

BURNOUT VERSUS WELL-BEING IN ORGANIZATIONS

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Abstract: *One can define burnout as a syndrome of emotional exhaustion, depersonalization, and reduction in job performance that occurs in individuals who work professionally with others. Burnout syndrome is described as either persistent and troublesome complaints of exhaustion after low mental effort or persistent and troublesome complaints of feeling tired and physically limp after low physical effort. These include at least two of the following six symptoms: muscle aches, drowsiness, headaches, sleep disturbances, inability to relax, and irritability. Factors affecting employee health and well-being can have a significant impact on the financial costs associated with employee health and the profitability of the business. Action needs to be taken at an individual and organisational level to reduce the levels of stress and burnout syndrome.*

Key words: *burnout; well-being; stress; exhaustion; work place strategies.*

1. Conceptual clarifications

During life span, most of us have experienced some bizarre things, such as: forgetting familiar things (e.g., wife's/husband's first name); taking a different route while driving; reacting aggressively to clients and co-workers; acting inappropriately (e.g., putting your wallet in the refrigerator).

These seemingly small situations tell us that a disturbance has occurred in our consciousness that could have dramatic consequences. When such events accumulate, heightened vigilance is called for.

The greatest responsibility for avoiding burnout lies with the person himself.

Stress triggers could be: the person him/herself; his/her private environment; his/her professional contacts; team and network of colleagues; relationships with superiors; the organization and the industry in which he/she works; social conditions

Person affected by burnout (according to Maslach, 2003).

1. Notices a strong sense of exhaustion in himself over the course of several weeks;

2. Shows a marked decline in performance;

3. Experiences alienation from his work, colleagues, and organization.

The World Health Organization declares burnout as a non-clinical condition that is not treated by psychotherapy but by psychological counseling

2. The differences between stress and burnout

Table no.1- Stress vs. burnout

| Stress | Burnout |
|---|---|
| Over-involvement in task | Lack of interest in engaging in professional activities |
| Emotionally, it involves intense activity and vigilance | Emotional numbness, blasphemous and apathy |
| Consequences: physical exhaustion | Consequences: mental and emotional exhaustion, lack of motivation, hope and any purpose |
| Produces urgency and hyperactivity | Produces helplessness |
| Associated with anxiety disorders | Depressive disorders |
| Feelings associated with stress are over-reactive | Feelings associated with Burnout syndrome are rather insensitivity |

Maslach & Leiter (2016) define burnout as a syndrome of Emotional Exhaustion, depersonalization, and reduction of Professional Achievement, occurring in individuals who work professionally with others.

Emotional exhaustion includes emotional draining of the person, loss of energy and motivation, occurrence of restlessness and tension, perception of work as a chore.

Depersonalization is accompanied by the appearance of impersonal attitudes, distancing, rejection, or stigmatization toward the people one normally cares about-such actions are intended to help the person cope with the depletion of inner resources.

The reduction of professional performance is accompanied by the loss of the ability to self-assess, a decrease in self-esteem and self-efficacy.

If burnout was considered specific to the relational occupations of assisting and helping in the previous stages, it now seems to occur in any type of occupation.

In a more modern approach, Schaarschmidt & Fischer (2008) describe four response models for workplace behaviors that describe the risk of developing occupational exhaustion.

Table no.2- Response models for workplace behaviors, Schaarschmidt & Fischer (2008)

| Self-distancing Capacity/Job Control | Increased | Happy W-Lazy Employee | Type Employee | G-Happy Employee |
|--------------------------------------|-----------|---|---|---|
| | High | Relative professional satisfaction It is desirable to clarify the motivation | High professional satisfaction Health Optimism, positive emotions towards work and life | High professional satisfaction Health Optimism, positive emotions towards work and life |
| Low | | Type B: Burnout employee | Type:A Overwhelmed employee | |
| | | Strong sense of resignation Low satisfaction with work and life Do not have support in the socio-family context Low level of mental balance and stability Health intervention is needed, in particular with regard to mental health | Overuse of one's own person The constant feeling that he/she is overwhelmed Exhaustion, reduced ability to manage stressful situations Negative emotions They're perfectionists, work is everything I put in a lot of effort Physical diseases, anxiety Health intervention is needed, in particular with regard to physical and mental health | |

Involvement in work

According to Cherniss (1980), burnout is the culmination of a stressful process that consists of three phases:

1. Perception of the stressful situation: the individual experiences discomfort caused by the difference between personal resources and environmental demands;

2. Negative emotion: the subject suffers from emotional turmoil characterized by tension and anxiety;

3. Coping: The subject, faced with a stressful situation, avoids the problem by withdrawing and distancing himself emotionally.

