
Die Away Health Workers: The Role of Psychological Factors on Burnout

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Abstract: The study aims at investigating the effect of abusive supervision, interactional justice and supportive workplace supervision burnout among health workers in selected communities in Ogun State, Nigeria. Three hundred and twenty (320) health workers were sampled for the study. A battery of tests on abusive supervision, interactional justice, supportive workplace supervision scale, and employee burnout were used to elicit responses from the participants. The research used 2x2x2 factorial design. Four hypotheses were generated and were tested using Analysis of Variance (ANOVA). Scheffe's post-hoc analysis was used to know the direction of the findings. Results revealed that there was a significant main effect of perceived abusive supervision on employee burnout among health workers. Also, there was a significant main effect of interactional justice on employee burnout among health workers. It was also found out that there was a significant interaction effect of supportive workplace supervision, interactional justice, and abusive supervision on employee burnout among health workers. Results were discussed in line with hypotheses. It was suggested that the health establishments can reduce the incidence of employees' burnout at least through establishing medical teams that perceived their superiors as non abusive.

Keywords: Employee Burnout, Abusive Supervision, Interactional Justice, Supportive Workplace Supervision

1. Introduction

It is a known fact that health workers work in a team. Often time, such a health team is led by a medical doctor who in most cases acts as a supervisor that will oversees and coordinates the activities of his/her team. Supervisors play an integral role in orienting and assimilating an employee toward and within the organization. They are also primarily responsible for assigning tasks and instructing their subordinates on how to go about accomplishing them. Also, in many situations, subordinates come to see their supervisors as representatives of the organization. They take on the roles of being symbolic manifestations of what the organization stands for and believes in. This often means that employees see the organization as being similar to their supervisor; any behavior that the supervisor chooses to engage in is seen as being approved by the organization and the way a supervisor treats his or her subordinates is seen as the way the organization decides to use its human capital.

Job burnout is defined as physical experience, emotional and mental exhaustion along with continuous stress. Burnout

is a psychological process of cognitive that occurs under conditions of severe stress and declares itself as an emotional exhaustion, depersonalization, and decreased motivation and performance improvements (WHO, 1998). Burnout is defined as "a crisis in one's relationship with work, not necessarily as a crisis in one's relationship with people at work" (Maslach, Jackson, & Leiter, 1996). For more than three decades, managers and researchers have focused their attention on identifying personal and situational antecedents for burnout in various occupations (Schaufeli, Leiter, Maslach, & Jackson, 1996). This research examined three psychological variables viz: abusive supervision, interactional justice, supportive workplace supervision on burnout of health workers.

Burnout causes that people lose interest in their work, reduce their efficiency, undermine inputs and performance of themselves or others, behave in a manner that encourages others to reduce the input, or behave in a manner that change their input and leave their jobs. Valuable employees who leave the organization for misunderstanding, harm the organization as same as the employees who leave due to a

reasonable reason (Aghaei, Moshiri & Shahrbanian, 2012)

When people at work are isolated from one another, experience impersonal social contact and especially chronic unresolved conflicts with others at work, there is an increased chance that this will lead to frustration, hostility and diminished social support. The affected individual will be left more vulnerable to burnout. More specifically, interpersonal demands such as workplace mistreatment were shown to be a predictor for burnout (e.g., verbal harassment from people at work, Deery, Walsh, & Guest, 2011; Dormann & Zapf, 2004).

It has been observed that little or no attention has been given to the predictive process of perceived abusive supervision, interactional justice and supportive workplace supervision on employee burnout; particularly among health workers in Nigeria. This has been a difficult situation in many parts of Nigeria because superiors and/or supervisors are not always found encouraging and/or supportive, it becomes an area of main concern for the growth and development of the organization or industry. Thus, this research is geared towards filling these identified gaps by assessing the effect of abusive supervision, interactional justice, and supportive workplace supervision on burnout among health workers.

Employee burnout is an index of organisational ineffectiveness. Therefore it warrants more attention and understanding. Results from this study will help the health institutions, especially the Nigeria, in the planning, predicting and controlling of resourcing. The research was conducted between January 2016 to June 2016. The researcher chose only health workers resident in Ogun State to ensure culture homogeneity. This eventually added credence to the validity of this research.

