

4-2021

Compassion fatigue in nursing: How can it be prevented?

Megan J. Vlahos
Grand Valley State University

Follow this and additional works at: <https://scholarworks.gvsu.edu/honorsprojects>



Part of the [Nursing Commons](#)

ScholarWorks Citation

Vlahos, Megan J., "Compassion fatigue in nursing: How can it be prevented?" (2021). *Honors Projects*. 832.

<https://scholarworks.gvsu.edu/honorsprojects/832>

This Open Access is brought to you for free and open access by the Undergraduate Research and Creative Practice at ScholarWorks@GVSU. It has been accepted for inclusion in Honors Projects by an authorized administrator of ScholarWorks@GVSU. For more information, please contact scholarworks@gvsu.edu.

Compassion fatigue in nursing: How can it be prevented?

Megan J. Vlahos

Grand Valley State University: Kirkhof College of Nursing

Professor Nancy Carlson

A nurse's profession revolves around one central principle: care. Nurses provide care for patients with complex physical, mental, emotional, and spiritual needs. However, a career centered around caring for others can lead to the development of compassion fatigue.

Compassion fatigue (CF) is a term that was introduced by Carla Joinson in 1992 and is defined by Walker and Avant as "the physical, emotional, and spiritual result of chronic self-sacrifice and/or prolonged exposure to difficult situations that renders a person unable to love, nurture, care for, or empathize with another's suffering" (Harris, 2015, p. 82). CF is a frequent occurrence in nurses who work in acute care settings and steps should be taken to prevent it. It is important for current nurses as well as future nurses to not only understand the signs of compassion fatigue, how it develops, and how it impacts nursing care, but to also utilize methods of CF prevention.

Signs of Compassion Fatigue

Dissatisfaction in Job

Nurses choose to enter the field because they have a desire to care for others and help their patients through difficult and vulnerable times. However, caring for and empathizing with the pain and suffering of others can be disrupted by job dissatisfaction. In acute care nursing, burnout is high because of high patient-to-nurse ratios causing limited time for nurses to properly care and empathize with patients. Nurses who work in critical care, the emergency department, or end-of-life care are at an increased risk for developing burnout and job dissatisfaction (Perregrini, 2019). Critical care and end of life nursing are more emotionally taxing by nature due to the fact that death is much more frequent than in other nursing specialties. Emergency department nurses face unpredictable and often hectic events during their shift; this fast-paced work environment can accelerate the development of burnout and job dissatisfaction. Nurses

who are subject to fluctuating work schedules—switching between day and night shift, working overtime, staying late after a shift, etc.—naturally have a higher risk of becoming unsettled or dissatisfied with their job as well (Perregrini, 2019). A common manifestation of an unsatisfied nurse is verbalizing frustrations frequently (Harris, 2015). The verbalizations could be related to limited support from the nurse manager or unit supervisor, patient assignments, or colleagues. Another sign of job dissatisfaction among nurses is a high turnover rate. High turnover rates in acute care settings is undesirable because it results in overworked staff and increased compassion fatigue. High turnover rates also contribute to adverse patient outcomes because the nurses on the unit are much more inexperienced (Harris, 2015).

Decline in Physical and Mental Health

Compassion fatigue can manifest differently in each person but an indication that someone is suffering is a decline in their mental and physical health. Changes in mental health status can be explicit or subtler depending on the person. Some examples include cynicism, apathy, desensitization, irritability, sarcasm, indifference toward patient care, mood swings, decreased participation in unit activities and committees, and less responsive care (Hooper, 2017). These changes typically do not occur rapidly—rather, they slowly develop over time. Nurses who are struggling with compassion fatigue may also develop insomnia, which can amplify any mental health struggles. It is important for nurses to evaluate themselves as well as their coworkers for any signs of decline in mental or physical health so that they can seek out the appropriate help and support they need.

Impact of Compassion Fatigue on Nursing Care

Compassion fatigue impacts the wellbeing of nurses, which impacts the care they provide for their patients. If a nurse is struggling with compassion fatigue it can result in emotional breakdowns, accident proneness, and poor judgment. This will negatively affect the institution in which they are employed as well as the patient whom they are caring for (Kelly, 2015). In recent years the U.S. healthcare system has put an increased emphasis on patient experience. Data collected regarding patient experience is typically gathered through surveys after a patient is discharged from the hospital. Patients who received care from nurses who are struggling with compassion fatigue report lower patient satisfaction ratings (Hunsaker, 2015, p. 188). If a patient voices that their care was unsatisfactory, the reputation of the institution and how they are perceived by the public will be impacted. A study by Kelly et al. (2015) found that nurses in the “Millennial” generation (ages 21–33 years) has a higher likelihood of experiencing compassion fatigue than their counterparts in the “Baby Boomer” (ages 50–65 year) or “Generation X” (ages 34–49 years). Their research also revealed that as nurses gained experience, they were more likely to have higher CF and lower satisfaction in their career (Kelly, 2015). These findings cannot be ignored, and institutions should take note of the high prevalence of compassion fatigue in the younger generation of nurses. Increased compassion fatigue in Millennial nurses illustrates why educating up-and-coming nurses about CF and subsequently implementing prevention techniques is of utmost importance.

