Stress, Burnout and Wellbeing

National Association of Hearing Officers

Melissa Piasecki, M.D.

Professor of Psychiatry

University of Nevada, Reno School of Medicine

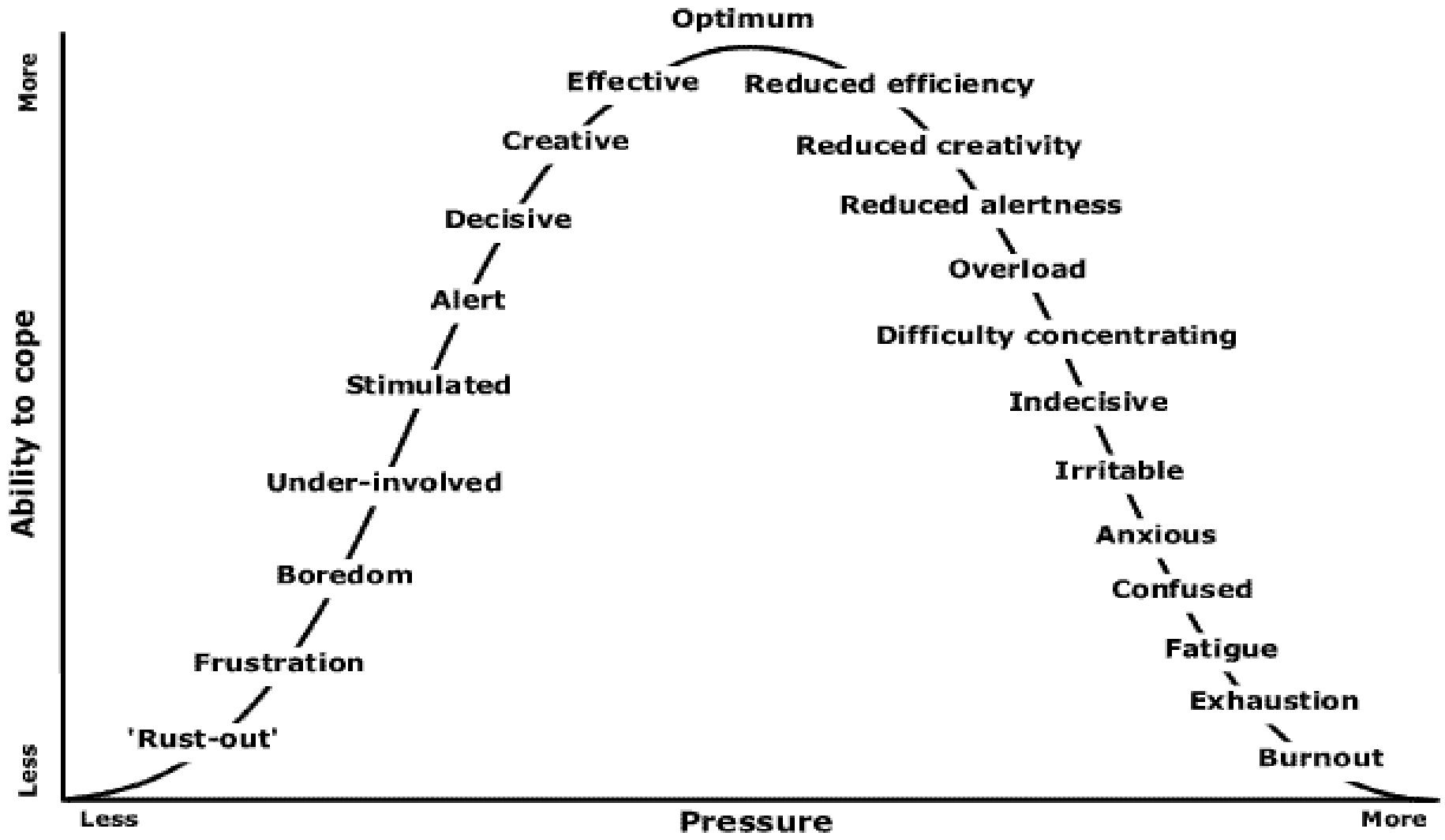
Today’s Objectives

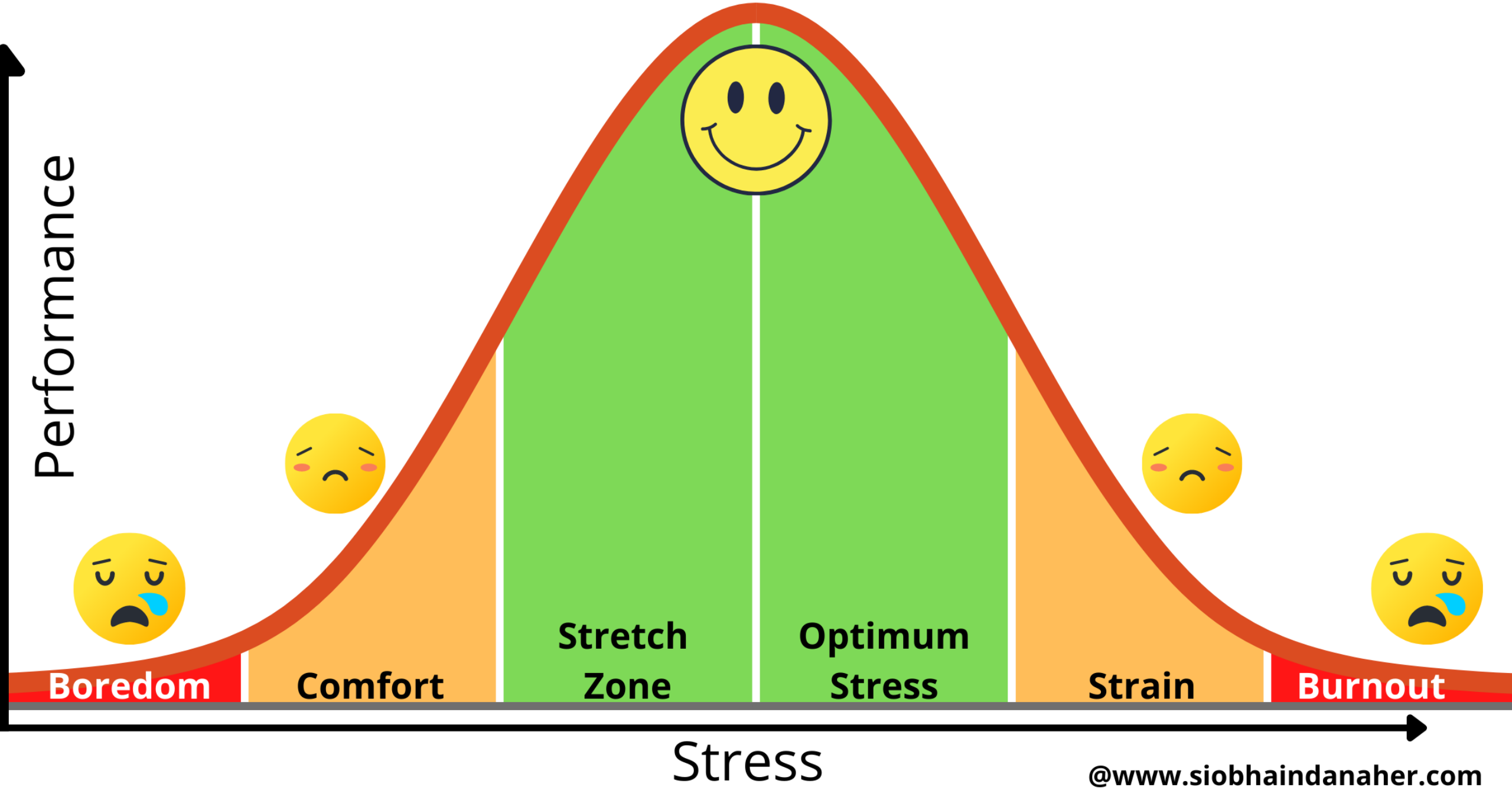
- Describe three or four sources of occupational stress
- Identify the impact of stress and burnout on your brain and your body
- Apply two or three skills including a brain “hack”
- Practice interventions
- Next steps …..

