

Thinking ahead: How might what we know about resilience inform remediation?

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Questions we'll consider

- What do we know about resilience? How is it related to burnout?
- What theories might help us in understanding resilience and burnout?
- How might what we know about resilience and burnout inform remediation?
- What practical tips can we take from this?



Resilience

- The American **Psychological** Association (2014) defines **resilience** as “the process of adapting well in the face of adversity, trauma, tragedy, threats or even significant sources of stress.” *

* Southwick SM, Bonanno GA, Masten AS, Panter-Brick C, Yehuda R. Resilience definitions, theory, and challenges: interdisciplinary perspectives. *Eur J Psychotraumatol.* 2014;5:10.3402/ejpt.v5.25338. Published 2014 Oct 1. doi:10.3402/ejpt.v5.25338

Burnout

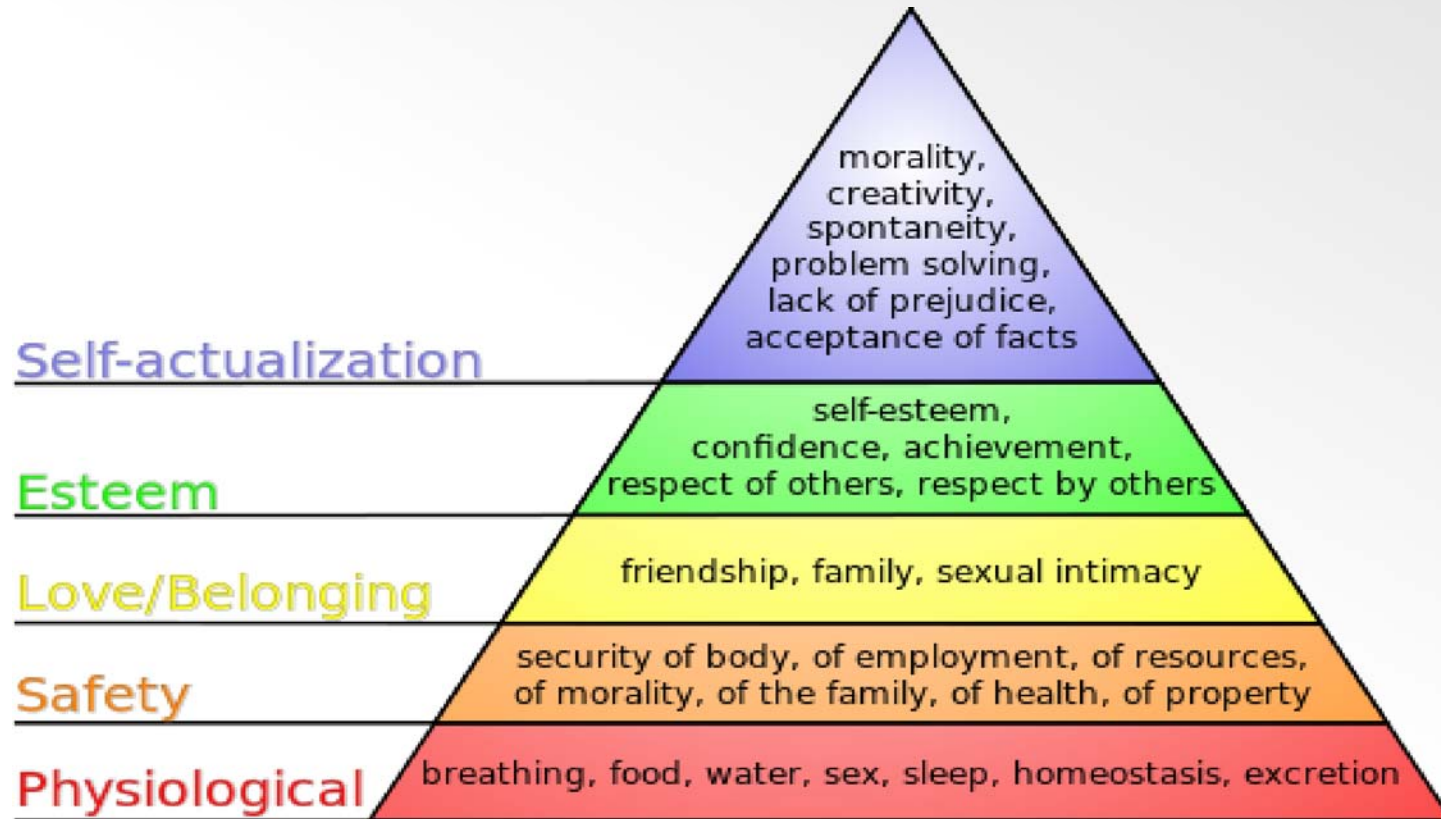
- Burnout is a state of emotional, physical, and mental exhaustion caused by excessive and prolonged stress. It occurs when one feels overwhelmed, emotionally drained, and unable to meet constant demands.
- 3 characteristics:
 - Depersonalization
 - Emotional fatigue
 - Perceptions of lack of competence and under-achievement

