

# **Burnout – An Exponential Rise**

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*Mental health at workplaces has taken a new dimension since the pandemic spread across the world. This research paper is an exploratory paper to understand the impact of COVID-19 on workplaces and their employees in the context of mental health. The pandemic highlighted the need to look at human beings as a whole self. Mental health became a reality as felt in waves of the Great Resignation movement. Burnout was experienced by many employees who were working already in high-pressure jobs pre-COVID. This study explores the impact of pandemic on health care workers (HCW) in hospitals and academics working in the tertiary sector in Australia. This is a qualitative study based on secondary research and partly based on the lived experience of the author. This paper delves into the causes of workplace stress and its impact on well-being of the workforce. Some strategies for managing these issues are recommended. Limitations of the paper include limited research and only two industry sectors in Australia are explored as part of this research.*

*Keywords: physical health, mental health, spiritual health, social health- social capital, financial health, well-being at work, hybrid workplaces, post-COVID-19, the Great Resignation movement, burnout, checkout at work, walkouts, workplace stressors, health sector, higher education sector*

## **INTRODUCTION**

The mental health and physical health of an individual are interdependent. If physical health goes down on an individual it hurts mental health and vice versa. Hence to be a healthy and productive employee, both physical and mental health is important.

This paper explores the impact of COVID-19 on the mental health of employees and subsequent resignations and burnouts. The paper goes deeper into the type of sectors where employees got affected and how are they coping. This paper discusses a range of factors that have an impact on the well-being of an individual coming to work for an organization. It also explores what can be done by employers to create a workplace that accepts people as unique individuals who are highly sensitive to the external and internal environment.

Pre-COVID-19 the physical health of employees was the primary concern of employers through various programs like fire safety, first aid training, manual handling training, and other similar strategies in the workplace. Some progressive organizations offered support for mental health issues were looked at by offering EAP (Employee Assistance Program), flexible work framework, and similar strategies.

During COVID and Post- COVID hybrid workplaces or remote workplaces became the reality. The stress levels among the employees peaked during COVID due to the threat to life in the external and internal

environment, threat of losing their job due to the business downturn, the threat of losing close family members living overseas, the sense of isolation and desperation, sense of having no control due to non-availability of cure to the disease for some time.

### **Impact of the Pandemic on Australia**

The intangible impact of the Pandemic included- Physical and mental exhaustion; overworked; Burnout; Physical Isolation; Loneliness; high levels of anxiety; no work-life balance.

Employees reported Work Intensification; Workers laid off in mass across industries; Large scale Redundancies; Extreme uncertainty; Job Insecurity; Higher work pressure; No overtime or time in lieu in many cases; Excessive workload.

Factors that led to burnout included COVID-19 in Australia and its escalation; Extremely High pressure at work; Poor leadership styles; Deteriorating physical and mental capabilities to work under continued high pressure; People in an office environment; People experienced constant headaches; Deteriorating eyesight; Frozen shoulders; Backache issues; Spondylitis; sleep disorders – COVID-insomnia.

### **Employment Levels**

As per ABS (Australian Bureau of Statistics) reports, in the March 2020 quarter, Australia closed its borders to non-residents and schools began to close. The underemployment rate hit a historic high of 13.8 percent with 1.8 million people working reduced or no hours for economic reasons. The Accommodation and Food Services industry was the hardest hit with a 35 percent drop in payroll jobs. In April, overseas arrivals plummeted to just 21,000 from a record high of 2.3 million in January. In the June 2020 quarter, the GDP dropped by a record 7 percent, the second quarter in a row of falls. The following month, the unemployment rate peaked at 7.5 percent — the highest in over 20 years. The trend of rising unemployment continued during the pandemic. Currently, there are more jobs available to be filled in Australia than the people unemployed. There are reported skill shortages in every industry, especially in the construction, and health care sectors.

The pandemic led to high levels of unemployment in Australia. This included a decline in the participation rate of people. Reports of health staff on furlough in Victorian hospitals.

