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Emotional exhaustion in female health support workers in elderly care facilities

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ABSTRACT

The current study aims to analyze the emotional exhaustion of female health care workers working in elderly care facilities. Using structural equation modelling we tested the effects of organizational support, coworkers' support, supervisor support and work-family conflict in predicting emotional exhaustion with a sample of 171 female health support workers. Findings showed that organizational support was directly linked with coworkers' support and supervisor support, and indirectly linked, via work-family conflict with emotional exhaustion. Theoretical and practical implications are discussed.

1. Introduction

In Portugal, the growing numbers of the elderly population led to a change in the patterns of care provision for the elderly population (e.g. between 1998 and 2009, the number of nursing homes increased 89%) (Ministério do Trabalho, 2019).

Health support workers are exposed to stressful situations which can lead to negative effects their mental health since they often perform within their activities under emotional demanding work environments (Zhang et al., 2020). Maslach (1978) claims that professions categorized as "caring" or "helping" professions are particularly exposed to emotional exhaustion. One construct that has been posited to serve as a link between the work environment (in the health sector) and the emotional exhaustion is work-family conflict. When the demands from work interfere with the performance of the family role work-family conflict can arise, with the demands of the work domain including time or work stressors (Greenhaus & Beutell, 1985). A study carried out with geriatric care workers in 10 European counties Estryn-Behar, Lassaunière, Fry, and Bonnières (2012) found that work-family conflict predicts high levels of stress and burnout. Studies conducted in Portugal found that the perceptions of work-family conflict are widespread among working women (Matias, Andrade, & Fontaine, 2012; Perista, Cardoso, Brázia, Abrantes, & Perista, 2016). This is particularly relevant since, like in other countries, women involved in paid elderly care outnumber, by far, men (CITE, 2019).

On the side of the organization, there is abundancy of research focusing on how work-related support can reduce the negative impacts of work-family conflict. However, the potential differential effects according to the type of work social support, such as work-related support from the organizational, the supervisor and the coworkers' remains less clear in the studies. Moreover, the direct and indirect effects of different types of work-related support in work-family conflict and in emotional exhaustion of female health care providers working in elderly care facilities have not yet been fully addressed. To address this gap, this study examines the effects of work-related organizational, supervisor and coworkers' support on emotional exhaustion, considering direct effects and indirect effects via work-family conflict.

2. Theoretical background

2.1. Emotional exhaustion

Emotional exhaustion is one of the main elements of burnout and occurs when workers feel psychologically overwhelmed (Maslach & Jackson, 1981). While burnout includes emotional exhaustion, depersonalization, and reduced personal accomplishment, emotional exhaustion has been identified as a dimension that best captures the "core meaning" of burnout (Pines & Aronson, 1988). Emotional exhaustion is defined as a "physical fatigue and a sense of feeling psychologically and emotionally drained" (Wright & Cropanzano, 1998, p. 486). In health care professionals emotional exhaustion is linked to lower levels patient safety (Halbesleben, Wakefield, Wakefield, &

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Cooper, 2008), and high levels of absteetism (Estryn-Behar et al., 2013). These findings account for the importance of identifying potential buffers of emotional exhaustion in health care professionals in order to act prevent it.

Health care providers working with the geriatric patients are at risk of emotional exhaustion since the elderly population is often vulnerable from the physical and mental health leading the care providers to deal, on daily basis, with serious illness conditions and death (Cocco, 2010). Research found that emotional exhaustion is more prevalent among women (Beschoner, Braun, Schonfeldt-Lecuona, Freudenmann, & von Wietersheim, 2016; Özçakar, Kartal, Diri, Tekin, & Güldal, 2012; Yang, Liu, Liu, Zhang, & Duan, 2017), with female workers in geriatric facilities facing higher risks of emotional exhaustion when compared with male coworkers (van den Berg, Landeweerd, Tummers, & van Merode, 2006; Vicente & Oliveira, 2011).

2.2. Work social support: work-related support from the organizational, the supervisor and from coworkers

According to Kossek, Pichler, Bodner, and Hammer (2011) "work support is the degree to which employees perceive that supervisors or employers care about their global well-being on the job through providing positive social interaction or resources" (p. 292). They claim that workplace support can also be content-specific support involving "perceptions of care and provision of resources to reinforce a particular type of role demand" (Kossek et al., 2011, p. 292).

In what concerns the supervisor support it can be instrumental where supervisors give tangible assistance to increase workers' performance and well-being, and emotional support, translated into expressions of concern about the worker's well-being (Kossek et al., 2011). Moreover, supervisor can have behaviors that ease or help workers in dealing with work–family conflicts (Hammer, Kossek, Yragui, Bodner, & Hanson, 2009). While the study of Munn, Barber, and Fritz (1996) found that supervisor support had no effects on emotional exhaustion, Yavas, Babakus, and Karatepe (2008) identified that supervisor or coworkers' support accounted for diminishing the levels of emotional exhaustion.

