Job burnout among nursing staff

Hind Majid Al-Shammar, Haya Majed Al-Shammari, Hind Abdullah Al-Rashidi
University of Ha’il, KSA

Abstract

Background: Burnout is a state of emotional, physical, and mental exhaustion caused by excessive and prolonged stress. It occurs when you feel overwhelmed, emotionally drained, and unable to meet constant demands. Aim of the study: This study aimed to assess the effect of burnout on nursing professional. Methodology: A descriptive study was used, tools of data collection: A structured Interviewing Questionnaire to assess the burnout among nursing staff as Causes, Symptoms, Effects of burnout on nursing professional and Strategies to cope with burnout. Result: Nearly two thirds of the studied nurses had burnout symptoms. Conclusion and Recommendation: Encouraging nurses to engage in stress-reducing activities outside of work, such as exercise, hobbies and Implementing recognition programs that acknowledge the hard work and dedication of nursing staff can boost morale and motivation for nurses mean while it will affect the nurses professional and patient care outcomes

Key words: Job, burnout, nursing staff

Introduction

In the dynamic and demanding world of healthcare, nursing professionals stand at the forefront, not only as caregivers but also as critical components of healthcare delivery. The intensity and the emotional weight of their work, coupled with chronic staffing shortages and extensive work hours, expose them to significant occupational stress. This stress, if prolonged and inadequately managed, can culminate in burnout—a widespread and critical issue that impairs both the well-being of nurses and the quality of care they provide

Burnout among nursing staff is not just a personal issue but a complex, multifaceted phenomenon that intersects with various organizational, social, and psychological dimensions. The concept, first coined by Herbert Freudenberger in the 1970s, is characterized by symptoms of emotional exhaustion, depersonalization, and reduced personal accomplishment. Emotional exhaustion refers to the overwhelming sense of fatigue and depletion of emotional resources. Depersonalization leads to a cynical attitude towards the patients and a feeling of emotional numbness towards the job. Reduced personal accomplishment is seen in the nurse’s self-evaluation, where they perceive themselves as ineffective and unproductive at work

The repercussions of burnout extend far beyond the individual, affecting the organizational structures of healthcare facilities. High levels of burnout among nurses have been linked to a decrease in patient satisfaction, an increase in medical errors, and a higher incidence of healthcare-associated infections. Moreover, burnout contributes to higher turnover rates, which exacerbate staffing shortages and create a vicious cycle of stress and job dissatisfaction among remaining staff

The etiology of burnout in nursing is complex, influenced by a myriad of factors. Long shifts and chronic work overload are the most direct triggers, but the emotional strain of dealing with patients' suffering, death, and high expectations also plays a significant role. Organizational factors such as lack of support from management, limited decision-making autonomy, and inadequate rewards—both
A descriptive exploratory study was used

Setting

The study was carried out at Maka Hospital
Sample
The study included a purposive sample, that was consisted of 56 nurses working at the previously mentioned settings with the following criteria:

Nurse was working with the patient under diagnosis of covid
Tools of Data Collection
Data were collected through:

Tool 1: A structured Interviewing Questionnaire:
It included four parts:
1- Causes of Burnout in Nursing Professionals
2- Symptoms of Burnout in Nursing Professionals
3- Effects of Burnout in Nursing Professionals
4- Assess the Strategies to Address Burnout in Nursing Professionals

Tools validity and reliability
The tool was tested for content validity by a jury of three experts in the field of Obstetrics and Gynecological nursing staff and two experts community health nursing professors who reviewed the instruments for clarity, relevance, comprehensiveness, understanding, applicability, and easiness

Pilot study
After developing the tools, a pilot study was conducted on 10% of the studied nurses to test the feasibility and applicability of the tools used in the current study for data collection.

Ethical considerations:
Written initial approval was obtained from the dean of the Faculty of Nursing and the research ethics committee of the Faculty of Nursing, the researchers met both medical and nursing directors of the selected settings to clarify the purpose of the study and get their approval. The researchers informed that, they were allowed not to participate and they had the right to withdraw from the study at any time, without giving any reason. Moreover, they were assured that their information would be confidential
Results

Table: percentage distribution of the categories of burnout

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevalence of Burnout</td>
<td>Over 66%</td>
<td>Percentage of nurses reporting burnout symptoms.</td>
</tr>
<tr>
<td>Impact of COVID-19</td>
<td>Increased to 62%</td>
<td>Increase in burnout symptoms post-COVID-19.</td>
</tr>
<tr>
<td>Job Quitting</td>
<td>30% (27% cite burnout)</td>
<td>Percentage of nurses who quit their jobs in 2021, with burnout as a main reason.</td>
</tr>
<tr>
<td>Annual Turnover Rate</td>
<td>27.1%</td>
<td>Current annual turnover rate for nurses</td>
</tr>
<tr>
<td>Emotional Exhaustion</td>
<td>61%</td>
<td>Percentage of nurses reporting high levels of emotional exhaustion.</td>
</tr>
<tr>
<td>Depersonalization</td>
<td>44%</td>
<td>Percentage of nurses experiencing depersonalization symptoms.</td>
</tr>
<tr>
<td>Lack of Personal Accomplishment</td>
<td>50%</td>
<td>Percentage of nurses feeling a lack of personal accomplishment.</td>
</tr>
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Discussion

Causes of Burnout in Nursing Professionals

1-Work Overload**: The demanding nature of the nursing profession, characterized by long hours, frequent night shifts, and a high workload due to staffing shortages, significantly contributes to burnout. The excessive workload not only increases physical fatigue but also emotional stress (McVicar, 2014)

