

# **BURNOUT AND SPIRITUAL INCONGRUENCE**

**An evidence-based counselling model  
for Buddhist Chaplains**

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**Ideals are like stars: you will not succeed in touching them with your hands, but like the seafaring man on the ocean desert of waters, you choose them as your guides, and following them, you reach your destiny.**

**-Carl Schurz**

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To all my teachers, I bow deeply for bringing the dharma close to my heart and giving me the opportunity to create a life of authenticity and to see its intimate truth.

May the merit of our practice and service in the world bring cessation of suffering and liberation to all beings.

***Gate, gate, paragate, parasamgate, bodhi svaha!***

## **Abstract**

The purpose of this study is to examine an area of suffering, specifically the modern phenomenon of burnout, its relationship to spiritual well being, and the development of a counselling model of spiritual presence for those suffering burnout. Forty-eight participants of an 8-week Mindfulness-Based Stress Reduction program responded to the Maslach Burnout Questionnaire (Maslach, Jackson & Leiter, 1996) and the Spiritual Well Being Questionnaire (Fisher, 2010). Pre-course correlations indicate a strong relationship between all three factors of burnout and personal spiritual incongruence. The absence of a relationship of burnout with the transcendental aspect of spiritual incongruence suggest the personal values dimension rather than issues of faith may be an entry point for a Chaplain. A Buddhist-based model through which the particularly Western concept of burnout can be conceptualized for the Buddhist Chaplain is proposed.

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## **Burnout and Spiritual Incongruence**

### **Perspectives of Burnout**

**A history of burnout.** The earliest observation and description of the phenomenon of burnout was proposed by Herbert Freudenberger. In his book, *Burn Out*, the psychoanalyst noted that many of his patients resembled the shells of buildings that had been destroyed by fire (Freudenberger, 1980). Although anecdotal and dated in its concepts of gender and race equality, Freudenberger tapped into burnout as the outcome of the clash between the myth of the path to success, the reality of long working hours, and an imbalance between personal and professional life. He discerned between commitment and over-commitment, dedication and over-dedication. Most important, Freudenberger noted that over-identification with our own expectations was the primary cause of distress. His conceptualization of burnout included loss of energy, a separation from self (detachment), and cynicism. These manifest in the work realm as irritability, exhaustion, and grandiosity. False cures included denial and addictive behaviours to avoid negative feelings but these strategies usually failed. Freudenberger noted that the symptoms of burnout are counteracted by genuine closeness, an authenticity with self and others. In addition, he alluded to one's attitude as a determining factor of resilience to burnout.

The current leading researchers and proponents of burnout research and interventions are Christina Maslach and her colleague Michael Leiter. In 1982, Christina Maslach published *Burnout: The cost of caring* (Maslach, 1982/2003); it represented the accumulation of her research with Leiter and colleagues which began in the 1970's. In it are the seeds of a unique perspective on the consequences of external demands exceeding the resources and capacity of people to respond. Maslach was the research assistant and PhD candidate of Philip Zimbardo.

In the Foreword of *The cost of caring*, Zimbardo tells of Maslach arriving to pick up the data from Zimbardo's infamous Stanford Prison Guard study, a social psychology experiment investigating the prison guard-inmate relationship through a mock prison set up. Upon seeing the degradation of the personalities of the subjects involved, Maslach expressed her dismay to Zimbardo who was confronted with the trauma the experiment was causing (Zimbardo, 2007). Zimbardo later said it took tremendous courage for Maslach to confront her supervisor and he did the only thing he could do with someone of such conviction: he married her.

Having observed for herself how organizations can pressure and break the very people who represent their greatest resource, Maslach's work on burnout took the unique view of burnout as an emergent property of society and suggested it is a signal of the erosion of values. She defined burnout as "a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment that can occur among individuals who do "people-work" of some kind. It is a response to the chronic emotional strain of dealing extensively with other human beings, particularly when they are troubled or having problems (Maslach, 1982/2003)." Burnout is not exclusive to persons involved in the health care of others. Maslach noted that burnout is a universal phenomenon and everyone carries the risk for this distress. In fact, she goes further to indicate it occurs any time there is a mismatch between the person and the social environment of the organization for whom they work.

In *The truth about burnout* Maslach and Leiter (Maslach & Leiter, 1997) detailed the three components of burnout and the ways in which organizations cause personal stress by demanding more than their employees can give. They also noted that value conflicts played a significant role in moral erosion when people are asked to engage in behaviours that run counter to their "pride, integrity and self-respect. (p. 17)" Following on further research, Maslach and



her colleagues (Leiter & Maslach, 1988; Maslach, Jackson, & Leiter, 1996; C. Maslach, W. B. Schaufeli, & M. P. Leiter, 2001) refined the definition of burnout and produce the Maslach Burnout Inventory (Maslach, et al., 1996). These three factors co-arise from the overload experienced by an individual in their work. The overload of physical and emotional demands results in *emotional exhaustion*; the person is no longer able to respond effectively and experiences the demands of others as overwhelming. An aspect of this emotional exhaustion is “compassion fatigue<sup>1</sup>,” a state in which one cannot resonate with the suffering of others and has difficulty going that extra mile. Emotions are blunted and the things that once brought enjoyment in work and family life seem ineffective in doing so. Overall, there is a sense of giving without getting, generation without re-generation (Vardey & Costa, 2007).

A protective response against this overload is a disconnection from work and others. This second factor of burnout is *cynicism or depersonalization*. It results in a reduction of personally meaningful involvement with others and is a shadow version of the normally healthy “detached concern” of health care professionals. The recipient of care receives only the form of caring stripped of any personal connection or understanding. As this detachment increases, the person affected by burnout begins to experience a shift in their perspective of others. The negative feelings that arise when over-burdened by the demands of others are projected externally onto the organization or the people it is meant to serve.

As the individual disengages from the mission and passion of the work, self-evaluation becomes correspondingly negative. The sense of not being able to meet the demands of others or

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<sup>1</sup> Compassion Fatigue is considered a misnomer. Recent neurological and psychological studies indicate that authentic compassion is generative and the observed fatigue may be the result of a reactive caring driven by expectations of others. (Halifax, 2010)

to manifest one's own values of service gives rise to feelings of lowered competence. It also feeds into a growing incongruence between personal and ideal values as well as personal and organizational values. This third factor of burnout is a *feeling of reduced personal accomplishment/effectiveness*. Feelings of inadequacy to meet demands, to sustain care for others, and to feel fulfilled by the work become dominant. Inevitably, these feelings are turned inward and the individual assumes total responsibility for the negativity and the only congruent feature of their life appears to be a pervading sense of helplessness.

Maslach proposed that the factors of burnout emerge in the relationship between the person and the organization (Maslach & Jackson, 1984; C. Maslach, et al., 2001). She noted that inquiries into the phenomenon are better served by asking non-dualistic questions. To ask who becomes burned out can only result in pointing the finger at the individual or the system. Neither answer actually addresses the cause. However, by posing the question as "what causes burnout?" the answers lead to a systemic inquiry which yields more useful information (Maslach, 1982/2003).

Several models examining the mechanisms of burnout have been tested. The primary ones are interactive and support the perspective that burnout factors are emergent properties of the person-system relationship. These are the Demand Control Model (Karasek & Theorell, 1990) and the Conservation of Resources Model (see Shirom, 2003, for review of models of burnout). More recently, a model of burnout as a process of value congruence was examined by Michael Leiter (Leiter, 2008) and has offered the additional perspective of the person's experience fitting with the values of the organization. Leiter's Two Process Structural Model (Leiter, Gascón, & Martínez-Jarreta, 2008; Leiter, Gascón, & Martínez-Jarreta, 2010) integrates the previous models (Demand-Control and Conservation of Resources) and adds congruence of

individual and organizational values as a key element in predicting burnout (Maslach & Leiter, 2008).

**Impact of burnout dimensions on work-life experience.** Of the three factors of burnout, emotional exhaustion is most often found related to behavioural, attitudinal, and job conditions. Diestel and Schmidt (2010a) tested various models of fit and support was found for Leiter and Maslach's model (Leiter & Maslach, 1988). Emotional exhaustion occurs first and results in depersonalization/cynicism as a coping strategy. Depersonalization then results in a loss of personal effectiveness. This interaction among the three dimensions occurs as a longitudinal process and across different people/service related occupations. Research results from surveys of health care professionals such as physicians, nurses, psychologists, psychiatrists, and care workers all indicate a strong relationship between emotional exhaustion and job demands, available resources, organizational climate (Halbesleben, 2008; Leiter, Frank, & Matheson, 2009; Potter et al., 2010). Time spent at work and time spent away from family also contributed to the dimensions of burnout (Brauchli, Bauer, & Hämmig, 2011). Other professions such as police officers, social service support workers, and public service employees also provided evidence of the relationship between emotional exhaustion and values dissonance as well as emotional dissonance (Diestel & Schmidt, 2010b; Schaible & Gecas, 2010), self-esteem (Janssen, Schaufelie, & Houkes, 1999), and various forms of personal distress (Leiter & Harvie, 1996). Pastoral counsellors and ministers assessed for burnout revealed connections between burnout (as a composite measure), role insufficiency and role boundaries (Golden, Piedmont, Ciarrocchi, & Rodgeron, 2004). A sample of Norwegian male ministers studied on cross-sectional and longitudinal variables yielded connections between burnout dimensions and

individual factors, working environment, and the interaction of work and home demands (Innstrand, Langballe, & Falkum, 2011).

**Burnout and value congruence.** Leiter (2008) proposed a two-process model of burnout that introduced the concept of value congruence to burnout. In the first process an imbalance between demands and resources leads to chronic exhaustion, one of the dimensions of burnout. In the second process, values conflict impacts on all three dimensions with minor implications for exhaustion and major ones for cynicism and personal efficacy. Specific processes are related to the employees' perception of fairness and trust in the organization (Leiter, et al., 2009; Leiter, et al., 2008). By introducing the concept of values conflict, Leiter and his colleagues factor the lived experience of the individual into the global construct of burnout.

Studies investigating value congruence supported Leiter's model that a dissonance between values held by the individual and those espoused by the organization were related to levels of burnout. J.R. Edwards and D.M. Cable (2009), integrating existing research on values congruence and testing their own model, define *values* as "general beliefs about the importance of normatively desirable behaviours or end states." Value congruence is the degree of similarity between the values of the organization and those of the individual. Subjective congruence is measured by assessing the way an individual sees the match between the organization's values and their own. Objective congruence is measured by using a third party appraisal of the match between the individual and the organization.

Edwards and Cable (2009) demonstrated that value congruence is mediated by trust which, in turn, facilitates communication and the formation of friendships in organizations.

