

# ENA Topic Brief

## Compassion Fatigue

### Key Information

- Receiving compassionate nursing care is a primary factor in patient intention to return to or recommend a health care facility.<sup>1</sup>
- In departments where nurses find their work meaningful, patients were more satisfied with all aspects of their stay.<sup>2</sup>
- Compassion fatigue is correlated with nurse burnout, which has been linked with increased health care-associated infections.<sup>3</sup>
- Compassion fatigue has been linked to increased absenteeism and intent to leave the workplace.<sup>4,5</sup>
- Healthy work environments are beneficial for patient safety while providing a valuable support system for nurses.<sup>6,7</sup>
- Engaging in health-promoting behaviors can enhance compassion satisfaction.<sup>8</sup>
- Successfully combating compassion fatigue requires joint efforts and responsibility between organizational leadership and individual staff.<sup>9</sup>

### Purpose

Compassion is a central component of nursing. It is a natural response to react with compassion when witnessing the emotional and physical turmoil of another human being. It is a necessary characteristic of a successful and effective nurse. Fortunately, compassion fatigue is being recognized as a problem for the toll it takes on the emergency nurse, the emergency department, patients and families. This topic brief describes the reality of compassion fatigue with methods to recognize, combat and prevent this condition, leading to compassion satisfaction.

### Overview

The notion of compassion fatigue was first illustrated in 1992 by Joinson as she was researching burnout among emergency nurses; she noted that they apparently had lost their “ability to nurture.”<sup>10</sup> Since then, compassion fatigue has taken on more meaning for a much broader group of people. The phrase is used among caregivers who are involved with patients suffering from physical and emotional pain and distress. This can happen suddenly, such as after witnessing traumatic events. At these moments, the caring relationship between the nurse and patient can bring on high levels of stress, which can decrease the nurse’s normal feelings of empathy. The restorative abilities of the nurse in these situations are overwhelmed by the level of emotional arousal. As a result, the nurse is left with compassion fatigue that manifests itself across multiple domains including physical, social, emotional, intellectual and spiritual.<sup>11</sup> Nurses who suffer from compassion fatigue usually will display symptoms that can be recognized by coworkers, patients, families and themselves. Once symptoms are identified, interventions exist to restore compassion satisfaction to healthy levels.

Emergency nursing, like all other nursing specialties, involves caring and compassion, a unique skill set and presence for the care of patients. Emergency department stressors such as crowding, pressure to improve flow and delays in bed assignments coupled with emergency nurses’ exposure to patients experiencing traumatic or painful events are risk factors for developing compassion fatigue.<sup>12</sup> Today, there are pressures to meet publicly tracked data on quality and patient satisfaction as well as emphasis to achieve organizational fiscal goals. These pressures place ever increasing demands on the nurse’s ability to care for patients, adding to the potential for compassion fatigue.

### Signs and Symptoms of Compassion Fatigue

Compassion fatigue can cause consequences that impact the workplace and may lead nurses to have psychological and physiological signs and symptoms. The witnessing of traumatic events, which can happen multiple times per shift

# *ENA Topic Brief*

in the emergency department, results in an increased sympathetic nervous system response to high-stress situations.<sup>13</sup> This response can translate into physical, mental and emotional distress for the nurse. The stress response from all the human pain, trauma and tragedy that emergency nurses witness and strive to alleviate in patients and their family members can deplete one's ability to recover from these events. At this point, for an affected nurse, it becomes almost impossible to treat patients, our loved ones, and ourselves with compassion.

Psychological signs and symptoms include anxiety, avoidance, depression, hyperarousal, memory problems, poor concentration, poor judgment, restlessness, mood swings, intrusive thoughts, and lack of compassion or numbness.<sup>14,15</sup> Physiological signs and symptoms include fatigue, gastrointestinal problems, muscle tension, headache, cardiac symptoms and sleep disturbances.<sup>14,16</sup> Workplace signs and symptoms include high absenteeism, frequent use of sick days, lack of joy in work and lack of empathy toward patients, decreased productivity, increased turnover and avoidance in working with specific groups of patients. As these signs and symptoms can be related to multiple causative factors, identifying compassion fatigue can be achieved through taking a closer look at the nurse's overall situation, individual self-reflection and/or by completing a compassion fatigue measurement tool.

