

Healthcare’s search for “wellness”: How bioethics reduces burnout among health professionals

Description

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ABSTRACT

Nearly three years into the COVID-19 pandemic, healthcare providers are experiencing startling rates of burnout and healthcare institutions are bracing for a predicted mass exodus of workers. In the face of this alarming reality, healthcare institutions are investing billions in wellness programs, aimed at boosting resilience and incentivizing staff retention. Though literature on burnout and professional exit often include “moral distress” and “moral injury” as contributing factors, it is striking that clinical ethics consultation is almost never constructed as part of the “wellness solution”. We argue that moral distress and moral injury are explicitly ethical dimensions of burnout, and that, as such, they require tools of ethical analysis to be adequately understood and addressed. A well-resourced bioethics department has the potential to 1) provide valuable insight into the moral experiences contributing to burnout, 2) implement targeted interventions shown to significantly reduce moral distress and 3) provide input regarding the just implementation of wellness initiatives. Any public health strategy that does not recognize and appropriately respond to the explicitly moral dimensions of burnout risks further alienating clinicians and wasting scarce healthcare resources.

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