

Strategies that healthcare professionals employ to address burnout resulting from providing care to individuals with substance use disorders

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20 September 2024



Burnout

The 3 defining characteristics of burnout



Feelings of energy depletion or exhaustion.



Increased mental distancing or feelings of negativism related to one's job/responsibilities.



A sense of ineffectiveness and lack of accomplishment.

Understanding Burnout

- In substance use treatment facilities, burnout is particularly prevalent due to the *challenging nature of the work*.
- **We often witness intense patient struggles** and *relapses, manage crises*, and *cope with the emotional demands* of providing support to *individuals with complex needs*.
- The *constant exposure to trauma* and *high-stress situations* makes treatment providers *particularly vulnerable to burnout*.

3 BURNOUT TYPES

WHICH ONE ARE YOU SUFFERING FROM?

1

UNDER-CHALLENGED TYPE

- ✓ Feels unstimulated
- ✓ Repetitive work
- ✓ Results in boredom
- ✓ Becomes indifferent



2

FRENETIC TYPE

- ✓ Works increasingly
- ✓ Shows ambition
- ✓ Tired by overload
- ✓ Wants success



3

WORN-OUT TYPE

- ✓ Overly stressed
- ✓ Gives up entirely
- ✓ Lack of control
- ✓ Feels neglected

