

An Exploratory Study To Assess The Level Of Burnout Syndrome And Its Factors Among Nurses In Selected Hospitals Of District Faridkot, Punjab With A View To Develop Information Booklet

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Abstract

Introduction: Burnout was original introduced by Freudenberg in 1974. Burnout syndrome solemn effect of fatigue, enervation is both psychological and physical. Various factors like, lack of concentration, overburden of work, contribute to raise the level of burnout syndrome.

Aim: The aim of the study was to assess the level of burnout syndrome and its factors among nurses in selected hospitals of district Faridkot, Punjab with a view to develop information booklet.

Methods: The Exploratory research design was used and 200 nurses working in GGSMC&H of District Faridkot, Punjab were selected. Total enumeration technique was used for data collection, Oldenburg burnout inventory and self-structured checklist was used for assess the level of burnout syndrome and its factors. Data was collected by self-reported interview and analyzed by descriptive and inferential statistics by using SPSS 21 version.

Results: The findings of the study revealed that out of 200 nurses 5 (2.5%) nurses had high level, 156 (78.0%) had medium level and 39 (19.5%) nurses had low level of burnout syndrome. In the findings of factors responsible for burnout syndrome 142 (71%) nurses had organizational factors, 84 (42%) nurses had physical and psychological factors, 40 (20%) nurses had lack of self-realization factors, 32 (15.5%) nurses had self-detachment factors were responsible.

Conclusion: This study concluded that maximum nurses had medium level of burnout syndrome. Out of 4 types of factors most of nurses had organizational factors responsible for increasing the level of burnout syndrome. Information booklet on burnout syndrome and its management would help them to decrease the level of burnout syndrome.

Keywords: Level, Burnout syndrome, Factors, Nurses, Information Booklet

1. Introduction

A nurse is a professional and trained person who gives care to sick or wounded people. Nursing is a sensitive profession and it is most affected by stress problems that arise from the heavy work schedule and administrative, personal workload. Burnout syndrome is a common problem among nurses working who deal with the multiple patients with healthcare demands that increases exhaustion stress, anxiety in nurses in the medical administration work, time pressure, double shifts and medical workload. Burnout syndrome is defined as the effect of fatigue, exhaustion in both mental and physical which develops the concept of self- negativity, a lack of concentration, lack of negative behaviour. A cross-sectional study was explored at national level in June 2021 on the prevalence of symptoms of burnout syndrome among nurses working in Tertiary care centre of Central India. 159 staff nurses working in a tertiary care centre were interviewed by using Copenhagen Burnout Inventory questionnaire. Approximately 24.52% showed scores that indicate burnout syndrome, and 48.42% showed personal burnout, 42.76% had work-related burnout, and 8.17% had client-related burnout.

2. Material and Methods

A quantitative research approach and exploratory research design was used to assess the level of burnout syndrome and its factors among nurses. A sample size of 200 was selected by total enumeration technique and after obtaining permission the final study was conducted from 28 March 2022 to 12 April 2022 with the help of Oldenburg burnout inventory and self-structured checklist in GGSMC&H, Faridkot, Punjab.

3. Procedure for data collection

The data collection was carried out in 28 March 2022 to 12 April 2022. Formal permission was obtained from the Principal of University College of Nursing, Faridkot and from the Medical Superintendent of GGSMC&H, Faridkot. Total enumeration sample technique was used. The researcher introduced herself to the subjects and then explained about the purpose of gathering information, importance and the nature of the study. A written informed consent was taken and confidentiality of data was assured. Both the tool was given to the

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nurses to assess their socio-demographic variables, level of burnout syndrome and its factors among nurses working GGSMC&H hospital with the help of Oldenburg burnout inventory and self-structured checklist. To fill the tool, each nurse took 10-20 mints. Data collected from subjects was coded and fed in excel for further analysis.

3. Results and Discussion

Table. 1: Frequency and percentage distribution of subjects as per their socio demographic characteristics: N =200

Sr. No.	Sociodemographic characteristics	f	%
1.	Age		
	a) 20-30 year	93	46.5
	b) 31-40 year	85	42.5
	c) 41-50 year	22	11.0
	d) 51-60 year	0	0
2.	Gender		
	a) Male	30	15.0
	b) Female	170	85.0
	c) Other	0	0
3.	Educational status		
	a) G.N.M	68	34.0
	b) B.Sc. Nursing or Post Basic B.Sc. Nursing	128	64.0
	c) M.Sc. Nursing and Above		
		4	2.0
4.	Marital Status		
	a) Single	59	29.0
	b) Married	137	68.5
	c) Divorced	4	2.0
5.	Experience		
	a) 0-5 years	101	50.5
	b) 6-10 years	66	33.0
	c) 11-15 years	28	14.0
	d) Above 15 years	5	2.5
6.	Type of family		
	a) Nuclear	88	44.0
	b) Joint family	108	54.0
_	c) Extended	4	2.0
7.	Distance from home	140	EG E
	a) 1-10 km b) 11-20 km	113 52	56.5 26.0
	c) 21-30 km	13	6.5
	c) 21-30 km d) 31 km and above	31	0.5 11
8.	Type of accommodation	01	11
0.	a) Home		
	b) PG/Rented	146	73.0
	c) Hostel	52	26.0
	2, 1.00.0.	2	1.0
9.	Family support system		
	a) Good	126	63.0
	b) Normal	70	35.0
	c) Weak	4	2.0

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10.	No. of children in family		
	a) 1		
	b) 2	78	39.0
	c) 3	54	27.0
	d) 4 and above	16	8.0
	e) Nil	10	5.0
		42	21.0

