



## Supporting Residents on Their Journey

**The Psychiatry Resident Handbook: How to Thrive in Training.** Edited by Sallie G. De Golia and Raziya S. Wang; American Psychiatric Association Publishing; Washington, DC; 2023; ISBN 9781615374113; pp.582; \$67 (paperback)

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Many psychiatry educators can likely recall the uncertainty experienced prior to the start of residency. What will it be like to have my own psychotherapy patients? When should I start to pay back my educational loans? Am I ready to teach medical students? How will I cope if one of my patients ends their life while under my care? Given the significance of the transition from medical student to practicing resident physician, it is important for psychiatry learners to feel supported in this process. *The Psychiatry Resident Handbook: How to Thrive in Training* is designed to be part of that support and is a beneficial text for any students preparing themselves for residency training in psychiatry.

Containing 41 chapters and an appendix of well-regarded journals, seminal articles, and podcasts intended as references for self-directed learning, this handbook covers a wide range of topics. This volume is divided into six parts, namely Understanding Residency, Centering Our Identities, Approaching Clinical Work, Building Skills, Developing a Career, and Maintaining a Professional and Personal Life. The stated objectives are to “formalize wise guidance from experienced residency faculty as well as current residents-in-training from across the United States” and to “make explicit what residents otherwise often learn implicitly” (p. xiii).

Part 1, Understanding Residency, describes the transition from student to resident as one where the learner must shift from “getting high marks on tests and doing well in clerkships” to being more directly responsible for patients and one’s own learning (p. 5). The authors include a table on stages of resident development that concisely lists typical

clinical rotations per year and professional and identity development tasks that should occur as one advances from postgraduate year (PGY) 1 through PGY 4 (e.g., learning a new institutional culture, building skills in teaching, starting to integrate identity as a psychotherapist, considering postgraduate employment or training). This section contains a brief description of the past, current, and future landscape of psychiatric care within the USA, as well as challenges within the field of psychiatry, such as stigma, other professions’ desire to extend their scope of practice, and health care inequities.

Part 2, Centering Our Identities, includes chapters on approaching residency as a member of an underrepresented group in medicine and as an international medical graduate. Discussions of racial, gender, and sexual minorities stress the importance of establishing supportive mentorship and supervision. This section contains a reminder for all psychiatric educators that underrepresented residents might face problematic behaviors from patients related to their identity, such as microaggressions and refusal of care. Although policies exist for protection against discrimination from colleagues and supervisors, there are no such safeguards for patient-related attacks, leaving residents to rely on program directors, clinical supervisors, and hospital leadership to help set appropriate boundaries. This chapter ends with a section for non-underrepresented readers on how to become an ally (e.g., supporting minorities through learning about their experiences) and “co-conspirator” (e.g., utilizing privilege and resources to “put themselves on the line”) (p. 50), through a process of education, recognition of privilege, and demanding change without taking center stage.

Part 3 is the largest section of this volume and contains 16 chapters related to clinical work within psychiatric residency. This part of the book contains several helpful tables,

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such as a comparison of different types of case formulations (e.g., biopsychosocial, structural, cultural, psychodynamic, and cognitive behavioral), with pros and cons of each; strategies for navigating challenging interactions between staff and residents while on-call; key topics to review while rotating through non-psychiatric services; benefits and drawbacks of various forms of supervision (e.g., direct vs. indirect, live vs. asynchronous); and important components of the chart review for consultation-liaison service. Two chapters focus on best practices in medication management and psychotherapy, which contain many useful pearls for early practice. For example, in the former, the authors describe how to approach patients who are ambivalent toward taking medication or nonadherent to prescribed medications. In the latter, the authors make practical recommendations for preparing the therapy space, such as placement of seating, one's computer, and a clock, as well as preparing for communication outside of the therapeutic session to reinforce appropriate boundaries. The chapter on patient suicide describes the myriad feelings that one may encounter following this type of trauma and helps to normalize potential reactions. The authors give guidance regarding communication with the deceased patient's family and acknowledge that grief following a patient's death by suicide is a process that may take time and may ultimately lead to more meaning in one's work, such as through advocacy, research, or deepening connections within the workplace.

Part 4, *Building Skills*, focuses on those skills that should develop beyond the clinical domain, such as developing self-compassion and a growth mindset, communication, teaching, leadership, and advocacy. This section includes a chapter on navigating social media, which discusses pitfalls to use, such as a blurring of the line between the personal and professional, permanency of past posts, and liability. The authors give a practical acronym when considering what to post on social media, THINK: is it true, helpful, inspiring, necessary, and/or kind? The chapter on advocacy highlights many ways that residents can become effective advocates, including on the individual level (e.g., educating oneself on

issues impacting patients), the level of the organization (e.g., changing policies within the health system or a professional organization), in the community (e.g., connecting with others to organize for action), and governmentally (e.g., working toward policy change).

*The Psychiatry Resident Handbook: How to Thrive in Training* ends with a section on career development and maintaining a professional and personal life. The authors of these chapters discuss how to approach one's first job post-residency; the consideration of fellowship training; negotiating skills; initial board certification and maintenance of certification; work-life balance and wellness; and handling discrimination, mistreatment, and physician impairment. The book ends with a concise chapter on personal finances, which includes basic information about repaying educational debt and investing for the future.

As evident from this overview, *The Psychiatry Resident Handbook: How to Thrive in Training* is quite comprehensive in content. It is written in a concise, thoughtful, and practical manner. The editors recommend that the book be used intermittently, with learners reviewing the chapters that are most relevant to them at a specific time. I appreciated the robust list of resources at the end of each chapter and the appendix with tools for self-directed learning, both of which significantly add to the overall value of this work. Although there is certainly a breadth of topics, some readers may interpret this guide as somewhat superficial in depth. Given this perspective, the handbook should be utilized as an additional support for psychiatrists-in-training and should not replace the meaningful conversations that occur between learners and their close mentors.

## Declarations

**Disclosures** The author states that there is no conflict of interest.

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