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Prevalence of Burnout Syndrome among Physical Therapists of an Academic Private Institute of Lahore

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KEYWORDS

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DECLARATIONS

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ABSTRACT

Background: Due to the exhaustive working climate and chronic stressful conditions, academic physical therapists are highly prone to emotional strain and work-related stress that ultimately leads them towards burnout syndrome. **Objective:** To evaluate the prevalence of burnout syndrome among academic physical therapists of private institutes and delineate the causative agents that contribute to developing this threat among academic physical therapists. **Methodology:** The study design used in this study was a descriptive cross-sectional design, completed in six months. It is a multicenter study that included Lahore University of Biological and Applied Sciences, Fatima Memorial College, Rashid Latif Medical College, Akhtar Saeed Medical and Dental College, and Shalamar Medical and Dental College. Permission from the Ethical Committee of the Lahore University of Biological and Applied Sciences was obtained. Non-probability convenient sampling was taken into consideration for recruiting a sample of 71. The private institutes that were educating the Doctor of Physical Therapy program affiliated with the University of Health Sciences were included in this study. The Maslach Burnout Inventory scale was used to assess the prevalence of burnout syndrome. Prior consent from all the academic physical therapists was obtained. The study variables were presented in the form of descriptive statistics (tables, graphs, and percentages). The questionnaire was accompanied by an informational sheet that explained the nature and purpose of the study and explained that consent was obtained from every therapist. The respondents were assured that their responses would remain confidential. **Results:** A total of 49 academic physical therapists were approached, and all of them responded. The overall prevalence of burnout was 22.4%, with depersonalization and personal accomplishment at 71.4% and 95.9%, respectively. **Conclusion:** The prevalence of burnout among academic physical therapists of private institutes that are affiliated with UHS was 22.4%, with a high level of depersonalization and a low level of personal accomplishment. Therefore, our study suggests that these private institutes should take pragmatic measures to cope with stressful conditions for the physical and mental well-being of academic physical therapists and to improve their working efficiency.

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INTRODUCTION

'Burnout' is a term that came into existence in 1970 for the first time in the USA.[1] Chronic stress and exhaustion are the most vulnerable causative agents.[2] Characteristics of burnout are impaired job performance and poor health, fatigue, irritability, depression, anxiety, and hypertension.[3] Burnout syndrome (BOS) emerges when one's stress coping mechanism becomes ineffective because of chronic stressors, agents and an unfriendly environment in the workplace.[4] Basic burnout consists of three main categories: emotional exhaustion, depersonalization and decreased personal accomplishment.[4] The negative influence of job demands leads to a reduction in creativity and cynicism.[5] The ratio of burnout is increasing day by day among physical therapists, and prevention of this disease is a basic need of our modern time, through early recognition of this condition.[6] Academic physical therapists may face many risk factors at their workplace, such as staff shortage, increased responsibility, increased workload, demands of students, lack of support from senior colleagues, lack of organization skills, and short temper.[4]

Burnout syndrome is a profound emotional tiredness that gradually saps your motivation, joy, and sense of purpose. It's not just about feeling exhausted. It's the silent disintegration that occurs when you consistently give more than you can provide, frequently without even recognising it. On the outside, people who are experiencing burnout may appear to be fine, continuing to show up and complete tasks, but on the inside, they feel as though they are barely surviving. In a society that exalts work and production, admitting that you're not okay can feel overwhelming, lonely, and even shameful at times. Burnout is not a sign of failure but a normal human reaction to ongoing stress and unfulfilled demands, and the first step toward recovery is realising that your health is just as important as your obligations. Burnout, according to the World Health Organisation, is a syndrome that arises from ongoing working stress that has not been effectively handled. It is typified by feelings of exhaustion, a greater mental detachment from one's work, and a decrease in professional efficacy.[5]

Cognitive impairments resulting from BOS lead to medical errors, and this causes dissatisfaction and distress and has significant costs, not only for physical therapists but also for their families and the whole organisation.[7] It has also compromised the health of a person, and the enormous problems one can face are gastrointestinal disturbance, fatigue, insomnia, headache, depression, and irritability.[8] Interaction with colleagues will also impact personal performance. If a person is less interactive in daily life, they hustle.[9] It will be troublesome for him/her to give the best performance, and ultimately it decreases the confidence level, which then leads to an inferior complex.[10] There are many studies on BOS among health care professionals, but for physical therapists very first time, this term was used by Wolfe.[10] According to his suggestion, BOS was caused by strife, aggravations, failure, and baffling situations could be the cause of this event.[11,12] The purpose of the current study is to evaluate the prevalence of burnout syndrome among academic physical therapists and delineate the factors that are associated with this emerging threat.

METHODOLOGY

The study design used in this study was a Descriptive cross-sectional design, and that took 6 months to complete. It is a multicenter study that included Lahore University of Biological and Applied Sciences, Rashid Latif Medical College, Akhtar Saeed Medical and Dental College, and Shalamar Medical and Dental College. Non-probability convenient sampling was taken into consideration under a sample size of 71. By using World Health Organisation software under the following formula with a 0.137% prevalence confidence interval of 97% (1-α) and 0.08 precision (d).[13] The private institutes that were educating the Doctor of Physical Therapy program[12] and also affiliated with the University of Health Sciences (UHS), were included in this study. And those Private institutes that were not affiliated with UHS were not included.

