

Renata Cristina Gasparino¹

¹Nurse. Master in Nursing. University of Campinas. Jundiaí-SP-Brazil.

ABSTRACT: This study's objective was to identify the nursing team's level of Burnout Syndrome and its relationship with the variables of work overload, professional satisfaction, and intention to leave the job. Data collection was undertaken in June – August 2011 using Maslach's Burnout Inventory. The sample of 178 professionals demonstrated a moderate level of the syndrome and the majority felt that they were overloaded with work, but were satisfied and did not intend to leave their jobs. The higher the level of Burnout and emotional exhaustion, the higher the professional dissatisfaction, intention to leave the job, and feeling of overload. The women were shown to be more depersonalized and those staff who had had holidays were more personally realized than the others. It is extremely important to evaluate this syndrome, as the results of its developing and being manifested can impact negatively on the results with the patients, professionals and institutions.

DESCRIPTORS: Professional exhaustion; Satisfaction at work; Nursing.

SÍNDROME DE BURNOUT NA EQUIPE DE ENFERMAGEM DE UM HOSPITAL UNIVERSITÁRIO

RESUMO: O objetivo deste estudo foi identificar o nível da Síndrome de Burnout da equipe de enfermagem e sua relação com as variáveis sobrecarga de trabalho, satisfação profissional e intenção em deixar o emprego. A coleta de dados foi realizada entre junho e agosto de 2011 utilizando-se o Inventário de Burnout de Maslach. A amostra de 178 profissionais demonstrou moderado nível da síndrome e a maioria estava se sentindo sobrecarregada, porém satisfeita e não possuía intenção em deixar o emprego. Quanto maior o nível de Burnout e a exaustão emocional maior foram a insatisfação profissional, a intenção em deixar o emprego e o sentimento de sobrecarga. As mulheres mostraram-se mais despersonalizadas e aqueles que já haviam gozado férias estavam mais realizados pessoalmente do que os demais. Avaliar essa síndrome é extremamente importante, pois os resultados de seu desenvolvimento e manifestação podem impactar negativamente nos resultados com os pacientes, profissionais e instituições.

DESCRITORES: Esgotamento profissional; Satisfação no emprego; Enfermagem.

SÍNDROME DE BURNOUT EN EL EQUIPO DE ENFERMERÍA DE UN HOSPITAL UNIVERSITARIO

RESUMEN: El objetivo de este estudio fue identificar el nivel del Síndrome de Burnout en el equipo de enfermería y su relación con las variables sobrecarga de trabajo, satisfacción profesional e intención en salir del empleo. Los datos fueron recogidos entre junio y agosto de 2011, utilizando el inventario de Burnout de Maslach. La muestra de 178 profesionales reveló moderado nivel del síndrome y la mayoría se sentía sobrecargada, pero satisfecha y no pretendía salir del empleo. Cuanto mayor el nivel de Burnout y el agotamiento emocional, mayor fueron la insatisfacción profesional, la intención en dejar el empleo y el sentimiento de sobrecarga. Las mujeres se revelaron más despersonalizadas, y quienes ya habían salido de vacaciones estaban más realizados personalmente que los otros. Evaluar ese síndrome es extremadamente importante, pues los resultados de su desarrollo y manifestación pueden impactar negativamente los resultados con pacientes, profesionales e instituciones.

DESCRIPTORES: Agotamiento profesional; Satisfacción en empleo; Enfermería.

Corresponding author:

Renata Cristina Gasparino
Universidade de Campinas
Rua Robartino Martho, 260 – 13216-291 – Jundiaí-SP-Brasil
E-mail: regasparino@yahoo.com.br

Received: 07/08/2013

Finished: 03/10/2014

INTRODUCTION

The increasing need for new technologies, controlling of costs, and seals of accreditation brings with it significant changes in the work environment, and greater demands on the workers. Although, on the one hand, this brings indisputable benefits for the care, on the other, it places even more burden on the team, as these requirements conflict with the lack of qualified staff, the shortage of materials, low salaries and poor dimensioning of the personnel⁽¹⁻³⁾.

Nursing is seen as a stressful profession due to the lack of recognition, resources and autonomy, and to low salaries⁽³⁾. Authors mention that Brazilian nurses' low salaries oblige them to possess a second source of income, which further increases the work overload, and consequently, the strain⁽²⁾.

