

BURNOUT SYNDROME OF NURSES IN INPATIENT UNITS

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ABSTRACT

Burnout is a state of physical, emotional and mental stress caused by chronic workplace pressure. Nurses are often confronted with stress-laden situations related to varied functions and extent of responsibilities causing the burnout syndrome. This study aims to describe the burnout level of inpatient nurses working in the (inpatient) units of a private hospital in West Java. This is a descriptive quantitative study conducted among all the 54 nurses in this hospital's inpatient units. The Maslach Burnout Inventory-Human Services Survey (MBI-HSS), a tool that measures three dimensions of the burnout syndrome: personal accomplishments, emotional exhaustion and depersonalization, was used. Data collected were analysed with the univariate analysis that described the respondents' characteristics and their responses on the MBI-HSS. Results showed that majority of the respondents are females (94.4%); more than half (61.1%) have a Bachelor of Nursing degree; 74.1% are in the 20-30 years age group; and 51.9% had more than one year of work experience. Moreover, the respondents rated depersonalization characterized by feelings of unreality and strangeness about one's own behaviour as the dimension that highly contributed to burnout (98%). Emotional exhaustion, the feelings of being emotionally overextended and exhausted by one's work was rated low (40.7%). Moreover, personal achievement that measures feelings of competence and successful achievement in one's work had a high 70.4%. The researchers recommend that administrators provide nursing staff with continuing education sessions on strategies to effectively cope with stressful situations in the workplace to counter the burnout syndrome.

Keywords: Burnout Syndrome, Inpatient Nurses, Maslach Burnout Inventory-Human Services Survey

INTRODUCTION

The World Health Organization defines burnout as a syndrome resulting from unsuccessfully managed chronic work-related stress. Burnout has three dominant symptoms such as feelings of energy exhaustion, feelings of negativism towards one's career, and low professional productivity (2019). Maslach and Leiter (2016) identified three key dimensions of a burnout response namely overwhelming exhaustion, feelings of cynicism and detachment from job, and ineffectiveness or lack of accomplishment.

In a study among nurses, Holdren et al., (2015) claim that there are four characteristics of burnout in nurses that can be analysed and these are individual, management, organization, and work. They assert that these characteristics can influence nurses' ability in taking care of patients, and that the consequence of the burnout syndrome leads to the rapid and increased turnover of nurses and low work performance. This finding is supported by a study conducted by Ersanti et al., (2018) where 53% of nurses in inpatients' units suffered from moderate burnout. They added that this was caused by nurses

consistently meeting the same patients and doing similar regular daily activities.

In another study, Guo, et. al., (2018) state that there are two main factors that contribute to burnout. The first is situational, a factor that includes work and organization characteristics like implementation of double shifts, overtime and workforce. The second is individual factor and includes personality characteristics and work attitudes. Yestiani, et. al. (2019) also state that burn out may be correlated with workloads. Dall'Ora, et. al. claim that longer work hours of more than 8 hours would lead to emotional exhaustion, high depersonalization and low level of self-achievement (2015). Furthermore, rotating work shifts and increasing managerial and clinical functions can lead nurses to experience burnout (Mudallal, et. al., 2017).

A new private hospital in the western part of Java has 54 nurses working in the inpatient units. Between August to December 2018, there were 13 turn-over among nurses in these units compared to only five in the outpatient unit. In the outpatient unit, nurses care for patients within a shorter period of time while nurses in inpatient wards have longer periods of

care, often complex and follow cyclical steps of the nursing process starting from assessment until evaluation. The rapid turn-over of inpatient nurses in this hospital and the complex nature of care provided to inpatients prompted the researchers to study their situation and describe their characteristics and level of burnout.

METHOD

This was a descriptive quantitative study that aimed to describe the burnout syndrome level of inpatient nurses in a private hospital in West Java. A letter was sent to the hospital administrator seeking approval before the study was done, and the purpose of the study was explained to prospective respondents. All the 54 nurses in the inpatient units agreed to join the study and signed the informed consent, and the Maslach Burnout Inventory-Human Services Survey (MBI-HSS) was distributed for them to fill out. The MBI-HSS is a tool consisting of 22 questions which cover three dimensions of burnout: personal accomplishments, emotional exhaustion and depersonalization. The questionnaires were retrieved between January to April 2019. Univariate analysis was used in analysing the data.

A limitation in this study is that it only describes the level of burnout among nurses

working in the inpatient units of one private hospital in western Java. Thus, the results cannot be generalised to other health institutions.

