

# **THE INFLUENCE OF BURNOUT AND WORK SATISFACTION TO TURNOVER INTENTION AMONG CONTRACT NURSES AT BANDUNG CITY GENERAL HOSPITAL, INDONESIA**

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## **Abstract**

*One of several problems in nursing management is a high turnover rate which may have several negative impacts on the financial aspect and service quality. At Bandung City General Hospital (BCGH), there was an increase in contract nurses' turnover rate. Out of many factors contributing to turnover, this study aims to analyze the magnitude of the influences of burnout and work satisfaction on contract nurses' turnover intention. The method used is quantitative analytic study with cross-sectional design. The study was done by distributing questionnaires to 101 respondents at BCGH during October – December 2017 and the analysis method was Partial Least Square-Structural Equation Modelling (PLS-SEM). This study finds that burnout alone has a weak positive and significant influence on turnover intention ( $R^2$  0.237,  $t$ -value 5.097); while work satisfaction has no significant influence on turnover intention ( $R^2$  0.017,  $t$ -value 1.294). Simultaneously, both burnout and work satisfaction have weak significant influence of 31.7% on turnover intention ( $R^2$  0.317,  $F$ -value 3.089). The results support previous*

*studies which state that burnout and work satisfaction have influences on nurse turnover intention. The simultaneous influence is weak but needs to be taken seriously as increasing burnout and decreasing work satisfaction among nurses will lead to higher turnover.*

*Keywords: BCGH, burnout, nurses, work satisfaction, turnover intention*

## **INTRODUCTION**

A hospital is one of several institutions which provide health services to the public. One hospital consists of several resources from human, technology, and financial; which forces the hospital's manager to be highly capable in managing the varied resources in order to give a good-quality health service (Muninjaya, 2015). One of the most human resources in hospitals are nurses. Nurses play an important role in health services because nurses take up the largest proportion of health personnel and more than half of patients' responsibilities lies under nurse profession (Bagheri et al. 2012, as cited in Heidarzadeh et al. 2016).

One of several problems in nursing management is turnover or nurses leaving their jobs (Gillies, 1994). Nurses' turnover leads to several negative impacts, such as economic impacts (from increased separation and recruitment costs), nursing care outcomes, and patient outcomes (Hayes et al. 2012). Turnover is preceded by turnover intention (Flinkman et al. 2010, Takase 2010); and turnover intention is a good indicator for the actual turnover. A study by Flinkman et al (2010) on several researches across the countries show that the turnover intention rate varies from 4 to 54%; while studies in Indonesia found the intention rate to be varied from 10 to 57% (Langitan 2010, Alfiyah 2013).

Studies show that nurses have higher burnout and dissatisfaction level than other health personnel (Aiken et al. 2001, Su et al. 2009), and these conditions have been shown to be predictors of turnover intention (Van Bogaert et al. 2010, Yurumezoglu et al. 2016). A study by Aiken (2012) on nurses in 12 countries show that most of the countries have high burnout level to be more than a third of their nurses; while in Indonesia, there is still little study on burnout and the measurement tools used are still varied. In Indonesia, studies on the association of burnout and turnover intention are still contradicting with each other, that some studies found significant associations between two variables (Antara et al. 2013, Siswadi 2016), while another showed that there was no significant association between them (Iman 2015). Regarding work satisfaction, a study by Aiken et al. (2011) shows that the work dissatisfaction among nurse is high in some countries with proportion of higher than 50%; while in Indonesia, some studies also reveal a high number of work dissatisfaction of almost 40% (Langitan 2010, Tahsinia

2013). Work satisfaction has been known to have a significant negative influence on turnover intention (Longo 2007, Raddaha et al. 2012, Mardiana et al. 2014, Rentauli 2015).

Bandung City General Hospital (BCGH) is the only general public hospital owned by the government of Bandung city. With the higher demands of high quality service from patients and increasing hospital competition, it is necessary for BCGH to have adequate nursing staffs with better service quality; however, on the other hand, BCGH has has turnover rate each year with all leaving nurses are the contract nurses, resulting in several unreached minimum hospital standards. From this phenomenon, then it is necessary to analyze the factors which cause contract nurses to have intention of leaving. Up to now, the influences of burnout and work satisfaction on turnover intention among nurses at BCGH has not yet concluded as there has been no previous research on these issues.

