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Using a Qualitative Systematic Review to Guide Approaches to Prevent or Manage Compassion Fatigue

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Background: Compassion fatigue, with a cited prevalence up to 40%, 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. Sometimes termed the "cost of caring" (Figley, 1995), the emotional demand may lead to compassion fatigue if there is not an active plan to address, prevent, and manage the triggering factors and emotional response.

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. The results of this completed systematic review serves as a launching point for programs to prevent or manage compassion fatigue.

Methods:

The standard JBI qualitative metasynthesis approach was used. A three-step search strategy across 12 databases was used to discover published and unpublished studies in English from 1992 to 2017.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 standardized critical appraisal tools. Data was extracted using a standardized data extraction tool from JBI-QARI. Findings were aggregated and synthesized into categories then a final metasynthesis process to produce a comprehensive set of synthesized findings.

Results

Twenty-three studies produced 264 findings. These findings made up 18 categories based on similarity of meaning and subsequently developed four syntheses after meta-synthesis. The first metasynthesis was: The work and professional environment of nursing creates a risk for compassion fatigue. Findings clearly indicated that the ongoing demands of connecting with patients and family during vulnerable times while working within a "war zone like" atmosphere amidst rapid fire, high priority demands and high workload expectations can create high levels of stress which the nurse may respond feeling powerless and overwhelmed. Metasynthesis two, "In the heat of the moment- responding to distress" captures the need for coping and protection mechanisms against the stress of the work and the professional environment. Metasynthesis three, "Running on empty" is a metaphor for the profound, progressive, physical and emotional fatigue that leaves the nurse feeling as if they can't go on and practicing while feeling disconnected and drained, like a gas tank on empty. The final metasynthesis, "Keeping compassion fatigue at bay" highlights the broader need for greater compassion fatigue awareness and both organizational and personal strategies that can be undertaken to prevent or manage compassion fatigue.

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 findings are used to present a model of compassion fatigue which highlights factors contributing to its occurrence as well as interventions to take at different points to prevent and minimize the impact of compassion fatigue. The model can be used by organizations and individuals to actively plan for compassion fatigue prevention and management.

Conclusion

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 both personal and organizational coping measures that should be taken to remain resilient and free of compassion fatigue.

Keywords

Acute Illness, Qualitative Methods, Organizational and Workforce Issues

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Compassion Fatigue, Coping Strategies and Qualitative Systematic Review

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Abstract Summary:

The findings of a qualitative systematic review examining the experience of compassion fatigue are used to present a model of compassion fatigue which highlights factors contributing to its occurrence as well as interventions to take at different points to prevent and minimize the impact of compassion fatigue.

Content Outline:

I. Background

1. Definition of CF
2. Prevalence of CF
3. Impact of CF in the workplace
4. Need to Understand the Experience of CF- Qualitative Systematic Review

II. Methodolgy

1. The standard JBI qualitative metasynthesis approach was used. A three-step search strategy across 12 databases was used to discover published and unpublished studies in English from 1992 to 2017.
2. Included studies were assessed by two independent reviewers using standardized critical appraisal tools.
3. Data was extracted using a standardized data extraction tool from JBI-QARI. Findings were aggregated and synthesized into categories then a final metasynthesis process to produce a comprehensive set of synthesized findings.

III. Findings:

1. 23 papers across 7 countries with a total of 821 nurse participants
2. 264 Findings collapsed to form 18 categories
3. 18 categories collapsed into 4 metasynthesis statements: 1. Central to the work of nursing and the professional environment in which nurses work are significant psychosocial stressors which contribute to compassion stress and if left unchecked can lead to compassion fatigue; 2. Protection against the stress of the work and professional environment necessitates that the individual and team learn how to respond to 'the heat of the moment'; 3. Symptoms of CF present as profound, progressive, physical and emotional fatigue—a feeling that they just can't go on. They are disconnected and drained—like a gas tank on empty. 4. Keeping compassion fatigue at bay requires awareness of threat of CF, symptoms of CF and the need for work-life balance and active self-care strategies
4. Metasynthesis and findings integrated into a model to guide organizations and practitioners to prevent and manage compassion fatigue.
5. Using the model to plan for interventions to prevent and manage compassion fatigue
 - a. organizational approaches
 - b. personal self-care approaches.
6. Evaluating ongoing status of nurses in relation to compassion fatigue

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Author Summary: Dr. Salmond has been Co-Director of the Northeast Institute of Evidence Synthesis and Translation: A JBI Center of Excellence for 12 years. She is a certified systematic review trainer, member of the JBI Committee of Directors, and a methodologist in qualitative and mixed methods synthesis. She is co-author of the text, Comprehensive Systematic Review for Advanced Nursing. She holds the position of Executive Vice Dean at the School of Nursing, Rutgers University.