

# **From Traumatized to Energized: Helping Victim Support Volunteers Cultivate Compassion Satisfaction in the Face of Crisis**

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In several provinces and territories in Canada, volunteers play a crucial role in victim services, as they assist police in supporting individuals affected by crime and tragedy.<sup>1</sup> The nature of this work involves exposure to a considerable amount of traumatic material—numerous accounts of domestic violence, sexual assault, kidnapping, robbery, suicide, and even death. Researchers have indicated that continuous exposure to the traumatic experiences of others has both positive and negative implications (Harr 2013, 75; McKim and Smith-Adcock 2014, 58; Radey and Figley 2007, 210). Compassion fatigue (CF), vicarious trauma, and burnout are constructs used to describe the psychological and emotional costs of aiding individuals who have experienced some form of crisis or trauma (Collins and Long 2003, 417-418; Figley 1995, 7-15; Newell and MacNeil 2010, 58; Salston and Figley 2003, 167). In bearing witness to the pain of others, it is not uncommon to experience stressful reactions (Figley 2002, 1435) and significant changes in cognitive, emotional, or behavioral functioning (Bride, Radey, and Figley 2007, 155). Although researchers have regularly emphasized the negative impact that stems from helping others in crisis, insufficient attention is placed on the unique rewards of the work (Radey and Figley 2007, 208). This contrast to CF is termed compassion satisfaction, and it is described as being “often overlooked” (Lawson and Meyers 2011, 164).

Within this article, the current status of compassion satisfaction (CS) in literature and practice is presented, particularly in the context of training provided to victim support volunteers in Alberta. Along with highlighting what seems to be an inadequate focus on CS, eight strategies are proposed that victim support volunteers can adopt to cultivate CS in their work.<sup>2</sup> It is hoped the information presented in this article can be integrated into victim services training in order to capitalize on the more energizing aspects of this work, sustain gratification in helping others to recover from crisis, and promote a more optimistic perspective by shifting the focus from being traumatized by this work to being energized by it.

## **Compassion Satisfaction: In Research and Practice**

CS is defined as a feeling of pleasure acquired from the ability to effectively help others and make a positive mark in society (Stamm 2010). It denotes the positive feelings and energy derived from helping

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<sup>1</sup> In the Province of Alberta, for example, victim support volunteers function like other crisis workers and helping professionals as a first line of intervention for individuals affected by crime or tragedy. However, not all provinces and territories utilize unpaid volunteers to assist in providing services to survivors of criminal victimization. There are various service delivery models in place for the provision of victim services across Canada, some of which have paid staff and/or other professionals specifically hired to provide these services to the public. For more detail on the various service delivery models present across Canada, see Allen (2014).

<sup>2</sup> The lack of information on CS in victim services training coupled with one author’s personal struggle to maintain optimism in the role is what prompted this article’s specific focus on cultivating CS in victim support volunteers. Although this focus stems from one author’s personal experiences in the volunteer role (Shivji 2015, 40-46), it should be noted that the ideas presented in this article are widely applicable to other populations of crisis workers and helping professionals, and not necessarily limited to victim services.

others to recover from crisis and trauma (Stamm 2002, 107-119). Researchers have stressed the importance of CS by identifying it as a contributing factor to career longevity, strengthened resiliency, and sustained well-being (Radey and Figley 2007, 213), as well as a protective mechanism that mitigates the effects of CF (Conrad and Kellar-Guenther 2006, 1073; Phelps et al. 2009, 321; Samios, Abel, and Rodzik 2013, 612). Stamm (2010) has alleged that trauma workers who experience increased CS may feel energized by their work and believe they can continue to make a difference in the world. However, little research has utilized CS as a focal point (Lawson and Meyers 2011, 164; Radey and Figley 2007, 208) and the majority of studies in this area have examined CS secondarily to CF.

A similar trend appears to be evident in Alberta Victim Services training; the focus is often on traumatic rather than energizing effects. For instance, of the 35 standardized training modules released in 2011, only one aims to educate victim support volunteers about traumatic implications and to prevent CF. The module does not mention CS (Shivji 2015, 42-43). Therefore, it seems that while victim support volunteers learn about the risks of the job, they have minimal guidance about the unique benefits that the position can afford. Unlike trauma specialists and other relevant professionals, the volunteers may have limited access to educational materials and resources about CS and how it can apply to their work. Appropriate training could help the volunteers reduce CF and benefit from CS.

