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Anti-burnout puzzle for academics

Project number 2024-1-PL01-KA220-HED-000243646

Occupational burnout (OB)

Knowledge, Attitudes, Prevention currently VS Perceptions and Expectations

Interview Sessions with Decision Makers

Table of Contents

Executive Summary

The Anti-Burnout Puzzle for Academics Project (2024-1-PL01-KA220-HED-000243646) investigates occupational burnout (OB) in the academic sector across Cyprus, Poland, and Slovakia. This study highlights the increasing prevalence of OB among academics, its causes, impacts, and the institutional responses to mitigate its effects. Based on interviews with 12 high-level decision-makers, including rectors, vice-rectors, deans, and HR professionals, the key findings are summarized as follows:

Key Findings

1. **Awareness and Knowledge:**
    - Participants demonstrate a high level of theoretical awareness of OB, with definitions rooted in peer-reviewed literature.
    - Practical understanding remains limited due to challenges in differentiating burnout from stress or depression.
2. **Contributing Factors:**
    - **Organizational Factors:** Excessive workload, administrative burden, lack of institutional support, and unstable contracts are among the primary drivers of burnout.
    - **Cultural and Personal Factors:** Perfectionism, cultural norms emphasizing tireless productivity, and limited coping mechanisms exacerbate the issue.
3. **Impacts of Burnout:**
    - Burnout erodes individual well-being, institutional productivity, and academic climates, leading to absenteeism, presenteeism, reduced research output, and poor student outcomes.
    - Hidden exits, including "quiet quitting" and staff disengagement, contribute to an unsustainable academic environment.
4. **Institutional Responses:**

- Institutions rely on fragmented, ad-hoc mechanisms like flexible scheduling, mentoring, and occasional workshops.
- Formal strategies, validated diagnostic tools, and systematic monitoring are largely absent across all three participating countries.

5. **Proposed Interventions:**
   - **Top Priority:** Psycho-physical resilience programs were highly endorsed, emphasizing practical resilience-building workshops tailored to individual needs.
   - **Knowledge Enrichment:** Clear frameworks for diagnosing and measuring burnout were identified as essential.
   - **Stoic Attitude Training:** While considered secondary, some participants recognized its relevance for long-term mindset change.
6. **Future Recommendations:**
   - Implement structured burnout support programs, including counseling, team-building, and workload audits.
   - Establish anonymous survey systems and diagnostic tools to measure and track burnout prevalence systematically.
   - Promote a cultural shift to normalize well-being dialogues and reduce stigma associated with burnout.

Conclusions

Burnout in academia is a multifaceted issue that demands a proactive, resource-backed approach. Moving from reactive support to preventive mechanisms can help preserve staff well-being, maintain institutional productivity, and enhance overall academic quality. The project provides actionable insights for designing targeted interventions that can be customized for institutional and cultural contexts.

This study underscores the need for universities to adopt clear burnout prevention policies, allocate resources for mental health support, and foster a culture that values well-being as a vital institutional asset.

Fieldwork Findings

Countries (Alphabetically): Cyprus, Poland and Slovakia

Number of Interviews by Country: Cyprus (3), Poland (6) and Slovakia (3)

Number of Participants: 12

Sample:

1. Vice Rector for Faculty and Research (Cyprus)
2. Vice President of Human Resources (Cyprus)
3. Vice Rector of Academic Affairs (Cyprus)
4. Dean of Faculty of Social Sciences (Poland – University 1)
5. Rector (Poland – University 1)
6. Dean of Faculty of Humanities & Social Sciences (Poland – University 1)
7. Vice-Rector for Digitalization and Business Development (Slovakia)
8. Vice-Rector for Education (Slovakia)
9. Ombudsman (Slovakia)
10. Department Head (Poland – University 2)
11. Vice-Rector for Science (Poland – University 2)
12. Associate Dean (Poland – University 2)

