



Effectiveness of Guided Imagery on Burnout Syndrome Among Staff Nurses Working in Dhiraj General Hospital at Piparia, Vadodara

KEYWORDS

Effectiveness, guided imagery, Burnout syndrome, Staff Nurse

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ABSTRACT

Background: The term "burnout" is related to a situation arising increasingly more often among the professionals performing their duties by way of a long-term, direct, people-to-people relationship, which includes all healthcare professionals. This study is Aims & Objective: 1] To determine the level of burnout syndrome among staff nurses in dhiraj general hospital.2] To assess the effectiveness of guided imagery on burnout syndrome among staff nurses in dhiraj general hospital.3] To find out association between the level of burnout syndrome with the selected demographic variables. Material and Method: Pre experimental one group pre-test – post-test research design, and non-probability purposive sampling technique was adopted to achieve the goal of the study. The tool consists of two parts. First part consist demographic data of the sample and second part consist of standardized tool maslach burnout inventory. The sample was 60 staff nurses working in dhiraj general hospital at piparia, Vadodara. Results: The data was collected by using maslach burnout syndrome. Descriptive and inferential statistics was used for analysis. Result revealed that In the pre-test mean score and SD was 77.88 + 15.15 and post-test means score and SD was 66.30 + 9.09. While Paired mean difference score was 11.58. The post-test level of burnout mean score is significantly lower than the pre-test level of burnout mean score. The 't' calculated value 9.97 is more than tabulated value 3.4632 at P< 0.001 level of significance. Conclusion: The 't' test was computed between pre-test and post-test score indicate that the mean post-test burnout score is significantly lower than the mean pre-test burnout score among staff nurses exposed to guided imagery. Hence it is indicated that guided imagery was effective.

INTRODUCTION

The "burnout" is related to a situation arising increasingly more often among the professionals performing their duties by way of a long-term, direct, people-to-people relationship, which includes all healthcare professionals. This study is aimed at determining the level of the Burnout syndrome and effectiveness of guided imagery on burnout syndrome the three components involved there in (emotional exhaustion, depersonalization, and fail in personal achievement) among the nursing staff. Guided imagery uses the power of imagination to evoke positive images to stimulate healing. It involves thinking in pictures to contact a person's inner reality. Thinking in pictures invokes all of the senses: hearing, seeing, tasting, smelling and touching as well as sensing the body's position and movement and even emotions. This guided imagery exercises are used for relaxation, where the exercises last seconds to minutes. It uses a body mind connection which closely links to healing.

NEED FOR STUDY

The term burnout is becoming more and more commonly heard in the field of medical professional, and I often see staff nurses in my practice that show many symptoms of burnout. So what exactly is it? Burnout involves a psychological, emotional, and sometimes physical withdrawal from the activity in response to excessive stress or dissatisfaction. What's most important to know about burnout is that it's very complex in how it develops both physically and emotionally.

Burnout was recognized as an occupational risk for professions that involve health care, education and human services; that is to say, it particularly affects professionals in the area of services, or care-givers, when they are in direct contact with the users. From this aspect, the work of nursing professionals is pointed out.

Burn out is a job-related condition involving the feelings of emotional exhaustion, depersonalization and reduced emotional accomplishment. About 30 to 50 percent of work force is exposed to psychological overload at work resulting in occupational stress and burnout. European member states have reported burnout prevalence of 29 percent, and in US 75 percent of workers admit that their jobs are stressful and pressure of work is steadily increasing. In India the burnout prevalence is found to be 23 to 30 percent. It affects persons involved in various professional and stressful activities including the work in intensive care unit.

According to the Ministry of Social Security, in 2007, 4.2 million persons were laid off work, and of these, 3,852 were diagnosed with Burnout Syndrome.

The reported cases here, we used survey data collected from 53,846 nurses in six countries—the U.S., Canada, U.K., Germany, New Zealand, and Japan—to investigate the association between nurse burnout and nurse-rated quality of care. The instruments and questionnaires in each of these surveys included measures of many variables hypothesized to be involved in the relationship between burnout and perceptions of quality of care.