Prevention of Compassion Fatigue

Self-care

Self-care is a term that has been used increasingly over the past decade, but what exactly does it mean? Self-care is defined as “the practice of taking an active role in protecting one's own well-being and happiness, in particular during periods of stress.” (Oxford Dictionary). One of the

ways that compassion fatigue can be prevented is if nurses are encouraged to participate in self-care (Harris, 2015). Self-care is unique for every individual, but it encompasses anything related to staying mentally and physically healthy. A few examples of self-care include yoga, meditation, journaling, reading, exercising, socializing with friends, and eating nourishing meals. Participating in activities like these is proven to help nurses better concentrate, have decreased stress, and an improvement in their sleep length and quality. Self-care is very important for everyone, but especially those who work in caring professions such as nursing. Each day presents new physical and emotional challenges, so it is so important for nurses to make time to take care of themselves.

Nourishing Workplace

Ensuring nurses are supported in their workplace environment will decrease the prevalence of compassion fatigue. This can be done in several ways, but research has found a few things to be especially helpful. Harris 2018 explains how the creation of a space in the hospital with calming lighting, books, and soft music in the background gives nurses an opportunity to decompress after a stressful event and take some time to relax before continuing with their shift. In addition, Harris suggests having counselors or therapists onsite that are available to any staff in the hospital. An example of this is Spectrum Health's Encompass program. According to flyers posted within Spectrum's hospitals, "Encompass offers immediate 'in the moment' support with a mental health professional." Programs like Encompass are beneficial because they give staff an opportunity to talk to someone immediately at the hospital if it is necessary. Another way to ensure that nurses feel supported in their workplace is to normalize talking about compassion fatigue. Conversations about compassion fatigue can help nurses recognize the symptoms before they take their toll. Research done by Kelly (2015) found

that when a nurse receives meaningful recognition about their work and the impact that they had it helps reduce compassion fatigue. Several hospitals have the DAISY awards in which nurses received recognition, and nurses who received these awards often feel honor, pride, and increased satisfaction with the profession. (Kelly 2015). Programs like these are beneficial because it helps remind nurses that the care that they provide for patients does make a positive impact and their work has a greater purpose and meaning.

Debriefing

Debriefing is a low-cost and effective intervention that hospitals can implement. Debriefing is way for nurses to talk about events, actions, feelings, and perceptions. This can occur on a regular basis or can be done after an event like a patient code, cardiac event, or a unit conflict (Harris, 2015) Debriefing is a way for nurses to develop healthy coping skills and manage their emotions after an emergency or difficult situation. (Harris, 2015). As a current nursing student, I have found that debriefing after a clinical day in the hospital is very beneficial. It provides a space for me and my classmates to process events that occurred and share anything that was emotionally taxing or difficult. Debriefing also gives us the opportunity to celebrate triumphs and encourage one another. This is something that I believe would be therapeutic when I become a nurse and start working because it would help me, and my colleagues process difficult events that occurred during our shift in a non-biased setting. The process of debriefing is a proven way to help individuals cope with difficult events, and therefore should be implemented in the acute care setting.

Conclusion

In conclusion, compassion fatigue is a very prevalent issue among nurses who work in acute care settings, and signs of compassion fatigue include depression, anxiety, and job dissatisfaction. Taking steps to prevent compassion fatigue from developing can increase job satisfaction, increase nursing retention rates in acute care settings, and improve the overall standard of care given by nurses. This can be achieved by educating staff about compassion fatigue and implementing prevention methods such as self-care, a nourishing workplace, and debriefing sessions. Decreasing the number of nurses who suffer from compassion fatigue will result in higher patient satisfaction scores, decreased incidence of adverse events, increased job satisfaction, and improved mental health among nursing staff in acute care settings.

References

- Harris, H., Quinn Griffin, M. T. (2015). Empty: Compassion fatigue signs, symptoms, and system interventions. *Journal of Christian Nursing* 32(2)81-87.
<https://doi.org/10.1097/CNJ.0,e000000000000155>
- Hooper, V. D. (2017). Working Toward a Healthier You: Recognizing Compassion Fatigue. *Journal of Peri Anesthesia Nursing* 32(3) 165-166.
<https://doi.org/10.1016/j.jopan.2017.04.007>
- Hunsaker, S., Chen, H. C., Maughan, D., & Heaston S. (2015). Factors that influence the development of compassion fatigue, burnout, and compassion satisfaction in emergency department nurses. *Journal of Nursing Scholarship* 47(2) 186-194.
<https://doi.org/10.1111/jnu.12122>
- Kelly, L., Runge, J., Spencer, C. (2015). Predictors of compassion fatigue and compassion satisfaction in acute care nurses. *Journal of Nursing Scholarship* 47(6) 522-528.
<https://doi.org/10.1111/jnu.12162>
- Perregrini, M. (2019). Combating compassion fatigue. *Wolters Kluwer Health, Inc.* 49(2)51-54.
<https://doi.org/10.1097/01.NURSE.0000552704.58125.fa>