



COMPASSION FATIGUE IN THE TIME OF COVID-19: A PRIMER FOR ADMINISTRATORS

Sheri Gibson, Ph.D.

sherigibson2@gmail.com

www.DrSheriGibson.com



Introduction

- Our work is technically demanding
- Our work also places demands on our humanity
- Isolation, death, anxiety, grief = the perfect recipe for fatigue and burnout
- We must attend to ourselves in order to attend to others

Is there light at the end
of the tunnel?



How do we help others with uncertainty?

- Normalize anxiety
 - “It very appropriate to feel anxious right now.”
- Focus on coping
 - “What would be most helpful to you right now?”
 - “What things are in your control right now?”
- Focus on areas of certainty and gratitude
 - “What are you most certain of?”
 - “What are the areas of your life around which you have gratitude?”

Compassion

- What is compassion?
- How is compassion different from sympathy and empathy?



Compassion

- An emotional response when perceiving suffering that involves an authentic desire to help.
- Derived from Latin and Greek roots “pati” and “pathein” meaning “to suffer” and the Latin root “com” meaning “with.”



Compassion as documented in human history

- **Christianity:** The Good Samaritan
- **Confucius:** Major teacher of the Golden Rule
- **Judaism:** “The 13 Attributes of Compassion”
- **Buddha:** “Loving kindness and compassion is all our practice.”
- **Dalai Lama:** Believed the individual experience of compassion radiates outward and increases harmony for all: “*Compassion is a necessity, not a luxury...without it, humanity cannot survive.*”
- **Charles Darwin:** Not survival of the fittest, but survival of the kindest. “Communities, which included the greatest number of the most sympathetic members would flourish best, and rear the greatest number of offspring.” (*Descent of Man and Selection in Relation to Sex, 1898*)

Simply put, Compassion is:

- The feeling of sorrow or concern for another coupled by the desire to alleviate the suffering:
 - “I feel for you” + “I understand you” + “I want to help”



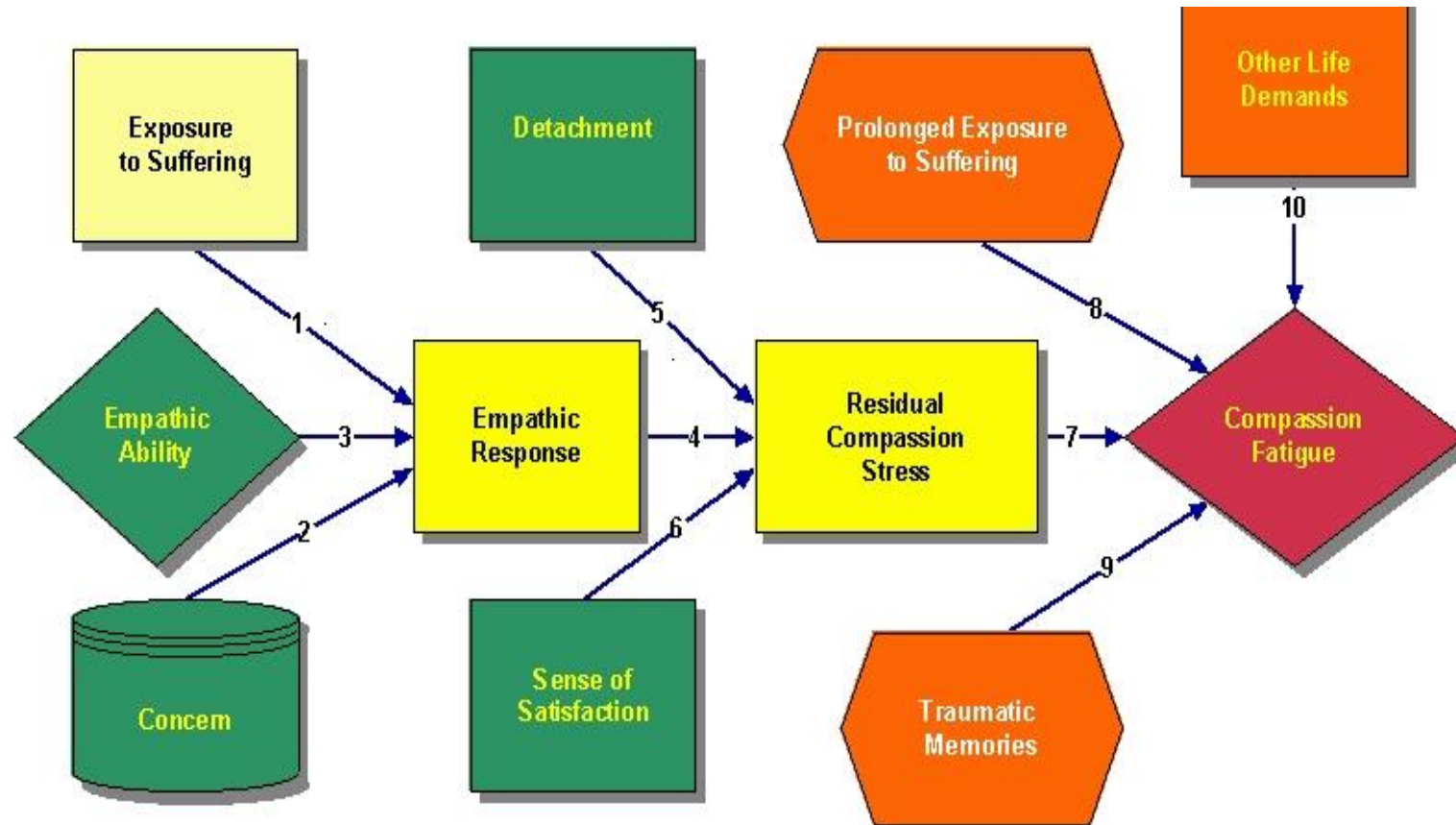
The “Cost of Caring”

