



This webinar is hosted by Kathie Madonna Swift, MS, RDN, LDN, Food As Medicine Education Director for the Center for Mind-Body Medicine, presented by James S. Gordon, MD and made possible by a grant from the Scheidel Foundation.



Scheidel
FOUNDATION
Built on the Love of Family and Community

Transforming How We Understand and Treat Burnout

January 31, 2018, 4:30 PM Pacific/7:30 PM Eastern



James S. Gordon, MD
The Center for Mind-Body Medicine



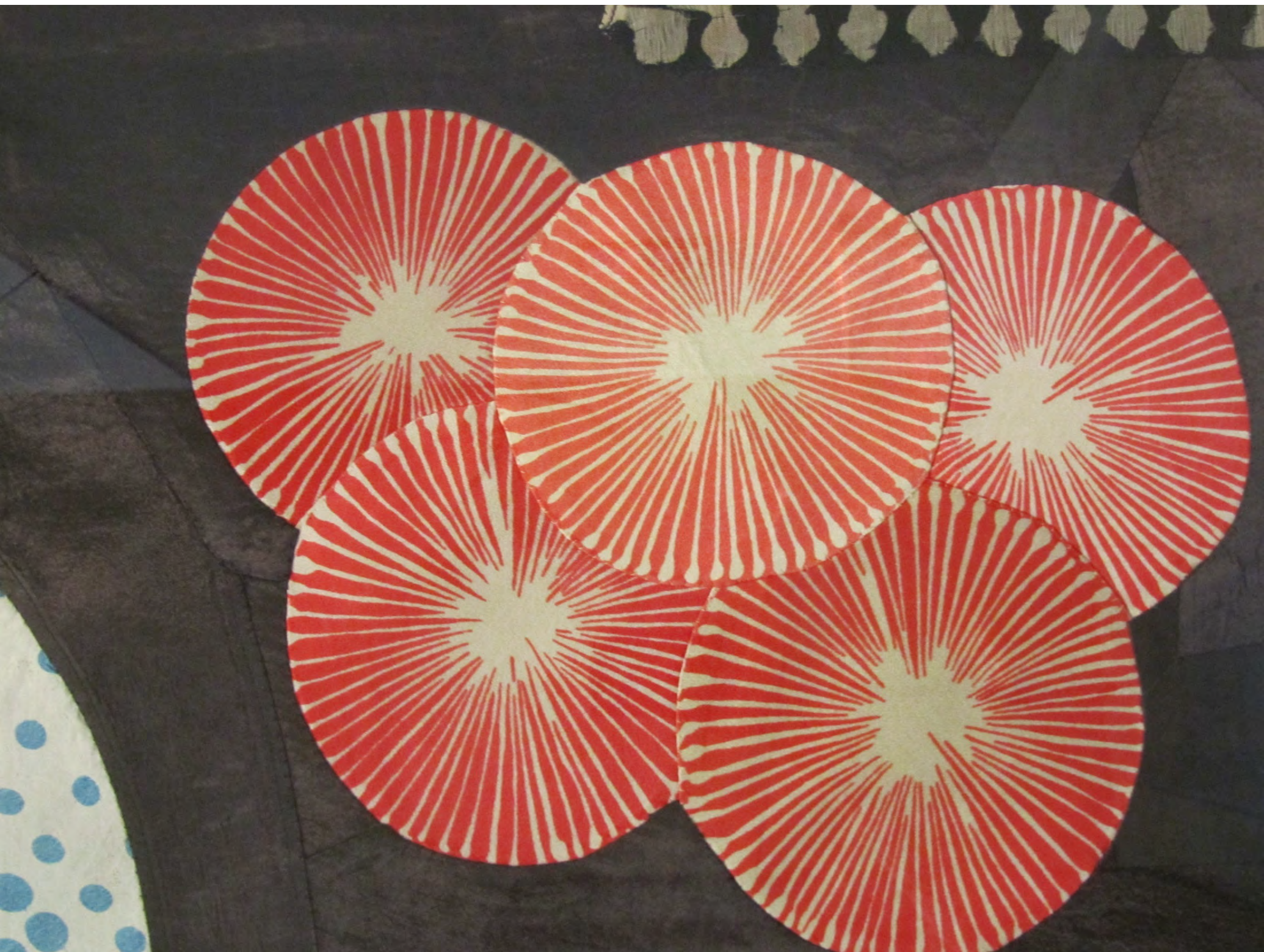














On Aging

I will only ask one favor:
Don't bring me no rocking chair.
When you see me walking, stumbling,
Don't study and get it wrong.
'Cause tired don't mean lazy
And every goodbye ain't gone.
I'm the same person I was back then,
A little less hair, a little less chin,
A lot less lungs and much less wind.
But ain't I lucky I can still breathe in.

~ Maya Angelou ~



“We don’t know what we’re looking for when we pick up a book, no matter how clear-cut the genre,” she said. “We think we do, but we don’t. Don’t ever give people the thing they expect just because they expect it. Our job is to surprise them, to shake them — to turn their expectations on their heads. And do you know why, Wray?”

Why, I managed to mumble.

“Because that’s when the MRI of their brain lights up, and they begin to *see*.”

~ Ursula K. Le Guin ~

Pre-Psychological Phase (Pre 1970's)

Before burnout was “discovered” and researched by psychologists and psychiatrists, it was often used in slang, and depicted in literature and media:

- The phrase “burnout” was often used colloquially in order to describes symptoms observed in chronic drug abusers.
- Many novelists of the 20th Century depicted characters that were burnt out before psychologists coined the term. For example, Graham Greene’s *A Burnt Out Case* (1960) depicted an architect who quit his job to live in a jungle in Africa out of frustration at work.