Tepper (2000) defined abusive supervision as “subordinates” perceptions of the extent to which supervisors engage in the sustained display of hostile verbal and nonverbal behaviours, excluding physical contact,” which includes the manifestation of dysfunctional leadership behaviours toward subordinates such as ridiculing subordinates, blaming subordinates for things they do not do, and expressing anger without reason. When superiors engage in abusive supervision, they may be doing that to coerce and burnout their employee for a higher return on productivity or even to disregard and disqualify the employee for certain personal reasons. These behaviours can have negative consequences on both the recipient of the abuse and outsiders who perceive the abusive supervision. As the employee makes efforts to meet up with supervisory demands on the job, it is likely they get inflamed.

Interactional justice first described by Bies and Moag (1986), focuses on individuals’ perceptions of the quality of the interpersonal treatment received during the enactment of organizational decisions and procedures (Colquitt, 2001). Interactional justice is defined by Schermerhorn as the degree to which the people affected by decision are treated by dignity and respect (Muzumdar, 2011). It includes various human-side actions displaying

social sensitivity such as respect, honesty, dignity, and politeness performed by the originator of justice toward the recipient of justice. Interactional justice is most likely to occur when the originator of justice treats the recipient with sensitivity and provides the latter with justifications or explanations for actions or decisions (Bies, 2001; Tyler & Bies, 1990). Organizational procedures can limit or moderate the levels of individual burnout where employees experience good interpersonal treatment from superiors. What individuals may normally require in moderating burnout situations would be, respect for the dignity of persons where individuals are not mistreated or coerced or abused in a way that increases their tendency to become inflamed with job descriptions or placement situations. Proper support to help the duty of workers could help.

Perceived inequities in the organization can have devastating effects on the spirit of collective work, because they affect the effort and motivation of staff (Seyedjavadedin et al, 2008). Injustice and the distribution of unfair gains and output of organization undermine the morale of employees and reduce their spirit of effort and activity. Thus, justice implementing is the code of survival and stability of the organization and the development of its employees (Masudi et al, 2008). Therefore the main task of organization management is to maintain and develop a sense of justice and fair treatment among employees, especially in some of the behaviors of managers with employees such as the distribution of rewards, promotion, supervisory relationships, and appointment that are very important for employees (Ghafuri & Golparvar. 2009). Organizational justice is the degree to which employees feel that rules, procedures and organizational policies related to their work is fair (Neami & Shokrkon, 2004).

Supportive workplace supervision is a process that promotes quality at all levels by strengthening relationships within the system, focusing on the identification and resolution of problems, and helping to optimize the allocation of resources - promoting high standards, teamwork, and better two-way communication... (Marquez & Kean 2002). House and Wells (1978) found a major effect of supervisor social support on subordinate outcomes. It has been an effective tool for improving performance for many organizations and can provide a starting point to develop a supportive supervision system or help to streamline already existing supervision systems. Moving from traditional, hierarchical supervision systems to more supportive ones requires innovative thinking, and time to change attitudes, perceptions, and practices. Employees constantly require support from their superiors who are often more experienced and good observers as well.

2. Methodology

2.1. Research Design

The researcher did not manipulate the sets of variables

under investigation, implying that it was an ex-post facto design. The factorial design was employed to ascertain the main and interaction effects of independent variables on the dependent variable. This study research was 2X2X2 factorial design. A 2x2x2 Analysis of Variance (ANOVA) was adopted to know the main and interaction effects of the three independent variables on the dependent variable of the study (employee burnout).

2.2. Participants

A total of three hundred and twenty (320) participants randomly selected from various health establishments were used for the study. The participants were drawn from Olabisi Onabanjo Teaching Hospital, Sagamu, Local Government Health Centers at Ijebu-Igbo, Oru and Ijebu Ode; and General Hospital, Ijebu-Ode. The participants cut across workers from different Departments. The minimum qualification was Ordinary National Diploma (OND) or its equivalent. The participants were all literates. 4.9% had Ordinary National Diploma/National Diploma, 3.1% had National Certificate Examination degree, 7.3% had Higher National Diploma, and 18.2% had bachelor degree while 14.9% had various professional qualifications. 41.2% of the participants had Masters in Business Administration while 10.4% indicated they had other post graduate qualifications. The participants were also made up of 164 males (51.3%) and 156 females (52.1%). 35.6% of the participants indicated that they were single, 48.8% indicated that they were married, 0.9% (8) indicated separated, 3.4% were divorced while only 0.8% were widow/ers. 75.3% were Christians while 24.7% were Muslims.

