

2022 SURVEY OF AMERICA'S PHYSICIANS

Part Two of Three: Understanding the State of Physicians' Wellbeing and Assessing Solutions to Address It

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PART TWO OF THREE:

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INTRODUCTION: PHYSICIANS NEED— AND DESERVE—BETTER

More than two years after the start of the COVID-19 pandemic, physicians are continuing to face obstacles when it comes to their wellbeing. They have dealt with being on the frontlines of every wave of the pandemic, distributing vaccines and establishing a new normal in their practice environments amidst colleagues' early retirement, health care worker shortages and growing inequity experienced by patients. Understandably, this has taken a toll on their mental health.

Physician burnout has not gone unnoticed by the profession or by society, and yet, there is still stigma surrounding mental health care, underlying system barriers and a lack of solutions in action to address them. Burnout, when left untreated, can lead to a mental health emergency. A sense of urgency on all levels to address it cannot be lost just because the pandemic is no longer in its first year. Action is required on the system level so that each physician feels supported on an individual level.

The Physicians Foundation has taken the pulse of physician wellbeing – first in the months after the pandemic began, a year into the pandemic and now after more than two years. Physicians are tired of hearing about how burnt out they are with little to no changes to address it. Therefore, to move this talk into action, The Physicians Foundation decided to conduct the second part of its *2022 Survey of America's Physicians* on the state of wellbeing and the solutions needed to improve it.

It is only when we break stigma down and when health leaders take systemwide action that we will see a lasting change. Physician wellbeing not only benefits physicians, it improves the health of our entire country. By prioritizing physician wellbeing, patient outcomes will improve, because to care for others, physicians must first be cared for themselves.

This survey was conducted exclusively online among United States physicians and was designed to last no more than 10 minutes.

We believe the survey will be of interest to health care professionals, policy makers, academics, media members and anyone concerned by the wellbeing of today's physicians and want to better understand the solutions physicians want and deserve. We encourage all of those who have a stake in our health care system and its workforce to reference this survey and comment on its findings.

Gary Price, M.D. *President* **Robert Seligson** *Chief Executive Officer*

KEY FINDINGS:

Part Two of The Physicians Foundation's *2022 Survey of America's Physicians* focuses on the state of physician wellbeing and the solutions needed to improve it. The survey was conducted from June 24 through July 3, 2022, and the data presented is based on 1,509 responses. Complete methodology is available on page 22.

Key findings of the survey include the following:

More than two years into pandemic, the state of physician wellbeing remains low.

- Six in 10 physicians have felt inappropriate feelings of anger, tearfulness or anxiety.
- One-third have felt hopeless or that they have no purpose.
- Half report withdrawing from family/ friends/co-workers.

Their overall wellbeing has affected them and their colleagues while on the job.

- For the second year in a row, six in 10 physicians often have feelings of burnout, compared to four in 10 before the pandemic in 2018.
- More than one-third have checked in with a colleague who they suspected was experiencing mental health distress.

Physicians continue to face mounting challenges that exacerbate their burnout, including stigma and structural barriers.

• Eight in 10 physicians agree that there is stigma surrounding mental health and seeking mental health care among physicians.



- Nearly four in 10 physicians were either afraid or knew another physician fearful of seeking mental health care given questions asked in medical licensure/credentialling/insurance applications.
- About one-third of physicians agree that their workplace culture prioritizes physician wellbeing.

Physicians feel disconnected from the resources and people they should be able to rely on.

- More than one in three physicians disagree that suicide prevention resources for physicians exist and are easy to access.
- Significantly fewer physicians rate their colleagues, medical practices and hospital/health system as helpful to their mental health and wellbeing than they did a year ago.
 - 62% found their colleagues to be helpful, compared to 71% in 2021.
 - 40% found their medical practice/group to be helpful, compared to 53% in 2021.
 - 22% found their hospital/health system to be helpful, compared to 35% in 2021.
- Half of physicians or more shared that their workplace rarely or never takes action on eight of the 12 evidence-based wellbeing actions* identified to support physicians.

These barriers and lack of support can and have led to tragic outcomes.

- More than half of physicians know of a physician who has ever considered, attempted or died by suicide, remaining the same from 2021.
- One-fifth know someone that has either considered, attempted or died by suicide specifically in the past 12 months.

The steps to improve wellbeing are not a secret; physicians have identified who and what supports their mental health and wellbeing most.

- More than eight in 10 physicians shared their family and friends as most helpful to their mental health and wellbeing.
- Confidential therapy, counseling or support phone lines were rated as the most helpful resource/strategy among physicians who had experience with it, followed by peer-to-peer support groups.
 - 65% found confidential therapy, counseling or support phone lines to be helpful.
 - 57% found peer-to-peer support groups to be helpful.
- Of the 12 proposed actions* to support physicians, 11 were identified as helpful by the majority of physicians, with removing low-value work as the top action.
 - 89% found removing low-value work, including reducing EHR clicks and minimizing inbox notifications, helpful.
 - 87% found giving physicians more flexibility and autonomy to adjust quality and patient experience goals helpful.
 - 85% found eliminating insurance approvals such as pre-authorization helpful.



Physicians are beginning to engage with national solutions that address stigma and systemic barriers, but there is more opportunity for physician leadership.

