

The Relationship Between Highly Sensitive People and Compassion Fatigue and Intervention Methods

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Abstract: In a state of compassion fatigue, people's work performance and social status are easily affected, and in severe cases, they may even cause some influence and harm to others. Therefore, it is important to study the factors that tend to affect empathy fatigue, the people who are prone to empathy fatigue and how to alleviate empathy fatigue, so as to reduce the occurrence of empathy fatigue. In this paper, the relationship between hypersensitive people and empathy fatigue and how to intervene and alleviate this fatigue phenomenon is studied through theoretical analysis and questionnaire survey. The analysis of the data from the questionnaire revealed that the more oversensitive people are, the more likely they are to develop the phenomenon of empathy fatigue, as well as the explanation that self-care and self-compassion can effectively intervene and alleviate empathy fatigue. This study has some limitations, which are explained at the end of this paper.

Keywords: compassion fatigue, highly sensitive people, emotional regulation, self-care, self-compassion

1. Introduction

Up to now, several studies have been conducted on compassion fatigue, with a large number of studies focusing on the emotional needs of healthcare workers, education professionals, and other workers in specialized helping professions and their impact on well-being, mental health, stress, burnout, and job satisfaction [1, 2]. One study reported that 15% of rescuers experience compassion fatigue and 19% experience symptoms of compassion fatigue after working in rescue services, which can have a negative impact on both the emotional level and the work level, with the excessive expenditure of empathy bringing on feelings of anxiety, trauma, depletion, and powerlessness; some also become angry and guilty and have recurrent dreams of painful events [3]. But it is not only workers in particular professions who experience compassion fatigue, some people in the general population also experience compassion fatigue, and most of them are highly sensitive.

Although highly sensitive people have been studied in recent years, their relationship with burnout or compassion fatigue has not received as much attention. Highly sensitive people show higher levels of empathy, and their highly sensitive traits may be a risk factor. In light of the above, this study questions (1) whether high sensitivity is related to compassion fatigue, whether high

sensitivity is more or less likely to produce compassion fatigue, and (2) what can be done to alleviate compassion fatigue.

2. Compassion Fatigue

Empathy, an internal experience, is the ability to put oneself in another person's shoes and empathize with what they are experiencing. It includes both cognitive empathy and emotional empathy. And the overuse of empathetic abilities is likely to have adverse physical and emotional effects, and this has a specific clinical concept known as compassion fatigue. Psychologist Charles Figley describes 'compassion fatigue' as a reduced ability to empathize with others due to prolonged exposure to empathetic stress, physical and emotional exhaustion, and dysfunction [3]. Possible symptoms of compassion fatigue include difficulty concentrating; being easily startled; difficulty maintaining an objective attitude towards things; feeling tired or anxious all the time; experiencing numbness and depression; and a lack of self-worth and sense of meaning [4].

In healthy empathetic response, three steps occur: taking another person's point of view, self-awareness (self-other distinction), and emotion regulation [5]. These steps enable oneself to unconsciously differentiate those painful situations of others. Taking another person's point of view, also known as mentalizing, is the ability to see another person's situation from one's perspective through imagination, allowing oneself to generate an abstract understanding of the other person's mental state, which can thereby stimulate oneself empathy to enhance their well-being [6]. fMRI studies have shown that exposure to the distress of others can activate two distinct emotional empathetic responses, which either led to pro-social behavior and empathy through social cognitive pathways or to empathetic distress due to the blurring of the 'self-other' distinction as a result of poor emotional regulation [4,5,7,8]. The results of behavioral studies complement neurosurgical findings suggesting that empathy is associated with helping, rewarding, and forgiving behaviors, while compassion fatigue reduces helping behaviors and is associated with increased aggression [4, 5].

3. Emotional Regulation and Self-other Distinction

Of the three steps of healthy empathy, emotion regulation, which can also be defined as the ability to adjust the intensity and duration of one's emotional responses, mediates the relationship between sensory sensitivity and symptoms of depression, anxiety, and stress [9]. Self-awareness (self-other distinction) is the ability to distinguish between our own emotional or mental states and those of others and is a key element of empathy and mindfulness. This ability, known as emotion regulation, is essential for managing the 'self-other' distinction [4, 5]. If poor emotional regulation leads to a blurred distinction between 'self and other', empathy fatigue is likely to develop, as an aversion to the suffering of others, and the accompanying desire to avoid excessive negativity as a way of protecting oneself, breaking the painful relationship experienced with the person [4, 8].