Intensive care units across Victoria were finding it difficult to fill positions due to a lot of staff being on furlough after exposure to COVID-19 (Cunningham and Daw, 2022). The Age newspaper revealed that across Australia, more than 700 critical care staff were unavailable for work.

One of the defining characteristics of the Australian higher education system since the 1980s has been the increase in the number of fee-paying international students. In 1986, universities were allowed to charge full fees to international students. Since then, there has been a remarkable growth in the number of international students. Australia is one of the world's top destinations for international students and it is in the top three countries for international student study. On a per capita basis, Australia leads in the number of international students (Gardner, 2013). Alongside this growth of international students, there has emerged a complex set of regulatory arrangements around visas and pathways for potential migration. As with the income contingent loans scheme, this regulatory apparatus has been central to managing the marketization of higher education and its potential risks. These international revenues have been crucial to what we have called the 'off-loading strategy', in managing the contradictions of the system by off-loading its costs onto international students (Jayasuriya, 2021).

### **Mental Health Issues**

In a study by Smallwood et al (2021) a total of 9518 survey responses were received; from the 9518 participants. The conclusions drawn from the survey results indicate that the COVID-19 pandemic is associated with significant mental health symptoms in frontline healthcare workers. Crisis preparedness together with policies and practices addressing psychological well-being is needed (Smallwood et al., 2021).

Another Australian study reported Health Care Workers (HCW) in Australia showed significant symptoms of moderate-severe level depression (21%), anxiety (20%), and posttraumatic stress disorder (PTSD; 29%), associated with burnout, prior psychiatric history, professional and resilience (Hannah et al., 2022). The study reported that despite low levels of COVID contact, moderate to high levels of psychological distress were reported. Continued monitoring and support for HCWs' mental well-being are warranted as the COVID-19 pandemic develops. There is shortage of doctors in Australia. Due to rising pressure at work, one in three junior doctors have reported being bullied or harassed at workplace or they have witnessed such behaviour in the hospitals. Several doctors are leaving the profession as a result.

The surveys were disseminated six times from August 2020 to March 2021, with the first three data collection points distributed during a state-wide lockdown. A total of 558 responses from various professional roles within the hospital over the survey period were included in the sample. Analysis of variance indicated significant main effects for the psychological variables across time, age, and workload. Hospital staff reported an increase in burnout levels throughout the eight months. Significant negative relationships were observed between resilience and burnout, and between resilience and stress. A backward regression highlighted the contribution of resilience, stress, age, and nursing roles to burnout. Hierarchical regression analysis indicated that resilience contributed to the stress-burnout relationship. This study strengthens the evidence between resilience and burnout among healthcare workers and hospital staff and highlights the need for psychological well-being programs to be implemented for hospital staff impacted by a prolonged worldwide pandemic (Armstrong, 2022).

High level of unemployment amongst the casual staff in all industries across Australia especially the hospitality and higher education sector. Australian Government came forward by helping the job seeker, job keeper, and other schemes to help reduce unemployment or help unemployed people.

A year into the coronavirus pandemic, many in academia are experiencing a state of chronic exhaustion known as burnout. Although it is not a medical condition and can occur in any workplace where there is stress, burnout is recognized by the World Health Organization as a syndrome. Its symptoms are physical and emotional and include feelings of energy depletion or exhaustion; increased mental distance from and feelings of negativity or cynicism towards one's job; and a reduced ability to do one's work (Gewin, 2021). In a poll of 1,122 US faculty members that focused on the effects of the pandemic, almost 70% of respondents said they felt stressed in 2020, more than double the number in 2019 (32%). The survey, conducted last October by *The Chronicle of Higher Education* and financial-services firm Fidelity Investments in Boston, Massachusetts, also found that more than two-thirds of respondents felt fatigued, compared with less than one-third in 2019. During 2020, 35% felt angry, whereas just 12% said that in 2019. The results were released last month.

