

Workplace Stress and Burnout in EMTs, Nurses, and Public Health Professionals: Contributing Factors and Strategies for Building Resilience

Hana Hassan Alsharif¹, Abdullah Abdulrahman Alarjan², Rehab Salem Alshareef³, Abdullah Hussain Hameed Alsharif⁴, Ayat Hassan Mohammed Alshareef⁵, Faten Hussain Alshareef⁶, Eman Mohammad Ahmad Alobaidi⁷, Ageel Naif Murea Alobaidi⁸, Amani Mohammad Ali Alshareef⁹, Khadijah Mohammed Ali Alsharif¹⁰

1. Cardiac Nurse Specialist, Khalidiya Health Center
2. Nurse, Al-Jaafari Health Center In Al-Ahsa
3. General Nursing, Wadi Alfurea General Hospital
4. Public Health, Irada AndMental Health Complex- Irada Services
5. General Nursing, Wadi Alfurea General Hospital
6. General Nursing, Wadi Alfurea General Hospital
7. Nurse Technician, Wadi Alfurra General Hospital _OPD
8. Emergency Medical Technician, Wadi Alfurra General Hospital
9. General Nursing, Wide Alfarr Hospital
10. General Nursing, Waera Primary Health Care

Abstract

Workplace stress and burnout are prevalent in high-demand healthcare professions, including Emergency Medical Technicians (EMTs), nurses, and public health professionals. These individuals often encounter intense, emotionally taxing situations, long working hours, and exposure to trauma, making them vulnerable to burnout. This paper examines the contributing factors to workplace stress and burnout in these professions and explores strategies for building resilience. Key strategies include organizational interventions, psychological support, and the promotion of self-care practices. Understanding these dynamics is crucial for improving the well-being of healthcare professionals and ensuring the sustainability of public health services.

keywords: Workplace Stress, Burnout, Resilience, Emergency Medical Technicians (EMTs), Nurses, Public Health Professionals, Healthcare Professionals

Introduction

Healthcare professionals, including Emergency Medical Technicians (EMTs), nurses, and public health professionals, play a pivotal role in safeguarding public health and responding to medical emergencies.(1)

Despite their critical importance in healthcare systems, these workers are at a high risk of experiencing workplace stress and burnout. (2)

Burnout, characterized by emotional exhaustion, depersonalization, and a reduced sense of accomplishment, has been linked to a range of negative outcomes, including decreased job performance, mental health issues, and high turnover rates. The need for effective strategies to mitigate stress and burnout is therefore urgent.(3)

Workplace stress and burnout are prevalent among EMTs, nurses, and public health professionals due to various organizational, emotional, and personal factors. However, by implementing strategies such as organizational support, stress management programs, peer support systems, and self-care initiatives, healthcare organizations can mitigate burnout and foster resilience among workers. (4)

EMTs are often the first responders in emergency medical situations, providing life-saving care in unpredictable and high-pressure environments. While their role is essential, the stress inherent in their work can lead to burnout, affecting their mental health, job satisfaction, and overall well-being.(5)

Burnout not only impacts the EMTs themselves but also has consequences for patient care, as fatigued or emotionally exhausted workers may not perform at their best. Given the increasing demands on emergency medical services (EMS), it is vital to address the factors contributing to burnout and develop strategies to help EMTs build resilience.(6)

Addressing burnout is essential not only for the health and well-being of healthcare professionals but also for improving patient care and ensuring the sustainability of the healthcare workforce. By proactively addressing these issues, healthcare systems can reduce the risk of burnout, improve job satisfaction, and enhance overall patient outcomes.This paper reviews the contributing factors to workplace stress and burnout in EMTs, nurses, and public health professionals, and presents evidence-based strategies for enhancing resilience to help them cope with these challenges.(7)

