

burnout
sucks



Managing Burnout

Is it you,
or is it the fact that we're living
through the apocalypse?



By Jenny Applegate

Who tf are you?

- I'm jenny
- practicing x13 years, 10 at OHSU
- CPT, DBT, and DEI trained
- Just renewed my BLS

What tf is a social worker??

- LCSWs can diagnose
- like a psychiatrist but poor



What tf is burnout?

- most prevalent in healthcare/helping professions
 - chronic, complex, certifiably cool
 - emotional and often physical exhaustion
 - depersonalization/dehumanization
- leads to multiple negative consequences, including deterioration of quality of care and reduced personal accomplishment

Maslach, C., Jackson, S. E., & Leiter, M. P. (1997). Maslach Burnout Inventory: Third edition. In C. P. Zalaquett & R. J. Wood (Eds.), *Evaluating stress: A book of resources* (pp. 191–218). Scarecrow Education.

- Burnout is normal, expected, and acceptable in the course of our careers
 - Not reflective of who you are as a scientist, clinician, or the third thing
 - it *is* reflective of the fact that we are working within a capitalist, colonial and misogynist system



Mindfulness
and
meditation

freakout
in the
starbucks
drive thru

What is moral injury?

- Type of trauma (like PTSD trauma)
 - Needs actual treatment, not just “letting go” or candles and baths
 - Unlike burnout, it requires actual mental health treatment
 - Initially studied in combat veteran populations, now finding hospital staff with similar symptoms

Jinkerson, J. D. (2016). Defining and assessing moral injury: A syndrome perspective. *Traumatology*, 22(2), 122–130.

- Moral distress can develop into PTSD
 - insidious, chronic, rooted in panic/anger

Čartolovni A, Stolt M, Scott PA, Suhonen R. Moral injury in healthcare professionals: A scoping review and discussion. *Nurs Ethics*. 2021 Aug;28(5):590-602. doi: 10.1177/0969733020966776. Epub 2021 Jan 11.



Burnout, moral injury, and covid 19

- Unprecedented departure of RNs from ED and trauma
- Chronic concerns about staffing levels, acuity of pts, ability to provide actual care
- Limited opportunities for advocacy and change
- Other stuff
- De-stigmatization of mental health and medication
- Increased awareness of burnout and need for support
- Going back to normal vs. repeatedly resetting the clock
- Limited work/life balance—
all covid all the time

But Jenny, what can be done?

- Increasing emotional intelligence and comfortability recognizing emotions
 - “name it to tame it”
- Resisting urge to exile, rather than integrate intense emotions
- Learning to set and reinforce boundaries
- Now we get to do an activity!
- Common emotions and their functions:
 - Anger
 - Sadness
 - Grief
 - Guilt/shame
 - Apathy (vs depression)

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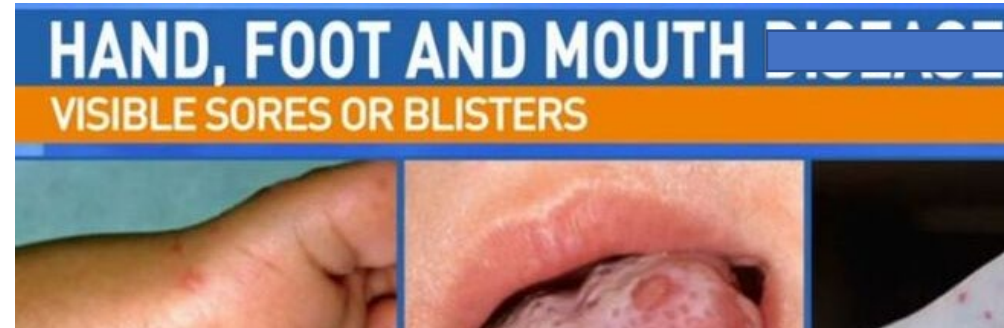
- Stress less



just kidding

Here are ideas:

- Get a therapist
 - especially a cool therapist
- Figure out what provides you the most sense of rest/relaxation
 - Ask your nervous system what it wants
 - Do a body scan
- Move your body
 - Even if it's just from the floor to the couch



- Humans are wired for connection, healing is collective
 - Get to know your attachment style
 - Figure out who helps you feel grounded
 - Somatics are cool!
 - <https://www.theembodimentinstitute.org/>

Thank you

This was the best presentation of your life