## **Episode 207: Burnout with Debbie Sorensen**

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Yael Schonbrun: That was Dr. Jill Stoddard and me, Dr. Debbie Sorensen on psychologists off the clock.

Diana Hill: We are four clinical psychologists here to bring you cutting edge and science-based ideas from [00:01:00] psychology to help you flourish in your relationships, work and health.

**Debbie Sorensen:** I'm Dr. Debbie Sorensn, practicing in mile high Denver, Colorado, and coauthor of ACT Daily Journal

Diana Hill: I'm Dr. Diana Hill coauthor with Debbie on ACT Daily Journal, and practicing in seaside Santa Barbara, California.

Yael Schonbrun: From coast to coast, I'm Dr. Yael Schonbrun, a Boston- based clinical psychologist and assistant professor at Brown University.

Jill Stoddard: And from sunny San Diego, I'm Dr. Jill Stoddard author of Be Mighty and The Big Book of ACT Metaphors.

Debbie Sorensen: We hope you take what you learn here to build a rich and meaningful life.

Diana Hill: Thank you for listening to Psychologists Off the Clock!

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And we love Praxis so much, especially because. Our very own Debbie Sorensen is going to be doing [00:02:00] a workshop through Praxis. Tell us about it, Debbie.

**Debbie Sorensen:** Yes. I'm doing a webinar on acceptance commitment therapy for burnout. This is for therapists who are working with clients who are burnt out. And of course, as

therapists, we are also occasionally may experience our own burnout. So hopefully it will be helpful for that too.

It starts August 25th and it's on Wednesday afternoons just for a few Wednesdays in a row. So you can check it out on the Praxis website and learn more. I hope you can join me if you're a therapist, be great to have you there. And for all of the live online courses that Praxis offers, you can go to our website OFFTHECLOCKPSYCH.COM and get a discount code.

Jill Stoddard: Hey everybody. It's Jill here. And I am so excited about this episode as I'm sure, you know, I absolutely love being a co-host of psychologists off the clock because I get to interview some of my professional heroes, these like [00:03:00] famous well-known people who have written books. Such a delight, but one of the things that I love the most is when I get to actually talk with my co-hosts about the things that they are passionate about.

So today I am interviewing Debbie Sorenson and we're going to talk about burnout today, which is a topic that is near and dear to her heart. Hi, Debbie.

Debbie Sorensen: Hi, Jill. Thank you for doing this with me. I'm excited to talk to you about burnout.

Jill Stoddard: I am so excited to talk to you about it too. And just to pick your brain. I think it's so fun when we get to learn a little bit from each other.

**Debbie Sorensen:** Me too. I've learned a lot from you about imposter syndrome and other things from all of my co-hosts. So this is great.

Jill Stoddard: Yay. Okay. So, um, I was thinking a lot about our interview and how it feels to me. Like we're hearing a lot more about burnout these days. Like it's almost like the new quote unquote self care, like it's kind of become a buzz word. So I [00:04:00] thought maybe the best place to start would be with what you mean when you talk about burnout, like how you would define it and what are maybe some of the telltale signs, um, for somebody to determine whether they're experiencing.

Debbie Sorensen: Yeah. Great question. So I think that I'll actually just start with the definition that is the world health organization sort of official. Definition of burnout and the world health organization describes it as an occupational phenomenon. And there's a little controversy about that. So whole bookmark that we'll talk about that in a second, but there are basically three main, uh, I guess.

Signs of burnout. So one is just feeling exhausted depleted, and I'm here to tell you, I am hearing that, like you said, it's it's hot right now because people are exhausted. And I hear I'm hearing that from my clients. I'm seeing articles, [00:05:00] people I talk to I'm feeling it sometimes myself. Nothing left to give.

So that's one, the second one is feeling kind of cynical or detached. Maybe it's a role, like a work role, a professional role, or some other, you know, caregiving or parenting or something like that that you care about. But all of a sudden you're just kind of feeling detached. Like you don't care as much, maybe a little cynical, like what's the point of all this, that kind of thing.

And then the third sign of burnout. Just feeling less effective at what you're doing. So, you know, for instance, just feeling like, oh, I used to think I was pretty good therapist or, um, parent or nurse or physician or whatever the role is and be like, I'm not so sure if I'm so good at this anymore.

Jill Stoddard: Hmm.

**Debbie Sorensen:** So those are the three things that I think to look for.

And in terms of the definition, I think the controversy is a little bit [00:06:00] that, that very narrow description of it being in a professional role of an occupational phenomenon that, you know, there are other roles that are pretty demanding and consuming, like parenting and caregiving and, you know, Social justice work and that kind of thing that can also, I think, lead to burnout.

And so people are starting to look at it more broadly. There's a lot of literature right now about parental burnout. Um, and you know, to me, it's like, it's a little, the difference is the distinction. There is a little bit artificial because I mean, come on, we're both parents of parents isn't work. I don't know what is, um, it's not a paid job per se, but it's a role that's, you know, it's demanding.