2.3. Sampling Techniques

A multi-stage sampling technique was used in this study. Purposive sampling technique was used to select only hospital establishment amidst other service-oriented establishments. The peculiarity of the health workers in caring for the people attracted the interest of the researcher. Accidental random sampling was used to select the participants because of the nature of their job. Only available respondents participated in the study.

2.4. Research Instrument

A questionnaire comprising five (5) sections (Section A-E) was used for data collection. Section A consists of questions relating to the biographic characteristics of the participants, section B consists of the Abusive Supervision Scale, section C contains the Interactional Justice Scale, section D contains the Supervisory Support Scale, and section E contains the Maslach Burnout Inventory (MBI).

Section B consists of the Abusive Supervision scale which was developed by Tepper, (2000). The 15- item inventory was designed to measure abusive supervision in organizations. The Cronbach's alpha was .93 for team leader abusive supervision and .90 for department leader abusive

supervision (Liu, Liao, & Loi, 2012). The scale is a five-point Likert-type scale range from (1) "Strongly Disagree", (2) "Disagree", (3) "Undecided", (4) "Agree", to (5) "Strongly Agree". In this research, reliability coefficient alpha of 0.56 was reported and item total correlation was done to test for the validity of the scale. Individuals with a low score indicate a perceived non abusive supervision from supervisors in their organizations, while a high score denotes abusive supervision from supervisors in their organization.

Section C consists of the interactional justice scale which was developed by Colquitt (2001). The 9- item inventory was designed to measure interactional justice among of workers as regards management decisions. Interactional justice has high Cronbach's Alpha reliability of .94. The scale is a seven-point Likert-type scale range from 1 = to a small extent to 7 = to a large extent. In this research, reliability coefficient alpha of 0.56 was reported.

Section D consists of the Supervisory Support Scale which was developed by McGilton, Hall, Pringle, O'Brien-Pallas and Krejci, (2002). The 15- item inventory was designed to measure supervisory support among of workers in organisations. Interactional justice has high Cronbach's Alpha reliability of .94. The scale is a rated on a 5-point likert scale. The response categories were 1 = Never, 2 = Seldom, 3 = Occasionally, 4 = Often and 5 = Always. In this research, reliability coefficient alpha of 0.55 was reported and item total correlation was done to test for the validity of the scale.

Section E contains the Maslach Burnout Inventory (MBI) developed by Maslach and Jackson (1986). It is a 22-item inventory designed to assess burnout syndrome, which is a state of physical and emotional depletion resulting from the conditions of work. Maslach and Jackson (1986) provided the original psychometric properties for American samples. Maslach and Jackson (1986) reported a reliability coefficient of .71 and convergent validity coefficient ranging from .20 - .56. Every item has a score between 1 and 6 with 1 standing for a few times in year, 2- many times a year, 3- a few times in a month, 4- many times every month, 5- a few times every week, 6- everyday. High score on the scale indicate a high-perceived burnout as result of work conditions, where low score would represent a low burnout. Item total correlation was done to test for the validity of the scale. Items 6 and 21 are to be discarded. In this research, reliability coefficient alpha of 0.38 was reported. This shows that the scale was valid.

2.5. Procedure for Data Collection and Data Analyses

Before the administration of the questionnaires, the researcher sought permission from the management of the organisations (hospitals) that were selected for the study, where data was collected. The researcher got the sample size from the target population by administering the questionnaires to the employees who were given the opportunities of participating in the research. The four generated hypotheses were analyzed using 2 X 2 X 2 ANOVA.

3. Results and Discussion

Table 1. Summary of 2 X 2 X 2 Analysis of Variance showing the main and interaction effect of abusive supervision, interactional justice and supportive workplace supervision on employee burnout among health workers.

| SOURCE | SS | MS | df | F | P |
|--------------|-----------|----------|-----|---------|------|
| ABSPV (A) | 27.725 | 27.725 | 1 | 4.910 | <.05 |
| INTJUS (B) | 0.053 | 0.053 | 1 | 0.009 | >.05 |
| SUPWOSPV (C) | 2009.952 | 2009.952 | 1 | 355.979 | <.01 |
| A X B | 6.161 | 6.161 | 1 | 1.091 | <.05 |
| A X C | 2.240 | 2.240 | 1 | 0.397 | >.05 |
| B X C | 1.029 | 1.029 | 1 | 0.182 | >.05 |
| A X B X C | 45.843 | 45.843 | 1 | 8.119 | <.05 |
| ERROR | 1761.633 | 5.646 | 312 | | |
| TOTAL | 39.08.988 | | 319 | | |

*SS = Sum of Square; MS = Mean Square; ABSPV= Abusive supervision; INTJUS= Interactional justice; SUPWOSPV= Supportive workplace supervision.

