

Compassion Fatigue
How to Recognize it and Build Resiliency
Elia Colon-Mallah, DVM

What is Compassion?

- According to the Center for Compassion and Altruism Research and Education, compassion is “a process that unfolds in response to suffering.” (Stoewen, D. L.)
- It begins with the recognition of suffering, giving rise to thoughts and feelings of empathy and concern, motivating action to relieve suffering.
- Compassion consists of three facets:
 - Noticing, feeling, and responding.

What is Compassion Fatigue (CF)?

- The emotional, physical, and spiritual distress associated with caregiving. (Figley and Roop, 2006)
- The negative psychological symptoms experienced by caregivers when providing care while being exposed to primary or secondary trauma. (Stoewen, D. 2019)
- In veterinary medicine, it often takes place when a patient is threatened with the risk of death, pain, and/or distress.

Emotion and CF

- Sharing emotions can be pleasurable but sharing negative emotions can be difficult and does not always lead to sympathy, concern, and compassion.
- Exposure to suffering can lead to empathic concern with sympathy and compassion OR compassion fatigue (distress).

Evolution of CF

- Compassion fatigue research was first studied within the nursing profession.
- The majority of CF research has been studied within the human medical profession. (Anderson and Papazoglou, 2015.)

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Compassion Fatigue Literature

- Compassion fatigue was first brought to light by Charles Figley PhD, in February 1982, through his publication "Traumatization and Comfort: Close relationships may be Hazardous to your health." October 2015, Journal of Clinical Psychology.
- Carla Joinson, a DVM with a Ph.D. in social work published "Coping with compassion fatigue," Journal of Nursing, April 1992.
- More recently, in 2022, Debbie Stoewen, a DVM with a Ph.D. in social work published a comprehensive six-part series of journal articles titled "Moving from Compassion Fatigue to Compassion Resilience" in the Canadian Vet Journal.

How Does CF Manifest?

- According to Dr. Figley, *EMPATHY exposes caregivers* to the negative side effects associated with prolonged stress and trauma.
 - Results in empathic distress. (Stoewen, D. 2019)
- To experience compassion fatigue, one must:
 - Possess the ability of empathy.
 - Work in the capacity of a caretaker. (Cross, L. A., 2021)
- CF is acknowledged by the psychological community, but it *is NOT represented as a diagnostic category in the "Diagnostic and Statistical Manual of Mental Disorders.* (Russo, et. al. 2020).

SECONDARY TRAUMA

- In addition to feeling compassion for our patient's pain, anxiety, and fears, we also feel anxiety, stress, fear, and other emotions when:
 - A client cannot afford the cost of the surgery needed for their pet;
OR
 - An animal with severe trauma arrives and is on death's door.
 - A patient who is in the end stages of a disease and is suffering, and euthanasia is not authorized. OR
 - When we observe signs of outright animal abuse.
- **You** can be traumatized by witnessing or hearing about trauma.

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Compassion Fatigue vs. Burnout

- Compassion fatigue is a state of exhaustion biologically, psychologically, and socially, as a result of prolonged exposure to compassion stress and all it invokes.” (Figley, 2013)
 - Has a shorter onset than burnout.
 - Can occur after one incident.
 - Can be resolved by taking a break from caregiving duties.
 - Can result in the *inability to nurture* (Joinson, 1992).
- Burnout
 - A physical or emotional collapse caused by excess work or stress.
 - It is a product of workplace stress that results in anger and feelings of being ineffective, leading to apathy and depression. (Joinson, 1992)
 - *When the amount of work exceeds available resources (time, money, staff, and supportive leadership)*
 - Occurs over *several years*.
 - May culminate in the person leaving the place of employment.

The Cost of Empathy

- Burnout can occur in any WITHOUT EMPATHY and COMPASSION.
- Compassion fatigue occurs with EMPATHY/COMPASSION.
(Coles, 2017)

Caretaker Risk of CF and Moral Distress

- Stress is common in veterinary practice and increasing.
- The qualities that make caretakers good at what they do will put them at risk for compassion fatigue.
- In addition to patients, caretakers also provide support to clients and each other, increasing the overall risk of psychological stress.
- Physical, emotional, and moral challenges also increase stress and influence patient outcomes. (D. Stowen, 2020).

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- According to Andrew Jameton, Professor Emeritus in the field of bioethics, MORAL DISTRESS is “*knowing the right thing to do while being in a situation in which it is impossible to do it.*” (Jameton, 1984).
- To reduce compassion fatigue, caregivers must cultivate self-compassion, and engage in mentorship and related training to support treatment(s) that align with patient needs and the standard of care.

