

BRAIN STRAIN

MENTAL HEALTH 101 - Part Three Rising from the Ashes

This is our third and final installment of our Mental Health 101 series on Burnout.

We started the series with a sample scenario to introduce the prevalence and fundamentals of burnout. Our second article featured an interview with a functional medicine and psychology expert, Dr. Edalati, regarding the cause and physiological impact of burnout and the slow road to recovery. Our last installment features two stories from BCPVPA members who share their own burnout experiences.

We want to express our sincere gratitude and appreciation to both **Kevin Luchies** and **Dan Watt** for their willingness to be open and vulnerable in sharing their realities. Please heed their learnings and advice to — ideally — avoid burnout, or to mitigate the impact before you turn to ash!

Kevin Luchies

is a long-term BCPVPA Member from Victoria who has been on LTD for more than three years.

Kevin wrote a letter to his Chapter colleagues and the BCPVPA team earlier this year; entitled 'Sidelined', the letter chronicled parts of his LTD journey.

My questions, and Kevin's responses, are based in part on this letter.



RM: Thank you for talking with me today. Can we start by learning a little about yourself and your career?

KL: My story is typical of many Canadians. I'm a child of refugee families. My elders worked very hard. They relied heavily on community. They donated a percentage of their earnings to their faith and gave whatever was required when neighbours were in need. They expected that the opportunity we were given should not be squandered. Education was critically important. Contributing to a greater good was, and remains, a primary driver. Each of us was taught to strive to emulate the shining light of a righteously lived life ... and to sacrifice 'self' when called to do so. Perfectionist personality traits abound. We see these same dynamics in our schools today, as later waves of families send their children to our schools to fulfill the dreams their new country provides.

As an eldest grandchild in both of my huge families, the hopes behind why we needed to flee to a haven like Canada rested on my generation's shoulders. I felt it strongly as a young adult, and no less today. We felt a powerful drive to live up to the privilege we were granted. We have a responsibility to give back – and

pay forward – through service. I was raised by workaholics and ‘giveaholics’. Both were virtues in an era when a unit of work, or unit of giving, yielded a predictable and positive result. These are tricky drivers in our era, and in our vocation, as each are so increasingly complex to execute accurately that we can easily lose balance. Our health, and thus our ability to contribute in the way we choose, can become at risk. We exercise a part of our life’s purpose via our chosen profession in a service context filled with increasing pressures, acute challenges and less-than-sure-to-work solutions.

My small family moved to Ucluelet in 1990 to start a new life on the wild side of Vancouver Island. After four years at Ucluelet Secondary School (USS), and two years at Oak Bay High School in Victoria, I became a Vice-Principal at Oak Bay in 1997. I returned to USS as Principal in 1999. In 2002, I was asked to return to Victoria to support our District’s plan to transition to a middle school model. I was placed at Lansdowne Junior Secondary to help guide it to become Lansdowne Middle. I later became District Principal of Alternate and Continuing Education. I then served six years as Principal of Lambrick Park Secondary School and served as Principal of Gordon Head Middle School for six months before taking Medical Leave on February 1, 2017. I was a Principal for 18 years, and have been on LTD for more than three and a half years.

RM: What motivated you to write ‘Sidelined’, and to participate in this interview today?

KL: I wrestled for a long time, deciding whether or not to send something to colleagues which might help some avoid what happened to me, and might help precipitate required changes in our profession **and** the culture which supports those of us who contribute as servant leaders. I have long believed these goals are necessary. Each supports the best interests of every stakeholder in education – most especially our children. The healthier we are, the healthier and richer our service can be for them. I

believe elements of my story are common. I believe the challenges which led to my illness are **too** common. If I can help one colleague avoid illness, reduce illness, or help one part of our complex service culture heal through my contribution, it will be well worth the sacrifice of a little privacy and sharing how I got ... here.

RM: Before we talk about your burnout experience, and how you navigated that journey, how are you today?

KL: Thanks for asking, Rochelle. I am as OK as I’m going to be. Work-limiting symptoms have not improved, though my lifestyle is healthier and there have been improvements in other areas of my wellness. I lost weight. I have a very healthy diet. I pay close attention to sleep hygiene. We adopted two puppies to build in regular exercise and introduce even more love into our lives. Though I wouldn’t wish the last three-and-half years on anyone, I am well looked after and am truly blessed with a great family and loving friends. Too many are far worse off than I.



