

## **Filling Your Cup: Safe Spaces**

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May is Mental Health Awareness month. I read an op-ed in the *New York Times* by Dr. Seema Jilani, a pediatrician and Fulbright Scholar, which focused on how physicians feel uncomfortable disclosing mental health concerns. Mental wellness is ridden with stigma and is considered taboo amongst physicians. During my medical education and training, many of us suffered in silence. We were not given that safe space to share what we felt we witnessed a patient passing away or were verbally belittled.

Now, medical institutions are implementing wellness programs and resources. However, it is important to check in with yourself daily. Physician wellness is paramount to patient wellness. Physicians historically make terrible patients and are in

a profession which prides itself on putting the needs of others first. Dr. Jilani reported that in 2017, 40% of physicians are afraid to mention to their medical boards whether they receive mental health treatment. In 2016, female physicians were aware they would benefit from mental health support, but were reluctant to seek care due to fear of repercussions from the medical board.

An important aspect of having a regular wellness program is creating a safe space to express emotions after a sentinel event, such as loss of a patient or a hostile encounter at work. On the award-winning television show, “The Pitt”, we observe the experiences of a healthcare team working in a metropolitan emergency department. When a patient does not survive treatment, the team chooses a safe space and gets to debrief, with a focus on emotions and honoring each person, including the patient who has passed away, the team members involved in care. There is a swift deviation from the traditional M&M, when the resident caring for a patient with an unexpected outcome was essentially in a firing range.

It is important to create a safe space in the workstation and have these debrief sessions as a group. Physicians and other healthcare team members carry the burdens of secondary trauma, and a safe space can give a place to leave these burdens. There can be a facilitator, usually the most attending physician, who guides the team to address the roses and thorns, so to speak. Everyone should have an opportunity to discuss what feelings and emotions resulted from a traumatic event.

Safe spaces should be a judgement-free zone. The focus needs to be on healing from a challenging event and moving forward. It is also helpful to have a colleague

who is a “safe space” and can provide support if needed. For those who are not comfortable sharing with a colleague, larger institutions have peer support programs. For example, Keck School of Medicine at USC has a program called Care for the Caregiver. Members of the healthcare team who have received training serve as peer supporters and are deployed when a difficult event can have lasting emotional consequences.

It is important to recognize that working in healthcare is difficult. As pediatricians, we are confronted with child maltreatment, children being diagnosed with conditions that are life threatening, and parents who are grieving. We receive a plethora of emotions from all directions, which subsequently become part of us. During these times, it is important to recognize when we are in a dark place. The light exists within us, and sometimes, we just need someone to help us reignite it.