

## Task Identity and Job Autonomy as Correlates of Burnout among Nurses in Jos, Nigeria

**Sulaiman Olanrewaju Adebayo**  
(Corresponding Author)  
Department of Psychology  
Ekiti State University, Ado-Ekiti  
Nigeria.  
e-mail: lanryadd@yahoo.com

**Ifenna D.Ezeanya**  
Department of Applied and General Psychology  
University of Jos, Jos  
Nigeria  
e-mail: izimuzo2k3@yahoo.com

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### Abstract

This study examined the relationships between task identity, job autonomy and burnout of nurses in Jos, Nigeria.. 79 nurses selected from three health institutions in Jos responded to Job Diagnostic Survey and Maslach Burnout Inventory. Three hypotheses were tested using Pearson Product Moment Correlation Statistics. Findings showed that task identity had negative significant correlation with nurses experience of burnout ( $r(77) = -0.59, p < .01$ ) and job autonomy had a negative significant correlation with nurses experience of burnout ( $r(77) = -0.46, p < .01$ ). Discussions were made in light of extant literature. Implications of these findings were drawn and recommendations made for further studies.

**Keywords:** Task Identity, Job Autonomy, Burnout, Nurses, Jos, Nigeria.

### 1. Introduction

The burnout concept has inspired a wealth of research activity over the past decade (Leiter & Harvie, 1996). As an occupational hazard specific to human service occupations (Cox & Leiter, 1992; Maslach & Jackson, 1986), burnout is of interest to researchers in psychology, management and medical science. Substantial research has identified nursing, profession as one of the categories of human service work that is prone to burnout (Wu, Zhu, Wang, Wang & Lan, 2007). Cordes and Dougherty (1993) proposed that burnout would lead to negative employee attitudes or behaviour towards customers, work, and the organization (e.g. diminished service quality, reduced degree of job

involvement, or increased absenteeism, turnover, and decreased task performance). Etzion (1988) further emphasized on burnout, and its decreased dynamic aspects. He sees as a process of energy depletion and deterioration of performance caused by continuous daily pressures, rather than critical life events. In this process, enthusiasm wanes while previous involvement, initiatives, seriousness, and sense of responsibility are gradually replaced by patterns of routines and indifference attitude in work environment.

Burnout has three important components. They are emotional exhaustion, depersonalisation, and reduced personal accomplishment (Leiter & Harvie, 199, Maslach & Jackson, 1986, Maslach, Schaufeli & Leiter, 2001). Emotional exhaustion refers to mental and physical, tension and strain resulting from job-related stressors, depersonalisation refers to distancing on oneself from others and viewing others impersonally, and reduced personal accomplishment is a feeling of negative self-evaluation. Emotional exhaustion, one of the most extreme varieties of work-related strain, manifests itself in employees as a general loss of feeling, concern, trust, interest, and spirit (Maslach, 1982) Etzion (1984) also refers to it as feeling depressed and occurs over a long period of time and passes through different stages (Matteson & Ivancevich, 1987). The first stage is characterized by “stagnation” in which signs of fatigues and depression appear though not quite noticeable, the second stage takes the form of “detachment” when its signs become apparent, it is characterised by psychological and physical withdrawal, apathy, and below average performance., The final stage is where an individual is completely “burnout out and emotionally exhausted” He/she is depersonalized, apathetic, doubtful of his/her self-efficacy, devoid of a sense of accomplishment, and becomes a poor performer.

Colman (2003) defined burnout as “an acute stress disorder or reaction characterised by exhaustion resulting from overwork, with anxiety, fatigue, insomnia, depression and impairment in work performance.” According to Leatz and Stolar (1993) it is a physical, emotional and mental exhaustion caused by long-term involvement in stressful and emotionally demanding situations, combined with high personal expectations for one’s performance. It happens when work loses its meaning, and the ratio of stress to reward tilts heavily towards stress. Burnout is a psychological and physical outcome of prolonged and high levels of stress at work. It commonly occurs among employees who are unable to cope with extensive work pressures which demands on their energy, time, and resources and among employees whose work requires dealing with people. Researchers have found that burnout brings enormous costs to both organisation and individuals because it negatively impacts employees’ job attitudes and leads to undesirable behaviour, such as lower job involvement, reduced task performance, and increased turnover intentions (Leiter & Maslach, 2009). By and large, burnout may especially have serious implications for the Nigerian nurses because of the peculiar nature of their work conditions characterised by office politics and, shifting, and work pressure.

