

## INCIDÊNCIA DA SÍNDROME DE BURNOUT NOS PROFISSIONAIS DE ENFERMAGEM: UMA REVISÃO INTEGRATIVA

### INCIDENCE OF BURNOUT SYNDROME IN NURSING PROFESSIONALS: AN INTEGRATIVE REVIEW

### IMPACTO DEL SÍNDROME DE BURNOUT EN PROFESIONALES DE ENFERMERÍA: UNA REVISION INTEGRADORA

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#### RESUMO

**Objetivo:** explorar as produções científicas disponíveis analisando a incidência da Síndrome de Burnout nos profissionais da área da enfermagem. **Método:** trata-se de uma revisão integrativa da literatura, em que foram encontrados 25 artigos e após leitura de seus títulos e resumos 9 foram selecionados para compor a amostra deste estudo de acordo com os critérios de inclusão e exclusão previamente estabelecidos. **Resultados:** pôde-se observar através dessa pesquisa que a patologia está presente nos profissionais de enfermagem e que fatores como idade, sexo, tempo de formação, turnos de trabalho e questões institucionais podem interferir no curso da doença. **Conclusão:** é necessário se fazer uma reflexão a fim de buscarmos, enquanto pesquisadores, acadêmicos e profissionais de enfermagem, o que pode ser feito para amenizar a incidência dessa doença que tem aumentado a cada dia mais nesses trabalhadores que fazem parte de uma categoria tão importante dentro dos serviços de saúde.

**Descritores:** Incidência; Síndrome; Burnout; Enfermagem.

#### ABSTRACT

**Objective:** explore scientific productions available analyzing the incidence of this disease in nursing professionals. **Method:** it is an integrative review of literature, where 25 articles were found and after reading their titles and abstracts, 9 were selected to compose the sample of this study according to the inclusion and exclusion criteria previously established. **Results:** could be observed through this research that pathology is present in nursing professionals and those factors such as age, sex, training time, work shifts and institutional issues may interfere in the course of the disease. **Conclusion:** it is necessary to make a reflection in order to search as researchers, academics and nursing professionals, what can be done to soften the incidence of this disease that have been increasing every day more in those workers who are part of such an important category within health services.

**Descriptors:** Incidence; Syndrome; Burnout; Nursing.

#### RESUMEN

**Objetivo:** Explorar la producción científica disponible el análisis de la incidencia de esta enfermedad en los profesionales de enfermería. **Método:** se trata de una revisión integradora de la literatura, que encontraron 25 artículos y después de leer sus títulos y resúmenes, 9 fueron seleccionados para la muestra de este estudio de acuerdo con los criterios de inclusión y exclusión establecidos anteriormente. **Resultados:** se observó a través de esta investigación que la enfermedad está presente en las enfermeras y que los factores tales como la edad, el sexo, el tiempo de formación, los turnos de trabajo y cuestiones institucionales pueden interferir con el curso de la enfermedad. **Conclusión:** es necesario hacer una reflexión a buscar como investigadores, académicos y personal de enfermería, lo que se puede hacer para reducir al mínimo la incidencia de esta enfermedad que se ha incrementado cada día más de los trabajadores que forman parte de una categoría tan importante dentro de los servicios de salud.

**Descritores:** Incidencia; El síndrome; Burnout; Enfermería.

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## INTRODUCTION

Burnout syndrome is defined as the work stress characterized by the emotional and physical exhaustion of the worker, occurring when there is a frustration with the work environment or with the professional himself and when situations of conflict do not have more strategies to be faced<sup>(1)</sup>. Burnout is defined as burning, letting burn that is, the term refers to the burning of the physical and emotional energies of the workers causing them to lose enthusiasm and interest by the work, harming their performance in the activities they carry out. Some denominations such as professional stress, care stress, occupational stress, professional or excellent neurosis, professional burnout syndrome, and burn-out syndrome are also used to define Burnout, but this wide range of existing terms may hinder researching<sup>(2-3)</sup>.

