

Compassion Fatigue Definitions, Symptoms, and Causes

DEFINITIONS:

Compassion Fatigue (CF): Compassion Fatigue (Figley, 1995) is a secondary traumatic stress disorder. It is the natural consequence of stress resulting from caring for and helping traumatized or suffering people or animals. CF is the physical and emotional exhaustion that arises from the constant demand to be compassionate and effective in helping those that are suffering.

Burnout: Burnout is the physical and emotional exhaustion workers can experience due to their difficult work environment. The cumulative stress and frustration of a workplace can affect anyone in any profession. Burnout stems from interactions with the work environment (low pay, bad hours, etc.).

Primary Traumatic Stress: Direct exposure to extreme or traumatic events. You are in harm's way. The stressful or dangerous event is happening to you. Grief is a primary trauma.

Secondary Traumatic Stress (STS): Secondary Traumatic Stress is bearing witness to extremely or traumatically stressful events. You are not in actual danger or experiencing it first-hand.

Post-Traumatic Stress Disorder (PTSD): PTSD is an anxiety disorder that can develop after exposure to a traumatic event (or series of events). Both primary and STS can lead to PTSD.

Vicarious Trauma: A profound shift that workers experience in their world view. A cumulative negative effect of STS.

Compassion Satisfaction: The pleasure we get from doing our jobs well.

Empathy: The ability to sense other people's emotions, coupled with the ability to imagine what someone else might be thinking or feeling.

Compassion: The feeling that arises when you are confronted with another's suffering and feel motivated to take action to relieve that suffering. While empathy refers more generally to our ability to take the perspective of and feel the emotions of another person, compassion is when those feelings and thoughts include the desire to help.

Definitions of these terms vary from source to source. Each person will experience compassion fatigue differently and, depending on the nature of their duties, may be exposed to different sources of stress and/or trauma. Compassion fatigue can be a combination or convergence of primary traumatic stress, secondary traumatic stress, cumulative stress, and/or burnout.

SYMPTOMS: *(adapted from CompassionFatigue.org)*

Compassion Fatigue symptoms are normal displays of stress resulting from the caregiving work you perform on a regular basis. Individual symptoms will vary, but normal symptoms present in an individual may include:

- Excessive blaming
- Bottled up emotions
- Isolation from others
- Anger and irritability
- Sadness, Apathy (no longer finds activities pleasurable)
- Increased use of or addiction to food, drugs, alcohol, shopping, etc.
- Reduced ability to feel empathy and sympathy
- Poor self-care (i.e., hygiene, appearance)
- Problems in personal relationships
- Reoccurrence of nightmares and flashbacks to traumatic event
- Chronic physical ailments such as gastrointestinal problems and recurrent colds
- Cynicism and embitterment
- Difficulty concentrating, forgetfulness
- The silencing response
- Mentally and physically tired
- Guilt
- Inability to separate work and personal lives
- Hyper vigilance
- Intrusive imagery

When Compassion Fatigue hits critical mass in the workplace, the organization itself suffers.

Organizational symptoms of Compassion Fatigue include:

- High absenteeism
- Constant changes in co-workers relationships
- Inability for teams to work well together
- Desire among staff members to break company rules
- Outbreaks of aggressive behaviors among staff

- Inability of staff to complete assignments and tasks
- Inability of staff to respect and meet deadlines
- Lack of flexibility among staff members
- Negativism towards management
- Strong reluctance toward change
- Inability of staff to believe improvement is possible
- Lack of a vision for the future

CONTRIBUTING FACTORS:

Compassion Fatigue can ebb and flow throughout your career. There will be times when we are barely impacted by it at all and other times when we are entirely depleted by it. The main factors that contribute to CF are:

1. Occupational Hazard: The nature of working as a helper means that exposure to suffering is inevitable. It is normal and predictable that we would be affected by our work. The stress that results from our jobs can result in us experiencing CF, which is sometimes referred to as “the cost of caring.” We may also find that a high case load or an unusually high volume of traumatized clients (caring for animals during a natural disaster or cruelty investigation, etc.) may contribute to CF.

2. Individual Factors: Your current life circumstances, your past history, how you cope with stress, how you view the world, and your personality will also contribute to how CF will impact you as individual.

Here are some examples:

- Placing the needs of others before our own needs (“other-directedness”)
- Unresolved trauma /pain from the past
- Lack of healthy coping skills
- Overdeveloped sense of responsibility and perfectionism
- Lack of personal boundaries
- Inability to communicate needs
- Lack of time or financial management skills
- Lack of social support

3. Cultural Factors: Stressors that are specific to animal welfare include: euthanasia, a public that may not understand or value your services, insufficient training or support, high volume of clients and little control over workload, a cultural belief that self-care is optional or indulgent, and more.