

RETHINKING BURNOUT: A NUANCED CONVERSATION FOR NURSING

Adrian Ramos FNP-C, AGACNP-BC

October 18, 2025

DISCLOSURE

I have no actual or potential financial disclosure or conflict of interest with the material in this presentation









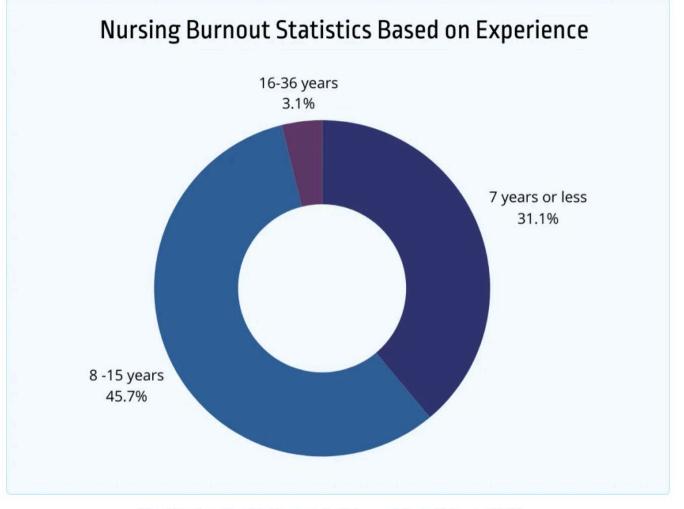










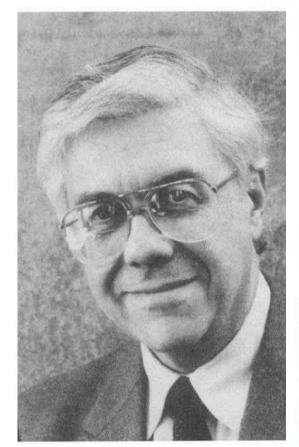


60+ Alarming Nursing Burnout Statistics and Facts [Jobera, 2025]

BURNOUT SYNDROME:

Work-related stress syndrome from chronic exposure to job stress.

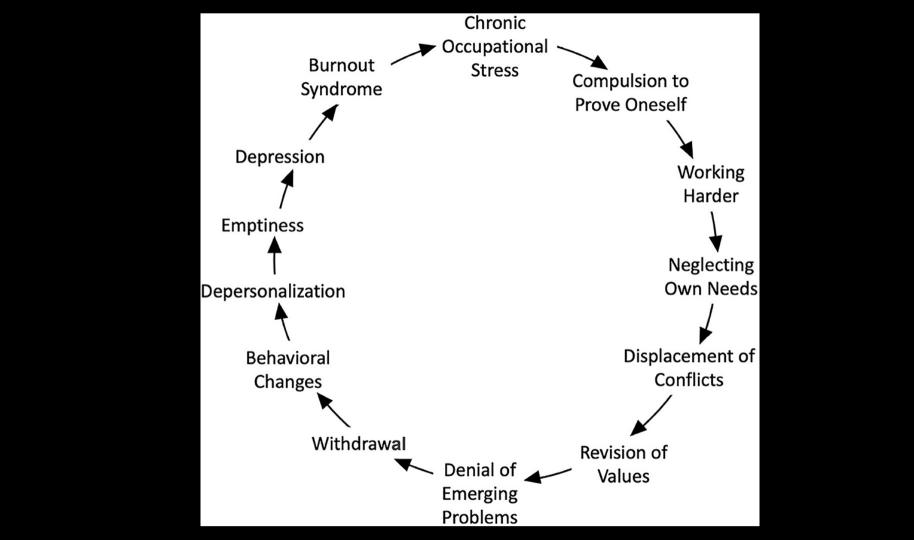
Characterized by emotional exhaustion, cynicism, depersonalization, and reduced professional efficacy/personal accomplishment





