Study about Burnout prevalence in Belgium

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Definition and causes of burnout

- Burnout is a persistent, negative, work-related state of mind in ‘normal’ individuals that is primarily characterized by exhaustion, which is accompanied by distress, a sense of reduced effectiveness, decreased motivation, and the development of dysfunctional attitudes and behaviours at work.

This psychological condition develops gradually but may remain unnoticed for a long time for the individual involved. It results from a misfit between intentions and reality at the job. Often burnout is self-perpetuating because of inadequate coping strategies that are associated with the syndrome »

Schaufeli & Enzmann, 1988, p.36

- Causes of Burnout

  - **Individual factors**: age, personality, work attitudes (engagement, expectations)
  - **Situational factors**: working conditions, organizational context
Differential diagnosis of burnout

- Burnout vs
  - Job strain
  - Depression
  - Fibromyalgia
  - Chronic fatigue
  - Workaholism
  - Psychosocial risks

- Example: burnout vs job strain
# Example: Burnout vs Job strain

<table>
<thead>
<tr>
<th>Job strain</th>
<th>Burnout</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct consequence of job stressors.</td>
<td>Important role of work meaning in syndrome manifestation</td>
</tr>
<tr>
<td>Meaning of work is not central.</td>
<td></td>
</tr>
<tr>
<td>Of temporary or chronic nature</td>
<td>Is a consequence of a prolonged exposition to a chronic stress</td>
</tr>
<tr>
<td>May concern any employee</td>
<td>Employees overcommitted to work are at higher risk</td>
</tr>
<tr>
<td>Do not necessary involve negative attitudes towards others</td>
<td>Negative attitudes and behaviours towards colleagues, clients, patients, ... cynicalism</td>
</tr>
<tr>
<td>Social support and coping strategies can be mediators between stress and</td>
<td></td>
</tr>
</tbody>
</table>
## Diagnosis criteria for burnout

- Based on literature and focus–groups meetings

<table>
<thead>
<tr>
<th>Physical</th>
<th>Cognitive and affective</th>
<th>Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Asthenia</td>
<td>□ Lack of control</td>
<td>□ Changing attitudes towards others</td>
</tr>
<tr>
<td>□ Sleep disorders</td>
<td>□ Reduced sense of competence</td>
<td>(cynicism, indifference, alienation, detachment)</td>
</tr>
<tr>
<td>□ Lack of energy</td>
<td>□ Lack of motivation</td>
<td>□ Tendency to isolate themselves</td>
</tr>
<tr>
<td>□ Neurovegetative/functional complaints</td>
<td>□ Frustration</td>
<td>□ Reduced performance</td>
</tr>
<tr>
<td>(ie. palpitations, gastrointestinal,</td>
<td>□ Anxiety</td>
<td>□ Absenteeism in the past year</td>
</tr>
<tr>
<td>epigastralgia, chest</td>
<td>□ Irritability</td>
<td>□ Frequent short</td>
</tr>
<tr>
<td>tightness, ...)</td>
<td>□ Reduced self-esteem</td>
<td>Long-term</td>
</tr>
<tr>
<td></td>
<td>□ Lack of idealism</td>
<td>□ Aggressiveness</td>
</tr>
<tr>
<td></td>
<td>□ Lack of concentration</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Lack of memory</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Depressed mood</td>
<td></td>
</tr>
<tr>
<td></td>
<td>□ Duality : quit the job or stay?</td>
<td></td>
</tr>
</tbody>
</table>
Methodology

- **Aim of this study**
  - to estimate the **prevalence of burnout among Belgian workers** through the identification of burnout cases within the practice of general practitioners and the health surveillance carried out by occupational physicians.

- **A diagnostic form**
  - to help health professionals to screen burnout symptoms when they examine a worker
  - used by 178 general practitioners and 168 occupational physicians during a three months period
Contents of the diagnostic form

- Reasons for consultation
- Symptoms (cfr. Diagnosis criteria)
  - First visit or follow-up?
  - Since when?
  - Others practitioners or health professionals consulted for these symptoms?
- Burnout related to job characteristics?
  - Demands/resources
- Socio-demographic variables
  - e.g. Age, gender, status, home situation, activity sector, occupation, medical history

Forms available in French and Dutch
Results: Symptoms and job characteristics

- The most frequent symptoms associated to burnout
  - sleep disorders (61%),
  - decreased energy (53%)
  - neurovegetative and functional complaints (52%)
  - reduced motivation (48.4%)

- The most frequent job characteristics associated to burnout
  - lack of social support (63%)
  - workload (58%),
  - time pressure (41%),
  - organizational changes (38%)
Results: Prevalence of burnout

- 135,131 contacts with patients/1089 burnout cases
- prevalence may be estimated at about 0.8% of the Belgian population accessing the health system
  ➔ ~19,000 workers in Belgium

This result can’t be compared to others studies based on burnout self-reported measures (prevalence between 30% to 40%).

BUT

based on a macroeconomic approach (economic and epidemiological data), Trontin (2006) estimated the prevalence at about 1% to 1.4% in France
Study limitations

• Sample: Representativeness
  ▫ good representativeness for occupational physicians but not so good for general practitioners

• Burnout diagnosis based on the practitioners clinical judgment

• Data collection
  ▫ 3 months vs. one year recommended
  ▫ during spring and summer
Treatment and prevention

- **Primary prevention**
  - To reduce job demands (workload, procedures,...)
  - To offer more job resources (support, autonomy,...)

- **Secondary prevention**
  - To develop individual coping skills
    (psychotherapy, training,...)

- **Suggestions**: Combination of individual/collective prevention

  - *collectively involve workers* in improving their working conditions

  - Take into account both the work aspects and the **subjective importance** of work (central for people in burnout)

  - Individual follow-up in order to facilitate a return to work