

Morally Distressing Events in Healthcare Workers During the Coronavirus (COVID-19) Outbreak

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Disclosures

- Funding by DoD's CDMRP to study Trauma Informed Guilt Reduction Therapy (TriGR)
- Book published by Elsevier Press

Thank You

- Patricia Watson, PhD
- Shira Maguen, PhD
- Jessica Hamblen, PhD
- Todd McKee

Agenda



Definition and history



Moral distress and mental health



Peer, colleague, and leader support



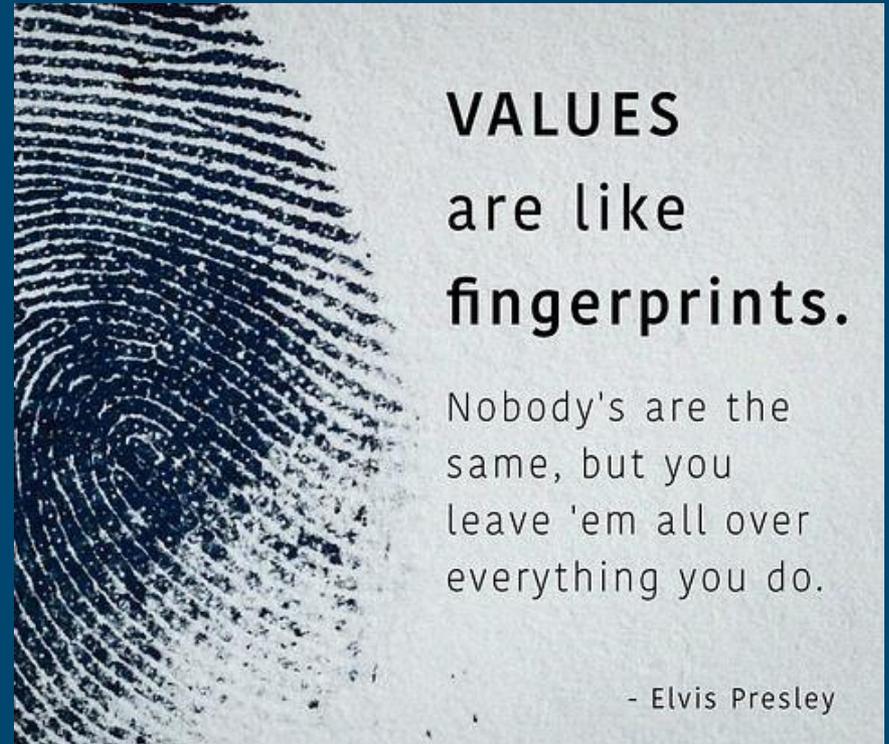
Treatment



Next steps

Values

- A person's principles or standards of behavior
- One's judgment of what is important in life



What is Moral Distress?



An **event** occurs where someone's values and morals are violated by perpetrating, failing to prevent, or bearing witness to acts that transgress deeply held moral beliefs and values.



The person feels **moral distress** (involving emotions and cognitions – guilt, shame, betrayal) in response to the event.



Sometimes there is lasting psychological, biological, spiritual, behavioral, and/or social **impact** of the morally distressing event.

Guilt

Shame

**I did something
bad.**

I am bad.

Broad categories of events

- Decisions that affect the survival of others
- Decisions where all options will lead to a negative outcome
- Going against one's beliefs (commission)
- Failing to do something in line with one's beliefs (omission)
- Witnessing or learning about such an act
- Betrayal by trusted others

Combat

- Killing or harming others
- Surviving
- Failing to perform a duty
- Feeling nothing or exhilaration
- Witnessing a harmful act
- Failing to act or report
- Making decisions that affect survival of others



Healthcare

- Inadequate tools, resources, training
- Witnessing a great deal of suffering and death
- Honoring one set of values feels like failing in another
- Trying to save a life while preserving one's own
- Witnessing or participating in rituals around dying that go against values
- Supervisors making decisions that put others at risk
- Feeling numb or nothing
- Abiding with policies with which one does not agree



MORAL DISTRESS AND MENTAL HEALTH

Most Healthcare Workers Will Not Experience Lasting Distress



- Expectations around suffering and death
- Training and preparation
- Healthcare cultural norms
- Messaging/support from peers and leaders
- Acceptance by family and culture at large
- Positive growth is possible

Moral Distress

- Anger, disgust, grief
- Self sabotaging
- Sense of being damaged, flawed
- Changes in sleep and behavior
 - Isolation, avoidance, compulsive behaviors
- Loss of compassion, empathy



Moral distress may lead to...

