

Michigan physicians report significant COVID-19 burnout

Who's most at risk and what can we do to support them?

Executive Summary

Since the first COVID-19 lockdowns in March of 2020, physicians have experienced a number of pandemic-related stressors including concerns about contracting or transmitting COVID-19, implementing rapidly changing state and federal guidelines, unstable revenue streams, and safely and securely implementing telehealth for their patients. Given these stressors, physician burnout is a significant concern.

Physician burnout is a symptom of chronic stress that is detrimental not only for physicians' well-being, but also for patients' access to and quality of care.ⁱ Given these implications, it is important to identify the prevalence of burnout among physicians in Michigan and to understand which physicians are most vulnerable.

In this brief, the Center for Health and Research Transformation (CHRT) at the University of Michigan compares the prevalence of burnout among Michigan physicians before and during the COVID-19 pandemic. In addition, CHRT identifies which physicians are most likely to report COVID-19 related burnout. To do so, CHRT uses data from surveys it conducted of licensed Michigan physicians in summer 2018 and spring 2021.¹

At the conclusion of this brief, CHRT highlights potential programming to address physician burnout, including ensuring physicians have access to convenient and confidential mental health support.

Key Findings

- Among Michigan's primary care physicians, the prevalence of self-reported symptoms of burnout increased from 31 percent in 2018 to 40 percent in 2021.
- 27 percent of all Michigan physicians agreed or somewhat agreed that COVID-19 and the pandemic have made them feel burned out and consider leaving medicine.
- Michigan's emergency medicine and urgent care physicians were especially likely to agree that COVID-19 and the pandemic have caused them to feel burned out and consider leaving medicine.
- Michigan physicians who frequently discussed COVID-19 with their patients were most likely to report burnout.

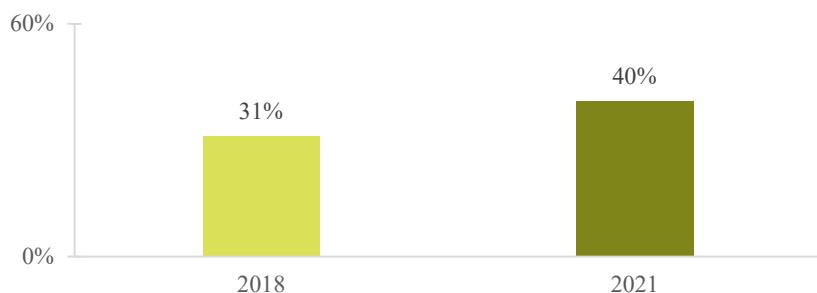
ⁱ The 2021 Michigan Physician Survey was fielded online to licensed physicians in Michigan from April 7, 2021 to May 11, 2021. 2,188 physicians responded to the survey (8% response rate). To adjust for non-response, the final sample was weighted by the region in which the physician practices, as well as years in practice. The 2018 Michigan Physician Survey was fielded in the summer of 2018 and included a sample of 588 primary care physicians. To ensure that the samples are comparable, analyses comparing physician burnout in 2018 and 2021 are restricted to only primary care physicians. All other analyses include the full sample of licensed physicians (both primary care and specialty physicians) from the 2021 survey.

Self-reported burnout among primary care physicians is on the rise

Among Michigan's primary care physicians, the prevalence of self-reported symptoms of burnout increased from 31 percent in 2018 to 40 percent in 2021.²

Figure 1

Percentage of primary care physicians self-reporting symptoms of burnout



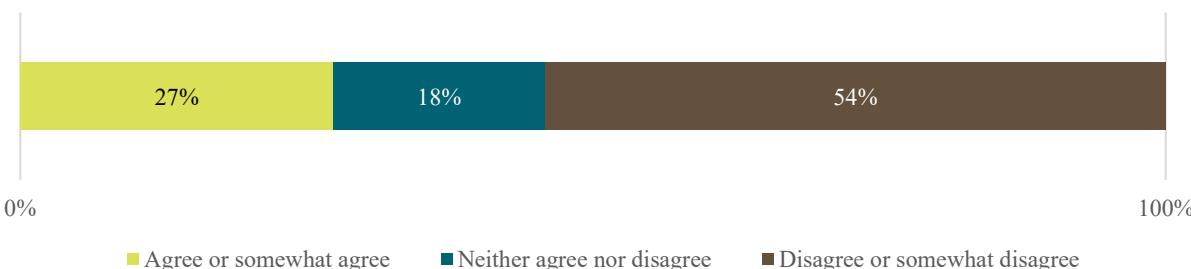
Data Source: Primary care physician responses from CHRT's 2018 and 2021 Physicians Surveys

Over a quarter (27%) of physicians agreed or somewhat agreed that COVID-19 and the pandemic made them feel burned out and consider leaving medicine.³

This statistic has alarming implications for the physician workforce. Even pre-pandemic there were physician shortages across the country;ⁱⁱ the COVID-19 pandemic and resulting burnout among physicians will likely exacerbate these existing shortages.

