

**The Role of Work Stress on Emergence Psychological Burnout Phenomena:  
Private Hospitals in Northern region (Case Study)**

**Mohammad Turkey. Al-Bataineh**

Associated Professor, Business Administration Department

Jerash University, Jordan

**Mohammad Al Zoubi**

Associated Professor, Business Administration Department

Jerash University, Jordan

Corresponding Author: [Aboqais2003@gmail.com](mailto:Aboqais2003@gmail.com)

## **The Role of Work Stress on Emergence Psychological Burnout Phenomena: Private Hospitals in Northern region (Case Study)**

### **Abstract**

The aim of this study is to identify the role of work stress on emergence psychological burnout phenomena in private hospital in northern region. To examine the role of work stress on emergence psychological burnout phenomena, I selected private hospitals (Northern Region) to be our case study, Population Research were 430 an individual selected 258 as sample research represent 60%. The main result was Organizational structure, Conflict role and Organizational environment has significant positive influence on emergence psychological burnout phenomena, while ambiguity role hasn't significant positive influence, Employees feel uncomfortable about the way they have treated some recipients, and Employees do things that are apt to be accepted by one person but not by others. I recommended that managers and supervisors should increase utilizing Channels of communications (from top to down and bottom up) and managers and supervisors should encourage the confidence in their leadership by their employees.

**Keyword:** Work Stress, Psychological Burnout, Organizational Structure, Ambiguity Role, Conflict Role, Organizational Environment.

**Introduction:**

Everyone who has ever held a job felt the pressure of work-related stress. Any job can have stressful elements, even if you love what you do. In the short-term, you may experience pressure to meet a deadline or to fulfill a challenging obligation. But when work stress becomes chronic, it can be overwhelming and harmful to both physical and emotional health.

Unfortunately, such long-term stress is all too common. In (2012), 65 percent of Americans cited work as a top source of stress, according to the (American Psychological Association's, APA) annual Stress in America Survey. Only 37 percent of Americans surveyed said they were doing an excellent or very good job managing stress.

Stress isn't always bad. a little of stress can help you stay focused, energetic, and able to meet new challenges in the workplace. It's what keeps you on your toes during a presentation or alert to prevent accidents or costly mistakes. But in today's hectic world, the workplace too often seems like an emotional roller coaster. Long hours, tight deadlines, and ever-increasing demands can leave you feeling worried, drained, and overwhelmed, and when stress exceeds your ability to cope, it stops being helpful and starts causing damage to your mind and body as well as to your job satisfaction.

Psychological burnout refers to the state in which individuals experience physical and mental fatigue after working under heavy pressure (Maslach et al. 2001; Peng et al. 2014), Psychological burnout as a symptom of emotional exhaustion that was commonly observed among individuals working in helping professions (Freudenberg 1974; Shih et al. 2013).

**Literature review and theoretical framework:**

As we all know, in recent time stress become more and more during work or because of it, or other reasons out of work, Stress affects people in different ways and

what one person finds stressful can be normal to another. There are many different definitions of stress, Stress can hit anyone at any level of the business and recent research shows that work related stress is widespread and is not confined to particular sectors, jobs or industries. HSE's formal definition of work related stress is the adverse reaction people have to excessive pressures or other types of demand placed on them at work.

CCOHS center define stress is the result of any emotional, physical, social, economic, or other factors that require a response or change. It is generally believed that some stress is okay (sometimes referred to as "challenge "or "positive stress") but when stress occurs in amounts that you cannot handle, both mental and physical changes may occur, while (Gibson ,1994) define stress as adaptive response modified by physiological process and personal differences causes by event, job or situation faced by someone.

Stress is not an illness; it is a state. However, if stress becomes too excessive and prolonged, mental and physical illness may develop, Stress in the workplace can have many origins or come from one single event, it can impact on both employees and employers alike.

Psychological burnout is an extreme reaction that individuals experience when they cannot successfully cope with work pressure; several studies have identified stress as among the direct causes of job burnout and a lower self-efficacy may also increase job burnout among employee. (Xiaobo Yu, 2014). Also Burnout is a prolonged response to chronic emotional and interpersonal stressors on the job, and is defined by the three dimensions of exhaustion, cynicism, and inefficacy (Maslach, Schaufeli and Michael, 2001).

