



## Enhancing Compassionate Care: Current Need & Process

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### ABSTRACT

Compassion is essential in providing good nursing care because the compassionate care benefits patients with regard to treatment, wound healing, satisfaction and well-being; it benefits physicians with regard to lowered depression rates, elevated meaning, lower burnout, and more diligent technical care; it benefits healthcare systems that establish reputational gains at no greater use of time or resources; it benefits medical students with regard to their diminished complaints of abusive clinical environments and maladaptive team interactions. Thus the compassionate care has many dimensions of beneficial impact.

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### Introduction

The practice of nursing is grounded in clinical competence, and is also deeply embedded in the experience of compassion based relationships. In the world of Western medicine, however, nurses can suffer profound challenges to compassion. A deficit of compassion might be relevant to the nursing experience, affecting nurse well-being, patient and family satisfaction, frequency of nursing errors, and the retention of nurses in their vocation. From this point of view, skilful training of nurses in compassion is of increasing importance today, given the impact of technological medicine, work overload, staff shortages and conflicts, and institutional demands on the nursing experience (Chang E.M. et al, 2005).

Compassion is a cornerstone of Tibetan Buddhism. Lama D. (2001) describes genuine compassion as a clear acceptance or recognition that everyone wants to be happy. Therefore, people develop concern or compassion for the welfare and well-being of others. Compassion includes a non-judgmental approach in responding to failure or mistakes. Compassion is defined as the way in which we relate to human beings. It can be nurtured and supported. It involves noticing another person's vulnerability, experiencing an emotional reaction to this and acting in some way with them, in a way that is meaningful for people. It is defined by the people who give and receive it, and therefore interpersonal processes that capture what it means to people are an important element of its promotion. Compassion has been more simply defined as "the emotion one experiences when feeling concern for another's suffering and desiring to enhance that person's welfare". From this point of view, compassion is considered to have two main valences: the affective feeling of caring for one who is suffering, and the motivation to relieve that suffering. (Hofmann S.G. et al, 2011).

Compassion is considered to be the capacity to attend to the experience of others, to feel concern for others, to sense what will serve others, and potentially to be able to be of

service. Compassion has been more simply defined as "the emotion one experiences when feeling concern for another's suffering and desiring to enhance that person's welfare". From this point of view, compassion is considered to have two main valences: the affective feeling of caring for one who is suffering and the motivation to relieve that suffering (Hofmann S.G. et al, 2011). Compassion is a fundamental part of nursing care. Individually, nurses have a duty of care to show compassion; an absence can lead to patients feeling devalued and lacking in emotional support (Bramley L. and Matiti M., 2014).

Compassion is a popular concept in nursing. Compassion is essential to providing good nursing care. Compassion empowers nurses to assume a major role in solving and preventing problems that will afflict the global community (Schantz M.L. 2007). Becoming a compassionate nurse benefits the client, the nurse, and the practice of nursing. When we respond in a compassionate way while rendering care, it improves the overall welfare of those entrusted to us.

Compassion is a fundamental part of nursing care. Individually, nurses have a duty of care to show compassion; an absence can lead to patients feeling devalued and lacking in emotional support. Compassion is viewed as nursing's most precious asset. Those who are ill usually feel that it is essential that they are not only "cared for" but also "cared about". One could surmise that curing without being able to offer care creates suffering not just for patients, but for nurses as well (Johnson M., 2008). Nursing education play major role in developing nurses knowledge and skills that will help nurses to provide compassionate care. This view is echoed by the World Health Organisation, who agrees that a good nurse has compassion, a quality that needs to be nurtured (Chan M., 2010).

### Need for providing Compassionate care

There is a need to address and evaluate how compassion can become an integral part of nursing care (Firth- Cozens J. & Cornwell J., 2009), and there should be an increased focus

on a culture of compassion at all levels in nursing education, training and recruitment (Francis R., 2013). Designing and implementing education strategies to meet the challenge of ensuring that nursing care is delivered with compassion is a priority.

Compassion is essential in providing good nursing care because the compassionate care benefits patients with regard to elected treatment adherence, wound healing, satisfaction and well-being; it benefits physicians with regard to lowered depression rates, elevated meaning, lower burnout, and more diligent technical care; it benefits healthcare systems that establish reputational gains at no greater use of time or resources; it benefits medical students with regard to their diminished complaints of abusive clinical environments and maladaptive team interactions. Thus the compassionate care has many dimensions of beneficial impact (Stephen G., 2011).

