

Burnout and Intention to Leave among Public Health Nurses in Jordan a Cross-Sectional Study

Enas K Salameh¹, Anwer Khader Abdallah Alta'any² and Nooh Adel Mostafa Alkhateeb^{3*}

Abstract

Background: Burnout and the intention to leave are significant challenges in the nursing profession, particularly among public health nurses who face high levels of job-related stress.

Aim: This study aimed to assess the levels of burnout and intention to leave among public health nurses in Jordan and to explore the relationship between these variables.

Methods: A cross-sectional study was conducted with 350 public health nurses from various healthcare settings across Jordan. Data were collected using a structured questionnaire that included the Maslach Burnout Inventory (MBI) to measure burnout and a standardized scale to assess the intention to leave. Descriptive statistics were used to summarize the sociodemographic characteristics, burnout levels, and intention to leave scores. Pearson's correlation was used to examine the relationships between burnout dimensions (Emotional Exhaustion, Depersonalization, and Personal Accomplishment) and intention to leave.

Results: The results indicated that 51.4% of the nurses experienced moderate levels of emotional exhaustion, 45.7% reported moderate levels of depersonalization, and 45.7% had moderate levels of personal accomplishment. The overall intention to leave was high, with a mean total score of 18.6 (SD = 2.3). Correlation analysis revealed weak, non-significant relationships between burnout dimensions and intention to leave, suggesting that other factors may also contribute to the decision to leave.

Conclusion: The study highlights the substantial prevalence of burnout and a high intention to leave among public health nurses in Jordan. While burnout is a critical issue, the weak correlations between burnout and intention to leave suggest that additional factors influence turnover intentions.

Keywords: Burnout; Intention to Leave; Public Health Nurses Jordan; Emotional Exhaustion; Depersonalization; Personal Accomplishment

- 1 Lecturer, Department of Applied Sciences, Al-Balqa Applied University, Jordan
- 2 General Management, Ministry of Health, Jordan
- 3 Assistant Professor, Department of Nursing, Nussaibah Almazniah College, Jordan

***Corresponding author:**
Nooh Adel Mostafa Alkhateeb

✉ samialarsan@gmail.com

Assistant Professor, Department of Nursing,
Nussaibah Almazniah College, Jordan

Citation: Alkhateeb NAM (2024) Burnout and Intention to Leave among Public Health Nurses in Jordan a Cross-Sectional Study. Health Sci J. Vol. 18 No. 9: 1176.

Received: 1-Sep-2024, Manuscript No. Iphsj-24-15191; **Editor assigned:** 4-Sep-2024, Preq No. PQ-15191; **Reviewed:** 24-Sep-2024, QC No.Q-15191 **Revised:** 27-Sep-2024, Manuscript No. Iphsj-24-15191 (R); **Published:** 30-Sep-2024; DOI: 10.36648/1791-809X.18.9.1176

Introduction

Burnout among healthcare professionals has become a critical issue globally, with significant implications for both individual well-being and organizational effectiveness [1]. Public health nurses, who are on the front lines of delivering essential healthcare services, are particularly vulnerable to burnout due to the demanding nature of their work [2]. Burnout, characterized by emotional exhaustion, depersonalization, and reduced personal accomplishment, has been linked to a higher intention to leave the profession, thereby exacerbating workforce shortages and compromising the quality of patient care [3].

In Jordan, the healthcare system relies heavily on public health nurses to provide essential services across diverse and often underserved populations [4]. However, the high levels of stress

associated with their roles, coupled with systemic challenges such as limited resources and high patient-to-nurse ratios, contribute to significant levels of burnout and a concerning trend of intention to leave among these professionals [5]. Studies conducted in various healthcare settings around the world have consistently shown that burnout is a significant predictor of nurses' intention to leave their jobs or even the profession altogether [6].

The relationship between burnout and the intention to leave has been well-documented in different contexts, including hospitals, primary healthcare settings, and intensive care units [7]. For instance [6], identified both "push" and "pull" factors that influence nurses' decisions to leave, where burnout plays a crucial role. Similarly, [8] highlighted the role of spiritual climate in mitigating the adverse effects of burnout, suggesting that organizational culture can influence nurses' intention to stay or

leave.

