During the past two decades the concept of psychological burnout has attracted the attention of researchers in the field of organizational psychology. Burnout, which is a cumulative process of gradual wearing down of one’s energy is characterized by mental, physical, and emotional exhaustion. Researchers have tried to explain socio-psychological correlates or factors associated with burnout syndrome. The research findings in this field reveal that burnout is prevalent not only in the service sector but in almost all the professions. However, its occurrence in the human service professions is definitely more. A brief review of the available literature is presented in this chapter with emphasis on the issues to be explored in the present investigation.

3.1 OCCUPATIONAL STRESS AND BURNOUT

Occupational stress is viewed as an interactional phenomenon which occurs when the perceived demands of a situation are considered to be greater than the individual’s perceived resources for dealing with the demands of the work environment. The work situations in most of the cases are highly demanding. The individual has to improve his career strength as and when required by the occupational demands. When the demands exceed the capacity to fulfill them, the concerned person feels that the excessive demands are a burden, which generally leads to occupational stress.

Various studies have been conducted by different researchers to study the relationship between occupational stress and burnout. Occupational stress is found to be a mental and physical condition that calls in a detrimental effect on the individual’s productivity, effectiveness, personal health and quality of work (Comish and Swindle, 1994). Aitken and Schloss (1994) studied the levels of occupational stress and burnout amongst staff providing services to people with an intellectual disability both in an institutional and community settings. The results indicated that the levels of occupational stress and burnout were not very high for the staff working in community settings however, staff working in an institutional settings were significantly higher on occupational stress and burnout. Plante and Bouchard (1995) reveal that the level of occupational stress and burnout was significantly lower for the palliative care nurses who received significantly more professional support than their colleagues working in medical oncology units. South African doctors also report more occupational stress and
burnout symptoms than doctors from other races. Mandy and Tinley (2004) further suggested that levels of burnout are higher among medical professions than indicated by the published normative medical data. Occupational stress was also associated with lack of professional status and with geographic and professional isolation. Rada et al. (2004) observed that dentists are prone to professional burnout, anxiety disorders and clinical depression, owing to the nature of clinical practice and personality traits common among those who decide to pursue careers in dentistry. Pines and Keinan (2005) predicted occupational stressors (assumed to be antecedent variables) were more highly correlated with strain than with burnout whereas importance of job was more highly correlated with burnout than with strain. Lee et al. (2008) revealed that family physicians are at risk of having high levels of occupational stress and burnout. Dickinson and Wright (2008) reveal that forensic mental health nurses who work with patients with severe and enduring mental health problems were at risk of occupational stress, and may even develop burnout syndrome. Ogresta et al. (2008) found that mental health workers exhibited a moderate degree of burnout syndrome and both dimensions of job dissatisfaction and manifestations of occupational stress proved to be relevant predictors of burnout syndrome. In the 1990s in Croatia, a number of studies were conducted on occupational stress and burnout among helping profession (Ljubotina and Družić, 1996; Ajduković et al., 1997; Ogresta et al., 2007) showing their negative effect on the workers’ health and economic losses induced by absence from work and decreased working productivity. Also, some studies have identified personal, interpersonal, and organizational factors related to job satisfaction, occupational stress, and burnout syndrome in health care (Schaufeli and Enzmann, 1998; Ozyurt et al., 2006) and have confirmed a relationship between low job satisfaction and burnout syndrome (Burisch, 2002; Kalliath and Morris, 2002). Xie et al. (2011) reported that nurses showed a high level of emotional exhaustion, moderate level of depersonalization, and low level of reduced personal accomplishment. Further, nurses in Shanghai were suffering from high levels of burnout, which was strongly associated with work-related stress.

