



National Center for
PTSD
POSTTRAUMATIC STRESS DISORDER

Information for Managers

Managers can support employees struggling with burnout and secondary traumatic stress (STS) by creating a workplace culture that facilitates discussion of the work challenges faced by staff. Effective managers work toward ensuring that employees feel a sense of work group cohesion, fairness and control, and have access to good role models and supervisor support. This is particularly important because there is evidence that organizational interventions to increase support and resources produce longer-lasting effects on burnout and STS than individual approaches.^{1,2}

Factors which decrease burnout and STS include:

- Job autonomy, flexibility or control^{3,4}
- Decreased workload⁵
- Job security
- Staff engagement
- Workgroup cohesiveness⁶
- A culture of participation, equality and fairness⁷
- Provision of accurate and relevant information about work-related resources, policies and changes
- Opportunities for variability in work tasks for those who prefer variability⁸
- Predictability of work tasks for those who prefer predictability⁹
- Opportunities for promoting employees' mental wellbeing
- Strengthened role of managers¹

In VA, the following organizational factors have been shown to be predictive of job satisfaction:¹⁰

- Procedural justice, where a supervisor provides fair and accurate ratings of employee performance
- Autonomy, or the ability to have a say about what happens on the job
- Civility, in which co-workers and supervisors are courteous and considerate of one another
- Psychological safety, or the feeling that workgroup members are able to bring up problems and tough issues

As an employer, manager or supervisor, you can support your employees in the following ways:¹¹

- Make resources available to your employees. Make sure that a list of resources (i.e., tests, manuals, trainings, benefits information, etc.) and information on how to access them is provided regularly to all employees, and encourage use of those resources. You can also make employees aware of occupational health resources, your Employee Assistance Program (EAP), or your organization’s human resources office when appropriate.
- Consider reducing employee workload. You can support employees by reducing caseload size, dividing responsibility for trauma patients among multiple providers, providing flexibility in work hours or locations, and providing support staff to manage administrative issues.⁸
- Provide tailored job planning. Providing resources that support employee balance does not guarantee that these resources will be used appropriately.¹² Therefore, it may be more effective to combine these resources with the direct provision of guidance regarding career decisions as well as information regarding career opportunities within the organization. Managers, mentors, and human resources counselors are in a good position to meet with employees in such situations.¹³ Additionally, make career opportunities sufficiently customized to enable employees to achieve their personal conception of career success. You can only do this by regularly engaging in discussions with employees about their job attributes and career plans.
- Encourage workgroup cohesiveness. Workgroup cohesiveness is defined as the degree to which an individual believes that the members of his or her work group are willing to work together and are committed to the completion of the tasks and goals of the group. Cohesiveness is directly related to job satisfaction and reduced burnout.⁶ Facilitating cohesiveness involves encouraging discussion and healthy debate among team members, including discussing the impact of work on their lives. You can also offer peer support groups for staff.
- Provide fair and balanced feedback, as well as support, to employees. Staff members’ perception of supervisors as fair reduces their susceptibility to burnout and STS.¹⁴ Rewarding employees for their work by sharing positive customer feedback, offering bonuses, or instituting flexible work arrangements, for example, is crucial. Employees may be able to tolerate a heavy workload if they value their work and feel they are doing something important, or if they feel well-rewarded for their efforts.
 - For employees who report more significant burnout, providing feedback about their daily performance can be used as a starting point for behavior change.¹⁵

- For those affected by working with trauma survivors, be alert to changes in their behavior with and reactions to clients. Also watch for signs of withdrawal in counseling or supervisory relationships, feelings of being overwhelmed, and signs of stress and an inability to engage in self-care. Talk with the employee about the effects of work using a collaborative strength-based approach that educates on the potential for growth. Counsel the employee on ways to recognize and foster that growth, such as by becoming more open-minded, tolerant, patient, appreciative, and flexible.¹⁵
- Another option is to use mobile applications that monitor and offer feedback on daily fluctuations in energy and engagement.¹⁶
- Design jobs that facilitate intrinsic motivation. Some strategies include: providing employees with autonomy in designing and planning their tasks and schedules, offering challenging assignments, and providing a work climate in which the employee feels connected to others in the organization.¹⁷ It may also help to provide staff development opportunities, including training on trauma-specific issues and evidence-based practices. Encouraging diversity in staff responsibilities (e.g., supervision, research, etc.) may also help.
- Create a work culture that supports balance. Employees best learn life balance by observing and emulating the behavior of mentors and managers who have themselves adopted a whole-life perspective.¹⁸ Supervisors who separate work and home are more likely perceived as work-life-friendly role models, and employees with work-life-friendly role models are more likely to segment between work and home. Keeping a boundary between work and home allows employees to switch off from work demands, promoting recovery and continued motivation in the long run.^{19,20} Additionally, supervisors displaying high self-awareness are more likely to have teams that show lower levels of burnout, as opposed to supervisors who over-rate their own performance.^{21,22}



