

# THE PREVALENCE AND INFLUENCING FACTORS FOR COMPASSION FATIGUE AMONG NURSES IN HOSPITAL KUALA LUMPUR: A CROSS-SECTIONAL STUDY



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## **INTRODUCTION AND OBJECTIVE**

Nursing is a caring profession where compassion is their core value. They may experience compassion fatigue (CF) when providing patient care, which affects their well-being and job performance. Eventually, this may have implications for the quality of care. Understanding the level of CF of the nurses and the associating factors will allow the hospital's managerial level to know their mental health status, and the finding may be helpful in planning strategies and interventions to reduce the burden of the problem.

This study aimed to determine the level of CF and their associating factors among nurses in Hospital Kuala Lumpur (HKL).

### MATERIALS AND METHODS

Study design	Cross-sectional Study

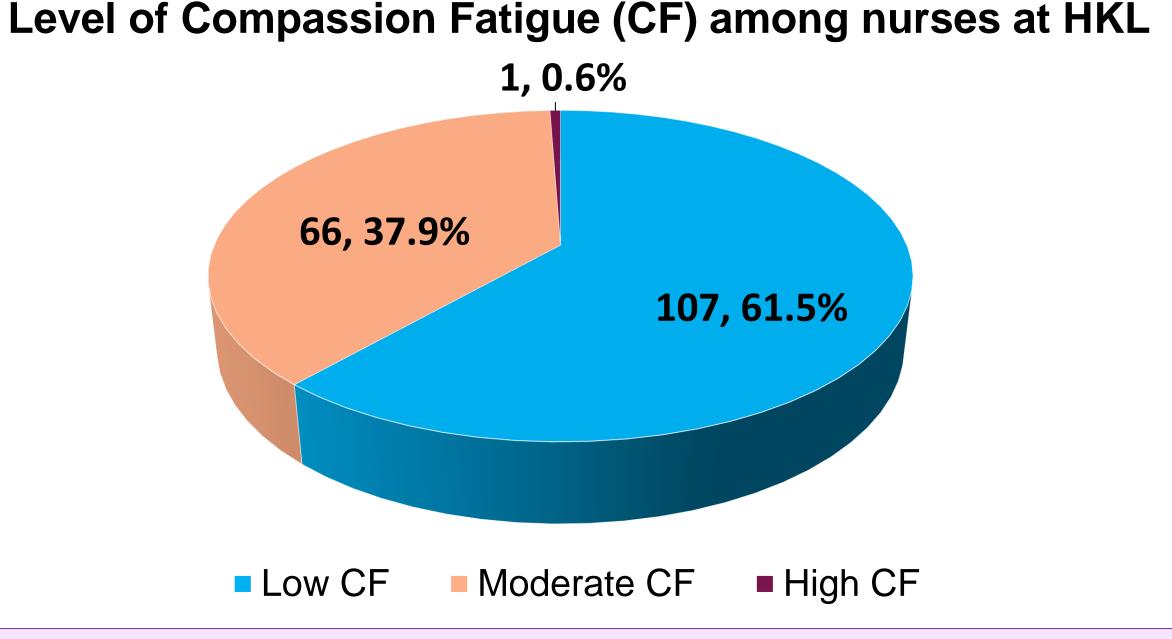


Figure 1: Level of compassion fatigue among nurses at Hospital Kuala Lumpur (HKL)

Study location	Hospital Kuala Lumpur				
Study duration	April 2022 to September 2022				
Study population	Inclusion criteria:      Fully trained nurses who had served for at least 6 months      Able to read and write in English or Malay      Exclusion criteria:      Nurse with pre-existing psychiatric illnesses (Self-report)				
Sampling technique	Universal sampling				
Instrument	Malay version of the Professional Quality of Life Scale (ProQOL-M)				
Data collection	Online survey to all nurses in the hospital through their "Whatsapp" groups				
Data analysis	Descriptive statistics Univariate analysis (linear regression), significant level <0.05 (SPSS 24)				
RESULTS					
Table 1: Demographic characteristics of the participants					
n (%)					
Age (Median (IQR)) 33.00 (10.0)					
Gender					