Capel (1992) examined the causes of occupational stress and burnout among middle, upper, high school and teachers in England and found that role conflict, locus of
control, stability of personality and anxiety were the potential sources of stress and burnout. Abel and Sewell (1999) indicated that urban school teachers experienced significantly more occupational stress from poor working conditions and poor staff relations and experience more burnout from pupil misbehavior and poor working conditions than rural school teachers. Mearns et al. (2003) studied stress and burnout among teachers which largely focused on environmental and contextual factors while ignoring personality characteristics of teachers that may have an impact on relationships between job stress and its consequences. Results reported that higher job stress on the job predict greater burnout and distress. Lau et al. (2005) found that teachers of Hong Kong who without finishing professional training and were lower in rank reported more burnout and stress. Antoniou et al. (2006) reported that young teachers specifically females experienced significantly higher levels of occupational stress and burnout specifically with regard to interaction with students and colleagues, workload, students' progress and emotional exhaustion. Younger teachers experienced higher levels of burnout, specifically in terms of emotional exhaustion and disengagement from the profession, while older teachers experienced higher levels of stress in terms of the support they received from the government. Giacobbi (2008) reported females and those working in college/university settings were more likely to experience the symptoms of burnout while men and certified athlete trainers (ATCs) working in clinical/industrial settings scored significantly higher on measures of occupational engagement. Mondal et al. (2011) found a significant difference between male and female teachers, with male teachers having more psychological stress and physical stress than the female teachers. Also, male teachers were reported to be more insecure and emphasized financial concerns, while females expressed concerns about intrinsic facets of their jobs (Rosenblatt et al., 1999). Moreover, males were observed to have higher stress and anxiety than the females (Cheng and Kelly, 1993; Bremer et al., 2002; Gursel et al., 2002; Chaplain, 1995). Further, female teachers experience more of burnout than male teachers (Chan and Hui, 1995; Ravichandran and Rajendran, 2007; Bhadoria and Singh, 2010).

Bhatia and Kumar (2005) studied occupational stress and burnout among industrial employees, (supervisor and below supervisor level) supervisors experienced
more occupational stress and burnout than lower rank employees due to more responsibility and accountability. The results indicate that the industrial employees at all levels belonging to higher age group experienced more occupational stress and burnout due to feelings of depersonalization and emotional exhaustion. Further, Rajeswari and Anantharaman (2005) in their investigation on “The role of Human-Computer Interaction Factors as Moderators of Occupational Stress and Work Exhaustion”, found that IT professionals have long working hours with different time zones, total team work, tasks to be completed on deadlines with perfection as per client needs, which requires interpersonal, technical, and organizational factors. These characteristics lead to occupational stress and work exhaustion, a burnout dimension. Devi (2007) aimed at identifying the degree of life stress and role stress experienced by professional women. The results revealed that, the older persons experience lower life stress and role stress whereas, younger people experience more stress as compared to older people. The greater the number of years of service the greater an individual experiences role stress. The lower the income, the greater the experienced stress i.e. stress decreases with increase in income. Khattak et al. (2011) examined the relationship between occupational stress and professional burnout in the banking sector of Pakistan and found that the changing work patterns was creating stress among the bank employees and organizational stressors lead to burnout.

Violanti et al. (1983) investigated three elements of the stress process such as occupational stressors, individual stress, and coping strategies and found a strong positive relationship between depersonalization and stress, as well as between stressors and cynicism and deviance. Pines et al. (2006) reported that 74% of police officials reported a traumatic experience (such as a terrorist attack), 52% reported high or very high levels of stress (as compared to 32% reported by blue police officers) their burnout level was high (4.15 as compared to the national burnout level of 2.8 and 3.05 found during the same period of time among blue police officers). Kaur and Kaur (2007) conducted a study on occupational stress and burnout among women police. The results indicate that police work is most stressful occupation and as the occupational stress increases, the level of burnout also increases. Mc Cathy et al. (2007) reported results that although there are similar predictors of occupational stress and burnout for male
and female police officers, however female officers may also experience unique stressors in the police organization. Martinussen et al. (2007) examined burnout among Norwegian police officers and found that job demands and job resources were related to burnout and stress. Tsai (2009) reported that high occupational stress was associated with high levels of personal and work related burnout among lawyers.

Further there are some studies which show insignificant relationship between occupational stress and burnout on different samples. Miller et al. (1989) explored the experience of stress and burnout, and the influence of communicative variables on occupational stress and burnout, in four distinct groups of employee within a single organization. There were no differences among employee groups in terms of levels of stress, burnout, and satisfaction, or in the relationships between stressors and burnout and between burnout and satisfaction. Topf (1989) reported that his study did not provide support for the stress buffering effect of hardiness. That is, an interaction between, hardiness × occupational stress, was not convincingly predictive of burnout in nurses. Laura (2011) examined the link between occupational stress, burnout, the personality preferences, and job type among adult protective investigators (APIs) and reported that personal accomplishment was significantly higher for APIs who were classified as perceiving than those who were classified as judging. Further, the effects of job stress on the overall profile combining accomplishment, depersonalization, and emotional exhaustion were not significant.