What's causing staff turnover? Long hours, low pay, negative workplace cultures, job insecurity, lack of recognition, no work-life balance, and the impacts of COVID are all leading people to reassess their lives.

### **What Do Academics Say About Their Work?**

McGaughey et al (2021) interviewed 35 academic staff across the five Western Australian universities for a research project. They wanted to know how they experienced working in a university during pandemic lockdowns and their aftermath – a time of crisis, change, and complexity.

The participants represented a broad range of disciplines and levels of academic leadership. They discussed the work environment, university management during the pandemic, the challenges they and their colleagues encountered, and how they coped.

Participants described their universities as being exploitative, oppressive, toxic, and fiscally driven. They felt themselves being dehumanized and demoralised by management. Most reported experiencing feelings associated with burnout, including anxiety, cynicism, depression, and exhaustion.

Some academics expressed their feelings:

*“Colleagues are tired. They are burnt out. That’s my observation. There’s a lot of burnout. But they’re still going.”*

“In reality, they view us as a tiresome necessity and resent the meager pay they give us. After years of dedicated teaching and multiple awards, I was dismissed over Zoom in March 2020 when Covid-19 hit.” 2/3

“Of course, they waited until I had shifted the course online then the full-time academic simply used my work and took over.” 3/3

(Whitsed and Girardi, 2022)

Respondents report work-related stress, digital fatigue, and a negative impact on work-life balance; as well as significant concerns over potential longer-term changes to academia as a result of the pandemic. Respondents also articulate their frustration with Australia’s neoliberal policy architecture and the myopia of quasi-market reform, which has spawned an excessive reliance on international students as a pillar of income generation and therefore jeopardized institutional solvency – particularly during the pandemic (McGaughey, 2021).

In higher education sector in Australia- causes of burnout include the casualization of highly qualified staff in name of offering flexibility; work intensification; tighter deadlines; lower turnaround times for marked assignments; reduced time is given to delivering the same content with reduced pay; more to be done in lesser time. Academics working in the insecure sector hit the hardest.

It is observed that the sessional teaching business model has given a lot of flexibility to educational institutions to meet the changing requirements of the business during pre-pandemic times. Teaching staff enjoyed the flexibility and the higher money as a casual rate. The initial period is usually challenging and fun for the teaching staff. Stretch goals and the achievement of those stretch goals are exhilarating. But teachers soon realize that the uncertainty before each semester starts is affecting their health and gives extreme stress to their minds and body. Health issues creep up in a few years of casual work like cancer, death due to high cholesterol, and death in many cases. Casual academics are underpaid for the amount of work expected from them. A lot of unpaid hours of hard work expected from the sessional academics.

### **Another Dimension of Pressure on Employees Due to the Pandemic in Western Countries**

In western countries like Australia where parents are living in their original home country and their children have migrated to Australia, the pressure is added as their children (the employees) felt helpless. They could see the sufferings of the people living in other countries but could not go and help due to lockdowns and restricted opportunities to travel.

Intensification of stress due to COVID – 19 in Australia led to anxiety for their own lives and also worried for the lives of their parents and extended families living overseas.

Anxiety built up due to the bad covid situation across the world with millions of people infected and dying across the world. News in the media constantly showed ambulances filled with covid patients, no hospital beds, and mass cremations.

Absence of social support system provided by extended family networks in the home country.

### **Burnout – A Reality Faced by Many**

As per WHO, burnout is an occupational phenomenon stemming from the organization rather than from the medical condition of an individual. It is a state where a person feels totally exhausted and drained both physically and mentally.

A Gallop study reported 70% of respondents had experienced burnout at some point in life. 40% of those experienced burnout during the pandemic (Willis, 2022).