### **Purpose of Research**

The purpose of this research is to investigate the influences of burnout and work satisfaction on the contract nurses' turnover intention at BCGH, partially and simultaneously.

## **LITERATURE REVIEW**

### **Theories of Turnover**

Turnover happens when workers separate with their organizations (Mathis et al. 2010). Turnover is measured by dividing the number of employees leaving the organization in a year with the number of all employees at midyear (Mathis et al. 2010). Turnover begins with turnover intention, defined as a thought or desire to leave (Abelson, 1987). Turnover intention is relatively quicker and more predictable as compared to the turnover behavior and according to Hom et al. (1992), turnover intention is a good indicator of turnover in an organization. Hom (1992) indicates that turnover intention and actual turnover have a significant positive association (mean  $r$  0.325,  $p$ -value  $<0.05$ ). Therefore, it is important for a health service provider to examine the number of turnover intention within organizations to reduce the actual turnover rate and to prevent the negative impacts that may occur.

Turnover intention can be caused by multiple factors, including organizational factors, work-related factors, employee factors, and external factors (Takase 2010, Hayes et al. 2012). Organizational factors comprise organizational characteristics (such as hospital status or profitability), organizational climate or culture, and interpersonal relations within the organization (such as the relationship between colleagues in the hospital). Work-related factors include several factors which come from the job, including role-stress or conflict and ambiguity from the job, high workload, hazardous working condition, or financial rewards. Turnover may also be

caused by factors coming from the employee himself, such as the demographic factors, including gender, educational background, and age; as well as the employee's attitude. External factors, including personal conflict or opportunity from the external job market, can also cause turnover.

Another theory by Mcbey and Kawakowsky (2001) states that there are four broad categories of turnover's influences:

1. Push or work-related factors, which push the worker to voluntarily separate with the organization. These factors include work satisfaction, satisfaction with salary, and performance-reward contingencies.
2. Pull or external factors, which pull the worker out of his current employment. These external factors are personal and household income, family commitment, alternative works, and other external demands
3. Individual characteristics, such as age, educational background, length of work, and marital status. Age, tenure, and marital status are negatively associated with turnover while education has a positive association that an employee with higher educational status might be more open with other work opportunity but other studies have also shown reverse associations.
4. Performance factors, including subjective performance, objective performance, and reasons for joining the organization. Employees with better performance have lower intention to leave than employees with lower performance.

A first model that describes turnover in management was developed by Mobley (1977). The model explains that in order to achieve the intention to move, the following stages are as follows:

1. Evaluating his/her work;
2. Experiencing job dissatisfaction;
3. Thinking of quitting;
4. Evaluating the utility in finding other work and costs that will arise from the quitting;
5. Having the intention to look for alternative job (if the possibility of looking for high alternative and low cost of the work);
6. Looking for alternative job;
7. Evaluating the existing work alternative;
8. Comparing job alternatives to current jobs; and
9. Having an intention to move. The intention will be followed by the actual discharge of employees from an organization if it is supported by an impulsive act of exit or further decision-making process rationally considered by the employee.

## Theories of Burnout

Burnout can be defined as depletion of physical and mental resources due to excessive efforts in achieving unrealistic work-related goals (Dessler, 2003). According to Maslach, burnout can be a collection of several dimensions such as emotional exhaustion, depersonalization, and decreased personal accomplishment (Maslach et al. 2001):

1. Emotional exhaustion is defined as the feeling that someone has or suffer from excessive burden from his/her job. This aspect is the most important aspect in burnout and the most frequently reported. In addition to emotional aspect, this burnout dimension can also mean physical and mental exhaustion.
2. Depersonalization means that there is an attempt to distance oneself from the service recipients. A person with depersonalization is sometimes an introvert because that person always tries to separate himself from others or outsiders.
3. Decreased personal accomplishment is a failure in solving problems related to work. This decrease in achievement is related to the lack of individual capacity and success related to their work.

