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Burnout Syndrome and Work Accidents

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Abstract

The European Working Conditions Survey emphasized the fact that the professional diseases associated with psychological stress are growing in the EU’s member states. The aim of this paper is to analyze the effects of stress and of the Burnout Syndrome over the self-esteem of the people that have demanding activities at work. The lot of research is composed of 18 men who underwent various work accidents. The imbalance between the work capacity of a person and the demands that have to be met by a person, leads to exhaustion and the occurrence of Burnout Syndrome that leads to work accidents.

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1. Introduction

The European Working Conditions Survey emphasized the fact that professional diseases associated with psychological stress are growing in number in the EU’s member states. Professional diseases are acquired due to a work process. According to the definition given by the World Health Organization in 2010-OMS „professional diseases are disorders of which etiological specific agents are present in the workplace, related to certain industrial processes or to the practice of a profession”.

The notion of professional disease involves the existence of a causal link between the risk factors that exist in the work process and their effect, being materialized as a disease. For a disease to be classified as a professional disease, three conditions must be fulfilled:

1. It must result from the practice of a profession or a trade
2. It must be caused by physical, chemical, biological factors which are specific to the workplace or to the overload

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3. The action of the risk factors over the human body must be long lasting.

*The work accident* represents the violent injury of the body and the acute professional intoxication, that take place during the work process or during the fulfillment of the work duties, it causes temporary incapacity (ITM) for at least 3 days, invalidity (INV) or death (D). (Art. 5 (g) Law 319/2006 on health and safety at work).

*The risk factors in accidents at work and in the professional diseases* are factors (traits, states, processes, phenomenon, behaviors) that may cause, under certain conditions, work accidents or professional diseases. (Anitei, M. 2007). A classification criterion of the risk factors is the cause. According to this criterion of classification, there are:
- risk factors specific to the doer of the action
- risk factors specific to the work tasks
- risk factors specific to the means of production
- risk factors specific to the work environment

The impact of work settings on stress and health was described by Bilings and Moos, (1982) and Moos, (1986). Four main aspects of work settings are associated with employees stress and health problems:
- high job demands such a heavy work load and time pressure,
- inadequate opportunities to participate in decision making, especially in how work is organized and its pace,
- high level of supervisor control,
- role ambiguity of lack of clarity about the job and criteria for adequate performance.

Stress is most likely to occur when job demands (task orientation and work pressure) are high and the individual has little choice in deciding how to meet these demands (low autonomy, high control).

Cox (1978) and Gross (1996) argue that the experience of stress is usually described in ways associated with emotions- anger, anxiety, depression, fear, grief, guilty, jealousy and shame. Lazarus (1976), Gross (1996) refer to these as the *stress emotions*. According to Goetsch and Fuller (1995), definitions of stress fall into three categories:
- stress as a stimulus,
- stress as a response,
- stress as interaction between an organism and its environment.

*The engineering model* sees external stresses giving rise to a stress reaction, or strain, in the individual, so the stress is located in the stimulus characteristics of the environment, stress is what happens to a person (not what happens within a person). Stress helps to keep us alert, providing us with some of the energy required to maintain an interest in our environment, to explore it and adapt to it, in these respects stress is similar to motivation and emotion (or is a component of both). However, when stress becomes intolerable (when we are stretched beyond our limits of elasticity) it becomes positively harmful.

The physiological model is primarily concerned with what happens within the person, that is, with the response aspects of the engineering model, in particular the physiological (and to a lesser extent the psychological) changes which occur as a result of stress. The impetus for this view of stress was Selye’s (1956) definition that “Stress is the nonspecific response of the body to any demand made upon it”. Selye’s original observations were made when he was a medical student and noticed a general malaise or syndrome associated with being ill, regardless of the particular illness. The syndrome was characterized by:
- a loss of appetite,
- an associated loss of weight and strength,
- loss of ambition,
- a typical facial expression associated with illness.

Further examination of extreme cases revealed major psychological changes, including enlargement of the adrenal cortex, shrinkage of the thymus, spleen and lymphatics (all involved in the body’s immune system) and eventually, deep bleeding ulcers of the stomach and upper gut (confirmed by Cox, 1978, and Gross, 1996). These
changes representing the nonspecific response to illness, were supposed to reflect a distinct phenomenon which Selye called The General Adaptation Syndrome (GAS).