Jill Stoddard: Yeah, it seems like that language is important though. And you don't want people who aren't in a traditionally paid job to feel like they're excluded from being able to say like, Hey, I think I'm really suffering from burnout. So I think that's a really important distinction.

[00:07:00] Debbie Sorensen: Yeah.

Jill Stoddard: Yeah.

So do you think, like you were saying, you know, in your practice, you're hearing it so much more people saying they're exhausted.

They have nothing, nothing left to give. It seems to me like this was maybe something on the rise before the pandemic, but then the pandemic just really kind of promoted people, crashing and burning a little bit. Has that been your experience?

Debbie Sorensen: Definitely. Yes. I mean, I think this was happening. There was already a lot of literature about it. Certain fields like healthcare. I mean, this has been a big problem for a long time. With healthcare professionals and that type of thing. And there's been research for decades about burnout and you see it showing up and there's, there's a lot of different levels of that.

People are looking at it. And I think what I really want, like about the conversation happening now, first of all, is it just. Points to how much pressure people are under. And I think the stressors of the last year and a half have really contributed to that. People are in a lot of demanding roles. And I think the conversation maybe it's [00:08:00] getting overused, I don't know that's possible.

It is kind of a, like you said, a trendy buzzword, but I also think that, um, the conversation is an important one because one of the things I'm seeing more and more. Just wanting to look at what's going on here. What are the factors that are contributing to this? And maybe we need to do something about some of those bigger factors and not just put it on the individual person.

And I like hearing that.

Jill Stoddard: Yeah. I think that's so important. And doesn't that happen all the time with so many of the issues we hear about whether it's racism or sexism that, you know, so much burden is put on individuals to fix the problem. And the systemic forces that are really contributing to these issues are largely ignored.

And it sounds like you're saying. There's more recognition that we need systemic change. If we're really going to tackle burnout, you can't just expect, you know, an individual to go practice the quote unquote self-care, which, you know, we could have a whole episode about how that's missed on [00:09:00] misunderstood.

And actually we have, we've had a couple of guests on to talk about self care, um, and you know, you're not going to solve burnout by taking a couple bubble baths and having a nice cup of tea. Right.

**Debbie Sorensen:** Yeah. I mean, I think that's, there's more and more recognition of that. And I think that's really important

Jill Stoddard: Um, okay. Well, certainly we're going to talk a lot about like, what can we do but before we shift out of the definition, are there terms that get confused with burnout?

So the, the one that comes to mind for me is compassion, fatigue. Like what is the difference between compassion fatigue, and burnout is all compassion fatigue, burnout, but not all burnout is compassion fatigue. Are there other terms that?

it would be helpful for listeners to know and understand.

**Debbie Sorensen:** Yeah. That's a great question. I actually, I think there are a few things, compassion fatigue, stress, depression. There's a lot of difference. Constructs that have some overlap, but actually are pretty different. And I think [00:10:00] burnout is really just dissatisfaction in that one role.

And it's often happens when there's too much demand without enough support. And so I think that it's a, it's a it's own specific thing. Whereas compassion, fatigue, it's more just the emotional impact of having empathy.

Jill Stoddard: Mm.

**Debbie Sorensen:** Of extending empathy to people who are suffering and it can, it just kind of look a little bit different too.

I think there is some overlap, but it might be a little bit more like irritability, insomnia, just not wanting to go to work, feeling distracted, that kind of thing. So they're, they're not completely different. And I'm sure there's a lot of times when maybe it's like, Hard to differentiate between the two.

I think it doesn't really matter so much when you're looking at the individual person, but certainly people who are in roles where they have, you know, they're for instance, working with people where a lot of empathy in a way that involves a lot of empathy, um, you know, [00:11:00] might be at higher risk for burnout.

Jill Stoddard: So it sounds like you could have both at the same time, but that maybe burnout is like a little further down the line in terms of, um, how extreme maybe the symptoms are being experienced.

Debbie Sorensen: It could be, I don't know. Yeah. I mean, I think it could vary a little bit too, cause I think sometimes people feel burnout for a while, but it's not so bad and it sort of comes and goes kind of thing. So it, you know, and to some degree, like I said, I think. Maybe it doesn't matter so much, which one? It technically falls under.

It's more like here's a person who's struggling or suffering in some way. How can we help them?

Jill Stoddard: Right.

Debbie Sorensen: Yeah.

Jill Stoddard: Well, knowing myself and you and our other co-hosts and the other of our professional colleagues, um, I'm guessing that you might have a personal story related to how you got interested in burnout and would love to, to hear how you got interested in them.

Debbie Sorensen: Well, you guessed right [00:12:00] Jill. That is correct. So I did, I went through a pretty bad period of burnout and I was intellectually interested in it before I worked in a healthcare setting that shall remain nameless. It's a big one for a number of years. And I think anyone who works in healthcare. Probably has burnout come and go from time to time and as aware that it's a thing.

