Burnout, Areas of Worklife, and Vocational Evaluators: A New Perspective

Shakeerrah D. Lawrence

Abstract

Burnout negatively impacts people from different occupations and socioeconomic groups. Burnout manifests through three distinct characteristics: emotional exhaustion, depersonalization, and reduced personal accomplishment. Understanding the causes of burnout is critical for preventing burnout in the helping professions; however, research about burnout in vocational evaluation is rare. Given the risk factors of burnout faced by many vocational evaluators and career assessment professionals (e.g., production requirements, competitive work environment, isolation, secondary trauma, limited resources) it is important for vocational evaluators and career assessment professionals to better understand burnout as they build towards wellness. This paper will review literature that explores the origin, description, and symptoms of burnout. Support for future research, along with implications for vocational evaluators, administrators, and the profession is also included.

Keywords
burnout, areas of worklife, vocational evaluators

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Burnout has a significant effect on personal wellbeing, economic climate, and organizational culture. While research implies that burnout occurs within various occupational groups, studies about the effect on helping professionals remain substantial in literature. Rehabilitation professionals, such as vocational rehabilitation counselors and vocational evaluators, assist persons with disabilities as they strive to reach their highest employment potential. One of the biggest service providers to persons with disabilities is the vocational rehabilitation (VR) program, which employs

vocational evaluators as they help determine suitable employment opportunities for persons with disabilities. Despite the positive impact on persons with disabilities, vocational evaluators may experience job stress due to negative work experiences. Prolonged stress on the job can result in burnout, described as emotional exhaustion, depersonalization, and reduced personal accomplishment. Leiter and Maslach (1999) explored six areas of worklife believed to influence whether an employee is burned out or engaged at work. While studies on burnout in other professionals have been prevalent in the literature for decades, research about these concepts and vocational evaluators remains scarce. This paper will review literature that explores the origin, description, and symptoms of burnout. The foundations of vocational evaluation, growth of the profession, and the roles and functions of vocational evaluators are also discussed. Areas of worklife, relationship to burnout, and the vocational evaluation perspective are also examined. Support for future research, along with implications for vocational evaluators, administrators, and the profession, is also mentioned.

Occupational Burnout

Dr. Herbert Freudenberger, a psychologist from Germany, was one of the first researchers to identify characteristics associated with occupational burnout. Freudenberger (1975) initially focused on risk factors for staff at free clinics and substance abuse facilities, such as long work hours, job demands, and lack of financial compensation. Research by Cherniss (1980) helped solidify a proper description of burnout symptoms through a three-stage process: disparity of demands and resources; an increase in negative symptoms, and significant changes in behavior. This process further aided Dr. Christina Maslach, a social psychologist, with a formal description of burnout, identified as a process of emotional exhaustion, depersonalization, and reduced personal accomplishment after a prolonged period.

Burnout Characteristics. As the basic individual stress dimension of burnout, emotional exhaustion occurs due to the depletion of emotional resources after prolonged periods of work-related stress (Heinemann & Heinemann, 2017). As a central component of burnout, physical impacts of emotional exhaustion reflect feelings of excessive tiredness, low energy, and chronic fatigue (Maslach & Leiter, 2008). While physical effects are common, exhaustion also occurs physically and emotionally as employees begin to lack concern for others. Depersonalization refers to a display of negative attitudes towards clients or colleagues (Genly, 2016). Described as the interpersonal dimension of burnout, employees display depersonalization through insensitivity, detachment, and lack of concern for others in the workplace (Bridgeman et al., 2018). Time was also mentioned as a factor for depersonalization, as a gradual shift in behavior occurs as burnout increases (Maslach & Leiter, 2008). Along with physical and emotional effects, burnout also impacts how employees view themselves and their work. Reduced personal accomplishment occurs due to negative thoughts employees have about a lack of satisfaction or competency in their work (Bridgeman et al., 2018). Acknowledged as the self-evaluation dimension of burnout, employees experience decreased confidence and enjoyment in their work abilities. For example, employees who have trouble meeting objectives or deadlines promptly may feel insufficient in their job, resulting in lower self-esteem levels (Bakker et al., 2014). Factors associated with

burnout characteristics can exacerbate symptoms, contributing to negative effects on a holistic level.