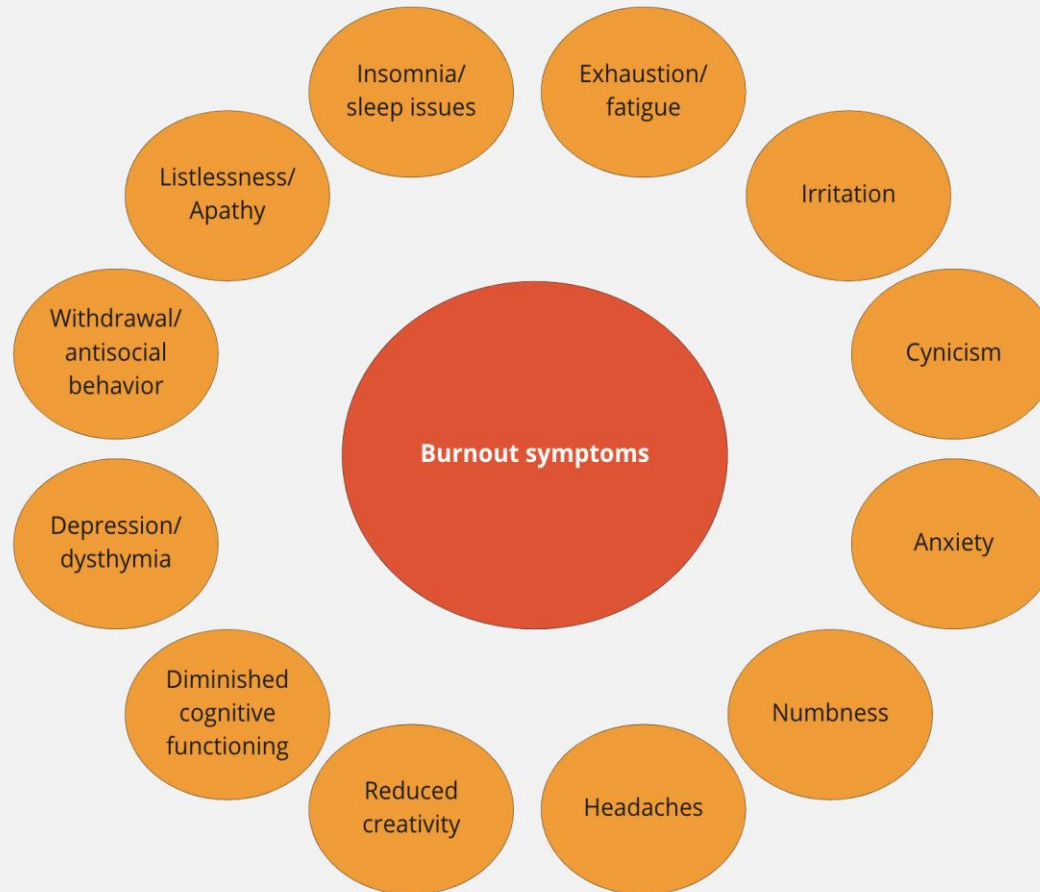


Stages of Burnout

5 stages of burnout

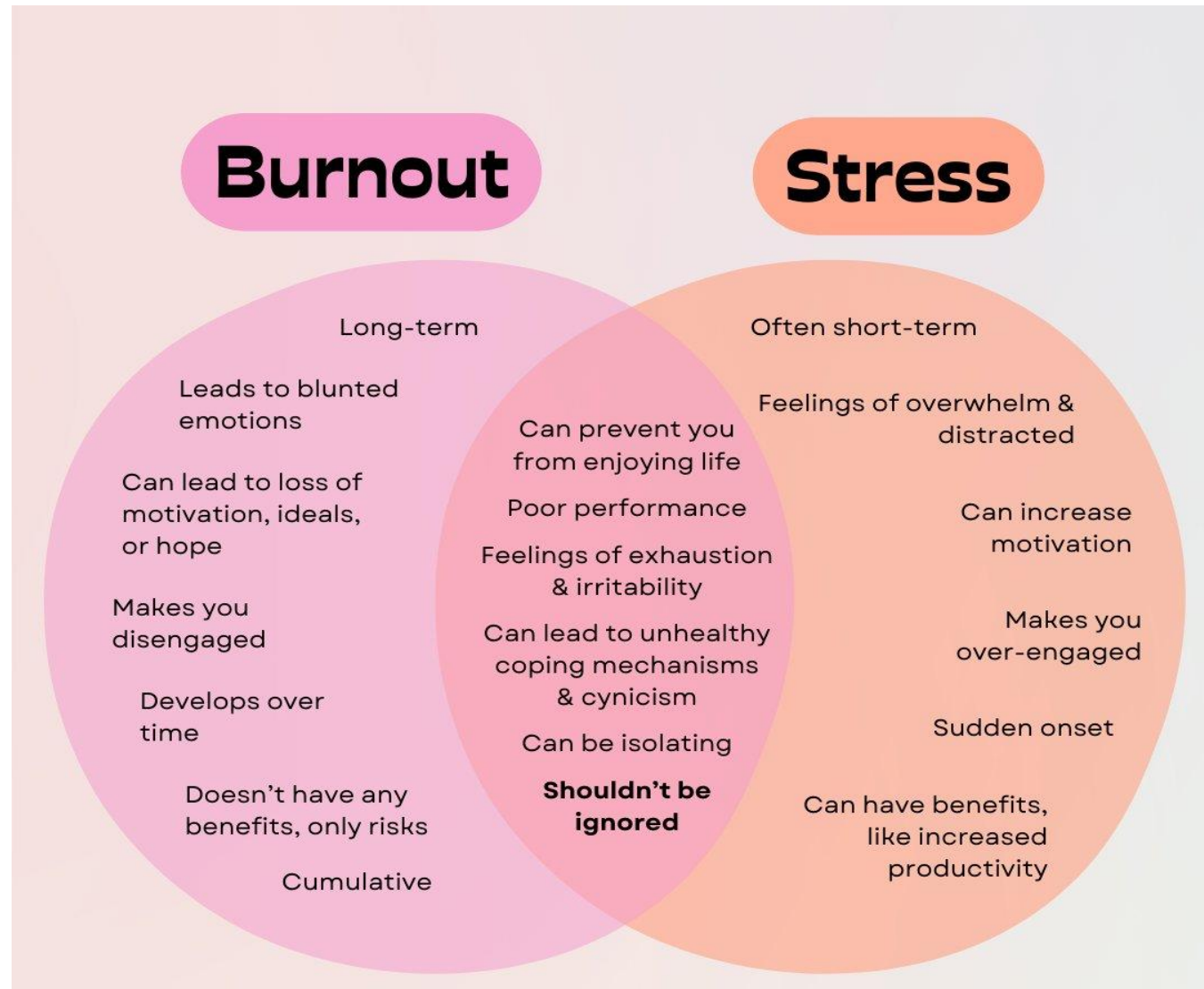


Symptoms of burnout

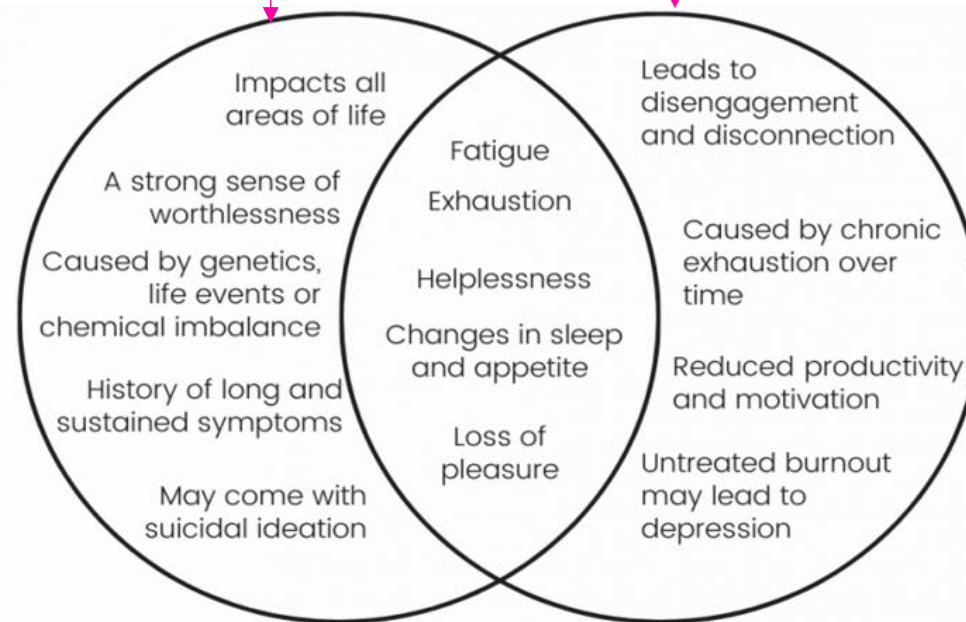


Burnout

Stress



Depression vs Burnout



Depression vs Burnout

- Burnout may mirror symptoms of depression, but **burnout is not a medical condition**. The World Health Organization (WHO) includes burnout in the 11th Revision of the International Classification of Diseases (ICD-11). **WHO defines it as an occupational phenomenon**.
- The American Psychiatric Association (APA) considers **burnout an experience rather than a diagnosis**. It is a result of prolonged interpersonal stressors at work.
- A critical difference between the two that can help people and professionals distinguish them is that **burnout is situation-specific** and often related to a person's **working environment**.
- In contrast, **depression can show up regardless of a person's circumstances and environment**.

