

## BURNOUT AND ORGANIZATIONAL EFFICIENCY: IMPLICATIONS FOR HUMAN RESOURCE MANAGEMENT

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**Abstract:** *In the context of contemporary organizations, characterized by dynamism, globalization and increased pressure for performance, employee well-being has become a central element of organizational efficiency and sustainability. Burnout, defined as a syndrome resulting from chronic occupational stress, manifests itself through emotional exhaustion, depersonalization and a reduced sense of professional efficacy, with significant consequences for individuals and organizations. Specialized studies highlight the fact that this phenomenon negatively affects the motivation, productivity, professional involvement and psychophysical health of employees, contributing to increased absenteeism and staff turnover. In this context, human resource management plays a strategic role in preventing and managing burnout by implementing appropriate organizational policies, such as optimizing work tasks, developing supportive leadership and promoting work-life balance. Also, the periodic assessment of psychosocial risks and the creation of a positive organizational climate contribute to reducing the impact of occupational stress. Therefore, the integrated approach to burnout is an essential condition for maintaining organizational performance and employee health in the current work environment.*

**Keywords:** *burnout, organizational efficiency, occupational stress, employee well-being, job demands–resources model, organizational performance, workplace mental health, job satisfaction.*

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### 1. Introduction

In the context of accelerated transformations of the contemporary organizational environment, marked by globalization, digitalization and intensified competition, human capital is becoming a strategic determinant of organizational performance. Organizations are subject to increasing pressures for adaptability, innovation and productivity, which often leads to increased professional demands on employees. In this context, the well-being of human resources is no longer just a secondary concern, but a fundamental condition for organizational sustainability and efficiency (WHO, 2019; Bakker & Demerouti, 2017).

An increasingly frequently investigated phenomenon in the specialized literature is burnout, initially conceptualized by Herbert Freudenberger and later developed by Christina Maslach, as a form of professional exhaustion characterized by three main dimensions: emotional exhaustion, depersonalization and reduced personal accomplishment (Freudenberger, 1974; Maslach & Jackson, 1981). Burnout occurs in response to chronic stress at work and has significant implications at both the individual and organizational levels (Maslach & Leiter, 2016).

At the individual level, burnout manifests itself through decreased motivation, deterioration of mental and physical health, and diminished job satisfaction (Bianchi et al., 2015). At the organizational level, the effects include reduced productivity, increased absenteeism and staff turnover, and impaired organizational climate (Shanafelt et al., 2015; Gallup, 2020). Thus, burnout becomes a critical factor that influences organizational efficiency and overall performance.

From the perspective of human resource management, addressing burnout involves the development of integrated prevention and intervention strategies, which include work-life balance policies, psychological support programs, empathetic leadership, and work design optimization (Bakker & Demerouti, 2017; Kossek et al., 2012). In this sense, human resource management takes on a strategic role in promoting organizational health and creating a sustainable work environment.

The purpose of this article is to analyze the relationship between burnout and organizational effectiveness, highlighting the implications for human resource management practices. The paper also aims to identify the mechanisms through which burnout affects organizational performance and to provide directions for action to reduce it within modern organizations.

## 2. Literature Review

The concept of burnout emerged and consolidated as a result of independent research conducted in different occupational contexts, but converging in highlighting the negative effects of chronic stress on individuals in the work environment. The specialized literature reflects a gradual conceptual evolution, characterized by the diversification of definitions and measurement instruments, which highlights the complex and multidimensional nature of the phenomenon (Maslach & Schaufeli, 2001; Schaufeli et al., 2009).

From a semantic perspective, the term “burnout” designates the progressive depletion of the individual’s physical and mental resources, as a result of prolonged exposure to high professional demands. This interpretation is congruent with the general meaning of exhaustion, which implies the diminution of functional capacity following a sustained and excessive effort.

The first conceptualizations of burnout are attributed to Herbert Freudenberger, who described the phenomenon as a state of profound exhaustion, accompanied by cynicism towards work and a decreased sense of personal efficacy (Freudenberger, 1974). Later, Christina Maslach operationalized the concept, defining it as a psychological syndrome composed of three fundamental dimensions: emotional exhaustion, depersonalization, and reduced personal accomplishment, especially in professions that involve intense interaction with other people (Maslach & Jackson, 1981).

In this context, constant interaction with work beneficiaries (e.g., clients, patients, or students) is identified as a major risk factor. Repeated exposure to ambiguous or difficult-to-solve situations contributes to an increase in the level of perceived stress and, over time, to the onset of burnout. Initially associated with human service professions, the concept was later extended to all occupations, reflecting the universality of psychosocial risks at work (Maslach, Schaufeli & Leiter, 2001).

