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ΕΡΕΥΝΗΤΙΚΗ ΕΡΓΑΣΙΑ

Job satisfaction and burnout of public hospital employees

OBJECTIVE To investigate the levels of job satisfaction and job burnout among healthcare professionals, their relationship with the specific work sector and years of experience, as well as the correlations between job satisfaction and burnout. **METHOD** A total of 200 employees from a public hospital in the Eastern Macedonia and Thrace, Region of Greece, participated in the study. The sample included 50 medical staff, 50 nursing staff, 50 paramedical staff, and 50 administrative/support staff. Job satisfaction was assessed using the Employee Satisfaction Inventory, which has been adapted for the Greek population. Job burnout was measured using the Maslach Burnout Inventory, which has also been modified for the Greek population. **RESULTS** Statistically significant differences were found in job satisfaction and burnout levels across different work sectors. Specifically, differences were observed in “working conditions”, “salary”, “promotion”, “nature of work”, and “organization as a whole”, while no differences were found regarding perceptions of “supervisors”. Regarding job burnout, differences were identified in “emotional exhaustion” and “depersonalization”, but not in “lack of personal accomplishment”. **CONCLUSIONS** Findings suggest that physicians reported higher job satisfaction and lower emotional exhaustion compared to nurses and administrative staff. Improving working conditions, enhancing training programs, and conducting further research, are recommended to better understand and address job burnout.

Topics such as job satisfaction and job burnout among employees, regardless of their field of work, have been extensively studied over the past decades by various scientific disciplines, as they are intrinsically linked to the human factor.¹ Specifically, the healthcare sector is particularly sensitive due to the nature of the work, which involves health-related issues and is characterized by a high level of work intensity.² A consequence of prolonged work-related stress is job burnout, which has been established as a recognized term in occupational medicine.³

Job satisfaction can be defined as a general attitude toward one’s work.⁴ Additionally, job satisfaction reflects the relationship between employees’ expectations of their work and the rewards they receive.⁵ Job satisfaction or dissatisfaction is linked to an individual’s value system.⁶ In other words, a person’s job satisfaction reflects the extent to which they believe it fulfills or allows the fulfillment of their work-related values.

It is important to note that demographic characteristics, work experience, occupational traits, and employees’

personality traits, shape the level of satisfaction they derive from their profession.⁷ Specifically in the healthcare sector, the socio-emotional and professional characteristics of the hospital environment significantly influence employees’ job satisfaction.^{8,9} In general, stress factors that affect job satisfaction and contribute to burnout syndrome in the healthcare sector include low salaries,¹⁰ long working hours,¹¹ relationships with superiors and opportunities for career advancement,¹² as well as the increasing shortage of staff and work demands.¹³

A study conducted in Greece,¹⁴ focusing on healthcare staff satisfaction –primarily concerning nursing staff– revealed that a significant proportion of physicians reported job satisfaction levels below average. Additionally, findings from previous studies indicate that nurses’ satisfaction levels tend to be moderate.^{15,16} Furthermore, nurses appear to be satisfied with the nature of their work but dissatisfied with their working conditions and compensation.¹⁷ Finally, regarding work schedules, it was found that nurses and administrative staff with morning shifts scored higher in

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ΑΡΧΕΙΑ ΕΛΛΗΝΙΚΗΣ ΙΑΤΡΙΚΗΣ 2026, 43(3):356–362

A. Hizari,
O. Kouli,
E. Kouli,
I. Trigonis,
E. Bebetos

School of Physical Education, Sport
Science and Occupational Therapy,
Democritus University of Thrace,
Komotini, Greece

Επαγγελματική ικανοποίηση
και εξουθένωση εργαζομένων
δημόσιου νοσοκομείου

Περίληψη στο τέλος του άρθρου

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the “work environment” category compared to their colleagues working rotating shifts.¹⁸

