

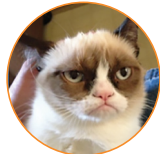
Compassion Fatigue: Connection to Trauma, Stages, and Assessments

Section 3

Stages of Compassion Fatigue Activity



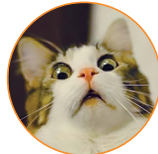
Zealot/Idealist



Irritability



Withdrawal



Zombie



Renewal

Activity description

1. Use the guide below to explain the stages of fatigue (hand out the stages visual or share virtually and be sure the participants are reading the descriptors on the handout as you use the explanation in the right column below). Include aspects from the left column as you explain the stages.
2. Use the following questions taken from the circle agenda for this section to lead a discussion. Either go through each stage and ask the questions of that stage with the whole group or divide the group into four smaller groups, assign each one of the stages, and have a report out to the whole group.
 - a. What feelings and experiences might contribute to a person “hanging out” in this stage – even to becoming one’s norm?
 - b. How would that lead to one’s inability to act with compassion during your workday? (Think of any impact on specific compassionate action steps.)
 - c. (If done in small groups, share out in the full group) Share your key insights with the larger group.
 - d. Share a story of renewal or resilience you have witnessed during your time in your career – yourself, colleagues, or family members.
3. Remind participants that the good news is that at any stage in the cycle, one can learn skills and mindsets that change the trajectory towards compassion satisfaction. The goal of this toolkit is for us to learn these mindsets and skills in order to proactively address our ways of being to avoid compassion fatigue and, when it does arise, address it early with confidence and support. It is beneficial to begin by getting a sense of the starting place for ourselves. The ProQOL is a helpful self-assessment that is shared in this section.

Description of stage on participant handout



Zealot/Idealist – We are committed, involved, and available. We problem solve and are ready to make a difference. We willingly put in extra hours, and our enthusiasm overflows. We volunteer and go the extra mile, often without prompting.

Facilitator explanation of each part of the cycle

Zealot/Idealist – When we start new jobs, change to new roles, or have a change in our circumstances, we often bring very high levels of energy and enthusiasm. We are hopeful that the work we do will make a positive difference and want to give our all. This is the first stage of compassion fatigue because our work is more like a marathon than a sprint. If we try to run a marathon at the speed of a sprint, we will not be able to maintain it over time. At times, supervisors and coworkers take advantage of others in the zealot stage, seeing our enthusiasm and shifting work of theirs to us, further contributing to our unrealistic expectations in this stage. This experience can be exacerbated if we have experienced discrimination in our lives, we may feel the need to have an overwhelming workload to prove our worth to others.

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Description of stage on participant handout



Irritability – We begin to see the imperfect nature of the systems and people around us. We distance ourselves from and even belittle our clients/patients, coworkers and friends. As we do so, we talk unfairly about their challenges and denigrate their efforts. The use of humor is sometimes strained, and we often daydream or become distracted when clients/patients are speaking with us. Oversights and mistakes begin to occur as we notice our anger, cynicism, diminished creativity, and sadness.

Facilitator explanation of each part of the cycle

Irritability – As we settle into our work, we begin seeing the imperfections of the people and systems needed to reach positive outcomes for those we serve. We begin to see all the expectations we set for ourselves (and perhaps others had of us) in the zealot stage are not realistic. This can lead us to becoming frustrated, angry, and cynical. We may begin to back away from the people we serve and our colleagues if they remind us of what is lacking. If we do not see a way to address the imperfections, we can begin to lose hope. Powerlessness may spark feelings from past trauma or experiences of oppression.

Finding ways to work on addressing some of the imperfections and not letting others stop us from the day-to-day work and the joy it can bring are important steps to take to avoid the negative impacts of this stage.



Withdrawal – We are unable to embrace the complexity of problems, and we lose our ability to see clients/patients as individuals, instead they become irritants. Complaints may be made about our work, and we might have problems in our personal life. We no longer wish to talk about work and may not even admit to what we do. We feel tired all of the time and thus neglect our family, our coworkers, our clients/patients and ourselves. Our shield gets thicker and thicker to block our pain and sadness. We may experience difficulty empathizing and feeling to numb to other's pain.

Withdrawal – The challenges of the workplace and those our clients/patients and families face can be complex and overwhelming at times. To withdraw is a natural human reaction to overwhelm. If we come from and recognize our privilege, we may shield ourselves from seeing the societal gaps that feel too immense to bridge. This escaping from the needs around us makes us less able to meet the expectations of our job. It also disconnects us from the joy we originally felt about the mission of the work.

Leaders can reconnect us to the mission, provide training and support to deal with complex challenges, and share what others are doing to also impact the clients/patients and families in our communities. Understanding what “the village” is doing and the resilience of those we serve can help us to let go of the full burden of the challenges.

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Description of stage on participant handout



Zombie – Our hopelessness turns to rage, and we begin to detest people. We easily move to anger if our coworkers dare to question us. Others become incompetent or ignorant in our eyes, and we begin to work in a silo. We have no time for humor or fun. We may have a sense that we can't ever do enough, an inflated sense of importance related to our work, hyper-vigilance/ sleeplessness, and a sense of persecution.

Facilitator explanation of each part of the cycle

Zombie – If we have not discovered ways to moderate our energy for the long view, how to accept imperfections in people and systems while working for improvements, and ways to focus through complexity, we may move into the zombie stage of compassion fatigue. The key descriptor of this stage is isolation from all others. While not healthy in the long run, it is a survival mechanism very similar to a person with a trauma history. Think back to the [Compassionate Action Steps](#) and our need to see beneath the external behavior to empathize with the pain. Colleagues and leaders can offer support through these steps. Systems that have clear boundaries on time spent on work, put money behind low-stress team activities, offer mental health and coaching services, as well as "wellness days" as part of their PTO package are proactively providing support for people who find themselves in this stage. When looking at employee wellbeing, we must ensure that the system and leader supports to prevent and manage the first three stages are in place rather than a total focus on the stop gaps for the zombie stage.



Unwell vs. Renewal – If we have not addressed this cycle earlier, we come to a fork in the road where we either continue deeper into compassion fatigue to a place of illness, fatigue, and overwhelm or we take a turn towards renewal, a place of resiliency, hardiness, and transformation.

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