

Annex 1: survey: burnout in Tanzania for EM		
Question	Item	Answer
Q1	Do you consent to participate?	Y/N
Q2	Did you train in emergency medicine residency?	Y/N
Q3	Do you currently work in an emergency department in Tanzania?	Yes, no, other_____
Q4	<p>The Maslach Burnout Inventory (MBI) is a validated tool to self-assess burnout. To determine your degree of burnout, the MBI explores three components: emotional exhaustion, depersonalization and personal achievement.</p> <p>For each question, indicate the score that corresponds to your response. Upon completion, you will receive a summary of your personalized score for each component and a description of the overall interpretation of your results. Each question is required to calculate your score. Unfortunately, you may not skip questions in this section. Thank you in advance for completing this survey.</p>	
	I feel emotionally drained by my work (i.e. I feel emotionally exhausted by my work)	Never, a few times per year, once a month, a few times per month, once a week, a few times per week, every day
	I feel used up at the end of the work day (i.e. I feel I have no energy at the end of the work day)	
	I feel fatigued when I get up in the morning and have to face another day on the job.	
	I can easily understand how my patients feel about things.	
	I feel I treat some patients as if they were impersonal objects.	
	Working with people all day is really a strain for me.	
	I deal very effectively with the problems of my patients.	
	I feel burned out from work.	
	I feel I'm positively influencing other people's lives through my work.	
	I've become more callous toward people since I took this job (i.e. I've become more indifferent toward people since I took this job)	
	I worry that this job is hardening me emotionally (i.e. I worry that this job is making me uncaring)	
	I feel very energetic.	
	I feel frustrated by my job.	
	I feel I'm working too hard on my job.	
	I don't really care what happens to some patients.	
	Working with people directly puts too much stress on me.	
	I can easily create a relaxed atmosphere with my patients.	
	I feel exhilarated after working closely with my patients.	
	I have accomplished many worthwhile things in this job.	
	I feel like I'm at the end of my rope (i.e. I feel I can no longer cope)	
	In my work, I deal with emotional problems very calmly.	

	I feel patients blame me for some of their problems.	
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Q5	My age is:	_____ (fill in)
Q6	Which gender do you identify as?	Male, female, other, prefer not to answer
Q7	What is your marital status?	Single, never married, married or domestic partner, widowed, divorced, separated, other, prefer not to answer
Q8	Please describe your parental status (may check more than one):	No children, children (biological, adoptive, by marriage, relatives) live in home, children (biological, adoptive, by marriage, relatives) live out of home, other, prefer not to answer
Q9	Please record the total number of children you feel responsible for, who may live in or out of your home, by age:	<1 year __, 1 – 2 years __, 3 – 8 years __, 9 – 12 years __, 13 – 18 years __, >18 years __, total __
Q10	Do you: exercise, get enough sleep, eat a healthy diet, smoke tobacco, drink alcohol more than socially, use other substances or drugs?	Never, rarely, sometimes, often, always, prefer not to answer
Q11	Do you have a chronic health condition?	Yes, no, prefer not to answer
Q12	Does your chronic health condition impact your ability to work?	Yes, no, prefer not to answer
Q13	During the past month, have you often been bothered by feeling down, depressed, or hopeless?	Yes, no, prefer not to answer
Q14	During the past month, have you often been bothered by little interest or pleasure in doing things?	Yes, no, prefer not to answer
Q15	During the past 12 months have you had thoughts of taking your own life?	Yes, no, prefer not to answer
Q16	In the past year, have you (may check more than one):	Moved homes, changed your job, had a baby (or adopted), experienced a divorce/separation/breakup of a meaningful relationship, been newly diagnosed with a major medical condition, experienced an acute health condition or exacerbation of a chronic health condition, undergone a surgical procedure, had a close friend or family member die, had a close friend or family member diagnosed with a major medical condition, been sued or named in a lawsuit, cared for a patient who experienced an unsatisfactory outcome, cared for a patient who died during or shortly after your clinical shift, experienced a significant life stressor not included above (please describe)_____, Other ____, none of the above, prefer not to answer
Q17	When it comes to household expenses, I consider myself to be the:	Sole provider, primary provider, share expenses with other household member, my income is not required to support my household, prefer not to answer
Q18	Check all financial responsibilities you currently have:	School loans (self/family), housing (rent/own), education/tuition (self/family), childcare, healthcare-related costs (self/family), other financial burden (self/family – please describe)_____, I have no financial burden, prefer not to answer

