



Experiences of Burnout among Staff Nurses of Private Hospitals in Surigao City

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ABSTRACT: This descriptive quantitative study is primarily concerned with the level of burnout among nurses working in private hospitals in Surigao City. The following research tools were used in the actual collection of data which includes, the respondent's Personal Data Sheet and an adapted survey questionnaire namely, the Oldenburg Burnout Inventory (OBI). These instruments shall be used to gather both respondents' demographic profiles and determinants of the mental health impact of COVID-19. The respondents of this study were the staff nurses in four (4) private hospitals in Surigao City who are involved in rendering care to patients exposed to COVID-19. The snowball sampling method was utilized in determining the sample size in consideration of the researchers' and respondents' limited mobility in the said hospital due to the guidelines, new normal health protocols, and difficulty in identifying and meeting with the schedules of the respondents. Burnout has been described as a dangerous condition resulting from overwork and chronic workplace stress that has not been successfully managed. It can lead to physical or mental illness. To effectively play their role during this pandemic, it is essential for them to maintain psychological and mental health; however, the literature has shown that the emergence of COVID-19 has significantly impacted the psychological and mental well-being of our Filipino medical workers. Vast amounts of evidence have shown a significant association between the COVID-19 outbreak and adverse mental health issues such as stress or burnout, depression, insomnia, and anxiety. With the limited actions implemented in response to the studies on the health impact of COVID-19 on healthcare workers, there is a need for immediate attention to formulating actions or interventions that will halt the long-term effects of the COVID-19 pandemic, especially on the mental health of healthcare workers.

KEYWORDS: Burnout, COVID-19, Descriptive Survey, Disengagement, Exhaustion, Private Hospitals, Registered Nurse, Surigao, Philippines.

INTRODUCTION

The typical workload of staff nurses in private hospitals is multifaceted and demanding, involving various responsibilities such as patient care, documentation, communication, education, administrative tasks, and emotional support. Nurses must juggle multiple priorities and manage competing demands while providing high-quality care to patients. Burnout profoundly affects staff nurses by leading to emotional exhaustion, depersonalization, and reduced personal accomplishment. This emotional toll undermines nurses' well-being, job satisfaction, and ability to provide quality care, contributing to physical health issues, impaired job performance, and increased turnover. Addressing burnout requires systemic interventions to promote nurse well-being and manage workload effectively, ensuring a supportive workplace environment prioritizes patient safety and nurse satisfaction (Montgomery & Patrician, 2022; & Zareei et al., 2020).

The emergence of COVID-19 exerted unprecedented pressure on the country's health care system and presented various challenges to its healthcare provider's workforce, potentially affecting their work performance and mental health and even putting their lives at risk. The Philippines' Department of Health has firmly advocated compliance with at least the minimum health standards and protocols to avert health institutes' collapse and assist the health workforce in responding to COVID-19 cases in the country. To boost the morale of the frontline health workers, the Duterte administration even initiated monetary remuneration for doctors and nurses who incur the virus in their line of work. As of June 22, 2020, there are 3,122 health workers in the country inflicted with the virus. Sadly, there were reported manifestations of stress or burnout, anxiety, and depression in nurses. While nurses remain committed to this role, the unprecedented pressure exerted by the pandemic on every country's healthcare system has



presented various challenges to nurses, such as increased patient volume, increased patient load, and COVID-19 protocols that could affect their well-being and work performance. Much worse, they are risking their lives to carry out their duties, causing intense fear of being infected or unknowingly infecting others (Cullen et al., 2020).

Moreover, authorities of LGU Surigao City, on September 27, 2020, through the Department of Health-Center of Health and Development – CARAGA Region, declared local transmission within the city, reporting the increased cases of virus transmission. These cases have led to a surge of admissions to different private hospitals in Surigao City and eventually have presented various challenges to nurses, leading to uneasiness and affecting psychological and mental health.

Health professionals working directly with patients experience severe stress that can lead to burnout and decreased capacity to continue working. Burnout has been described as a dangerous condition resulting from overwork and chronic workplace stress that has not been successfully managed. It can lead to physical or mental illness. To effectively play their role during this pandemic, it is essential for them to maintain psychological and mental health; however, the literature has shown that the emergence of COVID-19 has significantly impacted the psychological and mental well-being of our Filipino nurses. Vast amounts of evidence have shown a significant association between the COVID-19 outbreak and adverse mental health issues such as stress or burnout, depression, insomnia, and anxiety (Montgomery & Patrician, 2022; & Scott, 2020).