Symptoms and Consequences. Numerous symptoms and consequences are associated with burnout. Symptoms are likely to occur in physical, cognitive, and behavioral ways. Physical symptoms associated with burnout include headaches, loss of appetite, sleep disturbances, high blood pressure, and gastrointestinal issues (Bakker & Costa, 2014; Schaufeli & Enzmann, 1988). Emotional symptoms, also common in burnout, can affect an employee's mood, leading to a higher risk of mental health diagnoses. Cognitive effects of burnout resemble low frustration tolerance, lack of empathy, helplessness, hostility, and negative interactions with others. Employees who experience burnout may also feel discouragement or boredom in once enjoyable activities (Young, 2015). Behavioral symptoms may occur individually or interpersonally. For example, an individual may engage in risk-taking behaviors (e.g., substance use) or express aggression towards others. Maslach & Leiter (2017) expressed additional negative interpersonal outcomes due to burnout, including dysfunctional relationships, cynical attitudes towards others, and chronic health issues.

Organizations are also affected by the consequences of burnout. Maslach & Leiter (2017) suggested that burnout is more than an employee having a "bad day" (p. 161), as symptoms can arise due to internal issues. The authors also believed burnout occurs due to social or organizational circumstances that should be addressed in mainstream literature. Despite reasons for the occurrence, ramifications from burnout can be costly for organizations. For example, financial issues may occur due to low productivity, company instability due to high turnover, and risk to employee safety. Bruschini et al., (2018) reported higher instances of burnout in professionals who interact with clients who discuss constant physical or psychological issues. Professionals in this category include vocational evaluators, who are also prone to experience burnout in the workplace.

Vocational Evaluation

Vocational evaluation is defined as a comprehensive process that applies real or simulated work opportunities to determine appropriate vocational goals. Vocational evaluators integrate pertinent data (e.g., medical history, psychological background) from interviews and behavioral observations to formulate suitable job recommendations (Dowd, 1993). The following sections discuss relevant legislation and the growth of the profession.

Key Legislation and Professional Growth. Vocational evaluation began to establish itself in the early 20th century using assessments with injured World War I veterans. Between the 1940s and 1960s, the Barden-LaFollette Act and Vocational Rehabilitation Act Amendments broadened the scope of evaluation services with increased funding and training opportunities. Over the next few decades, additional legislation sought to improve the quality of services vocational evaluators provided to persons with disabilities. One of the most prominent acts during the 1970s was the Rehabilitation Act Amendments of 1973. This act proposed more services for persons with severe disabilities. Subsequent sections added to these amendments over time

expanded services to include affirmative action (e.g., Section 501) and equal opportunity employment (e.g., Section 504; Chan et al., 2017).

Between the 1980s and 1990s, vocational evaluation experienced tremendous growth as it sought to establish an accreditation, certification, and professional identity. The Commission on the Certification of Work Adjustment and Vocational Evaluation Specialists (CCWAVES), which originated in 1981, was responsible for credentialing. Professional organizations also grew during this time, including the Vocational Evaluation and Work Adjustment Association (VEWAA) and the Vocational Evaluation and Career Assessment Professionals Association (VECAP). Frequent changes have challenged the profession, from the dissolution of CCWAVES in 2008 to the development of a new credential through the Registry of Professional Vocational Evaluators (RPVE). After the dissolution of RPVE in 2017, continuing education opportunities for evaluators are maintained through several organizations, including VECAP, VEWAA, and the Commission on Rehabilitation Counselor Certification (CRCC). Despite numerous changes, the role of evaluators remains vital to the VR program and persons with disabilities who desire greater involvement in their employment goals (30th IRI, 2003).

