



How Are You, Really? Taking Care of Yourself, While Taking Care of Others

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Psychiatry Grand Rounds, Vanderbilt, April 2024

"One of the most human, most reassuring books I've ever read."
—MAGGIE SMITH, *New York Times* bestselling author
of *You Could Make This Place Beautiful*

HOW DO YOU FEEL?

ONE DOCTOR'S SEARCH FOR
HUMANITY IN MEDICINE

Jessi Gold, MD, MS

sures

g

ultant,

eauty



- Ineligibility
- FYI: Correlation
- Mental Health
- MTV E
- Mental Health

It's me

Hi

I'm the problem,
it's me



Anti-Hero
Taylor Swift
Apple Music

Disclosures

- My perspective is my own, and doesn't represent the university. It also represents that of my own identities (cis, white, female)
- I use humor (often through pop culture and silly cartoons) as a defense mechanism, but also to break up an otherwise hard topic
- This information can sometimes be triggering of your experience, whatever you are feeling is OK, Including rage at me for having this conversation and the way I choose to have it

1 University System | 5 Campuses, 2 Statewide Institutes

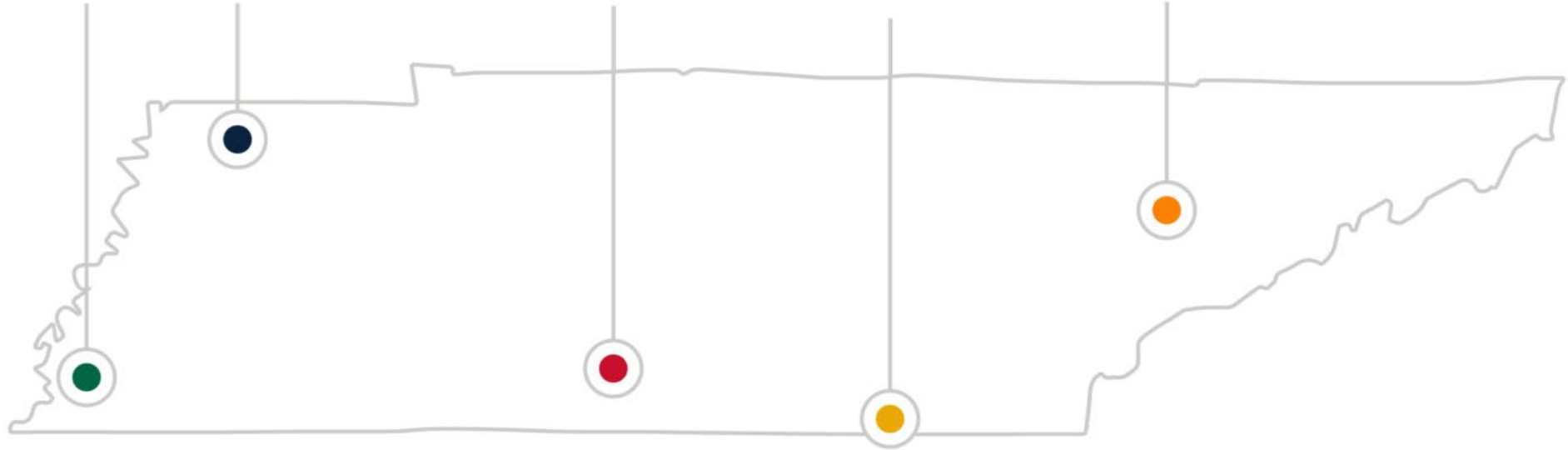
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TENNESSEE
HEALTH SCIENCE CENTER

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TENNESSEE
CHATTANOOGA

T
THE UNIVERSITY OF
TENNESSEE
KNOXVILLE



59K

STUDENTS STATEWIDE

13K+

DEGREES AWARDED / YEAR

445K+

ALUMNI WORLDWIDE

19K+

FULL TIME FACULTY &
STAFF

Objectives

- Define burnout in healthcare and the impact of COVID-19, particularly in psychiatry
- Describe the culture of healthcare and how it prevents help seeking for mental health needs
- Discuss strategies individuals and organizations can use to cope with burnout



“My mental health is fine as long as I don't think about anything”

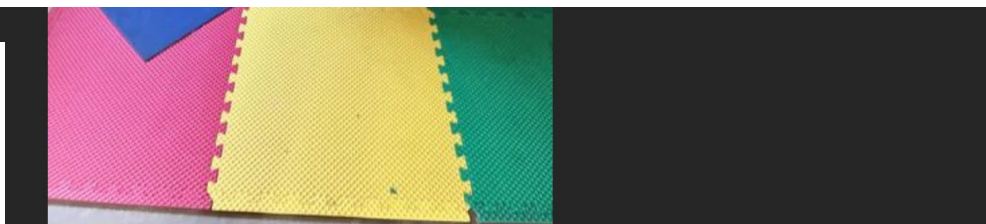
**How Are
You,
Really?**

When Dr. Jessi Gold would log off from seeing her patients during the pandemic, she would go straight to bed.

Gold, a psychiatrist and assistant professor of psychiatry at the medical school at Washington University, would crash for a few hours then struggle to sleep through the night. She stopped responding to friends' texts and messages. She would get angry when she received emails asking her to give a talk. She nearly forgot about a presentation she was scheduled to give.

All of this was so out of character for her. The emotional exhaustion she was experiencing from her work was at a different level.

"I didn't know I was burned out until my therapist told me," she said. "And I'm a burnout expert."



Your Body Knows You're Burned Out

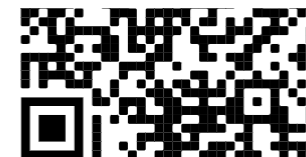
Here's how to recognize the physical symptoms of work-related stress — and what to do about them.

Dr. Jessi Gold, a psychiatrist at Washington University in St. Louis, knows she's edging toward burnout when she wakes up, feels instantly angry at her email inbox and doesn't want to get out of bed. It's perhaps not surprising that a mental health professional who is trying to stem the rising tide of burnout could burn out sometimes, too. After all, the phenomenon has practically become ubiquitous in our culture.

Alva Skog

By Melinda Wenner Moyer

Feb. 15, 2022



The “I Didn’t Know I Was Burned Out” Cycle

- Step 1: **Ignore** symptoms until they are interfering with functioning= “I can handle it on my own”
- All while telling patients they are **OBVIOUSLY** burned out and validate **THEIR** experiences

Burnout

- Definition: Emotional exhaustion (feeling “used up” at the end of a workday)
- AND Depersonalization (e.g. feeling like treating patients as objects/becoming more callous)
- AND A sense of reduced personal accomplishment (feeling ineffective & a lack of value in work)
- Often is a mismatch between **expectations** of work and **actual** experience
- Rates near or exceeding **50%** have been documented in trainees and practicing physicians
 - Compared to US working adults, physicians more likely burned out (Shanafelt et al, 2012)

Burnout in Psychiatry Pre-COVID-19

- N=2,084 psychiatrists
- 78% had positive screen for burnout
- 16% had a PHQ-9 score ≥ 10 , consistent with moderate to severe depression
- Higher burnout associated with depression, female gender, lack of control over schedule & practice in inpatient, community, and government settings
- Age inversely associated with burnout

Summers et al, 2020

The “I Didn’t Know I Was Burned Out” Cycle

- Step 1: Ignore Symptoms until they are interfering with functioning= “I can handle it on my own”
- Step 2: Try to blame it on medicine/work being hard

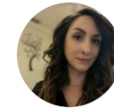
↻ Dr. Marina Harris, Ph.D. Retweeted



Dr. Amy, Psy.D.
@DrAmyPsyD

Being a therapist right now feels like handing sunscreen out to people who are on fire 🧡

↻ Dr. Marina Harris, Ph.D. Retweeted



TheCrankyTherapist
@JessSprengeLPC

I'm so tired. I'm tired of not being able to spend my time in sessions doing work clients want to do because every day there's a new collective tragedy and trauma to process.

I am so profoundly tired.

