

Compassion Resiliency: Managing Compassion Fatigue and Secondary Trauma

Jeremy Byard, CPSSes, CPSS, MINT, CSA, & ARISE – Interventionist
ALCHEMY - Kentucky

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Upon completion of this activity, participants will be able to,

- 🛡️ Identify Compassion Fatigue and Secondary Trauma within self and others.
- 🛡️ Utilize coping skills and strategies to manage Compassion Fatigue and or Secondary Trauma.
- 🛡️ Evaluate self-care practices within their own lives and organizations.

The presenter has no financial interest to disclose.



Compassion Resiliency: Managing Compassion Fatigue and Secondary Trauma

“Creating a life, I don’t need to escape from”

Jeremy Byard

SES, CPSS, MINT, CSA, & ARISE – Interventionist

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Why are we here?

Definitions

Burnout is a....

“Psychological syndrome in response to chronic interpersonal stressors on the job” (Maslach 1982).

“State of mental and/or physical exhaustion caused by excessive and prolonged stress” (Girdin 1996).

Compassion Fatigue or Secondary Trauma

Compassion fatigue refers to a physical, emotional and spiritual fatigue or exhaustion that takes over a person and causes decline in his/her/thier ability to experience joy or to feel and care for others. (Figley, 1995; Friedman, 2002).

- **Compassion fatigue/Secondary Trauma** is:
- a one-way street
- individuals giving out a great deal of energy and compassion to others
- over a period of time
- individuals aren't able to get enough personal support to reassure themselves that the world is a hopeful place.

It's this constant outputting of compassion and caring over time that can lead to these feelings of total exhaustion (Figley, 1995; Friedman, 2002).

Vicarious Trauma

It refers to the transmission of traumatic stress through observation and/or hearing others' stories of traumatic events. This results in a shift / distortion to the caregiver's perceptual and meaning systems.

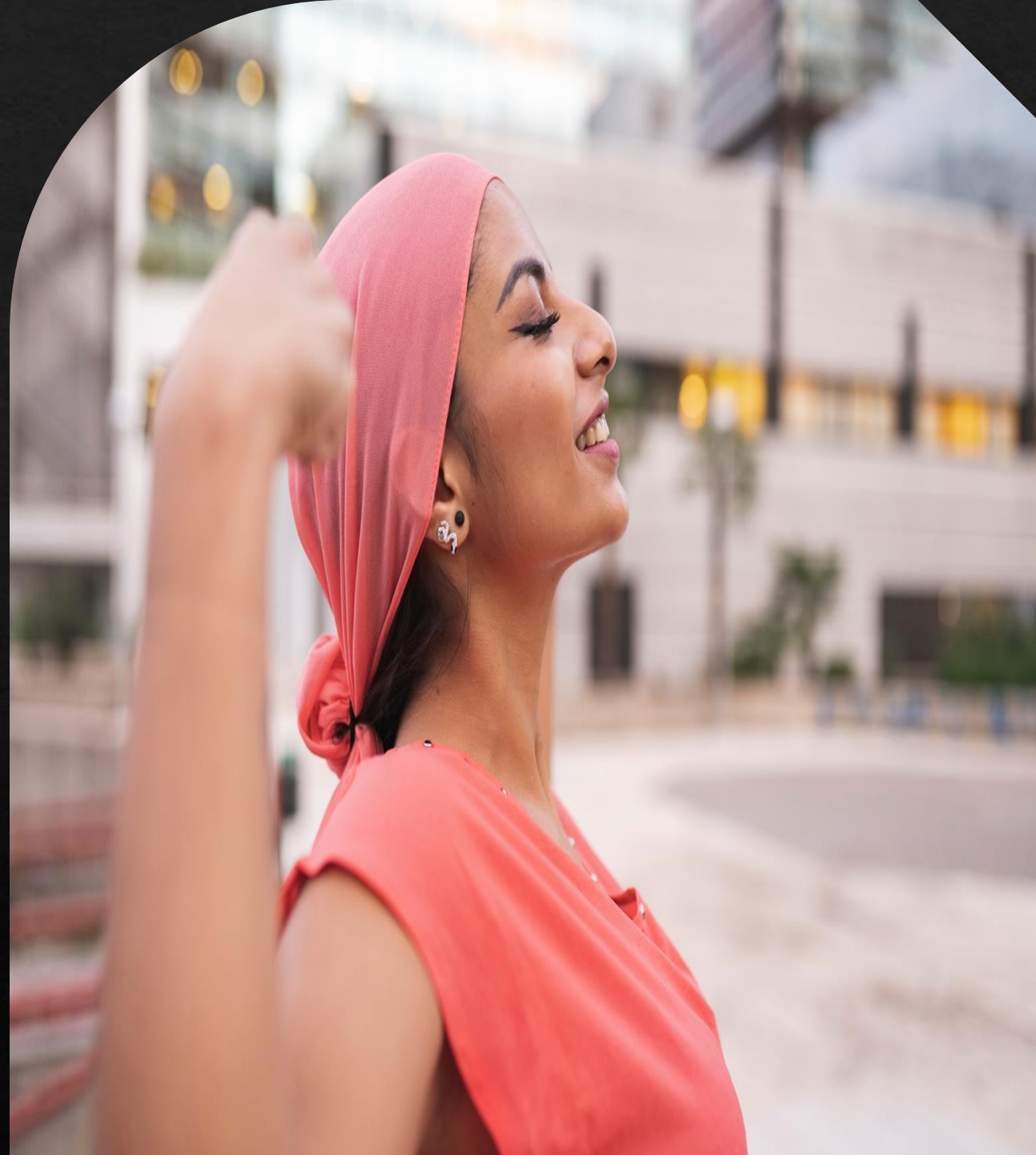
“Vicarious traumatization is the transformation of the therapists' or helpers' inner experience as a result of empathic engagement with survivor clients and their trauma material. It refers to the cumulative transformative effect on the helper working with the survivors of traumatic life event.” (Saakvitne & Perlman, 1996)