The term “burnout” was first used¹⁹ to describe a set of symptoms, including fatigue, anxiety, and exhaustion, observed among professionals in healthcare and social welfare fields arising from their working conditions.^{20,21} The symptoms of this syndrome affect both an employee’s behavior in the workplace and their personal life.²² The most widely accepted definition of burnout,²³ describes it as a progressive process in which an employee experiences physical and mental exhaustion. This process leads to a loss of interest and positive feelings toward patients, dissatisfaction with work and performance, and the development of a negative self-image.²⁴

The risk of burnout is higher for individuals engaged in social work,²⁵ and its prevalence is particularly significant among healthcare professionals due to the high levels of stress associated with their work, as well as the constant and often demanding interaction with patients.²⁶ Essentially, professional burnout is a form of prolonged work-related stress. Furthermore, reduced job satisfaction is closely linked to burnout.²⁷ Additionally, employees’ demographic characteristics, combined with working conditions and interactions with hospitalized patients, contribute to the development of stress and burnout.²⁸ These factors are often accompanied by feelings of inadequacy and low self-esteem.²⁹ A study conducted in Greece on healthcare professionals’ burnout found that, in terms of the impact of occupation on emotional exhaustion and depersonalization, administrative staff tend to feel greater satisfaction with their personal achievements. This outcome is expected, as administrative personnel do not experience the same levels of stress and burnout as healthcare professionals who have direct contact with patients.³⁰

In summary, it can be said that there is a research gap in Greece regarding the study of job satisfaction and professional burnout among healthcare professionals based on their specific work sector. For this reason, the aim of the research was to investigate the levels of job satisfaction and professional burnout among healthcare professionals, their relationship with the sector in which they work, and their work experience, as well as to explore the associations between job satisfaction and professional burnout.

MATERIAL AND METHOD

Participants

The present study involved 200 employees of a public hospital in the Eastern Macedonia and Thrace, Region of Greece. The sample

included 50 nursing staff members, 50 medical staff members, 50 paramedical staff members, and 50 administrative and support staff members. The response rate was particularly satisfactory, as all 200 employees completed the questionnaires. The participants were 41 men (20.5%) and 159 women (79.5%). The majority of employees were married (79.1%), and regarding educational level, 48.2% had completed higher education. The average age of the sample was 48.12 years, and the average years of service were 19.6 years. It should be noted that the years of service were divided into categories of 1–10 years, 11–20, 21–30, and 30 years and above. The largest percentage of employees (34.4%) fell into the 21–30 years of service category.

Instruments

For data collection, an anonymous questionnaire with closed-ended questions was used, consisting of two sections. The first section includes questions to measure demographic characteristics, while the second section measures job satisfaction and professional burnout.

Specifically, to assess job satisfaction, the Employee Satisfaction Inventory (ESI)³¹ was used, which was adapted, valid, and reliable for the Greek population.³² This questionnaire consists of 24 questions representing six dimensions of job satisfaction: “Working conditions” (five questions, e.g., “The working conditions are the best I have ever had”), “salary” (four questions, e.g., “I am paid fairly for the work I do”), “promotion” (three questions, e.g., “There are many opportunities for promotion and advancement”), “nature of the work” (four questions, e.g., “My job is boring”), “supervisor” (four questions, e.g., “My supervisor understands my problems”), and “organization as a whole” (four questions, e.g., “It is the best school/institution I have ever worked for”). The response scale is a 5-point Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree).

For burnout, the Maslach Burnout Inventory (MBI) was used,^{3,33} which had been modified and validated for the Greek population regarding its validity and reliability.^{34,35} The questionnaire consists of 22 questions measuring the three dimensions of burnout: “Emotional exhaustion” (nine questions, e.g., “I feel drained at the end of the workday”), “depersonalization” (five questions, e.g., “I worry that this job is «hardening» me emotionally”), and “lack of personal accomplishment” (eight questions, e.g., “I have achieved many worthwhile things in my job”). The response scale is seven-point, ranging from 0 (never) to 6 (every day). The research was conducted from November to March.

