

Connecting to Purpose and Restoring Meaning

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Life in emergency medicine can be challenging, draining, and at times insufferable. It's easy to lose sight of our purpose in the face of difficult patients, striving to meet non-patient centered metrics and the fear of litigation. How does one restore meaning

in our working lives? At the individual level, finding this meaning calls for self-awareness and an ability to reflect on what is most impactful to us personally.

Dr. Bryan Sexton at the Duke Patient Safety Center has developed the Web Based Intervention for the Science of Enhancing Resilience (WISER) program specifically to treat burnout in health care workers.^{1,3} With programs like WISER, we can hope to rebuild self-awareness and view both the doctor-patient relationship and the workplace in new and positive ways. Dr. Sexton notes as a species we are trained to focus on the negative, which was necessary for survival. The skills Dr. Sexton presents are evidence based, simply done, and portable. These skills include “three good things,” random acts of kindness, and an openness to awe and wonder.

on three good things each day for fourteen consecutive days has been shown to cause a significant drop in burnout, increase subjective well-being, work life balance and surprisingly, depression was ‘cut in half’ for people with at least mild depression.¹

Dr. Sexton offers this exercise as one to close out the day, typically within two hours of bedtime. He suggests recalling three good things that happened that day and reflecting on our feelings and what role we had in these good things. As participants, we can log and share these good things with others (anonymously) or simply keep the good things private to ourselves. Reading other peoples ‘good things’ can be transformative and inspiring.

For example, good things can be as simple as camaraderie in the workplace. My longtime paramedic colleague confessed to me a few years back of her struggle with PTSD and what now we would call Second Victim Syndrome. She is my mentor for a good chat and seeing good things. At the end of a patient handover prehospital to ED, we exchange “How are you?” and “How is your shift going?” “Sunshine and no rain”



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Three Good Things

Good things range from the personal or professional, ordinary or extraordinary. Good things abound even in the emergency department. The good things leave us with emotions — feelings of joy, peace, inspiration, and amusement to name a few. The good things deserve our notice and may hold the key for restoring meaning in our working lives. Reflecting

she says. While it may not always have been that way, she has knack for seeing good things and sharing her positivity with others. Even in the middle of the night, we can share a laugh together and gratitude and joy for our work and our friendship.



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Acts of Kindness

As for random acts of kindness in the emergency department, I have one colleague who never fails to bring me a bottle of water when he comes back from the Doctor's Lounge (I stay much more hydrated when he is working!). He recently shared with me that his kindness should not be considered altruistic, but seen for the self-serving act of keeping me from wandering off to find my own water. Nursing colleagues often assist caregivers with coffee or additional warm blankets for a cold patient. Techs and paramedics give directions to family members and may walk with them to rooms, often checking in to see if they need anything else. For the physician, kindness is important to see and promote, as patients important to receive, and as humans kindness is good for our heart. So, with Dr. Sexton's encouragement, these small acts are important connections to meaning; as he notes they remind us to tend and befriend and build relationships in medicine.⁴

Awe and Wonder

The last skill is the development of openness to awe and wonder. Through an "awe intervention," Dr. Sexton notes that you can create a sense of slowed down time, which offers a calming sensation and feeling of having more time available.^{2,7} These need not be necessarily "extraordinary," but just a memorable time or incident that reminds us of who and what we are and fosters connection to our sense of purpose or meaning. Dr. Sexton considers these skills important to emotional thriving.

One may ask where to find awe and wonder? Certainly in nature or listening to Neil DeGrasse Tyson discuss astrophysics. Other times it comes in the form of witnessing a colleague's accomplishment or great save. Recently upon arriving for my shift the overnight resident shared a great save with a patient who complained of chest pain with EKG changes and had an urgent cath with recognition of a coronary artery aneurysm. Awe started my day — much nicer than the "turn around while you have the chance" greeting, which I hear all too frequently and find emotionally draining.⁶

In summary, finding connection and staying connected to purpose is not static. The practice of looking for good things, performing, or recognizing random acts of kindness, and experiencing awe and wonder requires intention.^{3,5,8} As a group, we should begin to treat these skills like any other skill that we practice in the emergency department, a Continuing Medical Education for meaning in medicine, if you will. With the help of Dr. Sexton's tools and the support of ourselves and our colleagues in this pursuit, we can rekindle the flame that set us on the tumultuous path of becoming a physician in the first place. ●

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