

Job burnout and its relation with personality traits among the midwives working in Isfahan, Iran

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ABSTRACT

Background: Health-related professionals are at high risk of job burnout which will in turn lead to effects on health services provision. The present study was conducted to define job burnout and its association with personal characteristics among the midwives working in Isfahan, Iran.

Materials and Methods: This descriptive correlational study was performed on 193 midwives working in health centers and hospitals in Isfahan. The participants were selected through cluster random sampling. The data was collected by a researcher-made personal characteristics questionnaire as well as Maslach Burnout Inventory. The data was analyzed by descriptive and inferential statistical tests in SPSS.

Findings: In the present study, the highest frequencies of job burnout dimensions were for the low levels of emotional exhaustion (58%) and depersonalization (65.8%), and high levels of personal performance (58%). There was a significant inverse association between age and depersonalization ($p = 0.02$). However, no significant relations were found between job burnout dimensions and variables of marital status, number of children, level of education, and residential status.

Conclusions: Although the results of this research showed a low prevalence of job burnout among midwives, the stressful nature of midwifery as a profession necessitates educational intervent.

Key words: Job burnout, midwifery, emotional exhaustion, depersonalization, personal performance

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INTRODUCTION

Job burnout syndrome, as a recent professional issue,^[1] is considered as the main feature of occupational stress, and a delayed reaction to chronic stressors in the work place.^[2]

This psycho-cognitive syndrome comprises three dimensions of emotional exhaustion and mental power discharge, depersonalization (negative reaction accompanied with ignoring the clients), and the decline of personal performance (losing capability and success at work).^[3]

Job burnout results in numerous inappropriate mental and psychological effects such as depression, reduction of job satisfaction, criticizing the clients and losing empathy, decline of professional function, increase of family and interpersonal problems, irregularity in patient care and eventually, absence from work.^[4] It also imposes a 4% waste of work hours to organizations and thus brings about financial loss by wasting millions of dollars each year.^[5]

Previous research has showed health professions (such as midwifery)^[6] to be at the highest risk of occupational complications, such as job burnout, compared to other occupations.^[7] Individuals are believed to experience different levels of job burnout based on personal and occupational factors.^[8] Some studies have evaluated the association between personal characteristics and job burnout and reported controversial findings. For instance,

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Talaei et al. found a significant association between job burnout subscales and variables such as age and education.^[9] However, Alparslan and Doganer demonstrated that age, marital status and number of children had no effects on job burnout.^[10] Likewise, Toubaei and Sahraeian concluded that job burnout was not significantly associated with age.^[11] In another study, Bahri Bynabaj et al. reported that although there was not a significant association between job burnout and the variable of age, marital status and level of education were significantly related with job burnout.^[12] Some other researchers have believed personal factors not to be able to influence job burnout.^[13] Therefore, considering the existing controversies and the high prevalence of job burnout in modern societies resulting in leaving jobs, reduction of working forces and their outcome in economy and production of the country,^[14] further studies seem necessary. On the other hand, the midwives are important members of health providing team whose high quality health services play a key role in health indexes such as life expectancy and maternal mortality.^[15] In addition, having a crucial responsibility, midwives can be predisposed to job burnout that consequently causes diminished quality of patient care and low quality and quantity of health services. The present study was thus conducted to define job burnout and its association with personal factors (age, marital status, number of children, level of education, and residential status) amongst midwives in order to reduce job burnout and to promote the quality of care they provide.

MATERIALS AND METHODS

This descriptive correlational study included all midwives working in health centers, and university and private hospitals in Isfahan (Iran) as well as Isfahan Charity Center in 2011. A total number of 193 subjects were selected through random cluster sampling. The inclusion criteria were having at least one year of working experience, no history of mental and psychotic problems and not being exposed to acute stressful events. In order to collect data, subjects filled out a researcher-made personal factor questionnaire and Maslach Burnout Inventory (MBI). MBI includes 22 questions on three components of emotional exhaustion, personal performance, and depersonalization. The personal factor questionnaire was based on a seven-item Likert scale in which scores of 0-6 were respectively associated with never, several times a year, once a month, several times a month, once a week, several times a week, and every day. After scoring the questions for each subject, total scores of each dimension was summed up and categorized as

low, moderate, or high. In order to do so, high, moderate, and low scores were respectively considered as over 30, 18-29, and 17 in emotional exhaustion, over 12, 6-11, and 6 in depersonalization, and over 40, 34-39, and 33 in personal performance. The scores of subscales were not addable since in two subscales of emotional exhaustion and depersonalization, high scores showed job burnout but in the subscale of personal performance, lower scores indicated job burnout. The employed questionnaire has been frequently confirmed by reliability of over 90% by Iranian researchers.^[1] The collected data was analyzed by descriptive (mean, standard deviation (SD), and frequency distribution) and inferential statistical tests (Pearson's correlation test, Spearman test, analysis of variance, and independent t- test) in SPSS.

