

Building Compassion-Based Relationships with Families & Other Caregivers

Section 12



“Engagement is often viewed as synonymous with involvement. Involvement in services is important, but real engagement goes beyond that. Families can be involved and compliant without being engaged. Engagement is motivating and empowering families to recognize their own needs, strengths and resources and to take an active role in changing things for the better. Engagement is what keeps families working in the sometimes slow process of positive change.” – Sue Steib (2004).

Families, however they are defined, are often essential to the health and well-being of clients and can be crucial allies for providers in the delivery of care. Engaging families as active participants in a client- and family-centered approach can have positive effects on health outcomes and experiences of care as well as provider satisfaction.

The opportunities providers have for engaging and building relationships with families and other caregivers, however, can leave them vulnerable to compassion fatigue too. The drivers of compassion fatigue can be very similar to those that drive compassion fatigue around clients. When we come to understand the trauma families are facing or have faced, try to meet sometimes unrealistic expectations, and/or feel ineffective in building positive relationships with families, it can lead to behaviors that are signs of compassion fatigue. We do not have to look far to hear providers identifying families and other caregivers as “difficult,” entering family engagement with vigilance, using a client’s home life as an explanation for a lack of improvement, and not wanting to get to know the family context of their clients. Of course, a similar story is true in reverse: It can be challenging, and not uncommon, to hear families blaming providers for the challenges their family members face and spending time building fences rather than bridges.

So, how do we recognize that we are on the same team and learn to “tag-team” our support for the people we serve? Clearly, there are benefits when the game plan is designed together and goals are understood and communicated. The biggest benefit of a successful provider-family collaborative team, other than the health and well-being of the client, may be the decrease of compassion fatigue for both the provider and the family.

Rather than labeling a family or other caregiver as “difficult” or entering an encounter with vigilance, consider the following beliefs for family engagement:¹

- 1. All families want the best for their family members.**
- 2. All families have the capacity to support their family member’s health and well-being.**
- 3. Families and providers are equal partners.**
- 4. The responsibility for cultivating and sustaining partnerships among health care organizations, providers, families and community rests primarily with health care providers and leaders.**

¹ Institute for Patient- and Family Centered Care. (n.d.). Patient- and family-centered care.

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Compassionate engagement strategies include providers being able to take these six steps for compassionate action when families and other caregivers are distressed:

1. Notice – Be present in the moment and able to recognize signs of distress in families.
2. Self-check – Be aware of our emotional connections to our past and our initial judgments (cognitive appraisals). Appraisals are natural and dependent on your frame of reference from your experience and “training” and are often not accurate or complete.
3. Seek to understand – Suspend appraisals. Listen to understand the concerns/distress from the other’s perspective. Move towards generous interpretations of another’s behavior.
4. Cultivate empathy – Genuine concern develops based on what we have come to understand. This leads to a growing desire and intention to help. Keep listening for understanding if empathy seems out of reach.
5. Discern best action – Work with the families to figure out what would actually be helpful to them rather than what you think would be helpful or was helpful to you in past, similar circumstances.
6. Take action – Be aware that intention alone is not compassionate action.

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



Bringing It All Together Through My Hands – An activity to summarize compassion and self-compassion

1. **Please hold your hands out and squeeze them into fists** (hold for at least 30 seconds).
 - a. Explore how you feel, what emotions arise as you clench your fists?
 - b. Say how you feel out loud.
 - c. **This is a metaphor for self-criticism or resistance** – what it feels like when we fight with ourselves or our experience.
2. **Now, open your hands and turn your palms upward.**
 - a. Explore how you feel, what emotions arise?
 - b. Say how you feel out loud.
 - c. **This is a metaphor for mindfulness** – what it feels like when we are present and open to ourselves and our experiences.
3. **Now, extend your palms and your arms forward.**
 - a. How does this make you feel?
 - b. Say how you feel out loud.
 - c. **This is a metaphor for common humanity** – what it feels like when we reach beyond ourselves and include others. In our vulnerability we discover the common aspects of humanity and can form bonds with others.

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STRATEGIES

4. Now, place one hand in the other with both palms facing upward. Slowly bring them to your chest. Feel the warmth and gentle pressure. Breathe gently.
 - a. Reflect on your feelings with this last change.
 - b. Say how you feel out loud.
 - c. **This is a metaphor for self-kindness or self-compassion.** Caring for ourselves is the foundation that supports our mindful compassion for others and the avoidance of self-criticism and resistance to what we are experiencing. Self-compassion allows us to find comfort and strength in our common humanity.