

## ***Tactics for Transforming Diabetes HCP Burnout***

**Susan Guzman, PhD | Director of Clinical/Educational Services  
Behavioral Diabetes Institute, San Diego**

There is a *parallel between your feelings as a diabetes healthcare professional and people with diabetes (PWD)*. Managing diabetes is a big job and many people don't see this job as worth the effort and are not hopeful that their efforts will make a positive difference. Diabetes healthcare professionals face ever increasing workloads as the prevalence of diabetes is increasing. Juggling the challenges of competing demands during a brief appointment time, pressures to make progress, lack of resources and minimal support can create a very stressful work environment. It can lead many HCPs to feel hopeless that their efforts will have a positive impact.

*Healthcare professional burnout is highly prevalent with up to 30-50% experiencing burnout.*

Occupational burnout is a series of unpleasant work-related symptoms, including emotional exhaustion, depersonalization, and decreased sense of personal accomplishment. *Emotional exhaustion is the main dimension* of occupational burnout. It refers to mental and physical fatigue, feeling mentally depleted, lack of energy to complete tasks, and the feeling of not being able to renew lost energy.

Depersonalization follows extreme emotional exhaustion. It is characterized by a treatment of others as objects. This may have a self-protection function because it allows HCPs to isolate themselves from the emotional stress of work and thus provides an emotional shield against workplace problems. However, this process may result in a gradual loss of the essential traits (caring and empathy) of an effective HCP, which might have a negative impact on performance and quality of professional services. Feeling decreased personal accomplishment at work is a component of burnout that reflects a decreased sense of personal competence and self-efficacy.

*Tactics to combat HCP burnout must help the person emotionally refuel and feel more connected and effective again as an HCP.* The tactics can be headlined by 3 key statements:

- 1) "I matter": A first priority is for the HCP to recognize the importance of their own emotional and physical self-care. Combatting burnout involves acknowledging that life and work stresses have taken a toll on one's well-being and may be showing up in effectiveness at work. Learning what you need to face your own emotional exhaustion considers all that you are juggling with a belief that you matter too.
- 2) "It's worth it": This is a belief that prioritizing your own self-care activities *and* modifying work-related actions are worth the effort and will truly have an impact on your wellness and effectiveness as an HCP. A person-centered empowerment approach is an important way to feel more effective as an HCP.
- 3) "I can do it": This involves feeling confident that you have an achievable plan to prioritize own self-care behaviors *AND* to have less stressful and more meaningful work encounters. A good plan for transforming burnout knows that there will be obstacles and has considered ways to face them. Willingness to get additional help, if needed, is a sign of strength.

Get support for your efforts to face professional burnout. Sharing your plan with a trusted friend or colleague can help build in needed accountability to achieve your self-care goals and remind you that you too are worth the work of good care.

## Resources

- Emotional exhaustion: <https://www.medicalnewstoday.com/articles/323441.php>
- Empowerment:  
Anderson RM, Funnell MM (2010). Patient Empowerment: Myths and Misconceptions. Patient Educ Couns. 2010 Jun;79(3):277-82. doi: 10.1016/j.pec.2009.07.025.  
  
Funnell MM, Anderson RM, Piatt GA (2018). Patient Education and Empowerment. In: Bonora E., DeFronzo R. (eds) Diabetes Epidemiology, Genetics, Pathogenesis, Diagnosis, Prevention, and Treatment. Endocrinology. Springer, Cham
- Free 2.25 CMEs from BDI/UCSD on Critical Psychosocial Issues in Diabetes:  
<https://cme.ucsd.edu/psychosocialdiabetes/modules.html>
- Reith TP (2018). Burnout in United States Healthcare Professionals: A Narrative Review. Cureus. Dec 4;10(12):e3681. doi: 10.7759/cureus.3681
- Kalani SD, Azadfallah P, Oreyzi H, Adibi P (2018). Interventions for Physician Burnout: A Systematic Review of Systematic Reviews. Int J Prev Med. Sep 17;9:81. doi: 10.4103/ijpvm.IJPVM\_255\_18. eCollection 2018

## Contact info:

Susan Guzman, PhD  
Behavioral Diabetes Institute  
[www.behavioraldiabetes.org](http://www.behavioraldiabetes.org)  
email: [sjg@behavioraldiabetes.org](mailto:sjg@behavioraldiabetes.org)