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Family functioning, burnout and secondary traumatic stress among psychologists

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Abstract

Psychologists often work in emotionally driven environments, regularly dealing with clients' trauma and distress which leads to burnout and secondary traumatic stress. Family is considered as one of the vital sources of support. Hence, this study investigates the relationship between family functioning, burnout and secondary traumatic stress (STS) among psychologists. It is a correlational design and a data of 254 psychologists was collected in India through standardized tools. The results of this study exhibited that psychologists from dysfunctional family environments reported higher levels of emotional exhaustion, depersonalization, and STS. Additionally, poor family functioning was also linked to slightly higher levels of personal achievement, possibly indicating a coping mechanism where individuals channelize their energy into work for a sense of purpose. It was also seen that burnout and STS did not vary much based on the experience level of the psychologist. These findings emphasize on the importance of recognizing personal life factors, like family functioning to understand occupational stressors. Hence, supporting psychologists both at work and home could be the key to promote long-term well-being and resilience in the field.

Keywords: Family Functioning; Burnout; Secondary Traumatic Stress; Psychologists; Occupational Stress

1. Introduction

Psychologists often work in emotionally draining environments, deeply immersed in trauma stories their client's share, which makes them prone to burnout and secondary traumatic stress (STS). The toll of occupational stressors expressed through emotional exhaustion, depersonalization, i.e., a sense of detachment, and feelings of reduced personal achievement has been well documented in existing research [1]. Additionally, the repeated exposure to clients' traumatic experiences indirectly has been associated with developing STS [2]. In recent years, researchers have begun to elucidate on how functioning of the family, i.e., communication, quality of relationships, and adaptability within the home, can either act as a powerful protective factor or intensify these occupational stressors [3] [4].

The study draws from several theoretical frameworks to consolidate its exploration. Firstly, Hobfoll's Conservation of Resources theory suggests that stress emerges when an individual perceives a threat to personal important resources, a risk that may be mitigated by strong and supportive family functioning [5]. Similarly, the Job Demands-Resources model argues that external support like a healthy and supportive family functioning may serve as a protective factor against work-related stress [6]. Consistently, the stress and coping model highlights how individuals react to stress is contingent upon their interpretation of the stressor and the presence of supportive surroundings [7], while the systemic-ecological model emphasizes the relationship between individuals and the broader systems they are part of [8].

In light of this, burnout is understood from the perspective of Maslach Burnout Inventory, which illustrates three dimensions of burnout, i.e., emotional exhaustion, depersonalization and personal achievement [9]. STS is understood from the perspective of the Secondary Traumatic Stress Scale which is used to measure the frequency of symptoms

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related to indirect exposure to trauma [10]. Since personal and professional spheres intersect, gaining insight into how family functioning influences these occupational stressors can help in developing effective interventions to safeguard the resilience of psychologists [11].

2. Method

2.1. Research Design

The present study employs a quantitative correlational research design to explore the relationship between family functioning, burnout, and secondary traumatic stress among Indian psychologists. Because the study does not manipulate any of the variables, therefore a correlational design is appropriate since it allows identification of statistical associations between constructs without implying causality.

To investigate the relationship between the variables, linear regression was used to determine whether family functioning is predictive of burnout and STS.

Analysis of Variance (ANCOVA) was also used to see how burnout and STS varies among different experience levels of psychologists. The use of these statistical methods increases the ability of the research to determine meaningful findings on the relationship between occupational stress and family functioning among psychologists.

2.2. Participants

The study involved participation of 254 practicing psychologists from across India with varying work experience, gender, and workplaces. Out of the participants, 213 (83.9%) were females and 41 (16.1%) were males, which is the global trend reporting more women entering mental health careers. To explore how family functioning interacts with burnout and secondary traumatic stress (STS) across the stages of their profession, the participants were classified into professional experience categories as: 27.6% had 0 to 1 year, 29.1% had 2 to 4 years, 27.2% had 5 to 9 years, and 16.5% had 10 or more years of experience as a psychologist. The psychologists practiced in different settings such as in clinics, hospitals, private settings, and through online media, which is the diverse pattern of psychological practice across the Indian context. For the purposes of research focus, full-time practitioners with a minimum Master's degree (MA/MSc) in Psychology or a related field were selected for inclusion, which ensured all the participants had formal training and actually involved direct client interaction.