## ***Compassion Fatigue and Double-Duty Caregiving***

Nurses are frequently responsible for the caregiving needs of family and friends outside of their work responsibilities. Examples include a child with special needs, a spouse with significant disability, and/or an elderly parent or relative. These nurses can be defined as "double-duty caregivers," engaging in full-time at work and at home without respite.<sup>17</sup>

When a caregiver is also a nurse the emotional distress is magnified and there exists a strong potential for "the dramatic blurring of boundaries between professional and personal care, which ultimately predisposes these double-duty caregivers to compassion fatigue."<sup>18</sup> Negative repercussions of constant caregiving include the inability to find "self" time. Difficulties often arise in relationships as they juggle time between work and those whom they care for, whether patients or family.<sup>19</sup> Nurses may become fatigued due to continual vigilance, which is second nature on the job and is now carried over to the additional duty of caregiving outside of the work setting.<sup>20</sup>

Nearly 50 million Americans are currently caring for an older adult, whether family or friend.<sup>21</sup> Many of these are considered to be the "sandwich generation,"<sup>21</sup> a generation of caregivers who are often providing both financial as well as emotional support to both their children and at least one parent.<sup>21</sup> In studies focused on caregivers of family members with chronic illness, common themes include feelings of inadequacy, helplessness or powerlessness.<sup>22</sup>

Those who care for dependent adults miss over six days of work per year due to absences that are directly related to the need to care for a family member.<sup>21</sup> The added responsibility of an older or ailing parent may result in job loss, whether intentional or unintentional. Nurses in this sandwich generation have high expectations of themselves and their ability to manage multiple responsibilities, yet they do not have the same resources available to them at home that they have in the workplace.<sup>18</sup> This perceived lack of resources and support can contribute to compassion fatigue.

## ***Combating Compassion Fatigue***

The individual nurse can take positive action and initiative to combat compassion fatigue through self-care, mindfulness and self-reflection. Self-care is the participation in regular and rejuvenating activities, such as

# *ENA Topic Brief*

meditation, sleep, exercise and/or healthy personal interests. Research has shown that among hospice care professionals, self-care was correlated with increased compassion satisfaction and decreased compassion fatigue.<sup>23</sup> Mindfulness is a demonstrated stress-decreasing technique that can help to prevent and overcome compassion fatigue.<sup>24</sup> Self-reflection, pausing to remember what drew us into the nursing profession, is another method used to stay grounded in positive thinking.<sup>25,26</sup>

Five key elements shown to effectively counter compassion fatigue in emergency and oncology nurses are:<sup>13,27</sup>

- Self-regulation (controlling the autonomic nervous system during threatening situations);
- Intentionality (working with purpose and calm to complete the task at hand);
- Perceptual maturation/self-validated caregiving (minimizing the internalization of a toxic work environment and focusing on nursing as serving our patients);
- Connection (having a strong and positive peer-support system); and
- Self-care (participating in regular, rejuvenating activities and routine exercise).<sup>23</sup>

## *How Health Care Organizations Can Prevent, Recognize and Combat Compassion Fatigue*

Organizations have a vested interest in acknowledging, preventing and combating compassion fatigue in their employees.<sup>28</sup> As previously stated, compassion fatigue leads to increased absenteeism, use of sick days and intention to leave the workplace.<sup>4,5</sup> Patients who perceive their nurses as providing compassionate care report higher levels of patient satisfaction.<sup>29</sup> It is in the best interest of the health care organization to actively acknowledge the reality of compassion fatigue and work toward preventing, recognizing and combating this condition in a stigma-free culture.<sup>13</sup> Once openly recognizing the potential of compassion fatigue as part of being a diligent and caring nurse, the organization can take further measures to increase compassion satisfaction.

