

# Burnout: A Silent Rising Phenomenon

Aishwarya Prabhakaran<sup>1</sup> and Shannon Burton<sup>#</sup>

<sup>1</sup>Catawba Ridge High School, USA

<sup>#</sup>Advisor

## ABSTRACT

Burnout is an increasing issue in our post-pandemic world. Since the 1970's we have recognized the causes, the consequences, and even potential solutions of burnout. New research dives in even further by categorizing the three cause of burnout, the several measurement tools that have developed since the 1970's, and the expanding demographic that is affected by burnout.

## Introduction

“Burnout” has increased from 46% in popularity to 70% worldwide in the last 5 years based on data from Google Trends. This implies that burnout is beyond an area-specific issue, and that if left unaddressed, it will continue to rise. Over the last 3 years, a lot of changes were made due to the pandemic. Adults and adolescents had to adjust to a work from home model, which led to a lot of stress not only in adults, but in children, as well, as they adjusted to virtual school. Adults had to maintain a healthy work-life balance, because if left poorly managed then it would lead to burnout. Consequently, it caused an expansion of then demographic of people who are potentially affected by burnout. Burnout is the general term to describe the associated negative feelings like exhaustion, cynicism, and lower professional efficacy. There have been several tools created to help analyze these areas such as the MBI, CBI, OLBI, and PFI. Because burnout has been classified as a workplace phenomenon by the World Health Organization (WHO), we must look for associated causes between the person and organizational structure. The consequences of this phenomenon range from psychological to productivity issues. Therefore, we look to current research where our understanding of this issue grows.

## Definition

According to the APA Dictionary of Psychology, burnout is physical, emotional, or mental exhaustion accompanied by decreased motivation, lowered performance, and negative attitudes toward oneself and others.

Many caregiving services, especially healthcare services, face burnout and they see it with changes in their attitudes towards patients. Burnout is a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed according to the World Health Organization. Stress has increased since the pandemic, according to a study the APA did in 2021, where 66% of adults said that their main cause of stress was their occupation, from 64% in 2019. With the number continually increasing, recognizing the effect burnout has is even more essential. It is important to note that students also face this phenomenon. The Organization for Economic Co-operation and Development (OECD) conducted a survey involving 72 countries and with 540,000 student respondents aged 15–16 years. On average across OECD countries, 66% of students reported feeling stressed about poor grades and 59% reported that they often worry that taking a test will be difficult. (Pascoe et al., 2020). Taking into account that the demographic is changing because there are higher levels of stress in the younger population as well, burnout is as prevalent an issue as ever.

## Measuring Burnout

Ultimately all these factors lead to dissatisfaction in the work or the workplace. The three dimensions of burnout are:

- Emotional exhaustion
- Cynicism
- Reduced personal achievement

The manifestation of emotional exhaustion also includes depletion and fatigue (Maslach & Leiter, 2016). Cynicism is the harboring of negative feelings towards a person’s profession. It is shown through detachment, indifference, and apathy towards the work being performed and/or the people who receive it. (Edú-Valsania et al., 2022). Reduced personal achievement is when there are negative feelings towards one’s self regarding the ability to perform the job effectively. We can measure burnout in many different ways as listed below:

**Table 1.** Burnout Measurements

| Tools                                | How it works  | Effectiveness   |
|--------------------------------------|---|---|
| Maslach Burnout Inventory (MBI)      | Participants of MBI complete a questionnaire and their results are analyzed to determine then group into three categories of exhaustion, cynicism, and professional efficacy. The questions are frequency based; how often a person feels that way.   | MBI is the most widely known and used tool to analyze burnout in people. There are specific MBI tests for specific demographics like educators, students, and medical personnel. The results of this test should be taken into consideration with the context of the person’s life. |
| Oldenburg Burnout Inventory (OLBI)   | OLBI is also a frequency based test to analyze burnout from a scale. Questions are asked strongly agree, agree, disagree, and strongly disagree and assigned a number 1-4 respectively. Scores range from 16-64 with higher scores indicating higher levels of burnout (Bowman 2023)                        | OLBI is also a valid tool to measure burnout. The difference between the MBI is that it only uses 2 subscales measuring exhaustion and disengagement. This may not give as accurate response compared to MBI results, because it only measures two out of three areas.              |
| Professional Fulfillment Index (PFI) | The PFI is a 16-item index that measures burnout and professional fulfillment. Burnout is measured using two scales that represent two dimensions of work exhaustion and interpersonal disengagement, respectively. The PFI also includes a scale to measure professional fulfillment.(Fadare et al., 2021) | The PFI identifies burnout symptoms as well as the professional fulfillment, separating it from other tests. Items are scored on a 5-point Likert scale. (Trockel et al., 2022)   |

|                                    |   |   |
|------------------------------------|---|---|
| Copenhagen Burnout Inventory (CBI) | CBI is a 19-item self-reported measure of burnout. It contains three sub-scales measuring personal burnout, work-related burnout, and client-related burnout. Score range is 0-100, each subscale is averaged and then a total average is calculated. (Kristensen et al., 2005) | This model is just as effective as the MBI, OLBI, and PFI. The main difference is the more specific analysis of the areas of potential burnout. |
|------------------------------------|---|---|

## Causes

There are 6 possible reasons for burnout to occur: too much work, emotional toll, lack of influence and autonomy at a profession, role conflict, perception of unfairness, poor community/social support, and extended working hours. (Edú-Valsania et al., 2022)

- Too much work causes an overwhelming feeling, and people often distance themselves from their work. This reason heavily overlaps with the symptom of exhaustion for burnout. By giving additional stress to workers, organizations could be negatively impacted by burnout through lower levels of productivity.
- Emotional toll is observed in caretaking professions like healthcare and teaching, because both these professions require people to be patient, and control their emotions. Without proper emotional management, their daily use of this skill may wear them down, causing them to be less empathetic.
- Poor community/social support leads to burnout because there is no reliable system to express a person's conflicts. An example of this is described by (Orgambídez & Almeida, 2019), "Informal power also showed a direct influence on core burnout in this sample of nurses. When the hospital management and administrators facilitate the establishment of networks and positive interpersonal relationships between nurses and other health professionals, there is an increase in information, advice, and guidance that help nurses to perform adequate work, perceiving higher levels of support social at work (e.g., emotional support). Social support has a direct effect on burnout, reducing its effects and negative consequences"
- Lack of influence and autonomy in a profession causes feelings of insignificance because the worker's voice is not heard.
- While interviewing with the Harvard Business Review this past March, Micheal Leiter described new data from healthcare workers during the COVID-19 pandemic. The data showed high levels of exhaustion and cynicism, mainly due to the inadequacy of preparation and a breakdown in trust. According to Leiter, workers used words like "undervalued", "demoralized", and "unfair". A key point in this piece of evidence is the effect that lack of influence and autonomy had on workers. The evidence supports that prolonged exposure to this type of treatment leads to burnout in healthcare workers.
- Role conflict is when the expectations of the worker are not clearly defined by the employer, thus leading to frustration of the worker. This puts more pressure on the worker to perform their occupation beyond what is expected.
- The perception of unfairness can be due to a lack of recognition by supervisors, feelings undervalued, unrealistic expectations of work completion, and more. Extended working hours make workers feel like they are sacrificing time with family and loved ones. This is a prominent cause of burnout because it oversteps the worker's boundaries of personal and work life.

## Effects

Burnout can take a toll on everything in a person's life. It especially affects the motivation to do the smallest tasks related to work. The effects of burnout can be categorized into psychological, health, behavioral, and other consequences. According to many studies, depression is an indicator of burnout. For example, according to a (Ahola & Hakkanen, 2007) study, there was a positive correlation between burnout and higher risk for depressive symptoms in a study among 2555 dentists in a follow-up study lasting 3 years and a mediator between job strain and depressive symptoms.

