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Burned Out

Workplace Policies and Practices Can Tackle Occupational Burnout

Deepti Adlakha, PhD[1]

Abstract: Burnout has been included as an occupational phenomenon in the International Classification of Diseases. Health promotion through workplace physical activity policies, incentives, and supports has the potential to prevent burnout.

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

In May 2019, the World Health Organization 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 to meet job expectations (Ochentel, Humphrey, & Pfeifer, 2018). Occupational burnout is a work-related stress syndrome characterized 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 US$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 to 40.5 hours of work per week (U.S. Bureau of Labor Statistics, 2018). Rapid changes to the modern labor 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 motorized vehicles and leisure time spent in front of computers and televisions have 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 to recruit and retain staff, support health, and, in the process, boost productivity (Kaspin, Gorman, & Miller, 2013). Examples include subsidized 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).

Studies suggest that effects of workplace environments can spill over to leisure-time activity and affect entire lifestyles (Watanabe, Kawakami, Otsuka, & Inoue, 2018). Workplaces are hubs from which large groups with existing social networks can be targeted to promote healthy behaviors. 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 not only physical activity during work but also activities outside of work (e.g., transport-related, leisure time; Crespo, Sallis, Conway, Saelens, & Frank, 2011; Fransson et al., 2012).

Health promotion through workplace physical activity policies, incentives, and support has the potential to prevent burnout (Andersen et al., 2015). While there is little evidence to confirm which aspects of physical activity are effective in reducing burnout, studies suggest that programs that are multifactorial in nature are most effective (Naczenski et al., 2017). These bundled programs offer something for everyone. The occupational health nurse should consider the unique aspects of their workplace by developing programs that are tailored to the needs of the workers that also purposefully support the

DOI: 10.1177/2165079919873352. From [1]Queen's University Belfast. Address correspondence to: Deepti Adlakha, PhD, School of Natural and Built Environment, Queen's University Belfast, David Keir Building, 39-123 Stranmillis Road, Belfast BT9 5AG, UK; email: d.adlakha@qub.ac.uk.
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transition from initiation to maintenance of behavioral changes.

Workers are the most important asset of any organization. Building an evidence base to guide policy and promote interventions to reduce burnout incidence is paramount for workplace productivity. Occupational health practitioners and nurses have a key role to play in the effectiveness and uptake of workplace physical activity programs. They should address the theoretical (e.g., self-determined motivation, confidence) and contextual (e.g., physical and social environment) factors of the target group of workers to improve the implementation of health-promoting policies and practices in workplaces (Andersen et al., 2017; Pescud et al., 2015). A robust model for measuring, monitoring, 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 factors that fuel the burnout cycle is the shared responsibility of occupational safety and public health practitioners, clinicians, the workers, and policy makers. Given the rising costs of health care and burden on local health care 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.

ORCID iD

Deepti Adlakha https://orcid.org/0000-0002-1720-6780

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