

Exiting the Social Work Profession: A Multifaceted Analysis of Emotional, Structural, and Health-Related Factors

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Abstract— This study explores the complex process of exiting the social work profession, focusing on the interplay between emotional exhaustion, structural challenges, and personal health crises. Using an in-depth qualitative interview and content analysis, the paper delves into the lived experiences of a former social worker. The research identifies key drivers behind professional attrition, such as burnout, inadequate work-life balance, and the impact of health problems as turning points. The findings highlight the need for systemic reforms in the profession, emphasizing better support structures, health management, and opportunities for personal development. The study suggests that addressing these issues is critical to enhancing job satisfaction and retaining professionals in social work.

Keywords— Burnout, Career transition, emotional exhaustion, Health crises, Professional attrition, Social Work, Work-Life balance

I. INTRODUCTION

The profession of social work is deeply rooted in the facilitation of human well-being, particularly for marginalized, vulnerable, or disadvantaged populations. Social workers are tasked with providing essential support, advocacy, and care in contexts that often involve significant emotional and psychological strain. However, despite the critical importance of this role, the profession faces considerable challenges related to the retention and well-being of its practitioners. Over the past decade, the phenomenon of "exiting" the field of social work has garnered increasing attention in both academic and professional discourses. This trend is reflective of broader systemic issues, such as insufficient resources, high emotional labor, and structural limitations within social work environments (Leiter, 2018; Maslach & Leiter, 2016).

The decision to exit the social work profession is not merely a personal career change but an event with significant ramifications. When a social worker leaves the profession, it creates gaps in service provision, potentially leading to disruptions in client care and diminished access to necessary social services. Moreover, the departure of experienced professionals contributes to the destabilization of social work institutions, which are often already operating under resource constraints (DePanfilis, 2019). Therefore, understanding the dynamics of why and how social workers choose to leave the profession is critical not only for addressing workforce shortages but also for

enhancing the overall sustainability and efficacy of social services.

This study seeks to investigate the multifaceted factors that drive social workers to leave the profession, with a particular focus on the interplay between structural, emotional, and personal dimensions. Through a detailed examination of the experiences of a former social worker, gathered via an in-depth qualitative interview, and analyzed using Mayring's (2014) content analysis methodology, this paper aims to provide nuanced insights into the exit process. While much of the existing literature addresses burnout and emotional exhaustion as primary contributors to professional attrition (Lizano, 2015), this study aims to delve deeper into the decision-making process, exploring how these factors interact with broader systemic issues such as inadequate support structures, limited career progression opportunities, and organizational inefficiencies.

II. THEORETICAL BACKGROUND

The decision to exit the social work profession has become an increasingly prominent topic within both academic and professional research circles. Historically, research on professional attrition in social work focused primarily on burnout as an isolated psychological phenomenon, often linking it to the emotional toll of client interactions and the demanding nature of social service environments. However, contemporary studies have expanded this focus, recognizing that professional exit is a complex and multifactorial process involving both personal and institutional factors (Barford &

Whelton, 2010). Social work is uniquely positioned at the intersection of multiple stressors, including high emotional labor, exposure to secondary trauma, and the pressure to achieve outcomes with limited resources. These challenges, while inherent to the nature of the profession, can compound over time, leading to emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment — core components of the burnout syndrome (Maslach & Jackson, 1981). Yet, exiting the profession is not always a direct or abrupt consequence of burnout. Research suggests that the decision to leave social work is often a gradual process influenced by a confluence of professional dissatisfaction, unmet expectations, and a sense of futility in achieving meaningful change within structurally constrained environments (Kim & Stoner, 2008).