And so, you know, I had milder versions of it along the way, and I, I thought it was sort of interesting, but I actually hit a pretty serious burnout patch a few years back and didn't even really realize quite how bad it was until there was a day. I was in a colleague's office, down the hall. Shoot. This is someone who had known me for a very long time and she was talking to me about something and I was just kind of checked out and I just said to her, and I didn't even like, think about what I was saying.

I just said to her, like, I don't even care anymore. And I just said it in this [00:13:00] kind of like sad voice. And she's like, are you okay? And I was like, yeah, I'm just like, I mean, I just was so. Stuff that would normally excite me. Like I love my job. I am so happy that I'm a psychologist because it's so meaningful to me, but I was just like, I, I really felt that way.

Like I don't care anymore. And I went, left your office. And what about my day? And I thought about it later and I was like, what is going on here? I have totally lost my spark. And I realized I had been burned out for months to the point. And there were a number of factors contributing to that. I think I had too much going on.

roles that were demanding. I think there was some things happening at work that I was just kind of adjusting to that I wasn't really thrilled about and just a combination of a lot of factors. Um, and so, yeah, I think that at that point, once I had this aha moment that this was going on, was I [00:14:00] able to.

See it for what it was and kind of start to move out of it and, you know, got better over time. I made some changes and that kind of thing, but then I found that, um, I also just really, he started working more and more with clients who are experiencing something similar. I think each person who has burnout has a different situation going on and that's showing up in different ways in their lives.

But I just love working with clients who are. In that place, because I think we're talking about people who have really meaningful, important things that they're doing in their lives and they're just struggling. And to me, it's just really important that we help people be able to do the things that really matter to them.

Jill Stoddard: Yeah. And you could really relate. And that's such an interesting story because it's surprising for me to hear. Cause I can't imagine you saying I just don't care anymore

Debbie Sorensen: Right. You know me, that's not, that's not me, right.

Jill Stoddard: Right. And like that must have been quite an aha moment where you say, whoa, something is not right. [00:15:00] here. Um, and, and I can certainly relate to that too.

Um, You know, when, and I think I've probably learned the most about burnout from you, from blogs that you've written and things like that. And, um, you know, really recognize those three factors that you were talking about at the top of the episode, um, in myself. And it was leading up to the pandemic where I was just starting to feel uninspired.

It was starting to feel dread. About work and had that same moment of like, what's going on because this is so not me. I love being a psychologist. I love my work. Um, and really needing to introspect. And honestly, the, the pandemic sort of offered me, um, an interesting solution because. You know, then my children who are, they were six and eight at the time and needed to be homeschooled.

And I couldn't carry a full clinical load and also be homeschooled. My [00:16:00] kids. So it really forced me to look at what is it about all the many different roles that I hold that I suspect is maybe contributing to this and like, where can I tweak things? Um, And it, it really ended up helping. I mean, I think the pandemic certainly contributed to burnout in so far as we were stretched so thin with all the different things we had to like, worry about juggling, uh, you know, without childcare and things.

But also it kind of forced me to pivot, um, at a time that I think I really needed to, like before it started negatively affecting my clinical work.

Debbie Sorensen: Yeah.

Jill Stoddard: And so I'm curious, um, I bet when people feel this way. Like I know at first for me I felt lost. Like, what do I do? So if, if we're talking professionally, like in a row or, or as a parent or as a caregiver, you know, people have to pay their bills.

People have to take care of their children. People have to take care of their sick mother, whatever it is. It's [00:17:00] not like you can just say, forget it. I can't. And I'm just going to go move to Bora Bora and, you know, live a life that's Footloose and fancy free. Right. We like, we have real responsibilities.

And so I imagine when people, even when they become, you know, the first step is becoming aware, you're even experiencing burnout, but then once you're clear, that's what's going on. I imagine a lot of people feel stuck. Like if this role is the thing that I believe is causing me to experience burnout, what am I supposed to do?

Because I have no choice, but to remain in this role.

Debbie Sorensen: Yeah, well, and I want to start by saying that, um, sometimes change. Right. Like changing jobs or changing something about the role, but not always. And so I would not jump to that too quickly. Right. Like, I mean, right at the moment we're, we're in summer of 2021, and there's been all this talk about how people are leaving places like healthcare, [00:18:00] because they're stressed and they're burnt out and they're sick of it.

And for some people that might. That might help them have a better life. But I think for a lot of people, that's either, it's not an option like you said, or they don't want to, you know, I did not want to, I went through a period of burnout, but I did not want to stop being a psychologist. And thank goodness I didn't, it wasn't at that point anyway.

But I think that, you know, burnout sometimes comes and goes and there are things that you can do about it. And my hope for people, if they really care about their work like I do about being a psychologist, is that you can find ways to. Work with burnout. You know, you can, you can be accepting of your difficult emotions.

You can change some things, maybe some habits or some, something about the situation. You can address some of the bigger systemic stuff that might be contributing, but that it doesn't necessarily mean you have to make a major life change. In fact, I hope someone doesn't, if they really, you know, like you don't want to just be like, I'm burnt out on parenting.

[00:19:00] Ditching my kids.

Jill Stoddard: some out, right?

