



OCCUPATIONAL COPING SELF EFFICACY, BURN OUT AND ITS CONTRIBUTING FACTORS AMONG THE NEW GRADUATE NURSES

Nursing

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ABSTRACT

Background of the study:- Occupational coping self-efficacy is the beliefs in one's capabilities to organize and execute the courses of action required to produce given attainments. Burnout is syndrome of reduced personal accomplishment, increased emotional exhaustion and increased depersonalization experienced by individuals that work closely with people.

Aim:- The study was carried out to assess the occupational coping self efficacy, burn out and its contributing factors among new graduate nurses.

Methodology: An exploratory research design was used to conduct the study. A sample of 150 new graduate nurses was taken by convenience sampling technique from DMC & Hospital, Ludhiana, Punjab. Occupational coping Self Efficacy Questionnaire – Nurses (Rento Pisanti 2008), Modified Maslach Burn Out Inventory (Maslach 2000) and structured rating scale were used to assess the occupational coping self efficacy, burn out and its contributing factors respectively.

Results: Out of 150 new graduate nurses 74 (49.3%) had high and 74 (49.3 %) had moderate and only 2 (1.4 %) had low level of occupational coping self efficacy. More than half i.e. 89 (59.3%) new graduate nurses had moderate burn out in emotional exhaustion, 104 (69.3%) new graduate nurses had high burn out in depersonalization and more than half 84 (56%) new graduate nurses had high burn out in personal achievement. All the new graduate nurses i.e. 150 (100%) reported duty workload, sudden change in duty shift, night duties and sudden critical situations as contributing factors to burn out.

Conclusion: The study concluded that majority of new graduate nurses had high and moderate level of occupational coping self efficacy. The level of burn out was found to be high in depersonalization and personal achievement section where as it was moderate in emotional exhaustion section of burn out. Duty workload, sudden change in duty shift, night duties and sudden critical situations were main contributing factors to burn out.

KEYWORDS

Occupational Coping Self Efficacy, Burn Out, Contributing Factors, New Graduate Nurses.

Introduction:

Bandura defines occupational coping self-efficacy as “the beliefs in one’s capabilities to organize and execute the courses of action required to produce given attainments”. People with high self-efficacy choose to perform more challenging tasks. They set themselves higher goals and stick to them. Once an action has been taken, highly self-efficacious people invest more efforts.¹

According to Pisanti (2008), Higher levels of occupational coping self efficacy have been shown to lower level burn out because new graduate nurses feel confident that they have sufficient personal resources to successfully deal with the demands of their job. Maslach, S. E. Jackson and M. P. Leiter (1996) defines burnout as a “syndrome of reduced personal accomplishment, increased emotional exhaustion and increased depersonalization experienced by individuals that work closely with people.”²

Nurses who are experiencing burn out, emotional exhaustion appears first and results in depersonalization; when the effect of emotional exhaustion and depersonalization is combined, new graduate nurses feels low in personal achievement. Burnout affects person's life, his self-perception, it influences her job performance.³

Some of the stressors are work overload, lack of control at work, non-supporting staff, limited promotion, and death of patients, shift work, routine and underpaid work burnout results in similar symptoms of depression or anxiety. Nurses in particular, have been found to experience higher levels of burnout compared to other health care professionals, owing to the nature of their work. Prolonged exposure to work related stress as well as low levels of job satisfaction; have also been recognized as factors contributing to high levels of burnout among nurses.⁴

Methodology:

An exploratory research design was used to conduct the study. A sample of 150 new graduate nurses was taken by convenience sampling technique from DMC & Hospital, Ludhiana, Punjab. Occupational coping Self Efficacy Questionnaire – Nurses (Rento

Pisanti 2008), Modified Maslach Burn Out Inventory (Maslach 2000) and structured rating scale were used to assess the occupational coping self efficacy, burn out and its contributing factors respectively.

Procedure for data collection:

Data was collected in the month of January, 2016. Total sample size was 150 new graduate nurses from DMC & Hospital, Ludhiana.

Results:

Figure 1 Distribution of new graduate nurses as per level of occupation coping self efficacy.

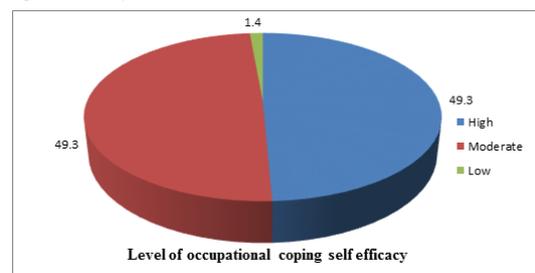


Table 1 Distribution of new graduate nurses as per level of burnout in emotional exhaustion.

