

Burnout Syndrome: A Disease of the Modern Age

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ABSTRAKT

Bakalářská práce se zabývá problematikou syndromu vyhoření a je rozdělena do dvou částí, teoretické a praktické. Cílem teoretické části je obeznámit čitatele s obecnými znalostmi týkajícími se syndromu vyhoření. Praktická část popisuje případ syndromu vyhoření a snaží se poukázat na to, jak důležité je být informován o tomto syndromu. Tudíž, cílem praktické části je zjistit informovanost veřejnosti o syndromu vyhoření v rámci České republiky.

Klíčová slova: Syndrom vyhoření, povolání, vývoj, nemoc, příčiny, stres, deprese, příznaky, vyčerpání, fáze, uzdravení, prevence

ABSTRACT

This Bachelor thesis deals with the issue of burnout syndrome and is divided into two parts, theoretical and practical. The goal of the theoretical part is to acquaint the reader with general knowledge regarding burnout syndrome. The practical part describes the case of burnout syndrome and tries to point out the importance of having knowledge about this syndrome. Therefore, the aim of the practical part is to discover public awareness about burnout syndrome within the Czech Republic.

Keywords: Burnout Syndrome, occupation, development, disease, causes, stress, depression, symptoms, exhaustion, stages, recovery, prevention

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INTRODUCTION

“I worked as a social worker in an institution where care for the client was basically given 24 hours per day. In the third year of my work there I started to feel a reluctance towards work and also towards the clients. I didn’t even want to come into contact with them, but the work still forces you to make that contact. They were the initial symptoms, but it is natural for a man to tell himself that it’s going to be alright. But it is not alright. When there is no treatment the other stages begin to appear, it is the stagnation, and you go to work just because you have to. It came all of sudden. It was also my fault because I didn’t know how to relax, and I was not capable of differentiating my social life from my working life. 24 hours at work was nothing special, it was a standard for me. When you burnout, the employer looks upon you like you do not take care of yourself. Moreover, you had to admit that you blew it” (Němec, 2010. 7:38 – 9:06).

This story is an example of burnout syndrome, but solely one among thousands of others. Burnout syndrome has spread in recent decades and the number of people who are experiencing it is rapidly growing. It is a syndrome which intervenes in every aspect of your life and is capable of destroying it both physically and mentally.

Because of this, I consider it important to take an interest in this issue and point out the necessity of its knowledge. Thus, the importance of spreading information concerning burnout syndrome is regarded as vital, as there is little know about it. The objective of this thesis is particularly to discover public awareness of burnout syndrome within the Czech Republic and so emphasize its importance.

The theoretical part concentrates on the description of basic features relating to burnout syndrome. The first part of the theory provides the most common definitions of this term, its establishment, and last but not least its development throughout the last four decades of the 20th century. The second part of the theory is aimed at the description of burnout syndrome as a disease distinctive for our generation. Namely, that part includes causes, symptoms, stages, diagnosis, outcomes and eventually the recovery and necessary prevention from burnout syndrome.

The practical part is devoted to the urge and the importance to spread information about burnout syndrome. This urge and importance is supported by the experience of a manager who suffered from burnout syndrome several years ago, and still has and will have consequences for the rest of his life. For that reason, knowing the information regarding

burnout syndrome can be life saving. Thus, the aim was to ascertain public awareness of burnout syndrome among the citizens within the Czech Republic. This is provided by a questionnaire survey. This questionnaire is inserted in Appendices. At the end of the practical part an interview with a mentor can be found, who shares his experiences gained over the 11 years of a work with burnout syndrome and expresses his opinions related to ranking of burnout syndrome among other diseases, as well as his opinion about the future development of this syndrome and about an increased interest in his services as a mentor in recent years.

I. THEORY

1 BURNOUT SYNDROME

The relationship between people and their occupation has been researched extensively in the last few decades.

From the point of view of human beings, their occupation is crucial “as a source of his status, social support, life satisfaction and self identity” (Leiter and Maslach 2000, 415). On the other hand, particular jobs can have an adverse impact on physical health and poses a risk to mental health. (Leiter and Maslach 2000, 415)

However, psychological well-being is essential now more than ever for self-assertion in any kind of a job. Feelings of fatigue, mental exhaustion or loss of enthusiasm prevent workers from concentrating on work and meeting the objectives of employers. High demands placed on an employee can increase stress, resulting from fulfilment or failure of these requirements. Inability to cope with job stress along with other factors can lead to burnout syndrome.

The goal of the following chapter is to describe the general knowledge concerning burnout syndrome with focus mainly on the definition, as well as the term itself, and last but not least its development throughout the last century.

1.1 The Definition of Burnout Syndrome

Up to now, there is “no generally valid, internationally agreed definition of burnout” (Kaschka, Korczak and Broich 2011, 784). Despite this, psychologists, psychiatrists and researchers try to formulate explanations consisting of common features of this concept.

For psychologist Christina Maslach burnout is a “syndrome of emotional exhaustion, depersonalization and reduced personal accomplishment that can occur among individuals, who work with people in some capacity” (Maslach, Jackson and Leiter 1996, 4).

According to the definition provided by Herbert J. Freudenberger in a 1970s, burnout syndrome is a “state of mental and physical exhaustion caused by one's professional life” (Kraft 2006, 30).

Danish researcher Tage S. Kristensen defines burnout in a similar way as a “degree of physical and psychological fatigue and exhaustion experienced by the person” (Shaugnessy and Moore 2010, 415).

As time has moved on, every specialist has come up with their own definition. However, their content is more or less the same as they claim that burnout is accompanied

by negative symptoms such as stress, mental and physical exhaustion, fatigue, loss of enthusiasm or motivation, despair, apathy, boredom, with a connection to workload.

Due to the content of these definitions, the term ‘burnout’ is generally understood to mean a package of physical and mental difficulties generated by a long-term excessive load in the occupation.

1.2 The Establishment of the Term Burnout

This term was introduced to psychology by American psychologists Herbert J. Freudenberger and Christina Maslach in the mid-1970’s.

Freudenberger introduced the term in a magazine called „Journal of Social Issues“ (Kebza and Šolcová 1998, 6), in 1974. As a worker in a people oriented occupation, he came across people experiencing exhaustion, fatigue and loss of motivation. To designate these symptoms he used the expression ‘burnout’, previously used in connection to people with drug addiction. (Maslach, Schaufeli and Leiter 2001, 399)

As well as Freudenberger, Maslach in her study also cooperated with people, especially with those who experienced mental exhaustion and “dehumanization in self-defense” (Schaufeli and Maslach 1993, 2). Eventually, she discovered a connection among negative feelings of people and their jobs. For labelling of these symptoms, she used the already known expression among attorneys, ‘burnout’. So, in 1976, “a new colloquial expression” adopted by many professionals “was born” (Schaufeli and Maslach 1993, 2).

1.3 The Development of Burnout Syndrome

Originally, ‘burnout’ referred to drug addicted people and their groundless situation. More recently, the term has been used in association with occupation.

Until recently, ‘burnout’ was contemplated “as a social problem, not as a scholarly construct” (Schaufeli and Maslach 1993, 2), but with rapid development of stress situations in the working environment, academic workers have become more interested in this issue. Thereby, the historical development of burnout can be divided into two phases, which are the topics of the paragraphs below. (Maslach, Schaufeli and Leiter 2001, 399)

1.3.1 The Pioneering Phase in the 1970’s

The first phase is determined as the pioneering phase and is regarded as a non-academic point of view on this issue.

The reason for this is that only practitioners were originally interested in this topic, because they had to deal with people with ‘burnout’ on a daily basis. Solving this problem was their main concern. This was in contrast to academic workers, who claimed that you “must first have a theoretical model about the phenomenon in order to know, what to do about it” (Schaufeli and Maslach 1993, 5).

First surveys on this topic were considered a popular psychology, i.e. psychology based on interesting facts about mental life and behavior of human beings that influence general public; and were not taken very seriously. Despite this, researchers, like Freudenberger or Maslach, carried out surveys, which focused on employees from people oriented occupations and were based upon people’s feelings. Suddenly, a lot of articles were devoted to burnout syndrome. The public was flooded with work on this topic published in journals and magazines intended for a professional audience.

When it comes to the definitions of burnout, as mentioned earlier, all research came up with a divergent view and explanation of this term. Gradually, nobody was capable of saying what burnout really mean. The main reason for this was that every problem in a person’s life with a connection to work was automatically diagnosed as burnout, from a mid-life crisis to overload.

At the end of 1970s, the need for a proper explanation prevailed and with such an expansion of this phenomenon, the academic field started to take interest.

1.3.2 The Empirical Phase in the 1980’s

Since the 1980s, burnout syndrome is no longer seen as a non-empirical term based only upon feelings. A greater emphasis was put on the whole relationship between people and their occupation. In this phase, surveys of the working environment were provided with the goal of coming up with a more accurate clarification of this term.

Thus, surveys took into account characteristics of particular jobs resulting from expectations of employees as well as relations with colleagues or clients, and personal factors such as mental and physical well-being, relationships within the family, with friends, age and last but not least marital status. (Schaufeli and Maslach 1993, 7)

Basically, this phase was quantitative based on questionnaires, interviews, and qualitative, based on observations. The results of these surveys proved that features leading to burnout syndrome are personality characteristics and occupational stressors, such as workload. Depending on these findings, the researcher Maslach came up with a proper

instrument of measuring burnout syndrome - Maslach Burnout Inventory (MBI). (Maslach and Jackson 1981, 100)

In the eighties, also the term burnout expanded from the USA to the rest of the world and “soon, the first cross national studies on burnout were carried out” (Schaufeli and Maslach 1993, 6).

As is obvious, burnout syndrome moved into the subconscious of people in the 1970's, in spite of it being already known for a longer period of a time.

1.3.3 Burnout before “Pioneers and Empiricists”

Burnout syndrome did not come into existence by its first definition or establishment of the term. As a matter of fact, burnout had existed since ancient times. For instance, the first reference to burnout is contained in Bible and also in works of the most famous British author William Shakespeare, who used “the verb to burn out” (Kaschka, Korczak and Broich 2011, 783).

