PROFESSIONAL BURNOUT SYNDROME IN SOCIAL WORKERS, EMPLOYED IN COMMUNITY REHABILITATION CENTRES FOR ADDICTIVE DISEASES: THE CONTEXT OF INTERPERSONAL RELATIONSHIPS

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Abstract. *The article overviews the problematic questions of the study: 1) What interpersonal factors cause professional burnout syndrome in social workers, employed in community rehabilitation centres for addictive diseases; 2) How communal relationships with colleagues can help overcome professional burnout. Research object: interpersonal relationships of social workers. The aim of the article is to reveal possibilities of overcoming professional burnout syndrome on the basis of the experiences of social workers' interpersonal relationships.*
Research methods: academic literature analysis, document analysis, the method of a semi-structured interview, quality (content) analysis, summarizing method were used. The study was conducted in January – March of 2020 in the community rehabilitation centre for addictive diseases.
Empirical research has shown that social workers, employed in community rehabilitation centres for addictive diseases, believe that the threat and risk of professional burnout syndrome arise, first of all, from interpersonal relationships with clients: their negative attitude towards social workers, inadequate client communication culture, lack of positive feedback. Secondly, it is important for social workers to feel emotional and moral support and help of colleagues, share responsibility for work. Joint leisure time improves the quality of communication between colleagues, strengthens the inner relationship in the collective, increases work efficiency.
Keywords: *community rehabilitation centre for addictive diseases, depersonalization, emotional exhaustion, professional burnout syndrome, social workers, interpersonal relationships.*

Introduction

Burnout at work is a long-lasting reaction of an individual to constant emotional and interpersonal stressors in professional activities (Leiter, Bakker, &

Maslach, 2014). According to Abromaitienė and Stanišauskienė (2014), "burnout syndrome is a state of emotional, psychological, as well as physical exhaustion that develops in the work environment through unresolved long-term stressful situations". The positive and negative combination of psychological state in professional activities influences incidents at work, as well as changes in health or overall life experience (Leiter, 2017).

Burnout syndrome at work can result from work content, working conditions, employment conditions, or employment relationships. The content of the work, as a factor influencing the occurrence of stress, is associated with an inappropriate workload (Župirkienė & Babičaitė, 2014). Bullying is also considered an extreme social stressor in the workplace. Stress can lead to negative employee behaviour, which causes low work morality, unemployment, job dissatisfaction, and even leaving the organization (Giorgi, 2015). When social support is felt at work, employees are in better health and psychological states; without feeling support, employees often feel anxious, are prone to depression, complain of poor well-being, and feel dissatisfaction with work (Raižienė & Bakšytė, 2010). Individuals, who experience social support from managers or co-workers at work, feel greater psychological security (Sverk et al., 2002). The analysis of literature shows that social support is very significant, because not only does it improve the involvement of specialists in professional activities, but also with the help of social support significantly better work results are observed.

Research problem. Gudžinskienė & Pozdniakovas (2020) revealed the manifestation of professional burnout syndrome in social workers, employed in community rehabilitation centres for addictive diseases, though in order to prevent or successfully deal with professional burnout, it is necessary at the theoretical and empirical levels reveal factors that cause professional burnout syndrome in social workers, employed in community rehabilitation centres for addictive diseases. One of the factors that cause professional burnout syndrome, is interpersonal factors. Social workers, employed in community rehabilitation centres, are in a state of constant contact with clients and communication. Intensive contact with clients and difficult working conditions with unpredictable results make employees experience high levels of emotional and mental stress, which escalates into weakened motivation, emotional exhaustion, deterioration of physical health, and impaired communication; finally, work quality and performance of social workers decline. Negative consequences of professional burnout are manifested in the social environment, family relationships, as well as work communication between colleagues and clients. Therefore, the problem of disclosing interpersonal actions of the burnout syndrome in social workers, which the following article attempts to address, is of great importance. Only by having knowledge about interpersonal factors that cause professional burnout syndrome,

is it possible to manage the current problem or take measures to prevent professional burnout. The problem can be formulated by the question: what are the interpersonal factors that cause professional burnout syndrome in social workers, employed in community rehabilitation centres for addictive diseases?

