

UC San Diego

Summer 2014 - UC San Diego Health Journal of Nursing: The Unique Power of Nursing

Title

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<https://escholarship.org/uc/item/737241hw>

Journal

UC San Diego Health Journal of Nursing, 7(1)

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Publication Date

2014-07-01

Peer reviewed

Hoop Dancing for Nurses to Prevent and Decrease Burnout and Compassion Fatigue

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Think for a moment, about life without play. Dr. Stuart Brown, President of the National Institute for Play, asserts that the opposite of play is not work, it is depression, stating that play is vital to our survival (Brown, 2008). Nurses are experiencing an extremely turbulent time in their field. Factors contributing to this turbulence include the economic challenges of balancing regulatory and fiscal realities, adapting to new business models, working with fewer resources, and responding to increased demands to continue to deliver high quality healthcare to more and more people at lower costs (Ohio Nurses Association, 2011). Nurses who provide direct patient care are experiencing the strain of these challenges, which place them at an increased risk of developing burnout and/or compassion fatigue. Body play through the form of hoop dancing as movement meditation, is an intervention that may help to prevent or decrease compassion fatigue and burnout.

Caring has been described as “the cornerstone of nursing” or the foundation of nursing (Ohio Nurses Association, 2011, p. 5). Nurses provide safe, holistic, compassionate, physical, psychological, emotional, and spiritual care to multiple patients at one time. As a result, nurses bear witness to an enormous amount of patients’ physical, emotional, and spiritual suffering. Thus, the essence of nursing care constantly exposes nurses to suffering (Ferrell and Coyle, 2008).

Currently, there are 2.6 million nurses employed throughout the United States (U.S.) (American Nurses Association, 2011). Burnout is a prolonged response to chronic job-related emotional and interpersonal stressors, characterized by emotional

exhaustion, depersonalization, and lack of perceived personal accomplishment (Sabo, 2006). Burnout is caused by cumulative distress from daily life that includes physical, emotional, and mental exhaustion and a decreasing ability to cope with one’s work environment (Maslach, Schaufell, & Leiter, 1982). The symptoms of burnout include (a) irritability, (b) impaired concentration, (c) low energy and/or boredom, (d) increased illness/absence, (e) use of alcohol and other substances, and (f) thoughts of quitting one’s job (Society of Gynecologic Nurse Oncologists, 2009).

Compassion fatigue was first described and coined in 1992 by Carla Joinson, a registered nurse (RN), while she was researching burnout in emergency department nurses. Compassion is described in nursing as an empathetic emotion that is felt in response to the suffering of others that motivates a desire to form a therapeutic relationship between the nurse and the patient to alleviate the patient’s suffering. (Figley, 2006). Suffering is described as a state of anguish in one who bears pain, injury, or loss (Ferrell and Coyle, 2008). Compassion fatigue is described as a deep physical, emotional, and spiritual consumption accompanied by significant emotional pain, which exhibits symptoms of chronic fatigue, irritability, a feeling of dread going to work, aggravation of physical ailments, and a lack of joy in life (Piffnerling and Gilley, 2000). Compassion fatigue typically occurs in caring professionals who practice a caring attitude, and who then absorb the traumatic stress of those they care for (Najjar et al., 2009).

Today’s healthcare in the U.S. has increased the demands for nurses through expanding workloads, and working long hours with having to respond to complex patient needs. These



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demands on nurses have been shown to cause feelings of tiredness, depression, anger, ineffectiveness, apathy, and detachment (Boyle, 2011). Secondary posttraumatic stress (SPTS) or vicarious traumatization, were the original terms used to describe compassion fatigue. However, the term compassion fatigue was viewed as a more user-friendly term to describe SPTS (Figley, 1995).

Burnout and compassion fatigue are easily confused with one another and can be experienced individually or in combination. Symptoms of compassion fatigue include (a) short attention span, forgetfulness, losing things, (b) anger, (c) being easily startled, feeling on edge, (d)



difficulty falling/staying asleep, (e) depression, (f) feelings of hopelessness, and (g) apathy (Society of Gynecologic Nurse Oncologists, 2009). Somatic complaints of compassion fatigue include headaches, insomnia, and gastrointestinal distress (Boyle, 2011).

A paradox in nursing is that the majority of nurses perceive themselves as nurturing, caring and giving people, however find it challenging to nurture themselves (Boyle, 2011). In fact, Ferrell & Coyle (2008) state that providing nursing care for patients without caring for oneself is unsustainable. The American Nurses Association (2013)

states that healthy nurses who work at maintaining physical, mental, and spiritual balance are better equipped to providing safe, quality patient care. In support of providing a healthier nursing workforce, the American Nurses Association (ANA) has launched a “Healthy Nurse Program” which focuses on creating and maintaining balance and synergy among nurses’ health, safety, wellness, and life on a physical, intellectual, emotional, social, and spiritual level, personally and professionally across the wellness/illness continuum.

