

**JOB SATISFACTION AND OCCUPATIONAL STRESS  
IN EXPERIENCED OSTEOPATHS**

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## **ABSTRACT**

**Introduction:** Job satisfaction and occupational stress are important, but under investigated issues among osteopaths. In related professions, such as general medical practice, occupational stress is a key factor reducing job satisfaction, and potentially compromising patient care.<sup>1</sup> This study explored the job satisfaction and sources of occupational stress among osteopaths with at least 5 years clinical practice experience. A concurrent study was conducted to explore the same issues among recent graduates.

**Design:** Sources of occupational stress and job satisfaction were explored using the **Osteopaths' Stress Survey (OSS)** distributed by mail to osteopaths at their practicing addresses. Participants returned the questionnaire to the researchers using reply-paid envelopes. Participation in the study was voluntary. Personal identifiers have been kept confidential.

**Method:** The Osteopaths' Stress Survey was mailed to 936 Australian osteopaths with an invitation to participate in this study and provide anonymous data on their occupational stress and job satisfaction. The returned surveys were divided between the two lead authors on the basis of years in practice. Surveys returned from practitioners of 5 years or more clinical practice experience were analysed in this study.

**Participants:** 173 osteopaths, with more than 5 years clinical experience, practicing in Australia, completed the questionnaire.

**Measures:** The questionnaire was derived from the General Practice Stress Scale<sup>2</sup>, subject to revisions to make it suitable for use amongst osteopaths. The questionnaire was piloted for face and content validity by a small group of osteopaths ( $n = 5$ ) representative of the sample. The resultant Osteopaths' Stress Scale comprised three parts: in part 1 participants provided personal and practice data such as gender, age, and years in practice; part 2 was an osteopathic practice career survey, in which participants ranked stressors in osteopathic practice in order of severity and frequency, and reported unfavourable aspects of osteopathic practice; and in part 3 participants reported

favourable aspects of osteopathic practice, ranked their job satisfaction, and reported to what extent clinical practice matched the expectations they held as students.

**Results:** Most experienced osteopaths (92%) reported being very satisfied or somewhat satisfied with their chosen career. The most frequent source of occupational stress among experienced osteopaths was administration of the practice and staff. The most severe stressors included, too much work to do in a limited time, earning enough money, and the threat of litigation. The severity of a stressor is somewhat tempered by the frequency of that stressor.

**Conclusions:** Although largely satisfied with osteopathic practice, experienced osteopaths find time pressures, too much work to do in a limited time and administration of practice and staff frequently stressful in their work. Other severe stressors, such as the threat of litigation occurred infrequently.

**Keywords:** osteopaths, job satisfaction, occupational stressors

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## INTRODUCTION

Job satisfaction is defined as an effective and positive response to work.<sup>2</sup> Higher levels of job satisfaction in health care professionals have been found to lead to a better quality of life, better mental and physical health, and more job stability for the practitioner.<sup>2</sup> It is important to identify the variables that make working as a health care provider satisfying. This study focuses on an under-researched group of health care providers, namely osteopaths. An often cited study undertaken by Mawardi, found that US physicians (medical practitioners) report deriving satisfaction from helping patients, solving problems and developing relationships with patients and their families.<sup>3</sup> Reflecting these findings is more recent research, undertaken by Burke and Richardsen,<sup>4</sup> who found that medical practitioners achieved satisfaction from providing successful therapy.<sup>4</sup> Closer to home, rural Australian GPs found four occupational factors very satisfying; variety in the job, responsibility, freedom to choose one's way of working and the opportunity to use their medical ability.<sup>5</sup> These factors may also apply to osteopaths as they all relate to working independently and in a practitioner-patient environment.

The job satisfaction of the health care provider also makes an important contribution to the quality of patient care. Research has found that the level of a medical practitioner's satisfaction with their work correlates with patient satisfaction, with the quality of services the patient receives and with overall quality of care.<sup>6</sup> For medical practitioners, satisfaction with work resulted in more openness to patients and more attention to the psychosocial aspects of their complaints.<sup>7</sup> On the other hand, in the same practitioners, negative feelings (frustration, tension, lack of time) towards their work resulted in a higher prescription rate and little explanation to the patient.<sup>7</sup> General practitioners' (GPs) satisfaction with their work has implications for both patients and GPs themselves. For patients it has an influence on the quality of their care and for doctors in their sense of fulfilment and well-being.<sup>6</sup> Because osteopaths are also primary care practitioners, it is likely that their job satisfaction plays an important part in the provision of effective treatment for their patients.

For the purpose of this study, work stressors will be defined as environmental situations or events capable of producing a state of stress.<sup>8</sup> Schattner and Coman found in Australian metropolitan GPs that the factors that most frequently caused stress were related to a perceived lack of time in practice.<sup>8</sup> Stressors in osteopathy may include patient management issues (time pressures, dealing with difficult patients), financial issues (cost of practice overheads, earning enough money in osteopathic practice) and business management issues (administration of practice and staff, paperwork). These would be consistent with those found in a study on metropolitan GPs in private practice.<sup>9</sup> Osteopaths and GPs both work in private practice as primary health care practitioners, in an environment that involves close interaction with patients.

