

On Medical Student Burnout and Wellness: Do Personal Perceptions Matter?

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Background

Occupational burnout is a syndrome of emotional exhaustion (EE), depersonalization (DP), and reduced personal accomplishment, affecting more than half of medical students and residents.¹

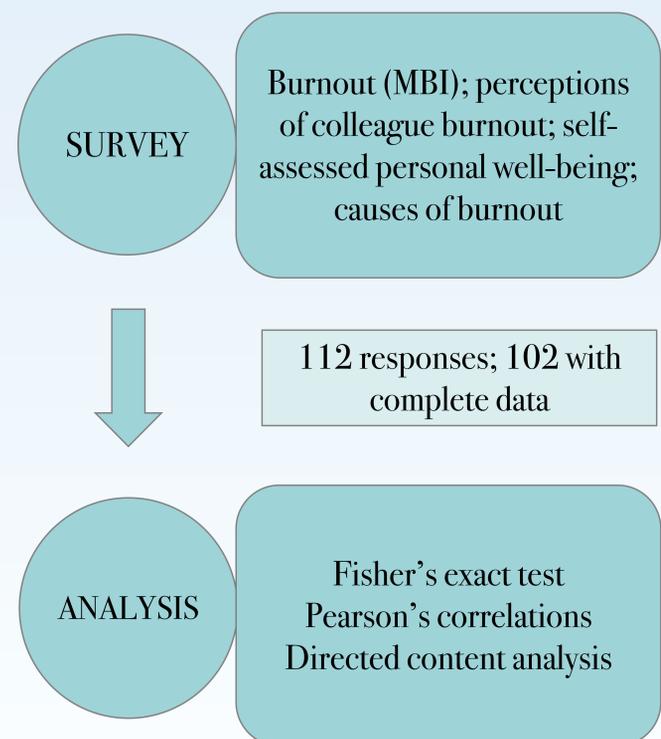
Consequences of burnout include early termination of medical training, poor emotional health, and substandard patient care.¹

Burnout is influenced by environmental factors (high demands, low resources), and also may be moderated by social factors (perceived burnout among colleagues).²

Self-awareness of well-being may be low among medical professionals and trainees.³

¹Dyrbye & Shanafelt. *Medical Education*. 2016, 50, 132-149.
²Bakker, Evangelia, & Wimar. *Advances in Psychology Research*. 2003, 25, 13-30.
³Shanafelt et al. *Annals of Surgery*. 2014, 259(1), 82-88.

Methodology



Results

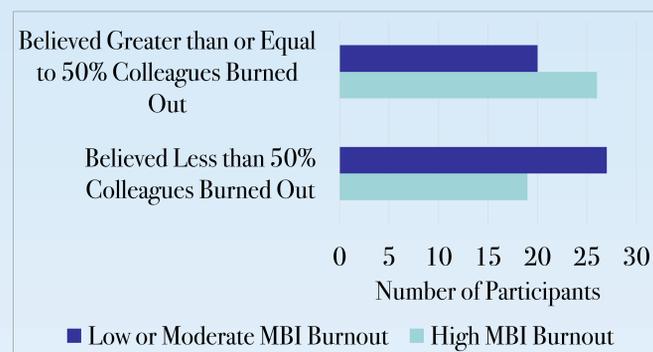
Baseline levels of burnout.

	Mean DP†	Mean EE	% High MBI*
Preclinical Students	5.6	22.96	40%
Clinical Students	10	22.7	57%

* High MBI was defined as DP \geq 10 or EE \geq 27.

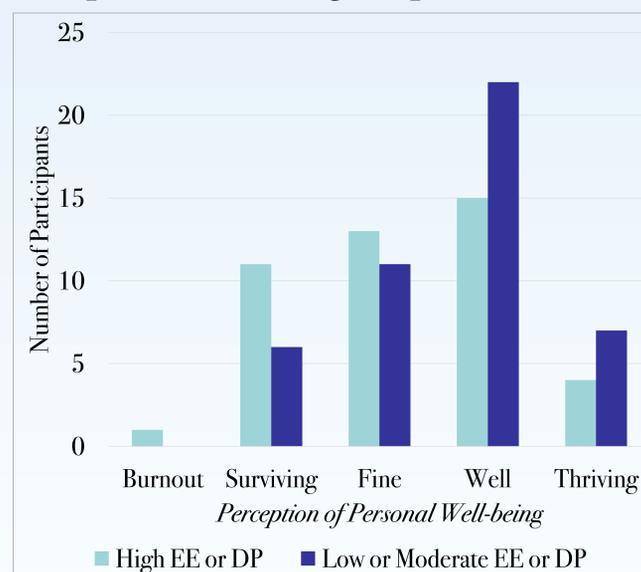
† Statistically significant difference (p<0.0001).

MBI compared to perceived colleague burnout.



This relationship was not statistically significant (p=0.211).

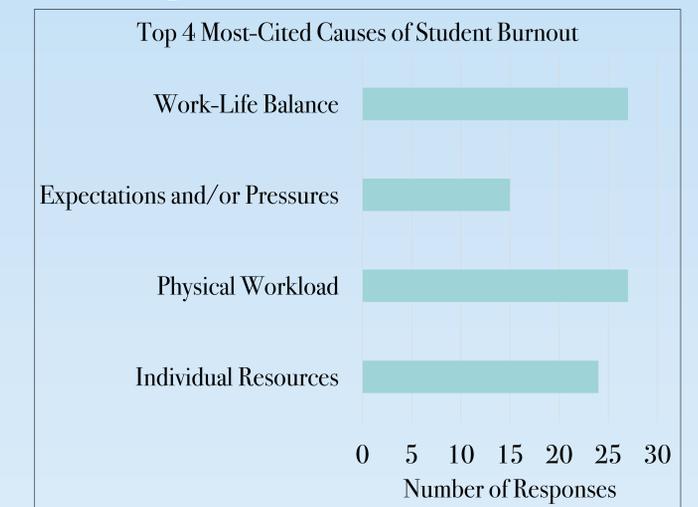
Perception of well-being compared to MBI.



There was a moderate correlation between MBI EE and perceived well-being (Pearson's r = -0.605). The correlation between MBI DP and perceived well-being was weak (r=-0.258).

Results

Students' perceived causes of burnout.



Conclusions & Future Directions

Rates of burnout in medical students at this institution mirror those of national studies. Students in the clinical years have significantly higher rates of depersonalization compared to preclinical students.

Social transmission of burnout may occur, but is likely not a major player in the development of student burnout at this institution. Wellness initiatives should have the goal of reducing demands or increasing resources rather than preventing social induction. Yearly follow-up will help evaluate these initiatives.

Students with high MBI burnout do not consistently label themselves as "burned out", and are more likely to label themselves as "well". This indicates further exploration.

Poor self-awareness of well-being may indicate a need for systematic identification of students at higher risk of burnout and its negative impacts.