

## PROFESSIONAL REDUCTION AND EMOTIONAL EXHAUSTION PREDICT INTENTION TO LEAVE

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### Abstract

Role of burnout in predicting intention to leave a job for addiction specialists is investigated in the current study. 120 physicians, psychologists and nurses working in detox clinics, opioid substitution therapy and psychosocial rehabilitation centers constituted the study sample, which is 60% of the population of addiction specialists in the country of Georgia (former Soviet Union). The sample is representative and provides the possibility to generalize the obtained results to the entire population of drug addiction specialists. Intention to leave was measured using a two-item questionnaire by Kim et al. Burnout was measured by the Human Services Survey (MBI-HSS) (Maslach & Jackson, 1996), containing 22 items that group into three burnout factors: emotional exhaustion, depersonalization and professional reduction. The confirmatory factor analysis (CFA) of the Georgian version provided satisfactory indices after removing two items with low factor loadings:  $\chi^2(25, 366) = 104.31, p < .001, CFI = .93, TLI = .92, RMSEA = .07, SRMR = .06$ . Cronbach Alpha for revised (MBI-HSS) is:  $\alpha = 0.89$  (emotional burnout scale),  $\alpha = 0.76$  (depersonalization scale), and  $\alpha = 0.82$  (scale of professional reduction). Demographic variables, such as age, gender, marital status, job position, satisfaction with income, length of professional experience, were studied. A hierarchical regression analysis was conducted with demographic variables in the first and three burnout scales in the second model. Both models were statistically significant:  $F(4, 115) = 2.40, p < 0.05, F(7, 112) = 3.97, p < 0.001$ , from demographic variables, age  $\beta = -.17, t = -1.99, p < 0.05$  and working as a nurse  $\beta = -.19, t = -2.05, p < 0.05$  were negative predictors of intention to leave. These results converge with the existing findings. The psychological variables provided additional 12% of explanation in variance of intention to leave a job: R square change = 0.12,  $p < 0.001$ . Emotional exhaustion:  $\beta = .23, t = 2.28, p < 0.05$  and professional reduction  $\beta = 0.30, t = 3.51, p < 0.001$  were positive, significant predictors of intention to leave, while depersonalization:  $\beta = 0.01, t = 0.13, p > 0.05$  – did not yield significant coefficient. This finding differs from the previous studies. Professional reduction was found to be a predictor of intention to leave in one study only, however, coupled with depersonalization (Moneta, 2011). In our case professional reduction is coupled with emotional exhaustion, which is found to predict intention to leave in number of other studies (Azharudeen, Andrew, 2018; Ahmed, 2015). Depersonalization was also found to be a predictor in some studies (Lin & Jiang & Lam, 2013; Elçi, Yildiz, Karabay, 2018). This unique combination once more points to importance of including all three burnout factors in further studies.

**Keywords:** *Professional reduction, emotional exhaustion, depersonalization, intention to leave, health care specialists.*

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### 1. Introduction

Role of burnout in predicting intention to leave a job for addiction specialists is investigated in the current study.

Intention to leave a job is an important variable for organizational psychologists as it increases turnover and threatens productivity of organizations (Halawi, 2014; Bigliardi, Petroni & Ivo Dormio 2005). Thus, possible reasons for intention to leave are well investigated. One of the most considered among these is a job stress (Tuna, & Baykal, 2014; Fong, Chui, Cheong & Fong, 2018; Yunita, Prasetio, Dharmoputra, Sa'adah, 2019). Among other frequent reasons low job satisfaction is considered, which is the same as frustration at a job, caused by low salaries, work overload, poor working conditions (Hasselhorn, Tackenberg, Müller, 2003; Azharudeen, Andrew, 2018). At the same time, support by co-workers as well as organizational commitment and identification with an organization (Dick, Christ, 2004; Ahmed, 2015) are shown to prevent intention to leave and attenuate an effect of job stress (Fong, Chui, Cheong & Fong, 2018).

It is important to investigate this variable for representatives of medical profession, where studies found that personnel show intention not only to leave job, but profession (Storer, 2002; Rosenstein & Russell, 2002). Indeed, in the current paper, we have looked at the intention to leave for representatives of addiction specialists, who treat various addiction problems.