The transactional model represents a kind of blend of the first two models and sees stress as arising from an interaction between people and their environment, in particular, when there is an imbalance between the person’s perception of the demand being made of them by the situation and their ability to meet the demand, and when failure to cope is important. Because it is the person’s perception of this mismatch between demand and ability which causes stress, the model allows for important individual differences in what produces stress and how much stress is experienced, people may also differ in terms of characteristic physiological responses to stress (over and above the GAS). For instance some will typically have migraine headaches, others break out in a rush, other have stomach pains and so on. There are also wide differences in how people attempt to cope with stress, psychologically and behaviorally. (Gross, 1996)

*Mental fatigue* is a symptom that occurs when a person exceeds the resistance to effort and manifests itself through a lower performance of the cognitive process, attention and motirical reactivity. Mental fatigue can be not only objective, generated by the energy depletion of the organism but also subjective determined by factors related to attitude (lack of interest in the activity, professional dissatisfaction, monotony etc.) The early appearance of tiredness is determined mainly by the subjective fatigue, it is also connected to aspects like a lot of effort per unit of time.

The Burnout concept was first described in the 1970s and originally referred to a reaction on interpersonal stressors on the job (e.g., Maslach, Schaufeli & Leiter, 2001; Schaufeli, Leiter & Maslach, 2008). The concept was traditionally examined in the context of human services, such as health care, social work, psychotherapy and teaching. One of the most prominent definitions describes burnout “as a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment that can occur among individuals who work with people in some capacity” (Maslach, Jackson & Leiter, 1996, p. 4).

The definition of the concept burnout follows two distinctive lines that don’t exclude one another: one is focused on the symptoms list and the other one captures the dynamic aspect of the process. (Schaufeli, Buunk, 2003)

The main constitutive elements of the “burnout state” as they were defined by Maslach, are *emotional exhaustion* (the emotional resonance in relation to events and persons is diminished), *depersonalization* (it refers to the tendency to see and treat people like “instruments” and not like persons and the feeling of unfulfillment (self-discontent and dissatisfaction with the obtained results)

**People suffering from burnout syndrome** are discontent with the reach of their goals and feel a lower self-esteem, even if they make a sustained effort. Brill (1984) defines the Burnout syndrome as a phenomenon that appears in a professional context, it has dysphoric and dysfunctional manifestations, it develops in persons that don’t have major psychopathological disorders and that had a proper performance and emotional adaptation for a while, in the same activity, but are incapable to come back to that state without help or without changing the relation with the professional environment. The pathological process is slow and it affects either the general condition of the organism or particular parts or organs. In many cases the action is reversible, by taking out the sick person from the harmful environment and giving an appropriate treatment, the consequences of the disease are diminished or disappear completely.

2. **Purpose of Study**

The aim of this paper is to analyze the effects of stress and Burnout syndrome over people’s self-esteem that have challenging activities at work, irrespective of where they work. The objectives of the research are:

- determining the causes of work accidents;
- identifying persons with high levels of Burnout syndrome;
• assessing self-image of people with Burnout syndrome;
• studying the correlation between the level of Burnout syndrome and the severity of the professional accidents;
• studying the correlation between the level of Burnout syndrome and the level of self-esteem;

In this research paper I have checked the following hypotheses:

1. It is presumed that a direct correlation between the level of the fatigue syndrome Burnout and the severity of the professional accident exists
2. It is assumed that an indirect correlation between the level of the fatigue syndrome Burnout and the level of self-esteem exists (the higher the level of fatigue, the lower the self-esteem)

3. Research Methods

• Maslach Burnout Inventory – General Scale (MBI-GS, Schaufeli, Leiter, Maslach & Jackson, 1996)
• Questionnaire for identifying the accident severity level at work (personal device, that consists of 12 items, referring to security level of the accident, number of days of hospitalization, need for medical leave, occurrence a disability)
• Self-Esteem Scale, S.E.S, Rosenberg, 1965

4. Findings

The research sample included 18 men (6 subjects employed in the petrochemical field, 6 employed in the field of distribution, 6 employed in the field of constructions) aged from 23 to 48 that underwent various work accidents.

