Self-image and burnout in psychiatric staff

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Burnout was tested for in 754 mental health workers and related to self-image as assessed with Structural Analysis of Social Behavior (SASB, Benjamin 1974). A positive relation was found between burnout and negative self-image, and between the experience of personal accomplishment and positive self-image. Compared to self-image, gender, age and work setting did not explain any variance in burnout. Highly burned-out persons had a significantly more negative self-image than staff who had rated themselves as low burnout. Finally, the relation between self-image and burnout was studied in 210 subjects who had completed their self-image ratings one year before burnout was measured, with the same results: a negative self-image was related to higher burnout one year later. One general conclusion is that a tendency in staff to treat themselves in negative ways may function as a negative filter for coping with difficulties at work and thus be a risk factor for burnout.

Keywords: burnout, psychiatric staff, self-image, tedium

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Introduction

There is abundant literature about burnout, and numerous articles on its presumed causes. Most of the interest has focused on burnout as caused by organizational factors (for instance Pines & Aronson 1981, Lindquist & Whitehead 1986, Drory & Shamir 1988, Miller et al. 1990; Tyler et al. 1991, Leiter 1993, Schulz et al. 1995, Houben & Nijhuis 1996, Soderfeldt et al. 1997). Factors such as work overload, lack of social support and low decision latitude are often mentioned in this context.

A common view is also that burnout is both an organizational and a personal problem, and that burnout is a complex phenomenon with multiple dimensions (Etzion 1987, Hare et al. 1988, Buunk & Schaufeli 1993, Duquette et al. 1994, Melchior et al. 1997) which, according to some authors, should be regarded more as a process than a fixed state (Burish 1993, Hallsten 1993, Leiter 1993).

It is, however, harder to find empirical studies where burnout is connected directly to personality only; personality features are generally seen as intermediary factors that work in combination with stressors at work or other situational factors. This lack of personality-oriented burnout research becomes evident when one goes through some of the most important overviews on burnout studies. Shirom’s summary of empirical studies on burnout in work organizations mentions hardiness as an important individual variable but concludes that predisposing factors such as constitutional vulnerability have not really been studied in the burnout literature (Shirom 1989). Duquette et al. (1994) went through 36 research articles published after 1990, encompassing 45 of the most common variables related to burnout, organizational stressors, sociodemographic variables and buffering factors, but there were no purely personality factors among those. A meta-analysis on 43 burnout-related variables (Melchior et al. 1997) in nine research articles on burnout in psychiatric nurses concluded that role conflict is one of the most important staff individual variables to predict burnout, but no explicit personality variables were included in the study. In a recent handbook on burnout research (Schaufeli et al. 1993), there is no research result reported indicating that
burnout could be directly explained by some personality trait.

It is true that some authors have approached the area of connecting burnout to individual variables. For instance, it has been suggested that burnout actually reflects enduring qualities of the individual and that personality accounts for a significant portion of the variance in the burnout scores (Piedmont 1993); depression, anxiety and vulnerability were three such factors that correlated highly with emotional exhaustion and depersonalization. It has been shown in other investigations that the role of personal dispositions for burnout is not unimportant; e.g., in a study of 135 practical nurses, self-blame was positively related to burnout (Kimmel 1981) and state anxiety in psychiatric staff has been found to be significantly associated with burnout, especially emotional exhaustion (Corrigan et al. 1994). In a study on 177 workers in a mental hospital, it was found that increased burnout was associated with escapist coping strategies, whereas decreased burnout was associated with control coping cognitions (Leiter 1991).

Firth et al. (1987) studied nursing staff in long-stay settings and concluded that personality seems to be related to burnout: staff hostile to themselves are more likely to avoid problems and decisions at work; people prone to hostility to others are more likely to report depersonalization in terms of the MBI (Maslach’s Burnout Inventory; Maslach & Jackson 1981).

Maslach, one of the first scientists to work with burnout, noted that burnout is stable over time, a fact that could indicate that burnout to a large extent is due to personality factors and does not only depend on organizational and work milieu factors (Maslach & Florian 1988). However, in most studies on burnout and personality, the two measurements were made at the same time, which makes it impossible to conclude that personality – when related to burnout – is anything but a state; to show a connection between burnout and a stable personality trait one would need to study both phenomena over a certain length of time.

