Burnout, Empowerment and Job Satisfaction in Human Services: A Comparative and Correlational Study of Women

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Abstract: This study was designed to investigate the influence of burnout syndrome and some job factors among women in the human services. A total of 190 subjects (95 female nurses and 95 female teachers) were randomly selected for the study. They were drawn from the government hospitals and schools in Ondo and Ekiti states. A questionnaire comprising three scales viz burnout, empowerment, job satisfaction and job involvement. Data were analysed using the t-Independent test analysis and the Pearson's Product-Moment Correlation analysis. Results revealed that burnout syndrome, empowerment and job satisfaction have impact (individually and collectively) on attitude to work.

Key words: Burnout, empowerment, job involvement, job satisfaction, organisation, human services

INTRODUCTION

Some job factors influence the behaviour of people in a workplace. These factors include burnout, empowerment and job satisfaction. Their impacts are most prevalent in the helping professions particularly among nurses and teachers. This study attempts to show the relations among these job factors with regard to the organisational environments of human service workers.

Burnout began as a colloquial term describing an emotionally depleted state among people in the helping professions. The term first found its way into the psychological literature in a study by Freuderberg (1974) in an issue of the journal of social issues. He edited on people working in free clinics. Recent attention to an understanding of the quality of working life and specifically work stress has contributed to growing research attention to the subject of burnout (Greenglass, 1991). Burnout has been defined as syndrome of emotional exhaustion, depersonalisation and reduced personal accomplishments (Maslach and Jackson, 1981). Emotional exhaustion involves feelings of being over-extended and drained by others. Depersonalisation refers to callous or impersonal attitudes towards one's clients or patients while reduced personal accomplishment refers to a negative evaluation of one's personal accomplishments and low feelings of competence in one's research with people.

Burnout then is a state of physical, mental and emotional exhaustion which results from a long-term involvement with people in situations that are emotionally demanding (Pines *et al.*, 1981). This can be observed among people particularly in human service professions in which professionals are required to care for others and provide them with assistance and support. Freuderberg (1974) noted that the free clinic movement in the United States displayed a research environmental pattern characterised by long hours, low pay, emotionally demanding encounters with client and co-workers and meagre resources.

Hence, working entirely on the basis of youthful enthusiasm eventually depleted the emotional energy of workers who were aware of a value conflicts implicit in providing a much needed but unacknowledged, service to the community.

In the same vein, Cherniss (1980) observed that burnout resulted from inconsistencies implicit in the role of a service professional. Throughout the professional socialisation process in training and initial job placement, human service workers build unrealistic expectations regarding what it means to be a professional.

In short, burnout results from a gap between the expectations of a professional and the reality of professional work particularly in public human service agencies. Worker's eagerly try to help people giving of themselves to improve the life of others and may burnout when they realize they are not achieving the sometimes-unattainable goals they have set for themselves.

Also, Maslach (1982) has argued that the extensive demands people make on themselves regarding their work, social relationships and their personal accomplishments increase vulnerability to burnout. This view is also supported by Golembiewski and Munzenrider (1988) who put that these small intense demands and the requirement of full commitment in every aspect of life contribute to

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burnout. Organisations also play a role in contributing to burnout. If one's effort goes unappreciated and one is shown very little emotional support, one's chance for burnout increases. It will be difficult for a discouraged person to summon the effort required for creativity and problem solving in any line of endeavours.

Some causes of burnout that have been identified include: lack of accomplishment, lack of intellectual feedback and debate, lack of praise or support for a job well done and lack of criticisms and evaluation by someone whose judgment they respect (Pines *et al.*, 1981). Similarly, a survey taken by among nurses revealed three factors leading to burnout. First noted was the amount of daily hassles causing frustrations. For example, the majority of the nurses had to carry weighty responsibilities, handle difficulties in dealing with patients, adjust to new equipment, face mounting expenses and put up with an irregular life style. The second factor was lack of support (not having someone to confide in) while the third factor noted was a feeling of helplessness resulting from lack of authority to change things.

Empowerment is a construct that links individual strengths and competences, natural helping systems and proactive behaviours to social policy and social change (Rappaport, 1981). Theoretically, the construct connects mental health to mutual help and the struggle to create a responsive community.

