Protect Your Psychological Paycheck: Managing Stress, Impostor Phenomenon, and Burnout

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PLEASE complete & score the CIPS and the PRO-QOL handouts

Disclosures

All planners, presenters, reviewers, and ASHP staff of this session report no financial relationships relevant to this activity.

Learning Objectives for Today….

- Understand **Impostor Phenomenon** and **Burnout**
- Understand how these two constructs relate and develop
- Examine how they can impact you both personally and professionally
- Assess your risk using the **CIPS** & **ProQOL 5** scales
- Apply intervention strategies to a Case Study
- Create your own "**Well-Being and Resilience Action Plan**"

Meet Dr. Pauline Rose Clance

Seminal Article:

Clance and Imes (1978). The Impostor Phenomenon in High Achieving women: Dynamics and Therapeutic Intervention. *Psychotherapy,Theory, Research, and Practice, 15 (3),* 241-247.

Her Classic Books:

Impostor Phenomenon: Overcoming the Fear that Haunts your Success

The Impostor Phenomenon:
When Success Makes you Feel Like a Fake

First, an Exercise…

The Impostor Phenomenon

Definition
An internal, persistent experience of self-doubt and worry about one's competency and fear of being found out by others to be a fraud, despite objective, undeniable, high levels of achievement.

- Clance & Imes (1978)

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Meet Dr. Murray

➢ Served as **Dean at Harvard** University's School of Engineering & Applied Sciences.
➢ Over **70 papers** in peer-reviewed journals
➢ The **National Medal of Innovation and Technology**
➢ **Two patents**
➢ Over **80 National and Intl scientific committees & governing boards**.

• *"Do I ever think I'm not qualified? she says, "All the time."*

-Kaplan (2009)

Impostor Phenomenon: Prevalence Data

- Overall Range: Most studies are 25-30%
- Sex Differences: Equivocal
- Sociocultural Context Matters!
- Student Status > Professional Status
- Pharmacy, Medical, Nursing, Dental students: 30%
  - Pharmacy Students report Highest Distress (50.1%)
  - Impostor Phenomenon was best predictor of Distress

- Henning, Ey, Shaw (1998)

Polling Question:
Clance Impostor Phenomenon Scale

My total CIPS score was..
  A) Few IP Experiences: 40 or less
  B) Moderate IP Experiences: 41-61
  C) High IP Experiences: 62-80
  D) Intense IP Experiences: 80 or above

* A Cut-0ff score of **62+** designates IP/Non-IP in terms of clinical significance