Recent research has adopted job demands-resources (JD-R) model to explain how burnout originates and has shown that heightened job demands and a deficit of job resources predict an increase in future self-reported burnout scores (Demerouti, Bakker, Nachreiner, & Schaufeli, 2001, Schaufeli, Bakker, & Van Rhenen, 2009). Job demands are the physical, social, or organizational aspects of a job that requires an employee to exert sustained physical or mental effort. When this is much challenging on individual, burnout is most likely to occur, more especially exhaustion. Job resources are the physical, psychological, social, or organisational aspects of job that may reduce job demands, assist in achieving work goals, or stimulate personal growth and development. Lack of jobs resources heightens job demands and eventually leads to withdrawal or disengagement (Demerouti, et al, 2001). The present study examines two job characteristics (task identity and job autonomy) intended to reduce experience of burnout and posits that these two job characteristics may be considered as job resources (Hackman, Oldham, Janson & Purdy, 1975). Lack of autonomy can make employee not to meet the demands placed upon them since they may not be in position to make important decisions critical to task accomplishment. Task identity stimulates personal growth and development (Hackman, et al, 1975) and may help employees achieve their work goals. The two job characteristics seem capable of reducing burnout through the second process specified in the JD-R model. Therefore it is expected that these job characteristics will have a negative relationship with burnout experience of Nigerian nurses.

The extant literature supports the above expectation. Job autonomy has been found to moderate burnout ( e.g.Burke &Richardson, 1993, Cordes &Dougherty, 1993, Chiu, 2000, Ito & Brotheridge,

2003, Nekoei-Moghadam, Poor & Sadeghi, 2008, Adebayo & Ezeanya 2010). In the same fashion, task identity also moderates burnout (Chiu, 2000, Tummers, Janseen, Landweerd & Houkes, 2001, Grandy, Fish, Steiner, 2005, Nekoei-Moghadam, Poor & Sadaghi, 2008, Adebayo & Ezanya, 2010, Bremner & Carriere, 2011). The findings of Abraham (1997) and Pizam and Neumann (1999) also corroborated the above assertion. Furthermore, the two job characteristics; job autonomy and task identity, have been found to relate to each other (Handricks, 2011) although their interaction effect on burnout was not established by Adebayo & Ezeanya (2010).

It is on the basis of these findings that this study is conceived to test the following hypotheses:

1. Job autonomy will have significant negative relationship with nurses' experience of burnout.
2. Task identity will have significant negative relationship with nurses' experience of burnout
3. Job autonomy will have significant positive relationship with task identity of nurses.

## 2. Method

### 2.1 Participants

A total of 79 nurses participated in the study. The sample was drawn from four hospitals (Jos University Teaching Hospital, Plateau Specialist Hospital, Our Lady of Apostles Hospital and Evangelical Church of West Africa Hospital) all located in different parts of Jos metropolis. The four hospitals were chosen above other hospitals because they are where qualified nurses can be found. A simple random sample of yes and no was adopted in selecting the sample. Those who picked yes participated in the study.

### 2.2 Instruments

Two instruments were used for the study.

1. Job Diagnostic Survey (JDS)
2. Maslach Burnout Inventory (MBI)

The Job Diagnostic survey (JDS) is a 21 items scale with seven sub-scales. The scale has been standardized in Nigeria by Omoluabi (2000a). Two sub-scales that measure task identity and job autonomy were adopted. The abridged scale have 7 items in which 1,2,3, which were items 4,5,6, in the original scale measure task identity while items 4,5,6,7, which were items 10,11, 12, 13, measures job autonomy. The scoring key ranges from "very inaccurate" (1) to "very accurate" (7). Items 1,3,4,6,7, were scored directly while 2,5, were scored in a reverse order. The psychometric property revealed that it has internal consistency alpha reliability coefficient of 0.68 for task identity and 0.6 for job autonomy while the validity coefficients ranges from 0.16 to 0.51.

The Maslach Burnout Inventory is a 22- items scale developed by Maslach & Jackson (1986), and was designed to measure three components of burnout. Items 1,2,3,6,8,13,14,16,20, measure emotional exhaustion, items 5,10,11,15,22, measure depersonalization and items 4,7,9,12,17,18,19,21, measure reduced personal accomplishment. The scoring key ranges from "a few times a year" (1) to "everyday" (6). All the items that measure emotional exhaustion and depersonalization were scored in a reverse order. This scale has been standardized in Nigeria by Omaluabi (2006). The Psychometric property revealed that it has internal consistency alpha reliability coefficient of 0.86 and validity coefficient range of 0.01 to 0.36.

