Predictors and correlates of changes in residents’ burnout: Influence of person- and work-related variables

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Abstract

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Background. It is well recognized that residents may experience burnout. There are however not enough studies which have investigated person- and work-related variables associated with the development of residents’ burnout. The aim of this study is to identify predictors and correlates – person- and work-related variables - of changes in residents’ burnout in order to develop effective interventions to reduce their burnout.

Methods. Seventy-nine residents from various specialties included in a randomized controlled study which has failed to show the efficacy of a communication and stress management training designed to reduce burnout were assessed at an 8-month interval. Burnout (emotional exhaustion, depersonalization and personal accomplishment) was assessed with Maslach Burnout Inventory (MBI). Numerous person-related (socioprofessional, psychological and communicational) and work-related variables were collected at each assessment time.

Results. Linear regressions have been conducted. Person- and work-related variables explain 37% of the variance in changes in emotional exhaustion. Significant predictors were Locus of Control (Beta = .212; p = .027), stress to communicate in interview (Beta = .207; p = .044) and emotional-focused coping (Beta = .210; p = .042). A significant correlate was changes in lack of organizational support index (Beta = .381; p < .001). However, only person-related variables explain 9% of the variance in changes in depersonalization (changes in social support-focused coping: Beta = -.292; p = .009) and 12% of the variance in changes in personal accomplishment (work experience: Beta = .223; p = .041; changes in emotional-focused coping: Beta = -.258; p = .019).
Conclusion. Identifying person- and work-related variables predicting or being associated with changes in residents’ burnout is an essential step to further develop effective interventions to reduce burnout. Interventions focusing on residents’ problem-focused and social support-focused coping and on supervisors’ team working management may be suggested.

Research Implications. Surprisingly, only one general work-related variable was associated with changes in residents’ burnout. Further research should build questionnaires focusing on specific work characteristics of residents in order to identify work-related variables predicting changes in burnout over time.

Clinical Implications. Nearly 50% of residents at baseline have high emotional exhaustion or depersonalization. Burnout prevention seems thus really necessary earlier in the medical curriculum.

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