



## Introduction to Wellness Topics: A Quick Hit Program

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Finding the time to insert wellness curriculum into our crowded clinical and educational schedules can be a bit challenging. However, it's widely accepted that education related to wellness topics in all physicians, including trainees and faculty, is critical in today's medical climate where burnout is reaching an all-time high,<sup>1</sup> and the risk of suicide amongst physicians is climbing.<sup>2,3</sup>

We have chosen to “steal” the first 15 minutes from our monthly Morbidity and Mortality rounds to begin the session with a brief review of wellness related topics. The goal is to introduce the basic concept related to the topic of the month, with some background and understanding of how it supports well-being. We also provide further reading and references to allow our faculty and trainees to explore the topic more fully as desired.

Wellbeing drivers include the workplace culture, the daily work environment, and personal resilience ([Stanford WellMD Model](#))<sup>4</sup>, but only personal resilience has multiple elements within the control of our individual practitioners. Because maintaining a high level of resilience is critical in weathering the ups and downs of unexpected stressors, we chose to focus primarily on topics related to sustaining and building personal resilience.



Key building blocks of personal resilience include a healthy body – sleep, nutrition, exercise, and a healthy mind/emotional state – maintaining strong social connections, developing ability to focus the mind, and developing personal fulfillment. Thus, we chose these as our primary targets for our Quick Hit education. Below is a list of the topics covered to date in our program with those planned for the rest of the year.

Healthy Mind	Healthy Body
Self-compassion and Mindfulness Ikigai: Renewing Purpose and Direction Gratitude and Appreciation Meaningful Connection: Comradery Groups Reframing: seeing the good in the hard Micromeditation: reducing stress	Nutrition and Hydration Exercise as a daily habit Sleep and Rest

Response to the program has been quite positive, with spontaneous feedback from division members thankful for the education on the topics, and appreciative of the insights gained. Wellness surveys done annually by the School of Medicine will be tracked to understand any impact the variety of programs currently may have on our staff. In addition, surveys are planned to get more immediate feedback on the topics included in our “Wellness Corner” and to query the group on desires for other specific areas to be covered.

### References:

1. Shanafelt TD, West CP, Sinsky C, et al. Changes in burnout and satisfaction with work-life integration in physicians and the general US working population between 2011 and 2017. *Mayo Clin Proc.* 2019; 9: 1681- 1694.
2. Schernhammer ES, Colditz GA. Suicide rates among physicians: a quantitative and gender assessment (meta-analysis). *Am J Psychiatry.* 2004;161: 2295–2302.
3. Gold KJ, Sen A, Schwenk TL. Details on suicide among us physicians: data from the national violent death reporting system. *Gen Hosp Psychiatry.* 2013;35(1):45-49.
4. Stanford WellMD model. <https://wellmd.stanford.edu/about/model-external.html>