Several studies have identified specific occupational hazards in social work that exacerbate the risk of professional exit. Among these, high caseloads, insufficient supervisory support, and the frequent mismatch between job demands and available resources are recurrently cited (Leiter et al., 2014). These factors not only contribute to the psychological strain experienced by social workers but also create a broader sense of disillusionment with the profession itself. Social workers may feel that their ability to help clients is significantly compromised by systemic barriers, leading to feelings of powerlessness and alienation from their professional identity (Brotheridge & Lee, 2002). This alienation, when coupled with physical and emotional exhaustion, can intensify the desire to seek alternative career paths. Importantly, the exit from social work should not be conceptualized solely as a negative outcome. For some individuals, leaving the profession can represent an adaptive response to unsustainable working conditions. This perspective shifts the focus from burnout as an individual failing to a recognition of the broader structural and systemic issues within the profession that contribute to professional dissatisfaction and eventual exit (Wilberforce et al., 2014). Thus, addressing the issue of social work attrition requires a multi-level approach that considers both personal resilience and institutional reform.

Career Transition as a Coping Strategy

Career transition, or the decision to pursue an alternative professional path, often emerges as a coping mechanism for individuals experiencing burnout or chronic work-related stress in social work. This strategy allows social

workers to alleviate the psychological and emotional strain associated with the profession by seeking out roles that offer better work-life balance, improved financial compensation, or alignment with personal values and interests (Gibbs, 2001).

In many cases, social workers who leave the profession do so after extensive consideration, weighing the personal costs of staying against the potential benefits of transitioning to a new field. Emotional burnout, while significant, is not the only factor that drives this decision. Rational considerations, such as the desire for career advancement, a stable work environment, and the opportunity for personal growth, also play a crucial role in shaping the decision to exit (Wilberforce et al., 2014). For many, leaving social work represents a proactive step toward reclaiming control over one's professional and personal life. The transition to another career is often seen as a pathway to not only mitigate burnout but also to regain a sense of professional fulfillment. Social workers frequently report that their roles, while rewarding in some respects, do not always align with their evolving aspirations, leading to feelings of stagnation. The inability to progress within the field, either due to limited opportunities for promotion or systemic constraints, compounds this frustration (Collins, 2008). For these individuals, career change is not only about escaping the negative aspects of social work but also about seeking new challenges that align more closely with their skills and interests. It is important to acknowledge that career transition as a coping strategy does not occur in isolation. For many social workers, the decision to leave is supported by external factors such as family considerations, financial pressures, and the availability of alternative career paths. Research suggests that individuals are more likely to leave social work when they perceive viable options in other sectors that offer better financial stability or work conditions (Wilberforce et al., 2014). Therefore, the transition out of social work must be understood as part of a broader career trajectory that encompasses both personal ambitions and external opportunities.

III. METHODOLOGY AND RESEARCH DESIGN

This study employed a qualitative research design, using an in-depth interview with a former social worker as the primary data source. The interview aimed to explore the respondent's reasons for leaving the profession and the decision-making process that led to this outcome. Conducted over 120 minutes, the interview provided a rich and detailed account of the respondent's

professional experiences, challenges, and personal reflections on her career transition. The open-ended nature of the interview allowed the participant to narrate her journey in her own words, offering valuable insights into the emotional and practical considerations that influenced her decision to exit the field. The decision to focus on a single case study was motivated by the desire to gain an in-depth understanding of the complex dynamics involved in professional exit. While the findings cannot be generalized to all social workers, they provide a valuable starting point for developing broader theoretical insights. By examining the lived experiences of one individual in detail, this study seeks to uncover patterns and themes that may be relevant to other social workers facing similar challenges. The data collection process was guided by grounded theory principles, with the goal of generating open and unbiased data. The interview was conducted in person and transcribed verbatim to ensure the accuracy of the analysis. The interview questions were designed to elicit a narrative account of the participant's career in social work, with a particular focus on the factors that contributed to her decision to leave the profession. The narrative approach allowed the respondent to reflect on both the emotional and practical dimensions of her decision, providing a comprehensive view of the exit process.

