



<b>Title</b>	<b>Art Therapy Approach to Burnout Reduction for Hospice and Palliative Care Workers</b>
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# Art Therapy Approach to Burnout Reduction for Hospice and Palliative Care Workers



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## INTRODUCTION

Hospice and palliative care workers are at a high risk for job burnout due to the intensive emotional labor of their jobs. Supervision or employee assistance programs can reduce this risk (Kravits, McAllister-Black, Grant & Kirk, 2010; Pereira, Fonseca, & Carvalho, 2011; Swetz, Harrington, Matsuyama, Shanafelt & Lyckholm, 2009). One particularly encouraging strategy in this area has been the incorporation of art therapy (Brooks, Bradt, Eyre, Hunt and Dileo, 2010; Italia, Favara-Scacco, Di Cataldo & Russo, 2008; Nainis, 2005). The art therapy approach to burnout reduction aims to enhance self-awareness, increase ability of emotional expression and regulation, promote professional relationships and facilitate meaning making processes.

## OBJECTIVES

Art therapy based supervision with hospice and palliative care workers would:

- lower incidences of burnout
- increase perception of professional efficacy
- facilitate opportunities for self-care and building professional relationships.

## METHODOLOGY

We examined the efficacy of the art therapy based supervision group with social workers, nurses, doctors, chaplains and volunteers who work in hospice and palliative care settings. A standard supervision group of the same length and course topics served as a control group. Participants selected which supervision group to attend. All participants completed the Maslach Burnout Inventory - General Survey (Maslach, Jackson & Leiter, 1996) and Five Factor Mindfulness Questionnaire (Baer, Smith, Hopkins, Krietemeyer, & Toney, 2006) at pre, post and 1 month intervals.

## PROCEDURES AND EXAMPLES

Participants in the art therapy based supervision group met for 6 weeks in 3 hour sessions (total of 18 hours). The foci of the 6 sessions were:

### Self-care and Stress Management

#### 1. Mandalas

art in the form of the mandala (circle) for self-care



“From drawing, I found I had separated my life as 3 parts... I found I need more self time which is the least part in the circle.”

Purple: silence, starry night, it is a time for myself  
 Green: my job, peaceful but had burden, any way out?  
 Orange: my church, my faith walking along the large, large word”



#### 2. Symbols of Stress

art to represent stress and then to transform it



“Feeling calm, peace but with tangled lines”



“Tangled lines transform to a flower bed. Iris grows everywhere”

### Case Sharing and Clinical Skills

#### 3. Meaningful Client Interactions

art to represent client interaction that demonstrated practitioner strength



“Stone is stable and is not easy to be moved away. No matter what the weather is, the stone will still be there, comforting it. The stone enjoys environment where it is placed, with flowers, grasses, mountains all around. Stone is like me who can insist and comfort with different challenges and difficulties.”

#### 4. Challenging Client Interactions

art to represent client interaction that was challenging for the practitioner



“Challenges just like big waves. Shake me, flow me, frightened me. I could not say I enjoy it, but I know challenges bring me golden rain. Wisdom like gold. Golden rain strengthens my golden boat.”

### Grief and Bereavement

#### 5. Symbols of Grief

art to represent client related death-related encounter



“To me [death and dying is]...  
 1. Inevitable and natural process  
 2. We all take turn. One by one  
 3. Separation with the ‘earthly matters’  
 4. Reunion with the ‘ancestor’  
 Great impact initially, but then lower impact”

