IS THE COST OF CARING TOO HIGH? STOP THE EXODUS!

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1. Introduction

Mary had always been an energetic and dedicated social worker. Now, at the age of 34, she's tired, cynical and lonely. She's angry at the social welfare system because she has a caseload of more than 250, not enough time to do her work properly and feels that her clients are not appreciative enough of her efforts. Although she has always enjoyed good relationships with her clients, she often feels irritated and frustrated when seeing them. Even talking to her caring husband doesn't help to relieve the intense feelings of isolation and powerlessness that she experiences. She contemplates leaving the profession and trying her hand at selling houses.

Lombard (2006:20) mentions that professionals leaving the country to practise in other countries, or leaving the profession for other work opportunities aggravate the current shortage of social workers in South Africa. According to her, the most significant reasons for this could be ascribed to poor working conditions and meagre salaries. There are also a variety of other reasons for this exodus, but from my experience it seems that many social workers feel like Mary: angry, frustrated, anxious, depressed, low motivation for the work, detached from others, etc. This indicates that they are all experiencing a certain degree of compassion fatigue (Strydom, 2004:42).

When social service professionals are confronted with the ups and downs of others on a daily basis and experience difficult working conditions it can be concluded that the profession is inherently stressful. Mabengo (2003:41) acknowledges the stressful working conditions and the consequent difficulty in the management of occupational stress. This stress develops because of exposure to the suffering of other people and leads to professionals in care-giving[1] professions such as doctors, nurses, counsellors and social workers experiencing compassion fatigue. Left untreated, symptoms can worsen and the condition could evolve into burnout, which can cause employees to quit their jobs (Joslyn, 2002:1).

The aim of this paper is to indicate the general personality style of social workers and the predisposition of black and white respondents towards compassion fatigue in order to make some recommendation that will contribute to the national retention strategy, as announced by the Minister of Social Development (Skweyiya, 2006).

2.   DISC behavioural profile

A brief description is provided regarding the background of the DISC and the four basic behavioural styles it comprises.

2.1   Background of the DISC behavioural profile

The DISC behavioural profile can be seen as the universal language of visible behaviour. Research has shown that people display certain universal traits in terms of their behaviour (Bonnstetter et al., 2001:3). When knowledge of these traits is of such a nature that it can easily be identified, it not only increases knowledge of the self, but also knowledge of others.

Bonnstetter et al. (2001:5) emphasize that the DISC is a determination of behaviour, and does not provide an indication of the following elements.
- ✓ DISC does not measure a person's intelligence
- ✓ DISC is not an indicator of a person's values.
- ✓ DISC does not measure a person's skills and experience.
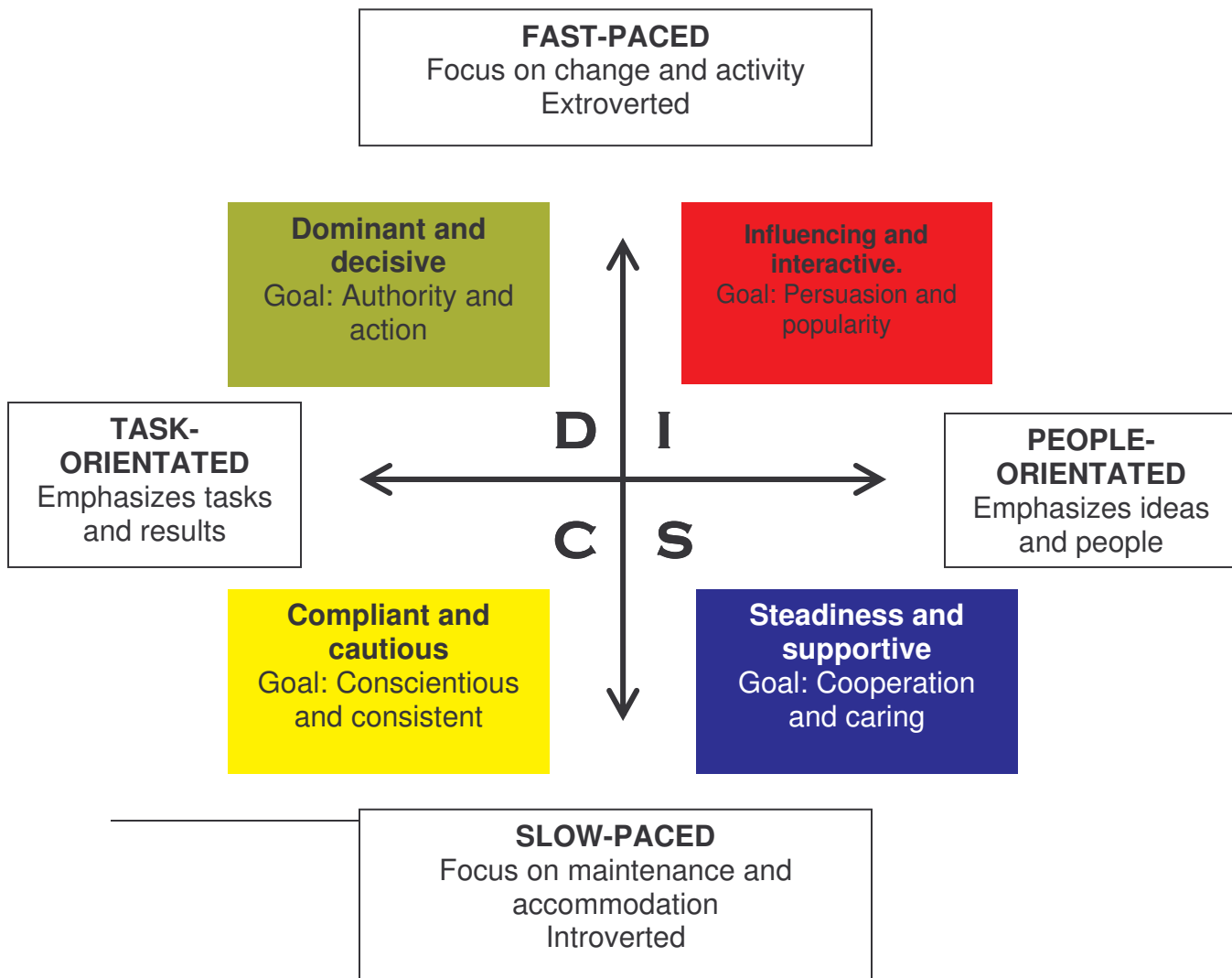- ✓ DISC is not a measure of education and training.

From this, it transpires that this measuring instrument only provides an indication of the visible behaviour that a person displays. Knowledge of own behaviour and the correct usage of this knowledge can influence the individual positively. This presenter wishes to emphasize that knowledge of a person's style should not be seen as a labelling practice. The purpose is to gain a better understanding of the person. It should help the person to feel comfortable in his/her own skin. The DISC only provides an indication of behaviour; there is no better or weaker style.

The first notable research regarding behavioural styles, and in which four different behavioural styles are identified, was conducted by Empodocles, (444 BC), who refers to earth, air, fire and water. Hippocrates (400 BC) followed with his references to Sanguine, Melancholic, Choleric en Phlegmatic; after which Galen (130 AD – 200 AD) identified blood, yellow bile, black bile and phlegm. Carel Jung (1921) referred to thinking, feeling, sensation and intuition. From 1893–1947, WM Marston probably made the most significant contribution towards the current DISC language. He also identified four basic behavioural styles, which he refers to as Dominance (D), Influencing (I), Steadiness (S) and Compliance (C). Several researchers followed on this, further refining the concept (Bonnstetter et al., 2001:28–31). This research into behaviour shows that behavioural traits can be divided into four basic quadrants. These quadrants indicate four basic styles. Persons with the same style display the same basic behaviour. A person's behaviour forms an integral part of who and what he/she is; in other words, a large part of behaviour is inherent, but also influenced by how a person grew up.

