

HANDOUTS & ASSESSMENTS



*Countering  
the Impact*  
*Handouts*

Identifying and overcoming burnout and  
embracing resilience



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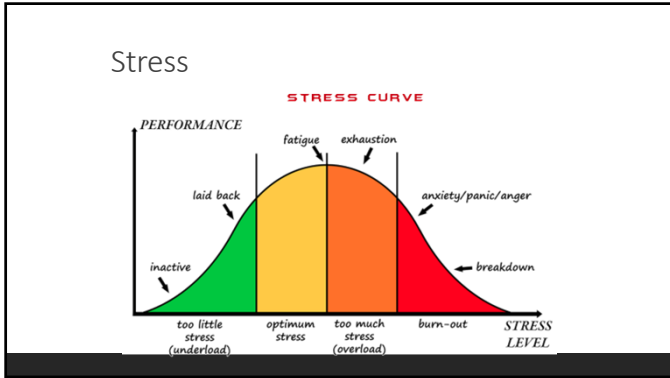
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Stigma of Mental Health

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Compassion Satisfaction:  
Satisfied by helping those who suffer; appreciate the value of their work.

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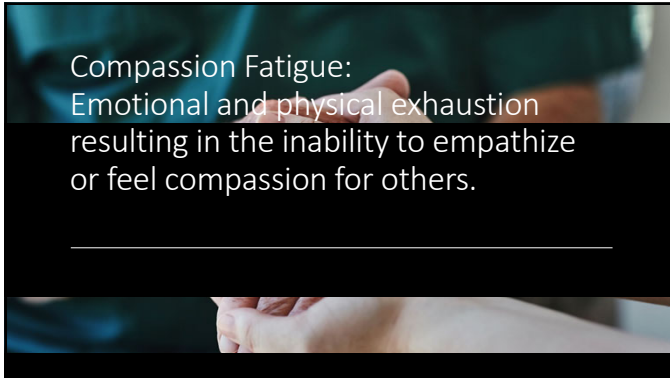
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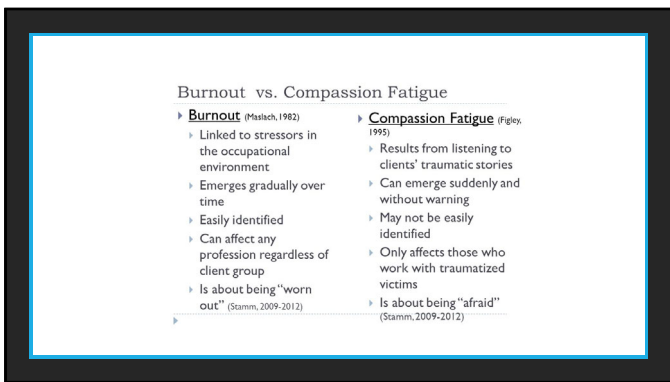
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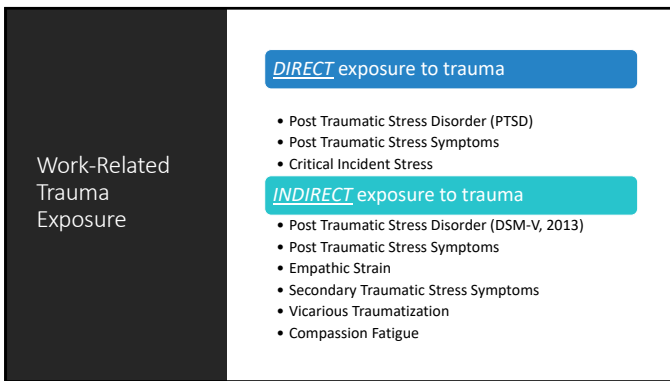
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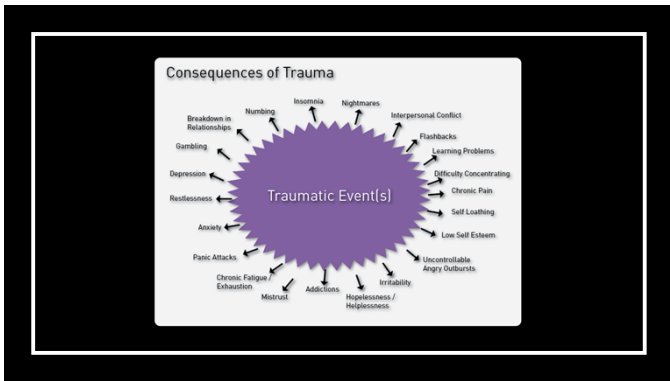
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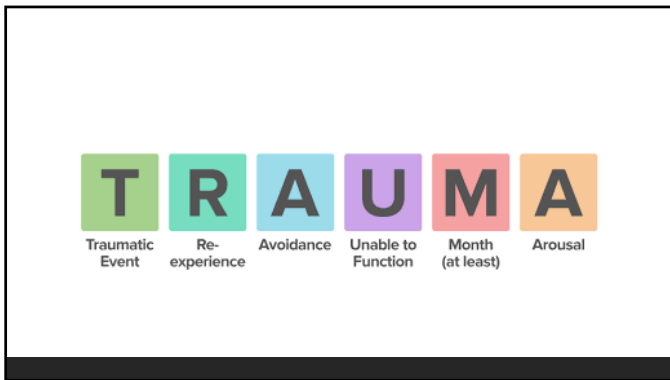
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Understanding the Difference Between Traumatic Stress and Vicarious Traumatization	
Traumatic Stress	Vicarious Traumatization
<ul style="list-style-type: none"> <li>• Extreme emotionality or absence of emotion</li> <li>• Fearful, jumpy, exaggerated startle response</li> <li>• Flashbacks</li> </ul>	<ul style="list-style-type: none"> <li>• Overly involved with or avoidance of victim/survivor</li> <li>• Hypervigilance and fear for one's own safety (the world no longer feels safe and people can't be trusted)</li> <li>• Intrusive thoughts and images, or nightmares from victims' stories</li> </ul>