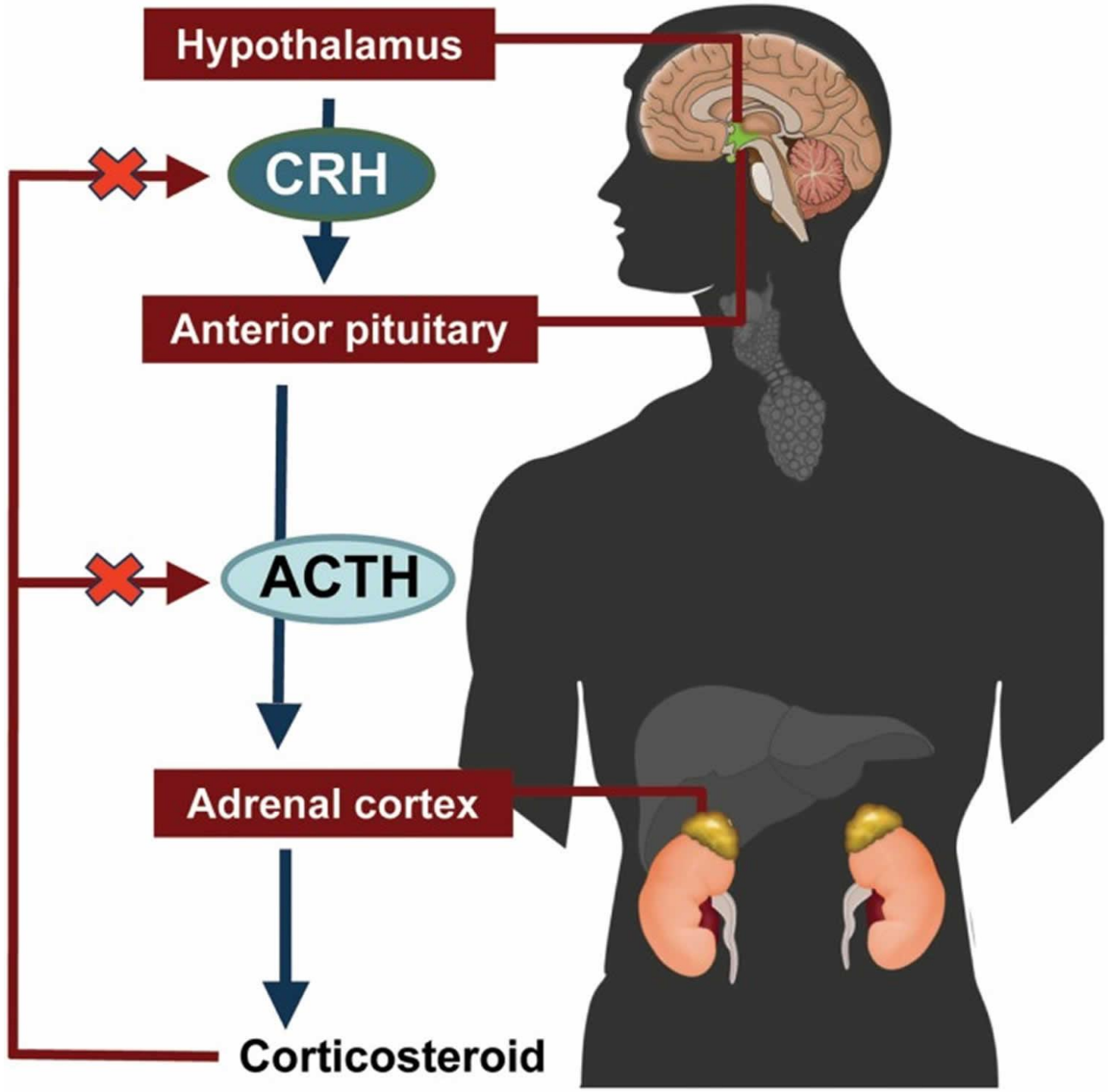
Stress and Pressure

Pressure and Coping

Performance Curve/ Yerkes-Dodson Law



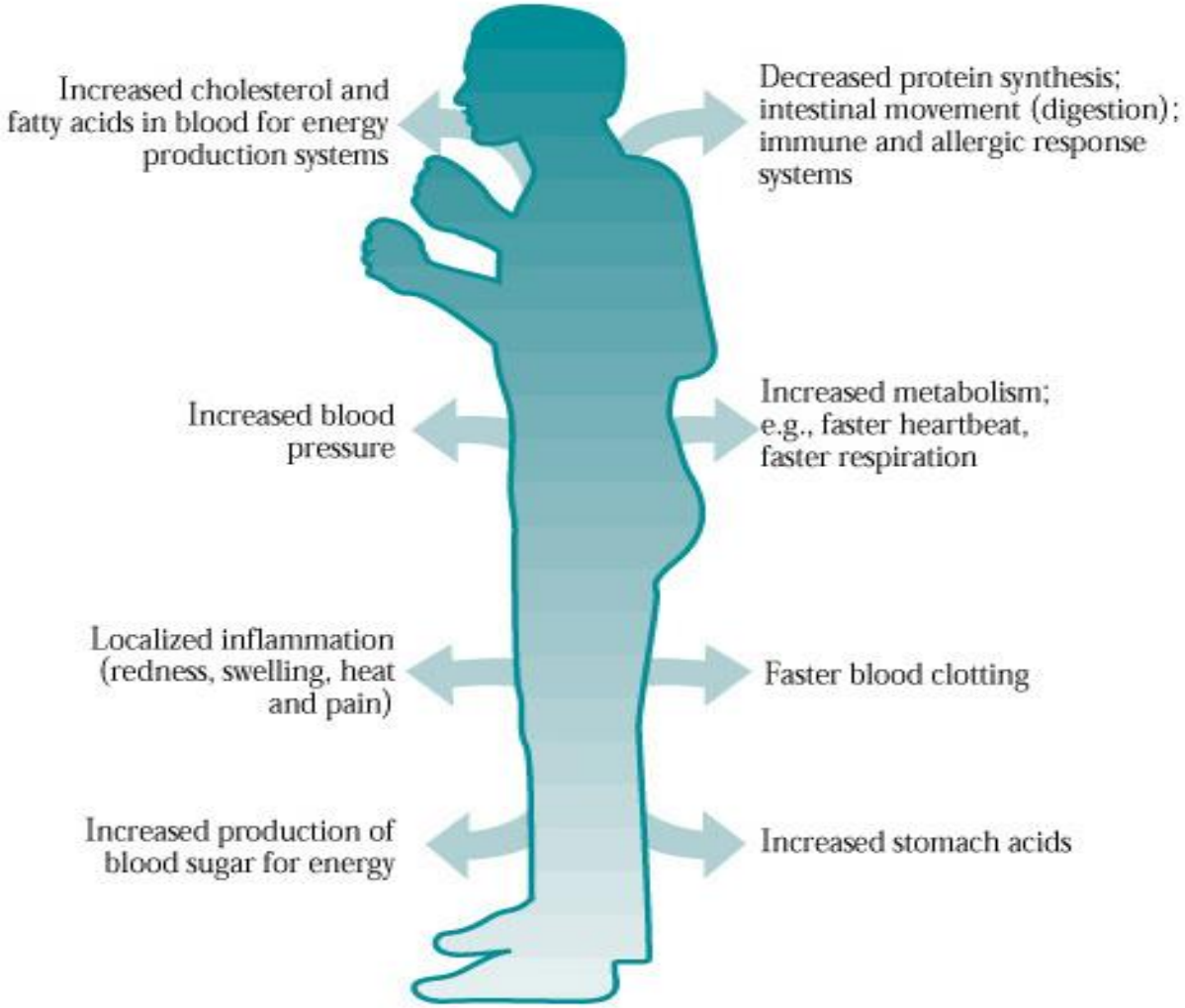

Performance
Boredom
Comfort
Stretch Zone
Optimum Stress
Strain
Burnout
Stress
