Moral Distress and Moral Injury among Canadian Armed Forces personnel following deployment to Operation LASER

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Western

RIA Think Tank on Moral Distress in LTC – September 29, 2023

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About the MacDonald Franklin OSI Research Centre

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LAWSON HEALTH RESEARCH INSTITUTE

- Established in 2018
- Largest independent military and Veteran mental health research centre in Canada
- National and international leader
- Expertise in **operational stress injuries** (e.g., posttraumatic stress disorder (PTSD), depression), **occupational trauma research**, **moral injury**, and **resilience**
- Affiliated with Lawson Health Research Institute, St. Joseph's Health Care London, and Western University

Outline

Deployment

Study

Findings

Takeaways

Operation (Op) LASER

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- As part of Canada's COVID-19 response, Canadian Armed Forces (CAF) personnel were mobilized to supporting various aspects of the civilian health care sector in addressing and mitigating the impact of the COVID-19 pandemic across Canada – **Operation LASER.**
- Early phases of COVID-19 pandemic were marked by significant surge in COVID cases and COVID-related deaths among residents of long-term care facilities (LTCF).
- Select CAF personnel were mobilized for a domestic deployment to the hardest-hit LTCFs (specifically, in the provinces of Ontario and Quebec) between April and July 2020. – **Op LASER LTCF.**

Operation (Op) LASER

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- Op LASER LTCF involved engagement with vulnerable populations
  - concerns about impact of unknown infectious disease on self and family; potential value violations, value conflicts.
- Hence we anticipated that moral distress and moral injury would be a feature of the Op LASER LTCF experience.

- **A research study with Op LASER LTCF personnel was formulated in order to:**
  - Document the experience of Op LASER LTCF personnel over time
  - Explore associations among different domains (e.g., training, mental health, moral distress, morale)
  - Inform preparation and support for future missions

Design

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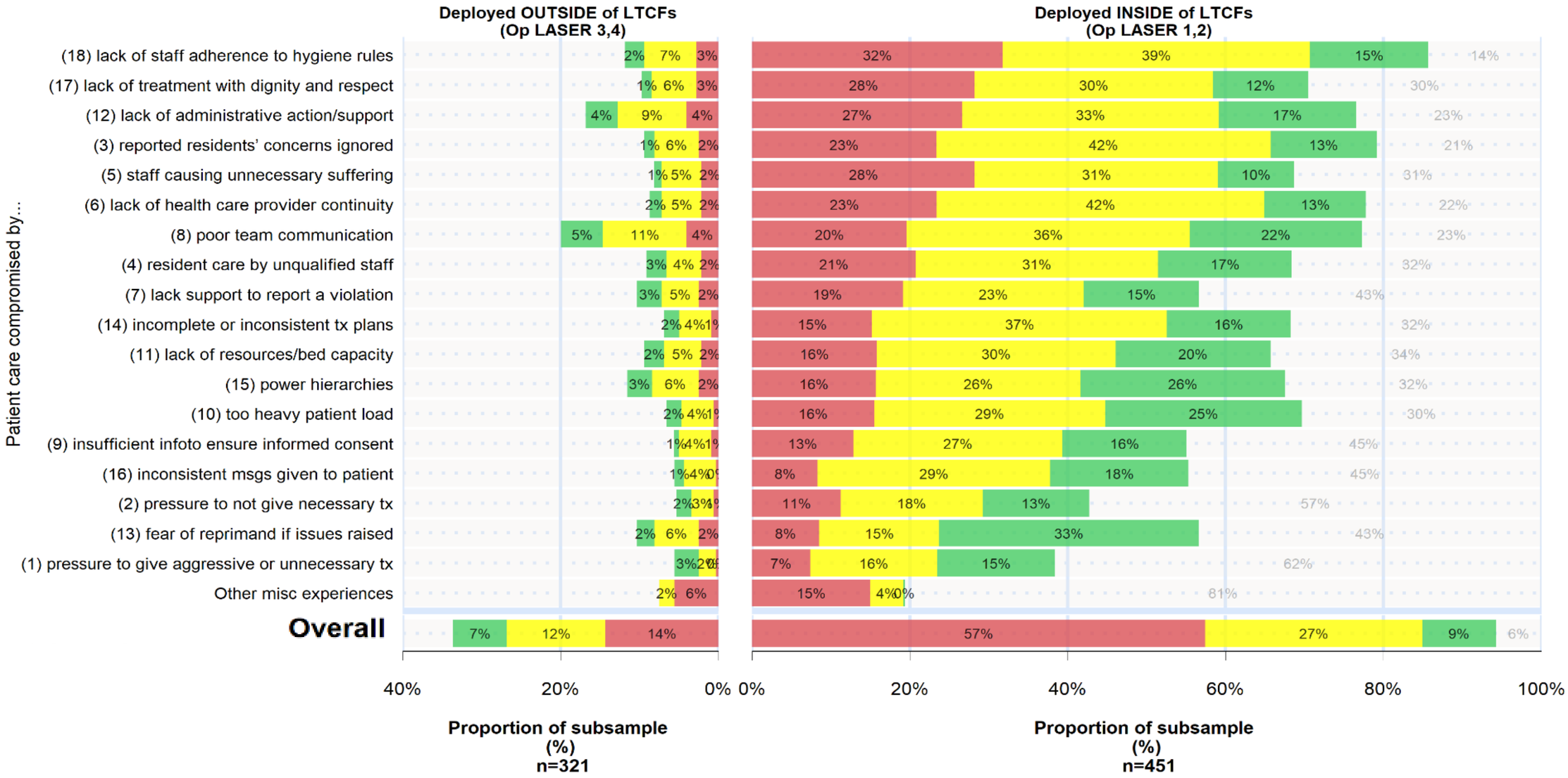
Complete enumeration survey, longitudinal with three time points