Role and Function of Vocational Evaluators. Depending on the job setting, vocational evaluators may be also referred to as "assessment and career specialists" or "rehabilitation specialists" (Sligar & Betters, 2012, p. 25). Despite the title used, an evaluator's role remains essential in rehabilitation settings. Vocational evaluators are responsible for assisting persons with disabilities in successful employment, education, and training outcomes. Three levels of assessments are identified in vocational evaluation services. Screening involves vocational planning and analyzing brief assessments used in the process. Clinical or exploratory evaluation involves more details, including transferable skills analysis and job matching. A comprehensive evaluation encompasses numerous tasks, including in-depth interviews and the use of work samples. Initial interviews incorporate psychological and medical data into previous employment history to understand functional limitations. Behavioral observations, psychometric testing (e.g., interests, aptitudes), and the evaluation report are necessary for the vocational evaluator to suggest feasible vocational goals (Ahlers, 2010). Along with vocational goals, other recommendations may be mentioned, including mental health counseling, medical care, and housing needs (Flansburg, 2011).

Conducting behavioral observations, synthesizing data from assessments, and analyzing occupational areas are critical knowledge domains for vocational evaluators (Hamilton & Shumate, 2005). Results from Sligar and Betters (2012) reported similar areas and functions of evaluators, including career guidance, knowledge of assistive technology, and labor market analysis. Evaluators in VR programs usually need to meet monthly quotas, which can range from approximately 10 to 15 evaluation reports a month. Some studies also reported that approximately 97% of VR programs receive evaluation services from other sources, such as community rehabilitation programs (Hamilton & Shumate, 2005; Sligar and Betters, 2012). Some job tasks, such as monthly production rates and competitive work environments, can lead to an increase in burnout. Risk

factors in the workplace reflect six specific areas that increase the likelihood of burnout in employees.

Areas of Worklife

Areas of worklife are six specific areas within the work setting believed to determine whether an employee experiences burnout on the job. Researchers reported extensively on the significance of burnout in the workplace and descriptions of what these specific worklife areas entail (Leiter, 2015; Maslach & Leiter, 2017). Workload is consistently associated with burnout, identified by "tasks, intensity, and complexity" an employee experiences in the workplace (Leiter, 2015, p. 224). Additional factors associated with workload include job demands and work pressures (Maslach, 2015). Control considers the level of participation an employee has in their role or decisions within the work setting (Leiter, 2015). Lack of control also contributes to burnout and occurs from numerous circumstances, such as rigid policies and supervisory micromanagement. Internal and external factors also reflect an employee's control, such as role conflict (e.g., clash in values) and role ambiguity (e.g., lack of direction). A lack of control negatively also affects how an employee feels they are rewarded on the job (Maslach, 2015). Reward considers how extrinsic (e.g., pay, recognition, appreciation) and intrinsic factors (e.g., sense of self-worth) affects an employee's motivation (Young, 2015). Intrinsic factors also include feeling a sense of pride at work, understanding the importance of job tasks, and ensuring those tasks are performed well (Leiter & Maslach, 2003). Leiter (2015) also described rewards through recognition from supervisors and feeling a sense of community at work.

Community considers the importance of relationships within the work setting. Community is essential in the workplace, as it adds quality to social interactions, improves mutual support, and helps people work better as a team (Jimenez & Dunkl, 2017; Leiter & Maslach, 2003). Employees typically lose a sense of community in the workplace due to unresolved conflicts, isolated job roles, and toxic work environments. Community also decreases in the workplace due to resource scarcity, limited support, and favoritism shown to certain employees. Fairness focuses on the ability to make equitable and impartial decisions in the workplace. Fairness considers mutual respect between employees and management; self-worth at work, and decision making with equal consideration (Lee & Cummings, 2008; Leiter & Maslach, 1999). Equally important to fairness are values in the workplace, which considers if there is a match between an employee's beliefs and the organization's goals (Leiter, 2015). When an employee's values begin to conflict with the organization's values, work can become less meaningful and enjoyable. Conflict can also occurs between personal career aspirations and the values of the organization, which can leads to a reconsideration of career choice (Gregory & Menser, 2015; Leiter & Maslach, 2003). Research on the relationship between burnout and areas of worklife is limited in the rehabilitation literature. Further awareness of the roles and functions of evaluators provide a glimpse into how and why burnout occurs in the workplace.