@www.siobhaindanaher.com


Hypothalamus
CRH
Anterior pituitary
ACTH
Adrenal cortex
Corticosteroid

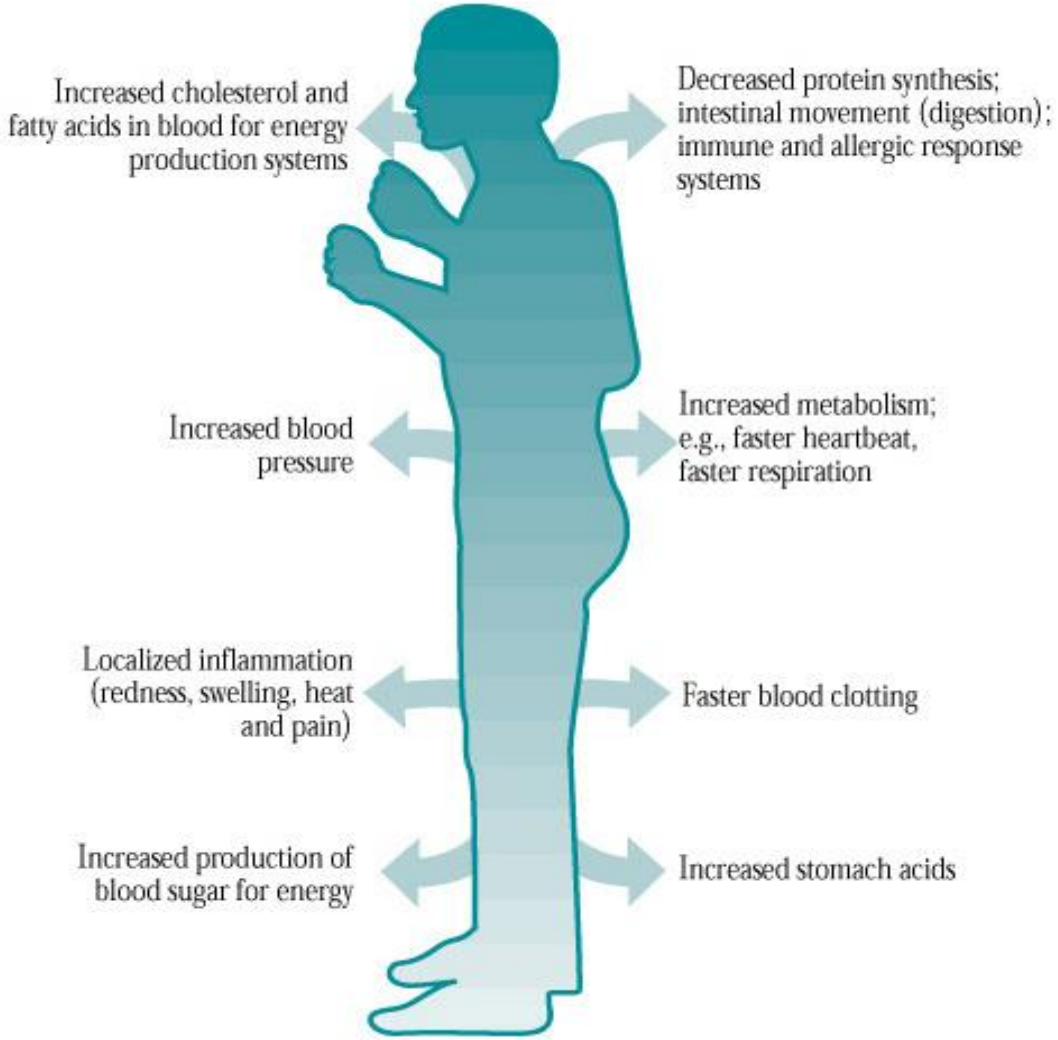
Acute Stress Response

- Evolutionary Biology
- Body adapts to acute, episodic threats
- Survival!

