



staff do not perform as well as they could. This opens the door to corruption by family members and others who are bribing the employees, hoping that this will help to ensure that their relatives are treated well. Corruption soon becomes widely known, thus decreasing the reputation of the institution, which in turn makes it even more difficult for all those who are employed in it – corrupted or not – to feel proud of their work and of their institution.

Unfortunately, the appearance of increasing numbers of people with the burn-out syndrome are also reported from other social services, again particularly from those at the periphery. The poorly paid teachers whose motivation was previously to a large extent dependent on their reputation of being learned people performing a vitally important function in the community are now no longer feeling this way. The importance of economic success for social recognition in today's societies and the multitude of sources of learning (including the Internet) are decreasing the exclusivity of teachers as a source of knowledge and diminish the teachers' motivation to continue working in schools which nowadays, even in rich countries, find it more and more difficult to get funds for the repair of their buildings, for the purchase of teaching tools and for the creation of incentives for their staff.

Other professions, institutions, and population groups share the fate of the health and teaching systems. These include general administrative staff, particularly those poorly paid, staff working in nursing homes, in homes for the elderly, and in orphanages as well as an increasing number of people who are responsible for the care of disabled people at home. These carers have until now born the lion's share of the burden of looking after chronic illness: the promotion and implementation of community care usually means an increase of the burden for an ever larger number of members of the community without substantive help from those who promote the discharge of patients – even those with serious and lasting impairment – into family and other forms of community care. With the excessive burden and continuing lack of recognition and support – material and

moral – the members of the family of chronically ill people and other carers are also becoming victims of the burn-out syndrome. The syndrome is often made more severe by a feeling of guilt for not doing more implied by what health care staff and the government say about modern community care and family duties.

There are many effective measures and interventions that could be used to prevent burn-out or reduce it. Some of them are difficult to implement because they would require a substantive reform of the health or other system as a whole. Others, however, are easily applicable and depend on individual action. In institutions, it is often possible to introduce a systematic recognition of merit for staff, without a large investment of funds. An improvement of the managerial control with an equitable mixture of rewards and punishments often depends only on the will of the (enlightened) manager. A rational distribution of tasks, holidays and short-term exchanges of work in similar posts elsewhere is often easy to arrange. Training in practical skills enhances the sense of mastery and allows at least a brief respite. There are numerous publications and guidelines for interventions which can reduce or prevent burn-out: why not devote a special time slot to examine them and see what suggestions about doable interventions they contain? One could think of devoting a session or two of professional meetings or congresses to the problem of burn-out. Instead of yet another epidemiological study of the prevalence of some disorder it might be useful to carry out a survey of the prevalence of burn-out and of the reasons for it in different settings. In daily practice all of us could do something about it – by praising families who are providing care for chronic patients, instead of taking their care for granted, for example, or by making sure that we have listened to the complaints of staff with the empathy and seriousness that they deserve.

It is urgent to deal with the pandemic of burn-out syndromes before it infects us all and before it ruins social services as well as progress towards a civic society that will always depend on the motivation and value systems of its members.