- Suicidal thoughts and behavior
- Depression
- Substance use
- Worse functioning
- PTSD...

Braitman et al., 2018; Bryan et al., 2018



Morally Distressing Event

Criterion A

- Often but not always related to life-threatening events
- Event transgresses understanding of morality

- Usually related to life-threatening events
- Often but not always fear-based reaction

Consequence of Moral Distress

PTSD

- Spiritual
- Existential
- Avoidance: protect others from you
- Not deserving
- To get better

- Less Research
- Less Consensus

Reminders
Suicide risk
Intrusive Thoughts
Sleep Issues
Substance Use
Self-sabotage
Negative Cognitions
Guilt/Shame
Anger, Disgust, Betrayal
Loss of meaning/purpose
Social problems
Trust issues
Spiritual changes
Fatalism
Sorrow

- Reexperiencing
- Hyperarousal
- Avoidance: preventing reminders

- More research
- More consensus

Guilt, shame, and betrayal

Common following trauma and combat

- 54% endorse posttraumatic guilt in their lifetime
- 41% endorse current posttraumatic guilt
- 35% report being moderately to extremely bothered by their guilt

(Miller et al., 2012)

Can exacerbate posttraumatic distress

Persists without treatment



Guilt/Shame and Posttraumatic Reactions

Journal of Psychiatric Research 100 (2018) 56–62

Contents lists available at ScienceDirect

Journal of Psychiatric Research

psychiatric
research

Journal of Traumatic Stress

ISTSS

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Shame versus trauma-related guilt as mediators of the relationship between PTSD symptoms and posttraumatic stress disorder

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Available online at www.sciencedirect.com

ScienceDirect

Cognitive and Behavioral Practice 21 (2014) 78–88

Cognitive and
Behavioral
Practice

www.elsevier.com/locate/cabp

Citation

Crocker, L. D., Haller, M. J., & Wilkins, K. C. (2014). Shame versus trauma-related guilt as mediators of the relationship between PTSD symptoms and posttraumatic stress disorder. *Psychological Trauma*, 6(1), 1–10. <http://dx.doi.org/10.1037/a0034888>

Trauma Informed Guilt Reduction Therapy With Combat Veterans

Sonya B. Norman, VA San Diego Healthcare System, University of California–San Diego, and National Center for PTSD

Kendall C. Wilkins and

Ursula S. Myers, San Diego State University/University of California, San Diego Joint Doctoral Program

Carolyn B. Allard, VA San Diego Healthcare System, University of California–San Diego

ASSESSMENT

Assessing Critical Factors of Moral Distress

Guilt

Shame

Anger

Disgust

Grief

Betrayal

Guilt and Shame

- Is the person experiencing guilt and shame?
- Trauma Related Guilt Inventory (TRGI)
 - Kubany et al., 1997
- The Trauma Related Shame Inventory
 - Oktedalen et al., 2014