### **Common causes of workplace stress**

- Fear of being laid off
- More overtime due to staff cutbacks

- Pressure to perform to meet rising expectations but with no increase in job satisfaction
- Pressure to work at optimum levels—all the time!
- Lack of control over how you do your work.

**Steps for reducing job stress.** (Jeanne Segal, 2017)

1. Create a balanced schedule. All work and no play is a recipe for burnout. Try to find a balance between work and family life, social activities and solitary pursuits, daily responsibilities and downtime.
2. Leave earlier in the morning. Even 10-15 minutes can make the difference between frantically rushing and having time to ease into your day. Don't add to your stress levels by running late.
3. Plan regular breaks. Make sure to take short breaks throughout the day to take a walk or chat to a friendly face. also try to get away from your desk or work station for lunch. It will help you relax and recharge and be more, not less, productive.
4. Establish healthy boundaries. Many of us feel pressured to be available 24 hours a day or obliged for work-related messages and updates. But it's important to maintain periods where you're not working or thinking about work. That may mean not checking emails or taking work calls at home in the evening or at weekends.
5. Don't over-commit yourself. Avoid scheduling things back-to-back or trying to fit too much into one day. If you've got too much on your plate, distinguish between the "should" and the "musts." Drop tasks that aren't truly necessary to the bottom of the list or eliminate them entirely.

Balayssac, et al. (2017) Work-related stress and burnout syndromes are unfortunately common comorbidities found in health professionals. However, burnout syndrome has only been partly and episodically assessed for community pharmacists whereas these professionals are exposed to patients' demands and difficulties every day.

Prevalence of burnout, associated comorbidities and coping strategies were assessed in pharmacy teams (pharmacists and pharmacy technicians) in French community pharmacies. This online survey was performed by emails sent to all French community pharmacies over 3 months. The survey assessed the prevalence of burnout (Maslach Burnout Inventory  $\text{MBI}$  questionnaire), anxiety, depression and strategies for coping with work-related stress. Of the 1,339 questionnaires received, 1,322 were completed and useable for the analysis. Burnout syndrome was detected in 56.2% of respondents and 10.5% of them presented severe burnout syndrome. Severe burnout syndrome was significantly associated with men, large urban areas and the number of hours worked. Depression and anxiety were found in 15.7% and 42.4% of respondents, respectively. These co-morbidities were significantly associated with severe burnout syndrome. Higher MBI scores were significantly associated with medical consultations and medicinal drug use. Conversely, respondents suffering from burnout syndrome declared they resorted less to non-medical strategies to manage their work-related stress (leisure, psychotherapy, holidays and time off). his study demonstrated that community pharmacists and pharmacy technicians presented high prevalence of burnout syndrome, such as many healthcare professionals. Unfortunately, burnout syndrome was associated with several comorbidities (anxiety, depression and alcohol abuse) and the consumption of health resources. The psychological suffering of these healthcare professionals underlines the necessity to deploy a strategy to detect and manage burnout in community pharmacy.

El –Sherbiny. et al. (2017) Various acute and chronic demands and burdens on Intensive Care Unit (ICU) staff put them at great risk for developing psychological stress and disorders. High expectations on performance and understanding can exert enormous pressure on intensive care personnel. Aim of work: To assess the frequency of job stress and burnout among ICU workers and highlight the role of job stress and psychosomatic health as possible predictors of burnout subscales. Materials and methods: One hundred

and forty ICWs including 8 physicians, 114 nurses and 18 respiratory therapists participated in the study. Physicians worked 12 hours shifts, nurses and respiratory therapists worked 8 hours shifts; all of them worked 48 hours per week. A cross-sectional study was conducted using self-administered questionnaires including socio-demographic data, job stress questionnaire (Health and Safety Executives Management Standards Indicator Tool), Maslach Burnout Inventory (MBI) and psychosomatic symptoms. Results: High stress levels were found among 47.8% of ICWs. High burnout levels were found among more than one tenth (11.4%) of the sample. The job demand was significant predictor of emotional exhaustion (EE) and relations at work were significant predictors for depersonalization (DP). Colleague support and clear role were significant predictors of personal achievement (PA). Sleeping problems were significant predictors for EE and PA. Chronic fatigue was significant predictor for DP. Conclusion: High stress levels were found among ICWs, however, these levels lead to moderate levels of burnout necessitating the immediate intervention to control predictors of burnout such as high job demand, poor relations at work and role ambiguity which can lead to prevention of burnout in different intensive care units.

