

REIGNITE the desire: Tackle burnout in psychiatry

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Burnout among psychiatric clinicians can lead to reduced job satisfaction, poorer quality of patient care, and depression.¹ Signs of burnout include a feeling of cynicism (eg, negative attitudes toward patients), overwhelming exhaustion (eg, feeling depleted), and a sense of ineffectiveness (eg, reduced productivity).¹ Workplace variables and other factors that could perpetuate burnout among psychiatrists include, but are not limited to:

- too much work
- chronic staff shortages
- working with difficult patients
- inability to meet self-imposed demands
- a lack of meaningful relationships with colleagues and supervisors.^{1,2}

The mnemonic **REIGNITE** provides strategies to reduce the risk of burnout.^{1,3}

Recognize your limits. Although saying “no” may be difficult for mental health clinicians, saying “yes” too often can be detrimental. Techniques for setting limits without alienating colleagues include:

- declining tasks (“I appreciate you thinking of me to do that, but I can’t complete it right now”)
- delaying an answer (“Let me ponder what you are asking”)
- delegating tasks (“I could really use your help”)
- avoid taking on too much (“I thought that I could do that extra task, but I realize that taking on the additional assignment isn’t going to work out”).

Expand your portfolio. Developing a diverse work portfolio (eg, teaching part-time) could diminish stagnation. Adding

regenerative activities (eg, outdoor activities) could be restorative.

Itemize your priorities. Ask yourself what is important to you. Is it work? If so, can work be modified so it continues to be rewarding without resulting in burnout? If it isn’t work, then what is? Money? Family? Evaluating what is important and pursuing those priorities could increase overall life satisfaction.

Go after your passions. What do you like to do aside from work? Do you paint or play a musical instrument? Pursuing hobbies and interests can revitalize your spirit.

Now. We as a profession are notorious for saying to ourselves, “I will get to it (being happy) someday.” We delay happiness until we catch up with work, save enough money, and so on. This approach is unrealistic. It is better to live in the present because there are a finite number of days to seize the day. Focus your energy in the moment.

Interact. Isolating oneself will lead to burnout. If you are in solo practice, con-

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nect with other providers or get involved in community activities. If you work with other providers, interact with them in a meaningful manner (eg, don't complain but rather air your concerns, accept honest feedback, be open to suggestions, and seek assistance; it is acceptable to admit that you can't do everything).

Take time off and take care of yourself. Although that seems intuitive, psychiatrists, as a group, don't do a good job of it. Waiting until you are burned out to take a vacation is counterproductive because you will be too drained to enjoy it. Taking care of your physical and mental health is equally important.

Enjoyment in and at work. We make a difference in our patients' lives through the emotional connections we develop with them. By viewing what we do as fulfilling a higher calling, we can learn to enjoy what we do rather than feeling burdened by it. Advocating for better recognition—whether financial, institutional, or social—can create opportunities for personal satisfaction.

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