

# THE WELL-BEING OF MEDICAL RELATIONSHIPS:

Striking a Balance with  
Your Spouse, Colleagues & Self



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# INTRODUCTION

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Becoming a physician is no easy task. If you are a physician, you probably agree that getting into medical school is just one hurdle in a series of many toward the ultimate goal of practicing medicine. The process of medical training can be extremely challenging and can take its toll on both you and your relationships. In some cases, the impact can be irreparable and it can become difficult to foster new, healthy relationships.

The information contained in this e-book addresses some of the most common challenges physicians and physicians-in-training face in their work and personal relationships. A recurrent theme of callers to the Physician and Family Support Program (PFSP) assistance line is difficulty with relationships, particularly with partners/spouses. Additionally, conflict management in the workplace is a common topic request for education sessions. Through information, links to professional resources, illustrative situations and the “Bring it all together” concluding exercises, this e-book provides guidance with respect to personal and work-based relationships and encourages reflection and consideration.

## **What is the role of PFSP?**

PFSP provides support through a 24-hour a day, 365-days-a-year assistance phone line for medical students, residents, practicing physicians and their families in Alberta. When you call the line you will speak to a physician who will provide collegial support and assistance with identifying resources relevant to your concerns. PFSP also provides education pertaining to health topics that are most pressing to Alberta physicians and trainees.

## **How to use this guide**

The information provided in this booklet is intended to be a source of information and guidance but is not intended to replace seeking professional help, as needed.

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# SECTION 1:

## THE WELL-BEING OF THE RELATIONSHIP WITH YOUR PARTNER/SPOUSE

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*"I think the most significant work we'll do in our whole life, in our whole world is done within the four walls of our home." ~ Stephen R. Covey*

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Without question, stress at home can lead to stress at work and stress at work can lead to stress at home. It can seem almost counter-intuitive, but it's crucial to prioritize our intimate relationships when difficulties arise. Approaching these relationships with the attention they need and deserve can be beneficial to the balance in other areas of our life, as well as to our personal wellness. For the purposes of this discussion, we will refer to this relationship as the "medical marriage," recognizing the many variations that may exist according to your own situation.

### Unique challenges of a medical marriage

In their book, *The Medical Marriage*, Wayne and Mary Sotile identify some common psychological characteristics that physicians often bring into relationships, including:

- Compulsiveness
- Perfectionism
- Emotional detachment
- Workaholism
- Loss of playfulness
- Poor interpersonal relationships
- The triad of doubt, guilt and an exaggerated sense of responsibility

While it would be difficult to not identify with some of these characteristics as a physician, the Sotiles present some stereotypical concepts about physicians to make a point. One of the characteristics that is fairly universal among physicians is workaholism. In fact, medical training and our health care system play an integral role in the development of this pervasive trait. As Dr. Michael Myers, a psychiatrist who specializes in physician health and medical relationships notes, the culture of medicine has to change.

"It is impossible to give lovingly and graciously to a relationship if you are exhausted and have not had enough time alone."

The Sotiles also identify other stressors on a medical marriage:

- Grueling work and study during medical school and residency
- Postponing family life until finished training
- Continuous exposure to pain, suffering and death
- Post-training, the reality of a practice filled with volume demands and financial expectations
- Fear of making mistakes

At the core of human nature, we all want to love and be loved, physician or not, so taking time to nurture and foster a healthy relationship is worth the rewards. As Dr. Michael Myers also says, communicating in a mature and giving way in a relationship or marriage is not innate. Relationships require time and effort to flourish to their potential. The connection a physician has with his/her spouse/partner is usually the biggest source of support in the face of the challenges and stressors of practicing medicine.

## The dual physician relationship

The dual physician relationship is not that uncommon, as nearly 40% of physicians are likely to marry another physician. Although this union has its own unique set of challenges, such as striking a balance between work- and home-life, it has benefits as well. A 2002 study of dual physician marriages found they have a relatively low divorce rate of 11% compared to the commonly quoted rate of 50% for non-dual physician marriages.

As relationship expert John Gottman observes in his *Seven Principles for Making Marriage Work*, the ability to find shared meaning builds better emotional connections and leads to greater stability in our relationships. We will talk further about the value of shared meaning and how it contributes to the resilience of dual physician relationships.

## The benefits of marriage

Despite the various definitions and representations of marriage in our modern society, the sanctity of marriage is still valued. The fight for same-sex marriage exemplifies the importance marriage still holds in our culture.

Marriage has some additional validated benefits, including:

1. **Overall health & longevity:** A Harvard Health Publication on this topic cited a study conducted with 3,682 adults over a 10-year period. "Even after taking major cardiovascular risk factors such as age, body fat, smoking, blood pressure, diabetes, and cholesterol into account, married men had a 46% lower rate of death than unmarried men." Additional factors contributing to the evidence supporting improved health with marriage include improved eating patterns, increased physical activity and decreased risky behaviours such as smoking and drinking excessively.

2. **Cancer Survival:** In the article *Marriage Benefits May Extend to Cancer Survival*, it cited that married people are between 12% and 33% less likely to die from cancer than those who were not married. It is thought that this may be in part related to social support where married people “have someone to share the burden of their diagnosis, which may reduce depression and anxiety” and have someone to accompany them to appointments.
3. **Happiness:** Harvard psychologist Dan Gilbert points out, “It’s not marriage that makes you happy, it’s happy marriage that makes you happy.” According to Gilbert, the best predictor of happiness is the quality of your relationships. So what about an unhappy marriage? Not only can it lead to unhappiness, but also increased stress and poor health consequences. In light of these facts, couples in unhappy marriages can benefit in many ways from working on their marriage and improving their relationship.

## Four pillars of a medical marriage

The pillars of a medical relationship really align with those of any intimate relationship. While we know the foundation of healthy relationships, do we always put that knowledge into action? Reviewing the pillars of a medical marriage serves as a good reminder.

1. **Intimacy:** One of the primary differences between marriage and our other relationships is intimacy. Emotional and sexual intimacy is very important in a marriage, and are in fact best found in long-term relationships. As Gottman says, “The goal of sex in a long-term relationship is to have fun, heighten closeness, and feel valued and accepted in this very tender area of your marriage.”

Intimacy and connection are basic human needs that can lower stress and improve our emotional health. Dr. Kallman Heller discusses the need for passion and sex in a marriage in his article *Sexuality and Marital Intimacy*. “Sexual and emotional intimacies are inextricably linked. A marriage that loses its passion becomes merely a good friendship and ceases to be a true marriage - which ultimately even ruins the friendship.”

Unfortunately, in a marriage either party may attach different meaning and importance to sex, leading to conflict as opposed to closeness. In Gottman’s book, *Relationship Cure*, he indicates 69% of marital conflicts never go away, such as ongoing issues related to sex, money and housework because people attach different meaning to the same situations.

