Victims of work: burnout of health professionals and police officers

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Working in 2011…

- We have changed our relationship with the work, and actually people spend more time working, and are confronted with new demands.

- Job tasks allows satisfaction and intellectual grow but also have emotional demands.

- Job demands are different according job activities, but professionals who deals with people are specially vulnerable to stress elicited by the contact with others, specially if “others” are suffering: they need to deal with “others”’ emotions, and deal with their own emotions.
Working with people…

- During the time, dealing with emotions became a hard task that provokes stress, negative emotions, reduced professional accomplishment and, specially, decreases the quality of job tasks.

- Decrease of quality in job is specially important when professionals are dealing with others suffering, because they become less attentive, emphatic, and even cynic. Dealing with victims of violence present specific demands, and often health professionals and police officers are confronted with those situations.

- Victims of their work: compassion fatigue, burnout, occupational stress.
**Burnout:** a psychological syndrome related with human services

In 1974 (p.159) the psychiatrist Herbert Freudenberger wrote:

- “Burn-out as to fail, wear out, or become exhausted by making excessive demands on energy, strength, or resources”.

- “Burn-out is a common phenomenon among free clinic folk, or is it also something that strikes all or at least most staff members working in alternative self-help or crises intervention institutions”.

- “The professional - whether he or she be a psychologist, a physician, a nurse, a social worker, a dentist, an accountant, a lawyer, or an educator - needs to be aware of his tendency to over-identify with those he is working with and for, and that in the process he runs the risk of losing himself” (Freudenberger , 1975, p.77).
**Burnout:** a psychological syndrome related with human services

In 1976 (p.16) the social psychologist Christina Maslach studied:

- “poverty lawyers, physicians, prison personnel, social welfare workers, clinical psychologists, psychiatrists, child-care workers and psychiatric nurses”,

- concluding that these professionals “tend to cope with stress by a form of distancing that not only hurts themselves but is damaging to all of us as their human clients”,

- experiencing emotional exhaustion, cynism, detachment and loss of commitment with the job, sense of ineffectiveness, lack of accomplishment, etc.
Burnout appears as a result of:

- a long process where worker feels that he don’t have anymore resources to cope with the exigent demands of job task (Maslach, 1982; Maslach & Schaufeli, 1993).

- professionals experiences that are intense, stressful and implies deal with others suffering and demanding care anyway and anyhow and anywhere.

- A chronic imbalance in which demands are more than gives, a malady that spreads gradually and continuously over time, putting workers into a downward spiral from which it is hard to recover.
Burnout is (Maslach & Leiter, 1997):

- The erosion of the soul, expressed in:
  - * emotional exhaustion
  - * depersonalization/cynism
  - * reduced personal/professional accomplishment

- Professional groups involved in caring for victims have labour demands that easily lead to behaviours that diminish the quality of services, turning professional a victim of its work and hurting people they suppose to take care.
Aims:

- To alert the need to care emotional well-being of different professional groups involved in caring for victims.

- To describe the results of some empirical studies done in FPCEUP about burnout of health professionals (Forte & Queirós, 2010; Queirós, Dias & Carlotto, 2011) and police officers (Leitão da Silva & Queirós, 2010; Mendes & Queirós, 2010) and professionals who assist victims (Santos & Queirós, 2009).
Instruments (quantitative studies):

- Socio-demographic and professional characterization questions.


- Data collected between 2005 and 2010 in different master or PhD studies at FPCEUP and already presented in congress; anonym, confidential, volunteer, institutional authorizations.

- Alert: this is not a comparative study (need to control gender, professional activity, moment); to emphasize the need of take care of professionals' emotions.
Participants:

- Forte & Queirós (2010): 65 psychiatric nurses Porto 2007, 61% female, 51% with 22-33 years.

- Queirós, Dias & Carlotto (2011): 200 Porto and 200 Porto Alegre – Brazil health professionals 2010 (58% nurses, 15% doctors), 75-79 % female, mean age 37 or 33 years.

- Leitão da Silva & Queirós (2010): 70 police officers PM Porto 2010, 100% male, mean age 44 years.

- Mendes & Queirós (2010): 150 police officers PSP Porto 2005, 100% male, mean age 33 years.

- Santos & Queirós (2009): 67 professionals working with victims in APAV or Casas Abrigo Porto 2008, 100% female, mean age 30 years.
Emotional Exhaustion: moderate values, increasing in nurses along time, first sign of burnout… (nothing more to offer to others…)}
**Cynism:** very low levels, but increasing in nurses; most dangerous dimension because it aggressive behaviour, detachment…
Professional Accomplishment: high values, decreasing for nurses; sense of efficacy, engagement with job tasks
Conclusions:

- Burnout exists and affects professionals, decreasing the quality of their performance.

- If professionals who deals with victims of violence are burned-out, they will re-victimize the person.

- It is important to alert professionals whose jobs implies dealing with people suffering that is easy to become stressed, exhausted, empty. They must learn to identify those symptoms (some individual characteristics implies vulnerability) and to prevent them.
Conclusions:

- Organizations need to prevent burnout and avoid that their workers become victims of their work.

- Burnout / Compassion fatigue changes professionals’ well being and the quality of care provided to clients/patients.

- Preventing occupational stress will maintain a good capacity for compassion, empathy and commitment to the people whose suffering health professionals and police officers are called to reduce and help.
Empirical studies described (communications & publications):


