Resilience and the Healthcare Student / Professional

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The importance of emotional resilience for staff and students in the ‘helping’ professions: developing an emotional curriculum

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Introduction
A resilient organisation is able to cope with and recover from the unexpected, and should maintain the ability to adapt to new demands. Organisational resilience is influenced by factors beyond the resilience of individuals, and is a property of the working environment. (By Jonathan Back).

Individual resilience involves behaviors, thoughts, and actions that promote personal wellbeing and mental health. People can develop the ability to withstand, adapt to, and recover from stress and adversity—and maintain or return to a state of mental health wellbeing—by using effective coping strategies. We call this individual resilience.
Stress flows into the bucket

If bucket overflows problems develop ‘snapping’

Vulnerability is shown by the size of the bucket

Good coping = tap working let the stress out
Bad coping = tap not working so water fills the bucket
Why is resilience particularly relevant in healthcare?

• 42% of the sample of a study of nurses described themselves as “burned out” Aitken et al. (2012)
• social workers have found higher levels of work-related stress and burnout than many other occupational groups (e.g. Lloyd, King and Chenoweth 2002; Johnson et al. 2005; Collins 2008)
• Burnout has been defined “as a syndrome of emotional exhaustion, depersonalisation, and reduced personal accomplishment that can occur among individuals who work with people in some capacity” (Maslach, Jackson and Leiter 1996, p. 4)
• It is generally considered to be a construct comprising three components: emotional exhaustion, depersonalisation, and reduced personal accomplishment, and is considered to be particularly prevalent among those working in people-oriented professions (Maslach, Schaufeli and Leiter 2001).
• Secondary trauma and compassion fatigue are commonly found among helping professionals (Adams, Boscarino and Figley 2006).
• Psychological distress has been associated with a wide range of stressors in helping professionals, both in relation to their role and the wider organisational context (e.g. Coyle et al. 2005; Jennings 2008).
• Managing situations of complexity and uncertainty, lack of control and interactions with service users that evoke strong emotional reactions, are considered to be particularly challenging (van Heutgen 2011).
Characteristics of resilient people:

- Social support network
- The ability to manage strong feelings and impulses
- Good problem-solving skills
- Feeling in control
- Asking for help and seeking resources
- Seeing yourself as resilient
- Coping with stress in healthy ways
- Helping others and finding positive meaning in life
Resilience in healthcare students

• High levels of work-related stress and burnout have been found in trainees as well as qualified helping professionals (Deary et al. 2003; Jack and Donnellan 2010; Kinman and Grant 2011).

• The training period can be more stressful than qualified practice (Tobin and Carson 1994).

• Conflicting demands of being a student and an emerging professional can be particularly distressing (Pearcey and Elliott 2004).

• Many students feel ill-prepared for the realities of practice, which can engender psychological and physical health problems (Collins 2008; Jimenez et al. 2010; Clements et al. 2013).

• Strong emotional reactions to placement experiences can also diminish self-confidence and perceptions of professional effectiveness, post-qualification, which can result in attrition (Jack and Donellan 2010).

• The stress experienced by students training for the helping professions is likely to be exacerbated by their reluctance to disclose that they are experiencing difficulties (Barlow and Hall 2007; Wilks and Spivey 2010).
Who is the biggest source of support for an elite athlete?
Who is the biggest source of stress for an elite athlete?
Burnt!

Safety zone – no change

Zone of optimal development
Those who educate helping professionals are responsible for creating positive learning environments to prepare their students for the realities and challenges of professional practice and ensure their sustained employability.
The following competencies are considered to be particularly important in enhancing resilience in students training for the helping professions and will be examined in more detail:

- reflective ability;
- emotional intelligence/literacy;
- social competencies;
- social support.
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Reflective practice is something most people first formally encounter at university. This may be reflecting on a patient case, or an elective, or other experience. However, what you may not have considered is that you have been subconsciously reflecting your whole life: thinking about and learning from past experiences to avoid things that did not work and to repeat things that did. **For example after tasting a food you do not like, you remember that experience, think about it, and when you next see that same food you know to avoid it.** In medicine it is one of the best approaches to convert theoretical knowledge into practice.
Barriers to reflection on placement

• Fear of being wrong

• Rabbit in headlights

• Not understanding what is meant by reflection

• Vulnerability

• Model that it’s OK to make mistakes / not know

• Offer other ways for student to reflect – informal / written etc

• Clarify the aim of the reflection and exactly what it is you are looking for

• Support through vulnerability without therapising!

