

## Fatores geradores da *Síndrome de Burnout* em profissionais da saúde

Generators factors of *Burnout Syndrome* in health professional

Factores generadores del *Síndrome de Burnout* en profesionales de la salud

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## RESUMO

**Objetivo:** identificar os fatores relacionados à *Síndrome de Burnout* em profissionais da saúde. **Métodos:** pesquisa descritiva realizada através de uma revisão integrativa da literatura, com a coleta de dados realizada na biblioteca virtual BIREME. **Resultados:** dos 410 artigos selecionados, apenas oito satisfaziam os critérios de inclusão. Estes referiam à *Síndrome de Burnout* em Agentes Comunitários de Saúde, em médicos da Estratégia Saúde da Família, profissionais de saúde mental, enfermeiros da Unidade de Tratamento Intensivo, trabalhadores de um hospital de média complexidade e professores de Educação Física. A síndrome referida aparece como consequência de um conjunto de fatores. Ela é vivenciada por trabalhadores que lidam diretamente com pessoas, sendo resultante do estresse crônico. **Conclusão:** a melhoria das condições de trabalho dos profissionais contribui para fornecer uma assistência de saúde mais apropriada aos profissionais com sinais da *Síndrome de Burnout*.

**Descritores:** burnout; profissional da saúde; saúde do trabalhador.

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## ABSTRACT

**Objective:** to identify factors related to the *Burnout Syndrome* in health professionals. **Methods:** descriptive study performed by an integrative literature review, with data collection conducted in a virtual library called BIREME. **Results:** only eight of 410 selected papers met the inclusion criteria. These referred to the Burnout Syndrome in Community Health Workers, in physicians working in Family Health Strategy, mental health professionals, nurses who work in Intensive Care Units, workers of a hospital of medium complexity and in Physical Education teachers. The syndrome above mentioned arises because of a set of factors. Workers who directly deal with people experience it, and it is a result of chronic stress. **Conclusion:** the improvement of working conditions of professionals helps to provide a more appropriate health care to professionals with signs of the *Burnout Syndrome*.

**Descriptors:** burnout; health professional; worker's health.

## RESUMEN

**Objetivo:** identificar los factores relacionados al *Síndrome de Burnout* en profesionales de la salud. **Métodos:** investigación descriptiva a través de una revisión integrativa de la literatura, con la recolección de datos en la Biblioteca virtual BIREME. **Resultados:** de los 410 artículos seleccionados, ocho satisfacían los criterios de inclusión. Estos se referían al Síndrome de Burnout en Agentes Comunitarios de Salud, en médicos de la Estrategia Salud de la Familia, profesionales de salud mental, enfermeros de la Unidad de Tratamiento Intensivo, trabajadores de un hospital de media complejidad y en profesores de Educación Física. El Síndrome es adquirido por trabajadores que lidian directamente con personas, siendo resultante del estrés crónico. **Conclusión:** la mejora de las condiciones de trabajo de los profesionales contribuye para proveer una asistencia de salud más apropiada a los profesionales con señales de *Síndrome de Burnout*.

**Descriptor:** burnout; profesional de la salud; salud del trabajador.

## INTRODUCTION

Stress is a mental damage that can be experienced by anyone, regardless of race or social class. This problem consists of an active state in which the individual is facing an adverse situation where the occupational stress corresponds to an excessive urge to adapt to changes in the work environment. This feeling often disappears during periods of rest and leisure, but when such feeling takes place it suggests a state of chronic stress, which can trigger the Burnout Syndrome.<sup>1-2-3</sup>

Working in the health area requires close contact with people who require daily care. Such interaction can generate professional involvement with the patient, as well as a physical and emotional closeness with people in a state of suffering and anguish that need help - which may weaken these professionals and leave them stressed.<sup>1-2-3</sup>

Therefore, it is clear that chronic stress may also be present in the routine of health workers, differing from the common kind of stress once it triggers emotional and/or physical problems and is present in the work environment. The physical and mental strain caused by the stress in the work environment is what leads to burnout Syndrome or Professional Burnout Syndrome.<sup>3-4-5</sup>

This Syndrome can be characterized as feelings of worthlessness, exhaustion, anxiety, and discontent that occurs due to poor adaptation of a human being to his/her work - generating feelings of physical, mental and emotional exhaustion, as well as personality changes.<sup>4</sup> The Burnout Syndrome is closely related to the professional activity and is divided into three dimensions: emotional exhaustion, depersonalization, and low personal accomplishment.

