Addressing Burnout and Moral Injury
in Difficult Times and Spaces

LA Health Services Workforce Well-Being Team

Introductions

- Chief Well-Being Officer Charmaine Dorsey, MSW, LCSW

- Well-Being Psychologist Kelli McSwan, Ph.D.

- Well-Being Psychologist F.D. Tristan Webster, Psy.D.

- Administrative Assistant Roberta Venegas

Burnout- The Beginning

- The concept of **burnout** was first formally defined by **Herbert Freudenberger**, an American psychologist, in the **1970s**

- **Herbert Freudenberger's Definition (1974):**

- Freudenberger used the term *"burnout"* to describe the state of **physical and mental exhaustion** he observed in **healthcare workers** and others in **helping professions**

- He defined it as:

- **"A state of mental and physical exhaustion caused by one's professional life."**

- His early work focused on the **emotional toll** of working in high-stress, emotionally demanding environments

  - Freudenberger, H. J. (1974). *Staff burn-out. Journal of Social Issues, 30*(1), 159–165
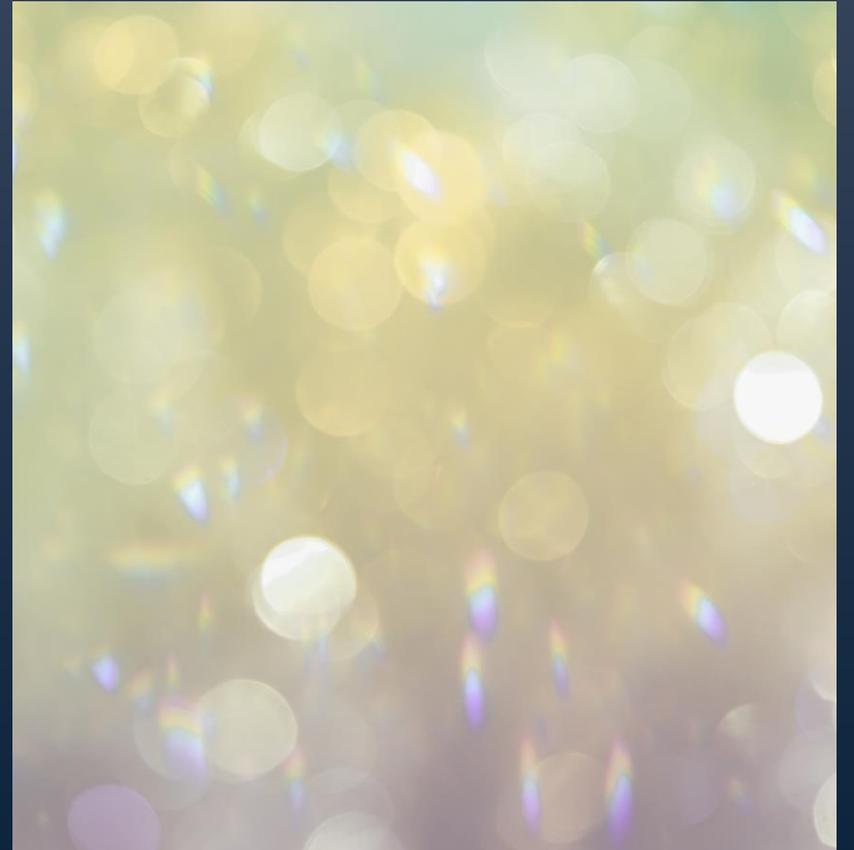
Evolution of Burnout- 1970s

- How we define and think about burnout has changed over the years:

- In the 1970s, burnout was primarily seen as a problem with "helping professions" such as in doctors, nurses, social workers, volunteers, etc.
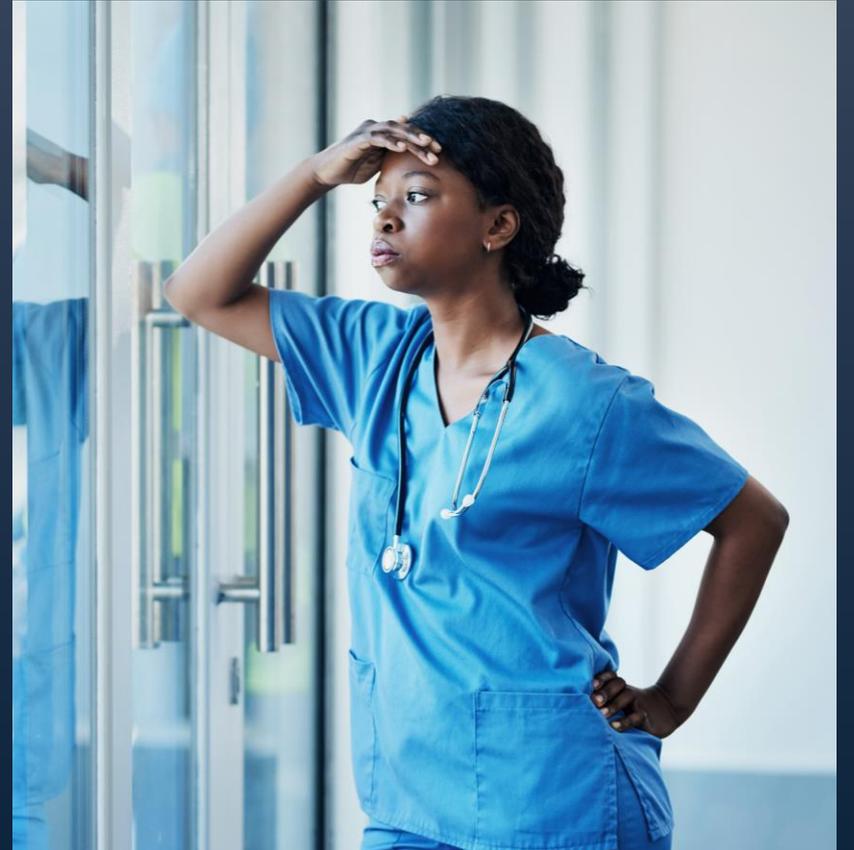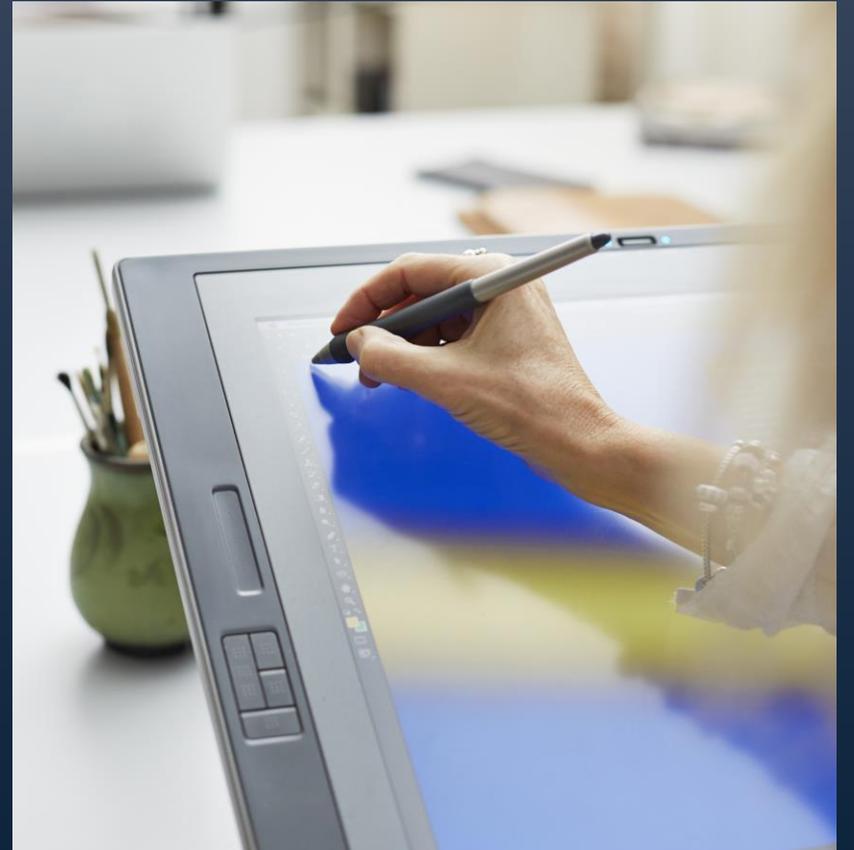
Evolution of Burnout- 1980s

