Caring for Our Spirits as Professionals: Using Narrative and Group Support to Reduce Job Stress, Compassion Fatigue, and Burnout: An Example from Oncology Professionals

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16th Annual Spirituality Research Symposium

University of Pennsylvania

Outline for Talk

- A Culture of Wellness and a Community of Support

- Motivation for Research

- Background: Stress, Job Stress, Compassion Fatigue/Secondary Traumatic Stress, Vicarious Traumatization and Burnout

- Distress & Oncology: The expectation for Empathy and Connection

- Theoretical Framework

- Study and Results

- Next Steps

- "As part of their [professional] training [healthcare staff] are taught to ignore their own needs," says Daniel Shapiro. "No one teaches them how to protect themselves or mourn their patients. I treat the whole system--if the [professionals] are in better shape, the patients will be in better shape" (Chamberlain, 1999)

- Chronic & Toxic Stress
- Job Stress
- Compassion Fatigue/Secondary Traumatic Stress (CF/STS)--used interchangeably (Figley, 1995)
- Distinction between CF/STS and VT
- Burnout (BO)
- Job Satisfaction

What is Stress?

Stress has both external and internal and effects our minds, bodies and behaviors—can be negative, positive or both
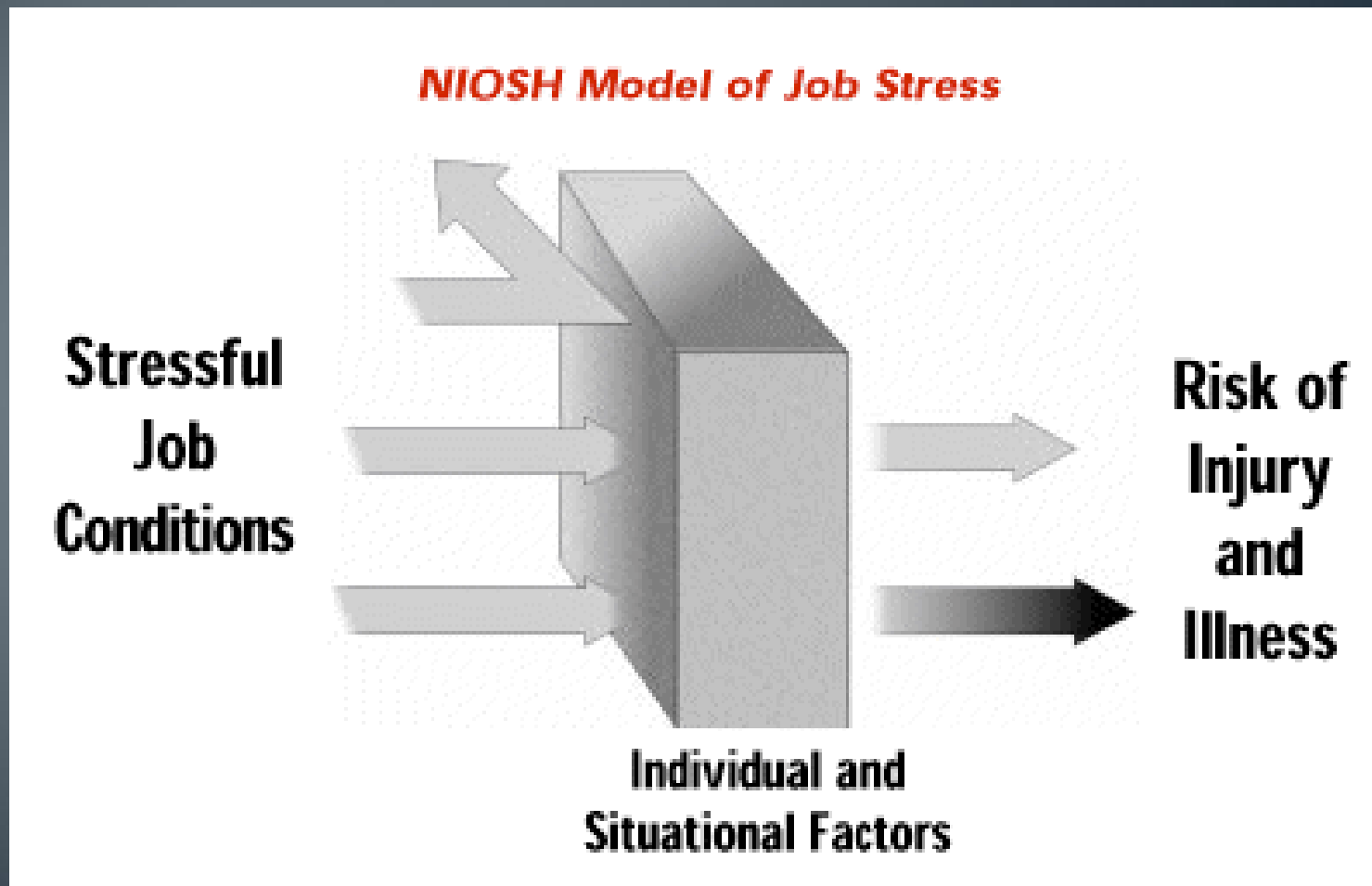
Stress response

