How physicians, health systems can cut stigma on seeking help

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With a new year comes more opportunities for change, especially to reduce physician burnout and improve well-being. Many people have already started to reprioritize what they want to be doing with their lives.

But for Mark Greenawald, MD, a family physician at Carilion Clinic in Roanoke, Virginia, the hope is that physicians will start to push back against some of the things they have been tolerating for a long time. This means creating better environments and cultures to decrease the stigma around seeking help so that physicians can thrive.

“What we’re starting to see more of is that help-seeking behavior where people are starting to say, ‘I do need help.’ And we’re starting to create a culture where it's safer to do that,” said Dr. Greenawald.

He took time to talk with the AMA about how health systems and physicians can decrease the stigma associated with help-seeking. Listen to more of this conversation with Dr. Greenawald on Apple Podcasts, Spotify or anywhere podcasts are available.

Share your burnout stories

When Dr. Greenawald has the opportunity, he shares his burnout and distress stories with other physicians.

“My first foray into seeking help—to the level of professional help—came after I had a very tragic obstetrical patient who died in labor, and the baby was neurologically devastated,” he said. “And it took me an entire year of silent suffering before my wife finally said, ‘Enough. You can't continue in the way that you are right now. This is no longer OK.’” Dr. Greenawald visited a therapist and “she
gave me my life back again,” he said. “I was able to realize that I lost a year of my life when I was a father of three young children, when I was a husband, when I was trying to take care of a busy medical practice. I lost that year because emotionally I was not present for most of it.” “I don't want that to happen to anybody else ... because we know it’s happening right now and it’s tragic,” he said, noting that it’s key “to tell our stories—particularly for those who are in leadership positions, who are looked upon as opinion leaders—and be able to say it’s okay to reach out and seek help.”

Committed to making physician burnout a thing of the past, the AMA has studied, and is currently addressing issues causing and fueling physician burnout—including time constraints, technology and regulations—to better understand and reduce the challenges physicians face. By focusing on factors causing burnout at the system-level, the AMA assesses an organization’s well-being and offers guidance and targeted solutions to support physician well-being and satisfaction.

**Turn to peer support**

One thing that hasn’t changed during the COVID-19 pandemic is the need for peer support. The need has only become more urgent.

Peer support is often about “reaching out when something bad has happened, and so it’s a reactive way of peer support,” said Dr. Greenawald. “In that model, there’s somebody who is the helper and somebody who is the helped, if you will.”

“What I have started thinking more and more about is what does peer support look like beyond that?” he said. “Rather than just thinking about it as—I’m going to reach out when you need help—I’m going to be reaching out all the time. And I’m going to be looking for opportunities not just to help you, but to build you up.”

That way, “hopefully, I’m increasing your resistance to some of the bad things that can come along—some of the stressors that can come along the way,” said Dr. Greenawald.

Read about how a peer-support program strives to ease distress during pandemic.

**Connect with colleagues**


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Peer support commonly consists of helping a colleague who is in crisis. But it also consists of peer-to-peer support, which means “buddying up in different groups, different specialties,” said Dr. Greenawald. It is about saying, “no one should care alone.”

That means “making sure that you’re traveling that journey with a buddy” as well as a mentor, he said. “So having folks who we are looking to not just mentor us in terms of our professional career, but in terms of our professional life.”