- Work centered on the relief of suffering involves absorbing information about suffering, thus absorbing that suffering itself:
 - “secondary victimization”
 - “vicarious trauma” or “trauma by concern”
 - “Chiasmal trauma”: an entire system is affected by trauma to even one member

The Study of Compassion Fatigue

- Term was introduced by Joinson in 1992 and developed by Figley in 1995.
- Figley developed a model for the process by which compassion fatigue develops.
- Model has been used to describe development of symptoms across multiple care settings and among persons in different care roles.

Figley's model of Compassion Fatigue



The Compassion Fatigue Process (Figley, 2001)

External Factors

- The Work Environment
 - Societal support
 - Public policy, regulations
 - Social acceptance, activism
 - Work Setting
 - Physical environment
 - Employer values, culture
 - Job tasks, personnel guideline
 - Management, colleagues

The Effects of External Factors

- The “Six Futilities”
 - Perception of the Suffering
 - Resident/family demands
 - Institutional Demands
 - Communication, treatment errors
 - Feelings of inadequacy
 - Sense that the care is not benefitting the resident

Also, Internal Factors have an impact

- The personal gift and curse of empathy
 - High empathy helps us understand *and* can challenge our equanimity
 - Personal History/Personality
 - Our temperament
 - Family/social history
 - Personal boundaries
 - Unresolved personal trauma
 - Over-generalization: thinking others' experiences are similar to ours

Internal Factors, cont.

- “Pathological Altruism”
 - A combination of:
 - An excess of empathy
 - An inability to self-regulate
 - Being more focused on relieving one’s own discomfort than another’s

What Happens to Us?

“BURNOUT”

VS.

“COMPASSION FATIGUE”

“Burnout”

- Gradual physical, mental, emotional erosion due to long-term involvement in emotionally demanding or unfulfilling situations:
 - Exhaustion: physically, mentally drained
 - Depersonalization: feeling hardened or numb
 - Achievement Void: reduced accomplishment, satisfaction.



