

Moral distress among Physiotherapists: Roots and coping strategies

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Abstract

The term moral distress (MD) describes an emotional, cognitive, and physical phenomenon experienced by healthcare professionals when encountering complex ethical dilemmas. It involves seeking a balance between personal, occupational, and organizational dimensions. Though frequent, intense, and with varied ramifications, this phenomenon has been studied mostly among nurses and doctors and rarely among allied healthcare professionals.

In this study, linear mixed-model research of MD was conducted among Israeli physiotherapists: A quantitative study was followed by a qualitative study, aiming to enhance our understanding of the phenomenon through the experiences of physiotherapists working in different settings. The research was approved by the Haifa University ethics committee.

In this paper, we will describe two of the themes that emerged from the qualitative phase (n=21) of the research: (1) "Possible roots of MD" – demonstrating several sub-themes such as 'finding an equilibrium' between beneficence and organizational restrictions, indecision regarding 'truth-telling', providing 'futile-care', and MD caused by lack of knowledge and clinical experience; (2) "Coping strategies" - describing what physiotherapists find helpful when dealing with MD,

such as sharing, implementing 'moral deliberation' tools, establishing organizational support, and continuously conducting research of MD to better understand the phenomena.

Results may assist in developing intervention programs aimed at supporting healthcare professionals when struggling to cope with MD. Interventions should include ethics education, specifically, learning to identify ethical issues; simulation-based workshops to enhance personal and team reflection abilities; and establishment of a long-term organizational support system.

Keywords: Moral distress, Physiotherapy, Ethics, Qualitative research.