Nurses' burnout and counterproductive work behavior in a Nigerian sample: The moderating role of emotional intelligence

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ABSTRACT

This study examined the moderating role of EI in the relationship between burnout and CWB among 401 nurses drawn from various hospitals within South-eastern Nigeria. Three instruments were used for the collection of data, namely: Counterproductive Work Behaviour Checklist, Maslach Burnout Inventory, and Brief Emotional Intelligence scale. Moderated multiple regression results showed that emotional exhaustion, depersonalization, and personal accomplishment, positively predicted CWB. In addition, EI significantly and negatively predicted CWB. Results also showed that EI moderated the positive relationship between emotional exhaustion and CWB and between depersonalization and CWB such that the positive relationship between these two dimensions of burnout and CWB was stronger for nurses with low EI compared to those with high EI. The implications of the findings and limitations of the study were discussed.

1. Introduction

Nursing has been described as one of the most stressful professions considering their exposure to emotional demands from their patients, prolonged working duration, conflicts with people from other professions, interpersonal conflicts (Khamisa, Peltzer, Ilic, & Oldenburg, 2017), traumatic experiences such as encountering dying and dead patients, being target of violence as well as having to confront emergencies. Such prolonged exposure to stress has been reported to ultimately lead them into experiencing burnout (Elshaer, Moustafa, Aiad, & Ramadan, 2017; Khamisa et al., 2017; Luan, Wang, Hou, Chen, & Lou, 2017; Rozo, Olson, Thu, & Stutzman, 2017; Soroush, Zargham-Boroujeni, & Namnabati, 2016).

Burnout is usually conceived from three dimensions: emotional exhaustion, depersonalization, and reduced personal accomplishment (Lee, Yen, Fetzer, & Chien, 2015; Maslach, 2003). Emotional exhaustion represents the core of burnout and occurs when an individual is over-extended and depleted emotionally. Depersonalization occurs when an individual develops callous attitude towards the recipients of their services such as clients, customers, students, etc. due to pressure from work. Finally, reduced personal accomplishment refers to a sense of poor achievement in respect to working with clients, which indicate changes in perceptions. In other words, burnout is a multidimensional construct that reflects reaction to stress (emotional exhaustion), mental

detachment response (depersonalization) and a negative perception (lack of personal accomplishment) (Schaufeli & Salanova, 2014).

Burnout has important implication for the quality of health care, patient outcomes, the health care organisation particularly in the areas of absenteeism, turnover (Nantsupawat, Nantsupawat, Kunaviktikul, Turale, & Poghosyan, 2016), and leads to poor health of nurses (Lin, Lin, Cheng, Wu, & Ou-Yang, 2016), and counterproductive work behaviour (CWB); (Bolton, Harvey, Grawitch, & Barber, 2012).

CWB is that intentional behaviour exhibited by employees, which has likely detrimental effect on organizations and their members as well as other stakeholders (Spector & Fox, 2005). CWB has been conceptualized in a number of ways, including employee negative behaviour (Yao, Fan, Guo, & Lee, 2014), retaliatory behaviour (Lian et al., 2014), among others. The bottom line is that these behaviours are harmful to the organization by directly affecting its functioning or property, or by hurting employees in a way that will reduce their effectiveness.

A number of researchers (e.g. Ogińska-Bulik (2005), Zapf, Seifert, Schmutte, Mertini, and Holz (2001)) opined that employees' proneness to CWB is an indication of their growing inability to adequately manage their emotions and their resultant burnout when dealing with other individuals, employees, colleagues, patients and clients. This tends to suggest that an employee's ability to manage his/her emotion is an important virtue capable of reducing CWB. Mayer and Salovey (1997)

suggest that the intelligent use of emotions enhances personal effectiveness, resulting in improved outcomes in a given situation. This intelligent use of emotion is what Goleman (1995) called Emotional Intelligence (EI). EI is defined as employee's ability to manage his/her emotions effectively; to control impulse and delay gratification; to regulate one's moods and keep distress from swamping the ability to think; to empathize; to manage oneself and one's relationships with others in a constructive and mature manner (Mayer & Salovey, 1997). Many research findings suggest that EI has been negatively related to employee deviant behaviour (Martin & Kuiper, 1999); and that employees with high level of EI have better moral rectitude than their counterparts with low levels of EI (Petrides, Frederickson, & Furnham, 2004), which by extension suggests that EI may have the potential to vitiate the negative impacts of excessive work demands on employees. In the light of this, the present study is set to determine whether EI will moderate the relationship between burnout and CWB. Thus, we assume that an employee's ability to control his/her emotions will be negatively related to CWB. Therefore, the major purpose of this study was to investigate the relationship between burnout and CWB and EI as the moderator of that relationship.