Role overload is one of the dimensions of occupational stress which occurs either when there are too many roles at one time for an individual or roles are changing and too many new roles develop at once. Role overload can lead to extreme stress or burnout. This in turn can lead to failure of all the roles expected of one person. There are various studies which reveal that role overload leads to occupational stress and burnout. Tang (1990) suggested that the Local Assistant Social Work Officers always faced problems such as case/role overload, inexperienced co-workers and high staff turnover rate in the workplace; these factors basically caused burnout among social work officers. Cordes et al. (1997) investigated the relationship between the burnout components and several critical, theoretically linked variables which indicate significant paths between (a) role overload and emotional exhaustion, (b) non contingent
punishment and depersonalization, and (c) contingent rewards and personal accomplishment. The work documents the generalizability of burnout to managers and professionals in corporate settings. Peiro et al. (2001) found that three role stress variables predict emotional exhaustion over time. Role conflict and role overload predict depersonalization over time. Finally, contrary to expectations, role ambiguity predicts lack of personal accomplishment over time. Hasnain et al. (2001) studied “role stress and coping strategies in different occupational groups” (engineers, managers and teachers). Role overload and role erosion were found to be major sources of role stress in all the three groups. Further, Latha and Panchanatham (2007) identified the job stressors and their implications on the job performance of 40 software professionals. Results show that work overload acts as major stressor for software professionals. Long working hours are indirectly associated with psychological distress and occupational stress. Loo (2010) studied two variables (burnout and role overload) which were hypothesized to moderate the relationship between Organizational citizenship behavior (OCBs) and outcomes (job satisfaction, turnover intentions, and task performance), such that when burnout and role overload are high, negative outcomes occur. Role overload was significant and OCB was due to overload.

Byrne (1994) investigated the impact of organizational (role ambiguity, role conflict, work overload, classroom climate, decision making, superior support, peer support) and personality (self-esteem, external locus of control) factors on three facets of burnout. Results were consistent across groups in revealing the importance of role conflict, work overload, classroom climate, decision making, and peer support as organizational determinants of burnout among teachers. Yue (1995) found that primary school teachers confronted greater occupational stress and burnout than secondary school teachers due to lack of resources, work ambiguity, work overload and work strain. Upadhayay and Singh (1999) studied the level of occupational stress experienced by the college teachers and executives. The executives showed significant higher levels of stress than college teachers on role overload, role ambiguity and role conflict. Lois (2011) examined “Role Strain, Emotion Management, and Burnout: Homeschooling Mothers' Adjustment to the Teacher Role”, and found that mothers found teaching more demanding than they had expected, experiencing emotional burnout.
Hillhouse and Adler (1997) suggest that it is the actual characteristics of the work environment, and workload, rather than any differences in practice requirements that are important in evaluating sources of stress among nurses. Piko (2006) identified the importance of the role of psychosocial work environment and the interrelationships among burnout, role overload, role conflict, job satisfaction and psychosomatic health among Hungarian health care staff. Emotional exhaustion and depersonalization scores were higher, while scores on personal accomplishment were lower among health care staff. Triveni et al. (2006) concluded that the major sources of job stress and burnout perceived by 90 veterinary assistant surgeons were numerous meetings, work overload, lack of personal growth, lack of facilities and monotonous nature of work. Ashill and Rod (2011) also found significant relationships between job demand stressors (role overload, role conflict, role ambiguity and interpersonal conflict), symptoms of burnout (emotional exhaustion and depersonalization) affective job outcomes (job satisfaction and organizational commitment) and behavioral job outcomes (service recovery performance and turnover intentions) among non-clinical health service delivery.