Table 1 above revealed that there is a significant main effect of perceived abusive supervision on employee burnout among health workers {F (1, 319) = 4.910, P <.05}. Thus, hypothesis one which states that perceived abusive supervision will have significant effect on employee burnout among service-oriented professionals is confirmed.

Hypothesis two states that supportive workplace supervision will have significant effect on employee burnout among health workers.

Table 1 above revealed that there is no significant main

Table 2. Summary of Scheffe's Post Hoc Analysis showing group differences involving abusive supervision ((Abusive, AB)/(Non Abusive, NA), interactional justice (Fair/Unfair) and supportive supervision (Supportive, ST/Non supportive, NS) on employee burnout.

| Groups | N | Mean | S.D | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|------------------|----|--------|-------|---|---------|--------|---------|---------|---------|---------|---------|
| NA/Unfair/NS (1) | 42 | 48.167 | 2.488 | - | -4.303* | 0.349 | -5.272* | -6.231* | 0.060 | -0.573 | -4.987* |
| NA/Unfair/ST (2) | 49 | 52.469 | 2.534 | - | - | 4.651* | -0.970 | 4.362* | -1.834 | 3.729* | -0.685 |
| NA/Fair/NS (3) | 33 | 47.818 | 2.351 | - | - | - | -5.621* | -0.289 | -6.485* | -0.922 | -5.336* |
| NA/Fair/NS (4) | 41 | 53.439 | 2.169 | - | - | - | - | 5.332* | -0.864 | 4.699* | 0.285 |
| AB/Unfair/NS (5) | 56 | 48.107 | 1.988 | - | - | - | - | - | 6.531* | -2.321* | -5.047* |
| AB/Unfair/ST (6) | 33 | 54.303 | 2.531 | - | - | - | - | - | - | 5.563* | 1.149* |
| AB/Fair/NS (7) | 27 | 48.740 | 2.536 | - | - | - | - | - | - | - | -4.414* |
| AB/Fair/ST (8) | 39 | 53.154 | 2.540 | - | - | - | - | - | - | - | - |

As shown in Table 2, employee who perceived their supervisor as abusive and perceived unfair interactional justice with their organisations with perceived supportive workplace supervision would have higher burnout (mean = 54.303) than their counterparts who perceived their supervisors as non abusive and perceived fair interactional justice with their organisations decisions with perceived non supportive workplace supervision low affective commitment, low procedural justice, and low psychological empowerment (mean = 47.818).

4. Discussion

Hypothesis one revealed that there was a significant main effect of perceived abusive supervision on employee burnout among health workers. This is contrary to the findings of some researchers. They found out that perceived abusive supervision is related to employee burnout. In their findings, sustained exposure to abusive supervision is associated with

effect of supportive workplace supervision on employee burnout among service-oriented professionals {F (1, 319) = 0.009, P >.05}. Thus, hypothesis two which states that supportive workplace supervision will have significant effect on employee burnout among health workers is not confirmed.

Hypothesis three states that interactional justice will have significant effect on employee burnout among health workers.

Table 1 above revealed that there is a significant main effect of interactional justice on employee burnout among health workers {F (1, 319) = 355.979, P <.01}. Thus, hypothesis three which states that of interactional justice will have significant effect on employee burnout among health workers is confirmed.

Hypothesis four states that there will be significant interaction effect of supportive workplace supervision, interactional justice, and abusive supervision on employee burnout among health workers.

