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Burnout Among Nurses

Nursing

KEYWORDS : Burnout, nurses, work, psychological distress

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ABSTRACT

Current changing world of technology and lifestyle makes life harder for people. Healthcare professionals are not exception for this. Chronic fatigue and stress, making something impersonal, reduced attainment of task depicts the symptom of burnout. In a profession like nursing the occurrence of burnout seems to be high due to the demands from patients, superiors and the organization. The study is intended to examine thelevel of burnout among nurses and its association with socio-demographic variables. Methods: A descriptive cross-sectional study was conducted among 200 nurses working in a selected tertiary care hospital at Nellore, A.P.Burnout was evaluated by the Oldenburg Burnout Inventory.Data wereanalyzed using descriptive and inferential statistics with SPSS 15 version. Results: Among 200 subjects, majority of the nurses 108(54%) have reported moderate level of burnout and 92(46%) reported severe level of burnout.52(26%) nurses felt tired because of work, 92(46%) talked about their work in a negative way, work pressure is reported to be high in 113(56.6%),work was found to be a positive challenge among 112(56%),66(33%) reported work drains them emotionally,78(39%) reported that they become disconnected with this type of work, work makes them sickened reported by 64(32%),153(76.5%) engage in doing more and more work. A statistically significant association is seen between the socio-demographic variables and years of experience and type of coping method at p<0.05 level.Conclusion: The study has provided an insight that majority of the nurses have burnout. Early identification and intervention at the right time may minimize the impact of burnout and assure a quality life.

INTRODUCTION

Current changing world of technology and lifestyle makes life harder for people. Healthcare professionals are not exception for this. Chronic fatigue and stress, making something impersonal, reduced attainment of task depicts the symptom of burnout.

Burnout is a condition of physical or mental exhaustion that result from long-standing taking part in work place that are psychologically harmful. Burnout consists of emotional exhaustion, depersonalization, and low level of personal accomplishment. Job burnout, an archetype of stress is being increasingly documented as one of the most grave occupational health hazards. It results in misery, job dissatisfaction, decreased yielding, non-attendance, high turnover and a state of imbalance.

Work related factors such as job strain without support, ever changing expectation, newer tasks, role conflict and uncertainty encompass various causes of stress which can result in job burnout syndrome. Also, persistent psychological stressors on the employment resulting in pessimistic feeling such as uselessness, lack of accomplishment, decreased efficiency at work, emotional exhaustion ranging from mild monotony to severe depression, mood swings and handling people in an hardhearted way and poor sense of self achievement are observed as basics of job burnout. As a consequence, people develop pessimistic attitude and become disconnected, listless, irritated or aggressive in their job environment.

Burnout is a main issue in the helping profession such as nursing, medicine, social work, law enforcement and education. Nursing personnel face disturbed sleep pattern, recurrent emergency situation, inappropriate expectation from patients and caregivers, inadequate nursing workforce and short of power in decision making, which result in job exhaustion. The studies that had been conducted in western countries to investigate the extent and implication of job burnout among nurses working in various departments reported certain factors that are associated with job burnout. They include individual uniqueness, threat to job management, hardiness of working out, workload, interpersonal rapport with colleagues, familiarity of nursing ritual, political restriction, level of education, night shift, hospital based work and home interference.

BACKGROUND OF THE STUDY

According to WHO (2011), there are about 19.3 million nurses and midwives globally, and in India it is about 1.43 lakh nurses. Nurses in India, are overburdened as the nurse to patient ratio is low (1:2250). **Cronin Stubbs and Rooks** noted a considerable difference in the frequency and intensity of job stress and burnout among 296 nurses working in medical units, critical unit, operation room and psychiatric units in different hospitals. Nurses working in the critical and medical units experienced job stressors more frequently and seriously than the nurses working in the psychiatry unit and operation room. Stresses in nurses employed in psychiatry unit are further added up by decision-making and managerial factors.

The huge pressure of practicing in a demanding and continually changing healthcare setting may increase the prevalence of burnout among nurses **(Ledgister2003).** Burnout is a chief problem because it is associated with lower self-esteem, reduced job performance, increased weariness, job turnover, loss of productivity, high rates of absenteeism, poor physical and psychological health. Job related stress is a wide spread problem across industry, but it is endemic in the human services where nurses are the target group **(Cherniss 1980, Schufeli and Green Glass 2001).**

Vivian F Ribeiro et.al (2014) reported that globally 10.1% nurses had a high prevalence of burnout and 55.4% have the risk for developing burnout. **Fagin and coworkers (2014)** pointed out that burnout among staff nurses is due to personnel shortage, change healthcare services, poor self-esteem and not being informed of change that happened.

