



European
Association for
Physician Health



IS THERE A DOCTOR AROUND ?

The exhaustion of good will

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atlans

A SPIRIT, A PRACTICE

Being a doctor and staying a person

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Methodology



- » Research question :
 - > Exhaustion of the will to do well. Insights by role theory
- » Methodology :
 - > Mixed method : qualitative + quantitative
 - > Qualitative : (mainly) in-depth interviews with 10 GP
 - > Quantitative : First version of survey tested by 24 MD, looking for a field.
- » Bibliography / references
 - > **Goffman, E.** « presentation of self »,



The interviewees

First Name (changed)	Age	Speciality	Duration of practice
Luc	36	GP	8
Bernard	72	GP	31
Elodie	36	GP	2
Paul	29	GP	1
Sylvie	34	GP	7
Sarah	25	Intern	0
Bruno	61	Cardio / GP	30
Michel	59	GP	32
Mathieu	38	GP	4
Marie	52	GP	29



What is a doctor (i)

» Making of the role model:

- > Childhood dreams & family tradition
 - + Only 3 out of 10 wanted to be a doctor
 - + 5 because they were good students, 2 by accident
- > During studies
 - + Mains values are competition (the best) & technicity (most impressive)
 - + Generalists are losers (low score at the exam)

« if you are a good student, you take medicine »

« if you fail internship, you'll be a GP »

« people dedicating their whole life to medicine, it's an honor »

» Values :

- > (i) Commitment
 - + Emergency practice as an example
- > (ii) Empathy for the patients
 - + Reaction to hospital harshness

« Doctors not listening to their patients, taking off their clothes without asking them, it's so humiliating »



What is a doctor (ii)

» The Hippocratic oath

- > Not a big deal (at least pretend not to be)
- > Yet important (5 have it posted on the wall in their workplace)
- > Exigency and harsh judgment of self and peers

The GP role model so far...

- > Committed
- > Human (empathic)
- > Long term relationship with its patients (the good shepherd)
- > Prone to judgment if he fails

«One of the few professions which still take an oath »

« I'm still proud when I hear it »

« Doing the maximum for the patient»

«There is no worse judge than oneself... Anyway you try to twist it, you're done»

«We are not God, we, also, are human beings.»



The role revealed :

« is there a doctor around ? » (i)

» Theatrical intrusion

- > Breaks in a very needed time off (see next)
- > Resignation (fatum)

» Calls for a mandatory answer,

- > can't be ignored (atavic)
- > ...which is frustrating

» Reluctantly endorsing the role

- > Difficult to leave the role of « being a person »
- > Reveal the burden of the doctor's role

«WTF, I'm in holidays ! »

«We've been conditioned to answer» « it's an instinct »

«I'm a moron, I have to do it»

«I have to put back my doctor cap very quickly»

«When I'm with my children I really don't want that. »

«My son tells me : Mommy can't you just shut up»



The role revealed :

« is there a doctor around ? » (ii)

» A role... with a public

- > Not the usual condition / context
- > The stress of the crowd

» A dangerous act, with pressure

- > Not used to do it
- > Not necessary skilled in what is needed

» Without the usual protections

- > Outside the confort zone
- > Not in your place, not with your tools

«my friends were cheering :Paul ! Paul ! They need a doctor !! »

«It's a show.. People are wondering : what is he going to do next ? »

«I'd be scared.. We are threatened on every level »

«You can't fail, that's the trick, you can never fail»

«I have to put back my doctor cap very quickly»



Risks and safeguards (i)

» The exhaustion factors :

- > Dealing with death possibility
 - + Perpetual fear of death,
 - + and being responsible of it

- > Answering an unlimited demand
 - + Ambivalent feelings
 - + Periodicaly running away
 - + Buildings limits and boundaries
 - ... *with many exceptions and gaps...*

«We are always afraid of a death in our workplace... of being responsible of someone's death »

«I've replaced a GP who was a little too committed... Indeed she was in burnout»

«We don't really knows our limits and we don't want to see them»

«Care professions give meaning to life.. You jump into it and there is no limits »



Risks and safeguards (ii)

» Dealing with patients

- > Educate them (train them)
 - + Not to ask for advice outside workplace
- > Exposing the « bad ones »
 - + Who knows better what they have
 - + Manipulative people

» Foolproof excuses

- > Disease
- > Nervous limits – for the patient safety

» Standard rules

- > (i) Don't give your phone number
- > (ii) Don't live near your workplace
- > Very strict, always broken

» The magical power of knowledge

- > There is always a training for a problem
- > « Learning to say no », « coping with difficult patient »...

«I've tamed them, I have to say that in a way I have tamed people»

«I have a cancer of the soulder, I read it on doctissimo»

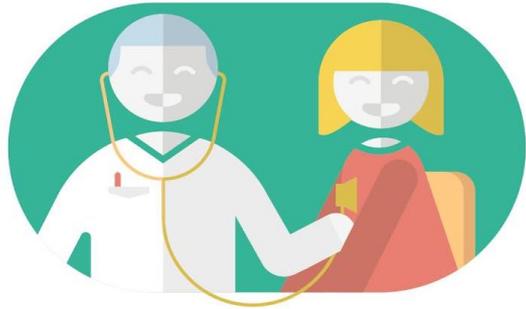
«I am not everybody's doctor !»

«headaches saved me.»

«I swore never to give my phone number»

«Living near your workplace : it's special, no ?»

Conclusion & next steps



- » What we presented is a work in progress
 - > Publication to come out soon
 - » Next steps :
 - > Quantitative approach (online form)
 - > Qualitative : many more to come
 - + More interviews
 - + Focus groups
 - + Ethnographic approach (photos)
 - + Cultural comparison ? (France / abroad)
- ... Perhaps with you ?





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Thank you !

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