Compassionate care: Can it be defined, provided, and measured?

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Abstract
The concept of compassion inherent in the nursing profession is a significant value. It motivates nurses to act ethically and in a sensitive way while providing care. Compassion is an essential element of good nursing care. Thus, compassionate care is not only a significant part of modern patient care but also a vital function of professional nursing. Although it is known as a fundamental characteristic of nursing, there are limited data about the characteristics of compassion. More data is needed regarding whether and how often compassion is included in nursing practices. As with the concept of compassion, there are difficulties with the exact definition of compassionate care, what compassionate care behaviors include, and how provision of compassionate care can be proven or measured. This review comprehensively discusses information regarding the concept of compassion and its significance in nursing, compassionate care, and compassionate care behaviors. We also discuss measurement of compassionate care in accordance with the current literature.
Keywords: Compassion; compassionate care; Compassionate care behaviors; measurement tools; nursing care.

What is Compassion?
The Turkish word Merhamet (Compassion) is derived from the Arabic base ṭḥm. The Turkish Language Association (Türk Dil Kurumu, TDK) (2006) dictionary defines it as “feeling sadness or pity for someone or another living being when they encounter a bad situation,” whereas Chochinov (2007) defines it as awareness of the pain of others and the desire to relieve their pain. Compassion requires personally understanding the others’ pain. Deeply loyal feelings developed upon seeing the pain experienced by another person create a moral response, desiring to ease the situation of the person. Because of this moral response, the individual suffering from pain receives the care that brings relief. Compassion, which is a response to the pain of the other person, inherently motivates people by creating the desire to act on behalf of someone else. Gordon (1998) defines being compassionate as “worrying for the wealth of others and acting unselfishly without selfishness and external force.” The 14th Dalai Lama, the representative of Buddhism, stated that being compassionate forces us to reach all living beings, and “the scope of real compassion is universal.” Definitions of compassion are similar in terms of “its requirement to understand the pain of others and take action to reduce it.” The TDK definition of “compassion (merhamet)” does not meet the exact meaning in the literature, which may...
be related to its translation to Turkish as “merhamet.” Turkish literature does not have an exact translation for “compassion,” and words such as merhamet (compassion), eşduyum (empathy), şefkat (compassion), and özduyarlılık (self-compassion) are used interchangeably in Turkish literature. This manuscript prefers “merhamet” for “compassion,” since it appears in Turkish literature more than other words.

The literature states that compassion is not a simple process. The concept is complex to define, although there are different definitions regarding the concept of compassion, and common points in these definitions. Dewar et al. (2013) state that definitions of the concepts of wisdom, humanity, love, empathy, sympathy, pity, and respectability correspond with the concept of compassion, which causes confusion in practice. When examined, it appears that these interwoven concepts are different from each other. For example, Schantz (2007) stated that compassion includes a sympathetic feeling and worrying about the pain of people. Nussbaum (2001) stated that the concept of compassion is also related to understanding the pain of other people. Thus, the concept comprises respect and awareness of others. It is different from empathy, sympathy, and humane sentiment with its necessity to realize the pain of others or the pain is bad and act through an emotional response to relieve the pain. In a study investigating the understanding, experiences, and preferences of palliative cancer patients regarding “sympathy,” “empathy,” and “compassion,” Sinclair et al. (2017b) found that the concepts of sympathy, empathy, and compassion are generally used interchangeably in the literature, but patients distinguish these concepts from each other and experience them in different ways. For the patients in this study, sympathy is an unwanted and useless response based on feeling pity, empathy is an emotional response trying to understand and accept the individuals’ pain, and compassion is a characteristic including favor, actions, and love, developing the fundamental aspects of empathy and occurring even though it is not an obligation. These patients also stated that they do not benefit from sympathy. They find empathy and compassion beneficial. However, compassion is the most preferred and effective of these concepts. Respectability is also used as a synonym with compassion and individualized care. It is also about maintaining personal integrity, identity, personal value, and self-respect. From this perspective, compassion is a way of gaining and preserving individualistic respect. All these statements indicate that compassion includes many different concepts within it. This is why there is difficulty in defining compassion.