As well, married couples often perceive they don’t have time to prioritize sex due to life’s busy schedules with children and work, often ending the day so drained that one or both partners is not interested. As with any other important aspect of your life, sex may need to be scheduled, whether it’s private time alone as a couple, a mini get-away or a recurring date night.

2. **Respect and appreciation:** It is pretty hard to have one without the other - by virtue of respecting your spouse you appreciate them and vice versa. Respect is one of the most important factors in any relationship - whether it be respect for others or for ourselves. Feeling disrespected during some point in medical training seems to be an almost universal occurrence. In turn, the moment you feel respected, your sense of validation and purpose is elevated. Applying this awareness to our intimate relationships can be transformative.

Research shows that displaying even a little gratitude can protect marriages from the consequences of conflict. In a study titled *Linking financial distress to marital quality: The intermediary roles of demand/withdraw and spousal gratitude expressions*, the researchers found that spousal gratitude was the most important predictor of marital quality and was found to have a protective effect on marriage stability. Allen Barton, the lead author of the study says, "Gratitude can really help create an environment where negative events such as a financial hiccup or a work stress simply bounce off and don't have the same negative effect."

3. **Find shared meaning:** Gottman talks about the principle of shared meaning and its role as the foundation of a healthy marriage. Without question there is something to be said for the ability of two people to find meaning together. It can help resolve conflict in the pursuit of meaningful goals. We will discuss work relationships in the next section, but shared meaning can be seen in positive work environments where people can turn to one another, particularly in the face of conflict.

How can you find shared meaning? Start by talking about your dreams and aspirations. Gottman further describes shared meaning - by the use of rituals, supporting each other's roles and sharing values and goals - as ways to engage in meaningful activities that draw people together emotionally. Simply recognizing the idealism in your partner's position, and talking about it, can be an effective way to connect.

4. **Communication:** As physicians, we learn early on that communication is the key to working with patients and health care teams. We also know this to be true with our interpersonal relationships, especially with our spouse. Communication patterns become part of the relationship and often the basis of marital therapy.

One of the best pieces of advice when it comes to communication is Stephen Covey's Habit #5: "Seek first to understand, then to be understood." Stephen Covey died four years ago but his messages remain powerful life lessons. In his book *The Seven Habits of Highly Effective People*, Habit #5 is based on the principles of empathic communication. Another way he presents it is to "diagnose before you prescribe."

It seems pretty logical but unfortunately, as Covey describes, our own "autobiography" often gets in the way of understanding the other person. Empathic listening is the attempt to truly listen for purposes of understanding the other person both emotionally and intellectually.

As Covey so accurately states, we often listen to other people from an autobiographical perspective; in other words, we are listening and looking from our point of view. He describes the four conversation traps that we commonly fall into:

1. **Evaluate** - decide if we agree with what we hear
2. **Probe** - ask questions from our own perspective
3. **Advise** - give advice based on our experiences
4. **Interpret** - analyze other's motives based on our own

Instead, it is more effective to develop empathic listening. Covey identifies the following four stages of empathic listening:

**Stage 1:** Mimic content - this is the least effective form of listening.

**Stage 2:** Re-phrase the content - this is an attempt to let the other person know you are listening.

**Stage 3:** Reflective feeling - you are gaining an understanding of what the person is saying on a deeper level.

**Stage 4:** Re-phrase the content and reflect the feeling - by combining stages 2 and 3, you are demonstrating a higher form of listening that inspires openness and trust.

Alternatively, if the other person is displaying empathetic communication by re-phrasing and reflecting our feelings, we feel understood and validated and in turn are motivated to understand the other person.

## **A few tips related to the four pillars of a medical marriage**

1. **Partings and reunions** - A parting gesture is made before you say goodbye in the morning, e.g. learn something about your spouse's day - maybe a challenging case they're working on or a meeting. A reunion gesture is a hello kiss and hug (Gottman says lasting six seconds); also engage in a stress-relieving conversation about the day.
2. **Appreciation** - Find a way to express gratitude and appreciation for something your spouse does. For instance, if you were at work taking care of patients and your spouse was at home taking care of the household and children, recognize and appreciate the importance of that in a genuine way. A common spousal sentiment in a medical marriage is feeling taken for granted.
3. **Set aside time for your spouse** - This is not the same as what we discussed under intimacy. This refers to time to be with your spouse and to let them know they are a priority. Dr. Michael Myers illustrates a common dialogue between physicians and their spouse, where the spouse feels like number four or five on the priority list. He says learning to say "no" to other less important things improves the balance in a physician's life.
4. **Ask your spouse if they feel appreciated** - This is analogous to an office visit with a patient; in some cases, what we think they are presenting for is different than what they think. For instance, a patient may just want to hear it isn't cancer; otherwise they don't feel they were heard. While you're thanking your spouse for picking up your dry cleaning, they may want to hear "thank you for putting some of your career goals on hold to be the glue for our family."
5. **Develop a ritual of connection** - One way to do this is through family meals. Not only does this ritual strengthen the connection with your loved ones, research shows that even three meals together a week can improve child outcomes. In light of our busy schedules, these weekly rituals of connection may need to be officially scheduled in order to prioritize their importance.



6. **Discuss shared parenting goals** - Parenting styles can generate conflict but parents may discover they have shared goals, too. For instance, both parents may discover that along with the day-to-day aspirations they possess for their children, such as raising them to “pick up after themselves” and “always say please and thank you,” they share deeper parenting goals, such as raising altruistic, kind and generous children.
7. **Reserve time for communication** - Dr. Myers talks about safeguarding time for communication despite the busy-ness of life. He says the majority of couples he sees communicate best away from home where there are fewer distractions and sources of stress. Maybe go for a walk or a bike ride.
8. **Empathetic listening** - As an exercise, consciously try listening to a loved one in a purposely empathetic manner. For instance, next time your spouse or child talks about a challenge or concern, really try to understand their perspective by re-phrasing the content of the conversation and reflecting their feelings.

# SECTION 2:

## THE WELL-BEING OF THE RELATIONSHIPS WITH YOUR COLLEAGUES

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*“If you argue and rankle and contradict, you may achieve a victory sometimes; but it will be an empty victory because you will never get your opponent’s good will.” ~ Dale Carnegie, How to Win Friends and Influence People*

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### Collegiality

As defined by the [College of Physicians and Surgeons of Ontario](#), collegiality is “cooperative interaction between colleagues. Mutual trust, respect, and knowledge of each other’s expertise, skills and responsibilities are all important to establishing collegial relationships.”

As a relationship that requires attention, just like any other, successful physician-to-physician interactions are an essential component of health care delivery.

