Resilient Retreat, Inc.



RESILIENTRETREAT

Compassion Satisfaction and Fatigue for First Responders and Helping Professionals During COVID-19

2021



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Summary

In an effort to understand current levels of compassion satisfaction (*the positive emotions experienced from helping others at work*) and compassion fatigue (*the negative emotions individuals feel from helping others at work*), first responders and helping professionals throughout the community were invited to complete a confidential online survey. Demographic information, as well as input on specific services that respondents felt would be helpful in dealing with their work-related stress were also collected. Surveys were completed by 180 individuals from a variety of helping professions, including but not limited to medical, law enforcement, non-profit, fire/EMS, education, mental health, and human services staff.

The majority of participants reported that they "often" experience most of the items measuring compassion satisfaction. Mental health professionals reported the highest levels of compassion satisfaction while law enforcement reported the lowest. The average score reflected a "moderate" score of compassion satisfaction for all professional disciplines.

Compassion fatigue consists of two elements: burnout and secondary traumatic stress. Medical professionals reflected the highest levels of burnout, while Fire/EMS reported the lowest. Medical professionals reported the highest level of secondary traumatic stress, while fire/EMS reported the lowest. Overall, 52% of local first responders/helping professionals reported experiencing compassion fatigue, with 43% reporting moderate to severe burn-out and 39% reporting moderate to severe secondary traumatic stress.

In the second year of the pandemic, 49% of first responders/helping professionals reported that their personal lives have been harder and 66% reported their professional life has been made more difficult. Approximately 19% of respondents shared that they are currently seeking supportive services to help them cope with the stress of the pandemic. Services targeted to helping the body and spirit were selected as the most helpful by respondents. However, a majority of participants stated that they would also find benefit in services related to the mind.

With over half of those surveyed reporting compassion fatigue, this report illustrates the importance of providing services to our helping professionals and first responders who are currently experiencing the negative impact of current world circumstances coupled with their on-going professional demands. While many respondents experience satisfaction in their work, this data shows that the struggle with compassion fatigue has a negative impact on the individuals and, in turn, on those whom they serve. Resilient Retreat is poised to assist with mitigating these impacts and will continue to provide evidence-based programs designed to this end. The impact of these services in countering the negative effects of compassion fatigue is critical to the creation of a healthier community where not only our helping professionals thrive, but those who they serve receive the highest quality of services.



Introduction

Resilient Retreat, Inc. is a new and innovative approach to help those impacted by trauma and abuse. A vast array of inter-disciplinary evidence-based programs are currently being offered to address the impact of trauma on the mind, body, and spirit (e.g., journaling, art therapy, neurofeedback, equine therapy). Resilient Retreat is also currently building a retreat center that will offer these programs in a comforting three-to-five day retreat and day programs. Free programming will be offered to abuse survivors (e.g., domestic violence, child abuse, sexual violence) and first responders/helping professionals who witness trauma everyday in the workplace (e.g., advocates, fire fighters, mental health professionals). Moreover, Resilient Retreat offers community trainings on trauma-informed care and compassion fatigue on a sliding scale fee. Resilient Retreat, Inc.'s operation and programming is based out of Sarasota, Florida.

To understand how much first responders/helping professionals in our community experience compassion satisfaction (i.e., the positive emotions experienced from helping others at work) and compassion fatigue (i.e., the negative emotions individuals feel from helping others at work), first responders/helping professionals from many non-profit and government agencies were invited to participate in an online survey. Compassion fatigue is broken into two parts: (1) Burnout (i.e., slow onset of feelings of hopelessness, that one's work has little positive impact, and difficulties in dealing with work) and (2) Secondary traumatic stress (i.e., rapid onset of symptoms that mirror posttraumatic stress disorder, such as nightmares, difficulty sleeping, and flashes of intrusive images and/or thoughts, due to secondary exposure to extremely or traumatically stressful events). This survey also asked first responders/helping professionals to provide demographic information and to identify specific services related to the mind, body, and spirit that would be helpful to them in dealing with work-related stress.

