

**Quantitative Literature Review: Compassion Fatigue and Burnout**

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## **Quantitative Literature Review: Compassion Fatigue and Burnout**

This literature review assesses previous research on nurse burnout and compassion fatigue. Burnout is an overwhelming physical, mental, or emotional exhaustion due to poorly managed workplace stress. "People whose professions lead to prolonged exposure to other people's trauma can be vulnerable to compassion fatigue, also known as secondary or vicarious trauma; they can experience acute symptoms that put their physical and mental health at risk, making them wary of giving and caring. (Psychology Today, 2019, para. 1)." The following articles display how compassion fatigue and burnout can affect nurses and the quality of care given.

### **The effect of spiritual well-being on compassion fatigue among intensive care nurses: A descriptive study**

"This study aimed to determine the effect of spiritual well-being of intensive care nurses on compassion fatigue" (Ünlügedik & Arkbass, 2023, p. 1). The article's primary purpose was to describe the compassion fatigue generally experienced by intensive care nurses and bring awareness to it. Exploring compassion fatigue is vital to the well-being of nurses and patients.

#### **Key Points**

This article showcases a descriptive study sampling one hundred sixty-seven nurses in intensive care units in Turkey. The data collection occurred using the Personal Information Form, The Spiritual Well-Being Scale, and The Compassion Fatigue-Short Scale (Ünlügedik, 2023). The data collected reveals that intensive care unit nurses have moderate levels of compassion fatigue. The author suggests that less experienced nurses should get more attention in the intensive care unit against compassion fatigue (Ünlügedik, 2023). The p-value follows:

"Nurses' Spiritual Well-Being Scale mean score was  $113.89 \pm 15.50$ . The mean score of the Compassion Fatigue Scale was  $60.15 \pm 29.24$ . A positive correlation was found between the Spiritual Well-Being and the Compassion Fatigue Scales ( $\beta = 0.358$ ,  $p = 0.000$ )" (Ünlügedik, 2023, p. 1). The data was not hugely significant; however, it is enough to prove that compassion fatigue among nurses is an issue to create concern. The author conveys that the nurses studied are experiencing moderate compassion fatigue.

### **Assumptions**

The issue compassion fatigue poses is a lack of empathy. If nurses suffer compassion fatigue, patient care also suffers. Compassion fatigue can slow a nurse's response to a patient due to the lack of empathy for the patient's needs and feelings. Therefore, compassion fatigue is a pressing issue. The author of this article is attempting to shine a light on this issue by providing quantitative evidence that it exists.

### **Deficit/Conclusion**

The author concludes that nurses' spiritual needs need attention. The author's line of reasoning is acceptable because nurses must be able to show compassion to provide the best care possible. The implications of this article should be to raise awareness of compassion fatigue in healthcare workers. No stigma should be present when a nurse is feeling this way. Nurses should understand compassion fatigue and what to do when they feel it. If nursing fails to accept this reasoning, the implications will be severe. Nurses would not feel safe allowing themselves to accept when they have compassion fatigue.

**Relationship between burnout levels of nurses and their circadian preference, sleep quality, and personality traits**

An article titled “Relationship between burnout levels of nurses and their circadian preference, sleep quality, and personality traits” reports on a study exploring circadian preference and personality traits along with their effects on sleep quality and their relationship with burnout (Pelin et al., 2023). Two hundred and eleven nurses participated, forty males and one hundred and seventy-one females.

### **Key Points**

A p-value is present due to the relationships discovered within the study. When assessing scores from the two hundred and eleven nurses involved in the study, the participant's sleep quality was deficient compared to median values. Additionally, nurses who work at night have higher levels of burnout (Pelin et al., 2023). This study also found that the evening chronotype, which is a person who sleeps during the morning and thrives during evening hours according to their circadian rhythm, held links associated with burnout (Pelin et al., 2023). According to this study, other traits linked with burnout include poor sleep quality, neuroticism, agreeableness, extroversion, and conscientiousness (Pelin et al., 2023).

