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BURNOUT AS A SELECTED ASPECT AFFECTING THE WORK PERFORMANCE OF A SOCIAL WORKER

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Abstract. The aim of the empirical study is to identify the symptoms and the preventive measures of social workers' burnout, according to correlations of age, level of education, professional experience, length and the site of occupation.

Design study. The study was carried out (from February to May 2016) on 49 respondents, social workers, by deliberate choice of typology: former colleagues currently working in NGOs of Košice and Prešov regions, with who we had participated in various projects providing general-utility services. The Inventory of Burnout Symptom by T. and J. Tošner was used for processing the collected data. The completion of this study is the correct implementation of innovative advanced technologies forming a part of the culture of the organization with clearly named functions and duties of the individual members of the working team.

Keywords: burnout, social worker, work performance, prevention.

1. INTRODUCTION

Methodological analysis of the philosophical understanding of the essence of social activity at the level of the individual (person, subject of the activity), special (activity, social understanding of the reality) and general (world, society, social and cultural experience) enabled O. Budnyk to reveal multidimensionality of the concept and identification of isomorphism of its constituent as an integrated system of human reality. In the process of social activity the formation and development of a human as a personality [1]. Simultaneously the risk of burnout is common for social worker.

Despite the media proclamations attention to burnout is insufficient. Despite the clear symptoms that burnout can be diagnosed, many individuals are treated for other illnesses and burnout is underestimated. Subsequently, the complete collapse of the body, threat of clients, relatives and social workers themselves occurs.

In terms of burnout it is important for social workers to be aware of the ethical responsibilities towards themselves and the consequences of such a failure. In the case of recurring problems and symptoms it is essential to address them urgently and seek professional help. Early diagnosis of burnout symptoms is very essential. It also depends on social workers – the helpers, their superiors and the entire organizations, what knowledge of burnout they have. It is important to prevent the occurrence of the burnout and effectively prevent it [5].

Empirical research of the phenomenon began to rise in the early eighties. The research conducted in MEDLINE has proven that from the beginning until the second half of the eighties (particularly in the years from 1982 to 1987) 207 psycho-medical-based studies were created, whereas in the seventies and then in the nineties, there were registered only 5-10 studies per year [4]. The authors also state that at present there are more than five thousand publications on this topic in the English language.

Dimunová et al [2] conducted a research titled "Burnout syndrome of social workers in the Košice region in 2012". The main research objective was to determine whether age, education and length of experience have any effect on the incidence of burnout among 322 social workers of Office of Labour, Social Affairs and Family in the Košice regions who have been employed in the OLSAF workplaces in Košice, Spišská Nová Ves, Rožňava, Michalovce and Trebišov. The authors of the survey chose a standard questionnaire used by Maslach Burnout Inventory - MBI to meet the stated objective of the research. By gender the surveyed sample consisted of 233 women (76.30%) and 89 men (27.70%). The average age of respondents was 40.71 ± 09.15 while the margin was 19-58 years. Since the collection of data took place in several places of OLSAF as a result of research the authors also present file distribution by geographical segmentation. The first examined variable was the age of the respondents. The authors of the survey express the view that social workers with secondary education have higher rate of burnout in the subscale of emotional exhaustion than social workers with university education. A statistically significant relationship between educational attainments of respondents and burnout has not been demonstrated in the subscales of depersonalization and personal satisfaction. Another variable of the research was the length of the professional experience at the OLSAF. The results of the study group indicate that there is a higher rate of burnout in depersonalization with employees who have a higher length of professional experience compared to younger employees. In the subscales of emotional exhaustion and personal satisfaction no statistically significant relationship has been demonstrated between the length of professional experience and burnout of the employees. An effect of age on the incidence of burnout in the subscale of emotional burnout was confirmed within the incidence of burnout among social workers of OLSAF.

As the authors report, educational attainment could have an impact on the incidence of burnout. This assumption was statistically confirmed. In the study group the social workers with secondary education had higher rates of burnout in emotional exhaustion subscale than the social workers with university education. The length of professional experience is another predictor of the incidence of burnout among social workers. In the study group was statistically confirmed the incidence of burnout in depersonalization, with increasing duration of professional experience.

