



**QUEEN'S
UNIVERSITY
BELFAST**

Burned Out: Workplace Policies and Practices Can Tackle Occupational Burnout

Adlakha, D. (2019). Burned Out: Workplace Policies and Practices Can Tackle Occupational Burnout. *Workplace Health & Safety*. <https://doi.org/10.1177/2165079919873352>.

Published in:
Workplace Health & Safety

Document Version:
Peer reviewed version

Queen's University Belfast - Research Portal:
[Link to publication record in Queen's University Belfast Research Portal](#)

Publisher rights
Copyright 2019 SAGE. This work is made available online in accordance with the publisher's policies. Please refer to any applicable terms of use of the publisher.

General rights
Copyright for the publications made accessible via the Queen's University Belfast Research Portal is retained by the author(s) and / or other copyright owners and it is a condition of accessing these publications that users recognise and abide by the legal requirements associated with these rights.

Take down policy
The Research Portal is Queen's institutional repository that provides access to Queen's research output. Every effort has been made to ensure that content in the Research Portal does not infringe any person's rights, or applicable UK laws. If you discover content in the Research Portal that you believe breaches copyright or violates any law, please contact openaccess@qub.ac.uk.

Open Access
This research has been made openly available by Queen's academics and its Open Research team. We would love to hear how access to this research benefits you. – Share your feedback with us: <http://go.qub.ac.uk/oa-feedback>

Abstract

Burnout has been included as an occupational phenomenon in the International Classification of Diseases. Health behavior promotion through workplace physical activity policies, incentives, and supports has the potential to be a multilevel, cost-effective intervention to preclude burnout.

Keywords: burnout; workplace health; sedentary; physical activity; health promotion

Main Text

In May 2019, the World Health Organisation classified burnout as an occupational phenomenon in the International Classification of Diseases (World Health Organization, 2019). The expression to be “burned-out” describes a condition where an individual is no longer able to “burn” or be productive in order to meet job expectations (Ochentel, Humphrey, & Pfeifer, 2018). Occupational burnout is a work-related stress syndrome characterised by three dimensions—exhaustion, cynicism, and lack of professional efficacy—that results in substantial losses for both employers and employees (Maslach & Leiter, 2016). The global burden of burnout through absenteeism, decreased productivity, staff turnover, and compensation costs in excess of \$300 billion annually (Bretland & Thorsteinsson, 2015).

For many of us, a significant portion of our waking hours is spent at work. Recent estimates indicate that a full-time worker clocks 38.9-40.5 hours of work per week (U.S. Bureau of Labor Statistics, 2018). Rapid changes to the modern labour market have resulted in a large increase of workers engaged in sedentary behavior—essentially low energy sitting time in waking hours—such as desk jobs and other low-activity occupations (Waters et al., 2016). Added to this, travel time spent sitting in motorised vehicles and leisure-time spent in front of computers and televisions has minimized movement from our daily lives. Estimates indicate that working age adults average 9.5 hours per day of sedentary time (NIOSH Total Worker Health, 2017). Studies have hypothesized that regular physical activity may constitute an effective buffer

against burnout, particularly for sedentary workers (Naczenski, Vries, Hooff, & Kompier, 2017).

Employers are exploring ways to promote healthy behaviors at workplaces in order to recruit and retain staff, support health and, in the process, boost productivity (Kaspin, Gorman, & Miller, 2013). Examples include subsidised gym membership, free yoga and mindfulness classes, weekly massages, treadmill desks or standing desks to break sitting time, mental health awareness training, provision of shower facilities, locker rooms to encourage physical activity such as cycling to work, and in some cases, incentives to encourage take-up of these activities (Tsai, Alterman, Grosch, & Luckhaupt, 2019). For participating employees, such programs have been associated with a reduced risk of chronic illness and lower health care costs (Levy & Thorndike, 2018). Workplace wellness programs also result in employee satisfaction, team bonding, enhanced social support and other positive outcomes (Magnon, Vallet, & Auxiette, 2018).

Burnout prevention and reduction through tailored physical activity programs is a non-invasive, cost-effective solution and can be easily implemented on a large scale. Workplace policies might be effective for promoting physical activity not only during work but also activities out of work (e.g., transport-related, leisure-time) (Crespo, Sallis, Conway, Saelens, & Frank, 2011; Fransson et al., 2012). Studies suggest that effects of workplace environments can spill over to leisure-time activity and impact entire lifestyles (Watanabe et al., 2018). Workplaces are hubs from which large groups with existing social networks can be targeted to promote healthy behaviors. Thus, workplaces represent viable intervention sites with the potential to affect a broad audience over time. Health behavior promotion through workplace physical activity policies, incentives and supports has the potential to be a multilevel, economical intervention to preclude burnout (Andersen et al., 2015). However, there is little evidence to confirm which aspects of physical activity are effective in reducing burnout to allow exercise professionals, individual employees, and employers to adapt workplace programs to the type, frequency and

duration most applicable to burnout as experienced by a particular employee (Naczenski et al., 2017). Since each workplace is unique, evidence is needed to design tailored workplace interventions that purposefully support the transition from initiation to maintenance of behavior change.

Human resources are the most important assets of any organisation. Building an evidence base to guide policy and promote interventions to reduce burnout incidence are paramount for workplace productivity. Realizing the potential of workplace policies and programs to promote healthy behaviors will be contingent on rigorous research that improves understanding of theoretical (e.g., self-determined motivation, confidence) and contextual (e.g., target group characteristics, physical and social environment) factors that may influence their effectiveness and uptake (Andersen et al., 2017; Pescud et al., 2015). A robust model for measuring and reporting on the benefits of employer investments in health and well-being may improve employers' understanding of the business case for investment.

