

THE DIFFERENCE IN BURNOUT
BETWEEN PEDIATRIC NURSES EMPLOYED IN GENERAL PEDIATRIC UNITS
AND PEDIATRIC NURSES EMPLOYED IN PEDIATRIC INTENSIVE CARE UNITS

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Abstract

The purpose of this study was to explore the differences in burnout between pediatric nurses employed in general pediatric units and those employed in pediatric intensive care units. Using Maslach's conceptual framework, the study attempted to determine if there was a difference in reported burnout as a function of the type of unit in which the nurse is employed. The following hypotheses were tested: a) there will be no difference in burnout between nurses employed in general pediatric units and nurses employed in pediatric intensive care units as measured by the total scores of the Maslach Burnout Inventory (MBI); b) there will be no difference in burnout as measured by the three subscales comprising the MBI; and c) there will be no interaction between the type of pediatric unit the nurse is employed in and subscale scores for burnout as measured by the MBI. The final volunteer sample consisted of 106 registered nurses who give direct care to pediatric patients in an acute care setting of a medical center hospital located in southern Connecticut. Participants were asked to complete a demographic data sheet and the MBI, which assessed the burnout experienced by respondents. The sample was divided into two groups based on unit of employment: non-ICU nurses and ICU nurses. In order to test the three hypotheses a mixed factorial was computed and found a) the

average total score on the MBI for the non-ICU nurses was significantly higher than the average total score for the ICU nurses, thus rejecting the first null hypothesis, b) when the subject's unit of employment was ignored, the average burnout score on the three subscales was significantly different and showed a "moderate" level of burnout on the emotional exhaustion subscale, a "low" level of burnout on the depersonalization subscale, and a "moderate" level of burnout on the personal accomplishment subscale. A Scheffe's post-hoc test revealed that all three subscale scores differed significantly from each other thus rejecting the second null hypothesis, and c) the level of burnout was not significantly different between non-ICU nurses and ICU nurses on the three subscales. Therefore the third null hypothesis was not rejected. The sample differed on two demographic variables - age and experience. The finding of moderate levels of burnout in the sample studied indicates the need for the profession to direct research at determining the variables that contribute to burnout, altering these variables whenever possible or developing means to cope with them, developing means of assisting nurses to cope with stress and prevent burnout, and finding ways to alter environmental and job related variables that contribute to the development of burnout.