“Compassion Fatigue”

- Feels similarly to “burnout” but:
 - Can emerge suddenly
 - Existential/spiritual effects: overarching meaninglessness, worthlessness, hopelessness
 - A sense of isolation from supporters, hyper-vigilance or fear
 - Symptoms often disconnected from real cause

Signs and Symptoms of Compassion Fatigue

- For the Individual:
 - Difficulty concentrating, pre-occupation, exhaustion
 - Nightmares/flashbacks
 - Over-reactions or avoidance of sensory/emotional stimuli
 - Chronic physical ailments: colds, stomach problems
 - Apathy, anhedonia
 - Excessive negativity: blaming others, complaining
 - Compulsive/avoidant behaviors: substance abuse, over-spending, over-eating, gambling
 - Problems in personal relationships, intimacy
 - Denial of difficulties or problems

Signs and Symptoms of Compassion Fatigue

- For the Institution:
 - High absenteeism and/or staff turnover
 - Increasing difficulty completing routine tasks, assignments
 - Inability of staff to respect and meet deadlines
 - Unprofessional outbursts of anger, aggression
 - Instability, conflict in staff/team relationships
 - Desire among staff member to break the company rules
 - Staff inflexibility, increased rigidity, resistance to change
 - Excessive complaining, negativity towards management
 - Skepticism or apathy about organizational vision, future
 - Inability of staff to believe improvement is possible

WHY are we susceptible to Compassion Fatigue?

- Sympathetic Nervous System:
 - Fight, flight, or freeze
 - Is an adaptive response in *real* crises, but wilts us day in and day out
- Parasympathetic Nervous System:
 - Restores physiological equanimity
 - Keeps you rooted, helps you tend and thrive

Critical in a Time of COVID-19

- Heightened states of:
 - Anxiety
 - Uncertainty
 - Unknown of the future
 - Decision-making / Risk assessment
- And
 - Chronicity of the above states
 - Perception of “no end in sight”

How do we protect ourselves?

- The antidote to vicarious trauma, burnout, and compassion fatigue is:



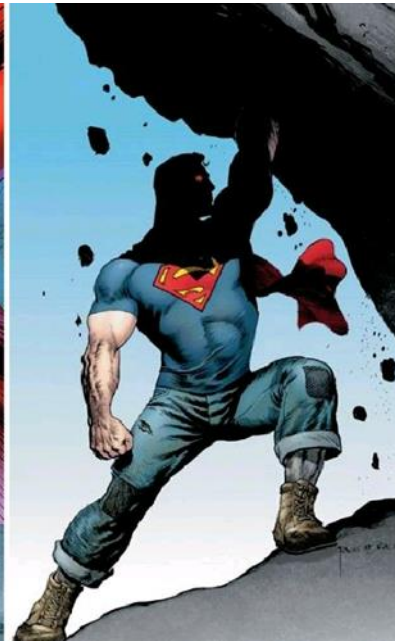
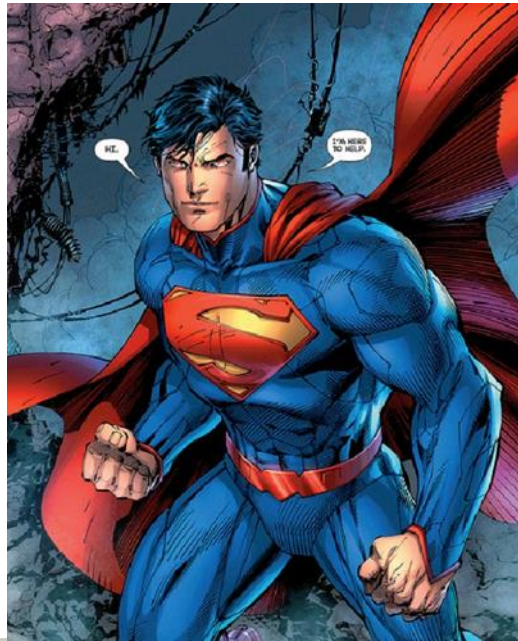
RESILIENCE



Resilience

- Defined as:
 - The ability of something to return to original shape after it has been pulled, stretched, pressed, bent, etc.
 - The ability to recover from or adjust easily to misfortune or change.
- We need to develop skills to stay well for better performance and well-being in high-compassion stress work!

No Pressure.



Resiliency Skills

#1: Self-Awareness

- Self-Awareness
 - **Physical, emotional**
 - Technical
 - Existential
- Self-Awareness Tip: What's going on in your body, mind, and spirit when you are working is often a clue/barometer of what's going *on in your staff and others*.

