

COMMENTARY

The conceptualization and measurement of burnout: Common ground and worlds apart

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Abstract

In this edition of *Work & Stress*, Kristensen and his colleagues critically discuss the Maslach Burnout Inventory (MBI) and present an alternative, more general instrument to measure burnout that exclusively focuses on exhaustion. Here we critically examine their reasons for developing a new burnout measure, as well as the theoretical foundations of this measure. Whereas we agree with Kristensen et al.'s remarks concerning the availability and item wording of the MBI, we do not share their concerns regarding its theoretical underpinnings. In our view, burnout should be conceptualized as a primarily work-related syndrome of (at least) exhaustion and depersonalization/cynicism. The MBI would seem to fit that conceptualization very well.

Studies published in *Work & Stress* typically examine well-defined research questions and present clear and unambiguous answers to these. In other cases, contributions report on research that are best characterized as “work in progress”. Although such studies may perhaps be considered not fully developed from one point of view, they deserve to be published if they present fresh and provocative ideas and findings on a particularly interesting issue in occupational health psychology. The study of Kristensen and his colleagues, published in this issue, is a very good example of the latter type of paper. Focusing on burnout, the authors: (a) eloquently and elaborately criticize the instrument that is currently considered the ‘gold standard’ to measure burnout – the Maslach Burnout Inventory (MBI), and (b) present a new instrument for assessing burnout, namely, the Copenhagen Burnout Inventory (CBI).

As scientists we respect and applaud any attempt to innovate a long-standing paradigm. Yet, as a Dutch proverb says, ‘do not throw away your old shoes unless you have got new ones’. Are the old MBI-shoes really that worn-out, and do the new CBI shoes improve upon the ancient MBI pair? In this Commentary we address some of the arguments and ideas for

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changing the shoes as put forward by Kristensen et al. In doing so it will become clear which ground we share and in which respects we are worlds apart.

Are there six reasons for not using the MBI-Human Services Survey?

In their paper, Kristensen et al. present six reasons why they chose not to use the standard MBI-Human Services Survey (MBI-HSS), but rather to develop their own measure of burnout. As similar concerns have been expressed elsewhere, it is good to discuss these reasons in some detail: to which degree are they valid? In this section we first summarize (in italics) the six reasons given by Kristensen et al. for not using the MBI-HSS; then we indicate to which degree we agree with them.

1. ***Circularity.*** *Burnout as measured by the MBI is by definition restricted to the human services.*

This was indeed the case until 1996, when the MBI-General Survey (MBI-GS) was introduced (Schaufeli, Leiter, Maslach & Jackson, 1996). As a matter of fact, this “circularity” argument was the very reason to develop a burnout questionnaire that could be applied in *any* occupational context.

2. ***Unclear relationship between the MBI and the burnout concept.*** *The MBI and the burnout concept do not match because the MBI includes three different measures that – according to the test manual – should not be combined into a single score: exhaustion, depersonalization (or cynicism in the MBI-GS), and reduced personal accomplishment (professional efficacy).*

Meanwhile, clinically validated cut-off scores for the MBI have been developed in The Netherlands (Schaufeli, Bakker, Schaap, Kladler & Hoogduin, 2001) that allow the scores on the three dimensions to be combined in order to discriminate ‘burnout cases’ from ‘non-cases’ (Brenninkmeijer & Van Yperen, 2003; Roelofs, Verbraak, Keijsers, de Bruin & Schmidt, 2005). Based on this research, the Dutch Association of Occupational Physicians recommends the use of the MBI-GS as a tool for diagnosing work-related mental problems.

