Compassionate care: Benefits, barriers and recommendations

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Abstract
Compassionate care behavior requires understanding others' values, establishing relationships with them, and responding to them in meaningful ways. Compassionate care has important effects on patient care quality and is an indispensable element of patient-centered care. In recent years, studies of the effects of compassion on patients in clinical care have started to emerge. However, the literature reports that the effect of compassionate care on patient care has not been clearly defined nor has it been examined sufficiently. This review describes the benefits of compassionate care reported in the literature and example cases. It classifies the benefits of compassionate care as: positive effects on patient outcomes, improving nurses' understanding of involving patients and families in care, the ability to identify the needs of patients and families, and the ability to use appropriate approaches. Reviewing the factors that affect compassionate care positively or negatively is important in terms of guiding nursing practices. That is why this study also discusses the barriers to the provision of compassionate care related to work environment and individual factors and recommendations for compassionate care.

Keywords: Barriers; benefits; compassionate care; nursing; recommendations.

The literature includes various definitions of the concept of compassion. However, most of them involve the idea of understanding and reducing others' suffering. The concept of compassion, which has recently gained importance in the nursing literature has been described as a basic value in caregiving. Compassion has significant effects on the quality of care and is an essential element of patient-centered care. Compassionate care is characterized by nurses' establishing special bonds with patients. It involves more than just providing care because of a qualification within a care model or the professional obligations. Compassionate care has several benefits for patient care. However, Burnell (2009) found that the effects of compassionate care on patient care in clinical environments have neither been clearly defined nor have they been investigated sufficiently. Interest in compassion in caregiving has globally increased in recent years. In their systematic review, Sinclair et al. (2016b) found that approximately one-third of the relevant studies included patients.
Good nurses think compassionately, respect patients and are sincere with them. Compassion in nursing is not limited to showing empathy in tough situations that involve patients. It also includes strengthening patients with proper nursing care. Compassionate care requires responding to patient needs by understanding the physical, spiritual and emotional difficulties. Compassion is a very important component of the provision of high-quality nursing care. This review discusses the benefits of compassionate care using example cases. It also discusses barriers to the provision of compassionate care based on the literature and offers some recommendations for compassionate care.

Compassionate Care: Benefits

The literature does not include effective studies of compassionate care's benefits to patient care. No classification of this subject has been accepted, so the authors classify compassionate care's benefits in the sections below and discuss its benefits based on the current literature.

Improving Nurses' Understanding of Involving Patients and Families in Care

The patient-centered approach facilitates patients' and families' decision-making and reaching care goals by determining patients and relatives' values and preferences. Patients want to take part in decisions concerning their own health and to be included in their own care plans. Similarly, families also want to have a say in these decisions. Involving patients and families in care is one of the most important elements of compassionate care. Dewar (2011) found that it is important to stay informed on patients' care, to offer them choices regarding their care and to ask them what they think is important. Sharp et al. (2016) investigated patients' perceptions and evaluations of compassionate care and determined that patients defined compassionate care as a catalyst in their strengthening and involvement in their own care, which was their study's most significant finding. Sharp et al. (2016) found that, without compassionate care, patients would not participate in their own care and would only be passive recipients of nursing care. In another study that sought information about and recommendations for increasing the quality of care for complex regional pain syndrome, patients were asked to suggest how healthcare professionals might have more compassion for and provide compassionate care to them. Here are some of their suggestions:

- Always remember that the people you are caring for are human. Listen to them and have compassion for them.
- Please believe us and take us seriously. We know our bodies.
- Do not judge us. Just listen to us.
- Do not forget that this affects each part of our lives.
- Please be kind and ask before touching.
- Please believe in me when I say it hurts, and do not underestimate the level of the pain.
- Be aware that this disease is extremely painful and can cause loneliness.

Improving Nurses' Ability to Determine Patients' and Families' Needs and Use Appropriate Approaches

Two examples of compassionate care from Sharp et al. (2016) may help inspire nurses to determine the patients' needs and clarify how it contributes to proper nursing interventions. The first of these cases occurred when a young mother with newly diagnosed cancer came to the hospital for chemotherapy for the first time. "The patient and her family had fears regarding the disease. She felt how alone she was in her first visit to the hospital for treatment. She was walking in the corridor and crying. Just then, a nurse began her shift. The nurse did not walk away, but came to the patient instead of dropping off her bag and making coffee for herself. The nurse tried to relax the patient by putting her arms on the patient's shoulder. The patient said that 'The nurse did not have to do this. She could have just walked away.' The second example describes the same woman's first chemotherapy session: "The patient was trying to be brave and to communicate by looking as if she were strong; however, the nurse clearly saw how worried she was. The patient said, 'The nurse must have seen something. She leaned forward and whispered in my ear: 'It's okay. You will be fine. You can do this.'" This simple behavior had a profound and spiritual effect on the patient. She said, 'It really touched me—touched my soul—and it was incredibly significant.' Sharp et al. (2016) reported that these experiences indicate the importance of compassionate care and in both experiences, the nurse understood the patient's distress and took action to calm her with compassion.