Logical Scapegoat: We Don't Even Know We Need Help

275 surgeons with a Well-Being Index score in the bottom 30% relative to national physician norms

- 71% believed that their well-being was at or above average

Cannot reliably calibrate distress relative to colleagues

Severe distress is normal, or experience limited by inner circle and their experiences

Shanafelt et al, 2014

Fact: It is NOT about “Resilience”

- Resilience > in physicians than the general working population
- Physician resilience inversely associated with burnout symptoms
 - Each 1-point increase in resilience associated with 36% lower odds of overall burnout
- Burnout common even among physicians with the highest possible resilience score

Table 2. Resilience of Employed Physicians and the General US Population Aged 29 to 65 Years^a

Query	No. (%)		P value
	Physicians (n = 3971)	Population (n = 5198)	
I am able to adapt when changes occur			
Not true at all	17 (0.4)	34 (0.7)	<.001
Rarely true	37 (0.9)	96 (1.9)	
Sometimes true	619 (15.8)	1058 (20.4)	
Often true	1935 (49.4)	2401 (46.3)	
Always true	1310 (33.4)	1599 (30.8)	
Score, mean (SD)	3.14 (0.80)	3.04 (0.74)	
I tend to bounce back after illness, injury, or other hardships			
Not true at all	16 (0.4)	32 (0.6)	<.001
Rarely true	41 (1.0)	81 (1.6)	
Sometimes true	410 (10.5)	736 (14.2)	
Often true	1534 (39.3)	2273 (43.9)	
Always true	1905 (48.8)	2061 (39.8)	
Score, mean (SD)	3.35 (0.7)	3.20 (0.8)	
Total score, mean (SD)	6.49 (1.30)	6.25 (1.37)	<.001

West et al, 2020

The “I Didn’t Know I Was Burned Out” Cycle

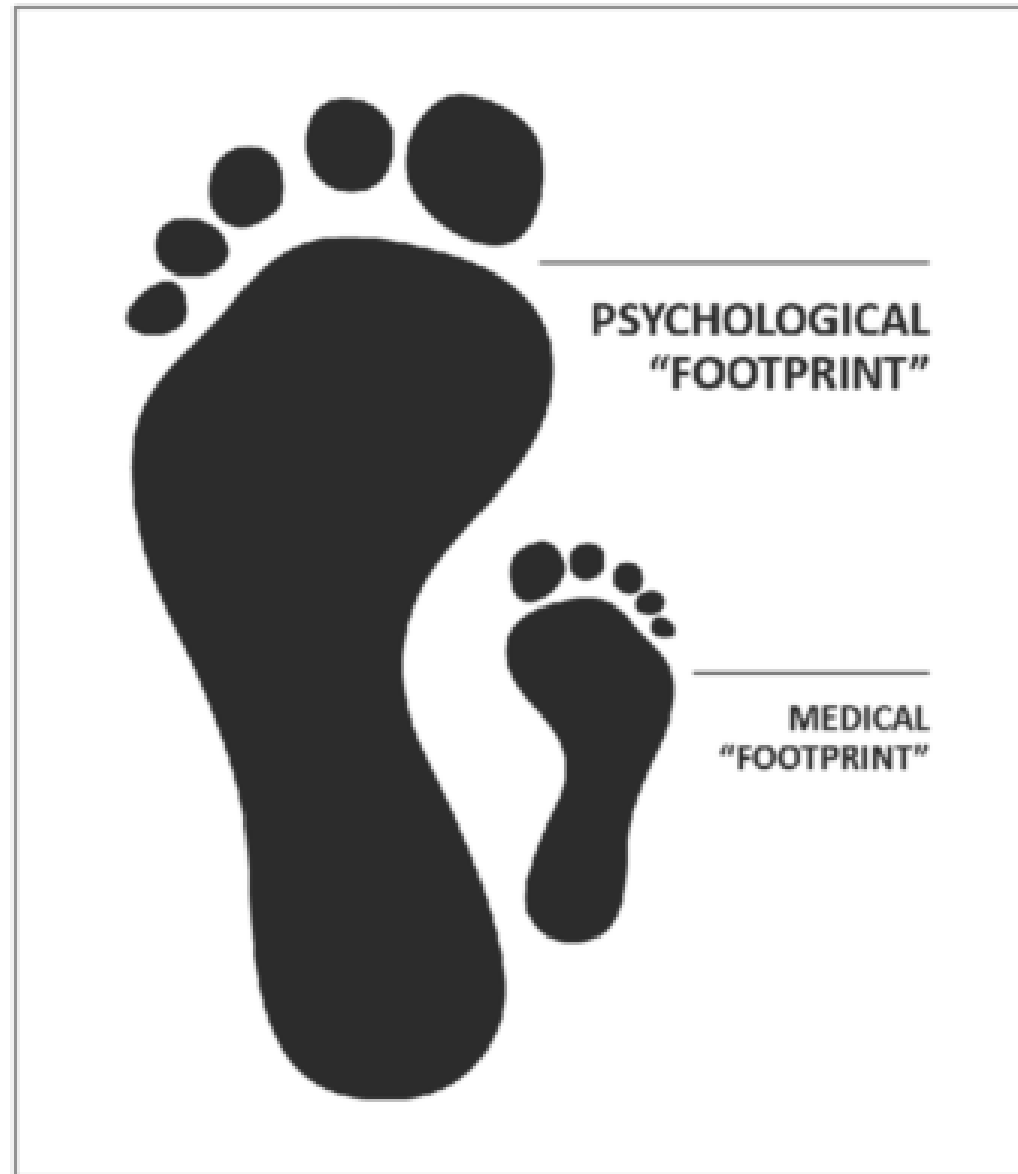
- Step 1: Ignore Symptoms until they are interfering with functioning= “I can handle it on my own”
- Step 2: Try to blame it on medicine/work being hard
- Step 3: Try to blame it on physical illness (B12 for me!)
- Step 4: Assume a day off or two will help=Quick Fix
- Step 5: Have someone else (my therapist!) say what is wrong with me
- Step 6: Attempt to Cope

Then, Repeat (Too many times to count)

How Did COVID-19 Change Things?

It's Compounding and Lasting

**In a disaster,
the size of the
psychological
“footprint”
greatly
exceeds the
size of the
medical
“footprint.”**



Shultz, J. M., Espinola, M., Rechkemmer, A., Cohen, M. A., & Espinel, Z. (2016). 21 Prevention of Disaster Impact and Outcome Cascades.

Health Workers Face Mental Health Crisis

CDC Quality of Worklife Survey focused on well-being and working conditions, comparing data from 2018 to 2022, shows decline in mental health.

Burnout

46%

Harassment

13%

Trust

78%

Turnover Intention

44%

of health workers reported feeling burned out often or very often compared to 32% in 2018

*This more than doubled,
up from 6% in 2018*

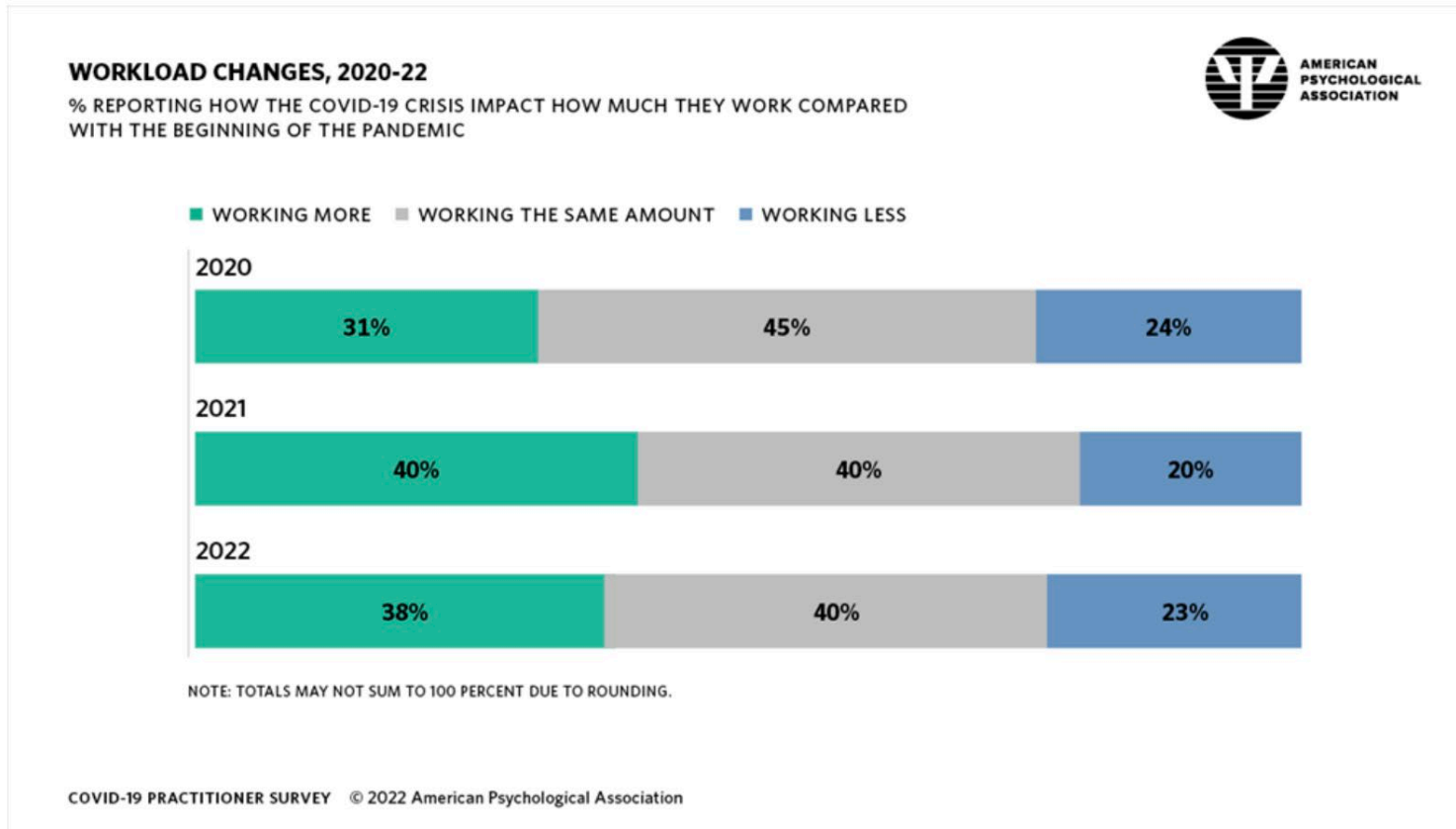
of health workers agreed or strongly agreed that they trusted management, compared to 84% in 2018

of healthcare workers intended to look for a new job, up from 33% in 2018.