Table 1: Research Methodology Overview

Research Component	Description	Implementation
Primary Data	Semi-structured interviews	12 Participants
Duration	60-90 minutes per interview	Jan-June 2025
Analysis Methods	Thematic Analysis	Cross-country comparison

Table 2: Participant Distribution Across Countries]

Country	Number of Participants	Leadership Roles
Cyprus	3	Vice Rectors, HR
Poland	6	Deans, Vice Rectors, Department Heads
Slovakia	3	Vice Rectors, Ombudsman

1. Awareness and Knowledge of Occupational Burnout (OB)

Analysis

(CY) In Cyprus, the three interviewees participating in the study (Vice Rector for Faculty and Research; Vice President of HR; and Vice Rector of Academic Affairs) reported prior knowledge of OB, learned almost exclusively from peer-reviewed literature. Each could list core symptoms such as emotional exhaustion, fatigue, loss of motivation and declining performance, yet all admitted some overlap in their minds between “ordinary stress” and genuine burnout. The HR-focused participant felt staff “often label burnout as stress,” while the Academic Affairs lead stressed that many academics “do not realise they are burned out until performance drops.” The Faculty & Research vice rector added that personal stories of colleagues serve as a credible complement to academic sources. None believed self-diagnosis is straightforward; visibility to others was judged “sometimes” possible but context-dependent. Overall, familiarity is theoretical rather than experiential, and the concept is viewed as real but still somewhat abstract within their institutions.

(PL) The three Polish decision-makers display solid theoretical familiarity, yet observe uneven understanding among staff. The Dean of Faculty of Social Sciences has researched OB among nurses and managed schools, so she recognises the term quickly and sees how employees “defend themselves” by re-labelling symptoms. The Rector reports that interest in OB has grown “in recent years,” fed by literature and his own managerial observations, but many lecturers still equate it with ordinary

stress and avoid naming it because the label seems career-threatening. The Dean of Faculty of Humanities & Social Sciences draws on academic sources and student dissertations; she conceptualises OB as a process that begins with exhaustion and progresses to depersonalisation. All three define OB as mental, physical and emotional depletion caused by long-term occupational strain and admit that self-diagnosis is hard. They also note a discursive shift: OB used to be discussed more openly, whereas today some symptoms are framed as depression, blurring awareness.

In Slovakia, (SK) all three interviewees, the Vice-Rector for Digitalization and Business Development (VR-Digital), the Vice-Rector for Education (VR-Education), and the Ombudsman – demonstrated a reasonably consistent understanding of OB as a chronic, work-related stress condition that can undermine well-being and productivity. VR-Digital linked OB to “manifestations that will soon become visible and apparent,” signalling awareness of its latent impact on staff morale. VR-Education stressed the need for “measurable indicators” in the annual report, showing a grasp of how conceptual understanding must translate into institutional metrics. The Ombudsman framed OB as both an ethical and health issue, integrating it into the university’s Code of Ethics and the Black Box reporting platform. Overall, awareness is above average but still largely implicit: OB is recognised, yet definitions, diagnostic criteria, and risk thresholds remain informal and vary across managerial levels.

In the second University in Poland, (PL2) all three interviewees show high conceptual awareness, yet with distinct emphases. The Department Head (DH) equates OB with a loss of intrinsic motivation that can occur only after genuine vocational engagement; simple dislike of work in the uncommitted does not qualify. The Vice-Rector for Science (VR) frames OB as a marked fall in job satisfaction that moves an academic from creativity to compulsory task execution, observable through behavioural change. The Associate Dean (AD) recognises OB chiefly through aversion to work, fatigue and strained social interactions, warning that its symptoms may be confused with mid-life or hormonal changes. Each participant traces familiarity to professional literature, press or institutional conversations, and none regard the term as exotic within higher education. However, DH and VR caution that gradual onset often masks the problem, making self-reflection or peer observation essential for accurate recognition.

