Cultivating Resilience: Personally and for Our Profession

Maryellen E. Gusic, MD

From the Academic Pediatric Association, McLean, VA
The author reports no conflicts of interest.
Address correspondence to Academic Pediatric Association, 6728 Old McLean Village Drive, McLean, VA 22101 (e-mail: info@academicpeds.org).

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IT HAS BEEN an incredible honor to serve as the President of the Academic Pediatric Association (APA) and I truly appreciate the opportunity to share a few thoughts about an important challenge facing academic medicine and health care in this address. Please allow me to start by acknowledging my colleague and dear friend, Dr Elisa Zenni, with whom I began thinking about this topic several years ago to create a workshop to present at the annual meeting of the Pediatric Academic Societies.

There has never been a more challenging time in academic medicine with transformative change happening across each of our mission areas.[1] Perhaps it is not surprising, therefore, that under these circumstances, a significant proportion of medical students, residents, and practicing physicians experience burnout.[2,3] Burnout is characterized by a loss of enthusiasm for work and emotional exhaustion; feelings of cynicism and depersonalization; and loss of a sense of accomplishment, a sense that one's work is no longer meaningful. The effects of burnout are devastating. Burnout can erode professionalism and affect the quality of care we provide for our patients while also affecting our personal relationships and contributing to substantial rates of substance abuse and disturbingly high rates of physician suicide.[4] The causes of this distress are rooted in our environment and the systems in which we work.

Dr Lara Goitein outlines the challenges we are facing in our current work environments[5]: higher clinical loads and pressures for increased clinical productivity to ensure our clinical facilities are financially successful or in some cases, remain viable; duty hour restrictions, which have contributed to added workload for faculty and which threaten the time faculty have to commit to teaching and research; decreased funding to support scholarly activities; increased oversight and regulatory requirements that affect our work and work flow; and decreased ability to advocate within these systems on behalf of our patients. The loss of autonomy, decreased ability to participate in decisions that affect our daily work, and erosion of a sense of meaning have led to feelings of disempowerment.

However, in this talk, I am not going to focus on the things that deplete us, rather I would like to provide a space for each of us to reflect on those things that energize us and that ensure our ability to contribute to our goal as individuals and to the APA's collective goal as an organization, to achieve optimal health and well-being for all children and adolescents. So, I ask each of you to take a moment to think about the things that truly energize you in your daily work. In the following definition of faculty vitality[6]: "…the synergy between high levels of satisfaction, productivity, and engagement that enables [a] faculty member to maximize her/his professional success and achieve goals in concert with institutional goals," the authors note that satisfaction and engagement are factors that contribute to professional productivity and to vitality. Professional vitality combats burnout and builds resilience. Although Merriam-Webster defines resilience[7] as an ability to recover or adjust easily to misfortune or change, I would like to refer to a quote[8] by Jamais Cascio, a futurist, to suggest that our goal in confronting the challenges and change in our environment is not simply to recover or adjust easily, but rather it is to thrive.

In a 2012 article by Shanafelt et al,[3] rates of burnout among US physicians in various specialties were reported relative to the general population. The good news is that relative to some of our colleagues in other specialties, a smaller percentage of general pediatricians reported burnout. Pediatric subspecialists reported higher rates of burnout but still at levels below the mean for all physicians. Although a relatively high percentage of general pediatricians reported high satisfaction with work–life balance in this study, I would like to talk about how elements of our professional life beyond how much work leaves time for personal and family life contribute to our resilience and how personal, institutional, and organizational efforts can promote vitality and combat burnout.

In thinking about these elements, I would like to share a framework adapted from an article by Dr Laura Dunn and colleagues entitled, "A conceptual model of medical student well-being: promoting resilience and preventing

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burnout" published in *Academic Psychiatry* in 2008.[9] In this article, the authors use the image of a "coping reservoir" that is replenished and drained by various aspects of students' experiences. The internal structure of the reservoir helps to determine an individual's responses to his or her experiences. The internal structure depends on one's personal traits, temperament, and coping style. Negative inputs drain the reservoir. I have outlined some of the negative inputs affecting us all earlier in this talk. Positive inputs fill and replenish the reservoir contributing to our resilience and ability to thrive. Positive inputs come through proactive management of our career, a supportive ecology in our divisions, departments, and institutions, and the psychosocial support provided by our membership in a professional organization that affirms and cultivates our professional identify and strengthens our network.

