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How psychological capital influences burnout: The mediating role of job insecurity

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Abstract

This study addresses the impact of psychological capital on employee's burnout while investigating the mediating role of job insecurity. The survey of this study is conducted on 161 nurses, who work for the hospitals of foundation universities. Structural equation modeling was employed in order to test the research hypotheses. Bootstrapping method, which is based on 1000 bootstrap samples with a 95 % bias corrected confidence intervals, was also included in the study to test mediation effect. Results reveal that psychological capital affects burnout and job insecurity negatively. Further, job insecurity is a mediator for the relationship between psychological capital and burnout.

1. Introduction

Nurses are one of the most risky occupational groups, which frequently face with burnout (e.g. Laschinger & Finegan, 2008; Aiken et al., 2001). Burnout has been recognized as one of the major occupational hazard, which is correlated with some negative responses to the one's job such as absenteeism, turnover, and job dissatisfaction (e.g. Schaufeli & Enzmann 1998). Burnout is linked to sleep deprivation, fatigue (Rose et al., 2008) anxiety, and depression (Pereira-Lima and Loureiro, 2015). Burnout of nurses is related to physical and psychological stress factors such as long working hours, role ambiguity, and role conflict, which are associated with hospital atmosphere (García and Calvo, 2011; Lim et al., 2010).Thus, many studies have focused on the primary causes or correlates of burnout in

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order to produce intervention strategies to alter such factors (Maslach and Leiter, 2008). Prevention of nurses' burnout is an irrevocable part of strategic management, which is required to increase the quality of health care service and reduce health care costs.

From the Positive Organizational Behavior standpoint (Luthans, Youssef, Avolio, 2007; Luthans, 2002); the negative events in the hospital atmosphere could be partly eliminated if individuals were aware of their positive resources to combat with such tough situations. These positive resources could act as a shock absorber for the negative effects of stressful and traumatic events in the hospital environment (e.g. García and Calvo, 2011).

On the other hand, one of the most potent stressors in today's labor market is job insecurity (De Witte 1999; Cuyper et al., 2010). The healthcare sector is facing with downsizing and restructuring in order to reduce hospital costs (e.g. Burke et al., 2015). Such cost cutting efforts or implementing retrenchment strategies, some work-related worries and risks may lead nurses to evaluate their job as insecure. Thus, a major factor in explaining psychological capital-burnout relationship can be felt job insecurity.

Consequently, the aim of the present study is twofold. First, we will examine the relationship between psychological capital and burnout among Turkish nurses. Although some studies examine the psychological capital-burnout relationships in the literature, the mediating mechanisms of this relation are missing. Thus, second, we will investigate the mediating role of job insecurity in the relationship between psychological capital and burnout. All of these aims try to develop ways and strategies in order to treat and prevent burnout among nurses.

2. Literature Review and Hypotheses Development

Focusing on a positive standpoint to effectively manage human resources is one of the important approaches in work settings today. Luthans (2002, p.59) defined positive organizational behavior as "the study and application of positively oriented human resource strengths and psychological capacities that can be measured, developed, and effectively managed for performance improvement". By using the lens of positive organizational behavior, Luthans and colleagues (2007) determined four positive psychological constructs such as self efficacy, resilience, optimism, and hope. Psychological capital represents the combination of these four state-like positive psychological constructs (Luthans et al., 2007). State-like characteristics of the constructs implies their openness to development and change comparing to the fixed traits (Luthans et al., 2007; Luthans, 2002).

Leiter and Maslach (2009, p.332) define burnout as a psychological syndrome, which handles a prolonged response to chronic interpersonal stressors on the job. Schaufeli, Leiter, and Maslach (2009) see burnout as a kind of chronic distress, which results from a stressful and frustrating work environment. A fundamental aspect of the burnout syndrome is increased feelings of emotional exhaustion (Maslach et al., 2001; Maslach and Jackson, 1981), which is explained as the depletion of emotional and mental energy because of the prolong exposure to certain job demands (Moore, 2000). Employees may experience emotional exhaustion, when their resources are depleted due to the high job demands (Thanacoody, Newman, and Fuchs, 2014). Further, when employees experience some kind of exhaustion or burnout because of the high job demands and stressors, they may secure themselves by mobilizing their positive resources as a coping tool within the framework of Conservation of Resources Theory (Hobfoll, 1989). For instance, Cherniss (1993) mentioned about the lack of confidence in one's own competence may promote the development of burnout. Ventura, Salanova, Llorens (2015) reported that employees with more professional self-efficacy will perceive more challenge demands and fewer hindrance demands, which will result with more engagement and less burnout. Thus, building psychological capital may contribute to decreasing the occurrence of burnout. Laschinger and Fida (2014) reported that authentic leadership and psychological capital were found to be significantly associated with lower levels of burnout among new graduate nurses. In other words, they claimed that authentic leadership and psychological capital may protect new graduate nurses from burnout development (Laschinger and Fida, 2014).