Figure 2

COVID-19 and the pandemic have caused me to feel burned out and I am considering leaving medicine.



Data Source: CHRT's 2021 Physicians Survey

² Physicians were asked "Overall, based on your own definition of burnout, how would you rate yourself?" Physicians were considered to have no symptoms of burnout if they responded "I enjoy my work; I have no symptoms of burnout." or "Occasionally I am under stress and I don't always have as much energy as I once did, but I don't feel burned out." Physicians were considered to have symptoms of burnout if they responded: "I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion"; "The symptoms of burnout that I am experiencing won't go away. I think about frustration at work a lot"; or "I feel completely burned out and often wonder if I can go on. I am at a point where I may need some changes or may need to seek some sort of help."

Which physicians were most likely to report COVID-19 related burnout?

By Specialty

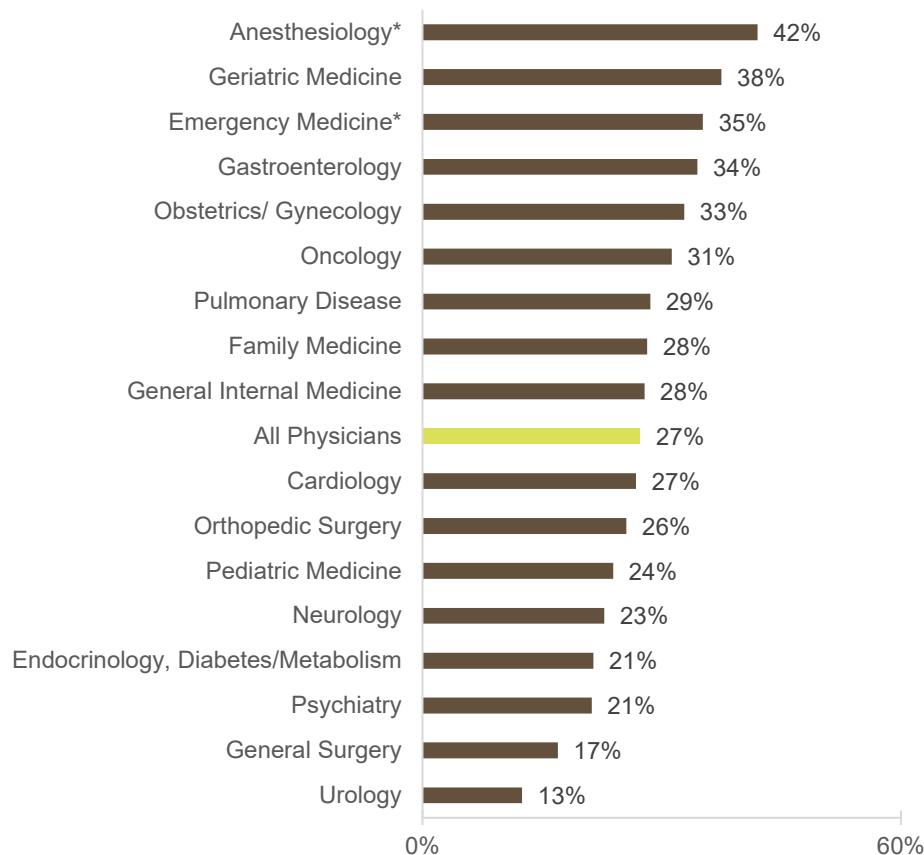
Physicians' likelihood of reporting COVID-19 related burnout varied by specialty.

Physicians in specialties that may have more frequent contact with critically ill COVID-19 patients were among the most likely to agree that the COVID-19 pandemic made them feel burned out to the point of considering leaving medicine. In particular, over one-third of emergency medicine physicians (35 percent) agreed or somewhat agreed that they were experiencing COVID-19 related burnout.

In addition, physicians' likelihood of reporting COVID-19 related burnout varied by their patient population; 38 percent of geriatricians reported COVID-19 related burnout, compared to only 24 percent of pediatricians.

Figure 3

Percentage of physicians reporting COVID-19 related burnout by specialty



Data Source: CHRT's 2021 Physicians Survey

*Significantly different from other physicians ($p < 0.05$)

Physicians' likelihood of reporting COVID-related burnout also varied by their practice arrangement.