In the article *How Doctors Treat Doctors May Be Medicine’s Secret Shame*, Dr. Ranjana Srivastana highlights the conflict that often exists between doctors and suggests that medical training should both acknowledge this and identify prevention strategies. A colleague of Dr. Srivastana’s has told her that most doctors seek her help to figure out ways to peacefully co-exist with other doctors. She adds, “I can’t help thinking that the hidden shame of medicine may yet turn out to be the doctor-doctor relationship, that powerful force which ultimately influences how doctors treat their patients.”

One very important and increasingly recognized aspect of collegiality is Emotional Intelligence (EQ). Fostering your EQ will help you in so many aspects of life, particularly in conflict resolution. Following is a brief overview of the concepts of EQ:

- **Self-awareness** - being aware of your emotions
- **Self-regulation** - exerting control over your emotions
- **Motivation** - displaying commitment to your goals
- **Empathy** - recognize how other people feel
- **Social skills** - the ability to communicate effectively

## Physician groups

The importance and benefit of physician groups is worth mentioning in the context of collegiality. In the article *Building Physician Resilience*, the authors say “Peer support is essential with open communication around difficult cases and stress-related issues” (Jensen et al, 2008). Balint Groups are an example of structured physician groups consisting of six-to-10 members and one or two trained leaders. These groups that focus on doctor-patient relationships with peers improve empathy and resilience (both personal and professional).

Some physicians belong to less-structured groups such as journal clubs or women-in-medicine groups that allow for a shared experience with a common understanding. The relationships that develop in such environments can benefit both the participating physicians and their patient care.

## Mentorship

Mentorship in medicine is a common practice and is usually informal, but more formal structures exist at the medical education level. A mentoring relationship involves a mentor (one who provides mentoring) and a mentee (one who is mentored). Opportunities to be both a mentor and a mentee can be extremely beneficial to both parties.

According to Dr. Ratnapalan, in his article *Mentoring in Medicine*, mentorship is based on consideration, camaraderie, commonality and confidentiality. These are all very important concepts for the relationship to flourish.

Following are some of the benefits of mentoring:

### Mentor

- improved leadership skills
- professional development
- personal development such as self-reflection
- investing in the future generation
- learning from your mentee
- gaining new perspectives
- renewed appreciation for medicine/career
- improved physician wellness

### Mentee

- learning life and professional skills
- professional development
- personal development such as confidence
- career coaching
- guidance
- sustained/renewed interest in medicine/career
- goal-setting
- improved physician wellness

## Four pillars of collegiality

1. **Empathy:** Very early on in medical school, you are educated about the importance of having empathy for your patients and their families. Empathy is the ability to sense other people's emotions, coupled with the ability to imagine what someone else might be thinking or feeling. In a Royal Society for the Encouragement of Arts, Manufactures and Commerce (RSA) [cinematic short](#) on empathy, author Brené Brown accurately depicts empathy in a fun, sensitive way. Her main message is that empathy is markedly different than sympathy: "Empathy fuels connection. Sympathy drives disconnection." For Brown, empathy requires the ability to take another perspective, stay "out of judgment," recognize emotion in other people and communicate that. Empathy is "feeling *with* people."

Essentially, from empathy springs compassion, perspective and solidarity. Having compassion for someone else allows you to truly feel for that person without minimizing it or trying to fix it. It's about taking your understanding of what someone is going through and "connecting with something in yourself that knows that feeling," says Brown.

Imagine you are a physician in a group practice and you have a fall at home, resulting in a fractured leg. A few days later you are at work with cast and obvious mobility issues. Two scenarios ensue with your colleagues: the first is that your colleagues ask you how you are doing and offer to help where they can; the second is that your colleagues ignore your situation. Does the second scenario do anything to help foster collegiality? Absolutely not. Lack of empathy for you only makes you less likely to in turn be empathetic to your colleagues, resulting in problems in the relationships.

2. **Communication:** Dr. Martin Seligman, a professor of psychology at the University of Pennsylvania, is an expert in the field of positive psychology and optimism. In his book *Flourish* (an extension of his bestselling books *Authentic Happiness* and *Learned Optimism*), he reveals new concepts of what well-being truly is, based on the premise that "very little that is positive is solitary."

As part of building positive relationships, we need to learn how to respond to others and to communicate effectively. As Seligman notes, how we respond to each other either builds relationships or knocks them down. He identifies four ways to respond; only one of which *builds* relationships.

Given this example - "I was just offered a new job that is perfect for me!" - it is easy to identify the best way to respond:

- **Active & constructive:** "Wow that is fantastic! All of your hard work paid off! Tell me all about it over a celebratory supper!" (non-verbal reinforcement such as smiling, maintaining eye contact)
- **Passive & constructive:** "Good to hear. I am glad for you." (no obvious non-verbal emotion)
- **Active & destructive:** "That sounds like a lot of juggling for your family life. Are you sure you can handle it?" (non-verbal negative emotions such as frowning)
- **Passive & destructive:** "My day at work really sucked." (non-verbal avoidance, turning and walking away)

By working on our “active and constructive’ responses,” we will not only strengthen the relationship but also enhance the well-being of the people involved.

3. **Civility:** Dr. Michael Kaufmann, with the Ontario Medical Association Physician Health Program, wrote a series of articles on *The Five Fundamentals of Civility for Physicians*, published in 2014 and 2015. His favourite definition of civility comes from The Institute for Civility in Government, which has high regard for physician-colleague relationships:

“Civility is about more than just politeness, although politeness is a necessary first step. It is about disagreeing without disrespect, seeking common ground as a starting point for dialogue about differences, listening past one’s preconceptions, and teaching others to do the same. Civility is the hard work of staying present even with those with whom we have deep-rooted and fierce disagreements. It is political in the sense that it is a necessary prerequisite for civic action. But it is political, too, in the sense that it is about negotiating interpersonal power such that everyone’s voice is heard, and nobody’s is ignored.”

The five fundamentals of civility include the following:

1. Respect others and yourself
2. Be aware
3. Communicate effectively
4. Take good care of yourself
5. Be responsible

For now, let’s focus on respect.

As Kaufmann indicates, “respect and civility are intertwined” (2014). In medicine, respectful relationships encourage engagement and are key ingredients in effective patient care. Certainly some situations exist where you may not respect a colleague, but this may prove to be a mirror for behavior that you do not wish to display. In fact, this reflection exercise is a powerful form of self-awareness that allows physicians to examine aspects of themselves that impact their reactions to situations.

4. **Conflict management:** Conflict management is a commonly requested topic for the PFSP education sessions, with good reason. Conflict in the workplace is common and if unresolved, is detrimental to the work environment. Stress outside of work can be a significant source of conflict too, leading to a domino effect with those involved.

