

Nurse burnout and stress in neonatal intensive care unit literature reviews examp...

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Introduction to Burnout

Burnout refers to the condition of exhaustion of physical or emotional strength, or loss of motivation to work. Usually, burnout is caused by prolonged stress or frustration affecting the involvement of employees for meaningful impact on work. Burnout has also been described as extreme fatigue, inefficacy, and loss of idealism and passion for the job. Burnout syndrome can be illustrated by the “ feelings of emotional exhaustion, negative attitudes and emotions towards those who are beneficiaries of the service (depersonalization), and sentiments related to professional failure and low accomplishment (lack of personal accomplishment)” (Schaufeli, & Maslach, 1993). Any person with burnout syndrome may develop the feelings of helplessness and hopelessness. This syndrome can also cause suicidal ideation due to increased depression.

Most important burnout inventory in the literature

Burnout can be measured by the tool referred to as Maslach Burnout Inventory (MBI) that considers three dimensions of burnout: emotional exhaustion, depersonalization, and personal inefficacy (Schaufeli, Leiter, & Maslach, 2009). Higher mean scores in emotional exhaustion and depersonalization and lower mean score in the personal accomplishment can be correlated with an increase in nurse burnout. Working on these parameters can help in burnout.

Emotional and mental exhaustion. Exhaustion refers to the lack of energy. During exhaustion, a kind of “ brain strain” develops that cause the person

to find shortcuts for doing things. It can also result in decreased or complete absence of motivation to do things better.

Depersonalization. In the state of depersonalization, a person may start losing contact with himself. Burnout may result in the kind of cynicism that is the belief that human nature is not good such as feeling of selflessness of others. Value of others starts decreasing in this case. The person also tries to forget personal needs and start focusing on the present time.

Personal accomplishment. In burnout, a person may start feeling that he is accomplishing less than the requirement. The person may become more pessimistic with time.

Burnout in healthcare industry

Usually, people in high-stress jobs such as healthcare industry have more chances of developing the burnout syndrome. Although stress can help in producing energy for better work but continuous level of high stress can result in burnout having detrimental effects on the work of nurses. Many researches report stress in the field of nursing that may last over three months and become the cause of burnout. Stress is about “ too much” and burnout is about “ not enough”.

Occupational vulnerability i. e., emotionally challenging and demanding work environment, is among the major causes of stress in healthcare professionals such as nurses. Many situational factors may also result in the development of psychological and physical stress. Situational factors may include factors such as workload, control of administration, insufficient reward, absence of support, lack of fairness, conflict in values especially moral distress are also

present in different departments of nursing such as Neonatal Intensive Care Unit (NICU).

Causes of stress in NICU

NICU is the place where premature infants spend first few weeks or months of their life. NICU is usually directed by one or more neonatologists and has duty of nurses, pharmacists, medical assistants, and therapists for proper care of neonates. Usually, neonatal nurses in NICU are Registered Nurses. This area is considered as an emotionally and morally sensitive area where nurses are in continuous state of facing ethical and moral challenges. It has many cases of critically ill neonates having complex diseases imposing challenging situations to the nurses.

Moreover, nurses have to face complicated technological changes; they have to face constantly high levels of noise raising alarming situations, and they have to give precise attention to all the details that is why nurses constantly face high levels of stress. Sleep deprivation especially in nurses with nighttime shifts can also contribute significantly towards nurse burnout (Braithwaite, 2008). In fact, sleep deprivation can be considered as the start of burnout in nurses.

Some predictors of nurse burnout

Some factors such as age, personality, job status, previous experience of doing the same task, resiliency, and job stressors can help in predicting burnout. It has been found that nurses with “hardy” type of personality have less chances of developing the burnout syndrome. Nurses with such personality have the ability to deal with different incidences of life. They

have an optimistic nature, and can manage the changes in life. On the other hand, nurses with high levels of personal stress have more chances of developing burnout syndrome. They may take personal issues to professional life or professional issues to personal life. Job stressors can also increase the chances of burnout. Job stressors may include increased patient acuity, lack of materials, poor staffing, financial pressures, mechanical work, and ethical dilemmas (Braithwaite, 2008).

Symptoms and problems of burnout

Signs and symptoms of burnout are mild in the beginning but can become serious with time. Symptoms can be categorized into personal, interpersonal, and organizational level. Symptoms at these levels include physical, cognitive, behavioral, affective, and motivational.

Problems at personal and interpersonal level present in burnout

Physical symptoms of burnout in NICU nurses at personal level may include headaches, sleeplessness, and muscle tension. Health related problems may include decreased level of immunity, gastrointestinal problems, high blood pressure, and other cardiovascular issues. Mental health problems at personal level include anger, sense of guilt and shame, anxiety, and depression. Motivational problems at interpersonal levels include social withdrawal in nurses.