### **Assumptions**

The author of this study aims to explore comparable burnout related to personality traits and circadian rhythms (Pelin et al., 2023). Everyone has a different circadian rhythm, personality traits, and sleep quality. This author seeks a quantifiable relationship between these things to advise healthcare workers on how to avoid burnout.

### **Deficit/Conclusion**

The author's reasoning is acceptable due to the study's results. These results show a connection between females, nightshift, and evening chronotypes, poor sleep quality, extroverts,

agreeableness, neuroticism, conscientiousness, and the high number of hours worked per week increases burnout (Pelin et al., 2023). The implications of this article include educating nurses and other healthcare workers on the at-risk populations for burnout within the field. Education can aid workers in being aware of the risks of their habits and prevent burnout. The risk of failing to accept this line of reasoning is burnout. Burnout can be crippling, especially to a full-time healthcare worker, and therefore, awareness and prevention mechanisms should factor within an individual's planning. When healthcare workers suffer from burnout, their productivity decreases, and patients do not receive the best care possible.

### **The Relationship Between Psychological Distress of Nursing Faculty With Burnout**

This article assesses the mental well-being of nurses and their burnout levels (Watson, 2023). The article's purpose is to promote interventions leading to the mental well-being of nursing staff to decrease burnout. Overall, improving nurses' mental well-being is the goal of this article.

### **Key Points**

This article reports on a quantitative study using a descriptive method with a convenience sample of nursing faculty (Watson, 2023). In collecting the data, the Kessler Psychological Distress Scale is in place in addition to the Oldenburg Burnout Inventory. Through this study, psychological distress is present in 25% of the sample, and burnout is in 94%. The p-value of this study is  $p < .05$  (Watson, 2023). This p-value represents a significant correlation. Analyzing the results is done by regression analysis (Watson, 2023).

### **Assumptions**

The author deems mental health issues significant to burnout (Watson, 2023). Through this study, the author wishes to prove the correlation between psychological distress and burnout. The author believes a quantitative study using the Kessler Psychological Distress Scale and Oldenburg Burnout Scale is acceptable to explore the hypothesis. Following Watson's thinking that burnout partially results from psychological distress, there must be interventions to improve mental health outcomes among nursing faculty. The author believes that "Implementation of workplace health promotion programs, increased mentorship, inclusion of diversity within nursing academia, and mental health awareness can improve mental health outcomes among nursing faculty (Watson, 2023).

### **Deficit/Conclusion**

This article showcases a study that was highly successful in its findings. The study proves a strong correlation between the psychological distress of nurses and burnout. The author's reasoning is acceptable because the study discovered a significant correlation between psychological distress and burnout in nurses. The implication of this article is better working conditions for nursing faculty. If ignored, the implications are less motivated and stable workers in healthcare. The implications of ignoring this article can affect patients who rely on their nurses for quality healthcare.

### **Conclusion**

Burnt-out nurses may not be as helpful to their patients as they would like and are also at risk for compassion fatigue. Patient outcomes are less promising when their healthcare team is experiencing burnout than when not. One of the primary reasons for the importance of the topic is patient safety. When a nurse is dragging at work, patients are the ones who pay the price. Burnout needs to be seriously considered by everyone. Burnout intertwines with nursing

practice. Nurse burnout can directly impact a patient's health because nurses may not be as focused as they should be. Improving nurse-to-patient ratios can prevent burnout. The Journal of American Medical Association medical association found that nurses working in units with an eight-to-one-patient ratio experienced twice the burnout as nurses working with a four-to-one-patient ratio (Kavanagh, 2020). The efforts to task nurses with fewer patients are essential to improve nursing care. Another quality improvement possible is training leaders to address burnout. For example, leaders should train to recognize the signs of burnout and what steps to take to support staff (Kavanagh, 2020). Healthcare will improve as burnout becomes more highly addressed and destigmatized.

## References

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