



# A Guide to Understanding Compassion Fatigue

By Chris Scanlon

Table of Contents

I. Introduction.....p. 3

II. Glossary.....p.4

III. Podcast Script: Help! I Need Somebody!.....p. 5

IV. Signs and Symptoms.....p. 11

V. Suggestions.....p. 12

VI. Additional Resources.....p. 13

VII. References.....p. 15

## I. Introduction

Hello! My name is Chris Scanlon. I am working on my Master's Degree in Applied Developmental Psychology at the University of Pittsburgh. I have experience working with children and supervising people who work with children. With my Master's Degree, I would like to work with existing programs to ensure they are as effective as possible, and one day, possibly running a program of my own.

I have recently become very intrigued by compassion fatigue (or secondary traumatic stress), and the effect it has on people who help other people, like you and me. Through one of my classes, Emotional Disorders in Childhood, I received the fortunate opportunity to share this concept with you. I have created a podcast, or a short audio clip, which is accompanied by A Guide to Understanding Compassion Fatigue. This guide includes a plethora of information on compassion fatigue, including a script of the podcast, a glossary of terms, a list signs and symptoms, suggestions of how to cope, and a compilation of resources and references.

The information you are about to read about compassion fatigue is imperative to anyone who counsels, teaches, advises, treats, or helps other people. I hope you are able to find it helpful. For more information regarding behavioral or emotional disorders, please visit [www.sbbh.pitt.edu](http://www.sbbh.pitt.edu). Not only does this site provide information on various disorders, it also has resources and support for children, teenagers, and the adults who work with them.

## II. Glossary

**Compassion Fatigue** - a state where the person who is helping traumatized people becomes preoccupied with those people by "re-experiencing the traumatic events avoidance/numbing of reminders persistent arousal (e.g., anxiety). It is a function of bearing witness to the suffering of others" (Figley, 2002a, p. 1435).

**Helpers** - anyone who provides a service or listens to another person. A helper can be a teacher, therapist, doctor, nurse, counselor, nursing home employees, friend, family member, caseworker, police officer, firefighter, journalist, first responders, etc.

**Post-traumatic Stress Disorder (PTSD)** - feelings and behaviors that result from directly experiencing a trauma and cause a significant disruption in a person's life (DSM-IV-TR text revision, 2000).

**Secondary Traumatic Stress** - feelings and behaviors that result from the indirect exposure to trauma by helping or wanting to help someone who has been traumatized. (Figley, 1995).

## III. Podcast Script: Help! I Need Somebody!

The Beatles had the right idea...

Help me if you can, I'm feeling down

And I do appreciate you being round.

Help me, get my feet back on the ground,

Won't you please, please help me? (Lennon & McCartney, 1965)

Helping people is rewarding. The joy and satisfaction you get from helping people makes the work you do worthwhile. But this feeling of satisfaction also comes with a cost, a cost which Charles Figley has labeled as the "cost of caring."

Your job as a helper definitely has its ups and downs, and while it is the ups that keep you passionate about your job, the downs can definitely take a toll. According to researchers, this toll is actually more common in those who work with children (Figley, 1995). The following is an account from a teacher who helped a child through a traumatic event:

*I will never forget her. She was such a bright, talented young lady. At times, she was shy and withdrawn, but for the most part, she was shaping up to be the star pupil of my class. Around mid-way through the second nine weeks, this young lady began missing days of school here and there, and that shy, withdrawn side was showing itself more and more. Her grades were slipping, and her appearance suggested something just wasn't right. I tried to talk to her, but she gave elusive answers and avoided one-on-one time with me whenever possible. The day before winter break, she showed up to school with a limp and a black eye, claiming she slipped on the ice on her sidewalk. I asked her*

*if there was anything she wanted to tell me, and she broke down in tears. She told me what could only be described as horrific abuse by her mother's boyfriend.*

When working with children, you can't help getting to know them well. Sometimes, the things you find out about the children you help are upsetting. Whether you are a teacher, counselor, therapist, child care provider, pediatrician, case worker or any other profession that deals with helping children, you are the ones who see the warning signs that things aren't quite right in the child's home environment. You are also the ones who help the child through traumatic events, such as the death of a parent, divorce, extreme poverty, or homelessness. As much as you try to emotionally distance yourself from these heartbreaking events, sometimes emotional involvement is unavoidable, and sometimes, the stress of helping children can follow you home.

