

Prioritize, Optimize, and Sustain Your Well-Being

Evidence-Based Strategies to Protect Against Burnout



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Fan Darong (1954)
Movie Screening
MFA Boston

“I’ve been absolutely terrified every moment of my life, but I’ve never let it stop me from doing a single thing I’ve wanted to do...”

Georgia O’Keeffe



Is burnout 'inevitable' within
today's Age of Anxiety + level of
acuity?

How can protective factors be leveraged to optimize well-being for leaders, faculty + staff?

HINT...

it' simple + complicated.

When professional duties
performed in stressful societal +
organizational context, suboptimal
individual + organizational
outcomes can result.

Risks to Mitigate

Burnout reclassified pre-pandemic.
Considered syndrome resulting from chronic workplace stress that hasn't been successfully managed, not a medical condition.

World Health Organization (2019)

Burnout syndrome (BS)
tri-dimensional process of
emotional exhaustion (EE),
depersonalization (DP) + reduced
personal accomplishment (PA)

Risks to Mitigate

Those who provide constant, systematic + intense attention to people in need of care bear disproportionate risk of burnout.

Maslach & Leiter (2017), Sanchez-Moreno, et. al (2015), Shoman, et.al. (2021)

Risks to Mitigate

Tradition of over-functioning
+ critical shortage.

How long* have you been in your vocation?

Risks to Mitigate

Workplaces can become incubators.
Health care provider burnout is major public
health issue with profound implications.

Demoralization, fixing plane in flight, psychological safety
+ collective efficacy compromised.

Risks to Mitigate

Burnout can become normalized.

Help giving vs. seeking natural, curse of knowledge can serve as impediment, clinically significant distress overlooked or minimized.

Risks to Mitigate

Systemic issues are wreaking havoc.

Social determinants of health, injustice,
marginalization, discrimination, violence and ism's

RWJ (2024), CDC (2022), Shaw, et. al. (2016)

► FACULTY MENTAL HEALTH AND WELLBEING

Approximately half of faculty “agree” or “strongly agree” that their institution should invest more in supporting faculty mental health and wellbeing (45.8%).

Within this sample, approximately 9.5% of faculty screened positive for symptoms of major depression based on the Patient Health Questionnaire-2 (PHQ-2).¹

Approximately 20.6% of faculty agree that supporting students in mental and emotional distress has taken a toll on their own mental health. We find significant differences in gender regarding the extent to which faculty “agree” or “strongly agree” that supporting students’ mental health has taken a toll on their own mental health. 26.6% of female faculty and 31.9% of transgender, non-binary, genderqueer, or gender non-conforming faculty “agree” or “strongly agree” it has taken a toll, as compared to 13.4% of male faculty.

- **Know the problem and what to do about it.**
Understand negative outcomes on personal, social and organizational well-being that can influence patient quality of care and medical errors.
- **Enhance team perspective.**
Since BO is linked to dysfunctional collegial relationships, stronger intention to leave profession.
- **Build culture of appreciation.**
Give and receive recognition.
- **Realistic recovery approach.**
Examine policies i.e. no lunch breaks.
- **Avoid personal blame vs. systemic understanding.**
It’s not a personal failing but one that requires a both/and approach to improve the workplace and people’s performance within it.

New insights into burnout and health care: Strategies for improving civility and alleviating burnout

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ABSTRACT

What do we know about burnout, and what can we do about it? This article will provide an overview of what has been learned from current research on burnout, and what are the implications of the key themes that have emerged. One theme involves the critical significance of the social environment in health care settings. A second theme is the challenge of how to take what we know, and apply it to what we can do about burnout. What we need are new ideas about potential interventions, and clear evidence of their effectiveness. One example of this perspective addresses burnout by improving the balance of civil, respectful social encounters occurring during a workday. Research has demonstrated that not only can civility be increased at work but that doing so leads to an enduring reduction in burnout among health care providers. Lessons learned from this extensive research form the basis of recommendations for medical education. Specifically, the effectiveness of both the academic content and supervised practice would be enhanced by giving a greater emphasis to the social dynamics of healthcare teams. This perspective can help new physicians in avoiding potential pitfalls and recovering from unavoidable strains.

