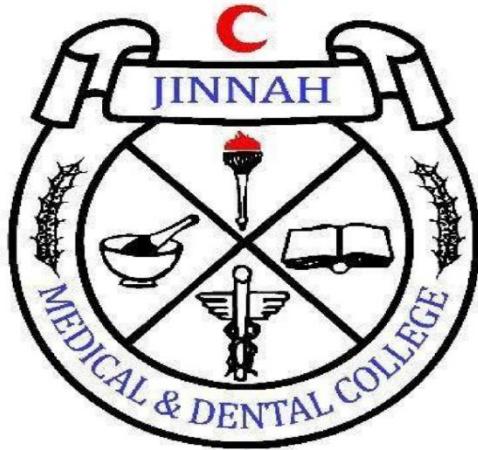


Synopsis

Prevalence of Burnout Syndrome and Its Association with Evidence Based Practice among Physiotherapist of Karachi, Pakistan



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Prevalence Of Burnout Syndrome and Its Association with Evidence Based Practice Among Physiotherapist of Karachi, Pakistan

1. Introduction

Burnout is a triad of emotional exhaustion, depersonalization and reduced self-fulfillment in work environment¹. Medical professionals particularly physiotherapists are challenged physically and mentally hence prone to burnout². The nature of therapeutic relation that develop in physiotherapist and patient, insufficient support from management or colleagues, work obscurity/ low work recognition in work, high work load, and time pressure are all precipitating factors of burnout syndrome³. Catastrophic impact of burnout involve practitioner, patient and organization. Practitioner burnout gives rise to concentration deficits, alcohol abuse, depression and suicidal tendencies. Organization suffers from employee burnout due to increased cost of employee turnover. This results in low patient satisfaction^{4, 5}. Ebp is amalgamation of high-quality clinic evidence, clinical practice and patient preferences. Therapeutic interventions that make use of EBP have shown greater success rate, low economic cost and decreased the necessity of Medical-Surgical interventions. For above mentioned reasons Evidence-based practice stands as gold standard in clinical practice⁶. Since burnout syndrome has such strong impact in clinical practice, this study is aimed to estimate the prevalence of this syndrome among practicing physiotherapists in Karachi. Moreover, this study will aid in structuring probable strategies to prevent or cope with burnout syndrome to help future physiotherapists in their professional lives¹⁶.

1.1 Statement of the Problem

Burnout syndrome and its consequences have the part of a physiotherapist's daily life according to the past researches. Considering the negative effects of burnout, it's necessary to dig deep into this phenomenon. Following research is conducted to determine the prevalence of burnout syndrome among physiotherapists who follow EBP guidelines in their clinical practice. This research will provide us with a fair idea of burnout syndrome and its relation with evidence-based practice.

1.2 Rationale of the Study

After a huge review of different articles, we noted that the psychological health of clinical practitioners usually does not get much importance and the prevalence of burnout related to many factors is high in the healthcare industry. There is no research present in Karachi about burnout and its association with evidence-based practice among physiotherapists. This topic is less prioritized by healthcare professionals, ignoring it will lead to serious conditions and may affect the therapist's work. In this study we'll be conducting a cross sectional study to calculate the prevalence of this syndrome among the physiotherapist and the evidence-based practice that may influence it. The fundamental reason for conducting this study is to spread awareness about this syndrome and also its association with evidence-based practice.

1.3 Objective

To determine the prevalence of burnout syndrome among physiotherapists in Karachi and to investigate its association with evidence-based practice.

1.3.1 Operational Definitions

- 1. Burnout Syndrome:** Burn-out is a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed. It is characterized by three dimensions: feelings of energy depletion or exhaustion; increased mental distance from one's job, or feelings of negativism or cynicism related to one's job

2. **Burnout:** Physical or mental breakdown brought on by stress or overwork.
3. **Evidence-based practice:** EBP is a method for review, analyze and translating data from patient preferences, clinical experience, and research to inform treatment protocols and decision making. Different kinds of healthcare workers use it.

1.4 Hypothesis

1.4.1 Null Hypothesis

There is no association of burnout and evidence-based practice among physiotherapists.

1.4.2 Alternate Hypothesis

There is an association of burnout and evidence-based practice among physiotherapists.