In 1981, Maslach and Jackson created the most accepted concept<sup>(3)</sup> of Burnout, defining this syndrome as a multidimensional concept involving emotional exhaustion, depersonalization and lack of professional fulfillment. Emotional exhaustion is defined as the exhaustion of feelings of emotion to deal with everyday situations. These symptoms can affect the individual psychically, physically or both. From there, there is a loss of production capacity and vigor at work. Depersonalization involves blocking and negative feelings of the worker with himself and others. As a form of protection, the individual isolates himself from others and begins to maintain a cold attitude and selfish behavior, treating others in a harsh and dehumanized way. However, the lack of professional achievement occurs when the individual cannot see his effort and work as a positive aspect, being reproached for not achieving his goals, causing discomfort and the low esteem in the professional<sup>(2-3)</sup>.

### Nursing and Burnout Syndrome

Nursing is a profession characterized by the provision of care and intense care to patients, and these workers are in direct and daily contact with patients and their relatives<sup>(4)</sup>. Routinely, nursing has the functions of protecting the survival and protection of individuals to ensure the physical and emotional well-being of health service users<sup>(5)</sup>.

The lack of autonomy, the workload and

the poor definition of the role of these professionals make the profession with the highest rates of Burnout syndrome. Most of the professionals propose to work two days because of low remuneration, which can trigger an important mental suffering in these individuals<sup>(4,6)</sup>.

Nursing professionals seek recognition from society in the pursuit of their appreciation and increase in their remuneration, but in these searches, they have found difficulties causing the exercise of their functions to be compromised due to demotivation. The individual affected by Burnout can be seen by patients and their colleagues as a bad, cold and indifferent professional in the suffering and death, which can negatively reflect the assistance given to patients in health services since today the humanization of care is extremely important and relevant<sup>(6-7)</sup>.

Currently, a growing number of nursing professionals<sup>(1)</sup> are being affected by Burnout Syndrome. Thus, as academics and professionals in the exercise, we consider it fundamental to deepen the studies about this subject so we can identify signs of a possible involvement by this pathology in our teams and even in ourselves. Based on this contextualization, in this study, as objective, we defined to explore the scientific productions available in the literature analyzing the incidence of Burnout Syndrome in nursing professionals.

## METHODS

It is an integrative review of the literature, a method of Evidence-Based Practice (EBP), whose purpose is to gather and synthesize results of other studies on a certain theme or issue in an organized way, deepening knowledge about it. It allows the analysis of relevant studies that support decision making and improvement of clinical practice; ascertaining the current state of knowledge about a specific subject; and pointing out areas that can still be filled with new studies<sup>(8)</sup>.

For the elaboration of an integrative quality review, it is necessary that some steps are followed and described clearly<sup>(8)</sup>. Six stages were followed: identification of the theme and research question; Establishment of inclusion and exclusion/search criteria in the literature; Categorization of studies; Evaluation of included

studies; Interpretation of results; and synthesis of knowledge<sup>(8)</sup>.

The guiding question used to guide this work was the following: What scientific evidence is available about the incidence of Burnout Syndrome among Nursing professionals? An online search of the literature was carried out between June and July 2015 in the databases of the Virtual Health Library - VHL, Latin American and Caribbean Literature in Health Sciences - LILACS and the Scientific Electronic Library On-line-SciELO. The descriptors used were "incidence," "syndrome," "burnout" and "nursing." The cited descriptors were cross-referenced and combined using the Boolean operator AND to perform the advanced search, being investigated for incidence AND syndrome AND burnout AND nursing.

The inclusion criteria used for this research were publications that showed the incidence of Burnout syndrome among nursing professionals, with full text available, published in English, Portuguese and Spanish and propagated in the last five years. Publications that had no relation to the theme and repeated yearbooks were excluded from this study.

A total of 25 articles were found, eight from the LILACS database, six from the Nursing Database - BDNF, three from the Spanish Bibliographical Index on Health Sciences - IBECS, three from the Medical Literature On-Line MEDLINE and five from Scielo. Of them, the titles and abstracts were read, and 16 articles were excluded from the study for the following reasons: eight by repetition; Six because they are burnout syndrome in multi-professional teams, and not only in nursing professionals; One for

dealing with anxiety and depressive symptoms and not mention Burnout syndrome; One because it is the Respiratory Distress Syndrome (ARDS), with no relation to the theme; And one for not having public access to the content of the article in its entirety.

Therefore, nine articles were selected to compose the sample of this study.

