

# The relationships between coping, job stress and burnout

A three-year prospective study after a counselling intervention for help-seeking physicians

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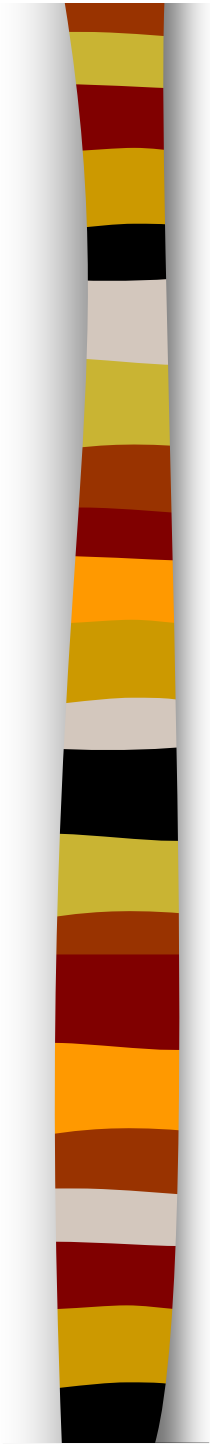
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The Research Institute

THE NORWEGIAN MEDICAL ASSOCIATION





"I feel completely empty. I have to actively decide to do everything; put one foot out of bed, then the other, to eat breakfast, to go to work..."

"I seem to have a bad conscience and feelings of guilt all the time – at work as well as at home."



## As we know...

- Physicians have relatively high levels of:
  - depressive symptoms (18-30%)
  - burnout – emotional exhaustion (27-77%)
  - suicide (relative rates: men 1.4, women 2.3)

*(Deckard 1994, Lindeman 1996, Aasland 1997, Firth-Cozens 1997a, Wall 1997, Falkum 2000, Tøyry 2000, Grassi 2000, Shanafelt 2002, Schernhammer 2004, Goitein 2005, Hem 2005, Tyssen 2007)*

- Physicians often hesitate to seek help in the established health care system

*(Rosvold 2001, Kivimäki 2001)*

- Physicians' functioning is of importance for patient treatment

*(Firth-Cozens 1997b, Shanafelt 2002, West 2006, Fahrenkopf 2008)*



# Background

## Burnout - "the person or the job?"

### ■ The person? - Individual factors

- **Neuroticism**
- Self-criticism
- Wishful thinking / **coping** strategies

*(Clark 1984; Firth-Cozens 1987; McCranie 1988; Tyssen 2000,2001; McManus 2004)*

### ■ The job? - Organizational factors

- Work load
  - Work – home interface
  - Role
  - Sleep-deprivation
- } **Job stress**

*(Reuben 1985; Firth-Cozens 1987; Getz 1997; Baldwin 1997; Williams 1997; Hainer 1998; Tyssen 2000, 2001; Peiro 2001; Arnetz 2002; Taylor 2005; Langballe 2010)*



# Aim

To study the relationships between changes in coping, job stress and burnout after a counselling intervention for help-seeking physicians.





# Burnout - Emotional exhaustion

- One dimension of burnout

"I feel that work drains me emotionally"

"I feel I work too hard in this job"



## Job stress (Cooper)

- Emotional
- Social (time pressure, work-home interface)
- Fear of litigation



# Coping strategies (Vitaliano)

- Active
  - Seeking social support
  - Problem-focused coping
    - instrumental, action-oriented
    - accomodative reflection
  
- Emotion-focused
  - Self-blame
  - Avoidance
  - Wishful thinking





# **Resource centre for health personell, Villa Sana, Modum Bad**

- The present study –
- **individual counseling (6-7 hrs)**
  - **participants and methods**
  - **course over a week (8 participants)**
  - **can bring partner**

