

Job Satisfaction and Burnout among Nurses Working at a Tertiary Level Hospital in Bangladesh

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DOI: [10.36348/sjnhc.2023.v06i12.003](https://doi.org/10.36348/sjnhc.2023.v06i12.003)

| Received: 08.10.2023 | Accepted: 15.11.2023 | Published: 20.12.2023

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Abstract

Background: Burnout is a state of physical, mental, and emotional exhaustion caused by chronic overwork, and nurses are particularly susceptible to experiencing burnout, which can have implications for both job satisfaction and patient well-being. This study aimed to investigate job satisfaction, burnout, and the relationship between these factors among nurses working in the pediatric ward of a tertiary hospital in Bangladesh. **Methods:** A descriptive cross-sectional study was conducted, involving 105 conveniently selected nurses from various pediatric wards at the Bangabandhu Sheikh Mujib Medical University Hospital. Face-to-face interviews were conducted using a structured questionnaire to collect data. Statistical Package for Social Science (SPSS) was used to analyze the data, with 101 participants' data being considered for analysis after excluding four participants. Descriptive statistics such as frequency, percentage, mean, and standard deviation were used, along with inferential statistics including two-sample t-test, ANOVA, and correlation. **Results:** The participants' mean age was 28 years (SD±4.20). The average job satisfaction score was 2.50 (SD=.56), with approximately 16.3% of nurses reporting being very satisfied and 36.6% expressing satisfaction. Notably, nurses working in gastrology and neurology wards reported significantly higher job satisfaction (M=3.02; SD=.25) than those in other units (F=7.38; p=.000). Additionally, nurses who had participated in at least one training showed significantly higher job satisfaction (M=2.59; SD=.65) compared to those who had not received any training (M=2.40; SD=.55) (t=3.56; p<.05). Regarding burnout, the mean score was 2.11 (SD=.69). Work place (F=3.03; p=.03) and length of service (F=2.55; p=.04) were found to be significantly associated with burnout. Job satisfaction was negatively correlated with burnout, though the correlation was weak (r=-.09; p=.32). **Conclusion:** The study concluded that nurses in Bangladesh generally experience a moderate level of job satisfaction and a low level of burnout.

Keywords: Job satisfaction, Burnout, Pediatric Nurses, Tertiary Hospital, Bangladesh.

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INTRODUCTION

Burnout is the result of excessive work demands, affecting individuals physically, mentally, and emotionally, leading to feelings of exhaustion and a diminished sense of personal growth and job satisfaction [1, 2]. Studies have shown that healthcare providers, such as physicians, nurses, social workers, dentists, and care providers, experience high levels of burnout [2]. The prevalence of burnout varies across medical specialties, with intensive care workers being particularly susceptible to its effects [3, 4]. Pediatric hospitals present a demanding work environment for nurses, often leading

to intense emotional stress, feelings of helplessness, and sorrow as they care for sick or terminally ill children [5]. Additionally, burnout among nurses in such settings is linked to factors like limited decision-making freedom, excessive dependence on others, unclear roles, low self-esteem, and inadequate social support [6]. Furthermore, burnout among nurses can be influenced by various other factors, such as age, gender, length of employment, and the type of healthcare institution [7].

Nurses experience profound stress and burnout when they try to uphold their professional and personal

values. Going against these values threatens their sense of integrity and purpose [8]. The workload-induced burnout also impacts the satisfaction levels of hospital employees, including doctors, nurses, and other staff [9]. Job satisfaction among nurses refers to their positive feelings or attitudes towards various aspects of their job in hospitals [9]. The exact relationship between burnout and job dissatisfaction remains speculative. Research by Khamisa, Oldenburg, Peltzer, and Ilic (2015) explored work-related stress, burnout, job satisfaction, and general health in nurses and found that burnout and job satisfaction are interconnected and have an impact on overall health outcomes [10]. Another study by Alharbi, Wilson, Woods, and Usher (2016) investigated 150 critical care nurses and found that burnout serves as a predictor of job satisfaction [11], which aligns with the findings of De Simone and colleagues (2018) [12].

The impact of burnout on healthcare workers is widely recognized as an organizational risk, leading to issues like absenteeism, high turnover rates, increased illness, and even reduced patient satisfaction [2]. According to a study by Rosales, Rosales and Labrague (2013), burnout and job satisfaction can directly affect the quality of patient care [13]. Research evidence indicates that how authorities value nurses' contributions, salary, personal well-being, and professional growth is closely linked to their job satisfaction [14]. Moreover, previous studies have shown that training programs have a positive impact on employees' attitudes towards work and job satisfaction, while also influencing burnout levels [15].