In addition to this, the work overload, associated with the personal relationships – which are often conflictual – creates a generalized discontentment which affects the results with the patients (compromising the quality of the care provided), with the institutions (high rate of team turnover) and with the professionals (professional dissatisfaction and development of Burnout Syndrome)⁽²⁻³⁾.

Burnout is a syndrome which develops in response to chronic sources of stress, present in the workplace. It is characterized by three related but independent components: emotional exhaustion, depersonalization, and a reduced sense of personal accomplishment⁽⁴⁾. This exhaustion can be identified under Code Z73.0 in the International Statistical Classification of Diseases; in Brazil, the Social Security program recognizes the Syndrome as a work-related mental disorder⁽⁵⁾.

As symptoms and consequences of the Burnout, individuals may suffer harm to their health and performance at work, such as: anxiety, depression^(4,6), sleep disorders, headaches, chronic fatigue, substance abuse⁽⁶⁾, increase in dissatisfaction with the work, absenteeism and increase in turnover⁽³⁾.

Turnover, in the nursing workforce in a hospital, is a problem faced by the managers. The syndrome directly involves the quality of the care and the costs of termination of employment,

contracting and training. The loss of experienced professionals affects the level of care provided⁽³⁾ and this situation creates discontentment and overloading of tasks for the members who remain in the hospital. A satisfied workforce, stable and qualified, as well as supporting the process of caring, creates effective possibilities for ensuring the quality of the services provided^(3,7).

It is the nursing team that spends most time by the side of the patient and her family members, and because of this is a group at great risk of developing Burnout. The syndrome's implications bring relevant consequences: for the professionals, who may feel dissatisfied and overloaded with the work; for the patients, who may suffer impairment to the quality of the care; and to the institutions, which may be affected through the high rates of absenteeism and turnover.

The present study's objective, therefore, was to identify the level of Burnout of the nursing team of a teaching hospital, and its relationship with the variables of: work overload, professional satisfaction, and intention to leave the job. This is in order to assist in the implementation of interventions which prevent the development and manifestation of this syndrome.

METHOD

This descriptive, exploratory and transversal research was undertaken in a public hospital in the non-metropolitan region of the state of São Paulo, which has resources from the prefecture and which aims to provide medical-hospital assistance to the users of the Unified Health System.

For the study, the researchers approached nurses, nursing technicians and auxiliary nurses who met the following inclusion criteria: a) they provided direct care to the patients; b) were not on holiday or on leave.

The researcher elaborated a characterization file, with the objective of evaluating the personal and professional profile of the sample. This covered data such as: professional category, age, sex, length of experience in the profession and in the institution, and the undertaking of overtime. Three questions were inserted at the end of this file in order to evaluate the professionals' perception of the results extracted

from previously-undertaken studies(3,8-9).

In the first question, which evaluated professional satisfaction, the participants answered the question: "How do you feel in relation to your current work?"; in the second question, which addressed the intention of leaving the job, the subjects answered the question "How often do you think about leaving this job in the next 12 months?"; and in the last question, which addressed the feeling of work overload, the participants answered the question "How often do you feel overloaded by your work?".

For the three questions, all the response options were: very dissatisfied (one point); dissatisfied (two points); satisfied (three points); and, very satisfied (four points). The higher the score, the higher the professional's satisfaction with her current job, the lower her intention to leave her current job, in the next year, and the lower the feeling of overload received by the professionals.

Besides the characterization file, the participants received Maslach's Burnout Inventory (MBI), adapted and validated for the Brazilian culture. This is a self-administered instrument, which aims to measure the worker's physical and emotional strain through the evaluation of her feelings in relation to her work⁽¹⁰⁾. It has 22 items, distributed in three dimensions: emotional exhaustion (nine items), reduced sense of personal accomplishment (eight items) and depersonalization (five items). In these, the person is requested to provide an answer stating the frequency with which she experiences specific situations in her work environment⁽¹⁰⁾.

Emotional exhaustion is a fundamental component, but is not sufficient to define Burnout. It is the first reaction caused in response to work overload, social conflict and stress due to the demand for good results, which can entail – as a coping strategy – emotional and cognitive distancing in relation to the work⁽⁴⁾.

Depersonalization occurs as an attempt to protect oneself from the exhaustion, and is characterized by distancing from the work and from other persons. The reduced sense of personal accomplishment, on the other hand, is characterized by a feeling of personal and professional inadequacy, that is, the staff lose their

confidence in themselves and in their ability to stand out within the team⁽⁵⁾.

