



The Relationship among Self-Compassion, Compassion Fatigue and Job Satisfaction in Counseling Psychologists

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Research Article

Volume 6 Issue 2

Received Date: July 29, 2022

Published Date: August 30, 2022

DOI: 10.23880/mhrij-16000186

Abstract

104 counseling psychologists took part in the current study in order to test the correlation among self-compassion, compassion fatigue and job satisfaction. The results showed that the psychologists who scored higher on self-compassion, had higher scores on job satisfaction and lower scores on compassion fatigue. The psychologists who scored higher on compassion fatigue, they experienced less satisfaction from their job. Self-compassion had not a significant role in the relationship between compassion fatigue and job satisfaction. Further research should be done to test the contribution of self-compassion on intrinsic motives.

Keywords: Self-Compassion; Compassion Fatigue; Job Satisfaction; Counseling Psychologists

Introduction

Work occupies most of the daily life in adulthood and also influences the other areas of adult's life. When the employee feels that their motivations are satisfied in the workplace, then they experience greater job satisfaction. There are many definitions to explain what job satisfaction is, but a commonly accepted definition refers to the positive emotional state that results from evaluating a person's work experience. The literature has largely researched job satisfaction, as it has been associated with significant benefits at work, but also in the employee's life. Job satisfaction also has a positive effect on the company in which the employee works, as a satisfied employee shows greater commitment to their work and performs better. Still, job satisfaction has been linked to ethical organizational behavior. Also, an employee who experiences satisfaction from their job, experiences greater life satisfaction, less stress levels and more subjective well-being.

Various theories and models have been developed to explain job satisfaction, the factors and what needs to be done in order for an employee to be satisfied. These models are based on the same factors, but approach them differently. A key theory is Maslow's theory [1] who advocated the prioritization of needs over physiological needs, safety needs, social or belonging needs, self-esteem, and self-actualization. Then, Herzberg [2] developed the Two Factor Theory. This theory recognizes the contribution of motivations and distinguishes them into two broad categories. On the one hand, there are external motivations (they are also found as hygiene factors) and relate to factors such as wages and working conditions. Intrinsic motivation is the second category and concerns recognition, responsibility taking, goals achievement and opportunities for evaluation and personal development [3]. Satisfaction with intrinsic motivations leads the employee to experience job satisfaction [3]. On the other hand, the satisfaction of external motivations simply ensures that the employee will

not experience dissatisfaction with his job, but it does not lead to job satisfaction. When external motivations are met, job dissatisfaction is alleviated or reduced, but external factors have no motivating effect on the employee and do not lead to job satisfaction [2].

Which professions have the highest levels of job satisfaction is unknown, but research has shown that teleworkers are more satisfied with their job compared to people who work in offices [4]. The majority of surveys have studied job satisfaction mainly in nurses [5,6] and teachers [7-9]. Research on psychologists has shown different results. For example, one study found that job satisfaction has increased among school psychologists [10], while public service psychologists have moderate levels of job satisfaction [11]. There are some risk and protective factors, which prevent and lead respectively to job satisfaction. Among the risk factors are posttraumatic stress disorder, wellness, and unhappiness with career [12], job stress [13] and compassion fatigue. Among the protective factors are work-life balance [14], organizational climate [15], organizational commitment [16] and positive variables, like gratitude [17-19].

Compassion fatigue is an emotional state that arises after the individual's indirect exposure to traumatic experiences [20]. Compassion fatigue is distinguished in the dimensions of exhaustion and secondary traumatic stress [21] and is accompanied by cognitive, emotional, physical and behavioral reactions [20]. Compassion fatigue is created in people who come into indirect contact with a person's traumatic experience and try to alleviate it [22]. Occupations related to human pain and care, such as psychologists [23], social workers [24], nurses [25] and caregivers [26] more often show compassion fatigue. The individual factors of burnout [27] and secondary traumatic stress [28,29] have also been confirmed in psychologists population. The symptoms of compassion fatigue vary: burnout, unexpected sounds, intrusive thoughts and images, avoidance of situations and conversations which are similar to the specific trauma (secondary traumatic stress) [30]. There are personal (e.g. gender) [31] and work factors that make the professional more vulnerable to compassion fatigue. Young professionals [32] and psychologists with little work experience [33] are more prone to compassion fatigue.

