



Research article

Highly artistic-social personalities buffer the effects of burnout on career commitment[☆]

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ARTICLE INFO

Article history:

Received 3 April 2016

Received in revised form 19 June 2016

Accepted 22 June 2016

Available online 29 June 2016

Keywords:

Burnout

Career commitment

Supervision

Income

Students

RIASEC

ABSTRACT

Whereas burnout among healthcare professionals is highly consequential to their career persistence and commitment, little is known about factors that can mitigate this relationship. Based on Holland's framework, this study examined whether high scores on artistic and social vocational personality types, which reflect greater congruence with the creative arts therapies profession, would buffer against the potentially adverse effects of burnout on career commitment. As expected, a sample of 505 Israeli students and therapists from different specializations (i.e., music, art, drama, and dance) scored significantly higher on the artistic and social vocational personality types than on other types on Holland's RIASEC questionnaire. Burnout significantly negatively correlated with career commitment, and a high composite score on the artistic and social vocational personality types moderated the effect of burnout on career commitment. In addition, earning above the national average salary, working simultaneously in the private and public sectors, affiliation with a professional association, and being a supervisor were associated with less burnout and more career commitment. This study provides insights into the role of profession-related factors that can protect the well-being of creative arts therapies students and practitioners.

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There is a high prevalence (40%–60%) of burnout among healthcare professionals which affects the quality of care provided and their own well-being (Olson, Kemper, & Mahan, 2015). Previous creative arts therapies studies have reported mixed findings ranging from a low-moderate level of burnout in American music therapists (Vega, 2010) to a moderate-high level of burnout in Korean music therapists (Kim, 2012). While studies generally have suggested that novice therapists are at greater risk of burnout stressors (Clements-Cortes, 2013; Fowler, 2006; Kim, 2012), in places where the profession is relatively young and less established (including healthcare institutions or countries like Korea and Israel), creative arts therapists may be more likely to struggle with burnout-related factors such as lack of recognition, unsatisfactory employment conditions, and low professional collective self-esteem (Kim, 2012; see also Orkibi & Bar-nir, 2015). Given these inconsistent findings, and the marginalized status of the creative arts therapies in many countries (Johnson, 2009; Karkou, Martinsone, Nazarova, & Vaverniece, 2011; Orkibi, 2015), further

investigation of burnout within the specific context of our field is warranted.

A highly consequential outcome of burnout is low career commitment, which reflects a lack of drive to work and/or advance in a profession (Coogle, Parham, & Rachel, 2011). It remains unclear, however, what factors can best protect career commitment from the potential negative impact of burnout. Holland's (1997, 1999) theory of career choice suggests that people who work in environments (i.e., professions) that match their vocational personality type are more likely to be satisfied with their profession. Research shows that congruence between environment and vocational personality type also predicts career stability and commitment (e.g., Donohue, 2006; Kristof-Brown, Zimmerman, & Johnson, 2005; Nye, Su, Rounds, & Drasgow, 2012; Tracey, Wille, Durr li, & De Fruyt, 2014). Because the Creative Arts Therapies profession integrates arts and therapy, high scores on the artistic and social vocational types were theorized here to act as a protective factor as they exhibit high congruence with the profession (i.e., high person-environment fit).

Thus, drawing on Holland's framework, the primary goal of the present study was to examine the role of vocational personality type as a protective factor that may reduce (moderate) the potential impact of burnout on career commitment. The secondary goal was to pinpoint profession-related factors associated with burnout and

[☆] This research was supported by the Emili Sagol Creative Arts Therapies Research Center. Data were collected for the Master's thesis of Iman Kheil.

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career commitment. The identification of such factors may help to detect students and therapists at increased risk of burnout or career change. The results provide initial insights into these factors, and thus mark an important first step in facilitating empirically driven and theoretically sound professional interventions.

1. Work burnout

The concept of burnout was developed from a qualitative bottom-up approach, from people's descriptions of their work experiences (Maslach, 2011). Among several definitions in the literature, a widely accepted one conceptualizes burnout as a work-related experience characterized by three components: emotional exhaustion, which refers to "feelings of being overextended and depleted of one's emotional and physical resources," depersonalization (or cynicism), which refers to a "negative, callous, or excessively detached response to various aspects of the job," and inefficacy (or reduced accomplishment), which refers to "feelings of incompetence and a lack of achievement and productivity in work" (Maslach & Leiter, 2008, p. 498). Research on the antecedents and consequences of burnout has been conducted on different healthcare professionals, including physicians (Rabatin et al., 2016) nurses (Laschinger & Fida, 2014; Yu, Jiang, & Shen, 2016), psychiatrists (Garcia et al., 2015; Jovanović et al., 2016), psychologists and social workers (Rupert, Miller, & Dorociak, 2015; Sim, Zanardelli, Loughran, Mannarino, & Hill, 2016; Travis, Lizano, & Mor Barak, 2015). In this context, healthcare professionals' burnout is often associated with compassion fatigue, which refers to therapists' reduced capacity or interest in being empathic or "bearing the suffering of others" (Figley, 2002, p. 1434).