In the next section, eight general recommendations are offered for sustaining CS in Victim Services (and possibly other forms of work with survivors of crisis and trauma). However, it should be noted that these recommendations are based on the work and ideas of a limited group of researchers, primarily because the literature on CS is sparse and there is simply not enough material to consult in terms of how CS can be actively enhanced and maintained.

### **Recommended Strategies for Cultivating Compassion Satisfaction**

Radey and Figley (2007) contended that certain steps could be taken to enhance CS; they recommended increasing positive affect, resources, and self-care to create a higher ratio of positive to negative experiences, and thus provide an ideal environment for CS to grow (211-212). The advent of CS may be further enhanced by witnessing growth and resilience in clients, bonding with colleagues who share a commitment to bring about positive change, and understanding the true value of the work being done (Harr 2013, 83). Building on the recommendations proposed above, the following are several preliminary strategies by which victim support volunteers (and other populations of crisis or trauma workers) may be able to cultivate greater CS in their work. These strategies are informed by an in-depth review of current literature on CF and CS, in addition to one author's personal experiences as a victim support volunteer in Alberta (Shivji 2015, 40-46).

#### *Adopt an Active Coping Style*

An active coping style entails the use of positive strategies for stress management (i.e., support seeking, leisure, and relaxation techniques) and an increased focus on problem-solving, as opposed to the enactment of negative coping strategies (e.g., alcohol and drug use, avoidance) and denial or ignorance of the problem (Kinzel and Nanson 2000, 130). The shift into a problem-solving mindset is considered by researchers to be a plausible tactic for dealing with symptoms of CF (Cicognani et al. 2009, 460; Dunkley and Whelan 2006, 453; Kinzel and Nanson 2000, 130). In fact, Dunkley and Whelan (2006) intimated that use of an active coping style involves development of a keen capability to generate solutions (464), which increases the likelihood of success in countering the effects of CF. This resolution of CF is

significant, as it opens the door for increased CS. By actively taking steps to reduce CF, victim support volunteers allow greater opportunity for CS to occur. Furthermore, the practice of actively constructing solutions to deal with stress may translate into an application of actively constructing ideas to enhance the positive and energizing feelings that arise from being able to help others recover from crisis or trauma.

#### *Balance Your Life and Your Workload*

Maintenance of a work–life balance is considered an important factor in promoting effective functioning and positivity in crisis and trauma work (Lawson and Meyers 2011, 167). Hence, volunteers who take time to develop healthy personal relationships and engage in fun or meaningful activities likely experience greater CS than volunteers who focus primarily on their work. Indeed the provision of support and services to victims is a valuable effort, but in this process of helping others it becomes easy to neglect the wholeness of life and subsequently slip into a downward spiral of stress. However, by preserving a balance between their personal and professional lives, victim support volunteers can experience opportunities to remove themselves from the helping role and recharge (Harr 2013, 84). This not only cultivates positive energy within volunteers, but may also raise their capacities for CS.

In addition to managing a balance between work and life, volunteers may find it helpful to maintain a diversified workload. For instance, Radey and Figley (2007) asserted that caseload variety enhances CS through provision of increased chances for work-related success—conceivably when volunteers take on simple tasks and cases, along with the more challenging ones (212). Specific strategies for diversifying the workload in Victim Services may include taking on a variety of cases and equally dividing the number of hours spent on various tasks or sites (i.e., court support, call centre, site of the crime or tragic incident, home of the victim, etc.).

#### *Be Positive*

A strong sense of optimism appears to be the key to enhancing CS. With respect to the amount of patience and emotional energy required to effectively support victims of crime and tragedy, it is necessary for volunteers to have an “ongoing input” (Harr 2013, 83) of positive energy to sustain their ability to help—especially in the face of crisis or stress. Although it is easy to fall prey to the negativity that encompasses the position, victim support volunteers do hold the power to invoke positivity in their work. Keeping a journal of successes, reviewing progress made with victims, and remembering words of appreciation are all methods by which volunteers can boost optimism and discover CS (Radey and Figley 2007, 211).

Radey and Figley (2007) referenced the idea of positivity opening a wider array of thoughts and actions (209), thereby provoking additional approaches for working with clients—or, in the case of Victim Services, survivors of criminal victimization. In adopting a positive outlook, volunteers not only learn to develop new strategies for helping, but may also experience increased success in doing so. This improved capability to succeed in the helping role is likely to promote potential for CS. Samios et al. suggested that positive emotions ultimately build CS via positive reframing (2013, 617-618). Positive reframing refers to broadening the mindset to search for positive meaning, which allows events to be reinterpreted in a positive light (2013, 612). In Victim Services, positive reframing may direct volunteers to uncover greater value in their work and thus maximize the experience of CS.

