

Burnout among the Iraqi medical personnel in light of the Corona crisis

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ABSTRACT:

The current research objectives to identify:

- Psychological exhaustion among doctors and nurses in some Baghdad hospitals for receiving Corona patients.
- Significance of statistical differences in psychological exhaustion between doctors and nurses.
- The significance of the statistical differences in the psychological exhaustion of doctors and nurses according to gender variables (male-female) marital status ((married, unmarried), certificate (junior high, bachelor's, graduate degree)

To achieve the objectives of the current research, the researcher relied on the theory and scale (Maslach & Jackson, 1981) to measure psychological exhaustion consisting of (22) paragraphs with six-six alternatives, which measure three dimensions (attrition, emotional) by nine paragraphs (and emotion dullness) by five paragraphs (and lack of Feeling of personal achievement) in (8) paragraphs. And after applying the scale to a sample of doctors and nurses from Baghdad hospitals (Ibn Al-Khatib Hospital, City of Medicine Hospital, Imam Ali Hospital), the sample consisted of (180) doctors and nurses by (80) doctors and (100) nurses.

The current study reached the following results:

- The sample members of doctors and nurses suffer from psychological exhaustion.
- There were no statistically significant differences between doctors and nurses in psychological exhaustion.
- There are no statistically significant differences between males and females in psychological exhaustion, and there are also no statistically significant differences between married and unmarried people, and there are no statistically significant differences according to the degree (junior high, bachelor's, graduate).

Keywords:

Psychological, exhaustion and Corona crisis.

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INTRODUCTION

Workers in social care professions that fall under the name of the first responder such as doctors, nurses, police officers, clerics and judges are at real risk of developing stress and exhaustion, as they are at the forefront of helping distressed individuals as they face many pressures in their work, especially in the events of wars, crises and mass casualties, including This is the effects of media attention, frustration with distressed individuals, and fear on loved ones and their families.¹

And that each profession has its peculiarities and has a nature that differs from other professions in the performance of work and the level of pressure resulting from it, so health care professions are among the pressing work areas because they are characterized by confrontation with individuals and in which the workers devote themselves to the service of others, they have chosen these professions and they have A strong desire to assist others, but they quickly realize the difficulties and pressures they face, so they work their hardest to find that the pressures continue to feel consumed and exhausted at work.² If the name of the

hospital is associated with a set of painful experiences and negative feelings, as this place is considered a place of pain and suffering or perhaps death, and all these experiences and painful events face health personnel in addition to many varied and intense activities whose performance requires the enjoyment of many skills. With a little support, thanks and praise, but if he fails, he is met with rejection, indignation and mockery. In addition, the medical and nursing profession is based on dealing with complaints from patients and the affected and assisting them in reviewing the symptoms arising from diseases, and therefore they find themselves constantly besieged by the requirements of the other, which requires them to make a double effort to perform the professional health tasks on the one hand, and the human appearance on the other hand, as it exceeded the external requirements. From professional tasks, the individual abilities of the doctor and the nurse become in a state of physical and emotional fatigue, which results in an emotional state and a feeling of ineffectiveness, and he may lose the sympathetic feeling towards others, which becomes dry in his dealings.³

Doctors and nurses are among the professions in which they are most subjected to pressures, exhaustion, and fatigue, characterized by confrontation with individuals. (Doctors and nurses) are more vulnerable to psychological pressure than other professions, as these professions have sudden situations and work burdens in addition to a sense of responsibility towards patients, which exposes them to fatigue and suffering from many psychological and health problems,⁴ in addition to dealing with difficult and complex cases and follow-up on Around the clock, spending long hours at work, night shifts, and the lack of some devices or medicines all contribute to increasing pressure on health care professionals.⁵ The health care professions require the requirements of dealing with multiple and varied age groups of patients, as each person represents a special case that requires a pattern of service and care and the different severity of their cases and problems all of this creates frustration and weakness for medical service personnel, the feeling of success and achievement, anxiety and depression because this profession is a profession of character. It is humanitarian and cooperative, and many obstacles that generate these problems appear in it.⁶

Health care (doctors and nurses) is considered one of the stressful professions in which workers are exposed to varying degrees of psychological and social pressures related to their work, especially if they do not feel appreciated. This is reflected in the negative effects they have on their professional competence and their psychological and professional compatibility,⁶ which generates cynical attitudes and harsh feelings towards individuals and clients, and they are keen to have a safe distance between them and the clients who deal with them.⁷ As it is what the health professionals direct in their constant struggle against the suffering of the patients they care for, which makes them subject to the quantitative burden of the profession.⁸ Numerous studies, including those, have concluded that nurses suffer from emotional stress, dulled feelings, and a low feeling of anger.⁹ And that the health care profession of doctors and nurses has its peculiarity,¹⁰ as it requires between technical skills and the daily interaction of patients and their families. This continuous interaction with patients under care is stressful for them and if associated with prolonged periods they have compassion stress and psychological exhaustion.¹¹