Freudenberger

Maslach





Dimension	Item statement
Emotional	1. I feel emotionally drained from my work (E1).
exhaustion	2. I feel used up at the end of the workday (E2).
	3. I feel fatigued when I get up in the morning because I have
	to face another day on the job (E3).
	6. Working with people all day is really a strain for me (E4).
	8. I feel burned out from my work (E5).
	13. I feel frustrated by my job (E6).
	14. I feel I am working too hard at my job (E7).
	16. Working directly with people puts too much stress on me (E8).
	20. I feel like I am at the end of my rope (E9).
Depersonalization	5. I feel that I treat some of my clients as if they were
	impersonal objects (D1).
	10. I have become more unsympathetic toward people since
	I took this job (D2).
	11. I worry that this job is hardening me emotionally (D3).
	15. I don't really care what happens to some of my clients (D4).
	22. I feel my clients blame me for some of their problems (D5).
Personal	4. I can easily understand how my clients feel about things (P1).
accomplishment	7. I very effectively deal with the problems of my client (P2).
	9. I feel I am positively influencing other people's lives through
	my work (P3).
	12. I feel very energetic (P4).
	17. I can easily create a relaxed atmosphere with my client (P5).
	18. I feel exhilarated after working closely with my clients (P6).
	19. I have accomplished many worthwhile things in this job (P7).
	21. In my work, I deal with emotional problems very calmly (P8).

Maslach Burnout Inventory

Dimensions and items to measure the MBI

BUT HAVE YOU TRIED TAKING A WALK OUTSIDE?

"Multifactorial syndrome requires multifactorial solutions"

"The environment and the individual have to change"

3 Pillars of Recovery

- Relief from stressors
- Recuperation via relaxation and sport
- Return to reality, abandon perfection

"Focus on self care and relationships"

"Find a life philosophy, religion, or spirituality" "Have you tried therapy?"





ETIOLOGICAL FACTORS

External Factors

High demands at work

Poor leadership

Lack of organizational influence

Lack of resources

Unclear role/duties/responsibilities

Lack of positive feedback

Lack of opportunities for growth/promotion

Bad work atmosphere (bullying, poor teamwork, etc)

Lack of social support

Internal Factors

High/idealistic expectation of self

Perfectionism

Poor self esteem

Need for recognition

Need to please others

Suppressing own needs

Feeling irreplaceable

Work as only meaningful activity

Work as substitute for social life

PERSONALITY AND TENDENCIES

Childhood Trauma

Avoiding conflict

Needing to please everyone

Inability to express your feelings in a healthy way

Low Self Esteem/Self-Critical

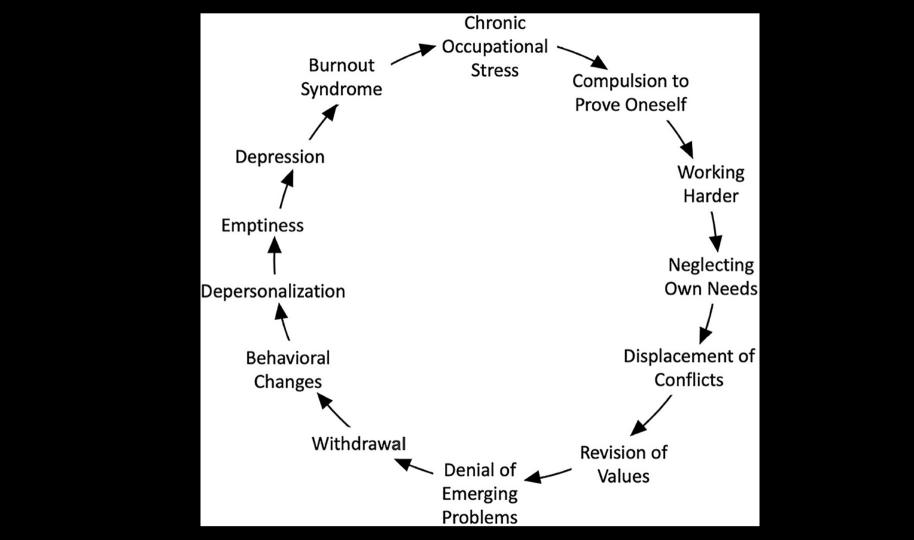
Self worth connected to how you are perceived by others Inability to find intrinsic value/worth