Debbie Sorensen: we all probably have imagined that from time to time, but you don't want to do that. Why? Well, because you love your kids and being parenting as meaningful. Um, as

caregivers, you might really can be really hard to be a caregiver, especially if you're a full-time caregiver, if it's a serious situation going on.

Um, but you usually are doing it because you care about the person.

Jill Stoddard: So I think what I'm hearing you say is that there may be some. External problem solving strategies that could be helpful. So maybe with the caregiving example, can I share this burden even if just temporarily, you know, that would be an external problem solving where I'm not giving up this role entirely because it matters to me to be there for my ailing mother or whatever it is. But maybe more importantly or equally importantly is that there are internal strategies [00:20:00] and you started to say some things that sounded like act words, right. About acceptance. And so maybe am I getting that right? Like, is that what you're like, there may be some extra, you know, so for me, when I had this issue, I just like you, I did not want to not be a psychologist.

I love my career. But I shifted the things I was doing. So I was spending more time on things like podcasting and writing that like really light me up and inspire me and make me feel excited and reduced some of my clinical work because I was having a lot of that, like compassion, fatigue side of things. And while we were going through the same stuff in the pandemic, I didn't feel like I had. The same internal resources to hold other people's pain that I normally do. So that felt like an external change. That was important to me. That probably won't last forever, right? Like I'll probably continue to do more clinical work over time.

And then in some cases, people don't have that option, you know, financially, whatever, whatever the case may be and, [00:21:00] um, or may not want to, like you said. And so then the alternative is looking inward and there are skills that we can use to manage some of the, the exhaustion. What were the three, the exhaustion feeling like you're not as competent.

And what was the third one?

Debbie Sorensen: And like detachment

Jill Stoddard: Oh, Yeah, And cynical feeling cynical and detached and just like not into it basically anymore. yeah, Okay. So can you talk a little bit about like what some of the most helpful ways to address those internal factors?

Debbie Sorensen: Yes completely. And this will sound familiar to people who listen to the podcast because these are, these are based, I think mostly in acceptance and commitment therapy and compassion focused therapy. So. I think going easy on you, yourself for having the emotions that you're having. I think sometimes burnout can actually stem from this place of really struggling with your internal experience.

You know, not liking the day-to-day unpleasantness [00:22:00] of your job, perhaps that can kind of lock us in. I think sometimes to that place of joy. You know, feeling burned out, but not only that burnout itself is something we can start to struggle with or start to feel like I got to get rid of this. When in fact often most of us feel burned out from time to time.

It will come and go just like most emotions.

Jill Stoddard: So, hold on. I want to stop you here for a second. Cause I think something you just said is super important because the way I've been thinking about this and we've been talking about is, Hey, I'm burnt out. What do I do about it? But what you actually just said for, you know, any of our listeners right now, who don't happen to be experiencing burnout is you can use compassion, focus, skills, and act skills to prevent getting burned out in the first place.

Debbie Sorensen: I think so there's this. Yeah, so there's this quote I love and it's by the poet, David Whyte, my Meg McKelvie, who was on the podcast a couple months ago, shared this quote with me. It's by David Whyte and it says the antidote to exhaustion isn't [00:23:00] rest it's wholeheartedness, right?

Because I do think that usually when we're engaged in something that's meaningful to us, there's also some pain associated with it, right there. Kind of flip sides of the same coin. If we care about something, we invest in it and all kinds of emotions are going to show up.

And I think that sometimes we. against that. And we kind of detach a little bit from our emotions and then over time, do you see what I mean? That pattern.

Jill Stoddard: I do.

Debbie Sorensen: of goes both ways.

Jill Stoddard: Yeah.

that's so interesting. And, and when I hear whole heartedness versus rest, what comes to mind for me? I think, well, what, what does wholeheartedness entail? And the first thing that popped in my head was being present mindfulness, you know, and values like that. If you're really in touch and a whole hearted way with like why this work is meaningful to you and you really show up to it in a present focused way.

You know, I mean, that's just to me, someone else might certainly define [00:24:00] wholeheartedness difference, but that, that differently. But that's how I think of it from an act perspective. And the other thing it made me think of is, you know, I often tell people that I have bad news, which is. I've been practicing act for over 20 years in my own life.

And I've even talked about this on the podcast before, and I'm more anxious than I've ever been. And nobody likes to hear that like, oh, act must not work very well if that's the case, but of course it's not because it's what you're saying about, you know, pain and what matters to you being two sides of the same coin is that what act is allowed me to do is be like really brave and wholehearted and put myself out there and take risks.

Right? Really lean into the stuff that truly matters to me. And that means because it matters to me. I have a lot of anxiety about it. And so if you're doing a lot of that on the one hand, you know, I also feel more alive, but I could also see how that could be potentially related to a path toward burnout if [00:25:00] you're experienced it or not.

If you're experiencing a lot of that pain, but if you are working against.

**Debbie Sorensen:** Working against it. Yes. And there's two things I want to just elaborate on there. One is that when we're working against it, we can get into some really unhelpful cycles. So, you know, we might start. Drinking too much after work every day, because we're just so stressed out. We might start, you know, overworking.