PART-A EMOTIONAL EXHAUSTION

N=150

Level of burn out	Score	f(%)	Emotional exhaustion	Mean%
			Mean±SD	
Low	≤17	50 (33.3)	10.52±5.457	61.89
Moderate	18-29	89 (59.3)	23.71±3.159	81.76
High	30-42	11 (07.4)	33.50±4.0741	79.76

Maximum Score= 42

Mean±SD=20.58±8.315

Minimum Score= 00

Table 2 Distribution of new graduate nurses as per level of burnout in depersonalization.**PART-B DERPERSONALIZATION**

N=150

Level of burn out	Score	f(%)	Depersonalization	Mean%
			Mean ±SD	
Low	≤05	022(14.7)	2.77±1.066	55.4
Moderate	06-11	024(16.0)	9.00±1.859	81.81
High	12-42	104(69.3)	23.47±5.059	55.88

Minimum score= 00 Mean±SD= 18.18 ± 9.271

Maximum score= 42

Table 3 Distribution of new graduate nurses as per level of burnout in personal achievement.**PART-C PERSONAL ACHIEVEMENT**

N=150

Level of burn out	Score	f(%)	Personal achievement	Mean
			Mean±SD	
Low	40-48	49(32.7)	43.77±2.867	91.18
Moderate	34-39	17(11.3)	36.50±2.309	93.58
High	<33	84(56.0)	24.830±5.014	75.24

Maximum score= 48 Mean±SD= 32.03±9.379

Minimum score= 00

Table 4: Correlation of occupational coping self efficacy among new graduate nurses with burn out.

N=150

Section of burn out	Burn out Mean±SD	Occupational coping self efficacy	r	p
		Mean±SD		
Emotional exhaustion	20.58±8.315	29.86 ±4.572	-0.123	0.134 ^{NS}
Depersonalization	18.18 ± 9.271	29.86±4.572	-0.158	0.054 ^{NS}
Personal Achievement	32.03±9.379	29.86±4.572	0.251	0.002*

NS=Non significant p=>0.05

* Significant p= ≤ 0.05

Table 5: Rank order of contributing factors of burn out among new graduate nurses.

Sr. no.	Contributing factors	f (%)	Rank
1.	Duty workload	150(100)	1
2.	Sudden change in duty shift	150(100)	1
3.	Night duties	150(100)	1
4.	Sudden critical situations during duty hours	150(100)	1
5.	Communication with opposite gender	075(50.0)	2
6.	Continue shift without break	073(48.6)	3
7.	Organizational policies	071(47.0)	4
8.	Medical and surgical illness	036(24.0)	5
9.	Pervious psychiatric illness	028(18.6)	6
10.	Communication with seniors	015(10.0)	7
11.	Communication with patients and their relative	012(08.0)	8
12.	Relationship with supervisor	001(00.6)	9

Discussion

The present study was aimed to assess the occupational coping self efficacy, burn out and its contributing factors among new graduate nurses.

Objective 1: To assess the level of occupational coping self efficacy among the new graduate nurses.

In the present study out of 150 equal no. i.e. 74 (49.3%) new graduate nurses had high and moderate level of occupational coping self efficacy. The mean score in high occupational coping self efficacy was 33.37±2.631 and in moderate level of occupational coping self efficacy was 26.78±2.546. Only 2 (1.4%) new graduate nurses had low level of occupational coping self efficacy with mean score 13.50±3.535. The total mean occupational coping self efficacy score was 29.86 ± 4.572.

Similar study was conducted by **Kuru N and Kataras T (2015)** to

assess job satisfaction and perceived occupational coping self efficacy and results found high level of occupational coping self efficacy among 101 Greek Nurses. Mean occupational coping self- efficacy score was 29.7±3.55.⁵

Similar study was conducted by **Xiangzhi C, Qingguo L, Fanjie M, Xiaoxia J and Cailing Z (2015)** to assess the relationship between the occupational self efficacy, job stress and core competence. Results found high level of occupational coping self efficacy among 493 Chinese nurses. The mean score of occupational coping self efficacy score was 31.94±6.39.⁶

Objective 2: To assess the level of burn out among the new graduate nurses.

