

Compassion Fatigue: Taking Care of the Caregivers

Hot Topics in Mental Health for Primary Care
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Learning Objectives

Do good/ Do no harm - Do no self harm

- Gain an understanding of compassion fatigue and other forms of work-related stress
- Appreciate the inherent risks of exposure to suffering and deepen mindfulness of yourself as a healthcare provider
- Explore how healthcare providers can sustain their sense of meaning, purpose and value in connection to their work

Disclosures

We have no disclosures to make regarding commercial interests.

We do not have any conflict of interests with regard to this presentation.

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Health care is about curing and healing; art and science, mind and heart, skills and knowledge, technology and compassion

Health care is based on a business model of efficiency, the work we do is about relationship—relationship with self, other and Other

Relationship is often sacrificed to action and efficiency

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- How do we sustain health care providers in the work place?
- What is the effect of being in the presence of suffering?
- What would be reparative, healing or restore resilience for health care providers?

Efficiency through relationship

Challenges to Well Being in Health Care

- Economic restraint & restructuring
- Rapidly developing technologies
- Increased access to information (and misinformation!)
- Increased patient complexity & an aging population
- Shortage of practitioners & multigenerational issues
- Decreasing numbers of beds
- A more critical & litigious social climate

Challenges to Well Being in Health Care

“High demand/low control is bad enough;
high demand/low control/low support can
be deadly.”

Sotile W.M. and Sotile, M.O. (2002) *The Resilient Physician*.

Unfixable Suffering

Trauma: sense of helplessness in the face of
unfixable suffering

Judith Hermann

Our Experience at CPR

Sustaining Healthcare Providers in the
workplace:

Grief / Burnout / Moral Distress /
Compassion Fatigue

and

“Lateral Stress”

Grief

Change



Loss



Grief

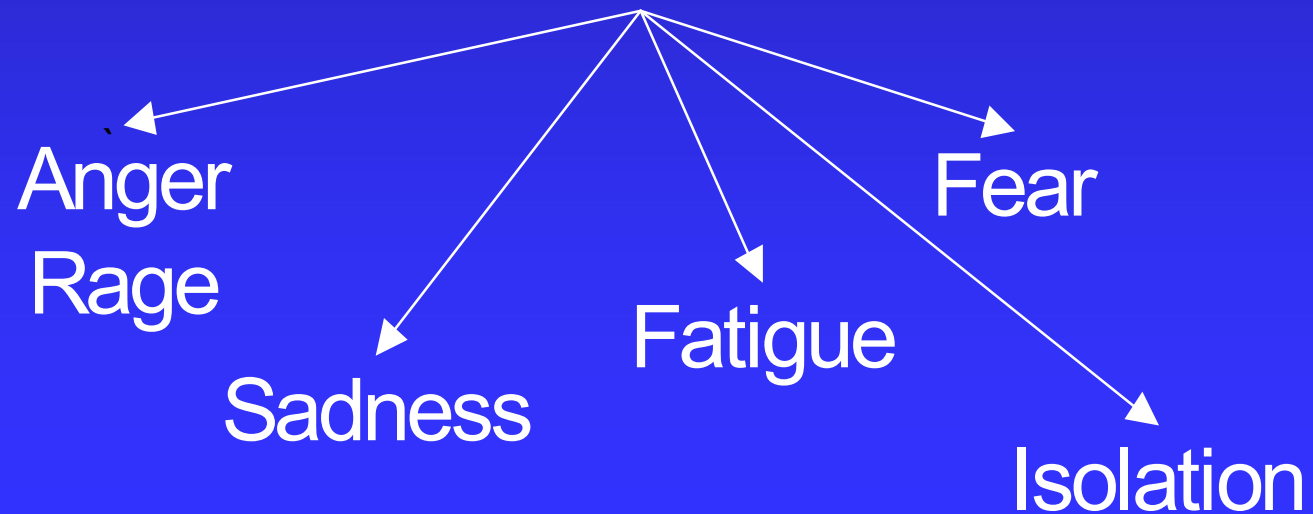
Anger
Rage

Sadness

Fatigue

Fear

Isolation



Grief

- Grief is wanting more of what one will never get again.
- Grief begets grief
 - (Unresolved grief from the past creeps into the present)
- Variable in duration – Grief does not follow a schedule

Burnout

- Emotional exhaustion
- Depersonalization
 - A negative attitude towards patients/clients
 - Personal detachment
 - Loss of ideals
- Reduced sense of personal accomplishment and commitment to the profession.

Maslach, 1993

Moral Distress

- The negative feelings resulting from a situation in which moral choices cannot be translated into moral action
- Associated with experiences of anger, frustration, guilt, and powerlessness

Jameton, 1984; Rodney and Starzomski, 1993

Secondary Traumatic Stress / Compassion Fatigue

- Three symptom clusters similar to PTSD:
 - Hyperarousal
 - Avoidance and/or numbing
 - Reexperiencing-Intrusion

Compassion Fatigue

- The natural consequent behaviours and emotions resulting from knowing about a traumatizing event experienced by a significant other – the stress resulting from helping or wanting to help a traumatized or suffering person. (Figley, 1993)

Compassion Fatigue

- “CF, consistent with most common usage, is defined as the formal caregiver’s reduced capacity or interest in being empathic, or ‘bearing the suffering of clients’” (Adams, Boscarino & Figley, 2008)

Lateral Stress:

Accumulated stress discharged between colleagues

- Smiling Rage
- Irritability, Frustration, Lack of Patience
- Intolerance of Emotion
- Silencing Response
- Scapegoating / Bullying