Similarities between the client & burnt-out therapist

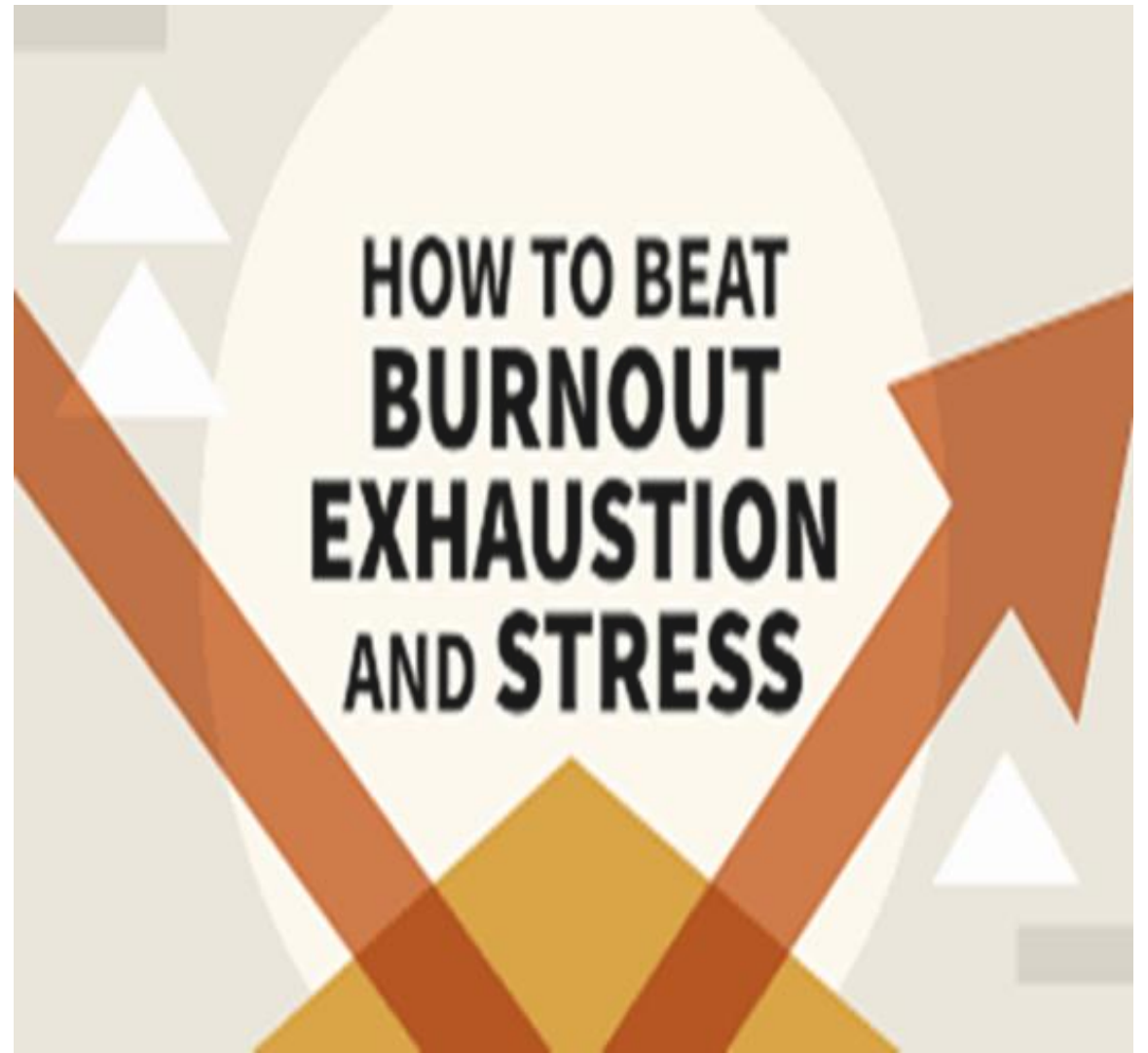
Client

- Grappling with mental health
- Co-occurring conditions
- Substance use
- Maladaptive coping skills
- Isolation
- Need help/intervention
- Treatment Plan
- Recovery

Therapist

- Grappling with mental health
- Co-occurring conditions
- Substance use (in some)
- Maladaptive coping skills
- Isolation
- Need help/intervention
- Treatment Plan
- Recovery

Strategies to Deal with Burnout



First Step



Effective Whole Health Care

Risk Factors



Individual Risk Factors for Burnout

- Research has shown that individuals with **a history of ACEs** are more likely to experience mental health issues, including depression, anxiety, and posttraumatic stress disorder (PTSD), which can **predispose them to burnout**. (Anda et al., 2006).
- For staff members with a history of ACEs, the **emotionally intense environment** of mental and behavioral health treatment can be particularly challenging, leading to quicker burnout.