Acute Stress Response: Activation of the Autonomic Nervous System



Acute Stress Response IS Non-Specific



Non-Specific Stress Response

Muscle tension

Hypervigilance

Irritability

Chronic high blood pressure

Stomach churning (and other digestive upsets)

Difficulty sleeping

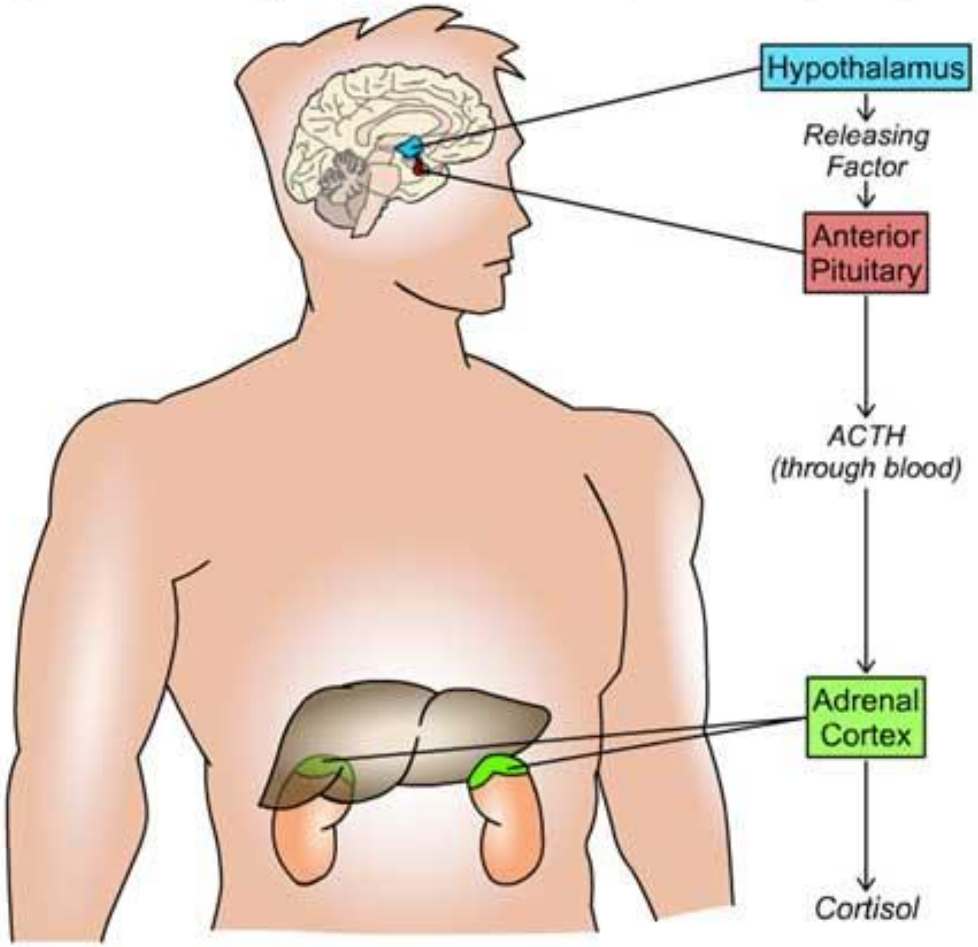
Changes in focus, concentration

No “button” to turn off this “survival” response

Accelerated aging

We are wired to survive: Adrenal Glands are Not Smart

Figure AN-1: Hypothalamic-Pituitary-Adrenal (HPA) Axis



- Human brains have a negativity bias
- Better to mistake a bush for a bear than the other way around

Cognitive Biases that Promote Survival (and are not always helpful)

- We are alert to threat
- We learn fear really well
- Bad things stick like Velcro
- Good feelings are transient

Long Term Psychological Effects

- Anxiety
- Depression
- Avoidance

Some Good News

- We can prepare people for stress
- We can mitigate stress response through brain hacks
- We can build resiliency through evidence-based strategies
  - Social
  - Environmental
  - Cognitive
  - Physical

Managing Professional Stress & Burnout

- 2 Minute Reset: Hack into our Central Nervous System

Hacking our Central Nervous System

- **Brain and breath connection is bi-directional**
  - **“Top Down”- brain activity can increase respiratory rate, shallow breathing when anxious**
  - **“Bottom up”- we can decrease brain arousal and increase focus by controlling rate and timing**
  - **Breath cycle manipulation**
    - **Cardiovascular, respiratory and subjective calming**

