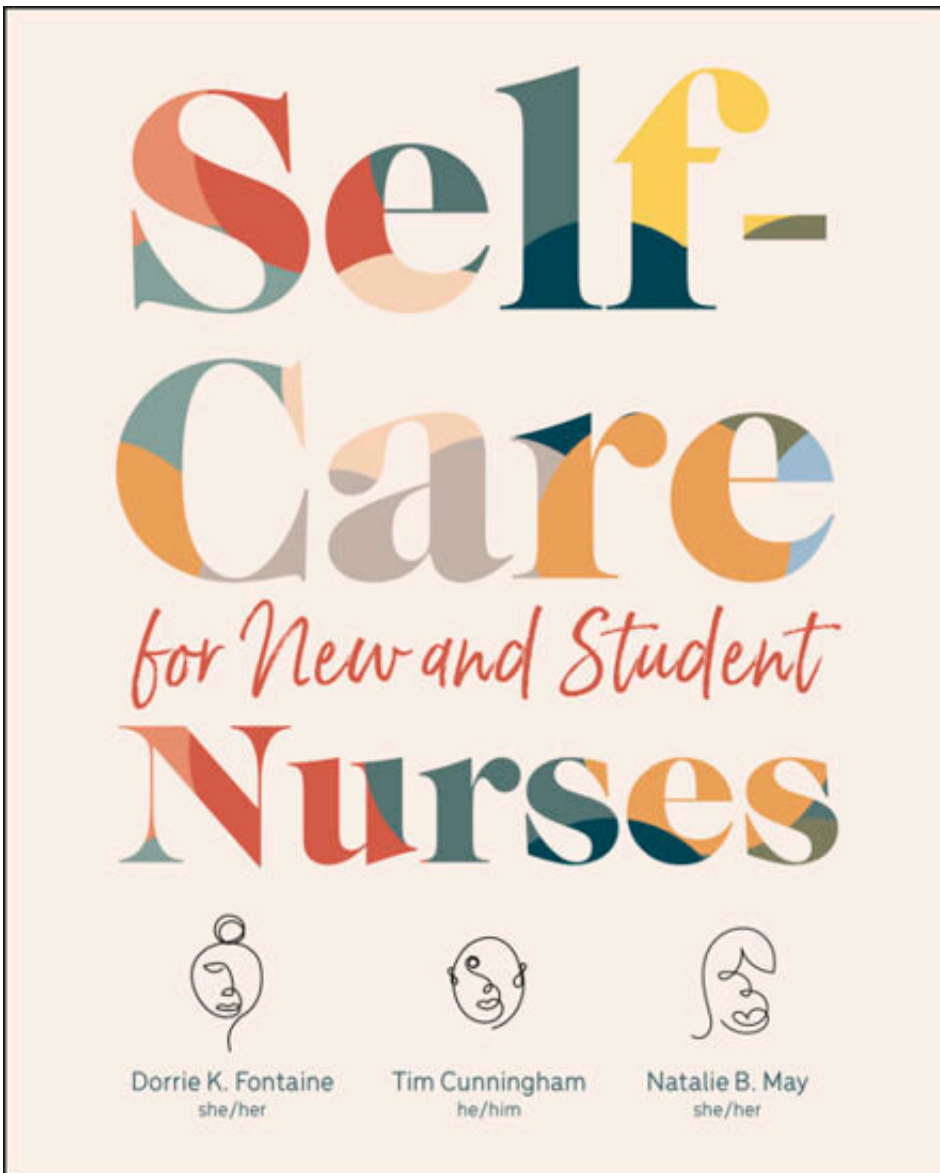


# Helping nurses develop their 'superpowers' for self-care

August 18 2021, by Anne E. Bromley

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Dorrie K. Fontaine et al, Self-Care for New and Student Nurses, SIGMA THETA TAU International (2021)

The public has heard the warning many times in recent years, even decades, and perhaps never so loudly as during the COVID pandemic: "The people who so compassionately care for others are in dire need of care themselves."

That's what the co-authors say in their new book, "Self-Care for New and Student Nurses," where they offer sage advice to nurses that is applicable at all stages of their careers, not just the beginning. New nurses, however, are most vulnerable to burnout during their first three years of practice.

The two co-authors from the University of Virginia School of Nursing—former dean Dorrie Fontaine and associate professor Natalie May—and former faculty member Tim Cunningham (now vice president of practice and innovation at Emory Healthcare) write in the book's introduction that "Self-care remains an imperative for nurses and other health-care professionals as burnout, high attrition rates, emotional fatigue, and moral distress loom large over us, especially in the age of COVID-19."

