

Tulane researchers studying compassion fatigue among COVID-19 workers

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COVID-19's psychological and emotional effects on front-line workers are the subject of a School of Social Work survey to determine the extent of compassion fatigue among medical professionals, mental health professionals and other first responders. (iStock photo)

Researchers with the Tulane University School of Social Work are conducting a survey to determine the extent of compassion fatigue among doctors, nurses and other front-line workers responding to the COVID-19 pandemic.

The survey is the work of disaster mental health experts Leia Saltzman, Tonya Hansel and Charles Figley, the latter of whom was among the scholars who coined the term “compassion fatigue.” Figley is also director of the [Tulane Traumatology Institute](#).

“Compassion fatigue is related to the concept of burnout,” said Saltzman, an assistant professor. “It is something we see sometimes in caregivers and emergency responders, particularly in disaster scenarios.”

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Leia Saltzman

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The study seeks input from medical professionals, mental health professionals such as social workers, psychologists and psychiatrists, and other first responders.

Figley, Hansel and Saltzman developed the survey in the early days of the pandemic, knowing that it would take a psychological and emotional toll on front-line workers, who themselves were living in the crisis just like the rest of the population. That factor could compound the stress of first responders and thus the risk of compassion fatigue, Saltzman said.

“The goals of most studies of this nature are to better understand the human condition so that we can make recommendations of how to improve outcomes,” she said. “COVID-19 has presented a new and unique circumstance, and so getting more information about what places first responders at risk for, or protects them from, compassion fatigue in this context is important because we have never been here before.”

Saltzman said she expects the study to conclude with two sets of recommendations.

“The first would focus on what needs to be done to reduce negative outcomes such as compassion fatigue and burnout. The second would focus on what might help to promote positive outcomes such as resilience and post-traumatic growth.”