



Own Oxygen Mask First

The Psychological Strategy for Self-Care for Healthcare Professionals

Abstract

Health and self-care are not complicated, they just require some common-sense learning and applying that learning to us. This article discusses the principles of self-care and puts the case forward for paying attention to personal health and well-being as essential for delivering on the aspiration of providing excellent care to patients.

Let's remember, as they say at the start of the flight, to put our own oxygen mask first before helping the person next to us.

Keywords

Healthcare professionals, self-care, patient safety, healthcare efficiency

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Introduction

Doctors are dedicated to their patients. The UK General Medical Council (GMC) advises us to 'make the care of your patient your first concern'.¹ Medicine is a wonderful calling, and we are privileged to help people with their illnesses and lives. Most doctors are very skilled at (metaphorically) giving oxygen to their patients – but may often be in a state of personal partial hypoxia. To use an analogy: when we drive our cars on an important journey, we make sure the fuel is topped up beforehand. After all, to use irony, there is no convenient place on a major motorway to run out of fuel, break down or worse have an accident.

Continuing this metaphor, doctors learn a great deal about car breakdowns and accidents – but learn relatively little about how to prevent them. We learn a lot about disease and little about the key points in promoting health. We ignore our own fuel gauge and the red lights on the dashboard - because there is a curriculum gap in personal health promotion and prevention of disease.

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Why do we not appreciate this?

Well, ask a hundred people in the street how they are, and the answer is 'Fine' (which in my opinion stands for fearful, insecure, neurotic and emotionally imbalanced)– the denial mechanism. Ask a hundred doctors, mothers, managers, or health professionals how they are - and the answer is silence – one's own health is not an item on the to-do list – so gets ignored by being too busy – a strategy of displacement. These two psychological D's (denial and displacement) may lead us into Distress, Despair, Disillusionment, Exhaustion, and maybe Debt, Divorce, Discipline and the big three occupational health issues for doctors – Drink, Drugs and Depression. Tragically Death may also be an outcome.^{2p8}

If we are too busy to reflect, gain insight and look after our own health and inner mindfulness, then we cease to be Reflective Human Beings (RHB) (a core aspect of who we are) balanced with part-time Task-Driven Human Doings – and become full-time TDHDs – losing insight in the process.

Burnout

In *Stop Physician Burnout*³ Dike Drummond shows us the simple fact that *"You can't give out what you haven't got"*. We need to keep our three energy accounts topped up – the accounts of physical, emotional, and spiritual energy. The result of empty energy accounts is inevitable burnout at some point – described by Christina Maslach as a triad of exhaustion, depersonalisation, and lack of efficacy – or simply exhaustion, compassion fatigue and cynicism, and 'What's the use?'. The pattern in women doctors tends to be all three, whereas men often lack the third, still believing that they are doing good work (despite exhaustion and cynicism)⁴

Conditioning

Personality conditioning happens in medical training and can sabotage personal health. In *'Stop Physician Burnout'* Dike Drummond lists five traits as Workaholic, Superhero, Emotion-free, Lone Ranger and Perfectionist. Initially, these may be useful skill sets – but doctors fail to put them aside when the job is finished (as a mechanic would put down their tools) – they continue to use them, and as Dike says, often become them. He also notes the two 'Prime Directive' attitudes that pervade medicine:

1. The patient comes first.
2. Never show weakness.

The first directive is recognizable as Displacement, and the second as Denial ^{2p8}

Drummond summarises the factors that contribute to Doctors' Burnout as the stress of practising medicine, the specific stresses to our own work role, the work-life balance including refreshing and recharging our health account, and the conditioning of medical education.

Drummond has a wonderfully direct approach to Burnout Prevention (avoiding the doctors' D's), which reminds us of the 1960s pop song title 'Accentuate the Positive, Eliminate the Negative'.

1. Deal with the inner critic (who otherwise sabotages us)
2. Realize that burnout is not a problem (problems have solutions) – it is a dilemma, which needs managing systematically.
3. Avoid problem-solving traps (Give Up, Play Victim, or Look for the Magic Pill)
4. Change your perspective – doctors are trained to see negatives and so often, in life outside medicine, fail to appreciate positives – focus on the positive
5. Stop being a superhero, build capability one step at a time.
6. Celebrate all your successes – a culture of appreciation and gratitude, both inward and outward makes for a better life.