3. ***A mixture of an individual state, a coping strategy and an effect.*** *Burnout as measured by the MBI-HSS consists of theoretically distinct aspects – an individual state (emotional exhaustion), a coping strategy (depersonalization) and a consequence (reduced personal accomplishment) – that should be studied in their own right, instead of lumping them together under the label of burnout.*

The three components of the burnout syndrome can conveniently be studied separately. But what is wrong with combining an individual state with specific coping behaviours when both are manifestations of one underlying syndrome? For instance, anxiety disorders are defined by a particular state (e.g., sweating, trembling) in combination with specific coping behaviours (e.g., avoiding particular places that elicit anxiety). Admittedly, previous research has shown that lack of personal accomplishment works differently from the two other MBI dimensions, suggesting that lack of personal accomplishment might not be part of the burnout syndrome. However, it would seem possible that previous findings largely reflect a statistical artefact; the accomplishment items are positively worded while the items of the exhaustion and depersonalization scales are negatively worded. The correlations between personal accomplishment and the two other dimensions increase markedly when accomplishment is measured using *negatively* worded items (Schaufeli & Salanova, submitted).

4. **Unacceptable questions.** *Because of their extreme and outspoken nature, some MBI items trigger hostile responses from the respondents (e.g., ‘I feel I treat some recipients as if they were impersonal objects’).*

In our research in The Netherlands we have similar experiences with the MBI. This sometimes leads to the violation of the assumption of normality for the more extreme items. However, in spite of this problem, a wealth of studies documents the cross-national validity of the MBI (e.g., Schaufeli & Janczur, 1994; Schutte, Toppinen, Kalimo & Schaufeli, 2000).

5. **It is unclear what the MBI-GS measures.** *By changing the items of the original MBI, which was developed exclusively for use in the human services, into more general items, it is unclear what the resulting MBI-GS measures.*

The MBI Test manual (Maslach et al., 1996, p. 20) states that ‘The MBI-GS defines burnout as a crisis in one’s relationship with work, not necessarily as a crisis in one’s relationship with people at work’. This means that: (a) MBI-GS *exhaustion* refers to work-related fatigue, not necessarily resulting from working with people; (b) MBI-GS *cynicism* refers to mental distancing from one’s work, not necessarily from one’s recipients; (c) MBI-GS *reduced professional efficacy* refers to a sense of low accomplishment at work, not necessarily in contacts with recipients. Thus, the burnout dimensions of the original MBI can be construed as *special cases* of general phenomena that apply across all work domains: fatigue, mental distancing, and poor efficacy.

6. **The MBI is not available in the public domain.** *The MBI is protected by copyright and distributed by a commercial publisher.*

We agree that this is an undesirable situation from a scientific point of view. However, in practice the MBI is used freely by the scientific community: its items have been published by Maslach and Jackson (1981).

In sum, we share some common ground with Kristensen and his colleagues – points 4 and 6 – but we also are worlds apart from them as far as points 1, 2, and 5 are concerned. In a way, their point 3 (referring to the conceptualization of burnout in general and the MBI in particular) is the heart of the matter, because this issue has been the most important reason for developing the CBI. For that reason we elaborate on it below.

The conceptualization of burnout

As was noted elsewhere, ‘... the MBI is neither grounded in firm clinical observation nor based on sound theorizing. Instead, it has been developed inductively by factor-analysing a rather arbitrary set of items’ (Schaufeli, 2003, p. 3). Thus, we are not surprised that the weak theoretical underpinnings of the three MBI dimensions have often been lamented. Logically speaking three questions need to be answered in order to be sure to identify the right (number of) burnout dimensions:

1. *Do three dimensions suffice?* Although clinical experience (Hoogduin et al., 2001), psychometric studies (Van Horn, Taris, Schaufeli & Schreurs, 2004) as well as experimental evidence (Van der Linden, Keijsers, Eling & Van Schaijk, 2005) suggest that cognitive deficits (e.g., poor memory, attention problems) are prominent in employees suffering from burnout, the strategy of including as many burnout characteristics as possible in the assessment of burnout should be discouraged.