Vandevala. et al. (2017) The work demands of critical care can be a major cause of stress in intensive care unit (ICU) professionals and lead to poor health outcomes. In the process of recovery from work, psychological rumination is considered to be an important mediating variable in the relationship between work demands and health outcomes. This study aimed to extend our knowledge of the process by which ICU stressors and differing rumination styles are associated with burnout, depression and risk of psychiatric morbidity among ICU professionals. Ninety-six healthcare professionals (58 doctors and 38 nurses) who work in ICUs in the UK completed a questionnaire on ICU-related stressors, burnout, work-related rumination, depression and risk of psychiatric morbidity. Significant associations between ICU stressors, affective rumination, burnout, depression and risk of psychiatric morbidity were found. Longer

working hours were also related to increased ICU stressors. Affective rumination (but not problem-solving pondering or distraction detachment) mediated the relationship between ICU stressors, burnout, depression and risk of psychiatric morbidity, such that increased ICU stressors, and greater affective rumination, were associated with greater burnout, depression and risk of psychiatric morbidity. No moderating effects were observed. Longer working hours were associated with increased ICU stressors, and increased ICU stressors conferred greater burnout, depression and risk of psychiatric morbidity via increased affective rumination. The importance of screening healthcare practitioners within intensive care for depression, burnout and psychiatric morbidity has been highlighted. Future research should evaluate psychological interventions which target rumination style and could be made available to those at highest risk. The efficacy and cost effectiveness of delivering these interventions should also be considered.

Liu and Cheng (2017) Work stress and burnout problems in the public sector are health concerns but there have been few studies on this topic. This study compared levels of psychosocial work hazards, workers' burnout and self-rated health (SRH) between public and private sector employees and examined if the health differences might be explained by differences in psychosocial work conditions. Data from a national survey of a representative sample of general employees of Taiwan was analyzed, which consisted of 2,441 employed in public sectors and 15,589 employed in private sectors. Psychosocial work hazards were assessed by a standardized questionnaire, including type of work shift, psychological job demands, job control, workplace justice and the experiences of workplace violence (WPV) over the past 12 months. Also assessed by the questionnaire were self-rated health, general burnout, client-related burnout, and job satisfaction. Public sector employees were found to be older and more female dominant, and had higher education levels. Overall, psychosocial work conditions, SRH and job satisfaction were better in public sector employees than private sector employees. However, public sector employees reported higher levels of WPV and burnout. For all employees

combined, adjusted logistic regression models indicated that having experienced WPV were associated with poor SRH, general and client-related burnout (OR=1.96, 2.59, and 2.18). Furthermore, higher psychosocial job demands and lower workplace justice were associated with higher risks for poor SRH and burnout. Stratified analyses revealed that WPV was associated with greater burnout risks in public sector employees than in private sector employees. Public sector employees had better psychosocial work conditions in general as well as better health profiles. However, workplace violence appeared to be more prevalent in the public sectors and may play a greater role in affecting workers' stress and burnout.

Xiaobo Yu (2014) The psychological pressure of high strength, often cause teachers teaching dissatisfaction, absenteeism and employee turnover. The current study examined the impact of work stress on job burnout, mainly focused on confirmation of the mediator role of self-efficacy. A total of 387 middle school teachers were as participants involving in this research. Data were collected by using the Perceived Stress Scale, General Self-Efficacy Scale and Maslach Burnout Inventory-General Survey. The results revealed that both work stress and self-efficacy were significantly correlated with job burnout. Structural equation modeling indicated that self-efficacy partially mediated work stress to job burnout. The final model also revealed significant both paths from work stress to job burnout through self-efficacy. The findings extended prior researches and provided valuable evidence on how to promote mental health of teachers at the workplaces.

