

Decreasing Healthcare Burnout: Utilizing Complementary Therapies

Hannah R. Collins

Margaret H. Rollins School of Nursing

N201: Nursing Care of Special Populations

Dr. V. Baich

November 4, 2024

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In various studies, burnout in healthcare professionals, especially nurses have been modeled. The effect of professional burnout leads to physical and mental fatigue ultimately resulting in resignation from professional positions. It is estimated that by the year of 2030, the U.S. will have a nursing staff shortfall of over half a million nurses (Moore, et al., 2024). In significant studies, complementary therapies such as yoga has been proven beneficial at decreasing nursing and healthcare burn out, possibly becoming a solution to the increasing problem.

Professional burnout has had a large impact on physical health of nurses for many years and has worsened since the devastating pandemic of COVID-19. Nurses have been found to be more mentally fatigued, exhausted, and overweight than the patients they are caring for. In addition to physical health impacts, the mental impact aspect is detrimental for healthcare workers. Nurses have been found to be at an increased risk of suicide compared to professional in non-nursing careers (Ford, 2024). How can nurses provide care if they need care themselves?

In a source from Yasin, Alomari, et al. (2024), it has been noted that higher levels of work-related stress have directly stemmed from anxiety related to COVID-19. Furthermore, these individuals reported an increased tendency towards leaving their job position, and since the pandemic burnout is markedly increased. From February 2020 to February 2022, 23 studies with 17,196 participants were analyzed by the researchers who composed the article, *The impact of COVID-19 on nurses' job satisfaction: a systematic review and meta-analysis*. Job satisfaction was analyzed for a correlation between burnout and mental effects during the pandemic period. A critical factor in performance, productivity, and retention during COVID-19 was job satisfaction. Six of the studies indicated that job satisfaction of nurses was 69.9%. Another 3 of

the studies resulted that the participants job satisfaction was greater than 70%. Three other studies reported job satisfaction of 24.2% to 25%. The remaining 11 studies had no significant reported data of job satisfaction levels. Personal factors influencing job satisfaction included gender, salary earnings, and good health. Work environment factors such as quality of environment, availability of resources, workload and staffing additionally played a role in job satisfaction. The toll of the pandemic affected all the previously listed factors directly resulted in undesired consequences including workplace violence, bullying, and burnout, (Yasin, et al., 2024).

Yet another meta-analysis was conducted analyzing to mental impacts following COVID-19 in which 62 studies were included totaling 52,270 nursing professionals. In January of 2023, the meta-analysis was conducted from research of observational studies of mental health symptoms on nursing professionals related to COVID-19. The main goal of this analysis was to highlight the need for efforts surrounding implementation of promotional and prevention actions to improve the quality of life for nurses by the healthcare organizations of employment, managers, and leaders. From the study the overall presence of experiencing one of the eight mental health characteristics (anxiety, depression, stress, burnout, sleep disruption, frustration, feelings of being underappreciated, suicidal thoughts and attempts) was 56.3%. The most prevalent mental health symptoms reported by the respondents from the study was burnout and fear. The effect of these symptoms translates into personal effects which can increase rates of absence at work related to a mental health condition. The article from de Vargus defines burnout as a disabling disease in which serious consequences such as suicidal ideations are a result. It is no surprise that mental health status has a direct correlation with quality of sleep. The respondents reported that during COVID-19, more than half of which has sleep-related problems

associated with anxiety, depression, stress, and the presence of chronic disease. This idea has been found to relate directly to work environment and overload during the height of the pandemic and the development of chronic insomnia. The researchers are observing that mental health symptoms are outlasting the epidemiology situations of epidemics and pandemics such as COVID-19. Post-traumatic stress disorder is the most common lasting effect, affecting predominantly women who worked frontline during the pandemic. PTSD and burnout together can cause great mental health impairment leading to suicidal thoughts (de Vargus, et al., 2024).

Looking at burnout statistics following the devastating pandemic, American Nurses Association conducted a June-July 2022 workplace study as part of a COVID-19 survey series. The study surveyed 11,442 U.S. healthcare respondents. Results within a 2-week period from the workplace survey are as follows: 68% reported feeling stressed, 59% reported feeling exhausted, 45% were anxious, 26% felt grateful, 23% reported feelings of happiness, and 20% felt supported. Along with the survey investigating emotions regarding the workplace, workplace support was analyzed as well: 36% of respondents reported weekly occurrences of being asked to cover additional shifts, 21% reporting a weekly occurrence of working beyond required shift to provide adequate care to patients, additionally, 27% reported having necessary RN staff coverage for unit 25-49% of the time, and 29% for 50-75% of the time. During a related workplace study from ANA, factors that would increase workplace satisfaction were surveyed. 68% reported increased salary, wages, or bonuses would increase job satisfaction with increased number of staff coming in at the second highest response with 59% of respondents (COVID-19 survey series: 2022 workplace survey, 2022).

Burnout for nursing professionals causes serious concerns, not only for their mental wellbeing, but for patient safety as well. It has been found that burnout carries the negative

effects of reduced job performance including poor quality of care, poor safety relationship, adverse events, negative patient experiences, medication errors, infections, patient falls, and intention to leave job positions. Thirty studies in a meta-analysis from Dall’Ora (2020) found association between high workload and burnout. Workload and characteristics of jobs that contribute to the workload are staffing levels, which was the most frequent factor in relation to burnout. The higher the psychological demands, the increased likelihood burnout would be experienced. Role conflict is a possible contributing factor to the increased psychological demands. Role confusion in the article is defined as a situation in which contradictory, competing, or incompatible expectations are placed on an individual by two or more roles held at that same time. Role confusion is huge during and following the pandemic of 2019 as many professionals were leaving their jobs and forcing others to pick up the slack (Dall’Ora, et al., 2020). Potential complications related to professional burnout are severe for staff and patients, and resolution of this burnout is needed.

A proposed idea to aid in the elimination of mental health concerns and burnout in nursing is the practice of yoga. It has been mentioned previously that manifestations of burnout lead to increased stress, anxiety, depression, obesity, insomnia, and alcohol or drug use. These negative impacts of burnout also lead to economic losses related to increased absence from work, poor staffing retention, and higher turnover rates. A systematic review of yoga interventions from Ciezar-Andersen, Hayden, and King-Shier included 1778 participants in 25 different studies. Intervention took place over a one week to six-month period with sessions ranging from 20 minutes to three-hour sessions. Typically, sessions occurred one to two times a week for the designated amount of time. The sessions utilized different types of yoga, or some did not include the style utilized in their study data. The analysis examined health related outcomes including

mental and physical outcomes. Mental health outcomes following the interventions are as follows: reduction of stress in 15/25 studies, reduction of anxiety in eight/25 studies, improvement in overall wellbeing in eight/25 studies, and increased compassion in four/25 studies. As far as physical outcomes, the studies report decreased musculoskeletal pain, including lower back pain in three/25 studies. Headache, neck pain, and wrist discomfort reduction was reported from three/25 studies. Lastly, cardiovascular improvement was also examined in the studies. In four/25 studies, individuals experienced a decrease in blood pressure. Yoga interventions are relatively low cost which is extremely beneficial and a possible motivation for stress and burnout management for the growing risk of mental and physical disorders in healthcare workers (Ciezar-Andersen, et al., 2021).

Building on the idea of yoga as a complementary therapy intervention for decreasing burnout, a randomized controlled trial consisting of 101 participants who cared for patients with COVID-19 was conducted. The trial had an experimental group of 51 participants and a control group consisting of 50 participants. In the trial the participants completed eight sessions of laughter yoga for four weeks, twice a week. Laughter yoga is a non-pharmacological practice that consists of a set of exercises combining unprovoked laughter with yoga breathing techniques. Laughter yoga includes stretching-relaxation techniques, laughter, and deep breathing exercise. The sessions begin with light warm-up stretching, playing music, and clapping. These techniques allow for laughter and development of childish feelings. The breathing exercise warm-up segment prepares the lungs for laughing. After warm-up, the remainder of the session includes childish games and laughter exercises. Laughter yoga has been reported to physiologically increase breathing in the body, relax smooth muscles, strength mental function by reducing level of stress hormones; reduce burnout, depression, and anxiety; improve

quality of sleep, provide psychological well-being by increasing interpersonal relationships and social interaction. Laughter yoga has also been found to: stimulate the immune system, increase endorphin levels, reduce production of stress hormones (such as cortisol and epinephrine), accelerate the circulatory system, as well as possess vasodilation effects in the veins. Results from the *Perceived Stress Scale* utilized in the study displayed that perceived stress levels in nurses in the experimental group (EG) and control group (CG) were found to be similar in the pretest. In the post-test data, the perceived stress levels of the EG were significantly decreased, and there was no significant change in the perceived stress levels of the CG. Members of the EG reported levels of emotional exhaustion and depersonalization of the nurses had decreased with laughter yoga, furthermore, personal success levels increased, and overall burnout levels decreased (Celik & Kilinc, 2022).

The burnout of healthcare workers has been modeled in several meta-analyses and systematic reviews above. The burnout includes mental and physical fatigue that puts patients at risk and increases medical errors, but also impacts the professional's personal life and wellbeing. The complementary therapy of yoga intervention has been trialed in several studies and has been proven effective in decreasing burnout. Therefore, yoga intervention may become a future solution to the universally experienced problem faced by healthcare workers, burnout.

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