

# We Hear You

## Let's Talk About Burnout.

Since the outset of the pandemic, researchers from Saskatchewan universities and colleges have been learning from people just like you – healthcare employees struggling to navigate work in a pandemic. In sharing heartfelt stories of your struggles and your work to redefine success, you emphasized four things that deeply affected your experience of work in a pandemic – teamwork, communication, leadership, and burnout. This newsletter series summarizes some of the valuable things we learned through your stories.

### **Burnout from managing moral distress**

During the pandemic, you shared stories about workplaces and people that were strained to capacity:

*“I knew we were running a marathon – I just didn't know it was going to be this long.”*

Yet, for many of you, burnout was less about feelings of overwork than about feelings related to moral distress. You shared that your distress increased during COVID-19 outbreaks as you shifted attention from supporting treatment, rehabilitation, and quality of life toward strong infection control. Seeing other people suffering and feeling as though you could not do much to help increased your stress.

*“Seeing the isolation of the residents is heartbreaking.... It's so much isolation for them. Even for the ones that can't speak, you can tell by the change in the way they eat; their failure to thrive. It's very sad.”*

### **Supporting Each Other**

Public health measures to control COVID-19 reduced your contact with support persons at work and outside of work, and this compounded your stress.

You told us that when managers acknowledged the dilemmas introduced by new public health requirements, you felt heard.

You also benefited from “in the moment” support from peers and team leads who were experiencing the same challenges and concerns, and from the support of patients/residents, family and community members who accepted public health measures that were very hard on them and did everything they could to prevent the transmission of COVID-19.

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### There is no one size fits all way to cope

You also said that what it took to cope with distress and burnout was personal. From ways to manage stress to shifting perspectives on what working in health care means, we were amazed at the unique strategies you used to manage burnout during a pandemic.

“I had to create a ritual around arriving at work, because I was starting to feel burnout knowing I wouldn't get to all of the referrals. I created a ritual around my shoes, actually, because I have shoes that I only wear at the hospital. When I put my shoes on, I would pick up my workload. When I left work, I would change my shoes, and tell myself have done all that I can.”

“So, I think I've made an effort not to read updates and not to watch news conferences, just to help separate my work life from my personal life.”

### Strong even in our most vulnerable moments

Despite the hardship, burnout, and bereavement you faced, many of you told us you learned you were more capable than you ever imagined. Despite your vulnerability, you showed up and gave it all you had. Some of you took the chance to share your struggles with your colleagues who were managing the same issues. In sharing your struggles and successes, you bolstered feelings of hope and morale among colleagues. Your sharing also helped facilitate moments of respite when things were moving fast and stresses were high, including during outbreaks.

“One of the things that I realized coming out of the outbreak was just how strong I am.... We literally went about 60 days without stopping. I just kept one foot in front of the other and calm and steady and positive.”

### We hear you

Your care and concern for those you serve did not waver even as the pandemic fundamentally altered your experience of work and taxed your personal resources. In diverse ways, you keep finding the strength to care for your patients, for each other, and for yourselves.

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