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The Application of Virtual Reality Scenarios Coupled with Education and Recognition of Soul Injury Can Promote Pathways of Care for Healthcare Workers and the Public Affected by the Present Covid-19 Pandemic and Subsequent Variants.

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The Application of Virtual Reality Scenarios Coupled with Education and Recognition of Soul Injury Can Promote Pathways of Care for Healthcare Workers and the Public Affected by the Present Covid-19 Pandemic and Subsequent Variants. Herrara et al. (2018) espouse Virtual Reality is the "ultimate empathy machine" (p.1). Present generations thrive in digital environments that target their needs (Marcus 2019; Dong & Poh, 2015). Social Presence and Media Richness theories support that communication mediums synergize genuineness and intimacy (Marcus, 2018; Draft, and Lengel,1984; Short et al.,1976). Bandura (1971) explains expedient ability of learning by exampled observation and the facilitation of such experience to develop emotional understanding by witnessing the affective reactions of others. Aparicio et al. (2016) suggest *e*-learning is empirically a combination of learning and technology. They explain technology-driven-videos can promote a quick animated reception, perceptions of sensorial familiarity, and kinesthetic awareness that synergize these constructs. Scripted educational virtual reality scenarios can, therefore, promote viewer recognition and understanding of the emotional effect of the Covid-19 Pandemic.

The Application of Simulations

Marcus (2018) research supports that facilitator creation of five-to-seven-minute companion videos can channel social presence. Ekert et al. (2021) recent study found medical student-led clinical simulation sessions acquired crisis confidence with applications of clinical simulations for multi-disciplinary hospital staff. They further that simulation is a deficit area of education. They posit, "No evident prior studies have examined the effectiveness of medical student-led simulation training of healthcare professionals in times of crisis" (p. 256).

Marcus (2021) promotes the application of scripted role-playing scenario simulation to be viewed by students. A scenario of a nurse is seen coming on her shift. The educational audience watch the nurse recognize that the patient with Covid-19, who she cared for the previous day, has dramatically declined. No visitors are allowed per Covid-19 precautions. The virtual viewing audience see's the nurse call the family on the patient iPad. The family is updated that their loved

one is dying. The family is heard crying and howling in the background as the patient's simulation vital signs are seen and he expires. The family gets off the iPad call overcome in grief and loss. The nurse then steps outside. She is approached by her supervisor who claps his hands and suggests she gets back to work. The audience watch this scene unfold and directly observes the effects of the experience on the nurse hunched over and requesting another minute from her supervisor before she returns to the healthcare environment. Scripted educational virtual reality scenarios can promote viewer recognition and understanding of Soul Injury's affect and development of pathways of care for patients, ancillary healthcare workers, families, and the general public affected by the present Pandemic.

Introducing Moral Injury

Litz et al. (2009) posit that prospective morally injurious situations can include the continuance of lack of prevention or witnessing to events that can transgress deeply into previously held moral beliefs. They further assert deleterious exposures can cause long-term, emotionally, psychologically, behaviorally, spiritually, and social moral injury. Barnes et al. (2019) espouse that moral injury has not in the past has been recognized or categorized as a mental disorder. They suggest moral injuries are dimensionally profound problems that affect emotions, psychological behavior, social, and spiritual domains, and human function. Griffen et al. (2019) convey that there is a lack of consensual definition of moral injury. They report their findings that family, community, and culture to which the individual returns are key parts of the healing process. Griffen et al. further that the morally traumatize need interventions so they may begin to repair feelings of guilt/shame, betrayal, and isolation.