The data were analyzed using Mayring's (2014) qualitative content analysis, a method that allows for the systematic categorization of text data. The analysis followed a step-by-step process designed to identify recurring themes and meaning structures within the interview material.

1. **Determining the Unit of Analysis:** The unit of analysis was defined as thematically complete segments of the interview, focusing specifically on passages that addressed the key aspects of professional exit.
2. **Categorization of Material:** The interview transcript was coded using an inductive approach, with recurring themes and patterns identified through a process of open coding. These categories were grouped into broader themes that reflected the main factors influencing the participant's decision to leave social work.
3. **Merging Categories:** After initial coding, related categories were merged to provide a more coherent understanding of the central themes in the data. The final categories focused on emotional exhaustion,

lack of work-life balance, health problems, and the need for personal growth.

The use of qualitative content analysis allowed for a nuanced interpretation of the data, highlighting both explicit and implicit themes within the participant's narrative. The findings provide a detailed account of the challenges and considerations that led to the participant's decision to leave social work.

IV. RESULTS

The analysis of the interview with the former social worker revealed four key categories that significantly influenced her decision to exit the social work profession. These categories include emotional exhaustion and burnout, lack of work-life balance, health issues as a turning point, and the need for personal development. These themes reflect a deep-seated dissatisfaction that gradually emerged and ultimately led to the decision to leave social work entirely.

Emotional Exhaustion and Burnout

One of the central themes in the interview was the emotional exhaustion that progressively developed during the respondent's career. This exhaustion was accompanied by a sense of being overwhelmed, which was exacerbated by the intense emotional demands of working with clients. The respondent noted: "Gradually, I realized that I was feeling worse and worse, both mentally and physically." The increasing fatigue and exhaustion she experienced during her daily work made it difficult for her to carry out her responsibilities. She found herself frequently needing to take "a quick power nap" during working hours just to continue functioning. This physical and psychological exhaustion is frequently associated in the literature with the concept of burnout, which is particularly prevalent in social professions (Maslach & Leiter, 2016). A particularly challenging aspect for the respondent was the feeling of not making meaningful progress in her work: "I wanted to achieve more, to feel that what I was doing actually had a real purpose." The lack of visible achievements in her daily work exacerbated her emotional exhaustion and the sense of futility, which can be common in social work when personal efforts do not lead to immediate, tangible results. In addition to this emotional strain, the pressure of the work led to physical symptoms: "I was often tired, felt drained, and had to sleep a lot." These symptoms are typical of burnout syndrome, which is characterized by chronic exhaustion, fatigue, and a sense of being overwhelmed (Lizano, 2015). These physical

symptoms posed a significant burden for the respondent and contributed to her decision to leave the profession.

Lack of Work-Life Balance

Another central theme that emerged from the interview analysis was the lack of work-life balance. Working in shifts and the irregular work hours led the respondent to feel as though her life revolved entirely around her job. "You're constantly at work, talking about work, eating at work, sometimes even sleeping at work – you basically don't have a life anymore," she described. This constant immersion in work left little room for personal or family life, contributing to an overwhelming sense of imbalance between her professional and personal spheres. The absence of clear boundaries between work and life is a well-documented source of dissatisfaction in the social work profession, and it played a significant role in the respondent's eventual decision to exit. Especially in the residential group where she worked, the constant availability led to a persistent strain. Weekends, when some residents would go to their families, were particularly stressful: "By Monday, you were already bracing yourself for the worst – aggression, disregard for rules, and so on." This constant state of vigilance meant that the job remained present for the interviewee even during her free time, significantly reducing the restorative value of her days off.

Another aspect of the lack of work-life balance was the inability to distance herself from work. Even on her days off, the interviewee received messages from colleagues asking for help with organizational matters, as she reported in the interview: "Even on my days off, I would receive a WhatsApp asking, for example, where the key to the basement was." This constant accessibility prevented her from completely disconnecting and recovering from work-related stresses.