But, the most significant piece of work on this topic came in the 1960s. In 1964, Graham Greene published the novel *A Burnt-Out Case* where the feelings were captured of a successful architect who was tired of his life and his work and left everything behind to run away to an African jungle. From a psychological viewpoint, the story listed features of burnout syndrome, such as dissatisfaction at work and difficulty to deal with other people as well as with himself. (Schaufeli and Maslach 1993, 3)

So here comes the question; why have researchers been more concerned about burnout syndrome since the 1970s than they were before? According to some, it has evolved with increasing pressure on people in human resources and hand in hand with the pressure comes the urge for a comprehensive study of this topic. (Schaufeli and Maslach 1993, 3)

1.3.4 Burnout after “Pioneers and Empiricists”

In the last two decades, with increasing pressure on the labour market in general, burnout syndrome has extended to occupations beyond the borders of human resources, to managers, computer scientists, athletes or to family members. Furthermore, new surveys have been carried out to provide more precise explanations aimed at preventing people from burnout syndrome.

2 A DISEASE BURNOUT SYNDROME

Since this part of the thesis deals with ‘disease’, it is crucial to explain this term. ‘Disease’ is generally understood to mean a set of serious conditions which affects organs, parts of a body or a system in an organism resulting from various causes and symptoms. Every disease has consequences on human life and their health. The most important fact is that a disease has to be treated. Furthermore, according to its seriousness and consequences on human life, it is necessary for people to prevent themselves from diseases.

Burnout syndrome meets all the features of disease described above, but despite that specialists cannot agree upon whether burnout syndrome is a mental illness or a disease. A few of them are of the opinion that burnout syndrome is a mental illness. As proof, they proclaim that it is not infectious, whereas diseases are. This is the reason why this syndrome is in the list of mental illnesses instead of diseases.

Primarily, psychologists and psychiatrists from the United States of America consider burnout syndrome as an occupational disease, which is distinctive for our age. One of them, psychologist Maslach, does not agree with the opinion that burnout syndrome is not a disease, i.e. non-infectious. The evidence of an infectiousness of burnout syndrome can be clearly seen in a school, where there can be several cases of burnout syndrome, while a school in another part of a town has none. With regard to that, she claims that some organizations can have particular features, facilitating and supporting the spreading of burnout syndrome. (Kebza and Šolcová 1998, 11)

On the other hand, as indicated on the Irishhealth Web site, German psychiatrist Kaschka is against an inclusion of burnout among diseases. He expresses the opinion that burnout syndrome does not exist at all. Moreover, he asserts that it is just a predecessor of a different mental illness. Depression. (Condon)

The following chapter is not going to provide an answer as to whether burnout is a disease or not, because so far there has not been a consensus. Concentration on previously mentioned features of diseases will prove its connection more likely to disease than to mental illness.

2.1 The Causes of Burnout Syndrome

Burnout syndrome does not have one cause, but it is a combination of various factors. Between the most common factors that affect formation and development of burnout

syndrome belong stress, internal factors and factors developed with connection to the working environment, external factors. (Schaufeli and Maslach 1993, 7)

2.1.1 Stress

According to Maslach, burnout is “a cumulative stress reaction to ongoing occupational stressors” (Leiter and Maslach 2000, 418). From a negative point of view, stress can make us ineffective. Although sometimes stress is considered to be a valuable source of how to prepare the human body to be capable of working in a demanding and dangerous ambience. In these cases, stress is perceived positively because of it helping to make us creative. (Cooney 1993, 238)

However, people experiencing burnout perceive stress in a negative way. When stress is coming, the pressure within a human being grows and, what’s more, pressure can sometimes blow away the flexibility to deal with common problems. This inability to deal with problems leads to an exaggerated reaction to them. The reaction to a problem is in the most cases very quick, so the second day incurs blame and people regret how they treat the whole situation. Thus, people under stress are characterized as fearful, indecisive, out of control and with negative changes in concentration. (Brock and Grady 2002, 5)

2.1.1.1 Stress and Burnout

Stress in burnout syndrome and common stress cannot be judged by their symptoms because of certain similarities in that area. What differs is the process leading to burnout or stress, whereas stress is regarded as a temporary adaptation process, burnout “refers to a breakdown in adaptation” (Schaufeli and Maslach 1993, 10).

People cope with stressful situations at work by relaxing. When the stressful situation is of a short period, the damage to health is minimal. Although burnout is a “prolonged job stress” (Schaufeli and Maslach 1993, 9), after which there is no relaxation. On top of that, people feel under pressure and unpleasantly most of the time, even when the stressful situation is over. (Brock and Grady 2002, 4)

It is necessary also to clarify that while stress is common in every aspect of human life, burnout appears only among those who are engrossed in their work, with goals set high and exaggerated expectations.

Even the difference among those two issues is obvious as burnout is sometimes misnamed as a stress. As mentioned previously, practitioners were at the beginning more interested in this issue than academic workers. Their different definitions could be the

reason why there is confusion in the labelling of burnout and differentiating it from stress. (Schaufeli and Maslach 1993, 10)

2.1.2 Internal Factors

The human predisposition to burnout is given by their personality traits. People at risk of burnout syndrome are predominantly those who place high demands on themselves and their career. The best adept for burnout syndrome are also those who have a problem to ask somebody for help unless they can accomplish something on their own.

Into this group belong also high (idealistic) expectations of self, high ambition and perfectionism. Hand in hand with perfectionism goes the strong need for recognition and to please other people at the expense of their own needs. A person feels irreplaceable and does not want to be, or is not able to be, delegated. The other typical personality traits are hard work and commitment to the point of overestimation of self and becoming overburdened. Finally, work is considered to be a meaningful activity and a substitution for social life.

2.1.3 External Factors

External factors are associated with an organization and the working environment. In the organization where burnout appears there are frequent problems of leadership and collaboration, usually poor work organization, time pressure and contradictory instructions. What's more, some people could bully or harass others.

Generally, people have a lack of freedom to make decisions and few opportunities to participate or almost no right to contribute with their own opinions. High demands are placed on them. Usually, they feel a lack of influence on a work organization, a lack of positive feedback and also perceived opportunities for promotion from their superiors. The other features which can appear are "increasing responsibility, poor communication between colleagues as well as among superiors and subordinates, a lack of personnel and funding, problematic institutional rules and structures, problems in hierarchy and above all the absence of social support" (Kaschka, Korczak and Broich 2011, 784).

Researchers carried out surveys claiming that the work environment has a greater impact on the occurrence of burnout than personality traits have. Chiefly the rapport between superiors and subordinates is meant, and also how particularly the company takes care of their employees and their problems, both at work and in their personal lives. (Leiter and Maslach 2000, 418)

2.1.4 Other Factors Leading to Burnout

Apart from the previously stated features, the type of job contributes highly to the formation of burnout syndrome.

Initially, burnout syndrome occurred in people oriented occupations, such as doctors, nurses, social workers or teachers. Nowadays, the number of occupations where burnout syndrome can occur has expanded. The main reason for it is that in the beginning, working with people was considered as a main cause of burnout. Now it is evident that the main causes of burnout are not particular occupations, but the high demands placed on people without the possibility to relieve the pressure, on top of that are the serious consequences when they fail or make a mistake. (Kebza and Šolcová 1998, 9)

That is why this syndrome can occur also in other types of occupations. For that reason, burnout is nowadays more commonly heard of from business, managerial occupations or in the world of sport. Burnout is also studied among voluntary activities, and is implied also to the family sphere as a parent or marriage burnout. (Schaufeli and Maslach 1993, 12)

When it comes to other factors, gender and age are usually taken into account. Women are more likely to be emotionally and physically drained from their work, in contrast to men. Nevertheless, research done on burnout indicates that women and men can both suffer from burnout without any exceptions. And as to the age of a person, younger workers in the first years of practice are prone to burnout because of their enthusiasm and passion for work which, with increasing age, decreases. Despite that, the cases of people who suffer from burnout in the age of 40 or 50 are widely known. (Schaufeli and Greenglass 2001, 502)

2.2 Symptoms of Burnout Syndrome

The word 'syndrome' is defined as a group of symptoms that arise together and refer to a particular disease. The symptoms of burnout syndrome affect the psyche of human beings, have an impact on physical aspects of human life and on relationships with other people within a family or in the workplace. It is impossible to describe the order in which symptoms follow each other. Just as causes, so symptoms and their development depend purely on individual features.

Several psychologists and other specialists brought out the symptoms of burnout. For example, the psychologist Kebza (1998) distinguishes three groups of symptoms – psychological, physical and behavioural.

2.2.1 The Psychological Symptoms

The state of burnout syndrome is dominated from the psychological perspective by the feeling that long and strenuous efforts have lasted a little over-long and the effectiveness of this effort is not as high in comparison with expended exertion. In connection to futility of expended exertion and its low meaningfulness prevails the feelings of depression, such as sadness, frustration, hopelessness or despair. Additionally, a conviction emerge about own dispensability and even worthlessness.

People diagnosed with burnout experience mental fatigue, emotional exhaustion with a significant decline of motivation and a reduction in an area of spontaneity, creativity and initiative. Generally, people feel sorry for themselves.

There is also a reduction in a field of work where people lose an interest in topics related to their occupation, with the development of a potentially negative opinion of the organization in which they are working. When it comes to the relationships with people (clients, patients, colleagues), there is usual negativism, cynicism and hostility towards them.

2.2.1.1 Depression and Burnout

As stress, burnout syndrome can be also misnamed as depression. Depression can be characterized by its negative emotions such as sadness, loss of motivation or energy and others previously mentioned. It is obvious that burnout is related to depression, but distinct differences can be found among them.

Firstly, negative emotions felt during burnout are aimed at work life in contrast to depression where people feel negative emotions towards every aspect of their live. (Kebza and Šolcová 1998, 11)

Secondly, depression can burst among people who are working and also among those who are not engaged in work and/or never were. Depression is one symptom of burnout syndrome yet can evolve independently of it. (Leiter and Maslach 2000, 419)

2.2.2 The Physical Symptoms

Physical symptoms of burnout have an impact on the correct functioning of inner organs and are accompanied by states of physical fatigue, apathy and weakness.

The inner organ mostly affected by burnout is the heart, because those experiencing burnout feel pain in the heart, have an irregular heartbeat or difficulty breathing and other disorders connected with it (inability to breathe sufficiently). However, the pain does not have to occur only in the heart, but also in muscles. Burnout also intervenes into the rhythm, frequency and intensity of physical activity.

Other signs that can result at least in part from burnout syndrome are indigestion, headache, blood pressure disorders, cold/flu episodes, allergies, atopic eczema and sleep disturbances. (Leiter and Maslach 2000, 419)

Ultimately, burnout syndrome can lead to addictions of all kinds, because people tend to use drugs, alcohol or pills as a solution to problems.