A growing body of evidence suggests that efforts to find meaning in one's work increases satisfaction and reduces burnout. Dr Rachel Remen, in an editorial in the *Western Journal of Medicine*[10] entitled, "Recapturing the soul of medicine: physicians need to reclaim meaning in their working lives," describes the importance of finding meaning because doing so transforms how we experience change and challenge. In another editorial,[11] Dr Tait Shanafelt calls efforts to enhance meaning in one's work, the prescription for preventing burnout. Finding meaning is what gives us a sense of professional vitality.[12]

Pursuing and preserving meaning in one's work as a leader is described by Bill George, the former CEO of Medtronix and a Professor at Harvard Business School, as discovering your true north.[13] Your true north is the guidepost that allows you to remain true to what is most important to you. Diane Coutu reaffirms this perspective in an article entitled, "How resilience works," in the *Harvard Business Review*,[14] stating that making meaning is the way resilient individuals build a bridge from present hardships to a fuller, better constructed future. Marcel Proust described this concept in the following quote: "The voyage of discovery is not in seeking new landscapes but in having new eyes."[15]

There is no doubt that we all find meaning through work aligned with our organization's vision[16] to create a better world for children and families by advancing child health and well-being, but I would like to think about how finding meaning plays out in our day to day work. Shanafelt and colleagues stress the importance of maximizing career fit to prevent burnout in a study published in the *Archives of Internal Medicine*.[17] The authors note that faculty who spent less than 20% of time on the activity that is most meaningful to them had higher rates of burnout. The ability to focus on the aspect of their work that brought participants the most meaning had a strong inverse relationship to the risk of burnout. In this study, physicians who reported that they found education to be the most meaningful activity were least able to spend at least 1 day per week in this activity. Importantly, the authors also documented that academic faculty who experienced burnout were more likely to report an intent to leave academic medicine. As noted by Mahatma Gandhi, "The future depends on what we do in the present."[18] Highlighting this sentiment, the authors suggest that efforts to maximize career fit should begin before day 1 on the job. Specifically defined job descriptions that outline expectations and ensure that from the day faculty are hired, there is a match between what they are expected to do and what they want to do and what gives them meaning, ensures fit and will contribute to resilience. In a separate study, Shanafelt and colleagues further show the positive effects of finding meaning in work.[19] In this study, surgeons reported finding meaning in work and focusing on what is most important in life are coping strategies that reduce burnout.

Proactive management of our careers and making decisions that allow us to allocate our professional time in the activities that bring us the most meaning gives our lives significance. So I ask: Do we say "yes" using our true north as a guide to decision-making? Do we consider what we love most about our work or think about what we wish could do more of, when we negotiate with our supervisors and work with our mentors?

Alignment of individual goals with the institutional mission creates what Janet Bickel in a book entitled, *Faculty Health in Academic Medicine*, calls a supportive ecology.[20] She notes, "resilience in part, depends on building one's community." What can an institution do to support faculty and promote resilience? Dr Colin West and colleagues share one institution's approach in an article that describes an intervention using a facilitated small group curriculum to promote physician well-being, job satisfaction, and professionalism.[21] Physician volunteers were randomized to intervention and control groups. Each group was given 1 hour of protected time every other week. The intervention group participated in facilitated small group conversations with peers and learned skills and strategies such as mindfulness and reflection in sessions intended to promote a sense of community. By creating a space for collegiality and shared experience, the intervention enhanced a sense of meaning, empowerment, and engagement in work for participants. Results were sustained 12 months after the study. The authors propose that maximal effect on resilience occurs when individual strategies, such as mindfulness training,[22] are paired with institutional efforts. West further suggests that physician well-being should become a formal metric by which our institutions are measured and that this indicator become part of the "quadruple aim" to which every institution should aspire.[23]

Dr Mark Linzer in a commentary to the 2009 Shanafelt article,[11] highlights the cost of faculty leaving academic medicine when they experience burnout and suggests that supervisors further assess career fit during annual review meetings.[24] Mentors can play an important role in helping colleagues prepare for these critical conversations. Mentors can advise mentees about how to negotiate for time to focus on aspects of their work that are most meaningful to them. As sponsors, mentors can also identify opportunities for mentees to contribute as a member of the broader academic community in ways that bring meaning to their professional career. Rachel Ramen, in the commentary referred to earlier, suggests that finding ways to strengthen