Chrisman, Pieper, Clance, Holland, and Glickauf-Hughes (1995). Validation of the Clance Impostor Phenomenon Scale. *Journal of Personality Assessment, 65 (3),* 456-467.
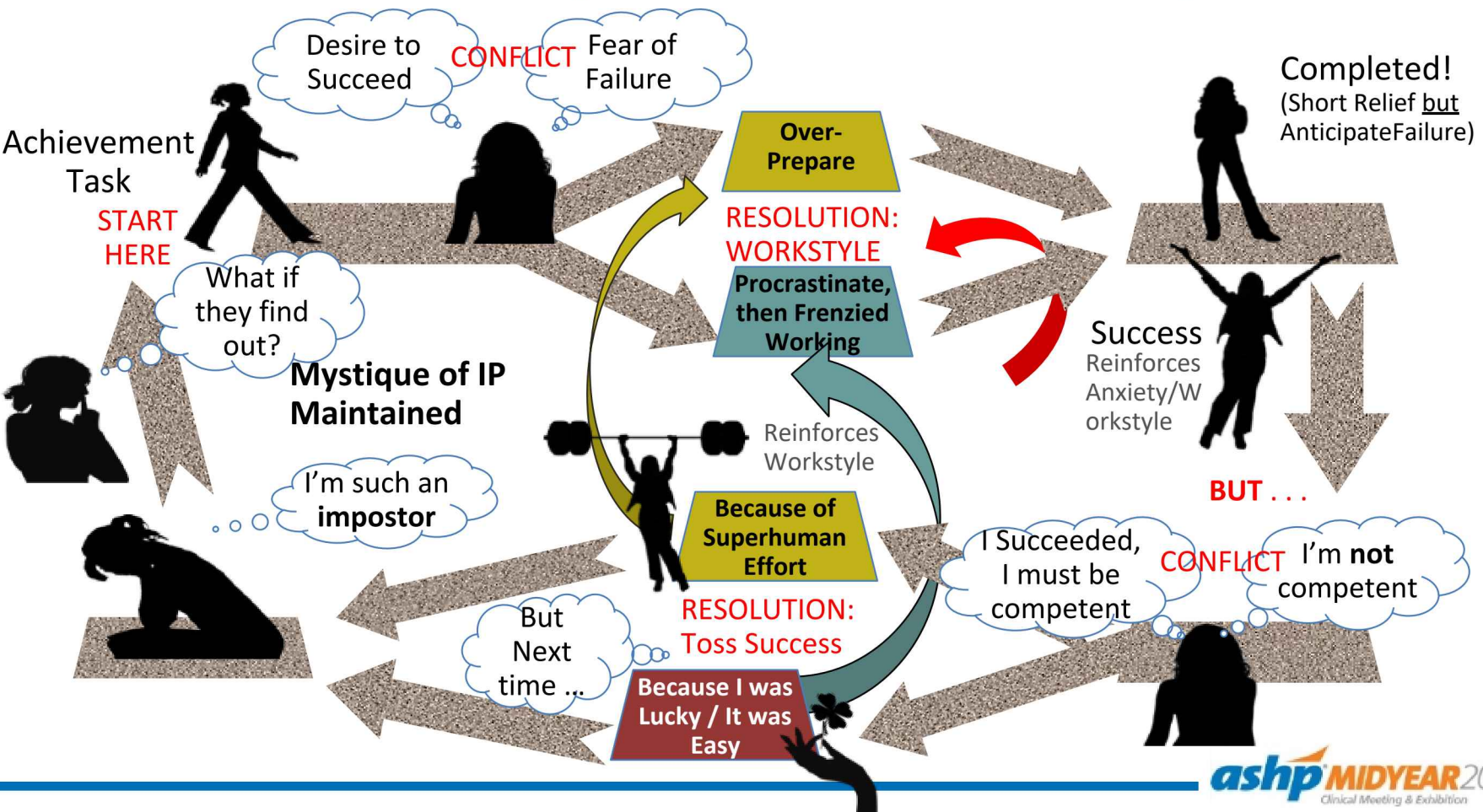
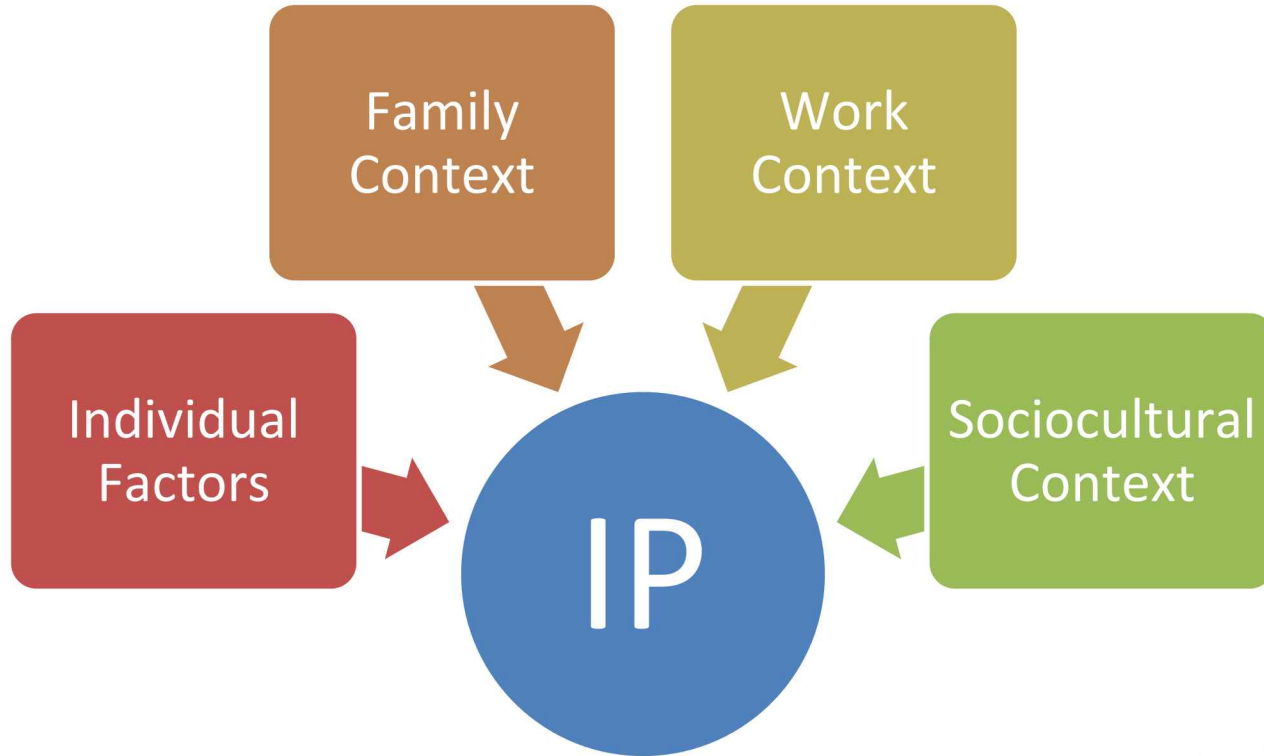# Impostor Phenomenon is REAL