Finally, research found that coworkers' support was related with reduced workplace stress and decreased physiological strain and depression (Ladd & Henry, 2000). Research by Fernet, Gagne, and Austin (2010) found that good relations among coworkers can have an impact in reducing emotional exhaustion levels, with support from coworkers having a more positive influence on decreasing emotional exhaustion levels than other forms of support.

2.3. Work-family conflict: the mediating effects

Seminal work by Greenhaus and Beutell (1985) argued that work-family conflict occurs when "role pressures from the work and family domains are mutually incompatible in some respect" (p. 77). Thus, research found that social support from the organization, especially at the supervision level is as an important dimension that lower work-family conflict levels (Kossek et al., 2011). Moreover, instrumental assistance given by coworkers (e.g. covering for job duties when a family member needs assistance, and swapping work schedules) was found to be an important resource to mitigate work-family conflict (Mesmer-Magnus & Viswesvaran, 2009). The relation between work-family conflict an emotional exhaustion has also been studied with samples of female health professionals. Results showed a strong association between work-family conflict and high levels of emotional exhaustion in these professionals (Camerino et al., 2010; Dreher, Theune, Kersting, & Geiser, 2019).

2.4. Aim of the research

Elderly care professions are female-dominated professions in Portugal that are often practiced under emotional demanding conditions with elderly care providers being particularly vulnerable to suffer from work-family conflict and emotional exhaustion. Thus, analyzing the linkage between work-related support, work-family conflict and emotional exhaustion We argue that work related support can assume different forms and these different forms can be important resources to reduce work-family conflict and emotional exhaustion. In line with this assumption, the model hypothesizes that work-related support from the organization will be related with work-family conflict directly and, indirectly though work-related support from coworkers and work-related support from supervisor. Moreover, we consider that work-family conflict as a mediator between work-related support (organizational, supervisor and coworkers) and emotional exhaustion (Fig. 1).

3. Method

3.1. Data collection and sample

Data were collected using an on-line questionnaire sent to the participants upon Institutional Directors' approval authorization to take part in the research. Each participant received information about the purpose of the study, the voluntary nature of participation and the anonymity of the data and findings. The selection criteria required participants to be women working full-time in elderly care facilities and had to be caregivers who spent most of their workdays interacting with elderly clients. A sample of 171 women, aged between 21 and 64 years old ($Mage = 41.16$, $SD = 10.18$), 45% had a university degree, 34% completed high school/vocational training and 21% had elementary education and 48% are mothers. They worked in two types of institutions, non-profit or private institutions (96%) and public institutions (4%), working in a fixed schedule (64%) and work in shifts (36%).

3.2. Measures

In all the scales respondents were asked to agree or disagree with each item (1 = strongly disagree and 5 = strongly agree).

Emotional Exhaustion was measured using 8 items from the Portuguese adapted version of *The Maslach Burnout Inventory* (*MBI*) by Vicente, Oliveira, and Maroco (2013). Sample item "Due to my work I feel emotionally exhausted". Internal consistency was $\alpha = 0.87$.

Work Social Support was measured by 18 items adapted from Boyar, Campbell, Mosley, and Carson (2014) measuring work-related support from the supervisor, from the coworkers and from the organization. Sample item for work-related support from the supervisor "*My supervisor is understanding or sympathetic on the job*". Internal consistency was for each scale was, respectively, $\alpha = 0.89$, $\alpha = 0.87$ and $\alpha = 0.84$.

Work-Family Conflict was measured using 6 items capturing the time and strain experienced by study participants adapted from Matthews, Kath, and Barnes-Farrell (2010). Sample item include "Due to my work responsibilities I'm not able to spend the time with my family that I would like". The internal consistency for work-family conflict (time) was $\alpha = 0.95$ (three items), and for work-family conflict (strain) $\alpha = 0.92$ (three items).

4. Results

Table 1 shows the means, SDs and intercorrelations among the study variables.

The proposed theoretical model was tested using AMOS 21. The fit indices for the measurement model adopted in the study were as follows: $\chi 2/df = 1.79$, RMSEA = 0.037, CFI = 0.96, GFI = 0.97 and SRMR = 0.005. These values indicate an acceptable fit between the measurement model and the observed data. Post-estimation modification indices were used to see if any meaningful adjustments grounded in theory needed to be done. Results for the adjusted structural model tested are shown in Fig. 2. Standardized coefficients are reported. Work-related support

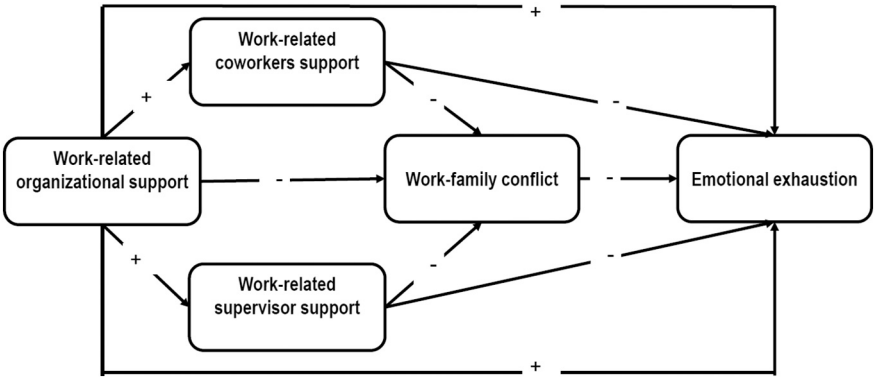

Fig. 1. Theoretical model.