Q19	Do you feel barriers to going on vacation? (May check more than one):	No, I go on vacation when I wish without limitation, yes – time, yes – money, yes – other (please describe) ____, prefer not to answer
Q20	How do you typically get to work? (May check more than one):	Walk, bike, drive my own car, taxi/car service (Taxify)/car share with colleagues, bus, work transport, other – please describe ____, prefer not to answer
Q21	How long is your average commute to work?	<15 minutes, 15 – 30 minutes, 30 – 60 minutes, >60 minutes, Other ____, prefer not to answer
Q22	Prior to pursuing medicine, did you have a different career?	No, yes – please describe ____, prefer not to answer
Q23	Years of practice since residency training are:	<5 years, 5 – 10 years, >10 years, other ____, prefer not to answer
Q24	In which type of community do you primarily work?	Urban, suburban (i.e. neighborhood surrounding a city), rural, other ____, prefer not to answer
Q25	In which clinical setting do you spend the majority of your time?	Academic/university, public ED (university affiliated), public ED (non-university affiliated), private ED (university affiliated), private ED (non-university affiliated), I am not currently practicing clinical medicine, other ____, prefer not to answer
Q26	What is the approximate number of annual patient visits to your emergency department?	<25000, 25000 – 50000, 50001 – 75000, 75001 – 100000, >100000, N/A- I do not work in an ED, prefer not to answer
Q27	How many clinical hours do you work in an average week (include all clinical time, contracted plus locums):	Hours/week ____, other ____, prefer not to answer
Q28	In addition to your clinical work, do you also perform non-clinical work? (Academic, teaching, research, administrative)?	Yes, no, other ____, prefer not to answer
Q29	How many hours per week do you estimate you perform non-clinical work? (Academic, teaching, research, administrative)?	<1 hour, 1 – 2 hours, 3 – 4 hours, >4 hours, other ____, prefer not to answer
Q30	Describe your clinical shifts: do you work shifts longer than 8 hours? Do you work shifts as a single-coverage attending? Do you work holiday shifts? Do you work overnight shifts? Do you work weekend shifts? Do you have scheduled breaks built into your clinical shifts? Do you feel that there is adequate coverage during times when patient volume is higher than expected? Do you feel there is adequate coverage for unplanned emergencies or personal leave?	No, yes, NA/prefer not to answer
Q31	While performing patient care, do you feel concerned about contracting a communicable disease? Do you feel concerned about contracting HIV when caring for a patient with known or suspected HIV? Do you feel concerned about making a medical error? Do you feel concerned about being sued? Do you feel your knowledge base is inadequate or insufficient to manage patients effectively? Do you feel unsafe in the workplace? (i.e. do you feel at risk for your own personal safety from patients or others while at work?), Do you feel you work in a hostile environment (i.e. interpersonal conflict among work colleagues)? Do you feel appreciated by your patients and their families? Do you feel appreciated by your supervisors?	Never, rarely, sometimes, often, always, NA/prefer not to answer

	Do you feel you have adequate support from your supervisors? (i.e. supported in your clinical and administrative responsibilities?) Do you feel you have adequate support from your colleagues? (i.e. supported in your daily care of patients?), Do you feel satisfied by the physical work environment (i.e. space, equipment?)? Do you feel there are adequate resources for patient care (i.e. equipment, supplies, ancillary support?)? Do you feel the Electronic Medical Record (EMR) takes time away from your patient care? Do you feel there is unnecessary administrative paperwork? Do you feel that work-related politics (i.e. equity, respect, fairness) adversely affects your work experience? Do you feel that the patient to physician ratio is appropriate? Do you have time to take breaks to eat or to use the bathroom? Do you feel you have autonomy when making clinical decisions?	
Q32	Regarding your current position, do you feel: the clinical work schedule is fair and evenly distributed among you and your colleagues? The clinical work schedule is distributed in a reasonable and timely manner? There are time pressures and deadlines that need to be met? You set unrealistic goals on yourself? Pressured by your institution to achieve patient satisfaction? Pressured to decrease length of stay for your patients? There is sufficient protected time and/or funding for research? There is sufficient protected time and/or funding for continuing medical education (CME)? That you have meaningful mentorship?	Never, rarely, sometimes, often, always, NA/prefer not to answer
Q33	Regarding your current position, do you feel satisfied with: your current salary and/or financial compensation? Your current benefits? Your opportunity for promotion? Your current work-life balance? Your career choice in emergency medicine?	Very dissatisfied, dissatisfied, neither satisfied nor dissatisfied, satisfied, very satisfied, NA/prefer not to answer
Q34	Do you feel that in the last 6 months you may have engaged in obtaining more money from your patients (intentionally or unintentionally)?	Yes, no, other _____, prefer not to answer
Q35	Have you felt in the last year that you may opt out of working for the current institution and move to another?	Yes, no, other _____, prefer not to answer
Q36	Are there any other stressors which you feel have not been addressed in this survey, and may be considered?	Yes, no, prefer not to answer
Q37	If there are other stressors, please describe	_____ (fill in)
Q38	Has your department/division instituted a wellness program?	Formal, informal, not at all, other _____

Survey: burnout in Tanzania for Bugando specialists

Question	Item	Answer
Q1	Do you consent to participate?	Y/N
Q2	What specialty do you currently work in?	_____ (fill in)
Q3	<p>The Maslach Burnout Inventory (MBI) is a validated tool to self-assess burnout. To determine your degree of burnout, the MBI explores three components: emotional exhaustion, depersonalization and personal achievement.</p> <p>For each question, indicate the score that corresponds to your response. Upon completion, you will receive a summary of your personalized score for each component and a description of the overall interpretation of your results. Each question is required to calculate your score. Unfortunately, you may not skip questions in this section. Thank you in advance for completing this survey.</p>	

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Q7	Please describe your parental status (may check more than one):	No children, children (biological, adoptive, by marriage, relatives) live in home, children (biological, adoptive, by marriage, relatives) live out of home, other, prefer not to answer
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Q31	Have you felt in the last year that you may opt out of working for the current institution and move to another?	Yes, no, other _____, prefer not to answer

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