- **It's just not TRUE**

Photo: http://www.instagram.com/lilothehusky

Clance Impostor Phenomenon Cycle

Development of Impostor Phenomenon (IP)

Family Context

Work Context

Individual Factors

Sociocultural Context

IP

Development of Impostor Phenomenon:
Individual Factors

- **Personality**
  The Big 5 and Mental Health History
  Perfectionism
  Self-Esteem
- **Role of Intelligence**
  Dunning-Kruger Effect
  Social Comparison
- **Complications by Sex**
  Differences in Messaging
  Differences in Coping
  Differences in Responding

Development of Impostor Phenomenon: Family Context

- **Achievement messages**
  Your worth
  Expected, not celebrated

- **Myth of Meritocracy**

- **Burden of 1ˢᵗ Generation and/or Family Shame**

- **History of Parentification**

- **Role Overload**

Development of Impostor Phenomenon: Work Context

- **Competitive Environments**
- **Norms about Mistakes/Help**
- **Features of Success**
  - Ambiguous
  - Changing
- **Critical Incidents**
  - Transitions
  - Challenges
  - Feedback
  - Success
- **Lack of Social Support**

Development of Impostor Phenomenon: Sociocultural Context

- **Simultaneously Navigating and Responding to ..**
  Discrimination
  Microaggressions
  Inequities
- **Stereotype Threat**
- **Culture Clash**
- **Sociocultural, Political, and Economic Pressures**
- **Racial Identity**
- **Some Promising Research...**

Impostor Phenomenon :
CASE STUDY: Ima Imp, Pharm.D

Dr. Imp graduated in the top of the class and has been working in a prestigious hospital for 4 years. At the 2018 ASHP Conference, they stumbled upon an Art Exhibit as part of the National Academy of Medicine's initiative on *"Clinician Well-Being and Resilience".* With both alarm and deep recognition, Dr. Imp decided to come to THIS session to begin to address these issues. Dr. Imp's IP score was over 62 and now wonders, ***"How might this impact my career?"***

Impostor Phenomenon: Impact on Career

Inhibits full potential for **Advancement** and **Leadership**

Lowers motivation/confidence for **Negotiations**

Lowers **Job Satisfaction** and **Engagement**

Creates **Social Withdrawal** in the workplace

Stifles **Career Planning** and **Mobility**

Lowers potential **Performance** (yet strong performers)

Contributes to **Burn-Out** and **Plans to leave field**

Burnout

Definition: a condition of emotional exhaustion, depersonalization, and reduced personal accomplishment & satisfaction in jobs where there is high stress with low rewards and the minimal goals are unachievable.