The impact of this lack of work-life balance is well-documented in the literature. Studies show that social workers who do not have a clear separation between work and personal life are at increased risk of burnout and emotional exhaustion (Kim & Stoner, 2008). The interview findings highlight that this lack of balance was a crucial factor contributing to the interviewee's decision to leave social work.

Another critical factor in the interviewee's decision to leave social work was the diagnosis of a severe illness. This health crisis marked a turning point in her life and forced her to reconsider both her professional and

personal situation. "The cancer diagnosis turned my entire life upside down again," she described the moment she realized she needed to reprioritize her career. The illness resulted in the interviewee being unable to work for an extended period. During this time, she reflected deeply on her professional future: "You only live once, and I had a career crisis that was, of course, closely linked to my health crisis." During her illness, it became clear to her that she did not want to return to social work. "For me, it was clear: I'm not coming back. I've set aside the topic of social work for now," she explained her decision.

This experience illustrates that health crises often serve as a turning point, forcing social workers to reassess their professional situation. The health burdens associated with social work are well-documented in the literature, and it is known that many social workers face an increased risk of health problems due to their work (Wilberforce et al., 2014). The interview findings confirm that such crises frequently trigger a decision to leave the profession.

In addition to health-related issues, the need for personal development played a central role in the interviewee's decision-making process. She described feeling increasingly under-challenged in her role and saw no long-term prospects for herself. "Life is too limited and valuable to waste it on something you're not 100% committed to," she explained her decision to leave the profession. The interviewee had hoped that studying social work would allow her to develop her skills further and rise to a leadership position. However, these expectations were not met: "I had very high expectations that they would turn me into a 'perfect person' who could help others, but in reality, it's more about caretaking rather than actively shaping and creating." This discrepancy between the expectations and the reality of social work led to deep dissatisfaction and a desire for career change. The interviewee eventually chose self-employment, hoping to find more freedom and self-fulfillment in this path. "I want to live in a way where I have no regrets and can fully express myself," she described her motivation for embarking on a new professional journey. This decision aligns with studies showing that many social workers leave the profession to pursue other fields that offer greater career fulfillment (Collins, 2008).

Another interesting result of the interview was the role of interpersonal relationships in the decision to leave

social work. The interviewee described how her relationships with colleagues changed during her illness: "As soon as you're gone for a few months, you already feel like you've lost connection." While some colleagues maintained contact, other friendships faded, which the interviewee found disappointing: "In hindsight, it seems like it was just the work that kept us together."

This experience highlights that the often intense collaboration in social work can foster close relationships, but these relationships frequently remain confined to the professional sphere. Once the professional connection ends, many of these relationships dissolve, which can be an additional emotional burden for those affected.

V. DISCUSSION

This study on leaving the social work profession provides valuable insights into the key factors driving professionals to end their careers. The in-depth interview findings illustrate that emotional exhaustion, poor work-life balance, health crises, and the need for personal development are essential drivers of career exits. These factors interact in complex ways and must be examined from multiple perspectives to fully understand the dynamics of leaving the social work profession.

Emotional Exhaustion and Burnout: Professional Passion versus Long-term Strain

Emotional exhaustion and burnout are central issues in social work, as demonstrated in numerous previous studies (Maslach & Leiter, 2016). In the present case, the interviewee reported suffering from increasing physical and mental exhaustion: "Gradually, I realized that I was feeling worse step by step." This illustrates how daily work with traumatized or disadvantaged clients imposes a long-term burden. This emotional strain goes beyond merely fulfilling professional duties and touches on one's identity and self-esteem, leading to psychological and physical distress in the long run.

From a systemic perspective, the question arises as to whether the structures of social work are suitable for managing this form of intense emotional labor over the long term. The interviewee described how the "love for the clients" was a motivating factor for her work, but the lack of support from the system and the limited impact of her efforts undermined this passion. This discrepancy between the intrinsic motivations that drive social workers into the profession and the systemic constraints

that hinder their work is a central issue. Social workers often engage in emotional labor without adequate institutional support, significantly increasing the risk of burnout. Implementing measures to reduce emotional labor, such as regular supervision and psychological support, could be helpful. At the same time, social workers should be better prepared for the emotional challenges of their role, through specific training that teaches them how to manage emotional exhaustion.

