KHSCwellness

Moral distress and self-compassion

Key components of self-compassion

Consistent practice of self-compassion strategies can gradually lead to improved emotional resilience, self-esteem, and overall well-being. It's a skill that develops over time with patience and persistence.

1. Self-kindness: Treat yourself with warmth and patience, especially during difficult times. Replace harsh self-criticism with the care you'd offer a close friend. Embrace imperfection and recognize that everyone makes mistakes.

2. Common Humanity: Recognize that struggles are part of the shared human experience. Understand that others face similar challenges, fostering connection and reducing feelings of isolation and shame.

3. Mindfulness: Be present without judgment, accepting your thoughts and feelings with openness. Observe your experiences without becoming overwhelmed, cultivating self-awareness and compassionate responses.

What is moral distress?

Moral distress is not a sign of weakness. Instead, it reflects a strong commitment to the highest standards of care, even when external constraints prevent acting accordingly. This distress can, for example, occur when we face situations where our sense of the right course of action conflicts with what a patient wants.

Impact on healthcare professionals:

Moral distress can significantly impact psychological health and well-being, potentially leading to burnout, empathic strain (formerly compassion fatigue), anxiety, depression, and decreased professional satisfaction. It affects both the individuals experiencing it and the quality of care they provide.

Signs of moral distress:

- Emotional exhaustion
- Feelings of frustration or anger
- Decreased job satisfaction
- Difficulty sleeping
- Increased absenteeism
- Feelings of guilt or shame

Factors that can contribute to moral distress:

- Insufficient resources: Lack of necessary staff, equipment, or time to provide optimal care.
- Power imbalances: Hierarchical dynamics that limit the ability to advocate for patients or influence decision-making.
- Role ambiguity: Unclear job responsibilities or conflicting expectations about one's role in patient care.
- Unrealistic expectations: Pressure to meet impractical standards or demands from patients, families, or the healthcare system.
- Systemic issues: Structural problems within the healthcare system, such as policies, regulations, and organizational culture, that hinder the provision of quality care.
- Legal constraints: Laws and regulations that restrict the types of care or interventions that can be provided.
- Ethical dilemmas: Situations that present conflicting ethical principles, making it challenging to decide on the best course of action.
- Cultural and social factors: Differences in cultural or social values between healthcare providers and patients that lead to conflicting expectations and decisions.

Resources to support your journey:

- *The Mindful Self-Compassion Workbook* by Dr. Kristin Neff and Dr. Christopher Germer.
- Self-Compassion Website: Offers definitions, guided practices, and resources by Dr. Kristin Neff.
- Practicing Self-Compassion Community: Virtual community led by Dr. Kristin Neff to develop self-compassion skills.
- Journaling and Self-Reflection: Practice awareness of body responses and thoughts. Use this template from Psychology Tools for guidance.
- Comprehensive PDF Workbook: Developed by the Government of Western Australia's Centre for Clinical Interventions, including modules like Self-Compassionate Thinking and Living.

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Moral apathy:
Moral apathy occurs when individuals become indifferent to the suffering of others, such as ignoring unsafe behaviours among colleagues.

Moral injury:
Moral injury is a deep wound to one's conscience caused by actions that go against personal morals. It can lead to shame, guilt, and alienation, often stemming from situations like staffing shortages or unavailability of treatment options. Healthcare leaders can also experience moral injury for similar reasons.

Moral outrage:
Moral outrage is a response of frustration, anger, disgust, and powerlessness when moral or ethical principles are violated. While it can motivate advocacy for change, unchecked outrage can escalate into conflict. Examples include witnessing extreme patient suffering due to continued life-sustaining measures despite failing treatments.

Benefits of self-compassion

Research by Steen et al. (2022) uncovered that beyond these reactions, there's a call for healthcare professionals to develop strong moral character and integrity, acting in line with ethical values. This involves training the mind and emotions to uphold ethical values and navigate dilemmas with compassion, humility, and patience. Beyond current bioethics models focused on autonomy and justice, there's a need to cultivate ethics as a practice, promoting moral sensitivity and relationality.

Many healthcare providers, while compassionate towards others, struggle with self-criticism. Self-compassion is essential for resilience and well-being, requiring individuals to treat themselves with the same kindness they offer others. Dr. Kristin Neff describes self-compassion as embracing oneself and imperfections to build resilience (Neff & Germer, 2018). Research shows that self-compassion reduces stress, anxiety, and depression while enhancing overall well-being and resilience. It aids quicker recovery from setbacks and fosters healthier relationships.

Practicing self-compassion involves acknowledging our humanity and fallibility within the complex healthcare system, being kind to ourselves during perceived failures, and recognizing our best efforts given the resources. Cultivating mindfulness allows us to observe thoughts and emotions without judgment, promoting self-reflection and emotional balance. Though self-compassion requires intentional effort and patience, it offers significant psychological benefits, improving both personal well-being and professional effectiveness in healthcare.