Resilience Skills: Self-Awareness, cont.

- Self-Awareness
 - Physical, emotional
 - **Technical**
 - Existential



- Questions to ask yourself:
 - What skills and knowledge bases are natural talents for you, and where might you put some effort into developing more?
 - What are your strengths, growing edges, and blind spots?

Resilience Skills

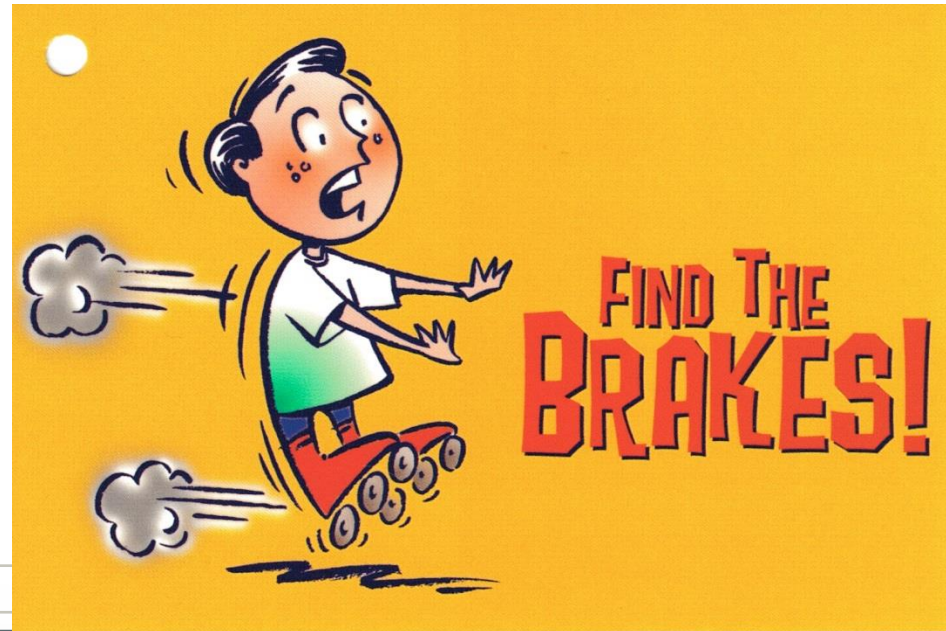
Self-Awareness, cont.

- Self-Awareness
 - Physical, emotional
 - Technical
 - **Existential**
- The nature of our work begs all the “big questions”
- Spend time consciously exploring your questions about life and death, truth and justice, good, evil
- Develop a language and a coping strategy to manage suffering, horror, tragedy, and to help find meaning

Resilience Skills

#2: Self-Regulation

- Self-Regulation
 - Boundaries
 - Values Clarification
 - Arousal Management



Resilience Skills

#3: Self-Care

- Self-Care
 - Eat well, exercise, and sleep
 - *Right for you!*
 - Have fun like your life depends on it
 - *It does!*
 - *Get “shallow, simple, and silly” for your health!*
 - Talking really does help
 - *With the right person!*

Take a moment:

- List one mini-escape or diversion that worked well to restore and renew you.
- List one thing that brings you joy.
- When was the last time you did it?
- What gets in the way of doing it more often?
- What are your personal triggers indicating it's time to “recharge your battery?”

Resilience Skills

Self-Care, cont.

- TALK IT OUT.
 - Talking is one of the most effective ways of preventing and healing from compassion fatigue
 - Who you talk to is important
 - The person you choose should be someone who:
 - Can really relate
 - Can be present without interfering with your process
 - Doesn't "one-up" you or switch to their story
 - Needs to understand and honor confidentiality!
 - Utilizing your EAP benefits

Resilience Skills

What about those External Factors?

- Ask yourself:
 - Am I (still) committed to:
 - The agency's mission, values, culture
 - The physical environment/resources
 - The organizational structure
 - Lines of authority
 - Style of communication
 - My colleagues/managers/supervisors

Final Tips on Preventing Compassion Fatigue

- “Dig where the ground is soft” – Chinese proverb
 - Avoid your trickiest area to fix, and pick the issue you can most easily visualize changing/improving.