Emotional exhaustion is the feeling characterized by the lack of energy triggered by both the mental and physical exhaustion. Depersonalization is pointed out as the distance created by professional to patients as a way of coping, treating them sometimes as simple objects, developing impersonal attitudes. Low professional accomplishment corresponds to the feeling of dissatisfaction with one's performance regarding the work environment which may affect the professional generating frustration, low self-esteem and depression.<sup>3-4,6</sup>

In the health area, the presence of this syndrome is even more worrying because it can affect the services of care provided for the patients. Professionals strained by their daily routine and facing stress factors end up not performing their function with the same quality as they would without the effects of stress. Thereby, such professionals cannot generate the expected results, which fosters professional dissatisfaction, uneasiness in the performance environment and unwillingness to perform other activities. Therefore, Burnout Syndrome is considered a social problem of great importance and highlights the importance of promoting researches that seeks to elucidate the main cause of professional burnout syndrome - aiming to help individuals to develop stress coping strategies in their working environment.

The guiding question for this study was: what are the main factors that are related to Burnout Syndrome in health professionals? The goal is to identify the factors related to Burnout Syndrome in health professionals.

## METHODS

Descriptive research through an integrative literature review based on articles about Burnout Syndrome in health professionals.

The integrative review consists in analyzing all results of existing research on the same topic. It is an extensive literature review which aims at obtaining the understanding of a delimited subject from previous studies, intending to interpret reality exactly as it appears.<sup>7</sup>

For the construction of the integrative review it's necessary to go through six separate steps very similar to those steps of a conventional research: issue identification and selection of the research question, establishment of inclusion and exclusion criteria of studies, data collect, critical analysis of the included studies, discussion of results and presentation of the integrative review.<sup>8</sup>

Firstly a protocol was created in order to establish the review theme and also considering the goal of this paper, the guiding questions, the descriptors and the inclusion and exclusion criteria. Subsequently, the data collection in Virtual Bank BIREME was performed using the Virtual Health Library (VHL), in the following databases: Latin American Literature in Health Sciences (LILACS), International Literature in Health Sciences (MEDLINE), Spanish Bibliographic Index in Health Sciences (IBECS) and library Scientific Electronic Library Online (SCIELO).

The study considered complete articles published in Portuguese between 2003-2012 focusing in the Burnout Syndrome in health professionals that answered the guiding questions. Articles regarding animal testing, articles available in multiple databases and articles on the syndrome in students were excluded from this study approach.

The collection of material was held in September 2012. Uncontrolled descriptors were: burnout, stress, professional health and occupational health. After the data collection a prior selection was performed to choose articles that contemplated the inclusion criteria, and then a large reading process took place in order to organize the data and connect the information obtained with the purpose of the research. Finally, the final text summarizing the findings was designed.

It was not necessary the approval of the ethics committee since the research is a review and is not directly involved with human beings.

## RESULTS

After selecting the articles, 410 were found - obtained from the descriptors. The first analysis searched only for complete texts - articles - obtaining a sum of 67 papers. After that, a language selection filter regarding exclusively Portuguese publications was applied, bringing the sum down to 46 articles. Finally, it was assessed whether the studies contemplated the guiding questions and only eight publications remained, however one of them was present in two research bases. Thus, only seven were selected for analysis. In Scielo library and IBECS database, weren't found any articles related to the topic and that fitted into the criteria of this review, as explicit in the following Table 1:

**Table 1:** number of studies found on the *Burnout Syndrome* in health care professionals available in BIREME 2012.

| Database     | 1 <sup>a</sup><br>Selection | 2 <sup>a</sup><br>Selection | 3 <sup>a</sup><br>Selection | 4 <sup>a</sup><br>Selection |
|--------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Lilacs       | 77                          | 50                          | 44                          | 7                           |
| Medline      | 332                         | 16                          | 2                           | 1                           |
| Ibecs        | 1                           | 1                           | 0                           | 0                           |
| Scielo       | 0                           | 0                           | 0                           | 0                           |
| <b>Total</b> | <b>410*</b>                 | <b>67</b>                   | <b>46</b>                   | <b>8**</b>                  |

\* On the total articles of the 1<sup>st</sup> selection, one was impossible to open for analysis.

\*\* An article was found in two databases, being only eight analyzed.