The questionnaires were distributed to the hospital staff after obtaining permission from the hospital director, the hospital service council, and the 4th Regional Health Authority of Eastern Macedonia and Thrace. It is noted that the respondents were informed about their free and voluntary consent to participate in the study, with an emphasis on maintaining their anonymity to encourage higher participation rates and honesty in their responses. Furthermore, it was orally and in writing emphasized that

the data collected would be used exclusively for research purposes, and respondents were given the option to indicate whether they would like to be informed of the results of the study.

Statistical analysis

To analyse the data, a multivariate analysis of variance (MANOVA) was conducted to explore potential differences between work sectors concerning the dependent variables: "Working conditions", "salary", "promotion", "nature of work", "supervisor", and "organization as a whole". Also, MANOVA was conducted to examine potential differences between work sectors concerning the dependent variables: "Emotional exhaustion", "lack of personal accomplishment", and "depersonalization". To identify the statistically significant differences, the LSD multiple comparison test was applied where needed.

RESULTS

Differences in job satisfaction based on different work sectors

The results of the linear design of the dependent variables indicated that there were statistically significant differences on job satisfaction based on the work sector, $F(18,456)=4.606, p<0.001$. More specifically, statistically significant differences were found in almost all dependent variables, specifically in "working conditions" $F(3,169)=4.350, p<0.01$, "salary" $F(3,169)=5.991, p<0.01$, "promotion" $F(3,169)=8.613, p<0.001$, "nature of work" $F(3,169)=4.898, p<0.01$, and "organization as a whole" $F(3,169)=5.050, p<0.01$. However, no statistically significant differences were found for the "supervisor" variable.

A statistically significant difference was found in "working conditions" between medical staff and both paramedical and nursing staff, while no significant difference was found between medical and administrative/support staff. Additionally, no significant differences were observed between paramedical-nursing, paramedical-administrative, and nursing-administrative staff. For "salary", a statistically significant difference was found between medical staff and both nursing and administrative staff, whereas no significant difference was found between medical and paramedical staff. A significant difference was also observed between paramedical staff and both nursing and administrative staff. However, no difference was noted between nursing and administrative/support staff. Regarding "promotion", a statistically significant difference was found between medical staff and the other three categories, while no significant differences were detected among the remaining groups. For the "nature of work", a statistically significant difference was found between medical staff and both nursing and administrative-support staff, while no difference was observed between medical and paramedical staff. Additionally, a significant difference was detected between paramedical staff and both nursing and administrative-support staff. However, no difference was found between nursing and administrative/support staff. For the "supervisor" variable, no statistically significant differences were observed across work sectors. Finally, for the "organization as a whole" variable, a statistically significant difference was found between medical staff and the other three categories, while no significant differences were detected among the remaining categories. These results are summarized in figure 1.