Burnout syndrome is described as either persistent and troublesome complaints of exhaustion after little mental exertion or persistent and troublesome complaints of feeling tired and physically floppy after little physical exertion. It includes at least two of the following six symptoms: muscle aches, drowsiness, headache, sleep disturbance, inability to relax, and irritability.

The worker is unable to recover from the symptoms by rest, relaxation or fun and the duration of the disorder is at least three months.



Figure no.1. Processualism of burnout

In summary, burnout syndrome can be viewed as a process that involves various stages. Typically, stressors lead to physical/emotional exhaustion, followed by depersonalization and a cynical attitude toward work. Often the burnout process ends with a dislike of everything around, feelings of despair and guilt. However, the burnout phases can also develop sequentially and be a consequence of high demands and low resources.

3. Well-being in the organizations

Well-being is a comprehensive biopsychosocial construct that encompasses physical, mental and social health. Employees' well-being represents various physical, mental and emotional facets of employee health in complex interaction (Dejoy and Wilson, 2003, op cit Grawitch, Gottschalk and Munz, 2006).

The term health refers to the physical and physiological symptomatology in a medical context (such as the diagnosis of some diseases). Applying this term in an organizational context, the focus is on physiological and psychological indicators used to assess employee health. Well-being is a broader term that refers to the person as a whole.

In addition to health, well-being includes life experiences (life satisfaction, happiness, joy, etc.) and, in an organizational context, general work-related experiences (job satisfaction, retention, etc.) and specific dimensions (satisfaction with colleagues or salary).

Individuals' experiences at work (physical, emotional, mental, social) have a direct impact on them. These experiences also have an impact outside of the individual's work. The state of well-being begins with the satisfaction of certain needs:



Figure no.2. Well-being strategies in organizations (<https://www.knoll.com/document/1353007297468/Moving-from-Wellness-to-Well-Being.pdf>)

Well-being is different from wellness

Table no.3-Differences between well-being and wellness

| Specific dimensions | Type of needs |
|---------------------|---|
| Well-being | Needs for self-realisation and personal development: goals, values, support for development Needs for esteem and social recognition: trust, respect, autonomy, transparency Social and belonging needs: social relationship, team dynamic, culture, relationships |
| Wellness | Needs for security: ergonomics, privacy, safety, work, life balance Physiological needs: water, light, temperature, food, air quality, cleaning, health |

Danna and Griffin (1999) propose an insight into well-being and health in organizations and attempt to capture the causes and consequences of wellbeing.

Well-being is composed of various satisfactions:

- in relation to the individual's life (satisfaction with family life, society, leisure, spirituality, etc.);
- in relation to the individual's work (satisfaction with salary, promotion, colleagues, the work itself, fasting, etc.).

Health is considered a component of well-being, which is a combination of mental/psychological indicators (frustration, affection, anxiety, etc.) and physical/physiological indicators (blood pressure, heart function, physical health in general).

4. Determinants of the state of well-being and consequences at the individual level.

Individual characteristics such as personality type, locus of control, self-esteem, emotional intelligence, and self-acceptance have been identified as significant predictors of the subjective well-being individuals experience in the organization (Grawitch, Gottschalk, and Munz, 2006).

The emotional and instrumental support one receives from family, as well as the support one receives from the boss at work, are able to balance the employee's efforts, the rewards earned, and the losses (time resources, energy, etc.) suffered by the employee.

The "hostile" personality type has a high risk of developing cardiovascular disease.

Low self-esteem and anxiety as a character trait can contribute to poor health and well-being.

Locus of control at work (which refers to the belief that the person is in control at work) has been linked to employee well-being. Perceptions of control over events that affect oneself and appraisals of the predictable and stable nature of the people and situations around us are therefore important factors in the experience of well-being.

Over the past decade, a number of authors have theorized that there is a link between well-being (at least the emotional level) and emotional intelligence, suggesting that it has the potential to maintain and enhance well-being. - We therefore assume that people who are able to perceive and understand both their own emotions and those of the people with whom they interact show greater resilience and are better able to maintain their good mood and general satisfaction in the face of environmental pressures and demands.

5. Determinants of well-being and consequences at the interpersonal level.

The supervisor's positive behaviour (e.g., giving the employee greater control over his or her work, providing good communication and organisation, and considering the employee and his or her well-being) contributes statistically significantly to the employee's well-being. Arnold and his associates (2007) discovered a positive relationship between transformational leadership and well-being, a relationship mediated by the meaning the employee finds in the work performed.