It is impossible to avoid empathizing with someone who has negative emotions, and it is important that during empathy one can empathize with someone, but one does not confuse one's own emotions with another person's; that is, one remains aware that the emotion one is empathizing with is another person's emotion [8]. If this self-other distinction becomes blurred, although it would be pleasant when sharing pleasure, it would be distressing when sharing the pain. Without the inability to regulate emotions, the 'self-other' distinction is blurred, so they will absorb the pain and negative emotions of others when empathizing and suffer from empathetic distress fatigue.

4. Highly Sensitive People

In 1997, Dr. Elaine Aron, an American psychologist, suggested that 15-20% of the world's population is hypersensitive, which means that one in five people is hypersensitive. Research has found that there are several characteristics of hypersensitive people: firstly, highly sensitive personalities have a strong sense of detail and are generally able to receive more information than others in the same situation. Secondly, highly sensitive personalities are more gifted in the arts. Finally, highly sensitive personalities have a high level of empathy, and the ability to put themselves in the shoes of others and thus feel and understand them. This can lead to exhaustion.

Highly sensitive people are highly aware of their own internal emotions which enables them to cope better with their own internal emotions, and they are also able to empathize well with the emotions of others but are therefore more susceptible to the emotions of others [10], and the emotions of others can become an additional emotional burden for highly sensitive people, causing them distress and being over-stimulated by too much intense, complex and confusing external information and emotions, leading to increased internal distress, fatigue, stress, anxiety, and other emotional reactions, resulting in compassion fatigue [10, 11].

Highly sensitive people use inhibition strategies and less cognitive reappraisal strategies when engaging in emotion regulation, and are more likely to be depressed, anxious, and stressed. In contrast, low-sensitive or normal people use more cognitive reappraisal and fewer inhibition skills in emotion regulation, and are less likely to be depressed, anxious, and stressed. Highly sensitive people who are capable of emotion regulation and the resulting negative emotions make them more prone to compassion fatigue [12, 13].

5. Methodology of the Experiment

5.1. Participants

23 volunteers were recruited from universities to participate in the experiment. Among them, 23 volunteers are 17-21 years old, with a mean age of 19.5 and a median age of 19, all without reading comprehension difficulties. 16 volunteers had compassion fatigue and 7 volunteers had no compassion fatigue.

5.2. Experimental Instruments and Materials

Experimental instruments: Subjects' electronic equipment.

Experimental material: Questionnaire on the relationship between hypersensitivity and compassion fatigue. A question describing compassion fatigue, asking if the subject has experienced compassion fatigue, and 27 questions from the High Sensitive Person Scale (HSPS), which was developed to measure Sensory Processing Sensitivity (SPS) and is used to assess hypersensitivity. The scale consists of 27 questions. The question items have 7 answer options (1 for none, 4 for moderate, 7 for very).

5.3. Experimental Procedure

Volunteers were recruited at universities, students who had experienced compassion fatigue who were interested in the topic were contacted and diffused, and participants took an online test using their mobile phones, after reading a brief introduction related to the objectives of the study, which were presented to all participants in the same order. Participation was voluntary and no financial compensation was received.

6. Results

The data collected was finally aggregated and the total score of 27 questions on the High Sensitivity Test was calculated for each participant, while the time spent on the test was observed for each test taker and there was no possibility of the data being too short and potentially untrue or invalid. If a total score of 120 or more was obtained, the person was considered highly sensitive. A general uni-variate linear analysis of the results and a one-way ANOVA test yielded the following results:

Table 1: Icon for uni-variate linear analysis (Descriptive Statistics).

Dependent Variable: Total Score			
Whether compassion fatigue has occurred	Mean	Std. Deviation	N
Yes	141.50	18.630	16
No	120.57	22.263	7
Total	135.13	21.651	23

Table 2: Icon for uni-variate linear analysis (Tests of Between-Subjects Effects).

Dependent Variable: Total Score					
Source	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	2132.894 ^a	1	2132.894	5.476	.029
Intercept	334448.720	1	334448.720	858.639	<.001
Whether compassion fatigue has occurred	2132.894	1	2132.894	5.476	.029
Error	8179.714	21	389.510		
Total	430298.000	23			
Corrected Total	10312.609	22			

a. R Squared = .207 (Adjusted R Squared = .169)

Table 3: Icon for one-way ANOVA test (Descriptive).

