

ORIGINAL ARTICLE

COMPASSION SATISFACTION, FATIGUE AND BURNOUT AMONG NURSES WORKING IN CLINICAL DEPARTMENTS AT A TERTIARY CARE HOSPITAL IN KARACHI

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Background: Nursing is an essential component of the health care system that provides care with compassion to people of all age groups who are physically or mentally ill. The objective of this study was to investigate the occurrence of compassion satisfaction, fatigue, and burnout among nurses working in the different clinical departments of a tertiary care hospital. **Methodology:** This cross-sectional study was conducted using convenience sampling approach among 190 nurses working at emergency, intensive care units, cardiology, and paediatric units of Liaquat National Hospital, Karachi. Approval was taken from Ethical Review Committee of Liaquat National Hospital. Data were collected between, August to September 2018 by using Professional Quality of Life (ProQoL) scale version 5. Analysis of variance (ANOVA) was used in order to identify the significant difference of compassion satisfaction, fatigue, and burnout among different clinical departments. **Results:** In this study, 61.0% of participants belonged to the age group of 21 to 30 years and 54.2% were female. The proportions of the average level of compassion satisfaction (CS), compassion fatigue (CF) and burnout were found 70%, 84.7%, and 94.2% respectively. Overall mean scores of CS, CF, and burnout were 36.59, 29.11, and 32.07 respectively. ANOVA confirmed that mean scores of compassion fatigue and burnout differed significantly among four clinical departments ($p=0.005$ and 0.014 respectively). **Conclusion:** Overall study participants showed average levels of compassion satisfaction, fatigue, and burnout. Significant mean differences of compassion fatigue and burnout among all selected departments were obtained.

Keywords: Compassion satisfaction, Compassion fatigue, Burnout

Pak J Physiol 2019;15(3):19–22

INTRODUCTION

Nursing is an essential component of the health care system that provides care with compassion to people of all age groups who are physically or mentally ill. Dimensions of nursing care that include making the sense of human presence, respect to other individuals, positive cohesion, professional knowledge and skills and courtesy to other's experience.¹ These dimensions are highly associated with nursing care and patient's satisfaction to that care.² It has been observed that high levels of patient's satisfaction have been linked to the high levels of nurse caring with compassion satisfaction, so the high levels of patient dissatisfaction have been linked to nurses' burnout and fatigue.³ The term compassion satisfaction defines the satisfaction nurses feel when caring for ill people and feeling proficient. Moreover, it is a degree of the positive features of humanity or care giving, the understanding of feeling good that you can do something to help.⁴ In contrast, compassion fatigue (CF) is defined as a condition of physical, emotional and spiritual exhaustion while caring for patients.⁵ Nurses have been reported the highest prevalence rate of burnout and fatigue that create a substantially negative influence on the nurse, patient, as well as to the organization.⁶ Many factors that contribute to the fatigue and burnout among nurses included: workload,

long working hour shifts, rotation duties.³ Compassion fatigue and burnout preserve the reason of physical, mental, and emotional health complexity for nurses and finally become overwhelming burdens on nurses.⁷ Compassion fatigue may cause hopelessness, lethargy, and depression among nurses, while burnout among nurses can be noticed through feelings of exhaustion and lack of individual accomplishment; both are important aspects influencing how patients are satisfied with nursing care.⁸ Nurses working in the emergency room are more susceptible to work-related distress that originates due to recurrent contact with victims of abuse, injury, and death.⁹ Researchers¹⁰ proved that the high levels of burnout and compassion fatigue were observed among nurses and signify the path towards additional research among nurses work in the emergency department. A previous study¹¹ showed less compassion satisfaction among emergency department nurses and a higher risk of burnout compared to nurses working in other departments. Furthermore, studies¹² confirmed that burnout is widespread in emergency and medical nurses. Another study¹³ conducted in Australia on ICU nurses revealed that compassion satisfaction significantly increased with increasing duration of practice, and also showed that burnout scores significantly reduced with increasing age, years of tenure and practice; burnout

was predicted by lower years of tenure. A study¹⁴ revealed the high levels of secondary traumatic stress among nurses working in the emergency department. High levels of secondary traumatic stress in nurses contribute to compassion fatigue and burnout and may also affect the patients' care. Furthermore, researches shows that paediatric nurses might be at greatest risk for burnout having up to 10 years' of professional experience, whereas nurses had the highest compassion satisfaction that had more than 20 years' experience and over 40 years of age.^{15,16}

The key function of the nursing profession is to provide the quality care to patients, but due to the occurrence of these negative consequences among nurses, the quality of nursing care and level of patients' satisfaction with nursing care might be compromised. The objective of this study was to investigate the occurrence of compassion satisfaction, fatigue, and burnout among nurses working in the different clinical departments of a tertiary care hospital, in Karachi.

