

COMPASSION FATIGUE SURVEY

Consider each of the following characteristics about you and your current situation. Write in the number for the best response. Use one of the following answers.

1 = Rarely/Never

2 = At Times

3 = Not Sure

4 = Often

5 = Very Often

1. ____ I find myself avoiding certain activities or situations because they remind me of a frightening experience.
2. ____ I have gaps in my memory about frightening events.
3. ____ I feel estranged from others.
4. ____ I have difficulty falling or staying asleep.
5. ____ I have outbursts of anger or irritability with little provocation.
6. ____ I startle easily.
7. ____ While talking with a victim I thought about violence against the person or persons who victimized.
8. ____ I am a sensitive person.
9. ____ I have had flashbacks connected to my calls.
10. ____ I have had first-hand experience with traumatic events in my adult life.
11. ____ I have had first-hand experience with traumatic events in my childhood.