The novelty of this article is that the research involved social workers, who provide social services to clients in community rehabilitation centres for addictive diseases. Research results and scientific knowledge gained about interpersonal factors that cause professional burnout syndrome, are especially relevant for those social workers, who work in close relationships with others by trying to help them by providing services, despite the complexity of addictive diseases, and without recognizing their professional burnout syndrome and factors that cause it, overload themselves.

Research object: interpersonal relationships of social workers, employed in community rehabilitation centres for addictive diseases.

This article overviews problematic question of the study: 1) What interpersonal factors cause the professional burnout syndrome in social workers, employed in community rehabilitation centres for addictive diseases; 2) How communal relationships with colleagues can help overcome professional burnout.

The *aim of the article* is to reveal possibilities of overcoming professional burnout syndrome on the basis of the experiences of social workers' interpersonal relationships.

Research methods: academic literature analysis, document analysis, qualitative research type was chosen for the study. In the study, the method of a semi-structured interviews quality (content) analysis, summarizing method was used.

Method

Research methods. Qualitative research type was chosen for the study. According to Žydžiūnaitė & Sabaliauskas (2017), the purpose of a qualitative study is to reveal possibilities of overcoming professional burnout syndrome on the basis of the experiences of social workers' interpersonal relationships. The method of a semi-structured interview was used in the study. This article overviews problematic question of the study: 1) What interpersonal factors cause the professional burnout syndrome in social workers, employed in community rehabilitation centres for addictive diseases; 2) How communal relationships with colleagues can help overcome professional burnout. The obtained data were analysed by using the content analysis method. The qualitative content analysis was performed in the following sequence: the repeated reading of the content of transcribed interview texts, the distinction of meaningful elements in the text

analysed, the grouping of the distinguished meaningful elements into categories and sub-categories, integration of the categories/sub-categories into the context of the phenomenon analysed and the description of their analysis (Žydžiūnaitė et al., 2017). P. Mayring (2000) emphasises that content analysis is a valid method for making specific inferences from the analysed text.

The sample of the research. A criteria-based sample was used in the study. The informants (social workers) were chosen according to the following criteria: 1) social workers who have a degree in the area of social work; 2) are engaged in social work with persons addicted to psychoactive substances (alcohol, drugs); 3) have less than 2-year experience related to work with persons addicted to psychoactive substances (addicted to alcohol, drugs); are employed in the community rehabilitation centres for addictive diseases.

The study was conducted in the January – March of 2020 in the community rehab centres of addictive diseases. 7 social workers participated in the study. Each interview continues form 50 -140 minutes.

Ethics of the research. During the research, the following essential principles of research ethics were complied with (Žydžiūnaitė et al., 2017): **a right not to be vulnerable**, i.e. not making any negative impact on their physical, mental and social health; **a right not to be abused** by ensuring that participation of research participants and information provided to them will not be used against them; **usefulness of the research** – the research participants will fully agreed to participate in the research because their participation in a specific research makes a positive impact on the development of society and knowledge, as well as the research of new opportunities in Lithuania; **respect for personal dignity** – the research participants were interpreted as independent persons, who were able to control their personal behaviour; every research participant had **a right to make a personal decision whether to participate in the research or not**; **justice** – such factors as the benefit, credulity or compromise was not used in order to involve the "necessary" persons in the research; the participants had an opportunity to ask about the research and receive comprehensive information; the research participants were treated in a respectful and helpful manner; **confidentiality** – the research participants were assured that information provided during the research (the collected qualitative data) will not be disseminated; the unprocessed information will not be available to any person, who is not related to the thesis and, specifically, to the exploratory part of the thesis; **anonymity** – the research participants were assured that their provided accurate personal data will not be published without coordinating such possibility in advance. In order to maintain confidentiality, respondents were encoded in letters A, B, C, D, E and F.

Social work in community rehabilitation centres for addictive diseases requires to maintain not only formal relationships, and interpersonal relationships

play an important role in such an organization. Social workers, however, have to deal with clients' character traits, such as lack of gratitude and/or resistance, that do not satisfy interpersonal relationships between social workers and their clients, which leads to frustration that eventually escalates into symptoms of professional burnout (Targamadzė & Talkovskytė, 2015, Drug Control Department under the Government of the Republic of Lithuania, 2008).

Interpersonal factors that cause professional burnout syndrome are manifested as reactions to emotional requests, deficiencies in reciprocal communication, worries due to injustice (Ide, 2018). Research on burnout syndrome revealed that people expect fair interpersonal relationships, in which the amount they invest must be proportionate to the amount they receive (Katashinskaja, 2015).