Prevention can begin with training nurses on methods to cope with their patients' suffering.<sup>28,13</sup> It continues with performing regular, structured dialogue among staff, leaders and administration in which emotionally complicated situations are debriefed, thus creating a culture of open communication.<sup>30</sup>

Department leaders can be trained to look for signs and symptoms of compassion fatigue in their staff, offering screening and measurement tools when appropriate.<sup>28</sup> Once recognized, the nurse leader can then be proactive in getting the affected staff member connected to the appropriate resources, such as employee assistance programs, on-site counseling, staff support groups and compassion fatigue resiliency programs. These can be in addition to developing a self-care plan and offering holistic self-care training.<sup>28,31</sup> The nurse leader and compassion-fatigued nurse can collaborate to adjust the nurse's environment and workload until compassion satisfaction has been restored. Specialized trauma training, which improves the nurse's sense of caregiving self-efficacy, has been linked to increased compassion satisfaction and decreased compassion fatigue.<sup>28,32</sup> Providing specialty courses such as the Trauma Nursing Core Course and the Emergency Nursing Pediatric Course may help in such a capacity.

For general stress reduction, some organizations have created spaces dedicated to wellness. These spaces have a calming atmosphere and offer a respite from the stress and emotional wear and tear of a shift. Nurses have reported decreased stress levels after visiting such wellness areas.<sup>33</sup>

## *Tools*

In addition to tools to measure compassion fatigue, interventions exist to combat it. The first two tools have been used to identify compassion fatigue, while the third tool provides activities to increase self-care.

# *ENA Topic Brief*

- The Professional Quality of Life (ProQOL) scale is used to identify compassion fatigue.
- The Mindful Attention Awareness Scale (MAAS) is used to measure mindfulness.
- Regularly practiced self-care increases compassion satisfaction while preventing and combating compassion fatigue. The following link provides examples of activities that can increase self-care: [Compassion Satisfaction Self-Care Checklist](#)

## *The Future*

The term “compassion fatigue” originated from research on emergency department nurses.<sup>10</sup> There is much more to learn about compassion fatigue, beginning with increasing the awareness among coworkers, health care organizations and professions. More knowledge is needed to disseminate the results of interventions that effectively prevent and combat compassion fatigue. Double-duty caregivers, who have the lines between work and personal life truly blurred, need to have attention paid to their unique situation in order to keep them healthy and engaged in their many roles. It is essential that such research be continued with emphasis on efforts to increase the compassion satisfaction of our emergency nursing workforce.

## *Conclusion*

Traumatic events will continue to bring patients and families to the emergency department and into nurses’ personal lives. Although emergency nurses strive to apply evidence-based, safe practice to each and every one of their patients and loved ones, safe practice and safe care does not end with an applied knowledge base. It continues with the care, compassion and empathy extended to patients, coworkers, families and self. All nurses are at risk of developing compassion fatigue. A professional obligation exists for nurses to strengthen their compassion satisfaction and to prevent, recognize and combat compassion fatigue so that their special work continues on with the presence it deserves.

### *Definitions of Terms*

**Compassion:** The sympathetic consciousness and desire to help those who have experienced emotional or physical distress and/or misfortune.

**Compassion fatigue:** Fatigue that results from caring for those who are suffering, facing a traumatic situation or who have undergone a tragedy.

**Compassion satisfaction:** The ability to feel satisfaction, purpose, happiness and gratification from caring for others.

**Sandwich generation:** Describes those who care for an aging parent as well as for at least one dependent child, usually still living in the home. Sandwich generation caregivers are often providing both financial and emotional support to their children and to at least one parent.

**Double-duty caregiving:** A professional caregiver who also has caregiving responsibilities in their personal life.

**Burnout:** A cumulative process marked by emotional exhaustion and withdrawal associated with increased workload, institutional stress, and feeling powerless and unable to achieve work goals.

# ENA Topic Brief

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# ENA Topic Brief

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# ENA Topic Brief

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