Individual Risk Factors for Burnout

- Personal barriers such as **emotional triggers** and **compassion fatigue** can arise when the high-stress environment **reactivates past trauma**, leading to emotional distress and reduced effectiveness.
- **Continuous exposure to others' trauma** can further erode empathy and engagement.
- **Self-esteem and confidence issues**, such as **imposter syndrome** and **fear of vulnerability**, may also hinder staff from seeking support or sharing their experiences.

Individual Risk Factors for Burnout

- The **internal pressure** health care workers put on themselves to **see their patients improve**.
- Holding oneself to **unrealistic expectations** can trigger burnout and make workers less effective in their roles, impairing treatment for others who desperately need it.
- The problem with having unrealistic expectations is that providers **eventually lose the ability to be present**.

Individual Risk Factors for Burnout

- According to the Substance Abuse and Mental Health Services Administration (SAMHSA), **one in five** healthcare workers reported **experiencing stigma-related stress**, which exacerbates burnout.
- This stigma manifests in various ways, such as a **lack of understanding and support from; the broader healthcare community, your supervisors/colleagues and even judgment from friends and family.**
- These external pressures can make an already challenging job even more difficult, **leading to higher levels of stress and burnout among staff.**

Organisational Risk Factors

- **Lack of trauma-informed policies for staff**
- **Inadequate training of staff**
- **High workloads**
- **constant crisis management**
- **Internal stigma and lack of awareness within the organization regarding mental health and ACEs**
- **Limited funding and resources,**
- **Regulatory and bureaucratic constraints,**
- **Strict compliance**
- **Resistance to change**

- <https://www.enca.com/videos/discussion-health-workers-distress-may-be-fatal>

**How do you cope
with Burnout?**



Strategies to Cope

- Before we start, let's look at how you cope!

	APPROACH	AVOIDANT
PROBLEM FOCUSED	Directly dealing with the issue at hand: ----- Analyzing, AAR, reflection, communication, self-talk	Not dealing with issue at hand: ----- relying on something else to help manage stress response
EMOTION FOCUSED	Directly dealing with emotional responses: ----- Meditation, mindfulness, relaxation, breathing	Passively focusing on eliminating emotional responses: ----- Escape, avoidance, distracting oneself, vent
COGNITIVE FOCUSED	Positive appraisal of situation: ----- growth mindset, incorporating humor, job crafting	Negative appraisal of situation: ----- denial, distancing

Adaptive vs. Maladaptive coping

ADAPTIVE COPING

- **Confronting** problems directly
- Making **reasonably realistic appraisals** of problems
- **Recognizing and changing** unhealthy emotional reactions
- Trying to **prevent adverse effects on the body**

MALADAPTIVE COPING

- **Yes, it DOES WORK!**
- It reduces symptoms of **short-term** but maintains and even strengthens the original stressors
- **Not effective** in managing stressors therefore, the **“real problem” does not get solved**
- Maladaptive coping is what you **DO NOT WANT long-term** as this is what leads to burnout.

Proactive vs. Reactive Coping

- **Planning ahead** for circumstances that might derail you is called proactive coping.
- It refers to a set of processes through which people **detect potential stressors** and act in **advance** with adaptive coping strategies to prevent them or to mitigate their long-term impact.
 - Why to be proactive?
- When we are **under stress**, our **decision-making abilities deteriorate**.
- When we **plan** → we **more likely stick** with the planned adaptive coping.
- With **time**, **adaptive coping becomes automatic** to us.
- We **re-learn** the new habits of adaptive coping.

Managing stress

- Allows us to **maintain resilience** in the face of adversity, **prevent burnout**, and respond appropriately to the situation within your performance when it matters most.
- When you experience stress, look to **manage it appropriately letter by letter**.
- Stress-management starts when you **S.T.R.E.S.S.** your resilience!

S.T.R.E.S.S

S → **Self-awareness** is critical to knowing where you are at any given moment

T → **Time to reflect & process** is a key component of recovery after performing or after experiencing stressful situations.