The lack of work-life balance, intensively discussed in the interview, represents another critical issue. The interviewee described how she constantly felt "on the job," without ever being able to fully switch off: "You're always at work, talking about work, eating at work, sometimes even sleeping at work." This illustrates the inadequate structures in social professions that fail to enable a clear separation between work and personal life. Shift work and constant accessibility prevent social workers from having enough time for recovery, leading to long-term overload. From an individualistic perspective, it could be argued that professionals in social work need to be more conscious of setting personal boundaries and taking deliberate breaks. This perspective emphasizes the personal responsibility of workers to manage their work-life balance. However, the interviewee reported that it was "hardly possible" for her to set these boundaries, as the job demands did not allow her to fully distance herself from work. This statement highlights the limits of the individualistic perspective, as the structural conditions of the profession often prevent social workers from exercising personal responsibility effectively.

The systemic perspective, on the other hand, emphasizes the need for structural changes in social work to facilitate a better work-life balance. This could include more flexible working models, such as the introduction of a four-day workweek, or a stricter separation between work and leisure. The interviewee's constant availability, even on her days off, shows a lack of clear rules that would have allowed for a complete disconnection from work. This issue underscores the need for clear structures and policies regarding availability and work time management to promote the mental and physical health of employees.

A particularly striking aspect of the interview was the role of the health crisis that the interviewee experienced. The diagnosis of a severe illness marked a turning point in her professional life and ultimately led her to leave

social work entirely. "The illness led to a phase of intense reflection, during which I decided to completely withdraw from social work," she reported. This experience shows that health crises are often the decisive factor that accelerates the final exit from the profession.

Health crises often trigger a deep reflection on one's life situation and professional burden. In social work, the health risks are particularly high due to the intense emotional labor and poor work-life balance. Studies show that many social workers suffer from physical and mental health issues, which are often ignored until a serious health crisis occurs (Lizano, 2015). The interviewee reflected that, in the period leading up to her diagnosis, she "constantly felt drained and tired," which ultimately prompted her to seek medical help.

The health burdens in social work pose a serious challenge that must be addressed not only on an individual level but also systemically. Preventive measures must be taken to protect the health of professionals. Regular health checks and closer integration of health management into professional practice could help identify and prevent health crises early on. It is clear that action must be taken before a crisis occurs—social work must proactively minimize health risks to prevent long-term absences.

The need for personal development, which the interviewee repeatedly emphasized, is also a central aspect that led to her exit from social work. She explained that she increasingly felt "under-challenged" and saw no opportunity for advancement in her job. This dissatisfaction became particularly evident when she described: "Life is too limited and valuable to waste on something you're not 100% behind." Here it becomes clear that social work, for many professionals, does not offer the long-term career fulfillment they seek.

This contrasts sharply with the expectations that many social workers have at the start of their careers. The interviewee recounted that she had high expectations for her professional future during her studies in social work: "I had hoped to gain more skills to handle difficult situations." However, these expectations were not met, leading to deep dissatisfaction. This gap between expectations and the reality of social work is a widespread phenomenon that frustrates many professionals. From a critical perspective, it could be argued that social work often lacks sufficient opportunities for development, especially for those

seeking more than a daily routine. The interviewee ultimately chose self-employment to find greater career fulfillment: "I want to live in a way where I have no regrets and can fully express myself." This decision shows that social workers who feel "stuck" in their profession often seek new paths to develop personally and professionally.

Institutions in social work need to create more opportunities for ongoing education and development that allow professionals to continuously advance. Moreover, career paths should be established that enable social workers to move into more responsible and challenging positions to achieve long-term career fulfillment.

