Cognitive and Behavioral Factors Associated with Burnout Among **Evidence-Based Clinicians During** COVID-19

Presenters: Chrissna Hem, BS, Amanda Henkel, BA, Hunter Baril, BS

INTRODUCTION:

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METHODS:

mE (HODS: Survey invitations were posted to listservs/message boards for national psychological professional associations (e.g., ABCT, ADAA, IOCDF, ISITDBT) and sent to 120 evidence-based clinics across the United States

- sures were collected via SurveyMonkey between Novembe 2 and March 2023 and included: emographic data Mailach Burnout Inventory (MBI; Maslach & Jackson, 1981) ognitive Ernotion Regulation Questionnaire Short Form ERQ-SF, Garnefski ef al. 2001) coeptance and Action Questionnaire II (AAQ-II; Bond et al., companies and Action Questionnaire II (AAQ-II; Bond et al.,
-)) Compassion Scale-Short Form (SCS-SF; Raes et al., 2011) k-Life Climate Scale (WLCS; Schwartz et al., 2019) stions about workplace telepressure (Barber & Santuzzi,

RESULTS: Burnout levels were above published norms for mental health professionals (Maslach et al., 2018) on MBI-Emotional Exhaustion (MBI-EE, M = 25.40; SD = 11.92) and in line with norms on MBI-Depersonalization (MBI-D; M = 5.75; SD = 4.71).

As expected, lower self-compassion, lower psychological flexibilit less work-life balance behaviors, and increased telepressure were significantly related to higher MBI-EE. Findings were similar for MBI-D and MBI-Personal Accomplishment (MBI-PA) in expected directions. While most maladaptive cognitive emotion re (CERQ-SF) strategies were significantly related to MBI-EE strategies were not.

DISCUSSION: tudy findings replicate and extend prior work on cognitive and tudy findings replicate and therapist burnout. Notably, while analdaptive enotion regulation solitils were significantly related to higher enotional enhaustion, adaptive strategier entated to higher serior and accomplications. This may inform efforts to notuce diminican burnout, improve well being and optimize quality of care. Additional findings related to work setting, change in telehealth and present and position of the supplemental and preside and position of the supplemental and presides.

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During COVID-19, higher burnout among evidence-based therapists was related to maladaptive emotion regulation strategies, lower self-compassion, less psychological flexibility, less work life balance, and greater telepressure.



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Female	155	84.
Male	20	10.
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Straight/Heterosexual	138	75
Bisexual	16	8.
Queer	14	7.
Lesbian	7	3.
Other	5	2.
Gay	3	1)
ace	157	00
Multiracial	14	7
Asian	5	2.
Black or African American	4	2
Declined	2	1.
Native Hawaiian or Other		
Pacific Islander	1	0.
thnicity	100	07
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Clinician burnout negatively impacts personal well-being and patient care. The APA (2022) reported high levels of burnout and decreased ability to meet patient demands following the onset of COVID-19. Research conducted during the pandemic also found that clinician burnout is related to cognitive and behavioral factors including self-compassion, work-life balance, and telepressure (Kotera et al., 2021), as well as cognitive emotion regulation skills (Sandhu & Singh, 2021). This study extended prior research by examining associations between burnout and multiple cognitive and behavioral variables among evidence-based clinicians.

Survey invitations were posted to listservs/message boards for national psychological professional associations (ABCT, ISITDBT, ADAA, IOCDF) and were sent to 120 evidence -based clinics across the US. Measures were collected via SurveyMonkey between Nov 2022 and March 2023 and included: demographic data, Maslach Burnout Inventory (MBI; Maslach & Jackson, 1981), Cognitive Emotion Regulation Questionnaire - Short Form (CERQ-SF; Garnefski et al., 2001), Acceptance and Action Questionnaire II (AAQ-II; Bond et al., 2010), Self-Compassion Scale-Short Form (SCS-SF; Raes et al.,

2011), Work-Life Climate Scale (WLCS; Schwartz et al., 2019), and questions about workplace telepressure (Barber & Santuzzi, 2015).

One hundred and forty-four clinicians (doctoral level n = 81; master's level n = 62) participated. Participants identified mostly as female (n = 120; 83.3%) and White (n = 121; 84%). Average age was 41.1 (SD = 9.96) with an average 9.8 years (SD = 8.07) of post-licensure experience. Burnout levels were above published norms for mental health professionals (Maslach et al., 2018) on MBI-Emotional Exhaustion (MBI-EE; M = 25.40; SD = 11.92) and in line with norms on MBI-Depersonalization (MBI-D; M = 5.75; SD = 4.71).

As expected, lower self-compassion (SCS-SF; r = ..47, p < .001), lower psychological flexibility (AAQ-2; r = ..54, p < .001), less work-life balance behaviors (WLCS; r = ..53, p < .001), and increased telepressure (r = ..28, p = .001) were significantly related to higher MBI-EE. Findings were similar for MBI-D and MBI-Personal Accomplishment (MBI-PA) in expected directions. While most maladaptive cognitive emotion regulation (CERQ-SF) strategies were significantly related to MBI-EE, (Self-Blame r = ..31, p < .001; Rumination r = ..30, p < .001; Catastrophizing r = ..29, p = ..001), adaptive strategies were not (all $r's \le ..13$, all $p's \ge ..12$). However, Refocus on Planning (r = ..30, p < .001) and Positive Reappraisal r = ..28, p = ..001) were related to higher MBI-PA.

Study findings replicate and extend prior work on cognitive and behavioral factors related to therapist burnout. Notably, while maladaptive emotion regulation skills were significantly related to higher emotional exhaustion, adaptive strategies related to higher personal accomplishment. This may inform efforts to reduce clinician burnout, improve well-being, and optimize quality of care. Supplemental data not presented in the poster are provided below.

Supplemental Data:

 Table 1S. Relation Between Burnout, Self-Compassion, Psychological Flexibility, Telepressure, and Work

 Life Balance

 MBI Emotional
 MBI Personal

	MBI Emotional	MBI	MBI Personal
	Exhaustion	Depersonalization	Accomplishment
Self-Compassion Scale-SF	-0.43*	-0.38*	.39*
Acceptance and Action Questionnaire-II	0.54*	.42*	-0.43*
Telepressure	.28*	.20*	-0.14
Work Life Climate Total Score	.52*	.42*	34*

Note. MBI, Maslach Burnout Inventory

* p <u><</u> .01

Table 2S. Relation Between Burnout and Cognitive Emotion Regulation Strategies					
	MBI Emotional	MBI	MBI Personal		
	Exhaustion	Depersonalization	Accomplishment		
Cognitive Emotion Regulation Questionnaire Adaptive Strategies					
Acceptance	-0.06	-0.1	0.16		
Positive Refocusing	-0.08	-0.05	0.13		
Refocus on Planning	-0.01	-0.04	.29*		
Positive Reappraisal	-0.1	-0.1	.26*		
Putting into Perspective	-0.05	0.02	0.12		
Cognitive Emotion Regulation Questionnaire Maladaptive Strategies					
Self-Blame	.33*	.33*	19*		
Rumination	.36*	.18*	-0.14		
Catastrophizing	.33*	.31*	29*		
Other Blame	0.15	.19*	0.08		

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Note. MBI, Maslach Burnout Inventory

* p <u><</u> .01



Note: Data represent the number of clinicians providing clinical work in each state

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