An instrument for the collection of the essential data of each selected study was elaborated with the purpose of facilitating and conducting the research. This contains information about the title of the articles used; The authors and the year of publication, organized and distributed in chronological order; The nature of the study; And the results presented in each article. The instrument was constructed and represented in the form of a synoptic table (Figure 1). It can be observed that the publications described in the table were promulgated between 2011 and 2014.

## RESULTS AND DISCUSSION

Among the articles selected according to the inclusion and exclusion criteria previously established for the review of this research, four were carried out in public and private hospitals, three in Intensive Care Units (adult and child), one in a Federal University of the state of São Paulo and one in Mobile Emergency Care Service (SAMU).

Regarding the professional category of those interviewed in the mentioned studies, six articles included the three hierarchical levels (nurses, technicians and assistants) and three had only nurses.

Figure 1 - Description of articles selected for the study based on the guiding question.

Article	Author/Year	Type of study	Results
Article 1 - Burnout Syndrome in Children's Intensive Care Center in the Midwest of Minas Gerais.	Machado RM, Oliveira SP, Ferreira TC, Campos CG, Botti NCL, Santos RC. 2011.	Prospective and exploratory study.	There was 01 (2.7%) diagnosis of Burnout syndrome and 09 (25%) presented alterations in one of the dimensions of Burnout syndrome (Emotional Exhaustion, Depersonalization, Lack of professional achievement).
Article 2 - Burnout in Nursing Residents.	Franco GP, Barros ALBL, Nogueira- Martins LA, Zeitoun SS. 2011	Exploratory-descriptive, analytical and longitudinal prospective research.	One (1) resident (6.3%) had changes in the three subscales and, consequently, Burnout Syndrome.
Article 3 - Predictors of Burnout Syndrome in nurses of prehospital emergency services.	França SPS, Martino MMF, Aniceto EVS, Silva LL. 2012.	Descriptive, exploratory research with a quantitative approach.	76.3% of the 38 professionals interviewed had Burnout Syndrome.

Article 4 - Burnout syndrome and the sociodemographic aspects in Nursing professionals.	França FM, Ferrari R. 2012.	Descriptive study, with a cross-sectional design.	13 (9.58%) of the 141 professionals interviewed presented Burnout Syndrome.
Article 5 - Burnout syndrome and social support at work: The perception of nursing professionals from public and private hospitals.	Andrade T, Hoch REE, Vieira KM, Rodrigues CMC. 2012	Descriptive study with a qualitative approach.	There were 231 nursing professionals interviewed (nurses, technicians and assistants) who presented a moderate level for the syndrome.
Article 6 - Burnout and the work aspects of the nursing team of two Midsize hospitals.	França FM, Ferrari R, Ferrari DC, Alves ED. 2012.	Quantitative-descriptive, cross-sectional epidemiological study.	Of the 141 nurses, 13 had the syndrome. The most affected were those who work daily, hired, with two employment links, working in administrative sectors, and with little time in the unit.
Article 7 - Prevalence of professional burnout in nursing staff at a third-level hospital in Boyacá, Colombia.	Verdugo A, Patricia L, Bocanegra P, Migdolia P. 2013.	Descriptive, cross-sectional study.	Of the 22 professionals who participated in the study, two (9.1%) had Burnout syndrome. The remaining 90.9% did not have it. However, most of the nurses revealed a deficiency in some of the dimensions for the syndrome.
Article 8 - Quality of life at work and Burnout in nursing workers of the Intensive Care Unit.	Schmidt DRC, Paladini M, Biato C, Pais JD, Oliveira AR. 2013.	Descriptive and correlational cross-sectional study.	The results showed that the study participants were not at risk for the manifestation of Burnout syndrome and there were no statistically significant results among sociodemographic variables, Burnout dimensions and Quality of Life at Work (QLW).
Article 9 - Burnout Syndrome in Nursing Staff in UVI.	Alonso S, Ortega PS, Manuel V. 2014.	Observational, descriptive, cross-sectional study.	Most professionals (45.6%) tend to burnout. Professional ICU workers are at risk of developing the disease.

Source: Elaborated by the researchers for this study.