Employees, who work for a stressful work environment, may appraise their job as insecure. Job insecurity can be explained as the employee's overall concern about the continued existence of the job in the future (De Witte, 1999; Hartley et al., 1991). Some authors accept job insecurity as a subjective experience or perception (e.g.Van Vuuren, 1990; De Witte, 1999) since some employees can feel secure even their job is in fact threatened or some feel insecure, when there is no threatening situation (De Witte, 1999). Hartley et al. (1991) see job insecurity as a source of anxiety. Dekker and Schaufeli (1995) mention about the prolonged exposure to job insecurity may lead to a wearing out of the resources of the employees, thus causing burnout (De Witte, 1999). Westman et al. (2001) focused on couples working in the same firm, which the organization was downsizing, when investigating the relationship between job insecurity and burnout. They reported both partners experienced a similar level of job insecurity, while job insecurity

had a significant effect only on husband's burnout. Ronen and Mikulincer (2012) mentions about the supervisors' feeling of insecurity may spill over to subordinate's burnout and job satisfaction, when supervisors are uncaring. Burke et al. (2015) found that nursing staff indicating a greater level of potential threats to their job security reported more psychosomatic symptoms, less job and life satisfaction, and higher levels of intentions to quit and burnout. Therefore, the employees, who suffer from job insecurity, may need their positive psychological resources to cope with tough and stressful situations in order to prevent burnout development. On this basis, the following hypotheses are proposed for investigation:

> *Hypothesis 1:* Psychological capital negatively affects burnout
> *Hypothesis 2:* Psychological capital negatively affects job insecurity.
> *Hypothesis 3*: Job insecurity mediates the relationship between psychological capital and burnout.

3. Methodology

3.1. Research Goal

This research aims to investigate the mediating role of job insecurity on the relationship between psychological capital and burnout. In order to test the hypotheses, a field survey using questionnaires was conducted.

3.2. Sample and Data Collection

The data of this study is collected via questionnaires from 161 nurses, who work for the hospitals of foundation universities in Ankara, Turkey. Survey questionnaires were distributed to 230 nurses and a total of 165 questionnaires (72% response rate) were returned. Some of them were discarded due to the outliers and missing values, resulting 161 useable questionnaires in total. The sample featured mostly female (95%) respondents with means age and tenure of 31.65 and 9.75 years, respectively.

3.3. Measures

The constructs in this study are developed by using measurement scales adopted from prior studies. Items for psychological capital and job insecurity were responded to on five-point Likert scales, with anchors ranging from strongly disagree (1) to strongly agree (5). Psychological capital was measured by 12-item (e.g. "I can be "on my own," so to speak, at work if I have to") taken from Psychological Capital Questionnaire, which is developed and validated by Luthans, Avolio, and Youseff (2007). 2 items of the scale were eliminated due to the low factor loadings. Alpha reliability of the scale was 0.84. Job insecurity was evaluated using 4-item (e.g. "I feel insecure about the future of my job") from the Job Insecurity Scale, which were originally developed by De Witte (2000). 2 items of the scale were dropped due to the low factor loadings. Alpha reliability of the job insecurity scale was 0.69. Burnout was measured using 9-item (e.g. "I feel emotionally drained from my work") from Maslach Burnout Inventory's emotional exhaustion subscale (Maslach and Jackson, 1981). Items for this scale were rated with a five-point frequency scale ranging from 1 (a few times a year) to 5 (every day). One item of the scale was eliminated due to the low factor loading. Alpha reliability of the burnout scale was 0.90. Further, the fit statistics of the full latent model (as depicted in Figure 1) shows that the model has an adequate fit ($\chi2/df$ = 1.60; CFI= 0.94; RMSEA=0.06).

3.4. Analyses and Results

Table 1 presents means, standard deviations, and Pearson correlations for the measures of psychological capital, job insecurity, and burnout. The correlations show that burnout was negatively correlated with psychological capital (-.27, $p < .01$) and positively related to job insecurity (.30, $p < .01$). Also, a negative correlation observed between job insecurity and psychological capital (-.30, $p < .01$).

