

THE EFFECT OF BURNOUT AND STRESS ON ORGANIZATIONAL COMMITMENT: EXAMPLE OF HEALTH WORKERS

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ABSTRACT

In our study, it was aimed to investigate the effect of burnout and stress levels on organizational commitment of health personnel working in private and public hospitals comparatively. In this context, survey data were collected with 300 public and 300 private sector employees using face-to-face interviews. In the study, Maslach Burnout Inventory was used to measure burnout, the Mayerson Stress Source Scale was used to detect stress sources, and Meyer and Allen's Organizational Commitment Scale were used to measuring organizational commitment. After the collected data were subjected to validity and reliability tests, the hypothesis tests were tested by performing the analyzes.

According to the results of the study, when all data were evaluated collectively, it effects as Y (organizational commitment) = 2.511-0.85 (burnout); it has been found that .120 ** between organizational commitment and burnout; a positive and bidirectional correlation at .101 ** level with stress; a positive and bidirectional correlation at .500 ** level between stress and burnout; the role of partial mediation of age is due to the effect of burnout on commitment.

Within the scope of the research, for the first time in the literature, the mediating role of age of the effect of burnout level of the staff working on commitment in hospitals was examined through structural equation model. This is the greatest original contribution of our research to the literature. In addition, burnout in comparison of public and private hospitals in Turkey, although not observed in another study investigating the same time stress and organizational commitment, in literature within the scope of research burnout, stress and the organizational commitment in recent years Turkish and Russian resources with another study evaluating the comparative it has been encountered.

Key Words: Organizational Culture, Burnout, Stress, Organizational Behavior, Health Management, Structural Equation Model

TÜKENMİŐLİĐİN VE STRESİN ÖRGÜTSEL BAĐLILIĐA ETKİŐİ: SAĐLIK ÇALIŐANLARININ ÖRNEĐİ

ÖZET

Arařtırmamızda, özel ve kamu hastanelerinde de çalışan sađlık personelinin tükenmiŐlik ve stres düzeylerinin örgütsel bađlılıklarına etkisini karŐılařtırılmal olarak arařtırmak amaçlanmıŐtır. Bu bađlamda 300 kamu ve 300 özel sektör çalışanı ile yüz yüze görüŐme yöntemiyle anketler uygulanarak arařtırma verileri toplanmıŐtır. Arařtırmada, tükenmiŐliĐi ölçmek için kullanılan Maslach TükenmiŐlik ÖlçeĐi, stres kaynaklarını tespit etmede Mayerson Stres KaynaĐı ÖlçeĐi ve örgütsel bađlılıĐı ölçmek için Meyer ve Allen'in Örgütsel BađlılıĐ ÖlçeĐi kullanılmıŐtır. Toplanan veriler, geçerlik ve güvenilirlik testlerine tabi tutulduktan sonra analizler gerçekteŐtirilerek hipotez testleri sınanmıŐtır.

Arařtırma sonuçlarına göre, bütün veriler topluca deđerlendirildiĐinde tükenmiŐliĐin Y(örgütsel bađlılıĐ) = 2,511-0,85(tükenmiŐlik) Őeklinde etkilediĐi; örgütsel bađlılıĐ ile tükenmiŐlik arasında .120**; stres ile .101** düzeyinde pozitif ve çift yönlü bir iliŐki; stres ile tükenmiŐlik arasında ise .500** düzeyinde pozitif ve çift yönlü bir iliŐki olduĐu; tükenmiŐliĐin bađlılıĐa etkisinde yaŐın kısmi aracılık rolü ortaya çıktıĐı tespit edilmiŐtir.

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Araştırma kapsamında, literatürde ilk defa, hastanelerde çalışan personelin tükenmişlik düzeyinin bağlılığa etkisinde yaşın aracılık rolü, yapısal eşitlik modeli aracılığıyla incelenmiştir. Araştırmamızın literatüre en büyük özgün katkısı budur. Ayrıca, Türkiye’de özel ve kamu hastanesinin karşılaştırmalı olarak tükenmişlik, stres ve örgütsel bağlılığı aynı anda araştıran başka bir çalışmaya rastlanmamakla birlikte; araştırma kapsamında yapılan literatür taramalarında tükenmişlik, stres ve örgütsel bağlılığı son yıllardaki Türk ve Rus kaynakları ile karşılaştırmalı olarak değerlendiren başka bir çalışmaya rastlanılmamıştır.