Resilience:

- ◆ Resilience is the process and outcome of successfully adapting to difficult or challenging life experiences, especially through mental, emotional, and behavioral flexibility and adjustment to external and internal demands.
- ◆ A variety of factors contribute to how well people adapt to adversities, predominant among them are:
 - the ways in which individuals view and engage with the world
 - the availability and quality of social resources
 - specific coping strategies

Psychological research demonstrates that the resources and skills associated with more positive adaptation (i.e., greater resilience) can be cultivated and practiced.

[APA Dictionary of Psychology](#)



Emotional Energy Matrix



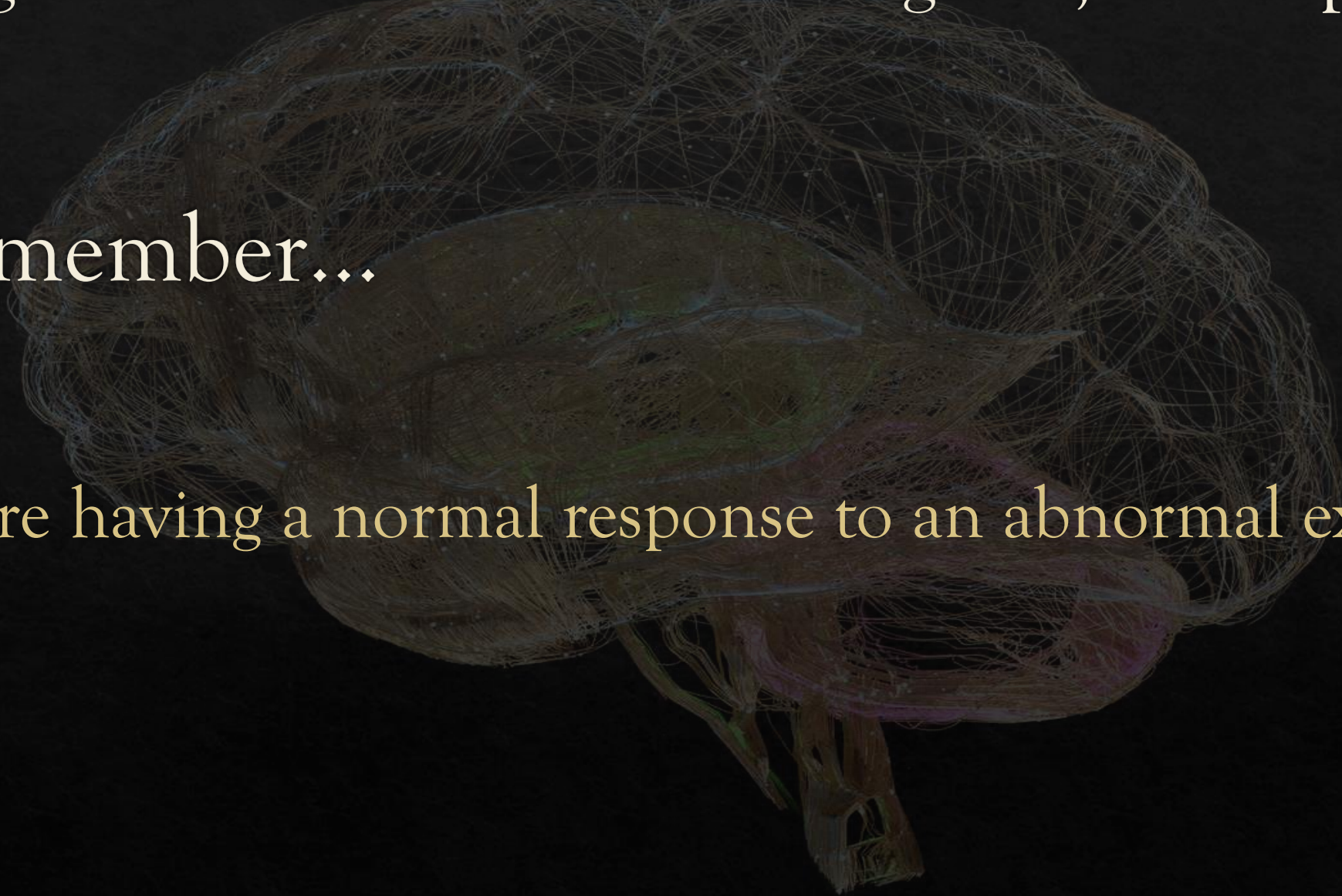


Mind Full, or Mindful?

Holding ourselves to a standard of grace, **NOT** perfection

Remember...

you're having a normal response to an abnormal experience



Care vs. Caring

A woman with her arms raised in a joyful gesture against a bright, hazy background. She is wearing a dark, textured jacket and has a wide, happy smile. The background is a soft, golden-yellow glow, suggesting a sunrise or sunset. The overall mood is one of positivity and celebration.

Care – is predominantly about meeting physical and emotional need

Periodically or even daily practice

To give respite, to restore/recharge

Caring – is a practice we CAN and SHOULD do every minute of every day

Compassionate, radical self-acceptance

Embracing every part of ourselves, even those parts we don't like, the parts that we hide, repress, and deny (Shadow)

Building your Care Plan



Easy as 1,2,3...

01

REFLECT



02

EXAMINE



03

ADJUST



Step 1: Reflect/Evaluate Coping Skills



- ❖ An honest appraisal of your habits
 - ❖ How do you typically respond/react with work's & life's demands?
 - ❖ Positive vs. Negative?
 - ❖ Neutrality?
 - ❖ Can you accurately identify when to take a break or T/O?

Step 2: Examine/Identify Needs

Daily Self-Care

What are you doing on a daily, weekly, monthly, quarterly, semi-annual, and/annual basis to support your wellbeing?

Do you currently engage in care/caring practices?

Are you active in some areas and no others?

Current Practices vs. Practices to Try



Step 2: Examine/Identify Needs

Emergency (self/community) Care

In crisis mode the likelihood you will be able to create a coping strategy is unlikely !!

Take time to develop a plan in advance

Identify your unique needs in times of distress



Helpful (what to do)

vs.

Harmful (what not to do)