Nursing literature indicates that the concept of compassion has gained importance in recent years and has been seen as a fundamental value in care. Compassion has a significant effect on the quality of nursing care and is an essential element of patient-centered care. In addition, compassion is a catalyst, actually making care individual-centered and compassionate. For Burnell (2011), compassion is the basis of nursing care and a practice that is necessary to include in every practice of nurses. Day (2015) indicates that “compassion cannot be taught; it is something you have within you.” Day (2015) also indicates that compassion means having time to listen, talk, hold the hand of the patients, and understand their feelings. It can include hugging your colleague when necessary. Schantz (2007) indicates that the concept of compassion is not clearly defined in nursing, and it is not commonly seen in modern nursing practice. This situation also causes many authors to use the concepts of care, sympathy, empathy, and compassion interchangeably, which leads to confusion in defining the concept of compassion. For example, a study conducted with patients and healthcare professionals found that words defining compassion are care/interest (38% of people used these words), understanding (21% of people used this word), empathy (17% of people used this word), and listening (16% of people used this word). In addition, Schantz (2007) indicated that studies conducted on the concept of compassion are inadequate, and it will be hard to find the exact meaning until more studies are conducted. Olshansky (2007) also states that nurses cannot consider compassion as inseparable from the integrity of their professional practices until it is clearly defined. For this reason, future studies should prioritize understanding and explaining the concept of compassion, which is the essence of the nursing profession.

**Compassionate Care**

Wikipedia defines the adjective “compassionate,” which implies pitying someone, as “an understanding about the emotional state of someone else or a person.” Some other common definitions of the concept of compassionate are “a deep awareness of sympathizing with the pain of others” and “humane characteristic that understands others’ pain and tries to do something regarding this subject.”

Discussions regarding compassionate care in nursing are increasing in today’s literature. Bivins et al. (2017) scanned the words “compassionate care” in health services literature and found that the concept draws more attention in nursing literature than in a medical journal. Also, compassionate care discussions are generally associated with nursing in popular literature. Providing compassionate care is inherent in the nursing profession, and compassion is a code of conduct guiding professional behaviors. The first item of the code of ethics determined by the American Nurses Association (ANA) (2001) invites nurses to work with compassion in a way that respects each patient. The ANA code of ethics states, “The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth, and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems.” Compassionate care is actually not a new concept but a complicated subject inherent in the essence and code of ethics of the nursing profession. Jones (2016) stated that descriptions of nurses as compassionate individuals started with the early period studies.

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of Florence Nightingale, and this has been maintained until today. Florence Nightingale stated that good nurses are good people with some merit and characteristics, and one of them is compassion.\textsuperscript{[24]} Bradshaw\textsuperscript{[25]} (2011) emphasizes the relationship between compassion and favor and combines these concepts while trying to identify what being a morally good nurse means. For Bradshaw\textsuperscript{[25]} (2011), a morally good nurse is a compassionate nurse. Compassionate care not only is based on good nursing practices but also is the key element of the individual-centered approach.\textsuperscript{[12]}

As with the concept of compassion, there are several definitions for compassionate care as well. Indeed, Bivins et al.\textsuperscript{[26]} (2017) stated that providing only one definition is not accurate and that compassionate care includes several elements.\textsuperscript{[14]} These elements include the following: cognitive (discovering the perspective of the other person and understanding what is important for that person); volitional (taking action to relieve the illness of the other person or do something about it); affection (understanding the feelings and concerns of the other person); self-sacrifice (responding in a self-sacrificing way to the needs of others); and moral (the failure in showing compassion to others may intensify the pain and distress they experience).\textsuperscript{[20]} Lown et al.\textsuperscript{[26]} (2011) refer to four fundamental characteristics of compassionate care. These are (1) interpersonal relationships based on empathy and emotional support, (2) efforts to understand and relieve patients’ sadness and pain, (3) effective communication and enabling the patients’ and families’ participation in decisions, and (4) considering patients as persons and respecting them. Burnett\textsuperscript{[28]} (2009) indicated the common characteristics of compassionate care as a dimension of care, awareness of sympathizing with the disturbances of others, sensitivity to the pain and fragility of others, feeling pain along with someone else, making a spiritual contact with someone else, trying to relieve or reduce the pain, and making visible such characteristics as “love, cheer, peace, patience, kindness, favor, belief, modesty, and moderation.” Papadopoulos and Ali\textsuperscript{[11]} (2016) defined compassionate care as “noticing,” “relationship,” and “response.” These concepts include the following: being empathetic, understanding and terminating the pain, verbal and non-verbal communication skills, establishing a relationship and bond with the patient, involving the patient in the process, providing care, competence, professionalism, and being careful about the patients’ needs.\textsuperscript{[11]} Tierney et al.\textsuperscript{[27]} (2016), in a qualitative study conducted with healthcare professionals to research the meaning of compassionate care, found that the participants consider compassionate care equal to good communication skills and an interest in the patients.

