



Incorporating Moral Resilience into an Undergraduate Nursing Curriculum

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Purpose

- The purpose of this program is to address the process of incorporating moral resilience information within an undergraduate nursing curriculum.

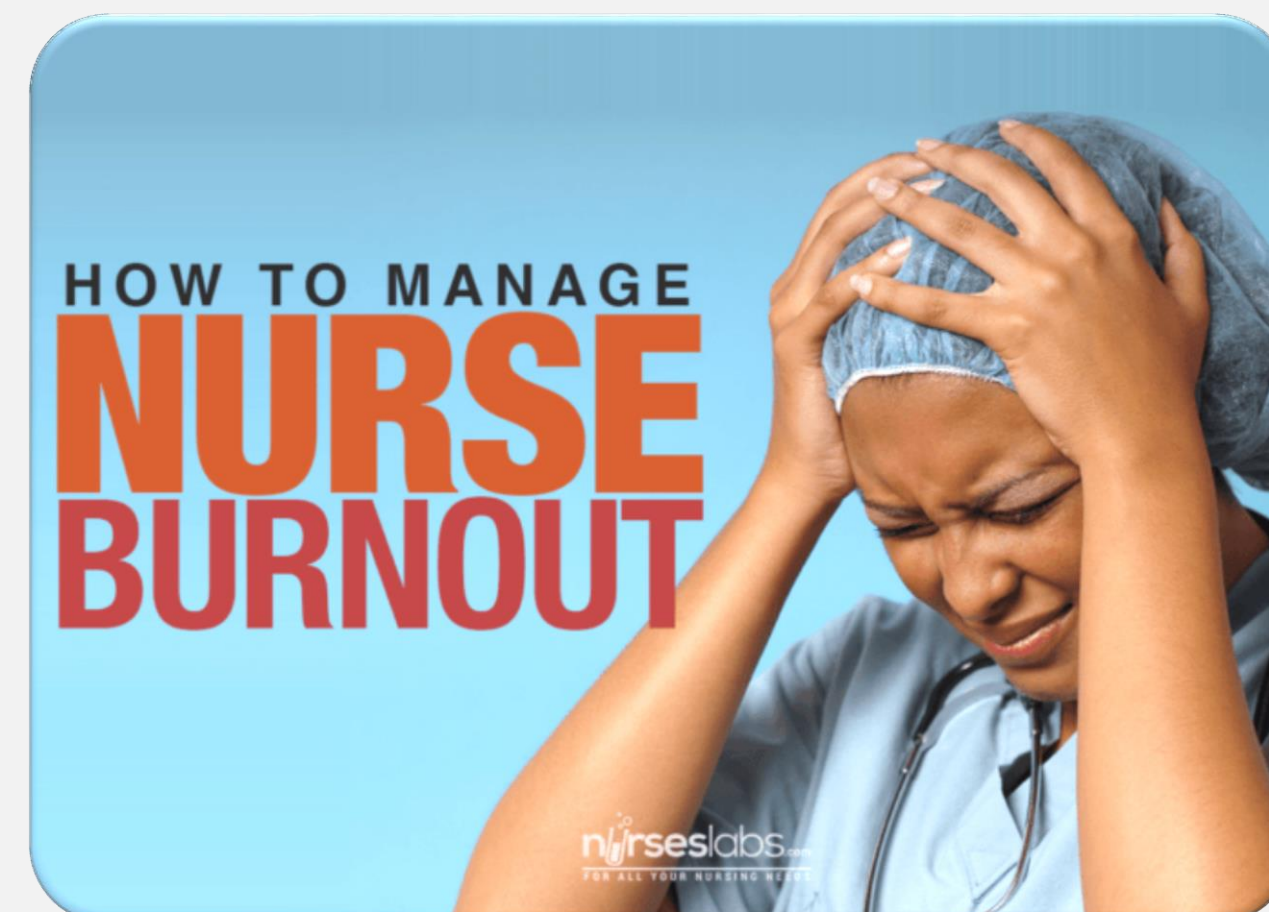
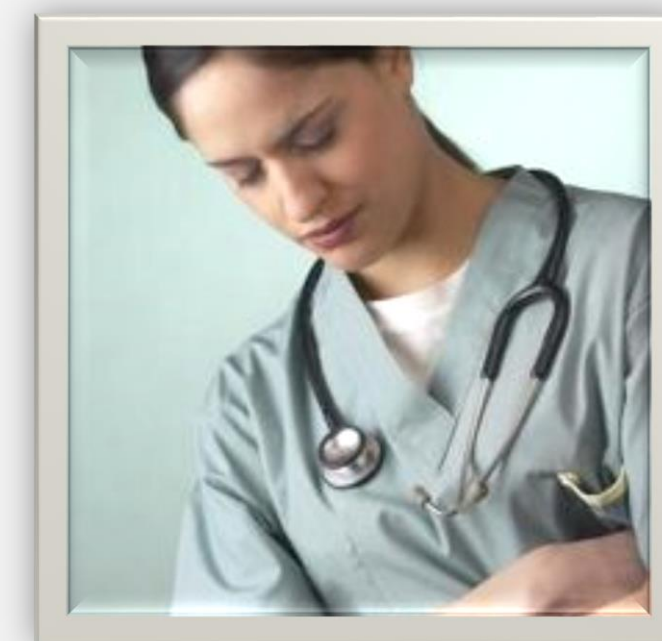
Background

