What is Compassion Fatigue?

There is a cost to caring.

Professionals who listen to the stories of fear, pain and suffering of others may feel similar fear, pain and suffering because they care. Professionals especially vulnerable to Compassion Fatigue (CF) include emergency care workers, counsellors, mental health professionals, medical professionals, clergy, advocate volunteers, and human service workers. If you ever feel as though you are losing your sense of self to the clients you serve, you may be suffering from CF.

The concept of Compassion Fatigue emerged only in the last several years in the professional literature. It represents the cost of caring about and for traumatised people. Compassion Fatigue is the emotional residue of exposure to working with the suffering, particularly those suffering from the consequences of traumatic events. Professionals who work with people, particularly people who are suffering, must contend with not only the normal stress or dissatisfaction of work, but also with the emotional and personal feelings for the suffering.

Compassion Fatigue is NOT "burnout". Burnout is associated with stress and hassles involved in your work; it is very cumulative, is relatively predictable and frequently a vacation or change of job helps a great deal. Compassion Fatigue is very different. Compassion Fatigue is a state of tension and preoccupation with the individual or cumulative trauma of clients as manifested in one or more ways including reexperiencing the traumatic event, avoidance/numbing of reminders of the event, and persistent arousal. Although similar to critical incident stress (being traumatised by something you actually experience or see), with CF you are absorbing the trauma through the eyes and ears of your clients. It can be thought of as secondary post-traumatic stress.

There are human costs associated with CF. Job performance goes down, mistakes go up. Morale drops and personal relationships are affected, people's home lives start to deteriorate, personality deteriorates and eventually it can lead to overall decline in general health.

Compassion Fatigue/Satisfaction Self-Test (CFS)

Stamm, B.H. (in press). Measuring Compassion Satisfaction as well as Fatigue: Development History of the Compassion Fatigue and Satisfaction Test. In C.R. Figley (Ed.). Treating Compassion Fatigue. New York: Brunner/Mazel. O.B. Hudnall Stamm, Traumatic Stress Research Group, 1995-1999.

Compassion Fatigue and Satisfaction Self-Test for Helpers

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Helping others puts you in direct contact with other people's lives. As you probably have experienced, your compassion for those you help has both positive and negative aspects. This self-test helps you estimate your compassion status: How much at risk you are of burnout and compassion fatigue and also the degree of satisfaction with your helping others. Consider each of the following characteristics about you and your current situation. Print a copy of this test so that you can fill out the numbers and keep them for your use. Using a pen or pencil, write in the number that honestly reflects how frequently you experienced these characteristics in the last week. Then follow the scoring directions at the end of the self-test.

0=Never	1=Rarely	2=A Few Times	3=Somewhat	4=Often	5=Very Often
			Often		

Items About You

_____1. I am happy.

- _____2. I find my life satisfying.
- _____3. I have beliefs that sustain me.
- _____4. I feel estranged from others.
- _____5. I find that I learn new things from those I care for.
- _____6. I force myself avoiding certain activities or situations because they remind me of a frightening experience.
- _____7. I find myself to avoid certain thoughts or feelings that remind me of a frightening experience.
- _____8.*I have gaps in my memory about frightening events.*
- _____9. I feel connected to others.
- _____10. I feel calm.
- _____11. I believe that I have a good balance between my work and my free time.

- _____12. I have difficulty falling or staying asleep.
- _____13. I have outburst of anger or irritability with little provocation.
- _____14. I am the person I always wanted to be.
- _____15. I startle easily.
 - ____16. While working with a victim, I thought about violence against the perpetrator.
- _____17. I am a sensitive person.
- _____18. I have flashbacks connected to those I help.
- _____19. I have good peer support when I need to work through a highly stressful experience.
- _____20. I have had first hand experience with traumatic events in my adult life.
- _____21. I have had first hand experience with traumatic events in my childhood.
- 22.I think that I need to "work through" a traumatic experience in my life.
- _____23. I think that I need more close friends.
- _____24. I think that there is no one to talk with about highly stressful experiences.
- _____25. I have concluded that I work too hard for my own good.
- _____26. Working with those I help brings me a great deal of satisfaction.
- _____27. I feel invigorated after working with those I help.
- _____28. I am frightened of things a person I helped has said or done to me.
- _____29. I experience troubling dreams similar to those I help.
- _____30. I have happy thoughts about those I help and how I could help them.
- _____31. I have experienced intrusive thoughts of times with especially difficult people I helped.
- _____32. I have suddenly and involuntarily recalled a frightening experience while working with a person I helped.
- _____33. I am pre-occupied with more that one person I help.
- *34. I am losing sleep over a person I help's traumatic experiences.*

- _____35. I have joyful feelings about how I can help the victims I work with.
- ____36. I think that I might have been "infected" by the traumatic stress of those I help.
- _____37. I think that I might be positively "inoculated" by the traumatic stress of those I help.
- _____38. I remind myself to be less concerned about the well being of those I help.
- _____39. I have felt trapped by my work as a helper.
- _____40.1 have a sense of hopelessness associated with working with those I help.
- 41. I have felt "on edge" about various things and I attribute this to working with certain people I help.
- _____42. I wish that I could avoid working with some people I help.
- _____43. Some people I help are particularly enjoyable to work with.
- _____44. I have been in danger working with people I help.
- _____45. I feel that some people I help dislike me personally.
- Items About Being a Helper and Your Helping Environment
- _____46. I like my work as a helper.
- _____47. I feel like I have the tools and resources that I need to do my work as a helper.
- _____48. I have felt weak, tired, run down as a result of my work as a helper.
- _____49. I have felt depressed as a result of my work as a helper.
- 50. I have thoughts that I am a "success" as a helper.
- ____51. I am unsuccessful at separating helping from personal life.
- ____52. I enjoy my co-workers.
- ____53. I depend on my co-workers to help me when I need it.
- ____54. *My co-workers can depend on me for help when they need it.*
- ____55. I trust my co-workers.
- ____56. I feel little compassion toward most of my co-workers.

