

Book Review / Compte rendu

Austin, W. E., Brintnell, S., Goble, E., Kagan, L., Kreitzer, L., Larsen, D. J., & Leier, B. (2013). *Lying Down in the Ever-Falling Snow: Canadian Health Professionals' Experience of Compassion Fatigue*. Waterloo, ON: Wilfred Laurier University Press. ISBN 978-1-55458-888-6. 230 pages

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ABSTRACT

Lying Down in the Ever-Falling Snow presents the results of phenomenological research conducted by 7 leading health care providers representing the range of caring professions. The various published definitions of compassion and compassion fatigue are discussed. Selections from research interviews with 25 volunteer health care providers about their “felt experience” of compassion fatigue are interwoven with the authors’ interpretative insights within 1 of 4 themes: bodily, temporal, spatial, and relational. The experience of hope and hopelessness are discussed, as well as the roles they play in compassion fatigue onset and recovery. In the final chapters, the authors consider aspects of care for the suffering caregivers.

RÉSUMÉ

L'ouvrage intitulé *Lying Down in the Ever-Falling Snow* présente les résultats d'une recherche phénoménologique menée par 7 chefs de file de la prestation de soins de santé représentant toute la gamme des professions d'aide. On y traite des diverses définitions publiées de la compassion et de l'usure de compassion. Des extraits choisis d'entrevues de recherche menées auprès de 25 fournisseurs de soins de santé volontaires au sujet de leur « expérience vécue » de l'usure de compassion sont intégrés aux comptes rendus interprétatifs des auteurs, en fonction de l'un des quatre aspects thématiques : l'aspect corporel, temporel, spatial, et relationnel. On discute de l'expérience de l'espoir et du désespoir, ainsi que de leurs rôles dans le déclenchement et la guérison de l'usure de compassion. Dans les derniers chapitres, les auteurs analysent certains aspects des soins à l'intention des aidants qui souffrent.

The authors of *Lying Down in the Ever-Falling Snow* set out to further the understanding of compassion fatigue through learning what it is like to experience the condition. They discuss the results of their phenomenological study of health professionals from a variety of aspects, with the intent to convey an account of the variety of compassion fatigue experiences that might otherwise be lost if reduced to numerical data or tidy verbal summaries. The first four chapters provide a discussion of compassion as the “ground” of care, followed by a review of the various published understandings of compassion fatigue, then the authors’ working definition of the concept. The central four chapters describe the results of their phenomenological study in which they interviewed 25 health care providers

to acquire the descriptions of compassion fatigue “as it is lived,” which form the essential contribution of the book. The final two chapters discuss hope and hopelessness as experiences significant for our deeper understanding of the experience of those suffering compassion fatigue, and contain the authors’ reflections about avoiding compassion fatigue and caring for those who suffer from it.

The seven authors formed an impressive interdisciplinary team: Wendy Austin, a registered nurse and professor who holds a Canada Research Chair in Relational Ethics in Health Care; Sharon Brintnell, an occupational therapist, professor, and current president of the World Federation of Occupational Therapists; Paul Byrne, an intensivist and director of the Dossetor Health Ethics Centre of the University of Alberta; Erika Goble, an anthropologist with experience in the arts and caring for persons with disabilities; Leon Kagan, psychiatrist and clinical professor; Linda Krietzer, social worker, professor, and author of *Social Work in Africa*; Denise Larsen, a chartered psychologist, professor, and director of research at the Hope Foundation of Alberta; and Brendan Leier, a philosopher and clinical ethicist. The discussions of definitions of compassion and compassion fatigue offer us thoughtfully summarized contributions from a variety of thinkers, but we are not led to choose a favourite. The academic side of us may yearn for neat classification criteria, but the caregiver side of the reader will be happy to find that, for the authors, compassion is simply “the experience of another’s suffering combined with the motivation to alleviate that suffering.” Rather than compose a tidy definition of compassion fatigue, the authors give us four chapters providing numerous samples of “experiential concreteness of what it is like to be a Canadian health professional with compassion fatigue” (p. 62). Discussion of those experiences is developed around four aspects of human awareness: bodily, temporal, spatial, and relationships.

Four chapters delve into experiences of these four aspects. One chapter, for example, recounts bodily experiences of compassion fatigue, such as feeling zombie-like instead of sharing the pain. The next chapter looks at the temporal experience, for example, being unable to imagine a way out to a future that is different from the horrible today. Next are the spatial experiences, such as being denied the space required to be a social worker. Finally, the relational ones, such as being unable to focus on the everyday concerns of one’s children, are recounted. Surprisingly, the four sets of experiences do emerge as differing widely along a spectrum, but all have the effect of often making painful the very caring behaviour in which they are so intensely invested. Reading the caregiver accounts, we learn how the professional activities in which so much of their lives are invested can result in intense suffering from which relief does not seem to be available.

There is a sense in which these are horror stories, but the recounted experiences are heard in modulated voices, not as whines or lists of complaints. It is the gradual realization that the many devoted caregivers in our healthcare systems expose themselves daily to the dangers of suffering as a consequence of those conditions. To the extent that this book brings the reality of compassion fatigue to our collective awareness, there is reason to hope that increased understanding

can promote avoidance of compassion fatigue for many as well as the amelioration of the suffering of those who become afflicted. My inclination is to consider the “fatigue” as much the same as the consequence of accumulated emotional arousal experiences that are known as complex posttraumatic stress disorder.

The discussion of hope does much to enlarge our comprehension of the processes that underlie the “fatigue” condition. Hope is seen as necessary for compassion, but hope repeatedly denied without adequate conditions for restoration is a damaging experience. The final chapter takes issue with the notion that self-care by becoming “toughened” is wrong—that response damages “the capacity for moral perception” (p. 82). Survival as a compassionate caregiver is a function of “meaningful connections with patients and their families” (p. 82), of “seeking connection, valuing it, and seeing the humorous side of life” (p. 83), and the capacity to reflect on one’s emotions, attitudes, and experiences. The authors present a thoughtfully detailed discussion of what can be done to lessen and prevent the suffering and loss caused by compassion fatigue.

The emotional reality of the compassion fatigue experience emerged more profoundly for me as I read further in the text. The psychologist in me felt not only compassion for the suffering caregivers, but an urge to delve into how their self-images were hurting, how they felt denied opportunity to talk about their distress with someone who would listen, and the pain of being constrained from doing more for their clients. The depictions of the emotional life of caregivers afford invaluable experience for the reader, perhaps even an enlargement of one’s emotional compass. From a more functional view, the accounts can serve as a stimulus for analysis of the process of caregiving itself, which could foster a more sensitive institutional management, both self and organizational. Some readers may fare better to merely skim the early discussion of rather academic understandings of compassion and fatigue and then get immersed in the shared experiences. Still, the authors have collaboratively created a comfortably readable text, effectively smoothing any disjunctions, so that the reader is given an eminently readable, finely woven work.

About the Author

David S. Hart is a retired professor of psychology, Memorial University of Newfoundland. His main interests are the nature of anxiety and its treatment, traumatic stress, and the psychology of disaster.

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