### *Consistently Evaluate Your Levels of CS and CF*

Newell and MacNeil highlighted the need to evaluate CS and CF experienced by helpers regularly (2010, 63-64). Through regular monitoring of their CS and CF levels, such as self-report assessment tools designed for this purpose, victim support volunteers can easily recognize when energy is depleting and traumatic stress is increasing. This can in turn prompt action to reduce CF and enhance CS. Volunteers may also experience increased optimism in seeing their levels of CS rise—a process that is likely to instill greater motivation for continuing to serve in a helping role.

One method by which volunteers can evaluate their levels of CS and CF is the Professional Quality of Life Scale (ProQOL). The ProQOL is a self-report tool specifically designed to measure both positive and negative effects of trauma work (Stamm 2010). In addition to being the most preferred measure of CS and CF, the ProQOL is determined by researchers to be a highly valid and reliable test for individual experiences of CS, CF, and burnout (Adams, Boscarino, and Figley 2006, 107-108; Bride, Radey, and Figley 2007, 159; Jenkin and Baird 2002, 427; O’Sullivan and Whelan 2011, 313; Stamm 2010).<sup>3</sup>

### *Embrace Self-Care*

Lack of self-care is hardly conducive to CS. Instead, researchers emphasized the regular practice of self-care to reduce CF and improve the chances of experiencing/building CS (Radey and Figley 2007, 210). For instance, victim support volunteers who neglect their own needs may observe a diminished capacity to function both personally and professionally, as their energy is drained and they may find it difficult to provide quality service and keep up with the demands of the position and everyday life (Radey and Figley 2007, 210). Thus, it is important to identify the need for personal rejuvenation and preserve a sense of well-being (Harr 2013, 83), as doing so increases room for CS.

Specific self-care strategies that volunteers may use to build CS include: actively maintaining good mental and physical health (i.e. establishing a healthy diet, exercising, regular medical checkups), spending time with loved ones, incorporating leisure time into their schedules, facilitating hope through spirituality or positive thinking, and maintaining boundaries to limit emotional involvement with victims (Harr 2013, 83-84). Enrolment in personal therapy is also a viable method for self-care, as it enhances resiliency and CS through the deeper processes of reflection and insight (Cummins, Massey, and Jones 2007, 43).

### *Practice Mindfulness*

Kabat-Zinn characterized mindfulness as “paying attention, in a particular way: on purpose, in the present manner, and nonjudgmentally” (1990, 14). This process involves deliberate attendance to thoughts, emotions, and sensations associated with crisis and trauma work, and researchers have generally supported the use of mindfulness to reduce CF and promote well-being (Christopher and Maris 2010, 114). It is through mindfulness that victim support volunteers can learn to become aware of their experiences of CF and CS. Mindfulness can enable them to shift from feeling traumatized and depleted by the work to being resilient and energized in the helping role.

### *Pursue Knowledge*

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<sup>3</sup> For ease of access, a copy of Stamm’s (2010) ProQOL can be retrieved from [http://www.proqol.org/ProQOL\\_Test\\_Manuals.html](http://www.proqol.org/ProQOL_Test_Manuals.html).

Another favorable medium for cultivating CS is the pursuit of intellectual resources through continuing education and training (Radey and Figley 2007, 212). While lack of competence in specific skills or knowledge may contribute to CF, efforts to gain experience and competence likely provide fresh perspectives that make handling the challenges of the job a smoother process (Harr 2013, 84). Improvements in skills and knowledge can lead victim support volunteers to experience greater success in their work, which may result in increased CS. Furthermore, Victim Services can assist volunteers in developing awareness of CS through the provision of specialized training on the unique rewards of helping.

### *Seek Social Support*

One of the most consistent ideas in the literature to date is the link between social support and CS (Cicognani et al. 2009, 460; Conrad and Kellar-Guenther 2006, 1078; Killian 2008, 38-39; Radey and Figley 2007, 211-212). Harr (2013) described social support from family and friends as a method for finding “refuge from the emotional intensity of the work” (83). This disengagement from the stress of the job presumably strengthens the potential for CS.