Problems at professional level present in burnout

Cognitive problems at professional levels may include cynicism about the work function and feelings of not being appreciated. Behavioral problems at

professional levels may include decreased effectiveness, high rate of absenteeism, increased sick leaves, and increased chances of accidents. Motivational problems may include reduced work motivation, resistance to go to work, and decreased morale. Researchers have reported mental fatigue, and exhaustion in NICU nurses as a result of stress and burnout (Braithwaite, 2008).

Outcomes of burnout

Problems of burnout in NICU nurses, requiring high level of specialized care as compared to outpatient nursing, can result in detrimental effects on neonatal care. It has been reported that nurses who are unable to cope with the problems of burnout are unable to show empathy towards patients, thereby affecting proper healthcare for patients and families. Emotional problems can also result in the development of compulsive behaviors such as drug abuse and alcohol intake. Burnouts can decrease the nurses' ability to identify errors and mistakes that can increase the chances of healthcare problems. Nurse burnout can also affect the institution. It can result in high rate of turnover affecting the institution's financial health and customer's perception about quality of care (Braithwaite, 2008).

It has been noted that the U. S. is facing a troubling level of nursing shortage. Number of nurses moving out of the profession is more than the number of new nurses moving in the profession, and by 2020 hospitals will face nearly 20% nursing shortage. Moreover, many U. S. work-force nurses, approximately 51. 8%, reported moderate level of satisfaction with their primary job in 2008 as compared to 50. 5% in 2004, and about 29. 8% of

nurses reported that they have left the position or want to leave the position within the next three years (Lawrence, 2011).

Prevention of burnout in NICU and its benefits

Nurses, nurse leaders, and administrative bodies have to work to prevent NICU nurse burnout. This can help in better retention and improved recruitment rates of nurses. Moreover, it will also help in the provision of safe and sound neonatal and patient care (Braithwaite, 2008).

Proper sleep, supportive environment, organizational culture and fun activities

For sleep deprivation, approximately 15 minutes of power naps to nurses can prevent or reduce some problems of burnout. Moreover fatigue can be managed by proper sleep for at least 8 hours in a day. Organizing and promoting different fun activities can help in reducing the burnout and increasing the employee's productivity and customer satisfaction, and decreasing stress. Supportive environment is helpful in reducing many problems of burnout. Activities that support professional growth can also increase job satisfaction; therefore decrease the chances of burnout (Braithwaite, 2008). Professional growth may include moving to some senior position in the organization that can be some authoritative or administrative.

Changes in organizational culture can have important effect in decreasing nurse burnout as static and unresponsive environment is not good for working conditions. Although large-scale changes in organizational culture can have negative effects, small changes in organizational culture can

develop the environment of mutual support at ward level and can increase collaboration between nurses. Moreover, innovative organizational culture can also help in increasing nurses' sense of personal accomplishment, thereby decreasing the chances of burnout. Innovative culture increases the feeling of more entrepreneurial and dynamic environment that is also important for increasing the satisfaction level of nurses.

Work engagement

Advancement in nurses' work engagement can help in reducing or eliminating many problems of burnout. Work engagement is characterized by increased levels of energy at work, mental resilience during working, volunteer investment of efforts in work, persistence during times of difficulty and hardship, feelings of enthusiasm and pride, and full concentration on work. Work engagement is important because it can increase the happiness, enthusiasm, and joy of working nurses. It has been reported that personal and environmental factors of educational level of nurses, moral distress, as well as critical reflective practice are thought to be strongly related to work engagement in nurses. Researchers are of opinion that higher level of education is positively related to work engagement. Moral distress is the state of negative feeling when a person makes a moral decision but does not follow through according to the decision. Moral distress is commonly related to decreased work satisfaction that can lead to increased burnout that is why it is found to be negatively related to work engagement. Critical reflective practice refers to the mindfulness of self within or out of professional practices. It is helpful in developing an awareness of their personal beliefs.

With the help of critical reflective practice, nurses are able to understand and resolve contradiction between personal views and actual practice. It has been reported that critical reflective practice is positively related to the work engagement of nurses. Researchers have reported increased level of critical reflection with increased education in NICU nurses (Lawrence, 2011). Therefore, critical reflection helps in cutting off depersonalization.

Concluding Points and Future Directions

Registered nurses have most important role in the well-being of humanity. They are present in almost every healthcare field and experience of any person from the time of birth to the time of death. However, nurse burnout and stress is one of the most important issues in healthcare profession. This can increase the negative effects on nurses, patients, and the healthcare institution. Management of the organization has to give high priority to the problem of NICU nurse burnout. On the other hand, nurses have also to take some responsibility to reduce stress related problems. They have not to leave everything in the hands of the administration and have to discuss their problems with other colleagues and seniors. Moreover, everyone in the healthcare industry has to welcome healthy changes that can reduce the nurse burnout and stress. They have to know the benefits associated with improved working of nurses in NICU.

Further research in case of better nursing practices without the feelings of burnout is required as for example further study is required to demonstrate the relationship between the critical reflection and moral distress on work

engagement. Moreover, moral distress is a poorly understood and rarely acknowledged clinical problem, so it requires more research and study.

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