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DETERMINANTS OF WORK RELATED EXHAUSTION OF MOBILE PRE-HOSPITAL NURSES

DETERMINANTES DO DESGASTE RELACIONADO AO TRABALHO DOS ENFERMEIROS DE PRÉ-HOSPITALAR MÓVEL

DETERMINANTES DEL DESGASTE RELACIONADO CON EL TRABAJO DE LAS ENFERMERAS EM PRE-HOSPITALARIA MÓVIL

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ABSTRACT

Objective: to identify the determinants of physical and mental ailment of nurses working in prehospital mobile Mossoró-RN, Brazil. ***Method***: this is a qualitative study, descriptive approach, with content analysis of the subject. Data were collected through semi-structured interviews with signing the consent form, carried out during March-April 2010, with six nurses of SAMU-Mossoró-RN, Brazil, as in project approval Ethics Committee and Research at the University of Rio Grande do Norte by CAAE:0050.0.428.000-09, receiving assent under protocol number 51/09. ***Results***: in this work we identify the determinants of wear of these professionals are related to the viewing scenes of violence and constant direct care to patients in critical condition, which leads to the nurses direct impact on personal and professional lives of these workers. ***Conclusion***: these factors are crucial to the process of professional burnout in the workplace which can cause diseases of psychic and physical origin of these workers. ***Descriptors***: nursing; emergency; occupational health.

RESUMO

***Objetivo*:** identificar os determinantes para o adoecimento físico e mental dos enfermeiros que atuam em pré-hospitalar móvel em Mossoró-RN, Brasil. ***Método*:** pesquisa qualitativa de abordagem descritiva, com análise de conteúdo dos sujeitos. A coleta foi realizada por meio de entrevista semiestruturada gravada, com assinatura do termo de consentimento livre e esclarecido, realizada no período de março a abril de 2010, com seis enfermeiros do SAMU-Mossoró-RN, Brasil, conforme aprovação do projeto no comitê de ética e pesquisa da Universidade do Estado do Rio Grande do Norte mediante CAAE: 0050.0.428.000-09, recebendo parecer favorável sob número de protocolo nº 51/09 . ***Resultados*:** com a realização deste trabalho pudemos identificar que os determinantes do desgaste desses profissionais estão relacionados com a visualização de cenas de violência constante e o cuidado direto com pacientes em estado crítico, o que acarreta aos enfermeiros reflexos diretos na vida pessoal e profissional desses trabalhadores. ***Conclusão*:** esses fatores são determinantes para o processo de desgaste profissional no ambiente de trabalho o que pode acarretar doenças de origem psíquicas e físicas a esses trabalhadores. ***Descritores*:** enfermagem; urgência; saúde do trabalhador.

RESUMEN

***Objetivo*:** identificar los factores determinantes de la enfermedad física y mental de los enfermeros que trabajan en pre-hospitalaria móvil Mossoró-RN, Brasil. ***Método*:** se trata de un enfoque descriptivo cualitativo, con el análisis de contenido de la asignatura. Los datos fueron recolectados a través de entrevistas semi-estructuradas con la firma del formulario de consentimiento, llevado a cabo durante marzo y abril de 2010, con seis enfermeros del SAMU-Mossoró-RN, Brasil, como en la aprobación del proyecto comité de ética e investigación en la Universidad de Rio Grande do Norte por el CAAE: 0050.0.428.000-09, recibir la aprobación del protocolo con el número 51/09. ***Resultados*:** en este trabajo se identifican los factores determinantes del uso de estos profesionales están relacionadas con las escenas de visión de la violencia y la atención directa y constante a los pacientes en estado crítico, lo que lleva a las enfermeras el impacto directo sobre la vida personal y profesional de estos trabajadores. ***Conclusión*:** estos factores son cruciales para el proceso de desgaste profesional en el lugar de trabajo que pueden causar enfermedades de origen psíquico y físico de estos trabajadores. ***Descriptores*:** enfermería; emergencia; salud de los trabajadores.

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INTRODUCTION

In the current situation the health of workers breaks with the conception of hegemony between a causal relationship of the disease with a specific agent, or a group of risk factors present in the workplace.[1]

In this context, new ideas are entered in the field of workers health that expand the concept and the care in the health-illness process of workers based on the concept of determinants or conditioning that define health and disease processes.

So, now we consider as determinants for the worker's health-illness processes: the social, economic, technological and organizational aspects responsible for living conditions and occupational risk factors - physical, chemical, biological, mechanical and those deriving from the work organization.[2]

This time, we aim to identify in the pre-hospital context the determinants for physical and mental illness of nursing professionals who work in this environment.

OBJECTIVE

● To identify the determinants of physical and mental ailment of nurses working inprehospital mobile Mossoró (RN), Brazil.