2. Literature Review

Nogueira, Carral, Martinez et al (2022) stated that, Burnout is a triad of emotional exhaustion, depersonalization, and reduced personal accomplishment (Rogan S *et.al*, 2019). According to one study conducted in (2020) Burnout has been measured in physicians, nurses and other health professionals. As compared to physiotherapy, it has very few articles on it (Rogan S *et.al*, 2019). Two studies concluded that, Burnout is a constant feeling of exhaustion and failure in response to an excessive demand on one's energy and then putting unfavorable emotions in a workplace and also reduced interest, incompetence, and distress (Rogan S *et.al*, 2019; Leszczak and Matłosz P, 2021). **Leszczak and Matłosz P** (2021 January) declared that, Physiotherapy is a profession which in particular demands mental and physical efforts making them more vulnerable to Burnout (Rogan S *et.al*, 2019). According to **Luijckx E, Rogan S e.t al**, (2019), Risk factors associated with burnout can be poor employee or management support that may lead to little acknowledgment in work (Rogan S *et.al*, 2019). **Nogueira and Rodríguez et al** published in (2021) that, Loss of influence over workplace, shortage of time, self-criticism, ineffective coping

mechanism (Rogan S *et.al*, 2019). In a study conducted by **Sunjaya *et al*** stated that the sign and symptoms of burnout include being Mournful, blamable, feeling of degradation, incapable, distress, anorexia, cognitive impairment, and sleeping patterns dysfunction **Leszczak, Matlosz P** (2021) **Escudero AC, Fragoso A, and Garlito PA.** (2020) stated that, they also get issues in their mutual relationships at social level (Rogan S *et.al*, 2019). According to another research Burnout has unfavourable effects on employees, their families, the workplace and organizations (Rogan S *et.al*, 2019).

According to **Patel RM and Bartholomew J.** (2021), In healthcare professionals, burnout leads to high level of turnover from job. Poor quality life, decreased focus, drug and alcohol addiction, increased depression and suicide (Rogan S *et.al*, 2019). One of the previous researchers mentioned in there study as, Burnout increases medical error which lowers the standard of medical care (Rogan S *et.al*, 2019). **Puhanić P, Erić S *et al*** (2022) stated that, there is 10% to 80.5% percentage of chances of burnout among health care practitioners (Rogan S *et.al*, 2019). According to two studies: The tool used for accessing burnout is Maslach burnout inventory survey in the version of human services (Rogan S *et.al*, 2019). **Hasani F, MacDermid JC *et al*** published their study in (2020) and stated that, the concept of evidence-based practice has become more significant in physiotherapy clinical practice since the last 2 decades (Rogan S *et.al*, 2019). **Jae Yong Yoo in 2019** commented that, Evidence based practice has been described as a procedure that integrates patient values and preferences with clinical experience, the best data available from systemic research and clinical expertise (Rogan S *et.al*, 2019). Two studies concluded that: In clinical practice, Evidence Based Practice has emerged as a gold standard in number of disciplines including medicine, rehabilitation and allied health sciences (Rogan S *et.al*, 2019). According to the study conducted in (2020), In the past 10 years, doctors in physical medicine and rehabilitation have started considering patients in the concept of shared decision making in their work¹⁴. **Yahui HC, Swaminathan N** (2017) stated that, Shortage of time, decreased interest, clinical setup issues, patient adherence to medical advice are the main barriers for evidence-based practice implementation¹⁵. **Nogueira, Rodríguez, Carral *et al*** (2021) mentioned in there study that, Evidence based practice was measured by using Evidence based practice questionnaire (EBPQ-19) in one of the study is was stated that Physical therapy interventions based on evidence based practice have been shown to have higher success rates, reduced costs, and decreased

need for medical surgical intervention . As physiotherapists are susceptible to burnout. So, knowledge of stress management techniques is crucial to prevent this. It should be taught at individual as well as organizational level (Rogan S *et.al*, 2019).

3. Material And Methods

3.1 Study Design

Cross-sectional (analytical) study design

3.2 Study Setting

The data collection will be conducted in different hospitals

3.3 Study Duration

This study will take approximately 1 year for its completion.

3.4 Sample Size

A sample calculation was made to achieve a margin of error of 5 % and a confidence level of 95%. The Sample size obtained was about 160 physiotherapists who participated in the study.