### Characterization of the incidence of Burnout Syndrome in nursing professionals

Article 1 states that one of the 36 nursing professionals interviewed (nurses, nursing technicians and assistants), workers from an infant ICU (2.7%) presented a diagnosis of Burnout Syndrome, nine (25%) presented alterations in at least one dimension of the disease (Emotional Exhaustion, Depersonalization, Professional Achievement) and 26 (72.3%) did not have alterations in any of these scales<sup>(9)</sup>.

In article 2, the study carried out with 16 nursing residents of the University of São Paulo showed that 75% of the individuals who presented changes in the Incompetence/Lack of Professional Achievement dimension work in the sector defined as specialty B (Emergency, ICU) and the pediatric intensive care unit (NICU), with specialty A, corresponding to the nephrology,

infectology, cardiology, orthopedics, oncology, neurosurgery, general pediatrics, obtaining the remaining 25%. Professionals who carry out their work activities in the midst of the threat or occurrence of death bring with them various negative and disturbing feelings, such as pain, suffering, commotion and impotence, especially when there is a link between professional-patient-family or the loss of younger patients<sup>(11)</sup>.

As a result of article 3, a percentage of 76.3% of respondents presenting Burnout were observed among the 38 nurses working in emergency mobile services (SAMU), suggesting that the syndrome may be more related to organizational factors, environment, bureaucracy, autonomy, physical space, rewards, security, rather than to personal factors (age, gender, level of education, marital status, with children or not) or work (length of service, occupational position,

among others), being in the end a sum of several factors triggering the development of the syndrome. The precarious working conditions in the nursing area are problems that have already been discussed for a long time. The sum of personal factors, the modality of work and the aggravation by institutional questions may be conditions that predispose the onset of the syndrome<sup>(12)</sup>. One study<sup>(11)</sup> found that factors such as work overload, difficulties in managing relationships, lack of support and recognition in the work environment, ethical crises between values and professional issues, and institutional harshness interfere with the mental illness of workers<sup>(11)</sup>.

In article 5, 231 nursing professionals (nurses, technicians and nursing assistants) were interviewed, distributed in two public hospitals and two private hospitals, which presented a moderate degree of the syndrome, evidencing a propensity of higher indexes for the workers of the hospitals of the public area compared to the private area, which may indicate less social support at work. This article demonstrates that there is a greater perception of the social support in the work of private institutions and this fact is related to the less existence of Burnout among professionals filled in these services<sup>(13)</sup>.

Correlated the labor aspects, the nursing workers most affected by Burnout syndrome mentioned in article 6 were those who are hired temporarily, who have two employment links, who carry out their activities in the administrative sectors, working daily, and with little time to act in the unit<sup>(14)</sup>. The precariousness of the employment relationship can be used as a form of political control over the team, evidencing the various causes of turnover and serving as a reason for exclusion of its members<sup>(15)</sup>.

Regarding working hours, working at night is verified by article 7 as a risk factor for the development of the Syndrome<sup>(16)</sup>. This factor was related to another study<sup>(17)</sup>, in which night shift professionals obtained more altered frequencies in the dimensions of Burnout. This information was corroborated by another research<sup>(11)</sup>, claiming that work during the night disrupts the quality and amount of lost sleep, becoming a factor that generates stress for the professional<sup>(11)</sup>.

Article 9 shows that most of the professionals interviewed (45.6%) have a tendency to develop Burnout, and the diagnosis of the syndrome is low, confirming that ICU

workers are at risk of developing the disease<sup>(18)</sup>. A study<sup>(19)</sup> clarifies that adult and child ICU workers coexist with several stressors, such as the noise of the devices in the sector, workload, and absence or nonconformity of materials within an environment where such attention and care is required for the professionals<sup>(19)</sup>.

According to a survey<sup>(20)</sup> in which the number of professionals suffering from work in a teaching hospital in the southern region of Brazil was verified, nursing was the most affected class. Sápia T et al. apud Santana LL et al. reveals that nursing is a profession that develops its activities at accelerated rates due to the high demand for health services and the lack of professionals in the work environment. These situations lead to the removal of professionals, and to compromising the assistance provided to the patient due to the overload of activities<sup>(20)</sup>.

Workers are often absent from work because they do not bear the burden they are exposed<sup>(20)</sup>. Removals from the work show the wear experienced by the professionals, wear that damages and compromise the health and quality of life of individuals<sup>(20)</sup>. The workers' removal and mental illness could be avoided through good listening and support from the institution where they work<sup>(11)</sup>.