THEORETICAL REFERENCE

The relationship of the health-illness process with its determinants does not happen suddenly, it needs time to be comprehended, as well as a story. This is how the unsanitary conditions of the working environment, long hours of professional activities, work organization, mechanical rhythm and accelerated production put the focus of attention to worker's health not only in a specific agent.[3]

More intense and precarious working conditions are crucial to accumulate injuries to worker's health. And these new rhythms of professional activity end up canceling the worker as a person and citizen.[4]

So, the environment where this professional works also becomes a determinant for injuries to his health. In this research, the environment studied was the pre-hospital care, and the actors of the research were nurses working in it. We chose to work with these elements due the primary confront with urgency and emergency situations and direct action in life risk situations of patients and nurses.

The performance in such a service demands from its professionals specific knowledge, capacity and fast decisions concerning the diagnosis and care to a single patient and a large number of users.[3]

Thus, the nurses who work in a pre-hospital mobile unit is subjected to a routine that requires constant attention, contact with situations of life and death, besides situations of constant urgency and emergency cases which requires the professional greater self-control of his actions and quick thinking during the assistance.[2]

This frenetic pace of work is responsible for creating tension, confrontation with other professionals and users during the exercise of their work. This can cause, to the nursing professional, conflicts such as feelings of personal worthlessness, lack of motivation to work and, consequently, fragmented and poorly resolutive care.[5]

In addition to these determinants, there are several activities in this environment of workloads that can act directly causing changes in the health-disease process established in these workers. These loads can be defined as agents that interact dynamically between the work environment and worker's body, being able to trigger changes in the biopsychic processes of these individuals.[3]

Given this, it is necessary to identify the determinants that these pre-hospital nursing professionals experience in their daily work.

METHOD

Descriptive research with qualitative approach, that had as target audience nurses that work in the Mobile Emergency Service (SAMU) of the city of Mossoró-RN-Brazil. The choice of these subjects was based on the following inclusion criteria: working at the SAMU-Mossoró for more than six months, willing to participate in the survey in SAMU off-hours and agree to sign the Informed Consent Term. And as exclusion criteria: impossibilities due to health problems and don't attend the interview when scheduled. Data collection happened from March to April 2010 at the headquarters of SAMU Mossoró-RN.

Data was collected through semi-structured interviews having the following guiding questions: *Describe what is exhaustion at work for you? What do you think that is determinant for exhaustion in the workplace?*

Six nurses agreed to participate in the research; they were identified following the

chronological order of interviews, i.e., Nurse 1 (N1), N2, N3, N4, N5 and N6.

Data was processed through the discourse analysis in the perspective of the French current worked in Brazil by Orlandi; it is a procedure that aims to connect three areas of knowledge: historical materialism, linguistic and theory of speech, providing a reflection on the contexts and conditions under which the discourses are produced and understood.[6]

This data analysis has allowed us to elaborate the following units of meaning: Determinants of exhaustion on pre-hospital environment: nurses' view; and Effects of work in personal and professional life.

The survey was submitted to the Research Ethics Committee of the State University of Rio Grande do Norte, and approved under protocol number 51/09.

RESULTS AND DISCUSSION

During the interviews we drew the profile of nurses concerning the years of training and the amount of work contracts: all the interviewees had more than fifteen years of training, three had two work contracts, one had three and only one worked only at SAMU.

Based on the speech of the interviewees we can see that the work-related exhaustion is part of the routine of pre-hospital care, from the administrative and management issues on the care developed to the moment of assistance. We also identified that factors can be considered determinant for the exhaustion to affect the physical and mental health of the professional.

Through data analysis we found the following units of meaning: Determinants of exhaustion on pre-hospital environment: nurses' view; and Effects of work in nurses' personal and professional life.

● Determinants of exhaustion on pre-hospital environment: nurses' view

Mobile pre-hospital care is designed to perform assistance outside the hospital environment, in a public area or even at patients' home, seeking to offer an immediate response to the health problem that the victim/patient is suffering at the moment that a mobile pre-hospital unit is required, assisting in medical or traumatic cases.[7]

The implementation of this service in Brazil aimed to organize the urgent and emergency care to reduce the significant distances between small and medium municipalities, as well as to offer a response to the increasing violence in Brazil.[7]

The team is composed of physicians, nurses, nursing technicians and drivers (rescue workers) who work directly with these urgency/emergency situations, whether medical or traumatic. The direct contact with these clinical or traumatic events offers the professionals working in this environment a direct contact with situations of physical and psychological stress, verbal abuse by patients, relatives and other passers-by, as well as violence scenes.[8]

The nurse acts only in the advanced life support car, which is requested by the physician in charge only for the most serious cases. Thus, this professional deals in their daily life with critically unstable patients who require immediate assistance, fast actions, and agility to perform a series of activities in a short time.