I think this happens a lot with burnout actually, is that as a way to try to deal with the stress and the, you know, the burnout related pain is that people start like overworking. I do this. I feel like,

Jill Stoddard: get everything checked off my to-do list, then I won't feel burnt out, but now I'm just overdoing it even more.

**Debbie Sorensen:** Right. And then you're overworking and then you're more exhausted. So we have to, I think sometimes take a really good look at our habits and those things that we're doing to try to control or avoid the difficulty, the challenges.

And then the other piece is w [00:26:00] I just want to emphasize what you said about sort of reconnecting with values as one of the things that we can do, because I do think pretty much anyone I can think of who has experienced burnout, it's in an area that they care about. Why they care about it, what they care about might vary, but you know, people get burned out because they're doing things that are hard and important.

And I think that to be able to reconnect with the meaningful aspects when you've lost it, you know, when you've become detached and cynical and feeling ineffective, but like that might involve a change, you know, a job change. Like you, you kind of shook things up. Your work, but even if you don't change anything, it can just be like, how can I get back in touch with that, that caring, that meaningful aspect of my work.

Yeah. Cause I think that gets a little bit lost when people are burned out.

## Jill Stoddard: Yeah.

You know, the other thing I just thought of going back to your quote and maybe it's another type of avoidance [00:27:00] is being checked. Right. So like, I just had a thought, this is maybe specific to healthcare workers or therapists where, you know, it would be really easy as a therapist to sit in your chair and nod your head and make the right facial expression and make it seem like you're completely engaged when really you're just kind of phoning it in, but nobody would really know.

And I could see how that could seem like. It's rest, you know, like I just need a little bit of a break from like being totally in this person's pain or struggle or whatever it is, but it's not wholehearted.

Debbie Sorensen: Yeah.

Jill Stoddard: And I think it would, it would make the work so non meaningful that I could see that like doing that.

And you know, what we talk about an act a lot is the short-term benefit of avoidance strategies, but long-term cost. And so in the moment that could feel like rest, but in the longterm, it becomes so disconnected from the values that it's likely to contribute to burnout rather than actually [00:28:00] being beneficial.

Debbie Sorensen: Totally. And I mean, you don't want to be too hard on yourself. We all have days. You know, I have days when I probably am not my best as a therapist, you know,

Jill Stoddard: No. Of course.

**Debbie Sorensen:** if you do that every day, You could imagine why six months later you're like, well, this job is not very fulfilling anymore because I've been calling it in for six months.

So, yeah. And I think engaging wholeheartedly in your work work sometimes takes effort, but then it does. Yeah. It pays off. Actually, you know, I mentioned compassion focused therapy, and I think compassion to me is key with burnout as well. Just in terms of those internal things we can do related to burnout because.

Often people who come to me with burnout, actually, sometimes they don't even like the word compassion because it's a little too, you know, the word itself kind of evokes like a little touchy feely Venus or something, or like, well, I don't, I don't have time to be compassionate. I dunno. It's,

Jill Stoddard: Yeah. Collect [00:29:00] clients sometimes misunderstand it too. Yeah. Yeah.

Debbie Sorensen: But quite simply it's like, you know, being kind to yourself. When you're suffering. And I think that that pressure piece around burnout is so important because it's coming from. Our culture around us, you know, that we're supposed to be so good at our jobs and working all the time and we're supposed to be the perfect parent and it, it CA and we had kind of internalized that to where we never feel like we're good enough.

And there's actually some research about how parents who have very high standards for themselves are more prone to burnout. I'm sure that's the case in a lot of other roles as well. And I think sometimes. The health care professionals I work with. It's like, there's this narrative about how they're superheros and they're kind of taught that belief like that.

They're supposed to be so good at their job and just go see the next patient and the next one and never make a mistake. And these kinds of things to the point where [00:30:00] there's no compassion left for themselves, it's like, I've got to be good at everything all the time.

Jill Stoddard: And I imagine for many helping professionals, whether it's medical or mental health or other, there's also this belief. Like I should be better than this. Like, especially for mental health providers, like I should know better, you know, I know about act and self-compassion on all these things, so I'm not allowed to experience burnout.

And then the more you put that on yourself, the more. Risk you become.

Debbie Sorensen: Yeah. Yeah. And I mean, I will say it happens in other professions too, you know, lawyers who with really demanding jobs, all kinds of, I mean, I don't even, I couldn't

even list them all because they're teachers, I mean, so many professions in which people are under demand. I think. Happened to have worked in healthcare settings.

So I that's one that comes to mind easily, but you could think of there's just so much pressure and how can we be kind to ourselves? How can we even be kind to ourselves for feeling the emotions we're feeling when it gets hard without beating ourselves up for [00:31:00] that?

Jill Stoddard: so we're talking about. Awareness of whether you're experiencing symptoms of burnout, if yes, like, is there a problem solving external thing that?

can, or should need to be changed, but either way yes or no, reconnecting with values? What is it that really brings you? Meaning around this role, whether it's a traditional work role or a parenting role, caregiving role, et cetera.

