

A LINE ON LIFE

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"The Cost of Caring" ¹

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Recently, we talked about the trauma of car accidents and its relation to **PTSD (Post-Traumatic Stress Disorder)**. Any event that threatens death or serious injury can cause PTSD. PTSD symptoms range from anxiety, flashbacks and nightmares to avoiding any reminders of the trauma and becoming emotionally numb. However, it is not just the nature and the severity of the traumatic event that causes PTSD. Not only are the survivors of the traumas likely to get PTSD, but also those who may merely witness the trauma. Beyond that, PTSD has recently been linked to people who merely *hear or learn about* the trauma.

The best advice for those who have experienced trauma is to **talk about it** with trusted others who care. However – over the long run – it can have an effect on the person(s) who listen and care. These listeners are *indirectly* exposed to the trauma and *directly* exposed to the emotional suffering conveyed to them. Helpful listening requires **empathy** – understanding what the others are suffering by putting yourself in *"the other person's shoes."*

As a listener, you will imagine the feelings the sufferer experienced during and after the trauma – picturing it in your own mind. You may find yourself wrapped up in feelings of outrage, fear or despair. The listener can also experience thoughts, memories or images of the trauma intruding at unexpected times. As a caregiver, you can even have nightmares similar to those of the survivor of the trauma.

According to psychologist Charles Figley ² – an expert on trauma – caring for someone who has been traumatized can lead to the above symptoms. He calls this *"compassionate stress"* and views it as part of *"the cost of caring"* for traumatized individuals. This stress is disturbing, but it is usually only temporary. However – if you deal extensively with trauma survivors – it can develop into **compassion fatigue**, which can impair your own abilities. You can become exhausted and display symptoms of PTSD yourself – anxiety, reliving the trauma, avoidance and/or numbing.

Figley identifies two factors that can prevent compassion fatigue from developing:

1. gaining a feeling of accomplishment by helping to relieve the suffering of another, and
2. being able to maintain an adequate emotional and psychological distance from the survivor.

The closer you are to the survivor, the harder it will be to maintain emotional and psychological distance. Being empathetic needs a balance between emotional involvement and emotional detachment. This balance is hard to maintain. If your compassion stress involves someone who is extremely close to you, you may want to tell yourself, *"It didn't happen to me, so I have no reason to feel so distressed."* Even so, denying the feelings you have can be harmful to you in the long run.

As a confidant, if you are experiencing compassion stress – you need to take it seriously. When you are experiencing stress and need help yourself, it is very difficult – if not impossible – to help others. You can take the same steps that the trauma survivor has taken. Talk to someone about the stress you are experiencing. Get the social support that you need.

**If you don't take care of yourself,
how can you continue to help others?**

Those who want to help others often do not think of their own welfare. However, if you want to continue to help others, this means that you also have to take care of yourself. As you probably have told others, "*Prevention is the best medicine.*" Don't put off getting help for yourself. Talk to someone who is empathetic and trustworthy. If you still have difficulties that interfere with your ability to function, get professional help from a psychologist, psychiatrist, social worker, minister, counselor or physician.

1 Adapted from Jon G. Allen's "Trauma also affects friends and family," *The Menninger Letter*, December, 1995, page 3.

2 More information on this topic can be obtained from Figley, Charles R. (Ed.), *Compassion Fatigue: Coping with Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized*, New York, Brunner/Mazel, 1995.