In 2015, the Canadian Medical Protective Association (CMPA) featured an article in their **Perspectives** publication entitled *Conflict Between Physicians and What Can Be Done About it*. They offer other causes of conflict, such as communication issues, differing priorities and competing perceptions or goals that can result when people care strongly about the outcome. Denial, demonstrated by failing to resolve conflicts in health care, is a noted, ineffective coping mechanism that can impact a physician’s well-being, threaten patient safety and have numerous other negative outcomes.

## Methods to resolve conflict:

Communication is the most effective way to resolve conflict. It is the basis of relationships, leadership and personal growth. While face-to-face communication is still preferable, written, over-the-phone or digital interaction is necessary in some circumstances. We discussed some of the concepts of effective communication, such as Covey's "Seek first to understand, then to be understood." (2004).

Another concept of effective communication and conflict resolution is saying, "You're right," according to Marie Forleo, a personal development entrepreneur. In her video [Two Words to 'Win' Any Argument, Fast](#), Marie prescribes a strategy to instantly disarm a heated discussion and that's to reply with, "You're right." In a situation of potential conflict, you may want to interject not only to give your opinion, but also to win the argument. However, if you approach potential conflict with the intent of winning, it will feel like a loss regardless of the outcome. But, by saying "you're right" you're not necessarily admitting that you're wrong. Instead, you're validating what the other person is saying and providing a platform to present your opinion in a less volatile environment. The 'win' is when you and that person come to a resolution and hopefully, mutual respect.

Another way to approach conflict is to brainstorm. In this case, the parties involved in the conflict examine the pros and cons, possible outcomes and worst- and best-case scenarios. The CMPA suggests that the parties look at both sides, analyze their needs and explore mutually agreeable solutions. In this case, finding common ground makes resolution more possible.

Sometimes the resolution is not the best solution, but it's something everyone can agree upon. If resistance from participants persists, a neutral party may be necessary to mediate.

## A few tips related to the four pillars of collegiality

1. **Show praise** - Dr. Kaufmann discusses this in his *Communicate Effectively* article on civility. He illustrates that physicians are often reluctant to compliment others as we expect them to perform to the best of their ability. However, a well-deserved compliment is a sign of support and too often we only hear of the things we do wrong in medicine. These small acts build trust and strengthen relationships (Section 4, exercise 1: The marble jar).
2. **Try the *Intentional Awkward Pause (IAP)*** - In her video, [How to be More Powerful, Charismatic and Persuasive in 3 Seconds](#), Marie Forleo accurately states that being a good listener is an under-rated secret to success and one of the best gifts you can give anyone. Admittedly, we are often listening with the intent of replying or worse yet, doing something else at the same time, like checking texts or e-mails. Marie's tip in this video is the IAP: Take three seconds - an Intentional Awkward Pause - after listening to someone before jumping in with your thoughts and opinions. This will show the other person that you are interested in their agenda and not just your own.

3. **Mindful listening** – Like empathetic listening, mindful listening is truly listening to another person, as opposed to just hearing them. Try applying this to a conversation with a colleague where you are truly present and attentive. If your mind wanders to what you have to do that day, or the counter-argument you want to make, become aware of your thoughts and bring your attention back to listening. You may find that the other person is less defensive and more open.
4. **Self-awareness strategies** - Excellent ways to enhance your self-awareness can come through journaling, reflective writing, mindfulness practices and meditation. These are also very effective stress-relieving techniques.

# SECTION 3:

## THE WELL-BEING OF THE RELATIONSHIP WITH YOURSELF

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“If I really want to improve my situation, I can work on the one thing over which I have control - myself.”

~ Stephen R. Covey, *The 7 Habits of Highly Effective People*

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### What is wellness?

The term “wellness” is used commonly, with a variety of meanings. In fact, it’s difficult to find a universally accepted definition of wellness. From my perspective as a physician, wellness refers to your personal state of well-being, where all components of your wellness are optimized. Many schematics exist that demonstrate the dimensions of wellness; however, it is difficult to use distinct categories to define a concept that blends into one.

What makes wellness different from health is that we have more control over our wellness than we do over our health. For instance, despite an adverse health state such as cancer, we can still strive to enhance our well-being through strategies to improve our nutritional, physical, emotional and social wellness.

### Physician wellness

What makes physician wellness unique? For one, as caring, healing professionals, we often overlook our own wellness needs. In the article *Physician Well Being and Quality of Patient Care: An Exploratory Study of the Missing Link*, Wallace & Lemaire identify two broad themes that deter physicians from caring for themselves:

1. **The culture of medicine** - physicians view themselves as invincible caregivers who must look after others first; they cannot be vulnerable and take time for themselves.
2. **Overwhelming workload** - prevents physicians from thinking about their own wellness.

They cite a study that found that the majority of physicians worked when they were sick and the few who took time off felt guilty. Another study cited found that physicians feel compelled to appear well because they believe their health is viewed as a reflection of their medical competence. The study concluded that physicians, peers, patients, employers and the health care system need to support physicians to maintain their own well-being.



## Physician wellness: the layers of skin

Another way to view physician wellness is by using the three layers of the skin as an analogy:

### 1. **Epidermis:** *What physicians allow us to see*

The culture of medicine promotes the image of physicians as all-knowing healers who possess exemplary diagnostic skills and are incapable of making mistakes. These ideals lead to physicians striving to uphold this image in one of the oldest, most noble professions. Concern arises when this layer does not connect to the deeper layers of the physician, represented by the dermis and hypodermis.

### 2. **Dermis:** *Factors contributing to a physician's well-being*

We are all humans, born to humans, with our own unique needs and desires beyond those that serve as basic functions. This layer represents the factors that contribute to physician wellness: emotional (mood, anxiety), social (relationships), physical (health, activity), nutritional (diet) along with other factors such as sleep, self-esteem, spirituality, hobbies, creativity, finances and family of origin.

### 3. **Hypodermis:** *What is vital to sustaining physician health*

The top two layers cannot be sustained without the deepest layer, which is essential to a life of meaning and purpose. These vital aspects include attributes and practices such as resilience, self-awareness, gratitude, compassion, empathy and mindfulness. This layer can be continually developed in order to protect the other two layers, thereby buffering stressors and enhancing physician wellness.

## Physician burnout

"Burnout is a syndrome of emotional exhaustion, loss of meaning in work, feelings of ineffectiveness, and a tendency to view people as objects rather than human beings." ~ Shanafelt et al. - *Mayo Clinic Proc* (2015)

Continuing with the skin analogy, at times accumulating stressors make it difficult for the deeper layers of a physician's skin to uphold the superficial layer, leading to symptoms of burnout. Unfortunately, burnout symptoms affect up to a staggering 75% of physicians. In a study by Shanafelt et al., they cite that burnout is more common among physicians than among other United States workers, with front line physicians (Family Medicine, Internal Medicine and Emergency Medicine) being at the highest risk.

