



Thought leader interview:

Compassion Fatigue Specialist

Patricia Smith

Magellan is very pleased to share our recent virtual interview with Patricia Smith in our September 2017 eMpowered for Wellness e-newsletter.

(PSWHW) Thank you for taking the time to participate in our virtual interview. Can you share with our readers some background regarding your interest and leadership in the area of compassion fatigue and burnout in the mental health and wellness field?

(Patricia Smith) I first learned about compassion fatigue as the training and development manager at Humane Society Silicon Valley. After many years as a journalist, I decided I wanted to work with animals. Within the first two weeks in my new job, the executive director asked me to create a shelter-wide compassion fatigue training. I had never heard the term, and the only information I could find was the academic work of Dr. Charles Figley, who was then the director of the Traumatology Institute at Florida State University. I contacted Dr. Figley and he brought me through the process of understanding exactly what compassion fatigue is and how to address the symptoms.

At that same time, I took the Professional Quality of Life Self-Test (proqol.org/ProQol_Test.html) created by Dr. Beth Hudnall Stamm, who also became a mentor. The test revealed that I suffered from very high levels of compassion fatigue. This started me on a journey that has lasted the past 20 years. After several years on my own personal healing journey, I created the Compassion Fatigue Awareness Project in hopes of helping others in the helping professions to understand compassion fatigue and how high levels can devastate a caregiver's life. The scope of my work has grown beyond anything I could have imagined.

(PSWHW) You have done a great deal of work looking at aspects of compassion fatigue and burnout. What have you learned over the course of this work, and what recommendations would you make to peers to support their own wellness and to avoid compassion fatigue?

(PS) My own work has dovetailed with the amazing work being accomplished by professionals such as psychiatrists and psychologists in the field of traumatology and neuroscience. This powerful new information has been mostly due to the studies of the effect of trauma on our Wounded Warriors. Post-traumatic stress disorder is now a common phrase and the understanding of trauma on the human body, mind and spirit is widespread. These studies have branched out to include brain studies and how traumatic events impact our brains – and, more important, what we can do about it.

If, indeed, a caregiver suffers a high level of compassion fatigue, which is a secondary traumatic stress syndrome, the best path to take for healing is authentic, sustainable self-care. The practices that promote wellness encompass the Standards of Self-Care: nutritious food, exercise, restful sleep, highly functional relationships, and replacing toxic habits (smoking, alcohol, drugs, overeating, pornography, etc.) with healthy, life-affirming habits.

(PSWHW) Your studies/work around compassion fatigue and personal wellness are of particular interest to our readers, given their work in peer support. How can we influence modifiable lifestyle behaviors to improve individual well-being and battle compassion fatigue?

(PS) Re-wiring our brains to successfully improve the quality of our own lives takes work – lots of work. Healing is an inside job. We must go back in time to heal the wounds we have endured throughout our lives.

One of the main causes of compassion fatigue is holding unresolved pain and suffering within. This takes a toll emotionally, but is well-worth the journey. The work involved in healing our wounds is nothing compared to the time, energy and emotional pain it takes to hold them at bay. Everything that has ever happened to us in our life lives within. Pushing down the memories or ignoring them constantly elevates levels of compassion fatigue. Every time we experience additional trauma in our lives, which today is perpetrated everywhere – Facebook, TV news, newspapers— the new trauma hooks into the trauma that already exists. This pattern continues day after day in the helping professions and, eventually, a caregiver will become paralyzed with compassion fatigue.

Businesses and organizations can do their part in helping caregivers to modify their lifestyle by educating their employees about compassion fatigue and putting healthy alternatives into place. This could include an edict wherein no business (emails, texts, phone calls) is conducted on weekends or evenings, encouraging mandatory vacations, providing healthy food alternatives in the cafeteria or vending machines, creating walking or biking groups, and other positive encouragement to promote wellness.

(PSWHW) Based on what you have learned about the health challenges facing those who experience compassion fatigue, what guidance would you offer to help change the health outcomes for individuals working in peer support and caregiver roles?