Compassion fatigue has symptoms in the professionals' work life. In psychologists in particular, it has been associated with barriers to therapy success [27]. General counselors desire to abandon their work due to compassion fatigue [34]. Also, compassion fatigue has a severe impact on the satisfaction that professionals experience from their

work. There seems to be a negative relationship between compassion fatigue and job satisfaction [35], but also between the dimensions of compassion fatigue and job satisfaction. Burnout predicts and is negatively related to job satisfaction [36-38]. Also, secondary traumatic stress predicts and is negatively related to job satisfaction according to research in substance abuse counselors [39]. Although the literature agrees that as compassion fatigue and its dimensions increase, job satisfaction will decrease, there are also findings that show that job satisfaction is not affected by compassion fatigue [40,41].

There are some factors that reduce the negative effects of compassion fatigue, such as supervision [42,43], mindfulness [44], self-care [45,46] and self-compassion [47]. Self-compassion is the caring attitude that person adopts towards themselves, the kindness they show to themselves in front of difficult moments, being aware of the thoughts and feelings in the present moment and recognizing that pain is a common feeling. At the same time, the individual does not neither punish nor criticize themselves, does not avoid the situation, nor over-analyze it and does not believe that they are disconnected from others [48]. Self-compassion is associated with positive aspects such as happiness, optimism, prosperity [49] and resilience [50]. Self-compassion protects psychologists against burnout, stress, anxiety, depression [51-54].

There are ambiguous results for the relationship between self-compassion and compassion fatigue. Self-compassion is negatively related to compassion fatigue in trainee psychologists in counseling and CBT [51]. According to previous bibliography in psychotherapists, the positive dimensions of self-compassion are negatively related to burnout and secondary traumatic stress, while the negative dimensions are positively related [55]. Also, the participants who took part in a program based on self-compassion and mindfulness, when the program was over, they scored lower on compassion fatigue [47]. Furthermore, self-compassion moderates the effect of burnout (dimension of compassion fatigue) on barriers to physician compassion [56]. On the other hand, there are studies, which have shown the opposite results. Self-compassion reduces only the burnout's effect [53,57], but not those of secondary traumatic stress [58]. In the Greek literature, self-compassion is not related to compassion fatigue in mental health professionals [59].

Also, psychologists who show self-compassion, they experience more happiness [54], mindfulness [52], well-being [51], compassion for others and empathy. Self-compassion is also associated with positive organizational and job behaviors, such as job satisfaction. Research shows

that self-compassion is positively related to job satisfaction in nurses [60], office workers [61], teachers [62] and employees in general [19]. Self-compassion mediates the relationship between communication competence and job satisfaction in organizational leaders and managers [63].

According to the literature, the relationship between job satisfaction and self-compassion and job satisfaction and compassion fatigue in counseling psychologists has not been studied before. Also, the role of self-compassion in the relationship between compassion fatigue and job satisfaction has not been studied, but as self-compassion acts protectively against compassion fatigue, it may reduce its effects on job satisfaction. The purpose is to study the role of self-compassion in the relationship between compassion fatigue and job satisfaction and the correlation among the variables in counseling psychologists. The research hypotheses are:

H1: Self-compassion will predict job satisfaction in counseling psychologists.

H2: Self-compassion will predict compassion fatigue in counseling psychologists.

H3: Compassion fatigue will predict job satisfaction in counseling psychologists.

The research question is: Will self-compassion moderate or mediate the relationship between compassion fatigue and job satisfaction in counseling psychologists?

