

Take a deeper look at burnout in medical education—and how to fix it

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Timothy M. Smith

Contributing News Writer

Admit it: When articles show up in your news feed promising a breakdown of burnout among physicians by specialty, they grab your attention. But a psychologist who's been working on solutions to burnout says research shows medical specialty isn't the key criterion. Not at all.

It's much more specific than that, he says. Much more local. In fact, it follows the old axiom in real estate: Location, location, location.

A webinar on [well-being across the medical education continuum](#), produced by the [AMA Accelerating Change in Medical Education Consortium](#), features a presentation by Dan Shapiro, PhD, a psychologist and vice dean for faculty and administrative affairs at Pennsylvania State University College of Medicine—one of the consortium's 37 member schools. Shapiro detailed a framework for thwarting burnout by focusing on physicians' most basic needs first.

A change of focus

"If you take away nothing else from my talk, consider this: There is so much variability from institution to institution on burnout," Shapiro said. "It's not the specialties. Specialties ... predict a little, but not that much."

"What really predicts burnout is the specifics on the ground," he said. "It's the details that matter."

Committed to making physician burnout a thing of the past, the AMA has studied, and is currently addressing, issues causing and fueling physician burnout—including time constraints, technology and regulations—to better understand and reduce the challenges physicians face. By focusing on factors causing burnout at the system level, the AMA assesses an organization's well-being and offers guidance and targeted solutions to support physician well-being and satisfaction.

Take a lesson from aviation

The first challenge most administrators, faculty and residents face in understanding and addressing burnout is finding a way to quantify it, Shapiro said. Then they have to figure out how to respond to it.

Imagine being a commercial pilot “and that scary light goes on that says one of your engines is out,” he said. “That’s the same as being the leader in a health system or working in GME [graduate medical education] or [being] a hospital president ... and realizing that you have 50% of your clinicians, nurses, etc. burned out. It means you’re trying to fly with only one engine.”

Pilots are a useful professional point of reference, Shapiro said, because they’re trained to deal with emergencies systematically. In the event of an engine failure, for example, any well-trained pilot can deftly combine the aircraft’s speed and altitude to work out the safest place to land. They work their checklists.

Learn with the AMA about eight ways to cut medical student burnout.

Steps toward well-being

Medical school deans, residency program directors and hospital administrators need a similar system for working through their problems. Shapiro says this framework can be found in Maslow’s hierarchy of needs, which posits that humans first need to satisfy their fundamental physiological needs, such as food, water and warmth.

Another basic need is good mental health. The next step up is physical and emotional safety, which is critical to physicians and other health professionals, Shapiro said.

“In one of our studies, more than 50% of nurses had been bitten, spit on, kicked or otherwise struck in the last year,” he noted.

And that’s followed by feeling respected—which can even depend on how staff members are treated by the machines they interact with, like ID card scanners—followed by feeling connected to coworkers.

“Do you feel isolated or do you feel appreciated?” Shapiro asked, noting that having this need satisfied opens the gates to the highest level of well-being—self-actualization.

That is “where you get to experience yourself healing your patients,” he said.



The webinar also includes presentations on integrated coaching models—in which coaching expertise is woven into leadership programming and professional development—and how one medical school protected resident well-being during the perfect storm of COVID-19. Presentation slides and a video recording are available in the [AMA Accelerating Change in Medical Education digital community](#) (registration required).

Check out the AMA STEPS Forward™ open-access toolkit, “Medical Student Well-Being: Minimize Burnout and Improve Mental Health Among Medical Students,” to learn more.

STEPS Forward is part of the AMA Ed Hub™, an online platform that brings together all the high-quality CME, maintenance of certification, and educational content you need—in one place—with activities relevant to you, automated credit tracking and reporting for some states and specialty boards.

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