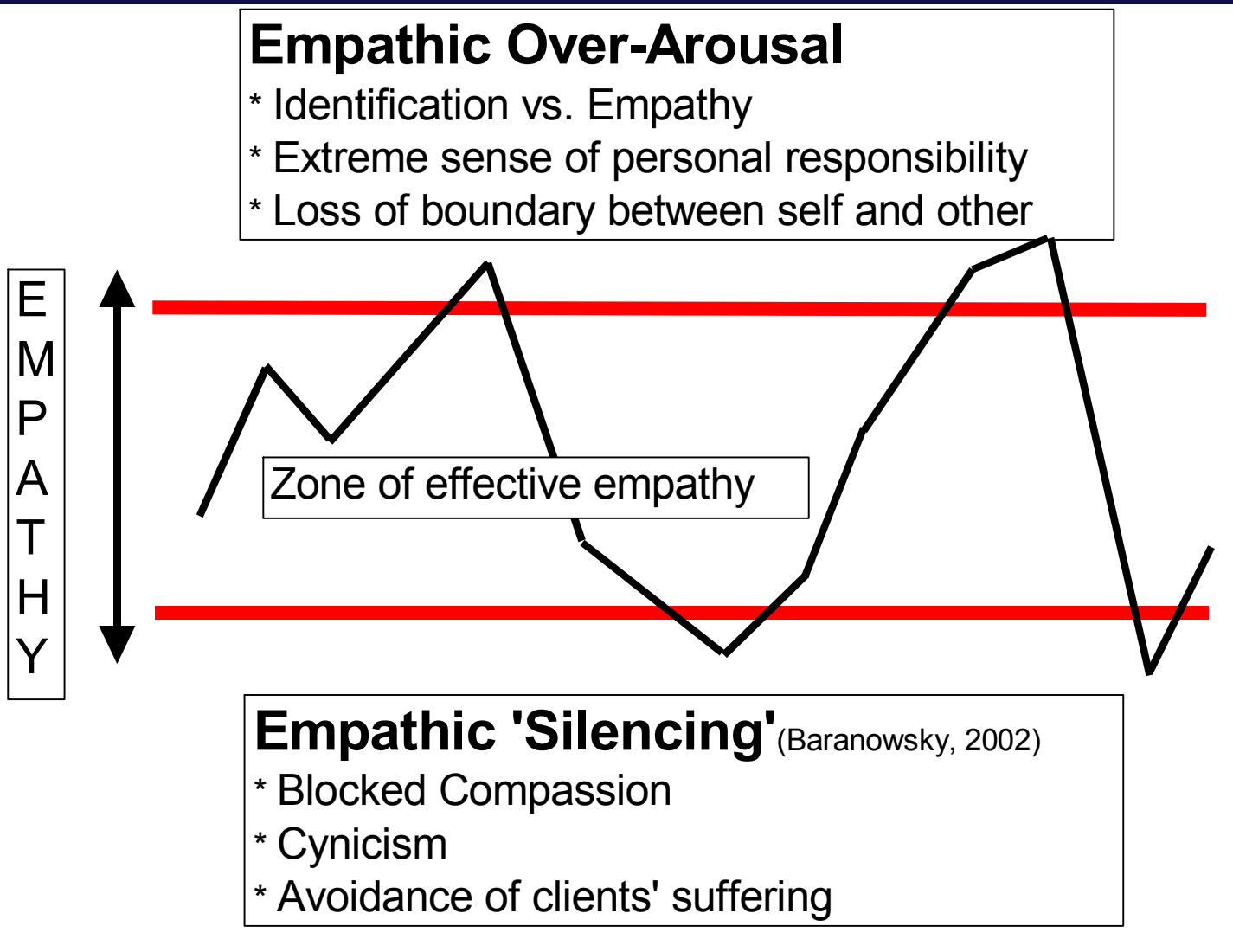
Most common signs of distress: Individuals

- Increased rates of illness
- Withdrawal - Isolation
- Cynicism - Sadness - Depression
- Exhaustion - Presenteeism
- Addictive responses
- Loss of efficiency - Judgment errors
- Impaired boundaries - Identification vs Empathy

Most common signs of distress: Team / Organization

- High Absenteeism
- Challenging team dynamics
- Outbreaks of aggressive behaviours
- Lack of empathy / flexibility
- Negativism toward management
- Reluctance toward change
- Loss of optimism

Window of Effective Empathic Engagement



Addressing Caregiver Distress: Coping

- Self care (physical needs)
- Self nurturance
(sanctuary/tranquility/play)
- Escape

Addressing Caregiver Distress: Transforming

- Self-awareness: strengths, vulnerabilities, needs
- Continuing growth – personal & professional
- Connection
 - To self (time for self-reflection)
 - To work related supports
 - Effective debriefing procedures
 - Mentorship/Supervision
 - Collegiality
 - To social supports
 - To a sense of spiritual connection

Self Knowledge and Connection

To understand ourselves we have to be understood by another. To understand another we have to understand ourselves. Watzlawick, Bevan & Jackson

Basic Human Needs

To be:

Seen

Heard

Understood

Effective Group/Team

Safety

Inclusion

Trust

Self Knowledge

Many people miss out on themselves as they journey through life. They know others, they know places, they know skills, they know their work, but tragically, they do not know themselves at all.

John O'Donohue: Anam Cara

Mindful Transition

Implications: The vital need for supportive relationships

“Adults remain social animals ... in some important ways, people cannot be stable on their own – not should or shouldn’t be, but can’t be. This prospect is disconcerting to many, especially in a society that prizes individuality as ours does. Total self-sufficiency turns out to be a daydream whose bubble is burst by the sharp edge of the limbic brain. Stability means finding people who regulate you well and staying near them.”

Lewis, Amini & Lannon. A General Theory of Love. (2000).

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