

# Improving Compassion Satisfaction and Understanding Compassion Fatigue Among Academic Advisors

Joshua D. Morrison

Presented at the 2013 Illinois State University Academic  
Advising Conference, July 8, 2013

# Agenda

- Introduction
- What is Compassion Fatigue (CF) and Compassion Satisfaction (CS)?
- Previous Data/Results
- Illinois State Data Analysis
  
- Break

# Agenda

- Small Group Dialogue
- Action Plans
- Reducing Compassion Fatigue
- Increasing Compassion Satisfaction
- Questions & Answers

# Formal Definition

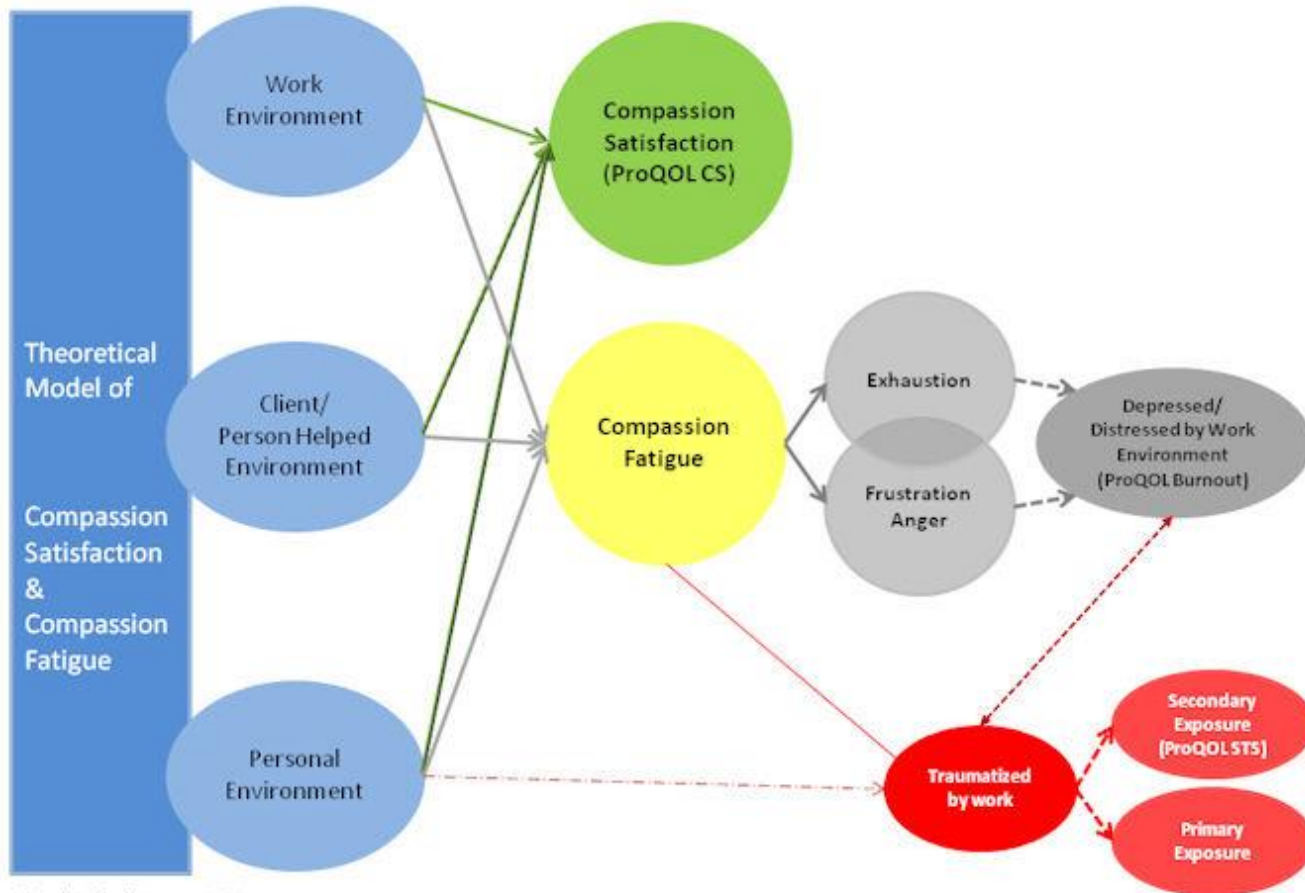
Compassion Fatigue: formal caregiver's reduced capacity or interest in being empathetic of "bearing the suffering of clients" and is "the natural consequent behaviors and emotions resulting from knowing about a traumatizing event experienced or suffered by another person" (Figley, 1995, p. 7)