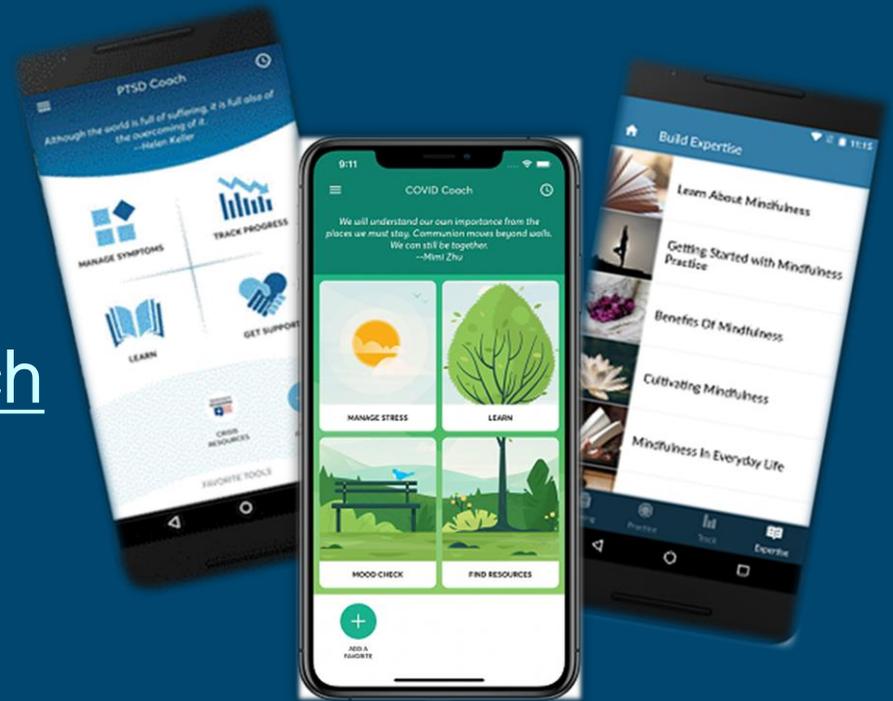
PEER, COLLEAGUE AND LEADER SUPPORT

Self-care

- Not easy for healthcare workers
- Seek support (colleagues, leaders)
 - Support in making difficult choices
 - Support for moral distress
- Watch for “should” thoughts
- Focus on what one can control

Self-care Tools

- Helpful Thinking During COVID-19 (webpage)
- Phone Apps
 - COVID Coach
 - Mindfulness Coach
 - PTSD Coach



COVID Coach Mobile Phone App



The **COVID Coach** app was created for everyone, including Veterans and Servicemembers, to support self-care and overall mental health during the coronavirus (COVID-19) pandemic.

FEATURES INCLUDE:

- **Education** about coping during the pandemic
- **Tools** for self-care and to improve emotional well-being
- **Trackers** to check your mood and measure your growth toward personal goals
- **Graphs** to visualize progress over time



Colleagues

Reach out

Listen

Help broaden perspective

Ok to set limits

Additional Resources

- More information on engaging in self-care and coworker support are included in the Stress First Aid toolkit
- Information on changing unhelpful thoughts is included in the Skills for Psychological Recovery Manual
- Information on engaging in supportive conversations or helpful thinking in the context of pandemics can be found in Tips for Providing Support to Others During the Coronavirus (COVID-19) Outbreak, and Helpful Thinking During the Coronavirus (COVID-19) Outbreak

Support from Leaders

Communicate changing policies, decisions

Send message that moral distress can occur

Check-ins, debriefs, praise, normalization

Remind employees

- They are doing their best under difficult circumstances
- You won't always be your best under difficult circumstances

Destigmatize help seeking

MORAL DISTRESS INTERVENTION

Considerations

- Accepting, non-judgmental, empathic stance
- Stay open/alert to
 - Understand source of distress
 - Own presumptions about perpetration, morals, values, and spirituality
 - Self-sabotage

Research

JAMA Psychiatry | [Original Investigation](#)

Efficacy of Integrated Exposure Therapy vs Integrated Coping Skills Therapy for Comorbid Posttraumatic Stress Disorder

Research

JAMA Psychiatry | [Original Investigation](#)

Efficacy of Prolonged Exposure Therapy, Sertraline Hydrochloride, and Their Combination Among Combat Veterans With Posttraumatic Stress Disorder