*I was able to get her the help that she needed, and in the end, everything turned out the best it could. But as time passed, I just couldn't let it go. Maybe I could have done something differently. How could I have let it get to that point? It kept me up at night, and I found myself relying on frequent nightcaps to help me doze off. When I did sleep, I relived the girl's account in my dreams. I was scared for the girl, angry with the mother, and full of rage for the mother's boyfriend. I became increasingly irritable with my family and friends. I felt like no one understood what I was feeling.*

Some of the situations that you experience as a helper may actually be causing you something called "secondary traumatic stress." Secondary traumatic stress happens when after assisting someone with a trauma, you actually experience stress that is related to sharing the emotions and experiences of the person you help (Bride, Radey, & Figley, 2007).

Most people have heard about post-traumatic stress and know that it is a negative change in a person due to directly experiencing a traumatic event, like a car crash, natural disaster, or military combat. Both post-traumatic stress and secondary traumatic stress have similar symptoms, including difficulty sleeping, irritability, avoidance, nightmares, and a feeling of being isolated from others (Figley, 1995). The only difference between the two is that post-traumatic stress is experienced directly, while secondary traumatic stress happens indirectly when you, the helper, are helping someone else with their trauma (Bride et al. 2007). A list of secondary traumatic stress signs and symptoms can be found in the guide that goes along with this podcast.

Because secondary traumatic stress arises from the "cost of caring" that results from helping someone through trauma and emotional pain, it is more commonly referred to as "compassion fatigue" (Figley, 1995).

*My problems at home quickly boiled over into my classroom. I wasn't sleeping, and despite the amount of coffee I consumed, I was tired and lacking energy. I became hyper-vigilant with the other children in my class, determined that no other child was going to go through what she did. Not on my watch. I became overly empathetic with my students, as if I was searching for something to be wrong. Each bump or scratch triggered an alarm in my head that "it must be abuse." My job performance was slipping due to my constant worry, and this did not go unnoticed by my principal.*

Compassion fatigue is like glitter: when one person has glitter, she shares it with you. Later, you notice that some of the glitter is still stuck to you, and you have trouble getting rid of it all. It is important to recognize when compassion fatigue is happening because it has an effect on you

and an effect on the decisions that you make as a helper. In fact, you may not even realize that compassion fatigue is affecting your decisions. Yet, researchers have shown that people with high levels of compassion fatigue make poor professional judgments, experience a loss of motivation, and become overwhelmed by the unpleasant parts of their job (Bride et al., 2007). Recognizing compassion fatigue is important. I have included a link to a self-test called the Professional Quality of Life Scale in the guide accompanying this podcast. This test will help you determine how much compassion fatigue may be affecting you (Stamm, 2009).

*My principal sat down with me and expressed his concerns. He referred to my decline in performance and unprofessional behavior. It was then that I realized I needed help. Together, we decided that it would be best if I sought help from our Employee Assistance Program. After some therapy and adjustments in how I cope with stress, I was able to appropriately process the situation and move on with my life. I have since experienced similar situations. But now, I can recognize the signs of compassion fatigue, and I have learned how to cope with it.*

When dealing with compassion fatigue, you must remember that before helping others, you have to help yourself, and one of the best ways to do that is to get a little help from your friends (Eastwood & Ecklund, 2008; Lennon & McCartney, 1967)...

(sung) Oh, I get by with a little help from my friends,  
Mmm, gonna try with a little help from my friends  
Ooh, I get high with a little help from my friends  
Yes, I get by with a little help from my friends,  
With a little help from my friends (Lennon & McCartney, 1967).



In fact, research finds that one of the best ways to reduce the risk of compassion fatigue is to have friends and family as a support network (Eastwood & Ecklund, 2008). Making sure that you take time to socialize with your loved ones allows you to leave work at work. Speaking of leaving work at work, researchers say another good way to reduce the risk of compassion fatigue is to take short breaks while at work and long breaks outside of work (Eastwood & Ecklund, 2008). Short breaks allow you to temporarily walk away from the trying situations you may encounter, while activities and hobbies outside of work give you something to look forward to at the end of the day. ...And let's not forget vacation time! Even if it's just to sit around in your pajamas all day, the time away from work gives you the chance to wind down. Researchers have also found that getting enough sleep, eating healthy meals, and exercising are good ways to reduce the risk of compassion fatigue (Eastwood & Ecklund, 2008).