- Researchers in Psychology pre-1970 would often research the effects of burnout, but just refer to it by another name such as “exhaustion reaction”, an example being Schwartz and Will’s study on Mrs. Jones, a psychiatric nurse who became the most prominent example of burnout at the time. (1950)

Maslach, C., & Schaufeli, W. B. (1993). Historical and conceptual development of burnout. In W. B. Schaufeli, C. Maslach & T. Marek (Eds.), *Professional burnout: Recent developments in theory and research*; professional burnout: Recent developments in theory and research pp. 1-16, Chapter xii, 299 Pages) Taylor & Francis, Philadelphia, PA.

Greene, G. (1961). Graham Greene. *A Burnt-out case*. London: Heinemann.

Schwartz, M. S., & Will, G. T. (1953). Low morale and mutual withdrawal on a mental hospital ward. *Psychiatry*, 16(4), 337-353.

Psychological Phase (1970's On)

In the early 1970's is when burnout was first characterized and coined as a psychological phenomena by two prominent figures in the Psychology field: Herbert Freudenburger, a psychiatrist, and Christina Maslach, a social psychologist.

- Freudenburger used the term “burnout” to describe “an emotional depletion and lack of motivation and commitment” in volunteers at the mental hospital.
- Maslach, at this time was conducting research to study coping strategies to emotional arousal at work, and was especially concerned with cognitive strategies such as “detached concern” and “dehumanization and self defense”. Maslach’s empirical research of these cognitive strategies led her to create the Maslach Burnout Inventory in 1981. She mainly focused on staff in human services
- The Burnout Inventory and empirical studies done by Maslach and Freudenburger changed the view of burnout from a social issue to a diagnosable condition, which is why there became a huge increase in empirical research on burnout.

Freudenburger, H. J. (1974). Staff burn-out. *Journal of social issues*, 30(1), 159-165.

Maslach, C., & Jackson, S. E. (1981). *MBI: Maslach burnout inventory*. Palo Alto, CA.

