A Genuine Dialogue: From Self-Competence to Self Care in Death Work

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Being a helping professional: Impact of work

• Negative impact on our “self”
• How can we describe the condition of a helping professional when they are deeply affected by that negative impact?

About this workshop

• Professional’s Quality of Life: Concept of compassion fatigue, burnout, and secondary traumatization
• Self Competence and its relationship with the above concepts
• Self Care as a coping strategy
• Personal exploration

Related concepts

• Burnout
• Compassion Fatigue
• Secondary Traumatic Stress (STS)

Always fill your own cup first
AND ALLOW THE WORLD TO BENEFIT FROM THE OVERFLOW

Burnout

• A commonly used term
• Physical, emotional psychological and spiritual exhaustion
• Maslach’s conceptualization of burnout (Maslach & Jackson, 1984):
  – Emotional exhaustion
  – Depersonalization
  – Lack of personal accomplishment
Christina Malsach & Philip Zimbardo

• Famous incident: Stanford Prison Experiment

Burnout: how does it develop?

• Cumulative effects of stressors: progressive over time
• Gradual onset

(Maslach, 2001)

Burnout: why?

• Nature of our work; Demands of our work
• Individual factors: relationships, personality
• Organizational: poor management; workload; powerlessness in changing policies

(Newell & MacNeil, 2010)

Compassion Fatigue (I)

• A more general understanding: The cost of caring
• “Overall experience of emotional and physical fatigue that social service professionals experience due to the chronic use of empathy when treating patients who are suffering in some say (Figley, 2003b; Rothschild & Rand, 2006)” (Newell & MacNeil, 2010, p.61)

Compassion Fatigue (II)

• Joinson (1992): Proposed the term “compassion fatigue” when studied the secondary traumatic stress and burnout among nurses in emergency room
• Nurses who are empathetic and caring may absorb the traumatic stress of patients they care (Najjar, Davis, Beck-Coon & Doebbeling, 2009)

Compassion Fatigue: Key Contents

• Use of empathy; empathetic engagement; compassionate care
• Secondary Traumatization
  – Repeated exposure to others’ traumatic events/experience
  – Symptoms includes preoccupation with the traumatized patients, re-experience the traumatic experience as described by patients, avoidance
Interchangeable terms?

- Early: Secondary Catastrophic Stress Reactions
- Later: Secondary Traumatic Stress
- Charles Figley’s concerns on the secondary traumatization (focusing more on PTSD-like symptoms of people who are traumatized by primary victims of traumatic event) (Sorenson et al., 2017)
- Another related term: Vicarious Traumatization (Pearlman, 1999)
  - Focusing more on the cognitive changes of helpers who work with traumatized persons

Confusion?

- Compassion fatigue:
  - Can we experience it without experiencing secondary traumatic stress? (Newell & MacNeil, 2010) (just like a specific form of professional burnout?)
  - Recent review: emphasizing the role of working with traumatized clients; abrupt onset

Compassion Fatigue: Consequences

- Hard to show empathy and compassion care
- Lose meaning in work; Quit the profession

Professional Quality of Life Scale

- Earlier version:
  - the Compassion Satisfaction and Fatigue Test, the Compassion Fatigue Test and the Compassion Fatigue Self-Test

Reference:

Professional Quality of Life Scale

- Compassion Satisfaction: The pleasure you derive from your work/ the process of helping” /”caring”
- Compassion fatigue: Burnout (e.g. overwhelmed by the work) & Secondary Traumatic Stress (feelings of fears related to the work)
  - Burnout: exhaustion, frustration, distress
  - Secondary Traumatic Stress: avoidance of reminders of trauma; re-experience what clients experienced
How full is your cup?

- Fill in the “Professional Quality of Life” Questionnaire
- Share and discuss.

Study on Self Competence

A study on self-competence: coping with the emotional and existential challenges in working with death, dying, and bereavement (Chan & Tin, 2012)

Impact of Death Work on Self: Existential and Emotional Challenges and Coping of Palliative Care Professionals


Self-competence: coping with the emotional and existential challenges in working with death, dying, and bereavement (Chan & Tin, 2012)

What is Self-competence in Death Work?

- **Knowledge Competence**
- **Practice Competence**
- **Self Competence**

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Existential Coping in Death Work

- Competence of coping with existential challenges experienced in death work, e.g. what is the meaning of my life, what is the meaning of suffering?

Emotional Coping in Death Work

- Competence of coping with the emotional challenges in death work, e.g. manage our own emotions and own grief; experience helplessness in work

Self Care

- 3 components for professional self-care (Baker, 2003):
  - Self awareness
  - Self-regulation
  - Balance
- Support from the work place: agencies, supervisors & peers
Holistic approach in self-care for therapists who work with death, dying, & bereavement (Becvar, 2003)

- Mental functioning
  E.g., Maintaining intellectual functioning, improving interpersonal skills, laughing & having fun etc.
- Physical health
  E.g., Getting adequate rest, appropriate nutrition, & regular exercise etc.
- Emotional stability
  E.g., Meditation, journaling, personal therapy, maintaining boundaries in both professional and personal life, & having enjoyable time etc.
- Spiritual well-being
  E.g., Spending time in nature, religious or spiritual practices etc.

Our Proposal:
Self Care Vs. Self Competence

- Purpose of self care
  - Stability and balance only;
  - But also to enhance helping professionals’ self competence
- Ways of self care
  - Regulation of well being only;
  - But also include existential and emotional coping

Themes in Existential Coping & Emotional Coping

- Existential coping
  - Acceptance of own emotions
  - Management of own limitations
- Emotional coping
  - Adjustment of expectations in death work
  - Search for meaning in work
  - Influence of work & grief
- Proposed working approaches for Self Care

Condition of your cup:
Empty or full?
Tea to be poured into the cup
Self Care: Actions you take

Find our own ways to fill the cup

- Journey of personal exploration and reflection
- A genuine dialogue

Your time to explore

- Take turn to have a genuine dialogue with your partners
- Explore how you may cope with the existential and emotional challenges
- For those who share: Listen to your gut feelings and follow your own pace
- For those who listen: Share your genuine appreciation and feelings

A Genuine Dialogue:
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Concluding Remarks

- Improved Better Professional Quality of Life
- Enhancement of Self Competence
- Self Care: Existential coping & Emotional coping

Source: http://www.proqol.org/Compassion_Satisfaction.html

Discover your compassion satisfaction. May your professional life in end-of-life care be filled with meaning and passion.

Thank You.

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