Individuals Symptoms of Compassion Fatigue

- Individual Symptoms of CF (1)
 1. A decline in caring, feeling, acts of compassion, and detachment. thinking.
 - Signs can be subtle to overt, and different for each person.
 - Others will present as more task-oriented and less focused on emotion.
 - Some may detach and become socially isolated.
(Stowen, D., November 2020)
 2. Physical and Emotional Exhaustion
 - Impacts day-to-day functions, feelings, and behavior.
 - Negative emotions and inability to work well with others.
 - Mood swings, tearfulness, anxiety, irrationality, and melancholy.
 - Gradual inability to perform duties with clarity and good judgment.
 - Emerging feelings of forgetfulness and negative self-image.
 - Development of stress-related physical and psychiatric behaviors. (Mathieu, F. 2012.)

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- Organizational Symptoms of CF
 - Increased absenteeism
 - Loss of trust, optimism, and comradery.
 - Substandard level of care
 - Low morale
 - Increased cynicism
 - Decreased productivity
 - Loss of clients and referrals.
 - Lack of vision for the future.
 - Employees leave the profession.
- (Stowen, D., November 2020)
- Per the AVMA (American Veterinary Medical Association), organizational compassion fatigue is defined as “a toxic work environment that hinders efficiency and limits a practice’s growth potential.”
 - **Factors That Contribute to Compassion Fatigue**
 - Lack of awareness of CF
 - Lack of training at work
 - Inexperience in the field
 - Non-compliant clients
 - Lack of self-forgiveness
 - Perfectionist personality.
 - Lack of healthy coping mechanisms/stress management techniques
 - Unreasonable expectations from others/yourself
 - Professional Quality of Life Survey: “ProQual”
<https://proqol.org/>
 - Is a 30-question survey that scores compassion satisfaction, burnout, and secondary traumatic stress.
 - Describes compassion fatigue as “burnout AND secondary trauma.”
 - Developed by Beth Hudnall Stamm PhD, this test is free on the ProQOL website and can help you determine *how much compassion your job provides and helps you determine the difference between burnout and secondary trauma* (CF).

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STEPS YOU CAN TAKE TO MANAGE COMPASSION FATIGUE

- Maintaining Resilience **and Self Care**
 - Repeated exposure to trauma in the course of caretaking reduces psychological resilience.
 - Resilience is the capacity learned to withstand stress and/or quickly recover from it. (Stowen, D., November 2021)
 - To care for others, one **must** care for oneself. (Lama and Change, 2014)
- Well-being is inversely proportional to the demands of work.
 - Consider a review of workloads/work processes, and work hours, with attention to schedules, staffing, on-call, and overtime policies.
 - Functional equipment, training, mentorship, equity policies, and the use of collegial communicative practices will support a safe and inclusive workplace. ([Loftus T.D. and Crisis Prevention Institute, 2018](#))
- Practice of Self Care: Well-being
 - Mitigates compassion fatigue and supports mental health.
 - **Identifies** what it takes to keep you buoyant, hopeful, and energetic.
 - Includes creative pursuits and activities that are meaningful and give you joy.
 - Set boundaries by revising your workload, delegating, and limiting availability.
 - Enables resilience by sustaining confidence, optimism, and resourcefulness. (Stowen, D., November 2021)
- Basics of Resilience
 - Adequate sleep
 - Good nutrition
 - Regular physical activity
 - Active relaxation - Yoga, meditation, **and creative pursuits.**

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Methods Used to Manage Compassion Fatigue

Mindfulness Practice

- Is awareness and acceptance of your physical, mental, and emotional experiences, without judgment as they occur.
- It allows you to think about what you are doing and why you are doing it, as opposed to going on “auto-pilot;”
- Mindfulness practice can reduce stress, anxiety, depression, and burnout to reduce compassion fatigue and improve the quality of care and compassion provided to patients.
- Meditation exercises train the brain to adapt and stay focused in the present.

Self-Compassion

- Another form of self-care that reduces anxiety, depression, **and burnout to enhance overall happiness and contentment.**
 - Three components of self-compassion:
 - Kindness/understanding when in pain or self-critical.
 - Seeing experiences as “human” vs. “isolating.”
 - Mindlessness vs. **overidentification with perceived errors.**
- (Neff, K.D., 2003)

Social Support

- A support system is a **CRUCIAL** component of cultivating and maintaining resilience and mirrors caregiver wellness.
 - It may involve individuals, or groups of people, **who** can provide a sense of community to bolster physical and mental health.
- (Gentry JE, Baranowsky AB, 2012)

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Social Support at Work

- **Elevated levels** of social support **are** associated with a reduction of stress, anxiety, and depression, providing a buffer against mental and physical illness.
 - Maintain a safe space where staff members can de-stress and regroup.
 - Check-ins/debriefing sessions where staff can share their concerns.
 - **Include staff** input regarding hospital protocols:
 - Define guidelines for the use or the refusal of euthanasia.
 - Use of [incremental veterinary care](#) for clients with limited financial resources.

STAY INFORMED

- Implementation of interventions at the organizational level has a greater impact on health and well-being than at the individual level.
- State and national/professional associations, and professional journals regarding continuing education, updates on the state of the profession ([NAVTA](#), [NYSAVT](#)), and the latest on compassion fatigue and techniques to maintain resilience and mental health.
- Reach out to organizations and other practices regarding policies that help to reduce stress:

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