

Let Me Tell You a Story: Creating Successful Wellness Initiatives for Residency Programs

All of the faculty in the department of emergency medicine were lying on the conference room floor. Some were concentrating on their breathing. Breathe in . . . hold . . . breathe out. Others were thinking about their schedules and to-do lists. Most were peeking at the clock, counting down the seconds until this mandatory faculty development workshop on mindfulness came to an end. The session came to an abrupt halt when a participant began to snore.

As I read “Well-Being in Residency: A Systematic Review”¹ in a recent issue of the *Journal of Graduate Medical Education*, I reflected on this recent experience and smiled. In the review article, Dr. Raj deconstructs 3 decades of research on resident wellness, highlighting the associated factors, predictors, and barriers. The author notes that “autonomy, building of competence, [and] strong social relatedness” were principles closely associated with resident well-being. As a medical education and simulation fellow and an active member of the wellness committee in our emergency medicine residency program, I could not help but notice that these 3 principles are also essential prerequisites for creating wellness interventions for residency programs.

Over the past 2 years, our program has tried to institute many different wellness initiatives, with variable success. Mandatory sessions on mindfulness flopped, as residents’ and faculty members’ sense of autonomy in choosing how to define and cultivate their own well-being was squelched. Workshops on dealing with emotions and creating effective coping strategies also received lukewarm reviews. Some residents felt they were already competent in this arena and were skeptical about the potential utility of the session. Others were petrified of showing vulnerability during an educational conference hour and felt no sense of security, camaraderie, or social connectedness.

Our most successful endeavor has been an evening of storytelling. Twice a year, residents and faculty gather in an informal setting at a faculty member’s home and listen to stories told by the faculty. The narratives relate to emotionally difficult cases or hilarious lessons that they have never forgotten. These are followed by informal conversations on how to deal with similar situations.

The success of this evening of storytelling is grounded in self-determination theory, alluded to by Dr. Raj. According to self-determination theory, one’s motivation and optimal functioning stem from a sense of autonomy, building competence, and social relatedness.² Residents chose to be there and chose to take the conversations into various directions (autonomy). Faculty shared their successes and failures, allowing residents to shift from a fixed mind-set to a growth mind-set.³ With a growth mind-set, residents realize that wellness and traits like resilience evolve and strengthen through commitment and perseverance throughout their careers. Finally, the informal setting and shared sense of vulnerability and respect led to a strong social bond, thus promoting a feeling of relatedness.

I applaud Dr. Raj for highlighting the importance of resident well-being and the need for continued research. With the success of our program’s storytelling event, I encourage readers to thoughtfully consider these principles as they create wellness initiatives in their own programs.

Glenn Paetow, MD

Medical Education and Simulation Fellow,
Department of Emergency Medicine, Hennepin
County Medical Center

References

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