Above are given various authors’ definitions including different or similar concepts explaining compassionate care. The definitions indicate that compassionate care includes responding or relieving patients’ pain with a self-sacrificing approach by being aware of the needs that are important for the patient. While employing these approaches, nurses also put the patient in the center of care, respect the preferences of patients as individuals, approach with empathy, and be able to establish an emotional bond, all of which include compassionate care. In addition, effective communication, emotional support, and showing interest are also among concepts defining compassionate care. In conclusion, compassionate care includes many concepts and no consensus has been reached regarding what compassionate care is and how it occurs in nursing practice. However, according to the literature, it is not easy to ensure this. Thus, it is extremely important to conduct studies on what compassionate care is.\textsuperscript{[7]}

### Compassionate Care Behaviors

Compassionate behavior requires understanding others’ value, establishing a relationship with them, and responding in a way that is meaningful for that person. By nature, compassion is felt during relationships with other people. It is not about the things we choose to do for others but about the things we choose to do with them.\textsuperscript{[7]} Namely, it requires involving patients in their care, asking their preferences, and acting accordingly. Roach\textsuperscript{[22]} (2007) indicated that compassionate care includes acting to help with their aches, fragilities, fears, and pains, even though we do not know those people. Nussbaum\textsuperscript{[10]} (2001) also stated that compassionate behavior starts with the realization of someone’s being in severe pain. According to authors, compassionate care titles found in the literature are summarized below:

**“Small” Actions Performed Within the Scope of Routine Care:**

Compassionate behaviors are mostly seen as actions performed within the scope of routine care, which is why they are rarely mentioned. These behaviors are considered “simple” in practice; however, they have profound effects on the family. A nurse using a soft gauze to clean up blood on a wound on the face of a young person may be an example of this.\textsuperscript{[28]} A qualitative study by Christiansen et al.\textsuperscript{[29]} (2015) indicated that nurses mention the importance of being careful about small practices to help patients feel that they are taken care of, and establishing an emotional bond for the compassionate behavior. In addition, compassionate care behaviors are not always the same and vary from person to person and from situation to situation. They can be shown in different ways during an appointment or consultation, such as helping a patient in the waiting room, revealing their disappointments/distress, or offering them a cup of tea while listening to them.\textsuperscript{[27]} Dewar et al.\textsuperscript{[7]} (2013) stated that according to literature the compassionate care behaviors include relieving others’ pain; however, recognizing the sensitivity/fragility of the other person and responding to it is also important and necessary for providing compassionate care. Associating compassion only with pain may result in failing to notice some important and compassionate interactions. Behaviors performed by recognizing just pain are not enough to define compassionate behaviors. Recognizing a possible inadequacy may also foreshadow compassionate behavior. For example, being compassionate may not be necessary for helping to eat; however, recognizing oth-
Developing Empathy and Providing Emotional Support to Patients by the Bedside: Babaei et al. [30] (2016) indicated that nurses working in internal and surgery services define their compassionate care behaviors as “developing empathy” and “providing emotional support to patients by the bedside.” Compassionate care examples that are given by Pearson [24] (2006) also support the previous study. Compassionate care behaviors may include a surgeon’s holding the hand of a frightened child during anesthesia or a nurse’s providing relief to the patient while discussing treatment options. It may also include a doctor’s understanding the worries of an artist recently diagnosed with diabetes regarding how the disease affects his/her life and helping him/her with the management of the disease, or healthcare providers’ abstaining from excessive tests and treatments while meeting the requests of the patients.

Involving Patient, Interest, and Self-sacrifice: Kret [31] (2011) addressed how surgical patients identify compassionate care behaviors of nurses providing care to them. That study found that patients say that nurses’ compassionate care behaviors are “interested, self-sacrificing, devoted, approachable, professional, and informative for the patient.” A qualitative study investigating the significance and meaning of compassion in nursing practice for old patients with chronic diseases identifies compassionate care behaviors as the combination of skills such as self-sacrificing, listening, including, helping, being available, and understanding. [32]

Establishing a Close Relationship with Patient: A study was conducted with 1323 nurses in 15 countries to determine how compassion is seen in nursing practice and similarities and differences between countries, and found common perceptions regarding compassionate care behaviors in nursing in all countries. [33] Concepts such as “establishing a close relationship with patients,” “being available,” “being with the patient and family” were prominently revealed. Tierney et al. [27] (2016) determined that the way of providing compassionate care is also related to the experiences of healthcare professionals. This study found that beginning nurses do not provide compassionate care by considering patients’ requests and needs, but they provide it by considering clinical targets for helping their patients. However, nurses learn that providing compassionate care requires establishing a relationship with the patient, listening to them, and understanding their perspectives.

