## COUNSELLOR BURNOUT

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#### ABSTRACT

Burnout has been known as "job stress", "battle fatigue", "mental breakdown", or "premature aging." All dimensions of our being can manifest burnout, be it psychological or physiological. This paper explores the problem of burnout, which is common in the counselling profession. Physical signs and psychological symptoms can be debilitating to counsellors. The writer presents various theories, which seek to explain the characteristics, causes, consequences, and coping strategies relating to burnout. Three major causes of acute burnout are role conflict, role ambiguity and role overload. Counsellors also experience guilt when their clients commit suicide. Although this research is focused on the concerns of counsellors, the contents and suggestions can be generalized to any practitioner in the human services profession. The ways to reduce burnout include reducing counselling load, implementing a proper referral system, including humour in counselling and so forth. Other strategies are also discussed. Relaxation techniques such as progressive muscle relaxation and guided imagery in music can help when we encounter the early signs of stress. The road to recovery starts with trying to make feelings about our life more explicit and to define some areas and dimensions of life that need renewed energy or redefined commitment. A daily anti-burnout exercise incorporating music therapy is presented in the appendix for the enjoyment of all readers. The key to avoiding burnout is "balance": the word that healthy people live by.

#### INTRODUCTION

Consider this personal testimony: "I have been counsellor for almost three decades. I got into the field because I thought it was a noble profession and I had the right characteristics and values that would make me a good counsellor. served the government sector and various voluntary organisations before venturing into private practice. After years of having a very lucrative income, I decided to lecture at a public university. I wasn't too pleased with that decision but somehow I could not cope with the intense pressures of running my own 'business'. Actually I had reached a point of saturation when the thought of helping people was not enough to motivate me to be an effective counsellor. I was heading nowhere and somehow I felt I was doing a disservice to my clients. Even as I taught future counsellors-to-be, I felt a sense of guilt - a sense of insecurity. It was as if I was a hypocrite preaching the ideals of counselling but uncertain if I ever did make a difference in the lives of those who came my way. I woke up one day unable to return to my position at the university. I guess that was the end of my life as a counsellor. I was born to be a caring counsellor and confidante to the troubled but right now I am full of doubts and regrets; I am the most unfortunate one. It's over, my career as a counsellor."

The preceding paragraph illustrates a tragic state of alienation common in the human service profession, burnout. Dr. Herbert Freudenberger the psychologist who coined this cliche, defined burnout as "a state of fatigue brought about by a devotion to a cause, a way of life, or a relationship

that failed to produce the expected reward" (Mechelan, 1997). In other words, "burnout is a problem born of good intentions . . . it happens when people try to reach unrealistic goals and end up depleting their energy and losing touch with themselves and others" (Gehmeyr, 1997).

Researcher Ayala Pines, who helped develop the first well-validated burnout inventory, explains it as a "sense of distress, discontent, and failure in the quest for ideals" and "a state of physical, emotional, and mental exhaustion, that typically occurs as a result of long-term involvement with people in situations that are emotionally demanding" (cited in Farber, 1983). Thus, all dimensions of our being can manifest burnout, be it psychological or physiological.

According to Watkins (1983), burnout is a "pervasive, all-encompassing phenomenon that arises from the unique interactions of an individual's personality with the work environment". In this definition, we find the two main factors that are in conflict are the service provider's personal characteristics (internal) and the external circumstances.

Burnout has been said to be an extreme reaction to stress but is not the same as stress. As a counsellor, not being able to cope with stress will lead to negative self-concept, negative job attitudes, and loss of concern and feelings for clients (Pines and Maslach, 1978). However, stress is not the only reason that contributes to burnout. Even when the needs of clients and job demands are adequately met, boredom may

surface and this would eventually lead to burnout. Freudenberger (1974) describes this as "routinization" of the job, which makes the work lacking in challenge and motivation.

Perhaps another way to describe burnout is that it is a "disease of overcommitment" (Freudenberger and Richelson, 1980). Maslach (1976) takes that further by explaining that burnout is a "dehumanising process, emphasising the loss of concern and empathy in previously caring workers". Therefore, some theorists believe that burnout is not something that strikes without warning like an unexpected earthquake but involves a process that takes a unique path for each person. It is a process, not a final destination.

# THE WARNING SIGNS AND SYMPTOMS OF BURNOUT

Burnout is not a new buzzword or an emerging trend of the nineties. It has been around for a long time, having been known as "job stress", "battle fatigue", "mental breakdown", or "premature aging" (Mechelen, 1997). We may think that only Type A personalities and workaholics experience burnout. However, people who work 40 hours a week and do not take their work home can also succumb to burnout if they spread themselves too thin outside the workplace.

Perhaps the counsellor is on several committees of voluntary organisations, or has to come home to attend to kids and toddlers.

Table 1. Warning signs of Burnout (adapted from Anon., 1997)

PHYSICAL	EMOTIONAL	BEHAVIOURAL
Clammy hands	Anxiety	Blaming others/clients
Diarrhea	Depression	Frequent crying
Dry mouth	Fear	Irritability
Eating disorders	Frustration	Short attention span
Halitosis (bad breath)	Grief	Overactivity
Upper back pain	Isolation	Negative/pessimistic attitude
Heart palpitations	Sense of powerless	Short temper
Stiff neck or shoulders	Sense of worthlessness	High risk behaviour