

Factors Effecting Occupational health outcomes of job burnout

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Opinion

Workplace burnout can cause physical and psychological harm and reduce work efficiency, especially in difficult professions such as medical care [1]. This study aims to assess the association between levels of burnout in the workplace and several factors of health care providers.

Workplace burnout is a negative job caused by job demands such as overwork, long working hours, lack of fairness, labor disputes, lack of social support from colleagues and supervisors, and lack of social decision making. Authority introduced in 1970 as a related mental state. Some of the consequences of workplace burnout included absenteeism, demoralization or staff decline, stress, anxiety, mental and physical dissatisfaction, sleep disorders, and lack of organizational commitment.

One of the main factors in the generation of burnout was the type of work that an individual had to perform. Burnout had been mostly used to study workers at human services organizations, such as school teachers, social workers, and health care staff [2]. Nature of patient care, and high emotional exhaustion. Burnout among health care providers causes increasing absence and reduces efficiency at work. Therefore, identification and prevention of burnout plays an important role in improving the quality of provided services.

Healthcare workers suffer from burnout more than any other profession due to greater exposure to stressful tissue demands, the rigorous nature of patient care, and high levels of emotional fatigue. Health care provider burnout increases absenteeism and reduces work efficiency. Therefore, the detection and prevention of burnout plays an important role in improving the quality of service provided.

Burnout has three aspects: (1) Emotional fatigue consisting of chronic fatigue and sleep disorders (the core aspect of burnout). (2) Depersonalization. This includes emotionless negative reactions and extreme indifference to the person receiving the service. (3) A sense of lack of personal sense of accomplishment. This reduces the benefits and sense of accomplishment.

Employee burnout has been studied primarily in Europe, the

United States, and the Middle East (10, 11). Various demographic factors such as age, gender, occupation, leadership style, lack of social support, lack of success, lack of promotion opportunities, experience, overtime, undesired working conditions, shift work, etc. are burnout syndromes which may lead to emotions [3]. The results of the study usually showed a negative association between burnout and work satisfaction. This was influenced by the organizational structure. There was also a positive link between work experience and lack of social support.

However, limited studies have been conducted to investigate different aspects of workplace burnout and related factors among workers at different medical colleges [4].

All low-income countries have experienced various stages of economic and social upheaval, and the effects of sanctions have exacerbated the severity of workplace burnout [5]. Burnout in the workplace is a major problem, and poor personal performance as a component of burnout has been common among Iranian health care workers. Monitoring workplace burnout and related factors, proposing alternative organizational and behavioral systems, and sharing them with relevant authorities can prevent or mitigate workplace burnout and its harmful effects.

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