

# Trauma Awareness

because recovery from trauma is possible

## Moral injury

This is often an overlooked impact of psychological distress

Although the understanding of moral injury stems from military personnel, this is a target of current researchers - striving to understand implications for those who work in high-pressure environments. Moral injury lies at the extreme range of harm that may develop within high pressure environments which results in a violation of one's core moral beliefs. Koeing et al (2019) defines MI as 'a deep sense of transgression including feelings of shame, grief, meaningless and remorse from having violated core moral belief. This is also defined by Book and Lettini (2012) as 'a betrayal of what's right, by someone who holds legitimate authority, in a high-stakes situation'. We are seeing more people experience MI as a result of being unable to provide a service (military, health care, first responders, teachers) in a way that fits in with ethical practices.

### RESPONSES TO MORAL INJURY

Some responses may include: anger, guilt, shame, remorse, disgust, extreme negative self-attributions, self-condemnation, self-punishment (or sabotaging behaviours/responses), outrage, blame, feelings of betrayal, loss of trust. They may impact both personal and professional functioning.

### RISK

Moral Injury experiences also increase the risk for PTSD, depression, anxiety, insomnia, suicidal ideation as well as suicidal behaviour. It is important to be aware of your own experiences and responses as well as recognizing MI in colleagues.

### ORGANIZATIONAL RECOMMENDATIONS

There are numerous responses that organizations may enact in order to reduce or mitigate the risk of MI, vicarious trauma, compassion fatigue, burnout and mental health concerns of employees in what workplace. It is critical to create responses of support within the organization - and ensuring staff perceive these responses as supportive.

### Peer support programs

The presence of peer support programs is widely used in various organizations and offers an opportunity for individuals and teams to experience support in an authentic way without potential repercussions.

### Communication

Communication in large organizations can be difficult and contribute to MI due to inconsistent/mixed messaging. Often front-line workers are left out of important communication can feel disconnected from organizations.

### Leadership

Teams in which leaders facilitate a sense of shared purpose, trust and openness can reduce risks of MI.

## Individual considerations with MI

In addition to organizational and team interventions, there are ways that individuals can reduce risks of MI for themselves.

Understanding one's ethical and moral principles can help in creating awareness around stressors - in addition to recognizing the challenges associated with this. Most large organizations provide opportunities to engage in self-care through accessing benefits. Although these are important to many, most people do not access the resources available to them through these benefits. Find out what resources you have and explore which ones may benefit you. Engaging in wellness activities outside of workplaces can create opportunities to increase resilience, reduce emotional impacts of stressful situations, and increase the health of relationships both personally and professionally. When people begin to notice

emotional impacts as a result of their work (MI, vicarious trauma, compassion fatigue, burnout), it is often too late to begin with one-off activities. There may be a need to scaffold self-care activities to begin reducing stress and psychological symptoms.

## Some great resources

I always enjoy taking time to share some of my favourite resources:

### Books:

Trauma Stewardship - Laura van Dernoot Lipsky  
The Age of Overwhelm - Laura van Dernoot Lipsky  
The Resilient Practitioner - Skovholt and Trotter-Mathison  
The Resilient Organization - Valikangas

### Apps

Provider Resilience

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### ABOUT ME

Throughout my work I have developed a strong passion around the area of trauma and vicarious trauma. I have worked in the field of Addiction and Mental Health in a variety of roles for 18 years, teaching a sessional class on Trauma and Healing at the University of Lethbridge for several years, along with being in private practice since 2011. I currently instruct in the Child and Youth Care program at the Lethbridge College. I have also had the wonderful opportunity to instruct numerous workshops to a variety of professionals from one hour to two days. I continue to care for myself and my passion in this area through learning and indulging in my curiosity.

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