According to Maslach et al (2001), the contributing factors of burnout may consist of situational factors and individual factors. The situational factors include job characteristics (such as workload, role conflict, or role ambiguity), occupational characteristics (such as emotional stress from work), and organizational characteristics (such as organizational processes or structures that may shape employees' emotional and cognitive relationship with their works). Individual factors also play an important role in the occurrence of burnout, such as demographic characteristics (such as age, sex, or marital status), personality characteristics, and job attitudes (Maslach et al, 2001). Alexander (2009) summarizes various burnout's risk factors into three categories:

Table 1. Factors causing burnout (Alexander, 2009)

| <b>Dimension</b>      | <b>Risk Factors</b>  |
|-----------------------|--|
| Work environment      | Excessive workload; Lack of control; Lack of appreciation to employees; Absence of community; Injustice; Value conflict  |
| Demographic variables | Too young; Early in career; Have no life partner or children; Higher level of education  |
| Personality traits    | Lack of self-esteem and confidence; No acknowledgment of personal limits; Higher need for approval; Overachieving; Intolerance; Too careful; Perfectionist, etc. |

Burnout has been associated with turnover intention because some studies have proven a significant relationship between the two variables. A study by Estryng-Berhar et al (2007) on nurses in five countries in Europe shows that more nurses with higher burnout scores consider to be leaving their jobs more often than those with lower scores, while another study by Leiter et al. (2009) shows that the three dimensions of burnout are associated with the turnover intention, with the depersonalization dimension has the biggest proportion. Aiken et al. (2001) found out that nurses with burnout will leave the organizations within 12 months.

In Indonesia, the results of research on burnout and the desire to switch job are still conflicting between institutions. A study at a national referral hospital in Jakarta shows that burnout did not have a direct effect on turnover intention (Iman, 2015), while another study by Siswadi (2016) on nurses at a private hospital in Medan shows that all three dimensions of burnout are positively associated with turnover intention, with depersonalization dimension being the only dimension with the significant relationship (p-value 0.000). Another study by Antara et al. (2013) shows similar results with Siswadi (2016) in which the three dimensions of burnout have positive effects on turnover intention of contract nurses, but only emotional exhaustion and decreased personal accomplishment have significant values.

### **Theories of Work Satisfaction**

Satisfaction has several definitions, one of which is the definition according to Kotler et al. (2012) which is a person's feeling that reflects on the judgment of something after comparing it against his expectations. Work satisfaction itself is defined as a positive feeling or emotional state after evaluating one's working experiences (Mathis et al. 2010). If a worker has a feeling that his expectations are not met, then he would feel dissatisfied with his job. Adams et al. (2000) in his study on work satisfaction states that work satisfaction may be a positive feeling toward the whole job or its components.

There are several theories related to work satisfaction. Worell (2004) in his dissertation states that there are three main conceptual frameworks in describing work satisfaction, namely content theory, process theory, and situational theory. Content theory states that work satisfaction occurs when someone feels that his job can satisfy his needs for grow and self-actualization. This relates to the theory by Maslow (1954, in Worell, 2004) which states that every human has five levels of needs, from the most basic ones such as water and food, to higher levels such as recognition from his surroundings and self-actualization. Work satisfaction will then occur if the work can help fulfill one's need to the highest level.

Process theory explains that work satisfaction happens if the job can match someone's expectations and values. Worell (2004) concludes from various theories that work satisfaction

occurs when the input (such as experience, effort, and ability) and output (such as salary and recognition) that exist in the work environment are thought to be balanced and fair. The third theory, situational theory, is based on the theory by Quarstein et al (1992, in Worell 2004) which states that work satisfaction is determined by situational characteristic factor that have been considered by the employee before starting to work (such as pay, supervision, promotion, and working condition) and situational occurrence factor that exists after the employee starts working.