I do want to take a moment to stress that my story is not shared to garner pity, sympathy, or any form of appreciation for being open about what happened and is happening. I have a mental illness. It is accompanied by a host of physical symptoms. I am not ashamed of it. I shouldn't be, given how many times in my career I supported people to speak their truth with their head held high to better enable diagnosis, treatment and recovery. The stigma which too often accompanies my illness is an unwelcome shadow.

Begone shadow!

Most people who have what I have, or any of the variations of it, stay silent and simply disappear. It is tempting to stay quiet and let time and the busy lives of my colleagues allow me to drift into whatever that place is where old Principals go. I will soon enough... just not quite yet.

RM: *What do you believe led up to your burnout?*

KL: Tough question. Looking back, there were many factors which contributed to burning out. ***I joyfully worked too hard, for too long.*** Being a school leader for 20 years, and feeling so urgently immersed in the purpose we share, had to be a significant contributor. As I grew in experience, I felt I grew in knowledge. I felt a responsibility to use that knowledge to try to move our profession in a better direction. I became frustrated that I wasn't succeeding as much – and as quickly – as I thought I should. I joined think tanks. I volunteered for Association roles and served in many positions, including Chapter President. I became President of a provincial professional association supporting Continuing and Adult Education. I lobbied hard.

I probably fought too intensely for change without being able to create an effective coalition. I believed I could out-think, out-work, out-argue and out-love any problem or condition. I became philosophically out of balance with many I served alongside. It doesn't matter now if I was right, wrong, or part way between. Those who know me knew where

*"I joyfully worked too hard,
for too long."*

I stood. Assigning grades of righteousness about my positions are theirs to give ... not mine to take. It was enormously stressful. Maybe there was no other path, maybe I didn't try hard enough to find one. By the time I had to leave active service, I felt more isolated than I ever thought was possible.

Feeling out of sync with my employer and some colleagues wasn't enough to bring on illness by itself. I was strong, confident, sure, stubborn and resilient ... and too proud. Life eventually caught up with *that* and washed much of the resolve I had away. I had a sequence of events which came in a long steady wave for almost exactly ten years before I was ultimately stricken. It started when someone very dear to me was injured in an accident in 2006. In addition to the increasingly difficult challenges this presented, there were four very traumatic events which happened a few weeks apart from October 2016 through to January 2017, which took my legs out from under me, and I've yet to regain them.

The incidents were incredibly difficult. Each were of the kind each of us deal with – or will deal with – in our careers and personal lives. Death, dysfunction causing harm, and more death. They came at just the wrong time, and in just the wrong sequence, after two decades of working as hard as I could as a school leader.

RM: *What were the early warning signs and when did you reach out for help?*

KL: I stopped being able to recover energy and concentration through getting good sleep for about a month before I knew something was really wrong. All of the ways to describe exhaustion in our profession were given voice during the 2016 Winter holiday. By the time I first saw my doctor, near the end of January 2017, he tried to convince

me to stay home and begin finding a diagnosis. He knew I was too far gone to continue. My doctor thought I was burned out right from the start. Given I was an infrequent patient – and had been healthy – he voiced a prediction that came to pass many months later. He said we need to rule out biological causes before we would arrive at the likely truth that I was traumatized by those life events I referenced. I smiled. I disagreed. I refused to stay home – but said I'd be careful.

A week later, I came home from a long, rough, day and collapsed on the couch. My life partner said as surely as she's ever said anything to me: *"You aren't going in tomorrow. Period."* I knew she was right. I was starting to blank out while trying to finish tasks. I started to forget names and everyday facts. I struggled speaking in complete sentences. I felt like I had a long-term low-grade flu. I was exhausted to a degree which I still struggle to describe, as it has not abated. My whole adult life I had been able to leap out of bed at 5:30am, pound through a 12-14-hour day, maintain a family and community life, and volunteer. I always felt there was a limitless pool to tap into ... until it was clear there wasn't. I felt more than a little lost.

"I always felt there was a limitless pool to tap into ... until it was clear there wasn't. I felt more than a little lost."

RM: *Once you agreed to stay home and begin a medical leave, you started your diagnostic journey. How did that unfold?*

KL: After three years of tests, amazing care by my doctor, two psychologists, two internists, three psychiatrists, a cardiologist, a whole host of tests via machines that whirled and went 'ping', and eight trials with medications, my primary symptoms have not abated. Only time and the

healthiest regimen I can maintain are left to see if I can regain some of the vitality I thought would never wane. I simplify live life as much as possible, and try to be as healthy as I can. I have now phased into a longer-term category of LTD. I am now one of 'those' who may not ever be able to return to the service they left.