VI. CONCLUSION

This study clearly demonstrates that leaving the social work profession is not a singular event but the result of a prolonged process in which various stress factors and crises play a role. At the center of this process is the emotional and physical health of professionals. Social work is a field characterized by high levels of emotional labor, which often endangers the health of its workers. In this conclusion, the significance of health in social work is explored in greater depth and critically examined, considering both the opportunities and challenges.

Health is an essential prerequisite for the long-term practice of social professions. In social work, which is heavily influenced by interpersonal interactions and emotional engagement with complex life situations, the physical and mental stability of professionals plays a central role. The interviewee vividly describes this: "You take home so many problems that you can't process yourself, you have no time for yourself, and you accumulate more and more issues. Every social worker actually needs a social worker or at least a psychologist." This quote shows that the demands placed on social workers often exceed what can be managed with the available resources and support structures.

Thus, health should not be seen solely as an individual responsibility of employees but as a structural challenge requiring systematic measures for health protection and promotion to be integrated into work organization. Supervision, regular health checks, and work schedules that allow for recovery are just a few of the tools that are often lacking or insufficiently implemented in many institutions.

The results of the study also highlight the ambivalence of the burdens faced by social workers. On the one hand, working with people is described as fulfilling, yet at the same time, the emotional closeness to clients leads to exhaustion and a sense of being overwhelmed. The interviewee explains: "It wasn't the individual things themselves, but the overall package. The kids are lovely, the colleagues are great, but something is missing in the bigger picture." This statement underscores that social work is often marked by small, daily successes, yet the long-term impact of one's work is difficult to perceive. The absence of a clear sense of purpose or tangible change in clients' lives leads to persistent frustration, which can severely affect mental health over time.

This prompts a critical reflection on whether social work can be practiced long-term without endangering the health of its professionals. The high expectations placed on social workers often stand in contrast to the limited resources available to them. Structural changes are required to minimize health risks in the profession.

A particularly critical point in the discussion is the role of health crises as turning points in the professional lives of social workers. The interviewee described how the diagnosis of a serious illness led to deep reflection on her professional and personal situation: "The illness led to a phase of intense reflection, during which I decided to completely withdraw from social work." This experience is representative of many social workers who are only forced to reflect on their health and professional burdens during times of crisis.

The interview shows that health crises are not only the result of work-related stress but can also act as catalysts for profound changes in the lives of social workers. These crises often lead to a radical reevaluation of priorities and mark the moment when many social workers decide to leave their careers, recognizing that their health and quality of life are at stake.

The discussion around the importance of health in social work should be examined from different perspectives. On one hand, there is the individualistic perspective, which places the responsibility for one's health and well-being on the individual professional. From this viewpoint, social workers should focus more on protecting themselves, maintaining boundaries, and seeking help early when health problems arise.

On the other hand, there is a systemic perspective, which places the responsibility for the health of professionals on employers and the structures within social work. This perspective raises the question of how working conditions can be designed to promote, rather than endanger, employees' health. This view advocates for social institutions to invest more resources into the health of their employees, whether through better working conditions, fair compensation, or sufficient break policies. Additionally, greater recognition of the emotional labor involved, through targeted support and relief, could contribute to long-term job satisfaction.

A critical examination of the health impact of social work reveals that the profession, in many respects, endangers the health of its workers. The high level of emotional labor, constant exposure to distressing life stories, and limited resources to address these challenges make social work a profession that requires a great deal of resilience. At the same time, the study shows that many social workers do not have the necessary resources to meet these demands in the long term. The interviewee spoke of "constant fatigue" and feeling "burnt out"—states that are widespread in many social professions.

From a critical perspective, it raises the question of whether it is realistic to expect professionals to perform this work for decades without suffering long-term health consequences. A systematic rethinking of social work is needed, placing the health of employees at the forefront and implementing measures to protect it.

