

COMPASSION FATIGUE SELF-TEST¹

This self-test is not intended to provide medical advice or diagnosis. Consult a physician or mental health professional if you think you might be suffering from Compassion Fatigue.

Consider each of the following characteristics about you and your current situation. Write in the number for the best response. Use one of the following answers.

1 = Rarely/Never

2 = At Times

3 = Not Sure

4 = Often

5 = Very Often

1. ____ I force myself to avoid certain thoughts or feelings that remind me of a frightening experience.
2. ____ I find myself avoiding certain activities or situations because they remind me of a frightening experience.
3. ____ I have gaps in my memory about frightening events.
4. ____ I feel estranged from others.
5. ____ I have difficulty falling or staying asleep.
6. ____ I have outbursts of anger or irritability with little provocation.
7. ____ I startle easily.
8. ____ While working with a victim I thought about violence against the person or persons who victimized.
9. ____ I am a sensitive person.
10. ____ I have had flashbacks connected to my clients and families.
11. ____ I have had first-hand experience with traumatic events in my adult life.
12. ____ I have had first-hand experience with traumatic events in my childhood.
13. ____ I have thought that I need to “work-through” a traumatic experience in my life.
14. ____ I have thought that I need more close friends.
15. ____ I have thought that there is not one to talk with about highly stressful experiences.
16. ____ I have concluded that I work too hard for my own good.

Items about your clients and their families.

17. ____ I am frightened of things traumatized people and their families have said or done to me.
18. ____ I experience troubling dreams similar to a client of mine and their family.
19. ____ I have experience intrusive thoughts of sessions with especially difficult clients and their families.
20. ____ I have suddenly and involuntarily recalled a frightening experience while working with a client or their family.
21. ____ I am preoccupied with more than one client and their family.
22. ____ I am loosing sleep over a client and their family’s traumatic experiences.
23. ____ I have though that I might have been “infected” by the traumatic stress of my clients and their families.

¹ <http://www.ace-network.com/cftest.htm>

STRESS RELIEF TIPS

EXPENSIVE WAYS TO RELIEVE STRESS

- Vacation
- Spa Treatments
- Massage
- Shopping
- Movies (Comedies not the sad ones!)
- Manicure
- Pedicure

NO COST STRESS RELIEVERS

- Exercise-relieves stress; works off anger
- Breathing Exercises
- Power Naps
- Humor
- Visualization
- Crying
- Self Talk
- Meditation
- Yoga

LOW COST STRESS RELIEVERS

- Get Organized
- Get in Touch with your Inner Child (bubbles)
- Aromatherapy
- Stress Stars/Stress Balls
- Water Therapy-desk top fountain; physical hydration
- Music
- Computer Video Games
- Pillow-uses, colors
- De-stress Your Environment-colors, textures, patterns

NEGATIVE TECHNIQUES

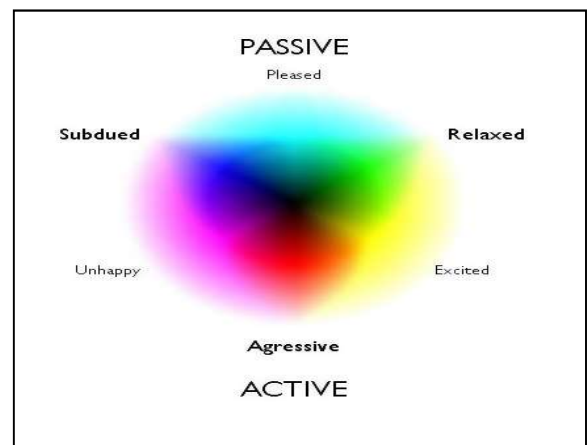
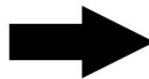
- Overeating
- TV Escape
- Prescription Drugs
- Illegal Drugs
- Drinking alcohol to excess
- Gambling
- Shouting/name calling
- Cursing
- Quitting your job-that'll show 'em!

CULTURAL/TRADITIONAL STRESS RELIEVERS

- SWEAT LODGES
- SMUDGING
- BRUSHING
- HERB THERAPY
- DANCING, POW WOWS, STOMP DANCES
- STORY TELLING
- ARTS AND CRAFTS

WHAT DO THE COLORS MEAN?

- RED** is aggressive, violent, passionate
- BLUE** is calming
- GREEN** represents life, nature, signifies growth, renewal, health, environment
- YELLOW** is a warm color, represents sunshine
- PURPLE** is the color of royalty, associated both with nobility and spirituality
- PINK** is a softer, less violent red
- WHITE** is a symbol of purity, cleanliness and innocence



LIFE STRESS TEST

As caregivers and service providers, we are often stressed and don't know why. Without realizing the effects that life circumstances have on us, we tend to sweep our feelings of frustration, sadness and turmoil under the rug. In the past **12 to 24 months**, which of the following major life events have taken place in your life? Mark down the points for each event that you have experienced this year. When you're done looking at the whole list, add up the points for each event and check your score at the bottom.

- | | |
|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| <input type="checkbox"/> Death of Spouse (100 points) | <input type="checkbox"/> Death of a Child (100 points) |
| <input type="checkbox"/> Death of a close family member (63 points) | <input type="checkbox"/> Death of a Close Friend (37 points) |
| <input type="checkbox"/> Divorce (73 points) | <input type="checkbox"/> Sex Difficulties (39 points) |
| <input type="checkbox"/> Marital Reconciliation (45 points) | <input type="checkbox"/> Marriage (50 points) |
| <input type="checkbox"/> Fired from work (47 points) | <input type="checkbox"/> Trouble with Boss (23 points) |
| <input type="checkbox"/> Minor Violations of the Law (11 Points) | <input type="checkbox"/> Jail Term (63 points) |
| <input type="checkbox"/> Pregnancy (40 points) | <input type="checkbox"/> Personal injury of illness (53 points) |
| <input type="checkbox"/> Business readjustment (39 points) | <input type="checkbox"/> Addition to family (39 points) |
| <input type="checkbox"/> Change in financial status (38 points) | <input type="checkbox"/> Change in work responsibilities (29 points) |
| <input type="checkbox"/> Mortgage or loan over \$30,000 (31 points) | <input type="checkbox"/> Change to a different line of work (36) |
| <input type="checkbox"/> Starting or finishing school (26 points) | <input type="checkbox"/> Foreclosure of mortgage or loan (30 points) |
| <input type="checkbox"/> Change in sleeping habits (16 points) | <input type="checkbox"/> Trouble with in-laws (29 points) |
| <input type="checkbox"/> Change in work hours, conditions (20 points) | <input type="checkbox"/> Spouse begins or stops work (26 points) |
| <input type="checkbox"/> Change in residence (20 points) | <input type="checkbox"/> Change in living conditions (25 points) |
| <input type="checkbox"/> Change in recreational habits (19 points) | <input type="checkbox"/> Revision of personal habits (24 points) |
| <input type="checkbox"/> Change in church activities (19 points) | <input type="checkbox"/> Change in eating habits (15 points) |
| <input type="checkbox"/> Mortgage or loan under \$20,000 (17 points) | <input type="checkbox"/> Change in schools (20 points) |
| <input type="checkbox"/> Change in family member's health (44 points) | <input type="checkbox"/> Change in social activities (18 points) |
| <input type="checkbox"/> Vacation (13 points) | <input type="checkbox"/> Christmas season (12 points) |
| <input type="checkbox"/> Outstanding personal achievement (28 points) | <input type="checkbox"/> Retirement (45 points) |
| <input type="checkbox"/> Change in number of family gatherings (15 points) | |
| <input type="checkbox"/> Change in number of marital arguments (35 points) | |
| <input type="checkbox"/> Marital Separation or from relationship partner (65 points) | |

YOUR TOTAL SCORE

This scale shows the kind of life pressure that you are facing. Depending on your coping skills or the lack thereof, this scale can predict the likelihood that you will fall victim to a stress related illness. The illness could be mild - frequent tension headaches, acid indigestion, loss of sleep to very serious illness like ulcers, cancer, migraines and the like.

LIFE STRESS SCORES

0-149: Low susceptibility to stress-related illness

150-299: Medium susceptibility to stress-related illness: Learn and practice relaxation and stress management skills and a healthy well life style.

300 and over: High susceptibility to stress-related illness:

Daily practice of relaxation skills is very important for your wellness. Take care of it now before a serious illness erupts or an affliction becomes worse.

Permission to reprint the Life Stress Test received from:
Dr. Tim Lowenstein
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Port Angeles, WA 98362 www.stressmarket.com

24. ____ I remind myself to be less concerned about the well-being of my clients and their families.
25. ____ I have felt trapped by my work as a helper.
26. ____ I have felt a sense of hopelessness associated with working with clients and their families.
27. ____ I have felt “on edge” about various things and I attribute this to working with certain clients and their families.
28. ____ I have wished that I could avoid working with some clients and their families.
29. ____ I have been in danger working with some clients and their families.
30. ____ I have felt that some of my clients and their families dislike me personally.

Items about being a helper and your work environment.

31. ____ I have felt weak, tired, rundown as a result of my work as a helper.
32. ____ I have felt depressed as a result of my work as a helper.
33. ____ I am unsuccessful at separating work from personal life.
34. ____ I feel little compassion toward most of my co-workers.
35. ____ I feel I am working more for the money than for personal fulfillment.
36. ____ I find it difficult separating my personal life from my work life.
37. ____ I have a sense of worthlessness/disillusionment/resentment associated with my work.
38. ____ I have thought that I am a “failure” as a helper.
39. ____ I have thoughts that I am not succeeding at achieving my life goals.
40. ____ I have to deal with bureaucratic, unimportant tasks in my work life.

SCORING INSTRUCTIONS

- Make sure you have responded to **all** questions.
- Next, circle the following 23 items: 1-8, 10-13, 17-26, and number 29.
- Now **ADD** the numbers you wrote next to the items circled.
- Note your risk of Compassion Fatigue.

26 or LESS = Extremely LOW risk
27 to 30 = LOW risk
31 – 35 = MODERATE risk
36 – 40 = HIGH risk
41 or MORE = Extremely HIGH risk

To determine your risk of BURNOUT, ADD the numbers you wrote next to the items NOT circled.
 Note you risk of Burnout.

19 or LESS = Extremely LOW risk
20 to 24 = LOW risk
25 to 29 = MODERATE risk
30 – 42 = HIGH risk
43 or MORE = Extremely HIGH risk