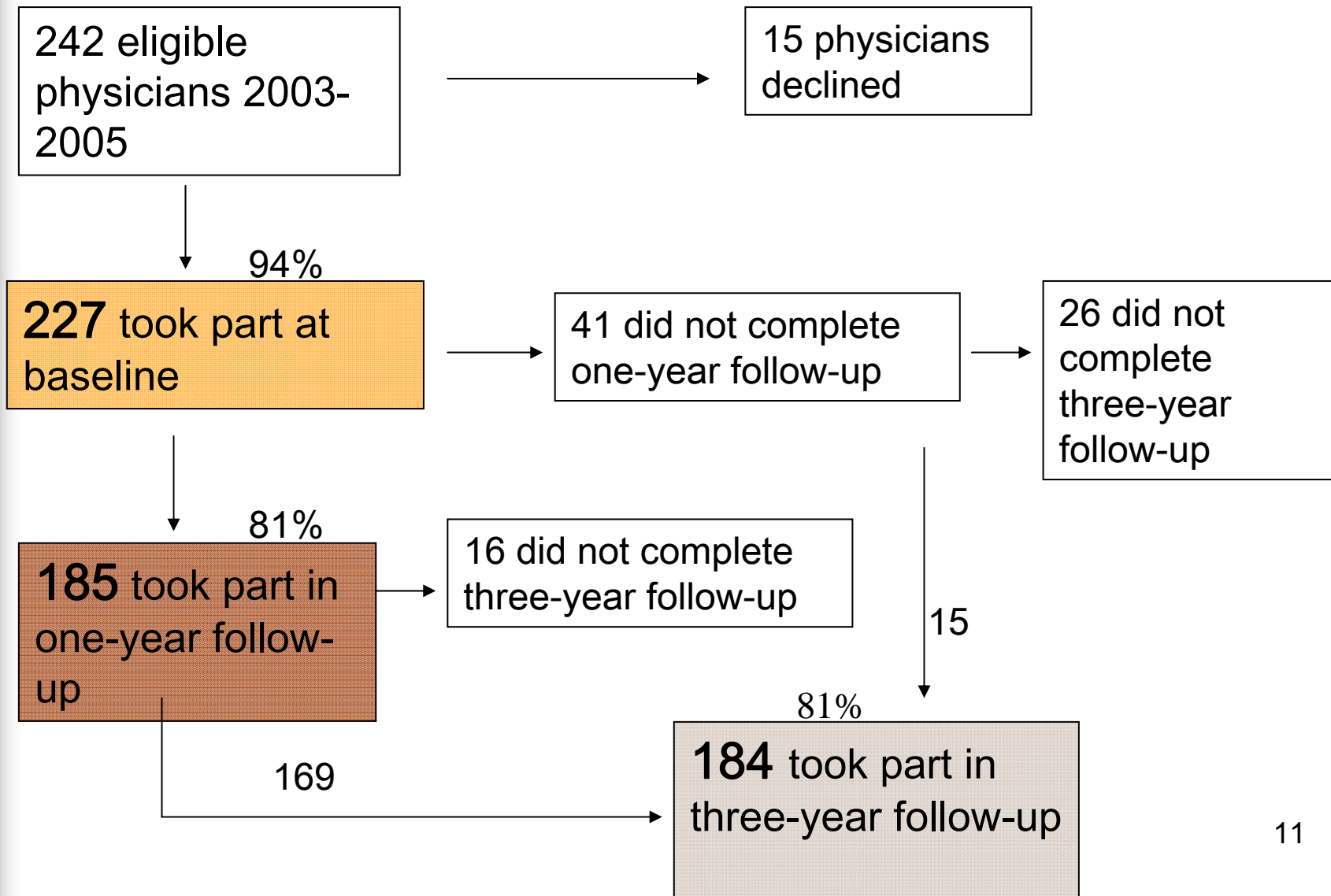
**Financed by the Norwegian Medical Association**



# Villa Sana – part of a process

- Present situation – job/private
- Identity, self-esteem, coping
- Needs – short and long perspective
- Acknowledge the needs
- Discuss work-related and private priorities