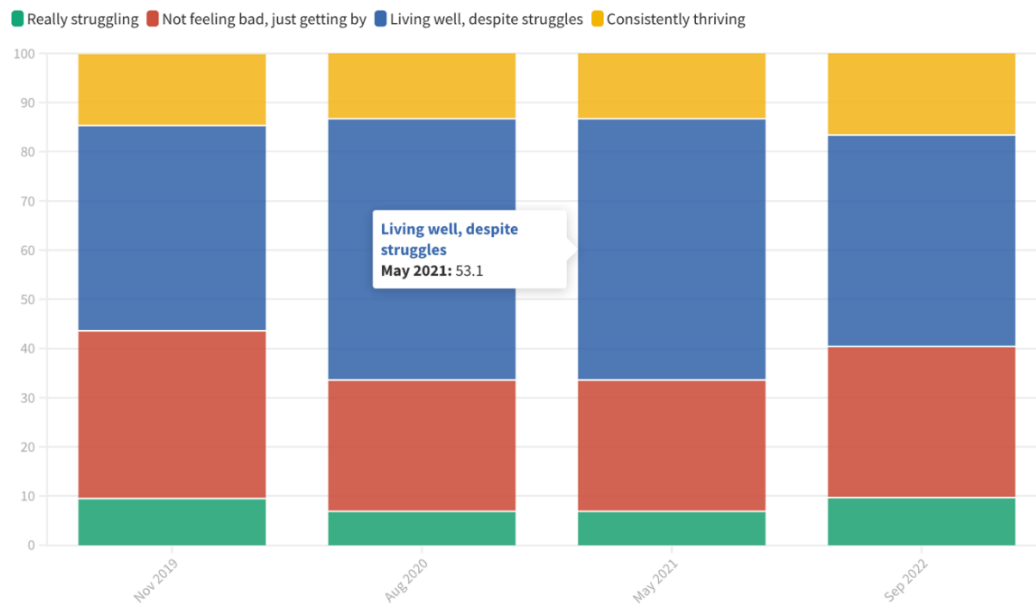
The factors that led to burnout included COVID-19 in Australia and its escalation; Extremely High pressure at work; Poor leadership styles; Deteriorating physical and mental capabilities to work under continued high pressure; People in an office environment; People experienced constant headaches; Deteriorating eyesight; Frozen shoulders; Backache issues; Spondylitis; sleep disorders – COVID-insomnia.

### Signs and Symptoms of Burnout Included

Increased level of Sensitivity; Increased level of irritability; Getting emotional very quickly- crying at work; Sleepless nights; High level of anxiety; High stress; Inability to handle politics at work; Not wanting to come to work; Losing concentration; Wanting to give up; Lower productivity; lower engagement levels; Physical symptoms- sickness- stomach aches, headaches, vomiting etc.

The number of Australian employees who are struggling has risen by 40% since 2021, research finds. In 2021, 6.9 percent of employees said they were struggling. This figure rose to 9.7 percent in 2022 – an increase of more than 40 percent. The number of employees who said they were ‘not feeling bad, just getting by’ also increased from 26.7 percent in 2021 to 30.7 percent this year (Armstrong,2022).

