For doctors hit hard by COVID-19 stress, there are tools to help

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The COVID-19 pandemic's emotionally pulverizing impact on physicians and the health-professional workforce has exacerbated the mental health and burnout crisis within health care and demands action.

Physician Suicide Awareness Day is Sept. 17, but each day of the year calls for everyone to do whatever is possible to keep healers safe from harm.


Among other things, S. 4349/H.R. 8094 would establish:

- Grants for training medical students, residents or health professionals in strategies to reduce and prevent suicide, burnout, mental health conditions and substance-use disorders.
- Grants for health professionals to help create and disseminate evidence-based strategies to reduce burnout and the associated secondary mental health conditions related to job stress.
- A national campaign to encourage health professionals to prioritize their mental health and use available mental and behavioral health services.
- Grants for employee education and peer-support programming.

Watch this “AMA Moving Medicine” interview with Corey and Jennifer Feist, founders of the Dr. Lorna Breen Heroes’ Foundation. The foundation also launched a website to promote National Physician Suicide Awareness Day.

The AMA also has developed engaging, evidence-based CME to help educate physicians, residents and medical students assess the risk factors and warning signs for suicidal ideation or behavior. Meanwhile, an AMA STEPS Forward™ toolkit details effective prevention strategies to identify at-risk physicians and facilitate access to appropriate care.

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Here is a collection of news articles that detail other steps the AMA is taking to prevent suicide among doctors and the resources that individuals and organizations can use to help save lives.

1. **Now’s the time to have a difficult talk about physician suicide**

   As physicians, we are well-conditioned to deliver difficult truths to our patients whenever the situation demands it. We are not as comfortable accepting such truths about ourselves, even when we know that physicians can suffer from the same physical and emotional ailments that affect our patients—including depression and suicide. Learn more in Leadership Viewpoints column by AMA Immediate Past President Susan R. Bailey, MD.

2. **Amid COVID-19 strain on physicians, 5 steps to build peer support**

   The availability of a peer support program is an essential component of creating a change in the culture of an organization, according to the AMA STEPS Forward™ toolkit, “Peer Support Programs for Physicians.” This free online toolkit provides a list of key steps to complete that are the building blocks of a peer-support program.

3. **Silos must be broken to help health care’s exhausted heroes**

   The AMA has joined the American Nurses Foundation, American Hospital Association and Schwartz Center for Compassionate Healthcare for the All In: WellBeing First for Healthcare campaign. It is a call to action from #FirstRespondersFirst and the Dr. Lorna Breen Heroes’ Foundation to prioritize front-line worker well-being and mental health. Learn what 200 organizations and individuals are doing as part in the effort.

4. **Open conversations help doctors handle COVID-19’s mental stressors**


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With the COVID-19 pandemic came an increased focus on mental health and resiliency of physicians and other health professionals. For Atlantic Health System—a member of the AMA Health System Program—that meant spearheading work to help physicians endure the stress caused by the pandemic through debrief style sessions that embrace peer support and the impact of leadership.

5 How to identify a stress injury in a physician colleague

Perhaps you know a physician colleague who has pulled back from hobbies. Who is not sleeping well. The physician who is usually gregarious and telling stories in the office or in the doctors' lounge suddenly is mum. The easygoing person becomes cantankerous. Or maybe the quiet one becomes boisterous. Perhaps that doctor is you. Learn the signs of stress injury—a severe and persistent distress or loss of ability to function caused by damage after exposure to the overwhelming stressors of burnout, trauma, loss or moral injury.

6 Clearing up confusion on physician burnout and depression

It is important to differentiate between physician burnout and depression. While burnout has often been misconstrued to be directly related to depression and suicidal ideation, that is not the case. Depression, not burnout, is the key driver of suicidal ideation among doctors. Yet confusion about these critical distinctions remains, even among some physicians. Learn more in this in-depth Q&A with Christine Sinsky, MD, the AMA’s vice president of professional satisfaction.

7 When addressing doctors’ well-being first ask, “How are you?”

To bring physician well-being in focus during these unprecedented times, AMA member Lanny F. Wilson, MD, has found that the simple act of asking, “How are you doing?” can help. It’s about “asking intentionally and giving the other person time to answer
thoughtfully,” said Dr. Wilson, an ob-gyn and chair of the Physician Well-being Program at Amita Health in Hinsdale, Illinois.

Two other AMA STEPS Forward toolkits also offer great help: “Physician Suicide and Support: Identify and Support At-Risk Physicians,” and “Stress First Aid for Health Care Professionals: Recognize and Respond Early to Stress Injuries.”

The AMA also has two free surveys to help health care organizations monitor the impact COVID-19 has on their workforce during this pandemic. The surveys can be used to track trends in stress levels, identify specific drivers of stress, and develop supportive infrastructures based on these drivers. Organizations that use the surveys will receive free-of-charge support from the AMA in launching the surveys and access to data through an easy-to-use reporting dashboard.