

Burnout syndrome in nurses at Daniel Bracamonte Hospital, management 2012

Síndrome de burnout en enfermeras del hospital Daniel Bracamonte gestión 2012

MORALES, Valeria†, CHOQUE, Marianela, ESPÍRITU, Ana María, MILLER, Giovani, MAMANI, Alberto and MAMANI, Inés Paola

Universidad Mayor, Real y Pontificia de San Francisco Xavier de Chuquisaca, Facultad de Medicina, Calle Final Colón s/n, Bolivia.

ID 1st Autor: *Valeria, Morales*

ID 1st Co-author: *Marianela, Choque*

ID 2nd Co-author: *Ana María, Espiritu*

ID 1st Co-author: *Giovani, Miller*

ID 1st Co-author: *Alberto, Mamani*

ID 1st Co-author: *Inés Paola, Mamani*

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Abstract

The world actually needs more increase of stress, and now is considered a new illness, in this case it considered to identify the Burnout Syndrome, in the Daniel Bracamonte Hospital. The research was a cross-sectional study of the population of 15 nurses corresponding to different services practicing at the Daniel Bracamonte Hospital. An anonymous self-administered survey on socio-demographic and occupational characteristics and the Maslach scale was used. The data were processed and presented using Microsoft Excel and SPSS software. Analysis was carried out to establish the association between the following variables. The results showed that the overall prevalence of SB is 60%; the distribution according to dimensions of SB is: emotional exhaustion: 60%, depersonalization: 84%, low self-fulfillment: 38%. In conclusion: the SB is high in the nurses of the hospital. No association was found between the marital status of the person, the presence of children, or the realization or not of extracurricular activities. On the contrary, it was found that nurses between 20 and 30 years of age had a high level of BSS.

Resumen

Actualmente las exigencias del mundo laboral son mayores considerando décadas anteriores, el aumento del estrés; y su consideración como una enfermedad del nuevo milenio. El objetivo de esta investigación es el de identificar el Síndrome de Burnout, en las enfermeras del Hospital Daniel Bracamonte. La investigación fue un estudio transversal de la población de 15 enfermeras que corresponden a distintos servicios que ejercen en el Hospital Daniel Bracamonte. Se empleó una encuesta auto diligenciada anónima sobre características socio demográficas, laborales y la escala de Maslach. Se procesaron y presentaron los datos utilizando Microsoft Excel y el programa SPSS. Se efectuó análisis para establecer la asociación entre las variables. Los resultados mostraron que la prevalencia global del SB es del 60%; la distribución según dimensiones del SB es: agotamiento emocional: 60%, despersonalización: 84%, realización personal baja: 38%. En conclusión: el SB es alto en las enfermeras del mencionado Hospital. No se encontró asociación entre el estado civil de la persona, la presencia de hijos, ni la realización o no de actividades extracurriculares. Más al contrario se pudo evidenciar que las enfermeras con una edad de 20 a 30 años presentan un nivel alto de afección al síndrome.

Burnout syndrome, Emotional exhaustion, Depersonalization, Personal accomplishment

Síndrome de Burnout, Agotamiento emocional, Despersonalización, Realización personal

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† Researcher contributing first author.

Introduction

The work environment has undergone a major transformation in recent decades in the sociocultural context. The new demands of work have led to the emergence of new risks known as psychosocial risks, largely related to chronic work stress or Burnout syndrome.

It has been described that health care personnel are particularly prone to develop a progressive deterioration, both emotionally and physically, which has a negative impact on patient care.

The situation is even more worrying when we have started to talk about this syndrome, not only in physicians but also in the medical profession. Studies carried out on physicians point out, among the factors contributing to a higher degree of stress: work overload, degraded physical environment, excessive responsibility, lack of incentives, evaluations, competition among the various members of the group, the demands of assigned physicians and senior colleagues, emergency situations, the theoretical and practical preparation of nurses, the demands not only of patients but also of their relatives, inexperience and the confrontation with unknown situations.

Background

Burnout syndrome", also known as "chronic work stress syndrome", "burnout syndrome", "burnout syndrome" or "occupational stress syndrome", is a state of physical and emotional fatigue resulting from work conditions or professional overload (Freudenberger, 1974). Those who suffer from this syndrome, in addition to being tired, disillusioned, moody and even aggressive, become progressively bad workers (Freudenberger, 1974).