Scientific research on community psychology analyses importance of security, ability to competently act in the community, social guarantees, and social structures, i.e. strength, purpose and adequate control of interpersonal relationships. The following conditions of self-creation are necessary for the formation of an institutional community: 1) attitude of people and groups of people to the commonality that is formed by the element of preconceived moral attitudes: conscience, respect, voluntariness, responsibility, social relations, self-assessment; 2) real social status (activity, field, meaning); 3) quality of communication that consists of possibilities of communication, peculiarities or possibilities of the assessment of reciprocity (interaction or cooperation); 4) moral compatibility of social groups; 5) peculiarities of activity of social groups: purposefulness, publicity, positivity, openness. Community traits are universal and can be applied to various types of communities (Peterson, Speer, & McMillan, 2008).

An institutional community is people, who have a common goal or interests, for which they feel and take mutual responsibility, acknowledge interrelationships, respect individual differences of members, and are honestly committed to the well-being of each other and of the group (Wood & Judikis, 2002). Community provides feelings of belonging, identity, emotional connection, and well-being. By experiencing and perceiving a sense of community, people adapt better, maintain relationships with others, feel stronger social and spiritual support of the surrounding people, pursue higher goals than personal ones. A strong sense of community acts as a protection against threats, helps to overcome unforeseen changes.

The expression of community in an institution is complicated by: employee inactivity, negative values, hierarchy within the institution (unequal relations), indifference of employees to the goals of the institution, individualistic needs (Šinkūnienė, 2012). Therefore, the following phenomenon existing within the

institution, i.e. community, determines the quality of the activity of a social institution by encompassing a wide variety of complex emotional, cognitive and activity areas that create the microclimate and spiritual atmosphere of the institutional community.

Results

Interpersonal causes that are related to the occurrence of professional burnout syndrome. The analysis of data on interpersonal causes allowed to distinguish two categories of interpersonal causes that lead to professional burnout syndrome: ***causes related to clients and causes related to the collective*** (Fig. 1).
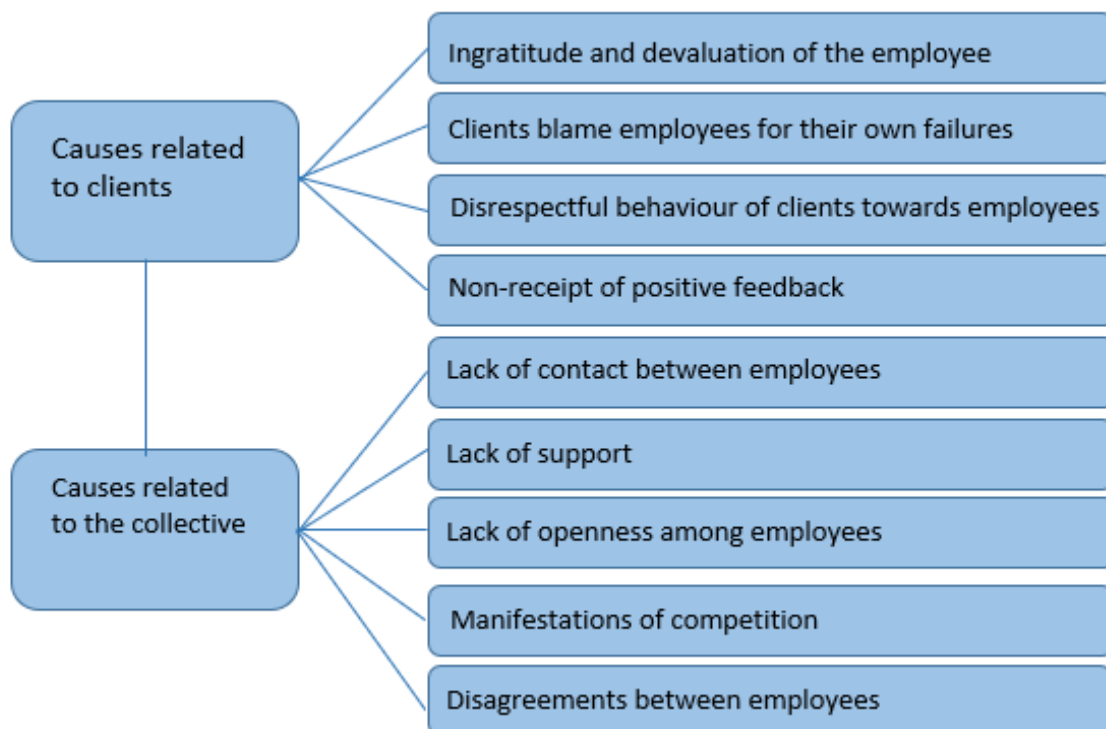

