



True Colours

Children's Health Trust

Te Oranga O Nga Tamariki



**Compassion is the antidote:
Identifying and addressing causes of health
professionals' distress and fatigue**

**Stephen Parkinson
Psychotherapist**



PPC Ed Forum

“We are all a family” Experiences of staff working in children’s blood and cancer centres in New Zealand Gemma Aburn (May 2021)

Resiliency and team connections

“I need a friend”: the long journey. Karyn Bycroft (June 2021)

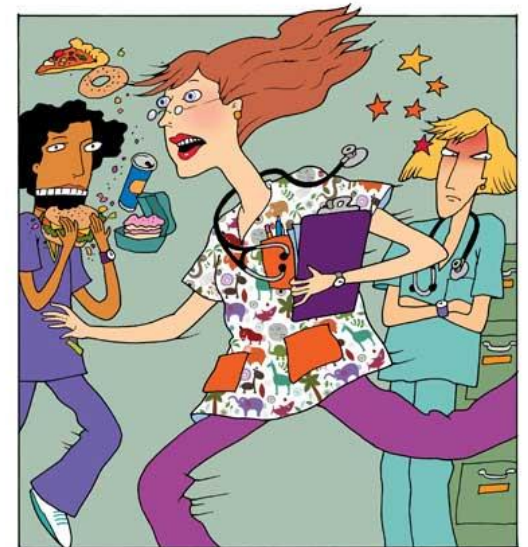
Compassionate practice and Companionship

Part 1 – Health professionals' distress and fatigue



3 out of 5 NZ nurses fit the criteria for burn-out
TV 1 (13/07/2021)

Compassion fatigue is an expected
and common response in PPC
Rourke (2007)



Health system

- Under staffed
- Under resourced
- Poorly paid



Nurses may leave the profession because they experience poor job satisfaction, and feelings of spiritual emptiness which resulted from compassion fatigue

Harris & Griffin, (2015)



Counsellors who are burned out have less energy to manage compassion stress and are consequently more vulnerable to secondary traumatic stress

Temitope & Williams (2015)



Caring Fatigue/Distress

Burnout

Compassion Fatigue

Secondary Traumatic Stress

Empathy Fatigue

Emotional Fatigue

Spiritual Fatigue

Moral Distress



We need to recognise the cause of the fatigue/stress in order to effectively address it



Burn-out

A syndrome resulting from chronic work stress that has not been successfully managed

WHO (2019)



Compassion fatigue

Emotional and physical exhaustion leading to a diminished ability to empathize or feel compassion for others, often described as the negative cost of caring

Figley (2002)

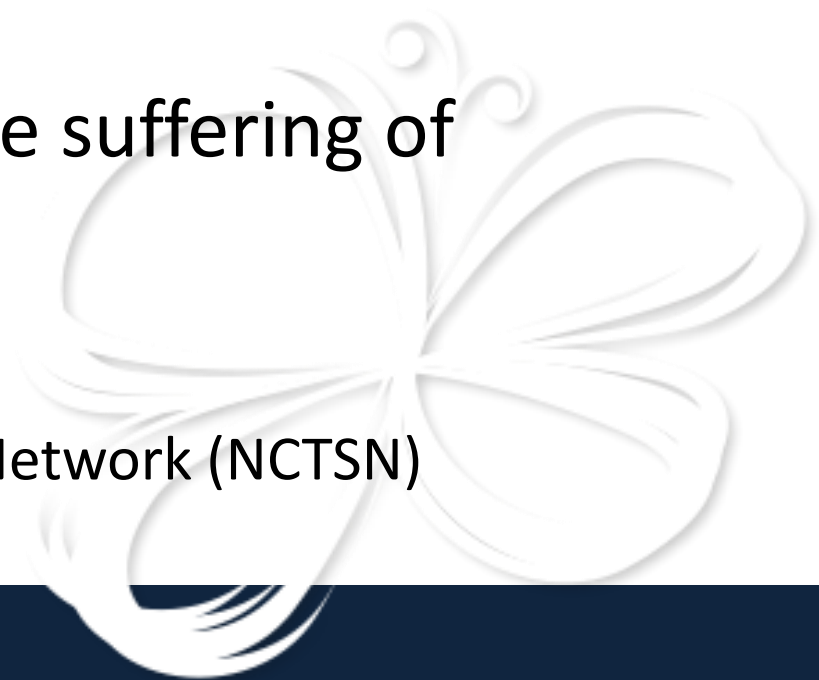


Secondary Traumatic Stress

The emotional duress that results when an individual hears about the first-hand trauma experiences of another