Chronic stress

Toxic Stress

NIOSH MODEL OF JOB STRESS

NIOSH Model of Job Stress

Stressful Job Conditions

Individual and Situational Factors

Risk of Injury and Illness

Job Stress (JSTR)

- **Factors Unique to the job**
- **Worker's role in the organization**
- **Career development**
- **Interpersonal relationships**
- **Organizational structu** **and climate**

Compassion Fatigue/secondary traumatic stress (CF)/(STS)

- Figley (1995) described STS as "the natural and consequent behaviors and emotions resulting from knowing about a traumatizing event experienced by a significant other—the stress resulting from helping or wanting to help a traumatized or suffering person" (p.7).

- Figley (1995, 1996, 2002) later coined the term compassion fatigue (used interchangeably with STS).

- "cost of caring"

- shift in the professional helper's sense of hope and optimism

Distinction between VT and CF/STS

• Vicarious Traumatization (VT)—"cumulative transformation of the inner experience of the [healthcare professional] that comes about as a result of empathic engagement with the client's traumatic material. (Pearlman & Saakvitne, 1995, p.31).

• Bride et al. (2007) and Stamm (1999) described distinctions between VT, STS and CF

Burnout

Originated Freudenberger, "state of mental and physical exhaustion caused by one's professional life."

Maslach and Jackson (1981, p. 99) defined burnout as, "a syndrome of emotional exhaustion and cynicism that occurs frequently among individuals who do people-work of some kind."

Signs and Symptoms of Chronic Stress and Burnout

What are the effects of Chronic Job Stress and Burnout?

- Fatigue & low energy
- physical and emotional exhaustion
- Headaches/migraines
- backaches
- GI disturbance
- weight loss/weight gain
- Infections
- cancers

- low morale and job dissatisfaction
- job turnover
- poor judgment/indecisiveness
- technical errors or mistakes (documentation, medications)
- Feelings of hopelessness and disempowerment
- not wanting to spend time with patients
- inability to leave work—your work just expands
- Unexplained absences, poor performance

- Negative outlooks (work and personal life)
- Inability to express sympathy/empathy towards patients or colleagues
- depression
- Excessive mistakes (documentation, medication,
- Sick leave/workers compensation claims
- Substance and alcohol abuse
- Becoming detached from colleagues
- Aggressive behavior towards colleagues as well as patients

Burnout across disciplines

- 14% of nurses intend to leave the profession (Aiken et al., 2012; BMJ)

- >1/3 of RNs reported job-related burnout; Reduction of burned-out nurses to 10% from the typical 30 % =prevention of 2 most common HAIs and save the state of PA $41 million. (Cimiotti, Aiken, Sloane, & Wu, 2012)

- improving hospital work environments could be an affordable strategy to improve patient outcomes and retain qualified nurses (Aiken et al., 2012; BMJ)

Burnout across disciplines

- **45.8% of physicians reported at least 1 symptom of burnout** (Shanafelt et al., 2012)

- 48% of social work workforce experience distress due to their work (Strozier & Evans, 1998) and

- Kim, Ji & Kao, (2011) showed a **correlation between reported burnout and physical health problems in social workers**

Retention and Turnover:

- According to PriceWaterHouseCoopers (PWC) Saratoga Institute (2006),

"Organizations that overlook the proven advantages of detailed and frequent measurement around the cost of retaining, and losing valuable employees…are allowing dollars to slip away instead of adding them to the bottom line."

Distress is an unpleasant experience of an emotional, psychological, social or spiritual nature that interferes with the ability to cope with cancer treatment. It extends along a continuum, from common normal feelings of vulnerability, sadness, and fears, to problems that are disabling such as true depression, anxiety, panic and feeling isolated or in a spiritual crisis (NCCN, 1999).

Patient/Client distress (in this case inpatient oncology)

Those we serve become a part of us:

- Milton Erickson used to say to his patients, "My voice will go with you." His voice did. What he did <u>not</u> say was that our clients' voices can also go with us. Their stories become part of us—part of our daily lives and our nightly dreams. Not all stories are negative-indeed, a good many are inspiring. The point is that they change us (Mahoney, 2003, p. 197).

