BURNOUT: DEVELOPMENTAL INFLUENCES

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Abstract

Burnout is a phenomenon of interest to many mental health professionals. It is a complex issue with no simple resolution. This study explored the origins of the phenomenon as perceived by twenty mental health professionals. It found that in some cases personal unresolved issues in the professional may be an important influence in the development of burnout. Organizational issues such as unrealistic pre-employment expectations, conflict between individual and organizational goals and structural difficulties within the organization were also implicated.

Résumé

L'asthénie* est un phénomène susceptible d'intéresser plusieurs professionnels du domaine de la santé mentale. Il s'agit d'une question complexe à laquelle on ne saurait trouver une réponse simple. Cette étude en est une d'exploration du phénomène tel que perçu par vingt professionnels de la santé mentale. Dans quelques cas, il s'avère que le fait que le professionnel ne résolve pas certaines questions d'ordre personnel puisse avoir une influence importante sur le développement de l'asthénie. On observe aussi l'incidence de facteurs organisationnels comme des attentes irréalistes avant l'emploi, des conflits entre les objectifs de l'individu et ceux de l'organisation et des problèmes structuraux au sein de l'organisation.

*Ce terme scientifique semble être la traduction la plus juste du terme populaire "burnout". Selon Robert, il désigne un "manque de force, état de dépression et de faiblesse (pour des raisons neuropsychiques)".

Introduction

Burnout is a phenomenon surrounded by controversy and confusion in today's professional world. Mental health professionals, including teachers, counsellors, police, probation officers and nurses, present it as a major concern to their respective professions.

To date there has been a great deal of research in the area. Both quantitative and qualitative methodologies are represented in the literature. Despite the current influx of research more is needed especially in the area of the developmental influences of the phenomenon.

Early research focused on the symptoms of burnout (Freudenberger, 1974; Maslach, 1976), whereas the more recent research

recognizes a developmental pattern to the phenomenon (Daley, 1979; Edelwich & Brodsky, 1980). Maslach (1976), a pioneer in the area, defines burnout as:

> "The loss of concern for the people with whom one is working. In addition to physical exhaustion and sometimes even illness, burnout is characterized by an emotional exhaustion in which the professional no longer has any positive feelings, sympathy or respect for clients as patients." (p. 18)

Freudenberger describes the burned out individual as one who looks, acts and seems depressed. Waubolding and Kessler-Boloton (1979) discuss burnout as a growing concern:

> "Burnout is characterized by feelings of frustration, rigidity, omnipotence, and the like. It leads counsellors to put an increasing amount of distance between themselves and their clients, and to feel less and less satisfied with their own job performance." (p. 39)

Carmichael (1979) reports that:

> "Burnout is loosely defined by a number of social workers as the depletion of personal resourcefulness, flexibility and positive energy to the point that psychologically a person has no more to give." (p. 43)

Daley (1979) conceptualizes burnout as a dynamic process that has identifiable developmental stages. Edelwich and Brodsky (1980) likewise discuss the stages of disillusionment that ultimately lead to burnout. They view the phenomenon as the progressive loss of idealism, energy and purpose. Cherniss (1980) discusses the difficulty of exploring the early stages and origins of burnout. The current trend of burnout research appears to be exploring the origins of the symptoms unearthed by the earlier research.

It is the focus of the present study to take a closer look at some of the possible origins of the phenomenon which causes service workers to feel so drained and depressed. What are some of the factors which may result in counsellors putting distance between themselves and their clients; showing up late for appointments; losing sympathy for their clients? These are the central questions this study was designed to address.

Method

This study was designed to explore the underlying causes and developmental influences on the phenomenon of burnout. To address these issues the study focused on the perceived origins of burnout within the day-to-day experiences of front line counsellors and social service providers. Twenty professionals from various institutional backgrounds were interviewed by the author. The interviews were recorded and transcribed for in-depth analysis. The subjects were between the ages of 25 and 35, with at least one year's experience in their current positions. Males and females were equally represented in the sample. The study participants were all from the Greater Boston area. The following table breaks down their professional backgrounds.