In their review of measuring the compassion of nurses and other health professionals, Papadopoulos and Ali (2016) found that nurses pay attention to the "little significant actions that they see as part of their jobs;" These behaviors seem ordinary, but make a difference to patients and improve their experiences of care. They strengthen patients and show that nurses consider their needs.

Positive Effects on Patient Outcomes

Compassion helps nurses to establish therapeutic relationships with patients. Compassionate care involves empathy and effective communication, which have positive effects on patient outcomes. Studies have shown that effective communication between health professionals and patients has significant effects on the clinical outcomes of issues such as diabetes control, pain control and cancer patients' quality of life. Compassion also significantly increases patient satisfaction. Sharp et al. (2016) found that paying attention to patients’ individual needs, establishing patient-nurse relationships by providing compassionate care and trying to find
solutions by overcoming problems positively affect patients' experiences of care. Weaver (2007) found that, although being diagnosed with breast cancer and undergoing a mastectomy surgery is frightening and difficult, compassionate nursing care helps breast cancer patients to recover physically, emotionally and psychologically.

Compassionate Care: Barriers

Although compassionate nursing care is known to be important and valuable for nursing practice, there are factors that affect its planning, presentation and evaluation. In a study conducted with 800 patients in the U.S., all the patients said that compassionate care was important for the success of their treatments, but only 53% of them said that they had received compassionate care. Likewise, Sharp et al. (2016) found that patients did not always receive compassionate care and considered it to be a privilege.

The literature includes limited data regarding the factors that hinder compassionate care. The current data comes from qualitative studies and is not based on clear and strong evidence. The factors that hinder the provision of compassionate care are usually described as work environment and individual factors.

Work Environment Factors

A qualitative study found that many factors either ensure or hinder the provision of compassionate care to patients and families by intensive care nurses. In the study, procedural care understanding (such as not considering compassionate care as a real job, not considering it as primary in clinical care, inadequate time to establish a relationship with the patient, pressure sore-the necessity to discharge patients earlier) prevented the provision of compassionate care. Having difficult teammates, not having peer support, inadequate leadership, and institutional support were other preventive factors found in the same study.

Some factors hinder compassionate care, which are not being common understanding in patient care among the healthcare teams, conflicts, different philosophies, ambiguous treatment plans, various approaches and ideas in the practices (such as various approaches on patient care provided to patients about to die). The nurses also said that describing families as aggressive, difficult, preventive, rude or scary make compassionate care difficult.

Davison and Williams (2009)'s found that working conditions such as insufficient personnel, insufficient time and workload affect compassionate care negatively. Papadopoulos et al. (2017)'s found that institutional oppressions (such as hard protocols, procedures that turn nursing care into a control list, and all these things reduce the time a nurse allocated to patients and relatives) affect nurses' readiness to provide compassionate care and nurses want to be independent of the institutional barriers to the provision of compassionate care.

Individual Factors

Compassion requires emotional communication with people. One of the barriers to compassionate care is the worry that establishing such relationships will erode professionalism, or objectivity, which leads healthcare professionals to distance themselves emotionally from patients and families. A negative effect of helping people with trauma or pain, may hinder the provision of compassionate care by healthcare professionals.

Individual characteristics such as being prejudiced and not being accessible make compassionate care behaviors difficult. Besides, working without a break, working as fatigue and hungry for long hours cause physical fatigue, which is one of the individual factors that hinder compassionate care. In addition, nurse's experience, professional knowledge, and skill, perception of providing compassionate care are among the factors that negatively affect providing compassionate care.

Compassionate Care: Recommendations

Compassionate care has positive effects on patient care and employee satisfaction. It is important to encourage compassionate care in this sense. Considering the barriers mentioned above, it is not easy to provide compassionate care. There is an effort on revealing practices that increase compassionate care in the literature. Patient care requires a multidisciplinary team mentality, which is why team mentality is important for providing compassionate care. Mooney (2009) and Cornwall and Goodrich (2009) indicated the necessity of working with a multidisciplinary team to provide compassionate care. Within this context, recommendations made on behalf of the healthcare team or healthcare professionals definitely cover nurses, who are an important part of the team. Authors have made these recommendations that ensure providing compassionate care in accordance with the literature by classifying by the titles below.

Relational Care Understanding: Compassion is an interpersonal and a relational process that nurses can satisfy and gain energy. The institution should support nurses and focus on a relational care understanding for nurses to develop and constantly practice these skills. Institution managers’ giving importance to compassionate care in patient care will help compassionate nursing care to institutionalize. Creating a compassionate working environment may create a positive effect on the healthcare professionals’ commitment to their institutions and their ability to cope with workplace difficulties and discomforts.