Vulnerability and Empathy

Brief Background and Conceptual Framework

- Illness narratives

Narrative therapy

- Telling
- Deconstruction
- Externalization
- Reconstruction

Narrative Medicine Movements:(Charon, 2006)

- Attention

- Representation

- Affiliation

Neuroscience Research of Empathy and Stress

- Reintegration of disruptions that occur between affect and cognition
- Disrupted when stressed
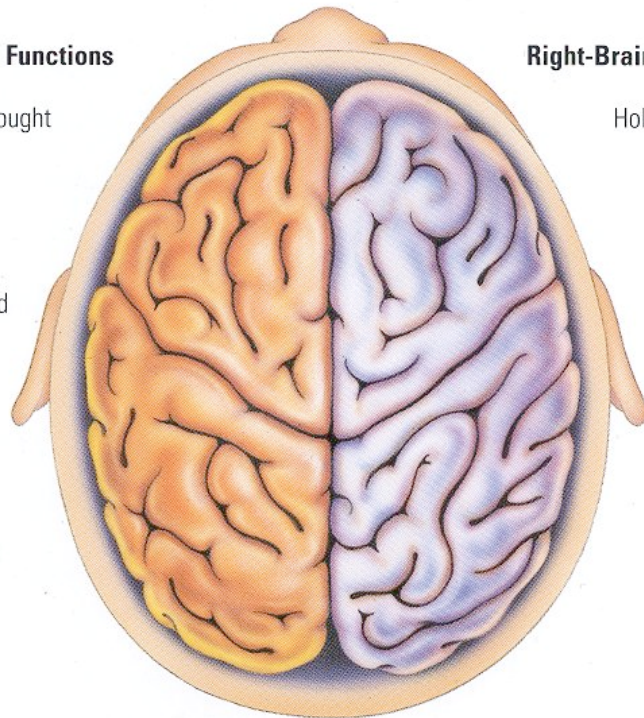

Left and Right Brain Functions

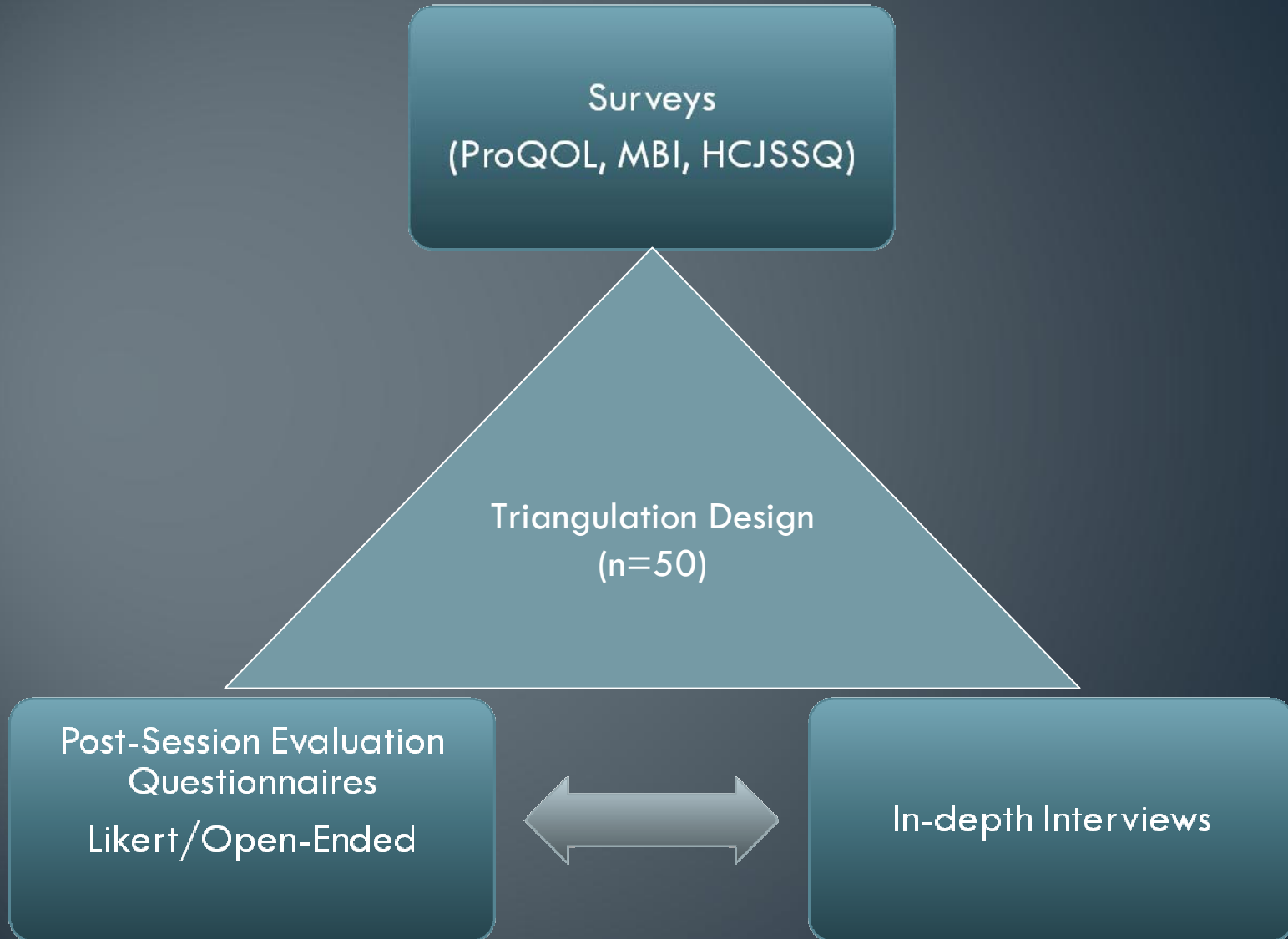| Left-Brain Functions	Right-Brain Functions
Analytic thought	Holistic thought
Logic	Intuition
Language	Creativity
Science and math	Art and music

