

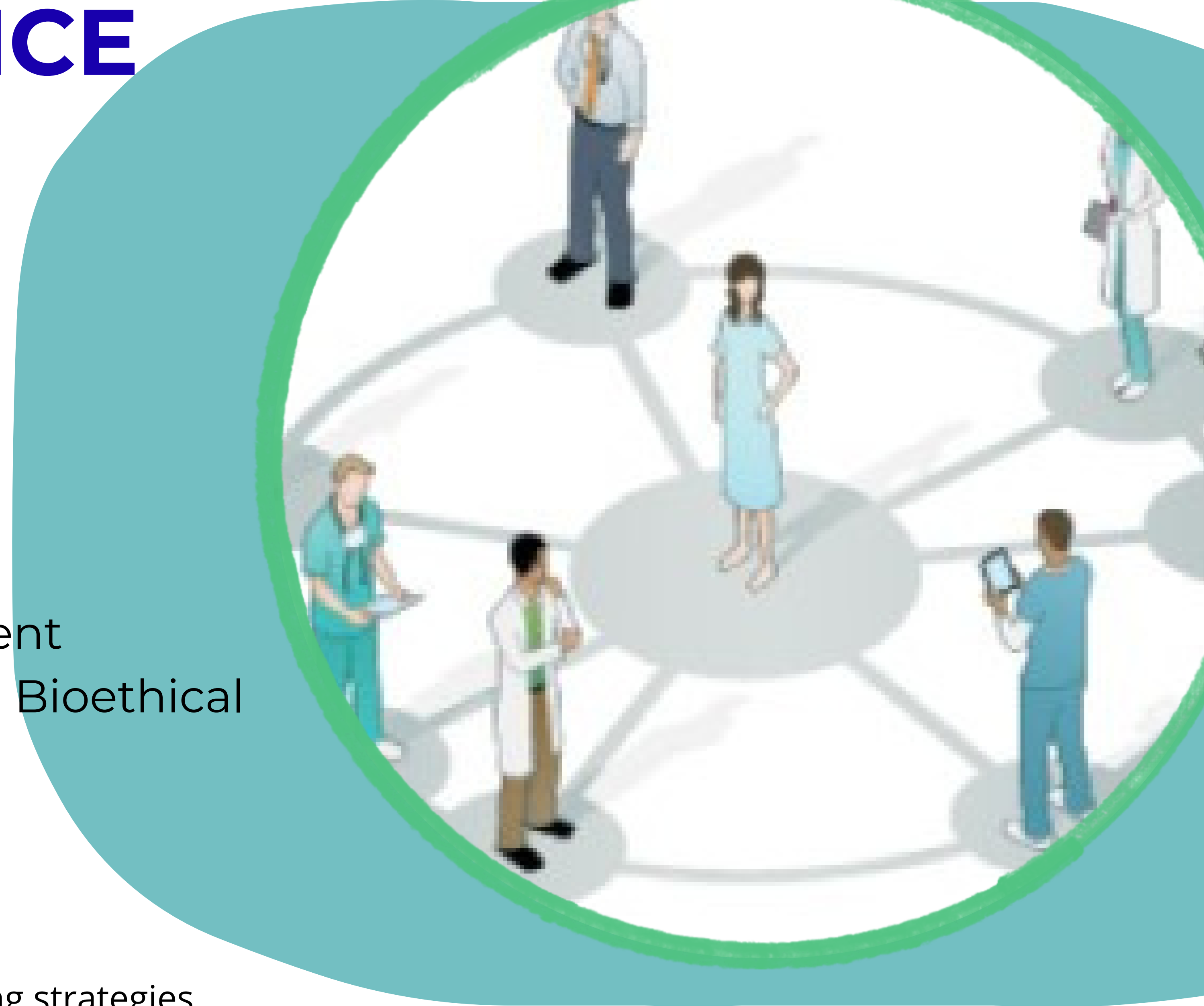
MORAL DISTRESS, RESILIENCE AND COPING STRATEGIES AMONG PALLIATIVE CARE PROFESSIONALS: PRELIMINARY RESULTS

Psychological and Moral Aspects of Professional Engagement
Among Palliative Care Workers – Supportive Strategies and Bioethical
Protocols of Resilience

PhD candidate: **Ela Pejić**

Mentor: **Tihana Mendeš, M.D., PhD, Assistant Professor**

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Introduction

- Palliative care represents a highly demanding field of healthcare
- Moral distress is linked to ethical challenges, emotional burden and reduced well being.
- Resilience and effective coping strategies are individual protective factors that can mitigate the negative effects of stress.