2.2 Basic behavioural styles of the DISC

The DISC is divided into four basic behavioural styles: the dominant person (D), the influencer (I), the steady person (S) and the conscientious person (C) (Boyd, 1994:45; Voges & Braund, 1995:47; Rohm & Carey, 1997:8; Rohm, 1998:20; and Bonnstetter et al., 2001:39).

It is, however, extremely important to remember that a very small group of people display pure behavioural styles. In most cases, people display a mixture of different types of behavioural style. Bonnstetter et al. (2001:39), for example, indicate that only 1.2% of people are pure Ds, 1% in I, 0.9% in S and 0.3% in C. The question can certainly be posed why these pure styles are discussed when it represents such a small percentage of the population. This researcher is of the opinion that, if there is a concept for every pure behavioural style, it can be learned[2] easily. The impact of the different styles upon one another will then also be clear. If there is a combination of styles that measures at a high value, the different styles influence one another, which can lead to certain traits being "softened", and therefore not being as prominent as would be the case if a person were to possess a pure behavioural profile. Subsequently, the basic traits of the different styles are explained according to Figure 3.

FAST-PACED
Focus on change and activity
Extroverted

Dominant and decisive
Goal: Authority and action

Influencing and interactive.
Goal: Persuasion and popularity

D **I**

TASK-ORIENTATED
Emphasizes tasks and results

PEOPLE-ORIENTATED
Emphasizes ideas and people

C **S**

Compliant and cautious
Goal: Conscientious and consistent

Steadiness and supportive
Goal: Cooperation and caring

SLOW-PACED
Focus on maintenance and accommodation
Introverted

2.2.1 Dominant style

The dominant style represents a person who favours a fast pace, likes change, and enjoys various activities. Furthermore, this behavioural style is task-oriented and very focused on results; he/she is strongly driven by his/her own will and endurance. The successful completion of tasks is of the utmost importance, while the human factor is not necessarily of great consequence; he/she sometimes appears unfriendly. The dominant style likes control, highly prizes productivity, and always wants to feel in control. If another person cannot reach a decision quickly, this is experienced as irritation, and is seen as inability on the part of that person. Under pressure the dominant style will assert itself strongly and indicate the necessary action in an autocratic manner. In the case of stress, the dominant style tends toward action, intensity and activity (Voges & Braund, 1995:79–90; Rohm & Carey, 1997:94; and Rohm, 1998:29–45).

From the above, it can be deduced that the ideal environment for a person with a dominant behavioural style, is one where he/she:
- ✓ Can be in control of him/herself and others.
- ✓ There are a variety of activities and challenges.
- ✓ The freedom exists to determine his own pace and priorities.
- ✓ The "bottom line" is important.
- ✓ There is the opportunity for growth and development.
- ✓ He/she is presented in the best possible light.

An observation is that persons in management positions often, although not always, display a dominant style of behaviour. The danger exists for these persons that they are so task-oriented that they do not always take the needs of their colleagues into account. Such an attitude on the part of the manager/supervisor can lead to unhappiness and stress on the part of fellow workers, especially once they realise that they are not acknowledged.

2.2.2 Influencing style

The person with an influencing style, like one with a dominating style, favours a fast and spontaneous pace. This person is, however, human-oriented and not task-oriented, as is the case with the dominant style. A person with this style appears flamboyant and expressive and is driven by his emotions. He is everybody's friend, easily engages in conversation and easily builds relationships. These people enjoy admiration, seek acknowledgement for their work, and do not like being ignored at all. Routine is boring to them and they are easily irritated without regular, stimulating novelty. When the person is under pressure, he becomes sarcastic and defensive. When he/she experiences stress, he/she becomes disoriented and absent-minded (Voges & Braund, 1995:125–133; Rohm & Carey, 1997:94; and Rohm, 1998:47–68).

The ideal environment for the influencing style is thus one where:
- ✓ The person can make contact with many people.
- ✓ His good work is acknowledged.

- ✓ Opportunities exist to influence others.
- ✓ Everybody has a positive attitude.
- ✓ There are comfortable working conditions and relationships.
- ✓ The work does not consist of detail and repetitive tasks.

Influencers are persons who enjoy involvement with others; they are compassionate and have empathy with other people. The fact that they have a great need for contact with others can result in an excess of socialisation, to the extent that they neglect their work. On the other hand, it should be kept in mind that they work at a fast pace and complete their work faster, which provides more time for socialisation. If the influencer distracts co-workers with their conversations it can cause stress, because the latter group is not able to attend to their work. Those with an influencing style could catch up persons[3] with a steady style, especially since both styles are people-oriented.

2.2.3 Steady style

As already mentioned, the person with a steady style is person-oriented. The pace of the style is, however, somewhat slower and more laidback than that of the influencer. These persons appear laidback but conforming. They prefer to have good relations with others and thus tend to avoid confrontation. They have a small, intimate group of friends and confidants. Insensitivity and impatience are unacceptable to them, and a strong sense of loyalty towards family, friends and work is apparent. Superficial relationships with others are not acceptable; thus they become emotionally very involved in their relationships. They are driven by their emotions. Under pressure, they will give in and when they experience stress, the tendency is to compromise or avoid making decisions (Voges & Braund, 1995:165–174; Rohm & Carey, 1997:94; and Rohm, 1998:69–90).

The ideal environment of the steady style is therefore one where:
- ✓ Identification takes place with the group.
- ✓ Appreciation takes place.
- ✓ There is a daily routine in the work environment.
- ✓ The environment does not place much pressure upon the person; tasks do not necessarily have to be completed very quickly.
- ✓ Change does not take place regularly.
- ✓ A smaller amount of tasks is done thoroughly.
- ✓ Boundaries are clearly delineated.

A person with a steady style is patient and friendly, focusing upon relationships. They are intensely involved in good relationships. Since many of these people are drawn to professions involving people, such as social work, psychology, nursing, etc. because of their good people skills, it can be derived that they will also be intensely influenced by the life experiences of their clients, making them susceptible to compassion fatigue.

2.2.4 Compliant style

Persons with a compliant style appear formal and conservative. They are task-oriented, focusing on processes for the successful completion of the task. An atmosphere that contributes towards careful planning is important to them. Persons with this style have a desire to be right, are logical in their thinking, and thorough in the completion of tasks. They often appear very critical and negative. Accuracy is essential to them and they dislike situations that they are not prepared for. They do not like surprises. Persons with this style expect others to be factual during communication, to provide the necessary facts and not to attempt to convince them through emotion. They are driven by their intellect. If they are under pressure, they will withdraw into their own world and avoid contact with the causes of stress. When excessive stress is experienced, they tend to be especially careful and make decisions with difficulty (Voges & Braund, 1995:205–215; Rohm & Carey, 1997:94; and Rohm, 1998:91–108).

The ideal environment for the compliant style is where:
- ✓ There is a specific plan according to which work is done.
- ✓ Nobody checks whether he is doing his work.
- ✓ Activities do not need to be completed quickly. The person can take his/her time and make sure that the task is done correctly.
- ✓ Roles and work descriptions are clearly delineated.
- ✓ Expectations are clear.
- ✓ Changes are brought about slowly and carefully.
- ✓ Positive feedback is received for new ideas toward improvements.