Comparable research on medical practitioners in the USA has found that those who were more stressed are less satisfied with their practice of medicine.<sup>10</sup> Four job stressors identified by general practitioners (demands of the job and patient's expectations, interference with family life, constant interruptions at work and home and administration of practice) were predictive of high job dissatisfaction and lack of mental well being.<sup>10</sup> An awareness in the osteopathic profession of the inverse relationship between stress and job satisfaction would enable the opportunity for high stress levels to be identified and addressed early.

Working as an osteopath in Australia usually involves treating patients as a practitioner in private practice and, in many instances, running the business aspects of the practice. Previous studies have shown that business management, and being responsible for another person's well being, can contribute to job related stress in healthcare professionals.<sup>3,10,11</sup> If the osteopathic profession can identify the areas of business and patient management in osteopathy that are contributing to stress levels, then it is a step closer to developing measures to better deal with these factors.

This study, aims to explore the level of stress, the occupational stressors and the level of job satisfaction among experienced osteopaths. Information gained from previous studies

has indicated that if occupational stress levels are kept to a minimum then job satisfaction should be high, leading to optimal patient care.

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## **METHOD**

This study was designed as a joint study with two parts: one part concentrating on new graduate osteopaths and the other part investigated experienced osteopaths. The Faculty of Human Development Human Research Ethics Committee of Victoria University approved the study.

### **Aims**

The general purpose of this study was to investigate sources of occupational stress and levels of job satisfaction in Australian practising osteopaths.

The aims of this study were:

1. To determine the degree of job satisfaction osteopaths experience within their current practice experience.
2. To identify common sources of stress among osteopaths.

### **Participants**

Using the Australian Yellow Pages online, the business addresses of 936 osteopaths were found. A copy of the survey, an explanation of the study and a reply paid envelope was sent to each address. Two hundred and seventy six of the surveys were completed and returned to Victoria University. Respondents were included in this study if they had been practising in the osteopathic profession for a period of five or more years. The time period was chosen as an arbitrary distinction between lesser and more experienced osteopaths. One hundred and seventy three respondents fitted this criterion. The remaining completed surveys were analysed by another researcher.

### **Procedure**

Nine hundred and thirty six osteopaths were sent a three-part survey, letter, and postage-paid envelope to their business address. On return of the surveys, participants responses were divided into two groups, according to practitioners who had been practicing for greater than five years, and less than five years.



## Measures

A three-part survey was used that consisted of, Part 1 Personal and Demographic Information, Part 2 Osteopathic Career Survey (adapted from the General Practice Career Survey<sup>9</sup>) and Part 3 Job Satisfaction Survey. This survey was based on the General Practice Career Survey, which was developed for use among metropolitan GPs.<sup>9</sup> This survey was found to be the most appropriate and relevant for the purpose of this study because it could easily be adapted to investigate possible areas of osteopathic practice, which may contribute to occupational stress levels. It was also chosen because GPs work in private practice and have a one-to-one relationship with their patients, as do osteopaths. To ensure that all questions included were relevant and easy to understand the survey was piloted for face and content validity by five osteopaths who were excluded from the research group. Overall, the survey examined personal and demographic information, the level and frequency of stress, focusing mainly on the business and practice management aspects of osteopathy, and occupational satisfaction. A copy of the survey is provided in Appendix 1.

In the osteopathic career section of the survey, participants were requested to indicate how often they felt stressed by each factor on a 3-point scale from 1 (a few times a year) to 3 (at least weekly). Then they were asked on a similar 4-point scale how much stress, on average, the factor caused from 0 (no stress) to 3 (severe stress). There was also the option of not applicable for each item. The factors included in the survey were business, patient and financial management aspects of osteopathic practice. Refer to Appendix 2 for a full list of factors.

The job satisfaction section of the survey included both tick-a-box questions, where the participant had a choice of responses, and open-ended questions, where they could make a comment. The questions investigated the level of satisfaction and the variables that increase or lead to job satisfaction in osteopathy.

### **Statistical Methods**

Raw data were collated and analysed using Microsoft Excel. Data were tabulated and graphed. The data were graphed using bar and pie charts. Using Excel, the mean, mode, median and standard deviation were calculated, for the frequency and level of stress of each factor. Two tables were developed. One displayed the ranking, in decreasing order, of the factors that contributed to an osteopaths stress level and the other, using the same order, showed the variables that made working as an osteopath attractive.

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## **RESULTS**

Of the 936 surveys that were sent out 276 were returned, of this total 173 of the respondents had been practicing for a period of greater than five years and were therefore included in this data analysis. The remaining surveys were analysed as a separate part of the study looking at the level of stress, occupational stressors and level of job satisfaction in osteopaths who have been practising for less than five years.

### **INSERT FIGURE I**

Figure I demonstrates that 87% of participants were principals of the practice, 13% were subcontractors and 2% were employees. One respondent did not answer what position they held in the practice, therefore their position in the practice was recorded as unknown. Forty percent of the respondents worked as solo practitioners, 38% worked with 2-3 practitioners and 23% worked in practices with 4 or more practitioners.