Not only are the things we just talked about good preventative measures, they are also good ways to help cope with compassion fatigue once you are experiencing it. However, if these self-help strategies are not enough to help cope with symptoms, there are several other options for someone dealing with compassion fatigue-related issues. Most employers offer an Employee Assistance Program. These types of programs can refer you to people you can talk to about the symptoms you may be experiencing. If you feel more comfortable talking to your family doctor, that would be an option as well.

There is a specific treatment program for compassion fatigue called the Accelerated Recovery Program (ARP). This program helps professionals in handling compassion fatigue in order to help them learn to better manage their emotions and cope with symptoms when they occur (Gentry, Baranowsky, & Dunning, 2002). The Accelerated Recovery Program is followed up with a PATHWAYS program that focuses on after-care and prevention (Gentry, et al., 2002).

These programs together have been found to be extremely helpful in treating those with compassion fatigue.

When thinking of compassion fatigue, I like to remember the airline's "oxygen mask principle:" secure your own mask before helping others with theirs (Gift from Within, 2006). That is what we have to remember when dealing with compassion fatigue: we have to make sure we can help ourselves before we can help others. Charles Figley wrote that "providing a comprehensive overview of compassion fatigue for educational purposes is vital," and the first step to dealing with compassion fatigue is to make yourself and your colleagues aware of the issue (Figley, 2002a, p. 1438). For more information, please look at the guide to compassion fatigue that supplements this podcast. I hope you have found this information interesting and useful. Thank you for taking the time to listen!

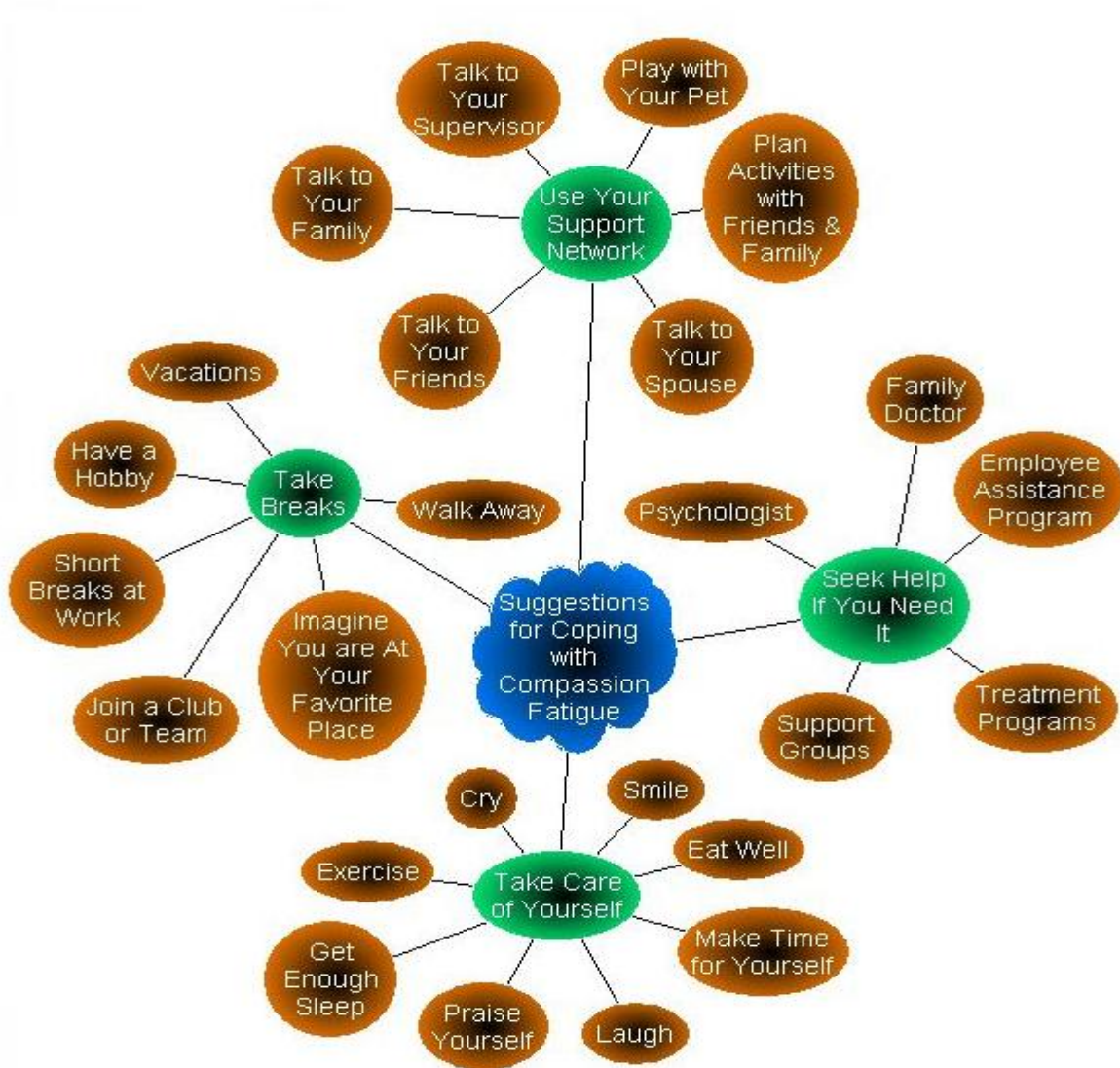
IV. Signs and Symptoms of Compassion Fatigue

