

A Study of Relevance Quality of Life and Marital Satisfaction with Job Burnout in Nurses

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ABSTRACT

The aim of this study was to investigate the relevance between quality of life and marital satisfaction with job burnout Urmia. Participants were 150 nurses in hospitals in the city of Urmia in 2014, randomly selected and randomly designated. The measuring quality of life (SF36) questionnaire, Enrich marital satisfaction questionnaire short form and Maslach and Jackson questionnaire used to gather data were by subjects. Descriptive statistics and inferential statistics (Pearson product-moment correlation coefficient and Regression) were used to test the research hypothesis. The results showed that is a significant difference between quality of life and marital satisfaction with job burnout of nurses in Urmia city. Nurses that to a lesser extent suffering from job burnout, Current marital satisfaction in their lives to a greater extent and had a satisfactory quality of life.

Key words: Quality of life; Marital satisfaction; Job burnout

INTRODUCTION

Human resources is a great asset for every organization To achieve the goals. 50 to 85% of diseases are caused by stress or help with stress. There are different sources of stress that is one of the most important sources of jobs. Nursing is a stressful job, the nurse is a person who is responsible for controlling and monitoring the patient's twenty-four-hour. The naturally it is continuously exposed to various stress factors and there is no doubt that long-term adverse effects of these factors can cause burnout and imposes on the professional activity of the cortex painstaking¹. Among these are affected by mental health and emotional security of nurses over the rest of the population. Female nurses are in addition to patient care courses and stages of their lives, such as pregnancy, childbirth, and more important in nurturing a generation, family-centered and a major supplier members of physical and psychological

health². One of the factors contributing to burnout, quality of life and marital satisfaction, that are one of the main reasons for the reduction in the loss of manpower burnout is one of the major factors in the loss of productivity and loss of manpower to staff. This problem is in addition to the adverse effects of physical and psychological effects burnout in nurses' ability to reduce their efficiency and overall efficiency loss caused to them. Very rapid variation in technical fields such as engineering and medicine erosion occurs faster than the labor force. Saatchi (1996) points out that the most commonsymptoms of Job burnout is morbidly Reduce the ability of employees to work and feel tired all the time, feeling helpless and trapped in jobs and jobs with emotional problems, depersonalization and cynicism and mistrust towards others, negative attitudes and ultimately having negative feelings about personal development. In fact, person progress is not motivation with job burnout, his confidence has

decreased, was increases at the time of decision making and implementation is violence as a conscious reaction the wear out characteristics of the development of culture tinkering, ignoring the values, indifference to stressors, the words and deeds are not great to ignore the achievements and shortcomings. Points out Studies show that the expected outcomes job burnout is disinterested in getting to their jobs, depression, loss of empathy towards others, mistrust toward the management, mobility and being aggressive, shunning from others, the ability to perform job duties, limited social activities, recreation, increase of drug abuse, increase the difficulties and conflicts with subordination, directors, wife and children, suffering from muscle pain, headaches kinds, sleep problems ,lack of sleep and gastrointestinal disorders, decline Processing the demands of the clientele, despite the difficulties in controlling the ethical dimensions of staff, increasing number of misconduct, absence from work, leaving job and also the events at work³. Also be mentioned as causes of Job burnout to the cases are severe and prolonged mental stress, unfavorable working conditions and undesirable, poor management style of the organization, excessive workload, role conflict and confusion in fulfilling responsibilities, too much variation in the organization and job. However it could identify issues related to mental stress investigate the psychological factors of the work environment of nurses and determine to what extent the pressure from the rise in influence of job stress and its consequences such as burnout. Job burnout is one of the factors affecting the quality of life⁴. Quality of life is a multidimensional and complex issue and includes objective and subjective factors and favors the assessment of welfare in important aspects of life. An important feature is often social scientists agree that the quality of life, include a multi-dimensional being, mental and being active. Feel better being socially suggests that the quality of communication is how family, friends, colleagues and community. This scale implies to the notion that is how quality of the biological environment of human life and whether or not people will leave positive external effects on the environment and others? Or extent to which are trying to reduce the negative external effects of their interactions. On the other hand, there is a direct interaction with