(Witnesses or is aware of the suffering of another)

The National Child Traumatic Stress Network (NCTSN)



Empathy Fatigue

Empathy fatigue is the emotional and physical exhaustion that happens from caring for people day, after day, after day

Albers (2020)



Moral Distress

Moral distress arises when one knows the right thing to do, but institutional constraints make it nearly impossible to pursue the right course of action

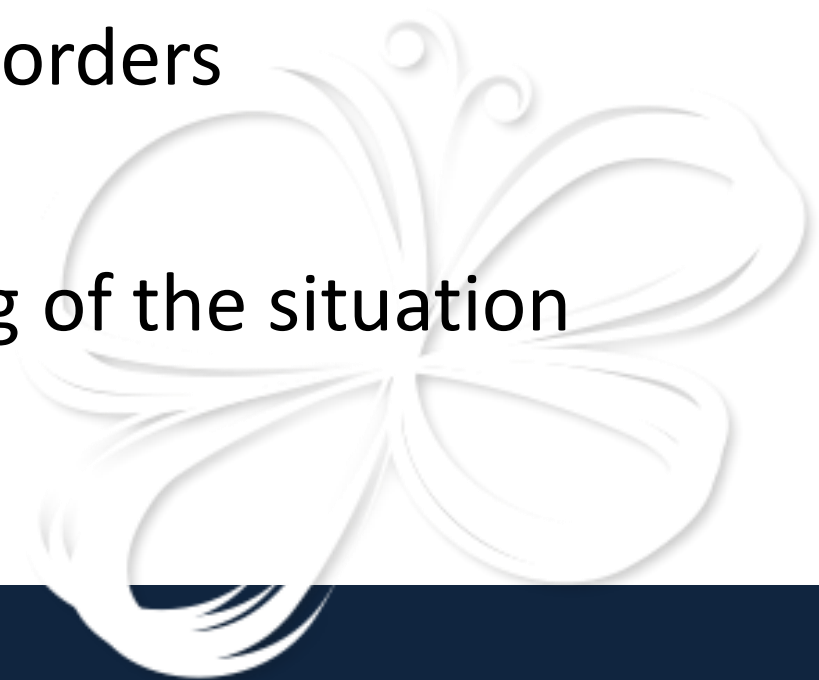
A. Jameton (1984)



Moral Distress:

Internal constraints

- Lack of assertiveness
- Self-doubt
- Being socialized to follow orders
- Perceived powerlessness
- Incomplete understanding of the situation



Moral Distress: Clinical Causes

- Continuing life support when not in the patient's best interest
- Initiating lifesaving actions that merely prolong dying
- Inappropriate use of resources
- Inadequate staffing or inadequately trained staff
- Inadequate communication about end-of-life care
- Following family's wishes out of fear of litigation
- Providing inadequate pain relief
- Providing false hope to patients and families

Common Symptoms

Cognitive

Lowered Concentration
Apathy
Rigid thinking
Perfectionism
Preoccupation with trauma

Emotional

Guilt
Anger
Numbness
Sadness
Helplessness

Behavioral

Withdrawal
Sleep disturbance
Appetite change
Hyper-vigilance
Elevated startle response

