



Watson Caring  
Science Institute

## **Caring Science and Moral Distress in Nurses during COVID-19 Pandemic**

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**Plan:** We will need to incorporate and utilize Caring Science to prevent and mitigate the anticipated moral distress in nurses and other healthcare workers. It is widely acknowledged that chronic stress is an occupational hazard of nurses which may lead to the development of physical and mental illnesses. “Nurses are often guilty of caring for others at their own expense and neglecting their own needs” (Myers, 2017, p. 261). Instead, nurses must first take care of themselves; improvements in the quality of nurse self-care should ultimately improve the quality and safety of the patient care they provide.

Moral distress has been defined as:

- The condition of “knowing” the morally right thing to do, while institutional, procedural, or social constraints make doing the right thing nearly impossible. (The American Nurses Association (ANA) Webinar Series on COVID-19, #3, 2020)
- The gap between what you expect to be happening and reality. (The American Organization for Nursing Leadership (AONL), 2020).
- It involves the response to the inability to take action that one believes is morally right. And in some cases, this inability leads to both physical and emotional responses that are termed “moral distress” (Morrison & Furlong, 2019, p. 114). It is vital for nurses, and their managers, to recognize this and implement strategies to prevent harm caused by these physical and emotional responses.

**Problem** = Nurses are experiencing moral distress as a result of the COVID-19 pandemic which has created and continues to create the need for extensive, intensive care of infected critically ill patients who often die, despite best efforts of doctors and nurses. Not all patients can be saved, which alone creates moral distress for healthcare providers. There has been a surge in cases causing shortages of PPE, with allocation of resources, both material and human, plus facing a novel virus with many unknowns, and daily information indicative of multi-organ system involvement. This has created a perfect storm for stress, anxiety, fear and moral distress for nurses on the frontlines of this pandemic, who plan for and provide care to patients. Additionally,

- They are in prolonged contact for long periods of time and are often the only person at the bedside to provide the physical care, communication, comfort, human caring, and hope to these ill patients who are isolated due to risk of contagion.
- The patients' loved ones (are) may not be allowed to visit for the same reason.
- These patients often die, with the nurse the only one present
- Some nurses are losing several patients daily/weekly.

Surge Capacity Status which has caused a significant shifting standard of care based on the contingency, or Crisis level of strategy, can cause ethical and moral dilemmas for nurses who may need to re-use and re-allocate resources and care. There is a strong obligation of Beneficence, yet the nurses may find inner conflict within the context of care provided, thus experiencing moral distress. Furthermore,

- They may disagree with the level of care they are directed to provide.
- There is a need to balance the good of the patient with that of the community
- There is a need to balance care of patient with protection of self and one's family members.
- There is a need to feel prepared.
- There is a scarcity of resources
- The knowledge about the characteristics of this novel virus is evolving daily—there are many unknowns.

**Intervention** = The application of Caring Science Theory using the Caritas Processes to assist with coping by developing a brief intervention for nurses to be posted on the Watson Caring Science Institute homepage.

The primary topic prominent in all the literature, webinars, and chat lines regarding nurses and the pandemic is the importance of Self Care. There will not be a successful endeavor to mitigate the harms to mental health of nurses during and following this pandemic, unless nurses begin to take care of themselves. It seems as if this is a simple process, yet it is hardly understood or practiced. Clearly, nurses need to heed the call for Self- Care as "Failing to protect self, endangers that patient and all future patients. And Self-Care is essential!" (ANA webinar #3, (2020).

**Where do we begin, and how can Caring Science play a role? The theory resides in the single words in purple, which invite the nurse to ponder the meaning of each Caritas Process defined by Watson (2018) as part of transpersonal consciousness.**

### **Caritas #1- Embrace**

*Cultivating the practice of loving- kindness and equanimity toward self and others, as foundational to Caritas-Veritas moral value consciousness.*

Without Self-Care we lose the ability to truly understand the vulnerability of others. We teach nurses to understand that in order to provide caring, compassionate, respectful care, the caregiver must be able to be authentic and in the present when providing care. How do nurses do this? We breathe, we meditate, we concentrate, we listen, “and we open up our hearts and our hands and we go deep within. “Mindfulness meditation practice is one example of how nurses can enhance self-care” (Meyers, 2017, p. 261).

First, consider that YOU are worth taking time for yourself each day, even if it's only a few moments. You can incorporate micro-practices which take only moments into your daily routine. Dr. Watson advises us to learn to center self in order to be fully present using ‘touchstones’ which you can keep in your pocket as a reminder to think with intention-- in the beginning upon awakening, and again in the middle of the day while at work (between patients, and whenever stressed), and again at the end, once home, and reflecting upon your day.