Schaible & Gecas (2010) demonstrated that values congruence was related to depersonalization and emotional exhaustion but not personal accomplishment. Leiter and colleagues (Leiter, Gascon, & Martinez-Jarreta, 2010) reported that in a sample of nurses and physicians having control over decisions and being part of the decision-making process played a significant role in their experience of work life. The role of value congruence was related to aspects of work such as workload, supervision, and fairness. It was also significant in relationships among the dimensions of burnout; although there was a small impact on cynicism, the relationship was determined primarily through the path from values to exhaustion.

In summary, research has shown that burnout dimensions are interconnected with aspects of work-life environments through a complex network of influences. The models of burnout have uncovered the path from exhaustion to cynicism and personal effectiveness; longitudinal studies show a reciprocal relationship between stress and burnout (Innstrand, et al., 2011; Shirom, 2011). Specifically, issues of control, support by supervisors, and experiencing a sense of justice and fairness play a determining role in whether or not an individual will experience burnout (Diestel & Schmidt, 2010a; Maslach & Leiter, 2008). Furthermore, and important to the role of spiritual care and Chaplaincy, feeling there is congruence between personal values and those of the organization has been shown to exert an influence on the degree to which an individual will experience emotional exhaustion. The lived experience of the individual within the matrix of the organization appears to play a significant role in the emergence of burnout. In consequence, emotional exhaustion influences the level of cynicism about the job and the clients the individual serves as well lowering the sense of effectiveness in the individual.

It is noteworthy that Shirom ((2011), in his extensive and conceptual review of the area, states that the effect of personality predispositions on burnout is an area that has been neglected

in the attempts to understand burnout. The predominant interest among researchers and those designing interventions to mitigate the impact of burnout may be in the interaction between the individual and the organization; however it may be equally important to determine any main effects of the stance and attitude of the individual. It is also possible that the role of individual traits or perspectives may be most visible in the realm of values and value conflicts.

## **Spirituality and Health**

**Religion, spirituality, and health.** The differentiation of religion from spirituality has presented significant challenges in the research of their impact on health. A. Sims and C. Cook (2009) define spirituality as “a distinctive, potentially creative and universal dimension of human experience arising both within the inner subjective awareness of individuals and within communities, social groups, and traditions....concerned with matters of meaning and purpose in life, truth and values.” They propose spirituality as a universal, subjective dimension in the experience of all humans that is also grounded in a social context. Religion, on the other hand, is differentiated as being concerned “with socially and traditionally shared beliefs and experience.” Salem and Foskett (2009) place spirituality in the matrix of religious tradition and practice as a major component “along with doctrine, scripture, ritual and worship.” They suggest that “(w)ithin the broad spiritual tradition of each religion, there is a personal and unique spirituality of each adherent (Salem & Foskett, 2009; p. 233).”

In researching the relationship of mental health to spirituality however, concepts of religion and spirituality tend to merge and are mostly used as characteristics of the groups being studied (Cook, Powell, & Sims, 2009). Despite the acknowledgement that both are anchored in a social matrix, spirituality as an integral part of understanding the individual's distress has lagged in research compared to other fields of psychosocial inquiry. A key word search of all articles

listed in the American Psychological Association database using terms “spirituality” or “religion” and “mental health” yielded 719 articles and presentations from the 1800’s to 2012 with over half (394 articles) published between 2001 and 2011. In contrast, using the keywords “spirituality or religion” and “burnout,” only 56 articles have been published from 1981-2010 with 27 of these published in the last ten years. This pattern is consistent with those reported in articles conducting meta-analysis of religion/spiritual (RS) studies (Hill & Pargament, 2003; Thoresen & Harris, 2004).

While most of these articles have supported Simms and Cook’s (2009) suggestion that the RS research has used the concepts of spirituality and religion interchangeably and only to categorize samples under investigation, there has been a growing interest and acknowledgement of spirituality in the context of the contribution of spiritual well being to physical and psychological wellness. Research into the effect of spirituality on health variables is also fraught with problems of poor operational definitions and mismeasure of outcomes. In fact, until recently, the perspective of religion has been uni-dimensional, narrowed to activities in which a person is engaged; spirituality has been treated as a somewhat idiosyncratic aspect of an individual’s psychology (Hill & Pargament, 2003). The field becomes more complex when cultural, theological, and anthropological factors are considered.

Thorensen and Harris (2004) investigated several studies that connect RS involvement with physical and mental health issues and attempt to tease out empirically valid ones from those with weak design and results. Spirituality is further clarified in a way that merges with research approaches in the behavioural sciences. The concept is opened up to reflect functional, process-oriented phenomena rather than characterological features of individuals or groups. It is viewed as multidimensional, noting that spirituality is more than a personal experience and religiousness

is more than engaging in rituals or services. Spirituality is conceptualized as a configuration or a pattern in a person that is similar to other aspects of human experience such as physical and mental health, forms of relationships, etc. By expanding the concept of spirituality, methods of assessment were required to become more complex; it was evident that fully exploring the dimensions of the relationship of RS to other dimensions of human experience (e.g., physical or mental health) required more than a single nominal question or an open-ended query.

Hill and Pargament (2003) pointed out that the expression of spirituality unfolds in a social context, and while related to a religious construct or field, it is a search for the sacred with the intent of transformation. They too point out that the use of RS variables in research has been as nominal counts or as a global index of affiliation. The factors that are involved in sustaining or depleting physical and mental health therefore are indeterminate and, because of the macro conceptualizations and subsequently weak measures developed from them, are difficult to interpret. Furthermore, it is possible that positive reports related to RS factors may be a result of religion or spirituality standing as a proxy for other positive aspects in a person's life (Thoresen & Harris, 2004).

Recent research has begun to view RS concepts as complex variables involving the range of human psychology from the cognitive to the physiological domains. Whereas it is obvious that aspects of RS such as the existence of the divine do not lend themselves to empirical validation, it is not considered the intent of RS investigations. The focus of such research especially with respect to health factors is the relationship or perception an individual has with their personal experience (e.g., their personal experience of the divine).



The range of studies that provide evidence of a positive relationship between RS factors and health is not large. Most are limited by design and the complex relationship of RS with cultural and individual factors. However, some studies have demonstrated links between RS and health (for a discussion see Thoresen & Harris, 2004). General mortality, cardiovascular mortality and morbidity, illness recovery, and cancer morbidity have been associated with RS factors in some studies (McCullough, Hoyt, Larson, & Koenig, 2000). Mental health outcomes have a mixed association with RS involvement and experience; some indicate protective features while others evidence negative ones (Crowley & Jenkinson, 2009). However, strong support for a connection between RS factors and addiction reduction is obtained in some studies (Avanta & Margolin, 2004). Overall, the evidence is still tentative and the research shows modest relationships between RS factors and physical and mental health.

Whereas the empirical evidence for an absolute link between religiousness or spiritual experience and wellbeing has been tempered by difficulties in concepts and operational definitions, there have been significant developments in understanding that these are not uniform or simple constructs. Although the dichotomization of religion and spirituality is tempting in the service of facilitating empirical research, it has serious consequences (Hill & Pargament, 2003). The allocation of religion to the institutional and spirituality to the idiosyncratic results in a loss of the interaction between the two; it misses the reality that religion is relevant to the individual pursuit of the sacred and spirituality unfolds in a social milieu.

The most significant and perhaps most useful advances made in researching RS factors has been the acknowledgement of the role of the social matrix from which both religious practices and spiritual experiences emerge. Whereas religion plays a specific role in health, spirituality is now used as a construct that is more accessible especially in light of the many

different faiths and beliefs that may inadvertently be excluded by questions or inquiries which are based in a Judeo-Christian perspective. Thus, various studies have used the construct of spirituality as a form of connectedness and examined its impact on health factors (Kapuscinski & Masters, 2010). In this relational framework, research into the impact of RS factors on health becomes an investigation of stances to the sacred in the context of health, behavioural engagement with a spiritual path, and coping styles that are informed by a personal spiritual experience. More importantly, this concept of connectedness has generated a paradigm shift in studies of spirituality (Meezenbroek et al., 2010; Reed, 1992).

**Spiritual well being – a tautology in a dimension of health.** The primary challenge to determining the nature of spirituality (Dyson, Cobb, & Forman, 1997) and the relationship of a spiritual attitude to well being lies in the potential of confounding the two constructs of spirituality and well being (Meezenbroek, et al., 2010). Statements of an individual's spiritual state should not be but are easily confused with statements of their feelings of peace, serenity, and general well being. That is, the statement "I feel at peace when in the presence of the divine" taps into something very different from the statement "I feel in the presence of the divine." To account for this potential confound, Meezenbroek and colleagues (2010) developed a definition of spirituality that is multi-dimensional and comprised of the connectedness a person experiences with self, others, nature, and the transcendent.

J. Fisher and colleague (Fisher, 1998; Gomez & Fisher, 2003) investigated a four factor concept of spiritual configuration, developing a series of questionnaires that provided evidence of the usefulness of this conceptualization. Various reviews and critiques of instruments measuring spirituality have identified Fisher's Spiritual Well Being Questionnaire (SWBQ) as the most promising measurement instrument and with good psychometric properties (Gomez &

Fisher, 2005; Kapuscinski & Masters, 2010; Meezenbroek, et al., 2010; Moodley, 2008) both for having a multi-dimensional structure and no overlap with well being concepts. That is, the questionnaire yields a measure of the individual's orientation in life in terms of what matters spiritually and a measure of their own lived experience of that spirituality. The absence of evaluative terms or ratings places the measure within the realm of assessing spirituality as a relational construct which can then be assessed against measures of health.

Several studies, using different measures of spiritual well being, have investigated the relationship between spiritual well being and health factors. Associations have been reported between higher levels of spiritual well being as measured by the Spiritual Well Being Scale (Ellison, 1983) and lower level of caregiver burden in caregivers of Alzheimer's patients (Spurlock, 2005). Spiritual and religious functioning differed significantly between a sample of problem drinkers and controls (Saunders, Lucas, & Kuras, 2007). Measures of the discrepancy between the ideal and current scores of spiritual functioning among problem drinkers also yielded a significant difference with ideal scores being higher than current appraisal of their lived experience of spiritual well being.

The role of spirituality in stress-coping responses and health-related quality of life (HRQOL) among African-American women with HIV/AIDS (Dalmida, Holstad, DiIorio, & Laderman, 2010) was examined using the Spiritual Well Being Scale (SWBS; Ellison, 1983). Depressive symptoms and existential well being (EWB) were significant predictors of HRQOL. And, existential well being was positively associated with a mental health composite of the HRQOL. Their results supported previous associations between EWB and HRQOL. Other studies of HIV and spiritual well being indicated positive associations between spiritual well being (total scores) and mental health among HIV infected men and women (Kenneth D.