- In the 1980s, **Christina Maslach**, a social psychologist, developed the **Maslach Burnout Inventory (MBI)**, which became the gold standard for measuring burnout

- She conceptualized burnout as a **three-dimensional syndrome**:

- **Emotional exhaustion**

- **Depersonalization** (cynicism or detachment)

- **Reduced personal accomplishment**

- This model shifted the focus from just emotional fatigue to include **attitudes toward work and self-worth**

    - Lee, R. T., & Ashforth, B. E. (1990). *A meta-analytic examination of the correlates of the three dimensions of job burnout. Journal of Applied Psychology, 75*(2), 208–218.

Evolution of Burnout- 1990s

- **In the 1990s – Recognized Across Industries**

- Burnout began to be recognized beyond healthcare and education — in **corporate, tech, legal, and creative industries**

- Research highlighted how **organizational culture**, **management style**, and **work-life imbalance** contribute to burnout

- The idea that **burnout is not just about overwork**, but also about **lack of control, purpose, and support**, began to gain ground

  - Schaufeli, W. B., Leiter, M. P., & Maslach, C. (2009). Burnout: 35 years of research and practice. *Career Development International, 14*(3), 204–220

Evolution of Burnout- 2000s

- **2000s – Mental Health and Workplace Well-being**

- Burnout became linked to broader **mental health issues**, such as depression, anxiety, and substance use

- It was increasingly seen as a **systemic issue**, not just an individual's inability to cope

- Employers and HR professionals began integrating **stress management**, **employee assistance programs**, and **wellness initiatives** into workplaces

- Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). *Job burnout. Annual Review of Psychology, 52*, 397–422.

Evolution of Burnout- 2010s

- **2010s – Digital Age and Burnout Culture**

- The rise of **"hustle culture"**, remote work, and 24/7 connectivity increased awareness of burnout.

- Terms like "**compassion fatigue**", "**Zoom fatigue**", and "**technostress**" emerged.

- Millennials and Gen Z workers especially vocalized burnout from **lack of meaning, poor boundaries**, and **toxic productivity**.

  - Byrne, M. (2025). Digital compassion fatigue as an emerging phenomenon for registered nurses experiencing technostress. *Applied Clinical Informatics, 16*(3), 708–717

  - Richter, A. W., & Dietz, C. (2025). Effects of intensity of teleworking and creative demands on the cynicism dimension of job burnout. *Employee Responsibilities and Rights Journal, 37*, 201–223

World Health organization got onboard- 2019

- **2019 – WHO Recognition in ICD-11**

- The **World Health Organization** officially recognized **burnout as an occupational phenomenon**, not a medical or mental condition.

- This legitimized the concept in global health discourse and emphasized it as a **workplace-related syndrome (without application to other areas of life).**

- World Health Organization. (2019). *Burn-out an "occupational phenomenon": International Classification of Diseases*

Evolution of Burnout-2020s

- **2020s – Post-Pandemic Shift**

- The **COVID-19 pandemic** caused massive surges in burnout across healthcare, education, and remote-working professionals.

- More discussions on **collective burnout**, **parental burnout**, and **pandemic fatigue**.

- Increasing focus on **systemic solutions**, including:
  - 4-day work weeks
  - Mental health days
  - Boundary-setting at work
  - Psychological safety in organizations
    - Joshi, A. V. (2022). *Resilience and wellbeing strategies for pandemic fatigue in times of COVID-19.* **International Journal of Applied Positive Psychology, 8**, 1–36
    - Uppal, A., Pullen, N., Baysson, H., et al. (2025). *COVID-19 pandemic-related changes in teleworking, emotional exhaustion, and occupational burnout: A cross-sectional analysis of a cohort study.* **BMC Public Health, 25**, Article 282
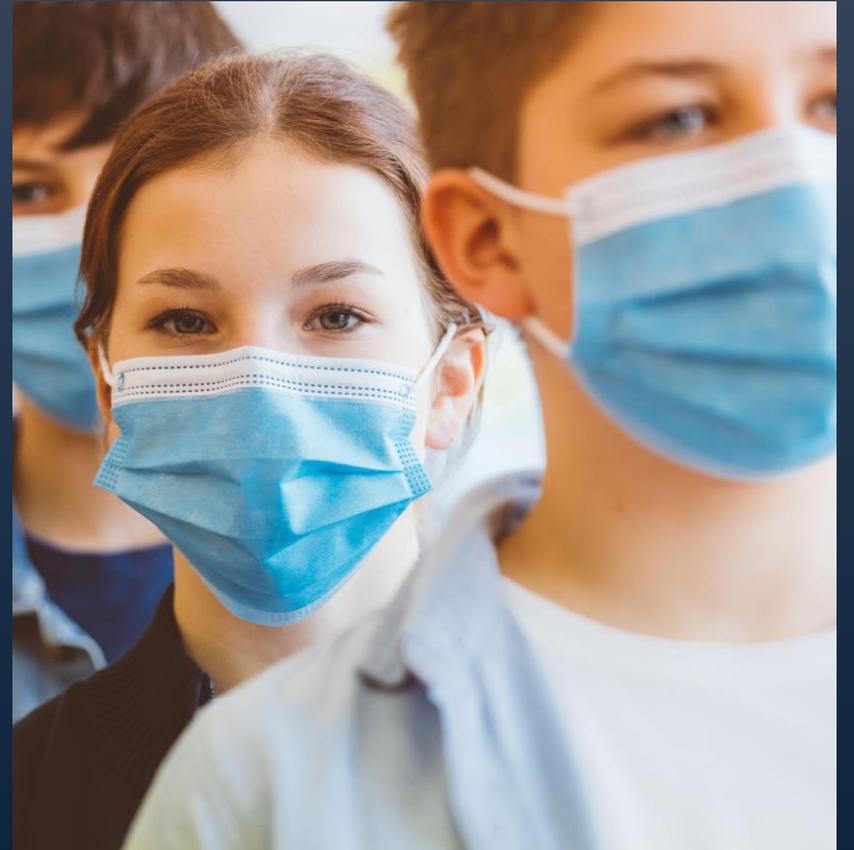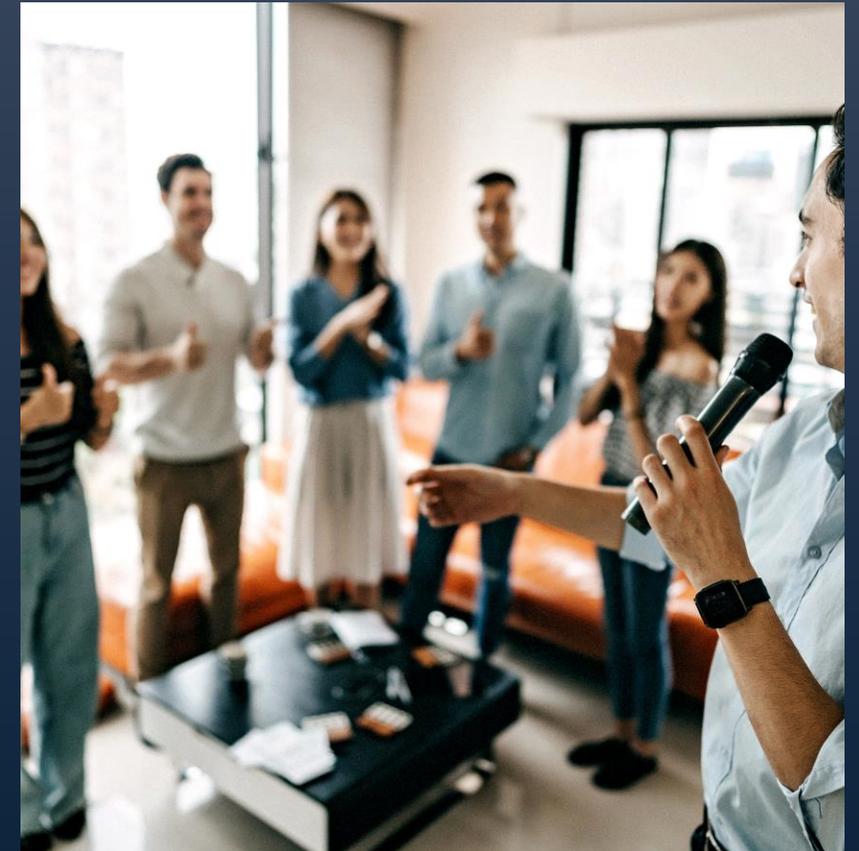
What is Burnout?

