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## **Exploratory Study on the Effect of Working Conditions of Portuguese Health Professionals on Burnout and Substance Abuse**

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Keywords: Burnout, Working Conditions, Health Professionals, Psychoactive Substances.

### **Framework and Objectives:**

Health professionals' working conditions and concerns have been highlighted in international research. This interest in analyzing working conditions in health institutions is related, on the one hand, to the fact that they are seen as a central factor for the expansion of the well-being of society and, on the other hand, to the prior knowledge that the positive working conditions of health professionals are essential to enhance their performance and, as such, they influence the quality of care provided and patient safety (Jarrar et al., 2023).

Although this is not a recent concern, the increasing challenges in health institutions have alerted them to the possible degradation of working conditions and the well-being of health professionals. Some studies have indicated some inadequate working conditions, which reflect negatively on workers' quality of life and health, affecting, for example, physical and mental health and well-being. Some of these studies have evidenced the relationship between negative working conditions and the prevalence of burnout syndrome in professionals (Teoh et al., 2021)

Burnout is a psychological syndrome due to high exposure to stressors in the professional context, conceptualized by high emotional exhaustion, depersonalization, and reduced personal fulfillment (Maslach & Leiter, 2016). Burnout in health professionals has negative individual, family, and organizational implications. It is consistently associated with increased rates of depression, decreased well-being, increased divorce, suicide, medical errors, patient dissatisfaction, and unstable interpersonal relationships. It can also be reflected in the increase in substance use as a strategy, even if negative or escaped, to deal with negative emotions or burnout (Airagnes et al., 2021). Nevertheless, it entails high social costs, given its impact on the health system due to its economic repercussions (Lacy & Chan, 2018).

The present study aims to know the prevalence of burnout and substance abuse in health professionals and the relationship between the working conditions to which they are subject and their relationship with burnout.

### **Methodological Approach:**

The present study is non-experimental, quantitative, and has an exploratory cross-sectional design.

### *Procedures:*

The data was collected online through a questionnaire developed by GoogleForms and distributed through its link during the last two months of 2022. The questionnaire was intended exclusively for health professionals working in Portugal. The questionnaire was distributed through social and professional networks using the snowball method, so it is impossible to determine the response rate.



After completing the questionnaire application and data collection, the data were exported and analyzed using the SPSS 28 (Statistical Package for the Social Sciences) program.

#### **Sample:**

The present study involved 91 health professionals, of which 82.4% were nurses and 17.6% were physicians. Of the 91 participants, 72.4% were female, and 27.6% were male, with a mean age of 39.00 years (SD=10.75). Regarding health institutions, 63.7% of respondents work in public institutions, 24.2% in private institutions, and 12.1% reconcile public and private institutions' functions. It should also be noted that only 9.9% of the respondent health professionals hold leadership positions in their institutions.

#### **Instruments:**

MBI-HSS - Instrument developed by Maslach (Maslach et al., 1996) and translated into Portuguese by Marques Pinto (2002). This inventory measure three-dimensional burnout, so it consists of 3 subscales with 22 items divided into emotional exhaustion ( $\alpha$ -cronbach= .93), depersonalization ( $\alpha$ -cronbach= .76), and personal fulfillment ( $\alpha$ -cronbach= .85) by is an instrument consisting of 22 total items, which measures work-related feelings. The answer given in each item corresponds to the periodicity with which each feeling occurs and varies on a 7-point Likert scale between 0 and 6.

WCAS – The Work Context Assessment Scale was developed in 2007 by Mendes and later revised by Silva et al. (2020). This scale comprises three subscales: Work Organization, Socio-professional Relations, and Working Conditions. For this investigation work, we only used the Working Conditions sub-scale. This subscale of working conditions has good reliability ( $\alpha$ -cronbach= .91) of 10 items, answered on a 5-point Likert scale, ranging from 1 “Never” to 5 “Always.”; higher values represent worse working conditions.

SDS – The Severity of Dependence Scale (SDS) is a short 5-item measure that assesses the degree of dependence on different types of drugs, and its use as a research tool is recommended by the World Health Organization (WHO). In this study, we used one single item to measure uncontrolled consumption, namely, "I feel that uncontrolled consumption: Tobacco | Coffee | Alcohol | Lawful psychoactive substances | Illicit psychoactive substances. The answer was given on a Likert scale from 0 – Never to 10 – Always.

#### **Results:**

The data obtained allow us to verify that, in general, health professionals evaluate working conditions (M = 5.44; SD = 2.38) significantly above the central point (5) ( $t(90) = 1,762$ ;  $p < .041$ ), which reflects negative working conditions. In addition, 27.5% of respondents consider the working conditions good, 30.7% reasonable, and 41.8% bad. Taking into account the three dimensions of burnout and through a cluster analysis (K-means), it was possible to divide the participants into three distinct groups, Health Professionals in Burnout (32.9%), Health Professionals at Risk of Burnout (45.2%) and Healthy Health Professionals or absence of signs of burnout (21.9%).

As expected, working conditions are significant predictors of the different dimensions of burnout, explaining 10.7% of the emotional exhaustion of professionals, 13.8% of depersonalization, and, although subtly but significantly, explains 6.8% of the personal fulfillment of health professionals.



The results also allow us to verify that concerning the consumption of substances, the working conditions significantly predict the consumption of alcohol (6.5%). In comparison, depersonalization is the best predictor for consuming licit (8.6%) and illicit (6.3%) psychoactive substances.

### **Discussion and Conclusions:**

The results highlighted some relevant points; first, the poor working conditions perceived by health professionals; on the other hand, 32.9% of the professional's present indices compatible with burnout syndrome, and 45.2% are at risk. These data should constitute an increased concern for the area of health management not only because of the impact they have on professionals in an individualized way but also because of the negative impact they can have on the health system itself and, consequently, on the community.

The working conditions seem to be directly related to the burnout rates presented by the professionals since they explain, in part, the dimensions of burnout, especially the level of emotional exhaustion and depersonalization, that is, the negative indicators of the syndrome. On the other hand, although tenuous, there is a relationship between working conditions and alcohol consumption among professionals. It was also possible to identify a relationship between burnout, more specifically between depersonalization and the consumption of psychoactive substances, whether licit or illicit. In addition, the group of professionals with relevant indicators of burnout identifies significantly more adverse working conditions and more consumption of alcohol, tobacco, and licit psychoactive substances than the other professionals. The relationship between poor work conditions and burnout was expected, by the weak impact of work condition in personal fulfillment is new and the future studies should try to explain this unexpected result. May can test the mediation effect of other variables as passion, vocation or calling career.

Although this is an exploratory study, and as such, it is not possible to infer conclusions or generalize results, the indicators found should be addressed. They should be the subject of reflection and better analysis in the future, and even a larger study should be carried out to improve scales, particularly the scale of consumption.

In terms of organizational practice, the study points to the need to improve the working conditions of these professionals, as well as the need to provide professionals with more adaptive coping strategies.

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