Summarizing the research results and theoretical attempts mentioned above, it seems that a missing link of the burnout complexity has to do with personality characteristics, or at least, such factors cannot be ignored. One such factor could be self-image, and it seems likely that negative self-image factors like self-neglect and self-blame, which lead to a reduced concern about one-self, would in turn facilitate the emergence and also increase burnout in a person. A person with a negative self-image might therefore be more vulnerable to burnout reactions. A positive self-image might instead function as a buffer factor, reducing the impact of negative work situations leading to burnout.

The main purpose of the present study was to investigate the relation between personality and burnout in staff working with patients having psychiatric problems. Personality was defined by use of interpersonal theory and a circumplex model, Structural Analysis of Social Behavior (SASB), developed by Benjamin (1974). Structural Analysis of Social Behavior has a more dynamic definition of personality, and it is possible to capture some important and basic aspects of how a person treats and looks upon him/herself, aspects that have been shown to be related to, e.g., therapeutic outcome (Henry et al. 1990), and outcome in transsexualism (Kullgren & Bodlund 1996).

A main hypothesis in interpersonal theory is that we interact with others in a way that will affirm and validate our self-definition (Kiesler 1996). Therefore, persons with a more negative self-image would be more inclined to accuse themselves for difficulties experienced in work and there would be an increased risk for negative circles to be set in motion. In this way a more negative self-image would indicate an increased risk for burnout. In the present context, this would mean that high-burnout persons were expected to have a significantly more negative self-image. The relation between self-image and burnout was expected to be the same even when the self-image was measured a substantial time before burnout was measured. That is, the relation between self-image and burnout is not due to the person being in a positive or negative state when filling in the questionnaires.

Method

Subjects

Data were collected from two large projects running at the Department of Applied Psychology at the University of Umeå in Sweden: the Treatment Home Evaluation Project (Jeanneau & Armelius 1995) and a project on burnout in psychiatric staff (Jeanneau & Bihari-Axelsson 1994, unpublished results): in total, 754 persons, 455 women and 295 men (4 persons did not declare their sex). Mean age was 45 years (between 36 and 67 years), rather evenly distributed. The participators all worked in different mental health care settings all over Sweden: psychiatric wards, small psychiatric treatment homes, forensic wards, and community care centres (see Table 1).

The majority of the subjects were psychiatric aids (57%) or nurses (15%). The other participating groups (psychotherapists, social workers, medical doctors, occupational therapists, heads of the departments and different kind of administrators) each constituted about 1–6% of the subjects. As far as possible all subjects who were not on holiday or sick leave at the time of the investigation
filled in the questionnaires. The dropout rate was generally low due to the fact that the participating units all had chosen to join the projects out of their own interest to know more about themselves and their working environment.

**Instruments**

**Burnout measures**

Two well-known scales were used: the BM (Burnout Measure; Pines & Aronson 1981) and the MBI (Maslach & Jackson 1981). The BM, consisting of 21 items, defines ‘a state of physical, emotional and mental exhaustion caused by long-term involvement in situations that are emotionally demanding’ (p. 9). The BM measures tedium in a general way, as the result of a prolonged pressure, whereas the MBI focuses on the emotional pressure that is the result of intense work with people, and describes, in 22 items, burnout as a three-dimensional syndrome characterized by emotional exhaustion, depersonalization and reduced personal accomplishment. The construction and the use of these scales have been thoroughly described elsewhere (Maslach & Jackson 1981, Pines & Aronson 1981, Schaufeli et al. 1993). The reliability for the Swedish measures of the different burnout dimensions was above $\alpha = 0.80$, except for depersonalization, which was $\alpha = 0.66$.

**SASB**

The SASB model includes two main dimensions combined into a circumplex structure: affiliation (love–hate on the horizontal axis) and interdependence (autonomy–control on the vertical axis). In the full SASB model there are three different foci, two of which define interpersonal transactions of acting and reacting, and a third focus which is seen as the result of transactions directed inwards towards self – the introject or the self-image. In the present study only the introject version was used. In the model, the two dimensions are combined as 36 different points that are summarized into eight clusters. These 36 points are formulated as 36 statements in a questionnaire that are answered on a scale between 0, ‘not at all’, to 100, ‘agree perfectly’. In Fig. 1, the cluster version of the SASB model is shown for the introject or self-image. As seen in Fig. 1, moving to the right increases self-love, moving to the left increases self-hate, moving up increases spontaneity and moving down increases self-control. For instance, cluster 2, ‘accepting self’, combines a moderate amount of self-love with spontaneity, and cluster 4, ‘nourishing self’, combines an equal amount of self-love with self-control, and so on for the remaining clusters. The reliability of the Swedish version of SASB is high; internal consistency is around 90 (Armelius et al. 1983).