- Drawing on concepts from both Freudenberger and Maslach, organizations such as the American Psychological Association, the Mayo Clinic, and others, burnout is now often defined as:
  - **A state of physical, emotional, and mental exhaustion caused by prolonged or chronic stress, typically related to work or caregiving roles. It often occurs when you feel overwhelmed, emotionally drained, and unable to meet constant demands.**

- **The APA includes three core dimension:**
  - **Exhaustion** – depletion of emotional and physical energy
  - **Cynicism/Negative Attitudes** – a sense of detachment or negativity toward one's job
  - **Inefficacy** – reduced professional efficacy or feelings of being ineffective
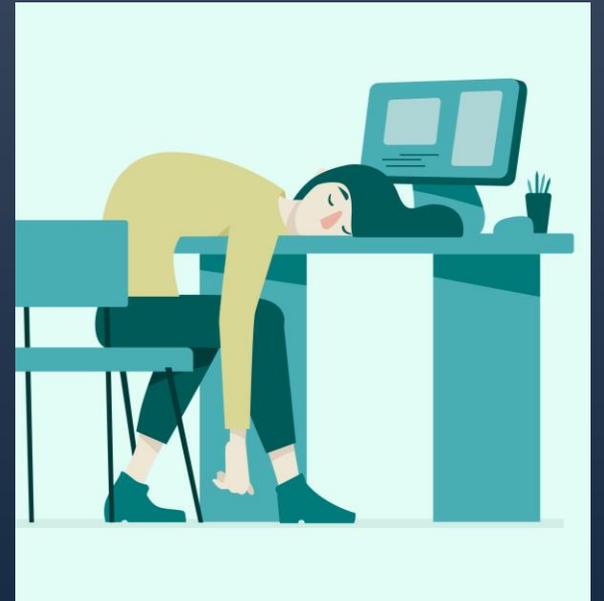
What contributes to Burnout?

- Research has shown that these are the factors that are either protective or significant contributors to burnout:
  - Control over your work
  - Voice in decisions
  - Meaningful work
  - Decompression/separation from work
  - Clear job expectations
  - Support
- Recent research on global burnout emphasizes workload as an important contributor to burnout.
  - **Meyer, A., & Parker, S. (2020).** *Understanding the relationship between situational strength and burnout: A multi-sample analysis.* **International Journal of Environmental Research and Public Health, 18**(1), 162
  - **Rimmer, A., et al. (2021).** *Risk and protective factors of well-being among healthcare staff: A thematic analysis.* **International Journal of Environmental Research and Public Health, 17**(18), 6651
  - **Sonnentag, S., & Fritz, C. (2014).** *Recovery from job stress: The stressor-detachment model as an integrative framework.* **Journal of Organizational Behavior, 35**, 39–69

What is Burnout?

- What does it look like?

- **Burnout** can look different for everyone, but it generally manifests through a combination of **emotional, physical, mental, and behavioral signs**. It often builds gradually and can go unnoticed until it seriously impacts your well-being, performance, or relationships.
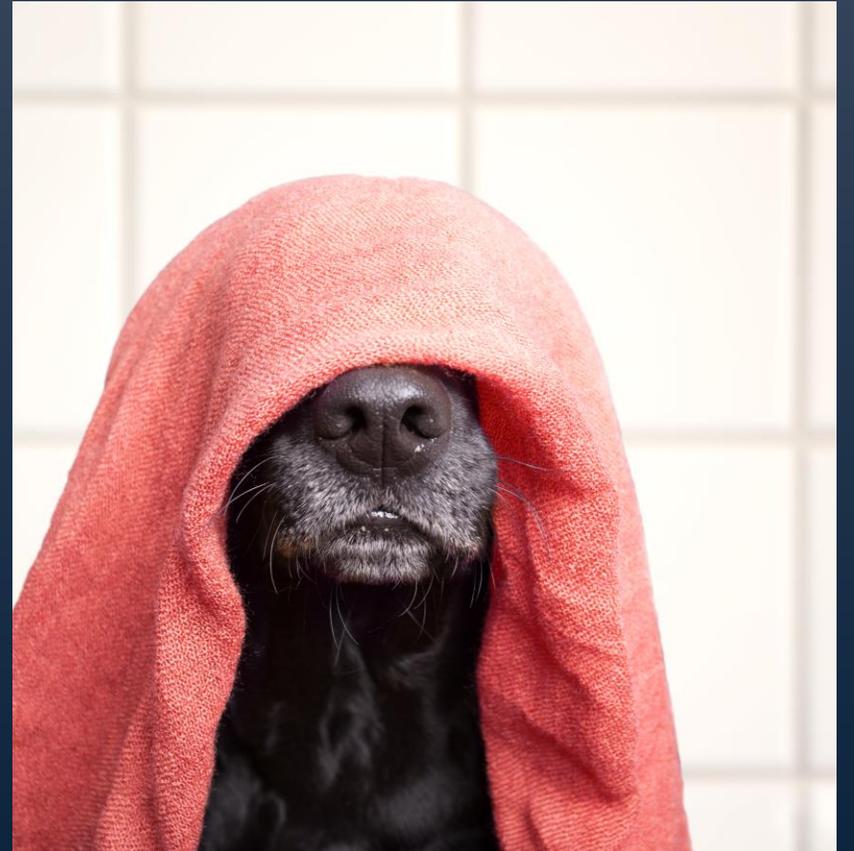
Burnout- Emotional Signs

- Constant **irritability**, **frustration**, or **anger**

- Feeling **emotionally drained**, numb, or detached- "The blahs"

- Loss of **motivation** or **interest** in work or activities

- **Cynicism** or negative attitudes toward your job, colleagues, or life in general-"it doesn't matter anyway"