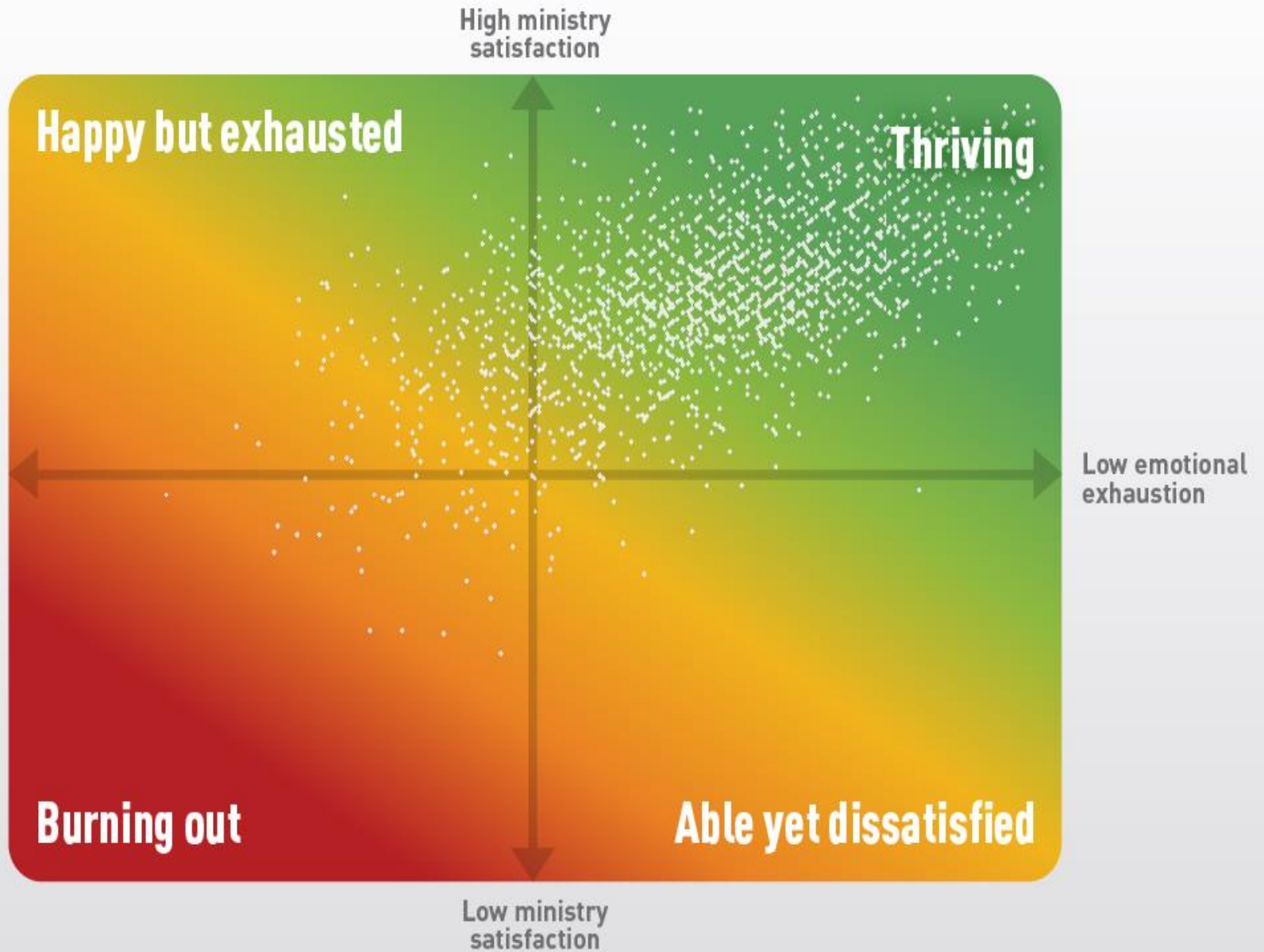
Physical

Increased heart rate
Difficulty breathing
Muscle and joint pain
Impaired immune system
Increased severity of medical concerns

Fatigue - Satisfaction

The experience of compassion fatigue is an expected and common response to the professional task of routinely caring for children at the end of life ... any consideration of the toll ... must be balanced with a consideration of the parallel experience of compassion satisfaction