**FIGURE 1**  
**THE STATE OF WELLBEING**

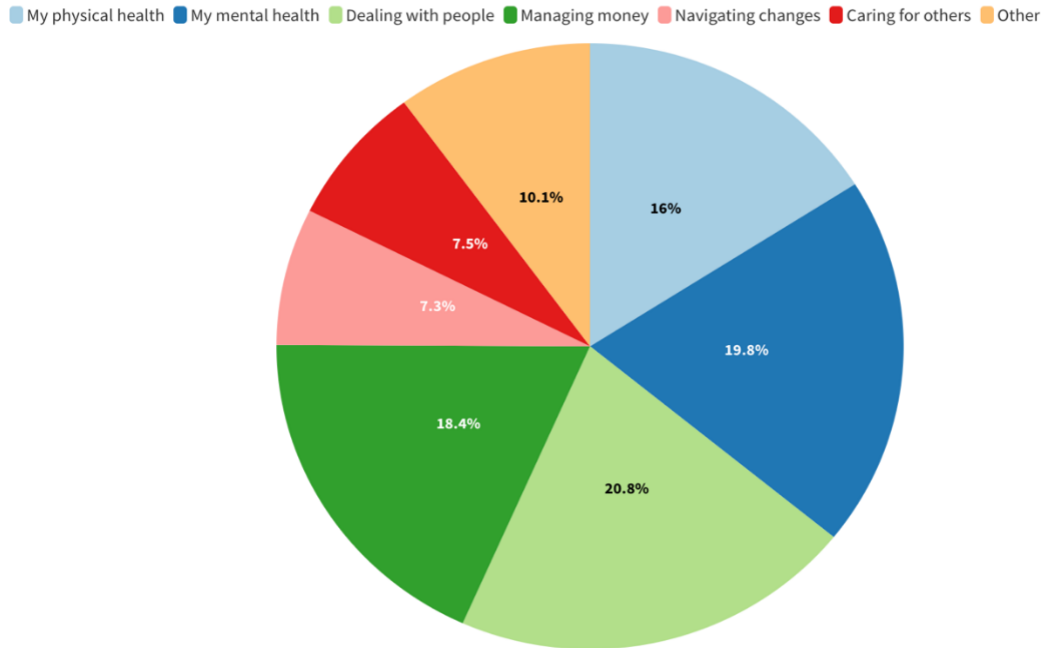


Source: The Wellbeing Lab Australia 2019 - 2022 Workplace Report

The Wellbeing Lab’s research from this year shows that our biggest sources of stress vary hugely from person to person. Unsurprisingly, mental health was the second most commonly cited source of struggle, but it’s also important to note that four out of five workers were struggling more with other factors, from navigating change to managing money.

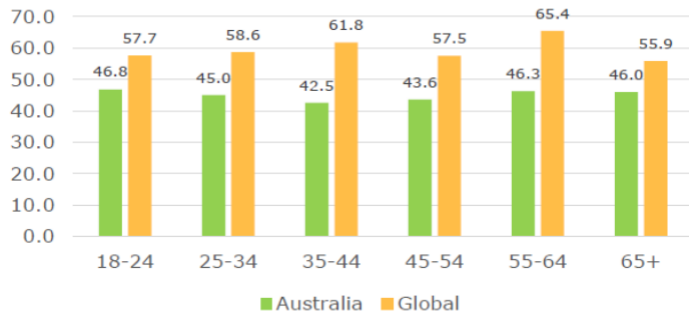
Interestingly, ‘dealing with people was cited as the most common cause of the struggle. A full breakdown of surveyed employees’ main sources of struggle is detailed in the graph below.

**FIGURE 2**  
**MEASURING WORKPLACE BURNOUT DURING THE PANDEMIC**

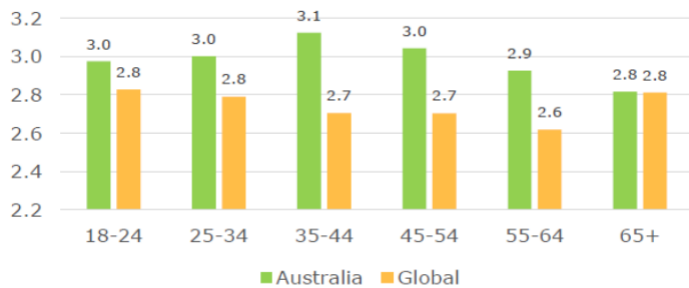


Source: The Wellbeing Lab Australia 2019 - 2022 Workplace Report

**Overall Well-being by Age Group**



**Burnout by Age Group**



(Chan, 2021)

42% of employees reported experiencing burnout during the pandemic. The results indicate that burnout was higher amongst Australians compared to other countries (Chan, 2021).

### Coping Strategies at Individual Levels

Several people had time to reflect and quit their jobs altogether. Some went through a sea change by changing industries. They quit high-pressure jobs and industries in which they were trained in.

In an AHRI survey of 191 people during the pandemic, 59.2+25.1% of participants reported that the COVID-19 crisis is forcing us to see, think, feel, plan and act differently.

