Recognizing the Moral Distress Experience of Community-Based Health and Social Care Professionals

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What is Moral Distress?

Moral distress is the distress that arises from compromising your core values or fearing that you compromised your core values (moral uncertainty). Such actions can cause a moral wound.

Jameton 1984, Webster & Bayliss 2000, Fourie 2015

Research Plan

Bruce County Road 40, Nov 2019

- Findings are drawn from a larger **qualitative case study** with the overarching aim of exploring how the interconnection of policy, practice and regional perspectives in the SW LHIN interconnected to minimize caregiver distress

- Our study explored the experience of moral distress among community-based health and social care providers

- Sample drawn from one health jurisdiction in Southwestern Ontario

- Interviewed 24 providers, first in focus groups and then 1:1 across the region from many different provider agencies and organizations

- Used a social work strengths-based perspective (Rapp et al., 2008)

- Applied Braun & Clarke's (2006) method of Thematic Analysis to analyze the data

Moral Distress in Community Care

- Four themes related to moral distress came from the interviews with Community Service Providers.

- Moral distress was related to external constraints:
  - ✓ Scarce resources (human and financial)
  - ✓ Pressure to reduce cost
  - ✓ Conflicting care policies

- Symptoms of moral distress included guilt, frustration, anger, shame, burnout, isolation and voicelessness.

Jameton 1984, Webster & Bayliss 2000, Fourie 2015, Epstein & Hamric, 2009
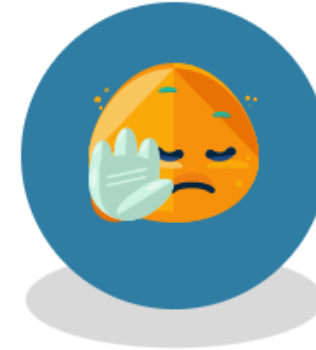
Reluctant Clients

Human Resource Shortages

System Challenges

Precarious Care Plans

Quote

JW: Have you ever had a time where you felt like your core values were compromised….?

CSP08: Every day.

CSP03: Every day.

CSP04: **Every day. Have I been to the doctor? You betcha. Am I shaking? Yep, I am because I care.**

JW: Because it's more than just an emotional reaction? It's physical, too?

CSP04: **Because …. every single one of them are suffering**. Because we want to give the care we did two years ago. **We want to see that our patients and their caregivers aren't suffering.**

Storm from Lake Huron, January 2022
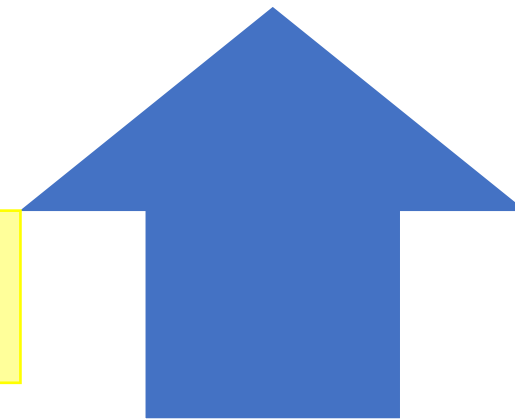
Cause and Effect
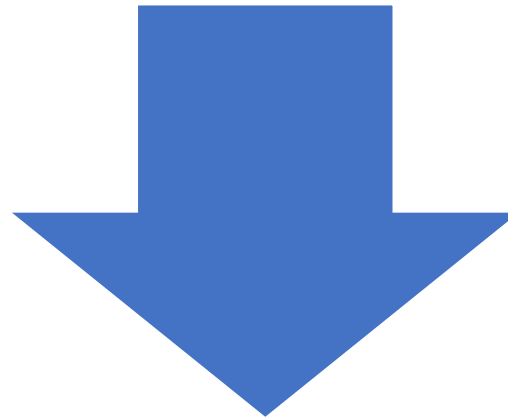
Work overload/high caseload sizes,

Poor patient-provider relationships

Decreased quality in patient care provided

Role dissatisfaction

Burnout, emotional distress

Staff attrition

See Lamiani, G., L. Borghi, and P. Argentero, *When healthcare professionals cannot do the right thing: A systematic review of moral distress and its correlates.* Journal of Health Psychology, 2017. **22**(1): p. 51-67.

Towards Moral Resilience

- Moral Resilience needs:
  - ✓ Awareness of values & education in ethics
  - ✓ Language
  - ✓ Education
  - ✓ Access to supportive moral communities
- Beyond the individual – great potential for collect moral resilience
- Communities of Practice showing promise at building collective resilience

Young, P.D. and C.H. Rushton, *A concept analysis of moral resilience.* Nursing Outlook, 2017. **65**(5): p. 579-587.

Delgado, J., Siow, S., de Groot, J., McLane, B., & Hedlin, M. (2021). Towards collective moral resilience: the potential of communities of practice during the COVID-19 pandemic and beyond. *Journal of Medical Ethics, 47*(6), 374. doi:10.1136/medethics-2020-106764