

# Generation of Burnout Phenomenon in Psychiatric Nurses and the Strategies to Address

Ruijia Yang \*

Kunming No.1 High School International Department, Kunming, 650032, China

\* Corresponding author Email: yrj20212248@outlook.com

---

**Abstract:** Burnout refers to a depleted state in the emotional attitude towards things produced by a long period of time under high intensity pressure. There is a loss of enthusiasm for work, a reduced sense of personal achievement, and increased dehumanisation. The study found that some psychiatric nurses' burnout is manifested as indifference, unwillingness to invest too much emotion and energy in treating patients, withdrawing themselves from patients by keeping a distance from them when they are emotionally out of control and hallucinating, considering work as a painful thing, not discussing their work with their family and friends, and generating a deep sense of fear when they suddenly receive a phone call about shift arrangements. In order to refine this phenomenon, the hospital should have a clear internal scheduling of shifts and set up incentive mechanisms such as job promotion and bonuses to regain nurses' motivation and sense of responsibility for their work.

**Keywords:** Burnout; Psychiatric Nurses; Influencing Factors.

---

## 1. Introduction

### 1.1. Background and Theme of the Study

Maintaining a good mental state is one of the non-negligible parts of maintaining physical and mental health. If people often lack the satisfaction and motivation of this inner support, they will gradually lose the sense of well-being and fulfilment in their daily lives, and the willingness to achieve their goals that they have been working towards may gradually be lost. This phenomenon is often referred to as burnout, a state in which people are unable to cope with physical, mental, and psychological stress. [1] The phenomenon has also been referred to as occupational exhaustion, overwork, and emotional exhaustion. [2-5] It refers to a state of depletion in attitudes towards work arising from prolonged exposure to high intensity stress. People begin to have lower job satisfaction and enthusiasm, lower self-achievement, loss of interests and hobbies and emotional apathy.[6] Even appear different degrees of disorders, diseases and serious mental exhaustion, affecting their own and other people's normal life.

When the level of burnout increases, people often feel negative emotions such as helplessness and hopelessness. On top of that, such harmful phenomena will almost penetrate into their lives, including family life, social occasions, daily work, and even produce related mental illnesses, greatly affecting people's mental health. If work stress is not addressed in a timely manner and this repressed emotion is passed on back home, it can be a precursor to undesirable behaviours such as suicide, alcoholism, and domestic violence. However, a completely stress-free life is not practical, and the right level of stress can propel us to progress, learn and work more efficiently and with more motivation, as well as have stronger physical fitness and a more stable mental state. [7]

From a psychological point of view, burnout in service industries such as psychiatric nurses, who often get along with different people, is usually accompanied by anxiety, indifference, high mood swings and other manifestations, and

they tend to cope with their work with fatigue, lack enthusiasm for their work, and go through the motions every day just to complete their nursing tasks, and they feel that they have no self-worth, no sense of achievement, and no sense of purpose. Some nurses regard their daily duty as a mean of earning a living, and carry out the uninspiring and tedious work of nursing, comforting and taking care of patient's day after day. In the long run, they will lack passion and motivation in their work, be satisfied with the current status quo of maintaining their lives, ignore the needs of patients, and be tired of reporting and updating the status of patients at different times.

### 1.2. Purpose of the Study

Domestic and foreign research on the phenomenon of burnout has been very perfect, whether from the basic theory to data scales and other modules of the research results are very sufficient, and the domestic nurses, nurses, civilian police and teachers as the object of study are not a few studies. Researchers and scholars are physically searching for solutions to prevent and improve the phenomenon of burnout.

The main purpose of this paper is to analyse what factors affect the phenomenon of burnout among psychiatric nurses, and to find a reasonable and effective solution for this phenomenon that can be universally applied and truly implemented to improve the work enthusiasm and sense of self-achievement of psychiatric nurses. [8]

## 2. Literature Review

At present, domestic research on burnout is mainly a review of foreign theories and some descriptive studies, with fewer empirical studies. And the data in the few empirical studies lack credibility and persuasiveness, and fewer people are willing to accept closed questionnaires, the sample size is small, and the one-sided findings cannot represent the status quo in other regions and more specialised and authoritative hospitals. Most people do not have enough time and energy to complete and return the results of non-closed questionnaires, perfunctory fill out hastily, or even tried to

return the questionnaire. In addition, personal subjective emotions and biases cannot be avoided, including confusion and uncertainty about one's own future, and temporary difficulties in adapting to work and life styles that arise shortly after joining the organisation.