Methodology

Sample

The sample consisted of 104 counseling psychologists (n= 94 women, n= 10 men). The average age was 35 years and they had almost 8 years of work experience. Most of the participants had a master's degree and were trained in psychotherapy. The majority had been trained in Systemic Psychotherapy (n= 39) and Cognitive Behavioral Therapy (n= 37). 50 of the participants worked privately and the rest practice psychology in schools, hospitals and centers. Snowball sampling was followed.

Materials

Self-compassion was measured with the Self-compassion scale [64,65]. Participants answered 26 questions based on six dimensions, three positive (self-kindness, common humanity, mindfulness) and three negative (self-judgment, isolation, over-identification). Answers are given on a 5-point Likert scale. Cronbach's alpha reliability was high for the overall scale and subscales

(self-compassion $\alpha = .943$, self-kindness $\alpha = .824$, common humanity $\alpha = .803$, mindfulness $\alpha = .765$, self-criticism $\alpha = .804$, isolation $\alpha = .734$, over-identification $\alpha = .773$). Compassion fatigue was measured by the Quality of Life Scale [21]. The scale consists of the dimensions of burnout and secondary traumatic stress subscale (compassion fatigue subscale) and compassion satisfaction. The compassion satisfaction subscale was not included in the statistical analyzes as it did not serve the research purposes. Participants answered 30 questions on a 5-point Likert scale (1= never, 5= very often). The back-translation procedure was followed and since Cronbach's alpha reliability was high both in the pilot test (compassion fatigue: $\alpha = .775$, burnout $\alpha = .741$, secondary traumatic stress $\alpha = .728$) and in the present study (compassion fatigue: $\alpha = .886$, exhaustion $\alpha = .831$, secondary trauma $\alpha = .811$).

Job satisfaction was measured by the Warr-Cook-Wall (WCW) Job Satisfaction [66]. In the present study it was delivered in the short form of 10 questions instead of the 15 of the original, as in the short form it was used in mental health environments [67] and health [68,69] surveys. The questions not included in the study had content relevant to businesses and industries and were not considered appropriate for the research sample. The scale is based on Herzberg theory [2], some questions are about intrinsic motivation, some are about hygiene factors and the last question measures overall satisfaction. The questions are given on a 7-point Likert scale (1= I'm extremely dissatisfied, 7= I'm extremely satisfied). Reliability of job satisfaction in pilot test ($\alpha = .778$) and basic research was high ($\alpha = .869$). Participants also completed a demographic form including questions about their gender, age, family and educational background, therapeutic approach, work experience and current job position.

Procedure

Two of the survey's questionnaires (Quality of Life Scale and WCW Job Satisfaction) have not been adapted in Greek, so the back-translation procedure has been followed. Participants completed the questionnaires online. The research complied with the ethics code and guidelines [70].

Results

The research variables' normality test was checked using the Kolmogorov-Smirnov test and the Shapiro-Wilk test and it was confirmed ($p > 0.05$). The mean scores of self-compassion and its dimensions, compassion fatigue and job satisfaction were moderate (Table 1).

Scales	Subscales	M	SD	Cronbach's alpha
Self-compassion		2.99	0.72	0.943
	Self-kindness	2.91	0.84	0.824
	Common humanity	2.87	0.93	0.803
	Mindfulness	3.07	0.88	0.765
	Self-judgment	2.9	0.81	0.804
	Isolation	2.99	0.86	0.734
	Over-identification	2.99	0.82	0.773
Compassion fatigue		54.04	8.6	0.886
	Burnout	26.36	4.1	0.831
	Secondary traumatic stress	27.68	4.5	0.811
Job satisfaction		38.93	7.63	0.869

Table 1: Mean Scores (M) and Standard Deviations (SD) (N=104).