Table 1
Means and standard deviations and intercorrelations.

Variables	M	SD	1	2	3	4	5
1. Work-related support from the supervisor	3.39	1.41	–				
2. Work-related support from the coworkers	4.28	1.32	0.61**	–			
3. Work-related support from the organization	3.01	1.21	0.70**	0.57**	–		
4. Work-family conflict	2.86	1.25	−0.35*	0.17	0.46**	–	
5. Emotional exhaustion	2.89	0.76	−0.42*	0.22	0.45**	0.67**	–

** $p < 0.001$.
* $p < 0.01$.

from the organization had a positive and statistically significant relationship with work-related coworkers support ($\beta = 0.57, p < 0.001$) and work-related supervisor support ($\beta = 0.70$, $p < 0.001$). Moreover, work-related support from the organization impacted work-family conflict indirectly via work-related coworkers support ($\beta = -0.12$, $p < 0.001$) and work-related supervisor support ($\beta = -0.48$, $p < 0.001$). Work-family conflict had an impact on emotional exhaustion ($\beta = 0.68$ $p < 0.001$).

5. Discussion

Our results also call attention to the central mediation role played by work-family conflict in the process that lead to emotional exhaustion (Zhang et al., 2020). When health care providers experience work-family conflict this is related with their emotional exhaustion with work-related support having a buffer effect on emotional exhaustion, but only channeled through work-family conflict. The results indicated that while work-related coworkers' support and work-related supervisor support have a direct impact on work-family conflict, whereas the influence of work-related support from the organization on the latter is channeled entirely through work-related coworkers support and work-related supervisor support. Moreover, the effects of work-related supervisor support on work-family conflict appear to be much stronger than the effect of work-related coworkers support, highlighting the crucial role of supervisors in easing the experience of work-family conflict in their subordinates. The support given by the supervisors to the subordinates was shown to be an essential to decrease their experience of work-family conflict.

6. Conclusion

Our findings are in line with previous studies that point out to the crucial importance of supervisors in reducing their subordinates' levels of work-family conflict. From the human resources point of view our results claim attention for the importance of developing supportive organizational climate through the actions of supervisor and coworkers that can be effective in promoting general female health workers well-being. As it is pointed out by Zhang et al. (2020) healthy workers can perform better and consistently contribute towards accomplishing organizational goals. Continuing to raise awareness about the importance of work related support in mitigating the effects of work-family conflict and emotional exhaustion can be crucial for female health care workers to handle critical patients properly and to achieve high-quality standards in their work across many different tasks (Zhang et al., 2020).

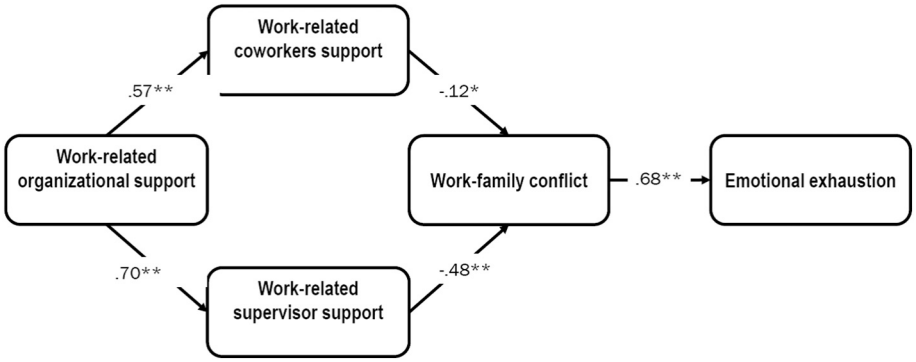

Fig. 2. Empirical model (only significant paths are shown).

6.1. Limitations and future research

This study is not without limitations. Data were collected using from self-reporting questionnaires, raising concerns about common method variance causing an overestimation. As a cross-sectional study causal relationship between the variables cannot be established and the reciprocal direction of the relationships cannot be determined based on our results. For example, emotional exhaustion could also influence work-family conflict. In the future research, this could be improved by collecting longitudinal data. Another line for future research could be the inclusion of other dimensions of burnout (e.g., depersonalization and reduced personal accomplishment).

Declaration of competing interest

No potential conflict of interest was reported by the authors.

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