FIRST OPINION

Physicians aren't 'burning out.' They're suffering from moral injury

By Simon G. Talbot and Wendy Dean July 26, 2018   Reprints

Supporting troops of the 1st Australian Division form a silhouette as they pass towards the front line in Belgium during the first World War.

FRANK HURLEY/HULTON ARCHIVE/GETTY IMAGES

https://www.statnews.com/2018/07/26/physicians-not-burning-out-they-are-suffering-moral-injury/

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What is Moral Injury?

- Physicians are the masters of resilience
  - Endured lost sleep, lost years of young adulthood, huge opportunity costs, family strain, financial instability, disregard for personal health, and other challenges to become physicians
  - Once in the clinic, their focus is ensuring the best care for patients
  - Failing to consistently meet patients' needs erodes physician well-being, leading to moral injury

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What is Moral Injury?

"Moral injury occurs when we perpetrate, bear witness to, or fail to prevent an act that transgresses our deeply held moral beliefs…. Every time we are forced to make a decision that contravenes our patients' best interests, we feel a sting of moral injustice. Over time, these repetitive insults amass into moral injury.

The difference between burnout and moral injury is important because using different terminology reframes the problem and the solutions. Burnout suggests that the problem resides within the individual, who is in some way deficient."

Dean W, Talbot S, Dean A. "Reframing Clinician Distress: Moral Injury Not Burnout." Fed Pract. 2019; 36(9): 400-402.

British Medical Association Study 2021

- Moral Distress = Psychological unease; professionals identify ethically correct action but are constrained in their ability to take that action, when institutionally required behavior does not align with moral principles

- Moral Injury = Sustained moral distress leading to impaired function or longer-term psychological harm

- Moral distress is a situational problem, while moral injury is how an individual experiences the problem. Addressing moral distress more straightforward
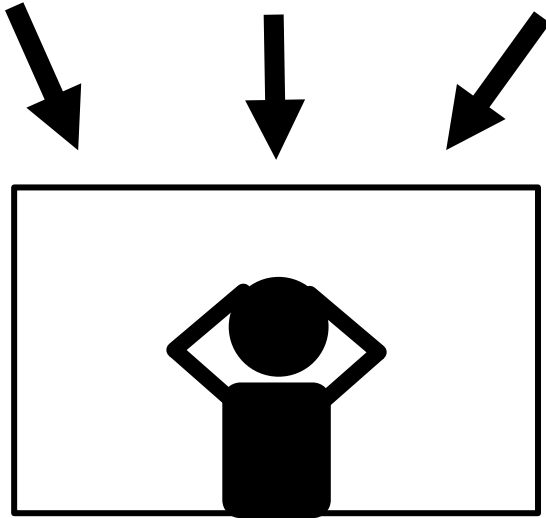
https://www.bma.org.uk/media/4209/bma-moral-distress-injury-survey-report-june-2021.pdf

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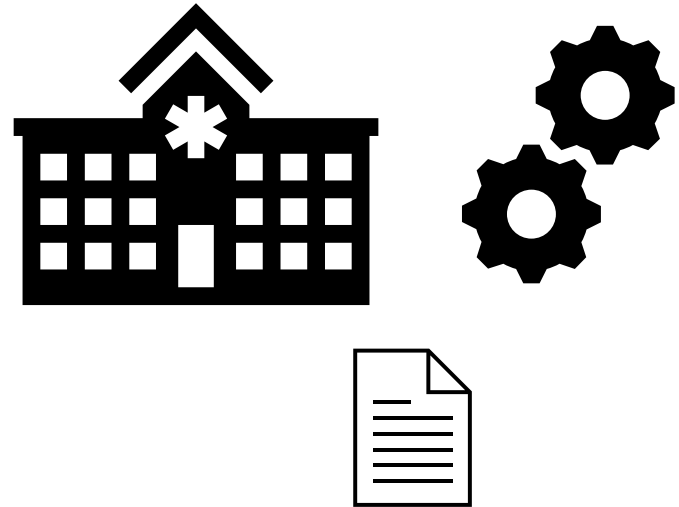
Burnout vs. Moral Injury