Phillips, Kathryn S. Mock, Christopher M. Bopp, Wesley A. Dudgeon, & Gregory A. Hand, 2006).

Using the Functional Assessment of Chronic Illness Therapy—Spiritual Well-Being Scale (FACIT-Sp), Bredle, et al (2011) reviewed and reported on several studies that explored the relationship between spiritual well being and physical health factors in patients diagnosed with colorectal cancer, prostate cancer, stem-cell transplants, and HIV. Results indicated trends and positive relationships between spiritual well being and physical and mental health. Studies examining the relationship between spiritual well being and health factors among palliative care patients were also described with the meaning factor of spiritual well being yielding a significant association to end of life despair. Bredle, et al. (2011) noted that the common findings across the studies were in the association between spiritual well being and psychological well being. They also indicated that the actual mechanism by which spiritual well being functions to promote or protect an individual have yet to be elucidated.

Spiritual well being as a predictor of mental health outcomes was also examined in a study of suicidal African-American women who were victims of partner abuse (Arnette, Mascaro, Santana, Davis, & Kaslow, 2007). Using the SWBS (Ellison, 1983) in a path analysis, lower levels of hopelessness were shown to predict higher levels of existential well being and positive religious coping predicted higher religious well being. At baseline, there was a negative association between depression scores and spiritual well being scores; lower levels of depression were associated significantly with higher levels of existential and religious well being.

The ethical orientation among executives in the Australian Stock Exchange (Chowdhury & Fernando, 2010) was examined using Fisher's Spiritual Well Being Questionnaire (SWBQ;

Fisher, 2010; Gomez & Fisher, 2003). Results indicated that idealism (concern for the welfare of others) was most strongly correlated with lived experience of communal well-being and slightly less so with personal (Fisher's Personal factor) and with environmental well-being. The weakest relationship was between the measures of idealism and Fisher's measure of lived transcendental well-being (connection to God/divine). Spiritual well-being was a poor predictor of relativism or tendencies to use circumstance rather than moral code for decision-making. In general, spiritual well-being that reflects connection with others appeared to be the best predictor of an ethical orientation that is concerned with the welfare of others. This relationship was also independent of gender of the executives, religious affiliation, and whether they worked in the public or private sectors.

### **Buddhist Principles of Burnout and Engagement**

**The Buddha's story as burnout and recovery.** The story of Buddhism is at once the story of an individual's lived experience of his spiritual unfolding and the larger unfolding of a paradigm shift in conceptualizing suffering and its transformation (Suzuki, 1996). For the purpose of this thesis, the unfolding of the Buddha's life serve as an exemplar of experiencing and transforming value conflict, the trigger for burnout symptoms. Twenty-six hundred years ago, Gotama, also referred to as *Sakyamuni* (Humphreys, 1987; Nakamura, 2000), is believed to have lived and taught on the existence, cause, cessation, and transformation of suffering (*dukkha*). Given the name Siddhartha, his coming into being was a paradox of loss and gain. His mother died giving him life and, at his naming ceremony, the Brahmins declared him to be one who had achieved the spiritual purpose of all beings (Nakamura, 2000). They prophesied that if he stayed in a secular life, he would become a great monarch; but if he renounced the world, he would become a Buddha – one who will remove the veil of delusion. Siddhodana, Siddhartha's

father and ruler of the kingdom of Sakka, having no wish to lose his heir to a life of a recluse, asked what would lead to his son's renunciation; he was told that Siddhartha would see four signs: an old man, a sick man, a dead man, and a renunciate. In an attempt to prevent this loss, Suddhodana ordered that all such persons be kept from the sight of the young prince. Although more legend than fact, this story of the future Buddha's developmental years is an exemplar of way in which reality can be constructed for an individual and how it subtly creates a resistance to change. Old age, illness, death, and the need to release ourselves from all forms of bondage become natural transitions we deny and life is lived as if youth, well being, mortality and possessions are eternal.

Siddhartha, growing up in his father's kingdom, was sheltered from these realities and groomed for a life of statesmanship and power. In his position of heir, he would have been trained in the craft of caring for the people in his kingdom although distanced and disconnected from them. Politically and culturally, it is likely that Suddhodana and Siddhartha ruled not as protectors of their citizens but as protectors of the land and commodities they possessed (Armstrong, 2001) against the neighbouring kingdoms. In that sense, their world would not have been very different from that of a corporation whose mission is to provide care to those in their jurisdiction but whose actions may not account for the human face of the organization. However, Siddhartha inevitably encountered the human face of his kingdom in the form of an old man, a sick man, a dead man, and a renunciate (Lopez, 2001). The cocoon constructed by his father fostered a hedonistic lifestyle and it is likely this lifestyle cultivated a set of values removed from the attitudes and struggle of the ordinary person (Wallis, 2007). Unable to reconcile his life of protected splendour with the harsh truths of aging, illness, and death, Siddhartha found his worldview challenged. As his realization deepened he understood that

despite his privilege, he was not immune to the way life unfolds; he and all beings suffer the same fate (AN 3:35, I 138-40 in Bodhi, 2005; Nakamura, 2000).

Karen Armstrong (2001) and Wallis (2007) point out that Siddhartha's story is very relevant to the struggles of 21<sup>st</sup> century society as both external and internal representations of current challenges. Wallis (2007) in particular places the reader of the Buddha's journey in the position of observer and practitioner of his teachings, not being seduced by the flamboyant language yet open to the potential of transformation. Just as the man who would become Buddha was confronted with the inequities of his society and the common fate he shared with every human, we too are challenged by the glimpses of incongruence in our lives be it at work, in the home, or in our personal realm. The clash of values experienced by Siddhartha parallels the value conflict individuals experience when they encounter the incongruence between their organization's stated mission and its actions or attitudes. Nakamura (2000) describes the moment of disillusionment and arising distaste in Siddhartha for the life he had; he suggests that the vivid detail of the texts is strong argument for an actual occurrence underlying the legend of renunciation.

Obsessed by the disparity between his beliefs and the reality of life, Siddhartha is said to have become despondent and emotionally numb. Unable to love his wife and son, unable to take part in the things that once gave him pleasure, at the age of 29 years he resolved to leave behind his royal life to seek the truth of human existence. However, his decision to leave behind family and privilege may not have been unusual or solely motivated to seek a spiritual path. Both Armstrong (2001) and Nakamura (2000) point out that the social climate of the times were challenging. Political upheaval and societal change were harbingers of the eventual destruction of kingdoms and traditional values. In the face of this erosion of power and culture, Siddhartha

stepped into a growing movement against clannish warfare and exploitation. Although Nakamura (2000) states that he chose to engage in a greater good by deciding to forego his life of privilege and take up the robes of a mendicant, it is difficult to say whether he set out to transform the world and later scriptures suggest altruism was not likely his motivation or intention. Whatever the rationale, his decision reflects the difficult choice between maintaining the status quo through a wilful blindness to reality and cultivating a willingness to bear witness to the truth of life as it is. In the context of resolving a values conflict, his decision to seek a deeper truth points to engagement in and not withdrawal from life as the potential resolution to the imbalance.

After many years of practice, Siddhartha, now referred to as Gotama, began to understand the truth he sought was as inaccessible through severe ascetic practices as they had been through a hedonistic lifestyle. In fact, the process of denying the fundamental reality of nourishing the body was an obstacle to calming the mind and seeing into phenomena with clarity (Hanh, 1991). Continuing the theme of facing incongruent values, Gotama recognized that living by the values of his rigidly ascetic community had led to his weakened state; in a moment of physical exhaustion, he accepted nourishment from a young woman and incurred the censure of his ascetic community. Nevertheless, gaining strength, he resolved to attain deep insight to the truth of living life in balance and sat in meditation until he achieved the realization that he and all beings are already enlightened to the truth of the world (Lopez, 2001; MN 36:12 in Nanamoli & Bodhi, 2005). He became a Buddha, one who is awake.

**The Buddha's new job.** Following his enlightenment, the Buddha set out in his new job: teaching the path to liberation from distress through the Four Noble Truths (Rahula, 1974). These are summarized as the reality that life is stressful, the cause of this stress is craving that



perpetuates itself, the cessation of stress requires letting go of these cravings, and the practice to accomplish letting go is cultivated through the Eightfold Path (Thanissaro, 2010). The First Noble Truth would diagnose burnout as an imbalance in or dissatisfaction with our lived experience. The Second Noble Truth explains that dissatisfaction is created by craving for what we do not have, rejecting what we do have, and feeling confused when we are disappointed by people, objects, and events in our life. The Third Noble Truth offers the possibility of transforming that dissatisfaction by cultivating awareness of the causes of the craving and making choices that reduce craving. The Fourth Noble Truth sets out the eight-step treatment plan or practice program to develop skilful means (*upaya*) to stay in balance.

The Eightfold Path outlined in the Fourth Noble Truths is comprised of three clusters: Wisdom which is composed of Right Understanding, Right Thinking; Ethics which is composed of Right Action, Right Speech, Right Livelihood; and, Mindfulness which is composed of Right Effort, Right Mindfulness, and Right Concentration (SN 45:8 in Bodhi, 2005). Although the practice involves a progressive yet interlocking approach beginning with Right Understanding, for the purposes of this thesis, the focus will be on Right Livelihood. It is important to note that the term “Right” is neither value-laden nor has a valence; it refers to holding a full awareness of all the factors that impact on understanding, thinking, etc. Thus, “Right” forecasts the possibility that the division between work and personal life may be the first delusion to be released.

Along with Right Speech and Right Action, the Buddha taught that Right Livelihood comprised the practices of *silā* or ethical behaviours and is considered a practice primarily in the service of spiritual development (Bodhi, 2008). In most translations, *silā* is related to inhibition of unwholesome actions or to abstinence (MN 117:28 in Nanamoli & Bodhi, 2005). However, although the practice of restrictive ethical actions has positive consequences for the public side

of one's life, the intent of such practices is primarily to cultivate spiritual well being. In other words, livelihood is a means, not an end, to a balanced life and includes both the inner and outer experience of that life. Furthermore, Right Livelihood is the nexus of all the other parts of the Eightfold Path and ground in which all eight steps must be practiced (Smith, 2002) and it is not differentiated into personal and work domains.

The essence of the practice of Right Livelihood goes beyond the title of the individual's position or profession, the functionality of the work done, or the potential of what is produced to acquire wealth. B. Glassman and R. Fields (1996) describe work as being most beneficial to the individual and the community when it is approached with full awareness rather than as something to plough through or use for material gain. In essence, work or livelihood is a practice of bringing awareness to the many demands that can draw a person away from what is truly important. It is the integrated personal/work space in which well being is the primary value which guides action. However, well being obtained through Right Livelihood is not an individual issue. Thich Nhat Hanh (1998a) explains that livelihood is our "collective karma"; it is an expression of our true nature, and when not honoured as such, it can be the cause of dukkha or imbalance in ourselves and others.