- In the past two years, already nearly a quarter of physicians have become familiar with the story of Dr. Lorna Breen.**
- Already since its passage into law in March 2022, one in 10 are aware of the Dr. Lorna Breen Health Care Provider Protection Act.***

* Full list of actions included on page 14.

** Dr. Lorna Breen was an emergency room physician who faced an extreme toll on her mental health while working in New York City during the first wave of the pandemic. Fearing that she would lose her job if she sought mental health support, and with no prior mental health issues, Lorna died by suicide on April 26, 2020.

*** The Dr. Lorna Breen Health Care Provider Protection Act is the first-of-its-kind legislation that aims to reduce and prevent suicide, burnout and mental and behavioral health conditions among health care professionals.

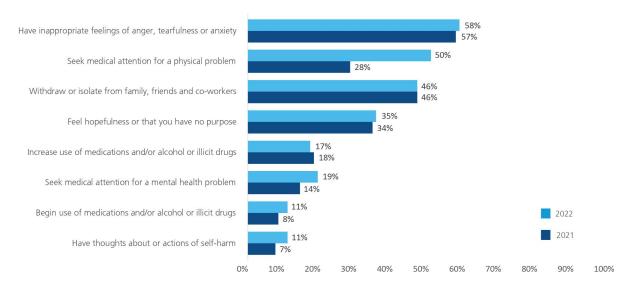
QUESTIONS ASKED AND RESPONSES RECEIVED

Part Two of The Physicians Foundation's 2022 Survey of America's Physicians focuses on the state of physician wellbeing and the solutions needed to improve it.

Detailed questions asked and responses received include the following:

Q1: In the past year, how often have you done any of the following?

Percent of Physicians Who Ever Have Done the Following Activities in the Past Year (2022) vs. Percent of Physicians for Whom the Pandemic Caused Them to Ever Do the Following Activities (2021)*



* These comparisons are not directly comparable/able to be trended, because the 2021 survey questions were asked in a framework of "since/during COVID" while the 2022 survey questions were framed as "in the past year."

Nearly six in 10 physicians surveyed (58%) had inappropriate feelings of anger, tearfulness or anxiety in the past year, and nearly half of physicians (46%) withdrew or isolated from family friends and coworkers. More than a third of physicians (35%) felt hopeless or that they have no purpose, and one in 10 physicians had thoughts about or actions of self-harm. Even so, only 19% of physicians sought medical attention for a mental health problem.

The proportion of physicians who had inappropriate feelings of anger, tearfulness or anxiety in the past year; withdrew or isolated from family friends and coworkers; and felt hopeless or that they have no purpose was consistent with the proportion from 2021. Significantly more physicians sought medical attention for a mental health problem in 2022 than in 2021 (19% vs. 14%), began the use of medications and/or alcohol or illicit drugs (11% in 2022 vs. 8% in 2021) and had thoughts about or actions of self-harm (11% in 2022 vs. 7% in 2021).

A significantly higher percentage of employed physicians, physicians \leq 45 years old and female physicians had inappropriate feelings of anger, tearfulness or anxiety in the past year; withdrew or isolated from family friends and coworkers; and felt hopeless or that they have no purpose.

	Employed Physicians	Independent Physicians	Physicians ≤45 Years Old	Physicians 46+ Years Old	Female Physicians	Male Physicians
Inappropriate feelings of anger, tearfulness or anxiety	61%	47%	67%	49%	65%	53%
Withdraw or isolate from family, friends and co-workers	49%	36%	54%	38%	51%	42%
Feel hopeless or that you have no purpose	37%	29%	40%	31%	40%	32%

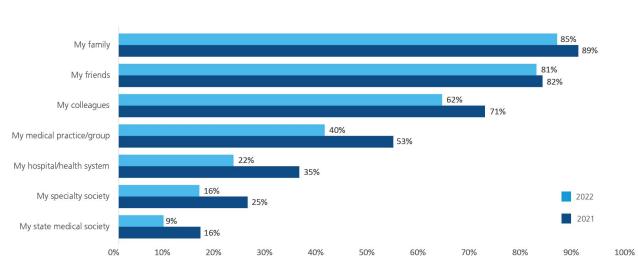
Proportion of Physicians Who Have Ever Experienced the Following in the Last Year by Practice Type, Age and Gender

A higher proportion of Hispanic physicians (56%) than white physicians (45%) and primary care physicians (50%) than specialty physicians (43%) withdrew or isolated from family, friends and coworkers.

Proportion of Physicians Who Withdrew or Isolated from Family, Friends and Coworkers in the Past Year

	2022		2022
Hispanic Physicians	56%	Primary Care Physicians	50%
White Physicians	45%	Specialty Physicians	43%

Q2: Please rate how each of the following have been of help to your mental health and wellbeing during the past year.



Percent of Physicians Who Found a Resource to be Very/Somewhat Helpful in the Past Year (2022) vs. Percent of Physicians Who Found a Resource to be Very/ Somewhat Helpful During the Pandemic (2021)*

* These comparisons are not directly comparable/able to be trended, because the 2021 survey questions were asked in a framework of "since/during COVID" while the 2022 survey questions were framed as "in the past year."