Role conflict is another dimension of occupational stress, a type of role demand, which occurs when two or more sets of role pressures exist in an individual’s workspace, and compliance with one of these pressures impedes the accomplishment of another (Kahn et al., 1964). Role conflict arises on the job when a role incumbent is confronted with incompatible or incongruous expectations that are difficult or impossible to satisfy simultaneously (Kahn et al., 1964). Such conflict has been reported to positively and significantly predict the variance in emotional exhaustion and depersonalization among teachers (Schwab and Iwanicki, 1982) and “public-service lawyers” (Jackson et al., 1987), increased depersonalization among female social workers in child-welfare settings (Jayaratne et al., 1991), and emotional exhaustion among nurses (Leiter and Maslach, 1988). Role conflict introduces uncertainty because the employee is not certain whether all of her or his role requirements are successfully balanced. Role conflict has been linked to a number of dysfunctional outcomes, including job dissatisfaction and psychological strain (Rizzo et al., 1970; Schaubroeck et al., 1989). Most of the research that has examined causes of burnout has focused on conditions in the job environment with its primary focus on role stressors (i.e. role
ambiguity, quantitative overload, and role conflict (Cordes and Doughtery, 1993; Perlman and Hartman, 1982). Hobfoll (1989) and Lazarus (1991) examined the direct as well as the moderating effects of political skill and perceived organizational support on the relationship between role conflict and burnout. Political skill and perceived organizational support are coping resources (Hobfoll, 1989) that can deter burnout as well as moderate the relationship between role conflict and burnout (Brotheridge, 2001).

Madhu et al. (1990) conducted a study on role stress: differential influences of some antecedental factors and attempted to compare the influence of the antecedental factors namely, personal, organizational, job, superior, leadership styles and communication factors on role conflict and role ambiguity. It was found that role conflict and role ambiguity experienced by the employees were most significant in the petroleum organization. Peterson (1995) explored role conflict, role ambiguity and role overload as reported by industrial workers and also found that managers are more under stress due to role overload.

Mishra and Dixit (1995) found that each of the four type of job stressors namely role based stress, task based stress, boundary spanning stress and conflict mediating stress influenced burnout among the doctors and role based stresses such as role conflict and role ambiguity are related with feeling of lack of personal accomplishment, a dimension of burnout. Lee and Ashforth (1996) reported a corrected correlation of 0.53 between role conflict and emotional exhaustion, 0.37 between role conflict and depersonalization, and 0.21 between role conflict and reduced personal accomplishment.

Upadhyay and Singh (1999) compared the level of occupational stress experienced by the college teachers and executives. The executives showed significant higher levels of stress and burnout than college teachers on role overload, role ambiguity, role conflicts factor. Jackson et al. (1986) found that role conflict was significantly associated with the emotional-exhaustion component among teachers.

Whitehead (1989) found increased conflicts among the various tasks assigned to probation officers were able to predict positively and directly both emotional exhaustion
and depersonalization. Jackson et al. (1987) studied correlates of burnout among public service lawyers in US. Results indicated that emotional exhaustion was most strongly associated with role conflict and quantitative workload. Feelings of personal accomplishment were associated with supervisory social support and job level. Depersonalization was associated with role conflict and decision making policies. Kwag and Kim (2009) reported that role overload and role conflict are the major antecedents of job burnout, particularly of the exhaustion and disengagement components.

Role ambiguity is another dimension of occupational stress which takes place when the worker lacks information that is needed for understanding the role and performing the role adequately (Daft and Noe, 2001). Role ambiguity refers to unpredictability of the consequences of one's role performance, along with a lack of information needed to perform the role. Research has demonstrated a consistent link between role ambiguity in the job and high levels of psychological strain and burnout.