R → **Regroup & Refocus** on growing, learning, and improving. When you are growing and learning, you are not burning out.

E → **Exercising** and refuelling properly, we “process” the stress hormones

S → **Sense of belonging** helps engaging appropriately to better manage stress collectively

S → **Strengthen your WHY!!!** Tuning-in to what matters and clarifying your **WHY** and your ultimate purpose and increase your perceptions of control within your environment

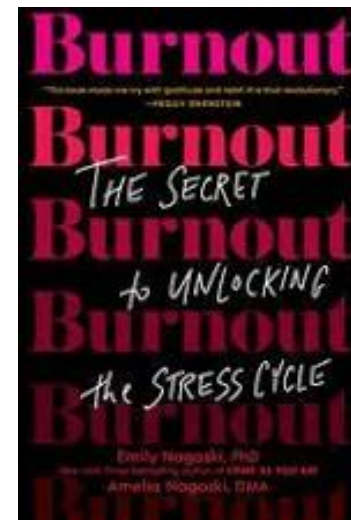
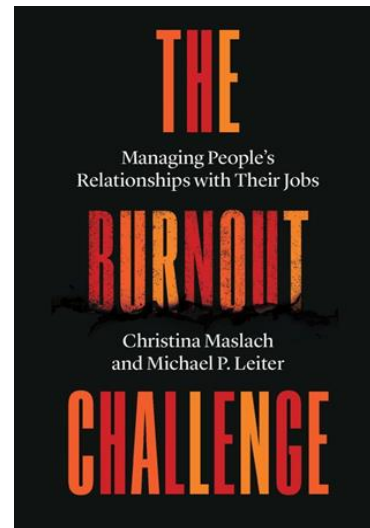


Calm your mind. Change your life.



Mental health is hard. Getting support doesn't have to be.

- Mental health apps
- Bibliotherapy



Mindfulness

- Helps to **create a space between you and what is going on** which then decreases being overly reactive.
- Leads to a **higher self-regulation** of thoughts, emotions, and behaviors linking to improved performance and increased well-being and health.
- Growing research shows that when you **train your brain to be mindful, you're actually physically restructuring your brain**. The main impact of mindfulness training is on the **amygdala** (the emotional part of the brain):
 - Compared to those who do not practice mindfulness regularly, the **amygdala is smaller among those who do practice regularly**.
 - **Strengthens the connection between your amygdala and other parts of the brain** that send the **calming response** back to amygdala, when triggered.
 - **As a result, your brain is shaped to be less reactive to any stimulus and your stress level decreases.**
 -

