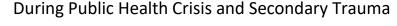
VIRTUE MEDICINE

COMPREHENSIVE PROGRAMS IN PROFESSIONALISM & ETHICS

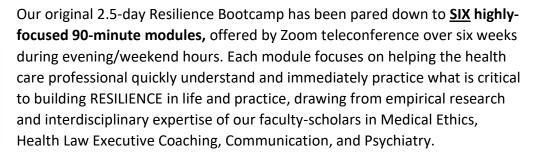








Janeta Tansey, MD, PhD Cheryl Erwin, JD, PhD Elizabeth Parks, MA, PhD





More information on dates and how to register:

www.virtuemedicine.com/resilience

BOOTCAMP HIGHLIGHTS:

MODULE 1: COURAGE

THE VIRTUES OF COURAGE, FOR DISCOVERING A WILL-TO-MEANING IN CRISIS

Lecture: Mindfulness and the Cultivation of Traits, States, and Dispositions in Whole-Person Resilience; Introduction to Character Strengths (Dr. Janeta Tansey)

Guided Experiential Work:

Emotional Growth Edge – Release FEAR and BRAVADO Character Strengths of Bravery, Perseverance, Honesty, Zest Mindfulness Exercise 1 – Soft Belly Breath

Faculty Panel Topic and Q&A: What does courage look like in battlefield ethics? Has medicine pushed the military metaphor too far, given such a time as this?

MODULE 2: TEMPERANCE

THE VIRTUES OF TEMPERANCE, FOR LIVING WITH OUR HUMAN LIMITATIONS AND FINITENESS

Lecture: The Threat of Perfectionism in Health Care and Virtues of Temperance for Resiliency (Dr. Elizabeth Parks)

Guided Experiential Work:

Emotional Growth Edge – Release SHAME and GUILT Character Strengths of Forgiveness, Humility, Prudence, Self-Regulation Mindfulness Exercise 2 – A Releasing Meditation

Faculty Panel Topic and Q&A: Is there any possibility of peace (let alone sleep) when no matter how hard we try, our limitations result in others' possible or actual suffering? What do we do when we can't help but imagine the harms coming from tasks undone?

MODULE 3: LOVING-KINDNESS FOR SELF AND OTHERS

THE VIRTUES OF HUMANITY, DEALING WITH ALIENATION AND LONELINESS IN CRISIS AND OVERWHELMING NOISE

Lecture: When You're Running on Empty: Finding the "Middle Way" in Loving-Kindness for Self and Others (Dr. Cheryl Erwin)

Guided Experiential Work:

Emotional Growth Edge – Release SELFISHNESS and BRITTLE EGOISM Character Strengths of Social Intelligence, Love, Kindness Mindfulness Exercise 3 – Loving-Kindness Mantra for Self and Others

Faculty Panel Topic and Q&A: How to we triage emotional labor when the whole world needs care? Is there any cure to compassion fatigue?

MODULE 4: TRANSCENDENCE IN SUFFERING

THE VIRTUES OF TRANSCENDENCE IN GRIEF AND SECONDARY TRAUMA, FOR AN AUTHENTICITY WITHOUT NIHILISM OR DESPAIR

Lecture: The Defiant Power of the Human Spirit - Demanding Meaning in Tragedy and Trauma (Dr. Janeta Tansey)

Guided Experiential Work:

Emotional Growth Edge – Release DESPAIR and DEPLETION Strengths of Appreciation of Beauty and Excellence, Gratitude, Hope, Humor, Spirituality Mindfulness Exercise 4 – Gratitude Meditation

Faculty Panel Topic and Q&A: How do I cope with this terrible grief? In direct and secondary trauma, how can I think about and nurture the possibilities of Post-Traumatic Growth?

MODULE 5: JUSTICE

THE VIRTUES OF JUSTICE, FOR A SUSTAINABLE RESPONSIBILITY IN THE FACE OF OVERWHELMING AND CHRONIC INJUSTICE

Lecture: Righteous Anger - What Does a Strengths-Based Justice look like for Ourselves in Holding on to Fragile Communities for Future Growth? (Dr. Elizabeth Parks)

Guided Experiential Work:

Emotional Growth Edge – Release FRUSTRATION and ANGER Character Strengths of Fairness, Teamwork, Leadership Mindfulness Exercise 5 – Tonglen Meditation

Faculty Panel Topic and Q&A: How do I cope with all the righteous anger I am feeling about everything that has gone wrong? Who is my "neighbor" when my many communities are all at risk simultaneously?