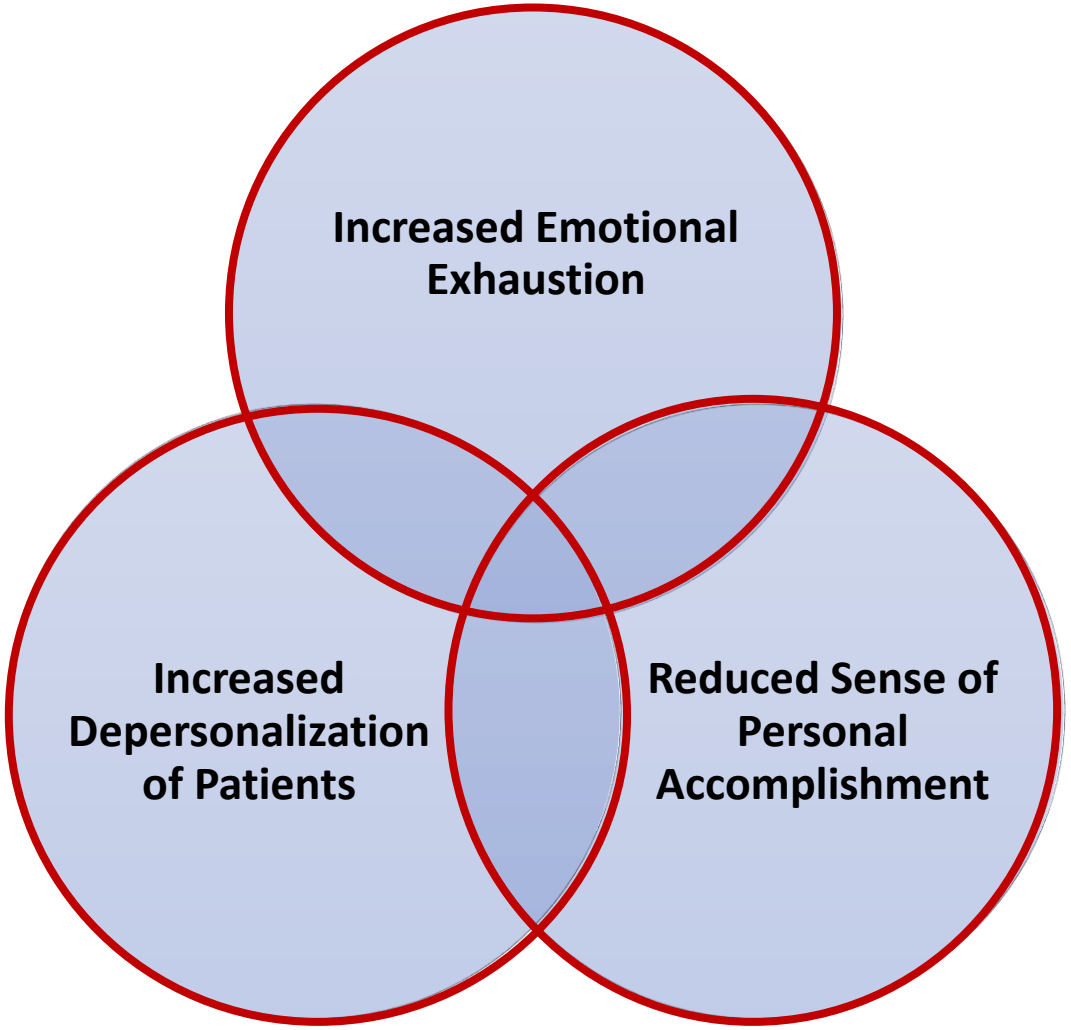
Melnychuk, Dockree et al, 2017
Pal, Velkumary and Madanmohan, 2004

Burnout as a multi-dimensional construct

- Individual stress response (exhaustion)
- Response to job/ clients (cynicism)
- Response to self (feelings of inefficacy)

Maslach, 2003

Beyond the unidimensional stress response



Lloyd, Bond & Flaxman (2013)

Exhaustion

- Response to workload demands
- Emotional depletion
- Leads to maladaptive coping: emotionally/ cognitively distancing

Cynicism

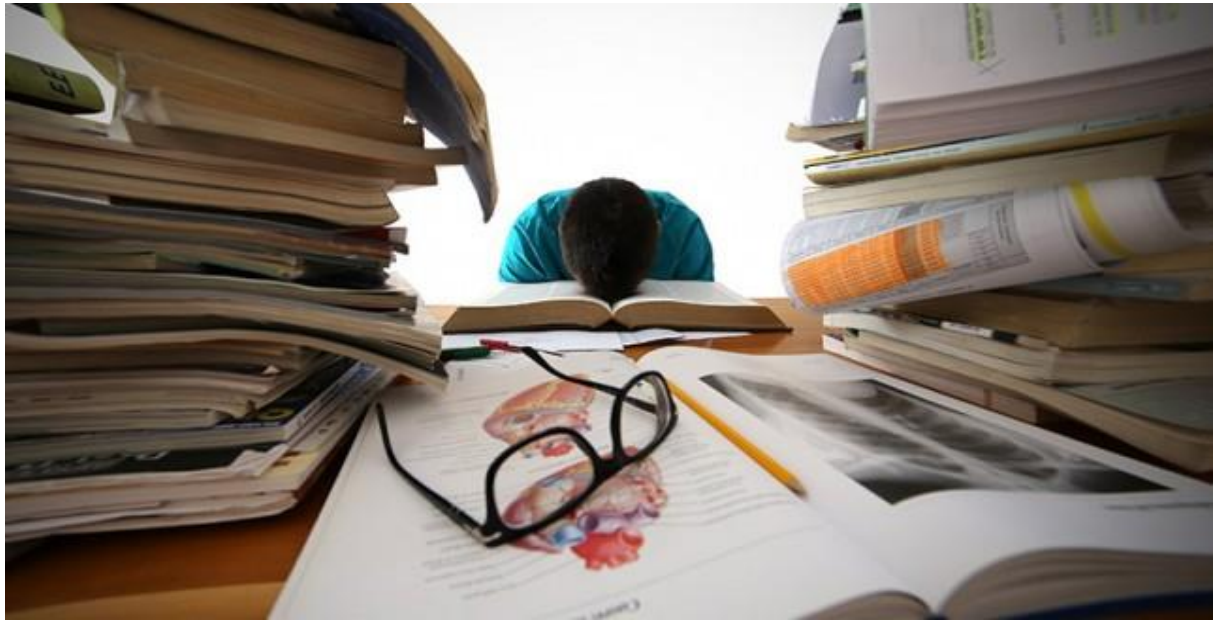
- See others as objects- “depersonalization”
- Do the bare minimum

Inefficacy

- Lack of resources
  - Time, information, tools, support
  - “Whatever I do does not matter”

General Consequences of Burnout

- Health Problems
- Depression
- Reduced Productivity
- Absenteeism
- Job Turnover
- Auto accidents
- Marital discord



Lloyd, Bond & Flaxman (2013)
Krasner et al (2009)

Consequences of Burnout in Physicians

- Self-reported medical errors
- Self-reported unprofessional behaviors
- Decreased patient satisfaction
- Increased bias
- Lawsuits
- Suicidal ideation
- Losses to physician workforce
  - Primary care > other specialties