OBJECTIVES

1. To identify the level of burnout among nurses.
2. To associate the level of burnout among nurses with their selected background variables

MATERIAL AND METHODS

A descriptive cross-sectional research design was adopted to identify the level of burnout among nurses working in a selected tertiary care hospital at Nellore, A.P. Out of 750 nurses working in the hospital, 200 nurses were selected by using simple random sampling technique. Nurses working in all wards and intensive care units, who were willing to participate in the study, were included in the study. Nurses who have attended any training programme related to stress and practicing yoga were excluded from the study.

DESCRIPTION OF THE TOOL

The tool used in this study has two sections:

Section I deals with the socio-demographic variables such as: age, gender, marital status, educational qualification, designation, income, area of living, area of working, number of working hours, number of night duties done in a month, support system, coping mechanism used, relaxation technique used, presence of illness and the type of illness

Section II consist of Oldenburg burnout inventory which has 16 items with a minimum score of 16 and maximum score of 64.The scoring key used is Strongly agree-1,Agree-2,Disagree-3, Strongly disagree-4.The score was interpreted as 1-20:mild burnout, 21-40:moderate burnout, >40 severe burnout

DATA COLLECTION PROCEDURE

The subjects meeting the inclusion criteria were identified and approached by the researcher, and provided with information about the study in order to give informed consent. After assuring the maintenance of confidentiality and clarification of doubts, the data were obtained by administering the Oldenburg burnout inventory.

DATA ANALYSIS

The data analysis was carried out using descriptive and inferential statistics using SPSS 15 version.

RESULTS

Fig 1: Percentage distribution of level of burnout

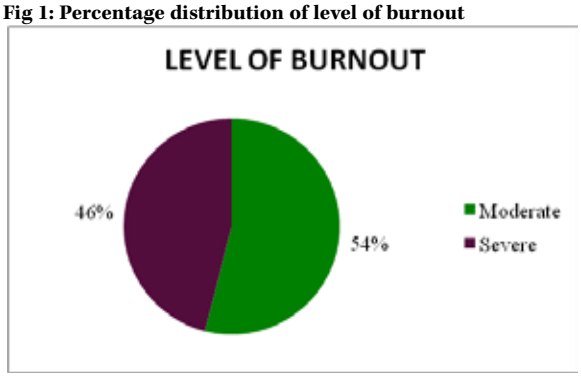

Table 1: Item wise Frequency and Percentage distribution of level of burnout among nurses N=200

Sl. No	Item	SA		A		DA		SDA	
		n	(%)	n	(%)	n	(%)	n	(%)
1	I always find new and interesting aspects in my work	57	28.5	125	62.5	18	9	-	-
2	There are days when I feel I tired before I arrived at work.	1	0.5	52	26	108	54	39	19.5
3	It happens more and more often that I talk about my work in a negative way.	5	2.5	92	46	81	40.5	22	11
4	After work, I tend to need more time than in past in order to relax and feel better.	3	1.5	77	38.5	93	46.5	27	13.5
5	I can tolerate the pressure of my work very well.	26	13	113	56.5	58	29	3	1.5
6	Lately, I tend to think less at work and do my job almost mechanically.	11	5.5	70	35	91	45.5	28	14
7	I find my work to be positive challenge.	24	12	112	56	61	30.5	3	1.5
8	During my work, I often feel emotionally drained.	7	3.5	66	33	98	49	29	14.5
9	Over time, one can become disconnected from this type of work.	10	5	78	39	70	35	42	21
10	After working, I have enough energy for my leisure activities.	31	15.5	87	43.5	70	35	12	6
11	Sometimes I feel sickened by my work task.	6	3	64	32	101	50.5	29	14.5
12	After my work, I usually feel worn out and weary.	9	4.5	64	32	99	49.5	28	14
13	This is the only type of work that I can imagine myself doing.	16	8	121	60.5	52	26	11	5.5
14	Usually, I can manage the amount of my work well.	26	13	128	64	44	22	2	1
15	I feel more and more engaged in my work.	23	11.5	153	76.5	22	11	2	1
16	When I work, I usually feel energized.	3	1.5	37	18.5	141	70.5	19	9.5