Anahtar Kelimeler: Örgüt Kültürü, Tükenmişlik, Stres, Örgütsel Davranış, Sağlık Yönetimi, Yapısal Eşitlik Modeli

INTRODUCTION

The enterprises that established to produce goods and services that will meet the needs of people interact with the environment they are connected with the input-output relations. The fact that organizations continue their lives for many years and show high performance is possible with healthy to this interaction. In today's world, where change is the only thing that does not change, it is an inevitable fact that people, organizations, and societies face in their lives.

Increasing competition and rapidly changing environmental conditions make organizations and therefore their managers facing important opportunities and threats. No matter how successful and organized the organizations are, an unexpected development in management approaches can change all balances. Moreover, while organizational managers are dealing with more important problems, they cannot follow problems encountered by employees at the beginning of their tasks or the new ideas they can produce to develop the organization and the opportunities they can evaluate. Hence, many organizations in the world have started to make a number of studies by becoming aware of the necessity of vaccination of dependence fact to employees. Thus, employees' self-confidence and commitment to the organization are increasing, which is reflected in individual performance and thus in organizational outcomes.

The provision of health services in a truly organized manner started after World War II. Many international organizations have been established and the concept of health has begun to be adopted as a social right. There has been a period when national health systems covering a large part of the society were developed in different forms, and that unhealthy was addressed as a social problem. In our country, parallel developments have been achieved.

Modern civilization, along with well-known achievements that have facilitated and improved the living conditions of people, is characterized by an increase in problems that contribute to the growth of stressful situations both in professional activities and in the way of life in general. In some professions, stress has a psycho-physiological nature (air traffic controllers, pilots and drivers of vehicles, etc.), which leads to the need for additional regulation of the duration of their working day and preferential terms of retirement. In other cases, the problems of emotional overload come to the fore, in the most complex cases taking the form of emotional burnout. In many countries, especially developed countries, the concept of "emotional burnout syndrome (EBS)" has emerged in relation to professions such as medics, teachers, law enforcement officials. Constant, and sometimes excessive, load on emotions, on the psyche, leads to the fact that, starting from a certain limit, representatives of these professions are no longer able to adequately empathize with the serious problems of people with whom they are obliged to interact because of their professional competencies. This reduces both the quality of their professional functions and their own health.

It is possible to know the interaction between the burnout level, stress level and the organizational commitment level of hospital workers, and to ensure and designate the most

effective way to design and develop managerial strategies, policies, and tactics that will support the elements such as health managers' organizational performance reports and efficiency. Hospitals and health managers who cannot provide to achieve this are doomed to failure. This situation creates serious problems for the management of health institutions.

1. BURNOUT CONCEPT IN HEALTH MANAGEMENT

One of the most frequently encountered problems in business life is burnout. Individuals face a business life filled with challenges that make themselves felt in every field of work. These constraining can disrupt the person's psychological balance, on the one hand, reveal the energy necessary for the continuation of life, and on the other hand, leave the individual desperate, vulnerable and weak with a dead end that can destroy all of his energy. However, the stress caused by technological changes as well as speed and quality, which makes today's business life challenging, drives the worker to burnout at the end of the working day (Çavuş et al., 2007).

As mentioned by Maslach, Schaufeli, and Leiter, the term burnout is a concept that has specific to speech-language, a connotation by means non-academic. The first articles on the concept of burnout, one of the concepts frequently discussed in the literature on organizational behavior literature, were written by Freudenberger, who works as a psychiatrist in an alternative health agency, and by Maslach, a social psychologist who works about emotions in the workplace (Maslach et al., 2001).

Burnout includes many different symptoms. Benson and Margraith (2005) show depression, cynicism, shyness, loss of passion and discouragement among the symptoms of burnout. Maslach and Jackson (1981) explained that emotional burnout, decreasing the sense of personal accomplishment and depersonalization were the three main dimensions of burnout.

Emotional Depletion: Emotional burnout is often thought to be a key element of burnout and is the phase of burnout that is the most underresearched, understood and agreed on (Ashforth et al., 1997). Maslach 's burnout model described that especially emotional burnout is depletion of emotional energy and emotional resources of one are not enough to cope with the situation (Cooper, 2001).