Research conducted in Bangladesh has identified various factors associated with job satisfaction among nurses, including their payment levels, autonomy, task requirements, organizational environment, interactions, and professional status [16, 17]. However, there has been a lack of specific studies focusing on pediatric nurses in this context. Therefore, the researcher aimed to address this gap by investigating the job satisfaction and burnout experienced by nurses working in pediatric wards in Bangladesh. The hope was that the findings would contribute to identifying modifiable variables that influence burnout in the workplace and potentially lead to measures for job satisfaction improvement.

METHODOLOGY

This descriptive cross sectional was conducted among conveniently selected 105 nurses working in the pediatric ward of Bangabandhu Sheikh Mujib Medical University Hospital Dhaka, Bangladesh. Power analysis was used for estimating the sample size. The estimated sample size was 88 where the minimum significance level accepted was (α) 0.05, an exception power was 0.80 ($1 - \beta$) and a medium effect size was .30 [18]. However, a 20% attrition rate of 17 was added, so the total sample size for this study came to $(88+17) = 105$. But 4 nurses withdrew themselves in the middle of data collection,

therefore, 101 nurses were the main participants of this study. Only physically fit nurses with at least 6 months of experience in pediatric wards willing to be part of this study were considered as the sample for this study.

A structure questionnaire was used to collect data through face-to-face interview. The questionnaire had three sections designed to elicit information on socio-demographic characteristics, job satisfaction and burnout. The socio-demographic characteristic section was developed by the researcher herself based on literature review that consisted of 10 items such as age, gender, level of education, marital status, religion, type of employment, current working place, length of service, number of training, and income.

Minnesota Job Satisfaction Short Scale (JMSQ-SS) survey questionnaire was used in the second part of this study questionnaire to obtain information about the job satisfaction. It is consisted of 20 items including two subscales namely 'intrinsic satisfaction' contains 12 items from 1-12 and 'extrinsic satisfaction' contains 8 items from 13-20. A 5-point Likert scale ranging from 1 = 'very dissatisfied' to 5 = 'very satisfied' is used for rating the value. The total scores range from 20-100. The higher mean score indicates the higher job satisfaction. On the other hand, the burnout was measured by Maslach's Burnout Inventory- General Survey (MBI-GS) [19]. This scale is a standard questionnaire which contains 15 items. To reflect job burnout, MBI-GS is divided into 3 subscales: emotional exhaustion, depersonalization, and reduced personal accomplishment which is rated on the basis of happening of participant's working experiences by using 7 point Likert scale of self-assessment ranges from 1= never to 7= every day. Among 3 subscales, the items of personal accomplishment 11-15 are negative items which refers to lower scores. After reverse the negative items, the total score range of MBI-GS is 15-105. The higher mean score indicates the higher burnout.

After data collection, it was entered, cleaned, and analyzed using IBM SPSS program version 24. Both descriptive and inferential statistics were employed to analyze the data. The demographic characteristics were measured using frequency (f), percentage (%), mean (M) and standard deviation (SD). Bivariate analysis such as independent t test, ANOVA and Pearson's Product correlation were done to measure the relationship between socio-demographic characteristics, job satisfaction and burnout of respondents of this study.

Before commencing the study, the researchers obtained consent from the Institutional Review Board (IRB) of the National Institute of Advanced Nursing Education & Research (NIANER), as well as from Bangabandhu Sheikh Mujib Medical University (BSMMU) in Dhaka, Bangladesh. Participants were provided with a detailed explanation of the study's purpose, and both verbal and written consent were

obtained, ensuring confidentiality and anonymity. To avoid potential errors in data collection, the consent form was translated into Bengali language.

RESULTS

The section presents the socio-demographic characteristics of the participants, job satisfaction, and burnout, and the relationship between socio-demographic characteristics and job satisfaction and burnout of the participants as well as the correlations among subscales of job satisfaction and burnout.