RM: *What is it like to be away from service? Any reflections you'd like to share?*

KL: There are some nice things about being away from what had been 20 plus years of working so earnestly. More and regular sleep. Having a calendar that has few stars, asterisks or exclamation points punctuating the events of a day. Petting the cats. Walking the puppies. Watching a whole movie. It isn't all bad.

It just wasn't, and still isn't ... time. I never got to choose.

One of the most difficult byproducts of disappearing as I did, along with all of us who are suddenly afflicted, is the sidelines we find ourselves on are not 'present' and visible for long as our educational communities carry on with the urgencies of each day, week, month ... and year. We are left behind, and literally vanish. Too many of us thought we were so important and needed that the big wheel couldn't possibly spin without us. We have learned the hard truth that *"Nobody has yet lived who can pull their hand out of a bucket of water and leave a hole"*. We lose being needed. We lose professional social lives. We lose collegiality. Lastly, as we fade and busy lives around us carry on, and the truth resonates that chronic illnesses are never fun to be around, we lose friends. Doubts creep in. How did this happen? What did I do wrong? What should I have done more often ... or better? What part of my work and professional context could have been more supportive or structured to protect my health and wellbeing as much as we are charged to protect the health and wellbeing of those we so urgently care(d) for?

I've had to do a lot of self-coaching to remind myself that I served long and well. I mattered. I matter. After years of using Cognitive Behavioural Therapy techniques to help others, I have relied heavily on those same lessons to fortify the truth that I was – and am – valued and valuable. I have an even deeper gratitude in my heart for those I shared those years with, and those of you who continue.

RM: What advice would you give your colleagues – or your younger self – to avoid burnout?

KL: *First*, only you are responsible for your health. Be filled with purpose. Feel needed – because you are needed. Build circles of influence and a fulsome portfolio of responsibilities. Give. Receive. Go hard ... **BUT** ... find and keep balance. Take careful time for you. Don't be one of those who brags about retiring with 500 sick days in the bank and passes away at 64, proud but spent.

Second, build a solid network of professional and personal confidants. Talk often. Go for coffee. Try to find 20 minutes to close the office door, call a colleague, and seek full, collaborative, honest input. Close your door for 20 minutes when the call comes for you. Have a hobby away from school. Nurture friendship circles away from your professional life.

Third, if you find you are struggling with any part of your health in a way that strikes you as unusual, see your doctor. Drive the bus. Ask questions. Research your own symptoms. Ask for tests. It is a partnership. Insist. I can't tell you how important it is to be proactive and co-manage your own care.

Fourth, if you and your doctor feel there is a recommendation for you to take some time for diagnosis, treatment or healing, call BCPVPA and speak with one of the Member Support Services team. A two-week rest can turn into something you never imagined possible. You need to know what supports and services are there for you ... and which are not. **Only** BCPVPA can give you the full and accurate advisement you require. They may refer

"... only you are responsible for your health. Be filled with purpose. Feel needed — because you are needed."

you to *humanworks* to access Early Intervention Support (EIP). They will guide you through layers of Leave protocols. *Thank you, BCPVPA team!*

Finally, set aside time to do your part to create a better, more powerful, and more 'supportive-of-the-role-society-needs-you-to-be-healthy-enough-to-do' coalition which will help take our Association – and our profession – to a better place. You can help diminish some of the stressors which are contributing to more and more colleagues being left on the sidelines. 'Work Intensification' is everywhere in our Association discourse now. Years ago, we talked about being overwhelmed and took steps to try to figure out what 'wellness' was, and how to get it. Today's challenges are *growing in number and intensity*. There are three times more of 'us' away for mental health issues today than not so long ago. There will be more before we figure it out.

I encourage each of you to read BCPVPA Executive Director Kevin Reimer's essay entitled: 'The Last Word' at the end of the first edition of Principi(ed) magazine. Kevin succinctly outlines where our Association is, and where we need to go, to live the full promise of what BCPVPA Version 2.0 could mean for all of us. For a little over 40 years, we have experienced service condition deprivation as Vice-Principals and Principals. These have brought us to a state that is unsustainable. Meet. Discuss. Support Kevin and your elected representatives. Students, families, staffs and our wider community will benefit. YOU will benefit - and be able to have a better chance to serve as *long and as vitally as you choose*.

Dan Watt

has been a Vice-Principal or Principal in Prince George for 13 years, and returned to work in February 2020 after four months of recovery.