These persons are very critical of themselves and the environment. Everything is evaluated and analysed. This can result in low self-esteem, since they are overly conscious of their own shortcomings. Their task-oriented nature can also lead to a lack of attention to the person involved in the process. This doesn't always help them to form good relationships with other people.

In this section attention was briefly paid to the four basic behavioural styles. This information explains how people display basic identifiable behavioural styles that can be utilised to improve communication with them, as well as their self-knowledge. Each style responds to stress in a unique manner.

3.   Stress, compassion fatigue and burnout

In this next part of the paper attention will briefly be paid to the concepts of stress and burnout. It will also show that compassion fatigue is a particular form of burnout.

3.1   Stress

The occurrence of stress among social workers is an important issue, since the result of too high stress levels over a prolonged period could lead to these persons not doing their work effectively and/or quit their job. Work of a meagre standard may result in unethical behaviour, since the interest of the client is not treated professionally.

Stress begins with a stressor. A stressor is seen as a demand, expectation, or situation that derails a person's equilibrium, resulting in a stress reaction. This reaction occurs at the emotional as well as the physiological level, and reactions can be observed at both these levels. The emotional reaction results in responses such as anxiety, worry, frustration and apathy, while the physiological reaction prepares the body for physical action. Physiological processes prepare the person to fight or flee. This reaction of the body to the stressor is seen as stress. When the stressor no longer plays a role, the body relaxes and physiological processes once again return to normal. However, if a person is the victim of this stress reaction for too long and too often without intervention, he can eventually no longer return to equilibrium, which can lead to stress-related illnesses (cf. Zastrow, 2006:392; Kraft, 2006:29–30; and Davidson, 1999:74). When it comes to people in the care-giving professions this stress could lead to compassion fatigue, which is a form of stress (cf. Figure 1).

3.2   Burnout

The social worker that is subject to work-related stressors over long periods of time without any relief can also contract stress-related illnesses, which can lead to burnout, an extreme form of stress.

Durrance (2007) and Meier & Beresford (2006:1046) identify the following classic signs of burnout:
- ✓ Increased emotional, psychological and physical fatigue that is not reduced with sleeping.
- ✓ An increased feeling of isolation of the self from others and avoidance behaviour.
- ✓ A decrease of effectiveness in terms of performance, both at work and home.

The person will begin to display symptoms such as extreme fatigue, inability to rest, critique towards self, loss of appetite, feelings of limitation, cynicism, reduced attention span, search for escape, isolation from friends and family, and physical problems such as headache, backache, digestive problems, ulcers, decreased immunity, etc. (cf. Table 1).

Neukrug (2002:4–14) describes eight traits necessary to be a successful helper. These include empathy, openness towards others, sincerity, a high level of internality (high locus of control in taking responsibility), life experience, good emotional health, ability to build relationships, and competence in work. If the symptoms of burnout are compared with the traits necessary for effective social work, it is clear that a burnt-out social worker cannot be successful within the social work profession.

Collings & Murray (1996:376) and Storey & Billingham (2001:659) found that aspects such as relationships with clients, workload, problematic work relationships, the bad image of the social worker, inadequate remuneration and the type of organisation for which the person is working have the potential to cause stress. Storey & Billingham (2001:661–662) also identify a number of causes of stress in social workers. They identify aspects such as the physical work environment, role overload, problematic work

relationships, the climate of decision making within the organisation (insensitivity regarding needs), social workers that are not acknowledged for the important work they perform, even as the community presses them for good service delivery and finally the interconnection of work and home. Correspondingly, Zastrow (2006:393) is of the opinion that excessively long working hours, excessive administration, inadequate training, ungrateful clients, too little remuneration, a feeling of helplessness and problematic relationships within the office can, amongst other things, lead to burnout. If the named stress factors are compared to Figley's (2002b) ethological model for compassion fatigue, it is clear that social workers are at a high risk of getting compassion fatigue and, if left untreated, burnout in the long run.

3.3   Compassion fatigue

Compassion fatigue, sometimes known as vicarious trauma or secondary traumatic stress, affects people who are exposed to the traumatic suffering of others. This includes doctors, nurses, emergency-service personnel, counsellors, clergy members and social workers. If left untreated, the symptoms could evolve into burnout (Joslyn, 2002). From this explanation it seems that compassion fatigue isn't seen as burnout, although it could develop into this. On the other hand, it seems that Figley (2002a) and Pfifferling & Gilley (2000) have a different opinion, as they see compassion fatigue as a form of burnout, although not that severe. According to them, it is seen as a deep physical, emotional and spiritual exhaustion accompanied by acute emotional pain. If a comparison is drawn between the symptoms of compassion fatigue (Table 1) and those of burnout (Kadushin, 1992:234–235), there are so many overlapping symptoms that the conclusion is drawn that compassion fatigue is a form of burnout, although not as severe as burnout itself.

Cognitive	Emotional	Behavioural	Spiritual	Personal Relationships	Physical/ Somatic	Work Performance
✓ Lowered concentration ✓ Decreased self-esteem ✓ Apathy ✓ Rigidity ✓ Disorientation ✓ Perfectionism ✓ Minimization ✓ Preoccupation with trauma ✓ Thoughts of self-harm or harm to others ✓ Flash backs	✓ Powerless-ness ✓ Anxiety ✓ Guilt ✓ Anger/rage ✓ Survivor guilt ✓ Shutdown ✓ Numbness ✓ Fear ✓ Helplessness ✓ Sadness ✓ Depression ✓ Emotional roller coaster ✓ Depleted ✓ Overly sensitive ✓ Irritable ✓ Lowered self-esteem	✓ Impatient ✓ Irritable ✓ Withdrawn ✓ Moody ✓ Regression ✓ Sleep disturbance ✓ Nightmares ✓ Appetite changes ✓ Hyper vigilance ✓ Elevated startle response ✓ Accident proneness ✓ Losing things	✓ Questioning the meaning of life ✓ Loss of purpose ✓ Lack of self-satisfaction ✓ Pervasive hopelessness ✓ Anger at God ✓ Questioning of prior religious beliefs ✓ Loss of faith in a higher power ✓ Greater scepticism about religion	✓ Withdrawal ✓ Decreased interest in intimacy or sex ✓ Mistrust ✓ Isolation from others ✓ Over protection as a parent ✓ Projection of anger or blame ✓ Intolerance ✓ Loneliness ✓ Increased interpersonal conflicts	✓ Shock ✓ Sweating ✓ Rapid heartbeat ✓ Breathing difficulties ✓ Aches and pains ✓ Dizziness ✓ Increased number and intensity of medical maladies ✓ Other somatic complaints ✓ Impaired immune system ✓ Low energy	✓ Low morale ✓ Low motivation ✓ Avoiding tasks ✓ Obsession about details ✓ Apathy ✓ Negativity ✓ Lack of appreciation ✓ Detachment ✓ Poor work commitment ✓ Staff conflicts ✓ Absenteeism ✓ Exhaustion ✓ Irritability ✓ Withdrawal from colleagues ✓ Low productivity ✓ Making mistakes more frequently

Table 1: Symptoms of compassion fatigue syndrome (Figley, 1995:97; Pfifferling & Gilley, 2000; Strydom, 2004:42–43; and Durrance, 2007)

In Table 1 the different symptoms associated with compassion fatigue syndrome are set out with regard to different categories. From this it is evident that compassion fatigue influences the person in his/her totality, i.e. cognitively, emotionally, behaviourally, spiritually and physically. Problems in the named spheres of a person's life could influence, amongst others, personal relationships and in the end lead to lower work performance and work satisfaction.

