Problem

• National Physician Suicide Awareness Day (#NPSADay) is here to help break down the culture of silence around physician mental health and suicide.

• Unfortunately, as we move farther from the onset of the pandemic, physicians, medical students and residents are still facing mental health concerns, with medical students and residents struggling even more than physicians.

• More than half of physicians feel inappropriate feelings of anger, tearfulness or anxiety purpose (compared to three-quarters of medical students and 68% of residents); one-third feel hopeless or that they have no purpose (compared to and 43% of residents and more than half of medical students) report withdrawing from family, friends and co-workers.

• Six in 10 physicians and residents and seven in 10 medical students often have feelings of burnout, well above the pre-pandemic percentage of 40% (of physicians) in 2018. However, burnout alone doesn’t always lead to suicide. When left untreated, burnout can cause more cases of depression, anxiety, post-traumatic stress disorder (PTSD) and substance misuse and lead to suicidal thoughts for physicians, directly impacting physician suicide rates.

• Physicians have one of the highest suicide rates of any profession. More than half of physicians know a physician who has either considered, attempted or died by suicide in their career. One-fifth of physicians and residents and one-quarter of medical students know of a colleague/peer who has considered suicide in the past year. It’s estimated that one million Americans lose their physician to suicide each year.

• In fact, eight in 10 physicians and residents and three-quarters of medical students agree that there is stigma surrounding mental health and seeking mental health care among physicians.

• It is vital that we make a conscious and forward effort to break down stigma and encourage physicians to talk about their mental health and seek support when they need it.

Solution

• Now is the time to take steps to prevent physician suicide. On National Physician Suicide Awareness Day, we are committed to raising awareness of the physician suicide epidemic and galvanizing physicians, their colleagues and their loved ones to create a culture of wellbeing that prioritizes reducing burnout, safeguarding job satisfaction and viewing seeking mental health services as a sign of strength.

• Together, we can shift the paradigm from a system where physicians think that burnout, depression or suicidal thoughts are something they can, or must, overcome by themselves, to one where they see the support system around them willing to help them seek mental health care.
**Action**

- National Physician Suicide Awareness Day (#NPSADay) is a reminder and call to action. It’s a time to talk – and to act – so physicians’ struggles don’t become mental health emergencies.
- We can all help prevent physician suicide by learning the signs, starting the conversations, creating a culture of wellbeing, removing intrusive mental health questions from applications and sharing the resources that can help those in distress seek mental health care.
- There are SEVEN ways physicians, their loved ones, their colleagues, health organizations and others can take action:
  - Learn the Vital Signs
  - Encourage mental health reflection
  - Share suicide prevention resources
  - Prepare before a moment of crisis
  - Check in with a physician
  - Remove intrusive mental health questions
  - Create a culture of wellbeing
- Visit NPSADay.org to learn more about how to take action and help prevent physician suicide.
- Supporting organizations’ activation can take many forms – from hosting an event or group conversation on the importance of breaking down stigma surrounding physician mental health support to hanging posters, sending postcards and capturing your #NPSADay in action.
- Individual action looks different for everyone. National Physician Suicide Awareness Day encourages physician, their loved ones, their colleagues and others to learn about the physician suicide epidemic and support physicians in their lives.
- Take the time to reflect on your mental health with Dear FutureDoc notecards and signs. Medical students and residents can write a personal message to their future selves as encouragement for their mental health and wellbeing. Medical students, residents and physicians are also encouraged to share their hopes for physician wellbeing in 2043.
- If you or someone you know may be considering suicide, call or text the 988 Suicide & Crisis Lifeline for free 24/7 support.

**Q&A**

**Q: What is National Physician Suicide Awareness Day?**

**A:** National Physician Suicide Awareness Day is a reminder and call to action to understand the underlying barriers to mental health care for physicians and create open dialogue that can help those in distress seek mental health care. We can all help prevent physician suicide by learning the signs, starting the conversations, removing intrusive mental health questions and sharing resources that can help those in distress seek the mental health care they need.

**Q: When is National Physician Suicide Awareness Day?**

**A:** National Physician Suicide Awareness Day takes place every year on September 17.
Q: What is happening on National Physician Suicide Awareness Day?
A: Physicians have one of the highest suicide rates of any profession, and more than half of physicians know a physician who has either considered, attempted or died by suicide in their career. It’s estimated that one million Americans lose their physician to suicide each year. By creating safe and accessible spaces where physicians feel comfortable talking about their mental health, we will reinforce that physicians can have struggles with mental health – just like everyone else – and engaging in open dialogue is the first step to getting the attention they need to seek care.

Q: What are some of the barriers that exist for physicians receiving mental health care?
A: Clinicians aren’t seeking mental health care despite high rates of burnout and stress. They fear losing their license and credentials because of overly broad and invasive mental health questions on applications that are stigmatizing, discriminatory, and violate privacy in the workplace – and may even violate the Americans with Disabilities Act (ADA). There are 6 key structural barriers that prevent physicians from seeking the mental health care services they may need:

1. State medical licensure and renewal applications
2. Hospital and health system privileging and credentialing applications
3. Commercial insurance credentialing
4. Malpractice insurance applications
5. Legal discovery process during lawsuits
6. Mental health insurance requiring treatment where the physician works

Health organizations can help address these underlying, structural barriers physicians face when accessing the mental health care they may need. Many credentialing applications still have invasive and stigmatizing language surrounding mental health. Every health and hospital system should audit their credentialing applications, addendums and peer review forms; change any invasive or stigmatizing language around mental health; and communicate these changes to their workforce and assure clinicians that it is safe for them to seek care. Knowledge is power, and in this case has lifesaving potential. This action is a transparent and measurable way that every health and hospital system can support its more valuable resource – its physician workforce.

Q: What are some of the burdens that impact physician burnout, mental health and suicide rates?
A: While there are many factors that can lead to burnout among physicians, the majority of burdens are rooted in the health care system. Low-value, administrative tasks have introduced a heavy burden into the daily workload of physicians, which can lead to burnout. Additionally, physicians are experiencing a health care worker shortage, their colleagues are retiring early and their patients are facing health care inequities. In fact, more than half of physicians report they often have feelings of burnout when addressing their patients’ drivers of health (DOH). If left untreated, burnout can cause more cases of depression, anxiety, post-traumatic stress disorder (PTSD) and substance misuse and lead to suicidal thoughts for physicians, directly impacting physician suicide rates.

Q: Where can I learn more about National Physician Suicide Awareness Day?
A: You can access further information and a comprehensive toolkit at NPSADay.org.
Q: I’m already practicing improving my mental health. How can I help others?

A: You can help others by sharing your own story to help end the stigma and encourage other physicians to share their experiences and determine what mental health care works for them. You can use Dear FutureDoc resources as a way to reflect on your own mental health and wellbeing, encourage others and share your hopes for the future. When sharing your story, remember to share:

- The full continuum of your mental health experience from thriving to coping to struggling and the range of factors that contribute to your mental health journey.
- The type of mental health care support and services that worked for you that may work for others.
- The coping skills and self-care that support you day to day while practicing medicine.