Optimal levels of health are associated with integration

(Cozolino, 2002; Restak, 2004; Schore, 2003; Siegel, 1999)

Fatigue/Secondary Traumatic Stress and Burnout in Oncology Professionals

- **Target Population for Study**
- Research studied implementation of Intervention over four month period-1 session per month

Mixed-Methods:

Surveys
(ProQOL, MBI, HCJSSQ)

Triangulation Design
(n=50)

Post-Session Evaluation
Questionnaires
Likert/Open-Ended

In-depth Interviews

The Narrative Sessions (NS):

- Food was provided—need to nourish body and soul/spirit
- Paper and writing implement
- Facilitator
- Advertisement
- Leadership buy-in

Writing Prompt:

Title	6/16/13 11:38 AM
	Created

"Write about an especially stressful or challenging or distressing encounter with a patient, family member or colleague—or, alternatively, one that was unusually inspiring or uplifting.

Section 1

Section 2

Section 3

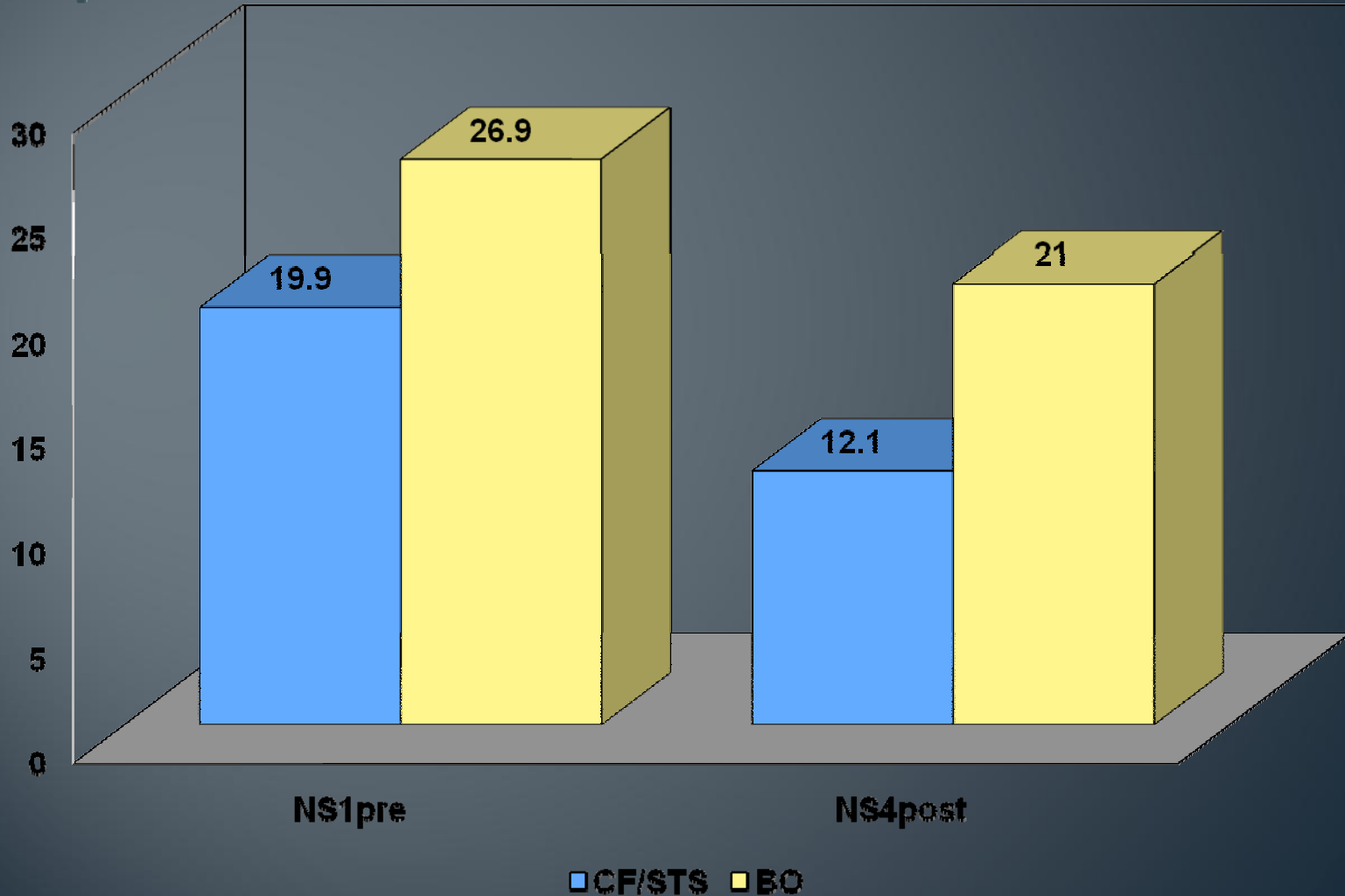# Narrative Session One pretest and Follow-up Narrative Session Four (n=50)