(Maslach, 1976)

Polling Question:
Dr. Imp's IP and Burnout

How would Dr. Imp's unaddressed Impostor Phenomenon ultimately lead to Burnout?

    A) High Stress

    B) Low Rewards

    C) Unachievable Goals

    D) All of the above

    E) None, Burnout is a separate construct

A Model of Burnout Development

- **Emotional Exhaustion comes first:**
  Work Overload, Time Pressures, Interruptions
  Social Conflicts at the job
  Severity of Patient and/or Traumatic Experiences at work
  Required to express or suppress emotion as part of job
- **Depersonalization/Cynicism/Detachment comes second:**
  Needing to DEFEND against emotional exhaustion
- **Lack of Efficacy/Accomplishment, along simultaneously:**
  Chronic Lack of Resources
  Role Ambiguity and Role Conflicts
  Lack of Feedback   **Maslach, Schaufeli, & Leiter , 2001**
  Little Decision Making and Autonomy

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Compassion Fatigue (CF)

Definition: Compassion Fatigue combines the traditional construct of **Burnout** with the construct of **Secondary Traumatic Stress** (which can occur when helping those who are suffering, experiencing trauma, and/or dying).

<div align="right">Figley, 1995</div>

POLLING QUESTION: PROQOL-5

1) My Compassion Satisfaction Score was

    A) 22 or Less   Low

    B) 23 – 41   Average

    C) 42 or more   High

2) My Burnout Score was

    A) 22 or Less   Low

    B) 23 – 41   Average

    C) 42 or more   High

3) My Secondary Traumatic Stress Score was

    A) 22 or Less   Low

    B) 23 – 41   Average

    C) 42 or more   High

Polling Question:
3 Comprehension Checks!

1) Dr. Imp is now a Supervisor and knows the potential for IP and Burnout. This year the students have only <u>one </u>more professional development session left. Knowing both are important, and wanting to pick a topic that MORE of the students may experience, which should Dr. Imp cover?

A) Impostor Phenomenon, it is more common (especially early in careers) and can ultimately lead to Burnout.

B) Burnout, it is more common and can ultimately lead to Impostor Phenomenon that decreases Job Satisfaction.

Polling Question:
3 Comprehension Checks!

2) Since BOTH are important, Dr. Imp adds a session to cover Burnout too, YAY!. Using Maslach's Model of Burnout Development, they advise students to clarify job duties, how to navigate competing expectations, and to request regular feedback. Dr. Imp's strategies should….

A) help prevent feeling emotionally exhausted & developing a detachment where they start treating patients like objects.

B) help protect their job satisfaction & sense of accomplishment which can erode and even lead to quitting.

Polling Question:
3 Comprehension Checks!

3) Dr. Bush, President of ASHP, has prioritized Clinician Well-Being and Resilience addressing **both** individual and contextual factors which is consistent with extant research. Dr Imp should suggest if a student's system **doesn't** consider this a priority, they....

A) Should RUN! Burnout factors and Traumatic experiences ultimately determine one's Professional Quality of Life.

B) Could try developing valued aspects of their job, since Job Satisfaction can moderate the impact of Burnout and Trauma on one's Professional Quality of Life while simultaneously working for systemic change which is also critical.