Table 1 Summary Statistics and Correlations

		M	SD	1	2	3
1	Psychological Capital	3.81	0.58	---		
2	Job insecurity	2.20	1.02	-0.30**	---	
3	Burnout	3.08	0.93	-0.27**	0.30**	---

**. p < 0.01

Structural equation modeling was employed in order to test the research hypotheses. Structural equation modeling provides effective tools to researchers by taking a confirmatory approach to the data analysis and evaluating error variance parameters when modeling multivariate relations (Byrne, 2010). Figure 1 shows the full latent structure, which includes measurement and structural models.
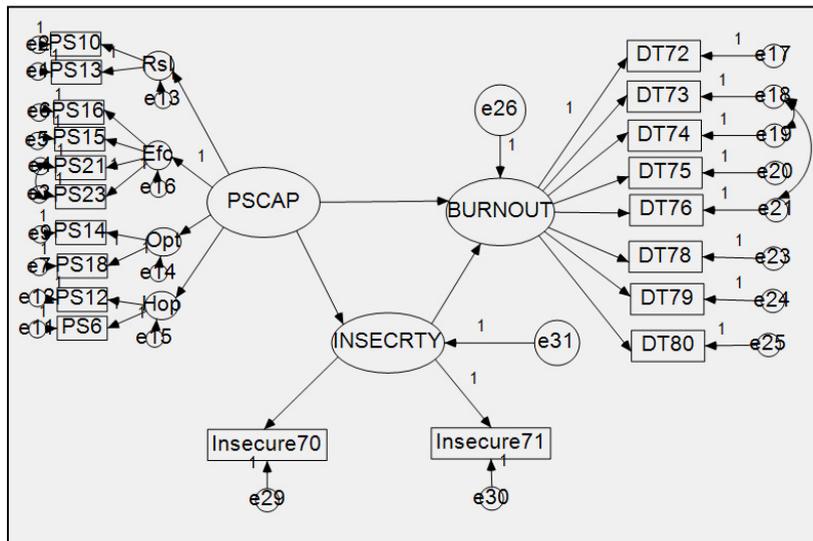

Figure1. Full latent model. PSCAP= Psychological Capital, INSECRTY= Job insecurity

Table 2 shows the standardized regression weights of the full latent model. Based on Table2, it can be seen that psychological capital affects both job insecurity (β = -.36, p<.00) and burnout (β = -.30, p<.00) negatively. Thus, *Hypotheses 1-2* are supported.

We applied Baron and Kenny's (1986) approach and bootstrapping method together in order to test the hypothesized mediating effect (wherein job insecurity is suggested as a mediator of the relationship between psychological capital and burnout). In this regard, path coefficients were initially evaluated. The path coefficient from psychological capital to burnout dropped substantially and become statistically insignificant when job insecurity entered to the model (a decrease in β from -.30 to -.20), which is consistent with Baron and Kenny's (1986) criteria for full mediation. Further, bootstrapping method is applied to confirm mediation (Preacher and Hayes, 2008). The bootstrap estimates used in this study are based on 1000 bootstrap samples, with a 95% Bias Corrected (BC) Confidence Intervals. The results of the bootstrapping support that job insecurity is the significant mediator of the

psychological capital-burnout relationship (Estimate:-.11; Lower bound:-.30, Upper bound:-.03, with a BC 95%). Therefore, *Hypothesis₃* is supported.

Table 2. Standardized regression weights of the full latent model.

	β	S.E.	C.R.	p
PsyCap→Job insecurity	-.36	.25	-2.88	.00
Job insecurity→Burnout	.30	.10	2.84	.00
PsyCap→Burnout (with mediator)	-.20	.19	-1.91	.06
PsyCap→Burnout (without mediator)	-.30	.19	-2.90	.00

4. Discussion

This study investigated the effect of psychological capital on burnout and evaluated the mediating role of job insecurity for the psychological capital-burnout relationship in nurses. Results showed that psychological capital affected both burnout and job insecurity in a negative way. In order to test the mediation effect, Baron and Kenny (1986) approach and bootstrapping method were employed together. Both supported the mediation effect of job insecurity for the psychological capital-burnout relationship. In other words, psychological capital decreases perceived job insecurity, which in turn decreases burnout. The results presented here (see Tables 1-2) were consistent with previously reported findings (e.g. Burke et al., 2015; Ventura et al., 2015; Laschinger and Fida, 2014; De Witte, 1999).

