

Relationship of Occupational Adjustment With Psychological Empowerment and Job Burnout in Iranian Nurses

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Received: 11 Feb. 2020; Accepted: 18 Jul. 2020

Abstract- The present study intended to determine the relationship of occupational adjustment with psychological empowerment and job burnout of nurses. This descriptive correlational study was conducted on 209 nurses working in educational hospitals. The eligible nurses were enrolled in the study through simple random sampling and filled out the demographic questionnaire, the Dawis and Lofquist Occupational Adjustment questionnaire, the Spreitzer Psychological Empowerment Instrument, and the Maslach Burnout Inventory. There was a significant positive relationship between occupational adjustment and psychological empowerment ($P < 0.001$) and a significant negative relationship between occupational adjustment and job burnout of nurses ($P < 0.001$). Regression analysis showed that occupational adjustment explained 46% of the psychological empowerment variance and 52% of the job burnout variance. The occupational adjustment has a significant positive relationship with psychological empowerment and a significant negative relationship with job burnout among nurses. Considering that nurses experience severe burnout in their work environment, programs should be developed to improve the psychological empowerment of nursing care.

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Acta Med Iran 2020;58(8):408-412.

Keywords: Occupational adjustment; Psychological empowerment; Job burnout; Nursing

Introduction

Occupational adjustment is described as behaviors that lead to a good performance of duties and a positive attitude towards the role of a new job (1). The multi-dimensional and hierarchical structure of occupational adjustment includes the values of achievement, comfort, status, altruism, safety, autonomy, and adjustment (2). An increase in work efficiency and job satisfaction, improvement of performance, and decrease in conflict, job stress, and psychological problems are among the outcomes of occupational adjustment (1).

Psychological empowerment is a factor that can play an important role in the occupation outcomes, such as job satisfaction (3), and reflects the employees' perception of controlling their work environment (4). The dimensions of psychological empowerment are (5). Meaning, competence, self-determination, and impact (6). Its main purpose is to help managers maximize the efficiency and ability of their employees (1).

A satisfactory job can turn into a source of dissatisfaction over time and lead to job burnout, which,

as a major characteristic of occupational stress, is a kind of delayed response to chronic stressors in the workplace (7) and has multiple harmful effects on individuals, their organization, and society in the long term (8). Job burnout reduces the performance of employees through emotional exhaustion and depersonalization (7).

Nurses are the main and important factors in the health system, and their ability directly affects the health system performance. The quality of patient care in hospitals depends more on the activity of nurses than anything else, and given the nature of the emotional needs of this occupation, nurses are highly prone to burnout; in addition, burnout is one of the causes of absenteeism or job quit, ultimately leading to poor patient care and increased medical errors (9).

On the other hand, factors such as high work pressure, conflict with colleagues, witnessing patients' pain and death, professional responsibilities, and administrative system are the main reasons for preoccupation (10), and work tensions can result in burnout in the long term (11), leading to reduced

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performance, physical and behavioral changes, decreased quantity and quality of services provided to patients, and, consequently, dissatisfaction with nursing care (12).

Although the effectiveness of hospitals is claimed to depend on the level of psychological empowerment and burnout of nurses, and despite the importance and necessity of job adjustment and its advantages, little research has been done in this regard. The role of occupational adjustment has not been mentioned in previous studies regarding psychological empowerment and job burnout in nursing staff. Therefore, the present study aimed to determine the relationship of occupational adjustment with psychological empowerment and job burnout among Iranian nurses.

Materials and Methods

Participants and setting

This descriptive-correlational study was performed on nurses working in Y teaching hospitals in 2017-2018. From a total of 600 nurses, 209 subjects were included in the study based on the Cochran sampling formula. Nurses were selected based on simple random sampling and divided into three groups of general, intensive care, and emergency based on the wards.

Inclusion criteria were a minimum work experience of four years, and no management position and exclusion criteria were nurses on leave and nurses working in administrative (non-medical) departments.

The eligible nurses filled out the questionnaires individually. Before distributing the questionnaires, the research objective was described to the participants, and they were assured about the confidentiality of collected data and that they would be used only for the research objective. The participation of the nurses in this study was voluntary with informed consent.

