INTELLIGENT KINDNESS IN PRACTICE — WHAT HELPS, WHAT HINDERS AND WHAT CAN WE DO?

John Ballatt
You **will** be compassionate!

- That expectation is natural
- But it can leave you struggling with just how hard that is in the face of suffering and death
- It can focus too much on suffering, instead of possibility and creativity
- It can suggest that it’s all down to the individual instead of recognising that it’s a collective task
- The understandable anger and demanding tone so often behind the expectation makes it harder
Kindness

- A simpler and less ‘virtuous’ word
- Means the recognition we are ‘kin’, of a kind, a family
- Means that, because we are the same, we are moved to pay attention, to feel with, to use our imagination for, to help, be generous to, the other
- Means we use our intelligence, skills and resources on behalf of the other
- Means we are acting on behalf of, with and for the wider society – we’re all in this together
- Means it’s not just altruistic – kindness is in everyone’s interests
A virtuous circle

- Directs Kindness
- Promotes Kinship
- Whole process reinforces conditions for kinship/kindness
- Directs Attentiveness
- Enables Attunement
- Builds Trust
- Generates Therapeutic Alliance
- Produces Better Outcomes
But it’s **hard**

- Keeping yourself together in the modern world is pretty challenging in itself
- Being open to ill-being, suffering and death can be frightening, upsetting and very tiring
- People (patients and colleagues!) are complicated and often hard to make sense of
- It’s hard to stay open when so much of the world seems closed to being kind
How **can** it go so wrong?

- We’re all human: we have feelings, wishes, things we find hard to face, that make us angry and turn away
- Some people are hard to respond to as kin
- Teams can become troubled and unhelpful
- Specialisation can produce poor collaboration, dumping of responsibility, and forgetting of the ‘whole person’
- Bureaucracy can keep us looking over our shoulders and away from our patients
- Organisations and leaders can make it more difficult
- Society can expect more than can be done, mistrust us or resent the resources we need for our work
A system focused on curing people is uneasy with death and dying
What can help?

- Individual support to help us keep in mind and manage our anxieties, feelings and reactions
- Teams that create a setting for that, and for working out what to do, and how to work with others, for the good of the patient
- Working relationships with other services organised to make it easy to cooperate around the patient and their family
- Leadership that knows how hard the work is, and what needs to be done to help
- Management that does its best to reduce distraction and pressure within a challenging environment