marital satisfaction in quality of life. The Effect of attitude of marital satisfaction Know the Effect of attitude of marital satisfaction and therefore, according to this view, consent is also renowned private individual pairs a couple⁵. Based on this definition, marital satisfaction the positive attitude and enjoy a couple of aspects of their marital relationship and marital dissatisfaction and unhappiness in fact negative aspects of marital relations. Many factors can have an influence on marital satisfaction and asserted by any person with respect to the attitude or the results of its own Factors to marital satisfaction. Agreement between women and men has an important role in various issues of life. The agreed that is influenced by the thinking and interests of the two having agreed to the important issues of life is one of the issues that contribute to the success of family and marital satisfaction. Women's jobs connection with the outside of the house is the only motivation this needs to be respected in many cases makes the difference. Another can be hurt them by the employment of women on quality of life and satisfaction of their marital life and provide them with job burnout. This research is to find a correlation between quality of life and marital satisfaction on job burnout in nurses and including the groups that are a sensitive to nurses working in hospitals because they are in direct contact with patients and their families and if they do not have high morale and satisfaction of the appropriate It is evident that they have been damaged and they are at risk of burnout, boredom and analysis and patients and their families will not be benefit the good service. The final step will not earned without administrators of discontent this case makes clear the need to addressing the study's variables. This research has done to reviews predictive power of the variables to predict the marital satisfaction, quality of life and job burnout and the relationship between quality of life and marital satisfaction and job burnout. Considering the important role that quality of life and marital satisfaction can be a female in job burnout. Research on the connection these three variables together may be a step in the improvement of physical and mental health of the population of the community directly affected patients, their families and society.

MATERIALS AND METHODS

Study population

The present study is a descriptive correlation. The purpose of this study is to determine the relationship between quality of life, marital satisfaction and job burnout among nurses in hospitals in different parts. In this study, the researcher evaluated the level of correlation among three variables, quality of life, marital satisfaction and of burnout. Participants in this study were selected from among hospitals in nurses Urmia to simple random sampling method included in the test. The study selected statistical society was randomly selected from the sample society (317) that eventually included 150 Female nurses hospitals in Urmia who were working in different departments of the hospital. All participants were selected because of the gender the majority of female and questionnaires been distributed among nurses by the researcher. The criterion login in this study include: have the female gender, the age range of 60 -25 years, to top school diploma, have not any curable disease, and any experience of death of someone close at 6 months. Exclusion criteria were as follows: less than two years work experience and lack of willingness to participate in the study.

Instruments of research

Decision Instrument to measure quality of life questionnaire (SF36) that such scales quality of life. The questionnaire included 36 questions in both the physical and mental and 8 domains that each of these aspects contain various domains such as in physical functioning, physical role, bodily pain, general health, energy and exhilaration, social functioning, emotional role and mental health. Reliability and validity was done of the Persian translation quality of life questionnaire (SF36)⁶. Other instrument Enrich marital satisfaction questionnaire short form that has been designed by Olson⁷, that is used to evaluate the potentially problem fields of and identify fields of power full load and marital relations. Enrich questionnaire form has three long, medium and short that is used in this study to evaluate marital satisfaction, Enrich inventory short form. The short form questionnaire has 47 questions. The reported an alpha coefficient of reliability in the short form 90%⁸. It has done

extensive research in the field of reliability and validity, So that the test-retest reliability of the reported test and re-test between 65% to 94% and the ability to distinguish and classification 90%. The other measuring instrument and data collection in this study job burnout questionnaire. This questionnaire been prepared by Maslach and Jackson⁹ and is one of 22 component that evaluates three dimensions of job burnout in emotional exhaustion, depersonalization and lack of personal accomplishment. Reliability of the questionnaire by Maslach and Jackson and calculated by Cronbach's alpha that report is emotional exhaustion ($\alpha = 0.9$), depersonalization ($\alpha = 0.79$) and lack of personal accomplishment ($\alpha = 0.71$). Also Maslach and Jackson they reported that have a high reliability of the questionnaire. Test-retest coefficients for short periods of up to one month 6% to 8%. Reliability and validity of the questionnaire was approved by the Philian for the first time in Iran that reported test-retest reliability coefficient with 78%.

