



An Intervention Study on Burnout Syndrome Prevalence and Predictors Among Emergency Department Physicians in Gauteng Province, South Africa

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Abstract

Burnout syndrome is a significant occupational health concern for healthcare professionals, particularly in high-stress environments such as emergency departments. Within the strained public healthcare system of South Africa, data on physician burnout in emergency care settings have been limited. This study aimed to determine the prevalence of burnout syndrome and identify its key predictors among physicians working in public hospital emergency departments in Gauteng Province. A secondary objective was to pilot a targeted, multi-component well-being intervention and assess its feasibility and preliminary impact. A pre-post intervention study was conducted. Eligible emergency department physicians from selected public hospitals in Gauteng were invited to participate. Burnout was measured using the Maslach Burnout Inventory. Predictors were assessed via a structured questionnaire covering demographic, occupational, and psychosocial factors. Participants then received a structured intervention comprising stress management workshops, peer support groups, and access to individual counselling. Post-intervention burnout levels were measured after a follow-up period. At baseline, a high prevalence of burnout was observed, with 68% of participants reporting high emotional exhaustion. Key predictors identified included high patient load, lack of supervisory support, and limited rest periods. Post-intervention, there was a statistically significant reduction in emotional exhaustion and depersonalisation scores among participants who completed the programme. Burnout was highly prevalent among emergency physicians in this setting, driven by systemic and interpersonal factors. The piloted intervention demonstrated feasibility and a positive preliminary effect on core burnout dimensions. Health system managers should implement routine burnout surveillance and

integrate structured well-being programmes into emergency department staffing policies. Further research should evaluate the long-term efficacy and cost-effectiveness of such interventions in similar resource-constrained settings. Burnout, professional; Emergency service, hospital; Physicians; Occupational stress; Intervention studies; South Africa This study provides empirical evidence on the prevalence and predictors of burnout among emergency department physicians in a South African public health context. It contributes preliminary evidence for a feasible, multi-component intervention model aimed at mitigating burnout in this critical workforce.

Keywords: *Burnout Syndrome, Emergency Medicine, Occupational Stress, Gauteng Province, Prevalence Study, Healthcare Professionals, South Africa*

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