Krasner, JAMA 2009

Specific Consequences for People in Service Roles

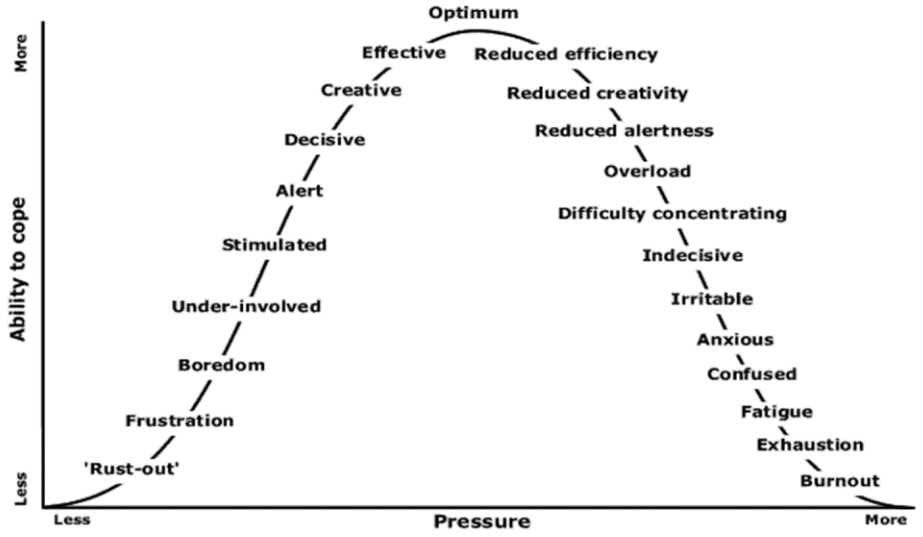
- Poorer care
- Reduced professionalism
- Higher rate of substance abuse
- Early retirement

Lee, Brown, & Cabrera (2017); Sensen et al. (2016)

Problems with this model for stress and burnout

The Person's ability to cope is the problem

- Trying too hard? Not enough?
- Incompetent?
- Other flaws



Fails to consider situational variables

Social, institutional

Fails to promote changes to prevent burnout in others

General Population Predictors of Wellbeing

- Social Connections
- Optimism
- Gratitude
- Physical Activity

2 Minute Applications for Positivity

- 1. Gratitude and social wellbeing
- 2. Optimism: Reframing a experience

Gratitude

- Measurable benefits on
- Mood
- Subjective well being
- Physical health

Social Wellbeing

- <u>Best protection from burnout</u>
- Women > men?
- Strongest external source of wellbeing.
  - The quality of our social network is a better predictor than wealth, education or career.
  - Stronger than the connection between smoking and cancer.

Application: Gratitude and Social Wellbeing

- Compose an Email or a text to a person you know and thank them for:
- A wonderful quality that they have demonstrated during OR
- Something specific they do/ have done that you appreciate (2 minutes)

Optimism: The Many benefits

- Faster healing
- Greater resilience to setbacks
- Decreased mortality (all causes)

- Reframing is an exercise to cultivate optimism

Reframing: Something “bad” happens.
How is this also good?

- It is good because it teaches me empathy for others.
- It is good because I can use it somewhere else or for something else.
- It is good because it will change in time into a good thing.
- It is good because it required me to try something new.
- It is good because I learned about an area I can develop.
- It is good because I was able to discover a new strength/ strategy / superpower.
- It is lucky because….
- I am lucky because ……

Application #2: Reframing

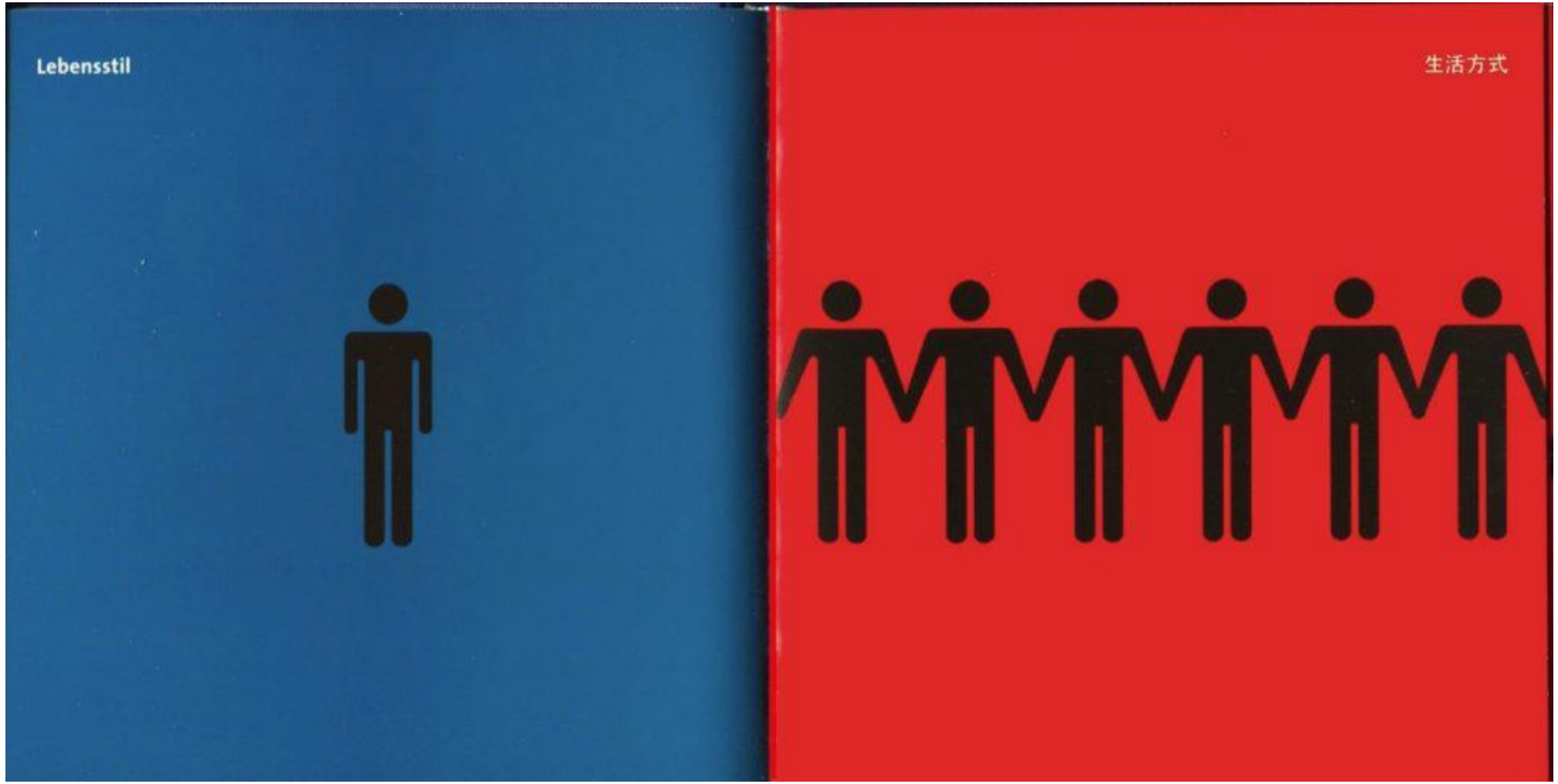
Consider a specific issue related to your professional role that you recently encountered.