Table 2: Mean and Standard deviation of level of burnout N=200

Sl. No	ITEM	MEAN	SD
1	I always find new and interesting aspects in my work	1.8	0.582
2	There are days when I feel I tired before I arrived at work.	2.92	0.687
3	It happens more and more often that I talk about my work in a negative way.	2.6	0.716
4	After work, I tend to need more time than in past in order to relax and feel better.	2.72	0.71
5	I can tolerate the pressure of my work very well.	2.19	0.668
6	Lately, I tend to think less at work and do my job almost mechanically.	2.68	0.781
7	I find my work to be positive challenge	2.22	0.664
8	During my work, I often feel emotionally drained.	2.74	0.743
9	Over time, one can become disconnected from this type of work.	2.72	0.852
10	After working, I have enough energy for my leisure activities.	2.32	0.806
11	Sometimes I feel sickened by my work task.	2.76	0.73
12	After my work, I usually feel worn out and weary.	2.73	0.755
13	This is the only type of work that I can imagine myself doing.	2.29	0.692
14	Usually, I can manage the amount of my work well.	2.29	0.616
15	I feel more and more engaged in my work.	2.11	0.516
16	When I work, I usually feel energized.	2.02	0.572

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Table 3 : Association between the level of burnout among nurses with their Background variables N=200

Sl. No	Background variables	Moderate		Severe		X2
		n	(%)	n	(%)	
1	Age in years					
	21-30	106	53.00%	92	46.00%	1.721 , df-1,p<0.05
	31-40	2	1%	0	0.00%	
2	Sex					
	Male	10	5.00%	4	2.00%	1.841,df-1,p<0.05
	Female	98	49.00%	88	44.00%	
3	Religion					
	Hindu	30	15.00%	24	12.00%	.570,df-2,p<0.05
	Christian	77	38.50%	66	33.00%	
	Muslim	1	0.50%	2	1.00%	
4	Marital status					
	Married	5	2.50%	7	3.50%	1.997,df-2,p<0.05
	Unmarried	103	51.50%	84	42.00%	
	Divorced /Separated	0	0.00%	1	0.50%	
5	Educational qualification					
	ANM	4	2.00%	3	1.50%	1.676,df-2,p<0.05
	GNM	10	5.00%	14	7.00%	
	B.Sc (N)	94	47.00%	75	37.50%	
6	Designation					
	Staff nurse	102	51.00%	89	44.50%	0.609, df-1,p<0.05
	Ward in charge	6	3.00%	3	1.50%	
7	Years of experience					
	<1 year	28	14%	30	15%	6.33,df-2,p<0.05*
	1-3 years	78	39%	61	30.50%	
	3-6 years	2	1.00%	1	0.50%	
8	Income					
	Rs. 5000-8000	83	41.50%	81	40.50%	5.110,df-3,p<0.05
	Rs. 8000-11000	20	10.00%	10	5.00%	
	Rs. 11000-15000	3	1.50%	1	0.50%	
	Rs.>15000	2	1.00%	0	0.00%	
9	Area of living					
	Rural	93	46.50%	88	44.00%	5.260,df-1,p<0.05
	Urban	15	7.50%	4	2.00%	
10	Number of working hours					
	6	101	50.50%	89	44.50%	1.085,df-1,p<0.05
	8	7	3.50%	3	1.50%	
11	Number of night duties done in a month					
	3	1	0.50%	1	0.50%	7.811,df-7,p<0.05
	4	2	1.00%	0	0.00%	
	5	3	1.50%	0	0.00%	
	6	1	0.50%	1	0.50%	
	7	17	8.50%	13	6.50%	
	8	2	1.00%	0	0.00%	
	9	67	33.50%	68	34.00%	
	10	15	7.50%	9	4.50%	
12	Area of work					
	Ward	50	25%	30	15%	10.3,df-4,p<0.05
	ICU	27	13.5%	43	21.5%	
	HDU	15	7.50%	11	5.50%	
	Emergency	6	3.00%	6	3.00%	
	OT	10	5.00%	2	1.00%	
13	Support system					
	Family	97	48.50%	83	41.50%	.009,df-1,p<0.05
	Friends	11	5.50%	9	4.50%	
14	Relaxation technique used					
	Meditation	3	1.50%	3	1.50%	4.443,df-3,p<0.05
	Listening to Music	101	50.50%	88	44.00%	
	Play	4	2.00%	1	0.50%	
15	Coping mechanism used					
	Sleeping	85	42.50%	85	42.50%	12.619,df-7,p<0.05*
	Eating	4	2.00%	0	0.00%	
	Drinking	0	0.00%	1	0.50%	
	Exercise	2	1.00%	1	0.50%	
	Smoking	2	1.00%	0	0.00%	
	Crying	3	1.50%	0	0.00%	
	Laughing	7	3.50%	4	2.00%	
	Talking it out with someone	5	2.50%	1	0.50%	
16	Do you have any physical health problem?					
	Yes	2	1.00%	0	0.00%	1.721,df-1,p<0.05
	No	106	53.00%	92	46.00%	