<https://www.cdc.gov/vitalsigns/health-worker-mental-health/index.html#:~:text=The%20study%20showed%20how%20symptoms,compared%20to%2032%25%20in%202018.>



Impact of COVID-19: Workload And Workforce



More than half of psychologists (53%) reported working more than they did 12 months ago

Percent of psychologists seeing more patients than they did before the pandemic (15% in 2020, 38% 2021, 43% 2022)

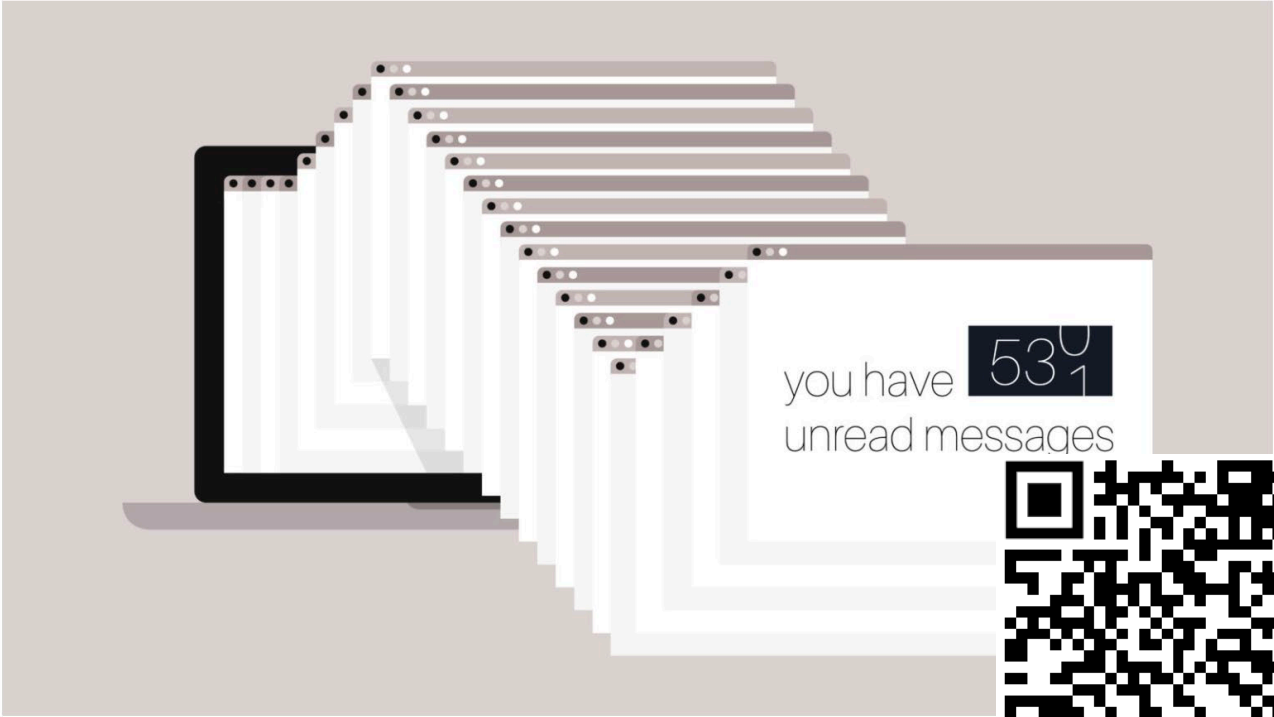
<https://www.apa.org/pubs/reports/practitioner/2022-covid-psychologist-workload>

- Messages increased from 765 pre-pandemic to 4481 post-pandemic (485.8%)
- Monthly message volume increased from 4661 pre to 44 929 post (861.5%; per-patient mean ($P < .001$))
- Patients messaged to ask medication questions (55.7%), general medical questions (40.4%), or their history (3.5%); cancel or request an appointment (0.2%); or request refills (0.2%)

FIRST OPINION STAT+


Psychiatrists like us cannot keep up with their inboxes

By Simone Bernstein and Jessica Gold Aug. 28, 2023 [Reprints](#)



ADOBE

Bernstein et al, JAMA Open, 2023



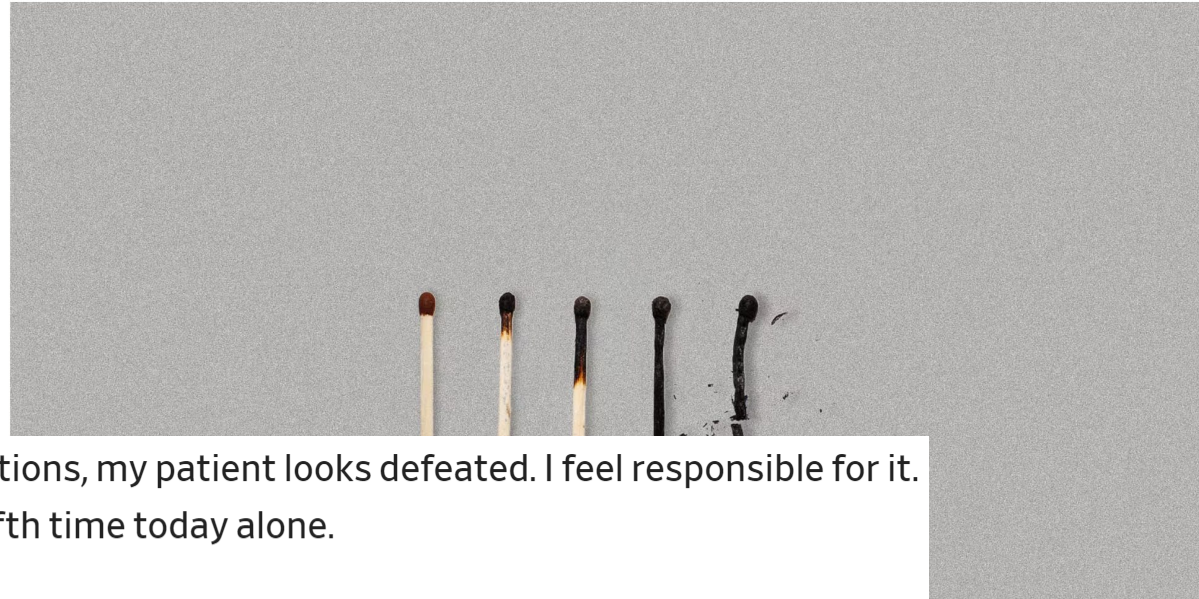
But, What If It's Not (Or NOT ONLY) Burnout?



STATE of MIND

There's a Name for the Constant Helplessness You Feel When You Work in Mental Health Care

BY JESSICA GOLD FEB 13, 2023 • 10:00 AM



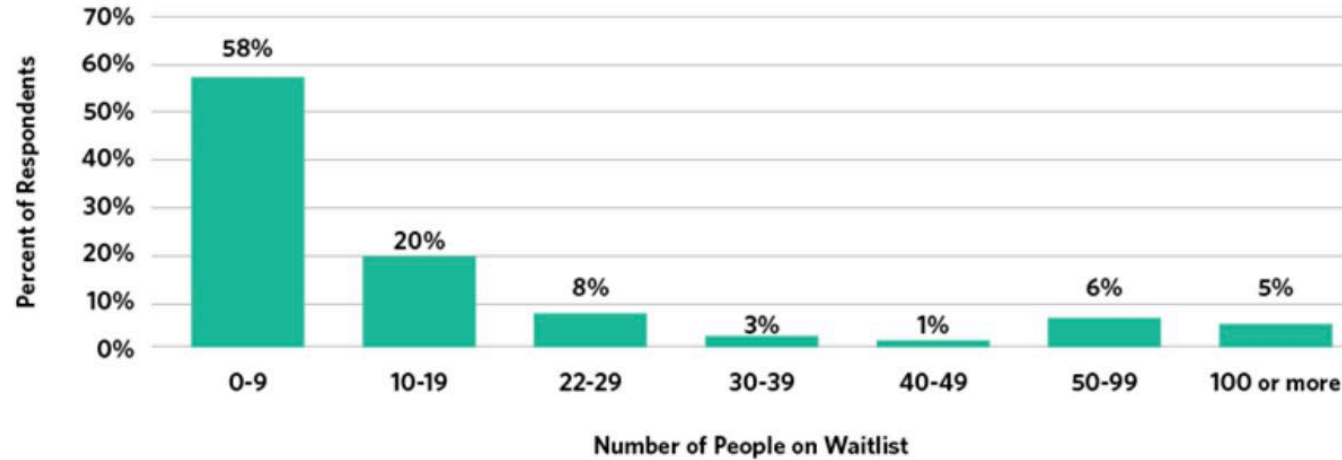
Listening to my series of unhelpful options, my patient looks defeated. I feel responsible for it. "I'm so sorry," I say, for the fourth or fifth time today alone.