In mental health workers, sources of occupational stress are mostly related to the difficulties in the functioning of health care system (Burrows et al., 2000), such as time pressure, chronic fatigue, uncertainties in patient care, demanding chronic patients, poor interpersonal relations at work, and role ambiguity (Myerson, 1990; Lewis et al., 1993). Burke and Richardson (1993) and Schaufeli and Buunk (1996) found a positive relationship between role ambiguity, role conflict, and role overload and burnout, especially emotional exhaustion and depersonalization (cynicism). Tunc and Kutanis (2009) explored the relationship between burnout, and role conflict and role ambiguity in nurses and physicians at a university hospital in Turkey. The nurses showed significantly higher levels of role conflict, role ambiguity, and burnout as compared to the physicians. A multiple regression analysis showed that role conflict and role ambiguity might help to explain the higher levels of burnout experienced by the nurses as compared to the physicians. Similarly, Ghorpade et al. (2011) reported that individuals who perceived a higher level of role conflict and role ambiguity reported higher levels of emotional exhaustion and depersonalization, and those who perceived a lower level of role conflict and role ambiguity reported higher levels of personal accomplishments (O'Driscoll and Beehr, 2000; Zohar, 1997).
Pandey and Tripathy (2001) also found that teaching is a stressful occupation. Job stressors in this profession are role ambiguity and unreasonable group pressure and further they reported that role ambiguity and unreasonable group and political pressure were found to be the two best predictors of various components of burnout. Strenuous working condition and intrinsic impoverishment emerged as the third best predictor of emotional exhaustion and personal accomplishment respectively. Overall the findings suggest that teaching is a stressful occupation and teachers are at risk for developing burnout syndrome and subjectively assert that role ambiguity, unreasonable group pressure may play an important role in it.

Another dimension of occupational stress is Intrinsic Impoverishment; various studies have reported significant relationship between intrinsic impoverishment and burnout. Upadhyay and Singh (1999) found that executives as well as the teachers experienced a moderate level of stress, the executives experienced more stress as compared to teachers. The results revealed a significant difference between these two groups on the experience of stress and burnout due to factors such as role overload, intrinsic impoverishment and status variable. Aminabhavi and Triveni (2000) revealed that nationalized bank employees have significantly higher occupational stress than non nationalized bank employees, in the dimensions such as role conflict, unreasonable group/political pressure, intrinsic impoverishment and strenuous working conditions. Subramanian and Nithyanandan (2009) revealed that cardiac patients tend to have lower levels of mental health than non cardiac patients. Similarly, cardiac patients were reported to have higher levels of stress and burnout due to role ambiguity, powerlessness, intrinsic impoverishment and unprofitability.

Underparticipation further as the dimension of occupational stress also shows significant relationship with stress and burnout that when there is less participation this may lead a person to occupational stress and burnout. Upadhyay and Singh (1999) compared the level of occupational stress experienced by the 20 college teachers and 20 executives. The teachers showed significant higher levels of stress than executives on under participation and poor peer relation factors. Osmany and Khan (2003) conducted a study on Organizational stress in working women by taking 30 married and 30 unmarried working women. He found that unmarried working women reported high
stress and burnout at work place due to political pressure and among married women, due to poor peer relation.

3.2 SELF EFFICACY AND BURNOUT

Self Efficacy is defined as the “belief in one’s capabilities to organize and execute the course of action required to produce given attainments” (Bandura, 1997). Several researchers concurred that individuals who have low levels of self efficacy are uncertain about the belief in their ability to have an effect on work. When confronted with a difficult situation, they reduce their attempt to deal with stressful events or they completely give it up. This can raise their stress and burnout level and diminish their effectiveness at work. Several studies have shown that low self efficacy is a strong predictor of burnout and its dimensions. Brissie et al. (1988) found that teacher efficacy predicts teachers’ level of burnout. Teachers with a low sense of efficacy are found to be the ones most likely to drop out of the teaching profession and experience more burnout (Glickman and Tamashiro, 1982).

Chwalisz et al. (1992) found that teachers who score low on self-efficacy reported a higher degree of burnout than their counterparts who scored high on self-efficacy. Jex and Gudanowski (1992) examined the relationship between stressors (role ambiguity, situational constraints, long hours), strains (job dissatisfaction, anxiety, frustration, and turnover intention), and self-efficacy. Their results showed that self-efficacy is related to two of the four strains. Life stress is related positively to psychological symptoms and inversely related to self-efficacy (Lynch, 1998). Tang et al. (2001) reported that teachers experience a great deal of stress in the course of their career. Burnout represents teachers’ negative response to the mismatch between job requirements and their perceived abilities, self-efficacy and proactive attitude. Friedman (2003) investigated the association between perceived self-efficacy and burnout among teachers. It was found that perceived sense of self-efficacy was inversely correlated with perceived burnout: the lower the sense of self-efficacy, the higher the perceived burnout. Evers et al. (2006) also concluded that perceived self-efficacy in eliciting support at the workplace is a usable construct in the prediction of teacher burnout. Betoret and Domenech (2009) revealed that external (school support resources) and