# Participants





## Methods

- Inclusion autumn 2003 – summer 2005
- Self-report:  
**at baseline, one and three years:**
  - demographics, help-seeking, work hours, sick leave
  - burnout (Maslach Burnout Inventory)
  - job stress (Cooper`s Job Stress Questionnaire)
  - coping strategies (Vitaliano`s Ways of Coping Check List)
- Comparison with Norwegian physicians

# Participants

(compared to norwegian physicians 2004/2005, NMA)

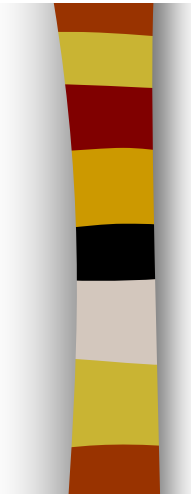
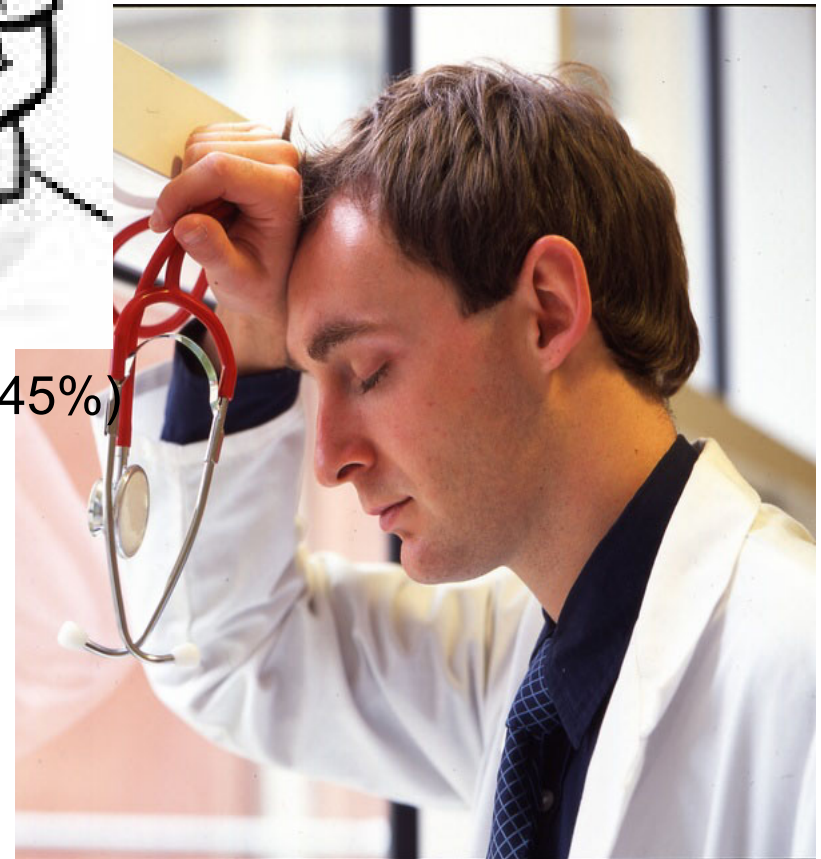


Non-specialists 30% (45%)  
GPs 22% (13%)

Age: 47(45)

52% (36%)