Figure 1 **Interpersonal Causes Related to the Occurrence of Professional Burnout Syndrome**

One of the categories distinguished after analysing interviews of the research participants about interpersonal causes – ***causes related to clients*** includes four subcategories: ingratitude and devaluation of the employee; clients blame employees for their own failures; disrespectful behaviour of clients towards specialists; non-receipt of positive feedback. In terms of ingratitude and devaluation of the employee, informants claimed: *"... <...> give up on you..." (A),*

"...many people say that it is an ungrateful job, that is nobody will make much of you and won't praise <...>; <...> like a floor cloth, wiped their feet on you and "that's all, thank you"..." (D). Even though social workers are professionals, the following ungrateful behaviour of clients can negatively affect both the novice employee and the professional. There are cases when clients blame employees for their own failures; participants of the research indicated that: *"...give you such a look that it seems you are to blame for his problems." (A), "...blamed me..." (D), "...always wants to justify his leave, all around are to blame for this, but just not himself..." (F).* Accusations are often unfounded, individuals who are addicted to psychoactive substances are more likely to look for culprits in the environment than change their destructive behaviour. The following behaviour manifested itself not only in accusation of employees, but also in disrespectful behaviour: *"...and insults <...>, <...> simply, flings some kind of a remark..." (C), "...biting jokes sometimes..." (F), "...looks as if at a policeman..." (E).* In the long run, the following behaviour of clients disappeared, if individuals involved in the recovery process were able to go through the programme from start to finish. Since the recovery path is a long-term process and not all clients successfully go through it, social workers identified a lack of positive feedback from individuals, who are or were treated in the community rehabilitation centre for addictive diseases: *"...the main thing <...> when you don't get that feedback..." (A), "Lack of feedback..." (D), "...ungrateful profession...want to hear a good word <...> but there is no..." (F).* Employees also have feelings and expectations, it is natural to want to receive positive feedback that would increase motivation to continue working. Without receiving encouraging words from clients, social workers expect to receive them from colleagues.

The analysis of research data on interpersonal causes of professional burnout syndrome revealed another category – ***causes related to the collective*** (Fig. 1). Paradoxically, social workers, employed in community rehabilitation centres for addictive diseases, experience great stress when working with individuals addicted to psychoactive substances, and as a result, the collective seems to be an emotional support for the social worker, whose strong connection would compensate for negative experiences with clients. However, participants of the research claimed: *"Lack of connections is distracting..." (A), "...lack of communication... " (E)*; lack of connection between employees complicates both the work efficiency of social workers and the formation of friendly atmosphere at work. Informants also noted that: *"...lack of that peer support of some kind..." (B), "...feeling that I am alone <...> I needed support...but there was no" (D)*; the desire to feel support of colleagues is extremely important, but not always achievable. In addition to the aforementioned, there is a lack of openness among employees, social workers who participated in the research claimed: *"...I never*

said that aloud, I never talked about that <...>; <...> I didn't say that, thought "aw", no point of speaking <...> they won't understand anyway..." (D), "...had to manoeuvre..." (C), "...don't want to burden others with my problems..." (F). It is impossible to maintain a friendly relationship based on mutual understanding in the collective without sincere and open communication between colleagues. Relationships tend to evolve into manifestations of competition. Participants of the research indicated: *"...that competition was felt..." (A), "competition, some kind of <...>, <...> I don't even know how to name it, matches, races, such friction inside and that evokes such a feeling <...>, <...> something like competitiveness <...>; <...> always wanting to do well and better than others, well, it's very difficult that somebody will do better than you..." (C).* Failure to work on strengthening the collective in a timely manner might result in manifestations of competition turning into disagreements between employees. Informants pointed out: *"...difficulties, and if on top of that while speaking to colleagues <...>, <...> there are some disagreements in communication <...> that affect your expressed opinion, or if you don't want to express, refrain from expressing it, because you don't want to offend <...>, <...> had to manoeuvre..." (C), "...conflict situations..." (B), "...personal disagreements with a nearby, volunteer, staff, employee..." (A), "...difference of opinions..." (D).* Attention is drawn to the fact that disagreements among employees can divide the team, which can disrupt the functioning of the whole community as a system.