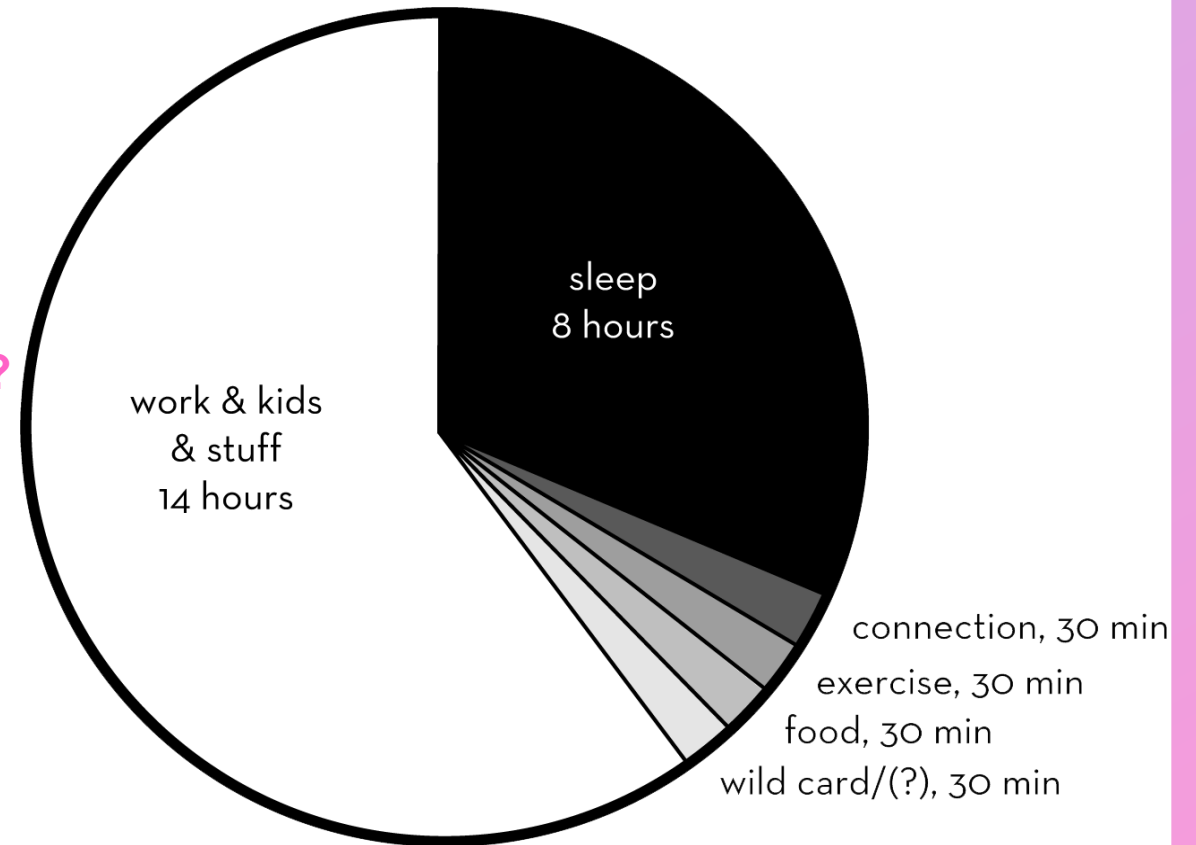
What is the 42% rule for burnout?

Work stress: how the 42% rule can cure burnout and anxiety

**Exactly how much rest is an “adequate” amount?
Science is pretty clear on the amount: it’s
42%.**

That's the percentage of time your body and brain need you to spend resting.

It's about 10 hours out of every 24.



How to control unrealistic expectations and internal pressure?

- There is a concept known as the “**self of the therapist,**” which recognizes that who we are as people ultimately plays a role in the kind of care we’re able to provide.
- It holds that therapists should be **emotionally healthy** themselves to best help clients, and that therapists would **benefit from working on and resolving their own personal problems.**
- Giving expertise, support, and guidance **from a place of emotional well-being and abundance** is more **effective** than **trying to help a client toward a goal you yourself have not reached.**

You can't give what you don't have.

So how do we build up the self of the therapist?

Self of the Therapist



- The self of the **therapist is the instrument** through which interventions and therapeutic models are provided to clients.
- If we think of the **therapist as the guitar** and **one or more strings are out of tune or missing**, the **therapist may not be fully effective**.
- The **self of the therapist** is important because therapists' **values, morals, relationships, competence, education, and training all influence** the procedure and **outcome of therapy**, just as strings on a guitar affect the quality of that instrument.
- Therapy is **effective not simply due to the use of theory and interventions**, but to a large part on **how the therapist uses himself or herself** to build a **therapeutic alliance** and facilitate hope in clients (e.g., Sprenkle & Blow, 2004).
- Thus, the **self of the therapist** is a **critical ingredient to the process of change** (PsycInfo Database Record (c) 2022 APA

A hand is shown writing the words "Journey to Recovery" in black marker on a glass surface. A red marker is used to draw a large, hand-drawn oval around the text. The background is a blurred outdoor scene with a bright light source, possibly the sun, creating a lens flare effect.

Journey
to Recovery

How long can burnout last?

