

SYNOPSIS

1. TITLE

Burnout Among Healthcare Workers: A Cross-Sectional Analysis of Demographic Determinants

2. INTRODUCTION

Burnout, formally recognized by the World Health Organization in 2019, is a pervasive syndrome stemming from unmanaged chronic workplace stress. It manifests as emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment, particularly pronounced in high-stress professions like healthcare. Globally, healthcare professionals are facing unprecedented levels of stress and burnout. A systematic review in The Lancet in 2021 reported burnout prevalence among physicians ranging from 25% to 60%. The immense pressures on healthcare systems were further intensified by the COVID-19 pandemic, with a 2022 study in the International Journal of Environmental Research and Public Health indicating that 70% of frontline workers experienced moderate to severe burnout symptoms.

3. RESEARCH QUESTION

To investigate the association between burnout and demographic variables among healthcare workers.

4. AIM OF THE STUDY

To assess the prevalence of burnout among healthcare workers and examine its association with selected demographic and occupational variables.

5. OBJECTIVES

Primary Objective: To determine the relationship of burnout among healthcare workers using the Maslach Burnout Inventory (MBI).

Secondary Objectives:

To assess the levels of burnout across its three dimensions: emotional exhaustion, depersonalization, and reduced personal accomplishment.

To examine the association between burnout levels and demographic variables such as age, gender, marital status, and professional role.

To explore the influence of occupational factors (e.g., years of experience, working hours, department) on burnout.

To identify high-risk subgroups among healthcare professionals for targeted intervention.

5. HYPOTHESIS

There is a significant association between burnout levels and at least one demographic or occupational variable among healthcare workers.

6. MATERIAL AND METHODS

Study Design: This will be a cross-sectional, questionnaire-based study.

Study Setting: The research will be conducted within various healthcare institutions and hospitals.

Study Population: The target population includes a diverse group of healthcare workers, encompassing doctors, nurses, technicians, and administrative staff.

Inclusion Criteria:

- Healthcare workers with a minimum of six months of professional experience.
- Willing participants who provide informed consent.

Exclusion Criteria:

- Interns, trainees, or temporary staff.
- Individuals currently undergoing psychiatric treatment for stress or burnout.

Study Tools:

- The Maslach Burnout Inventory (MBI) will be utilized for comprehensive burnout assessment.
- A demographic and occupational questionnaire will also be administered.

Sample Size Calculation: Using Cochran's formula for estimating proportions, with a 95% confidence level and an estimated prevalence (p) of 0.5, and a margin of error (d) of 0.073, the minimum required sample size was calculated as approximately 180. Adjusting for a 10% non-response rate, the final sample size aims for approximately 200 participants.

7. DATA ANALYSIS PLAN

Data will be meticulously entered into Microsoft Excel and subsequently analysed using SPSS Version 26. Descriptive statistics, including frequencies, means, and standard deviations, will be employed for demographic variables and scale scores. For inferential analysis, Pearson's correlation will be used for relationship analysis, t-tests or ANOVA for group comparisons, and regression analysis will be considered if appropriate. A significance level will be set at $p < 0.05$.

8. ETHICAL CONSIDERATIONS

All participants will be politely asked for their informed consent, and during the study, their identities and data confidentiality will be rigorously protected. Participants will not be required to give a reason if they decide to leave the study altogether.

9. IMPLICATIONS OF RESEARCH

This study seeks to enhance the understanding of healthcare worker well-being, highlighting the essential requirement for supportive and equitable work settings. The generated insights are expected to empower HR and hospital administrators in developing and implementing strategic interventions designed to mitigate burnout and cultivate a healthier, more sustainable workforce.