In addition to seeking support from family and friends, victim support volunteers may benefit from mentoring and peer support meetings. Mentoring programs allow more experienced and resilient volunteers, who know how to actively counter CF and build CS, to share their knowledge and support less experienced peers to make the shift from traumatized to energized (Kulkarni et al. 2013, 467-468). Similarly, peer support meetings supply an outlet for volunteers to share techniques to improve their work with victims and increase their rates of success, which further augments CS. In this line of work, volunteers may also develop a tendency to diminish successes and accentuate more problematic cases (Radey and Figley 2007, 213). This persistent focus on the negative is grounds for heightened CF. Nevertheless, peer support meetings can provide volunteers with opportunities to share successes (Radey and Figley 2007, 213) and receive positive feedback on their work, which boosts optimism and increases capacity for CS.

### **Conclusion**

CS induces purpose, meaning, and hope in the face of challenges (Harr 2013, 82). It is a powerful capacity to feel energized and optimistic about the ability to make a difference in the lives of others and change the world. Jones (as cited in Harr 2013, 83) stated that perceiving positive change in another’s quality of life results in fulfillment and motivation to continue in the helping role. Given the profound impact CS can have on victim support volunteers, it would be highly beneficial for them to be aware of how they can become energized by their work. The current approach of emphasizing the prevention of CF and neglecting the enhancement of CS does little to improve volunteers’ abilities to capitalize on the rewards of helping. However, with increased knowledge and training on CS, victim support volunteers (and other populations of crisis and trauma workers) can effectively learn to cultivate greater CS in their work, which in turn may help them to sustain well-being and stay out of crisis as they help others to recover from trauma.

### **References**

Adams, Richard E., Joseph A. Boscarino, and Charles R. Figley. “Compassion Fatigue and Psychological Distress among Social Workers: A Validation Study.” *American Journal of Orthopsychiatry* 76, no. 1 (2006): 103-108. doi:10.1037/0002-9432.76.1.103.

Allen, Mary. 2014. *Victim services in Canada, 2011/2012*. Ottawa: Statistics Canada. Catalogue no. 85-002-X. Accessed January 6, 2018, at: <http://www.statcan.gc.ca/pub/85-002-x/2014001/article/11899-eng.pdf>.

Bride, Brian E., Melissa Rady, and Charles R. Figley. "Measuring Compassion Fatigue." *Clinical Social Work Journal* 35, no. 3 (2007): 155-163. doi:10.1007/s10615-007-0091-7.

Christopher, John C., and Judy A. Maris. "Integrating Mindfulness as Self-Care into Counselling and Psychotherapy Training." *Counselling and Psychotherapy Research* 10, no. 2 (2010): 114-125. doi:10.1080/14733141003750285.

Cicognani, Elvira, Luca Pietrantonio, Luigi Palestini, and Gabriele Prati. "Emergency Workers' Quality of Life: The Protective Role of Sense of Community, Efficacy Beliefs and Coping Strategies." *Social Indicators Research* 94, no. 3 (2009): 449-463. doi:10.1007/s11205-009-9441-x.

Collins, Sean, and Ann Long. "Working with the Psychological Effects of Trauma: Consequences for Mental Health-Care Workers – A Literature Review." *Journal of Psychiatric and Mental Health Nursing* 10, no. 4 (2003): 417-424. doi:10.1046/j.1365-2850.2003.00620.x.

Conrad, David, and Yvonne Kellar-Guenther. "Compassion Fatigue, Burnout, and Compassion Satisfaction among Colorado Child Protection Workers." *Child Abuse & Neglect* 30, no. 10 (2006): 1071-1080. doi:10.1016/j.chiabu.2006.03.009.

Cummins, Paige N., Linda Massey, and Anita Jones. "Keeping Ourselves Well: Strategies for Promoting and Maintaining Counselor Wellness." *Journal of Humanistic Counseling, Education and Development* 46, no. 1 (2007): 35-49. doi:10.1002/j.2161-1939.2007.tb00024.x.

Dunkley, Jane, and Thomas A. Whelan. "Vicarious Traumatization in Telephone Counsellors: Internal and External Influences." *British Journal of Guidance & Counselling* 34, no. 4 (2006): 451-469. doi:10.1080/03069880600942574.

Figley, Charles R. "Compassion Fatigue as Secondary Traumatic Stress Disorder: An Overview." In *Compassion Fatigue: Coping with Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized*, edited by Charles R. Figley, 1-20. New York: Brunner/Mazel, 1995.

Figley, Charles R. "Compassion Fatigue: Psychotherapists' Chronic Lack of Self Care." *Journal of Clinical Psychology/In Session: Psychotherapy in Practice* 58, no. 11 (2002): 1433-1441. doi:10.1002./jclp.10090.

Harr, Cynthia. "Promoting Workplace Health by Diminishing the Negative Impact of Compassion Fatigue and Increasing Compassion Satisfaction." *Social Work & Christianity* 40, no. 1 (2013): 71-88.