Development of Burnout & Compassion Fatigue
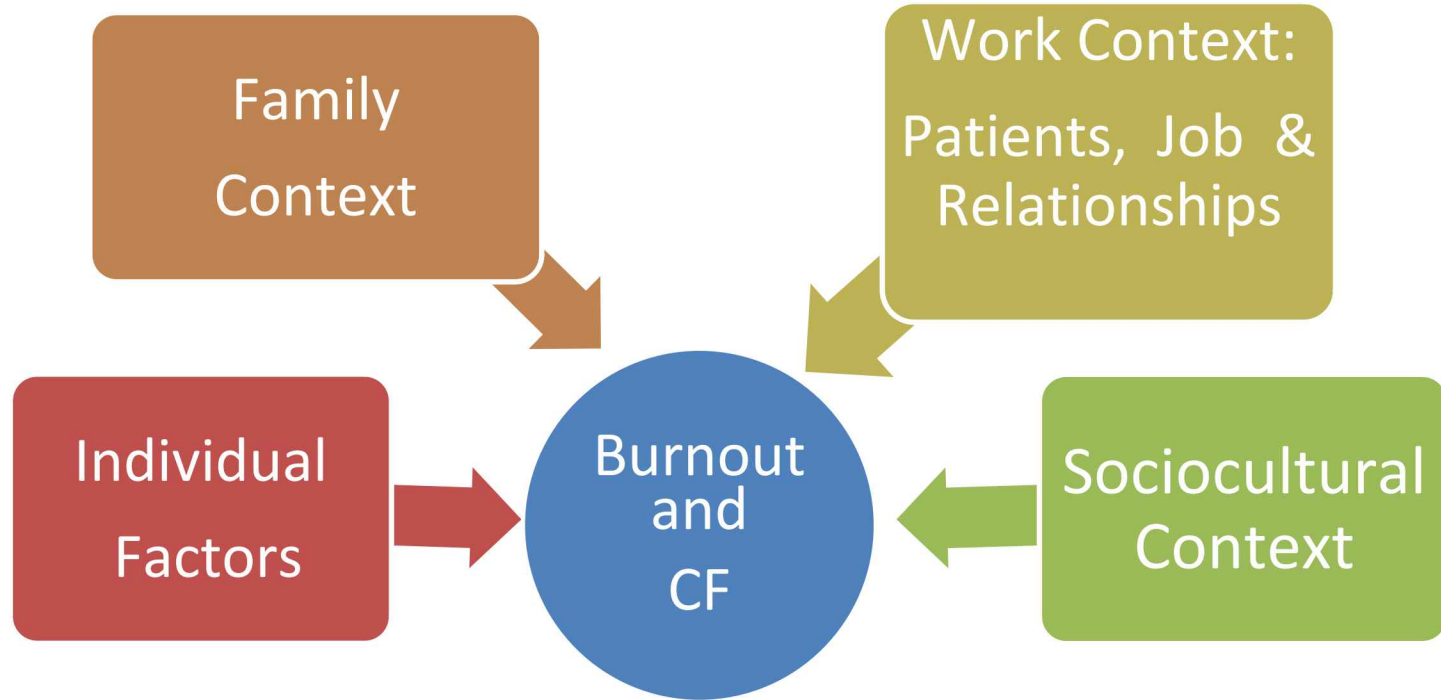
Development of Burnout & Compassion Fatigue: Individual Factors

- Training & developmental stage
- Personal mental health/trauma history
- Current life situations
- Personality
- Interpersonal Skills
- Lack of Resiliency Factors
    Underuse of Approach Coping
    Overuse of Avoidant Coping
    Disconnection from sources of renewal

Development Burnout & Compassion Fatigue: Work Factors (Patient Characteristics)

- Acuity, Terminally Ill, Ongoing trauma
- Complexity
- Age of client
- Similarity to YOU
- Barriers you face trying to "help" them...
    Patient Resistance/Adherence issues
    Communication/Personality Issues
    Familial and Sociocultural norms

Development of Burnout & Compassion Fatigue: Work Factors (Job Characteristics)

- Hours: Unpredictable and/or excessive
- Works Load: volume, time pressure, interruptions
- External/Internal Demands of Job itself
- Lack of Decision Making Power/ Autonomy
- Role Conflicts
- Role Ambiguity and Lack of Feedback
- Requirements to display or suppress emotions
- Lack of Resources to do job well
- Mismatch between your Job and You

