CHAPTER II
REVIEW OF LITERATURE
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Burnout, being a relatively new and a controversial concept, much of the research deals with its conceptual framework. Though it is discussed in detail in previous chapter, it is considered worthwhile to begin the chapter with the review of these conceptual studies. Therefore, the chapter starts with the researches dealing with the conceptual aspects. Then, it is followed by other associated terms that are generally confused with it such as stress, job-stress and role-stress etc. It is followed by studies on various factors that emerge from the conceptual description especially those of Maslach's such as personal, work-related and socio-demographic. The last part of the chapter deals with the overall review of the studies covered in this chapter.

On the controversy of definition of burnout, Brill (1984) argues that the specificity of definitions of burnout will affect its ultimate utility and will suggest specific prevention methods. He considers burnout as an exceptionally mediated, job-related, dysphoric and dysfunctional state with major psychopathology in an individual who has (1) functioned for a time at adequate performance and affectual levels in the same job situation and who (2) will not recover to previous levels without outside help or environmental re-arrangements.
The pioneer worker Freudenberger in a review (1989) traces the origin of term and development of the concept of Burnout. Ascertaining, coping with and changing the root causes of burnout require examination of (1) the values, ethics and morality of society, (2) the organization (3) the individual worker within the institution. Contributions of the field of society include introducing and emphasizing the concepts of stress and burnout into the consciousness of society as well as enhancing the philosophies of wellness programmes and holistic health.

Starrin, Larsson and Styrborn (1990), in research review on the concept of burnout analysed the common belief that burnout (1) occurs at individual level (2) is an intrapsychic experience and (3) is negative. The most common approach to the origin of burnout is transactional one.

The exhaustive work of Maslach and her colleagues (1976, 1977, 1978, 1979, 1981, 1982 and 1986) have described burnout as a syndrome of emotional exhaustion, and cynicism toward one's work resulting from chronic organizational stressors. Maslach and Jackson (1982) have developed comprehensive scales to measure 'burnout' as syndrome of emotional exhaustion (EE), depersonalization (DP) and reduced personal accomplishment (PA). Belcastro, Gold and Hays (1983)
tested and justified the factor structure and norms of Maslach Burnout Inventory (MBI). Green and Walkey (1988), Lee and Ashforth (1990) also confirmed the factor structure of three sub-scales of MBI. The inventory possesses reliability, convergent, face and discriminant validity (Golembiewski and Kim, 1983; Corioran, 1986; Koeske and Koeske, 1989; Lahoz and Mason, 1989, Abu-Hilal and Salameh, 1992). Exhaustion is regarded as the essence of burnout which is highly correlated with Depersonalization.

The established dependability of MBI paved way for systemic studies of burnout. Golembiewski and his colleagues (1986) have proposed and pursued the examination of burnout as a process that involves the notion of phases within the concept. They work for stress, it will be helpful in eliminating the burnout stress syndrome.

Therefore, it can be stated that burnout is a process initiated by 'unmediated stress' at individual level which encompasses society as causing distortion of personal, professional, social, intellectual and spiritual affairs. Since, stress - rather failure to cope with stress, generates burnout, it is generally considered as burnout itself. In
order to understand, it is very essential to deal with the concept of stress and try to differentiate between the two terms.

Burnout and Stress

Stress can lead to burnout but not all who are stressed are burned out (Brill, 1984). It is suggested that stress and burnout are separate constructs that can be thought of as distinct identities (Laton, 1988).

Watmough (1983) examined factors relating to stress in the general work environment focusing on those related to the caring professions and discussed eight factors that Edelwich and Broadsky (1980) considered to be built-in sources of frustrations that eventually lead to burnout among many dedicated workers:

1. noble aspirations and high initial enthusiasm
2. lack of criteria for measuring accomplishment
3. low pay at all levels of education, skill and responsibility
4. upward mobility through administrative channels
5. sexism
6. inadequate funding and institutional support
7. inefficient use of resources
8. high public visibility coupled with popular mis-understanding and suspicion.
Jupp (1991) examined the effects of stress and sources of support on burnout and the effect of duration of employment. Results revealed that the Ss who experienced more life stress had significantly more general psychological and physical distress than the Ss who reported less life stress. Burnout was significantly associated with general distress, negative appraisal of more rather than fewer aspects of employment and levels of negative attitudes expressed about peers and clients. More support was experienced from various sources by Ss with longer employment. Female Ss especially those who had been employed longer, reported significantly more life stress than male Ss.

