PROVIDING SUPPORT FOR STAFF IMPACTED BY MEDICALLY-RELATED MORAL INJURY

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PROVIDERS ARE FACING SITUATIONS THAT MAY VIOLATE THEIR VALUES

Due to healthcare changes created by COVID19, many medical providers are being confronted with situations that may conflict with or challenge their personal values. These **Potentially Morally Injurious Events (PMIEs)** occur in high stakes environments and can include the following types of events:

- **Actions** Something the healthcare provider <u>directly does</u> (e.g., determining that a patient shouldn't receive a ventilator and the patient dies)
- **Inactions** Something the healthcare provider <u>doesn't intervene on</u> and believes they should have (e.g., failing to properly screen a patient resulting in others' exposure to a disease).
- **Betrayal** Actions or inactions done by someone else that result in the healthcare provider feeling <u>betrayed</u> (e.g., healthcare systems rationing resources that could have helped save lives).

PMIEs may have a particularly pronounced impact when values conflict, like in the following scenarios:

A value of treating all patients with equality vs. Maximizing limited resources through triage

Being a committed and loving parent/partner vs. Having taken an oath to care for patients in need

Personal standards of professional care/conduct vs. Organizational policies and procedures

MORAL PAIN IS A NATURAL RESPONSE TO MORALLY INJURIOUS EVENTS

Just as when we feel physical pain when our body is wounded, our minds respond with painful thoughts and emotions when our values are violated. This moral pain is an <u>adaptive</u> response to PMIE's because it helps inform us of the values that are threatened by the current situation. Moral pain often takes the form of:

Moral emotions: guilt, shame, disgust, contempt, and anger

Moral thoughts: blaming oneself/others for PMIE's, negatively labeling oneself, questioning "why?"

MORAL INJURY HAPPENS WHEN WE IGNORE, REJECT AND AVOID MORAL PAIN

Moral injury occurs when an individual who has experienced a morally injurious event responds to their moral pain by attempting to avoid that pain, push it away, stop the pain in some way, or control it and this behavior then interferes with their functioning, causing social, psychological, or spiritual suffering. The areas of impairment most often seen in moral injury are:

Relationships: Disconnection and withdrawal from previously important relationships (i.e., family, work) in response to the morally injurious event, often due to feeling consumed by emotions like guilt or shame

Spirituality: Disengagement from personal spiritual practices (no longer praying/meditating, disconnecting from spiritual or religious communities for reasons other than social distancing)

Self-care: Discontinuation of practices to take care of oneself physically and/or psychologically

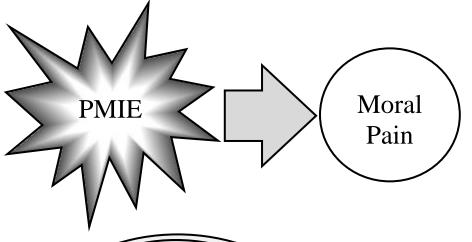
Occupational: Difficulty finding meaning in work (if meaning was previously identified) and engaging in workplace tasks

MORAL HEALING INVOLVES NOTICING, ACCEPTING AND BEING GUIDED BY MORAL PAIN

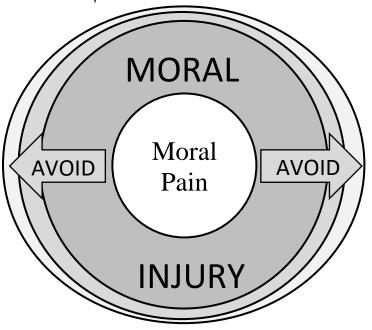
Healing from moral injury requires us to acknowledge and accept our moral pain in order to move toward areas of meaning, purpose, and vitality. Although very hurtful, moral pain is a sign that we care about living our moral values and it can help us stay connected to the things we value most in life. Being able to stay in touch with moral pain is made possible by learning skills to notice and accept uncomfortable moral thoughts and emotions while simultaneously engaging in areas of personal meaning and purpose in one's life (e.g., family, spirituality, self-care, meaningful engagement at work).