According to Christina Maslach, the prominent scholar of burnout, it consists of three interrelated factors - emotional exhaustion, depersonalization and professional reduction. Emotional exhaustion contains sense of emotional emptiness and tiredness, depersonalization means cynical attitude to work and work related people, and for medical personnel this manifests itself in indifferent or inhuman relation to patients. Professional reduction means feelings of incompetence, professional helplessness, perceived lack of success and negative results of treatment (Maslach, 1998). In Maslach's and other studies three factors of burnout are positively correlated with each other (Elçi, Yildiz, Karabay, 2018; Moneta, 2011).

Burnout is also considered a positive predictor of intention to leave a job (Cropanzano, Rupp & Byrne, 2003; Smith & Tziner, 1998; Urien Angulo, & Osca, 2012), however, most of the studies found only emotional exhaustion as its predictor (Azharudeen, Andrew, 2018; Ahmed, 2015; Knudsen, Ducharme, Roman, 2009; Moreno-Jiménez, Hernández, Carvajal, Gamarra, Ramón, 2009). To the best of our knowledge, fewer studies found depersonalization to be a positive predictor of intention to leave (Lin & Jiang & Lam, 2013; Elçi, Yildiz, Karabay, 2018; Moneta, 2011) and only one study found professional reduction as a predictor of intention to leave (Moneta, 2011). As noted above, all three factors of burnout are positively correlated and, thus, can be considered as positive predictors of intention to leave; however, emotional exhaustion is considered as the primary factor leading to thoughts about avoiding current workplace and look for another one. Professional reduction is slightly different from the two burnout factors in a sense that it is more about decreased self-esteem, when a person feels that he/she is not worthy professional. At the same time, this feeling should also definitely lead to intention to leave not only a job, but profession.

The above considered studies leave a gap in understanding role of three burnout factors in predicting intention to leave: while emotional exhaustion is a "popular" predictor, depersonalization and professional reduction, which, by their nature should also lead to the same intention, are found to be predictors only in single studies. The current paper aims to address this issue by investigating three burnout factors of intention to leave. Demographic variables, such as age, gender, marital status, job position, satisfaction with income, length of professional experience were studied.

## 2. Method

### 2.1. Sample

120 physicians, psychologists and nurses working in detox clinics, opioid substitution therapy and psychosocial rehabilitation centers constituted the study sample, which is 60% of the population of addiction specialists in the country of Georgia (Eastern Europe, former Soviet Union). The sample is representative and provides the possibility to generalize the obtained results to the entire population of drug addiction specialists.

### 2.2. Instruments

Intention to leave was measured using a two-item questionnaire by Kim et al (1996). The sample item is: "I plan on leaving this job as soon as possible". Burnout was measured by the Human Services Survey (MBI-HSS) (Maslach & Jackson, 1996), containing 22 items that group into three burnout factors: emotional exhaustion, depersonalization and professional reduction. The confirmatory factor analysis (CFA) of the Georgian version provided satisfactory indices after removing two items (1 item from professional reduction scale and 1 - from depersonalization scale) with low factor loadings:  $\chi^2(25, 366) = 104.310$ ,  $p < .0001$ , CFI = .93, TLI = .92, RMSEA = .07, SRMR = .06. Cronbach Alpha for revised (MBI-HSS) is:  $\alpha = 0.89$  (emotional burnout scale),  $\alpha = 0.76$  (depersonalization scale), and  $\alpha = 0.82$  (scale of professional reduction). The sample items are as follows: for emotional exhaustion - „I feel emotionally drained from my work“, for depersonalization - „I feel I treat some recipients as if they were impersonal objects“, for professional reduction - „I deal very effectively with the problems of my patients“.

## 3. Results

Before proceeding with multiple regression analysis, means, standard deviations and correlations among all four variables were calculated. Emotional exhaustion and depersonalization provided close to high positive correlation, while professional reduction provided negative correlation with emotional

exhaustion and positive correlation with depersonalization. However, values of both correlation coefficients were so small that they did not reach significant threshold. At the same time, professional reduction showed the strongest positive correlation with intention to leave, while correlation with depersonalization was not statistically significant (table 1).

