

Nurses and Compassion Fatigue

- Preventing Compassion Fatigue: Power Point Presentation
- Professional Quality of Life Manual (ProQOL)
- Understanding and Preventing Compassion Fatigue A Handout - For Professionals
- Supporting Our Soldiers PTSD Info For Chaplains
- The Art and Science of Caring for Others without Forgetting Self-Care
- <u>Compassion Fatigue: An Introduction</u>
- The MASTERS Process: Transforming Your Career and Life
- Compassion Fatigue: A Crucible Of Transformation
- When Helping Hurts
- Vicarious Trauma in Attorneys
- Bosnia's Death Highway: My Personal Story of Trauma Work, Compassion Fatigue and Hope.

Culture, Race and Ethnicity:

- Domestic Violence and the Gay Community: A Right to Peace and Safety
- I Was Raped: A Survivor explores an accusation that has divided the Spelman and Morehouse family
- Treating People of Varied Cultures: Honoring the Individual in Context
- Surviving and Thriving: Understanding Asian Americans' Experiences of Relationship Trauma
- Latinas in Pursuit of Healing: Cultural Implications for Counseling Sexually Abused Latinas
- I Will Survive: The African-American Guide to Healing from Sexual Assault and Abuse (excerpt)
- Trauma in American Indian Communities
- Challenges and Obstacles in Treating Mentally III African American Patients

Domestic Violence & Sexual Assault:

- <u>Military Sexual Trauma</u>
- Legal Tools for Survivors of Sexual Assault
- Art Exhibit: A Woman's Journey from Domestic Violence Victim to Survivor
- <u>Acquaintance Rape: A Matter of Consent</u>
- I Will Survive: The African-American Guide to Healing from Sexual Assault and Abuse (excerpt)
- Rape Trauma Syndrome: The Journey to Healing Belongs to Everyone
- Peaceful Heart: A Woman's Journey of Healing After Rape
- Dealing with Domestic Abuse: Lessons from Kathy
- <u>The Ties That Bind Captive to Captor- Stockholm Syndrome</u>
- Understanding the Victims of Spousal Abuse

Grief:

- Will Trauma Grief Counseling Help?
- Exorcising Ghosts: The Counting Method and Traumatic Death
 Imagery
- Help for the Holidays: Ideas for the Bereaved

traumatization" or "secondary traumatization"(Figley, 1995).

Who is at risk?

While our training, professionalism, and good boundaries within our helping roles are protective, really anyone with the capacity for true compassion, empathy, concern and caring is vulnerable to compassion fatigue. In other words, the greatest strength that you have to bring to your occupation- your capacity to develop a compassionate connection with your clients-is also your greatest vulnerability. Therefore, it is not a characteristic that you would choose to give up, rather it is more logical to educate yourself so you understand compassion fatigue and know what you can do if you begin experiencing symptoms. Realize that the more prolonged exposure to traumatic events you experience (working too long of hours), the more personal life demands you have, and the more isolated you become from others collectively increase your vulnerability for compassion fatigue.

Warning signs and symptoms

The symptoms of <u>compassion fatigue</u> are similar to those of Posttraumatic Stress Disorder, only instead of the symptoms being based upon a trauma that you directly experienced, they are due to the trauma that your client(s) have experienced. Additionally, there is a cynical, discouraged or hopeless attitude about your work or your career that begins to set in. Paradoxically, you may find it difficult to leave your work at the end of the day. You may have thoughts that preoccupy you about a particular case. Being aware of what these symptoms mean and how they are affecting you is important. You can evaluate yourself with an excellent self-assessment tool that can be found at: http://www.proqol.org/ProQOL_Test_Manuals.html. While this checklist is more comprehensive a few of the predominant symptoms of compassion fatigue are listed below:

- Feeling estranged from others (Having difficulty sharing or describing feelings with others)
- Difficulty falling or staying asleep.
- Outbursts of anger or irritability with little provocation.
- Startling easily
- While working with a victim thinking about violence or retribution against the person or persons who victimized.
- Flashbacks connected to my clients and families.
- Needing more close friends.-feeling there is no one to talk with about highly stressful experiences.
- Working too hard for your own good.
- Frightened of things traumatized people and their family have said or done to me.
- Experience troubling dreams similar to a client of mine and their family.
- Experienced intrusive thoughts of sessions with especially difficult clients and their families.
- Suddenly and involuntarily recalled a frightening experience while working with a client or their family.
- Preoccupied with a client or their family.
- Losing sleep over a client and their family's traumatic experiences.
- Felt trapped by my work as a helper.
- Felt a sense of hopelessness associated with working with clients and their families.
- Have felt weak, tired, rundown as a result of my work as a helper.
- Have felt depressed as a result of my work as a helper.
- Am unsuccessful at separating work from personal life.
- Feel little compassion toward most of my co-workers
- Thoughts that I am not succeeding at achieving my life goals.
- Feel I am working more for the money than for personal fulfillment.
- Find it difficult separating my personal life from my work life.