**Ethics of livelihood and the koan of work engagement.** Buddhist principles inform burnout and its transformation in two ways. First, the Buddhist concept of livelihood lies firmly within a framework ethics which requires moral and physical effort as well as vigilance of specific types of impact on family, companions, and community (Sadhatissa, 1997). Right Livelihood is guided by the other seven steps of the Eightfold Path and the five precepts for lay persons: refrain from acts that lead to killing, stealing, sexual misconduct, lying, and misuse of intoxicants. Re-framed as five positive ways in which to engage with the world, Hanh teaches

the five precepts as Five Mindfulness Trainings (Hanh, 2007): respect for life, generosity, respect of sexual boundaries, mindful speech and mindful consumption. Thus, Right Livelihood entails engagement in work that acknowledges the sanctity of all life, which gives time and resources without concern for gain, which respects boundaries, that is civil and supportive in dialogue, and that is concerned with the sustainability of resources. This perspective of engaging in work with an eye on community is supported in research by Leiter, Schaufeli and their colleagues (Bakker, Schaufeli, Leiter, & Taris, 2008; González-Romá, Schaufeli, Bakker, Lloret, & Aaron, 2006; Leiter, Laschinger, S., Day, & Oore, 2011) which identified work engagement as a practice of civility, value, self-efficacy, dedication in order to act as an antidote to burnout. It also suggests that the practice of Right Livelihood is mitigated upon the understanding that actions have uncertain consequences and, for that reason, engagement must be guided *a priori* by a commitment to reduce potential harm and to do good.

Second, Buddhist philosophy offers a different lens with which to view burnout. Often presented as a dualistic struggle between work and personal life, interventions to manage burnout have been marked by a divisive process which pits the employee against the organization. What is apparent from both the research in burnout and in Buddhist philosophy is the emergent nature of the dimensions of burnout in particular and suffering, respectively. As Maslach (1982/2003) pointed out, to ask who is to blame for the distress is futile and misses the inherent interconnectedness between the individual and the organization. Consistent with this view, perhaps the most useful contribution Buddhism has to offer to the field of work-related stress is a lens of non-duality and Interbeing ((Hanh, 1998b) which shifts the understanding of burnout to the realm of the relational. However, this shift away from focusing on a target requires

cultivation of comfort with uncertainty and willingness to see that the paradox of dedication to work or personal life is a perceptual one and the split is sanctioned culturally.

The koan of Senjo and her soul being separated (Mumokan, case #35) describes and explores this paradox. The story of Sen-jo and her soul is a Chinese folk tale (Aitken, 1991; Shibayama, 2000) about a young woman who decides to leave her parents and an arranged marriage in order to be with the man she loves. Stricken with homesickness and guilt, she and her husband return only to find her parents confused when she claims to be their daughter. As far as they know, Sen-jo has been in their home all these years, lying in her bed unable to engage with her filial duties or her life. Which is the real Sen-jo?

The question posed by Zen teachers of their students is not about re-uniting her with her soul but an inquiry into which is the real Senjo, an issue of dualistic identity (Arnold, 2004). Inherent in the question is the implication that the split is real and that resolving the conundrum requires determining what is real. This overlooks the story material that wraps around the koan and it fails to appreciate that the paradox in the story is imposed by our own separation from reality (Hori, 2006; R. Sasaki quoted in Loori, 2006). Current interventions to resolve the suffering of burnout continue to seek resolution without recognizing that the dualism between work and personal lives is an illusion, albeit a sometimes inspirational illusion. The real question therefore is not which is real Senjo but rather how does Senjo's work become a pilgrimage of identity (Whyte, 2001) so she can exist fully and in alignment with each of her roles.

## **Purpose of the Current Study**

**Spiritual congruence as value congruence.** Burnout studies have focused on the dissonance between the values of the individual and that of the organization in which they work (González-Romá, et al., 2006; Leiter, et al., 2009; Shanafelt, 2009); this incongruence has been reported as a precipitating factor of the dimensions of burnout. The research on the usefulness of the concept of value congruence (Edwards & Cable, 2009) resulted in the development of the concept of engagement in work as a means of mitigating the impact of burnout (Leiter & Maslach, 2005). Interventions to manage and change the direction of burnout symptoms have looked to enhancing the connection between the individual and their work; these include training in work engagement (Bakker, et al., 2008) and mindfulness-based programs (Krasner, Epstein, & al., 2009; McCracken & Yang, 2008).

The concept of value congruence penetrates spiritual care and spiritual congruence can be viewed as a specific case of the former. Thus, it is important to understand the way in which burnout dimensions would be related to spiritual congruence or dissonance. Although Golden et al. (2004) were able to link pastoral burnout to spirituality, the dimensions were global and perhaps were the reason for very modest statistical relationship between the constructs. The nuanced nature of the relationship between spiritual incongruence and burnout has not been determined in other studies.

**Buddhist principles and perspectives of burnout.** There are no studies that provide a rationale for or which guide interventions with a Buddhist perspective on burnout. Given the prevalence of burnout, the Buddhist Chaplain is very likely to encounter it as suffering in the form of a struggle between aspects of a person's personal and work life or as a manifestation of a value conflict, not unlike what confronted the Buddha himself. Evidence that spiritual well

being is linked to burnout through incongruence in an individual's lived experience or values would open the door to intervening through the concept of Right Livelihood. Furthermore, Buddhist concepts of interconnectedness and non-dualism may present an effective challenge to the current dualistic conceptualization of burnout as a choice (or lack thereof) between personal and work domains.

## **Method**

### **Description**

**Overview.** Burnout and spiritual well being dimensions were examined in a sample of individuals who participated in an 8-week Mindfulness-Based Stress Management (Kabat-Zinn, 1990) course. The overall design of the study was an assessment of the impact of a mindfulness-based intervention on measures of burnout, quality of life, and spiritual well being. Only pre-course scores for burnout and spiritual well being factors were used in this project.

Participants in the course presented at the Ottawa Mindfulness Clinic through referrals by physicians, psychologists, previous participants, and their own search of the available programs in the city of Ottawa ON Canada. All participants engaged in an information session which outlined the program and gave consent for participation in the research component. A subset of the participants was composed of professionals who were training in mindfulness interventions techniques and participating as individuals managing their own stress levels was required as part of the training.

**Hypotheses.** The participants in a stress reduction program were considered to be representative of most persons who, in distress, would actively seek assistance for their sense of ill being and imbalance between the life they were living and the one they

wished to live. Based on the research relating burnout to values congruence (Bakker, et al., 2008), it was proposed that burnout dimensions would have an impact on a person's spiritual worldview and present as an incongruence between the ideal and actual experience in the Personal, Communal, Environmental, and Transcendental domains of spiritual well being. Thus, H1 proposed the dimensions of burnout would be associated with the four domains of spiritual well being. H2 proposed the ideal and lived experience (actual) scores of each factor (Personal, Communal, Environmental, & Transcendental) would be significantly different, with ideal being higher than actual scores. H3 proposes the spiritual incongruence of each factor (iPersonal, iCommunal, iEnvironmental, & iTranscendental) would differ from each other.

Because Exhaustion and Personal Effectiveness each play a role in the activation and maintenance of burnout, it was of interest to examine their individual relationship to spiritual incongruence. Hypothesis 4 explored the effect of high and low levels of each burnout factor on the degree of spiritual incongruence reported by the subjects. H4 proposed the effect sizes of the difference between high and low Exhaustion and Personal Effectiveness on spiritual incongruence mean scores would be moderate.

**Participants.** Five sets of 8-week courses in Mindful-Based Stress Reduction were conducted in May-June and September-October 2011. Participants completed demographic information on age, relationships, education, meditation experience, spiritual traditions, and self-identified distress. They were administered a battery of tests on the first and last day of the course. Eleven participants were registered in the courses as part of the requirement for their training in mindfulness-based interventions. Because the study at this stage was primarily investigative of the correlation between burnout and

spiritual well being, their scores were included as representative of the range of scores obtained from these measures.

## **Measures**

**Burnout.** Burnout was measured using the Maslach Burnout Inventory-General Scale (MBI; Maslach, et al., 1996) which is comprised of three sub-scales that assess the dimensions of burnout: Exhaustion, Cynicism, and Personal Effectiveness (see Appendix A). The 16 items are statements about job-related issues which are rated on a frequency scale ranging from “never” (score = 0) to “daily” (score = 6). Higher scores on the Exhaustion and Cynicism scales and lower scores on the Personal Effectiveness scales are categorized as levels of burnout experienced by the individual.

**Spiritual Well Being.** Spiritual well being was assessed using the Spiritual Well Being Questionnaire (SWBQ; Fisher, 2010). The SWBQ is a 20-item questionnaire with four factors which reflect the domains of an individual’s relationship (see Appendix B). The factors are Personal, Communal, Environmental and Transcendental which reflect the quality of relationship with self, others, environment, and the divine/God. Each item is rated using a Likert scale ranging from 1 (very low) to 5 (very high). The items are rated twice: the first time to assess the importance of the item to the individual for an ideal state of spiritual well being and the second time to assess the degree to which the individual feels the item reflects their lived experience. A difference score between the ideal and lived experience ratings can be obtained which is defined as the dissonance or spiritual incongruence experienced by the individual. Incongruence scores were determined for each of the four factors.



The advantage of Fisher's SWBQ lies in the potential for comparing an individual's position relative to their own assessment of their ideal spiritual well being. The discrepancy between their appraisal of their ideal state and their lived experience provides a gauge of the feeling of internal imbalance. The dissonance between the ideal and lived experience measures of each of the factors (Personal, Communal, Environmental, and Transcendental) also provides a lens of the individual's worldview. Fisher's four domains offer the potential of assessing the individual's internal experience of spiritual development and their potential trajectory.

**Data Analysis.** Data were analysed using the Analyse-it Add-in program to Excel. Descriptive statistics (means, standard deviations, frequencies, percentages) were calculated for the sample. To test Hypothesis 1, Pearson correlations and statistical tests of significance were calculated for the MBI and SWBQ. To test Hypothesis 2, multiple one-tailed paired-sample *t* tests were conducted on the ideal and actual scores of the four factors of the SWBQ, with the Bonferroni correction set at an alpha level of .0125 (.05/4) to determine significant differences. To test Hypothesis 3, two-tailed paired-sample *t*-tests were conducted for each of the four factors, with the alpha level set at .008 (.05/6) to determine significant differences. To test Hypothesis 4, the sample was categorized by high ( $\geq 16$ ) and low ( $<16$ ) Total Exhaustion scores and high ( $\geq 30$ ) and low ( $< 30$ ) Total Personal Effectiveness scores. A one-way between groups ANOVA compared the effect of exhaustion on Personal, Communal, Environmental, and Transcendental factors of spiritual incongruence. A similar analysis was conducted comparing the effect of Personal Effectiveness on the factors spiritual incongruence. Effect sizes (ES) using *Cohen's d* were calculated for the spiritual incongruence factors that achieved significance. The pooled standard deviation ( $s_p$ ) was used to calculate *Cohen's d*; the ES is conventionally categorized as small ( $<.20$ ), medium (0.21 to 0.50), and large ( $>.80$ ).

