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Religiosity: strategies to confront burnout syndrome in nursing professionals

ABSTRACT | Objective: To describe the possible contributions of religiosity in coping with Burnout Syndrome in nursing professionals. Methods: This is a literature review and the search for studies in national journals was carried out in a database: SCIELO and Google Scholar, published in the period from 2010 to 2020. For inclusion criteria we used: Burnout Syndrome; Nursing; Mental Disorders, exclusion criteria: Trauma, Coexistence, Contentment. We took the Thematic Content Analysis proposed by Minayo to analyze the material. Results: It was possible to identify that the work dynamics of nursing professionals causes stressors, hence the urgency of interventions. Conclusion: The strategies for coping with the diagnosis of Burnout Syndrome in nursing professionals need actions that favor the emotional and spiritual balance, so that these workers will be able to meet the responsibilities that the function requires. It is noteworthy that, regardless of belief, a preventive and / or curative treatment is sought from the religious experience.

Keywords: Nursing; Burnout syndrome; Mental Disorders.

RESUMEN | Objetivo: Describir las posibles contribuciones de la religiosidad en el afrontamiento del Síndrome de Burnout en profesionales de enfermería. Métodos: Se trata de una revisión de la literatura y la búsqueda de estudios en revistas nacionales se realizó en una base de datos: SCIELO y Google Scholar, publicada en el período de 2010 a 2020. Para los criterios de inclusión se utilizaron: Síndrome de Burnout; Enfermería; Trastornos mentales, criterios de exclusión: trauma, convivencia, satisfacción. Tomamos el Análisis de Contenido Temático propuesto por Minayo para analizar el material. Resultados: Se pudo identificar que la dinámica de trabajo de los profesionales de enfermería genera estresores, de ahí la urgencia de las intervenciones. Conclusión: Las estrategias para afrontar el diagnóstico de Síndrome de Burnout en los profesionales de enfermería necesitan acciones que favorezcan el equilibrio emocional y espiritual, para que estos trabajadores puedan cumplir con las responsabilidades que la función requiere. Es de destacar que, independientemente de la creencia, se busca un tratamiento preventivo y o curativo a partir de la experiencia religiosa.

Palabras claves: Enfermería; Síndrome de Burnout; Desordenes Mentales.

RESUMO | Objetivo: Descrever possíveis contribuições da religiosidade no enfrentamento da Síndrome de Burnout (SB) em profissionais da Enfermagem. Métodos: Trata-se de uma revisão de literatura, realizou-se a busca de estudos em periódicos nacionais nas bases de dados: SCIELO e Google Acadêmico, publicados no período de 2010 a 2020. Para critérios de inclusão foram utilizados: Síndrome de Burnout; Enfermagem; Transtornos Mentais, de exclusão: Trauma; Convivência; Contentamento. Tomamos a Análise de Conteúdo Temática proposta por Minayo para analisar o material. Resultados: Foi possível identificar que a dinâmica laboral dos profissionais de enfermagem provoca fatores estressores, logo a premência de intervenções. Conclusão: As estratégias de enfrentamento ao diagnóstico da Síndrome de Burnout em profissionais da enfermagem necessitam de ações que favoreçam o equilíbrio emocional e espiritual, assim estes trabalhadores poderão atender as responsabilidades que a função exige. Ressalta-se que, independente da crença, busca-se um tratamento preventivo e ou curativo a partir da vivência religiosa.

Palavras-chaves: Enfermagem; Síndrome de Burnout; Transtornos Mentais.

