

Physician Self Care

The BASICS: Part VI — “S” is for Spirituality

by Michael Kaufmann, MD
OMA Physician Health Program



The following article is the final installment in a six-part series on the fundamental principles of physician self-care. The “BASICS” series offers practical suggestions for stress management, improved health and well-being, and building resilience.*

Spirituality — the neglected domain

In 2003, I had the good fortune of being invited to present at the annual meeting of the Royal Australian College of Surgeons in Brisbane. The lecture was entitled “Surgeons are People, Too,” and I discussed the usual problems experienced by doctors, and many of the elements of stress management and resilience covered in the BASICS series of articles.

Taking the podium, I looked at my audience, and, to my surprise and pleasure, saw that the room was full. Beyond full, actually, as delegates were standing at the back of the room, in the doorway, and in the corridor outside.

Before the presentation, and while planning the content, I was concerned that surgeons — professionals very focused upon the art and science of their craft — would have little interest in the “soft” nature of my talk. Turns out I couldn’t have been more mistaken. They listened attentively, asked questions, and offered comments that revealed their interest in their own well-being.

But when I introduced the topic of

spirituality, they became quiet. It wasn’t the silence of discomfort or dismissal; it was more like private thirst transformed into a collective hush. I had entered into the domain of the soul, terrain seldom knowingly navigated by doctors in the context of their day-to-day work.

This is my experience nearly every time I present the idea that an exploration of one’s spiritual understanding and practice is a vital component of personal resilience.

What is spirituality?

I choose to adopt a broad-based concept that encompasses both secular and religious perspectives and can be widely accepted.¹ Thought of this way, spirituality is a complex and multidimensional aspect of human experience.

Philosophical aspects deal with finding meaning and purpose in life. Experiential, emotional and social aspects relate to feelings of connectedness, love, and caring for others, inner peace and equanimity.

The transcendent component of spirituality relates to the awareness of a universal life force, a guiding

“power greater than ourselves,” God or a cosmic consciousness of our understanding.

Spirituality is not purely religion. But for many, spiritual benefits, practices and comforts are obtained through religious affiliation, ritual and faith.

Secular life is rich with transcendent opportunities as well, as many find spiritual fulfilment in art, music, nature, meditation and philosophy, to name a few.

In his book, *Spirituality and the Healthy Mind*, Marc Galanter depicts spirituality as a large tent that can house diverse views of transcendence with room enough for the secular and the religious.²

Spirituality and resilience

There is evidence, summarized in various reviews, that spirituality and religious commitment is associated with positive physical and mental health.³

Attitudes and beliefs influenced by spirituality also provide a framework for understanding adversity and making sense of tragedy, as well as having a protective effect on physical

and emotional well-being among healthy individuals.⁴

Two examples that have been studied are acceptance and altruism, both of which can be said to have aspects that are spiritual in nature.⁴

Many hardy individuals cite acceptance as an important contributor in their ability to tolerate stressful situations and circumstances. Not to be mistaken for resignation (and its attendant helplessness), acceptance of life's difficulties and personal challenges fosters willingness to seek appropriate help, support, and creative solutions, including connection to others and the transcendent. This is a fundamental concept in 12-step recovery programs widely accepted to be spiritual in nature (but not religious, at least by most who subscribe to them.)

Altruism, the philosophy and practice of helping others, has been associated with both successful adaptation to stressful environments and

the ability to find meaning in illness or tragedy. An example is the "survivor mission," when the individual turns personal adversity into activism, or the practice of helping like-affected others. Mothers Against Drunk Driving (MADD) is an example of the first; the mission of recovering alcoholics in AA to "carry the message" (Step 12) is an example of the second.

And, in a recently published study that looked at the competencies of physicians who were identified as having a resilient approach to their personal and professional lives, spirituality was cited as an important contributor.⁵ In this article, such qualities as self-awareness, acceptance, and a sense of contribution in their work are specifically mentioned.

Spiritual practices that enhance resilience

- *Be humble* — It's hard to imagine accessing true spirituality without humility. And humility can be diffi-

cult for some doctors — especially those who have been conditioned with "white coat hubris" to see themselves as separate from others, fiercely independent, arrogantly eschewing new ideas and values that don't conform to their world view so influenced by medical training.

Humility permits a different perspective of self — one that acknowledges vulnerability, interdependence with others and with a universal power greater than ourselves.

A humble mind is an open mind. And an open mind is one that is willing to explore and adopt new ideas, attitudes and practices.

- *Give of yourself* — Medical practice is a form of giving, of course, but also our livelihood. Donate medical services. Join a community board. Become a big brother or sister. Coach a sports team. Give for its own sake.

- *Be mindful* — Mindfulness refers to

a meditation practice that cultivates present moment awareness.⁶ Meditation might be thought of as a form of deep, attentive listening. Mindfulness meditation teaches how to remain focused in the present, alert, aware and unhurried.

Some meditative techniques enable physical relaxation and a clear and peaceful state of mind. Meditation practice fosters mental discipline and improved powers of concentration that can tame the wild horse of unbridled thought. Meditation helps us to connect to the core of equanimity unaffected by personal problems that resides within each of us.

Mindfulness meditation training is popular and readily available.

• *Pray* — Prayer is communication. Prayer is a form of reminder. Prayer is a request for help. When we repeat a prayer, we are guided by its words and intent.

An example is the Serenity Prayer, adapted from the original attributed to theologian Reinhold Niebuhr, so often repeated at Alcoholics Anonymous and other 12-step meetings:

“God, grant me the serenity to accept the things I cannot change, the courage to change the things I can, and the wisdom to know the difference.”