- Understanding Different Grieving Patterns in Your Family
- <u>Sudden Loss</u> Impact of a grief-crisis intervention immediately after a sudden violent death on the survivor's ability to cope.
- <u>Recovery From Unnatural Death</u>
- Psychotherapy of Bereavement After Homicide: Be Offensive

Journalists, Survivors and the Media:

- The Emotional Impact of Reporting War at Home
- <u>A Primer on Covering Victims</u>
- PTSD 101 for Journalists
- Three Acts of Trauma News
- Survivors and the Media

Male Sexual Abuse & Domestic Violence:

- Domestic Violence Against Men: Bryan's Story
- Suffering in Silence: The Problem of Male Sexual Abuse
- Wounded Boys/Heroic Men: A Man's Guide to Recovering from Child Abuse

Partners & Families:

- PTSD and Family Members: The Hidden Face of PTSD
- Partners with PTSD

PTSD Treatment & Recovery:

- Understanding Complex Trauma, Complex Reactions, and <u>Treatment Approaches</u>
- Major Depressive Disorder: A Condition That Frequently Co-Occurs with PTSD
- Exposure To A Traumatic Event Does Not Automatically Put A Person On A Path To Develop PTSD: The Importance of Protective Factors To Promote Resiliency
- <u>Applying the Brakes Traumatic Memories</u>
- Finding a Good Lawyer for Your Traumatized Client
- Posttraumatic Therapy
- The Counting Method for Ameliorating Traumatic Memories
- Stress Responses in Sexual Trauma Victims and in Others
 Experiencing Overwhelming Events Helpful Strategies for Self,
 Children, Supporters, and What Trauma Therapists Really Do
- <u>The Counting Method as Exposure Therapy: Revisions and</u>
 <u>Case Examples</u>
- Trauma & Recovery: an REBT Perspective
- Listening to the Lessons of Survivors. Sharing their Truths and their Lessons

PTSD & Health:

- Life After Breast Cancer: Surviving & Thriving
- How to Improve Strength and Mobility without Really Exercising
- Exercise and Aging
- Fibromyalgia: What It Is And How To Manage It
- How Exercise Helps Symptoms Of PTSD
- Menopause Is A Natural Part Of A Woman's Lifecycle

• A sense of worthlessness/disillusionment/resentment associated with my work.

Prevention, Resiliency and Treatment

Early recognition and awareness is crucial in being able to be resilient to <u>compassion fatigue</u>. Compassion fatigue is treatable! Keeping your life in balance or getting it back in balance, by taking some time off work, or enhancing your self-care are critical techniques. Keeping your body and your health in good shape is essential. You are not going to be resilient if you are not well rested. You may need medical attention if the symptoms of compassion fatigue, such as sleep disturbance, start interfering with your ability to function. If you are eating poorly and not exercising you are more vulnerable physically and emotionally to the effects of distress. Therefore, keeping a healthy balance in your life is a requirement to prevent and treat compassion fatigue. Caregivers that have a structured schedule that allow them time to organize and do good self-care are more resilient (Panos, 2007).

Another essential factor to prevent and treat compassion fatigue is to have some good relationships with either colleagues, a supervisor, or a therapist that you can safely and confidentially discuss the distresses you are experiencing. Isolation is a symptom of compassion fatigue and is ultimately dangerous. To be resilient you need to have good support and connections with others.

Many counselors report that creative therapies such as writing in a journal, or expressing their feelings through music or art are helpful. Diversions and recreation that allow you to take miniescapes from the intensity of your work is absolutely essential- not optional as some may think. Research on resiliency in pediatric healthcare workers show that those that have the ability to "turn their thoughts about work off" are more resilient throughout their career. Sometimes this involves developing a little ritual at the end of the day to transition into your life outside of work, while leaving your cares and stresses in the workplace (Panos, 2007).