Mandy Bako, (2014) Role ambiguity and Role Conflict amongst university academic and administrative staff: a Nigerian case study. the purpose of this was to investigate role ambiguity and conflict role among the academic and administrative staff of the university of Lagos, Nigeria and to determine the differences that exist between them in this perception. The study also examined the impact of demographical variables such as gender, age, educational qualification and tenure on role perception. the

questionnaire consisted of demographic questions and role perception questionnaire developed by Rizzo et al, (1970) to measure role ambiguity and role conflict. A response rate of 53.5% from a total of 200 questionnaires was achieved. The results of the statistical analysis computed established a statistically significant difference in the perception of role ambiguity between the groups, but no significant difference was found in their perception of role conflict. The academic staff perceived significantly higher role ambiguity than the administrative staff, but no significant difference was recorded in their perception of role conflict. Educational qualification and gender had a significant impact on role perception of the academic staff, but did not have any significant impact on relationship with the administrative staff's perception of role. Tenure and age did not have any significant impact on role perception of the groups investigated. The study confirmed a positive correlation between role ambiguity with role conflict with an insignificant correlation value ( $r=0.45$ ). Recommendations for future research and implementation for universities administrators were made.

### **Objectives of the study:**

The aim of this study is to identify the Role of Work Stress on Emergence Psychological Burnout Phenomena in private hospitals. More specifically this research has four objectives:

1. To explore the effect of organizational structure on Emergence Psychological Burnout Phenomena.
2. To explore the effect of conflict role on Emergence Psychological Burnout Phenomena.
3. To explore the effect of ambiguity role on Emergence Psychological Burnout Phenomena.
4. To explore the effect of organizational environment on Emergence Psychological Burnout Phenomena.

### **Data and methodology:**

To examine the Role of Work Stress on Emergence Psychological Burnout Phenomena, I selected Private Hospitals (Northern Region) to be our case study as shown in table (1). while sample research represents (60%) from population research.

Table (1) population and sample research

| <b>Name of Hospital</b>        | <b>Population Research</b> | <b>Sample Research</b> |
|--------------------------------|----------------------------|------------------------|
| Islamic Hospital               | 112                        | 67                     |
| Al-Qwasme specialized Hospital | 70                         | 42                     |
| Specialty Hospital             | 153                        | 92                     |
| Rosary sisters Hospital        | 95                         | 57                     |
| <b>Total</b>                   | <b>430</b>                 | <b>258</b>             |

#### 4.1. Data

A questionnaire and sample survey and cases study are the primary tools of data collection, the instrument used in this research was a questionnaire in the Arabic language that was divided into two sections. Section first measured the respondent's demographic background. Section second through four measured the respondent's views toward the Role of Work Stress on Emergence Psychological Burnout Phenomena in private hospitals, organizational structure (7 items), conflict role (6 items), ambiguity role (7 items), organizational environment (8 items) and Emergence Psychological Burnout Phenomena, (9 items). (Craic & Flona ,2001) and (Mandy,2014) and (Maslach & Jakcson,1981). Each items were measured in term of five points Lekart scale from 1 (strongly disagree) to 5(strongly agree).

