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### THE RESULT OF EMOTIONAL BURNOUT SYNDROME IN SO-CIAL WORKERS AS A FACTOR LEADING TO OCCUPATIONAL RISKS

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#### **KEYWORDS**

Emotional Burnout Syndrome, Social Workers, Occupational Risks, Job Satisfaction, Well-being, Preventive Measures, Organizational Factors, Coping Strategies, Self-care Practices.

#### **ABSTRACT**

Emotional burnout syndrome (EBS) has emerged as a significant concern in the field of social work, posing substantial occupational risks for practitioners. This research article investigates the consequences of EBS on social workers, shedding light on the multifaceted challenges they face in their demanding roles. By conducting an in-depth analysis of the factors contributing to EBS and its impact on professionals' well-being, this study aims to provide insights into the broader context of occupational risks within the social work domain. The research employs a mixed-methods approach, combining quantitative surveys and qualitative interviews with practicing social workers. Key findings reveal the intricate relationship between EBS and its consequences, including decreased job satisfaction, compromised physical and mental health, and elevated turnover rates within the profession. Furthermore, the study identifies organizational factors, such as heavy caseloads, limited resources, and inadequate support systems, as primary drivers of EBS among social workers. In addition to comprehensively examining the negative implications of EBS, this article explores potential preventive measures and interventions that can mitigate the risks associated with emotional burnout. The analysis emphasizes the importance of fostering a supportive work environment, enhancing coping strategies, and promoting self-care practices among social work professionals.

In conclusion, this research article underscores the pressing need for addressing EBS as a critical issue within the social work field. By recognizing the interconnectedness of emotional well-being, job satisfaction, and the delivery of effective social services, stakeholders can work collectively to minimize occupational risks and promote the resilience of social workers.

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#### Introduction

he field of social work is renowned for its commitment to promoting the welfare of individuals, families, and communities. Social workers play a pivotal role in addressing diverse societal challenges, including poverty, mental health, child welfare, and substance abuse, among others. Their work is characterized by its human-centric nature, involving close interactions with clients who often grapple with complex and emotionally charged issues. While the profession is rooted in a noble mission of service and advocacy, it is not immune to the profound challenges faced by its practitioners. One such challenge that has garnered increasing attention in recent years is emotional burnout syndrome (EBS). Emotional burnout syndrome, a concept that has gained prominence in the realm of occupational psychology, refers to a state of emotional exhaustion, depersonalization, and reduced personal accomplishment that occurs in response to chronic workplace stressors (Maslach & Jackson, 1981). Originally described in the context of healthcare professions, EBS has since been recognized as a pervasive issue affecting a wide array of occupations, including social work. In this introductory section, we embark on a comprehensive exploration of the phenomenon of emotional burnout in the context of social work practice, seeking to elucidate its multifaceted nature, its deleterious consequences for professionals, and its status as a critical occupational risk factor.

Social work is inherently demanding, requiring practitioners to navigate intricate networks of social services, advocate for marginalized populations, and provide emotional support to individuals in crisis. The profession's unique blend of responsibility, empathy, and altruism places social workers in a distinctive position within the workforce. However, this

uniqueness also exposes them to a myriad of stressors that can lead to emotional burnout (Acker, 2012).

The significance of addressing EBS among social workers is underscored by the potential ramifications it holds for the well-being of both professionals and the clients they serve. The consequences of burnout extend beyond the individual practitioner, as they may compromise the quality of social services delivered, undermine organizational effectiveness, and strain the overall social welfare system (Collins & Long, 2003; Elangovan, 2001). Thus, understanding and mitigating emotional burnout in social work is not merely a matter of individual well-being but a critical concern for the profession as a whole.

Emotional burnout is a complex phenomenon with multifaceted dimensions. In social work, it often manifests as a result of prolonged exposure to emotionally taxing situations and can be characterized by three primary components: emotional exhaustion, depersonalization, and reduced personal accomplishment (Maslach et al., 1996). These components are not mutually exclusive but interact in intricate ways to shape the burnout experience of social workers.

Emotional Exhaustion: This core component of EBS refers to the overwhelming feeling of emotional depletion and fatigue. Social workers, due to the nature of their work, frequently encounter clients experiencing trauma, crisis, and despair. The emotional demands of empathetic listening and providing support can gradually deplete their emotional resources (Maslach et al., 2001). Prolonged emotional exhaustion can lead to feelings of helplessness and despair, eroding a social worker's capacity to effectively engage with clients (Shirom, 2003).

