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**BURNOUT IN NURSES**

**Causes and effects of burnout on the personal and working life of nurses**

**A literature review**

**Thesis**

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ABSTRACT

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<p>Burnout in nurses has a negative and severe impact on their personal and work life. This goes a long way to even affect the safety of patients and the organization as a whole.</p> <p>The purpose of this thesis was to study the causes of burnout in nurses and what effects it had on their personal and work life. The aim of this thesis was to provide knowledge about how burnout affected nurses' personal lives and their work-life.</p> <p>The authors carried the study based on literature review. Data used in the study was collected from reliable academic databases that were offered at Centria University of Applied Sciences which included Science Direct, Cinahl (EBSCO) and SAGE. Content analysis method was used to analyze research findings.</p> <p>Results from this study show that organizational, occupational, social and personal trait factors are the main contributors to burnout in nurses.</p> <p>The results show that burnout is common in nurses working in different departments and settings. Burnout in nurses is worldwide problem. The effects of burnout are seen to affect nurses personal and work lives in a negative way.</p> <p>Nurses' health gets affected negatively physically, mentally and emotionally. Burnout causes emotional exhaustion, mental health conditions and physical exhaustion in nurses. Burnout causes a general negative attitude towards life, which even results to suicide tendencies, changing of work places and many sick-leaves among nurses. Nurses find it hard to balance work life, personal and family life becoming depressed. Burnout hugely affects the way nurses perform their duties at work. They become careless in decision making, are more absent from work, less innovative, develop quitting attitude towards nursing profession and this causes risks to patients health and safety. Nurse leaders with burnout are prone to leaving their current positions and fail to mentor future leaders. Student mentorship is affected negatively by burnout.</p>		

**Key words**

Burnout, Emotional exhaustion, Depersonalization, Nurses, Satisfaction, Stress,

**ABSTRACT**  
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## 1 INTRODUCTION

According to Maslach (2001) job burnout is defined as a prolonged reaction to chronic interpersonal stressors as a result of one's job. Burnout is comprised of three important aspects which include emotional exhaustion, depersonalization and reduced personal accomplishment. Burnout is personal stress experience that is described in a context of difficult social relationships and involves personal perception of self and others.

According to (WHO, 2017) burnout comes with psychosocial risks, which go hand in hand with the experience of work-related stress. Stress at work can cause or lead to heart related diseases and depression. Lack of control, nursing job demands, lack of appreciation and low salary are risk factors for mental and physical health problems. This consequently leads to strain on public spending for increased costs on healthcare

Burnout in nurses working in a busy hospital set up affects the well-being of the nurses in terms of their emotional, physical and mental aspects. Nursing care that is delivered by nurses suffering from burnout might not meet the required standard of expectation posing harm to patients health which is should always be held with high regard (Duffin, 2012.)

There is need to do a more comprehensive study and research on this topic of burnout of nurses because despite the available evidence, there has not been priority in reducing, managing and preventing of psychosocial risks when developing policies concerned with healthcare workers. A recommendation by the Commission for the Social Determinants of Health (2008) stated the evidence strongly suggests the need to expand the remit of occupational health and safety to include work-related stress and harmful behaviors (WHO, 2017.)

Burnout in nurses is a topic that interested us after having clinical practices in the hospital environment (internal medicine and surgical placement). Having read literature about burnout in nurses, it was easy to identify burnout among nurses during our work practices and therefore it was important for us to understand the cause behind it and how it does affects their personal and work lives. Burnout is a topic that has been studied previously but still solutions to it are not available and that is the reason why it is still present now, therefore there is need for further studies.

The purpose of this thesis is to study the causes of burnout in nurses and what effects it has on their personal and work life. The aim of this thesis is to provide knowledge about how burnout affects nurses' personal lives and their work-life. Our interest in writing this thesis is getting to know how we can manage the causes of burnout in our future career as nurses by understanding the causes and effects.

## **2 THEORETICAL FRAMEWORK**

This chapter generally talks about the nursing profession and burnout description in order to give the reader a clear view of the basic concepts of this study.

### **2.1 Nursing profession**

To become a nurse in Finland, one must undergo specialized education and training in authorized institutions. This takes a couple of years of both practical and theoretical training. A government authority that issues professional licensure to students who have completed and passed their nursing studies validates it. In Finland, this authority institution is called Valvira (valvira, 2017.)

Nurses play a very important role in healthcare institutions and comprise of the largest workforce of any care institution. Nurses act as direct caregivers who serve hospitals majority of the time. This gives nurses a unique perspective on both hospital operations and patient care. Often nurses are the intermediary between the doctors and patients and appear to be in the front line of health services (Belachew, Molla & Tadesse, 2016.)

Nurses work under oath, a code of ethics and established working standards, which they must follow. Nurses have been bestowed upon them trust and thus are trusted by law to provide health care to patients. Through the guidance of learned skills, ethics, working standards and the law, nurses carry their responsibilities in a way that is consistent with quality of nursing care and adherence to ethical obligations of the nursing profession (Olson & Stokes, 2016.)

Nursing profession is a busy profession practically. Many nurses in Finland work in shifts of mostly eight to twelve hours a day. Most patients in different health care setting require round-the-clock care and thus nurses work in shifts. Nursing work is an all time job including weekends and holidays. In some health care setting like most hospitals, nurses are also, on call. Most nurses might find it challenging to balance their work life, family life and social life due to their busy profession (Yılmaz, 2017.)

The scope of work for nurses depends on the work place and departments. Usually, nurses have a broad scope of work. Nurses who work in emergency centers and hospitals have a lot of work than

nurse in homecare. Due to the workload increasing, Nurses job description might change to accommodate the increased scope of work (Omer et al 2016.)

Whereas nursing profession is all about providing care to patients, nurses can themselves be victims of bad health as nursing profession exposes them to health hazards. Nurses are prone to health hazards due to the fast paced, ever changing and unpredictable health care work environment. This places nurses under the risk of injuries and illnesses due to high occupational stress (Jager, Nolte & Temane, 2016.)

Nursing profession is deemed as very stressful. Nurses identify occupational stress as a major concern. This stress is mostly caused by the nursing work environment, the nursing work demands, psychosocial stressors, physical labor, workload and even the emotional labor involved in nursing and care work and low salary rates. All these have long-term and short-term effects on nurses like stress related illnesses in general. These stress factors are one major reason for nurses' turnover, which has caused a shortage of nurses worldwide (Yılmaz, 2017.)

Some nurses suffer from compassion fatigue in the course of their career. Compassion fatigue, also known as secondary traumatic stress, is a condition characterized by a gradual lessening of compassion over time. The condition is common among individuals that work directly with trauma victims such as nurses and health care workers in general. People who suffer from this condition may exhibit symptoms like constant stress and anxiety, sleeplessness or nightmares, hopelessness, a decrease in experiences of pleasure, and a pervasive negative attitude. This condition can have adverse effects on individuals both personally, and professionally. It decreases productivity, the inability to focus, and the development of new feelings of incompetency and self-doubt (Sinclair, Raffin-Bouchal, Venturato, Kondejewski & MacDonald, 2017.)

### **2.1.1 Nursing work environment**

The environment in which the nurses work determines a lot the level of satisfaction. If nurses are dissatisfied in one way or the other, they can suffer from burnout. Long working shifts, organizational support in terms of nurse-patient ratios and teamwork are aspects that need further study to determine the role they play in development of burnout in nurses working in hospitals (Russel, 2016.)

Nurses work environment plays a vital role in the quality of care the nurses provide. The atmosphere of the health facility or hospital is very important as it affects the quality of care the patients receive; the patients and the caregiver's safety and even caregivers job satisfaction. Issues like nurses staffing directly affect the patients' health outcomes, quality of care they receive, length of hospital stay and even chances of death (Cho, Sloane, Kim, Kim, Choi, Yoo, Lee & Aiken, 2015.)

In their environment of work, nurses are exposed to diseases, injuries and even violence. A Nurse's work is to look after sick people and this puts them at a risk of contracting what disease the patients have if the nurses do not protect themselves. Occupational injuries are common in nursing environment since the work entails physical labor. Nurse are trained how to handle physical labor situation in order to prevent injuries. Violence in nursing work environment is not anything new in most countries. It is typically perpetrated by non-staff members e.g. Patients' family members (Chang & Cho, 2016.)

Heavy workload has always been a major problem in nursing profession worldwide. Increased demand for nurses and decreased supply of nurses, increased overtime working and reduction of patient length of stay in hospital are the factors that has made nurses experience higher workloads than before. High patient acuity, the hospital working systems, and nurse's expectations contribute heavily to nurse's workload (Gerolamo & Roemer, 2011.)

Increased nursing workload has a direct relationship with nursing work conditions and job dissatisfaction. Job dissatisfaction results to nurse's turnover, poor job performances, decreased job morale and motivation, absenteeism, threat to patient care quality and overall organizational performance and effectiveness (Wazqar, Kerr, Regan & Orchard, 2017.)

Due to increased workload, nurse's responsibilities have changed too. Nowadays nurses find themselves doing tasks that are not in line with their qualifications. In some health care institutions, nurses perform non-professional tasks such as transporting patients; housekeeping duties; delivering and retrieving food trays and ordering, coordinating, or performing ancillary services (Omer, Suliman & Moolab, 2016.)



### **2.1.2 Compensation and incentives**

Nursing compensation and salaries have been a controversial topic since nursing profession is deemed as low wage profession. Low wages and compensation in nursing profession has been a factor in job dissatisfaction and is a reason nurses leave the profession. Nurses deserve a good salary that reflects the amount and scope of workload, their education level and experience level. Compensation can be done also in non-monetary way. Decreasing working hours; job promotions and performance-based payment are recognized non-monetary ways of compensations to nurses (Glaze & Gyurak. 2008.)