Step 3: Adjust/Replace

Work to reduce and/or eliminate negative coping skills

Choose one action you find most harmful and replace it with a positive skill

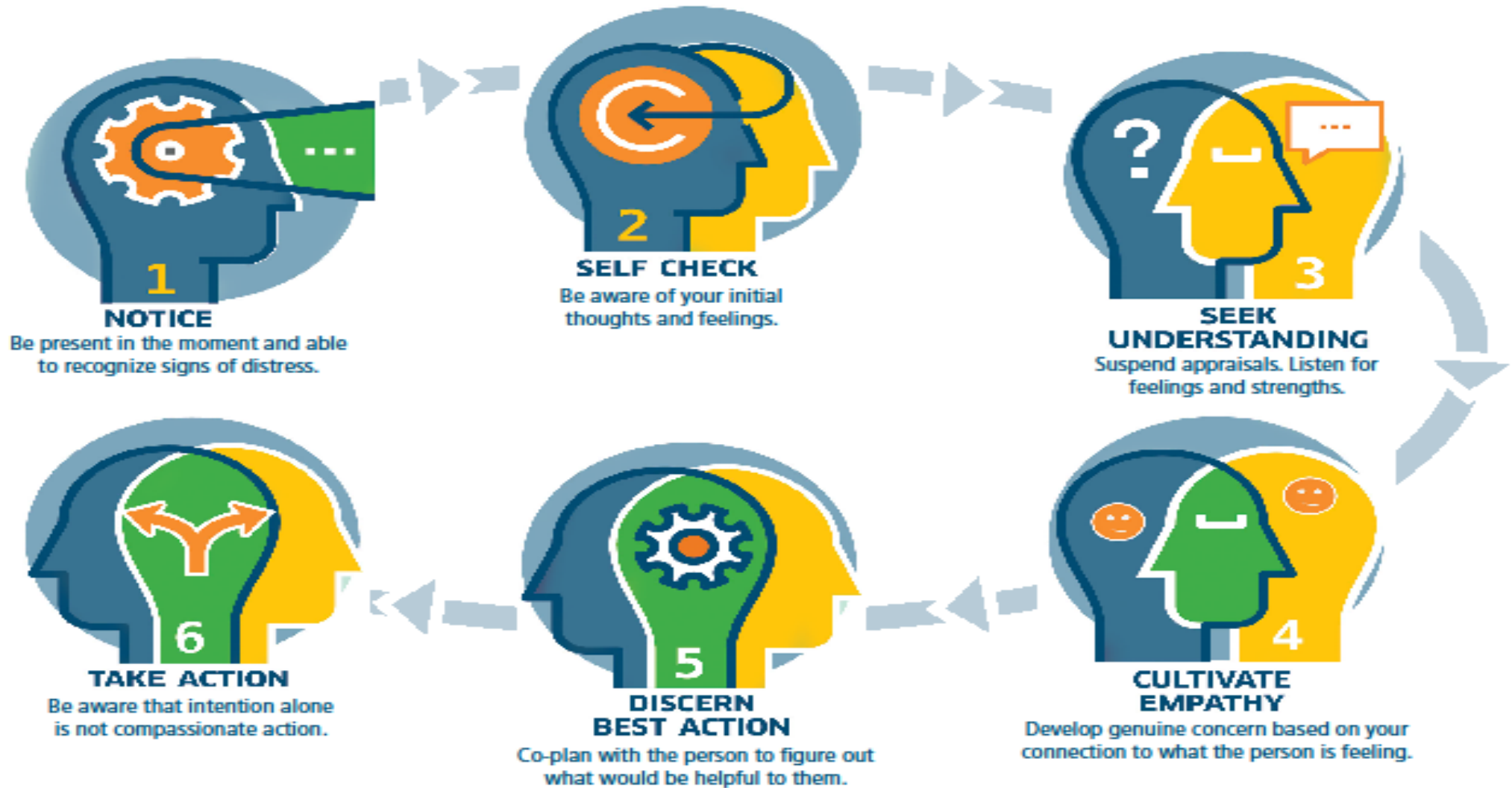
Continue to explore self-care activities..... there is no magic bullet1



"When I was 5 years old, my mother always told me that happiness was the key to life. When I went to school, they asked me what I wanted to be when I grew up. I wrote down 'happy'. They told me I didn't understand the assignment, and I told them they didn't understand life."