2.3. Sample

Convenience sampling was utilized in the recruitment of participants. Psychologists were invited to take part through professional networks, psychological associations, online mental health communities and institutional outreach. Convenience sampling was utilized since a large participant population could be reached and still accomplish the representation among various professional settings. While this method restricts the generalizability of the results, considering the logistical constraints of accessing psychologists from all over India, it was deemed suitable.

2.4. Inclusion Criteria

To be eligible to participate, participants had to meet the following requirements:

- Should be a practicing psychologist in India, actively involved in providing psychological services.
- Must be a full-time psychologist, i.e., not professionals splitting their time between psychology and other areas (e.g., part-time lecturers).
- At least a master's degree (MA/MSc) in Psychology or a relevant discipline is necessary to offer proper formal professional training.
- English language proficiency is necessary to fill out the standardized questionnaires correctly.

2.5. Exclusion Criteria

Individuals were excluded from the study if they met any of the following criteria:

- Retired psychologists or those who are not currently practicing.
- Staff in non-clinical, research, or administrative positions who are not in direct contact with clients.
- Psychologists who were trainees or interns and had not yet received their complete professional training.

2.6. Measures

The study employed three well-recognized psychometric scales to assess psychologists' family functioning, burnout, and secondary traumatic stress (STS). Family functioning was assessed with the General Functioning subscale of the Family Assessment Device (FAD-GF) constructed by Epstein, Baldwin, and Bishop [13]. The measure assesses significant aspects of family functioning such as emotional responsiveness, communication, and problem-solving, and has consistently reported high internal consistency (α >.85) in other studies.

Burnout was assessed using the Maslach Burnout Inventory (MBI), developed by Maslach and Jackson [14], which measures three main dimensions: emotional exhaustion, depersonalization, and reduced personal accomplishment. The MBI is one of the most widely used instruments to measure professional burnout and has shown high psychometric reliability (α >.80) in most professions, with specific focus on the mental health profession [15].

Secondary traumatic stress was measured using the Secondary Traumatic Stress Scale (STSS) by Bride and colleagues [16], which measures intrusion, avoidance, and hyperarousal symptoms that result from indirect exposure to the trauma of the clients. The STSS has been widely used in studies of professionals working with trauma and has high internal consistency (α > .90).

2.7. Hypotheses

- **H_{01}:** There is no significant relationship between family functioning, secondary traumatic stress, and burnout among psychologists.
- **H_{02}:** Family functioning has no significant impact on burnout and secondary traumatic stress among psychologists.
- **H_{03}:** Burnout does not significantly differ among psychologists with different levels of experience.
- **H_{04}:** STS does not significantly differ among psychologists with different levels of experience.

2.8. Procedure

Data were gathered within three months via an online survey that was distributed via professional networks, psychology forums, and direct institutional outreach. Informed consent was sought from participants prior to survey completion, outlining the purpose of the research, confidentiality measures, and voluntary participation rights. The survey was conducted in English and took approximately 15-20 minutes to complete.

The present study adhered to the ethical guidelines of the American Psychological Association's (APA, 7th edition) to safeguard participants' rights and data. Anonymity was maintained by avoiding collection of any personally identifiable information and hence keeping all the answers confidential. The participants were apprised of their right to withdraw from participation in the study at any time with no adverse impact. Other than this, very strict data protection procedures were used, keeping all the answers confidential and only granting access to the research team.