Table 3: Awareness Metrics across Participating Countries

Country	Awareness Level (0-5)	Self-Diagnosis Difficulty	Detection Efforts
Cyprus	4.5	High	Informal and anecdotal
Poland	4.7	High	Limited, stigmatized
Slovakia	4.8	Moderate	Emerging formal mechanisms

Highlights

- *Knowledge mainly theoretical: Leaders rely on literature, keeping OB abstract.*
- *Terminology blurred: Staff conflate OB with stress or depression, stifling discussion.*
- *Detection tough: Gradual onset hides OB until performance drops.*
- *Definitions uneven: Diagnostic rules and reporting differ across universities.*
- *Push for metrics: Leaders urge clear indicators and digital tracking.*

2. Factors Contributing to Occupational Burnout

(CY) In Cyprus, all respondents located causes in a mix of personal and organisational conditions. Recurrent themes were overwork, perfectionism, workaholism, poor work-life balance, and leadership quality. The Vice President of HR linked burnout to “accumulating stress from family and financial issues,” highlighting cyclical academic peaks that intensify pressure. The Vice Rector for Faculty and Research mentioned overworking and resource shortages but could not pinpoint concrete drivers inside his own unit, deferring to HR. The Vice Rector of Academic Affairs emphasised multiple role-holding (e.g. coordinator plus researcher) as a risk amplifier. All three rejected the idea of a single trigger, describing burnout as a multifactorial build-up. None labelled the topic taboo, yet they sensed it is “not openly discussed,” partly because symptoms can be mistaken for normal academic stress or masked by “eccentric” work habits.

(PL) There were also interesting findings from Poland, where the workload dominated every interview. The Dean of Social Sciences lists chronic stress, demands that exceed competence, rapid organisational change, and personal traits such as over-excitability or limited social coping. The Rector highlights systemic reforms, pandemic turbulence, long hours, and a culture that prizes productivity over well-being; he sees frustration as the first OB signal and notes that mental-health taboos still deter disclosure. The Dean of Humanities stresses “scoresis” (publication-point chasing), undervaluation of academics, low pay, hostile comments and poor leadership; she believes OB is no longer taboo but is often misclassified as depression. Across the three accounts, personal perfectionism and inability to detach from work interact with organisational overload, unstable contracts, and insufficient recognition, creating fertile ground for burnout. Cultural expectations of tireless commitment amplify the risk, especially for younger staff who fear acknowledging vulnerability.

Reporting from Slovakia (SK), the interview data point to several organisational stressors. VR-Education highlighted heavy teaching loads, research expectations, and administrative duties that accumulate without a transparent workload model. VR-Digital added that the “lack of space to present OB informally or formally” keeps stress invisible until it escalates. The Ombudsman noted cultural taboos: faculty hesitate to disclose fatigue for fear of appearing weak, leading to under-reporting. Absence of systematic diagnostic tools, limited access to psychologists, and fragmented

responsibility across departmental, faculty, and central levels further intensify strain. Seasonal peaks (grant deadlines, accreditation cycles) and the digitalisation drive also raise expectations for constant availability. Together, these factors create a climate where staff experience sustained high demand with inadequate structural and psychosocial support.

In PL2, Participants converge on a dual set of drivers, organisational and personal.

- DH stresses repetitive duties, excessive bureaucracy, endless meetings and surveys; variety in research-teaching roles serves as a protective factor.
- VR highlights macro trends: ageing staff, declining prestige and relative pay, unstable evaluation rules, weak personnel policies and limited recognition. He adds personality traits such as perfectionism and pessimism.
- AD lists long tenure without promotion, constant student evaluations and shifting accreditation criteria; she echoes VR on perfectionism and workload. Concerning taboo, DH believes OB is discussed far less than bullying and seldom surfaces in formal complaints; VR calls it “widely discussed” but still poorly measured; AD states it is openly talked about in her faculty. The absence of systematic data, noted by VR, reinforces under-diagnosis even where the topic is culturally acceptable to raise.