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### Examples of Vicarious Traumatization: Personal

- Physical
  - Rapid pulse/breathing, headaches, impaired immune system, fatigue, aches
- Emotional
  - Feelings of powerlessness, numbness, anxiety, guilt, fear, anger, depletion, hypersensitivity, sadness, helplessness, severe emotional distress or physical reactions to reminders
- Behavioral
  - Irritability, sleep and appetite changes, isolate from friends and family, self destructive behavior, impatience, nightmares, hypervigilance, moody, easily startled or frightened
- Spiritual
  - Loss of purpose, loss of meaning, questioning goodness versus evil, disillusionment, questioning prior religious beliefs, pervasive hopelessness
- Cognitive
  - Diminished concentration, cynicism, pessimism, preoccupation with clients, traumatic imagery, inattention, self doubt, racing thoughts, recurrent and unwanted distressing thoughts
- Relational
  - Withdrawn, decreased interest in intimacy or sex, isolation from friends or family, minimization of others' concerns, projection of anger or blame, intolerance, mistrust

(Adapted from J. Yassen in Figley, 1995)

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### Examples of Vicarious Traumatization: Professional

- Performance
  - Decrease in quality/quantity of work, low motivation, task avoidance or obsession with detail, working too hard, setting perfectionist standards, difficulty with inattention, forgetfulness
- Morale
  - Decrease in confidence, decrease in interest, negative attitude, apathy, dissatisfaction, demoralization, feeling undervalued and unappreciated, disconnected, reduced compassion
- Relational
  - Detached/withdrawn from co-workers, poor communication, conflict, impatience, intolerance of others, sense of being the "only one who can do the job"
- Behavioral
  - Calling out, arriving late, overwork, exhaustion, irresponsibility, poor follow-through

(Adapted from J. Yassen in Figley, 1995)

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## Risk Factors

<p><b>Personal</b></p> <ul style="list-style-type: none"> <li>• Trauma history</li> <li>• Pre-existing psychological disorder</li> <li>• Young age</li> <li>• Isolation, inadequate support system</li> <li>• Loss in last 12 months</li> </ul>	<p><b>Professional</b></p> <ul style="list-style-type: none"> <li>• Lack of quality supervision</li> <li>• High percentage of trauma survivors in caseload</li> <li>• Little experience</li> <li>• Worker/organization mismatch</li> <li>• Lack of professional support system</li> <li>• Inadequate orientation and training for role</li> </ul>
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(Bonach and Heckert, 2012; Slattery and Goodman, 2009; Bell, Kulkarni, et al, 2003; Cornille and Meyers, 1999)

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Small drops  
of poison

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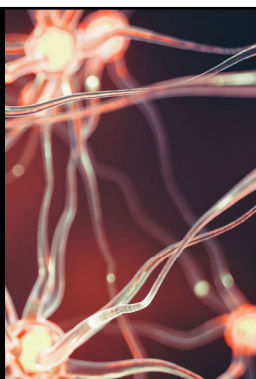
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Neurons that  
fire together,  
wire together.



