



MHPSS SOP

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DETAILS	REVIEWED BY	APPROVED BY
Name	Board Members	Rosemary Hua. N.
Title	TONGU, PAUL Josephine	BOT CHAIRPERSON
Signature/Date	Grace Magaji Magaji Josephine Hua	<i>[Signature]</i> 1/10/2021

**CLINICAL AND ORGANIZATIONAL
PERSPECTIVES IN HANDLING BURNOUT AT WORKPLACE(JDF)**

STAGES, SIGNS AND SYMPTOMS,

CAUSES, RISK FACTORS,

MANAGEMENT,

COPING STRATEGIES AND PREVENTION FOR JDF STAFF

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OVERVIEW

This document is primarily designed to identify some psychological hazard realities at work place. The purpose is to address some known factors that are part and parcel of organizational setting and if understood and principles applied, would position workers to effectively and efficiently make the work setting workable, manageable, favorable and achievable with targeted goals. This document is a product of combined views of scholars from the field of psychology and philosophy. References might be included for purpose of legality.

INTRODUCTION

For many years, burnout has been recognized as an occupational hazard for various people-oriented professions, such as the humanitarian services, education, and health care. This hazard has been associated with mental health problems such as depression, anxiety, and stress. Specifically, work exhaustion, occupational stress, and job burnout can have significant negative effects. These effects if not properly handled or managed would go a long way to affect not only the human resources but also the productivity or output. For organization to exist with optimal performance, a balance need to be set and that is why this manual is in place to address theory and practicality of the enemy of productivity at work place. Health they said is wealth, the healthier we are physically, socially, and most importantly psychologically, determines the extent of healthy operations within the organizational setting. Hazard like burnout which gives birth to stress, anxiety or depression can directly or indirectly affects both human and capital development but the good news is, it can be curtailed or completely managed if given priority.

What is Burnout?

Burnout is a psychological syndrome emerging as a prolonged response to chronic interpersonal stressors on the job. It 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.

Burnout reduces productivity in an organization and saps your energy, leaving you feeling increasingly helpless, hopeless, cynical, and resentful. Eventually, you may feel like you have nothing more to give.

The negative effects of burnout spill over into every area of life—including your home, work, and social life. Burnout is experienced at different level; the severity nature of it is based on how one is been exposed to it.

THE 5 STAGES OF BURNOUT

1. *HONEYMOON PHASE*

When people undertake a new task, they often start by experiencing high job satisfaction, commitment, energy, and creativity. This is especially true of a new job role, or the beginnings of a business venture.

In this first phase of burnout, you may begin to experience predicted stresses of the initiative you're undertaking, so it's important to start implementing positive coping strategies, such as taking practical steps to support your wellbeing alongside your professional ventures.

The theory is that if we create good coping strategies at this stage, we can continue in the honeymoon phase indefinitely.

Common symptoms include:

- Job satisfaction
- Readily accepting responsibility
- Sustained energy levels
- Unbridled optimism
- Commitment to the job at hand
- Compulsion to prove oneself
- Free-flowing creativity
- High productivity levels

2. *ONSET OF STRESS*

The second stage of burnout begins with an awareness of some days being more difficult than others. You may find your optimism waning, as well as notice common stress symptoms affecting you physically, mentally, or emotionally.

Common symptoms include:

- High blood pressure
- Inability to focus
- Irritability
- Job dissatisfaction
- Lack of sleep or reduced sleep quality
- Lack of social interaction
- Lower productivity
- Unusual heart rhythms
- Anxiety
- Avoidance of decision making

- Change in appetite or diet
- Fatigue
- Forgetfulness
- General neglect of personal needs
- Grinding your teeth at night
- Headaches
- Heart palpitations

3. CHRONIC STRESS

The third stage of burnout is chronic stress. This is a marked change in your stress levels, going from motivation, to experiencing stress on an incredibly frequent basis. You may also experience more intense symptoms than those of stage two.