2.2.2.1 Exhaustion and Burnout

As with stress and depression, burnout syndrome is also accompanied by feelings of exhaustion. Physical exhaustion disappears after relaxation. On the contrary to exhaustion in burnout syndrome, that is experienced in a different way with feelings of failure. In other words, people hardly ever get rid of exhaustion in burnout syndrome by relaxation.

2.2.3 The Behavioural Symptoms

Human beings are social creatures, as to this all humans feel a need for human contact, at least from time to time. From this point of view, burnout is characterized as a total attenuation of sociability.

There is a strong tendency to reduce contact with all people related to their work, which means lack of interest in clients or colleagues, as well as in evaluation from them. Burnout may seem an apparent reluctance to perform the profession and everything related to it (processing of results, agreement on new or alternative date of meetings). Burnout is a state of decreased empathy especially among those who were highly empathic at the beginning, before the state of burnout.

All of this is likely to escalate in conflicts resulting from lack of interest, indifference and social apathy towards the vicinity.

2.3 The Stages of Burnout Syndrome

Burnout syndrome is a gradual process, the process which “does not strike overnight” (Kraft 2006, 31). It is dependent on the individual, but usually it is a process lasting months or years.

As to this, it can be divided into several stages. Most of the specialists agree on the content of stages, but what differs is their number, stages 3 to 12 can be found in the literary sources. The division to five stages by the authors Edelwich and Brodsky (1980) is most often used:

1. Enthusiasm

At the beginning is enthusiasm and working overtime. Most employees look forward to work and are full of hope, but often have unrealistic expectations. In their free time they are still dedicated to work, and gradually work becomes the most important aspect of their lives. What's more, their sense of life is seen in work and in nothing else.

2. Stagnation

The second stage is usually accompanied by a lack of enthusiasm towards work. Employees now know what they can expect from work, which is why work is not so attractive for them. Limits and restrictions appear and people recognize reality, and especially that work is not the most important thing in their life. They are taking care of their free time and also friends and family. Interest in these needs come to the fore, as well as the interest in working hours and professional growth. In this stage are the highest chances of recovery from burnout.

3. Frustration

A typical feature of this stage is looking for a sense of own work. The third stage is usually accompanied by a lack of confidence. In this stage, employees are discounting accomplishments from the past and their influence and contributions to the future. Even though there are contributions, they are persuaded about their own uselessness. Physical and emotional difficulties can appear with other problems in their social life such as conflicts within relationships, with friends or family, with a superior or in the workplace in general.

4. Apathy

Apathy is considered as a reaction to a long-term frustration. A person is frustrated at work without the possibility to readjust the situation. Work is seen as a source

of a person's income, which is why they are still working but just with the vision to get paid. The employee does just what he has to do, with an effort to keep his job, without developing any additional effort. The individual steers clear of new challenges, such as new projects.

5. Intervention

The last stage means any step as a reaction to burnout leading to escape from constant disappointment. A person focuses more on their private life, goes on a vacation, find new friends, moves home, starts studying something new, or can mean reassessment of their relationships towards work, clients, colleagues and friends. The last stage requires the seeking of professional help, because in this stage it is not possible for people to overcome burnout on their own, no matter how hard they are trying.

2.3.1 12 Stages of Burnout Cycle

The best division of stages of burnout is provided by the psychologist Freudenberger and his collaborator Gail North, who came up with 'Burnout cycle' containing 12 stages. This division gives the best way of understanding the process of burnout and also the possibility to recognize this disease in time. (Kraft 2006, 31)

It is necessary here to clarify that these stages do not have to follow one another in the stated order. According to Freudenberger and North, "many victims skip certain stages, others find themselves in several at the same time" (Kraft 2006, 31). The stages of burnout stated by Freudenberger and North are: (Kraft 2006, 31)

1. A compulsion to prove oneself – The first stage is characterized as a state in which ambition plays the main role. People not only have to prove to themselves that they are doing an excellent job, but they also must prove it their colleagues. Eventually, the need to prove themselves turns into determination and compulsion with unhappy feelings.
2. Working harder - The main goal is to work harder, especially for the purpose of meeting high personal expectations, which is why they take on more work and become obsessed with handling everything themselves, which in turn demonstrates their notions of irreplaceability.
3. Neglecting their needs – They are at work all day and know nothing else which results in the dismissal of basic needs, such as sleeping or eating. A lack of desire to

maintain relationships with other people usually appears, especially with family members, colleagues and friends. Regrettably, this lack of attention towards basic needs and relationships is considered as a help to the whole society along with considering themselves as a contemporary heroes.

4. Displacement of conflicts – People are aware of the fact that something is wrong, but are not capable of recognizing what it is. What's more, they cannot see the causes of stress and discomfort in their lives. Additionally, the first physical symptoms of burnout syndrome appear at this stage.
5. Revision of values – Once they have dismissed their basic needs and relationships, they have to state other values, and these are connected only with work, moreover, they value themselves only according to their achievements in the occupation, therefore they become emotionally drained.
6. Denial of emerging problems – People become more aggressive and cynical towards their vicinity and perceive their colleagues as stupid, lazy or undisciplined. But, they are their own worst enemy. However, they ascribe increasing problems to time pressure and the amount of work.
7. Withdrawal - Reducing social contacts and becoming isolated are the typical features of the state of withdrawal in burnout. People feel hopeless which goes hand in hand with drug abuse and other addictions.
8. Obvious behavioural changes – People, mainly in family and often also colleagues, are able to see changes in the behaviour of their colleague, husband, father, whereas the victim of burnout can omit them completely and rather become suddenly apathetic, fearful, shy and worthless.
9. Depersonalization – Not only losing contact with others, but in this stage the individual loses contact with themselves. They perceive life as a process of mechanical functions and do not consider themselves as a valuable member of human society.
10. Inner emptiness - Their inner emptiness expands relentlessly. To overcome this feeling, they desperately seek activity. Overreactions such as exaggerated sexuality, overeating, and drug or alcohol use emerge. Leisure time is for them a dead time and therefore they assign no importance to it.

11. Depression – According to the name of this stage, it is obvious its relation to depression. People become exhausted, sad, without hopes to the future and indifferent. Usually their life has no meaning to them.
12. Burnout syndrome – All previously mentioned stages unstopably lead to a state of burnout, which is accompanied by suicidal thoughts as a result of escaping the situation. A few actually carry them out. Ultimately, they suffer total mental and physical collapse. Patients in this phase need immediate medical attention.

2.4 The Diagnosis of Burnout Syndrome

Burnout syndrome is diagnosed by doctors and recognized by its symptoms which appeared in life. Regrettably, those who are experiencing these symptoms are not aware of its negative impact on life and health and sometimes they are not aware of them at all, unlike the people who come into contact with these people. They can easily recognize all changes in behaviour of their colleagues, friends and family members. That is why it is important to look around at members of families or colleagues and take care not of ourselves but also about people in their surroundings. (Kebza and Šolcová 1998, 17)

2.4.1 The Methods for Diagnosis of Burnout Syndrome

For the diagnosis of burnout, various methods have evolved. Among them belongs the BM questionnaire and MBI questionnaire, which is nowadays used most often in the diagnosing of burnout.

All questionnaires for diagnosing burnout are based on assessment scales. It is a method which requires the respondent to assign a value, usually a number, to the assessed item and so measure it. On its basis, it is feasible to ascertain the rate of burnout syndrome.

2.4.1.1 The Burnout Measure

BM (Burnout Measure) is a questionnaire which measures the level of emotional, physical and mental exhaustion of an individual, and is considered as one-dimensional because it is aimed only at an individual, whereas MBI considers also other factors. (Schaufeli, Bakker, Hoogduin, Schaap and Kladler 2001, 567)

2.4.1.2 The Maslach Burnout Inventory

MBI (Maslach Burnout Inventory), as mentioned in the section *The Empirical Phase in the 1980's*, was founded by psychologist Maslach. It is divided into “three interrelated dimensions” (Thornton 2009, 16).

These dimensions are emotional exhaustion, depersonalization and personal accomplishment. Each of these dimensions consists of several items and the whole inventory has 22 items. Emotional exhaustion consists of nine items and describes feelings of being exhausted and overloaded from work. Depersonalization consists of five items and is typical for distancing from colleagues or clients. The last stage, personal accomplishment, with its eight items is characterized by personal failure not only in work, but also as a human being. (Ciftcioglu 2011, 112 – 113)

MBI is still used nowadays for measuring burnout syndrome, because since the 1980's it has been considered as the only source which is “reliable, valid, and easy to administer” (Maslach and Jackson 1981, 100).

2.4.1.3 The Copenhagen Burnout Inventory

The biggest criticism of MBI is provided by Danish researcher Tage S. Kristensen.

Claiming that MBI is not acceptable and understandable for all nationalities, he came up with the Copenhagen Burnout Inventory (CBI). MBI, as it was mentioned earlier, consists of 3 dimensions and these are combined into one measure, but in practice these components are measured independently, which do not contribute to its reliability. What's more, MBI disregards the other occupations, just the people oriented and Kristensen is persuaded that burnout syndrome appears also among the other occupations. (Shaugnessy and Moore 2010, 416)

CBI consists of three dimensions that measure burnout perceived by a person in various connections. The first, ‘personal’, measures the fatigue of a person. ‘Work-related’ is related to work and ‘client-related burnout’ is related to work with clients and these components are measured independently, so people can choose one of them or an area of their lives in which they want to measure the rate of burnout syndrome. (Shaugnessy and Moore 2010, 418)

2.5 The Outcomes of Burnout Syndrome

According to previously mentioned causes and symptoms, the impact of burnout syndrome on the health of a human being is obvious. But the most important and sometimes

neglected fact is that burnout is decreasing the quality of life in general. (Shaugnessy and Moore 2010, 419)

On the one hand, burnout destroys relationships among human beings by escalating them into conflicts with people both at work and home, and destroys the relationship of an individual with their occupation by a tendency to absenteeism from work or give in a notice, lower productivity, decreased job satisfaction as well as a commitment to an organization. (Maslach, Schaufeli and Leiter 2001, 406)

2.6 The Recovery from Burnout Syndrome

As indicated on A List Apart Web site, the first step to recovery from burnout is the recognition that there is a problem. Once the problem is recognized, a person has to look at their life and answer a few questions. In particular, it is necessary to know what causes stress in life, then it is essential to state personal goals and values and whether they are consistent with work. Additionally, the employee has to be honest with themselves and realize if work is a source of appreciation or if it is just a source of earning money. (Boms)

The second step to recovery is to be capable of telling their problems to a psychologist or even a doctor because people cannot get by without the support of specialists. When they are trying to cope with it on their own it can make the whole situation much worse, especially because of the fact that people affected by burnout deal with this new and unknown situation by changing their job and choosing a new career. From the psychological point of view, the whole situation is left behind without proper treatment, because a new job or career is not a solution.