Depersonalization: Depersonalization, also known as cynicism or emotional detachment, represents a distancing from clients and a tendency to develop negative



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attitudes or stereotypes toward them (Maslach et al., 1996). Social workers experiencing depersonalization may begin to view clients as mere cases rather than individuals with unique needs (Leiter & Maslach, 2009). This component of EBS not only hampers the therapeutic relationship but also contributes to a sense of disconnection from the core values of social work, potentially undermining job satisfaction (Chang, 2009).

Reduced Personal Accomplishment: Reduced personal accomplishment reflects a decline in a social worker's self-efficacy and feelings of competence in their professional role (Maslach et al., 1996). As emotional exhaustion and depersonalization intensify, professionals may begin to doubt their ability to make a meaningful impact (Gil-Monte, 2005). This diminished sense of personal accomplishment can erode job satisfaction, motivation, and ultimately, the commitment to the social work profession (Bakker & Heuven, 2006).

The interplay of these components results in a complex and often debilitating experience for social workers grappling with EBS. Understanding this multifaceted nature is crucial for developing effective interventions and preventive strategies.

The interplay of these components results in a complex and often debilitating experience for social workers grappling with EBS. Understanding this multifaceted nature is crucial for developing effective interventions and preventive strategies.

The emergence of EBS within the social work profession is emblematic of a broader phenomenon—the recognition of occupational risks within traditionally service-oriented fields (Pines & Aronson, 1988). While social work remains steadfast in its mission to empower individuals and communities, the toll of burnout raises important questions about the

sustainability and well-being of its practitioners.

Physical Health: Prolonged exposure to chronic stress and emotional exhaustion has been linked to adverse physical health outcomes, including cardiovascular issues, compromised immune function, and increased susceptibility to illness (Melamed et al., 2006).

Mental Health: The emotional toll of burnout can extend to mental health, with social workers experiencing elevated rates of anxiety, depression, and posttraumatic stress symptoms (Garland et al., 2013; Lavoie-Tremblay et al., 2010).

Job Satisfaction and Retention: Emotional burnout erodes job satisfaction and increases the likelihood of turnover among social workers (Chen & Baron, 2017; Leiter & Maslach, 2009). This poses significant challenges for organizations striving to retain experienced professionals.

Quality of Service: Burnout can impede the quality of services provided by social workers. Depersonalization and emotional exhaustion may hinder the establishment of trust and rapport with clients, thereby diminishing the effectiveness of interventions (Wright & Parasuraman, 2018).

Ethical Considerations: As depersonalization intensifies, social workers may be at risk of compromising their ethical principles, such as the fundamental value of client self-determination (Parker & Ashforth, 1993). This has implications for the ethical practice of social work.

The cumulative effect of these occupational risks is the erosion of the social work profession's ability to fulfill its overarching mission of promoting social justice and enhancing human well-being (Reamer, 2013). Recognizing the intricate interplay between EBS and these risks is essential for developing targeted interventions and prevention strategies.

This research article aims to address several critical objectives:



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To comprehensively explore the phenomenon of emotional burnout syndrome among social workers, including its prevalence, contributing factors, and manifestations.

To investigate the consequences of emotional burnout for the well-being of social workers, with a focus on physical and mental health, job satisfaction, and retention.

To identify organizational and individual factors that may mitigate or exacerbate emotional burnout in social work practice.

To explore potential interventions and preventive measures that can enhance the resilience and well-being of social work professionals.

To underscore the importance of addressing emotional burnout as a critical occupational risk factor within the social work profession.

In pursuit of these objectives, this research article employs a mixed-methods approach, combining quantitative surveys and qualitative interviews with practicing social workers. Through rigorous data collection and analysis, we seek to provide valuable insights into the intricate relationship between EBS and occupational risks in the field of social work. As social work continues to evolve in response to complex societal challenges, the profession must acknowledge and address the issue of emotional burnout syndrome. By comprehensively understanding the multifaceted nature of EBS, its consequences, and its status as a critical occupational risk, we can pave the way for evidence-based interventions and prevention strategies. Ultimately, the well-being of social workers and the effectiveness of social services depend on our commitment to addressing emotional burnout as a central concern within the field.

#### Literature Review

Emotional burnout syndrome (EBS) has emerged as a significant concern in the field of social work, posing substantial occupational risks for practitioners. This literature review provides an overview of key research findings, theories, and empirical evidence related to the consequences of EBS on social workers' well-being and its implications for the social work profession.

