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Occupational Burnout among Health Workers in Government Sector

Dr.K.M.Ashifa

Asst.Professor in Social Work Faculty of Health Science Istanbul Gelisim University Istanbul-Turkey

Abstract

Burnout is called the reduction of fuel to the substance to nothing through use or combustion. The individual who has the symptoms of burnout will be less productive at work, especially when it comes to interaction with others. The leading causes of burnout are lack of resources to work effectively, no clarity in work to be done, monotonous work, imbalance in work and personal life, not interested in the work done, and no quality in the work environment. The symptoms include problems in decision-making ability, wrong attitude, the difference in behavior, apathy, depression, not cooperation, and aggressiveness. The researcher examined the burnout level between these nurses in this report. The study found that the nurses were at a very high level of burnout, which in turn affect their productivity, efficiency, and ability to work. Moreover, these factors affecting their personal life physically, mentally, and emotionally.

Keywords: Burnout, Primary Health centers, Nurses

Introduction

Nursing is considered a noble profession, and nurses are considered as noble people. They are also said to be the angels of God. They feel pride in their profession since they are said to be the caretakers of humans. However, the nurses work for prolonged hours of work, which causes a particular type of stress on them. The individual feels exhausted and stressed in their work, and they feel exhausted physically, mentally, and emotionally is called occupational burnout (Melinda Smith, Jeanne Segal, & Lawrence Robinson, 2019). It will make the individual unable to engage in their works. It creates a difference between who the individual is and what the individual has to do. The individual who has the symptoms of burnout will be less capable of work 'especially when it comes to interaction with others. The leading causes of burnout are lack of resources to work effectively, no clarity in work to be done, monotonous work, imbalance in work and personal life, not interested in the work done, and no quality in the work environment(Brown, LW & Quick, J.C., 2013). The symptoms include problems in decision-making ability, wrong attitude, the difference in behavior, apathy, depression, not cooperation, and aggressiveness. Physically the individual would experience sleeplessness, insomnia, anxiety, poor concentration, and low productivity. The burnout in the medical profession is considered nowadays increased. Hence the researcher has taken up this study to analyze the occupational burnout of nurses working in primary health centersand assess the level of burnout among these nurses.

Review of Literature

The study wastaken up to analyze the level of occupational burnout among nurses in primary health centers. Studies related to burnout has been done before by eminent researchers. With the growing number of women in the workplace, stress is becoming more and more critical (Hallman T, Thomsson H, Burell G, Lisspers J, & Setterlind S, 2003). The distinction made between women regarding burnout and coping skills and related to the educational level effect. Women with coronary heart disease showed a higher burnout level and had the highest scores showing a lack of coping, suggesting reduced coping skills. Differences in self-control stress management and distancing of emotions are discussed (Ibid). The relationship between the individual (i.e., internal factors) and the environment (i.e., external factor) was the principal cause of stress and burnout (Amir Mohammad Shahsavarani, Esfandiar Azad Marz, & Maryam Hakimi Kalkhoran, 2015). The level of burnout in nursing academicians in Turkey investigated, and the result shows that the most significant predictor of emotional exhaustion was work satisfaction in a nursing education setting(Cam O, 2001).

Using the Maslach Burnout Inventory, Tselebis A, Moulou A, & Ilias I (2001) assessed the relationship between burnout, depression, and sense of coherence. It was hypothesized that the degree of continuity makes problems either susceptible or immune to both depression and burnout. This article suggests that the intervention by trained personnel to assist nurses with burnout could be an attractive choice in the hospital environment.

Need and Significance of the Study

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The global problem of health has led to considering the nursing profession an essential one. The hospitals have started to function 24/7, which has kept nurses busy for a much longer time. The prolonged working hours and the lack of resources have added to the burnout of the nurses. In most of the primary health centers in Tamil Nadu, the resources are not available for the nurses to work in an excellent working condition. Most of the time, their concerns or requests are not addressed. This creates a state of burnout to many since it lacks job satisfaction. Hence, the researcher has made attempts to analyze the level of occupational burnout among nurses working in a primary health center. Through this study, the researcher analyzed the level to which the nurses have occupational burnout, and on this basis, the researcher can suggest suitable measures to avoidburnout.

Methodology

The main aim of the research is to analyze the level of burnout among nurses in Primary Health centers under the Rajapalyam municipality. The researcher used a descriptive design and survey method to collect data. Level of occupational burnout and job satisfaction were assessed in this study. The researcher randomly selected 278 nurses to form primary health centers in Rajapalayam municipality, Tamilnadu, India.

