

## FACTORS CONTRIBUTING TO BURNOUT AMONG NURSES WORKING IN EMERGENCY ROOMS

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### **ABSTRACT:**

#### **OBJECTIVES:**

*To assess the burnout among nurses working in emergency rooms of public sector hospitals and contributing factors to burnout among them.*

#### **METHODOLOGY:**

*The study included nurses (N=130) having experience of two or more years in emergency rooms, in public sector hospitals of Rawalpindi/Islamabad and Lahore. Data was collected with the help of a self-structured questionnaire. Questionnaire was validated by sample pilot study of 20 nurses and with consultancy of statistician.*

#### **RESULTS:**

*The study revealed that out of 130 participant nurses, 126 (92.92%) were found to be suffering from burnout. Among them 86 (66.15%) had mild burnout and 40 (30.76%) were with moderate burnout. Among contributory factors of burnout, work related burnout was significantly higher as compared to personal and client related burnout.*

#### **CONCLUSION:**

*Nurses working in emergency rooms showed positive results of having burnout especially work related.*

**KEYWORDS:** Nurse, Burnout, Emergency Room (ER), Stress, Duties

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### **INTRODUCTION:**

Nursing is a demanding career that involves

extensive commitment, time, and energy regarding patient care, management, and service deliveries. The unpredictable working conditions by managing critical patients with different diseases, injuries, psychological conditions often lead to burnout<sup>1</sup>. It is characterized by depletion of energies, disappointment, doubts, depersonalization, and frustration leading to loss of purpose, ideas, and energy<sup>2</sup>. The person may develop symptoms of stress including backaches, indigestion, and lower resistance. Burnout also leads to low morale, family difficulties and social problems<sup>3</sup>. Fatigue, headaches, irritability, eating issues, insomnia, emotional

unpredictability and inflexibility and relation with individuals are some prominent clinical symptoms<sup>4</sup>. High levels of burnout can negatively affect patients' satisfaction, work environment and also have an adverse influence on the performance of the individuals<sup>5,6</sup>. Burnout also disturbs the life quality of employees with higher interpersonal conflicts and antagonism leading to excessive absenteeism; high turnover rate and increase in health care cost<sup>7</sup>. The factors related to burnout have three dimensions including socio-demographic factors, work-related factors, and personal risk factors. Personal characteristics like hardiness, coping strategies, and social support can mitigate the burnout. Stress and burnout are somehow related to each other. Acute emotive response and relational stressors occurring at profession can cause it<sup>9</sup>. Nurses performing in the emergency rooms provide intensive care that necessitates the quick decision-making ability, independent working and subdues sentiments to manage job responsibilities. Moreover, trivial autonomy and less feedback may lead to the development of burnout. Nurses performing duties in risky sectors including emergency and critical care are most susceptible to burnout due to patient requirements and undefined consequences<sup>10</sup>. Many researchers have studied burnout in nurses, and most of these studies concluded that burnout scores are considerably greater among hospital nurses<sup>11,12</sup>. Studies conducted on burnout in nurses of Pakistan are insufficient. Recently, a study was carried out regarding burn out among the pediatric surgeons of Pakistan<sup>13</sup> but there are limited studies on the factors contributing to burnout in nurses working in emergency rooms of public sector hospitals in Pakistan.

## METHODOLOGY:

This was an analytical cross sectional study. In this study, sample was based on 8 hospitals, total 150 performas were distributed out of which the data was collected from nurses (N=130) working in emergency room through self-administered questionnaire. A total of 130 responses were approached through purposive sampling technique with 8% margin of error. Sample size determination was done according to Health studies 2.0.21 WHO version i.e.  $n = Z^2 P(1-P) / d^2$ . Ethical

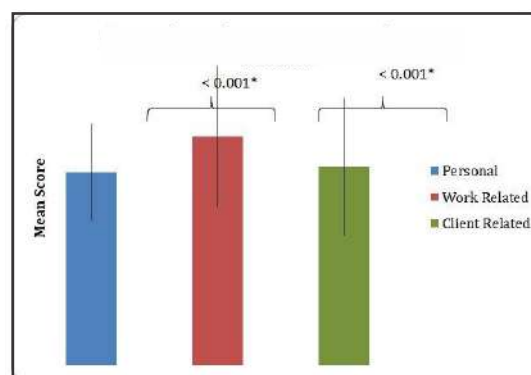
approval was taken from ethical review committee of University of Health Sciences Lahore, Punjab, Pakistan. The questionnaire comprised of two parts. The first part was the demographic profile; including marital status, gender, age, educational level, years of experience, title of work, employment sector and duty shift and rotation. Second part of the questionnaire was comprised of 19 questions related to burnout. The score ranges 25-50%, 50-75%, and score >75% would be considered as mild, moderate, and severe burnout respectively. A pilot study was conducted on 20 participants. Cronbach's Alpha was (.845) which was greater than 0.7. It indicated that instrument was reliable for data collection, to assess level of burnout among participants. Data entered and analyzed, through SPSS IBM version 21.