### **INSERT FIGURE II**

### **INSERT FIGURE III**

### **INSERT FIGURE IV**

Figure IV demonstrates that the majority of osteopaths experience some occupational stress; with 52% of osteopaths experiencing only mild stress and 6% reported no stress. Not tabulated were, the results to the question about change to stress levels in the last 12 months. These had stayed the same for 39% of osteopaths, increased in 38% of osteopaths and decreased in 23% of osteopaths. Figure V shows 92 % of participants were at least *somewhat satisfied* working as an osteopath.

### **INSERT FIGURE V**

Table 1 shows the frequency of events and the severity of stress that they cause, to osteopaths in practice. Too much work to do in a limited time was a factor that occurred

regularly, and was the highest contributing factor to stress levels amongst osteopaths. Threat of litigation caused a high level of stress when it occurred, which was infrequently. Of the top 10 factors that contributed to stress levels in osteopathic practice, eight were also in the top 10 for stressor frequency.

**INSERT TABLE 1**

**INSERT TABLE 2**

**INSERT TABLE 3**

Table 3 indicates that relationships and interactions with patients was the most common reason why participants found osteopathy attractive. This was followed by challenges and variation in clinical practice and owning or having the potential to own their own practice.

**INSERT TABLE 4**

Table 4 demonstrates that workload is the main factor that contributes to osteopaths stress levels. Economic factors were also found to contribute to stress levels, however, more than 50% of osteopaths were satisfied with the wage that they earned as an osteopath.

Occupational stress had caused 47% of osteopaths to not want to go to work at some time, although 86% have never taken leave days from work due to occupational stress.

Twenty eight percent of osteopaths strongly agreed, and 37% agreed, that working in clinical practice lived up to the expectations they had as a student. Twenty three percent of osteopaths were neutral, 9% disagreed, and 2% strongly disagreed that working as an osteopath lived up to their expectations as a student.

## DISCUSSION

This study found workload and economic pressures were the main occupational stressors among experienced osteopaths, where workload was described as pressure to do “too much in a limited time”. Although it is unclear exactly what this phrase means for individuals, it is likely that most osteopaths spend the majority of their time interacting with patients, leaving little time for other things (e.g. paperwork, report writing, billing) causing the osteopaths to feel that there is not enough time in the day to complete all required tasks. Time pressures of this nature are likely to be a concern for osteopaths who have spent a few years working in the one location, and established a clientele. In a new business, clients are fewer and further between, and paperwork may be slotted in between appointments. In established businesses, time usually needs to be set aside for paperwork, and osteopaths, who see patients as their core business, might become frustrated that non-core business takes a substantial amount of time.

The economic pressure of not “earning enough money” was another key stressor. Most osteopaths see only one patient at a time, and conduct long (more than 20min) consultations. To earn more money, they need to either raise their fees, or see more patients. Seeing more patients takes more time, so income and workload stressors are directly proportional. In lowering one stressor (financial), you therefore may increase the other (workload). One way to decrease these stressors is to employ someone else to see patients for you, which then introduces a third stressor, management of staff. The stress of employing colleagues might be overcome by employing a practice manager but would simultaneously increase practice overheads, adding in a fourth stressor. Clearly, occupational stressors do not occur in isolation, and management of one may influence others.

An osteopath may feel that the wage they earn is not enough compensation for the hours they have to spend doing extra duties, other than consulting with patients, such as administration and paperwork. In other professions, when an employee receives a promotion to a senior position and expected to carry a greater burden of professional leadership and administration than their colleagues their salary increases proportionally.

An osteopath's wage however, does not generally rise in relation to an increase in their level of experience or their years in practice, rather as explained previously, an osteopath's pay is related to hours worked, the number of patients seen, and the organisational structure of the business.

Managing difficult patients was found to be a key stressor for osteopaths, even after many years of experience in clinical practice. This finding raises the issue of what this means, probably different things to different practitioners. Patients who are difficult to manage may be so because they have complex health problems, they have a demanding or challenging character or because of a personality clash with the practitioner. On the other hand, building relationships with patients was a key satisfier for the majority of osteopaths. Good, healthy, kind, relationships are satisfying whereas, demanding, needy, dependent, relationships can be stressful. Perhaps the stress of relationships is increased because healthcare delivery requires that the practitioners serve the patient's needs even when the practitioner has a 'bad day'.

The results of this study are largely consistent with findings from studies of medical practitioners and physiotherapists who work both in private practice and public hospitals.<sup>3,4,11</sup> Burke and Richardsen found, in their study of Canadian medical practitioners, that the major sources of stress were a heavy workload, the number of hours worked and the need to maintain an adequate income.<sup>4</sup> Mawardi discovered private medical practitioners suffered from time pressures, which proved a major contributor to stress levels and decreased job satisfaction.<sup>3</sup> Scutter and Goold reported that Australian physiotherapists found running a business, interacting with difficult clients, dealing with unrealistic expectations, a feeling of having too much to do and managing a heavy workload all very stressful.<sup>11</sup>

The majority of osteopaths in this study experienced mild to moderate occupational stress, 52% and 36% respectively. Burke and Richardsen found that 38% of medical practitioners described medical practice as very stressful, or extremely, stressful.<sup>3</sup> Eighty one percent of Australian metropolitan GPs felt mildly or moderately stressed with 10.8%

experiencing severe stress.<sup>9</sup> Physiotherapists, who were new graduates working in private practice and respondents in a research project investigating burnout, were found to experience moderate to high levels of occupational stress.<sup>11</sup> Overall the level of stress found in this study is a lower level compared to that found in Australian GPs and physiotherapists although the latter may be affected by the fact the study was looking at new graduates and investigating burnout in physiotherapists. The lower stress level in osteopaths may be because their consultation time is usually quite long allowing them time to build relationships with their patients. This is supported in this study by the finding that relationships and interactions with patient were key components in making osteopathy a satisfying profession.