2. METHODS

The Inventory of Burnout Symptom by T. and J. Tošner was used for processing the collected data.

We have set the following hypotheses by which we can deeply think about research problems and to reflect on what data and information we will obtain and how we will process them.

Hypothesis 1: The longer the professional experience of social workers, the higher the risk of burnout.

Hypothesis 2: The higher the age of social workers, the higher the likelihood of burnout.

Hypothesis 3: If the place of work is a city, the risk of burnout is higher.

Indicators: number of respondents, length of professional experience, prevention methods, place of work.

Dependent variables: for signs of burnout in emotional, social, physical and intellectual level.

Independent variables: age, length of professional experience, place of work, level of education.

The questionnaire by Tošner, Tošnerová [8] contains 24 questions that are divided into four levels: intellectual, emotional, physical and social. Each of the levels contains six questions. Questions are rated from 0 to 4 points, that the subscriber mark on a five-point scale - never (0 points), rarely (1 point),

sometimes (2 points), often (3 points) and always (4 points). In the survey the respondent expresses the rate of agreement or disagreement with the issue in borders (from since to never).

Tošner, Tošnerová [8] divide 24 questions into different levels as follows:

The rational level contains numbers: 1, 5, 9, 13, 17, 21.

The emotional level contains numbers: 2, 6, 10, 14, 18, 22.

Items numbered 3, 7, 11, 15, 19, 23 belong to **the physical level** and the items numbered 4, 8, 12, 16, 20 and 24 belong to the group of **the social level**.

We performed the evaluation of symptoms of burnout using the table below, where each item of the questionnaire was filled with the number of points obtained by the participant while completing the questionnaire. Then we counted the points in each of the four levels. Based on the values obtained in the different levels, we created an individual stress profile of an individual, where 24 is the maximum value of points in a level, the minimum score is 0.

Rational level		Emotional level		Physical level		Social level	
Item Nr.	Points	Item Nr.	Points	Item Nr.	Points	Item Nr.	Points
1.		2.		3.		4.	
5.		6.		7.		8.	
9.		10.		11.		12.	
13.		14.		15.		16.	
17.		18.		19.		20.	
21.		22.		23.		24.	

Tab. Method for evaluating The Inventory of Burnout Symptom.

Intellectual level + emotional level + physical level + social level Total = points

We get the information about the overall level of susceptibility to stress and burnout with the sum of points from all four levels. The maximum value of the total sum is 96 points, the minimum is 0 points. Initially we processed the results of the inventory of burnout symptoms for each respondent individually and then for the entire research sample of social workers. In the second part of the research based on the results of the whole research sample we realized processing of the data by four selected aspects on the basis of established hypotheses (age, level of education, place of work, length of professional experience in the social sphere).

The aim of the empirical study is to identify the symptoms and preventive measures of burnout of social workers, according to correlations of age, level of education, length of professional experience and place of work.

2.1. THE RESULTS

Empirical sample consisted of 49 respondents, social workers, working in NGOs in Košice and Prešov region. The research results are processed into tables.

Serial number of the respondent	Intellectual level	Emotional level	Physical level	Social level	Total (maximum 96 points)
1	1	4	3	1	9
2	1	2	5	2	10
3	6	1	0	4	11
4	3	4	5	4	16
5	1	9	3	5	18
6	5	5	4	5	19
7	5	5	9	0	19
8	6	5	6	2	19

9	6	7	4	3	20
10	7	5	4	4	20
11	4	6	8	2	20
12	4	6	8	2	20
13	6	7	5	3	21
14	6	7	5	3	21
15	7	4	7	3	21
16	5	5	8	3	21
17	5	8	5	4	22
18	7	3	6	7	23
19	11	3	6	3	23
20	6	6	6	6	24
21	7	5	4	8	24
22	8	6	7	3	24
23	7	6	13	0	26
24	6	8	7	5	26
25	8	8	7	3	26

Tab. 1. Totals degree of burnout susceptibility by responses of individual respondents from the lowest to the highest score.