Um, and then learning how to make space for some of this discomfort as an alternative to pushing it away and avoiding it because ultimately that ends up contributing to burn out rather than. Fixing it. So one of the, my biggest pet peeves is if I'm like watching the today show or something, and all they talk about is, you know, how bad stress is for you and you can't be stressed or it's going to kill you. And then people are stressed about stress. So they're stressed.

And then often the main kind of antidote that you hear [00:32:00] about is relaxation exercises.

## Debbie Sorensen: Okay.

Jill Stoddard: And, or, you know, the quote unquote self-care, which for people who are experiencing burnout, this is just like adding one more thing to an already overwhelming to do list. And it seems like it's maybe. Less helpful than what what contemporary research tells us we should be doing. And so I'm curious, do you think that there are things that people are hearing they should do when they're feeling burnout that are less helpful than some of the things we've been talking about?

Debbie Sorensen: Oh completely. Let me just tell you, I hear people complain about this sometimes. In my practice, because there's like this huge problem with burnout. It's like in the water, in the place that they work, everybody's burned out, everybody's struggling. It's just like not a good work environment. And then the, um, you know, the, the organization wants to.

Employees happy and productive and not want [00:33:00] them to all quit their jobs. So they'll bring in these initiatives and they're not bad. I mean, it's good stuff, right? Like, let's do some mindfulness. Let's do some yoga, let's do this. And that, those are fine things. I'm not against them. I think. I liked those things myself.

But the problem is that, first of all, it's a little bit of a band-aid kind of thing. It doesn't really address the real issue. It's not enough, but it also, it's almost a little bit insulting. It kind of

puts the, the sense of like, oh, well, we're going to, you get half an hour to go get a massage and now you should be fine.

And it just doesn't feel good. It's like a little bit invalidating, I think, but it's also, yeah. And it also has that message of like, there's something wrong with you. You need to go fix it. And that's, that message is part of the issue. Right? That's that contributes in my opinion.

Jill Stoddard: Well, if you think about relationships, you know, one of the main issues that can come up between two people in a relationship is if you're not both [00:34:00] taking responsibility for whatever the problems are that you're having. And this is kind of like, Relationship where the administrators and I don't mean like each individual person, but you know, the sort of systemic, if one person in the relationship is the system and the other is, you know, the employee it's, it's the system not taking any responsibility for the role they're playing.

So instead of like giving me a 15 minute meditation during my already. Lunch break. How about if you give more vacation time or you make people work fewer hours, or you figure out culturally what's going on, if you, you know, if there's issues around racism, sexism, discrimination, and that's contributing to burnout in your work culture, you know, focus on the things that are causing the burnout, like you said, not just putting a bandaid on it.

**Debbie Sorensen:** Yeah, because, and like you said, it it's like, oh, well then I failed at that too. Right. I'm not doing that enough self care. Well, people are overworked. They don't really have time to be [00:35:00] doing yoga 90 minutes a day. Well, and also. Social support. I want to just make sure that we address this as well, because social support is huge.

Right? So first of all, feeling appreciated, actually, I think one of the original burnout researchers, Christine Maslach. There was this thing I read about how. Sometimes workplace factors are a little bit like tiny pebbles in your shoe that they're kind of there and they're kind of annoying.

But if you add enough of those little pebbles, it can really start to really bother you and feel pretty terrible. And feeling unappreciated at work can be one of those when you're sort of treated like another cog in the wheel, you don't get enough resources, but there's more and more and more increasing demand on you over time when you don't have colleagues that you can.

Trust and open up to and who feels supportive to you? So all of these social factors really matter. And I think sometimes that's overlooked a little [00:36:00] bit as a way of helping with burnout. It's just to have a, more of an environment where people feel like they have more support.

Jill Stoddard: Yeah. Yeah. And, and other factors too, you know, I know that that there's some research that shows satisfaction at work depends on feeling valued. Like you said, feeling competent and having autonomy.

Debbie Sorensen: Yeah.

Jill Stoddard: Right. So like, if you're an environment where you're being totally micromanaged, you know that I am mad. I know it leads to dissatisfaction.

I'm not sure what the relationship with burnout would be. Um,

**Debbie Sorensen:** Right. Having little control, little ability to make decisions. Completely being, um, almost like the demands keep getting added more and more and more, but there's, you can't keep up and there's nothing that you can do to change anything that just feels terrible after a

## Jill Stoddard: Yeah.

Or like when you feel smaller, you feel like profit is more important than you as a human, you know, I'm thinking about a place I worked. Um, were [00:37:00] they the powers that be at the top, we're adding more and more and more students, I think probably to get more tuition money, but not adding.

Faculty. So it was like dissertation loads were going through the roof and you know, everybody in that situation was getting burnt out and the culture just felt like it was. It was about bringing in money and that the staff, the faculty were just like cogs in a wheel who were supposed to figure out how to make it work.