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INTRODUCTION

By analyzing the stressors of health professionals through studies, especially nurses in the hospital environment, we can better understand the topic and collaborate in helping to clarify problems related to professionals who face this daily struggle within the health sectors.⁽¹⁾

In the present study, we will address, among the main causes, the Burnout Syndrome, which is a psychosocial disorder that is a response to chronic interpersonal stressors at work. The most commonly used definition is from Maslach and Jackson, where burnout is called "multidimensional syndrome, including emotional exhaustion, depersonalization, and decreased personal satisfaction at work".^(2,3)

Care actions go beyond technical and knowledge procedures, also involving the constant emotional burden of health professionals, to alleviate suffering, maintain their dignity and control, facilitating the means to deal with crises in situations of negative outcomes, such as, for example, the loss of a patient.^(1,3,4) That said, Burnout Syndrome is characterized by a series of physical and psychological symptoms composed of three related and independent dimensions: emotional exhaustion, feeling of physical and mental exhaustion, and feeling of lack of energy and enthusiasm.^(1,2,5,6) Depersonalization refers to a change in the attitude of the worker, causing him to have a cold and non-interpersonal connection with his patients or clients. Also to a decrease in professional fulfillment related to dissatisfaction with professional activities, showing inferiority, career failure and lack of motivation to perform the functions.^(3,5,6)

Burnout Syndrome manifests characteristics such as emotional tension and chronic stress caused by stressful physical, emotional and psychological conditions at work, especially in peo-

ple whose occupations require strong and direct interpersonal involvement with other people.^(2,7) Nursing can be considered an occupation that has a total, direct and intensive impact on the development of this syndrome due to the constant care for patients, the unpredictable conditions and the execution of tasks, which are sometimes painful. It is in the emergency room where the main causes for the development of symptoms occur.^(5,8)

Therefore, based on the arguments presented, the urgency of the need for more attention to the mental health of nursing professionals is determined.^(4,5,7) The research question raised by this study is: How does religious belief help nursing professionals in coping with Burnout Syndrome? Thus, this research aims to describe a possible contribution of religious beliefs to nursing professionals.^(3,4,7,8)

METHOD

To elaborate this research, a literature review was carried out seeking scientific research in publications related to the theme related to religiosity as a coping with the Burnout Syndrome, especially in health professionals, specifically, nursing professionals. This is a study showing the main causes that trigger the syndrome in professionals in work environments. The articles used for research were those developed between 2010 and 2020, indexed in Scielo (Scientific Electronic Library Online) and Academic Google in order to identify recent publications involving the subject, so they were used as inclusion criteria (articles in Portuguese language; date of publication; and articles specifically related to the topic): Burnout Syndrome; Nursing; Mental Disorders and Exclusion: Trauma, Coexistence, Contentment, with a view to selecting viable studies for the research.

For this purpose, the following des-

criptors were used: Nursing; Burnout syndrome; Mental Disorders. Articles published especially in Portuguese were examined, with the aim of reviewing the national collection on the subject. For the crossing of descriptors, the Boolean operator "AND" was used. The survey was carried out between October 20th and December 12th, 2020.

A total of 328 articles related to the topic were found, which were duly analyzed according to the inclusion and exclusion criteria. Among the inclusion criteria, we used: studies that addressed the themes of Nursing combined with Burnout Syndrome and Mental Disorders, published between 2010 and 2020, in Portuguese, with clarity on the main causes and damages of the syndrome, as well as the main forms of treatment and articles that were available free of charge. And, as an exclusion, the articles with duplication were removed from the sample; articles out of date or not referring to the pre-established deadline; after thorough reading of the abstract; paid items; theses; dissertations; articles in English, in addition to others that did not fit the study objectives.

The selection analysis of the articles found took place according to the following systematization: the initial assessment of the bibliographic material through a detailed reading of the abstracts, in order to select those that met the objectives of the study, through the proposed theme. After filtering the data, based on the inclusion and exclusion criteria, 4 articles were listed for the study. Data analysis took place through Minayo's Thematic Content Analysis, which comprises the steps of pre-analysis, exploration of the material and treatment of the results obtained.⁽⁹⁾