Climbing nursing career ladder in Finland can be a slow process for nurses who are ambitious to further their career. Most nurses work in almost same positions for long time of their career. Although furthering one's education may result to an increment in salary, it may not guarantee a career climb. This can be very demotivating for nurses and may sometimes lead to nurses quitting their careers (Kosonenv & Houtsonen, 2007.)

### **2.2 Burnout in nurses**

According to Maslach (2001) job burnout is defined as a prolonged reaction to chronic interpersonal stressors as a result of one's job. Burnout is comprised of three important aspects which include emotional exhaustion, depersonalization and reduced personal accomplishment. Burnout is personal stress experience that is described in a context of difficult social relationships and involves personal perception of self and others.

Emotional exhaustion refers to feeling of being emotionally drained and having emotional resources depleted. Workers lack enough energy to encounter another day or even another person. Conflicts and workload at work are risk factors for emotional exhaustion. The emotional exhaustion aspect of burnout is represents the individual basic stress element. According to (WHO, 2017) emotional exhaustion can be noticed when a person feels that he has little to offer others. Feelings such as hopelessness, helplessness, depression, impatience, anger, irritability high tension, conflicts, courteousness and decreased friendliness may be experienced. Physical signs and symptoms may also be experienced such as weakness, increased susceptibility to sickness, muscle tension, headache, back pain, chronic fatigue, sleep disturbances, frequent headaches, nausea and various somatic complaints.

Depersonalization refers to negative, cynical or extremely detached response to other persons. It normally occurs as a response to high burden of emotional exhaustion. It develops first as a self-protective mechanism but with time there is risk of dehumanization (Maslach, 2001.) According to (WHO, 2017) depersonalization causes people to alienate from others. It cause people to view other people negatively and causing hate for those previously cared for.

Reduced personal accomplishment refers reduced feelings competence and work productivity. These feelings of inefficacy have been greatly linked to inability to cope with job demands and can be worsened by lack of opportunities to develop professionally and lack of social support (Maslach 2001.) According to (WHO, 2017) with reduced personal accomplishment there are feelings that little is being achieved and whatever that has been done is not worthwhile. These feelings somehow may be true but in some cases negative attitudes causes one not to correctly evaluate the outcome of work.

Nurses experience moral distress as part of burnout process. Moral distress is the psychological vulnerability and accompanying negative feelings that are experienced when a person decides to do something but fails to do it in the right manner due to challenges. Psychological inflexibility and judging oneself is common among nurses experiencing burnout (Fatima et al, 2013.)

Fatigue is a common symptom of burnout among nurses. Fatigue in relation to burnout arises from exposure to increased workload and shortage of nurses in hospital departments. When fatigue becomes extreme, nurses start to experience mental and physical symptoms that either causes them to leave work or absenteeism. As nurses work in different health institutions, daily they are faced with stressful situations at work environment and due to the increased workload at times they are under constant emotional tension, mental and physical fatigue. This goes ahead to affect the care that they deliver to patients (Ugwu, Ugwu, Enwereuzor & Fimber, 2017.)

Burnout in nurses develops gradually and may remain unnoticed by the nurses suffering from it. A nurse experiencing symptoms that indicate burnout may not seek help until counselling is suggested by a close friend, coworker or a family member. One of the most common barriers to counselling among nurses suffering from burnout is the fear of stigmatization from family members or coworkers for not being able to cope with stress that is often assumed to be part of the nursing profession (Haller & Chen, 2014.)

### **2.2.1 Effects of burnout on nursing care**

Burnout among nurses has a negative effect on the delivery of quality nursing care. A high level of support demanded by patients or even relatives in the hospitals increases the chances of nurses experiencing burnout. As burnout develops, it causes nurses into behaving in a manner that lacks compassion as they become detached from offering supportive care to patients therefore negatively affecting quality of nursing care (Russel, 2016.)

When nurses are suffering from burnout, the quality of care they provide goes down. A nurse who experiencing burnout has challenges in maintaining a good healthy and effective relationship with a patient as well as relatives. Burnout is very closely associated with poor reporting of negative patients' outcomes, poor quality of care, increased number of medical errors and high incidences of infections (Shandong, Wei, Hong, Li & Zhang, 2017.)

As burnout develops in nurses, a feeling of dissatisfaction among becomes evident. Nurses feel that they are not satisfied with their jobs and they decide to quit work in such of better careers that are less stressful. In this kind of situations where nurses have a feeling of dissatisfaction among themselves they lose self –confidence and find it difficult to complete or engage in daily nursing duties and responsibilities. Failure to carry out their duties effectively and efficiently has a negative impact on their work as well as quality of nursing care (Zhu, Zhang, Yo, Liu, Zheng, Fang, Lu, Guang, Wang, Wu & Zhu, 2014.)

### **3 RESEARCH PURPOSE, AIM AND QUESTION**

The purpose of this thesis is to study the causes and effects of burnout on the personal and work life of nurses. The aim of this thesis is to provide knowledge about how burnout affects nurses' personal lives and their work-life.

**This thesis research questions are:**

1. What are the factors contributing to burnout in nurses?
2. What are the effects of burnout on nurses' personal lives and work lives?

## **4 METHODOLOGY**

This chapter explains the type of research the authors conducted (literature review), data collection, data analysis and ethical considerations.

### **4.1 Literature review**

Our method of research is a literature review. Literature means academic scholarly writings. By using literature reviews, we looked up and researched a collection of scientific articles that were related to the topic of study. Literature review is done by researching previous and existing studies and scholarly writings that are sharing the same area of interest and knowledge. Literature review comprises of these concepts; Search, survey, list, enhance knowledge and a reporting tool. To enhance information and knowledge, there is an important need to review previous and existing knowledge and information (Kant & Patil, 2014.)

Once research questions are identified, the authors review important literature that consists of data, published that is closely related to the topic in question. Literature search is conducted in journals and databases that are of relevance. Literature review is used as a method of research for many reasons that include studying already known information regarding a subject and acknowledging authors through referencing. It is also used to find gaps in knowledge by acquiring new information from previous studies (Holloway, 2013.)

According to Tonnete and Rocco, 2009, Literature reviews have five distinctive functions that are, building a foundation, demonstrating how a particular study advances knowledge and conceptualizing a study. Literature review also assesses research designs and instrumentation and finally seeks to provide a point of reference for interpretation of findings.

### **4.2 Data collection**

The data collection was conducted through qualitative method. The data that was used to compile this thesis was collected from reliable academic databases that are offered at Centria University of Applied Sciences .The databases that were used were Science Direct, Cinahl (EBSCO) and SAGE. The authors formulated key words that to aid in easy access to relevant information. The keyword used were

“BURNOUT”, “NURSING”, “EFFECTS”, “CAUSES”, “NURSES WORK”, “CONSEQUENCES” and “PERSONAL LIVES”. The criteria for searching the databases was as follows; use of keywords and abstract, applying filters corresponding to the inclusion and exclusion criteria, checking article titles relevant to the thesis and reading the abstracts of the articles. Reading of the abstracts helped the authors determine the relevance of the data in relation to the topic of study. The authors also decided to read the shortlisted articles more comprehensively and finally settled down on 22 articles.

TABLE 1. Initial search results

Search Terms	Science Direct	SAGE	Cinahl (EBSCO)
Burnout	27648	9629	1674
Burnout in nurses	5799	3688	679
Burnout causes in nurses	3333	2391	694
Nurses burnout and reasons	2896	2243	6
Nurses burnout and Effects	3285	3223	70
Nurses work & Burnout	5183	3593	104
Burnout and Nurses personal lives	1027	1490	4
Nurses burnout and consequences	2335	367	7

#### 4.2.1 Inclusion and exclusion criteria

The authors used inclusion and exclusion criteria to narrow down the search into a few articles that would be used for the study.

TABLE 2. Inclusion and exclusion criteria for chosen articles

Inclusion Criteria	Exclusion Criteria
Articles that were relevant to the topic burnout in nurses	Articles that lacked nursing perspective were excluded
Articles in full text	Articles not available in full text.
Articles in English language	Articles written in other languages other than English

Articles that were free of charge	Articles requiring payment to view were excluded
Articles published from 2008-2018.	Articles published before 2008
Only articles from academic data bases such as Science Direct, SAGE, Cinahl( EBSCO)	Articles from other non- academic data bases

### 4.3 Data Analysis

According to Kyngäs & Elo, (2007), qualitative content analysis is a common method of data analysis that is used in nursing studies. It can also be termed as a way of analyzing documents. The importance of content analysis is that it allows better understanding of data as it is possible to distil words into few categories that are related content wise. Through this categories phrases, words and phrases can share the same meaning. Content analysis enables researchers to make valid inferences of data with the aim of providing new insights, knowledge as well as representation of facts.

Selected articles were read through a couple of times to identify patterns and interpret raw data correctly for better understanding. Raw data that was collected from scientific articles was organized into themes in regard to the research questions. The themes were indicated as sub-categories. The sub-categories were classified further depending on concepts and similarities so as to come up with main categories. Authors identified thirteen sub-categories and four main categories in response to factors contributing to burnout in nurses. Eight sub-categories and two main categories were identified in response to effects of burnout on nurses personal and work lives. Appendix 1 and 2 shows how raw data was grouped to form sub-categories that further resulted in main categories

### 4.4 Ethical consideration

During the writing of the thesis, there was constant referral of the Centria academic writing guidelines. These guidelines helped the authors to avoid plagiarism and to acknowledge other authors work through referencing. Access to the databases such as Science Direct, EBSCO and SAGE was through the Centria University of Applied Sciences library to ensure that data gathered was from reliable sources and that the data used was authentic. The authors were honest with the findings and bias was

completely avoided. Articles chosen for the literature review were examined and analyzed for significant amount of time to ensure that information gathered was true and reflected what was found.