3. Results

Table 1 Correlations Between Family Functioning, Burnout, and Secondary Traumatic Stress

Variable	n	M	SD	1	2	3	4	5
Family Functioning	254	2.40	0.455	-				
Emotional Exhaustion	254	22.4	5.66	0.194**	-			
Depersonalisation	254	14.1	4.19	0.151*	0.351***	-		
Personal Achievement	254	26.3	4.84	0.129*	0.310***	0.236***	-	
Secondary Traumatic Stress	254	21.2	7.09	0.306***	0.349***	0.192**	0.065	-

Note. * p < .05, ** p < .01, *** p < .001

Table 1 shows Pearson correlation coefficients among family functioning and the three burnout subscales—namely emotional exhaustion, depersonalization, and personal achievement—and secondary traumatic stress (STS). The findings suggest that there are statistically significant positive correlations between family functioning and emotional exhaustion (r =.194, p <.01), depersonalization (r =.151, p <.05), personal achievement (r =.129, p <.05), and STS (r =.306, p <.001). Since higher scores on the family functioning scale suggest poorer family functioning, the findings

suggest that psychologists reporting greater dysfunction in their family surroundings are likely to have greater burnout and secondary traumatic stress.

Among the burnout dimensions, emotional exhaustion was most strongly correlated with depersonalization (r =.351, p <.001) and STS (r =.349, p <.001) and showed moderate correlation with personal achievement (r =.310, p <.001). This implies a pattern suggesting emotionally exhausted psychologists are more detached from clients and also demonstrate secondary trauma symptoms. Depersonalization was seen to be strongly correlated with personal achievement (r =.236, p <.001) and STS (r =.192, p <.01), suggesting that increased detachment from work is associated with increased risk of trauma-related stress. Interestingly, personal achievement did not show significant correlation with STS (r =.065, p = ns), suggesting that a psychologist's self-perceived professional competence might not necessarily be correlated with susceptibility to secondary traumatic stress.

Table 2 Regression Model Summary for Family Functioning Predicting Emotional Exhaustion

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	R Square Change	F Change	df1	df2	Sig. F Change
1	.194[a]	.038	.034	5.56844	.038	9.821	1	252	.002

a. Predictors: (Constant), FAD

Table 3 Regression Coefficients for Family Functioning Predicting Emotional Exhaustion

		Unstandardized Coefficients		Standardized Coefficients			95.0% Confidence Interval for B	
Model		B	Std. Error	Beta	t	Sig.	Lower Bound	Upper Bound
1	(Constant)	16.595	1.882		8.819	0.000	12.889	20.301
	FAD	2.413	0.770	0.194	3.134	0.002	0.897	3.930

a. Dependent Variable: EE

To explore the potential predictive function of family functioning on emotional exhaustion, an important aspect of burnout, a linear regression analysis was run. From Table 2, as presented, the results of the analysis indicated that family functioning explained 3.8% of the variance in emotional exhaustion (R^2 = .038, Adjusted R^2 = .034). While the effect size is deemed relatively small, the model was statistically significant, F(1, 252) = 9.821, p = .002, indicating that family functioning does significantly contribute to emotional exhaustion.

Further details from the regression coefficients in Table 3 explain this relationship. The unstandardized coefficient (B = 2.413, SE =.770) indicates that for every unit rise in the family functioning score explains poorer family functioning, there is a corresponding 2.41-point rise in emotional exhaustion, given that other variables are held constant. The standardized beta coefficient (β =.194, t = 3.134, p =.002) also indicates a significant positive relationship between the two variables. Finally, the 95% confidence interval for B (0.897 to 3.930) does not contain zero, thus adding to the validity of this result and highlighting the significance of family functioning in the development of emotional well-being among psychologists.