This study found the major variable that made working as an osteopath attractive was that of relationships and interactions with patients (91%). This is consistent with Mawardi's study where, the development of personal relationships with patients and their families was found to be a source of satisfaction for medical practitioners in private practice.<sup>3</sup> Similarly, the two variables that osteopaths rated highly as making work attractive were, challenges in osteopathic practice and the variation of work (75%) and having the potential to own or owning their own practice (75%). This is consistent with Mawardi's findings, namely accurate diagnosis and successful therapy were high on private medical practitioners list of factors that lead to greater job satisfaction.<sup>3</sup> Medical practitioners also enjoyed the successful management of difficult cases.<sup>3</sup>

The overall level of job satisfaction in osteopathy was high, with 92% of respondents being satisfied with working as an osteopath, 61% of these were very satisfied. Osteopaths are likely to be satisfied as the variables that make osteopathy an attractive profession are seen in everyday working conditions. Osteopaths see a wide variety of complaints and conditions because we deal with whole body health. The nature of an osteopath's job as a caregiver means that they spend the majority of their time at work building relationships with, and interacting with patients. Previous studies have shown that general physicians are satisfied within their jobs.<sup>3,6,10</sup> In contrast, Newton and Gibbons found dental therapists, hygienists and practitioners had approximately a

fifty/fifty split with half having low satisfaction levels and half having high satisfaction levels within their profession.<sup>12</sup>

Part of the original intention of this study was to separately consider three sub-groups of osteopaths, namely principals, subcontractors and employees. However, the majority of respondents held the position of principal within the practice (87%) so the data were predominantly analysed as a whole. It was possible to see some differences in two of the sub-groups and, it is reported here for interest. The employee data were not analysed separately as only 2% of respondents were employees making the sample too small to be meaningful.

Seven of the top ten factors that contributed to stress levels in osteopathic practice were the same among both subcontractors and principals. The different factors for principals included; conflict with practice partners, associates or assistants; excessive clinical responsibility, and administration of practice and staff. All these factors are involved with managing a practice. The three different factors for subcontractors were, time pressures to see patients, having to make too many decisions and intrusion of work on social life. Two of the three of these factors involve the patient management areas of osteopathy.

Subcontractors reported that the cost of practice overheads was the biggest contributor to their stress levels. This could reflect the fact that a subcontractor only receives an allocated percentage of their earnings and the remaining amount is paid to the principal of the practice. Subcontractors may feel this percentage is too high, causing the cost of practice overheads to be a major stressor. Subcontractors ranked patients who are difficult to manage as their second major contributor to stress levels, whereas principals ranked the same issue seventh on the factors that contribute to their stress levels. Further research may investigate whether this may be indicative of their generally increased levels of experience.

The highest ranked factor contributing to stress in principals was 'too much to do in a limited time'. This is most likely attributed to the fact that principals have to both treat



patients and manage their business. Conflict with practice partners, associates and assistants was a factor that contributed quite highly to the principal's stress levels, however, this factor was an issue that occurred infrequently. This could be due to the practice principal not only owning the practice but also being the practice manager, meaning that the onus lay with them when it came to resolving staffing conflicts within the business.

### **Limitations of the study and recommendations for future research**

A limitation of this study is the possibility that respondents, who had a vested interest in the subject, may have been more likely to return the survey. According to this hypothesis osteopaths who responded may be more stressed and not represent the general population of osteopaths. Alternatively individuals suffering from severe levels of stress may not have had the time to complete a research survey. Therefore using a voluntary survey as a research tool will potentially exclude some of these individuals from the research process. Another limitation of this study was the majority of questions on the survey were closed questions, therefore the full scope of each factor that contributed to stress levels wasn't explored. This could be improved in further research using open ended questions.

“Too much to do in a limited time” and “patients who are difficult to manage” are broad terms that could have various component stressors. These factors could be considered a category rather than one individual factor, and may be further explored. Further research could examine what specific work activities contribute to each of these factors and which have the greatest contribution to stress levels. In the meantime osteopathic associations could address these occupational stressors with seminars and development programmes that focus on business skills (e.g. tax, accounting, workcover, TAC) as a professional support service. Experienced osteopaths might be encouraged to contribute to the pre-registration, or early post-registration education of younger members of the profession by sharing what they have learnt ‘the hard way’ about occupational stressors and how to avoid or cope with them. Furthermore, computer software specific to the requirements of the osteopathic profession could be developed to aid in dealing with administrative duties and to make undertaking these tasks more time efficient.