FINDINGS

The mean age of the subjects was 37.11 (7.7) years. Most subjects were married, had two children, had a bachelor's degree, and owned a house. Low levels of emotional exhaustion (58%) and depersonalization (65.8%), and high levels of personal performance (58%) were the most frequent levels of job burnout dimensions (Table I). Mean values of job burnout in dimensions of emotional exhaustion, depersonalization, and personal performance were 15.3 (9.9), 5.4 (4.8), and 39.7 (6.3), respectively. Mean values in dimensions of emotional exhaustion, depersonalization and personal performance were respectively 13.58 (9.92), 4.74 (4.44), and 40.28 (6.39) in health centers. The corresponding values in the hospitals were 16.79 (9.82), 6.00 (5.17), and 39.25 (6.34). Independent t-test showed a significant association between workplace location and dimensions of emotional exhaustion ($t = 2.25$; $p = 0.01$) and depersonalization ($t = 1.79$; $p = 0.03$). However, personal performance and workplace location were not significantly related ($t = 1.12$; $p = 0.13$). In addition, mean values of emotional exhaustion and depersonalization in the age group of 22-32 years were higher than other age groups (16.41 (10.13) vs. 6.50 (5.31)). Mean value of personal performance was equal to 38.77 (6.8) in this age group which was in a lower level compared to other subjects.

Pearson's correlation test revealed a significant inverse association between age and depersonalization. However, no significant associations were found between age and dimensions of emotional exhaustion and personal performance. Analysis of variance showed no significant associations between marital status and subscales of emotional exhaustion, depersonalization and personal performance. In addition, no significant relations between

Table 1. Distribution of subscale levels of burnout in subjects

	Low		Moderate		High		Total	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Emotional exhaustion	112	58	63	32.6	18	9.3	193	100
Depersonalization	128	65.8	38	19.7	28	14.5	193	100
Personal performance	37	18.7	45	23.3	112	58	193	100

Table 2. Job burnout values stratified based on the three dimensions of burnout and demographic factors (values are presented as mean and standard deviation)

		Emotional exhaustion		Depersonalization		Personal performance	
		Mean (SD)	Correlation	Mean(SD)	Correlation	Mean(SD)	Correlation
Age	22-32	16.41(10.13)	p = 0.36 r = -0.06	6.50(5.31)	p = 0.02 r = -0.16	38.77(6.80)	p = 0.20 r = 0.09
	33-43	14.60(9.80)		5.31(4.93)		40.04(5.53)	
	44-54	14.63(9.95)		4.13(4.00)		40.50(5.53)	
Educational level	Associate	13.53(10.29)	p = 0.11 r = 0.12	5.60(4.98)	p = 0.51 r = 0.05	40.51(6.41)	p = 0.37 r = -0.07
	Bachelor	16.20(9.78)		5.60(4.89)		39.50(6.34)	
	Master	15.66(12.34)		5.66(6.65)		41.33(6.02)	
Marital status	Single	15.60(9.90)	p = 0.88 f = 0.22	5.30(4.70)	p = 0.80 f = 0.32	39.80(6.30)	p = 0.56 f = 0.68
	Married	14.4(10.40)		6.30(5.60)		39.50(6.80)	
	Widowed	14.33(10.06)		4.33(1.15)		44.00(1.50)	
Number of children	Divorced	13.00(8.48)	p = 0.23 r = 0.10	6.50(4.94)	p = 0.49 r = -0.06	36.00(2.82)	p = 0.56 r = -0.15
	0	18.40(10.58)		6.28(4.80)		37.72(7.75)	
	1	14.17(10.24)		5.75(5.05)		40.82(5.62)	
	2	15.03(9.46)		4.80(4.74)		39.70(6.42)	
	3	17.50(10.29)		5.20(2.78)		40.80(3.39)	
Residential status	4	19.50(0.70)	p = 0.28 t = 1.08	5.00(0)	p = 0.69 t = 0.39	39.00(4.24)	p = 0.32 t = 0.99
	Personal	15.61(10.20)		5.48(5.04)		39.60(6.33)	
	Leased	13.71(9.30)		5.14(4.50)		40.70(6.28)	

number of children and emotional exhaustion, depersonalization, and personal performance were indicated by Pearson's correlation test. Moreover, educational level and emotional exhaustion, depersonalization and personal performance were not found to be significantly related according to Spearman correlation test. Finally, independent t-test showed no significant associations between residential status and the three dimensions of job burnout (Table 2).

