Prevalence of burnout among African healthcare workers

To the Editor: In regard to fire, burnout means the total combustion and the ash reduction of an object, which is completely consumed, with the disappearance of any material.⁽¹⁾ In psychology, it refers to a permanent state of stress, a source of total exhaustion. The concept of burnout was first described in the mid-1970s by the psychotherapist Freudenberger^[2,3] to designate a syndrome of exhaustion of psychic and physical resources, particularly affecting the health professions (e.g. doctors, nurses), and helping (social workers) and education professions (teachers). Maslach and Jackson^[4] in 1981 defined burnout as a three-dimensional syndrome, incorporating professional exhaustion, depersonalisation and a decline in professional achievement, in individuals who work with others, particularly in a care relationship. Several measurement scales for assessing burnout level have been produced in recent years. The most commonly used is the Maslach Burnout Inventory. Other scales used are the Burnout Measure and, more recently, the Copenhagen Burnout Inventory. The issue of burnout began to be described on our continent during the 2000s, hence the focus of this letter on considering of the situation in relation to African healthcare staff.

The literature search was based on a review of African and international literature in the PubMed, ScienceDirect, Google Scholar and INRS databases, using the following key words: 'burnout', 'professional exhaustion', 'health professionals', 'doctors', 'nurses' and 'Africa'. In total, we selected 28 mainly multidisciplinary

Table 1. Prevalence of burnout among medical staff reported in Africa		
Country, by year	Study population	Prevalence (%)
Tunisia		
2014 ^[5]	Nurses in palliative care	70.0
2017 ^[6]	Young doctors	28.7
2010 ^[7]	Psychiatrist	35.8
Morocco		
2013[8]	Anaesthesia resuscitation staff	69.65
Egypt		
2016[16]	Doctors and nurses	66.0
Malawi		
2011 ^[9]	Maternal health services staff	72.0
South Africa		
2012 ^[10]	ICU nurses	66.0
2016 ^[14]	General practitioners	16.0
Senegal		
2012 ^[15]	Midwives	80.0
2016 ^[13]	Specialist doctors	91.9
Zambia		
2012[11]	HIV care staff	51.0
Cameroon		
2018 ^[12]	Paramedical staff	51.0
2017 ^[17]	General practitioners	42.4
ICU = intensive care unit		

studies, including 13 in Africa,^[5-17] that corresponded to the theme of our work.

Although literature on the topic in Africa is scarce, several studies indicate that health professionals on the continent are affected by burnout (Table 1).^[5-17] In Africa, burnout among healthcare workers has been more commonly described in the Maghreb and South Africa, where levels of socioeconomic development are closer to those of developed countries. We note a similarity between their results and those observed in the West. Indeed, Khamisa in South Africa^[14] and Abdo in Egypt^[16] have reported that the prevalence of burnout among doctors and nurses is similar to that observed in Western contexts. In Tunisia, two nurses out of three are affected by burnout, according to Amamou et al.,^[5] while in Morocco it affects one of every two nurses.^[8] Abdo et al.^[16] in Egypt reported a higher incidence of burnout among nurses than physicians. In Cameroon, a study found a 42.4% prevalence of burnout among general practitioners in the city of Douala.^[17] In Senegal^[13,15] and Malawi,^[9] the authors reported high prevalence rates exceeding 70%.

Burnout syndrome is a real cause for concern in African hospitals. The burden of providing quality care services with limited means to a large number of patients can lead to high rates of burnout. This alarming finding should lead us to launch an initiative to improve practices, including the implementation of prevention strategies, while stressing the importance of improving working conditions and valuing African healthcare workers.

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