Desensitization: Desensitization is the second component of burnout. It is defined as losing the ability to see individuals in the environment as individuals with emotions and beginning to see them as objects (Maslach and Jackson, 1981).

Reducing the sense of personal accomplishment: The decrease in the sense of personal accomplishment has characterized as a decrease in efficiency and skill, low morale and being unable to cope with the situation (Maslach and Leiter, 2005).

1.1. Some Studies About Burnout in the Field of Health In Turkey and in Russia in Last years

In the study of Yaşlı that is named Nurses Working in a Private Hospital in 2015, Organizational Culture - Burnout correlation, it was found that nurses perceptions of organizational culture in the sublevel, the perception of burnout to be in a low ebb.

In the study of Saraç Eroğlu and Arıkan that is named The Moderator Role of Coping with Stress in the Relation of Trauma, Burnout and Life Satisfaction in Immediate Aid Workers in 2016, the correlations between the effect of traumatic events witnessed by the ambulance employees and burnout and life satisfaction levels were examined. In addition, the former (moderator) role of coping strategies used by employees within the scope of these

correlations was examined. As a result of the analyzes, it is determined that the effect of trauma on the sub-dimensions of high excitability affect the emotional burnout at a high level, the relapse is negatively related to self-alienation, on the other hand, the excessive excitability is directly proportional to alienation, the coping strategies in the correlation between the effect of trauma and burnout and life satisfaction levels did not have a statistically formative role.

In the study of Urgan that is named Evaluation of Occupational Health Statuses of Medical Specialization Students in Kocaeli Province and Organizational Stress Levels in 2018, the limits of working conditions of assistant doctors are not determined by legal regulations and they are deprived of a safe working environment, stress elements originating from organizational cause physical disease with work conditions, while stress that is given by the workload, role conflict, and responsibility emotion according to the internal branches in the employees in the surgical branches were at the forefront, the role ambiguity in the assistant doctors working in non-surgical branches, lack of job satisfaction and future uncertainty were found to be higher than those of the surgical branches.

In the study of Boyko that made in 2014 and is named as “Short-term problem-oriented psychological consulting in a psychiatric setting: opportunity's analysis on the case study” make diagnoses a patient's short-term problem psychological counseling situation in a psychiatric clinic: schizophrenia, paranoid form, continuous hallucination status. While working with clinical patients, the possibility and the limitedness of using a psychotherapeutic type with burnout level is examined.

In the study of Zelenova and Zakharov that made in 2014 and is named as “Burnout and Stress in the Context of Professional Health in Military Personnel”, it is determined that there are correlations between compulsion indicators (burnout and stress symptoms) and personality characteristics and social demographic situations of subjects; various approaches to the professional health study are explained, focusing on the concept of professional health and how burnout and stress are related to job performance in individuals.

In the study of Lovakov that is made in 2017 and is named as “Negative Effects of Organizational Identification of the Worker: Role of the Workaholism”, the strong sense of employee identification with the organization was shown to establish a positive correlation for both workers and organizations. In many new studies, in addition to this, empirical evidence of the entity has been obtained in the organizational definition of negative correlations. In this study, the organizational definition of the employee and the communication of welfare communication were examined, that is, the assumption of the mediating role of the workaholic was tested. The results of the study of the 1783 employee of the Great Russian organization revealed that the level of organizational identity of the employee. In addition to this, it has been found that the emotional burnout and the job that promotes the increase of work increase the excess and providing a rise in necessity.

2. STRESS CONCEPT IN HEALTH MANAGEMENT

Because of the discordant situations in the physical or social environment, the psychological situation when exceeding coping skills (Gunnar & Quevedo, 2007; Cüceloğlu, 2017) creates stress. The two most important concepts in stress are the concepts of stimulant and response (Ivancevich and Matteson, 2002).

Because of stress that is occurred when the expectation and desire of the environment are higher than the adaptation ability of the individual (Turk, 1997), there is a decrease in symptoms in the stage of adaptation to the stressors that create stress and a decrease in resistance to other stimuli. Since the individual has to avoid or adapt to the stressful situation,

the resistance to other stressors decreases. However, resistance often leads to compliance or balance and as the symptoms disappear, is not passed to the depletion phase (Rice, 2012).