Perkin and Zimmerman (1995) suggest that empowerment compels us to think in terms of wellness versus illness, competences versus deficits and strengths versus weaknesses. Instead of cataloguing risk factors and blaming victims, empowerment research focuses on identifying capabilities and exploring environmental influences of social problems.

Rappaport (1987) defined empowerment as a process by which people, organisations and communities gain mastery over issues of concern to them. Psychological Empowerment (P.E) then refers to empowerment at the individual level of analysis. It includes the belief that goals can be achieved, awareness about resources and factors that hinder or enhance one's efforts to achieve those goals and efforts to fulfil the goals.

Thomas and Velthouse developed a multidimensional intraper-sonal conceptualisation of empowerment in a work place context. Similarly, Spreitzer (1982) identified a set of dimension using a thematic analysis of the interdisciplinary literature on empowerment resulting in four characteristics of psychological empowerment in the workplace. This includes a sense of meaning, competence, self determination and impact.

Meaning or purpose refer to a fit between the needs of one's work role and one's beliefs, values and behaviours. Competence or self efficacy specific to ones work involves a belief in ones capabilities to perform work activities with skill.

Self determination refers to a sense of choice in initiating and regulating one's actions, while impact is the degree to which one can influence strategic, administration or operating outcomes in one's department or work unit.

Neilson (1986) argues that changing the socio-structural context within the organisation is not a sufficient condition for changing individual behaviour. Murrel is of the view that the empowering path is a long one and that the first step must be a mental transformation which will slowly lead toward confidence in the rightness and effectiveness of the process.

It is, therefore important to understand how the individual perceives his or her environment since individuals within the same environmental context are likely to view their work environments quite differently (Lawrence and Lorsch, 1967).

The basic proposition is that when individual view their work environment as providing opportunities for rather than constraints on individual behaviour they feel empowered.

Anyone who works in an organisation soon develops a set of attitudes about research usually referred to as job attitudes. Like other job attitudes, job satisfaction is composed of the affective, cognitive and behavioural elements. The concept of job satisfaction is much more of a transient state of the employee.

It is the amount of pleasure or contentment associated with a job (job satisfaction) that lead to productivity, particularly for jobs that involve dealing with people.

Although, it is somehow difficult to say how many people are satisfied with their jobs, natural surveys conducted over the years have shown that the percentage of employees who described themselves as satisfied or very satisfied with their job has increased. In Nigeria, it is often noticed that human helpers, particularly nurses and teacher's are not treated well. This is shocking because health care and education are highly important in every community.

This group of workers who spend most of their time interacting with people in some kind of distress are required to be empathetic, caring and resourceful in their roles as service providers. Unfortunately, they are treated with disdain. Their expectations of making the world a

better place are soon dashed. This group of workers, mostly women have less access to job related rewards such as high incomes, social status and autonomy. In nursing for example, erratic hours, relatively low pay, little room for professional advancement and lack of authority may contribute to burnout, helplessness and job dissatisfaction.

In the light of the earlier, it is hypothesised that burnout will be negatively correlated with empowerment and job satisfaction; empowerment will be positively correlated with job satisfaction; nurseswill express a significantly higher level of burnout than teachers and that teachers will significantly score higher than nurses on empowerment.

MATERIALS AND METHODS

Subjects: One hundred and ninety subjects (95 female nurses and 95 female teachers) participated in the study. They were drawn from the government hospitals and schools in Ondo and Ekiti States.

The nurses had registered nursing qualification or equivalent while the teachers had National Certificate in Education (NCE) or University degree. Only females were used because this is the sex that dominates these two professions.

Instruments: Three different scales were put together in the questionnaires that were used in the data collection. The questionnaire was divided into four sections, A-D. Section A was used to tap information on demographic data of subjects. Section B of the questionnaire contained the burnout scale developed by Smith.

The scale consists of 20 items, the response of which is either True (T) or False (F). Section C consisted of the empowerment scale as described in Spreitzer (1982). It contained 12 items spread on a 7-point, Likert response format. It has been found to correlate with innovative behaviour as assessed by subordinates (0.31) and by superior (0.24).