Compassion fatigue develops as a consequence of the relationship with the traumatized client during long-term individual therapy or personal contact (Levin & Greisberg, 2003; Joslyn, 2002; and Gentry, 2002). Because of the type of work social workers do, it seems that they could be susceptible to this. In order to understand this concept it is necessary to analyse this within the framework of the profile of the people most affected by this type of burnout.

Figley (2002b:1436–1438) developed an etiological model that explains the process of compassion fatigue (cf. Figure 1). This model is based on the <u>assumption that empathy and emotional energy are the driving force in effectively working with the suffering in general, establishing and maintaining an effective therapeutic relationship, and delivering effective services to the client</u>. In his model Figley identified eleven different variables that together form the model that predicts compassion fatigue and shows what is required to prevent it from occurring. This model will be used as the conceptual framework for discussions.
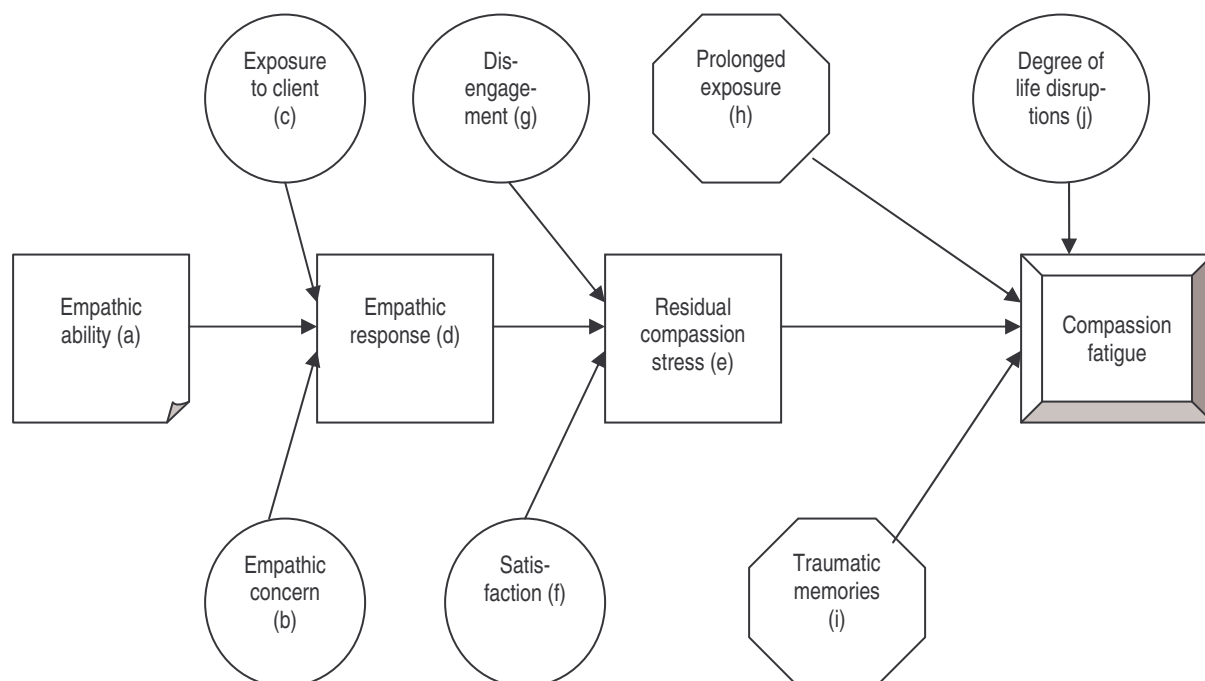

Figure 1: Compassion stress and fatigue model (Figley, 2002b:1437)

a) *Empathic ability* is the ability of the social worker to notice the pain of others. This model works from the viewpoint that without empathic ability there will be little if any compassion stress and no compassion fatigue (Figley, 2002b:1436).

Behavioural research has shown that persons who function effectively are those who know themselves in terms of their strengths and weaknesses. They possess, amongst other qualities, a high emotional intelligence. A person with a high emotional intelligence has a very good emotional awareness; are emotionally literate (can distinguish between various feelings); can control his/her emotions; has the ability to listen to others; has empathy with them; communicate effectively in terms of emotions and thoughts; and use the information in directing his/her thoughts and actions so that he/she lives effectively. These persons are also motivated and have a specific goal in mind (Le Roux & De Klerk, 2001:10). The view is held that successful people working in the care-giving professions should in most cases have a higher than average emotional intelligence.

On the other hand, this researcher is of the opinion that a higher emotional intelligence could be one of the reasons why people in the care-giving professions are more prone to compassion fatigue. These people are more in contact with their feelings and the feelings of other people and as a result of this are more affected by other people's emotional pain. SC people, as indicated in the DISC, are people like these; thus this correlates with the profile of social workers, as seen in the research (cf. 4.4).

b) *Empathic[4] concern* is the motivation to respond to the person in need. With sufficient concern, the empathic social worker will draw upon his/her talent, training and knowledge to deliver the highest quality (a high-C quality) of service possible to those in need (Figley, 2002b:1436). What is important, however, is the fact that empathy and motivation are needed and that the therapist likely to be a candidate for compassion fatigue is motivated to render a service of the highest quality (Gentry, 2002). A high-quality service needs focus and dedication. Heavy caseloads and not enough available social workers to do the work make it very difficult for the dedicated worker to provide such a service and this aggravates the stress they experience. According to Skweyiya, the national Minister of Social Development (2006), the introduction of the new Children's Act of 2005 will create an even greater need for social workers over the next three years. It is estimated that the passing of the new bill will lead to the need for approximately 16 000 social workers to implement it. At the end of 2006 only 9360 social workers were registered at the Council for Social Service Professions (SACSSP). These social workers provide all the social work services in South Africa. It is thus clear that in the near future it is going to become even more difficult for the dedicated social worker to do a proper professional job and this will place an even higher demand on their empathic concern.

c) During his/her *exposure to the client* the social worker experiences the emotional energy of the suffering client (Figley, 2002b:1437). Figley is also of the opinion that this exposure sometimes leads to social service professionals becoming supervisors, administrators or even leaving the profession. The emotional cost of this exposure just becomes too much for them to cope with and it seems that they then start looking for a "safer" work environment. Figley agrees with this and wants to add that the heavy case loads and poor working conditions as well as poor remuneration could also contribute towards practitioners moving away from direct service delivery and/or the social work profession.

d) *Empathic response* is the extent to which the social worker makes an effort to alleviate the suffering of the client through empathic understanding (Figley, 2002b:1437). Empathy involves reading the feelings of others; it is also seen as a person's social radar. At a higher level, it entails sensing and responding to a person's unspoken concerns or feelings. At the highest level, empathy is to understand the issues or concerns that lie behind another person's feelings (Goleman, 1999:24, 135). From this it is clear that a social worker with a high empathic response will be able to sense and respond to a client's concerns and feelings; even if they are not verbalised, they are able to understand the issues that lies at the root of a persons feelings. It is submitted that this could lead to a very emotional experience, as the professional isn't always in a position to assist in or solve the problem effectively. That can then lead to compassion stress.

e) *Compassion stress* is the residue of emotional energy from the empathic response to the client and is the ongoing demand to do something in order to alleviate the suffering of the client. The result of not being able to help or not being able to render a good quality service (high-C quality) leads to stress. This stress, like any other significant stress, can have a negative impact on the human immune system and the quality of life in general (Davidson, 1999:22, 26; and Figley, 2002b:1437). When this compassion stress sets in it is important to do something about it.

