Health, safety, & wellness

When caring hurts: Compassion fatigue

By Holly Carpenter, BSN, RN

Nursing is a rewarding profession based on caring, giving, helping, and educating. It involves caring for others, from beautiful newborns to pain-wracked hospice patients. It involves giving of emotion, strength, and energy. It means helping the helpless, the hopeless, and the unwilling. It means educating yourself, coworkers, patients, and the public. Nursing is inspirational and aspirational, but also exhausting and emotionally draining. Nurses may feel overwhelmed during a portion of their career, but sometimes this feeling becomes compassion fatigue (CF).

Lombardo and others in 2011 explained that CF “may impact nurses in any specialty when, in the process of providing empathic support, they personally experience the pain of their patients and families.” CF has also been described as a secondary posttraumatic stress disorder-like experience.

CF can occur when the nurse identifies too closely with a specific patient, family, or situation; encounters similar difficult patient situations multiple times; has extreme feelings of guilt or helplessness attached to a specific happening; and/or experiences a particularly horrific experience secondhand through a patient. Nurses experiencing burnout and high levels of stress also may succumb to CF.

Nurses, physicians, first responders, social workers, clergy, and other caregivers experience CF. Those who work in oncology, combat situations, or hospice care or with chronically ill children may be at higher risk.

Burnout is not CF but may contribute to it. Burnout generally is job related, such as low morale, long hours, insufficient staff, or faulty equipment. CF is patient-related; that is, the nurse is unable to care fully for the patient due to the nurse’s psychological trauma. The nurse identifies with patients and their families to the point where it causes the nurse harm professionally, physically, and/or mentally.

Compassion satisfaction is the antonym of CF. Compassion satisfaction includes feelings of fulfillment, empathy, and gratification from caring for others. Those suffering from CF are trying to return to this optimal state.

When a nurse suffers from CF, many of the same precautions against CF will be needed, particularly self-care. Nurses need to ensure they are getting proper rest, hydration, nutrition, and work-life balance. Stress-reduction methods and personal coping strategies may be used. Employers can assist with time off, support groups, discussions with the nurse supervisor or administrator, employee assistance programs, a change in duties, and/or a change of shift. In some cases, a change of nursing specialty or career is chosen. Counseling or psychiatric care may be necessary if CF is severe. Most importantly, get help immediately if you suspect you or someone you know has CF. Ignoring CF is detrimental to the nurse, the nurse’s employer, and patients.

ANA’s Healthy Nurse initiative provides resources for nurses to help maintain work-life balance. For information, go to www.nursingworld.org/healthynurse.

Selected reference

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