Prevention tips, cont.

- Take stock of what's on your plate
 - Make a list of all the demands on your time and energy
 - Look at your list carefully; what stands out? What factors contribute to overflowing your plate? Brainstorm with a friend.
- Start a Self-Care collection
 - Ask friends what they do for self-care; start making your list – you may learn new things and new ideas!

Prevention tips, cont.

- Start a self-care practice with your team:
 - Start a contest for best self-care idea of the week.
 - Create a self-care board where people post their favorite ideas.
 - Initiate “5 minutes of self-care” at each staff meeting, where someone is in charge of bringing new ideas to the group.
 - Find time for yourself everyday – Rebalance your workload.
 - Delegate work – at the office AND at home
 - Create a transition from “work” to “home” (which is one in the same)
 - Do you walk? Change clothes? Listen to fun music on the commute? Find a way to transition.

Final thoughts

- Self-Awareness is key to appreciating your own reactions to stress.
- Look for behavioral cues of your staff that indicate trouble areas.
- View others through a lens of curiosity and empathy – find the compassion in your own approach.
- Utilize key resources to prevent compassion fatigue or intervene when you notice problems.

References

Compassion Fatigue Awareness Project (2013)

<http://www.compassionfatigue.org>

Davidson, R. and Begley, S. (2013) *The Emotional Life of Your Brain: How Its Unique Patterns Affect the Way You Think, Feel and Live – and How You Can Change Them*. Plume: the Penguin Group.

Figley, C. (1995) *Compassion Fatigue: Coping With Secondary Traumatic Stress Disorders In Those Who Treat The Traumatized*. Rutledge.

Halifax, J., Dossey, B. and Rushton, C. (2007, April) Being With Dying: Compassionate End-of-Life Care Training. Conducted at Upaya Zen Center, Santa Fe, New Mexico.

References, cont.

Halifax, J. (2012, May 12) Inside Compassion: Edge States, Contemplative Interventions, Neuroscience. Lecture conducted from the U.S. Library of Congress, Washington, D.C.

Lester, G. Why Stress Management Doesn't Work for Social Service Professionals and What to Do About It [Audio recording]. United States. Available from <https://www.crosscountryeducation.com>

Professional Quality of Life Elements Theory and Measurement. <http://www.proqol.org>

Day, J. R., and Anderson, R. A. (2011). Compassion fatigue: An application of the concept to informal caregivers of family members with dementia, *Nursing Research and Practice*, Article ID 408024. doi: 10.1155/2011/408024

Thank You



RESOURCES

Trauma-Informed, Person-Centered Care Resources

- **NORC**

- Trauma-informed care – <https://ltcombudsman.org/issues/trauma-informed-care>
- Person-centered care - <https://ltcombudsman.org/issues/person-centered-care>

- **Consumer Voice**

- Resident-Directed Care/Culture Change <https://theconsumervoice.org/issues/for-advocates/resident-directed-care>
- My Personal Directions for Quality Living - [Blank Form](#) & [Sample](#)
 - A tool from Consumer Voice, with edits by SAGE, for individuals to share what matters to them for person-centered care.
- Information for LTC consumers - <https://theconsumervoice.org/issues/recipients>
- Information for Family Members - <https://theconsumervoice.org/issues/family>

Resources

National Long-Term Care Ombudsman Resource Center (NORC)

www.ltombudsman.org

- Coronavirus Prevention in Long-Term Care Facilities: Information for Ombudsman Programs
https://ltombudsman.org/omb_support/COVID-19

National Consumer Voice for Quality Long-Term Care (Consumer Voice)

www.theconsumervoice.org

- Coronavirus in Long-Term Care Facilities: Information for Advocates
<https://theconsumervoice.org/issues/other-issues-and-resources/covid-19>
- Coronavirus in Long-Term Care Facilities: Information for Residents and Families
<https://theconsumervoice.org/issues/other-issues-and-resources/covid-19/residents-families>



The National Long-Term Care Ombudsman Resource Center

Connect with us:

www.ltcombudsman.org
ombudcenter@theconsumervoice.org



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