Implications for Vocational Evaluation and Career Assessment

Despite several studies on burnout in rehabilitation counselors, research on the relationship to areas of worklife remains scarce. Studies about these concepts in vocational evaluators have yet to be explored. Vocational evaluation has encountered numerous changes during the past few decades. The dissolution of CCWAVES in 2008 and RPVE in 2017 prompted a level of ambiguity about the future of the profession. Likewise, Sligar & Betters (2012) reported additional areas of concern for longevity in the profession, such as the retirement of current evaluators and lack of adequate training programs. The need for more empirical data on burnout in evaluators was also suggested for those employed in VR programs, administration, and the education system (O'Sullivan & Bates, 2014; Zanskas & Strohmer, 2011). A greater understanding of the stress evaluators encounter in the workplace could help improve preventive measures. Knowledge of positive (e.g., job security) and negative (e.g., low compensation) aspects of VR agencies help identify aspects of the work environment that may contribute to higher levels of burnout (Zanskas & Strohmer, 2011).

The use of organizational assessments can also encourage administrators to implement effective interventions into policies. Bakker & Costa (2014) suggested that management should develop policies to optimize job demands and resources, particularly for employees who are at the highest risk for burnout. Knowledge of burnout risk factors can also help improve self-care, whether through professional (e.g., continuing education, networking events) or personal (e.g., mindfulness exercises, wellness retreats) practices (Maslach, 2011; Maslach & Leiter, 2017). Implications are also relevant for seasoned evaluators and administrators, who will continue to guide current and future professionals as they seek employment opportunities in the field. A decrease in graduate training programs across the country hinders effective recruitment methods for evaluator positions. Effective hiring practices (e.g., minimum education requirements) may also be impacted due to recent changes in certification and credentialing. For success to reverberate across the profession, collaboration is necessary. The combination of support at the organizational and administrative level allows for a higher level of connection, as collaborative efforts can help promote sustainability and longevity in the profession.

Conclusion

Burnout influences relationship dynamics, health outcomes, and how organizations function. Three characteristics are associated with burnout: emotional exhaustion, depersonalization, and reduced personal accomplishment. Burnout also manifests through specific symptoms, including mental health issues (e.g., anxiety, depression); self-doubt (e.g., cynicism about work contributions), and occupational hazards (e.g., medical errors). Helping professionals dominate burnout research, including different rehabilitation professionals. Vocational evaluators perform a variety of tasks in VR settings; however, their primary role is performing vocational assessments to determine suitable employment options. Certain aspects of the job may lead to an increase in burnout, such as monthly quotes or role ambiguity. Growth in studies specifically about workplace burnout led to research about areas of worklife. These areas reflect a variety of circumstances believed to increase burnout in the workplace, such as constant time pressures, limited social support, and values conflict. Conceptual and empirical studies have been conducted on burnout and its

relationship to areas of worklife in rehabilitation professionals; however, studies about evaluators remain scarce. Absence in this area would greatly benefit evaluators to determine best practices to use in the field, ways to implement wellness practices in the workplace and improve longevity in the profession.

References

Ahlers, M. (2010). Fundamentals of vocational assessment. *14th national forum on issues in vocational assessment, (*10-11*)*

Bakker, A.B., & Costa, P. (2014). Chronic job burnout and daily functioning: A theoretical analysis. *Burnout Research, 1*(3), 112-119. doi: 10.1016/j.burn.2014.04.003

Bakker, A. B., Demerouti, E., & Sanz-Vergel, A. I. (2014). Burnout and work engagement: The jd-r approach. *Annual Review of Organizational Psychology and Organizational Behavior*, *1*(1), 389-411.

Bridgeman, P. J., Bridgeman, M. B., & Barone, J. (2018). Burnout syndrome among healthcare professionals. *American Journal of Health-System Pharmacy, 75*(3), 147–152. https://doi.org/10.2146/ajhp170460

Bruschini, M., Carli, A., & Burla, F. (2018). Burnout and work-related stress in Italian rehabilitation professionals: A comparison of physiotherapists, speech therapists, and occupational therapists. *WORK, 59*(1), 121–129. https://doi.org/10.3233/WOR-172657

Chan, F., Bishop, M., Chronister, J., Lee, E. J., & Chiu, C. Y. (Eds.). (2017). *Certified rehabilitation counselor examination preparation: A concise guide to the rehabilitation counselor test.* (2nd Ed.). Springer Publishing Company, Inc.