The items are evaluated by a Likert-type scale with five points: one (never); two (rarely); three (sometimes); four (frequently) and five (always); that is to say, the higher the score, the higher the emotional exhaustion and depersonalization, and the lower the sense of personal accomplishment, as that scale has an inverse score⁽¹⁰⁾.

In order to classify the levels of Burnout Syndrome as high, moderate and low, one must obtain minimum and maximum scores for each subscale, and, following that, determine the 33rd and 67th percentiles of the curve. A moderate level is represented in medium scores in the three subscales. A low level is represented by low scores in the subscales of emotional exhaustion and depersonalization, and by high scores in the subscale for reduced sense of personal accomplishment. A high score is represented by high scores in the subscales for exhaustion and depersonalization and by low scores in the subscale for reduced sense of personal accomplishment⁽¹⁰⁾.

Data collection was undertaken in June – August 2011, by a student from the fourth year of the undergraduate course in nursing, trained by the researcher. It was judged important to include a student in the data collection process because the author of the present study holds an administrative position in the institution where the research was undertaken, and this could have compromised the participants' answers.

The participants' names were obtained from the nursing team's monthly work schedule. The student approached all the professionals individually, in the units where they worked. Those who met the inclusion criteria participated in the study. The participants received the characterization file for the sample and the MBI. The instruments were responded to and were returned to the supervisor in sealed envelopes, after which they were handed to the student nurse.

The data were tabulated in the program Excel-Windows/XP® and were analyzed by a professional statistician, using the SAS software, version 9.2. Absolute and relative frequencies were obtained for the categorical variables, and measures of position for the continuous

variables. In order to define the level of Burnout Syndrome, the means of the subjects' answers were calculated for each subscale.

The association between the subscales on the variables studied was evaluated using Chi-squared tests and Fisher's exact test, and the internal consistency was evaluated using the Cronbach Alpha coefficient. The level of significance was taken as 5%.

Authorization for undertaking the research was obtained from the administrative director of the institution, and a favorable decision was received from the Research Ethics Committee (Protocol 89/2011). The study was conducted in accordance with ethical standards in which the subjects received information on the objectives of the research, that it would be unpaid, that there would be anonymity when the results were published, and that they could refuse to respond

Table 1 - Personal and professional characterization of the sample. Jundiaí-SP-Brazil, 2011

Variables	Participants	
	n	%
Sex		
Female	153	85,9
Male	9	5
Did not answer	16	9,1
Marital status		
Married	74	41,6
Single	63	35,4
Divorced/Separated	21	11,8
Widowed	2	1,1
Others	11	6,2
Did not answer	7	3,9
Other paid employment		
No	129	72,5
Yes	42	23,6
Did not answer	7	3,9
Holidays in the last six months		
No	98	55,1
Yes	80	44,9
Did not answer	0	0
Overtime, in the last six months		
Yes	119	66,8
No	56	31,5
Did not answer	3	1,7

to any item in the instrument at any time without suffering any consequences.

RESULTS

The sample was made up of 178 professionals (80% of the total of professionals in the institution) and the majority worked in the intensive care units (29.2%) and on the night shift (41.6%). The other variables for personal and professional characterization are presented in Table 1.

The participants' mean age was 33.4 years old ($sd \pm 8.2$), the mean length of experience in the profession was 6.6 years ($sd \pm 6.9$) and the mean length of work in the institution was 2.9 years ($sd \pm 2.6$).

The evaluation of the professionals' perception in relation to the results in the work is presented in Table 2.

Regarding the feeling of overload, the intention to leave the job, and satisfaction with the work, the majority said that they felt satisfied or very satisfied with their current job (80.4%) and rarely or never thought about leaving the job in the

Table 2 - Professionals' perceptions in relation to the results of the work. Jundiaí-SP-Brazil, 2011

Variables	Participants	
	n	%
Professional Satisfaction		
Very dissatisfied	9	5,1
Dissatisfied	23	12,9
Satisfied	108	60,6
Very satisfied	35	19,7
Did not answer	3	1,7
Intention of Leaving the Job in the Next Year		
Frequently	13	7,3
Sometimes	37	20,8
Rarely	39	21,9
Never	89	50
Did not answer	0	0
Feeling of Overload of Work		
Frequently	28	15,7
Sometimes	63	35,4
Rarely	51	28,7
Never	36	20,2
Did not answer	0	0

next year (71.9%), but that they sometimes or frequently feel overloaded (51.1%).

In relation to the three variables of results in the work, it was observed that the most satisfied professionals had the least intention of leaving the job ($p=0.00$) and felt least overloaded ($p=0.00$), and that the participants who worked in the surgical center had the greatest intention of leaving their job ($p=0.02$).

