ProQOL - R III

PROFESSIONAL QUALITY OF LIFE

Compassion Satisfaction and Fatigue Subscales - Revision III

Helping others puts you in direct contact with other people's lives. As you probably have experienced, your compassion for those you help has both positive and negative aspects. We would like to ask you questions about your experiences, both positive and negative, as a helper. Consider each of the following questions about you and your current situation. Write in the number that honestly shows how often the statement has been true for you in the last 30 days.

0=Never	1=Rarely	2=A Few Times	3=Somewhat Often	4=Often	5=Very Often
1.	I am happy.				
2.	I am preoccupied w	rith more than one person	I help.		
3.	I get satisfaction fro	om being able to help peop	ple.		
4.	I feel connected to	others.			
5.	I jump or am startle	ed by unexpected sounds.			
6.	I have more energy	after working with those	I help.		
7.	I find it difficult to	separate my private life fr	om my life as a helper.		
8.	I am losing sleep ov	ver a person I help's traum	natic experiences.		
9.	I think that I might	have been "infected" by t	he traumatic stress of those I	help.	
10	. I feeltrapped by m	y work as a helper.			
11	. Because of my help	ping, I have feel "on edge	" about various things.		
12	. I like my work as a	a helper.			
13	. I feel depressed as	a result of my work as a h	elper.		
14	. I feel as though I a	m experiencing the traum	a of someone I have helped.		
15	. I have beliefs that	sustain me.			
16	. I am pleased with l	now I am able to keep up	with helping techniques and	protocols.	
17	. I am the person I a	always wanted to be.			
18	. My work makes n	ne feel satisfied.			
19	. Because of my wo	ork as a helper, I feel exha	nusted.		
20	. I have happy thou	ghts and feelings about th	ose I help and how I could he	elp them.	
21	. I feel overwhelme	d by the amount of work	or the size of my caseload I h	nave to deal with.	
22	. I believe I can mal	ke a difference through m	y work.		
23	. I avoid certain act	ivities or situations becau	se they remind me of frighter	ning experiences	of the people I help.
24	. I plan to be a helpe	er for a long time.			
25	. As a result of my h	elping. I have sudden, un	wanted frightening thoughts.		
26	. I feel "bogged dov	vn" by the system.			
27	. I have thoughts tha	it I am a "success" as a he	lper.		
28	. I can't re member is	mportant parts of my wor	k with trauma victims.		
29	. I am an unduly sen	sitive person.			
30.	I am happy that I c	hose to do this work.			
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Self-scorning directions Research Information on the

ProQOL - CSF-R-III: Professional Quality of Life: Compassion Satisfaction and Fatigue Subscales

Please note that research is ongoing on this scale and the following scores should be used as a guide, not confirmatory information. Subscales and cut points are theoretically derived. When at all possible, data should be used in a continuous fashion, rather than with cut scores. Cut scores should be used for guidance and comparability of samples, not for diagnostic or confirmatory information.

Self-scorning directions

- 1. Be certain you respond to all items.
- 2. On some items the scores need to be reversed. Next to your response write the
- 3. Reverse of that score. (i.e. 0=0, 1=5, 2=4, 3=3) Reverse the scores on these 5 items: 1, 4, 15, 17 and 29. Note that 0 is not reversed because it is a null value regardless of the direction of the item.
- 4. Mark the items for scoring:
 - a. Put an x by the following 10 items: 3, 6, 12, 16, 18, 20, 22, 24, 27, 30
 - b. Put a check by the following 10 items: 1, 4, 8, 10, 15, 17, 19, 21, 26, 29
 - c. Circle the following 10 items: 2, 5, 7, 9, 11, 13, 14, 23, 25, 28
- 5. Add the numbers you wrote next to the items for each set of items and compare on theoretical scores.
- 6. Write your answers below. The scoring is based on theoretical cut-points derived from ongoing research and are approximations only. If you have any concerns, you should discuss them with a physical or mental health care professional.

Compassion Satisfaction	Compassion	Satisfaction		
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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 your ability to be an effective caregiver in your job.

The average score is 37 (SD 7; alpha scale reliability .87). About 25% of people score higher than 41 and about 25% of people score below 32. If you are in the higher range, you probably derive a good deal of professional satisfaction from your position. If your scores are below 32, 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.

Burn	out		

Most people have an intuitive idea of what burnout is. From the research perspective, burnout 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 23 (SD 6.0; alpha scale reliability .72). About 25% of people score above 28 and about 25% of people score below 19. If your score is below 19, this probably reflects positive feelings about your ability to be effective in your work. If you score above 28, 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.

Compassion Fatigue/Secondary Trauma

Compassion fatigue (CF), also called secondary trauma (STS), and related to Vicarious Trauma (VT) is about your work-related, secondary exposure to extremely stressful events. For example, you may repeatedly hear stories about the traumatic things that happen to other people, commonly called VT. If your work puts you directly in the path of danger, such as being a soldier or humanitarian aide worker, this is not secondary exposure; your exposure is primary. However, if you are exposed to others' traumatic events as a result of your work, such as in an emergency room or working with child protective services, this is secondary exposure. The symptoms of CF/STS are usually rapid in onset and associated with a particular event. They may include

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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 13 (SD 6; alpha scale reliability .80). About 25% of people score below 8 and about 25% of people score above 17. If your score is above 17, 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.

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