### **Nursing professionals profile affected by Burnout**

Article 1 shows that most of the nursing professionals interviewed for the study are female, as mentioned in other articles in the table<sup>(9-10,13-14,16,21-22)</sup>, which is explained in a study<sup>(23)</sup> regarding the composition of this category due to the fact that nursing is a profession historically related to the feminization of care, although an increase in the number of male professionals in this setting is remarkable<sup>(23)</sup>. Article 4 showed a greater incidence of the syndrome in the female gender with a percentage of 10.9%, which is equivalent to 13 professionals<sup>(21)</sup>.

Gehring GJ et al apud Santana LL et al reported that women often take up an activity in the labor market to contribute to family income, which can trigger a daily overload of activities, in view of the fact that particularities can not be forgotten such as hormonal factors that interfere with women's health, often leading to the greatest cause of absenteeism at work in this class<sup>(20)</sup>.

The individual diagnosed with the condition in Article 1 belongs to the female gender, single, without children, aged between 20 and 30 years old, performing their function in the day shift, no other employment relationship and not a physical activity practitioner<sup>(9)</sup>. In keeping with this same line of reasoning, Article 4 reveals that, by analyzing the sociodemographic aspects for the development of Burnout Syndrome, there was a higher percentage of professionals affected in the female, in single individuals, without children, with complete higher education, with income Between 5 and 10 minimum wages and with less training time, similar to the risk factors and results of articles 1,2 and 6<sup>(9-10,14,21)</sup>. The professional who presented burnout syndrome in article 9 is female, aged between 35 and 44 years old, with fixed contract, with professional experience over 16 years and from 1 to 5 years performing the position/function<sup>(18)</sup>.

Regarding the age group, younger professionals between 20 and 30 years old are cited as the most susceptible to develop the syndrome and have altered dimensions in their subscales<sup>(9-10,12)</sup>. Consistent with these results, article 3 argues that younger workers have a lack of self-confidence and knowledge that can lead to tensions and difficulties in action and decision making based on the inexperience of these professionals, a fact making them more prone to the syndrome<sup>(12)</sup>. These results disagree with article 4, demonstrating a higher prevalence of Burnout in nursing professionals between 41 and 60 years old<sup>(21)</sup>.

## FINAL CONSIDERATIONS

The analysis about the issue of the incidence of burnout syndrome among nursing professionals allowed us to verify what are the triggering factors of this pathology in this working class. Nursing is a professional category performing its activities at accelerated rates, most overwhelmed due to high demands in the health services and handling daily in its scope of work with several stressors such as pain, suffering, death, exposure to pressures by the patients and their respective relatives, difficulty in contact and relationship with the boss and even with the work colleagues, especially when it comes to nursing supervision and coordination, since they are the technical reference for all the rest of the team.

It could be observed through the integrative review of the literature selected for

this study that personal factors, such as gender, age, marital status, among others, are not the cause of Burnout. The autonomy of the professional, the structure of the workplace, the availability of materials necessary for the adequate care of the patient are aspects interfering in the work activity of these health professionals that added to the work overload, double and long hours, fixed shifts, maintenance of employees in sectors of low affinity, low salaries, lack of physical structure and material can come to cause the mental illness of these workers and consequently Burnout syndrome.

This pathology affects directly the care provided to patients and the professional's relationship with their work colleagues, as well as intervene in the quality of life and health of workers affected even outside the work environment, since they feel tired and exhausted both physically and psychologically, impairing and decreasing the intensity of their routine activities. Burnout is a public health issue since a tired and mentally ill professional cannot effectively care for a patient. Support and a better relationship between the employer and the nursing professional are necessary to reduce the risks and the manifestation of the disease in nursing. Nurses, technicians and nursing assistants need more workable forms, fairer wages, and more respect for the simple fact that they perform daily a task that demands such responsibility and dedication to others.

Finally, we believe that this work enables the reader to provoke new research and approaches on the subject since the subject is not exhausted with this work, especially when considering the complexity of the nursing profession. It is necessary to make a reflection as researchers, academics, and nursing professionals to search what can be done to soften the incidence of this disease that has increased every day more in those workers who are part of such an important category within the health services.

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