Dissociation

Tendency to suppress your own feelings untl they manifest as severe, somatic symptoms Feeling a diminished sense of achievement and self-efficacy, leading to a decreased sense of purpose and meaning in one's work.

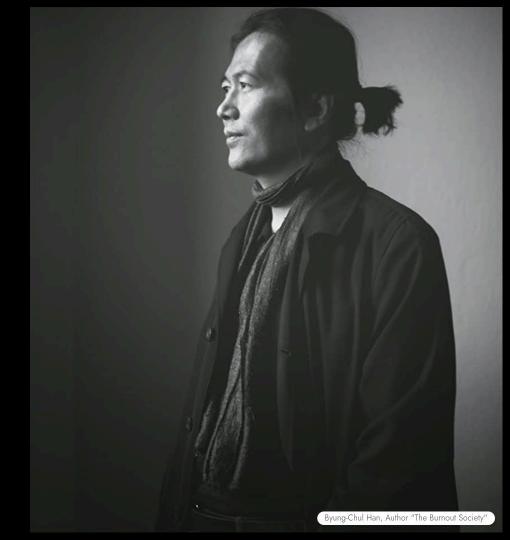
Introversion

A shorter "social battery life" can lead to burnout

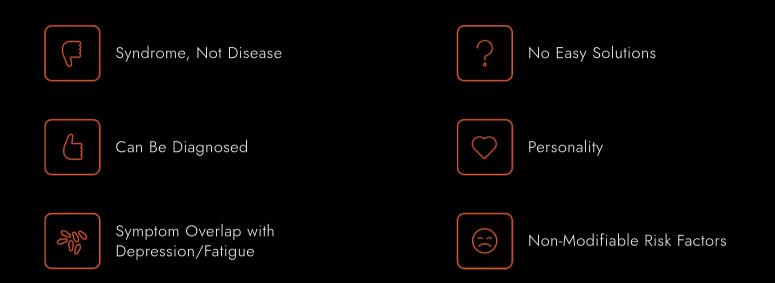


A NEW HOPE

Unexpected Insight and Solutions from Modern Philosophy



TIME OUT FOR A QUICK RECAP...



How do you recover from a syndrome characterized by cynicism and emotional exhuastion when the "cure" requires hope and emotional energy?

HOW DO YOU RECOVER FROM A SYNDROME CHARACTERIZED BY CYNICISM AND EMOTIONAL EXHUASTION WHEN THE "CURE" REQUIRES HOPE AND EMOTIONAL ENERGY?

THE PROBLEM IS SOCIETAL...