Stress coping style and dysfunctional work patterns may cause burnout (Fremont, 1989). It can be stated that burnout occurs at a final step in progression of unsuccessful attempts to cope with a variety of negative stress condition. It is remarkable to note that a stress does not necessarily have a negative effect on the individual, while burnout always does (Starrin et al, 1990).

Burnout is considered as a work-related phenomena. Hence, stress at the work-place, i.e. job-stress, seems more relevant and mostly equated to burnout.
Burnout and Job-stress

Shinn, Rosario, Morch and Chestnut (1984) conducted a survey to investigate the effects of coping on psychological strain and burnout produced by job-stress. Job-stress was associated with high levels of strain, and group coping with low levels but individual responses had little effect. There was no evidence for moderating effects of stress and coping on strain.

Another study by Zabel, Boomer and King (1984) revealed that mismatch between expectations and perceived reality of job can lead to a repeated cycle of unsatisfactory experiences, unpleasant feelings; behavioural manifestations of these feelings lead to the negative reactions of other i.e., depersonalization.

Stress has positive correlation with job-related happiness (Rottier, Kelly and Tomhave, 1983). Higher amount of job-stress have association with higher levels of burnout. Social support from supervisors and colleagues that decreases stress has association with lower levels of burnout but does not serve a buffering function (Ross, Altmaier and Russell; 1989). Job-stress and life-stress were positively correlated with burnout while job and life support were negatively
correlated with burnout. Neither job-support or life-support moderated job stress or life stress burnout relationships (Hendrix, Cantrell and Steel; 1988).

Stress - of any kind and at any level, if cannot be mediated adequately, it always affects negatively on human behaviour and performance. A particular level of stress on job enhances degree of performance but excessive stress if remains unmediated results into negative feelings with job and associated elements. This reduces the quantity and quality of performance and hampers personal well being in totality.

Role stress refers to the feelings of strain related to one's 'role' in various fields of life. The role-structure influences the feelings of stress and severity of burnout (Cherniss, 1980). Role-stress, too many times is matched with burnout as such.

Burnout and Role-stress

Holloway and Wallinga (1990) studied the relationship between burnout and role stress (role ambiguity and role conflict). Role ambiguity was a stronger predictor variable of burnout than role conflict. In a similar type of study role conflict was the strongest predictor of personal
accomplishment while role ambiguity was the strongest predictor of emotional exhaustion and depersonalization (Boyd and Pasley, 1989).

Pierce and Molloy (1990) concluded that Ss who recorded high levels of burnout were characterized by lower levels of hardiness, lower levels of social support, higher levels of role stress and more custodial ideologies than low burnout Ss.

In relevance to burnout, particularly role-stress in work set-up i.e. organisational role stress seems much relevant.

In India, systematic study of organisational stress gained momentum with the development of Role Stress Scale by Udai Pareek (1976). One group of researchers (e.g. Das, 1982; Pestonjee and Singh, 1982; Surti, 1983; Sharma, 1984) had conducted a systematic comprehensive investigation in this area.

Some researchers have attempted to identify the organisational stressors amongst samples. Despande (1978) analysed stressors among senior executives to be management policies, manpower planning, appraisal system, promotions, work routines, interpersonal relations, lack of co-ordination
and the perception that abilities remain unutilized. Some other organisational stress identified by Shah (1978, 1980) and Kumar (1981) include divergent objectives of individuals and organizations, lack of communication, general, social, political and economic environment and poor inter-personal relationship. Kumar (1981) emphasized the harmful consequences of such stressors both for individual and the organization and suggested serious research in the untouched field of industrial psychiatry.

