Moral Distress & Decision Fatigue

Whitney L. Marris, LMSW
Project Manager, The Institute on Trauma and Trauma-Informed Care

Samantha Koury, LMSW
Project Manager, The Institute on Trauma and Trauma-Informed Care

November 10, 2021
12 PM – 1 PM EST
What You Can Expect

Exploring Possible Impacts and Experiences in These Times

• Moral Distress
  ❖ Signs and symptoms
  ❖ Contributing factors
  ❖ Preventing moral distress/supporting moral resilience
    o In yourself
    o Considerations for the work environment

• Decision Fatigue
  ❖ Signs and symptoms
  ❖ Strategies and tools to manage in this moment
    o Attending to yourself
    o Attending to decision fatigue at work

Trauma-Informed Care (TIC) & Wellness

Lunch Room Meetup
Moral Distress
Moral Distress

• An injurious experience that occurs when a worker engages in, fails to prevent, or witnesses acts that conflict with their values and/or beliefs.
• Stress experienced when workers are unable to base their practice on their values/beliefs
• Threatens integrity & authenticity

(Fenton & Kelly, 2017; Lachman, 2016; Weinberg, 2009)
This is not what I signed up for. **UNHEARD** **HELPLESS**

Nobody else seems to care. **HOPELESS**

I feel powerless. **PARALYZED**

It's not my job to speak up. **TIRED**

They won't listen to me anyway. I'm feeling the administrative pressure to get my numbers up, but this doesn't feel right.

I'm now part of the problem, not the solution. One day they say one thing, the next day another. Why bother adapting at all? **POINTLESS**

I don't want people to think I'm a troublemaker. **UNSUPPORTED**

Why are we doing this? I feel like I'm **CAUSING** suffering. **OVERWHELMED** **ABANDONED** **DISEMPowered** **DISCONNECTED**

I can't be part of a system that hurts people. **ISOLATED**
## Signs and Symptoms of Moral Distress

<table>
<thead>
<tr>
<th>PHYSICAL</th>
<th>EMOTIONAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Headaches</td>
<td>Worry, fear, and/or overwhelm</td>
</tr>
<tr>
<td>Palpitations</td>
<td>Depressed mood</td>
</tr>
<tr>
<td>Chronic pain</td>
<td>Numbing/empathic strain</td>
</tr>
<tr>
<td>Nausea/gastrointestinal upset</td>
<td>Enhanced irritability and/or sensitivity</td>
</tr>
<tr>
<td>Impaired immune response</td>
<td>Feelings of shame, guilt, and/or remorse</td>
</tr>
<tr>
<td>Feeling fatigued, weak, and/or run down</td>
<td>Anger re: bureaucracy, systemic issues, etc.</td>
</tr>
</tbody>
</table>

*(Berthold, 2017; Fenton & Kelly, 2017; Janssen, 2016; Reamer, 2020)*
# Signs and Symptoms of Moral Distress

<table>
<thead>
<tr>
<th>BEHAVIORAL</th>
<th>SPIRITUAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avoidance</td>
<td>Absence of sustaining values/beliefs</td>
</tr>
<tr>
<td>Absenteeism</td>
<td>Lack of a sense of meaning</td>
</tr>
<tr>
<td>Social withdrawal</td>
<td>Compassion fatigue/burnout</td>
</tr>
<tr>
<td>Over-identification with patient situations</td>
<td>Existential questions/spiritual crises</td>
</tr>
<tr>
<td>Challenges maintaining boundaries</td>
<td>Guilt/shame</td>
</tr>
<tr>
<td>Agitation/outbursts with little provocation</td>
<td>Disconnection from practice/rituals</td>
</tr>
<tr>
<td>Use of unhealthy/harmful coping behaviors</td>
<td>Altered views of self/others/the world</td>
</tr>
</tbody>
</table>

(Berthold, 2017; Fenton & Kelly, 2017; Janssen, 2016; Reamer, 2020)
## Signs and Symptoms of Moral Distress

<table>
<thead>
<tr>
<th>COGNITIVE/PSYCHOLOGICAL</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Sleep dysfunction</td>
<td>Intrusive thoughts</td>
</tr>
<tr>
<td>Cynicism/pessimism</td>
<td>Diminished creativity</td>
</tr>
<tr>
<td>Defensiveness/judgmental</td>
<td>Negative sense of self</td>
</tr>
<tr>
<td>Hopelessness/discouragement</td>
<td>Reduced confidence in capability/capacity</td>
</tr>
<tr>
<td>Perception of being trapped by one’s work</td>
<td>Lack of sense of fulfillment/meaning</td>
</tr>
<tr>
<td>Loss of sense of personal safety/control</td>
<td>Hyperarousal/increased startle response</td>
</tr>
<tr>
<td>Loss of ability to trust others/institutions</td>
<td>Sense of disillusionment/resentment</td>
</tr>
<tr>
<td>Preoccupation/rumination</td>
<td>Perception that one can’t make a difference</td>
</tr>
</tbody>
</table>

(Berthold, 2017; Fenton & Kelly, 2017; Janssen, 2016; Reamer, 2020)
Factors that Contribute to Moral Distress