I think that that has since changed and improved a bit, not enough, but a bit. Um, but that, that was a situation where there was a lot of burnout happening that that relates to, I think some of these factors you're talking about.

**Debbie Sorensen:** Yeah, there's a concept called institutional betrayal, which I originally heard about in the context of sexual harassment and sexual abuse on campuses and organizations where. People felt like their institution betrayed them with this problem they were [00:38:00] having.

And I think that there can be a sense of institutional betrayal, a slightly different sense of it when people feel like they invest so much time and energy and years of their lives, decades of their lives sometimes into a work role. But then they kind of feel like their institution doesn't care about them, which is funny because it's not a person, but there's almost this message coming from.

Leadership or from up above that, it's like, well, we have to make money and we're not gonna, we don't care too much about your wellbeing. And I think that's really, that just doesn't feel good to people.

Jill Stoddard: right. Even if the work you're doing is meaningful. Yeah.

Yeah. So what about, you know, other we've alluded to it a little bit, but Can you talk a little bit about how cultural factors may play a role if people are in situations where they're experiencing sexism, racism does this and how this might contribute to burnout.

Debbie Sorensen: Well, absolutely. Yeah. And I'm glad you raised that because I think it's really important to acknowledge [00:39:00] that. I don't think there's any like, you know,

category of person that's totally immune from having burnout sometimes. But I think when you compound multiple stress factors on a person, it just adds up.

And, and you know, if you, the minority stress model is that there's just all this stress related to racism, racial trauma, sexism. I mean, in the pandemic we heard about how really women took a major hit in the workplace because. The kids coming home from school took more demand on women than men.

And so a lot of women had to step back a bit from work like you were describing Jill. And I think, I mean, that's just one example. And we had a podcast episode a couple of months back on racial trauma with Carynne Williams and Dr. Jennifer Shepherd-Payne, who both talked about. Clinicians of color they're black women.

They're, you know, they they're doing multiple [00:40:00] roles and that when they were also grappling with, um, you know, in the aftermath of the murder of George Floyd and the racial justice protests that were going on, they were just exhausted because I think on top of the pandemic and the workload and the parenting roles and all that, they're also carrying just the emotional impact of racial trauma.

So those are just a few examples and there are.

Jill Stoddard: And on top of that, you know, w you're going with that specific example, they were also being asked to then be the, uh, you know, the, the racism experts in their departments. And, um, you know, I know that there was like a lot of this additive. Burden around like expectations that people of color would, um, you know, explain what's needed and help create program, you know, maybe coming from a well-intentioned place, but not recognizing the added burden that that's, that that's putting on people

**Debbie Sorensen:** Totally.

Jill Stoddard: that expectation.

[00:41:00] **Debbie Sorensen:** Yeah. And can you now, you know, that's exactly right. And for women it's like, well, can you now also homeschool your kids and, you know, talk to young women about work-life balance. And it's like, oh, and organize a potluck and all these things that just sort of default and, um, maybe are wonderful things to be doing, but you just think about kind of the added, added

Jill Stoddard: the added load.

Yeah,

Debbie Sorensen: added load. Yes. The

Jill Stoddard: those are not, and those are not things that contribute to advancement in the workplace. So it's doing more and being slower to get ahead because.

Debbie Sorensen: Yeah.

Jill Stoddard: Yeah, yeah.

So, you know, we talked about what people can do to prevent their own personal burnout or to manage burnout if they're having it, what individuals can do. And we alluded a little. In the beginning to how this is actually in some ways problematic, you can't be the only thing.

Right? It's one of the things we want to have those skills, but so much of this is coming from this [00:42:00] higher up systemic level? So is there anything that we can do to try to fight burnout at that, that top systemic level?

**Debbie Sorensen:** Yes. And no, first of all, I just want to acknowledge that it's a hard problem. It's a, we're talking here about really a cultural change that I think takes a long time. And sometimes as individuals, it feels a little bit like too much to take responsibility for that. And I

Jill Stoddard: Especially if you're already burnt out,

Debbie Sorensen: Yes, right. It's like, oh, now go solve all

Jill Stoddard: the, system on top of it. Yeah.

Debbie Sorensen: yeah, but I do think, you know, I said earlier that just having conversations that acknowledge that more, I think are important. I think recognizing when we get sucked into some of these patterns, like for instance of workaholic behavior or that kind of thing, I do think that we can speak out if you're in a leadership role or a management role, looking at these kinds of.

Systemic issues can be really good. I think the more people acknowledge it [00:43:00] and speak out about it. It just changes the tone. So I have hope that change is gradually happening, but at the same time, it feels big.

Jill Stoddard: big. Yeah.

**Debbie Sorensen:** if I might give a very quick example, I think within health care, I keep going back to that because that's so much of my experiences with health care.

Um, With the pandemic. One of the things we know can contribute to burnout for healthcare, professionals is moral injury and being in a position where you have to make really hard decisions. Maybe you feel like you can't practice at the top of your license because of systemic. Pressures and that kind of thing.