Physician impairment is a relatively new concept which has emerged out of the attention of researchers towards the health care professionals who have reported out to be severely affected by stresses. Hence burnout in relation to physician impairment catches attention.

**Burnout and Physician Impairment**

Vincent (1983) reports growing interest in the adverse effects of stress on the physician and the medical family in last two decades. Based on the experience of treating approximately 300 physicians and their spouses over 25 years period, the author discusses the following factors (1) the pattern of over-work, fatigue, exhaustion and depression (2) alcohol dependency (3) drug dependency (4) failure to develop marital intimacy (5) suicide; which are most predictive
outcomes of burnout.

Mitchell (1984) studied work-related stressors of 'impaired physician' in two categories — administrative factors and clinical factors. Of the two the administrative ones were more critical, in consistent with the findings on both fire (McGlown, 1981) and police emergency services (Silbert, 1982; Cooper et al 1982, 1983). Taken together — the various stressors contribute to a loss of concern for patients and to the absenteeism and attrition in the profession (Mitchell et al 1983, Johnes, 1981).

Belfer (1989) focuses on psychological, physical illness experienced by doctors. Study results suggest that doctors do not use their professional knowledge to reduce their own mortality risk or they are exposed to hazards — more likely to mental than physical — than cancel out such an effect. Findings reveal that Ss working in long term care facilities experienced emotional exhaustion more frequently than did Ss working in acute care facilities (Hare and Pratt, 1988). Also feelings of depersonalization and exhaustion were more commonly found in Ss who provided services to patients with chronic illness other than cystic fibrosis (Coady, Kent and Davis, 1990).
By taking all together it can be concluded that impairment of physician who cares for innumerable individuals is a serious issue. It needs extensive studies to deal with the causes and various associative aspects. This would help in minimizing the problem among them and in receiving best care from them.

Research in the field of burnout have yielded some distinct findings. Certain factors such as personal, work-related and socio-demographic have emerged as antecedent of the burnout syndrome from the most exhaustive work in the field by Maslach et al (1976, 1979, 1981, 1985).

To study various personal factors and burnout, a number of studies have been conducted. A few of them are being reviewed. Personal variables perhaps are the most important ones and their range is also very wide right from age, sex to personality traits.

**Personal Factors in Burnout**

Personal variables significantly affect the burnout (Weinberg, Edwards and Garove; 1983). It has positive relationship with anxiety state and repression — sensitization but negative relation with learned resourcefulness (Naisberg, Fennig, Keinan and Elizur, 1991). In a study available coping
resources were negatively related to burnout along with age, strength of religious beliefs and plans to retire from present job (Turnipseed and Turnipseed; 1991).

Lemkan, Purdy, Rafferty and Rudisill (1988) found few significant relationships between burnout scores and situational factors and background; however, numerous relationships were found among personality measures, burnout scores and measures of regret. Personality factors were more predictive of burnout than demographic and situational factors (Naisberg et al, 1991).

In a study of 'feeling types' and 'thinking types', Garden (1989), found that emotional demands and a lack of caring for others were associated with the measure of burnout only for 'feeling types'. The measure of burnout was associated with mental demands and lower ambitiousness in 'thinking types'.

Overall self-esteem decreases as the phases of burnout advance (Golembeiwski and Kim, 1989). Greater hardiness was associated with less stress and burnout whereas greater stress was not significantly linked with greater burnout (Topf; 1989). Results of a survey examining the relationship between empathy among female social workers show that burnout was
associated with empathy when there was a loss of emotional separation (Corcoran; 1989). Noteworthy studies have been conducted on Maslach's model. Nowach, Kenneth and Hanson (1983) found that cognitive hardiness significantly relates to the severity of emotional exhaustion and the frequency and severity of depersonalization and reduced personal accomplishment. Emotional exhaustion is found to be positively correlated with external locus of control and personal accomplishment a negative correlate with externality (St. Yves, Freeston, Goodbout and Poulin; 1989). Day and Chambers (1991) examined relationship between burnout and empathy and found that personal distress was positively related to emotional exhaustion, depersonalization and reduced personal accomplishment while emphatic concern and perspective taking were negatively correlated with depersonalization and reduced personal accomplishment.