Table 4: Distribution of Contributing Factors by Importance

Factor	Cyprus (%)	Poland (%)	Slovakia (%)
Excessive Workload	40%	50%	45%
Perfectionism	25%	30%	20%
Weak Leadership	20%	10%	25%

Factor	Cyprus (%)	Poland (%)	Slovakia (%)
Contract/Job Instability	15%	10%	10%

Highlights

- *Overload dominates: Excess teaching, research, admin and role-juggling drive pressure.*
- *Perfectionism & culture: High self-demands and productivity norms magnify stress.*
- *Structural flaws: Bureaucracy, unstable contracts, low pay and reforms erode resilience.*
- *Support gaps: Weak leadership, scant mental-health services, fragmented responsibility leave staff exposed.*
- *Hidden problems: Stigma and missing diagnostics keep burnout under-reported*

3. Impacts of Occupational Burnout

(CY) Perceived organisational consequences diverged. The Vice Rector for Faculty and Research linked OB to absenteeism, turnover and lower productivity but argued each could stem from many causes. The Vice Rector HR observed absenteeism and student dissatisfaction in a few cases but said turnover was rare. The Vice Rector of Academic Affairs) downplayed absenteeism, “you can work from home” yet acknowledged strained relationships and “quiet quitting.” Regarding personal life, mental health deterioration was universally accepted; physical illness and broken relationships were viewed as possible by two participants, while substance abuse and suicide were considered unlikely or “extreme.” Overall, the group agreed that burnout undermines individual and institutional effectiveness, but its scale within their universities is thought to be “marginal” and episodic rather than systemic.

(PL) Likewise, in Poland, all interviewees associate OB with deteriorating engagement and quality of teaching. The Dean of Social Sciences observes chronic fatigue, shallow task performance and existential doubt among affected staff. The Rector links OB to growing turnover, “silent resignations” and frustration-driven absenteeism, warning that institutional reputation and student experience ultimately suffer. The Dean of Humanities describes strained workplace relations, complaints from students and colleagues, and resignation in other faculties; she also mentions spill-over into home life, impatience with family, sleep and eating disorders, incessant rumination about work. Although each sees different prevalence levels, they agree that burnout erodes motivation, hampers innovation, and can precipitate mental-health problems. Subtle manifestations reduced initiative, avoidance of new tasks often precede visible outcomes such as staff loss or negative student feedback, making early detection essential for academic effectiveness and staff retention.

Moreover, in Slovakia, (SK) although no formal prevalence figures exist, participants foresee tangible institutional consequences. VR-Digital warned that unchecked OB “can affect the overall atmosphere and performance of employees, as well as the workplace climate.” VR-Education linked burnout to reduced teaching quality, lower research output, and difficulty attracting or retaining talent, especially younger academics. The Ombudsman observed a rise in complaints related to interpersonal conflict, which he attributes partly to stress spill-over. Indirect costs include lost productivity, higher sick-leave expenditure, and reputational risks if student experience declines. While current impacts are described qualitatively, all three interviewees agreed that, without rapid action, OB will shift from isolated cases to a systemic issue undermining the university’s strategic goals and accreditation standards.

In the second University in Poland (PL2), participants mentioned that at the individual level, OB erodes mental health, motivation, and physical well-being. DH links it to poorer teaching quality, reduced research output, and minimal grant activity; “presenteeism” replaces genuine engagement. VR warns that institutions lose the creative energy of intrinsically motivated staff, wasting talent and hindering mission fulfilment. AD details downstream effects: anxiety, cardiovascular disease, substance misuse, divorce, and at its worst, suicide. Institutionally, burnout leads to lower student evaluations, higher sick leave, administrative delays, and a diminished learning climate. Withdrawal from collegial life, flagged by DH, further weakens departmental

cohesion. All three interviewees agree that prolonged or repeated absenteeism strains workload distribution and may create negative role models for early-career academics.