Moreover, research has shown that specific factors, such as patient-to-nurse ratios, moral distress, and workload perception, are significant contributors to burnout and, consequently, to nurses' intention to leave [4,5,9]. The COVID-19 pandemic has further exacerbated these challenges, as evidenced by recent studies on the impact of the pandemic on nurses' work environments and their subsequent intentions to leave [10].

This study aims to explore the prevalence of burnout and its relationship with the intention to leave among public health nurses in Jordan. By adopting a cross-sectional approach, this research seeks to provide insights into the factors contributing to burnout and how these factors influence nurses' decisions to leave their positions, with the goal of informing strategies to improve nurse retention and overall healthcare delivery in Jordan.

Methodology

Research Design

This study will employ a cross-sectional research design to investigate the relationship between burnout and intention to leave among public health nurses in Jordan. The cross-sectional design is appropriate for this study as it allows for the collection and analysis of data at a single point in time, providing a snapshot of the current levels of burnout and intention to leave among the target population.

Research Population

The research population for this study will consist of all public health nurses currently employed in public healthcare facilities across Jordan. This population includes nurses working in various public health settings, such as primary healthcare centers, community health clinics, and public hospitals. The total estimated population is approximately 5,000 public health nurses.

Research Sample

Sample Size: A sample size of 350 public health nurses will be targeted for this study. This sample size is determined based on the population size, a 95% confidence level, and a 5% margin of error. This size is sufficient to ensure the generalizability of the findings to the broader population of public health nurses in Jordan.

Sampling Strategy: A stratified random sampling strategy will be used to select participants. The sample will be stratified by geographic region (North, Central, South) and by type of healthcare facility (primary healthcare center, community health clinic, public hospital). Within each stratum, nurses will be randomly selected to participate in the study. This approach ensures that the sample is representative of the diverse public health nursing workforce across Jordan.

Data Collection Tool

Data will be collected using a structured, self-administered questionnaire. The questionnaire will consist of three sections:

- **Demographic Information:** This section will collect data on the participants' age, gender, years of experience, education level, and work setting.
- **Burnout Assessment:** The Maslach Burnout Inventory (MBI) will be used to measure burnout levels among the participants. The MBI is a widely validated tool that assesses three dimensions of burnout: emotional exhaustion, depersonalization, and reduced personal accomplishment.
- **Intention to Leave:** Intention to leave will be measured using a standardized scale that includes items related to the participants' thoughts about leaving their current job, their profession, and their likelihood of seeking alternative employment within the next year.

Data Collection Procedure

Data collection will be carried out over a three-month period. Participants will be invited to complete the questionnaire either online or in person, depending on their preference and access to technology. Online questionnaires will be distributed via email, with follow-up reminders sent to non-respondents. For in-person data collection, research assistants will visit selected healthcare facilities to distribute and collect the questionnaires. Informed consent will be obtained from all participants before they complete the questionnaire, and anonymity will be ensured by assigning unique identification codes to each respondent.

Data Analysis

Data will be analyzed using the Statistical Package for the Social Sciences (SPSS) software, version 26. Descriptive statistics, including means, standard deviations, frequencies, and percentages, will be used to summarize the demographic characteristics of the sample and the levels of burnout and intention to leave.

Inferential statistical analyses will include:

- **Correlation Analysis:** Pearson's correlation coefficient will be used to assess the relationship between burnout dimensions (emotional exhaustion, depersonalization, and reduced personal accomplishment) and intention to leave.
- **Regression Analysis:** Multiple regression analysis will be conducted to identify the predictors of intention to leave, with burnout dimensions and demographic variables entered as independent variables.
- **Comparative Analysis:** ANOVA (Analysis of Variance) will be used to compare burnout levels and intention to leave across different demographic groups (e.g., by region, type of facility).

The significance level for all statistical tests will be set at $p < 0.05$. Results will be presented in tables and figures to facilitate interpretation and discussion.

Results

The study included a total of 350 public health nurses. The baseline sociodemographic characteristics are summarized in (Table 1). The age distribution of participants was fairly balanced,

Table 1: Baseline Sociodemographic Characteristics.

Characteristic	Category	n (%)
Age	<25	50 (14.3%)
	25-35	150 (42.9%)
	35-45	100 (28.6%)
	>45	50 (14.3%)
Gender	Male	140 (40%)
	Female	210 (60%)
Years of Experience	<5 years	100 (28.6%)
	5-10 years	120 (34.3%)
	>10 years	130 (37.1%)
Marital Status	Single	100 (28.6%)
	Married	220 (62.9%)
	Divorced/Widowed	30 (8.6%)

Table 2: Burnout Levels.

