Research Brief

The Cost of Caring: Compassion Fatique among Peer Overdose Response Workers in British Columbia

Zahra Mamdani, Sophie McKenzie, Emma Ackermann, Rayne Voyer, Fred Cameron, Tracy Scott, Bernie Pauly & Jane A. Buxton (2023) The Cost of Caring: Compassion Fatigue among Peer Overdose Response Workers in British Columbia, Substance Use & Misuse, 58:1, 85-93. URL Background: Peer overdose response workers (peer responders), i.e., individuals with lived/living experience of drug use who work in overdose response settings, are particularly susceptible to the negative physical and mental health impacts of the drug toxicity crisis. Despite that, the mental health impacts on peer responders have yet to be studied and measured.

A research paper published in Substance Use and Misuse in November 2022 describes the factors influencing feelings of compassion satisfaction and compassion fatigue among peer responders.

Methods: The Professional Quality of Life survey (Version 5) was completed by 47 peer responders – 18 from Vancouver, 21 from Victoria and 8 from Maple Ridge – between September 2020 and March 2021 to assess compassion satisfaction and compassion fatigue. The Likert scale responses were converted into numerical values and scores were calculated for each sub-scale. The mean score was calculated for each sub-scale and categorized as low, medium, or high.

Findings: scored low. work with g Compassion Satisfaction Burnout 0 workplace w Secondary M traumatic е Vancouver. stress (STS) d i

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Most individuals scored high (59.6%), over a third scored medium (40.4%) and none

Of the survey participants:

- 91% said they liked the people they
- 100% said they felt a sense of pride in
- Women had a significantly higher compassion satisfaction score than men

The high compassion satisfaction score can potentially be explained by findings from our previous paper outlining the meaning and motivation peers derive from their work including a sense of purpose from helping others, pride from finding and being an inspiration to others, and a sense of belonging within a community.



Almost two thirds of participants (63.8%) scored low and the remaining scored medium. Factors associated with burnout included:

- Lack of recognition and appreciation in the
- Perception of pay being unfair
- High workload
- Non-supportive work environment, characterized by bickering and fighting in the workplace

The overall low burnout score may be due to the majority of participants (77%) feeling like they did not have too much to do at work or that many staff were new and therefore had not yet accumulated the stress and trauma of working as a peer responder.

53% scored low and 45% scored medium. Individuals in Maple Ridge and Victoria had significantly higher STS scores compared to The lower STS scores in Vancouver may be due to the high number of new staff and the better availability of community resources. Peer responders had a higher STS score than healthcare professionals in a similar studyⁱⁱ, which may be due to:

- Not having opportunities to unwind after a stressful day at work and repeated exposure to others' suffering.
- A lack of institutional supports, such as paid time off, access to counseling and stable long-term work arrangements.
- Responding to friends and family members, rather than clients or patients with whom they have no emotional attachment.

Conclusion: Although peer responders derive pleasure and fulfillment from their jobs, i.e., compassion satisfaction, they also sometimes face burnout and stress due to continuous exposure to the trauma of the people they support. These results shed light on the areas that need to be targeted when creating supports for peer responders.