Contributing Factors to Workplace Stress and Burnout

1. **Workload and Time Pressure** One of the most significant contributors to stress and burnout in healthcare professionals is excessive workload. EMTs, nurses, and public health professionals are often required to manage high caseloads, meet stringent deadlines, and work long hours. The combination of physical demands and time pressure can lead to fatigue and emotional strain. In particular, the unpredictable nature of emergencies and public health crises exacerbates stress levels.
2. **Exposure to Trauma and Emotional Distress** Healthcare professionals frequently encounter traumatic situations, particularly EMTs and nurses working in emergency departments. The emotional toll of witnessing suffering, death, and severe injury can lead to emotional exhaustion. Public health professionals, particularly those in crisis response and disease management, may also experience stress related to the scale and urgency of their work. Prolonged exposure to these stressors contributes to burnout, impacting both mental and physical health.
3. **Lack of Support and Recognition** A perceived lack of support, recognition, and resources can contribute to feelings of isolation and dissatisfaction. When healthcare workers feel undervalued or unsupported by their organizations or colleagues, it can exacerbate stress. Public health professionals, for instance, may work in environments where their contributions are not always visible to the general public or policymakers, further diminishing their morale.
4. **Workplace Environment and Organizational Culture** The workplace culture and environment play a crucial role in shaping the stress levels of healthcare professionals. A toxic culture characterized by poor communication, hierarchical structures, and a lack of collaboration can increase stress. Additionally, inadequate staffing, insufficient training, and safety concerns contribute to the physical and emotional burdens of these professionals.
5. **Personal Factors** While external factors such as workload and organizational culture are significant, personal factors such as coping mechanisms, family support, and individual resilience also influence the risk of burnout. Professionals who struggle with work-life balance or lack adequate coping strategies may be more susceptible to emotional exhaustion.(8)

Impact of Stress and Burnout on Healthcare Professionals

The effects of stress and burnout on healthcare professionals are profound and far-reaching. Key consequences include:(9)

- **Decreased Job Satisfaction and Performance:** Burnout leads to diminished job satisfaction, decreased engagement, and reduced productivity. For healthcare professionals, this can result in poor patient care and lower-quality service delivery.
- **Mental and Physical Health Issues:** Prolonged stress and burnout increase the risk of mental health disorders such as anxiety, depression, and PTSD. Physical health problems, such as cardiovascular disease and chronic fatigue, are also more prevalent among those experiencing burnout.
- **High Turnover Rates and Staff Shortages:** The strain of burnout leads many healthcare professionals to leave their jobs, contributing to high turnover rates and shortages in the workforce. This creates a vicious cycle, where understaffed workplaces further exacerbate stress levels.(10)

Strategies for Building Resilience

Building resilience among EMTs, nurses, and public health professionals is essential to combat workplace stress and burnout. Several strategies have been proposed and implemented to promote well-being and resilience in these professions.(11)

1. **Organizational Interventions** Organizations must take an active role in mitigating stress by fostering a supportive work environment. This can include implementing policies that reduce workload demands, ensuring adequate staffing, and providing access to resources like counseling and mental health support. A positive organizational culture, characterized by open communication, team collaboration, and recognition of employees' contributions, can significantly improve resilience.
2. **Training and Education** Training programs focusing on stress management, coping strategies, and emotional resilience can equip healthcare workers with the tools they need to handle stressful situations. Regular professional development workshops, mindfulness training, and exposure to mental health first aid can be beneficial in preparing individuals for high-pressure environments.
3. **Peer Support and Mentoring** Establishing peer support systems and mentoring programs can provide emotional support and reduce feelings of isolation. By connecting with colleagues who understand the challenges of their work, professionals can share coping strategies, receive guidance, and strengthen social connections that promote well-being.
4. **Self-Care Practices** Encouraging self-care is essential for resilience. Self-care strategies such as regular exercise, healthy eating, and adequate sleep are vital in maintaining physical and mental health. Additionally, mindfulness and relaxation techniques, such as deep breathing and meditation, can help

reduce stress and promote emotional well-being. Professionals should be encouraged to take breaks during shifts and practice setting boundaries between work and personal life.

5. **Leadership and Policy Support** Leadership plays a critical role in addressing burnout. Leaders should model healthy behaviors, promote work-life balance, and advocate for systemic changes that support employee well-being. Public health policies that address staffing shortages, work conditions, and mental health support are necessary to create lasting improvements in resilience.(12)

Burnout is a significant concern for EMTs, with serious implications for both their well-being and the quality of patient care. The demanding nature of their work, combined with emotional and physical strain, makes EMTs vulnerable to stress and burnout. (13)

However, by addressing the contributing factors, such as high workload, exposure to trauma, and lack of organizational support, and implementing strategies such as mental health resources, stress management programs, and improved work-life balance, EMS organizations can help mitigate burnout and promote resilience. (14)

Supporting the mental health and well-being of EMTs is not only essential for their long-term health but also for the delivery of high-quality emergency care to the community.(15)

