workload
- Control
- Reward
- Community
- Fairness
- Values

† Maslach, 2001
Stressors specific to End of Life Care

- Constant exposure to death
- Inadequate time with dying patients
- Growing workload and increasing numbers of deaths
- The need to “carry on as usual” in the wake of patient deaths
- Communication issues
- Inability to live up to one’s internal standards
Symptoms of Burnout: individual

- Poor judgment
- Over-identification or over-involvement
- Boundary violations
- Perfectionism and rigidity
- Interpersonal conflicts
- Addictive behaviors
- Physical illness
- Questioning the meaning of life/spirituality
Symptoms of burnout: Group/Team

◆ Low morale
◆ High job turnover
◆ Impaired job performance (lack of empathy, increased absenteeism)
◆ Staff conflicts
“Burnout”

◆ The process in which a once committed health care professional becomes ineffective in managing the stress of frequent emotional contact with others and in the helping context experiences exhaustion: and, as a result, disengages from patients, colleagues, and the organization.
Shelley doesn't want to be a career woman anymore.
Burnout: “Psychology of postponement”

◆ Postpone:
  ▶ One’s own needs
  ▶ Significant relationships
  ▶ Sources of renewal

◆ Until:
  ▶ All the work is done
  ▶ The next professional hurdle is achieved
    ♦ M. Kearney, MD
Compassion Fatigue

- Is the natural, predictable, treatable, and preventable unwanted consequence of working with suffering people.
- Caring people sometimes experience pain as a direct result of exposure to someone else’s suffering
  - Prevalence: 6-8%
Compassion fatigue

- Comes from the desire to relieve another’s suffering
- The source of the stress is the context of the work
- Overexposure to suffering and pain
- It can cause personal stress, erode empathy, and lead to de-sensitization
Compassion Fatigue

◆ At the heart of the theory are the concepts of empathy and exposure
◆ Empathy is a major resource for caregivers to help others
◆ Can result in:
  ◆ Lower frustration tolerance
  ◆ Dread of working with certain individuals
  ◆ Increase in countertransference reactions
  ◆ Self-destructive or self-soothing behaviors
  ◆ Diminished sense of purpose

♦ Gentry, Baranowsky, Dunning (2006)
Individual risk factors

◆ At risk earlier in career
◆ Lack of life-partner
◆ Attribution of success to chance or others rather than to one’s own abilities
◆ Passive, defensive approach to stress
◆ Lack of involvement in daily activities
◆ Lack of sense of control, not open to change
The burnout personality

◆ Thrives on intensity
◆ Sets self up to lurch from crisis to crisis
◆ Functions best under pressure:
  ❖ Crisis occurs
  ❖ Girds for action
  ❖ Adrenalin flows
  ❖ Senses come to life
  ❖ Feels alert, powerful, acutely attuned, unconquerable
  ❖ After triumph, feels deep melancholy
"I take it the appointment's over..."
Personality and spirituality

◆ Caregivers who value interpersonal interactions and have a great capacity to empathize tend to cope better.

◆ Personality characteristics that view helping as a responsibility and a pleasure tend to cope better.
The Hardy Personality has been found to be effective in combating stress and avoiding burnout.
The Hardy Personality involves commitment, curiosity, sense of meaningfulness, control.
“Hardiness” is said to lead to perception, interpretation, and handling of stressful events that prevents anxiety and stress.
Religious beliefs were associated with decreased burnout in oncology nurses.
Patients and families

- Communication problems with patients and families
- Patient expectations
- Identification with patients
- Dealing with critical illness, death, and dying
- Administering palliative or terminal care
Work Environment

◆ Challenges inherent in the work setting:
  ❖ Space
  ❖ Volume
  ❖ Expectations
  ❖ Staffing
Work environment (cont.)

◆ The quality of support one receives from the people around them has an impact: colleagues, patients and families, administration.

◆ As it happens, most aspects of our environment can offer either support or constraints.
Manifestations

◆ Physical:
  ❖ Fatigue
  ❖ Emotional and physical exhaustion
  ❖ Headaches, GI disturbances
  ❖ Weight loss, sleeplessness
Manifestations

◆ Psychological distress
  ❖ Depression, anxiety
  ❖ Boredom, frustration
  ❖ Low morale, job turnover
  ❖ Impaired job performance (absences decreased empathy)
Manifestations

◆ Behavioral:

- Avoidance of patients
- Inadequate symptom management
- Detachment from patients, colleagues, and institution
Depression and Burnout: Do they differ?

- Burnout is generally regarded as being associated with overinvolvement in any one area of life to the exclusion of all others (usually in the occupational role).
- While the burned-out person may be depressed, they symptoms expressed are not primarily intrapsychic, but are at least partially situationally induced.
Depression, Loss, and Grief

- Depression, grief, and guilt are often experienced in response to a loss that involves bereavement.
- Loss could be of a patient, but can also involve loss of self-esteem, meaning, and support from others.
- Over-identifying with patient/family to the point of losing objectivity.
Vicarious traumatization

 Defined as the “negative transformation in the helper’s inner experience as a result of deep empathic engagement with traumatized clients coupled with a sense of personal responsibility to help.”

Saakvitne, et al, 2000
Existential or spiritual distress

- State of intense psychological discomfort
- Questions may arise such as:
  - Why do “good people” suffer?
  - What purpose does this serve?
  - Why am I doing this work?
  - What difference can I make?
  - What have I accomplished?
The “Helper’s Pit”

- Standing so close to the edge that the caregiver him/herself may just fall in too.
- Feeling “with” the person, vs. feeling “for” the person

- Dale Larson
Why do we stay?