Table 4 Regression Model Summary for Family Functioning Predicting Depersonalisation

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	R Square Change	F Change	df1	df2	Sig. F Change
1	0.151[a]	0.023	0.019	4.15493	0.023	5.896	1	252	0.016

a. Predictors: (Constant), FAD

Table 5 Regression Coefficients for Family Functioning Predicting Depersonalisation

		Unstandardized Coefficients		Standardized Coefficients			95.0% Confidence Interval for B	
Model		**B**	**Std. Error**	**Beta**	**t**	**Sig.**	**Lower Bound**	**Upper Bound**
1	(Constant)	10.788	1.404		7.683	0.000	8.023	13.553
	FAD	1.396	0.575	0.151	2.428	0.016	0.264	2.527

a. Dependent Variable: DP

The regression model examined the predictive relationship between family functioning, according to the Family Assessment Device (FAD), and depersonalization, a burnout dimension. In Table 4, the regression model summary is shown, which revealed that family functioning accounted for a variance of 2.3% in depersonalization (R^2 =.023, Adjusted R^2 =.019). The model was statistically significant (F(1, 252) = 5.896, p =.016), thus showing that the variance in psychologists' depersonalization levels is associated with family functioning.

Table 5 displays the regression coefficients and finds that depersonalization was predicted significantly by family functioning (β =.151, t = 2.428, p =.016). The unstandardized regression coefficient (B = 1.396) suggests that for each one-unit increase in family dysfunction, depersonalization scores went up by 1.396 points. The 95% confidence interval of the coefficient was 0.264 to 2.527, thus representing a significant positive relationship.

Table 6 Regression Model Summary for Family Functioning Predicting Personal Achievement

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	R Square Change	F Change	df1	df2	Sig. F Change
1	0.129[a]	0.017	0.013	4.80409	0.017	4.284	1	252	0.039

a. Predictors: (Constant), FAD

Table 7 Regression Coefficients for Family Functioning Predicting Personal Achievement

		Unstandardized Coefficients		Standardized Coefficients			95.0% Confidence Interval for B	
Model		**B**	**Std. Error**	**Beta**	**t**	**Sig.**	**Lower Bound**	**Upper Bound**
1	(Constant)	22.993	1.623		14.163	0.000	19.796	26.191
	FAD	1.375	0.664	0.129	2.070	0.039	0.067	2.683

a. Dependent Variable: PA

Regression analysis was conducted to investigate the correlation between family functioning, as assessed by the Family Assessment Device (FAD), and personal achievement, one of the components of burnout. The summary of the regression model is presented in Table 6, where it was found that family functioning accounted for 1.7% of the variance in personal achievement (R^2 =.017, Adjusted R^2 =.013). The model was significant statistically (F(1, 252) = 4.284, p =.039), which means that family functioning has a small but significant effect on personal achievement.

Table 7 presents the regression coefficients, and these reveal that family functioning is also a strong predictor of personal achievement (β =.129, t = 2.070, p =.039). The unstandardized regression coefficient (B = 1.375) indicates that with each increase of one unit of family dysfunction, personal achievement scores increase by 1.375 points. The 95% confidence interval (0.067 – 2.683) confirms a positive and significant relationship.

Table 8 Regression Model Summary for Family Functioning Predicting Secondary Traumatic Stress

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	R Square Change	F Change	df1	df2	Sig. F Change
1	0.306[a]	0.094	0.090	6.75940	0.094	26.091	1	252	0.000

a. Predictors: (Constant), FAD

Table 9 Regression Coefficients for Family Functioning Predicting Secondary Traumatic Stress

		Unstandardized Coefficients		Standardized Coefficients			95.0% Confidence Interval for B	
Model		B	Std. Error	Beta	t	Sig.	Lower Bound	Upper Bound
1	(Constant)	9.772	2.284		4.278	0.000	5.273	14.270
	FAD	4.774	0.935	0.306	5.108	0.000	2.934	6.615

a. Dependent Variable: STS

A linear regression test was conducted to examine the predictive correlation between family functioning (independent variable) and secondary traumatic stress (STS) (dependent variable). Table 8 presents the model summary, and the R value is.306, indicating a moderate positive relationship between family functioning and STS. The R^2 value of.094 indicates that 9.4% of STS variance could be explained by family functioning. The model was significant at the statistical level, $F(1, 252) = 26.091$, $p < .001$, indicating that family functioning predicts STS significantly.