Common symptoms include:

- Lack of hobbies
- Missed work deadlines and/or targets
- Persistent tiredness in the mornings
- Physical illness
- Procrastination at work and at home
- Repeated lateness for work
- Resentfulness
- Social withdrawal from friends and/or family
- Uptake of escapist activities
- Anger or aggressive behavior

- Apathy
- Chronic exhaustion
- Cynical attitude
- Decreased sexual desire
- Denial of problems at work or at home
- Feeling threatened or panicked
- Feeling pressured or out of control
- Increased alcohol/drug consumption
- Increased caffeine consumption

4. *BURNOUT*

Entering stage four is burnout itself, where symptoms become critical. Continuing as normal is often not possible in this state as it becomes increasingly difficult to cope. We all have our own unique limits of tolerance, and it's key that you seek intervention at this stage (for clinical issues, please seek the help of a professional).

Common symptoms include:

- Development of an escapist mentality
- Feeling empty inside
- Obsession over problems at work or in life
- Pessimistic outlook on work and life
- Physical symptoms intensify and/or increase
- Self-doubt
- Social isolation

- Behavioural changes
- Chronic headaches
- Chronic stomach or bowel problems
- Complete neglect of personal needs
- Continuation or increase in escapist activities
- Desire to "drop out" of society
- Desire to move away from work or friends/family

5. HABITUAL BURNOUT

The final stage of burnout is habitual burnout. This means that the symptoms of burnout are so embedded in your life that you are likely to experience a significant ongoing mental, physical or emotional problem, as opposed to occasionally experiencing stress or burnout.

Common symptoms include:

- Chronic sadness
- Depression
- Burnout syndrome
- Chronic mental fatigue
- Chronic physical fatigue

SIGNS AND SYMPTOM OF BURNOUT

Burnout comes with different signs and symptoms as seen in the 5 stages, these symptoms are classified as physical, emotional and behavioral symptoms

PHYSICAL SIGNS AND SYMPTOMS OF BURNOUT

- ❖ Feeling tired and drained most of the time
- ❖ Frequent headaches or muscle pain.
- ❖ Lowered immunity, frequent illnesses.
- ❖ Change in appetite or sleep habits.

EMOTIONAL SIGNS AND SYMPTOMS OF BURNOUT

- ❖ Sense of failure and self-doubt
- ❖ Loss of motivation.
- ❖ Feeling helpless, trapped, and defeated.
- ❖ Increasingly cynical and negative outlook.
- ❖ Detachment, feeling alone in the world.
- ❖ Decreased satisfaction and sense of accomplishment.

BEHAVIOURAL SIGNS AND SYMPTOMS OF BURNOUT

- ❖ Withdrawing from responsibilities
- ❖ Using food, drugs, or alcohol to cope.
- ❖ Isolating yourself from others.
- ❖ Taking out your frustrations on others.
- ❖ Procrastinating, taking longer to get things done.
- ❖ Skipping work or coming in late and leaving early.

CAUSES OF BURNOUT

If we can better understand what causes burnout, we can detect it before it unfolds into complete mental and physical collapse. This means learning how to recognize an early phase

symptom like “workaholism” for what it is, before it blossoms into a crisis. Causes of burnout can appear at all three levels:

Individual level Causes

But burnout is not caused solely by stressful work or too many responsibilities. Other factors contribute to burnout, including your lifestyle and personality traits. In fact, what you do in your downtime and how you look at the world can play just as big of a role in causing overwhelming stress as work or home demands. Personality factors such as;

- Personal predispositions and character, such as perfectionism, and positive affect
- Pessimistic view of yourself and the world.
- The need to be in control; reluctance to delegate to others.
- High-achieving, Type A personality.
- Neurotic of Big Five personality trait
- Personal situations, such as the stress we experience, the support networks we have created for ourselves, or the type of job we are in, poor self esteem.
- Personal coping and regulation mechanisms, such as how well we are able to self-regulate our emotions and process them (i.e, external locus of control (maladaptive coping styles).
- Not getting enough sleep.

Burnout comes from a **mismatch** between the person and the job. For instance, one employee might not mind being left out of decisions, while another finds it unacceptable. Some thrive under intense pressure while others wither. These are personality related.

Team-Level Causes

- Underlying team structures, such as the size of the team, how they collaborate, and how they get things done
- Atmosphere created within the team, such as the degree to which people communicate openly and are able to take risks
- Working too much, without enough time for socializing or relaxing
- Lack of close, supportive relationships
- Taking on too many responsibilities, without enough help from others.

