

Profile: Match2 and Compassion fatigue

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Background

The events of 2020 associated with the COVID-19 epidemic have led to fundamental changes to how many engage with work. Psychologists are heavily involved in determining the fallout of these events in relation to the mental health of the workforce, and society more broadly. The extent of this disruption has proved challenging for the psychology professions to address, with the demand for services often outstripping supply.

Yet calls to support workers have not only been made to psychologists. Much of this pressure has fallen on managers tasked with supporting their staff through this unprecedented time. This has served to significantly stretch managers, with many keen to develop their skillsets to better aid their direct reports.

The challenges are further exacerbated by the significant shift to remote working. PCL identified specific issues surrounding professional isolation and employee engagement in recent research published with Shaun Biggs and the University of West England, leading to the creation of PCL's Remote Worker Support Initiative.

Whilst focus has quite rightly been on the pandemic's impact of workers, the toll placed on the managers supporting their staff is in danger of being overlooked. To help understand the impact of these pressures, and if and how they vary between individual managers, PCL joined forces with Xueyang Shi from Edinburgh University.

In light of the relative recency of the current issues, we recognised that greater insight into the impact of these pressures could be accessed by reviewing evidence accrued within the conceptual frameworks of professions historically tasked with supporting people in need.

This approach led researchers to the psychotherapy profession, and more specifically, to the issue of 'compassion fatigue'.

Compassion fatigue

Recognition of the stresses resulting from supporting patients has steadily grown, with researchers becoming increasingly aware of the burden on practitioners experiencing empathy in client-focused roles.

Psychotherapists are one such group. This concern resulted in the creation of the Compassion Fatigue Self-Test for Psychotherapists by Charles Figley in 1995.

Specifically, compassion fatigue is defined as a state of tension and preoccupation with the traumatized patients by re-experiencing the traumatic events, avoidance/numbing of reminders persistent arousal (e.g. anxiety) associated with the patient. It is a function of bearing witness to the suffering of others ([Figley, 2002](#)).

Ranging in seriousness, symptoms of compassion fatigue include irritability, lack of compassion, diminished pleasure, decreased job satisfaction and increased absenteeism ([Mathieu, 2007](#)). Additional symptoms may include hypervigilance, apathy, negative self-soothing behaviours and anxiety ([Bride, 2007](#); [Meadors et al., 2010](#); [Pirelli, 2020](#)).

It is important to note that the majority of research into compassion fatigue and its effects has taken place within the realm of medical healthcare providers, social workers and counsellors, and is often conceptualised as a 'cost of caring for others'. The demands placed on these professions have ensured ongoing awareness of compassion fatigue and its implications. This has been exacerbated considerably by the events of 2020.

The Covid-19 effect

Recent research into the effects of COVID-19 on the workforce indicate that symptoms comparable to compassion fatigue are on the rise. Instances of depression, anxiety and distress, in turn leading to reduced sleep quality and peri-traumatic stress, have increasingly been reported ([Rajkumar, 2020](#); [Aon UK, 2020](#)). Efforts to support staff have understandably focussed on frontline healthcare workers dealing directly with the implications of COVID-19. The influence of compassion fatigue is not confined to these professions, with research citing a growing concern for the wellbeing of 'general' workers.

The unparalleled scale of the global pandemic has left few untouched, be it directly or indirectly. This impact is emphasised by the large amount of secondary information generated by legacy and social media. The relentless reports, including some alarmist media coverage of the pandemic, could only increase pressure on employees and develop traumatic stress ([Turnbull et al., 2020](#); [Faris, 2020](#)). The demand for many to work remotely can further increase the impact of these stressors due to increased perceptions of professional isolation resulting from this form of employment.

These logistical issues can be particularly challenging to leaders and managers, as their avenues for interacting with staff are limited by these obstacles. Given a key responsibility of these roles is to care for the wellbeing of staff, this can make an already challenging obligation almost impossible to fulfil.

Having recognised the growing pressures placed on the general workforce and the potential that the concept of compassion fatigue has in recognising the possible consequences of these issues, the next question for researchers was whether psychometric instruments could help predict people's risk of compassion fatigue.

Personality

Personality is a core topic of psychology that has been defined as "psychological qualities that contribute to an individual's enduring and distinctive patterns of feeling, thinking and behaving" (Cervone & Pervin, 2010; p. 8). Trait views of personality have become particularly valued. Recent decades of debate have generated a fairly high degree of consensus for broadly structuring personality into five factors (Arnold et al., 2020; p. 47).

The FFM of personality consists of the five broad domains of 'Neuroticism' (emotional instability vs. stability), 'Extraversion' (vs. introversion), 'Openness' (curiosity or unconventionality), 'Agreeableness' (vs. antagonism), and 'Conscientiousness' (constraint vs. disinhibition) (Widiger & Crego, 2019).

