Burnout syndrome among psychiatric trainees: International perspective

Work-related burnout syndrome is characterised by high levels of emotional exhaustion, cynicism, and low sense of professional efficacy. Training years, more than any other stage in physicians’ career are characterised by persistent imbalance between demands and resources. Psychiatry itself adds several very specific stressors such as perceived stigma of this profession, demanding therapeutic relationships, personal threats from violent patients and patient suicide.

Does this mean that psychiatric trainees are burnt out? Very little information was available on this topic until the recent study by Jovanovic and colleagues asked 1980 psychiatric trainees from 22 countries to complete the Maslach Burnout Inventory (MBI-GS) and provide information on individual, educational and work-related parameters. Besides national variations, results show that 2/3 of the sample was extremely emotionally exhausted and 1/3 of psychiatric trainees met criteria for severe burnout. The risk was increased by several individual factors such as not opting for psychiatry as a first career choice, not having children and younger age. Educational characteristics such as years spent in training and other postgraduate education were not protective of severe burnout. Even after adjusting for these individual differences, country differences in burnout rates, and years in training, three work-related factors remained positively associated with severe burnout: long working hours, lack of clinical supervision, and not having regular time to rest.

The effect of working hour limitations has been studied extensively and it was found that trainees who reported working more than 80 hours had higher rates of burnout than after the time restriction. In this study long working hours increased the risk for high emotional exhaustion and severe burnout even when only hours at the workplace were taken into account (without hours spent on work assignments at home). Supervision has been often considered as a unique learning experience for psychiatric trainees. Trainees can use it to reflect on their practice and it also supports development of competence and professional identity. In the light of the known importance of clinical supervision, it is surprising that almost 15% of trainees in this study did not receive regular weekly supervision (or did not perceive it as such). Despite several reports which have highlighted problems over structure and content of supervision, the topic lacks systematic research and remains a largely under researched area. The impact of not choosing psychiatry as first career choice (in 19.8% trainees) on developing severe burnout could be related to the lack of interest and motivation to persevere with training, and endure its more demanding aspects. This finding needs to be discussed in the light of recruitment challenges in psychiatry.

What does this mean? The study indicates that most psychiatric trainees are coping well with their demanding jobs, but every third psychiatric trainee seems to be highly vulnerable which can potentially be linked to stress-related health problems, impaired patient care, reduced learning capacity, and broken personal relationships. This report can serve as a starting point for wider discussions regarding psychiatric training. Media frequently reports of young doctors taking their lives or leaving the profession. With shortage of qualified psychiatrists, most countries today cannot afford to lose trainees for reasons such as poor training conditions and development of work-related burnout. Also with current unfilled training posts in high-income countries, it remains likely that trainees who fail to attain a training post in a preferred discipline will be recruited into psychiatry training presenting both challenges and opportunities for trainees and training systems.

More discussion is needed on how to address these challenges and help the most vulnerable trainees progress through their career to the benefit of their patients and wider society.

Full text paper: