

Exploring the link between ethics and wellness – Moral distress and compassion fatigue

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Introduction

Every day there are big and small ways our ethics and morals are tested, and regardless of how we respond to those tests, there are associated costs for us. In order to move towards handling these situations in healthy ways, we first need to recognize that they are occurring. The Oxford dictionary definition states ethics are “moral principles that govern a person’s behaviour or the conducting of an activity”.¹ While this definition is broad, it is important to take away that our ethics shape our behaviour, both at work and in our personal lives. At work, we have professional ethical standards, as well as bodies of evidence, best practices, and other tools to help guide our decision making. In our personal lives, we are more likely to use our goals and values, along with potential consequences, to make decisions. There will be times when one’s personal and professional ethics line up well, and other times when they are divergent. It is when our personal and professional ethics are not aligned or when our ethics are not aligned with our workplace’s or client’s that we are likely to experience moral distress. How we deal with those moments of distress will determine whether there are lasting consequences to our wellbeing, such as compassion fatigue.

Moral distress

Moral distress is the in-the-moment stress that is felt when you cannot take the ethically appropriate action desired due to internal or external constraints.² The presence of constraints is a core component of moral distress, and understanding the nature of them is an essential step in determining how to avoid similar situations in the future. Internal constraints include a perception of powerlessness, an absence of assertiveness, self-doubt, and a culture of obedience.² External constraints include clinic culture, under-staffing, lack of support from practice management, and fear of reprisal or consequence.² There are short- and long-term consequences to moral distress. Feelings of frustration, anger, guilt, anxiety, and isolation may occur acutely around the situation unfolding.² Following an experience of moral distress one might experience moral residue, the hangover or resulting damage from the situation. It is this lingering and persistent experience of failure or shame from compromising our ethical beliefs or allowing them to be compromised that is the most damaging consequence of moral distress. The presence and/or accumulation of moral residue has damaging consequences of its own, and it can also cause secondary traumatic stress, a component of compassion fatigue.

Compassion Fatigue

It seems like its definition should be intuitive, as compassion and fatigue are words that are in common use. However, compassion fatigue is more than the sum of its parts, which is to say it is not simply exhaustion due to providing compassionate care. To this end, it cannot be solved by distancing oneself from clients and patients, or providing care without compassion or engagement. The nature of compassion fatigue also means that it is more than exhaustion or something that a vacation can solve. Compassion fatigue is comprised of two components – burnout and secondary traumatic stress. In general, burnout is a state that is reached where one’s capacity to function is diminished or lost as a result of depleted physical and mental resources.³ It is comprised of three components: emotional exhaustion, depersonalization, and

a diminished sense of personal accomplishment. The pathogenesis of burnout is most often related to the work environment, workplace culture, or amount of work itself.⁴ This is contrary to secondary traumatic stress, which stems from the work itself. Secondary traumatic stress is closely linked to post-traumatic distress; the difference being that the individual did not directly experience the trauma themselves in the case of secondary traumatic stress.⁵ Putting together the experiences of burnout and secondary traumatic stress lead us to the following definition of compassion fatigue – “the final result of a progressive and cumulative process that is caused by prolonged, continuous, and intense contact with patients [& clients], the use of self, and exposure to stress.”⁶

Connecting Moral Distress and Compassion Fatigue

The moral residue that remains following moral distress is the type of experience that can lead to compassion fatigue. This is because our body perceives the inability to act in the way we want to as a threatening or traumatic event. With an understanding of how ethical dilemmas may contribute to compassion fatigue, we are able to take steps towards resilience and diminishing or eliminating the impacts on our lives. To do this, we must first explore our own values and ethics. Often it is obvious to us once a boundary has been crossed, or our ethics have been compromised, but if we are to prevent this, we need to see those situations coming, this necessitates a thorough understanding of ourselves first. Next, choosing or creating a practice environment that is supportive and well-aligned with your personal and professional ethics will decrease the frequency with which you face ethical conflicts. It is important to recognize that it's not possible to eliminate ethical conflict, and thus we need to develop an approach for how to respond to ethical conflict, and how to extend compassion to yourself in situations where you are unable to behave in a way that is consistent with your beliefs. Lastly, and perhaps most importantly, in moments where we are experiencing ethical conflict or moral distress, we must help our brains to move through that perceived threat. The best way to do this is by using mind-body techniques, specifically muscle relaxation⁵ and breathing. This doesn't need to take a long time, it can be as short as a few deep belly breaths and purposeful relaxation of your jaw and waist. When we support our bodies and brains in moving through the threat experience, we are less likely to carry that experience with us, which supports wellness and resilience.⁵ The ideas of empowerment, assertiveness, self-awareness, and self-calming techniques are crucial for managing moral distress effectively and preventing compassion fatigue.

References

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