All three have been teaching nursing students for many years and decided before the pandemic that a book focusing on [self-care](#) for nurses, particularly novice ones and students, would be a great service to the profession, Fontaine wrote in email. They enlisted other professionals to cover different aspects of preventing burnout and nurturing resilience and compassionate care for oneself as well as others.

The book includes contributions from 17 UVA faculty, staff, students and alumni, with essays written by nurses at the bedside bringing the realities of COVID-19 home. Topics for nurses at all levels range from what it means to lead teams with "grit and grace" and a focus on needed

systemic changes in hospitals to the benefits of practices such as t'ai chi and an LGBTQ focus on inclusion.

They wanted to affirm that there are solutions. "It's not all doom and gloom," Fontaine said. "Why not prevent it before burnout takes a hold in the new clinicians and teach the concepts of well-being and resilience in nursing schools?"

For those on the job, three UVA nurses who are also feeling today's stresses, created "[a resiliency toolkit](#)" to give nurses a virtual break and ways to calm down.

Fontaine and May answered a few questions for UVA Today about the burnout problem and learning "self-care superpowers" to build a foundation of well-being in professional and personal life.

## **Q. What is the environment for nurses right now?**

Fontaine: As a very positive and optimistic person, I am worried about the nurses all over the U.S. who are dealing with unceasing workloads, poor and intolerable staffing, and feeling worn out with no end in sight. The data right now from the Southern states is alarming, with 60% vacancies [in nursing positions] and nowhere to turn. This is the worst I have ever seen in my four decades.

In addition, the complexity of patients, people living longer with multiple comorbidities, and the ability of nurses to move into more attractive nurse practitioner, research or educator roles has taken nurses away from the bedside, but kept them still in the profession in expanded roles.

## **Q. Can you elaborate about nursing burnout?**

Fontaine: Nurses throughout the country are experiencing burnout at the highest levels ever, as the pandemic has just layered on top of a normally stressful environment, career and seemingly never-ending issues with staffing and challenging administrations.

The National Academy of Medicine has focused on well-being of health professionals for several years and is working hard to develop strategies to keep professionals from burning out. Many new titles like "Chief Wellness Officer" are cropping up and we're not sure of the outcomes.

### **Q. Was there ever a time when there wasn't "nursing burnout"?**

Fontaine: There were times over the decades when staffing seemed better able to meet the needs of patients and families, and nurses did not go home feeling exhausted and emotionally depleted. Often this depended on enlightened hospital and nursing leaders who went to bat for safe staffing and making sure all had what they needed to do the job. Staffing has been an issue forever.

### **Q. With the stresses that are just part of the job, what would it be like not to have things be too stressful?**

Fontaine: In Chapter 17, I write about "How to find a healthy work environment for your first job" and apply the six standards for a "healthy work environment" (the American Association of Critical Care Nurses set these in 2016) to what nurses want and require to foster well-being and improve retention. Natalie May and Dr. Julie Haizlip also write about what it means to "matter" in health care; everyone wants to believe their work is meaningful and to be told they truly matter.

### **Q. Please describe what you call "self-care"**

## **superpowers."**

May: We were very intentional about addressing the real needs of our nurses, especially during the time of COVID. There are plenty of books and advice out there about sleep, exercise and nutrition, and while we think these are very important, we took a different approach. We looked at all the research on well-being and resilience and saw that the science of brain neuroplasticity is really where the magic is.

The book isn't all "science-y," but we do provide tools to help nurses rewire their brains for resilience and well-being. This takes practice. It takes intention. But it can be done by anyone, anywhere, at any time, at no cost, with no added calories. Practices like cognitive reappraisal or reframing, paying attention, staying present, being curious rather than judgmental, and reflection are all tools that over time naturally help our brain respond better in times of stress.

I call these self-care practices "superpowers that you probably didn't even know you had." We can all do them, and they can change everything.

## **Q. Anything else you want to add?**

May: I think it is critically important to emphasize that self-care and resilience practices alone will not ensure the well-being and safety of our nurses. The most resilient [nurse](#) in the world will suffer a stress injury in the face of staffing shortages, moral distress, discrimination or disrespectful behavior, or a global pandemic.

We need to continue to advocate for health care organizations that care about their workforce as much as they care about patient safety. We need to remember that resilience is relational, that human connections in

our work lives are what will keep us whole.

Provided by University of Virginia

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