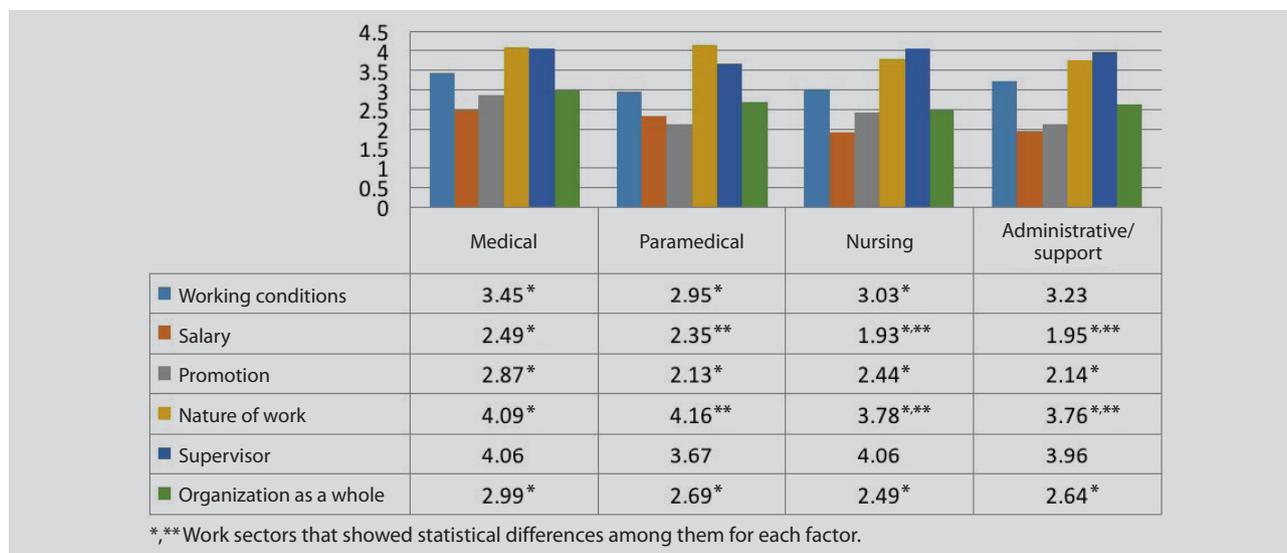


Figure 1. Mean values of the dependent variables of job satisfaction by work sector.

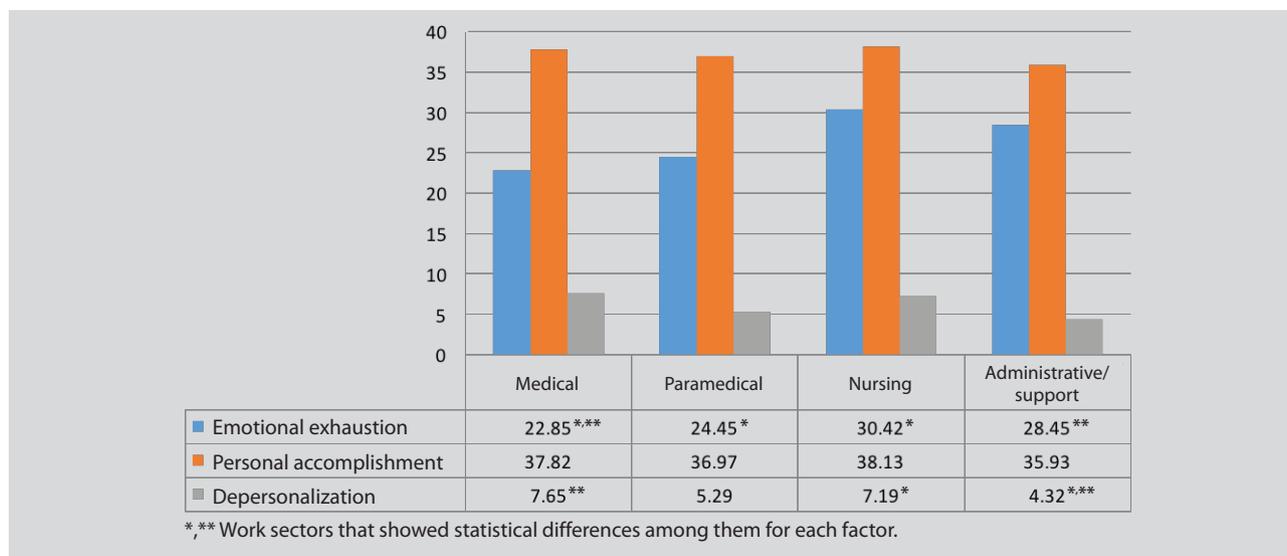


Figure 2. Mean values of the dependent variables of job burnout by work sector.