Table 1 presents that the average age of the participants was 28 years ($SD \pm 4.20$). The mean income

was 31.13 ($SD \pm 6.15$) thousand BDT which was ranging from 27.60 to 50 thousands BDT. Majority of them were female ($n = 98, 97.0\%$), married ($n = 75, 74.3\%$), came from Muslims ($n = 80, 79.2\%$) families, and had permanent employment status ($n = 82, 81.2\%$). More than half of the nurses' educational background was Diploma ($n = 61, 60.4\%$) in nursing. More than one third of nurses' ($n = 37, 36.63\%$) working place was in oncology, nephrology and in Newborn Intensive Care Unit (NICU). A maximum of 54.46 % ($n = 55$) study subjects had working experience in between 1-5 years. Almost two third of them ($n = 63, 62.38\%$) did not get any professional training.

Table 1: The distribution of demographic characteristics of the participants (n=101)

Variables	Categories	n	%
Age Min =22; Max = 43; M=28; SD= 4.20			
	30 and less	81	80.20
	More than 30	20	19.80
Gender	Male	3	3.0
	Female	98	97.0
Level of Education	Diploma	61	60.4
	Bachelor	32	31.7
	Masters	8	7.9
Marital status	Married	75	74.3
	Single	26	25.7
Religious	Muslims	80	79.2
	Non-Muslim	21	20.8
Type of employment	Permanent	82	81.2
	Ad-Hoc	19	18.8
Current working place	Outputs, surgery, medicine	25	24.76
	Oncology, nephrology, NICU*	37	36.63
	Gastrology, neurology	17	16.83
	Others	22	21.78
Length of service	< 1 year	30	29.70
	1-5 yrs	55	54.46
	≥ 6 yrs	16	15.84
Number of training	None	63	62.38
	At least one	38	37.62
Income (Thousands)	Min =27.60; Max = 50.00; M=31.13; SD= 6.15		

Participants job satisfaction's score value can be observed from the table 2. The total mean score of job satisfaction was found to be 2.50 ($SD = \pm .56$) where mean score for intrinsic subscales was 2.39 ($SD = \pm .05$) and extrinsic subscale was 2.66 ($SD = \pm .07$). It is found

that about 36.6% ($n=37$) were satisfied and 16.3% ($n= 16$) were very satisfied about their job. As opposed to, 12.5% ($n=13$) were dissatisfied and 2.9% ($n=3$) were very dissatisfied in this regard.

Table 2: Distribution of job satisfaction of participants (n=101)

Variables	Very Satisfied	Satisfied	Uncertain	Dissatisfied	Very Dissatisfied	M ± SD
	n (%)	n (%)	n (%)	n (%)	n (%)	
Job satisfaction	16(16.3)	37(36.6)	32(31.4)	13(12.5)	3 (2.9)	2.50 +.56
Intrinsic						2.39 + .05
Always maintain a busy state	20 (19.8)	33(32.7)	41(40.6)	6(5.9)	1(1.0)	2.36 + .90
Opportunities for independent work	19(18.8)	45(44.6)	25(24.8)	12(11.9)	-	2.30 +.91
Now and then, there is a chance to do something different	15(14.9)	31(30.7)	35(34.7)	20(19.8)	-	2.59 +.97

Variables	Very Satisfied	Satisfied	Uncertain	Dissatisfied	Very Dissatisfied	M ± SD
	n (%)	n (%)	n (%)	n (%)	n (%)	
Opportunity to become an important player in the team	11(10.9)	39(38.6)	33(32.7)	17(16.8)	1(1.0)	2.58 +.93
The way my leaders treat their subordinates	19(18.8)	32(31.7)	31(30.7)	14(13.9)	5(5.0)	2.54 +1.10
My superiors' ability to make decisions	17(16.8)	42(41.6)	35(34.7)	5(5.0)	2(2.0)	2.34 +.88
Be able to do things that do not violate your conscience	14(13.9)	35(34.7)	36(35.6)	12(11.9)	4(4.0)	2.57 +1.00
Stability of work	28(27.7)	47(46.7)	22(21.8)	3(3.0)	1(1.0)	2.03 +.84
The chance to do something for other people	28(27.7)	49(48.5)	13(12.9)	9(8.9)	2(2.0)	2.09 +.97
Tell people what to do	16(15.8)	46(45.5)	37(36.6)	2(2.0)	-	2.25 +.74
The opportunity to give full play to one's abilities	15(14.9)	49(48.5)	26(25.7)	9(8.9)	2(2.0)	2.35 +.91
How to implement the Organization policy	7(6.9)	29(28.7)	51(50.5)	12(11.9)	2(2.0)	2.73 +.83
Extrinsic						2.66 +.07
My pay and my workload	15(14.9)	39(38.6)	31(30.7)	11(10.9)	5(5.0)	2.52 +1.03
Opportunities for promotion	10(9.9)	22(21.8)	28(27.7)	28(27.7)	13(12.9)	3.12 +1.18
I'm free to make my own decisions.	12(11.9)	33(32.7)	29(28.7)	20(19.8)	7(6.9)	2.77 +1.11
A chance to try my own way at work	15(14.9)	28(27.7)	31(30.7)	27(26.7)	-	2.69 +1.02
Working conditions	15(14.9)	34(33.7)	41(40.6)	10(9.9)	1(1.0)	2.49 +.90
Ways to get along with co-workers	14(13.9)	34(33.7)	42(41.6)	11(10.9)	-	2.50 +.86
The rewards of my work done well	14(13.9)	27(26.7)	27(26.7)	20(19.9)	13(12.9)	2.91 +1.24
The sense of accomplishment I get from my job	27(26.7)	46(45.5)	22(21.8)	5(5.0)	1(1.0)	2.28 +1.58