This syndrome basically consists of three dimensions: emotional exhaustion, depersonalization and low professional self-esteem. Emotional exhaustion is a physical and/or psychological fatigue that manifests itself as the feeling of lack of emotional resources, and the feeling that overwhelms the worker that he/she can offer nothing to other people at an affective level.

Depersonalization is what is known as inhuman, isolated, negative, cold, cynical and harsh attitudes, given by the person to the beneficiaries of his own work. Low self-esteem, also known as lack of personal accomplishment at work, feeling of personal inadequacy or lack of personal achievements, refers to the existence of a feeling of absence of personal achievements in the usual work, a rejection of oneself is presented.

Materials and methods

Type of study

Descriptive cross-sectional study

Data collection methods and instruments

The Maslach Burnout Inventory (MBI) will be used for data collection, in addition to a brief self-administered questionnaire to determine the socio-demographic factors of the nurses and the collection of data related to the individual in question.

Ethical considerations

The authorization of the director of the Daniel Bracamonte Hospital will be requested in order to carry out this research. In addition, together with the questionnaires, a brief consent form will be attached and must be approved by the nurse who decides to participate in the study.

Processing plan and analysis of results

For the analysis of the data, Microsoft Excel and SPSS software were used.

Activity	Start date	Compliance date
I. Exploratory phase	28/03/2012	3/04/2012
II. Drafting of the protocol	5/04/2012	12/04/2012
III. Obtaining information	21/04/2012	02/05/2012
IV. Statistical processing and analysis	03/05/2012	10/05/2012
V. Discussion of results	12/05/2012	14/05/2012
VI. Writing the final report	15/05/2012	29/05/2012

Table 1 Schedule

Contextual framework

Universe and sample: All current nurses working at the Daniel Bracamonte Hospital during the current administration at the time of the study. Type of sample by convenience.

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*Units of analysis**Inclusion criteria*

- Daniel Bracamonte Hospital nurses.
- Nurses who agree to participate in the study.
- Forms that are duly filled out and complete.

Exclusion criteria

- Nurses who do not agree to participate in the study.
- Incomplete forms.
- Forms that have not been properly filled out.

Results and discussion**Results**

Twenty-one nurses practicing at the Daniel Bracamonte Hospital participated in the study, of which 6 forms were excluded because they did not meet the inclusion requirements.

The presence of Burnout Syndrome was identified in 60% of the nurses; considering the three subscales. According to the Emotional Exhaustion subscale, 60% present high parameters. The second subscale: Depersonalization is present in 84%, and finally Personal Accomplishment which presents a low index of 38%. Of the nurses with Burnout Syndrome according to the three subscales: 54% report living with their family. On the other hand, 50% of the nurses who have children are affected by the syndrome. And they also perform extracurricular activities.

Discussion

Considering the data obtained, we can conclude that a high percentage of nurses working at the Daniel Bracamonte Hospital suffer from Burnout Syndrome.

The emotional exhaustion present in our nurses is 60%, with an average schedule of 8 hours per day.

Perhaps the most important of the subscales; depersonalization 84%, in comparison with other research, personal fulfillment only has a dissatisfaction level of 38%.

It should be noted that married nurses are the most affected, coinciding with the results of various studies, and that only 29% of these nurses have at least one child.

Of the nurses with children, 50% present the syndrome; this data differs from international statistics, since it is considered that people with children are less affected by the syndrome.

It should be emphasized that extracurricular activities do not make a difference because there is an equal percentage of those affected with the syndrome who carry out extracurricular activities. The origin does not affect almost nothing because in the present investigation most of the nurses are local.

Conclusions

The overall prevalence of burnout syndrome was 60% for the nursing population at the Daniel Bracamonte Hospital.

Burnout syndrome behavior was associated with workload, age and years of service.

No association found with: presence of children, background, extracurricular activities, or marital status of the nurse.

According to the study carried out in relation to age, the results indicate the following: nurses between 20 and 30 years of age are at a "high" level, followed by those between 31 and 40 years of age, and those over 41 years of age only present a "medium" level of affection to the syndrome.

Finally, it was found that nurses suffer more from emotional exhaustion and depersonalization towards patients than from a sense of lack of personal fulfillment.

Through the present research we can conclude that socio-demographic factors are not direct factors; more personal situations must be considered for the affection or not of this syndrome by nurses.

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