Further research could investigate coping mechanisms that are effective in dealing with stress levels and if high stress levels are related to a decrease in patient care. It could also investigate if experience in osteopathic practice has an effect on the factors that contribute to stress and stress levels. This research will provide a greater awareness of what contributes to stress amongst osteopathic employers, employees and academics in the osteopathic field.

### **Conclusion**

An osteopath's occupation offers a considerable source of job satisfaction. Although experienced osteopaths are largely satisfied with osteopathic practice, stress levels within the research group were still at a mild to moderate level. Experienced osteopaths find time pressures, too much work to do in a limited time and administration of practice and staff frequently stressful in their work. The occupational stressors that had the biggest contribution to stress levels are unlikely to occur in isolation. Financial stressor, particularly 'earning enough money in osteopathic practice' was of concern to many osteopaths. Time and money are interrelated if a practitioner increases their income by seeing more patients, then workload increases and time pressures will therefore increase. Other severe stressors, such as the threat of litigation occurred infrequently.

This study offers insight into the osteopathic profession specifically about job satisfaction and occupational stressors. It offers a baseline for the profession to understand these issues. Further research would be beneficial to explore more comprehensively these issues and could offer the opportunity to develop targeted strategies for the osteopathic workplace.

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# APPENDIX 1

## Section 1: Personal and Practice Information.

**Q1. Gender**                      Male                       Female

**Q2. Age**    20-24     25-29     30-34     35-39

40-44     45-49     50-54     55-59

60+

**Q3. How long have you been practising osteopathy?** \_\_\_\_\_years  
\_\_\_\_\_months

**Q4. How many osteopaths are in the practice?**

Solo

Group of 2-3 practitioners

4 or more practitioners

**Q5.** What is your position within the practice?

- |                |                          |
|----------------|--------------------------|
| Subcontracting | <input type="checkbox"/> |
| Employee       | <input type="checkbox"/> |
| Principal      | <input type="checkbox"/> |

**Q6.** How many hours per week do you work as an osteopath per week (on average)?

- |            |                          |
|------------|--------------------------|
| 0-10hours  | <input type="checkbox"/> |
| 11-20hours | <input type="checkbox"/> |
| 21-30hours | <input type="checkbox"/> |
| 31-40hours | <input type="checkbox"/> |
| 40+ hours  | <input type="checkbox"/> |

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**Q7.** Approximately how many patients do you see each week?

- |              |                          |       |                          |
|--------------|--------------------------|-------|--------------------------|
| Less than 10 | <input type="checkbox"/> | 41-50 | <input type="checkbox"/> |
| 11-20        | <input type="checkbox"/> | 51-60 | <input type="checkbox"/> |
| 21-30        | <input type="checkbox"/> | 61-70 | <input type="checkbox"/> |
| 31-40        | <input type="checkbox"/> | 70+   | <input type="checkbox"/> |

**Section 2: Osteopathic Practice Career Survey.**

**Q1.** For each of the following issues, please write the number in the frequency of stress box which best represents how *often* you feel stressed by it. (Please note we are **not** asking how often the issue occurs, but how often it causes you to feel stressed).

On the level of stress scale, please write the number in the box to indicate *how much* stress, on average, the issue causes when you feel stressed by it. Use the following scales as a guide. If an issue is not applicable to you, tick N/A and do not make any other responses for that item.

<u>Frequency of stress</u>		<u>Level of stress</u>		
1	<i>Rarely- a few times a year</i>	0	<b>No stress</b>	
2	<i>Occasionally- at least monthly</i>	1	<b>Mild stress</b>	
3	<i>Frequently- at least weekly</i>	2	<b>Moderate stress</b>	
		3	<b>Severe stress</b>	
		Not applicable	<i>Frequency of stress</i>	<b>Level of stress</b>
Q1.	Time pressures to see patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q2.	Phone interruptions during consultations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q3.	Home visits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q4.	Dealing with death and dying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q5.	Excessive clinical responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q6.	Lack of appreciation by patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q7.	Patients who are difficult to manage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q8.	Intrusion of work on family life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q9.	Intrusion of work on social life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q10.	Having to make too many decisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q11.	Dealing with friends and relatives as patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q12.	Too much work to do in a limited time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q13.	Not enough input into how the practice runs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Frequency of stress

- 1 Rarely- a few times a year  
2 Occasionally- at least monthly  
3 Frequently- at least weekly

Level of stress

- 0 No stress  
1 Mild stress  
2 Moderate stress  
3 Severe stress

	Not applicable	Frequency of stress	Level of stress
Q14. Administration of practice and staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q15. Threat of litigation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q16. The cost of practice overheads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q17. Obtaining payments from patients (not third party claimants)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q18. Earning enough money in osteopathic practice	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Q19. Paperwork in osteopathic practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q20. Conflict with practice partners, associates or assistants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q21. CPD points acquisition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q22. Keeping current on new advances in treatments and procedures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q23. The pressure to bulk bill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q24. Competition from “super” clinics or extended hour practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q25. Competition through over supply of manual therapists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q26. Unrealistic community expectations of the osteopathic profession	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q27. Negative comments from orthodox healthcare practitioners about osteopathy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q2.** Overall, how stressed have you felt at work in the last 12months?