Maslach, C., & Schaufeli, W. B. (1993). Historical and conceptual development of burnout. In W. B. Schaufeli, C. Maslach & T. Marek (Eds.), *Professional burnout: Recent developments in theory and research; professional burnout: Recent developments in theory and research* (pp. 1-16, Chapter xii, 299 Pages)

Friberg, T. (2009). Burnout: From Popular Culture to Psychiatric Diagnosis in Sweden. *Culture, Medicine & Psychiatry*, 33(4), 538-558. doi:10.1007/s11013-009-9149-z

Definitions of Burnout:

- Burnout is defined as “a psychological syndrome that involves a prolonged response to chronic interpersonal stressors on the job” (Leiter & Maslach, 2004, p. 93).
- The Maslach Burnout Inventory measures 3 components of burnout (Maslach 1981)
 - Emotional Exhaustion
 - Depersonalization
 - Reduced Personal Accomplishment

Leiter, M. P., & Maslach, C. (2004). Areas of work life: A structured approach to organizational predictors of job burnout. In P. Perrewé & C. D. Ganster (Eds.), *Research in occupational stress and well-being: Vol. 3, Emotional and physiological processes and positive intervention strategies* (pp. 91-134). Oxford, England: JAI Press/Elsevier.

Maslach, C., & Jackson, S. E. (1981). *MBI: Maslach burnout inventory*. Palo Alto, CA.

Adverse Outcomes of Burnout

- Increased absenteeism
- Thoughts of Quitting
- Turnover
- Reduced patient care

Dreison, K. C., Luther, L., Bonfils, K. A., Sliter, M. T., McGrew, J. H., & Salyers, M. P. (2016). Job Burnout in Mental Health Providers: A Meta-Analysis of 35 Years of Intervention Research.

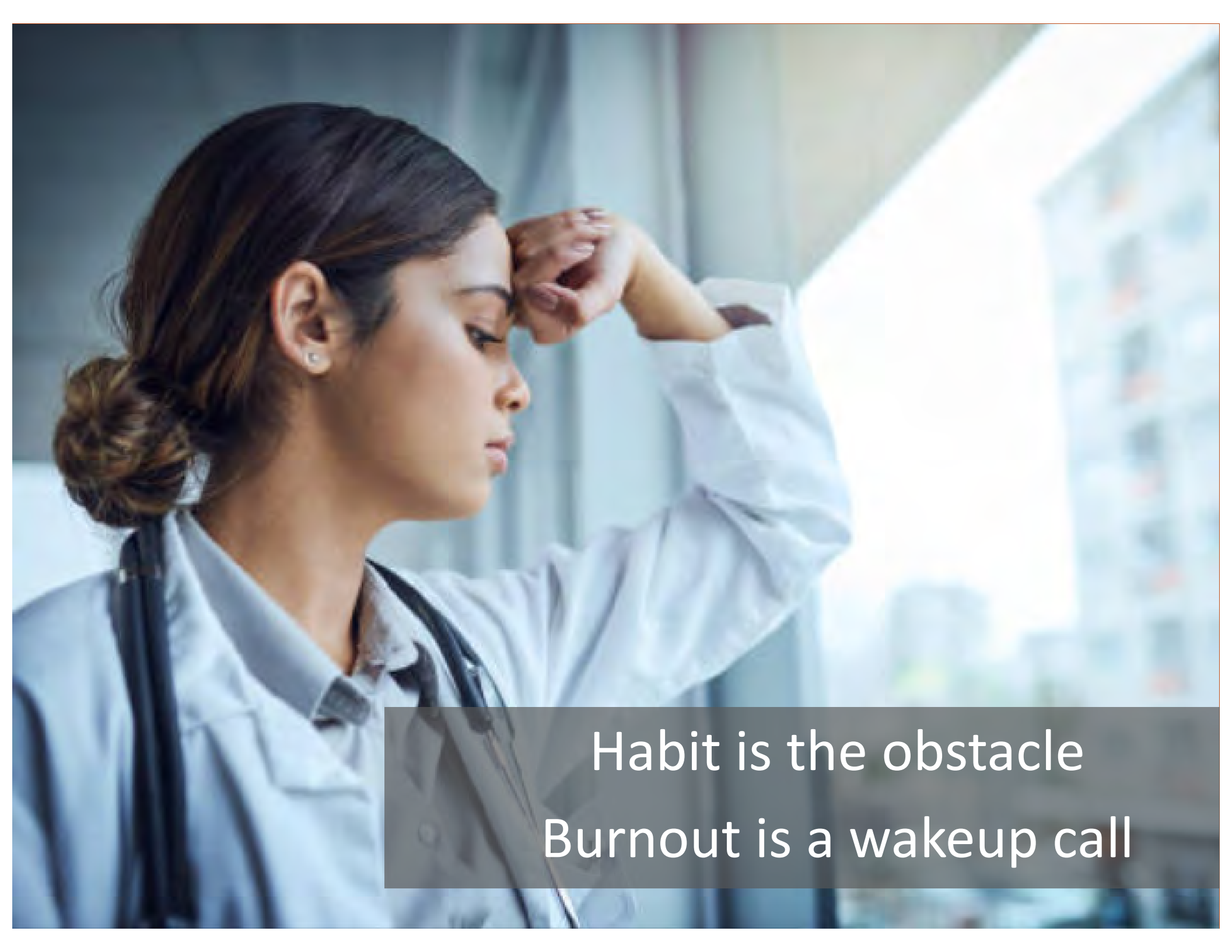
Who is Affected?: A Sample of Professionals