Table 9 shows the regression coefficients, and as it can be observed, family functioning is a significant predictor of STS ($\beta = .306$, $t = 5.108$, $p < .001$). The unstandardized coefficient ($B = 4.774$, $p < .001$) reveals that for a one-unit increase in family functioning, STS also increases by approximately 4.77 units. The 95% confidence interval (2.934, 6.615) is not zero, again confirming the statistical significance of the relationship.

Table 10 *One-Way ANOVA Results for Burnout Dimensions by Experience Level*

Variables	F	df1	df2	p
EE	1.165	3	250	0.324
DP	0.220	3	250	0.883
PA	0.375	3	250	0.771

One-way ANOVA was employed to examine whether psychologists with varying levels of professional experience differ in their burnout levels. Burnout was measured on all three dimensions: Emotional Exhaustion (EE), Depersonalization (DP), and Personal Accomplishment (PA).

The results indicated that there were no statistically significant differences across any of the burnout dimensions when experience levels were contrasted. More specifically, with respect to Emotional Exhaustion, the test yielded $F(3, 250) = 1.165$, $p = .324$; for Depersonalization, $F(3, 250) = 0.220$, $p = .883$; and for Personal Accomplishment, $F(3, 250) = 0.375$, $p = .771$.

Levene's test for homogeneity of variances validated that the assumption of equal variances had been satisfied in all the three dimensions ($p > .05$), thus making it appropriate to use ANOVA. To this end, the null hypothesis (H_{03}), which had postulated that levels of burnout do not significantly vary among psychologists with different levels of experience, was accepted.

Table 11 One-Way ANOVA Results for STS by Experience Level

Variables	F	df1	df2	p
STS	0.623	3	129	0.601

To examine the possible difference in the levels of Secondary Traumatic Stress (STS) among psychologists with varying levels of professional experience, one-way ANOVA was employed. Welch's ANOVA was used due to its robustness to violations of the assumption of homogeneity of variances.

The test did not show any statistically significant difference in STS scores by levels of experience, $F(3, 129) = 0.623$, $p = 0.601$. Levene's test for homogeneity of variances was not significant, $F(3, 250) = 0.850$, $p = 0.467$, thus showing that the equal variances assumption was met. The findings show that levels of STS are not significantly different based on psychologists' levels of experience, thus supporting the null hypothesis (H_{04}).

4. Discussion

The purpose of this study was to explore the relationship between family functioning, burnout, and secondary traumatic stress (STS) among psychologists. Following the spillover theory and the Job Demands-Resources (JD-R) model as the basis for the underlying theoretical models, the findings depict the complex interplay between personal and professional domains, contrary to the hypothesis that work stressors are independent. The findings provide valuable insights into how family functioning affects the different facets of burnout—emotional exhaustion (EE), depersonalization (DP), and personal achievement (PA) and susceptibility to STS.

4.1. Family Functioning and Burnout

The results show that dysfunctional family functioning is positively correlated with high levels of emotional exhaustion and depersonalization among psychologists, thus confirming the hypothesis that stress related to family problems increases professional burnout. The results are consistent with previous studies hypothesizing that dysfunctional families generate increased emotional distress, which erodes individuals' resilience to recover from work-related stress [12,13]. Spillover theory accounts for this phenomenon by suggesting that stress and emotional exhaustion in one sphere of life (family) spill over into performance and motivation in another sphere of life (work).

But the outcome of individual accomplishment shows a surprising trend. In contrast to the hypothesis that dysfunctional family functioning would be related to lower individual accomplishment, the findings show a weak but positive relationship. This finding is in line with the compensatory model of work-family relationships [15], whereby individuals who experience familial dysfunction can compensate for such adversity by putting more energy into work success as a form of validation. This could be interpreted as psychologists who are experiencing dysfunctional family relationships putting more effort into their work as a means of achieving a sense of competence and success, even if this comes at the expense of more emotional exhaustion and depersonalization.