Despite the active role that a hospital nurse plays, the burdens they face at work include a lack of nursing preparation and increased work requirements, which result in the need to make more effort to adapt to this deficiency in addition to increasing emotional

pressures to care for patients who suffer from physical and psychological pain each. This makes medical staff vulnerable to fatigue and exhaustion, as their profession is one of the most distinguished professions, as it expresses human concern, social solidarity and compassion towards all members of society who need care.¹² The interest recently came in studying the phenomenon of psychological burnout (Burnout) in psychological studies because of its effects that are reflected, especially on members of social professions, interest in studying this variable has begun after noticing that a large number of workers leave their professions and turn to practice other work. To the people who are most enthusiastic about their work after years lose their enthusiasm and ambition, and this is in agreement with the opinions of Sarasan 1972, who explained that the longer the time of practising the profession, the less influential and vital, and in response to the influences surrounding the role he plays, and this was attributed to that Increased years of service or experience contribute to a feeling of boredom, decreased motivation to work, and increased stress.¹³

Hock 1980 believes that several factors lead to a feeling of exhaustion, including an overload at work or the absence of a moral or material and administrative reward.¹⁴ Friedman, 1991, points out that psychological exhaustion is of two types, the first is related to personality and that is due to the individual's predisposition to exhaustion, and the other is related to work or professional system. Askar and his colleagues, 1986, believe that work stress plays the largest role in the occurrence of the phenomenon of psychological exhaustion.¹⁵ According to the views of the theorists, psychological exhaustion has been identified as a psychological, subjective and negative problem experienced by members of social professions such as (doctor, nurse, police, firefighters, teachers and teachers) and exhaustion begins with psychological pressure and worsens with time, causing psychological exhaustion.¹⁶

This variable has been studied in many samples of teachers and teachers, such as the study,¹⁷ which aimed to measure psychological exhaustion among teachers. As for doctors and nurses, the study showed that doctors suffer from psychological exhaustion, and the study found the presence of psychological burnout among Algerian doctors,¹⁸ and study came to the existence of a relationship between psychological burnout On the dimensions of mental health for doctors in Algeria.¹⁹ The study found psychological exhaustion in many samples of different professions among lawyers and policemen, nursing and psychiatry,

counselling and education,²⁰ administration and social work, and this study found that there were differences between males and females and in favour of females. More exhaustion and that young ages had a higher negative feeling towards clients than adults, and that the unmarried and divorced category suffered from emotional stress to a higher degree than married individuals.²¹

And also a study, aimed to identify the level of psychological burnout of French doctors and its relationship to demographic variables. It found that there is a high level of psychological exhaustion associated with elevated workload, and that a lower level of psychological exhaustion is associated with a lack of sedatives and a sense of control over work matters, and that females are more vulnerable to exhaustion than males.²² The study concluded that a sample of doctors had psychological exhaustion and for all age groups.²³ The study came to confirm that the pressures experienced by doctors lead to exhaustion of my body and emotions, the most important manifestations of which are loss of interest in patients, dulled feelings or lack of motivation and typical work performance, and loss of support for doctors leads to an increased likelihood of psychological exhaustion.²⁴

The study linked supplication as the spiritual approach and the level of psychological combustion with its three dimensions (emotional stress, dulled feelings, and a lack of a sense of achievement, and the study found a statistically significant negative correlation between each of the dimensions of combustion and supplication and being close to God on the part of the doctor I said. The degree of each dimension of burnout. As for burnout for nurses, the study aims to identify the relationship of burnout with the organizational climate of nurses. It found that the nurses have a high level of burnout or psychological exhaustion and it has a statistically significant relationship with the organizational climate.²⁵ The study found that nurses suffer from psychological exhaustion and have a desire to give up the profession. The study showed that doctors and nurses suffer from stress, burnout and psychological exhaustion, which correlates with role struggle.²⁶ The study found psychological exhaustion in its three dimensions (high emotional exhaustion, dulled feelings, and lack of personal achievement).²⁷

The study on the awareness of male and female nurses in Baghdad hospitals revealed that their exposure to pressures, suffering, ostracism and social rejection led to an increase in their level of social pain, especially the negative perception of everyone's inferiority towards the nursing profession.²⁸ So study

revealed that nurses in Iraqi hospitals suffer from the stress of compassion.²⁹ And also the many events that our country, Iraq has gone through, from the successive wars of nearly 40 years and the martyrs and wounded they have borne, all of this was the responsibility of the medical personnel from pressure and psychological exhaustion. And what the world in general and our society, in particular, is going through is the new Corona epidemic that terrified the superpowers, so how can a country not frighten its simple medical capabilities that may not be sufficient to confront this epidemic, and despite this, the Iraqi medical personnel, described by the reference with heroic cadres, were attached to hospitals to treat those infected with this virus, which may infect them And it ends their lives and the lives of their loved ones.

