The **JOY OF WORK?** Gender Aspects of Compassion Fatigue in Corrections
Introductions

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  Oriana House, Inc.

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- Research Specialist,
  Oriana House, Inc.
1. Examining Compassion Fatigue
   - What is Compassion Fatigue?
   - Measuring Compassion Fatigue: The ProQol Scale
   - ProQol in Practise – we try it out!

2. Our Study
   - Context & Methodology
   - Major findings for the agency

3. Does Gender (not) Matter?
   - Major findings

4. Takeaways and Perspectives
   - Takeaways
   - What really matters: Coping & Wellness
   - Further Ideas
   - Limitations
“The purpose of human life is to serve, and to show compassion and the will to help others.”

(Albert Schweitzer)
Examining Compassion Fatigue
Videoclips: **Compassion Fatigue**

- Externalizing
- Internalizing

“Tommyboy”

“Office Space”
Compassion fatigue is “...a state of exhaustion and dysfunction biologically, psychologically, and socially as a result of prolonged exposure to compassion stress and all it invokes.”

(Figley 1995)
Most Vulnerable to Compassion Fatigue

- Emergency care workers
- Counselors
- Teachers
- Mental health professionals
- Medical professionals
- Clergy
- Advocate volunteers
- Community Corrections Staff
- Probation/Parole Officers
How Does Compassion Fatigue Manifest itself?

Clients/Offenders
- Direct Trauma
- Repeated Interaction
- Stories Of Trauma

Helping Professional
- Normal Stress
- Burnout
- Workplace Dissatisfaction
- Indirect Trauma

Helping Professional (Over time)
Measuring CS & CF: The Professional Quality of Life Scale (ProQOL)

- The ProQOL is free
- A 30 item self report measure of the positive and negative aspects of caring
- The ProQOL measures Compassion Satisfaction (CS) and Compassion Fatigue (CF)
CS- CF Model

Professional Quality of Life

- Compassion Satisfaction
- Compassion Fatigue
  - Burnout
  - Secondary Traumatic Stress
Burnout

- Overwhelming emotional exhaustion
- Depersonalization
- Feelings of professional insufficiency resulting from demanding and emotionally charged relationships with clients
- Feeling worn out
Secondary Traumatic Stress

- Also known as Vicarious Trauma
- Work-related, secondary exposure to client's trauma and stressful events
- Feeling frightened or traumatized
“Both burnout and vicarious trauma are not separate phenomena but overlap; being exposed to trauma can lead correctional staff toward burnout. Feeling the symptoms of burnout can make one more susceptible to vicarious trauma. This synergy makes it imperative that correctional staff take care of themselves and are educated and aware of symptoms as they emerge.”

(Shively 2017)
Compassion Fatigue

- Deep physical and emotional exhaustion
- Pronounced change in the helper’s ability to feel empathy for their clients (e.g. cynicism)
- Depression and stress-related illnesses
Compassion Satisfaction

- The *joy of work*
- Pleasure and gratification you derive from your work
- Sense of strength, self-knowledge, confidence, sense of meaning, spiritual connection, respect for human resiliency
- Mitigates Compassion Fatigue
"The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet."

(Rachel N. Remen 1996)
How about **YOUR** Quality of life?

👉 Go to:  
www.socrative.com  
Right upper corner: Student Login  
ZX2BCGRNU
Our Study
Prior Work using ProQol

- ProQol used in other helping professions settings
- Very little research using ProQol evaluating gender differences (Baum 2016)
- Study validating ProQol for correctional officers (Arrows 2018)
Three waves of data collection

**First**
February 2017
Paper and pencil survey as well as online survey across the agency
(n=381)
52% response rate

**Second**
Post-Training
Pen and paper survey administered after staff training on CF (4 trainings offered)
(n=96)

**Third**
December 2017
ProQol Survey administered to staff online only
(n=273)
38% response rate
The scoop

- Baseline for future years
- Currently compared to all helping professions in ProQol database (n=1289)
  - Not a diagnostic test
- All ProQOL Sections are scored out of 50 (compared to ProQol databank cut scores and percentile ranks)
Compassion Satisfaction

58th percentile rank
Burnout

58th percentile rank

percentile rank  25  50  75
Secondary Traumatic Stress

percentile rank: 25, 50, 75

80th percentile rank
## Overall Scores

**2/2017**

<table>
<thead>
<tr>
<th>Survey Subscales</th>
<th>Program Type</th>
<th>Mean Raw Score</th>
<th>Variable Percentile</th>
<th>Agency Percentile</th>
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# Overall Scores

### 12/2017

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<th>Survey Subscales</th>
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Percentile Rankings By Position

- Shift Supervisor (SS) (n=13)
- Recovery Coach (RC) (n=11)
- Treatment (Tx) (n=52)
- Accounting (n=5)
- Intake (n=6)
- Research (n=4)
- Cognitive Skills (n=24)
- Medical (Med) (n=2)
- Education (Edu) (n=3)
- Resident Supervisor (RS) (n=77)
- Employment (Emp) (n=8)
- Clerical (n=5)
- Program Assistant (Prog Asst) (n=12)
- Other (n=48)
- Lead Resident Supervisor (LRS) (n=8)
- Program Management (MGMT) (n=41)
- Continuous Quality Improvement Specialist (CQI)...
- Caseworker (CW) (n=47)
- Electronic Monitoring (EM) (n=3)

- Education requirement
- No education requirement
- No direct client contact

Compassion Satisfaction

2/2017
## Age matters ...