Organizational stress is defined as the individual response against the characteristics of the work environment that threatens individuals emotionally and physically (Jamal, 2005). Organizational stress is an obstacle to the emergence of expected normal functions and to exhibited positive organizational behavior due to the physical, emotional or psychological negative reactions (Antonova, 2016) resulting from the failure of the individual to perform the expected activities and roles at the workplace (Luthans, 2002), but can also adversely affect the health of employees (NIOSH, 1998).

2.1. Some Studies about Stress and Organizational Stress in the Field of Health in Turkey and in Russia in recent years

In the study of Urgan that is named as Evaluation of Occupational Health Statuses of Medical Specialization Students in Kocaeli Province and Organizational Stress Levels in 2018, it is determined that, it becomes more difficult to cope with stress as the assistant doctors are deprived of the sleep and rest period that is needed to be spiritually and physically ready for the next day, it reduces the technical skill level of the excessive stress experienced in the surgery room or during surgical operation in surgery branches and thus creates the basis for stress formation.

Özcan (2019) determines that there is .516** size positive and bidirectional correlation between stress and burnout, .102 ** size negatively and bidirectional correlation between stress and organizational commitment, between stress and, 0213* size negatively and unidirectional correlation between burnout and organizational commitment in her study that made in 2019, and is named as "The Effect of Burnout and Stress on Organizational Commitment in Health Workers: A Case of Private Hospital".

In the study of Gafarov and friends that is made in 2015 and is named as "Workplace stress and its impact on the 16-year risk of myocardial infarction and stroke in an open female population aged 25-64 years in Russia/Siberia" is determined that women in Russia / Siberia (Novosibirsk) in 25-64 years of age were found to have a risk of heart attack and stroke related to stress and had 2 or 3 times more risk than those without stress factors.

In the study of Brailovskaia et al. that is made in 2018 and is named as "A Cross-Cultural Study in Germany, Russia, and China: Are Resilient and Social Supported Students Protected Against Depression, Anxiety, and Stress?" is determined to when the dimensions of depression, anxiety, stress, flexibility, and social support were examined on the selected sample in Germany, Russia, and China; flexibility and social support in all samples were significantly associated with depression, anxiety, and stress negatively; They found that associations in Germany had stronger social support dimensions than Russia and China.

3. ORGANIZATIONAL COMMITMENT IN HEALTH MANAGEMENT

Organizational commitment emerges as a collection of multiple interdependencies of the internal and external elements that form the institution and are permeable between its borders. Persons can develop different loyalties to their top managers, colleagues, and communities in the organization; At the same time, they can show different degrees of commitment to their clients, professional chambers, society, and trade unions in out of the organization (Atay, 2006).

The structure and culture created within the institution are important in the commitment of employees to the institution. In institutions, it is factors that encourage

participation in decision-making, respecting employees' views, and increasing the loyalty of individuals to the institution (Avolio et al., 2004; Seker, Ozsoy and Yasar, 2019).

Meyer and Allen (1997) emphasize that this type of commitment is very important because the person thinks of himself/herself as a part of the Institution. Strong emotional commitment means that individuals stay in the Institution and accept its goals and values. Attitudes are tendencies that direct people to certain behaviors.

The continuance commitment also referred to as rational commitment or perceived commitment, means being aware of the costs of leaving the institution (Chen and Francesco, 2000).

3.1. Some Studies that is made about Organizational Commitment in the field of Health in Turkey and in Russia in recent years

In the study of Aydın and friends that is made in 2016 and is named as Correlation between Organizational Culture and Organizational Commitment in Public Hospital, the effects of reward, communication and behavioral empowerment sub-dimensions of organizational culture on the organizational commitment of hospital employees were investigated. In the study, it was determined that there were a medium-level and positive correlation between the organizational culture and communication, organizational commitment of behavioral empowerment and reward sub-dimensions and emotional and normative sub-dimensions of organizational commitment. The organizational commitment of the employees has been found to be higher in the continuity commitment dimension.

In the study of Gül that is made in 2018 and is named as The effect of organizational commitment and organizational change on organizational health in health institutions: A research in Afyonkarahisar provincial center hospitals, it is appointed that continuity commitment of employees with 40 years of age or older, emotional commitment of married and male employees, married employees and medical secretary employees have higher levels of organizational commitment, the level of openness to general organizational change was found to be higher for employees with a postgraduate level of education and medical secretary title.

Yudkevich and friends determine that the level of commitment of academicians working in jobs appropriate to the fields of education was higher in their study that is made in 2013 and is named as “Changing academic profession: Russia country report”.