It is very important for the nurses to become compassionate in providing quality nursing care. Compassion helps the nurses in problem solving and decision making in different dealings with the patient care. Becoming a compassionate nurse benefits the client, the nurse and the practice of nursing. If the nurse responds in a compassionate way in providing care to the patients then this compassionate approach improves the overall welfare of the patients, patients' relatives and the health team members (Terry M. and Leary M., 2011).

Treating oneself with care and compassion is a powerful way to enhance intrapersonal and interpersonal wellbeing. When we are mindful of our suffering and respond with kindness, remembering that suffering is part of the shared human condition, we are able to cope with life's struggles with greater ease. We create a loving, connected, and balanced state of mind and heart that helps to reduce psychopathology while simultaneously enhancing joy and meaning in life. Self-compassion is a portable source of friendship and support that is available when we need it most – when we fail, make mistakes, or struggle in life (Lee Y. & Seomun G., 2016).

The evidence shows that compassion is in the beliefs and values of the individual's care – it is seen in small things that make a big difference to patient comfort. It makes patients feel cared for. Compassionate role models can energise staff and enhance others' ability to be compassionate (Chellel.A, 2013).

Patient experiences deficient in basic nursing care especially compassionate care. To improve nursing practice, it is important to identify what compassion is from the patients' perspective. Knowing what patients perceive compassion to be would greatly assist in the provision of compassionate care in practice (Francis R., 2013). Nurses should provide care based on patients individual needs. Knowing and involving patients and carers in their care is crucial to improve quality and for patients who are too ill or cannot articulate (Bramley L. and Matiti M., 2014).

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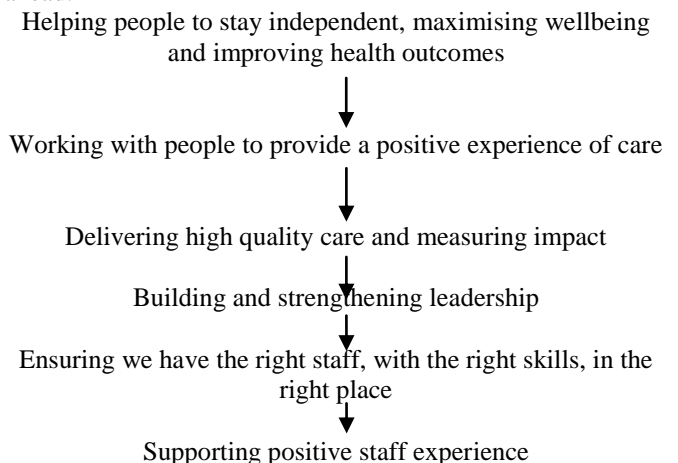
#### Developing compassionate care approach

Crocker J. & Canevello A. (2008) suggested that to develop universal compassion, compassion for everyone, including those who have been harmful, one practices compassion, heals negativity, and meditates.

Practicing compassion is grounded in the awareness of commonality or recognizing a common humanity in one another. For example, when one practices compassion, one's own happiness is enhanced. However, negativity is an obstacle to developing compassion. Therefore, it is important to heal by developing an awareness of greed, anger, delusion, and other negativities, rooting out these emotions and replacing them with compassion. Meditation is an avenue to assist with healing negativity and developing compassion. Meditation cultivates a mindfulness or awareness in all that one does. The development of compassion not only transforms individuals, but also has the potential to transform society through universal responsibility, or the belief that all are interconnected and therefore responsible for one another. Thus as an approach to life, it is prudent for all humans to cultivate and practice compassion.

#### 6C process model for enhancing Compassionate care:

1. Care: is our core business and that of our organisations and the care we deliver helps the individual person and improves the health of the whole community. Caring defines us and our work. People receiving care expect it to be right for them, consistently, throughout every stage of their life.
2. Compassion: is how care is given through relationships based on empathy, respect and dignity – it can also be described as intelligent kindness, and is central to how people perceive their care.
3. Competence: means all those in caring roles must have the ability to understand an individual's health and social needs and the expertise, clinical and technical knowledge to deliver effective care and treatments based on research and evidence.
4. Communication: is central to successful caring relationships and to effective team working. Listening is as important as what we say and do and essential for 'no decision about me without me'. Communication is the key to a good workplace with benefits for those in our care and staff alike.
5. Courage: enables us to do the right thing for the people we care for, to speak up when we have concerns and to have the personal strength and vision to innovate and to embrace new ways of working.
6. Commitment: to our patients and populations is a cornerstone of what we do. We need to build on our commitment to improve the care and experience of our patients, to take action to make this vision and strategy a reality for all and meet the health, care and support challenges ahead.