Therefore the importance of the current study comes in adding research information. And the enrichment of the local and Arab library with information about the psychological exhaustion of the medical staff, as the scale was applied to an important segment of Iraqi society that has suffering and pain in an exceptional circumstance in all countries of the world. There is no local study that dealt with the variable among doctors and nurses under the circumstances of the emerging Corona disease.

Research objectives

1. Psychological exhaustion of doctors and nurses in some Baghdad hospitals that receive Corona patients.
2. Significance of statistical differences in psychological exhaustion between doctors and nurses.
3. The significance of the statistical differences in the psychological exhaustion of doctors and nurses according to the gender variables (males and females), marital status (single - married) and the certificate (junior - bachelor - graduate degree).

Research limits

The current research is determined by studying the psychological exhaustion of doctors and nurses in Baghdad Rusafa Hospitals for receiving Corona patients (Ibn Al-Khatib Hospital, Imam Ali (PBUH) Hospital, City of Medicine Hospital) for the year 2020.

Psychological exhaustion

The phenomenon of psychological exhaustion has received the attention of many researchers due to its negative effects on humans in general and on the owners of some professions that deal with others in particular, as this phenomenon indicates negative trends and dissatisfaction on the professional side towards the responsibilities entrusted to him, which

leads to ineffectiveness at work,³⁰ and different work pressures play the main and important role in the occurrence of this phenomenon, and a large number of researchers agree in determining the intended and work pressures, as they refer to situations in which the requirements of the environment or what the individual is required to do is greater than his own potential,³¹ so the individual faces the requirements, abilities, or self-abilities of the individual, and in this case the level of stress depends on the extent of the individual's perception of failure in facing those requirements and the combustion manifests itself in a number of ways. People who have psychological exhaustion are usually tired. And consumers as they have no motive to feel.³²

Levels of psychological burnout

The study demonstrated that psychological exhaustion is an emotion associated with a work routine, and has three levels of stress.

- Mild psychological exhaustion: It is the result of short bouts of fatigue, anxiety, frustration and irritability.
- Moderate psychological exhaustion: it results from the same previous symptoms, but it lasts for at least two weeks.
- Severe psychological exhaustion: this results in physical symptoms such as ulcers, chronic back pain, and severe headaches.

It is not surprising that doctors and nurses feel feelings of moderate and moderate psychological exhaustion from time to time, but when these feelings persist, they appear in the form of chronic physical and psychological illnesses, then exhaustion becomes a serious problem.³³

Symptoms of psychological exhaustion:

Psychological Burnout in E-learning provides a comprehensive assessment of the symptoms of psychological exhaustion.³⁴

- Physical symptoms such as fatigue, insomnia, high blood pressure, frequent headaches, a feeling of exhaustion throughout the day, and a feeling of fatigue.
- Psychological and emotional symptoms represented by boredom, lack of self-confidence, tension, lack of enthusiasm, lethargy, resentment, and unwillingness to go to work.
- Social symptoms, which are symptoms related to others, are negative attitudes towards work, colleagues, isolation and withdrawal from the group.³⁵

Symptoms are indicating the presence of psychological exhaustion among doctors, and they

include physiological, physical, cognitive, social and behavioural manifestations, which indicate the danger of exhaustion for the doctor, but for the whole community, as the doctor is only a member of society. The results of the studies indicated that there is a step to the doctor's feeling of psychological exhaustion over the whole medical process, thus it becomes threatened with destruction through its negative effects on the competent doctor.³⁶

Among the manifestations of psychological exhaustion among doctors

- Physiological and physical manifestations: These include relationships that appear on the body such as persistent headaches, insomnia, shortness of breath, back pain, hoarseness, loss of appetite, eating disorders, excessive use of drugs, heart disease and irritable bowel syndrome, blood pressure, arterial blockages, lung disease, anaemia and dermatitis.³⁷
- Psychosocial manifestations: It is the state of change in emotions and these changes are negative and disturbing, the most intense is the feeling of frustration, emotional exhaustion, a sense of hopelessness and helplessness in addition to a feeling of fear, anxiety, depression, dullness, isolation, forgetfulness and complaining.³⁸
- Behavioural manifestations: It includes a set of performance responses that may appear on the individual's behaviour, such as long absenteeism from work, early retirement, constant criticism and mockery of others, negative perception of students, lack of commitment to work, dependency, assault on the rights of others and moving away from objectivity in judging job performance.³⁹