I didn't have a word for what I was experiencing until the pandemic brought it out into my lexicon: *moral injury*. Before I went into this field, no one told me that the helplessness that comes with working in mental health is actually constant moral injury.

Moral Injury

- Originated in the context of the military to capture an experience of veterans that is distinct from PTSD
- Occurs when someone engages in, fails to prevent, or witnesses acts that conflict with their values or beliefs
- Examples of events that may lead to moral injury :
 - Having to make decisions that affect the survival of others or where all options will lead to a negative outcome
 - Doing something that goes against your beliefs (referred to as an act of commission)
 - Failing to do something in line with your beliefs (referred to as an act of omission)
 - Witnessing or learning about such an act
 - Experiencing betrayal by trusted others
- The injury= the distress we feel afterward in any or all areas of our life—psychologically, behaviorally, socially, and spiritually

NUMBER OF PEOPLE ON THE WAITLIST, 2022



NOTE: TOTALS MAY NOT SUM TO 100 PERCENT DUE TO ROUNDING.

COVID-19 PRACTITIONER SURVEY © 2022 American Psychological Association

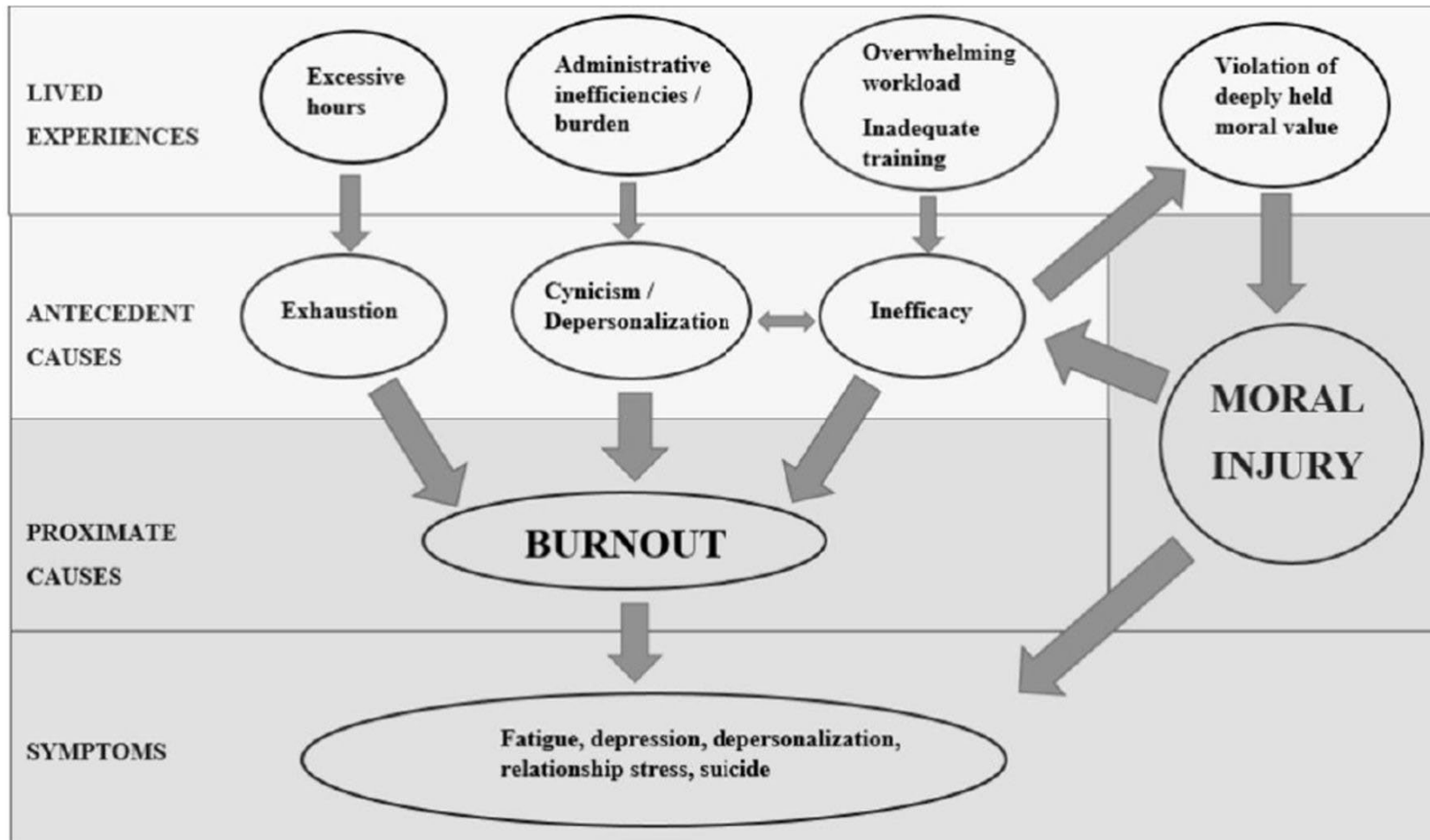
- More psychologists reported not being able to meet the demand for treatment: 30% in 2020 to 46% in 2022
- Psychologists reported being contacted by a mean of 15.7 new patients per month

<https://www.apa.org/pubs/reports/practitioner/2022-covid-psychologist-workload>

What Does Moral Injury Look Like?

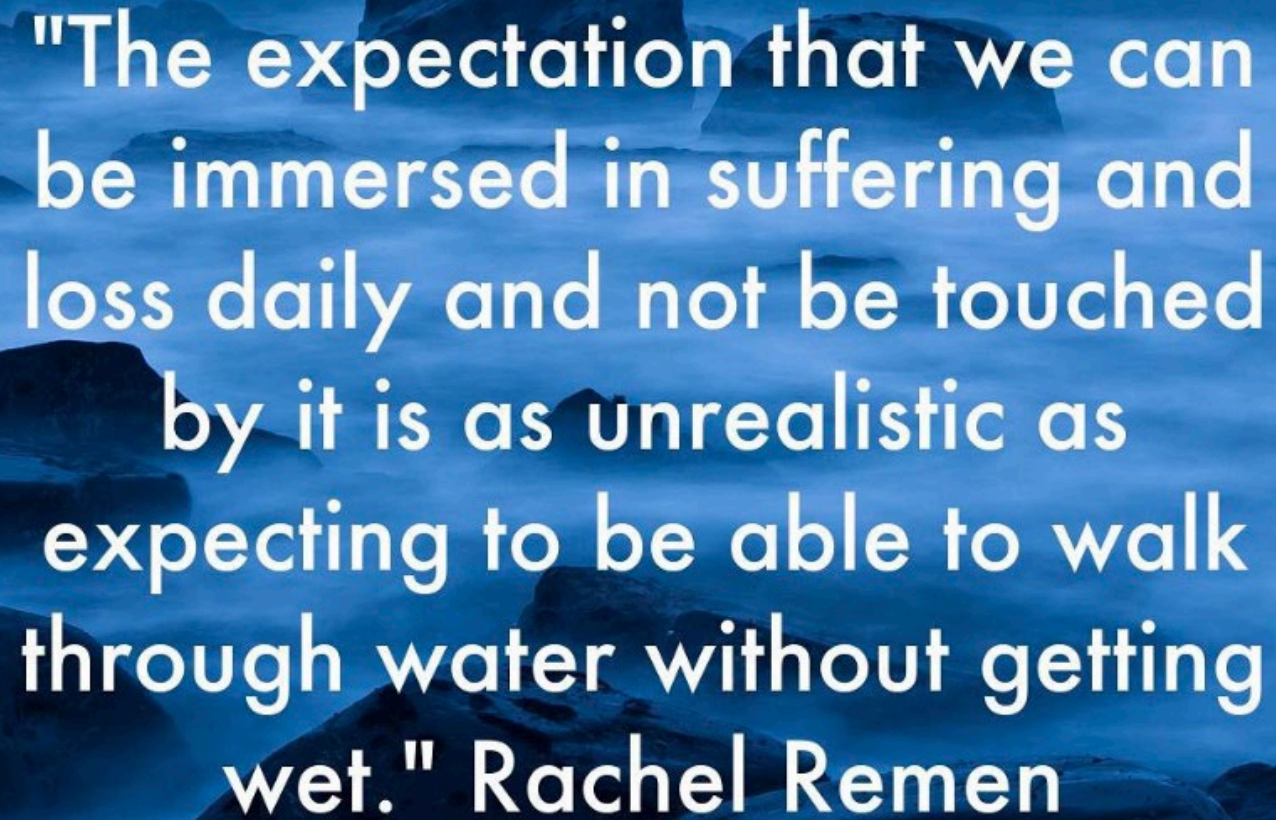
- May cause stress reactions- like changes in sleep, negative changes in behavior or habits, isolation, overworking, overeating, using substances, and a weakened sense of empathy or compassion
- Leads to guilt, shame, and anger
- Sometimes events are also traumatic events that can lead to symptoms of PTSD

Paradigm for the complex relationship between burnout and moral injury.