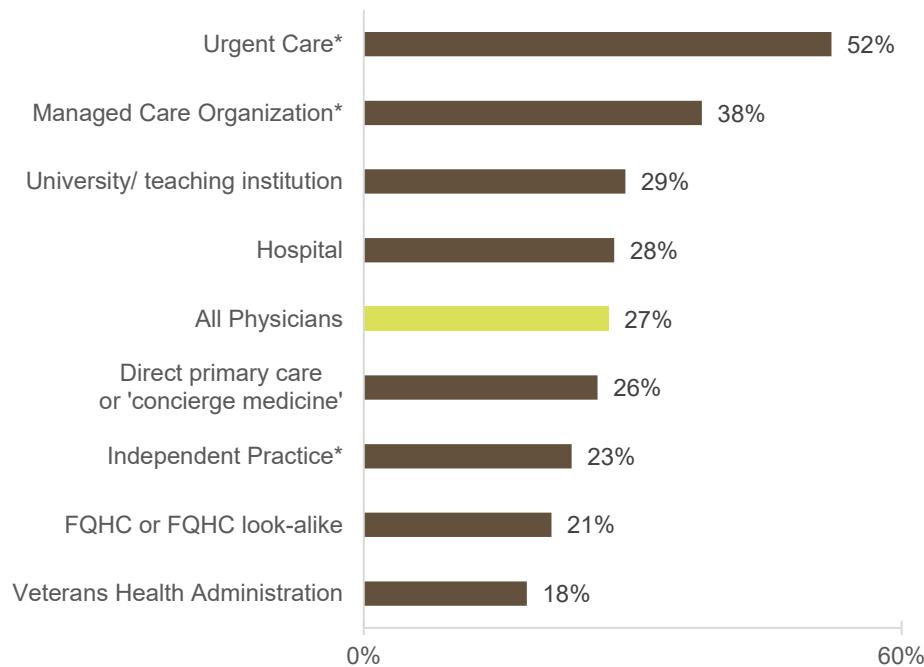
In particular, physicians who worked in urgent care were significantly more likely than others to agree that COVID-19 and the pandemic have made them feel burned out and consider leaving medicine. Approximately half (52 percent) of urgent care physicians reported COVID-related burnout, compared to approximately a quarter (27 percent) of physicians overall.

Physicians in an independent practice were less likely to report COVID-19 related burnout (23 percent) than other physicians, including physicians employed by an urgent care facility (52 percent), by a university or teaching institution (29 percent), or by a hospital (28 percent).

Physicians employed with the Veteran's Health Administration reported the lowest levels of COVID-19 related burnout (18 percent). This finding is consistent with previous research suggesting that VA physicians have a relatively lower prevalence of burnout, perhaps due to the unique nature of their patient population and practice environment.ⁱⁱⁱ It is possible that some of these features also contributed to lower burnout within the context of the COVID-19 pandemic. This finding should be interpreted with caution, however, as it did not reach the level of significance.

Figure 4

Percentage of physicians reporting COVID-19 related burnout by practice arrangement



Data Source: CHRT's 2021 Physicians Survey

*Significantly different from other physicians ($p<0.05$)

By Gender

Female physicians (31%) were more likely than male physicians (25%) to agree that COVID-19 and the pandemic made them feel burned out and consider leaving medicine. This gender gap in burnout is consistent with trends prior to the pandemic.^{iv} This disparity may result from additional stressors that female physicians face, as well as from differences in male and female physicians' willingness to acknowledge and report symptoms of COVID-19 related burnout.

What was not associated with COVID-19 related burnout?

Physicians' likelihood of reporting COVID-19 related burnout was not related to the percentage of their patients whose primary source of insurance was Medicaid, Medicare, private insurance, or self-pay.

There were not significant racial/ethnic disparities nor regional variation in COVID-19 related burnout for physicians.

Furthermore, there were not notable patterns in COVID-19 related burnout by years in practice.

This suggests that the effects of COVID-19 are widespread and affect a diverse set of general demographics.