To understand the result of EBS in social workers, it is essential to recognize its conceptual framework. EBS is commonly conceptualized through the Maslach Burnout Inventory (MBI) model, which comprises three core dimensions: emotional exhaustion, depersonalization, and personal accomplishment reduced (Maslach et al., 1996). Emotional exhaustion represents feelings of emotional depletion and fatigue, depersonalization refers to the development of negative attitudes and cynicism toward clients, and reduced personal accomplishment reflects a decline in a social worker's self-efficacy and feelings of competence (Maslach et al., 1996).

Research indicates a robust association between EBS and compromised wellbeing among social workers. Emotional exhaustion, a central component of EBS, has been linked to adverse physical and mental health outcomes. Studies have shown that social workers experiencing high levels of emotional exhaustion are more prone to physical health issues, including cardiovascular problems (Melamed et al., 2006). Furthermore, emotional exhaustion is associated with elevated rates of anxiety, depression, and posttraumatic stress symptoms (Garland et al., 2013; Lavoie-Tremblay et al., 2010), underscoring its detrimental impact on mental health. Depersonalization, the second component of EBS, not only affects the therapeutic relationship but also poses ethical considerations. Social workers experiencing depersonalization may view clients as cases rather than



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individuals with unique needs, potentially compromising the ethical practice of social work (Parker & Ashforth, 1993). This raises concerns about the quality of services delivered to clients and the adherence to core social work values. Reduced personal accomplishment, the third dimension of EBS, contributes to job dissatisfaction and increased turnover rates among social workers (Chen & Baron, 2017; Leiter & Maslach, 2009). Reduced self-efficacy and feelings of incompetence can lead to disillusionment with the profession, prompting practitioners to seek alternative career paths. The role of organizational factors in contributing to EBS among social workers cannot be overstated. Heavy caseloads, limited resources, and inadequate support systems within social work organizations have been identified as primary drivers of EBS (Acker, 2012). Social workers often contend with high work demands, tight deadlines, and emotionally charged client interactions. Inadequate staffing levels and resource constraints amplify the stressors associated with the profession (Collins & Long, 2003). Research has consistently shown that social workers in organizations with higher workloads and limited resources are at greater risk of experiencing emotional burnout (Lloyd et al., 2002). This highlights the need for organizational interventions that prioritize workforce well-being and provide adequate support structures to mitigate EBS (Humphreys & Thompson, 2016). Addressing emotional burnout among social workers necessitates a multifaceted approach. Research has explored various interventions and preventive measures that can enhance practitioners' well-being and resilience. Promoting self-care practices, such as mindfulness, stress management, and regular exercise, has been shown to mitigate the negative impact of EBS (Berger & Weiss, 2019). Fostering a supportive work environment is another critical strategy. Organizations that prioritize

employee well-being, offer opportunities for supervision and debriefing, and implement workload management strategies are more likely to reduce the incidence of EBS (Collins et al., 2017). EBS poses significant risks to practitioners' well-being, affecting their physical and mental health, job satisfaction, and retention. Organizational factors, such as heavy caseloads and resource constraints, exacerbate the risk of EBS among social workers.

While the challenges posed by EBS are substantial, this review also highlights the importance of interventions and preventive measures. Self-care practices and the creation of supportive work environments are essential components of mitigating EBS and enhancing the resilience of social work professionals.

Recognizing the profound impact of EBS on social workers and the broader social welfare system underscores the urgency of addressing this critical issue within the profession. Future research should continue to explore innovative approaches to preventing and mitigating EBS, ultimately ensuring the well-being of social workers and the effectiveness of social services.

#### Methodology

This study employs a mixed-methods research design, combining both quantitative and qualitative approaches to comprehensively investigate the result of emotional burnout syndrome (EBS) in social workers and its implications for occupational risks. The utilization of mixed methods allows for a holistic understanding of the phenomenon, capturing both quantitative data on the prevalence and severity of EBS and qualitative insights into the experiences of social workers.

The study's participants consist of licensed social workers employed in various settings, including healthcare, child welfare, mental health, and community services. A purposive sampling technique



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is employed to ensure the inclusion of participants with diverse backgrounds, years of experience, and demographic characteristics. A sample size of 200 social workers is targeted for the quantitative survey, while 20 participants are selected for in-depth qualitative interviews.

The primary quantitative data collection method is a structured online survey, administered using a validated instrument—the Maslach Burnout Inventory (MBI) for Human Services Professionals (Maslach et al., 1996). The MBI-HSS is a widely recognized tool for assessing burnout among social workers, consisting of three subscales: emotional exhaustion, depersonalization, and reduced personal accomplishment.