Philip Day et al. *J Med Ethics* 2022;48:746-752

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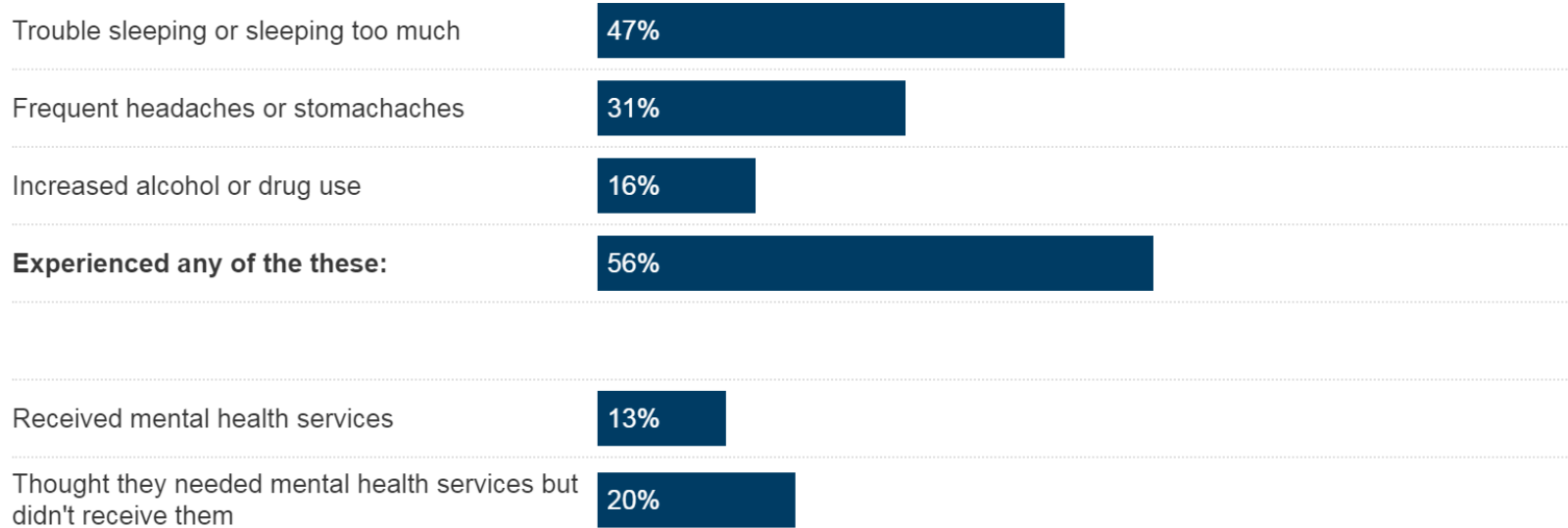
"The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet." Rachel Remen

**Still,
We Don't
Get Help
When We
Need It...**

Figure 4

More Than Half Of Frontline Health Care Workers Say Worry And Stress Related to COVID-19 Has Led To Adverse Health Impacts, One-Third Have Needed Mental Health Care

Percent of frontline health care workers who say worry or stress related to COVID-19 has led to each of the following:



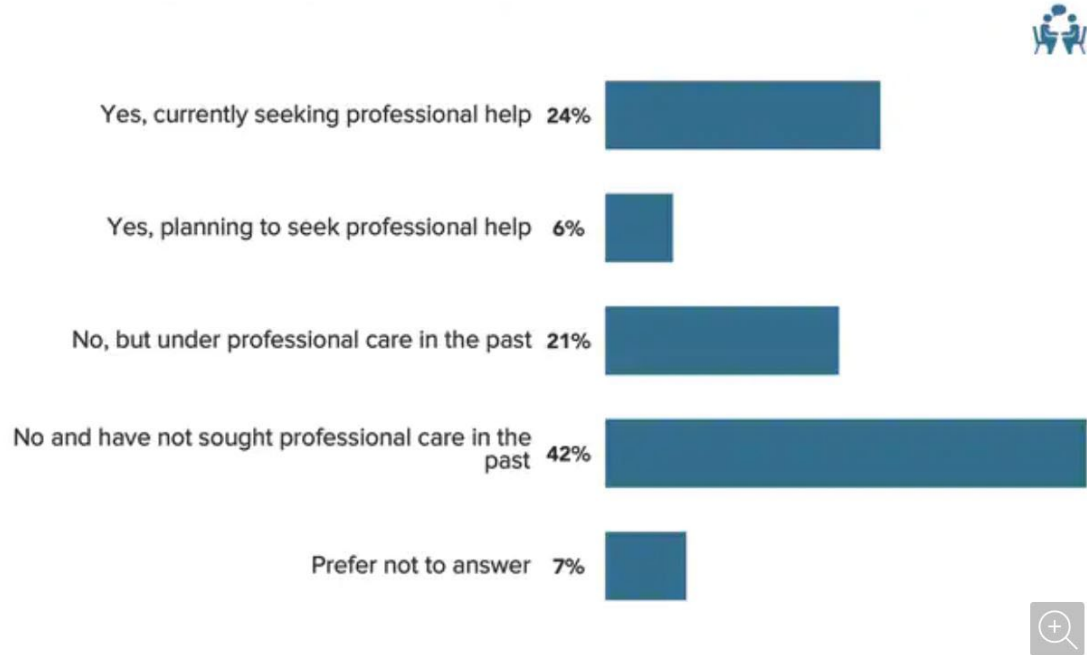
NOTE: See topline for full question wording

SOURCE: KFF/Washington Post Frontline Health Care Workers Survey (Feb. 11-March 7, 2021) • PNG

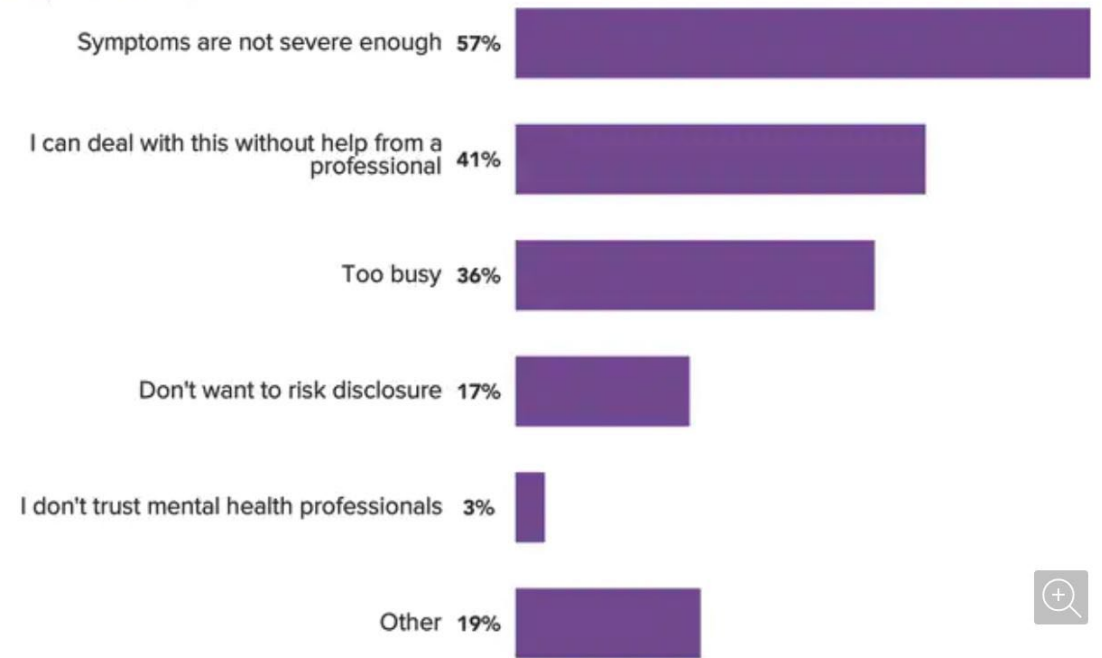
KFF The Washington Post

The most common reasons: Too busy (27%), Afraid or embarrassed about seeking care (17%), Couldn't afford it (16%), or Couldn't get time off work (14%).

Do Psychiatrists Plan to Seek Help for Burnout and/or Depression?