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<th>Survey Subscales</th>
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<td></td>
<td>26-35 (n=86)</td>
<td>35.59</td>
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<td>36-45 (n=57)</td>
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<td>46-55 (n=58)</td>
<td>39.87</td>
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<td></td>
<td>over 55 (n=41)</td>
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<td>25 and under (n=30)</td>
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... tenure matters ...

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<td>1-2 years (n=66)</td>
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...does Gender (not) matter?
What’s happening in these data?

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<th>Subscale Categories</th>
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<td>Compassion satisfaction</td>
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<td>Secondary trauma</td>
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Mean scores range from 10 to 50.
The three subscale scores did not differ significantly between male and female staff across all programs.

* Males and females were not matched.
There was no significant difference of the subscale scores of male and female staff working in “female only” programs.
There was no significant difference of the subscale scores of any staff working in programs serving both female and male clients.

Males and females were not matched.
There were no significant differences between male and female staff across all programs – **controlling for key factors**

*Males and Females were matched on Age, Position tenure, and Tenure at Oriana House, Inc.*
“Fundamentally, we must know what we are looking for when we are studying gendered behavior and then be willing and ready to admit when we do not find it.”

(Risman 2018)
Statistical significance in the female staff satisfaction scores working with female clients (compared to male clients)
Training

first
February 2017
Paper and pencil survey as well as online survey across the agency

second
Post-Training
Pen and paper survey administered after staff training on CF
4 trainings offered twice

third
December 2017
ProQol Survey administered to staff online only
Four trainings

- Developing a Personal Resilience Plan
- Practicing Resilience
- Inner Life of Resilience
- When Work Takes a Toll
Four trainings

- Outside contractor specializing in compassion fatigue
- Advertised via intranet, personal email from staff development, cross-advertised
- 3-4 hours each
- Four overview sessions (1hr) in downtown Akron (2), Tiffin, Cleveland
61% female staff and 37% of male staff attended a training of all respondents of the ProQol II

71% female staff and 43% male staff attended a training of staff WITH client contact
Intensity of the training rates were significantly different among male and female staff.

![Proportion of Training Attendance](chart)

- Male
- Female

<table>
<thead>
<tr>
<th># of Trainings attended</th>
<th>Male</th>
<th>Female</th>
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<tbody>
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<td>63%</td>
<td>39%</td>
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<tr>
<td>1</td>
<td>25%</td>
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<tr>
<td>2</td>
<td>9%</td>
<td>15%</td>
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<tr>
<td>3+</td>
<td>3%</td>
<td>14%</td>
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</table>
Takeaways and Perspectives
Takeaways

- Challenge our thinking on seemingly ubiquitous “gender difference:”
- No gender differences among staff on CS, BO, ST
- Gender of clients matters: Female staff shows significantly higher compassion satisfaction when working with female clients
- Correctional staff is exposed to high amounts of secondary trauma and prone to burn-out and we have to address that with adequate support measures
Ways to cope

How do YOU cope???

Wellness & Self Care

Counseling & Therapy

Team support

SLEEP

Exercise
Suggested ways to cope

- Breathe
- Set limits
- Take regular vacations
  - Or Visualizations
- Meditate
- Journal
- Exercise
- Talk to a trusted friend

- Healthy diet
- Support Groups
- Generate a set of personalized coping strategies
- Hobbies
- Restful, restorative sleep
- Etc.
Gendered time & coping

- Women living with men (still) do a disproportionate amount of housework
- Men get an average of five hours more leisure time than women per week – three hours more leisure for fathers (Pew Research 2013)

How Mothers and Fathers Spend their Leisure Time

Average number of hours per week on different leisure activities

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<th>Activity</th>
<th>Fathers</th>
<th>Mothers</th>
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<td>TV and other media</td>
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<td>Sports</td>
<td>2.6</td>
<td>1.4</td>
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</table>

Note: Based on adults ages 18 to 64 with own child(ren) under age 18 living in the household (N=4,822). Other media includes computer, games, radio, etc.


PEW RESEARCH CENTER
Oriana House Wellness Program

The OHI Wellness Program offers prizes, information, discounts, and resources in various areas of wellness, including:

- physical,
- mental,
- social,
- and financial.

Participation in the Wellness Program is FREE, fun, and can save you money in healthcare costs. Challenge yourself and/or your co-workers to be your best!
“To care best for others, be sure to take the best possible care of yourself.”

(Seltzer 2018)
Further ideas:

- In next wave of data collection address better the *gender of clients in facility* as factor that matters (Perkins and Sprang 2013)
- Move beyond ProQol and examine coping strategies, e.g. gendered (family) support and coping mechanisms
Further ideas:

● More (intersectional) research questions: minority gender status, race x gender, ORAS level of clients

● Complementary ways of data collection/triangulation
Limitations

- Small sample in some groups
- ProQol database does not include community corrections
- Geared towards staff with client interaction
- Survey was voluntary and self-reported
“Universal right to wellness: Every helper, regardless of her or his role or employer, has a right to wellness associated with self care.”

(Standards of Humane Practice of Self Care Figley Workbook, 2012)
Thank you!

Oriana House, Inc.
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