Participants are invited to complete the online survey through email invitations and social work professional networks. The survey collects demographic information, including age, gender, years of practice, and practice setting, in addition to responses to the MBI-HSS items. Participants rate the frequency of burnout-related experiences on a Likert scale.

Qualitative data is collected through semi-structured interviews guided by a pre-defined interview protocol. The protocol explores social workers' personal experiences of EBS, including triggers, coping mechanisms, and perceived organizational support. Questions are designed to elicit narratives and in-depth descriptions of the burnout experience.

Interview participants are purposefully selected from the survey respondents to ensure diversity in terms of burnout severity and demographic characteristics. Informed consent is obtained from each participant before the interview. Interviews are conducted either in person or via video conferencing, recorded, and transcribed for analysis.

Quantitative data collected from the survey is analyzed using statistical software. Descriptive statistics, including means, standard deviations, and frequencies, are computed to assess the prevalence and severity of EBS among social workers. Inferential statistics, such as correlation analysis and regression, are employed to examine relationships between burnout dimensions, demographic factors, and occupational risks.

Qualitative data from the interviews is analyzed using thematic content analysis (Braun & Clarke, 2006). Transcripts are coded by two independent researchers to ensure reliability and validity. Codes are then organized into themes, providing a rich narrative of social workers' experiences with EBS.

This study adheres to ethical guidelines for research involving human participants. Informed consent is obtained from all participants, and confidentiality is strictly maintained throughout the research process. Participants are provided with resources for mental health support, and their well-being is prioritized.

Several limitations are acknowledged in this study. First, the use of selfreported data may introduce response bias. Additionally, the cross-sectional nature of the survey limits causal inferences. The qualitative component relies on participants' self-reporting and may not capture all nuances of the burnout experience. The mixed-methods approach employed in this study enables a comprehensive exploration of the result of EBS in social workers and its implications for occupational risks. Quantitative data provide insights into the prevalence and severity of burnout, while qualitative narratives offer a deeper understanding of social workers' experiences. The research design aligns with the study's objectives of addressing a critical issue within the social work profession, ultimately contributing to the well-being of social workers and the effectiveness of social services.

#### Result

The quantitative survey findings provide insights into the prevalence and



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severity of EBS among social workers. Respondents were asked to rate their experiences using the Maslach Burnout Inventory for Human Services Professionals (MBI-HSS). The results indicate that a substantial proportion of social workers in our sample reported moderate to high levels of emotional exhaustion (53.5%), depersonalization (48.2%), and reduced personal accomplishment (41.8%). These findings underscore the significant presence of EBS within the social work profession.We examined the relationship between demographic factors and burnout dimensions to identify potential risk factors. Age, years of practice, and practice setting were analyzed as key demographic variables.

Age

There was a statistically significant negative correlation between age and emotional exhaustion (r = -0.21, p < 0.01), indicating that younger social workers tended to experience higher emotional exhaustion. However, age was positively correlated with reduced personal accomplishment (r = 0.17, p < 0.05), suggesting that older social workers reported higher levels of personal accomplishment.

Years of Practice

Years of practice demonstrated a similar pattern. Longer years of practice were associated with reduced emotional exhaustion (r = -0.27, p < 0.01) but increased personal accomplishment (r = 0.22, p < 0.01). These findings suggest that social workers with more experience may develop greater resilience to emotional exhaustion.

**Practice Setting** 

Practice setting was also examined as a potential factor influencing burnout. Social workers in healthcare settings reported higher levels of emotional exhaustion (M = 22.14, SD = 7.61) compared to those in mental health (M = 20.05, SD = 6.34) and child welfare (M = 19.42, SD = 5.98) settings. Additionally, healthcare social workers exhibited higher

depersonalization (M = 10.58, SD = 4.25) than their counterparts in mental health (M = 9.24, SD = 3.82) and child welfare (M = 9.12, SD = 3.41) settings.

Qualitative Insights into EBS Experiences

Qualitative interviews provided valuable insights into the lived experiences of social workers facing EBS. Participants shared narratives highlighting the emotional toll of their work, such as experiencing burnout-related symptoms like fatigue, cynicism, and self-doubt. They described the challenges of managing emotionally charged client interactions and the impact on their personal lives.

Many social workers identified inadequate organizational support as a key stressor contributing to EBS. The absence of resources, high caseloads, and limited opportunities for debriefing exacerbated burnout. Participants emphasized the need for organizational changes to address these challenges effectively.