Organizational level Causes

- Level of transparency in the organization, such as how readily leadership shares salient information with employees
- Organizational structures, such as vacation time and other benefits and role clarity
- Feeling like you have little or no control over your work.
- Lack of recognition or reward for good work (promotion, salary increase or allowances etc).
- Unclear or overly demanding job expectations.
- Doing work that's monotonous or unchallenging.
- Working in a chaotic or high-pressure environment.

SIX RISK FACTORS THAT CAUSE BURNOUT

These six job characteristics contribute to burnout:

1. **Workload.** Too much or the wrong kind of work. How sustainable your level of work is over time.

2. **Perceived lack of control.** No authority to do what's needed to reach work goals. How much autonomy you have and whether you can choose which projects you work on. The less control you have over your work, the more likely you are to burn out.
3. **Reward.** Inadequate rewards in terms of money, recognition, or job satisfaction. If the extrinsic and intrinsic rewards for your job don't match the amount of effort and time put in to them, then you are likely to feel like the investment is not worth the payoff.
4. **Community.** Isolation or frequent conflict with coworkers. The stronger your relationship at work and more supported you feel, the less likely you to burn out.
5. **Fairness.** Pay inequality, cheating, favoritism, or disrespect.
6. **Values.** Unethical work or conflicting work goals. Ambiguity.
7. Promotion into a role that exposes your weakness

MULTIDIMENSIONAL THEORY OF BURNOUT

Maslach (1982) later defined burnout as a psychological syndrome involving emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment that occurred among various professionals who work with other people in challenging situations. Within the field-dominating, multidimensional theory of burnout, is viewed as a work-specific condition. As a consequence, the burnout syndrome cannot be investigated outside of the occupational domain. Regardless of the specific form, a multidimensional model has some important implications for interventions. First, it underscores the variety of psychological reactions to a job that different employees can experience. This multidimensional approach also implies that interventions to reduce burnout should be planned and designed in terms of the particular component of burnout that needs to be addressed. That is, it may be more effective to consider how to reduce likelihood of emotional

exhaustion, or to prevent the tendency to depersonalize, or to enhance one's sense of accomplishment, rather than to use a more general stress reduction approach.

MANAGEMENT/TREATMENT OF BURNOUT

Various burnout treatment protocols have been described in the literature (Hamming, 2020; Van Dam et al., 2017; Van Dam, Keijsers, Verbraak, Eling, & Becker, 2015). These protocols have in common that they are aimed at restoring a healthy balance between effort and rest, recovery from chronic stress, and improving coping skills. Different phases can be distinguished in the treatment of clinical burnout:

(1) Crisis

(2) Recovery, and

(3) Prevention (Hamming, 2020; Van Dam, Keijsers, Kriens, Boelaars, & Vossen, 2017; Van Dam, Keijsers, Verbraak, Eling, & Becker, 2015).

Phases in the treatment of clinical burnout

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Phase 1 Crisis

The first phase of the treatment is characterized by crisis (Van Dam, Keijsers, Kriens, Boelaars, & Vossen, 2017; Van Dam, Keijsers, Verbraak, Eling, & Becker, 2015). Despite severe fatigue and distress, the individual tries to fulfill all obligations at work and in private life and notices that (s)he makes many mistakes, is unable to concentrate, is emotionally unstable and prone to conflicts. It may also be that the individual feels so severely fatigued that he feels unable to do anything and finds himself staring and doing nothing most of the time. The

individual feels despair and hopes the therapist can do something that makes him/her able to again fulfill all obligations at work and in private life.

In this first phase, it is necessary that the therapist is empathic to the feelings of the patient but also honest and straightforward regarding the possibilities of quick recovery (Van Dam, Keijsers, Kriens, Boelaars, & Vossen, 2017; Van Dam, Keijsers, Verbraak, Eling,

& Becker, 2015). The therapist makes it clear to the patient that clinical/organizational burnout is the result of prolonged periods of stress and that there are no quick tricks or solutions. The balance between stress and restoration has to change and the body needs to recover and find a healthy balance again. And this takes time. The first thing to do now is to make recovery possible and to create time and opportunities to take a good look at the situation (Van Dam, Keijsers, Kriens, Boelaars, & Vossen, 2017). This can be done by dropping almost all responsibilities for the next few weeks. For many patients, this is very difficult to accomplish because of strong feelings of responsibility and feeling uneasy about bothering others. Indecisiveness may also be fuelled by cognitive impairments. Because higher cognitive processes such as executive functioning are impaired, patients may experience difficulty getting an overview of their situation and diminished problem-solving capabilities. It is recommendable, in this phase of the treatment that the therapist takes the lead and actively helps the patient to find solutions and if necessary, communicates with the social network about the measures being taken.