In fact, job burnout/chronic work stress is a universal theme that does not limit itself to socioeconomic status, gender, age or place of work. Although its impact can vary from person-to-person, it tends to result in significant physical and emotional stress on both the individual suffering from job burnout and the people closest to them.

*Your Job Might be Killing You:* This bold title from an online article in Fortune sums up the urgency of this topic. The article highlights research (published in Psychomatic Medicine) conducted at both the business and medical schools of Tel Aviv University linking job burnout and heart disease. Their findings about job burnout were undeniable, stating that it is “a stronger predictor of coronary heart disease than many other known risk factors, including blood lipid levels, physical activity, and smoking.” Other health concerns that arise with chronic work stress include headaches, mood disturbances, musculoskeletal disorders, gastrointestinal symptoms, workplace injuries, etc.

Some of the reasons for increased symptoms of burnout in physicians include:

- The complexity of medicine
- Lack of control
- Doctors often use denial and avoidance as ineffective coping styles
- Physicians work in emotionally charged situations associated with suffering, fear and death
- Excessive cognitive demands

## **Do I have symptoms of burnout?**

You may be interested in assessing your level of work stress and potential warning signs of burnout. The above-mentioned Tel Aviv University study posed these five questions (slightly modified for our purposes), asking participants to answer with *never, sometimes, often, or always*:

1. How often are you tired and lacking energy to go to work in the morning?
2. How often do you feel physically drained, as if your batteries were dead?
3. How often is your thinking process sluggish or your concentration impaired?
4. How often do you struggle to think over complex problems at work?
5. How often do you feel emotionally detached from colleagues or patients and unable to respond to their needs?

If you responded to two or more questions with “often” or “always,” you may want to consider it a warning sign and take action to reduce the impact of stress and ultimately burnout related to your career as a physician.

## **Creating a culture of self-care for physicians**

In an informative study by Wallace and Lemaire (2009), the authors explored physician’s awareness of the relationship between their well-being and patient care. Interestingly, their review of the literature highlighted some points about physician’s self-care:

- Physicians are less likely to seek medical care for themselves and have a higher than average suicide rate.
- Physicians often use denial as an ineffective coping strategy.
- Physicians often do not turn to their colleagues for support.
- Physicians may be reluctant to seek help for fear it may be an indication of their inability to do their job.

In this study, Wallace and Lemaire interviewed physicians in order to answer two questions: 1) Were their colleagues aware of the link between their well-being and patient care? and 2) Why they believed most of their colleagues were not aware of the relationship between personal well-being and patient care. They determined that almost half of the interviewees felt that physicians were not aware of the link and a third believed that physicians are unable to “actualize their knowledge of the link.”

Wallace and Lemaire concluded that one of the main reasons for these results stems from the culture of medicine, where physicians are regarded as “super humans” and they must look after others before themselves. The other reason involves the excessive workload that contributes to their perception that they do not have time for self-care.

## **What can be done to enhance physicians’ perception of self-care?**

Awareness is one thing, but we need to implement strategies and tools to provide results. We often see this in medicine, especially when it comes to health promotion. Advising a patient that they need to quit smoking, exercise more and eat a healthy diet is almost redundant. Employing coaching techniques where you develop both a plan and goals with the patient will prove to be more successful. In turn, providing physicians with tools and ways to improve their well-being on a day-to-day basis will provide more actionable goals.

Some effective strategies include:

- Introduce the importance of physician wellness in medical school and residency as part of the curriculum. Fortunately, medical schools, such as the University of Calgary, are implementing well-physician courses and resident wellness has become an important factor in residency programs.
- Organize retreats for students and residents where they can connect with one another in a relaxing environment, introducing stress management and personal development topics. Some programs have been instrumental in providing this for their residents. An annual event, AMSCAR (Alberta Medical Students’ Conference and Retreat) is an excellent initiative whereby the importance of wellness strategies and self-care are introduced at the medical school level.
- Introduce non-medically focused opportunities for physicians to connect during their career, such as conferences. Suggestions include: “lunch and learn” sessions on mindfulness, meditation and gratitude; implement physician wellness programs and retreats at various levels.
- Provide online tools, workbooks and resources for physicians that offer realistic ways to modify their work-life balance. Face-to-face activities are great but logistically not always feasible for physicians, especially in more rural communities.
- Include physician’s families in activities and events involving self-care and well-being.
- Provide an area within a group practice, hospital or community health centre where yoga/fitness/ meditation classes can be held at lunch. This one strategy, well-placed, could enhance so many facets of the work environment and help build a supportive culture.

## Four pillars of physician wellness

1. **Resilience:** Resilience has become a very important term in the discussion of physician health and burnout prevention. Given that resilience is the ability to adapt in the face of difficult experiences, it seems intuitive that this is a beneficial trait. According to the American Psychological Association, it is a learned ability that can be molded through both our behaviours and thoughts.

Think of some of the difficult situations you have been faced with in your life. How did you cope at the time and how did the experience help you handle future struggles? In a study by Jensen et al. exploring the dimensions of physician resilience, they posed four questions to participants:

1. Suppose a young person is considering medicine as a career and asks for your advice. What would you say?
2. If a resident asks you about physician resilience - how to avoid stress and burnout - what kind of advice would you offer?
3. Making clinical errors is often a source of stress. How do you deal with this?
4. Keeping up in medicine can be a difficult task. How do you manage this?

From their interviews, Jensen et al. identified the four key ingredients in building resilience:

- A) **Attitudes & perspectives** - valuing the physician role, developing self-awareness and recognizing personal limitations
  - B) **Balance & prioritization** - setting boundaries, professional development and self-care
  - C) **Practice management style** - business management skills, quality of staff
  - D) **Supportive relations** - positive personal and professional relationships and communication skills
2. **Mindfulness:** According to John Kabat-Zinn, the creator of the *Mindfulness-Based Stress Reduction (MBSR) program*, mindfulness is, "Paying attention to something, in a particular way, on purpose, in the present moment, non-judgmentally." Mindfulness and meditation are widely acknowledged as powerful stress-relieving tools. The practice of meditation is an effective way to become more mindful; to pay attention to the present.

