The Glass Half Full: The Relationship Between Optimism, Burnout, and Well-being

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Background: Burnout is defined as a prolonged response to chronic emotional and interpersonal stressors. Burnout is common in physicians and the specific emotional and physical challenges of emergency medicine place emergency physicians at greater risk. Optimism is defined as a powerful cognitive filter that can influence an individual’s views of events. One’s adaptation and reaction to events have been reported to play an important role in stress, well-being, and career burnout. To date, the relationship between optimism, burnout, and well-being has not been studied extensively in physicians.

Objective: To determine if optimism is associated with self-reported burnout and well-being in Emergency Medicine Residents.

Methods: In January 2017, we conducted a multi-center cross-sectional survey at 5 large, urban, university-affiliated emergency departments. Optimism was measured using the Life Orientation Test-revised (LOT-R); burnout was measured with the Maslach Burnout Inventory (MBI); and well-being was measured with the WHO-5 Well-being Scale. Categorical data are presented as frequency of occurrence, while continuous data are presented as means +/- std deviation. Pearson’s correlation coefficients are reported. 2-tailed Student’s T-tests and one-way ANOVA were calculated to examine relationships between variables (Alpha = 0.05). This study was IRB approved.

Results: 218 of 258 eligible residents (85%) completed the survey. 147 (67.4%) were male, 70 (32.1%) were female and one identified as “other” (0.01%). 161 residents (73.8%) met the criteria for burnout and 104 residents (47.7%) met the criteria for low well-being. The mean optimism score was 15.4 (±3.55) and was not significantly different across PGY level or gender.

Optimism scores were inversely related to the scores for emotional exhaustion and depersonalization on the MBI (r=-0.44, p <0.01 and r=-0.31, p<0.01 respectively), and correlated with personal accomplishment and the scores of well-being on the WHO-5 (r=0.42, p <0.01 and r=0.45, p<0.01 respectively). Mean optimism scores of residents who met criteria for burnout and low well-being were significantly lower than residents who did not meet the criteria (p<0.05).

Conclusion: There appears to be an inverse relationship between self-reported measures of optimism and burnout, and a direct relationship with well-being. Residents identified as having a less optimistic viewpoint may benefit from learning new ways to adapt and react to events and build optimism.