## **5 RESULTS**

This chapter presents findings from content analysis of the 22 articles and the research questions are answered and explained in this chapter.

### **5.1 Causes of burnout in the nursing profession**

The results of the content analysis show that there are four main categories that cause burnout in nurses; occupational factors, organizational factors, personal traits factors and social factors.

#### **5.1.1 Occupational factors**

Occupational factors refer to the aspects found in the work place that contribute to burnout in nurses. Occupational factors have the most impact and significant role on burnout in nursing profession as shown below.

##### *Workload*

Workload refers to work that a nurse is expected to do within a set of time. Nurses all over the world have a lot of responsibilities. These responsibilities must be met within a set period of time or work shift. In most hospitals, the nurse to patient ratios is imbalanced. The ratio imbalance creates even more responsibilities for nurses. This creates a lot of pressure, which results to stress when trying to accomplish many tasks within a short period (Bae, Shin, & Park, 2018). The time limit and imbalanced nurse to patient ratio has been shown to affect the quality of patient care. Huge workloads have been shown to cause job dissatisfaction, depersonalization and eventually burnout in nurses (Panagopoulou, Montgomery, Spânu & Băban, 2015.)

### *Shift work*

Most nurses work in different shifts throughout their career. Work schedules consist of morning shifts, evening shifts and night shifts. Working in different shifts results to disruption and instability of normal life in nurses' personal lives. This instability causes a major life challenge for nurses who have to balance personal life and work. Nurses with families find it especially difficult to balance family life with unfavorable work shifts. Lack of a good work shifts and rest days balance causes fatigue, exhaustion and eventually burnout (Panagopoulou et al, 2015.)

### *Multi-professional relationships*

A multi-professional team consists of professionals from the nursing profession, doctors, physiotherapists, laboratory specialist and other health care workers. They all have different responsibilities but work in a team to accomplish same goal. An effective teamwork has been proved to improve job attitudes, performance and satisfaction (Ping, Li& Cheng, 2018). On the other hand, ineffective teamwork has been shown to cause work conflicts, lack of trust and even bullying affects the performance and may lead to work related stress and exhaustion (Panagopoulou et al, 2015).

Our material shows that poor nurse to doctors working relationship causes stress and job dissatisfaction. This leads to a poor quality patient care. A breakdown of nurse and doctor relationship leads to work frustration (Chen, Zhao & Liu, 2015). Moreover, lack of support by other professional in the health care system to nurses causes emotional exhaustion, job dissatisfaction and hence burnout (Panagopoulou et al, 2015.)

### *Staffing and resources*

Lack of resources and inadequate staffing contributes to stress and burnout among nurses. Nurses' job performance is greatly affected by lack of enough resources. Nursing job demands are very high and so under staffing put a lot of pressure to the nurses who are working (Bae et al, 2018). Lack of resources and under staffing hinders nurses to effectively do their work (Ping et al 2018). This leads to poor patient outcomes due to negative impact on nurses' physical and mental wellbeing. Under staffing and lack of resources is shown to cause depersonalization, emotional, physical exhaustion and hence job dissatisfaction (Panagopoulou et al, 2015).

### *Job description conflict*

Nurses' role depends on their place of work or department and also level of education. Nursing roles keep changing and nurses find themselves performing tasks that are not part of nursing care. This has resulted to job description conflict (Bae et al, 2018). To nurses, this leads to frustrations, stress and negative feelings about nursing professional. If these negative emotions about nursing profession are not well managed, they lead to job dissatisfaction and burnout (Ping et al, 2018).

Nurses' job descriptions lead to uncertainty and some nurses cannot understand what is expected of them (Chen et al, 2015). This creates role ambiguity; a situation whereby an employee does not know their role because it is not well described which leads to frustration, poor job performance and job dissatisfaction (Ping et al 2018.)

### *Lack of recognition, appreciation, value and empowerment*

Nurses want to feel recognized and appreciated at their places of work. Nurses want to be involved in decision making process for matters that concern them (Chen et al, 2015). This makes them feel that they have control over their work. Loss of control over their work increases pressure and stress levels of nurses in the course of their work and hence job dissatisfaction (Ping et al 2018.)

Nurses face a lot of demoralizing challenges throughout their careers. These challenges include disrespect from fellow health care workers, emotional and physical abuse from dissatisfied patients and their relatives and being subjected to dangerous situations by substance users. This leads to feeling of undervaluation, negative attitude about the nursing profession and depersonalization among nurses (Chen et al, 2015). There is evidence that valuing nurses and empowering them leads to great work performances. Undervaluation contributes to stress emotional, mental and physical exhaustion and hence burnout (Ping et al 2018.)

### **5.1.2 Organizational factors**

Organizational factors means factors that cause burnout in nurses at the management level of the hospitals or health facilities.

#### *Organizational management*

Organizational management refers to the planning, controlling resources, leading and organizing resources within an organization with the aim of attaining the organization's goals and objectives. A hospital may have upper organizational management and unit level management. Lack of better salaries, poor working conditions, lack of resources and absence of preventive measures to combat burnout are some of the organizational management factors that lead to burnout in nurses. (Ping et al 2018.)

#### *Lack of nurses' involvement in decision making process*

Upper organizational management plans and controls policies for the organization, salaries and remunerations, appointments and nurse-patient ratios, shifts and decisions concerning patients' safety. These decisions directly affect nurses therefore lack of nurses involvement in these decision making process contributes to job dissatisfaction which leads to burnout (Ping et al 2018.)

#### *Unit level management*

Unit level management includes head nurses, charge nurses and supervisors. The unit level managements work is to ensure availability of resources, team building, supervision of daily tasks etc. Poor unit level management is shown to cause negative attitude towards work (Panagopoulou et al, 2015). Lack of resources leads to poor staffing and work overload. Improper unit level supervision leads to unclear and undefined work roles. Nursing management has effect on the development of burnout among nurses. Poor management at upper organizational level and unit level directly leads to stress and eventually burnout (Chen et al, 2015.)

### 5.1.3 Personal traits factors

The five-factor personality traits theory is a model based on language descriptions of personality. It is characterized by openness, neuroticism, extraversion, conscientiousness and emotional intelligence (Dollard, Bakker, Vander zee & Lewig, 2014.)

Openness is characterized by good social behaviors, ability to express oneself, trust and having a good relationship with co-workers (Dollard et al, 2014). People who have neuroticism character are likely to be moody, easily frustrated, in a depressed mood, fearful, jealousy and even lonely. They respond worse to stressors (Fuente, Solana, Gómez-Urquiza, Cañadas, Garcia, Ortega-Campos, 2017.)

Extraversion is characterized by being enthusiastic, assertive and talkative. They generally appear to be energized and work well in groups. The opposite of this character is introvert. Introverts are reserved and their energies dwindle in interactions. They enjoy time alone and trust is usually an issue of significance. Goal-oriented individuals, great skills in organization, objective and goal driven people (Fuente et al, 2017) characterize conscientiousness. Emotional intelligence is characterized by the ability of a person to identify, recognize and manage their emotions and those of other people (Dollard et al, 2014.)

Extraversion and emotional intelligence are traits that help with personal accomplishment. Burnout is shown to be caused by the absence of openness, extraversion and conscientiousness and the presence of neuroticism. This suggests that personal traits can help to prevent against developing burnout (Dollard et al, 2014.)

### 5.1.4 Social factors

Social factors refer to sharing of certain characteristics by people in a society. This may include type of occupation, profession, wealth, age, marital status, sex, education level, income level and even religion. Significant predictors of burnout included age, job status, job stressors like workload, experience in conflictive interaction, death situations and role ambiguity; and personality. There was significant relationship between burnout and age, length of employment and educational level (González, Garrosa, Jiménez & Liang, 2008.)

In accordance to the results from the articles, burnout affects older nurses who have been working for long compared to young nurses who are just entering the profession. Despite these findings, both young and old nurses are vulnerable to burnout. (González et al, 2008).

Age is a big factor in nurses who exhibited higher levels of burnout (González et al, 2008). Even though these articles results are showing younger nurses having burnout, there is no conclusive relation of burnout, age, emotional exhaustion and depersonalization as other studies has shown that burnout affects all nurses regardless of their ages (Fuente, Solana, Gómez-Urquiza, Cañadas, García, Ortega-Campos, 2015).

Studies show that both male and female nurses are prone to depersonalization. Female nurses were shown to suffer more with emotional exhaustion (González et al, 2008). Other factors like social class, religion and marital status or income are not fully explored in these articles (Fuente et al, 2015).

## **5.2 Effects of burnout on nurses' personal lives and work lives**

Burnout has different effects on nurses in terms of their work and personal lives. The effects of burnout are psychological, physical and interpersonal. As nurses suffer from burnout the quality of nursing care is negatively affected. This chapter explains which effects burnout has on nurses' work and nurses personal lives.

### **5.2.1 Poor quality of life**

This chapter explains and shows ways in which burnout affects nurses' personal lives. Burnout causes nurses to have poor quality of life by negatively affecting their subjective well-being, health status, family and interpersonal relations. Abuse of drugs, alcohol and medications are common consequences of burnout in nurses.

### *Nurses health and subjective wellbeing*

There is a relationship between nurses' burnout and subjective wellbeing. Job burnout has a negative influence on the subjective wellbeing of nursing staff. Once the nurses' energy and effort which is often used to adjusting to work pressure is depleted, it leads to possibility of psychosomatic illnesses that eventually affect the subjective wellbeing (Wang & Qu, 2014.) Burnout causes nurses to have a low sense of personal accomplishment, low self-esteem making them angry, apathetic and hostile at work places. When it accumulates for long periods of time it affects mental health, productivity and quality life ( D'silva, F. & Abraham, 2013).