1.1. Theoretical overview and hypotheses development

Spector and Fox's (2005) stressor-emotion model is often used in organisational environment to explain factors that contribute to CWB. The model posits that stressful job conditions could induce negative emotions which are likely to lead to CWB. As such, CWB reflects responses that follow exposure to chronic stress at work, as a way to cope with the frustration emanating from the work conditions (Spector & Fox, 2005). Supporting this line of reasoning using the case of nurses, Czaja, Moss, and Mealer (2012) stated that when nurses work in an extremely stressful work environment for a prolonged time, it makes them experience burnout. Indeed, there is ample literature making reference to how very stressful the nursing profession is. For example, the nursing profession is said to be characterised by heavy workloads, shift work, high job demands, administrative burden, constant exposure to emergency situations, frequent exposure to patients' suffering and deaths which are highly emotionally demanding, unpredictable work environments, poor work environments, conflict with colleagues and patients' families among others (Khamisa et al., 2017; Luan et al., 2017; Nantsupawat et al., 2017; Rozo et al., 2017). These make nurses susceptible to the development of burnout. Therefore, it is likely that under such circumstance, CWB may ensue if we take into consideration the typical experiences of nurses in their places of work (Zaghini, Fida, Caruso, Kangasniemi, & Sili, 2017).

In addition to the stressor-emotion model (Spector & Fox, 2005); the Job Demand-Resources (JD-R) model (Demerouti, Bakker, Nachreiner, & Schaufeli, 2001) can also be used to explain how burnout can lead to CWB and how resources can help in reducing the impact of burnout on CWB. The JD-R model postulates that job characteristics can be grouped into two general categories, namely job demands and job resources. Job demands include high work pressure, role overload, emotional demands, and poor work environments and conditions (Bakker, Demerouti, & Verbeke, 2004). Example of resources are salary, career opportunities, job security, supervisor and co-worker support, team climate, role clarity, participation in decision making, performance feedback, skill variety, task significance, task identity, autonomy) (Bakker et al., 2004). According to the JD-R model, when job demands exceed the adaptive capacities of employees, they become stressors and lead to burnout. The model also states that job resources can help in reducing the impact of job demands on negative work-related outcomes by serving as buffers. For example, during intensely demanding job conditions, employees with high levels of resources have enough supplies to tackle the demands. As such, they experience lower levels of negative outcomes (Bakker, Demerouti, & Euwema, 2005).

Based on the JD-R model, we reason that EI may also act as personal resource by helping employees in managing the deleterious impact of burnout on them. Consistent with this view, Serrat (2017) stated that the process of EI development contains aspects that decrease stress by serving as a moderator. Similarly, van Dusseldorp, van Meijel, and Derksen (2011) also surmised that EI could act as a useful personal resource in coping with emotional situations. According to Serrat (2017), individuals with high level of EI are very knowledgeable of who they are and are also sagacious of the emotions of other individuals. Serrat also surmises that they are genial, enduring, and upbeat. In that sense, they are likely to be able to regulate their emotion when they are burnt-out in order to reduce the likelihood of resorting to negative workplace behaviour such as CWB, as a coping strategy in comparison to those with low EI.

1.2. Burnout and CWB

Burnout can occur among individuals whose work involves providing health care and support to those in need of such. The nursing workforce represents such individuals at high risk for the development of burnout. According to Nantsupawat et al. (2017), nurses experience a great deal of burnout because of the high emotional and physical demands of their work. Heavy workloads have been found to precipitate high burnout levels (Laschinger, Finegan, & Wilk, 2011), while burnout has been found to be positively associated with CWB (Bans, Whelpley, Oh, & Shin, 2012; Bolton et al., 2012). In a related study that investigated the relationship between emotional exhaustion and CWB, Krischer, Penney, and Hunter (2010) found that employees who reported being emotionally exhausted were more likely to display CWB, while Liang and Hsieh (2007) found that only depersonalization, out of the three dimensions of job burnout, significantly predicted CWB among a sample of 303 Taiwanese flight attendants. Bolton et al. (2012) investigated the relationship between job burnout (using the dimension of depersonalization) and CWB. They found that depersonalization significantly influenced CWB. They, however, concluded that the finding was consistent with the conservation of resources theory (Hobfoll, 1989), which argued that in a state of depleted emotional resources, heightened depersonalization increased the likelihood of CWB occurring. Uchenna (2013) conducted a study on the influence of perceived organizational support and job burnout on CWB among 328 employees in emotionally demanding jobs in Nigeria. Results showed that employees who reported job burnout showed higher tendency of engaging in CWB than those who did not report job burnout. An important point to note in most of the studies reviewed is that while burnout was gauged with either emotional exhaustion or depersonalization subscales, the present study uses the multidimensional construct of burnout—emotional exhaustion, depersonalization and low personal accomplishment to ascertain the unique contribution of each dimension in influencing employees' CWB. Thus, the unique impact that the different facets of burnout could have on CWB will be ascertained in this study. Based on the preceding discussion, we pose the following hypotheses:

Hypothesis 1a. Emotional exhaustion will positively predict CWB.

Hypothesis 1b. Depersonalization will positively predict CWB.

Hypothesis 1c. Perceived low personal accomplishment will positively predict CWB.

1.3. Moderating role of EI

Many scholars have treated EI as a moderator of relationship between different variables including: Negative emotions and CWB (Yin, 2010); conscientiousness and performance (Douglas, Frink, & Ferris, 2004); and stress and burnout (Görgens-Ekermans, & Brand, 2012). Results of previous studies suggest that EI may serve as a moderator in