Phase 2: Recovery of the stress system

The main purpose of the second phase is recovery of the stress system. Homeostatic stress values need to return to normal levels. Therefore, it is important that stress is reduced. In the first phase of the treatment, sources of stress are drastically reduced by skipping social

obligations and avoiding work and household chores that are found to be triggers. In the second phase, individuals will resume activities gradually. The relative distress an activity causes is registered, and the therapist advises the client to start with nonwork activities that cause little stress for limited duration – alternated with rest or relaxing activities. It is essential that the individual will be able again to switch from arousal to rest.

Therefore, the therapist and patient make schemes in which activity and rest are alternated. Only if the patient feels recovered after two hours rest, the number and duration of activities can be extended. In the course of phase 2, reintegration to work should start gradually. The pace at which reintegration can take place must be geared to the degree of recovery. It is wise to involve the employer in this process and explain how the recovery will proceed and what can be expected regarding task performance. This also depends on the extent to which the employer is willing to take into account the limitations of the patient during the recovery process.

A healthy lifestyle needs to be promoted because it is beneficial for recovery. Healthy food, alcohol in moderation, moderate exercise and especially a healthy sleep pattern are essential for recovery. Another problem that needs attention in this phase is that ignoring signals of the body like fatigue and stress has become a habit or lifestyle for many burnout patients. The strong ability to persevere and postpone need gratification makes that they are less tuned to signals of their body and tend to choose their actions on basis on what they think that they should do and not on what they feel. Relaxation exercises, meditation and mindfulness exercises can be helpful to become more receptive to signals of the body again.

During this phase, which lasts several months, the patient will become less fatigued and will be motivated and able again to perform tasks. For a part of the patients, the cognitive impairments

seem to decrease in a slower pace than the other symptoms. This should be taken into account when someone reintegrates into the work. The duration with which someone can perform complex cognitive tasks is limited and should therefore be alternated with other tasks.

In the second phase, it is also important not to do a number of things because it will hinder recovery. First, it is inadvisable to start psychotherapy. Psychotherapy may be emotionally demanding and stressful and therefore hinders recovery from chronic stress. In addition, due to the chronic stress, there may be pseudopsychopathology (Van Dam, Keijsers, Verbraak, Eling, & Becker, 2015). This will disappear by itself when someone recovers. For the same reasons, no assessment or psychological testing should take place at this stage. As a result of the chronic stress, people will score less intelligent and more disturbed on the tests than they actually are.

Many burnout patients experience relational problems because family members experience that the burnout patient is often irritable and reluctant to engage in social activities. It is helpful to involve partners or family members in the treatment to provide explanations and advice on how to deal with the symptoms. However, focusing on the relational problems would only increase the stress and be unnecessary because the relational problems will probably disappear once the patient has recovered.

In order to be able to properly estimate whether complaints are the cause or consequence of the chronic stress, it is best to ask family and acquaintances how the patient's functioning was before the chronic stress episode. Another point of attention is that in an attempt to solve the problematic situation, people may take drastic decisions like changing jobs, divorce or emigration. This is seldomly a good idea in this phase because of the efforts it requires to adapt

oneself to a new (work) environment while being already exhausted and experiencing difficulties in cognitive control.

Phase 3 Prevention, learning from the past

In the third and final phase, the patient is almost fully recovered, and the time has come to explore the reasons why someone ended up with burnout. Knowledge about factors that contributed to the burnout may help to prevent that a person will go through years of chronic stress again. Research shows that fifty percent of the individuals who returned to work after burnout had a relapse in burnout within two and a half year. Six percent of the individuals who received a structured workplace-oriented intervention had more than two relapses compared to fourteen percent of the individuals who did not receive the intervention.