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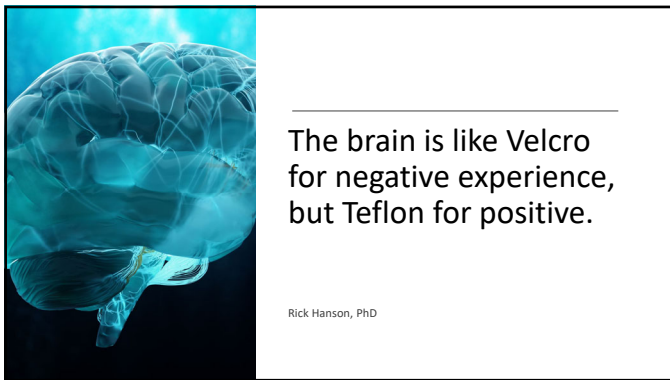
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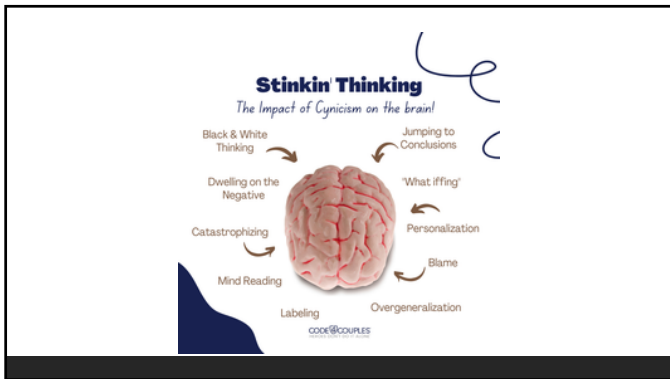
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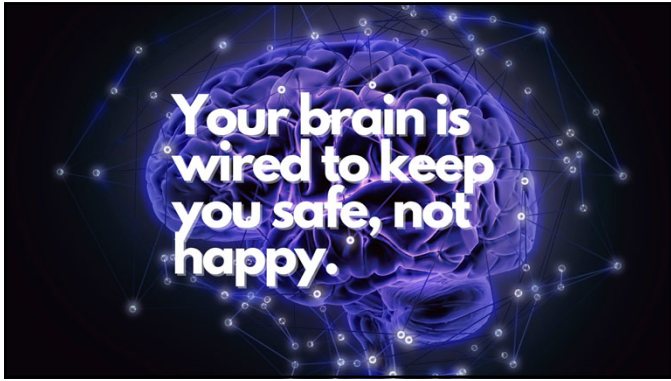
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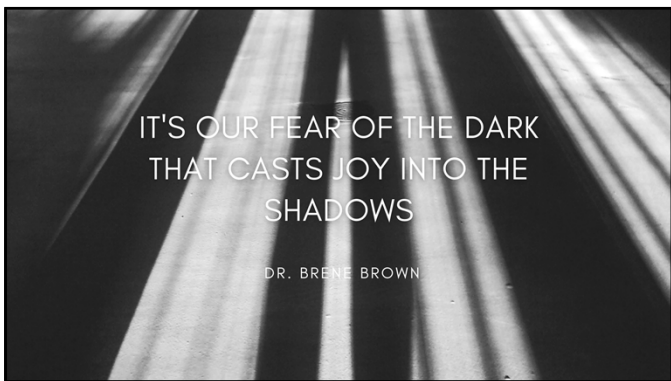
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## What to watch for

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|-------------------------------------|---------------------------------------|
| Hopeless/Helpless                   | Irrational fear or increased fears    |
| Increased Control                   | Uppers and downers                    |
| Rage                                | Starting fights                       |
| Sleeplessness                       | Risk behavior                         |
| Increased disconnection from others | All of the sudden seems more at peace |
| Increased numbing                   | Blame/Victim                          |

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- Nothing I do really makes a difference
- I can't do this anymore
- Does it really matter?

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Being impacted is human

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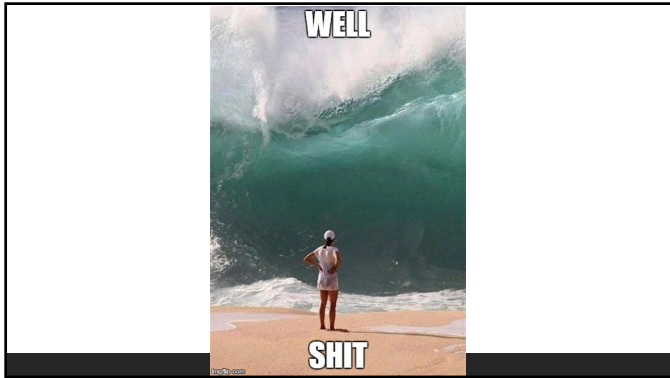
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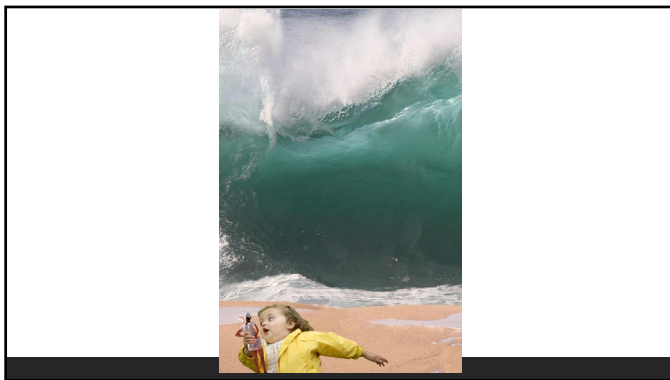
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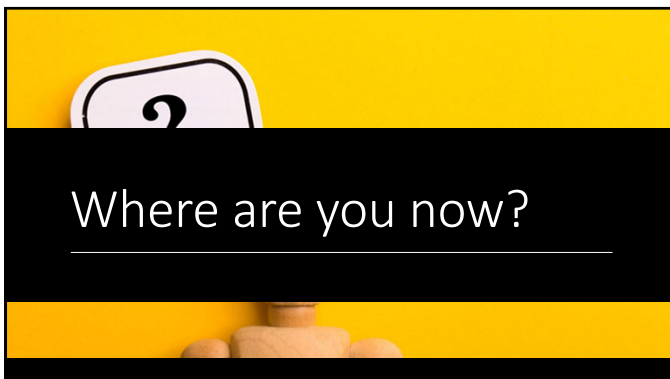
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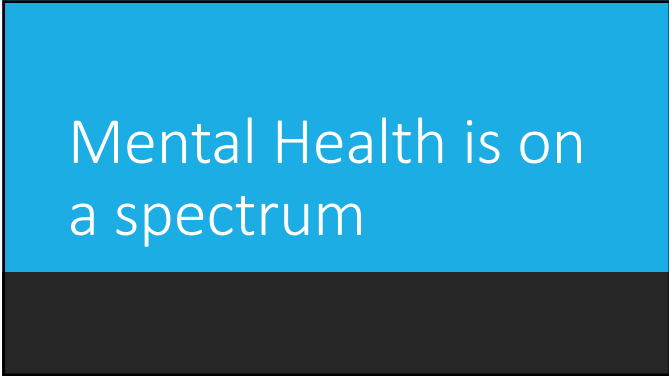
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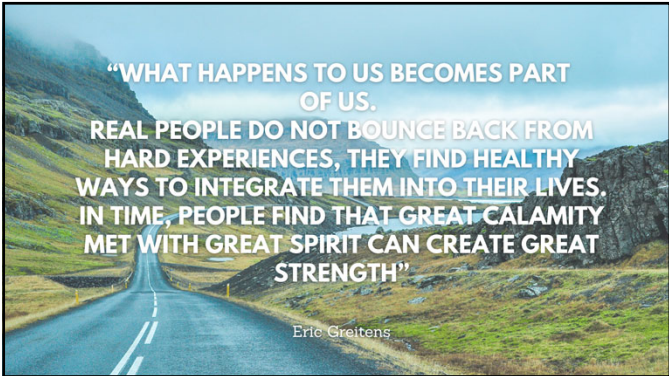
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## 10 Factors that Contribute to Resilience

