

## Multiple stressors contributed to physician burnout during first wave of COVID-19 in the US

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Front-line physicians who cared for COVID-19 patients during the first wave of the pandemic in New York City and New Orleans reported



multiple factors that contributed to their occupational stress during this extraordinarily trying time in their careers.

These included individual-level factors such as age, work experience and life stage; institutional-level factors such as resource disparities, institutional type and size, and policies; professional-level factors such as informal rationing and medical uncertainty; and societal-level factors such as the federal response, COVID politics, and social inequalities.

"At this point in the pandemic, it's well recognized that <u>burnout</u> is pervasive in medicine," said Mara Buchbinder, Ph.D., professor and vice chair in the UNC Department of Social Medicine and lead author of the new study published in the *Journal of General Internal Medicine*.

"What is less well understood is how deeply entrenched it is in health systems stress. Physicians are sick of being told to heal themselves through yoga and mindfulness when the underlying systems are broken."

Study authors conducted qualitative, semi-structured interviews with 40 physicians from 14 hospitals in New York City and 39 physicians from 9 hospitals in New Orleans. All had spent at least 4 weeks providing inpatient COVID-19 care beginning in March 2020, when both cities were experiencing the first surge of the pandemic in the United States.

The stressors most frequently cited by the physicians during their interviews included:

- Concerns about being exposed to COVID-19 and/or transmitting it to their family
- The volume and burden of patient deaths
- The volume of patients/workload
- Medical uncertainty over how to care for COVID-19 patients
- Caring for patients without family support



## Mistrust toward physicians/COVID skepticism

"The experience of responding to a <u>public health emergency</u> on this massive scale also created opportunities for innovative approaches to problem-solving by physicians and teams, and prompted hospital management to relieve the frontline of administrative burdens," said Nancy Berlinger, Ph.D., a research scholar at The Hastings Center and a co-author of this study.

"Going forward, hospitals should continue to listen to the frontline for insights about work environments that support clinician integrity and well-being and promote better outcomes for patients."

The study concludes that interventions to reduce <u>physician stress</u> and burnout may be more effective if they target systems factors and stressors, including <u>organizational culture</u> and team dynamics.

Additional co-authors of the study are Alyssa Browne, MA and Tania Jenkins, Ph.D., both in the UNC Department of Sociology; and Liza Buchbinder, MD, Ph.D., at UCLA's Center for Social Medicine and Humanities and Semel Institute.

**More information:** Mara Buchbinder et al, Hospital Physicians' Perspectives on Occupational Stress During COVID-19: a Qualitative Analysis from Two US Cities, *Journal of General Internal Medicine* (2022). DOI: 10.1007/s11606-022-07848-z

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