The analysis of experiences of social workers, employed in community rehabilitation centres for addictive diseases, revealed that interpersonal causes that lead to professional burnout syndrome are closely related to clients, their negative attitude towards social workers, negative client communication culture towards employees. It is very important for employees to feel emotional support from colleagues, while lack of abilities to maintain strong interpersonal relationships with colleagues leads to competition and disagreements, which can cause professional burnout syndrome in social workers, employed in community rehabilitation centres for addictive diseases.

Help and support of colleagues in overcoming professional burnout syndrome. The analysis of obtained results on the help of colleagues and support of social workers in overcoming professional burnout syndrome, allowed to distinguish three categories: moral support of colleagues; support in helping to do the necessary work; free time with colleagues (Fig. 2).
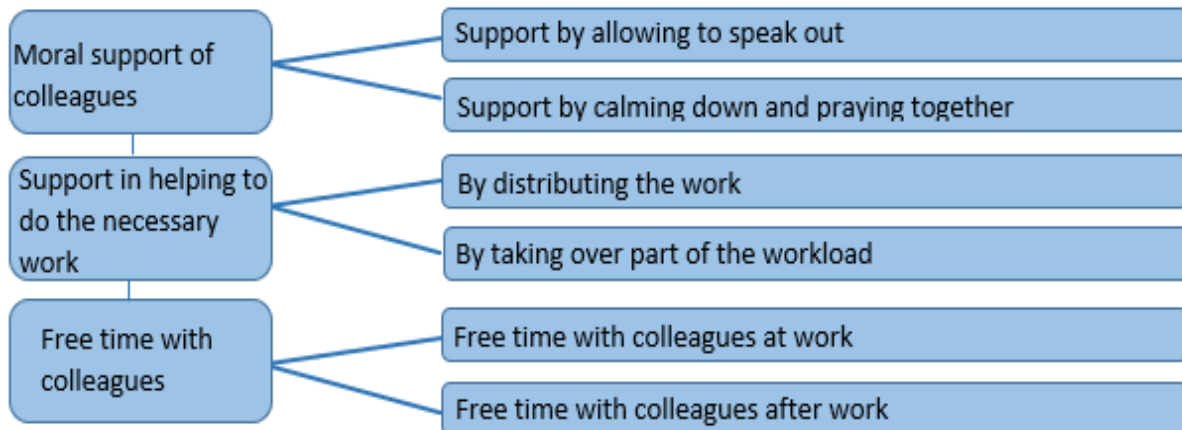
Figure 2 ***Help and Support of Colleagues in Overcoming Professional Burnout Syndrome***

The research revealed that social workers rely on the moral support of colleagues. The analysis of informants' responses about the moral support of colleagues allowed to distinguish two subcategories: support by allowing to speak out; support by calming down and praying together. Research participants claimed: *"...help by talking <...> to those, with whom I work..." (A), "...I speak it out that way..." (C), "...drink tea, talk <...> strong support..." (D), "...at times a simple conversation is enough <...> it comforts, and we talk..." (E).* Informants pointed out that support of colleagues by allowing to speak out, is an effective tool that helps to calm down and stop stress. The informants also indicated that colleagues are able to calm them down: *"...see, perhaps, that I have anxiety <...>, support by good word <...>; <...> at the same time help <...> by understanding..." (A),* and support them by praying together: *"Common prayer..." (B).* The possibility for research participants to receive support of colleagues at work greatly facilitates the overcoming of professional burnout syndrome, because it is in the work environment, which is the main risk factor for the development of professional burnout, that there is the greatest probability of "burnout".

The research revealed that support of colleagues in helping to do the necessary work manifests through: distribution of work among themselves; help by taking over part of the workload. Research participants specified: *"...I often share work..." (F), "...the workload is such, it is simply distributed..." (C), "...we share those tasks..." (E).* It is very important that informants have the opportunity to share responsibilities and tasks; it significantly reduces the risk of fatigue and ending up in a state of constant stress, and it also reduces the risk of professional burnout. Social workers, who participated in the research, claimed: *"...taking some workload..." (B), "...I can take that load off a bit, there are more people,*

they take it over..." (C), *"...there were cases when I also didn't do that, it was done for me...or I do it"* (D). Research participants indicated that the ability to delegate some of the work, which could not be done on time due to various reasons, to colleagues, helped to maintain mental and physical health, remain able to work, because there was no need to overwork.