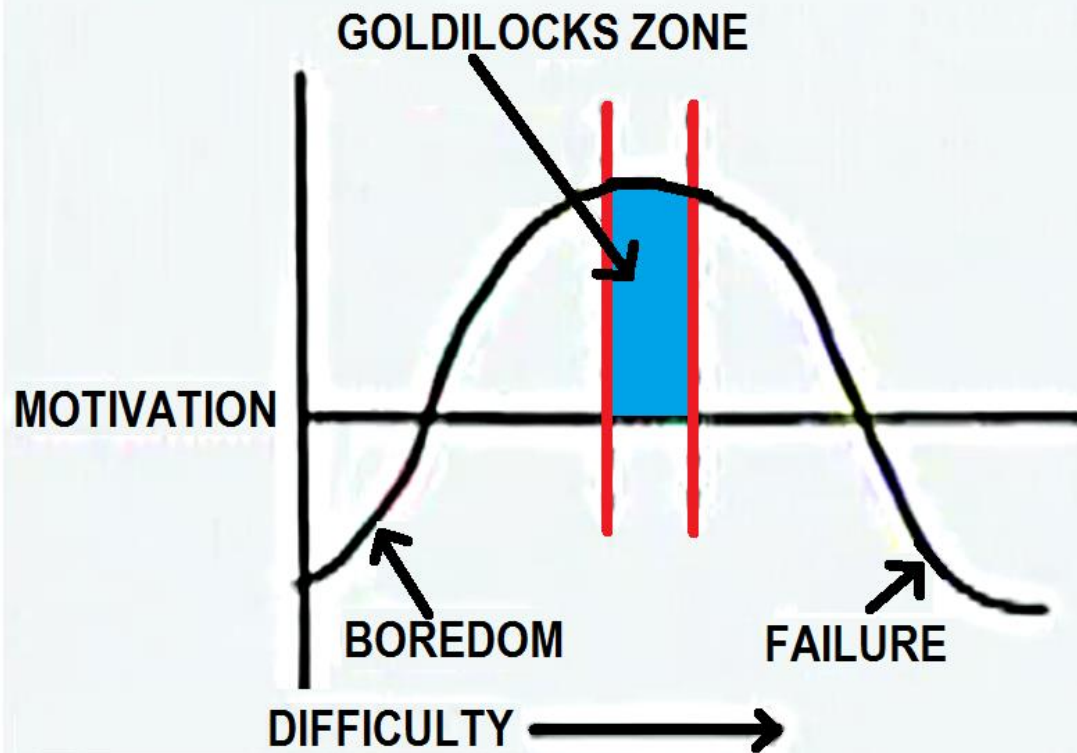
Rourke (2007) *Compassion Fatigue in Pediatric Palliative Care Providers*



Vygotsky



GOLDBLOCKS PRINCIPLE



Self reflection time

- How do I hold the dissonance between my ideal and reality of work life?
- How is my resiliency, my coping skills?
- Is my training/experience appropriate?
- How healthy is the organisation/management?