The appearance of these appearances is not the same for all individuals, and it is also not required that all these appearances appear in one individual or at the same time, and that is due to the difference of individuals among themselves and the different direction of situations that pose pressures on them as he succeeds in adapting to them, so his tender continues to those who have Flexibility in the ego is good. As for doctors who are not characterized by ego flexibility, they are exhausted, depleted their abilities, become stressed, and show manifestations of psychological exhaustion.⁴⁰

Models that explain burnout

First, the Cherniss Model

Presented his model of psychological exhaustion. He met with his assistants (280) junior professionals in

four fields: health, law, nursing in public hospitals, and teaching in secondary schools. All of the subjects were interviewed several times over a period ranging from one year,⁴¹ To two years, the following figure shows this model.

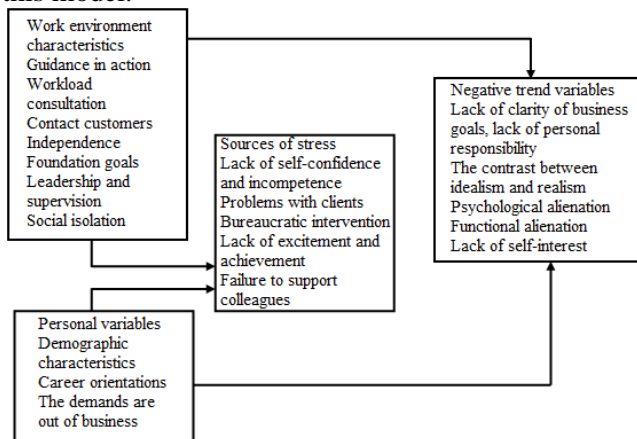


Figure 1. Show the model (Cherniss, 1985) illustrates This form indicates the following

Work environment characteristics

These characteristics interact from individuals who enter the job for the first time and have certain future trends and increased work demands and need social support. All these factors are considered certain sources of stress that individuals are exposed to varying degrees, and individuals adapt to these stress factors in different ways, so some resort to Deviant methods and strategies, different methods, so some resort to deviant methods and strategies, while others adapt by resorting to negative trends, as (Cherniss) considered the eight characteristics of the work environment as precursors to the variables of negative trends, which constitute job exhaustion, and these characteristics are: Orientation at work Workload, Stimulation. Scope of lient Contat. Autonomy. Institutional Enterprise Goals. Leadership Supervision. Social Isolation.

Personal variables

It includes demographic characteristics as well as social support from outside the work environment.

Sources of stress

Chrniss puts five stressors as precursors to job burnout

- Lack of self-confidence and incompetence, problems with clients, bureaucratic interference, lack of excitement and achievement, lack of support from colleagues.

Negative attitudes

Limit (Cherniss) negative trends resulting from pressures and are Lack of clarity of work goals, lack of

personal responsibility, psychological alienation, functional alienation, lack of self-interest.

Additional variants

Some variables such as variables have been added to the work and they are Job satisfaction, absence from work, tendency to quit the profession, psychosomatic purposes, marital satisfaction, role conflict, physical health, use of drugs.

(Cherniss) explained that the greater the shock of reality, the greater the exposure to stress, the greater the psychological exhaustion, for people who obtain high degrees of psychological exhaustion are those who receive weak social support, and this model also shows that demographic factors such as age, gender, and years of experience are poorly linked to psychological exhaustion. According to this model, those who attain high levels of exhaustion are workers who feel psychosocial symptoms and they are the ones who use drugs increasingly and suffer from marital dissatisfaction, role conflict, lack of job satisfaction, high absences, and tendencies towards leaving the profession.⁴²

Cherniss differs from other models

The concepts proposed by (Cherniss) (lack of clarity of work goals, lack of sense of personal responsibility, conflict between realism and idealism, psychological alienation, alienation from work, lack of self-interest) differed from those proposed.⁴³

(Cherniss) agreed from previous studies on the importance of job satisfaction and the characteristics of the work environment with an emphasis on the unimportance of individual differences and demographic characteristics.

- The model emphasized the importance of additional work variables such as social support and life requirements in increasing our understanding of the phenomenon of job burnout resulting from work.
- The results obtained through this model were in agreement with the results of Maslak's list of job burnout as it was related to the health and well-being of individuals.
- This model gave suggestions for some strategies to intervene in the work environment that can reduce the feeling of job exhaustion and divides it into four categories:
 - A. Guiding and developing employees.
 - B. Oversight, leadership and organizational goals.
 - C. Functional construction.
 - D. Methods and standards.