Measurements/Instruments

The demographic questionnaire included age, sex, education, ward, work experience, and marital status.

a) The Dawis and Lofquist occupational Adjustment Questionnaire consists of 36 items with seven dimensions of achievement value (3 items), comfort value (13 items), status value (4 items), altruism value (5 items), safety value (6 items), autonomy value (2 items), and adjustment style (3 items) (13). The reliability of the questionnaire was obtained by Cronbach's alpha (0.79) (14).

b) The Spreitzer Psychological Empowerment Instrument with 15 items and five components of

competence (items 1-3), self-determination (items 4-6), impact (items 7-9), meaning (10-12), and trust (items 13-15) evaluates psychological empowerment (5). The questionnaire is scored based on the 5-point Likert scale from totally disagree (1) to totally agree (5). The minimum and maximum scores of the questionnaire are 15 and 75, respectively; higher scores indicate the higher psychological empowerment of the employee in the workplace. The questionnaire's reliability was obtained by Cronbach's alpha as 79% in the study of Abili and Nastizae (15).

c) The Maslach Burnout Inventory consists of 22 items and 3 components of emotional exhaustion (items 1, 2, 3, 6, 8, 13, 14, 16, 20), depersonalization (items 5, 10, 11, 15, 22), and personal accomplishment (4, 7, 9, 12, 17, 18, 19, 21) and measures the degree of job burnout. The inventory is scored based on the Likert's 7-point spectrum (never, a few times a year or less, once a month or less, a few times a month, once a week, a few times a week, every day) from zero to six (16,17). The minimum and maximum scores are zero and 132, respectively, and the higher the score, the greater will be the individual's burnout and vice versa. The reliability of the inventory was obtained through Cronbach's alpha (0.79) (1,18).

Data analysis

The data were analyzed in SPSS 21 through descriptive statistics such as mean, standard deviation, frequency, Pearson correlation coefficient, and linear regression.

Results

The results showed that the mean age of nurses participating in the study was 38.51 ± 11.07 years, with the lowest and the highest age of 26 and 53 years, respectively. Out of 234 questionnaires distributed among nurses, 209 questionnaires were completed.

According to Table 2, there was a significant positive relationship between occupational adjustment and psychological empowerment ($P < 0.001$) and a significant negative relationship between occupational adjustment and job burnout ($P < 0.001$) of nurses. Table 2 shows the relationship between psychological empowerment and job burnout with occupational adjustment dimensions.

According to Table 3, the job burnout coefficient of determination is 0.52, meaning that occupational adjustment explains 52% of the job burnout variance. Among the components of occupational adjustment, the

Job burnout in Iranian nurses

values of achievement with a β of -0.356, adjustment style with a β of -0.336, autonomy with a β of -0.320, status with a β of -0.220, safety with a β of -0.198, altruism with a β of -0.194, and comfort with a β of -0.18 had the maximum power to predict job burnout ($P < 0.001$).

According to Table 4, the psychological empowerment coefficient of determination is 0.46, meaning that occupational adjustment explains 46% of

the psychological empowerment variance. Among the components of occupational adjustment, the values of status with a β of 0.347, adjustment style with a β of 0.326, autonomy with a β of 0.286, comfort with a β of 0.276, safety with a β of 0.129, altruism with a β of 0.185, and achievement with a β of 0.185 had the maximum power to affect psychological empowerment ($P < 0.001$).

Table 1. The demographic characteristics of the participants

Variables		Number (%)	P
Sex	Male	52 (25)	0.445
	Female	157 (75.1)	
Educational level	Diploma	10 (4.8)	0.664
	Associate degree	9 (4.3)	
	Bachelor	176 (84.2)	
	Master	14 (6.7)	
	General	89 (42.6)	
Ward	Emergency	53 (25.4)	0.459
	Critical	56 (26.8)	
Work experience(years)	Other wards	11 (5.3)	0.445
	4-8	141 (67.5)	
	8-12	40 (19.1)	
Marital status	12 and higher	28 (13.4)	--
	Single	73 (34.9)	
	Married	136 (65.1)	

Table 2. The Spearman correlation coefficients between job adjustment with psychological empowerment and job burnout