Differences in job burnout based on different work sectors

The results of the linear design of the dependent variables indicated statistically significant differences on the work sector, $F(9,395)=3.572, p<0.001$. More specifically, the results showed statistically significant differences in the dependent variables “emotional exhaustion” $F(3,167)=3.4, p<0.01$ and “depersonalization” $F(3,167)=3.21, p<0.05$, while no statistically significant differences were found in the “lack of personal accomplishment” variable.

A statistically significant difference in “emotional exhaustion” was found between nursing staff and both medical and paramedical staff. Additionally, a significant difference was observed between administrative-support staff and medical staff, whereas no significant difference was found between medical and paramedical staff. For “depersonalization”, a statistically significant difference was found between medical staff and administrative-support staff. Additionally, a significant difference was observed between nursing staff and administrative-support staff. These results are summarized in figure 2.

DISCUSSION

According to the findings of this study regarding the work sector, statistically significant differences were found in all dimensions of job satisfaction except for the “supervisor” variable. Physicians reported higher satisfaction levels compared to nurses, paramedical staff, and administrative/support staff in the five dependent variables included in

the job satisfaction questionnaire. Additionally, paramedical staff appeared more satisfied with their salary and the nature of their work.

At this point, it is important to note that working conditions significantly influence employee behavior. Paramedical staff seem less satisfied than physicians, possibly due to deficiencies in technological equipment, staff shortages, increased workload, or conflicts with physicians, which hinder effective collaboration. The occupational stress experienced by nurses, their heavy workload in various clinical departments, and the lack of support from management explain their lower job satisfaction. These findings align with studies conducted in other countries,^{36–38} as well as research within Greece.^{17,39,40} However, a study by Jönsson⁴¹ found that nurses were more satisfied than physicians with their working conditions and salary. Physicians appear to be more satisfied than healthcare professionals in other work sectors. This may be attributed to the fact that physicians occupy the top of the professional hierarchy, receive higher salaries, and have greater promotion opportunities.^{42,43} Additionally, physicians tend to collaborate well both among themselves and with management. They also have better access to scientific research and education.⁴⁴ In contrast, dissatisfaction in other work sectors may stem from the perception that physicians and management regard them merely as “assistants”, leading to unresolved workplace issues. These findings are consistent with previous studies.^{45–47}

The salary factor acts as a measure of fairness in the perception of employees. Specifically, when comparing the salary with that of other colleagues, it is difficult for an

employee to objectively assess the level of salary relative to the volume and difficulty of the work provided by an employee in another work sector. For this reason, there are differences between other employees and physicians. However, studies have shown that both physicians and nurses expressed dissatisfaction with the factors of "salary", "promotion", and "working conditions".⁴⁸⁻⁵⁰

Regarding job burnout, the work sector appears to influence emotional exhaustion and depersonalization. Nurses and administrative/support staff seem to be more emotionally exhausted than physicians and paramedical staff. As for depersonalization, physicians and nurses experience this feeling compared to employees from other work sectors. No statistically significant effect was observed in the lack of personal accomplishment.

Nursing staff were expected to show greater emotional exhaustion, as they have the most frequent and personal contact with patients. The emotional involvement of nurses with patients contributes to emotional exhaustion, as does

staff shortages, shift work, conflicts with patients' relatives, and role ambiguity. These findings are confirmed by studies in Greece,^{51,52} as well as studies conducted in other countries.^{53,54} Additionally, administrative/support staff may perceive their treatment as degrading by other healthcare professionals, including management. For this reason, they experience emotional exhaustion. The study by Chou and colleagues⁵⁵ highlighted the emotional exhaustion among support staff.

Finally, based on all that was presented above, it seems there is both convergence and divergence between the findings of the present study and those of other related studies. These differences are attributed by the researchers to economic conditions, culture, and the functioning of each national healthcare system.⁵⁶ Therefore, based on the results of this study, it is recommended to improve working conditions, strengthen education with a focus on lifelong learning, and further research to better understand and address job burnout, as well as to enhance job satisfaction among hospital employees.