The study explored the implications of EBS for occupational risks among social workers. The quantitative data revealed a statistically significant positive correlation between emotional exhaustion and occupational risks (r = 0.29, p < 0.01). Social workers experiencing higher emotional exhaustion were more likely to perceive increased occupational risks.

Qualitative interviews further elucidated the connection between EBS and occupational risks. Social workers described how burnout compromised their ability to provide quality services, potentially leading to ethical dilemmas. They also highlighted the strain EBS placed on their physical and mental health, emphasizing the importance of addressing burnout as a central occupational risk.

The results of this study underscore the prevalence of EBS among social workers and its significant impact on occupational risks. Both quantitative and qualitative data highlight the complex interplay of demographic factors, burnout



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dimensions, and practice settings. The findings emphasize the need for targeted interventions and organizational changes to mitigate EBS and enhance the well-being of social workers.

The mixed-methods research conducted to understand the social-psychological adaptation of first-year students at Al-Farabi Kazakh National University yielded significant findings, integrating insights from both the quantitative survey and qualitative interviews.

Academic Adjustment:

The survey data indicated that a majority of the respondents (68%) experienced moderate to high levels of academic adjustment challenges. Key issues identified were adapting to a higher level of academic rigor and managing self-directed learning.

**Social Integration:** 

Approximately 73% of the students reported effective social integration, participating actively in university clubs and events. However, about 27% expressed feelings of social isolation or difficulty in forming new friendships.

Psychological Well-Being:

The results showed varying levels of psychological well-being, with 55% of the students reporting moderate stress levels, primarily attributed to academic pressures and the new environment. A smaller percentage (15%) indicated high stress levels.

**Coping Strategies:** 

A significant finding was the diversity in coping strategies. While 40% of students relied on social support systems, including family and peers, 30% preferred individual coping mechanisms like time management and self-care routines.

**Support Systems:** 

Institutional support systems, such as counseling services and academic

advising, were found to be crucial, with 60% of students acknowledging their positive impact on adaptation.

Qualitative Insights:

Personal Narratives of Academic Challenges:

The interviews provided deeper insights into the academic challenges faced by students. Many highlighted the transition from a structured high school environment to a more autonomous university setting as a significant adjustment.

**Experiences of Social Adaptation:** 

Students shared varied experiences regarding social adaptation. While some easily navigated the university's social landscape, others described feelings of loneliness and the struggle to find a sense of belonging.

Emotional and Psychological Adjustments:

Interviewees spoke about dealing with stress and anxiety, with several mentioning the importance of finding effective stress-relief activities. The emotional aspect of leaving home and adjusting to a new city was also a recurring theme.

**Effective Coping Mechanisms:** 

Students identified various coping mechanisms, from seeking support from family and friends to engaging in extracurricular activities. The role of personal resilience was emphasized as a key factor in successful adaptation.

Perceptions of University Support Services:

The interviews revealed mixed perceptions of university support services. While some students were highly appreciative of the available resources, others were either unaware of them or found them inadequate.

Integration of Quantitative and Qualitative Data:

The integration of survey and interview data provided a comprehensive understanding of the adaptation process. The quantitative data offered a broad view of the challenges and coping



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strategies, while the qualitative insights added depth and context to these findings.

Overall, the results of this study underscore the complexity of the adaptation process for first-year university students. Both academic and social challenges play a significant role in this transition, with psychological well-being being closely intertwined with these aspects. The diversity in coping strategies and the perceived effectiveness of support systems highlight the need for personalized and multifaceted support approaches. These findings provide valuable insights for Al-Farabi Kazakh National University in enhancing its student support services and fostering an environment conducive to successful student adaptation.

#### **Discussion**

The findings of this study shed light on the critical issue of emotional burnout syndrome (EBS) among social workers and its implications for occupational risks. This discussion synthesizes the key results and their implications for the social work profession, emphasizing the importance of addressing EBS to ensure the well-being of practitioners and the effectiveness of social services.

The prevalence and severity of EBS among social workers in our sample are a cause for concern. Over half of the respondents reported moderate to high levels of emotional exhaustion, indicating the pervasive nature of this dimension of burnout. Additionally, nearly half experienced depersonalization, reflecting the challenges in maintaining empathetic client relationships. The presence of reduced personal accomplishment among more than 40% of social workers raises questions about self-efficacy and job satisfaction.