Table 1. Correlations, means and standard deviations of main variables.

	Intention to leave a job	Emotional exhaustion	Depersonalization	M	SD
<b>1. Intention to leave a job</b>				1.88	0.96
<b>2. Emotional exhaustion</b>	.204*			2.27	1.32
<b>3. Depersonalization</b>	.158	.488**		1.17	1.22
<b>4. Professional reduction</b>	.254**	-.156	.039	1.69	1.29

Note: \*\*  $p < 0.01$ ; \*  $p < 0.05$

A hierarchical regression analysis was conducted with demographic variables in the first and three burnout scales in the second model. Both models were statistically significant:  $F(4, 115) = 2.40$ ,  $p < 0.05$ ,  $F(7, 112) = 3.97$ ,  $p < 0.001$ , the psychological variables provided additional 12% of explanation in variance of intention to leave a job:  $R^2$  change = 0.12,  $p < 0.001$ . Emotional exhaustion:  $\beta = .23$ ,  $t = 2.28$ ,  $p < 0.05$  and professional reduction  $\beta = 0.30$ ,  $t = 3.51$ ,  $p < 0.001$  were positive, significant predictors of intention to leave, while depersonalization:  $\beta = 0.01$ ,  $t = 0.13$ ,  $p > 0.05$  – did not yield significant coefficient.

From demographic variables age  $\beta = -.17$ ,  $t = -1.99$ ,  $p < 0.05$  and working as a nurse  $\beta = -.19$ ,  $t = -2.05$ ,  $p < 0.05$  were negative predictors of intention to leave.

#### 4. Discussion

In the current study, out of the three burnout factors, two: emotional exhaustion and professional reduction were found to predict intention to leave. This finding differs from the previous studies. Professional reduction was found to be a predictor of intention to leave in one study only, however, coupled with depersonalization (Moneta, 2011). In our case professional reduction is coupled with emotional exhaustion, which is found to predict intention to leave in number of other studies (Azharudeen, Andrew, 2018; Ahmed, 2015). Depersonalization was also found to be a predictor in some studies (Lin & Jiang & Lam, 2013; Elçi, Yildiz, Karabay, 2018). This unique combination once more points to importance of including all three burnout factors in further studies.

The correlational analysis shows similar relations among our variables: professional reduction does not significantly correlate with any burnout factor, however, professional reduction, as well as emotional exhaustion are positively correlated with the intention to leave.

Some theories of professional burnout state that its three factors unfold one after the other. According to the theory of social exchange, emotional exhaustion leads to depersonalization, which, in turn, leads to professional reduction. According to the organizational theory, depersonalization leads to emotional exhaustion, which, in turn, is a predictor of professional reduction (Edú-Valsania, Laguía, Moriano, 2022). These theories provide two different paths; however, professional reduction is located in the end of this path in both of these theories. According to this reasoning, the final product of burnout is professional reduction, and therefore, logically, this factor represents the end state of burnout, which, in turn, pushes the specialist to the intention to leave the job. It turns out that addiction specialists want to leave their jobs when they experience professional incompetence and do not consider themselves as the professionally valuable specialists.

From demographic variables, age and working as a nurse negatively predicted intention to leave. These results converge with the existing findings. According to the international literature, low salaries motivate workers to find other job, while nurses are not usually inclined to leave, or change working place, as they feel affiliated with it (Shore, Martin 1989; Wanger 2007). The finding about age can be understood on the backdrop of high unemployment rate in Georgia: the higher age of a worker, the more difficult to find a job. Also, according to the relevant literature, the higher the age of a worker, the higher his/her productivity and working abilities, which, in turn, negatively determines intention to leave (Austen et al., 2016).

The study has a usual limitation of a cross-sectional nature, which does not enable us to consider causal relations. Also, adding other predictors of intention to leave, such as job satisfaction and commitment to workplace, might help explain our findings. Despite these limitations, the contribution of the current

study definitely enriches relevant literature and stresses the role of professional reduction, mostly neglected burnout factor in predicting intention to leave. This finding is an important signal to the top management and organizational psychologists of medical organizations to seriously consider professional reduction as a risk factor for organizational functioning.

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