Verbal and Non-Verbal Behavior Patterns: Two studies determined that nurses’ verbal and non-verbal behavior patterns towards patients are significant in providing compassionate nursing care. [30,34] Verbal compassionate behaviors include patient-specific informing, giving patients time and opportunity to ask questions, and asking questions regarding their unmet needs. These behaviors also include healthcare professionals’ showing respect to the patients and knowing and valuing their beliefs and preferences. [34]

Non-verbal compassionate behaviors include eye contact, active listening with full attention, and facial expressions compatible with the subject of the conversation. [30,34] A study conducted in Iran determined happy facial expression, smiling, touching, shaking hands with patients, and actively listening to them to be examples of non-verbal compassionate behaviors of nurses. Smiling is significant in Iranian culture and provides a transfer of compassionate emotions from the nurse to the patient. A smile may change a stressful atmosphere and help the patient tolerate pain. The same study found that active listening motivates patients to express their feelings and develops a friendly relationship between nurse and patient. [30]

As is seen in these studies, compassionate care behaviors include a variety of approaches. Accordingly, compassionate care behaviors require establishing an emotional relationship and empathy by professionally putting the patient at the center of care with interest and self-sacrifice and meeting the relevant needs. Although the concept of compassion has been discussed much in recent years, the definition and evaluation of the behaviors representing compassion are not sufficient. The importance of behaviors in developing a compassion culture cannot be ignored; however, it is still unclear what exactly these behaviors are on the individual, team, and organization level. [7] Stating patient care dimensions including compassion is challenging because of the invisible nature of compassion. Thus, it is hard to define explicitly what compassionate care is. Healthcare professionals have their own definitions of the meaning of compassionate care in clinical practice. Thus, evaluation of the concept is subjective rather than objective. [14] In conclusion, there are still some uncertainties regarding the exact definition of providing compassionate care and ways of measuring it. Therefore, a better expression of information and processes that ensure providing compassionate care is an urgent need. Uncertainties regarding what compassion is and how it is seen or will be provided may lead to misunderstanding or even disappearance of compassionate care. [7,14]

**How Is Compassionate Care Measured?**

Compassionate care is an essential element of qualified service for several health institutions. Clinical measurements of the concept of compassion should be performed to develop clinical practice, increase the quality of care, and improve patient outcomes. However, a significant obstacle in the way of qualified care and increasing patient satisfaction is that compassion proven with valid measurement tools and mounting evidence do not have clinical standards. [11] In 2008, the Royal College of Nursing in England stated that compassion should be measured scientifically. Still, no valid measurement tool is available on this subject. It is hard to measure compassion. However, considering patient-centered compassionate care, a comprehensive measurement tool in practice and in educational institutions is not an option; it is an obligation. Compassion is defined as the main component of qualified care, which indicates the importance of the subject once again. [33]
There are some tools for measuring and evaluating compassion and compassionate care, which are based on clinician statements, patient statements, and institutions. These tools measure different aspects of compassion, and no measurement tool is comprehensively or methodologically enough for measurement. It is not possible to administer “one common approach” measuring compassion in health care because of the nature of the variety of health care, various skills used by healthcare providers in different disciplines, and different patients and families they encounter. Below are given the names of measurement tools developed with students, doctors, nurses, and patients in the healthcare field, and Turkish validity and reliability study was performed for only the Compassion Scale developed by Pommier (2011). Scales Based on Clinician Statements: Compassion Competence Scale. Scales Based on Individual/Patient Statements: Compassion Scale; Compassion Scale; Compassionate Care Assessment Tool (CCAT); Schwartz Center Compassionate Care Scale. Measurement of Institutional Support for Compassionate Care: Compassion Practices Scale.

Conclusion and Recommendations

Previous studies include various definitions for compassion, compassionate care, and compassionate care behaviors, which are not new in the nursing literature. Recently, there has been a growing interest in this subject. The number of studies conducted in parallel with this subject has also increased. However, no agreement/consensus has been reached regarding the definitions of these concepts. It is not easy, and it will not be easy to ensure this. It is hard to reach a consensus regarding the relevant concepts because several concepts are included, the concept of compassion has an “invisible” nature, and there are difficulties experienced during measurement and evaluation. In conclusion, future studies will answer the following questions: can compassionate care be defined, provided, and measured? Thus, future studies should prioritize understanding and explaining the concept of compassion, the essence of the profession. In addition, it is extremely important to define and evaluate compassionate care and behaviors representing compassion in future studies. For this, a comprehensive tool measuring and evaluating compassion and compassionate care is necessary. There is only one measurement tool measuring compassion and having Turkish validity and reliability. Therefore, developing a comprehensive measurement tool or tools for this subject is necessary.

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