- Feeling like you're **failing** or not making a difference
  - Maslach, C., & Leiter, M. P. (2016). Understanding the burnout experience: Recent research and its implications for psychiatry. *World Psychiatry, 15*(2), 103–111
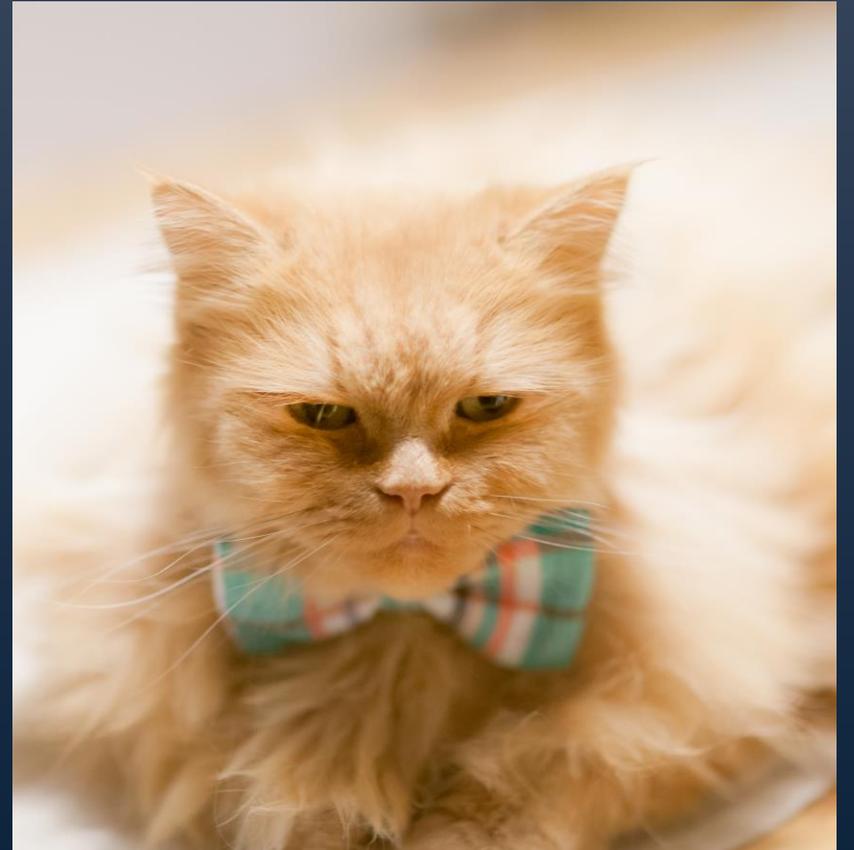
Burnout-Mental/cognitive signs

- **Difficulty concentrating** or making decisions

- Feeling mentally "foggy" or forgetful

- Persistent **self-doubt** or feeling incompetent

- Lack of creativity or inspiration

- Widespread cognitive dysfunction across multiple cognitive domains

- Koutsimani, P., & Montgomery, A. (2022). *Cognitive functioning in non-clinical burnout: Using cognitive tasks to disentangle the relationship in a three-wave longitudinal study.* **Frontiers in Psychiatry, 13**

Burnout- Physical Signs

- **Chronic fatigue**—feeling tired even after rest

- Frequent **headaches**, muscle aches, or stomach issues

- **Changes in sleep** (insomnia, oversleeping)

- **Appetite changes** (eating more or less than usual)

- **Lowered immunity**—getting sick more often

Burnout- Behavioral Signs

- **Withdrawing** from responsibilities or social life
- **Procrastination** or avoidance (e.g., missing deadlines, skipping meetings)
- Using **alcohol, drugs, or food** to cope
- Reduced performance or **productivity**
- Neglecting self-care (e.g., skipping exercise, poor hygiene, no downtime)
  - Turek, D. (2021). *When does job burnout not hurt employee behaviours? JOEPP – Journal of Occupational & Environmental Psychology, Practices & Policies*, (2021)

Burnout-Let's Check!

- **Burnout Self-Assessment Checklist**

- **Instructions:**
  Read each statement and check the box if it applies to you "often" or "almost always." Tally your results at the end.

- 🔋 **Emotional & Mental Exhaustion**

- I feel emotionally drained at the end of the day.

- I often wake up tired, even after a full night's sleep.

- I feel overwhelmed by responsibilities, even small ones.

- I have trouble focusing or remembering things.

- I feel mentally "foggy" or scattered.

- 💬 **Cynicism & Detachment**

- I've become more negative or cynical about my work or role.

- I feel detached from people I normally care about.

- I try to avoid tasks or responsibilities I once enjoyed.

- I feel like I'm just "going through the motions."

- I feel emotionally numb or indifferent.
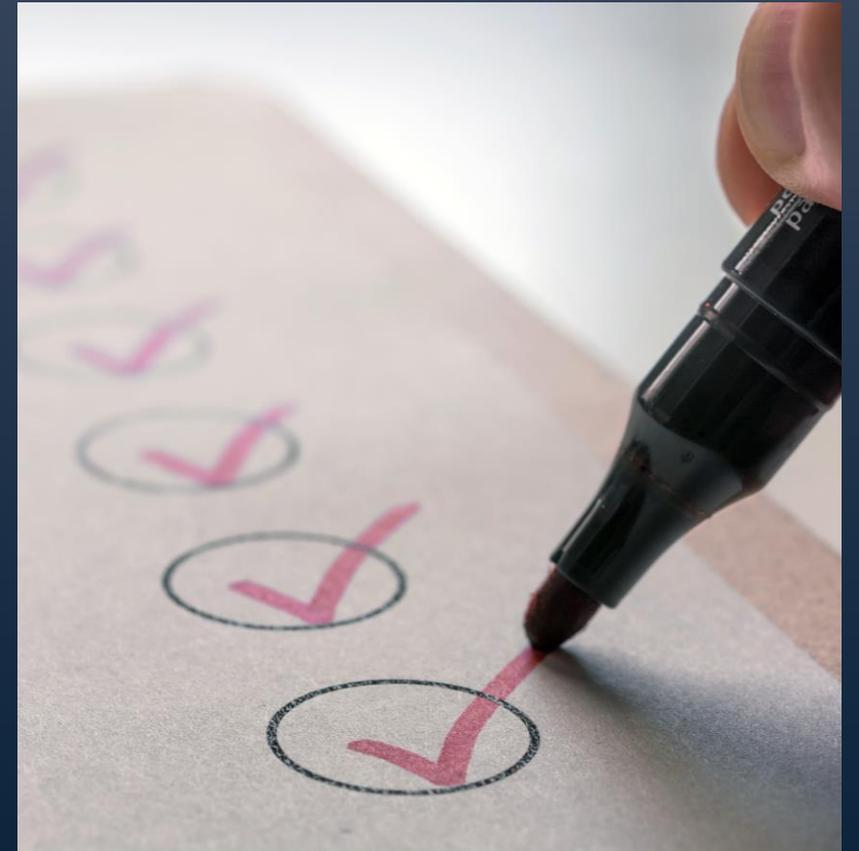
Burnout-Let's Check and Add it Up!

- 📉 **Reduced Effectiveness & Motivation**
- I feel like I'm not accomplishing anything meaningful.
- I question whether my work or effort even matters.
- I've lost motivation or drive to do things I once valued.
- I'm making more mistakes or missing deadlines.
- I feel stuck or unable to move forward.
-
- 🧠 **Stress-Related Behaviors**
- I procrastinate more than usual.
- I rely on food, caffeine, alcohol, or other substances to get through the day.
- I've withdrawn from social interaction or relationships.
- I avoid self-care routines or feel too tired for them.
- I get irritated or angry easily—over small things.
-
- 🔚 **Your Results:**
- **0–9 checks** – 🟢 *You're likely managing stress well,* but keep monitoring yourself.
- **10–19 checks** – 🟡 *Possible early signs of burnout.* It's time to make some changes.
- **20+ checks** – 🔴 *High risk or signs of burnout.* Strongly consider taking action (e.g., rest, boundaries, support, or professional help).
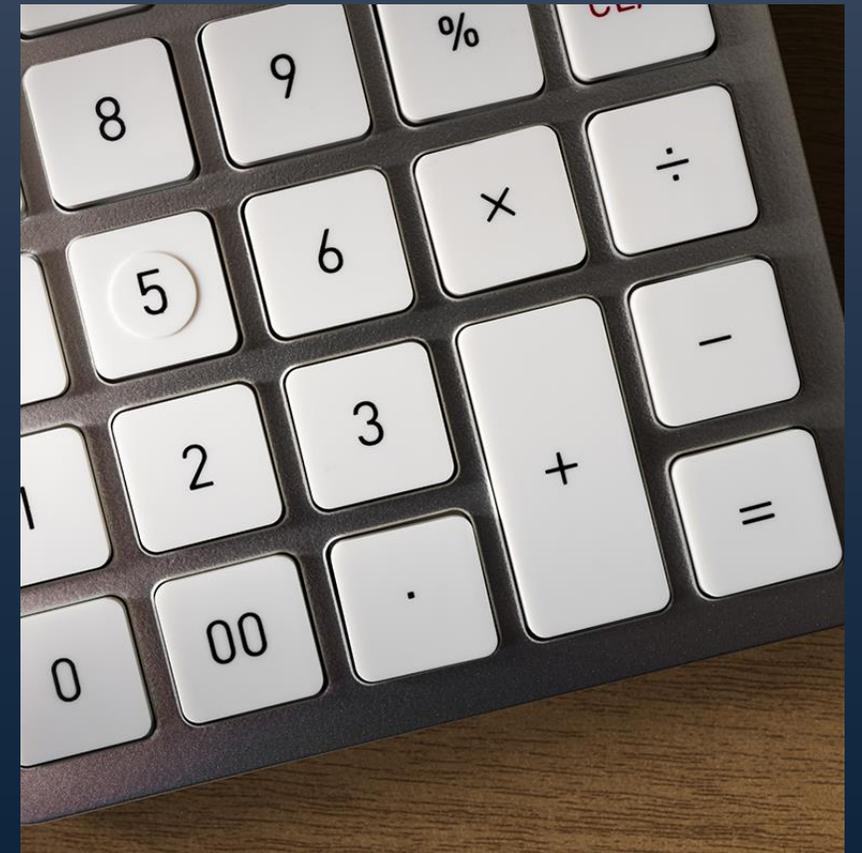
What is Moral Injury?