The survey was administered as a confidential online survey through Qualtrics from October 2021-January 2022. A link to the survey was disseminated to supporting agencies. Employees from the following agencies responded: Van Wezel, Unidos Now, The Twig Cares, Inc., The Florida Center, The Early Learning Coalition of Sarasota County, Take Stock in Children, Suncoast Partnership to End Homelessness, St. Vincent de Paul Cares, SPARCC, SMH, Sheriff's Office, Second Chance Last Opportunity, Sarasota County Schools, Samaritan Counseling, Safe Children Coalition, Riverview High School, Resilient Retreat, People's Family Counseling, Parenting Matters, Out of Door Academy, New College of Florida, Bayside Behavioral Healthcare, Operation Warrior Resolution, NP Integrative Health Care, Improving Lives Counseling Services, Manatee County Sheriff's Office, Hooves with Heart, Girls Inc., Gateway Rehab, Forty Carrots, First Step, Family and Children's Services, Early Learning Coalition, Children's Guardian Fund, Charles & Margery Barancik Foundation, Centerstone, CenterPlace Health, and Capital Hill Consortium. Additional agencies may have responded; however, some survey responses lacked an agency name, and therefore, they are not reflected in the agencies listed above.



The results of this survey will inform (1) the extent to which first responders/helping professionals experience compassion satisfaction and compassion fatigue, and (2) the impact of COVID-19 on first responders/helping professionals, and (3) the specific services related to the mind, body, and spirit that first responders/helping professionals believe would be helpful to them in dealing with work-related stress. Findings will be used to guide the efforts of Resilient Retreat, Inc. to address the impact of compassion fatigue and promote compassion satisfaction in first responders/helping professionals in our area.



Survey Data Report

1. Response Rate

First responders/helping professionals were invited to participate in a survey on compassion satisfaction, compassion fatigue (i.e., burnout and secondary traumatic stress), and specific services related to the mind, body, and spirit to help them deal with work-related stress.

180 first responders/helping professionals participated in the survey. Respondents could choose the questions they wished to answer and could exit the survey at any point. Accordingly, the number of responses presented in the following tables vary by question because some participants chose to skip some of the questions. However, most respondents completed the entire survey.

In Table 1, we present the response rate broken down by type of position. Non-profit agency staff had the highest response rate (30.6%) and Fire/EMS (2%) had the lowest response rate.

Table 1: Response Rate (N=180)				
	N	%		
Position				
Non-profit agency staff	55	30.6%		
Mental health professional	43	23.9%		
Law enforcement	29	16.1%		
Education staff (e.g., Teacher, Administrator)	25	13.9%		
Advocate	21	11.7%		
Human services professional (e.g., case manager)	19	10.6%		
Medical professional	15	8.3%		
Fire/EMS	2	1.1%		
Other (e.g., non-profit professional)	11	6.1%		
Non-Profit Staff				
Yes	109	62.6%		
No	62	35.6%		
Work Location				
Sarasota	91	52.3%		
Manatee	44	25.3%		
Other	39	22.4%		



2. Participant Demographic Information

In Table 2, we present demographic characteristics of participants. Survey respondents were most likely to identify as woman (78.3%). The average age of participants was 43.9 years old and most identified as White (84.7%).

Table 2: Participant Demographics (N=180)			
	N	%	
Gender Identity			
Woman	141	78.3%	
Man	35	19.4%	
Other	1	0.6%	
Age Range			
18-24	5	2.9%	
25-30	17	9.8%	
31-35	25	14.4%	
36-40	25	14.4%	
41-45	23	13.2%	
46-50	31	17.8%	
51-55	19	10.9%	
56-60	15	8.6%	
61-65	8	4.6%	
66-70	3	1.7%	
71+	3	1.7%	
Race			
White	149	84.7%	
Black or African American	11	6.3%	
Asian	3	1.7%	
American Indian or Alaska Native	1	0.6%	
Other	12	6.8%	



3. Reports of Compassion Satisfaction

Participants answered questions about their compassion satisfaction on a scale of 1 to 5 (1=never, 5=very often). Higher scores on this scale represent a greater satisfaction related to participants' ability to be an effective helper in their job.

