Burnout in palliative care in nursing: A literature review

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Abstract

Objective: Palliative care in nursing is an area of nursing that is constantly dealing with cases of death and suffering. Nurses who work in the palliative care have experienced burnouts. Burnout is associated with feelings of hopelessness and difficulties in dealing with work or in doing the job effectively. Therefore, it is important to explore burnout prevention strategies in the palliative nursing care.

Methods: This study is a systematic literature review using a simplified approach. Four previous research reports in the palliative area were synthesized.

Results: Two main themes related to burnout prevention strategies emerged: the defense mechanisms and coping strategy.

Conclusion: Health care workers especially nurses in palliative units have burnout prevention strategies comprising the defense mechanisms and coping strategy. Adequate strategies will enable nurses with high levels of burnout, job stress, and depressive symptoms to combat the symptoms. It is noted that there is a need for further research regarding burnout prevention study in palliative nursing care to test the effectiveness of the burnout prevention strategies.

Keywords: Burnout, Coping Strategy, Defence Mechanisms, Literature Review, Palliative in Nursing

Introduction

Potter and Perry states "Nursing is an art and science, whereas a professional nurse provides care with compassion, concern, and respect for the dignity of patients and is a science that is constantly changing as new discoveries and innovation" (p. 2). It is in the world of nursing itself, while in providing services as duties can allow a nurse to experience burnout. Burnout is associated with feelings of hopelessness and difficulty handling the work or to do the job effectively. Burnout occurs because of the feeling that one's efforts to make a difference or it can be associated with a very high workload or work environment that is not supportive does not support.

Nurse or another member of the healthcare team may be suffering from stress, depression, and confusion because it had identified a moral issue given but did not succeed in completing it. At this stage, it can result in emotional turbulence, doubt, anger, criticism, despair, exceptional taste and cause helplessness. If not resolved, this issue can lead to burnout and nurses will be out of work.

Burnout studies have already been carried out in several countries, within the field of nursing (emergencies, medical-surgical, outpatient, oncology, pediatrics) that experiences burnout, with no exception in the field of palliative nursing. Palliative nursing is facing unique challenges as it relates to suffering and death. In this case of palliative care has the potential to experience burnout. Burnout experienced by a nurse will affect the services provided. In areas of Indonesia, palliative care already exists in the case of dealing with cancer patients that are in Dharmais Hospital and HIV disease who are in Jakarta, Rachel House. This situation also shows that health care workers especially nurses who handle the case of palliative care in Indonesia tend to suffer burnout. At this time, there is a need of a strategy for the prevention of burnout. This strategy creates an optimal care to palliative patients and can maintain the physical health of nurses themselves. Based on the discussion above, it is important to examine the strategy of prevention of burnout in nursing.

Methods

This study used a Systematic literature review (Aveyard, 2010). A systematic literature review is a systematic review of the literature referred to as the original empirical research for reviewing the primary data, which can be quantitative or qualitative. A systematic review is
a very useful summary of the available evidence. For the review, two databases (EBSCO and ProQuest) were searched using 11 keywords including burnout, strategy management burnout, stress management, strategy to avoiding burnout, strategy to prevent burnout, symptom distress, coping stress, palliative care, palliative care in nursing, palliative nursing and hospice nurse. The Boolean operators were further used such as the using of AND in the search articles. Search articles were determined by the inclusion and exclusion criteria. The inclusion criteria of this study were:
1. Articles published from the year 2007 to 2016,
2. Empirical study of burnout in nurses,
3. The published article was written in English,
4. The article in full text,
5. Quantitative articles
6. Peer reviewed article.
The exclusion criteria of this study were:
1. The article does not refer to palliative nursing,
2. Duplicate article.
After finding the article, a critical appraisal using a sheet by The Joanna Briggs Institute was conducted. Then, a thematic analysis was done using a simplified approach was further implemented. Thematic analysis of a simplified approach is a method of summarizing the literature suitable for the process of outlining a new literature review.

