**Examine the relationship between organizational commitment and job burnout of personnel in Health centers of Amol city**

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**Abstract:** The vital goal of this study is examine the relationship between organizational commitment and job burnout of personnel in health centers of Amol city. Organizational commitment can be a simple belief in the values and goals of the organization for which the three components are considered. Home health care networks in the most peripheral service-delivery units in the country. Health centers depending on the geographic region, especially roads and population may have one or more villages covered by its services. Health home health workers serve only one job category, which according to gender is called (male health workers) and (female health workers). Many health workers in routine services cannot be included employee service and often live streaming and daily contact with the public health workers and rural families was carried out.

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**Keywords:** Organizational commitment, Job burnout, Health centers, Amol city

**1. Introduction**

An insight into employee loyalty and commitment to the organization is an ongoing process due to participation in organizational decisions, according to the people and prosperity of the show (Moghimi, 2001).

Liman W. Porter and his colleagues identified the relative degrees of commitment to the organization and his participation in it have defined.

The definition of organizational commitment consists of three factors:

• Belief in the goals and values of the organization

• Willingness to intense effort in the organization

• A strong desire to continue as members of the organization (Potter, 2001).

Manpower committed to the organization can also reduce absenteeism, delays and displacements caused a dramatic increase in performance of the organization, mental freshness of the staffs and manifesting both organizational admirable targets and personal goals (1).

Organizational commitment can be a simple belief in the values and goals of the organization for which the three components are considered:

1) Emotional commitment: intention to put their energy and loyalty to continue their work in the organization.

2) Continuous commitment: the desire to do regular activities based on individual recognition of the costs associated with leaving the organization.

3) Normative commitment: a sense of duty to remain as a member of the organization. (2)

Burnout is a dissatisfaction with the process, which may be mild boredom and apathy to severe cases of depression or physical illness manifested job. Burnout often cannot be said when one comes to know; in many cases people are unhappy, but cannot be accurately determined because of it. (Alvani, 2001)

Home health care networks in the most peripheral service-delivery units in the country. Health centers depending on the geographic region, especially roads and population may have one or more villages covered by its services. Health home health workers serve only one job category, which according to gender is called ((male health workers)) ((female health workers)). Many health workers in routine services cannot be included employee service and often live streaming and daily contact with the public health workers and rural families is carried out. Achieve the objectives of this service is subject to continuity, time and patience (5).

Retention of health workers serving in the ranks of health workers in full-length and lack of scientific promotion, career and the need to stay in the village during the whole service are two major problems with health providers training courses for jobs. (5).

Because people are interconnected health workers in health centers and rural access to health care is the first level and played a major role in advancing the country's integrity system.

This study seeks to answer the fundamental question: Is there any relationship between organizational commitment and burnout in health care home staff?

**Definition of terms (theoretical and practical definition):**

**Theoretical Definition**

Organizational Commitment: Organizational commitment is a mental state which expresses a desire, needs and requirements for continued employment in an organization's early in providing (YroAlen, 2007) as well as a condition for continuing to serve in an organization that includes emotional is normative and continuous (Majidi, 1997).

A: affective commitment: this part of the commitment, positive emotions and attachment to its organization (Herskoeich and Meyer, 1563).

B: Normative commitment: commitment to duty, as a perceived duty to support the organization and its activities defined (Sadeghifar, 2007).

C: Continuous commitment: understanding the increase in costs resulting from lost in an organization (Sadeghifar, 2007).

Burnout: emotional exhaustion, burnout syndrome for years of involvement and commitment to the work and the people. In other words, physical fatigue, burnout, emotional and psychological long-term exposure to looking at hard labor. This syndrome is a condition in which low power and the ability and willingness of individuals and their willingness to do the work and activity is reduced (Maslach et al., 1561).

**Practical definition:**

Organizational Commitment: In this study, organizational commitment is the point that subjects person answering acquires from the 24 question questionnaire of organizational commitment (YroAlen, 1557).

In this study is to score that subjects a person's emotional commitment to answering the questions of organizational commitment acquires (YroAlen, 1557).

In this research, normative commitment the point that subjects answering the questions 9-16 Organizational Commitment Questionnaire acquires (YroAlen, 1557).

In this study, the continuous commitment of the individual is the subject of answering questions 17-24 Organizational Commitment Questionnaire acquires (YroAlen, 1557).

**Job Burnout:**

A score of Job Burnout in this study is that the subjects answered the questions on burnout gain.

**Health center:**

Units stationed in villages that offer health services, the present study was conducted in the city of Amol, and there are 153 active health center where the samples are working.