MODULE VI: WISDOM

THE WISDOM VIRTUES, FOR DISCOVERING A PATH FORWARD

Lecture: Mapping Your Ground: Seeing and Seizing Meaning in the Moment as a *Sapere Vedere* Practice (Dr. Cheryl Erwin)

Guided Experiential Work:

Emotional Growth Edge – Release HELPLESSNESS and HOPELESSNESS Character Strengths of Creativity, Curiosity, Judgment, Love of Learning, Perspective Mindfulness Exercise 6 – Alternate Nostril Breath

Faculty Panel Topic and Q&A: How do I map a path through this sense of overwhelming futility? What do I do when my head knowledge doesn't give me any helpful guidance on what to do anymore?

The Virtue Medicine Resilience Mini-Bootcamp

will be offered serially via Zoom teleconferencing at specific dates in 2020 during evenings and weekends. All who are finding themselves involved in the public health crisis are welcome, especially health care providers and leaders.

The cost is \$375 for all 6 modules. Sign up at: www.virtuemedicine.com

VIRTUE MEDICINE FACULTY



Janeta F. Tansey, MD, PhD is a bioethicist and executive coach with board certifications in Psychiatry and Integrative Medicine. She focuses on caring for both academic and community-based professionals in her clinical practices. A specialist in mind-body medicine and meaning-centered interventions, her scholarship in Logo (Meaning)-Therapy, Virtue Ethics, Character Strengths, and Mindfulness are the backbone of her M&M Rounds 2.0: Mindfulness and Meaning Training. An experienced consultant in executive wellness, professionalism and leadership, she focuses on the impact of values and meaning in organizations, seeking authenticity.



Cheryl Erwin, JD, PhD is a scholar and teacher in Medical Humanities, Bioethics and Health Care Law. Having served both in health care crisis policy development and in directing Medical Humanities programs for physicians throughout the state of Texas, she uses a humanistic approach to cultivating professional self-care. A trained mediator, she has a special interest in conflict management and communication coaching that seeks to balance multiple perspectives to find common goals and solutions to the normal conflicts of human life and medical practice. She is also a lawyer and a board-certified coach.



Elizabeth S. Parks, MA, PhD is a communication scholar with a history of research and teaching in Listening and Dialogic Ethics. She has many years of working with a variety of cultural and service communities around the world in her linguistic and development research, more recently focusing on diversity and communication challenges that are found in Higher Education. She brings theory and practice of listening, particularly listening across differences and in settings of competing values, to the curriculum as a clinically critical component of building insight and resilience both intra- and inter-personally.

PHILOSOPHY OF RESILIENCE

Resilience is a clinically defined term that measures both subjective and objective capacities to adapt to new challenges and to grow in settings of adversity or trauma; in short, increasing resilience is the antidote to burnout. And it is not only burnout that is of concern, but trauma-care in general, as attention is turned to the severity of compassion fatigue, primary and secondary forms of trauma, grief and moral distress. (See these and other key terms later in this document.)

There is an accelerating body of research on building resilience. Much of the original work has focused on the clinical populations experiencing trauma and/or grief, now with growing interest and application to the general population. Health care professionals are in no way immune to contemporary disruptions and challenges to self-identity, community, professional life and work, support resources, and

environments, and are a group that need care for their own sakes as well as for the important and meaningful care that they provide to others.

Dr. Steven Southwick and Dr. Dennis Charney in <u>Resilience: The Science of Mastering Life's Greatest Challenges</u>, 2nd ed (Cambridge University Press: 2018) name the following as validated strategies for building resilience

- 1. Optimism and Hopeful Attitude for Future
- 2. Facing Fear with Deliberate Courage and a rallying of resources
- 3. Draw on one's moral compass for what is good and right and altruistic
- 4. Draw on "ultimate meaning" spirituality, faith practices
- 5. Shore up social support systems and loving relationships of care
- 6. Identify Role Models for Inspiration and Guidance
- 7. Care for the Body Well: Physical Strengthening and Fitness
- 8. Brain Fitness—Train for Cognitive Awareness and Flexibility
- 9. Emotional Intelligence and Positive Regulation of full range of normal human emotions
- 10. Discern Meaning and Purpose, for Growth

The Virtue Medicine Resilience Mini-Bootcamp draws from interdisciplinary experience and 20+ years of research about character strengths, meaning-centered interventions, and mindfulness towards building the resilience of our participants as quickly as possible for these challenging times.