Table 5: Impact Metrics for Burnout Cases

Impact Area	Observed in Cyprus	Observed in Poland	Observed in Slovakia
Staff Turnover	Rare	Moderate	Low
Student Dissatisfaction	Low	Moderate	Rare
Declined Academic Output	High	High	Moderate

Highlights

- *Performance drops: Teaching quality, research output and grant activity decline.*
- *Hidden exits rise: Absenteeism, presenteeism, turnover and "quiet quitting" increase.*
- *Well-being erodes: Anxiety, fatigue, sleep trouble and strained relationships spread.*
- *Climate worsens: Conflict grows, cohesion weakens and innovation stalls.*
- *Costs escalate: Sick-leave bills, lost talent and reputational risk mount for universities.*

4. Current Institutional Responses to OB

In CY Responsibility is unanimously assigned to Human Resources, yet practice varies. The Vice Rector for Faculty and Research was unsure of existing tools, assuming HR “provides support” through psychologists and leave schemes. The Vice President of HR described ad-hoc, individualised measures: flexible scheduling, paying medical fees, and continuous leadership training, but conceded there is “no clear-cut strategy” or standard diagnostic protocol. The Vice Rector of Academic Affairs saw “no strategy, no tools,” noting that detection, support and prevention are entirely undertaken by the Human Resource Department. Financing is believed to come from internal budgets, and communication occurs mainly via email when it happens at all. Systematic monitoring or formal evaluation of effectiveness is missing across the board, leaving decision makers reliant on anecdotal feedback.

(PL) In the Polish University, the formal structures are sparse. The Dean of Social Sciences notes only informal peer support; no top-down training or monitoring exists. The Rector says his 250-employee university has no dedicated strategy, psychologist or diagnostic tool; recovery leave and ad-hoc peer supervision are available, and HR “would like” to create a post-project role. The Dean of Humanities confirms that during her 10-year deanship no organisational procedures, training or metrics have addressed OB; her sole remedy has been to grant long leave when she spots exhaustion. Financing for mental-health initiatives is absent, communication relies on personal conversations, and responsibility is diffused nominally HR or immediate supervisors, but without clear guidelines. Consequently, detection is reactive, support informal, prevention virtually non-existent, and evaluation impossible. The consensus is that current responses hinge on individual goodwill rather than institutional design, leaving universities exposed as workloads and external pressures mount.

(SK) Detection relies on staff surveys, departmental meetings, and ad-hoc managerial observation (VR-Education); no validated diagnostic instrument is in place. Support mechanisms include mediation by Vice-Rectors, workload reduction, and stress leave (VR-Digital). Preventive efforts range from semesterly team-building in the Bratislava forest park to optional home-office arrangements, initiated by the Ombudsman and endorsed by the Rector. Communication flows through departmental meetings, e-

mails from VR-Education, and the Ombudsman's digital Black Box system. Financing comes from the Social Fund and external projects (e.g., Norwegian Mechanisms). Effectiveness is rated "average" and reviewed annually, but indicators are vague. Responsibility spans departmental heads, institute directors, Vice-Rectors, the Academic Senate, and ultimately the Rector, creating a multi-layered but sometimes fragmented governance structure.

(PL2) No formal, comprehensive strategy exists at the represented university. DH is unaware of any dedicated unit, but notes that the Rector could appoint a proxy overnight. VR describes scattered mechanisms: voluntary training, previously attempted individual development plans and a Human Resources Affairs Centre that offers generic staff development. AD confirms ad-hoc workshops,often EU-funded plus benefits such as subsidised sport cards, yet none are labelled as OB initiatives, nor are they mandatory. Responsibility, if formalised, would lie with top management (Rector, Deans, HR Centre). Communication relies on email, intranet and MS Teams. Financing currently mixes central funds and external projects; evaluation of effectiveness is negligible, with no annual reporting or outcome metrics.