We note that this model focuses on the characteristics of the work environment that cause

stress for the individual, and it also focuses on some negative trends that exist among people targeted for psychological stress, and has given importance to social variables such as social support, and added work-related variables such as job satisfaction, role conflict and physical health.⁴⁴

Jackson & Maslsch model

This model determined that psychological exhaustion is emotional exhaustion, personality dullness and low personal achievement, that occurs in individuals who are in constant contact with others in some social profession.

According to this model

Epuisement emotional stress

It is the heart of psychological exhaustion, which is summarized in a feeling of lack of energy and depletion of personal resources and the source of this imbalance is the burden of work and personal conflicts in the work environment, which appears in the end in the form of extreme fatigue, in addition to feeling frustrated and tension, and thus emotional stress is a basic response in the psychological exhaustion syndrome. Depersonalization, which is the second dimension of psychological exhaustion, or it is the personal dimension, and it is expressed by the individual's feeling of coldness in dealing with those who receive service from him and separation in the relationship that binds them, as the latter issues irony and unmatched attitudes towards them and work and colleagues.⁴⁵

Lack of personal achievement: (la diminution de l'accomplissement personnel)

It is the self-evaluative dimension in the psychological exhaustion syndrome and its final stages, and it summarizes the professional feeling of a decrease in his professional competence and professional performance. Regarding the relationship between these dimensions,⁴⁶ after studying continuously for years, concluded that the psychological exhaustion syndrome was as follows:

The quantitative and qualitative workload is the triggering factor for the emergence of emotional stress,

which is considered as a result of the high emotional and physical requirements in the framework of work and as a defence mechanism that places a distance between the professional and those who receive the service from him, so that there is a separation in the relationship to reduce the emotional attrition linked to the act of the relationship with others and this is called dullness Personality Thus, the professional feels a failure, a decrease in his efficiency and professional performance, and a lack of personal achievement appears to him.

This has confirmed in both cases that a high level of stress and emotion leads to following the level of the dullness of personality, which leads to a lack of personal achievement and thus the emergence of psychological exhaustion. The study explained that psychological exhaustion is a response to accumulated psychological stress that produces psychological, emotional and physiological symptoms.⁴⁷

The recognition of the doctor and the nurse is the appreciation given to them for the efforts they exerted by the disease and their families, the East and the colleagues. The reward is in the form of the real evaluation of the doctor or nurse's ability to number them and the doctor's benefit from his depleted grant that corresponds to his experience. Several studies have found that there is no recognition and appreciation for Mary and my socialization of the worker increases his exposure to psychological exhaustion, as this situation is formed in him by an additional coming and generates a feeling of incompetence.⁴⁸

Studies reached the same results that the youth group (30-40) years old are more vulnerable to exhaustion, and as for gender, most studies have found that there are no differences between males and females in psychological exhaustion, but the differences They are in the distance, as males are more exposed to high levels of personality dysfunction, while women are more vulnerable to emotional stress.⁴⁹ There is illustrated the process in the following form:

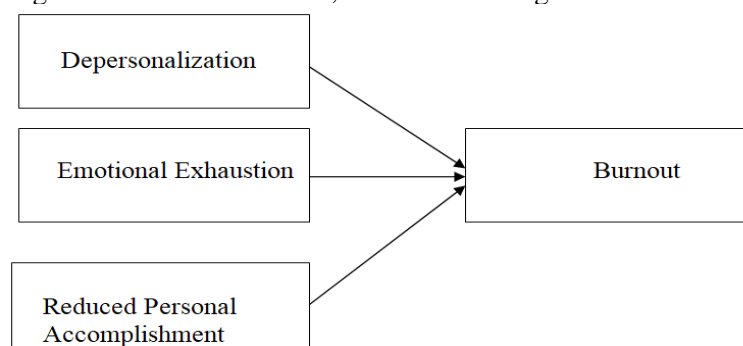


Figure 2. Show the model of Maslach & Jackson, 1996

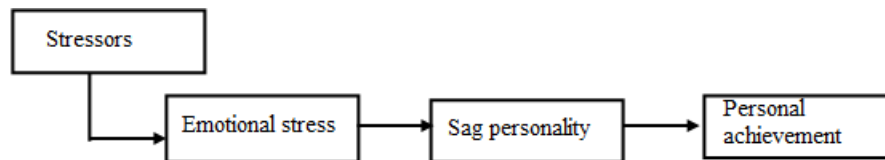


Figure 3. Show Maslach & Jackson's burnout model (Kane Sophie, 2009, p.8)

The researcher adopted the (Maslach & Jackson) model of psychological exhaustion because it is the closest to the current study of the researcher.

Model (Pines, 1982)

Pines (1982) clarified that fatigue is an existential necessity, as for psychological exhaustion, it is not only consistent with the impediment to the individual's exploitation of his skills, but also from the impossibility and inability of the latter to employ his competence in his work in the way he desires, so he has perceptions of the futility and adequacy of his efforts. And that psychological exhaustion is the last stage of the gradual process of disappointment that the worker feels after the first stage of high motivation and participation.