A study of teacher burnout by Mazur and Lynch (1989) revealed personality characteristics such as anomie personality type A and B and emphatic self-concept as significant predictors. Most dedicated, competent and productive human service providers are not vulnerable to burnout (Weinberg, Edward and Garove; 1983). Grimm and Yarnold (1984) tested the hypothesis that type A Ss set higher
performance standards than Type B Ss, and found supportive results. Evidence to support this view comes from a study by Kirmeyer and Biggers (1988) showing that Type A Workers generate a greater workload by initiating tasks and by simultaneously attending to multiple tasks which is a typical burnout-prone personality characteristic (Maslach et al, 1986).

Results of a study by Greenglass (1988) show that type As (both men and women) used significantly more instrumental coping than type Bs and that Type Bs were more likely to use social support to cope with job-stress which is a precursor of burnout.

Recent reviews have attempted (Cherney and Rosenman, 1980; Ganster, 1987) the burnout prone behaviour i.e. Type-A behaviour pattern and occupational stress in the work setting. Cherney and Rosenman (1980) draw the following conclusions, relying heavily on data from laboratory investigations:

(a). Type-A persons experience time pressures because they under-estimate the time required to do tasks,
(b). They tend to work quickly and to show impatience and decreased work performance if forced to work slowly.
(c). Type-A persons ignore, suppress or deny physical or physiological symptoms while working under pressure and report symptoms only when the work is finished.

(d). Type-A persons work harder and experience physiological arousal when a task is perceived as challenging.

(e). They, along with hard-driving and competitive behaviours, express hostility and irritation in response to challenge or threat.

(f). Type-A persons need to be in control of the immediate environment to such an extent that a lack of control may elicit a hostile, competitive response.

(g). Type-A behaviour is generally related to occupational prestige, education and income.

(h). These persons describe their jobs as having more responsibility, longer hours and heavier work loads than do Type-B persons.

(i). Type-A persons in general report the same levels of job-satisfaction, anxiety, and depression as Type-B persons.

Various studies have examined personality correlates of the behaviour pattern (Schiraldi and Beck, 1988). It has been shown that Type A persons are likely to be more anxious (Nowack and Sassenrath, 1980), more aggressive (Carver and Glass, 1978), more impulsive (Blumenthal, Mckee, Williams and
Harvey, 1981), more extrapunitive (Irvine, Lyle and Allen, 1982), more neurotic (Lovalls and Fishkin, 1980) and more extraverted (Furnham, 1984) than Type B persons. Type A behaviour has been conventionally viewed as a style of response to environmental demand or challenge (Matthews and Haynes, 1986; Rosenman, 1978). Type A behaviour was associated with cynicism, interpersonal negativity and depersonalization (Nowach, 1991). More recently an interactive model of type A behaviour has been proposed in which cognitive-behavioural style influences environmental demand, which in turn stimulates a Type A or B response (Smith and Anderson, 1986; Smith and Rhodewalt, 1986).

Researches focused on personal factors of burnout signify their importance in the feeling of it. Various antecedents have attempted the relational research and a comparatively less attention is given to the predictive one. Hence, association of various personal factors with burnout is revealed but much extensive work is desired in the field to explore the 'causal' relationship of personal variables with burnout.

Literature dealing with personal factors have traced out the roots of organizational variables consistent with the feelings of burnout that follows as under.
Work-related Factors

Organisational variables contributed more to predicting burnout than the individual variables (Holloway and Wallinga, 1990). Organisational researchers have given attention to burnout because it is associated with alcohol and drug abuse and family and work-related problems (Dorian and Taylor, 1984; Violanti, Marshall and Howe, 1983). Signs of burnout, within organisations are - increased use of sick-time, decreased use of vacation time, increased number of on-the-job accidents, decrease in work quality and increased use of overtime in small increments of time (Harris, 1984).

The determinental affects commonly attributed to burnout stress syndrome are increased absenteeism and turnover, job-dissatisfaction and an overall decline in work performance (Maslach and Jackson, 1981; Seamonds 1982, 1983).

