

SOLUTION: Resilient Provider

RESILIENCE IN CHALLENGING TIMES

Resilience is defined as the capacity to recover quickly from difficulties. It's grit and toughness and is the antithesis of burnout. Resilience is dynamic and evolving because our world, our situations, our energy, our focus is always changing. Resilience can protect you, and it can be learned.

The American Psychological Association describes the qualities of resilience as having:

- Healthy coping and problem-solving skills
- Self-knowledge
- Motivation/personal meaning
- Optimism
- Strong relationships

Stanford University has done extensive research on physician resilience. They describe resilience as one of the most important qualities that a physician can have. They go on to remind us that **resilience can be learned**. Resilient people do experience stress but are adaptable and positive in response to change and adversity. And maybe most importantly, **resilient physicians are able to retain their sense of purpose**.

Spend some time in mindful reflection:

- What is your current state of resilience?
- What is getting in your way of being resilient?
- How could you renew your commitment to medicine?



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“So, here's my take on physician wellness. Resilience: it's a more achievable goal because it integrates all of our life and it's a more enduring result. We develop springboards. We develop ways of responding that call on all that we are, and all that we know, to respond creatively and constructively and at the same time protect ourselves so that we can enjoy the meaning of what we're doing and the meaning of our contribution.”

**--Carole Lampert, Vice President for Practice Optimization
Cooperative of American Physicians**

Being Resilient is not just “Sucking it up”

Think of an interaction with a patient in which you had to deliver bad news. The common theme: a terrible thing has happened. How do you typically respond?

Being Resilient	“Sucking it up”
<ul style="list-style-type: none"> ● I grieve for this patient ● I know this will hurt me. I ‘ve got to pay attention to that, take care of myself too ● What is within my control that I can do to help my patient and family? ● What did I learn/might I have done differently? ● I move on 	<ul style="list-style-type: none"> ● I can't let anyone see how much this hurt me ● I can't look emotional – that's weak ● I have to learn to let these things roll off my back and not get personally invested ● I'm just going to stop thinking about it ● I move on

Both paths start with a terrible thing, and end with moving on, because ultimately, we DO move on. However, how we feel at the end of each path is vastly different. Resilient reactions are reflective, honest, and healthy. Healthcare is difficult! We WILL react to these difficulties. We have to acknowledge that when we choose to “suck it up” we bury a part of ourselves that needs to be uncovered.

Barriers to Resilience

- Uncertainty
 - Unable to Make Plans



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- Energy
 - Fatigue, difficulty sleeping and getting exercise

- Emotions
 - Anger, Fear, Hopelessness
 - Disconnection from purpose

- Actions
 - Indifference
 - “Sucking it up”
 - Incivility



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Each of our actions, as barriers to resilience, are choices.

- Indifference is a defense mechanism. It allows us to tell ourselves “If I don’t care, it can’t hurt”. The problem is, you DO care. You were designed at birth to be a healer. If you no longer care, you can no longer connect to your design. Dr. Donald Berwick reminds us “we are guests in our patients’ lives.” As such, indifference is not a sustainable option in the practice of medicine.
- “Sucking it up” might feel strong and brave. In truth, it is a way to retreat into avoidance of the difficult work of emotional truth and necessary recovery. It feels protective at first, but it is harmful in the long term because eventually we do need to face those feelings. “Sucking it up” is temporary.
- Incivility is a virus. It is highly contagious and much higher in prevalence during times of rapid change. It can be a response to weakened resilience, and it is ALWAYS harmful to yourself and others.

When Indifference, “Sucking it up” or Incivility Happens: Do the Right Thing

- Notice it – recognize behavior in yourself and others. These might be behaviors that you have noticed and tolerated for years.
- Say something privately to the person who is being indifferent or uncivil. Calling it out in public might also be uncivil! If you yourself are being indifferent or uncivil, take a quick time out, reflect and remember you made a choice and you own the outcome. Acknowledge this action is not helpful or healthy and won’t improve your resilience. It’s OK to apologize. Humbling, yes, but healing.
- Elevate it if necessary (physician or administrative leader)

You have the power to be more resilient by removing barriers.

Remove the Barriers to Resilience

Barrier	Solution
Uncertainty	Make plans you CAN control Seek to clarify (don’t create your own story)
Fatigue	Exercise, rest, nutrition, hydration (yes, they help)
Emotions	Find a trusted partner to listen and support you, connect with others in many venues (professional and personal), be generous, choose to smile, practice gratitude (3 Good Things is a place to start)
Actions	Be inspired by a courageous or resilient patient or colleague (fights indifference)



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	Stop and report incivility Reconnect to your purpose
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Resilience – Get more of it!

**Reconnect to your “why” every single day before you step through the doors of your workplace.
In every interaction, think “what do I want to be today?” Then do the right thing.**



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