With the three instruments, BM, MBI and SASB, we have the opportunity to study the unique combinations of different aspects of the self-image and aspects of burnout. It seems likely that some of the SASB clusters – if viewed as either causes to burnout or buffer factors to prevent burnout – will be more associated with burnout than others, according to their themes. For example, the negative side of the self-image – self-blame, self-hate and self-neglect – ought to characterize persons with a high level of tedium, emotional exhaustion and depersonalization, and a reduced level of personal accomplishment, and vice versa, a low level of burnout should correlate positively with a positive self-image (self-acceptance, self-love and self-nourishing). We also assume that spontaneity is related to a non-burnout picture. With self-control, it is harder to have an opinion, as the SASB self-control has more to do with an intrapersonal sphere, than with social or psychosocial factors.
Results

Gender, age, profession and work setting

A series of t-tests, ANOVA analyses and post hoc tests (Bonferroni) were performed to look for differences between groups in self-image and burnout factors. For all analyses, the significance level was set to $P < 0.01$. There were surprisingly few significant differences found.

- **Gender.** Women rated significantly higher self-blame (cluster 6) and self-hate (cluster 7), and had more of tedium compared to men whereas men had more self-neglect (cluster 8) and depersonalisation of others (patients).
- **Age.** Generally, the correlations showed that being older was related to a less positive and more negative self-image. However, even when the correlations were significant, they were not higher than $r = 0.10$ for any cluster on SASB.
- **Professional groups.** No differences were found in terms of self-image. In burnout the only difference found between professional groups was that administrators generally rated lower on personal accomplishment than all other professional groups in the material.
- **Work setting.** Generally, the pattern of the self-image ratings follows that for normal ratings (Bodlund & Armelius 1993) for staff from all work settings, with high ratings for the positive clusters and low ratings for the negative clusters. There were four significant overall differences in self-image among the eight different work settings, but they did not seem to follow any systematic pattern. Of the burnout scales, tedium was rated higher in outpatient clinics than in units for juvenile delinquents. Depersonalization was higher in forensic units than in treatment homes, psychiatric wards and community care centres. The feeling of low personal accomplishment at work was most frequently found in the forensic units compared to treatment homes, psychiatric wards, outpatient clinics and community care centres.

Relation between burnout and self-image

Pearson’s correlations were used to detect relations between different aspects of burnout and self-image. The results are shown in Fig. 2.

The tedium scale especially was strongly correlated with both the positive and negative aspects of the self-image. (All correlations except for self-nourishing and self-control were significant). Higher ratings of a more negative self-image – blaming, neglecting and hating self – were related to more burnout in terms of tedium, while higher ratings of a more positive self-image: accepting and loving self were related to less burnout in terms of tedium. In addition, a spontaneous self was also related to less burnout in terms of tedium. The same pattern, but not as strong, was found for Maslach’s subscale emotional exhaustion, with the exception of a spontaneous self, which showed no relation to emotional exhaustion. Depersonalization and self-image showed even lower correlations. However, a negative self-image (blaming, attacking and ignoring self) and a positive self-image (accepting and nourishing self) were significantly related to depersonalization. Burnout in terms of personal accomplishment was more strongly related to a positive self-image than to a negative self-image. However, all positive and negative clusters were significantly correlated with personal accomplishment at
work: a more positive self-image was related to higher experiences of personal accomplishment and a negative self-image was related to lower experiences of personal accomplishment.

**Multiple regression analysis**

To compare the importance of the different aspects of self-image and gender and age to burnout, four step-wise multiple regression analyses were performed with the four measures of burnout (tedium, emotional exhaustion, depersonalization, personal accomplishment) as dependent variables and the eight SASB clusters, gender and age as independent variables. The results of the multiple regression analysis are summarized in Table 2, which shows the increase in explained variance for each added independent variable.