In Table 3, we present the responses for each item of the compassion satisfaction measure. The majority of participants reported that they "sometimes" or "often" experience most of the compassion satisfaction items. An overall average score was calculated for compassion satisfaction (*M*=39.97). Average scores for compassion satisfaction are considered low if 22 or less, moderate if between 23 and 41, and high if 42 and above. Thus, the average score suggests first responders who participated in the survey rank as moderate on compassion satisfaction.

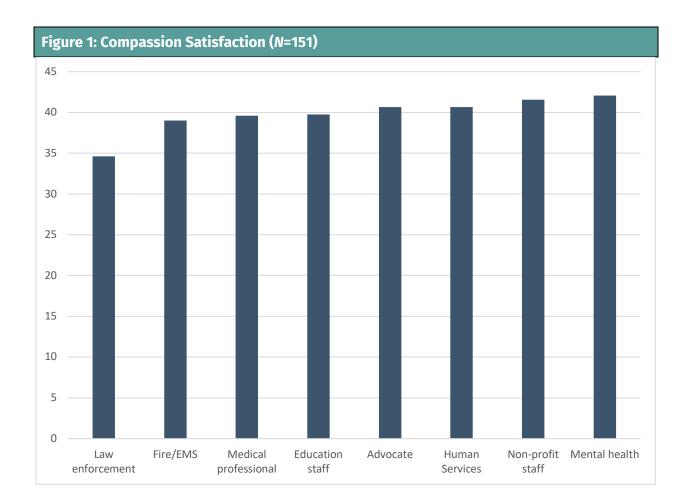
Overall, **49% of first responders/helping professionals reported high compassion satisfaction**.

Table 3: Compassion Satisfaction (N=151)					
	Never	Rarely	Sometimes	Often	Very Often
	N (%)	N (%)	N (%)	N (%)	N (%)
I get satisfaction from being able to help people	-	1 (0.7%)	20 (13.1%)	44 (28.8%)	88 (57.5%)
I feel invigorated after	1	19	56	52	25
working with those I help	(0.7%)	(12.4%)	(36.6%)	(34.0%)	(13.9%)
I like my work as a helper	-	2 (1.3%)	27 (17.8%)	61 (40.1%)	62 (40.8%)
I am pleased with how I am able to keep up with helping techniques and protocols	2 (1.35)	7 (4.6%)	43 (28.1%)	63 (41.2%)	38 (24.8%)
My work makes me feel	-	9	42	50	52
satisfied		(5.9%)	(27.5%)	(32.7%)	(34.0%)
I have happy thoughts and feelings about those I help and how I could help them	1 (0.7%)	2 (1.3%)	45 (29.4%)	68 (44.4%)	37 (24.2%)
I believe I can make a difference through my work	1	8	32	44	67
	(0.7%)	(5.3%)	(21.1%)	(28.9%)	(44.1%)
I am proud of what I can do	-	1	25	53	73
to help		(0.7%)	(16.4%)	(34.9%)	(48.0%)
I have thoughts that I am a	1	15	49	62	25
"success" as a helper	(0.7%)	(9.9%)	(32.2%)	(40.8%)	(16.4%)
I am happy that I chose to do	-	4	35	49	65
this work		(2.6%)	(22.9%)	(32.0%)	(42.5%)



3A. Comparison of Position for Compassion Satisfaction

An average score was created for compassion satisfaction for each type of position. In Figure 1, we present the average score for compassion satisfaction for each position. Advocates reported the highest levels of compassion satisfaction (*M*=43.6), while law enforcement reported the lowest (*M*=29). Mental health professionals ranked as <u>high</u> on compassion satisfaction (i.e., scores over 42) while law enforcement, fire/EMS, medical professional, education staff, advocate, human services, and non-profit staff ranked as <u>moderate</u> on compassion satisfaction (i.e., scores between 23 and 41).