| Dependent Variable	Normative Mean		Sample Mean	
ProQOL			NS1 pre	NS4 post
Compassion satisfaction	37.0 (SD=7.0)		34.7 (SD=6.7)	40.3 (SD=8.9)
Burnout	22.0 (SD=6.0)		26.9 (SD=6.1)	21.0 (SD=4.9)
Compassion fatigue/STS	13.0 (SD=6.0)		19.9 (SD=7.3)	12.1 (SD=4.2)
MBI-HSS				
Emotional exhaustion	21.4 (SD=10.5)		35.4 (SD=7.6)	21.6 (SD=8.1)
Depersonalization	7.5 (SD=5.1)		12.1 (SD=5.2)	7.1 (SD=5.3)
Personal accomplishment	32.8 (SD=7.7)		34.7 (SD=5.5)	37.0 (SD=9.5)
HCJSSQ	Normative Mean	Possible Range		
* Job stress score calc	NR	(0-105)	39.4 (SD=17.4)	28.0 (SD=6.6)
** Overall perceived job stress	NR	(0-4)	3.3 (SD=.83)	2.7 (SD=.95)
* Job satisfaction calc	NR	(0-66)	38.0 (SD=8.5)	42.7 (SD=13.0)
** Overall perceived job satisfaction	NR	(0-4)	2.9 (SD=.83)	3.7 (SD=.49)
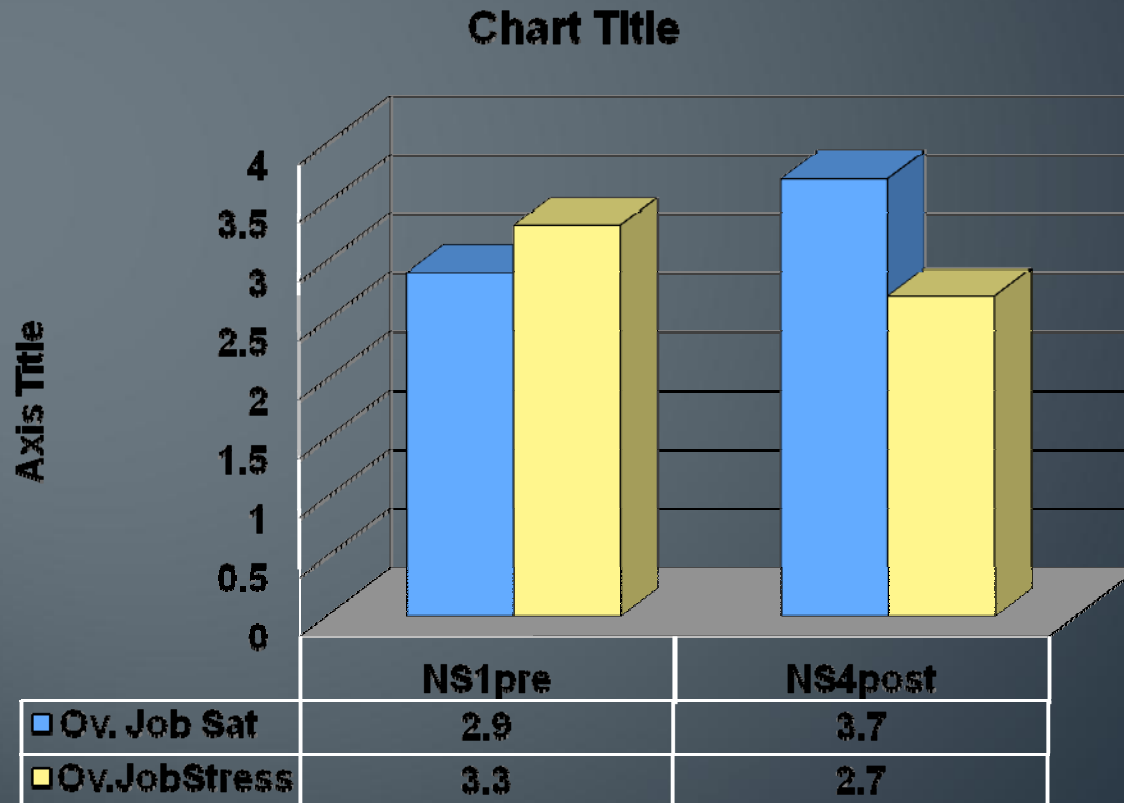
ProQOL: NS1pre to NS4post
n=50
Burnout p=.041
CF/STS p=.017
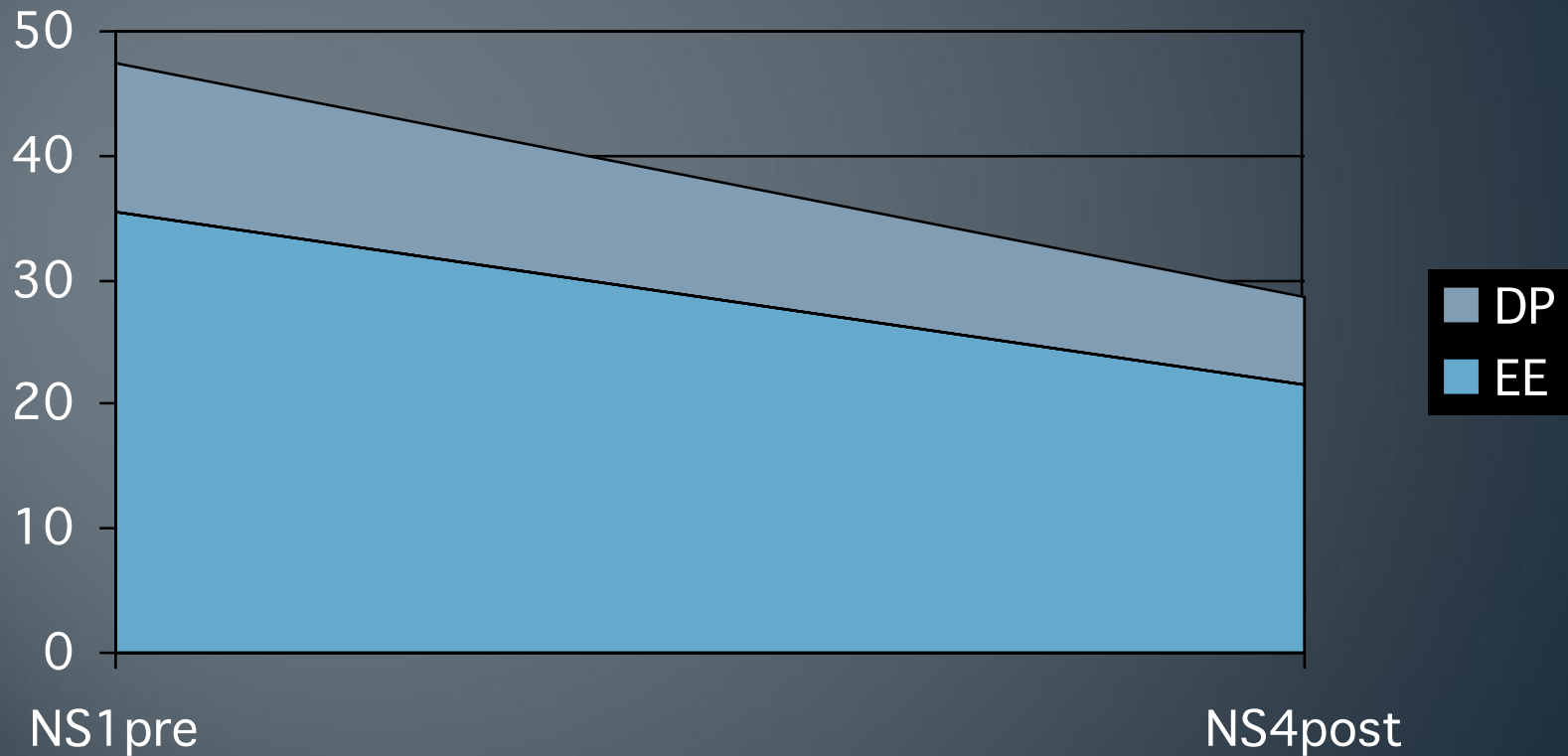
Narrative Post-Session Evaluation Data:
1=definitely disagree; 5=definitely agree

