



# Self-Care in Moral Distress

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# Why do we experience Moral Distress?

- Our motivations for work - *our values and ethics are challenged*
- Not having a 'fix' for another's suffering - *sitting with suffering is difficult*
- Feeling that we may be 'complicit' in the suffering – *when work feels wrong*
- Feeling pressure to conform, having difficulty finding the 'right' time to talk about it and with the 'right' people

# Who experiences Moral Distress?

- 1:1 care providers
- 'Decision-Makers'
- Dual advocates for Patients & Carers
- Anyone who cares about dignity & comfort

# How do we experience Moral Distress?

## **Acute**

*Episodic*

## **Chronic**

*Cumulative experiences of MD over time form multiple sources*

*Or*

*Exposure to a singular long-term source of MD*

## **ACMD**

*Acute on Chronic Moral Distress*

# Symptoms of Moral Distress

Work Life	Personal Life
<ul style="list-style-type: none"><li>▪ Mimics anxiety – raised heart rate, difficulty concentrating on multiple tasks, shaking, general feeling of discomfort</li><li>▪ Actual Anxiety</li><li>▪ Inability to rest the mind or separate thoughts from the issue causing Moral Distress</li><li>▪ Poor sleep</li><li>▪ Anger or misplaced anger</li><li>▪ Frustration</li><li>▪ Reduced morale</li> <li>▪ Compassion Fatigue</li><li>▪ Vicarious trauma</li><li>▪ Sense of powerlessness, hopelessness, or feeling overwhelmed</li><li>▪ Increasing self-criticism, punishing oneself</li></ul>	<ul style="list-style-type: none"><li>▪ Mimics anxiety – raised heart rate, difficulty concentrating on multiple tasks, shaking, general feeling of discomfort</li><li>▪ Actual Anxiety</li><li>▪ Inability to rest the mind or separate thoughts from the issue causing Moral Distress</li><li>▪ Poor sleep</li><li>▪ Quick to Anger at others or self</li><li>▪ Frustration or misplaced anger</li><li>▪ Reduced enthusiasm for usual activities ‘what’s the point?’</li><li>▪ Compassion Fatigue</li><li>▪ Triggered into distress or heightened anxiety</li><li>▪ Sense of powerlessness, hopelessness, or feeling overwhelmed</li><li>▪ Increasing self-criticism, punishing oneself</li></ul>



# Self-Care Action Plans: Reflective Practice & other Self-Care Strategies

# Self-Care Action Plan

## Part 1: Attend to your Moral Distress Experience

### Processing our Moral Distress experiences with the use of the Reflective Practice Tool

Reflective Practice is a strategy which can assist us to understand our Moral Distress, and to understand ourselves.

The RPTMD helps us come to terms with either an action plan to address the cause of our Moral Distress, or, an action plan to manage our experience if the cause cannot be changed.

## Reflective Practice Tool for Moral Distress Self-Care Action Plan - Part 1

### Part 1: Self Check-In

What are my symptoms?

What does that indicate that I am feeling?

Why do I feel this way?

What am I feeling this way about?

### Part 2 - Analyse External Factors

- a) What knowledge and experience did they bring to the issue or interaction?
- b) What was the emotional 'flavour' of other's contribution to the issue or interaction?
- c) What feeling might others have brought into the issue or interaction? Did those change over stages, and why?
- d) Were any assumptions brought into the issue or interaction which impacted on the outcome?
- e) What actions or behaviours were present around the issue or interaction?
- f) Is any information missing? Can I seek to clarify or understand more?

### Part 3 – Analyse Myself

- a) What knowledge and experience did I bring to the issue or interaction?
- b) What was the emotional 'flavour' of my contribution to the issue or interaction?
- c) Did I bring particular feelings into the issue or interaction? How do I understand those feelings then and now? Consider past professional and personal experiences.
- d) Did I bring any assumptions into the issue or interaction while impacted on the outcome?
- e) What actions or behaviours did I contribute to the issue or interaction?
- f) Would I do anything differently? Can I act on that?

### Part 4 - Exercise your Agency & Autonomy: What can I do next?

Are there any opportunities for influencing the outcome?

What steps would I take to test out these opportunities to take action?

Would it help me to feel any differently to act upon these opportunities?

Activate Phase 2 of your Self-Care action Plan

The RPTMD is available in A4 format on the  
STGH Renal Department Website

The RPTMD is adapted from Self-Supervision  
Guidelines in: Senediak, C., (2013). A  
Reflective practice model of clinical  
supervision. *Advances in Clinical Supervision  
Conference Monograph*, NSW Institute of  
Psychiatry.