Introduction

Burnout is a hot topic in today's workplace, given its high costs for both employees and organizations. What causes this problem, and what can be done about it? Conventional wisdom says that burnout is primarily a problem of individuals, but research argues otherwise. Burnout is not a problem of people but of the social environment in which they work. The structure and functioning of the workplace shape how people interact with one another and how they carry out their jobs. When that workplace does not recognize the human side of work, and there are major mismatches between the nature of the job and the nature of people, then there will be a greater risk of burnout.

Understanding burnout

Job burnout is a psychological syndrome that involves a prolonged response to chronic interpersonal stressors on the job. The three key dimensions of this response are overwhelming exhaustion, feelings of cynicism and detachment from the job, and a sense of ineffectiveness and lack

Practice points

- Know the Problem: Get educated about what burnout is, and what to do about it.
- Enhancing Team Perspective: Developing skills to work well with others.
- Build a Culture of Appreciation: Giving and receiving recognition.
- Realistic Recovery: Strategies and support for restoring energy.

callous, or excessively detached response to various aspects of the job. It usually develops in response to the overload of exhaustion, and is self-protective at first – an emotional buffer of “detached concern.” If people are working too hard and doing too much, they will begin to back off, to cut down, to reduce what they are doing. But the risk is that the detachment can result in the loss of idealism and the dehumanization of others. Over time workers are not simply creating a buffer and cutting back on the quantity of work but are also developing a negative reaction to peo-

- Know the problem and what to do about it.
Understand negative outcomes on personal, social and organizational well-being
- Build culture of appreciation.
Give and receive recognition.
- Realistic recovery approach.
Examine policies i.e. no lunch breaks, understanding of intersections with student supports
- Avoid personal blame vs. systemic understanding.
It's not a personal failing but one that requires a both/and approach to improve the workplace and people's performance within it.

Protective factors at work

Well-documented as contributing towards positive MH cultures

- Informal networks provide interpersonal help system that shapes an ecological daily help process
- Includes feelings of commitment + mutual exchanges + relationships with shared responsibility for one another's well-being
- Civility + positive citizenry behaviors
- Help-seeking + help giving environments
- Psychological safety (trust, belonging, reduced fear of punishment)

Areas of work life

Considerations for strategic organizational action

- **Workload-spillover** is distinct burden partly because that situation interrupts opportunities for recovering depleted energy. COR theory suggests perception of threat or actual loss of valued resources creates stress
 - **Control** allows one to exercise initiative, giving sense of agency and volition
 - **Community is essential.** The quality of relationships plays central role
 - **Fairness**-sense of injustice can exhaust and discourage, alienate
 - **Values-alignment matters.** Teams who share core values energize one another
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Protective factors outside work

Nurturing + sustaining human flourishing

- Create psychological distance to reduce chatter
- Activate protective factors, strengths + resources
- Invest in body budget, lifestyle medicine
- Learn to ask for help—it's okay not to be okay, but you don't need to stay stuck!

Leveraging Behavioral Science

Optimizing talent and co-creating healthy mental health cultures

- Behavioral economics: reduce friction and make it fun (i.e. temptation bundling)
- Emphasize fresh start effect in work trajectories
- Engage in strategic self-care (think tiny, cumulative)
- Align values to behavior, focus on nourishing and celebrating strengths
- Apply locus of control principles (what is vs. what if)

Fact

Practicing + teaching what we
need to learn is beneficial.
Double dipping highly advised!

Fact

Help Helps.



**Self-care is superficial, selfish,
+ won't work.**

Plus, who has time?

Fact

Prevention is less costly
than repair.
Micro-strategies work.