**Difficulty Concentrating, Powerlessness, Impatient, Questioning the Meaning of Life, Withdrawal, Shock, Low Morale**      **Decreased Self-Esteem, Anxiety, Irritability, Loss of Purpose, Decreased Interest in Intimacy or Sex, Sweating, Low Motivation, Apathy**      **Guilt, Withdrawn, Lack of Self-Satisfaction, Mistrust,**      **Rapid Heartbeat, Avoiding Tasks, Rigidity, Anger/rage,**      **Moody, Pervasive Hopeless-ness, Isolation from Others, Breathing Difficulties, Obsession about Details, Disorientation, Survivor Guilt, Shut-down, Regression, Anger at God, Overprotection as a Parent, Projection of Anger or Pains, Apathy, Blame, Aches and Numbness, Sleep Perfectionism, of Prior Religious Disturbance, Questioning Dizziness, Negativity, Beliefs, Intolerance, Fear, Nightmares, Loss of Faith in a Higher Power, Loneliness, Increased Medical Maladies, Number and Intensity of Preoccupation Lack of Appreciation, Appetite Changes, with Trauma, Helplessness, Religion, Increased Greater Skepticism about Complaints, Interpersonal Conflicts, Other Somatic or Harm to Detachment, Thoughts of Self-Harm Immune System, Others, Sadness, Hypervigilance, Impaired Elevated Startle Poor Work Commitments, Depression, Response, Staff Conflicts, Emotional roller-coaster, Accident Proneness, Absenteeism, Depleted, Losing Things, Exhaustion, Overly Sensitive, Irritability, Withdrawal from Colleagues      (Figley, 2002b, p. 7)**



Charles Figley (2002b) identifies the above factors as signs and symptoms of someone with a high level of compassion fatigue. Everyone experiences the effects of compassion fatigue differently, which means that not everyone will display the same combination of symptoms. If you work with the traumatized and feel that many of these terms describe things that you currently feel or experience, check out the next several pages for suggestions and resources as to how to cope and who can help.

## V. Suggestions for Coping with Compassion Fatigue



The suggestions above are based on information from Eastwood and Ecklund (2008) and Perry (2003). The biggest thing to remember in your job as a helper is that taking care of yourself comes before taking care of other people. If you find yourself overwhelmed by a stressful situation from work, be sure to try one of these suggestions. If these activities do not seem to help, seek help from your employer's Employee Assistance Program, or be sure to talk to your family doctor about your compassion fatigue-related symptoms. By making sure that you can appropriately cope with work-related stress, you make sure that you are in the best position to help other people.

### Resources

[Charles Figley](#): Charles Figley is a key figure in trauma research and has done extensive work in the realm of secondary traumatic stress. He currently runs the Tulane Traumatology Institute and works with the Disaster Resilience Leadership Academy in New Orleans, LA. Figley has also written and edited numerous articles and books on the subject of compassion fatigue, including [Compassion Fatigue: Coping with Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized](#) (1995) and [Treating Compassion Fatigue](#) (2002).

[Child Trauma Academy](#): The Child Trauma Academy aims to educate those who work with traumatized children in order to improve the child's quality of life. Some of the information in this guide was found in a booklet written by Dr. Bruce Perry (2003) called ["The Cost of Caring: Secondary Traumatic Stress and the Impact of Working with High-Risk Children and Families."](#) This booklet is comprised of material that was previously used for an online education course about secondary traumatic stress. If you are interested in educating others about secondary traumatic stress, the lesson plan/training guide for this booklet can be found [here](#).