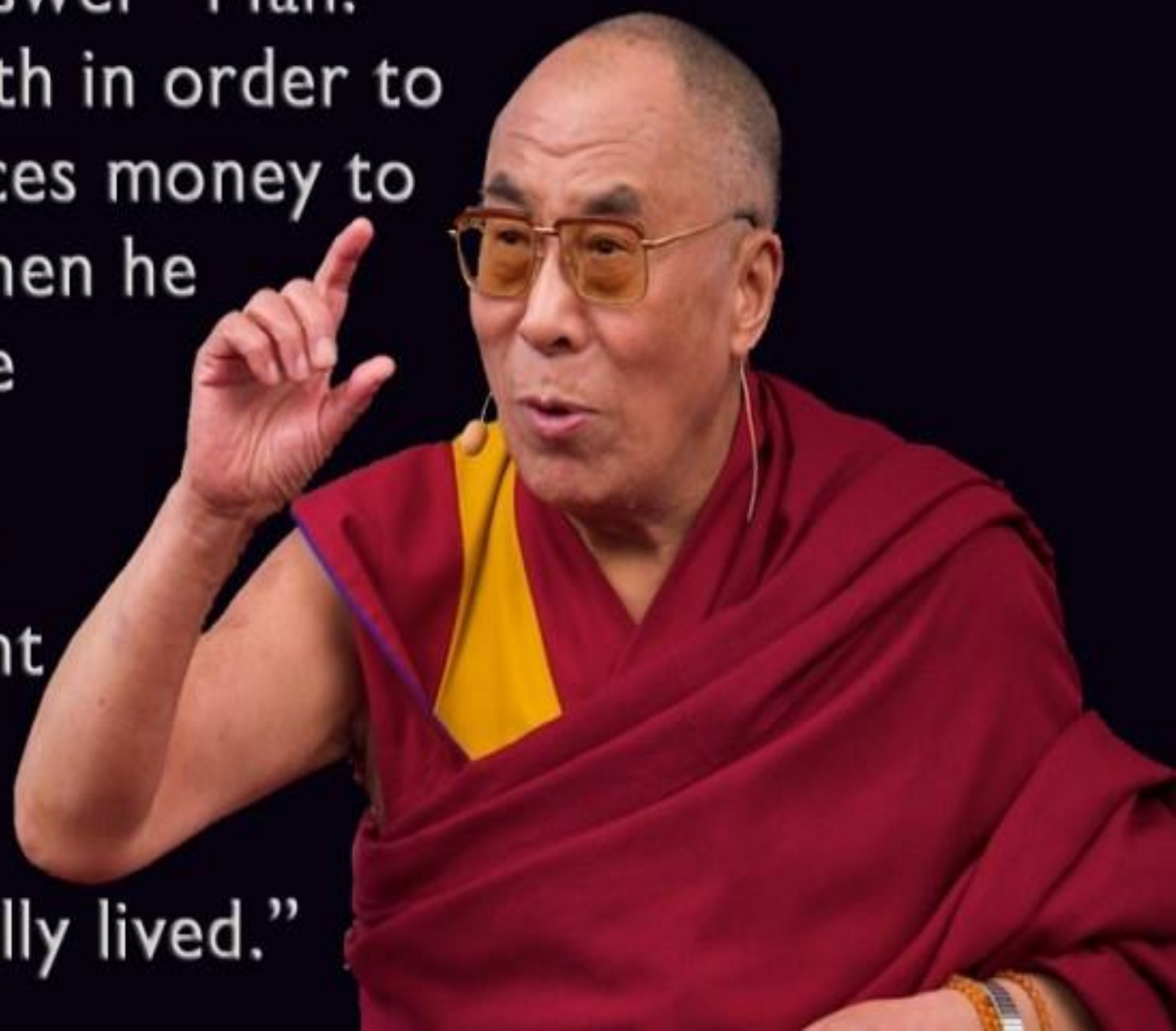
- John Lennon

COMPASSIONATE STEPS YOU CAN TAKE...



(Combined from works of Monica Worline, *Awakening Compassion at Work*, 2017 and Beth Lown, *The Schwartz Center for Compassionate Healthcare*, 2014)

The Dalai Lama, when asked what surprised him most about humanity, answer “Man. Because he sacrifices his health in order to make money. Then he sacrifices money to recuperate his health. And then he is so anxious about the future that he does not enjoy the present; the result being that he does not live in the present or the future; he lives as if he is never going to die, and then he dies having never really lived.”



Creating a life, you LOVE...

- ◆ Prioritize Support & Care
- ◆ Spend Time Reflecting, Examining, Adjusting, and Planning Your Care
- ◆ Experiment Often With Many Care/Caring Acts and/or Practices



Closing Remarks

Dr. Katherine Marks, MPH Kentucky Opioid Response Effort

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