It has also been found to correlate with effectiveness as assessed by subordinates (0.22). Section D of the questionnaire consisted of the job satisfaction and involvement scale.

It contained a total of 37 items. Items 1-24 were developed by Ugwuegbu using a 5-point Likert- format. The scale has a validity coefficient of 0.94. Items 25-37 is the Kanugo (1982) job involvement scale. This scale has been used by many Nigerian researchers.

Data collection and analysis: The questionnaire was administered to the 190 female nurses and teachers who participated in this research. It was impossible to administer all copies of the questionnaire in a day because of the locations of the hospitals and schools. After recovering the questionnaires, subjects' scores were correlated using the Pearson's Product-Moment Correlation analysis. The student t-independent test, mean scores and standard deviations were also computed.

RESULTS AND DISCUSSION

Table 1 shows that burnout correlates negatively with job satisfaction for nurses ($p < 0.01$) and with empowerment for teachers ($p < 0.01$). Also, empowerment correlates significantly (negatively) with job satisfaction for both nurses ($p < 0.01$) and teachers ($p < 0.01$).

Table 2 shows that teachers expressed a higher level of burnout than nurses. Nurses on the other hand, scored higher than teachers on empowerment and job satisfaction.

Burnout (t (93)   =   3.40, $p < 0.01$)
Empowerment (t (93)   =   3.29, $p < 0.01$)
Job satisfaction (t (93) =   3.50, $p < 0.01$)

Table 2 shows that there is a significant difference in level of burnout empowerment and job satisfaction shown by nurses and teachers. Teachers expressed a higher level of burnout than nurses. However, nurses scored higher than teachers on both empowerment and job satisfaction. From Table 1, it can be observed that a significant negative correlation exists between burnout and job satisfaction for nurses. This indicates that the more burnout experienced, the lesser the job satisfaction and vice-versa.

Table 1: Showing correlation matrix of the three jobs factors for nurses andteachers

Variables	Nurses			Teachers		
	1	2	3	1	2	3
Burnout	-	-0.06	-0.5**	-	-0.35*	-0.2
Empowerment		-	-0.31*		-	-0.84**
Job satisfaction			-			

*Significant at $p < 0.01$, df = 93, **Significant at $p < 0.001$

Table 2: Showing mean scores, standard deviation and t-test of scores of nurses and teachers

Measures	Nurses		Teachers		
	X	Sd	X	Sd	t
Burnout	2.49	2.3	3.37	2.71	3.40*
Empowerment	72.95	8.42	69.94	9.34	3.29*
Job satisfaction	97.78	13.67	92.49	15.76	3.50*

*Significant at $p < 0.01$, df = 188

Result did not however show any such relationship for teachers. Nevertheless, a similar negative correlation was found between empowerment and burnout for teachers only. This is to say that the more empowered a worker, the lesser the level of burnout experienced.

Interestingly, intrapersonal empowerment has been found to be negatively associated with powerlessness (Rappaport, 1987; Seligman, 1975). Since helplessness is a factor leading to burnout, it can be concluded that a negative correlation exist between empowerment and burnout.

A significant negative correlation was equally observed between empowerment and job satisfaction for both nurses and teacher suggesting that the more empowered a worker, the lesser the job satisfaction and vice-versa.

Sawyer (1992) has argued vociferously that if people do not know the extent of their decision making authority, what is expected of them and how they will be judged, they tend to hesitate to act and thus feel powerless. Role ambiguity resulting from lack of empowerment according to Sawyer 1992) leads to less intrinsic satisfaction and autonomy.

From Table 2, it is seen that teachers differed significantly from nurses on the level of burnout experienced. Teachers expressed a higher level of burnout than nurses. This is probably because nurses are more recognized and respected in Nigeria than the teachers. These little elements of social support believed to extend to nurses and not teachers may moderate the impact of stress on burnout (Kessler, 1982; Roskies and Lazarus 1980). Nurses however, scored higher than teachers on both empowerment and job satisfaction.

CONCLUSION

This study has shown that burnout, empowerment, syndrome and job satisfaction; individually and collectively have impact on attitude to work. The study is however, limited by the use of women only. Further studies should be done to see the effects of burnout syndrome, empowerment and job satisfaction on male nurses and teachers.

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