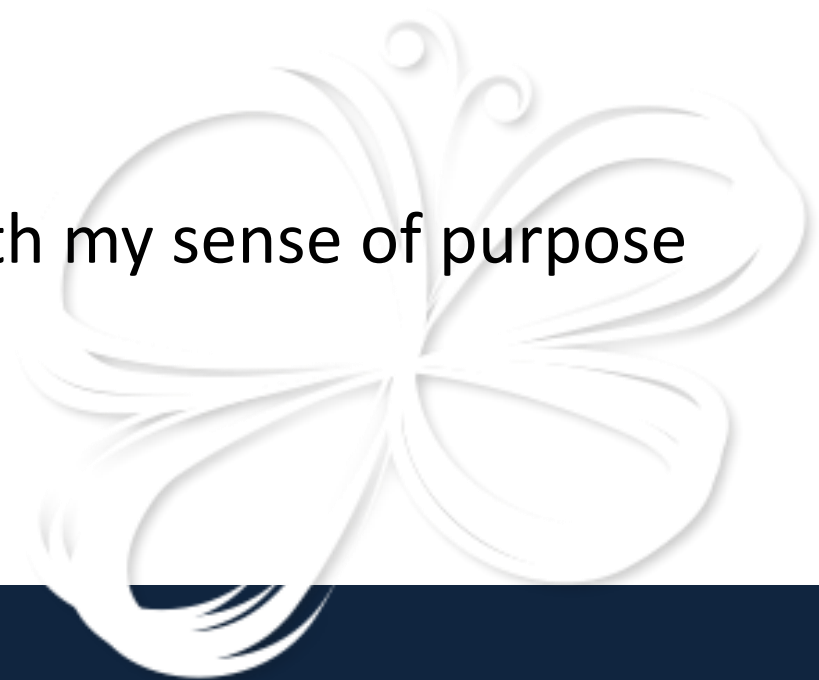
Dissonance between ideal and reality

Are my expectations of myself and of the workplace realistic?

How is my self-care?

How are my boundaries?

Does this work (PPC) sit well with my sense of purpose and satisfaction?



Resiliency and coping skills

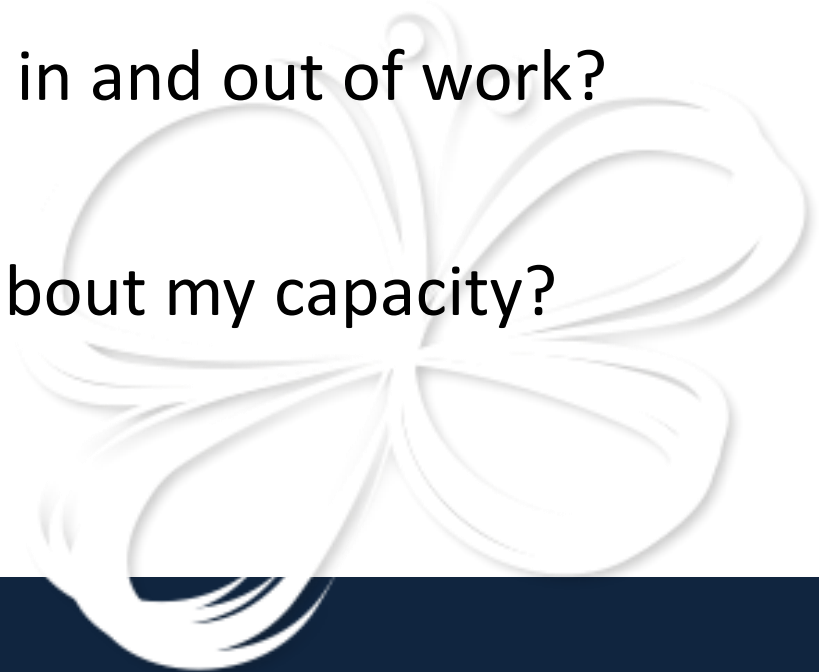
Have I struggled with stress or 'burn out' in the past?

Are there personal issues causing me stress or that trigger me at work?

Do I have good support systems in and out of work?

Do I practice good self care?

Am I being honest with myself about my capacity?



