Does a Training Program for Mental Health Counselors Help Reduce Burnout and Improve Patient Care?

Principal investigator
Michelle Salyers, PhD

Organization
Indiana University—Purdue University Indianapolis

What was the research about?
The stress of being a mental health counselor can lead to job burnout. When counselors have burnout, they may feel worn out, have negative thoughts about their work, or think they are not good at their jobs.

In this study, the research team used a training program called BREATHE which stands for Burnout Reduction: Enhanced Awareness, Tools, Handouts, and Education. BREATHE teaches counselors to think in new ways, set limits with patients, and find the social support they need.

The research team wanted to see if BREATHE would help:

- Counselors have less job burnout and feel better about their work
- Counselors to provide patient-centered care, which respects patients’ preferences, needs, and values and uses those values to guide healthcare decisions
- Increase patients’ satisfaction with care and confidence to manage their own mental health
- Improve patients’ mental and physical health

What were the results?
Compared with counselors in the MI group, counselors in the BREATHE group didn't report less burnout, feeling better about their work, or providing more patient-centered care. Also, compared to the beginning of the study, counselors in the BREATHE group did not report less job burnout over time.

Patients with a counselor in the BREATHE group were more likely to take their medicine correctly compared with patients with a counselor in the MI group. But the patients of BREATHE-trained counselors reported receiving less patient-centered care than patients with MI-trained counselors did. Patients in both groups reported improvements in their confidence to manage their own mental health, satisfaction with their care, and mental and physical health.

Who was in the study?
The study included 192 mental health counselors and 470 of their adult patients. Counselors and patients came from two health centers that provide substance abuse and mental health services. One clinic was in St. Louis, Missouri; the other was in the rural town of Logansport, Indiana. Of the 192 clinicians, 84 percent were white and 80 percent were female. Of the 470 patients, 52 percent were white, and 48 percent were female. Most patients had a high school degree or more education (70 percent) and were unemployed (87 percent). The average patient age was 45.
What did the research team do?
The research team assigned counselors by chance to be in the BREATHE group or the MI group. The team then selected by chance which of the counselors' patients they invited to take part.

Counselors completed surveys when the study began and then after 3, 6, and 12 months. The research team interviewed patients when the study began and 6 and 12 months later.

The research team asked patients and counselors for feedback on the study design and on how to interpret the results.

What were the limits of the study?
Counselors in this study reported low amounts of job burnout when the study began. The low burnout levels made it hard to see if the BREATHE program helped reduce burnout. About 37 percent of the counselors did not stay in the study until the end. The main reason they dropped out was because they left their jobs at the clinic. The results might have been different if more counselors had stayed in the study. This study only included counselors and patients from two mental health centers. Results might be different in other locations or settings.

Future studies could look at which mental health counselors would benefit the most from programs to reduce burnout.

How can people use the results?
Researchers can use these results to find other ways to reduce burnout for mental health counselors.

To learn more about this project, visit pcori.org/Salyers091.