All four aspects of burnout were related to different aspects of a person’s self-image, while gender and age seemed to be less important for burnout. As for the individual correlations, the relation between different aspects of the self-image and tedium was strongest and almost 30% of the variance in tedium might be explained by the different self-image clusters: if a person had a tendency to blame or hate him/herself, burnout was more likely, whereas, on the other hand, if a person had a tendency to accept self and be spontaneous, burnout was less likely. More emotional exhaustion was likely when a person hates and neglects him/herself, while nourishing and accepting self seemed to be protecting factors. To react with depersonalization was related to self-neglect and self-blame, and was less likely to occur in a person who accepts and nourishes self. Gender and age were also important for depersonalization: being male and younger were related to higher depersonalization. Finally, higher personal accomplishment was related to a more positive self-image with self-love and nourishing self, while self-neglect was related to lower personal accomplishment.

A second multiple regression analysis was performed with the variables gender and age entered as the first block of variables. When entered first, these variables explained together only between 1 and 4% of the variance in burnout.

**Self-image in high- and low-burnout staff members**

To further explore the relation between burnout and the different aspects of the self-image, the sample of subjects ($n = 754$) were divided into three groups for each of the four burnout scales. The cut-off limits for defining high and low burnout were chosen to give three groups, one high burnout ($n = 250$), one low burnout ($n = 208$) and one middle group ($n = 296$). The cut-off values used are shown in Table 3.

Differences in self-image between the high- and low-burnout groups were tested with $t$-tests, one for each SASB cluster; the significance level was $P < 0.01$. The most striking results of the analysis were the differences in self-blame, self-hate and self-neglect for high- and low burnout staff: the high-burnout group had a much more negative self-image in all four burnout aspects. Also, self-acceptance and self-love were lower for the high-burnout groups defined in terms of tedium, emotional exhaustion and personal accomplishment. Self-nourishing was significantly lower only in those who scored low in personal accomplishment. Suffering from burnout is thus generally related to a negative self-image.

Worth noticing was that self-control did not differ among the high- and low-burnout groups, while low spontaneity characterized the group with high burnout in terms of tedium. The control-spontaneity dimension is obviously less relevant for burnout than the positive/negative aspect of the self-image. Only tedium seems to have something to

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**Table 2**

Explained variance ($R^2$) in burnout by self-image clusters, gender and age

<table>
<thead>
<tr>
<th></th>
<th>T</th>
<th>EE</th>
<th>D</th>
<th>PA</th>
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<tbody>
<tr>
<td>Cluster</td>
<td>Cluster</td>
<td>Cluster</td>
<td>Cluster</td>
<td>Cluster</td>
</tr>
<tr>
<td></td>
<td>$R^2$</td>
<td>$R^2$</td>
<td>$R^2$</td>
<td>$R^2$</td>
</tr>
<tr>
<td>Blame</td>
<td>0.20</td>
<td>0.10</td>
<td>0.05</td>
<td>0.07</td>
</tr>
<tr>
<td>Accept</td>
<td>0.24</td>
<td>0.12</td>
<td>0.08</td>
<td>0.10</td>
</tr>
<tr>
<td>Hate</td>
<td>0.26</td>
<td>0.13</td>
<td>0.10</td>
<td>0.11</td>
</tr>
<tr>
<td>Spontane</td>
<td>0.27</td>
<td>0.14</td>
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<td></td>
</tr>
</tbody>
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T, Tedium; EE, emotional exhaustion; D, depersonalization; PA, personal accomplishment.

**Table 3**

Cut-off values used to define high- and low-burnout groups for emotional exhaustion (EE), depersonalization (D) and personal accomplishment (PA) and tedium (T). (Scale PA is reversed: low PA = high burnout)

<table>
<thead>
<tr>
<th></th>
<th>EE</th>
<th>DP</th>
<th>PA</th>
<th>T</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>&gt; 19</td>
<td>&gt; 5</td>
<td>&lt; 32</td>
<td>&gt; 3.13</td>
</tr>
<tr>
<td>Low</td>
<td>&lt; 12</td>
<td>&lt; 2</td>
<td>&gt; 39</td>
<td>&lt; 2.52</td>
</tr>
<tr>
<td>Middle</td>
<td>13–18</td>
<td>3–4</td>
<td>38–33</td>
<td>2.53–3.13</td>
</tr>
</tbody>
</table>

do with spontaneity: lack of spontaneity goes together with a feeling of tediousness.

Relation between self-image measured one year before burnout

One question was whether the relation between self-image and burnout was due to the subjects’ state when filling in the questionnaires. If the subject was in a positive state, all questions might be answered more positively, and vice versa. In order to clarify this, a separate analysis was performed for those subjects where the SASB questionnaire was filled in at least one year before the burnout questionnaires \((n = 210)\). The reason why the self-image was rated one year before burnout for this sample was that the different burnout instruments had not yet been translated into Swedish and only the SASB ratings could be done at the beginning of the project. The correlations between burnout and self-image clusters are shown in Fig. 3.