Results revealed that psychological capital may play a protective role against stressors such as job insecurity, which in turn reduce burnout. Thus, hospital administrators and human resource managers should invest in psychological capital in order to reduce perceived job insecurity and burnout in nurses, which are very crucial for effective delivery of healthcare. Luthans and his colleagues (2007) mention that psychological capital is state-like and open to development. On this basis, some micro-interventions, which are designed to increase the components of psychological capital, should be implemented to develop psychological capital of nurses. Results also emphasize that nurses may react to perceived insecurity by experiencing burnout. This result underlies that developing strategies to reduce perceived insecurity is also important to treat and prevent burnout. Within this context, building positive resources may help employees perceive their job as secure even in tough and stressful situations.

Feeling of job insecurity usually occurs when organizations (e.g. hospitals) decide to implement retrenchment strategies. Retrenchment strategies include downsizing in order to decrease costs and restructuring to develop operating efficiency (e.g. Lombardi et al., 2007). Job insecurity feeling may related to burnout due to the survival syndrome among those employees (e.g. Appelbaum et al., 1997), who stay after organizational downsizing. Survivors may worry about how long they will be able to continue their jobs (Appelbaum et al., 1997). Employees, who are confident, optimistic, hopeful, and resilient, may have been less affected from survivor syndrome, which in turn such employees may show less burnout. In other words, psychological capital can be an effective tool for management in order to implement retrenchment strategies in hospitals. Therefore, effective human resources management strategies may prevent some negative effects of downsizing and restructuring through recruitment of employees with high psychological capital or investing to develop current employees' psychological capital.

 Present study includes some limitations. One of them is the fact that we used a cross sectional design, which causal conclusions cannot be drawn. Findings should be confirmed by a longitudinal study for future studies. Another limitation is that we conducted this research in the hospitals of foundation universities. Thus, nurses from other kinds of hospitals should be investigated in further researches for the generalizability of findings. Final limitation of this study is related to the self-reported data and same-source concerns, which may lead bias problem. Some remedies offered by Podsakoff et al. (2003) applied to reduce such potential problems.

References

Aiken, L.H., Clarke, S.P., Sloane, D.M., Sochalski, J.A., Busse, R., Clarke, H., Giovannetti, P., Hunt, J., Rafferty, A.M. & Shamian, J. (2001). Nurses' reports on hospital care in five countries. Health Affairs, 20, 43-53.

Appelbaum, S. H., Delage, C., Labib, N., & Gault, G. (1997). The survivor syndrome: Aftermath of downsizing. Career Development International, 2(6), 278-286.

Baron, R. M., & Kenny, D. A. (1986). The moderator-mediator variable distinction in social psychological research: Conceptual, strategic, and statistical considerations, Journal of Personality and Social Psychology, 51, 1173-1182.

Burke, R.J., Ng, E.S.W., Wolpin, J. (2015). Economic austerity and healthcare restructuring: Correlates and consequences of nursing job insecurity. The International Journal of Human Resource Management, 26(5), 640-656.

Byrne, B.M. (2010). Structural Equation Modeling with Amos: Basic concepts, applications, and programming. New york: Taylor & Francis Group.

Cherniss, C. (1993). Role of professional self-efficacy in the etiology and amelioration of burnout. In W.B. Schaufeli, C. Maslach, & T. Marek (Eds.), Professional burnout: Recent developments in theory and research. Series in applied psychology: Social issues and questions (pp. 135-149). Washington, DC: Taylor & Francis.

De Witte, H. (1999). Job insecurity and psychological well-being: Review of the literature and exploration of some unresolved issues. European Journal of Work and Organizational Psychology, 8(2), 155-177.

De Witte, H. (2000). Arbeidsethos en jobonzekerheid: Meting en gevolgen voor welzijn, tevredenheid en inzet op het werk [Work ethic and job insecurity: Assessment and consequences for wellbeing, satisfaction and performance at work]. In R. Bouwen, K. De Witte, H. De Witte, & T. Taillieu (Eds.), Van groep naar gemeenschap [From group to community]. Liber Amicorum Prof. Dr. Leo Lagrou (pp. 325–350). Leuven: Garant.

Dekker, S., & Schaufeli W. (1995). The effects of job insecurity on psychological health and withdrawal: A longitudinal study. Australian Psychologist, 30(1), 57-63.

Hartley, J., Jacobson, D., Klandermans, B., & Van Vuuren, T. (1991). Job insecurity: Coping with jobs at risk. London: Sage Publications.

Hobfoll, S.E. (1989). Conservation of Resources: A New Attempt at Conceptualizing Stress. American Psychologist, 44, 513-524.