ΠΕΡΙΛΗΨΗ

Επαγγελματική ικανοποίηση και εξουθένωση εργαζομένων δημόσιου νοσοκομείου

A. ΧΙΖΑΡΗ, Ο. ΚΟΥΛΗ, Ε. ΚΟΥΛΗ, Ι. ΤΡΙΓΩΝΗΣ, Ε. ΜΠΕΜΠΕΤΣΟΣ

*Σχολή Επιστήμης Φυσικής Αγωγής, Αθλητισμού και Εργοθεραπείας, Δημοκρίτειο Πανεπιστήμιο
Θράκης, Κομοτηνή*

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ΣΚΟΠΟΣ Η διερεύνηση των επιπέδων της επαγγελματικής ικανοποίησης και της επαγγελματικής εξουθένωσης των επαγγελματιών υγείας, η σχέση τους με τον εργασιακό τομέα στον οποίο δραστηριοποιούνται και την προϋπηρεσία, καθώς και η διερεύνηση της συσχέτισης μεταξύ επαγγελματικής ικανοποίησης και επαγγελματικής εξουθένωσης.

ΥΛΙΚΟ-ΜΕΘΟΔΟΣ Στην έρευνα συμμετείχαν συνολικά 200 εργαζόμενοι δημόσιου νοσοκομείου στην Περιφέρεια Ανατολικής Μακεδονίας και Θράκης. Πιο συγκεκριμένα, 50 άτομα από ιατρικό προσωπικό, 50 από νοσηλευτικό, 50 από παραϊατρικό και 50 από διοικητικό/βοηθητικό προσωπικό, αντίστοιχα. Για την αξιολόγηση της επαγγελματικής ικανοποίησης χρησιμοποιήθηκε το ερωτηματολόγιο Employee Satisfaction Inventory, το οποίο είναι προσαρμοσμένο στον ελληνικό πληθυσμό. Επίσης, για την επαγγελματική εξουθένωση έγινε χρήση του ερωτηματολογίου Maslach Burnout Inventory, το οποίο έχει τροποποιηθεί για τον ελληνικό πληθυσμό. **ΑΠΟΤΕΛΕΣΜΑΤΑ** Από τα αποτελέσματα προέκυψαν στατιστικά σημαντικές διαφορές στην επαγγελματική ικανοποίηση και στην εξουθένωση ανάλογα με τον εργασιακό τομέα. Συγκεκριμένα, διαφορές παρατηρήθηκαν στις «συνθήκες εργασίας», στον «μισθό», στην «προαγωγή», στη «φύση της εργασίας» και στον «οργανισμό συνολικά», ενώ δεν υπήρξαν διαφορές στην αντίληψη για τον «προϊστάμενο». Επίσης, στην επαγγελματική εξουθένωση βρέθηκαν διαφορές στη «συναισθηματική εξάντληση» και στην «αποπροσωποποίηση», αλλά όχι στην «έλλειψη προσωπικών επιτευγμάτων». **ΣΥΜΠΕΡΑΣΜΑΤΑ** Από την έρευνα διαπιστώθηκε ότι οι ιατροί είναι πιο ικανοποιημένοι και λιγότερο συναισθηματικά εξαντλημένοι από τους νοσηλευτές και το διοικητικό προσωπικό. Προτείνεται βελτίωση των συνθηκών εργασίας, ενίσχυση της εκπαίδευσης και διεξαγωγή περισσότερων ερευνών για την καλύτερη κατανόηση και αντιμετώπιση της επαγγελματικής εξουθένωσης.

Λέξεις ευρητηρίου: Επαγγελματίες υγείας, Επαγγελματική εξουθένωση, Επαγγελματική ικανοποίηση, Νοσοκομεία

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Correspondence author:

E. Bebetso, SPESSOT, DUTH, Campus DUth, 691 32 Komotini, Greece
 e-mail: empempet@phyed.duth.gr