A health consequence of burnout is the higher risk of getting type 2 diabetes. In a study to determine correlation between burnout and the risk of type 2 diabetes 677 employed men and women who were examined for 3-5 years to look at any development of type 2 diabetes. They found during the follow up period that 17 workers developed type 2 diabetes. (Melamed et al., 2006)

Some behavioral issues associated with burnout are smoking, lack of physical activity, and drinking. Prolonged stress leads workers to engage in such activities. Another consequence of workers being burnt out is lower levels of productivity, and if employers pressure workers to deliver work without addressing burnout, then the cycle continues.

## Solution

Up until this point there has been no conclusive support from previous research to clarify that there is a set solution for burnout. The findings of research in this field have been mixed. The way researchers have tried to categorize solutions is by looking at root causes as mentioned before. There have been two groups of solutions: fixing the person, or fixing the organization.

In fixing the person, some strategies are prioritizing health and fitness, practicing relaxation strategies, self-understanding, coping skills, changes in work patterns, and social support. (Maslach, 2017)

Maintaining a healthy lifestyle with proper physical activity and nutrition has been shown to reduce stress levels through the release of endorphins, which are critical in relieving pain, reducing stress, and to improve a sense of wellbeing. (Cleveland Clinic) (Mayo Clinic, 2022)

Relaxation strategies are also another way to manage stress to reach a sense of peace. They can include winding down after work hours, meditating, naps, and guided imagery.

Self-understanding is gaining a self-perception regarding the strengths and weaknesses of one's self to assess any issues or obstacles. This is used as a starting point to evaluate the obstacles and see the following solutions to overcome said obstacle. Such techniques include journaling, therapy, and being mindfully aware of decisions.

Coping skills are crucial in managing stress. They can significantly impact the way people respond to the stressors, whether they use maladaptive or positive coping responses. This determines the long term effect burnout will have on a person. If they resort to drinking or substance abuse as a response to stress it will negatively impact them; in comparison to listening to music, spending time with loved ones, or praying which all lead to more positive outcomes.

Changes in work pattern is a response to work overload. This can take form in managing a healthier balance between work and home life, taking more breaks, avoiding overtime work, etc.

Social support is key in avoiding negative feelings like isolation, feeling expendable, and absenteeism. Strong social support, such as having a good friend with you there shows a noticeable strong boost in the positive effect of reducing burnout. (Løseth et al., 2022)

All of these strategies are used to adjust the mindset or coping skills to manage burnout and stress. Rather than looking at fixing the organizational structure, there has been more focus on fixing the person facing burnout. However the research that has been conducted has shown promising findings. (Maslach, 2017)

In a study hosted in Portugal, a convenience survey of 492 nurses was conducted. Nurses had to meet criteria of having worked at least one year in the same ward in a public hospital. The results showed that if the

organizational structure was supportive to the nurses, there were more positive results. For example, when nurses had autonomy, decision making capabilities, and felt recognized for their efforts by hospital management they felt more capable of facing higher stress situations. This led them to complete the entirety of their duties in a meaningful way, be effective, and lead them to facing lower levels of stress and associated burnout. (Orgambídez & Almeida, 2019)

## Conclusion

To resolve the issue of burnout, we cannot simply look at one side of the story. It is increasingly clear that there are many factors that play a role in this, whether it be environmental, personal, or organizational structure. In today's world where there is cut-throat competition starting in education, it is important that we emphasize the need for healthy coping skills with burnout and more. As more research is being conducted, there will be clearer answers about what initiatives should be taken to protect the health of the working population.

## Acknowledgments

I would like to thank my advisor for the valuable insight provided to me on this topic.