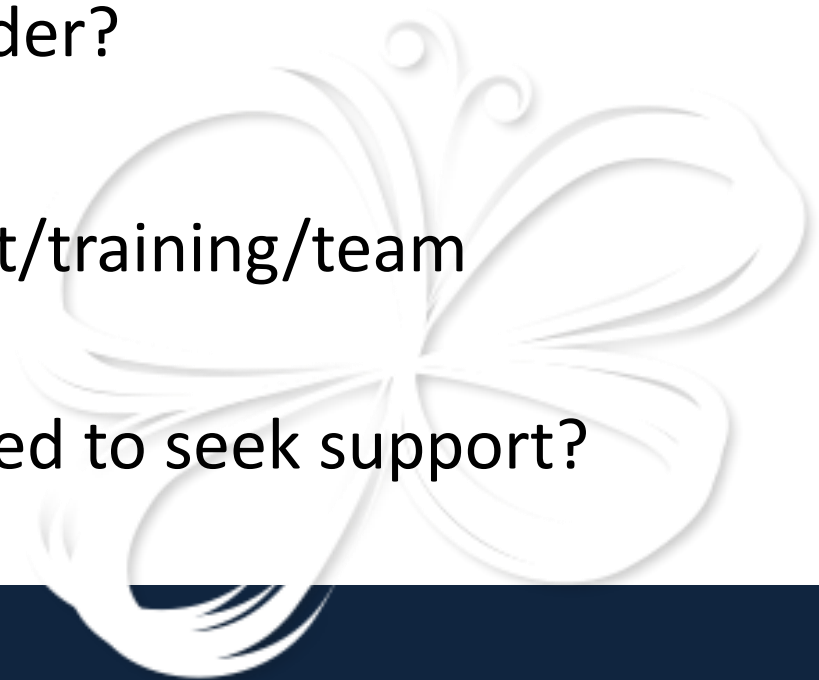
Training and experience

- Do I have appropriate training for this work?
- Do I have sufficient experience?
- Would I benefit from mentoring/supervision?
- Can I develop collegial support?



Organisation/management

- Do I consider the team to be mostly healthy in its functioning?
- Is there adequate staffing?
- Do I respect my manager/leader?
- Is my work valued?
- Do we engage in peer support/training/team building?
- Is it acceptable and encouraged to seek support?



Managing Moral Distress in the Workplace: Creating a Resiliency Bundle

Top methods to reduce burnout include **debriefing, 1-on-1 conversations with peers, and social activities outside of work**

Areas that staff find especially valuable outside the workplace include **exercise, faith, and family**
a multitude of options are necessary to meet individual's needs and expectations

Davis & Batcheller (2020)



‘The Work Family’

Aburn, Hoare & Gott (2021)

- Finding attachment
 - Being new in the team
 - Being supported and nurtured
 - Social connectedness
- Becoming a work family
 - Being a team
 - Having core work family values
 - Sharing success and burden
- Having an identity
 - Being special
 - Making a difference
 - Being valued



Elasticity

Stepping up at times of need is healthy... it's when we don't or can't ease back to 'normal' work expectations that we get in trouble

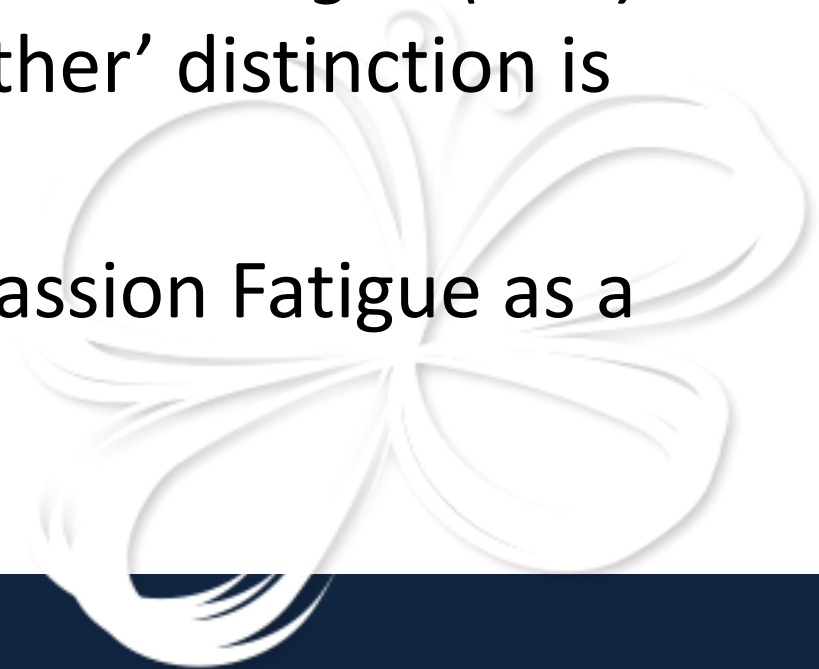


Part 2



Compassion is the antidote to fatigue

- Neuroscience – Compassion does not cause fatigue
- fMRI's show *Empathic Distress Fatigue (EDF)* happens when the 'self-other' distinction is blurred
- EDF should replace Compassion Fatigue as a more accurate term
- Klimecki & Singer (2012)



Emotion Regulation

Without emotion regulation skills, our 'self-other' distinction is blurred so we absorb another's pain and negative emotions and suffer *empathic distress fatigue*