A Randomized Clinical Trial

Sheila A. M. Rauch, PhD; H. Myra Kim, ScD; Corey Powell, PhD; Peter W. Tuerk, PhD; Naomi M. Simon, MD; Ron Acierno, PhD; Carolyn B. Allard, PhD; Sonya B. Norman, PhD; Margaret R. Venners, MPH, MSW; Barbara O. Rothbaum, PhD; Murray B. Stein, MD, MPH; Katherine Porter, PhD; Brian Martis, MD; Anthony P. King, PhD; Israel Liberzon, MD; K. Luan Phan, MD; Charles W. Hoge, MD

PTSD Treatment for Moral Distress – Mixed Results

- Trauma focused treatments can reduce guilt (e.g., Clifton, Feeny, Zoellner, 2017; Resick et al., 2002)
- Guilt may persist after PTSD treatment (e.g., Larsen et al., 2019)
- Greater guilt severity associated with less PTSD change (Oktedalen, 2015)
- Is moral distress a focus of therapy?

Addressing Traumatic Guilt in PTSD Treatment

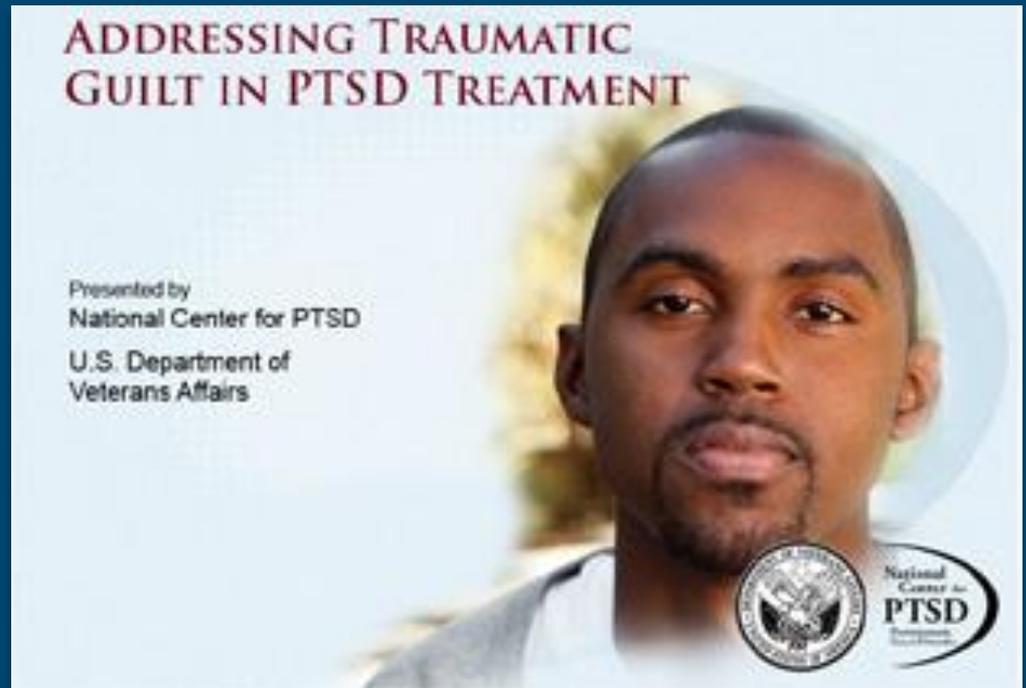


**In Prolonged
Exposure
Therapy**

and



**In Cognitive
Processing
Therapy**



www.ptsd.va.gov/professional/continuing_ed/guilt_ptsdTX.asp

Novel Interventions

 Acceptance and Commitment therapy for MI – Farnsworth et al., 2017

 Adaptive Disclosure – Gray et al., 2012

 Impact of Killing Treatment Program – Maguen et al., 2017

 Spiritually oriented consultation

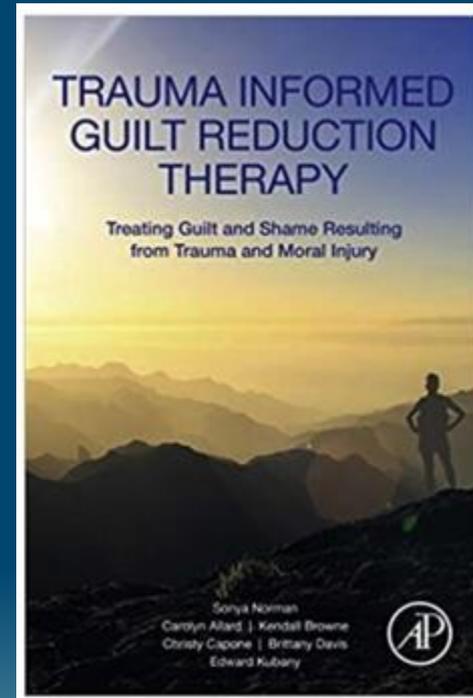
 Trauma Informed Guilt Reduction – Norman et al., 2014

TRauma Informed Guilt Reduction Therapy

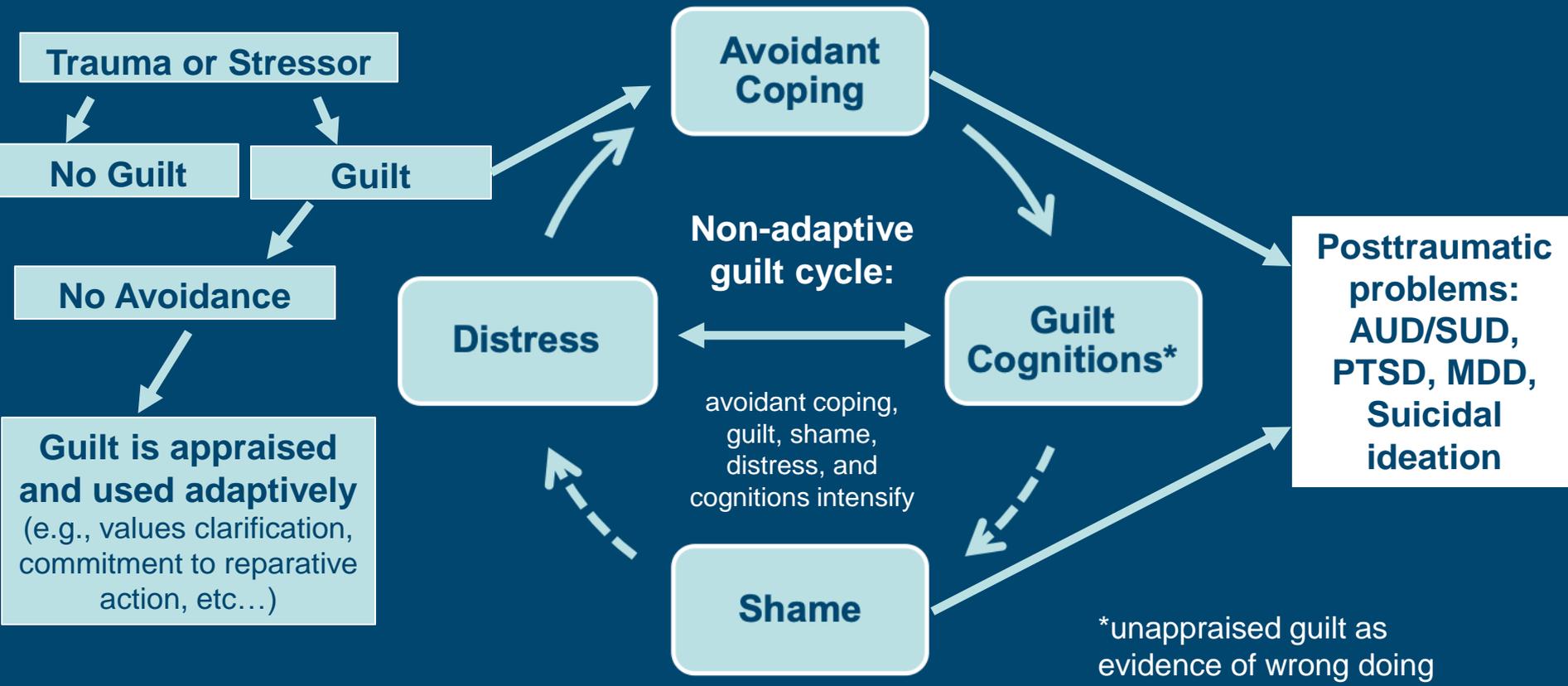
Sonya Norman

Carolyn Allard, Kendall Browne, Christy Capone,
Brittany Davis, Edward Kubany

- 3 Modules, 4-6 Sessions
 - CBT + acceptance principles
 - Transdiagnostic
1. Psychoeducation
 2. Appraisal
 3. Values



