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BURNOUT, COMPASSION FATIGUE AND THE FUTURE OF OUR PROFESSION

1.0 INTRODUCTION

The veterinary profession attracts highly compassionate and caring individuals who are increasingly expected to display high levels of consideration and compassion. Because of the compassion satisfaction they derive, these individuals dedicate themselves to promoting animal welfare and preventing their suffering. However, it is a simple fact that the nature of veterinary profession can be stressful, emotional, difficult and at times, traumatizing^{1, 2}. Contrary to popular belief, veterinary professionals do not spend every day and night simply cuddling adorable puppies and tickling cute kids. Rather, they also experience the physical exhaustion and emotional turmoil associated with their professional responsibilities. For instance, it is estimated that veterinarians experience patient death approximately five times as frequently as their counterparts in human medicine³.

Conversely, this highly emotional and physically intense work is often at a personal and professional cost as veterinary professionals become so burdened with helping patients and clients that they neglect themselves in the process. Literature reviews regarding the wellbeing of veterinarians and other animal-care workers leaves little doubt that such work takes a toll on the psychosocial and physical health⁴. It gets to a point when this overwhelming sense of responsibility to patients and their owners feel exaggerated and out of balance that veterinarians begin to see it as a norm to continually give of themselves 'until the tank is empty'^{2, 5}. Often, this leads to the cumulative effects of massive, unrelenting stress and burnout⁶.

When these aftermaths are coupled with the constant exposure to euthanasia, hospice care exhaustion, seemingly uncaring pet owners and cases of animal abuse, the attendant moral

distress and vicarious trauma can erode the compassion and empathy veterinary caregivers feel for their patients, eventually resulting into compassion fatigue³. With the reported alarming rate of anxiety and depression among veterinary medical students, this imbroglio proves even more to be an occupational hazard inherent in the profession ^{2, 6}.

Compassion fatigue is said to exists on a continuum throughout a professional career, occurring either suddenly, or cumulatively (over time) with varying multidimensional and interpersonal responses⁴. While it may not be totally avoidable, compassion fatigue can certainly be well managed. An adequate management if effected would ultimately lead to the provision of authentic care and compassion (thereby securing the future of the profession in the long run) without losing oneself in the process⁷.

2.0 THEORETICAL CONCEPTUALIZATION; UNDERSTANDING COMPASSION FATIGUE

For an adequate comprehension of compassion fatigue, the conceptual analyses of stress, burnout, vicarious trauma and their dynamics is crucial.

2.1 STRESS

Stress is a complex concept. It is described by Weitin (2004)⁸ as:

"Any circumstance experienced mentally, physically and emotionally that threatens, or is perceived to threaten one's wellbeing and that thereby tax one's coping abilities".

Each individual is susceptible to stress in different ways, thus, the appraisals of stressful events are highly subjective². The perception of such stressors automatically signals certain nervous impulses and hormonal secretion⁸.

Often, stress is experienced in the form of: frustration – when the pursuit of some goal is thwarted; conflicts – when two or more incompatible motivations or behavioural impulses compete for expression; change – when there are alterations in one's living circumstances that require readjustment; pressure – when there are expectations to execute tasks and responsibility quickly, efficiently and successfully⁸.

When thought of discretely, routine stress might be fairly benign, but when considered collectively they could result in a great strain⁸. Thus, when stressful situations become excessive and prolonged, they produce unrelieved stress and fatigue which could eventually lead to burn out².

2.2 BURNOUT

According to Maslach et al (1996)⁹, burnout is:

"A psychological syndrome of emotional exhaustion, depersonalization, and a sense of low personal accomplishment that arises from work-related stress".

Burnout includes the three components of physical and emotional exhaustion, cynicism, and a lowered sense of self efficacy that could be brought about gradually by chronic work-related stress with antecedents relating to the stressful work environment and its consequence ultimately being reduced productivity⁸.

Because here the nervous system is consistently stimulated over an extended period, and lasts significantly longer, mental weariness which decreases one's energy (and mental capacity) results. Fatigue at this level impacts one's emotional, physical and psychological well-being.

While burnout does not necessarily alter our view of the world, it does affect how we perceive our workplace⁵.

2.3 VICARIOUS TRAUMA

This occurs when a veterinarian (or an animal health professional) becomes traumatised subtly and unconsciously after being consistently and chronically exposed to the trauma of animals, their owners and/or stories of traumatic incidences narrated by colleagues. This causes a profound shift in world view having witnessed (actively or passively) a very high volume of secondary traumatic stress⁴.

