

Test Yourself: The Burnout Checklist

(Note: This focuses only on burnout: it is not a stress questionnaire.)

Review the past 12 months of your TOTAL life — work, social situations, family, and recreation. Reflect on each of the following questions and rate the amount of CHANGE that has occurred during this period. More emphasis should be placed on change that has occurred during the past 6 months.

Use the following scale and assign a number in the rating column that reflects the degree of change you have experienced. BE HONEST. The value of this self-assessment is negligible if you are not.

1	2	3	4	5
Little or No Change	Just Noticeable Change	Noticeable Change	Fair Degree of Change	Great Degree of Change

RATING

1. ____ Do you become more fatigued, tired, or worn out by the end of the day?
2. ____ Have you lost interest in your present work?
3. ____ Have you lost ambition in your overall career?
4. ____ Do you find yourself becoming easily bored (spending long hours with nothing significant to do)?
5. ____ Do you find that you have become more pessimistic, critical, or cynical of yourself or others?
6. ____ Do you forget appointments, deadlines, or activities, and do not feel concerned about it?
7. ____ Do you spend more time alone, withdrawn from friends, family, and work acquaintances?
8. ____ Has any increase occurred in your general level of irritability, hostility, or aggressiveness?
9. ____ Has your sense of humor become less obvious to yourself or others?
10. ____ Do you become sick more easily (flu, colds, pain problems)?
11. ____ Do you experience headaches more than usual?
12. ____ Do you suffer from gastrointestinal problems (stomach pains, chronic diarrhea, or colitis)?
13. ____ Do you wake up feeling extremely tired and exhausted most mornings?
14. ____ Do you find that you deliberately try to avoid people you previously did not mind being around?
15. ____ Has there been a lessening of your sexual drive?
16. ____ Do you find that you now tend to treat people as impersonal objects or with a fair degree of callousness?

17. _____ Do you feel you are not accomplishing anything worthwhile in your work and that you are ineffective in making any changes?
18. _____ Do you feel you are not accomplishing anything worthwhile in your personal life or you have lost spontaneity in your activities?
19. _____ Do you spend much time each day thinking or worrying about your job or people, future or past?
20. _____ Are you at the end of your tether, the point of breaking down or cracking up?

_____ **Total Score**

INTERPRETATION:

Please remember, no inventory is absolutely accurate or foolproof. Your score on this Burnout Checklist is merely a guide to your experience of burnout. Take it as an indication that your life may be out of control. If your score is high, take steps toward finding help by consulting your family physician, psychotherapist, spiritual counselor, or personal advisor. The first step toward relief from burnout is to acknowledge, without being self-rejecting, that you have a problem.

20-30	There is no burnout. You may be taking your life or work too casually.
31-45	This is a normal score for anyone who works hard and seriously. Relax periodically.
46-60	You are experiencing some mild burnout and could benefit from careful review of your lifestyle.
61-75	You are beginning to experience burnout. Take steps to better control your life.
76-90	You are burning out. You should seek help, reevaluate your present life, and make changes.
90 or higher	You are dangerously burned out and need immediate relief. Your burnout is threatening your physical and mental well-being.

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