Figley (2002b:1437–1438) is of the opinion that there are two sets of coping mechanisms available to manage this stress. A sense of achievement is one factor that lowers or prevents compassion stress. In order to achieve a sense of achievement the social worker will have to be satisfied with his or her efforts to help the client. This could mean that a conscious, rational effort has to be made in order to recognise where the efforts of the social worker end and those of the client begin. A good supervisor could help the social worker to do this during the supervising process.

Disengagement is the other factor that could reduce or prevent compassion stress (Figley, 2002b:1438). This is the extent to which the social worker can distance him/herself from the ongoing misery of the client. This will also mean that the social worker will have to make a conscious decision to let go of the thoughts, feelings and sensations experienced during contact with the client. This

could be a very arduous process and a social worker might need help in doing that. It is submitted that supervision or a few counselling sessions with a therapist could help in this regard.

If compassion stress is permitted to accumulate and the social worker does not experience job satisfaction and/or disengagement isn't taking place, the risk of compassion fatigue increases. There are also three other factors that, according to Figley (2002b:1438), play a role in the increase of compassion fatigue. They will now be discussed.

f) *Prolonged exposure* is the ongoing sense of responsibility (SC qualities) for the care of the suffering over an extended period of time (Figley, 2002b:1438). It can be deduced that a social worker should have regular breaks from clients. This could be in the form of not seeing any clients on certain workdays and having regular holiday breaks of at least one to two weeks at a time.

g) *Traumatic recollections* are memories of the social worker that trigger the symptoms of posttraumatic stress disorder and associated reactions, such as anxiety and depression. These memories may result from the social workers' experiences with demanding or threatening clients or those who were especially sad or suffering (Figley, 2002b:1438). Research done by Wade & Schenck (2006) showed that a very high percentage of social workers themselves are victims of traumatic events. According to this research, many of the social work students that took part in this study indicated that they experienced 3–5 traumatic events on average. Many of them are long-term chronic traumatic events such as sexual/physical abuse, violence and poverty. These traumatic experiences, combined with traumatic recollections of clients' suffering, may combine adversely, thereby increasing the social workers' chances of compassion fatigue. It would thus be necessary to help social workers that have experienced personal traumatic experiences to work through those in order to function effectively. The opinion is held that it would be very difficult for a social worker to be effective in the delivery of services if he/she has not resolved his/her own fears and negative experiences.

h) *Life disruption* refers to the unexpected changes in schedule, routine and the management of life responsibilities that demand attention. These include illnesses and professional and personal responsibilities, etc. Normally these disruptions will cause a certain degree of distress that would be tolerable, but when the other seven factors are combined with this, the chances are very good that a social worker could develop compassion fatigue (Figley, 2002b:1438). It is important to note that high-S people do not like rapid change. They have to be prepared for changes in advance. If this doesn't happen they experience higher stress levels.

When this ethological model of compassion fatigue is examined it is clear that the social work profession is inherently stressful. Studies by, amongst others, Bradley &

Sutherland (1995); Collings & Murray (1996); and Storey & Billingham (2001) have also shown that burnout among social workers is becoming an increasing problem. It is sensed that social workers can no longer handle their stress levels effectively because of the increased stress-related experiences that form part of social service delivery. Social workers are also not always assisted to be effective, as their caseloads are very heavy and their physical work environment isn't always such that it contributes towards a pleasant work environment. In many cases social workers, especially junior workers, report that they do not receive supervision or the supervision that they do receive is not of a particularly high standard. This could lead to compassion fatigue, as many social workers in fact display the classical symptoms, namely cynicism, negativity, rigidity, decreased emotional involvement with clients and, in some cases, a feeling of paranoia, where the worker is of the opinion that the employer/supervisor is set upon making life difficult for him/her. Illnesses also occur more regularly and consequently the worker is increasingly absent from work (Zastrow, 2006:311). Although the above-mentioned researchers explained these problems in the context of burnout, this researcher is of the opinion that the reason for this burnout is that compassion fatigue isn't identified and managed properly by supervisors and/or social work managers. If compassion fatigue is identified and managed timely the chances for burnout will decrease.

When analysing the type of people that become social workers it could further explain why so many social workers feel that they cannot cope with the work and lose their compassion for the clients and their passion for the work. An analysis of social workers' behavioural styles further explains why social workers could become victims of compassion fatigue.

Next, attention will be paid to the research project that focused on a comparison between social workers' behaviour profiles and their chances of getting compassion fatigue.

4.   Research project: A comparison between social workers' behavioural profile and their chances of getting compassion fatigue

During the research an attempt was made to determine which general behavioural style is utilised by social workers and to compare that with their compassion satisfaction/fatigue. The reason for this is to determine which behavioural traits social workers display and how this could contribute towards compassion fatigue, so that the knowledge can be utilised during supervision and the general management of social workers. It is important to take into consideration that this is a general profile and it should be seen in that light. Every person is an individual and should be managed in a unique manner. The aim of this particular research is only to make supervisors and managers aware of the most common traits in social workers so that they could be helped to experience less stress and not to be a victim of compassion fatigue and burnout in the long run.

Bonnstetter et al. (2001:160) are of the opinion that certain behaviour is necessary to be successful within a specific profession. Therefore, if a person does not have the

necessary behavioural traits for the social work profession, it can be assumed that he/she would need to make several adjustments in order to function effectively within the work environment. These adjustments can lead to increased stress, which can lead to compassion fatigue and/or burnout in the long run. If the social worker and supervisor can identify these limitations, strategies for responding to the associated stress can be developed early enough. On the other hand, a person with the general behaviour style of social workers, who is prone to compassion fatigue, can also be identified and helped appropriately. Lastly, the knowledge regarding other colleagues and basic behavioural style(s) can also help improve the relationships and cultivate mutual acceptance within the work environment.

4.1 Methodology

During this research three questionnaires were used. This included a general questionnaire that consists of identifying information, the DISC questionnaire and the compassion satisfaction/fatigue test for helpers. For the determination of the general behaviour style, data from a previous study were also used to increase the respondents with regard to the determining of the general behaviour style. In this study only the DISC questionnaire was used.

In order to compose an accurate profile of social workers, the standardised DISC questionnaire is utilised in combination with the Managing for Success computer software. Quantative research is therefore at stake here. The respondents had to answer 24 questions, each of which contained four statements that they had to rate in terms of applying them to themselves to a greater or lesser extent. The responses are then entered into a computer, which then generates a report for every respondent. The programme includes a function that develops an average profile. The group average is used to develop another report called the Employee-Manager Version. This report and the group average are then used for further interpretation.

To determine the respondent's compassion satisfaction/fatigue, the compassion satisfaction/fatigue test for helpers, as developed by Figley (1995), was used. The Afrikaans version as used by Strydom (2004:111–113) was used for Afrikaans-speaking respondents.

4.2 Target group and sampling

The target group for this study is social workers. These respondents are associated with non-governmental institutions, private institutions, governmental institutions and an academic institution (only DISC) in Bloemfontein and the surrounding region.

Researchers normally utilise probability selection when working quantatively (Neuman, 1997:204). In the first study, however, non-probability selection was used with a convenience sampling, since the data pertains to 20 social workers who completed the measuring instrument over a number of years. In order to increase the sample and thus

improve reliability, an additional 32 respondents were approached to form part of the investigation.

In the second study, non-probability selection with a convenience sampling was also used. The directors and supervisors of several institutions were approached with the request to recruit volunteers for the research. All the social workers in the organisations approached, therefore, had an equal opportunity to take part. Because of poor feedback, social workers attending training courses at the Department of Social Work at the University of the Free State were also asked to take part in this research. Some of them completed the questionnaires.

