BEYOND RESILIENCE AND BURNOUT: THE NEED FOR ORGANIZATIONAL CHANGE TO PROMOTE HUMANISTIC PRACTICE AND TEACHING IN HEALTHCARE

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Rapid changes in healthcare organization and practice environments, increasingly driven by business models and commercial interests, are associated with widespread burnout and dissatisfaction among healthcare professionals and pose barriers to humanistic relationship-centered quality care. Studies show burnout and significant stress currently affect over half of US physicians and nurses. Clinicians' ability to provide compassionate care is significantly challenged. Most solutions to date have included individual interventions designed to enhance well-being and promote resilience.

We examined organizational factors that inhibit or promote humanistic practice by faculty physicians in today's healthcare environment. In this qualitative study, physician faculty who completed a one-year faculty development program in humanism at eight US academic medical centers provided written answers to two open-ended questions: a) What institutional or specific organizational unit-related factors promote humanism for you and others? b) What institutional or specific organizational unit-related factors inhibit or pose barriers, to humanism for you and others? 74% (68/92) of the physicians participated. The constant comparative method was used to analyze responses.

We found that organizational culture was the central theme. Motivators of humanism included leadership supportive of humanistic practice, responsibility to role model humanism, organized activities promoting humanism, and practice structures that facilitate humanism. Factors that inhibited humanism included "top down" organizational culture, non-supportive leadership, time and bureaucratic pressures, and non-facilitative practice structures.

Our findings suggest that organizational culture is, at a minimum, equally important as individual interventions. We describe features of organizational culture that reinforce humanistic practice and care in healthcare institutions and offer recommendations for organizational change that support the primacy of humanistic, compassionate, high quality patient care. ∎