- |   |                       |
|---|-----------------------|
| Positive Attitude                           | Recognizing Strengths |
| Moral Compass                               | Resilient Role Model  |
| Supportive Social Network                   | Active Coping         |
| Emotional, Physical, and Cognitive Training | Flexible Thinking     |
| Facing Fears                                | Physical Fitness      |

(Southwick & Charney, 2012)

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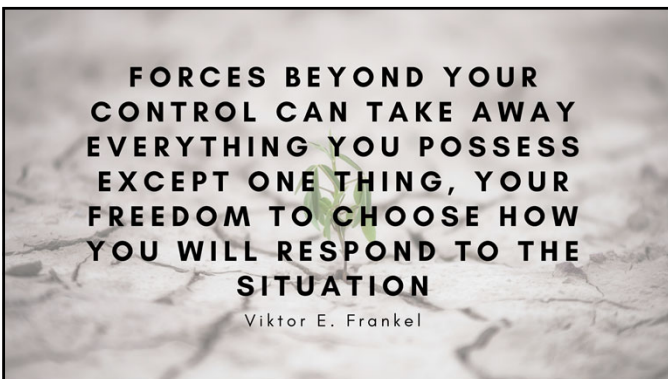
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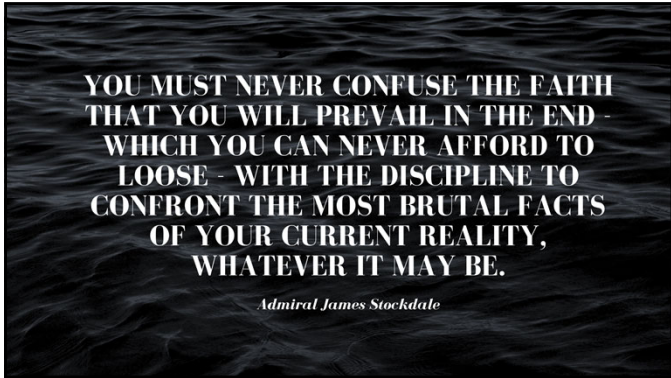
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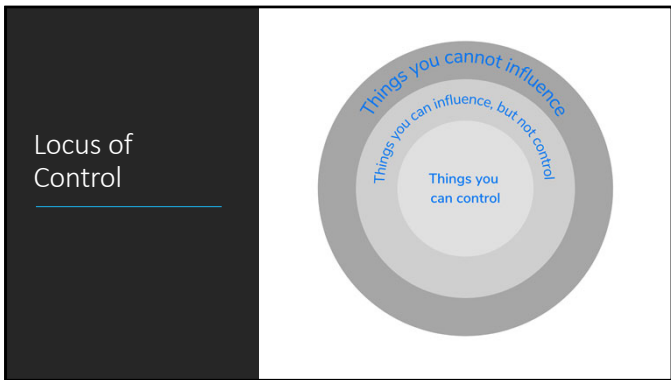
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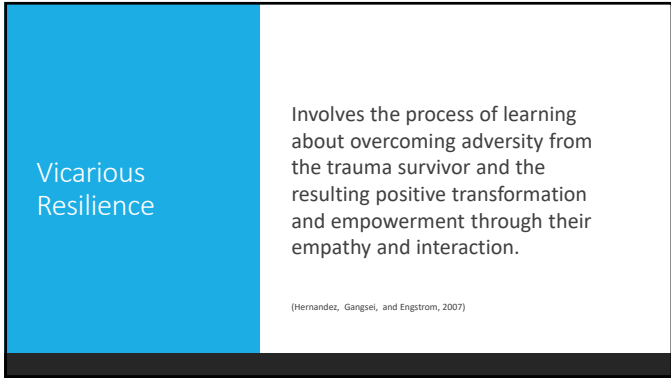
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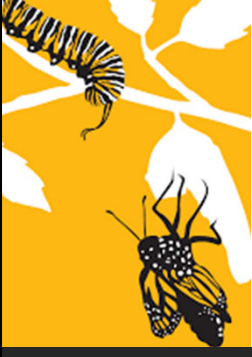
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## Impact of Vicarious Resilience