RESULTS

Table 1 shows the respondents' characteristics of gender, educational background, age, and work experience. Majority of the 54 respondents are females (94.4%) and young adults aging between 20-30 years old (74.1%) and 31-40 (20.3%) while only three (5.6%) belong to the 41-50 age bracket. More than half have work experience of more than one year (51.9%) while the rest have had one year or less (48.1%). Sixty-one percent finished a

Bachelor of Nursing degree while 38.9% have a Diploma in Nursing.

The table 2 presents the respondents' description of their varied levels of burnout based on the three dimensions: emotional exhaustion, depersonalization and personal accomplishment. Depersonalization (DP) was identified by 53 (98.1%) as the dimension that had the highest contribution to their burnout with one (1.9) rating it as moderate. It is noteworthy that personal accomplishment (PA) rated high with 70.4% and 18.5% as moderate and 11.1% as low. Emotional exhaustion (EE), the dimension that measures feelings of being emotionally overextended and exhausted by one's work only had 27.7% in the high scale and had 40.7% in the low scale.

Table 1. Respondents' Characteristics (n=54)

Gender	n	%
Male	3	5.6
Female	51	94.4
Educational Background		
Diploma	21	38.9
Bachelor	33	61.1
Age		
20-30	40	74.1
31-40	11	20.3
41-50	3	5.6
Work Experience		
≤ 1 year	26	48.1
>1 year	28	51.9

Table 2. Inpatient Nurses' Burnout Syndrome Level Based on the Three Dimensions (n=54)

Dimension	Low		Moderate		High		Total	
	n	%	n	%	n	%	n	%
Emotional Exhaustion	22	40.7	17	31.9	15	27.7	54	100
Depersonalization	0	0	1	1.9	53	98.1	54	100
Personal Accomplishment	6	11.1	10	18.5	38	70.4	54	100

Table 3. Nurses' Characteristics and the Dimension Emotional Exhaustion (n=54)

Characteristic		Emotional Exhaustion					
		Low		Moderate		High	
		n	%	n	%	n	%
Gender	Male	2	3.7	1	1.9	0	0
	Female	20	37	16	29.6	15	27.8
Age	20-30	15	27.8	13	24.1	12	22.2
	31-40	6	11.1	2	3.7	3	5.6
	41-50	1	1.9	2	3.7	0	0
Educational	Diploma	10	18.5	6	11.1	5	9.3
Background	Bachelor	12	22.2	11	20.4	10	18.5
Work	≤1 year	12	22.2	8	14.8	6	11.1
Experience	>1 year	10	18.5	9	16.7	9	16.7

Table 3 shows that of the 51 female nurses, 20 (37%) considered emotional exhaustion (EE) as having a low contribution to their burnout while 16 (29.6%) regarded it as moderate, and another 15 (27.8%) viewed it as a high contributor to their burnout. There is not a lot of difference on those aged 20-30 in their regard of EE, whereas for the 11 in the 31-40 age group, six (11.1%) described this dimension as having a low contribution to their burnout while three (5.6%) as high, and two (3.7%) as moderate. In the educational background, of the 33 (61%) who are holders of a bachelor's in nursing degree, 12 (22.2%) regarded it as low, and there is not much

difference between those who viewed it as having moderate (20.4%) and high (18.5%) contribution to burnout. There is also not a lot of variation in those who have only worked for less or equal to one year and those who have worked for more than one year, in that all have regarded emotional exhaustion as not a high contributor to burnout.

The table 4 indicates that majority of the female (50 or 92.5%) and all male (3 or 5.6%) nurses regarded depersonalization (DP) as having a high contribution to burnout.

Table 4. Inpatient Nurses' Characteristics and the Dimension Depersonalization (n=54)

Category		Depersonalization					
		Low		Moderate		High	
		n	%	n	%	n	%
Gender	Male	0	0	0	0	3	5.6
	female	0	0	1	1.9	50	92.5
Age	20-30	0	0	1	1.9	39	72.2
	31-40	0	0	0	0	11	20.4
	41-50	0	0	0	0	3	5.6
Educational Background	Diploma	0	0	1	1.9	20	37
	Bachelor	0	0	0	0	33	61.1
Work Experience	≤1 year	0	0	1	1.9	25	46.2
	>1 year	0	0	0	0	28	51.9

Most of those in the 20-30 age bracket (72.2%) also identified DP as the dimension that had a high input to their burnout, and all those in the 31-40 and 41-50 age group share a similar perspective. In the educational background, all those with the Bachelor of Nursing degree rated depersonalization as high and this same

result is shown by the diploma holders. This is repeated in the characteristic work experience where all those with more than a year of work experience (28 or 51.9%) and majority of those with less or equal to one year of work experience (25 or 46.2%) rated depersonalization as high.