	N	Minimum	Maximum	Mean	Std. Deviation
Narrative exchange was beneficial to well-being/resiliency	50	2	5	4.74	.600
Narrative experience helped ease my mind	50	1	5	4.56	.760
After narrative I feel better equipped to face…	50	3	5	4.52	.614

Narrative Post-Session Evaluation Data:

3 Post-session Questions
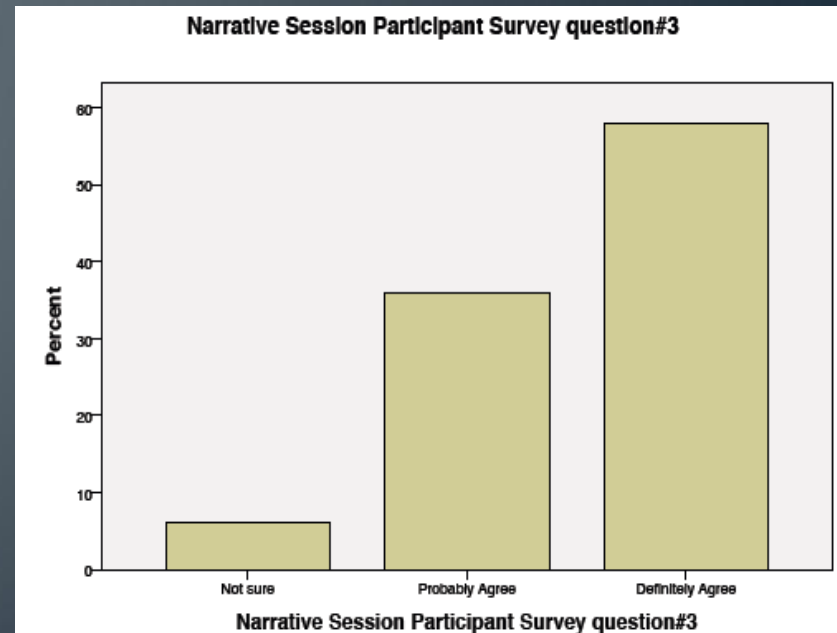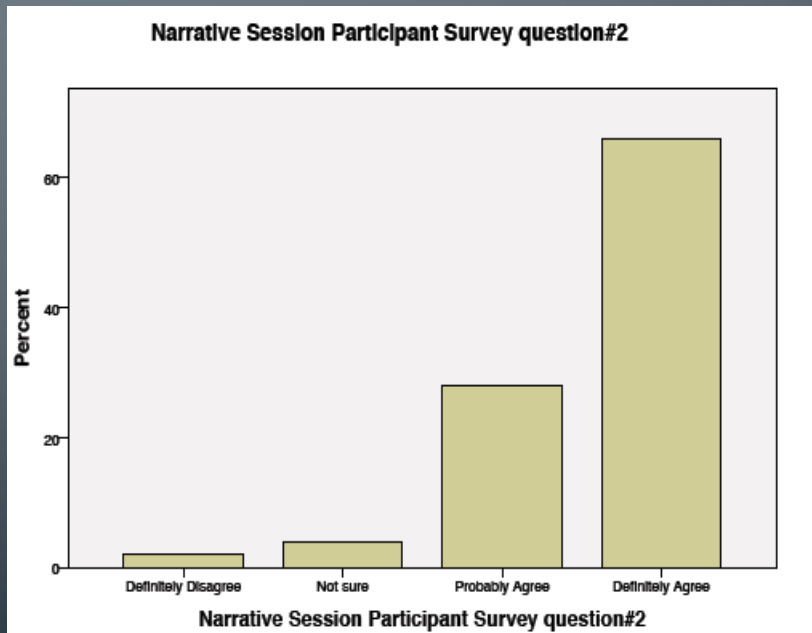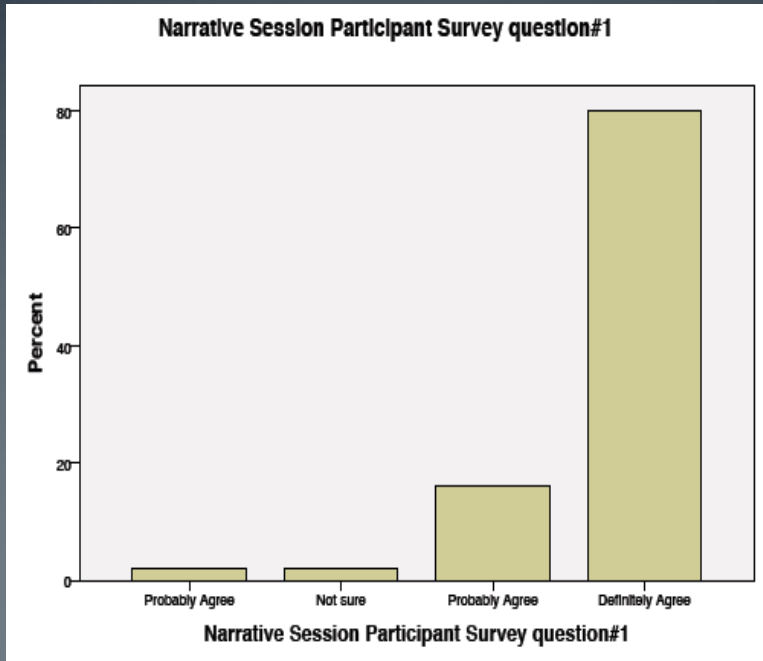
Qualitative Thematic Findings

- **Category 1: Patient Care**
  - *Theme 1: The Balancing Process: Emotional Proximity-Distance, Self-Protection and Closure*
    - *Gallows Humor*
    - *Exhaustion*
    - *Need for Closure*
  - *Theme 2: Stressors and Laborious Work: Desire for Intimate Emotional Connections and Guilt*
    - *Occupational Stressors*
  - *Theme 3: Burden and Privilege of Care*
    - *Reality of Mortality*

Representative Quote of the manifestation of stress:

- *Zora Neale Hurston, Oncology Nurse*

- it has gotten to the point where I have been really stressed out. Not so much to the point where I don't care anymore, but to the point where I feel like I'm kind of neglecting [patients] because I feel like I'm just going in, doing my assessment, doing the tasks I need to do, but not really getting time to actually sit down and talk to them to figure out how they're feeling.