With the limited actions implemented in response to the studies on the health impact of COVID-19 on healthcare workers, there is a need for immediate attention to formulating actions or interventions that will halt the long-term effects of the COVID-19 pandemic, especially on the mental health of healthcare workers. The foregoing reasons prompted the researchers to undertake a study on the prevalence of burnout among staff nurses of private hospitals in Surigao City during the COVID-19 pandemic.

Framework

This study was anchored on the survey by Zareei et al. (2020) titled Job Burnout among Nurses during COVID-19 Pandemic: A Systematic Review. It stated that the level of burnout in nurses occur because nurses are the most significant portion of healthcare providers who are in close contact with patients infected by COVID-19, it is necessary for health care policymakers to adopt strategies for preventing or reducing burnout among nurses. From these concepts, the researcher determined the level of burnout among nurses in private hospitals in Surigao City during the time of COVID-19 pandemic.

The respondents' demographic profile included their age, sex, educational attainment, length of working experience, and length of exposure to COVID-19 patients.

Age was considered to determine the influences of how nurses respond to certain factors affecting one's mental health during the pandemic;

Sex contributes to how the respondents regard certain things differently, which can influence their psychological and mental health;

Marital Status refers to the respondents' civil status, whether they are single, married, widowed, or separated;

Educational Attainment was also considered being one of the essential backgrounds as to what is the current profession of every subject;

Length of Working Experience describes the size or duration of work experience of the respondents related to the medical field; and

Length of Exposure to COVID-19 Patients refers to the length of time, in weeks, the respondents have been catering care to COVID-19 patients.

Then, the Oldenburg Burnout Inventory (OBI) was used by the researchers to determine the burnout level of staff nurses of private hospitals. The inventory has been extensively used in research to measure job burnout, where respondents are presented with a series of statements, which they may agree or disagree with, and are asked to indicate the degree of agreement or disagreement.

Statement of the Problem

The primary purpose of this study is to determine the prevalence of burnout experienced during the COVID-19 pandemic among the staff nurses of private hospitals in Surigao City. Specifically, this study sought to answer the following questions:

1. What is the profile of the respondents in terms of:
 - 1.1. age;



- 1.2. sex;
- 1.3. marital status; and
- 1.4. length of working experience?
2. Using the Oldenburg Burnout Inventory, what is the burnout level among staff nurses in private hospitals during the COVID-19 pandemic in terms of:
 - 2.1. disengagement; and
 - 2.2. exhaustion?
3. Is there a significant difference in the burnout level among staff nurses in private hospitals during the COVID-19 pandemic when grouped according to profile variables?
4. Based on the study's findings, what recommendations/interventions may be proposed?

METHODS

This descriptive quantitative study is primarily concerned with the level of burnout among nurses working in private hospitals in Surigao City. The following research tools were used in the actual collection of data which includes, the respondent’s Personal Data Sheet and an adapted survey questionnaire namely, the Oldenburg Burnout Inventory (OBI). These instruments shall be used to gather both respondents’ demographic profiles and determinants of the mental health impact of COVID-19. The respondents of this study were the staff nurses in four (4) private hospitals in Surigao City who are involved in rendering care to patients exposed to COVID-19. The snowball sampling method was utilized in determining the sample size in consideration of the researchers’ and respondents’ limited mobility in the said hospital due to the guidelines, new normal health protocols, and difficulty in identifying and meeting with the schedules of the respondents. The following research tools were used to collect data: frequency count and percentage distribution to quantify the profile distribution of the respondents; mean and standard deviation to quantify the level of burnout among staff nurses surveyed based on the OBI tool; and the Analysis of Variance (AnOVa) to determine if there is a significant degree of difference in the responses of the respondents with respect to the profile variables.

Oldenburg Burnout Inventory (OBI). A survey with positively and negatively framed items that covers two areas: exhaustion (physical, cognitive, and affective aspects) and disengagement from work (negative attitude towards work objects, work content, or work in general). Multiple questions for each of these subscales and responses are in the form of a 4-point Likert scale from strongly agree (1) to disagree (4) strongly. The researcher asked permission from the author to adapt the research tool.