BMC Public Health 2007, 7:36  
Isaksson Rø K, Gude T, Aasland OG





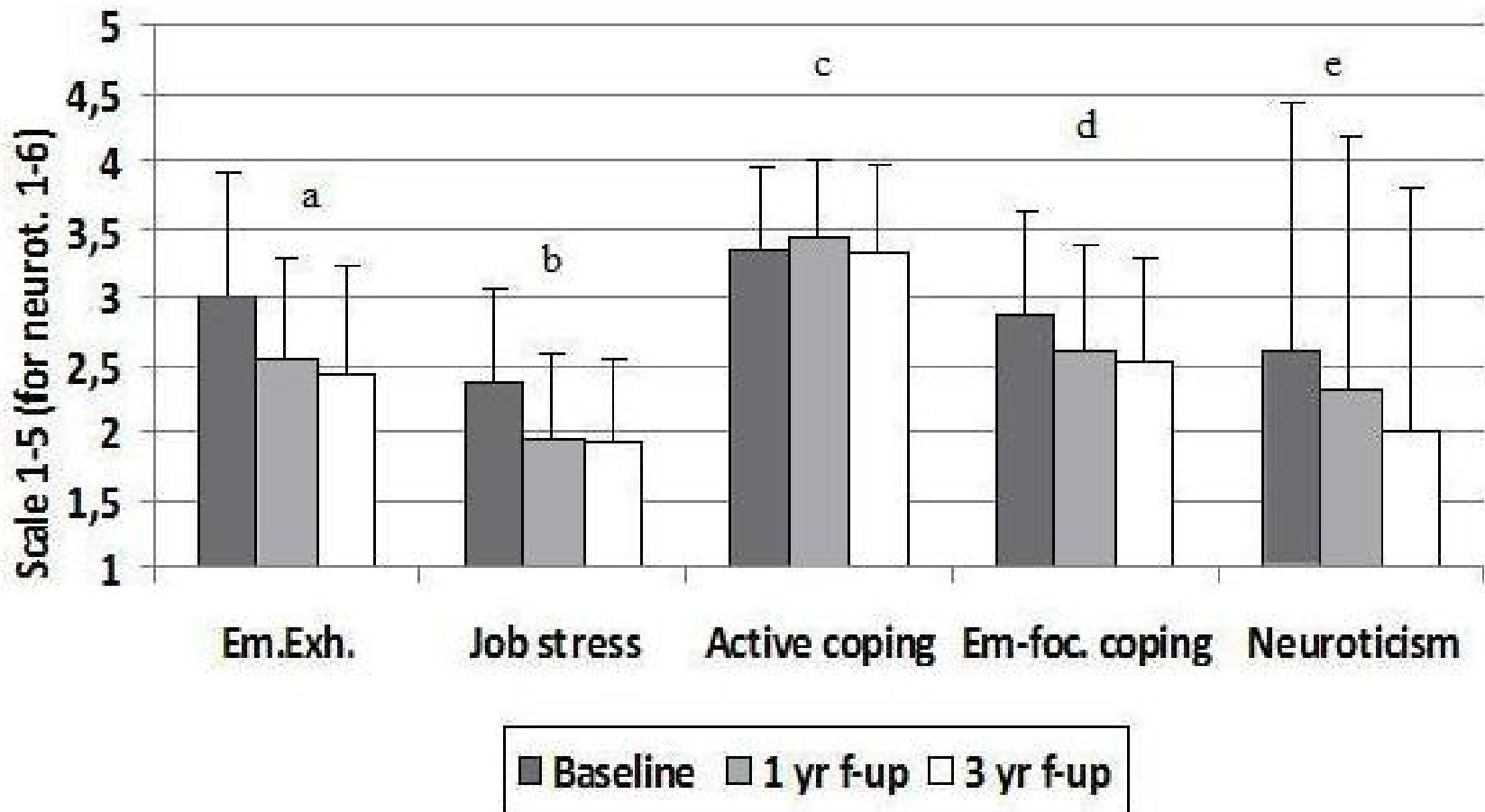
# Results

A three-year cohort study of the relationships between coping, job stress and burnout after a counselling intervention for help-seeking physicians.

