

# Caring For Others, Caring For Yourself

2012 Heartland Kidney Workshop  
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# An Alarm Sounds...



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# The Issues

- Burnout
- Compassion Fatigue
- Depression



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## Consider This

"The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet. This sort of denial is no small matter. The way we deal with loss shapes our capacity to be present to life more than anything else. The way we protect ourselves from loss may be the way in which we distance ourselves from life. We burn out not because we don't care but because we don't grieve. We burn out because we've allowed our hearts to become so filled with loss that we have no room left to care."

*Naomi Rachel Remen, Kitchen Table Wisdom*



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## In Healthcare You Agree To

1. Individuals who are very, very ill
2. Profound emotions (pt's, families, yours)
3. Challenging colleagues
4. Lost hope
5. Death



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## And...

- You receive very little training...in caring for yourself
- You face stigma and ridicule if you raise the issue
- You are often not supported
- You are not suppose to talk about it



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**Are We At Risk?**

- Tend to be “caregivers”
- Tend to be highly empathic
- Work in stressful and ambiguous settings
- We can’t say no
- Often driven by guilt

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**What Should I Be Aware Of?**

1. Do you feel hope for your patients?
2. Are you unusually agitated or irritable?
3. Do you feel stuck?
4. Are your moods labile and unpredictable?
5. Do you find yourself wanting to isolate
6. What is your relationship with alcohol, drugs, or other medications?

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**What Should I Be Aware Of?**

7. Do you dread going to work
8. Do your co-workers avoid you
9. Are you unable to leave work at work
10. Is being “present” with your loved ones difficult

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## The Issues

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## Burnout

Is a term that has been widely used to describe the physical and emotional exhaustion that workers can experience when they have low job satisfaction and feel powerless and overwhelmed at work: “The chronicity, acuity and complexity that is perceived to be beyond the capacity of the service provider.”

(Stamm 1995)



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## What Causes Burnout?

1. Personality Characteristics
2. Work-Related Attitudes
3. Organizational Characteristics

Sabo, 2011



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**Burnout:**  
**Personality Characteristics**

- Type A Personalities
- Personality Traits (e.g. neuroticism, extroversion, openness to experience, agreeableness, conscientiousness)
- Coping Styles
  - Escape/Avoidance
  - Confrontation Averse

(Schaufeli & Enzmann, 1998).

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**Burnout:**  
**Organizational Characteristics**

- Staffing ratios
- Complex patients
- Lack of leadership
- Inadequate training opportunities
- Lack of autonomy

(Schaufeli & Enzmann, 1998).

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**Am I Burned Out?**

<ul style="list-style-type: none"> <li>□ Not At All</li> <li>□ Rarely</li> <li>□ Sometimes</li> <li>□ Often</li> <li>□ Very Often</li> </ul>	<ol style="list-style-type: none"> <li>1. Do you feel run down and drained of physical or emotional energy?</li> <li>2. Do you find that you are prone to negative thinking about your job?</li> <li>3. Do you find yourself getting easily irritated by small problems, or by your co-workers and team?</li> <li>4. Do you feel misunderstood or unappreciated by your co-workers?</li> <li>5. Do you feel that you are in the wrong organization or the wrong profession?</li> <li>6. Do you feel that there is more work to do than you practically have the ability to do?</li> <li>7. Do you feel that organizational politics or bureaucracy frustrate your ability to do a good job?</li> </ol>
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## The Issues

- Burnout
- **Compassion Fatigue**
- Depression



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## Compassion Fatigue

“Compassion Fatigue has been described as the cost of caring for others in emotional and physical pain. It is characterized by deep physical and emotional exhaustion and a pronounced change in the helper's ability to feel empathy for their patients their loved ones and their co-workers. It is marked by an increased cynicism at a work, a loss of enjoyment of our career, and eventually can transform into depression, secondary traumatic stress and stress-related illnesses. The most insidious aspect of compassion fatigue is that it attacks the very core of what brought us into this work: our empathy and compassion for others.”

Francoise Mathieu



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## What Does Compassion Fatigue Look Like?

- Exhaustion
- Anger and irritability
- Increased use of alcohol and drugs
- Dread of working with certain patients
- Diminished sense of enjoyment of career
- Heightened anxiety or irrational fears



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## Depression

“Depression may be particularly difficult for nurses, physicians, psychologists, and other caregivers to admit. We’re supposed to be the healers, so it’s really big to say, ‘I’ve got a problem.’”

Julie Nelligan, PhD "Nurses With Depression Need Peer Support"  
www.nurse.com Accessed March 25, 2011



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## Nursing

- 35% reported mild to moderate depression (BDI)
- Commonly reported symptoms
  - Restless sleep
  - Poor motivation
  - Fatigue and low energy
  - Concentration problems
  - Feeling bothered

Welsh D. *Issues Ment Health Nurs* 2009;20(5):320-6.



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## Social Workers

- 19% Depressed (CES-D)
- 60% Self-reported as currently or previously depressed

Depression in North Carolina Social Workers: Implications for Practice and Research. *Social Work Research*, v28 n1 p30 Mar 2004



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STABLE RESOURCE TOOLKIT


### The Patient Health Questionnaire-2 (PHQ-2)

Patient Name \_\_\_\_\_ Date of Visit \_\_\_\_\_

Over the past 2 weeks, how often have you been bothered by any of the following problems?

	Not At all	Several Days	More Than Half the Days	Nearly Every Day
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed or hopeless	0	1	2	3

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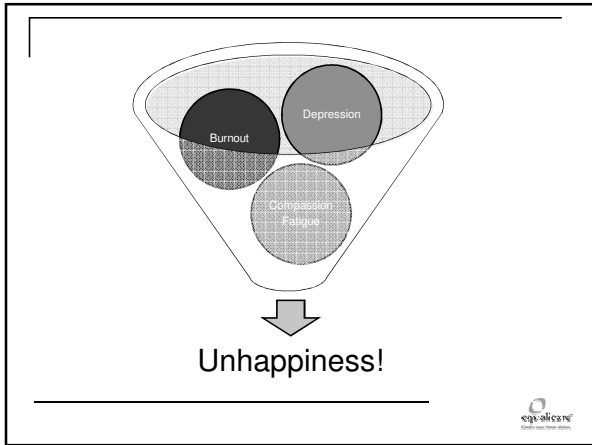
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## What To Do???

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## The Big Picture

“Teamwork is essential in the provision of healthcare. The division of labor among medical, nursing and allied health practitioners means that no single professional can deliver a complete episode of healthcare.”

Sandra G Leggat, *Effective Healthcare Teams Require Effective Team Members: Defining Teamwork Competencies*. BMC Health Services Research 2007, 7:17



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## And...

“Teamwork is not a virtue, it is a choice, a strategic decision”

Patrick Lencioni



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## Cohesive Teams

1. Support each other in the face of challenges
2. Provide feedback for improvement
3. Create a stable work environment
4. Create an atmosphere of trust and openness



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## Strategies For Managing Stress

- Boundaries



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## Sympathy

- a relationship between persons in which the condition of one induces a parallel or reciprocal condition in another.
- feelings or impulses of compassion.
- feelings of favor, support, or loyalty: *It's hard to tell where your sympathies lie.*



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## Empathy

"is the 'capacity' to share and understand *another's* 'state of mind' or emotion. It is often characterized as the ability to "put oneself into another's shoes", or in some way experience the outlook or emotions of another being within oneself."



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## Sleep Hygiene

- Don't read, write, eat, watch TV, talk on the phone, or play cards in bed.
- Do not have any caffeine after lunch.
- Do not have a beer, a glass of wine, or any other alcohol within six hours of your bedtime.
- Do not have a cigarette or any other source of nicotine before bedtime.
- Do not go to bed hungry, but don't eat a big meal near bedtime either.
- Avoid taking naps if you can.



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## Exercise

“There is also good evidence that physically fit people have less extreme physiological responses when under pressure than those who are not. This means that fit people are more able to handle the long- term effects of stress, without suffering ill health or burnout.”

[www.mindtools.com/stress/Defenses/Exercise.htm](http://www.mindtools.com/stress/Defenses/Exercise.htm) Accessed November 28, 2011



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## Meditation and Emotional Well-Being

When you meditate, you clear away the information overload that builds up every day and contributes to your stress.

The emotional benefits of meditation include:

- Gaining a new perspective on stressful situations
- Building skills to manage your stress
- Increasing self-awareness
- Focusing on the present
- Reducing negative emotions

[www.mayoclinic.com](http://www.mayoclinic.com) accessed November 24, 2011



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## Dispositional Outlook

- Optimism vs. Pessimism
- Ruminative Response Style  
“a mode of responding to distress by passively focusing on the possible (negative) causes and consequences of one’s distress without moving into active problem-solving.”



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## Other Tips

1. Confront difficult situations, don't let them burn inside of you
2. Own what's yours...and let go of what's not
3. Be prepared for chaos
4. Don't be a victim, you are not helpless



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## Other Tips

6. Learn to deal with challenging patients
7. Create supportive relationships with your co-workers
8. Use your vacation days!
9. Remember the “Grass isn’t always greener”
10. Recognize the impact of your job on yourself



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## Who To Turn To...

- Employee Assistance Programs
- Medical Professionals
- Friends
- Colleagues
- Spiritual Advisers



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## Concluding Thoughts

- What you do is stressful...it's okay to admit that to yourself and others
- Your well-being is IMPORTANT.
- When you are struggling your ability to function at work, at home, and life in general is compromised
- If in doubt, ask for help!



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## Resources

- Stress Management
  - <http://www.mindtools.com/smpage.html>
  - <http://www.mindtools.com/stress/Brn/BurnoutSelfTest.htm>
- Compassion Fatigue
  - <http://compassionfatigue.ca/>
- Free Course – Vicarious Trauma
  - <http://www.headington-institute.org/Default.aspx?tabid=2647>



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**Thank You**

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