The magnitude and effects of stress and burnout Among nurses at Kenyatta national hospital, Kenya

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Abstract:

Introduction: Burnout, a terminology made popular by Felton (2001), consists of a triad of emotional exhaustion, depersonalization (treating patients as if they were objects) and low productivity or achievements. "Burned out" healthcare professionals are more likely to deliver services which are suboptimal which could potentially result in disaster. Employees in "people work" jobs experience more burnout than employees in other occupational groups (Brotheridge, 2002). Burnout has been shown to have negative effects not only on the employees directly, for the clients they serve and the agencies that employ them. Not only has burnout been linked with physical illness (Powell, 1994; Rohland, 2000; Brotheridge & Grandey, 2002), it also increases the chances of workers turning over which reduces the efficacy of services provided to clients (Collings & Murray, 1996) and leads to a loss of continuity of services to families (Winefield & Barlow, 1994). Departure of stressed staff represents a loss to the agency of that person's training and experience, as well as consequent time and money spent training a replacement (Winefield & Barlow, 1994). This paper asks the question: What is the magnitude and effect of stress and burnout among nurses at Kenyatta National Hospital. Health sector reforms being effected at KNH in a bid to improve quality of health services, may not be sustainable if burnout, the root cause of low productivity is not addressed. No study that we were aware of at the time of the study, had been carried out to determine the causes and effects of burn out among nurses at KNH. Problem Statement: There are rampant cases of alcohol and drug abuse, depression, frequent hospitalizations due to psychiatric related issues, suicide and a steady decline in the quality of nursing services offered to patients at KNH. Several staff have resigned citing stress as one of the causes. (KNH Data 2012) Most departments with heavy workload (the medical and surgical wards) register high number of staff on sick leave and emergency leave. This in turn compromises quality of patient care as some wards on frequent basis have one nurse reporting on duty against sixty plus patients to care for. (KNH Data 2012). Such ppenings have been suspected to be as a result of stress and burn out. Study Objective: To determine the magnitude and effects of occupational stress burnout among nurses at Kenyatta National Hospital. Methods: A descriptive cross sectional survey of nurses working in the general medical, surgical wards and medical and surgical out-patient clinics involving 182 participants was conducted for a period of four weeks between October 2012 and November 2012. Self-administered questionnaires were completed by the participants. Data was analyzed using descriptive and inferential statistics. Quantitative (multivariate) data analysis