4. Reports on Compassion Fatigue

Participants answered questions about their compassion fatigue on a scale of 1 to 5 (1=never, 5=very often). Compassion fatigue consists of 2 elements: Burnout and secondary traumatic stress. Higher scores on this scale mean that individuals are at higher risk for burnout or are reporting higher levels of traumatic stress symptoms.

In Table 4, we present the responses for each item of the compassion fatigue measures. The majority of participants reported that they "sometimes" or "often" experience most of the burnout items and "sometimes" or "rarely" experience the secondary traumatic stress items. Overall average scores were also calculated for burnout (*M* =23.64) and secondary traumatic stress (*M* =22.73). Average scores for burnout and secondary traumatic stress are considered low if 22 or less, moderate if between 23 and 41, and high if 42 and above. Thus, the average scores suggest first responders/helping professionals that responded to the survey ranked as <u>moderate</u> on burnout and <u>moderate</u> on secondary traumatic stress.

Overall, 43.3% of first responders/helping professionals reported moderate burnout and 39.4% of first responders/helping professionals reported moderate secondary traumatic stress. No first responders/helping professionals reported high burnout or secondary traumatic stress. **52.2% of first responders/helping professionals reported they are experiencing moderate burnout or secondary traumatic stress**, suggesting that roughly half of all first responders/helping professionals are currently experiencing compassion fatigue.

Table 4: Compassion Fatigue (N=167)					
	Never	Rarely	Sometimes	Often	Very Often
	N (%)				
Burnout					
I am happy*	-	2 (1.2%)	39 (23.5%)	87 (52.4%)	38 (22.9%)
I feel connected to others*	1	6	44	51	51
	(0.7%)	(3.9%)	(28.8%)	(33.3%)	(33.3%)
I am not as productive at work because I am losing sleep over traumatic experiences of a person I helped	44 (28.8%)	72 (47.1%)	33 (21.6%)	4 (2.6%)	-
I feel trapped by my job as a	67	35	33	11	7
helper	(43.8%)	(22.9%)	(21.6%)	(7.2%)	(4.6%)
I have beliefs that sustain me*	4	2	25	59	62
	(2.6%)	(1.3%)	(16.4%)	(38.8%)	(40.8%)
I am the person I always	1	15	41	63	33
wanted to be*	(0.7%)	(9.8%)	(26.8%)	(41.2%)	(21.6%)
I feel worn out because of my	7	24	71	33	18
work as a helper	(4.6%)	(15.7%)	(46.4%)	(21.6%)	(11.8%)