Burnout has been associated with job turnover intentions, which refers to "employees' willingness or attempts to leave the current workplace voluntarily" (Takase, 2010, p. 4). For example, among Australian occupational therapists working in mental health, burnout was associated with lower job satisfaction and higher turnover intentions (Scanlan & Still, 2013). Studies on new graduate nurses in Canada indicated that the experience of burnout significantly predicted their turnover intentions (Boamah & Laschinger, 2016; Laschinger et al., 2016). Similar results were identified in a meta-analysis of 17 studies (from 1988 to 2008) on American psychotherapists including school counselors, school psychologists, mental health counselors, and clinical psychologists (Lee, Lim, Yang, & Lee, 2011).

Creative arts therapies research on burnout is relatively dated and limited, and the vast majority of these studies are from the music therapy literature (for a review see Clements-Cortes, 2013; Vega, 2010). An example relevant to this research is a survey study by Decuir and Vega (2010, p. 137) on the career persistence of American music therapists ($N = 176$) where "the number one reason (23%) cited for music therapists changing or leaving the profession was burnout." Respondents also noted that "few advancement opportunities along with low salaries were the primary factors contributing to burnout" (p. 138). In contrast, attending regional and national meetings of music therapists, and thus feeling part of the profession appeared to be burnout-protecting activities. Another study suggested that among 221 British music therapists, those who worked with multidisciplinary teams scored higher on personal accomplishment, but were similar on other burnout indicators of emotional exhaustion and depersonalization in comparison to those working independently (Hills, Norman, & Forster, 2000). In a qualitative study on job turnover in Korean music therapists ($N = 9$), "burnout was not a factor that directly contributed to turnover, although it was typical for participants to feel burnout when considering turnover" (Kim, Jeong, & Ko, 2013, p. 456). Therapists have noted their own deep vocational interest among personal

factors that contribute to retention in the music therapy profession. One construct that is highly related to turnover intention in professions generally is (the lack of) career commitment (Vandenberghe & Ok, 2013), which is another potential outcome of burnout.

2. Career commitment

The terms career, occupation, and profession have been used interchangeably in the commitment literature (K. Lee, Carswell, & Allen, 2000). In this study, the term *career* is preferred because it refers to a broader framework of reference over a continuous period, unlike a commitment to a specific organization, occupation, or job at a given point (Orkibi, 2012a, p. 4). Career commitment, therefore, refers to an individual's motivation to continuously work and advance in a particular vocation over a prolonged period of time (cf. Carson & Carson, 1998, p. 199). This term will be used henceforth for clarity and consistency.

There is ample evidence that career commitment is significantly negatively correlated with burnout and positively correlated with pay and job satisfaction (Coogly et al., 2011; Lee et al., 2000; Zhang, Wu, Miao, Yan, & Peng, 2014). In a study on 1636 registered nurses, emotional exhaustion and depersonalization (two indicators of burnout) were significantly negatively associated with career commitment, which in turn was associated with intentions to leave the profession (Jourdain & Chênevert, 2010). A different study showed that job stress influenced the career commitment and quitting intentions of 812 practicing and pre-service teachers (Klassen & Chiu, 2011). Similar results were found in a study across 10 European countries, where burnout was consistently associated with nurses' intention to leave their profession (Heinen et al., 2013)—a proxy for low career commitment.

Creative arts therapies research focusing on career commitment is scarce. Orkibi (2010) examined the correlations between professional identity and career commitment in 116 graduate students enrolled in a two-year creative arts therapies Master's program in Israel. The findings indicated a moderate positive correlation between career commitment and professional identity. Subsequent longitudinal results (Orkibi, 2012a) suggested that both variables significantly increased during training and that scores of dance movement therapy students, followed by art therapy students, were overall significantly higher than scores of drama therapy students. Searches in three major academic databases yielded no additional studies on career or occupation commitment in creative arts therapies.

3. Artistic and social vocational types

According to Holland (1997, 1999), people search for vocational environments (i.e., professions) in which they can use their skills and abilities as well as express their values and attitudes. Holland suggested that vocational interests can be used to categorize people and their work environments into six vocational personality types: realistic, investigative, artistic, social, enterprising, or conventional (i.e., RIASEC). Realistic people prefer hands-on or manual activities with tools, mechanics, and tangible things rather than ideas and people; they often like being outdoors and working with machines, plants, and animals. Investigative people tend to be analytical, think logically, and seek to solve complex problems, as well as be curious and precise. Artistic people tend to be creative, expressive, emotional, original, and introspective. Social individuals enjoy working with others, helping them, and providing information. Enterprising people are good talkers and enjoy activities that involve persuading or leading others. Finally, conventional people enjoy working with numbers and data, filing records, and like rules and order. Because the creative arts therapies integrate, by definition, arts and therapy,

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