Keep in mind that the factors contributing to burnout may be different across employees. For instance, work demands have been found to be related to the exhaustion component of burnout, and job resources to the low professional efficacy component of burnout.^{23,24} The table below details some of the findings about employee scores on burnout scales, along with recommendations for addressing problems:

Employee Type	Scores	Recommendation
High exhaustion only	Significantly higher scores on work load, anxiety and depression are present, with more favorable scores on variables that may reflect job resources, such as supervisor fairness, matching values and receiving feedback about doing a good job.	Find ways to decrease work load and enhance stress coping skills.
High exhaustion accompanied by disengagement and cynicism	Decreases in experienced fairness and increases in already high workload.	Find ways to decrease work. Provide positive feedback when the employee is doing a good job. Promote activities that align with the employee’s values.
Disengaged or cynical attitude towards work, in the relative absence of exhaustion	Higher scores on anxiety and depression in the relative absence of work-related exhaustion have been noted, and may play an important role in the development of burnout if exhaustion increases. This is a less stable profile, more likely to resolve than other profiles.	Offer clear work expectations and boundaries. Provide mental health support as needed.
Low professional efficacy	A sense of not having access to work resources, not being valued for work, or not being in control of workload or schedule.	Make positive changes in job resources, such as improved sense of community, more frequent rewards, and increased control of schedule and work tasks.

The distinctions above are important because interventions may be more appropriate for certain subgroups than others.²⁵

References

1. Bagnall, A. M., Jones, R., Akter, H., & Woodall, J. (2016). Interventions to prevent burnout in high risk individuals: Evidence review. Project Report. Public Health England. Retrieved from:
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/506777/25022016_Burnout_Rapid_Review_2015709.pdf
2. Bober, T., & Regehr, C. (2006). Strategies for reducing secondary or vicarious trauma: Do they work? *Brief Treatment and Crisis Intervention, 6*, 1-9. doi:10.1093/brief-treatment/mhj001
3. Hättinen, M., Kinnunen, U., Mäkikangas, A., Kalimo, R., Tolvanen, A., & Pekko-nen, M. (2009). Burnout during a long-term rehabilitation: Comparing low burnout, high burnout—benefited, and high burnout—not benefited trajectories. *Anxiety, Stress & Coping: An International Journal, 22*, 341–360. doi:10.1080/10615800802567023
4. Lizano, E. L., & Barak, M. M. (2015). Job burnout and affective wellbeing: A longitudinal study of burnout and job satisfaction among public child welfare workers. *Children and Youth Services Review, 55*, 18-28. doi:10.1016/j.childyouth.2015.05.005
5. Boersma, K., & Lindblom, K. (2009). Stability and change in burnout profiles in time: A prospective study in the working population. *Work & Stress, 23*, 264–283. doi: 10.1080/02678370903265860
6. Lasalvia, A., Bonetto, C., Bertani, M., Bissoli, S., Cristofalo, D., Marrella, G., Ceccato, E., Cremonese, C., De Rossi, M., Lazzarotto, L., Marangon, V., Morandin, I., Zucchetto, M., Tansella, M., & Ruggeri, M. (2009). Influence of perceived organisational factors on job burnout: Survey of community mental health staff. *The British Journal of Psychiatry, 195*, 537-544. doi:10.1192/bjp.bp.108.060871
7. Maslach, C., & Leiter, M. P. (2008). Early predictors of job burnout and engagement. *Journal of Applied Psychology, 93*, 498-512. doi:10.1037/0021-9010.93.3.498
8. Hensel, J. M., Ruiz, C., Finney, C., & Dewa, C. S. (2015). Meta-analysis of risk factors for secondary traumatic stress in therapeutic work with trauma victims. *Journal of Traumatic Stress, 28*, 83-91. doi:10.1002/jts.21998
9. Leiter, M. P., Hakanen, J. J., Ahola, K., Toppinen-Tanner, S., Koskinen, A., & Väänänen, A. (2013). Organizational predictors and health consequences of changes in burnout: A 12-year cohort study. *Journal of Organizational Behavior, 34*, 959-973. doi:10.1002/job.1830