What to do if you have symptoms of Compassion Fatigue:

- Have a recognition and awareness of the symptoms of compassion fatigue in yourself.
- Restore a healthy balance in your life, including good sleep, good nutrition and exercise.
- Get medical treatment for those symptoms that are interfering with your daily functioning.
- Utilize your positive supportive connections with others to process your feelings.
- Implement regular mini-escapes in your life, like recreation, creative therapies or other healthy diversions from the intensity of your work.
- Don't medicate yourself with drugs or alcohol! Don't use other self-defeating addictions! Get professional help for yourself if needed to get back on track.

Conclusion

Unrecognized and untreated compassion fatigue causes people to leave their profession, fall into the throws of addictions or in extreme cases become self-destructive or suicide. It is important that we all understand this phenomenon for our own well-being, but also for our colleagues. If you notice a colleague in distress- reach out to them. Give them this article and let them know you care and are available to talk if they need.

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Websites with information or resources on Compassion Fatigue

Gift From Within-PTSD Resources- www.giftfromwithin.org

PTSD & Workplace Issues:

 Post Traumatic Stress Disorder and the Workplace What Employers and Coworkers Need to Know

Recovery & Self Help:

- Healing the Invisible Wound
- Trauma Survivors Share Tips for Therapists Dealing with Trauma
- Open Letter to Trauma Survivors
- How to Choose a Trauma Therapist: Therapy for Post-Traumatic Stress (PTSD) and Dissociative Conditions
- Helping A Person Who Is Suicidal
- S.V.'s Story: My Survival From Complex Post-Traumatic Stress
 Disorder
- Survivors, How To Write Your Personal History
- Finding The Right Therapist For You
- Anniversary Reactions: A Survivor's Guide on How to Cope
- Healing from Shame Associated with Traumatic Events
- Ninth Grader Interviews Frank Ochberg on PTSD
- How to Cope with PTSD and the Holiday Season

Resiliency:

- <u>Cultivating Resiliency in Youth</u>
- <u>Cultivating Resiliency</u>
- The Resilient Child

School Disasters:

- Helping Traumatized Children at School
- Inner City Children of Trauma: Urban Violence Traumatic Stress Response Syndrome (U-VTS) and Therapists' Responses
- School Disaster: Planning and Initial Interventions
- Bound By A Trauma Called Columbine

Spirituality & Trauma:

- Posttraumatic Stress, Mental Health Professionals, and the Clergy: A Need for Collaboration, Training, and Research
- How to Provide Spiritually Sensitive Trauma Care
- "Trauma and Spirituality"

Survivor Guilt:

Guilt Following Traumatic Events

Trauma Responses in the Aftermath of Disasters:

- Utilizing First Person Story with Trauma Survivors in Bosnia and Sri Lanka: Metaphors create a symbolic congruence that is 'inclusive' and universal across cultures
- GEW Founder, Frank Ochberg spent a week in Sri Lanka Helping
- Hurricane Opens Trauma Wounds
- <u>9-11 ANNIVERSARY REACTIONS: An interview with Frank</u>

DVD When Helping Hurts: Preventing & Treating Compassion Fatiguehttp://www.giftfromwithin.org/html/video4.html#4b

http://www.proqol.org/ProQOl_Test_Manuals.html.

Green Cross Foundation. www.greencross.org

References and Suggested Reading:

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Ochberg, M.D.

- Victims of Disasters: Helping People Recover From Acute Distress to Healing and Integration
- <u>Terrorism: September 11, 2001. "Trauma, Grief, and</u> <u>Recovery"</u>

Veterans & Their Families:

- Einding Hope after Head Injury and Posttraumatic Stress
 Disorder
- <u>Military and Substance Abuse</u>
- Military Sexual Trauma
- Suicide and the Military
- <u>Military PTSD Family Resources</u>
- Will Trauma Grief Counseling Help?
- Preventing Compassion Fatigue: What Veteran
 Spouse/Partner Caregivers Need to Know
- <u>Keeping Your Relationship Healthy When Your Veteran</u> <u>Spouse/Partner Is Injured</u>
- Issues and Answers on the Home Front
- Veterans and Post-Traumatic Stress Disorder: A Conversation with Dr Frank Ochberg
- Post Traumatic Stress and the Military
- <u>There's Nothing Wrong With Me!</u>

Preventing Compassion Fatigue: Power Point Presentation by Dr. Angie Panos

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