No stress

Mild stress

Moderate stress

Severe stress

**Q3.** The following aspects of work are important to understanding why stress may occur amongst osteopaths. We would like to assess the relative contribution of each to your experience of occupational stress. Please rank the following items in order from 1 for the item which contributes most to occupational stress to 6 for the item which causes least stress. (Please number all boxes)

Clinical factors (ie your clinical duties)

Workload

Economic factors (ie your income, running a business etc)

“Medico-political” factors (ie involvement with colleagues and professional associations, and the legislative environment)

Effect of work on outside life (ie family, social life)

Physical working environment (eg space, light and noise considerations; adequacy of office and other physical resources)



**Q4.** Over the last twelve months would you say that your overall level of occupational stress has:

Increased

Decreased

Remained the same

**Q5.** Has your occupational stress ever made you feel you want to leave your:

Current workplace? Yes  No

Profession? Yes  No

**Q6.** How often have there been times when you don't want to go to work (regardless of whether you actually went or not) because of occupational stress?

Daily  Once every few months

Weekly  Never

Monthly

**Q7.** How much time from work have you missed in the last 12 months because of occupational stress?

0 days	<input type="checkbox"/>	1-2 weeks	<input type="checkbox"/>
1-2 days	<input type="checkbox"/>	2-5 weeks	<input type="checkbox"/>
3-7 days	<input type="checkbox"/>	5 + weeks	<input type="checkbox"/>

**Q8.** For the following questions, please tick the box which best represents your opinion.

a. I feel valued by my patients

Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

b. I believe I provide my patients with a quality service

Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

c. I believe that osteopathy is rated highly by the community in terms of occupational prestige/professionalism, compared to other occupational groups.

Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q9.** Do you have any other comments you wish to make regarding your own level of occupational stress or stress in osteopathic practice?

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### Section 3: Job Satisfaction

**Q1.** Thinking very generally about your overall career in osteopathy, would you say that you are?

Very dissatisfied	Somewhat Dissatisfied	Neither satisfied nor dissatisfied	Somewhat satisfied	Very Satisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q2.** What are the variables that make working as an osteopath attractive to you?

Relationships and interaction with patients

Salary

Hours

Challenges and variation of work in clinical practice

Owning your own practice/having the potential to own your own practice

**Q3.** In relation to your salary/wage working as an osteopath, would you say you are?

Very dissatisfied	Somewhat Dissatisfied	Neither satisfied nor dissatisfied	Somewhat satisfied	Very Satisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q4.** Working in clinical practice measures up to my expectations I had as a student osteopath

Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q5.** Are there any other comments you would like to make in relation to job satisfaction?

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## APPENDIX 2

### Factors

Too much work to do in a limited time

Earning enough money in osteopathic practice

Threat of litigation

The cost of practice overheads

Patients who are difficult to manage

Administration of practice and staff

Paperwork in osteopathic practice

Intrusion of work on family life

Time pressures to see patients

Having to make too many decisions

Excessive clinical responsibility

Conflict with practice partners, associates or assistants

Dealing with death and dying

Not enough input into how the practice runs

Intrusion of work on social life

Lack of appreciation by patients

Phone interruptions during consultations

Negative comments from orthodox healthcare practitioners about osteopathy

Obtaining payment from patients (not third party claimants)

CPD points acquisition

Dealing with friends and relatives as patients

Unrealistic community expectations of the osteopathic profession

Keeping current on new advances in treatments and procedures

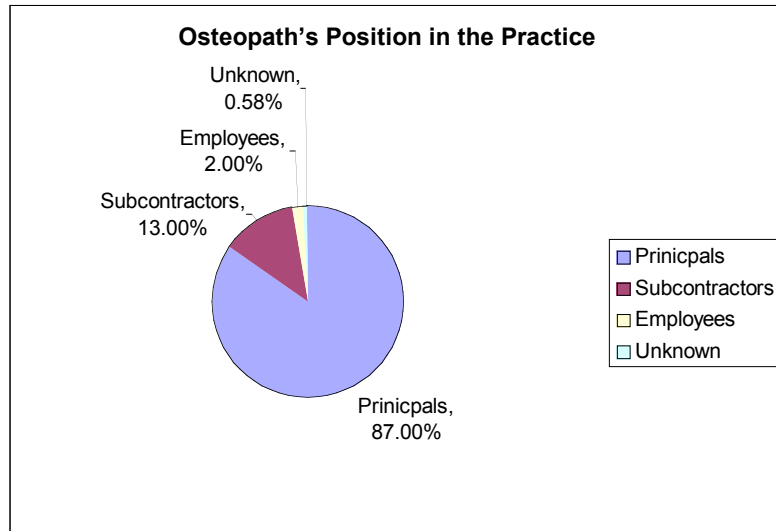
Home visits

Competition through over supply of manual therapists

The pressure to bulk bill

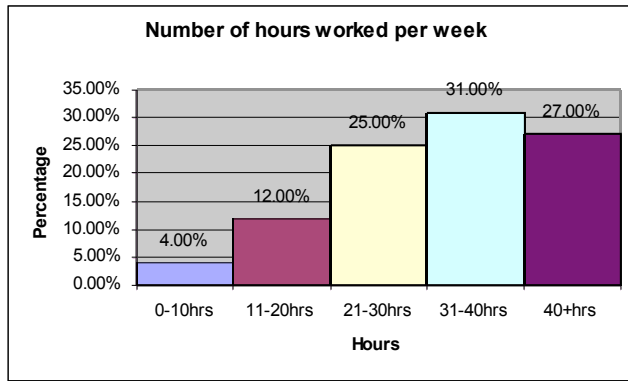
Competition from “super” clinics or extended hour practices