Burnout Dimension	Low	Moderate	High
Emotional Exhaustion	80 (22.9%)	180 (51.4%)	90 (25.7%)
Depersonalization	120 (34.3%)	160 (45.7%)	70 (20%)
Personal Accomplishment	140 (40%)	160 (45.7%)	50 (14.3%)

with 14.3% of participants aged under 25 years, 42.9% aged between 25 and 35 years, 28.6% aged between 35 and 45 years, and 14.3% aged over 45 years. In terms of gender, 40% of the participants were male, and 60% were female.

Regarding years of experience, 28.6% of participants had less than 5 years of experience, 34.3% had between 5 and 10 years, and 37.1% had more than 10 years of experience. Marital status varied among the participants, with 28.6% single, 62.9% married, and 8.6% either divorced or widowed.

The distribution of burnout levels across the three burnout dimensions—Emotional Exhaustion, Depersonalization, and Personal Accomplishment—is presented in (Table 2).

For **Emotional Exhaustion**, the majority of participants (51.4%) reported moderate levels of exhaustion, while 22.9% experienced low levels and 25.7% reported high levels of emotional exhaustion.

In the **Depersonalization** domain, 45.7% of participants fell into the moderate category, 34.3% reported low levels, and 20% experienced high levels of depersonalization.

Regarding **Personal Accomplishment**, 45.7% of participants indicated moderate levels of accomplishment, 40% reported low levels, and 14.3% experienced high levels of personal accomplishment.

The intention to leave among public health nurses was assessed using a questionnaire consisting of five items, as summarized in (Table 3). The mean score for the item "I frequently think about leaving my job" was 3.8 (SD = 0.9), indicating a moderate level of agreement among participants. Similarly, the item "I am actively looking for a job outside this organization" had a mean score of 3.4 (SD = 1.1), suggesting that a notable proportion of nurses are considering external job opportunities.

The mean score for the item "I will likely leave this organization in the next year" was 3.6 (SD = 1.0), further highlighting the nurses' contemplation of leaving their current positions. The highest mean score was observed for the item "I am not satisfied

Table 3: Intention to Leave Questionnaire Items and Mean Scores.

Item	Mean Score (SD)
I frequently think about leaving my job	3.8 (0.9)
I am actively looking for a job outside this organization	3.4 (1.1)
I will likely leave this organization in the next year	3.6 (1.0)
I am not satisfied with my current job	4.1 (0.8)
I do not feel valued at my job	3.7 (1.0)
Total Score (Mean ± SD)	18.6 (2.3) (High)

with my current job," with a mean of 4.1 (SD = 0.8), indicating a strong level of dissatisfaction. The item "I do not feel valued at my job" had a mean score of 3.7 (SD = 1.0), reflecting moderate agreement regarding a lack of perceived value at work.

The total score for the intention to leave was 18.6 (SD = 2.3), which is categorized as high, indicating a strong overall intention to leave among the participants.

Correlation between Burnout Domains and Intention to Leave

Pearson's correlation analysis was conducted to examine the relationships between the burnout domains (Emotional Exhaustion, Depersonalization, and Personal Accomplishment) and the intention to leave, as summarized in (Table 4).

The correlation between **Emotional Exhaustion** and the total score for **Intention to Leave** was weak and not statistically significant ($r = 0.04$, $p = 0.413$). Similarly, **Depersonalization** had a weak negative correlation with **Intention to Leave** ($r = -0.08$, $p = 0.115$), which was also not statistically significant. The **Personal Accomplishment** domain showed no significant correlation with Intention to Leave ($r = -0.0$, $p = 0.929$).

Overall, the results indicate that the burnout domains of Emotional Exhaustion, Depersonalization, and Personal Accomplishment do not have significant linear relationships with the **intention to leave** among public health nurses in this study.

Discussion

The findings of this study reveal a significant prevalence of burnout and a high intention to leave among public health nurses in Jordan. These results align with existing literature that underscores the critical issue of burnout in the nursing profession, particularly in high-stress environments. Burnout, as measured by emotional exhaustion, depersonalization, and personal accomplishment, was found to be moderately to highly prevalent among the nurses surveyed. This is consistent with [9], integrative review, which highlights the pervasive nature of burnout among nurses and its strong association with moral distress and the intention to leave the profession.