Physicians identify individual-level support from their family (85%), friends (81%) and colleagues (62%) as most helpful to their mental health during the past year. However, compared to the *2021 Survey of America's Physicians*, significantly fewer physicians in 2022 found their family (89% vs. 85%) and colleagues (71% vs. 62%) to be helpful to their mental health. Physicians found structural and system-level support, like their medical practice group, hospital/health system, specialty society and state medical society, to be less helpful than individual-level support. Additionally, compared to the *2021 Survey of America's Physicians*, significantly fewer physicians in 2022 found their medical practice/group (53% vs. 40%), hospital/health system (35% vs. 22%), specialty society (25% vs. 16%) and state medical society (16% vs. 9%) to be helpful to their mental health.

Employed physicians are more likely than independent physicians and Black physicians are more likely than white and Hispanic physicians to rate their family as very/somewhat helpful in the past year.

Proportion of Physicians Who Rated Family as Very/Somewhat Helpful in the Past Year

	2022
Employed Physicians	86%
Independent Physicians	81%
Black Physicians	92%
Hispanic Physicians	87%
White Physicians	85%

NOTE: The proportion of Asian physicians who rated family as very/somewhat helpful was not significantly different from other race/ethnicity categories.



For friends and colleagues, employed physicians are more likely than independent physicians, physicians ≤45 years old are more likely than physicians 46+ years old, female physicians are more likely than male physicians and urban physicians are more likely than suburban physicians to rate them as very/somewhat helpful.

Proportion of Physicians Who Rated a Resource as Very/Somewhat Helpful in the Past Year by Practice Type, Age and Gender

	Employed Physicians	Independent Physicians	Physicians ≤45 Years Old	Physicians 46+ Years Old	Female Physicians	Male Physicians
My friends	84%	73%	86%	77%	84%	79%
My colleagues	66%	50%	70%	55%	66%	60%

A higher proportion of Black physicians than white and Hispanic physicians rated their family (92% vs. 85% and 87%) as very/somewhat helpful in the past year and a higher proportion of Black physicians than white physicians rated their friends (89% vs. 79%) as very/somewhat helpful. A higher proportion of Asian physicians than white physicians rated their friends (84% vs. 79%) and colleagues (66% vs. 60%) as very/ somewhat helpful.

Proportion of Physicians Who Rated a Resource as Very/Somewhat Helpful in the Past Year by Race/Ethnicity

	Asian Physicians	Black Physicians	Hispanic Physicians	White Physicians
My family	_	92%	87%	85%
My friends	84%	89%	_	79%
My colleagues	66%	_	_	60%

An empty cell means there is no significant difference for that demographic.

A higher proportion of physicians \leq 45 years old (43%) than physicians 46+ (37%) and male physicians (42%) than female physicians (37%) found their medical practice/group to be helpful in the past year.

For hospital/health systems and specialty societies, a higher proportion of specialty physicians, employed physicians, physicians \leq 45 years old and urban physicians found them helpful.

Proportion of Physicians Who Rated a Resource as Very/Somewhat Helpful in the Past Year by Specialty and Practice Type

	Specialty Physicians	Primary Care Physicians	Employed Physicians	Independent Physicians
My hospital/ health system	24%	19%	25%	12%
My specialty society	18%	13%	17%	12%

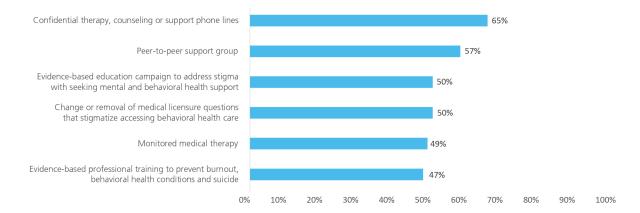
Proportion of Physicians Who Rated a Resource as Very/Somewhat Helpful in the Past Year by Age and Geography

	Physicians ≤45 Years Old	Physicians 46+ Years Old	Urban Physicians	Suburban Physicians
My hospital/ health system	26%	18%	26%	19%
My specialty society	20%	12%	18%	13%

Additionally, a higher proportion of Asian physicians (20%) than white physicians (14%) found their specialty society to be helpful.

Q3: Please rate how helpful each of the following strategies and resources have been to your mental health and wellbeing during the past year.

Percent of Physicians Considering Resources/Strategies Very/Somewhat Helpful Among Physicians with Experience with Resources in the Past Year



Of the physicians for whom the resource applied, nearly half or more found all the resources to be helpful. Sixty-five percent found confidential therapy, counseling or support phone lines helpful and 57% found peer-to-peer support groups helpful.

For the top-rated resource of confidential therapy, counseling or support phone lines, a significantly higher proportion of employed physicians (37%), physicians \leq 45 years old (39%) and female physicians (39%) rated it very/somewhat helpful.

Proportion of Physicians Rating Confidential Therapy, Counseling or Support Phone Lines as Very/Somewhat Helpful in the Past Year

	2022
Employed Physicians	37%
Independent Physicians	18%
Physicians ≤45 Years Old	39%
Physicians 46+ Years Old	26%
Female Physicians	39%
Male Physicians	29%

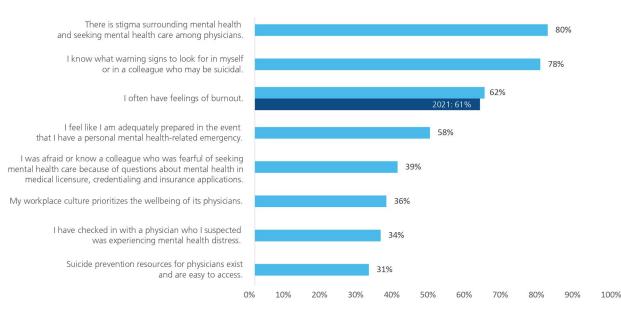
A higher proportion of non-white physicians (30%) than white physicians (20%) rated peer-to-peer support groups as very/somewhat helpful.