The analysis of informants' responses about free time with colleagues, allowed to distinguish two subcategories: free time with colleagues at work; free time with colleagues after work (Fig. 2). Participants of the research said that there are cases when they spend their free time with colleagues at work: *"...in summer we promote active leisure time <...> volleyball..."* (F), *"...more active sports, that is football <...> we go to play basketball..."* (A), *"...volleyball in summer..."* (E). Active sports with colleagues provided social workers, employed in the community rehabilitation centre for addictive diseases, an opportunity to offload by playing team games and at the same time strengthen the connection in the collective. Since communication between colleagues is one of the key factors in overcoming professional burnout syndrome while working in a team in the community rehabilitation centre for addictive diseases, trips for the collective were organized. Informants claimed: *"...first times going to Poland, to the water park <...>; <...> to bowling..."* (C), *"...go <...> to the sauna <...> but not with rehabilitees..."* (B), *"...bowling with colleagues..."* (A). For social workers, who participated in the research, free time with colleagues outside the work environment helps to bring together the collective, become more united, increase work efficiency, improve communication, time spent and positive emotions experienced together bring people closer and create conditions to relax together.

In summarizing the role of help and support of colleagues in overcoming professional burnout syndrome in social workers, employed in community rehabilitation centres for addictive diseases, the research revealed: moral support of colleagues helps research participants to calm down, stop stress, and facilitates the overcoming of professional burnout syndrome in the work environment; support of colleagues in helping to do the necessary work significantly reduces the risk of fatigue, ending up in a state of constant stress, as well as helps to maintain mental and physical health; free time with colleagues provided informants with the opportunity to offload physically, strengthen interpersonal relationships of the collective, increase work efficiency, improve communication between colleagues.

Discussion

While theoretically analysing professional burnout syndrome in social workers and its overcoming, other works that would have examined experiences

of social workers, employed in community rehabilitation centres for addictive diseases, related to professional burnout and coping with it, were not found. The examination of the empirical data obtained from social workers who participated in the research, confirmed certain theoretical statements: interpersonal factors (Targamadzė & Talkovskytė, 2015) were revealed in the research through clients' ingratitude and devaluation of employees, accusations of employees for clients' failures, disrespectful behaviour of clients towards research participants, non-receipt of positive feedback, lack of connection between employees, lack of openness between employees, manifestations of competition and disagreements between employees.

The analysis of research participants' responses also highlighted certain contradictions to some theoretical statements: according to the Drug Control Department under the Government of the Republic of Lithuania (2008) and S. Mačiulaitė (2012), individuals participating in the recovery program follow employees' example of social communication and problem solving in a collective. The following role prevented research participants from being themselves, high demands for themselves led to professional burnout. S. Mačiulaitė (2012) claims that it is not enough for social workers to maintain only formal relationships with clients, as personal involvement and interest of social workers help community members to become more successfully involved in the recovery process. However, the research revealed that a clear non-separation of private life from work for social workers, employed in community rehabilitation centres for addictive diseases, as claimed by them, contributed to the occurrence of the professional burnout syndrome.

Due to little or no research on professional burnout syndrome in social workers, employed in community rehabilitation centres for addictive diseases, or its overcoming, practical significance of the obtained results allows to better understand the specifics of the research participants' work, reveal research participants' experiences of professional burnout and possibilities of overcoming it while working in a specific social service institution with individuals addicted to psychoactive substances.

Conclusions

Empirical research has shown that social workers, employed in community rehabilitation centres for addictive diseases, believe that the threat and risk of professional burnout syndrome arise, first of all, from interpersonal relationships with clients: their negative attitude towards social workers, inadequate client communication culture, lack of positive feedback. Secondly, lack of communal interrelationships lead to disagreements and competition. It is important for social

workers to feel emotional and moral support and help of colleagues, share responsibility for work. Joint leisure time improves the quality of communication between colleagues, strengthens the inner relationship in the collective, increases work efficiency. Positive interpersonal relationships of social workers, employed in community rehabilitation centres for addictive diseases, reduce the risk of fatigue, constant stress, and help maintain mental and physical health.

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