From the analysis of the selected articles, it was found that 42.8% (3) addressed the Burnout Syndrome in Community Health Agents (ACS) in the Family Health Strategy (ESF), 14.3% (1) spoke of this syndrome in doctors of the ESF, 14.3% (1) sought to assess stress and Professional Burnout Syndrome of nurses of the Intensive Care Unit (ICU), 14.3% (1) assessed the same syndrome in workers at a medium complexity hospital, and 14.3% (1) addressed the quality of life in the working environment and the Burnout Syndrome in physical education teachers.

The main trigger factors of the Burnout Syndrome present in health professionals working environment were: the infrastructure deficiency in the workplace, lack of material, relationship difficulties between the multidisciplinary team, reduced demand for professionals, work overload, low wages and lack of incentives for training.

Another data found in the analysis of the studies was that in 42.8% (3) of the articles, older professionals demonstrated less anxiety about the problems experienced in the professional environment.

Among the surveyed articles it was found that most of them, 71.4% (5), were accomplished in the South and Southeast regions of Brazil, and only 14.3% (1) of the articles dealt with research in the Northeast region of the country - and the remaining 14.3% (1) corresponded to an essay.

Table 2 shows a summary of selected studies in integrative review about the knowledge produced regarding the Burnout syndrome in health professionals.

**Table 2:** selected articles that discuss Burnout Syndrome in health professionals, in articles published in BIREME 2012

| Study Title   | Place     | Year        | Collection Instrument   |
|---|-----------|-------------|---|
| Burnout syndrome and common mental disorders among community health agents.                             | São Paulo | 2.006       | Questionnaire of sociodemographic, socioeconomic and on the work and health data of the respondent; Maslach Burnout Inventory (MBI)* e o Self-Reporting Questionnaire (SRQ-20). |
| Burnout among doctors of the Family Health: work transformation challenges.                             | Recife    | 2.005/2.006 | Hermeneutic-dialectic approach.   |
| Stress evaluation and Burnout Syndrome in nurses working in an intensive care unit: a qualitative study | Guarulhos | 2.009       | Inventory Stress for Nurses (IEE) and MBI.  |

| Study Title  | Place             | Year         | Collection Instrument  |
|--|-------------------|--------------|--|
| Burnout Syndrome in community health agents: aspects of their training and practice.                             | --                | --           | Theoretical research from publications found in LILACS database *.   |
| Burnout Syndrome in health workers in a medium complexity hospital   | Londrinha         | 2.008 /2.009 | MBI Questionnaire.   |
| The quality of life at work and burnout syndrome in teachers of physical education in Rio Grande do Sul, Brazil. | Rio Grande do Sul | 2.007        | The quality of Life Assessment Scale on Perceived Work for Teachers of Physical Education (QVT-PEF), MBI and a sociodemographic questionnaire. |
| Burnout Syndrome in community health workers and Coping Strategies.  | Minas Gerais      | 2.006        | MBI and Problems Confronting modes Scale (EMEP).   |

\* MBI: Maslach Burnout Inventory

\*\* Latin American Literature on Health Sciences database.

## DISCUSSION

According to the data obtained in this study, it was observed that the Community Health Agents (ACS) in the context of the Family Health Strategy were the professionals most affected by the Burnout Syndrome. The fact that ACS have to live and work in the same neighborhood forces them to live in a contradiction. They take part in the health practices and in the reality of their community, however, as workers, they need to think and act according to the frames of biomedical model that guided their training.<sup>6</sup>

Also, they perform tasks of specific care towards another human being, which promotes physical and emotional closeness with individuals in a state of suffering and distress. Added to this, the ACS experience a low educational level, salary, and prestige. These factors can promote physical and emotional strain in these professionals, making them more likely to develop the syndrome - since it is characteristic of workers who deal directly with people and result of chronic stress.<sup>2-3-4-5-6,9-10</sup>

In this sense, the study has indicated that the high frequency of intense levels of burnout in this working class suggests the need to develop ways that interfere with the daily lives of these individuals. Thus carrying out further research on the extent and determinants of burnout related to ACS is necessary.<sup>6</sup> However, in spite of dissatisfaction with

their work, the ACS recognize their values and work hard to preserve their professional function of help and care.<sup>10</sup>

A study in Caetanópolis (Minas Gerais, Brazil) assessed the presence of Burnout Syndrome in all municipal ACS and found that most of the sample presented an indicative score of emotional exhaustion and depersonalization. Therefore, this corroborates the results of this study, once it has founded the ACS as the most affected by the syndrome.<sup>11</sup>

In addition to the ACS, medical professionals in the context of the ESF were the second most studied group regarding the presence of Burnout Syndrome.<sup>9</sup> It is assumed that this occurs because of the working conditions to which they are exposed - given by a high demand of patients, lack of physical infrastructure and equipment, lack of medicines, among others. This contributes to the fact that the expected results towards improving the health status of the people assisted are not achieved, generating consequences such as stress and low job satisfaction.