The figure below provides a visual model of how moral injury works. This figure is adapted from:

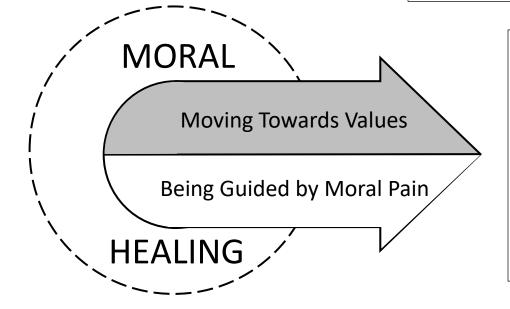
Farnsworth, J. K.*, Borges, L. M.*, Drescher, K. D., & Walser, R. D. (2019). Acceptance and commitment therapy for the treatment of moral injury (ACT-MI). Unpublished treatment manual. *Both authors contributed equally to this manual



Exposure to potentially morally injurious events (PMIEs) often cause moral pain in the form of moral emotions (guilt, shame, disgust, anger, and contempt), and thoughts related to blaming oneself or others for the PMIE or attempts to make sense about why the PMIE happened.



When an individual experiences guilt, shame, disgust, anger or contempt associated with their PMIE, they may attempt to, avoid, push away, fix, problem solve, or control these thoughts and emotions through strategies such as distraction, social isolation, substance use, numbing, or suicidal ideation. Often people disengage from relationships, spirituality, self-care, and work because interacting with these domains of life can prompt feelings of moral pain. The result of these strategies over time for the individual is increased suffering and moral pain because avoidance has led them to move away from the values that gave them meaning and purpose.



Moral healing involves reengaging with moral emotions for the sake of pursuing greater meaning in life. This means listening to the pain and allowing it to guide us toward our valued domains (e.g., spirituality, family, self-care). It means engaging in these activities even when they come with moral pain, because we recognize that values and pain are two sides of the same coin.

Intervention Strategies to Promote Moral Healing

CRISIS SURVIVAL

This means getting through the most challenging moments as effectively as possible by using short-term distress management strategies. Once the challenging moment have passed (e.g., after a crisis situation at work has resolved), focus can turn to more <u>acceptance-based strategies</u> and <u>values-based strategies</u>.

Distress tolerance skills (All taken from Linehan's (2015) Dialectical Behavioral Therapy (DBT) Skills Training Manual and DBT Skills Training Handouts and Worksheets)

o TIPs skills (DBT Distress Tolerance Handout 6, Distress Tolerance Worksheet 4). These are an excellent set of skills to use if the provider is in crisis and concerned that they will react to their emotions in an undesirable way.

Т	Temperature	Change the temperature of your face with COLD Water (to activate parasympathetic
		nervous system)can encourage holding an ice pack on the face for 30 seconds,
		focusing attention on sensory experiencecan hold breath to activate response
		further (also can stick face in bucket of ice water for 30 seconds)
1	Intense exercise	Engage intense exercise for a short period of time and focus on the sensations elicited
		(e.g., pushups, run in place, walk quickly, lift weights)
P		Practice paced breathing (breathe deeply and slowly into your belly, <u>breath out more</u>
	Paced breathing	slowly than your breathe in and/or progressive muscle relaxation (encourage provider
	&	to listen to a guided progressive muscle relaxation tape to practice tensing and
	Progressive	releasing specific muscle groups while noticing the difference between tensing and
	muscle	releasing—here is one example of a recording:
	relaxation	Audio Track: https://www.columbiamo.va.gov/audiofiles/Track-3.mp3
		(also see distress tolerance DBT handout 6B or worksheet 4A)

Self-soothe (Linehan, 2015)

Self-soothing with the senses can be helpful to use your sensory experiences to down regulate your emotions (Distress Tolerance Handout 8, Distress Tolerance Worksheet 6-6b). Try this via self-soothing with the five senses mindfully, focusing all of your attention on whichever sensory experience you choose to attend to. Try vision (e.g., looking at a picture of your favorite trip), hearing (e.g., listening to soothing music or a funny stand-up comedy set), smell (e.g., smelling your favorite lotion), taste (e.g., mindfully taste coffee or tea on a break), and touch (e.g., take a brief walk outside if you are able and pay attention to the air on your skin). You might even encourage providers to make a self-soothe kit that they can keep at work (and disinfect regularly) to bring them back to their sensory experiences when they are able to do so.