Jenkins, Sharon R., and Stephanie Baird. "Secondary Traumatic Stress and Vicarious Trauma: A Validation Study." *Journal of Traumatic Stress* 15, no. 5 (2002): 423-432. doi:10.1023/A:1020193526843.

Kabat-Zinn, Jon. *Full Catastrophe Living: Using the Wisdom of Your Body and Mind to Face Stress, Pain, and Illness*. New York: Bantam Doubleday Dell, 1990.

Killian, Kyle D. "Helping Till it Hurts? A Multimethod Study of Compassion Fatigue, Burnout, and Self-Care in Clinicians Working with Trauma Survivors." *Traumatology* 14, no. 2 (2008): 32–44. doi:10.1177/1534765608319083.

Kinzel, Audrey, and J. O. Nanson. "Education and De-Briefing: Strategies for Preventing Crises in Crisis-Line Volunteers." *Crisis* 21, no. 3 (2000): 126–134. doi:10.1027//0227-5910.21.3.126.

Kulkarni, Shanti, Holly Bell, Jennifer L. Hartman, and Robert L. Herman-Smith. "Exploring Individual and Organizational Factors Contributing to Compassion Satisfaction, Secondary Traumatic Stress, and Burnout in Domestic Violence Service Providers." *Journal of the Society for Social Work and Research* 4, no. 2 (2013): 114–130. doi:10.5243/jsswr.2013.8.

Lawson, Gerard, and Jane E. Myers. "Wellness, Professional Quality of Life, and Career-Sustaining Behaviors: What Keeps Us Well?" *Journal of Counseling & Development* 89, no. 2 (2011): 163–172. doi:10.1002/j.1556-6678.2011.tb00074.x.

McKim, Lindsay L., and Sondra Smith-Adcock. "Trauma Counsellors' Quality of Life." *International Journal for the Advancement of Counselling* 36, no. 1 (2014): 58–69. doi:10.1007/s10447-013-9190-z.

Newell, Jason M., and Gordon A. MacNeil. "Professional Burnout, Vicarious Trauma, Secondary Traumatic Stress, and Compassion Fatigue: A Review of Theoretical Terms, Risk Factors, and Preventive Methods for Clinicians and Researchers." *Best Practices in Mental Health* 6, no. 2 (2010): 57–69.

O'Sullivan, Julian, and Thomas A. Whelan. "Adversarial Growth in Telephone Counsellors: Psychological and Environmental Influences." *British Journal of Guidance & Counselling* 39, no. 4 (2011): 307–323. doi:10.1080/03069885.2011.567326.

Phelps, Andrea, Delyth Lloyd, Mark Creamer, and David Forbes. "Caring for Carers in the Aftermath of Trauma." *Journal of Aggression, Maltreatment & Trauma* 18, no. 3 (2009): 313–330. doi:10.1080/10926770902835899.

Radey, Melissa, and Charles R. Figley. "The Social Psychology of Compassion." *Clinical Social Work Journal* 35, no. 3 (2007): 207–214. doi:10.1007/s10615-007-0087-3.

Samios, Christina, Lisa M. Abel, and Amber K. Rodzik. "The Protective Role of Compassion Satisfaction for Therapists Who Work with Sexual Violence Survivors: An Application of the Broaden-And-Build Theory of Positive Emotions." *Anxiety, Stress, & Coping* 26, no. 6 (2013): 610–623. doi:10.1080/10615806.2013.784278.

Salston, MaryDale, and Charles R. Figley. "Secondary Traumatic Stress Effects of Working with Survivors of Criminal Victimization." *Journal of Traumatic Stress* 16, no. 2 (2003): 167–174. doi:10.1023/A:1022899207206.

Shivji, Alisha M. "Compassion Satisfaction in Victim Services: Focusing on the Rewards of Trauma Work"  
Unpublished master's project, University of Lethbridge, 2015.  
<https://www.uleth.ca/dspace/handle/10133/4525>

Stamm, Beth Hudnall. "Measuring Compassion Satisfaction as well as Fatigue: Developmental History of the Compassion Satisfaction and Fatigue Test." In *Treating Compassion Fatigue*, edited by Charles R. Figley, 107-119. New York: Brunner-Routledge, 2002.

Stamm, Beth Hudnall. *The Concise ProQOL Manual.*, 2nd ed. (2010). Retrieved from  
[http://www.proqol.org/ProQOI\\_Test\\_Manuals.html](http://www.proqol.org/ProQOI_Test_Manuals.html).