Table 3 presents the means and the standard deviations for the MBI subscales.

In the present study, the professionals reported moderate levels of emotional exhaustion, depersonalization and reduced sense of personal accomplishment, therefore demonstrating a moderate level of Burnout Syndrome.

In the study of the variables related to Burnout, the significant associations found were: the higher the level of the syndrome, the greater the professional dissatisfaction, the intention to leave the job in the next year and the feeling of the overload of work ($p<0.0001$).

When the subscales were analyzed separately, it was also found that the greater the emotional exhaustion, the greater the professional dissatisfaction, the intention of leaving the job in the next year, and the feeling of overload ($p<0.0001$).

In the depersonalization subscale, the women ($p=0.02$) and those who had another paid job ($p=0.0012$) felt the most depersonalized. In the subscales for reduced sense of personal accomplishment, the participants who had not had a holiday in recent months reported the lowest sense of personal accomplishment ($p=0.04$). The confidence coefficient obtained for the total of items of the instrument was 0.84, considered satisfactory.

Table 3 - Means and standard deviation for the Maslach Burnout Inventory subscales. Jundiaí-SP-Brazil, 2011

Subscales	Média	SD*
Emotional exhaustion	17,7	± 6
Depersonalization	7,7	± 2,7
Reduced sense of personal accomplishment (inverse score)	32,5	± 5,1

*Standard-Deviation

DISCUSSION

The predominance of the female sex found in the present study has also been found in innumerable Brazilian and international studies^(9,11-12) and this is owed to the history and culture of nursing. In relation to the majority of the participants being married and not undertaking other paid employment, the results also corroborate other studies^(1,9).

The sample's mean age is close to that found in other studies, demonstrating that nursing, in Brazil, is a profession exercised basically by young adults^(1,9,11-12). Regarding the length of experience and of work in the institution, the results found are similar to those found by other authors, who assert that the professionals, having exercised the profession for less than 10 years, are considered new and inexperienced⁽⁹⁾.

The majority of the participants undertook overtime and had not taken holidays in the last six months – and perhaps because of this, were feeling overloaded. Nursing, due to being a poorly-paid profession, obliges the professionals to seek additional sources of income and, as a result, they end up with long working days^(3,13).

Even taking into account the nursing team's turnover, as they are always seeking better salaries, the majority do not intend, or rarely intend, to leave their job in the next year. These data may be associated with the fact that the majority feel satisfied or very satisfied with their current work. This relationship has also been indicated in other studies^(7,9).

In the present research, the participants working in the surgical center mentioned the greatest intention of leaving the position in the next year. This relationship may be explained by the fact that professionals who feel overloaded have a greater intention of changing their job; in one study which aimed to evaluate the exhaustion of nurses from critical care units, those who worked in the surgical center were those who were shown to be the most tired⁽¹⁴⁾.

In analyzing Burnout Syndrome, emotional exhaustion and other variables, it was perceived that the professional who develops the syndrome feels more overloaded, which can provoke professional dissatisfaction and, as a consequence, the intention to leave the job. A dissatisfied

professional can compromise the work process and affect the results with the patients and institution^(1,7).

In relation to the subscale of depersonalization, the difference found in relation to sex may be associated with the fact that women exercise the roles of mother, spouse and professional; and, this being the case, end up dedicating themselves more to the first two roles, thus distancing themselves emotionally from the profession⁽¹¹⁾.

The subjects who do not undertake additional paid employment elsewhere judged themselves to be more depersonalized, that is, more emotionally distant from the work and from the other people than those who work in more than one job. These findings do not corroborate those of the literature in which authors assert that the work overload is one of the factors which contributes to the development of the syndrome, and when depersonalization is manifested, the individuals present negative attitudes in relation to the other people and even to the patients⁽⁹⁾.

In one study aiming to evaluate Burnout, one of the strategies most suggested by the participants for preventing the development of the syndrome was involvement in activities outside work which promote well-being. A period of holidays represents a time for relaxing from work activities and, probably because of this, those who had not taken holidays were feeling the least realized personally⁽¹⁵⁾.

The feeling of overload and moderate level of Burnout Syndrome demonstrated by the majority of the participants may be associated with the fact that the majority had also undertaken overtime in recent months, which demonstrates the insufficiency of the institution's workforce. On the other hand, the professionals have high professional satisfaction and low intention of leaving the job. This contradictory relationship between the feeling of overload and professional satisfaction has also been found in other Brazilian studies^(3,7,16).

