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Invited Commentary

Strategies to prevent burnout: Are grit and optimism the answer?



We all know a gritty individual. That person who just cannot be beaten. Does not stop when a challenge is placed and continues to move forward until the challenge is overcome. When many surgeons think of their strengths, they often cite "resilient", "tenacity", "intense", etc. All of these are favorable qualities and seem on the surface to be character traits we want to select in our surgical trainees. It also seems like those character traits may lead to individuals who are relatively resistant to burnout. However, these traits generally arise as a result of living and working through stressful life events. Success despite trials and tribulations is a mark of a person with grit and it is these events that mold the individuals. Such individuals should absolutely rise through surgical training and be successful. This has been shown to be true and there is little doubt that individuals with grit and determination make great surgical leaders. ^{1–4} In fact, applicants to medical school, residency, and fellowship utilize the personal statement portion of the application to highlight those life events that have given them the grit to succeed in difficult situations in an effort to demonstrate they have the resilience necessary to succeed in a medical profession. Cortez and others examined this question using a grit survey of their general surgery residents and they found a linear relationship between increased grit and decreased emotional exhaustion, depersonalization, and increased personal achievement.³ While this study indicates that grit may correlate with decreasing risk for burnout, the correlation between burnout and the traits associated with grit need to be fully examined.

In the review by Loftus et al., the authors have undertaken a thorough evaluation of surgical literature to explore the positive psychology concepts of grit and optimism.⁵ Through this exploration, the authors have provided insight into these concepts and have made a strong argument that the traits of grit and optimism may decrease burnout. However, it is critically important we always consider limitations of every good idea and make sure we know all we need before the implementation of new "grit training programs" or start using grit scales to help select surgical residents. In addition, optimism seems like a great trait but it is unknown if this particular trait is something that can be learned over time or if it is developed during the formative years. Furthermore, one might wonder if there can be such a thing as too much optimism? Here we will discuss the limitations of both grit and optimism and why training programs designed to encourage these traits may actually prove to be detrimental in the long term.

Limitations of grit

A synonym of growth, resilience, intensity, and tenacity coined

by Dr. Paul G. Stoltz, grit has been defined by Angela Duckworth, a Professor of Psychology at the University of Pennsylvania, as the perseverance and passion for long-term goals.⁶ While Professor Duckworth is a strong supporter of grit and has found that students with high levels of grit are more successful in both academic and non-academic pursuits, she is the first to admit we do not know how to teach grit.⁶ Furthermore, it does appear that levels of grit can change over time but when, how, how much and how fast all remain important questions to answer.⁶

An important part of grit is resilience which is a trait that develops through hardship. A number of philosophers have written about this over the years including Friedrich Nietzsche who wrote "that which does not kill us, makes us stronger." In fact, a common saying in the United States Marine Corp, and one that we have heard many a chief resident say over the years, is "pain is just weakness leaving the body." While it is clear that we want our residents and surgeons to be resilient, the question is can too much resilience be a bad thing?

While the answer to this question cannot be known, there is an interest in understanding when these presumably positive attributes actually might lead to negative outcomes. To some extent it makes sense that someone who is extremely resilient and gritty may have other undesirable traits. For example, extreme resilience may drive people to become overly persistent with unattainable goals. Another potential implication of extreme resilience may be the willingness to being overly tolerant to adversity. This may lead to individuals and surgical residents in particular to be willing to tolerate a toxic workplace, which may manifest as poor communication, infighting, or silently suffering with a dictatorial boss or attending.

Can a Person be too optimistic?

Optimism is another quality trait we look for in surgical residents and in people in general. Positive thinking has been linked to better relationships, increased happiness, and better overall health. Therefore, how can optimism not be a trait that predicts success in future endeavors, especially during surgical residency? It turns out that optimism may lead to detrimental outcomes through harmful risk taking, rationalizing beliefs, and failure to seek new information.

Unrealistic optimism is a tendency for people to believe that they are less likely to experience negative events and more likely to experience positive events than are other people. While this is not necessarily a negative trait, there is no evidence that such individuals tend to be more likely to succeed at tasks even though they may believe that their success rate is higher. In fact, in a study by Tenney and others, optimistic people were found to struggle

longer and have no better chance at success than those who were less optimistic regardless of the task. The risk with encouraging this type of thinking is that we may end up encouraging people to "keep their head up" and try to accomplish things that they ultimately cannot accomplish. An optimistic approach then makes the individual less likely to identify unpromising data, less likely to anticipate costs of decisions or actions, and more likely to exert energy on a fruitless task. Clearly optimism must be balanced with a healthy dose of realism.

Conclusion

In summary, Dr. Loftus and others have written an excellent review of some of these principles from positive psychology. There is little doubt that surgical residents and attending surgeons would benefit from learning more about these principles. While it seems that training programs may be helpful, there are many unknowns to this work that need to be clarified before applying these principles to choosing and training residents in an effort to solve our burnout problems. That being said, there is little doubt that encouraging principles of positive psychology will only be helpful as we look to improve the quality of life and decrease rates of burnouts in our surgical workforce.

Declaration of competing interest

The authors have no conflicts of interest to report.

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