RESULTS

Within the initial search, a total of

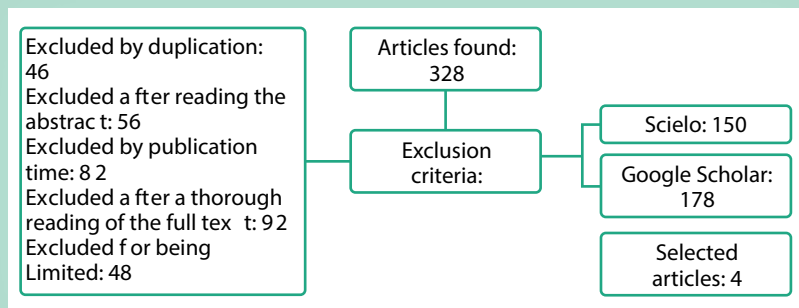
328 articles were pointed out, of which 46 were excluded due to duplication, another 56 were excluded after reading the abstract where it was possible

to see that they involved other themes, so that they distanced themselves from the initial idea and they only quoted small excerpts on the subject. And,

equally, 82 works were excluded due to the time of publication and another 92 after exhaustive and thorough reading, in which the theme was exposed, but in a superficial way and not with an exploratory basis. Finally, 48 articles were excluded because there is a limitation in their use in research, so that the four articles that met the inclusion and exclusion criteria, as shown in table 1. For analysis of the results, the following data were extracted: Nursing, Burnout Syndrome, Mental Disorder.

Despite the year of publication being restricted to the previous 10 years, it was decided to use primary articles on the subject, which are of great relevance to the study currently addressed.

Figure 1- Flowchart of the methodological path of the search, in the period from 2010 to 2020.



Source: authors' data

Table 1: Objective and conclusion of the 04 articles included in the research.

AUTHOR	TITLE	DATABASE/ YEAR	OBJECTIVES	CONCLUSION
1 PIRES, F.C., et al.	Burnout Syndrome in emergency room nursing professionals	Google Scholar/ 2020	Check the score for the classification of Burnout Syndrome	The organizational dynamics of an Emergency Room generates an overload and occupational tension, making it necessary to develop strategies to reorganize the work process, reducing sources of stress.
2 FRANÇA F.M, L., et al.	Burnout Syndrome and socio-demographic aspects in nursing professionals	Scientific Electronic Library On-line (Scielo)/ 2012.	Demonstrate the incidence of Burnout Syndrome (BS) according to the sociodemographic aspects of nursing professionals who work in two regional hospitals in the city of Cáceres-MT.	This study evidenced the presence of BS in nursing professionals, thus revealing the need for interventions in relation to the nurses' working conditions.
3 LIMA, A. S., et al.	Analysis of the prevalence of burnout syndrome in primary health care professionals	Scientific Electronic Library On-line (Scielo)/ 2018.	Analysis of the prevalence of burnout syndrome in primary health care professionals	The study sought to contribute to the increase in knowledge about BS, in addition to pointing out the importance of health professionals for the provision of comprehensive care to society.
4 ZOMER, F. B., et al.	Burnout syndrome and coping strategies in healthcare professionals: a non-systematic review	Google Scholar/ 2017	Knowing the coping strategies used by health professionals affected by Burnout Syndrome.	The studies mention cognitive-behavioral techniques and coping strategies in the face of stressful situations, without describing whether they are effective in preventing or treating the Syndrome.

Source: authors' data

Table 2: Description of the articles included in the research, being the author, methodology and conclusion.

AUTOR	TYPE OF STUDY	CONCLUSION
1 PIRES, F.C., et al.	Quantitative research.	It evidenced the presence of BS in nursing professionals, thus revealing the need for interventions in relation to the nurses' working conditions.

2	FRANÇA F.M, L., et al.	Quantitative research	It is concluded that there was no significant association between sociodemographic variables and Burnout Syndrome. An individualized worker's health prevention plan is suggested.
3	LIMA, A. S., et al.	Quantitative and Qualitative Research	The variables associated with the outcome after multivariate analysis were: poor health status self-assessment and job dissatisfaction.
4	ZOMER, F. B., et al	Quantitative and Qualitative Research	We did not obtain an answer regarding the effectiveness of Cognitive-Behavioral Therapy in Burnout Syndrome, the studies only mention cognitive-behavioral techniques and coping strategies in the face of stressful situations, without describing whether they are effective in preventing or treating the Syndrome.

