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CLINICAL PSYCHOLOGIST

- THERAPIST WITH ORGANISATIONAL PSYCHOLOGY BACKGROUND
- CHS MENTAL HEALTH CLINIC FOR EXPATRIATE COMMUNITY IN BRUSSELS



BURNOUT

WHAT IS BURNOUT?

- COINED IN THE 70s BY PSYCHOLOGIST, HERBERT FREUDENBERGER
- THERE IS NO SCIENTIFIC DEFINITION FOR BURNOUT.

- CHRISTINA MASLACH DEFINED “BURN OUT” BY THE PRESENCE OF THREE SYMPTOMS:
- EMOTIONAL, MENTAL AND PHYSICAL EXHAUSTION (COMPLETE BREAKDOWN),
- LOSING INTEREST AND MOTIVATION FOR WORK
- AND BEING INEFFICIENT AT THE WORK PLACE

- NOT A PSYCHIATRIC DIAGNOSIS BUT A OCCUPATIONAL PSYCHOLOGY CONCEPT
 - IT IS NOT RECOGNISED AS A DISTINCT DISORDER IN DSM-5

STRESS

- **NOT ALWAYS A BAD THING. HELPS ONE STAY FOCUSED, MOTIVATED AND MEET NEW CHALLENGES IN THE WORKPLACE.**
- **WHEN POSITIVE WORK FEATURES ARE MISSING OR INADEQUATE WE FIND THAT SATISFACTION DECLINES AT WORK AND CONSEQUENTLY MENTAL HEALTH IS ADVERSELY AFFECTED.**
- **WHEN STRESS EXCEEDS ONE'S ABILITY TO COPE, IT STOPS BEING HELPFUL AND STARTS CAUSING DAMAGE**

TYPICAL SYMPTOMS/ WARNING SIGNS

- FEELING ANXIOUS OR DEPRESSED
- ANGER AND IRRITABILITY
- SENSE OF MEANINGLESS, POINTLESSNESS AND LOSS OF SENSE OF PURPOSE
- FEELINGS OF BEING UNAPPRECIATED
- LOW ENERGY /EXHAUSTION
- ANXIETY, PARTICULARLY FEELINGS OF PANIC
- MEMORY PROBLEMS
- CONCENTRATION PROBLEMS
- STOMACH PROBLEMS
- SOCIAL WITHDRAWAL
- LOSS OF SEX DRIVE
- USING ALCOHOL OR DRUGS TO COPE

- RESEARCH HAS REPORTED THE OVERLAP BETWEEN JOB-RELATED BURNOUT AND DEPRESSIVE DISORDERS I.E. MAJOR DEPRESSIVE DISORDER, DYSTHYMIA
- STUDY BY BIANCHI, SCHONFELD & LAURENT (2014) SHOWED THAT 90% OF BURNT-OUT WORKERS MEET DIAGNOSTIC CRITERIA FOR DEPRESSION

HOW IS IT DIFFERENT TO DEPRESSION?

- STIGMA ATTACHED TO DEPRESSION BUT NOT TO BURNOUT
- SHARED SYMPTOMATOLOGY
- DEPRESSION IS MORE GENERALISED, AFFECTING FAMILY, FRIENDS AND HOBBIES
- PEOPLE SUFFERING FROM BURNOUT ARE USUALLY VERY ACTIVE IN THE MORNINGS BUT TEND TO COME TO A STANDSTILL IN THE AFTERNOON. WITH DEPRESSION, IT IS USUALLY THE OTHER WAY AROUND.

TYPICAL VULNERABLE EMPLOYEE

- VERY WORK-FOCUSED AND EXTREME WORK ETHIC
- A-TYPE PERSONALITY
- ADHD
- SUPEREGO ON STEROIDS
- PERFECTIONISM
- PESSIMISM
- CONSCIENTIOUS, NEED TO PLEASE
- TENDENCY TO BE ANXIOUS/ EXCITABLE
- DIFFICULTY IN ASSERTING BOUNDARIES / SAYING NO
- IGNORES INTERNAL SIGNS OF EXHAUSTION/ DISCOMFORT

6 RISK FACTORS FOR BURNOUT

MASLACH, SCHAUFELI & LEITER

- MISMATCH IN WORKLOAD
- MISMATCH IN CONTROL
- LACK OF APPROPRIATE AWARDS
- LOSS OF SENSE OF POSITIVE CONNECTION WITH OTHERS IN THE WORKPLACE
- PERCEIVED LACK OF FAIRNESS
- CONFLICT BETWEEN VALUES

BURNOUT EXPERIENCE

- VARIABLE DURATION
- LOSS OF CONFIDENCE IN SELF
- LOSS OF TRUST
- ONGOING ANXIETY
- IMPOSTER SYNDROME ' IS THIS REAL OR VALID ILLNESS? '
- DEPERSONALISATION

THERAPY WITH CLIENTS WHO ARE BURNT-OUT

- CBT
- MINDFULNESS- BASED

- THE WHO DEFINES **POSITIVE MENTAL HEALTH** AS “A STATE OF WELL-BEING IN WHICH EVERY INDIVIDUAL REALIZES HIS OR HER OWN POTENTIAL, CAN COPE WITH THE NORMAL STRESSES OF LIFE, CAN WORK PRODUCTIVELY AND FRUITFULLY, AND IS ABLE TO MAKE A CONTRIBUTION TO HER OR HIS COMMUNITY. EMPLOYEES WITH GOOD MENTAL HEALTH WILL PERFORM BETTER IN THEIR WORK.”
- WORK IS EXCELLENT FOR BOTH OUR MENTAL AND PHYSICAL HEALTH. RESEARCH HAS CONSISTENTLY SHOWN THAT GOOD QUALITY WORK CAN BOOST AND PROTECT HEALTH.

PROTECTIVE FEATURES

- BEING VALUED AT WORK - APPRECIATION
- GOOD RELATIONSHIP WITH MANAGER/ SUPERIOR
- HAVING MEANINGFUL WORK
- BEING ABLE TO MAKE DECISIONS ON ISSUES THAT AFFECT YOU
- BEING ADEQUATELY TRAINED FOR THE WORK THAT YOU DO
- HAVING THE RESOURCES YOU NEED TO DO THE WORK
- HAVING A JOB THAT IS WELL DESIGNED AND NOT OVERLOADED
- HAVING WORK THAT IS WELL ORGANISED IN TERMS OF WORK SCHEDULES AND TIME OFF
- ORGANISATIONAL CULTURE

PROTECTIVE FEATURES

- MAKE TIME TO EXERCISE OR ACTIVITY THAT RAISES YOUR HEARTRATE AND MAKES YOU SWEAT
- HEALTHY SLEEP AMOUNT AND AT RIGHT TIMES
- MAKE CONSIDERED CHOICES REGARDING FOOD SUCH AS MINIMIZING SUGAR AND REFINED CARBS
- REDUCING YOUR INTAKE OF FOOD THAT CAN ADVERSELY AFFECT YOUR MOOD SUCH AS ALCOHOL OR CAFFEINE
- EAT MORE OMEGA-3 FATTY ACIDS TO GIVE YOUR MOOD A BOOST
- AVOID NICOTINE AND DRINK ALCOHOL IN MODERATION
- TURN OFF SCREENS AN HOUR BEFORE BEDTIME- LIGHT EMITTED FROM PHONES AND TABLETS SUPPRESS YOUR BODY'S PRODUCTION OF MELATONIN AND MAY DISRUPT SLEEP
- REPLACE STIMULATING ACTIVITIES WITH CALMING ACTIVITIES BEFORE BEDTIME

- QUESTIONS??