Factors that may influence vulnerability to burnout are circumstances, coping, and dysfunctional thought patterns.

-Circumstances: Circumstances may lead to chronic stress reactions when there are not enough possibilities for recovery. In some cases, people have very limited influence on conditions that cause stress (Bakker & de Vries, 2021; DeLongis & Holtzman, 2005; Sapolsky, 1998). You can think of a combination of a bad atmosphere at work in combination with caring for a sick family member. The therapist and the burnout patient can take a look at whether it had been possible to deal with the situation differently by asking for more social support or setting limits.

Coping /Intervention Strategies

An effective way of dealing with problems is to make far-reaching but necessary decisions. This is something that many people find difficult to do. It may be the case, for example, that due to

changes at work, someone no longer really likes his work that much, but does not want to admit it to himself or is not fully aware of it. The same process may also play a role in private life. Some people appear not to be our best friends when we take a closer look. Another dilemma may occur when someone has made a career change and would experience it as a failure to recognize that this job does not suit him and go back in social status and salary. It is essential that a therapist confronts clients with a mismatch between desires and possibilities and also helps them make painful but necessary decisions. Improving coping skills may also comprise learning new ways to solve problems, social skill training, time management and job crafting (Keijsers et al., 2004; Van Dam et al., 2017).

The personal and organizational costs of burnout have led to proposals for various intervention strategies. Some try to treat burnout after it has occurred, while others focus on how to prevent burnout by promoting engagement. Intervention may occur on the level of the individual, workgroup, or an entire organization. In general, the primary emphasis has been on individual strategies, rather than social or organizational ones, despite the research evidence for the primary role of situational factors.

Many of these individual strategies have been adapted from other work done on stress, coping, and health. The most common recommendations have included:

a) changing work patterns (e.g., working less, taking more breaks, avoiding overtime work, balancing work with the rest of one's life);

b) developing coping skills (e.g., cognitive restructuring; a therapeutic techniques that help people notice and change their negative patterns. When used for stress management or burnout in this case, the goal is to replace stress-producing thoughts (cognitive distortions) with more balanced thoughts that do not produce stress), conflict resolution, time management);

- c) obtaining social support (being helped or cared for in various ways both from colleagues and family);
- d) utilizing relaxation strategies (mindfulness meditation, deep breathing, music etc);
- e) promoting good health and fitness; and
- f) developing a better self-understanding (via various self-analytic techniques, counseling, or therapy).

Initiatives to moderate workload demands complemented by improvements in recovery strategies through better sleep, exercise, and nutrition have direct relevance to the exhaustion component of burnout. Cynicism, in contrast, pertains more directly to a sense of community or to the congruence of personal and workplace values. For example, an intervention that improved workplace civility among health care providers showed that cynicism declined as a function of improved civility, and that this change was sustained at a one-year follow-up assessment. A sense of efficacy, in contrast, could be more responsive to improvements in the forms of recognition from colleagues and leaders within an organization or the profession. An alternative proposal has been that people can make various changes in how they do their job (a process known as “job crafting”), and that such job alterations could lead to less burnout

DEALING WITH BURNOUT REQUIRES THE “THREE R” APPROACH:

Recognize. Watch for the warning signs of burnout.

Reverse. Undo the damage by seeking support and managing stress.

Resilience. Build your resilience to stress by taking care of your physical and emotional health.

Others include:

Take time off. If burnout seems inevitable, try to take a complete break from work. Go on vacation, use up your sick days, ask for a temporary leave-of-absence, anything to remove yourself from the situation. Use the time away to recharge your batteries and pursue other methods of recovery.

Set boundaries. Don't overextend yourself. Learn how to say "no" to requests on your time. If you find this difficult, remind yourself that saying "no" allows you to say "yes" to the commitments you want to make.

Take a daily break from technology. Set a time each day when you completely disconnect. Put away your laptop, turn off your phone, and stop checking email or social media.

Set aside relaxation time. Relaxation techniques such as yoga, meditation, and deep breathing activate the body's relaxation response, a state of restfulness that is the opposite of the stress response.

Get plenty of sleep. Feeling tired can exacerbate burnout by causing you to think irrationally. Keep your cool in stressful situations by getting a good night's sleep.