*What are the benefits of mindfulness?*

The benefits are well-documented and extensive. Below are just a few from the Greater Good Science Center, University of California, Berkeley:

- Boosts our immune system
- Improves mental health - increases positive emotions while reducing negative emotions such as anxiety and stress
- Changes our brains - research indicates mindfulness increases density of gray matter in brain regions linked to learning, memory, emotion regulation and empathy

- Improves relationships by making couples more satisfied and accepting of each other
- Helps health care professionals cope with stress and connect with their patients

*How do we incorporate mindfulness into our lives?*

As mentioned, meditation is one way to cultivate a more mindful way of living. As outlined in the Apple app *10% Happier: Meditation for Skeptics*, there are three basic steps to starting and practicing meditation:

1. Sit comfortably - can be on a chair, on the floor or on a meditation pillow
2. Focus on your breath - counting may be helpful
3. When you get lost, start over - your mind will wander, just gently bring it back to the moment and your breathing

Some people like quiet, calming music and others prefer guided meditations. Even starting with five minutes a day can make a difference.

Through meditation, we can essentially train our minds to live more in the present during everyday activities such as eating, walking and driving. How often are we not even aware of basic activities that we're doing out of habit? The term "practice" - when referring to mindfulness and meditation - refers to the fact that we have to practice them, as living in the present moment does not come naturally to us. Instead, we are programmed to always be planning and thinking ahead.

Mark Williams and Danny Penman explain this aptly in their book *Mindfulness: An Eight-Week Plan for Finding Peace in a Frantic World*:

"We re-live past events and re-feel their pain, and we pre-live future disasters and so pre-feel their impact. Meditation trains the mind so that you consciously "see" your own thoughts as they occur, so that you can live your life as it unfolds in the present moment. This does not mean you are imprisoned in the present. You can still remember the past and plan for the future, but being in (mindful) mode allows you to see them for what they are. Consciously knowing you are remembering, and knowing that you are planning, helps free you from slave to mental time travel. You are able to avoid the extra pain that comes through re-living the past and pre-living the future."

3. **Gratitude:** Practicing gratitude really can enhance your life and is a direct route to happiness. The research behind gratitude and how it helps lower stress is compelling. If you take time to reflect on what you have in life, it can help you keep things in perspective when stress mounts or an incident occurs. Learning ways to manage our stress is definitively linked to being happier. When you stop to consider it, a lot of what we do in life, or dream of doing, is propelled by our desire to feel happy. Feelings of happiness in turn lower our feelings of stress.

As Dr. Seligman says in his book *Flourish*, "When we feel gratitude, we benefit from the pleasant memory of a positive event in our life."

Other benefits of expressing gratitude include the following:

1. Improved health
2. Enhanced resilience
3. Stronger bonds between others and self

*How to practice gratitude:*

We often hear the term “an attitude of gratitude” but in fact the greatest rewards are found in practicing gratitude. You can practice gratitude in many different ways, such as:

A) **Keep a journal** - Whether it's writing in a traditional journal or notebook or keeping an electronic record on your phone or computer, the key is to do what works best for you. Maybe that means once a week writing three things you were thankful for that week, or maybe it means writing one entry each day.

Robert Emmons, an expert on the science of gratitude, offers tips for journaling, including being specific, focusing on people, not material goods and journaling less frequently (once or twice a week) as opposed to daily.

B) **Be reminded** - Write a post-it note and stick it on your mirror. In the morning, when you see “What am I grateful for?” on your bathroom mirror it may trigger some positive thoughts and emotions.

C) **Gratitude letter & visit** - In his book *Flourish*, Dr. Seligman describes the “gratitude visit” as a way to express gratitude in a thoughtful, purposeful way. In this exercise, think of someone you'd like to thank, who has changed your life in a positive way. Write a letter about how this person has affected your life and then try to meet with the person to read the letter to him/her. Just imagine the bond that would be strengthened through this exercise.

4. **Creativity:** Creativity is an expression of ideas, unique to us, that can unleash passion and generate happiness. In turn, artistic energy lowers stress. What is even more wonderful is that we all have the ability to be creative. How many times have you heard someone (even yourself) say “I'm not very creative.” Not true: You may have simply not yet discovered that outlet that releases creative joy and connects with something deeper within yourself.

Medical schools are now incorporating the humanities into medicine in a variety of ways, including through the curriculum, professional development, presentations and special interest groups.

*Where do you find your creative interests?*

1. Do you enjoy writing? Try: writing in a journal; taking an online creative writing course; start a blog; enter a writing contest.
2. Do you enjoy visual arts? Try: picking up some art supplies or join a local class in painting, drawing, sculpting/pottery, crocheting, sewing, photography or scrapbooking; pick a room in your house and re-decorate with a vision in mind.
3. Do you enjoy the performing arts? Try: music or dance lessons (never too late); combine dance and exercise with something like Zumba; start your own YouTube channel (check out Doc Mike Evans Healthlab).
4. Do you enjoy cooking? Try: new recipes; cooking classes; creating a food blog; cooking is also a great way to bring the family unit together through preparation and sharing the meal.

## **A few tips related to the four pillars of physician wellness**

1. *Consider life a journey of learning and discovering* - Be open to new ways to approach life and remain curious.
2. *Practice self-compassion* - Compassion is a fundamental necessity for practicing medicine but practicing self-compassion is an essential tool to fight our strong tendencies to stand in (often negative) judgment of ourselves. Kristin Neff is a leader in the field of self-compassion, and as she says: "Instead of mercilessly judging and criticizing yourself for various inadequacies or shortcomings, self-compassion means you are kind and understanding when confronted with personal failings - after all, who ever said you were supposed to be perfect?"
3. *Remain physically active* - Exercising/moving your body a boost to both your physical and mental health. It is well known that exercise can help you manage stress. Certain forms of exercise, such as yoga, are particularly beneficial for creating feelings of calmness, mindfulness and empowerment. According to Alex Korb, a neuroscientist, "Yoga is simply the process of paying attention to the present moment and calming the mind. Over time you will start to retrain your automatic stress reaction, and replace it with one more conducive to happiness and overall well-being." Engaging in yoga before, during and after challenging events in life can help you get to the other side.
4. *Enjoy laughter and smile often* - This will enhance positive emotions and a sense of optimism.
5. *Believe in a sense of purpose and meaning in your life* - Consider Rick Warren's Ted Talk, [\*A Life of Purpose\*](#), and his question: "What is in your hand?" referring to identity, income and influence. In other words "What are you going to do with what you have been given?"

In closing, enjoy this poem and message, *If I Had My Life To Live Over Again*, by 85-year-old Nadine Stair:

If I had my life to live over again,  
I'd dare to make more mistakes next time.  
I'd relax.  
I'd limber up.  
I'd be sillier than I've been this trip.  
I would take fewer things seriously.  
I would take more chances,  
I would eat more ice cream and less beans.

I would, perhaps, have more actual troubles but fewer imaginary ones.  
you see, I'm one of those people who was sensible and sane,  
hour after hour,  
day after day.