Cherniss, C. (1980). Staff burnout. *Job Stress in the Human Services.* Sage Publications.

Dowd, L. (1993). Glossary of terminology for vocational evaluation, assessment, and work adjustment. *Materials Development Center Stout Vocational Rehabilitation Institute University of Wisconsin-Stout.*

Flansburg, J. D. (2011). Vocational evaluation: A primer. *Journal of Employment Counseling, 48*(3), 114-120.

Freudenberger, H. (1975). The staff burnout syndrome in alternative institutions. *Psychotherapy: Theory, Research & Practice, 12*(1), 73-82.http://dx.doi.org/10.1111/j.1540-4560.1974.tb00706.x

Genly, B. (2016). Safety and job burnout: Understanding complex contributing factors. *Professional Safety*, *61*(10), 45–49.

Gregory, S. T., & Menser, T. (2015). Burnout among primary care physicians: A test of the areas of worklife model. *Journal of Healthcare Management*, *60*(2), 133-148.

Hamilton, M., & Shumate, S. (2005). The role and function of certified vocational evaluation specialists. *Journal of Rehabilitation, 71*(1), 5-19.

Heinemann, L., & Heinemann, T. (2017). Burnout research: Emergence and scientific investigation of a contested diagnosis. *Sage Open,* 1-12.

Jimenez, P., & Dunkl, A. (2017). The buffering effect of workplace resources on the relationship between the areas of worklife and burnout. *Frontiers in Psychology*, *8*(12), 1-10.

Leiter, M. P. (2005). Perception of risk: an organizational model of occupational risk, burnout, and physical symptoms. *Anxiety, Stress & Coping*, *18*(2), 131-144.

Leiter, M. (2015). Key worklife areas contributing to health care burnout: Reflections on the ORCAB project. *British Journal of Health Psychology, 20*(2), 223-227.

Leiter, M. P., & Maslach, C. (1999). Six areas of worklife: A model of the organizational context of burnout. *Journal of Health and Human Services Administration*, *21*(4), 472-489.

Maslach, C. (1998). A multidimensional theory of burnout. In C. L. Cooper (Eds.), *Theories of organizational stress* (pp. 68-85). Oxford University Press.

Maslach, C., & Leiter, M. P. (2008). Early predictors of job burnout and engagement. *Journal of Applied Psychology, 93*(3), 498-512. doi:http://dx.doi.org.ncat.idm.oclc.org/10.1037/0021-9010.93.3.498

Maslach, C., & Leiter, M. P. (2017). New insights into burnout and health care: Strategies for improving civility and alleviating burnout. *Medical Teacher*, *39*(2), 160–163. https://doi.org/10.1080/0142159X.2016.1248918

O'Sullivan, D., & Bates, J. (2014). The relationship among personal and work experiences: Implications for rehabilitation counselor well-being and service provision. *Rehabilitation Research, Policy, and Education, 28*(1), 45-60.

Schaufeli, W., & Enzmann, D. (1998). *The burnout companion to study and practice: A critical analysis. CRC Press*

Sligar, S. R., & Betters, C. J. (2012). The state of state vocational evaluators: A national study. *Journal of Rehabilitation, 78*(4), 21-30.

Young, S. (2015). Understanding substance abuse counselor turnover due to burnout: A theoretical perspective. *Journal of Human Behavior in the Social Environment, 25*(6), 675–686. https://doi.org/10.1080/10911359.2015.1013658

Zanskas, S., & Strohmer, D. C. (2011). The state-federal rehabilitation counselor work environment. *Journal of Applied Rehabilitation Counseling, 42*(3), 3-11.

About the Author

Shakeerrah D. Lawrence, PhD, LCMHC, PVE, earned a Bachelor of Arts degree in Psychology in 2008 from North Carolina A&T State University, she continued her education at East Carolina University, which led to a dual master's degree in Rehabilitation Counseling and Vocational Evaluation in 2010. She has worked for over five years as a vocational assessment specialist for a community rehabilitation program, vocational evaluator for state government, and vocational expert with the Social Security Administration. During her doctoral studies, she also worked as a licensed clinical mental health counselor and graduate research assistant. She has been a member of VECAP since 2017 and began volunteering as a member of the Communications Committee since June 2020.