# Definition in Advising

Huebner (2011) noted that academic advisors are “academic caregivers”

As such, academic advisors may experience compassion fatigue as a result of their interactions with traumatized students – those students experiencing challenging, unexpected, or personally disturbing life events

# Compassion Fatigue Model

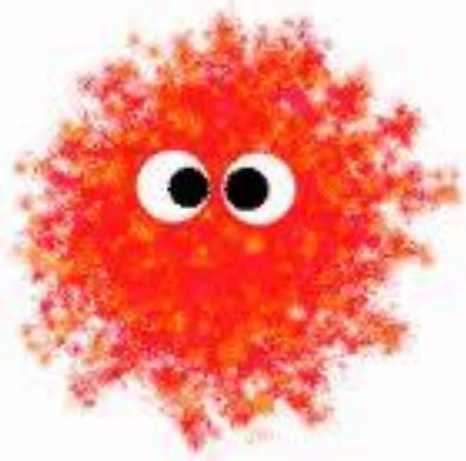


# Compassion Satisfaction & Fatigue

- Compassion Satisfaction
  - Positive aspects of working as a helper
- Compassion Fatigue
  - Negative aspects of working as a helper
    - Burnout
    - Inefficacy and feeling overwhelmed
    - Work-related traumatic stress
      - Primary traumatic stress direct target of event
      - Secondary traumatic exposure to event due to a relationship with the primary person

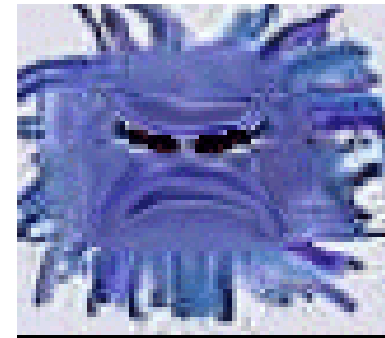
# In Summary, then . . .

**Compassion  
Satisfaction**



**The warm fuzzy**

**Compassion  
Fatigue**



**The cold prickly**



# Symptoms of CF

## Individual Symptoms

- Mentally and physically tired
- Apathy, sadness, decreased satisfaction
- Excessive complaining
- Difficulty concentrating

## Organizational Symptoms

- High absenteeism
- Poor teamwork
- Impaired performance
- Outbreaks of aggression among staff
- Negativity towards management

# Research Study

- Principal Investigator: Shobha Pais, PhD, of the Indiana University School of Medicine
- Co-Principal Investigator: Joshua Morrison, IUPUI School of Science
- Questions
  - To what extent do academic advisors experience CS and CF? We also examined general levels of stress.
  - Do these experiences vary by sex, years experience, or workload?

# Research Study

- Used two instruments
  - ProQOL: Professional Quality of Life, Version 5, adapted for use by academic advisors (Stamm, 2010)
  - Index of Clinical Stress (Abel, 1991)
- Collection of scores for: CS, Burnout, Secondary Traumatic Stress, General Stress
- Utilized ANOVA in SAS
  - Demographic/Environmental variables: IV
  - Scores on CS, Burnout, STS, Stress: DV

# Participants

- 21 Full-time academic advisors at a large, urban university in the US Midwest
- 16 women, 5 men
- Average Experience: 6 years
- Average Advisee Contacts/Week: 89

# Descriptive Results

		Mean	Mean	
	N	Years Advising	Advisees / Week	
<b>Women</b>	<b>16</b>	<b>6.31</b>	<b>92.81</b>	
<b>Men</b>	<b>5</b>	<b>4.9</b>	<b>76</b>	
<b>Total</b>	<b>21</b>	<b>5.98</b>	<b>88.81</b>	
	Mean	Mean	Mean	Analysis
	Burnout	Secondary Traumatic Stress	Compassion Satisfaction	
<b>Women</b>	<b>25.875</b>	<b>20.19</b>	<b>37.65</b>	High: 42+
<b>Men</b>	<b>23.4</b>	<b>18.6</b>	<b>38.8</b>	Average: 23-41
<b>Average</b>	<b>25.29</b>	<b>19.81</b>	<b>37.9</b>	Low: 22 and below