#### 6. Finding Meaning

art to demonstrate meaning in one’s professional role



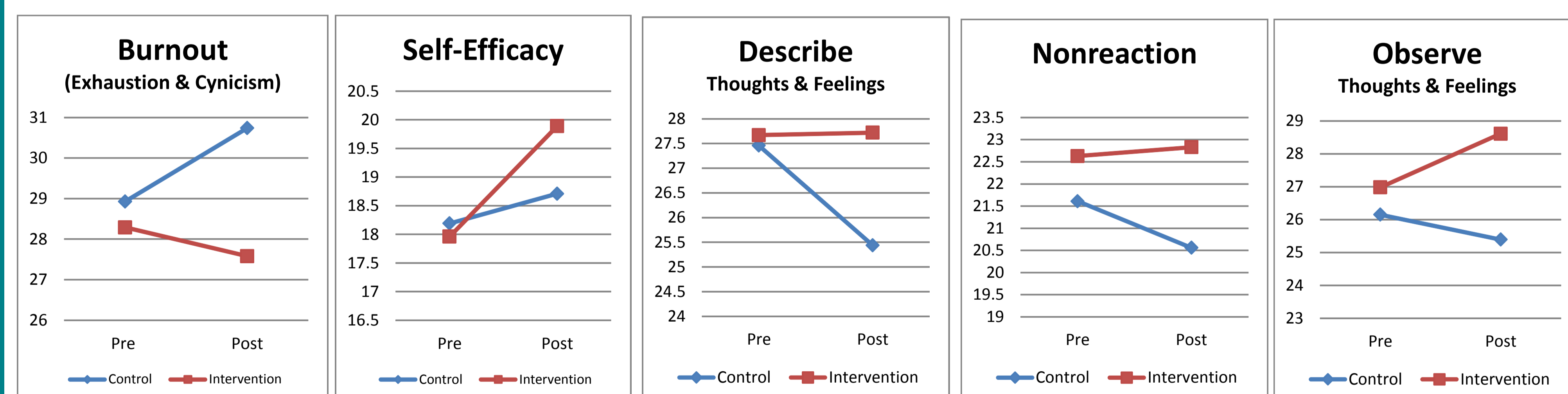
“For myself work/job sometimes is just like a huge mountain, I need to climb up with effort but it always make me feel bright, good and light.”

## RESULTS

The study is at the pilot stage and data collection is on-going (expected completion of June 2012). This presentation only reports on the findings from the pre and post tests of the first art therapy based supervision group compared with the first control group 21 participants completed the art therapy based supervision 23 participated in the control group.

### Quantitative Data

Paired T-test was used to examine the data.



#### Maslach Burnout Inventory - General Survey

For the control group, both core dimensions of job burnout — exhaustion and cynical attitudes towards meaning in work — increased after the training program. The increase in cynicism almost reached a statistical significance ( $p = 0.053$ ). On the contrary, participants in the art therapy based supervision — showed a marginally significant decrease in exhaustion ( $p = 0.074$ ). Moreover, this group also experienced a significant positive change in professional self-efficacy ( $p < 0.05$ ).

#### Five Factor Mindfulness Questionnaire

Similar results were found with regard to mindfulness. Participants in the control group showed significantly lower levels of abilities to describe their thoughts and feelings ( $p < 0.01$ ), as well as, not reacting to them ( $p < 0.05$ ). Participants in the art therapy based supervision showed a significant increase in their abilities to observe their thoughts and feelings ( $p < 0.05$ ).

### Qualitative Data

Reflective writings and group discussion revealed that the art-making processes helped participants reconnect with themselves and colleagues, while gaining more understanding and new perspectives of challenging experiences at work.

## DISCUSSION

The study showed preliminary evidence for the efficacy of art therapy based supervision on job burnout. The results imply that participants might have gained a better sense of control of their thoughts and feelings, which might have contributed to their increased level of professional self-efficacy and reduction of exhaustion. Further, the group allowed for increased self-awareness, discovery of creative potential and forming connections with colleagues.



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## REFERENCES

Baer, R. A., Smith, G. T., Hopkins, J., Krietemeyer, J. & Toney, L. (2006). Using self-report assessment methods to explore facets of mindfulness. *Assessment, 13* (1), 27-45.  
 Brooks, D. M., Bradt, J., Eyre, L., Hunt, A. & Dileo, C. (2010). Creative approaches for reducing burnout in medical personnel. *The Arts in Psychotherapy, 37* (3), 255-263.  
 Italia, S., Favara-Scacco, C., Di Cataldo, A. & Russo, G. (2008). Evaluation and art therapy treatment of the burnout syndrome in oncology units. *Psycho-Oncology, 17* (7), 676-680.  
 Kravits, K., McAllister-Black, R., Grant, M. & Kirk, C. (2010). Self-care strategies for nurses: A psycho-educational intervention for stress reduction and the prevention of burnout. *Applied Nursing Research, 23* (3), 130-138.  
 Maslach, C., Jackson, S. E., & Leiter, M. P. (1996). *The Maslach Burnout Inventory* (3rd ed.). Palo Alto, CA: Consulting Psychologists Press.  
 Nainis, N. A. (2005). Art therapy with an oncology care team. *Art Therapy: Journal of the American Art Therapy Association, 22* (3), 150-154.  
 Pereira, S. M., Fonseca, A. M. & Carvalho, A. S. (2011). Burnout in palliative care: A systematic review. *Nursing Ethics, 18* (3), 317-326.  
 Swetz, K. M., Harrington, S. E., Matsuyama, R. K., Shanafelt, T. D. & Lyckholm, L. J. (2009). Strategies for avoiding burnout in hospice and palliative medicine: Peer advice for physicians on achieving longevity and fulfillment. *Journal of Palliative Medicine, 12* (9), 773-777.