The social workers that form part of the second study are 53 social workers.[5] Of these 52 are women and one male person. The organisations that are represented are NGOs, specialized institutions and governmental intuitions, which are represented by the Department of Social Welfare, the Department of Correctional Services, the Department of Health and the South African Defence Force. The respondents further consisted of 81 white, 19 black and 5 coloured social workers.

4.3   Validation of measuring instruments and reliability and validity of the study

Prof RJ Watson, Department of Educational Psychology at the Wheaton College in Illinois and Prof JR Hall, Department of Psychiatry and Human Behaviour at the University of North Texas validated the DISC questionnaire during 1989 and 1999, respectively (Bonnstetter et al., 2001). Feedback from some of the respondents, as well as conversations during the years of the programme's use, indicate that the measuring instrument is very accurate. Few persons questioned the results, and those who did, had not interpreted the questionnaire correctly or were not aware of certain behaviours. In many cases, persons close to the particular respondent verified the behaviour identified by the programme. The programme can also identify inconsistencies and problems, with the recommendation that the questionnaire be completed again.

In this research, convenience sampling was utilised. Neuman (1997:204–205) indicates that a disadvantage of this type of sampling is that it is not representative of the population. In this research, however, all the respondents are social workers who are indeed part of the population. The nature of sampling should not necessarily influence the results significantly, and consequently the research can indeed be estimated as reliable. In order to further increase the validity and reliability of results, the sample can be enlarged.

4.4   Results

The results of the DISC and the compassion satisfaction/fatigue of the respondents will now be discussed.

4.4.1 DISC behaviour style

Figure two shows the average profile of the 105 social workers that took part in this research. Social workers measure high in the steadiness (S) and compliant styles (C) as they are higher than 50% in their natural style. The natural style is the one that a person uses when at home or under stress. The adapted style is the one that one uses at work. This is the behaviour that you feel needs to be used in your work environment in order to be successful. The environment, management and type of work will determine the adapted style. This style also tends to change from time to time, whereas the natural style will stay the same throughout a person's life. In the discussion of the results, the natural style will be used, as this is the style that a person will fall back on when under pressure.
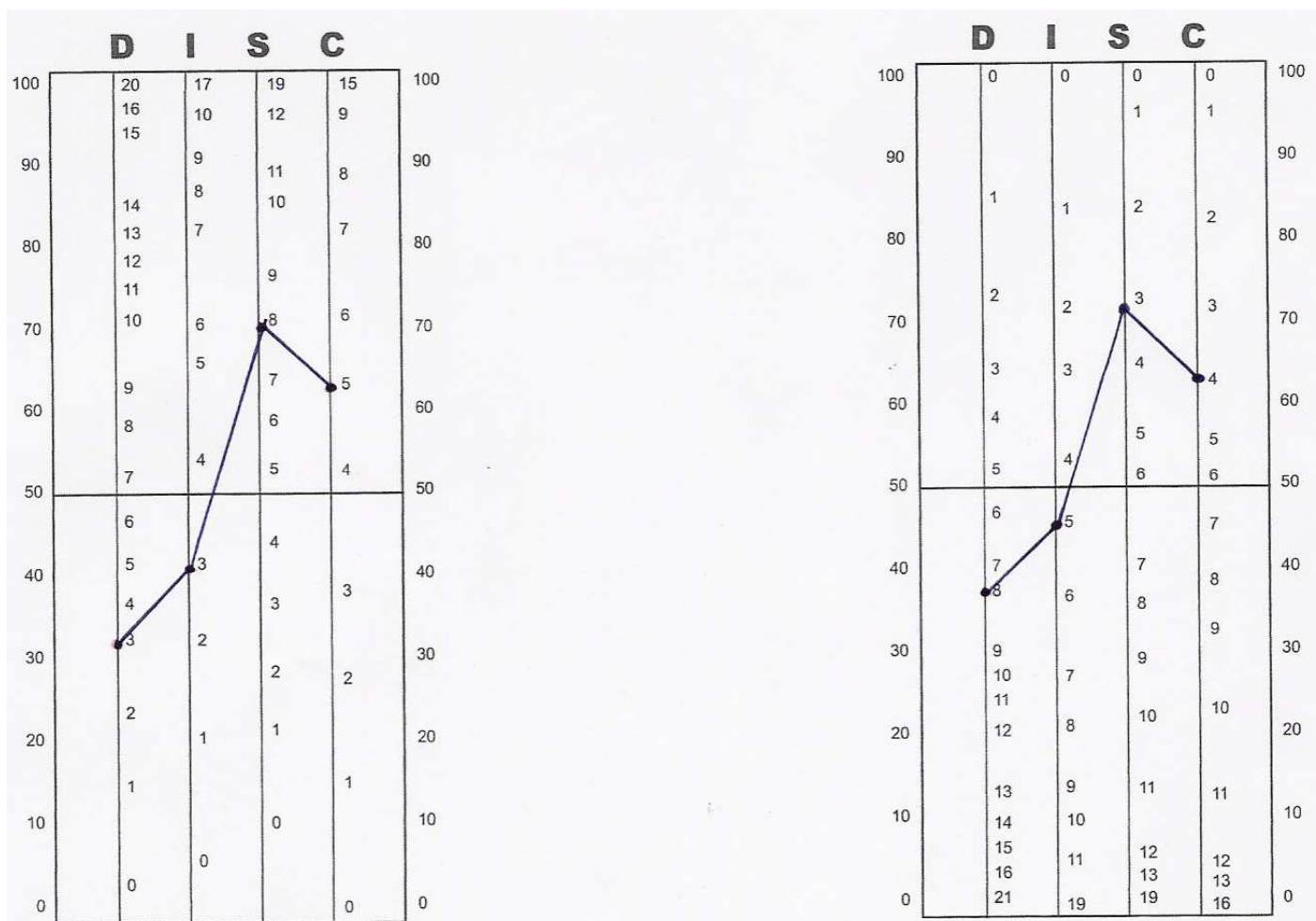

Figure 2: Social workers' general behavioural style

4.4.2 Compassion satisfaction/fatigue

Potential for compassion satisfaction shows the potential for a person to enjoy his work as a therapist or a caregiver. In Figure 3 it shows that 69.23% of the black respondents

have a good to extremely high potential for satisfaction. When this is compared to the white respondents, the picture is different, as 82.5% of the respondents have a high potential for satisfaction. Although the percentage of non-white respondents is much less than their white counterparts, this statistic is worrying as it shows that 30.77% of the black respondents currently do not enjoy their jobs as social workers.
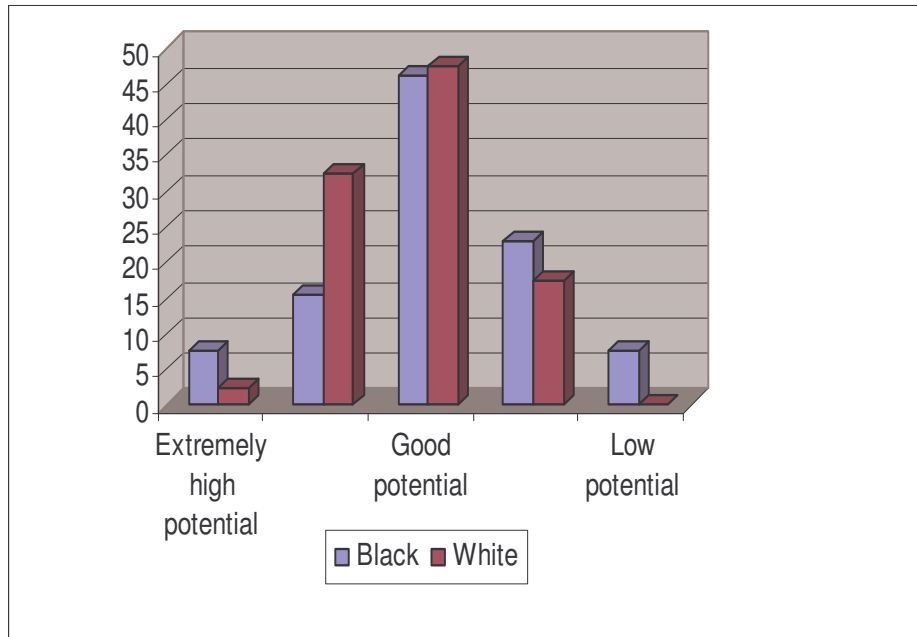