The first three research hypotheses were tested with Linear Regression R. Self-compassion and its positive and negative distances predict compassion fatigue. Self-compassion explains the 61% of the variance in compassion fatigue, $F(1,102)=162.31$, $p<.001$, $b=-13.20$. Self-kindness explains the 53.1% of the variance in compassion fatigue, $F(1,102)=117.52$, $p<.001$, $b=-10.53$. Common humanity explains the 54.8% of the variance in compassion fatigue, $F(1,102)=115.832$, $p<.001$, $b=-9.69$. Mindfulness

explains the 49.6% of the variance in compassion fatigue, $F(1,102)=102.25$, $p<.001$, $b=-9.72$. Self-judgment explains the 36.7% of the variance in compassion fatigue, $F(1,102)=60.71$, $p<.001$, $b=9.10$. Isolation explains the 34.1% of the variance in compassion fatigue, $F(1,102)=54.21$, $p<.001$, $b=8.30$. Over-identification explains the 29.7% of the variance in compassion fatigue, $F(1,102)=44.62$, $p<.001$, $b=8.12$ (Table 2).

Predictor Variable	b	SE B	B	t	p
Self-compassion	-13.2	1.04	-0.79	-12.74	<.001
Self-kindness	-10.53	0.98	-0.73	-10.84	<.001
Common humanity	-9.69	0.86	-0.73	-11.22	<.001
Mindfulness	-9.72	0.96	-0.71	-10.11	<.001
Self-judgment	9.1	1.17	0.61	7.79	<.001
Isolation	8.3	1.13	0.59	7.36	<.001
Over-identification	8.12	1.22	0.55	6.68	<.001

Table 2: Compassion fatigue prediction by the predictor variables (N=104).

Self-compassion and its positive and negative distances and compassion fatigue predict job satisfaction. Self-compassion explains the 53.7% of the variance in job satisfaction, $F(1,102)=120.41$, $p<.001$, $b=7.81$. Self-kindness explains the 38.5% of the variance in job satisfaction, $F(1,102)=65.56$, $p<.001$, $b=5.67$. Common humanity explains the 50.7% of the variance in job satisfaction, $F(1,102)=107.10$, $p<.001$, $b=5.88$. Mindfulness explains the 39.1% of the variance in job satisfaction, $F(1,102)=67.25$,

$p<.001$, $b=5.45$. Self-judgment explains the 32.5% of the variance in job satisfaction $F(1,102)=50.59$, $p<.001$, $b=-5.40$. Isolation explains the 38.7% of the variance in job satisfaction. Over-identification explains the 25.8% of the variance in job satisfaction, $F(1,102)=36.75$, $p<.001$, $b=-4.77$ (Table 3). Compassion fatigue explains the 46.5% of the variance in job satisfaction, $F(1,102)=90.59$, $p<.001$, $b=-.43$ (Table 3).

Predictor Variable	b	SE B	B	t	p
Self-compassion	7.81	0.71	0.736	10.94	<.001
Self-kindness	5.67	0.7	0.626	8.1	<.001
Common humanity	5.88	0.57	0.716	10.35	<.001
Mindfulness	5.45	0.67	0.63	8.2	<.001
Self-judgment	-5.4	0.76	-0.576	-7.11	<.001
Isolation	-5.56	0.69	-0.627	-8.13	<.001
Ove-identification	-4.77	0.79	-0.515	-6.06	<.001
Compassion fatigue	-0.43	0.05	-0.686	-9.52	<.001

Table 3: Job satisfaction prediction by the predictor variables (N=104).

A Moderation test (*Regression Process v3.5 by Andrews Hayes-Model 1*) was carried out to investigate whether self-compassion (moderator variable) regulates the relationship between compassion fatigue (predictor variable) and job satisfaction (outcome variable). While self-compassion and compassion fatigue predicted job satisfaction at a statistically significant degree ($p < 0.05$), the effect of the interaction of compassion fatigue and self-compassion on job satisfaction was not statistically significant, $b = .09$, 95% CI [-0.4520, 0.6250], $t = 0.32$, $p > 0.05$. Therefore, we cannot proceed to further analysis in order to identify the levels of self-compassion that regulate the relationship between the predictor and the outcome variable, as there is no interaction.