Table 1 above revealed that there is a significant interaction effect of supportive workplace supervision, interactional justice, and abusive supervision on employee burnout among health workers {F (1, 319) = 8.119, P <.05}. Thus, hypothesis four states that there will be significant interaction effect of supportive workplace supervision, interactional justice, and abusive supervision on employee burnout among health workers is confirmed.

serious negative outcomes for victims and employers, including psychological distress (Tepper, 2000), problem drinking (Bamberger & Bacharach, 2006), and aggression directed against a victim's supervisor (Dupre, Inness, Connelly, Barling, & Hopton, 2006; Inness, Barling, & Turner, 2005), employer (Duffy, Ganster, & Pagon, 2002), and family (Hoobler & Brass, 2006). These consequences translate into annual losses in billions and in increased health care costs, workplace withdrawal, and lost productivity (Tepper, Duffy, Henle, & Lambert, 2006).

Hypothesis two revealed that there is no significant main effect of supportive workplace supervision on employee burnout among health workers. This is contrary to the findings of some scholars who have worked in this area of study. Organizational scholars have demonstrated that employees who have supportive supervisors experience less work-family conflict (Anderson, Coffey, & Byerly, 2002; Lapierre & Allen, 2006; Thompson & Protas, 2005), have reduced work distress (Frone, Yardley, & Markel, 1997), less

absenteeism (Goff, Mount, & Jamison, 1990), reduced intentions to quit (Thompson et al., 1999), and increased job satisfaction (Thompson & Prottas, 2005; Thomas & Ganster, 1995).

Results in hypothesis three revealed that interactional justice did not have significant effect on burnout. This finding is inconsistent with Liljegren & Ekberg (2009) and Al-Zahrani (2011) results. One reason of this conflict can be related to this fact that Nigerian employees do not have a good interaction and cooperation with each other. Also, there are various informal groups in each organization and employees follow specific groups based on their own benefits. In addition, in many cases employees try to interfere and produce problems in others objectives to reach their own goals. Researchers consider interactive justice as a behavior that experience within official procedures. Some researchers also believe that the justice due to the interaction between individuals and others in the organization of social interaction is associated with the theory of social behavior change (Stanley, 2003).

Hypothesis four revealed the significant interaction effect of supportive workplace supervision, interactional justice, and abusive supervision on employee burnout among health workers. Greater focus is centred on abusive supervision by some researchers (Tepper, 2000; Tepper, Duffy, Hoobler, & Ensley, 2004; Tepper, Duffy, & Shaw, 2001). Tepper, et. al, (2009) observed that of the interpersonal relationships people develop at work, none are more important than those employees have with their immediate supervisor (Tepper, Carr, Breaux, Geider, Hu, & Hua, 2009). Some empirical evidence has suggested that supervisor abuse is related to employees' workplace deviance and have identified some situational contexts which can help build a better understanding of when and why employees' workplace deviance are less likely (Mitchell and Ambrose, 2007; Tepper et al., 2009; Tepper, Henle, Lambert, Giacalone, & Duffy, 2008; Thau, Bennett, Mitchell, & Marrs, 2009). However, empirical research exploring the boundary effects is relatively limited.

Findings of this research supported the research outcomes of Whisenant & Smucker (2007), and Nadiri & Tanova (2010), who found out that there was a positive and significant correlation between job satisfaction and organizational justice research. Also Zarifi, Yousefi, and Boroujerdi, (2012) and Klendauer, (2009) found a positive relationship between organizational justice and organizational commitment. Therefore it was determined that justice perception can impact on employees in different situation and this emphasizes the implementation of organizational justice. Team leaders who do not pay attention to issues of justice are those who believe in minimal time and effort to reach the desired goals.

5. Conclusion

The following conclusion could be drawn from the findings of this study: there was a significant main effect of

perceived abusive supervision on employee burnout among service-oriented professionals. There was a significant main effect of interactional justice on employee burnout among service-oriented professionals. It can also be concluded that there was a significant interaction effect of supportive workplace supervision, interactional justice, and abusive supervision on employee burnout among health workers.

Based on the findings of this study, the following recommendations are suggested:

It is suggested that compliance with psychological issues such as fairness in pay and bonuses to staff, the enforcement procedure, involving employees in organizational decision making, ethical consideration, respect and honesty when dealing with employees, providing suitable and on time feedback, appreciation for their good performance, and furnishing an interactive environment and good communication between staff provide an understanding of organizational justice on behalf of employees. This will reduce burnout and keep the organization active.

The health establishments can reduce the incidence of employees' burnout at least through establishing medical teams that perceived their superiors as non abusive. These like-minds might conveniently work together and reduce the incidence of employee burnout. Productivity of the organization will thus be enhanced.

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