Table 3 shows the burnout score of participants. The overall mean score of burnout was 2.11 (SD=.69) out of 7 points where 2.22 (SD=.12) mean score was found for emotional exhaustion, 2.87 (SD= 1.67) for depersonalization and 1.31 (SD = .09) for reduced personal accomplishment sub-scale. Further, 65 (64.36),

12 (11.88),5 (4.95),4 (3.96),3 (2.97),3 (2.97), and 8(7.92) participants was observed to be burned out never, very few times in a year or less, occasionally one months or less, often one months or few times, frequent very week, very frequent or a few times a week and every day, respectively.

Table 3: Distribution of the Burnout of Participants (N=101)

Variables	Never	Very Few times a year or less	Occasionally one months or less	Often one months a few times	Frequent every week	Very frequent A few times a week	Every day	M ± SD
	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	
Burnout	65(64.36)	12 (11.88)	5 (4.95)	4 (3.96)	3 (2.97)	3 (2.97)	8(7.92)	2.11 ±.69
Emotional Exhaustion								2.22 ± .12
Work makes me feel exhausted	52 (51.5)	24 (23.8)	10(9.9)	6(5.9)	2(2.0)	5(5.0)	2(2.0)	2.06 ± 1.52
I feel exhausted from work.	56 (55.4)	21 (20.8)	10(9.9)	3(3.0)	4(4.0)	6(5.9)	1(1.0)	2.01± 1.53
I feel very tired when I get up in the morning and have to face the day's work.	43 (42.6)	2 3(22.8)	11(10.9)	7(6.9)	2(2.0)	7(6.9)	8(7.9)	2.55± 1.95
It's really stressful for me to work all day.	42 (41.6)	19 (18.8)	8(7.9)	12(11.9)	6(5.9)	3(3.0)	11 (10.9)	2.74 ± 2.04
Work makes me feel like I'm going to crash	65 (64.4)	18 (17.8)	6(5.9)	5(5.0)	2(2.0)	5(5.0)	-	1.77± 1.35
Depersonalization								2.87± 1.67

Variables	Never	Very Few times a year or less	Occasionally one month or less	Often one month a few times	Frequent every week	Very frequent A few times a week	Every day	M ± SD
	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	n (%)	
Since I started this job, I'm getting less interested in my job.	70 (69.3)	18 (17.8)	4(4.0)	4(4.0)	-	5(5.0)	-	1.62 ± 1.24
I'm not as enthusiastic about work as I used to be.	61 (60.4)	21 (20.8)	5(5.0)	5(5.0)	4(4.0)	1(1.0)	4(4.0)	1.90 ± 1.54
I doubt the meaning of my work.	67 (66.3)	15 (14.9)	5(5.0)	1(1.0)	7(6.9)	1(1.0)	5(5.0)	1.90 ± 1.67
I'm more and more indifferent to my work.	56 (55.4)	12 (11.9)	8(7.9)	4(4.0)	3(3.0)	2(2.0)	16 (15.8)	2.56 ± 2.25
I can effectively solve the problems in my work.	3 (3.0)	5 (5.0)	5(5.0)	3(3.0)	8(7.9)	9(8.9)	68 (67.3)	6.04 ± 1.69
Reduced Personal Accomplishment								1.31± .09
I think I'm making a useful contribution to the hospital.	92 (91.0)	2 (2.0)	5 (5.0)	1(1.0)	-	-	1(1.0)	1.21 ±.79
In my opinion, I'm good at my job.	95 (94.1)	2 (2.0)	2 (2.0)	1(1.0)	-	-	1(1.0)	1.15 ± .72
I feel very happy when I finish some things at work	92 (91.1)	3(3.0)	1(1.0)	2(2.0)	1(1.0)	1(1.0)	1 (1.0)	1.26 ±.97
I've done a lot of worthwhile work.	87 (86.1)	-	3(3.0)	3(3.0)	3(3.0)	2(2.0)	3 (3.0)	1.54 ± 1.46
I am confident that I can do all the work effectively.	92 (91.1)	1(1.0)	2(2.0)	1(1.0)	-	-	5(5.0)	1.38 ± 1.35