This professional remains passive by viewing scenes of intense violence, death, turmoil of passers-by in the street, family members anxious to start the service immediately, and still has to perform proper care despite these situations. This was mentioned as a determinant of exhaustion in the workplace by the interviewees, as we can see in the speeches:

> *What are more stressful for me are the passers-by, it stresses me too much, people all over, they don't understand [...] people are still unaware of the urgency and emergency service and this stresses too much the treatment. (N2)*

> *Sometimes also the violence that we see exhausts us. Sometimes certain places that have much violence and sometimes even some professionals who work with this violence. [...] sometimes people gather around, they don't understand what we're doing ... (N6)*

This means that violence in workplace is not only related to personal and behavioral factors, but also to structural factors, including the organization of work itself, considered a determinant for exhaustion.[9]

It was also identified, as a determinant for exhaustion, the type of care to patients in a situation of extreme stress, and lack of not knowing how to perform a certain procedure. This can be translated in feelings of fear and anxiety, resulting in direct harm to their mental health. In the activity of care for others, many of these professionals present changes in their health status; this fact is very harmful to both caregivers and patients.

What exhausts you the most is having an emergency and not being able to do whatever needs to be done, how can I say... technical knowledge to perform the assistance. (N6)

When we put ourselves in the patient's place, we did not want us to have received the care they received, when we could have offered a much better service, we feel impotent. I feel helpless in these situations. (N1)

It was also mentioned by the interviewees as determinants for exhaustion the conditions of professional performance. The precarious working conditions, added to the difficulties of daily professional impairing the personal life of these workers.[10]

Moreover, it was reported by interviewees the service organization in shifts and the need to have more than one job contract. Workers seek to complement their income in many ways, most choose for the increased workload, with some professionals working up to 80 hours per week.[11]

The fact of having more than one job influences a lot. Because you are not machine. You leave the work already tired and go to another, right?! Especially when they are two jobs that demand a lot from you, right? (N5)

If we earned enough to have only one job, right? [...] Today, for any health professional, it is very difficult to have only one job; of course, if you work 40 hours per week you would have more time off for leisure. [...] But you're pretty much living just for this because you have two jobs. (N3)

These considerations are necessary because the increase in working hours has led to the reduction of family life and is considered a strong factor of distress for nurses. These factors together lead to a strong sense of emotional stress that accumulated over time starts to develop exhaustion.

Thus, in this unit of meaning we found that these urgency and emergency units make these professionals confront these stressful situations continuously, causing an intense exhaustion. Thus, it is considered a psychic work load, once it causes a series of mental disorders and tension both within and outside the work environment in which it is being considered as determinants of exhaustion for these professionals in study: the contact with violence situations, the lack of theoretical knowledge and lack of appropriate conditions of service; and the need to have more than one job.[12]

• Effects of work in the personal and professional life

When asked about the consequences of work-related exhaustion in their personal life, the interviewees mentioned that they feel the quality of life impaired.

[...] fatigue interferes, we don't have quality of life, we don't have leisure [...] the family asks for more time, but we don't have it. (N3)

It interferes too much in my quality of life. Because today I don't have time for physical activities, for proper nutrition, it keeps me away from my family. (N1)

The conditions of nursing work, i.e., contact with others' people suffering; work in shifts; demand of responsibilities; maintaining good relationships with clients and other professionals, they all reflect in job dissatisfaction and begins to directly affect nursing workers and their quality of life.[13]

Interviewees of this study expressed as quality of life the family time, time for leisure activities that bring you individual pleasure and time for professional development activities. And consider that the absence of all that is harmful to the improvement of his personal life reflected in work performance.

Thus, the professional is unavailable to perform activities that give him pleasure, being restricted only to work. And so, it starts to affect his body and mind all the negative consequences that living for work provides.

In these terms, these professionals are subject to develop a series of damages to their bodies and behaviors caused by these tensions in workplace, as well as negative conditions leading this individual to occupational stress. And as consequences: professional dissatisfaction, depression, loss of interest, demotivation and can also cause low quality to services provided to their patients.[14]

Moreover, the confrontation with situations that cause chronic stress causes burnout in these professionals, which generates a somatization in the body of worker stress from chronic infections. Among these manifestions may be mentioned: hypertension, frequent headaches, depression, causing absenteeism in these workers.[15]

Another point reported by interviewees is that exhaustion accumulates over time.

You only realize with the time of service. After a day of work the exhaustion is not evident. But over a time of work you realize it. I've been working for four years, so

during this period you notice exhaustion situations. (N4)

Thus, in this unit of meaning we could identify that the quality of life is directly influenced by the type of service that this professional performs.

FINAL CONSIDERATIONS

To identify the determinants of work-related exhaustion of nurses working in pre-hospital mobile care is crucial to develop effective strategies to fight this condition.

In this research we identified the view of violence scenes, whether physical or moral; the fact of taking care of critically ill patients, causing stress in the course of professional practice; and working conditions are decisive for the occurrence of physical and emotional exhaustion of nurses working in pre-hospital mobile care.

These situations experienced in the work environment affects personal and professional lives of these workers, causing impaired quality of life by reducing their time for leisure or activities that give them pleasure.

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