A significant contribution to the systematization of the specialized literature belongs to Wilmar Schaufeli and collaborators, who synthesized the evolution of the concept and highlighted the transition from a restrictive occupational perspective to an organizational and transversal one. They argue that burnout should be understood as a generalized occupational phenomenon, determined by the imbalance between job demands and resources (Schaufeli et al., 2009; Bakker & Demerouti, 2017).

Regarding the measurement of burnout, the most widely used method is self-assessment using standardized instruments. The best-known instrument is the Maslach Burnout

Inventory, which assesses the three dimensions of the syndrome: emotional exhaustion, depersonalization, and reduced personal accomplishment (Maslach & Jackson, 1981). Although this instrument is widely used due to its psychometric validity, the literature highlights limitations related to the subjectivity of responses and cross-cultural variations in the interpretation of items (Schaufeli et al., 2009).

Recent empirical research uses both quantitative and qualitative or mixed methodologies, reflecting the diversity of approaches to studying the phenomenon. Ahola and colleagues point out the existence of significant variations in the operationalization of burnout, which affects the comparability of results across studies and different cultural contexts (Ahola et al., 2010).

At the European level, comparative studies show an uneven distribution of research on burnout, with cross-sectoral investigations identified in countries such as Germany, Finland, the Netherlands or Belgium. However, in many other contexts, research is predominantly sectoral and focuses on associated constructs, such as occupational stress or job satisfaction (Eurofound, 2018).

The extension of the concept beyond human service professions to creative, technical or organizational fields highlights its transversal character. Thus, burnout is increasingly conceptualized as a result of the interaction between individual, organizational, and cultural factors, rather than as a phenomenon specific to certain professions (Bakker & Demerouti, 2017).

The conceptual evolution of burnout reflects the shift from a profession-specific approach to an integrative one that recognizes the complexity of the phenomenon and its implications for organizational effectiveness. The diversity of definitions and measurement methods highlights the need for conceptual and methodological standardization in order to develop effective interventions in human resource management (Maslach & Leiter, 2016).

### 3. Methodology

This study adopts a theoretical-conceptual analysis approach, aiming to explore the relationship between burnout and organizational effectiveness, as well as highlighting the implications for human resource management. The methodology is based on a systematic and narrative review of the specialized literature in the field of organizational psychology, human resource management and occupational health. The research has a qualitative, non-empirical design, based on a critical and synthetic analysis of relevant theoretical and empirical studies. This approach is appropriate for clarifying concepts, identifying dominant theoretical models and highlighting current trends in the specialized literature.

### 4. Results and Discussion

#### *Tools used to assess burnout*

The assessment of burnout has been a constant concern in scientific research, leading to the development of a wide range of measurement tools. These tools reflect the diversity of burnout conceptualizations, but have as a common element the central idea of burnout, present since the early works of Herbert Freudenberger (Freudenberger, 1974).

Over time, different scales and inventories have been developed to capture the dimensions of the phenomenon, being used both in academic research and in organizational practice. A synthesis of these tools was also carried out by specialized institutions (Eurofound, 2018), highlighting the importance of standardizing the assessment of burnout.

The most widely used instrument internationally is the Maslach Burnout Inventory (MBI), developed by Christina Maslach and Susan Jackson in 1981. This instrument measures the three fundamental dimensions of burnout: emotional exhaustion, depersonalization, and diminished personal accomplishment. Its popularity is due to its validity and broad applicability across various professional fields. However, its proprietary nature entails certain costs, which may limit its accessibility for early-career researchers.

An important alternative is the Oldenburg Burnout Inventory (OLBI), developed by Evangelia Demerouti and Arnold Bakker. This instrument conceptualizes burnout in two main dimensions: exhaustion and disengagement from work, and is directly correlated with the job demands–resources (JD-R) model. The OLBI is appreciated for its flexibility and for including both positively and negatively worded items. Another relevant instrument is the Copenhagen Burnout Inventory (CBI), developed by Tage Kristensen and his collaborators. It proposes an approach focused exclusively on the dimension of exhaustion, considered the core of the phenomenon, and distinguishes between personal, professional and relationship-related exhaustion. The CBI is frequently used in the public sector and in international comparative studies.

In another approach, the Shirom-Melamed Burnout Measure (SMBM), developed by Arie Shirom and Samuel Melamed, defines burnout in terms of three components: physical exhaustion, cognitive fatigue, and emotional exhaustion. This perspective emphasizes the energetic dimension of burnout and has been used mainly in research in Northern Europe.

More recently, Gordon Parker and colleagues developed the Sydney Burnout Measure (SBM), a complex instrument that extends the analysis of burnout by including additional dimensions, such as cognitive impairment, loss of empathy, social withdrawal, and decreased professional performance, along with symptoms associated with anxiety and depression.

In conclusion, the diversity of burnout assessment instruments reflects the plurality of theoretical perspectives on the phenomenon. The choice of an appropriate instrument depends on the purpose of the research, the organizational context, and the dimensions targeted, being essential for obtaining valid and relevant results in the analysis of professional burnout.

### ***Causes and determinants of burnout***

Burnout syndrome is a complex state of physical, emotional and cognitive exhaustion, characterized by impaired affective functioning and cognitive processes, depersonalization, cynicism, detachment and diminished sense of personal efficacy and accomplishment. Affected individuals experience a significant decrease in motivation and energy levels (Maslach & Leiter, 2016).

The World Health Organization recognizes burnout as an occupational phenomenon associated with chronic workplace stress that has not been effectively managed. It is correlated with increased risks for various conditions, including hypertension, cardiovascular disorders (such as atrial flutter), depression and suicidal behaviors (WHO, 2019; Salvagioni et al., 2017).

Initially, the concept of burnout was predominantly associated with professions in fields with high exposure to emotional stress (e.g., medical personnel, police officers, firefighters), but recent research indicates an extension of the phenomenon to multiple occupational categories and even in non-professional contexts, including among children and their caregivers. The specialized literature highlights a higher prevalence of burnout among physicians compared to other professional categories, even after controlling for variables such as education level and workload. The consequences include increased staff turnover, decreased quality of medical care, deterioration of interpersonal relationships, and an increased risk of problematic alcohol consumption (Shanafelt et al., 2015).

Burnout is a multifactorial phenomenon, determined by the interaction between individual characteristics, interpersonal relationships and the organizational context. There is a mistaken tendency to attribute responsibility exclusively to the individual, but many determining factors are external and often beyond personal control (Maslach & Leiter, 2016).

Three main types of burnout are described in the literature:

1. **Individual burnout** – associated with traits such as perfectionism, neuroticism, and a persistent negative self-talk, which leads to unrealistically high standards or a constant perception of inadequacy (Hill & Curran, 2016).
2. **Interpersonal burnout** – caused by conflicting or dysfunctional relationships at work or in the family environment, including interactions with hostile superiors or colleagues (Leiter & Maslach, 2009).
3. **Organizational burnout** – the result of deficient organizational structures, excessive demands, and unrealistic deadlines, which lead to overwork and professional insecurity (Bakker & Demerouti, 2017).

### ***Occupational factors that trigger burnout***

Factors specific to the professional environment include:

- role and responsibilities ambiguity;
- time pressures and unrealistic deadlines;
- excessive workload and difficult tasks to manage;
- lack of effective time management skills or practices (including the negative effects of multitasking on productivity);
- lack of managerial support and poor communication;
- rude or hostile behaviors of colleagues and superiors;
- perception of organizational inequity (e.g., lack of recognition of merit);
- excessive collaboration and loss of control over tasks;
- blurring of boundaries between professional and personal life (Kossek et al., 2012; Gallup, 2020).

Overall, burnout should be understood as the result of a dynamic interaction between the individual and his or her environment, requiring interventions at both the personal and organizational levels.

### ***Burnout symptoms***

Burnout syndrome manifests itself through a set of multidimensional symptoms, in which the classic triad – emotional exhaustion, detachment (or cynicism) and decreased personal efficacy – constitutes the clinical core, although these elements are not always easily recognized through self-assessment (Maslach & Leiter, 2016).

### ***Clinical and psychological manifestations***

Mental and physical exhaustion is one of the most common manifestations. It is characterized by persistent fatigue, lack of energy upon waking, and difficulty initiating and maintaining daily activities. The literature indicates a significant overlap between the symptoms of burnout and those of depression, with studies suggesting that approximately 20-50% of people with burnout present with significant depressive symptoms (Bianchi et al., 2015). In chronic forms, exhaustion can become somatized, manifesting itself through headaches, gastrointestinal disorders, or increased susceptibility to infections (Salvagioni et al., 2017).

The dimension of detachment and cynicism involves a persistent negative attitude towards work and interpersonal relationships. This can translate into increased pessimism, distrust of colleagues, and a tendency toward social isolation. According to Gallup studies, employees who report high levels of burnout are 2.6 times more likely to exhibit cynicism and disengagement from their professional activities (Gallup, 2020).

Decreased professional or academic performance is a direct consequence of impairment of executive functions, especially in the prefrontal cortex, responsible for planning, decision-making and attention control. Chronic stress causes dysfunction in these circuits, leading to frequent errors, reduced productivity and difficulty solving complex tasks.

### ***Cognitive and motivational disorders***

Burnout is associated with concentration deficits, decreased working memory, and organizational difficulties. Studies show that up to 35% of affected employees report significant cognitive problems, including frequent forgetfulness and the inability to maintain attention for long periods of time (Deligkaris et al., 2014).

Lack of motivation and reduced involvement are common, being correlated with a decreased sense of self-efficacy. In parallel, the phenomenon of “obsessive work” may occur, characterized by the prolongation of professional activities outside the schedule, to the detriment of psychophysiological recovery. This tendency is associated with an increased risk of worsening symptoms and the onset of chronic exhaustion (Schaufeli et al., 2009).

### ***Emotional and behavioral disorders***

From an affective point of view, burnout is manifested by irritability, frustration, persistent feelings of devaluation and pessimism. Unlike transient emotional reactions, these states become dominant and generalized. Approximately 60% of people with burnout report increased levels of irritability and emotional instability (Ahola et al., 2010).

Interpersonal problems are common, including increased conflict, decreased tolerance and a tendency to social avoidance. These difficulties affect both the professional environment and family relationships.

Lifestyle changes are also observed, including neglecting personal care and adopting unhealthy behaviors. Studies indicate that people with burnout have a 1.5-2 times higher risk of problematic use of alcohol and other substances (Salvagioni et al., 2017).

### ***Sleep and physical health disorders***

Sleep disorders, such as insomnia or sleep fragmentation, are reported by over 40% of individuals affected by burnout (Eurofound, 2018). They contribute to worsening exhaustion and impaired cognitive functioning.

In the long term, chronic stress associated with burnout can lead to significant somatic conditions, including cardiovascular disease, diabetes, digestive disorders and obesity. Meta-analyses suggest that burnout increases the risk of cardiovascular disease by approximately 21% (Kivimaki et al., 2012).

### ***Decreased overall satisfaction***

Another relevant aspect is the decrease in overall satisfaction with life and work. This manifests itself in feelings of uselessness, lack of personal accomplishment, and a perception of stagnation. According to research, employees with burnout are twice as likely to report severe job dissatisfaction compared to those without symptoms (Maslach & Leiter, 2016).

### ***Organizational Consequences***

Burnout syndrome has significant consequences at the organizational level, affecting performance, human resource stability and the quality of services provided. The specialized literature highlights the fact that burnout is not just an individual problem, but a systemic risk for the efficient functioning of organizations (Maslach & Leiter, 2016).

### ***Impact on organizational performance***

Burnout is associated with decreased productivity and work efficiency. Affected employees exhibit reduced levels of engagement and concentration, which leads to increased errors and decreased quality of results. Studies show that employees with high levels of burnout are up to 63% more likely to take frequent sick leave and 23% more likely to report performance declines (Gallup, 2020).

Also, impairment of executive functions, correlated with dysfunctions in the prefrontal cortex, contributes to difficulties in decision-making and solving complex problems, with a direct impact on organizational results.

### ***Employee turnover and associated costs***

One of the most important effects of burnout is increased employee turnover. Burnout employees are 2.6 times more likely to look for a new job (Gallup, 2020). This dynamic generates significant additional costs for organizations, including the costs of recruiting, selecting, and training new employees.

In addition, absenteeism and presenteeism (presence at work under low-efficiency conditions) contribute to considerable economic losses. Estimates indicate that presenteeism can have an even greater financial impact than absenteeism, by reducing overall productivity (Hemp, 2004).

### ***Deterioration of organizational climate***

Burnout negatively influences interpersonal relationships and organizational climate. Affected employees frequently display cynicism, irritability, and a tendency to isolate themselves, which can generate conflicts and reduce team cohesion. These dynamics affect collaboration and communication, essential elements for the efficient functioning of organizations.

A deteriorated organizational climate is associated with reduced levels of job satisfaction and organizational commitment, which increases the risk of collective disengagement.

### ***Decreased service quality and customer satisfaction***

Burnout has a direct impact on the quality of services provided, especially in areas such as health, education or social services. In the case of health professionals, for example, burnout is associated with increased medical errors and decreased patient satisfaction (Shanafelt et al., 2015).

This deterioration in service quality can affect the organization's reputation and lead to a loss of trust from beneficiaries or customers.

### ***Organizational and economic risks***

In the long term, burnout contributes to increased organizational costs by:

- reducing overall performance;
- increasing medical costs and health benefits;
- decreasing innovation and adaptability;
- loss of human and intellectual capital.

Organizations with high levels of burnout among employees are less resilient and more vulnerable to changes in the economic environment (Bakker & Demerouti, 2017).

### ***The strategic role of human resource management in managing burnout***

Managing organizational burnout represents a major strategic challenge for human resource management (HRM), with direct implications for the performance, sustainability and competitiveness of the organization. Contemporary approaches emphasize the need for systemic interventions, focused not only on the individual, but also on the organizational environment and managerial practices.

HRM has an essential role in preventing and reducing burnout by developing organizational policies that balance job demands with available resources. According to the Job Demands–Resources model, burnout occurs when professional demands exceed employees' ability to manage them in the absence of adequate resources (Bakker & Demerouti, 2017). In this context, HRM must act as a mediator between organizational objectives and employee well-being.

### ***Job Design and Redesign***

One of the main implications of HRM is optimizing job design. This involves clarifying roles, reducing ambiguity, and adjusting workload to employees' actual capabilities. Studies show that role ambiguity and overload are significant predictors of burnout (Maslach & Leiter, 2016).

Job redesign can include introducing decision-making autonomy, making tasks more flexible, and diversifying activities, which helps increase motivation and reduce burnout.

### ***Leadership Development and Managerial Support***

The quality of leadership is a determining factor in preventing burnout. Managers who provide emotional and professional support significantly reduce the risk of burnout among employees. According to Gallup data, employees who feel supported by their superiors are up to 70% less likely to experience burnout (Gallup, 2020).

HRM must implement training programs for leaders, focused on developing communication skills, empathy, stress management, and performance recognition.

### ***Promoting work-life balance***

Another key area of intervention is facilitating work-life balance. Flexible work schedules, teleworking, and limiting workload overload all contribute to reducing chronic stress. Research indicates that a lack of work-life balance is a major predictor of burnout (Kossek et al., 2012).

HRM has a responsibility to create an organizational culture that encourages disconnection and psychological recovery.

### ***Fair Evaluation and Reward Systems***

Perceptions of organizational inequity are associated with increased levels of cynicism and disengagement. Therefore, HRM must ensure transparency and fairness in performance evaluation, promotion, and reward processes. Lack of recognition is identified as a major risk factor for burnout (Maslach & Leiter, 2016).

Implementing constructive feedback and recognition systems helps strengthen organizational commitment.

### ***Occupational health interventions***

HRM should integrate occupational health programs that include:

- periodic assessment of stress and burnout levels;
- psychological counseling services;
- resilience and coping development programs;
- stress management training.

These interventions contribute to reducing absenteeism and improving the overall health of employees (Salvagioni et al., 2017).

### ***Monitoring and using organizational data***

A modern approach involves using HR analytics to identify burnout risks early. Indicators such as staff turnover, absenteeism, or decreased performance can signal systemic problems. HR can use this data to develop targeted interventions and evaluate the effectiveness of implemented policies.

### ***Organizational Culture and Long-Term Prevention***

Ultimately, HRM plays a central role in shaping organizational culture. Promoting a climate based on trust, respect, and collaboration significantly reduces the risk of burnout. Organizations that prioritize employee well-being demonstrate higher levels of performance and retention (Bakker & Demerouti, 2017).

## **5. Conclusions**

The analysis of burnout in relation to organizational effectiveness highlights that this phenomenon represents a systemic problem, with a direct impact on individual performance, team dynamics and overall organizational results. Burnout should not be understood exclusively as a consequence of individual vulnerabilities, but as the result of the complex interaction between occupational demands, available resources and managerial practices.

From the perspective of organizational effectiveness, burnout contributes to decreased productivity, increased errors, diminished professional commitment and increased staff turnover. These effects generate significant direct and indirect costs, affecting the competitiveness and sustainability of organizations in the long term.

The results of the specialized literature emphasize that the prevention and management of burnout cannot be effectively achieved through exclusively individual interventions, but requires an integrated approach, oriented towards the organizational structure and culture. In this sense, human resource management has an essential role in designing balanced work systems, in developing supportive leadership and in implementing coherent occupational health policies. At the same time, the balance between job requirements and organizational resources, role clarity, performance recognition and support for work-life balance emerge as determining factors in reducing the risk of burnout and increasing organizational efficiency. Organizations that invest in employee well-being demonstrate higher levels of involvement, retention and sustainable performance.

In conclusion, burnout must be addressed as a critical indicator of organizational dysfunction, and human resource management has a strategic responsibility to transform its prevention into an organizational priority. A proactive approach, based on scientific evidence and systemic interventions, can significantly contribute to increasing organizational efficiency and developing a healthy and sustainable work environment.

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