Data was collected from all the academic physical therapists of private institutes in Lahore. The Maslach Burnout Inventory (MBI) scale was used to assess the prevalence of BOS. The validity of MBI is 0.87.[14.] Prior consent from all the academic physical therapists was obtained. For data analysis, data were entered using the Statistical Package for Social Sciences (SPSS) version 23. The study variables were presented in the form of descriptive statistics (tables, graphs, and percentages). Permission from the Ethical Committee of the Lahore University of Biological and Applied

Table 1: Frequency and percentages of variables

Variables		Frequency	Percent
Gender	Male	26	53.1
	Female	23	46.9
Marital status	Married	23	46.9
	Unmarried	26	53.1
Burnout	Low-level	16	32.7
	Moderate	22	44.9
	High-level	11	22.4
Depersonalization	Low-level	1	2.0
	Moderate level	13	26.5
	High level	35	71.4
Personal accomplishment	Moderate level	2	4.1
	Low level	47	95.9

Sciences was established. The questionnaire was accompanied by an informational sheet that explained the nature and purpose of the study and explained that consent was taken from every therapist. The respondents were assured that their responses would remain confidential.

RESULTS

The results showed the comparison of two training groups: concentric and eccentric training, across several variables. The average age of participants in the concentric training group is 24.47±2.9, while the eccentric training group has an average age of 26.09±3.76. Both groups have the same average height of 1.69 meters, with standard deviations of 0.078 and 0.083, respectively. The average weight is 63.91±8.79 for the concentric training group and 60.67±10.36 for the eccentric training group. The body mass index. Out of 49 participants, 26(53.1%) were males and 23(46.9%) were females. Out of 49 participants, 223(46.9%) were married and 26(53.1%) were unmarried.

About 16(32.7%) were low-level burnout, 22(44.9%) were moderate levels of burnout and 11(22.4%) were high levels of burnout. Almost 1(2%) were low levels of depersonalization, 13(26.5%) were moderate levels of depersonalization, and 35(71.4%) were high levels of depersonalization. However, 2(4.1%) had a moderate level of personal accomplishment, and 47(95.9%) had a low level of personal accomplishment.

DISSCUSSION

The purpose of this study was to assess the prevalence of burnout syndrome among academic physical therapists of private institutes affiliated with UHS, Lahore, Pakistan. Burnout is a syndrome resulting from chronic workplace stress that has not been successfully managed.[15] During the current course of study prevalence of burnout was assessed by the Maslach Burnout Inventory scale, having three components (Emotional exhaustion, Depersonalization[16], and Personal accomplishment).[17] The participants involved in this study were both males and females with married and unmarried marital status. According to conducted study results, the prevalence of Burnout is 22.4%, with a high level of depersonalization at 71.4%, and a low level of personal accomplishment at 95.9%.

Burnout prevalence is quite high from the previous study that was conducted in Ethiopia on healthcare professionals.[17] Depersonalization and personal accomplishment results are also higher than the study conducted in South Australia.[16] The burnout prevalence of the conducted study is also higher than the study conducted by E. Zambo Anderson on burnout and stress among physical therapists.[18] Eileen Donohoe conducted a study in 1993 on factors associated with burnout of physical therapists using the Maslach Burnout Inventory scale. The results of this study were that burnout among physical therapists was 46%, with 20% of depersonalization and 60% of a low level of personal accomplishment.[19] Theresa Du Plessis et al. conducted a descriptive study on the prevalence of burnout syndrome among physical therapists in South Africa who were working in private physical rehabilitation centres. According to the results, the prevalence of Burnout was high at 57.14%, de-personalisation, and personal accomplishment was 20.40% and 38.77% respectively.[22]

Elbarazi et al. conducted a study on the prevalence of burnout and associated factors among healthcare professionals in Arab countries in 2017. According to the results, the prevalence of burnout was from a moderate to a high level in Arab countries.[23] However, the differences in the prevalence of burnout among different studies are due to many factors such as working environment, demographic characteristics, leadership, management, and individual attitudes.[20,21] Results of the present study were those conducted by Theresa Du Plessis et al., which concluded the high prevalence of burnout among physical therapists.[22,23] The sample size should be large

enough to involve the majority of therapists, including those running the clinical set-ups. To further reveal the underlying causative agents of burnout syndrome in-depth, a detailed study comparing multiple factors, health conditions, and specific age group participants should be considered. The next study should be conducted to assess burnout both in the private and government sectors to assess the difference in the prevalence of BOS. The study was limited to only those private sectors that were affiliated with UHS.

CONCLUSION

The prevalence of burnout among academic physical therapists of private institutes that are affiliated with UHS was 22.4%, with a high level of depersonalization and a low level of personal accomplishment, assessed with the Maslach Burnout Inventory scale. Therefore, our study suggests that these private institutes should take pragmatic measures to cope with stressful conditions for the physical and mental well-being of academic physical therapists and to improve their working efficiency.

DECLARATIONS

Consent to participate: Written consent had been obtained from patients. All methods were performed following the relevant guidelines and regulations.

Availability of data and materials: Data will be available on request. The corresponding author will submit all dataset files.

Competing interests: None

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