## RESULTS:

**Table 1: Grading Criteria for the Burnout Category & Results**

Burnout	Frequencies
No Burnout	04
Mild Burnout	86
Moderate Burnout	40
Severe Burnout	-
Total	130

Note: Here total questions were 19 and each having 5 marks, then total score rate is 95



**Figure 1: Comparison of Mean Score among Burnout Domains**

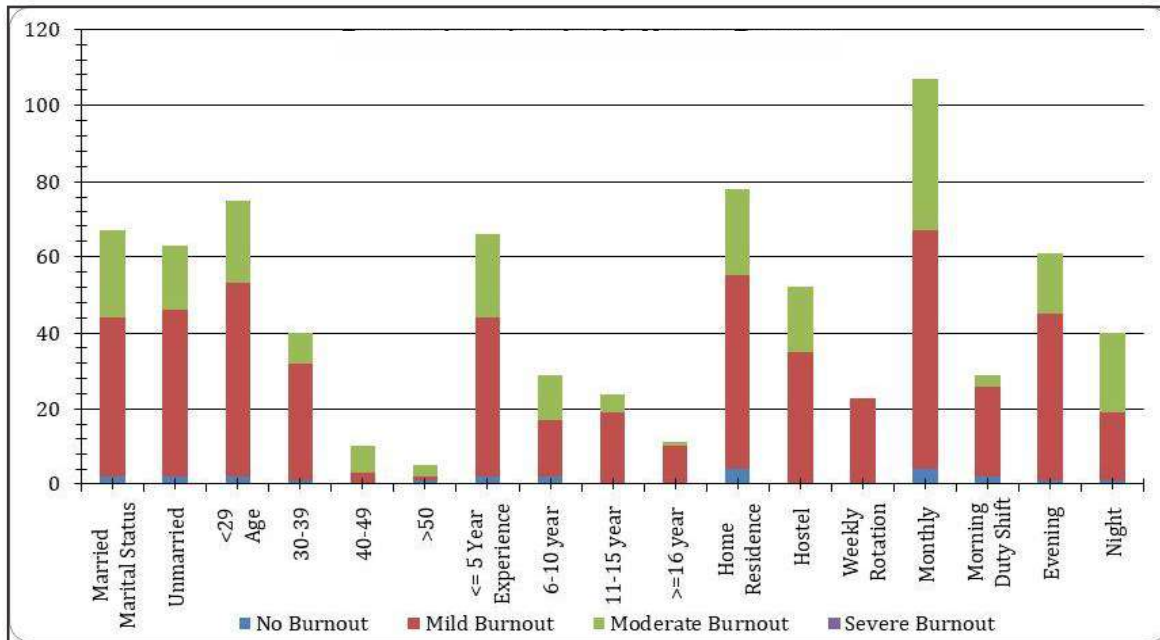


Figure 2: Factors Associated with Nurses Burnout

## DISCUSSION:

In this study, burnout was assessed among nurses working in emergency rooms. Out of 130 respondents, 92% participants were analyzed as individuals suffering from burnout. 86 participants were categorized as having mild burnout (68.25%) and 40 (31.74%) were with moderate burnout. The results were congruent to the findings which showed that emergency nurses have higher level of burnout as compared to nurses working in medical units<sup>14</sup>. Another study concluded the same results that nurses were found vulnerable to burnout, but emergency room nurses were more prone to burnout<sup>15</sup>. Age of nurses had significant relationship with personal burnout and work related burnout in our study. The study results of Kelly et al agreed to our results that younger age and working in high complex or critical areas are predisposing factors for burnout<sup>16</sup>. Other studies also revealed similar results that nurses having age less than 35 experienced higher levels of burnout<sup>17</sup>. In this study, experience has an insignificant relationship with personal, work-related burnout and the client related burnout. Another study noted that years of work and the rank of the nurse in the organization have positive association with the level of burnout<sup>18</sup>. The mean personal and work related burnout scored were higher in

married as compared to single. Marital status is correlated with client related burnout. Another study showed similar results and concluded that married nurses have higher levels of burnout compared to single nurses<sup>19</sup>. But it is contradicted by another study; researcher seems that there is no distinguishable difference in burnout among married and unmarried nurses<sup>19</sup>. Whereas Kelly et al in 2011 proposed that among nurses being single and childless are predisposing factors for burnout<sup>16</sup>. No relationship of type of residence was found with personal burnout, work related burnout and client related burnout in this study. Whereas, a study finds out that nurses having difficulty in childcare and in doing house chores, health problems of the nurse herself or her children, economic hardships and difficulties encountered in transportation are factors that attribute to burnout<sup>20</sup>. Duty shift has significant relationship with personal burnout, work-related burnout and client related burnout in this study. Other findings confirmed that nurses working in emergency have more burnout especially those who worked in long shifts or night shifts as compared to those at day shifts<sup>20</sup>. Another study on burnout concluded that insufficient opportunities to rest and regenerate depleted

energy aggravate the exhausting impact of demand/resource imbalances<sup>21</sup>. Therefore, burnout may be caused by above-mentioned reasons. It can be alleviated by eliminating and controlling of these contributing factors of burnout.

## CONCLUSION:

Emergency room nurses have mild to moderate burnout and work related factors are significantly related to burnout. There is also significant relationship of age, experience, duty shift and marital status with level of burnout.

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