Why Haven't Psychiatrists Sought Help for Burnout and/or Depression?



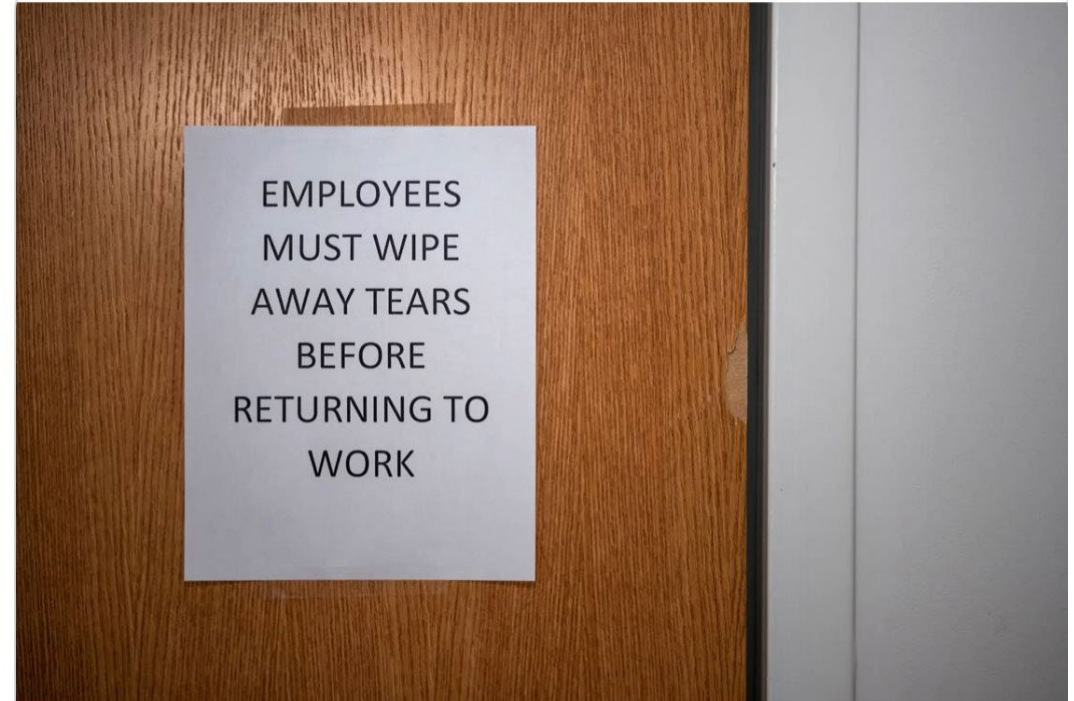
Even Psychiatrists

<https://www.medscape.com/slideshow/2021-lifestyle-psychiatrist-6013528#1>

Spotlight: Medical Culture



Daniel Schumacher, MD, PhD
@DrDanSchumacher



A sign inside an emergency-department restroom at Children's Hospital New Orleans. "Everyone is frustrated and worn out and upset," emergency-medicine physician Dr. Michael Blancaneaux says. Kathleen Flynn for TIME

Accepting imperfection is hard and something that, like athletes, doctors are famously bad at. The vast majority of us struggle hugely with the concept of failure and relinquishing control. We are self-selected, usually as teenagers, as over-achievers with ambition, most with the noble mission of “helping people.” We are then cultivated in a medical school environment that is a fertile ground for competition, pitting us against one another, creating a partisan world of winners and losers. Vulnerability is not framed as courageous, but as a failure: admitting we cannot do something, or we are not up to it sets us back against our peers, so we are encouraged to get our heads down and be better, plastering over these cracks with rehearsed confidence that is too easily equated to competence.

This method may have relative success in producing a cohort of individuals who can draw the brachial plexus on demand and recite side effects of peculiar antiquated medications, but it significantly limits us from being “good doctors”—to our patients, to our colleagues, but arguably most importantly, to ourselves. When faced with the inevitable failure that doctoring brings, we are all too often woefully unprepared for the emotional fall out this brings, and the realisation that we are flawed, imperfect humans who will make mistakes.

Self-Valuation

- N=832 physicians
- 29.8%: When make a mistake they “often” or “always” felt more self-condemnation than self-encouragement to learn from the experience
 - 50% higher than the proportion of workers in other fields
- Adjusting for differences in self-valuation, the increased risk for burnout is no longer observed
 - Lower self-valuation may be an explanatory variable in understanding medical culture and practice factors associated with physician burnout

Trockel et al, 2021

Item	No. (% of 873) ^a				
	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
It is a sign of personal weakness or inadequacy to receive treatment for emotional or mental health problems.	315 (36.2)	376 (43.2)	89 (10.2)	68 (7.8)	22 (2.5)
Residency directors would pass over my application if they were aware I had an emotional/mental health problem (e.g., depression, anxiety).	26 (3.0)	141 (16.2)	267 (30.6)	342 (39.2)	97 (11.1)
My supervisors (e.g., faculty, residents, deans) would see me in a less favorable way if they believed that I had an emotional/mental health problem.	37 (4.2)	177 (20.3)	193 (22.1)	380 (43.5)	86 (9.9)
Fellow students would see me in a less favorable way if they came to know that I had received treatment for emotional/mental health problems.	32 (3.7)	204 (23.4)	191 (21.9)	344 (39.5)	100 (11.5)
Patients would not want me as their doctor if they were aware I had received treatment for an emotional/mental health problem.	28 (3.2)	193 (22.2)	246 (28.2)	344 (39.5)	60 (6.9)
Mental health care provided by my school/affiliated institution to medical students is truly confidential.	55 (6.4)	124 (14.3)	238 (27.5)	332 (38.3)	117 (13.5)
The dean at my medical school could access my personal medical record if he or she wished to do so.	212 (24.3)	291 (33.4)	143 (16.4)	154 (17.7)	72 (8.3)
Residency program directors at the institution associated with my medical school could access my personal medical record if they wished to do so.	244 (27.9)	314 (36.0)	136 (15.6)	127 (14.5)	52 (6.0)
If I sought care for an emotional/mental health problem it might end up in my academic record.	190 (21.9)	352 (40.5)	155 (17.8)	147 (16.9)	25 (2.9)
If I were to receive treatment for an emotional/mental health problem, I would hide it from people.	12 (1.4)	111 (12.7)	210 (24.1)	417 (47.8)	123 (14.1)

^aPercentages take into account missing values.

Dyrbye et al, 2015, *Academic Medicine*



Jessi Gold MD MS ✓

@drjessigold



I'm a psychiatrist. If I didn't see a therapist I wouldn't be able to see healthcare workers as patients because I wouldn't be healthy enough to help. Psychiatry supports it, but the system doesn't, even joking that psych is a weaker specialty, bc..feelings. This needs to change.

Esther C, MD ✓ @choo_ek · Jul 11, 2020
I'm an ER doctor. I've seen a therapist and have been on antidepressants. Our system considers this a red flag, instead of a positive signal that I'm taking the best care of myself possible. This needs to change. twitter.com/choo_ek/status...

[Show this thread](#)

12:37 PM · Jul 11, 2020 · Twitter for iPhone

View Tweet activity

752 Retweets **94** Quote Tweets **3,903** Likes



Elate Collected @Elate_Collected

Replying to @choo_ek

Outpatient internist on both S
still suffer in silence as peers :
spouse is dismissive as she al
today but could use a hug

10

4



Sarah Jolley, MD, MSc

Replying to @choo_ek

I am a pulmonary/critic:
with PTSD and depress
a machine and I'm eter
help me through the da

3



Adam B. Hill, M.D. @

Replying to @choo_ek

I'm a pediatric oncolo
with a hx of depressic
life. And made me the
today.

12

pression. I had to take time
to therapy. I faced a lot of
a long way to go as mental

0
I've gone to counseling.
experience with mental
. She said I would be
She was right.

ne care they need, or support
Healthcare is hard enough,
mental health..

I'm a Psychiatrist and Even I Kept My Mental Health Meds a Secret

At work, I know how important these medications are. But personally? The stigma against them left me feeling ashamed — until now.

By Jessi Gold | Jul 21, 2021 @ 1:14 pm



Self Stigma



Just because
someone carries
it well, doesn't
mean it isn't heavy.