One Important Point in Compassionate Care is: "Knowing who the patient is and what is important to the patient." This means working with patients, learning what is important to them individually and using this information during care. Mooney (2009) and Cornwall and Goodrich (2009) recommended using patients’ experiences to maximize compassion and shape service provision. A study of compas-
sionate care practices found that healthcare professionals can learn what is important to patients by establishing relationship with them even in areas with high patient intensity. Simply asking, “What is important to you right now?” to an emergency room patient can ensure that care is provided, establish a relationship, and determine information that may be important. What is important to you? Can you help me understand how to help you? What else can we do for you? Questions such as these help to establish relationships with patients and should be used in practice. Even if patients cannot answer these kinds of questions, asking them intriguing questions helps to initiate communication and establish relationships. "I am not sure that I could answer one of the questions very well, but it is good to be asked. Even if I cannot think of or give the answers, it lets you know that the staff want to know what you think."

**Feedback:** Receiving and providing feedback is an important way to help healthcare personnel understand compassionate care. It helps healthcare employees to consider compassionate care as part of their job and to recognize the good things they do even when others do not observe them. Receiving and providing feedback shows how care can be made better, offers opportunities to celebrate successes and reinforces practices that lead to positive outcomes. A qualitative study examined the factors in intensive care unit nurses’ compassionate care for patients and families and found that, when nurses provide compassionate care, their colleagues’ verbal recognition of their compassionate behavior is a factor that encourages compassionate care. 

**Engaging in Caring Conversation as a Team:** Healthcare teams’ caring conversations while providing compassionate care help them to gain insight regarding patients and to understand what is important to patients and what are their preferences. It offers teams opportunities to see the points that the decisions get difficult or more complicated to learn what works (and why or why not) and to share. Conversations about patient care are quite important, and healthcare professionals care about them. They care these conversations, need not be time consuming, and they can use the information they learn in their daily tasks. For example, nurses can have these conversations during shift changes and share their experiences of care practices.

**Good Communication and Teamwork:** A supportive leadership as a role model and a collaborative team is important for creating a good environment for providing compassionate care. A qualitative study of the factors that lead intensive care unit nurses to provide compassionate care to patients and families found that a good team leader support (such as a good workplace role models, managers’ understanding and support) is important for compassionate care. Another study found that vocational socialization and nurse mentorship focused on how less experienced nurses can become compassionate nurses, which played significant roles in making it easier to learn compassionate care. A team mentality, having support (supporting each other in patient care, treatment plans, etc.) and being able to ask questions without fear of judgment and creating an environment where teamwork is embraced are also factors that increase compassionate care. Having a common understanding (well-planned treatments, good communication between doctors and nurses) and a positive, healthy, and friendly relationship with patients and families develop compassionate care. The same study also noted the importance of interpersonal relationship, especially teamwork in the nursing practices, for the provision of compassionate care.

**Self-Awareness Practices:** It may not be easy for healthcare professionals to be aware of their compassion and to be un-prejudiced in their busy work environments. Christensen (2015) claimed that compassionate care is a behavior that can be learned and compares it to “learning to play the piano.” Christensen (2015) explained: “We need to be aware that it is necessary to spend time and energy for deepening the emotion of compassion. This will also help us realize when we feel smothered while coping with the pain around us.” Christensen (2015) listed these recommendations to provide compassionate care:

- Begin the day with awareness exercises that make you aware of the now and the present such as silence, yoga, meditation or breathing exercises. This forms a basis for the development of resilience, which will develop later.
- Be aware of the events in your life that make you say, “Thankfully, I am a nurse, and this is my job.”
- You are not responsible for what happens to your patients or their pain. You have not given them cancer, and if their treatment does not go as anticipated, your primary mission will again be being compassionate, helping and just being there.
- Leave work at work. Learn to distinguish your leisure time and professional life.
- When leaving one patient for another, focus all your attention and compassion on the new one. Simply breathing or walking can help you to renew your compassion emotion and focus your interest when switching patients.

**Conclusion**

The literature indicates that compassionate care has positive effects on patient care. There has been an increase in the number of studies of how compassionate care practices affect patient experiences and the nature of these positive effects; however, this subject has not been clearly defined or adequately investigated. Workplace and individual factors also affect compassionate nursing care negatively even though they are known to be quite significant and valuable. As a result, research on how compassionate care affects patients should be a priority of future studies. The workplace or individual factors that hinder compassionate care should be comprehensively determined by new studies and avoided in nursing practice.
Finally, institutions should care, value, and support compassionate care, which is an important aspect of healthcare professionals’ giving compassionate care.

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**References**