



Facing and Dealing with Burnout

Burnout is a common problem in the medical profession, not least among family physicians. It has been defined as a state of mental and/or physical exhaustion caused by excessive and prolonged stress¹. Burnout has become so common in fact that the American Joint Commission on Accreditation of Healthcare Organizations (JCAHO) since 2001 has required that all hospitals have a process in place for addressing physician well-being². Yet it is not an issue that has been given much attention in the South African Context. It is for this reason that South African Family Practice decided to focus specifically on the issue of Burnout, through the publication of a series of 3 articles on the subject.

Why is there a need for this focus? As noted, burnout is a common problem amongst doctors, which is exacerbated by working in the rapidly changing health care environment of South Africa, with the stress caused by uncertainty and the constant need for adaptation, and, for many primary care doctors, working in a context of high workloads as the effect of the AIDS epidemic is felt ever more strongly. It goes beyond this though. Family physicians are required to deal with patients who experience the effects of stress, including burnout, and need to know more about it, because it is not unique to the medical profession. Burnout is certainly more common in any of the helping professions, but can be experienced by anyone. In any profession, some stress is needed to enhance performance and the balancing act of enough versus too much stress is always a source of tension. As we become more in touch with ourselves, and more aware of the effects of stress in our own lives, we are more able to reach out and help others, including our patients. Facing burnout provides an opportunity for self-growth and development which can enhance the doctorpatient understanding and thus relationship. We need to be reminded that we are as much biopsychosocial systems as our patients! Why is burnout such a problem? Burnout is:

- not easy to recognise in oneself, often until a crisis point is reached
- not a problem that doctors, as godlike dispensers of healing, find easy to accept in themselves or admit to others. Burnout has a stigma that clings to it, which smells of failure and weakness, foreign concepts to the medical profession
- a subject of collusion, in that colleagues tend to cover up and make allowances for each other instead of confronting the issue and helping the burnt-out, or browned out (those close to burnout) deal with it
- difficult to treat, because it requires us to change what we are doing, often quite radically, and can affect our futures and careers

SAFP will publish a series of articles that take a very personal look at the issue of burning out, starting this month. All 3 authors of the articles have experienced a measure of burnout themselves, and felt ill-equipped and unsure of where to go for help or how to deal with it. It is their hope that sharing their experiences and insights will help others in future.

The first step in dealing with stress and burnout is to recognise our own limitations, our own woundedness as healers. It is hoped that by highlighting the problem of burnout in South African Family Practice, family physicians and other doctors in primary care will be encouraged to take this first step on the important road of selfawareness and self-care.♥

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References

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