



Reflective Practice | WONCA APAC, October 20, 2018 | Jillian Benson

In discussing reflective practice, we must take into consideration the following:

We (and our patients) are moving from precontemplation, to contemplation, to planning, to action to maintenance. It is important to know that we are not going to learn everything in one workshop session. We need to deliberately practice what we have learned and work out how it will best fit with our own consulting style and with our own patients.

This means that sometimes we won't quite get it right. It's important that we don't give up but that we use every "failure" as a learning experience.

As Thomas Edison said – "I didn't fail, I just found 10,000 ways a light bulb didn't work."

Beginning with mindset:

A fixed mindset assumes that:

- Intelligence and talents static
- Avoids challenges
- Sees effort as useless
- Ignores feedback
- Disregards new information or approaches

A growth mindset assumes that:

- Intelligence and talents can be developed
- Embraces challenges
- Sees effort as the path to success
- Learns from feedback
- Open to new information and approaches

Learning and creating involve challenges and "failures:"

Self-criticism shifts the brain into a state of self-inhibition and self-punishment that leaves you feeling threatened and demoralised and causes you to disengage from your goals, puts the brakes on you taking action and leaves you stuck in a cycle of rumination, procrastination and self-loathing. Self-compassion on the other hand is when we treat ourselves like a wise and kind friend.

Reflection:

It is important to reflect on the things that went right as well as the things that didn't go so well. The stages of reflecting include:

- What, where, and who—the situation
- How did it make you feel—your emotional state
- Why did it happen—making sense of the situation
- Could you have done anything differently—critical review and development of insight
- What will you do differently in the future—how will this change your practice
- Re-enforcement—what happens when you put this into practice

We, and our patients, are often living with uncertainty.

- As GPs, we know that it is important to be comfortable with a moderate degree of uncertainty.
- Patients don't always fit into neat clinical boxes.
- This is particularly difficult if patients present with physical symptoms of their mental health problems.
- Remember that people with depression might also stop taking their diabetes or thyroid medication and so sometimes physical diseases can worsen with mental health issues.
- Uncertainty is best dealt with by shared decision-making, patient-centred health care and good communication.
- Always important to ensure safety.
- Good listening and communication skills always important.

Managing Difficult Patients:

As many as 15 percent of patient encounters are rated as “difficult.” Difficulty could arise from patient factors, doctor factors, system factors, cultural factors, political factors, and relaying bad news.

Patient factors

- Angry, defensive, frightened or resistant patients
- Manipulative patients
- Somatising patients
- Grieving patients
- Lonely or dependent patients

Doctor factors

- Angry or defensive doctors
- Fatigued or harried doctors
- Dogmatic or arrogant doctors

Situational factors

- Language or literacy issues
- Multiple people in the room
- Breaking bad news
- Environmental issues

Burnout:

Approximately 25 percent of doctors have thoughts of suicide in their lifetime, 10 percent in the last 12 months. These numbers are higher than the rest of the population at 13 percent.

Burnout has three dimensions

- Low personal accomplishment
- Emotional exhaustion
- Depersonalisation

Burnout leads to difficulty concentrating at work, increased suicidal ideation, less empathy and engagement, more medical errors. Its causes include:

- Poor mental health
- High work-life conflict
- Low job satisfaction
- High stress
- Long working hours
- Low emotional intelligence
- Low satisfaction with income

Five Ways to Wellbeing:

<https://www.mind.org.uk/workplace/mental-health-at-work/taking-care-of-yourself/five-ways-to-wellbeing/>



- Awareness, balance and connection
- Connect – Five people
- Social support and good relationships build resilience, better cognitive functioning, better health, more learning behaviours
- Be active – exercise
- Give – Giving has been shown to be “healthier” than receiving
- Keep learning – Having meaning in your life and a growth mindset
- Take notice
 - Find the positive things that are going on and take notice of your own strengths and of those people around you
 - Be aware of the signs that you are getting stressed or your relationships are suffering from your overwork.

Mindfulness:

Mindfulness is a mental state of awareness, openness and focus.

Mindful people are more likely to:	And less likely to:
Be optimistic	Be depressed and anxious
Be more engaged	Be sick
Feel competent and self-sufficient	
Be satisfied with their lives	
Have positive social relationships	

Mindfulness activities include:

- Meditation
- Progressive muscle relaxation
- Visualization scripts
- Listen to music mindfully
- Prayer
- Cultivating Gratitude
- Yoga/Exercise/Walking mindfully

Suffering:

Suffering is “severe distress that threatens the integrity of the person.”