Proportion of Physicians Rating Peer-to-Peer Support as Very/Somewhat Helpful in the Past Year

	2022
Non-White Physicians	30%
White Physicians	20%

Q4: To what extent do you agree or disagree with the following statements?





Eighty percent of physicians agree there is stigma surrounding mental health and seeking mental health care among physicians. In fact, nearly four in 10 physicians (39%) were either afraid or knew another physician fearful of seeking mental health care because of questions asked in medical licensure, credentialing and insurance applications.

For the second year in a row, six in 10 physicians (62%) often have feelings of burnout, compared to four in 10 (40%) before the pandemic in 2018, and only about one-third of physicians (36%) agree that their workplace culture prioritizes physician wellbeing.

More than one-third of physicians (34%) have checked in with a colleague they suspected was experiencing mental health distress, but only 31 percent of physicians agree that suicide prevention resources for physicians exist and are easy to access.

Four in 10 physicians (42%) do not agree that they are adequately prepared in the event that they have a personal mental health-related emergency. Significantly more female physicians than male physicians agree that there is stigma surrounding mental health care (83% vs. 77%) and were afraid, or knew a colleague who was afraid to seek mental health care (45% vs. 34%).



A higher proportion of physicians who are employed, ≤45 years old and female often had feelings of burnout, compared to independent, 46+ years old and male physicians.

Proportion of Physicians Who Often Have Feelings of Burnout

	2022
Employed Physicians	64%
Independent Physicians	56%
Physicians ≤45 Years Old	66%
Physicians 46+ Years Old	59%
Female Physicians	68%
Male Physicians	58%

Similarly, significantly more physicians who are employed, ≤45 years old, female and urban have checked in with a physician they suspected was experiencing mental health distress, compared to independent, 46+ years old, male and suburban physicians.

Proportion of Physicians Who Have Checked In With a Physician in the Past Year

	2022
Employed Physicians	36%
Independent Physicians	26%
Physicians ≤45 Years Old	39%
Physicians 46+ Years Old	29%
Female Physicians	41%
Male Physicians	28%
Urban Physicians	37%
Suburban Physicians	30%

More male physicians than female physicians agree that their workplace culture prioritizes physician wellbeing (39% vs. 31%) and that suicide prevention resources for physicians exist and are easy to access (34% vs. 27%).

Proportion of Physicians Who Agree With the Following Statements by Gender

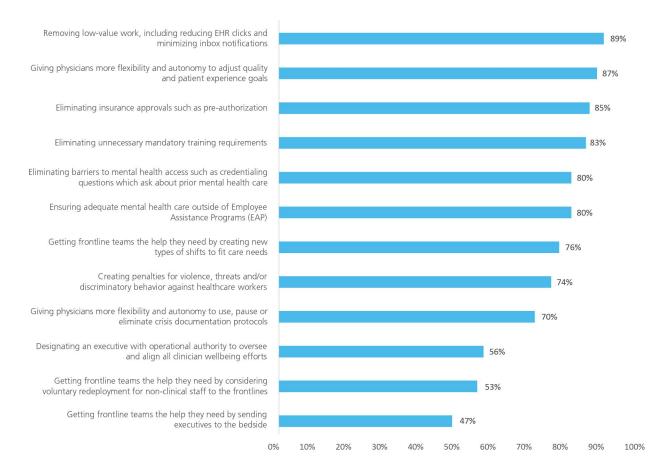
	Male Physicians	Female Physicians
My workplace culture prioritizes the wellbeing of its physicians.	39%	31%
Suicide prevention resources for physicians exist and are easy to access.	34%	27%

A higher proportion of Hispanic physicians (71%) than white physicians (60%) and Asian physicians (51%) feel adequately prepared in the event that they have a personal mental health-related emergency. More primary care physicians (63%) feel prepared than specialty physicians (55%) and more physicians 46+ years old (62%) do than physicians ≤45 years old (55%).

Proportion of Physicians Who Feel Adequately Prepared for a Personal Mental Health-Related Emergency

	2022
Hispanic Physicians	71%
White Physicians	60%
Asian Physicians	51%
Primary Care Physicians	63%
Specialty Physicians	55%
Physicians ≤45 Years Old	55%
Physicians 46+ Years Old	62%

Q5: Please rate how helpful, if at all, each of the following actions would be in supporting physicians in the workplace.



Percent of Physicians Considering Actions Very/Somewhat Helpful

Nearly all proposed actions to support physicians are viewed as helpful by most of the respondents, with removing low value work (89%), giving physicians more flexibility to adjust quality and patient experience goals (87%), eliminating insurance approvals (85%) and eliminating unnecessary mandatory training (83%) at the top of the list.

For the top action of removing low value work, a higher proportion of white physicians (90%) than non-white physicians (87%) found it helpful. For the second most helpful action of giving physicians more

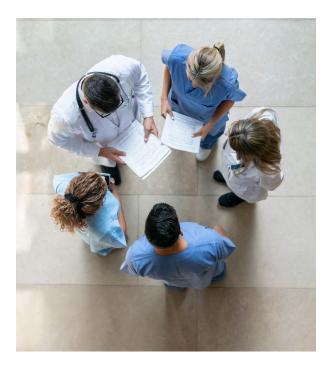


flexibility to adjust quality and patient experience goals, rural physicians (92%) found it more helpful than urban physicians (86%) and suburban physicians (86%).