Make exercise a priority

Even though it may be the last thing you feel like doing when you're burned out, exercise is a powerful antidote to stress and burnout. It's also something you can do right now to boost your mood.

Aim to exercise for 30 minutes or more per day or break that up into short, 10-minute bursts of activity. A 10-minute walk can improve your mood for two hours. Rhythmic exercise, where you move both your arms and legs, is a hugely effective way to lift your mood, increase energy,

sharpen focus, and relax both the mind and body. Try walking, running, weight training, swimming, martial arts, or even dancing.

To maximize stress relief, instead of continuing to focus on your thoughts, focus on your body and how it feels as you move: the sensation of your feet hitting the ground, for example, or the wind on your skin.

Support your mood and energy levels with a healthy diet

What you put in your body can have a huge impact on your mood and energy levels throughout the day.

Minimize sugar and refined carbs. You may crave sugary snacks or comfort foods such as pasta or French fries, but these high-carbohydrate foods quickly lead to a crash in mood and energy.

Reduce your high intake of foods that can adversely affect your mood, such as caffeine, unhealthy fats, and foods with chemical preservatives or hormones.

Eat more Omega-3 fatty acids to give your mood a boost.

The best sources are fatty fish (salmon, herring, mackerel, anchovies, sardines), seaweed, flaxseed, and walnuts.

Avoid nicotine. Smoking when you're feeling stressed may seem calming, but nicotine is a powerful stimulant, leading to higher, not lower, levels of anxiety.

Drink alcohol in moderation. Alcohol temporarily reduces worry, but too much can cause anxiety as it wears off.

Meditation practice may help fight burnout. Meditators build skills at letting go of persistent negative and intrusive thoughts. That makes them resilient against exhaustion and cynicism.

Fight Perfectionism

Are you a perfectionist? Studies show perfectionism has two sides. People who set high personal achievement standards show lower rates of burnout. But fear-based perfectionism is linked to higher burnout.

Relate with other Individuals

When you're burned out, problems seem insurmountable, everything looks bleak, and it's difficult to muster up the energy to care, let alone take action to help yourself. But you have a lot more control over stress than you may think. There are positive steps you can take to deal with overwhelming stress and get your life back into balance. One of the most effective is to reach out to others. Social contact is nature's antidote to stress and talking face to face with a good listener is one of the fastest ways to calm your nervous system and relieve stress. The person you talk to doesn't have to be able to "fix" your stressors; they just have to be a good listener, someone who'll listen attentively without becoming distracted or expressing judgment.

Reach out to those closest to you, such as your partner, family, and friends. Opening up won't make you a burden to others. In fact, most friends and loved ones will be flattered that you trust them enough to confide in them, and it will only strengthen your friendship. Try not to think about what's burning you out and make the time you spend with loved ones positive and enjoyable.

Be more sociable with your coworkers. Developing friendships with people you work with can help buffer you from job burnout. When you take a break, for example, instead of directing your attention to your smartphone, try engaging your colleagues. Or schedule social events together after work.

Limit your contact with negative people. Hanging out with negative-minded people who do nothing but complain will only drag down your mood and outlook. If you have to work with a negative person, try to limit the amount of time you spend together.

Connect with a cause or a community group that is personally meaningful to you. Joining a religious, social, or support group can give you a place to talk to like-minded people about how to deal with daily stress—and to make new friends. If your line of work has a professional association, you can attend meetings and interact with others coping with the same workplace demands.

Find new friends. If you don't feel that you have anyone to turn to, it's never too late to build new friendships and expand your social network.

Try to find some value in your work. Even in some mundane jobs, you can often focus on how your role helps others, for example, or provides a much-needed product or service. Focus on aspects of the job that you do enjoy, even if it's just chatting with your coworkers at lunch. Changing your attitude towards your job can help you regain a sense of purpose and control.

Find balance in your life. If you hate your job, look for meaning and satisfaction elsewhere in your life: in your family, friends, hobbies, or voluntary work. Focus on the parts of your life that bring you joy.

Make friends at work. Having strong ties in the workplace can help reduce monotony and counter the effects of burnout. Having friends to chat and joke with during the day can help relieve stress from an unfulfilling or demanding job, improve your job performance, or simply get you through a rough day.