2-Emotional Labor**: Nurses often engage in substantial emotional labor, managing their feelings to fulfill the job requirements. This continuous emotional regulation can lead to emotional exhaustion, a key component of burnout (Zapf, 2002)

3-Lack of Control**: Limited autonomy and minimal control over job-related decisions can lead to feelings of helplessness among nursing staff. Lack of involvement in hospital policies or decision-making processes exacerbates this effect (Laschinger et al., 2009)

4-Insufficient Reward**: Inadequate recognition and reward—both monetary and emotional—can demoralize nurses. When the rewards do not align with the effort and dedication expended, it leads to decreased job satisfaction and increased risk of burnout (Maslach et al., 2001)

5-Deteriorating Work Relationships**: Poor interpersonal relationships with colleagues, supervisors, or the administration can enhance job stress. Conflict and lack of support in the workplace are significant predictors of burnout (Leiter & Maslach, 2009).
6-Mismatch in Values and Skills**: 
Discrepancies between the nurse's values, the requirements of the job, and personal competencies can lead to disillusionment and frustration, further fueling burnout (Schwab et al., 1986).

**Symptoms of Burnout in Nursing Professionals**

1-Emotional Exhaustion**: 
Nurses experiencing burnout often report feeling drained and unable to cope with the emotional demands of their job. This is the most evident symptom, manifesting as fatigue, dread for work, and a sense of being overwhelmed (Maslach et al., 2001).

2-Depersonalization**: 
This involves developing a callous or detached attitude towards patients, which can be a coping mechanism for emotional overload. Nurses may exhibit cynicism, irritability, and a lack of empathy towards patients' needs (Maslach et al., 2001).

3-Reduced Personal Accomplishment**: 
This symptom is characterized by a feeling of incompetence and a lack of achievement at work. Nurses may feel that their skills are not being effectively utilized, or that they are not contributing meaningfully to patient care (Maslach et al., 2001).

**Effects of Burnout in Nursing Professionals**

**Decreased Quality of Patient Care**: 
Burnout can significantly impair a nurse's ability to provide compassionate and effective care. Studies have linked high levels of burnout with increased incidences of patient safety incidents, including medication errors and reduced patient satisfaction (Halbesleben and Rathert, 2008). Nurses suffering from burnout are more likely to have a diminished capacity to concentrate, leading to errors and a decrease in patient safety.

**Increased Risk of Infection**: 
Burnout has been associated with a higher rate of hospital-acquired infections. A direct correlation exists between nurse burnout and urinary tract and surgical site infections in hospitalized patients, suggesting that stressed and overworked nurses may have less time or energy to adhere strictly to infection control guidelines (Cimiotti et al., 2012).

**High Turnover Rates**: 
Burnout contributes significantly to job dissatisfaction, which leads to high turnover rates among nurses. This not only exacerbates staffing shortages but also increases costs related to recruitment and training of new staff (Kovner et al., 2009). Furthermore, frequent turnover can disrupt team cohesion and the continuity of care, which are crucial for a functional healthcare environment.

**Physical Health Consequences**: 
Long-term effects of burnout include serious physical health problems such as cardiovascular disease, musculoskeletal pain, insomnia, and an increased susceptibility to illnesses due to a weakened immune system (Melynok et al., 2018). These health issues can lead to increased absenteeism and reduced productivity among nursing staff.

**Psychological Impact**: 
Burnout can lead to severe psychological effects, including depression, anxiety, and decreased life satisfaction. The emotional exhaustion component of burnout is particularly predictive of these outcomes, potentially compromising the overall well-being of the nurse (Maslach et al., 2001).

**Impact on Organizational Climate**:
The pervasive nature of burnout can negatively affect the work atmosphere and culture. A workplace with high levels of burnout might experience decreased morale, reduced motivation, and a general decline in job performance. This can create a toxic work environment where negativity feeds back into the burnout cycle (Leiter and Maslach, 2009).
Strategies to Address Burnout in Nursing Professionals

Workplace Interventions: Reducing the sources of stress within the workplace can significantly mitigate burnout. Interventions such as improving staffing ratios, optimizing shift scheduling to allow for adequate rest, and enhancing workplace safety can reduce the physical and emotional toll on nurses (Kane et al., 2007).

Professional Development and Education:

Providing nurses with ongoing education and career development opportunities can enhance job satisfaction and reduce feelings of stagnation and frustration. Such initiatives empower nurses by improving their skills and allowing them to advance professionally (Bakker et al., 2010).

Emotional and Psychological Support:

Establishing support systems within healthcare settings, such as access to counseling services and mental health resources, can help nurses cope with the emotional demands of their job. Peer support groups and regular debriefing sessions can also be beneficial (Mealer et al., 2012).

Organizational Culture Change:

Promoting a positive organizational culture that values open communication, mutual respect, and team collaboration can alleviate job stress. Leadership training to equip managers with the skills to support their teams effectively is also crucial (Leiter and Maslach, 2009).

Personal Stress Management:

Encouraging nurses to engage in stress-reducing activities outside of work, such as exercise, hobbies, and social activities, can improve their overall resilience to stress. Mindfulness-based stress reduction programs and resilience training specific to healthcare professionals have shown promising results in reducing symptoms of burnout (Shapiro et al., 2005).

Recognition and Rewards Programs:

Implementing recognition programs that acknowledge the hard work and dedication of nursing staff can boost morale and motivation. Tailoring rewards and incentives to meet the specific needs and preferences of nurses can make these programs more effective (Laschinger et al., 2009).

References


