

Compassion Fatigue: Nurse's At Risk !

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Abstract:

Nurses provide sovereign and collective care of individuals of all ages, sick or well. Nursing helps each individual by the promotion of health, prevention of illness, and the care of ill, disabled and dying people. Compassion fatigue is the tension results from the critically ill patients or traumatized individual rather than the trauma itself. It's a feeling of immoderate absorption cognitive, physical, psychological and emotional pain. Nurses working in intensive critical care units are dealing with the daily parade of nursing care to seriously ill patients with poor outcomes. The situation has generated a range of stressors that could negatively impact nurses and other health workers (Jackson et al., 2020; Usher, Durkin, & Bhullar, 2020). Critical care nurses may be particularly affected by severe emotional distress which has been associated with the development of compassion fatigue and/or burnout (Alharbi, Jackson, & Usher, 2020). Prompt understanding of the contributing factors of compassion fatigue helps in prevention or protection from compassion fatigue [1].

Keywords: Nurses, Compassion Fatigue, Critical Care, Post Traumatic stress disorder, health care, crisis.

Date of Submission: 21-05-2021

Date of acceptance: 06-06-2021

I. Introduction

The American Nurses Association defines the goals of nursing, in part, as the “alleviation of suffering”. Professional nursing standards call for nurses to provide compassionate care and compassionate acts have been described as attempts to ease suffering “as if it were one’s own” [2]. Compassion is a pretentious thing especially in healthcare. Nurses consolidate their specialized abilities with the day-by-day communication with patients and families keeping in mind the goal to make a healing situation. Nursing is a one of a kind and exceptional occupation that additionally has its difficulties. Nurses are habitually confronted with troublesome circumstances in which they are required to give passionate help and solace to patients and families encountering critical enthusiastic pain as well as physical trouble[3].

Compassion means “energy for caring” that supports the relationship between nurse and patient (Dunn & Rivas). Predictable compassion and sensitivity of someone else's misery, pain, and distress can prompt compassion fatigue. The idea of compassion fatigue was first presented in the nursing writing over two decades (Joinson, 1992). Compassion fatigue firstly noticed with the related idea of burnout in nurses working in a crisis division. Compassion fatigue is a condition in which person feels emotional and physical exhaustion that leads to a diminished ability to empathize or feel compassion for doing which sometimes taken as negative cost of caring. It referred to as secondary traumatic stress (STS). According to the Professional Quality of Life Scale, burnout and secondary traumatic stress are two interwoven elements of compassion fatigue. Compassion fatigue is considered to be the result of working directly with victims of disasters, trauma, or illness, especially in the health care industry. Individuals working in other helping professions are also at risk for experiencing compassion fatigue. These include child protection workers, veterinarians, teachers, social workers, palliative care workers, journalists, police officers, firefighters, animal welfare workers, public librarians, health unit coordinators, and student affairs professionals. Non-professionals, such as family members and other informal caregivers of people who have a chronic illness, may also experience compassion fatigue[4].

Compassion fatigue had great impact on individual's personal, social and occupational activities and sometimes psychological health problems such as depression, anxiety disorders, post-traumatic stress disorder and most of them leads to substance uses. A regularly outrageous condition of pressure and distraction with the enthusiastic pain and additionally physical trouble of those being assisted make an auxiliary traumatic anxiety for the caregiver furthermore, when focalized with aggregate burnout, a condition of physical and mental weariness caused by an exhausted capacity to adapt to one's ordinary condition compassion fatigue is aggravated. Compassion fatigue is portrayed by exhaustion, outrage and peevishness, negative adapting practices including liquor and medication overdose, lessened capacity to feel sensitivity and compassion, a

decreased feeling of delight or fulfillment with work, expanded non-appearance, and a debilitated capacity to settle on choices and help patients.

Compassion fatigue is the condition of organic, physiological, and enthusiastic depletion coming about because of combined introduction to the pain, enduring of others, and prompting the loss of capacity to give a similar level of compassion and care to consequent individuals needing compassion and care. Healthcare, crisis, and group laborers at an expanded risk of growing compassion fatigue and possibly additional crippling conditions, for example, discouragement, nervousness, Nausea, dizziness, headaches, feeling less efficient or productive at work, difficulty concentrating, focusing or making decisions and stresses related disorders[5]. These conditions are known to cause affliction nonappearance, mental damage claims, employment turnover and negatively affect efficiency. In a web-based study of 1,199 board-certified physicians, researchers found that practitioners who experience compassion fatigue suffer serious personal distress and high levels of emotional pain similar to those of their patients.