Another theory related to work satisfaction is Two-Factor Theory by Herzberg (1959, in Worell 2004), which states that two factors affecting work satisfaction are hygiene and motivation factors. Hygiene factors are external factors that highly determine job dissatisfaction (such as pay, working conditions, and interpersonal relationships), while motivation factors or motivators are internal factors that highly determine work satisfaction (such as achievement, recognition, and opportunities to grow). According to Luthans (2011), work satisfaction has five main dimensions, which are:

1. The work itself, that is how good and interesting a job for employees. This can be seen from the job design, job complexity, responsibilities, and work characteristics.
2. Pay, or financial remuneration received by employees. A good pay is the one which is considered to be fair and in accordance with the contribution an employee gives to his organization.
3. Promotions, or opportunities for advancement within the organization. A good working opportunities to grow intellectually and can broaden employees' skills is very important.
4. Supervision, in which the ability of a supervisor in providing technical assistance and behavioral support. Supervisors who include their sub-ordinates in decision-making are considered better than those who do not.
5. Co-workers, is how well co-workers in working proficiently and socially supportive.

Work satisfaction of nurses have various contributing factors. According to Hayes et al. (2010), the contributing factors to work satisfaction can be classified into three main factors. The first factor is intra-personal factor (characteristics of each nurse), interpersonal factor (related to the relationship between nurses and others), and extra-personal factor (other than nurse's direct interactions with others, influenced by policies). Intra-personal factors include age factors, educational background, individual coping strategies, and generation differences. Nurses with higher education level tend to have higher autonomy in working due to better critical-thinking

skills, while individual coping strategies are related because they have a strong relationship with the involvement in working and positive thinking. Interpersonal factors include autonomy, ability to provide patient care directly, leadership, professionalism, and professional relationship with colleagues; while extra-personal factors include payments, institutional and financial policies, and repetitive work.

The existing literature shows that work satisfaction is inversely related to turnover intention. A study conducted by Raddaha et al. (2012) on nurses from various institutions in Jordan stated that work satisfaction has a negative relationship with nurses' intention to leave in the upcoming year ( $p$ -value 0.001); and it is found that younger nurses and those who work in educational hospitals have greater intention. Another study by Longo (2007) on nurses in Florida, USA, shows greater intention to leave within the organization among nurses with higher work satisfaction ( $r$  0.423,  $p$ -value  $<0.001$ ).

In Indonesia, a study by Rentauli (2015) on nurses at a private hospital in Bandung shows that work satisfaction significantly affects the turnover intention. Nurses with higher satisfaction have a smaller chance of leaving their workplace. Rentauli (2015) advises health managers to pay attention to their nurses' satisfaction through enhancing the quality of leaders, improving benefits and rewards for nurses, providing opportunities to improve skills, and providing clear career paths. The results of this study are similar to other studies by Mardiana et al (2014) which stated that nurses with higher work satisfaction tend to leave within their workplace. From this study, it is found that higher dissatisfaction is found in promotion dimension due to the lack of structural positions for nurses, followed by dissatisfaction within pay dimension due to the number of nurses who have married and have worked in other places before.

## RESEARCH METHOD

This study is a quantitative analytical study with cross-sectional design. The study was conducted at BCGH, and the data collection method was done between October and November 2017 while the data analysis was performed on December 2017. This study involved respondents from 11 work units at BCGH with total population sampling technique. The inclusion criteria were functional nurses with contracts and had worked for 10 months at BCGH. This study uses a structured questionnaire to collect primary data on burnout, work satisfaction, and turnover intention levels of the respondents. The questionnaires used several statements with 5-Point Likert Scale responses; statements on burnout was modified from *Maslach Burnout Inventory* which measured three dimensions of burnout (Maslach et al. 2001) while statements on turnover intention was modified from *Michigan Organizational Assessment Package* (ISR,



1975). The questionnaire had been previously tested in the preliminary study at Cililin Hospital with all indicators had been shown to be valid and reliabel with validity coefficients above 0.3 and reliability coefficients above 0.7.The data obtained was then analyzed in computerization manners.

## RESULTS

Of the 161 questionnaires distributed, the researcher only received 101 completed questionnaires from respondents who worked in various units in RSUD Bandung. Most respondents (over 50%) are women, married, and are in the 25 to 29-year age range. For more details, the characteristics of respondents can be seen in the Table 2.

From the analysis of the average scores of burnout, work satisfaction, and turnover intention, it is found that the respondents have a low level of burnout and a moderate level of work satisfaction and turnover intention (Table 3).