Lovakov, in his study called Antecedents of organizational commitment among faculty: an exploratory study in 2016, While 317 university faculties affiliated with Russian higher education institutions had the emotional and normative commitment, found that only their emotional commitment was formed when they were working in another higher education institution.

In 2014, Petrovskaya and Kashirina, in their study called as “Organizational commitment and job satisfaction: a study of two generations of the Russian employees”, investigated the emotional, normative and continuity loyalty differences among employees of X and Y generation.

4. RESEARCH

The study was limited to a public hospital in Samsun province and private hospital data due to time and cost constraints. Therefore, the results will not be generalized.

Since the institution is expected to take a lot of time to reach all units of the main mass to perform face-to-face meetings due to 24-hour service and shift working order, sampling method has been adopted easily. The 5-point Likert scale, which is widely used in our country, has been used to measure the degree of participation or not to participate in statements made by employees about an attitude or behavior in their institutions (Nakip and Yaraş, 2017).

The data required for the research were collected by face to face (personal interview) questionnaire method. The face-to-face questionnaire method was preferred in order to ensure that the response rate was high and many questions were asked (Ayten, 2016). A total of 600 employees were interviewed face to face in the research.

Multivariate statistical analysis and parametric and nonparametric tests were used to analyze the data obtained from the study. Descriptive statistics are the values used to present the combined data in a short but meaningful way. One of the important functions of descriptive statistics is to show the distribution of measures and scores (Plotnik, 2009).

Maslach Burnout Scale, which is used to measure burnout, is a 5-point Likert-type scale consisting of 22 expressions and 0- Never, 4- Always options. The Maslach Burnout Scale has three subscales: emotional burnout that includes 9 items, depersonalization that includes 5 items, a low personal achievement that includes 8 items.

In order to measure the organizational commitment of employees, Meyer and Allen's three-dimensional organizational commitment scale was used, which was previously translated into Turkish and tested its validity and reliability (Çetin, 2006). The scale consists of a total of 18 statements that include three dimensions that determine the causes of organizational commitment. Emotional, continuity and normative commitment dimensions in the scale consist of six each expression. The scale is 5-point Likert type.

The Mayerson Stress Source Scale was used to identify the sources of stress that affect employees. The validity and reliability study of the scale in Turkish society was performed by Dinç Sever (1997). This scale; social stress transmitters (stress transmitters arising from the human correlations), work-related stress transmitters (stress transmitters arising from business life), stress transmitters arising from the self-interpretation form (stress transmitters that related to self-interpretation called self-talk arising from the way in which the person interprets the information reflected from the inner and outer world), and stressors transmitters arising from the physical environment (stressors transmitters, including noise and air pollution caused by the physical environment of the person), consists of 43 questions representing a total of 4 sub-dimensions.

SPSS 24.0 and AMOS 24.0 statistical programs were used for the analysis. Frequency distribution, arithmetic mean, standard deviation, percentages, correlation, and regression analysis were performed with the help of programs and structural equation model was developed.

In order to see the correlations between the variables, regression analysis was performed to see the correlations and effects.

Structural equality model was used to analyze the intermediary role. The structural equation model is widely used by researchers in the testing of existing models of social sciences and behavioral sciences and in the development of theoretical models (Fornell and Larcker, 1981). The structural equality model is a comprehensive statistical method used to test the hypotheses developed based on linear correlations between direct measurable variables and latent variables which cannot be measured directly (Hoyle, 2015).

4.1. Research Hypothesis and Model

The model of the research is as follows:

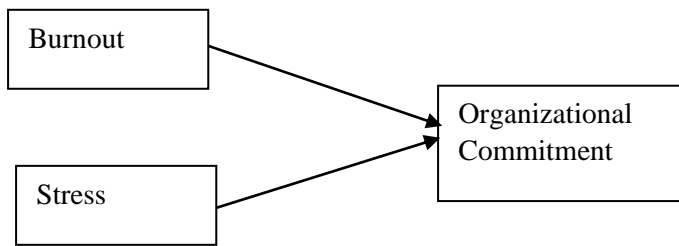


Figure 1: Hypothesis and Model

For the purpose of the research, hypotheses have been formed as follows:

Hypothesis 1: Burnout and organizational stress affect organizational commitment.