Sample size: $n = [DEFF * Np(1-p)] / [(d^2 / Z^2 1-\alpha/2 * (N-1) + p*(1-p)]$

3.5 Sampling Technique

Sampling technique that will be used is simple convenient sampling.

3.6 Inclusion Criteria

1. Physiotherapists of Karachi.
2. Age group: Between 25-45 years.
3. Physiotherapist working in Tertiary care hospital

3.7 Exclusion Criteria

1. Working hours less than 5 hours.
2. Home based physiotherapist
3. Physiotherapist working in Primary care hospitals

3.8 Outcome Measures

The outcome measure for the burnout and its association with evidence-based practice will be collected through Maslach burnout inventory survey and evidenced-based practice questionnaire.

4. Data Collection Procedure

The data will be collected through the Maslach burnout inventory scale and evidenced-based practice questionnaire.

4.1 Data Analysis Procedure

Descriptive analysis of all the quantitative variables using Kolmogorov-smirnov test and Levene test for homogeneity and Pearson's correlation coefficient for quantifying the association and Student t-test.

Executives Summary	Introduction	Literature Background	Methodology	Data Analysis	Result and Comparison	Discussion & Conclusion	Future Recommendation	Final representation
2023								2023

4.2 Equipment to conduct research (if any)

Free software/Lan such as will be used to conduct this research.
Desktop/laptop machine will be used to run simulation.

4.3 Budget details and source of financing (if any)

Scholarship/Self s funding

5. Summary/Conclusion

This sort of study will depict serotonin levels cancer using impression segmentation of brain cancer among the MRI images and demonstrates the impacts of our right now proposed solution. -----

***Important Guidelines:**

You should give some following instructions along with the Format of synopsis:

- a. Language: English.
- b. Text: should be in a single column and black in color.
- c. Page size: Page size should be A4.
- d. Margins: The left margin should measure 1.5 inches. The right, bottom and top margins should each measure 1 inch.
- e. Line spacing: Line spacing, of all text, including bibliographic references, should be 1.5. Figures, tables and their captions should be single-spaced. Line spacing should be 6 points (before and after) between the paragraphs.
- f. Font style: Times New Roman font style should be used.
- g. Font size: should be 12 points in main body text.
- h. Headings and sub-headings: Headings should appear in capitals, bold 14-point font, sub-headings should be left aligned, all-in capitals, bold and 12-point font.
- i. The use of recent references when adding information from literature is encouraged.

The entire length of the synopsis should not be more than 3000 words/ 5-6 pages for MPhil and 4000 words/ 7-8 for PhD students. The Length of Synopsis does not include title page, content page, signatures page, consent page, ERC approval page, appendix (if any) and reference pages. In addition, for quantitative variables, only actual answer and no options or coding (see questionnaire in attached file).

Proposal for Undergraduate/Postgraduate Advisors

The advisors to this thesis are _____ and _____. I believe that their experience is adequate to **advise** this thesis because both have wide knowledge and expertise in their area of research. This thesis is moreover towards

detection or investigation process and _____ persist all kind knowledge necessary to **advise** this thesis. Similarly, _____ is an _____ with different Techniques such as _____. In order to complete the goal of this thesis _____ and _____ supervision is valuable and admirable to me.

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Annexure. A

Consent Form

Prevalence of burnout syndrome and its association with evidence-based practice among physical therapists of Karachi, Pakistan.

Organization: Jinnah College Of physical therapy, JMDC

We are the students of DPT batch 1 from Jinnah College of Physical Therapy. We are conducting research and you are being invited to take part in this research study. Our research will emphasize the prevalence of burnout syndrome and its association with evidence-based practice among physical therapists in Karachi. If you decide to participate in this study, you are free to not answer any questions or withdraw at any time if you want to.

No financial participation will be required. This will take hardly 10 to 15 minutes to complete this form. We are conducting research through two questionnaires. Based on the burnout scale and evidence-based practice. You just need to answer some simple questions. The data collected will be kept confidential. This will be used for scientific purposes only.