METHODOLOGY

This cross-sectional study was conducted by using convenience sampling approach among 190 nurses working at emergency (n=41), intensive care units (n=71), cardiology (n=53) and paediatrics unit (n=25) of Liaquat National Hospital, Karachi. Sample size calculation was performed through open epi online software, by using 86% as the percentage of moderate to high levels of compassion fatigue, among nurses, 95% confidence interval, and 5% margin of error¹¹. Approval was taken from the Ethical Review Committee of Liaquat National Hospital. Written informed consent was taken from each participant of the study. Data were collected between, August to September 2018 by using Professional Quality of Life (ProQoL) scale version 5. This 5-point Likert scale consists of 30 questions which are divided into 3 subscales containing; compassion satisfaction, fatigue, and burnout. Each subscale contains 10 questions. Subscale score less than 22 were considered as low level, between 23 and 42 as average level, and above 42 was considered as high level. Data were analysed using SPSS-21. For each participant of this study, scale scores were summed for compassion satisfaction, fatigue, and burnout. Mean and frequency analysis performed for demographic data. Analysis of variance (ANOVA) was used to identify the significant difference of compassion satisfaction, fatigue, and burnout among different clinical departments, and $p \leq 0.05$ was considered as significant.

RESULTS

Table-1 illustrates the socio-demographic characteristics of the study participants. In this study,

61.0% of participants belonged to age group 21–30 years, and 54.2% were female. The percentage of respondents with a diploma in nursing was 71.5%, and 28.4% reported a Bachelor's degree in nursing. It was observed that 37.3% had 3 to 5 years of professional experience, while 17.8% had >10 year professional experience. Majority (73.6%) of the participants earned up to Rs. 40,000 whereas only 4.2% had income more than Rs. 50,000 per month. In this study, 86.8% were performing rotational duties and remaining had fixed duties.

Table-1: Socio-demographic characteristics of participants (n=190)

	Department				
	Emergency n (%)	ICU n (%)	Cardiology n (%)	Paeds n (%)	Total n (%)
Age (Yrs)					
21–30	22 (18.9)	56 (48.2)	26 (22.4)	12 (10.6)	116 (61.0)
31–40	16 (24.6)	13 (20)	25 (38.4)	11 (16.9)	65 (34.2)
>40	3 (33.3)	2 (22.2)	2 (22.2)	2 (22.2)	9 (4.7)
Gender					
Male	31 (35.6)	25 (28.7)	24 (27.5)	7 (8.0)	87 (45.7)
Female	10 (9.7)	46 (44.6)	29 (28.1)	18 (17.4)	103 (54.2)
Educational Level					
Diploma	30 (22.0)	43 (31.6)	45 (33.0)	18 (13.2)	136 (71.5)
Post RN BSc. N	11 (20.3)	28 (51.8)	8 (14.8)	7 (12.9)	54 (28.4)
Marital Status					
Single	17 (17.7)	46 (47.9)	22 (22.9)	11 (11.4)	96 (50.5)
Married	24 (25.5)	25 (26.0)	31 (32.9)	14 (14.8)	94 (49.4)
Professional experience (Yrs)					
1–2	7 (22.5)	14 (45.1)	7 (22.5)	3 (9.6)	31 (16.3)
3–5	11 (15.4)	26 (36.6)	21 (29.5)	13 (18.3)	71 (37.3)
6–10	14 (25.9)	22 (40.7)	15 (27.7)	3 (5.5)	54 (28.4)
>10	9 (26.4)	9 (26.4)	10 (29.4)	6 (17.6)	34 (17.8)
Monthly income (Thousand)					
Up to 40	27 (19.2)	47 (33.5)	42 (30)	24 (17.1)	140 (73.6)
41–50	13 (30.9)	18 (42.8)	10 (23.8)	1 (2.3)	42 (22.1)
> 50	1 (12.5)	6 (75)	1 (12.5)	0 (0)	8 (4.2)
Working shift					
Fixed	5 (20)	13 (52)	5 (20)	2 (8)	25 (13.1)
Rotation	36 (21.8)	58 (35.1)	48 (29.0)	23 (13.9)	165 (86.8)

Table-2 compares scores of 3 subscales of ProQoL instrument among nurses working in all four specialty areas. The proportions of average level of compassion satisfaction (CS), compassion fatigue (CF) and burnout were 70%, 84.7%, and 94.2% respectively. There were a few nurses (n=4 and 3) who had a low level of CS and burnout, whereas the high level of CF and burnout was observed among n=5 and 8 nurses respectively.