Although these are strong associations, the overall variance accounted for by family functioning in burnout dimensions is limited, indicating that other factors, including work environment, coping, and personal resilience, are important contributors to burnout outcomes. This is consistent with the JD-R model, which suggests that job-related and personal resources (e.g., work support, self-care strategies) serve as buffers to burnout, while excessive demands (e.g., family pathology, high caseloads) enable it.

4.2. Family Functioning and Secondary Traumatic Stress (STS)

The study also identified a significant positive relationship between secondary traumatic stress (STS) and family dysfunction, thus affirming earlier studies that demonstrate how individual life stressors predispose an individual to secondary trauma [16,17]. The spillover theory is a pragmatic paradigm, assuming that psychologists with high levels of stress involving family issues are likely to be unable to control their emotional reactions within the work environment, thus making them vulnerable to vicarious trauma. Lastly, the Job Demands-Resources (JD-R) theory assumes that individual stressors, such as dysfunctional family life, are additional emotional loads that reduce the coping ability of psychologists, thus making them vulnerable to distress related to the work of counseling traumatized clients [15].

4.3. Impact of Professional Experience on Burnout and Secondary Traumatic Stress Among Psychologists

The current research focused on determining if there are significant differences in levels of burnout and secondary traumatic stress (STS) between psychologists with different professional experience levels. Two null hypotheses were tested: H_{03}, which argued that burnout levels do not differ significantly among different experience levels, and H_{04}, which hypothesized that levels of STS do not differ significantly among the same experience levels.

In terms of burnout, as assessed by its three core dimensions—Emotional Exhaustion (EE), Depersonalization (DP), and Personal Accomplishment (PA)—the findings showed that there were no significant differences between groups. The one-way ANOVA findings for EE, DP, and PA yielded non-significant F-values, which indicated that years of experience had no significant influence on any of the dimensions of burnout among the psychologists who participated in the study. These findings suggest that burnout might not be exclusively dependent on professional experience; instead, it might be influenced by a host of factors such as organizational culture, intensity of workload, coping mechanisms, or individual differences in resilience and self-care habits.

Similarly, STS analysis revealed no statistically significant difference in various levels of experience. Although Welch's ANOVA was used to account for the potential heterogeneity of variances, Levene's test confirmed that the equal variances assumption was met, further guaranteeing the robustness of the findings. This finding implies that the experience or risk of secondary traumatic stress is not necessarily a function of the years of service a psychologist has accumulated. This could be attributed to the pervasive and unpredictable nature of indirect exposure to trauma in clinical settings, which can hit practitioners regardless of the years of service.

Together, these results indicate professional experience is not a risk or protective factor in and of itself for secondary traumatic stress or burnout. These results indicate other variables like caseload characteristics, supportive networks, internal coping styles, and organizational capabilities must be considered when investigating well-being among mental health professionals. Future studies might be aided by the use of a broader lens that takes into account both individual and organizational variables as an attempt to better identify what causes or reduces burnout and STS in this population.

This study adds to the growing corpus of literature on the complex interplay between personal and professional sources that influence the psychological well-being of mental health professionals. According to the Spillover Theory and the Job Demands-Resources (JD-R) model, the study highlights the pivotal role of family functioning in the emergence of burnout and secondary traumatic stress (STS) in psychologists. Poor family functioning was significantly correlated with emotional exhaustion, depersonalization, and STS, thus demonstrating the role of personal life stressors in influencing professional mental health outcomes. Most interestingly, a moderate positive correlation between poor family functioning and personal accomplishment shows that some individuals employ compensatory mechanisms to generate personal fulfillment from work in spite of family adversity.

Conversely, professional experience had no significant impact on burnout or STS levels, and this indicates that experience in itself is not a buffer against occupational stress. These results contradict assumptions that experience inherently prepares psychologists to manage the emotional demands of their profession and instead indicate the necessity for systemic support, effective coping, and work-life balance strategies irrespective of career stage.