### The Great Resignation

Record number of people left their jobs due to the pandemic. A recent in-depth analysis by Ian Cook and his team of more than 9 million employee records at 4,000 global companies revealed two trends

- Resignation rates are highest among mid-career employees
- Resignation rates are highest in the technology and healthcare industries

**FIGURE 3  
QUIT RATE**

The share of workers who are voluntarily quitting their jobs reached a record level in September at 3%.

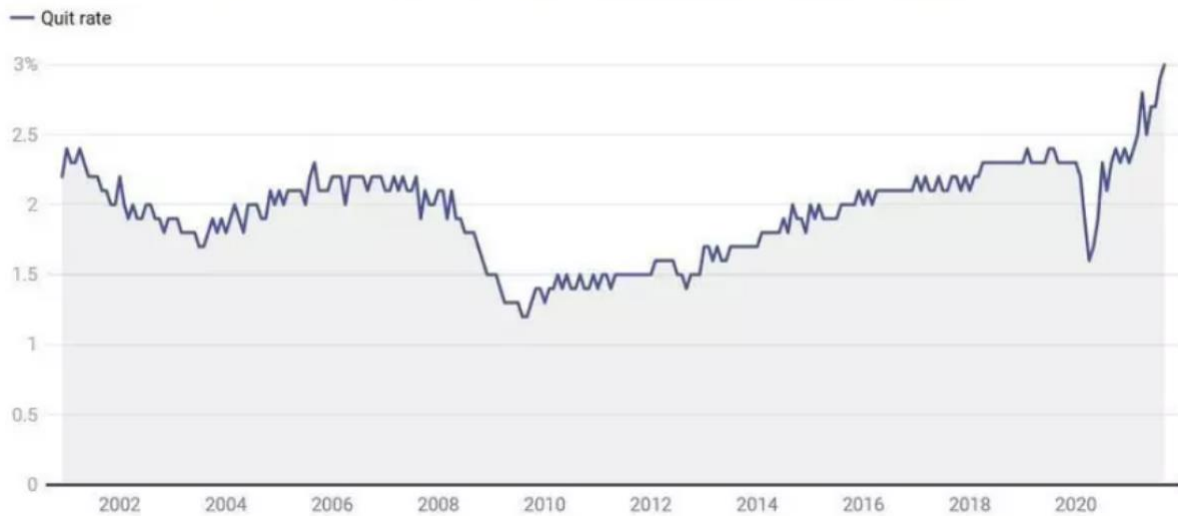


Chart: The Conversation, CC-BY-ND • Source: FRED • [Get the data](#)

The Great Resignation is an idea proposed by Professor Anthony Klotz of Texas A&M University that predicts a large number of people leaving their jobs after the COVID pandemic ends and life returns to “normal.”

Industries with low location and time independence were among the industries that suffered the most during the COVID pandemic work crisis. Health, Food, Retail, Hospitality, education.

People changed, quitting high-pressure industries, and quit their professions altogether during the pandemic. Many adopted creative industries like floristry, art, interior design, etc., as a therapy for their burnout.

### WELL-BEING STRATEGIES:

#### At Organization Level

Employee Assistance Programs (EAP) report that “A lot of organizations now are using approaches such as appreciative inquiry or open-system conversations – just bringing their people online or into a room

together to say, ‘Tell us what’s working well about the wellbeing support we’re providing, or ‘We’ve got this much budget, where would you spend it?’.

“This way, they feel like it’s a co-designed workplace wellbeing strategy, rather than something that’s been done to them. And this is an effective way to surface wellbeing champions across your workplace.”

Managers need to be trained in supervisory skills. Managers need to lay their expectations and not expect employees to be working long hours consistently. Japanese employees have known the term *Karoshi* for a long time. There has been a high rate of suicide rate in Japan due to over work and burnout.

Gallop study reported 70% of respondents had experienced burnout at some point in life. 40% of those experienced burnout during the pandemic.