Pick Two or More Reframe(s):

- It taught me empathy for others in this way:
- I can use it for something else:
- It will change in time into this good thing:
- It required me to try this new thing:
- I learned about this area I can develop:
- I discovered this new strength/ strategy / superpower:
- It is (I am) lucky because….

Volunteer to Share Reframing Exercise

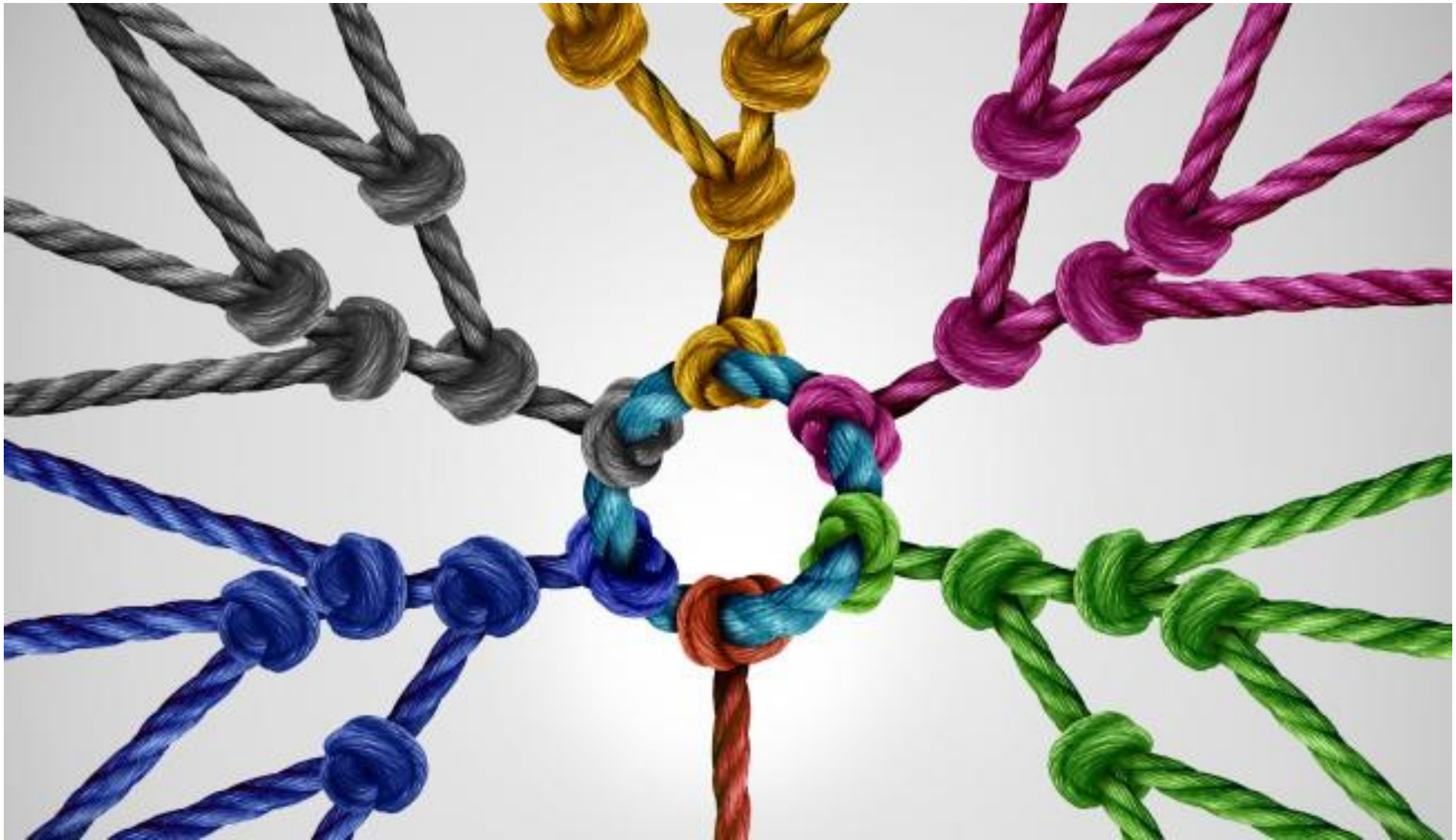
Individual Vs Systemic Approaches….



Is it the toast’s fault?
Or do we also need to look at the toaster?

Is it the canary's fault?
Or do we also need to look at the air quality?