## References

- Abramson, A. (2022). *Burnout and stress are everywhere*. Monitor on Psychology. <https://www.apa.org/monitor/2022/01/special-burnout-stress>
- American Psychological Association. (2021, October 6). Stress and decision-making during the pandemic. American Psychological Association. <https://www.apa.org/news/press/releases/stress/2021/october-decision-making>
- Michaela C. Pascoe, Sarah E. Hetrick & Alexandra G. Parker (2020) The impact of stress on students in secondary school and higher education, *International Journal of Adolescence and Youth*, 25:1, 104-112, DOI: 10.1080/02673843.2019.1596823
- Maslach, C., & Leiter, M. P. (2016). Understanding the burnout experience: Recent research and its implications for psychiatry. *World Psychiatry*, 15(2), 103–111. <https://doi.org/10.1002/wps.20311>
- Edú-Valsania, S., Laguía, A., & Moriano, J. A. (2022). Burnout: A review of theory and measurement. *International Journal of Environmental Research and Public Health*, 19(3), 1780. <https://doi.org/10.3390/ijerph19031780>
- Trockel, J., Bohman, B., Wang, H., Cooper, W., Welle, D., & Shanafelt, T. D. (2022). Assessment of the relationship between an adverse impact of work on physicians' personal relationships and unsolicited patient complaints. *Mayo Clinic Proceedings*, 97(9), 1680–1691. <https://doi.org/10.1016/j.mayocp.2022.03.005>
- Bowman, M. (2023, May 13). The Oldenburg Burnout Inventory (OLBI). Bravely. <https://www.bravely.io/blog/olbi>
- Fadare, O. O., Doucette, W. R., Gaither, C. A., Schommer, J. C., Arya, V., Bakken, B., Kreling, D. H., Mott, D. A., & Witry, M. J. (2021). Use of the professional fulfillment index in Pharmacists: A confirmatory factor analysis. *Pharmacy*, 9(4), 158. <https://doi.org/10.3390/pharmacy9040158>
- Kristensen, T. S., Borritz, M., Villadsen, E., & Christensen, K. B. (2005). The Copenhagen Burnout Inventory: A new tool for the assessment of Burnout. *Work & Stress*, 19(3), 192–207. <https://doi.org/10.1080/02678370500297720>

- Orgambídez, A., & Almeida, H. (2019). Core Burnout and Power in portuguese nursing staff: An explanatory model based on structural empowerment. *Workplace Health & Safety*, 67(8), 391–398. <https://doi.org/10.1177/2165079918822648>
- Lievens, D. (2023, April 19). *How the pandemic exacerbated burnout*. Harvard Business Review. <https://hbr.org/2021/02/how-the-pandemic-exacerbated-burnout>
- Ahola, K., & Hakanen, J. (2007). Job strain, Burnout, and depressive symptoms: A prospective study among dentists. *Journal of Affective Disorders*, 104(1–3), 103–110. <https://doi.org/10.1016/j.jad.2007.03.004>
- Melamed, S., Shirom, A., Toker, S., & Shapira, I. (2006). Burnout and risk of type 2 diabetes: A prospective study of apparently healthy employed persons. *Psychosomatic Medicine*, 68(6), 863–869. <https://doi.org/10.1097/01.psy.0000242860.24009.f0>
- Maslach, C. (2017). Finding solutions to the problem of burnout. *Consulting Psychology Journal: Practice and Research*, 69(2), 143–152. <https://doi.org/10.1037/cpb0000090>
- professional, C. C. medical. (n.d.). *Endorphins: What they are and how to boost them*. Cleveland Clinic. <https://my.clevelandclinic.org/health/body/23040-endorphins>
- Mayo Foundation for Medical Education and Research. (2022, August 3). *Exercise and stress: Get moving to manage stress*. Mayo Clinic. <https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/exercise-and-stress/art-20044469>
- Løseth, G. E., Eikemo, M., Trøstheim, M., Meier, I. M., Bjørnstad, H., Asratian, A., Pazmandi, C., Tangen, V. W., Heilig, M., & Leknes, S. (2022). Stress recovery with social support: A dyadic stress and support task. *Psychoneuroendocrinology*, 146, 105949. <https://doi.org/10.1016/j.psyneuen.2022.105949>