Debbie had an affection for animals all of her life. She was always bringing home stray cats, injured birds, snakes, toads, etc. So, it was no surprise when she decided to go to school to become a veterinary technician. She wanted to help save lives and heal the sick and injured animals of the world.

After working in an animal emergency room, doing exactly what she wanted to do, Debbie became discouraged by the nighttime and weekend hours and the low pay. She was a twenty-two-year-old with no social life and few friends because of her schedule. Debbie left the animal emergency room and went to work for her local animal control.

There she was, once again, picking up stray, sick and injured animals, only this time she was taking them to the animal shelter. But since this was a municipal shelter, there would be no medicine, no bandages, no veterinary care to heal the sick or wounded. Debbie would do her best with home remedies and makeshift medical supplies. She spent time comforting the fearful.

If they were lucky, the sheltered animals were claimed by their owner or perhaps adopted. Those less fortunate or those that were infirm had to be euthanized, which was a task that Debbie also had to perform. She had to kill the animals she tried to heal.
Although she did save lives, rescuing dogs from hot cars, cats from neglectful situations, nursing orphaned babies, all Debbie could focus on were the lives she couldn’t save. And with each life she took, she became more and more disheartened. (Humane Society University 2001, 5)

Should the above scenario be classified as “professional burnout” or as compassion fatigue? This is an example of someone working in her chosen profession and having to cope with physical or emotional pain. Is this example any different from animal caregivers’ in her personal and emotional experiences? They all see pain, suffering, and death, and they all feel the effects of what they see.

The animal caregiver continues to provide care, despite a higher-than-expected rate of compassion fatigue. Despite the emotional and physical pressures, the animal caregiver returns to work day after day. At some point, the physical surroundings and the multiple emotional relationships, both human and non-human, take a cumulative toll.

Why do the animal caregivers return to work? They love what they do; however, at the same time, it hurts them. Why would one continue to work in a profession or do something that causes pain? This is a complex question whose answer lies in the relationship between the caregiver and the recipients of their care.

In general, animal caregivers provide care to two classes of animals—those with human companions and those without.

As previously discussed, the level of compassion fatigue for those individuals working in shelters and animal-control capacities is higher than for those working in the veterinary field. No existing research explains this discrepancy. As with any original inquiry, the initial explanation is usually “self-case reporting” or anecdotal (Barker 1999). The answer may be found in the different work setting, the absence or the presence of a human companion, or the health and prognosis of the animal. Despite the different settings, their common trait is the relationship between the caregiver and the animals. According to Gilman and Shepherd (1992), workers in the animal-shelter and animal-control fields are likely to develop anthropomorphism or misanthropy.

Anthropomorphism is the assignment of human characteristics to non-humans. Within this dynamic, the animal caregiver envisions the animal as a human. A classic example is when holding a puppy, a person says, “He is my baby.” Gilman and Shepherd (1992)
conclude that, once the animal has taken on human characteristics, the pressure to do what is in the best interest of the animal versus what the caregiver wants to do intensifies. This is a natural internal conflict within the caregiver. At the heart of the conflicts lies the question, “Do I do what I want to do, or do I do what is in the best interest of the animal?” This conflict can cause tremendous stress because one does not want to hurt his or her “baby.” Within the shelter setting, caregivers work with the same animals on a continuous basis for an extended period of time. Therefore, the one-on-one relationship makes anthropomorphism all the more likely. In the veterinary setting, relationships and contacts change daily. While the veterinary worker might say, “How are you today, big boy?” the relationship is more transactional rather than long-term.

In the HSUS survey (2003–2004), shelter workers were repeatedly asked three questions, the first of which was, “How many of you talk to animals?” The answer was 100 percent affirmative. The response was generally lighthearted and good natured. The typical conversation was, “You are a good boy,” or “Would you like to go for a walk?” Talking to animals is seen as natural and something we all do.

The second question was, “How many have animals talk to you?” 100 percent of those questioned reported that animals talk to them. Once more, these responses were lighthearted and good natured. The caregivers are happy to admit that there is a two-way conversation going on and that is perfectly natural. Within the shelter setting where animals may be housed for weeks—or even months—as a result of long-term exposure and conversations, a relationship is established. On the other hand, the veterinary worker’s conversation is brief and lasts no longer than the length of the appointment.

The last question posed to this population was, “How many of you lie to the animals, telling them everything is going to be okay, when you know that is not the case?” Generally, the mood quickly moves from lighthearted to somber, everyone’s hand is raised. When asked why they lie to these loved ones, the responses are, “I do not want them to worry,” or “I care for them too much,” or “They do not need to know the truth,” or “I do not want them to suffer anymore.”
These responses clearly separate the shelter and animal-control professional from the veterinary worker.

Another distinction between the shelter and animal-care professional and the caregiver within the veterinary practice is the relationship with human caregivers. One dynamic is misanthropy—a dislike or mistrust of humans. According to Gilman and Shepard (1992, 8), “An excessive ‘hating people’ or ‘loving animals more than people’ attitude can do nothing but harm to animal-care and -control workers.” They add, “Certainly everyone in the animal-care and -control field knows that people are to blame, and it is difficult to be nice to those at the heart of the problem.” This emotion develops as the caregiver continuously deals with animal abuse and neglect.

While neglect and abuse occur in the practice setting, misanthropy is less likely to occur in veterinary caregivers, since the frequency of neglect and abuse is lower than in shelters and animal control.

Misanthropy and anthropomorphism add stress to the workplace and can spread to other staff members. These organization-wide feelings can lead to the animal caregiver developing compassion fatigue. Robbins (2005) has demonstrated the effects of stress both on the individual and on overall organization performance. As stress increases, individual performance increases. There is an optimal point in the relationship at which stress is high and performance is increased. After that point, however, performance decreases rapidly.
Since an organization is made up of individuals, each at a different stress point, the organization can never reach its optimal potential due to various individual stress-related performance declines.

In the caregiving organization, this situation is compounded not only by stress, but also by the onset of compassion fatigue, which is passed from caregiver to caregiver. As the caregiver reaches out to a co-worker or to an animal to relieve painful emotions, the co-worker absorbs some of that person’s pain. This is the contagious nature of compassion fatigue: people pass it to their co-workers in an attempt to seek relief. In seeking relief, everyone in the workplace becomes a potential victim (Roop and Vitelli 2003).

The central point in compassion fatigue and in all animal caregivers is the emotional bond between the caregiver and the animal. How these emotions help shape and establish the relationship determines the presence of compassion fatigue. All animal caregivers must realize they have chosen an “at-risk” profession. When we see animals with a good prognosis, we are happy. When we see animals who have been abused and neglected, we feel angry and disgusted. The range of these emotions is called the emotion continuum (Robbins 2005).

In explaining emotions, Robbins states:

One way to classify them is by whether they are positive or negative. Positive emotions express a favorable feeling. Negative emotions express the opposite. Emotions can’t be neutral. Importantly, negative emotions seem to have a greater effect on people. (2005, 115)

Animal caregivers in the shelter and animal-control professions seem to be exposed to more negative situations than are their counterparts in the veterinary profession. “People reflect on and think about events inducing strong negative emotions five times as long as they do about events inducing strong positive ones” (Robbins 2005, 115).

The widespread nature of compassion fatigue can be directly traced to the negative situations and negative emotions that all animal caregivers encounter.