Prayer can also be an expression of gratitude, a pause to quietly say “thank you.”

• *Walk on uneven ground* — I think that most of us crave connection to the natural world. I suppose God exists on the frenzied sidewalks and high between the skyscrapers of our cities, but somehow it’s easier to appreciate nature’s soothing message while walking down a forest path, in a country meadow, or along the ocean shore.

• *Join a spiritual/religious community* — Tolerant, respectful religious communities connect people with common spiritual ideas and practices. They provide social support, a sense of purpose and belonging, and, of course, a means to understand and communicate with the God of their understanding.

Find a community that supports

values that matter to you. Join it and get involved.

• *Play* — Imagine the many ways you can and have played. Remember the exhilaration of downhill skiing, the satisfaction of smacking a baseball into the outfield, joking with your friends on the golf course. I think play is a form of spiritual experience. Make time to laugh and have fun.

• *Enjoy music* — Music carries messages of meaning to us through lyric, tune and rhythm. Music can soothe or invigorate. Music bypasses our conscious, rational thought to reach into memory and the stirrings of our heart. Listen to music. Make music.

• *Read* — There are many ways to enrich our lives through reading. Along with the scripture of sacred texts, contemplative literature and poetry open the door to reflection and philosophical thought that nourish the spirit.

• *Create* — Write a story, grow a garden, build a cabinet, compose a song. Paint a picture or cook a meal. Rejoice in your personal creativity — it’s an expression of the soul, a gift.

• *See life through the lens of awe and wonder* — Other people do. I have heard Rachel Naomi Remen, American physician and author of *Kitchen Table Wisdom* and other works, suggest that we view our work as a novelist or film producer would, replete with the richness and human drama that service through medical practice affords.

Every day we join with our patients, listen to their stories, offer them our empathy and understanding, along with our skill. This is one way to find meaning in our work again, to recapture the soul of medicine.⁷

Whether we are aware of it or not, there is healing — for our patients, and ourselves.

Conclusion

This article, and the five preceding articles in the BASICS series, offers

Physician Health

but a few strategies that doctors can use to enhance their personal resilience.

We have discussed attending to our primary physiological needs, such as nutritious eating and getting enough rest, and examined some ways to confront perfectionism and other attitudes and thinking styles that hold us back.

We have been reminded about the social aspects of resilience involving family, friends and community. We reviewed using our intellectual abilities to make good occupational choices and to understand and cope with change in our lives.

And, finally, we explored some ideas about spirituality, its importance to our resilience, sense of wholeness, and how leading a more spiritual life can remind us of the things we love about being a doctor.

Even in this brief series of articles, many suggestions have been offered. Most are likely viewed as common sense, some already utilized by readers. Even so, busy doctors often lament that there isn't enough time or opportunity in their lives to implement all, or even many, of these suggestions. Patients, after all, come first. However, maybe patients don't come first — maybe our health is equally as important as that of our patients.

So, leaving the last word to Wayne and Mary Sotile, maybe all we have to do is a little. One or two doable stress-managing, resilience-enhancing choices per day might be plenty. "Do sweat the small stuff," the Sotiles say. Even small changes can have large rewards.⁸

This is how we take responsibility for ourselves, restore our integrity, heal together, and celebrate the many rewards of being a doctor and a whole person in our demanding world.

OMR

References

1. Anandarajah G, Hight E. Spirituality and medical practice: using the HOPE questions as a practical tool for spiritual assessment. *Am Fam Physician*. 2001 Jan 1;63(1):81-9. Available from: <http://www.aafp.org/afp/20010101/81.pdf>. Accessed: 2008 Oct 21.

2. Galanter M. *Spirituality and the Healthy Mind: Science, Therapy, and the Need for Personal Meaning*. New York, NY: Oxford University Press; 2005. p. 11.

3. O'Reilly ML. Spirituality and mental health clients. *J Psychosoc Nurs Ment Health Serv*. 2004 Jul;42(7):44-53.

4. Southwick SM, Vythilingam M, Charney DS. The psychobiology of depression and resilience to stress: implications for prevention and treatment. *Annu Rev Clin Psychol*. 2005;1:255-91.

5. Jensen PM, Trollope-Kumar K, Waters H, Everson J. Building physician resilience. *Can Fam Physician*. 2008 May;54(5):722-9. Available from: <http://www.cfp.ca/cgi/reprint/54/5/722.pdf>. Accessed: 2008 Oct 21.

6. Ludwig DS, Kabat-Zinn J. Mindfulness in medicine. *JAMA*. 2008 Sep 17;300(11):1350-2.

7. Remen RN. Recapturing the soul of medicine: physicians need to reclaim meaning in their working lives. *West J Med*. 2001 Jan;174(1):

4-5. Available from: <http://www.pubmedcentral.nih.gov/picrender.fcgi?artid=1071213&blobtype=pdf>. Accessed: 2008 Oct 21.

8. Sotile WM, Sotile MO. *The Resilient Physician: Effective Emotional Management for Doctors and Their Medical Organizations*. Chicago, IL: American Medical Association; 2002. p. 85.

* To view PDF files of parts one through five of this series — entitled "B is for Body," "A is for Affect," "S is for Social," "I is for Intellect," and "C is for Community," — visit the Physician Health Program website (<http://www.phpoma.org/php/www/Articles/basics.html>).

Dr. Kaufmann, CCFP, FCFP, a former family practitioner, is medical director of the OMA Physician Health Program. Dr. Kaufmann is certified in addiction medicine by the American Society of Addiction Medicine. To obtain further information on the Physician Health Program, contact the confidential toll-free line at 1-800-851-6606, or visit the PHP website (www.phpoma.org).