

“A Systematic Literature Review and appraisal of the evidence for the experience of moral injury in psychiatric and medical health care workers during COVID 19.”

Catherine Morris BSc, MBACP, Diploma in Psychological Stress, MSc
Professor Tayyeb Tahir BSc, MBBS, Diploma in Psychiatry, FRCPsych, MD
University of South Wales

Background

Moral Injury (MI) resides at the intersection of psychology and spirituality. Many centuries old, it demonstrates the pain of self-betrayal and the internal conflict that arises from compromising deep held beliefs or suffering from someone else's compromise.

It can be described as a spiritual wound (Powers 2019). Understanding MI needs to be prioritised and research funded, to create a future strategy to safeguard Frontline Health Worker's (FLHW's) mental health and therefore the patients they care for. The following questions were considered:

- What is the nature of moral injury, its symptoms and definition amongst FLHWs?
- What is the cause of moral injury in FLHWs and what can be learned from the literature?
- What does existing credible literature say about treatment?

Aim

The research aim was to:

- Perform a systematic literature review to raise awareness of the existence and impact of MI amongst FLHWs.
- Consider evidence from the Pandemic.
- Encourage further research, particularly around treatment options.

The goal was:

- A. Provision of new perspectives including around a clinical definition of MI to encourage a move towards diagnosis in future editions of the Diagnostic and Statistical Manual of Mental Disorders (DSM) and the International Classification of Diseases (ICD).
- B. Improved strategies for protecting FLHWs in future pandemics.

Methods

Eligibility criteria: Inclusion criteria involved original, full text, peer reviewed, empirical studies published between January 2020 and December 2023 in English. A search mask was used.

Data Sources: APA PsycINFO, PubMed Central and Scopus were searched for literature from January 2020 to December 2023, with manual searches of grey literature on Open Grey, clinicaltrials.gov, presentations at conferences, journals and reference lists. First searches began on 29 September 2023 and were completed on 30 December 2023.

Study Selection: One investigator independently searched for quality articles and studies on MI during the Pandemic amongst FLHWs. Material was reviewed and checked by a senior staff member. Risk of reviewer bias was reduced by using PRISMA guidelines and extracting data before appraisal of quality.

Results

The total number of identified studies were 235 (included studies - 93 from 20 countries with 97,172 participants).

The results indicated that women and nurses had a high level of MI. There were also 5 studies that suggested psychiatrists may have high levels of MI as a result of the Pandemic, which was an unexpected result. . It was always to be expected that FLHW's such as doctors and nurses struggling with difficult decisions (such as separating dying patients from their relatives) and lack of PPE, equipment, institutional and political support and funding were likely candidates for MI, but psychiatry as a profession seemed to have suffered unduly, although the number of studies was small.. Perhaps in the context of the personal difficulties faced by psychiatry caused by COVID-19, the difficulty of the increasing workload and a lack of organizational support, there may have been increased cases of MI.

The studies identified tended to have participation criteria of over 18's for the age policy, where demographics were considered. This meant the age range was generally between 18 and 65, though there were a handful of men and women older than this. No studies had equal numbers of men and women and the percentage of women on average was 69.4%.

There were studies from a number of different countries, including Austria, Australia, Bahrain, Canada, China, Ghana, India, Israel, Italy, Jordan, Lithuania, Netherlands, Pakistan, the Philippines Republic of Ireland, Romania, Spain, the US and the UK, so there was good representation in terms of ethnicity, although there was a bias towards American studies and no studies from Africa.

Impact

The findings showed higher MI is associated with symptoms of PTSD/ CPTSD, depression, burnout, anxiety, and suicidal ideation among FLHWs. This result provides a moderate but significant association. Issues identified were a power imbalance, MI creating poorer mental health with an emphasis on psychiatrists and women and a spiritual element that needs to be considered in treatment to help resiliency..

The research indicates that spirituality can help FLHWs deal with PMIEs or heal from MI. It needs to be acknowledged that MI carries at its heart spiritual and existential conflict. Race and social issues may also contribute as predisposing factors. This systematic review provides a foundation for definition, understanding causes and exploring treatments.

Quotes from Frontline Health Workers during the COVID19 Pandemic

“I feel, at times, that I am considered totally expendable and that if I die or become ill not only will it have been preventable with political will, I will simply be an inconvenient statistic. I'm not a COVID hero, I'm COVID cannon fodder.” (Senior Doctor)
(Harris et.al 2021)

“Telling someone that their loved one is going to die over the phone, and then inviting them in to watch them die, when they haven't seen them for weeks is really traumatic for all.” (Senior Doctor)
(Harris et.al 2021)

References

- Harris, S., Jenkinson, E., Carlton, E., Roberts, T., Daniels, J. (2021) “It's Been Ugly”: A Large-Scale Qualitative Study into the Difficulties Frontline Doctors Faced across Two Waves of the COVID-19 Pandemic International Journal Environmental Research and Public Health. 18(24). p.13067. Available at: doi: 10.3390/ijerph182413067.
- Powers, B. (2019). *Full Darkness: Original sin, moral injury and wartime violence*. Michagon: W. B. Eerdmans Publishing.