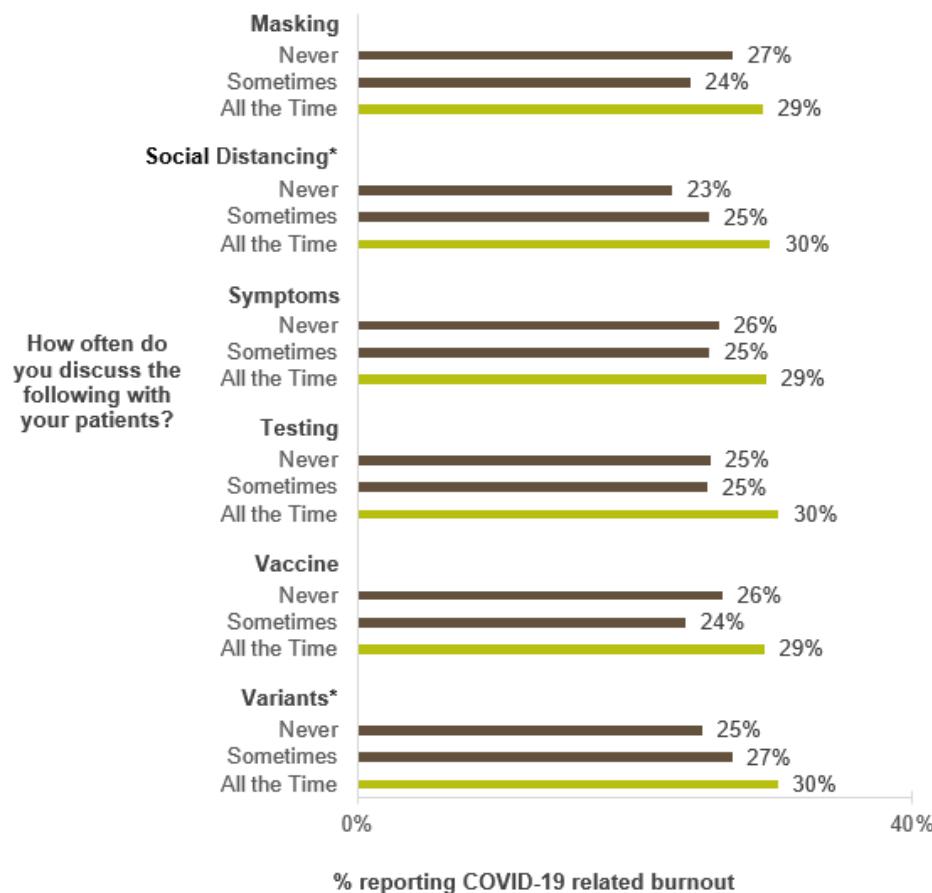
The burnout that physicians experienced was related to the frequency with which they discussed COVID-19 with patients

Overall, physicians who frequently discussed COVID-19 with their patients were most likely to report that the pandemic made them feel burned out and consider leaving medicine.

In particular, the more physicians discussed social distancing and COVID-19 variants with patients, the more likely they were to report burnout.

Figure 5

Percentage of physicians reporting COVID-19 related burnout based on the frequency with which they discussed COVID-19



Data Source: CHRT's 2021 Physicians Survey

*Significant difference ($p < 0.05$)

Conclusion

Over one quarter of physicians in Michigan report burnout due to the COVID-19 pandemic, which likely contributes to the 9 percentage point increase in burnout observed among physicians since 2018.

These findings suggest that the effects of COVID-19 are far reaching, but that certain groups of physicians are more vulnerable to COVID-19 related burnout than others. In particular, physicians who may have frequent contact with COVID-19 patients, including emergency medicine and urgent care physicians, were especially likely to agree that COVID-19 and the pandemic have caused them to feel burned out and that they are considering leaving medicine.

As the pandemic stretches well into its second year, it is critical that we direct mental health and other resources to physicians most in need of support.

In a recent national survey of frontline health care workers, the Kaiser Family Foundation and Washington Post found that the top two reasons that physicians did not receive mental health services when needed were: (1) they were too busy; and (2) they were afraid or embarrassed to seek care.^v This finding highlights the importance of ensuring that physicians have access to mental health care that is convenient and confidential.

In Michigan, the Michigan State Medical Society recently launched SafeHaven™, a program designed to overcome both of these barriers to seeking mental health care. The program gives physicians access to a number of convenient and confidential resources, including 24/7 telephonic support, counseling, and legal and financial consultations.^{vi} Access to this and similar programs will be crucial both in the context and wake of the COVID-19 pandemic, as the psychological distress and professional dissatisfaction caused by the pandemic are likely to have lingering consequences for the healthcare workforce.

The pandemic has not only brought attention to the issue of physician mental health, but also offered insights into how to support health care workers during a crisis. It is important that organizations leverage learnings from the pandemic to strengthen their organization's well-being infrastructure and alleviate burnout.^{vii}

While physicians play an important role as trusted messengers of COVID-19 information,^{viii,ix,x} our findings suggest that these conversations may contribute to physician burnout. It is imperative to identify strategies and resources for easing the burden of these conversations. Greater, more deliberate collaboration between physicians and public health professionals could be instrumental in identifying strategies for communicating important COVID-19 information while also protecting physicians' mental health.

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