1. Society is Achievement-Based



2/ Limitless Possibilities
Create Limitless
Dissappointment

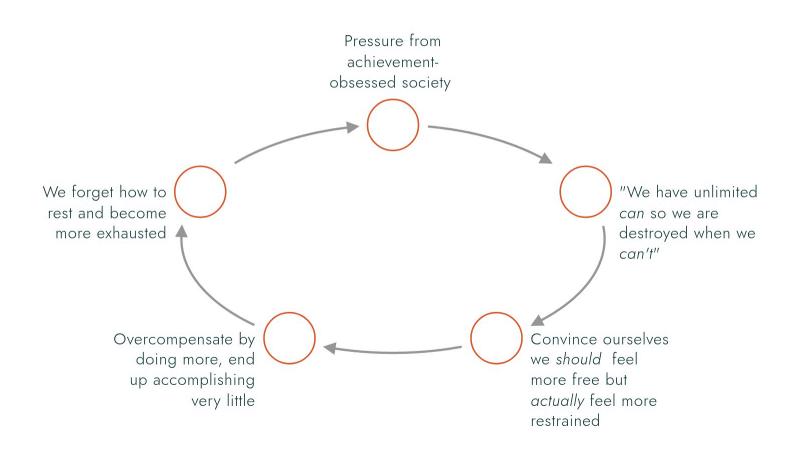


3/We Become Our Own Oppressors & Try to Achieve More



4/We Lose the Ability to Rest & Recover

... BUT QUICKLY BECOMES PERSONAL





SOME POTENTIAL SOLUTIONS

- 1 Contemplative Immersion
- 2 Redefine Your "Tired"



CONTEMPLATIVE IMMERSION

REFLECTION WHERE INDIVIDUALS ALLOW
THEMSELVES TO BE FULLY PRESENT AND
ABSORBED IN THEIR EXPERIENCES,
RATHER THAN CONSTANTLY STRIVING
FOR PRODUCTIVITY OR ACHIEVEMENT,

REDEFINE TIRED



'utterstock.com · 13/7



⁴erstock.com · 69770*

l Tired We Tired



The Shawshank Redemption, Warner Bros Entertainment

Marvel at what things are, take things as they come

PRACTICAL ADVICE

STRATEGIES

Practice Mindfulness

Recognize your emotional/psychological state, patterns, and habits Recognize when you are mindlessly multi-tasking

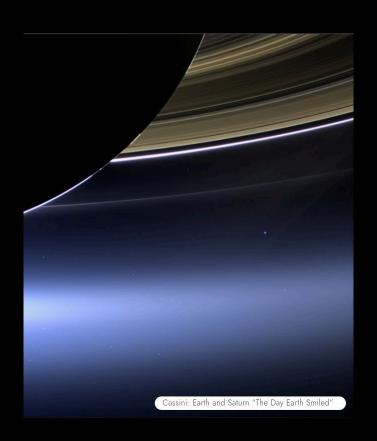
Identify Trouble Spots

What coping mechanisms are destructive? What can you replace them with?

Set Boundaries

Learn to say no without guilt or judgment Learn when to step out and when to step back in

STRATEGIES



- Fully Immerse Yourself in Something
 Find something that truly breaks the cycle
- Don't Be Tired Alone
 Find people to be "we tired" with
- Sanity Over Salary

Your health, wellness, and presence is *infinitely* more important than financial thresholds you create for yourself



BE KIND TO YOURSELF AND BE PATIENT

The only way out is through.



REFERENCES

- De Hert, S. (2020). Burnout in healthcare workers: prevalence, impact and preventative strategies.
 Local and regional anesthesia, 171-183.
- Han, Byung-Chul. The burnout society. Stanford University Press, 2015.
- Maslach, C., Schaufeli, W. & Leiter, M. (2001). Job Burnout. Annual Review of Psychology, 397-422.
- Mealer, M. et al. (2014). Feasibility and acceptability of a resilience training program for intensive care unit nurses. American Journal of Critical Care, 23(6), 97-105.
- Schwenk, T. L., & Gold, K. J. (2018). Physician burnout—a serious symptom, but of what?. Jama, 320(11), 1109-1110.
- Shanafelt, T. D., & Noseworthy, J. H. (2017, January). Executive leadership and physician well-being: nine organizational strategies to promote engagement and reduce burnout. In Mayo Clinic Proceedings (Vol. 92, No. 1, pp. 129-146). Elsevier.
- Zisook, S., Doran, N., Mortali, M., Hoffman, L., Downs, N., Davidson, J., ... & Moutier, C. Y. (2022). Relationship between burnout and Major Depressive Disorder in health professionals: A HEAR report. Journal of Affective Disorders, 312, 259-267.