"Everyone complains about the weather, but nobody does anything about it."

Cultivating Resilience and Reducing Burnout for Health Professionals: The Power of Presence, Reflective Practice and Appreciative Dialogue
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Medicine in Crisis

Crisis of meaning
Crisis of identity
Crisis of purpose
Crisis of role


Hypothesis:
Resilience is a capacity that can be cultivated and grown:

- Human beings are uniquely designed for this
- It involves reimagining our relationship to stress
- Appraisal-Perspective
- Building resources
- Acquisition of knowledge and skills
- Practice
- Commitment to self-care
- Experiencing micro-failures

Optimism
More and more I have come to admire resilience.
Not the simple resistance of a pillow, whose foam
returns over and over to the same shape, but
the sinuous tenacity of a tree: finding the light newly
blocked on one side, it turns in another. A blind intelligence, true.
But out of such persistence arose turtles, rivers, mitochondria, figs — all this resinus,
unretractable earth.
~ Jane Hirshfield ~
**Why clinician distress matters**

- Lower quality of technical care
- Riskier prescribing practices
- More medication errors
- Lower patient adherence to treatment
- More unsafe behaviors (e.g., needlestick injuries, not following protocols)
- Lower patient satisfaction
- Erosion of altruism and empathy
- Unprofessional conduct
- Poor relationships with staff and patients
- Higher attrition and job turnover ⇒ higher recruitment costs


**Burnout**

Three components:

- **Emotional exhaustion**
  - Silent anguish of healers (Neuwirth)

- **Depersonalization (cynicism)**
  - Deterioration of values, dignity, spirit and will (Spickard)

- **Low personal accomplishment**
  - Culture of endurance (Shanafelt)

Burnout

25% - 60% of practicing physicians

76% of internal medicine residents

45% - 53% of 3rd year students

Dyrbye LN et al. 2006 and 2010; Shanafelt TD et al. 2003

What causes burnout?

Balance
Career fit
Overwork
Work / home

Work Environment
Unsupportive
Competitive
Productivity pressure
Too many demands
Not enough time
Too much change
Low control / high responsibility

Physical
Sleep
Pain
Illness

Psychological
Alienation
Moral distress
Affect regulation
Mental stability
Self-awareness
Self-monitoring

Resilience

The ability of an individual to respond to stress in a healthy, adaptive way such that personal goals are achieved at minimal psychological and physical cost. Resilient individuals not only "bounce back" rapidly after challenges but also grow stronger in the process.

Epstein & Krasner 2013

Resilience

Positive values | The dark side | Resilience
---|---|---
Service, altruism | Over-commitment, self-deprivation, entitlement | Reframing, balance, gratitude
Excellence | Perfectionism, invincibility, hiding errors | Self-compassion, reflective self-questioning
Curative competence | Omnipotence, imposter syndrome, self-deprecation | Knowing one’s limitations
Knowledge | Need for certainty | Knowing what’s unknown, comfort with uncertainty
Empathy | Personal distress | Compassionate action
Caring | Neglecting oneself and family | Self-care
Equanimity | Distancing, “othering” | Engagement

How can we navigate the turbulent waters without becoming overwhelmed?

Interventions

- Kearney JAMA 2009
  - Self-awareness skills
  - Communication Skills
  - Sustainable workload
  - Reflective writing
  - Mindful meditation
  - Supervision and mentoring

Interventions

- West et al. Lancet 2016
  - 2617 studies-15 rct's, 37 cohort studies
  - 2914 physicians
  - Positive effects on all three domains of burnout
  - Individual focused and structural/organizational strategies

Interventions

- West et al. JAMA Internal Medicine 2014
  - RCT involving 74 MDs Department of Medicine at Mayo
  - 19 Bi-weekly facilitated discussions for 9 months
  - Increases in empowerment and work engagement
  - Improvements in burnout domains
  - No differences in stress, QOL, depression, job satisfaction strategies
  - Meaning at work increased

Interventions

- Krasner et al JAMA 2009
- Beckman at al Academic Medicine 2013
  - Mindful Practice program at URMC
    - Faculty: Ron Epstein, Fred Marshall, Patricia Lück and others
    - Undergraduate medical education
    - Residency education
    - Post-graduate education

Mindful practice

- Resilience and well-being
- Quality of care
- Quality of caring
Mindfulness

The awareness that arises out of paying attention on purpose, in the present moment, without judgment (Kabat-Zinn 1994)

Narrative Medicine

Narrative Competence: set of skills required to recognize, absorb, interpret and be moved by the stories one hears.

R Charon. NEJM 2004; 350: 862-4

To restore the human subject at the center—the suffering, afflicted, fighting, human subject— we must deepen a case history to a narrative or tale.

Oliver Sacks, The Man Who Mistook His Wife for a Hat

The bottom line

- Participation in a mindful communication program was associated with sustained improvements (<.001) in:
  - Patient-centered attitudes (empathy, psychosocial orientation)
  - Physician well-being (burnout, mood)
  - Personality (increased emotional stability).
- Associations were mediated by changes in mindfulness.
- Participants identified three themes: community, skills development, and giving oneself permission to take time for self-development
- Results replicated in Spain and North America, Hong Kong, Sweden

Summary

- Urgency to address the issue of burnout
- Individual and institutional commitments
- Turning toward the dissonance
- Clinical skills of working with uncertainty
- Not only for the “at risk” and the “floundering”
- Integrating the formal and hidden curricula
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