Title: The Prevalence and perceived reasons for burnout and depression amongst students.

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The context and setting: The study was done at the Medical School of the University of Pretoria, South Africa.

Why the idea or change was necessary: Over the 6-year training program, it was perceived that some medical students lose their motivation and positive attitude. They become negative, and seem depressed and/or burnt out. They appear apathetic and cynical. Abuse of substances may increase and some require anti-depressant drugs.

The purpose of this study was to determine (1) the prevalence of depression and burnout amongst medical students and (2) to identify their perceived reasons for this. The results will enable faculty to develop effective and appropriate intervention strategies and support structures.

What was done: The study was conducted in two phases after Faculty Ethics Committee approval was obtained. During phase 1 two focus group discussions were held to determine students’ perceived reasons for burnout and depression. Student participants were randomly selected from a class list and divided into pre-clinical and clinical cohorts of 6-8 in each group. The response to the exploratory question “What do you think are the reasons that medical students get burnout and depression?” were transcribed and analyzed to identify stressors. A questionnaire was developed from these results.

In phase 2 a voluntary anonymous questionnaire containing a demographic section, the Beck’s Depression Inventory (BDI), the Maslach Burnout Inventory (MBI) and the developed stressor questionnaire, was administered to all medical students in the school (n= 1255).

Evaluation of the results: A total of 480 students (response rate 38.2%) completed the survey.

Of the students that completed the MBI, symptoms of burnout were reported by 56% (240 / 428). There is a statistically significant increase in prevalence of burnout as the year of study progresses (Pearson $\chi^2 = 43.9039$ Pr < 0.001) and a significant correlation between two subscales of the instrument, namely emotional exhaustion and depersonalisation (p < 0.001)

Of the students that completed the BDI, depression of varying severity was present in 48.6% (197/405).

Those who completed the questionnaire identified the following 3 factors as contributing most to their stress:

Difficulty remembering theory they had learnt previously.
Desire to obtain at least 60% in each end of block test so that they were exempt from writing exam.
Expectation to perform well in ALL tests.

Other regular stressors were identified as the heavy theoretical workload throughout the course, long working hours in clinical rotations, sleep deprivation, little time for socializing and recreation and feelings of guilt when they don’t study.

This study has identified a high prevalence of burnout and depression in our students (comparable to studies from the USA). This study identified retaining knowledge over the longer term, performing sufficiently well to be exempted from exams in every block as significant stressors for our students. The undergraduate program committee will be asked to explore strategies for improving deep learning and reviewing the exam exemption policy.