Model of Non-Adaptive Guilt and Shame (NAGS) Cycle



Module 1: Psychoeducation

- Non-adaptive guilt and shame model
- Association between guilt/shame and other posttraumatic distress, moral injury
- Start to explore the function of guilt /shame
- Common reasons for guilt

Module 2: Appraisal

- Identify source(s) of guilt, shame, MI
 - Should/shouldn't have thoughts
- Debrief
 - Foreseeability/Preventability
 - Justification
 - Responsibility
 - Wrong Doing

Justification Analysis

	What you did	Option 1 - Mourn	Option 2 – Tell everyone to act appropriately	Option 3 -
Pros				
Cons				

Justification Analysis

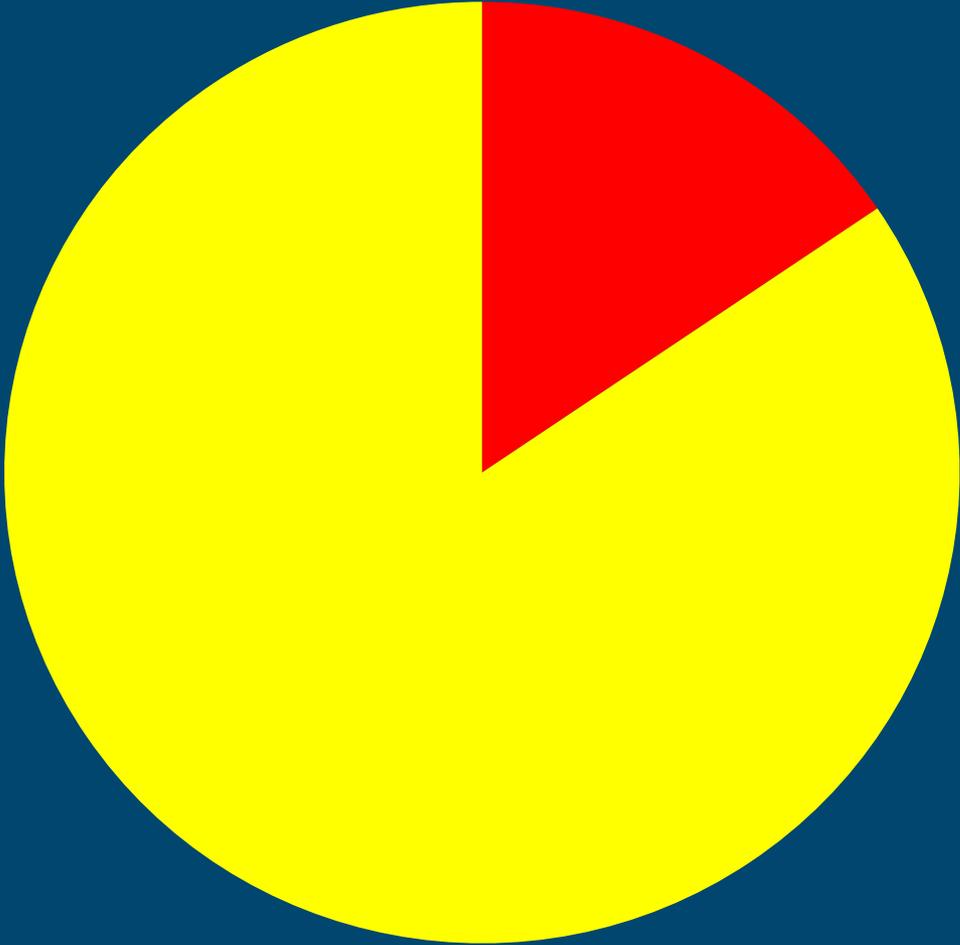
	What you did	Option 1 - Mourn	Option 2 – Tell everyone to act appropriately	Option 3 -
Pros	Got the job done, cope with situation, pull my share	Human reaction	Human reaction	
Cons	Disrespected family	Stand out, not do job, put others in danger	Stand out, alienate self further, insubordinate	