Ethical approval

The present study was approved by all regional ethics committees in Iran, and a written informed consent was obtained from each individual before the interview.

RESULTS

The results obtained were analyzed of frequency and the frequency distribution of sample in terms of age, education and work experience has been the highest frequency of individuals aged 36-40 years, 27% (equivalent to 41) and the minimum frequency in persons aged 30 years and less than 13.2 percent (20 person) and the highest frequency of BA personnel; 76/8 percent (73 person) and the minimum frequency personnel with MA educated, 21.1 percent (20 person) and the highest frequency of persons experience of 6-10 years, 25.2 percent (38 person) the minimum frequency with working experience of 21 years and more; 6/16 percent (25 person). Levine test results and analysis show that the assumption of equal variances that, in most variables (quality of life, marital satisfaction and burnout) observance is assumption of equal variances and experience different age groups ($P > 0/05$). Among these has

Table 1: Descriptive indexes marital satisfaction, job burnout, quality of life and dimensions

Variables	N	M	D	Variance	Minimum	Maximum
Emotional exhaustion	150	3.9131	1.65630	2.743	.00	6.38
Depersonalization	150	3.5530	1.48072	2.193	.00	7.00
Failure of individual	150	3.4677	1.38958	1.931	.00	6.50
job burnout	150	3.6527	1.42270	2.024	.00	6.23
General Health	150	58.03	20.65281	426.539	25.00	100.00
physical function	150	65.91	13.68748	187.347	25.00	83.33
Role of physical	150	73.00	14.70344	216.191	25.00	100.00
Energy and exhilaration	150	72.22	17.54779	307.925	25.00	100.00
Lack of physical pain	150	72.73	20.34150	413.777	25.00	100.00
Emotional role	150	66.53	29.80894	888.573	25.00	160.00
Mental Health	150	55.57	16.63768	276.812	25.00	85.19
Social function	150	59.20	21.22174	450.362	25.00	100.00
Quality of Life	150	65.68	17.20881	296.143	25.00	97.22
Marital Satisfaction	150	134.93	31.14017	969.710	63.00	215.00

Table 2: Multiple correlation coefficient among marital satisfaction, quality of life, with job burnout scales with regression analysis

Statistical indicators	F	S	MR	R	R2
Quality of Life	190.151	.000 ^d	.918 ^d	.843	.838
Marital Satisfaction	284.527	.000 ^a	.810 ^a	.656	.654

not been verified in aspects, mental health and social functioning assumption of equality of variances in age groups and social functioning scale of different working groups. Variance analysis for different age groups in quality of life, marital satisfaction and job burnout among the different age groups and experience in all aspects, there is a significant difference among the quality of life, marital satisfaction and job burnout Apart from energy ($P > 0/05$) and vitality in different age groups ($P < 0/05$). The results follow up Scheffe's test of significant (quality of life, marital satisfaction and job burnout) among different age groups and experience shows that job burnout and its scale increases emotional exhaustion, depersonalization and lack of the failure of personal success with increasing age female nurses. But, reduced quality of life and its components, general health, physical function, role of physical, existence no physical pain, emotional role, mental health and social functioning and marital satisfaction with increasing age, while female nurses.

The results independent t test groups to compare nurses with various educated in quality of life, marital satisfaction and job burnout, showed that, there was no significant difference among the groups in different aspects of educated, quality of life, marital satisfaction and job burnout.

As the shown in table 1, the research sample is the mean of emotional exhaustion (3/91), depersonalization (3/55), the failure of an individual (3/46) and total job burnout (3/65) and the quality of life and its dimensions, the mean quality of life (65.68) and its components, general health (58.03), physical function (65.91), role of physical (73.00), the energy and exhilaration (72.22), lack of physical pain (72.73), role emotional (66.53), mental health (55.57) and social functioning (59.20) and also the mean of marital satisfaction (134.93).