- 21%-67% of mental health care providers experience burnout
- Oncology Professionals: 36% emotional exhaustion, 34% depersonalization; 25%, low personal accomplishment.
- Medical students and residents/fellows screened positive for depression: 58.2% of medical students; 50.8% of residents/fellows; 40% of early career physicians. and high fatigue: 57% of medical students; 58.5% of residents/fellows; 50.8 early career professionals

Morse, G., Salyers, M. P., Rollins, A. L., Monroe-DeVita, M., & Pfahler, C. (2012). Burnout in mental health services: A review of the problem and its remediation. *Administration and Policy in Mental Health and Mental Health Services Research*, 39(5), 341-352

Trufelli, D. C., Bensi, C. G., Garcia, J. B., Narahara, J. L., Abrao, M. N., Diniz, R. W., ... & Del Giglio, A. (2008). Burnout in cancer professionals: a systematic review and meta-analysis. *European Journal of Cancer Care*, 17(6), 524-531.

Dyrbye, L. N., West, C. P., Satele, D., Boone, S., Tan, L., Sloan, J., & Shanafelt, T. D. (2014). Burnout among US medical students, residents, and early career physicians relative to the general US population. *Academic Medicine*, 89(3), 443-451.

A female doctor with dark hair tied in a bun, wearing a white lab coat and a stethoscope, is looking out a window. She has her right hand pressed against her forehead, suggesting stress or exhaustion. The background shows a blurred cityscape with tall buildings.

Habit is the obstacle
Burnout is a wakeup call

Burnout is telling you that you're no longer doing something that you're passionate about or no longer doing it in a way that fulfills you, no longer, in Joseph Campbell's words, following your bliss.

Habit is the obstacle for individuals and institutions. At the institutional level, it is reinforced by economic imperatives, ideology, lack of imagination, and fear. Distress is or should be the wakeup call.

What are we looking for?