2.5 COMPASSION FATIGUE

According to Figley and Roop (2006)¹⁰, compassion fatigue is:

"The deep physical, emotional, and spiritual exhaustion that can result from working day to day in an intense caregiving environment".

It has been expressed by Dicks and Bain (2016)¹¹ as a minuscule but:

"Incessant chipping away of the soul".

Compassion fatigue described as the "cost of caring" occurs when there is a neglect of one's physical and emotional need for recuperation while fostering empathy and compassion for others without setting boundaries. This overwhelming sense of responsibility to the profession – characterized by a deep physical and emotional exhaustion – can get out of balance that the ability to feel empathy towards oneself, patients, clients, co-workers and even family members becomes stressed and later impaired. Often this eventually manifests as a series of negative psychosocial behaviours ^{5,7,12}.

Susceptibility to burnout and compassion fatigue ranges from work place stressors to personal factors (non-work related) and could also mirror post-traumatic stress disorder³. However, compassion fatigue is neither stress nor burnout, but this trio have complex interrelated dynamics and usually often coexists as a progression¹². While burnout affects only the work aspect of one's life, and could be relieved by changing one's job, compassion fatigue affects the entirety of one's life inherently².

Similarly, ethical fatigue result when veterinarians and other animal-care workers become uncompelled and incapable of efficiently performing their professional responsibilities on ethical obligation grounds having been exhausted to breaking point.

Compassion fatigue is no doubt a growing menace. Recently, a whopping eighty-five per cent conference attendees of American Veterinary Medical Association members indicated stress and burnout as important wellness issues affecting veterinarians and their staff with another seventy-six per cent agreeing that there were not adequate resources to deal with these issues ¹³. Despite this apparent empirical data about the escalation of this very serious problem in the profession, awareness of and research into workplace issues facing animal caregivers have been slow to develop, especially when compared to other medical profession³.

2.5.1 SYMPTOMS OF COMPASSION FATIGUE

Regardless of profession, individuals experiencing compassion fatigue develop similar symptoms physically, psychologically and emotionally^{2, 3}.

Persons suffering from compassion fatigue are disinterested in taking care of their physical appearance. They are often plagued with insomnia, significant chronic fatigue and increased susceptibility to illness. They tend to be forgetful, paranoid, increasingly involved in work

accidents, gradually withdrawing from family and friends, with low tolerance of work colleagues and a characteristic uncontrolled mood swings². Their ability to feel empathy noticeably reduces and they become irritable, cynic, easily angered and depressed; deriving diminished sense of career enjoyment².

In addition, they adopt negative coping strategies such as excessive self-blame, self-indulgence (e.g. alcoholism, overeating, drug use etc.) and learned helplessness (believing in the uncontrollability of events and thus giving up). In the extreme, this could lead to such individuals pursuing suicidal thoughts and actions³. This remains even more alarming in the wake of the report that veterinarians have the highest incidence rate of suicide among all occupations, and twice as high as physicians and dentists¹⁵. In the United Kingdom the suicide rate of veterinarians is reported to be four times that of the general public and doubles that of other health professionals⁵. This realisation remains highly unsettling as there is no larger crisis in mental health care than when people feel that life is not worth living and they would be better off dying by suicide.

3.0 HIGHLIGHTING COMMON STRESSORS AND RISK FACTORS

Veterinarians and other animal health staff stand a risk of burnout, compassion and ethical fatigue when they are particularly overly conscientious, workaholic, desiring perfectionism, or when they have low levels of social support system¹⁵. This is especially worsened with team members having a history of personal trauma or dealing with other personal stressors outside the workplace (divorce, sick children, caring for aging parents, etc.).

Also at higher risk are veterinary care workers who feel unsupported by their colleagues, or feels like the management structure of their workplace is lacking in efficient structure system thus

leading to imbalance work delegation, poor training protocol, workplace cohesion and strains, inappropriate patients/clients care, and poor internal communication within the practice.

Veterinarians practicing in lower socioeconomic situations and places (such as in animal shelters, sub-Saharan Africa etc.) are equally at risk as they have to cope with a limited resource to address complex healthcare issues. They often become 'burned' out of constant price haggling and the inability to practice basic care and ideal medicine with its attendants moral distress.

4.0 ANSWERING THE MAJOR QUESTION; THE FUTURE OF OUR PROFESSION

From the forgone, what remains a principal concern is the challenge of what ultimately becomes of the veterinary profession if we do not recognize and seek treatment for ethical and compassion fatigue.