Improve the moment (Linehan, 2015)

Improving the moment is another distress tolerance skill that can temporarily help you to become unstuck from extremely intense emotions (Distress Tolerance Handout 9, Distress Tolerance Worksheets 7, 7a, 7b). Use Imagery (imagine a relaxing scene, practice an imaginal mindfulness exercise like leaves on a stream), find meaning (if it is not too invalidating, look for purpose or meaning in the difficult situation), with prayer (if relevant), with relaxing actions (massage your neck or scalp), with one thing in the moment (focus all of your attention on what you are doing right here and now, when your mind wanders gently bring it back), with a brief vacation (take a brief break if you are able to and engaging in a self-soothing activity), with self-encouragement and rethinking the situation (if helpful, remind yourself that you're doing the best you can).

ACCEPTANCE-BASED STRATEGIES

When there is more space and time for the individual, acceptance-based strategies can be used. Practice observing and describing moral pain, gently holding emotions and thoughts (rather than trying to control or get rid of the experiences). This requires willingness to allow yourself to experience painful emotions and the sensations that accompany them. It is important to experience emotional pain because research shows that over the long-term, blocking painful experiences only causes them to persist. Additionally, not allowing yourself to feel moral pain can cause other difficulties in functioning, especially in valued domains (e.g., spirituality, relationships, self-care). Neglecting these domains can can trigger additional moral emotions like guilt, shame, contempt, anger, and disgust that compound the moral emotions already triggered by the PMIE.

Observing and Describing Emotions

- Practice observing and describing current emotions (particularly guilt, shame, anger, contempt, and disgust). Cultivate willingness to experience the emotion and acceptance of the emotions themselves.
 - It may help giving the emotion a shape and a color. See this link for a recording of an ACT exercise that targets physicalizing emotional pain by Jason Luoma: https://portlandpsychotherapy.com/wp-content/uploads/sites/21/physicalizing exercise 9 30 09.mp3
 - Practice willingness to nonjudgmentally experience or "sit with" the sensations in body associated with the emotion. Encourage describing these physical sensations aloud.
 - Use the DBT exercise of observing emotions as waves the approach, build and then naturally dissipate on their own (DBT Emotion Regulation Handout 22, Emotion Regulation Worksheet 15)
 - See also DBT core mindfulness skills—particularly observe and describe emotions nonjudgmentally (DBT Mindfulness Handout 4, Mindfulness worksheets 2-2c, 4-4b; DBT Mindfulness Handout 5, Mindfulness Worksheets 2-2c, 5-5c)
 - Practicing radical acceptance. This means completely and totally accepting the reality of the situation in order to work within it, rather than spending energy arguing with reality, which does not actually make things better (DBT Distress Tolerance Handout 11, Distress Tolerance Worksheets 8-9a).

Observing and Describing Thoughts

- Practice observing and describing thoughts (particularly self- and other-blame related thoughts). A mindfulness exercise that allows us to slow down and notice our thoughts can be useful if we are describing feeling stuck inside of these experiences (e.g., ruminating, trying to get a thought out of their head). For example, write down these thoughts on a sheet of paper as they are occurring in real time to help slow down the experience and generate space between you and your thoughts. Noticing that we are ones generating these thoughts...that our thoughts do not define us any more than a container is defined by its content.
 - Consider using an ACT exercise that helps facilitate this separation from thoughts like "leaves on a stream" or "boxes on a conveyer belt" (these exercises are available in common ACT books like <u>Learning ACT</u> or <u>Get Out of Your Mind and into Your Life</u>). Here is an audio recording of "leaves on a stream" by Jenna LeJeune: https://jasonluoma.com/media/Leaves%20on%20the%20stream.mp3
 - These and similar exercises are also available on the ACBS website if you have access to this resource of if you are willing to pay a membership fee https://contextualscience.org/resources

 See also DBT core mindfulness skills—observe and describe thoughts nonjudgmentally (DBT Mindfulness Handout 4, Mindfulness worksheets 2-2c, 4-4b; DBT Mindfulness Handout 5, Mindfulness Worksheets 2-2c, 5-5c)

Using Smart Phone Applications to Practice Mindfulness

 Headspace is offering a year for free to providers where you can practice different kinds of mindfulness exercises. Providers can use the link below with their NPI number for free access to all Headspace features.