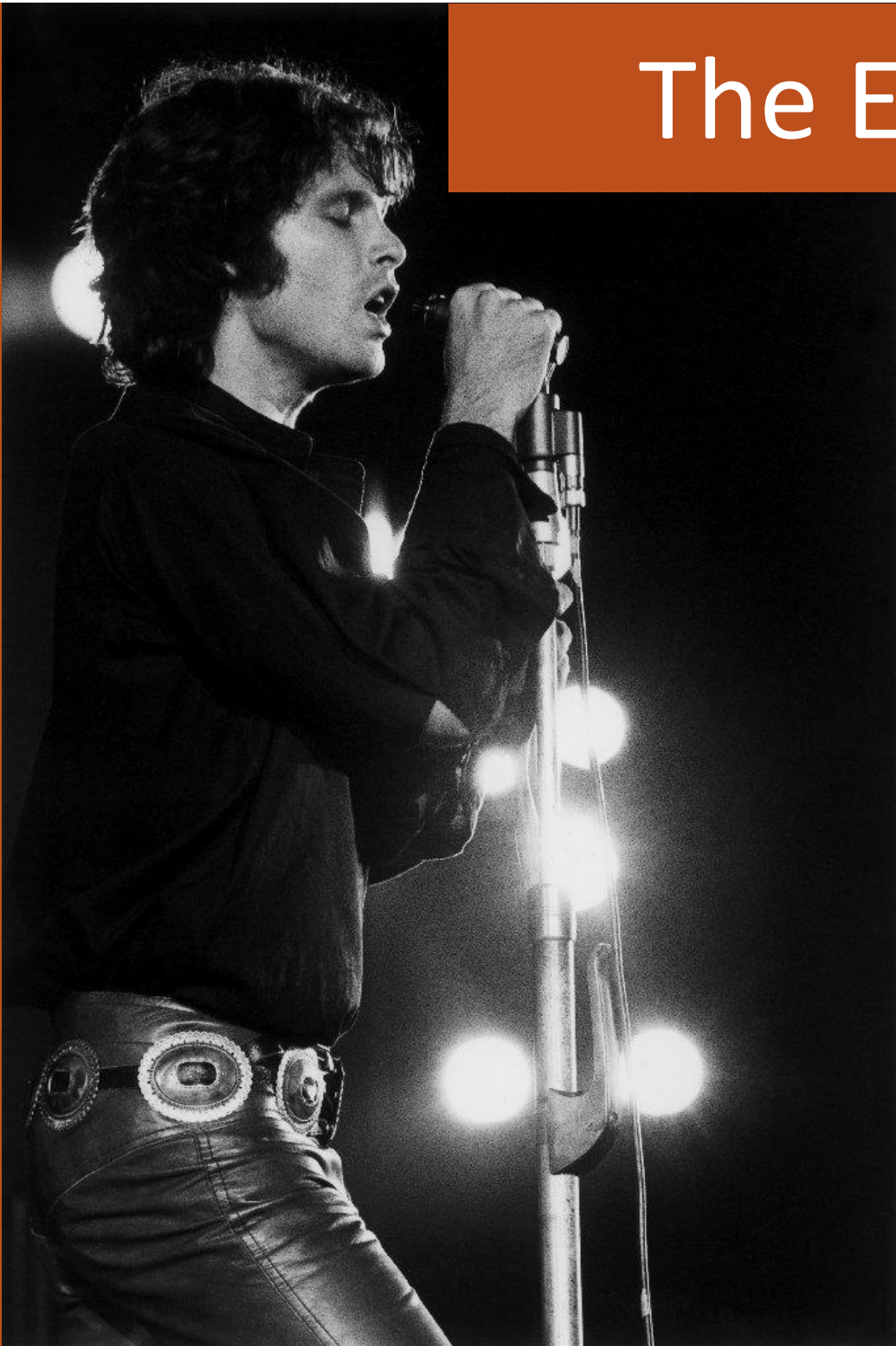
The Catalyst



“The heavenly connection to the starry
dynamo in the machinery of night.”

The Expression

In the zone



What if I'm not an artist or
athlete or don't have a
fancy degree like you do?