Laschinger, H. K. S., & Fida, R. (2014). New nurses burnout and workplace wellbeing: The influence of authentic leadership and psychological capital. Burnout Research, 1(1), 19-28.

Laschinger, H.K. & Finegan, J. (2008) Situational and dispositional predictors of nurse manager burnout: a time-lagged analysis. Journal of Nursing Management, 16 (5), 601-607.

Leiter, M. P., & Maslach, C. (2009). Nurse turnover: the mediating role of burnout. Journal of nursing management, 17(3), 331-339.

Lombardi, D. J., Schermerhorn, J. R., & Kramer, B. (2007). Health care management. Hoboken, NJ:Wiley.

Luthans, F. (2002). Positive organizational behavior: Developing and managing psychological strengths. Academy of Management Executive, 16(1), 57-72.

Luthans, F., Youssef, C.M., Avolio, B.J. (2007). Psychological Capital: Developing the human competitive edge. New York: Oxford University Press.

Luthans, K. W., & Jensen, S. M. (2005). The linkage between psychological capital and commitment to organizational mission: A study of nurses. Journal of Nursing Administration, 35(6), 304-310.

Malach, M., and Baumol, W. (2010). Further Opportunities for Cost Reduction of Medical Care. Journal of Community Health, 35, 561-571.

Maslach C, Schaufeli, W.B., and Leiter, M.P. (2001). Job burnout. Annual Review of Psychology, 52, 397-422.

Maslach, C., & Jackson, S. (1981). The measurement of experienced burnout. Journal of Occupational Behaviour, 2, 99-113.

Maslach, C., & Leiter, M.P. (2008). Early predictors of job burnout and engagement. Journal of Applied Psychology, 93(3), 498-512.

Moore, J.E. (2000). Why is this Happening? A Casual Attribution Approach to Work Exhaustion Consequences. Academy of Management Review, 25, 335-349.

Pereira-Lima, K., & Loureiro, S.R. (2015). Burnout, anxiety, depression, and social skills in medical residents. Psychology, Health & Medicine, 20(3), 353-362.

Podsakoff, P.M., MacKenzie, S.B., Lee, J.-Y., Podsakoff, N.P. (2003). Common method biases in behavioral research: A critical review of the literature and recommended remedies. Journal of Applied Psychology, 88, 879-903.

Preacher, K. J., & Hayes, A. F. (2008). Asymptotic and resampling strategies for assessing and comparing indirect effects in multiple mediator models. Behavior Research Methods, 40, 879-891.

Ronald J. Burke, Eddy S.W. Ng & Jacob, W. (2015). Economic austerity and healthcare restructuring: Correlates and consequences of nursing job insecurity. The International Journal of Human Resource Management, 26(5), 640-656.

Ronen, S., and Mikulincer, M. (2012). Predicting Employees' Satisfaction and Burnout From Managers' Attachment and Caregiving Orientations. European Journal of Work and Organizational Psychology, 21, 828-849.

Rose, M., Manser, T., & Ware, J.C. (2008). Effects of call on sleep and mood in internal medicine residents. Behavioral Sleep Medicine, 6, 75-88.

Schaufeli W.B. & Enzmann D. (1998). The Burnout Companion to Study and Practice: A Critical Analysis. Taylor & Francis, London.

Schaufeli, W. B., Leiter, M. P., & Maslach, C. (2009). Burnout: 35 years of research and practice. Career development international, 14(3), 204-220.

Thanacoody, P. R., Newman, A., & Fuchs, S. (2014). Affective commitment and turnover intentions among healthcare professionals: the role of emotional exhaustion and disengagement. The International Journal of Human Resource Management, 25(13), 1841-1857.

Van Vuuren, T. (1990). Met ontslag bedreigd. Werknemers in onzekerheid over hun arbeidsplaats bij veranderingen in de organisatie. Amsterdam: VU Uitgeverij.

Vander Elst, T., De Witte, H., & De Cuyper, N. (2014). The Job Insecurity Scale: A psychometric evaluation across five European countries. European Journal of Work and Organizational Psychology, 23(3), 364-380.

Ventura, M., Salanova, M., & Llorens, S. (2015). Professional Self-Efficacy as a Predictor of Burnout and Engagement: The Role of Challenge and Hindrance Demands. The Journal of Psychology, 149(3), 277-302.

Westman, M., Etzion, D., Danon, E. (2001). Job insecurity and crossover of burnout in married couples. Journal of Organizational Behavior, 22, 467-481.