According to the data shown in Tab. 1, it is arguable that no respondent reaches maximum points in any of the four levels (maximum 24 points in one level). However, respondents with numbers 45-49 have shown high susceptibility to burnout in the emotional, physical and social terms. It is important that we indicate that the highest value reached was 77 points and the lowest was 9 points. In both cases it was one respondent.

Response options with the number of repetitions for all respondents					
Question number in the inventory	always	often	sometimes	rarely	never
1.	0	7	24	14	4
2.	1	8	19	17	4
3.	1	17	22	8	1
4.	1	4	15	17	12
5.	0	10	12	18	9
6.	0	5	10	23	11
7.	1	8	11	21	8
8.	0	6	3	13	27
9.	0	1	5	10	33
10.	2	6	16	16	9
11.	1	6	8	21	13
12.	0	6	9	23	11
13.	3	13	9	16	8
14.	2	8	14	21	4
15.	2	12	5	28	2
16.	1	5	17	18	8
17.	2	6	16	15	10
18.	7	3	19	14	6
19.	1	6	12	19	11
20.	1	4	3	17	24
21.	2	3	14	19	11

22.	0	7	3	13	26
23.	2	6	9	18	14
24.	0	6	8	11	24

Tab.2. Frequency of responses in individual issues and individual response options.

Each issue offers five possible answers. As we see in our table the least answers were given to the answers always and often. Frequency increases in the answers sometimes, rarely and often. The answer rarely is the largest option to all questions.

In the realized research one of the examined variables was the level of education of social workers.

In terms of completed education 14% (7 respondents) of subscribers reported first degree in social work, 84% (40 respondents) of subscribers reported the second higher education degree. 2% (1 respondent) reported the third cycle, doctoral studies.

№	1. cycle					2. cycle					3. cycle				
	4	3	2	1	0	4	3	2	1	0	4	3	2	1	0
1.	-	1	3	3	-	-	6	20	11	4	-	-	1	-	-
2.	1	-	5	-	1	-	8	13	17	3	-	-	1	-	-
3.	1	3	2	1	-	-	14	19	7	1	-	-	1	-	-
4.	-	1	3	-	3	1	2	12	17	9	-	1	-	-	-
5.	-	2	2	2	1	-	8	10	15	8	-	-	-	1	-
6.	-	1	2	1	3	-	4	8	21	8	-	-	-	1	-
7.	1	1	1	1	3	-	7	10	19	5	-	-	-	1	-
8.	-	1	1	2	3	-	5	2	11	23	-	-	-	-	1
9.	-	-	-	3	4	-	1	5	7	28	-	-	-	-	1
10.	-	1	3	2	1	2	5	12	14	8	-	-	1	-	-
11.	-	1	1	2	3	1	5	7	19	9	-	-	-	-	1
12.	-	1	2	3	1	-	5	7	19	10	-	-	-	1	-
13.	-	3	3	1	-	3	10	6	14	8	-	-	-	1	-
14.	1	1	4	1	-	1	7	10	19	4	-	-	-	1	-
15.	1	2	1	3	-	1	10	4	24	2	-	-	-	1	-
16.	-	1	4	2	-	1	4	13	16	7	-	-	-	-	1
17.	-	3	1	2	1	2	3	15	12	9	-	-	-	1	-
18.	1	2	4	-	-	6	1	14	14	6	-	-	1	-	-
19.	-	1	3	2	1	1	5	9	16	10	-	-	-	1	-
20.	-	1	-	3	3	1	3	3	14	20	-	-	-	-	1
21.	-	1	2	3	1	2	2	12	16	9	-	-	-	-	1
22.	-	1	1	2	3	-	6	2	11	22	-	-	-	-	1
23.	1	1	1	4	-	1	5	8	14	13	-	-	-	-	1
24.	-	1	1	2	3	-	5	7	9	20	-	-	-	-	1

Tab.3. Respondents answers ranked according to educational level and response incidence.