OBJECTIVE

- To determine the level of burnout syndrome among staff nurses in dhiraj general hospital.
- To assess the effectiveness of guided imagery on burnout syndrome among staff nurses in dhiraj general hospital.
- To find out association between the level of burnout score with the selected demographic variables.

HYPOTHESIS

H₁:- The mean burnout post-test score will be significantly lower than the mean pre-test burnout score among the sample.

H₂:- There will be a significant association between pretest levels of burnout score with selected demographic variables.

ASSUMPTIONS

Nurses may prone to get burnout syndrome.

Guided imagery may reduce the burnout syndrome.

Guided imagery has no adverse effect on the staff nurses.

RESEARCH METHODOLOGY

RESEARCH APPROACH:- A quantitative research approach is adopted for the study.

RESEARCH DESIGN:- The pre –experimental design chosen for the study.

RESEARCH VARIABLES

INDEPENDENT VARIABLES: Guided imagery is the independent variable in this study.

DEPENDENT VARIABLES: In this study level of burnout syndrome is the dependent variable.

DEMOGRAPHIC VARIABLE:

Age, sex, religion, professional, qualification, marital status, family income clinical experience in years, job description, area of work, and previous exposure of any psychotherapy.

SETTING OF THE STUDY

The study will be conducted in the dhiraj general hospital at piparia, waghodia, Vadodara.

TARGET POPULATION

In this study, the target population consisted of staff nurses with burnout syndrome who are working in dhiral general hospital piparia, Vadodara.

SAMPLE SIZE

The sample for the present study comprises of 60 staff nurses who fulfilled the sampling criteria and expressed willingness to participate in the study.

SAMPLING TECHNIQUE

Non probability purposive sampling technique

DISCUSSION & CONCLUSION

This chapter includes conclusion, implication, limitations and recommendations. The following conclusions were drawn from the finding of the present study. The research approach adopted in the present study is quantitative research approach to measure the effectiveness of guided imagery on burnout syndrome among staff nurses. Effectiveness was assessed by The 't' test was computed between pre-test and post-test score indicate that the mean post-test burnout score is significantly lower than the mean pre-test burnout score among staff nurses exposed to guided imagery. Hence it is indicated that guided imagery was effective.

REFERENCE

1. Kelly Fernanda Assis Tavares et al; Prevalence of burnout syndrome among resident nurses; Acta paul. enferm. vol.27 no.3 São Paulo May/June 2014; <http://dx.doi.org/10.1590/1982-0194201400044>
2. Albaladejo R, Villanueva R, et al; Burnout syndrome among nursing staff at a hospital in Madrid; 2004 Jul-Aug;78(4):505-16; PMID:15384264; <http://www.ncbi.nlm.nih.gov/pubmed/15384264>.
3. Carlotto MS, Palazzo LS. [Factors associated with burnout's syndrome:

- an epidemiological study of teachers]. Cad SaudePública. 2006; 22(5):1017-26. Portuguese.
4. Pavlakis A: Mood Disturbances among nurses. *Nurseleutike* 1996, 35(3):173-179. article in Greek.
5. Payne N: Occupational Stressors and Coping as Determinants of Burnout in Female Hospice Nurses. *J AdvNurs* 2001, 33(3):396405; <http://www.ncbi.nlm.nih.gov/pubmed/11251727>.
6. Cherniss C: "Job Burnout": Growing Worry for Workers, Bosses. *U.S. News & World Report* 1980, 88(6):71-72.
7. Sabo BM: Adverse psychosocial consequences: Compassion fatigue, burnout and vicarious traumatization: Are nurses who provide palliative and hematological cancer care vulnerable? *Indian J Palliat Care* 2008, 14:23-29.
8. Duquette A, Kerouac S, Sandhu B, et al.: Factors related to nursing burnout: a review of empirical knowledge. *Issues Ment Health Nurs* 1994, 15:337-358.
9. Devereux JM, Hastings RP, Noone S, Firth A, Totsika V: Special support and coping as mediators or moderators of the impact of work stressors on burnout in intellectual disability support staff. *Res Dev Disabil* 2009, 30(2):367-377.