Burnout has negative association with job performance (Nowack, Kenneth, Hanson, 1983) and job-satisfaction (Jayaratne, Himle and Chess, 1991; Rimmerman, 1989; Penn, Romano and Foat, 1988); tenure and years in place of employment (Naisberg and Fenning Keinan and Elizur, 1991) and current job expectations (Bloom, Burke and Scott, 1988) but
positive association with job expectations at the time of initial employment in the rehabilitation field and to changes in expectations.

Cherniss (1992) in a longitudinal study analysed the Ss who were more burned out early in their careers were less likely to change careers and more flexible in their approach to work as rated by confidants at the time of follow-up.

Analysis revealed that work-load, time-pressure, lack of positive feed-back, lack of support and co-operation (interpersonal relationships) desire to change careers, job contentment, unclear goal from administration, lack of personal career plans; are major predictors of burnout (Starrin, Larsson and Styrborn 1990; O’Driscall and Schubert, 1988; Hock 1988; Drory and Shamir, 1988; Hamann, Daugherty and Mills, 1987; Sarros and Friesen, 1989, 1987). Findings further reveal that work relationships and tension releasing and instrumental problem focused coping were the most powerful predictors of burnout (Hare, Pratt and Andrews, 1988). Moreover, stress experienced in situations requiring environmental adjustments were other significant predictors of burnout (Fuehrer and McGonagle, 1988).
Raquepan and Miller (1989) evaluated that actual caseload among therapists was not associated with burnout but their satisfaction with their caseload was therapists who indicated that their ideal case load would be smaller than their current caseload were more burned out than those who were satisfied with their case load.

A good deal of work has been done on Maslach's model of burnout. Work overload, perceived lack of control and dis-satisfaction with certain aspects of the job were significantly related to Emotional Exhaustion (Maslach and Florian, 1988).

Coady, Kent and Davis (1990) found a significant relationship between team support and supervisory support and low burnout scores. Measures of coworker support (team cohesion and perceived quality of friendships) were better predictors of burnout than supervisory support. High level of coworker support were consistently and positively related to greater personal accomplishment. Moreover levels of personal accomplishment increased and emotional exhaustion decreased as staff accumulated more work experience (Kruger, Botinan and Goodenow, 1991).
Role-conflict, role ambiguity, lack of comfort and dissatisfaction with financial reward emerged as significant predictors of depersonalization and high challenge emerged as significant predictor of reduced personal accomplishment (Siefert, Jayratne and Chess 1991).

Naisberg et al (1991) found that years in place of employment were significantly related to the feelings of burnout. Snibbe et al (1989) also found the relationship of job-experience with burnout syndrome. Newer physicians were more susceptible to depersonalizing their patients as compared to their experienced counterparts.

In a study of resident assistants (RA) Hetherington (1989) found that all experienced RAs reported a sense of greater personal accomplishment to their fresh staff.

Eichinger, Heifetz and Ingraham (1991) found that higher levels of instrumentality 'on' the job and 'off' the job were associated with higher levels of 'reduced personal accomplishment' and lower levels of 'depersonalization'.

Literature reviews the important organisational contributes in development and feeling of burnout stress syndrome but much attention is paid to the 'effect of feeling
on performance and various productive measures'. The area needs to be traced with the causal relationship of various work-related factors so as to predict the problem and prevent it in the bud.

Since burnout affects the individual's well being in totality, its roots must also be lying in the total structure/network of human-being and his environment - social, cultural, historical. Owing to this view, researchers have given due weightage to socio-demographic variables in study of burnout stress syndrome.

**Socio-demographic Factors**

Maslach and Jackson (1981, 1984) mention the importance of certain demographic factors like age, sex, marital and family status and education etc. in feeling of burnout stress syndrome.

