

ESSENTIAL SELF-CARE FOR DOCTORS DURING THE PANDEMIC

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I am a General Practitioner Obstetrician and Medical Educator in Busselton, Western Australia. I live in one of the most isolated *and* safest places in the world given the context of the global pandemic. In March 2020 I observed from a distance the terror and destruction that unfolded as COVID-19 spread through Asia, Europe, and America, anxiously waiting for the inevitable tsunami to hit Australian shores. But I did not wait idly, I took action.

First, I checked in with myself. As they say, apply your own oxygen mask before helping others apply theirs. As a frontline worker, I knew I needed to be in excellent health if I was going to get through this pandemic. I prioritised my self-care routine with militant resolve: daily yoga, meditation, nutritious food, immune-boosting supplements, adequate sleep and of course, good hand hygiene. I also ensured my family stayed safe and healthy too. I decided to keep my two primary school daughters home before the official school closure occurred, partly to demonstrate to fellow parents and teachers at the school that I was taking the pandemic seriously, and partly because my husband was able to be at home with them while I continued to work on the frontline.

I have valued self-care as an indispensable part of my life for many years. I practice yoga and mindfulness meditation daily. I became serious about mindfulness following the birth of my second daughter in 2013. I quickly realized that I was going to need reliable survival tools to balance my work as a doctor with life as a wife and mother of two young children and keep my head above water. I started out with some one-on-one meditation classes, then enrolled in the Mindfulness-Based Stress Reduction program. Since then, I've continued my meditation practice and developed my own online mindfulness program for medical students, which I'm now evaluating as part of my Masters by Research. Although I never envisaged that I would be

using my mindfulness skills to cope with stress associated with a global pandemic, I do feel incredibly grateful that I have invested time and energy into integrating this into my life.

Next, I considered what I could do to best serve my community. At my general practice, we began meeting every Monday evening to consider what changes needed to be made in order to provide safe and compassionate care to our patients while ensuring the safety of our staff was not compromised. We were the first practice in our town to start offering telehealth consultations and carpark consults. Community feedback was supportive. At the hospital, the medical staff began meeting weekly to receive updates on the changes that were occurring locally as well as state-wide. I was involved with the COVID-19 planning for our hospital maternity services unit and became acutely aware of the challenges of providing obstetric care in a small rural hospital with limited resources during a pandemic. I helped establish a working group of general practice physicians with an interest in palliative care to brainstorm how we could provide end-of-life care in the community in the event that hospice beds were no longer available in our hospital. We set up WhatsApp groups for our general practice and maternity services teams to provide ongoing emotional support to one another, anticipating the impact that this stressful time would have on our mental health and the importance of checking in with each other regularly to prevent burnout. I shared guided meditations with my colleagues, encouraging them to pause and take time for themselves amongst the craziness.

One of the most challenging changes to our maternity service provision was the restriction of one support person to each woman who presented for care during her labour and birth. For many women this did not affect their birth plan significantly, but for our most vulnerable women whose wellbeing while in hospital was dependent on having at least two support people present, this new rule left me wondering about the potential harm we were doing by enforcing these restrictions on pregnant women. Before we had a single case of COVID-19 in our region, we were counselling women with significant social and mental health difficulties that they had to choose between their mother and their partner.

One Friday evening while caring for a distressed woman on labour ward I made the decision to allow her to have her mother-in-law *and* partner present for her birth as I believed that the risk of asking one of them to leave outweighed the potential risk of spreading COVID-19. Although I knew I was breaking the rules, I felt this decision was the most compassionate one given the circumstances. The following week, I had to confess my choice to my manager. She was disappointed and upset. I felt the need to defend my actions, arguing that this patient needed extra support. We left the meeting with mutual sense of dissatisfaction. The stressors and strain that the situation was having on previously well-functioning relationships between staff and patients were palpable. The cracks were starting to show. Over the following week, I reflected on the lessons I have learned through my mindfulness practice: acceptance, honesty, compassion and forgiveness. When I met again with my manager, we shared our frustrations and acknowledged that we were both just trying to do our best during a time when we were being tested. In many ways, this incident has strengthened our relationship and become a source of growth for both of us.

In my role as medical educator I appreciated that my students were also experiencing the tremendous impact of this pandemic. I piloted a program that I discovered during my sabbatical in Montreal, Canada, last year. With the support of my mentor, I was able to deliver the Mindful Medical Practice (MMP) course to ten medical students via videoconference. The MMP course is designed to teach students skills and impart *ways of being* that can help them deal with the potentially overwhelming clinical experience of clerkship. It aims to prevent the decrease in empathy and ethical reasoning often observed at this stage in their training. It appeared especially relevant during this unprecedented time of uncertainty. By the final session, I felt deeply connected to the students. I experienced intense gratitude for the opportunity to facilitate a unique and valuable course. My own mindful practice was reinforced; this was as valuable to me, the teacher, as it was for the students.

Furthermore, I started sharing posts on social media and sending emails to my patients to explain in simple terms what I understood to be happening and provide advice on what they could do to stay safe and prevent the spread of the virus. I responded to emails from patients asking for advice on what action they should take to protect themselves and their family members, commending them for being proactive and taking the situation seriously. I shared podcasts and poetry that I found helpful for dealing with my anxieties during this time of great upheaval.

And I prayed.

Thankfully, in Western Australia, our State Government leaders were pre-emptive in closing state and regional borders to minimize spread, particularly to our most vulnerable communities. Currently (as of the 1st December 2020) we have had very few active cases of COVID-19 in our state, with the number of new cases remaining well controlled since mid-April. Our national borders remain closed and our restrictions have been cautiously lifted over the previous months. Consequently, we have slowly been returning to a more normal way of life.

Nonetheless, the long-term implications of this pandemic remain to be seen. There is no doubt that I will remain as busy as ever, attending to my patients with mental illness and chronic disease who were neglected during the period of lockdown. It is uncertain how long our borders will remain closed, protecting our nation from the world outside. We will not be immune to the inevitable global recession that knows no borders.

What I do know is that I will continue to prioritize self-care. I will remain committed to maintaining the health and wellbeing of my family. I will stay connected and serve my community the best that I can. I will endeavour to accept the things I cannot change while having the courage to change the things I can. This is what brings me peace when so much remains unknown. ■