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"A Vital Christian Presence in Social Work"

SELF-CARE OF THE PROFESSIONAL: MANAGING COMPASSION FATIGUE AND BURNOUT IN ONE'S PRACTICE

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The following information is a summary of the Power Point presentation made at the 2006 NACSW Convention in Philadelphia. The presenter has considerable experience with these three topics: compassion fatigue (CF), burnout (BO), and stress (S). He has presented workshops for child welfare staff in Oklahoma, ministerial personnel, and a variety of social work professionals providing social services.

The workshop presentation includes a self assessment questionnaire; a model for understanding CF, BO, and S; a discussion of spiritual aspects; and techniques for addressing this tandem. Interspersed in the presentation are video loops with meditative thoughts combined with practice techniques of deep breathing.

The workshop begins with instructions for deep breathing: placing a hand on the stomach and inhaling—observing the stomach going out as the air is brought into the lungs. In the exhale, the stomach comes in. Visual imagery is combined with deep breathing where the individual visually recalls a past experience which produced intense pleasure or relaxation. Video loops of ocean scenes, mountains, water falls, and nature are presented as examples for imagery. Particular emphasis is placed upon participants utilizing all their senses: visual, hearing, touch, taste, and smell. Participants are encouraged to take several times a day to pause, breathe deeply and visualize (go to one's quiet, restful, place).

A model for burnout is presented: compassion fatigue can lead to overstress which can lead to burnout. Additionally, under-stress can be an issue producing burnout-like symptoms (e.g., a retired person with nothing to do). Thus, too much stress and too little stress can produce similar symptoms. The ideal is to function with optimal stress in one's life.

Model for Burnout



Compassion Fatigue

Compassion fatigue is also known as: post traumatic stress disorder, or secondary traumatic stress disorder, or vicarious PTSD. At issue is the fact that those who care for people, who have the capacity to empathize, also have the potential for compassion fatigue, of vicariously participating in the trauma of the person being assisted or counseled with. It is viewed as a *natural consequence* and by-product of caring for, listening to, and helping those traumatized. One can also experience CF simply by learning about and/or hearing stories of those traumatized. Vulnerable are police, firemen, emergency workers, therapists, ministers, child welfare workers, and particularly susceptible are those who work with traumatized “children.” One key indicator that CF may be present is the presence of persistent, intrusive mental pictures of traumatic situations and/or those traumatized.

Some indicators of distress for those suffering from compassion fatigue include:

- Emotional Indicators: anger, sadness, prolonged grief, anxiety, depression
- Physical Indicators: headaches, stomach aches, lethargy, sleep problems
- Personal Indicators: self-isolation, cynicism, mood swings, irritability with spouse/family
- Work Indicators: avoidance of certain clients, missed appointments, tardiness, and loss of motivation.

It should also be mentioned that professionals vulnerable to CF particularly include those who themselves have been victims of trauma and that their trauma remains unresolved. Also, those who view themselves as saviors or rescuers are at risk to symptoms of CF.

Burnout

CF can also lead to burnout (BO). Whereas, CF is a preoccupation with trauma and emotional stresses of others, and portrays symptoms similar to BO, it is not BO. The onset of CF is faster and there is a better opportunity to recover. BO, on the other hand, is

subtle, over time, and leads one to believe that he/she is not meant for this type of work. Feelings include those of being ineffective, callous, negative, emotional absence, sarcastic and “stuck.” When one reaches this career point, interest in staying with the job diminishes. Professionals, once effective in their work, may become angry, bitter, and ineffective. They may change jobs. Or, unable to change jobs, they stay on the job continuing to manifest symptoms of burnout.

The workshop includes three definitions for burnout:

1. Exhaustion: A state of physical, emotional and mental exhaustion caused by long term involvement in emotionally demanding situations (Ayala Pines and Elliott Aronson)
2. Disillusionment: A state of fatigue or frustration brought about by devotion to a cause, way of life, or relationship that failed to produce the expected reward (Herbert J. Freudenberger)
3. Soul Erosion: The index of the dislocation between what people are and what they have to do. It represents an erosion in values, dignity, spirit and will—an erosion of the human soul. It is a malady that spreads gradually and continuously over time, putting people into a downward spiral...” (Maslach and Leiter).