#### Benefits of Compassionate care

Crocker J. & Canevello A. (2008) in a recent study suggest that compassionate goals may be associated with a

host of positive outcomes such as improved social bonds, enhanced well-being, feeling less lonely, depressed, and anxious. Compassion may be associated with a variety of positive psychological outcomes such as happiness, improved social relationships, and may be protective against a host of negative emotions such as anxiety, fear, and anger (Beaumont E. et al. 2016).

Within psychotherapy, it may be useful as a positive context for clinical work in both individual and group therapy, promote better interpersonal and intrapersonal functioning, and may be of particular use with the treatment of depression and compassion fatigue (Leaviss J. & Uttley L. 2015).

Compassion is considered valuable in the medical profession as an ethical principle, a protection for the right of patients, and an important quality that patients seek in their service providers. In education, it serves an important function for teachers to provide a good learning environment and for students to learn emotional coping strategies. Finally, for families, it is a way for parents to build relationships with their children and teach compassion as a skill that could be passed on to others as a means to transform society (McClelland L.E. & Vogus T.J. 2014).

Thus, research increasingly shows that treating oneself with care and compassion is a powerful way to enhance intrapersonal and interpersonal wellbeing. When we are mindful of our suffering and respond with kindness, remembering that suffering is part of the shared human condition, we are able to cope with life's struggles with greater ease. We create a loving, connected, and balanced state of mind and heart that helps to reduce psychopathology while simultaneously enhancing joy and meaning in life. Self-compassion is a portable source of friendship and support that is available when we need it most – when we fail, make mistakes, or struggle in life.

#### References:

1. Beaumont E., Irons C., Rayner G., Dagnall N. (2016). Does Compassion-Focused Therapy Training for Health Care Educators and Providers Increase Self-Compassion and Reduce Self-Persecution and Self-Criticism? *Journal of Continue Education Health Profession*, 36(1):4-10.
2. Bramley L. and Matiti M. (2014). How does it really feel to be in my shoes? Patients' experiences of compassion within nursing care and their perceptions of developing compassionate nurses. *Journal of Clinical Nursing*, 23:2790–99.
3. Bramley L. and Matiti M. (2014). How does it really feel to be in my shoes? Patients' experiences of compassion within

nursing care and their perceptions of developing compassionate nurses. *Journal of Clinical Nursing*, 23:2790–99.

4. Chan M. (2010) Reforming the Education of Physicians, Nurses, and Midwives [Online]. World Health Organisation. Available at: [http://www.who.int/dg/speeches/2010/medical\\_ed\\_20101214/en/](http://www.who.int/dg/speeches/2010/medical_ed_20101214/en/) (accessed 22 July 2013)
5. Chang E. M., Hancock K. M., Johnson A., Daly J. & Jackson D. (2005). Role stress in nurses: review of related factors and strategies for moving forward. *Nursing & Health Sciences*, 7(1): 57-65.
6. Crocker J. & Canevello A. (2008). Creating and Undermining Social in Communal Relationships: The Role of Compassionate and Self-Image Goals. *Journal of Personality and Social Psychology*, 95(3): 555-75.
7. Firth-Cozens J. & Cornwell J. (2009) *The Point of Care, Enabling Compassionate Care in Acute Hospital Settings*. The Kings Fund, London
8. Francis R. (2013) *Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry*. The Stationary Office, London.
9. Hofmann S. G., Sawyer A. T., Witt A. A. & Oh D. (2010). The Effect of Mindfulness-Based Therapy on Anxiety and Depression: A Meta-Analytic Review. *Journal of Consulting and Clinical Psychology*, 78 (2): 169–83.
10. Johnson M. (2008). Can compassion be taught? *Nursing Standard*, 23: 11, 19-21.
11. Lama D. (2001). *An open heart: Practicing compassion in everyday life*. Boston: Little Brown and Co.
12. Leaviss J. & Uttley L. (2015). Psychotherapeutic Benefits of Compassion-Focused Therapy: An Early Systematic Review. *Psychology Medicine*, 45(5): 927-45.
13. Lee Y. and Seomun G. (2016). Compassion Competence in Nurses. *Advance Nursing Science*, 39(2): 54-6.
14. McClelland L.E. & Vogus T.J. (2014). Compassion Practices and HCAHPS: Does Rewarding And Supporting Workplace Compassion Influence Patient Perceptions? *Health Service Res*, 49 (5): 1670-83.
15. Schantz M. L. (2007). Compassion: A concept Analysis. *Nursing Forum*, 42(2): 48–5.
16. Stephen G. (2011). Compassionate care enhancement: benefits and outcomes. *The International Journal of Person Centered Medicine*, 1(4): 808-13.
17. Terry M. & Leary M. (2011). Self-compassion, self-regulation, and health. *Self and Identity*, 10(3): 352-362.