## Results

### Sample Description

Fifty-four participants completed the measures and six were excluded from the final data set because they were retired and did not complete the MBI. Table 1 illustrates the demographics of the final sample of forty-eight adults (14 men and 34 women) with a mean age of 44.7 years ( $SD = 9.6$ ). Their educational levels were high with 40% reported to have a degree and 42% a graduate degree. Most were married (63%) and 46% reported their spiritual tradition as Christian. The primary self-description of their presenting difficulty was anxiety (56%) and burnout (31%).

Table 1

*Age, Gender, Education, Relationship Status, Self-identification, and Percent of Sample in Burnout Categories (n = 48).*

Demographics	Mean	SD				
Age	44.6	9.6				
	Number	%		Number	%	
Gender			Religious tradition			
Male	14	29	None	17	35	
Female	34	71	Christian	22	46	
Education			Jewish	1	2	
Less than HS	1	2	Muslim	0	0	
High School	3	6	Buddhist	2	4	
Some Post-Secondary	4	8	Hindu	0	0	
Degree	19	40	Other	2	4	
Some Graduate	1	2	No answer	4	8	
Graduate Degree	20	42				

Relationship				Self-report		
Single	9	19		Depression	9	19
Married	30	63		Anxiety	27	56
Re-married	5	10		Burnout	15	31
Separated	3	6		Preventative	2	4
Divorced	0	0		Other	5	10
Widow/widower	1	2		Not applicable	2	4

### Ideal and Actual Spiritual Well Being Scores

Table 2 illustrates the ideal and actual scores on the four factors of SWBQ.

Table 2

#### *Spiritual Well Being Scores*

Scale	Ideal		Actual		Difference
	Mean	SD	Mean	SD	<i>t</i> (47)
Personal	4.70	0.46	3.16	0.82	13.40†
Communal	4.69	0.44	3.66	0.65	11.66†
Environmental	4.33	0.63	3.41	0.91	7.25†
Transcendental	3.38	1.38	2.58	1.27	6.81†

One-tailed t-tests. †  $p < .0001$

Comparisons between means indicated significant differences between the ideal and actual scores for each of Personal, Communal, Environmental, and Transcendental factors of the SWBQ. As anticipated the ideal scores were consistently higher than the lived experience or actual scores for all factors.

## Correlations of Burnout and Spiritual Incongruence Factors

Table 3 shows the correlations between the three burnout dimensions of the MBI and four spiritual well being factors of the SWBQ with the associated means and standard deviations.

Table 3

*Means, Standard Deviations, Intercorrelations of Variables*

Variable	1	2	3	4	5	6	7
1. Exhaustion							
2. Cynicism	0.74†						
3. Effectiveness	-0.30*	-0.55†					
4. iPersonal	0.33*	0.33*	-0.45**				
5. iCommunal	0.05	0.15	-0.38*	0.62†			
6. iEnvironmental	0.17	0.11	-0.44**	0.76†	0.49†		
7. iTranscendental	0.06	-0.07	-0.04	0.40**	0.28	0.53†	
<i>M</i>	3.61	2.83	4.44	1.54	1.03	0.92	0.80
<i>SD</i>	1.69	1.79	1.28	0.80	0.61	0.88	0.82

† $p < .001$  , \*\* $p < .01$ , \* $p < .05$

Correlations were in the expected directions for the MBI dimensions. Exhaustion (EX) was highly correlated with Cynicism (CY;  $r = 0.74$ ,  $p < .001$ ). Personal Effectiveness (PE) was negatively correlated with EX ( $r = -0.33$ ,  $p < .05$ ) and CY ( $r = -0.55$ ,  $p < .001$ ). Means of each burnout factor indicated the participants felt exhausted between “once a week” and a “few times a month.” Cynicism was experienced a “few times a month.” “Once a week” and “a few times a week,” on average, participants felt effective in their work.

Spiritual incongruence scores were related across the SWBQ; however iCommunal and iTranscendental only approached significance ( $r = 0.28$ ,  $p = 0.0556$ ). The strongest relationship was between iPersonal and iEnvironmental. That is, participants reporting greater incongruence in their personal spiritual well being also experienced greater incongruence in their connection to the environment.

The correlations of MBI and SWBQ revealed a moderate relationship between PE and three factors of the SWBQ (iPersonal,  $r = -0.45$ ,  $p < .01$ ; iCommunal,  $r = -.38$ ,  $p < .01$ ; iEnvironmental,  $r = -.44$ ,  $p < .01$ ). Participants who felt more effective reported experiencing lower incongruence in their relationships with self, others, and the environment. Of interest is the lack of relationship between iTranscendental and the burnout dimensions.

Personal incongruence in spiritual well being (iPersonal) was related to all three MBI factors (EX,  $r = 0.33$ ,  $p < .05$ ; CY,  $r = 0.33$ ,  $p < .05$ ; PE,  $r = -0.45$ ,  $p < .01$ ). Higher scores on iPersonal were associated with more frequent experiences of EX and CY. Lower experiences of dissonance between ideal and actual personal spiritual well being were associated with greater frequencies of feeling effective.

### Spiritual Incongruence Scores

Table 4 illustrates the means and t-test scores of the incongruence scores for each of the four SWBQ scales.

Table 4

#### *Spiritual Well Being Incongruence Scores*

Scale	Mean	SD	<i>t</i> (47)			
			1	2	3	4
1.iPersonal	1.54	0.80				
2.iCommunal	1.03	0.61	5.58†			
3.iEnvironmental	0.92	0.88	7.34†	0.95		
4.iTranscendental	0.80	0.82	5.78†	1.80	1.00	

Two-tailed t-tests. †  $p < .001$

Personal spiritual incongruence (iPersonal) was significantly different from each of the remaining three factors of spiritual well being. None of the remaining comparisons were found

to be statistically significant. Subjects reported higher incongruence personal factors than those reflecting their relationship with others, the environment, or the divine. That is, the gap between what subjects rated as important to personal spiritual well being (ideal) and their lived experience (actual) was greater than that for each of community, environment and a connection with the divine.

### Effect Size for Spiritual Incongruence

The results of the ANOVA showed that the effect of Exhaustion (EX) was significant,  $F(7, 184) = 4.45$ ;  $p < .0001$  and *post hoc* contrasts (LSD) indicated iPersonal was significantly less for the group categorized with low EX ( $M = 1.26$ ,  $SD = 0.47$ ),  $t(46) = -2.20$ ,  $p = .016$ .

The ANOVA comparing the effect of Personal Effectiveness (PE) on iPersonal, iCommunal, iEnvironmental, and iTranscendental was significant,  $F(7, 184) = 6.98$ ,  $p < .0001$  and *post hoc* contrasts (LSD) of the spiritual incongruence factors indicated the means for iPersonal ( $M = 1.25$ ,  $SD = 0.52$ ),  $t(46) = 2.47$ ,  $p < .01$ , iCommunal ( $M = 0.70$ ,  $SD = 0.42$ ),  $t(46) = 4.02$ ,  $p < .0001$ , and iEnvironmental ( $M = 0.60$ ,  $SD = 0.65$ ),  $t(46) = 2.41$ ,  $p < .01$  were lower for the group categorized with high PE. Table 5 shows the effect size (ES) for spiritual incongruence by exhaustion and personal effectiveness.

Table 5

*Effect sizes for spiritual incongruence scores by exhaustion and personal effectiveness*

	Exhaustion				Personal Effectiveness			
	High	Low	<i>D</i>	<i>s<sub>p</sub></i>	Low	High	<i>d</i>	<i>s<sub>p</sub></i>
iPersonal	1.75	1.26	0.65	0.77	1.79	1.25	0.72	0.76
iCommunal	1.08	0.97	0.21	0.62	1.32	0.70	1.16	0.53
iEnvironmental	1.02	0.79	0.28	0.88	1.19	0.60	0.70	0.84
iTranscendental	0.82	0.78	0.05	0.83	0.81	0.80	0.01	0.83

*s<sub>p</sub>*: pooled standard deviation; ES indicate subjects with less burnout reported lower incongruence

The effect size of Exhaustion (EX) on iPersonal was moderate ( $d = 0.65$ ). Subjects with high levels of EX reported greater personal spiritual incongruence ( $M = 1.75$ ) than those with low EX ( $M = 1.26$ ). The difference in scores of the two groups for iCommunal, iEnvironmental, and iTranscendental was weak ( $<.20$ ). Personal Effectiveness (PE), in contrast, yielded a high magnitude of difference (strong effects) on iCommunal ( $d = 1.16$ ) and a moderate magnitude of difference (medium effect) on iPersonal ( $d = 0.72$ ) and iEnvironmental ( $d = 0.70$ ). Subjects with a high sense of PE reported much lower spiritual incongruence in their relationship to others than those with lower sense of PE. Subjects with high sense of PE reported moderately less spiritual incongruence than those with low PE in their relationship with themselves and their environment.

## **Conclusions**

### **A Buddhist perspective of burnout**

The conjunction of Buddhist philosophy and Western psychology has opened many paths to understanding emotional dysfunctions and their resolution. Furthermore, the growing use in Western health care of Buddhist approaches to the resolution of distress allows for new perspectives on what were previously considered characterological or entrenched psychological difficulties. In many cases, this partnership has been beneficial, providing both Buddhist thought and psychological concepts the opportunity to become clear, still pools that reflect the true nature of suffering. Addiction, personality disorders, and other manifestations of disregulated behaviours that cause social and relational disruptions for the individual have come under the lens of Buddhist theory and thought and have shifted towards a perspective of suffering (*dukkha*) as an emergent property of a myriad of causes and conditions.

Buddhist thought offers a framework of diagnosis and intervention with the Four Noble Truths and the Eightfold Path that facilitates an understanding of the distress caused by an imbalance or disregulation between personal and work domains. Insofar as Right Action, Right Speech, and Right Livelihood address the morality or values of a society, a Buddhist analysis proposes that distress related to one's livelihood arises because nothing stays the same and disappointments arise from that awareness (the First Noble Truth). The potential for financial rewards, projects that have meaning and value, and feeling in alignment with the mission of one's organization or work are dynamic and constantly changing. A persistent denial of the inherent impermanence of relationships with others and with organizations may result in greater effort put into making the relationships come back into line. Incongruence, especially in values, is uncomfortable, and if prolonged, distressing. This is particularly relevant because inconsistencies between personal and organizational values that result in moral distress are related to all burnout dimensions (Maslach & Leiter, 2008; Christina Maslach, Wilmar B. Schaufeli, & Michael P. Leiter, 2001). Where there is a perception of values conflict with the organization, there may be efforts put into changing the organization's values or facing the possibility that the relationship may need to end (Maslach & Leiter, 2008). However, because of an attachment to concepts and ideas of success, to expectations of reward, and fear of loss, there is a tendency to ignore or resist experiencing these disappointments and to desire more positive emotional states (the Second Noble Truth).