Nurses' mental, physical and emotional health is greatly affected by job stressors like work load and job demands. Acute effects of work related stress in relation to burnout affect a lot of nurses' health. (Dardiotis, Konstantinou, Bonotis, Sokratous, Siokas, 2018). The increased burnout levels are accompanied with changes in depressive symptoms and the desire to completely abandon the nursing profession. Among the new graduated nurses burnout is related to the feeling of not being adequately prepared for a nursing job, and high levels of performance needed leading to depression (Gustavsson & Rudman, 2011). According to Wolniewicz & Nowakowska, (2014,) burnout causes psychological and emotional reactions among nurses. Psychological reactions are indicated by rise in arterial blood pressure, chronic fatigue and stomach problems. Emotional reactions are indicated by presence of irritability, anxiety and nervousness.

### *Work-life balance, Interpersonal and family relations*

Burnout creates problems in all aspects of the nurses' lives. This leads to adverse effect on interpersonal and family relations that can result to general negative attitude towards life. Burnout is proved to cause negative mental health status of nurses with emotional exhaustion seen as the biggest aspect of burnout that is associated with nurses who are undergoing burnout (Papathanasiou, 2015.)

Burnout affects the quality of life of nurses and their families. This is greatly related to inflexible working hours or shift patterns that make it difficult for nurses to accomplish a good work-life balance. Nurses spend a lot time in the hospital environment therefore they can develop burnout especially if the institutional or organization is not supportive. Increased burnout affects the quality of nurses' lives. Burnout in nurses creates feelings of frustrations, anger, fear and hopelessness thus the risk of developing mental health disorders in nurses is very high and this has led to increase in suicide rates

among all the health care professionals. When health problems develop family life also gets affected negatively leading to poor quality of life (Theofilou, Fradelos, Mpelegrinos & Mparo , 2014.)

#### *Use of alcohol, drugs and medication abuse*

Burnout has affected nurses personal as well as work lives when nurses engage in use of alcohol and drugs as a way of dealing with high stress levels at work. Nurses who lack mechanisms of coping with job related stress for instance use alcohol, which affects their health negatively, and their job performance. Indulging in this kind of activities causes nurses to be absent from work while others are not able to meet patients' needs putting patients' safety at risk (Baskova & Banovcinova, 2014). According to D'silva, & Abraham (2013) nurses with burnout may result to medication abuse.

### **5.2.2 Negative effect on work**

This chapter explains ways in which burnout affects how nurses perceive and implement their duties at work.

#### *Job Dissatisfaction*

Work or job satisfaction refers to how much workers like their work and develop negative or positive attitude towards it. High levels of burnout negatively affect the nurses' satisfaction with their work of nursing patients. Burnout causes decreased motivation for work in nurses. Due to job dissatisfaction, nurses experience many frustrations. They become careless in their decision-making and do not really care about the outcomes or consequences. Most nurses who are suffering from burnout give minimum effort in their work and do things according to the book rather than being fresh in ideas and innovation (Dardioti et al, 2018). The higher the level of burnout in nurses the lower the level of satisfaction and positive emotions that they have (Wang et al, 2015). According to ( D'silva et al, 2013) it is a sad affair that nurses show concern for the wellbeing of patients but still are not valued and their lives become painfully empty. With this kind of feelings their motivation and enthusiasm to work is reduced eventually causing job dissatisfaction.



### *Nurse shortages due to turnover*

Burnout has played a big role in contributing to shortage of nurses worldwide. Due to increased job dissatisfaction, high nurse turnover, inadequate staffing, aging workforce and increased health demands, shortage of nurses continues to be a problem. Burnout problems and nursing shortage have been increasing simultaneously (D'silva et al 2013). Newly graduated nurses are vulnerable to burnout and a significant number of them experience burnout during their first years of working due to stressful situations and consider quitting nursing (Gustavsson et al, 2011). Work -related stress sometimes is overwhelming making nurses decide to leave their work in such of new careers that would be less stressing. Some nurses may still be working but there are possibilities of having the intention to resign because of burnout. A study done in South Africa indicated that nurses with the high rate of depersonalization and emotional exhaustion had a high likelihood of quitting their job (Bester & Pienaar, 2011.)

According to Suar & Kar (2014) due to burnout, nurses commitment to the organization decreases when they experience emotional exhaustion and reduced personal accomplishment. Organizational commitment in this context refers to a nurse identifying him or herself with and getting involved in a particular hospital. Nurses may feel that their work places no longer provide a suitable work environment where they can utilize their abilities as their needs are satisfied. They therefore think that it is not worthwhile to continue offering their services to this kind of work environments. In the process they get less committed and detached to the hospital. Nurses may develop negative attitude towards working in shifts and work politics therefore suffering burnout, having low commitment to work as well as high intention to turnover. When nurses are in stressful work environment they get emotionally drained and have a distancing attitude towards other people such as patients. Eventually they feel reluctant to go to work and think of quitting employment as they feel the job is no longer appealing.

Nurses suffering from burnout find it difficult to work at one place for a long period due to issues such as high workload, long working hours, lack of support from work mates and taking care of critically ill patients. These problems lead nurses into seeking different work places just to a find a place where they can enjoy work. Consequently, they feel that they cannot work an extra day and seek to find a more appealing jobs that would be more fulfilling (Suar et al, 2014.)

### *Work performance*

High levels of burnout causes nurses to be emotionally exhausted leading to difficulties in coping with and responding to time pressure and additional work. The inability to cope with time pressure has probability of causing negative outcomes such as errors and threat to safety of patients. Moreover, when there is strong time pressure due to workload, high levels of burnout may increase negative emotions that occupy so much space of nurses working memory therefore safety of patients is threatened since it is difficult to make accurate decisions (Lam, Teng, Shyu, Chiou & Fan, 2010).

Nurses are emotionally drained when they are in stressful situations and develop a distancing attitude with clients and patients (Bester et al, 2011.) According to ( Baskova & Banovcinova, 2014) high levels of stress can result in burnout which causes nurses to change the attitude towards work, negatively affecting the care of patients. According to (D'silva et al 2013) nurses have the responsibility of mentoring students, however when burnout affects them it leads to poor interaction with students which reduces the quality of commitment and teaching. According to (Nantsupawat, Nantsupawat, Kunaviktikul, Turale, & Poghosyan, 2016) burnout is closely associated with poor reporting of negative patients' outcomes and reduced quality nursing of care.

### *Absenteeism and sick leaves*

Burnout in nurses has a negative effect on their job attendance. With high levels of burnout as result of physical fatigue due to increased workload, nurses are prone to miss work. It is common for nurses with burnout to have many sick leaves as way of avoiding work. Nurses with burnout may present many sick leaves from the doctor after every few days so that they escape being at work where they feel that it is the cause of their problems (Baskova et al, 2014). Emotional exhaustion causes job dissatisfaction and this result to absenteeism. Absenteeism causes work overload since few nurses turn up for work in a given shift. This in turn causes depersonalization from work, work colleagues and even patients (Dardioti et al, 2018).

### *Burnout in nurse leaders*

Nurse leaders play a critical role in a healthy working environment. They can influence working environment through the relationships with junior staff, by understanding how nurses work, knowledge and skills of the team. Nurse leaders are supposed to create a good working environment by being accessible and by making key decisions. When nurse leaders suffer from burnout or are at risk of

burnout there is a trickle-down effect on the nurses on the lower level. This means that those on the lower level end up being victims of burnout. Burnout poses the risk of not retaining current nurse leaders causing them to resign from their jobs, it also makes it difficult to mentor new leaders needed in the future (Kelly & Adam, 2018.) According to Kanste (2008) nursing leadership is positively and negatively linked to burnout among nursing personnel .Passive leadership behaviors are risk factors for burnout particularly emotional exhaustion and depersonalization among nurses.

## 6 DISCUSSION

The purpose of this thesis was to study the causes and effects of burnout on the personal and work life of nurses. The aim of this thesis was to provide knowledge about how burnout affects nurses' personal lives and their work-life.

Our method of research was a literature review. By using literature reviews, we looked up and researched a collection of scientific articles that were related to the topic of study. Literature review is done by researching previous and existing studies and scholarly writings that are sharing the same area of interest and knowledge. Literature review comprises of these concepts; Search, survey, list, enhance knowledge and a reporting tool (Kant & Patil, 2014.)

The results indicate that organizational and occupational factors play a significant role in the development of burnout amongst nurses. The occupational factors that contribute to burnout in nurses include increased workload, unconventional working schedules, lack of resources, and job description conflict, and ineffective teamwork, lack of value, appreciation and recognition.

Organizational factors were also found to influence the level of burnout in nurses. These organizational factors include controls policies for the organization, salaries and remunerations, appointments and nurse-patient ratios, shifts and decisions concerning patients' safety. The organizational factors most dealt with the management issues such as recruiting of nurses therefore also influencing some of the occupational factors. For example, nurses need resources to do their work and they depend on the organizational management to provide the required resources. Workload was also a major cause of burnout that was classified under the occupational causes however; the organization makes policies about the number of nurses who are supposed to work in a particular shift that eventually determines how much the nurses have to strain themselves.

Personal traits among nurses were also a factor that contributed to burnout in nurses. According to the findings personal factors would affect the coping skills of a nurse in stressful work situations. Openness, emotional intelligence, extraversion, conscientiousness and neuroticism were the main personality traits influencing burnout positively or negatively. Lack of openness causes negative social behaviors, inability to express oneself making it difficult to trust and work with others.