https://www.headspace.com/health-covid-19

VA mindfulness coach

https://www.mobile.va.gov/app/mindfulness-coach

 VA ACT coach (for more access to try different exercises consistent with Acceptance and Commitment Therapy...this would be most helpful if accompanied by an ACT self-help book) https://www.mobile.va.gov/app/act-coach

ACT Companion: Happiness Trap

https://apps.apple.com/us/app/act-companion-happiness-trap/id668468577

 Guided acceptance-based recordings are available free of charge here by ACT experts Jason Luoma and Jenna LeJeune:

https://portlandpsychotherapy.com/mindfulness and acceptance exercises/

Self- and Other-Compassion

- Self-compassion, or the practice of treating yourself (including your emotions and thoughts) kindly and without judgment, can be a very helpful practice when experiencing intense moral emotions like guilt and shame.
- Other-compassion can be a helpful practice when feeling stuck inside of anger and contempt either directed at specific people or institutions.
- Guided, recorded loving kindness meditations are available here:

https://portlandpsychotherapy.com/self-compassion-meditations/

 This website has several self-compassion recorded exercises by Tara Brach, an expert in mindfulness

https://www.tarabrach.com/guided-meditations/

 This website is a helpful resource for several guided self and other compassion exercises that have been recording by experts like Kristen Neff

http://centerformsc.org/practice-msc/guided-meditations-and-exercises/

Article on self-compassion during COVID-19

https://centerformsc.org/self-compassion-and-covid-19/

 See also Practicing Loving Kindness to Increase Love and Compassion (DBT Mindfulness Handout 8, Mindfulness Worksheet 6)

VALUES-BASED STRATEGIES

Oftentimes when focused on avoiding moral pain, people lose touch with what matters most to them and as a result have difficulty finding meaning in their lives. This is often because in the process of avoiding more painful moral thoughts and emotions, people also start to avoid the people and situations that trigger these experiences. Unfortunately, by avoiding moral pain, it is often the case that individuals begin to neglect the relationships, routines, and other areas of meaning and vitality that provide them with a sense of purpose and importance in life. Without being connected to these sources of meaning, individuals can slip into deeper spirals of avoidance and aimlessness.

Values clarification and exploration can be helpful strategies for exploring areas of meaning even in the presence of significant moral pain. As part of exploring valued domains, individuals can engage in *bold moves*, which are small but significant behaviors that are consistent with one's values, to bring them in closer contact with areas of meaning in their lives.

- O Values clarification is the process of remembering or identifying the areas in your life that matter most to you. The process of values clarification, can be assisted by using a values card sort. There are several available to choose from, but here is one example from Bill Miller: http://www.motivationalinterviewing.org/sites/default/files/valuescardsort_0.pdf
- o Encouraging small behaviors that bring the individual closer to valued domains that they are not engaging in can be helpful for increasing perceptions of meaning and importance. In moral injury, valued domains that are typically relevant include social relationships (at home and at work), spirituality, and self-care. For instance, examples of bold moves might be having an internet video chat with a family member that the individual has been out of touch with (i.e., relationships), attending a virtual group meditation or religious service (i.e., spirituality, community) or getting enough sleep or engaging in pleasant activities (i.e., self-care).
- The DBT opposite emotion action skill (DBT emotion regulation handout 10, emotion regulation worksheet 7) can encourage individuals to act in the opposite direction of what their emotion naturally pulls for if the urge connected to these emotions is unhelpful. For instance, if a provider is feeling shame and the urge to withdraw or hide related to a potentially morally injurious event, acting opposite to the urge for shame would be to socially engage and connect with others. In this case, opposite actions could potentially encourage values-consistent behaviors if the individual finds meaning and purpose in values like authenticity, trust or social relationships.
- Additional Values exercises are also available here:
 https://portlandpsychotherapy.com/values_exercises/

Additional Resources:

- Get Out of Your Mind and Into Your Life (Hayes & Smith, 2005). Also available as audio book
- A Liberated Mind (Hayes, 2019). Also available as audio book
- The Mindfulness and Acceptance Workbook for Anxiety (Orsillo and Roemer, 2011)
- Values in Psychotherapy (LeJeune and Luoma, 2019)
 - o An excellent book related to values exploration in therapy but may also be useful as a self-help book for providers

Contact Information

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