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Research Progress on Job Burnout of Family Doctors

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ABSTRACT

Job burnout is an important factor affecting the work attitude and professional behavior of family doctors. This paper reviews the measurement tools, influencing factors and intervention strategies of job burnout, it is suggested that improving job burnout can improve job satisfaction, work efficiency and reduce turnover intention of family doctors, and it is of great significance to the construction of family doctor team and the improvement of work quality.

1.Introduction

Burnout, also known as "job burnout", refers to the state of physical and mental fatigue and energy exhaustion in the face of continuous workload^[1]. The term "job burnout" was first put forward by American psychological expert Freudenberger and then summarized by Maslach.^[2] The psychological syndrome caused by continuous emotions and interpersonal stressors at work is called job burnout. As an important support of community health management, family doctors undertake the management of chronic diseases, infectious diseases and population health management tasks, with heavy workload and heavy medical tasks. They are the potential high incidence group of job burnout. Job burnout will affect the family doctor in work.^[3-4]

2.Job Burnout of Family Doctors

The research on family doctors' job burnout was carried out earlier abroad. The United States, the United Kingdom, Germany and other countries, which are the first European countries to implement the family doctor service model, have carried out relevant research and achieved a series of results. According to a study on the job burnout of 27276 doctors carried out by US researchers, the incidence of job burnout of general practitioners in family medicine field is higher, ranking in the top five. [6] conducted a job burnout analysis of 232 family doctors in the UK from March 2016 to August 2017, and the results showed that 22.7% and 72.7% of general practitioners in the field of family medicine were in the top five the degree of job burnout is related to family doctors' job well-being. In Germany, researchers selected 214 general

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practitioners for analysis and found that female doctors had a higher risk of emotional exhaustion and a lower degree of job satisfaction. [7] A survey of 683 general practitioners in Ireland shows that age and gender are related to the degree of job burnout of family doctors. [8-9] conducted a cross-sectional survey of 196 general practitioners and found that the incidence of moderate and high emotional exhaustion, depersonalization and personal accomplishment were 34.7%, 33.5% and 67.8% respectively. Researchers analyzed 183 general practitioners in Israeli community medical centers, and found that job burnout of general practitioners in the community was affected by job stress and job satisfaction. [10] In Japan, researchers found that the level of job burnout of middle-aged general practitioners is higher than that of young family doctors. [11] In contrast, the domestic research on family doctors' job burnout is less than that abroad. Researchers investigated the job burnout of 85 general practitioners working in Shanghai suburban community health service centers, and found that the incidence of moderate and severe job burnout was 40.0%, and the job burnout was serious among the selected general practitioners; Others investigated 135 general practitioners nationwide, and the results showed that job burnout had an impact on their turnover intention People with high level of burnout are more willing to leave. Combined with the research and analysis at home and abroad, the degree of job burnout affects the work of family doctors, relates to the work efficiency and quality of staff, and becomes a key topic in the psychological aspect of community family doctors.

3.Influencing Factors of Family Doctors' Job Burnout

The influencing factors of family doctors' job burnout include many aspects, including individual, social, organizational and other factors. Job burnout brings pressure to family doctors, and a higher degree of burnout may even affect their physical and mental health.

3.1 Individual Factors

Through research concluded that there is a positive correlation between age and the level of job burnout, and the level of job burnout of the elderly is higher than that of the young. [12] At the same time, the degree of job burnout is also affected by the individual's own personality traits. Compared with extroverts, introverts have higher degree of job burnout. Researchers conducted a survey on family doctors in Hungary, and found that the incidence of female job burnout is higher than that of male, which may be related to female family doctors' need to bear the dual pressure

of occupation and family. Therefore, they are more likely to have job burnout than male family doctors. [13]

3.2 Social Factors

The family doctor model originated in foreign countries and began to be carried out in China in 2012, which was gradually promoted by Shanghai, Beijing, Hangzhou and other cities. [14] The social factors influencing family doctors' job burnout are related to the local government's investment in community health care and the trust relationship between doctors and patients. Due to the difference between the development time of family doctors in China and the amount of funds invested by the government in the community health system, in cities with earlier development time and more developed economy, the government has invested more in the medical service of family doctors. The survey shows that the degree of job burnout of family doctors in cities with high economic level is higher than that in cities with low economic level. [15] The degree of harmony between the contract signing group and the family doctor team members also has an impact on the job burnout of family doctors. During the follow-up, the medical staff with high degree of trust and cooperation with the contract signing crowd had better job burnout.[16]