Nursing professional is a very interactive career involving many nurses, patient and other professionals therefore openness is important. Emotional intelligence influences the ability of a person to identify and manage their emotions and those of other people. With extraversion, one is able to be assertive, enthusiastic and can work well in a team. Neuroticism causes poor response to stressors and those with this trait can easily get frustrated, have a depressed mood, fearful, jealous or even lonely. Conscientiousness is characterized by having goal orientation, important skills in an organization and being goal driven. High burnout levels are more in situations where there is lack of openness, conscientiousness and extraversion. Neuroticism personality trait is seen as a risk factor for development of burnout. The personal traits that a nurse has determine how well they can work with other and cope with job stressors.

Social factors cause or risk the development of burnout among nurses. These factors include age, job status, job stressors, experience in conflictive interaction, death situations and role ambiguity. The findings of this that study show that age, length of time a nurse has been working and level of education determine the level of burnout among nurses.

It was interesting to note that there are different perspectives in which age was thought to influence burnout in nurses. One article argued that burnout was more prevalent in old nurses as they had been exposed to stress factors for longer period. It is possible that this observation could be related to the fact that as one ages their tolerance for stressful work environment and demanding situation reduces. In the beginning of nurses' career they may be more motivated but as time goes by their motivation and eagerness diminishes. Another article argued that burnout was more prevalent in young nurses who recently graduated and did not feel confident enough to cope with the nursing responsibilities.

Burnout has effects on nurses' personal and work life. Burnout affects how nurses handle their duties and responsibilities. Burnout often causes feelings of job dissatisfaction, increased frustrations which lead to poor decision making. Since nursing profession entails taking care of patients, burnout is seen to negatively affect patients outcomes as nurses sometimes become detached from their roles. As a result of burnout nurses quit work which causes shortage of nurses. With shortage of nurses there is increased workload on the nurses who continue to work. Turnover was a major effect of burnout that was seen to affect nurses from different countries.

Most nurses' work in shifts and when burnout occurs there is a trend of absenteeism and sick leaves that can easily be noticed. This study was also able to establish that new information regarding burnout

in nurse leaders. In order for a person to be a nurse leader they need mentorship from nurses who are already nurse leaders. When burnout affects the nurse leaders then the possibility of mentoring future nurse leaders is usually prevented. It is also interesting to see that when nurse leaders suffer from burnout they predispose junior nurses in their departments to becoming victims of burnout. Nurse leaders are also at high risk of leaving their jobs when they suffer burnout.

Personal health and well-being of nurses is affected negatively by the presence of burnout. Subjective well-being is greatly related to depletion of energy levels as result of increased workload and pressure. As burnout develops, it causes psychological and emotional reactions. Psychological reactions manifest as increase in blood pressure, stomach problems and chronic fatigue. Emotional problems manifest themselves as irritability, nervousness and anxiety. Mental health disorders such as depression are negative effects that arise from burnout exposure. Authors think that when this kind of health problems occur nurses end up spending time and money seeking medical reviews from the doctors.

Burnout affects the quality of life and nurse's personal relationship negatively. Sickness affects the quality life of nurses. For example with depression, it would be so difficult to work with decreased energy levels and inability to concentrate. When a nurse is affected by burnout, family and interpersonal relations of the nurse also seem to get affected. With high levels of burnout nurses seem to find alternative coping measures which might not always be right such as abuse of drugs and alcohol, being absent from work and acquiring sick leaves. As the last option nurses decide to leave the profession when burnout becomes too much. Authors tend to relate this to the personality traits and coping skills of someone.

We tend to think that burnout worsens when nurses fail to recognize it early enough or in case they do it they don't seek help. Failure to recognize and seek help makes nurses to suffer negative consequences such as health related problems. Others involve them themselves in destructive coping mechanisms as a way of escaping.

One of the motivating factors towards the choice of this topic of study was the experience we had during the clinical practices whereby we encountered qualified nurses suffering from burnout and therefore developed interest learning the causes as well as effects burnout has on the nurse. We were concerned on the implications of burnout on student mentorship because we thought that it would make it difficult for a student to learn both theory and clinical skills in an environment where the nurse

felt demotivated, dissatisfied and no longer felt happy. As we studied numerous materials, it was our hope that we would come across information in relation to effects of burnout on nurses' responsibility of training students however, we did not succeed in finding sufficient information in regard to this and we hope in future studies can be conducted in view of this. As we almost came to the conclusion of this study we also thought that maybe burnout also starts developing in student nurses and becomes worse when they get employed and have responsibilities to meet.

Student mentorship is important in helping towards learning theory and practical skills therefore in future we hope that researchers can take interest in studying the implication of nurse burnout on student mentorship.

We tend to think that burnout continues to be a problem in nursing because nurses who suffer from it don't get enough support from their work places. Organizations should be keen to see that nurses with burnout are supported to prevent situations when it becomes too complicated that a nurse is forced to leave work. As much as burnout affects nurses personally organizations also end up with shortage of nurses therefore they should pay more attention.

There were difficulties in getting articles about nurses' burnout from Finland written in English language. Only one article from Finland that was written in English was used. For correct interpretation of findings we preferred to only use articles written in English language. We identified very good articles that during data search but it was impossible to use them because they needed to be purchased in order to fully access them.

The majority of the articles and information we found were more focused on the causes of burnout in nurses. We found out that there was less focus on the impact of burnout on their lives. Getting articles with research focused on the effects of burnout in nurses on their personal and work lives was a challenge.

This study used the information databases offered through Centria University of applied science. This means that we accessed articles from all over the world. This comes as an advantage to this study since we got access to information in a broader perspective. This study took almost a year to write therefore authors had enough amount of time to collect and interpret data correctly therefore coming with a good study.

We worked hand in hand by collaborating and delegating the work. This was also a big challenge since we don't live in the same city and also since we were going through our practical internships. We worked hard through discipline despite the challenges.

We are inclined to think that if we did a quantitative research and a commissioned survey in a hospital in Finland, then we would have achieved more concrete findings. This was not possible because of Finnish language challenges. One on one interaction with nurses would have yielded more recent information especially on the effects of burnout on their personal and working lives.

We recommend further studies and research of burnout among Finnish nurses. From a point of student's interest, it would be important to study more on the effect of burnout on student mentorship during clinical practice.



## 7 CONCLUSION

According to the findings of this study, burnout is a common problem in the nursing profession. The causes of burnout in nurses arise from the nature of the occupation, organizational management, personal traits factors and social factors.

The occupational and organizational factors are the major risk factors to burnout development in nurses. Understanding these causes can help in coming up with preventive measures. Once there is development of burnout in nurses there are negative effects that occur which affect the nurses personal and work life.

The role of the nurses is to take care of the well-being and safety of patients. With burnout nurses feel dissatisfied, demotivated and lack interest in the wellbeing of patients. This leads to poor work performance and negative patients outcomes.

On a personal level, burnout leads to psychological and mental problems, turnover or intention to leave, use of drugs, alcohol and medication abuse as well as poor quality of life. Absenteeism, sick leaves and emotional exhaustion are common because of burnout. When burnout reaches extreme point it eventually leads nurses to quit the profession and seeking other careers.

Organizations need also to understand the effect they have on ensuring that the nurses enjoy their working conditions. For example, the Finnish government is responsible for financing education of nurses. It is expensive to educate a nurse for three-four years only for them to graduate and quit the career after few years of working. Families spend a lot to educate their children who pursue the nursing career. There is importance to understand the causes and effects of burnout, to retain nurses in the future, avoid wastage of resources and reduce nurses' shortage worldwide.

Hospital managements should come up with rigorous measures that aim to reduce work related burnout in nurses and other employees. There should be a way to identify which nurses and what departments are at most risks of burnout. Early detection and prevention should be the main focus. Workshops, interventions, seminars and other administrative strategies are recommended.

## REFERENCES

- Bae, S.H, Shin, S & Park, J. 2018. Nurse staffing and nurse outcomes: a systematic review and meta-analysis. *Nursing Outlook*. Available: <https://www.sciencedirect-com.ezproxy.centria.fi/science/article/pii/S0029655417302658> Accessed: 16.03.2018.
- Bester, B.L, & Pienaar, J.W, 2011. The impact of burnout on the intention to quit among professional nurses in the Free State region - a national crisis. *South African Journal of Psychology*. Available: <http://journals.sagepub.com.ezproxy.centria.fi/doi/pdf/10.1177/008124631104100112> Accessed 10.03. 2018.
- Baskova, M. & Banovcinova, L, 2014. Sources of work-related stress and their effect on burnout in midwifery. *Procedia - Social and Behavioral Sciences*, 248-254. Available:<https://www.sciencedirect-com.ezproxy.centria.fi/search?q=nurses%20burnout%20effect%20on%20work&show=25&sortBy=relevance> Accessed 01.12.2017.
- Belachew ,T, Molla ,A & Tadesse D, 2016. Job related stress among nurses working in Jimma Zone public hospitals, South West Ethiopia: a cross sectional study. *BMC Nursing*. Available:<http://web.b.ebscohost.com.ezproxy.centria.fi/ehost/pdfviewer/pdfviewer?vid=17&sid=a368d55b-cf31-490e-a9b9-1758abfe8a2e%40sessionmgr103&hid=107> Accessed 01.12.2017.
- Chang, H.E & Cho, S.H. 2016. Asian Nursing Research: Workplace Violence and Job Outcomes of Newly Licensed Nurses: Available: <http://www.sciencedirect-com.ezproxy.centria.fi/science/article/pii/S1976131716301682> Accessed 15.12.2017.
- Chen, H, Zhao, S & Liu, L, 2015. Factors influencing the occupational well-being of experienced nurses. *International Journal of Nursing Sciences*. Available: <https://www.sciencedirect-com.ezproxy.centria.fi/science/article/pii/S2352013215000885> accessed: 16.03.2018
- Cho, E., Sloane, D.M, Kim ,E, Kim, S, Choi, M., Yoo Y, Lee, H.S & Aiken L.H. 2015. Effects of nurse staffing, work environments, and education on patient mortality: An observational study. *International Journal of Nursing Studies*. Available: <http://www.sciencedirect-com.ezproxy.centria.fi/science/article/pii/S0020748914002090> Accessed 15.12.2017.
- Dardiotis, E., Konstantinou, A-K, Bonotis, K., Sokratous, M, Siokas, V. 2018. Burnout Evaluation and Potential predictors in a Greek Cohort of Mental Health Nurses. *Archives of Psychiatric Nursing* Available: <https://www.sciencedirect-com.ezproxy.centria.fi/science/article/pii/S0883941716303740> Accessed: 21.03.2018.
- Dollard, M.F, Bakker, A.B, Vander zee, K.I & Lewig, K. A, 2014. The Relationship between the Big Five Personality Factors and Burnout: A Study among Volunteer Counselors. *The Journal of Social Psychology*,135(5). Available: <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.471.7593&rep=rep1&type=pdf> accessed: 16.03.2018.