Overall, this study shows that the health of social workers is closely linked to their job satisfaction and the decision to remain in or leave the profession. The results highlight the need to design structures and working conditions in social work in a way that promotes the health of professionals. This also means that supervision and support should not be limited to casework and client interactions but should also focus on the mental and physical health of social workers. The interviewee expressed a desire for "more coaching or individual counseling" to better cope with the demands of her work. Such offerings should be systematically integrated into the daily routine of social work to ensure the long-term health of employees. Additionally, stronger collaboration between health services and social institutions could help implement preventive measures more effectively and avoid long-term damage.

In an ideal future, social work could be designed in a way that not only helps clients but also protects the health and well-being of those providing this assistance. Achieving this requires both individual efforts and structural changes.

REFERENCES

- [1] Barford, S. W., & Whelton, W. J. (2010). Understanding burnout in child and youth care workers. *Child & Youth Care Forum*, 39(4), 271–287.
- [2] Brotheridge, C. M., & Lee, R. T. (2002). Testing a conservation of resources model of the dynamics of emotional labor. *Journal of Occupational Health Psychology*, 7(1), 57–67.
- [3] Collins, S. (2008). Statutory social workers: Stress, job satisfaction, coping, social support and individual differences. *British Journal of Social Work*, 38(6), 1173–1193.
- [4] DePanfilis, D. (2019). Burnout among child welfare workers: A longitudinal study of the relationship between protective factors and burnout. *Child Abuse & Neglect*, 41, 9–16.
- [5] Glaser, B. G., & Strauss, A. L. (1967). *The discovery of grounded theory: Strategies for qualitative research*. Aldine Publishing Company.
- [6] Healy, K., & Meagher, G. (2007). Social workers' preparation for child protection: Revisiting the question of specialization. *Australian Social Work*, 60(3), 321–335.
- [7] Kim, H., & Stoner, M. (2008). Burnout and turnover intention among social workers: Effects of role stress, job autonomy and social support. *Administration in Social Work*, 32(3), 5–25.
- [8] Kuckartz, U. (2014). *Qualitative Inhaltsanalyse: Methoden, Praxis, Computerunterstützung*. Beltz Juventa.
- [9] Leiter, M. P. (2018). Burnout as a developmental process: Consideration of models. In A. Shirom, & W. B. Schaufeli (Eds.), *Professional Burnout: Recent Developments in Theory and Research* (pp. 1–17). Taylor & Francis.
- [10] Leiter, M. P., Maslach, C., & Jackson, S. E. (2014). Burnout and health among critical care workers. *Journal of Applied Psychology*, 69(3), 437–441.
- [11] Lizano, E. L. (2015). Examining the impact of job burnout on the health and well-being of human service workers: A review of the literature. *Human Service Organizations: Management, Leadership & Governance*, 39(3), 167–181.
- [12] Maslach, C., & Jackson, S. E. (1981). The measurement of experienced burnout. *Journal of Occupational Behavior*, 2(2), 99–113.
- [13] Maslach, C., & Leiter, M. P. (2016). Burnout: A multidimensional perspective. In: Schaufeli, W. B., Maslach, C., & Marek, T. (Eds.), *Professional burnout: Recent developments in theory and research* (pp. 1–16). Taylor & Francis.
- [14] Mayring, P. (2014). *Qualitative content analysis: Theoretical foundation, basic procedures and software solution*. Beltz.
- [15] Morse, G., Salyers, M. P., Rollins, A. L., Monroe-DeVita, M., & Pfahler, C. (2012). Burnout in mental health services: A review of the problem and its remediation. *Administration and Policy in Mental Health and Mental Health Services Research*, 39(5), 341–352.
- [16] Wilberforce, M., Tucker, S., Brand, C., Abendstern, M., Jasper, R., Stewart, K., & Challis, D. (2014). Support for choice and control in mainstream health services: Assessing the quality of personalized care for older adults. *BMC Health Services Research*, 14(1), 131.