Perhaps most significant is the ability of personality measures to identify and measure individual differences. This enables practitioners to better understand and predict if and how individuals are affected by events beyond their control, and by extension, provide bespoke support based on these predictions. The current study will seek to identify if this insight can be applied to perceptions of compassion fatigue.

Method

A research sample of 50 UK-based business employees were recruited through Edinburgh University networks. The sample was 72% Female, with ages ranging from 20-30 (44%), 31-40 (26%), 41-50 (14%), and over 51 (16%). Education levels included doctoral degree (6%) master's degree (54%), university degree (26%), and high school degree (14%). The sample primarily consisted of engineers, analysts, and consultants.

Participants were asked to complete a personality assessment (Profile:Match2) and a Compassion Fatigue scale (Figley, 1995) via a second questionnaire.

Profile:Match2 (PM2; Trickey & Hyde, 2014) is a psychometric assessment developed by Psychological Consultancy Ltd. PM2 is based on the 'Five Factor Model' (FFM) of personality, which is the most prominent and influential model of personality in contemporary psychology (Barańczuk, 2018). It translates the five FFM factors into ten scales (two per factor). This enables the assessment to provide a more detailed analysis of personality and more nuanced interpretation in its reports.

The Compassion Fatigue scale was slightly amended to adjust focus *away from* psychotherapy-specific items to COVID-19 items (e.g., “I remind myself to be less concerned about the well-being of my clients” in the original scale was adjusted to “I remind myself to be less concerned about the well-being of others under Covid-19”). Items that only applied in the psychotherapist context were deleted (e.g., “I have felt trapped by my work as a therapist”).

Data from the assessment and questionnaire were then combined and analysed.

Results

Initial analysis focussed on exploring correlations between the PM2 personality scales and the Compassion Fatigue scale. The results of this analysis are presented in Table 1. below.

PM2 Scale	Compassion Fatigue
Assertiveness	0.126
Compliance	0.112
Composure	-.616**
Dependence	0.121
Imaginative	.374**
Perfectionistic	0.056
Self-Esteem	-.548**
Sensitivity	-.331*
Sociability	-0.093
Studious	-0.099

Table 1. Correlations between the PM2 personality scales and Compassion Fatigue

To further determine the relationship between the PM2 personality scales and the Compassion Fatigue scale, the researchers conducted additional regression analyses. Findings from this procedure indicated that the PM2 personality scales were able to account for a very large 43.1% of the variance in the Compassion Fatigue variable.

Discussion

The findings indicate the significant predictive strength personality possesses in identifying individuals most at risk of compassion fatigue. Of the PM2 scales related to compassion fatigue, 'Composure' and 'Self-esteem' reported the strongest coefficients. Viewed through the lens of the Five Factor Model of personality, these scales would represent the factor of 'Neuroticism'.

The scale of Composure is concerned with the extent to which individuals are even-tempered, unemotional and remain calm and steady in the face of change or the unexpected or, conversely, display their emotions and react passionately to events. High scorers may prove more resistant to the effects of compassion fatigue, although this may contribute to a lack of awareness about the emotions of colleagues and the need for empathy. Whilst low scorers may be more attuned to the emotional needs of staff, this may result in greater vulnerability to compassion fatigue and its consequences.

The scale of Self Esteem is concerned with the extent to which individuals are self-confident, upbeat and optimistic or, conversely, are self-conscious, vulnerable and apprehensive. As with the scale of Composure, high scorers would likely be more resistant to the effects of compassion fatigue, with greater protection afforded by a strong sense of self-confidence. In extreme cases, this may deter others from seeking their support, as they may perceive them as unaffected and potentially oblivious from the situation around them.

Identifying the extent individuals endorse scales like these can provide excellent predictive power, not only for how they experience the current pandemic, but for how they perceive others react to it.

Managing the effects of compassion fatigue

Figley (2002) recommends several steps to psychotherapists in managing the effects of compassion fatigue, some of which are also applicable to employees in non-therapy roles. Educating people about the characteristics and consequences of compassion fatigue is the first step, with subsequent encouragement to be vigilant of symptoms in both themselves and others.

In addition to understanding compassion fatigue and its effects, addressing its challenges should also involve assessing and enhancing social support. This is especially important with managers, who are typically perceived to be the go-to avenue of support for employees. In the same way that physicians become ill and require the help of other physicians, managers must be cognisant of their own mental health, and seek support from suitable sources when necessary. Support can also be improved by increasing both the number and variety of personal relationships. This would recognise alternative roles for managers that extend beyond the usual scope of their traditional managerial responsibilities.

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