Many health care Personnel's are not aware of compassion fatigue conditions and symptoms. Ignorance of existing compassion fatigue presents the potential risk of health care personnel cutting off empathic connections with their traumatized patients.

Compassion Fatigue poses a significant risk for long-term health consequences in nurses. Subsequent physical health issues may also develop, including lack of energy and being accident prone, increased inflammatory process, hypertension and coronary artery disease, diabetes, (Heraclides, Chandola, Witte, & Brunner, 2012), obesity and gastrointestinal disorders[6].



AIDING FACTORS TO COMPASSION FATIGUE

Many nurses and medical assistants work efficiently to show a differences in their work. They work compassionately to serve better to patients. All healthcare workers must have look into these aiding factors to compassion fatigue, so that necessary measures can be taken on time.

1. Intensive Care Work

An intensive care unit nurses work restlessly. Nurses sometimes experience trauma every day due to long working hours and that can put them to risk of compassion fatigue. It is necessary There is need to take care of nurses and their mind as well.

2. High Mortality Rates

Nurse working in other areas where high mortality rates of patient is expected like oncology and terminally ill patients who's need care compassionately, have high rates of compassion exhaustion.

3. Lack of Support

Nurses who lack support either from workplace or from home were prone to get compassion fatigue easily. Non-healthcare friends and spouse can better option to stay away from the trauma witness at work, unless they

understand one's grief and confusion which they are going through.

4. Unstable management

When a new manager comes to organization which puts more pressures on workers, sometimes it feels a lack of supervision or guidance and assistance, for more tasks that added in addition to normal duties. There is more likely to experience fatigue.

5. Stress at home

There will be times (like in periods of transition) when work will be stressful, but this can be managed as long as we have time to recharge at home. But if home also puts life additional stress, this will exacerbate the normal challenges of working in healthcare, which can inhibit ability to feel compassion. As a healthcare worker, there is a need to be able to separate the emotions experience at work from those at home in order to continue working and living well[7].

ESSENTIAL ELEMENTS FOR PREVENTION OF COMPASSION FATIGUE

Preventing compassion fatigue: Caring for ourselves while caring for others.

Nurses main role on health care settings are on compassion but when it becomes over fatigue it would be taken care off. Here are some ways to care your compassion fatigue.

Self-care

Self-care is very necessary in every situation where fatigue comes. One should take a transition from work where activities which soothes one's fatigue must be adopted like recreational activities, exercises etc. that all help to reduce the compassion fatigue.

Social Support

Social support and emotional support are most important factors in reducing compassion fatigue. It promotes a positive psychological state and can protect against compassion fatigue. Social support from family or friends, makes nurses helpful and reenergize again whatever the situation they are dealing with the critical patients at work place.

Reduce Work Stress

Stress at workplace vanishes once enthusiasm and stamina. Supervisor must assess ones' work stress and making adjustments when possible to create variety or balance among staff members. One day off are most useful and to recognize that we don't always need to do it all.

Use Active Coping Measures

We each have our usual ways of coping with stress or difficult situations. Workers who adopt "active" coping strategies are less prone to symptoms of compassion fatigue. Active coping measures include adopting some hobbies, making fun with friends or family, taking charge and planning your time and schedule to spend some timeout from workplace.

Develop and Utilize Self-Awareness

We always be an "observing oneself" through which we can have a look on our feelings, perception as well as our general stress level throughout the day at workplace. Self-awareness is most sturdy way to pay more attention to oneself. There are many ways to develop self-awareness by:

- Journaling
- Reading
- Discussion with others
- Support activities
- Counseling
- Spiritual activities
- Meditation, or other reflective endeavors.

Maintain A Balance

Managing the impact of exposure to the trauma of others requires a daily and ongoing commitment to our own well-being. When work requires more focus on others, it feels selfish when thinking about giving time to ourselves. But, one should maintain balance from work schedule and time to rest, play, think and connect with others for one's own well-being.

Keeping a balance in our lives can anchor us and can prevent us from becoming worn out from providing care to others. Making and honoring this commitment to ourselves can help us approach our work with a different, refreshed perspective and renewed energy. Taking care of ourselves as we care for others can protect those personal assets that support high-quality care of our patients and family members—our compassion, dedication, caring, and empathy[8].

ONE MUST REMEMBER PREVENTION IS BETTER THAN CURE !

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Dr. Sapna Singh, et. al. “Compassion Fatigue: Nurse’s At Risk !.” *IOSR Journal of Nursing and Health Science (IOSR-JNHS)*, 10(3), 2021, pp. 17-20.