



“Basically, I look at it like combat”: Reflections on moral injury by parents involved with child protection services



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A B S T R A C T

This study considers any “moral injury” occurring among parents involved with the Child Protection System (CPS). Moral injury refers to the lasting psychological, spiritual and social harm caused by one's own or another's actions in a high stakes situation that transgress deeply held moral beliefs and expectations. The existing literature focuses on military contexts, but moral injury also may play a role in increasing the vulnerability of CPS clients who are threatened with loss of their parental rights and dissolution of their families. We administered a modified version of the Moral Injury Events Scale (MIES) (Nash et al., 2013) to 10 CPS involved parents. We then conducted in-depth, semi-structured, audio recorded individual interviews with parents to elaborate their responses to the MIES. Parents' MIES scores and interview elaborations suggest that some CPS-involved parents do experience moral injury. Moral injury was reported as a result of their own parenting behaviors, but also as a result of parents' involvement with professionals and within social systems that are charged with providing assistance to struggling families. For instance, some parents perceived professionals to be shaming, social services to be harmful and legal proceedings stigmatizing. Parents' reported reactions to morally injurious events included lasting feelings of guilt, shame and anger; and loss of trust in professionals. These responses impeded their perceived abilities to fully engage in services. If involvement in CPS places parents at increased risk of moral injury, then moral injury is a critically important construct for child welfare policy makers and workers to understand and address in the conduct of effective, ethical child welfare practice.

1. Introduction

This study considers any “moral injury” occurring among parents involved with the Child Protection System (CPS). Moral injury refers to the lasting psychological, spiritual and social harm caused by one's own or another's actions in a high stakes situation that transgress deeply held moral beliefs and expectations (see Litz et al., 2009; Shay, 1994). The existing literature focuses on military contexts, but moral injury also may play a role in increasing the vulnerability of individuals in other sociocultural contexts (Haight, Sugrue, & Calhoun, 2017). We consider clients in the arguably high stakes context of CPS who are threatened with loss of their parental rights and dissolution of their families. Such parents may experience moral injury due to the harm they (or others) inflicted on their children, or their failure to protect or provide basic necessities for them. Parents also may experience moral injury within social systems they expected to provide them with assistance, but instead perceived as ineffective or even harmful (Haight, Sugrue, Calhoun, & Black, in press).

Although the violation of the moral order and normative ethical

expectations is certainly not a new human experience, the use of the term “moral injury” by mental health professionals and scholars is relatively recent. Psychiatrists providing care to Vietnam combat veterans have argued that many are suffering from a persistent distress that is not captured by the DSM diagnosis of posttraumatic stress disorder (PTSD) (Gray, Schorr, Nash, Lebowitz, Amidon, Lansing, Maglione, Lang, and Litz, 2012; Shay, 2014), or resolved by interventions for PTSD (Gray et al., 2012; Litz et al., 2009; Nieuwsma et al., 2015). In contrast to PTSD, which involves a traumatic threat to physical safety and results in anxiety, moral injury occurs in high stakes situations that contradict one's deeply held moral framework; that is, beliefs about right and wrong that one has long held as sacred (Boudreau, 2011; Dombo, Gray, & Early, 2013; Meagher, 2014). This troubling mismatch between one's core beliefs and events can lead to a “breakdown in global meaning” (Currier, Holland, Rojas-Flores, Herrera, & Foy, 2015, p. 26) or “threat to the integrity of one's internal moral schema” (Dombo et al., 2013, p. 200). It is this lack of meaning and integrity, not threat to physical safety (Currier, Holland, & Malott, 2015), that contribute to individuals' guilt, shame, rage, depression (Dombo et al.,

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2013; Kopacz, Simons, & Chitaphong, 2015; Litz et al., 2009; Shay, 1994) and loss of trust in their own or others' capacity to behave in an ethical manner (Drescher et al., 2011). If unaddressed, the lack of meaning, emotional distress and lack of trust associated with moral injury may persist for years (Litz et al., 2009) undermining individuals' efforts to move forward in a positive direction with their lives (Authors, 2017b).

If involvement in CPS places parents at increased risk of moral injury, then moral injury is a critically important construct for policy makers and practitioners to understand and address for effective and ethical child welfare practice. Clearly, providing services to child welfare-involved parents that improve family functioning without unintended negative consequences is a complex process fraught with difficulties. One factor contributing to these challenges is the involuntary context of child welfare services. Many investigations take place without parental consent, and participation in services often occurs under coercive circumstances including the threat of child removal as a consequence of nonparticipation. These circumstances can present significant obstacles for workers and parents to develop constructive relationships. (See Rooney, 2009). Yet, parents' collaboration with workers is related to better compliance with treatment plans which may not only facilitate change in targeted problems, but also affect clinical and judicial decisions (Littell, 2001). To the extent that CPS-involved parents experience moral injury then associated feelings of distrust, shame, and guilt may undermine positive change efforts including the development of collaborative worker-parent relationships.