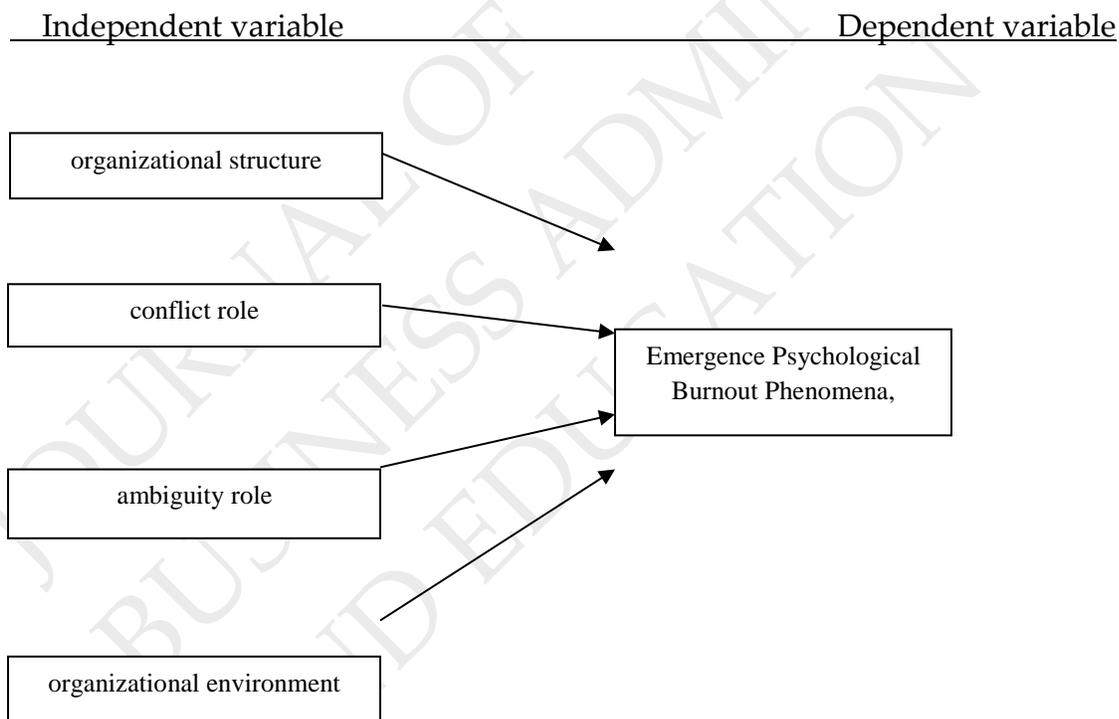
#### 4.2. Methodology

The sample was drawn from three management levels: Top management, Middle and First line management. Around (270) questionnaires were randomly distributed in these levels. The returned suitable questionnaires were (258) with (95%) response rate.

**4.3. Research framework:**

Figure (1) depicts the theoretical frame work of research represent hypotheses of the research showing the relationship between independent variables and dependent variables.

Figure (1) Research framework



### 4.3. Hypotheses

Based on the objectives of the study the main hypothesis was: (The Role of Work Stress has a positive significant influence on Emergence Psychological Burnout Phenomena) where divided to four sub-hypotheses as follows:

1. Hypothesis 1: Organizational structure has a positive significant influence on Emergence Psychological Burnout Phenomena on Private Hospitals in Northern region.
2. Hypothesis 2: Conflict role has a positive significant influence on Emergence Psychological Burnout Phenomena on Private Hospitals in Northern region.
3. Hypothesis 3: Ambiguity role has a positive significant influence on Emergence Psychological Burnout Phenomena on Private Hospitals in Northern region.
4. Hypothesis 4: Organizational environment has a positive significant influence on Emergence Psychological Burnout Phenomena on Private Hospitals in Northern region.

## 5. Case and Data Analysis

Tables two to four present the descriptive statistics for the four study independent variables (Organizational structure, Conflict role, Ambiguity role, and Organizational environment). And table five represent Emergence Psychological Burnout Phenomena as dependent variable.

To realize the validity of hypothesis one descriptive statistical was used to calculate means and standard deviation for sentences of the role of work stress on Emergence Psychological Burnout Phenomena.

### 5.1. Organizational Structure;

The following tables show the results of the empirical test. Table 2 through Table 6 is outputs of SPSS Statistics software. As shown in table (2) the highest mean was item # 2

“Policies and procedure established for authorizations at a reasonably high level” (3.89) with (0.95) Standard deviation (S.D), while item # 4 “Channels of communications (from top to down and bottom up) being utilized” scored the lowest mean (2.61) with (1.17) (S.D).