DISCUSSION

The findings of this study showed the highest frequencies of job burnout dimensions to be for low levels of emotional exhaustion and depersonalization, and high levels of personal performance, respectively. Therefore, a high percentage of the subjects in the present study seemed not to have experienced job burnout. Khaghani Zadeh reported the highest frequency of the three component dimensions of job burnout amongst nurses as low levels of emotional exhaustion (53%), depersonalization (48%), as well as personal performance (45%).^[1] Taei et al. indicated the highest frequency for low levels of emotional exhaustion (70%) and personal performance (54%), and high levels of depersonalization (94.7%) amongst physicians.^[16] Sotodeh Asl and Bakhtiari concluded that the highest frequencies were for moderate emotional exhaustion (93.2%), low personal performance (93.1%), and high depersonalization (94.1%) amongst nurses and midwives. However, their

study generally considered nurses and midwives and did not evaluate different types of the professions.^[17] Therefore, job burnout was less common amongst the studied midwives in the present study than the physicians Taei et al. studied.^[16] Alparslan and Doganer reported the mean values of job burnout dimensions as 17.41, 5.03, and 20.38 for emotional exhaustion, depersonalization, and personal performance, respectively.^[10] On the other hand, Momeni et al. published 41.38, 9.28, and 29.31 as the mean values of emotional exhaustion, depersonalization, and personal performance, respectively.^[18] Mean values of the three dimensions of burnout in the present study were thus lower than the abovementioned studies. Since depersonalization is defined as the negative reaction and ignoring the clients,^[19] lower scores of depersonalization in the midwives in the present study can possibly be due to their appropriate interpersonal communication. It should be indicated that personal performance is felt when individuals can play a role in their related organizations, show their abilities, and attain positive attitudes about themselves and their clients. In this case, they can have a better judgment about their job, attain more authority, and cope with their duties while feeling self-confident.^[20] Thus, high personal performance among the studied subjects may reflect their positive attitude toward their profession and their high self-confidence. On the other hand, high social class or other successful life backgrounds among the studied subjects seem to have helped them cope with their occupational stressors, and

to have lowered their emotional exhaustion. Arefi et al. believed a higher social class or successful backgrounds to be effective on diminishing emotional exhaustion.^[21] The present study found higher mean values of emotional exhaustion and depersonalization, and lower values of personal performance among midwives working in hospitals compared to those in health centers. Therefore, midwives working in hospitals seem to suffer more from job burnout possibly due to the type and intensity of occupational stress they experience at work. Moreover, a significant inverse association was observed between age and depersonalization, while emotional exhaustion and personal performance were not significantly related with age. On the other hand, the mean value of depersonalization was the highest in the age group of 22-32. While Momeni et al. suggested various age groups of nurses to obtain different scores of depersonalization,^[18] Bargellini et al. did not indicate age as a significant predictor for job burnout.^[22] Ahmadi and Sheikh Alizadeh^[23] and Sotodeh Asl and Bakhtiari^[17] rejected any significant association between age and job burnout. Based on the relation between depersonalization and age in the present study, some other elements such as working conditions and obtained experiences at work may also be effective in this regard. Demir et al. believed that individuals get more prepared to cope with stressful situations at higher ages, and consequently experience less job burnout.^[4] It can be thus concluded that 22-33 year-old midwives suffered more from job burnout as a result of their higher mean emotional exhaustion and depersonalization, and their lower personal performance compared to other age groups. This issue may be due to the fact that younger individuals are more susceptible to job burnout.

Not being significantly correlated with job burnout dimensions, marital status seems not to be an appropriate predictor for job burnout, i.e. individuals with different marital statuses would experience the same level of job burnout. Mollao lu et al,^[24] Tae et al.,^[16] and Alparslan and Doganer^[8] Reported similar findings. Likewise, Gonzalez and Bernard^[25] and Bartly^[26] did not suggest a significant association between emotional exhaustion and marital status among academic members.

Consistent with the findings of Alparslan and Doganer,^[10] Yaman and Soler,^[27] and Gullap et al.,^[28] the present study did not reveal a significant association between job burnout subscales and number of children. In addition, the present study showed that despite the higher mean values of job burnout dimensions among the employees with a bachelor's degree, the relations were not

significant. Similar results were previously published by Alparslan and Doganer,^[10] Yaman and Soler,^[27] Mollao lu et al,^[24] and Aziz Nejad and Hosseini.^[29] In addition, analysis of variance showed no significant associations between the three dimensions of job burnout and residential status, which was also reported by Aziz Nejad and Hosseini.^[29]

Job burnout was lower among the midwives attending the present study compared to the abovementioned researches. However, the prevalence of job burnout was higher among midwives working in hospitals compared to the health centers. Moreover, midwifery is quite stressful in nature. In addition, considering the higher mean values of depersonalization in the age group of 22-32 years in the present study, younger midwives need to receive more attention. Finally, the education authorities are suggested to hold related educational workshops to prevent and amend job burnout and ultimately enhance the quality of care.

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