Table 2. Individual characteristics of the respondents (n = 101)

| Characteristics                         | Number of Respondents (%) |
|---|---------------------------|
| <i>Age (year)</i>                       |                           |
| 20 - 24                                 | 11 (10.89)                |
| 25 - 29                                 | 69 (68.32)                |
| 30 - 34                                 | 16 (15.84)                |
| 35 - 39                                 | 5 (4.95)                  |
| <i>Sex</i>                              |                           |
| Male                                    | 31 (30.69)                |
| Female                                  | 70 (69.3)                 |
| <i>Marital status</i>                   |                           |
| Married                                 | 82 (81.18)                |
| Not married                             | 19 (18.81)                |
| <i>Length of work as a nurse (year)</i> |                           |
| <5                                      | 75 (74.26)                |
| 6 – 10                                  | 19 (18.81)                |
| 11 - 15                                 | 6 (5.93)                  |
| 16 - 20                                 | 1 (1)                     |
| <i>Length of work at BCGH (year)</i>    |                           |
| 1 – 5                                   | 93 (92.08)                |
| 6 - 10                                  | 7 (6.92)                  |
| 11 - 15                                 | 1 (1)                     |

Table 3. The average scores and levels of burnout, work satisfaction, and turnover intention of the respondents

| Variable                                 | Average Score | Category |
|--|---------------|----------|
| Burnout                                  | 1.98          | Low      |
| <i>Emotional exhaustion</i>              | 2.4           | Low      |
| <i>Depersonalization</i>                 | 1.41          | Very low |
| <i>Decreased personal accomplishment</i> | 2.13          | Low      |
| Work satisfaction                        | 2.9           | Moderate |
| Turnover intention                       | 2.85          | Moderate |

This study found that most of the statements in the questionnaires were able to represent the burnout, work satisfaction, and turnover intention, except two statements “Feeling of treating recipients as if they were impersonal objects” and “Incapability to deal with recipients’ problems effectively which were not reliable to reflect burnout. After the unreliable statements were excluded from further analysis, it was found that burnout was largely explained by all three dimensions, emotional exhaustion, depersonalization, and decreased personal accomplishment, with depersonalization had the biggest influence (82.1%). Work satisfaction was also reflected well with its five indicators, which are satisfaction of the work itself, pay, promotion, supervision, and co-workers.

As illustrated in Figure 1, it can be seen that burnout and work satisfaction are the exogenous factors of turnover intention, which acts as the endogenous factor. Burnout partially has low influence of 23.7% and work satisfaction partially has low influence of 1.7%; however, simultaneously, burnout and work satisfaction have influence of 31.7% on turnover intention and the rest is explained by unknown external factors.

The magnitude of influence of burnout on turnover intention is considered significant with a t-value of 5.097, but the influence of work satisfaction is considered not satisfaction because of the small t-value. Nevertheless, burnout and work satisfaction together have a significant influence on turnover intention with f-value of 22.742. For more details, the results of hypothesis testing can be seen in table 4 and 5.

Table 4. The result of partial hypothesis testing

| Path  | Original Sample | t-value | H <sub>0</sub> | Result          |
|---|-----------------|---------|----------------|-----------------|
| Burnout (X1) to turnover intention(Y)           | 0.487           | 5.097   | Denied         | Significant     |
| Work satisfaction (X2) to turnover intention(Y) | -0.132          | 1.294   | Accepted       | Not significant |

Table 5. The result of simultaneous hypothesis testing

| Path   | R2    | f-value | H <sub>0</sub> | Result      |
|--|-------|---------|----------------|-------------|
| Burnout (X1) and work satisfaction (X2) to turnover intention(Y) | 0.317 | 22.742  | Accepted       | Significant |