**Table 2: Organizational Structure Descriptive Statistics (N=258)**

| No | Statement   | Mean | S.D  |
|----|---|------|------|
| 1  | There are formalized policies and procedures for all major operations of entity             | 3.54 | 1.03 |
| 2  | Polices and procedure established for authorizations at a reasonably high level.            | 3.89 | 0.95 |
| 3  | the governing body and management stress adherence to such policies and procedures          | 3.16 | 0.78 |
| 4  | Channels of communications (from top to down and bottom up) being utilized.                 | 2.61 | 1.17 |
| 5  | Duties are rotating when employees are on vacations   | 3.74 | 0.88 |
| 6  | The information system is work force relativity stable (low turnover).                      | 3.38 | 0.52 |
| 7  | Employees are cross trained to ensure the uninterrupted performance of personnel functions. | 3.74 | 0.71 |

### 5.2. Conflict Role;

As shown in table (3) the highest mean was item # 13 “I do things that are apt to be accepted by one person but not by others” (4.12) with (0.71) Standard deviation (S.D), while item #2 “I have to implement formal policies and guidelines in spite of I disagree with in my job” scored the lowest mean (2.87) with (1.25) S.D.

**Table 3: conflict role Descriptive statistics (N=258)**

| No | Statement   | Mean | S D  |
|----|---|------|------|
| 8  | I have done things at work which are against my better judgment.                          | 3.47 | 0.89 |
| 9  | I have to implement formal policies and guidelines in spite of I disagree with in my job. | 2.87 | 1.25 |
| 10 | I am given not enough time to do what is expected of me in my job.                        | 3.14 | 0.79 |
| 11 | I find myself in situations where different groups claim my allegiance.                   | 3.01 | 0.92 |
| 12 | I don't get the authority to fulfill my work responsibilities                             | 4.09 | 0.98 |
| 13 | I do things that are apt to be accepted by one person but not by others                   | 4.12 | 0.71 |

### 5.3. Ambiguity Role;

As shown in table (4) the highest mean was item # 17 "I know that I have divided my time properly" (4.12) with (0.93) Standard deviation (S. D), while item # 15 "I get caught between pressures of my work and those coming from other areas of my life" scored the lowest mean (3.37) with (1.03) Std.

**Table 4: ambiguity role Descriptive statistics (N=258)**

| No | Statement  | Mean | S D  |
|----|--|------|------|
| 14 | I have no difficulties in reconciling my interests in the different areas of work and home life. | 3.98 | 1.19 |
| 15 | I get caught between pressures of my work and those coming from other areas of my life.          | 3.37 | 1.03 |
| 16 | I have divided loyalties to different parties at work  | 3.61 | 0.84 |
| 17 | I know that I have divided my time properly  | 4.12 | 0.93 |
| 18 | I receive incompatible request from two or more people   | 3.84 | 1.04 |
| 19 | I have to work under vague directives or order   | 4.05 | 0.71 |
| 20 | I perform work that suits my values  | 3.74 | 0.96 |

#### 5.4. Organizational Environment

As shown in table (5) the highest mean was item # 25 “My manager or supervisor seems to care about me as person” (4.23) with (1.18) Standard deviation (S.D), while item # 26 “I have confidence in the senior leadership of my department” scored the lowest mean (3.13) with (0.54) S D.

**Table 5: organizational environment Descriptive statistics (N=258)**

| No | Statement  | Mean | S D  |
|----|--|------|------|
| 21 | Work environment can protect you from some of the harmful effects of bullying                    | 3.98 | 1.06 |
| 22 | Management supported you at work function as buffer against stress by providing resources needed | 3.42 | 0.87 |
| 23 | My manager supervisor assign work activities fairly  | 4.04 | 0.95 |
| 24 | I have positive working relationships with my co-workers   | 3.61 | 0.72 |
| 25 | My manager or supervisor seems to care about me as person  | 4.23 | 1.18 |
| 26 | I have confidence in the senior leadership of my department                                      | 3.13 | 0.54 |
| 27 | My department is committed to ensuring the health and safety of its employees                    | 3.29 | 1.04 |
| 28 | I have some freedom in how I decided to do my assigned work                                      | 3.95 | 0.92 |

#### 5.5. Physiological Burnout Phenomena

As shown in table (6) the highest mean was item # 32 “I feel uncomfortable about the way I have treated some recipients” (4.26) with (0.93) Standard deviation (S.D), while item # 36 “I feel burnout from my work” scored the lowest mean (2.94) with (0.94) S.D.

