



The Duty to Care and Compassion Fatigue
September 24, 2021

There are disturbing reports of a small number of health workers, primarily physicians, [refusing](#) to see or treat unvaccinated persons. The [American Medical Association's](#) (AMA) director of ethics policy and secretary to the AMA Council on Ethical and Judicial Affairs felt the issue was important enough to weigh in and reiterate a basic principle of medical ethics. "In general, no, a physician should not refuse a patient because the individual is not vaccinated or declines to be vaccinated." Ethicists from The National Catholic Bioethics Center (NCBC) recently wrote a strong reaffirmation of the ["Duty to Care during a Pandemic"](#) that underlines one of the most noble aspects of the health care professions, the sacrificial willingness and duty to help others in need.

Taking out personal frustration against patients is one more manifestation of the breakdown of Hippocratic medicine. Many doctors have turned away from their vocation of healing and compassionate care, which extends even to those they cannot cure. The most extreme and direct violations of the Hippocratic Oath are, of course, abortion and euthanasia. When the healer becomes a killer, the world is indeed turned upside down. In this pandemic we can also see another temptation, the denial of the duty to care.

The term "compassion fatigue" is sometimes used in the context of doctors and nurses venting anger over COVID-19 patients who they feel could have easily prevented their illness or deaths by accepting vaccination. I have seen numerous mainstream news articles that follow a typical script. A patient is dying in a hospital and a doctor or nurse relates how they think his or her suffering could have been avoided by vaccination. Usually there is a line included, formulated in different ways, but expressing indignation and how hard it is to feel sorry for these people because they brought this on themselves.

The powerful emotions caused by tragedies and terrible pain should not be manipulated or used to foster guilt.

Certain stories of previously young and healthy people who died just after vaccination or suffered terrible adverse side effects also use similar emotional blackmail techniques, but they are frequently taken down by social media or other platforms. There is a line that should not be crossed between providing testimony and information and using fear, obligation, and guilt as a persuasion strategy. That line is frequently being crossed, but the ethical standard seems to be selectively and more strictly enforced based on the decision being promoted.

Let's change the diseases just to clarify how political and ideological this kind of moral indignation can be. Would it not have been ethically unacceptable for a physician or nurse to have said I feel like refusing to treat AIDS patients because they caught this disease through immoral and irresponsible sexual promiscuity at the height of that pandemic? How about

doctors telling smokers with lung cancer that they really do not have much compassion for them as they try to cure this unnecessary disease? These examples show how much coarser and unchristian our society could become if a certain logic is followed.

There is a real danger that strong emotions can lead to the search for a scapegoat to make us feel better at the expense of others. Every death that might have been prevented pulls at the heartstrings of any normal person. Health workers exposed to large numbers of deaths in a pandemic are especially vulnerable to Post Traumatic Stress Disorder and need psychological and spiritual support to help them with the strain it causes. What is not helpful is a constant refrain of [accusations](#) and shaming designed to enflame passions and justify punishing rather than trying to compassionately help or understand others.

Catholics in health care have a special responsibility to walk in the footsteps of Christ, the Divine Physician. There can be no doubt that He would not give in to compassion fatigue. Jesus gave of himself to the last full measure of sacrificing His life on the cross. He was the innocent victim who took on all the sins of humanity to merit the title of Our Savior. In preparation for this supreme act, He took pity on those who suffered and the afflicted throughout a public ministry that frequently involved healing the sick. Physicians and health care professionals should use their art and science to follow the example of Christ to the best of their ability.

In many different venues and means of communication over the last few months I have pleaded for more charity and compassion in the midst of this pandemic. Good and sincere people can discern differently in prudential matters, and personal circumstances and available scientific information change over time as individuals struggle to decide what to do in conscience with due regard for promoting the common good. I am deeply troubled that the COVID plague is not just taking lives but eroding our ethical humanity, the respect we owe each other. Radical individualism or communitarianism attempt to justify ethical violations in the name of a “higher good.” The seeds of moral destruction are sown when we seek a good but consciously trample on the rights of others or our duties towards them as means to achieving this end.

We must all resist compassion fatigue and help as best we can those who are succumbing to it. A basic duty to care extends far beyond health professionals.