What can I do? Where can I hide from all this and not be found? What wings would take me high enough? How deep a hole would I have to dig? My shame for the evil I have done consumes me... I am soaked in blood-guilt, polluted, contagious... I am a pollutant, an offense to gods above. (Euripides, 416 BCE)
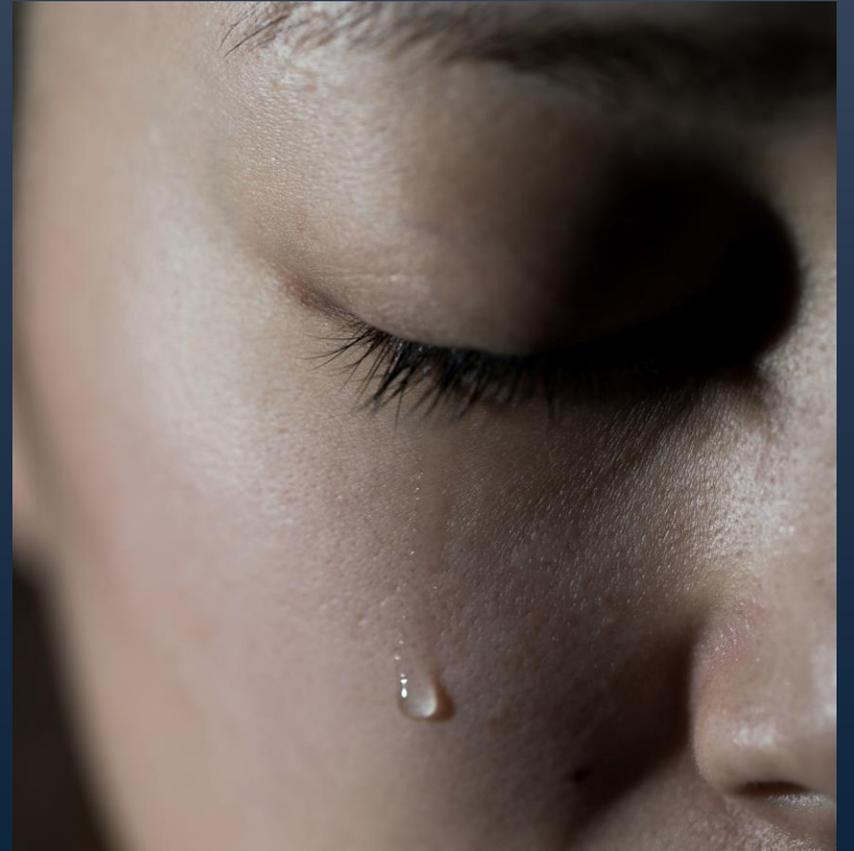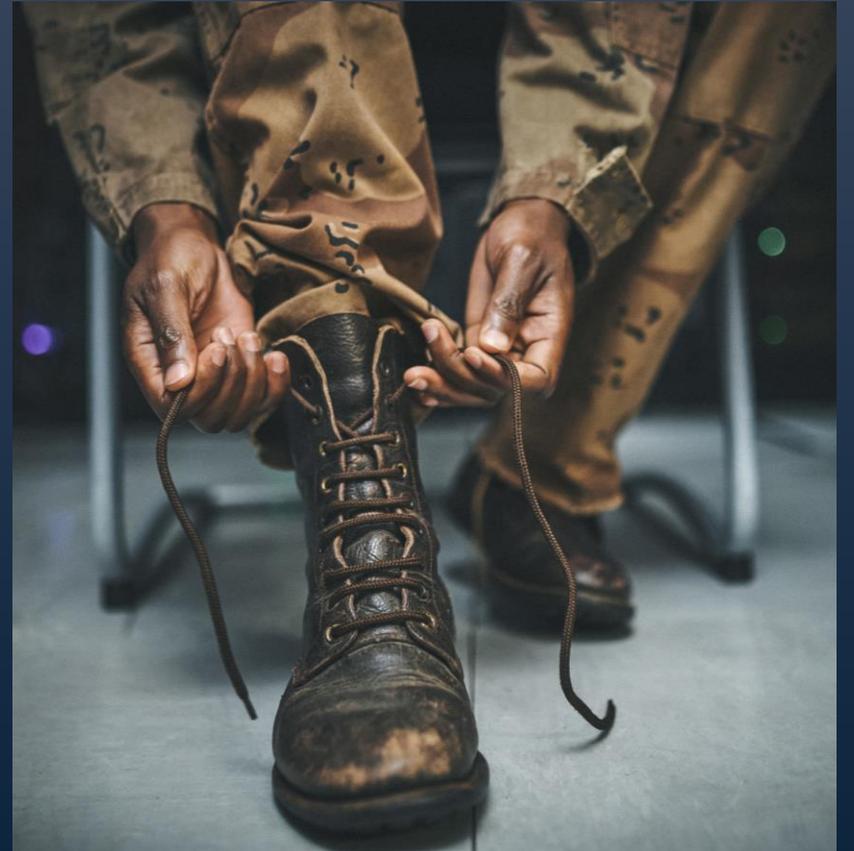
What is Moral Injury?

Moral Injury is a relatively recent concept in the early phases of research. The term was coined by Jonathan Shay based on work with veterans and has since been understood to reach far beyond the military – Teachers, journalists, nurses, and physicians are among other professions studied.

"Moral injury is present when there has been (a) a betrayal of 'what's right'; (b) either by a person in legitimate authority (my definition), or by one's self— 'I did it' (Litz, Maguen, Nash, et al.); (c) in a high stakes situation"
        – Jonathan Shay

Source: Shay, J. (2014). Moral injury. *Psychoanalytic Psychology, 31*(2), 182-191. https://doi.org/10.1037/a0036090

What is Moral Injury?

Preliminary research by Ludmila Praslova Ph.D. indicates approx. 25% of "burnout" may actually be moral injury. What helps with burnout may not be so helpful with moral injury.

"It is a trauma response to witnessing or participating in workplace behaviors that contradict one's moral beliefs in high-stakes situations with the potential of physical, psychological, social, or economic harm to others." – Ludmila Praslova, Ph.D.