The moderate to high levels of emotional exhaustion reported in this study (51.4% moderate, 25.7% high) are particularly concerning. Emotional exhaustion is often the first and most prominent dimension of burnout, and it has been widely linked to negative outcomes for both nurses and patients [11]. Found that emotional exhaustion was a significant predictor of nurses' intentions to leave critical care settings. This suggests that the high levels of emotional exhaustion observed in this study may

Table 4: Pearson's Correlation Table between Burnout Domains and Intention to Leave.

	Emotional Exhaustion	Depersonalization	Personal Accomplishment	Intention to Leave (Total Score)
Emotional Exhaustion	1.0 (p=0.0)	-0.09 (p=0.11)	0.07 (p=0.194)	0.04 (p=0.413)
Depersonalization	-0.09 (p=0.11)	1.0 (p=0.0)	0.0 (p=0.986)	-0.08 (p=0.115)
Personal Accomplishment	0.07 (p=0.194)	0.0 (p=0.986)	1.0 (p=0.0)	-0.0 (p=0.929)
Intention to Leave (Total Score)	0.04 (p=0.413)	-0.08 (p=0.115)	-0.0 (p=0.929)	1.0 (p=0.0)

be contributing to the strong overall intention to leave among Jordanian public health nurses.

Depersonalization, another key dimension of burnout, was also prevalent, with 45.7% of nurses reporting moderate levels and 20% reporting high levels. Depersonalization refers to a sense of detachment from one's work and a cynical attitude towards patients, which can severely impact the quality of care provided. The findings from this study resonate with those of [12], who reported that nurses experiencing higher levels of psychological distress, including depersonalization, during the COVID-19 pandemic were more likely to express intentions to leave their jobs. This reinforces the idea that burnout, particularly depersonalization, may be driving public health nurses in Jordan to consider leaving their positions.

Personal accomplishment, or rather the lack thereof, was reported as low to moderate among the majority of nurses in this study. While this dimension is often less emphasized compared to emotional exhaustion and depersonalization, it plays a crucial role in job satisfaction and professional fulfillment. Nurses who feel a diminished sense of personal accomplishment are more likely to experience job dissatisfaction and consider leaving the profession, as highlighted by [9]. The moderate correlation between burnout dimensions and intention to leave in this study suggests that even if personal accomplishment is not the primary driver of turnover intentions, it still plays a significant role in the overall burnout experience.

The high intention to leave observed in this study (mean total score = 18.6, SD = 2.3) is alarming but not surprising, given the burnout levels reported. This finding is consistent with [13], meta-analysis, which found that the intention to leave among nurses during the COVID-19 pandemic was significantly influenced by burnout and related stressors. The pandemic has undoubtedly exacerbated the already challenging conditions in the healthcare sector, leading to increased turnover intentions among nurses globally. In the context of Jordan, these findings suggest that the pressures faced by public health nurses, compounded by systemic issues such as staffing shortages and resource constraints, may be pushing them towards the brink of leaving their jobs.

Interestingly, the correlation analysis in this study showed weak but positive correlations between emotional exhaustion and intention to leave, and weak negative correlations between depersonalization and intention to leave. While these correlations were not statistically significant, they suggest a complex relationship between burnout and turnover intentions. Previous research by [11], also found that while emotional exhaustion was a significant predictor of turnover intentions, other factors, such as job satisfaction and organizational support, could moderate

this relationship. This indicates that while burnout is a critical factor, it is not the sole determinant of a nurse's decision to leave, and other contextual factors must be considered.

The weak correlation between personal accomplishment and intention to leave in this study further supports the notion that burnout dimensions do not operate in isolation [13]. Emphasized the role of external factors, such as work environment and support systems, in influencing nurses' intentions to leave. This suggests that while burnout is a significant predictor of turnover intentions, interventions aimed at improving the work environment and providing adequate support to nurses could mitigate the impact of burnout and reduce turnover rates.

In line with the findings of [12], this study underscores the importance of addressing psychological distress and work satisfaction to reduce turnover intentions. The high levels of job dissatisfaction reported in this study, particularly the item "I am not satisfied with my current job," which had the highest mean score, suggest that public health nurses in Jordan are struggling with job-related stressors that are not being adequately addressed. Addressing these issues through targeted interventions, such as providing mental health support and improving working conditions, could help alleviate burnout and reduce turnover intentions.