Aim

- To examine the levels of resilience, moral distress, and coping strategies used among palliative care professionals.

Participants

- 74 palliative care professionals: physicians, nurses, physiotherapists, occupational therapists, psychologists, social workers, chaplains, volunteers, and palliative care coordinators

Instruments

- Brief COPE
- MMD - HP
- Self - efficacy questionnaire

Data Collection

- March - April 2026.

Research Design:

- cross-sectional study

Results

Figure 1. Distribution of participants by profession

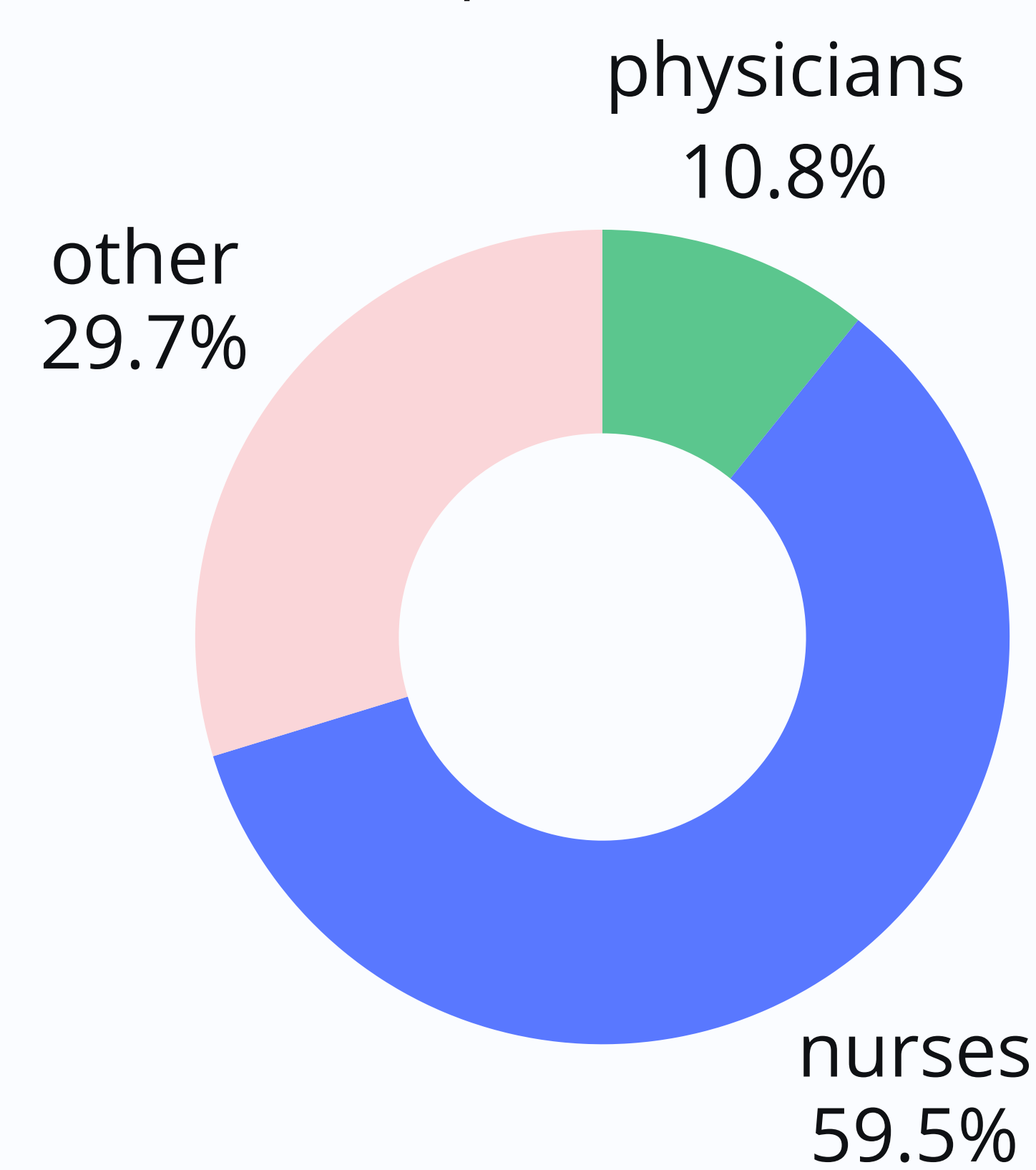


Table 1: Differences between groups

Group	n	Min	25th Percentile	Me	75th Percentile	Max
Physicians	8	1	31.5	50.5	81	106
Nurses	44	6	51.5	109	166.5	379
Other professionals	22	0	3	31	111	245