*BMC Public Health 2010, 10:213*

*KE Isaksson Rø, R Tyssen, A Hoffart, H Sexton, OG Aasland, T Gude*

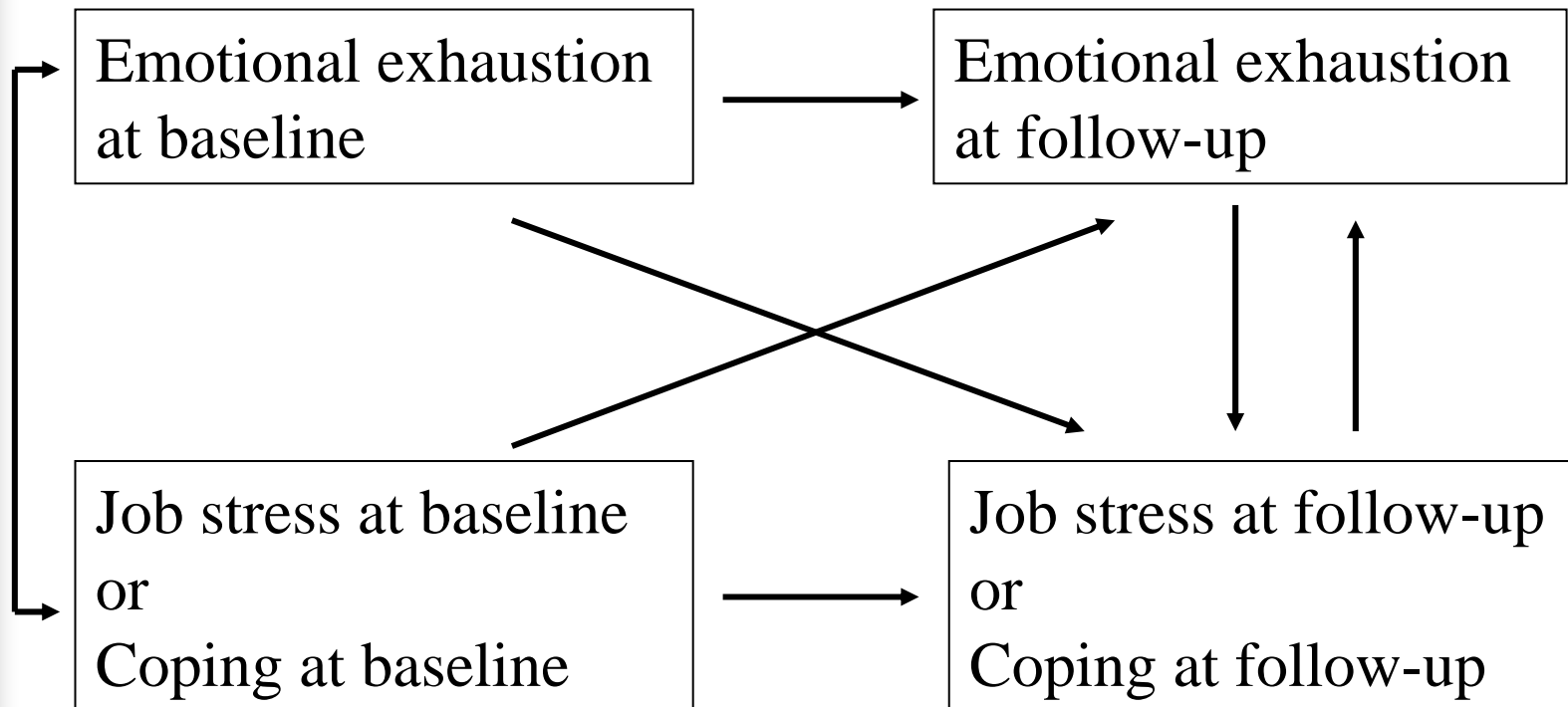
# Levels at baseline, one-year and three-year follow-up