Hypothesis 2: There is a correlation between burnout, organizational stress, and organizational commitment.

Hypothesis 3: Age factor has a partial mediation role in the impact of burnout, on organizational stress and organizational commitment.

4.2. Findings

As a result of the reliability analysis for the whole survey, the overall reliability value of the data (Cronbach Alpha Coefficient) was determined as 0,888 in the research.

Table 1. Reliability Tests

| Scales | Alpha Coefficient | Number of questions |
|---|-------------------|---------------------|
| Reliability Test for Stress | ,870 | 43 |
| Reliability Testing for Organizational Commitment | ,866 | 27 |
| Reliability Test for Burnout | ,758 | 22 |

The result shows that the scale has a high degree of reliability. In addition, reliability values (Cronbach's Alpha Coefficients) are within acceptable limits for the sub-dimensions of the scale.

The application questionnaire was applied to 600 health workers in 300 public and 300 private sectors. It is observed that 78% of the participants were female and 22% were male; 113 (18.8%) were 17-24 years old, 192 (32%) were 25-34 years old and 295 (49.2%) were 35 and over; 388 (64.7%) were married and 212 (35.3%) were single; 132 (22%) medical vocational high school, 172 (28.7%) associate degrees, 247 (41.2%) undergraduate, 32 (5.3%) graduate, 16 (2.7%), doctorate and 1 (0.2%) high school graduate; 17 (2.8%) anesthesia, 32 (5.3%) pediatric diseases, 12 (2%) physical therapy and rehabilitation, 1 (0.2%) cardiovascular surgery, 6,36 (% 2,7) neurology, 31 (% 5,2) orthopedics and traumatology, 20 (% 3,3) urology, 46 (% 7,7) internal medicine, 4 (% 0,7) gastroenterology,(3,5%) eye diseases, 6 (1%) cardiology, 17 (2.8%) neurosurgery (brain surgery), 4 (0.7%) practitioner doctor, 14 (2.3%) biochemistry, 58 (9.7%) general surgery, 62 (10.3%) first and emergency help, 5 (0.8%) microbiology 28 (4,7%) radiology, 5 (0,8%) dermatology, 9 (1,5%) infectious diseases, 17 (2,8%) otorhinolaryngology, 2 (0,3%) nephrology, 1 (0.2%) psychiatry, 1 (0.2%)

sports physician, 19 (3.2%) gynecology and obstetrics, 71 (11.8%) of the other and 81 of them (13.5%) work in intensive care; 252 (42%) 0-5 years, 149 (24,8%) 6-10 years, 74 (12,3%) 11-15 years, 54 (9%) 16-20 year and 71 (11.8%) work in the position of 21 years and over and 149 (24.8%) are 0-5 years, 153 (25.5%) 6-10 years, 86 (14.3%) 11-15 years, 92 (15.3%) 16-20 years, 120 (20%) have 21 years and over professional experience.

When the functional form of the correlation between the two variables is concerned, regression analysis is performed. In other words, at what level an independent variable can explain the dependent variable is determined by regression analysis (Bayram, 2004). The effect of burnout and stress on organizational commitment was determined in the study. The level of explanation of the organizational commitment of burnout was found to be, 013, as shown in Tables 2 and 3 (Dzlt R Square =).

Table 2. Model Summary

| Model | R | R Square | Adjusted R Square | Estimated Standard Error |
|-------|------|----------|-------------------|--------------------------|
| 1 | ,129 | ,017 | ,013 | ,57101 |

a. Determinants: (constant), stress, burnout

One of the main reasons for regression analysis is to make predictions about the future. For this, the mathematical regression model should be significant. The table above shows us prediction with the following mathematical model.

Table 3.Table of Regression Analysis Coefficients

| Model | Non-Standardized Coefficient | | Standardized Coefficient | t | Significance |
|---------|------------------------------|----------------|--------------------------|--------|--------------|
| | B | Standart Error | Beta | | |
| (Fixed) | 2,511 | ,112 | | 22,354 | ,000 |
| Burnout | -,085 | ,043 | ,093 | -1,991 | ,047 |
| Stress | -,052 | 045 | ,054 | -1,158 | ,047 |

a. Dependent Variable: Performance

The table above shows that we can make estimation with the following mathematical model. This model can briefly be written as

$$Y (\text{organizational commitment}) = 2,511 - 0,85 (\text{burnout}).$$

According to the results, the hypothesis 1, which proposes that burnout and organizational stress affect organizational commitment, is partially accepted.