Figure 3: Risk for compassion satisfaction

In Figure 4 the risk that the respondents have for burnout is shown. In this figure it is indicated that 92.3% of the black respondents and 97.5% of the white respondents have a moderate to extremely low risk. The small difference between the two groups shows no particular differences with regard to race having an influence on their chance for burnout. This also shows that burnout in its extreme form shouldn't be a big problem for social workers.
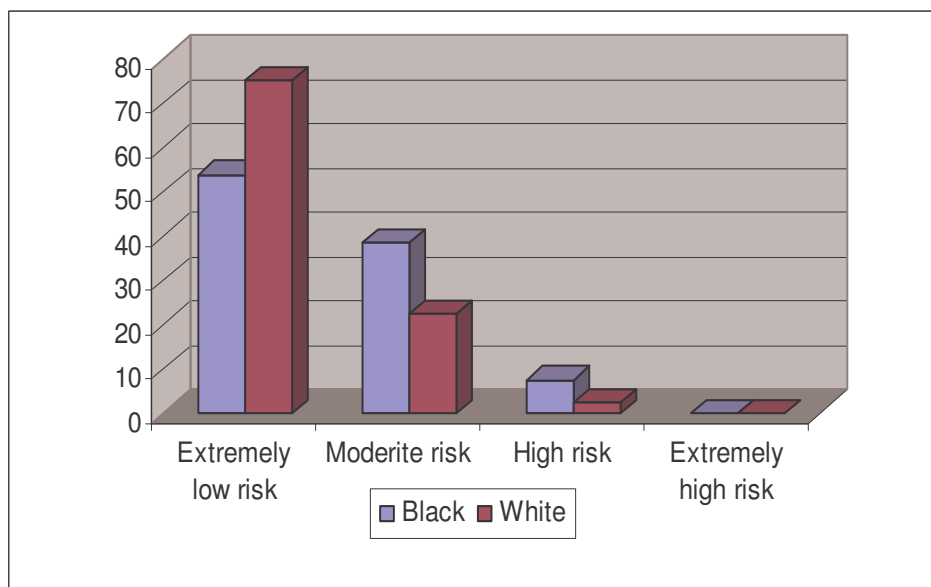

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Figure 4: Risk for burnout

The respondents' risk for compassion fatigue is shown in Figure 5. As in the previous discussion, the difference between the white and black respondents is small. When analysing the black respondents it transpires that 61.54% has a moderate to extremely high risk for compassion fatigue and a 38.46% low to extremely low risk. The likelihood of white respondents with compassion fatigue ranges from 60% in the moderate to extremely high category, to 40% in the low to extremely low category.
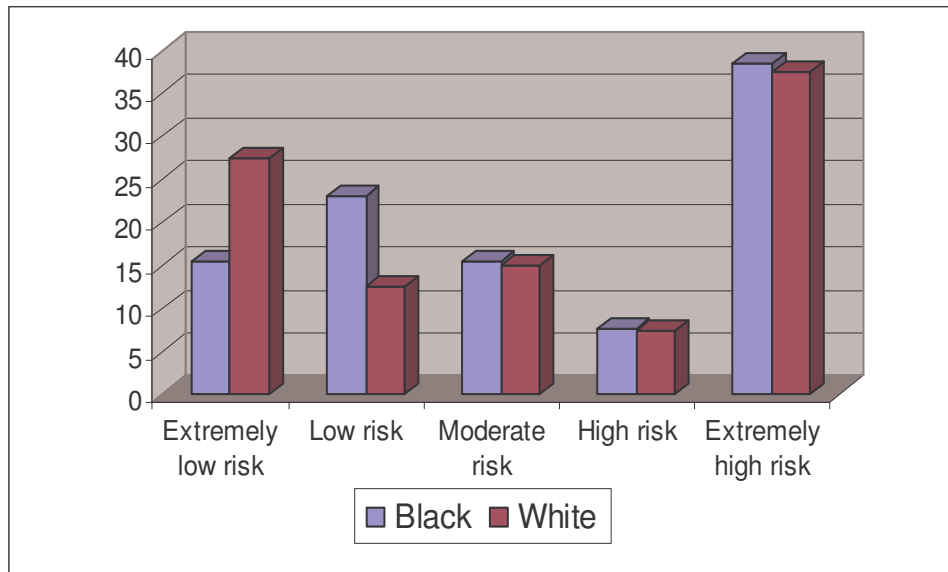

Figure 5: Risk for compassion fatigue

5. Conclusions and recommendations

In the next part of the paper some conclusions and recommendations will be made.

5.1 Social workers behaviour style

As seen from the research findings, most social workers use a high SC behavioural style. Based on this finding, the following recommendations are made with regard to their ideal environment, general and stress management, recovering from emotional stress, communication and areas of improvement. This is based on the theory of DISC and the results of the Management for Success Analysis.

5.1.1 Ideal environment

The ideal environment is based on the basic style of the respondents. This information should be used to identify specific duties and responsibilities that social workers enjoy and those that create frustration. The following components were identified:

✓ A job for which standards and methods are established.

- ✓ Workplace where people seldom get mad.
- ✓ Needs personal attention from the supervisor/manager and compliments for each assignment well done.
- ✓ An environment that allows time to change.
- ✓ Practical work procedures that are written down.
- ✓ Assignments that can be completed one at a time.
- ✓ Little conflict between people.
- ✓ A stable and predictable environment with few surprises.
- ✓ Needs an opportunity to deal with people with whom a long-standing relationship has been established.
- ✓ Appreciation for loyalty and long service.

It isn't always possible to create the ideal environment for employees. The current social work environment with its heavy caseloads, administration and all the other tasks associated with being a social worker are stressful. Supervisors and management should try to establish a work environment that is conducive to the needs of social workers.

5.1.2 Keys to managing[6]

In this section some needs, which must be met in order for the respondents to perform at an optimum level, are addressed. Some of these needs could be met by the person and others have to be provided by management.

- ✓ Assistance in new or difficult assignments.
- ✓ To speak up when he/she knows he/she is right.
- ✓ To set professional and family goals.
- ✓ Techniques and tools to handle conflicts.
- ✓ A manager who delegates in detail.
- ✓ Support when pressured for quick results.
- ✓ Reassurance that he/she is doing the job right.
- ✓ A participative climate when working in teams and committees.
- ✓ A feeling of belonging – he/she has to know how important he/she is to the team.
- ✓ A program to encourage creativity and self-worth.
- ✓ Support in making high-risk decisions.
- ✓ Rewards in terms of tangible things, not just flattery and praise.
- ✓ Ways to avoid feeling pressure when saying no.

When managing social workers it is important to make sure that they are given enough information with regard to delegated tasks, and that a calm and friendly atmosphere is created in the office. Supervisors should also support them to be assertive, handle conflict and reassure them constantly.