Koenig, H. G., & Al Zaben, F. (2021). Moral injury: An increasingly recognized and widespread syndrome. *Journal of Religion and Health*, *60*(5), 2989–3011. https://doi.org/10.1007/s10943-021-01328-0
Praslova, L. (2022, April 11). *How to identify and address moral injury at work*. Psychology Today. https://www.psychologytoday.com/us/blog/positively-different/202204/how-identify-and-address-moral-injury-work
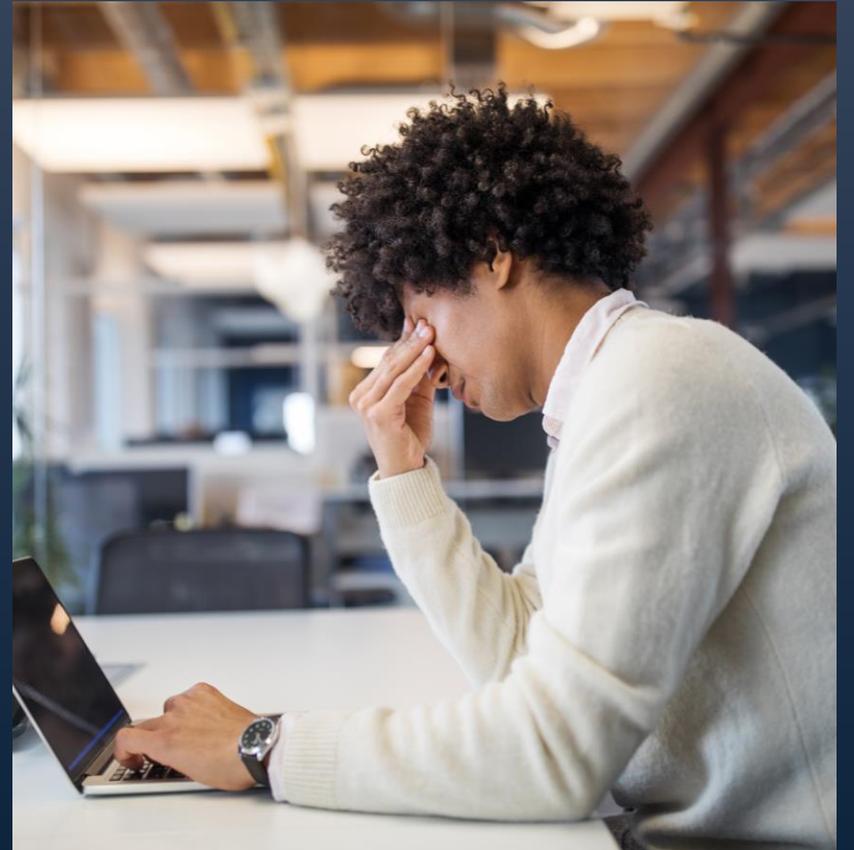
What is Moral Distress?

Fundamentally similar; consider as a spectrum

Differentiated by
1) Not (as) high-stakes
2) less intense

Gangemi, S., & Dysart, C. (2024). Moral Injury in correctional health care. *Journal of Correctional Health Care*, *30*(6), 426–435. https://doi.org/10.1089/jchc.24.04.0036
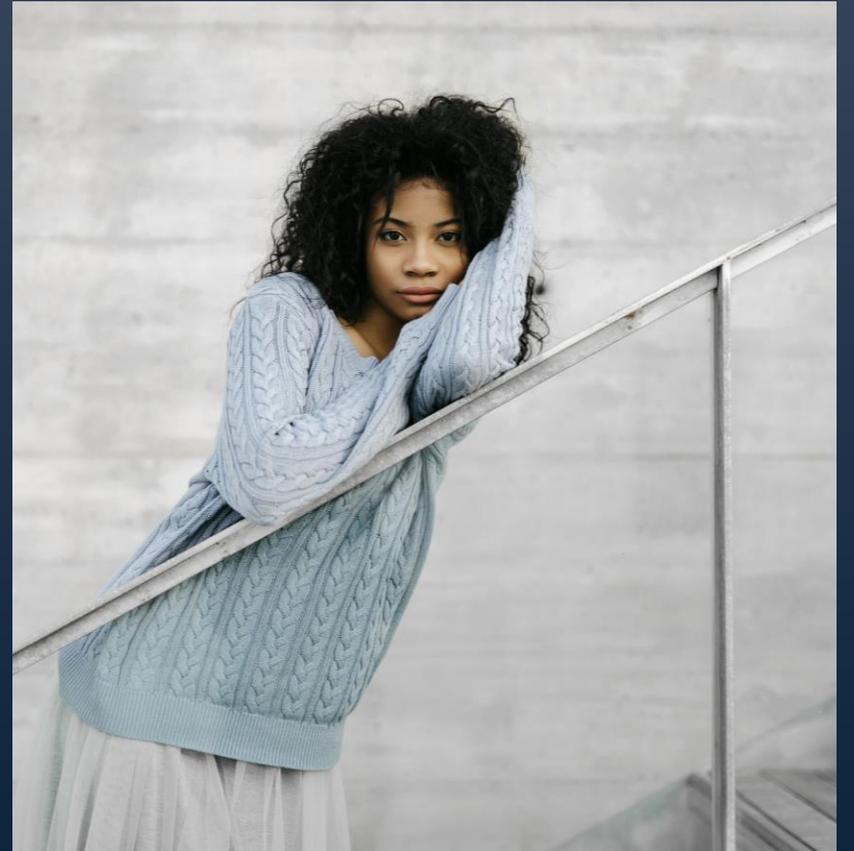
How Does Moral Injury Happen?

- Occurs due to:
  - A sense of transgression, that they or someone else crossed a line in terms of the person's moral beliefs.

- It may be a:
  - Moral transgression by another individual or individuals
  - Moral transgression by the person themselves
  - Betrayal by an associated entity

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Praslova, L. (2022, April 11). *How to identify and address moral injury at work*. Psychology Today. https://www.psychologytoday.com/us/blog/positively-different/202204/how-identify-and-address-moral-injury-work

Shay, J. (2014). Moral injury. *Psychoanalytic Psychology, 31*(2), 182–191. https://doi.org/10.1037/a0036090

How Does Moral Injury Happen?

- Mewborn, E. K., Fingerhood, M. L., Johanson, L., & Hughes, V. (2023). Examining moral injury in clinical practice: A narrative literature review. *Nursing ethics*, *30*(7-8), 960–974. https://doi.org/10.1177/09697330231164762

What Does Moral Injury Look Like?

- Persistent shame, guilt, or anger (sense of having done wrong or failed in one's moral duty)
- Self-punishment or self-sabotage, including high risk/reckless behaviors e.g. substance abuse
- Social withdrawal
- Loss of meaning or purpose – sense that work, relationships, or life are irredeemably tainted
- Spiritual crisis
- Suicidal thoughts or behaviors

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Examples for Healthcare Workers

- Inability to intervene due to DNR, POA, etc.
- Triage or other time/resource limitations
- Learning about coworker or institutional error
- Policy/culturally/regulatory-based restrictions to practice
- COVID

Cultural Pretext for Both Burnout and Moral Injury

- What is culture?

- What does culture teach us about duty, purpose, and value?

What Does Culture Mean for Burnout?