Duffin ,C., 2012. Journal of nursing management UK.

Available:<http://web.b.ebscohost.com.ezproxy.centria.fi/ehost/pdfviewer/pdfviewer?vid=19&sid=8a00e60-385d-43fc-9b80-a8a8bc2fcb36%40sessionmgr103&hid=128> Accessed 25.11.2017

Duarte, J & Pinto-gouveia, J., 2017. Applied Nursing Research: Empathy and feelings of guilt experienced by nurses: A cross-sectional study of their role in burnout and compassion fatigue symptoms. Available:

<http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S0897189716301756> Accessed 25.11.2017

D'silva, F. & Abraham, A.K.2013. Job Satisfaction, Burnout and Quality of Life of Nurses from Mangalore. Journal of health Management, 91-97. Available:

<http://journals.sagepub.com.ezproxy.centria.fi/doi/pdf/10.1177/0972063413486033>:

Accessed 25.11.2017

Fuente, G.A, Solana, E.D, Gómez-Urquiza, J.L, .Cañadas, G.R, García, L.A, Ortega-Campos, E, 2017. Burnout and its relationship with personality factors in oncology nurses. European Journal of Oncology Nursing. Available: <https://www.sciencedirect-com.ezproxy.centria.fi/science/article/pii/S146238891730193X>

Accessed: 16.03.2018.

Fuente, G.A, Solana, E.D, Gómez-Urquiza, J.L, .Cañadas, G.R, García, L.A, Ortega-Campos, E, 2015. Risk factors and prevalence of burnout syndrome in the nursing profession. International Journal of Nursing Studies. Available <https://www.sciencedirect-com.ezproxy.centria.fi/science/article/pii/S0020748914001710>

Accessed: 16.03.2018.

Gerolamo, A.M & Roemer, G.F, 2011. Nursing Outlook : Workload and the nurse faculty shortage: Implications for policy and research. Available:

<http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S0029655411000236> Accessed 25.11.2017

Glaze, S & Gyurak, A, 2008. International Journal of Intercultural Relations: Sources of occupational stress among nurses in five countries. Available:

<http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S014717670700079X> Accessed 15.12.2017.

González, J.L, Garrosa, E, Jiménez, B.M & Liang, Y, 2008. The relationship between socio-demographic variables, job stressors, burnout, and hardy personality in nurses: An exploratory study.

Available: <https://www.sciencedirect.com/science/article/pii/S0020748906002896> accessed: 20.3.2018

Gustavsson, J.T, & Rudman A, 2011. Early-career burnout among new graduate nurses: A prospective observational study of intra-individual change trajectories. International Journal of Nursing Studies. Available:

<https://www-sciencedirect-com.ezproxy.centria.fi/search?qs=Early-ca-reer%20burnout%20among%20new%20graduate%20nurses%3A%20A%20prospective%20observational%20study%20of%20intra-individual%20change%20trajectories&show=25&sortBy=relevance> Accessed 09.03.2018.

- Haller, S & Chen, C.P, 2014. The role of career counselling in supporting career well-being of nurses. Australian Journal of Career Development. Available:  
<http://journals.sagepub.com.ezproxy.centria.fi/doi/pdf/10.1177/1038416214555772> Accessed 11.03.2018
- Harding, T, Jamieson, I, Withington, J, Hudson, D & Dixon, A. 2017. Nurse Education in Practice: Attracting men to nursing: Is graduate entry an answer? Available:  
<http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S1471595317300793> Accessed 24.11.2017
- Health Impact of the Psychosocial Hazards of Work: An Overview. Available:  
[http://www.who.int/occupational\\_health/publications/hazardpsychosocial/en/](http://www.who.int/occupational_health/publications/hazardpsychosocial/en/) Accessed 12.01.2018
- Jaanisalo, A & Ageeva, Y, 2013. Lived experiences of Immigrant Nurses in Finland. Tampere University of Applied Sciences. Bachelor's thesis. Available:  
[https://www.theseus.fi/bitstream/handle/10024/67149/Ageeva\\_Jaanisalo.pdf?sequence=2](https://www.theseus.fi/bitstream/handle/10024/67149/Ageeva_Jaanisalo.pdf?sequence=2) Accessed 03.11.2018.
- Jager, N, Nolte, A.G.W & Temane, A, 2016. Health SA Gesundheit: Strategies to facilitate professional development of the occupational health nurse in the occupational health setting. Available:  
<http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S1025984816300035> Accessed 15.12.2017.
- Josephson, M., Rissen D, Wadensten B & Björn C, 2017. Perioperative Care and Operating Room Management: The opportunities and obstacles nurses have in carrying out their work—A case study in an operating department in Sweden. Available:  
<http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S2405603016300103> Accessed 15.12.2017
- Kang, J.H, Kim CW & Lee SY, 2016. Osong Public Health and Research Perspectives : Nurse-Perceived Patient Adverse Events depend on Nursing Workload. Available:  
<http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S2210909916000023> Accessed 15.12.2017.
- Kant, R, Patil. S.K, 2014. Methodological literature review of knowledge management research. Tékhne. Available:  
<https://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S1645991114000048> Accessed: 23.03.2018
- Kanste, O, 2008. The association between leadership behavior and burnout among nursing personnel in health care. Available:  
<http://journals.sagepub.com.ezproxy.centria.fi/doi/pdf/10.1177/010740830802800302> Accessed 03.04.2018
- Kelly, L.A. & Adams, J, 2018. Nurse Leader Burnout. How to find joy. Clinical Research. Available:  
<https://www.sciencedirect.com.ezproxy.centria.fi/search?q=effects%20of%20burnout%20on%20nurses&show=25&sortBy=relevance> Accessed 17.02.2018

Kosonen ,T & Houtsonen J. 2007.The ProfKnow Consortium: European Nurses' Life and Work under Restructuring: Professional Experiences, Knowledge and Expertise in Changing Contexts: Available: [http://www.gu.se/digitalAssets/1321/1321782\\_profknow\\_wp5.pdf](http://www.gu.se/digitalAssets/1321/1321782_profknow_wp5.pdf) Accessed 15.12.2017.

Kyngäs, H. & Elo, S, 2007. The qualitative content analysis process. Research Methodology. Available. <https://student.cc.uoc.gr/uploadFiles/192-%CE%A3%CE%A0%CE%95%CE%9D407/CONTENT%20ANALYSIS.pdf> Accessed 31.01.2018.

Lacono, M, 2014. Journal of PeriAnesthesia Nursing: Happiness in the Work of Nursing: Available: <http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S1089947214004067> Accessed 15.12.2017.

Lam, S.M, Teng C.T, Shyu, Y.L, Chiou, W., & Fan, H.C, 2010. Interactive effects of nurse-experienced time pressure and burnout on patient safety. International Journal of Nursing Studies. Available: <https://www-sciencedirect-com.ezproxy.centria.fi/search?q=Interactive%20effects%20of%20nurse-experienced%20time%20pressure%20and%20burnout%20on%20patient%20safety&show=25&sortBy=relevance>. Accessed 17.03.2018

Leineweber, C, Westerlund ,H, Chungkham, H.S,Lindqvist R, Runesdotter, S & Tishelman ,C. 2014. Nurses' Practice Environment and Work-Family Conflict in Relation to Burn out: A Multilevel Modeling Approach: Available: <http://web.a.ebscohost.com.ezproxy.centria.fi/ehost/pdfviewer/pdfviewer?sid=5b8552b3-d299-476b-ba04-d38c6321b4e0%40sessionmgr4010&vid=0&hid=4101> Accessed 15.12.2017.

Maslach, C.,2001. Theories of organizational stress. Available: [https://books.google.fi/books?hl=en&lr=&id=ahfJ16b-BdUC&oi=fnd&pg=PA68&dq=maslach+and+leiter+definition+of+burnout&ots=O\\_bmNHvAD2&sig=mFrsNyTtnDV26x18RoHR59j0FY8&redir\\_esc=y#v=onepage&q=maslach%20and%20leiter%20definition%20of%20burnout&f=false](https://books.google.fi/books?hl=en&lr=&id=ahfJ16b-BdUC&oi=fnd&pg=PA68&dq=maslach+and+leiter+definition+of+burnout&ots=O_bmNHvAD2&sig=mFrsNyTtnDV26x18RoHR59j0FY8&redir_esc=y#v=onepage&q=maslach%20and%20leiter%20definition%20of%20burnout&f=false) Accessed 05.04.1018

Nantsupawat ,A., Nantsupawat ,R., Kunaviktikul, W., Turale ,S & Poghosyan,L, 2016. Nurse Burnout, Nurse-Reported Quality of Care, and Patient Outcomes in Thai Hospitals.Available:<http://web.a.ebscohost.com.ezproxy.centria.fi/ehost/pdfviewer/pdfviewer?sid=295d17be-3b42-422f-983f-26dfab70910f%40sessionmgr4010&vid=0&hid=4101> Accessed 15.12.2017.