Desire for emotional proximity and Job Stress; the need for closure

- *Anne Frank, Oncology Nurse*

- I'm always …shov[ing] [emotions about death of patient] down because here comes the next admission. Literally, somebody dies and you literally [get a call]— from the admissions department…

Representative quotes about job stress:

- *Virginia Woolf, Oncology Nurse said,*

- I think this environment is toxic, and …exhausting…you can't even eat lunch…We have nurses that it's 2:00. They haven't even gone to the bathroom… promoted this culture where I think it's acceptable to do five things at once, meaning I might be in a room with sterile gloves doing a sterile dressing change, and the secretary will be overhead paging me…and an administrator will be looking for me…

- …it's constant…if I'm the nurse caring for four patients and all four call bells are on, there's only one of me. There's four of them. So then, we push our stress to the nursing assistants and we say, "You guys split the floor. You have 16 patients..." They can't possibly answer all those bells. They can't possibly. So then, what you see is tension arise between the RNs and the CNAs… They cannot possibly be drawing up beds and doing math in their head at the same time that they're answering a phone … we want the nurses on rounds with the physicians…there's six medical teams… Plus, [nurses] are trying to hang meds…it's a crazy environment.

Qualitative Thematic Findings (continued)

Category 2: Impressions of Narrative Exchange

- *Theme 4: Affiliation, Standing on Common Ground and Meaning Making: Shared Perspectives and Bearing Witness within Narrative Exchange*
  - *Need for voice*
  - *Eulogizing*
- *Theme 5: Comfort in Confidentiality and a Safe-Space within Narrative Exchange*
- *Theme 6: Group-Care becomes Self-Care*

- *The Narrative Process:*
  - *Writing Gives Structure*
  - *Facilitator*
  - *Not therapy but supportive*
  - *Addressing Criticism (quote from participant)*

Need for Affiliation and Bearing Witness

- *"Sometimes if you're by yourself you have to lock it away somewhere. But in these sessions, you can be weak and be vulnerable and let everything out. It's a huge catharsis …You still have that with you but you feel like other people are going through it too, so it's okay, and it's something to be expected."—Maya Angelou, Oncology Nurse*

Representative Quotes of shared perspectives and finding common ground:

- *Charlotte Brontë, Oncology Social Worker*
- I feel like [the narrative sessions] humanize people and it's not just somebody in a white coat it's somebody who…has these fears about death and dying …it's finding a common ground… There's some…feeling of, 'oh well they're going through it too'… It's also a way of finding meaning because of what we do and hearing why other people do it.

- *Jane Austen, Oncology Nurse*
- These narrative sessions are so amazing because you hear from people who are doing the same thing you are doing and you see that you're all human, of course we would react like this.

Quote addressing criticism and the need for voice

Emily Brontë, Oncology Nurse,

I could see how you'd be thinking that it would be concerning. But I still think it's a great thing to do because even though you do churn up a lot of emotion, better you churn up that emotion than you burn—I think people burn out when they don't have any voice…it felt good to have a voice.

Representative quote on how group can be form of self-care:

- *Mary Shelley, Oncology Social Worker*
- I remember after two of the sessions especially after writing it and then sharing it—it felt just good to have it out and it was a way of processing [emotions about a situation] where if I hadn't necessarily processed it would kind of just be festering inside of me.

Representative Quote about Writing giving structure:

- *Barbara Ehrenreich, Oncology Nurse,*

- "Even as I am speaking now, it's very disjointed and my emotions come in. But the writing was neat because we had a time limit and you had to make it concise…writing it makes you really reach down, pick a few key things, get them out and then you're able to deal with those things as opposed to th[ese] overwhelming… emotion[s], but when you write, I think in a short time it's the most effective way because when you have to read it you're only dealing with those specific things in that one narrative."

How do we care for our spirits as professionals and cultivate a culture of wellness and community of support?

- Awareness of risks and costs of not caring for our spirits
- Cost-effective group support
- Incorporate everyone's voices—attend, represent and affiliate
- Narrative, journaling, other artistic mediums
- Incorporate professional development
- Food/snacks strongly encouraged
- Self-care and group care

Study Limitations and Next Steps:

- Quasi-experimental
- Small sample

- Larger sample, multi-site
- RCT/control group
- Patient satisfaction
- Patient care
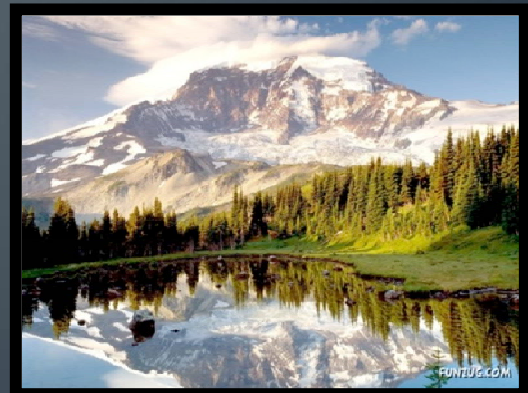
Final Thoughts

- Thank you!!

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- *Stock Photos taken from various sites and blogs on the internet.*