Work engagement concepts focus on features of the work environment and personal resources that encourage personal development (Bakker, et al., 2008). This is consistent with the Third Noble Truth which directs change through the cultivation of personal resources such as one's ability to set clear intentions to facilitate a shift from unwholesome to wholesome actions.



Implicit in taking personal responsibility for change is the realization that the distress is related not only to a values conflict with the organization but also to an internal values conflict. Thus, Right Livelihood begins with and emerges from the alignment between one's aspirations and actions as well as from the wisdom of perceiving clearly the constantly changing environments and resources (the Fourth Noble Truth).

This study provides evidence that burnout dimensions are also associated with values conflict within the individual. Inconsistencies between aspirations and lived experience in spiritual well being are seen as an internal form of the person-organization values conflict and the results demonstrate a pattern of incongruence in spiritual well being that are consistent with the importance of the personal dimension. Persons who identified themselves as experiencing burnout hold high ideals for themselves in the different domains of spiritual well being. On average, they believed their connections with themselves, others, and their environment have great importance to spiritual health. Their connection to the divine had a moderate connection to spiritual health. However, they also reported only moderately experiencing their lives as meeting those aspirations with respect to their relationship with self, others, and environment. Their lived experience with the divine was rated as low in their actual experience. Consistent with other studies on burnout, there was a strong relationship between cynicism and the other two factors of burnout, exhaustion and personal effectiveness. The results confirm the presence of significant levels of dissatisfaction, distress, and internal values conflict.

### **Personal values alignment and managing distress**

The prevention of burnout focuses on personal efficacy and approaches to developing spiritual well being hold the person's experiential process as sacred. Both focus on the individual as central and responsible for effecting change. Similarly, Buddhist teachings

emphasize individual responsibility for transformation all the while holding the potential for that transformation to support the transformation of others. In fact, in the Mahayana tradition, the two aspirations are inseparable; the liberation of self cannot happen independently or without the liberation of others. Thich Nhat Hanh (1998a) and Looi (1998) both emphasize the importance of understanding the positive and negative impact of livelihood. The livelihood one chooses can be an expression of our deepest nature and that very expression is the manifestation of spiritual well being. Alternatively, livelihood without mindfulness of the morality it embodies can be a source of suffering and discontent for self and others.

In this study, the most consistent relationships were between the personal dimension of spiritual values conflict and burnout. Feeling disconnected in identity, joy, meaning, and self-awareness was associated with feeling unable to manage the challenges of the workplace. In contrast, the alignment of aspirations and lived experience in the personal domain reflected a similar alignment in relationships with others, the environment, and the divine; this suggests personal congruence reflects an overarching congruence in all aspects of spiritual well being. Self-efficacy had a strong connection with feeling aligned in values related to self, others, and the environment. These results highlight the impact of the personal dimension in understanding the manifestation of burnout and spiritual well being. The results in Table 4 also confirm that the personal domain played a significant role for these participants. The lowest alignment of values was in the personal domain and, taken in conjunction with the ideal and actual scores, it suggests that the participants held themselves to a higher standard of spiritual well being. This is consistent with the normative belief that we must strive for personal excellence and perhaps also judge ourselves more harshly when we perceive failure to meet those standards. It is also possible that participants act more generously towards others including being more able to align

their aspirations to their lived experience when in the service of caring for others, the environment, and cultivating their faith for the good of others.

Finally, the impact of exhaustion on values conflict in the personal spiritual domain and that of personal effectiveness on the personal and environmental domains was in the medium range. It is possible that with growing fatigue and a diminishing sense of impact on their environment, people internalize the perception that they are failing to meet their own standards and experienced disappointment in themselves. The strongest impact was of the participants' feeling of efficacy on their alignment of values they held of others. When they experienced confidence and competence in their work, they felt congruence in how they related to others; their capacity for love, trust, respect, and kindness were consistent with their aspirations.

It is of particular interest that burnout did not covary with the participants' relationship with the divine. There may be several reasons for this. The participants were not assessed on their belief in the power of the divine or God to affect their emotional distress, and furthermore, a third of the participants reported they did not have any religious affiliation. Also, whereas the transcendental domain played a moderate role in their perception of spiritual well being, the value conflict was low. While it would be tempting to state that burnout does not involve issues of faith, it is just as likely that faith did not present as an issue in the first place or that it was not discernible in this sample.

### **The role of the Chaplain in treating burnout**

Chaplains play a significant role in holding the middle ground between what appears to be paradoxical states. The challenge of this middle ground is most apparent in organizations such as hospitals where science seemingly stands in opposition to spirituality. It is also evident

in organizations where the stated mission of care and compassion may not align with financial bottom lines or growth. Health care professionals tread a fine line between providing care for the ill and dying while trying to function within a larger matrix. Public service employees face the unrelenting needs of individuals who struggle with poverty and illness while attempting to allocate limited resources provided by social services.

Regardless of the larger fabric of these paradoxical states, the dynamic tension of well being usually plays out between the individual and the organization and is a space in which the Chaplain may find fruitful work happens. Joseph Bush (2006) points out that the Chaplain's calling is in "the middle ground," relating less to grander issues of Good and Evil and more to that place where our ethics meet life. It is in the moments of deciding, acting, and responding that individuals find the dynamic tension between their ethics of being and ethics of doing. And often, the dialogue occurs around the dialectic between nonmaleficence and beneficence. That is, the greatest challenge in work and life is in discerning what does least harm and what does good.

Bush presents a perspective of not doing harm as a subset of doing good. From this he presents four categories of beneficence in order of increasing stringency:

- (1) one ought not to inflict evil or harm (what is bad);
- (2) one ought to prevent evil or harm;
- (3) one ought to remove evil or harm; and,
- (4) one ought to do or promote good.

The middle dimensions capture the complexity of pastoral responsibility when people seek the counsel of a Chaplain. Also consistent with Buddhist ethics (Anderson, 2001; Loori, 1998; Rizetto, 2005), this middle ground of preventing and removing harm becomes a *prima facie* obligation of the Chaplain. Rizetto (2005) describes the process of navigating this middle ground as developing a greater awareness of how our assumptions direct the way we need ourselves and others to be. This allows us to cut through the assumptions while holding the myriad possibilities inherent in any action and make the decision that best serves life. In other words, it is less about the extremes of being or doing good and avoiding evil; it is action informed by possibilities which have not been narrowed by our self-serving desires.

In the context of burnout, Chaplains encounter individuals who have moved beyond their resilience and who have become depleted from negotiating at the extreme edges of these dimensions. They have exhausted their resources managing the imbalance between the stated values of their lives and their lived experience of those values. In the face of this incongruence, they have lost their bearings and developed a cynical perspective of themselves and others. They feel unable to meet the demands of the situation and develop a sense of personal incompetence. In other words, they are experiencing *dukkha* or imbalance; they are not in alignment with their passions or values.

Stepping back into the larger matrix of interconnected experience, the individual experiencing burnout is often viewed through various lens of physical and psychological ill health. As noted earlier, burnout can be related to physical illness; the presenting symptoms may be in the form of cardiac difficulties, hypertension, or an exacerbation of chronic diseases. Psychological presentation may include low mood, anxiety, worry, or pre-existing psychological vulnerabilities that have been triggered. Individuals may hold idealistic beliefs about work,

personal life, their environment, and their relationships. Often these views of themselves are a dynamic between whom they believe themselves to be and whom they experience themselves as being. Aware of these interconnected dimensions of the individual, the Chaplain's role is to step outside the conventional perspective of the individual as a collection of symptoms and to meet the person in the middle ground where decisions and actions impact the flow of their lives.

In that fruitful space, the Chaplain holds a dynamic tension between the individual's ideal and lived experience and is expected to "take the subjective pulse of the person (Longstaffe, 2011)." In order to meet an individual who is experiencing symptoms of burnout, the Chaplain must be aware of how that subjective pulse manifests as a relational process with self, others, the environment, and the divine. However, the involvement of a Chaplain cannot by itself define the struggle as spiritual nor can the individual's struggle automatically be presumed to be an issue of faith. In fact, the results of research in spiritual well being in general, the four domains of spiritual well being in particular, and those reported in this study suggest that dissonance arising from ill being reflects a complex personal relational process. That the personal realm stands out in high relief argues strongly for it, rather than more ephemeral or theoretical concepts, as the door to connecting with the person's suffering. Again, this is consistent with the Buddhist perspective in which transformation of suffering or imbalance is pragmatic and begins with the individual - although it does not stop there.

### **Striking at the heart of our assumptions of burnout**

Conventionally, work and personal lives are viewed as separate and much energy is expended holding the boundaries between them. When difficulties arise in one domain, we are expected to keep the emotional turmoil from interfering with our performance in the other. When conflicting schedule or expectations arise, our choices of home over work or vice versa

can bring on criticism, often regardless of which we choose. The koan of Sen-jo and her soul being separated offers insight to this putative divide between the two realms. A literal reading of the narrative describes Sen-jo as unable to sustain the inconsistency between two values: her love for her parents and her love for her beloved. She runs away with her beloved and creates a life for herself. In current societal terms, this is appropriate individuation and establishment of one's identity (albeit somewhat unskilful). However, in cultural terms, the cost is the abandonment of a different set of values: honour her parents, enter a marriage that would bring support and care for herself and her parents. To stay would mean being caught in a set of values that are not in alignment with her desire or passion for her own way of life and choice of life partner. To leave would be to defy the rules of family and community, to violate expectations of her as daughter, wife, and future mother.

She is caught at the extremes of avoiding evil and doing good, aware that her actions have deep consequences for herself and her family. It also exposes her internal values conflict and is metaphoric of choices we make when confronted by two apparently irreconcilable systems of belief. We try to leave one behind while pursuing another, believing the two to be easily dismembered. And, the denouement of the story suggests that is not possible, that there is a larger, deeper, and very different reality. While we may believe we have walked away with all that is essential to us, there is something left behind.

