

Let's Talk about Burn-Out

AMANDA KELLER
MSC PSYCHIATRY



About me

Goals of the Workshop

- ▶ Use my own story with burn out to help you prevent it in your own organizations.
- ▶ I want you to keep your best workers
- ▶ I want you to maintain work life balance
- ▶ What I am not going to do is to tell you all to self care your way to balance.



Key Definitions

- ▶ **Burnout** is a state of emotional, physical, and mental exhaustion caused by excessive and prolonged stress. It occurs when you feel overwhelmed, emotionally drained, and unable to meet constant demands. As the stress continues, you begin to lose the interest and motivation that led you to take on a certain role in the first place.
- ▶ **Compassion fatigue** is a condition characterized by emotional and physical **exhaustion** leading to a diminished ability to empathize or feel **compassion** for others, often described as the negative cost of caring.
- ▶ **Secondary trauma** is defined as indirect exposure to **trauma** through a firsthand account or narrative of a **traumatic** event.



Why is this difficult
to talk about?

Let's Normalize it



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- ▶ 32% of therapists suffer from burn out or depression at some point in their career they report it likely affected their clients (Woods et al., 1985)
- ▶ 42% of physicians self report burn out (AMA, 2020)
- ▶ The social workers assessed yielded results indicating a current burnout rate of 39% and lifetime burnout rate of 75% (Siebert, 2006).

The year of my burn out.

- ▶ 6th year at my agency 8th year of clinical work post masters degree.
- ▶ I was a highly respected and requested professional (overachiever)
- ▶ Parenting a young child.
- ▶ Experiencing marital problems.
- ▶ Two clients in their early 20s passed away within 6 months of each other.
- ▶ The second death triggered past grief.
- ▶ I had a death in my family.



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Risk Factors for Burn Out

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- The background features a dark green, textured illustration. On the left, a doctor with glasses and a stethoscope sits at a desk, looking stressed. On the right, a dog sits on the floor, looking thoughtful with a large thought bubble above its head containing a red heart. The overall theme is burnout in the medical profession.
- ▶ **High turnover at work**
 - ▶ **High employee absence**
 - ▶ **High stress caseload**
 - ▶ Supervisors don't respect employees
 - ▶ Poor moral
 - ▶ Low mutual staff support
 - ▶ Gossiping about clients
 - ▶ **Lived Experience**
 - ▶ **Low social support at home**
 - ▶ **Low levels of self acceptance**
 - ▶ **Perfectionism**
 - ▶ **Personal stresses**
 - ▶ **Poor self care**
 - ▶ **Low opportunities for training and advancement**
 - ▶ **Self esteem is enmeshed with work**
 - ▶ **Care giving at home**

Warning Signs

- ▶ Changes in behavior (Irritability, withdraw, lack of productivity, inability to concentrate.)
- ▶ Physiological Changes (weight, sleep, illness, fatigue)
- ▶ Changes in thinking (pessimism, self-blame, loss of direction)
- ▶ Other people notice changes



Burn Out & COVID-19

- ▶ Isolation / Lack of affection
- ▶ Increased care-giving roles
- ▶ Increased workloads
- ▶ Grief

- ▶ In dealing with those who are undergoing great suffering, if you feel “burnout” setting in, if you feel demoralized and exhausted, it is best for the sake of everyone to withdraw and restore yourself. The point is to have a long term perspective.

- ▶ Dalai Lama





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How I recovered

- ▶ Journaling
- ▶ Therapy
- ▶ Fabulous Fridays
- ▶ Stepped down from committees.
- ▶ External Supervision
- ▶ Ultimately I left the field

Healing ourselves!

Individual Level

- ▶ Doing Less
- ▶ Pursue Social Connections
- ▶ Reconnect to hobbies
- ▶ Exercise
- ▶ Attend to self-care
- ▶ Self Acceptance Therapy
- ▶ External Supervision



Organizational Tips (current world)



- ▶ Stop Rewarding Overworking
- ▶ Be supportive to staff with high stress case loads
- ▶ Be supportive to staff going through hardships.
- ▶ Clinical Supervision
- ▶ External Clinical Supervision
- ▶ Offer mind body workshops at work
- ▶ Have peer support round tables.
- ▶ Cover Therapy

Reimagined Burn Out Prevention



- ▶ Offer time off (sabbaticals, returns to school).
- ▶ Make it easy to switch staff to non-clinical roles.
- ▶ Offer more vacation time for workers with higher stress caseloads.
- ▶ Offer 3-4 day schedules to caregiver staff (ideally with full salary).
- ▶ Create a culture where emotions and burn out can be discussed without judgement.

Thank You!

- ▶ **The Resilient Practitioner-**
Thomas Skovholt
- ▶ **Unf*ck Your Brain: Using
Science to Get Over Anxiety**
– Faith G. Harper.
- ▶ **Not Working: Why We have
to Stop-** Josh Cohen
- ▶ **Effective Selfcare and
resilience in clinical practice
Dealing with Stress,
Compassion Fatigue, and
Burn out** Editor Sarah Parry

WE ARE STRONGER TOGETHER



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