The finding explored that more than half 89 (59.3%) new graduate nurses had moderate burn out in emotional exhaustion with mean score 23.71±3.159 followed by 50 (33.3%) had low burn out with mean score 10.52±5.457 followed by 11 (7.4%) had high burn out with mean score 33.50±4.0741. Over all mean score of burn out in emotional exhaustion section was 20.58±8.315.

Out of 150 new graduate nurses 104 (69.3%) had high burn out in depersonalization with mean score of 23.47±5.059, 24 (16.0%) had moderate burn out with mean score 9.00±1.859 followed by 22 (14.7%) had low burn out with mean score 2.77±1.066. Over all mean score of burn out in depersonalization section was 18.18±9.271.

More than half [84 (56%)] new graduate nurses had high burn out in personal achievement with mean score 24.830±5.014 followed by 49 (32.7%) had low burn out with mean score 43.77±2.867 and 17 (11.3%) had moderate burn out with mean score was 36.50±2.309. Over all mean score of burn out in personal achievement was 32.03±9.379.

A Similar study was conducted by **Patrick K (2006)** to assess the burn out among 574 registered nurses in Victoria. Results revealed that Australian nurses had moderate burn out for emotional exhaustion with mean score 21.84±11.40 and had high burn out in section of depersonalization, mean score of 15.81±5.34 and moderate burn out with mean score 37.56±6.88 in personal achievement.⁷

The study findings were supported by **Muhammad W (2014)** who conducted a descriptive study on 175 nurses to assess the relationship between time pressure and burn out syndrome. The study revealed that nurses had moderate burn for emotional exhaustion with mean score 35.3±8.7 whereas had high burn out in section of depersonalization, mean score of 15.1±5.6 and moderate burn out with mean score 24.1±7.7 in personal achievement.⁸

Correlation of occupational coping self efficacy among new graduate nurses with burn out.

In present study there was negative correlation (r= - 0.123) between the emotional exhaustion and occupational coping self efficacy and the correlation between occupational coping self efficacy and depersonalization was (r= - 0.158) also negative both were statistically non-significant. A significant positive correlation (r = 0.251) was found between personal achievement and occupational coping self efficacy (p=0.002).

A similar study was conducted by **Masoom A, Masoumeh D, Lila D and Mojgan M M (2016)** to assess the relationship between self-efficacy and burnout among 151 nurses in Behbahan City, Iran, showed a significant correlation between the self-efficacy and three dimensions of burnout, emotional exhaustion (p < 0.001, r = -0.49), depersonalization (p < 0.001, r = -0.29), and lack of personal accomplishments (p=0.01, r=-0.26).⁹

Heather K, Laschinger S, Bangogni L & Consigilo (2015) conducted a study on authentic leadership over six areas of work life and occupational coping self efficacy of new graduate nurses. Results shows that there was negative correlation (r= - 0.31) between the emotional exhaustion and occupational coping self efficacy. It was found to be statistically non significant.²

Objective 3: To assess the contributing factors related to burn out among the new graduate nurses.

In present study result revealed that all the new graduate nurses [150

(100%)] reported duty workload, sudden change in duty shift, night duties and sudden critical situations as a contributing factors to burn out. From 150 new graduate nurses 71 (47%), 36 (24%), 28 (18.6%) reported organizational policies, own medical – surgical illness, previous psychiatric illness as contributing factor to burn out. A few number of [12 (8%)] staff nurses reported communication with patients and their relatives as contributing factor to burn out. Only 1 (0.6%) new graduate nurse report relationship with supervisor as a contributing factor to burn out.

The study finding are supported by **Gulavani A and Shinde M** who conducted a descriptive study on 100 nurses to assess occupational burn out and job satisfaction. There were 59% nurses reported workload as a contributing factor of burn out while 52% nurses reported conflict with supervisor as a contributing factor of burn out and 62% nurses reported hospital policy as a contributing factor of burn out.¹¹

Similarly, a study was conducted by **Raftopoulos V, Charalambous A and Michael T** to assess the factors associated with the burnout syndrome and fatigue in Cypriot nurses. Results revealed that 32.7% nurses reported night duties as a contributing factor of burn out while 55% nurses reported workload as a contributing factor of burn out.¹²

Conclusion:

The study concluded that majority of new graduate nurses had high and moderate level of occupational coping self efficacy. The level of burn out was found to be high in depersonalization and personal achievement section where as it was moderate in emotional exhaustion section of burn out. Duty workload, sudden change in duty shift, night duties and sudden critical situations were main contributing factors to burn out.

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Conflict of Interest:

NIL

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NIL

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