So with the pandemic and COVID cases, they started doing things like making group decisions about patient care and that kind of thing, so that the burden doesn't fall on one person. So if there's going to be a decision about who gets a hospital bed, who gets a ventilator, there's not one person in charge of making that decision.

It's a team effort, those kinds of [00:44:00] things, just making it more of a culture. Um, openness to addressing this to me, that's big and, and things, of course, like, you know, I've worked with lawyers before in firms where people don't get time off. I mean, on paper, they get time off, but they literally can't take time off.

And I think those kinds of things, they need to come from a high level down and that needs to change.

Jill Stoddard: Well, they do, they do for sure. And one thing I'm thinking is, you know, if that's not going to just naturally happen in or in an organization that having boundaries and talk. About boundaries so that you can try to get your colleagues to also have boundaries. So I'll give you an example where I had a colleague a long time ago, who was the kindest, most generous person and would say Yes.

to anything.

And we had a conversation at one point where I said, you know, the more that you say Yes. and take on a bigger and bigger and bigger load, [00:45:00] the less the administrator, the, the administration has any motivation. To hire more faculty because why spend the money and hire faculty when you'll just do double the work.

And if the rest of us all do that, then we're really kind of contributing to being stuck in this system. But if we together make a decision that our contract says, we will have say this many dissertation students, like let's kind of make a pact that we all stick to that. And then if there are 30 students who can't find an advisor, then they, administrators are going to have to do something about it.

**Debbie Sorensen:** Yes. So I have an example of that, where it was during a turnover period at, at my former job where I was doing more than I could possibly keep up with, but I was like, Not letting them see me, sweat, you know what I mean?

Like I was doing it, but I wasn't complaining. And I was, it was too much and it was piling up on me. It really was unsustainable. But, uh, my, my boss who was a wonderful person, but he was like, well, it [00:46:00] seems like you're fine. Like maybe we don't need to hire. And I, I had to say, no, I am not fine. I'm making it look okay because.

Able to kind of hold it together barely. But I think that you're right. If we do that and we get into that pattern in the longterm, it affects us. It affects other people. And so setting boundaries as hard as it can be sometimes.

Jill Stoddard: Right.

And being aware of the emotional stuff that comes up around it. Oh, I feel guilty. I don't want people to think I'm not a team player. Like nobody wants to be the person that says that's not my job, but if you're aware that systemically things are contributing to people being burnt out, then it's an effective thing to get together and say, what is our role and what is not our role?

And is there a way that we can band together to. Help change the system.

Debbie Sorensen: Yeah.

Jill Stoddard: Yeah.

so Debbie, this was such a great conversation. I learned so much from you today, and I know that our listeners are going to learn a lot too, but if people want [00:47:00] to learn more about how they can identify or manage burnout, where can they go?

Or if they also just want to find you, where can they go?

Debbie Sorensen: Well go to my webpage, Dr. Debbie sorenson.com. I have some blog posts on burnout and some other blog posts and that kind of thing that you can find there. If you happen to be a therapist who is working. With burnout. Like I said earlier, I love working with burnout in my practice because I find it really fulfilling an interesting work it's complex.

Um, I'm doing a training for therapists with Praxis. It starts in August. Um, it's four weeks in a row for two hours a week and there's eight hours of continuing education credit. We're going to just delve deeper into. What is burnout and how as clinicians, you know, when a client comes into your office and they're experiencing burnout, how can we best help them?

And since it is complex, it's not really a one size fits all model. So we're going to do some examples and just really look at all these different levels of [00:48:00] burnout and how we can address them effectively with clients. So if you're a clinician who's listening, I hope you'll join me.

Jill Stoddard: Well, and I imagine all clinicians are working with burnout, whether they realize it or not, you know, I have an anxiety slash stress clinic, and a lot of times people just come in saying they're super stressed out and you know, you talk to them. 45 minutes and realize like, this sounds like burnout, even if they're not calling it burnout.

So I imagine this is, and that'll be really helpful for any clinician.

Debbie Sorensen: And let me tell you my dirty little secret here, which is that for continuing education credit, it has to be more about, um, client care. Therapists get burned out. And I know it and we all know it. And we Al a lot of us got burned out during the pandemic.

And so my secret hope is that it will also help therapists with their own burnout, because that's a real thing too. And, you know, therapists, we have an important job here, and I want us to be able to keep doing it to our full capacity.

Jill Stoddard: Yeah. I mean more and more people are needing mental health care and if we all burn out, [00:49:00] That's not going to be, that's not going to be a good situation.

Debbie Sorensen: needs us.

Jill Stoddard: yeah. Yeah. And I think you're right.

So I think that that's great that this can help therapists do so. How can people sign up if they want to take the course?

**Debbie Sorensen:** Just go to Praxis, the website for Praxis. And actually if you go to the psychologist off the clock website, off the clock, psych.com and you go to our offers page,

you can find a discount code, which will give you a discount on life training events, including this one.

Jill Stoddard: Nice. All right. Well, thanks Debbie. This was so fun.

Debbie Sorensen: Yeah, it was fun. Thank you.

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