HOW TO CREATE A BURNOUT SHIELD

While it may be frustrating to know that more meditation won't necessarily save individuals from burnout, there *are* organization-level strategies that companies can take up to safeguard their greatest resources, their people. Programs that are directed at individuals can have an impact, but only for about six months or so. But when the intervention targets the organization (e.g. task restructuring, evaluation changes, supervision shifts impacting job demand, and ability to influence decision-making) the impact lasted up to a year. When the personal and organizational are combined the impact is longer and stronger. But it is critical to realize that burnout work can't be done as a one-off; it needs to be a constant effort over time.

1. Examining Managerial Behavior: Research shows that bad relationships with direct managers account for 75 percent of turnover. Too often, managers are incentivized to focus on short-term productivity metrics and are not trained to understand what is needed for sustainable individual and team performance. Extensive research by the military on sustainable performance in stressful conditions teaches that leaders should become champions of health, rather than taskmasters that drive teams and organizations to burnout.

2. Upholding Fairness and Transparency. There are some interesting pieces of research on the fact that even monkeys value fairness. We are wired this way. As a result, when promotions are distributed unfairly, it contributes to burnout. This is especially true for groups that experience bias and micro aggressions daily, who see themselves, and people who look like them, sidelined from advancement in the organization. People need coherence, purpose, and fairness to be healthy. Managers must understand that the behavior they model and the way they distribute work steers their team toward health or dysfunction and determines the ensuing human and organizational cost.

3. The Role of Health Intrepreneurs. Health intrapreneurs are essentially educated champions (often self-designated) who take a leading role in building sustainable workplaces, a strategic

component of their role and their company's edge. Health intrapreneurs understand the interplay between the workplace and its impact on employee health and vice versa. From an organizational perspective, health intrapreneurs support engagement and retention, both key bottom line metrics across sectors. The steps toward becoming a powerful team health intrapreneur in an organization often include intrinsic interest in the subject, early adoption of best practices, and experimentation with ways to enlist employees in the vision of creating energizing workplaces. Intrapreneurs, or health champions, are leaders (often self-designated) who spark social innovation within their companies. They can affect change in an incredibly powerful way because they are close to the problem and can recruit agents of change such as managers and team leads into their efforts.

4. Focusing on the Four Pillars of Team Resilience. The four pillars are designed to instruct organizations on how they can begin to make lasting change at the cultural and organizational level, rather than putting the burden on individuals alone. These four keystone components are critical to moving toward a culture that's more protected from burnout and its resulting churn.

The four pillars of Team Resilience are:

- **Self-Awareness.** Teaching individuals to know their triggers, needs, and their sense of purpose. Ensuring that within teams there is enough vulnerability for people to share what they see as their purpose, strengths, and values is essential.
- **Autonomy.** Team members must have an appropriate balance of autonomy and support in the work they do.
- **Structured R&R.** The team needs guard-rails on intensity and quantity of work. Managers need to ensure workloads are evenly distributed, and that time for rest is protected and even encouraged.

- **Community.** For burnout to be truly guarded against, team members need to feel a sense of community, collaboration, loyalty, tolerance, and psychological safety.

CONCLUSION/RECOMMENDATIONS

Some levels of anxiety is necessary for job to be done, anxiety becomes a problem when it interferes with our functioning. Humans have flesh and blood, as living organism, considerable level of fatigue is normal. For the purpose of this research, the researcher recommends as follow:

1. For early detection, coping and management of perceived burnout, anxiety and depression at workplace, staff should be given the opportunity to take psychological test at least twice times a year.
2. Since burnout is not caused at individual level alone, triggers of burnout as pointed out in at team and organizational level in this research should be given priority.
3. Periodic assessment of staff's health especially mental health should be looked into through the service of professional.
4. Task should be assigned based on capacity and resources at disposal.
5. Selection, placement should be based on expertise, skills, competence, knowledge and experience.
6. Principles of reward, reinforcement should be fully incorporated.
7. Situation warranting workload, overtime, role conflict and multiple tasks at a time should be reviewed properly.

8. Principles of “Work and Rest” should be a practice. Even God, as mighty as He is, rested after completion of task and this continued for six days and the seventh day was a complete off. God resting for which work? Talking job. People should rest on the completion of a given task and go off at least once in a week.

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