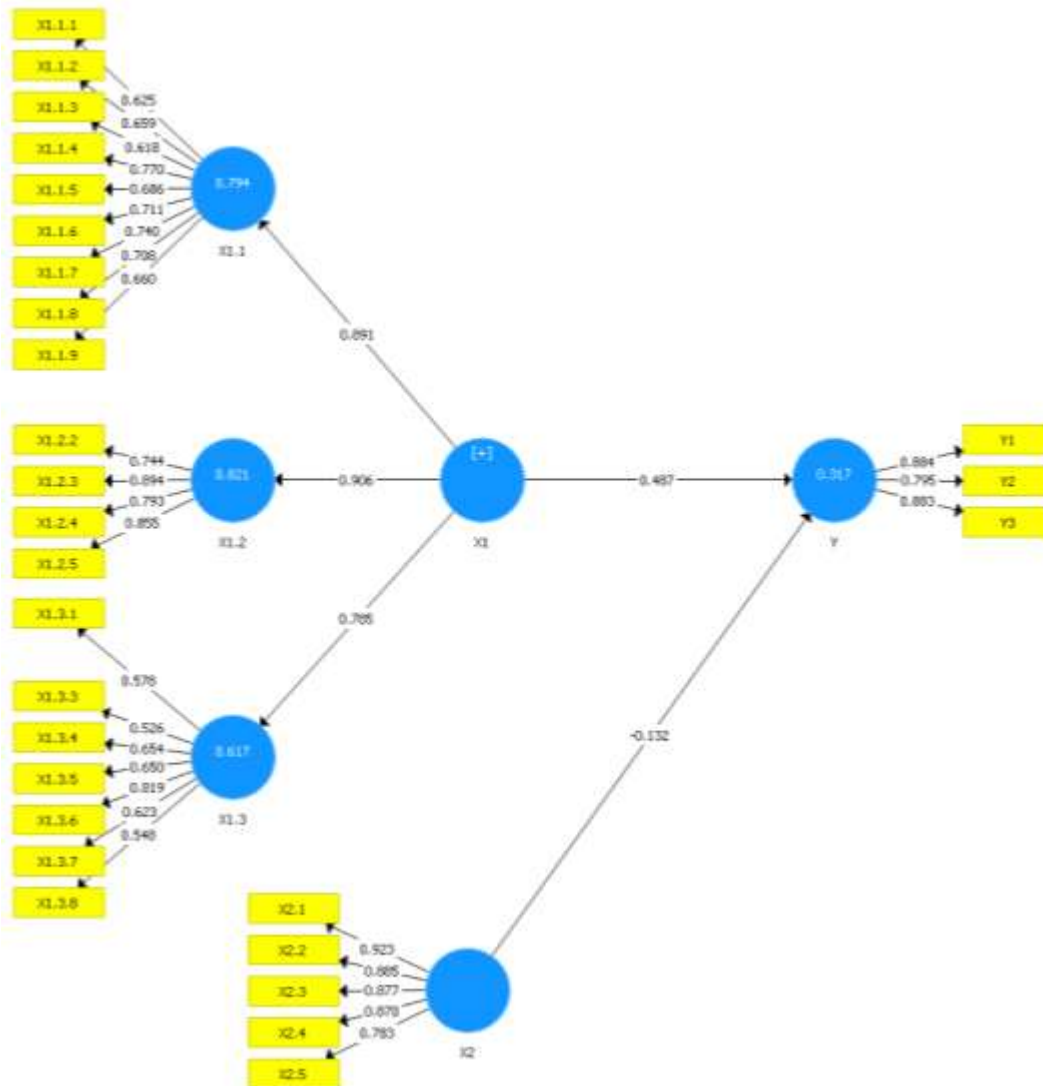


Figure 1. The magnitude of influences of exogenous factors to the endogenous factor

**DISCUSSION**

From the results of this study, it was found that the level of turnover intention of the respondents is moderate, and this result is higher than the turnover intention of nurses at a referral hospital in Jakarta (Iman, 2010); however, it is lower than the results of two other studies which show high intention of leaving (Muliana 2011, Rentauli 2015). The differences in results may be due to different methods and analysis techniques, and up to now, there has been no standardized

instrument to measure nurses' turnover intention. Even though this study did not analyze how respondents' characteristics are associated with turnover intention, differences in characteristics among studies may influence the discrepancies in turnover intention rate. A theory by McBey and Kawakosky (2001) states that individual characteristic is one of many factors influencing turnover, and it is assumed that new graduated nurses who just accepted jobs in BCGH will resist their intention to leave due to the tight competition of nursing personnel in Bandung city. More studies are needed to analyze whether nurse characteristics influence the nurses' turnover intention at BCGH.