**Table 6: physiological burnout phenomena Descriptive statistics (N=258)**

| No | Statement   | Mean | S D  |
|----|---|------|------|
| 29 | I feel I am working too hard on my job                                | 3.34 | 0.92 |
| 30 | I feel used up at the end of my work day                              | 3.78 | 0.84 |
| 31 | I feel fatigued when I get up in the morning                          | 3.17 | 0.57 |
| 32 | I deal very effectively with the problems of my recipients            | 4.26 | 0.93 |
| 33 | I feel I am positively influencing other people lives through my work | 3.43 | 1.07 |
| 34 | I feel uncomfortable about the way I have treated some recipients     | 4.08 | 0.69 |
| 35 | I worry that this job is hardening me emotionally                     | 3.82 | 1.21 |
| 36 | I feel burnout from my work   | 2.94 | 0.94 |

### 5.6; Correlations among Variables

Table (7) presents the zero-order correlations and for all of the study variables. The results light out that Organizational structure is positively related with Emergence Psychological Burnout Phenomena, were significantly and positively correlated ( $r > 0.491$ ,  $p < .02$ ) and this result agree with El –Sherbiny. et al. (2017) studied. Conflict role is positively related with Emergence Psychological Burnout Phenomena, were significantly and positively correlated ( $r > 0.517$ ,  $p < .01$ ) and this result agree with Vandevala. et al. (2017) studied. Organizational environment is positively related with Emergence Psychological Burnout Phenomena, were significantly and positively correlated ( $r > 0.742$ ,  $p < .04$ ) and this result agree with Xiaobo Yu (2014) and Liu and Cheng (2017). Ambiguity role isn't positively related with Emergence Psychological Burnout Phenomena, weren't significantly correlated ( $r > 0.964$ ,  $p < .06$ ) and this result disagree with El –Sherbiny. et al. (2017) studied. and agree with Mandy (2014).

**Table (7) Descriptive Statistics and Correlations**

|   |             | Emergence Psychological Burnout Phenomena | Organizational structure | Conflict role  | Ambiguity role | Organizational environment |
|---|-------------|---|--------------------------|----------------|----------------|----------------------------|
| Emergence Psychological Burnout Phenomena | Correlation | 1.00                                      |                          |                |                |                            |
|   | Sig         | 0.00                                      |                          |                |                |                            |
| Organizational structure                  | Correlation | <b>0.491**</b>                            | 1.00                     |                |                |                            |
|   | Sig         | 0.02                                      |                          |                |                |                            |
| Conflict role                             | Correlation | <b>0.517**</b>                            | <b>0.368**</b>           | 1.00           |                |                            |
|   | Sig         | 0.01                                      | 0.01                     |                |                |                            |
| Ambiguity role                            | Correlation | <b>0.964**</b>                            | <b>0.529**</b>           | <b>0.433**</b> | 1.00           |                            |
|   | Sig         | 0.06                                      | 0.02                     | 0.04           |                |                            |
| Organizational environment                | Correlation | <b>0.742**</b>                            | <b>0.856**</b>           | <b>0.351**</b> | <b>0.416**</b> | 1.00                       |
|   | Sig         | 0.04                                      | 0.01                     | 0.03           | 0.01           |                            |

Notes:

- Scale: 5-point Likert-type scale.
- \*p < .10; \*\* p < .01; \*\*\* p < .001.

With regard to the specific hypotheses, we found:

- Hypothesis 1: Organizational structure has a positive significant influence on emergence psychological burnout phenomena on private hospitals in northern region was supported.
- Hypothesis 2: Conflict role has a positive significant influence on emergence psychological burnout phenomena on private hospitals in northern region was supported.

- Hypothesis 3: Ambiguity role hasn't a positive significant influence on emergence psychological burnout phenomena on private hospitals in northern region.
- Hypothesis 4: Organizational environment has a positive significant influence on emergence psychological burnout phenomena on private hospitals in northern region also was supported.