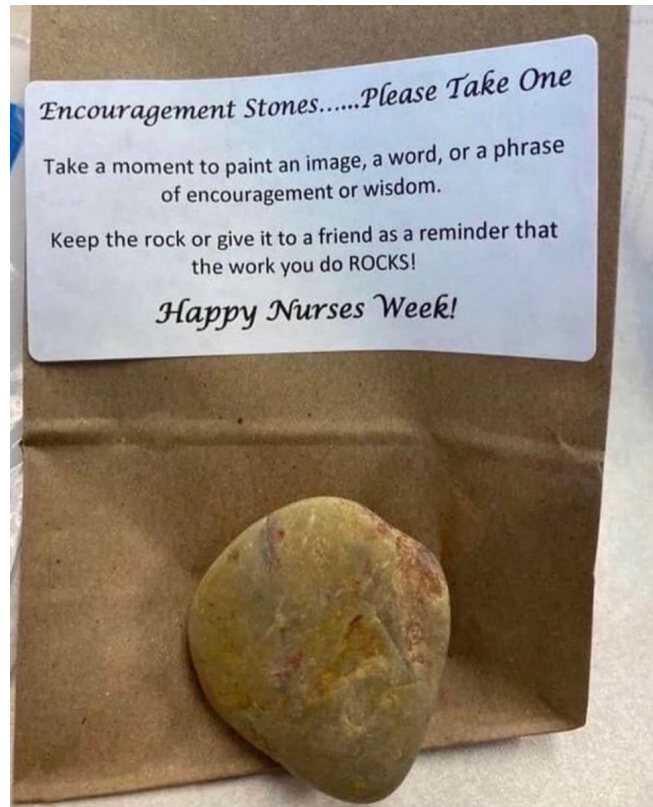
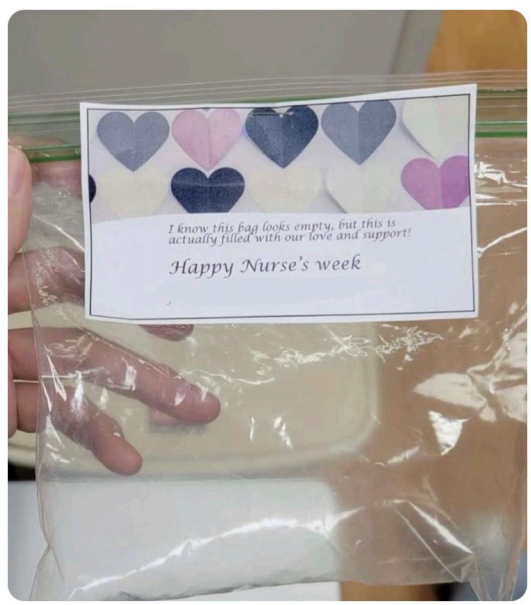
ifunny.co

So, What Can We Do? How To Thrive In A Broken Culture



ChaosandCaths ✓
@ChaosandCaths

I hate that I don't know if this is satire or not



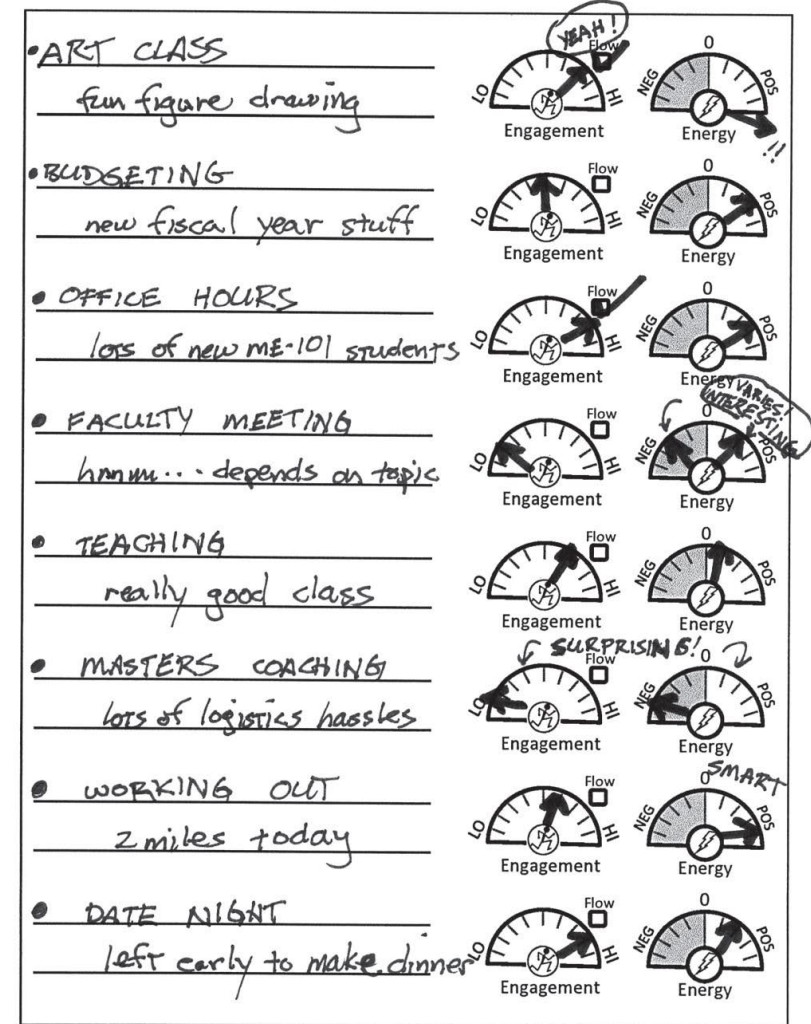
Hint: Not Fixable With Yoga And Pizza...or Commemorative Tokens

Take a Self-Inventory

- Prevention: Notice warning signs/symptoms and take time to ask yourself how you are doing
- Meaning/Purpose are protective against burnout
- Examine your strengths and talents
 - “I’m really good at....”
 - “I’m really proud of the fact that I...”
 - “When I doI feel energized/engaged/excited”
- Look for your mission
 - What gets you out of bed in the morning/concep could you talk about all day


(Inspired by THE GREAT Dr. Kimberly Manning, WIM Summit, 2022)

Bill's Good Time Journal Activity Log



Social Media/Media Exposure Limits



Joél Leon.  @JoelakaMaG · Jun 6
checklist:

- are you eating?
- are you drinking water?
- are you stretching?
- are you resting?
- took a break from the news?
- talked to a loved one today?
- loved on yourself today?
- learned something new?
- shared a resource?
- doing things that bring you joy?

 8

 591

 919



SIPRESS

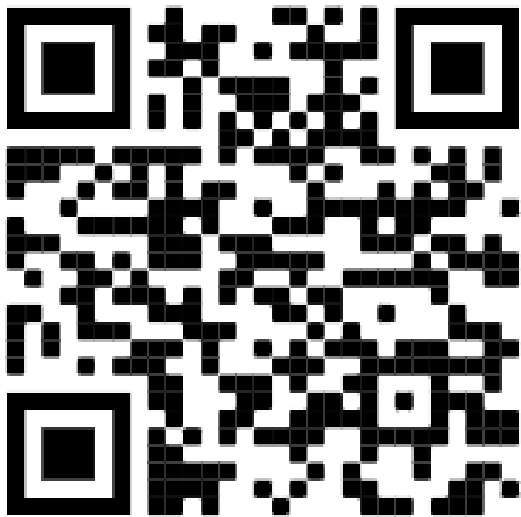
“My desire to be well-informed is currently at odds with my desire to remain sane.”

Consider: Three Good Things

- Daily for 15 days
- Text reminder 2 hours before bed
 - What went well today, what was your role in making that happen
 - Selecting a positive emotion to describe how you felt about those good things
- Significant improvements from baseline in emotional exhaustion, depression symptoms and happiness at 1 month, 6 months and 12 months, and in work–life balance at 1 month and 6 months
- Exploratory subgroup analyses of participants meeting ‘concerning’ criteria at baseline revealed even larger effects at all assessment points

Sexton & Adair, 2019

Well-Being Tools



bit.ly/posfbtool | 3 minutes | 8 days
Positive Feedback. Cultivate the ability to uplift others.

bit.ly/kindtext | 3 minutes | 8 days
Cultivate kindness.

bit.ly/selfcomptool | 10 minutes | 2 days
Self-Compassion. Cultivate a kinder internal voice.

bit.ly/serenitytool | 2 minutes | 4 days
Serenity. Cultivate routines and rituals.

bit.ly/strengthstool | 3 minutes | 8 days
Signature Strengths. Cultivate your strengths.

bit.ly/sleptool | 2 minutes | 8 days
Sleep Tool. Cultivate rest.

bit.ly/start3gt | 2 minutes | 15 days
3 Good Things. Cultivate your uplifts.

bit.ly/3wiser | 5-in-1 tool | 10 days
WISER. A sampler of multiple well-being tools.

bit.ly/storyburn | 20 minutes | 3 days
Your Burnout Story. Cultivate healing through reflective writing

Check-In On Others

- A supportive work environment is a buffering factor of negative psychological health among healthcare workers---protects them from PTSD
 - During the pandemic: social support had the greatest impact on the mental health of healthcare workers
- Decrease in odds of burnout if HCW trusted management, had supervisor help, had enough time to complete work, and felt that their workplace supported productivity
- Supportive supervisors and leadership are **key**
 - In multilevel models, odds of burnout were 40% lower in those feeling valued by their organizations