The correlation between organizational commitment, burnout and stress level is as in Table-4 in the research.

Table 1. Correlation Table

| Scales | 1 | 2 | 3 |
|-----------------------------|--------|--------|---|
| 1-Organizational Commitment | 1 | | |
| 2-Burnout | ,120** | 1 | |
| 3-Stress | ,101** | ,500** | 1 |

When the table above is examined; between organizational commitment and burnout .120 **; a positive and bidirectional correlation at .101 ** level with stress; between stress and burnout, a positive and bidirectional correlation will be seen at .500 ** level.

According to the results, hypothesis 2 is accepted as there is a correlation between burnout, organizational stress, and organizational commitment.

4.2. Investigation of Mediation Role with Structural Equation Model

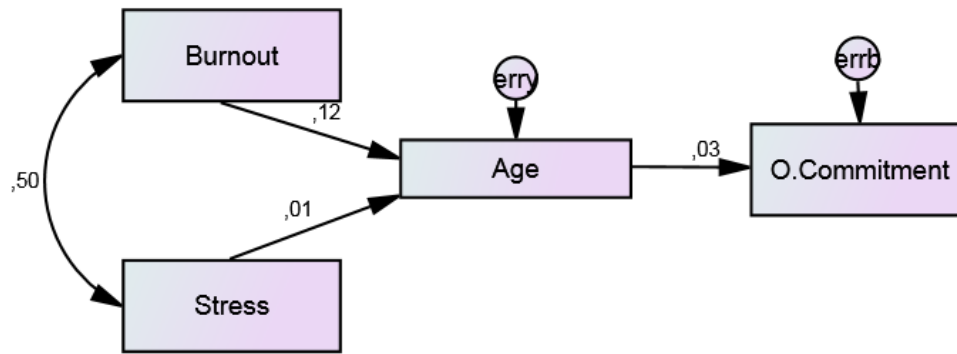


Figure 2. Investigation of Mediation Role with Structural Equation Model

Table 5. Adaptation indices

| Adaptation indices | Perfect Compliance | Acceptable Compliance | Model |
|--------------------|---------------------------------|---------------------------------|-------|
| χ^2/df | $3.00 \leq \chi^2/df \leq 5.00$ | $2.00 \leq \chi^2/df \leq 3.00$ | 4.83 |
| RMSEA | $.00 \leq RMSEA \leq .05$ | $.05 \leq RMSEA \leq .08$ | .076 |
| NFI | $.95 \leq NFI \leq 1.00$ | $.90 \leq NFI \leq .95$ | .953 |
| RFI | $.90 < RFI \leq 1.00$ | $.85 < RFI \leq .90$ | .869 |
| IFI | $.95 \leq IFI \leq 1.00$ | $.90 \leq IFI \leq .95$ | .960 |
| TLI | $.95 \leq TLI \leq 1.00$ | $.90 \leq TLI \leq .95$ | .917 |
| CFI | $.97 \leq CFI \leq 1.00$ | $.95 \leq CFI \leq .97$ | .959 |
| GFI | $.97 \leq CFI \leq 1.00$ | $.95 \leq CFI \leq .97$ | .992 |
| AGFI | $.97 \leq CFI \leq 1.00$ | $.95 \leq CFI \leq .97$ | .960 |

Sources: (Hooper, Coughlan & Mullen, 2008)

When the above table is examined, it will be seen that our model is acceptable. While there was no direct effect between burnout and commitment, the indirect effect occurred as .040. Therefore, it can be said that age has a partial mediating role in the effect of burnout on loyalty. According to the results, hypothesis 3 is accepted as the age factor has a partial mediation role in the impact of burnout, on organizational stress and organizational commitment.

DISCUSSION AND CONCLUSION

When the studies dealing with burnout and performance in the field of health are examined, it is seen that the studies are carried out with additions to the subjects that are widely researched in the literature by differentiating from classical approaches.

Some of these are briefly as follows.

Gómez-Urquiza et al. (2017) found that nurses were most affected by the burnout syndrome in hospitals, high desensitization resulted in low performance, but there was a

heterogeneous distribution according to different demographic variables, and nurses with higher levels of seniority, anxiety and depression had more burnout levels.