- American culture of "work hard and accomplish anything" can facilitate burnout due to:
  - Hustle Culture / Work as Identity
  - Overemphasis on Individualism and self-reliance
  - Lack of Structural Support for Rest and the idea that rest is "earned"
  - 24/7 Availability and Tech Culture (blurring of boundaries)
  - Stigma Around Mental Health & Rest
  - Commodification of Time (every hour is productive)
  - Lack of Communal Support Systems (neighborhoods, intergenerational support)

    - Cheung, F., Tang, C. S. K., Lim, M. S. M., & Koh, J. M. (2018). Workaholism on job burnout: A comparison between American and Chinese employees. *Frontiers in Psychology, 9*, Article 2546.
    - Barker, G. G., Volk, F., & Peters, C. (2021). Cultural influences on burnout: A Swedish–American comparison. *International Journal of Workplace Health Management, 14*(2), 181–200.
    - Moyer, F., Aziz, S., & Wuensch, K. (2017). From workaholism to burnout: Psychological capital as a mediator. *International Journal of Workplace Health Management, 10*(3), 213–227.
    - Shanafelt, T. D., Boone, S., Tan, L. N., Dyrbye, L. N., Sotile, W., Satele, D., West, C. P., Sloan, J., & Oreskovich, M. R. (2012). Burnout and satisfaction with work–life balance among U.S. physicians relative to the general U.S. working population. *Archives of Internal Medicine, 172*(18), 1377–1385.

What Does Culture Mean for Moral Injury

Significant correlates with:

Younger age, female gender, unmarried, divorced, lower religiosity, involvement in care of COVID-19 patients (in 2021), nurses (vs physicians), elevated burnout/emotional exhaustion, and workplace violence. Personality (e.g. psychopathy) and ACEs have probable impact.

Koenig, H. G., & Al Zaben, F. (2021). Moral injury: An increasingly recognized and widespread syndrome. *Journal of Religion and Health*, *60*(5), 2989–3011. https://doi.org/10.1007/s10943-021-01328-0

Also… Orphan Crushing Machine…
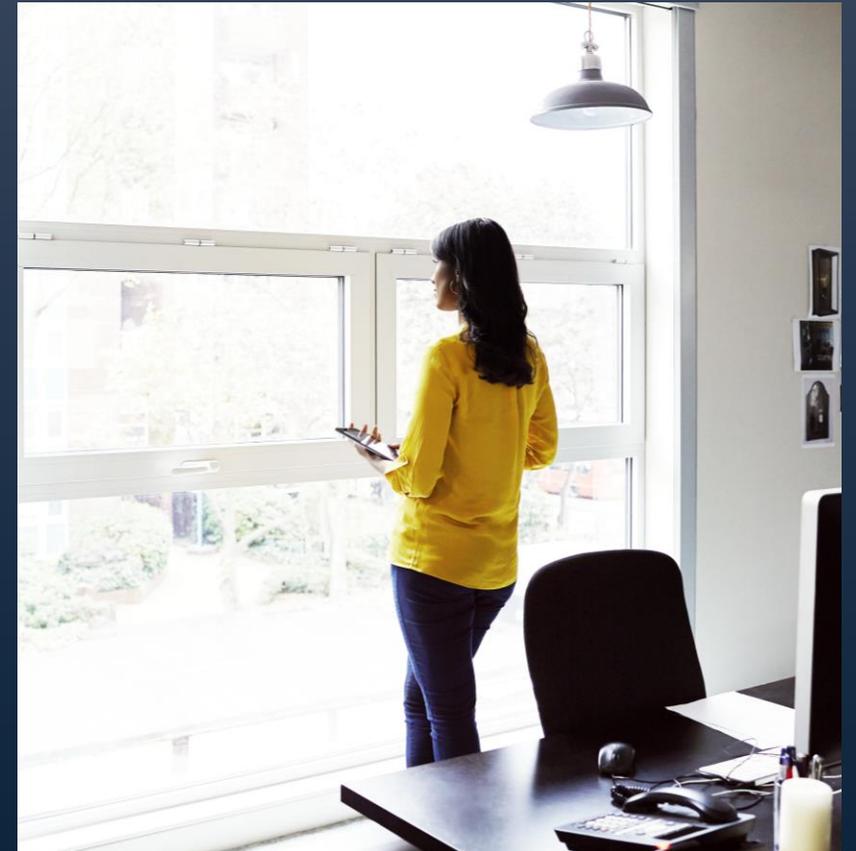
AMERICAN EXCEPTIONALISM

GREATEST INCOME INEQUALITY ...
HIGHEST POVERTY RATE ...
GREATEST NUMBER OF CHILDREN IN
POVERTY ... WORST CHILD WELL-
BEING ... LOWEST SOCIAL
MOBILITY ... HIGHEST HEALTH CARE
COSTS ... MOST PEOPLE WITH NO
HEALTH CARE ... HIGHEST INFANT MORTALITY RATE ...
HIGHEST OBESITY RATE ... HIGHEST ANTI-DEPRESSANT

How Do Burnout and Moral Injury Impact One Another?

- Correlated but distinct

- Stress as a resource demand

- Resource demands of fatiguing and morally injurious spaces

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Shay, J. (2014). Moral injury. *Psychoanalytic Psychology, 31*(2), 182–191. https://doi.org/10.1037/a0036090
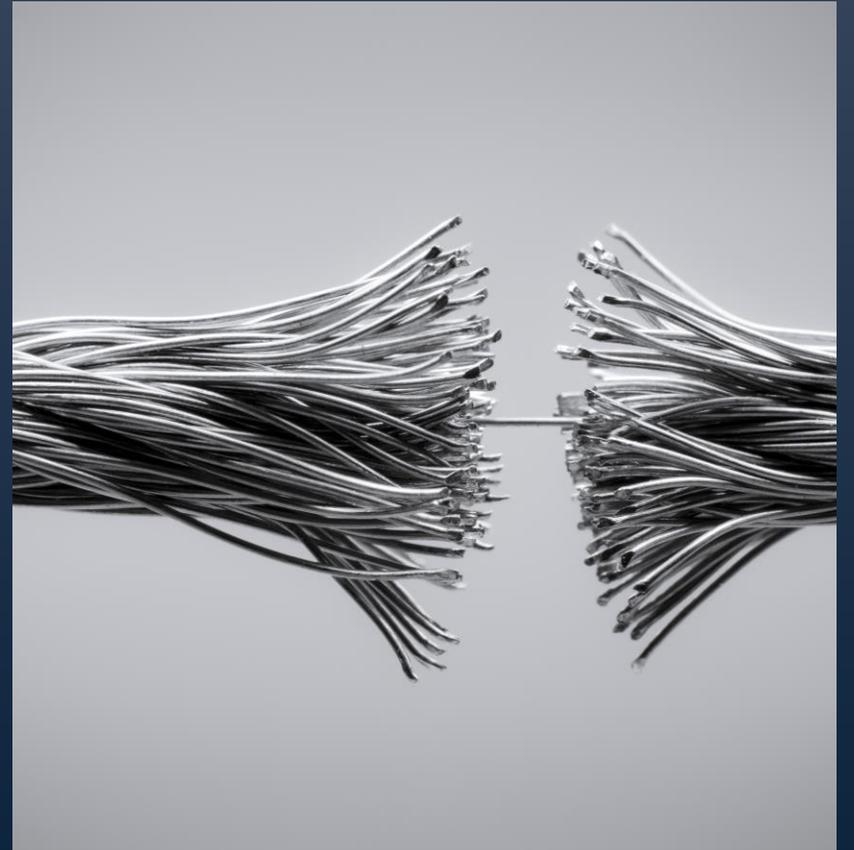
How Do We Address Burnout?

- Acknowledge and Name it (normalize conversation around it)

- Evaluate workload and expectations (prioritize rather than add)

- Create a culture of psychological safety

- Support autonomy and flexibility

- Invest in training

- Redefine success and recognition (value team support and knowledge sharing)

- Build rest into the system

- Strengthen purpose and belonging

- Measure and track burnout metrics (absenteeism, turnover, etc.)