From table 3 it is clear that the largest response group of the respondents with second level of higher education was rarely and it was followed by the answer never. Respondents who have completed the first cycle of higher education selected as the most frequent answer sometimes followed by the answer rarely. The most often given answer by a respondent with completed third level of higher education was rarely and never, as we stated in respondents with second degree of education.

Then we examined demographic data such as age. Respondents were divided into five groups. The most abundant group of respondents was between 40 to 49 years in the overall percentage of 43% (21 participants). The age limit from 20 to 29 years was represented with 16% (8 respondents), the age limit from 30 to 39 years represented with 27% (13 respondents) and the age limit from 50 to 59 years was

represented with 7 respondents (14% of respondents). The over 60 age limit was not represented by any respondent.

We investigated the degree of burnout threat to our respondents based on demographic data (age). The age limit from 40 to 49 years with a value of 33, 86 was jeopardized by burnout with the highest average rate. The lowest average value was in the age limit from 30 to 39 years with a value of 30, 38. At the age limit from 20 to 29 years the value was 32, 38 and the at the age limit from 50 to 59 years it was 31, 43.

Another variable that we surveyed was the length of professional experience in the social field. 39% of respondents' length was within five years, 20% of surveyed length was 6-10 years, 27% of participants worked for 11-19 years and over 20 years of experience had 14% of social workers. The most vulnerable group is a group of social workers with professional experience over 20 years, followed by a group of 6-10-year experience and a group of novice employees with experience in five years. The least vulnerable group of our research is the group of respondents with 11-19 years of experience.

The next surveyed variable was the place of work. 65% (32 respondents) worked in a city and 35% (17 respondents) worked in countryside. The average rate of burnout in the group of respondents working in the city is 32,47; on the other side, the rate of respondents working in country side is 32,12.

Regarding the results of awareness of burnout 96% of respondents or their staff have met the concept of burnout during their experience. Only 4% of participants said they have not met the concept of burnout in their professional experience so far.

In our study we investigated which prevention programs the addressed social workers prefer. The most common prevention methods and activities used by social workers as it is seen from the respondents' answers are: supervision, mental hygiene, relaxation and time set aside for family and friends. Some respondents cited as prevention from burnout prayer and faith, which give them strength and encouragement.

2.2. DISCUSSION

The aim of the research study was to identify the symptoms and preventive measures of social workers' burnout, according to correlations of age, level of education, length of professional experience and place of work.

We found out the following data by the conducted research with the chosen social workers.

The maximum value respondents could reach was 96 in all four surveyed levels. The maximum reached by one respondent was 77 points, the minimum was 9 points. 14,29% (7 participants) reached 10-19 points. 42,86% (21 respondents) were in the limit from 20 to 29 points. 16,33% (8 respondents) reached a level of 30-39 points and 8,16% (4 respondents) were in the limit of 40-49 points.

We calculated general susceptibility to burnout within the limits of 50-59 points at three respondents. Five respondents reached a total value of between 71 to 77 points. Since we wanted to identify susceptibility to burnout on the maximum value, it was necessary to divide this value into three parts in order to identify low, medium and high susceptibility to burnout.

Low level of burnout susceptibility is the point limit from 0 to 32 points, medium level ranges from 33 to 64 points and a high degree of burnout susceptibility is defined in point limit from 65 to 96 points. 63,27% (31 respondents) of our research exhibit low level of burnout susceptibility. 26,53% (thirteen respondents) had a medium level of susceptibility and 10,20% (five respondents) are in a border of high burnout threat. Higher values of these participants were detected in all four examined levels.

The next measure was the length of professional experience and its impact on burnout. Seven respondents aged 40-49 years reported their experience in the social field within five years; in this case, we can deduce that their university attendance started at a higher age than usual. The average value of the burnout degree was 37 points, which is a medium level of burnout susceptibility. In this group of respondents was one respondent whose burnout rate reached the highest degree of burnout risk (burnout rate was 77 points).

