



Adolescent Psychiatry Trainees during the COVID-19 Pandemic

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ABOUT THE STUDY

The COVID-19 pandemic challenged our healthcare system and the doctors within it. Social distance has disrupted the typical onboarding and community building activities of new and ongoing trainees. At the same time, remote patient care and didactics has limited formal and informal opportunities for peer interaction and mentoring support. Front-line healthcare professionals have reported symptoms of depression, anxiety, and burnout in the context of COVID-19, and trainees may be particularly affected [1,2].

Physicians and Physicians-in-training have a higher rate of burnout compared to the average workforce, even before the COVID-19 pandemic, and psychiatrists and psychiatrists face unique risk factors for burnout in their profession. [3,4]. Physician burnout is a work-related syndrome associated with emotional fatigue, depersonalization, and personal disability [5]. This affects about 50% of physician in training and practitioners in all disciplines, with inadequate patient care such as substance abuse, clinical depression, suicidal tendencies, professional inefficiencies, and physician inefficiencies [6]. The biggest meta-analysis to date has been a significant reduction in burnout in both individuals (eg mindfulness training, approaches to stress reduction) and structural or systematic interventions (eg changing service time requirements).

The Balint Group originated in primary care and is widely used around the world to provide clinicians with a forum to meet with peers and reflect on the emotions caused by the rewarding interactions of physicians and patients [7]. They target a variety of outcomes, including psychological consciousness, burnout and well-being, attitudes and knowledge. Participating in a Balint group has been demonstrated to reduce resident burnout and may help trainees become more patient-centered by increasing communication and empathy skills [8,9]. Practicing physicians reported that participation in Balint-like groups has provided the format that reduces isolation and reduces emotional interactions and increasing the social support of a doctor who handles palliative care patients.

Virtual facilitation and participation in Balint groups is a relatively new phenomenon, and we are aware of only one research of outcomes, which showed a significant reduction in COVID-19-related anxiety in a small group of Iranian health care workers. There is currently no literature describing the feasibility, usability, or impact of virtual Balint groups for trainees on results. We expected that virtual delivery of a novel well-being curriculum combining emotional awareness skills with Balint approach themes would improve well-being and professional fulfillment provide a sense of professional support, and decrease burnout risk in Child and Adolescent Psychiatry (CAP) trainees.

Medical education has chosen to expand social media and video conferencing technology in the phase of COVID-19 limitations. Organizations are also leading program directors in these unprecedented times, as evidenced by COVID-19's online content. Training programs can use these techniques in innovative ways to mitigate the isolation effect of COVID-19 on trainees. Focusing on combining emotional cognitive skills with the theme of the Ballint approach, this new well-being curriculum enhances well-being and professional fulfillment, provides professional support, and provides CAP trainees and reduces the risk of burnout.

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