For that reason, researchers manifest an interest in spreading information about burnout syndrome and especially about its prevention.

2.7 The Prevention from Burnout Syndrome

Previously mentioned in this chapter are causes of burnout syndrome. In order to prevent people from burnout, there is a necessity to steer clear of these particular causes. That is why several advices for prevention of burnout syndrome have been determined with focus on avoiding stress, which goes hand in hand with both a change of personality and working environment of an individual.

2.7.1 Avoiding Stress

Firstly, it is necessary to mention that people cannot avoid stress completely, nevertheless stress can be reduced. (Cooney 1993, 239) And this section will focus on ways how to reduce stress in live.

People under stress are always busy. Because of having less time during a day, they can skip a meal or consume caffeine, sugar and other food with high amount of calories and fat, mainly fast food. All this food can interrupt the ability of individual to concentrate and induce the irritability. (Donohue and Tolle 2009, 69)

For reducing stress, it is essential to start to lead a healthier life. At the beginning it is crucial to start with exercise, as well as eat properly and get enough sleep. Outside of exercise there is also meditation and learning how to relax in general might be useful, because even though people are trying to relax, they rarely do it properly. (Brock and Grady 2002, 49)

2.7.2 Personality Changes and Healthy Working Environment

Stress can be reduced by exercise or a healthy lifestyle, but when there is a bad attitude towards work or a stressful working environment, there is also lot of stress, regardless of a healthy lifestyle. Several changes can be done in order to avoid burnout syndrome or at least to minimize the consequences of burnout, especially personal changes, which according to research “play a central role in the prevention of burnout” (Maslach and Goldberg 1998, 66).

In the first place, it is necessary to get rid of perfectionism. Perfectionists incline to do work on their own, without any help, and meet deadlines by all means which brings about stress. Letting colleagues or subordinates help you is essential. The other thing is to admit that human beings make a mistake and that nobody is perfect. Last but not least, saying ‘no’ is a good prevention from burnout syndrome. Saying ‘no’, and rather going out and enjoying leisure time is really a deterrent to burnout syndrome.

When it comes to a healthy working environment, subordinates and superiors, or colleagues have to find a way how to communicate properly with each other, because a lack of communication results in conflicts and eventually in stress when dealing with them.

As indicated on A List Apart Web site, after all, it is necessary to regain a balance between private life and work, by spending time with family and friends, and not letting themselves be consumed by work. (Boms)

II. ANALYSIS

3 THE SEVERITY OF BURNOUT SYNDROME

The theoretical part of this thesis is devoted to the general knowledge of burnout syndrome and this chapter is going to point out how important it is to have theoretical background knowledge of burnout syndrome. As once you know both possible causes and symptoms it is easy for you to recognize it and so avoid its severe impact.

Regrettably, public awareness of burnout syndrome within the Czech Republic is not very high. Proof of this is an interview with a woman whose husband suffered from burnout syndrome several years ago. Unfortunately, he has never completely recovered because his surroundings were not acquainted with this syndrome.

3.1 The Description of a Manager's Burnout Syndrome

“It was an ordinary evening,” starts 45 years old Jaromíra and continues “we watched the television and about twelve o'clock we went to bed. But around three o'clock in the morning I woke up and my husband had problems with breathing...”

One thing led to another and suddenly they were on the way to the hospital.

3.1.1 The Factors Leading to the State of Burnout Syndrome

Mr. Karel was a successful and newly promoted director of a subsidiary of a big Prague company and was expected to provide above-average performances. As a director, he was supposed to lead a team of 8 people, but his subordinates had problems with communication among themselves as well as with him. Additionally, they did not fulfil their duties. “He was always complaining about them, because they did not do what they were supposed to do and even if they worked out some proposal, it was never enough for him, they never lived up to his expectations. To him, everything had to be perfect.”

“At the beginning, he worked from 7 in the morning until 3 in the afternoon. After some time, he started to take his job home and worked sometimes all night.” As time passed he was overloaded by work, which brought about a lot of stress.

Besides this, Karel was a hockey player and after work he used to go training. “He was like every other man, he worked a lot, he played hockey, and he was persuaded that he can do and accomplish everything without proper relaxation, because to be honest, he was very competitive and he must have been doing everything 100%, even hockey.”

3.1.2 The Physical, Psychological and Behavioural Symptoms

“It started very innocent, with a headache accompanied by allergies of all types. After sometime, I started to be curious because he was most of the time at home with a temperature. And what was the diagnosis? Common flu. I wondered whether it was really flu as it seemed to me that he was avoiding going to work. But it was unbelievable for me. He was always so enthusiastic about his job. That’s why I didn’t perceive the seriousness of that situation.” As to the physical symptoms, it is also necessary to mention the states of total exhaustion, physical as well as mental. “It is really true that in burnout are people exhausted. He tried to relax, but he was always under so much pressure, that relaxation was not effective.”

Moreover, stress escalates to the conflicts at work. At the beginning conflicts were rare, but later they started to appear on a daily basis. The conflicts went hand in hand with the hostility towards everybody at work. Additionally, he was not as motivated as after the promotion and he was also not as creative, so there were problems with meeting the deadlines of superiors, because suddenly he was not capable of coming up with a new proposal. Eventually, he started to avoid business meetings.

Gradually, he was avoiding his friends, with whom he used to meet not only every week, but every day. What stayed was his passion for hockey. But it was not the same as at the beginning. “Before, he enjoyed spending time with friends during practising, then it was more or less the passion to win and unless he won, he was disappointed, and felt it as a personal failure.”

3.1.3 The Stages of Burnout Syndrome

The description of burnout syndrome stages is based upon the division of Freudenberger and North stated in the section *12 stages of Burnout Cycle* in this thesis. Karel’s journey to the state of burnout syndrome began with promotion.

1. A compulsion to prove oneself - He made an effort to accomplish the promotion and for a long time, his ambition for a better post played as the main role in his life. Moreover, “he really liked the feeling of being admired by his colleagues for everything he achieved.”
2. Working harder – Even though he was promoted, he did not ease up at all at work. On the contrary, he took on more tasks for the purpose to prove everybody that the promotion was deserved.

3. Neglecting their need – Karel worked all day, and got use to taking work home, where he worked commonly all night. The need for contact with friends as well as with colleagues was minimized and “the most important part of his life was at work.”
4. Displacement of conflicts – Karel was overloaded by work, despite that he, as well as his family and colleagues, were not aware of any bad influence of work on his life. In this stage the initial symptoms appeared, such as flu and allergies.
5. Denial of emerging problems and Withdrawal - He perceived his colleagues as incapable of any task and was hostile towards them. This stage is accompanied by another stage, withdrawal (7.). Karel reduced contact with his friends from hockey, as well as with his colleagues. Although there were never conflicts within the family because of huge support from their side towards his career. It is important to also mention that he never used drugs, alcohol or any pills as a solution, which is very usual for people experiencing burnout syndrome.
6. Revision of values and Depression (11.) – The Revision of values stage was accompanied by depression, therefore by stage 11. He was sad, unhappy, and what’s more he started to look back to the past on his achievements, and saw none. “He made such a contribution to the company in which he was working for several years, despite that he was persuaded about own uselessness and worthlessness.”
12. Burnout syndrome – Finally, to escape the disappointment and depressed feelings, he was trying to get in touch with his colleagues and other friends. But without proper help, it was impossible to recover.

3.1.4 The Diagnosis and Recovery

Karel was taken to the hospital after a heart attack and cardiac arrest. “We tried to revive him at home, but unsuccessfully. In the hospital the doctors were more successful but, despite that, his brain was a long time without oxygen which resulted in irreversible damage.” He spent a month in the hospital and then was released to come home.

The doctors in the hospital diagnosed Karel’s case as a heart attack given rise by job stress. After the recovery, Karel also visited several psychologists. They got acquainted with his case, especially with the situation that precedes a heart attack and particularly with his habits in working as well as in social life. The diagnosis was burnout syndrome. “To be

honest, I was not so shocked because of all the pressure he had to face. But if I would have known the vital consequences, I would have taken more care about his health.”

“After his release from the hospital, we had to teach him again the basic habits such as eating, drinking and so on.” The habits that Karel lost because of brain damage.

Nowadays, Karel spends his days at home. He is not capable of doing something on his own. “He would probably take food from the fridge, and feed himself. But without us, his family, he would be sitting all day just looking to the wall. Also taking a medicine is something which needs to be under control, which is why I usually give him his medicine in the morning when I am leaving for work. He would definitely fail to remember to take the medicine on his own.”

It is impossible for him to get back to work. Even though he is physically alright nowadays, there is mental damage. Hence, he has not lost only basic habits, but also his passion for hockey and for everything he was enthusiastic about before.

3.2 Summary of This Case of Burnout Syndrome

As it is obvious, Karel’s journey to burnout syndrome was a combination of various factors, such as tendency towards perfectionism, work overload and stress. Plain factors ordinarily leading to the state of burnout syndrome.

Karel’s burnout was accompanied by physical symptoms such as flu, headache, allergies and exhaustion. From a psychological viewpoint, he refrained his surrounding as well as new challenges at work because of a lack of creativity and motivation, and in the working environment he experienced hostility and avoidance towards his colleagues. All of these were the signs which should draw family’s, colleagues’ and friends’ attention to his health.

As to the stages, Karel went through 9 stages out of 12. It all started with his promotion, however after this he worked more and more. Gradually he became overloaded and stressed out. With time, work became the only meaning of his life. Additionally he was depressed with feelings of worthlessness. At the end, the only help would be on the professional level with a psychologist.

Regrettably, the help came too late. His heart was not able to endure the situation any longer which resulted in the heart attack brought about predominantly by job stress. The heart attack caused a reversible change, not only in health but also in all of Karel’s life, as well as his family’s.

3.3 The Recommendation

Karel was a director in a company where being under pressure was nothing extraordinary. That is why, especially these people, should have been acquainted with burnout syndrome in order to stay healthy and be capable of obtaining results which would be definitely beneficial for both sides, as for employers so employees.

Thus, these two groups should be involved in activities which provide the basics, but the most important information relating to burnout syndrome, especially for the purpose to recognize it on time and so avoid its severe impacts.