### Results and Discussion

The prism flow chart in the following illustrates the results of the search articles (see figure 1). Four articles were decided to be included in the research in which the articles discussed the strategy for the prevention of burnout in palliative nursing. The authors of the articles are Carter, Dyer, and Mikan, Fillion, Duval, Dumont, Gagnon, Tremblay, Bairati, and Breitbart, Koh, Chong, Neo, Ong, Y, Yong, Ong, Shen and Yin May Hum and Timmermann, Naziri and Etienne. Carter et al applied a descriptive correlational study the research. Fillion et al. conducted a study using a randomized waiting list. Koh et al. conducted a study using cross-sectional study design. Moreover, Timmermann et al. applied a quantitative and qualitative research designs.

Four articles revealed how nurses in palliative settings pursued a strategy in the prevention of burnout. The most commonly discussed concerning burnout prevention strategies were coping strategy. Additionally, other strategy discussed in the article by Timmermann et al. was a defense mechanisms. The summary of the four articles can be seen in Table 1.

<table>
<thead>
<tr>
<th>Theme</th>
<th>Sub theme</th>
</tr>
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<tbody>
<tr>
<td>Defence</td>
<td>Maturity</td>
</tr>
<tr>
<td>Coping Strategy</td>
<td>Problem-focused coping</td>
</tr>
<tr>
<td>Strategy</td>
<td>Emotion-focused coping</td>
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### Defense Mechanisms

Timmermann et al., revealed that palliative caregivers (nurses) applied some mature defense mechanisms, such as humor, altruism and affiliation to improve physical wellbeing and actual palliative attitude. The study also observed other mechanisms such as mental barriers and compromise, narcissistic, denial distortion, and excessive action.

Similarly, in the study by Deernram et al, it shows that there was a specific relationship between the groups before and after intervention for their mature defense mechanisms against stress faced by nursing students.

### Coping Strategy

In the palliative care settings, there were many coping strategy to deal with burnout occurrences. The study by Timmermann et al. revealed that the coping strategies includes coping control and seeking social support.
Additionally, some strategies such as emotion-focused coping, problem-focused coping, and acceptance were regularly used. Some significant interventions regarding coping strategy covers the practice of physical activities regularly, take the regular 20-minute break, meditation, breathing exercises, and to keep a journal. However, those strategies have no effect on the satisfaction and quality of life. In a study by Koh et al. shows that nurses who have a coping mechanism seems to have lower incidence of burnout and physical morbidity. Moreover, it was found that coping mechanisms such as physical wellbeing, clinical variety, presence of hobbies, meditation, reflection, passion for work, has realistic expectations, and have consideration to the patient may result in the prevention of burnout.

Similarly, Kravits, McAllister-Black, and Kirk revealed the psycho-education program to help nurses in stress management. The program is a coping strategy in which the strategy is a way to practice the relaxation techniques, and exploration through art that can be used and may lower the levels of burnout in nurses. Another study by Chang and Chan (2015) mentioned that some coping strategies such as proactive coping behaviors and optimism might address burnout and effectively used in the management of stress in nurses.

Conclusions

This literature review revealed that nurses in the palliative care unit had what against burnout. The prevention strategy is a proper management that includes the defense mechanisms and coping strategy to reduce the levels of burnout, job stress, and depressive symptoms.

More future studies are expected in burnout within the scope of palliative nursing especially in Indonesia. Thus, in this case, a nurse can know how to respond to the burnout occurrence in their working environment.