RM: Dan, thanks for agreeing to speak with me and sharing your story. Let's start with an introduction to your background.

DW: Sure. I was born and raised in Prince George and come from many generations of teachers. My mom was a nurse. So, it is understandable, coming from a background of 'helping professions', that I would develop a caretaker personality. Helping others is something I am good at and enjoy. I like to help people solve their problems. However, this desire to help others can become an over-extended strength. I can create situations where a dependency may develop. Sometimes our strength, skill, or personal 'superpower' – when used to an extreme – can be problematic.

Teaching is a second career for me. I went to school at 30-years-old and completed a couple of degrees, including teaching. I taught for four years before going into administration. As I

was encouraged by my first Principal to take on leadership roles, I applied to be an administrator early in my career. I have been a Principal or Vice-Principal for 13 years in seven different schools – all in SD #57 (Prince George). My first job was in a large Elementary school for two years as a Vice-Principal with teaching time. SD #57 then opened a large elementary school for 700+ kids where I was a Vice-Principal, and then I was a Principal at two small rural schools. I wanted high school experience, so I then became a Vice-Principal at my old high school for a couple of years, and went to my last assignment prior to my leave, at an inner city school which was large and complex. Since I have been back to work, I am now at an elementary school in a more affluent neighbourhood.

RM: *What do you believe were the factors that contributed to your burnout?*

DW: There were a couple of things going on for me, both professionally and personally.

I had been at the inner-city school for four and a half years. The kids and families there had the kinds of challenges that are unsolvable in the school system: poverty, homelessness, addictions, trauma and abuse. We would try to help as best as we could from the school, but these are bigger societal issues.

I discovered over time that just as I would get a handle on one child and their family, and learn how to support them and work with the multiple agencies (which could take from one to three years), then another family with similar issues needing different solutions would appear. It felt like a revolving door of unsolvable problems. I knew that this posting would be challenging, but didn't understand the toll it would take on me.

On the personal front, around this time I ceased participating in a long-time hobby that both my wife and I enjoyed together. This hobby not only brought me joy, but was a considerable source of exercise, provided a network of relationships, and

enabled me to hone some special skills. I poured a lot of time, effort and money into this hobby which also formed a component of my identity. We ended this hobby at the right time for our family. However, discontinuation meant that I lost the valuable social connections, and the respite it gave me from my work life. I under-anticipated the time it would take to fill the huge gap this left, including the need to develop new social relationships and a new schedule.

RM: *Looking back, what were some of the first early warning signs you experienced that indicated you were starting to burn out?*

DW: The big one was that I was tired all the time. Actually – beyond tired. I discovered that having a good sleep, resting on the weekend, or even having the summer break, no longer helped me feel refreshed. I felt constantly depleted. I could never get my energy back to normal.

I also started to get feedback from people close to me. My wife told me it was time for a change as she could tell I was weary. I would say, "I can do this, I will muddle through and make it through one more year". I think I was aware on some level that I wasn't bringing the best version of 'me' to the work, but avoided it because I felt guilty or ashamed that I couldn't handle things.

Then a good friend who is my running partner (it is good to have critical friends!) kept pointing out the same things my wife was noticing. I kept trying to put my head down and persevere at work. I continued to not listen to the people close to me.

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RM: *What else did you experience?*

DW: I believe my tinnitus is a direct result of this burnout: a non-stop ringing in my ears. I was regularly irritable and angry. I had depleted my adrenals as my system was on red alert and constantly in fight or flight mode. I couldn't find enough time to rest and reset my system.

RM: *When you felt this fatigue and early warning signs, did you seek medical help right away? And if not, why did you delay getting help?*

DW: No, I never considered medical help as an option at the beginning. I did not think that I was sick or unwell. I just felt I was tired due to my work situation.

I only sought medical help after a particularly difficult workday and a realisation.

RM: *Tell me about what happened on that day that was your 'tipping point'?*

DW: In mid-October 2019, I had a fairly typical challenging day. I had a crummy situation brewing with a staff member that I knew was going to result in an investigation. I was then called out to a Violence Threat Risk Assessment as I was one of our District VTRA team leads. I needed to drive two hours to a nearby community to do the risk assessment. As I got in the car and got a coffee, I felt like I was heading off on holiday. This was an odd feeling, considering I was going to a school to deal with a crisis. I got there, interviewed parents, teachers, and kids. It was someone's crisis, yet I felt like I had the day off. I felt like my head was finally above the clouds. I then had to return to my regular school before dismissal to address the employee concern and draft a letter. The meeting with the employee did not go well: frankly, it went sideways and hit me hard emotionally. I ended up going home earlier that Friday than I normally would.