Symptoms (often similar to CF), but more severe, include: fatigue, frequent illness, sleep problems, disillusionment with work, cynicism toward agency or clientele, sense of helplessness/hopelessness, feeling powerless to change events, anger toward the system, depression and isolation, detachment from co-workers, absenteeism, harshness in dealing with colleagues, reduced commitment to work, and increased consumption of chemicals. Maslach and Leiter (*The Truth About Burnout*, 1997, Jossey-Bass) suggest that a key ingredient to burnout is the major mismatch between the nature of the person doing the job and the nature of the job itself. The social environment, then, is a major contributor to burnout rather than individual blame. Examples of this conception include:

- Overloaded work schedule: too little time and resources to do the job
- Breakdown of community: fast pace of work destroys community among coworkers
- Frustration with the system: seeing a cut in costs while providing less service to clients
- Unfair treatment of workers: system of evaluation, promotion, benefits not perceived as fair
- Conflict in values: performing tasks felt to be unethical or which go against one’s values
- Conflict fostered by inter-agency politics
- Supervisors can add to BO of supervisees through: poor/lack of supervision, failure to show appreciation and support, not protecting workers from external interference, and general mismanagement.

Thus, the result is burnout: chronic exhaustion, being cynical and detached, and becoming increasingly ineffective on the job. The presenter of this workshop cites that

generally what happens in burnout is included in: loss of purpose, loss of meaning, loss of self. Burnout has its spiritual dimension.

Stress

To discuss the subjects of compassion fatigue and burnout would be incomplete without a discussion of stress (a partner to the other two dimensions). Richard S. Lazarus defines stress as “a condition or feeling experienced when a person perceives that demands exceed the personal and social resources the individual is able to mobilize.” Helping professionals have the demands not only of the workplace but those of: family, health, interpersonal relationships, self-expectations, thinking, day-to-day conflicts and upheavals, transportation issues, financial conditions, and the general environment (noise, crime, pollution). On the other hand, one’s resources should be significant (greater than stressors) and involve: good health, positive self-concept, social support, beneficial past experiences, effective coping skills, stress management skills, self-empowerment, good diet and exercise, and spiritual discipline.

Excessive stress can lead to burnout, health problems (high blood pressure, backaches, headaches, anxiety, use of chemicals, etc.). As mentioned above, under-stress can have negative consequences on physical and psychological well-being as well. Optimal stress (exhilaration, high motivation, mental alertness, high energy, sharp perception) is the ideal.

Relief

The workshop discusses a number of key tools the worker can utilize to bring relief: time management, social connections, humor, counseling, journaling, forgiveness, maintaining a strong purpose and meaning in one’s work and life, deep breathing, stretching exercises, and more. The presenter, however, suggests five things that professionals might employ that would help with CF, BO, and S:

1. Breathing, visualization, and meditation
2. Time away to self-rejuvenate (2-5 minutes several times daily and time off/vacation) implementing the first point above
3. Give priority to self-care:
 - o Exercise
 - o Good health habits
4. Maximizing the moment (live in the now; be observant of current surroundings)
5. Implement spiritual disciplines (incorporate with number one above)

Spiritual Integration

The spiritual dimension is integrated throughout the presentation. Participants are referred to biblical texts (both Old and New Testaments) that discuss the concepts of compassion (having pity, showing mercy, loving deeply, being torn of heart) and compassion fatigue (losing heart, growing weary, becoming faint). However, the

Christian is encouraged to not grow weary (Galatians 6:9). In order to not grow weary, the Christian professional must stay connected to the source of faith, Christ himself, as the branch draws energy from the vine (John 15: 4-5). Prayer and “time off” are important to not losing heart (Luke 18:1). Jesus is our example of getting away, taking “time off” to pray and refresh. He did so in the evening (Matthew 14:23) and morning (Mark 1:35). Workshop participants are encouraged to utilize deep breathing as a spiritual discipline: of calling upon the Spirit (breath of God) to breathe in and through their lives. The professional desires the Spirit’s saturating the inner spirit, soul, and body, bringing healing of stress and fatigue on the body and mind, refreshment to the spirit, and renewal of the mind to follow God.

Some Important Resources

For additional information regarding compassion fatigue, please examine the Idaho State University website:

<http://www.isu.edu/~bhstamm/tests.htm>

Several tests are available on-line and can be downloaded from this website, as well as links to other resources. Research and writing from Charles Figley and B. Hudnall Stamm are significant in this important subject of caring for the professional.

In addition, for information related to burnout, research and writings from Christiana Maslach and Michael Leiter, University of California-Berkeley, are significant. Check the following Google listing for relevant information on burnout:

<http://www.google syndicated search.com/u/berkeley?q=Burnout&sitesearch=berkeley.edu&domains=berkeley.edu>