Recognize your own goodness and worth and affirm that daily. It is essential that you have compassion for YOURSELF. Reset your expectations at this time, being practical and ready to adjust the expectations for yourself, and your team if you are a leader. Avoid being overly critical of yourself during a crisis--it is not a good use of your energy (AONL, 2020). There are ways to cope and build resilience in yourself, including naming the source of your distress and starting to do something about it. If in a leadership position, consider how your style, how you manage, and the traits you wish to develop in your team; they need to be in you first. Refresh your own coping strategy. Begin with Caritas Process #1.

Caring Science tells us it is vital to maintain a vibrational energy level to sustain self and others. You need to harness your inner strength amid challenging times. (AONL, 2020). Experiencing things which you enjoy are essential. Refresh yourself by trying a new skill or hobby, or by physical exercise. Enjoyment of things in nature increases our energy, and the more we replenish our energy, the more we can to give. Getting enough rest and sleep is also necessary.

Find a way to rejuvenate yourself- often rituals offer pauses for self-care. For example, simple acts such as smell a flower- watch the sunrise, say a prayer of hope and take a deep breath. The ways are limited only by your ideas; we may all have different ones. Compile a written list of your favorite things. It only takes a moment to add to this list daily as you think of one thing you may be grateful for. YOU can do this, and Caring Science can help to guide your way. You might share your micro-practices by writing each of things on a piece of paper and posting on a communication board on your unit. If others join in this activity you will get fresh ideas of things to try.

Additional ways Caritas Science might be employed to help prevent and mitigate the mental health harms of this pandemic are delineated below.

### ***Caritas #2- Inspire***

*Being authentically present; enabling faith-hope/belief; honoring the subjective life world of self/other.*

Learning to listen with intentionality, without judgement, allows one to be able to honor the other's belief system. It is only once we learn to do this for ourselves, that we can be authentically present with our patients. This approach is a foundational practice and we need to learn how to build upon it. Practicing this process means to be able to create silence and reflective pause. Doing this promotes the connection between nurse and patient, which is a critical element that tends to be missed during times of moral distress and other anxious and potentially unethical activities. It is important to examine your own beliefs and continue practicing any spiritual activities which are part of your being. That is your own starting point, and you need your spiritual grounding more than ever.

### ***Caritas #3- Trust***

*Sensitivity to self/others; cultivate one's own spiritual practices—beyond ego to transpersonal presence.*

Refocus on what matters. In high stress situations we can get “too into our heads”. Step back into your senses by taking a moment to mindfully pause and remembering WHY you are doing this work. In Caring Science we talk about getting out of our heads and into our hearts. Micro-moments of pause in which you center yourself can help reorient and focus during times of distraction and despair. The benefit of this is obvious. Jean Watson reminds us “to remember who we are and why we came here: To Love, To Serve, and To Remember” (Watson, 2005, p.139). That is why we do this work. Trust in self, our colleagues, and other members of the health care team is important. When the stakes are so high, with life on the line for all, it is vital.

### ***Caritas #4- Nurture***

*Develop and sustain helping, trusting, loving, caring relationships.*

What does nurture mean, and why is it important during this pandemic? It is a basic critical element for our survival during this time of relative isolation while sheltering at home or quarantining with the attendant limited physical contact. First, caring for our own body, mind, and soul becomes higher on our scale of values and is paramount for maintaining health. And developing and sustaining those human relationships that we have established is important. Phone calls and facetime, and even the lost art of letter-writing can maintain the relationship while physically distant. Creating more opportunity for authentically relating to all people is important; it takes some imagination, but we can find ways to interact, e.g. via zoom meetings, social media, playing games virtually or sharing a hobby/interest with another or a social group.

Those who need us most to reach out as nurturer are our patients; they need us to be inventive to show how we care for them, in body, mind, and soul. We may be the sole nurturer as visitors are restricted or totally forbidden. Physical care in the form of a back rub or other comfort measure which can be incorporated into those precious moments at the bedside show the loving care and help to ease the fear and suffering. Families are another group needing our attention. They feel helpless and possibly hopeless, with their loved one in such a vulnerable situation with this foreign, life-threatening illness. Whatever

we can do as the conduit for the communication between family and patient will be important for all. Our colleagues and all members of the healthcare team on the front line are caring for patients under dangerous and confusing conditions. They certainly need our nurturance, too. It will not always be easy to be nonjudgmental during highly stressful times, yet we must meet our colleagues and others where they are-- with love and regard that is unconditional. To do this we need to be understanding and be mindful of our own verbal and nonverbal communication, and be honest and genuine, sensitive, open and able to engage in a relationship that is also open and honest and more than ego based.