With regard to the previously stated case, burnout syndrome can end up with serious consequences in the future life of a man. Karel's burnout is an example of a grave case in which this syndrome can result in, but not the worst. Burnout syndrome can also result in death. That is the reason why it is important to diffuse information concerning basic features of this syndrome.

4 THE QUESTIONNAIRE SURVEY

Due to the importance of spreading information about burnout syndrome, I was curious about the level of public knowledge within the Czech Republic of this syndrome. The purpose of this questionnaire survey is to discover whether they are acquainted with this term and its basic features.

4.1 The Description of the Questionnaire Survey

To be able understand the level of public knowledge of burnout syndrome, it was necessary to make the questionnaire accessible to more people. For this reason, the questionnaire was published on the Internet which also contributed to the diversity of people answering the questions it contained. Seventy-six individuals returned the questionnaires.

The questionnaire consists of 10 questions which can be divided into 2 sections.

The first section contains questions with the purpose of finding out the basic information about the respondents. Hence, these questions focus on gender, age and occupation. The respondents were supposed to choose only one answer from the offered possibilities or write their own.

The second section comprises of questions regarding burnout syndrome and serves predominantly to discover the knowledge of the public about this syndrome. However, this section can be also divided into two parts. The first part concentrates on the meaning and explanation of this term as well as on the occupations in danger of burnout syndrome, and the respondents were supposed to write these on their own. The objective of the second part is to find out the knowledge of the public about other features of burnout syndrome, such as causes, symptoms, typical feelings associated with the journey towards burnout and feelings experienced at the beginning before the state of burnout. For that purpose, among the answers were additional features which are not specific to burnout syndrome, or are, but with some distinctions. In addition, the respondents were allowed to choose more than one answer.

4.2 The Respondents Characteristics

The first section of questions in this questionnaire is aimed at revealing basic information concerning the respondents. 3 questions serve this purpose.

As stated above, publication via the Internet contributes to the variety of respondents and they are therefore of various ages and occupations. The first displayed graph is devoted to the gender of the respondents.

4.2.1 Gender of the Respondents

The number of women who answered this questionnaire highly outnumber amount of male respondents.

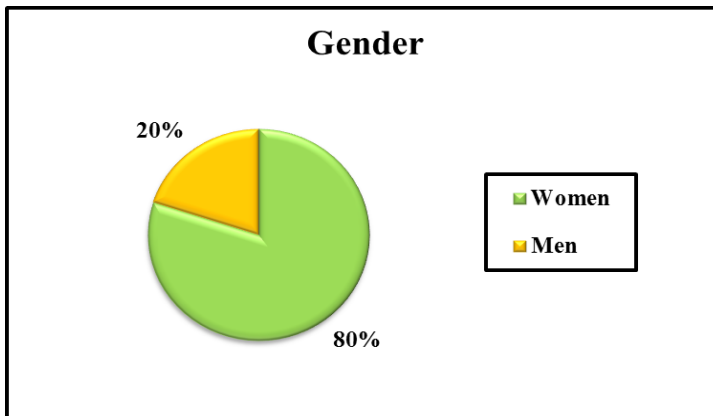


Figure 1: Gender

To be precise, about 80 % of participants in the questionnaire were female (61 of all respondents) in contrast to only 20 % male (15 of all respondents). This could be due to a lack of male interest towards humanitarian issues which burnout syndrome and other psychological problems are considered to be.

4.2.2 The Age of the Respondents

As can be seen in figure 2, the respondents of the questionnaire were of different ages.

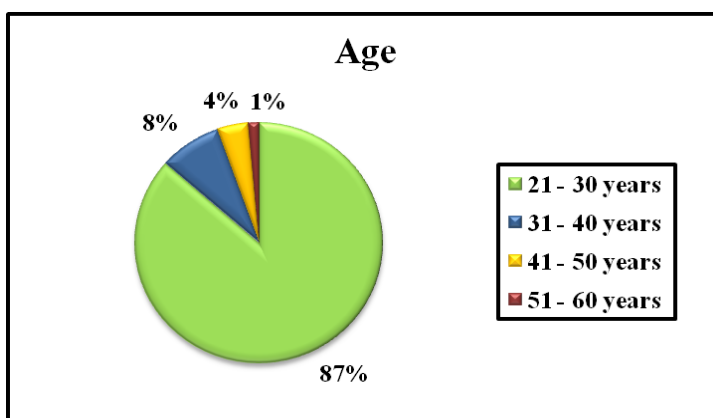


Figure 2: Age

Nevertheless, the majority of the respondents were people aged from 21 to 30 years old (87%). The second largest group comprises people of age 31 to 40 years (8% of all respondents). It is most likely the consequence of the online questionnaires, because usually younger people have access to the Internet, rather than people who are 40, 50 or 60 years old. The results, as shown in figure 2, also indicate that the younger generation is more willing to fill in the questionnaire published online than the older generation, hence only 5% of all respondents were older 41 years old, precisely, 4 % aged from 41 to 50 and merely 1% aged from 51 to 60 years old.

To clarify the chosen age groups, there were also possible answers for people aged under 20 years old and over 61 years old, however nobody of that age completed the questionnaire. That is why these groups are omitted from figure 2.

It is apparent from the table indicated below, that the largest group of the respondents were women in the age from 21 to 30 years old, because of the previously stated results, these outcomes are not surprising. This group is in bold.

Table 1. Age and Gender Crosstabulation.

| | | | Gender | | Total |
|-------|--------------|--------------|--------------|--------|--------|
| | | | Women | Men | |
| Age | 21-30 years | Count | 54 | 12 | 66 |
| | | % within Age | 81,8% | 18,2% | 100,0% |
| | | % of Total | 71,1% | 15,8% | 86,8% |
| | 31-40 years | Count | 4 | 2 | 6 |
| | | % within Age | 66,7% | 33,3% | 100,0% |
| | | % of Total | 5,3% | 2,6% | 7,9% |
| | 41-50 years | Count | 3 | 0 | 3 |
| | | % within Age | 100,0% | ,0% | 100,0% |
| | | % of Total | 3,9% | ,0% | 3,9% |
| | 51-60 years | Count | 0 | 1 | 1 |
| | | % within Age | ,0% | 100,0% | 100,0% |
| | | % of Total | ,0% | 1,3% | 1,3% |
| Total | Count | 61 | 15 | 76 | |
| | % within Age | 80,3% | 19,7% | 100,0% | |
| | % of Total | 80,3% | 19,7% | 100,0% | |

4.2.3 The Occupations of the Respondents

More than half of the respondents are students within the Czech Republic, precisely 54%.

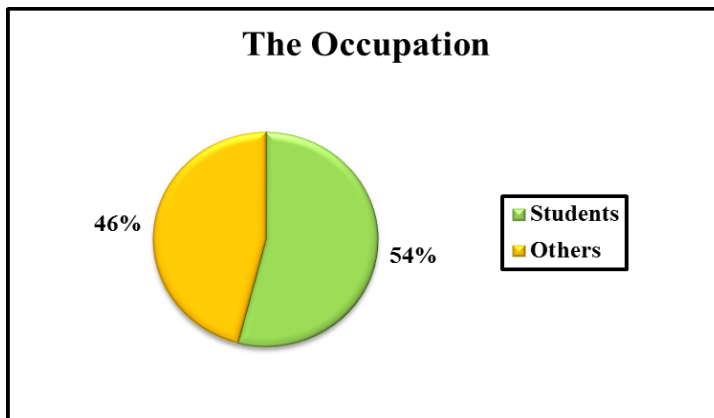


Figure 3: The Occupation

It seems possible that these results are due to the fact that respondents may be studying fields such as psychology or sociology, or those in which this phenomenon may occur. They may also be interested in this issue from being once employed in an occupation where this knowledge is indispensable. Another possible explanation for it is that the current hectic times forces students of various schools to care more about their health, therefore they are aware of this syndrome which could be certainly useful in their future career.

The rest, 46%, are employed in various occupations. The questionnaire was answered, in order by frequency, by nurses, managers, social workers, office workers, receptionist, mother on maternity leave, guidance counsellor, physiotherapist, midwife, livestock specialist, economist, language assistant, cook, waiter, librarian, marketer, personal assistant to people with autism and mental retardation.

This 46 % that participated in the survey work with people to some extent. Therefore, they are supposed to know at least a little about burnout syndrome because they run the risk of suffering from it. That could be the reason why they participated in this survey.

4.3 The Questions Regarding to Burnout Syndrome

The second section of questions is focused on basic features regarding burnout syndrome with the objective to discover public awareness of this syndrome.

4.3.1 The Meaning of Burnout Syndrome

The first question serving this purpose was to see if the respondents knew this term at all. They were supposed to choose from among 3 answers and the outcomes can be seen in figure 4.

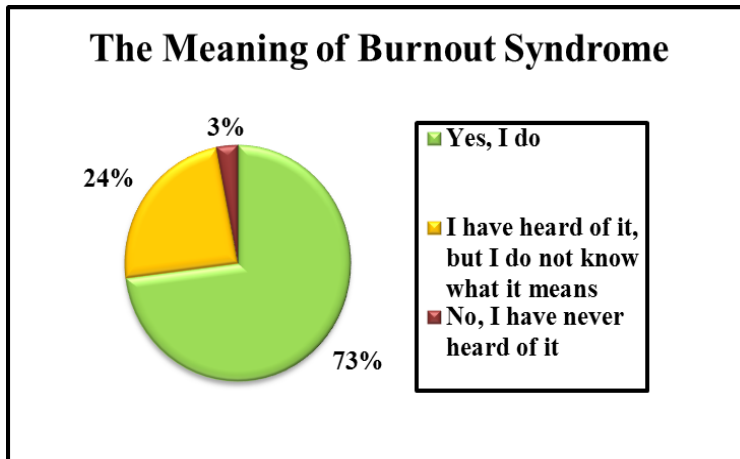


Figure 4: The Meaning of Burnout Syndrome

73 % of them answered that they know what burnout syndrome means. 73% represents 56 respondents. Among them belonged mainly women (84%) in contrast to the 16% which were men. The highest amount of respondents was aged from 21 to 30 years old. Precisely, it is 46 respondents. The 31 to 40 years old group is represented by 6 respondents. This result may be explained by a number of different factors. The first factor could be that they are taught about this theme at school, the second that they talk quite often about it either with their colleagues or within the family, and lastly that these people may be well educated and are capable of reading in a foreign language, particularly in English, in which the most literary sources relating to burnout syndrome are written.

