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A study on Burnout, Fatigue and Work Engagement among Mental Health Professionals in UAE

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Abstract

Mental health professionals are integral to our well-being offering support across different settings. Their expertise helps in addressing mental health needs, highlighting their crucial role in society. The current study aimed to find relationship between burnout, fatigue and work engagement among mental health professionals in UAE. Professional Quality of life and Utrecht work engagement scales are used to measure the burnout, fatigue and work engagement. The data was collected from 33 mental health professionals working all over UAE. Result found that there is negative correlation between burnout and compassion satisfaction and positive correlation between burnout and secondary traumatic stress. Furthermore, the result shows a positive correlation between burnout and professional quality of life and secondary traumatic stress and professional quality of life. The result also indicates the positive correlation between work engagement and compassion satisfaction. It is recommended to have proper mental health support to Mental Health Professionals (MHP) workers to reduce burnout and secondary traumatic stress also there should be organizational culture of compassion and engagement to support the mental health professionals.

***Keywords*:** Burnout, Fatigue, work engagement, mental health professionals, UAE

Vol. 2, Issue 9 September 2024 ISSN: 2584-0142

Introduction

Mental health professionals encounter various challenges at work, such as lack of support, which can result in burnout and compassion fatigue. Working in emotionally challenging environment sometimes can cause burnout especially when there is no emotional support available and there is avoidance of self- care practice. According to WHO burnout is classified "as a syndrome meaning it's a collection of signs and symptoms with a specific related health cause." In other word burnout is a state of physical, emotional and mental exhaustion. Compassion fatigue gets developed into mental health professionals when they have been exposed to challenging environment for long period of time. It's a feeling of physical, emotional and mental exhaustion which is experienced by mental health providers when they have been dealing with stress and trauma situations for long period of time which leads to lack of empathy and compassion over time.

Sorenson et al. (2016) described compassion fatigue "as a condition of the gradual decrease in compassion over time. Work engagement is another important factor in the life of mental health professionals." Schaufeli et al. (2002) defined work engagement as "positive feeling, work-related state of mind that is characterized by Vigor, dedication and absorption." Work engagement refers to "a positive, affective-motivational state of high energy combined with high levels of dedication and strong focus on work" (Schaufeli & Bakker, 2010).

According to Singh et al. (2020) a review was done to examine articles exploring work-related factors associated with compassion fatigue. The result suggested a theoretical model with the job demands-resources models, wherein job demands are associated with compassion fatigue and job resources mitigate the impact of job demands.

Rossi et al. (2012) conducted a study to assess burnout, compassion fatigue and compassion satisfaction among staff at the four community-based mental health services of Verona, Italy. The result shows worker with psychological distress reported both higher burnout and compassion fatigue scores and lower level of compassion satisfaction.

The study aimed to find out relationship between burnout, fatigue and work engagement among Mental Health Professionals.

Vol. 2, Issue 9 September 2024 ISSN: 2584-0142

Burnout

According to Maslach and Jackson (1981) burnout is "a psychological syndrome characterized by emotional exhaustion, depersonalization and a reduced sense of professional efficacy."

According to Schaufeli and Enzmann (1988) burnout is "a persistent, negative, work-related state of mind in normal individuals that is primarily characterized by exhaustion, which is accompanied by distress, a sense of reduced effectiveness, decreased motivation, and the development of dysfunctional attitudes and behaviours at work."

According to Etzion (1987) Burnout is "a slowly developing process that starts without warning and evolves almost unrecognized up to a particular point."

According to Kim, Yang and Lee (2011) a study was conducted to identifies and assesses individual and work-related factors as correlates of burnout among mental health professionals. The result of this meta-analysis indicates that age and work setting variables are the most significant indicators of emotional exhaustion and depersonalization. In terms of level of personal accomplishment, the age and work variables were the most significant indicators with positive correlations.

A study was conducted by Velimirovic, Vranko and Feric (2017) which aimed to determine the level of stress in professional working in psychiatric hospital, as well as to explore possible differences in stress level regarding the different characteristics of participants as sex, level of education, marital status and working hours etc. The result showed that there is moderate burnout experience in the sense that participant feel overload when they try to maximize their reward by taking on a volume and pace of work that become excessive.

Compassion Fatigue

According to Figley (1995) compassion fatigue is defined "as if the stress increases to such an extent that it leads to exhaustion." Sorenson et al. (2016) described compassion fatigue as a condition of the gradual decrease in compassion over time.

According to Ray, Wong and Heaslip (2013) a study was conducted on frontline mental health professionals. The aim of the study was to determine the relationship among

compassion satisfaction, compassion fatigue, burnout and work life conditions. The result shows high level of compassion satisfaction, low level of compassion fatigue and the higher overall degree to fit in the six areas of work life were predictive of lower burnout in front line mental health professionals.

According to Clark et al. (2022) a study was conducted on the Impostor phenomenon in mental health professionals: Relationship between compassion fatigue, burnout and compassion satisfaction. The study shows that impostor phenomenon is positively associated with compassion fatigue, as well as negatively associated with compassion satisfaction, when controlling for years of work and age. The combination of lower level of compassion satisfaction and higher levels of burnout predicted higher levels of imposter phenomenon.

A study was conducted to the prevalence and difference in compassion fatigue among different helping professions and to explore the relationship between compassion, self-compassion, self-criticism and compassion fatigue. The result shows significant difference in compassion fatigue levels among various helping professions. No large differences were found in the compassion and self-compassion levels exhibited by professionals with medium versus low compassion fatigue scores (Ondrejkova, Halamova, 2022).