- Burnout: "Feelings of exhaustion, professional cynicism or reduced professional ability resulting from chronic workplace stress"

- "Though the terms are related, burnout does not necessarily have a moral component"

https://www.bma.org.uk/media/4209/bma-moral-distress-injury-survey-report-june-2021.pdf

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Burnout vs. Moral Injury

Burnout: Combat with individual behavioral changes

Moral Injury: Combat with systems changes

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Examples of Sources of Moral Injury in Healthcare

- Insurance preauthorization process, care denial
- EHR documentation demands detracting from patient focus
- Withholding unwelcome but necessary advice to patients because of fear of reducing patient satisfaction scores
- Being asked to do more work than can safely be done
- Inadequate resources to provide care to suitable professional standards (e.g., cost, supply chain)
- Witnessing acceptance of poor standards of care
- End-of-life care decisions

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What Moral Injury Feels Like

- Lonely

- Disempowered

- Out of control

What Moral Injury Looks Like

- Disengagement

- Disruptive behavior

- Physician suicide rates twice that of active military

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How Can Leaders Help?

Impact of Leadership Behaviors on Burnout

Leadership quality	Burnout (% [95% CI])			Satisfaction (% [95% CI])		
	Prevalence of those rating leader favorably	Prevalence of those rating leader unfavorably	*P* value	Prevalence of those rating leader favorably	Prevalence of those rating leader unfavorably	*P* value
Holds career development conversations with me	36 (34.1-38.4)	51 (47.5-55.2)	<.001	82 (80.2-83.5)	51 (46.6-55.1)	<.001
Inspires me to do my best	36 (33.6-37.8)	52 (48.6-56.3)	<.001	83 (81.6-84.8)	46 (42.2-50.5)	<.001
Empowers me to do my job	35 (33-37.1)	56 (52.4-60.4)	<.001	86 (84.9-87.8)	46 (41.8-50.1)	<.001
Is interested in my opinion	36 (33.7-37.9)	54 (49.6-57.5)	<.001	85 (83.4-86.5)	48 (44.1-52.5)	<.001
Encourages employees to suggest ideas for improvement	37 (34.5-38.6)	52 (48-56.4)	<.001	86 (84.9-87.8)	53 (48.7-57.1)	<.001
Treats me with respect and dignity	38 (35.6-39.5)	56 (50.7-61.9)	<.001	94 (93.1-95.1)	69 (64.7-72.5)	<.001
Provides helpful feedback and coaching on my performance	35 (33.1-37.4)	50 (46.5-53.6)	<.001	78 (76.2-79.7)	41 (37-45.4)	<.001
Recognizes me for a job well done	36 (33.9-38)	53 (48.6-56.5)	<.001	84 (82.8-85.9)	48 (43.5-51.9)	<.001
Keeps me informed about changes taking place at Mayo Clinic	37 (34.5-38.6)	53 (49-57.7)	<.001	88 (86.7-89.4)	54 (49.8-58.1)	<.001
Encourages me to develop my talents and skills	35 (33.2-37.3)	54 (50.4-58)	<.001	84 (82.1-85.3)	45 (40.4-48.8)	<.001
I would recommend working for your immediate supervisor	36 (34.1-38.2)	53 (49.3-57.6)	<.001	87 (86-88.8)	49 (44.9-53.3)	<.001
Overall, how satisfied are you with your immediate supervisor	36 (34-38.1)	53 (49-57)	<.001	87 (85.3-88.2)	47 (42.5-50.7)	<.001

Shanafelt TD, Gorringe G, et al. "Impact of Organizational Leadership on Physician Burnout and Satisfaction." Mayo Clinic Proceedings 2015; 90(4): 432-440.