The age group from 41 – 50 is represented by 3 people, and the last one, from 51 – 60 is represented by 1 man. It is difficult to explain this result but it might be related with the previous political system, when topics regarding health were considered a taboo, and people were expected not to talk about them at all. Another possible explanation for this might also be that because burnout syndrome has evolved in recent years, these people could possibly be retired and therefore not interested in an ‘occupational disease’. That is why only four of them are familiar with this term.

24 % of the respondents (18 people) admitted that even though they know the term, they do not know the meaning. Unexpectedly, this group is represented by people in the 21 to 40 years old age group. This is particularly surprising because generally those people are at the beginning of their careers, and are therefore more at risk of suffering from burnout syndrome because of the enthusiasm towards occupational duties and everything involved with it. This finding suggests that people at that age care less about their health and it can

be assumed that their career development plays a main role at the expense of their own health.

About 3 % of the respondents answered that they do not know this term and, what's more, they have never heard of it. In this survey, 3% of the respondents correspond to 2 individuals, who were not acquainted with this term. From all the received data it is apparent that these two people were men, in the age range of 21 – 30 and they are university students. There are several possible explanations for this result. Usually, people who are not aware of an issue are those who consider themselves to be immune to it, especially men tend to think of their own invincibility. That could be the case of these two students, who are not familiar with the term burnout syndrome. As was already mentioned earlier, men are not very keen on humanitarian issues, and burnout syndrome is considered to be one. Or simply, the reason for a lack of knowledge in this area might be that they have never come into contact with it.

The respondents who answered the previous question that they know the meaning of burnout syndrome continued with the other questions. The others, who admitted a lack of knowledge in this area and the two men who did not have a clue what burnout syndrome is, did not reply to the other questions, which were related to burnout syndrome.

4.3.2 The Explanations of This Term Provided by the Respondents

The aim of this question was to find out whether those who answered the previous question that they knew the meaning of burnout syndrome actually knew what burnout really stands for. For that reason, all of those respondents were supposed to explain this term.

The list of the explanations given can be divided into several groups according to the features which are contained in them. Several features typical for burnout appeared among the explanations, namely exhaustion, depression and people oriented occupations. Figure 5 shows the proportion of these features.

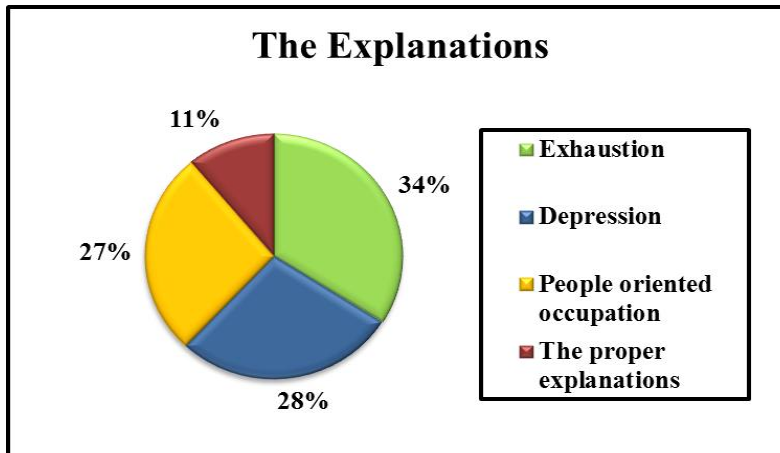


Figure 5: The Explanations

The following sections will give an example of several explanations, each of the previously mentioned features as they were suggested by the respondents and a summary at the end will try to formulate the possible reasons why these particular features were stated.

4.3.2.1 *Exhaustion*

Exhaustion was recognized among 34 % of stated explanations. Moreover, one individual renamed burnout syndrome as ‘syndrome of exhaustion’. Provided below is a list of several explanations of this term in connection with exhaustion, as they were stated by the respondents:

- Total exhaustion of an organism under the pressure of work and vicinity, human need to take time off.
- It is mental and also physical exhaustion. Usually the term is used in conjunction with the occupation. There is an immediate need for relaxation, or the person is not going to survive.
- Often manifests itself at work, and it is a condition when a person is mentally and physically extinct.
- Using all one’s strength – when the person is overloaded, is not capable of handling it and they break down.
- It is a state in which a person works all the time, does not relax at all and finally breaks down.
- It means mental and physical exhaustion of a human being, which is a result of their occupation.

Generally, these explanations contain physical and emotional exhaustion and the respondents think of burnout syndrome as exhaustion, which comes as the result of a hectic

life in connection with occupation. Nevertheless, in spite of being accompanied by exhaustion, it is not the same as common exhaustion. However, as the explanations above indicate, the respondents perceive it as something what can be rid of by relaxation.

4.3.2.2 Depression

28% of the respondents explained burnout syndrome as a state of depression. From the majority of explanations it is apparent that people perceive burnout as the mental illness, depression. However, none of those surveyed connected depression particularly with the occupation.

The explanations of the respondents comprising depression are:

- Human being in burnout syndrome is sad, mostly without desire to do anything.
- Human being is upset, nervous and suffers from anxieties.
- They are bored, usually with feelings of anxiety towards everything.
- It is a feeling of inferiority and depression.
- Burnout syndrome is a state in which I have depression and feelings of failure.

4.3.2.3 People Oriented Occupations

27 % of the respondents stated that burnout syndrome can appear only among employees working with people in some capacity. Several explanations are provided below.

- It mainly affects people working in the social sphere, especially in the helping professions.
- Burnout syndrome manifests itself particularly among those whose work is based around human contact (doctors, social workers, office workers etc.)
- The result of working life, especially in helping professions such as doctors, social workers or nurses.

Albeit, the origin of burnout syndrome can be traced in people oriented occupations, nowadays it is not the condition and the main cause.

4.3.2.4 The Most Precise Explanations

Of the 76 respondents who completed the questionnaire, a minority of participants (11%) came up with the most precise explanations of this term, because it not only covered exhaustion and/or depression, but pointed out its interconnection as well as with the working environment and workload. Several of these explanations are stated below.

- The state which occurs after continuous working effort to which a lot is given, probably more than is appropriate (all the time). The human being is tired out, and for that reason they are apathetic, incapable of everything (not only in the occupation, but also at home), the mood is monotonous, they are not interested in their vicinity, they are depressed about their job, with feelings of failure, and so on. All of this may occur even though they were very enthusiastic at the beginning.
- It is a syndrome which is usually associated with the occupation. A person with burnout loses the desire to be engaged in any kind of activities, at work and also in their private life. Changes in behaviour usually occur, with physical and mental exhaustion accompanied by illnesses or health problems in general.
- A person with burnout experiences exhaustion, both physical and mental, from their workload. The person loses interest in everything connected with the occupation, has an aversion towards work, de-motivation, apathy and also a lack of interest towards hobbies. Put simply, someone with burnout does not live, they merely survive.

4.3.2.5 Summary of the Explanations

An inclination to exhaustion, depression or only to a people oriented occupation is proof of an apparent lack of knowledge about the basics of this syndrome. A possible explanation for this might be that the respondents were supposed to write the explanations on their own, therefore it might have been a problem that they did not know how to express themselves properly. Another possible explanation for this is that the respondents have a slight idea of what this term means and that is why they only covered some features.

4.3.3 The Occupations in Danger of Burnout Syndrome

On the question of the occupations in danger of burnout syndrome, this survey found that the respondents believe that burnout solely affects workers who come into contact with people in their occupations.

The respondents stated the occupations which they thought to be mainly in danger of burnout syndrome:

- Nurses
- Social workers
- Doctors
- Lawyers
- Teachers

- Policemen
- Psychologist and psychiatrist

In response to this question, most of those surveyed perceive working with people as the main cause of burnout. It seems possible that this result is due to the fact that people are not privy to this issue. Moreover, they do not know the main causes of burnout. It could be given by a lack of proper courses which warn and inform them about this issue. Hand in hand with this possibly goes the fact that employers are not keen on paying to hire specialists to help their employees to become acquainted with this issue.

These outcomes can be also explained in part by the proximity of the respondents to people oriented occupations. As indicated in the section *The Occupations of the Respondents*, they are employed in this kind of occupation, therefore the results can be explained by the fact that they came into contact with colleagues, superiors or subordinates who suffer from burnout syndrome. Hence, they associated this syndrome with this type of occupation.

The aim of the following sections is to ascertain knowledge of those surveyed concentrating on other features of burnout syndrome.

4.3.4 The Causes Leading to the State of Burnout Syndrome

The other question in this survey was about the causes of burnout syndrome. The outcomes are seen in figure 6.

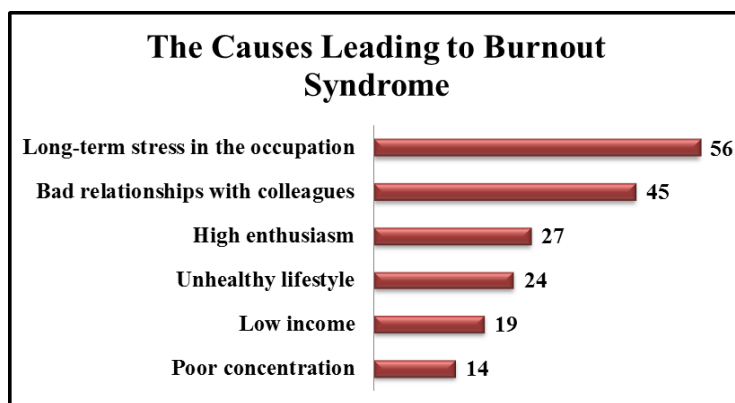


Figure 6: The Causes Leading to Burnout Syndrome

It is apparent from this figure that long-term stress in occupation was the most chosen answer as the cause of burnout. The second most frequent answer was having a bad relationship with colleagues. A comparison of the first two results reveals that people perceive difficulties in working life as the main cause of burnout syndrome. Even though bad relationships with colleagues are not ranked among the causes of burnout syndrome,

the respondents could succumb to this answer because of the word ‘colleagues’, which is connected to work.

A strong relationship between high enthusiasm, long-term stress in occupation and burnout syndrome has been reported in the literature. Despite that, the respondents of this questionnaire placed bad relationships with colleagues before high enthusiasm. It is probable therefore that if the whole answer would be high enthusiasm towards occupation, the results could be different.

Other findings are rather disappointing, because low income, poor concentration or an unhealthy lifestyle can hardly be regarded as causes of burnout syndrome. Despite that, they were chosen several times as responses to this question. This result may be explained by the fact that burnout syndrome is perceived negatively and all these are negative.