Table 1

Study Participants by Sex and Professional Background

Professional Background	Sex		Total
	Male	Female	
Counsellors	9	5	14
Social Workers	1	2	3
Nurses	0	3	3
Total	10	10	20

The study participants worked in a variety of institutional settings — prisons, hospitals, both general and psychiatric, community mental health centers and schools. Table 2 details this.

Table 2

Study Participants by Work Setting

Work Setting	N
Community Mental Health Center	12
General Hospital	1
Psychiatric Hospital	2
Prison	2
School	3
Total	20

Because the aim of this study was to ask basic questions regarding definition, development and process of this complex phenomenon, a qualitative methodology was chosen as most appropriate. Lofland (1976) identifies the following specific criteria for qualitative research:

1) Getting close to people actually acting someplace in the real world and developing intimate familiarity.
2) Focusing on and delineating the prime or a basic situation which the scrutinized people are dealing with or confronting.
3) Focusing on and delineating the interactional strategies, tactics, and so on, by means of which the scrutinized people are dealing with the situation confronted.
4) Assembling and analyzing an abundance of qualitative episodes into disciplined abstraction about the situation and strategies delineated (p. 3).

This study assimilated the above criteria through in-depth interviews that introduced the author to the personal and professional historical lives of the research participants. The research process sensitized the workers to their own experiences and allowed them to identify their individual perceptions about burnout: how they viewed it, how it influenced them and how they personally defined it. The qualitative methodology allowed for a more personal and meaningful perspective of a very subjective concept, burnout. It allowed for the articulation of burnout from the *collective definition* based on the *collective experiences* of twenty mental health professionals. For this study, the interviews lasted from two to four hours and focused on the following areas of inquiry:

1) *Professional Adult Development*: what religious, political, social and economic factors does the worker see as influential in causing him/her to become a human service professional? Levinson (1978), viewed career choice as a primary adult development task. The career choice of each subject was examined and explored from a personal-historical viewpoint.
2) *Organizational Socialization*: how did the worker see the organization affecting his or her behavior? Schein (1978), views organizational socialization as an interactive phenomenon. He identifies the worker influencing the organization as innovation and the organization influencing the individual as socialization.

Schein's view that, "as the study of adult development progresses, it is becoming more and more clear that work, family, and self concerns interact strongly within people throughout their lives" (p. 17).
3) *Burnout Incubation Process*: what were the professionals' earliest indicators of the burnout phenomenon? How did they interpret them? Upon recognizing these factors as burnout indicators, what specifically did they do about them?

Results

Influences in the Individual

Recurring themes emerged from the twenty interviews which provided the basis for new insights into the phenomenon and for the conclusions of this study. To begin, subjects repeatedly referred to burnout as follows:

"To me it means overloading . . . and anxiety."
". . . frustration. . . feeling unsupported."
". . . a lack of energy."

Each of these representative responses to the question "What does burnout mean to you?" outlined only observable symptoms of burnout. These symptoms are clearly reactions to something. And yet at no time did those interviewed indicate an awareness of the causes of these symptoms. For example, when confronted with questions such as: "What caused the above symptoms?", the subject frequently responded with further elaboration of symptoms. These participants seemed not to be aware or to look at what the antecedents to these burnout symptoms might be. Thus, when asked, "What is burnout in your experience?" they consistently responded with descriptions of their reactions.

Upon closer examination of the workers' view of burnout in their own experience, it became clear that the origins of burnout were germinated in the broader life experiences of the worker and in their interaction within the particular organization. The following transcripts from the interviews suggest the developmental nature of burnout. The examples demonstrate how these professionals sometimes vicariously addressed their personal, unresolved life issues while working with age-specific clients. Frequently, the professionals admitted that such clients "burned them out" faster than clients who did not bring up the

same issue. One such professional (let us call him Ed) works in a small community mental health program on the North Shore in the Boston area with adolescents between 8 and 18 years of age. He admits being more distressed working with boys between the ages of 8 and 13.

Interviewer:
It is interesting about that age (younger age) that you cannot feel comfortable with. They are all about the age when your father died. Is that right?

