

# Burnout among Family Medicine Doctors during COVID-19 Pandemic: We Care, We Explore and We Support

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## INTRODUCTION

Physician burnout has always been a public health concern worldwide. Local studies show that prevalence of physician burnout is >60%. It is likely that physicians would be subject to a higher level of stress under the pandemic. In fact, recent studies show higher prevalence of stress and mental health problems among physicians during COVID-19. Our study aims to explore the stress and burnout condition among family medicine (FM) doctors during the COVID-19 pandemic. We hope to understand doctors' source of stress and psychological needs, so that we could proactively prevent physicians' burnout by providing timely support and help to physicians in need.

## OBJECTIVES

To evaluate stress and burnout condition by assessing change of stress levels, burnout rate and stress coping strategies of FM doctors during COVID-19 pandemic.

## METHOD

FM doctors in NTEC were invited to participate in an online survey in December 2020. Data collection included basic demographics, change of stress levels of 5 common sources of burnout (job duties, personal life events, social support, work autonomy, work value and reward) during COVID-19 and stress-coping strategies adopted by participants. Burnout rate was assessed by the single-item measure of burnout. It rates respondent's severity of stress by scoring from 1 to 5 with burnout defined as score  $\geq 3$ .

## RESULTS

- Response rate was 70% (N=70). Demographics were shown in Table 1.
- Burnout rate was 27.1% (Figure 1).
- Major causes of burnout/ stress were personal life event and job duties. (Figure 2)
- Majority reported increased stress in personal life event (61.4%) and job duties (44.3%) during COVID-19 (Figure 3).
- Spending quality time outside work was the stress coping strategy adopted by most participants (Table 2).
- Age (P=.707), sex (P=.598), job position (P=.522) and duration of working in primary care (P=.687) were not associated with burnout.

Male sex	40 (57.1%)
Female sex	30 (42.9%)
Age	40.6 $\pm$ 6.2.
Basic trainee	11 (15.7%)
Higher trainee	10 (14.3%)
Medical officer / Service resident	18 (25.7%)
Resident specialist	8 (11.4%)
Associate consultant / Senior medical officer	21 (30%)
Consultant	2 (2.9%)

Figure 1. Distribution of single-item burnout score (Burnout is defined as score  $\geq 3$ )