Variables		values of achievement	values of comfort	values of status	values of altruism	values of safety	values of autonomy	style of Adjustment
	Mean (SD)	9.52(1.63)	34.72(5.35)	11.46(1.82)	14.74(2.84)	18.18(5.24)	5.78(.98)	8.96 (1.55)
Psychological Empowerment	26.06	R 0.339	0.356	0.221	0.421	0.232	0.187	0.212
	(7.10)	P 0.001<	0.001<	0.004	0.001<	0.001<	0.021	0.002
Job Burnout	99.82	R 0.388-	0.204-	-0.213	0.301-	0.362-	0.172-	0.353-
	(25.85)	P 0.001<	0.003	0.002	0.001<	0.001<	0.012	0.001<

Table 3. The Linear regression analysis to predict job burnout based on Occupational adjustment

Dimensions of Occupational Adjustment Questionnaire	Non-standard coefficients		Standard coefficients	T	P
	β	Std. Error	Beta		
Values of achievement	1.53-	2.67	0.356-	5.74	0.001<
Values of comfort	0.250-	0.084	0.189-	2.99-	0.003
Values of status	0.855-	0.243	0.220-	3.51	0.001<
Values of altruism	0.481-	0.171	0.194-	2.81-	.005 0
Values of safety	0.133-	0.090	0.198-	1.47	0.004
Values of autonomy	0.145-	0.456	0.320-	0.319	0.002
Style of Adjustment	0.162-	0.279	0.336-	0.582	0.002
R²= 0.52					

Table 4. The Linear regression analysis to predict psychological empowerment based on Occupational adjustment

Dimensions of Occupational Adjustment Questionnaire	Non-standard coefficients		Standard coefficients	T	P
	β	Std. Error	Beta		
Values of achievement	1.33	1.08	0.185	1.232	.009 0
Values of comfort	0.367	0.338	0.276	1.086	0.001<
Values of status	0.664	0.986	0.347	0.673	0.001<
Values of altruism	0.113	0.694	1.29	1.604	0.010
Values of safety	1.342	0.366	0.272	3.671	0.001<
Values of autonomy	2.287	1.848	0.286	0.238	0.007
Style of Adjustment	0.295	1.13	0.326	0.084	.001<
R²=0.46					

Discussion

The present study intended to determine the relationship of occupational adjustment with psychological empowerment and job burnout of nurses.

The results showed a significant positive relationship between occupational adjustment and psychological empowerment of nurses, which means that the more is the adjustment of nurses with their occupation, the higher will be their psychological empowerment. In fact, psychological empowerment is an internal motivating factor that reflects the active role of employees in the organization. Few studies conducted in this field indicate a significant positive relationship between occupational adjustment and psychological empowerment (1). Job satisfaction is one of the indicators of occupational adjustment; in addition, psychological empowerment is affected by the occupational adjustment of nurses. The relationship between occupational adjustment and psychological empowerment has been proven in various studies (19-21); this is consistent with the results of the present study. Occupational adjustment causes the people to actively perform their job responsibilities because they feel themselves people capable of affecting their job and work environment through effective methods, resulting in feeling much psychological empowerment (21). Occupational adjustment of nurses makes them consider their profession meaningful, intrinsically concern their job, believe in their ability to perform duties, and as a result, feel-good psychological empowerment in the work environment (22).

The results also showed a significant negative relationship between occupational adjustment and job burnout among nurses, which means that the more is the adjustment of nurses with their occupation, the less they will experience job burnout (1); this is consistent with the results of studies conducted in this field. Regarding

the explanation of the relationship between occupational adjustment and job burnout, occupational adjustment can lead to an effective and good performance of the tasks by individuals and a positive attitude toward the new job roles and is associated with reduced conflict and increased work efficiency. As a result, adjustable individuals experience less job burnout in their work environment (Kuang CH *et al.*, 2007). Occupational adjustment causes employees to experience lower job burnout in the work environment and can affect the burnout level of nurses by reducing the role ambiguity, so that job burnout increases when employees experience more role ambiguity, and occupational adjustment can affect job burnout through increasing job satisfaction (1).

The occupational adjustment has a significant positive relationship with psychological empowerment and a significant negative relationship with job burnout among nurses. Considering that nurses experience high levels of burnout in their work environment, they must enjoy high psychological empowerment to perform high-quality nursing care. This study had some limitations; in this regard, it is suggested to repeat this research with larger sample size.

Acknowledgments

The present study was approved by the Yasuj University of Medical Sciences and sponsored by the Research and Technology Deputy. The authors would like to thank all nurses who participated in this study.

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Job burnout in Iranian nurses

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