The presence of significant positive influence of burnout on turnover intention supports previous studies by Estryn-Béhar et al. (2007) and Aiken et al. (2001) which show that burnout influence nurses' intention to leave the organization. Related to the theory by McBey and Kawakosky (2001) about four categories of turnover factors, burnout can be categorized as push factors which push nurses to voluntarily leave. If a nurse suffers from work fatigue, then he will begin to consider leaving his job and start looking for job alternatives. Specifically on the dimensions, the presence of influences of all dimensions show the importance of paying attention to all dimensions, not only the emotional exhaustion, but also the presence of depersonalization and reduced accomplishment of BCGH's nurses. This result can also be used as basis in making standardized instruments in measuring burnout in the future.

Regarding work satisfaction, its insignificant influence on turnover intention does not support the turnover theory by Mobley (1977) which states that turnover intention begins with the dissatisfaction among workers, which makes them looking for work alternatives; and the result is also not in accordance with the theory by McBey and Kawakowsky (2001) in which the work dissatisfaction is classified as the push factor for turnover. This may be due to the moderate level of work satisfaction among respondents and there are other external factors that have bigger influences in keeping the nurses from leaving. Hayes et al. (2010) stated that work satisfaction may be influenced by various factors including intrapersonal, inter-personal, and extra personal factors. BCGH is expected to be able to identify any problems within nurse relationship with other health personnel and any policy that may trigger work dissatisfaction. Moreover, even though that the five indicators are shown to be good indicators of work satisfaction, it is assumed that there are other aspects of work satisfaction that can influence respondent's turnover intention.

Nevertheless, simultaneously, burnout and work satisfaction have significant influence of 31.8% (low category), thus there are other (68.3%) external aspects which are not included in this study. The low influence may be due to the variation of respondents' characteristics, subjectivity in filling out the questionnaires, and other unknown factors. Even though there has

been no similar study that analyzes the direct influence of burnout and work satisfaction to turnover intention among nurses, this result is in accordance to another study by Yurumezoglu and Kocaman (2016) which found that out of many factors, emotional exhaustion and work dissatisfaction are main predictors for nurses' intentions in leaving their organization and moreover, professions. Yurumezoglu and Kocaman (2016) stated that nurses with high dissatisfaction have intention two times higher than the others. This result shows the importance of these two factors in nursing managements and it is expected to put more attention on these factors to lower the turnover rates. Nurses with burnout and work dissatisfaction will start looking for job alternatives and thinking about leaving (Mobley 1977).

### **LIMITATIONS AND FUTURE RESEARCH**

The results of this study need to be generalized carefully in other hospitals due to the low variability of respondents' characteristics and sample size restricted to BCGH. In the future, more studies are needed to have better results by involving more respondents and increasing the data variability by having more respondents with different work status, work units, and individual characteristics; moreover, more indicators or work satisfaction should also be included to have a deeper understanding of turnover intention of nurses at BCGH. More studies with more respondents from different hospitals can also give more generalization ability of the results, not only limited to BCGH.

### **CONCLUSIONS**

1. Burnout partially has a significant weak influence of 23.7% on the turnover intention of the contract nurses at BCGH, which means that higher burnout level leads to higher turnover intention.
2. Partially, work satisfaction does not significantly influence the turnover intention of the contract nurses at BCGH.
3. Simultaneously, burnout and work satisfaction give a significant weak influence of 31.7% on the turnover intention of the contract nurses at BCGH.

### **SUGGESTIONS**

The positive influence of burnout on turnover intention should be used as a basis in making policies related to burnout prevention among nurses. BCGH managers need to reduce the burnout level of contract nurses, as the largest personnel at BCGH, in order to reduce turnover rate in the future thus reducing the risk of decreased quality of hospital service. Several actions or policies that can be taken by the managers are active identification of burnout among nurses

and have precautions such as improving interpersonal relationships among health personnels, modifying job design, and improving personnel policies as well as personnel's welfare. Even though there is no significant negative influence of work satisfaction to turnover intention, it is still hoped that this study can generate leverage on the improvement of nursing management in the future. More related studies are needed by using different techniques and including more variables as it is found that more external factors other than burnout and work satisfaction that contribute to the turnover intention.

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