As can be seen in table 2, in regression ($F=190.151$ and $P < 0/01$) has valid for predicting

the quality of life and the dimensions of job burnout. In other words, have at least one of the predictors (quality of life) the prediction of the rate of 84% for predicting of job burnout. Standard coefficients and non-related quality of life and its dimensions to predict of job burnout shows that the last step of the quality of life, has significant predictors of job burnout general health ($B=-.514$ and $P < 0/01$), energy and exhilaration ($B=.137$ and $P < 0/01$), mental health ($B=-.360$ and $P < 0/01$) and lack of physical pain ($B=-.137$ and $P < 0/01$). As can be seen in table, regression analysis ($F=284.527$ and $P < 0/01$) has valid for prediction of job burnout of the marital satisfaction. In other words, have at least one of the predictive variables (marital satisfaction) predicts of the rate of 65% for prediction of job burnout. Standard coefficients and nonstandard related to marital satisfaction for prediction of job burnout shows that marital satisfaction ($B=-.810$ and $P < 0/01$) has significant predictors of job burnout. The regression analysis ($F=160.437$ and $P < 0/01$) has valid for prediction marital satisfaction through quality of life. In other words, have at least one of the predictors (quality of life) has predictive power for prediction marital satisfaction rate of 77%. function ($B=-.268$ and $P < 0/05$), role physical ($B=.146$ and $P < 0/01$) and quality of life of ($B=.991$ and $P < 0/01$).

DISCUSSION

The results of this study has shown that there is a significant correlation between quality of life of and its components, general health, physical functioning, role physical, energy and vitality, role emotional, lack of physical pain, mental health and social functioning with of job burnout ($P < 0/01$). The among all the sub dimension of quality of life of job burnout has capable to predict a higher level General health, energy and vitality, mental health, and lack of physical pain. In other words, at least one of the predictor variables (quality of life) is to have a predictive power of 84% for predicting of job burnout. There was also a significant correlation between quality of life of and its sub dimension, general health, physical functioning, role physical, role emotional, lack of physical pain, mental health and social functioning and emotional exhaustion ($P < 0/01$). In the final evaluation of the quality of life has capable to predict emotional exhaustion,

General health, energy and exhilaration, and mental health. In other words, at least one of the predictor variables (quality of life) do has been a predictive power of 80% for predicting emotional exhaustion. Also there was a significant relationship in the review quality of life of and its sub dimension, General health, physical functioning, role physical, energy and exhilaration, role emotional, lack of physical pain, mental health and social functioning with depersonalization ($P < 0/01$). Among these has general health and emotional role more significant predictors of depersonalization. On this basis the findings have been presented regression analysis for predicting depersonalization of the sufficient funds quality of life and the scales. In other words has been at least one of the predictors (quality of life) the prediction of the rate of 63% for predicting depersonalization. The results of the study Rafie on a high burn nursing injuries, showed that on the nurses burn injuries in hospitals, showed that, nurses In the depersonalization that is one of the dimensions of job burnout a higher level that is consistent with our results in this study ¹⁰. There was also was a significant relationship between quality of life of and its sub dimension, general health, physical functioning, role physical, energy and exhilaration, role emotional, lack of physical pain, mental health and social functioning of individuals with lack of success ($P < 0/01$). Finally has capable to predict individual lack of success of the quality of life, general health, and lack of physical pain. In other words, at least one of the predictor variables (quality of life) has been prediction of the rate of 78% for prediction of individual lack of success. So in general hypothesis is confirmed. The study results showed that, there was a significant relationship among emotional exhaustion, depersonalization, and lack of success of job burnout marital satisfaction of female nurses ($P < 0/01$). Multiple correlation coefficient has been between the marital satisfaction and emotional exhaustion of funds required for the prediction of marital satisfaction emotional exhaustion. The results of the regression analysis for predicting depersonalization through marital satisfaction also indicate that has been at least one of the predictor variables (marital satisfaction) predict of the rate of 56% for predicting depersonalization. Whatever has been the result of in regression analysis has valid for predicting the lack of success through marital