Singer & Klimecki (2014)

Psychodynamics: Counter transference



The distinction between empathy and compassion matters because the alleviating strategy for 'empathic distress fatigue' is compassion training

Hofmeyer et al (2020)



Empathy

Empathy is the ability to *'feel with'* others while recognising that the emotions we experience are external to oneself, and are initiated by the other person

Empathy is essential for understanding others' emotions

Klimecki (2015)



Compassion

Compassion is *'feeling for' others* who are in pain with warmth, empathic concern, capacity to understand their perspective and intentions, and having prosocial behaviours such as the motivation to act with compassion to relieve their pain

Klimecki (2015)



Compassion entails “our ability to recognise the suffering of another without taking on that suffering as our own, combined with an authentic desire to alleviate the suffering of another”

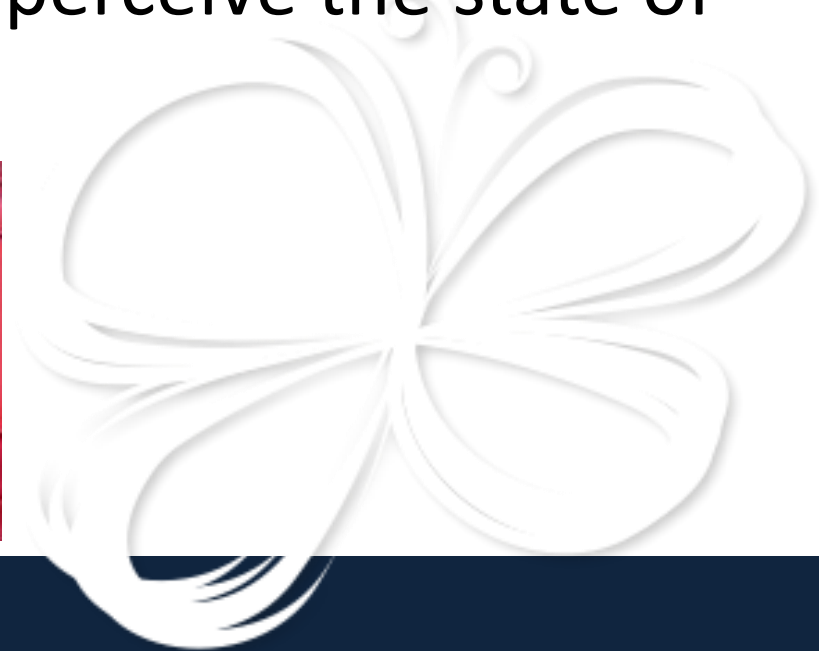
Diana Tikasz (2018)

The Cost of Caring, the Rewards of Resilience:
Creating An Organizational Culture of Compassion and Wellbeing



‘Even though there can be “empathy fatigue,” there cannot be “compassion fatigue,” since compassion is essentially a wholesome, positive state of mind, while empathy is only the tool that allows one to correctly perceive the state of mind of others’.

Matthieu Ricard (2009)



It is vital to regulate our emotions when empathising so we don't hinder our ability to care or risk our personal wellbeing



4 Strategies

- Compassion
- Self-care practices
- Self-compassion
- Compassion leadership

Hofmeyer, Kennedy & Taylor (2019)



Mindfulness



Loving Kindness Meditation

May you be filled with
loving kindness
May you be well
May you be peaceful
and at ease
May you be happy

GOD GRANT ME THE

SERENITY

TO ACCEPT THE THINGS
I CANNOT CHANGE

COURAGE

TO CHANGE THE THINGS I CAN

WISDOM

TO KNOW THE DIFFERENCE

**fineart
america**

Companioning

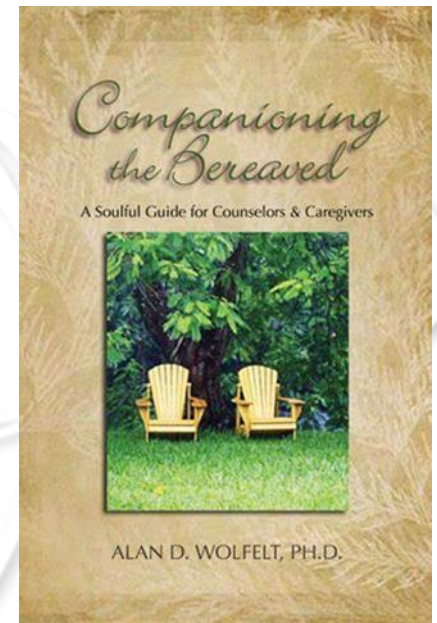
Alan Wolfelt (2005)