References

**TABLE 1. Summary of the articles**

<table>
<thead>
<tr>
<th>Authors</th>
<th>Concept</th>
<th>Method</th>
<th>Instrument/s</th>
<th>Population &amp; sample</th>
<th>Aim of the study</th>
<th>Main Findings</th>
<th>Strength</th>
<th>Weakness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carter, P.A., Dyer, K.A., dan Mikan, S.Q.</td>
<td>Sleep Disturbance, Chronic Stress, and Depression</td>
<td>Correlational Descriptive</td>
<td>Pittsburgh Sleep Quality Index (PSQI), Center for Epidemiological Studies–Depression (CES-D) scale.</td>
<td>9 agency nurses providing direct patient and family care.</td>
<td>To test the feasibility of a cognitive-behavioral therapy for an insomnia (CBT-I) intervention in chronically bereaved hospice nurses.</td>
<td>Participants reported moderate-to-severe sleep disturbances and moderate depressive symptoms. The CBT-I intervention was well accepted by the participants, and on-site delivery increased participation.</td>
<td>This study used a random sample in accordance with the inclusion criteria because used of intervention. This study also uses precise measurements.</td>
<td>This study did not use the intervention group and not intervention group. This study describes the status of the sample less like their withdraw from the sample.</td>
</tr>
<tr>
<td>Fillion, L., Duval, S., Dumont, S., Gagnon, P., Tremblay, I., Bairati, I &amp; Breibart, W. S.</td>
<td>job satisfaction and on quality of life</td>
<td>Randomized waiting-list</td>
<td>Assessment of Chronic Illness Therapy (FACIT-Sp), Vigour/Activity subscale (six items) of the Shortened Profile of Mood States (POMS-37)</td>
<td>intervention group (n=556) versus waiting list group (n=553)</td>
<td>The objective of this study was to test its efficiency to improve job satisfaction and quality of life in PC nurses from three regional districts in Quebec Province, Canada.</td>
<td>The PC nurses in the experimental group reported more perceived benefits of working in PC after the intervention and at follow-up. Spiritual and emotional quality of life remained, however, unaffected by the intervention.</td>
<td>This study used a random sample of interventions conformed to the existing inclusion criteria, here too there is no distinction of the sample group, and the measure used was appropriate.</td>
<td>This study describes the status of the sample less like their withdraw from the sample.</td>
</tr>
<tr>
<td>Koh, M.Y.H., Chong, P.H., Neo, P.S.H., Ong, Y.J., Yong, W.C., Ong, W.Y., Shen, M.L.J., dan Yin Mei Hum, A.Y.M.</td>
<td>Burnout</td>
<td>Cross sectional study</td>
<td>Maslach Burnout Inventory–Human Services Survey (MBI-HSS), General Health Questionnaire (GHQ-12)</td>
<td>n = 273</td>
<td>We aimed to study the prevalence of burnout and psychological morbidity among palliative care practitioners in Singapore and its associations with demographic and workplace factors as well as the use of coping mechanisms.</td>
<td>The prevalence of burnout among respondents in our study was 91 of 273 (33.3%)</td>
<td>Studies using random samples in accordance with the inclusion criteria. This study also uses precise measurements and statistical analysis.</td>
<td>This study only describes the results and did not provide intervention, but in this penlitian less explained on participants who withdrew from the study.</td>
</tr>
<tr>
<td>Timmermann, M., Naziri., dan Etienne, A.M.</td>
<td>Defence mechanisms and coping Strategies</td>
<td>Quantitative and qualitative design</td>
<td>Semi structured interview, Thematic Apperception Test (TAT), Defence Style Questionnaire-60 (DSQ-60), COPE, Ways of Coping Questionner (WCQ)</td>
<td>n = 18</td>
<td>This article focuses on the relationship between defence mechanisms, coping strategies, palliative attitude, and the well-being of caregivers in palliative care units, who are comforted with death, suffering, and pain.</td>
<td>This study shows positive relationship between diiferent defence mechanisms and coping strategies, palliative attitudes, and caregivers’ well being.</td>
<td>This study had a randomized sample and adjusted to the inclusion criteria, measurements which measured in this study also uses a measurement can be trusted.</td>
<td>This study only describes the results and did not provide intervention, but in this penlitian less explained on participants who withdrew from the study.</td>
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