

Review Article

Work-life balance and burnout: the practicing doctor's dilemma

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Introduction: Burnout rates and physician dissatisfaction are at an all-time high. Work-life balance is the panacea to worker's burn-out. The dictionary defines work-life balance as "*the amount of time you spend doing your job compared with the amount of time you spend with your family and doing things you enjoy*". Workers in public sector work officially for 8hrs per day and depending on the profession this may be further prolonged as in the health sector for 24hrs in some days of the week. For medical practitioners this is not far-fetched and if combined with private practice the man-hour in-put becomes erratic and most times with little or no rest period. It is worse when the combination of public and private healthcare practice run simultaneously, a practice that has become ubiquitous among those in public sector in contemporary Nigeria. A case in hand is the doctor and his professional engagements that are compounded by casual consultations outside his regular work period by friends, family members, relations neighbours etc. who always see him as their first contact when they have health and health related problems. Consultations, professional advice, prescriptions etc. are promptly provided to them at will anywhere the need arises including via phone calls and other electronic media.

In order to survive and make ends meet in a highly demanding and competitive environment the practicing doctor is faced with the challenge of striking a balance between his work demands and his family. For a healthy living standard a worker

ideally needs at least 8hr sleep in a day besides the time for rest from routine work. How the practicing doctor struggles on daily basis to break even and ensures he enjoys a healthy life has become a huge challenge in contemporary society. For the married the situation is worse as there are several aspects of his/her married life that increasingly compete with his/her routine work.

Work Demand: Work has been defined as an activity involving mental or/and physical effort (task) done in order to achieve results. This never goes without job description or specification for the worker's profile or credentials. At employment a worker is handed done a document that describes his general tasks and targets including other related duties and responsibilities of his office or position. It also specifies to whom the worker reports to as well as the qualifications and skills required for the job with appropriate salary scale attached. For the practicing doctor his daily activities invariably include though not limited to, clinical services, teaching, mentoring, research work and community service. In discharging his duty he has to maintain the standard and best practices expected of him irrespective of the pressure and volume of work at his disposal. He does this by appropriate application of acquired skills and competences to achieve efficient health service delivery within a given time.

The basic expectations from a doctor in service delivery include efficient healthcare service delivery as well as being

regular and punctual to work to ensure patient satisfaction. Punctuality is important as keeping to time will reduce patient waiting time to the barest minimum. The expectations also do not exclude clinical meetings as well as other meetings within and outside the health facility in order to keep abreast with modern medical practices. Punctuality and regularity are part of the expectations because they are equally important in his scheduled surgeries, Clinics, ward rounds and nonclinical engagements as a mark of commitment and dedication to his profession in his daily activities. Amiable attitude towards his patients as well as other staff by display of good mannerism and temperance are also part of the expectations.

Stressors: Mannerism and temperament are influenced by work stressors and doctors are not exempt in fact they are the frontline victims in healthcare delivery. Attitude to work speaks much of how much one values and adorns his or her profession in the face of competing demands and work pressures emanating from both work place and at home front. It also determines the respect clients accord the service provider and his profession. The doctor's mannerism and temperament are usually influenced by how much stressed up such is at any given time. When stressed up such is unlikely to be efficient in discharging his/her duties which will invariably hamper efficient service delivery. The stress may be emanating

from an imbalance in the management of his work-family life. Most often than not what drives the doctor's daily life is the standards set for him by family members, relatives and society. This hardly goes without its financial implication that remains an albatross for a stress free work-life in the profession. Therefore, to strike a balance between work and family, time management is very critical. Daily time usage can be classified into:

Time spent at work place;

- Attending to patients.
- In holding meetings (official or none official, social interactions). These are usually with a Boss, Supervisor, Head of Department, Snr. Colleague, Departmental Staff, professional Associations etc.

Time spent outside work place

- With Family members, meeting household needs, groceries, laundry, cleaning, paying bills etc.
- With neighbours, friends etc.
- Sleeping, resting, eating, exercising, visits, reading, meeting religious obligations and other sundry activities.

Depending on individuals, this can be erratic and elastic especially for easy going persons who do not plan their day's activities and be disciplined in time management.

Work-family imbalance: Failure to balance work-family life invariably generates stress and puts the heat on family members.



Spouses are the immediate victims of the consequences of failure to achieve work-family life balance which may rub off on their children. Common altercation between spouses soon ensues and if persistent leads to physical expression of bottled up stress e.g. the wife being at the receiving end as the husband yells at her “*get a house help, do not make me one*”. The husband may be at the receiving end as the wife challenges him to “*choose between the job and your family*”. Some other occasions it is the child that will be at the receiving end as both spouses engage in outbursts throwing tantrum at each other before their child. Asides marital squabbles, imbalance in work-family life may lead to, increased isolation, greater irritability, more time away from home, less communication within the relationship, less time spent together, drop in physical intimacy, more emotional separation. This can drive the couple apart, leading to two partners who are functioning much more as individuals than as a unified team. Each starts to take care of his/her own needs. Spiral misunderstandings and miscommunications begin to surface leading to further disconnect and isolation within the family circle.