The concept of moral distress is not new and was first discussed by Jameton in 1984. He noted that “one knows the right thing to do, but is unable to perform that action because of constraints.” Moral distress and its relationship to nursing burnout has been discussed for many years, yet very little has been done to educate nursing students on this issue.

- Moral resilience is a concept that began as a method to assist those experiencing moral distress.
- A Johns Hopkins symposium on building moral resilience was held in 2016 and the participants noted 4 areas on which to focus:
 - Practice, education, research and policy
- Conclusions were to:
 - Recognize when moral distress occurs
 - Develop ways to manage these ethically challenging events

Methods

- Methods to incorporate moral resilience include:
 - Ethical dilemma scenarios in simulation
 - Discussion boards on morally challenging problems
 - Mental health first aid program
 - Group discussion on coping methods



Process

- Over the past 2 years we have begun implementing these programs into our curriculum
- Beginning with the mental health first aid course, which the mental health faculty give during 2nd semester as part of the 3 CR course.
- In 3rd semester, the students are given a discussion board on a moral distress situation.
- The students were asked to answer the following questions after viewing a PPT on Moral Distress and Moral Resilience and reading articles on Moral Distress, Moral Resilience and Compassion Fatigue.
- Please review the attached articles and PPT and discuss the following:
 - 1. What does moral distress in nursing means?
 - 2. What types of patients may cause this feeling?
 - 3. What you can do to help relieve this stress?
 - 4. Was this discussion helpful and how can you use this in your career?
- For 4th semester, the students are given 2 discussion boards on Compassion Fatigue and Incivility. They are asked to read the scenarios and comment.
- The scenario on Compassion Fatigue is:
 - A 73 year old female is brought to the ED by her son. She is unresponsive, but breathing and has a history of lung cancer. The family needs to make a decision about end of life care. (The scenario itself is lengthy and the students are required to read an article on End of Life and Moral Resilience prior then answer the questions).
- The scenario on Incivility is:
 - A new nurse is transferred to the ICU and the other nurses are not receptive of her. They demonstrate bullying behaviors to her. (Again, the scenario is lengthy and they students are required to read 2 articles on incivility prior then answer the

- Simulation is incorporated into the curriculum during 2nd, 3rd, 4th and 5th semesters.

- Specific scenarios on morally distressing events are incorporated during the chronic rehab course with: A young spinal cord rehab patient; 3rd semester with an elderly hospice patient with may be receiving inadequate pain control; 4th semester with an HIV patient who does die and a simulation on bullying by another nurse; 5th semester with a patient who has a cardiac arrest. The students must participate in a code situation, in which the patient does not recover. There is discussion and debriefing after all of the scenarios



Responses

- Student responses on the Discussion Boards, through Simulation Reflections and in class discussions have been overwhelming positive.
- Reflections centered on some major themes:
 - Unaware of coping methods for moral distress
 - Unaware of what moral distress meant
 - Not given any thought as to how to handle their feelings
 - Important to not become attached to their patients
- Reflection Themes:
 - No idea that moral distress can lead to physical and emotional burnout
 - Had to plan better as to how to take care of themselves
 - Often thought that when they finished school, they would be successful and patients would be grateful, they didn't think about difficulties
 - Thought hospitals would have systems in place for these events.

Conclusions

- Imperative for schools to discuss the concepts of moral distress, compassion fatigue and moral resilience with their students.
- Student must understand what moral distress means and learn coping strategies to handle these events.
- Building moral resilience can only occur when students are aware of events and can plan for methods of support

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