Ed: It is that time. That's very interesting.

Interviewer:
Now do you see the connection between your statement made earlier when you said you don't remember much about adolescence prior to your father's death?

Ed: I see. The children I am having a difficult time with are about the age I was when my father died.

This particular example suggests that this worker's unresolved adolescent issue (i.e. his father's death) may have become manifested in his professional role as a counsellor (he was a father figure to these boys at this age). Two weeks after this particular interview the subject continued personal therapy around the unresolved feelings he had about his father's death.

Peter, who works for a multi-service center in Boston, counsels boys between the ages of 7 to 18. Unlike Ed, Peter is in therapy working on adolescent separation issues with his parents.

Peter:
Currently, I am in therapy working on adolescent issues with my parents.

Interviewer:
Do you see any connection between your current therapy and your experience with burnout?

Peter:
No, not really.

Interviewer:
In your current position at your agency, who are your primary clients? How old are they?

Peter:
I work with kids between the ages of 7

and 18. I have the most frustrations with the older ones. (He looks around the room and suddenly makes the connection. He spoke very softly at this point). I have never made the connection before. Here I am in therapy working on separation issues with my adolescence and my parents, at the same time I am talking about burnout working with kids. These kids are going through the same issues. I need to look at that some more.

Throughout this study, subtle personal and professional connections were made that suggested personal unresolved issues being challenged while working with specific clients. Such personal conflicts provide some insight into the developmental nature of burnout. The unconscious origin of the phenomenon appears to be incubated in the unresolved developmental issues that become aggravated within the worker through clients within the organization. The worker who is unaware of these internal confrontations and lacks understanding of these conflicts seems more likely to burnout.

Further documentation supporting how unresolved personal issues seem to incubate burnout is provided by Pat. She refers to the pace of burnout as "a slow process". For a clearer sense of the "process" the author asked her for a step-by-step description of this process.

Pat: As how it starts to happen? I think for me it's a slow process of not taking care of one thing, or accepting that it can be something else coming along and piling on top of it... A sense of feeling really responsible, and not giving myself permission to make a mistake, or to let something pile up.

Interviewer:
So, it's kind of the intensity you have on unfinished business, being one indicator, the more intense you get, the more burned out you feel.

Pat: Umhum.

In this example, Pat describes her behavior. Where did she learn to, "not give herself permission to make a mistake", to "feel really responsible", at the same time not giving herself permission "to make mistakes?" Once aware of this conflict the subject understands the origin of "feeling bogged down", "over-

whelmed" and feeling burned out. It is only after this conflict is understood that the subject can dissipate the intensity she felt being "burned out". To focus only on the symptoms of the "intensity" is to not address the underlying unresolved feelings leading to the phenomenon.

Influences in the Organization

Other precipitating influences suggested themselves as the study proceeded. A second major influence of burnout development was seen to come from the discrepancy between the worker's preemployment expectations and the reality of the organization he comes to work for. Warnath and Shelton (1976), discussed this discrepancy as leading to a loss of job enthusiasm for direct service workers. The present study supports the thesis that novice workers have unrealistic pre-employment expectations and that such expectations can contribute significantly to the development of burnout.

Interviewer:
> What were your expectations prior to coming to this organization?

Ken:
> My expectations before coming to this place was. . . I wanted to be released from the prison of my past job. Also, I wanted to get a break into the mental health field. I became very frustrated quickly. My orientation consisted in meeting with the director for a half-hour and was told to read the organization manual. I had to wait around for two months before I got any clients; I did nothing. There is no structure around here.

Lack of structure for entry level workers and lack of supervision alienated many workers. A "grace period" of 6 months was usually mentioned as the maximum waiting "for something to happen." It is during this period again that the origins of burnout emerge. The worker expects direction and often has no real supervision. Further documentation of a worker's pre-employment expectations follows:

Tom:
> I took the job at the hospital because it seemed to have a really good in-service training program. I couldn't ask for anything better after graduate school. Here I was just graduating and this hospital was offering me a position. The money was good. How could I resist? During the first 6 months I had no administrative responsibilities, so I just tagged along with the coordinator. I absorbed a lot. In fact I had more time to just spend with kids, or the kids I had in therapy. I had plans for them. I had good supervision and debriefing sessions during this time.