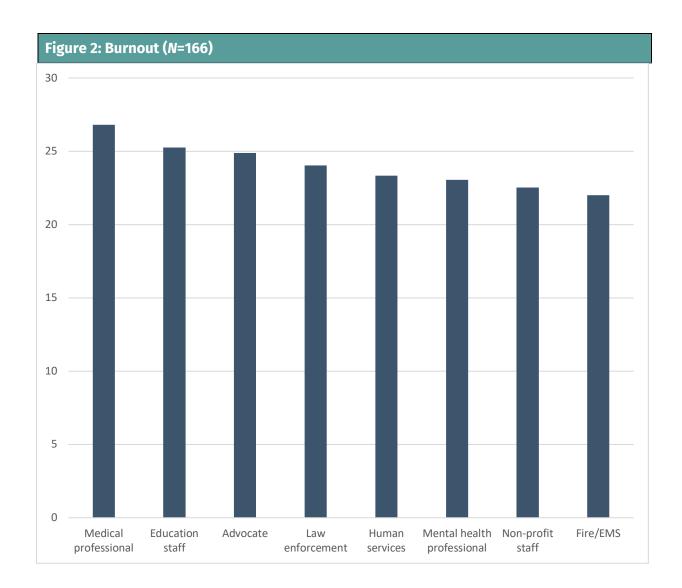
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Table 4: Compassion Fatigue (N=1	Never N (%)	Rarely N (%)	Sometimes N (%)	Often N (%)	Very Often N (%)
Burnout (Continued)					
I feel overwhelmed because my work load seems endless	11 (7.2%)	22 (14.5%)	61 (40.1%)	29 (19.1%)	29 (19.1%)
I feel "bogged down" by the system	11 (7.2%)	30 (19.6%)	61 (39.9%)	22 (14.4%)	29 (19.0%)
I am a very caring person*	-	2 (1.3%)	18 (11.8%)	63 (41.4%)	69 (45.4%)
Secondary Traumatic Stress					1
I am preoccupied with more than one person I help	2 (1.2%)	40 (24.0%)	79 (47.3%)	39 (23.4%)	7 (4.2%)
I jump or am startled by unexpected sounds	14 (9.2%)	61 (39.9%)	53 (34.6%)	18 (11.8%)	7 (4.6%)
I find it difficult to separate my personal life from my life as a helper	8 (5.3%)	55 (36.2%)	51 (33.6%)	22 (14.5%)	16 (10.5%)
I think that I might have been affected by the traumatic stress of those I help	28 (18.3%)	54 (35.3%)	49 (32.0%)	16 (10.5%)	6 (3.9%)
Because of my helping, I have felt "on edge" about various things	27 (17.8%)	45 (29.6%)	52 (34.2%)	18 (11.8%)	10 (6.6%)
I feel depressed because of the traumatic experiences of the people that I help	42 (27.5%)	57 (37.3%)	44 (28.8%)	8 (5.2%)	2 (1.3%)
I feel as though I am experiencing the trauma of someone I have helped	74 (48.4%)	49 (32.0%)	24 (15.7%)	5 (3.3%)	1 (0.7%)
I avoid certain activities or situations because they remind me of frightening experiences of the people I help	80 (52.6%)	45 (29.6%)	22 (14.5%)	5 (3.3%)	-
As a result of my helping, I have intrusive, frightening thoughts	76 (50.0%)	53 (34.9%)	14 (9.2%)	7 (4.6%)	2 (1.3%)
I can't recall important parts of my work with trauma victims	64 (42.1%)	53 (34.9%)	30 (19.7%)	5 (2.8%)	-

*Items are reverse scored, where a score of a 1 = a score of a 5. Scientifically, the measure works better when these questions are asked in a positive way though they can tell us more about their negative form.



4A. Comparison of Position for Burnout

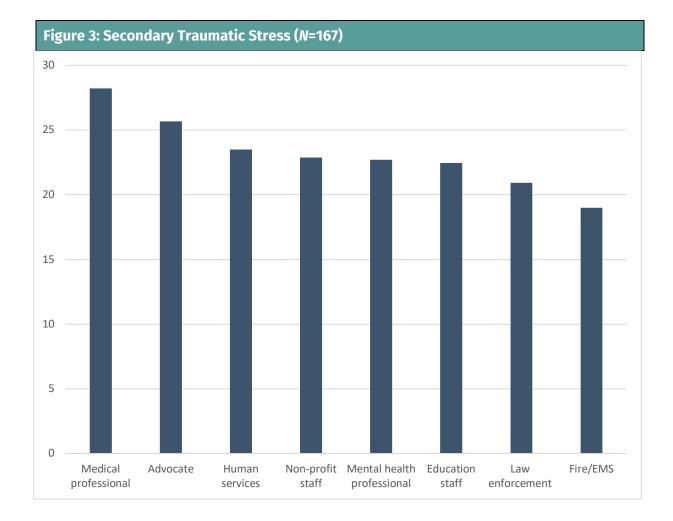
An average score was created for burnout for each type of position (e.g., advocate, fire fighter). In Figure 2, we present the average score for burnout for each position. Medical professionals reported the highest levels of burnout (*M*=26.8), while Fire/EMS reported the lowest (*M*=22). Fire/EMS ranked as <u>low</u> on burnout (i.e., scores 22 and below) while non-profit staff, mental health professional, human services, law enforcement, advocate, and education staff ranked as <u>moderate</u> on burnout (i.e., scores between 23 and 41).