In order to test the first hypothesis, the following tools were applied to the sample of subjects that suffered from work accident: Maslach Burnout Inventory and the Questionnaire for identifying the accident severity level at work (personal device). After diagnosing the level of the fatigue syndrome Burnout and measuring the severity of the work accidents, the results were correlated.

The results of the research show that the Burnout syndrome has its origins in excessive professional challenges that determine mechanisms of coping, avoidance and withdrawal. After testing 28 % of subjects they presented a low or minimum level of exhaustion, 50 % a moderate level and 22 % an acute level of intensity. Viewed under a dynamic aspect, Burnout is a process that involves a negative evolution of the behaviors and attitudes, as a response to work effort. In the first stage of this process an imbalance between resources and demands is present, followed by a state of emotional tension, tiredness and exhaustion. In the third stage a series of behavioral and attitudinal modifications take place, for example the tendency to treat other people in a detached and impersonal manner or a cynical concern for their own needs.

The fatigue syndrome Burnout is closely related to the severity of work accidents, a fact that is demonstrated by a significant direct correlation r=0.748 at a significance threshold p<0.0001.

This is due to the following aspects:
• the fatigue syndrome decreases the ability to concentrate and thus gives a chance to work accidents
• there are also physical symptoms produced: tiredness, frequent headaches, gastrointestinal disorders, insomnia, changes in eating habits, use of psychotropic drugs that weaken the body,
• reduces the reaction time, which is very important in jobs that require immediate action
• the Burnout syndrome is rather ignored and the subject doesn’t consult a psychologist.

In order to test the second hypothesis there were applied Questionnaire for identifying the accident severity level at work and Self-Esteem Scale, S.E.S., Rosenberg, 1965.

From the group of subjects that were investigated, 33% of the subjects have a low self-esteem, 45 % have a moderate level of self-esteem and 22 % have a high self-esteem. In the case of the individuals that suffer from a high level of fatigue syndrome it was observed a low self-esteem. The differences between individuals are due to
the difficulties that they have at work, especially the employees from the petrochemical field that work under an increased risk, many of them operating in shifts and working a lot. This category of employees complains about overwork.

The correlation coefficient registered between the level of fatigue syndrome and the level of self-esteem is \( r = -0.794 \), negative coefficient, at a significance level \( p < 0.0001 \) that indicates an indirect correlation between these two characteristics as follows: the higher the level of fatigue syndrome, the lower the level of self-esteem.

We note a level of Burnout syndrome higher for people which are working in petrochemical branch, followed by those, in construction and in last place in the distribution branch. Working in petrochemical branch involves very high degree of risk and also brings a level of stress and Burnout more common than in other occupational areas. Also working conditions and activities that are involved in this area of great risk, such as: working with chemicals, inhaling these substances, explosion imminent danger. All of these factors are putting their stamp on strong emotional stability of a person.

5. Conclusions

In the present study we aimed to analyze the effects of stress and the Burnout syndrome on self-image of people demanding activities at work. Work plays an important role in the lives of most people. At the workplace, people may acquire prestige and self-esteem. The work environment thus represents an important life domain for adults in that it contributes to overall personal satisfaction. Nevertheless, because of its central role in life, work can also create frustration, stress, and various other psychological outcomes. Indeed, the work environment may contain a variety of objective stressors such as physical, chemical, and biological hazards.

Risk factors in accidents at work and occupational diseases are factors (traits, states, processes, events, behaviors) own work system elements that may cause, under certain conditions, accidents at work or occupational diseases. Because risk factors are found in each element of the work system, preventive measures will meet at least one of these elements. The tendency to evaluate difficult situations work correctly without it deems threatening, people with high self-esteem will tend to adopt forms of preventive and active coping enabling them to maintain low stress.

The research has indicated the fact that the Burnout syndrome is felt by the employees, that work in a climate of economic uncertainty, many hours, taking on many responsibilities, placing their health at risk. This situation compromises their ability to contribute to the organizational goals. The imbalance between the work capacity of a person and the tasks that must be fulfilled lead to exhaustion and the Burnout Syndrome that causes work accidents. Psychological counselling is imposed not only to prevent the Burnout Syndrome, but also to prevent work accidents.

References