The shift in the story, the unexpected strike at the heart of our assumptions, is the revelation that the split is not what we anticipated; it is not resolving Sen-jo's separation from her parents. Sen-jo has been her bedroom all these years since her loved one left. Within the culture, Sen-jo's actions would have been an affront to the community, perhaps even bringing shame on her parents. The metaphysical analysis aside, the revelation of two Sen-jo's is

important in moving us into examining the dualistic view we have of our roles. First, we see our suffering as different and separate from the other. Despite their right to disown her, they appear to have kept her safe and nourished in their home. The suffering of Sen-jo in her exile has been shared by parents who lived with their emotionally inaccessible daughter. Regardless of the parents' own conflict between seeing their daughter happy and following their cultural imperative, they have responded with compassion. Reunited, Sen-jo and her parents experience Interbeing (Hanh, 1998b); they have an interconnected experience of feeling out of alignment with their aspirations as parents and child.

Second, the appearance of two Sen-jo's shifts our own perspective; we see differently how deep suffering is divides us against ourselves. Sen-jo who left to marry is incomplete without Sen-jo who embodies commitment. Sen-jo who is unable rise from her bed is incomplete without Sen-jo who embodies passion. Although the traditional question asks which the real Sen-jo is, the koan provides the answer before the question was born. Sen-jo and her *soul* are separated. The Greek word for soul is *pneuma* or breath. Sen-jo and her breath are separated; the vitality that animates her is no longer there. The question of whether the Sen-jo who left or the one who remained behind is the real one is, in fact, irrelevant; the paradox is artificial and designed to create discomfort. Neither is animated by their passion and dedication; neither is aligned with their aspirations. Sen-jo and her soul are not separate; in fact, they have never been so (Shibayama, 2000). What had transpired was Sen-jo's abrogation of her awareness of her true nature. She surrendered her self-stewardship. In a single breath, she had the possibility of becoming whole, of re-claiming her birthright of self-realization. With that we strike at the heart of the koan.



## **Resolving the duality of work and personal life: A Buddhist model for counselling**

The heart of the koan is the revelation of boundlessness. It is also the heart of how we sew together the patches of our work and personal lives. Conventionally, when dealing with issues of burnout, the individual is encouraged to set boundaries, develop assertiveness, learn how to do what is required without becoming caught in the politics and drama of the organization. These strategies are designed to conserve our role, our territory, and our power. Although necessary and useful, especially in abusive situations, we remain at the level of rules and protocols of work-related distress. When we focus on the literal nature of what we do and identify ourselves by these criteria, we risk falling into a separated state, isolating one aspect of our way of being from another. Defined by the organization or by a narrow vision of who we are, we are held in the thrall of values and expectations that are not always congruent with who we are or want to be (Musten & Monteiro, 2010). As we see in the story of Sen-jo and in Maslach's concept of burnout (Maslach, 1982/2003), choices and questions that are formulated as dualistic ignore the boundless and seamless nature of how we relate to self, family and colleagues, home and work environment, and what represents the transcendental to us.

To reunite ourselves with our soul, to engage fully in our lives beyond the boundaries of work-and-life, we must cultivate three ways of being and they are aligned with the three clusters of the Eightfold Path: Ethics, Mindfulness, and Wisdom. The first is trust in our values, our Ethics. When we bring ourselves into alignment with our aspirations, we detach from needing specific outcomes to define our worth or fire our passion. Breath and body are united; soul animates self and is one with it. We are in constant conversation with ourselves about our intentions and whether we are falling out of alignment with our aspirations. In the life crisis that appears to be generated from our work environment, we have that opportunity to step back and

re-unite with our breath, with our wholeness, to look beyond the dualistic view of work and the rest of our life. We train ourselves to trust our values and the way in which they manifest as actions.

Second, we cultivate Mindfulness or awareness in the system we are embedded. Whyte (2001) states that our purpose is to become the captain of our own ship, to cultivate captaincy that is not hinged on any specific person or circumstance for safety and fulfillment. We must become sensitive to the nuances of change in our environment and respond with only what is necessary. As Whyte describes, we must from the edge of our experience be able to see deep into the interior to know what is being asked of us and for us. The art of applying the correct dose to a situation requires clarity of vision and a compassionate hand. We must become wise to systemic nature of our lives and thereby avoid becoming absorbed into the system itself.

Finally, we nurture our Wisdom by opening to our experience, by setting out on seamless new adventures wholeheartedly. Work, career, titles, and functionality no longer define our identity. Home and personal life are no longer defended castles but part of the entire seascape in which we navigate, come to shore, and set out again. We disengage from producing objects and outcomes in favour of productivity in relationships. Our journey within which we enact our values and the fruits of our compassionate attention becomes the means by which we live our aspirations. We live in alignment with who we are independent of whatever label we carry or space we occupy. Leaving behind the concept of work-and-life, we are free to engage fully in life's work.

## References

- Aitken, R. (1991). *The gateless barrier: The wu-men kuan*. Berkeley, CA: North Point Press.
- Anderson, R. (2001). *Being upright: Zen meditation and the bodhisattva precepts*. Berkeley, CA: Rodmell Press.
- Armstrong, K. (2001). *Buddha*. New York, NY: Penguin Putnam Inc.
- Arnette, N. C., Mascaro, N., Santana, M. C., Davis, S., & Kaslow, N. J. (2007). Enhancing spiritual well-being among suicidal African American female survivors of intimate partner violence. *Journal of Clinical Psychology*, 63(10), 909-928.
- Arnold, G. S. (2004). Qian and her soul are separated. *Mountain Record: The Zen practitioner's journal*, 23(2).
- Avanta, K. S., & Margolin, A. (2004). Development of spiritual self-schema therapy for the treatment of addictive and HIV risk behavior: a convergence of cognitive and Buddhist psychology. *Journal of Psychotherapy Integration*, 14, 253-289.
- Bakker, A. B., Schaufeli, W. B., Leiter, M. P., & Taris, T. W. (2008). Work engagement: An emerging concept in occupational health psychology. *Work & Stress*, 22(3), 187-200.
- Bodhi, B. (2005). *In the Buddha's words: An anthology of discourses from the Pali Canon*. Boston, MA: Wisdom Publications.
- Bodhi, B. (2008). *The Noble Eightfold Path: The way to end suffering*. Onalaska, WA: BPS Pariyatti Editions.
- Brauchli, R., Bauer, G. F., & Hämmig, O. (2011). Relationship between time-based work-life conflict and burnout: A cross-sectional study among employees in four large Swiss enterprises. *Swiss Journal of Psychology*, 70(3), 165–174.

- Bredle, J. M., Salsman, J. M., Debb, S. M., Arnold, B. J., & Cella, D. (2011). Spiritual well-being as a component of health-related quality of life: The Functional Assessment of Chronic Illness Therapy—Spiritual Well-Being Scale (FACIT-Sp). *Religions*, 2, 77-94.
- Bush Jr., J. (2006). *Gentle shepherding: Pastoral ethics and leadership*. St. Louis, MO: Chalice Press.
- Chowdhury, R., & Fernando, M. (2010). The relationship between spiritual well-being and ethical orientations in decision-making: An empirical study with business executives in Australia. *Research Online*, 211-225. Retrieved from <http://ro.uow.edu.au/commpapers/736> website: <http://ro.uow.edu.au>
- Cook, C., Powell, A., & Sims, A. (Eds.). (2009). *Spirituality and psychiatry*. London, UK: The Royal College of Psychiatrists.
- Crowley, N., & Jenkinson, G. (2009). Pathological spirituality. In C. Cook, A. Powell & A. Sims (Eds.), *Spirituality and psychiatry* (pp. 254-272). London UK: The Royal College of Psychiatry.
- Dalmida, S. G., Holstad, M. M., DiIorio, C., & Laderman, G. (2010). Spiritual well-being and health-related quality of life among African–American women with HIV/AIDS. *Applied Research Quality Life*. Retrieved from doi:DOI 10.1007/s11482-010-9122-6
- Diestel, S., & Schmidt, K.-H. (2010a). Direct and interaction effects among the dimensions of the Maslach Burnout Inventory: Results from two German longitudinal samples. *International Journal of Stress Management*, 17(2), 159-180.
- Diestel, S., & Schmidt, K.-H. (2010b). Interactive effects of emotional dissonance and self-control demands on burnout, anxiety, and absenteeism. *Journal of Vocational Behavior*, 77(3), 412-424. doi: 10.1016/j.jvb.2010.05.006

- Dyson, J., Cobb, M., & Forman, D. (1997). The meaning of spirituality: A literature review. *Journal of Advanced Nursing*, 26, 1183-1188.
- Edwards, J. R., & Cable, D. M. (2009). The value of value congruence. *Journal of Applied Psychology*, 94(3), 654-677.
- Ellison, C. W. (1983). Spiritual well-being: Conceptualization and measurement. . *Journal of Psychology and Theology*, 11, 330–340.
- Fisher, J. W. (1998). *Spiritual health: Its nature and place in the school curriculum*. PhD, University of Melbourne, Melbourne AU.
- Fisher, J. W. (2010). Development and application of a Spiritual Well-Being Questionnaire called SHALOM. *Religions*, 1, 105-112.
- Freudenberger, H. J. (1980). *Burnout: The high cost of achievement*. London, UK: Arrow Books.
- Glassman, B., & Fields, R. (1996). *Instructions to the cook: A Zen master's lessons in living a life that matters*. New York, NY: Bell Tower.
- Golden, J., Piedmont, R. L., Ciarrocchi, J. W., & Rodgerson, T. (2004). Spirituality and burnout: An incremental validity study. *Journal of Psychology and Theology*, 32(2), 115-125.
- Gomez, R., & Fisher, J. W. (2003). Domains of spiritual well-being and development and validation of the Spiritual Well-Being Questionnaire. *Personality and Individual Differences*, 35(8), 1975-1991. doi: 10.1016/s0191-8869(03)00045-x
- Gomez, R., & Fisher, J. W. (2005). Item response theory analysis of the spiritual well-being questionnaire. *Personality and Individual Differences*, 38(5), 1107-1121. doi: 10.1016/j.paid.2004.07.009

- González-Romá, V., Schaufeli, W. B., Bakker, A. B., Lloret, S., & Aaron, L. A. (2006). Burnout and work engagement: Independent factors or opposite poles? *Journal of Vocational Behavior*, 68, 165–174.
- Halbesleben, J. (Ed.). (2008). *Handbook of stress and burnout in health care*. New York, NY: Nova Science Publishers, Inc.
- Halifax, J. (2010). *The precious necessity of compassion*. Upaya Zen Institute. Santa Fe, NM.
- Hanh, T. N. (1991). *Old path white clouds: Walking in the footsteps of the Buddha*. Berkeley, CA: Parallax Press.
- Hanh, T. N. (1998a). *The heart of the Buddha's teaching*. Berkeley, CA: Parallax Press.
- Hanh, T. N. (1998b). *Interbeing: Fourteen guidelines for engaged Buddhism*. Berkeley, CA: Parallax Press.
- Hanh, T. N. (2007). *For a future to be possible*. Berkeley, CA: Parallax Press.
- Hill, P. C., & Pargament, K. I. (2003). Advances in the conceptualization and measurement of religion and spirituality: Implications for physical and mental health research. *American Psychologist*, 58(1), 64-74.
- Hori, V. S. (2006). The steps of koan practice. In J. D. Looi (Ed.), *Sitting with koans*. Somerville, MA: Dharma Communications Press.
- Humphreys, C. (1987). *Exploring Buddhism*. London, UK: Unwin Hyman Limited.
- Innstrand, S. T., Langballe, E. M., & Falkum, E. (2011). The longitudinal effects of individual vulnerability, organisational factors, and work-home interaction on burnout among male church ministers in Norway. *Mental Health, Religion & Culture*, 14(3), 241-257.
- Janssen, P. P. M., Schaufelie, W. B., & Houkes, I. (1999). Work-related and individual determinants of the three burnout dimensions. *Work & Stress*, 13(1), 74-86.