5.1.3 Stress management for the steadiness and compliant styles

Each personality style has its own way of coping with stress. When a build-up of emotion occurs, the high-S person will try to get some rest. Because of their intense dislike for conflict, emotional stress has a huge impact on high-C persons. Sleep becomes an escape for them. When under stress they will seek a compromise or avoid making any decision (Voges & Braund, 1995:174).

The high-S person needs a stable, predictable environment in order to feel comfortable. Of particular importance is a home life free of conflict. When a high-S person encounters stress, he/she also tends to develop physical problems such as stomach problems and headaches. They also need time to adjust to change; this will help them to experience less stress.

According to Voges & Braund, (1995:73) the compliant style prefers to tune out stress. This response is largely due to their dislike of chaos. When they are under stress, they need to be alone with their thoughts so that they can process a response. If it seems that the high-C person is avoiding someone, it is probably because the latter is the cause of his/her stress. This may also explain why some professionals avoid their clients; the clients are the reason for their stress (cf. 2).

A further characteristic of a high-C person under pressure is that he/she tends to be critical and demanding. Because high Cs need quality in their lives, they tend to demand this from others. If they feel that, they cannot act in accordance with the demands of the job they will feel highly stressed.[7]

The SC combination will tend to become quiet, worrisome and introspective when they encounter stress. Other people may see them as possessive, detached, stubborn, inflexible and hesitant, or that they hold grudge. They may even perceive them as insensitive.

5.1.4 Recovering from emotional stress

When recovering from emotional stress, the high-S person will keep on sleeping. This means that he/she will have to break away from the current situation and just do nothing or participate in activities that are not too active like watching television, working in the garden or enjoying a leisurely walk along the beach.

On the other hand, the high-C person will take pleasure in reading a book. These people enjoy doing something quiet, maybe pursuing a hobby. He/she will want to do this on their own as they can only really recover from emotional stress when they are on their own.

5.1.5 Don'ts when communicating

A supervisor should keep the following in mind when communicating with the social worker, as poor communication could increase stress and lead to a bad relationship. The following should be avoided:

- ✓ Debate about facts and figures.
- ✓ Be abrupt and rapid.
- ✓ Rush him in the decision-making process.
- ✓ Keep deciding for him, or he'll lose initiative. Don't leave him without backup support.
- ✓ Talk in a loud voice or use confrontation.
- ✓ Talk to him when you are extremely angry.
- ✓ Overuse gestures.
- ✓ Force him to respond quickly to your objectives. Don't say, "Here's how I see it".
- ✓ Make promises you cannot deliver.
- ✓ Patronise or demean him by using subtlety or incentive.
- ✓ Give your presentation in random order.

Good, effective communication is a very important management skill. As some managers tend to have more dominant personality styles, they should take special cognisance of the communication needs of the average social worker. Don't be abrupt or talk to them when extremely angry. When communicating with them, an easy non-confrontational communication style should be used in order to ensure that they don't experience unnecessary stress.

5.1.6 Areas of improvement

The social worker needs to improve on the following areas as this would help to experience less stress in the long term:

- ✓ Be willing to start new projects before having "all the facts".
- ✓ Be more competitive.
- ✓ Don't take personal confrontation as personal rejection.
- ✓ Take the lead more often and make things happen; don't wait for others to start new things.
- ✓ Stop underestimating own abilities.
- ✓ Focus on deadlines in order to increase productivity.

As part of effective supervision the social worker should be helped to improve certain areas of their work. When using supportive supervision, special attention should be paid to the above-mentioned areas of improvement, as this will help them to be more effective.

5.2 Compassion fatigue

Compassion fatigue is a bigger hazard to social workers than extreme burnout. This could be ascribed to the general behaviour style that they use. They fall in the slower-

pace category and are generally physically less active. They gather less people around them but have very intense relationships with individuals. This is one of the reasons why they are more prone to compassion fatigue.

The fact that a large percentage (30.77%) of the black respondents have a low potential for compassion satisfaction is worrying. The questions that form part of the identification of potential for compassion satisfaction include:
Items about the helper:

I am happy.
I find my life satisfying.
I have beliefs that sustain me.
I find that I learn new things from those I care for.
I feel connected to others.
I feel calm.
I believe that I have a good balance between my work and my free time.
I am the person I have always wanted to be.
I have good peer support when I need to work through a highly stressful experience.
Working with those I help gives me a great deal of satisfaction.
I feel invigorated after working with those I help.
I have happy thoughts about those I help and how I could help them.
I have experienced intrusive thoughts of times with especially difficult people I helped.
I have joyful feelings about how I can help the victims I work with.
I think that I might be positively "inoculated" by the traumatic stress of those I help.
Some people I help are particularly enjoyable to work with.

Items About Being a Helper and Your Care-giving(?) Environment

I like my work as a helper.
I feel like I have the tools and resources that I need to do my work as a caregiver.
I have thoughts that I am a "success" as a helper.
I enjoy the company/presence of my co-workers.
I depend on my co-workers to help me when I need it.
My co-workers can depend on me for help when they need it.
I trust my co-workers.
I am pleased with how I am able to keep up with care-giving technology.
Although I have to do paperwork that I don't like, I still have time to work with those I help.
I am pleased with how I am able to keep up with care-giving techniques and protocols.
I plan to be a caregiver for a long time.

From this it could be deduced that the named respondents are unhappy in what they are doing. They don't feel invigorated by the work they do and they do not have happy feelings about the work they do. The environment that they are working in also contributes towards their lack of compassion satisfaction. From analysing the questions,

it is clear that bad work relationships with fellow workers, lack of resources, and technology and paperwork could contribute towards them not wanting to be helpers.

5.3   General recommendations

From the above, it seems that a variety of factors can lead to compassion fatigue among social workers. The elements that could benefit most from attention are probably reducing the workload; improving work relations within the organisation; reducing the administrative load; and continuous training for social workers. The development of knowledge and insight regarding the self and other workers within the organisation can probably also contribute towards the reduction of stress. Supervision, as one of the secondary methods of social work, can help reduce stress among social workers, since its successful implementation with regard to the three basic functions of supervision, namely administrative supervision, educational supervision and supportive supervision (Kadushin, 1992), can help address some of the above-mentioned issues.

As the research of Wade & Schenck (2006) has indicated, a high percentage of social workers could be victims of trauma. This trauma could contribute towards the development of compassion fatigue. Although difficult, the facilitating of a therapeutic process where these people are helped to work through their traumatic experiences should contribute towards young social workers being more effective. More research could be done on this issue.

It is also recommended that this research be expanded to a larger sample of black respondents. If the same results are obtained with regard to their potential for compassion satisfaction, their responses to the different questions should be analysed in order to identify the item or items that are most problematic. This could then be used to develop remedies.

Attention should also be given to the development of strategies to reduce or prevent stress. Regular exercise, development of the self-esteem of workers, healthy diets, etc. should contribute to this. The management of this particular problem should form part of the supportive and educational functions of supervision. This also means that regular supervision should take place.

6.   Summary

In this paper it was indicated that social workers experience stress in their work environment. This intense stress could lead to compassion fatigue or burnout that leads to social workers leaving the profession or being ineffective. The DISC could help supervisors to create a work environment that is more conducive towards the personality of the people practising social work. Taking the difficult circumstances that face social work practitioners into consideration, it is possible to use supervision to lighten the burden.

Managers and supervisors should not contribute towards the stress of the social worker but should play an active part in reducing the problem. It does not mean that work standards should be lowered because of a different management style; in fact, a conducive work environment and good interpersonal relationships in the organisation will lead to more effective service delivery. The DISC could contribute towards creating happy and successful social workers.

A working environment should be created that will lessen the chances of compassion fatigue and social workers should receive help and training to help them cope with the emotional stress that forms part of the profession.

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