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# Work life balance and unusual activities in the Arctic

I find myself stood on the start line for the Beyond the Ultimate Ice Ultra marathon in Northern Lapland, well into the Sami territories of the European Arctic, contemplating just over four days of running over 240 km of mountains and frozen lakes using ancient migration trails. With home, work and worries far away I always find time for my annual pilgrimage to run an ultramarathon in a far flung area of the planet. Racing with a good friend for five days across frozen lakes, over mountains, braving snow shoes and temperatures as low as -25 might not be everyone's cup of tea but it certainly serves to put life into perspective. This was one of the best ultra races I have had the opportunity to race in, and the experience was shared with many others (including Robbie Britton who captained team GB to a gold medal at this year's ultramarathon championships). It certainly wasn't a disappointment and I returned refreshed, planning next year's adventure. The opportunity to take time away from the stresses of work can be hugely important to maintain a healthy work life balance.

The delivery of healthcare in the UK and elsewhere has come into sharp contrast over the past year or so. The implementation of 'Obama Care' in the US, wide-ranging concerns across Europe for social security systems challenged with mass migration, and widespread unrest amongst doctors in the UK all have a common theme. In the UK, prospective changes in working patterns have come into sharp contrast, with proposals for new consultant and junior doctors' contracts

provoking consistent and ongoing strikes across all specialities of doctors in training. Never before has the whole of the profession considered quite so carefully their terms and conditions. I am far more concerned about the possible changes in working patterns than I am about the reductions suggested in pay. The proposals will see consultants and juniors all working around 1:4 weekends and may put paid to time away, family life and outside interests.

Health, and particularly mental health, remains a real concern amongst medical practitioners. There are only a few studies examining working patterns, surgeon and clinician health and outcomes. However, what there is firmly establishes that patient outcomes (both in terms of healthcare safety and clinical outcomes) are linked to the health of the doctor.<sup>1</sup> The overwhelming majority of health problems dealt with in medical occupational health practice remain mental health problems, with up to 40% of occupational health referrals for medical professionals being related directly to mental health issues.<sup>2</sup> Perhaps more concerning, the rates of sickness absence is increasing in doctors and dentists, year on year.

Quite clearly this cannot be laid in entirety at the door of a new contract; however there is ample evidence from other nationalised healthcare systems that increasing workplace-based stressors (such as antisocial shift patterns) has an adverse effect on clinical outcomes and healthcare delivery.<sup>3</sup> Employers and employees need to tread carefully when engaging in

contract negotiations. It may be that the biggest threat to modern healthcare delivery is not in fact the obesity epidemic, the ageing population or the increasing tidal wave of 'silver trauma', but the demoralisation of the medical workforce. This will lead to increasing mistakes, poorer healthcare and clinical outcomes.

Whatever the end result of the various contract negotiations in the UK, the sweeping changes to healthcare delivery in the US and the ongoing social security reforms across a Europe that cannot afford its own broadly socialist ideals, individual doctors and their employers should focus more on the potential ramifications of unpalatable working conditions.

The real question is, will a 'seven-day health service' staffed by a thinly-stretched, demoralised workforce (in all likelihood suffering from increased sickness and mental health issues) deliver a safer, better healthcare system than is already in place?

## REFERENCES

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