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internal (management classroom self-efficacy and instructional self-efficacy) coping resources have a negative and significant effect on job stressors. In turn, job stressors have a positive and significant effect on teachers’ burnout considering it as both a unidimensional and multidimensional construct. Further emotional exhaustion plays a significant role in causing burnout. Tzioti et al. (2010) concluded that female teachers presented higher levels of job burnout, whereas teachers over 50 years of age presented higher levels of self-efficacy than those between 31-40 years old. The three types of self-efficacy were negatively correlated with the three job burnout dimensions. Klassen and Ming (2010) found that female teachers had greater workload stress, had greater classroom stress from student behaviors, and lower classroom management self-efficacy. Teachers with greater workload stress had greater classroom management self-efficacy, whereas teachers with greater classroom stress had lower self-efficacy and lower job satisfaction as compared to teachers teaching young children. Brouwers et al. (2011) reported a moderating effect on the relationship between job demands and the personal accomplishment dimension of burnout, whereas managerial support had a moderating effect on self-efficacy beliefs concerning teachers’ influence on job demands and personal accomplishment. The study further revealed that physician education (PE) teachers run a greater risk of falling victim to burnout as they grow older. Vaezi and Fallah (2011) indicated significant negative correlation between self-efficacy and stress. Also it was found that both dimensions of self-efficacy, namely, classroom and organizational efficacies, either collectively or separately, could predict stress among teachers.

In a study by, Brouwers and Tomic (2000) self-efficacy had a longitudinal effect on depersonalization and a synchronous effect on personal accomplishment. However, the direction was reversed for the relationship between perceived self-efficacy and emotional exhaustion; the time frame was synchronous. Grau et al. (2001) found that individuals with low levels of generalized self-efficacy show more emotional exhaustion when their job autonomy is higher, while those with low levels of professional self-efficacy show greater cynicism when routine and role conflict are high, and have low levels of organizational commitment when the level of role conflict is high. Salanova et al. (2002) found that frequency of usage and computer training are
positively associated with computer self-efficacy. Furthermore, they found that interaction affects computer training and computer self-efficacy on both indicators of burnout as outcomes. Perrewe et al. (2002) indicated general self-efficacy (GSE) had a universally negative association with burnout across all regions. Further, self-efficacy mediated the relationship between role conflict and or role ambiguity and burnout across eight of the nine cultures. Stronger proneness to burning out is also observed in subjects with a low level of a sense of coherence, self-esteem, self-efficacy, and a low level of optimism (Oginska-Bulik, 2003a; 2003b), as well as being observed in highly reactive individuals and those with a low need for achievement (Golinska et al., 1998).

Baker et al. (2007) stated that high levels of pressure and low levels of self-efficacy were identified as predictors of emotional exhaustion (EE). They further pointed out that personal accomplishment (PA) was predicted by time pressure and robust levels of self-efficacy for dealing with work-related stressors.

Lee and Akhtar (2007) had conducted a study of job burnout among nurses and indicated that self-efficacy had significant negative affects on emotional exhaustion (EE) and depersonalization (DP) and positive affects on personal accomplishment (PA). They concluded that self-efficacy appeared to be the most effective coping resource. Duffy et al. (2009) reported people working in the helping professions have been found to be vulnerable to the development of burnout and research has suggested a relationship between dementia care and burnout. Low self-efficacy was found to be the greatest predictor of burnout. İkiz (2010) also determined that psychological counselors who expressed perception of incompetency in their profession experience burnout. VanYperen (2011) showed that nurses with weak self-efficacy beliefs were apparently sensitive to the degree of informational support. In contrast, nurses with strong self-efficacy beliefs felt equitably treated by the organization for which they worked even when they felt that they received relatively little informational support, and further indicated that perceptions of inequity were accompanied by burnout symptoms. Bozgeyikli (2012) showed that there is a positive relationship between perceptions of self-efficacy with regard to the skills of psychological counseling and multidirectional roles, skills and compassion satisfaction; and that there is a negative relationship between burnout and compassion fatigue.

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