- Recovery depends on several factors:
 - Including **how quickly you identify** and **start managing burnout**
 - The **changes** you make in your **work and personal life**
 - The **level of support** you receive.
 - The **duration of burnout** varies from **person to person**.
 - It can last for **weeks, months, or even longer**, especially if not addressed properly.
- *Taking consistent steps toward stress management be patient with yourself and understand that recovery takes time and self-care is key to recovery.*

Assessing Burnout

- The Maslach Burnout Inventory (MBI) assesses:
 - **Emotional Exhaustion**: feelings of being emotionally overextended and exhausted by work.
 - **Depersonalization**: unfeeling and impersonal responses toward patients.
 - **Personal Accomplishment**: feelings of competence and successful achievement in one's work with patients.

**Burnout Self-Test
Maslach Burnout Inventory (MBI)**

The Maslach Burnout Inventory (MBI) is the most commonly used tool to self-assess whether you might be at risk of burnout. To determine the risk of burnout, the MBI explores three components: exhaustion, depersonalization and personal achievement. While this tool may be useful, it must not be used as a scientific diagnostic technique, regardless of the results. The objective is simply to make you aware that anyone may be at risk of burnout.

For each question, indicate the score that corresponds to your response. Add up your score for each section and compare your results with the scoring results interpretation at the bottom of this document.

Questions	Never	A few times per year	Once a month	A few times per month	Once a week	A few times per week	Every day
SECTION A	0	1	2	3	4	5	6
I feel emotionally drained by my work.							
Working with people all day long requires a great deal of effort.							
I feel like my work is breaking me down.							
I feel frustrated by my work.							
I feel I work too hard at my job.							
It stresses me too much to work in direct contact with people.							
I feel like I'm at the end of my rope.							
Total score – SECTION A							

Questions	Never	A few times per year	Once a month	A few times per month	Once a week	A few times per week	Every day
SECTION B	0	1	2	3	4	5	6
I feel I look after certain patients/clients impersonally, as if they are objects.							
I feel tired when I get up in the morning and have to face another day at work.							
I have the impression that my patients/clients make me responsible for some of their problems.							
I am at the end of my patience at the end of my work day.							
I really don't care about what happens to some of my patients/clients.							
I have become more insensitive to people since I've been working.							
I'm afraid that this job is making me uncaring.							
Total score – SECTION B							

Individual Optimal recovery - Recovery as a performance

- Recovery is the ability to return to **a normal state of health and strength** within our body and mind.
- With **recovery optimization**, we get to that **ready state quicker and easier**, which matters especially when we face **stress or excessive spend of energy on a regular basis**.
- A main **contributory factor** to the quality of **recovery** is our **moment-to-moment physiological state** which is directly influenced by our **Autonomic Nervous System (ANS)**.
- The **ANS** sends **signals** through hormones to our body to either **perform or recover**.
- Unfortunately, it is fairly **hard to do both at the same time**.
- When the **body and mind** are in the **performance mode**, they **minimize the recovery processes**, whereas when the body and mind are in the **recovery state**, they are **not in the mode to perform optimally**.

Some final thoughts.....

- It's also **important to fully integrate** and understand the **things we learn from our experiences**.
- If we are **not spending time** to digest and **come to terms with things**, we'll end up **leaping from task to task**, never really learning, and **falling victim to the frenetic pace of clinical workloads**.
- In **therapy**, we talk about the **importance of processing** or deeply thinking through an **issue to learn from it and improve**.
- The **same process applies** to the **therapist** to make progress, we have to integrate the new information we gain from our clients and cases.
- **Setting aside time to think about the problems we've encountered in our personal lives**, and how we've **navigated and overcome them**, **nourishes us** and makes us **more resilient to burnout in our professional lives**.

Some final thoughts.....



The irony is not lost on anyone that the way out of burnout is to move yourself to the top of your list - a task that feels impossible to do.



So perhaps if you tell yourself, you are doing it for your patients/clients, it won't feel like you are failing them, and you will feel the effects yourself

Some final
thoughts.....

**SELF-CARE AS AN
ETHICAL
PRIORITY**