# Results: Sex

- One-way ANOVA indicated no significant differences in CS, Burnout, Stress, or Secondary Traumatic Stress by sex

# Results: Years Advising

- One-way ANOVA (<5 years, 5+ years) resulted in
  - No significant difference in CS, Stress, or Secondary Traumatic Stress
  - Significant difference in Burnout
    - Advisors with <5 years experience reported higher levels of burnout ( $p=.0281$ )
  - Stress ( $p=.0517$ ), nearly significant
  - Consistent with research that <5 years experience, greatest likelihood of burnout

# Results: Advisees

- One-way ANOVA for number of advisees/week (<100, 100+) yielded:
  - No significant differences in CS, Burnout, Stress
  - Significant difference ( $p=.0111$ ) in Secondary Traumatic Stress
    - Those with higher advising loads reported higher levels of STS

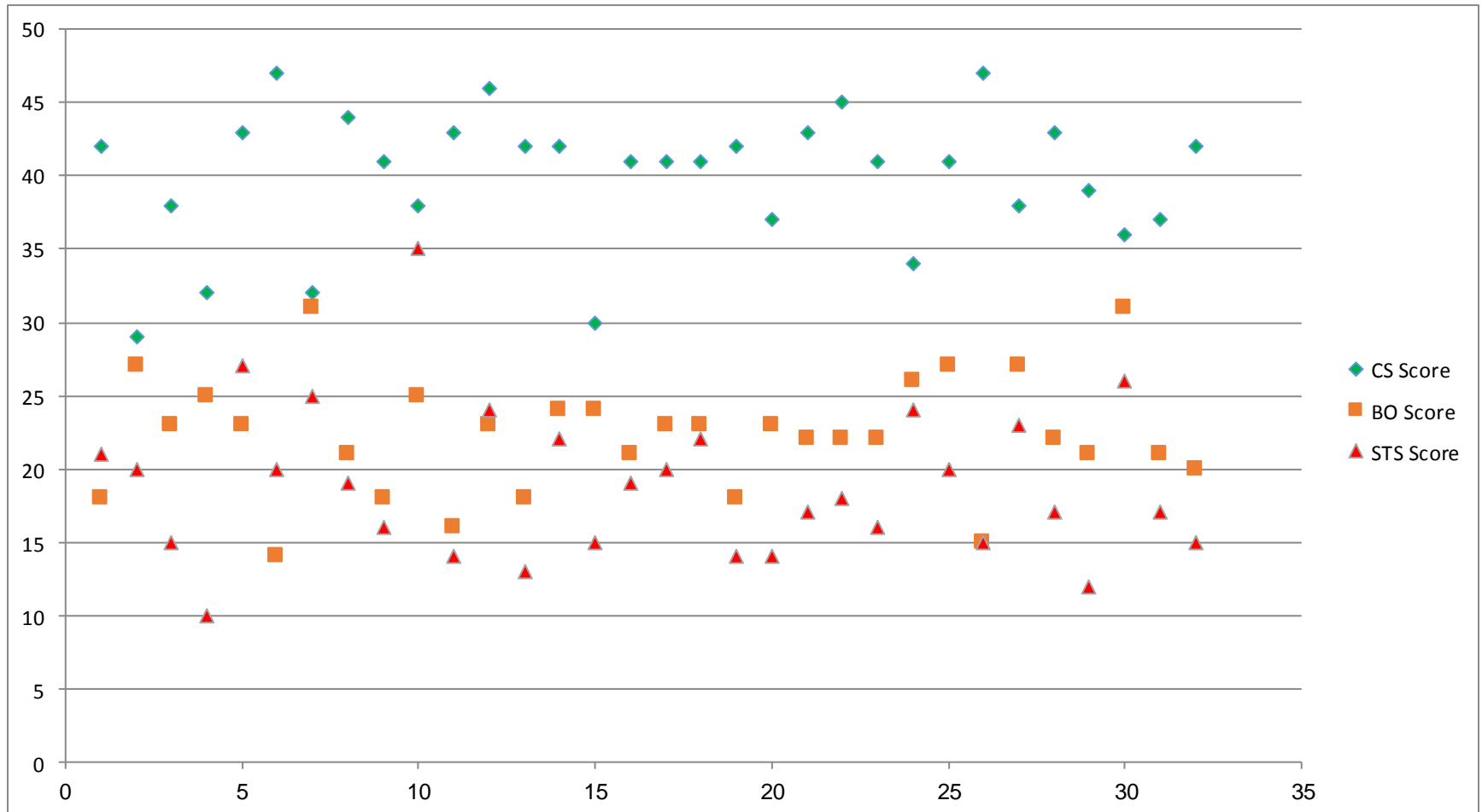


# Illinois State Data Analysis

32 Respondents to the Professional Quality of Life Scale (ProQOL), version V, revised for advisors

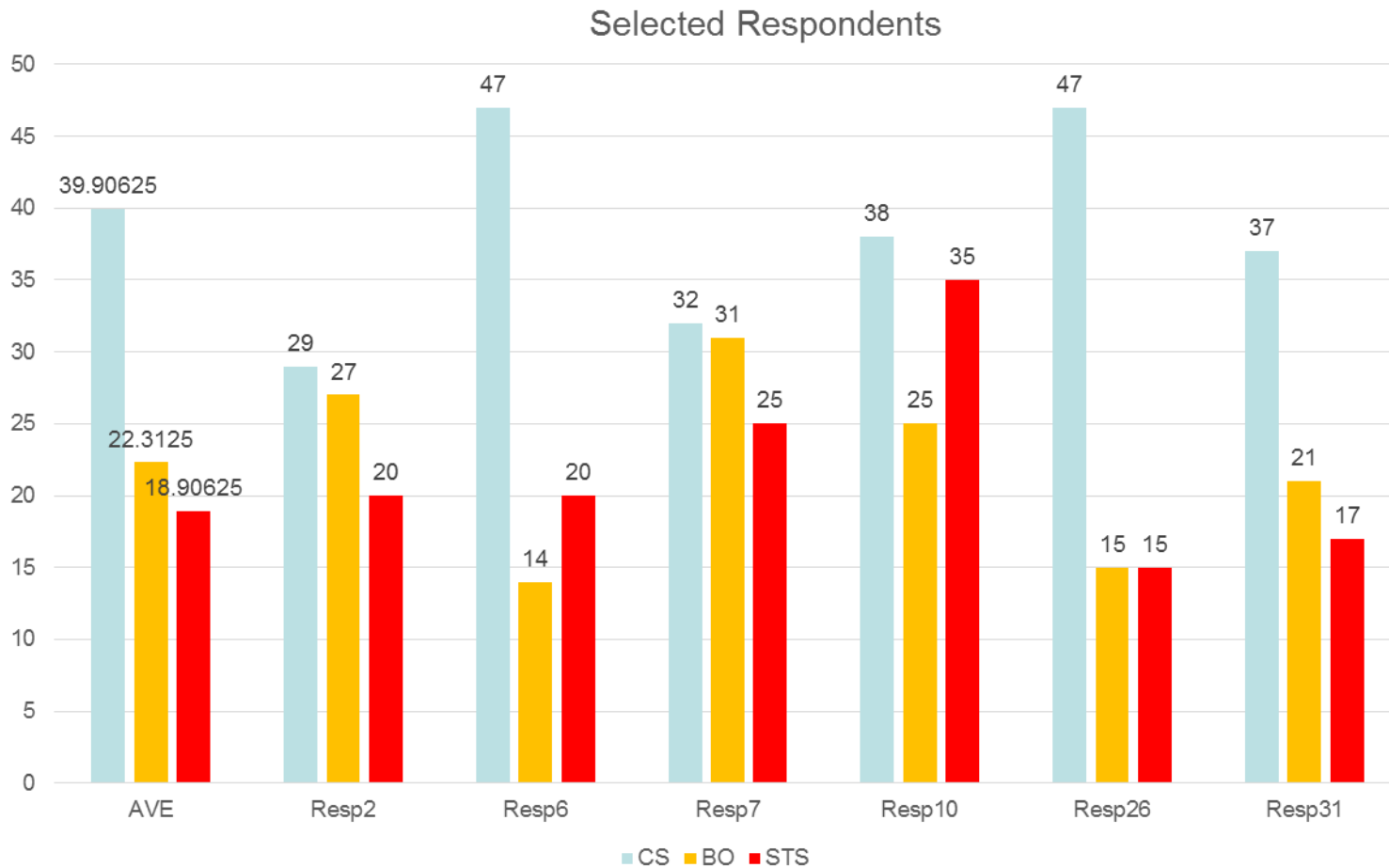
No data collection on respondent characteristics such as gender, age, years experience, type of advising unit, workload