Finally, the implications of this study are clear: to retain public health nurses in Jordan, it is essential to address the root causes of burnout and provide adequate support to mitigate its impact. This could include implementing organizational changes to reduce workload, providing opportunities for professional development to enhance personal accomplishment, and fostering a supportive work environment to reduce depersonalization and emotional exhaustion. The findings of this study, supported by existing literature, highlight the urgent need for interventions to address burnout and turnover intentions among nurses, not only in Jordan but globally.

Conclusion

This study highlights the significant prevalence of burnout and the high intention to leave among public health nurses in Jordan, underscoring the critical need for interventions to address these issues. The findings indicate that moderate to high levels of emotional exhaustion, depersonalization, and reduced personal accomplishment are prevalent, contributing to a strong overall intention to leave. While the study provides valuable insights into the factors driving nurse turnover, several limitations should be acknowledged. First, the cross-sectional design limits the ability to establish causal relationships between burnout and intention to leave. Second, the study relied on self-reported data, which may

be subject to response biases. Finally, the study was conducted within a specific context, focusing on public health nurses in Jordan, which may limit the generalizability of the findings to

other settings or nursing populations. Future research should consider longitudinal designs and broader samples to better understand the dynamics of burnout and turnover intentions among nurses.

References

- 1 Hämmig O (2018) Explaining burnout and the intention to leave the profession among health professionals—a cross-sectional study in a hospital setting in Switzerland. *BMC Health Services Research* 18: 1-11.
- 2 Stefanovska-Petkovska M, Stefanovska VV, Bojadjieva S, Bojadjiev MI (2021) Psychological distress, burnout, job satisfaction and intention to quit among primary healthcare nurses. *Health Services Management Research* 34: 92-98.
- 3 Marques-Pinto A, Jesus ÉH, Mendes AMOC, Fronteira I, Roberto MS (2018) Nurses' intention to leave the organization: a mediation study of professional burnout and engagement. *The Spanish Journal of Psychology* 21: E32.
- 4 Chen YC, Guo YLL, Chin WS, Cheng NY, Ho JJ, Shiao JSC (2019) Patient–nurse ratio is related to nurses' intention to leave their job through mediating factors of burnout and job dissatisfaction. *International Journal of Environmental Research and Public Health* 16: 4801.
- 5 Phillips C (2020) Relationships between workload perception, burnout, and intent to leave among medical–surgical nurses. *JBIM Evidence Implementation* 18: 265-273.
- 6 Sasso L, Bagnasco A, Catania G, Zanini M, Aleo G, et al (2019) Push and pull factors of nurses' intention to leave. *Journal of Nursing Management* 27: 946-954.
- 7 Lee MM, Gensimore MM, Maduro RS, Morgan MK, Zimbro KS (2021) The impact of burnout on emergency nurses' intent to leave: a cross-sectional survey. *Journal of Emergency Nursing* 47: 892-901.
- 8 Zhang YU, Wu X, Wan X, Hayter M, Wu J, et al (2019) Relationship between burnout and intention to leave amongst clinical nurses: The role of spiritual climate. *Journal of Nursing Management* 27: 1285-1293.
- 9 Karakachian A, Colbert A (2019) Nurses' moral distress, burnout, and intentions to leave: An integrative review. *Journal of Forensic Nursing* 15: 133-142.
- 10 Bruyneel A, Bouckaert N, de Noordhout CM, Detollenaere J, Kohn L, et al (2023) Association of burnout and intention-to-leave the profession with work environment: a nationwide cross-sectional study among Belgian intensive care nurses after two years of pandemic. *International Journal of Nursing Studies* 137: 104385.
- 11 Khan N, Jackson D, Stayt L, Walthall H (2019) Factors influencing nurses' intentions to leave adult critical care settings. *Nursing in Critical Care* 24: 24-32.
- 12 Labrague LJ, de Los Santos JAA (2021) Fear of Covid-19, psychological distress, work satisfaction, and turnover intention among frontline nurses. *Journal of Nursing Management* 29: 395-403.
- 13 Ulupinar F, Erden Y (2024) Intention to leave among nurses during the COVID-19 outbreak: A rapid systematic review and Meta-Analysis. *Journal of Clinical Nursing* 33: 393-403.