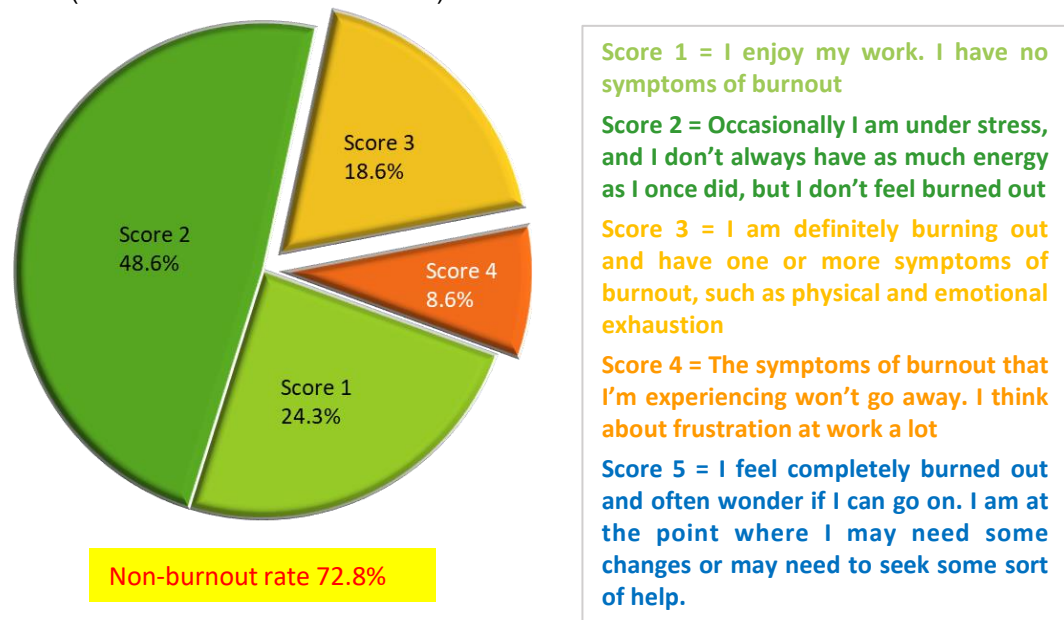


Figure 2. Major cause of stress/burnout during COVID-19

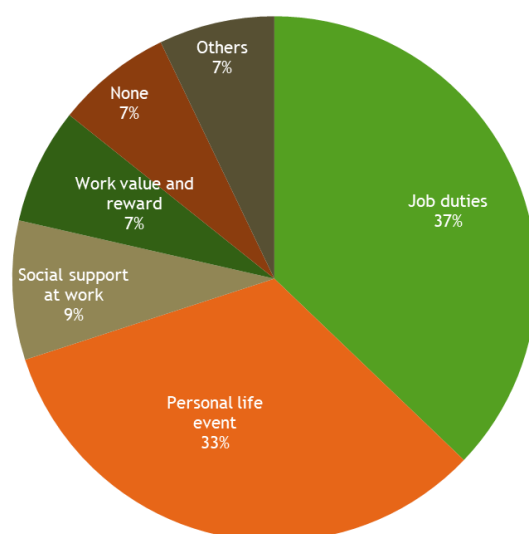


Figure 3. Change in Stress Level in Different Domains during COVID-19

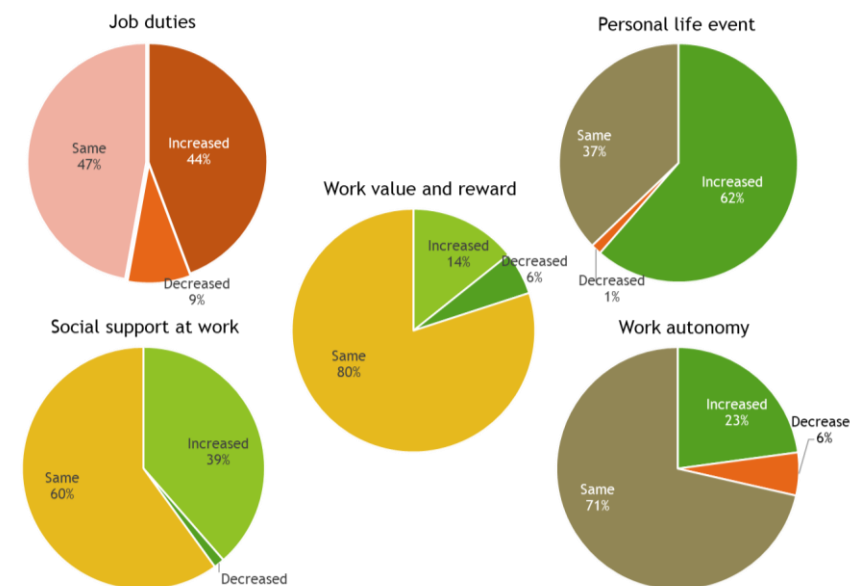


Table 2. Coping strategies for stress/ burnout

Coping strategies for stress/ burnout	% of participants using the coping strategy
1. Spend some quality time in things outside of work (e.g. hobbies, physical exercise, take a holiday etc.)	70%
2. Get comforts from colleagues/ family/ friends/ seniors	35.7%
3. Try to see things from a more positive side	41.4%
4. Relaxation techniques (e.g. deep breathing exercise, mindfulness, meditation etc.)	18.6%
5. Find comfort in religious or spiritual beliefs	21.4%
6. Concentrate my efforts on what could be done to change to the condition	32.9%
7. Discuss with friends/ family/ colleagues/ seniors for what could be done to change the condition	30%

## CONCLUSION

Our burnout rate is relatively low when comparing with other studies. Nevertheless, the data on source of burnout and coping strategies would guide us on implementing measures to support our doctors' psychological health during the pandemic.