Moral Injury to Soul Injury

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Soul Injury was identified by Hospice nurses who cared for thousands of dying combat and traumatized veterans. Observed traits of these vulnerable populations included, loss of identity, brokenness, emptiness, and continual fear. The Hospice nurses promoted healing therapeutic stages of re-owning, re-homing, and re-vitalizing to assist the veterans with their Soul Injuries (Opus Peace, 2020). Marcus (2021) further delineates that the re-owing phase can include, return to their jobs, seeking out new employment, smart-shopping, and activity pathways, new insights into safety, use of Protective Personal Equipment, vaccinations/boosters, establishment of National Covid testing and vaccination pathways. Marcus explains that the re-homing phase can consist of return to stable home/lifestyle environments, and new-lifestyle-support. Marcus suggests the re-vitalizing phase should bring the soul energy back to identifiable ways of life with smart cultural, spiritual, and leisure pathway experiences. She espouses that this essential re-vitalization should include self-compassion, nurturing, leisure, communityoutreach/networking, continued embracement, and affirmation of a new viral smart-culture. Marcus concludes that The Soul-Injury-Pathway-of-Care is on a continuum whereas, individuals and communities, can vacillate between the stages, corresponding to the outbreaks, variant waves, and psychosocial recovery.

Historical Aspects of Variants and Viruses

The Center for Disease Control (CDC), (2021), explains that variants are part of a normal viruses morphing and mutation pathway, so continued precautions are needed and to be expected. Mamelund (2021) furthers that The Pandemic of 1918 continued to have ebb and tides and that a pandemic virus follows waves. Dr. Mamelund also informs that the lethal fall wave was the second wave during the Influenza Pandemic. Historical understanding shows that the 1918 Spanish Flu Pandemics didn't just go away. The CDC (2021) reports that data is beginning to

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emerge that the Delta and other possible variants can be far more infectious in comparison to other variant even in vaccinated individuals.

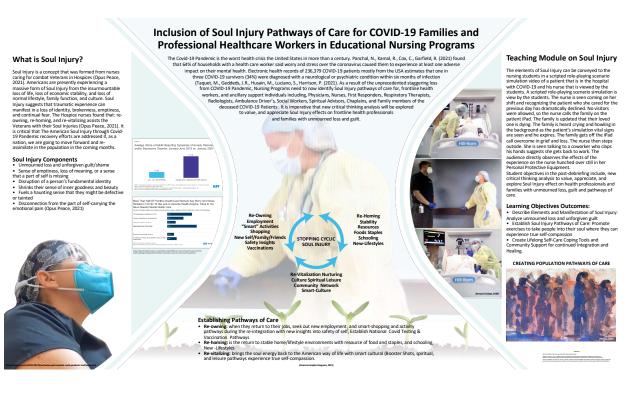
Aassve et al. (2021) further relate on the effects of the 1918 Spanish Flu. They posit, "The failure of government institutions and national health care services to contain the crisis led civil societies to experience a serious breakdown due to the climate of generalized suspicion" (p.854). Aassve et al. (2021) compare and parallel the 1918 Pandemic sociological affect to today's governments facing continued trepidation and psychological challenges. They conclude that this justifies, "Additional reason to opt for strong policies of pandemic containment" (p. 854). Gillson and Ross (2019) espouse that only recently has the academic community begun to seriously study historical traumas including sociological traits of future generations of those affected by historical traumas.

The Elephant in The Room

Krylov's (1869) fable relates the loss of recognition of an elephant that is in the room secondary to distractions. The American Psychological Association (2021) reports that greater than 80% of United States adults surveyed report serious societal issues. This increased level of stress and possible fear prompts the loss of focus of issues. Therefore, assisting populations with educational understandings of viral pathways and pandemic traumatic affects can promote recognition of needs to guide and reinforce recovery efforts.

Conclusion

Historical learning from the 1918 Pandemic assists with grasping and focus of the present one. Engaging multi-disciplinary healthcare students in virtual reality scenarios with visual inclusion of Soul Injury staging will promote new pathways of care for healthcare workers, families, and the public affected by the present Pandemic. Virtual reality scenario simulation success is supported by social presence, social learning, and media richness theories. The Covid-19 and variant Pandemics effects include, insurmountable loss of life, loss of economic stability, loss of normal lifestyle, family function, and culture. Therefore, development of *The Soul-Injury-Pathway-of-Care* for patients, ancillary healthcare workers, families, and the general public affected by the present Pandemic and subsequent variants is mandated. The application of virtual reality scenarios coupled with Pandemic viral education will assist with recognition that a massive form of Soul Injury has occurred and the need for creation of therapeutic recovery pathways of care.