Omer, T. A, Suliman,W. A & Moolab S. 2016. Nurse Education in Practice: Roles and responsibilities of nurse preceptors: Perception of preceptors and preceptees. Available: <http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S1471595315001195> Accessed 18.12.2017

Olson, L.L & Stokes F, 2016. Journal of Nursing Regulation: The ANA Code of Ethics for Nurses with Interpretive Statements: Resource for Nursing Regulation.Available: <http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S2155825616310730> Accessed 18.12.2017

Panagopoulou, E, Montgomery, A, Spânu, F & Băban, F, 2015. Job demands, burnout, and engagement among nurses: A multi-level analysis of ORCAB data investigating the moderating effect of

- teamwork. Burnout Research. Available: <https://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S2213058615000182> accessed: 16.03.2018
- Papathanasiou, L.V. 2015. Work-related Mental Consequences: Implications of Burnout on Mental Health Status among Health Care Providers. *Acta Informatica Medica*. Available: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4384854/> Accessed: 23.03.2018
- Ping, Z, Li, H & Cheng, B, 2018. Quantification of burnout in emergency nurses: A systematic review and meta-analysis. *International Emergency Nursing*. Available: <https://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S1755599X17301738> accessible: 16.03.2018
- Russell K, 2016. Perceptions of Burnout, Its Prevention, and Its Effect on Patient Care as Described by Oncology Nurses in the Hospital Setting. *Oncology Nursing Forum*: Available: <http://web.a.ebscohost.com.ezproxy.centria.fi/ehost/pdfviewer/pdfviewer?vid=18&sid=54feab97-7f82-469f-aa86-87ffc0daca29%40sessionmgr4008&hid=4206> Accessed 18.12.2017
- Shandong, Wei, R., Ji, H., Li, J., & Zhang L, 2017. Active intervention can decrease burnout in Ed nurses. *Journal of Emergency Nursing*, Pg. 145-149. Available: <https://www.sciencedirect.com.ezproxy.centria.fi/search?q=nurses+burnout+effect+on+work&authors=&pub=&volume=&issue=&page=&origin=home&zone=qSearch> Accessed 18.12.2017
- Sinclair, S. Raffin-Bouchal, S. Venturato, L. Kondejewski, JM & MacDonald, L.S. 2017. Compassion fatigue: A meta-narrative review of the healthcare literature. *Compassion fatigue: A meta-narrative review of the healthcare literature*. Pages 9-24. Available: <https://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S002074891730010X> Accessed 06.03.2017.
- Smith, R.A. 2009. *Journal of PeriAnesthesia Nursing: What You Don't Know Can Hurt You: Health Hazards in the Work Environment*. Available: <http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S1089947209000033> Accessed 01.11.2017
- Suar, D. & Kar, S, 2014. Role of Burnout in the Relationship between Job Demands and Job Outcomes among Indian Nurses. *International Labour Organization*. Available: <http://journals.sagepub.com.ezproxy.centria.fi/doi/pdf/10.1177/0256090920140403> Accessed 16.03.2018.
- Stutzman, S.E, Rozo, J.A Olson, D.M & Thur, H.S, 2017. Situational Factors Associated With Burnout Among Emergency Department Nurses. *Workplace and safety*, Pg. 262-266. Available: <http://journals.sagepub.com.ezproxy.centria.fi/doi/pdf/10.1177/2165079917705669> Accessed 30.11.2017.
- Sullivan, E.A. 2012. *Nurse Education in Practice: Critical thinking in clinical nurse education: Application of Paul's model of critical thinking*. Available: <http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S1471595312000595> Accessed 18.12.2017
- Theofilou ,P, Fradelos.E, Mpelegrinos . S & Mparo .CH, 2014. Burnout syndrome impacts on quality of life in nursing professionals: The contribution of perceived social support. Available: [https://www.researchgate.net/publication/263297728\\_Burnout\\_syndrome\\_impacts\\_on\\_quality\\_of\\_life\\_in\\_nursing\\_professionals\\_The\\_contribution\\_of\\_perceived\\_social\\_support](https://www.researchgate.net/publication/263297728_Burnout_syndrome_impacts_on_quality_of_life_in_nursing_professionals_The_contribution_of_perceived_social_support) : Accessed: 23.03.2018.

Tonette, S. Rocco, M.S., 2009. Literature Reviews, Conceptual Frameworks, and Theoretical Frameworks: Terms, Functions, and Distinctions. Available: <http://journals.sagepub.com.ezproxy.centria.fi/doi/pdf/10.1177/1534484309332617> Accessed 31.01.2018.

Ugwu, D. I., Ugwu, L. I., Enwereuzor, I. K. & Fimber, U. S., 2017. Nurses burnout and counterproductive work behavior in a Nigerian sample: The moderating role of emotional intelligence. *International Journal of African Nursing Sciences*, 106-113. Available: <https://www.sciencedirect.com.ezproxy.centria.fi/search?qs=nurses+burnout+and+counterproductive+behaviour&authors=&pub=&volume=&issue=&page=&origin=home&zone=qSearch> Accessed 15.12.2017.

Valvira; National supervisory authority for welfare and health. 2017. Available: [http://www.valvira.fi/web/en/healthcare/professional\\_practice\\_rights/qualified\\_in\\_eu\\_eea\\_member\\_state/licensing-eu-eea](http://www.valvira.fi/web/en/healthcare/professional_practice_rights/qualified_in_eu_eea_member_state/licensing-eu-eea) 01.10.2017

Wang, C. M & Qu, H-Y, 2015. Study on the relationships between nurses' job burnout and subjective well-being. *Chinese Nursing Research*. Available: <https://www.sciencedirect.com/science/article/pii/S2095771815000419> Accessed 23.03.2018.

Wazqar, D. Y., Kerr M., Regan, S. & Orchard C. 2017. *International Journal of Nursing Sciences: An integrative review of the influence of job strain and coping on nurses' work performance: Understanding the gaps in oncology nursing research*. Available: <http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S235201321730114X> Accessed 30.11.2017.

Wheeler, S. & Holloway, I., 2013. *Qualitative Research in Nursing and Health Care*. Available: <https://books.google.fi/books?id=CmV32bhRaowC&printsec=frontcover&dq=Holloway+2013%E2%80%A6++data+analysis&hl=fi&sa=X&ved=0ahUKEwi8htvhpLrJAhXjVHIKHTN3DYIQ6wEIMjAA#v=onepage&q=Holloway%202013%E2%80%A6%20%20data%20analysis&f=false> Accessed 02.02.2018

Wolniewicz, L. & Nowakowska, S., 2017. Professional burnout among nurses and paramedics. *Medical Science Pulse*. Available: <http://web.a.ebscohost.com.ezproxy.centria.fi/ehost/pdfviewer/pdfviewer?vid=3&sid=d3ed27ec-48a6-42f4-aa02-3314970dcdb2%40sessionmgr4008> Accessed 30.03.2017.

Yılmaz, E. B., 2017. *Chinese Nursing Research: Resilience as a strategy for struggling against challenges related to the nursing profession*. Available: <http://www.sciencedirect.com.ezproxy.centria.fi/science/article/pii/S2095771817300075> Accessed 31.11.2017

Zhu, X. W., Zhang, L. F., Yo, L. M., Liu, K., Zheng, J., Fang, J. B., Lu, M., Guang, W., Wang, J., Wu, X. & Zhu, X. W., 2014. The association of Chinese hospital work environment with nurse burnout, job satisfaction, and intention to leave. *Nursing Outlook*, 128-137. Available: <https://www.sciencedirect.com.ezproxy.centria.fi/search?qs=nurses%20burnout%20effect%20on%20work&show=25&sortBy=relevance> Accessed 01.12.2017

## APPENDIX 1

### *Content analysis for causes of burnout among nurses*

Raw data	Sub category	Main category
Lots of responsibilities Imbalanced nurse-patient ratio Increased pressure from work Decreased quality of work	Workload	Occupational Factors
Working in different shifts Disruption of one's personal life Challenges balancing work & personal lives	Shift work	
Ineffective teamwork Many professionals working together Poor-nurse doctor relationship Lack of support from fellow workmates Conflicts among nurses and other workmates Lack of trust among nurses	Multi-professional relationships	
Lack of enough resources Understaffing and lack of enough resources causing depersonalization emotional, physical exhaustion and hence job dissatisfaction Nurses job performance is influenced by staffing	Staffing and resources	
Changing roles of the nurse Performing tasks that are not related to nursing	Job description conflict	
Disrespect from fellow work mates Emotional and physical abuse from patients Nurses being undervalued contributes to stress, mental and physical exhaustion leading burnout Feeling of negative attitude towards the profession Nurses feeling loss of control Nurses not participating in decision making process	Lack of recognition, appreciation, value and empowerment	
Upper organization controls policies, salaries, appointments and decisions concerning safety of patients	Organizational management	
Failure of organization to involve nurses in decision making in relation to the above leads to dissatisfaction and burnout	Lack of nurses involvement in decision making process	
Poor unit level management Lack of proper unit level supervision leading to unclear roles Improper unit level supervision	Unit level management	



Poor management at upper organizational level and unit level leads to stress		
Lack of openness ,extraversion and neuroticism cause burnout Neuroticism leads to difficulties in responding to stressors Extraversion and emotional; intelligence influence personal accomplishment	Personal traits	Personal traits factors
Age, job stressors, conflicts, role ambiguity and death situations are burnout predictors There is a relationship between nurses burnout age, experience and education level	Work experience	Social factors
Burnout affecting young nurses Burnout affecting older nurses	Age	
Female and male nurses prone depersonalization Female nurses prone more to emotional exhaustion	Gender	

