SESSION: Doctors’ Mental Health
Launch of SAMA’s Doctors’ Resilience Programme

Prof Bernard Janse van Rensburg; Dr Vusi Nhlapo
SAMA Practitioner Resilience Working Group
SAMA SURVEY

“Understanding health professionals’ and students’ wellness needs”

SAMA Practitioner Resilience Working Group
- Dr Vusi Nhlapo (SAMA)
- Ms Cassey Chambers (SADAG)
- Ms Natalie Zimmelman (SASA)
- Dr Caroline Lee (SASA)
- Dr Maurice Goodman (Discovery)
- Ms Jalna le Roux (Discovery)
- Ms Phomolelo Moshapo (Discovery)
- Prof Bernard Janse van Rensburg (SASOP/ADASA)
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SAMA SURVEY

“Understanding health professionals’ and students’ wellness needs”

1. Introduction
2. Consent
3. Survey questions
4. Self-assessment: PHQ-9 screening for depression
1. Introduction

- SAMA Practitioner Resilience Working Group
- Medical practitioners and students
- **Aim:** To assist with information on what health professionals’ and students’ wellness needs may be and how a supporting program for members and others should be approached
- Consent, survey, self-rating PHQ-9 for depression
2. Consent

- In terms of agreeing to participate, once a participant have selected the two options in Section I - “Agreement to Participate”, it is considered that s(he) has indicated agreement and the system will allow them to proceed

  - I understand that participating in this survey is voluntary, anonymous and can not, or will not be used to my detriment in any way [click]
  - I herewith agree to participate [click]
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3. Survey

- Section II - Demographics
  - Profession/Speciality
  - Student
  - Gender
  - Age
  - Race
  - Employed in province
  - Employed in municipal area
  - Area population density
3. **Survey**
   - **Section III – Wellness needs**
     - **Question 1.** If you were to seek support for your mental wellbeing, what format would you prefer as a first step of action:
       - i. Online support
         - Access to resource material and referral information
         - Anonymous online chat
       - ii. Telephonic support
         - Dedicated helpline
       - iii. Face-to-face interview
         - Per referred appointment

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Section III – Wellness needs

- Question 2. In terms of the responder to your enquiry, which category would you prefer/feel most comfortable with - listed here in order of referral:
  1. (1) Employee Assistance Program/Student Support Office
  2. (2) Anonymous trained counsellor
  3. (3) A trained colleague in a supporting referral network
     a. In the same specialty/study area as you
     b. In a different speciality/study area as you
  4. (4) General medical practitioner from a supporting referral network
  5. (5) Psychologist from a supporting referral network
  6. (6) Nursing professional from a supporting referral network
  7. (7) Social worker from a supporting referral network
  8. (8) Psychiatrist from a supporting referral network
  9. Other (please specify?) ______________________
Section III – Wellness needs

- **Question 3.** Would you recommend a different sequence of referral or omit some categories? (Please list order of preferred numbers?)
- **Question 4.** Would you refer another colleague who may need support in terms of his/her mental wellness?
  - Yes/No
  - What would your strategy of support and referral be?
- **Question 5.** What would prevent you from taking the listed steps of action above, or seek other help or support for your mental wellness? (E.g. concerns about confidentiality or anonymity, doubt about helpfulness of listed engagements, etc.)
- **Question 6.** What resource material or topics would you consider helpful - listed here alphabetically? (One or more)
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4. Self-rating PHQ-9 for depression
   - PHQ-9 scale - a well-known “open mode” instrument for screening, monitoring and measuring the severity of depression available to anybody using the internet
   - A rating alone, however, are not indicative of any significant problems, or specific diagnosis, but can be an indicator that further steps should be taken to evaluate a person’s health condition
   - PHQ-9 is included to increase self-awareness about how a participant is feeling and to compare responses with data from other health care workers and students.
   - Based on the information provided, it will be possible to refer participants to appropriate resources to consider options in addressing the symptoms
4. Self-rating PHQ-9 for depression

- Over the last 2 weeks, how often have you been bothered by the following problems? 1. Not at all; 2. Several days; 3. More than half the days; 4. Nearly every day

- Questions
  - Little interest or pleasure in doing things?
  - Feeling down, depressed or hopeless?
  - Trouble falling asleep, staying asleep, or sleeping too much?
  - Feeling tired or having little energy?
  - Poor appetite or overeating?
  - Feeling bad about yourself - or that you’re a failure or have let yourself or your family down?
4. **Self-rating PHQ-9 for depression**

- Over the **last 2 weeks**, how often have you been bothered by the following problems?
  1. Not at all;
  2. Several days;
  3. More than half the days;
  4. Nearly every day

- **Questions**
  - Trouble concentrating on things, such as reading the newspaper or watching television?
  - Moving or speaking so slowly that other people could have noticed. Or, the opposite - being so fidgety or restless that you have been moving around a lot more than usual?
  - Thoughts that you would be better off dead or of hurting yourself in some way?
<table>
<thead>
<tr>
<th>PHQ-9 Score</th>
<th>Depression Severity</th>
<th>Proposed Treatment Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 – 4</td>
<td>None-minimal</td>
<td>None</td>
</tr>
<tr>
<td>5 – 9</td>
<td>Mild</td>
<td>Watchful waiting; repeat PHQ-9 at follow-up</td>
</tr>
<tr>
<td>10 – 14</td>
<td>Moderate</td>
<td>Treatment plan, considering counseling, follow-up and/or pharmacotherapy</td>
</tr>
<tr>
<td>15 – 19</td>
<td>Moderately Severe</td>
<td>Active treatment with pharmacotherapy and/or psychotherapy</td>
</tr>
<tr>
<td>20 – 27</td>
<td>Severe</td>
<td>Immediate initiation of pharmacotherapy and, if severe impairment or poor response to therapy, expedited referral to a mental health specialist for psychotherapy and/or collaborative management</td>
</tr>
</tbody>
</table>
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THANK YOU