Table 4 presents the relationship between socio-demographic characteristics, satisfaction and burn out of participants. In bivariate analysis, the findings of this study show that the current working place, and numbers of training had significant relationship with job satisfaction. In multiple comparison, the result showed that the job satisfaction among nurses those had been working in gastrology and neurology ward (M = 3.02; SD =.25) was significantly F = 7.38; p <.001 higher than that of the nurses working in outpatient department, surgery, and medicine (M = 2.46; SD = .50), other wards (M = 2.40; SD=.47), and oncology, nephrology and NICU (M = 2.35; SD =.61). The mean job satisfaction of nurses those had participated in at least one training (M = 2.59; SD = .65) was significantly (t = 3.56; p <.05) higher compared to none (M =2.40; SD =.55).

In regards to the burn out, it is noticed that the working place, and the length of services had significant relationship with burnout. Nurses had been working in outpatient department, surgery, and medicine (M = 2.41; SD = .69) had significantly (F = 3.03; p <.05) higher burnouts than that of the nurses working in gastrology and neurology (M = 2.15; SD =.50), other wards (M = 2.11; SD=.88), and oncology, nephrology and NICU (M = 1.89; SD = .56). Similarly, burnout among the nurses those length of service was ≥ 5 years (M = 2.35; SD = .88), had significantly (F = 2.55; p <.05) higher burnout than 1-5 years (M = 2.11; SD =.68), and < 1 (M = 2.10; SD =.60). In addition, it is observed that monthly income was negatively associated (r = -.006; p = .95) with burnout. Further, the job satisfaction was found negatively (r =-.09; p =.32) correlated with burnout.

Table 4: Relationship between socio-demographic characteristics, satisfaction and burn out of participants (N=101)

	Job satisfaction	r/t/F	p value	Burnout	r/t/F	p value
	M ± SD			M ± SD		
Age		-.26	.79		-1.23	.21
Less than 30	2.49±.57			2.08±.63		
30 and More	2.5±.49			2.21±.88		
Gender		1.58	.11		.50	.61
Male	3.00±.32			2.31±.53		
Female	2.49±.55			2.10±.69		
Level of Education		.47	.62		1.29	.28
Diploma	2.49±.49			2.03±.61		
Bachelor	2.47±.63			2.19±.68		

	Job satisfaction	r/t/F	p value	Burnout	r/t/F	p value
	M ± SD			M ± SD		
Masters	2.68±.72			2.39±1.14		
Marital status		-.07	.94		1.05	.29
Married	2.50±.55			2.13±.74		
Single	2.51±.58			2.05±.51		
Religion		.53	.59		.58	.56
Muslims	2.51±.56			2.13±.70		
Non-Muslim	2.44±.53			2.03±.66		
Type of employment		.05	.98		-.12	.90
Permanent	2.50±.56			2.10±.65		
Ad-Hoc	2.49±.53			2.13±.86		
Working place		7.38	000*		3.03	.03**
Outputs, surgery, medicine ^a	2.46 ±.50			2.41±.69		
Oncology, nephrology, NICU ^b	2.35±.61			1.89±.56		
Gastrology, neurology ^c	3.02±.25			2.15±.50		
Others ^d	2.40 ±.47			2.11±.88		
Length of service		.39	.81		2.55	.04***
< 1year ^a	2.49 ± .60			2.10 ± .60		
1-5 yrs ^b	2.51 ± .54			2.11± .68		
> 5 yrs ^c	2.59 ± .56			2.35 ± .88		
Number of training		3.56	.012		.32	.96
None	2.40 ± .55			2.16 ± .69		
At least one	2.59 ± .65			2.11 ± .68		
Monthly income		.01	.85		-.006	.95
Job satisfaction				2.50 ± .05	-.09	.32
Intrinsic				2.39 ± .05		
Extrinsic				2.66 ± .07		

NB: *c > a, d & b; **a > c, d, & b; ***c > b & a.