Practicing our own path to wholeness will nurture self and enhance our ability to engage others in creating their own ability to nurture self. This builds a sense of community wherein each of us recognizes how we are each a part of a whole, and what affects one affects all, and what affects the whole affects each of us. This extends to a global consciousness which will allow us all to utilize and share sacred spaces which is paramount to our existence going forward. In order to promote and develop trusting relationships, we need to be authentically living a life of healthiness, peace and caring for self and others.

### ***Caritas #5- Forgive***

*Allow for expression of positive and negative feelings; authentically listen to another person's story.*

Unfortunately, crisis management may not allow for us to practice as we have been taught or believe is the right way to be, both in our physical presence with the patient, in our clinical care and in following our ethical beliefs. Naming the source of your distress is the 1st step in addressing it. Inward self-reflection is important in Caring Science. And journaling is an important activity in this reflective practice model to express what you are feeling; it is clarifying and cathartic. We ask our patients to tell us what they are feeling; we listen to their story. We need to do it for our self. Ask yourself: What values of mine are in conflict? What are my competing obligations (to patients, families, team, organization, self?) What is at stake for me, personally and professionally?

- Acknowledge what you are experiencing and observe your thoughts and the emotions influencing them. Emotions are the signals that you are experiencing conflicts with your value system. Identify *how* you feel and *what* is driving that feeling. It gives you more power to process your emotions and move through them in a healthy manner.
- Common feelings may be: Anger-- feelings of moral outrage are understandable. To help process, try to identify the cause (s). What values are conflicting? Naming the source of your anger can help you make sense of how you feel.
- Grief-- response to change of any intensity, but especially when change has been abrupt or unexpected. As you discover what is driving your feelings of grief, you may be better able to identify where you can ask for help.

- Guilt—Do not let the size of the problem minimize or invalidate the work you have already done; continue to try your best and do what you are able (AONL, 2020). Being compassionate to yourself requires you to recognize your humanity--you *cannot* fix everything or save every patient. Also, identification of your feelings is essential. Do not judge them. They can be positive or negative and they are temporary. ***Above all, you need to forgive yourself for any perceived error in judgment or act of omission or commission as you tried your utmost to provide the best care and tried to save your patients. Recognize that the losses were not in your control!***
- Anxiety--Remind yourself of what you *can* control and take small steps toward your goal. Use the acronym HALT= hungry, angry, lonely, or tired. All these conditions can intensify our feelings. (Turner,C.).

### **Caritas #6- Deepen**

#### *Creative use of self and all ways of knowing; artistry of Caritas nursing*

While no one likes uncertainty, we need to embrace and deliberately befriend it at the beginning and throughout the crisis. Acknowledge that you may not know what to do in a situation, and you can only make the best decisions you can with the information you have presently. Caring Science recognizes that there are multiple ways of knowing, even the unknowing.

- Reset expectations by being practical and ready to adjust the expectations for yourself and your team; and help everyone through it. Avoid being critical of self.
- Acknowledge strong emotions in self and others. Accept your emotions and show staff you accept theirs as well. TALK about these and how they drive actions. Talk about how you can help each other through anxiety and fear. This is another example of authentic presence, in which you are present and accepting of the other person.
- Manage your fear--it can shut down the creative parts of our brains. You will need to make hard choices that require courage. Resist the pull of fear. Remind yourself you have faced hard situations before, and you are more resilient for it. Remind yourself you/we can get through this situation, too. Preserve your integrity. Reorient your moral compass: You know who you are and what you stand for--return to that core every time! Your core values and purpose provide the anchor and starting point for discernment about how to make decisions that are in alignment with it.
- You can do this in just a moment! Take a breath to gather your attention and focus on what's happening right now. With another breath remember what brought you to your path of service & why it matters--this helps to reorient your mind amid crisis and chaos. It is not about being perfect in a crisis, but about turning toward our vulnerability and even our mistakes, using every opportunity to learn and grow. Trust your purpose and vision and trust the processes you have in place.
- Know we are in this together. There is an ethical need to fulfill your duty to care for others, but this does not mean being a martyr. You also have a duty to care for self.

Self-respect begins with knowing your limits and extending compassion to yourself. Ask yourself: How much of this is mine to carry? How can this be shared with others?

- Notice and encourage the positives.

### ***Caritas #7- Balance***

*Engage in transpersonal teaching-learning-caring relationships and subjective meaning.*

Remember the transient nature of all things. This, too, will pass eventually. While this pandemic may linger, with its peaks and valleys and demographic and geographic trends, for some undetermined amount of time, it will end at some point. And the crisis of this moment will surely end in a shorter amount of time, as is the nature of all crises. It helps to remind oneself when you think you can't go on much longer; there will be a pause in the expansion of the number of cases, and then there will be a contraction of the number of cases. This is the way of all things in nature. It will afford relief from the exhaustion. And you will be prepared for the next spike in cases, and you will be prepared with all you were lacking before--more knowledge, PPE, staff, space, etc. But most importantly, you will know deep down that you can do whatever is needed in the moment; you have done it before! Thus, you will emerge wiser, stronger and more able.