In conclusion, the study emphasizes the highest need to address the work and personal life factors in prevention interventions against burnout and secondary traumatic stress in psychologists. Interventions aimed at enhancing family functioning, organizational support, and individual resilience might be effective measures in safeguarding practitioners' mental health. Future research should also keep a focus on integrative models that address the interaction between work demands, individual resources, and contextual factors to present a more holistic view of professional well-being in psychology.

4.4. Theoretical Implications

Theoretically, this current study extends the Job Demands-Resources (JD-R) model by highlighting the importance of family functioning as an important personal factor that both leads to burnout and secondary traumatic stress (STS). Whereas the conventional JD-R model mainly focuses on workplace demands and resources, the current results highlight why family-related stress may be an overlooked but important demand. The results also lend evidence to spillover theory, which supports that stress can spill over from one area of life to another, and they also support the Conservation of Resources (COR) theory, which maintains that reduced emotional and psychological resources—due to family-related strain—heighten vulnerability to occupational stress.

4.5. Practical Implications

Practically, the results prompt mental health organizations to take psychologists' family contexts into account when developing wellness programs. Adjustments to work schedules, availability of counseling services, and boundary-setting training can assist professionals in juggling the competing expectations of their occupational and family responsibilities. Peer support and mentorship programs can provide safe spaces where individuals can process personal and professional stressors. Organisations can also look at providing workshops in family communication and stress management, thereby underscoring the interconnection between occupational effectiveness and family health.

Limitations

There are limitations to this work. Due to the correlational nature of the study, the findings indicate associations between variables but do not allow for conclusions about causality. Additionally, self-report introduces bias. Future studies would be valuable employing longitudinal designs and multiple sources of data to confirm validity. Cultural and professional specificity of the sample could also reduce generalizability. Finally, unmeasured variables such as personality, coping, or supportive workplace may impact findings. Finally, while relations were investigated, effectiveness of interventions was not measured, so direct application to practice is ruled out.

Recommendations for Future Research

Longitudinal study designs should be employed in future studies to clarify causal pathways between professional stress and family functioning. Future studies should also examine protective mechanisms like resilience, mindfulness, and organizational support to more effectively determine what insulates psychologists against burnout and STS. Cross-cultural research would examine if these results are generalizable to diverse societal norms. Since the discovery of the negative correlation between family dysfunction and increased personal accomplishment is counterintuitive, future research should investigate whether this is a positive coping mechanism or a negative coping mechanism of overcompensation. Above all, intervention-based studies need to evaluate the effectiveness of workplace flexibility, peer support programs, and family-based programs to combat burnout and STS in psychologists.

5. Conclusion

This study sheds light on the often overlooked influence of the personal life, i.e., family relationships, of psychologists on their work-related well-being. The findings indicate that the family functioning is not autonomous from work settings; rather, it affects the psychologists' conceptualization of burnout and secondary traumatic stress significantly. It was confirmed that dysfunctional family functioning predicted higher emotional exhaustion, depersonalization, and susceptibility to secondary traumatic stress and thus pointed to the affect transfer from the private to the work life.

The weak positive correlation between family dysfunction and personal achievement that has been observed implies that individuals might end up compensating for issues that they face in their home environment by working extra hard in their career. Although such efforts might provide a feeling of accomplishment, they tend to cover up emotional strain. The research also indicates that these effects continue throughout the various phases of one's career, although younger psychologists might be particularly susceptible in some areas, e.g., emotional disengagement.

Through the integration of theoretical models like the Job Demands-Resources model and spillover theory, this research demonstrates the necessity to consider both work and family conditions when addressing burnout and STS. These findings endorse a more integrated approach to psychologists' well-being, going beyond support within the workplace to encompass the role of personal and family life. Future research and interventions need to continue to examine these interfaces, paving the way for more sustainable careers in the mental health field.

Compliance with ethical standards

Disclosure of conflict of interest

No conflict of interest to be disclosed.

Statement of informed consent

Informed consent was obtained from all individual participants included in the study.

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