

# The importance of compassionate care in nursing

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Compassion is the key attribute that holds unilateral weight in all fields of nursing. Compassion holds nurses accountable for every interaction they have and is often what is expected by the public. Compassionate care is composed of two major characteristics; being able to realize the factors that make up an individual while also being able to empathize with their situation and condition. Nurses perform routine procedures and skills throughout their shift. The first hallmark of compassionate care is context. While the medical tasks are structured and routine, their relationship with the patient is not. Every compassionate act is subject to the situation of the patient. Additional factors such as determinants of health and external and internal influences must be addressed in order to treat the patient as a whole. The second trademark of compassion is empathy. Through a therapeutic relationship empathy can be used to make the patient feel heard and validated leading to positive outcomes both medically and behaviorally. This paper will look at the impact of compassionate care on individual's experiencing homelessness. Issues of barriers both systemically and individually will be addressed in addition to what factors influence positive and negative outcomes.

It is important to be considerate of the deficits and disparities in this population in order to serve them best. The issue of homelessness is complex and there are a number of reasons why an individual may experience it. An individual may be experiencing homeless due to an economic issue or might be experiencing more of a chronic homelessness due to mental health and addiction problems. In America, more than 500,000 individuals are homeless at any time with 3 million experiencing

homelessness throughout the year. The median age for this population is 50 years old as of 2017. The composition of this population includes women, children and families in addition to single men. These individuals have arguably the worst healthcare and often only seek help when in crisis through emergency departments. The life expectancy is only 47 years. This low number can be attributed to many factors but lack of healthcare resources is a major contributing influence.

This population is at risk for many health factors both physical and psychological in nature. Compared to the general population, individuals experiencing homelessness are more likely to report conditions associated with an increased prevalence and severity of chronic pain. In a study done in by Landfield (2013) looking at the rate of chronic illness in middle aged adults, it was reported that 79.9% of 305 participants reported experiencing chronic pain which was classified in the study as any pain lasting longer than three months. Participants also reported physical and mental health disorders, substance abuse, tobacco dependence and histories of childhood physical and sexual abuse. With 32% of this population living unsheltered, the climate also contributes to risk factors. Environments are often harsh and ultimately end up increasing pain by leaving individuals exposed to different elements such as violence, overcrowded shelters, lack of bedding and requirement of walking long distances. Lack of sanitary living environments has crucial impacts that can affect more than the population of topic. For example, in 2017 in a city in California there was an outbreak of Hepatitis C among drug users and those experiencing homelessness that resulted in 600 cases, 395 hospitalizations and 19 deaths. This is just one of many findings

that illustrate the need for proactive care in this population and the requirement for sanitary facilities.

As stated previously, individuals in this population are aging and experiencing many chronic illnesses that require constant medical attention in addition to medication management. When seeking medical care in this population it is often neglected due to individuals feeling stigmatized by both nurses and providers which leads to lack of health adherence. Healthcare providers and the general public are often quick to stereotype these individuals labeling them as “ lazy”, “ addicts” or “ hobos”. It is often assumed that this is the life they chose when in reality homelessness can affect anyone. Certain behaviors are linked with this population including; drug use, needles scattered in the streets and shopping carts and tents in public areas which has been reported as civically frustrating. These behaviors diminish the drive for assistance or aid from the public. In an effort to decrease this stigmatization providers must first educate themselves on causes for homelessness in order to be able to provide context for an individual’s situation which will then lead to compassionate and empathetic care.

Through advocacy, education and implementation of new programs, nurses and all healthcare providers can step up as leaders to care for this underserved population by formalizing the idea of street medicine. Street medicine is a trending method that is a more drastic attempt than traditional methods in creating an accessible healthcare setting for those who have been largely marginalized in our system of organized healthcare. Street

medicine puts an emphasis on healthcare delivery and education in hope to bridge social and economic disparities. This concept recognizes the deficits and proved strategic resources that address these issues that are often ignored. A critical element is being able to mobilize healthcare in order to bring it to a specific community. Oftentimes it is hard for this population to find affordable and consistent transportation. It has also been reported they will ignore important health issues rather than attempt to access institutional health services who they perceive as failed resources in the past. Typically, these services are offered free of judgement, with no expectation of pay configured to fit the unique need. This concept encompasses a vital element of compassion discussed earlier. Out of empathy, providers are going directly to the patient, establishing an element of trust and building a solid foundation to begin at. With a willingness to understand context, nurses and healthcare providers must take this pivotal step in providing care to this marginalized population in order to begin to bridge disparities.

Individuals experiencing homelessness did not happen overnight and will not be fixed overnight. It is the cause of many social and economic barriers and requires efforts from all areas of a community to combat. As stated before, context and empathy are the two major components that encompass compassionate care. In order to breakdown stigmas and biases nurses and providers must take the first step in getting to know and understand the population at risk. If this population can be provided their basic healthcare needs then it creates a solid foundation for them to pursue other live endeavors such as employment, education or housing.