

Eight principles for being a resilient doctor

Medicine is a rewarding and challenging career, and hanging in there for the long haul requires the ability to transcend adversity. If medical practitioners are to be effective in providing care to patients and contributing to healthier and stronger communities, they need to learn to look after themselves, as well as their patients.

Professor Leanne Rowe and **Professor Michael Kidd** share their advice on building resilience.

MEDICINE is a rewarding and endlessly challenging career, and hanging in there for the long haul requires the ability to transcend adversity. When we consider all the complex issues we juggle every day, sometimes it seems easier to try to ignore the frustration and just get on with the job. But chronic states of stress can catch up with us and if this happens patient care will suffer.

Most importantly we need to challenge our medical culture which tends to encourage us to wear a state of chronic stress as a badge of honour. We need to think about ways to maintain our own resilience in the long term and care for our colleagues.

Looking after ourselves and building strong relationships is an essential component of providing competent medical care to our patients. Through our experience as doctors we learn how to deal effectively with the many great joys and the many challenges of medical life. Outlined here are some of the principles we have learned about developing resilience.

Make home a sanctuary

In any demanding career, it is essential to have a quiet sanctuary away from work. It is sometimes difficult to nurture personal relationships when working long hours or in different locations. It is tempting to withdraw on the weekends if we have been interacting with hundreds of people during the week. While making time for solitude is important, withdrawing socially from people regularly is a sign of burnout, which can lead to mental health problems.

We can proactively choose partnerships and friendships which energise us and provide mutual love and support. As doctors we often find ourselves adopting our carer role in our personal relationships, and while this is inevitable, it is also important to seek out people who will help sustain us.

By caring for our families and friends, we create a welcoming sanctuary at home – a place to relax and restore ourselves and our loved ones.

Value strong relationships

Strong doctors have strong relationships. As doctors we face excessive demands on a daily basis. To get the job done, many of us try to manage each day by unsuccessfully attempting to complete endless 'tick lists' at the expense of our professional and personal relationships.



We also need to take time every day to nurture healthy relationships with our family and friends, our patients, our colleagues, our physical environment and ourselves.

Anyone with the right training and experience can become an excellent medical technician. What sets excellent doctors apart are their strong, caring relationships with people.

Have an annual preventive health assessment

As doctors, we each need our own doctor, someone whom we trust for our own medical care and advice. If we are going to prevent our own major health problems, we must attend our own doctor for regular evidence-based

preventive health assessment to allow early identification and management of the symptoms and signs of any physical or mental illness.

The early detection of serious illness saves lives and can prevent years of unnecessary suffering. As doctors, we deserve to have access to the same level of quality medical care that we provide to each of our own patients. Our families also deserve this standard of care.

Organise for a check-up today with a trusted colleague.

Control stress, not people

As doctors, we tend to have reputations for being over controlling. Whether this is true or not, many of us tend to develop driven personalities as an adaptation to the demands of our work. This personality can be a positive in the workplace, but can be damaging in our personal lives.

We need to accept that other people can't be controlled, and allow others to learn from the consequences of their actions. We need to learn to delegate and share care more effectively. Sometimes our patients, particularly those with special needs, benefit from a multidisciplinary team approach rather than the services of a single doctor working in isolation.

It is important to maintain feelings of control over our lives by managing the stresses we do have control over. Ignoring problems will not make them go away. We can take time to address the background stresses in our lives and to transcend difficulties by:

- Understanding our driven personalities and learning to take a break from these traits.
- Recognising and addressing signs and causes of chronic negative stress.
- Leveraging time and delegating tasks.
- Challenging our own negative thinking and beliefs. ▶

- Aiming for wellbeing, rather than absence of stress.

Recognise conflict as an opportunity

This is not about seeking or avoiding conflict. It's about managing conflict maturely when it inevitably arises. In order to deal effectively with conflict, we can recognise it as an opportunity to build stronger relationships with people. If we have ever had a calm debate with someone over an important issue that concludes in a negotiated solution, we will recognise that our relationship with that person has become stronger. If we have ever amicably agreed to disagree with someone over an issue, we will recognise that the ability to have an open debate, even without resolution, has strengthened our relationship with that person.

On the other hand, avoiding conflict, non-assertiveness, hyper-sensitivity to criticism, refusing to listen or angrily squashing another person's point of view can be destructive to relationships. We can become as expert at managing challenging behaviours and strong personalities, conflict and anger as we are with managing other aspects of our professional work. We can learn how to deal with criticism constructively.

Manage bullying and violence assertively

Bullying and violence are not acceptable behaviours and must not be tolerated. As doctors, we must know our responsibilities as employers in addressing cases of bullying or violence in the workplace. We need to be aware of how our own behaviours are perceived and strive always to behave in an appropriate professional manner.

Medical practitioners must become skilled in ways of assertively managing patient-initiated violence and violent behaviour must always be reported to the police. Failure to do this often results in the violence being deflected onto another colleague or onto the wider community.

It is well known that people with mental illness suffer a great deal because of the stigma attached to their disorder and they are more likely to be the victims rather than the perpetrators of violence. People with mental illness are over-represented in the criminal justice

system and this is a major worldwide human rights issue. It is our responsibility to advocate for better access by our patients to optimal mental health care.

Make our medical organisations work for us

Our medical organisations are charged with the responsibility of advocating about many of the issues that affect our ability to deliver a high-quality service to our patients and our communities. These issues may range from areas of clinical interest, inequity in access to health care, clinical independence, training needs or the impact of the environment on health.

By becoming involved in our membership organisations, even in a limited way, we can gain peer support, develop areas of special interest and learn how our organisations work and how they can provide us with ongoing support and advice. Our medical organisations can also provide opportunities for leadership training to support our roles in advocating for our communities and our patients.

Create a legacy

We can be proud of our profession. Each of us has the potential to be a role model for future doctors and contribute our own lasting legacy through the examples we set in the way we live our lives and practise medicine.

It may be worth considering how each of us would like to be remembered at the end of our medical careers and act accordingly now. Each of us has a set of values and principles which determine how we behave as ethical medical practitioners. In creating our legacy we can also discover ways to transcend adversity that we encounter as part of our professional lives.

It helps to focus on big-picture issues that make a difference by:

- Finding meaning and purpose in our everyday work and rediscovering the joy of being a doctor.
- Identifying the qualities we admire in our role models, mentors and colleagues.
- Upholding our integrity in all we do.
- Developing goals for all aspects of our lives including our spiritual life, our physical and mental health, our careers and our relationships with other people.

- Personally supporting our medical and other colleagues.

In closing ...

While 'first do no harm' has long referred to protecting our patients, in the 21st century its meaning needs to be expanded to also include protecting our families, our colleagues, our environment and ourselves.

This article is an edited extract from the book First do no harm – being a resilient doctor in the 21st century by Adjunct Associate Professor Leanne Rowe AM and Professor Michael Kidd AM. Both authors are general practitioners, and are a past chair of the RACGP Victoria and a past president of the RACGP, respectively.

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Helping doctors

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