A higher proportion of female physicians than male physicians found giving physicians more flexibility to adjust quality and patient experience goals, eliminating insurance approvals and eliminating unnecessary mandatory training to be helpful.

Proportion of Physicians Rating Actions Very/ Somewhat Helpful by Gender

	Female Physicians	Male Physicians
Giving physicians more flexibility to adjust quality and patient experience goals	91%	84%
Eliminating insurance approvals and eliminating unnecessary mandatory training	88%	83%

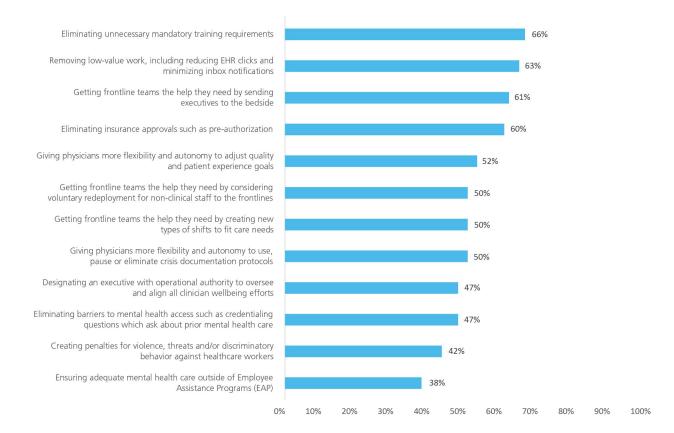


Across six of the 12 actions, non-white physicians found them to be more helpful than white physicians.

Proportion of Physicians Rating Actions Very/Somewhat Helpful by Race/Ethnicity

	Non-White Physicians	White Physicians
Getting frontline teams the help they need by creating new types of shifts to fit care needs	79%	74%
Creating penalties for violence, threats and/or discriminatory behavior against health care workers	78%	72%
Giving physicians more flexibility and autonomy to use, pause or eliminate crisis documentation protocols	74%	68%
Designating an executive with operational authority to oversee and align all clinician wellbeing efforts	60%	54%
Getting frontline teams the help they need by considering voluntary redeployment for non-clinical staff to the frontlines	57%	51%
Getting frontline teams the help they need by sending executives to the bedside	52%	44%

Q6: To what extent is your practice/employer/health system taking the following actions to support physicians in the workplace?



Percent of Physicians' Practice/Health System Rarely/Never Taking Action

Although physicians identify the proposed actions to support physicians in the workplace as helpful (Q5), a minimal proportion report their practice/employer/ health system making the respective actions standard practice. More than half of physicians indicated that their practice/employer/health system rarely or never eliminates unnecessary mandatory training requirements (66%); removes low-value work, including reducing EHR clicks and minimizing inbox notifications (63%); gets frontline teams the help they need by sending executives to the bedside (61%); eliminates insurance approvals such as pre-authorization (60%); or gives physicians more flexibility and autonomy to adjust quality and patient experience goals (52%). Two of the 12 actions show some effort by practices/employers/health systems, with nearly a quarter of physicians indicating that their practices/ employers/health systems often or always create penalties for violence, threats and/or discriminatory behavior against health care workers (22%) and ensure adequate mental health care outside of Employee Assistance Programs (EAP) (22%).

A higher proportion of female physicians than male physicians indicated that their practice/employer/ health system rarely or never takes action for 11 of the 12 actions.

Proportion of Physicians Whose Practice/Health System Rarely/Never Takes Action by Gender

	Female Physicians	Male Physicians
Eliminating unnecessary mandatory training requirements	73%	51%
Removing low-value work, including reducing EHR clicks and minimizing inbox notifications	69%	58%
Getting frontline teams the help they need by sending executives to the bedside	66%	57%
Eliminating insurance approvals such as pre-authorization	65%	57%
Giving physicians more flexibility and autonomy to adjust quality and patient experience goals	58%	47%
Getting frontline teams the help they need by considering voluntary redeployment for non-clinical staff to the frontlines	53%	48%
Getting frontline teams the help they need by creating new types of shifts to fit care needs	81%	72%
Giving physicians more flexibility and autonomy to use, pause or eliminate crisis documentation protocols	55%	46%
Designating an executive with operational authority to oversee and align all clinician wellbeing efforts	51%	43%
Creating penalties for violence, threats and/or discriminatory behavior against health care workers	79%	71%
Ensuring adequate mental health care outside of Employee Assistance Programs (EAP)	82%	77%

For the four most helpful actions identified by physicians, a larger proportion of employed physicians than independent physicians indicated that their practice/employer/health system rarely or never takes action.

Proportion of Physicians Whose Practice/Health System Rarely/Never Takes Action by Practice Type

	Employed Physicians	Independent Physicians
Removing low-value work, including reducing EHR clicks and minimizing inbox notifications	66%	53%
Giving physicians more flexibility and autonomy to adjust quality and patient experience goals	55%	40%
Eliminating insurance approvals such as pre-authorization	62%	54%
Eliminating unnecessary mandatory training requirements	70%	53%

Q7: Do you know a physician who has EVER versus IN THE PAST 12 MONTHS considered, attempted or died by suicide?