Total Score								
		Std.		95% Confidence Interval				
N	Mean	Deviation	Std. Error	Lower Bound	Upper Bound	Minimum	Maximum	
Yes	16	141.50	18.630	4.657	131.57	151.43	109	168
No	7	120.57	22.263	8.414	99.98	141.16	82	147
Total	23	135.13	21.651	4.514	125.77	144.49	82	168

Table 4: Icon for one-way ANOVA test (ANOVA).

Total Score					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	2132.894	1	2132.894	5.476	.029
Within Groups	8179.714	21	389.510		
Total	10312.609	22			

The general linear analysis of the data and the one-way ANOVA test yielded a sig value of $.027 < .05$, thus indicating that sensitivity has an effect on empathetic fatigue and that the more highly sensitive the person is, the more likely they are to develop compassion fatigue.

7. Ways to Alleviate the Arising of Compassion Fatigue

7.1. Self-care

Self-care refers to the self-care activities that individuals engage in to maintain life, health, and comfort. An Australian study defines self-care as “a proactive, holistic, and personalized approach that promotes health and well-being through a variety of strategies in both personal and professional settings” [14]. Self-care requires highly sensitive people to turn their attention to themselves. Highly sensitive people often care deeply about the faces of others and tend to prioritize others over their feelings. Gradually learn to self-care by getting more rest, eating healthier foods, enjoying time alone or pursuing pleasurable activities, and focusing on the self to better relieve the effects of negative emotions during compassion and to better enjoy life [4, 14].

7.2. Self-acceptance

Self-acceptance can also be understood as self-compassion, a concept developed by psychologist Kristin Neff that refers to treating oneself kindly, receptively, and lovingly like one's best friend [15]. Self-compassion, on the other hand, is an attitude of total acceptance and kindness to oneself. In the face of suffering and frustration, most people think that compassion for themselves means avoiding reality, avoiding responsibility, and lowering standards. But compassion for oneself does not mean excusing oneself, especially for highly sensitive people, who need to learn self-compassion.

When making mistakes or failing, it is easy to blame oneself and talk to oneself in a way that one would never talk to a friend. Repressing emotions in bad moods, believing oneself to be worthless, and falling into uncontrollable depression. Learning self-compassion allows one to treat oneself with a “non-judgmental” attitude that neither suppresses nor exaggerates one's negative emotions; it helps to accept painful thoughts and emotions more calmly. Self-compassionate conversations are gracious, respectful, and acknowledge that everyone makes mistakes [4].

Self-compassion includes these three attributes self-kindness, common humanity, and mindfulness [4, 15]. It is easy to empathize with and be kind to family and friends in their suffering, but to exclude oneself. Self-kindness is about understanding one's own shortcomings and failures with a warm heart, rather than simply judging or criticizing. Self-compassion is more like a self-protection mechanism. This open acceptance of one's own failures contributes not only to positive problem solving, but also to one's mental health. Studies have found that people who regularly self-compassionate have higher life satisfaction, they feel less anxiety and depression, and are more emotionally stable. They are also more capable of repair and are less likely to fall into negative emotions [4].

8. Conclusion

From reading the literature on empathy fatigue, highly sensitive people, and emotion regulation, it is easy to conclude that the relationship between highly sensitive people and empathy fatigue. Highly sensitive people are more likely to empathize with people and be more easily influenced by the emotions of others because of their characteristics, but the emotion regulation ability of highly sensitive people is generally weaker, and inhibiting the method of regulation tends to put highly sensitive people in a state of depression, anxiety, and other negative emotions. When in such a state

for long periods, highly sensitive people are more likely to develop a state of compassion fatigue. Also, through an experiment, students who had developed compassion fatigue and those who had not developed compassion fatigue were given a high-sensitivity test and their total test scores were observed and it was found that students who had developed compassion fatigue generally scored 20 to 40 points higher than those who had not developed compassion fatigue.

9. Limitation

Firstly, not enough participants were recruited, the sample size was small and the results obtained may not be generalized. Secondly, the judgment of whether the subjects were empathically fatigued was not objective enough, and the subjective judgment based on the subjects was somewhat inaccurate. A relevant standard scale should be provided for testing, but the total number of questions in the questionnaire would be much higher and the number of questions would need to be controlled, or a method that would appeal to the test takers would be used. Finally, data analysis skills are weak and the logic of the analysis may not be accurate.

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