Stubbs et al. (2018) found that single chronic disease in elderly individuals is associated with high stress, such as depression, stroke and hearing problems.

Shahin et al. (2018) found that there was a negative relationship between empathy level and personal accomplishment from the exhausted scale sub-dimensions in a study conducted in a public hospital in Ankara.

Carolina et al. (2018) examined burnout studies for nurses in Pubmed, CINAHL, SCOPUS, Scielo, Proquest, CUIDEN and LILACS databases from the beginning to September 2017. It was found that 28% of the researches in the databases found that nurses had high levels of emotional exhaustion and 15% had depersonalization.

Canadas et al. (2018) found that there was a strong relationship between depersonalization, which is a sub-dimension of emotional exhaustion, and personal accomplishment, and that emotional exhaustion and depersonalization suppressed personal performance.

Labrague et al. (2018) found in their research on nurses working in rural areas in the Philippines that their organizational commitment was directly proportional to age and education and inversely proportional to income level.

Nizova et al. (2018) investigated the burnout level of health care workers in Russia and stated that salary, social support and encouragement of health workers in rural areas are necessary due to the increase in single physician burden.

Can and Hisar (2019) conducted a study on nurses working in the state hospital. The negative, low-level relationship between emotional exhaustion and the provision of social service from the professional behaviors of nurses, and emotional burnout, and the lower dimension of proficiency and continuous education, on the basis of emotional burnout. It has found that negative effect has a significant effect.

Stress weights caused by some events are different and it is known that when total stress scores increase, it causes very serious diseases in people (Cüceloğlu, 2017).

Nursing is accepted as a stressful profession with an intensive workload due to the effects of many factors arising from the work environment (Demir, 2005). In the analyzes conducted within the scope of the research, significant differences were found between the levels of organizational commitment, burnout and organizational stress between private and public hospitals and results were obtained in accordance with the socio-demographic data mentioned above.

Within the scope of the research, the mediation role of the age in effect of burnout level of staff working in hospitals on the commitment with the structural equation model path diagram for the first time in the literature was investigated by us. This is the original contribution of our research to the literature. In addition, there is no other study evaluating burnout, stress and organizational commitment in comparison with Turkish and Russian sources in recent years.

Hospitals should very clearly determine the limits of their worker roles in order to prevent the feeling of burnout, role conflicts should be minimized as much as possible and engage in activities for employees to gain internal motivation. It should not be exposed to the

excessive workload to employee and plans and applications should be developed to distribute the workload to all employees fairly. With the awareness that employees have the right to rest and socially spend their time, they should be able to create free time for all their employees, the cooperation between teamwork and people should be developed, the work should be organized in a better way and the information sharing should be increased and uncertainties should be reduced.

Hospital managers should value their employees. They should ensure that they work in a comfortable and peaceful environment, improve working conditions, value their opinions, take into account their complaints, care about, care for their problems, be proud of their achievements and reward them. If employees perceive themselves to be cared for, their emotional commitment, normative commitment, and continued commitment will increase. Individuals with increased organizational commitment will adhere strictly to the objectives of the institution, will be willing and volunteer to work for the institution and will be willing to work in their current job. In addition, their individual performances will increase, being late for work and absenteeism will be reduced, their morale and motivation will increase. These will be reflected in corporate life as efficiency and productivity.

While hospital managers are trying to produce solutions related to organizational life, while making regulations about individuals, while developing human resources policies, they should look at whether the decisions made support individuals. Otherwise, unsupported people may become one of the problem sources in the enterprise.

It should be borne in mind that objectively inevitable in the modern world phenomena of emotional burnout, caused by objective factors of existing social interactions, lifestyle and work, the nature of the provision of services (including medical), should not take the form of professional cynicism and neglect of the problems and troubles of patients. Prevention of emergence and rooting in the medical sphere of the phenomena of professional cynicism, caused by emotional burnout, is the most important purpose of improvement of management system in this sphere.

In-house activities may need to be restructured in order to reduce the institutional structure of hospitals and stress related to climate. In addition, it will be useful to make in-house communication more active and to create social activities. Care should be taken to ensure that there is no conflict between the personality structures and the work done by the employees. At the same time, when teamwork is done, personality and work compliance tests are carried out and those who work with close results should be taken to the same team. Emphasis on the cultural structures of employees can be an important factor in reducing stress.

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