

# Employee Burnout in the Time of COVID-19: No Relief for Many Workers

The COVID-19 pandemic has already led to the loss of over [1.5 million lives globally and over 285,000 lives in the United States alone](#). This virus has also caused unprecedented shifts in the economy, employment sector, and various aspects of daily life. Since the first appearance of the virus in the U.S., millions of Americans have faced circumstances they likely never imagined, including additional burdens on their working and personal lives. As New Jersey enters its ninth month of the pandemic, NJHA's Center for Health Analytics, Research and Transformation takes a closer look at the ways in which COVID-19 has impacted the state's workforce.

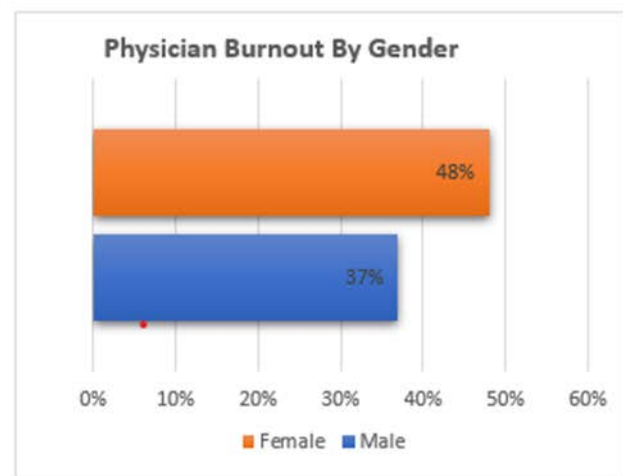
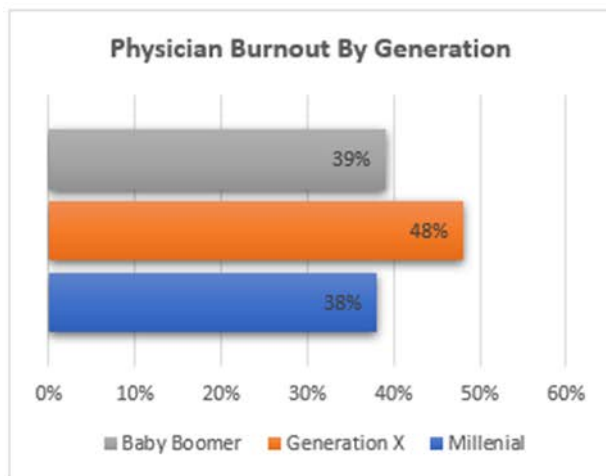
The pressure to keep up with daily life in the midst of this pandemic is no easy feat. Prior to the pandemic, many were already confronting concerns over food and shelter; the fear of job loss; caring for ill or elderly kin; and providing care for children. They now face these challenges in an environment made even more unstable by a pandemic. This has led to emotional and physical burdens that have manifested into extreme stress, mental fatigue, and feelings of being overwhelmed. Daily work-life balance has been derailed. The pandemic has created new layers of challenges for many, causing some to feel like they are running in a never-ending marathon, one that many employees feel they cannot keep running.

Employee burnout has become so ubiquitous in recent years that the World Health Organization (WHO) declared it an occupational phenomenon. Per the WHO's 2019 edition of International Classification of Diseases, ICD-11, employee burnout is "a syndrome resulting from chronic workplace stress that has not been successfully managed." Burnout is [characterized](#) by feelings of exhaustion, negativism or

cynicism, and reduced productivity. These characteristics may be caused by unrealistic workloads, expectations and deadlines; lack of clear communication and support; conflicts at work; or competing challenges from personal issues.

Burnout has substantial economic impacts and is estimated to cost the global community [\\$322 billion annually](#). In the U.S., the estimated healthcare cost associated with this syndrome is between [\\$125 billion and \\$190 billion](#). Recent study by Gallup found that workplace stress accounts for approximately 8 percent of national healthcare spending and that employees who experience burnout are approximately 23 percent more likely to visit the emergency room and 63 percent more likely to use sick time. These employees are also 13 percent less confident in their job performance and 2.6 times as likely to be actively seeking a different job.

It is important to note that the risk of burnout is not uniform across all ages and genders. A January 2020 Medscape survey looked at the prevalence of burnout among physicians who are millennials (25-39 years old), Generation X (40-54 years old), and baby boomers (55-73 years old). Generation X physicians reported more burnout than millennials or baby boomers (48 percent versus 38 and 39 percent, respectively). Female physicians also reported higher burnout rates (48 percent) compared to their male counterparts (37 percent). Researchers suggested that in addition to universal stressors, female physicians may be at higher risk for burnout as they are more likely to fulfill multiple domestic roles outside of work. The closing of daycare centers and the move toward remote learning and care for elderly family members is now placing an even greater stress on women in the workforce.



