

# Job Burnout and Psychological Wellbeing Among Female Nurses

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#### ABSTRACT

The present study aimed at assessing the levels of job burn out and psychological wellbeing among female nurses. Data were collected from 300 female nurses who are working in different hospitals in Kerala, India. The Psychological wellbeing scale and Job burn out scale were used to collect the data. Descriptive statistics was used. The result indicated that 63.3% of nurses are having job burn out in different levels and 36.7% of nurses are having no job burn out. 34% nurses are having above average psychological wellbeing, 30% are having average psychological wellbeing. The findings indicate the immediate need for implementing interventions to reduce job burn out and to enhance psychological wellbeing.

Keywords: Job burnout, Psychological wellbeing, Nurses.

# INTRODUCTION

Nursing service has a vital role in healthcare system, encompassing prevention of illness, promotion of health and compassionate care for the sick, disabled, and dying. Nurses are integral part to patient care and the value of their services was experienced by almost everyone during the Covid-19 Pandemic times. Since nursing job is multifaceted and the nature of their job is both emotionally and physically demanding, stressors are high on these professionals. Thus nursing profession becomes an increasingly stressful profession. (Lorber, 2020). Like other service professions, nurses are also having Job burn out and it affects their psychological wellbeing. (Lorber, 2020). Maslach and Jackson defined burn out in 1986 as "Burn out is a syndrome of emotional exhaustion, depersonalization, reduced personal accomplishments that can occur among individuals who do people work of some kind" (Maslach, 1986). Edelwich







and Brodsky defined burn out as "a process of increasing disillusionment, the progressive loss of idealism, energy, and purpose experienced by people in the helping professions as a result of conditions in their work" (Edelwich & Brodsky, 1980). "It's a slowly developing process that starts without warning and evolves almost unrecognized up to a particular point; suddenly and unexpectedly one feels exhausted, and one is not able to relate this devastating experience to any particular stressful event" (Etzion 1987).

According to Maslach, there are three dimensions of burnout, namely -Emotional exhaustion, depersonalization, and reduced personal accomplishment (Maslach, Shaufeli & Leiter, 2001). Emotionally exhausted nurses feel as if s/he has no control over the situations. It results in emotional fatigue. (Balamurugan & Divyabharathi, 2021). "Depersonalization manifests as negative and cynical behaviours or interacting with the colleagues in an impersonal manner" (Mealer et al. 2016). "The depersonalization represents the interpersonal dimension of burn out and indicates unresponsiveness to work". (Maslach & Goldberg, 1998). Reduced personal accomplishment is the tendency to evaluate one's work with recipients negatively (Pines & Aronson, 1988). There are different models of job burn out proposed by different experts, they are: Maslach model, Perlman and Hartman Burn out model, Meier Burn out model, Cherniss burn out model, Edelwich and Brodsky model, and Pines burn out model (Maslach, 2003). There are various causes for job burn out. They are mainly Environmental factors and Individual factors. Environmental factors are: job stress, role ambiguity, organizational process problems, job intensity, economic and social factors, the unfair rewarding system, tension due to space and transportation problems, work load, lack of control over job, undemocratic functioning of the organization, poor social support and injustice are some of the important factors. Individual factors are neuroticism, poor coping skills, lack of emotional control, anxiety, poor confidence, addictions etc. (Guven & Seizici, 2016). Consequences of job burn out will definitely affect both employee or employer or organization. In the employee level, it may lead to different Psychological and physiological symptoms. Psychological symptoms are: indifference, hopelessness, concentration and memory problems, decreased self-esteem, suicide thoughts and attempts, increased tendency to abuse substances. Physiological symptoms include fatigue, respiratory problems, skin diseases, weight loss, gastro intestinal issues, high blood pressure, palpitations etc (Edu-Valsania, Laguia & Moriano, 2022)



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Psychological wellbeing is "the subjective feeling of contentment, happiness, satisfaction with life's experiences and of one's role in the world of work, sense of achievement, utility, belongingness and no distress, dissatisfaction or worry etc (Diener, Suh, Lucas & Smith (1999) said that "psychological wellbeing is a broad construct, encompassing four specific and distinct components including (a) pleasant or positive wellbeing (joy, elation, happiness), (b) unpleasant affect or psychological distress (guilt, shame, sadness, anxiety, worry, anger, stress, etc, (c) life satisfaction (global evaluation of one's life) and (d) situation satisfaction (work, health, family etc.) (Sisodia & Choudhary, 2012,). According to Sisodia & Choudhary, there are five sub domains of psychological wellbeing - life satisfaction, efficiency, sociability, mental health and interpersonal relations.