KEY TERMS IN RESILIENCE-CARE FOR PROFESSIONALS

In the face of both acute and chronic stressors, professional altruism, perseverance and fidelity can be strained and negatively impact functioning in the workplace and in personal life. Appropriate interventions leverage the existing relationships, culture, and strengths of the group and its individuals to care for themselves in adaptive and informed ways. Our curricular goals are to optimize resilience and post-traumatic growth.

Part of the challenge in identifying the wisest response is understanding the problems to be solved. The following are good working definitions for key terms:

- **Resilience**: A trait, state, or cultivated capacity to respond adaptively and constructively to stress or trauma, leading to growth and ongoing sense of meaning and purpose, even through adversity.
- **Stress**: An organism's response to challenges, demands or threats. Stress can be healthy or unhealthy, depending on the circumstances and the capacity to respond effectively and adaptively.
- **Burnout**: A constellation of symptoms associated with stress, commonly measured using the inventory and constructs by Maslach, et al to include varying degrees of emotional exhaustion, depersonalization, and beliefs about low self-efficacy.
- Moral Distress: A internal dissonance when one knows what the right or ethical action is but has
 internal/external obstacles or constraints to the performing of the action that are difficult or
 impossible to mitigate.
- Moral Injury: The syndrome of deep guilt and shame when one participates in, perpetrates, or witnesses evil/suffering, while experiencing this as both complicity and a violation of personal moral

- commitments. This is classically described in the military literature but has since been applied to other organizational settings.
- **Demoralization**: The erosion of morale, optimism, hope for the future and meaningfulness in the present. Not necessarily a pathological condition, it is also associated with existential distress in the face of suffering.
- **Compassion Fatigue**: Detachment and hardening/repression of emotions as a response to the suffering of others. Often considered an overlapping syndrome with burnout, particularly in the human service fields or helping professions.
- **Bereavement**: The experiences of mourning or sadness after loss. The duration of bereavement normally varies widely.
- **Complicated Bereavement**: Also known as pathological grief, this is a heightened and persistent experience of mourning that resists healing and is often associated with high existential distress and difficulty functioning.
- **Trauma**: A subjectively distressing or disturbing experience. Unlike past attitudes, we now know that whether or not an experience is perceived as traumatic is highly subjective and shaped by individual narratives, culture, and vulnerabilities, much of which is predetermined and not under individual control.
- **Complex Trauma**: Repeated and cumulative trauma experiences, often creating an even more pervasive and persistent impact on body, psyche, and social functioning.
- Vicarious Traumatization: A pattern of overidentifying and suffering with others' trauma experiences and sequelae, typically associated with a longer-term role of caring for or helping the traumatized person/population.
- Acute Stress Disorder: The development of a clinically distressing or functionally impairing set of symptoms, usually within one month of the trauma and of at least 3 days duration. The medical syndrome increases the risk of developing Post-Traumatic Stress Disorder and demands rapid psychological intervention.
- **Post-Traumatic Stress Disorder**: A functionally impairing set of physical, cognitive, and emotional symptoms that develop months or years following a trauma, often with significant health, social and professional impairments and a high risk of mortality. The medical condition can be chronic and unremitting and requires medical-psychological treatments.
- **Secondary Traumatic Stress**: A subtype of PTSD, in which the trauma is an exposure to the traumatization of others, often with a sense of horror and helplessness. This syndrome has been particularly described in first responders, in professional and familial caregivers, and in witnesses to trauma.
- **Post-Traumatic Growth**: The experience of positive change and personal development that surpasses what was present before the trauma or crisis occurred, often with a sense of wisdom and meaningfulness in both the struggle to heal and the new perspective and coping strategies.