Ethics in the conduct of this research were strongly considered for the academic integrity of this study. Ethical research practices in educational institutions are strongly followed since it is always the goal of educational research to contribute to the general welfare of the academic community and to generally create measurable information or data that will eventually add to the increase of human knowledge (Ederio et al., 2023) such as the essence depicted by this study.

RESULTS AND DISCUSSION

I – Profile Distribution of the Respondents

Table 1 presents the demographic profile of the respondents. Specifically, the staff nurses among private hospitals in Surigao City, in terms of age, sex, marital status, and length of working experience, are cited.

Table 1. Demographic Profile Distribution of the Respondents

PROFILE VARIABLES	f (n=55)	%	
Age	25-30 years old	10	18
	31-35 years old	17	31
	36-40 years old	14	25
	Above 40 years old	14	25
Sex	Male	9	16
	Female	46	84
Marital Status	Single	15	27
	Married	40	73



Work Experience length	Less than five years	28	51
	5-10 years	17	31
	11-15 years	3	5
	More than 15 years	7	13

It can be gleaned in Table 1 that most of the respondents were female comprising 46 or 84% of the sample pool. Also, most of the respondents are 31-35 years old (17 or 31%), followed by 36-40 years old and 40 years old above (14 or 25%). Moreover, 40, or 73% were married, and 28, or 51% had work experience of less than five years. These findings support some of the data in the study of Feliciano (2019) titled Competency of Nurses in the Context of Philippine Healthcare which revealed that most Filipino nurses were female with a mean age of 31.64 years old, single, under-staff nurse position, and been working for 1-30 years.

II – Level of Burnout among Staff Nurses in Surigao City

The succeeding tables show each dependent variable's verbal and numerical interpretation, precisely the level of burnout, particularly disengagement and exhaustion among the staff nurses in Surigao City Private Hospitals. Tables 2 and 3 show the level of burnout among the respondents regarding disengagement and exhaustion.

In response to the Oldenburg Burnout Inventory (OBI), Tables 2 and 3 revealed an assessment of burnout that may emerge when employees are exposed to a stressful working environment; this study has shown that private hospital nurses in Surigao City are more likely to experience burnout, specifically disengagement (M=2.80, SD=0.27) and exhaustion (M=2.84, SD=0.29).

Table 2. Level of Burnout among Staff Nurses in Surigao City – Disengagement

INDICATORS	M	SD	VI	QD
DISENGAGEMENT				
1. I always find new and exciting aspects in my work.	3.07	0.77	Agree	Moderate
2. More and more often, I talk about my work negatively.	2.45	0.81	Disagree	Poor
3. I tend to think less at work and do my job almost mechanically.	2.42	0.66	Disagree	Poor
4. My work is a positive challenge.	3.45	0.63	Strongly Agree	High
5. Over time, one can become disconnected from this type of work.	2.60	0.63	Agree	Moderate
6. Sometimes, I feel sickened by my work tasks.	2.36	0.78	Disagree	Poor
7. This is the only type of work that I can imagine myself doing.	2.78	0.79	Agree	Moderate
8. I feel more and more engaged in my work.	3.22	0.63	Agree	Moderate
AVERAGE	2.80	0.27	Agree	Moderate
Parameter	Verbal Interpretation (VI)		Qualitative Description (QD)	
1.00-1.75	Strongly Disagree		Not at All	
1.76-2.50	Disagree		Poor	
2.51-3.25	Agree		Moderate	
3.26-4.00	Strongly Agree		High	

As shown in Table 2, respondents tend to agree with almost all statements referring to their level of burnout in terms of disengagement (M=2.80, SD=0.27). Overall, the staff nurses felt disengaged, indicating a moderate level of burnout. To emphasize, the staff nurses under study strongly agreed that their work is a positive challenge (M=3.45; SD=0.63). Burnout is an essential issue as healthcare systems face rising demands and insufficient resources. Changes in working conditions during the COVID-19 pandemic may be associated with increased rates of burnout, anxiety, and depression (Scott A. et al., 2020). According to the study by Dobson (2020), working in a high-exposure environment was associated with greater endorsement of symptoms of burnout. Anxiety and stress were also reported in the study of Sandoiu (2020) by frontline nurses who are working in departments where they have come in contact with COVID-19 patients and nurses who worked in departments in which they had contact with patients with COVID-19.