Following a qualitative research design, data were collected through interviews (n = 22) and analyzed using a template analysis strategy. The results reveal that managers may adopt behaviours to support the involvement of their employees in behaviors fostering mental health at work. For example, consulting employees, providing room for mistakes, and organizing social activities are behaviors managers may adopt to support the engagement of employees in behaviors fostering mental health at work (Lecours; Hilairea and Daneau, 2022).

As a good leader, you need to identify and address the sources of stress for your employees. Non-defensive communication, prioritizing self-care, admitting failures, and learning from them (Davis, 2021).

A safe organizational climate (such as openness about mental health) and good psychosocial working conditions, including support from supervisors and colleagues, having decision authority, and no high workload, have been identified as facilitating workplace factors. Also, health and social systems may act as a barrier or facilitator, eg, waiting lists for mental health treatment or the availability of integrative mental health and occupational rehabilitation/employment services (Arends, KR van Zon, Bültmann, 2022).

Some organizations are experimenting with Four-day work week to allow the employees more time to balance work and life.

### **What Needs to Change in the Higher Education Sector?**

Casual/ Temporary/Insecure work business models need to change and more ongoing permanent and secure work needs to be provided to people including academics. People in temporary and contract roles were the hardest hit during the pandemic.

Gig economy is good in concept to do extra work but everyone needs more security and ongoing work. It could be part-time or full-time work. It gives flexibility but a high level of uncertainty.

Psychological Safety needs to be enhanced in the workplace based on issues faced by staff.

### **Strategies Put in Place by the Australian Government**

The Australian government introduced some key strategies to cope with the downturn in the economy with large amounts of businesses closing.

- Job Trainer to allow people to cross-train and get into other professions
- Smart and Skilled program launched. Unemployed people were given upskilling opportunities by offering free courses through TAFE NSW in areas where there is a skill shortage. This gives unemployed people the chance to learn about new professions and get into new careers of their choice.
- Mental Health Plan set up by the GP. 10 counseling sessions with a psychologist paid for by the government under Medicare.
- Financial support provided to counselling services like Beyond Blue, Lifeline to help them expand their services to large number of people who needed it.
- Job Keeper to help businesses retain staff.



## Self-Management Strategies at the Individual Level

In a research a total of 54 self-management strategies emerged from the thematic analysis. These were grouped into three main categories: behavioral (managing tasks, worktime, workspace, and relationships; managing boundaries between work and personal life; using time off work to recover energy; taking care of one's physical health and seeking social support), cognitive (practicing self-compassion; managing negative thoughts; adopting a positive outlook; accepting situations as they are; living the present moment; and developing self-awareness), and affective (identifying and managing emotions) (Roberge, Meunier and Cleary, 2022).

A holistic approach to health in form of spiritual, mental, physical, social and financial health is required by employees. Employers can play a crucial part in building resilience amongst the workers by giving knowledge in these key areas and helping employees learn how to build inner strength to cope with external stressors.

## The Dilemma in Australian Economy

Australia is facing this dilemma in the economy currently. There is a high level of unemployment, and a high level of employers are unable to fill the jobs. There is a mismatch between the needs of employers and the needs of potential employees. Government has stopped the social security support provided to businesses and Australian people who got affected by the pandemic to allow market forces to fill the gap. Employees who went through the burnout phase during the pandemic are probably not mentally ready to take on the high-pressure jobs again. Hence there is a push towards increasing immigration levels from other countries to fill the gap.

## CONCLUSION

Burnout during the pandemic amongst professionals in high-demand areas has created an immense problem in certain industries. It has raised awareness around mental health issues in workplaces. More needs to be done to manage and prevent burnout from happening in the first place. Employers have a duty of care towards the psychological safety of employees. A psychosocial approach to handling mental health issues at work could lead to reduced stress and prevent burnout. Employees need to be empowered with some self-care strategies to build resilience and achieve better work-life balance.

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