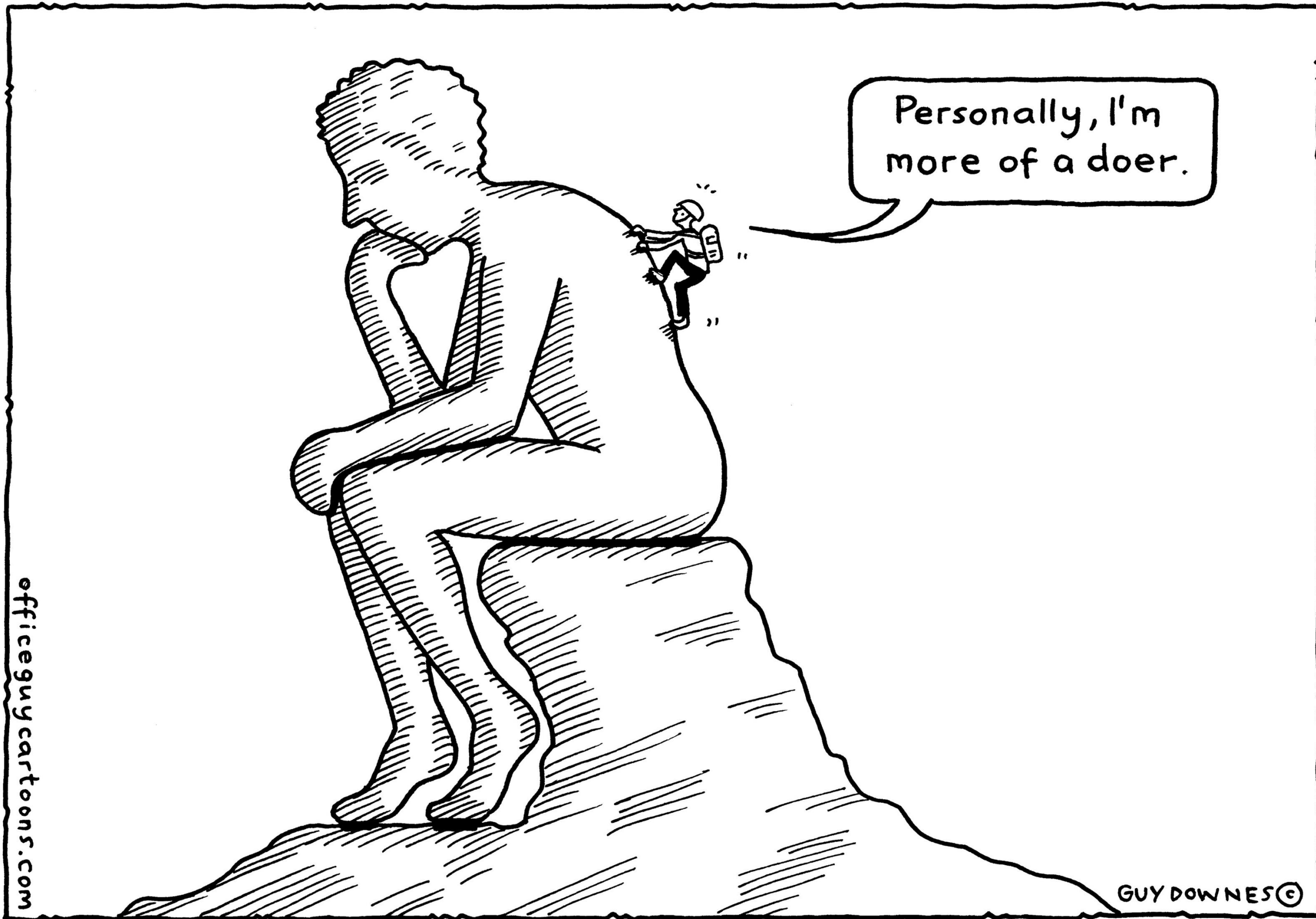
Fact

Universal precautions
warranted.



Myth 

You are what you do.



Fact

You are not a human doing, you
are a human being-not a
robot or machine.

Choose progress over “perfect”

Protect your well-being and foster sustainability

- Guard against perfectionism and UDD
- Leverage strengths and resources.
- Learn to ask for help—it’s okay not to be okay, but you don’t need to stay stuck!
- Take humor seriously: Not all issues need tissues
- Use friction wisely! (Behavioral science isn’t BS)
- Listen to your dissonance. Realign values to behavior.

Taking good care

What are your go-to protectants?

- Relationships
 - Love for and investment in learning
 - Lifestyle medicine/body budget
 - Creative outlets and pursuits
 - Time in nature
 - Meditation, mindfulness practices
 - Humor, playfulness, awe, wonder, zest
 - Values-wanting to optimize talent to contribute positively
 - Emotional granularity: naming hard emotions
 - Mantras and words of inspiration (self-talk)
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Strategy

Be your own bestie, a solid coach. Use mantras + metaphors build emotional granularity + resilience.

Strategy

Use a clean slate mindset, aka
“fresh start effect” when you
need a redo

Strategy

Do something your future self
will thank you for.

Used friction to develop optimal
habits, mindsets, + behaviors.

Key takeaway

Don't go alone.

TEAM up-Trusted Energizing and Mentoring Relationships
Connection, community, collaboration, candor and
camaraderie are vital!

Key Take-Away

Burnout doesn't need to be inevitable. TEAM up with fellow paddlers.