4B. Comparison of Position for Secondary Traumatic Stress

An average score was created for secondary traumatic stress for each type of position. In Figure 3, we present the average score for secondary traumatic stress for each position. Medical professionals reported the highest levels of secondary traumatic stress (*M*=28.22), while Fire/EMS reported the lowest (*M*=19). Fire/EMS and law enforcement ranked as <u>low</u> (i.e. scores 22 and below) on secondary traumatic stress while education staff, mental health professionals, non-profit staff, human services, advocates, and medical professionals ranked as <u>moderate</u> on secondary traumatic stress (i.e., scores between 23 and 41).





5. Impact of COVID-19

Participants answered a series of questions about how COVID-19 has impacted their personal and professional lives. Participants also answered questions about services to help assist during the pandemic.

In Table 6, we present the responses for each of the questions. Since COVID, 49.3% of first responders/helping professionals reported their personal life has been harder and 65.5% reported their professional life has been harder. Roughly 19% of first responders/helping professionals are currently looking for services to cope with the stress of the pandemic.

Table 6: Impact of COVID-19 (N=148)					
Personal					
	Easier N (%)	About the Same N (%)	Harder N (%)		
Since COVID, my personal life has been:	6 (4.1%)	69 (46.6%)	73 (49.3%)		
How has COVID impacted your personal life? If so, how?*	 "I am fortunate that no one in my immediate family has gotten COVID. But members of my extended family have been very ill. It has just been hard. So many people are on edge, students are struggling, and it's all just a lot to handle. Plus not knowing when it will end is hard." "I had COVID. It was devastating, and the bosses at my work were cold and rude about it." "Death of friends , stress of fear and frustration with lack of flexibility respect and patience with others, feeling unappreciated or not recognized for front line services I provide daily burn out is real and this virus and constant pressure to provide and do more is unrelenting." "I have strengthened my beliefs, my core values and daily practices that make my family's life the best it can be." "Yes. Lost people I know, moved, adjustment, may have revved up some old traumas that went stagnant and undealt with." 				
Professional					
	Easier N (%)	About the Same N (%)	Harder N (%)		
Since COVID, doing my job has been:	3 (2.0%)	48 (32.4%)	97 (65.5%)		
How has COVID impacted your professional life? If so, how?*	 "I am a certified FL teacher, but with COVID, the stress was too much as a public school teacher. I realized it is more important for me and my family to be happy and healthy and a high stress career isn't worth dying over. Working at [local non-profit] offers me more opportunities to make a difference in children's lives, in mine and my daughters." 				



	 "Yes. I have felt like I couldn't take time off because people need me." "The best thing that came from COVID was the change to adding virtual options to attend many meetings which makes things easier." "It has pushed me to be more creative at finding ways to continue serving others." "Yes, it has created fear, sadness, and distance, but there has also been a sort of 'togetherness' and innovation." "It has made the typical helping roles more difficult, as people are more fearful of in-person experiences which is the primary modality in the roles I serve." 			
Services Needed				
	Yes N (%)	No N (%)	-	
Are you looking for services to help you personally or professionally through this pandemic?	34 (18.9%)	115 (63.9%)	-	
Do you have time to seek out services?	18 (10%)	16 (8.9%)	-	
	One Time Service N (%)	Short-term program N (%)	Long-term program N (%)	
Are you looking for a:	4 (2.2%)	8 (4.4%)	5 (2.8%)	

*Note: Due to space limitations, quotes were not provided from all of the 180 participants. Quotes were selected that represented common themes described by participants. Quotes from all 180 participants are available by request.



6. Reports on Services

Participants answered one question (i.e., *Would any of the following be helpful to you in dealing with stress related to your work?*) regarding specific services being helpful to them in dealing with work-related stress (0=no, 1=yes).

