The COVID-19 pandemic has brought global challenges to healthcare systems and major shifts to public health policies and has required rapid adaptations to treatment provision for mental health and substance abuse care. Individuals providing substance abuse treatment face many challenges related to maintaining communication with and helping to support clients during the pandemic. Not only have they needed to adapt quickly to new methods of treatment provision (e.g., telehealth) to ensure continuity of high-quality care, but they have also been required to manage their own uncertainty and stress during this time. This study seeks to examine the impact of the COVID-19 pandemic on work satisfaction, work-related stress, and perceived work efficacy among substance use treatment providers to better understand adaptations made and support needed from treatment systems for this group.

**Background:**
The impact overall provider work efficacy and burnout (COVID-19) could aid in reducing barriers to treatment provision and may be representative of all treatment providers.

**Recruitment Criteria:**
- Adult (≥18 years)
- Provided substance use services from a consenting facility
- Due to both inclusion and expansion of telehealth services and the use of digital tools.

**Participants:**
- N=92 participants
- 49% 31-50 years old, 72% female
- Only 11% Racial/Ethnic Minority
- 75% Bachelors Degree or Higher
- 28% providers also in recovery themselves

**Measures (self-report):**
- Demographics
- Maslach Burnout Inventory
- Workplace Stress Survey

**Methods:**
Participants of this study were 92 physician providers, peer support specialists, and administrative staff recruited from various opioid use disorder (OUD) treatment facilities across Missouri, including recovery homes, emergency room/hospital settings, and outpatient treatment facilities. Survey data was collected from April to August 2020 during the COVID-19 pandemic. Mixed method quantitative and qualitative analyses were conducted to assess self-reported provider burnout, sources of work-related stress, and perceived work efficacy during this time frame.

**Results Summary:**
Results demonstrated that providers reported high levels of both work-related stress and burnout during the COVID-19 pandemic with 84% reporting that they felt emotionally drained from work and 57% reporting feeling burnt out from work during this time. Nearly half of the providers surveyed also reported that their enjoyment of work has decreased (45%) and about one-third reported their quality of work has decreased (28%) during the COVID-19 pandemic. Qualitative investigations further illustrated that increased hours, changes in work schedules, work-life balance challenges, and difficulties with client communication and increased needs were cited as contributing to these increases in stress and burnout and decreases in perceived workplace efficacy.

**Strengths:**
By identifying these high levels of stress that can impact both the providers themselves and their ability to provide quality care and support to clients they serve, addiction treatment facilities can work to provide resources to help alleviate these burdens and ensure the well-being of their employees and clients.

**Limitations:**
With an N of 92 participants from the state of Missouri, these results may not be representative of all treatment providers.

**Conclusions:**
- With the rapid changes in treatment provision methods during the COVID-19 pandemic, it is important for provider to feel connected to both clients as well as other providers and administration.
- Inclusion and expansion of telehealth services and the use of digital tools (mHealth) could aid in reducing barriers to treatment provision and impact overall provider work efficacy and burnout.

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**OUD providers across Missouri are experiencing high workplace stress and burnout rates due to both workplace and personal life factors during COVID-19; therefore addiction treatment facility administration should further investigate these challenges to ensure the well-being of both their providers and their clients.**