Hierarchy of Needs

So, we have a problem! Fortunately, the answers are not difficult. Let's look at some basics. If we attend to the base of the pyramid of Maslow's Hierarchy of Needs, then we have a chance to restore health. High-quality refreshing sleep is key. The Association of Anaesthetists take fatigue⁵ particularly seriously – the rest of us should take note! And hydration and nutrition are vital – how often during the day do we ignore our own bodies' needs? Yet ignoring them automatically evokes the autonomic stress response – let alone the response being triggered by many other potential threats, demands and stressors.

Understanding the Mammalian Autonomic Nervous System is useful pp³⁵⁻³⁹. All mammals share this 'engine management system' The parasympathetic component relates to being and stillness – Rest, Digest, Chill, Repair, Tend and Befriend when we feel safe, Freeze when unsafe. The sympathetic component relates to Action – Curiosity and Drive when we feel safe, Fight or Flight when unsafe.⁶ All mammals except humans seem to spend most of the day on parasympathetic calm. Adrenaline (sympathetic) is the stress hormone priming us for action. It gives raised blood pressure, rapid shallow upper chest breathing, excitement changing to anxiety then irritability, dry mouth, sweaty palms, and a target-focused approach.

Just changing our breathing pattern back to slow regular calming diaphragmatic breathing can entrain parasympathetic calm, lowered blood pressure, a feeling of inner peace and greater situational awareness. So why would we not do this? Many find it worthwhile to find short moments of calm frequently throughout the day, simply by putting their feet flat on the floor, allowing their spine to be comfortable, and taking three slow regular calming diaphragmatic breaths. Why not give it a try? ^{2 p146}

Psychological Well-being

Turning to psychological wellbeing, one useful lens on how life works is through an understanding of the Drama Triangle ^{7,8} The model flows from an understanding of Transactional Analysis⁹. In TA, there are three ego states: the Parental one where thoughts and behaviour are modelled on parents, the child one where our thoughts, feelings and behaviours can arise from our subconscious to be replayed, and the adult rational sensible responses.

- Parents can be wise and guiding – or bossy, critical and dominating.
- Adult remains secure in sensible responses, whilst.
- child can be free and creative, or whiny and manipulative.

Adult-to-adult relationships share equal power, whilst in parent-child the power is unequal. Polarised, the roles can lead is into the three roles of rescuer, persecutor, and victim.

Every dysfunctional interaction takes place around the drama triangle.

It involves blocked or distorted communication based on fear, judgment, and insecurity. Whenever you feel disempowered, guilty, stuck, resentful, blamed, helpless, trapped, dependent, misunderstood, bewildered, betrayed, controlled, manipulated, or abused, you are in a drama triangle - which might involve two, three or more people. At the top of the triangle are the one-up positions (parent), while at the bottom is the one-down position (child). Although many people have a familiar position, the roles can rotate with lightning speed, playing all the toxic games of co-dependency. There are no winners in a drama triangle. Everyone loses and feels like a victim - until someone stops playing the game.

The Parental roles are Persecutor (blame everyone else) and Rescuer (make things better), whilst the Child role is Victim (poor me), each of which stems from fears and insecurity. Resolving the drama triangle is lifelong learning for many of us. This is relatively easy once we understand the roles, their weaknesses and how to grow beyond them^{2pp78-81}. An appreciation of the Five

Agreements from South American wisdom is also useful ^{2pp87-90}. These are Be Impeccable with your work, Take nothing personally, Make no assumptions, Just do your best, and Be sceptical, but learn to listen

Coping with Change

The third topic that many find useful is coping with change and loss, using the Emotional Logic system¹⁰. Life is about connection and growth. Having a setback or disappointment causes a loss reaction of shock. We try to adjust to the changing circumstances by recognising the loss, trying to prevent the loss, and then either recovering the loss or letting it go. In the process, we transit the Emotional Stepping Stones towards growth and reconnection. These are shock, Denial, Anger, Guilt, Bargaining, Depression (not the clinical state, but the stepping stone) and Letting Go. An understanding of the useful purposes of each of these, and the system of Emotional Logic can help us grow and mature. In resolving stuck issues, we release energy to help us grow into a healthier state.

In summary, Health and Self Care is not complicated, it just requires some common-sense learning and applying that learning to us. Let's remember, as they say at the start of the flight, to put our own oxygen mask first before helping the person next to us. Good Luck and Go Well!

Resources

- www.bma.org.uk/advice-and-support/your-wellbeing
- www.practitionerhealth.nhs.uk
- www.healthandself.care

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