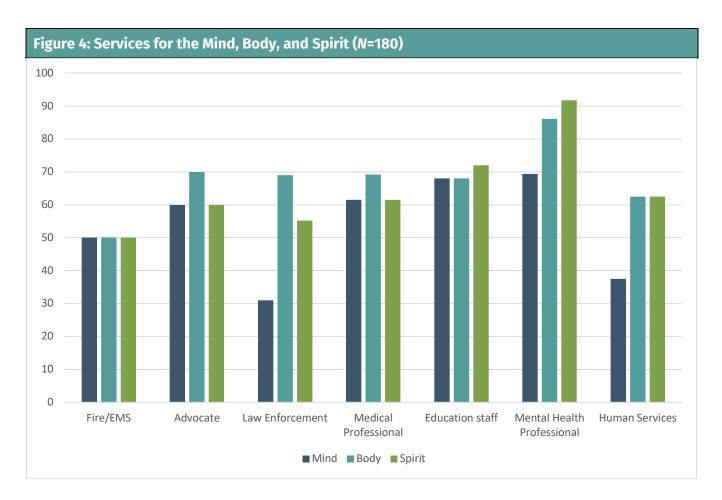
In Table 7, we present the responses for each item of the possible services, which is further broken down into mind, body, and spirit services. Overall, 56.7% were interested in services related to the mind, 71.1% in services related to the body, and 66.7% in services related to the spirit. Thus, the majority of first responders/helping professionals reported that body and spirit services would be most helpful to them in dealing with work-related stress.

Table 7: Services Related to the Mind, Body, and Spirit (<i>N</i> =180)			
	Interested N (%)		
Mind			
Mindfulness exercises	69 (38.3%)		
Neurofeedback	40 (22.2%)		
Support Services (e.g., counseling, a kind listening ear)	52 (28.9%)		
Therapy with horses	39 (21.7%)		
Therapy dog	38 (21.1%)		
Support groups	41 (22.8%)		
Body			
Massage	106 (58.9%)		
Exercise classes	74 (41.1%)		
Nutrition cooking	60 (33.3%)		
Classes on good sleep practices	26 (14.4%)		
Classes on the impact of stress on the body	31 (17.2%)		
Spirit			
Experiences in nature	82 (45.6%)		
Music	61 (33.9%)		
Meditation	50 (27.8%)		
Yoga	57 (31.7%)		
Art	51 (28.3%)		
Gardening	45 (25.0%)		
Faith	47 (26.1%)		



6A. Comparison of Position for Services

Percentages were calculated for each of the categories of services (i.e., mind, body, and spirit) for each type of position. In Figure 4, we present the percentage of people interested in each type of service category for each position. Overall, most positions reported that services related to the body would be most helpful and services related to the mind would be least helpful.





The report findings illustrate the importance of providing services to first responders/helping professionals who experience compassion fatigue (i.e., burnout and secondary traumatic stress). The results will inform Resilient Retreat, Inc. about:

- 1. The extent to which first responders/helping professionals experience compassion satisfaction and compassion fatigue. Roughly 50% of first responders are experiencing moderate to severe burnout and/or secondary traumatic stress.
- 2. The extent to which the COVID-19 pandemic has impacted the well-being of our first responders/helping professionals. The results suggested that 65.5% of professionals reported their job has gotten harder since COVID-19.
- 3. The specific services related to the mind, body, and spirit that first responders believe would be helpful to them in dealing with work-related stress.
- 4. Future ways Resilient Retreat, Inc. may address the impact of compassion fatigue on first responders/helping professionals in our community.

The present study had several limitations. First, the present study only assessed compassion fatigue, burnout, and secondary traumatic stress from 180 first responders/helping professionals. Second, the data was particularly sparse from Fire/EMS. Future research should continue reaching out to first responders/helping professionals to better understand their unique challenges and needs, especially the unique challenges presented with COVID-19.

We welcome any questions or comments regarding this report. Please contact Sidney Turner, Ph.D., (<u>Sturner@resilientretreat.org</u>) with your feedback.



References

Hudnall Stamm, B. (2009-2012). Professional Quality of Life: Compassion Satisfaction and Fatigue Version 5 (ProQOL). Retrieved from The Center for Victims of Torture: <u>www.proqol.org</u>.