(Pines) explained that psychological exhaustion results from an imbalance between expectations and motivation, that is, there is a difference between needs. Expectations and motivation of individuals compared to what they find but confirmed that stress and tension do not generate psychological exhaustion in the individual alone, but add to them the factor of existential stubbornness to work.⁵⁰ While the Golembiewski model, in which the high level of emotion dullness is used, the confrontational strategy is used to avoid the microscopes, as it represents the first dimension and a certain level of professional distancing is necessary to drive performance in some professions, but if this limit of distancing is visited, it turns into a dulled feelings that the person is excluded from establishing relationships with others. It causes a decrease in achievement, and after this, it comes after emotional attrition as a response to the remoteness of emotions.⁵¹

The other model of psychological exhaustion for workers is the model,⁵² as this model sees that emotional attrition is directly related to the dimension of emotional dysfunction (such as the Slash and Literature model), in contrast, after personal achievement develops on its own, and a high level in the dimension of emotional exhaustion can be That it

leads to psychological exhaustion directly, and it can also appear directly through a low level of feeling inferior to achievement, and indirectly, through a dimension of dulled feelings.⁵³

Abdi's study, 2014 (Burnout among nurses and night work)

The study aimed to find out the relationship between night work and burnout among nurses. The sample was from male and female nurses working at night at five hospitals in Algeria in the city of Ain Al-Bayda, and the sample consisted of (320) male and female nurses in a randomized manner, where the Maslach scale (MBI, 1986) was applied, and then the results were extracted using (SPSS). The study concluded:

- That the night work has to do with the emergence of psychological burnout on the (MBI) scale of the two cognitions.
- That the nurses working at night suffer from a level of psychological burnout ranging from medium to high on the scale (MBI) Maslach for the dimension of emotional exhaustion, equivalent to (95%).
- That the nurses working at night suffer from a psychological burn level that ranges from medium to high on the scale (MBI) of Maslach to the distance of emotion dullness equivalent to (69%).
- That the nurses working at night suffer from a psychological burnout level ranging from medium to high on the scale of (MBI) for Maslach after the lack of feeling of personal detention, equivalent to (75%).

A well-known study, 2017 (Burnout among surgeons)

The study aimed to battle the level of psychological burnout among surgeons in vertical hospital institutions or private clinics in Algeria, and it also aimed to identify the differences between

surgeons in psychological burnout according to the variables (gender, years of service, and type of surgery). The researcher applied the Maslach Burnout Scale after it was modified and applied to a sample consisting of (90) working in hospital institutions and after extracting the psychometric properties of the scale and applying it, the study reached the following results:⁵⁴

1. Surgeons enjoy a high level of psychological burnout.
2. There are no statistically significant differences in the psychological burnout of surgeons according to the variables (gender, years of service and type of study).⁵⁵

Jabbar's 2015 study (Burnout among working doctors - a field study at Mostaganem Hospital)

The study aimed to identify the psychological burnout of doctors working at the Mostaganem Hospital in Algeria, as well as to identify the level of psychological burnout of doctors according to gender and age, and to identify the strategy that doctors use to confront psychological burnout. The Maslach scale was narrowed to the research sample and the psychometric characteristics were extracted for it. Applying it to the research sample, the study reached the following results:⁵⁶

- That the sample has psychological combustion.
- There are statistically significant differences in psychological burnout among doctors according to gender, as women are more psychologically burnt than men.
- There are statistically significant differences in psychological burnout in the news according to age. The younger doctors are the most vulnerable to psychological burnout.
- To combat burnout, doctors use a problem-solving strategy and an avoidance strategy with positive thinking.⁵⁷

The Maslach & Jackson study (1981)

The study aimed to identify the level of psychological exhaustion of different samples from different professions. The samples were from the police profession, medicine, nursing, psychiatry, education and counselling, administration, law, and group work. The study concluded that the profession of a social character in which there is interaction with the other There is psychological exhaustion in all of these professions, and the study found statistically significant differences between the levels of age and

psychological exhaustion. The young respondents showed a high level of psychological exhaustion and generated a negative feeling towards clients with a higher degree than the elderly or those with more years of service. In terms of severity of emotional stress, as for the difference between males and females, there were statistically significant differences in the various dimensions of psychological exhaustion, as males showed a sense of achievement with a higher degree than females at the level of frequency and intensity, and as for the social status, the study showed that both unmarried people The divorced individuals suffered from emotional stress to a greater degree than married individuals at the level of frequency and intensity.⁵⁸

The Ziegler Study,(Exhaustion and medicine)

The study aimed to identify the psychological exhaustion of doctors, and the Maslach scale (MBI) was used. Emotional stress (37.9%), personality dullness (29.4%), and lack of personal achievement (12.4%) (Pennyziegler, M. D. Medical Director PRN).