Table 6: Comparison of Organizational Responses

Country	Mechanism	Effectiveness
Cyprus	Flexible timings	Low Impact
Poland	Peer mentoring	Mixed Results
Slovakia	Mandatory check-ins	Moderate Success

Highlights

1. *No formal strategy: Universities rely on ad-hoc HR fixes.*
2. *Informal detection: Observation and basic surveys; validated tools absent.*
3. *Patchy support: Flexible hours, leave, peer help; prevention weak.*

4. *Scattered responsibility: HR, managers and senates share unclear roles.*
5. *Little oversight: Funding is mixed and impact rarely measured.*

5. Evaluation of Proposed Project Directions

(CY) Reactions to the three proposed interventions were cautiously positive but differed in enthusiasm. The stoicism-based attitude change was welcomed by the Vice Rector for Faculty and Research as “a basis for a healthy lifestyle,” viewed by the Vice President of HR as aspirational, and met with scepticism by the Vice Rector of Academic Affairs, who called burnout “more complex.” All agreed that enriching OB knowledge is valuable, though the Academic Affairs lead doubted early diagnosis feasibility. Building psycho-physical resilience received the strongest support; however, every participant stressed that “not all activities fit everyone,” endorsing a menu approach. Delivery preferences converged on a hybrid model combining emails, passive materials and selective workshops, led by HR or trained staff. Overall, the ideas are seen as relevant, provided they allow individual choice and minimal disruption to academic cycles.

(PL) The Dean of Social Sciences could not comment because no structured offers exist, but she welcomes any evidence-based initiative. The Rector values prevention and robust diagnosis more than philosophical framing; he views stoic attitudes, forest therapy or bridge as “interesting but secondary” and prefers anonymous surveys, counselling and resilience training that fit academic schedules. The Dean of Humanities embraces external, in-person workshops especially those that blend stoic reflection with practical skills and team integration but insists on voluntary participation and multiple options to respect diverse preferences. All agree that menu-style programmes, delivered face-to-face during work hours and financed through projects with HR coordination, are more attractive than purely online materials. Building psycho-physical resilience is endorsed, provided interventions are concrete, flexible and sensitive to academic workload cycles.

(SK) When ranking the three project ideas, participants converged on 1) Building psycho-physical resilience, 2) Enriching knowledge about OB, and 3) Stoicism/life-attitude change. VR-Digital favoured resilience activities that “reduce tension and improve the working atmosphere,” while the Ombudsman emphasised knowledge-building through surveys, expert lectures, and expanded reporting. VR-Education regarded stoicism as “crucial but quite theoretical,” requesting concrete tools. Preferred delivery modes combine psycho-education materials for senior faculty, AI-supported interactive learning for junior staff, and group workshops for all. Leadership should be shared among management, trained internal mentors, and external psychologists. Overall, respondents view the proposed directions as timely, but stress the need for practical, resource-backed actions rather than purely conceptual frameworks.

(PL2) Three project ideas were presented: (1) stoic attitude formation, (2) OB knowledge building, (3) psycho-physical resilience activities. DH ranks knowledge building first, arguing that reliable self-diagnosis tools with proven validity are essential; he is sceptical of universal lifestyle prescriptions. VR supports a blended package attitude change plus resilience while stressing social responsibility as an additional buffer against failure. AD values attitude change most, provided it is paired with tangible options such as multisport cards. Delivery preferences diverge: DH favours active workshops with sector-specific facilitators and short explanatory videos; VR recommends a menu ranging from passive materials to interactive sessions to accommodate varied learning styles; AD rejects online courses, preferring face-to-face workshops and open briefings. All three discourage mandatory participation.

Table 7: Interventions Ranked by Support

Proposed Intervention	Cyprus Priority	Poland Priority	Slovakia Priority
Resilience Building Activities	1	1	1

Proposed Intervention	Cyprus Priority	Poland Priority	Slovakia Priority
Knowledge Enrichment	2	2	2
Stoicism-Based Activities	3	3	3

Highlights

- Resilience wins: Psycho-physical training is the clear favourite across universities.
- Stoicism divides: Attitude change is interesting but seen as secondary or too abstract.
- Better data sought: Leaders want knowledge building, surveys and validated self-tests.
- Menu delivery: Hybrid, voluntary, face-to-face options beat one-size-fits-all courses.
- Need resources & shared lead: HR, managers and psychologists must back evidence-based programmes.

