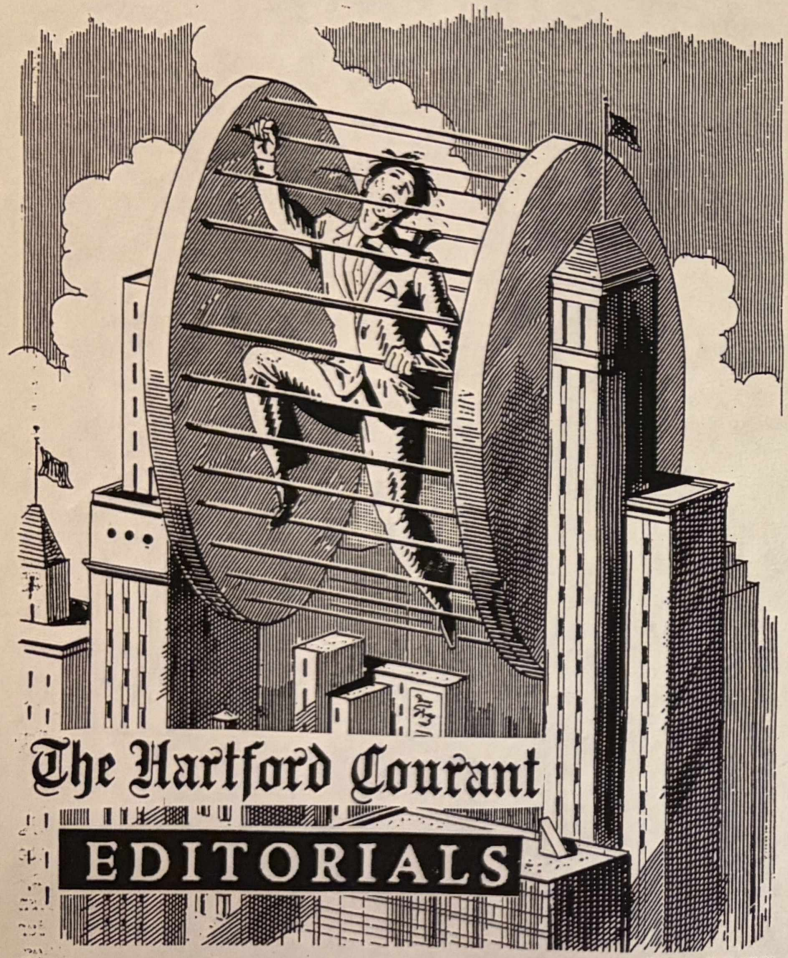
Cure for compassion fatigue is a return to community



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H. Paul Santmire

A former nurse whom I know is completing her doctoral studies in archaeology. She used to work in an intensive-care unit. Now she's interpreting the historical signs of people who've been dead for thousands of years. She was driven out of her first profession by what has recently come to be called compassion fatigue.

Try as she sometimes did, she could never really avoid getting overly attached to her patients and getting overly involved in the lives of their families. Try as she always did, she could never really avoid being devastated by the death and grief those families experienced, and she hurt, also, when those families sometimes would turn on her and other medical staff in anger.

This phenomenon has also been called burnout. As many as 20 percent of care-giving professionals suffer from the condition, according to Dr. Lyle H. Miller, head of the Biobehavioral Institute in Boston. Dr. Edward Poliandro, of Mount Sinai Hospital in New York, reported that professionals at a recent National Association of Social Workers conference "were hanging from the rafters" to participate in his workshop on stress management.

Nor are the clergy immune from compassion fatigue, as Courant religion writer Gerald Renner reported last month. His story was based on a thought-provoking interview with the Rev. James J. Gill, senior consultant in psychiatry at the Institute of Living in Hartford.

The problem is approaching crisis proportions. And the familiar remedies for the care-givers — go on vacation, join a stress workshop, take up racquetball — simply don't seem to be working anymore. What can be done? Obviously, when society's care-givers are in trouble, everybody's in trouble, in some sense.

We must come to terms with compassion fatigue as a social problem. We must look into the mirror of our common life, rather than at the lives of the care-givers themselves, to determine the depth of the problem, and the kind of remedy that's going to be required. The root problem, I am convinced, is the rugged and rootless individualism to which most Americans have fallen captive.

Consider the front porch. Before World War II, we used to live in houses, or aspire to live in houses, with front porches. That's because we felt connected with each other, in extended families and in neighborhoods. Now we build high-rises in the city, where nobody knows anybody else, or we seek refuge in suburban homes that have screened-in porches on the back side, which thereby guard our privacy. We seek to live by ourselves, detached from others.

Consider the mall. Every mall is like every other mall, and you're always welcome, of course — not as a person, however, but as one of thousands of faceless consumers. Nobody cares who you are, where you're from, or how deep your personal pain might be. The mall reinforces our detachment from one another and heightens the sense of anonymnity that we feel.

Consider the so-called electronic church. Nobody knows your name in this context either, even if you receive a hand-written reply — one of thousands that are sent out by low-paid clerical staff — acknowledging your financial contribution. That dynamic TV preacher can entertain, and perhaps inspire. But he is in no position to offer anyone the intimate consolation of the sacraments, or to sit quietly and talk with a troubled person. The electronic church, finally, leaves a person all alone in his or her living room.

Supposedly the Me Generation of the '90s has been replaced by the We Generation of the '90s. I don't believe it for a minute. Most people in this decade are still doing their own thing, looking out for No. 1, as they continue to live, as the social critic David Riesman suggested decades ago, as members of "the lonely crowd."

No wonder the professionals' strategies for dealing with compassion fatigue rarely work anymore. For care-givers are forced to work in a compassion-vacuum that sucks up every impulse of caring they can muster. In the compassionless world of the Me Generation, no care-giver can ever offer enough. Such a society can only chew up its care-givers.

The solution? Begin to forge connections, once again. Commit yourself to your neighborhood. Get involved with those old, down-home mediating institutions, such as the PTA or the block-watch group. Give up your couch-potato religion, and get involved in your local congregation. Explore what it really means to live in a bio-region, with many different kinds of people, all of them dependent on a single system of ecological roots.

Above all, forsake that holier-than-thou attitude toward the public life: toward the arts, government, corporate responsibility, prophetic religious initiatives, education for the sake of the common good and health-care programs. Care for the public things, the *res publica*, once again.

An across-the-board investment in a caring society, on the part of all of us, would do wonders for the lives of those burdened professional care-givers, who now suffer so much from compassion fatigue. It would, indeed, do wonders for all of us.

H. Paul Santmire is pastor of Grace Lutheran Church in Hartford.