Study (Aethur & Itengerer, 2018), (Study of Health and Medical Exhaustion)

The study aimed to identify medical exhaustion and to identify the factors that contribute to its increase and what are the strategies used to avoid medical exhaustion. The study stabilized the Maslach scale and found that doctors suffer from psychological exhaustion in the three cases. And that among the factors that contribute to the increase in exhaustion are long working hours, night work and administrative orders that interfere with the work of the doctor, and among the strategies that doctors take to reduce the severity of exhaustion is the enjoyment of leave and the reduction of working hours.

Research procedures

Will be in this chapter show the methodology used and chosen by the researcher after reviewing previous studies that have dealt with this change, the researcher descriptive approach has chosen a suitable approach because he is interested in identifying and clarifying the phenomenon as it is through and describe precisely and express them quantitatively and qualitatively.⁵⁹

Study community

The current research community is determined by doctors and nurses, private hospitals that receive Corona patients (Medical City, Ibn Al-Khatib Hospital, Imam Ali (PBUH) Hospital). Below is a table showing the details of the study population of doctors and nurses.

Table 1. Show distribution of community members (doctors and nurses) according to hospitals and gender

Hospital Name	Doctors	Nurses	Total
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	Males	Females	Males	Females	
Medical City + Al-Shifa Hospital	52	20	45	15	132
Imam Ali Hospital (Peace be upon him) + Shifa Hospital	65	25	42	25	157
Ibn Al-Khatib Hospital	60	35	40	20	155
Total	177	80	127	60	444

The study sample

The sample is chosen randomly in hospitals, as the research sample consisted of (180), by (80) doctors (100) from Baghdad hospitals (Ibn Al-Khatib Hospital,

Medical City Hospital, Imam Ali Hospital) a nurse, and the table below represents the distribution of the sample.

Table 2. Show distribution of the sample members, doctors and nurses, according to gender

Hospital Name	Doctors		Nurses		Total
	Males	Females	Males	Females	
Ibn Al-Khatib Hospital	18	10	20	12	60
Medical City Hospital	17	10	22	12	61
Imam Ali (Peace be upon him) Hospital	15	10	22	12	59
Total	50	30	64	36	180

Psychological burnout tool

In her study, the researcher relied on the Maslach scale of psychological exhaustion developed by Maslach and her colleagues Susan Jackson 1986 (Maslach & Jackson, 1981) to measure psychological exhaustion among workers in the field of human and social services. An individual toward his or her profession, which measures three main dimensions of psychological exhaustion, are:

- Emotional attrition: It is the one that measures the behaviour of psychological and

occupational stress and emotional tension in an individual as a result of his work.

- Fading feelings: He measures the feelings and indifference of the individual as a result of his work.
- Lack of a sense of personal achievement: it is the one that measures the efficiency and satisfaction of the individual with his work and is divided into the paragraphs of the scale according to each of these dimensions, as shown in Table (3).

Table 3. Shows the distribution of the paragraphs on the Field of psychological exhaustion

Field	Paragraph distribution	Total
Emotional attrition	20 ,16 ,14 ,13 ,8 ,6 ,3 ,2 ,1	9 paragraphs
Feelings sag	22 ,15 ,11 ,5,10	5 paragraphs
Lack of a sense of personal achievement	21 ,19 ,18 ,17 ,12 ,9 ,7 ,4	8 paragraphs
Total		22 paragraphs

As for the alternatives for answering the scale (psychological exhaustion), it is hexagonal, and as

shown in Table (4), which shows the alternative and the degree given to it.

Table 4. Shows the distribution of alternatives to a scale (Maslach & Jackson, 1981) for psychological exhaustion

Alternative	Speak	Talk a few	It occurs	It happens	It	It occurs a	Never
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	daily	times a week	once a week	a few times a month	happens once a month	few times a year	
Degrees	6	5	4	3	2	1	0

That is, the highest score attained by the respondent is 132, with an average of 66.

Validity scale

The original scale has a good level of honesty, as indications of the validity of the scale appeared through its ability to distinguish between different categories of workers who suffer from low psychological exhaustion through various studies such as the study.

Face validity

As the best means to verify the validity of the paragraphs is that many specialists from psychology and psychological sciences estimate their validity in measuring what they were ostensible. Thus, a consensus is obtained between the judgments 'estimates of the degree of test measurement for the trait. On their judgment,⁶⁰ as the scale was presented to a group of specialists in psychological sciences after defining psychological exhaustion according to a definition in Maslach and each of the three dimensions, and as their names are mentioned in Appendix (2) where the (10) arbitrators were asked. Experts to judge the validity of the paragraphs to measure the psychological exhaustion of Iraqi doctors and nurses. The researcher adopted 80% agreement on the validity of the paragraphs, and all the paragraphs were valid for measurement.