He continued to update his current situation:
> In six months time I could assess my personal professional situation, what are my own shortcomings. . . not really knowing what the organization was until now, I started to see where there were some real problems in the system concerning laws and rights of the kids.

Tom admits that when he applied for the job he was informed of its structure. At the time this structure met his professional training needs. Tom admitted that burnout began soon after his training program finished. His pre-employment expectations were distorted when the organizational hierarchy insisted he assume more administrative work, due to staffing cutbacks. The repeated pattern of burnout incubation between the pre-employment expectations and the realities of the organizational structure contributes to the reaction formations defined as burnout.

A further source of burnout incubation seems to originate in the conflict between perceived personal goals and the goals of the organization. This conflict surfaces when an individual's goals are not clearly defined or are themselves contradictory. Pat, a counsellor in a community-based multi-service center describes one such conflict. During the interview she admitted a need to be "all things to all people". She provided an explanation as to how her need, real or imaginary, conflicted with her role as a professional:

Pat:
> I think it just ties in with feelings of needing to be all-loving and all-giving, and all there. If you have those feelings a little bit yourself that you want to be omnipotent with people, or if you want to feel like people really need you. . . and the system around you is perpetuating that, it's a dangerous combination. That's why I feel strongly that in this field you need a good supervisor or a good working relationship with other staff, people to say "slowdown". It's okay to feel tired.

Implications

There are two major areas in which this study has ramifications: for the individual and for the organization. As this study shows, both are responsible for the evolution of burnout. This concept of shared responsibility is sometimes overlooked in the burnout literature. Many studies either focus on the individual or the organizational factors leading to burnout.

Insofar as the individual is concerned this study shows that there is a definite need for self-understanding and exploration into areas of unresolved personal conflict. Specific clients present their problems to mental health professionals and, if these problems reside in areas in which the practitioner has no insight or understanding, then he or she will be unable to help the client. They will be at an impasse. This impasse suggests an early burnout indicator. Some of the more common symptoms of burnout (distancing, loss of sympathy, fatigue, etc.) can be seen as attempts by counsellors to avoid facing those issues which are problematic within their own lives.

Supervision is one valuable resource which can help, particularly novice counsellors who may be unaware of their "blind spots". Supervision can help by providing objectivity in identifying certain patterns (e.g. this counsellor seems frequently to have difficulty with adolescent girls experiencing authority problems). The counsellor with similar problems with authority may feel helpless, but not know why. Personal therapy is yet another resource which should be seen as integral to the professional development of counsellors. As can be inferred the underlying key here is to identify the area of conflict. Once this conflict is identified specific decisions can be made to resolve the issue or at best attain personal sensitivity to clients expressing similar difficulties.

Insofar as the responsibility of the organization is concerned, it seems clear that an honest recognition of the human complexities inherent in the counselling process is critical. Staff training must deal with the organization's limits. At the same time it must temper the all too familiar "fantasies" of the novice worker. Along with good supervision, an organization has the responsibility to help staff develop realistic professional expectations. Likewise, it is necessary to formulate organizational goals that conflict minimally with staff development. Furthermore, where possible it is important that organizations provide ample opportunity to meet the ever changing age specific needs of the counselling professional. The novice requires different forms of staff development than the twenty-year veteran.

Summary

This study, which focused on the developmental influences in the phenomena of burnout, has identified two major factors: individual and organizational. In terms of the former, personal unresolved life crises appeared throughout the interviews as a critical variable. Thus, the inability of counsellors to identify and separate their personal issues from those of their clients seems to be enough, in some cases, to initiate the process called burnout.

From an organizational view it appears that certain factors such as conflict between personal and organizational goals, poor or non-existent supervision as well as an unrealistic set of expectations for the incoming mental health professional, may also be fertile ground for burnout incubation.

Certainly it is clear from this research that burnout is a complex phenomenon and that more study is needed to sensitize professionals to the factors influencing burnout development, be these individual or organizational.

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