6. Suggestions for Institutional Changes

(CY) The decision-makers in Cyprus provided key recommendations that centre on formalising what is now informal. The Vice President of HR advocated developing a structured yet flexible programme: periodic well-being surveys, optional team-building, leadership training and funded counselling, evaluated via usage data and follow-up interviews. The Vice Rector for Faculty and Research suggested departmental and school-level discussions to secure buy-in, with HR coordinating communication through existing email lists and meetings. The Vice Rector of Academic Affairs called for a “catalogue of activities” from which staff can craft personal resilience plans, supplemented by passive resources rather than mandatory workshops. Financing should mix internal funds with external project money where possible. All three emphasised ongoing monitoring through HR metrics, anonymous feedback and periodic review to adjust interventions and demonstrate value to senior leadership.

In the Polish University (PL), decision-makers converge on the need for a structured, multi-level approach. The Dean of Social Sciences calls for better internal communication, job-security reforms and a dedicated psychological support unit. The Rector proposes comprehensive monitoring, anonymous surveys, focus groups plus manager training, peer networks, and sustainable funding; he also favours advisory committees mixing students, staff and mental-health experts. The Dean of Humanities urges university-wide procedures but devolves frontline responsibility to deans and supervisors; she advocates face-to-face workshops, hobby subsidies, sports passes and integration events scheduled within working hours, all voluntary and project-funded. Continuous evaluation, usage data, feedback loops, visible morale indicators is essential. Reducing task overload, clarifying expectations and recognising achievements are common priorities, as is cultivating a respectful, partnership-based leadership style that normalises discussion of well-being.

(SK) Similarly, Slovakian interviewees endorsed a broad intervention package: flexible work arrangements, transparent workload allocation, mandatory rest breaks, wellness programs, peer mentoring, stress-management training, counselling access, administrative-burden reduction, and a culture discouraging after-hours email. VR-Education advocated setting clear responsibilities, control mechanisms, and regular feedback loops. VR-Digital urged quarterly outdoor team-building events and inclusion

of the Student Parliament to foster cross-community support. The Ombudsman proposed adding an OB sub-module to the Black Box for anonymous reporting and hiring external psychologists for staff as well as students. Financing should draw on the Social Fund, earmarked HR budget lines, and competitive external grants. Effectiveness tracking would combine monthly dashboards, annual surveys, and cost-per-capita analyses to ensure accountability and continuous improvement.

In the second Polish University (PL2), decision makers provided very specific suggestions as follows. Strategic Commitment: Assign a Rector's proxy for OB, supported by HR, to coordinate policy, funding and evaluation (DH, AD). Robust Diagnosis: Implement anonymous, psychometrically sound surveys every two years to map prevalence; share aggregated results with decision-makers (all participants, especially VR). Tiered Support: Offer a ladder of interventions self-help materials, confidential counselling, peer groups, and external therapy vouchers allowing staff to choose intensity (VR, AD). Work Design Review: Audit bureaucratic load, duplication of evaluations and unclear promotion pathways; simplify where possible (DH, VR). Recognition Culture: Introduce systematic appreciation mechanisms (awards, feedback loops) to offset declining prestige (VR). Monitoring & Evaluation: Track utilisation, satisfaction and changes in sick leave or student evaluations; publish annual summaries to close the feedback loop (AD, VR).

Highlights

- Structured programmes: burnout support with surveys, counselling, training and menus.
- Continuous monitoring: Run anonymous surveys and feedback loops to track impact.
- Tiered voluntary aid: Provide self-help tools, peer groups, counselling and therapy
- Workload & culture fixes: Cut bureaucracy, mandate rest breaks, curb after-hours email, reward achievements.