Table 5 illustrates the correlation among the sub-scales of job satisfaction and burn out. Correlations analysis was done among two subscales of Job satisfaction namely Intrinsic and Extrinsic, and 3 subscales of burn out such as Emotional exhaustion, Depersonalization, and Reduced personal accomplishment. In this study, the result shows that the subscale of burnout “reduced personal accomplishment” had significant mild negative correlation with total job

satisfaction ($r = -.19; p = .05$) and its intrinsic subscale ($r = -.20; p = .04$). Furthermore, the emotional exhaustion had mild positive significant correlation with job satisfaction ($r = .22; p = .02$), its intrinsic ($r = .21; p = .03$) and extrinsic ($r = .19; p = .04$) subscales. The total job satisfaction was not significantly associated with total burnout ($r = -.09; p = .32$) and its depersonalization ($r = .08; p = .41$) subscale.

Table 5: Correlations among subscales Intrinsic and Extrinsic of Job satisfaction and Emotional exhaustion, Depersonalization, and Reduced personal accomplishment of Burnout (N=101)

Variables	Burnout	Emotional Exhaustion	Depersonalization	Personal accomplishment
	r (p)	r (p)	r (p)	r (p)
Job Satisfaction	-.09 (.32)	.22 (.02)	.08 (.41)	-.19 (.05)
Intrinsic	.09 (.35)	.21 (.03)	.08 (.38)	-.20 (.04)
Extrinsic	.09 (.37)	.19 (.04)	.06 (.53)	-.15 (.12)

DISCUSSION

This descriptive cross-sectional study aimed to explore the socio-demographic characteristics, job satisfaction, burnout, and their relationship among the nurses working at pediatric wards in a selected tertiary hospital in Bangladesh.

Job Satisfaction of Nurses

The nurses who participated in this study demonstrated a moderate level of job satisfaction. More

than half of the participants fell into the satisfied category, while only a few were categorized as dissatisfied. This moderate level of satisfaction was also observed in two subscales of job satisfaction: intrinsic and extrinsic.

In the intrinsic subscale, the nurses expressed the highest satisfaction with aspects such as having stability in their work, having the opportunity to contribute to others' well-being, and being able to fully utilize their abilities. Regarding the extrinsic subscale,

the nurses reported the highest satisfaction with the sense of accomplishment derived from their job, their payment and workload, and their working conditions. These findings align with previous studies [20, 21] which indicated that nurses' job satisfaction is linked to positive feelings and attitudes towards various aspects of their work in hospital settings. Specifically, when nurses receive adequate payment and work in suitable conditions, their overall job satisfaction tends to increase.

On the other hand, the current study also revealed that nurses expressed the least satisfaction with certain items, namely, "opportunities for independent work," "freedom to make their own decisions," and "rewards for a job well done." These findings are consistent with a prior study [22], which reported similar results. Another study found that factors like these were relevant to job satisfaction among professional nurses and were associated with burnout [9].

Burnout of Nurses

The nurses' burnout, which includes emotional exhaustion, depersonalization, and reduced personal accomplishment, was reported to be at a low level in this study. However, some specific items indicated a higher level of burnout. The items that showed the highest frequency of emotional exhaustion burnout, ranging from weekly to daily occurrences, were feeling stressed throughout the entire workday (20%), feeling very tired when starting the day's work (17%). On the contrary, the items that showed the least frequency of burnout, with 64.4%, 55.4%, and 51.5% reporting never experiencing burnout, were feeling like they were about to crash due to work, feeling exhausted from work, and feeling exhausted by work, respectively.

In the depersonalization subscale, 67.3% of nurses reported that they could effectively solve their work-related problems, and more than two-thirds of nurses stated that they never experienced burnout since starting this job. Lastly, in the reduced personal accomplishment subscale, the majority of nurses (91%) reported never experiencing burnout, which is consistent with the overall finding of low burnout levels among the nurses in this study.