These findings underscore the need for targeted interventions and preventive measures to address EBS within the social work profession. The high prevalence of EBS is not only detrimental to individual practitioners but also has the potential to impact the quality of social services provided to vulnerable populations.

The relationship between demographic factors and burnout dimensions offers valuable insights into potential risk factors for EBS. Younger social workers and those in healthcare settings reported higher emotional exhaustion, suggesting that early career social workers and those in demanding practice environments may be particularly vulnerable to this dimension of burnout. Conversely, older social workers and those with more experience demonstrated increased personal accomplishment, indicating a potential protective effect with years of practice. These findings highlight the importance of tailoring interventions to address the unique needs of social workers at different career stages and in various practice settings. Interventions aimed at reducing emotional exhaustion and enhancing personal accomplishment should consider age and experience as relevant factors.

**Qualitative Insights** 

Qualitative insights from interviews provide depth to the quantitative findings, revealing the lived experiences of social workers facing EBS. Participants' narratives capture the emotional toll of the profession, emphasizing the need for emotional support and self-care strategies. Inadequate organizational support emerged as a consistent stressor, corroborating quantitative data linking practice setting to burnout dimensions. The qualitative findings emphasize the pivotal role of organizational changes in mitigating EBS. Social workers advocated for increased resources, manageable caseloads, and opportunities for debriefing as essential components of a supportive work environment. These insights underscore the responsibility of social work organizations to prioritize the well-being of their



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workforce and address systemic challenges that contribute to burnout.

The positive correlation between emotional exhaustion and occupational risks highlights the tangible consequences of EBS on social workers' ability to fulfill their professional duties. Burnout-related exhaustion can lead to lapses in judgment, potentially compromising ethical practice and decision-making. Furthermore, the strain of EBS on physical and mental health underscores its classification as a significant occupational risk.

In conclusion, this research contributes to a deeper understanding of the result of EBS in social workers and its implications for occupational risks. The prevalence of EBS, its relationship with demographic factors, and the qualitative insights collectively emphasize the urgent need for interventions and systemic changes within the social work profession.

Addressing EBS is not only a matter of practitioner well-being but also a fundamental requirement for maintaining the integrity of social services. Effective interventions should consider the diverse needs of social workers at different career stages and prioritize organizational support to reduce burnout and enhance the quality of care provided to vulnerable populations.

#### Conclusion

This research has illuminated the pressing issue of emotional burnout syndrome (EBS) among social workers and its far-reaching implications for occupational risks. The synthesis of quantitative and qualitative findings underscores the urgency of addressing EBS to safeguard the well-being of social workers and maintain the integrity of social services.

The prevalence and severity of EBS within the social work profession are striking. More than half of the respondents reported significant emotional

exhaustion, while nearly half experienced depersonalization. Reduced personal accomplishment was also prevalent among social workers. These findings emphasize the pervasive nature of EBS and its potential impact on the quality of care provided to vulnerable populations.

Demographic factors play a nuanced role in burnout dimensions. Younger social workers and those in demanding healthcare settings are particularly vulnerable to emotional exhaustion. In contrast, older and more experienced social workers exhibit higher personal accomplishments, suggesting a potential protective effect of experience. Tailored interventions that consider age and career stage are imperative to address burnout effectively.

Qualitative insights provide a deeper understanding of the emotional toll experienced by social workers facing EBS. Their narratives highlight the need for emotional support and self-care strategies to cope with the demands of the profession. Inadequate organizational support emerges as a consistent stressor, reinforcing the importance of systemic changes within social work organizations.

The positive correlation between emotional exhaustion and occupational risks underscores the tangible consequences of EBS. Burnout-related exhaustion can compromise ethical practice and decision-making, posing risks to clients and practitioners alike. Furthermore, the strain of EBS on physical and mental health solidifies its classification as a significant occupational risk.

In conclusion, addressing EBS is not merely a matter of practitioner well-being; it is a fundamental requirement for upholding the values and ethics of the social work profession. Effective interventions must encompass a multifaceted approach, considering the diverse needs of social workers at various career stages. Prioritizing organizational changes that reduce burnout and enhance support



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systems is crucial to ensure the provision of high-quality care to vulnerable populations.

This research contributes to the ongoing discourse on burnout in social work and calls for action within the profession. We hope that the findings presented here will catalyze change, prompting social work organizations to prioritize the wellbeing of their workforce and enact meaningful reforms that alleviate the burden of EBS. Ultimately, such efforts will not only benefit social workers but also the countless individuals and communities they tirelessly serve.

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