- N = 2,595; n @ T1 = 1,088, @ T2 = 582, @ T3 = 497

Data collection domains

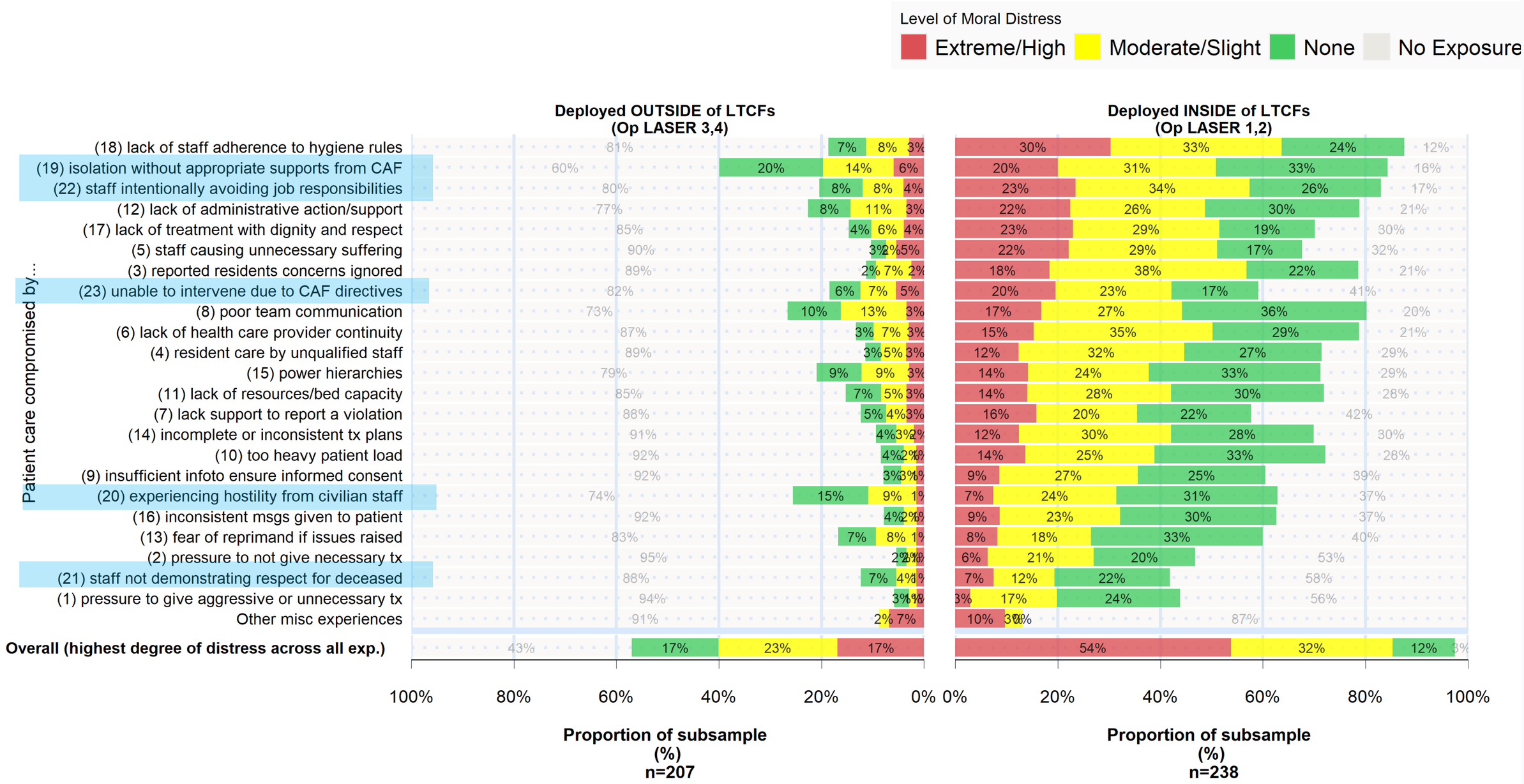
- Demographics
- Op LASER duties
- Satisfaction with training
- Mental health training
- Exposure to stressful experiences (including moral challenges)
- Coping styles
- Social support
- Posttraumatic growth
- Typical mental health outcomes
  - K10
  - PHQ-9
  - GAD-7
  - PCL-5
- Moral injury outcome
- Barriers to seeking treatment (HDO)
  - Meaning
  - Morale
  - Relatedness
  - Trust in Teams
  - Trust in Leadership
  - Competence

Findings (Exposure; T1)



Disclaimer: Data not weighted; represents only those who responded to MMDS Assessment

Findings (Exposure; T2)