### **3. Influencing Factors**

In the face of patients, it is normal for nurses to use empathy and other means of communication to patiently calm patients and persuade them to accept treatment, but some of the male nurses surveyed said that they were not good at expressing themselves and lacked patience, and that they were very distressed by the situation and didn't know how to deal with it appropriately. Secondly, because they do not want to spend too much emotion and energy, nurses no longer have basic greetings and concern for the patients they are responsible for, but rather treat them with emotional indifference or even in a dehumanising way, preferring to relieve stress by alienating the patient in one way or another. There are major points that contribute to the present situation of the nurses.

#### **3.1. Work Stress**

People have high expectations of those in the service sector, such as teachers, police officers, healthcare workers, etc. They are held in high esteem by public opinion, and are required by the public to have inexhaustible empathy, patience, and passion, to serve others with dedication, and to satisfy the needs of every customer, which greatly increases the professionalism and empathy required of those in the service sector. However, even if service professionals strive to reach the heights that society expects them to reach, they are forced to give up their professional aspirations and become service machines by accepting the value of 'selflessness' as influenced by the general trend of the professional environment, which naturally reduces the chances of obtaining a sense of fulfilment. There is a growing discrepancy between the efforts of professionals and their achievement of recognition and appreciation by the people. As a result, some in this profession, such as psychiatric nurses, tend to lack the ability to cope with persistent psychological stress, fail to give back to patients the satisfaction of receiving a service, fall into self-doubt and denial, and even fear being around patients, leading to burnout. [6, 9]

At the same time, resources and manpower are scarce in the sector. A nurse may even have to cope with 30 to 40 psychiatric patients at the same time, and her fragmented rest time is filled up every day, and she is unable to calm down one patient after another who has a seizure. In the long run, nurses will develop negative emotions, they will feel that their daily work risks being harmed, like a machine running continuously, naturally, they cannot frequently open their hearts to each patient and readily consume their own emotions to soothe the patient, and they cannot obtain the slightest sense of achievement. Since then, in their leisure time, when they and their colleagues talk about their daily work, often only use some dehumanising words, such as "which bed of patients and hallucinations" "that old man and grimace at me pouncing" and other objectification of some professional nouns to refer to a patient who has a name of his or her own.

#### **3.2. Personality Traits and Psychological Qualities**

Personality traits, psychological qualities and related cognitive behaviours may increase the level of burnout and neuroticism due to working in a highly stressful environment. [10] Therefore, sense of responsibility, extroversion and openness are the main influencing factors in preventing the occurrence of burnout phenomenon, which decrease dehumanisation and depletion and increase personal fulfilment. [6]

#### **3.3. Internal and External Environmental Impacts of Work**

Nurses, a profession that requires a lot of patience and care, are mostly female. Because of the huge workload in public hospitals and the extended working hours due to the poor condition of patients, female nurses are unable to balance their family and work commitments properly. They also must change shifts in the early hours of the morning, which seriously disrupts their work schedules and routines.

In addition, because of the degree of professional qualifications required for the profession, there are fewer opportunities for advancement, and the average nurse has far less time to organise their work and life freely than the charge nurse, who is in a higher position than them. [11]

### **4. Significance of the Study**

Beginning in the 1950s, service industries in Europe and the United States began to mechanise rapidly, gradually converging towards a professional and formal hierarchical management model. It evolved from the traditional small-scale manual manufacturing to large-scale management organisations where each person had his or her own job. Most people at that time saw their daily work as a responsibility and a mission rather than a burden. They collectively believed that contact with the collective was necessary in order to find self-identity and integrate into society. However, burnout is further exacerbated by frustration and a sense of falling short generated by the prevailing discrepancy and conflict between egoistic organisational interests and personal values. With the continuous improvement of our country's economy, politics, science and technology, education level, laws and regulations, the competition among various positions has gradually intensified, and excellent and outstanding labour force abounds, in order to stand firmly in the society, and successfully start a family, the phenomenon of "inward roll" has gradually appeared.