  - Bes, I., Shoman, Y., Al-Gobari, M., Rousson, V., & Guseva Canu, I. (2023). *Organizational interventions and occupational burnout: A meta-analysis with focus on exhaustion.* International Archives of Occupational and Environmental Health, 96(9), 1211–1223

  - Verret, C. I., Nguyen, J., Verret, C., Albert, T. J., & Fufa, D. T. (2024). *Psychological safety is associated with better work environment and lower levels of clinician burnout.* Journal of the American Academy of Nurse Practitioners. [PubMed]

  - Kim, H. M., Sripada, R. K., et al. (2023). *Autonomy in work-location decision and burnout in behavioral health providers: Lessons learned from COVID-19.* Journal of Affective Disorders Reports, 14, 100652

  - Mollica, M., & Oliver, L. (2021). Creating burnout resilient cultures in mental health settings: The role of person-centered culture, managerial competence, and opportunities. *Perspectives in Psychiatric Care.* PubMed

  - Stutting, H. L. (2023). *The relationship between rest breaks and professional burnout among nurses.* Critical Care Nurse
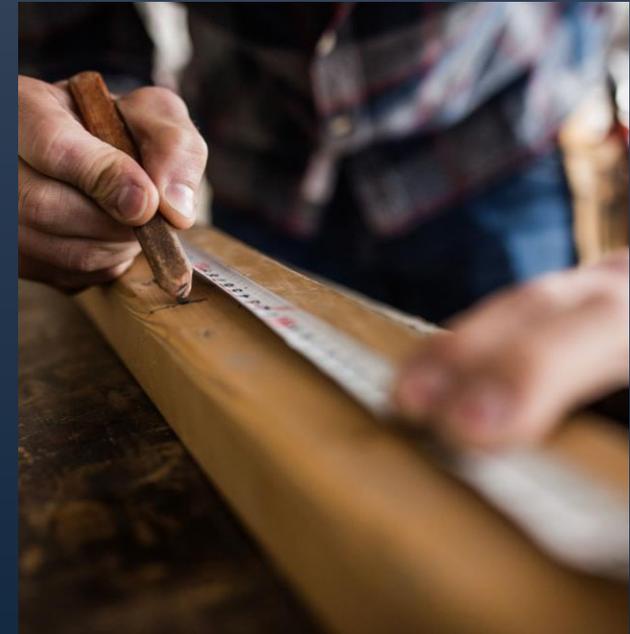
How Do We Address Moral Injury?

- Systematic prevention
  -Track moral injury along with satisfaction, burnout, engagement, etc.
  -Adopt trauma informed organizational practices
  -Provide multiple avenues for voicing concerns
  -Include ethical considerations in hiring, promotion, leadership training, P&P
  -Reduce administrative burden

- Systematic recovery
  - detailed plans for addressing prior ethical violations
  - active participation in restorative process by those who suffered the moral injury
  - potential need for additional psychological and spiritual support on top of justice

Reestablishing trust requires systemic radical transparency and amends

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https://www.psychologytoday.com/us/blog/positively-different/202204/identifying-and-addressing-moral-injury-at-work

How Do We Address Moral Injury

- Individual Actions
  -Acknowledge and disclose (Talk about the moral injury in safe space)
  -Self compassion and forgiveness
  -Find meaning in experience
  -Advocate for necessary institutional changes
  -Bolster self-awareness and self-regulation
  -Prevention through ethical competence
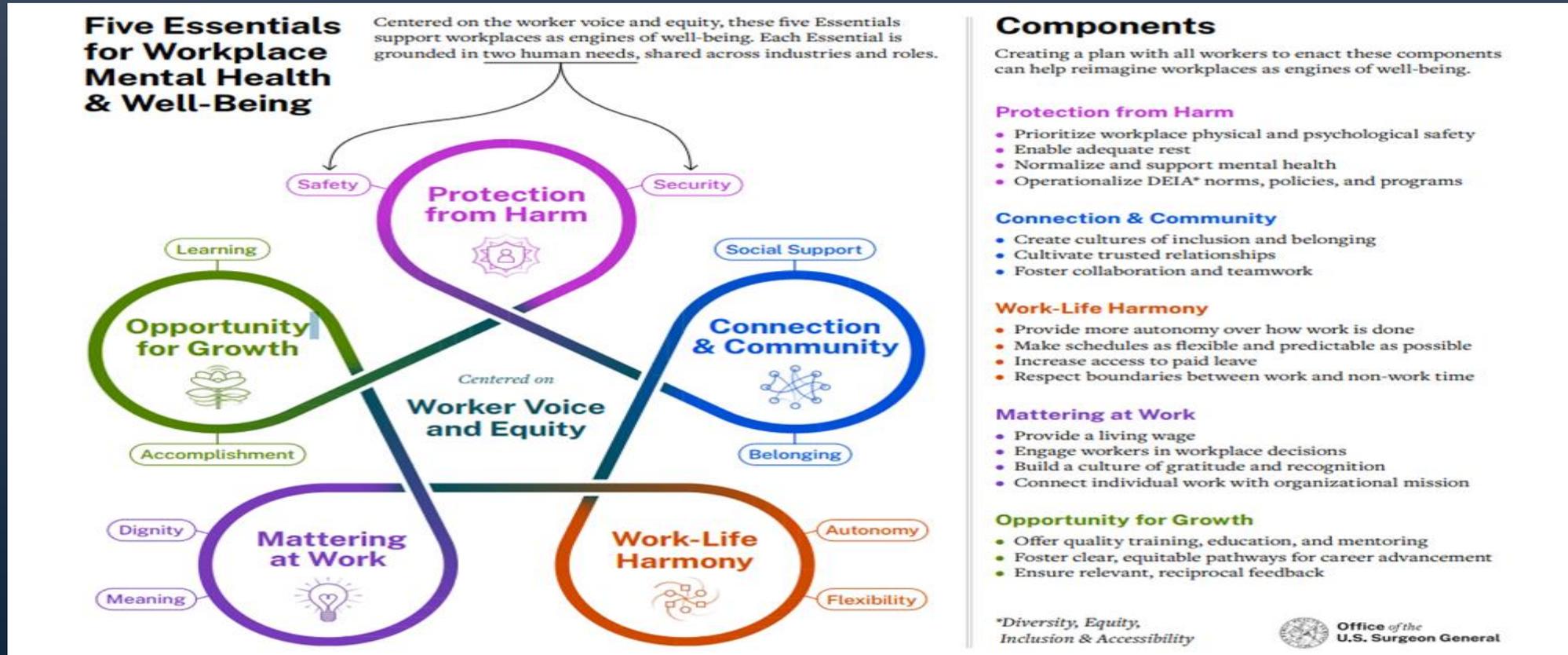 -Cultivate and maintain connections with others

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How We Can Help: Workforce Wellbeing

Office of the U.S. Surgeon General. (2022). *Workplace Mental Health & Well-being*. US Department of Health and Human Services
https://www.hhs.gov/sites/default/files/workplace-mental-health-well-being.pdf

How We Can Help: Workforce Wellbeing

- **Physical and Psychological Safety Objective:** Foster a Culture and work environment where workforce members are psychologically and physically safe from harm.

- **Mattering at Work Objective:** Enhance and Expand Workforce Recognition, awareness and engagement with Well-being programming and resources.

- **Work/Life Harmony Objective:** Foster a culture where boundaries are supported between work and non-work time, and decompression is encouraged.

- **Opportunities for Growth Objective:** Foster clear communication and equitable pathways for career advancement through transparency, education and mentoring.

- **Connection and Community (Belonging) Objective:** Foster an environment of collaboration, teamwork, and belonging through effective and intentional communication and resources such as optimizing and expanding equitable access to peer support i.e. Helping Healers Heal (H3).

A Basic Framework Suggestion…

- Identify the stressors

- Identify the resources

- Identify the values

- Identify the barriers

- Unified approach to change
  - Shared decision making

- Approach with openness and preparation to reevaluate
  - Continue to invite and support the voice of all stakeholders

Let's Try It

- In the chat, identify a stressor at your work site that contributes to either burnout or moral injury.

- From the most common 5, we'll agree which to discuss.

- We'll discuss if this issue is leading to burnout, moral injury, or both, and discuss available resources, values, and barriers related to the identified issue, then make a plan to address it.