# Illinois State Data Analysis



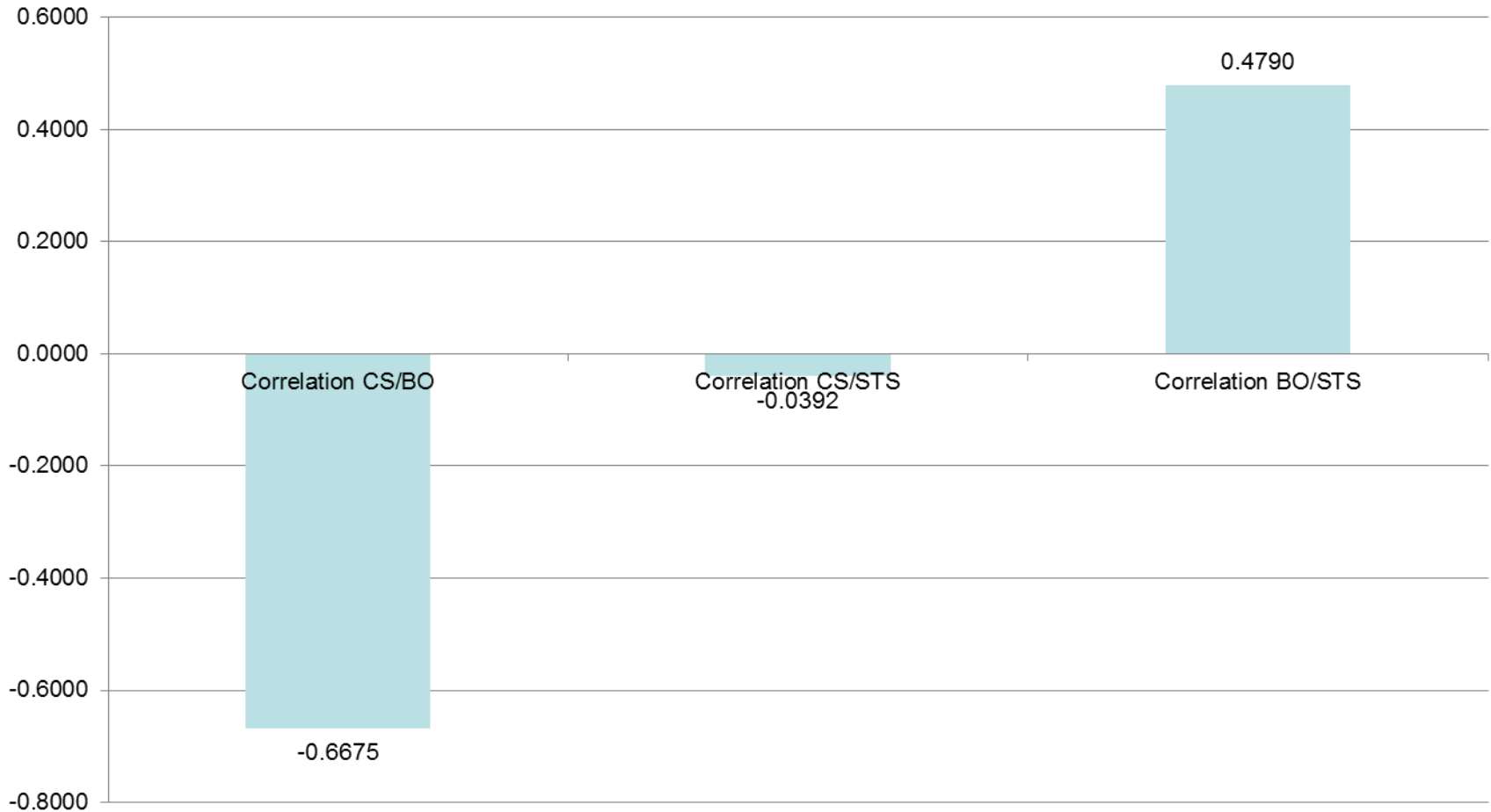
Raw scores by respondent. Note clusters of BO, STS.