		2021		2022
Considered suicide	Ever	31%	Ever	31%
Considered suicide	Since COVID	14%	Past year	16%
Attomated quicide	Ever	19%	Ever	14%
Attempted suicide	Since COVID	4%	Past year	4%
Died hu suiside	Ever	38%	Ever	33%
Died by suicide	Since COVID	7%	Past year	5%
Nama af tha abava	Ever	45%	Ever	47%
None of the above Since COVID	Since COVID	80%	Past year	80%

Percent of Physicians Who Personally Know a Physician Impacted by Suicide

More than half (53%) of physicians know of a physician who has either considered, attempted or died by suicide ever, and one-fifth (20%) know someone that has either considered, attempted or died by suicide in the past 12 months. Both numbers are consistent with findings from the 2021 survey, where 55% knew someone who has ever considered, attempted or died by suicide, and where 20% knew someone who has considered, attempted or died by suicide since the start of the pandemic.

Of the physicians who know a physician who has ever considered suicide, a larger proportion of them are employed than independent, \leq 45 years old than 46+ years old, female than male, white than Asian and rural than suburban.

Proportion of Physicians Who Personally Know a Physician Who Has Ever Considered Suicide

	2022
Employed Physicians	33%
Independent Physicians	22%
Physicians ≤45 Years Old	39%
Physicians 46+ Years Old	23%
Female Physicians	36%
Male Physicians	27%
White Physicians	21%
Asian Physicians	16%
Rural Physicians	38%
Suburban Physicians	28%

Of the physicians who know a physician who has ever attempted suicide, a larger proportion of them are physicians \leq 45 years old than physicians 46+ and are white physicians than Black physicians.

Proportion of Physicians Who Personally Know a Physician Who has Ever Attempted Suicide

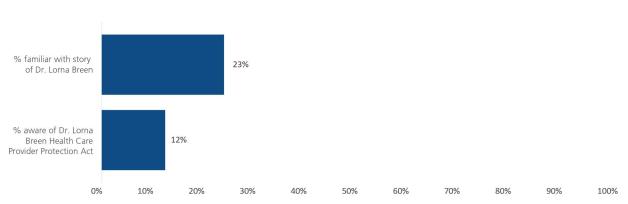
	2022
Physicians ≤45 Years Old	16%
Physicians 46+ Years Old	12%
White Physicians	15%
Black Physicians	5%

NOTE: The proportion of Asian physicians and Hispanic physicians was not significantly different from other race/ethnicity categories. Of the physicians who know a physician who has ever died by suicide, a larger proportion of them are physicians 46+ than physicians \leq 45 years old and are white physicians than non-white physicians.

Proportion of Physicians Who Personally Know a Physician Who has Ever Died by Suicide

	2022
Physicians ≤45 Years Old	27%
Physicians 46+ Years Old	38%
White Physicians	35%
Non-White Physicians	29%

Q8: Prior to taking this survey, were you familiar with the story of Dr. Lorna Breen? Are you aware of the Dr. Lorna Breen Health Care Provider Protection Act?



Percentage of Physicians Familiar with Dr. Lorna Breen's Story and Aware of the Dr. Lorna Breen Health Care Provider Protection Act

Already nearly a quarter of physicians (23%) have become familiar of the story of Dr. Lorna Breen. In the short time since its passage into law in March 2022, one in 10 physicians (12%) are aware of the Dr. Lorna Breen Health Care Provider Protection Act.



Dr. Lorna Breen was an emergency room physician who faced an extreme toll on her mental health while working in New York City during the first wave of the pandemic. Fearing that she would lose her job if she sought mental health support, and with no prior mental health issues, Lorna died by suicide on April 26, 2020. The Dr. Lorna Breen Heroes' Foundation was created in her honor, and it was through their efforts that the Dr. Lorna Breen Health Care Provider Protection Act was signed into law. This first-of-its-kind legislation aims to reduce and prevent suicide, burnout and mental and behavioral health conditions among health care professionals. A higher proportion of employed physicians (24%) than independent physicians (19%), female physicians (30%) than male physicians (17%) and urban physicians (26%) than suburban physicians (20%) and rural physicians (16%) are familiar with Dr. Lorna Breen's story.

Proportion of Physicians Familiar with Dr. Lorna Breen's Story

	2022
Employed Physicians	24%
Independent Physicians	19%
Female Physicians	30%
Male Physicians	17%
Urban Physicians	26%
Suburban Physicians	20%
Rural Physicians	16%

A larger proportion of urban physicians (16%) than suburban physicians (10%) are aware of the Dr. Lorna Breen Health Care Provider Protection Act.



CONCLUSION

The Physicians Foundation's 2022 Survey of America's Physicians indicates that physicians need and deserve—better when it comes to their mental health and wellbeing. More than two years into pandemic, the state of physician wellbeing remains low, with six in 10 physicians feeling inappropriate feelings of anger, tearfulness or anxiety, one-third feeling hopeless or that they have no purpose and nearly half reporting withdrawing from family, friends and co-workers.

This poor state of their overall wellbeing has affected physicians in the workplace, and after two years of the pandemic, there has been little to no improvement. Six in 10 physicians often have feelings of burnout, a similar proportion as in 2021 and well above the pre-pandemic percentage of 40% in 2018. The effect is workplace-wide, too, with more than one-third checking in with a colleague who they suspected was experiencing mental health distress.