Responsibility Analysis

	Responsibility	%
1	Me	90
2		
3		
4		
5		
6		
7		
8		
9		
10		
Total		

Responsibility Analysis

	Responsibility	%
1	At war	90
2	Orders	90
3	Consequences of insubordination	100
4	Not wanting to embarrass my family	80
5	Sleep deprivation	70
6	Felt numb, didn't feel real	80
7	Didn't want to stand out	90
8	Survivor instinct	90
9		
10		
Total		490



■ me

■ Other

Modules 3: Morals and Values

- To reduce need to express values through suffering
- What would it mean to go on with life feeling less guilty?
- What function does guilt serve re: morals and values?
- Identify values in a number of domains
- Set short and long term goals to live more closely aligned with morals and values



DoD Funded 2-Site Study

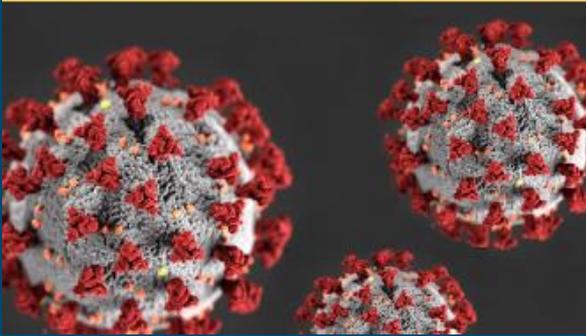
- TrIGR v supportive therapy
- Transdiagnostic
 - PTSD, depression, substance use, suicide
- Post 9/11 Veterans- Deployment Traumas

Where do we go next?

- **From extrapolation to rigorous understanding**
- **Listen and learn**
- **Measurement specific to healthcare workers and COVID-19**
- **Understand prevalence, short and long term impacts**
- **How do we help find a way forward that is meaningful and positive**

Coping with COVID-19

COVID-19: Resources for Managing Stress



Resources from the
National Center for PTSD

www.ptsd.va.gov/COVID

INCLUDES A VARIETY OF RESOURCES FOR

- Everyone (including veterans, their families, and the general public)
- Health Care Workers and Responders
- Employers and Community Leaders

PTSD Consultation Program

We can help

HEALTHCARE PROVIDERS:

- Are you treating Veterans with PTSD? **We can help**
- Do you have questions about the mental health effects of the COVID-19 pandemic? **We can help**
- Are you looking for ways to care for yourself and your colleagues? **We can help**



PTSDconsult@va.gov



866-948-7880



www.ptsd.va.gov/consult





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questions in the Q&A box
and be sure to include your
email address.**

The lines are muted to avoid background noise.



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VHA TRAIN

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To obtain continuing education credit
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PTSD Consultation Program FOR PROVIDERS WHO TREAT VETERANS

(866) 948-7880 or PTSDconsult@va.gov

CEU Process for users of VHA TRAIN (non-VA)