10. Yanchus, N. J., Periard, D., Moore, S. C., Carle, A. C., & Osatuke, K. (2015). Predictors of job satisfaction and turnover intention in VHA mental health employees: A comparison between psychiatrists, psychologists, social workers, and mental health nurses. *Human Service Organizations: Management, Leadership & Governance*, *39*, 219-244. doi:10.1080/23303131.2015.1014953
11. Voss Horrell, S. C., Holohan, D. R., Didion, L. M., & Vance, G. T. (2011). Treating traumatized OEF/OIF Veterans: How does trauma treatment affect the clinician? *Professional Psychology: Research and Practice*, *42*, 79-86. doi:10.1037/a00024163
12. Allen, T. D., Johnson, R. C., Kiburz, K. M., & Shockley, K. M. (2013). Work–family conflict and flexible work arrangements: Deconstructing flexibility. *Personnel Psychology*, *66*, 345-376. doi:10.1111/peps.12012
13. Baruch, Y. (2006). Career development in organizations and beyond: Balancing traditional and contemporary viewpoints. *Human Resource Management Review*, *16*, 125-138. doi:10.1016/j.hrmr.2006.03.002
14. Breevaart, K., Bakker, A. B., Hetland, J., Demerouti, E., Olsen, O. K., & Espevik, R. (2014). Daily transactional and transformational leadership and daily employee engagement. *Journal of Occupational and Organizational Psychology*, *87*, 138–157. doi:10.1111/joop.12041
15. Råbu, M., Moltu, C., Binder, P. E., & McLeod, J. (2015). How does practicing psychotherapy affect the personal life of the therapist? A qualitative inquiry of senior therapists' experiences. *Psychotherapy Research*, 1-13. doi:10.1080/10503307.2015.1065354
16. Bakker, A. B., & Costa, P. L. (2014). Chronic job burnout and daily functioning: A theoretical analysis. *Burnout Research*, *1*, 112-119. doi:10.1016/j.burn.2014.04.003
17. ten Brummelhuis, L. L., ter Hoeven, C. L., Bakker, A. B., & Peper, B. (2011). Breaking through the loss cycle of burnout: The role of motivation. *Journal of Occupational and Organizational Psychology*, *84*, 268-287. doi:10.1111/j.2044-8325.2011.02019.x
18. Thompson, C. A., Beauvais, L. L., & Lyness, K. S. (1999). When work–family benefits are not enough: The influence of work–family culture on benefit utilization, organizational attachment, and work–family conflict. *Journal of Vocational Behavior*, *54*, 392-415.
19. Hecht, T. D., & Allen, N. J. (2009). A longitudinal examination of the work–nonwork boundary strength construct. *Journal of Organizational Behavior*, *30*, 839-862. doi:10.1002/job.579

20. Park, Y., Fritz, C., & Jex, S. M. (2011). Relationships between work-home segmentation and psychological detachment from work: The role of communication technology use at home. *Journal of Occupational Health Psychology, 16*, 457-467. doi:10.1037/a0023594
21. Koch, A. R., & Binnewies, C. (2015). Setting a good example: Supervisors as work-life-friendly role models within the context of boundary management. *Journal of Occupational Health Psychology, 20*, 82-92. doi:10.1037/a0037890
22. Hernandez, W., Luthanen, A., Ramsel, D., & Osatuke, K. (2015). The mediating relationship of self-awareness on supervisor burnout and workgroup Civility & Psychological Safety: A multilevel path analysis. *Burnout Research, 2*, 36-49. doi:10.1016.j.burn.2015.02.002
23. Bakker, A. B., Demerouti, E., & Verbeke, W. (2004). Using the job demands-resources model to predict burnout and performance. *Human Resource Management, 43*, 83-104. doi:10.1002/hrm.20004
24. Demerouti, E., Bakker, A. B., Nachreiner, F., & Schaufeli, W. B. (2001). The job demands-resources model of burnout. *Journal of Applied Psychology, 86*, 499-512. doi:10.1037/0021-9010.86.3.499
25. Boersma, K., & Lindblom, K. (2009). Stability and change in burnout profiles over time: A prospective study in the working population. *Work & Stress, 23*, 264-283. doi:10.1080/02678370903265860