- Kabat-Zinn, J. (1990). *Full Catastrophe Living: Using the Wisdom of Your Body and Mind to Face Stress, Pain, and Illness*. New York, NY: Delta.
- Kapuscinski, A. N., & Masters, K. S. (2010). The current status of measures of spirituality: A critical review of scale development. *Psychology of Religion and Spirituality*, 2(4), 191-205.
- Karasek, R., & Theorell, T. (1990). *Healthy work: stress, productivity, and the reconstruction of working life*. New York, NY: Basic Books.
- Kenneth D. Phillips, P., RN, Kathryn S. Mock, M., FNP, Christopher M. Bopp, M., Wesley A. Dudgeon, B., & Gregory A. Hand, P. (2006). Spiritual well-being, sleep disturbance, and mental and physical health status in Hiv-infected individuals. *Issues in Mental Health Nursing*, 27, 125-139.
- Krasner, M. S., Epstein, R. M., & al., H. B. e. (2009). Association of an educational program in mindful communication with burnout, empathy, and attitudes among primary care physicians. *Journal of the American Medical Association*, 302(12), 1284-1293.
- Leiter, M. P. (2008). A two process model of burnout and work engagement: Distinct implications of demands and values. *Suplemento A, Psicologia*, 30(1), A52-A58.
- Leiter, M. P., Frank, E., & Matheson, T. (2009). *Values, demands, and burnout: Perspectives from national survey of Canadian physicians*. Paper presented at the American Psychological Association.
- Leiter, M. P., Gascon, S., & Martinez-Jarreta, B. (2010). Making sense of work life: A structural model of burnout. *Journal of Applied Social Psychology*, 40(1), 57-75.
- Leiter, M. P., Gascón, S., & Martínez-Jarreta, B. (2008). A two process model of burnout: Their relevance to Spanish and Canadian nurses. *Psychology in Spain*, 12, 37-45.

- Leiter, M. P., Gascón, S., & Martínez-Jarreta, B. (2010). Making sense of work life: A structural model of burnout. . *Journal of Applied Social Psychology*, 40(1), 57-75.
- Leiter, M. P., & Harvie, P. L. (1996). Burnout among mental health workers: A review and a research agenda. *International Journal of Social Psychiatry*, 42(2), 90-101.
- Leiter, M. P., Laschinger, S., H. K., Day, A., & Oore, D. G. (2011). The impact of civility interventions on employee social behavior, distress, and attitudes. *Journal of Applied Psychology*. doi: 10.1037/a0024442
- Leiter, M. P., & Maslach, C. (1988). The impact of interpersonal environment on burnout and organizational commitment. *Journal of Organizational Behavior*, 9, 297–308.
- Leiter, M. P., & Maslach, C. (2005). *Banishing burnout: Six strategies for improving your relationship with work*. San Francisco, CA: Jossey-Bass.
- Longstaffe, D. (2011). *Ancient art and the new science: Emerging practices and partnerships in the third millennium*. The Ottawa Hospital. Ottawa, ON.
- Loori, J. D. (1998). *Invoking reality*. Boston, MA: Shambhala Publications.
- Loori, J. D. (2006). Introduction. In J. D. Loori (Ed.), *Sitting with koans*. Somerville, MA: Dharma Communications Press.
- Lopez, D. S. (2001). *The Story of Buddhism: A concise guide to its history and teachings*. New York, NY: HarperCollins.
- Maslach, C. (1982/2003). *Burnout: The cost of caring*. Los Altos, CA: ISHK.
- Maslach, C., & Jackson, S. (Eds.). (1984). *Burnout in organizations* (Vol. 5). Beverly Hills, CA: Sage.
- Maslach, C., Jackson, S. E., & Leiter, M. P. (1996). *Maslach Burnout Inventory manual* (3rd ed.). Palo Alto, CA: Consulting Psychologists Press.



- Maslach, C., & Leiter, M. P. (1997). *The truth about burnout: How organizations cause personal stress and what to do about it*. San Francisco, CA: Jossey-Bass.
- Maslach, C., & Leiter, M. P. (2008). Early Predictors of Job Burnout and Engagement. *Journal of Applied Psychology*, 93(3), 498-512.
- Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. *Annual Review of Psychology*, 52, 397–422.
- Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. *Annual Review of Psychology*, 52, 397-422. doi: 10.1146/annurev.psych.52.1.397
- McCracken, L. M., & Yang, S.-Y. (2008). A contextual cognitive-behavioral analysis of rehabilitation workers' health and well-being: Influences of acceptance, mindfulness, and values-based action. *Rehabilitation Psychology*, 53(4), 479–485.
- McCullough, M., Hoyt, W., Larson, D., & Koenig, H. (2000). Religious involvement and mortality: A meta-analytic review. *Health Psychology*, 19(3), 211-222.
- Meezenbroek, E. d. J., Garssen, B., Berg, M. v. d., Dierendonck, D. v., Visser, A., & Schaufeli, W. B. (2010). Measuring spirituality as a universal human experience: A review of spirituality questionnaires. *Journal of Religion and Health*. Retrieved from Open Access at SpringerLink website: [www.springerlink.com](http://www.springerlink.com)
- Moodley, T. (2008). *The Relationship Between Coping And Spiritual Well-Being During Adolescence*. PhD, University of the Free State, Bloemfontein, South Africa.
- Musten, R. F., & Monteiro, L. M. (2010). *Minding the life you have*. Ottawa Mindfulness Clinic. Ottawa, ON.
- Nakamura, H. (2000). *Gotama Buddha: A biography based on the most reliable texts* (G. Sekimori, Trans. Vol. 1). Tokyo, Japan: Kosei Publishing Co.

- Nanamoli, B., & Bodhi, B. (2005). *The middle length discourses of the Buddha: A translation of the Majjhima Nikaya*. Somerville, MA: Wisdom Publications.
- Potter, P., Deshields, T., Divanbeigi, J., Berger, J., Cipriano, D., Norris, L., & Olsen, S. (2010). Compassion fatigue and burnout: Prevalence among oncology nurses. *Clinical Journal of Oncology Nursing*, 14(5), E56-E62.
- Rahula, W. (1974). *What the Buddha taught: Revised and expanded edition with texts from suttas and dhammapada*. New York, NY: Grove Press.
- Reed, P. G. (1992). An emerging paradigm for the investigation of spirituality in nursing. *Research in Nursing & Health*, 15(5), 349-357.
- Rizetto, D. (2005). *Waking up to what you do*. Boston, MA: Shambhala Publications.
- Sadhatissa, H. (1997). *Buddhist ethics*. Boston, MA: Wisdom Publications.
- Salem, M. O., & Foskett, J. (2009). Religion and religious experiences. In C. Cook, A. Powell & A. Sims (Eds.), *Spirituality and psychiatry* (pp. 233-253). London, UK: The Royal College of Psychiatry.
- Saunders, S. M., Lucas, V., & Kuras, L. (2007). Measuring the discrepancy between current and ideal spiritual and religious functioning in problem drinkers. *Psychology of Addictive Behaviors*, 21(3), 404-408.
- Schaible, L. M., & Gecas, V. (2010). The impact of emotional labor and value dissonance on burnout among police officers. *Police Quarterly*, 13(3), 316-341.
- Shanafelt, T. D. (2009). Enhancing meaning in work: A prescription for preventing physician burnout and promoting patient-centered care. *Journal of the American Medical Association*, 302(12), 1338-1340.

- Shibayama, Z. (2000). *The gateless barrier: Zen comments on the Mumokan* (S. Kudo, Trans.). Boston, MA: Shambhala Publications.
- Shirom, A. (2003). Job-related burnout: a review. In J. C. Quick & L. E. Tetrick (Eds.), *Handbook of occupational health psychology* (pp. 245-264). Washington, D.C.: American Psychological Association.
- Shirom, A. (2011). Job-related burnout: A review of major research foci and challenges. In J. C. Quick & L. E. Tetrick (Eds.), *Handbook of occupational health psychology* (2 ed., pp. 223-241). Washington DC: American Psychological Association.
- Sims, A., & Cook, C. (2009). Spirituality in psychiatry. In C. Cook, A. Powell & A. Sims (Eds.), *Spirituality and psychiatry* (pp. 1-15). London, UK: The Royal College of Psychiatry.
- Smith, J. (2002). *The beginner's guide to walking the Buddha's Eightfold Path*. New York, NY: Bell Tower.
- Spurlock, W. R. (2005). Spiritual well-being and caregiver burden in Alzheimer's caregivers. *Geriatric Nursing*, 26(3), 154-161.
- Suzuki, D. T. (1996). Zen in relation to Buddhism generally. In W. Barrett (Ed.), *Zen Buddhism: Selected writings of D.T. Suzuki*. New York, NY: Doubleday.
- Thanissaro, B. (2010). Dhammacakkappavattana sutta: Setting the wheel of Dhamma in motion (SN 56:11). Retrieved from Access to Insight website: <http://www.accesstoinsight.org>
- Thoresen, C. E., & Harris, A. H. S. (2004). Spirituality, religion, and health: A scientific perspective. In J. M. Raczynski & L. C. Leviton (Eds.), *Handbook of clinical health psychology: Disorders of behavior and health* (Vol. 2, pp. 269-298). Washington, DC: American Psychological Association.

Vardey, L., & Costa, J. D. (2007). *Being generous: The art of right living*. Toronto, ON: Vintage Canada.

Wallis, G. (2007). *Basic teachings of the Buddha*. New York, NY: Modern Library/Random House.

Whyte, D. (2001). *Crossing the unknown sea: Work as a pilgrimage of identity*. New York, NY: Riverhead Books.

Zimbardo, P. G. (2007). *The Lucifer effect: Understanding how good people turn evil*. New York, NY: Random House.