

Burnout, a “Ghost” who did not Appear in a Public Health Hospital During the COVID-19 Pandemic

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ABSTRACT

Burnout syndrome is a workplace-related emotional disorder that significantly impacts healthcare workers, especially during extraordinary circumstances like the COVID-19 pandemic. This study evaluates the prevalence and severity of burnout among staff at El Salvador Hospital, a facility established for COVID-19 care. During the pandemic’s critical period in 2021, a voluntary electronic survey was conducted among 1,855 staff members, achieving a 46.14% response rate (856 participants). Data was analyzed using the Maslach Burnout Inventory (MBI), revealing the following results: Emotional Exhaustion (High: 26%, Medium: 19%, Low: 55%), Depersonalization (High: 17%, Medium: 22%, Low: 61%), and Personal Achievement (High: 72%, Medium: 17%, Low: 11%). Despite the challenging conditions, no global burnout impact was observed, potentially due to effective teamwork, intense work integration, and collective fulfillment derived from addressing the pandemic. This study underscores the importance of supportive work environments and emphasizes strategies to mitigate burnout in healthcare settings.

Keywords: Burnout Syndrome, Healthcare Workers, COVID-19 Pandemic, Emotional Exhaustion, Occupational Stress.

INTRODUCTION

Occupational burnout syndrome is an emotional disorder linked to the workplace and the employee’s lifestyle. Several publications report the impact of burnout on health personnel [1], including a meta-analysis [2] that warns about the risks of health personnel developing Burnout in the face of the COVID-19 pandemic [3], associating, among other extraordinary causes, work overload apart from social isolation.

El Salvador Hospital, equipped with a total of 1,000 beds for the care of COVID patients; I count during the most complex period of the pandemic (2021) with an 1,855 staff (Doctors, Graduates in Nursing, Technicians, and support services personnel), made up of personnel who a short time after graduating from their respective careers had to quickly migrate to the new facilities and create their own work culture. Completing the year

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of service, more than 9,000 patients have passed through its facilities. We carried out a Burnout survey.

MATERIAL AND METHODS

To ensure the well-being of our staff beyond aspects related to biosecurity, we conducted a voluntary survey in the 40 areas of the hospital between May 24 and June 24, 2021, to find out about the work environment. The link to answer Maslach's questionnaire on burnout syndrome was sent anonymously via text message.

RESULTS

Nine hundred seventy-four responses were obtained, of which 856 were processed with complete data, corresponding to 46.14% of the Hospital staff (856/1855).

According to the Maslach Burnout Inventory (MBI) [4] stratification, they manifested Emotional Exhaustion at High: 26%, Medium 19%, and Low: 55%. Depersonalization: High: 17%, Medium: 22%, Low: 61%. Personal Achievement: High: 72%, Medium: 17%, Low: 11% (Tables 1,2&3).

Table 1. Categorized by sex

Gender	Level	Male	Female	Undefined	Average Global
Emotional Exhaustion	High	25 %	26 %	75 %	26 %
	Half	19 %	19 %	25 %	19 %
	Low	56 %	61 %	0 %	55 %
Depersonalization	High	20 %	16%	25 %	17 %
	Half	19 %	23 %	25 %	22 %
	Low	61 %	61 %	50 %	61 %
Personal fulfillment	High	76 %	69 %	75 %	72 %
	Half	14 %	20 %	25 %	17 %
	Low	10 %	11 %	0 %	11 %

Table 2. Categorized by age

Age	Level	18-34	35-44	> 45	Average Global
Emotional Exhaustion	High	29 %	21 %	14 %	26 %
	Half	19 %	15 %	26 %	19 %
	Low	52 %	64 %	60 %	55 %
Depersonalization	High	19 %	13%	9 %	17 %
	Half	22 %	23 %	17 %	22 %
	Low	59 %	64 %	74 %	61 %
Personal fulfillment	High	68 %	81 %	88 %	72 %
	Half	20 %	12 %	7 %	17 %
	Low	12 %	7 %	5 %	11 %

Table 3. Categorizing by having or not contact with patients

Have contact		YES	NO	Average Global
Emotional Exhaustion	High	26 %	28 %	26 %
	Half	20 %	14 %	19 %
	Low	54 %	58 %	55 %
Depersonalization	High	17 %	18 %	17 %
	Half	22 %	19 %	22 %
	Low	61 %	63 %	61 %
Personal fulfillment	High	72 %	74 %	72 %
	Half	17 %	18 %	17 %
	Low	11 %	8 %	11 %

Although strata found discrete dispersions, there is no global impact of organizational burnout despite being a new Hospital with young people with little experience performing functions.

DISCUSSION AND CONCLUSION

There are various interpretations of job stress and burnout

(also known as burnout at work), but despite their possible similarities, they are not identical.

While work stress can be related to various reasons or causes, some of which may or may not be linked to daily life, definitions of burnout are linked explicitly to professional activity and can be considered a form of stress in the workplace labor sphere [5] (Table 4).

Table 4. Stress vs Burnout

Aspect	Stress	Burnout
Involvement in critical issues	Excessive	Almost Absent
Emotionality	Physiological	Worn out
Prevalence of organic damage	Physiological	Emotional
Depletion type	Physical	Physical, motivational and emotional
Depression	It is seen as a way to save energy.	It results in a loss of ideals, not due to energy savings

Source: Luis Felipe Ali El Sahili González. Bournout. Editorial El Manual Moderno

It would be surprising that the Hospital staff was more subject to work stress related to a new infectious pathology with characteristics of a Pandemic, the first of the 21st cycle after more than a century of the last one (Spanish Fever 1918-1920).

Perhaps there is a need for teamwork, intense work coexistence, and the empowerment of all staff, regardless of their function, to “protect” hospital staff so they can feel fulfilled with a globally challenging task.

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CONFLICT OF INTERESTS

The Author declares that there is no conflict of interest.

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