I went home and told my wife about my feelings of being on a holiday when I was offsite dealing with a crisis, and she pointed out that that did not

seem normal. On my Sunday run with my friend, she suggested that maybe I needed a day off as things didn't sound like they were going well.

So, I thought – "OK. Yes. I will take a day off." I was feeling enough intensity that it had pushed me to the brink. It had worn me down so much that I wasn't sure I could go back on Monday, if ever. Just experiencing that thought was difficult, as was saying it out loud to my wife. I felt like it was a risk to say it out loud, like I was letting something come into my world that was out of my control. Could I navigate this? Yet, to say it out loud was like giving me permission to not go back.

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I called my physician Monday morning and was in by 10 am. I explained my situation to my doctor who said that to continue was unmanageable, and that I needed a least a couple weeks off to get a good perspective on my situation. Two weeks! This was surprising. My doctor felt that I was likely experiencing extreme anxiety, maybe even depression. He prescribed me meds: I was resistant. He explained that the medication was for a specific diagnosis, and would help calm me and allow my system to reset.

I felt that there was someone else to care for me, that my doctor had given me permission to take the time to recover.

I called my supervisor. We have a good relationship, and she has been my supervisor for many years through many roles. I can always call her, and feel that she always has an open door. She was

empathetic and encouraged me to take all the time I needed to get well.

The interim Superintendent, once he heard of my situation, met with me and was grateful that I was taking time to get well and that I was to take all the time I needed to get well. He shared the plan for my school while I was gone, and told me not to worry. I was to let them know when I was ready to return and they would help me reintegrate back. I had great support from my district.

RM: *Once off work, how did your recovery progress?*

DW: When I left work, I did get a couple of emails, my supervisor certainly kept in touch. However, I felt VERY isolated.

My physician was great in many respects, but not super helpful with the tinnitus I'd developed. My tinnitus worsens when my energy is depleted and/or I am dealing with emotional issues. The ringing becomes louder and is very persistent, and I become more irritable.

I discovered a naturopathic physician who had lots of suggestions to help reset the nervous system. These suggestions ranged from tapping and toning (tapping acupuncture points), repeating a mantra using a vibrational technique, and supplements to help the adrenal glands. Acupuncture has been suggested, and I am still getting my nerve up for the needles!

I discovered that your level of health support really depends on who you talk to – not just the right specialty, but the right person, one who you feel is a good fit and who is really interested and has experience with your specific issues. I went through three doctors in the medical practise. It is important to seek out a variety of experts as they bring different strengths, different opinions, and introduce you to different resources and ideas.

RM: *What do you believe was the key intervention that helped you to start to feel better?*

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DW: Simply being away from work: giving my brain some time and space away from emails, and permission to tune out and not deal with anything work-related. I was also fortunate to have entered into a contract with a leadership coach before I went off work. I kept this coaching going over the year which really helped. I also had a great connection with Jack MacNeill at *humanworks*.

RM: *When were you ready to return to work?*

DW: To be honest, I personally felt an obligation to come back. I was not pressured by my district. I really felt that I had abandoned my Vice-Principal in my old school by leaving her in that situation. I had been assigned to a new school in January 2020 while I was still off work: I felt that I needed to return to support my new Vice-Principal and the staff at my new school.

RM: *How did the return to work go?*

DW: I felt some pressure from the new staff to be more present at the school; they communicated that they needed me to have a strong presence. This was challenging. When I started coming back in February, I needed to start slow. It was impossible to do this job part time. It was helpful that my physician would pull me back and slow me down as I kept trying to push. She was an important part of this journey.

I came back in February 2020 for six weeks, and then COVID-19 hit. We then had to welcome CUPE staff back. Here I was in a new school, and I did not

know anyone. This was certainly an unanticipated part of my return. I thought I was ready when I returned to work in February, but then: COVID. I felt the need to step it up with a desire to be back full time in June. I think I pushed it.

RM: *How are you faring now?*

DW: This Fall, I am back and doing my best with self-care routines and setting boundaries. I am careful to only schedule 70% of my time – instead of 100% – to make room for the unexpected. I do not ever feel rested. It is a delicate balance. I want to finish the year strong.

I am still on my journey. I am not as rested and able as I could be. I am still not feeling my best, and often wonder what I could have done differently.