**Health workers:** the staff working in health centers in the study of male health workers and female health workers, for example-governmental organizations.

**Literature Review:**

Ashrafi Sultan Ahmadi, H. (2010) to examine the relationship between organizational commitment and job burnout among schoolteachers city of Mahabad. Descriptive - survey were used. The population included 300 secondary school teachers. Among them 168 patients stratified random sampling method were selected as sample and 161 questionnaires were analyzed. Data analysis using Pearson correlation test showed that there is a significant relationship between organizational commitment and job burnout. And also between burnout and affective commitment, continuous commitment and normative commitment has a significant negative correlation.

Kord Temini and Kouhi (2011) to examine the relationship between organizational commitment and organizational spirituality and burnout among staff and post office in Zahedan city and Gorgan. The results showed that normative commitment and total scores of organizational commitment and significant negative correlation with the depersonalization. Personal performance continued commitment, normative commitment and total scores of organizational commitment had a significant positive correlation. Results also indicated that organizational spirituality and total scores of all dimensions of organizational commitment had a significant positive correlation. Stepwise regression results showed that 6.1% of the variance in the amount of personal work ongoing commitment articulated and positive predictor for it. Depersonalization 20.4% of the variance in normative commitment was articulated and negative predictor for it. Results revealed that depersonalization and personal working together could explain 12.9% of the variance in total scores of organizational commitment the negative predictive and personalized performance was positive predictor for total scores of organizational commitment. Univariate regression analysis showed that organizational spirituality could all dimensions of organizational commitment positively and significantly predict. T test results showed a significant difference between Zahedan city of Gorgan postal clerk in the average scores of organizational commitment, organizational spirituality there is no burnout dimensions and grades.

Talaee and colleagues in a study on employee health care centers of Mashhad showed that emotional exhaustion and depersonalization, reduction in personal success with emotional exhaustion and depersonalization, emotional exhaustion significant relationship and the significant negative relation with age employees and in depersonalization significant difference was observed between men and women (6).

Low and high workload of nursing staff, the main causes of burnout in nurses expressed. Trying to upgrade and maintain communication between nurses and nurse managers and physicians' job satisfaction and staff retention may enhance and improve the quality of patient care (7).

Prevalence of Job Burnout in healthcare employees in one of the teaching hospitals in Italy, emotional exhaustion and depersonalization were observed in the average level of work in the emergency department with lower levels of success (8).

The results of Abdi Masouleh et al. showed that there is relationship between burnout and mental health colleagues in 156 nurses, implying that the majority of subjects in the dimensions of emotional exhaustion character at a low level and high level were later reduced personal accomplishment (9).

The findings Najafi et al. showed significant relationship between Job Burnout and mental health staff Esfahan Nuclear Fuel Research and Production Center, but less burnout level of health and medical personnel (10).

**Goals and assumptions**

**General Goal of project**

Determine the relationship between organizational commitment and job burnout among health workers Amol city in 2014.

**Specific objectives of the project**

1) Determination the organizational commitment of health workers;

2) Determination the status of Job Burnout of health workers;

3) Determination the organizational commitment in terms of demographic characteristics;

4) Determination of burnout in terms of demographic characteristics;

5) Determination the relationship between organizational commitment and job burnout.

**Hypotheses (or research questions):**

1) Does the organizational commitment of health workers is desirable?

2) Does the Job Burnout of health workers is desirable?

3) Is there a significant relationship between organizational commitment and demographic characteristics there?

4) Is there a significant relationship between burnout and demographic characteristics there?

5) Is there a significant relationship between organizational commitment and job burnout?

**Research method:**

The research is descriptive and correlational. The study population included 153 health workers employed in active health center city of Amol, a total of 264 people are employed in these centers.

According to Morgan table 156 health workers (78 females and 78 males) were selected as the sample. Multi-stage stratified random sampling method is used.

Health workers will be entering the study must meet the following requirements:

- At the time of the study in the city of Amol Health Network are working.

- Have not previously completed the questionnaire.

- History of effective drugs on the psyche (in the past six months) have not.

- Disability is not a member of imperfection.

- Their immediate family member’s incurable illness or disability is physical and mental.

- In the past six months, such as death of a family member with mental illness, divorce, serious accidents, there has not been an addict in the family.

**Research Tools:**

A) Scale (questionnaire): organizational commitment by Allen and Meyer was designed to evaluate the organizational commitment. The scale has 24 questions, each question based on the Likert scale (Strongly Disagree (5), to highly agree (1)) was scored. And has three sub-scales are ongoing commitment and normative commitment.