Average level of CS, CF and burnout was prominent in all departments. In ICU high level of CS, CF and Burnout were frequent as compared to other departments. Low level of CS was highest in emergency nurses whereas as low levels of CF and burnout was prominent in cardiology nurses. Overall mean scores of CS, CF, and burnout were 36.59, 29.11 and 32.07 respectively.

Table-2: Comparison of compassion satisfaction, fatigue and burnout scores

Variables	Total n (%)	Emergency n (%)	ICU n (%)	Cardiology n (%)	Paeds n (%)
Compassion Satisfaction (CS)					
Low	4 (2.1)	2 (4.9)	2 (2.8)	0 (0)	0 (0)
Average	133 (70)	30 (73.2)	45 (63.4)	40 (75.5)	18 (72)
High	53 (27.8)	9 (22.0)	24 (33.8)	13 (24.5)	7 (28)
Compassion Fatigue (CF)					
Low	24 (12.6)	3 (7.3)	7 (9.9)	13 (24.5)	1 (4)
Average	161 (84.7)	37 (90.2)	62 (87.3)	40 (75.5)	22 (88)
High	5 (2.6)	1 (2.4)	2 (2.8)	0 (0)	2 (8)
Burnout					
Low	3 (1.5)	0 (0)	2 (2.8)	1 (1.9)	0 (0)
Average	179 (94.2)	40 (97.6)	63 (88.7)	52 (98.1)	24 (96)
High	8 (4.2)	1 (2.4)	6 (8.5)	0 (0)	1 (4)

Table-3 shows the Mean±SD of Compassion Satisfaction (CS), Compassion Fatigue (CF) and Burnout of the study participants working in four selected departments. The highest mean score of CS was found in the Paediatric Department at 38.08±6.19. Furthermore, the lowest values of the mean score of CF and burnout were observed for study participants working in Cardiology department 26.64±5.76 and 30.54±3.92 respectively. ANOVA confirmed that mean scores of CF and burnout differed significantly among four clinical departments ($p=0.005$ and 0.014 respectively).

Table-3: Mean±SD of Subscales

Variables	Emergency (n=41)	ICU (n=71)	Cardiology (n=53)	Paediatric (n=25)	<i>p</i>
Compassion Satisfaction	35.25 ±7.62	37.71 ±7.66	35.43 ±6.90	38.08 ±6.19	0.413
Compassion Fatigue	30.02 ±5.54	30.19 ±6.12	26.64 ±5.76	30.04 ±6.03	0.005*
Burnout	31.51 ±5.29	32.87 ±5.66	30.54 ±3.92	33.96 ±4.49	0.014*

*Significant

DISCUSSION

Majority of this study participants among Emergency, ICU, Cardiology, and Paediatric departments were found in average level of compassion satisfaction. When compared among all departments, average scores for compassion satisfaction were found the most among cardiology nurses (75.5%); and high score of CS was found most in ICU nurses (33.8%). Similar results were found by Young *et al*¹⁷ that showed higher compassion satisfaction among cardiology nurses where the mean of CS was 41.84. Another study¹¹ suggested that emergency nurses were at risk for less CS compared to other inpatient specialties. In contrast, Roney *et al*¹⁸ in USA found average level of CS in most paediatric nurses.

The findings of this study identified that most of the study participants had average level of compassion fatigue among all 4 selected departments. However, average CF score was found in most (90.2%) Emergency Department nurses, and high score of CF

was found in most (8%) Paediatric Department nurses. A previous study¹⁶ also showed the highest CF level among Paediatric nurses. In our study, the frequency of average CF in cardiology nurses was slightly lower as compared to the other three departments. Similar results were also reported by other studies^{14,17} that showed the low level of CF among cardiology nurses as compared to emergency nurses. This study suggests a significant mean difference of CF among all departments ($p=0.005$).

The average score of burnout was seen among 94.2% of the study participants. A significant mean difference of burnout among all selected departments was seen ($p=0.014$). On comparison among all 4 departments, the high score of Burnout was found high (8.5%) among ICU nurses. Similar results were also found in a study¹¹, where the ICU nurses were found at higher risk of burnout compared to emergency nurses. Another study¹⁹ also showed that 92% of study participants were at moderate risk of burnout. These results are dissimilar with the study of Young *et al*¹⁷.

CONCLUSION

Overall study participants showed average levels of compassion satisfaction, fatigue, and burnout. Significant mean differences of compassion fatigue and burnout among all selected departments were seen.

RECOMMENDATIONS

Nursing managers must provide opportunities to their staff to share their feelings without any fear of payback and get education on productive ways to deal with stressful situation. Nurses can also implement self-care activities, modify the way they feel about their work, and learn coping strategies that may decrease the risk to develop compassion fatigue.

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Received: 15 May 2019

Reviewed: 24 Jul 2019

Accepted: 1 Sep 2019