• Safety concerns
• Excessive workload
• Difficult working conditions
• Value conflicts/ethical dilemmas
• Lack of leadership and/or guidance
• Perceived or actual resource insufficiencies
• Uncertainty and/or lack of transparency/clarity
• High-stress work, e.g., being on the front lines
• Perceived or actual powerlessness/lack of control
• Inadequate workplace supports/growth opportunities

(Janssen, 2016; Mänttäri-van der Kuip, 2016)
Reflection Point: Moral Distress

- When have you had to make choices that did not directly align with your values/beliefs?
- What, if anything, have you noticed shifting in you over time?
- What has helped you remain as present and grounded as possible?
Four “A”s for Coping with Moral Distress

**Ask**
Am I feeling distressed or showing signs of suffering?
Am I noticing signs of distress in my team?

**Affirm**
Validate your feelings and perceptions.
Affirm the commitment to take care of oneself.

**Assess**
Identify distress sources - can this be changed?
How can you personally contribute to change?

**Act**
Do what you can to implement and maintain the changes you want to see.
Be flexible & include strategies for wellness/self-care.

(American Association of Critical Care Nurses, 2012)
Moral Resilience

What we focus on gets bigger.
Bolstering Your Moral Resilience

• Focus on what is in your control
• Make time to meet your basic needs
• Hone self-regulation strategies that work for you
• Develop a routine for leaving work stress at work
• Establish a supportive network & remain connected
• Engage in creative & regenerative activities/hobbies
• Notice ways that you CAN act in alignment with your values
• Therapy-supervision/consultation to process challenges/personal reactions that linger after work

(Rushton et al., 2016; Rushton, 2017)
Supporting Moral Resilience in Your Role

- Be flexible as staff respond to evolving change
- Engage in and support open, transparent communication
- Distribute patient loads to allow balance (where possible)
- Provide meaningful supports for self-care and workplace wellness
- Increase training/education/professional development opportunities
- Contribute to a culture of ethical practice & model resilient behaviors
- Provide adequate opportunities for effective supervision/consultation
- Get creative to help staff rediscover/redefine their commitment to the work
- Pay attention to your framing – lift up realistic hope/optimism, notice what is working
- Focus efforts on implementing positive change to build resilience vs. “solving problems”
- Cultivate self-awareness to identify meaningful actions you can take and allow others to do the same for themselves without judgment/negative consequences

(Rushton et al., 2016; Rushton, 2017)
Decision Fatigue
In “normal” times, we make ~35,000 decisions per day.

(Hoomans, 2015)
seeing people in-person vs. video chatting
is this worth an email/Teams meeting or should I just try to figure it out?
see family members who are not vaccinated vs. uphold boundaries that can lead to disconnection
maintain life-work boundaries vs. respond to that email that came through at 10 PM
what can I do to help myself feel physically and emotionally safe?
is it safe to see my family for the holidays this year?
assume risk by shopping for groceries in-person vs. paying more for delivery to stay feeling safer
do my kids attend school fully in-person?
what do I wear for this Zoom call?

Trauma-Informed Care (TIC) & Wellness
Lunch Room Meetup
Decision Fatigue

*Decision fatigue* refers to the deteriorating quality of decisions made by an individual after a long session of decision-making.

Dr. Bruce Perry on Decision Fatigue

[Link to Full Video]

Neurosequential Network Stress & Trauma Series

(Perry, 2020)
Zero Decisions

Many Decisions
Reflection Point: Decision Fatigue

• What decisions – new and old – do you find yourself making lately?

• What are signs of your decision fatigue? (Thoughts, feelings, behaviors – what do you notice?)

• When you noticed these signs in the past, what helped you recharge?
Possible Signs/Symptoms of Decision Fatigue

- impulsivity/hasty decision-making
- avoidance/procrastination
- all-or-nothing thinking
- jumping to conclusions
- over-compliance/choosing status quo
- reluctance to make trade-offs
- indecision/“analysis paralysis”
- burnout/exhaustion
- reduced functioning at work/home

(Curley, 2020; Perry, 2020; Thurrott, 2020)
Minimizing Decision Fatigue

- limit unnecessary/unimportant decision-making
- minimize group decision-making where possible
- “marinate” on major decisions when possible
- practice getting comfortable with the undecided
- avoid decision comparison
- regulate between decision-making “doses”
- make important decisions first (when rested & refreshed)
- be kind to yourself

(Brabaw, 2020; Curley, 2020; Jernigan, 2020; Hauck, 2020; Perry, 2020; Thurrott, 2020)
Managing Decision Fatigue at Work

- create and contribute to a regulated and regulating work climate
- establish “master” routines that narrow choice to equally acceptable options and depend on key triggers (e.g., if $x$, then $a$; if $y$, then $b$; if $z$, then $c$…)
- resist “micro-management”
- delegate decision-making
- understand the point of diminishing returns

*Remember:* decision quality is “state-dependent…”
The decision of a regulated person will reflect “better” thinking than that of the same person when dysregulated.

(Perry, 2020)
Final Reflection Point

What resonated with you the most?

What is one small step that you can take to implement change to address these impacts at your health center?
Please completed the evaluation survey: https://bit.ly/LunchRoomMeetupNov21

We truly value your feedback!