### **5. Discussion**

Initially, burnout was seen as a negative state. However, in the 1990s, two scholars redefined burnout as a positive state of "dedication" and reprogrammed the range of well-being indices that evolve from a positive state of engagement to a negative state of burnout. In addition, momentum, energy, and dedication, which are the opposite of the factors that influence burnout, were pointed out. Burnout was re-termed as a lack of engagement and the focus of the research shifted from improving the negative state to finding the root causes of the erosion of the positive engagement state. [12]

### **6. Conclusion**

Studies have shown that many psychiatric patients are

already in a state of loss of self-awareness, they do not cooperate with treatment, they forcefully leave the hospital, and they even have hallucinations of treating nurses as if they were deep-seated mental illnesses, obsessions, or delusions of grandeur, and they commit acts of insanity against nurses. [9]

Overall, the main phenomenon of burnout is that a person with a personal mind, rich imagination and creativity becomes a mechanical and numb work machine. Reduced emotional involvement in work, separating personal feelings from stress, withdrawing oneself by distancing oneself from the emotionally disturbed and hallucinating patient. A more aloof, less personal approach, a clear distinction between work and personal life, and less discussion of work experiences with family and friends.

In order to improve the phenomenon, hospital executives should set up incentives such as appraisal promotion and salary increase, [7] and clear division of labour and shift changes within the work to reduce the number of shift transfers, in addition to paying close attention and attention to the nurses' resistance to their work and the breeding of negative emotions, to increase the number of private consolations and to reduce as much as possible their silent behaviours towards their patients. [13] In addition, recruiting fewer but more experienced and efficient staff who are motivated, responsible, and group orientated to bring more efficiency to the hospital.

## References

- [1] Maslach, C. (1976) Burned-out. *Human Behavior*, 5(9):16-22.
- [2] Zhan, W., Zhou, Y., Liu, Z. (2012) Analysis of factors affecting burnout among librarians in primary and secondary schools. *Library and Intelligence Work*, 56(19):69-73+94.
- [3] Zhang, X. (2006) Analysis of burnout problems of college library employees. *Library Intelligence Knowledge*, 03:53-55.
- [4] Meng, Y. (2015) Analysis and Countermeasures of Burnout Problems of Higher Vocational Teachers. *Journal of Liaoning Teachers' College (Social Science Edition)*, 01:123-125.
- [5] Dong, W., Xiao, J., Tuo, N., et al. (2014) Reliability test of burnout scale for Chinese military personnel. *Journal of Second Military Medical University*, 35(10):1163-1167.
- [6] Sun, X. (2011) Influencing factors and coping strategies of middle school teachers' burnout. *Education Exploration*, 01:117-118.
- [7] Gong, Z. (2015) Research on the status quo of prison police burnout. *Research on Crime and Rehabilitation*, 05:18-23
- [8] Song, S. (2013) Research on the relationship between burnout and performance of college teachers and its influencing factors. Thesis of Northeast University of Finance and Economics 07:109.
- [9] Zhao, J. (2014) Research on the influencing factors of psychiatric nurses' emotional intelligence, burnout and their correlation. Thesis of Jilin University, 10:53.
- [10] Xue, B., Luo, H., Li, X., et al. (2022) The current situation and influencing factors of burnout among oncology nurses. *Occupation and Health*, 38(22):3138-3141.
- [11] Zhang, Q., Zhang, X., Hu, C., et al. (2021) Analysis of the current situation of nurse burnout and its influencing factors. *Journal of Bengbu Medical College*, 46(02):232-236.
- [12] Schaufeli, W.B., Leiter, M., Maslach, C. (2009). Burnout: 35 years of research and practice. *Career Development International*, 14:204-220.
- [13] Wang, F. (2016) Correlation analysis of psychiatric nurses' negative emotions and silent behaviour. *Chinese National Health Medicine*, 28(22):1-4.