**FIGURE I**



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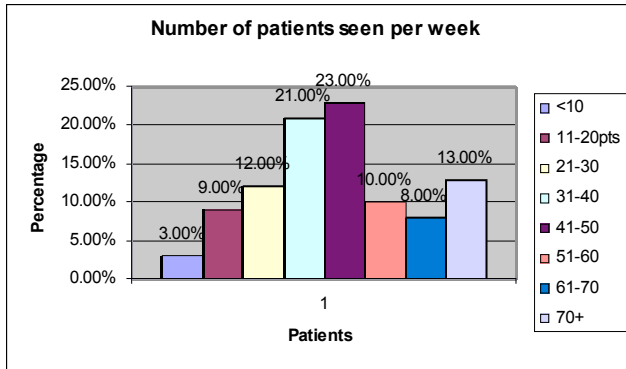
**FIGURE II**



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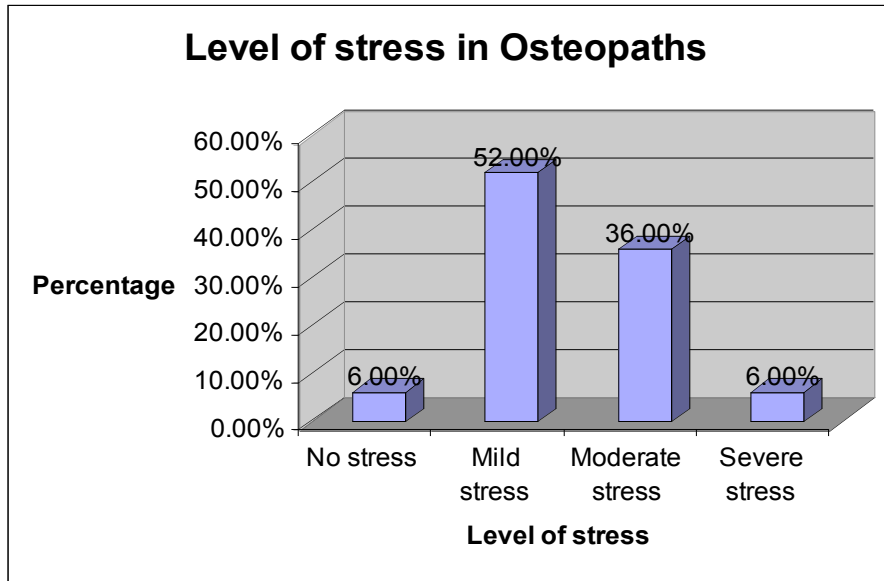


**FIGURE III**



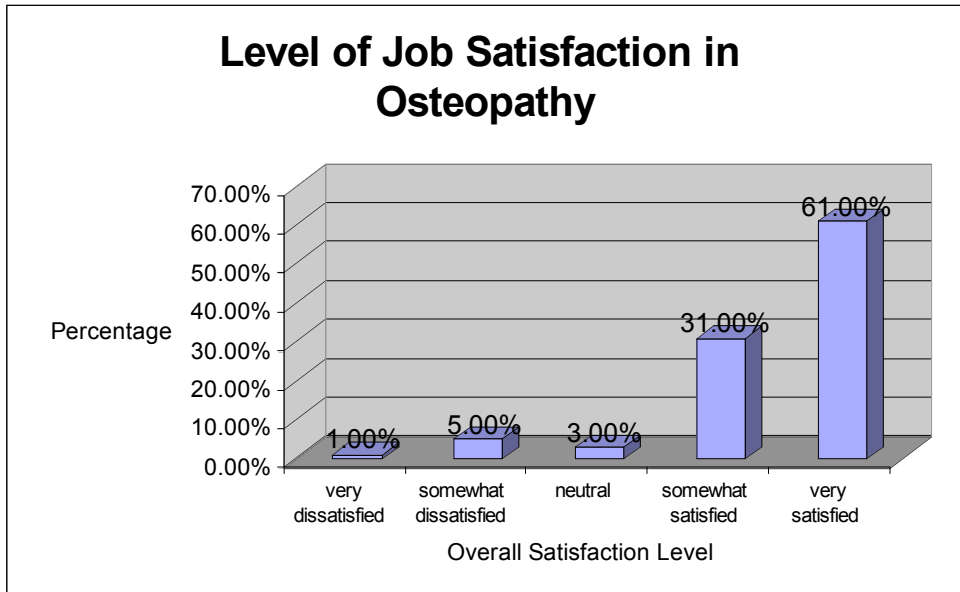
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**FIGURE IV**



