

ESSAY REVIEW

Parry, S. (Ed.) 2017. *Effective Self-Care and Resilience in Clinical Practice. Dealing with Stress, Compassion Fatigue and Burnout.* London. Jessica Kingsley Publishers. ISBN: 978-1-78450-331-4

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Introduction

The last few years have seen increasing research and interest in the role of prosocial, helping, caring and compassionate behaviour on a range of physiological, psychological and social processes. There are now a number of different models of compassion that offer different insights into this important dynamic of human activity. We can trace the origins of compassion to reproductive strategies linked to caring for offspring and on into the value of mutual self-help. We can begin to identify some of the neurophysiological mechanisms that evolved to support prosocial behaviour (e.g., the myelinated parasympathetic system of the vagus nerve, the role of oxytocin and the frontal cortex), rather than pure competitive self-interest. All of this, as the volume explains, builds towards increasing our understanding of how we function at our best when we feel safe, caring and cared for.

Neoliberal agendas, which support unregulated competitive self-interest, tribalism and defensiveness, are actually in the long run detrimental to our health, our relationships, organisations and societies. While competitive motives have a place, unbalanced competitive societies breed social comparison and 'playing people off against each other'. This, in turn, can be a source for self-criticism too rooted in the fear of rejection or not being 'good enough'. The objectification of the self can lead to functioning as an object in the cogs of production. Here, people can feel that the solution is simply to become better, to be a more efficient cog, even to the point of launching frustrative attacks on ourselves when we perceive ourselves to be imperfect. This dynamic is beautifully explored personally in the opening chapters of the book. Also explored within this most interesting text is the nature of compassion in different communities and cultures and, in particular, the interplay between organisational processes and the giving and receiving of compassion, particularly, but not only, in healthcare settings.

The volume demonstrates that the science of compassion is increasingly robust, important and urgent. It argues that there is another side to compassion that is related to the narratives that we create and the insights we obtain through living and working with compassion and provides wonderful contributions to such thinking. The series of personal reflections on how compassion has been both a challenge, but also a journey into the different dimensions of the self and the self in relationship, are absorbing. It is posited that there are times when our deepest insights come not from laboratories or statistical tests, but from realisations that arise from lived experience.

Throughout this book, practitioners have shared their honest stories and reflections around how sharing compassion can be both powerful and difficult in practice, with many considering the contexts and cultures in which their self-criticism thrived and self-kindness struggled to survive. However, through engaging with these complex processes and exploring the experiences that occur within us (intrapersonal), between us (interpersonal) and around us, we can begin to see the integral value of shared compassion. Sharing compassion with our colleagues, patients and those who consult us, is often what can make the important difference to healing, wellbeing, hope and resilience. The worksheets that follow this chapter offer some practical tips and guidance as to how we can begin to introduce a compassionate outlook and self-kindness into our day-to-day life experiences.

Thesis

The volume emphasizes the need to nurture staff so that they self-care and do not develop symptoms of compassion fatigue, burnout and stress. Authentic, compassionate care promotes self-empowering models that are relevant to how care should be provided. Compassion sits in the heart and

is the inspiration in every footprint at the patient's bedside. It should be the norm and not the exception, so that compassionate care becomes a way of thinking.

The book quotes a Vietnamese Buddhist monk and peace activist who wrote: "When you care for someone, the best thing you can offer them is your presence." Awareness of one another, it is emphasized, is necessary to treat others in a way that you would like to be treated oneself, so we should ask only of others what we would be willing to give ourselves. One author explains that as her journey into compassion and coaching has developed, she has also noticed that she has become more compassionate towards herself. Witnessing and working alongside the transformation of somebody else is, then, a very powerful experience. Being able to acknowledge with those who consult her that being 'good enough' is okay, that we all have similar struggles, shared experience and shared humanity. Working with people, she feels, has an impetus on promoting positive change and psychological wellbeing and, when failures occur we can bring self-compassion to them, recognising them not as something that reflects something intrinsic about us, but as events on the journey through life that make us who we are and perhaps make us more resilient and able to share the difficulties of others who we work with.

Difficult thoughts and emotions, to be sad or angry, to cry, to blame oneself, these emotions do not have to be hidden away from others or from ourselves. On the contrary, we can experience them as part of life that is full and varied, a life that is really lived, not for what was and what may be, but for this moment. This does not mean we should never plan for the future, nor strive to improve, but that we do this while recognising our experiences during the journey.

The meanings of compassion

If words are the 'heart of language', we should consider some important words within this book and their meaning, before exploring the meaning-making processes of the contributors through their written narratives. Naturally, compassion is the first word and meaning we need to discuss along with its many definitions in various contexts, although this book adopts the definition coined by the Compassionate Mind Foundation (2015) as 'a sensitivity to suffering in self and others with a commitment to try to alleviate and prevent it'. Referring to the work and writings of Pema Chodron a recognition of the mutuality and dynamic nature of compassion in working practice becomes possible. For Chodron, in cultivating compassion we draw from the wholeness of our experience - our suffering, our empathy, as well as our cruelty and terror. Compassion is not seen as a relationship between the healer and the wounded, but rather a relationship between equals. Only when we know our own darkness well can we be present with the darkness of others, so that compassion becomes real when we recognise our shared humanity.

