The Theory of Compassion Energy (TCE) evolved through a caring concept clarification process and theoretical evolution via a creative synthesis utilizing Rogers' Science of Unitary Human Beings (SUHB) and Caring Science (CS). The TCE is described as caregivers (formal and/or informal) who desire to care compassionately by intentionally knowing another through patterned nurturance with authentic presence (Dunn 2012; Dunn 2009a; Dunn 2009b). The premise of the TCE is that human beings are unitary or irreducible, in mutual process with an environment that is co-extensive with the universe, participating knowingly in patterning, and ever evolving through expanding consciousness (Rogers, 1992; Newman, 1994). While caring is a quality of participating knowingly in human-environment field patterning (Smith, 1992).

When nurses engage with the nursed (patient) from a place of caring, compassion and presence the caring moment becomes energized and focused on meeting the needs of other, which in turn energizes the nurse. The dynamism associated with this dyadic encounter is linked with positive outcomes for both nurse and nursed.

I have synthesized the meaning of compassion, nurturance, energy, caring theory, and intentionality which comprise the concept of compassion energy in my research studying what keeps nurses in nursing that revealed it is the essence and critical nature of nursing the nursed (patient) through a mindful, authentic presence that exudes a therapeutic energy which transform the caring interaction. However, many nurses have a default setting to protect themselves from the experience of the nursed (patient): by distancing self from the perceived vulnerability of suffering. However, in distancing self from other the caring interactions is non-existent and becomes a technical task devoid of healing potential and places the nurse at risk for compassion fatigue.

Rogers informed us that nursing is a humanistic science dedicated to compassionate concern for maintaining and promoting health, preventing illness, and caring for and rehabilitating the sick and disabled (Rogers, 1970, p. vii). Sr. Roach asserts that compassion is a way of living born out of an awareness of one's relationship (interconnectedness) to all living creatures (Roach, 2002, p. 50). Compassion means to suffer with and involves us in going where it hurts...be weak with the weak, vulnerable with the vulnerable, powerless with the powerless...full immersion in the condition of being human (Nouwen, 1983).

Compassion Becomes the Energy of Caring

Often compassion is used interchangeably in nursing literature as sympathy, empathy, pity, altruism; I offer the following clarification:

- **Sympathy**: Ability to feel for the other, (mirror neurons let us be able to feel by watching another's experience).
- **Empathy**: Ability to imagine and share (understand) feelings of the other.
- **Pity**: connotes condescension, implies separateness (feel sorry for another).
- **Altruism**: love for another at the expense of oneself. Love others instead of our self.
- **Compassion**: world's richest energy source, strength from a shared weakness and shared joy.

"A sorrow shared is sorrow halved; a joy shared is a joy doubled" ~ German Prover
Recently, I completed a secondary analysis of compassion data that revealed that caregiver’s experience compassion satisfaction that transforms the caregiving encounter. Experiencing compassion, the caregiver seeks to know and understand interconnectedness to others to alleviate suffering and celebrate joy with the care recipient.

Compassion satisfaction is about the pleasure you derive from being able to do your work. For example, you may feel like it is a pleasure to help others through what you do at work. You may feel positively about your colleagues or your ability to contribute to the work setting or even the greater good of society through your work with people who need care (Stamm, 2005).

In the caregiving experience, the goal is to use opportunities to rise to occasions and use compassion strength with courage, knowledge, and skill rather than overcome the tendency to care at a distance. By focusing on compassionate care rather than on the tasks to get done or to do, one can stave off the risk of experiencing compassion fatigue. The act of understanding and nurturing self-generated vigor as compassion energy nurses (formal) and informal caregivers will find meaning in caring for self and other with the intent to alleviate suffering or celebrate joy (Dunn, 2009b).