Source: authors' data

After performing the search in the Scielo (Scientific Electronic Library Online) and Google Scholar databases with the descriptors listed, the study takes table 1 to synthesize the extracted information, so that the title, database, year are presented, objective and conclusion of the 4 articles included in the research. With regard to table 2, the articles included in the research are described, including the author, methodology and conclusion. Thus, it was possible to identify that the work dynamics of nursing professionals causes the emergence of stressors, consequently, the urgency of interventions.

DISCUSSION

Religious beliefs are divine revelations, where supernatural powers show their own domain. Likewise, it is characterized by an organized system in which practices, rituals, beliefs and symbols are used to approach the transcendent.^(10,11) In this conjecture, it is observed that these constitute help to the faithful, as they represent the identification of support strategies for coping with problems, transforming contact with the divine into bases for finding security, spiritual and emotional comfort.⁽¹²⁾

It is clear that religious beliefs represent a basic social element, as the values of man and society were developed. In other words, through them, sacred things are embodied along with the construction of the original demonstrations of individuals, families and communities.^(10,11) Fur-



It is important to emphasize that the term "stress" cannot be confused with Burnout in terms of concepts and differences, as stress comes from the body's response to attacks from different sources and can interfere with the human internal balance.



thermore, the interrelationship of the individual with the sacred has been, since remote times, an experience that accompanies humanity even in the formation of the first tribes, making it possible to affirm the need for legitimizing a superior power that transcends human reason.

Burnout Syndrome is a developmental process in the interaction between the characteristics of the work and personal environment.^(13,14) This is a problem that affects service professionals, especially those who focus on nursing activities with other people, in this case specifically the provision of care or services that often occurs in situations of emotional changes.^(13,14) That said, the findings of the studies presented in Table 1 show that the presence of BS in nursing professionals reveals the need for interventions in relation to the working conditions of nurses, since these professionals are exposed to exhausting tasks and different stressful situations which contribute to a deleterious state of mental health.⁽¹⁵⁾

It is important to emphasize that the term "stress" cannot be confused with Burnout in terms of concepts and differences, as stress comes from the body's response to attacks from different sources and can interfere with the human internal balance. On the contrary, Burnout is a response to long-term work pressure, involving negative attitudes and behavior changes related to the work environment, ignoring the human side. For nurses, it affects the patient, the organization and the work itself,

which can happen when the method of coping with stress factors fails or is insufficient. ⁽¹⁴⁾

It is a multidimensional syndrome characterized by three parts: emotional exhaustion, decreased personal satisfaction and depersonalization. The first category refers to tiredness and reduced emotional resources needed to face stressful situations. The second refers to the deterioration of self-capacity and the feeling of dissatisfaction with one's own achievements and success in the professional environment. The third part is negative attitudes, skepticism, insensitivity and lack of attention to others. For the individuals who are affected and who receive care from these people there are all the factors that are worrying and easily cause a lot of harm. ^(13,16)

Emotional exhaustion is considered its initial characteristic, and its manifestations can be physical, mental or a combination of both. Personalization is caused by professional insensitivity to emotions and usually manifests itself through cynical behavior and emotional concealment, which is an immediate response after fatigue. When personal fulfillment is unsatisfactory, negative self-assessments are related to dissatisfaction and frustrations at work are mentioned and they feel it is not worth it. Therefore, Burnout Syndrome has become a serious public health problem in sectors that require a holistic and empathetic appearance. ^(13,17,25) Thus, the detailed study of the findings in the literature indicates that nursing professionals are also responsible for increasing knowledge about BS, hence integral care of society. ^(13,15,17,25)