It was also reexamined whether self-compassion (mediating variable) mediates the relationship between compassion fatigue (predictor variable) and job satisfaction (outcome variable) through Mediation analysis (*Regression Process v3.5 by Andrews Hayes-Model 4*). Compassion fatigue predicts statistically significantly job satisfaction both when self-compassion is absent $F(1,102) = 90.59$, $p = .000$, $b = -0.93$, 95% CI [-1.125, -0.736], $t = -9.49$, $p = .000$, and also when self-compassion is included in the mediation model, $b = -0.18$, 95% [-0.31, -0.05], $t = -2.70$, $p = .0081$. As long as the effect size b and the level of statistical significance p were not weakened when self-compassion was included in the model, mediation does not exist.

Discussion

The aim of the research was to study the relationship between self-compassion, compassion fatigue and job satisfaction, as well as self-compassion's role in the relationship between the other two variables. The study participants had moderate levels in all research variables. They had moderate levels of self-compassion and as it have been confirmed in previous literature; psychologists do not take care of themselves as much as they take care of others [20]. Participants also had moderate levels of job satisfaction. Although job satisfaction has increased in school

psychologists [10], job satisfaction levels are moderate in psychologists working in public services [11]. Job satisfaction levels could also be attributed to Covid-19 to some extent, which has affected working life and working conditions and has an impact on job satisfaction.

The first research hypothesis was assumed as self-compassion and its dimensions predict job satisfaction. Self-compassion and positive dimensions (self-kindness, common humanity and mindfulness) predict and are positively related to job satisfaction. Negative dimensions (self-criticism, isolation, and over-identification) predict and are negatively related to job satisfaction. Previous literature has not studied this relationship in counseling psychologists, but they have also shown a positive relationship in a sample of nurses [60], white collar workers [61], teachers [62] and employees in general [19]. This is the first research, which studied the relationship between self-compassion and job satisfaction in counseling psychologists. Although the relationship between self-compassion and job satisfaction has been studied, the individual dimensions have not been included. The current results showed that the positive aspects had a positive correlation with job satisfaction, while the negative aspects had a negative one. Psychologists come into indirect contact with the experience of traumatic experiences, developing symptoms of burnout [27] and secondary traumatic stress [28,29], which have a negative effect on job satisfaction [35-39].

Furthermore, the nature of the specific profession creates expectations in clients and in professionals too, who take the whole responsibility for their clients' progress. The undesirable outcome of the therapy can be attributed to the psychologists themselves, who criticize themselves for this result, feel isolated and disconnected and over-identify or avoid the clients' and their own feelings in order to protect themselves from the emotional pain. But by showing self-compassion, kindness towards themselves in difficult situations, recognizing that worries are common to all people (common humanity) and being aware of negative

thoughts and feelings (mindfulness), then they seem to be able to experience greater satisfaction from their work. It is interesting that the researches which studied the relationship between self-compassion and job satisfaction, included in their sample a variety of job characteristics. In previous studies the participants were professional who come in direct contact with children [62], with patients and traumatic people [60] or concern professionals with an administrative role [61]. They were also conducted on employees from different professions, with fixed or flexible hours and with different working conditions, such as in-distance work [19]. In other words, it seems that self-compassion does not benefit a specific category of professions. However, as the study of the relationship in counseling psychologists is limited, more research needs to be done to confirm its importance.