- Why don’t many of us burn out and leave the profession altogether?
- Why do we stay and reengage with the work?
- Perhaps there are things we are doing and continue to do that foster resiliency in our selves and clinical practice
Hard-charging businessman Billy Sloan is about to learn that continued stress does inhibit one's memory.
“Aequanimatas”

- Is usually translated from Latin to mean “objectivity”. It actually means “calmness of mind, or inner peace.”
What is resiliency?

- It is the flip-side to burnout/compassion fatigue
- It is strengths based
- Resiliency looks at what causes people to grow, expand and refocus
- Resiliency means to bounce back
Resiliency (cont.)

- Is seen as a valuable characteristic when dealing with stressful life transitions and work.
- Value lies in how we make meaning of life stressors and incorporate what we have learned into our lives.
Resiliency (cont.)

- We have to experience hardship to develop resilience
- Resilience is also an integral aspect of an individual’s capacity to problem-solve
- An active, vs. passive process of responding to overwhelming situations
- A resilient response is fluid, not static
- Developing personal resilience can reduce vulnerability
These perspectives suggest that resiliency is not completely inherent but is learned.
"Eventually, I'd like to see you able to put yourself back together."
The value of death awareness

◆ Involves being aware and mindful
◆ Engaging in self-reflection of our own history with loss and facilitating life affirmation can give us insight
◆ Cultivate (GUARD!) work-life balance
◆ Feel renewed connection to the work
Coping

Satisfaction at work: job satisfaction has been found to protect mental health against the effects of job stress

Personal coping strategies
- Top four personal coping mechanisms were exercise, talk, taking a break, and relaxation.
- Social support, on and off the job
- Recognition of the sources of one’s stress
Personal revival strategies

- Recognizing your own warning signs
- What can you incorporate into your self-care strategies?
- What are you already doing?
- What do you need to add in order to cope?
Dealing with Loss and Grief

- Memorial rituals
- Witness the pain - tell the story and express emotion
- Provide structure and support
- Find personal rituals to help yourself
Compassion Satisfaction

- Is pleasure derived from the work of helping others
Posttraumatic Growth and Vicarious P-T Growth

Posttraumatic growth is characterized by positive changes in interpersonal relationships, sense of self, and philosophy of life subsequent to direct experience of a traumatic event that shakes the foundation of an individual’s worldview.
Factors Mitigating Compassion Fatigue

- Exquisite Empathy: defined as “highly present, sensitively attuned, well-boundaried, heartfelt empathic engagement”

- The practitioners using “exquisite empathy” were invigorated rather than depleted by their intimate professional connections with traumatized clients, and protected against compassion fatigue and burnout.
“Exquisite Empathy” (cont.)

- Includes Bi-directionality

- At its foundation is clinician self-awareness
CPR for the Professional

- Successful coping is based on:
  - Being proactive
  - Taking charge
  - Setting limits
  - Compartmentalizing
  - Teamwork
“If they don’t have scars, they haven’t worked on a team.”

Balfour Mount, MD
Teamwork strategies

◆ Encourage shared leadership
◆ Enhance team member’s self-esteem
◆ Build caring relationships
◆ Empower one another
◆ Have empathy for one another
◆ Deal with conflicts in a constructive manner

♦ Dale Larson
Build Caring Relationships

◆ Your relationship with other team members will be most rewarding and productive if they are endowed with the same qualities of openness, trust, respect, and authenticity that you are striving for in your helping relationships.
Lesson

❖ When there is empathy among team members and when there is an atmosphere of goodwill, trust deepens and expands, leading to greater openness, fewer negative interactions, and sustained personal growth.

❖ Keep an eye on gossip and rumors, and empower one another
Personal coping strategies

- Personal philosophy of illness, death, and professional role

- Lifestyle management: developing a balance between one’s personal and professional lives
Finding meaning

- Why did you choose this work?
- Why have you stayed?
- What makes it meaningful?
- How will that meaning sustain you over time?
Measures that May Help Prevent Burnout and Compassion Fatigue

- Mindful meditation
- Reflective writing
- Adequate supervision and mentoring
- Sustainable workload
- Promotion of feelings of choice and control
- Appropriate recognition and reward
Measures, cont.

- Supportive work community
- Promotion of fairness and justice in the workplace
- Training in communication skills
- Development of self-awareness
- Practice self-care activities
- Continuing education
- Mindfulness-based stress reduction for team
- Meaning-centered interventions for team

Kearney, Weiinger, Vachon, Harrison, Mount-2009
Recreating competence

- Mindfulness
- Be willing to change and grow
- Look and listen
- Nurture self-honesty
- Take responsibility
Additional strategies

- Develop a stress-hardy outlook (challenge, curiosity, commitment, control)
- Practice the art of the possible
- Change the oil: relax, exercise, meditate
- Know yourself
- Maintain and enhance self-esteem
- Strengthen your social supports
“people always ask, how do you do this?”

“I think that the answer is that people die because of the biology of their disease, and the process is going to happen whether I am their doctor or somebody else is. But you can make such a difference in the time that they have, and it is such a privilege to have that opportunity. And the second thing is, you never do it alone.”

- Palliative care M.D.
“Chesed Chelemeth”

- It means “ultimate kindness”, and the words refer to the value placed upon the care of the dying and those who have died, by the Jewish community. The ultimate kindness is given through pure love and regard because it can never be repaid.
Thank you for all you do.