DISCUSSION

Findings related to background variables

Data on the sample characteristics reveled that out of 200 nurses, 111(55.5%) were working as staff nurses,198(99%) were in the age group 21-30years, majority were females 186(93%) and 187(93.5%) were unmarried, Rs.5000-8000 was the income for 164(82%) nurses, maximum 169(84.5%) nurses were with the professional education of B. Sc(N), majority 181(90.5%) live in rural area,80(40%) work in the wards.190(95%) nurses work for 6 hours and the maximum 135(67.5%) do night duty for 9 days in a month,180(90%) receive support from the family members, maximum 189(94.5%) used to listen to music as a relaxation technique,170(85%) used to sleep as a method of coping,198(99%) do not suffer with any physical problem.

Findings related to level of burnout among nurses

Majority of the nurses 108(54%) have reported moderate level of burnout and 92(46%) reported severe level of burnout which is similar to the study conducted by **Victor Olufolahan Lasebikan and Modupe Olusola Oyetunde (2012)** with a result of high prevalence of burnout among the nurses.

Out of 200 nurses,198(99%) belong to the age group of 21-30 years, 106(53%) had moderate burnout and 92(26%) had severe level of burnout which is consistent with the study conducted by Ceslowitz S.B. (2010) to assess the burnout level among 150 staff nurses working in emergency department by using Maslach burnout inventory scale. The study concluded that 12.9% of total staff nurses strength of hospital, most of them were in the age group of 26-30 years and 65.11% of staff nurses had severe burnout, 68.2% staff nurse had moderate level of burnout, and 12.8% had mild level of burnout. The staff nurses reported that their occupational functioning was moderately affected due to burnout level.

Moreira Dde S, Magnago RF, Sakae TM, Magajewski FR (2009) female gender is commonly affected by burnout in the prevalence study of burnout syndrome among nursing staff which is supporting the present study where majority of them were female.

High level of burnout is identified among the unmarried nurses than comparing to the married nurses which is identified by Okwaraji FE, Aguwa EN (2014) and in the present study where majority 187(93%) were unmarried and had a high level of burnout.

Nurses 135(67.5%) who do night duties for 9 days suffer with burnout which is consistent with the study finding of Arnold ***B***. Bakker, Evangelia Demerouti and Wilmar ***B***. Schaufeli (2011) who reported too frequent night duties i.e. 35% of the nurses were affected with severe level of burnout.

With related to area of work, nurses working in wards have high level of burnout which is similar to the study findings of Wei Yi Tay, Arul Earnest , Matthew Joo Ming Ng(2014) where 15 (32.6%) nurses working in ward undergo severe burnout.

Item wise analysis of the results from table 1 reveals that most of them 52(26%) feels that they feel very tired before they arrive to work. Nurses 77(38.5%), feel that more time is required for them to get relaxed after work. The pressure of the work is well tolerated by 113(56.5%) of nurses.

92(46%) feel negative about the work which is coinciding with the findings which revealed that there is a display of negative emotions for depersonalization ($\beta = 0.332$) among nurses as investigated by **Mariann Kovács, Eszter Kovács, and Katalin Hegedűs (2010).**

112(56%) find work as a positive challenge. 66(33%) reported work drains them emotionally. 78(39%) reported that they may become disconnected with this type of work. 87(43.5%) find time for their leisure time activities. 64(32%) feel sickened by my work task. 64(32%) feel worn out and weary after the work.121(60.5%) find that this is the kind of job they are imaging to do.153(76.5%) feel more and more they are engaged in their work.

Findings related to association of background variables with the level of burnout

Table 3 depicts that there is a significant association with the variables such as years of experience($p<0.05$) which is supported with the descriptive study conducted by Álvarez **Verdugo, Lina Patricia, Prieto Bocanegra, Brigitte Migdolia** which identified that burnout seems to be increasing as the years of experience increases and has significant association with burnout. Coping mechanism has a significant association with the level of burnout as majority of the nurses uses sleep to get relieved of the problems faced

Background variables like age, sex, religion, marital status, educational qualification ,number of working hours, number of days night duties done in a month ,designation, area of living support system, physical problem, relaxation technique were found to be significant with the level of burnout at the level of $p<0.05$ level

CONCLUSION

The study has provided a insight that majority of the nurses have burnout. High level of burnout is identified among females, being single, as years of experience increases, working in ward and doing increased days of night duties. Intervention has to be implemented to reduce the impact of burnout at both individual and organizational level.

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