

# COMPASSION FATIGUE HELPING A HELPER (YOU)



**PRESENTED BY:**

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## Compassion Fatigue - History



- 1982: Charles Figley defines Secondary Traumatic Stress as a phenomenon associated with the “cost of caring”
- 1992: Nurse Jonson used term in Nursing Magazine to describe feeling of “worn down”
- 1992: Jeffrey Kottler writes Compassionate Therapy to emphasize importance of compassion when dealing with difficult/resistant clients
- 1995: Figley redefines Secondary Traumatic Stress to a “more friendly term” – Compassion Fatigue

## PTSD



- The diagnostic criteria for the manual's next edition identify the trigger to PTSD as exposure to actual or threatened death, serious injury or sexual violation.



- The exposure must result from one or more of the following scenarios, in which the individual:
  - directly experiences the traumatic event;
  - witnesses the traumatic event in person;
  - learns that the traumatic event occurred to a close family member or close friend (with the actual or threatened death being either violent or accidental); or
  - experiences first-hand repeated or extreme exposure to aversive details of the traumatic event (not through media, pictures, television or movies unless work-related).



- The disturbance, regardless of its trigger, causes clinically significant distress or impairment in the individual's social interactions, capacity to work or other important areas of functioning.
- It is not the physiological result of another medical condition, medication, drugs or alcohol.

## Compassion Fatigue Defined



### COMPASSION FATIGUE:

- Also called “vicarious traumatization” or secondary traumatization (Figley, 1995).
- The emotional residue or strain of exposure to working with those suffering from the consequences of traumatic events.
- It differs from burn-out, but can co-exist.
- Compassion fatigue can occur due to exposure on one case or can be due to a “cumulative” level of trauma.

## Burn-Out Defined



### BURN-OUT:

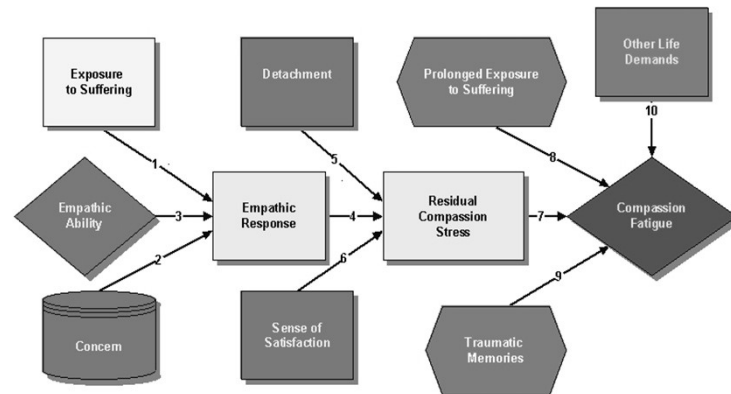
- Cumulative process marked by emotional exhaustion and withdrawal associated with increased workload and institutional stress, NOT trauma related.

## Compassion Fatigue



So how does it happen?

## Compassion Fatigue



The Compassion Fatigue Process (Figley, 2001)

## Compassion Fatigue - Secondary Trauma

### CONTRIBUTING FACTORS

- Intensity
- Frequency
- Severity
- Proximity
- Personal Factors
- Sensory Information

### CONTRIBUTING FACTORS

- Perceptions, Belief Systems
- Current Coping Mechanisms
- Implementation of Self-care Techniques
- Support System

## Compassion Fatigue – Vicarious Trauma



### The Impact of Controlled Empathy

- Vicarious Trauma is more than Secondary Trauma.
- Characterized by a painful set of symptoms that result from utilizing Controlled Empathy while listening to or seeing traumatic narrative content.
- Controlled Empathy is a vigorous neurological activity.
- Controlled Empathy and Automatic Empathy are not the same.

## Compassion Fatigue – Controlled Empathy



- Controlled Empathy is Automatic Empathy interrupted.
- Human imagination – Right brain activity
- Empathy, the ability to share another's emotions, is rooted in infancy.
- Controlled Empathy – remain composed
- Automatic Empathy – can let out the tension freely.

