

# Chapter 4


## Self– Empowering Healthcare Providers: Building Inner Strength for Better Care

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### ABSTRACT

*The rigid stereotypes associated with healthcare providers neglect the human aspects of their personalities and often portray them to be either deficient in communication skills or as flawless professionals who can handle every situation perfectly. This chapter pans at the healthcare provider in the perspective of self and self-empowerment. The authors build a narrative for physician well-being by trying to answer why is provider well-being important? Why and how do things go wrong? Why is it that some develop the burnout syndrome while others don't? And finally how can providers help themselves? Verbatim quotes from healthcare providers interviewed for several qualitative studies are embedded within the text.*

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## INTRODUCTION

*“That physician will hardly be thought very careful of the health of the others who neglects his own.” - Galen*

The culture in popular media portrays an ideal healthcare professional either as a selfless healer who is available around the clock, always leading, unshaken by suffering, and possessing endless knowledge or, on the opposite end of the spectrum, as a greedy, arrogant, and emotionally cold person who is a poor communicator and only talks in jargon. Rigid stereotypes in medicine have led to the inconsideration of the humanistic side of healthcare professionals, leading to burnout and exhaustion.

It is estimated that globally, 39% of healthcare workers report symptoms of burnout (Nagarajan et al., 2024). Between 2011 and 2014, the prevalence of burnout increased by 9% in US healthcare workers, with no change in other professions, denoting the gravity of its situation, particularly in healthcare. This condition is associated with a concomitant rise in some serious consequences for healthcare providers, institutions, and healthcare systems (Dyrbye et al., 2017). Worker mental health has become central to ensuring quality care delivery to populations due to shifts in epidemiological disease patterns, increasing life expectancies, and a greater frequency of public health emergencies that strain already weak health systems. A mentally strained worker cannot provide quality healthcare and is more likely to make medical errors due to clouded judgment and slower reflexes. Medical errors as a result of a compromised provider's well-being can be viewed as the most important link in the chain of consequences faced by the patients and society, negatively affecting lives and damaging healthcare trust. Most of these errors are unintentional and stem more from working conditions and burnout than from incompetence or a lack of knowledge (Hall et al., 2016).

The alarming rates of rise in dissatisfaction and exhaustion in healthcare can be attributed to the fast pace of modern life, greater competition in achieving better lifestyles, and a strife for financial gains rather than connecting to a meaningful purpose in life. An added strain on mental health is the social media distraction, which portrays anything apart from aesthetically pleasing as inferior and raises expectations for the general public as well as health personnel in all aspects of life. The ease in communication comes at the price of a lesser ability to disconnect and revive mental peace (Shanafelt et al., 2003).

The current body of literature focuses on physician distress rather than wellness, and although fragmented efforts have been made to redefine and redirect healthcare provider wellness, there is little consensus on the interventions, which are self-centric and allow a provider to empower themselves rather than waiting for the system or society to address their concerns about their well-being.

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