Burnout in Social and Humanitarian Work:

Research and Recommendations

1. Burnout: 35 years of research and practice
By Wilmar B. Schaufeli Utrecht University, Utrecht, The Netherlands Michael P. Leiter Acadia University, Wolfville, Canada, and Christina Maslach University of California at Berkeley, Berkeley, California, USA

The paper analyses the use of the concept of ‘burnout,’ since the development of its use in the 1970s, focusing on how its meaning varies with context and the intentions of those using the term. One of the key ideas is that, in some countries, burnout is used as a medical diagnosis, in countries such as Sweden and the Netherlands, while in others, it is a non-medical terms. The latter implies having less stigma in terms of the need for psychiatric diagnosis.

The article strives to explain why the concept of burnout started to gain momentum in the USA and elsewhere in the mid-1970s and has remained such an important topic ever since. The authors suggest that its development seems related to the transitioning from an industrial to a service economy.

In the 21st century, burnout has been increasingly conceptualized as an erosion of engagement, which can be solved if proper measures are instituted to ensure work engagement. It remains to be seen if organizations are willing to ensure the needed resources to maintain exemplary efforts from their employees.

2. Burnout, workplace support, job satisfaction and life satisfaction among social workers in Spain: A structural equation model
By Isabel Homrados-Mendieta

This article analyses the effects of burnout through a study of 120 social workers in Malaga, Spain, who were selected through simple random sampling procedures. They were provided a questionnaire that they had to answer. For this study, the term burnout was defined as emotional exhaustion, depersonalization (which means perceiving no value in oneself or others) and low
personal accomplishment, which is a well-established definition that Maslach came up in the mid-1970s. In turn, social support involves providing help through emotional and material assistance as well as information assistance, taking place in a specific family, work and caregiving context.

The results of the structural equations model confirmed that burnout has a negative impact on workplace support, job and life satisfaction as well as the positive influence of workplace support on job satisfaction. Therefore, workplace support is an important job resource, as the presence of this support reduces the effect of burnout.

3. Gender differences in burnout: A meta-analysis

By Radostina K. Purvanova, John P. Muros


The article aims to determine the average effect size for gender differences in work-related burnout and highlight the extent to which gender differences are different, when gender-typing occupations and the degree to which labor policies are socially progressive.

The first question was raised to test a commonly held belief that women are more burnout than men. The study found that the response is quite nuanced. Regarding the two central burnout components, emotional exhaustion and depersonalization, women are more likely to report the former, whereas men report more the later. Additionally, these gender differences were larger in the USA compared to Europe. In turn, they did not vary in male-typed vs. female-typed professions.

The authors call for changes to reflect their findings. On the one hand, they highlight the fact that there is a danger in assuming that women are more burned out than men and that men are more resistant to stress than women, because it can result in discriminating against women on the assumption of their higher level of being affected by stress. It also means that men’s burnout experience might go unrecognized.

By revealing the different patterns of burnout by the two sexes, the authors suggest the needs to stop using a unidimensional measure of burnout, which only emphasizes the emotional exhaustion dimension of burnout from the Maslach Burnout Inventory.
4. Burnout and Turnover Intention Among Social Workers: Effects of Role Stress, Job Autonomy and Social Support
By Hansung Kim PhDSW & Madeleine Stoner PhD


This study focuses on the key and interactive outcomes of role stress, social support and job autonomy, meaning the individual’s ability to define immediate scheduling and tasks, in predicting burnout and turnover intention among social workers. It includes a subsample of 346 social workers identified from a cross-sectional random survey of 1,500 social workers registered in California. It was determined that role stress had a positive direct impact on burnout, while social support and job autonomy had a negative direct impact on turnover intention, but not burnout.

Results showed that job autonomy interacted with role stress in predicting burnout, while social support interacted with role stress in predicting turnover intention.

One of the key results of the study was to suggest that decentralized job conditions is essential for preventing burnout, and that managers should focus on creating supportive job conditions, in order to retain social workers facing high role stress. The study also calls for managers to monitor the work process closely and gives adequate guidelines to social workers in reaching client-related decisions.