So, what are some of the questions that you could ask / approaches you could take to support learning through reflection?
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... the ability to understand your emotions, the ability to listen to others and empathise with their emotions, and the ability to express emotions productively. To be emotionally literate is to be able to handle emotions in a way that improves your personal power and improves the quality of life around you. Emotional literacy improves relationships, creates loving possibilities between people, makes co-operative work possible, and facilitates the feeling of community. (Steiner and Perry 1997, p. 11).
What makes a student feel safe enough to talk to us?

• being open and honest themselves with us, also I was treated as an equal with my ideas and thoughts which made talking about how I felt much easier as I feared less what would be thought of me.

• Building a good rapport helped and them being open and honest, and being supportive if we do confide in them, keeping the channels of communication open and listening effectively

• Positivity Sandwiches!!!!

• I think they need to be open and approachable. Also not the kind of person who is easily offended and takes things personally because if I express a problem it will almost certainly not be personal. I think it also helps when an educator explicitly says to you that they want you to be honest and tell them whenever there is an issue and that they won't be personally hurt by it.

• I think how harsh they are with your mistakes makes a difference to you feeling comfortable with telling them stuff and feeling vulnerable. Also, if they're honest about their feelings, I'd feel comfortable with an educator who said things like "this used to make me so nervous as a student" or "I always used to struggle with this!"
• Encouraging, open, inclusive and welcoming! A smile and ‘well done’ goes a long way! If there are challenges or struggles address them and discuss them. Final report shouldn’t be a shock!!! The most inspiring educator I had allowed me to do things differently, discussed outcomes, supported me taking risks and was open to learning new approaches and questioning existing frameworks. Educators can be greenhouses or Japanese knotweed !!!

• To be made to feel like an equal and not back at school also to feel that no question is a daft question, for me personally sometimes things have to be explained a million times before it sinks in and it's helped for people to be patient with me

• Not being referred to as ‘the student’ and being treated as part of the team. Being listened too as well. Instead of assuming we did something for reason x and jumping on us, listen to why we acted in such a way first and then working out how the situation could be tackled differently.

So, what behaviours in someone else, make you feel comfortable to be honest about how you feel?
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...the demonstration of a strong sense of professional identity and self-assurance within a professional setting. The ability to understand and manage difficult situations, whether clinical or professional. Social competence also helps people to advocate for themselves and others in a skillful and productive manner – which is an intrinsic aspect of the helping role.
The Rescuer

Poor you! Let me help.
Enabler, pain reliever, keeps victim dependent

The Persecutor

It’s all your fault!
Critical, blaming, controlling, superior

The Victim

Poor me! Powerless, hopeless, stuck

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Support from lecturers, practice educators and mentors is vital to help students develop their academic, practical and emotional competencies. There is evidence that mutually supportive relationships with peers within educational settings can be particularly beneficial as they can help students to develop a “community of learning” which enhances their ability to cope with stress as well as developing their academic and practical skills (Kevern and Webb 2004).
Possible opportunities to provide support networks...

- Peer support groups (multi-disciplinary / online?)
- Link with new graduates
- Encourage discussion with course peers (note of caution)
- Remember that they (and you) are not alone
- Involve students in group / peer supervision in the workplace
- Model mutually supportive relationships – be mindful of the power imbalance.

So, what could you do, within your organisation to build support networks for students (or educators)?
Some tools to think about...

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Questions adapted from: Wellness Recovery Action Planning – daily maintenance plan

• What am I like when I’m well?
• What do I need to do every day to keep myself well?
• What do I need to do, but not necessarily every day to keep myself well?
• What are my signs that I’m struggling?
• How can I empty my stress glass / bucket?

Copeland, Mary Ellen (2012). *Facilitator Training Manual: Mental Health Recovery Including WRAP*
Focus on controlling the controllables....

(No reference for this, but I’m pretty sure it wasn’t the Dalai Lama XIV, because I have seen it attributed to lots of different people)
Every time you feel yourself getting pulled into other people's nonsense, repeat these words:

NOT MY CIRCUS,

NOT MY MONKEYS.

~ Polish Proverb
When you're sad, just look how happy this man is with his onion.
Interesting resources

• Resilience Game

• The importance of emotional resilience for staff and students in the ‘helping’ professions: developing an emotional curriculum
References:


