



Stress

# The Burnout Crisis

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# Beyond Burned Out

by **Jennifer Moss**

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Peter Greenwood/Folio Art

**When the Covid-19 pandemic began, I felt** as if I were in one of those disaster movies, standing in front of a rapidly spreading fire as an entire city was about to be engulfed in flames. And despite feeling that a massive disruption was imminent, I could only watch in shock.

I've studied burnout and worked with organizations to address it for years, but nothing would inform my understanding of the topic more than living through 2020. For some time I'd been sounding the alarm: "Burnout is getting worse. People are sick!" Then we were all suddenly thrust into unknown territory: By April 2.6 billion people had gone into lockdown, and places of employment for 81% of the global workforce were fully or partially closed. A huge percentage of knowledge workers began doing

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their jobs from home — many collaborating on Zoom, whose daily active users skyrocketed from 10 million to 200 million. This sudden shift did what little else had been able to accomplish before: expose how thinly stretched and worn down we all were — and had been for a while. And it also made our burnout much, much worse.

### **Just How Bad Is Burnout?**

Although the concept of occupational burnout originated in the 1970s, the medical community has long argued about how to define it. In 2019 the World Health Organization finally included burnout in its International Classification of Diseases, describing it as “a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed.” This language acknowledged that burnout is more than just an employee problem; it’s an *organizational* problem that requires an organizational solution.

When you analyze the real causes of burnout, it becomes clear that almost everyone has been attacking the problem from the wrong angle. According to Christina Maslach of the University of California, Berkeley, Susan E. Jackson of Rutgers, and Michael Leiter of Deakin University, burnout has six main causes:

1. Unsustainable workload
2. Perceived lack of control
3. Insufficient rewards for effort
4. Lack of a supportive community
5. Lack of fairness
6. Mismatched values and skills

While these are all organizational issues, we still prescribe *self-care* as the cure for burnout. We’ve put the burden of solving the problem squarely on the shoulders of individual employees. “Let’s just recommend more yoga, wellness tech, meditation apps, and subsidized gym memberships — that’ll fix it,” we say. But those are tools for improving well-being. When it comes

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to preventing burnout specifically, they won't be effective. We desperately need upstream interventions, not downstream tactics. In this article I'll describe tactics companies can use to address some of the organizational roots of burnout.

Teaming up together, Leiter, Maslach, and David Whiteside, the director of insights and research at YMCA WorkWell, and I created a [survey](#) that analyzes the state of burnout and well-being during Covid-19. We combined several evidence-based scales, including the [Maslach Burnout Inventory General Survey \(MBI-GS\)](#), a psychological assessment of occupational burnout, and the [Areas of Worklife Survey \(AWS\)](#), which assesses employees' perceptions of work-setting qualities that affect whether they experience engagement or burnout.

With support from Harvard Business Review, we gathered feedback from more than 1,500 respondents in 46 countries, in various sectors, roles, and seniority levels, in the fall of 2020. Sixty-seven percent of respondents worked at or above a supervisor level.

What did we learn, in a nutshell? Burnout is a global problem. Some stats:

- 89% of respondents said their work life was getting worse.
- 85% said their well-being had declined.
- 56% said their job demands had increased.
- 62% of the people who were struggling to manage their workloads had experienced burnout “often” or “extremely often” in the previous three months.
- 57% of employees felt that the pandemic had a “large effect on” or “completely dominated” their work.
- 55% of all respondents didn't feel that they had been able to balance their home and work life — with 53% specifically citing homeschooling.
- 25% felt unable to maintain a strong connection with family, 39% with colleagues, and 50% with friends.

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- Only 21% rated their well-being as “good,” and a mere 2% rated it as “excellent.”

The 1,500 people in our survey not only much more squarely fit the burnout profile than did the nearly 50,000 respondents who had taken the MBI-GS before the pandemic, they also scored very high on exhaustion and cynicism — two predictors of burnout, according to the MBI-GS. “These survey responses make it clear that a lot of people are having serious disruptions in their relationship with work,” Leiter notes. “It’s not surprising that people are more exhausted — people are working hard to keep their work and personal lives afloat. But the rise in cynicism is even more troubling. Cynicism reflects a lack of trust in the world. So many people feel let down by their government’s poor preparation for the pandemic, as well as by the injustices in work and well-being that the pandemic has highlighted.”

Millennials have the highest levels of burnout, we found. Much of this is due to having less autonomy at work, lower seniority, and greater financial stressors and feelings of loneliness. The last was the biggest factor leading to burnout, according to our research. As one Millennial put it: “The pandemic has had a tremendous impact on my well-being — I’ve had mental health challenges, and I’ve hit major roadblocks with that. My physical health has changed because I can’t exercise like I used to. It’s affected me economically. I feel as though my career has been set back yet again.”

### **How Did It Get This Bad?**

So, yes, burnout is severe today, but the seeds were planted before Covid-19 hit — even then, many workers were already experiencing high levels of it. The pandemic was simply an accelerant.

Consider teachers. Pre-pandemic, they endured long hours and chronic underpay. Nurses and physicians, who have seen some of the most extreme cases of burnout, worked notoriously long shifts — often 16 hours

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or more, despite [research](#) showing that patient errors increase threefold when nurses (for example) work shifts lasting 12.5 hours or longer.

In other sectors — such as technology — overwork is celebrated, even though [research](#) clearly shows that putting in more than 55 hours a week does nothing to improve job performance. For example, in 2018 Elon Musk tweeted the following in response to a [Wall Street Journal article](#) describing Tesla’s culture of long hours: “There are way easier places to work, but nobody ever changed the world on 40 hours a week.” What number of hours is needed to change the world? “About 80 sustained,” [Musk tweeted](#).

Former [employees of Uber](#) shared in 2017 that working until 1 or 2 AM was typical at the company, and a 2015 [New York Times article about Amazon](#) described “marathon conference calls on Easter Sunday and Thanksgiving, criticism from bosses for spotty Internet access while on vacation, and hours spent working at home most nights or weekends.”

It didn’t help matters that during the pandemic we misdiagnosed the resulting stress as acute rather than chronic. And once it was clear that the crisis was a triathlon, not a sprint or even a marathon, organizations did very little to help employees over the long term in meaningful ways, abandoning or failing to adapt their initial efforts.

In the first weeks of the pandemic, most organizations were expecting it to end quickly. Remote workers were given a return-by date of one month. Then another month. Then in May big tech companies like Facebook and Google extended working from home to the end of the year. (They have since extended it well into 2021.) In the meantime people were left to figure out their new WFH arrangements largely on their own.

We also saw a surge in “well-being by video,” as leaders scrambled to figure out how to replace the at-work experience with a virtual one. Team building now included Zoom happy hours and morning stretch sessions. In

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the first few weeks these virtual events were jam-packed, but within a month well-being measures just became part of the staff's workload and there was no "happy" left in online social hours.

Several large-chain grocery stores in Canada and the United States chose to give their frontline workers "hero pay," only to claw it back after a few months. (Some retailers are restoring it, but many have abandoned the policy.)

In the spring, physicians, nurses, and first responders were celebrated with parades and applause. Over time the cheers stopped. The applause faded at the worst possible time — when health care workers needed it most. They already had the highest rates of burnout, but the pandemic took them to unprecedented levels.

It's understandable that we might not have recognized the true impact of the pandemic at first. So much was unknown. But once we realized we were in it for the long haul, we could have slowed down and analyzed what was working and what wasn't. We could have been more creative about changing practices to ease burnout. But we didn't. Instead of pumping the brakes when the virus spread and acute stress began to become chronic, we made things worse in these key areas:

**We didn't adjust workloads.** Overwork was the most-cited reason for burnout and decreased well-being in our pre-pandemic qualitative research. Research from Gallup has shown that the risk of occupational burnout increases significantly when an employee's workweek averages more than 50 hours, and rises even more substantially at 60 hours. Clearly, this issue has not gone away. If anything, the pandemic has probably exacerbated it.

One respondent to our recent survey shared, "Everything seems like a rush. There's more pressure to produce, and no one respects time boundaries. Emails start at 5:30 AM and don't end until 10 PM, because

they know you have nowhere else to go. For single people with no families, it's worse, because you don't get to say, 'I need to go take care of my kids.'"

**We didn't give people control and flexibility.** The pandemic brought employees a host of new challenges. Childcare options were limited, with day care centers and schools closed and grandparents separated from their extended families. Parents were grappling with homeschooling children while working from home — with the whole family on the same Wi-Fi connection — and dealing with increased household chores resulting from suddenly having everyone under the same roof 24/7.

Some organizations saw the value of allowing employees more flexibility, but too many did not. I suspect this stems from the way the notion of flexibility has long been steeped in bias, with some considering it “a mother's benefit.” The lockdown tested that idea, but in the end the existing systemic failures of workplace policies and biases about women proved disastrous. Gains for women would be lost, with serious consequences.

According to the [Center for American Progress](#), “four times as many women as men dropped out of the labor force in September, roughly 865,000 women compared with 216,000 men.” Black, Latinx, and Indigenous women are experiencing this most acutely because of “the multiple effects of being more likely to have lost their jobs, being on the front lines as essential workers, and solving their childcare challenges on their own.”

“There's no respite from work,” shared one woman in our survey. “I work 9 to 9 almost every day. My husband is working in the office, and I'm working from the kitchen counter, with the baby in the living room. I don't get time to focus on anything. If I'm spending five minutes with my son, my instant messages are blowing up (and I hear the noise). If I'm working with my back to my son, I'm constantly turning around to check on him.”

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The impact of the disruption to women's ability to work is enormous. Even a 5% decline in maternal labor force participation would set women back 25 years, according to the report.

**We allowed more meetings and unhealthy levels of screen time.** We talk about Zoom burnout as if it's a new thing. In reality, it's just a new manifestation of a bad workplace practice on overdrive. We've had meeting fatigue forever. According to Steven Rogelberg of UNC Charlotte, who wrote *The Surprising Science of Meetings*, pre-Covid-19 studies showed that about 55 million meetings a day were held in the United States alone and that U.S. organizations wasted \$37 billion annually because most meetings were unproductive.

Despite all that, meetings increased substantially during the pandemic. According to a recent study sponsored by the National Bureau of Economic Research that analyzed the data on more than 3 million people, the amount of time employees spend in meetings has increased by 13%. In addition the average workday is now 48 minutes longer.

What's especially troubling here is that video calls are actually harder on us physically and mentally. Our brains find it more challenging to process nonverbal cues like facial expressions and body language on them, making it tough to relax during conversations. Plus, slight delays in verbal responses subconsciously make us dislike people, according to research cited by Jena Lee, an attending psychiatrist and assistant professor at the David Geffen School of Medicine at UCLA.

"I sit all day. My ankles were swelling at one point, and I had to sleep with my feet elevated. I don't sleep well. I have no time to do anything I enjoy," one of our survey respondents told us. "I go from one Webex or Teams meeting to the next."

**We didn't recognize the extent of people's struggles.** Burnout, when experienced in the extreme, can be tragic. That's what Corey Feist, who is

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outspoken on the topic of physician burnout, emphasized to me in the wake of his sister-in-law’s suicide last April.

Dr. Lorna Breen was the medical director of the emergency department at a hospital in Manhattan. She was working on the front lines, deep into the first surge of a locked-down New York City as the virus raged through it. Feist remembers Breen describing the hospital as “Armageddon.”



Peter Greenwood/Folio Art

The factors that played a role in her burnout, according to Feist, are multifold. “First she contracted Covid-19 and was exhausted, depleted, and probably dealing with the brain fog that we now know impacts people with the virus. Then she went back into the workforce way too fast. On top of still being sick and exhausted, she would now face a volume of death and dying that she’d never seen before. Add in feelings around not being able to contribute and not being able to take care of your patients — because they were dying, and doctors are trained to fix people — and it was all so overwhelming.”

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Not every case is as distressing as Breen's. But her story points to a key truth: One big problem of the pandemic is that we simply haven't realized — much less acknowledged — how hard circumstances are. And we've been applying Band-Aid solutions to a gaping wound in the form of yoga programs, wellness technology, and meditation apps. The need to recognize that people are working unsustainably day after day, that they may not feel safe talking about their mental health, and that they're overwhelmed and exhausted is urgent. There is no app to fix that.

And the vast majority of senior leaders have told us that they're tired, too — and tired of leading tired people. This global pandemic is not “business as usual,” so we need to stop acting as if it is.

### **How to Beat Burnout**

There are some easy things we can all do to combat burnout, most critically at the organizational level. There was good news in our research, and it illuminated where we need to focus. Factors that predicted lower levels of burnout included the following:

**Feeling a sense of purpose.** Respondents said that this feeling helped defend against burnout at work. In fact, burnout scores declined as purpose scores increased: Twenty-five percent of people who felt a strong sense of purpose in their work had not experienced any burnout (according to both self-reporting and the MBI-GS) in the previous three months. However, since the data reflects knowledge-worker sentiment, I wouldn't want to suggest that employees on the front lines or first responders should rely on purpose to prevent burnout. This finding requires more analysis, but my colleagues and I found it to be an important insight.

**Having a manageable workload.** This was one of the strongest predictors of lower burnout. To help overburdened employees, organizations should communicate more about priorities and about what can be put on the back burner until time permits (or perhaps forever).

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One of the most glaring issues related to workload was meeting fatigue — it tops the list of things organizations must tackle. To begin to address it, use this simple formula:

1. Ask, Is this meeting necessary?
2. If yes, then ask:
  - Does it have to be a video call?
  - Does it have to be longer than 30 minutes?
  - Which attendees are absolutely essential?
  - Can we turn off our cameras and use our photos or avatars instead?
  - Can we do an audio-only conference call for a much-needed screen break?
3. Start meetings with a check-in: How are people feeling? Does anyone have a back-to-back call? If you're leading the meeting, set a timer so you can let anyone who does have one jump off five to 10 minutes early.

**Feeling that you can discuss your mental health at work.** Our survey found that nearly half of respondents don't believe they can openly do this — and 65% of those people experienced burnout “often or always.”

That is a massive problem.

The first step toward solving it is to create a culture of psychological safety at work, which Harvard Business School's Amy Edmondson, who is an expert on the topic, defines as “a climate in which people are comfortable being (and expressing) themselves.”

For example, when someone messes up, we may get angry. Yes, we all have a right to be frustrated, but whom does that serve? The bigger goal is to set things right. Edmondson suggests that more-productive responses start with asking about what help is required to get back on track. That is, after all, what we really care about. When this kind of communication is common, people generally feel safer talking about more-personal topics, like mental health.

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Another tactic is to offer employees access to mental health support. That could include:

1. **A mental health resource page** listing local outreach programs and mental health practitioners that are cause- or crisis-specific.
2. **Reduced hours, flexible hours, or even paid time off** for anyone who has mental or physical health concerns — or who is caring for a loved one affected by the crisis. We were dramatically caught off guard by the pandemic. This can't happen again — time off and grief policies should be readied now.
3. **A peer-to-peer outreach program.** Firms can select leaders to train in mental health 101, who can then be activated as a support system for the staff in a crisis.
4. **Having managers check in on their direct reports immediately.** The pandemic was a jarring example of how quickly a crisis can escalate. If we have communication plans in place before disaster hits, we can provide answers to pressing issues. Just by asking more frequently “How are you doing?” and “How can I help?” we'll demonstrate that the well-being of our team is a priority.

**Having an empathetic manager.** This was the second-most-cited need in the survey, just slightly behind manageable workloads. And for good reason: According to Harvard Medical School's Helen Riess, who is also the cofounder and chief scientist of [Empathetics](#), communicating empathically increases job satisfaction, reduces burnout, and is [highly correlated with enhanced well-being](#). It is perhaps *the* most critical skill in a crisis and something that we can all improve on.

[Empathetic leadership](#) requires three things: acknowledging and overcoming any personal biases and privileges you might have; actively listening to your people; and taking action. I want to focus on the second — active listening — as something that's particularly important today. It involves giving people a safe place to share and demonstrating that you've heard them by acting on their words. You can do this one-on-one or set up

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open forums through Slack or Teams or any other workplace social collaboration tool, where good ideas can proliferate. You may also want to create the opportunity to provide anonymous feedback; there are survey tools out there that make it easy to do that.

Another unique way to combat burnout is to become a “professional eavesdropper,” according to Martha Bird, a business anthropologist for the data processing company ADP. Why? Because it’s often the small things we say and do over time that account for the bigger picture on our well-being. “People are messy, and the messiness is what tells us the most,” she told me. “We humans attempt to make the mess meaningful. And that meaning is reflected in what we do.”

Bird is suggesting that we need to look deeper than an occasional “How are you doing?” One study found that on average an adult will say “I’m fine” 14 times a week, though only 19% of people really mean it. Almost a third of the 2,000 people in our survey said that they often lie about how they’re feeling. By paying closer attention to what your employees are talking about and seeing patterns, you can spot and head off problems.

So the next time people say they’re fine, ask again, “Are you really fine? It’s OK if you’re not. I’m here if you need to talk.”

**Having a strong sense of connection to family and friends.** Our survey highlighted how many of us feel isolated. Before offices went virtual, one of the most healthful benefits of work was that it allowed us to establish and build friendships. That’s much more difficult, if not impossible, to do remotely.

“I started this job six days before the pandemic meant that we had to work from home. I found it challenging to connect with new colleagues over Zoom calls,” one survey respondent wrote. “Even when I do go to the office, we are not allowed to meet in person. I think I have spent a total of about 10 hours face-to-face with my colleagues, and maybe 40 to 60 hours

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in Zoom meetings with them. It's hardly enough to build trust and respect in a way that would feel meaningful to me."

Personally, I think some companies went too far too fast by making work from home a "forever" policy. Nearly three-quarters of employees want to have access to an office, according to a recent JLL survey of more than 2,000 employees across 10 countries. And 80% of high performers have missed their office greatly during lockdown, according to the same report.

Flexible options are what workplace experts have long been arguing for. As soon as it is safe to do so, we need to create hybrid solutions that allow coworkers to connect and collaborate in person and virtually.

Rich Barton, CEO of Zillow, has chosen to offer both work-from-home and in-office options. "The way our team delivered after we went remote turned my legacy opinion of working from home on its head and began a journey toward letting our people decide where they will thrive and be the most productive," he told me.

The best relationships are still built when we can see one another's faces in person. The need to socially distance for almost a year now has taken a toll. So once the pandemic's risks subside, leaders need to find ways to bring their teams back together in a physical space to connect in real life.

## **Prepare Before the Next Crisis**

Of course, this is all just a starting point for how companies can address burnout. But the point I want to hammer home is this: Leaders, get the right systems in place now, *before* the next crisis happens.

I've found that the companies that were already engaged in a burnout prevention strategy have been more successful at leading their workforce through the Covid-19 crisis. And I've been pleasantly surprised by the number of leaders who were deeply motivated to support their workforce. Here is one example that stood out for me.

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Alan May is the executive vice president and chief people officer for Hewlett-Packard Enterprise (HPE). I spoke with May in October 2020, when nearly all the company's 60,000 employees were working remotely. He believes HPE's long-standing commitment to well-being has helped it weather the year's challenges. "Crises tend to just accelerate underlying trends," he observed. He hasn't been creating wellness programs only in response to Covid-19; when it hit, the company was already two years into an internal campaign focused on them.

Long before the pandemic, HPE was addressing burnout. One of the examples May shared was having "meetingless Fridays" to create "white space" for employees to work on ideating or reflecting. He also reinforced the importance of having frontline managers check in with employees regularly. While he's not expecting those managers to be mental health experts, he shared that "in a number of cases, as a result of some of those interactions, we've detected some concerns, and we've been able to escalate them and get more professional help."

May also had created virtual social chat groups for peer-to-peer communication, where leaders could also actively engage, to bring together like-minded individuals with no real objectives. "We didn't proctor the groups, but we did participate to some extent by listening," said May. And when the crisis hit and "employees started sharing specific tips and tools for others working at home or specific suggestions for those that were homebound and lonely, it just became all about lifting up those good ideas and executing on them."

The resilience HPE employees appear to have built up seems to have served them well during the pandemic. According to the firm's "Employee Work Experience Data" from July 2020:

- 91% of employees agreed that employee health and well-being was a top priority for HPE.

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- 92% agreed that their direct leaders had shown genuine concern for their well-being.
- 91% agreed that their direct leaders had shown flexibility by allowing them to balance their personal and professional lives.

Employee experience scores like these send an important message: “We feel supported. Keep it up.”

If your organization also wants to foster great workplace experiences, well-being must be table stakes. Put mental health and burnout prevention protocols in place now. Prepare a communication strategy well in advance, so that when another crisis hits, information about support programs and details on any new health and safety measures can be shared instantly with employees. Keep in mind that poor communication during the Covid crisis has been a primary regret for more than a third of C-level leaders — and that 32% of employees surveyed claimed they yearned for more communication, done sooner and more transparently.

• • •

There is no quick fix for any of the burnout issues we’re facing, and sometimes that can feel paralyzing. We need to start small, or the task will seem too overwhelming. Big change starts with modest practical steps, working toward collective change.

We can’t waste this crisis. The well-worn phrase “Knowing is half the battle” feels applicable here. If we can identify organizational signals of stress — because we are *finally* paying attention — then there is hope for the future.

Leaders, we have endured a trial by fire, and there’s no turning back. We did not experience this crash course in emotional flexibility — this testing of our resilience — only to squander the learning. We have a shot at truly preventing burnout, and we can’t say that it’s too hard or too much work

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or that it requires too much change. The best moment to make a move is when everything is up for grabs. It's time to turn the change that was inevitable into the change that was always possible. Starting right now.

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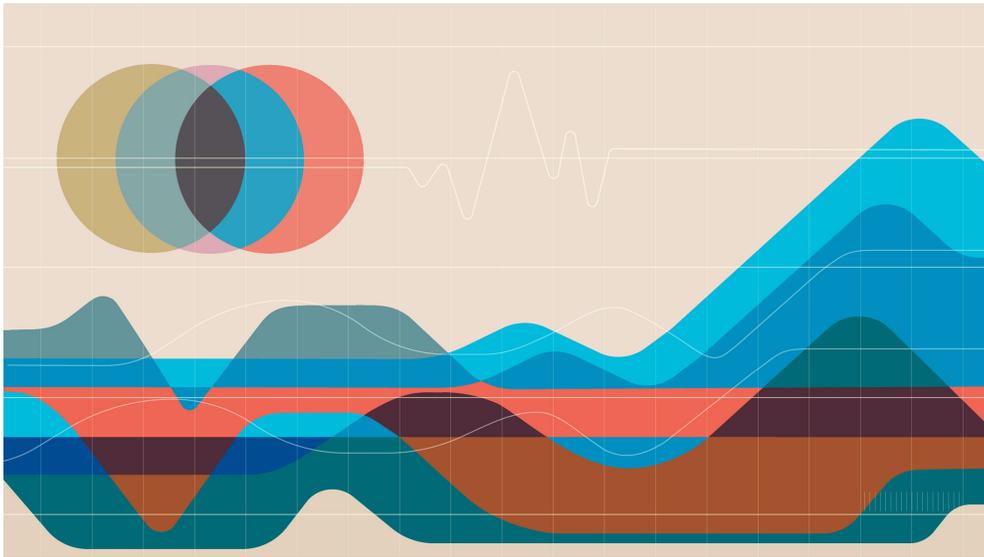


**Jennifer Moss** is a workplace expert, international public speaker, and award-winning journalist. She is the bestselling author of *Unlocking Happiness at Work* (Kogan Page, 2021) and the forthcoming book *The Burnout Epidemic* (HBR Press, September 2021).

# What Covid-19 Has Done to Our Well-Being, in 12 Charts

by Macaulay Campbell and Gretchen Gavett

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Peter Greenwood/Folio Art

**Feeling burned out? You're not alone. According** to a new survey of nearly 1,500 people from 46 countries, the vast majority of us are struggling with general and workplace well-being as the pandemic continues to rage. These struggles are affecting our mental health and involve some of the key predictors of burnout, including an unsustainable workload, the absence of a supportive community, and the feeling that you don't have control over your life and work.

The survey is part of a larger project aimed at measuring people's rates of burnout during Covid-19. It's led by a team of researchers — Jennifer

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Moss, Michael Leiter, Christina Maslach, and David Whiteside — who asked HBR readers and others a series of quantitative, demographic, and open-ended questions in the fall of 2020. The open-ended portion resulted in more than 3,000 comments, the majority from knowledge workers who have done their jobs remotely for at least part of the pandemic. Whiteside coded the responses into major trends and subthemes and helped us identify key insights from the data. Below is a closer look at a selection of these.

Overwhelmingly, respondents reported mental health declines, challenges with meeting basic needs, and feelings of loneliness and isolation. They also noted increased job demands and growing disengagement at work. But the news wasn't all bad. Some people actually reported improved well-being, and the reasons for it could help organizations pinpoint ways to help employees in the future.

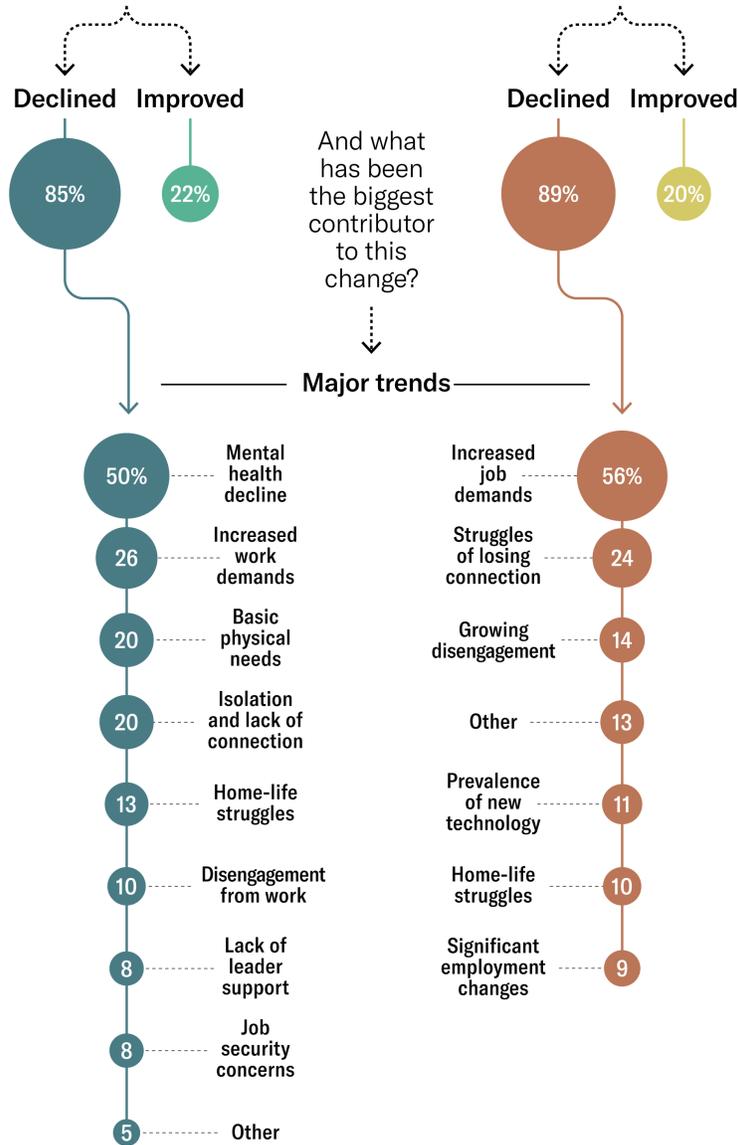
Below are some key findings. The first section presents an overview of the data. The second and third sections examine general well-being and why it went down — or up — for different people. The fourth and fifth sections look specifically at workplace well-being. There are select quotes from survey respondents throughout, which have been edited for length and clarity. Note that percentages refer to the number of respondents who made clear references to the general sentiments, trends, and themes, and do not add up to 100%.

[ 1 ]

## Major Well-Being Trends at a Glance

Thinking back to the start of Covid-19, how has your **general well-being** changed?

Thinking back to the start of Covid-19, how has your **workplace well-being** changed?

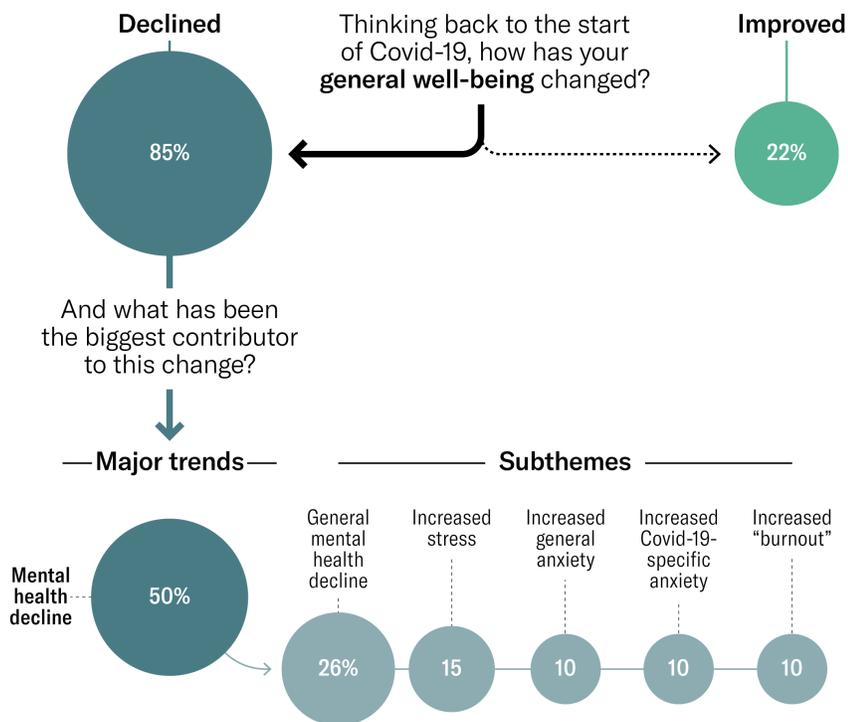


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[ 2 ]

## General Well-Being Declined for Most People...

**Fully half of respondents who reported a decline in well-being pointed to deteriorating mental health as the main culprit.** Some respondents identified being burned out without prompting. There are two takeaways: Someone can have a decline in mental health without necessarily being burned out, and a percentage of people are explicitly using the word “burnout” to understand their work experiences during Covid-19.



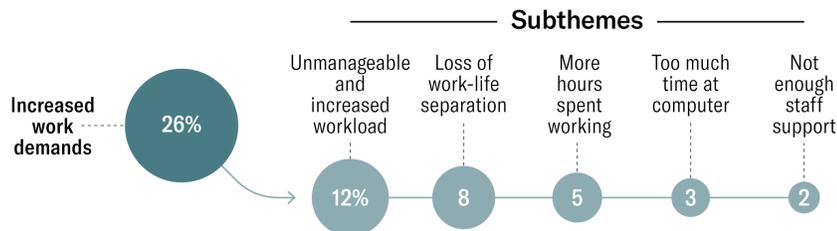
**“My mental health has significantly deteriorated.** Coping with the pervasive anxiety and worry during this pandemic takes up a lot of bandwidth; needing to work through that means I am expending more energy than normal to manage the noise in my head. It is exhausting. I am too tired to work out, I am too tired to FaceTime with friends or family, I

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am too tired to cook healthy meals.” —36-year-old woman who works as a manufacturing manager

**“The lack of separation between home and work makes stepping away difficult;** rarely am I fully out of work, mentally speaking. Being stuck at home creates boredom gaps and general worries about the future, which I allay with work in pursuit of meaning and connection because Covid has made both harder to come by. My colleagues began the lockdown being ‘performatively online’ and have stayed there because, in my view, they lack viable alternatives for mental engagement. This creates a spiral of performance and expectation that is extremely detrimental to our well-being.” —41-year-old man who works as a director in tech

**Increased work demands** are the next most common reason for a decline in general well-being.



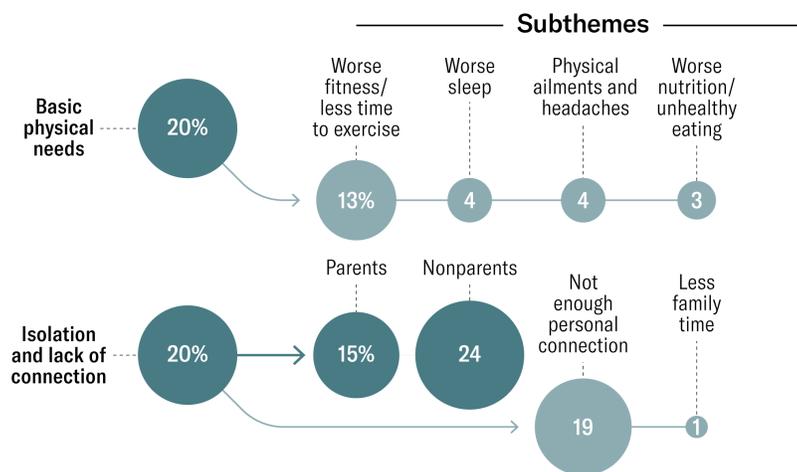
**“When we commuted to work, there was a sense that we could be done for the day.** In the current state there is none of that, as my employer often says, ‘We know where you are.’ This situation has created constant drive with an inability to slow down. Granted, I am able to spend more time with my family, which offsets this, but it is still challenging.” —42-year-old man who works as a services employee

**“While my overall well-being is basically fine, I have days where I feel more aimless or untethered.** I am unsure whether I am working toward the same goal as my colleagues anymore. Are we all tracking in the same direction? Are we just doing our best to keep our heads above water, and

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maybe that’s enough? But then there’s always this lingering sense of, ‘What did you accomplish today, this week, this month?’ from leadership that creates pressure to keep up the same productivity.” —*38-year-old woman who works as a public administration manager*

**People also reported having trouble meeting their basic needs and feeling isolated.** Nonparents in particular said they felt disconnected from others.

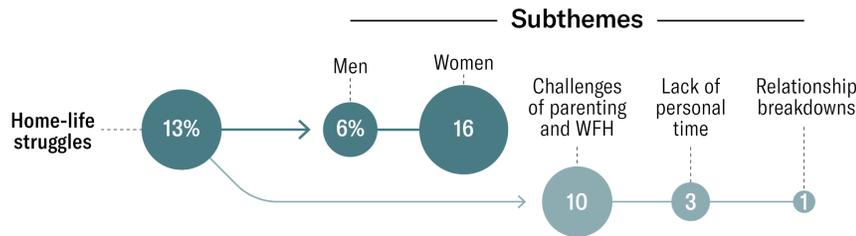


**“I have been a lot less social.** I see people over Zoom or Google Duo, but since I have to do so much of that at work, in my personal life it just seems like another chore. I have disconnected from loved ones since I am trying to socially distance. It’s been a challenge.” —*46-year-old woman who works from home*

**“I think isolation, generalized anxiety, and fear have caused the biggest changes to my sense of general well-being.** Fearing for myself, my clients, my friends, and my family has caused a lot of stress. Isolation is debilitating after months, as is anxiety over the unknown. All of these have real physical effects. They’ve affected my sleep, ability to focus on tasks, and ability to take in and learn new information.” —*32-year-old woman who works in the services industry*

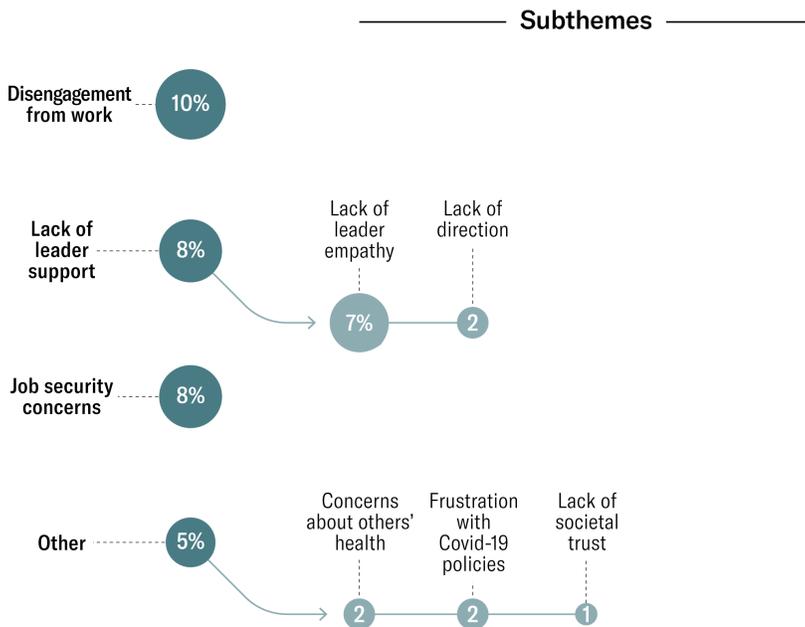
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**Home-life struggles are also an issue for people,** though women reported challenges around parenting and personal time far more often than men did.



**“I am now working from home primarily and am trying to get two disenchanted kids through distance learning. My husband has worked out of the home the entire pandemic, so the responsibilities are all mine.”**  
*—46-year-old woman who works from home*

**Finally, some people expressed feeling a lack of support and empathy from leaders,** as well as concerns about job security.

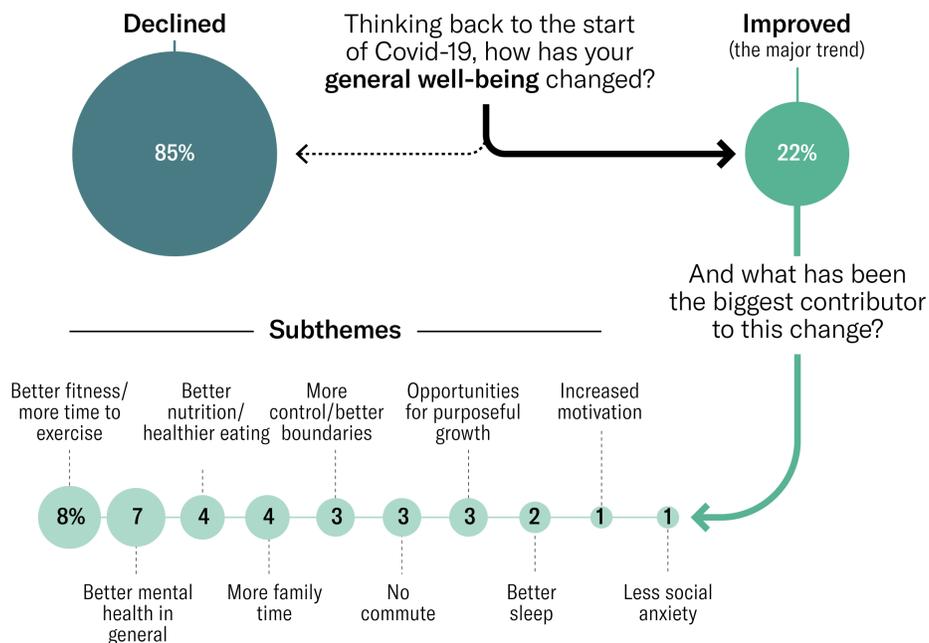


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[ 3 ]

## ...But Some People Saw Improvements in General Well-Being

Nearly one-quarter of those surveyed reported feeling better, due in part to having more time to exercise and eat healthier.



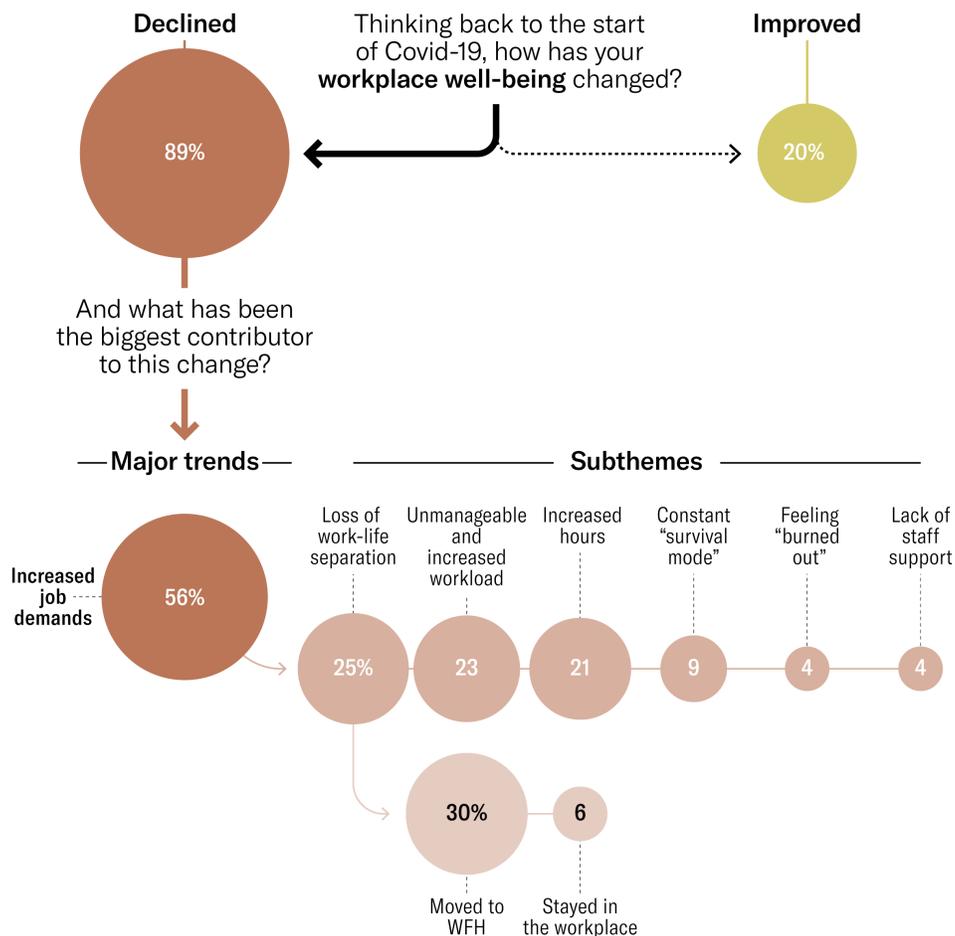
**“It’s nice to be able to have dinner on the table earlier and handle chores that are usually left for the weekend. I feel like I spend the weekend relaxing to recharge more than I ever did before.”** —41-year-old woman who works in tech

[ 4 ]

## People’s Workplace Well-Being Also Declined...

**Of all the factors contributing to this decline, increased job demands were cited the most often by respondents.** Specifically, work-life separation vanished while workloads and hours increased.

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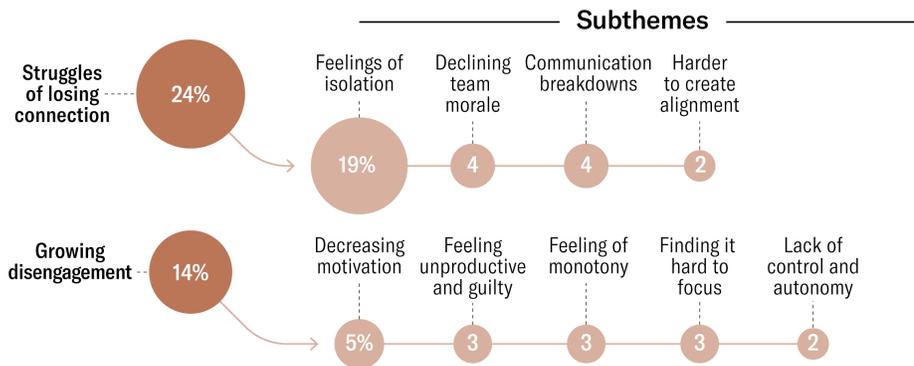


**“There is no semblance of balance or separation.** Now my work is literally in my living room and my parenting is happening in my ‘office,’ which is the kitchen table. Roles collide, and it makes for an almost comical situation — taking important meetings from the floor of my closet, while my daughter passes me notes under the door telling me she needs a snack.” —36-year-old woman who works as an education director

**“Everything seems like a rush.** There’s more pressure to produce, and no one respects time boundaries. Emails start at 5:30 AM and don’t end until 10 PM, because they know you have nowhere else to go. For single people with no families, it’s worse, because you don’t get to say, ‘I need to go take care of my kids.’” —36-year-old woman who works in marketing

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**Others said they were losing connections with coworkers** and becoming more disengaged at work.

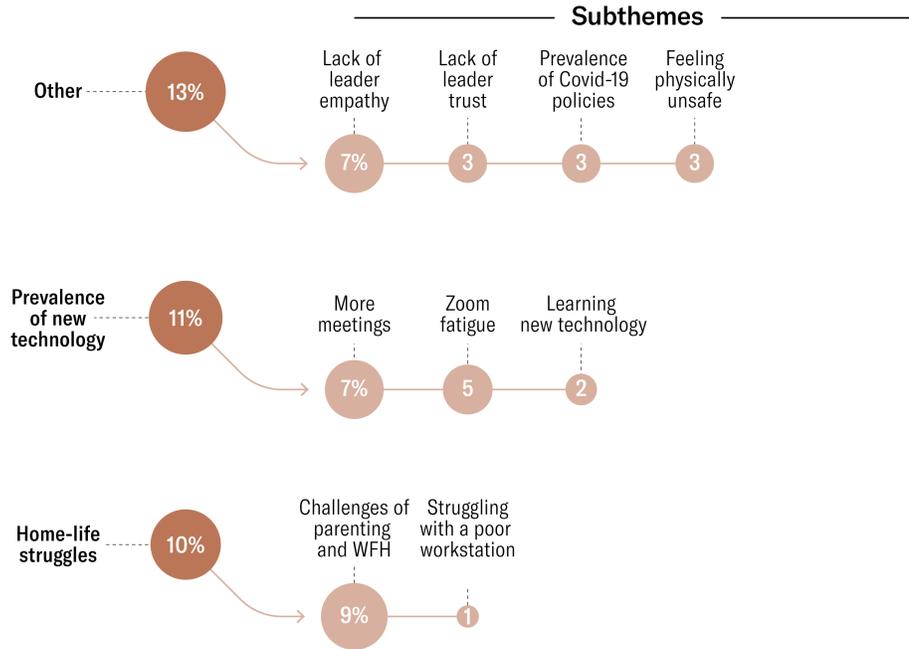


**“I work for a company that has topped Glassdoor’s ‘Best Place to Work’ list multiple times, a company that is known for a culture I love.** But it is not the same. All the fun stuff and connection is so hard to replicate virtually that work life now feels like it is all about work and not much else. I have struggled to balance my personal needs to keep mentally well and healthy.” —*25-year-old man who works as a strategy consultant*

**“I feel bad all the time about work.** I think it’s due to a loss of social connections with coworkers and the increased effort required to communicate. My burnout zone begins much earlier in the day than it used to.” —*44-year-old man who works as an entertainment director*

**Technology, and specifically an increase in virtual meetings, was also challenging for some people.** Unsurprisingly, parenting struggles were also mentioned.

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**“I am now managing work while being a parent, schoolteacher, and cafeteria worker. Looking for an outlet for myself and my family outside our house has been a big challenge. Now everything happens in one place, and the only differentiation is the spaces within the four walls.”** —*43-year-old woman who works in telecommunications*

**Finally, a selection of respondents noted changes in their employment,** which included significantly reduced hours, furloughs, layoffs, and job changes.

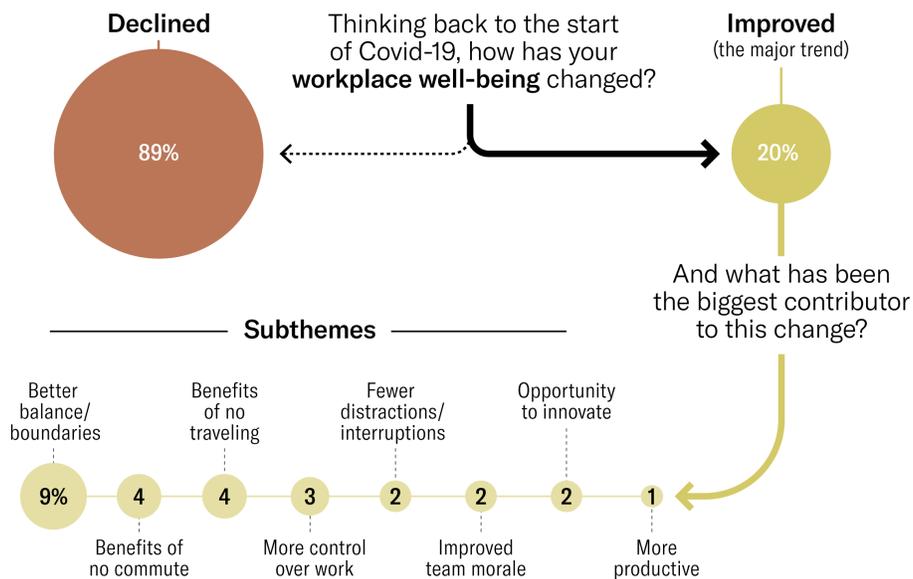


[ 5 ]

### ...But Some Saw Workplace Well-Being Improve

**This much-smaller group pointed to less frequent travel and reduced commute time,** as well as having more control over their work, as key benefits.

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**“I’ve had to get creative about how to relax and recharge at home, which actually has helped in my work-life balance.”** —*37-year-old woman who works as a manufacturing manager*

**“I’ve gone from being in the office 45 hours a week to being at home all the time. I no longer have to drive to meetings all over the metro area, and I conduct business from my home office. I’ve lost weight, am eating more healthily, and have more time with family.”** —*64-year-old woman working as a nonprofit manager*



**Macaulay Campbell** is the senior graphics editor at Harvard Business Review.



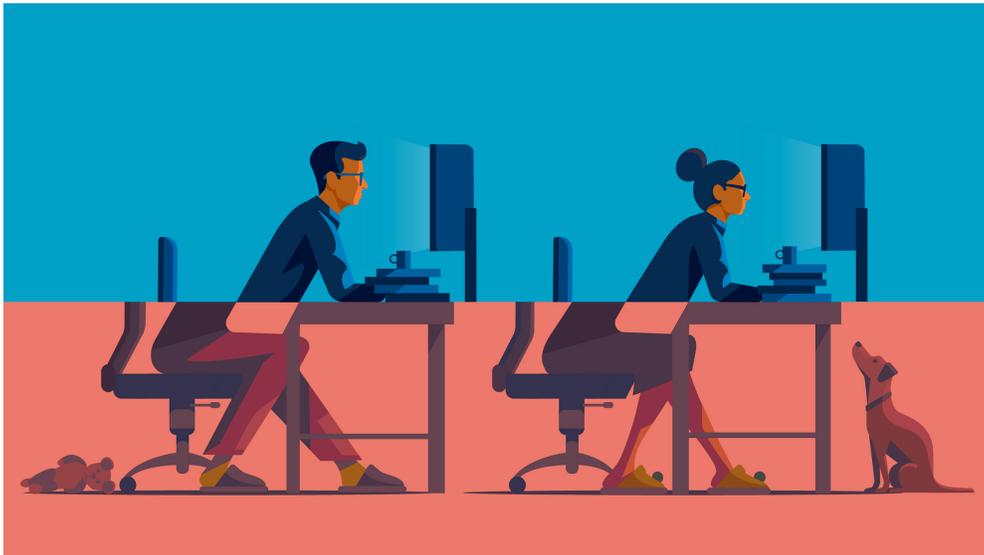
**Gretchen Gavett** is a senior editor at Harvard Business Review.

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# How the Pandemic Exacerbated Burnout

by **Dave Lievens**

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Peter Greenwood/Folio Art

**Michael Leiter and Christina Maslach have been** at the vanguard of burnout research for over three decades.

They are the coauthors of [The Truth About Burnout](#) and a forthcoming book on burnout and work for Harvard University Press. Maslach is also a coauthor (with Susan Jackson) of the Maslach Burnout Inventory, a widely used assessment with variants tailored for a range of populations. Leiter is a coauthor of the version of the assessment used most often in organizations.

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Their research shows that burnout is a workplace problem, not a worker problem. It happens when there is a bad fit — they call it *mismatch* — between an organization and its employees in one or more of the following areas: workers' amount of control, fair treatment, a sense of community, workload levels, the doling out of rewards, and organizational values.

Of course, there are plenty of burnout factories where employees are underappreciated and treated unfairly. But in most workplaces, under normal circumstances, employers and employees usually manage to find a healthier balance. This past year, the pandemic disrupted all of that.

We invited Leiter and Maslach to share their thoughts and observations about burnout in the era of Covid-19. What follows is an edited conversation.

### **How has the pandemic changed your thinking about burnout?**

In our view, 2020 did not change what burnout is — it remains a syndrome of exhaustion, cynicism, and inefficacy. If someone is experiencing high rates of all three of these at work, that indicates they are burned out, while low rates of all three indicate they are engaged. But although Covid hasn't led to a redefinition of burnout, it has certainly aggravated it and the related forms of workplace distress. Many people are seeing an extreme intensification of their workloads and experiencing rising emotional difficulties and feelings of unfairness.

### **Does working from home put people at greater risk for burnout?**

The risk varies, because people have been having so many different experiences. Remote work may have been a boon to introverts, people who thrive on long periods of uninterrupted work time, and those who hated their long commutes. But for most people, losing contact with colleagues and their day-to-day routines was distressing in itself, putting them at higher risk for exhaustion. Shifting into new modes of work and

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communication — say, suddenly being forced to teach a class online — can weaken one’s sense of efficacy as well.

### **What types of workplaces are being hit the hardest by burnout?**

Health care is probably the industry suffering most disproportionately from burnout, for a few key reasons. Among people helping Covid-19 patients directly, an intense increase in workload has led to exhaustion. PPE shortfalls and an overall lack of preparation for this public health emergency have undercut confidence, contributing to cynicism. High rates of mortality and suffering have prompted people to withdraw emotionally. The lack of good evidence-based treatments has weakened people’s ability to feel effective. And to top it off, these conditions have persisted for months in many places and have reasserted themselves after a respite in others.

Essential workers outside of health care are also highly affected. They’ve been exposed to pathogens from the public and their colleagues, and PPE was quite slow to arrive. Some industries experienced disastrous outbreaks, such as meatpacking plants, which were some of North America’s worst hot spots last spring. Employees were working longer hours and worried about being infected, and they needed to adjust to new safety practices, with implications for exhaustion and inefficacy. They also felt unfairly treated at times because their low wages hadn’t changed, while others were receiving “hero wages” or unemployment payments.

### **What are you seeing about burnout globally? Are there meaningful differences between countries or cultures?**

The experiences are more similar than different. However, some Asian countries, such as China, Japan, and Korea, have had much more effective public health interventions. With their infection rates drastically lower than those in North America and Europe, these countries experienced fewer of the conditions that are aggravating burnout.

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**Michael, you have some new data from health care workers in Canada and Australia, two countries that did a fairly good job of stemming the virus throughout last year. What have you learned so far?**

There's an ongoing longitudinal study of licensed physicians in Canada that indicates the extent to which burnout is spiking among health care workers. In June 2020, the percentage experiencing burnout had risen to 23%, up from a pre-pandemic baseline of 14%. The engaged percentage fell from 36% to 27%. Remember that this is among *all* physicians — not just those on the front lines of the fight against Covid-19 — in a country that was doing relatively well when this data was gathered. It's easy to imagine how much worse the numbers may be elsewhere. One bright spot was that inefficacy actually fell — by and large, physicians felt like they were still doing their work well.

Our survey of an Australian hospital that was a Covid hot spot last year found high levels of exhaustion and cynicism, mainly due to the inadequacy of preparation and a breakdown in trust. When you ask these workers to share their honest experience of work during this time, it's heartbreaking. Of course, exhaustion was rampant, but words like “undervalued,” “demoralized,” and “unfair” appear again and again.

One disengaged employee wrote that they felt dispensable in the organization. Another worker, who was experiencing full burnout, described a textbook mix of exhaustion, cynicism, and inefficacy. Her team was getting different assignments on a weekly basis, bouncing from ward to ward. They were given mixed messages, never sure when their normal work would resume. They ended up feeling like pawns in someone else's game. Perceptions of unfair treatment also simmered between patient-facing staff and those who could work remotely.

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However, those employees who remained engaged often mentioned the benefits of working from home. Some credited their employer for being proactive in deploying PPE and taking a cautious approach.

### **What mistakes do organizations make when they try to measure burnout?**

The biggest mistake is to focus exclusively on exhaustion or to use only a one- or two-item indicator. The worst method, which we see all the time, is simply asking employees, “Are you burned out?” These kinds of approaches are conceptually unsound, as they implicitly assume everyone has the same definition of burnout, and they don’t provide companies with any information on what specific problems to address.

These approaches are also limited in that they don’t differentiate between people who are truly burned out and those who are just feeling ineffective, are disengaged and cynical, or are overextended but are still involved and confident. Each category calls for a distinct course of action. For instance, if people are overworked and exhausted, what they need is time off or adjustments to their workloads. But if people are truly burned out, even if you give them less work, they’re not going to feel better. They won’t trust your motives; they’ll see the help as an indictment of their competence.

Another mistake organizations make, which we think borders on the unethical, is administering the measurement but then never following up, including failing to share the results with employees. That kind of action brews employee distrust to such a level that it’s probably worse than taking no action at all.

**A lot of leaders misunderstand burnout, thinking it's about an individual's mental toughness. What do those leaders need to understand?**

You can't assume that this is simply a matter of better personal resilience or more-effective individual coping. Especially right now, experiencing burnout in no way implies any personal shortcomings. The more effective action is to support people while things are in emergency conditions, like the pandemic, and to redesign the workplace to provide a sustainable, effective, and fulfilling work-life balance in normal conditions.

**How can organizations help their employees bounce back from Covid-related burnout when the pandemic is over?**

It's important to note that not everyone who feels or appears to be burned out is experiencing the full syndrome. Feeling overextended from too much intense demand is a more straightforward thing to recover from than full-on burnout.

However, there are certainly those who are suffering from all three dimensions or may as the pandemic continues. To reduce the longevity of burnout in the postcrisis world, we suggest a few things.

First, recognize the contributions people have made in ways that are meaningful to them. As simple as it seems, a sincere "Thank you" or a gift of appreciation to *all* staff makes a big difference. Avoid singling out special or exceptional performances — who among us hasn't been doing something special this past year?

Second, ensure open, honest communication between leaders and employees. This guarantees that people have a clear understanding of where things are going in the workplace, including how secure their jobs are. In addition to reducing ambiguity and confusion, this conveys respect and support: "We care about you, and we need everybody's help to get

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through this successfully.” That sense of fairness, values, and social inclusion will go a long way toward preventing cynicism and inefficacy.

Third, realize that things have changed. People have come up with new ways of doing their jobs that may help them work better post-pandemic. For example, you might accommodate a broader mix of people being off-site going forward. And consider that some of the tasks that did not get done during shutdowns may not need to be done at all in the future.

Relatedly, you should encourage people to do whatever works best for them to recover. Sleep is essential for everyone, of course. But the main thing is for employees to enjoy whatever activities help them feel better.

You’ll also want to publicly commit to serious planning for future crises. When people see their employer preparing for future emergencies, it reaffirms that you care about their well-being.

Finally, going forward, we should all consider new models of healthy work environments, including rethinking the hours and place of work as well as how our jobs get done. We need to take into account not just what causes burnout and what makes work harder for people but also what better place we want to get to and how we want to redesign organizations. It’s going to involve remaking workplaces in new, innovative ways.



**Dave Lievens** is a senior associate editor at Harvard Business Review.

# Six Lessons on Fighting Burnout from Boston's Biggest Hospital

by **Joshua J. Baugh** and **Ali S. Raja**

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Courtesy of MGH

**Research shows that employee burnout is an organizational issue** as well as an individual one. Managing it is challenging enough even when the world isn't in the midst of a pandemic — but in these times, if your

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workers are on the front lines of an ongoing crisis, how do you keep them from becoming exhausted and unproductive?

As leaders in the Department of Emergency Medicine at Massachusetts General Hospital (MGH) in Boston, we have supported clinicians, nurses, and the administrative and support staff as they've cared for patients throughout the pandemic. From our past experiences addressing burnout at hospitals, and given the sheer magnitude of the Covid-19 crisis, we realized that burnout was a major risk. So we leaned into what we knew to create pandemic-specific strategies to support our employees. Additionally, to better understand how our efforts affected our staff's well-being, we conducted an anonymized survey of the 60 faculty physicians in our emergency department (ED). (We plan to validate our findings with other employees next.)

Our preliminary results indicate that although burnout has increased during the pandemic, the trend at MGH is not as pronounced as in other hospital emergency departments in the United States. Furthermore, many of our physicians actually reported greater job satisfaction, praising the institution's strong leadership, effective communication, and success securing adequate resources.

While there are no easy answers or surefire solutions to burnout during a crisis, we hope that sharing our approach will help other organizations, both within the health care industry and beyond. Below, we describe the key strategies we've used. They fall into six categories that align with the factors that, according to psychologists Christina Maslach and Michael Leiter, drive employee engagement and reduce burnout: rewarding work, autonomy, fairness and transparency, a reasonable workload, a sense of community, and consistent values.



A Covid-19 patient is greeted by friends and neighbors after spending 33 days on a ventilator at MGH. (Photo: Suzanne Kreiter/The Boston Globe via Getty Images)

[ 1 ]

## Rewarding Work

Making work fulfilling is essential to preventing burnout. Financial rewards are part of this, so we've maintained salaries and our incentive payment structure. But emotional rewards are also an important and effective tool for keeping employees motivated. Consequently, we've made a concerted effort to reinforce the message that everyone's work is meaningful and appreciated.

We began by providing frequent updates on Covid-19 patients' positive outcomes after they left our ED and received additional treatment. We also increased our efforts to collect feedback from grateful patients and share it with employees who otherwise might never hear it. Our surveys showed that emphasizing the importance of caring for Covid-19 patients — and providing the staff with positive feedback directly from those patients — has been key to maintaining employees' resilience.

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In addition, we found that physicians reported greater well-being when they were able to have ongoing, rewarding interactions with patients and their families, despite the constraints of physical distancing guidelines. To recreate the positive impact of in-person communication when family members could not be at the hospital, we implemented a video conferencing system that allowed them to communicate with our teams remotely. We also enlisted a team of Spanish-speaking physician volunteers to serve as interpreters for high-stakes conversations when language barriers were an issue. Thinking about what types of human interactions made work rewarding before the pandemic — and finding creative ways to preserve those moments while adhering to new safety protocols — has been essential to keeping our staff engaged through the crisis.



A plexiglass wall with built-in gloves helps MGH staff care for patients while maintaining safety. (Photo: Courtesy of MGH/Robert Seger, MBA)

[ 2 ]

## **Autonomy**

The restrictions associated with the pandemic have seriously impeded many people's sense of control over their lives, and that can have a major

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impact on job satisfaction. To address this, we took a three-pronged approach. First, it's hard to feel in control if you don't feel safe. So we implemented basic but vital safety measures: Along with everyone at MGH, all of our staff had access to adequate personal protective equipment (PPE) and routine Covid testing, and we modified ED operations to decrease the risk of virus exposure as much as possible.

Second, we intentionally gave people choices in how they adjusted to the new reality. For example, we introduced a virtual care option to decrease face-to-face contact but emphasized to our team that it was optional — physicians and nurses could use the new system if they wanted, but they didn't have to.

Third, we invited everyone to participate in solving the new challenges presented by the pandemic. When one employee suggested that a plexiglass wall with built-in gloves could help staff care for patients more safely and effectively, we quickly implemented the idea. That simultaneously improved a key work process and demonstrated that individuals' contributions could make a real impact.

When so much feels out of control, these three strategies — providing robust protection from infection, giving people options, and welcoming their input — have helped our employees feel more autonomous and less burned out.



Intensive care unit nurse Belza Betancur receives MGH's first dose of the Pfizer coronavirus vaccine. (Photo: Craig F. Walker/The Boston Globe via Getty Images)

[ 3 ]

## **Fairness and Transparency**

In the face of all the fear and uncertainty associated with the pandemic, people want to know that at the very least, they are being treated fairly. One of the most effective ways to offer reassurance about that is through clear and transparent communication. All too often, leaders withhold difficult information from their staff, issuing top-down directives without taking the time to clearly communicate their reasoning, listen to people's needs, or ensure equitable treatment of different groups. But especially in times of crisis, that's the wrong approach. Even if you can't provide all the answers your people want to hear, it's better to openly share what is — and is not — known than to stay quiet and let employees speculate on what is being discussed behind closed doors.

With that reasoning in mind, we took several steps to increase transparency within our department. Early in the pandemic, we began

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sending out near-daily email updates to our entire staff. Those updates provided guidance on changes to operations and clinical care practices, explanations of how departmental leadership was approaching the difficult choices we faced, and detailed data on Covid-19 case trends. We also initiated twice-daily in-person “rounds” in which our leadership team checked in with frontline doctors and nurses to address pressing concerns and discuss rapidly evolving protocol changes. (Many of our employees were so busy that there was no way they could keep up with everything via email.) Finally, we increased the frequency of virtual faculty meetings and began holding weekly departmentwide virtual “learning sessions,” giving employees at all levels a chance to connect and share new ideas.

Transparency and fairness were at the heart of our plans for allocating resources. When it came to distributing our limited PPE and vaccine supplies, MGH tried very hard to avoid even the perception of special treatment for any group, and we broadly publicized the criteria we were using to make decisions. Employees were given PPE solely according to their level of exposure: Senior clinicians received the same exact PPE as the cleaning staff. When vaccines became available, everyone physically working in our ED was immediately eligible to receive one, regardless of their role. Those strategies have paid off: In our surveys, respondents listed frequent communication and transparent, fair decision making among the key factors that helped them maintain trust in our institution and stay engaged with their work.



MGH staff members enjoy a spirited (if socially distanced) conversation in a break tent. (Photo: Pat Greenhouse/The Boston Globe via Getty Images)

[ 4 ]

## Reasonable Workload

Rightsizing employee workloads for maximum productivity is always a delicate balancing act: You want to give people enough to do to avoid boredom, but not so much that they're overworked. Striking the right balance is especially tricky during a crisis. For many individuals, the pandemic has made each hour on the job significantly more stressful and challenging than before, so it would be unrealistic (and counterproductive) to expect their performance to remain at pre-pandemic levels.

At MGH, though, with fears about the virus mounting, we began receiving fewer ED patients. (That was part of a nationwide trend: Research shows that many people with complaints unrelated to Covid-19 became less willing to visit emergency rooms.) Nonetheless, we opted to keep ED staffing levels constant. In normal times, there were usually two attending physicians in our critical care pod during the busiest times of day, but we had increased that number to three just before the pandemic hit. Our decision not to alter that meant that every physician on our team had fewer total patients and could put more energy into caring for each one.

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Although such a strategy may seem financially illogical, we recognized that patient interactions were now more time-consuming (because of the need to don PPE and follow other new safety requirements) and more emotionally taxing (because of the challenges of treating such an unfamiliar disease). The reduced patient load allowed staff members to mentally recharge, prepare for the tough demands on them, and be more effective in the long run.

Thinking carefully about what you ask of employees is vital for avoiding burnout. In our case, as the pandemic changed what could be considered a reasonable workload, our policies had to change to keep up.



Notes of gratitude and support decorate the entrance to MGH's Intensive Care Unit. (Photo: Courtesy of MGH)

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[ 5 ]

## **A Sense of Community**

Although physical distancing has prohibited many traditional forms of interaction, maintaining a sense of community among employees has never been more important. And without the opportunity for casual workplace encounters, leaders must be intentional about formally supporting efforts to keep people engaged with their teams.

To that end, we have implemented several initiatives focused on helping our teams feel more connected. In addition to increasing the frequency of faculty meetings and other forms of formal and informal staff communication, our department launched weekly virtual “wellness” sessions — generally not attended by leadership — in which employees could freely discuss whatever was on their minds without their managers listening in. We also encouraged greater cross-departmental collaboration. One example involved a series of meetings where people in less hard-hit parts of the hospital could brainstorm ways to provide help and resources to the ED and other units most affected by Covid-19.

In response, our employees said that they felt the organization had successfully fostered a sense of community that went beyond typical work silos, helping them feel closer to and more supported by their colleagues. In fact, approximately two-thirds of our survey respondents reported feeling a greater sense of unity and collective purpose than they had before the pandemic, suggesting that our community-building initiatives have bolstered their emotional well-being.



Nurses from MGH's Cancer Center were among the many staff members who came together from across the organization to help treat Covid-19 patients. (Photo: Courtesy of MGH)

[ 6 ]

## Consistent Values

Demonstrating consistent values means ensuring that an organization's decisions and work environment are aligned with the goals and values espoused by its leaders. This is essential for avoiding burnout, as there is no surer path to a disillusioned workforce than the perception that those in charge are hypocrites.

Throughout the crisis, our department's most deeply held values have been service and safety. Our paramount goal has been taking great care of patients while keeping our employees out of harm's way — even if the organization pays a financial price. Those values aligned with our hospital's decision to cancel elective surgeries very early on, despite the negative impact on revenue. They also drove MGH to convert most of our

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hospital units into dedicated Covid-19 treatment areas, allowing our ED staff to focus on treating the sickest patients and then, once they were stable, efficiently transfer them to the appropriate inpatient care units. This strategy enabled us to provide optimal care for new patients while also reducing crowding in our ED, and it ensured that both employees and patients were able to maintain appropriate physical distancing.

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Crises always create stress. That was certainly the case when the pandemic hit Boston and our ED was tasked with caring for patients suffering from a poorly understood, deadly, and highly contagious new disease. But even under extreme circumstances, there are actions that can keep stress from morphing into burnout. And although they will look different depending on your hospital (or your industry), the fundamental principle is universal: The best way to prevent burnout and attrition is to empower people to perform their jobs effectively, in an environment that is safe and supportive. When organizations foster this kind of positive workplace (whether in person or remotely), staff members remain engaged and productive — even in the face of a crisis as volatile as a global pandemic.

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JB

**Joshua J. Baugh** is the assistant director of clinical operations, a fellow in emergency medicine administration, and a fellow in disaster medicine in the Department of Emergency Medicine at Massachusetts General Hospital. He has played an integral role in leading the department's response to Covid-19 and has conducted research on optimizing emergency department operations and on physician burnout in hospitals.

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AR

**Ali S. Raja** is the executive vice chair of the Department of Emergency Medicine at Massachusetts General Hospital, where he oversees its clinical operations. He is also an associate professor of emergency medicine and radiology at Harvard Medical School.

# How to Beat Loneliness — and Make Friends — at Work

**Jennifer Moss helps Christine Liu, host of *Christine vs. Work*, address a key cause of WFH burnout. by Christine Liu**

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**Video** Available Online

To watch, please visit [this article](#) at [hbr.org](#).

**A lot of us are feeling lonelier** at work than we ever have before. Due to Covid-19 measures, many professionals have been physically separated from colleagues for close to a year. Left unchecked, loneliness — the feeling that you’re both isolated and unsupported — can lead to burnout. By contrast, having at least one friend at work lays a foundation of connection and security: Someone’s got your back.

According to [a survey from burnout researcher Jennifer Moss and others](#), work loneliness has been particularly pronounced among Millennials and

other young people over the past 11 months. As one respondent wrote, “I started this job six days before the pandemic forced everyone to work from home. I think I have spent a total of about 10 hours face-to-face with my colleagues and maybe 40 to 60 hours in Zoom meetings with them. It’s hardly enough to build trust and respect in a way that would feel meaningful to me.”

So how can you be less lonely at work? The easy answer is to “make friends.” But how do you do that in a professional setting, particularly if you’re stuck at home? (This seems scary and weird.) What do work friendships look like? (And how do they differ from the “normal” friendships you make outside of work?) How do you maintain and manage these relationships over time, both virtually and in person?

In the *Christine vs. Work* video above, I examine my personal sense of loneliness, get some advice, and try to make a new friend (or two).

Want to hear about new episodes of *Christine vs. Work*? In this series, I tackle real-life problems related to work and bring you along for the ride. Subscribe to [HBR’s YouTube channel](#) and turn on notifications. I hope to see you there!



**Christine Liu** is the innovation editor at Harvard Business Publishing’s product incubator.

# What I Learned When I Was Burned Out

by **Ryan Caldbeck**

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Jessica Chou

**For most of my life, I associated** burnout with a lack of self-discipline. I thought it happened to people who weren't attuned to their needs, who pulled all-nighters, who didn't exercise or eat well. As a physically healthy, reasonably successful entrepreneur, I assumed I wouldn't ever burn out. I was very wrong.

I founded CircleUp, a technology-powered investment platform, in 2011 with Rory Eakin. The early years were challenging and thrilling, but in

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mid-2016, as I shared years later in [this post](#), something changed for me. This was the period in which we realized that, to survive, CircleUp would need to pivot. Figuring that out was agonizingly stressful, and it prompted a round of layoffs, the first I'd ever had to navigate as CEO. Just after, we had to secure another financing round for the company and launch our first investment fund. And during all of this, I was juggling brutal personal problems: My wife and I were experiencing fertility issues, and I was diagnosed with cancer. My directors, cofounder, and a handful of close friends knew what was going on, but I kept it from everyone else, fearing the news would damage company morale during an already difficult period.

There were stretches of time when I felt lonely, terrified, depressed. I couldn't sleep, couldn't relax, and was constantly on edge. I began to have crippling headaches and blurred vision — unrelated to my cancer, several MRIs confirmed. Often, I put on a brave face to make sure the board, our investors, and employees felt comfortable. Sometimes, people could see I was struggling. At the end of 2017, one board member suggested I take a six-week sabbatical. But I kept trying to brush my feelings off as “typical founder/CEO exhaustion.” Persistence had been my superpower. I hadn't yet realized that it was a double-edged sword.

Over the next few years, things calmed down professionally and personally. I had surgery to remove the malignant tumors. CircleUp's financing and fund successfully closed, and we moved into post-pivot growth. My wife and I had our second, long-awaited child, and then a third. But the burnout was real. I got very little pleasure from our company's wins, and quite a bit of pain from our losses. One day in fall 2019, my five-year-old daughter said to me: “Daddy, you always look so sad.” I knew then it was time to make a change.

That October I told the board I wanted to step down from the CEO role. I explained that while it would be a hard transition, I believed it was the right move for the company and for me. We agreed to a 12-month

timetable, during which we would raise another round of financing and find my replacement. That, too, was difficult, because I had to show passion and energy despite being exhausted. And then the pandemic hit. The next few months were exceptionally hard, but through an incredible team effort, we raised the round, the new CEO took over in October 2020, and I transitioned to executive chairman.

I learned a great deal from this experience, and have tried to apply those lessons to decisions around mental health at CircleUp, particularly during the pandemic. Over time, and as a team, we have focused on a few key issues: belonging, vulnerability, empathy, sense of control, and external resources.

**Belonging.** When I was CEO, I felt much more isolated than I had at other points in my life. I often asked myself: Can I be “friends” with teammates? Can I share my real feelings? CEOs are hardly alone in this — lots of people are lonely, especially now. At CircleUp, we’ve always tried to facilitate workplace bonding. Our initiatives have included small-group lunches (pre-Covid), a buddy program for new employees, and social events so that people can get to know one another. Lately we do Zoom happy hours, trivia events, and talent shows. We even do occasional in-person events for small groups — masked and socially distanced walks, for example. The point is to create space for employees to relate to each other as people, and hopefully to develop friendships and a feeling of community.

**Vulnerability.** America’s tough-it-out business culture makes it hard to admit when you’re not excelling or even if you’re just feeling insecure. As I was burning out, I found it hard to trust and rely on others, which only made things worse. The team at CircleUp has worked hard to encourage more authenticity and vulnerability — and it truly is a collective effort. For example, over the past year senior executives have written to the entire company to address key events, from the Covid-19 outbreak to the racial justice protests to the storming of the U.S. Capitol. We want our employees to know they don’t have to process their emotions alone. The

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leadership team tries to lead by example, bringing their “whole self” to their roles and not only submitting to 360-degree reviews but also discussing the results with their teams, warts and all. While it’s often uncomfortable to share in this way, we find that it helps to build trust, encouraging more vulnerability from everyone.

**Empathy.** When everyone is working on their own thing, it can be hard to empathize with people on different teams or at different levels. Remote work has exacerbated that. At CircleUp, we encourage leaders to model and talk about the importance of empathy. We also have team members present at regular (now virtual) get-togethers, so everyone knows what others are working on and why it matters to the organization. And in one-on-ones with their direct reports, managers routinely ask, “How are you doing?” and then “How are you really doing?” Empathy is part of how we talk internally about our entrepreneurs, too. CircleUp’s mission is to help startups thrive by giving them the capital and resources they need. So, when we discuss how they are performing, no matter the situation, we insist on using respectful and empathetic language.

**Recognition.** Lack of recognition has been shown to be another driver of burnout. Sometimes people experiencing chronic stress don’t even notice they’ve achieved something good. Once when I was burned out, I got upset about some *positive* comments that a top venture capitalist had posted about CircleUp online. Rather than being excited that he liked us, I was frustrated that he didn’t know us better. We want to make sure everyone at CircleUp feels recognized, so we showcase people’s accomplishments at all-hands meetings and on our company website. On Slack we also celebrate wins big and small.

**Control.** Entrepreneurship is an inherently risky business — you rarely feel in control of your fate. But even at startups, there are ways to make people feel somewhat in control. CircleUp runs on OKRs — objectives and key results — created for every team and employee and made public within our company. These are clear, transparent agreements between each

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person and their manager, and employees can choose how they achieve results, which we hope creates a sense of autonomy. We also encourage employees to block off hours on their calendar to do focused work, or even to spend time with their kids. We want to give people control over their schedules and prevent the back-to-back meetings that push work into the evening hours.

**Outside help.** Depression affects about 7% of U.S. adults in a given year, and it can be connected to burnout. That means at a company with 60-plus employees (CircleUp's size), at least a few people are battling or have battled this affliction. At my lowest points, when every single day was hard to get through, I suspect that I could have been clinically diagnosed as depressed, but I didn't seek the help of a medical professional. At CircleUp, we try to help team members head off serious mental health issues. We offer periodic days off for wellness, a small stipend for mental health expenses, reimbursement for mental health apps, and leadership coaching so that managers learn not only to notice and relieve their own stress but also to see when employees are at risk, engage with them, and point them to outside resources when necessary.

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Not every driver of burnout can be addressed in the workplace. Someone's sleep pattern, exercise routine, personal relationships, and diet aren't areas where a company can typically intervene. But there are a few things leaders can help with, such as managing workloads to create more free time, celebrating outside interests and hobbies, and providing healthy snacks or meals. More important, they can develop a workplace culture that prioritizes team members' well-being. It's up to all of us to recognize the risk of burnout and to build an environment that staves off its causes. The biggest mistake I made in managing my burnout was not reaching out to my board and team members for help. We should all aim to build organizations in which every employee — from the CEO to the frontline

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worker — feels comfortable seeking that kind of support when they need it.

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**Ryan Caldbeck** is the founder and executive chairman of CircleUp.