1.1. Moral injury in diverse sociocultural contexts

Discussion of moral injury has focused on military personnel, but there are some clinical reports and qualitative research accounts of moral injury within other populations. Robert Jay Lifton described how atrocities committed by American soldiers in Vietnam (Lifton, 1973) and Nazi doctors (Lifton, 1986) resulted in lasting moral harm. These perpetrators expressed guilt, rationalization of their immoral behavior, numbing of emotions, and complex forms of self-sabotage. Arthur Kleinman (2007) described the struggles of humanitarian aid workers, and those surviving Mao's cultural revolution. In these contexts, the moral values that mattered most to them were transgressed resulting in feelings of chaos and despair. In her qualitative interviews with homeless women with a history of intimate partner violence, Otte (2015) found themes consistent with moral injury including betrayal and trust issues, social problems, spiritual/existential issues, psychological symptoms, and self-deprecation. Hartman (2015) described experiences of moral injury in African American women with a history of substance abuse resulting in feelings of social isolation and shame.

1.2. Vulnerabilities to moral injury: stress and trauma, stigmatization and inadequate social support

Not all individuals exposed to morally troubling events experience moral injury. There is some research on prior and concurrent experiences of individuals not involved with CPS that appear to increase their vulnerabilities to moral injury. Many CPS-involved parents appear to share these vulnerabilities.

First, individuals who are currently experiencing or have a history of exposure to highly stressful or traumatic events appear to be more vulnerable to moral injury. Bryan et al. (2015) found that stress and trauma-related pre-deployment experiences of military personnel were positively correlated with their scores on the Moral Injury Events Scale (MIES), a standardized assessment of moral injury. In Hartman's (2015) study of moral injury among women with a history of substance abuse, participants experiencing moral injury had early exposure to abuse and trauma in childhood.

Likewise, many parents who become involved with CPS have experienced, or are currently experiencing, high levels of stress and

trauma. For example, accusations of maltreatment along with the accompanying threat of temporary or permanent loss of their children are arguably stressful or even traumatic for most parents. In addition, high rates of poverty occur among families involved with CPS (Lindsey, 1992; Marcenko, Lyons, & Courtney, 2011; Wells & Marcenko, 2011) which expose parents to multiple, ongoing stressful events. Further, domestic violence is an experience shared by 30% to 60% of families involved with CPS (Marcenko et al., 2011). Also, a history of physical or sexual abuse is experienced by many CPS-involved mothers (Chemtob, Griffing, Tullberg, Roberts, & Ellis, 2011). Further, mothers involved with CPS have high rates of major depressive disorder, PTSD (Chemtob et al., 2011; Marcenko et al., 2011) and anxiety disorders (De Bellis et al., 2001) which may contribute to ongoing stress.

Second, social stigmatization may increase individuals' vulnerabilities to moral injury. Scandlyn and Hautzinger (2015) found that societal rejection of war veterans reinforced their sense of moral injury. Likewise, parents involved with CPS, particularly those whose children are placed in foster or residential care, often experience a profound sense of social stigma and loss of identity (Schofield et al., 2010; Sykes, 2011). Sykes argues that most mothers want to be considered "good mothers," and thus when mothers become involved in CPS and have their children removed from their homes, "the rebuff of their 'good mother' status becomes public," (p. 448).

Third, inadequate social support also may increase individuals' vulnerability to moral injury. In their study of Portuguese military veterans, Ferrajao and Oliveira (2016) found that lack of social support in the wake of moral transgressions was associated with veterans' sustained psychological distress due to moral injury. Likewise, parents involved with CPS may have inadequate social support. As a group, parents who have maltreated or are at risk of maltreating their children have smaller social networks, engage with their networks less often (Thompson, 2015), show lower levels of community integration, participate less in community social activities, and use formal and informal social organizations less than non-maltreating parents (Gracia & Musitu, 2003).

1.3. Research questions

In this study, we consider: Do some parents report morally injurious events in relation to experiences associated with their CPS involvement? If so, what events do they describe as morally injurious to them? How do they describe the psychosocial effects of these events?

2. Methods¹

2.1. Design

This study is part of a larger, mixed method study (Haight et al., 2017; Haight et al., in press) that used a basic, convergent mixed-method design (Creswell, 2015). Qualitative and quantitative data were equally weighted and collected concurrently. In the present study, we focus on the qualitative component. Our primary purpose for including quantitative data as well is "complementarity" (Greene, Caracelli, & Graham, 1989), or the use of data from quantitative moral injury assessments and qualitative interviews to generate a more comprehensive understanding of any moral injury that may be experienced by CPS-involved parents.

2.2. Site

Participants in this study were sampled from two adjacent counties in a metropolitan area of Minnesota. Willow County² is the largest

¹ This study was approved by the University of Minnesota's Institutional Review Board.

² With the exception of "Minnesota", all names of places and participants are

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