Result and Discussion

Data review in research work can be used as an essential phase and cornerstone of the study. The next logical step is to evaluate and interpret data to arrive at an analytical solution to the problem after data collection use applicable methods and techniques. The data analysis for this work was carried out quantitatively using descriptive statistics

Table 1: Causes of Occupational Burnout

Causes of Burnout	highly disagree	Disagree	neutral	highly agree	Agree
Suffering from a rotating shift	5	18.33	5	38.33	33.33
Lack of leisure time		6.61	21.67	31.67	40
Lacking management skills	5	8.33	21.67	36.67	28.33
Lacking respect for the profession	6.67	16.67	20	23.33	33.33
Lack of relationship from family	5	18.33	5	36.66	35
Patients with care	5	18.33	5	38.33	33.33
Demotivation from family		6.67	21.67	31.67	40
Struggling personal and professional life	5	8.33	21.67	36.67	28.33
Need more supportive from management	6.67	16.67	20	23.33	33.33
Lack of professional support	3.33	25	0	28.33	43.33
Vacancies to be filled	6.67	16.67	18.33	25	33.33
More recognition	5	18.33	5	38.33	33.33
Isolation from family and friends	25	18.33	5	18.33	33.33
Need support and motivation		16.67	21.67	41.67	40
Workplace exhaustion		6.67	21.67	31.67	40
Unreliable memory	5	8.33	23.33	35	28.33
Irritable or emotional with a short fuse	6.67	16.67	18.33	23.33	35
Exhaust morning the thought of another day work	6.67	16.67	18.33	25	33.33
Worn out at the end of the day.	5	18.33	6.67	32.67	37.33
Susceptible to illness	5	18.33	36.66	5	35

Table 1 showed the major causes of occupational burn out among the nurses in primary health centers in Tamil Nadu. The majority of respondents agree that 38.3 percent suffer from rotating shifts. Forty percent

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of the respondents feel that they do not have enough leisure time. The majority of the respondents have a lack of a supportive relationship. Thirty-five percent highly agree to the statement that there is not enough supportive relationship from family. The majority of the respondents, i.e., 33.3 percent, highly agree that they cannot deal with patients with care like before. Forty percent of the respondents highly agree that family often demotivates them. The majority of the respondents has agreed that they do struggle between personal and professional life. The 33.3 percent highly agree that there are still staffing and vacancies to be filled. The unfilled vacancies are the main cause of the overload of work, which in turn will increase the stress on the existing staff of the health center. 38.3 percent of the respondents agree. One of the results of burnout is isolation. Forty percent highly agree that they feel isolated from family and friends. 41.6 percent have agreed that they are in need more support and motivation. Due to burnout, the individual will feel that they cannot do any work further. That about half of the respondents (40 percent) have highly agreed that they cannot take it anymore. Thirty-five percent of the respondents agree that they experience an unreliable memory. The majority of the respondents highly agree that they easily get irritable and emotional. Thirty-seven percent highly agree, and 32.6 percent agree that they are worn out at the end of the day. They would be feeling exhausted and low on the day end. Out of all the analysis, it can be said that the nurses are at a very high level of burnout, which will, in turn, affect their productivity, efficiency, and abilitytowork, Also, all these together will affect the person in their personal life physically, mentally, and emotionally.

Conclusion

In the face of unreasonable demands, burnout, a condition of concern to both individuals and organizations, is characterized by rising capacity, strength, and resources. Regardless of both the stressful complexity of their work and the demand of patients, nurses are more vulnerable to developing burnout. The purpose of this study was to examine burnout among nurses employed in primary health centers. Nurses are prone to adverse conditions regularly, not just in the workplace but also in terms of the medical care of the patients. Research has shown that nurses have a high incidence of work-related fatigue in addition to these job characteristics. Considering that stress and burnout are a reality in nursing and that the literature has not yet provided a good description of the factors. The researcher, after her elaborate study, has concluded that moderate levels of occupational burnout are prevailing among the respondents. This moderate level of burnout prevailing among nurses can be channeled in the right direction. The authority responsible for the employees of such medical professionals should adhere to the norms of giving a satisfied and quality work environment. They need to reward in the right way. The nurses should be given working hours as per the prescribed norms. Holidays and leaves as per rule can be provided. Also, there should be a mechanism to address the concerns and grievances of individuals working in the nursing profession. The researcher has offered some implementable suggestions which, if implemented, would go a long way in bettering the lives of nurses and patientsalike.

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