

ABSTRACT

The aim of this study was to contribute to literature the effects of working with traumatized children in a continuous traumatic stress environment more specifically in a township which is historically known as characterised by criminal activities and political oppression, Soweto. The study investigates the levels of compassion fatigue and the sense of coherence of caregivers working in a continuous traumatic stress environment.

Working with trauma victims especially children who are perceived as vulnerable and helpless may leave caregivers with feelings of helplessness and hopelessness, anger towards the perpetrators or anger toward the parents for being unable to protect the children. Caregivers may view the environment as unsafe for both their own children and the traumatized children that they treat. These emotions may lead to compassion fatigue, meaning that the caregiver's relationships at home and work become affected due to trauma work. The caregiver's ability to manage or cope with a stressful situation may also be affected causing their levels of the sense of coherence to be compromised. This study investigated the levels of compassion fatigue and the sense of coherence among caregivers who work with sexually abused children in Soweto. Compassion fatigue was assessed by using the Compassion Fatigue Scale (CFS) (Figley, 1995, Stamm, 1996). The sense of coherence was measured by the Orientation to Life Questionnaire (OLQ) Antonvosky (1987). The sample group consisted of 25 caregivers working in Soweto. These included nurses, teachers, counsellors and social workers from this area.

Results of the study indicated that the majority of the respondents manifested an extremely high risk of compassion fatigue based on the high scores they obtained on the Compassion Fatigue Scale. Interestingly the levels of the sense of coherence for the majority of the participants were also high, which contradicts previous findings. Findings from the qualitative data revealed positive and negative emotions related to the nature of their work. It also became apparent that caregivers with limited resources become frustrated and manifested feelings of inadequacy due to poor referral systems and there was no feedback from other organisation that deal with the children they worked with. Leaving caregivers with feelings of isolation. It also emerged that caregivers used a range of coping strategies in dealing with stressful situations.