5. Humanitarian Relief Workers and Trauma-related Mental Illness
By Ellen Connorton*, Melissa J. Perry, David Hemenway, and Matthew Miller

http://childhub.org/child-protection-online-library/humanitarian-relief-workers-and-trauma-related-mental-illness?listlang[]=***CURRENT_LANGUAGE***&language=

Analyzing the results of multiple studies, this article highlights the fact that relief work is more conducive to trauma-related mental illnesses and that humanitarian workers tend to suffer more from posttraumatic stress disorder, depression and anxiety. Based on the overall findings, the authors conclude that there are some key implications for humanitarian agency employees as well as for research. One of the conclusions emphasizes that aid workers should be informed of the risk of exposure to trauma and additional psychological effects. At the same time, agencies should create evidence–based support services in the field, provide culturally-sensitive support for national staff and ongoing support following agencies’ departure from the site and expatriates’ returning home.
By Christine Meinhardt
http://childhub.org//child-protection-online-library/social-support-institutional-support-key-element-prevention-burnout?listlang[]=***CURRENT_LANGUAGE***&language=

The article addresses the social and institutional support that humanitarian workers are provided by their organizations. The paper starts by exploring the concept of cumulative stress, which is crucial in allowing for burnout to occur. According to the author, the key causes for burnout are the lack of recognition, support and understanding from the humanitarian workers’ family, peers and institution. In terms of institutional support, the article mentions the vital importance of management support, from the leader or manager who communicates clearly and is focused on creating a pleasant working environment for all his staff, providing security and psychological support, by creating safe spaces, where a person can discuss with a peer or a professional about their problems, in order to defuse painful emotions, step back and reflect as well as enhance stress management skills.

7. Burnout in the Working Population: Relations to Psychosocial Work Factors
By Karin M. Lindblom, Steven J. Linton, Cecilia Fedeli, and Ing-Liss Bryngelsson

The piece highlights the fact that psychosocial work factors are key in association to burnout, regardless of profession. It focuses on levels of burnout in the general population in Europe regardless of occupation and the relations between burnout and psychological work factors. A cross-sectional survey focused on psychological distress, burnout and sleep problems, as well as psychosocial factors at work was sent to a random sample of 3000 participants, with ages between 20 and 60, with a response rate of 61%. There categories of burnout were differentiated: high level (18%), low level (19 %) and intermediate group (63 %).

The high level group was associated with women over 50-years-old, those experiencing psychological distress and those with a poor psychosocial work climate.

8. The Occupational Hazards of Humanitarian Aid Work Addressing the Physical and Psychological challenges that aid workers face on a daily basis
By David Meyers

This article reveals the different types of psychological concerns that humanitarian workers might be facing, while in the field. It focuses on three major ones: PTSD, burnout, and perhaps resulting from these two, post-deployment drug and alcohol abuse. The article reveals that there
is a lack of consistent data regarding the percentage of aid workers, who end up suffering from burnout, with numbers ranging from 14 to 40 percent. In terms of PTSD, a study in Germany revealed that up to 16 percent of aid workers returning from deployment suffered from it, around 33 percent of each results from rape, with another 23 percent experiencing life threats. The article further explores other threats to humanitarian workers, including exposure to infectious diseases and high exposure to sexual assault. The author subsequently explores the traditional methods that have been employed to address PTSD and burnout.

9. Social work, stress and burnout: A review
By Chris Lloyd, Robert King and Lesley Chenoweth


By assessing the social work literature, the article aims to determine if social workers face greater stress than other health professionals and what factors lead to stress and burnout among social workers. They concluded that it is hard to compare social workers with other fields, because most of the literature focused on anecdotes or compared social workers’ stress level with that of the general population rather than with that of comparable professions. The article therefore advocates for further research to analyze a greater range of potential factors of stress and for creating strategies that can alleviate stress, such as better team support and adding opportunities for supervision.

10. Managing Stress in Humanitarian Aid Workers, Good Practice Guide

This document aims to help organizations understand their stress management needs and develop an individualized staff care system. The Guidelines suggest eight principles, from policy until post-assignment support, which can be universally applied, but using indicators based on each organization’s individual context and culture. The document claims that around 30 percent of humanitarian workers report symptoms of post-traumatic stress disorder, when returning from the field.