[Gift from Within](#): Gift from Within is an organization devoted to those who have experience trauma in their lives. On this website, you can find resources such as articles, books, and videos that can help someone who has gone through or is going through trauma. The website also has information on choosing therapists, finding appropriate support networks and coping skills, and even provides art, poetry, and music from people coping with trauma.

[Figley Institute](#): The Figley Institute was developed by Dr. Charles R. Figley, Dr. Kathleen Reagan Figley, and Dr. Michael G. Rank. The purpose of the Figley Institute is to provide resources and trainings to those who help the traumatized. By educating those who help the traumatized, the Figley Institute hopes to better serve those who have experienced trauma.

[Professional Quality of Life Scale \(ProQOL\)](#): The ProQOL is a self-test that determines your level of secondary traumatic stress (compassion fatigue). A scoring sheet is included so that you can test yourself. If your test reveals that you have a high level of compassion fatigue, then you may need to think about what at work is causing you stress. You may also want to consider some of the suggestions from page 12 of this guide.

[The Fried Social Worker](#): The fried social worker refers to those who reach burnout, which gradually occurs as of ineffectively dealing with work-related stressors and compassion fatigue. This website is an excellent resource for supervisors, directors, and managers to find ways to help their employees from burning out. Fried Social Worker also emphasizes a sense of humor and the need to boost morale in order to combat burnout.

### References

- American Psychiatric Association (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., text revision). Washington, DC: First, M. B.
- Bride, B., & Figley, C. (Eds.). (2007). Compassion fatigue [Special issue]. *Clinical Social Work Journal*, 35(5).
- Bride, B. E., Radey, M., & Figley, C. R. (2007). Measuring compassion fatigue. *Clinical Social Work Journal*, 35(5), 155-163. doi: 10.1007/s10615-007-0091-7
- Eastwood, C. D., & Ecklund, K., (2008). Compassion fatigue risk and self-care practices among residential treatment center childcare workers. *Residential Treatment For Children & Youth*, 25(2), 103-122. doi: 10.1080/08865710802309972
- Figley, C. R. (1995). Compassion fatigue as secondary traumatic stress disorder. In C. R. Figley (Ed.) *Compassion fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized* (pp. 1-20). New York, NY, Brunner/Mazel.
- Figley, C. R. (2002a). Compassion fatigue: Psychotherapists' chronic lack of self care. *Journal of Clinical Psychology*, 58(11), 1433-1441. doi: 10.1002/jclp.10090
- Figley, C. R. (2002b). Introduction. In C. R. Figley (Ed.) *Treating compassion fatigue* (pp.1-13). New York, NY, Routledge.
- Gentry, J. E., Baranowsky, A. B., & Dunning, K. (2002) ARP: The accelerated recovery program (ARP) for compassion fatigue. In C. R. Figley (Ed.) *Treating compassion fatigue* (pp.123-138). New York, NY, Routledge.

Boza, J., Panos, A., Panos, P. T., Steele, C. (Producers). (2006). *When helping hurts: Preventing and treating compassion fatigue* [DVD]. Available from <http://www.giftfromwithin.org/html/video.html>

Lennon, J., & McCartney, P., (1965). Help! [Recorded by The Beatles]. On *Help!* [Record] US: Capitol Records.

Lennon, J., & McCartney, P., (1967). With a little help from my friends [Recorded by The Beatles]. On *Sgt. Pepper's Lonely Heart Club Band* [Record] US: Capitol Records.

Perry, B. D. (2003). *The cost of caring: Secondary traumatic stress and the impact of working with high-risk children and families*. Retrieved on December 13, 2009 from [http://www.childtrauma.org/ctamaterials/SecTrma2\\_03\\_v2.pdf](http://www.childtrauma.org/ctamaterials/SecTrma2_03_v2.pdf)

Stamm, B. H. (2009). Professional quality of life: Compassion satisfaction and fatigue (Version 5) [Measurement instrument]. Retrieved from [http://www.proqol.org/uploads/ProQOL\\_5\\_English\\_Selfscore.pdf](http://www.proqol.org/uploads/ProQOL_5_English_Selfscore.pdf)

Images, or "Wordles," on cover and p. 11 of this guide attributed to Feinberg, J. (2009), [www.wordle.net](http://www.wordle.net).

Image, or "Bubble Map," on p. 12 of this guide created using *think! Bubble Map* from [Lowrie Associates Ltd.](http://www.lowrieassociates.com)