3.3 Organizational Factors

The organizational factors influencing family burnout include occupational stress, work environment, work family conflict, role influence and organizational support. [17] Experts found that workload has a significant impact on job burnout, conducted a survey on primary health care workers in Malaysia. [18] The results showed that the satisfaction of the staff to their departments would affect the level of job burnout, and the staff with low satisfaction to their units and departments had a higher level of job burnout. Nantha found that the infrastructure of institutions is not perfect, and the working environment is poor, especially in some economically underdeveloped areas, which will make the grassroots medical staff lose their enthusiasm and vitality for work. [19] Experts conducted two surveys on primary care doctors in the United States, and the results showed that adverse working conditions would deepen the degree of job burnout and reduce job satisfaction. [20] At the same time, the conflict between work and family will also affect the level of job burnout, medical staff as a member of the family, for the family is very important. Research's found that after alleviating work family conflict, the level of job burnout decreased. [21] As the role of family doctor is the bridge between community

medical service and contract signing population, family doctor needs to complete his own task and take responsibility due to his work responsibility and expectation. We should not only be responsible for the contract signing crowd, but also deal with the role that should be done to adapt to the work mode, so the degree of role adaptation has an impact on the job burnout of family doctors. Lack of support and encouragement in work will also affect the job burnout of family doctors. In the face of work, the job burnout of the staff with higher support from leaders and colleagues and harmonious relationship among colleagues is better.^[22]

3.4 Other Factors

The job burnout of family doctors is also affected by some other factors. For example, researchers found that the personal coping ability of family doctors has a significant impact on the job burnout of family doctors in medical work. ^[23] Others found that the relevant training needs and academic requirements of doctors are important influencing factors of job burnout. ^[24]

4.Intervention Measures and Coping Strategies of Family Doctors' Job Burnout

4.1 Relieve Fatigue Based on Mindfulness Training Mode

Mindfulness training (MT) was proposed by Dr. karbakin of Massachusetts University in 1979 at Massachusetts Medical College. It is applied in the field of medical care to help staff alleviate negative burnout, reduce work anxiety, objectively evaluate and accept themselves, improve negative thinking and eliminate negative energy in their hearts. [25] The research of foreign experts shows that after four weeks of mindfulness training, the degree of job burnout of the participants has been alleviated, the symptoms have been improved, and they have a higher love for themselves and their work. Domestic researchers found that the job burnout of the medical staff in the blood purification center has a significant improvement effect, reducing the effect of anxiety and job burnout, and improving the bad mood. Researchers shows that through mindfulness training for 4 weeks and 8 weeks, family doctors' job burnout is improved, and the training effect of 8 weeks is better, and their job satisfaction is higher. [26] The results show that mindfulness training can reduce the burnout of medical staff and improve their well-being. In addition, according to the study, mindfulness training can improve the quality of sleep, help the body maintain a peaceful state of mind, and then improve the status of job burnout.^[27] Therefore, through this way, from the physical and mental point of view, reduce psychological negative energy, eliminate bad emotions, and reduce the degree of burnout.

4.2 "Balint Group Sharing Communication Method" Was Used to Reduce Burnout

Balint group method, named after Balint, a famous psychoanalyst, was first applied to family doctors as a means of communication in their work practice, usually in the form of group discussion. In 2003, German research experts introduced Balint group method into China, and first applied it in the training of Shanghai Tongji Hospital, a general hospital. The selected research object was community family doctors at first, and then it was extended to other medical staff in the medical field, including nurses, medical managers, etc., and achieved good results. The results show that: through Balint group, community family doctors can better understand their own work, alleviate the job burnout of community family doctors. improve the professional skills of medical staff and improve the doctor-patient relationship. Through empathy and communication skills, we can better understand each other's professional identity and increase job satisfaction. Foreign studies also show that Balint group activities can help family doctors better deal with difficult clinical situations, improve communication skills, further promote the development of doctor-patient relationship, release work pressure and improve job burnout. Researchers used Balint method to randomly divide the family doctors into two groups. [28] The intervention content included two lectures and 10 Balint courses for six months. After the training, all participants measured and evaluated the job burnout and job satisfaction before and after the intervention. The results showed that Balint group interactive communication method could meet the needs of medical staff the level of job burnout was lower than that before the test. Researchers proved that this method can effectively reduce the burnout of family doctors by carrying out the Balint group method for at least one year and comparing the job burnout before and after the training. [29] The research shows that the family doctors trained by Balint method have higher enthusiasm in work than those not trained by Balint method. Therefore, it is feasible to take Balint group method to alleviate the job burnout of family doctors. Balint group method can be further developed and spread to reduce the job burnout of family doctors.

5. Conclusion

To sum up, there are many researches on family doc-

tors' job burnout at home and abroad, while there are few literatures on coping strategies and intervention of family doctors' job burnout. Therefore, further exploration and practice are needed to help family doctors establish a good working attitude, maintain a positive and enthusiastic working state, improve the team's collective quality, and promote the development of community medical practice.

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