One-year : BMJ 2008; 337:a2004

Isaksson Rø KE, Gude T, Tyssen R, Aasland OG

# Structural modelling

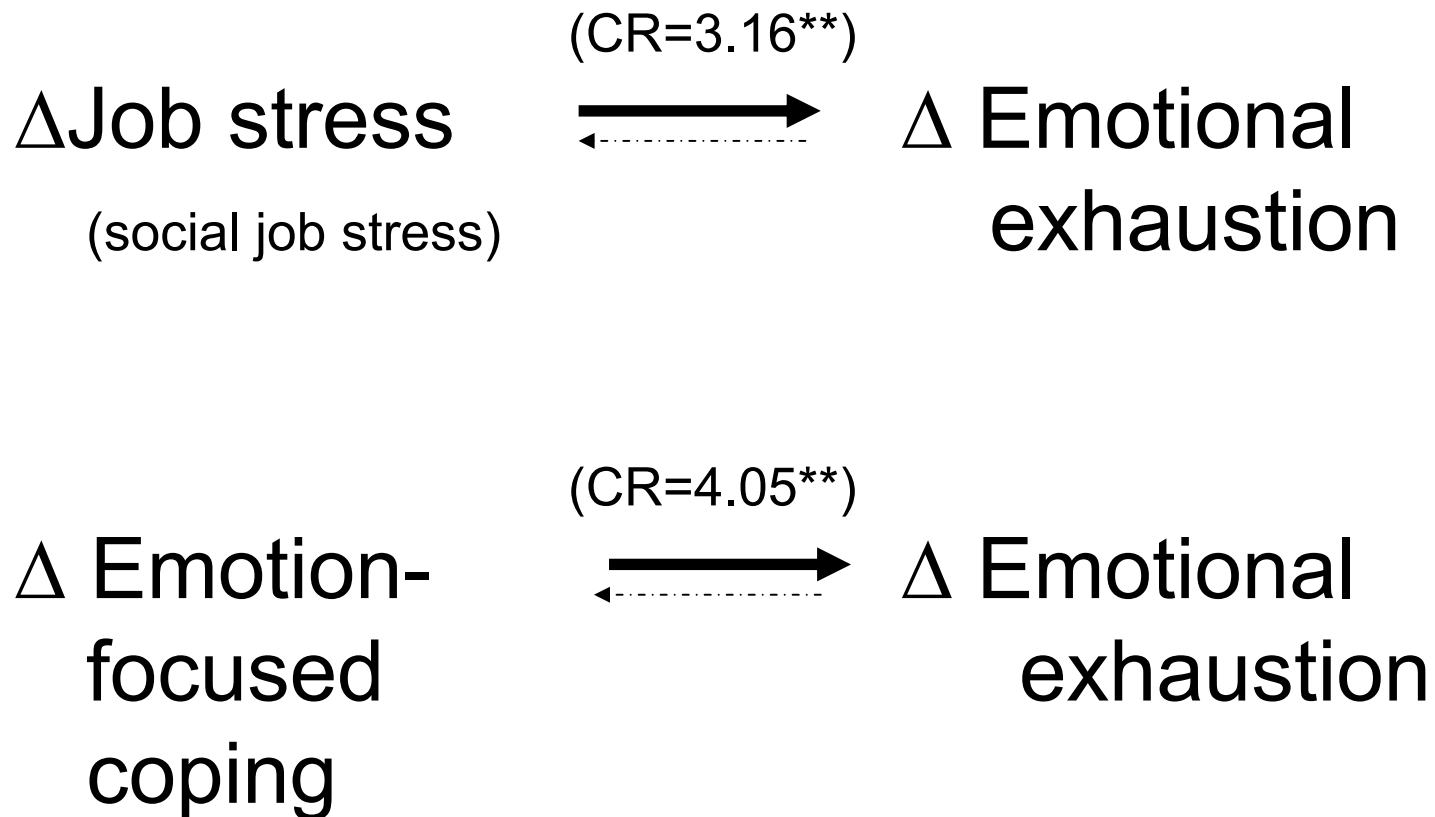


Cross-lagged path model  
Synchronous path model





# Relationships between changes





”Got more faith in myself, have implemented changes at my workplace ”.

”Better insight into my own situation and better ability to enforce limits.”

# Conclusion

↓ Job stress

↓ Emotion-focused coping strategies

↓ Emotional exhaustion

**Both work-related factors and individual factors can be targeted in interventions for reduction of burnout**