# **REVIEW OF LITERATURE**

"The relationship of nurses' psychological wellbeing with their corona phobia and work – life balance during the Covid -19 pandemic: A cross sectional study" was a study and the researchers found that the psychological wellbeing and work-life balance were adversely affected during the Covid pandemic time. (Yayla & Eskici, 2021). "Quality of Hospital Nursing Work Life, psychological and subjective wellbeing" was study done by Blumberga & Olava (2024) and they found that work life quality is satisfactory. The psychological wellbeing of nurses was found to be in medium level. "Life satisfaction and its determinants: A survey on Iranian nurses' population" was a research done by Mirfarhadi, Moosavi & Tabari (2013) and the result indicated that 56% were dissatisfied. Burke, Koyuncu & Fiksenbaum (2010) conducted a research on "Burnout worker satisfaction and psychological well-being among nurses in Turkish hospitals". They found that staff nurses with higher levels of burn out reported less work outcomes and they reported having lower psychological wellbeing.

Joshi, Yakhmi, Sharma & Sood (2023) conducted a study on "prevalence of burn out among nursing staff: an experience from a tertiary care hospital in India". Results indicate that 28% have higher levels in personal accomplishment. 33% nurses have high score in depersonalization, 37% emotional exhaustion, 46% depersonalization and 25% of samples had personal accomplishment. Bhat & Tariq (2022) conducted a research on "the Impact of Job burn out on performance: A study among hospital employees of J&K, India". Among the three dimensions of job burn out, emotional exhaustion was found to be affecting job performance



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very much. "Reducing day level emotional exhaustion: the complementary role of high involvement work systems and engaging leadership" is an article published by Kilroy, Fu, Bosak, Hayes, Schaufeli (2021). The study was conducted on 97 employees in a pharmaceutical company. General survey and Diary survey for 5 working days were done to collect data. They found that High Involvement Work Systems (HIWS) reduced emotional exhaustion. They recommended high level of engaging leadership.

Galanis et al (2023) conducted a study on "Increased job burnout and reduced job satisfaction for nurses compared to other healthcare workers after the COVID-19 pandemic". They found that that 91.9% of nurses are having high levels of burnout and other healthcare professionals are having 79.9%. 61% of nurses reported low level of job satisfaction. They (Galanis et al 2023) did another study on "The influence of job burn out on quiet quitting among nurses: the mediating effect of job satisfaction". They reported that around 60% of nurses having job burn out.

"The relationship between burn out and job satisfaction among registered nurses at an academic hospital in Johannesburg, South Africa" is a study conducted by Bruce & Sangweni (2012) and they found that nurses reported low levels of job satisfaction. Their Emotional exhaustion was reported to be 75.8% and their depensionalization was found to be 71.5%. "Nurses' job burnout and its association with work environment, empowerment and psychological stress during Covid- 19 pandemic" was a study done by Sabei et al (2021). He found that 65.6% of nurses reported high level of burn out.

# Method

Aim: Aim of this study is to assess the levels of psychological wellbeing and job burn out among female nurses.

**Study design:** This study was conducted in hospital setting using descriptive study.

Sample size: 300 female nurses from five hospitals in Kerala, India were selected for the study

**Sampling method:** Purposive sampling method was used to select the samples

**Inclusion criteria** – registered female nurses who are currently working in different private hospitals and aged between 21-40



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**Exclusion criteria**- male nurses, Nurses who are undergoing or having past history of psychiatric treatment and nurses above the age of 40.

#### **Operational definition:**

**Psychological Wellbeing** is defined as "the subjective feeling of contentment, happiness, satisfaction with life's experiences and of one's role in the world of work, sense of achievement, utility, belongingness and no distress, dissatisfaction or worry" (Sisodia & Choudhary, 2012, p,3).

**Burnout:** is defined in ICD-11 as follows: "Burn-out is a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed. It is characterized by three dimensions: feelings of energy depletion or exhaustion; increased mental distance from one's job, or feelings of negativism or cynicism related to one's job; and reduced professional efficacy." (WHO, 2019)

#### Tools

# Following tools were used for the study

- 1. Psychological Well-Being Scale: developed by Sisodia and Chaudhary in 2012. the test-retest reliability is 0.87 and the validity of the scale is 0.94
- 2. Job Burnout Scale developed by Zaki Akhtar

Test-Retest reliability is 0.74 and the validity of the scale is 0.69.