Work Engagement

According to Kahn (1990) work Engagement is “conceptualized as harnessing of organisational members selves to their work roles; in engagement, people employ and express themselves physically, cognitively and emotionally during role performance”

According to Schaufeli (2002) work Engagement is defined as “a positive fulfilling, work related state of mind that is characterized by vigor, dedication and absorption.”

According to Acker (2011) a study was conducted to explore the relationship between workplace conditions, role stress, burnout and intent to quit. The study suggests that the direct and indirect role effects of role stress on emotional exhaustion are illuminated in order to better understand the complex process of becoming stressed and disillusioned with one’s work. The result shows that role stress mediates the association between workplace variables and emotional exhaustion and that emotional exhaustion mediates the association between role stress and intent to quit.

Vol. 2, Issue 9 September 2024 ISSN: 2584-0142

According to Fontes et al. (2019) a study was done to analyse the relationships between stress and engagement in health professional in a hospital. The result showed the stress engagement predicted the three dimensions of engagement. Specifically, health professionals with no intention to change service, those with more stress dealing with clients, and who worked only in hospital showed higher overall engagement.

According to Lupsa, Virga and Rusu (2020) a study was done that proposes model of personality characteristics which can directly predict work engagement and indirectly employees job performance and their mental health. The result provides partial support to hypothesis, personality characteristics shows an association to work engagement, which in turn predicts employees performance and mental health.

Purpose

The purpose of the study is to find out burnout, fatigue and work engagement among mental health professionals in UAE

Hypothesis

There will be significant relationship between professional quality of work and work engagement.

Methods

Sample

A total sample of 33 people in the age between 22-50 years working in the field of mental health in different settings was collected within UAE.

Measures

***Utrecht Work Engagement Scale*:** This scale was developed by Schaufeli et al. (2002). The UWES is self- administered instrument with 17 items assessing Vigor, dedication and absorption. Items are scored along a six- point Likert-type scale (0=Never and 6=Always). Scores are total to give overall picture of engagement in work with the higher score indicating higher engagement.

Vol. 2, Issue 9 September 2024 ISSN: 2584-0142

***Professional Quality of Life Scale*:** This scale was developed by Stamm (2010). The scale contains total 30 items including subscales of compassion satisfaction, secondary traumatic stress and burnout. Items are scored along a five-point Likert-type scale (1=Never and 5= Very often). Scores are total to give overall picture of burnout and fatigue.

RESULTS

Table-1

N, Mean and Standard Deviation				
	compassion satisfaction	**secondary traumatic stress**	**Burnout**	**Professional quality of life total**	**work engagement total**
N	33	33	33	33	33
Mean	42.9	23.5	26.8	86.5	69.5
Standard deviation	8.05	8.39	6.38	13.5	17.9

Table-2

Correlation between professional quality of life & work engagement										
	compassion satisfaction		**secondary traumatic stress**		**Burnout**		**Professional quality of life total**		**work engagement total**	
compassion satisfaction	—									
secondary traumatic stress	-0.103		—							
Burnout	-0.350*		0.754	***	—					
Professional quality of life total	0.284		0.892	***	0.708	***	—			

work engagement total		0.441*		-0.158		-0.269		0.010		—	
Note. * p < .05, ** p < .01, *** p < .001											

Discussion of Results

The result of the present study found that there is a negative correlation between Burnout and compassion satisfaction (r= -0.350, p<.05) and there is positive correlation between Burnout and secondary traumatic stress (r= 0.754, p<.001). Furthermore, there is a positive correlation between secondary traumatic stress and professional quality of life (r= 0.892, p<.001).

Additionally, the results also found out positive correlation between burnout and professional quality of life (r=0.708, p<.001). The result also indicates positive correlation between compassion satisfaction and work engagement (r=0.441, p<.05), hence our hypothesis is partially accepted here.

There will be positive correlation between work engagement and compassion satisfaction aligns with a previous study conducted by Audin et al., (2018) on staffs working in independent residential childcare organisation who discovered work engagement was positively correlated with compassion satisfaction and negatively correlated with burnout but not secondary traumatic stress.

Another study by Cetrano et al., (2017) on mental health staffs in Italy shows ergonomic problems and impact of work on life predicted higher levels of compassion fatigue and burnout. Impact of life on work was associated with Compassion fatigue and lower levels of trust and perceiving more risks in future with burnout only and perceived quality of meetings, need of training and perceiving no risks for the future predicted higher levels of compassion satisfaction.

Work engagement and Compassion satisfaction are protective factors in the prevention of burnout and fatigue among mental health professionals. There should be more implementation of support structures to prevent or minimise burnout and secondary traumatic stress among mental health professionals. One should also strive for achieving more job engagement and fulfilment.

Vol. 2, Issue 9 September 2024 ISSN: 2584-0142

Conclusion

Mental health professionals are at high risk of experiencing burnout and fatigue due to the emotional demands of their work, especially in rapidly evolving regions like the UAE. Understanding burnout and fatigue in the UAE's mental health workforce is crucial for maintaining high-quality care and professional well-being. While, burnout has been studied globally, limited research focuses on the Middle Eastern context, particularly in the UAE, where cultural factors may influence stress levels. Findings could guide the development of support programs or organizational changes to reduce burnout and enhance engagement. Results may inform policy-makers and healthcare administrators in creating healthier work environments for mental health professionals.

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