Efficacy of a communication and stress management training on residents’ stress to communicate, self-efficacy and burnout: A randomized controlled study

Isabelle Bragard (Ph.D.)¹, Anne-Marie Etienne (Ph. D.)¹, Yves Libert (Ph. D.)², Isabelle Merckaert (Ph.D.)³, Aurore Liénard (M.A.)², Julie Meunier (M.A.)², Nicole Delvaux (Ph. D.)⁴, Serge Marchal (M.A.)⁵, Christine Reynaert (M.D., Ph. D.)⁶, Aurore Liénard (M.D., Ph. D.)⁷, Jean-Louis Slachmuylde (M.A.)⁵, Darius Razavi (M.D., Ph. D.)³

¹Université de Liège, Faculté des Sciences Psychologiques et de l’Education, Liège, Belgium; ²Université Libre de Bruxelles, Institut Jules Bordet, Brussels, Belgium; ³Université Libre de Bruxelles, Faculté des Sciences Psychologiques et de l’Éducation, Brussels, Belgium; ⁴Hôpital Universitaire Erasme, Service de Psychologie, Brussels, Belgium; ⁵C.A.M. (Training and Research group), Brussels, Belgium; ⁶Université Catholique de Louvain, Faculté de Psychologie et des Sciences de l’Éducation, Louvain-la-Neuve, Belgium; ⁷Université Catholique de Louvain, Faculté de Médecine, Brussels, Belgium.

Presenting author:

Isabelle BRAGARD
Université de Liège
Département Personne et Société
Bld du Rectorat, Bât. B33
B-4000 Liège
Belgium
Phone: 00 32 4 366 23 98
Fax: 00 32 4 366 28 08
E-mail: Isabelle.Bragard@ulg.ac.be
Abstract

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**Background.** Residents experience several work-related stressors such as intense work demands. They also experience stress to communicate with patients and consequently lack of self-efficacy in interviews with patients. These stressors may contribute to the development of residents’ burnout. The study aim is to assess the efficacy of a communication and stress management skills training program on residents’ stress to communicate, self-efficacy beliefs about their communication and stress management skills, and burnout in a randomized controlled design.

**Methods.** Residents from various specialties, after a first assessment time, were randomly assigned to a 40-h training (intervention group) or to a waiting list (control group), according to a computer generated randomization list. Stress to communicate and self-efficacy were assessed with self-reported scales elaborated for the purpose of this study. Burnout was assessed with Maslach Burnout Inventory. Other questionnaires assessed some person-related (e.g. anxiety) and work-related (e.g. job stress) variables. These scales were filled in
at baseline and after training for the intervention group, and 8 months after the first assessment time for the control group.

**Results.** The final sample included seventy-five residents. Group-by-time repeated measures analysis of variance showed a significant decrease in residents’ stress to communicate (p=.001) and a significant increase in their self-efficacy beliefs about their communication (p <.001) and stress management skills (p <.001). No significant group-by-time changes were noted in burnout. Residents had a high level of job stress and also a low quality of work life, particularly concerning arrangement of work schedule and atmosphere with superiors.

**Conclusion.** While the training program reduced residents’ stress to communicate and enhanced their self-efficacy, it did not reduce their burnout. The positive results of this training program may encourage its compulsory organization in the medical curriculum.

**Research Implications.** Assessing the impact of a training program associating person- and work-directed interventions may be suggested in order to reduce residents’ burnout.
Clinical Implications. Changes in residents’ stress to communicate and self-efficacy beliefs may have positive implications on residents’ use of effective communication skills and thus on patients’ satisfaction with the interview.

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