



## The Mediating Role of Psychological Capital and Organizational Commitment between Work Environment and Job Burnout

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ARTICLE DETAILS	ABSTRACT
<p><b>History</b> Revised format: May 2019 Available Online: June2019</p> <hr/> <p><b>Keywords</b> Work Environment, Commitment, Psychcap, Burnout, Pakistan</p> <hr/> <p><b>JEL Classification:</b></p>	<p>The objective of this research was not only to investigate the relationship between working environment (WE) and job burnout (JB), WE and organizational commitment (OC), WE and psychological capital PsychCap, OC and JB, PsychCap and JB but also to investigate the mediating effect of OC and PsychCap between the relationship of working environment and JB of doctors working in hospitals of KP, Pakistan. Data were collected from three hundred and thirty doctors. The results revealed a significant negative relationship between WE and JB, OC and JB, PsychCap and JB while positive relationship was found between WE and OC, WE and PsychCap. The results also explored that OC partially mediated the relationship between WE and JB. PsychCap also partially mediated the relationship between WE and JB. When both OC and PsychCap were included as mediators, the relationship between WE and JB became insignificant (full mediation).</p>

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### 1. Introduction

Due to innovation and development, new technology is emerging each day. The efficiency and utility of resources has reached the optimum level. It is a fact that these technological innovations cannot operate perpetually; these need some human resource to operate. The human resource of an organization needs to be committed and motivated. Numerous studies have analyzed different factors like rewards, trainings, WE etc. which may lead to OC and consequent increased performance. There are certain issues which may lead to problems like JB and intention of employees to leave current job etc. The primary objective of this study is to focus on health sector being crucial to individual's life and community health. In this study we investigate the effect of WE on burnout of job while taking OC and PsychCap as mediating variables.

In research studies different features of WE were focused and were found to be significant in maintaining employee's productivity and efficiency (Karasek, 1990). WE and employee's perceptions about their WE are of utmost importance in order to know about the development of their attitude (Bibi, Karim, & ud Din, 2013). Negative and unwanted changes in attitude and behavior of employee's are intensely influenced by their WE. Leiter and Maslach (1988) emphasized the association aspects especially interpersonal interaction with administrators and colleagues as contributory reasons for burnout development. Likewise, background of burnout studied at

organizational level was found to be associated with organizational WE, moral and social backing (Fong, 1993) and admittance to organizational assists (Quick & Tetrick, 2011). Literature review disclose that the projecting relationship of WE and burnout had been supported by several research studies (Langballe, Innstrand, Aasland, & Falkum, 2011). Due to the prevailing increasing cases of burnout among employees of medical profession, Escribà-Agüir, Martín-Baena, and Pérez-Hoyos (2006) conducted a research study with the aim to investigate the relationship between WE and burnout among medical staff in Spain including nursing and emergency unit doctors. The secondary aim of the study was to find that either WE effect on burnout was dissimilar for nurses and doctors. Data was collected from 945 respondents including nursing staff and emergency doctors in Spain with the help of mail questionnaires.

Savicki (2002) conducted a research study on burnout based on treatment/health care providers, teachers and administrators of youth and child care covering thirteen cultural backgrounds including Canada, United States, Denmark, Slovak Republic, England, Scotland, Germany, Poland, Austria, Israel and Australia. In spite of visible variations in different culture of the target population, in findings of the research study it was suggested that depersonalization and emotional exhaustion were associated with high level of job pressure and minimal managerial support, innovation and job orientation. High level cohesion among co-workers/colleagues was found to be linked with enhanced sense of personal achievements or accomplishment at workplace. In a research study, Robinson et al. (1991) found that personal accomplishment and depersonalization in workplace were predicted by job pressure, job involvement and job orientation. On the other hand, findings of contrary nature about the relationship of burnout and WE were also suggested by literature review. In Pakistan context research study was carried out by (Chughtai & Zafar, 2006; Hayat, 2004) in which he describes the dimension of relationship among OC and WE facets. Chughtai and Zafar (2006) argue that the facets of working environment such as pay, opportunity, promotion, supervision, and training are strongly associated with OC. Abdullah and Ramay (2012) a good and cooperative working environment can increase the commitment towards the organization. Different research studies illustrate that there is a significant relationship exist between JB and OC for instant (Ahmed & Ramzan, 2013; Tosun & Ulusoy, 2017) argued that JB has negative relationship with OC. The severe increase of emotional exhaustion effects OC because the heavy bourdon of getting competitive advantage in business, employee retention and employee performance, according to (Bruce, 2009) afore mentioned issues causes burnout which reduce OC. Many researchers address that today JB can be see almost everywhere in different form of organization, in which individual provide direct services to the customer e.g. industries like education sector, health sector and banking sector. Previously the main reasons for reusing the OC were considered an unlimited transition of JB because of role conflict, heavy workload and uncertainty in job performance beside this less feedback provided by the manager, rapid technological changes (Ahmed & Ramzan, 2013; Hallsten, 2017). JB occur in those organization in which employee directly involve with the customer (Gorji, Vaziri, & Iran, 2011).