Katsushika Hokusai (1760-1849)
Under the Wave of Kanagawa
MFA Boston

Take-aways

Micro-strategies add up!

Your work matters immensely. So does your own mental health.

There's no health without mental health. Burnout is particular risk in education systems.

Use behavioral science + lifestyle medicine to optimize well-being.

Harness the power of relationships for positive collective contagion.

Watch out for perfectionism trappings.

Activate protective factors across ecosystem.

TEAM up to all extents possible.

“Not everything that is
faced can be changed,
but nothing can be
changed until it is
faced...”

James Baldwin



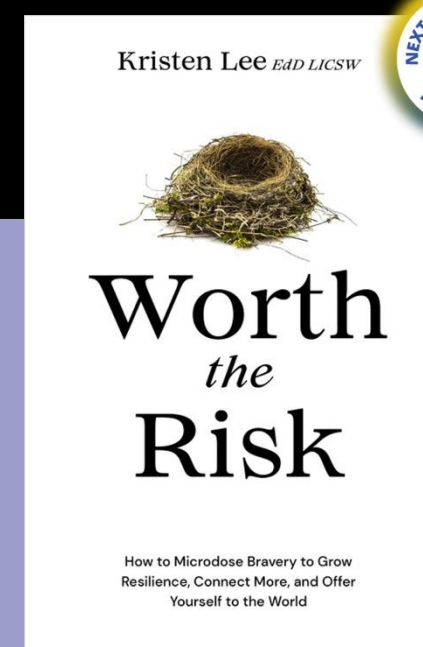
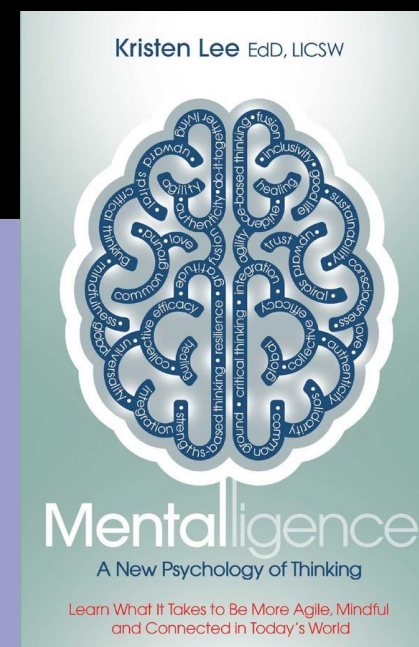
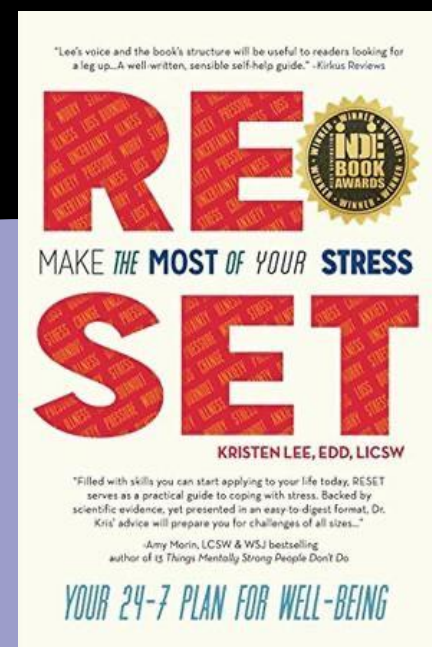
Getty Images, NPR



Thank you.

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HELP IS AVAILABLE

Suicide and Crisis Lifeline

9-8-8

Crisis Text Line

Text "BRAVE" to 741741

Peers.net

Use code **ACTIVEMINDS**
(10 free sessions)

<https://988lifeline.org/our-crisis-centers/>

<https://findtreatment.gov/>



Active Minds Resources

A.S.K Conversation Tool



Cause and Career
causeandcareer.org

www.activeminds.org/gethelp



Wisconsin Resources

- NAMI Portage and Wood Counties

Support Groups led by trained facilitators:

www.namiportagewoodcounties.org/support-groups

- NAMI Wisconsin

Resource guide for accessing Mental Health care:

namiwisconsin.org/resources/resource-guide/

- Adult Mental Health Services from Portage County HHS:

www.co.portage.wi.gov/249/Adult-Mental-Health-Services





Thanks!

We appreciate your attention and feedback,
please don't forget to fill out our post-event survey.