It leads to a laundry-list of symptoms (or “dimensions”) that are ‘typical’ for burnout. Rather, the principle of parsimony requires that we should look for the smallest number of core symptoms that bear theoretical meaning and that are sufficient to characterize burnout.

2. *Are the three MBI dimensions the right dimensions?* As noted in our response to criticism number 3 above, there are some doubts as far as the inclusion of professional efficacy is concerned. However, before excluding this dimension from the MBI more research is needed with a scale that taps *lack* of efficacy directly rather than reversing efficacy scores. At this point we can learn from research on the nature of affect that has shown that low scores on negative affect (e.g., sadness) do not reflect positive affect (e.g., cheerfulness), and vice versa (Russell & Carroll, 1999).
3. *Are three dimensions too many?* Kristensen et al. clearly feel that three dimensions are too many for characterizing burnout, and they reduce burnout to a single dimension tapping physical and mental fatigue and exhaustion. This has been suggested before and several single-factor scales can be found in the literature that reduce burnout to mere exhaustion (e.g., Pines & Aronson, 1981; Shirom, 2003). Similarly, the MBI exhaustion scale has frequently been used alone as a measure of ‘burnout’ (e.g. Bekker, Croon & Bressers, 2005, this edition). But why equate burnout with fatigue? When burnout is identical to fatigue, the term is redundant and there is no need to develop another instrument. In that case existing (occupational) fatigue inventories may be used, including the *Checklist Individual Strength* (Beurskens et al., 2000), the *Fatigue Assessment Scale* (Michielsen, De Vries & Van Heck, 2003), and the *Need for Recovery Scale* (Van Veldhoven & Broersen, 2003). Like Kristensen et al., we are inclined to believe that burnout can be measured using fewer than three dimensions. However, instead of reducing burnout to one single dimension, we maintain that burnout is a form of occupational fatigue that is characterized by both exhaustion *and* withdrawal. As the grand old man of psychological fatigue research, Edward Thorndike (1914) has put it, the basic tenet of fatigue is ‘the intolerance of any effort’. In his view, fatigue is both the *inability* and the *unwillingness* to spend effort, reflecting its energetical and its motivational component, respectively. The unwillingness to perform manifests itself by increased resistance, reduced commitment, lack of interest, disengagement, mental distancing, and so on – in short, psychological withdrawal. This serves as a protective mechanism to prevent the individual from spending additional energy and thus entirely depleting its resources. In ‘normal’ occupational fatigue, withdrawal is highly functional because it fosters recuperation or switching to another task, and will therefore reduce fatigue. In chronic fatigue, however, the protective withdrawal mechanism is *dysfunctional* because it has habituated into relatively permanent impaired motivation. Withdrawal has become a part of occupational life: instead of the solution it is part of the problem that we call burnout (see also Meijman & Schaufeli, 1996). Thus, in our view, inability (exhaustion) and unwillingness (withdrawal) constitute two inseparable parts of the burnout phenomenon. The third MBI component, reduced professional efficacy, may either act as a precursor or as a consequence of occupational fatigue, depending on one’s perspective. In the former case inefficacy would act as a lacking personal resource, whereas in the latter case it would represent poor self-evaluation (Taris, Le Blanc, Schaufeli & Schreurs, 2005, this edition, for a discussion). Burnout, as we conceive it, may thus be measured with the MBI, or alternatively with the *Oldenburg Burnout Inventory* (OLBI), that also assesses two dimensions: ‘exhaustion’

and 'disengagement'. The OLBI does not include unacceptable questions, is freely available, and its convergent validity with the MBI has been demonstrated (Halbesleben & Demerouti, 2005, this edition).

Burnout: a work-related or a general phenomenon?