Moral Injury Outcomes

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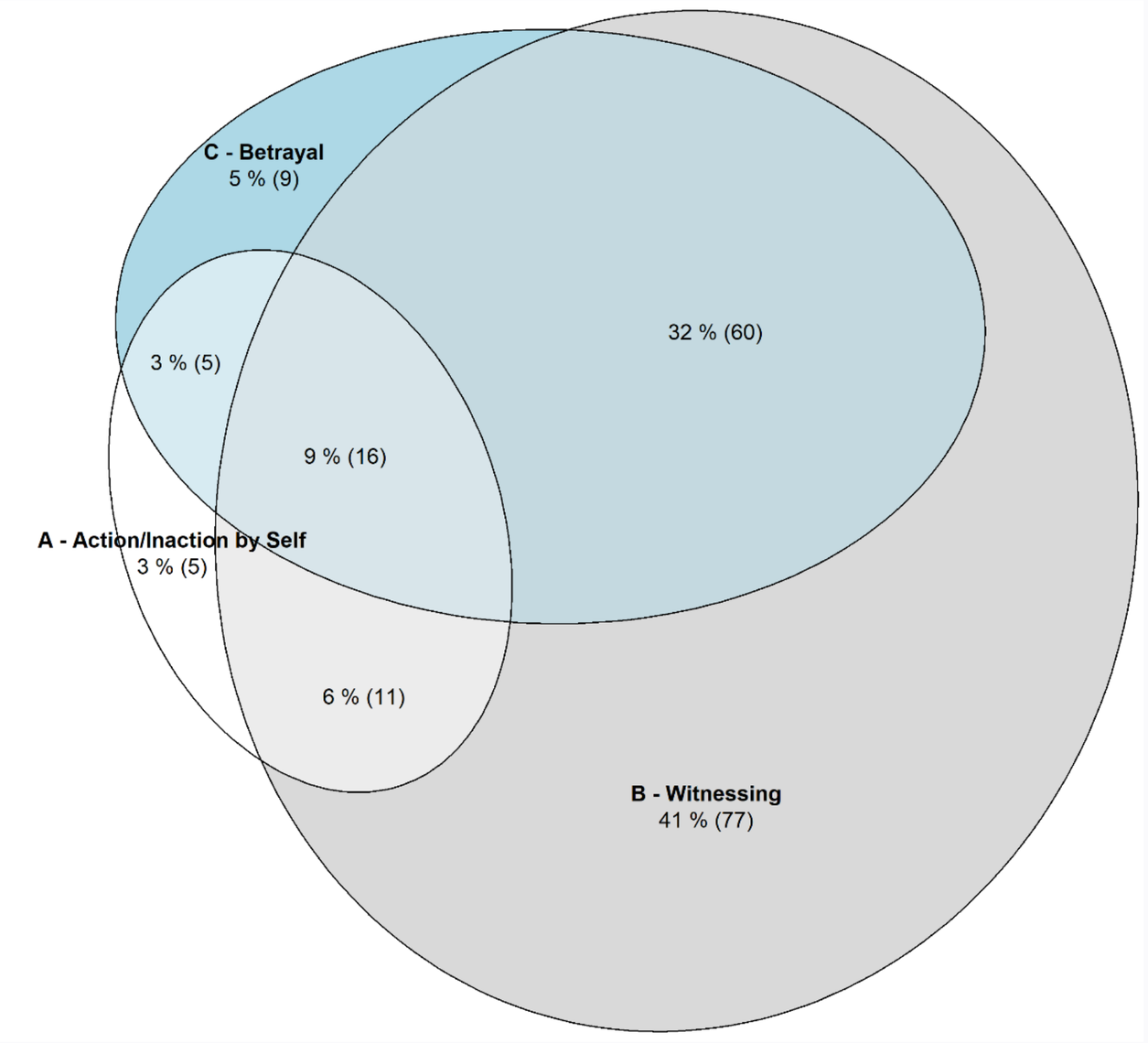
- **~32%** indicated experiencing a morally injurious event (i.e., the most disturbing event of their life that was related to a violation of important values, principles) at some point in their lives **AND** attributed their worst morally injurious experience to Op LASER.
- **Experiences not mutually exclusive in terms of PMIE type.** Many reported experiences that had aspects of both betrayal and witnessing others transgress moral standards.