Table 5. Inpatient Nurses' Characteristics and the Dimension Personal Accomplishment (n=54)

Characteristic		Personal Accomplishment					
		Low		Moderate		High	
		n	%	n	%	n	%
Gender	Male	0	0	1	1.9	2	3.7
	Female	6	11.1	9	16.7	36	66.6
Age	20-30	2	3.7	11	20.4	27	50
	31-40	3	5.5	0	0	8	14.8
	41-50	0	0	0	0	3	5.6
Educational Background	Diploma	3	5.5	5	9.3	13	24.1
	Bachelor	3	5.5	5	9.3	25	46.3
Work Experience	≤1 year	1	1.9	3	5.5	22	40.7
	>1 year	5	9.3	7	12.9	16	29.7

In table 5, majority of the nurses, both females (36 or 66.6%) and males (2 or 3.7%) rated personal achievement (PA) as high, that they experienced feelings of competence and having successfully

achieved their work. This same picture is seen in the age characteristic where 27 (50%) of those aged 20-30 rated PA as high, and all three in the 41-50 age group showed the same result. In educational

background, majority of both diploma and Bachelor of Nursing holders also rated PA as high. This same finding is also seen in the work experience characteristic.

DISCUSSION

The burnout syndrome can be measured using the MBI-HSS that has three dimensions namely emotional exhaustion (EE), personal accomplishment (PA) and depersonalization (DP). In this study, majority of the female and all three male inpatient nurses described depersonalization (DP) as the dimension with the highest contribution to their burnout (92.5%). This high number of females may be attributed to the variety of responsibilities in the workplace and household chores (Mariyanti & Citrawati, 2011; Sari, 2015). Moreover, most of those aged 20-30 (72.2%) and nurses with a degree in Bachelor in Nursing (61.1%) also rated DP as high.

This finding concurs with Awalia's study (2013) where nurses aged 20-29 years tend to make indefinite and weak decisions and have a low level of maturity. However, a study conducted by Al-Turki et al. (2010) has an opposite claim that the occurrence of burnout increases with age, so that the older ones are at greater risk of burnout. Mudallal, et. al., (2017) also claim that the

characteristics age and educational background are correlated with work satisfaction and contribution to work. These characteristics make younger people have a higher expectation of their job but may face a different reality in their daily work (Mariyanti & Citrawati, 2011). Work experience also reflects that DP is rated high in both those with less or equal to one year (46.2%) and those with over one year of work experience (51.9%). In contrast, one study by Al-Turki et al. (2010) state that nurses with shorter work experience have lower level of burnout. The respondents' high rating of DP suggests that they experienced an unfeeling and impersonal response toward their patients, the recipients of care, treatment, instruction, and nursing services in general.

As far as emotional exhaustion (EE) is concern, the low level had a 40.7% rating followed by moderate 31.9%, and high 27.7% (Table 1). A closer look at the four characteristics-gender, educational background, age, and work experience reveal that there is not much difference in their ratings of this dimension as low, moderate and high in this order (Table 3). This may imply that the nurses still experienced some degree of emotional exhaustion manifested in being

(emotionally) stretched and fatigued at work, but this dimension was not regarded as having a high input to burnout seen in depersonalization.

The dimension personal accomplishment (PA) however presents a different picture. This was rated high with 70.4%. In the four characteristics, PA was still rated as high followed by moderate and low (Table 5). This suggests that majority of the inpatient nurses had maintained feelings of competence and successfully achieved their work objectives. This may further suggest that their personal accomplishment was not diminished, and this dimension was not a problem for them.

CONCLUSION

Nurses worldwide are prone to burnout syndrome because of the heavy workload as well as high expectation to provide quality care to patients from internal and external sources. In this study, all the 54 nurses in the inpatient units of a private hospital in West Java rated depersonalization (DP) as the dimension that had the highest

contribution to burnout. Feelings of unreality and strangeness about one's behaviour are its characteristic manifestations. This was followed by emotional exhaustion (EE), feelings of being emotionally fatigued and drained by one's work which contributed to burnout but not as much as in depersonalization. Personal achievement (PA), feelings of competence and successfully achieving one's work however had a high rating implying that it was not a problem for these nurses, and that this did not contribute to their feelings of burnout.

The nature of nurses' work is varied, involves long work hours, and the magnitude of responsibility great. All these elements make nurses vulnerable to develop burnout syndrome. Because of this, the researchers highly recommend that administrators provide the nursing staff with continuing education sessions on strategies to effectively cope with chronic stressful workplace situations to counter burnout syndrome.

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