Some strategic changes in the organization also responsible for reducing OC and increasing JB (Bruce, 2009; Marek, Schaufeli, & Maslach, 2017). Similarly getting market positioning and psychological fatigue of doing the same nature of work daily, work involvement, organization characteristic and culture, coordination with manager are the main reason for the JB (Parker & DeCotiis, 1983). Some other studies tried to find out the foremost reason and market forces that contribute to OC and JB in addition the key reason that can help in controlling the JB and increase the individual OC and employees satisfaction (Bakker, Albrecht, & Leiter, 2011). Employees can be motivated to control burnout and increase their performance through OC. It reflects that when requirement and job responsibility increase while resources for work requirement decrease hence, JB will occur in the organization. On the other side when resources for job increase ultimately OC and work engagement will increase. Dimensions like (social support, policies, culture rules and organization context etc.) and psychological stress both affect the OC and work engagement (Klusmann, Kunter, Trautwein, Lüdtke, & Baumert, 2008). Due to financial crisis when organization start downsizing or increasing work load on individual resultantly they will feel stress and this kind of mental state reduced OC (Glasberg, Norberg, & Söderberg, 2007). Due to this issues an employee perception about his skills become negative and feel less worth as employee in the organization (Van den Broeck, Vansteenkiste, De Witte, & Lens, 2008).

Employee commitment and motivation contribute to the organization performance (Ahmed & Ramzan, 2013). Stress occur when individuals are strongly committed towards the working environment and do not perform well in the work setting that will result JB. Stress is the aggressive reaction of individual and other kind of job requirement deployed on employees (Executive, 2001). When employees feel high level of stress their morale will become low and feel drained out that will directly affect OC (Wani, 2013). It is argued that work load, pressure and clash of

interest among employee will decrease the commitment level and that will lead to low performance and intention towards job turnover (Allam 2013). Burnout is actually reaction on an employee towards interpersonal and emotional stress related to job pressure and professional stress (Maslach, Schaufeli, & Leiter, 2001). Burnout has three dimensions namely; emotional exhaustion, dwindled personal accomplishment and depersonalization. Emotional exhaustion is an unwanted and negative attitude of an individual characterized by reduced energy level, fatigue and lack of enthusiasm towards job. Personal accomplishment is termed to be individual feelings about his competence and fruitful achievement related to his job. Depersonalization is an unwanted attitude of an employee wherein he/she keeps apart from work and practice uninterested attitude at work station (Freudenberger, 1974). Burnout may develop when an employee does not have confidence on his own competence (Cherniss, 2017).

In recent years, researchers had started to explain the process of burnout with respect to resources. PsychCap is considered as a significant personal resource and is defined as “an optimistic psychological condition that an individual portray in the process of development” (Luthans, Avolio, Walumbwa, & Li, 2005). PsychCap is composed of four capacities including self-efficacy, optimism, resilience and hope; all the capacities can be developed, measured and managed effectively for the desired outcome. Specifically individuals with high level of PsychCap possesses additional resources to perform their assigned tasks, presume something good to happen, think positively in dealing with negative conditions and swiftly recover from hindrances (Luthans & Youssef, 2004). According to Ventura, Salanova, and Llorens (2015) employees with increased level of self-efficacy will recognize challenging job which may leads to high level involvement and diminished burnout hence erection of PsychCap can minimize the occurrence of burnout. True leadership accompanied by PsychCap among recently graduated nurses was observed to be considerably associated with burnout of lower level. In simple words it was established PsychCap is associated with JB (Estiri, Nargesian, Dastpish, & Sharifi, 2016; Laschinger & Fida, 2014; Moyer, Aziz, & Wuensch, 2017; Pu, Hou, Ma, & Sang, 2017).

## 2. Methodology

The data was collected by using self-administered technique, snowball technique. The questionnaires were first distributed among the doctors and as the doctors are very busy in their duties, so enough time was given to them for their response. They were approached a day or two for collecting the questionnaires. Total 360 questionnaires were collected, among them 30 were incomplete which were not considered for data analysis.

## 3. Measurement

The commitment of the doctors towards their organization was assessed through the 18 item questionnaire adopted from Meyer, Allen, and Smith (1993). Three dimensions of OC were used in this study (affective, continuance and normative). Burnout in the job of the doctors in this study was measured using the “Maslach Burnout Inventory-General Survey (MBI-GS)” developed by Maslach for JB. In this study the three dimensions (emotional exhaustion, depersonalization and personal accomplishment) were used to measure the JB. PsychCap was measured using the scale developed by (Luthans, Youssef, & Avolio, 2007) called “the PsychCap Questionnaire (PCQ)”. The WE was developed by (Moos, 1994) was modified with aim to find out the doctors perception about their WE. In this study the ten dimensions has been used for measuring the WE.