- Diagnosis and treatment only address a portion of human suffering.
- Suffering can make doctors feel *helpless and hopeless*, but these are the most infectious diseases.
- It is important to “turn toward” suffering and not shy away from it.
 - This means to recognize and acknowledge it and listen closely to the story about it
 - Being authentic, emotionally available and engaged

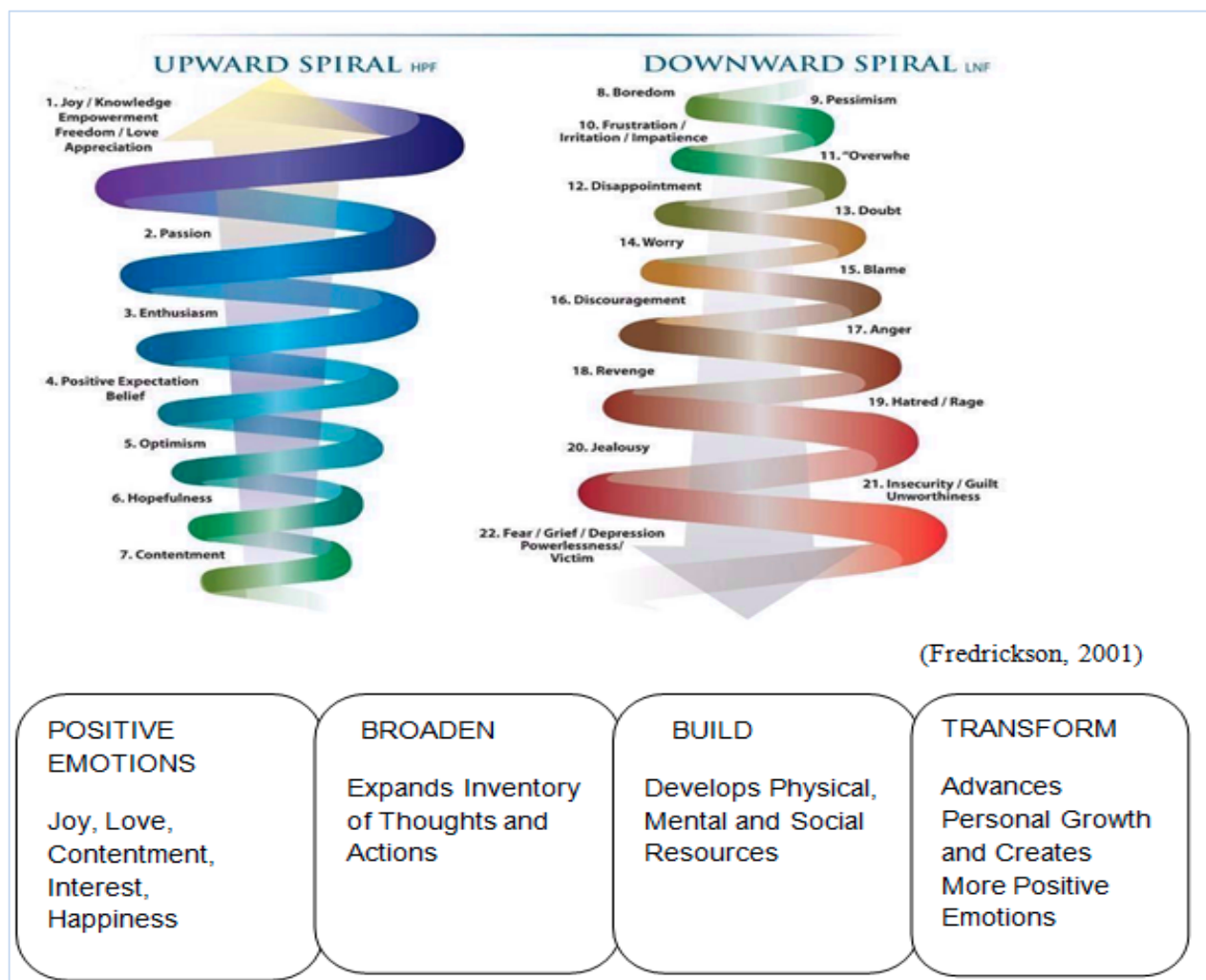
- Bearing witness, compassionate solidarity and humility – we can't 'imagine' what another's suffering is like.
- It is also important for patients to refocus and reclaim what is important, meaningful and generative in their lives.
- Post-traumatic growth

Joy:

Joy is defined by heartfelt positive emotions, including:

- Interest
- Awe
- Pride
- Amusement
- Serenity
- Gratitude
- Hope
- Inspiration
- Love

These “broaden your mind” so you can see more of what’s happening around you, process new information more quickly, do better on complex problem solving and think more creatively. Joy makes the brain feel “safer” and think more about “we” and less about “me.”



Gratitude:

Rather than spiralling downward with negativity, gratitude can help begin an upward spiral and retrain the brain to look for positive things rather than collect the negative things.

Find three things to be grateful for and why we are grateful for them:

- Examples could include events, relationships, surrounding, spirituality, nature, weather, food, people. They don't have to be big things but can be small everyday things
- Developing a habit of practising gratitude can build resilience and improve relationships