And here lies a gap. I know people in the district cared and were supportive. But our system is not set up to help me return to work any differently. Coming back to a permanent .8 position is not an option. I know that many administrators who cannot do the full 1.0 FTE get pushed back into the teaching pool, and this isn't right. I feel that this is a system issue that needs to be addressed: is this just an expense item?

The biggest piece I am still working on is to build back my social network. I have always relied on my relationships for support: I am stronger with others than on my own. My social circle is a part of my emotional support. I think that developing these relationships is challenging due to the volume of work, and partly due to COVID.

RM: *What is different in your life now since you experienced burnout?*

DW: Diet is now a bigger component of my health. When I take the sugar out of my diet, I have way fewer mood swings, less hunger. I am more even keeled. I also keep an eye on the quantity of what I eat.

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I have a very different perspective of my work and the importance of work in my life. I am replaceable. I am less defined by my job now. I give less importance to it. It is still a crucial role and has a tremendous impact on our society, which is wonderful. But I look at it now as a smaller piece of my overall time. I now have a whole bunch of aspects to my day and week that need fulfillment, instead of primarily one.

It is hard, as people may not understand how or why things are the way they are with me, unless they have experienced a similar situation. Staff may not like that I may have boundaries they do not understand. There are sometimes snide comments and opinions. But I know what I need for my own health.

RM: *Looking back, what advice would you give others to avoid the burnout you experienced?*

DW: For me – keep your friends close. Pay attention to the signals that come from those around you, and get help when needed! Keep close networks, both professional and personal. Value those connections as they are the ones where you can be most genuine. This is what helps sustain me.

I also learned that the unsustainable pace that I used to strive to achieve pre-burnout could not continue. I had to redefine things.

You can do this anytime: don't wait to burn out.

A Word from Rochelle Morandini

When interviewing both Kevin and Dan, and upon reflection of my own experience with clinical burnout, I was struck by the similarities in our experiences. Although each of us had unique circumstances, the causes, impact and learnings are eerily similar. Those include:

- Understanding how core beliefs and behaviours developed in our upbringing can be strengths that – if not managed – can become over-extended and cause harm. Take a moment and think about your core beliefs and how they influence your perception and approach to your role, and how you cope.
- How a strong work ethic, or an “*I can handle anything*” approach, can be a fast track to burnout if you do not set boundaries within yourself and with others, as well as not taking time to recuperate. Finding ways to add 'space' in your day and life is so important to 'cooling the electrical circuit' that is your brain. Be disciplined in self-care and in setting your boundaries now before it is too late.
- Our identity with our role can be all-encompassing, and we pour our heart, ethics and values into our work. When our working experience is in conflict with these values, or when we can not 'win' the fight we so believe in, this can take a toll on our mental health. Our reserves get low, and then something from our personal life can tip the scales of our health as we have little energy and resilience left. Seeking coaching or counselling to help you regulate your thoughts and perceptions when you are struggling with inner conflict is

a sign of self-awareness and growth, not of being fragile.

- Early warning signs of burnout included a level of fatigue that was all-encompassing and with no ability to improve. People close to you often are concerned and know that something is off. This is the time to react – now! We are all too quick to say, *I can hang on another day, week, month, year...* We do not want to admit vulnerability or 'weakness', but this is not weakness: it is a sign that your strength has been over-taxed.
- People who burn out readjust their behaviours in order to cope or recover; if they had adopted these behaviours sooner, they may not have burned out at all. These are behaviours that would have offered them a greater ability to recover. It reminds me of people who experience significant back injury or have had surgery. These are the folks who stretch regularly and lift properly, as they had to learn the hard way to take better care for their spine. Same goes here: don't wait until you are so far gone to adopt these behaviours. Believe me when I say, every day that you do not address burnout adds to your risk and the duration of recovery time.

At the BCPVPA, we want to support our members' health and well-being as much as we can. Sadly, we cannot stop the 'rocks' falling on you from the sky, but we hope we can help you to strengthen your shields. Look for tips and learnings on self-awareness and coping in our upcoming series **ReCharge**. We will also be sending you weekly 'reminders' to take a moment for your health in our **ReFresh** outreach, with ideas that take only minutes per practice, and help you to consciously rest your brain. Resilience is not built on just pushing forward continuously through the quagmire. It is ensuring small recoveries throughout the day so that you can carry on with strength!

For more information and support, contact me at rochelle@bcpvpa.bc.ca.