**Conover post-hoc test: There is a significant difference between nurses and the other two groups



Resilience

- median of 29
- interquartile range 25 to 32
- total range 14 to 40
- moderate to high

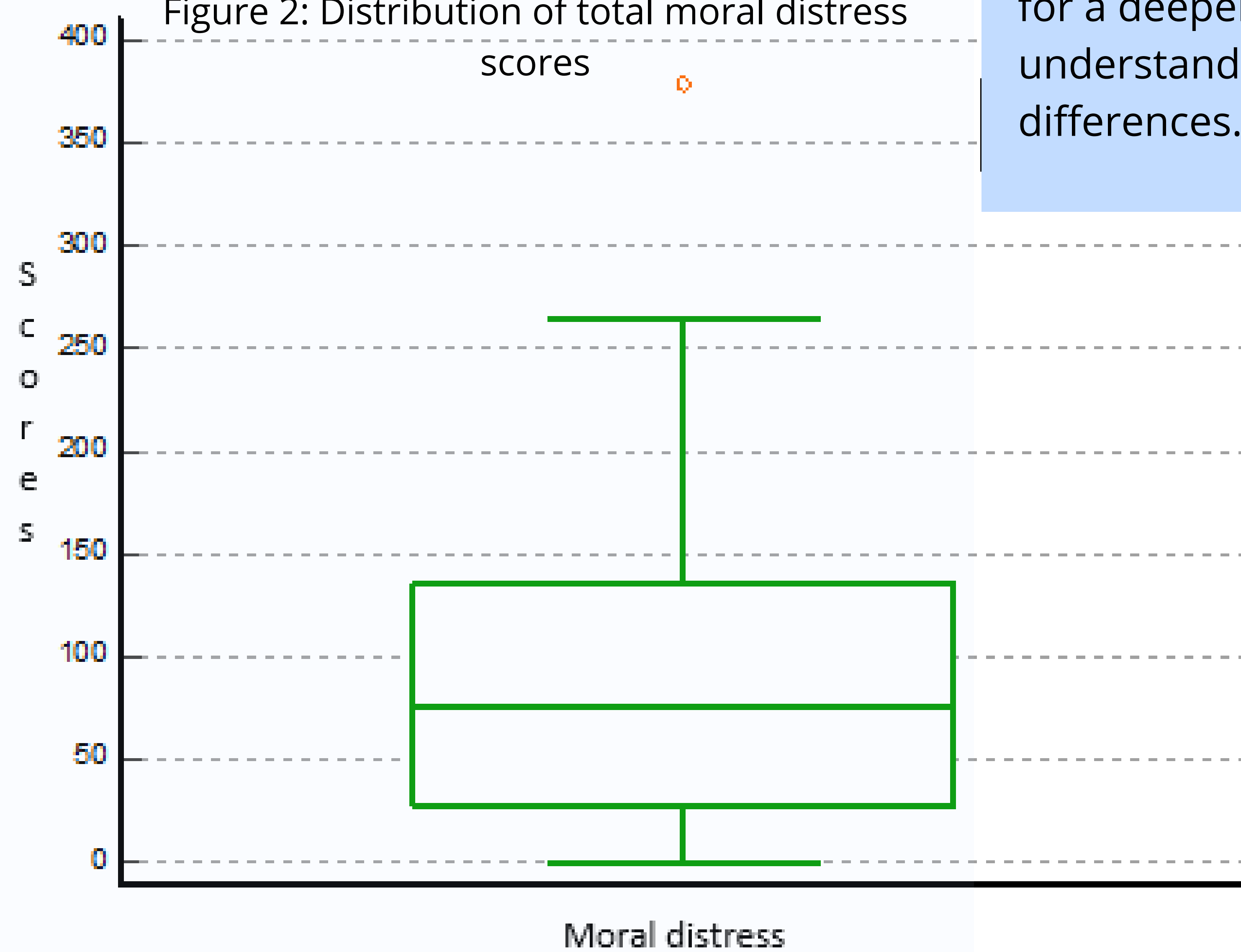


Coping strategies

Most used:

- active coping
- positive reframing
- planning
- use of emotional support
- self-distraction

Figure 2: Distribution of total moral distress scores



*Kruskal-Wallis test, $P = 0,005$

Conclusion

- The results indicate a predominance of adaptive coping strategies and self-distraction, along with moderate to high levels of resilience.
- Moral distress is significantly higher among nurses, highlighting the need for a deeper understanding of group differences.