## Compassion Fatigue – Controlled Empathy

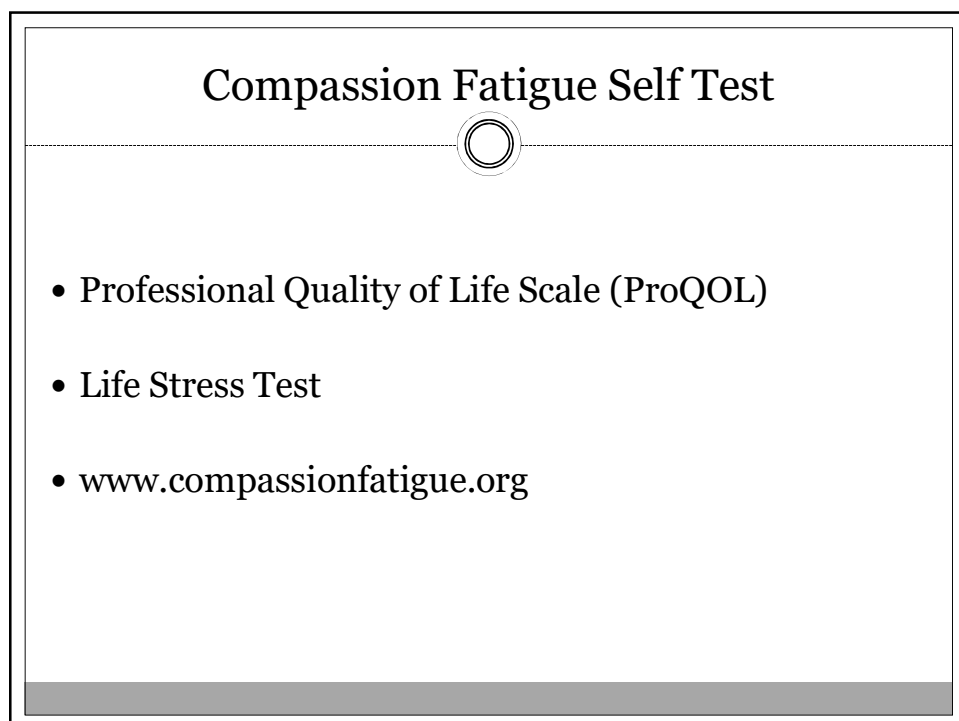
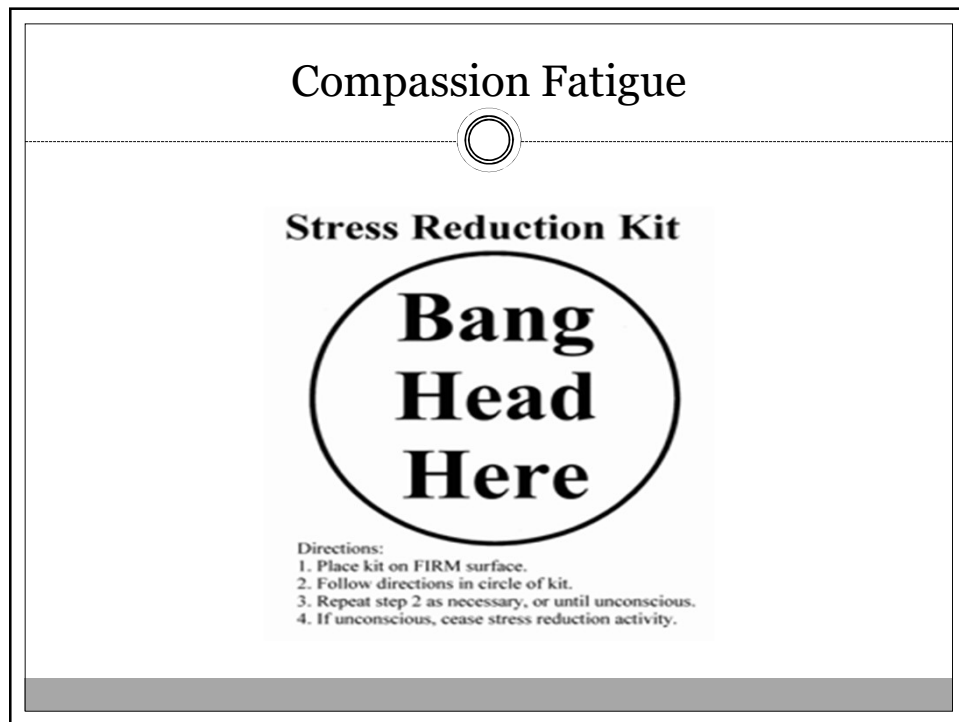