Boss abusive behaviour refers to subordinates' perceptions of the extent to which their supervisors continually engage in hostile verbal and nonverbal behaviours, with the exception of physical contact (Tupper, 2000). Barling (1996, as cited in Lim and Cortina, 2005) argues that the experience of abusive behaviour in slavery in the workplace causes negative dispositions, cognitive distraction and anxiety.

Another important factor contributing to employees' well-being is the *interpersonal treatment they receive from colleagues and other organisational actors*. Lim and Cortina (2005) have shown how experiences of disrespect and consideration in the workplace are associated with low job satisfaction, lower task engagement, and increased psychological distress. Studies on bullying conclude that bullying has serious consequences and extremely negative effects on employee health and well-being and is considered a strong stressor.

6. Determinants of good status and links with organisational level

The meta-analysis conducted by Oertqvist and Wincent (2006) examined the effects that role-related stressors (role ambiguity, role conflict, role overload, etc.) have on dimensions relevant to employee well-being. All facets related to role stress are significantly and positively related to emotional exhaustion.

Role ambiguity occurs when the employee does not have adequate or sufficient information about their role in the work process and organisation. Lack of goals and purpose of one's responsibilities can also lead to role ambiguity. Role conflict occurs when individuals are asked to behave in ways that contradict their values or when the different roles they play conflict with each other. Ambiguity and role conflict as sources of stress are associated with job dissatisfaction and staff turnover. Responsibility for people is also considered a stressor related to an individual's role in a particular context.

The conflict between work and family is considered by some authors as a situation in which one of the roles of the individual consumes and exhausts the resources (time, energy, etc.) that he would need to participate in the successful fulfilment of the requirements of the other role. Grandey, Cordeiro, and Crouter (2005) emphasise that this conflict goes both ways - work can overlap with family and vice versa. There are two ways in which the family can support a worker in their efforts to successfully complete the tasks associated with the role: through emotional support (encouragement and understanding) and instrumental support (taking over the worker's tasks and duties from other family members). Lapierre and Allen (2006) show that family instrumental support is more effective than emotional support in supporting a worker's efforts to avoid interference with family life duties. Emotional support is more important for the physical well-being of workers.

A factor that correlates with well-being and health of the organisation is also the *perception of job insecurity*. Studies have found the negative effects of perceived job insecurity on employee well-being (Ferrie et al., 1995).

Recent research on changes in work schedules - overtime and shift work - have been shown to affect employee well-being (Sparks et al., 2001).

Sources of stress related to culture and organisational climate. These sources include lack of participation and effective consultation, poor communication, poor organisational policies and restructuring (e.g. major restructures, unclear working environment etc.).

Factors affecting employee health and wellbeing can have a significant impact on the financial costs associated with employee health and

organisational profitability. There has been an increase in organisational costs associated with employee health care, costs associated with reduced productivity and absenteeism, costs associated with compensation payments related to workplace injury or illness

7. Organizational well-being

As seen in Figure 3, organizational well-being can be truly achieved when the organization deeply embeds its well-being strategies into its core values, norms, and organizational practices. Easily identifiable organizational incentives such as sports vouchers, breaks, team-building sessions, childcare vouchers, etc., cannot have their maximum impact unless they are embedded in effective people-centered organizational-level policies (recruitment procedures, performance management, values and norms, etc.). These organizational policies and procedures must be accompanied by a range of personal support and development measures (mental health first aid, stress and resilience training, etc.). Only when the foundations of organizational policy and individual support have been consolidated can value-added measures take effect.



Figure no.3-Levels of well-being intervention strategies in organizations(<https://www.wellbeingaccelerator.com/house-of-organisational-wellbeing/house-of-organisational-wellbeing-white-ms/>)

Measures to be taken at the individual level and at the team level

- use of relaxation techniques: morning clarity, calming of breathing, awareness of one's body and its signals, harmony of movement, full awareness of the present moment;
- healthy diet and lifestyle;

- use of time management techniques: Eisenhower's matrix (<https://www.youtube.com/watch?v=xJAv5gqaA2E>), time rhythms, mini-breaks, centering on one thing at a time;
- use of assertive communication techniques;
- asking for help from colleagues.

Measures to be taken at team/organisational level

- constructive management of relationships, spontaneous impulse control, conflict management;
- support from supervisor;
- support from colleagues;
- clarification of tasks and responsibilities at work, clarification of professional role;
- reduction of workload, overload.

Conclusions

In the modern society more and more employees are affected by stress and burnout. The effects are devastating both at personal, interpersonal and organizational level. The active promotion of well-being strategies at organizational level creates the premises of long term employees' resilience, happiness and productivity at work place.

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