B) Maslach Burnout Inventory, which contains 25 questions. 9 questions related to emotional exhaustion (emotional exhaustion), 5 questions about depersonalization and eight questions relating to personal accomplishment (lack of career advancement), which is based on the frequency of "every day" to "never" and the intensity of "very low" to "too much" was scored. In this study, analysis of data from statistical tests such as Pearson correlation, regression t test for independent samples will be used. And all this analysis will be conducted using the software spss version 20.

**Findings:**

How is the organizational commitment?

According to the mean of organizational commitment and its components are significantly higher than the average concept (3); Results showed that the average score over the rest of the components is an ongoing commitment. According to the significance level (0.000) was observed organizational commitment is desirable.

How Burnout situation is?

Table 1: Descriptive statistics related to organizational commitment

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Variable | No. | Ave. | t | Df | Sig. |
| organizational commitment | 156 | 4.58 | 50.36 | 155 | 0.000 |
| Emotional commitment | 156 | 3.96 | 80.40 | 155 | 0.000 |
| Normative commitment | 156 | 4.87 | 51.72 | 155 | 0.000 |
| Continued commitment | 156 | 4.91 | 51.23 | 155 | 0.000 |

Table 2: Descriptive statistics related to burnout

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Variable | No. | Ave. | t | df | Sig. |
| Job burnout | 156 | 3.163 | 23.69 | 155 | 0.000 |

According to the table of occupational burnout significantly higher than the average concept (3); the findings suggest considering the significance level (0.000) observed burnout is desirable.

Table 3: Results of ANOVA comparing organizational commitment based on age, sex

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Variable | Class | Average | Standard deviation | F | Sig. |
| Age category | <26 | 3.09 | 0.226 | 4.256 | 0.014 |
| 26-30 | 3.35 | 0.165 |
| 31-35 | 3.23 | 0.253 |
| 36-40 | 3.56 | 0.276 |
| > 40 | 3.86 | 0.159 |
| Gender | Man | 3.5512 | 46.588 | 3.671 | 0.056 |
| woman | 3.5380 | 0.66509 |

The results of analysis of variance organizational commitment shows that there are significant differences in organizational commitment in terms of Age category (p≤0.05). In such a way that aged 26 to 30 years with a mean of organizational commitment under the Age category of 36 to 40 years had the highest organizational commitment, in other words, the findings suggest that increased with age in organizational commitment. The results of analysis of variance in terms of organizational commitment does not show significant gender differences in organizational commitment (p≥ 0.05)

Table 4: Results of one-way ANOVA for comparison of burnout on the basis of age, sex

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Variable | Class | Average | Standard deviation | F | Sig. |
| Age category | <26 | 3.21 | 0.226 | 5.693 | 0.005 |
| 26-30 | 3.59 | 0.169 |
| 31-35 | 3.69 | 0.189 |
| 36-40 | 3.89 | 0.362 |
| >40 | 3.65 | 0.297 |
| Gender | Man | 3.48 | 0.193 | 4.563 | 0.009 |
| woman | 3.29 | 0.397 |

The results of analysis of variance in burnout shows that there are significant differences in terms of Age category (p≤0.05). So that the Age category 36 to 40 years have a higher average burnout and burnout have the lowest Age category under 25 years. In other words, the findings suggest that increased with age burnout. The results of analysis of variance were significant gender differences in burnout does not show (p≥0.05).

**Conclusion:**

The first question showed that the mean organizational commitment and its components are significantly higher than the average concept (3), findings showed that the average score over the rest of the components is an ongoing commitment. With regard to the level of significance (. 000) observed organizational commitment is desirable.

The second question results showed that the mean burnout significantly higher than the average concept (3); findings with respect to the level of significance (.000) observed burnout is desirable.

The third question results showed that there are significant differences in organizational commitment in terms of age category (p≤0.05).

In such a way that aged 26 to 30 years with a mean of organizational commitment under the Age category of 36 to 40 years had the highest organizational commitment. In other words, the findings suggest that increased with age in organizational commitment. The results of analysis of variance in terms of organizational commitment does not show significant gender differences in organizational commitment.

The fourth question results showed that the analysis of variance in burnout shows that there are significant differences in terms of Age category (p≤0.05). So that the age category 36 to 40 years have a higher average burnout and burnout have the lowest age category under 25 years. In other words, the findings suggest that increased with age burnout. The results of analysis of variance were significant gender differences in burnout does not show.

The fifth question results showed that the Pearson correlation coefficient was used to answer the research question. As can be seen in the table due to the significant level obtained from the table, between the components of organizational commitment and job burnout there is a significant positive relationship.

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