A survey carried out among Americans showed that 36% doctors reported that stress made them feel more nervous or anxious. Those who reported anger or irritability consisted 35% of the study group. Others had difficulty concentrating or had forgetfulness, depression, low mood, crying, fatigue, withdrawn mood, feeling overwhelmed. Forty five percent had difficulty sleeping, a change in eating habits or with their appetite (eating much more or less), increased alcohol or drug use. Although we need some level of stress in life to fire us on but when it becomes sustained it becomes unhealthy and

consequential. In the survey suicide attempts were recorded in 28-40/100,000 among doctors and this is more than double that in the general population. Divorces though found lower among Physicians was higher among female doctors. Depression was higher among physicians including drug abuse, alcohol and smoking. It was shown that physicians have higher rates of burnout, depressive symptoms and suicide risk than the general population.

Physicians and trainees experience high degrees of mental health distress and less likely than other members of the public to seek mental health treatment. This is attributed to time constraints, hesitancy to draw attention to self-perceived weakness, concerns about reputation and confidentiality. The suicide rate among male physicians was 1.41 times higher than the general male population. Among female physicians, the relative risk was even more pronounced i.e. 2.27 times greater than the general female population. Twenty-eight percent of residents experienced a major depressive episode during training versus 7–8 percent of similarly aged individuals in the U.S. general population. Self-medication occurs as a way to address anxiety, insomnia or other distressing symptoms. Self-medication may reduce some symptoms however the underlying health problem is not effectively treated. This can lead to a tragic outcome such as assaults and spousal battering. Female physicians were 1½ times more likely to be divorced than male physicians of a similar age. About half of physicians report more symptoms of burnout about twice the rate of other American workers. Common drivers of stress are mainly, excess workload, work inefficiency, lack of autonomy, lack of meaning and satisfaction and work-family conflict.

Finding Solution: Be sincere with yourself and answer this simple question “*Is doing this going to make me wish I was home with my family?*” If “*Yes*” then say “*No to it*” because someone else will do it. It is not time for blame game or buck passing but finding solution by taking decisions such as;

- The excess load has to go. Prioritize your various responsibilities and identify what is important to you. Put your family first even if it means working 3 days per week to stay on top of your family life. Don't try to be too efficient. Do not as a habit take work home. Don't feel like saying yes always because you don't want to offend someone. It's better to say no and succeed than to say yes and perform poorly or worse.
- Engage in healthy and wellness activities with your family. Plan together how to implement vital elements such as, sleep, exercise, healthy eating and out-door activities. Spend time together as a family.
- Disengage from work and take a vacation either long or short one if possible. Take regular scheduled days off with the knowledge of your staff and patients. When out with colleagues, talk things other than medicine. Everyone needs family and friends to rely on. Get baby-sitters, house cleaners and one to take care of the lawn may relieve stress. Don't get into the habit of going into the office on the weekends. Tell your family and friends you want to break the habit so they could remind you.
- Be purposeful and do not lose passion or satisfaction with your work because you no longer find meaning in your work or have lost sight of its purpose. Find meaning

in your work, taking into account family needs and aligning your own needs with those of your organization.

- Balancing work-family roles requires good time-management skills. Effective time-management involves, setting both long and short-term goals, planning and organizing, not engaging in time-wasting activities e.g. lecturing patients. Plan domestic tasks and responsibilities and get help e.g. house-help, driver, laundry service etc.
- Seek insight from your senior colleagues or the elderly on how they have managed their challenges. Sometimes say “this just isn't going to get done today” and work on accepting it.
- Make friends with a few who will agree to never ask you to be their doctor. Set limits for daily work engagements. Create mandatory none work commitments, including family, friends and hobbies. Plan your day. If you fail to plan you have planned to fail. Plan the day by making a list though not rigid but flexible.
- Do task shifting and sharing when necessary. Get others involved. This is important both at work place and at home. Team-work spirit should be exemplified at home. Complement each other without complaining even when you do not understand why you should be the one doing it just move on as long as it does not stress you. Learn when to multitask and when to focus wholeheartedly on things that deserve your full attention.

Task shifting is the rational redistribution of tasks among health workforce team.

Specific tasks are moved, where appropriate, from highly qualified health workers to health workers with shorter training and fewer qualifications in order to make more efficient use of the available human resources for health. While task sharing allows a wider range of cadres to offer certain services, when this can be done safely and effectively as a means of rapidly expanding access and improving healthcare. The goal of task shifting or sharing is to get the right workers with the right skills in the right places doing the right things without necessarily abandoning other methods of increasing the number of qualified health workers.

Conclusion: Every worker who derives satisfaction from his job by way of being contented would have reduced work stress

to the barest minimum. Drawing inspiration from ones spiritual inclination is always helpful and for me I find this Biblical passage highly instructive; 1 Timothy 6:6-10 NIV *“But godliness with contentment is great gain. For we brought nothing into the world and we can take nothing out of it. But if we have food and clothing, we will be content with that. People who want to get rich fall into temptation and a trap and into many foolish and harmful desires that plunge men into ruin and destruction. For the love of money is a root of all kinds of evil. Some people, eager for money, have wandered from the faith and pierced themselves with many griefs.”* Finally, find time to unwind with your family this will ease out some stress. Balance your work life now!



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