Oh, I've had my moments.  
If I had to do it over again,  
I'd have more of them.  
In fact, I'd try to have nothing else- just moments,  
one after another, instead of living so many years ahead of each day.

I've been one of those persons who never goes anywhere without a thermometer,  
a hot-water bottle, a raincoat, and a parachute.  
If I could do it again, I would travel lighter than I have.

If I had to live my life over,  
I would start barefoot earlier in the spring  
and stay that way later in the fall.  
I would go to more dances,  
I would ride more merry-go-rounds,  
I would pick more daisies.



# SECTION 4:

## EXERCISES TO BRING IT ALL TOGETHER

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*NOTE: In order to print and complete these exercises, the e-book file must be downloaded.*

### **Exercise #1: The marble jar**

In Brené Brown's online course, *The Anatomy of Trust*, she describes an event in her own life where she was able to illustrate the meaning and importance of trust. When her daughter Ellen was in third grade she came home one day devastated by events that unfolded after she told a friend something private. Everyone in the class soon found out and was teasing her. Despite feeling she would never trust anyone again, Brené compared friends you can trust to the marble jar Ellen's teacher used for the students to earn a class party. Marbles could be put in or taken out of the jar depending on class behavior. Brené told Ellen that the people we share our stories with are "marble jar friends."

As it turns out, marbles are earned through small acts, not grand gestures. For instance, sharing praise and warmth through compliments or asking someone for help, may be ways to earn marbles in someone else's marble jar.

In her course, Brené talks about Dr. Gottman's "sliding door moments." Dr. Gottman gives an example of a sliding door moment from his own life. One night, while reading a mystery novel and nearing the suspenseful end and the identification of the killer, he set the book down for a few moments. Anxious to return, he walked past the bathroom and in the mirror noticed the reflection of his wife brushing her hair, with a sad look on her face.

As tempting as it was to pretend he didn't notice the expression on his wife's face, so he could get back to his book, Dr. Gottman approached his wife and asked her why she looked so sad. This was a sliding door moment, when, out of care and concern for his wife, he aside his personal desires. As you can imagine, that moment built trust and became a marble in his wife's marble jar. Connection build trust, just as the alternative scenario of walking away erodes trust.

### **The marble jar exercise**

Most of us likely have a select few people in our lives who we regard as marble jar people, who consistently earn marbles through their small acts of compassion and empathy. Consider the following two questions which have been adapted from the "Marble Jar Exercise" in Brené's *Anatomy of Trust* course:

- 1) Who do you consider marble jar friends/family in your life?
- 2) How do these people earn marbles in your life?

## Exercise #2: Compounding your marriage

In his January 18, 2016 blog, physician blogger Dr. Jonathan Ramachenderan discusses the [power of compounding](#) to improve your marriage.

He starts by saying: Your first step should be to examine your relationship and ask: “What one or two actions do we engage in everyday that demonstrate(s) our love and respect for each other?”

This is the concept of the little things that add up to mean a lot to your partner. For instance, those (six-second) kisses when leaving in the morning and returning home at night. Staying connected via a text or phone call throughout the day. Sharing a glass of wine together at the end of the day. Jonathan provides a great example of having a phrase you and your partner share that has a memory associated with it and a special meaning that brings you closer each time you say it.

These compounding acts and words are unique to every couple and can potentially strengthen the foundation of your relationship. These simple acts carry great weight.

## Exercise #3: Conflict management

Bob and Karen are residents in their fourth year of a surgical residency program. They were close friends during their first and second years, but had a falling out over a call issue in their third year and grew apart. Both parties felt hurt and betrayed and their animosity seems to be escalating and ultimately impacting the rest of the surgical program.

They try to avoid each other during their rotations but invariably have times where being in the same room is unavoidable. Their initial argument was never resolved and although it was relatively minor, it has become the source of a ripple effect of tension among the other residents.

Recently, a conflict erupted between them over a case during rounds, resulting in a heated, uncomfortable argument in front of the group.

How do you think Bob and Karen can resolve their conflict? Do you think someone should intervene?

### Reply

Bob and Karen’s original conflict arose from a work issue but over time, became very personal. Neither person was able to recognize their contribution to the festering conflict. They are both feeling that this conflict is creating more stress in their lives. Unfortunately, they are not fully aware of the stress it is creating in the resident program as a whole.

After attending a professional development session on conflict resolution, Bob and Karen decided it was time to work collaboratively to overcome their differences. They agreed on a neutral place with the goal of understanding the other person’s point of view. This required empathic, mindful listening, with each afforded the opportunity to convey what is important to them. This required self-awareness to look beyond the triggering incident to the underlying issue. They brainstormed ideas and formed a plan as to how to prevent this from happening again.

Resolving their conflict not only benefitted Bob and Karen, but the improved collegiality spread to the rest of the residents and staff. With the conflict resolved, Bob and Karen appreciate that enhancing professional relationships helps them manage their stress.

### Exercise #4: Physician groups

(e.g. Balint groups, journal groups, women-in-medicine groups – see *Section 2: The well-being of the relationships with your colleagues – Physician Groups* – for more information)

Following is a list of the potential benefits of belonging to a physician group. Please check (✓) all that apply to you.

- |  |  |
|--|--|
| <input type="checkbox"/> Improved emotional wellness | <input type="checkbox"/> Suicide prevention strategy |
| <input type="checkbox"/> Improved social wellness    | <input type="checkbox"/> Improved empathy            |
| <input type="checkbox"/> Enhanced creativity         | <input type="checkbox"/> Increased self-awareness    |
| <input type="checkbox"/> Burnout prevention          | <input type="checkbox"/> Increased self-compassion   |
| <input type="checkbox"/> Stress reduction            | <input type="checkbox"/> Improved resilience         |

Can you think of any other benefits of belonging to a physician group?

Do you have any suggestions for other type(s) of physician groups that may interest you (e.g. physician writers, physician readers)? Do you see value in starting a physician group?

## Exercise #5: Gratitude exercise

What are you grateful for? Pick one thing and be specific with five details as to why (e.g. I'm grateful for the life lessons I learned from my parents):

a) e.g. Friends aren't just for kids; be open to new people and new friendships through all your life.

b) \_\_\_\_\_

c) \_\_\_\_\_

d) \_\_\_\_\_

e) \_\_\_\_\_

Does writing this list fill you with positive emotions? How would you describe how you feel (i.e. calm, happy, optimistic, blessed)?

## Exercise #6: Mindfulness exercise

We often go about our day being driven by tasks and goals. How often are you acutely aware of the present moment? Over the next few days try to be mindful of a basic daily activity, such as eating.

Try eating something while bringing your full awareness to the experience; what the food looks like, what it smells like, what it feels like to touch, how it tastes and how you feel eating it. Did any thoughts or emotions arise?