- Empathy plays a critical role in many facets of life.
- Leads to compassion, moral awareness and spiritual well-being
- Controlled Empathy + Neurological strain of trauma content = Probability of suffering Vicarious Trauma
- Untreated Vicarious Trauma can affect ethical judgment, boundaries, diminished levels of competence

## Compassion Fatigue – Signs & Symptoms



- Cognitive (e.g., difficulty concentrating)
- Emotional (e.g., anxiety, rage, sadness)
- Behavioral (e.g., irritable, impatient)
- Spiritual (e.g., loss of purpose, hope)
- Personal Relationships (e.g., isolation from others)
- Physical/Somatic (e.g., aches and pains, sweating)
- Work Performance (e.g., low motivation, apathy)





## Compassion Fatigue



Self-Care is a  
priority and necessity  
- not a luxury -  
in the work that we do.

## Compassion Fatigue – What to do About it



### DEVELOPING RESILIENCE:

“Put the Oxygen Mask on Yourself First”

Charles R. Figley, PhD, When Helping Hurts, Produced by  
Gift from Within.

- First, do no harm to yourself in the line of duty when helping/treating others – Correlation between compassion fatigue and ethical violations
- Second, attend to your physical, social, emotional, and spiritual needs as a way of ensuring high quality services for those who look to you for support as a human being

## Compassion Fatigue – Self Care



- Re-evaluating an unhealthy relationship
- Listening to your body & staying within your limits
- Advocating for your rights
- Commit more time to planning
- Not assuming responsibility for others & their problems

## Compassion Fatigue – Self Care



- Lose “all-or-nothing” thinking; be more flexible
- Not feeling compelled to fix/solve another’s problem
- Not anticipate the needs of others
- Re-think trying to please others; explore being satisfied with self
- Appreciate your mistakes – opportunity to learn & grow

## Compassion Fatigue – Self Care



- Not over-committing
- Giving yourself plenty of time so not feeling harried or pressured
- Quit blaming and shaming self...then others
- Stop taking things personally
- Keeping up with dentist & doctors appointments
- Taking restroom breaks when needed

## Compassion Fatigue – Self Care



- Accepting yourself for who you are
- Not feeling the need to control; accept some things are out of your control
- Forgive yourself when you make a mistake
- Quit trying to prove that you are good enough
- Stop tolerating behaviors you don't want
- Trust yourself

## Compassion Fatigue - Detachment



- Back to the Compassion Fatigue Process
- Detachment
- Not attachment – excessively worried or preoccupied with person or problem
- It's not: cold, withdrawn, hostile, ignorant bliss

## Compassion Fatigue - Detachment



- Based on premise that each person is responsible for him/herself & we can't solve problems that aren't our own & worrying doesn't help
- It doesn't mean that we don't care. It means we learn to love, care & be involved without going crazy
- When we allow people to be who they are, then we stop trying to change the things we can't

## Compassion Fatigue – Sense of Satisfaction



- When things don't work out as well as you'd hoped, you can think of the experience as a partial success or learning opportunity
- Are you wanting your client to provide for you a sense of satisfaction?
- "you're okay...then I'm okay"
- Reframe the "pay-out"

## Compassion Fatigue – Transformed



TRANSFORMING COMPASSION  
FATIGUE INTO COMPASSION  
SATISFACTION

## Compassion Fatigue – Top 12 Tips



1. Take stock – What's on your plate?
2. Start self-care idea collection – friends & at work
3. Find time for yourself every day – Rebalance your workload
4. Delegate – Learn to ask for help at home and at work

## Compassion Fatigue – Top 12 Tips



5. Have a transition from work to home
6. Learn to say no (or yes) more often
7. Assess your trauma inputs
8. Learn more about Compassion Fatigue & Vicarious Trauma

## Compassion Fatigue – Top 12 Tips



9. Consider joining a supervision/peer support group
10. Attend workshops/professional training regularly
11. Consider working part time (at this type of job)
12. Exercise

## Compassion Fatigue



- **CONNECTIONS:** Talk out your stress- process your thoughts and reactions with someone else (coworker, therapist, clergy, friend, family, supervisor)
- Build a positive support system that supports you, not fuels your stress
- Pets accept whatever affection you are able to give them without asking for more—Pets are basically invulnerable to “provider burnout”
- Blood pressure and heart rate decrease when interacting with animals

## Compassion Fatigue



## Compassion Fatigue



**THANK YOU!**