<https://www.helpguide.org/articles/stress/burnout-prevention-and-recovery.htm>

What theories might help us in understanding resilience and burnout?



1. Maslow's hierarchy of needs (1943, 1954)



2. Self-determination theory (ten Cate 2012)

- A theory of personal motivation (Ryan & Deci 2000; Deci & Ryan 2002)
- Human beings:
 - have a natural tendency to develop **autonomous regulation of behavior**, and
 - are **intrinsically motivated to learn** and to take on challenges.
- **Self-motivation and self-regulation are required of effective professionals.**

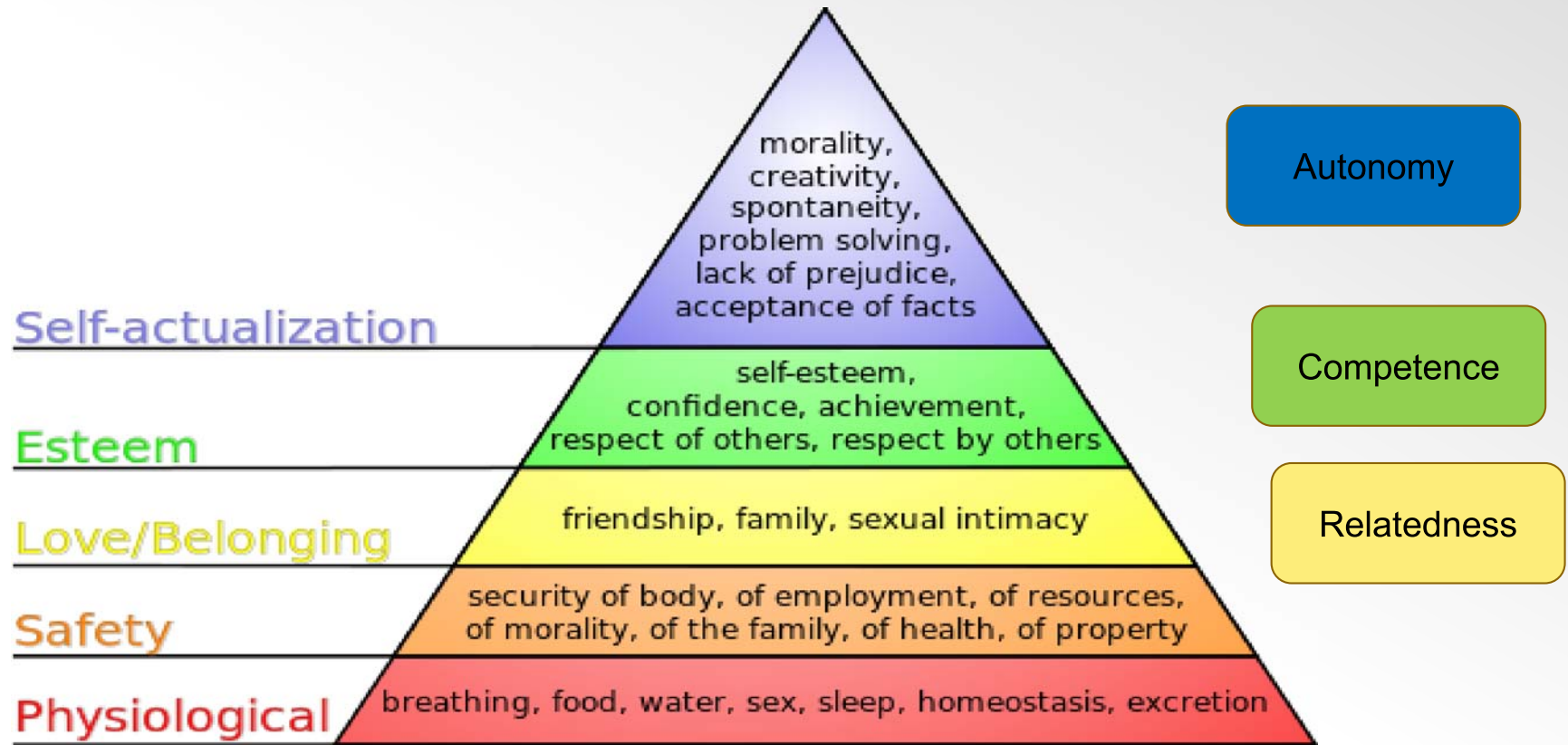
SDT - Internal motivation and self-regulation require that 3 basic psychological needs are met:

Competence

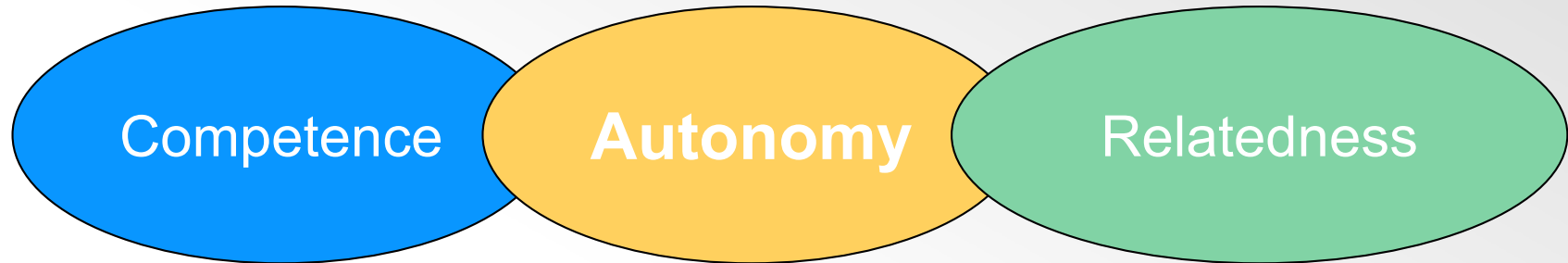
Autonomy

Relatedness

1. Maslow's hierarchy of needs (1943, 1954) and SDT



Meeting these 3 basic psychological needs also -



- Builds **resilience**
- Prevents **burnout**

Competence

- “The desire to feel effective in whatever actions one pursues and performs.”
- “This need leads people to seek challenges that are optimal for their capacities and to persistently attempt to maintain and enhance skills and capabilities.”

Autonomy

- “The desire to be one’s own origin or source of behaviour”
- “... does not mean acting without help from others, it means having feelings of volition and free will in whatever actions are carried out”.

Relatedness

- “Refers to the desire to feel connected with others, to caring and being cared for and to having a sense of belongingness, both with significant other individuals as well as with a significant community.”
- “Relatedness is being accepted and valued by others.” Having a formal membership in a community does not per se create relatedness

How might what we know about resilience and burnout inform remediation?

- Very basically, we want to –
 - Build physician's resilience
 - Prevent burnout
- How can we as assessors, regulators, educators, colleagues, support and strengthen physicians' resilience?
- Specifically, strengthen their:
 1. Sense of and actual competence?
 2. Sense of autonomy?
 3. Relatedness?

Practical tips for enhancing resilience:

- For enhancing physicians':
 - Competence?
 - Autonomy?
 - Relatedness?

- What role might coaching play in achieving these? (*Gazelle et al, Physician Burnout: Coaching a Way Out; JGIM, 2014*)