The Experience of Compassion Fatigue in Direct Care Nurses: A Qualitative Systematic Review

Susan Salmond

Nursing is an extremely demanding, yet rewarding profession with constant exposure to human suffering. Compassion fatigue may emerge as nurses continually connect with patients who are suffering and absorb the patient’s trauma or pain or when nurses care for traumatized patients and re-experience their patient’s traumatic events. Nurses suffering from compassion fatigue experience physical and emotional symptoms that leave them disconnected from patients focusing primarily on the technical aspects of the job thereby avoiding the development of a therapeutic nurse-patient relationship. This disconnect can also affect personal relationships outside of work.

Objectives
The objective of this qualitative systematic review was to examine the available evidence on direct care nurses’ experience of compassion fatigue (CF) within any nursing specialty or care setting.

Phenomena of interest
This review explored the experience of direct care nurses with CF as a result of their work.

Methods:
This review considered studies of licensed nurses working in direct care nursing roles which examined compassion fatigue using qualitative methodologies. A three-step search strategy across 12 databases was used to discover published and unpublished studies in English from 1992 to 2017. Included studies were assessed by two independent reviewers using the critical appraisal tools of the Joanna Briggs Institute Qualitative Assessment and Review Instrument (JBI-QARI). Data was extracted using the standardized data extraction tool from JBI-QARI. Findings were aggregated and synthesized into categories which than went through a meta-synthesis process to produce a comprehensive set of synthesized findings that can be used as a basis for evidence-based practice. Findings were pooled using JBI-QARI

Results
Twenty-three studies were identified after appraisal and a total of 264 findings were derived from the included studies. These findings made up 18 categories based on similarity of meaning and subsequently developed four syntheses after meta-synthesis: (1) The work and professional environment of nursing creates a risk for compassion fatigue, (2) In the heat of the moment- responding to distress, (3) Running on empty and (4) Keeping compassion fatigue at bay.

Implications
The major implications of this review are that compassion fatigue prevention and management must be brought to the forefront of nursing and that both personal and organizational coping strategies and adaptive responses are needed to keep the nurse balanced and renewed to be able to continue compassionate connection and caring. The results and implications of the study add to approaches for avoiding and managing compassion fatigue.

Conclusion

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The systematic review had a high level of evidence based on CONQUAL analysis. A model depicting the findings illustrates the complexity of the phenomenon. The review has corroborated, clarified, and reinforced the knowledge about compassion fatigue—its antecedents, nurses’ response to stress, symptoms of compassion stress and compassion fatigue and bother personal and organizational coping measures that should be taken to remain resilient and free of compassion fatigue.