Positively, for the respondents, despite the COVID-19 pandemic's significant and negative impact on the healthcare institutions in Surigao City and on the staff nurses themselves, they still view their jobs positively. Although burnout can result in poor performance, especially for nurses, a recent study shows that despite the challenges they face each day, it has helped them to do better at their jobs and meet the requirements of the delivery system. (Mental Health America, 2020)

III – Degree of Difference in the Perceived Benefits of Online Shopping Affecting the Behavior of Online Millennial and Gen Z Consumers when they are grouped according to their Profile

Table 3. Level of Burnout among Staff Nurses in Surigao City – Exhaustion

INDICATORS	M	SD	VI	QD
EXHAUSTION				
9. There are days when I feel tired before I arrive at work.	3.07	0.69	Agree	Moderate
10. After work, I need more time than in the past to relax and feel better.	2.87	0.75	Agree	Moderate
11. I can tolerate the pressure of my work very well.	2.62	0.76	Agree	Moderate
12. During my work, I often feel emotionally drained.	3.15	0.62	Agree	Moderate
13. After working, I have enough energy for my leisure activities.	2.89	0.81	Agree	Moderate
14. After my work, I usually feel worn out and weary.	2.80	0.78	Agree	Moderate
15. I can manage the amount of my work well.	2.64	0.73	Agree	Moderate
16. When I work, I usually feel energized.	2.67	0.70	Agree	Moderate
AVERAGE	2.84	0.29	Agree	Moderate

Table 3 shows that all respondents agreed (M=2.84, SD=0.29) to be exhausted, hence a moderate level of burnout. Moreover, the staff nurses agreed that during their work, they often feel emotionally drained (M=3.15, SD=0.62) – a significant manifestation of job burnout; also seconded by the statement, there are days when I feel tired before I arrive at work (M=3.07, SD=0.69). Some experts think that other conditions, such as depression, are behind the phenomenon of burnout. However, researchers point out that individual factors, such as personality traits and family life, influence who experiences job burnout.

Moreover, Maslach (2016), in his paper, emphasized that a great deal of research has indicated that long-term exposure to job-related stress can lead to burnout. At the outset, burnout was reported most predominantly among human service workers. In modern society, job stress and burnout are essential issues for healthcare professionals. Burnout not only endangers their health and well-being but also is associated with higher medical errors and suboptimal quality of care (Garcia, 2019).

In support of the above finding, changes in working conditions during the COVID-19 pandemic may be associated with increased rates of burnout, anxiety, and depression (Gambaro, 2023). According to the study by Koutsimani (2019), working in a high-exposure environment was associated with greater endorsement of symptoms of burnout.

IV – Significant Difference in the Experiences of Burnout among Staff Nurses of Private Hospitals in Surigao City Hospitals with Respect to Profile Variables

The succeeding tables shown below present the significant differences in the level of burnout among the staff nurses when grouped according to their respective demographic profile variables. The data were treated using Analysis of Variance (ANOVA), and the p-value determines whether the null hypothesis will be rejected or not.

Table 4. Significant Difference in the Experiences of Burnout among Staff Nurses in Surigao City Private Hospitals with Respect to Profile Variables

Variables	SS	df	p-value	Decision	Difference	
Age	22.12	3	0.02	Do Not Reject Ho	Significant	
Disengagement	Sex	1.28	1	0.54	Reject Ho	Not Significant
	Marital Status	2.15	1	0.40	Reject Ho	Not Significant
	Work Experience Length	16.52	3	0.09	Reject Ho	Not Significant



Exhaustion	Age	11.91	3	0.41	Reject Ho	Not Significant
	Sex	1.08	1	0.68	Reject Ho	Not Significant
	Marital Status	1.68	1	0.63	Reject Ho	Not Significant
	Work Experience Length	18.58	3	0.04	Do Not Reject Ho	Significant

Table 4 shows the results of the significant differences in the burnout level among staff nurses of private hospitals in Surigao City during the COVID-19 pandemic when the staff nurses, the respondents, are grouped according to profile variables. It can be inferred from the table that regardless of the respondents' sex, marital status, and work experience length, the disengagement burnout level of the staff nurses does not vary. In other words, the mentioned profiles are not contributory factors to the disengagement burnout level experiences of the respondents during the pandemic. Likewise, age, sex, and marital status do not define or influence the feeling of exhaustion by the staff nurses during the pandemic. Meanwhile, the staff nurses' disengagement experiences vary with respect to their age and their exhaustion is somewhat associated with the staff nurses' work experience length.

