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ORIGINAL ARTICLE

Psychometric properties and scales of the Granada Burnout Questionnaire applied to nurses



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Abstract Nurses are an occupational group with extremely high levels of burnout. The most accepted definition of the burnout syndrome was proposed by Maslach and Jackson, who characterized it in terms of three dimensions: (i) Emotional Exhaustion; (ii) Depersonalization; (iii) Personal Accomplishment. This definition was the basis for the Granada Burnout Questionnaire (GBQ). The objective of this research was to evaluate the psychometric properties of the GBQ and to elaborate an evaluation scale to measure burnout in nursing professionals in Spain. A total of 1,177 nurses participated in this study and successfully completed the GBQ. Evidence of construct validity was verified by cross-validation and convergent validity, and evidence of criteria validity was checked by concurrent validity. Cronbach's alpha was used to measure internal consistency. The results obtained in our study show satisfactory fit values in the confirmatory factor analysis and in the evidence of convergent and concurrent validity. All of the Cronbach alpha values were greater than .83. This signifies that the GBQ has good psychometric properties that are applicable to nurses. For this purpose a scale of T-scores and centiles was created that permitted the evaluation of burnout in Spanish nursing professionals.

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PALABRAS CLAVE

Cuestionario de Burnout Granada; profesionales de Enfermería; burnout; estudio instrumental

Propiedades psicométricas y baremos del Cuestionario de Burnout Granada en profesionales de Enfermería

Resumen Los enfermeros son uno de los colectivos profesionales que presentan mayores niveles de burnout. La definición más aceptada de este trastorno fue propuesta por Maslach y Jackson, y se caracteriza por Cansancio Emocional, Despersonalización y Realización Personal. Esta definición operativa fue usada en la elaboración del Cuestionario de Burnout Granada (CBG). El objetivo de la presente investigación fue evaluar las propiedades psicométricas del CBG y elaborar un baremo para profesionales de enfermería españoles. El CBG era cumplimentado por 1177 enfermeros. Las evidencias de validez de constructo fueron examinadas usando estrategias de validez cruzada y validez convergente, y las evidencias de validez de criterio mediante la validez concurrente. El coeficiente alfa de Cronbach se utilizó para medir la consistencia interna. Los resultados indican índices de ajuste satisfactorio en el análisis factorial confirmatorio, y en las evidencias de validez convergente y concurrente. Todos los valores de alfa de Cronbach fueron superiores a 0,83. Los resultados muestran que el CBG tiene buenas propiedades psicométricas para ser usado en enfermeros. Se elaboró un baremo en puntuaciones T y centiles que permite evaluar burnout en enfermeros españoles.

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Over the last forty years, burnout has come to be acknowledged as a widespread psychological problem that has serious consequences, not only for people who suffer from it, but also for the entire workplace. Although there is no universally accepted definition for this syndrome, the one most often cited was proposed by Maslach and Jackson (1981) and its subsequent modifications (Maslach & Jackson, 1986; Maslach, Schaufeli, & Leiter, 2001). These authors describe burnout as a response to chronic work-related stress, characterized by the dimensions of Emotional Exhaustion, Depersonalization, and Personal Accomplishment. Emotional Exhaustion alludes to a perceived lack of energy and, as its name implies, the exhaustion of emotional resources. Depersonalization is the development of indifferent and cynical attitudes towards patients, co-workers, and the organization of employment. Finally low Personal Accomplishment refers to the tendency of workers to negatively evaluate themselves in relation to their work capacity.

Although the importance of the work carried out by healthcare professionals, particularly nurses, is beyond dispute, this occupation is extremely prone to the development of burnout syndrome (Epp, 2012; Kheiraoui, Gualano, Mannocci, Boccia, & La Torre, 2012; Lin, Liao, Chen, & Fan, 2014). Nurses care for patients, sometimes in contexts in which they are at risk of suffer physical and verbal aggressions (Gascon et al., 2013). In certain cases, this can lead to occupational illness (Trybou et al., 2014) and even to the abandonment of the profession (Farquharson et al., 2013). An added difficulty is the dichotomy which nurses must face daily in their work. Even though they are expected to have a friendly caring attitude, inherent in their vocation, they often have no choice but to be coldly objective in order to make difficult decisions in which no emotional response is possible. This can evidently become a source of conflict. For this reason, nurses are continuously obliged to deal with high levels of stress, which contributes to the appearance of

burnout syndrome (Campagne, 2012; Cañadas-de la Fuente et al., 2014).

The consequences of this disorder affect all levels of society in one form or another. Nurses who suffer from burnout generally have psychosomatic problems (e.g. weakness and insomnia); emotional problems (e.g. anxiety and depression); attitude problems (e.g. hostility, apathy, and distrust), and behavioral problems (e.g. aggressiveness, irritability, and feelings of isolation) among others (Jansson-Frojmark & Lindblom, 2010; Leape et al., 2012). At the organizational level, problems can also arise that make it impossible to achieve the objectives for healthcare personnel. Because of the current economic crisis in Spain and the structural changes in the National Healthcare System, these objectives are already difficult to attain without any other added difficulties.

For example, the emotional exhaustion of these workers can cause conflict among the staff and result in absenteeism, low spirits, and decreased productivity (Trybou et al., 2014). Furthermore, those who most suffer the consequences of burnout in nurses are the users of healthcare services. It goes without saying that a harmonious workplace environment generates less stressful work conditions and this means a lower level of burnout in workers (Zhang et al., 2014). Evidently, if there is a reduction in stress at work, this will help to prevent burnout and also to increase the quality of patient care in general (Farquharson et al., 2013).

Although there are different methods of evaluating the burnout syndrome, the most frequently used is the Maslach Burnout Inventory (MBI) (Maslach & Jackson, 1981). In Spain, Seisdedos' (1997) adaptation of this inventory used to be widely applied in burnout research. However, this version finally went out of print. In any case, even before this happened, it had drawbacks. In our opinion, some of the scales of this inventory are not valid for certain professional groups. Over the years, its psychometric evaluation

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