One important issue remains to be discussed: the alleged work-relatedness of burnout. We agree with Kristensen and his colleagues that there is no reason to assume that burnout is limited to the human services. In our view, the basic structure of burnout is the same across occupations, namely the combination of exhaustion and withdrawal. In human service work these dimensions are related to working with people, since they constitute the object of the employee's job, and manifest themselves in exhaustion resulting from interpersonal strain (emotional exhaustion) and withdrawal from recipients (depersonalization). In other professions the core symptoms of burnout manifest themselves as exhaustion and withdrawal (cynicism) from work in general. Both versions of the MBI – the Human Services Survey and the General Survey – may be applied in the human services, whereby the former indicates burnout levels as related to working with recipients and the latter burnout levels as related to one's work in general. To be sure, this does not mean that there are two qualitatively different types of burnout, but rather that burnout manifests itself both in relation to recipients (the focus of human service work) and in relation to the job in general (of which working with recipients is the core element). Supposedly, both manifestations will be highly correlated, as suggested by a correlation of .78 between the CBI-work and the CBI-patient (Winwood & Winefield, 2004).

All in all, extending burnout to the entire non-work domain as suggested by Kristensen and his colleagues does not seem a good idea to us. In doing so, a new term 'burnout' would be introduced to cover the old and well-known concept of fatigue. Such 'new wine in old bottles' would only add to the confusion. But what is more, it would not concur with our theoretical notion that burnout is a combination of exhaustion (lack of energy) and withdrawal (lack of motivation). Following our line of reasoning, the concept of burnout may be applied to work-like activities outside the occupational context that are structured, coercive in nature, and directed towards specific goals. In other words, to activities that, from a *psychological* perspective, are similar to work. Such activities may not only be exhausting, but they may also allow individuals to withdraw from it. One example is student burnout (Schaufeli, Martinez, Marques Pinto, Salanova & Bakker, 2002). Although students are neither employed nor do they hold jobs, from a psychological perspective their core activities can be considered 'work'. They attend classes and make assignments (structured, coercive activities) in order to pass exams and acquire a degree (specific goals). Hence, burnout may manifest itself in students by feeling exhausted because of study demands and having a cynical and detached attitude towards one's study. Other examples would be athlete or artist burnout, or burnout among volunteers. Thus, while burnout may occur outside the work context, we believe the term should refer to a phenomenon that occurs in response to activities that are psychologically similar to work.

Conclusion

In response to Kristensen et al.'s contribution, in this Commentary we have discussed several problems that relate to the conceptualization and measurement of burnout. Roughly speaking, these problems may be categorized as methodological/practical problems versus conceptual problems. The first category includes problems regarding the cross-cultural

consistency of the MBI and its availability. Although we agree with Kristensen et al. that these two aspects are problematic, they have not withheld the MBI from becoming the most widely used instrument to measure burnout. In addition, previous research has suggested that the MBI can be fruitfully employed in a wide variety of countries.

The conceptual problems are more interesting, and here our spirits part. In our opinion, burnout should be conceptualized as a work-related phenomenon consisting of at least two dimensions (fatigue and withdrawal, perhaps supplemented with lack of efficacy) that can be measured generally (i.e., using items applicable to a wide variety of occupations) or specifically (with items tailored towards one type of occupation only). The distinction between these two approaches is a matter of specificity, and does not involve a major change in our orientation towards the basic conceptualization of burnout. Others may broaden and/or narrow the definition of burnout (by extending its definition to include the non-work domain, or by focusing on single dimensions, such as exhaustion), but in doing so the distinction between burnout as a work-related phenomenon and general, context-free fatigue would become blurred – perhaps unacceptably so. To be sure, we do not believe that the results of studies on work stress using the CBI would differ strongly from studies in which the MBI – or any other burnout measure – is used, at least as far as exhaustion is concerned; in that sense, we are certainly looking forward to new work by Kristensen and his colleagues using their CBI. Rather than to equate burnout with fatigue, however, we reserve the term “burnout” for studies in which a *work*-related syndrome of fatigue and withdrawal is studied. In this context, the MBI would seem to be a perfectly acceptable instrument for measuring burnout.

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