

Post-pandemic, more workers worldwide report suffering from burnout. Though still not recognized medically, it's a warning beacon for employers and insurers alike.

In 1974, American psychologist Herbert Freudenberger was among the first to note the symptoms of 'burnout'. It has subsequently been described as having three main components: emotional exhaustion, depersonalization, and low personal accomplishment.

The WHO recognized burnout as "an occupational phenomenon" in 2019 but it is not yet considered a medical condition. Regardless of designation, the insurance industry could see more disability claims arise due to stress, anxiety, and depression – all of which may stem from burnout.

What is burnout?

Burnout results from excessive long-term stress caused by workload pressure and is characterized by extreme tiredness and reduced ability to deal with negative emotions. Exhaustion is generally the first symptom, followed by detachment and negative reactions to the job, and feelings of inadequacy and failure. This can lead to absenteeism, intention to leave a role and employee turnover.

Healthcare employment pressures escalated during the COVID-19 pandemic, with U.S. health workers reporting high rates of stress, exhaustion, sleep loss, anxiety, substance abuse and suicidal ideation. Between June and September 2020, 93% reported experiencing stress, 86% anxiety and 76% exhaustion and burnout. However, research suggests that a burnout diagnosis may be blurred by alternative or concurrent diagnoses of anxiety and/or depression.

The impact of Covid

The Covid pandemic resulted in millions of people working from home, many of whom are yet to return to the office. Consequences



Commonly used questionnaires include the Maslach Burnout Inventory, Copenhagen Burnout Inventory, Shirom-Melamed Burnout Measure and Oldenburg Burnout Inventory. They are designed to measure burnout levels and assess burnout dimensions using a scoring system based on the frequency with which individuals experience it.

Combatting burnout

Insurers can help individuals beat burnout. Measures could include providing applications or offering subscriptions to wellness programs featuring activities such as yoga, meditation and training on managing time, productivity and workload.

Techniques such as mindfulness and discussing pressures with colleagues have been effective in helping people cope with work stress. Employers can also help by building supportive working relationships, providing advice on healthy habits, offering alternative work patterns, helping employees develop coping and relaxation skills, and introducing physical and social activities to promote wellbeing.

Further research is needed to determine what triggers burnout, how long it takes a person to become burnt out, what treatments are effective and how long it takes to recover.

Questions remaining

While it is understood that burnout affects people in the working environment, there is no medical diagnosis and it remains an occupational phenomenon. It is a self-reported condition and lacks consistent measures of severity, leaving diagnoses open to interpretation. While work-related factors are clear triggers, the influence of other factors such as stress and anxiety are not well understood.

COVID-19 has escalated the incidences of burnout and it is likely that numbers will continue to rise. Symptoms can continue for years, resulting in multiple medical conditions, work absence and early mortality in those aged 45 and under.