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**FIGURE V**



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**TABLE 1**  
**Frequency of events and severity of stress they cause in osteopathic practice.**

Factor	Mean stress score	Severity of Stress	Frequency of Issue
Too much work to do in a limited time	1.65	1	2
Earning enough money in osteopathic practice	1.58	2	12
Threat of litigation	1.57	3	26
The cost of practice overheads	1.56	4	7
Patients who are difficult to manage	1.54	5	10
Administration of practice and staff	1.42	6	3
Paperwork in osteopathic practice	1.41	7	5
Intrusion of work on family life	1.39	8	8
Time pressures to see patients	1.34	9	1
Having to make too many decisions	1.28	10	9
Excessive clinical responsibility	1.50	11	6
Conflict with practice partners, associates or assistants	1.50	12	18
Dealing with death and dying	1.23	13	27
Not enough input into how the practice runs	1.13	14	14
Intrusion of work on social life	1.09	15	11
Lack of appreciation by patients	1	16	15
Phone interruptions during consultations	0.98	17	4
Negative comments from orthodox healthcare practitioners about osteopathy	0.98	18	16
Obtaining payment from patients (not third party claimants)	0.93	19	17
CPD points acquisition	0.93	20	20
Dealing with friends and relatives as patients	0.88	21	13
Unrealistic community expectations of the osteopathic profession	0.88	22	22
Keeping current on new advances in treatments and procedures	0.81	23	19
Home visits	0.79	24	23
Competition through over supply of manual therapists	0.70	25	21
The pressure to bulk bill	0.54	26	25
Competition from "super" clinics or extended hour practices	0.52	27	24

Note\* Each factor was rated on a scale of 1-3 for frequency of stress and 0-3 for level of stress. Using the mean from the data collected each factor was ranked from 1-27 in order of the amount of stress they caused in osteopathic practice. Then the frequency of that factor was also ranked in order using the mean of the amount of times the item occurred, in osteopathic practice, from 1-27. Not Applicable was also an option for each factor.

**TABLE 2****Frequency of events and severity of stress they cause in principals and subcontractors in osteopathic practice.**

<b>Principals</b>				<b>Subcontractors</b>			
Item	Mean Stress Score	Severity Rank	Frequency Rank	Item	Mean Stress Score	Severity Rank	Frequency Rank
Too much work to do in a limited time	1.67	1	2	The cost of practice over heads	1.87	1	7
Earning enough money in osteopathic practice.	1.6	2	11	Patients who are difficult to manage	1.78	2	4
Conflict with practice partners, associates or assistants	1.56	3	18	Threat of litigation	1.5	3	22
Threat of litigation	1.56	4	25	Too much work to do in a limited time	1.47	4	8
Excessive clinical responsibility	1.55	5	5	Earning enough money in osteopathic practice.	1.42	5	9
The cost of practice over heads	1.52	6	8	Paperwork in osteopathic practice	1.41	6	2
Patients who are difficult to manage	1.51	7	13	Time pressure to see patients	1.37	7	1
Administration of practice and staff	1.49	8	3	Intrusions of work on family life	1.37	8	6
Paperwork in osteopathic practice	1.41	9	6	Having to make too many decisions	1.28	9	15
Intrusions of work on family life	1.4	10	7	Intrusions of work on social life	1.27	10	12

Note\* Table 2 is displaying the top 10 factors that cause stress in principals and subcontractors and it also shows how frequently these factors occur in osteopathic practice.

Each factor was rated on a scale of 1-3 for frequency of stress and 0-3 for level of stress. Using the mean from the data collected each factor was ranked from 1-27 in order of the amount of stress they caused in osteopathic practice. Then the frequency of that factor was also ranked in order using the mean of the amount of times the item occurred, in osteopathic practice, from 1-27. Not Applicable was also an option for each factor.

**TABLE 3**  
**Variables that make working as an Osteopath attractive**

<b>Variable</b>	<b>Percentage</b>
Relationships and interactions with patients.	91%
Challenges and variation of work in clinical practice	75%
Owning your own practice/having the potential to own your own practice.	75%
Hours	65%
Salary	62%

Note: More than one answer could be given for this question therefore, percentages were calculated for each variable using the number of respondents for that variable divided by the amount of respondents overall.

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**TABLE 4**  
**Factors that contribute to stress in Osteopathic practice**

<b>Factor</b>	<b>Mean</b>
Workload	2.3
Economic factors (i.e. income, running a business etc)	2.83
Clinical factors (i.e. clinical duties)	3.15
Effect of work on outside life (i.e. family, social life)	3.91
“Medico-political” factors (i.e. involvement with colleagues and professional associations, and the legislative environment)	3.94
Physical working environment (e.g. space, light and noise considerations; adequacy of office and other physical resources)	4.85

Note: Ranked in decreasing order from factor that contributes the most to stress, to the factor that contributes the least to stress in osteopathic practice. This was done using the mean. Participants were asked to rank the above factors in order from 1 for the item that contributes the most to occupational stress to 6 for the item that causes the least stress. The mean was calculated using this data.

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