If compassion fatigue and burnout are left unrecognized and untreated, they can have a significantly negative impact on nurses, as well as for the healthcare system as a whole (Ohio Nurses Association, 2011). Nurses who are unable to manage their compassion fatigue or burnout have been found to be more likely to leave the nursing profession, contributing to the already critical nursing shortage. Medland, Howard-Ruben, and Whitaker (2004) argued that fostering psychosocial wellness in the workplace is a vital strategy for promoting nurse retention and improving practice environments.

The Hula Hoop and Hoop Dancing

The hula hoop is described as a prop or a toy that has been used for play and therapeutic purposes (Camp, 2013). Hula hooping has existed for thousands of years, and has been documented as early as 1000 B. C. E., in ancient Egypt, where hoops were made from grape vines and bent wood (Camp, 2013). Hippocrates, who placed emphasis on using the healing power of nature as a therapeutic approach to treating disease, documented prescribing hoop rolling exercises for healing weak backs (Camp, 2013).

Hoop dancing is described as a movement meditation and exercise tool, which requires presence, passion, persistence, a positive attitude, and a feeling of letting go. Many who have engaged in the art of hoop dancing have found that the space inside the hoop’s circle creates a tangible boundary providing a comforting sense of safety, allowing for self-

expression, and self-acceptance where individuals have described feeling better about themselves (Camp, 2013). Movement meditation, such as hoop dancing, promotes mental well-being in that it encourages the hoop dancer to focus on the present moment, contributing to feelings of joy, peace, and empowerment through the art of self-expression. The physical benefits of hoop dancing include body awareness, improvement in physical balance, increased cardiovascular and respiratory rate, and strengthening and toning of the abdominal muscles, arms, back and shoulders. A recent study conducted by the American Council on Exercise



examined the potential calorie-burning benefits of hula hooping. The results of the study found that hula hooping burns an average of seven calories per minute for a total of about 210 calories during a 30-minute hooping workout with an average heart rate of 151 beats per minute (ACE, 2014). So the question remains, can body play in the form of hoop dancing as expressive movement meditation and exercise serve as a powerful intervention for nurses to practice self-care to prevent and/or decrease burnout and compassion fatigue? A pilot project was conducted with members of the UC San Diego

Holistic Integrative Nursing Committee to determine whether a formal research study, using hoop dancing as an intervention to prevent and decrease burnout and/or compassion fatigue in nurses at UC San Diego Health System is achievable.

Methodology

A thorough literature review was conducted using the search terms burnout, compassion fatigue, the power of body play, and hoop dancing as a means for self-care. An educational hoop dance course was then developed for nurses and health care professionals who participated in the Holistic Integrative Nursing Committee (HINC) retreat. The course curriculum consisted of (1) discussion on burnout and compassion fatigue and factors challenging healthcare, (2) introduction of the power of body play through hoop dance for self-care, (3) warm-up stretches, (4) teaching waist hooping and hoop dancing, (5) cool-down stretching, (6) holding a reflective discussion about the learners' experiences with body play in the form of hoop dancing as movement meditation, and (7) completing a pre and post survey for evaluation of the course and reflect how they felt after the course. The post evaluation survey demonstrated the learner's understanding and motivation towards the importance of self-care and how various forms of body play, such as hoop dancing can be a powerful intervention towards preventing and/or decreasing burnout and compassion fatigue among nurses, which for the learners motivated feelings of joy, inspiration, and stress reduction. The results of the project indicate that conducting a research study to evaluate the impact of hoop dancing on compassion fatigue and burnout in nurses at the UC San Diego Health System is indeed feasible.

Conclusion

Burnout and compassion fatigue are occupational hazards that nurses can experience, causing decreased workplace satisfaction, decreased quality patient care, decreased patient satisfaction, and increased healthcare costs. Burnout

is a response to stresses in the work environment, whereas compassion fatigue is a response to stresses of working with suffering patients. Burnout and Compassion fatigue can be experienced individually or in combination. If the factors influencing the many challenges healthcare is experiencing are not addressed and resolved, nurses will continue to be at risk for these occupational hazards. Encouraging nurses to participate in some form of body play through movement meditation, such as hoop dancing may influence feelings of joy, peace, and self-empowerment. Thus, body play through hoop dancing may be a beneficial movement meditation intervention to prevent and/or decrease burnout and/or compassion fatigue among nurses.

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