Soul Injury Poster Presentation Model

References

- Aassve, A., Alfani, G., Gandolfi, F., & Le Moglie, M. (2021). Epidemics and trust: The case of the Spanish Flu. *Health Economics*, 30(4), 840–857. https://doi.org/10.1002/hec.4218
- American Psychological Association (2021). U.S. adults report highest stress level since early days of the COVID-19 Pandemic.

https://www.apa.org/news/press/releases/2021/02/adults-stress-pandemic

Aparicio, M., Bacao, F., & Oliveira, T. (2016). An e-learning theoretical framework. *Journal of Educational Technology & Society, 19*(1), 292-307.

Bandura, A. (1971). Social learning theory. General Learning Corporation.

- Barnes, H. A., Hurley, R. A., & Taber, K. H. (2019). Moral Injury and PTSD: Often Co-Occurring Yet Mechanistically Different. *The Journal of Neuropsychiatry and Clinical Neurosciences*, 31(2), A4–A103. https://doi.org/10.1176/appi.neuropsych.19020036
- CDC, 2021. Delta variant: What we know about the science. *CDC*. https://www.cdc.gov/coronavirus/2019-ncov/variants/delta-variant.html
- Daft, R. L., & Lengel, R. H. (1984). "Information richness: A new approach to managerial behavior and organizational design," in L. L. Cummings & B. M. Staw (Eds.), *Research in organizational behavior*, (pp. 191-223). JAI Press.
- Dong, C., & Poh, S. (2015). Twelve tips for effective use of videos in medical education. *Medical Teacher*, *37*, 140-145.
- Ekert, J. O., Luchesa Smith, A., Ramsey, C. L., Robinson, N., Love, J., Gothard, P., & Armitage,
 A. J. (2021). Medical student-led simulation in COVID-19 crisis. *Clinical Teacher*, 18(3), 252–257 10.1111/tct.13308

- Gillson, S. L., & Ross, D. A. (2019). From generation to generation: Rethinking "Soul Wounds" and historical trauma. *Biological Psychiatry*, 86(7), e19–e20. https://doi.org/10.1016/j.biopsych.2019.07.033
- Griffin, B. J., Purcell, N., Burkman, K., Litz, B. T., Bryan, C. J., Schmitz, M., Villierme, C.,
 Walsh, J., & Maguen, S. (2019). Moral injury: An Integrative Review. *Journal of Traumatic Stress*, *32*(3), 350–362. https://doi.org/10.1002/jts.22362
- Herrera, F., Bailenson, J., Weisz, E., Ogle, E., & Zaki, J. (2018). Building long-term empathy: A large-scale comparison of traditional and virtual reality perspective-taking. *PloS* one, 13(10), e0204494. https://doi.org/10.1371/journal.pone.0204494
- Krylov, I. A., (1869). Krilof and his fables. Hanse Publishing.
- Litz, B. T., Stein, N., Delaney, E., Lebowitz, L., Nash, W. P., Silva, C., & Maguen, S. (2009).
 Moral injury and moral repair in war veterans: a preliminary model and intervention strategy. *Clinical Psychology Review*, 29(8), 695–706.
 https://doi.org/10.1016/j.cpr.2009.07.003
- Mamelund, S.-E. (2021). COVID-19: The power of historical lessons. *American Journal of Public Health*, 111(3), 405–406. https://doi.org/10.2105/AJPH.2020.306030
- Marcus, J. (2018). Adult nursing students' perceptions of social presence in facilitator-created subject-specific videos in an online nursing course.

NSUworks. https://nsuworks.nova.edu/fse_etd/194.

Marcus, J. (2019). Online educator entrepreneurship with facilitator-created subject-specific targeted videos, *FDLA Journal 4*(6). https://nsuworks.nova.edu/fdla-journal/vol4/iss1/6 Marcus, J. (2021). Inclusion of soul injury pathways of care for COVID-19 families and professional healthcare workers, 2021 Nursing Education Accreditation Conference (ACEN). https://web.cvent.com/event/45f7d0c0-defb-4b68-a180-ea0ed07f5505/summary

Opus Peace (2021). What is soul injury. Opus Peace. https://opuspeace.org/

Short, J., Williams, E., & Christie, B. (1976). The social psychology of telecommunications. Wiley & Sons. 9