- Greater perspective and appreciation of own problems
- More optimistic, motivated, efficacious, and reenergized
- Increased sense of hope, understanding, and belief in the possibility of recovery from trauma and other serious challenges
- Profound sense of commitment to, and finding meaning from the work

• (Hernandez, et al, 2007; Engstrom, et al, 2008)

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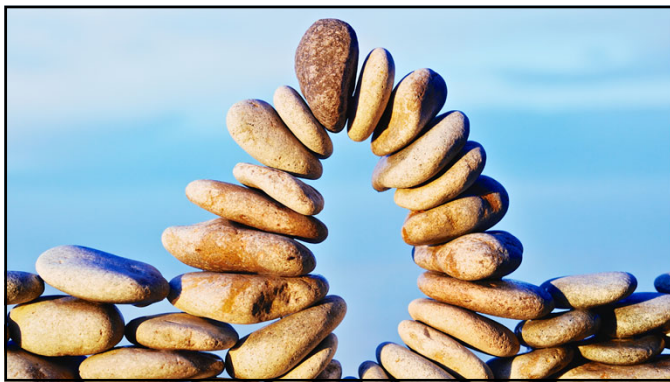
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## Self Compassion Research (2020)

Greater self-compassion predicted a greater sense of personal accomplishment and more compassion satisfaction.

Self-compassion protected against general psychological distress, post-traumatic stress, secondary traumatic stress, depersonalization, and emotional exhaustion.

Compassionate love protected against depersonalization and was associated with a greater sense of personal accomplishment and compassion satisfaction.

McDonald, M. A., Meekes, S. J., & Lancaster, C. L. (2020). Compassion for oneself and others protects the mental health of First Responders. *Mindfulness*, 11(3), 659-671. <https://doi.org/10.1007/s12671-020-01527-y>

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Self-Compassion

Kindness + Common Humanity + Mindfulness

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Self Compassion

Self Judgement + Isolation + Overidentification

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SHAME

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Self Kindness vs. Self Judgement

- ✓ Active Practice
- 🔊 Voice and Tone
- 🧑 Mammalian Caregiving and Biology
- ❤️ Kindness is being kind even in the midst of our imperfection.

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Common Humanity vs. Isolation

"Something has gone wrong"

"This shouldn't be happening"

Comparison..

We compare other people's successes to our failure reel.

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Mindfulness vs. Overidentification

Mindfulness is the practice of paying attention to what is happening in the present moment as it's happening and ACCEPTING the experience.

You can be in touch with the difficult emotion without running away with the storyline of the difficult emotion.

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### Self Compassion

#### Working with Difficult Emotions

Name It & Tame It  
Label and note the feeling  
Feel It & You Heal It  
Find the emotion in our body and stay in contact  
Soften – Soothe – Allow

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**Direct  
your  
course**

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- CHANGING MINDSET
- TEMPERATURE CHECK
- BREATHE DEEPLY
- BRIEF GREETING
- DECOMPRESS
- RE-ENGAGEMENT
- COMMUNICATION

# Establish a Ritual

Hold The Line

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Holding the Line means that you are determining your course and "holding the line" to counter the impact of law enforcement.

Resilience is about integrating what happens and finding meaning.

It is essential that you use the skills given to counter the impact especially your mindset, communication, and courage.

Chart your own course and continually assess and adapt to ensure that spillover does not run your life.

## HOLD THE LINE

Hold The Line

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HEROES DON'T DO IT ALONE





cyndi@code4couples.com

IG: Code4Couples

FB: code4couples

Code4couples.com

Holdthelinebook.com



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## PROFESSIONAL QUALITY OF LIFE SCALE (PROQOL)

### COMPASSION SATISFACTION AND COMPASSION FATIGUE (PROQOL) VERSION 5 (2009)

When you [help] people you have direct contact with their lives. As you may have found, your compassion for those you [help] can affect you in positive and negative ways. Below are some questions about your experiences, both positive and negative, as a [helper]. Consider each of the following questions about you and your current work situation. Select the number that honestly reflects how frequently you experienced these things in the last 30 days.