These results supported the study conducted by Cullen, et al. (2020), which showed that it is very apparent that nurses have been exposed to high levels of stressful or traumatic events and expressed substantial negative mental health outcomes, including stress-related symptoms, depression, anxiety, and insomnia. Most of the nurses suffered from mild-moderate disturbances. Another literature review also proved the results above, stating that anxiety, depression, burnout, and insomnia were the most prevalent mental health impacts of COVID-19 on nurses and the age, gender, nature of the job, and the length of service they have rendered in the institution really affects the likelihood of someone having this (Khan, 2020).

Scott et al. (2020) found out that adult's age had a curvilinear relationship with the burnout they are experiencing. Age predicted burnout negatively among younger people and positively among older people. From the same study, mental health under COVID-19 has begun to show conflicting results, particularly on the relationship between age and mental health disorders. Results suggest age remains an important predictor for mental health disorders during the COVID-19 pandemic. However, psychiatrists and mental health services should not use a specific age as either a positive or a negative predictor in screening and identifying people at risk. Instead, they should be mindful that the association between age and mental health issues could vary depending on the age range.

On the other hand, in relation to the present finding on the indicators of exhaustion and length of working experience, it revealed that the length of service these staff nurses rendered to their profession directly contributes to the degree of burnout they may experience. Being a people-oriented profession, the development of burnout is affected by multiple factors. One of the potential determinants is the nurses' length of work experience. In the relationship between the length of work experience and burnout, several authors report varied findings (Montgomery & Patrician, 2022; & Scott, 2020).

In contrast, Khan (2020) established that burnout levels grow with the length of work experience in nurses working at intensive care units. The overall assessment of the incidence of burnout depending on the length of work experience did not demonstrate any statistical significance of the relationship. The results suggest that the reason behind the significantly higher incidence of burnout in the period of 1–3 years may be the increased work efforts of nurses and midwives, who enthusiastically perform their jobs and many times neglect their personal mental hygiene. In the fourth to the fifth year of clinical practice, nurses find balance and maturity both on the professional and personal level. The continuing work-related stress and the confrontation with realities such as death, dying, and suffering, personal and professional expectations, and physical exertion may be the cause of the significantly higher incidence of burnout among nurses and midwives with more than five years of work experience.

CONCLUSIONS AND RECOMMENDATIONS

The workforce of staff nurses employed among private hospitals in Surigao City is mostly dominated by females who are married, novices in the profession, and have direct contact with COVID-19 patients, which only infers that frontline workers in the city are at high risk of threats of the virus. Nurses in Surigao City experienced anxiety and extreme burnout since the surge of COVID-19 cases in the city. In response to this instance, most of these individuals felt scared without any good reason and felt sickened by their work tasks. Surprisingly, they still have some time for leisure after work, which explains how Filipinos, particularly Surigaonons, deal with the demands of work, being active and very enthusiastic. Nurses of both genders, exposed and not directly



exposed to COVID-19 patients, vocally agreed that the COVID-19 pandemic had an impact on their mental health, leading to a moderate level of burnout. Though both genders' mental health was affected by COVID-19 somehow differently, they still are indeed prone to and at risk for job burnout, whether or not they are exposed to COVID-19 patients. Research suggests that as individuals age, they may become more disengaged or detached from their work. This disengagement can be a result of various factors, including physical fatigue, a desire for work-life balance, or a sense of accomplishment in their careers. Lastly, the length of work experience has a different degree or impact on nurses' mental health as to burnout. Nurses who have been new in contact with COVID-19 patients experience burnout compared to those who have been in contact with these patients and other patients for quite some time.