The second hypothesis was confirmed as self-compassion predicts compassion fatigue. In particular, self-compassion and its positive dimensions predict and are negatively related to compassion fatigue, while the negative dimensions are positively related. When self-compassion and positive dimensions increase or decrease, then compassion fatigue decreases or increases respectively. On the other hand, when counseling psychologists are critical towards them and score high on isolation and over-identification, then compassion fatigue increases as well. The previous literature does not show a clear direction of the relationship between self-compassion and compassion fatigue. The present study agrees with research data provided to trained psychologists in counseling and CBT [51], to therapists [55] and nurses [47]. Other research has shown that self-compassion only reduces the dimension of burnout [57] and not the secondary traumatic stress [58], while the correlation is absent in mental health professionals [59]. The present research studied the whole factor of compassion fatigue and not each dimension separately as in previous researches [53,57]. Also, the research conducted by Mantelou A, et al. [59] concluded different mental health professionals, including psychologists, psychiatrists, social workers, so demographic characteristics may affected the results.

The third hypothesis was confirmed, compassion fatigue predicts and is negatively related to job satisfaction. Counseling psychologists who experience compassion fatigue, this has a negative impact on their work and they do not experience job satisfaction. Experiencing burnout and showing symptoms of secondary traumatic stress due to indirect exposure to pain and trying to relieve had a negative effect on the satisfaction that the counseling psychologist have from their job. Previous research has shown the same results, that compassion fatigue [35] and its dimensions, burnout [36-38] and secondary traumatic stress [39] are negatively related to job satisfaction.

The research question studied whether self-compassion moderates or mediates the relationship between compassion fatigue and job satisfaction. The results showed that self-compassion does not moderate or mediate the relationship between compassion fatigue and job satisfaction. This model has not been re-studied in previous research and we have relied on previous studies that has shown that self-compassion mediates the relationship between the communication competence and job satisfaction [63] and that it moderates the relationship between burnout (compassion fatigue dimension) [21] with barriers to compassion for others [56]. Compassion fatigue predicts job satisfaction [35-39], but self-compassion does not influence this relationship. Compassion fatigue includes cognitive, emotional, physical and behavioral reactions [20] that affect job satisfaction regardless of the counseling psychologist's attitude towards themselves. It is important to consider the material used to measure job satisfaction. The WCW Job Satisfaction [66] is based on the Two Factors theory [2], which includes questions about extrinsic motivation-hygiene factors (e.g. salary), intrinsic motivation (e.g. recognition) and the whole job satisfaction. The scoring is extracted through the sum of all items and does not have individual dimensions (extrinsic and intrinsic motives). Most likely, extrinsic motivations, such as salary and relationships with colleagues may not be affected by compassion fatigue. On the contrary, compassion fatigue may have an effect on intrinsic motives, so if they could be studied individually, we might have had different results. Moreover, as the theory itself supports, achieving extrinsic motivations does not necessarily lead to job satisfaction, but ensures that the employee does not experience dissatisfaction [2]. Finally, the study participants had moderate levels of self-compassion and possibly higher levels of self-compassion may be able to moderate and protect job satisfaction from the effects of compassion fatigue.

Implications

The present study argues with the previous literature that professionals, who express kindness to themselves, recognize difficulties as part of humanity, balance their thoughts and feelings, and generally show self-compassion, and then they experience greater satisfaction from their job. On the contrary, when they are critical to themselves, experience a difficult situation uniquely, are isolated and over-analyze the negative thoughts and emotions, then job satisfaction decreases. Self-compassion also reduces compassion fatigue, which has a negative impact on the individual's daily life and work, and consequently on clients. Cultivating self-compassion seems particularly useful and beneficial for counseling psychologists.

Limitations and Future Research Directions

One limitation was that the research sample size was small (N= 104). Also, snowball sampling does not allow generalizing the results to the representative population [71]. Some demographic characteristics overrepresented the sample (e.g. gender, therapeutic approach). Two of the research materials (WCW Job Satisfaction and Quality of Life Scale) were translated by back-translation process, as they have not been adapted in Greek. Future research needs to re-examine the relationship between job satisfaction with self-compassion and compassion fatigue in counseling psychologists. Finally, the role of self-compassion in the relationship between compassion fatigue and the satisfaction from intrinsic motivations could be studied.

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