Longitudinal Trends

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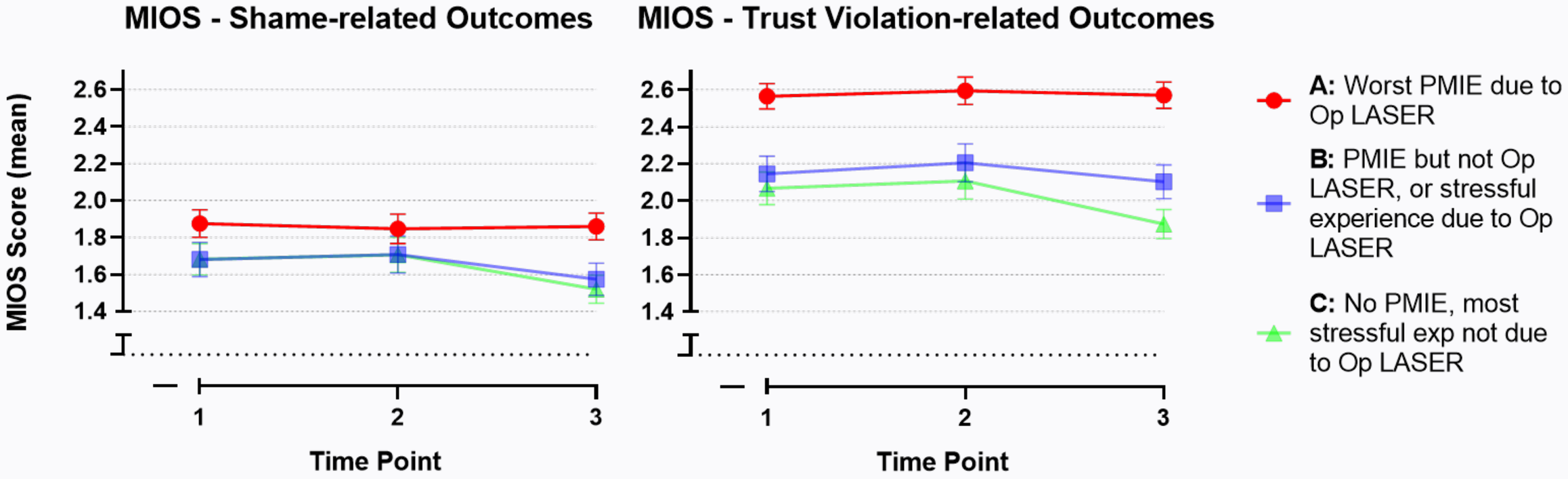

Longitudinal Predictors

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Controlling for T1 moral injury symptoms, specific variables at T1 predicted T2 and T3 moral injury severity

- Perceived support from employer ($\beta = -0.1$, $p = .01$; particularly for trust-violation outcomes)
- Perceived support from internet communities ($\beta = -0.12$, $p = .03$; particularly for T2 shame-related outcomes)
- Satisfaction with pre-deployment resilience training (particularly for trust-violation outcomes) ($\beta = -0.07$, $p = 0.02$)
- Positive reframing coping (predicting T3, $\beta = -0.05$, $p = 0.001$)
- Depression severity (predicting T2, shame-related outcomes only)
- PTSD symptom severity (predicting T3, shame-related outcomes only)

Summary

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- Majority experienced moral challenges; most were associated with some degree of acute distress
- For many, events that transpired during Op LASER represented their worst, most morally transgressive experience of their lives
- Psycho-social-spiritual alterations were higher for these individuals, and remained consistently high throughout the year following the deployment
  - Continue to pay attention to stressors that evoke moral conflicts or betrayal; need to ensure we capture these experiences well
- Experiences during Op LASER had more impact on trust violation-related outcomes vs shame-related outcomes
  - Need to ensure we are capturing this granularity in outcomes

Summary

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- Related to PTSD, depression, anxiety symptoms, and psychological distress – however association is not extremely high. Indicates we are capturing issues that constructs may be missing.
- **Perceived support by employer** and **resilience training** is a silver lining. Represent **organizational levers** to reinforce protective factors for moral injury. (Revel Initiative)
- To study the concept well, we need to measure it well.

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Summary

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What we do

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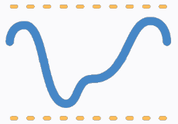
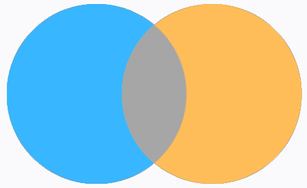
Identify adequate ways of **measuring moral injury**

Conceptualization and definition of **PMIEs**



Identify **thresholds** of clinical significance



Distinction between moral injury and related constructs

Identify appropriate **treatment approaches**

Upstream Interventions

Approach

1. Engaging appropriate stakeholders + lived experience
2. Various study designs
3. Strong international collaboration

Thank you

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Interested in collaborating?

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