When self-image was measured one year before burnout, both tedium and emotional exhaustion were still significantly related to a negative self-image: more self-blame and self-hate were related to higher tedium and emotional exhaustion one year later. More self-neglect was related to lower personal accomplishment one year later. Depersonalization showed no relation to the self-image ratings one year before.

To summarize, a person’s self-image was more important for feeling burned out than gender, age and type of work setting. When measured at the same time, all analyses showed that a negative self-image seemed to increase the risk of burnout, especially in terms of tedium, but also for the other aspects of burnout, while a positive self-image seemed to function as a protecting factor leading to lower burnout. When burnout was measured one year after the self-image, the results indicated that the negative aspects of the self-image are the most important for burnout. Having a self-image where the subject blames and hates themselves makes it more probable that they will rate higher burnout at work in terms of tedium and emotional exhaustion one year later, and self-neglect also makes it more probable that they will feel that they have not accomplished anything at work one year later. Depersonalization and self-image showed no relation.

Discussion

The main result of the present study was the strong relation between different aspects of a person’s self-image and burnout. When measured at the same time, both the negative and positive aspects of the self-image were related to all aspects of burnout. The general picture was that the negative self-image clusters were more important than the positive clusters, and especially so for tedium and emotional exhaustion. This general picture was confirmed both by the comparison between high- and low-burnout groups and the relation between self-image and burnout when self-image was measured one year before burnout.

This study thus shows that there is a clear relationship between burnout and a negative self-image. This could mean that there is some substance in the current belief (Schaufeli et al. 1993) that burnout is specifically found in vulnerable persons with specific personality traits who are more apt to be burnout victims than others. But the most crucial question remains however: We can not say if burnout is the effect of a negative self-image, or if it is the other way around. The negative self-image may well be the result of long-lasting and tedious work conditions. Whatever the cause and effect, it is, however, clear that a negative self-image is a bad prognostic sign for burnout.
understand why a negative self-image may function in this way, the concept of a person-schema (Horowitz 1991) might be used. A person-schema is a belief structure about self and others, that will function so as to organize a person's experiences. A more negative person-schema will then increase the possibility for reactions in agreement with those negative aspects, leading to a confirmation of the person-schema. Such person-schemas will thus lead to maladaptive ways of coping with difficulties at work. The present results thus highlight the importance of including a person's way of treating him/herself when trying to understand the burnout phenomena. No matter of what is the cause or what is the effect, as soon as these negative processes are set in motion they will be very difficult to change, since a negative self-image will increase the probability that a person will experience difficulties at work in an even more negative way, compared to a person with a less negative self-image (Kiesler 1996).

The fact that there was no relation between self-image and depersonalization one year later implies that depersonalization, where you find the patients difficult to work with, is a separate aspect of burnout not related to the vicious circle of blaming self. The concept of depersonalization is, in fact, according to other authors, e.g. Garden (1987), the most problematic of the three Maslach dimensions; according to her own definition, it describes a person showing a 'detached, callous, and even dehumanized response' (p. 4) to patients. It could imply that staff 'put them [patients] down, refuse to be civil and courteous to them, ignore their pleas and demands, or fail to provide the appropriate help, care or service'. (Maslach & Jackson 1981, p. 3). It differs from the other two Maslach dimensions, in that it measures, more than inner psychological states, reactions to other people. This different nature of depersonalization agrees with the interpretation of our results, that a negative self-image increases the possibility that one tends to blame oneself for difficulties at work, since depersonalization would mean that you treat others in a negative way instead of yourself.

Another way to look at the result is to regard the negative self-image patterns as a validation of burnout. Some of the burnout literature is in fact about this: describing low self-esteem and self-destructive behaviours as typical signs of burnout. It goes without saying that – even though these factors and the SASSB clusters are not identical and exactly compatible – the core emotional trait is the same – having negative feelings about oneself.

As it has proved possible to measure self-image in burned-out individuals, we can use the result to further develop the theory of burnout. What is needed next is longitudinal research on how connections between burnout and self-image develop across time. What will happen to staff who have a negative self-image, while not being burned out, after a number of years? Are they then found to be burned out?

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