Age' is negatively related to burnout whereas 'education' is found to be a positive correlate. Compared with married and the people having issues, the unmarried and issueless persons are more prone to 'emotional and exhaustion' and 'depersonalization' but the 'reduced personal accomplishment' is sensed at much lower level (Maslach et al 1981, 1984, 1986) and have suggested to explore in the same
Various researches have concluded that demographic and situational factors are relatively less predictive in burnout stress syndrome (Lemkau, 1988; Naisberg et al, 1991). On the other hand research suggests that there may be an association between sex roles and burnout. In a study by Burke and Greenglass (1989), results indicated that sex difference is an important psychological factor that interacts with stressors to affect an individual’s burnout. Seidman and Zaar (1991) also found association between gender and burnout.

Various studies have revealed that women, compared to men, scored higher on emotional exhaustion subscale of the Maslach Burnout Inventory; simultaneously men score higher on depersonalization (Maslach and Jackson, 1981, 1985; Schwab and Iwanicki, 1982; Greenglass and Burke, 1988; Hetherington, Oliver and Christine, 1989; Greenglass, Burke and Ondrach, 1991; Kruger, Botman and Goodnow, 1991; Dale and Weinberg, 1989).

Women reported significantly higher than men on emotional empathy, a significant positive correlate of emotional exhaustion and reduced personal accomplishment (Williams, 1989). Women reported more stress in situations
involving values development and experienced higher levels of burnout on emotional exhaustion and reduced personal accomplishment than men (Fuehrer, McGonagle, 1988).

Izraeli (1988) found that burnout was more strongly associated with doubts about success in work performance for men than women. Husbands who supported their wives in their domestic and professional careers were less burnout than those who did not.

Greenglass (1991) reviews recent literature on burnout focusing on gender-related differences. He concluded that work resources appear to be the primary precursors of burnout in men, predictors of women's burnout include both work and family variables such as role-conflict and marital satisfaction as well as work-stress. The differential importance of work and home as stressors in men and women sustained by a societal structure which continues to assign women (regardless of their employment status) primary responsibility for home and family. A similar analysis was found by Richardson and Burke (1991).

Contrary to previous literature reviews, Martocchio and O'Leary (1989) found that there are no sex differences in experienced and perceived work-stress causing burnout.
enough Indian literature lacks on the topic but a few countable studies have variable findings. A study on teacher burnout revealed that females report more emotional exhaustion and depersonalization whereas though males report more reduced personal accomplishment but the difference was not significant (Gupta and Dang, 1990)

Another comparative study among medical professionals Singh, Dang and Singh (1989) found still variable results. Females experienced more depersonalization and male experienced more emotional exhaustion. Reduced personal accomplishment was at very low level and that too with insignificant difference.

The exhaustive literature on gender difference with relevance to the experience of burnout, that too with a good deal of differences in findings catches attention for further investigation specially in Indian work set-ups.

Overview

Researches indicate that burnout develops over time, hence is a process. It is a syndrome of emotional exhaustion, depersonalization and reduced personal accomplishment that is frequently found in individuals who work with people.
Review of literature has revealed that Burnout Stress Syndrome (Boss) is an independent concept that cannot be equated with stress, job-stress, role-stress, distress and like.

A good deal of work is done in almost all people oriented professionals like teachers, police, fire, nurses, therapists but the development of relatively new concept of 'Impaired physician' directs the further research among health professionals.

Besides these, a large proportion of studies deal with the antecedent conditions of burnout syndrome which have revealed personal, organisational and socio-demographic factors.

Review of literature focused on 'personal factors' extensively deal with correlational variables not with the causative factors. Similarly literature relevant to 'work-related factors' is concentrated on the effects of burnout stress syndrome on performance of individual whereas the organisational variables which cause the problem seem relatively of much concern.
Socio-demographic variables have a variety of contradictive results that extracts attention immensely.

Burnout has been studied extensively in Western countries. It has not so far caught fancy of Indian researchers, the problem may be on the increase though.

The rapidly changing attitudes from eastern to western styles, from spiritual to material and modern contentions, are likely to engender dissatisfaction, distress, and demoralization. Hence, study of stress syndrome, with the already found result variance, needs timely attention. However, absence of empirical, systematic research in this area, makes it difficult to point out its occurrence and extent in various organisations in India.