Registration → Attendance → Evaluation → Certificate



*Register in
TRAIN.*



*Listen to the
lecture.*



*Return to
TRAIN for
evaluation.*



*Follow the
directions to
print
certificate.*

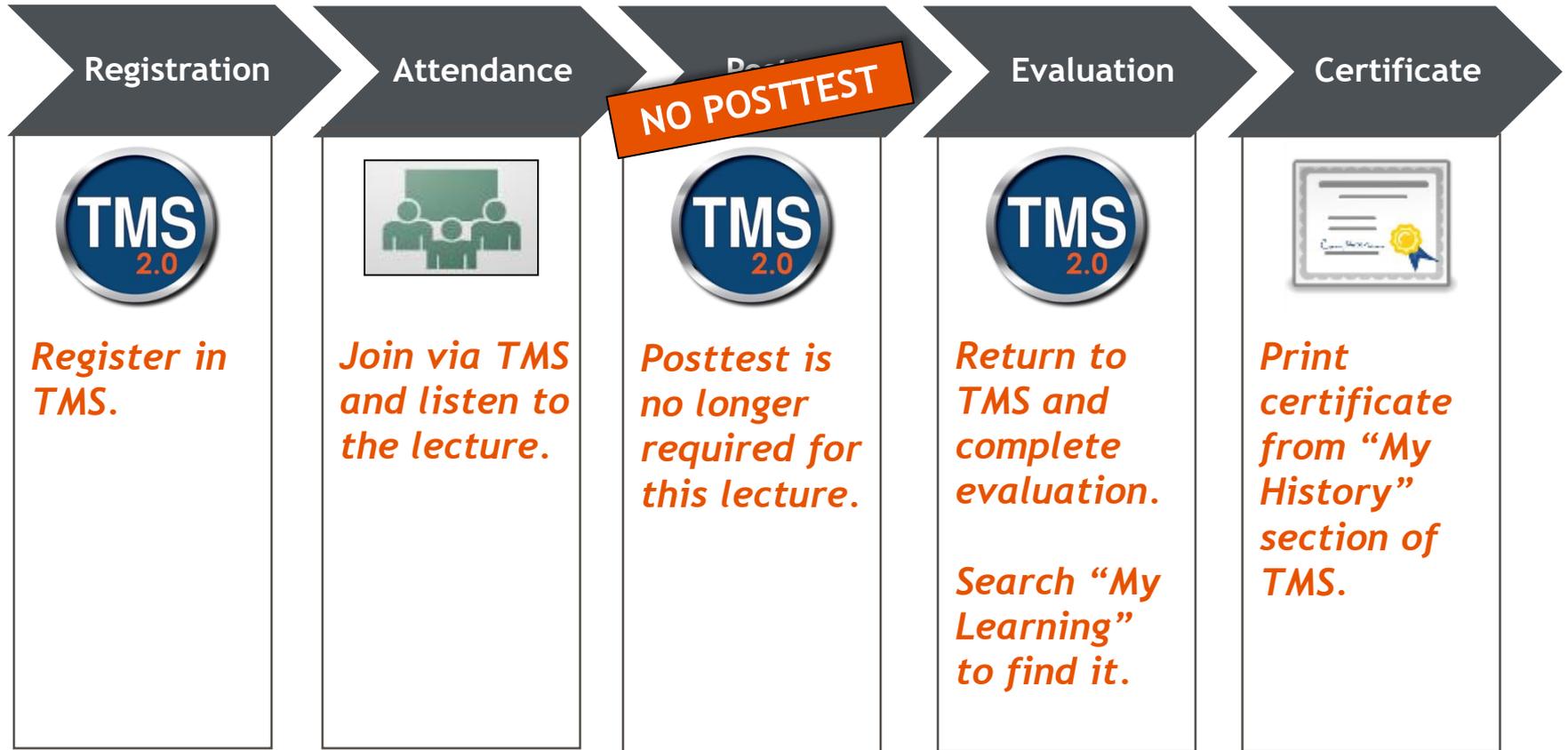
TRAIN help desk: **VHATRAN@va.gov**



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CEU Process (for VA employees)





PTSD Consultation Program

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UPCOMING TOPICS

Proposed topic for June 17

Clinical Considerations for Addressing Intimate Partner Violence in the COVID-19 Era

Katherine Iverson, PhD
Julia Caplan, LCSW

SAVE THE DATE: Third Wednesday of the Month from 2-3PM (ET)

PLEASE NOTE : Topics are subject to change in the coming months

**For more information and to subscribe to announcements and reminders
go to www.ptsd.va.gov/consult**