satisfaction. The prediction of the rate of 59% for predicting the lack of success at least one of has been lack of success predictors (marital satisfaction). Finally the results of the multiple correlation coefficient, regression analysis and standard coefficients and non- standard marital satisfaction for predicting of job burnout showed that, has marital satisfaction ($P < 0/01$) capable to predict total of job burnout and is confirmed our hypothesis¹¹. He writes in his study is supportive of the family and the wife has the most effect on job burnout in critical care nurses. They had reported that the lack of family support is associated with job burnout¹². Evaluate the results of the correlation showed that marital satisfaction and quality of life between the female, there was a significant relationship between the quality of life of and its sub scales, general health, physical functioning, role physical, energy and exhilaration, lack of physical pain, emotional role, mental health and social functioning with marital satisfaction ($P < 0/01$). The regression analysis has been valid for predicting marital satisfaction through the quality of life. In other words, at least one of the predictors (quality of life) had predictive power of 76% for predicting marital satisfaction. But in the last step of the regression analysis physical function ($P < 0/05$), role physical ($P < 0/01$) and quality of life ($P < 0/01$) has been significant predictors of marital satisfaction. According to the reasoning and conclusions this assumption is confirmed that there is a significant relationship between marital satisfaction and quality of life female nurse hospitals in the city of Urmia. The relationship between job satisfaction and quality of life of the study indicated examined that have strong negative feelings of dissatisfaction among nurses included, (Organizational problems in work environment, fees not of proportionality with the skills and expertise, lack of respect and appreciation for the efforts that they lack the social value of nursing, family problems, a lack of consensus with doctors, independence and control of the situation), who is consistent with our hypothesis that there is a significant relationship between marital satisfaction and quality of life¹³. The results showed that, there is a direct relationship between age and job burnout in other words, rises with increasing age job burnout and falls with decreasing age of job burnout. In explaining this, we can say that, may be reduced

due to increasing age, Nurses, physical and mental ability in confront with job problems and therefore become more worn out, the result contrasts with research that has been done before. Implies that mid-life crises increases individual the sensitivity to stress and is effective increasing age and thus increasing the experience of individuals on and reducing burnout perceived it¹⁴. According to study these results are not consistent with findings. The results of the study showed that the among age groups there was a significant relationship with job burnout and 30-39 year age group had the highest proportion of job burnout in the age group more than 40 years¹⁵. But reported that emotional exhaustion in people older than 40 years¹⁶. After reviewing the available literature on marital satisfaction concluded that is strongest predictor of the instability and lack of proof the marital, age at the time marriage¹⁷.

Limitations

These factors could limit the study's generalizability to nurses women in Iran. Since nurses are the subjects of this research hospitals, results obtained is extended only to the population of nurses. Time limit for desired investigations. The other has problems lack of compliance which was conducted by the officials hospitals where the study.

CONCLUSIONS

The results obtained in this study, it seems that nurses in hospitals in Urmia as sample of the nursing staff, quality of life and marital satisfaction levels are relatively low. Therefore idea of corrective is necessary in this regard. Including the appropriate of improving living conditions vocational training and psychological as stress reduction methods, group counseling on how to improve the quality of life and marital satisfaction. Support and supervision, training of nurses in more coordination with other colleagues, patients, physicians, and participation in decision-making which is necessary enabling environment leads to the autonomy of nurses in a way that will make them able to provide services in the most stressful and difficult situations. In general according to research findings it can be concluded that job burnout factors such as and conflict with physicians such as a reference power and associates nurses in hospital the hospital

environment and the lack of supportive sources nursing is a in the profession that could be the resources of power (hospital administrators, doctors and head nurses) and colleagues, increases the probability of reducing the amount marital satisfaction and mental health nurses.

Recommendations

Considering the fact that nurses have an important role to improve community health people and the health care system is also vulnerable to the negative effects of conflict, and that this system is complex and depends on the collaboration of various fields of care for patients, identification and removal of underlying factors, causative and the continuum of emotional reactions, behavioral, psychological and physical arising of stressful of work conditions In the nurses, can be considered

as a health priority, therefore, and due to the stressful situations of nursing jobs and since they nurses are confronted with different stages of mental reactions such as anger and denial and this is the Including the job stressor support colleagues and resources ensure support can be effective in reducing the stress and its effects on family life and health of nurses.

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Conflict of interest

None of the authors had any personal or financial conflicts of interest.

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