For nursing professionals, care and a large part of the workload represent a direct contact with the patient and their family. Among several factors that can harm workers' health, when an individual is aware of the gap between his professional commitment and the system in which he finds himself,

the work environment is considered a cause of conflicts. ⁽¹⁸⁾ In addition, the decline in the quality of services provided by health institutions, the lack of concern about the mental health care of nursing professionals and the high absenteeism of professionals in the area are some of the main consequences of this situation, all closely related to the high incidence of the Burnout Syndrome, ^(15,17,19,25) so it leads to deterioration of physical and mental health and they feel exhausted, often get sick, suffer from insomnia, ulcers, headaches, problems related to blood pressure, muscle tension, chronic fatigue, and disorders related to depression and anxiety. ^(15,20,21)



The professions involved in the public health sector are stressful and nursing is directly related to this group.



The professions involved in the public health sector are stressful and nursing is directly related to this group. Too much activity, it is difficult to delineate the different roles between nurses, technicians and nursing assistants,

lack of recognition, acting on the front line, greater contact with the population, high emotional burdens and low salaries that aggravate working conditions and require professionals with multiple work relationships. ^(15,18) The diversity of this situation provides a favorable scenario for the development of the syndrome, ^(18,21) so that, for the resolution of physical problems, the affected professionals sometimes make excessive use of sedatives, alcohol or even narcotics. The strain is reflected in family relationships (separation, abuse) and/or at work, leading to a significant decrease in income and an increase in absenteeism. ^(18,20,22)

Regarding the professional's religious belief and health, it can be seen from the history that it is confused with the narrative of the human being, so that through dedication to the faith, when facing the negative conditions related to mental health, attitudes will emerge that can bring benefits. ^(10,11) It is noteworthy that the experiences of individuals, with regard to the processes of health and disease, also recognize in religiosity the element capable of promoting curative actions. ^(24,25) The positive bias of the help of faith is noticeable, of the experience of religiosity as an instrument to enable a glimpse into the inter-individual process that permeates the subject's healing process. ⁽²⁵⁾

CONCLUSION

Literature on Burnout and its prevalence is still the object of much study. Even based on forms of prevention and treatment, extensive research on the subject is still needed. Regarding research that has already been substantiated, since physical, behavioral, psychological and defensive symptoms are of great concern, it is expected that current work can encourage future researchers on the pathology, especially in the area of nursing professionals. When consider-

ring areas related to direct patient care, the damage caused can cause many sequelae or even be fatal. Among the nursing team, Burnout Syndrome is harmful in the personal, professional and organizational spheres, because when the humanization of healthcare is no longer a priority, it negatively affects the patient, family members and the quality of intuitive care.

According to a literature review, Burnout Syndrome is a serious public health problem and a great challenge, as health professionals are constantly exposed to risk factors that can trigger the syndrome, including: health care, pain, suffering and discomfort emotional and social aspects of people; limi-

tation of the number of professionals; conflicts between team members; exchange of positions; large number of assistance shifts. These factors make the environment extremely stressful. Thus, from the perspective of preserving the emotional characteristics placed in the daily life of the nursing team and seeking to avoid getting sick, it is suggested that the organization's culture encourages the development of chronic stress prevention activities based on the work of a multidisciplinary team.

Another fundamental aspect is the development of an organizational posture in a way that promotes healthy work, innovating techniques, as well as internal and external professional

means that are capable of enabling the satisfaction of the subjects involved in the team. In addition, scholars claim that religious beliefs, as well as the experience of religiosity, are fundamental in coping with the disorders caused by the Burnout Syndrome, by availing themselves of the help to the supernatural, to the sacred, many who are affected by the aforementioned syndrome reach satisfaction at a high level with regard to treatment. This time, it is clear that regardless of the professed belief, what is sought is a preventive and/or curative treatment based on the religious experience for this disease that affects so many nursing professionals. 🕊

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