### ***Caritas #8- Co- Create***

*Create a healing environment at all levels; subtle environment.*

Promoting the caring relationship by creating the sacred space that brings comfort, healing and wholeness to those that experience it. In order to *be* the environment that one wants to live in, and promote, one needs to become more self-aware. To witness and allow for more intent to show love to all, even those who do not see what I see and are not aware of their own behaviors. This requires authenticity and calmness that can be brought on by practicing self-awareness and presence in the moment.

It is by creating an environment that makes one (including oneself) feel safe and calm, we can more easily bring intentional, mindful, authentic, caring, and loving self to the moment as an open and self-aware being. Modeling the behaviors that align with a caritas consciousness--using a look, a glance, a gaze, and a voice that invites and welcomes (Watson 2008, p.46) invites others into my spiritual space. Caring science is linked to healing and human well-being at the core level of its existence and purpose in nursing. We open ourselves to our vulnerable patients and others which allows them to be more open and receive what is available to them for healing from within. I can be the me that I want to be and create the healing, loving, caring space for spiritual self-awareness and growth.

Creating caring intentions and a healing environment may include some, or all, of the following (Wagner, 2020):

- The nurse is the environment- -what you bring to the situation is critical for this to take place and

- You become the environment you want to see
- Being your authentic and present self
- Seeing and acknowledging the other as a unique person
- The light, art, cleanliness, privacy, nutrition, beauty and safety play an important role in preserving human dignity and the comfort of our patients, family and staff

Through practicing self-awareness and “creating a healing environment, some of these techniques allow for an environment of Co- Creation to exist at all levels (physical, non-physical, subtle environment of energy and consciousness), whereby authentic caring presences, potentiates wholeness, beauty comfort, dignity and peace” (Wagner, 2020).

### ***Caritas Process # 9- Minister***

*Reverentially assisting with basic needs as sacred acts, sustaining human dignity.*

Nurses perform the most basic tasks to care for the body of the other, and use themselves as the support, sharing energy needed by the person so sick with Covid-19. The gentle touch while doing skillful assessments and treatments is needed, and is to be done in a limited time, clustering care, to limit time exposure time. The minutes are extra precious as care is intentional. There have been stories of remarkable innovative techniques to do this, aiming to protect the self while caring for the other. Watson reminds us of nursing’s covenant with society to help sustain human dignity, even when threatened and confronted with crises of life and death (Watson, 2018). The nurse recognizes the need to consider the needs of spirit, as well. We witnessed nurses setting up internet connection via tablet with a loved one before someone is intubated. Or allowing them a few minutes to take a call from their priest or spiritual support person. The pandemic surges certainly created crises and often chaos in hospitals. It is the nurses who navigated through the turbulence and attempted to help their patients through to the other side, whatever that might be. The nurse radiates beyond self to be/become an energetic field of infinite love. “Both nurse and patient can share Caritas spirit-to-spirit consciousness, opening access to the universal energy of infinite love” (Watson, 2018, p. 96). This demonstrates nursing’s timeless contribution which is enduring and transcendent—caring for the body-mind-spirit of the other.

### ***Caritas Process #10- Open***

*Open to spiritual/existential, mysterious; allow for miracles.*

This Caritas Process “...honors the reality that when anyone has a major life change, the person returns home evoking at a deep level an existential-spiritual crisis”. She further explains “...this requires a total reexamination of one’s life: questions arise as to what is most important. What are one’s priorities? What matters when one has to stop midstep in the midst of one’s usual life?” (Watson, 2008, p. 192). Certainly, we have felt this halt in our lives during the pandemic. What we do, and continue to do, matters for our own health and that of others.

Watson stresses that acknowledging and incorporating “...this Caritas Process into nurses’ understanding of practice can be a guiding influence and a turning point for healing,



whereby a tragedy can turn into a miracle of courage and strength, opening to another reality of life's deep meaning." (Watson, 2008, p.193).

We have to find a way to believe in the miracle of life despite our changing role and practice during this pandemic- we have to believe in the decisions that are being made and at times pressed upon us- we (are) maybe in the mode of saying 'no', when we really mean 'yes'.

We are reminded to trust, hope, and believe in miracles. We can offer HOPE to all: our own family, our colleagues, and friends and neighbors, and patients. We can work toward healing on a micro- and macro- level from our own sphere of influence.

**Outcome** = To support nursing practice by applying Caring Science Theory to prevent and mitigate anticipated moral distress in nurses to avoid long-term mental health outcomes such as prolonged grief, post-traumatic stress, depression, and even suicide.

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