# **Result and discussion**

# Levels of Burnout among Female Nurses

Table: 1 presents the Percentage of burnout among nurses

Grade	Frequency	Percentage	Percentage of Burnout
Extremely High	35	11.7	63.3
High	36	12.0	
Above Average	48	16.0	
Average/Moderate	71	23.7	
Below Average	67	22.3	36.7
Low	24	8.0	
Extremely Low	19	6.3	

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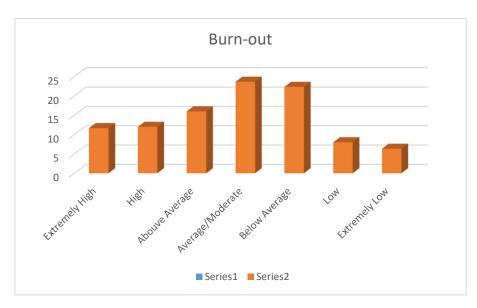
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Total 300	100.0	100
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From Table 1 among the 300 samples collected 35 nurses scored an extremely high levels of burn out. That is 11.7% of the nurses fall into the category of extremely high levels of burn out. 36 nurses i.e., 12% of the sample scored high levels of burn out. 16% of the sample i.e., 48 nurses scored above average level of job burn out and 23.7% of nurses (Nos: 71) scored an average or moderate level of burnout. The graphical representation of the grade level distribution of burn out among nurses are shown in Picutre 1.



Picture 1: presents the Diagram of the grade level of Burnout among female nurses

The picuture 2 shows the overall levels of burn out among the 300 sample. Among the total sample 63.4% of nurses have burnout and 36.7% of the sample scored below average to extremely low scores for burnout. That means they don't have the symptoms of burnout.

# Levels of Psychological Well being among female Nurses

From Table 2 among the 300 samples collected 11 nurses scored an extremely high levels of psychological wellbeing. That is only 3.7 % of the scored extremely high levels of psychological wellbeing. Out of the 300 samples 13.3% (40 nurses) fall into the category of high levels of psychological wellbeing. Above average level of psychological wellbeing is scored by 50 nurses. i.e., 16.7% of the sample scored above average levels of psychological





wellbeing. Over all 33.7% of the sample scored above average levels in psychological wellbeing.

Among the sample 29.7% (89 nurses) scored an Average/ moderate level of psychological wellbeing.

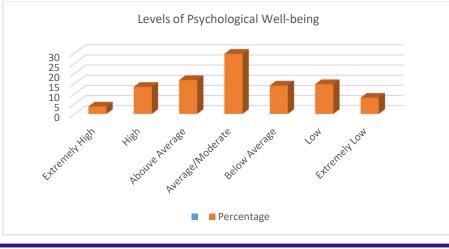
Overall, 36.7% of the nurses scored below average levels of psychological wellbeing. Out of this 36.7%, 42 nurses i.e., 14% scored below average level of psychological wellbeing and 44 nurses, i.e., 14.7% scored low level in psychological wellbeing. 8% of nurses (24 nos) scored an extremely low level in psychological wellbeing.

Psychological Well Being				
Grade	Percentage	Percentage of PW		
Extremely High	3.7			
High	13.3			
Above Average	16.7	34		
Average/Moderate	29.7	30		
Below Average	14.0			
Low	14.7			
Extremely Low	8.0	36		
Total	100.0			

Table 2 presents Percentage of Psychological Wellbeing among nurses

The graphical representation of the grade level distribution of psychological well-being among nurses are shown in Picutre 3.

Picture 3: Diagram of the grade level of Psychological Well-being among nurses



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#### Conclusion

The present study aimed at assessing the levels of job burn out and psychological wellbeing among female nurses. As per the result, Overall 33.7% of the sample scored above average levels in psychological wellbeing. It indicates that the female only one third of the nurses are having sound psychological wellbeing. Overall, 36.7% of the nurses scored below average levels of psychological wellbeing. It emphasizes the importance of introducing and implementing interventions to enhance psychological wellbeing. among the 300 samples collected, 11.7% of the nurses fall into the category of extremely high levels of burn out, 12% of the sample scored high levels of burn out, 16% of the sample scored above average level of job burn out and 23.7% of nurses (Nos: 71) scored an average or moderate level of burnout. Over all 63.3% nurses are having job burn out The findings go well with the findings of the previous researches done by Sabei et al (2021), Galanis et al (2023), Mirfarhadi, Moosavi & Tabari (2013) and Burke, Koyuncu & Fiksenbaum (2010). The findings urgently calls for intervention strategies.

Studies should be conducted in larger samples to know the prevalence of mental ill health and psychological wellbeing among nurses and to explore the causes of burn out and poor psychological wellbeing and the implications for patient safety and other important outcomes. It is also important to address the impact of poor wellbeing at the patient, hospital level in order to make a quality improvement. More intervention studies are to be explored with nurses, both at the individual and structural causes of stress. Longitudinal studies are important to find out the causality and the findings would strengthen the need for implementing effective interventions. Such findings also have potential to help concerned leaders to develop wellbeing strategies to improve the wellbeing of individual staff members.

#### Limitations of the study

- The sample size of the study is small (300). So the finding cannot be generalized to the whole population
- The samples were purposively selected from only five hospitals in Kerala, which limits the generalization of results.
- The samples were only female nurses, male samples are not included.



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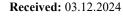
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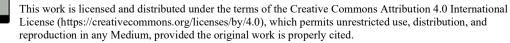
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