The studies may be used for assisting in the implementation of actions which enable the professionals to recognize the signs of the syndrome's development and manifestation, such that, in this way, they may implement efficacious strategies for coping with and managing the

stressors in the work environment⁽¹⁷⁾.

FINAL CONSIDERATIONS

The results obtained responded to the objectives initially proposed, and through them, the importance is highlighted of studying the level of Burnout Syndrome among nursing professionals because its social cost.

The work environment characteristics which favor the professional practice of nursing can directly affect the results with the patients (impairing the quality of the care offered), with the professionals (professional dissatisfaction, development of burnout) and with the institution (absenteeism and turnover). As a result, so that there may be more support for evaluation, it is recommended that further studies be undertaken, analyzing the level of Burnout Syndrome in conjunction with the work environment, considering that an instrument adapted and validated for this purpose in the Brazilian culture is already available.

REFERENCES

1. Jodas DA, Haddad MCL. Síndrome de burnout em trabalhadores de enfermagem de um pronto socorro de hospital universitário. *Acta Paul. Enferm.* 2009;22(2):192-7.
2. Silva DCM, Loureiro MF, Peres RS. Burnout em profissionais de enfermagem no contexto hospitalar. *Psicol. hosp.* 2008;6(1):39-51.
3. Graziano ES, Ferraz Bianchi ER. Impacto del estrés ocupacional y burnout en enfermeros. *Enferm. glob.* 2010;(18):1-20.
4. Milanés ZC, Batista E, Cantillo C, Jaramillo A, Rodelo D, et al. Desgaste profesional y factores de enfermería de servicios de urgencias de Cartagena, Colombia. *Aquichan* 2010;10(1):43-51.
5. Trindade LL, Lautert L. Síndrome de burnout entre os trabalhadores da estratégia de saúde da família. *Rev Esc Enferm USP* 2010;44(2):274-9.
6. Maslach C, Leiter MP. Trabalho: fonte de prazer ou desgaste? Guia para vencer o estresse na empresa. Trad. de Mônica Saddy Martins. Campinas: Papirus; 1999.
7. Gasparino RC, Guirardello EB, Aiken LH. Validation of brazilian version of the Nursing Work Index – Revised. *J. Clin. Nurs.* 2011;20(23-24):3494-501.
8. Bogaert PV, Meulemans H, Clarke S, Vermeyen K,

Heyning PV. Hospital nurse practice environment, burnout, job outcomes and quality of care: test of a structural equation model. *J Adv Nurs* 2009;65(10):2175-85.

9. Meneguini F, Paz AA, Lautert L. Fatores ocupacionais associados aos componentes da síndrome de burnout em trabalhadores de enfermagem. *Texto Contexto Enferm*. 2011;20(2):225-33.
10. Tamayo MR. Relação entre a síndrome do burnout e os valores organizacionais no pessoal de enfermagem de dois hospitais públicos [Dissertação]. Brasília (DF): Universidade de Brasília; 1997.
11. Moreira DS, Magnago RF, Sakae TM, Magajewski FRL. Prevalência da síndrome de burnout em trabalhadores de enfermagem de um hospital de grande porte da Região Sul do Brasil. *Cad. Saúde Pública* 2009;25(7):1559-68.
12. Rissardo MP, Gasparino RC. Exaustão emocional em enfermeiros de um hospital público. *Esc. Anna Nery* 2013;17(1):128-32.
13. Trindade LL, Lautert L. Síndrome de burnout entre os trabalhadores da estratégia de saúde da família. *Rev Esc Enferm USP* 2010;44(2):274-9.
14. Martino MMF, Misko MD. Estados emocionais de enfermeiros no desempenho profissional em unidades críticas. *Rev Esc Enferm USP* 2004;38(2):161-7.
15. Roque L, Soares L. Burnout numa amostra de psicólogos portugueses da região autónoma da Madeira. *Psic., Saúde & Doenças* 2012;13(1):2-14.
16. Aiken LH, Sloane DM, Clarke S, Poghosyan L, Cho E, et al. Importance of work environments on hospital outcomes in nine countries. *Int J Qual Health Care* 2011;23(4):357-64.
17. Linch GFC, Guido LA, Umann J. Estresse e profissionais da saúde: produção do conhecimento no centro de ensino e pesquisas em enfermagem. *Cogitare enferm*. 2010;15(3):542-7.