# Illinois State Data Analysis



Six selected respondent scores.

# Illinois State Data Analysis



Correlation of ProQOL scores among respondents.

# Discussion

- Results indicate that the level of Burnout among advisors is something to watch.
  - Burnout more prevalent in less experienced advisors
- Secondary Traumatic Stress is generally low.
  - Higher in advisors who see more students
- Compassion Satisfaction generally high
  - CS does not mitigate CF

# Summary & Conclusions

- Results indicate that advisors experience CS, Stress, STS, and Burnout differently
- Limitations of the study include the number of participants; distribution of dependent variables
  - ILSTU: No IVs collected
- National studies needed on the prevalence and on how advisors cope with CF

# What Now?

Advisors and Advising Administrators must know the signs and symptoms of CF. Staff must hold each other accountable and speak up to ensure a positive working environment where everyone can be successful

Additional study needed to determine prevalence of CS and CF among full-time academic advising staff

# Break

Take 10 or so minutes and relax, refresh

Next Up: Small Group Dialogue



# Dialogue

Share stories of student success as a result of advising

Groups of 3-4

Each person shares

Report out on surprises

# Dialogue

My student really excelled when I...

When I reflect on the difference I've made in a student's experience, I think about ...

The culture in my unit works best when ...

We know we are successful when ...

# Action Plans

Use the provided form to complete an inventory of your practice in academic advising.

On the back page, complete the questions. Consider returning to these questions every so often to re-connect you with what cause you concern and what supports and successes you have had as an advisor.

# Action Plans

In groups, share strategies that you expect to use to reduce CF and raise CS.

Groups report out most worthwhile strategies.

# Reducing Compassion Fatigue

Advisors should:

- Get adequate rest, exercise
- Start or participate in a dyad or group sharing series
- Vary workload
- Reduce case load
  - Significant difference when advising contacts >100/week

# Increasing Compassion Satisfaction

- Reach out to colleagues when struggling, share stories of student thriving
- Engage with fulfilling personal relationships
- Manage expectations of others
- Begin and end the day with a positive activity

# References

- Abel, N. (1991). Index of clinical stress. Retrieved April 9, 2012, from <http://www.imatterpsych.com>
- Figley, C.R. (Ed.). (1995). *Compassion fatigue: Coping with secondary traumatic stress in those to treat the traumatized*. London, UK: Brunner-Routledge.
- Hilfiker, D. (1985). *Healing the wounds: A physician looks at his work*. New York, NY: Pantheon Books.
- Huebner, C. (2011). Caring for caregivers: Strategies to overcome the effects of job burnout. Retrieved March 20, 2012, from <http://www.nacada.ksu.edu>

# References

- Joinson, C. (1992). Coping with compassion fatigue. *Nursing*, 22(4), 118-120.
- Recognizing compassion fatigue. Retrieved March 7, 2011, from [www.compassionfatigue.org](http://www.compassionfatigue.org)
- Stamm, B.H. (2002). Quick-guide suggestions prevention/intervention with negative effects of caregiving. Retrieved March 2, 2011, from [www.proqol.org](http://www.proqol.org)
- Stamm, B.H. (2010). ProQOL R-V. Professional quality of life scale. Retrieved March 3, 2011, from [www.psychink.com](http://www.psychink.com)



# Resources

- Stamm, B.H. (2010). The concise ProQOL manual (2<sup>nd</sup> ed.). Retrieved March 2, 2011, from [www.proqol.org](http://www.proqol.org)
- Stamm, B.H. (Ed.). (1999). Secondary traumatic stress: Self-care issues for clinicians, researchers, and educators. Brooklandville, MD: Sidran Press.
- Rothschild, B., & Rand, M.L. (2006). Help for the helper: The psychophysiology of compassion fatigue and vicarious trauma. New York, NY: W.W. Norton.

# Thank You!

Joshua D. Morrison  
Indiana University Purdue University  
Indianapolis

317-274-7238 (office)

[josjomor@iu.edu](mailto:josjomor@iu.edu)

@IndyJoshM