**1=Never**

**2=Rarely**

**3=Sometimes**

**4=Often**

**5=Very Often**

- \_\_\_\_\_ 1. I am happy.
- \_\_\_\_\_ 2. I am preoccupied with more than one person I [help].
- \_\_\_\_\_ 3. I get satisfaction from being able to [help] people.
- \_\_\_\_\_ 4. I feel connected to others.
- \_\_\_\_\_ 5. I jump or am startled by unexpected sounds.
- \_\_\_\_\_ 6. I feel invigorated after working with those I [help].
- \_\_\_\_\_ 7. I find it difficult to separate my personal life from my life as a [helper].
- \_\_\_\_\_ 8. I am not as productive at work because I am losing sleep over traumatic experiences of a person I [help].
- \_\_\_\_\_ 9. I think that I might have been affected by the traumatic stress of those I [help].
- \_\_\_\_\_ 10. I feel trapped by my job as a [helper].
- \_\_\_\_\_ 11. Because of my [helping], I have felt "on edge" about various things.
- \_\_\_\_\_ 12. I like my work as a [helper].
- \_\_\_\_\_ 13. I feel depressed because of the traumatic experiences of the people I [help].
- \_\_\_\_\_ 14. I feel as though I am experiencing the trauma of someone I have [helped].
- \_\_\_\_\_ 15. I have beliefs that sustain me.
- \_\_\_\_\_ 16. I am pleased with how I am able to keep up with [helping] techniques and protocols.
- \_\_\_\_\_ 17. I am the person I always wanted to be.
- \_\_\_\_\_ 18. My work makes me feel satisfied.
- \_\_\_\_\_ 19. I feel worn out because of my work as a [helper].
- \_\_\_\_\_ 20. I have happy thoughts and feelings about those I [help] and how I could help them.
- \_\_\_\_\_ 21. I feel overwhelmed because my case [work] load seems endless.
- \_\_\_\_\_ 22. I believe I can make a difference through my work.
- \_\_\_\_\_ 23. I avoid certain activities or situations because they remind me of frightening experiences of the people I [help].
- \_\_\_\_\_ 24. I am proud of what I can do to [help].
- \_\_\_\_\_ 25. As a result of my [helping], I have intrusive, frightening thoughts.
- \_\_\_\_\_ 26. I feel "bogged down" by the system.
- \_\_\_\_\_ 27. I have thoughts that I am a "success" as a [helper].
- \_\_\_\_\_ 28. I can't recall important parts of my work with trauma victims.
- \_\_\_\_\_ 29. I am a very caring person.
- \_\_\_\_\_ 30. I am happy that I chose to do this work.

## YOUR SCORES ON THE PROQOL: PROFESSIONAL QUALITY OF LIFE SCREENING

Based on your responses, place your personal scores below. If you have any concerns, you should discuss them with a physical or mental health care professional.

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### Compassion Satisfaction \_\_\_\_\_

Compassion satisfaction is about the pleasure you derive from being able to do your work well. For example, you may feel like it is a pleasure to help others through your work. You may feel positively about your colleagues or your ability to contribute to the work setting or even the greater good of society. Higher scores on this scale represent a greater satisfaction related to your ability to be an effective caregiver in your job.

The average score is 50 (SD 10; alpha scale reliability .88). About 25% of people score higher than 57 and about 25% of people score below 43. If you are in the higher range, you probably derive a good deal of professional satisfaction from your position. If your scores are below 40, you may either find problems with your job, or there may be some other reason—for example, you might derive your satisfaction from activities other than your job.

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### Burnout \_\_\_\_\_

Most people have an intuitive idea of what burnout is. From the research perspective, burnout is one of the elements of Compassion Fatigue (CF). It is associated with feelings of hopelessness and difficulties in dealing with work or in doing your job effectively. These negative feelings usually have a gradual onset. They can reflect the feeling that your efforts make no difference, or they can be associated with a very high workload or a non-supportive work environment. Higher scores on this scale mean that you are at higher risk for burnout.

The average score on the burnout scale is 50 (SD 10; alpha scale reliability .75). About 25% of people score above 57 and about 25% of people score below 43. If your score is below 43, this probably reflects positive feelings about your ability to be effective in your work. If you score above 57 you may wish to think about what at work makes you feel like you are not effective in your position. Your score may reflect your mood; perhaps you were having a “bad day” or are in need of some time off. If the high score persists or if it is reflective of other worries, it may be a cause for concern.

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### Secondary Traumatic Stress \_\_\_\_\_

The second component of Compassion Fatigue (CF) is secondary traumatic stress (STS). It is about your work related, secondary exposure to extremely or traumatically stressful events. Developing problems due to exposure to other's trauma is somewhat rare but does happen to many people who care for those who have experienced extremely or traumatically stressful events. For example, you may repeatedly hear stories about the traumatic things that happen to other people, commonly called Vicarious Traumatization. If your work puts you directly in the path of danger, for example, field work in a war or area of civil violence, this is not secondary exposure; your exposure is primary. However, if you are exposed to others' traumatic events as a result of your work, for example, as a therapist or an emergency worker, this is secondary exposure. The symptoms of STS are usually rapid in onset and associated with a particular event. They may include being afraid, having difficulty sleeping, having images of the upsetting event pop into your mind, or avoiding things that remind you of the event.

The average score on this scale is 50 (SD 10; alpha scale reliability .81). About 25% of people score below 43 and about 25% of people score above 57. If your score is above 57, you may want to take some time to think about what at work may be frightening to you or if there is some other reason for the elevated score. While higher scores do not mean that you do have a problem, they are an indication that you may want to examine how you feel about your work and your work environment. You may wish to discuss this with your supervisor, a colleague, or a health care professional.