Physicians continue to face mounting challenges that exacerbate their burnout, including stigma. The vast majority (80 percent) of physicians agree that there is stigma surrounding mental health and seeking mental health care among physicians. The current system is not providing the support physicians need: only about one-third of physicians agree that their workplace culture prioritizes physician wellbeing. In some cases, the health care system is even exacerbating physician distress by imposing barriers to accessing mental health care. Nearly four in 10 physicians were either afraid or knew another physician fearful of seeking mental health care given questions asked in medical licensure, credentialing and insurance applications, and half of physicians or more shared that their workplace rarely or never takes action on eight of the 12 wellbeing solutions identified to support physicians.

On top of these issues, physicians feel disconnected from the people they should be able to rely on. In fact, significantly fewer physicians rate structural/ system-level resources, including medical practices, hospital/health system, specialty society and state medical society, as helpful to their mental health and wellbeing than they did a year ago. This could indicate that systems may no longer feel the sense of urgency they did a year ago to support physicians in this way, despite other findings from the survey indicating that physicians want and need this support. Physicians also do not know where to go for help: more than one in three physicians do not believe that suicide prevention resources for physicians exist and are easy to access.

These barriers and lack of support can and have led to tragic outcomes. For the second year in a row, more than half of physicians know of a physician who has ever considered, attempted or died by suicide, and one-fifth know someone that has either considered, attempted or died by suicide in the past 12 months. The steps to improve wellbeing are not a secret; physicians have identified who and what supports their mental health and wellbeing most: their family, friends, confidential therapy/counseling and peer-topeer support groups. Additionally, of 12 proposed wellbeing solutions to support physicians, 11 were identified as helpful by the majority of physicians, with removing low-value work as the top action.

Action is required to address physician wellbeing on a national level. Fortunately, organizations like the Dr. Lorna Breen Heroes' Foundation and ALL IN: WellBeing First for Healthcare, as well as the U.S. Surgeon General, have already made substantial progress just in the last few months. The Dr. Lorna Breen Health Care Provider Protection Act, signed into law in March 2022, will support our medical community in preventing burnout, relieving workplace stressors, administering stress first aid and increasing access to mental health care services. ALL IN: WellBeing First for Healthcare has identified the top five actions leaders should take now to support team members and provided grants to support organizations in doing so. Finally, the Surgeon General's Advisory, Addressing Health Worker Burnout, lays out recommendations for addressing health worker burnout and ensuring health worker wellbeing. We must make a concerted effort to bring these solutions to every health system, hospital and practice so physicians' struggles do not become mental health emergencies.

METHODOLOGY

The 2022 survey was sent by email to physicians derived from Medscape's proprietary database. Medscape leveraged their proprietary distribution of percentage of primary care physicians vs. specialist physicians to set quotas for this study. The survey was fielded from June 24 through July 3, 2022, and the data presented is based on 1,509 responses. Where possible, comparisons were provided for similar questions that were asked in the *2021 Survey of America's Physicians*. For detailed demographic breakdown of respondents, see page 24. For the purposes of this survey report, responses addressing gender demographics are identified using the binary terms male and female.

Responses by Physician Type

Practice	2022
Primary Care	43%
Specialty	57%

Forty-three percent of physicians who responded to the survey practice primary care, defined in this survey as family medicine, general practice, internal medicine and pediatrics, while the remaining 57% identified as a practicing physician in one of the following specialties: addiction medicine, allergy/immunology, cardiology, dermatology, endocrinology/diabetes, gastroenterology, gynecology oncology, HIV/AIDS specialist, infectious disease, interventional cardiology, intensive care/ critical care, medical oncology, nephrology, neurology, OB/GYN, oncology/hematology, orthopedics/orthopedic surgery, otolaryngology/ ENT, pain management/paid medicine, pathology, pediatrics sub-specialty, radiation oncology, rheumatology, surgeon or urology.

Responses by Gender

Gender	2022
Female	42%
Male	58%
Other/Prefer not to answer	<1%

Fifty-eight percent of physicians who responded to the survey are male, 42% are female and less than 1% indicated they are other or preferred to not designate a gender.

Responses by Race/Ethnicity

Race/ethnicity	2022
Asian	24%
Black	5%
Hispanic	6%
White	62%
Other/Prefer not to answer	3%

Sixty-two percent of physicians who responded to the survey are white, 24% are Asian, 6% are Hispanic and 5% are Black. Three percent of respondents indicated they are other or chose not to disclose their race/ethnicity. The representation in the survey is relative with active physicians' demographic breakdown; according to American Association of Medical Colleges, 56% of physicians are white, 14% are Asian, 5.8% are Hispanic and 5% are Black.

Responses by Geography

Geography	2022
Rural	9%
Suburban	46%
Urban	45%

Forty-six percent of physicians who responded to the survey practice in a suburban area, 45% practice in an urban area and 9% practice in a rural area.

Responses by Practice Status

Practice status	2022
Independent	23%
Employed by hospital	51%
Employed by physician-owned medical group	20%
Other	6%

Fifty-one percent of physicians who responded to the survey are employed by a hospital or hospitalowned medical group, 23% are independently employed (practice owner or partner) and 20% are employed by a physician-owned medical group.

Responses by Age

Age	2022
18-35 years old	19%
36-45 years old	30%
46-55 years old	20%
56-64 years old	17%
65+ years old	14%

The ages of survey respondents generally correspond to the ages of all physicians.