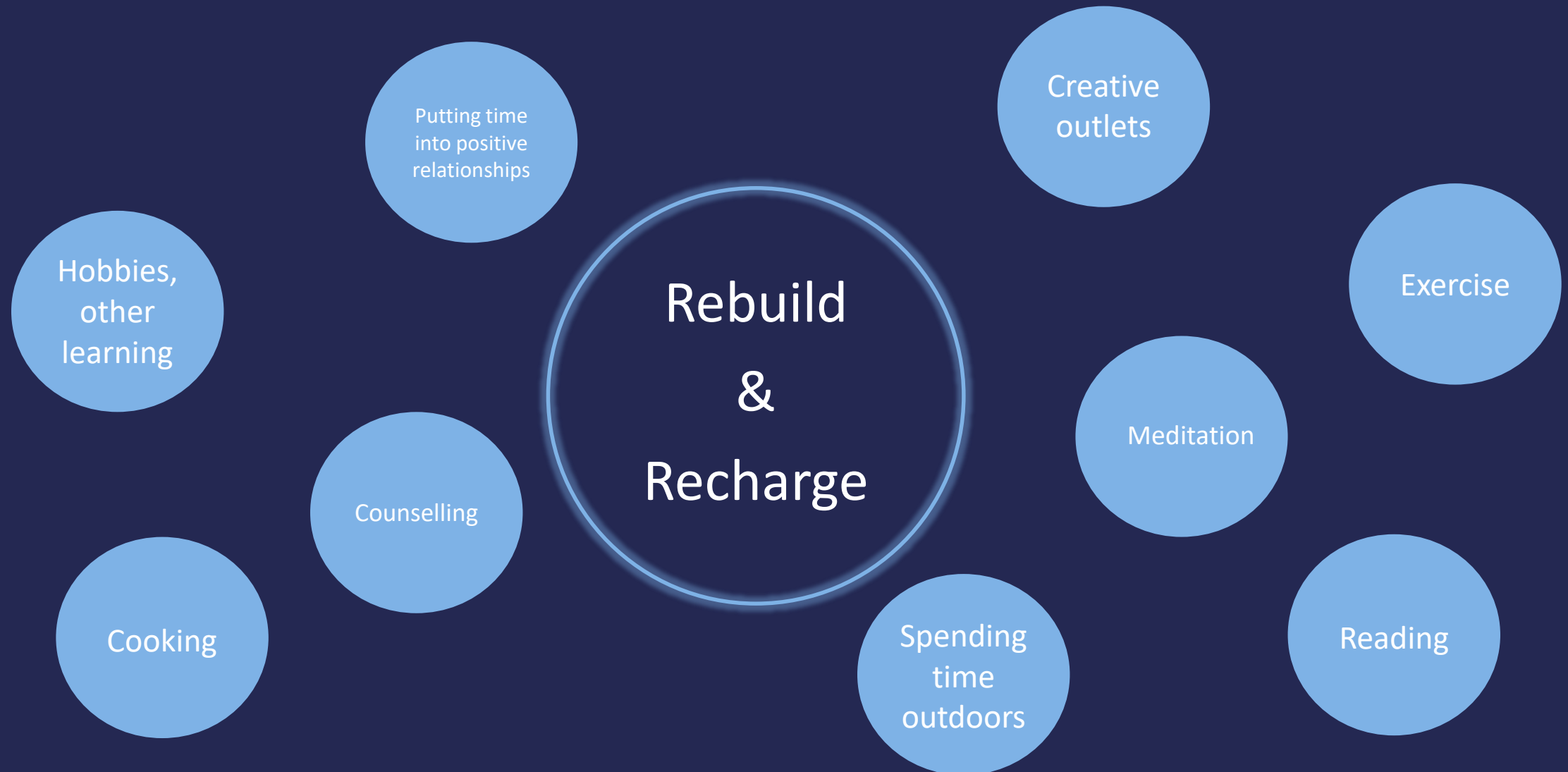
# Self-Care Action Plan

## Part 2: Separating the Self from work



Rebuild  
&  
Recharge

# Self-Care Action Plan - Part 2



# Key Requirements for a successful SCAP

## Honesty & Courage

*To be truthful with oneself & avoid confirmation bias*

## Autonomy

*Recognise the autonomy of others, and your own autonomy.*

*Action and inaction are both legitimate choices. Only you can decide*

## Routine

*Build the 2-part SCAP into your routine. It will become more familiar and second-nature*

## Review

*Periodically assess what is and is not working about your SCAP. Modify as needed.*

# When professional help is indicated

- *After some practice* 'nothing's working' – self-care is a muscle – do not expect immediate results.
- You find that you do not have people in your life who are able to talk through the issues in an impartial, supportive manner
- If you'd simply prefer to talk to a professional
- Other issues are impacting on your self-care strategy e.g. past traumas
- Unhealthy coping behaviours e.g. risk-taking with either short term or long-term impact on your health, safety, or others' safety & wellbeing
- You're can't sit with the feelings that the reflection is bringing up. Avoidance means that you lose opportunities to grow, to develop, and to learn your strengths

Professionals available & their roles: EAP, private counselling, Bereavement Counselling, debriefing through workplace, group supervision, individual supervision.