Try to apply this mindfulness to your eating on a regular basis. Do you think you will notice any changes in your level of enjoyment during eating?

Next, try applying mindfulness to another activity, such as walking. Allow yourself a 30-minute walk without thinking about what you have to accomplish after.

How do you feel during and/or after a mindful walk?

\_\_\_\_\_

How do you try to live more mindfully?

\_\_\_\_\_

## Exercise #7: Creative experience

Think of a clinical experience that has had a profound effect on you - it may be positive or negative. Can you think of a way to express this creatively?

1. Consider the way you would like to express this experience. For instance, creative writing (short story, reflective essay, play, prose/poetry), painting, drawing, sculpture, etc.
2. What supplies do you need to complete your creative experience?

- 
3. Once you have completed your creative experience, how would you like to display it? Would you like it in your office? Would you consider submitting it to a contest or art exhibit for physicians?

## Exercise #8: Coping with stress

Have you ever thought of how you cope with stress? Try listing eight specific practices that have worked for you. (i.e. taking a warm bath, getting a massage, going for a walk, baking, etc.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_

How can you incorporate these practices more into your weekly/daily schedule?

Consider the following list of stress busters adapted from the Benson-Henry Institute for Mind Body Medicine at Massachusetts General Hospital. Indicate if you already do the activity (✓), want to do it (♥) or have tried it and it doesn't work for you (X). The last two spots are for you to add stress busters that aren't on the list but that have worked for you in the past.

- |  |  |
|--|--|
| <input type="checkbox"/> eat breakfast everyday  | <input type="checkbox"/> read for fun; nothing related to medicine/your career |
| <input type="checkbox"/> meditate even a few minutes a day                                       | <input type="checkbox"/> sleep seven-to-nine hours a night                     |
| <input type="checkbox"/> say "no" when appropriate instead of "maybe" or "yes"                   | <input type="checkbox"/> explore new hobbies/ways to be creative               |
| <input type="checkbox"/> consider self-compassion and avoid self-criticism                       | <input type="checkbox"/> enjoy nature (e.g. a walk, hike, sport)               |
| <input type="checkbox"/> engage in regular physical activity                                     | <input type="checkbox"/> Spend time with people who lift you up                |
| <input type="checkbox"/> do something weekly, just for yourself (e.g. get a massage)             | <input type="checkbox"/> _____   |
| <input type="checkbox"/> practice kindness (i.e. do something without the intention of a reward) | <input type="checkbox"/> _____   |
|  | <input type="checkbox"/> _____   |

### Exercise #9: Building physician resilience

Consider the following questions posed to physicians in the study *Building Physician Resilience*. (Five years from now, this would be a good exercise to do again and compare your answers.)

1. Suppose a young person is considering medicine as a career and asks for your advice. What would you say?

2. If a resident asks you about physician resilience, i.e. how to avoid stress and burnout, what advice would you offer?

3. Making clinical errors is often a source of stress - how do you deal with this?

4. Staying current in medicine can be a difficult task - how do you manage this?

5. Do you ask for help when necessary?

Yes

No

Sometimes

If you answered "No," what prevents you from asking for help?

## Exercise #10: HELPS acronym

Consider this acronym - HELPS - and take time to reflect on your responses.

**H - Hopelessness** - Do you feel a sense of hopelessness, as though you have lost your purpose and passion in medicine?

**E - Exhaustion** - Do you continually feel exhausted, as though you cannot recharge your batteries despite periods of rest?

**L - Lack of accomplishment** - Do you feel a lack of accomplishment, as though you can never get ahead of your workload?

**P - Pessimism** - Do you feel pessimistic, as though you are increasingly cynical about work and life in general?

**S - Social isolation** - Do you feel like you are pulling away socially, as though you are detaching from yourself and people around you?

When in doubt, it **HELPS** to talk with other people who understand what you are feeling and going through.

# SECTION 5:

## RESOURCES

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### Apps

1. Meditation - Headspace  
(<https://www.headspace.com>)
2. Meditation - 10% Happier  
(<http://www.10percenthappier.com/mindfulness-meditation-the-basics>)
3. Mindfulness - The Mindfulness App  
(<http://www.mindapps.se/?lang=en>)
4. Meditation & mindfulness - Stop, Breath & Think  
(<http://www.stopbreathethink.org/?>)
5. Gratitude - Gratitude Journal  
(<https://itunes.apple.com/us/app/gratitude-journal-original/id299604556?mt=8>)
6. Goal setting - Vision Board Pro  
(<https://itunes.apple.com/ca/app/vision-board-pro/id463248118?mt=8>)

### Associations

Canadian Medical Association - Physician Health & Wellness  
(<https://www.cma.ca/En/Pages/physician-health-wellness.aspx>)

Physician & Family Support Program of the Alberta Medical Association  
(Confidential 24 hours a day/7 days a week/365 days a year: 1-877-767-46370)  
(<https://www.albertadoctors.org/services/pfsp>)

Provincial Physician Health Programs  
(<https://www.cma.ca/En/Pages/provincial-physician-health-programs.aspx>)



## Websites

AMA Alliance - Physician Family Magazine

(<http://www.physicianfamilymedia.org>)

Benson-Henry Institute for Mind-Body Medicine at Massachusetts General Hospital Online Course - Stress and the Relaxation Response: The Fundamentals of Mind Body Medicine

(<http://www.bensonhenryinstitute.org>)

Centers for Disease Control and Prevention - Stress...At Work

(<http://www.cdc.gov/niosh/docs/99-101/>)

ePhysicianHealth.com

(<http://ephysicianhealth.com>)

Health Canada & Public Health Agency of Canada - It's Your Health

(<http://www.hc-sc.gc.ca/hl-vs/iyh-vsv/index-eng.php>)

Healthy Eating Plate & Pyramid - Department of Nutrition at Harvard School of Public Health

(<http://www.hsph.harvard.edu/nutritionsource/healthy-eating-plate>)

Institute of Lifestyle Medicine - Tools for Promoting Healthy Change

(<http://www.instituteoflifestylemedicine.org/education-2/>)

Mayo Clinic - Stress Management

(<http://www.mayoclinic.org/healthy-living/stress-management/in-depth/exercise-and-stress/art-20044469>)

Public Health Agency of Canada - Tips to Get Active

(<http://www.phac-aspc.gc.ca/hp-ps/hl-mvs/pa-ap/04paap-eng.php>)

Stanford School of Medicine WellMD

(<http://wellmd.stanford.edu>)

The Canadian Society for Exercise Physiology - Physical Activity Guidelines

(<http://www.csep.ca/english/view.asp?x=804>)

Zen Habits by Leo Babauta - How to Meditate Daily

(<http://zenhabits.net/meditate/>)

# SECTION 6:

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