### 2.3 Procedure

A total of 85 copies of task identity, job autonomy and burnout scales were administered to nurses at the four hospitals. This was achieved with the aid of hospital personnel officers. The participants were only nurses on permanent employment with the organisations. Out of 85 copies distributed, 81 copies of the scale were completed and returned. This represented a percentage return of 95.29. Of this number that were returned, 2 copies (2.47%) were discarded as a result of improper and incomplete

responses leaving 79 (97.53%) properly filled copies. The data generated from these properly completed scales were used for statistical analysis

## 2.4 Design/Statistics

The study was carried out by means of field study. Based on the fact that the study was interested in investigating relationships between variables a correlational design was used. Also Pearson product Moment Correlation Statistics was used for data analysis

## 3. Results

The study made use of Pearson Moment Correlation Statistics. Based on this analysis the following findings were made.

**Table 1 Correlation Matrix showing relationship between Task Identity and Burnout among Nurses in Jos.**

N	Factor	Mean	S D	df	r.cal	P
79	Task identity	4.25	1.21	77	-0.59	< .01
	Burnout	62.37	13.43			

From the table above, mean score of 4.25 and standard deviation of 13.43 on burnout were observed. Task identity had significant negative correlation with burnout ( $r(77) = -0.59, P < .00$ ).

**Table2: Correlation Matrix showing Between Job Autonomy and Burnout Among Nurses In Jos**

N	Factor	Mean	S. D	df	r.cal	P
79	Job Autonomy	3.64	1.38	77	-0.46	< .01
	Burnout	62.37	13.43			

From the table above, mean score of 3.64 and standard deviation of 1.38 on job autonomy and mean score of 62.37 and standard deviation of 13.43 on burnout were observed. Job autonomy had significant negative correlation with burnout ( $r(77) = -0.46, P < .00$ ).

**Table3: Correlation between Task Identity and Job Autonomy among Nurses in Jos.**

N	Factor	Mean	SD	Df	r.cal	P
79	Task identity	4.25	1.21	77	0.40	> .05
	Job Autonomy	3.64	1.38			

From the table above, mean score of 4.25 and standard deviation of 1.21 on task identity and mean score of 3.64 and standard deviation of 1.38 on job autonomy were observed. No significant correlation was observed between task identity and job autonomy ( $r(77) = 0.40, P \geq .05$ ).

## 4. Discussions

The relationships between task identity, job autonomy and burnout were examined. The results of the study revealed the following findings;

First task identity had a significant negative relationship with burnout. This finding suggests that when nurses have a high perception of task identity, they are likely to experience low degree of burnout. The concept of task identity as earlier stated deals with employees' ability to perform a task from beginning to end with a visible outcome (Hackman et al 1975). Task identity is viewed as helping employees to grow and develop and as such meet up with the demands of their job. This explains the finding that when task identity is on the increase, burnout is decreasing. This observation is supported by the findings of other researchers ( e.g. Grandy, Fish & Steiner, 2005; Pizam and Neumann, 1999.; Adebayo and Ezeanya, 2010; and Bremner and Carrere,2011). This suggests that employee's task identity helps reduce the experience of burnout.

Job autonomy was also found to have a negative significant relationship with burnout. In the same light, nurses' perceptions of job autonomy seems to reduce their experience of burnout. Job autonomy deals with employee's ability to exercise discretion while performing their job (Hackman et al, 1975). When employees enjoy high level of autonomy they are likely to meet up with their job demands and thereby reduce the experience of burnout. This findings is supported by those of Abraham (1997), Nekoei-Moghadam, Poor and Sadeghi (2008), Cordes and Dougherty (1993) and Adebayo and Ezeanya (2010). However the relationship between the two job characteristics was not significant. This is at variance with the findings of Handricks (2011). In Handricks' study the two were found to have a significant relationship.

The JD-R model of burnout assumed that this two job characteristics fall with the second process which it referred to as lack of job resources. It is argued that existence of the resources helps reduce job demands, assists in achieving work goals, and stimulates personal growth and development (Demerouti, et al.2001). These two job characteristics have significant negative relationship with burnout thus concurring that job resources are capable of reducing nurses' experience of burnout. by stimulating professional efficacy.

This implies that stimulating professional experience of nurses may reduce their experience of burnout and this may be achieved by improving the physical, psychological, social, and organizational aspects of their job. This is a food for thought for managers of healthcare institutions, governments and health policy formulators in Nigeria. good exploit for government, management and other health policy formulators in Nigeria.

Conclusively, although burnout is a negative work and organization outcome, its negative effects can be ameliorated or totally avoided by job designs that promote task identity and job autonomy and employees' growth and development. At the organizational level interventions can be planned so that burnout can be avoided. This is based on the fact that lack of job resources is likely to cause burnout among employees .Noteworthy however is that the Jos sample of nurses of this research limits our generalisation of the burnout correlates to Nigerian nurses in general.. Further research is needed in this clime to unearth other individual, job and organizational correlates and consequences of burnout in nursing professional practice in Nigeria.

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