Signature of Participant:

راضی نامہ

برن آؤٹ سنڈروم کا پھیلاؤ اور اس کا ای-بی-پی کے ساتھ تعلق کراچی کے فزیو تھراپسٹ میں

انتظامیہ: جناح کالج آف فیزیکل تھراپی

ہم جناح کالج آف فیزیکل تھراپی سے ڈی پی ٹی بیچ 1 کے طالب علم ہیں۔ ہم تحقیق کر رہے ہیں اور آپ کو اس تحقیقی مطالعہ میں حصہ لینے کے لئے مدعو کیا جا رہا ہے۔ ہماری تحقیق کراچی میں فیزیکل تھراپسٹوں کے درمیان برن آؤٹ سنڈروم کے پھیلاؤ اور ثبوت پر مبنی پریکٹس کے ساتھ اس کے تعلق پر زور دے گی۔

اگر آپ اس مطالعہ میں حصہ لینے کا فیصلہ کرتے ہیں تو آپ کسی بھی سوال کا جواب نہ دینے یا اگر آپ چاہتے ہیں تو کسی بھی وقت دستبردار ہونے کے لئے آزاد ہیں۔ کسی مالی شرکت کی ضرورت نہیں ہوگی۔ اس فارم کو مکمل کرنے میں بمشکل 10 سے 15 منٹ لگیں گے۔

ہم دو سوال ناموں کے ذریعے تحقیق کر رہے ہیں۔ برن آؤٹ اسکیل اور ثبوت پر ای-بی-پی کی بنیاد پر آپ کو صرف کچھ آسان سوالات کے جوابات دینے کی ضرورت ہے۔ جمع کردہ ڈیٹا کو خفیہ رکھا جائے گا۔ یہ صرف سائنسی مقاصد کے لئے استعمال کیا جائے گا۔

شرکت کنندہ کے دستخط: _____

SOCIODEMOGRAPHIC DATA

Participant is requested to fill the following:

NAME OF THE PARTICIPANT (OPTIONAL): _____

AGE: _____ GENDER: _____

MARITAL STATUS: _____

PROFESSIONAL EXPERIENCE (YEARS):

- 0-5
- 6-10
- 11-15

EDUCATION:

- Bachelor's degree
- Ph.D.
- Master's degree

FIELD OF WORK

- Private
- Public

WORK SHIFT:

- Morning shift
- Afternoon shift
- Morning and afternoon split shift

WORKING HOURS:

- Less than 5 hours
- 5 hours
- More than 5 hours

ARE YOU TAKING ANY MEDICATIONS?

- Yes
- No

IF "YES" THAN WRITE THE NAME OF THAT MEDICINE: _____

Annexure. B

Burnout Syndrome Questionnaire

Table.1:

Name:		Age:			Gender:		
Questions	Never	A few times per year	Once a month	A few times per month	Once a week	A few times per week	Everyday
Section A	0	1	2	3	4	5	6
How many times you feel to quit your job?							
It feels exhausted because of heavy workload demands							
Total score-section A							

Table.2:

Questions	Never	A few times per year	Once a month	A few times per month	Once a week	A few times per week	Everyday
Section B	0	1	2	3	4	5	6
I easily get fatigued after 3-5 patients							
It feels like this job is making me mentally ill							
Total score section-B							

Table.3:

Questions	Never	A few times per year	Once a month	A few times per month	Once a week	A few times per week	Everyday
Section C	0	1	2	3	4	5	6
I cannot easily create a relaxed atmosphere.							
I do not feel very energetic at my work.							
Total score-section C							

The result will be calculated by this interpretation:

Section A: burnout

- Total 17 or less: low-level burnout
- Total between 18 and 29: moderate burnout
- Total over 30: high-level burnout

Section B: depersonalization

- Total 5 or less: low-level burnout
- Total between 6 and 11: moderate burnout
- Total over 12 or greater: high-level burnout

Section C: personal achievement:

- Total 33 or less: high-level burnout
- Total between 34 and 39: moderate burnout
- Total greater than 40: low-level burnout

(A high score in first two sections and a low score in last section will indicate the presence of burnout).

EBP – Questionnaire

Table.4: EBP – Questionnaire

Items	Strongly Agree (5)	Agree (4)	Neutral (3)	Disagree (2)	Strongly Disagree (1)
Practice of EBP:					
1: How often you've evaluated outcomes of your practice 2: My practice has changed because of evidence I've found					
Attitudes towards EBP:					
3: EBP is waste of time? 4: I resent having my clinical practice questioned					
knowledge of EBP:					
5: Ability to apply information in individual cases? 6: Ability to review your own practice?					