- ____57.I am pleased with how I am able to keep up with helping technology.
- _____58. I feel I am working more for the money/prestige than for personal fulfillment.
 - ____59. Although I have to do paperwork that I don't like, I still have time to work with those I help.
- _____60. I find it difficult separating my personal life from my helper life.
- ____61. I am pleased with how I am able to keep up with helping techniques and protocols.
- _____62. I have a sense of worthlessness/disillusionment/resentment associated with my role as a helper.
- 63. I have thoughts that I am a "failure" as a helper.
- _____64. I have thoughts that I am not succeeding at achieving my life goals.
- _____65. I have to deal with bureaucratic, unimportant tasks in my work as a helper.

____66. I plan to be a helper for a long time.

Scoring Instructions

Please note that research is ongoing on this scale and the following scores should be used as a guide, not confirmatory information. Cut points are theoretically derived and should be used with caution and only for educational purposes.

- 1. Be certain you respond to all items.
- 2. Mark items for scoring:
- *a. Circle the following 23 items: 4,6-8, 12, 13, 15, 16, 18, 20-22, 28, 29, 31-34, 36, 38-40, 44.*
- *b. Put a check by the following 16 items: 17, 23-25, 41, 42, 45, 48, 49, 51, 56, 58, 60, 62-65.*
- *c. Put an x by the following 26 items: 1-3, 5, 9-11, 14, 19, 26-27, 30, 35, 37, 43, 46-47, 50, 52-55, 57, 59, 61, 66.*
- 3. Add the numbers you wrote next to the items for each set of items and note:
- a. Your potential for Compassion Satisfaction (x) 118 and above=extremely high potential; 100-117=high potential;82-99=good potential; 64-81=modest potential; below 63=low potential.
- b. Your risk for Burnout (check): 36 or less=extremely low risk; 37-50=moderate risk; 51-75 high risk; 76-85=extremely high risk.
- c. Your risk for Compassion Fatigue (circle): 26 or less = extremely low risk, 27-30 = low risk, 31-35=moderate risk; 36-40 = high risk, 41 or more = extremely high risk.

Adapted with permission from Figley, C.R. (1995). Compassion Fatigue, New York: Brunner/Mazel. O B. Hudnall Stamm, Traumatic Stress Research Group, 1995-1999 <u>http://www.isu.edu/-bhstamm/rural-care.htm</u>

Professional Resource Information

NOTE: URLs are given beside references rather than linked to the document name so that they can be read from print copy. While online, if you would like to link to a particular resource, click on the URL.

The Compassion Fatigue Scale has been established, presented, and published in several articles/chapters including, among others, the following:

Figley, C.R. (1999). Compassion Fatigue. In B.H. Stamm, (Ed.) Secondary traumatic stress: Self-care issues for clinicians, researchers and educators, 2nd Ed. Lutherville, MD: Sidran Press.

<u>http://www.sidran,org/digicart/products/stss.html</u>. (note, this chapter contains a copy of the updated Compassion Fatigue & Satisfaction Scale that appears above)

Figley, C.R. (1995). Compassion Fatigue: Coping with Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized. New York: Brunner Mazel. <u>http://www.opengroup.com/open/dfbooks087/0876307594.shtml</u>.

Figley, C.R. (1995). Compassion Fatigue. In B.H.Stamm, (Ed) Secondary traumatic stress: Self-care issues for clinicians, researchers and educators. Lutheville, MD: Sidran Press.

<u>http://www.sidran.org/digicart/products/stss.html.</u> (note, this chapter contains a copy of the earlier version of the Compassion Fatigue scale).

Stamm, B.H. (in press). Measuring Compassion Satisfaction as Well as Fatigue: Developmental History of the Compassion Fatigue and Satisfaction Test In C.R. Figley (Ed.) Treating Compassion Fatigue New York: Brunner/Mazel. (NOTE: this paper is not yet available).

Stamm, B.H. (April 1997). Mental Health Research in Telehealth. Invited address at From Research to Practice: A Conference on Rural Mental Health Research, National Institute of Mental Health. Oxford MS.

Rudolph, J.M. Stamm, B.H. & Stamm, H.E. (November, 1997). Compassion Fatigue: A Concern for Mental Health Policy, Providers and Administration. Poster presented at the 13th Annual Conference of the International Society for Traumatic Stress Studies, Montreal, ON, CA. http://www.isu.edu/~bhstammISTSS97ef.PDF There is a psychometric review in:

Figley, C.R. & Stamm, B.H. (1996). Psychometric Review of Compassion Fatigue Self Test. In B.H. Stamm (Ed), Measurement of Stress, Trauma and Adaptation. Lutherville, MD: Sidran Press <u>http://www.sidran,org/digicart/products/stms.html.</u>

For general information on Secondary Traumatic Stress/Vicarious Traumatization/Compassion Fatigue:

http://mailer.fsu.edu/~cfigley/satfat.htm