## WHAT IS MY SCORE AND WHAT DOES IT MEAN?

In this section, you will score your test so you understand the interpretation for you. To find your score on **each section**, total the questions listed on the left and then find your score in the table on the right of the section.

### Compassion Satisfaction Scale

Copy your rating on each of these questions on to this table and add them up. When you have added them up you can find your score on the table to the right.

3. \_\_\_\_\_  
 6. \_\_\_\_\_  
 12. \_\_\_\_\_  
 16. \_\_\_\_\_  
 18. \_\_\_\_\_  
 20. \_\_\_\_\_  
 22. \_\_\_\_\_  
 24. \_\_\_\_\_  
 27. \_\_\_\_\_  
 30. \_\_\_\_\_

**Total:** \_\_\_\_\_

The sum of my Compassion Satisfaction questions is	So My Score Equals	And my Compassion Satisfaction level is
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

### Burnout Scale

On the burnout scale you will need to take an extra step. Starred items are "reverse scored." If you scored the item 1, write a 5 beside it. The reason we ask you to reverse the scores is because scientifically the measure works better when these questions are asked in a positive way though they can tell us more about their negative form. For example, question 1. "I am happy" tells us more about

- \*1. \_\_\_\_\_ = \_\_\_\_\_  
 \*4. \_\_\_\_\_ = \_\_\_\_\_  
 8. \_\_\_\_\_  
 10. \_\_\_\_\_  
 \*15. \_\_\_\_\_ = \_\_\_\_\_  
 \*17. \_\_\_\_\_ = \_\_\_\_\_  
 19. \_\_\_\_\_  
 21. \_\_\_\_\_  
 26. \_\_\_\_\_  
 \*29. \_\_\_\_\_ = \_\_\_\_\_

**Total:** \_\_\_\_\_

The sum of my Burnout Questions is	So my score equals	And my Burnout level is
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High

You Wrote	Change to	
	5	the effects of helping when you are <i>not</i> happy so you reverse the score
2	4	
3	3	
4	2	
5	1	

### Secondary Traumatic Stress Scale

Just like you did on Compassion Satisfaction, copy your rating on each of these questions on to this table and add them up. When you have added them up you can find your score on the table to the right.

2. \_\_\_\_\_  
 5. \_\_\_\_\_  
 7. \_\_\_\_\_  
 9. \_\_\_\_\_  
 11. \_\_\_\_\_  
 13. \_\_\_\_\_  
 14. \_\_\_\_\_  
 23. \_\_\_\_\_  
 25. \_\_\_\_\_  
 28. \_\_\_\_\_

**Total:** \_\_\_\_\_

The sum of my Secondary Trauma questions is	So My Score Equals	And my Secondary Traumatic Stress level is
22 or less	43 or less	Low
Between 23 and 41	Around 50	Average
42 or more	57 or more	High



To Whom It May Concern:

Dr. Kristin Neff grants permission to use the Self-Compassion Scale (Neff, 2003) for any purpose whatsoever, including research, clinical work, teaching, etc. Please cite:

Neff, K. D. (2003). Development and validation of a scale to measure self-compassion. *Self and Identity*, 2, 223-250.

Permission is also given to translate the Self-Compassion Scale using the analytic approach to validate the factor structure that was established in:

Neff, K. D., Tóth-Király, I., Yarnell, L., Arimitsu, K., Castilho, P., Ghorbani, N.,... Mantios, M. (2019). Examining the Factor Structure of the Self-Compassion Scale using exploratory SEM bifactor analysis in 20 diverse samples: Support for use of a total score and six subscale scores. *Psychological Assessment*, 31 (1), 27-45.

Best wishes,

Kristin Neff, PhD

## Self-Compassion Scale (SCS)

### HOW I TYPICALLY ACT TOWARDS MYSELF IN DIFFICULT TIMES

Please read each statement carefully before answering. For each item, indicate how often you behave in the stated manner, using the following 1-5 scale. Please answer according to what really reflects your experience rather than what you think your experience should be.

**Almost  
never**

**1**

**2**

**3**

**4**

**Almost  
always**

**5**

1. I'm disapproving and judgmental about my own flaws and inadequacies.
2. When I'm feeling down I tend to obsess and fixate on everything that's wrong.
3. When things are going badly for me, I see the difficulties as part of life that everyone goes through.
4. When I think about my inadequacies, it tends to make me feel more separate and cut off from the rest of the world.
5. I try to be loving towards myself when I'm feeling emotional pain.
6. When I fail at something important to me I become consumed by feelings of inadequacy.
7. When I'm down, I remind myself that there are lots of other people in the world feeling like I am.
8. When times are really difficult, I tend to be tough on myself.
9. When something upsets me I try to keep my emotions in balance.
10. When I feel inadequate in some way, I try to remind myself that feelings of inadequacy are shared by most people.
11. I'm intolerant and impatient towards those aspects of my personality I don't like.
12. When I'm going through a very hard time, I give myself the caring and tenderness I need.
13. When I'm feeling down, I tend to feel like most other people are probably happier than I am.
14. When something painful happens I try to take a balanced view of the situation.
15. I try to see my failings as part of the human condition
16. When I see aspects of myself that I don't like, I get down on myself.
17. When I fail at something important to me I try to keep things in perspective.
18. When I'm really struggling, I tend to feel like other people must be having an easier time of it.
19. I'm kind to myself when I'm experiencing suffering.
20. When something upsets me I get carried away with my feelings.
21. I can be a bit cold-hearted towards myself when I'm experiencing suffering.
22. When I'm feeling down I try to approach my feelings with curiosity and openness.
23. I'm tolerant of my own flaws and inadequacies.
24. When something painful happens I tend to blow the incident out of proportion.
25. When I fail at something that's important to me, I tend to feel alone in my failure.
26. I try to be understanding and patient towards those aspects of my personality I don't like.