4.3.5 The Feelings Experienced at the Beginning

Figure 7 shows the answers of the respondents about feelings felt usually at the beginning, before people are in the state of burnout syndrome.

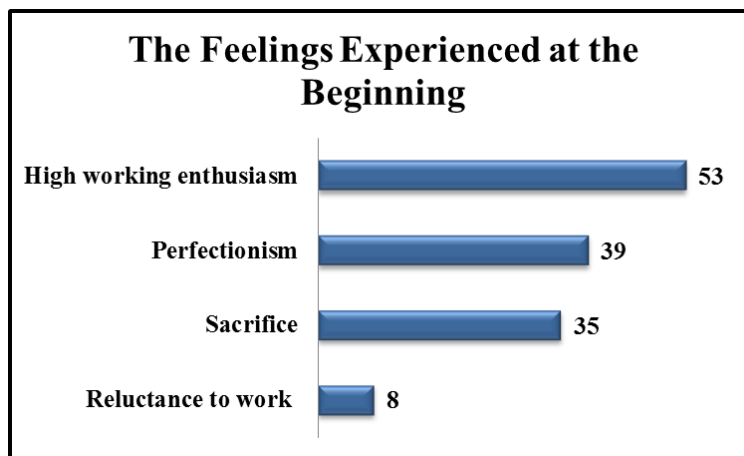


Figure 7: The Feelings Experienced at the Beginning

Data from this figure can be compared with the data in the previous figure (6) which shows the difference among perceived causes and feelings of burnout syndrome. Whereas, as a cause, enthusiasm was chosen only 27 times, as a feeling experienced at the beginning before the state of burnout, high working enthusiasm was chosen 53 times. The reason for this is not clear but it may have something to do with words connected to work, which possibly play a big role in the respondents' perception, as was previously mentioned.

Surprisingly, a reluctance to work was chosen 8 times, and more surprisingly by a nurse. The possible explanation for this could be a misunderstanding of a question. There are, however, other possible explanations such as wrong reading of the question or, when it

was an online questionnaire, there could appear a mistake in the clicking of the respondents. Regardless, this result is not very encouraging.

4.3.6 The Typical Feelings Accompanying the State of Burnout

In response to this question, most of those surveyed indicated that despair, dejection and sadness are feelings associated with the state of burnout syndrome. As shown in figure 8, there is a significant difference between the first three answers and the others. A possible explanation which emerges from these findings is the tendency towards depression in which these feelings are usually accompanied by.

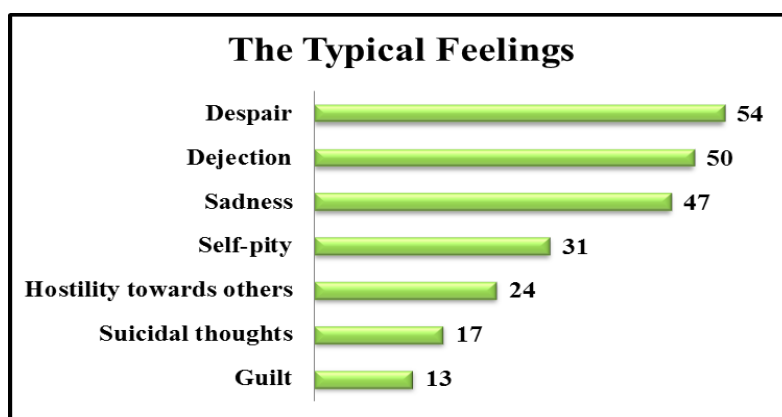


Figure 8: The Typical Feelings

The most striking result to emerge from the data is the selection of hostility towards others only 24 times, even though it is the most typical feeling in the state of burnout. Therefore, these results confirm the inclination of the survey participants towards depression.

4.3.7 The Symptoms of Burnout Syndrome

Figure 9 presents the results obtained from responses to the question about symptoms which accompany the journey towards burnout syndrome.

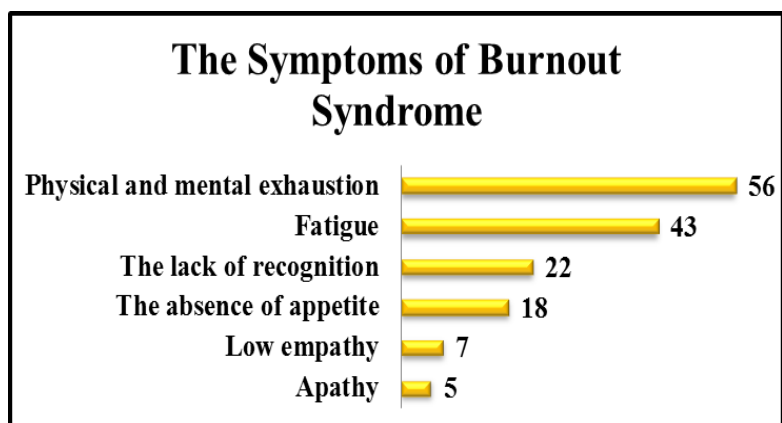


Figure 9: The Symptoms of Burnout Syndrome

The most often chosen answer was physical and mental exhaustion, which was chosen 56 times. In contrast to fatigue which was chosen 43 times. The results indicate that burnout is accompanied by exhaustion rather than normal fatigue. A possible explanation could be that when somebody says that they are tired, they could be tired from sport or another kind of physical activity. However, when somebody says that they are exhausted, it means physically as well as mentally, therefore exhaustion is perceived as a stronger word and feeling and the respondents associate the stronger feeling with burnout syndrome.

A small number of those surveyed (18) suggested that an absence of appetite is a symptom of burnout syndrome. Though this is connected rather to depression than to this issue it can be assumed that the respondents tend think of depression when they are thinking about symptoms of burnout syndrome.

4.4 Summary of the Questionnaire Survey

This survey was designed to ascertain the knowledge of the respondents regarding burnout syndrome.

The outcomes of the first section of questions show that more women, younger people and students are willing to complete the survey regarding this issue. Precisely speaking, women represent 80% of all the respondents; younger people from the age of 21 to 40 represent the majority of the respondents (95%). Over half of the participants were students (54%) and the rest (46%) are employed mainly in a people oriented occupation.

The second section of questions was constructed with the aim of ascertaining their knowledge regarding burnout syndrome. As to this, the first question, aimed at the meaning, revealed that 24% of the respondents know the term burnout syndrome, however are not capable of coming up with its meaning and 3% of the respondents do not know this term at all. Of the 76 people who completed the questionnaire, 73% considered themselves as having knowledge of this issue. Additional questions were asked of these people.

73% represents 56 people, who continued with an explanation of this term. As stated in the theoretical part of this thesis, burnout syndrome is sometimes misnamed as a depression and exhaustion therefore the explanations provided by the respondents are proof of this. Precisely, 34% explained burnout as common exhaustion and 28% as depression. The opinion that burnout syndrome affects only those who are working with people, in so called helping professions, such as doctors, nurses or social workers, appeared in 27% of

the explanations. Only 11% of all respondents were right in their explanations by covering not only the previously named features independently (depression and exhaustion), but pointing out its interconnection also with workload.

The following question aimed at occupations in danger of burnout syndrome shows that participants in this survey perceive people oriented occupations as most in danger of this syndrome. After a consideration of possible reasons for this, it seems possible that these results are mainly due to the involvement of respondents in these types of occupations.

Comparing the causes of burnout and feelings experienced at the beginning before the state of burnout syndrome reveals the inclination of the respondents towards answers containing the word 'work' or which are connected with occupation, even though these answers were not always correct. In response to the question about feelings accompanying the state of burnout syndrome, the answers revealed a tendency of participants to talk about depression. The overall response to the final question about symptoms of burnout discover the respondents perceiving it as exhaustion rather than common fatigue, therefore they consider burnout syndrome as a stronger state than just fatigue.

In general, the findings of this survey can be extrapolated to suggest that burnout syndrome is known amongst the majority of the respondents however their knowledge of its features is regarded as superficial.

5 THE EXPERIENCES AND OPINION OF A MENTOR

In order to provide information from an additional side, I have contacted a specialist on burnout syndrome. It is a mentor who works with people suffering from burnout on a daily basis as well as providing information and advice about its prevention. The aim of this interview is not only to share his experiences, but furthermore also to ascertain his view about several issues in connection with burnout. Namely, about the ranking of burnout syndrome among diseases, about the importance of sharing information connected to it, about increased interest in his services as a mentor and the future development of this syndrome. Accordingly, the questions are divided into two parts.

First of all, it is necessary to clarify the term ‘mentoring’. According to mentor Zdeněk Weber, mentoring is a way of leading clients or groups of people to an understanding of particular fields, abilities or systems. It is the process in which the mentee and mentor are in a friendly and emotionally imbued relationship based on trust and equality.

Zdeněk Weber has been interested in burnout syndrome since he was 26 years old, almost 11 years, as he experienced burnout syndrome himself because of his entrepreneurship and managerial activity.

5.1 The Questions Related to His Experiences

As stated above, this section of questions will focus on experiences of mentor Zdeněk Weber in his work with people suffering from burnout.

- *What is most common cause of burnout syndrome?*

Compulsive dependence on success, performance and outcome, continuous overload, a lack of good impressions and spiritual life, pressure on performance, low self-confidence manifested as a need to prove oneself, power, stress, fear of failure and rejection.

- *What are the most common causes of burnout syndrome among people with whom you have been working so far?*

The most common causes are arrogance and ignorance of themselves, their values and a compulsive need for achieving success or meeting others half way at all costs, and working to the point of total exhaustion. Also, lots of stress and negative thinking along with a strong habit to please others at any cost.

- *Is it typical that people experiencing burnout ignore the initial symptoms?*

Yes, they are ignoring all of the symptoms. They are numb, their body is producing adrenalin and ephedrine of a high amount and they are addicted to this feeling. If you are addicted to your body and its production of adrenalin and ephedrine, regardless of what you do in life, you are going to collapse sooner or later with burnout syndrome. Regrettably, it is permanent overload, even if you do not feel it and find it out after some time, especially because you are not capable of getting out of bed, or you have flu for the fifth time or you are fired from work unless you are successful and get results.

- ***Do people come to you for prevention or rather after the first symptoms of burnout syndrome appear?***

Usually after the outbreak of burnout syndrome or when they are in one of its stages.