7. Conclusions and Final Notes

(CY) Across the interviews in Cyprus, awareness of OB is conceptual rather than data-driven; prevalence is assumed low, yet no one collects metrics to verify this belief. Causes are acknowledged as multifaceted, merging personal ambition with structural demands. Impacts on productivity and collegial relations are recognised, but decisive organisational action remains limited. HR is viewed as the natural owner of any future strategy, though its current role is largely reactive. The proposed Erasmus+ project aligns with expressed needs if it delivers flexible, evidence-based tools, allows individual tailoring, and supplies clear evaluation frameworks. To advance, universities should: (a) establish baseline measurements, (b) adopt a formal yet adaptable policy, (c) resource HR with training and funds, and (d) normalise conversations about well-being. These steps would move OB management from ad-hoc support to a coherent preventive culture.

(PL) Across the three Polish interviews, occupational burnout is acknowledged as a genuine, multifactorial threat, though not yet viewed as the dominant HR problem. Awareness among leaders is high, but conceptual clarity and open dialogue among staff lag behind, in part due to stigma and diagnostic confusion with depression. Overload, systemic change and insufficient recognition emerge as shared drivers; impacts span reduced engagement, strained relationships and rising turnover. Current institutional responses are ad-hoc and under-resourced, relying on informal peer care rather than strategy. The proposed project is timely: it should supply universities with adaptable diagnostic tools, diversified resilience programmes and guidance on embedding OB prevention into policy. Priority actions include creating clear procedures, empowering HR and line managers, integrating soft-skills training into academic development, and securing steady financing. Sustained commitment to monitoring and transparent communication can shift universities from reactive crisis management toward a proactive culture that preserves both staff health and educational quality.

In Slovakia (SK), the institution exhibits growing awareness of OB and a patchwork of promising practices, yet lacks an integrated, data-driven strategy. Strengths include high-level endorsement (Rector, Vice-Rectors), an existing digital reporting platform, and willingness to pilot comprehensive interventions. Weaknesses lie in inconsistent

diagnostics, diffuse responsibility, and limited measurable outcomes. Participants agree that investing in human-resource well-being is economically and ethically sound. Immediate priorities involve formalising a university-wide OB policy, expanding psychological services, and embedding objective indicators in the annual report. Longer-term success will depend on sustained funding, clear governance, and a cultural shift that normalises help-seeking and recognises well-being as a strategic asset.

In PL2, the three senior academics agree that occupational burnout is present, variably visible and currently under-managed. Their insights suggest that burnout blossoms where organisational complexity meets diminishing rewards and static careers. While awareness is adequate, actionable data and structured responses lag behind. Voluntary, evidence-based interventions matched to individual preference receive broad endorsement, whereas blanket, prescriptive programmes raise resistance. Leadership commitment including a named coordinator and transparent metrics appears essential for credibility. Funding could blend central budgets with external grants once prevalence is substantiated. Finally, participants caution against pathologising every dip in motivation; accurate diagnosis, sensible workload design and a culture that values both achievement and well-being remain the cornerstones of sustainable academic work.

List of Main Concluding Findings

- High awareness, little evidence: Senior staff understand Occupational Burnout conceptually but collect almost no prevalence or severity data.
- Complex causation: Burnout is linked to the mix of personal ambition, workload peaks, resource gaps and demanding academic culture.
- Recognised costs: Leaders report drops in motivation, productivity and collegiality, yet still see cases as isolated rather than systemic.
- Fragmented response: Support rests on ad-hoc HR measures with no coherent strategy, clear metrics or guaranteed funding.
- Call for prevention: Interviewees recommend baseline surveys, formal policies, dedicated resources and normalised dialogue to shift from reactive aid to proactive well-being management.

A summary of action points to consider for the Manual WP3

1. Having a clear definition of OB and how to recognize and measure it
2. Identifying potential factors that contribute to OB and how to deal with them.
3. Helping academics identify if their performance/life is being affected by OB
4. Mapping strategies for the provision of OB support at different institutions/organizations (e.g., through HR)
5. Providing implementable programs that fit the settings/cultural practices across the institutions/organizations
6. Provide tools to quantify the cost/benefit of the implementation of these programs.