#### Reference

[Neff, K. D. \(2003\). Development and validation of a scale to measure self-compassion. \*Self and Identity\*, 2, 223-250.](#)

## SCORING KEY

Self-Kindness Items: 5, 12, 19, 23, 26

Self-Judgment Items (reverse scored): 1, 8, 11, 16, 21

Common Humanity Items: 3, 7, 10, 15

Isolation Items (reverse scored): 4, 13, 18, 25

Mindfulness Items: 9, 14, 17, 22

Over-identification Items (reverse scored): 2, 6, 20, 24

To reverse score items (1=5, 2=4, 3=3, 4=2, 5=1).

To compute a total self-compassion score, first reverse score the negative subscale items - self-judgment, isolation, and over-identification. Then take the mean of each subscale, and compute a total mean (the average of the six subscale means).

When examining subscale scores, higher scores on the self-judgment, isolation and over-identification scale indicate *less* self-compassion before reverse-coding, and *more* self-compassion after reverse coding. You can choose to report subscale scores with or without reverse-coding, but these three negative subscales must be reverse coded before calculating a total self-compassion score.

Note that the scoring procedures are slightly different than that used in the original scale article (Neff, 2003), in which items were totaled rather than averaged. However, it is easier to interpret the scores of the total mean is used and most researchers currently report total SCS scores on a five-point scale.

## NORMS AND SCORE SIGNIFICANCE

There are no clinical norms or scores which indicate that an individual is high or low in self-compassion. Rather, SCS scores are mainly used in a comparative manner to examine outcomes for people scoring higher or lower in self-compassion.

As an ad hoc rubric, however, you can consider scores 1.0-2.49 to be low, between 2.5-3.5 to be moderate, and 3.51-5.0 to be high. When trying to determine whether self-compassion levels are high or low relevant to a particular sample, some researchers use a median split.

## SCALE DEVELOPMENT AND VALIDITY

The SCS was developed in a sample of college undergraduates (Neff, 2003a). After identifying 71 items that were easily understood by students using a small pilot sample ( $n=68$ ), exploratory factor analyses (EFA) were used with a larger sample ( $n=391$ ) to identify 26 items that loaded best on separate subscales representing the six components of self-compassion. Confirmatory factor analyses (CFA) were used to provide support that scale items fit as intended with the proposed a priori theoretical model. An initial CFA found a marginal fit to a higher-order model representing a global factor of self-compassion and six subscale factors. Cross validation using CFA in a second sample ( $N=232$ ) found adequate fit for a higher-order model. Total SCS scores evidenced good internal reliability (Cronbach's  $\alpha = .92$ ), as did the six subscales (Cronbach's  $\alpha$  ranging from .75 to .81). Test-retest reliability over a three-week interval was also good for the total score (Cronbach's  $\alpha = .93$ ) and six subscale scores (with Cronbach's  $\alpha$  ranging from .80 to .88).



More recently, bifactor Exploratory Structural Equation Modeling (ESEM) has been used to verify the factor structure of the SCS rather than a higher order model, as it is more theoretically appropriate. [Neff et al. \(2019\)](#) used bifactor ESEM to examine the factor structure of the SCS in 20 diverse samples ( $N = 11,685$ ), and excellent fit was found for a model of one general factor of self-compassion and six specific subscale factors. Moreover, 95% of the reliable variance could be attributed to a general factor. Although there has been debate over whether or not the SCS should be used as a total score or as separate positive and negative scores, empirical evidence tends to support the use of a total score rather than two separate scores ([Neff, 2018](#); [Neff, 2020](#)). The factor structure of the SCS has also been found to be culturally invariant across 18 international samples ([Tóth-Király & Neff, 2020](#)).

For an in-depth discussion of the psychometric properties of the SCS, see [Neff and Tóth-Király \(in press\)](#).

### ANALYTIC APPROACH FOR VALIDATION AND TRANSLATION

In order to validate the factor structure of the scale (including for translations) we strongly recommend the use of bifactor ESEM, as this is the most appropriate method to assess the operation of self-compassion components as a system. Information on this analytic method can be found in ([Neff et al., 2019](#)). Moreover, appropriate syntax for how to conduct these analyses for the SCS using Mplus can be found in the online supplement to that article and also [here](#).

Many translations of the SCS already exist can be found [here](#). You are free to create a new translation of the SCS, but we ask that you use bifactor ESEM to validate the scale structure since it is most appropriate.