

## Moral distress in everyday nursing practice: Roy adaptation theory application

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**Background:** Moral distress is a complex phenomenon of human experience that affects many individuals without a clear definition. Moral distress can be described as painful feelings and/or the psychologic disequilibrium that occurs when nurses are challenged or confronted by situations requiring moral action, but cannot carry out that action because of institutionalized obstacles. These obstacles can include lack of time, supervisory reluctance, an inhibiting medical power structure, institution policy, or legal constraints. Moral distress is a serious problem, it has been associated with job dissatisfaction and loss of nurses from the workplace and the profession.

**Purpose:** To assess the level of moral distress of nurses in acute settings, identify situations that result in high levels of moral distress, explore implications of moral distress, and evaluate associations among moral distress and the characteristics of nurses.

**Method:** A cross-sectional descriptive design was used. A total of 199 nurses working in acute care settings anonymously completed the moral distress scale questionnaire and described implications of experiences of moral distress.

**Results:** The Moral Distress Scale was completed by the participants. The responses were separated into frequency and intensity answers. Cronbach's  $\alpha$  reliability coefficient was used to assess the reliability of the Moral Distress Scale, which ranged between .89 and .90. Moral distress was significantly correlated with years of nursing experience. Nurses reported that moral distress adversely affected job satisfaction. The most frequently occurring items for moral distress disturbance related to two items: "Work with physicians/nurses who are not as competent as the patient care requires" ( $M=3.14$ ,  $SD=2.91$ ). The least frequent statement was scored for "Ask the patient's family about donating organs when the patient's death is inevitable" ( $M=1.77$ ,  $SD=1.38$ ).

**Conclusion:** Nurses in acute care settings commonly encounter situations that are associated with high levels of moral distress. Experiences of moral distress have negative impact on workplace conditions beyond job satisfaction and retention. Strategies to mitigate moral distress should be developed and tested.

### Biography:

Muder Alkrisat is an Associate Professor of Chamberlain College of Nursing. He completed his doctoral degree in Nursing from Azusa Pacific University. His focus are work place conditions and patient safety, he completed his dissertation on impact of workplace stress in acute settings. He received his Bachelor of Science in nursing and Master in nursing from Jordan University. In 2000, he received two years of training with Natal University in South Africa with research proposals on the "Role of the Facilitator in Case Based and Experiential Learning". In 2012 he also received extensive training Quality Matter. In 2014-2016 he received extensive training in competency based training to participate actively in curriculum development for BSN-MSN.

His extensive clinical experience spans multiple health care settings, including acute care facilities, specialty and long term facilities, and community-based clinics. He has held a variety of practice and leadership roles in these settings and has been actively involved in local and regional health initiatives. His extensive background in quality, Risk management compliance and regulatory arena helped him to serve for many years as corporate director for Clinical processes (quality, Infection control, Education and Risk Management). He is certified in Six Sigma Black Belt and lean thinking (CSSBB), Certified Performance Improvement Advisor (PIA), Certified Specialist in Healthcare Accreditation (CSHA) and Certified Healthcare Specialist Accreditation (HACP).