Development of Burnout & Compassion Fatigue: Work Factors (Interpersonal)

- Social Isolation
- Disruptive & Hostile Social Dynamics
- Social Norms/Values
  - High Competition
  - High Perfectionism
- Low Social Support
  - Team, **Supervision,** Mentors, Peers

Development of Burnout & Compassion Fatigue: Sociocultural Context

- Sociocultural Pressures
- Lack of Fairness and Equity
- Incongruent Values
  - Priorities
  - Work-Family Balance

Impact of IP and Burnout: Research says..

- Physical
- Emotional
- Cognitive
- Behavioral
- Interpersonal
- Spiritual aka Your Why

IP and Burnout

- They are **Real**
- They are **Normal** reactions
- They are **Fixable!**

Improving Well-Being & Resilience

Addressing Impostor Feelings:
Change your Relationship with Failure

DO NOT OPEN UNTIL INSTRUCTED

Staple Below

measures of "Success" that you hold dear, and <u>*remain*</u> *an utterly amazing human being.*

Addressing Impostor Feelings:
Change your Relationship with Failure

- Learn to Fall
- Use your intelligence *about* your intelligence
- Teflon your Failures
  - Internal vs **External**
  - Permanent vs **Temporary**
- Grain of Truth

Addressing Impostor Feelings:
Own your **Success**

- Velcro your Success!
  - External vs **Internal**
  - Temporary vs **Permanent**
- Your language
- Reframe your Work Style
- More Magic:
  - Boulder Folder
  - Power Pose (Cuddy, Wilmuth, Yap, and Carney, 2015)

Addressing Burnout: Six Potential Mismatches

1) Workload
Negotiate for more Resources (and more efficient usage)

Persist in requesting needed Training, Limited Hours, etc

Adjust if the job or setting is really wrong for you

2) Control/Agency/Autonomy
Sit at the Table! Decision Making and Transparency

Invest in your "Corner of the World"

Address Role Ambiguity, Role Conflicts, Feedback needs

3) Rewards
Salary, Benefits, Hours, Flexibility, Professional Development

Find your Pride: mentorship, projects, new approaches

Create positive social rewards

(Maslach, Schaufeli, and Leiter , 2001)

Addressing Burnout: Six Potential Mismatches cont

4) Community
- Create a Positive Sense of Belonging
- Active Coping: use and give Social Support & Help
- Learn Communication & Conflict Management skills

5) Fairness
- Stay "Woke" to all ISMS, inequities, & hostile environments
- Act individually or in group to address them
- Be OPEN to feedback when you are adding to the problem!

6) Values
- Address Dilemmas: Ideal vs Possible, Your Values vs Theirs
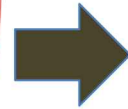- Invest in jobs & organizations that match your values
- Initiate projects/training & Lead others in valued directions
- Remember Your "Why" & Work-Life Balance

Well-Being and Resilience Action Plan

Awareness   Insight   Action   Accountability & Self-Compassion

Impostor Phenomenon

- Success
- Failure
- Work Style

Burnout and CF

- Values
- Work Load
- Fairness
- Agency
- People
- Rewards

ROCKS

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KEY TAKEAWAYS: Addressing IP and Burnout

1) Addressing **Individual** issues is not only necessary, but at this level you often have more efficacy to make immediate change. The Plan you started today is just the beginning. Commit to the process.
2) At your **Workplace**, start building social norms that celebrate success, normalize failure, offer/receive help & support, and tackle problems of inequity, ISMS, and difficult Interpersonal dynamics. Make your workplace infertile ground for IP and Burnout to develop!
3) Know **Systems** resist change. Work in coalitions, actively diversify leadership, and utilize research (e.g. these initiatives improve care, prevent costly absenteeism, terminations, & medical errors).
4) Remember your Big Rocks!