Karakcheyeva et al, 2024 Kovner et al, 2021 Prasad et al, 2021

Feingold et al, 2021

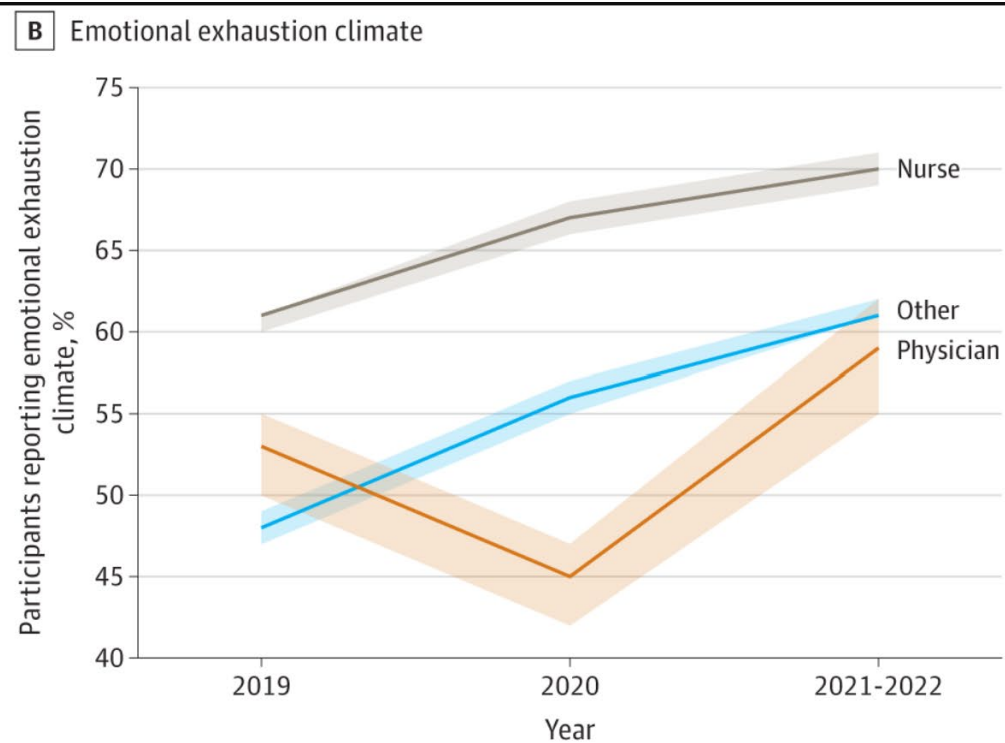
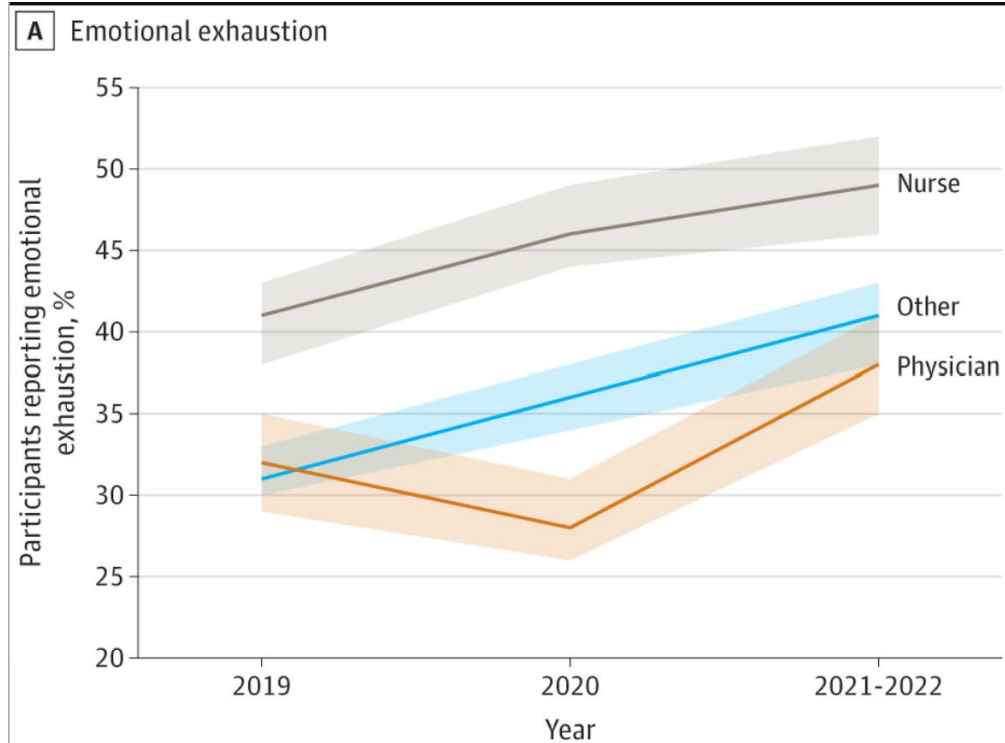
Si et al, 2020

VULNERABILITY IS NOT
WINNING OR LOSING.
IT'S HAVING THE
COURAGE TO SHOW UP
WHEN YOU CAN'T
CONTROL THE OUTCOME.
BRENE BROWN

In Other Words, Be Vulnerable

- **Definition:** Uncertainty, risk, and emotional exposure (Brené Brown)
- Create a culture of openness and support
- **Courage and Empathy:** Important in leadership
- Birthplace of innovation and creativity
 - Without openness to failure, it is very difficult to be creative/change
- Self-disclosure reciprocity

Plus, Burnout is Contagious



Intraclass correlation coefficients (ICC) describe how strongly healthcare workers in the same work setting resemble each other

.01 considered a small effect, .10 considered a medium affect, and .25 considered a large effect

	2019	2020	2021/2022
EE	0.153	0.173	0.174
EE Climate	0.221	0.238	0.236

Note: EE and EEclim were used as continuous variables (0-100 point).

Amount of shared variance at the work setting level in assessments of emotional exhaustion was 15-17%

Sexton et al, 2022

POOH
WHATS
THE BRAVEST
THING
YOU'VE EVER SAID?
ASKED PIGLET



"HELP" SAID POOH

Bonus Tip: Ask for Help When You Need It.

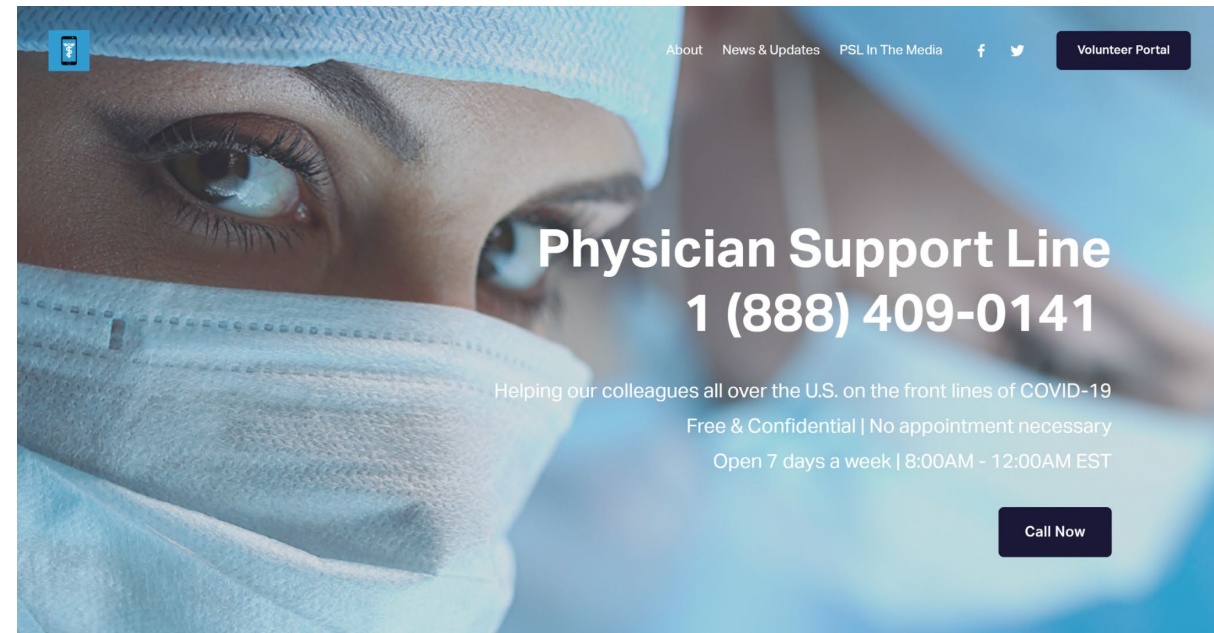
**There is no wrong time to
get help and getting help
is good leadership**

Free & Low Fee Short-Term
Essential Therapy
for Essential
Workers

FIND A THERAPIST



invite you to connect with others
and find shared support.



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The Emotional PPE Project

CARL JUNG QUOTES

“

Knowing your own
darkness is the best
method for dealing
with the darkneses
of other people.

”

**Plus,
It Makes You A
Better At Your
Job**

Any Questions?

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