Companioning is about being present to another person's pain; it is not about taking away the pain

Companioning is about learning from others; it is not about teaching them.

Companioning is about compassionate curiosity; it is not about expertise.

Companioning is about being still; it is not about frantic movement forward.



Self-care:

An activity that supports, energises, soothes or inspires

SELF-CARE WHEEL



BE KIND to YOURSELF

by KRISTIN NEFF



RESEARCH
AND MORE
RESEARCH



self-compassion



SELF-COMPASSION
A SOURCE OF STRENGTH
and RESILIENCE

1 SELF KINDNESS



WE ARE AS CARING
TOWARD OURSELVES
AS WE ARE TOWARD
OTHERS

2 RECOGNIZING OUR COMMON HUMANITY



SHARED HUMAN
EXPERIENCE

3 MINDFULNESS

BEING OPEN TO THE
REALITY OF THE
PRESENT MOMENT



YOU ARE
HERE

ACKNOWLEDGE
OUR SUFFERING
WITHOUT
EXAGGERATING
IT



MOMENT
of CONNECTION
WITH OTHERS



Compassionate leadership

- Develop a culture of care
- Role model compassion
- Provide training opportunities
- Promote wellness practices



Feeling supported, heard and cared about by colleagues is a crucial skill to maintain resiliency and to combat Compassion Fatigue

Tosone, Bettmann, Minami & Jasperson, (2010).



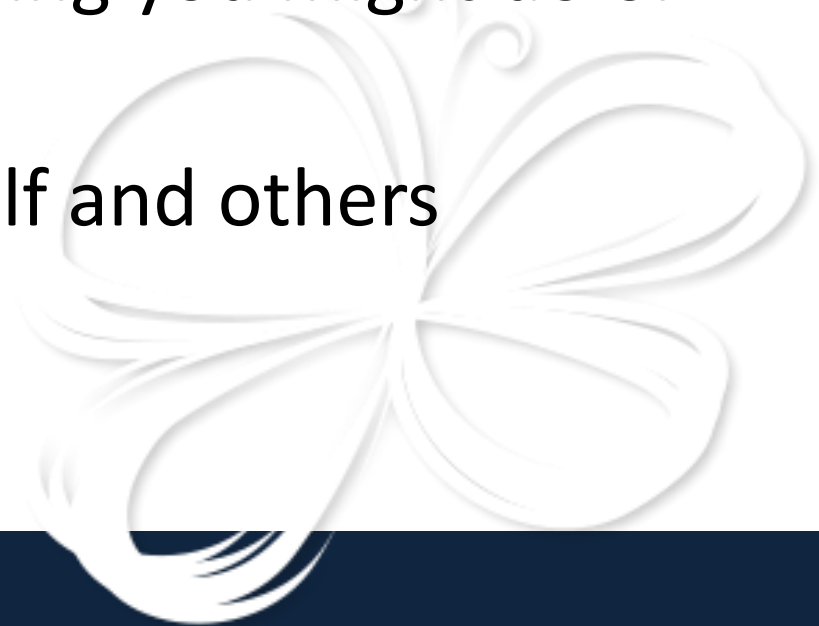
Summary

- 1- To address your stress/fatigue, accurately identity the reason for it
- 2- Compassion practice is an antidote to Empathy Distress Fatigue



Final reflections

- Remember what first drew you to this work
- What is one thing you can do to enhance your work satisfaction?
- What is one supportive thing you might do or say to a colleague?
- Practice compassion to self and others



“Being still and doing nothing are two completely different things.” – Jackie Chan



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