	Designation		
11.	a) Nursing officer	172	86.0
	b) Nursing superintendent	2	1
	c) Matron		
	d) Ward sister	1	0.5
		25	12.5
12.	Working Area		
	a) General ward	87	43.5
	b) OPD	49	24.5
	c) Emergency	41	20.5
	d) ICU	23	11.5
13.	No. of working hours /day		
	a) 6-8	146	73.0
	b) 8-10	47	23.5
	c) 10-12	4	2.0
	d) More than 12	3	1.5
14.	Nature of job		
	a) Regular	159	79.5
	b) Contract	21	10.5
	c) Out source	20	10.0
15.	Do you have attended any CNE (Continuing Nursing Education), workshop, conference related to burnout syndrome?		
	a) Yes		
	b) No		
		57	28.5
		143	71.5

Table 1 Majority of the nurses were in the age group of 20-30 years and were females, most of nurses were B.Sc. Nursing or Post Basic B.Sc. Nursing. Majority of nurses were married and had 0-5 years of experience or belongs to the joint family. According to distance of home most of the nurses were came from 1-10 km and were belongs to home accommodation, had good family support system and had only 1 child. Majority of the nurses were nursing officers and posted in general ward or worked around 6-10 hours/day with regular job. As per attended any CNE (Continuing Nursing Education), workshop, conference related to burnout syndrome, majority (71.5%) of the nurses were not attended.

Table 2 Frequency and Percentage distribution of nurses as per their level of burnout syndrome N =200

-200							
Level of I	f	%					
Item scor							
Low	16-32	39	19.5				
Medium	33-49	156	78.0				
High	50 & above	5	2.5				

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Table 2 shows the frequency & distribution of level of burnout syndrome among nurses in selected hospitals of district Faridkot, Punjab. Maximum 156 (78.5%) of the nurses having medium (33-49) level of burnout syndrome, 39 (19.5%) of the nurses having low (16-32) level of burnout syndrome and only 5 (2.5%) of the nurses having high (50 & above) level of burnout syndrome.

Fig 1: showing distribution of level of burnout syndrome among nurses in selected hospitals of district Faridkot, Punjab.

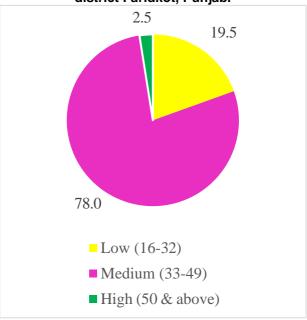


Fig 2 Percentage distribution of physical and psychological factors of burnout syndrome among nurses.

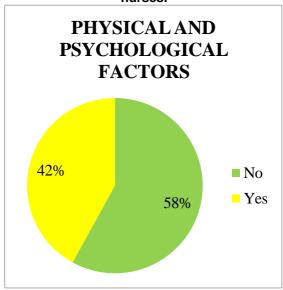


Figure 2 Shows that 84 (42%) nurses' response yes which means they had physical and psychological factors were responsible for burnout syndrome.



Fig. 3 Shows the percentage distribution self-detachment factors of burnout syndrome among nurses.

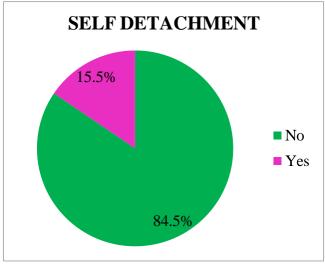


Figure 3 demonstrates that 31 (15.5%) of nurses indicated that they had burnout syndrome due to self-detachment factors.

Fig 4: depicts the percentage distribution of self-realization factors of burnout syndrome among nurses.

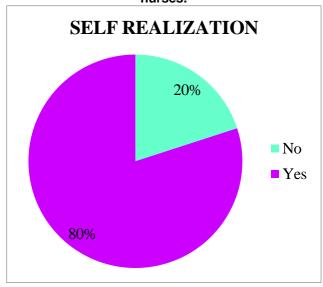


Figure 4 shows that 40 (20%) of nurses answered no, indicating that self-realization factors were responsible for burnout syndrome.



Figure 5: Showing the percentage distribution of organizational factors of burnout syndrome among nurses.

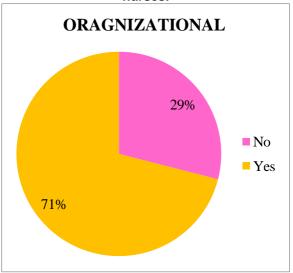


Figure 5 illustrates that 142 (71%) of nurses answered yes, revealing that organizational factors were held responsible for burnout syndrome.

4. Discussion and Conclusion

The study results represent that the level of burnout syndrome among nurses was medium level in 156 (78.5%), and 39 (19.5%) of the nurses having low level of burnout syndrome or only 5 (2.5%) of the nurses having high level of burnout syndrome. The study findings also shows that there are various factors were responsible for burnout syndrome. 84 (42%) nurses had physical and psychological factors were responsible for burnout syndrome, 31 (15.5%) nurses had self-detachment factors were responsible for burnout syndrome, 40 (20%) nurses had no self- realization factors responsible for burnout syndrome and 58 (29%) nurses had organizational factors were responsible for burnout syndrome. In terms of association study shows that there is significant association of level of burnout syndrome and its factors with selected sociodemographic variables such as gender, distance from home, working area, no. of working hours, attended any CNE continue nursing education, workshop, conference related to burnout syndrome.

6. References

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