One conclusion within this book is that when engaging with colleagues and students in discussions around the possibility of cultivating and nurturing compassion there

must be a shared willingness and trust within a pairing, small community or group of people in order for compassion to be present and accepted, which can encourage self-compassion to grow. Kristin Neff, a leading academic and international presence around self-compassion cited in the text, has concluded that self-compassion requires 'three main elements: kindness, a sense of common humanity and mindfulness'. The concept of self-compassion is particularly important for health and social care practitioners to implement due to the association between self-compassion and positive wellbeing.

Accepting emotions in this way can facilitate working through them to accept the reality, not the actions of others or ourselves, but our response to those actions in the moment. Although compassion, self-kindness and acceptance can often lead to connotations of 'letting oneself off the hook', 'self-indulgence' and 'lacking accountability', compassionate acceptance, the volume emphasizes, can enhance our capacity for struggle, so we actually become more accountable to our reactions and ways of responding to challenge. Accordingly, accountability is a huge part of practising compassion, perhaps especially in health and social care. O'Donnell has explained that compassionate accountability is a commitment to kind, self-truth telling, an act of 'stepping up' to the authorship of one's life. It is the gentle re-establishment of faith bounded, as it were, by principles that are protected just as much for the self as for others, with a courage to act heroically when the person to be rescued is oneself.

Empathy, empathic warmth and self-kindness

There are three terms that the volume believes to be often misconstrued or misused: *empathy*, *empathic warmth* and *self-kindness*. Empathy, often mistaken for sympathy, is a fundamental aspect of any meaningful relationship and the essence of how we can view, as the book explains, an experience from the viewpoint of another. In terms of empathy, the book describes the work of Brene Brown, who writes of empathy as the most powerful tool of compassion, viewing empathy is an emotional skill that allows us to respond to others in a meaningful, caring way. Empathy is describe here as the ability to understand what someone is experiencing and reflect that understanding back, not feeling it for them. If someone is feeling lonely, empathy does not require us to feel lonely too, only to reach back into our own experience with loneliness so that we are able to understand and connect with them more effectively. The reason why this is especially important for people in the caring professions, as well as for the people managing and overseeing people in the caring professions, is because of the dynamic nature of empathy. To do what we do *well*, we do not therefore just observe suffering, we reconnect with an experience of suffering and turn that into something usable for connection. Through discussing the areas of child and adolescent mental health team (CAMHS) work in which compassion is particularly

relevant, this book advocates a compassionate approach as important for everyone encountered. Compassion-focused theory is developing rapidly and moving into services, filtering across workplaces and helping to nurture a compassion-focused approach.

How can I get that one per cent closer to the best possible outcome?

The text is clear that there is a need to determine the best way of delivering services with reference to one's own needs and honesty around time commitments, goals, hopes and aspirations. Organisations, it is argued, should ask "How can I get that one per cent closer to the best possible outcome?" Committed staff will not dwell on failures, but will see positives in the learning process. Successful or not, where useful elements are found to foster compassion in organisations, the book recommends that we should adopt them. It is natural to want to feel like a winner and not to be diminished by failures and teams should not allow negativities to embed. Rather, we should strive to recognise the efforts of good people who make a difference to our services and our patients. In doing so, we understand the risks, but also focus on the rewards and learn, the book suggests from mistakes, avoiding linear thinking. Teams, it is observed, move on with the planned focus of seeking improvements and securing better patient outcomes and connection and reflection is always the key to a proper focus on quality. Thus, the question 'What would I do differently next time?' should remain, it is insisted, part of the communication process with patients and teams.

Discussion

The volume reflects on the phrase 'No chastising or blaming - just engaging' and finds that this always has a very powerful confidence-boosting effect. Indeed, actively supporting the self-worth and vitality of the team is suggested to produce enormous results in influencing and problem solving. We can forgive ourselves, the book says, for being less brilliant than others and we can all carry out acts of kindness that make a great difference. It is a privilege indeed, as the volume asserts, to be a healthcare professional where compassionate caring is shown in words and deeds and where we truly value humanity. For sure, whatever mechanism, toolkit or approach is perceived by the organisation as most favourable to advance compassionate practice, its philosophy is generic in style and should be a lived value.

Conclusion

As the contributing authors in this text come from a variety of professions in health and social care, including clinical psychologists and nurses in adult mental health services, they address the concerns of colleagues working in these areas with all age groups and in the context of multidisciplinary-focused teams that offer therapeutic inpatient and outpatient facilities in conjunction with day hospital services, residential and respite rotation. The volume is clear that compassionate interventions cost nothing, just the generosity of spirit that helps us to appreciate the importance of little things given and shared with others in a loving and caring way.

Conflicts of Interest

The author declares no conflicts of interest.