Table 2: Factors associated with compassion fatigue mean score among nurses inHospital Kuala Lumpur using univariate analysis (linear regression)

Characteristic	<b>CF Mean Score</b> β (95% CI)	P value		
Age	- 0.024(-0.036 to -0.013)	<0.001		
Gender				
Female	- 0.0239(-0.600 to 0.122)	0.194		
Male	Ref			
Ethnicity				
Malay	0.317 (0.026 to 0.608)	0.033		
Non-Malay	Ref			
Marital Status				
Married	- 0.087(-0.303 to 0.129)	0.429		
Unmarried	Ref			
Dependent (Children)				
Yes	0.233 ( 0.043 to 0.423 )	0.017		
No	Ref			
Life stress experience (past 12 month)				
No	- 0.242(-0.426 to -0.058)	0.010		
Yes	Ref			
Nursing education				
Post-basic diploma (Nursing specialty) and above	- 0.177 ( -0.364 to 0.010)	0.063		
Diploma in Nursing	Ref			
Years of experience				
> 5 years ≤ 5 years	- 0.301(-0.499 to -0.103) Ref	0.003		
Position				
Nursing manager Staff nurse	- 0.435(-0.715 to -0.154) Ref	0.003		
Shift				
No	- 0.361(-0.557 to -0.165)	<0.001		
Yes	Ref			
Care for COVID patient				
Yes	- 0.276(-0.468 to -0.085)	0.005		
No	Ref			
β: Beta coefficients, CF: Compassion fatigue, Ref: reference				

Female	162 (93.1)			
Male	12 (6.9)			
Ethnicity				
Malay	155 (89.1)			
Chinese	3 (1.7)			
Indian	8 (4.6)			
Others	8 (4.6)			
Marital status				
Single	38 (21.8)			
Married	133 (76.4)			
Divorced	2 (1.1)			
Widowed	1 (0.6)			
Dependent (Children)				
Yes	114 (65.5)			
No	60 (34.5)			
Life stress experience (past 12 month)				
Yes	70 (40.2)			
No	104 (59.8)			
Nursing education				
Diploma in nursing	107 (61.5)			
Post-basic diploma (Nursing specialty)	52 (29.9)			
Bachelor Degree in Nursing	15 (8.6)			
Years of experience				
< 6 months	3 (1.7)			
6 months to 1 year	7 (4.0)			
1 to 5 years	40 (23.0)			
6 to 10 years	42 (24.1)			
> 10 years	82 (47.1)			
Position				
Staff nurse	154 (88.5)			
Nursing manager	20 (11.5)			
Shift				
Yes	124 (71.3)			
No	50 (28.7)			
Care for COVID patient				
Yes	117 (67.2)			
No	57 (32.8)			
IQR: interquartile range				
ACKNOWLEDGEMENT				

#### DISCUSSION

- The finding of the level of CF differs from the result from the systematic review by W. Q. Xie et al. (2021) and Cavanagh et al. (2019), which mentioned that the levels of CF among nurses were moderate and Asian region had the highest levels of CF symptoms
- The difference in the finding probably due to cultural (Carrera et al., 2020; Gopalkrishnan, 2018; Sarkar & Punnoose, 2017) and social (Healey & Stepnick, 2019) diversity across geographic regions (Kirmayer, 2019).
- There could be response bias, acquiescence bias and social-desirability bias.
- The factors associated with CF were consistent with the finding from the systematic review by

We would like to thank the Director General of Health for his permission to present this study. We appreciate the help of all the experts for their valuable suggestions. Acknowledgements to all staff nurses in Hospital Kuala Lumpur on the success of this research.

Zhang et al., 2018.

• There is a relationship between dependent (children) and CF, probably due to work-family conflict as female workers have to fulfil family household responsibilities and bear workplace pressure.



One-third of nurses in HKL experienced moderate levels of CF. Various factors contributed to CF. The hospital administrators need to explore and plan strategies to improve the working environment and safeguard the mental health of nurses in the hospital. In turn, this will improve the quality of patient care.

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