Reversing the trend and reducing the causes that fuel the burnout cycle is the shared responsibility of clinicians, occupational safety and public health practitioners, and policy makers. Given the rising costs of healthcare and burden on local healthcare systems, this has profound implications for both employers and employees, requiring focused action to promote healthy workplaces that will, in turn, foster a healthy workforce.

Conflict of Interest: The Author declares that there is no conflict of interest.

References

Andersen, L. L., Fishwick, D., Robinson, E., Wiezer, N. M., Mockało, Z., & Grosjean, V. (2017). Job satisfaction is more than a fruit basket, health checks and free exercise: Cross-sectional study among 10,000 wage earners. *Scandinavian journal of public health*, 45(5), 476-484. doi:10.1177/1403494817698891

- Andersen, L. L., Proper, K. I., Punnett, L., Wynne, R., Persson, R., & Wiezer, N. (2015). Workplace Health Promotion and Wellbeing. *TheScientificWorldJournal*, 2015, 606875-606875. doi:10.1155/2015/606875
- Bretland, R. J., & Thorsteinsson, E. B. (2015). Reducing workplace burnout: the relative benefits of cardiovascular and resistance exercise. *PeerJ*, 3, e891-e891. doi:10.7717/peerj.891
- Crespo, N. C., Sallis, J. F., Conway, T. L., Saelens, B. E., & Frank, L. D. (2011). Worksite physical activity policies and environments in relation to employee physical activity. *Am J Health Promot*, 25(4), 264-271. doi:10.4278/ajhp.081112-QUAN-280
- Fransson, E. I., Heikkilä, K., Nyberg, S. T., Zins, M., Westerlund, H., Westerholm, P., . . . Kivimäki, M. (2012). Job strain as a risk factor for leisure-time physical inactivity: an individual-participant meta-analysis of up to 170,000 men and women: the IPD-Work Consortium. *Am J Epidemiol*, 176(12), 1078-1089. doi:10.1093/aje/kws336
- Kaspin, L. C., Gorman, K. M., & Miller, R. M. (2013). Systematic review of employer-sponsored wellness strategies and their economic and health-related outcomes. *Popul Health Manag*, 16(1), 14-21. doi:10.1089/pop.2012.0006
- Levy, D. E., & Thorndike, A. N. (2018). Workplace wellness program and short-term changes in health care expenditures. *Preventive medicine reports*, 13, 175-178. doi:10.1016/j.pmedr.2018.12.019
- Magnon, V., Vallet, G. T., & Auxiette, C. (2018). Sedentary Behavior at Work and Cognitive Functioning: A Systematic Review. *Frontiers in public health*, 6, 239-239. doi:10.3389/fpubh.2018.00239
- Maslach, C., & Leiter, M. P. (2016). Understanding the burnout experience: recent research and its implications for psychiatry. *World psychiatry : official journal of the World Psychiatric Association (WPA)*, 15(2), 103-111. doi:10.1002/wps.20311
- Naczenski, L. M., Vries, J. D. d., Hooff, M. L. M. v., & Kompier, M. A. J. (2017). Systematic review of the association between physical activity and burnout. *Journal of occupational health*, 59(6), 477-494. doi:10.1539/joh.17-0050-RA
- NIOSH Total Worker Health. (2017). *Using Total Worker Health® Concepts to Reduce the Health Risks from Sedentary Work*. Retrieved from <https://www.cdc.gov/niosh/docs/wp-solutions/2017-131/pdfs/2017-131.pdf>
- Ochentel, O., Humphrey, C., & Pfeifer, K. (2018). Efficacy of Exercise Therapy in Persons with Burnout. A Systematic Review and Meta-Analysis. *Journal of sports science & medicine*, 17(3), 475-484.
- Pescud, M., Teal, R., Shilton, T., Slevin, T., Ledger, M., Waterworth, P., & Rosenberg, M. (2015). Employers' views on the promotion of workplace health and wellbeing: a qualitative study. *BMC Public Health*, 15, 642. doi:10.1186/s12889-015-2029-2
- Tsai, R., Alterman, T., Grosch, J. W., & Luckhaupt, S. E. (2019). Availability of and Participation in Workplace Health Promotion Programs by Sociodemographic, Occupation, and Work Organization Characteristics in US Workers. *Am J Health Promot*, 890117119844478. doi:10.1177/0890117119844478
- U.S. Bureau of Labor Statistics. (2018). *2018 Annual Data Summary*. Washington D.C. Retrieved from <https://www.bls.gov/cps/cpsaat22.htm>.
- Watanabe, K., Kawakami, N., Otsuka, Y., & Inoue, S. (2018). Associations among workplace environment, self-regulation, and domain-specific physical activities among white-collar workers: a multilevel longitudinal study. *The international journal of behavioral nutrition and physical activity*, 15(1), 47-47. doi:10.1186/s12966-018-0681-5
- Waters, C. N., Ling, E. P., Chu, A. H. Y., Ng, S. H. X., Chia, A., Lim, Y. W., & Müller-Riemenschneider, F. (2016). Assessing and understanding sedentary behaviour in office-based working adults: a mixed-method approach. *BMC Public Health*, 16, 360-360. doi:10.1186/s12889-016-3023-z

World Health Organization. (2019). Burn-out an "occupational phenomenon": International Classification of Diseases [Press release]. Retrieved from https://www.who.int/mental_health/evidence/burn-out/en/