

# Prevention of harmful stress amongst doctors

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## Context

Research to date has shown a link between practitioner stress/burnout and poor patient care<sup>e.g.2</sup>. Contributory factors to high stress levels in thisContext professional group (such as heavy workload and economic constraint) and the need for resilience are well documented<sup>e.g. 3, 4</sup>. Less is known, however, about the effectiveness of educational interventions that may help doctors to recognise and manage the harmful effects of stress in their own practice.

## Research aim

The study gathers knowledge and seeks to build consensus around pedagogy for educational interventions which combat stress for doctors, and are offered as continuing professional development or as part of medical curricula. It asks the following research questions:

- 1) What are the pedagogic features of successful educational interventions to manage the harmful effects of workplace stress for doctors?
  - What are the short and/or long-term impact of successful educational interventions to manage the harmful effects of workplace stress?
  - Which features of pedagogic design contribute to these?
- 2) What are the other contextual factors affecting learning and outcomes?
  - What are the reactions of key stakeholders to these interventions?
  - Are particular interventions better suited to particular individuals and organisational contexts?

## Methods

Following an approved National Institute of Health Research (NIHR) approach<sup>5</sup>, the study has three components:

- A thematic synthesis concerning the pedagogic features of successful educational interventions on stress management for doctors, using EPPI 4 Reviewer software.
- Up to 20 semi-structured interviews with medical educators concerning their experiences and views on workplace stress and interventions of use.
- An online Delphi exercise to inform and prioritise pedagogic design with approximately 40 contributors.

## Results

Interim results suggest:

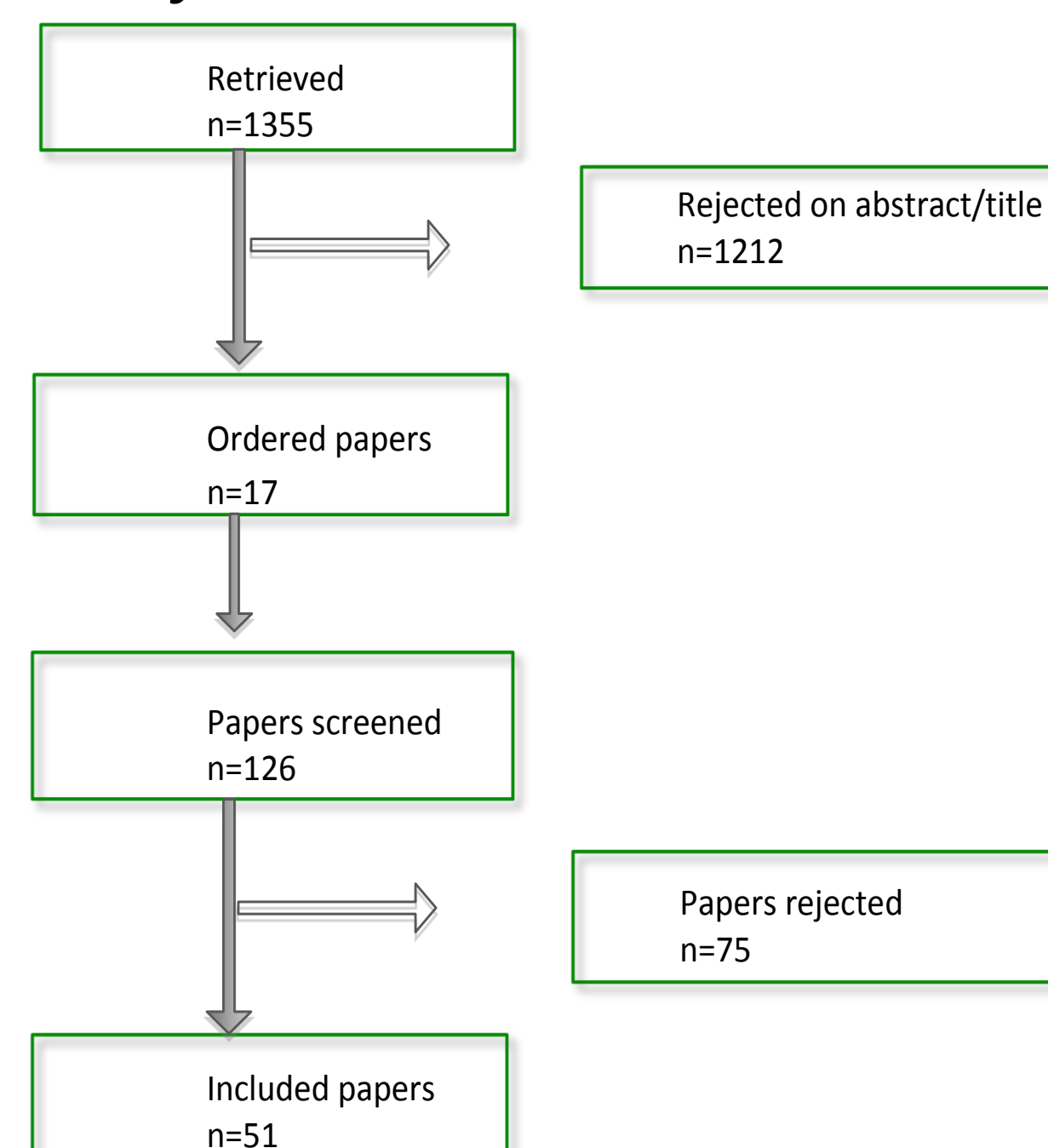
- support groups and mindfulness training are the most common educational intervention types;
- quantitative research is the more prevalent research type to ascertain success or otherwise of interventions and the short and long-impact thereof; and
- commonly researched populations include medical students and doctors as part of multi-disciplinary teams.

## Thematic synthesis

The poster reports the preliminary results of the synthesis of the national and international literature.

- A protocol to guide the search was drawn up to define the search and the quality of the results to be evaluated.
- Keywords searched: (intern or interns or internship or resident or residents or physician or "medic\* practi\*" or doctor or surgeon or registrar or psychiatrist or general practitioner) AND (stress or burnout or resilien\* or fatigue).
- Exclusion criteria defined (pre 1990; articles not published in the English language).
- Searched databases (Medline, PsycINFO, ERIC, PubMed, Web of Science, Proquest and conference abstracts).
- First stage screening of title/abstract.
- Second stage screening out articles not relevant to the review i.e. wrong intervention or professional group.
- Third stage screening appraising quality filtering out those that did not use qualitative and/or quantitative research

## Study selection and exclusion



### Enhancing relaxation states and positive emotions in physicians through a mindfulness training program: A one-year study

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