Relationship between Job Satisfaction and Socio-Demographic Characteristics of Nurses

Job satisfaction is a vital measure of both organizational well-being and individual accomplishments. The nurses' job satisfaction levels were notably higher for those working in gastrology and neurology indoor units compared to those working in outpatient departments, surgery, and other units in this study. This difference in job satisfaction could be attributed to the well-structured organization of indoor units and the nurses' accumulated work experiences. This finding aligns with a previous study [15], that reported indoor patient management to be less stressful than outpatient department tasks, which can vary depending

on individual preferences and the healthcare environment.

Another variable, professional training, also played a role in job satisfaction. Approximately one third of the nurses who received at least one training showed significantly higher levels of job satisfaction compared to those who did not receive any training in the present study. This finding is consistent with a review paper [15], that highlighted a significant association between professional training and job satisfaction.

Relationship between Burn Out and Socio-Demographic Characteristics of Nurses

In this study, the current workplace and length of service were found to have a significant impact on the burnout experienced by nurses. Nurses working in medicine and surgery units, which handle outdoor patients and critical admissions, reported significantly higher burnout compared to those working in other units. This finding is consistent with a prior study conducted by Zanatta and Lucca in 2015 [23].

Moreover, nurses with more than 5 years of service showed significantly higher burnout levels than those who were new to their positions. This could be attributed to the increased responsibilities and accountabilities that come with years of experience, as well as the need to manage various emergency situations, leading to a higher perception of burnout. This finding is supported by a study conducted in Saudi Arabia among nurses working in critical care units [11], which also highlighted burnout as a predictor of nurses' job satisfaction. It suggested that burnout may be reduced as a result of decreased job satisfaction, as shown in a prior study [12], where nurses working long days experienced increased burnout due to high workloads resulting in decreased job satisfaction. Additionally, the study found that lower income was associated with higher burnout.

Association between Job Satisfaction and Burn Out of Nurses

This study discovered a negative correlation between job satisfaction and burnout, which is consistent with a similar study conducted in Bangladesh [21]. The Bangladeshi study highlighted that health workers experienced burnout due to factors like time pressure, heavy workloads, limited control, loss of autonomy, conflicts, and increased medical errors, which subsequently led to low job satisfaction.

In the correlation analysis, the burnout subscales, specifically 'emotional exhaustion' and 'depersonalization,' were found to be positively correlated with job dissatisfaction. Conversely, the subscale 'reduced personal accomplishment' was negatively and significantly associated with job satisfaction, including its intrinsic and extrinsic components. Another previous study [14], also supported the association between nurses' job satisfaction and

factors like contribution, salary, benefits, encouragement from superiors for career development, recognition for good work, and organizational support in resolving employee problems.

Furthermore, training programs were identified as having a positive impact on employees' work-related attitudes, job satisfaction, and subsequently, burnout. This finding is in line with the results of other study [15], and it was observed in the present study that nurses who received at least one training showed higher satisfaction and lower burnout.

The setting of this study, a super tertiary level hospital in Bangladesh, may have contributed to the observed outcomes. The structured work environment, job stability, and the opportunity for nurses to exercise authority in carrying out their work could be factors influencing their satisfaction and burnout levels. However, it is recommended to conduct comprehensive studies in various hospital settings, including primary, secondary, and tertiary levels, to gain a more accurate understanding of nurses' job satisfaction and burnout across different settings.

CONCLUSION

In Bangladesh, nurses have a moderate level of job satisfaction and a low level of burnout. The factors of working place and the number of training sessions positively influence nurses' job satisfaction. However, when it comes to burnout, there is a positive relationship with the working place and the length of service of nurses. The nurses who experience a reduced sense of personal accomplishment tend to have slightly lower overall job satisfaction and satisfaction with the meaningfulness of their work. On the other hand, the higher emotional exhaustion among nurses is mildly associated with increased job satisfaction and satisfaction with both the inherent aspects of their work and the external factors like pay and working conditions. Furthermore, this study suggests that overall job satisfaction does not have a noteworthy impact on the overall level of burnout experienced by nurses, and it is also not significantly related to the emotional detachment from patients, as measured by the depersonalization subscale.

ACKNOWLEDGEMENT

Researchers would like to thank all the participants from the selected hospitals, and the authority of National Institute of Advanced Nursing Education and Research (NIANER) and Bangabandhu Sheikh Mujib Medical University (BSMMU) Hospital for their greatest support to carry out this study during their busy schedule.

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