Frankly, there is just one major grave possibility from the hitherto discourse, and that is the continual fatal aggravation of this ugly reality – ethical and compassion fatigue – down the professional strata. This condition, if not salvaged would ultimately lead to a paradigm shift: from affecting young veterinarians with less than a decade of practice life behind them, to affecting veterinary medical students right from their years of training. This is in fact already surfacing as it was recently observed by Spencer *et al*, (2016)⁴ that while in school, most veterinary students are psychologically depressed thus, they enter the profession susceptible to compassion fatigue from day one.

An efficient way to avert this malignancy is however by learning how veterinary care givers, as individuals and as professionals can manage the stress and keep compassion fatigue under check⁵.

On this note, this paper will consider several distinguished broad sets of intervention in the effective management and control of compassion fatigue.

5.0 MANAGING COMPASSION FATIGUE; A PERSONAL AND PROFESSIONAL APPROACH

This employs direct confrontation of problem with a reasonable appraisal of one's stress, while recognising stressors, and controlling emotional, and psychosocial reactions to it⁸. This approach involves adopting a constructive coping strategy.

5.1 BASIC AWARENESS

The first step in reducing the negative effects of compassion fatigue is to have the basic knowledge and awareness of this condition, and to recognize signs and symptoms personally⁴. Training in recognizing and responding to compassion fatigue and burnout needs to begin right from veterinary schools in order to develop an early warning system and thus overcome its (compassion fatigue) grasp before becoming fatal. This can be efficiently done by educating in early identification of triggers and stressors³.

5.2 IDENTIFYING TRIGGERS AND STRESSORS

In managing compassionate fatigue, recognizing one's own personal triggers is imperative⁵. Veterinary care givers must learn to recognise specific things within and outside their workplace that triggers emotional turmoil and often lead to job-satisfaction bankruptcy. This is often a personal quest as individual's appraisal of stress is disparate.

Compassion satisfiers should be weighed against the stressors and a conscious effort should be made to reduce such 'clearly defined' triggers and stressors while proportionately improving the

satisfiers in daily life⁵. The Professional Quality of Life Scale (ProQOL) is an adequate tool for measuring individual levels of compassion satisfiers and compassion fatigue¹⁶.

5.3 RECURRENT RECUPERATION

This is a conscious mental self-regulation technique. It involves getting engaged in positive coping strategies that can reinforce compassion satisfaction and lessen compassion fatigue³. A good way to start is usually with the adoption of a quality basic lifestyle of: proper diet, adequate sleep and moderate exercise, quiet time, spending more time with family, children, friends and pets and a break from work and technology.

Mindfulness (undisrupted concentration to one's on-going mental processes), self-awareness and doing something renewing every day are very essential conscious activities that replenishes. Also, activities that bring happiness and allow stepping out of the caregiver mode should be explored or rediscovered as these ensures a healthy self-care activities which have a direct proportionality to compassion satisfaction⁷.

In the professional setting, recognizing and validating that compassion fatigue can affect a team is crucial⁷. An open dialogue that fosters exchanging ideas and raising concerns, consistent debriefing, provision of valuable employees resource that helps to manage stressors, paid vacations and sick leave to encourage time off should be put in place. In extreme cases, professional counselling and medical support to facilitate personal growth by addressing issues of stress and to manage the more serious consequences associated with compassion fatigue is required¹⁷.

5.4 CONCLUSION

In caregiving careers such as the veterinary medical profession, there is no doubt that one need to care for oneself to sufficiently and sustainably care for others¹⁸. This awareness demands that a lasting inimitable solution be ensured in order to ameliorate the psychosocial problems that can result for veterinary professionals and animal care givers⁴. Although these psychosocial effects associated with compassion fatigue can cause pain and suffering, learning to recognize stressors and signs, and managing its symptoms are the basic steps toward healing¹⁵.

Stress, burnout and compassion fatigue if managed well could paradoxically lead to the experience of a positive emotion which can promote creativity and flexibility in problem solving and reduce adverse physiological effects of stress⁸. Any intervention to reduce stress would be beneficial to professionals, their patients, clients and colleague. For these reasons therefore, any thriving veterinary professional should know that they have to care for themselves if they are going be at their best as doing so will allow them to maintain the high standards of care and compassion that are fundamental to all veterinary workplaces and animal care teams³.

We should love our patients, clients and other professional responsibilities as much as ourselves.

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