As a factor associated with professional Burnout Syndrome in doctors of the ESF, figures the need to develop tasks which are not related to their occupation - as bureaucratic tasks and group guidelines for the population, and also the fact of dealing with members of a team, which can lead to the loss of sense of medical hegemony, which also emotionally affects these professionals, especially their self-esteem.<sup>9</sup>

In addition to the ACS and the ESF doctors, nurses working in Intensive Care Unit (ICU) figured as another group analyzed regarding the presence of Burnout Syndrome. The study noted that despite the fact that the nursing work is often stressful due to direct contact with sick people and the large number of actions to be developed during the shift hours, the ICU nurses can deal better with such difficulties. The signs and symptoms of Burnout Syndrome exist only in a small portion of the population studied, but most professionals excel at nurturing coping factors that avoid the complete fixation of the problem. Therefore, they suggest that job satisfaction, in this case, prevents the development of mental health problems in the professionals who are satisfied with their function.<sup>4</sup>

In this context, other professional quoted in the studies analyzed were Physical Education teachers. In the study performed, few professionals presented an indicative score of Burnout Syndrome, suggesting that the physical educator professional is satisfied with the quality of working life.<sup>3</sup> This may be related to physical exercises performed by these workers, triggering a low predisposition to the syndrome.<sup>3</sup>

Regarding the most mentioned risk factors, Trigo, Teng and Hallak<sup>12</sup> bring that infrastructure deficiencies, the lack of material, low wages and lack of incentives for training can generate professional feelings of anxiety, fear and helplessness. Such factors can put the professional in a vulnerable position where the emotional exhaustion takes place - identified as the first symptomatic reaction of Burnout Syndrome.<sup>13</sup>

The relationship difficulties between the

multidisciplinary team also rose as a risk factor concerning the development of the syndrome, once such phenomenon may occur due to inefficient communication - which causes distortion and delay in the transmission of messages among workers. The conflictual relationship between colleagues also causes feelings of helplessness, generating a lack of consideration and respect among team members<sup>12</sup> and making the working environment in the institution hostile to the health professionals.

Regarding the fact that older professionals showed less anxiety about the problems experienced in the professional environment, it was assumed that the experience creates more security considering work demand and responsibility for the decisions - which generates less emotional distress.<sup>4,6</sup> Also, recent college graduates demonstrate a desire for quitting that can be harmful to the health of these workers and the quality of care provided to the population.<sup>9</sup>

This study also identified that most of the analyzed studies were conducted in the south and southeast regions of Brazil, the two most developed regions in the country. Such fact may be related to living conditions and employment characteristics in these regions, once technological gains provide an expansion in productivity and profit, which in turn increase social and economic instability due to the deterioration of the productive relations, the rising unemployment and changes in habits and lifestyles of workers. Thus diseases like the occupational stress and professional burnout syndrome - related to psychological factors in the workplace - are more frequent.<sup>5</sup>

Therefore, it was evident that an investigative and preventive intervention is extremely important, as it aims to identify signs and symptoms of Burnout Syndrome so it can perform early therapeutic actions in all health professionals who display burnout signs and symptoms. Such therapeutic actions should be focused in the worker and the work environment, so that a balance between the perspectives of the individual and the requirements of the institution is expected to be achieved.<sup>5</sup>

## CONCLUSION

This integrative review sought to analyze the articles in the literature that address the Burnout Syndrome in health professionals, seeking to identify the factors related to the development of the syndrome in health professionals.

In the studies analyzed, it was noted predominant publications dating from 2005 to 2009, indicating that in the last years few studies have been conducted in Brazil and in the Portuguese language regarding the occurrence of Burnout Syndrome in health professionals.

Out of the articles found, 57.2% (4) deals exclusively with the Burnout Syndrome related to some professional health class. The remaining 42.8% (3) deals with this syndrome associated with another emotional factor.

The significant number of studies - 57.2% (4) - related to the Professional Burnout Syndrome and the ESF

shows that there is a higher risk of occupational stress in these professionals.

Finally it is important that more studies on this subject be produced, since few studies were found concerning the professional burnout in health care workers. Also it is expected that new studies may reach deeper into the preventive measures and treatment to the disease. The improvement in working conditions for health professional acts towards providing a more appropriate health care to patients.

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