We also provide a comparison of the respondents aged 20-29 years who reported length of professional experience in the limit to five years. At this age level, we also had seven respondents. The average value is 33, 29 points, which is a medium level of burnout susceptibility as in the age group 40-49 years. In the age limit from 30 to 39 years with professional experience in limit to five years, respondents reported low level of susceptibility (average is 21, 80). Respondents in the age groups 20-29 years and 30-39 years stated second level of university degree. However, respondents in the age group 40-49 years stated first level of university degree. Only two respondents mentioned as a place of work country and 17 respondents the city.

Interesting fact is that one respondent in the age group 20-29 years showed in the physical level, where he responded to the arguments numbered 3, 7, 11, 15, 19 and 23 of the inventory of burnout symptom point score of 18 points out of a maximum point value, that represents 24 points, a high degree of burnout susceptibility in the given level.

Obviously, the answer "always" with a value of 4 points occurred in very rare number of answers. Two respondents mentioned answer "never" in the social level and one respondent gave an answer "never" in physical level.

In the physical level one respondent reached 22 points, what shows a high degree of burnout susceptibility in this level. That respondent has a high value in emotional level, too. The respondent stated 40 to 49 years, the length of professional experience between 0-5 years and has a first university degree with a place of work in the city. Up to 96% of respondents said that they themselves or their colleagues have had experience with the concept of burnout.

It is clear that studies and surveys carried out in Slovakia or other countries have shown different results in burnout of social workers. Our research showed different figures on the burnout susceptibility in different age groups of respondents and in particular analyzed levels (emotional, intellectual, social and physical).

3. CONCLUSIONS

Based on studies and research that have been undertaken in the world, we can conclude that age, length of professional experience and education as demographic variables affect the burnout of individual. However, it is important to mention that these studies and researches differ in their results. As reported by Maroon [7] susceptibility to burnout may occur at the beginning of careers, but also in later professional life of social workers. As the author states further demographic variables are gender and marital status, as well as variables specific to the individual's personality (human psyche, its demands and requirements, as well as expectations and motivation) can be determinants of susceptibility to burnout.

The results of our research show that social workers with professional experience of more than twenty years are at risk of burnout at a higher rate than their colleagues who work in the social area shorter period of time. We believe that there may be more reasons for this, such as stereotypical pursue of vocational activity, an effect of health problems, but also affect of other internal and external circumstances.

The empirical verification of the identification of symptoms and preventive measures of burnout has proven their merits in the work of a social worker. Although many factors contribute to the mental health and well, it is proven that the benefits of a significant and effective time management is not just a matter for the individual but is related to the overall functioning of the organization and the work of other employees. We therefore propose that, in deficiencies that we found out by the research studies, to create a plan of action for better organization of work within the time frame, and effective implementation of mental health within self management.

SUGGESTION

For further research, we propose to integrate into analyses specific parameters of the work environment related to time management and self management including tracking changes, prevention and intervention of stressors that precipitated burnout.

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Лашитова Ленка, Каланін Пьотр. Вигорання як чинник впливу на ефективність діяльності соціального працівника. *Журнал Прикарпатського університету імені Василя Стефаника*, 3 (2-3) (2016), 50–57.

Метою емпіричного дослідження є виявлення симптомів і профілактичних заходів щодо вигорання соціальних працівників, відповідно до кореляції віку, рівня освіти, професійного досвіду, тривалості й місця роботи. Дослідження було проведено (з лютого по травень 2016 року) із 49 респондентами соціальних працівників шляхом випадкового відбору колишніх колег, які в даний час працюють в НУО регіонів м. Кошице і м. Пряшів та були учасниками спільних проектів, щодо забезпечення сфери загального комунального сектору. Т. і Дж. Тошнер використовували анкетування для обробки зібраних даних з метою виявлення симптомів вигорання. Дослідники вважають, що правильне використання сучасних інноваційних технологій формує культуру діяльності організації, яка встановлює чіткі функції та обов'язки для усіх представників робочої групи.

Ключові слова: вигорання, соціальний працівник, продуктивність праці, профілактика.