Burnout and Well-being: An Incremental Validity Study

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Abstract

Burnout is thought to arise from prolonged disparity between what one gives and receives especially at work (Maslach & Leiter, 1997). In this population study, we targeted all registered nurses working at Gozo General Hospital. A mixed-method, cross-sectional design was employed, measuring burnout, spirituality, personality, well-being, and demographic information. Results: Gozo professional nurses suffer from high levels of burnout, namely low on professional accomplishment, high on depersonalisation, and moderately to high emotional exhaustion. Qualitative data supported these findings. Results and implications were discussed.

Introduction

One of the most fulfilling jobs is saving human life in whatever stage it may entail. It is very rewarding to see someone get better and to know that you are part of that recovery. Saving lives may be a very fulfilling career, but it also comes with a price: it is one of the most stressful jobs out there. Stress is a complex reality and one component closely related to it is burnout.

Research consistently indicates a negative association between burnout and well-being of nurses, even in different cultures (Laschinger & Grau, 2012). High burnout among nurses correlated with a higher intent to quit or change
profession, illness-related absenteeism and workplace violence (Pienaar & Bester, 2011). Maslach and Leiter (1997), in their extensive research on burnout and their creation of the Maslach Burnout Inventory (MBI), explain it (burnout) in terms of three aspects: emotional exhaustion, depersonalisation, and reduction in perceived personal accomplishment. Although burnout may be a more complex reality, their research is definitely meaningful and noteworthy.

Variables that were found to increase burnout included younger age, poor professional experience, lower education, lack of job-fitness, intensive care nursing, nurse-to-patient ratios, personal ethical conflicts, and a mismatch between nurses’ expectations and the extent to which the work place is meeting them (Fearon, 2011). Aquilina (2003) found that studies on stress levels among Maltese nurses were a) limited, and b) not well addressed by the authorities. Nurses required assistance but felt they had nowhere to turn to.

That negative life events impact one’s well-being is well recorded. However what could result in a deficit to one’s holistic well-being can also serve as a predictor of post-traumatic growth. Galea (2009, 2012) found that certain variables, such as one’s personality, resilience, spirituality and social support, amongst others, could help predict growth and well-being if factored in.

Given the lack of relevant studies on this reality in Malta, this study could serve to further investigate: (a) incidence of burnout among Maltese nurses, (b) clarify the relationships among key variables such as burnout, holistic well-being, and other relevant variables, and (c) direct future research resulting in practical and valid suggestions for better work practices and quality of life.

**Procedure**

Inclusion criteria for this study included Maltese nurses working at Gozo hospital. Response rate was 78%. The study had all clearance by the relevant authorities. This study was on a voluntary and confidential basis. A pilot study was conducted prior to the study.

**Methods**

Participants (65% female) responded to the mixed-method study, including a questionnaire and open-ended questions, which asked participants on strengths perceived at work and recommendations to ameliorate their caring profession.

**Measures**

Four professional measures were utilised in this study, namely (a) the Satisfaction with Life Scale (Diener, Emmons, Larsen and Griffin, 1985) which measures cognitive well-being; (b) the Maslach Burnout Inventory (Maslach, Jackson, and Leiter, 1996), measuring burnout from three dimensions: emotional exhaustion, depersonalization, and personal accomplishment; (c) Faith Maturity Scale (Benson, Donahue, and Erickson, 1993), which measures a holistic sense of focus in life, namely the integration of faith and love; and (d) the Big Five Inventory (Donahue & Kentle, 1991), which is a personality measure which encompasses the Five Factor Model.

**Results**

The author conducted scientific correlation analysis and found that burnout was strongly correlated with personal accomplishment, emotional exhaustion and depersonalisation.

High levels of burnout were found, as hypothesized. It is indicative and worrying that 94% of nurses indicated low personal accomplishment, 88% scored in the high risk range of depersonalisation, and three in ten nurses scored high on emotional exhaustion, while half of the sample scored in the moderate range (reflecting fatigue or stress).

The second hypothesis was also supported. As expected burnout negatively correlated with wellbeing, which is consistent with similar results in research elsewhere.

A qualitative section was also included. This asked participants about their strengths they experienced in their employment and what
recommendations they had that would further their job satisfaction. The majority pointed towards two general suggestions:
a) enhanced physical environment of the hospital, and
b) a better professional moral environment.

Discussion

First and foremost, the relevance of this study lies in the fact that this was a population study, and the first such study among Gozo nurses. Considering the high expectations and demands on nurses, such studies are commendable and required for a win-win result of all stake holders. This study found that Gozo Hospital professional nurses suffer from high levels of burnout. The majority scored: a) low on professional accomplishment, low feelings of competence, b) very high on depersonalisation (impersonal towards patients), and c) moderate to high on emotional exhaustion (over-stretched, over extended and exhausted by work).

Reaching one’s breaking point through job-related issues is definitely a serious component that any humane and responsible authority should take heed to immediately. Such serious considerations must be factored in, when considering the satisfaction of workers, to ensure they become more effective, efficient, and fulfilled through their jobs.

Recommendations include a combination of both positive emotion-focused and problem-focused strategies (Fearon & Nicol, 2011). Nursing managers should explore ways of reducing job stress and also techniques for building social support networks at the hospital. Three reasons could be suggested for this: first, to protect nurses against stress; secondly, to protect and ascertain better service to patients, and finally, to lessen the concerns and worries of patients’ relatives.

Nursing managers should explore ways of reducing job stress and techniques for building support networks at the hospital (Fearon & Nicol, 2011). Further qualitative results pointed at two key growing edges. First, their physical environment requires immediate and comprehensive attention. Good training is not enough. An appropriate physical environment is just as critical for their
humane work. Secondly, the so-called moral environment of their work place, whereby better communication with management, more consultation on issues affecting them, less red tape and interferences by third parties (especially patients’ relatives) were called for.

Results from the qualitative section resonate well with Duggleby, Cooper & Penz (2009) findings. They indicated hope as being an important concept in the work of such professionals. Furthermore, supportive relationships, adequate resources, encouragement by others and improving perceptions of self-efficacy could also foster hope. Research indicates that nurses can actively take part in the development of their own resilience which will help reduce the risks of burnout (Manzano & Ayala, 2012). Supportive relationships, adequate resources, encouragement by others and improving perceptions of self-efficacy were found to increase hope, an element so important in resilience (Duggleby, et al., 2009).

Implications for Research

As indicated elsewhere, research in burnout must factor in other relevant variables. As suggested in this research, future studies need to explore the potential interaction between burnout, personality and wellbeing for the holistic wellbeing of individuals.

To surmise, job-related stress and burnout was found prevalent among Maltese professional nurses working at Gozo hospital. Consistent with studies elsewhere, this reality negatively correlates with well-being and thus is destructive to professional nurses’ wellbeing. Indirectly this affects patients’ health and treatment prognosis.

This study therefore calls for a serious reflection and vigorous investigation of key areas required to understand this realm. Listening more to nurses’ concerns is key in this process.

References


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