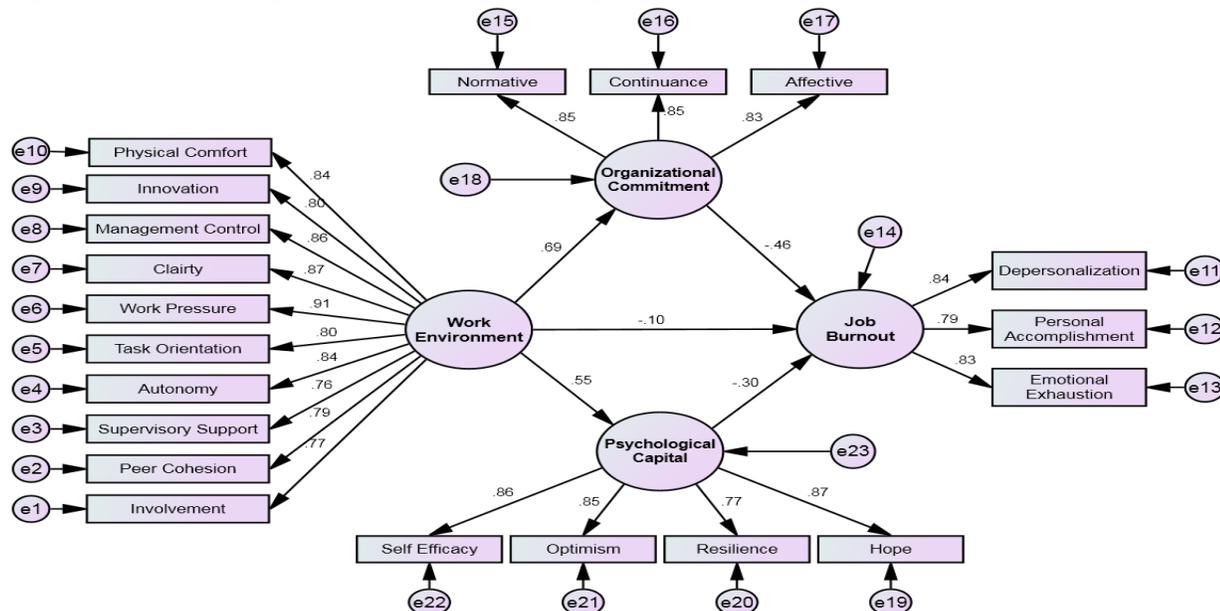
## 4. Results

The total number of respondents are 330 out of which 286 are male and 44 are female. 139 respondents are having MBBS qualification, 101 has done FCPS, 86 has completed MRCP and only 4 respondents have completed PhD. Out of the total respondents 186 are the Medical officer, 37 Senior Medical Officer, 25 Registrar, 39 Assistant Professors, 35 Associate Professors and the remaining 8 are Professors. Out of the total respondents 114 falls in the age category of 20----30 years, 95 falls in the category of 31----40 years, 86 falls in the age category of 41----50 years, 35 falls in the category of 51 and above.

All the variables were correlated in the first step for checking the relationship among them. The negative and significant relationship between WE and JB was found ( $r = -.509$ ). Similarly, the negative and significant relationship was also found between OC and JB. The relationship between JB and OC was significantly negative ( $r = -.604$ ). The relationship between JB and PsychCap was negative and significant ( $r = -.538$ ). However, the relationship between WE and other variable of the study was positive and significant except JB. It was ( $r = .620$ ) with OC and ( $r = .57$ ) with PsychCap. OC and PsychCap were also found significantly and positively correlated. The relationship between both was ( $r = .492$ ). All the details regarding the relationship among these variables have been presented in the following table.

OC as a mediator partially mediated the relationship between independent and dependent variables. Similarly, PsychCap also as a mediator partially mediated the relationship between WE and JB. Now OC and PsychCap both were added as mediators to test the path from WE to JB. After adding these both as mediators the path from independent to dependent became insignificant. Which means that OC and PsychCap together fully mediated the relationship between WE and JB.

**Figure: The mediating role of OC and PsychCap between WE and JB**



$\chi^2 = 235.874$ ;  $DF = 165$ ;  $CMIN/DF = 1.430$ ;  $GFI = .933$ ;  $CFI = .986$ ;  $RMSEA = .036$ ;  $SRMR = .0543$

## 5. Limitations and Recommendations

The first limitation of this study is that the data were collected from doctors working in government hospitals of KP, Pakistan, so the results cannot be generalized to other doctors working in private hospitals of KP, or doctors of other provinces of Pakistan. The results of current data may be different from the results of data to be collected from those doctors who did not participate in this current study. The responses recorded on the questionnaires used in this study will be different from the responses to be recorded by using other types of questionnaires.

The management should focus on increasing the quality of WE so as to mitigate the JB of doctors, for the WE showed a significant negative relationship with JB. Similarly, increased quality of WE will enhance the commitment of doctors which is inevitable for the treatment of patients. For future research, it is recommended to include the personal variables either as mediators or moderators. It is also recommended to test other important variables such as job satisfaction, organizational citizenship behavior etc., as mediators between the relationship of WE and JB. The impact of working environment should be explored on other variables such as employees' performance, turnover intention etc.

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