

"12 Steps" toward healthier attitudes and coping strategies

## Steps 6 & 7:

*accepting the help available to address our basic human needs; seeking to correct the shortcomings in our lives*

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**H**aving completed the first five steps in the Physician Health Program's "12-steps for medical professionals who seek rehumanizing," the nature of our problems and the range of our personal needs have become clear. It's not sufficient to name these things and stop there, even after sharing them with someone else. Now it's time to begin to

make the necessary changes in our lifestyle and ourselves that will relieve our isolation and promote well-being. In Step Six, the "rubber hits the road."

Step Six represents the practical application of everything we have learned about willingness to seek help and change for each specific item of concern involving our own character and life choices.

If there is to be any relief for us, we must first confront our particular attitudes and beliefs that we now recognize have been barriers to personal change. We review the list we prepared in Step Four. Are there really any surprises there? Didn't we realize all along that our basic needs, such as proper nutrition, exercise, rest, social and leisure pursuits, were only partially met?

We have heard this before, heard the advice — even dispensed it to our patients. But we believed that advice did not apply to us. We had other priorities that were more important to us, or so we thought.

If we truly wish to feel better, if we genuinely desire any measure of healthy balance and boundaries in our lives, and if we finally accept that the rest of the world will not transform itself in order to accommodate us, then we become entirely ready to be helped.

Further down the Step Four list, our shortcomings and self-defeating behaviours have been identified. We ask ourselves: "Do we truly want to eliminate these traits?" This is the crux of the matter. Which of these characteristics do we secretly cherish, clinging to them like the gambler to his cards?

We have acknowledged the problems created by living life as doctors only. Are we ready to open our minds to new ideas about ourselves and learn how to think and act differently? At this point, our cries of "yes, but..." ring out. Remember — we are confronting deeply ingrained belief and behaviour patterns that have taken years to develop, and which have been consistently rein-

forced in our professional environment. Change does not take place overnight. But it won't even begin until we become entirely ready.

Our emotional concerns have been named as well. Until now, our reluctance to deal with these issues has been especially strong. These needs are just as basic as our need for food and drink. Becoming willing to address them is also part of this step.

Every item on the Step Four list is reviewed. We challenge ourselves to let go of any personal thought or attitude that stands in our way. When especially difficult, we consider how our lives will be improved once the barrier to change is removed.

Some of us turn to the Higher Power in our lives to help us become willing. Admittedly, it is impossible to arrive at a perfect willingness to transform ourselves in all areas. All that is required is persistent striving toward this objective. This might be the toughest part of the entire process of change, but no lasting results

can be expected without seeking a genuine readiness to be relieved of all of these problems and the beliefs and behaviours which sustain them.

We recall that there are personal strengths on our list, traits like thoroughness and focus, that we now choose to apply to these endeavours.

We may now enjoy a glimpse of a more peaceful life that lies ahead, but we need to remember that this is just the beginning of a lifetime project.

### Step Seven

Action is the principal ingredient of Step Seven, and humility is the theme.

Humility began when we first acknowledged our problems. It was there when we shared our Step Four list. Humility demands a head-on attack upon our sense of entitlement — that egocentric trait residing just below the surface of our distress that would have us think we deserve so much from life because we are physicians.

Humility finally allows us to shed the arrogance and false sense of invulnerability that stand between us and our true personal goals. We can now apply ourselves in ways suggested by our growing self-awareness and willingness.

Again, we return to our Step Four list, and for each item we record suggestions for improvement. It can be surprising how many ideas are forthcoming — once barriers to this flow of thought are overcome.

Some of our solutions appear as simple and natural as day and night. When hungry, eat. When tired, sleep. When lonely, talk to someone. We accept our basic appetites as legitimate and nourish them.

Revolutionary concepts in time management can be considered. For example, we play with our children instead of attending patients after-hours, we book time for meals and exercise.

Taking a holiday, and leaving patient files at home, becomes a realistic possibility. The practical changes in our professional lives

necessary to correct these basic problems must be categorized and, as soon as possible, implemented.

Finally, we realize that these were actions we could no longer afford to overlook.

Then we look at our personal character traits and emotional needs. These, too, have been revealed, along with our perceived barriers to change. Humility helps us accept these things as part of our nature as human beings.

Our developing willingness to take personal responsibility for improving ourselves has arisen from our previous work on these steps, and now we can reach out for help in these areas as well.

What sort of help is suggested? Many will need to learn how to place healthy boundaries between

personal and professional lives, and assertively maintain them. Perhaps counselling to improve communication with a spouse or significant other is in order. Some will have need for therapy to relieve deeper psychological stresses. Any of these, and more, can be embraced and explored.

Finally, our belief that we deserve this help overcomes our fear of exposure. This is our true entitlement. We are becoming free to know and nurture the real person inside our professional selves. OMR

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## OMA Physician Health Program 12 Steps for Medical Professionals:

### Suggested Guidelines for Physicians Who Seek Rehumanizing

1. We admitted difficulty living as a medical professional only, that problems arise from this single focus in life.
2. We came to believe that accepting help and support from everything life has to offer could restore our physical, mental, social and spiritual health.
3. We made a decision to turn our will and our lives over to the care of our fellows who have learned these lessons and a Higher Power as we understand one.
4. We made a searching and fearless personal inventory of our problems, strengths, goals and dreams.
5. We shared our list with trusted others, acknowledging our character weaknesses, virtues and humanity.
6. **We were entirely ready to accept the help available to address our basic human needs.**
7. **With humility and an open mind we sought to correct the shortcomings in our lives.**
8. We made a list of all persons and institutions we resented and became willing to address these issues.
9. We made direct amends where necessary and took any action required to relieve these tensions, except when doing so would harm others.
10. We continued to monitor internal feelings and needs, promptly admitting when we had a problem.
11. We remained open and responsive to help, guidance and love we can receive from others who care about us.
12. Having achieved personal revitalization as a result of these steps, we try to carry this message to the others in our lives, and to practise these principles in all our affairs.