While employee burnout has been a persistent issue for employers even before the pandemic, COVID-19-related stressors – fear of the pandemic and isolation – have increased both the risk of burnout among employees and its impact for employers. According to a [national poll](#) conducted by Eagle Hill Consulting in mid-August, 58 percent of U.S. employees reported burnout, up from 45 percent in their mid-April poll. Nearly half of respondents attribute burnout to their workload. Balancing work and personal life is the leading cause of burnout for nearly 40 percent of respondents; 37 percent reported lack of communication, feedback and support contributed to their level of burnout. The ability to manage current job responsibilities while maintaining a work-life balance has clearly been threatened by this pandemic.

In addition to other stressors, essential employees on the front lines now face concerns over contracting the virus themselves or infecting household members. COVID-19 presents unique challenges to healthcare workers in particular, who are more likely to be overworked, experience fatigue, and witness sickness or death. Given their proximity to and contact with COVID-19-positive individuals, concerns over adequate access to personal protective equipment (PPE) was a major worry for many healthcare workers. A recent international [study](#) found that nearly 15 percent of COVID-19 transmissions were work-related.

A separate [Medscape](#) survey of over 5,000 physicians throughout the U.S., conducted after the COVID-19 spring surge, found that approximately 64 percent of participants reported more intense levels of burnout than in the pre-pandemic period. Lack of necessary and adequate PPE ranked high among the participants' concerns – only 54 percent felt adequately protected to fight the pandemic. Among emergency medicine physicians, 94 percent were treating COVID-19 patients in-person, as opposed to providing treatment through telemedicine.

The sheer number of hospitalized COVID-19 patients puts the increased strain on healthcare workers into perspective. At the height of the spring surge of COVID-19 on April 14, 2020, New Jersey healthcare employees were administering care for approximately 8,084 hospitalized COVID-19 patients. In any given year, New Jersey hospitals have approximately 1,800 intensive care beds, 63 percent of which are occupied at any given time. On April 14, ICU bed capacity was increased to 2,800 beds, 82 percent of which were occupied. Approximately one in every four hospitalized COVID-19 patients were highly severe patients who required ventilation. Out of 3,103 available ventilators in the state, more than 61 percent, or 1,915 were in use, and some hospitals had 100 percent of their vents in use. Nearly 90 percent of this use was by COVID-19 patients. While modeling for the fall/winter surge hinges on many variables, the healthcare workforce could face a similar patient caseload as the pandemic enters 2021.

### Why should you care?

Aside from its impact on individuals' careers and personal lives, burnout can have serious consequences for employees' health. [Studies](#) have shown burnout to be a significant predictor for hypercholesterolemia, type 2 diabetes, coronary heart disease, hospitalization due to cardiovascular disorder, musculoskeletal pain, fatigue,

headaches, gastrointestinal issues, respiratory problems, and mortality below the age of 45 years. Burnout also is manifested in mental health conditions including insomnia, depression, irritability, anxiety, and use of psychotropic and antidepressant medications.

Burnout can also have a significant cost for employers, especially in regard to productivity. The American Psychological Association [estimates](#) that 550 million workdays are lost each year due to stress on the job, with employee burnout responsible for a large percentage of annual workplace [turnover](#) as well.

### **What can employers do?**

To help reduce burnout, many employers have provided education to managers and their teams on employee burnout to increase awareness of its signs and symptoms. Such warning signals include energy depletion, exhaustion, deflated or negative enthusiasm, and reduced efficacy or quality of work. Many employers have also provided their workers with confidential access to counseling assistance and guidance.

Many employers have made available Employee Assistance Programs (EAP). For physicians, several resources, including [Physician Support Line](#) and “physician buddy systems” such as [PeerRxMed](#), are available.

Employers can also examine their workplace environments to improve the areas under their direct control, such as:

- clear, concise and timely information about procedures and workload
- adequate access to PPE and instruction on proper use
- opportunities for dialogue about employee needs
- and flexible scheduling where possible to allow for a better work-life balance.

Employers have developed creative ways to provide support and relief to their employees who work week after week to support clients, customers and patients. These efforts have included some of the following examples:

- Making meals-to-go available for workers after their shifts
- Making free meals available during work hours
- Arranging early or later hours for shopping at grocery stores just for essential workers
- Creating areas with low lighting, aromatherapy, and music for employees to rest
- Providing spiritual and peer support to staff to help reduce stress and address some of their personal needs
- Opportunities for volunteerism and giving back.

This pandemic has helped society recognize the valuable role of our essential workers. It is even more vital that employers realize the importance of mitigating employee burnout, and make their best effort to help employees feel engaged and empowered in their work.

Visit [www.njha.com/chart/](http://www.njha.com/chart/) for additional resources.