## 7. Conclusion and Recommendations

According to data analysis I found that there were many results, the most important were;

1. The polices and procedure established for authorizations at a reasonably high level.
2. Employees do things that are apt to be accepted by one person but not by others.
3. Employees know that they have divided their time properly.
4. Managers or supervisors seems to care about their employees as persons.
5. Employees feel uncomfortable about the way they have treated some recipients.
6. Organizational structure, Conflict role and Organizational environment has significant positive influence on emergence psychological burnout phenomena
7. Ambiguity role hasn't significant positive influence on emergence psychological burnout phenomena

**The following recommendations are suggested:**

1. Managers and Supervisors should increase utilizing channels of communications (from top to down and bottom up).
2. Employees should implement formal policies and guidelines in spite of their disagreement with their job.

3. Managers and Supervisors should encourage the confidence in their leadership by their employees.
4. Managers and Supervisors should increase interesting on treatment ambiguity role within their employees.

JOURNAL OF  
BUSINESS ADMINISTRATION  
AND EDUCATION

## References

1. Balayssac D. et al. (2017) Burnout, associated comorbidities and coping strategies in French community pharmacies DBOP study: A nationwide cross-sectional study. PLoS ONE 12(8): e0182956. <https://doi.org/10.1371/journal.pone.0182956>.
2. Craic and Flona,( 2001). Development and validation of the multidimensional Role conflict Questioners. Journal of Industrial Psychology. Vol 27. Issue (2), PP. 1-6.
3. El -Sherbiny E. et al (2017) Burnout Among Intensive Care Workers In A Tertiary Care Hospital In Saudi Arabia, Egyptian Journal of Occupational Medicine, 2017; 41 (2) : 289-306.
4. Freudenberger, H. J. (1974). Staff burn-out. Journal of Social Issues,30(1), 159–165.
5. <http://www.apa.org/helpcenter/work-stress.aspx>.
6. <http://www.ccohs.ca/oshanswers/psychosocial/stress.html>.
7. <http://www.hse.gov.uk/stress/furtheradvice/whatisstress.htm>.
8. James L, Gibson , john M .Ivancevich and James H, Donnelly Jr (1994). Organizations : Behavior ,Structure, Processes, 8th ed URWIN Boston , Mass, P23.
9. Jeanne Segal. (2017) Stress in the Workplace. Managing Job and Workplace Stress. HELPGUIDE.ORG Trusted guide to mental, emotional & social health.
10. Liu H. and Cheng Y. (2017) Psychosocial Work Hazards, Burnout And Self-Rated Health: A Comparison Study Of Public And Private Sector Employees, XXI World Congress on Safety & Health, At Work 2017.
11. Mandy Bako, (2014) Role ambiguity and Role Conflict amongst university academic and administrative staff: a Nigerian case study. Published Dissertation to the University of Bedfordshire, Luton.
12. Maslach and Jackson, (1981) The measurement of experienced burnout, journal of occupational behavior. Vol. 2. P . 99-133.

13. Maslach, C. & Schaufeli, W. and Michael, P. (2001) Job Burnout, Annual Review of Psychology, Vol. 52:397-422, <https://doi.org/10.1146/annurev.psych.52.1.397>
14. Peng, J., Li, D., Zhang, Z., Tian, Y., Miao, D., Xiao, W., & Zhang, J. (2014). How can core self-evaluations influence job burnout? The key roles of organizational commitment and job satisfaction. Journal of Health Psychology. doi:10.1177/1359105314521478.
15. Shih, S.-P., Jiang, J. J., Klein, G., & Wang, E. (2013). Job burnout of the information technology worker: Work exhaustion, depersonalization, and personal accomplishment. Information & Management, Vol. 50. Issue, (7), PP. 582–589.
16. Vandevala T. et al. (2017) Psychological rumination and recovery from work in intensive care professionals: associations with stress, burnout, depression and health, Journal of Intensive Care (2017) 5:16, DOI 10.1186/s40560-017-0209-0.
17. Xiaobo Yu et al (2014) The Effect of Work Stress on Job Burnout Among Teachers: The Mediating Role of Self-efficacy, Social Indicators Research, V.118, No.3, ISSN 0303-8300 Soc Indic Res, DOI 10.1007/s11205-014-0716-5.