- ***Are these people usually from certain professions or is it true that anyone can suffer from burnout syndrome regardless of their occupation?***

Everybody can suffer from burnout syndrome but it is true that some occupations and life roles can be predisposed to burnout syndrome. Usually the risk is bigger among those who give mental energy and do not get it back. Wherever you are experiencing an escalated situation, pressure on performance and results or overload, the danger is increased.

- ***If you meet people with burnout syndrome, what is your advice to them and what in their lives should they change?***

It depends on the stage of burnout syndrome that they are in. When it is a state of burnout, it requires a long-term plan of the prevention of burnout syndrome aimed at good feelings and the building of a healthy lifestyle. The client goes through coaching, fitness consulting, Chinese medicine, looking for a life vision or consultancy with a psychologist.

- ***Are you providing services also to companies or are you sought by companies for the reason of acquainting their employees with the possible consequences of a hectic life?***

Yes, I do provide services such as coaching and also e-learning for teachers, managers and office workers.

5.2 The Questions Related to His Personal Opinion

The previous section of questions was based upon the experiences of a mentor, in contrast to this part which is aimed specifically at his own opinion, regarding these questions:

- ***Do you think that burnout syndrome is a serious problem that should be paid more attention to?***

I think it would be beneficial if more attention would be paid to the training and education of managers or other occupations which are in danger of this syndrome and also to care more about prevention and self management. Just like firms and companies should care for their employees in this respect and support them in the prevention of burnout syndrome.

- ***Do you tend to incline to think that burnout syndrome should be ranked among mental illnesses, such as depression?***

No, burnout syndrome should be ranked among the consequences of a lack of managerial skills and self-regeneration. It should belong to human resources management or to managerial education, definitely not to psychiatry. Burnout syndrome is not a disease, it is a state of mind.

- ***Do you feel there is an increased interest in this type of 'disease' nowadays? Or rather, do you feel there has been an increased interest in your services as a mentor over the last few years?***

Because of my other activities, burnout syndrome is not the focal point, but as to the first part of your question, people are far more interested in this issue than they were several years ago.

- ***Do you think that there will be a higher number of 'burnout' people? If yes, for what reason?***

I think that the number of people with burnout syndrome will become less and less, especially because of the increasing awareness of this syndrome and a decrease in pressure on the material life of people. To me, the future is going to be about human relationships and spiritual life. People will focus more on education and creating a society which will focus on producing values rather than its consumption.

5.3 The Summary of an Interview with a Mentor

To sum up this interview, mentor Zdeněk Weber is of the opinion, that burnout syndrome is the main consequence of general human ignorance towards themselves. In this ignorance stems the lack of awareness of the initial symptoms. That is why people look for help when they found themselves in one of the several stages of burnout syndrome.

Mentor admitted, that people experiencing burnout syndrome could be from certain professions, however it is not a rule. Wherever is a huge pressure on human performance in connection to work, there is an increased danger of suffering from burnout syndrome.

When it comes to the advices to burnout people, they are produced with regards to the stage of burnout syndrome, in which the particular person is. But usually the recovery is a long-term process which is subsequently accompanied by activities such as coaching, fitness consulting, Chinese medicine and psychologist consultation.

He also expressed the opinion about the prevention from burnout, and said that more attention should be paid on it, especially from the side of employers towards their employees.

Even though burnout syndrome belongs among mental illnesses, Mentor Zdeněk Weber claims, that instead of being ranked among these illnesses, it should be regarded as a consequence of the lack of skills and the inability to regenerate.

The interest in burnout has increased throughout the last years as mentor admitted, additionally he express the opinion, that the amount of burnout people will be lower in the future as a result of increasing awareness of this syndrome.

CONCLUSION

The bachelor thesis in hand dealt with the issue of burnout syndrome and is set out with the aim to discover the knowledge of burnout syndrome in the public within the Czech Republic.

The theoretical part of this thesis was aimed at the definitions of this term, its establishment and the description of the historical development of burnout syndrome. It was also focused on the description of the features of this syndrome, the causes, symptoms, the stages, the outcomes, the recovery and the prevention of it.

The objective of the practical part was to ascertain the knowledge of the public about this syndrome. Returning to the hypothesis posed at the beginning of this thesis, it is now possible to state that those surveyed are informed about burnout syndrome however their knowledge can be regarded as superficial.

This statement is supported by the questionnaire survey contained herein. 73% of the respondents considered themselves as knowledgeable of this term, but when it came to the questions aimed at its basic features, named and described in the theoretical part, they were inaccurate and, what's more, mostly wrong. The survey has shown that respondents tend to describe burnout syndrome and its features either as depression or exhaustion mainly in people oriented occupations. The most obvious finding to emerge from this survey is that respondents perceive burnout solely in connection with work but, rightly negatively rather than something positive.

However, with a small sample size, caution must be applied as the findings might not be transferable to every individual within the Czech Republic, but this survey can be used as a base for further studies. The recommendation for future research would be the use of an additional data collection method; the focus group.

While producing this thesis I had a great opportunity to meet with a person who had experienced burnout syndrome and nowadays is helping those who suffer from it or incline to it. It was also helpful to see the point of view of a person whose relative experience of burnout syndrome and who will have to live with the consequences of it for the rest of his live.

This study brought me to think about life and its value. Primarily, if the current situation, and especially the high demands placed on employees chasing after their careers, is worth losing a full, healthy life. In my opinion, health is not worth less than anything in the world.

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APPENDICES

P I The Czech version of the Questionnaire

P II The English (translated) version of the Questionnaire

APPENDIX P I: THE CZECH QUESTIONNAIRE.

Vážená paní, vážený pane,

jsem studentkou Univerzity Tomáše Bati ve Zlíně a tento dotazník je součástí praktické části mé bakalářské práce, která má za úkol zjistit, jaká je informovanost veřejnosti o syndromu vyhoření. Zdůrazňuji Vám, že tento dotazník je zcela anonymní, a proto Vás chci poprosit o zodpovězení všech uvedených otázek.

Pokud není uvedeno jinak, pak u každé otázky, prosím označte pouze jednu odpověď. Dotazník není dlouhý a jeho vyplňování Vám zabere maximálně 5 minut. Předem Vám děkuji za Váš čas a ochotu při vyplňování tohoto dotazníku.

Petra Ďurianová

1. Víte, co znamená syndrom vyhoření?

- Ano
- Slyšel/a jsem o něm, ale nevím, co znamená
- Ne, nikdy jsem o něm neslyšel/a

2. Pokud ano, pak tento pojem vysvětlete.

3. Na začátku pracovní kariéry člověka, kterého později potká syndrom vyhoření, obvykle bývá: (zaškrtněte nejméně 1 odpověď, nanejvýš 4)

- Vysoký pracovní entuziasmus
- Perfekcionismus
- Obětavost
- Nechuť k práci

4. Co podle Vás patří mezi příčiny syndromu vyhoření? (zaškrtněte nejméně 1 odpověď, nanejvýš 6)

- Dlouhotrvající stres v zaměstnání
- Velké nadšení
- Nezdravý styl života
- Nízký příjem
- Špatné vztahy se spolupracovníky
- Špatné soustředění

5. Které pocity podle Vás provázejí stav syndromu vyhoření? (zaškrtněte nejméně 1 odpověď, nanejvýš 7)

- Vina
- Nepřátelství vůči ostatním

- Sebelítost Myšlenky na sebevraždu
 Beznaděj Sklíčenost
 Smutek

6. Co byste zařadil/a mezi příznaky syndromu vyhoření? (zaškrtněte nejméně 1 odpověď, nanejvýš 6)

- Nedostatek uznání Nechutenství
 Únava Apatie
 Nízká empatie Fyzické a psychické vyčerpání

7. Které profese jsou podle Vás tímto syndromem ohrožené?

8. Vaše pohlaví:

- Žena Muž

9. Váš věk:

- méně než 20 let 21 – 30 let 31 – 40 let
 41 – 50 let 51 – 60 let více než 60 let

10. Vaše profese:

APPENDIX P II: THE ENGLISH QUESTIONNAIRE.

Dear Sir, Dear Madame,

I am a student of the Tomas Bata University in Zlín and this questionnaire is a part of the practical part of my bachelor thesis which aims to find out what is the public awareness of burnout syndrome. I would like to emphasize, that this questionnaire is completely anonymous therefore I would like to ask you to answer all stated questions.

Unless stated otherwise, please choose only one answer for every question. The questionnaire is not long and its completion will not take you more than 5 minutes. I would like to thank you in advance for your time and willingness to complete my questionnaire.

Petra Ďurianová

1. Do you know what burnout syndrome means?

- Yes, I do
- I have heard of it, but I do not know what it means
- No, I have never heard of it

2. If yes, please explain this term.

3. At the beginning of the career of man, who is later experiencing burnout syndrome, usually appears: (tick at least 1 answer, but no more than 4)

- High working enthusiasm
- Perfectionism
- Sacrifice
- Reluctance to work

4. What, according to you, belongs among causes of burnout syndrome? (tick at least 1 answer, but no more than 6)

- Long-term stress in the occupation
- High enthusiasm
- Unhealthy Lifestyle
- Low income
- Bad relationships with colleague
- Poor concentration

5. Which feelings according to you are typical for the state of burnout syndrome?

(tick at least 1 answer, but no more than 7)

- | | |
|------------------------------------|---|
| <input type="checkbox"/> Guilt | <input type="checkbox"/> Hostility towards others |
| <input type="checkbox"/> Self-pity | <input type="checkbox"/> Suicidal thoughts |
| <input type="checkbox"/> Despair | <input type="checkbox"/> Dejection |
| <input type="checkbox"/> Sadness | |

6. What would you rank among the symptoms of burnout syndrome? (tick at least 1 answer, but no more than 6)

- | | |
|--|---|
| <input type="checkbox"/> The lack of recognition | <input type="checkbox"/> The absence of appetite |
| <input type="checkbox"/> Fatigue | <input type="checkbox"/> Apathy |
| <input type="checkbox"/> Low empathy | <input type="checkbox"/> Physical and mental exhaustion |

7. Which occupations are in your opinion in a danger of burnout syndrome?

8. Gender:

- | | |
|--------------------------------|------------------------------|
| <input type="checkbox"/> Woman | <input type="checkbox"/> Man |
|--------------------------------|------------------------------|

9. Age:

- | | | |
|---|--|---|
| <input type="checkbox"/> Less than 20 years | <input type="checkbox"/> 21 – 30 years | <input type="checkbox"/> 31 – 40 years |
| <input type="checkbox"/> 41 – 50 years | <input type="checkbox"/> 51 – 60 years | <input type="checkbox"/> More than 60 years |

10. Your occupation: