

POLICY BRIEF

Burnout Among Family Physicians by Gender and Age

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Using data from 2017 to 2018, we found that female family physicians, especially those younger than 40 years of age, experience burnout at higher rates than males. This has implications for the primary care workforce and suggests pathways for policy makers and health system administrators to more effectively tackle burnout in their organizations. (J Am Board Fam Med 2020;33:355–356.)

Keywords: Family Physicians, Primary Health Care, Professional Burnout, Women Physicians, Workforce

Female family physicians (FPs) are currently entering the primary care workforce at higher rates than males (53.5% of family medicine residents in the 2017 to 2018 academic year were female).¹ At the same time, while burnout is high among FPs overall, a 2016 study of FPs seeking to continue their American Board of Family Medicine (ABFM) certification showed that females were more likely to report burnout than males.² Burnout can lead to high turnover rates and reduction of work hours threatening the primary care workforce.^{3,4} Our objective was to assess whether gender and age-based associations of burnout in FPs have remained constant.

We used 2017 and 2018 data from the Family Medicine National Graduate Survey (NGS, response rate of 67%)⁵ and the ABFM Continuing Certification Examination registration questionnaire (100% response rate).⁶ All respondents to the NGS, which is administered 3 years postresidency graduation, and a 20% sample of practicing FPs

seeking to continue their ABFM certification were asked 2 burnout questions validated to measure emotional exhaustion and callousness.⁷ We combined the 2 years of data and summarized the proportion screening positive for burnout in each cohort by gender. The American Academy of Family Physicians Institutional Review Board approved this study.

A total of 7065 FPs data were included: 3759 from the NGS (all less than 40 years of age) and 3306 from the Continuing Certification questionnaire (all 40 years of age or older). As shown in Figure 1, female FPs were significantly more likely to report emotional exhaustion (43 to 45%) than male FPs (34 to 37%) for the age groups < 40, 40 to 49, and 50 to 59 ($P < .001$, $P = .03$, $P = .006$), but the gap was widest for FPs under 40 (11.8%). FPs 60 years and older were less likely to report emotional exhaustion, with the gender gap almost disappearing. Overall, fewer FPs reported callousness than emotional exhaustion, and gender differences were only significant for FPs under 40 years old, who reported higher rates of callousness (24.9% vs 20.6%, $P = .002$).

Young, early career female FPs continue to report emotional exhaustion and callousness more frequently than do male FPs of any age. Female FPs make up a growing proportion of the primary care workforce, and gender has been shown to influence how physicians experience burnout.⁸ Thus, policy makers and health system administrators need to consider strategies that target gender-specific experiences to prevent burnout and ensure a healthy primary care workforce.

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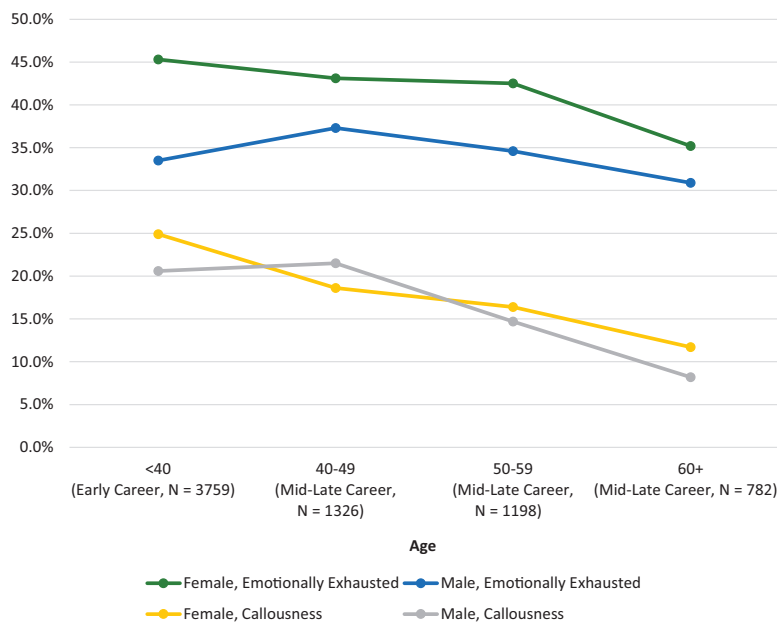
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Conflicts of interest: AE, ZM, and LP are employees of the American Board of Family Medicine.

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Figure 1. Presence of emotional exhaustion or callousness by gender and age of 2017 and 2018 American Board of Family Medicine Continuing Certification candidates (mid-to-late career) and respondents to the National Graduate Survey (early career) (*n* = 7065).



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