Find a way to do what you're
doing that is beautiful

You need some variety, some
interaction with people, a
place where you feel
comfortable, and respected.

You can't be in a place that's
soul destroying.

So what to do?

Burnout Interventions

Person-Directed, Organization-Directed, Combined Approaches:

- Co-worker support groups
- Improved Supervision
- Continuing education to increase competence
- Job-training
- Job redesign
- Stress reduction training and coping skills (i.e. mindfulness, cognitive restructuring)

Dreison, K. C., Luther, L., Bonfils, K. A., Sliter, M. T., McGrew, J. H., & Salyers, M. P. (2016). Job Burnout in Mental Health Providers: A Meta-Analysis of 35 Years of Intervention Research.

Findings on Burnout Interventions

A 2018 meta-analysis of 35 years of research into interventions to prevent burnout for mental health providers found that:

- "Interventions significantly reduced overall levels of burnout. The average effect of these interventions was small"
- "The field has made limited progress in ameliorating mental health provider burnout"
- Findings suggested that combined interventions that target individuals and organizations are the most effective, but also the hardest to implement

Dreison, K. C., Luther, L., Bonfils, K. A., Sliter, M. T., McGrew, J. H., & Salysers, M. P. (2016). Job Burnout in Mental Health Providers: A Meta-Analysis of 35 Years of Intervention Research.

The CMBM Approach in Action: Burnout At The Eskenazi Midtown Mental Health Center

The Center for Mind Body Medicine worked with the Eskenazi Midtown Mental Health Center on implementing an 18-month intensive wellness program meant to target burnout and Secondary Traumatic Stress (STS), that incorporated self care, stress reduction, mind-body medicine, nutrition, exercise, and group support.

Participants Indicated Statistically Significant Improvements In Wellness:

- Levels of Burnout and Secondary Traumatic Stress
- Participation in healthy life choices such as positive nutrition, spiritual growth, positive interactions in interpersonal relationships (this was especially prominent in the male staff), increased responsibility in maintaining one's health, and using better methods of stress management.
- Progressively lower levels of perceived stress
- Improvements in mood, including a progressive increase in friendliness toward others and decreased confusion and anxiety

The CMBM Approach in Action: Burnout At The Eskenazi Midtown Mental Health Center

The Center for Mind Body Medicine worked with the Eskenazi Midtown Mental Health Center on implementing an 18-month intensive wellness program meant to target burnout and Secondary Traumatic Stress (STS), that incorporated self care, stress reduction, mind-body medicine, nutrition, exercise, and group support.

Learn how to quiet yourself, balance fight or flight and stress response, relax into the moment.





Soft Belly Breathing

Break Up Fixed Habitual Patterns



Shaking and Dancing



Become friendly with
your intuition

Use guided imagery, written dialogues, and drawings



Reach out to others



Understand that discipline is necessary.
Be ready to pay your dues.
Render unto Caesar.

Laugh at yourself



Embrace change



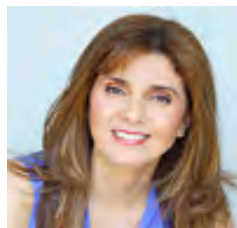


This webinar has been recorded. The presentation and the slides will be available within 24 hours at CMBM.org/webinar.

Also available online:



Nourish & Nurture:
Presented by
Deb Phillips



Leaky Gut:
Presented by
Sheila Dean, MD



Overfed and
Malnourished:
Presented by
Mark Pettus, MD



Using Whole Foods as
Medicine: Presented
by Tanmeet Sethi, MD

Mind, Mood & Food

Optimal Nutrition for Body & Brain

April 15-20, 2018
Esalen Institute
Big Sur, CA



James S. Gordon, MD



Kathie Madonna Swift,
MS, RDN, LDN



Amy Shinal, MSW,
LCSW



Mark Hyman, MD



Catherine McConkie,
Executive Chef



Cindy Geyer, MD

cmbm.org/mmf