DEMOGRAPHIC BREAKDOWN

	Total	PCPs (A)	Specialist (B)	Independent (C)	Employed (D)	≤45 Yrs. Old (E)	46+ Yrs. Old (F)	Male (G)	Female (H)		
Base	(n=1509)	(n=655)	(n=854)	(n=346)	(n=1163)	(n=737)	(n=772)	(n=871)	(n=634)		
Specialty											
PCPs	43%	100%	_	38%	45% ^c	42%	45%	38%	51% ^G		
Specialists	57%	_	100%	62% ^D	55%	59%	55%	63% ^н	49%		
Practice Type											
Independent	23%	20%	25% ^A	100%	-	11%	34% ^E	26% ^н	18%		
Employed	77%	80% ^B	75%	-	100%	89% ^F	66%	74%	82% ^G		
Age											
≤45 Yrs. Old	49%	47%	50%	24%	56% ^c	100%	-	43%	57% ^G		
46+ Yrs. Old	51%	53%	50%	76% ^D	44%	_	100%	57% ^н	43%		
Gender											
Male	58%	50%	64% ^A	66% ^D	55%	51%	64% ^E	100%	-		
Female	42%	50% ^B	36%	34%	44% ^c	49% ^F	35%	-	100%		
Race/Ethnicity											
White	62%	61%	64%	70% ^D	60%	53%	71% ^E	64%	60%		
Non-white	38%	39%	36%	30%	40% ^c	47% ^F	29%	36%	40%		
Geography											
Urban	45%	37%	51% ^A	33%	49% ^c	53% ^F	38%	45%	45%		
Suburban	46%	52% ^B	41%	57% ^D	43%	40%	52% ^E	46%	46%		
Rural	9%	11% ^B	7%	10%	9%	7%	10% ^E	9%	9%		

	Total	White (A)	Black (B)	Asian (C)	Hispanic (D)	Other (E)	White (F)	Non- White (G)	Urban (H)	Suurban (I)	Rural (J)
Base	(n=1509)	(n=940)	(n=76)	(n=363)	(n=84)	(n=46)	(n=940)	(n=569)	(n=679)	(n=694)	(n=136)
Specialty											
PCPs	43%	42%	57% ^{ad}	46% ^D	32%	48%	42%	45%	36%	49% ^н	54% ^н
Specialists	57%	58% ^B	43%	54%	68% ^{BC}	52%	58%	55%	64% [∪]	51%	46%
Practice Type											
Independent	23%	26% ^c	26%	16%	20%	17%	26% ^G	18%	17%	28% ^H	26% ^н
Employed	77%	74%	74%	84% ^A	80%	83%	74%	82% ^F	83% ^U	72%	74%
Age											
≤45 Yrs. Old	49%	41%	62% ^{AD}	65% ^{AD}	48%	57% ^{AD}	41%	61% ^F	57%	42%	40%
46+ Yrs. Old	51%	59% ^{BC}	38%	35%	52%	43%	59% ^G	39%	43%	58% ^H	60% ^н
Gender											
Male	58%	60% ^B	39%	57% ^B	56% ^B	54%	60% ^G	54%	58%	58%	57%
Female	42%	40%	61% ^{ACDE}	42%	44%	41%	40%	45%	42%	42%	42%
Race/Ethnicity											
White	62%	100%	_	_	_	—	100%	_	59%	63%	71% ^н
Non-white	38%	_	100%	100%	100%	100%	_	100%	41% ^J	37%	29%
Geography											
Urban	45%	43%	55% ^A	47%	48%	50%	43%	48% ^F	100%	_	_
Suburban	46%	47%	36%	47%	48%	35%	47%	45%	_	100%	_
Rural	9%	10% ^{CD}	9%	6%	5%	15%	10% ^G	7%	_	_	100%

MARGIN OF ERROR ASSESSMENT

The sample for this study of N=1509 represents the Medscape online population with a margin of error of $\pm 2.523\%$, at a 95% confidence level. The survey used a point estimate (a statistic) of 50%, given a binomial distribution.

ABOUT THE PHYSICIANS FOUNDATION

The Physicians Foundation is a nonprofit seeking to advance the work of practicing physicians and help them facilitate the delivery of high-quality health care to patients. As the U.S. health care system continues to evolve, The Physicians Foundation is steadfast in strengthening the physicianpatient relationship, supporting medical practices' sustainability and helping physicians navigate the changing health care system. The Physicians Foundation pursues its mission through research, education and innovative grant making that improves physician wellbeing, strengthens physician leadership, addresses social drivers of health and lifts physician perspectives.

For more information, visit **www.physiciansfoundation.org**.

Signatory Medical Societies of The Physicians Foundation include:

- Alaska State Medical Association
- California Medical Association
- Connecticut State Medical Society
- Denton County Medical Society (Texas)
- El Paso County Medical Society (Colorado)
- Florida Medical Association
- Hawaii Medical Association
- Louisiana State Medical Society
- Medical Association of Georgia
- Medical Society of New Jersey
- Medical Society of the State of New York
- Nebraska Medical Association
- New Hampshire Medical Society
- North Carolina Medical Society
- Medical Society of Northern Virginia
- South Carolina Medical Association
- Tennessee Medical Association
- Texas Medical Association
- Vermont Medical Society
- Washington State Medical Association

For further information about this survey, contact:



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