To address disengagement and burnout, health organizations can implement strategies such as flexible work arrangements, mentorship programs, and wellness initiatives that support employees of all ages in managing stress and maintaining engagement in their work. This may be implemented every time there is a pandemic or major health restrictions. Additionally, older workers can benefit from career planning and transition support as they approach retirement to ensure a smooth transition into the next phase of their lives. Policymakers should pay attention to and support medical employees who experience a variety of mental health issues, particularly job burnout. As a result, ongoing monitoring of the psychological effects following COVID-19 outbreaks, as well as all other infectious disease outbreaks and work-related aspects, should be a part of the preparation efforts of health care systems, particularly the hospital administrator, hospital human resource management office, and the Department of Health (DOH) - Surigao del Norte as a whole. The findings of the study highlight the vital role of hospital and nurse administrators in supporting nurses during the pandemic through evidence-based education, training or interventions, and policy. As being exposed directly to COVID-19 patients was linked with increased fear of COVID-19, it is imperative that hospitals review existing protocols to determine if it is feasible, efficient, and ideal measures designed for employees and formulate or develop training plans to improve the capacity of nurses to effectively care for and manage COVID-19 patients.

ACKNOWLEDGMENT

The researchers would like to express their heartfelt gratitude for the support and generosity of the people who made this research possible:

First and foremost, thanks to the All-Powerful Father, who is the source of everything, for giving the researchers the knowledge, courage, and strength to overcome all the challenges. He also is worthy of praise for the peace he created in the midst of the difficulties and challenges we overcame, enabling us to succeed and finish the research with our best efforts. The most important thing is that He sent His Holy Spirit to instruct and enlighten the minds of the researchers. Glory to the Most Gracious One;

To the researcher's parents, Mr. and Mrs. Dogmoc, Mr. and Mrs. Lopez, and Mr. and Mrs. Taypa, for their constant help, support, prayers, finances, motivation, and inspiration to pursue this study, and for believing that this study will be successful. Gratitude is also extended to their other loved ones for their unwavering financial, emotional, and spiritual support as well as for their constant understanding during trying times in business. The researchers most crucially want to thank them for their prayers, counsel, and sacrifices;

To Sr. Sahlee A. Palijo, SPC, the Dean of the College of Health Sciences Department, for the support in taking the time to validate the research instrument and for allowing the researcher to conduct this study;

To Dr. Nikko T. Ederio, research instructor, for sharing his knowledge and ideas relevant to the study, and also for his significant advice and patience during the whole semester. Your mentorship, encouragement, and expert advice were indispensable in shaping the direction and methodology of this study;

To Mrs. Judith E. Almonguera, RN, MAN, the researchers' adviser for the generous help in advising, reminding, and guiding the researcher, sharing her time and effort, and continuous encouragement – whose knowledge, persistent direction, counsel, and patience helped us complete this study successfully, as well as for her unwavering enthusiasm for research that kept us involved in this project continuously and for her unending support throughout this journey;

To the statistician, whose recommendations, insightful comments, and counsel were very helpful to us in completing and successfully finishing this study sharing her expertise and assisting with data analysis and statistical calculations; Adherence to Hypertension Management based on the ISH Guidelines among Hypertensive Patients in Barangay Washington, Surigao City;



To the authors cited, this research would not have been possible without the groundbreaking work of the authors cited in this study. The contributions of these researchers and scholars have laid the foundation for the understanding of hypertension management and ISH guidelines;

To the Panel of examiners, Sr. Marie Rosanne Mallillin, SPC, Dr. Manuel S. Tan, Jr., and Ms. Nova Marie S. Pedrosa, MAGC for their constructive comments, suggestions, and critiquing;

The researchers would also like to express gratitude to the respondents of the study for the support they provided in order for this study to be successful; and

To everyone who we failed to mention but in one way or another provided inspiration for us to pursue our research...
THANK YOU VERY MUCH.

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Cite this Article: Cherylmae C. Dogmoc, Cheere-An C. Lopez, Mia Jean P. Taypa, Judith E. Almonguera, Nikko T. Ederio (2024). Experiences of Burnout among Staff Nurses of Private Hospitals in Surigao City. International Journal of Current Science Research and Review, 7(5), 3393-3401