Impact of Leadership Behaviors on Burnout
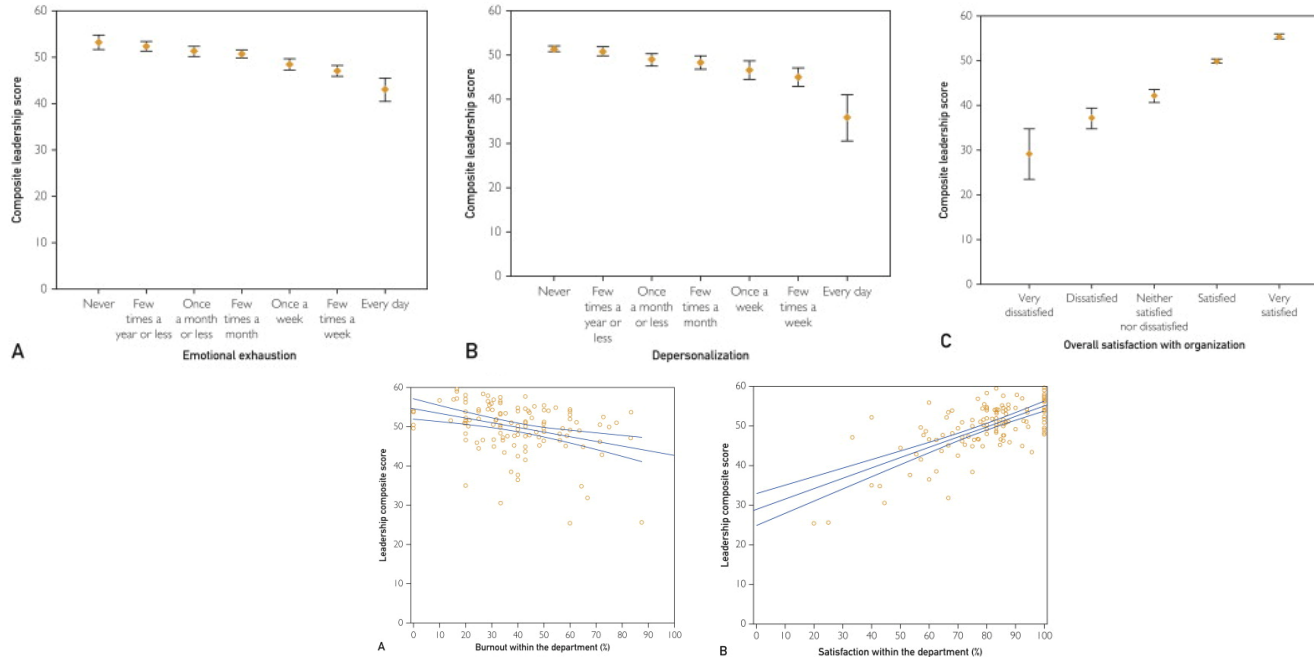
Shanafelt TD, Gorringe G, et al. "Impact of Organizational Leadership on Physician Burnout and Satisfaction." Mayo Clinic Proceedings 2015; 90(4): 432-440.

Structural Solutions (from UK survey)

- Adequate funding and resourcing

- Increase staffing

- Empower doctors

- Develop an open and sharing workplace culture (culture of safety, allow individuals to speak up)

- Provide support for employees

- Streamline bureaucracy

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Leading By Example

- Model trusting and trustworthy behavior
    - Character: Integrity and intention
    - Competency: Capabilities and results

Covey, SMR (2008). The SPEED of Trust: The One Thing that Changes Everything. Simon & Schuster

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Leading By Example

- Model kindness
    - Include: Respect and psychological safety
    - Inform: Transparency
    - Inquire: Solicit input
    - Develop: Nurture professional development
    - Recognize: Authentic appreciation and gratitude

Berry LL, Awdish RLA, Swensen SJ. "5 Ways to Restore Depleted Health Care Workers." Harvard Business Review (digital), Feb. 11, 2022.

How Individuals Can Engage with Leaders

- Reciprocate trust and kindness
- Assume good intent (until proven otherwise)
  - Seek to understand why system is the way it is
  - Educate leaders on the impact of the system on you, your colleagues, and the patients
- Identify on the problem, be open to solutions
  - e.g., "there are times when the volume of work feels overwhelming to me and I feel rushed", versus "You need to hire more people"

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Thank you!

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