(PS) There are a number of practices that can aid caregivers and peer support groups to function and promote healing. First of all, make it a rule that "sliming" (the practice of venting all of the gory details of a traumatic event or your personal life) on others is not allowed. Telling the tales of trauma repeatedly only serves to re-traumatize the storyteller and traumatize the listeners. Instead of sharing traumatic stories, have participants share what they are doing to help heal. What is working; what isn't. Next, it is important to have a facilitator who understands the no sliming rule and also makes sure everyone has an opportunity to share. No one person is allowed to monopolize the session. And always make it a rule that participants only take part in storytelling or exercises when they feel comfortable doing so.

It is important when working with others to practice "detached compassion." There is an art to this practice, and that is the ability to listen and bear witness to the pain and suffering of

others without interjecting our own pain and suffering. As caregivers, we are not called to take on the suffering of others. We have our own pain and suffering to endure and heal.

(PSWHW) What are your thoughts about the role of technologies as tools to help improve the battle against compassion fatigue?

(PS) There are some excellent technology tools to help caregivers, such as online meditations (www.nourishresilience.com is one), yoga trainings and mindfulness posts – all help tremendously if followed. But the main complaint I receive has to do with technology addictions.

Caregivers in all of the helping professions are addicted to their pagers, cell phones, laptops, iPads, etc., and want to know how to dial back the time they spend on their devices when they need to be using the time for healing and wellness practices. Unfortunately, I can't tell you what will work for you. I only know what works for me. We each need to take time to figure out how to manage these devices. Do we only check our emails at 8 am-noon-3pm-6 pm? Or do we turn them off on Sundays or all weekend?

Each one of us has the power to control our unhealthy habits and it is beneficial to take the time to figure out what works best for our temperament, our schedules, and our own personal needs. Changing habits is mostly about personal boundaries. We have to take time to discover what we will and won't allow in our lives. Do we really want to spend four hours a day on Facebook? The answer is personal for each one of us.

(PSWHW) Looking forward, how do you think caregiving and peer support work environments will (or should) evolve to support their employees?

(PS) As I mentioned before, I believe the best way for businesses or organizations to help lower compassion fatigue levels in their employees is to take an active role in promoting wellness in the workplace. If leadership doesn't know what this would look like for employees, create focus groups and ask the right question: What can leadership do to promote wellness and healthy habits in your lives? Then listen intently to their answers – and translate those answers into viable practices. You will see a difference in your bottom line if you take good care of those who provide your services.

(PSWHW) If you were to recommend one wellness practice to support someone in a peer support or caregiving role to avoid compassion fatigue, what would it be?

(PS) You are creating that practice right here! I don't believe there is anything better we can do to promote wellness in caregivers in the helping professions than educating them about compassion fatigue. What is it? What are the symptoms? What are the causes? And, then, most important, what can we do about it? This is what has kept me motivated to travel the country the past 20 years presenting workshops, trainings, and keynotes. This work has been tremendously satisfying for me to know I've played a small part in helping caregivers to sustain wellness in order to continue doing the work they are called to do – and making our world a better place.

(PSWHW) Thank you very much for your time and your dedication to the field of compassion fatigue. We appreciate that you shared your expertise with our readers.

About Patricia Smith:

Patricia Smith is a certified compassion fatigue specialist with 20 years of training experience. As founder of the Compassion Fatigue Awareness Project© (www.compassionfatigue.org), she writes, speaks and facilitates trainings nationwide in service of those who care for others. She has presented to caregivers in numerous helping professions including social work, health care, law enforcement, chaplain services, suicide prevention, and education, among many others. She has authored several books and training materials for caregivers, including the award-winning *To Weep for a Stranger: Compassion Fatigue in Caregiving*. She served as the caregiving expert for *Spry* magazine for several years. In September 2016, she presented a TEDx talk on the subject. Additionally, she was the 2012 and 2013 recipient of a writing fellowship at the Helen R. Whiteley Center in Friday Harbor, Washington, a scholarly research center sponsored by the University of Washington in Seattle.