In response to the increasing pressures facing nurses working within overstretched and under-resourced healthcare systems, building personal resilience has been identified as being essential in coping with work related stress and adversity, maintaining job satisfaction, engaging in self-care and helping to address problems with workforce retention and staff well-being. (16)

Internationally, multiple resilience enhancement interventions have been developed and implemented in various settings . However, whilst these interventions have been evaluated positively and have been shown to support personal resilience in the short-term, care must be taken to ensure that these interventions are not viewed as a panacea for the overarching problems facing healthcare services and the resultant challenges to those working within them. (17)

Rather, resilience enhancement interventions should be viewed as tools to underpin existing support structures, as a way of helping to promote and sustain resilience levels within the nursing workforce. Health services need to follow the lead of nurses who are investing in their own personal resilience strategies by providing appropriate system level interventions and support mechanisms; this will not only enhance the personal resilience of individuals, but will also enhance systems resilience in the longer term.(18)

The way in which the concept of resilience is framed within resilience-enhancing interventions is crucial in ensuring that nurses are not deterred from engaging with these interventions due to feeling judged or criticised by colleagues, peers or managers, or due to being deemed fragile, unable to cope or lacking in resilience. The purpose of resilience-enhancing interventions, as mechanisms for reflecting on, building and sustaining resilience needs to be clearly articulated so that nurses do not feel that enrolment on these courses is a sign of failure, incompetence or unworthiness. (19)

This may be especially true if nurses have recently been exposed to difficult or challenging situations at work, which may lead to them feeling that they are being exclusively targeted or selected for enrolment to improve their coping abilities. This is encapsulated in an excerpt from a recent study reporting on a workplace resilience enhancement intervention .(20)

A nurse participant summarised their beliefs prior to the intervention about being selected to take part: “I thought I was put on the Resilience Course because my manager didn't think I was resilient enough and that it was a shortfall in my performance”. However, once the participant was fully engaged in the program, this perspective shifted, with the participant describing the intervention as “really helpful” because of its focus on “Caring for staff, trying to help you do your job better, and building with the other people there.”(21)

The stresses and strains associated with encountering challenging and difficult situations can be tempered by the satisfaction engendered through the intimacy of the nurse/patient relationship . However, the increasing environmental, financial, cultural, and social workplace pressures impacting on healthcare service provision means that the equilibrium between challenge and reward is becoming increasingly difficult to maintain. Increasingly, there are sacrifices in the quality of care that nurses are able to give to patients, because of pressures on the nursing workforce associated with staffing, vacancies, and increased demands on time. (22)

Nurses are central to the patient care pathway and are required to provide emotional, physical, psychological and social support to patients and their families at all times. However, little consideration is given as to the impact of the provision of this support on nurses' emotional well-being, or their ability to maintain a satisfactory work-life balance. Furthermore, limited provisions are in place to provide nurses with reciprocal emotional, physical, psychological and social support. Where these supports are place, for example through peer supervision, reflective practice or mentoring, they are often deprioritised or sacrificed at the expense of more immediate clinical demands.(23)

Resilience in nursing must be viewed and acknowledged as a dynamic, fluid process that requires continuous nurturing and commitment, as well as adaptability and flexibility in the face of changing professional and personal requirements. In order for resilience enhancement interventions to be successful system level change is required at an organizational, cultural, team and managerial level. (24)

Resilience-enhancement programmes should be integrated into the overall well-being strategies of healthcare organisations as part of a larger, more comprehensive staff support strategy; these programmes should be evaluated to measure their short- and long-term impact and outcomes. (25)

Proactively addressing the need for nurses to maintain, preserve and build their resilience, may help to alleviate some of the retention and recruitment challenges facing nursing. In addition, taking better care of the nursing workforce has substantial implications in terms of increasing efficiency within healthcare systems and benefitting the quality and safety of patient care. (26)

Conclusion

Workplace stress and burnout are pervasive issues in the fields of emergency medical services, nursing, and public health. While the contributing factors are complex and multifaceted, effective strategies for building resilience can significantly mitigate these challenges. Organizational interventions, supportive work environments, training in stress management, and robust self-care practices can all contribute to the well-being of healthcare professionals. By addressing burnout proactively, healthcare systems can improve job satisfaction, reduce turnover, and ultimately enhance the quality of care provided to the public.

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