Systemic Approaches



Role of Organizations/ Agencies

Wellness and Family policies

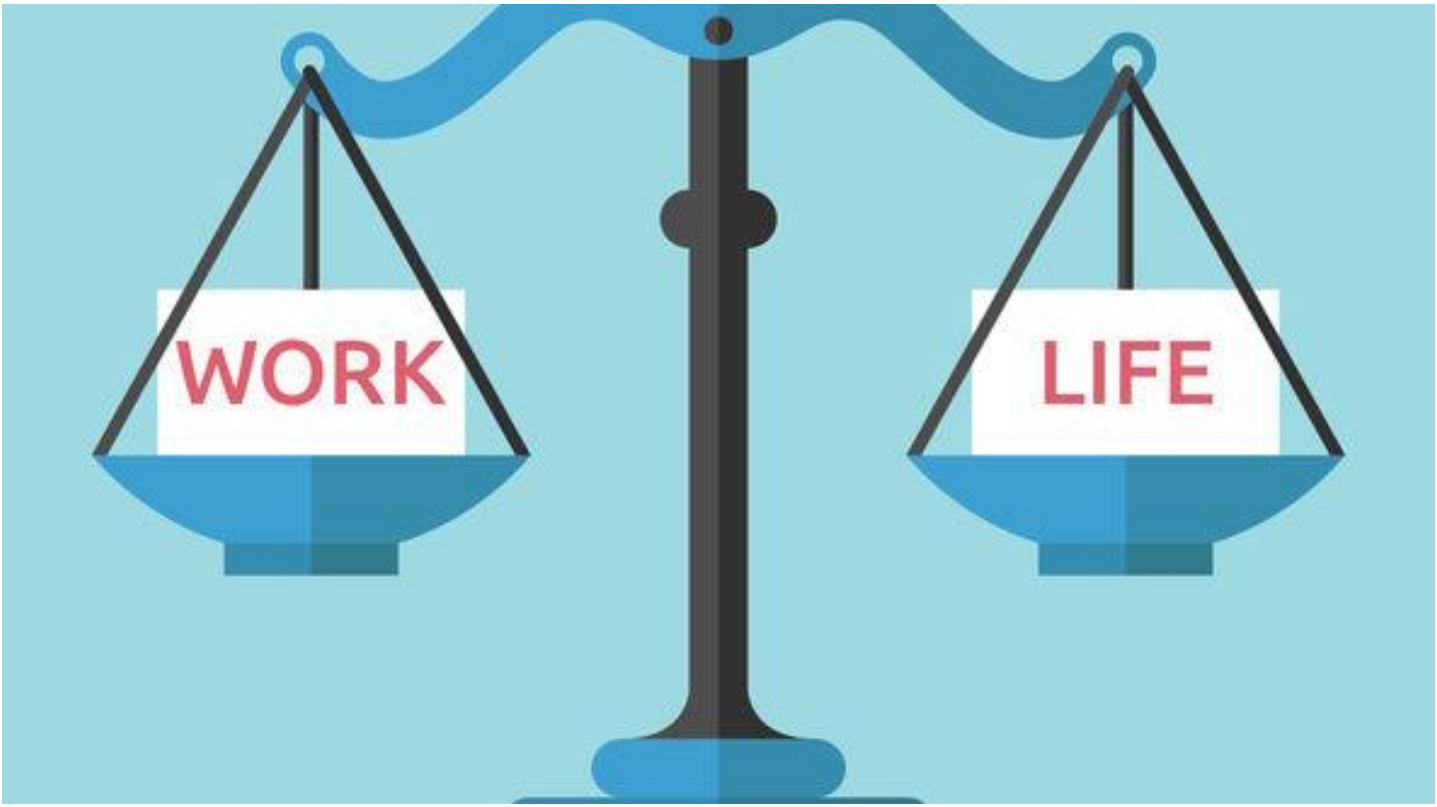
Wellness and Mentoring programming at workplaces

Regular assessment and monitoring of culture and wellness

Wellness committees that are resourced to do all of the above

Representation and engagement with professional associations

Example: Policies for Workweek, Part time/ Flex time



Psychological Wellbeing: Best Practice Guidelines for Legal Professionals

- Free, online framework
- Developed by
- Tristan Jepson Memorial Foundation (Australia)
- Mental Health Commission of Canada

Tristan Jepson Memorial Foundation: 13 Organizational Factors

Organization culture
Psychological and social support
Clear leadership and expectations
Civility and respect
Psychological competencies and requirements
Growth and development
Recognition and reward
Good involvement and influence by staff
Workload management
Engagement
Balance
Psychological protection
Protection of physical safety

“Clinical level”= interferes with home/ social/ work function

- Burnout
- Depression
- Anxiety
- Substance use

Burnout, Depression, and Suicide are linked

Lee, Brown, & Cabrera (2017)

Possible Signs of a Problem

- **“I need a drink”**
- **Lack of joy:** Activities or hobbies (or even work) that used to bring happiness no longer interest or please **Low mood**: Consistently and persistently feeling sad, anxious, or irritable
- **A sense of emptiness**: Hopeless, pessimistic, or “empty” consistently
- **Feeling guilty:** Ongoing and inappropriate feelings of guilt, worthlessness, or helplessness
- **Difficulty concentrating:** Trouble focusing, remembering, or making decisions

Thoughts of death.

Recurrent thoughts of death or death by suicide are red-flag signs

How can we sensitively ask?

Always ask questions 1 and 2.	Past Month	
1) Have you wished you were dead or wished you could go to sleep and not wake up?		
2) Have you actually had any thoughts about killing yourself?		
If **YES** to 2, ask questions 3, 4, 5 and 6. If **NO** to 2, skip to question 6.		
3) Have you been thinking about how you might do this?		
4) Have you had these thoughts and had some intention of acting on them?	**High Risk**	
5) Have you started to work out or worked out the details of how to kill yourself? Did you intend to carry out this plan?	**High Risk**	
Always Ask Question 6	Life-time	Past 3 Months
6) Have you done anything, started to do anything, or prepared to do anything to end your life? *Examples*: Took pills, tried to shoot yourself, cut yourself, tried to hang yourself, took out pills but didn't swallow any, held a gun but changed your mind or it was grabbed from your hand, went to the roof but didn't jump, collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, etc. **If yes, was this within the past 3 months?**		**High Risk**

988 SUICIDE & CRISIS LIFELINE

If YES to 2 or 3, seek behavioral healthcare for further evaluation.
If the answer to 4, 5 or 6 is YES, get immediate help: Call or text 988, call 911 or go to the emergency room.
STAY WITH THEM until they can be evaluated.

Download Columbia Protocol

Screening and Scripts

THE COLUMBIA LIGHTHOUSE PROJECT

IDENTIFY RISK. PREVENT SUICIDE.

- **Simple.** Ask all the questions in a few moments or minutes — with no mental health training required to ask them.
- **Free.** The protocol and the training on how to use it are available free of charge
- **Evidence-supported.** An unprecedented amount of research has validated the relevance and effectiveness of the questions used in the Columbia Protocol to assess suicide risk, making it the most evidence-based tool of its kind.
- **Effective.** Real-world experience and data show that the protocol has helped prevent suicide.
- **Universal.** The Columbia Protocol is suitable for all ages and special populations in different settings and is available in more than 140 country-specific languages.

Training is not required and you do not need any mental health experience to use the Columbia Protocol, however, training is helpful

Options for Training on the Columbia tools

The Columbia Lighthouse Project offers numerous free training options in more than 20 languages. The shortest training takes about 20 minutes, and almost all of them can be completed within an hour. Trainings are not setting specific.

Online Options

Interactive Training Module

Watch a Prerecorded Webinar

Watch a webinar on your own schedule by going to the Project's YouTube channel and selecting an archived webinar (less than an hour long).

Participate in a Live Webinar

Participate in a training in real time to get the latest information and immediate answers to your questions. Contact us to schedule one.

Next Steps?

- Individually
- As a colleague
- As a supervisor
- As a leader

Wrapping Up

- You do difficult work in stressful settings
- We all have different risk factors
- Pandemic added “off the chart” challenges
- We can cultivate resilience and positivity with intentional actions, exercises, policies and practices
- Care for yourself and each other

Thank You

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