## APPENDIX 2

### *Content analysis for burnout effect on nurses personal and work lives*

Raw data	Sub category	Main category
Burnout affects nurses satisfaction Burnout causes decreased motivation Dissatisfaction causes frustrations Poor decision from dissatisfied nurses Burnout leading to low effort in nurses	Job dissatisfaction	Negative effect on work
Burnout leads to turnover and inadequate staffing Newly graduated nurses face stressful situations leading to burnout and turnover. Work related stress causing quitting or intention to resign High depersonalization & emotion exhaustion risk high chances of quitting work Decreased organizational commitment causing turnover	Nurses turnover and shortage	
Emotional exhaustion causing challenges with copying with work Burnout has negative effects on patients safety Negative emotions caused by burnout interferes with nurses thinking and decision making Burnout causes nurses to distant themselves from patients.	Work performance	
Burnout negatively affects job attendance Physical fatigue due to burnout causes missing work Sick leaves due to burnout Emotional exhaustion risks nurses' absenteeism	Absenteeism and sick leaves	
Burnout in nurse leader affects lower level nurses Burnout in nurse leaders has a risk of not retaining leaders Burnout weakens mentorship of future nurse leaders Leadership affects burnout positively or negatively	Burnout in nurse leaders	
Job burnout negatively affects subjective wellbeing Deleted energy and effort risk possibility of psychosomatic illness Depressive symptoms are common with burnout Work stressors in relation to burnout affect nurses mental, physical and emotional health	Nurses health and subjective wellbeing	Poor quality of life
Burnout creates adverse effects on interpersonal and family relationships Inflexible working hours interfering with good work-life balance	Work-life balance, family and interpersonal relationships	

<p>Development of negative attitude towards life Burnout affects the quality of life of nurses and their families</p>		
<p>Due to burnout nurses use alcohol and other drugs to cope with work-related stress. Nurse's ability to perform is negatively affected by use of drugs and alcohol. Nurses with burnout may result to medication abuse</p>	<p>Use of alcohol, drugs and medication abuse</p>	

### APPENDIX 3

#### Table of Articles

Author(s)	Article name	journal & year	Summary
Article 1 Dollard, M.F, Bakker, A.B, Vander zee, K.I & Lewig, K. A	The Relationship Between the Big Five Personality Factors and Burnout.	The Journal of Social Psychology, 2014.	Personality factors moderated the relationship between negative experiences and burnout.  Personality can protect against risks of developing burnout or can accelerate developing of burnout.
Article 2 Fuente e Fuente, G.A, Solana, E.D, Gómez-Urquiza, J.L, .Cañadas, G.R, García, L.A, Ortega-Campos t al	Burnout and its relationship with personality factors in oncology nurses.	European Journal of Oncology Nursing, 2017.	High neuroticism, anxiety and depression disorders likely to develop burnout.  Openness, conscientiousness and extraversion can protect nurses against burnout
Article 3 Bae, S.H, Shin, S & Park, J.	Nurse staffing and nurse outcomes: a systematic review and meta-analysis.	Nursing Outlook, 2018	Greater patient to nurse ratio is related to negative nurse outcomes and consistent association to high degree of burnout of nurses.
Article 4 Chen, H, Zhao, S & Liu, L, 2015	Factors influencing the occupational well-being of experienced nurses.	International Journal of Nursing Sciences, 2015	Nursing management should identify factors affecting nurses' welfare.  This decreases the burnout and hence increase in the quality of patient care
Article 5 Panagopoulou, E, Montgomery, A, Spânu, F & Băban	Job demands, burnout, and engagement among nurses: A multi-level analysis of ORCAB data investigating the moderating effect of teamwork	Burnout Research, 2015	High Job demands are related to burnout and engagement  High Workload and organizational demands are associated with emotional exhaustion, depersonalization, and negative attitude.

Article 6 Ping, Z, Li. H & Cheng, B	Quantification of burnout in emergency nurses: A systematic review and meta-analysis.	International Emergency Nursing, 2018	Social support, good supervision and sufficient staffing help to counter burnout.  Nursing management should identify appropriate measures to counteract burnout.  Emotional intelligence training can be helpful in reducing burnout.
Article 7 Nantsupawat ,A., Nantsupawat ,R., Kunaviktikul, W., Turale ,S & Poghosyan,L	Nurse Burnout, Nurse-Reported Quality of Care and Patient Outcomes in Thai Hospitals	International Journal of Nursing Studies, 2016	Burnout is closely associated with poor reporting of negative patients' outcomes and reduced quality nursing of care.
Article 8 Fuente, G.A, Solana, E.D, Gómez-Urquiza, J.L, Cañadas, G.R, García, L.A, Ortega-Campos, E	Risk factors and prevalence of burnout syndrome in the nursing profession,	International Journal of Nursing Studies, 2015	Burnout in nursing professionals is high.  Gender, age, marital status, level of healthcare, work shift and healthcare service areas predicted at least one of the dimensions of burnout.  Burnout is associated with personality-related variables.
Article 9 Baskova, M. & Banovcinova,L.	Sources of work-related stress and their effect on burnout in midwifery.	Procedia - Social and Behavioral Sciences. 2014.	Nurses indulge in unhealthy practices as a way of coping with work related stress and burnout.
Article 10 González, J.L, Garrosa, E, Jiménez, B.M & Liang,Y	The relationship between socio-demographic variables, job stressors, burnout, and hardy personality in nurses: An exploratory study	International Journal of Nursing Studies, 2008	Significant predictors of burnout included age, job status, job stressors and hardy personality.
Article 11 Dardiotis, E., Konstantinou, A-K,	Early-career burnout among new graduate nurses: A prospective	Archives of Psychiatric Nursing.,2018	Burnout effects on nurses physical, mental and emo-

Bonotis, K., Sokratous, M, Siokas, V	observational study of intra-individual change trajectories Burnout Evaluation and Potential predictors in a Greek Cohort of Mental Health Nurses.		tional health.  Lack of motivation for work. Frustrations.
Article 12 D'silva, F. & Abraham, A.K.	Job Satisfaction, Burnout and Quality of Life of Nurses from Mangalore.	Journal of health Management, 2013	Burnout causes: reduced sense of personal accomplishment, anger, detachment from others, low self-esteem, being hostile at work places, absenteeism and high turnover rates.  It also causes poor interaction with students leading which reduces commitment and teaching.  When burnout accumulates for long periods of time it affects negatively on quality of life, productivity and mental health.
Article 13. Suar, D. & Kar, S.	Role of Burnout in the Relationship between Job Demands and Job Outcomes among Indian Nurses	International Labour Organization, 2014	The tri-components of burnout influence job demands and outcomes. Emotional exhaustion and decreased personal accomplishment causes reduced commitment in nurses. Depersonalization and emotional exhaustion initiated the intentions to turnover
Article 14 Lam, S.M, Teng C.T, Shyu, Y.L, Chiou, W., & Fan, H.C	Interactive effects of nurse-experienced time pressure and burnout on patient safety	International Journal of Nursing Studies, 2010	Time pressure adversely affected patient safety for nurses with a high level of burnout, but not for nurses with a low level of burnout.
Article 15 Gustavsson, J.T, & Rudman A,	Early-career burnout among new graduate nurses: A prospective observational study of intra-individual change trajectories	International Journal of Nursing Studies, 2010	Burnout symptoms investigations showed numerous changes and development patterns that accumulated over time such intention to leave work and depressive symptoms

Article 16 Bester, B.L, & Pienaar, J.W	The impact of burnout on the intention to quit among professional nurses in the Free State region - a national crisis	South African Journal Of Psychology, 2011	Nurses with high levels of high levels of depersonalization, emotional exhaustion and low personal accomplishment had high intentions of quitting or changing the profession
Article 17 Papathanasiou, L.V	Work-related Mental Consequences: Implications of Burnout on Mental Health Status among Health Care Providers.	Acta Informatica Medica 2018.	Burnout causes negative mental health status and mental health conditions.
Article 18 Theofilou ,P, Fradelos.E, Mpelegrinos . S & Mparo	Burnout syndrome impacts on quality of life in nursing professionals	The contribution of perceived social support. 2014	Burnout decreases quality of life.
Article 19 Wang, C,M & Qu, H-Y	Study on the relationships between nurses' job burnout and subjective well-being	Chinese Nursing Research, 2015	Occupational burnout dimensions have an influence over subjective wellbeing of nurses.
Article 20 Kelly, L.A. & Adams, J,	Nurse Leader Burnout	Clinical Research, 2018.	Nurse leader burnout has a trickledown effect on low level nurses.  Poses risk of retaining current future leaders  Weakens opportunity for training future nurse leaders
Article 21 Kanste O.	The association between leadership behavior and burnout among nursing personnel in health care	Nursing Science,2008.	Nursing leadership is positively and negatively linked to burnout among nursing personnel  Passive leadership behaviors are risk factors for burnout particularly emotional exhaustion and depersonalization among nurses.  Burnout can be protected through active and future oriented transformational

			leadership and of rewarding subordinates
Article 22 Wolniewicz, L. & Nowakowska, S.	Professional burnout among nurses and paramedics. Medical Science Pulse.	Medical Science Pulse, 2014	<p>Effects of burnout on nurses cause psychological reactions such as increased blood pressure, stomach disorders and chronic fatigue.</p> <p>Emotional reactions were anxiety, irritability and nervousness.</p> <p>Burnout caused nurses to get involved in substance and medication abuse</p>