Stability

It is the consistency in the individual's response to the paragraphs in the sense that the tool gives similar results if it is re-applied more than once in similar circumstances. Accurate and reliable measurement. The researcher used two methods to extract the constant:⁶¹

A- Halftone segmentation: This is more used because through it the difficulties encountered in other methods are overcome. In this method, the scale is divided into two halves. To extract the stability in this way, all the analysis forms amounting to (180) were used, as the value of the Pearson correlation coefficient between the two halves of the scale was (0.547), and the degree

extracted was for one half of the scale. The scale reached 0.71, which is a good reliability coefficient compared to the previous study.

B-Method Crombachs' Alpha: This method proposed by Cronbach in 1951 to estimate the stability of the internal consistency of the test depends on the consistency of the individual's performance on the scale paragraphs and refers to the degree to which all the paragraphs of the scale participate in measuring a specific characteristic of the individual and the extent to which the paragraphs are related to each other within the scale As well as the correlation of each paragraph with the test completely. The Alpha Cronbach equation was used to extract the stability in this way, and the statistical analysis was subjected to the Alpha Cronbach equation, where the scale correlation coefficient reached (0.78), which is a good stability coefficient when compared to the previous study.

Results

This chapter includes a detailed presentation of the findings of the research after applying the tools of the study in addition to the interpretation and discussion of these results based on previous studies and the theoretical framework adopted and coming up according to those results with a set of recommendations and proposals:

First, The psychological exhaustion of doctors and nurses in Baghdad's private hospitals for receiving patients from our staff

The results of the research show that the arithmetic means of the scores of the individuals of the research sample on the psychological exhaustion scale was (73,86) and a standard deviation of (7.74), while the hypothetical average was (66). By using the (t)-test for one sample, it became clear that the calculated (t) value amounted to (13.62). It is higher than the tabular (t) value of (1.96), and this result is a statistically significant function at the level of significance (0.05) and with the degree of freedom (179), as shown in Table (5).

Table 5. Show (t)-test results of a sample and a community for psychological exhaustion of doctors and nurses

Sample	Mean	SD	Average	(t) value		Indication level
				Calculated	Tabulated	
180	73,86	7,74	66	13,62	1,96	0,05

From this it was found that the average psychological exhaustion of doctors and nurses is higher than the assumed average, which indicates that the sample of doctors and nurses in private hospitals that receive Corona patients suffer from psychological exhaustion and this result can be explained according to the theory that individuals suffer from psychological exhaustion in social professions that are In direct contact with patients, they suffer from psychological pressure, ⁶²as they treat people with corona and the pressure of the possibility of infection, whether for the doctor or for the disease, which is a dangerous epidemic that may lead to death in some cases, and this represents high pressure on the sample, which creates emotional stress for them that may lead to a dulling of feelings, which in turn leads to To poor personal achievement, which is sometimes linked to the lack of treatment capabilities of medicine or absorptive capacity in terms of hospitals and the number of beds.⁶³

The doctors and patients, as they are called in the White Army in Iraqi hospitals, in general, have suffered from great pressure over many decades to face the attrition that spanned many decades of wars and the deaths and injuries they generated, but despite this, most of them were distinguished by emotional

Table 6. Shows the results of (t) test for differences between the doctors and nurses in psychological exhaustion

Occupation	Number	Mean	SD	(t)Calculated	(t)Tabulated
Doctor	80	73,800	7,649	- 0,103	1,96
Nurse	100	73,9200	7,85		

From the foregoing comparison of the next degree calculated with the table, it is evident that there are no statistically significant differences in psychological exhaustion among doctors and nurses. They are equal in facing this epidemic and they participate in the treatment of patients (doctors, specialists, residents and nurses) as they are all in direct contact with patients, thus they are facing the same danger, whether, in contract or infection, the infected and treated are all under the same conditions that the virus spreads in the same place, so there are no differences in psychological exhaustion between them.

And also the nature of their profession, which is linked to feelings of empathy and positive feelings, being a health care profession that has a psychological, social, ethical and religious commitment (and whoever lives it is as if it revives all people), which means the maximum investment of energy without limits and in it there is altruism and excessive interest in patients. The

Table 7. Show t-test results for the difference between males and females in psychological exhaustion

competence and succeeded in saving many lives. As for the current circumstance, it has its peculiarity, it is facing an epidemic (a small enemy who does not see) and has no treatment that led to the death of many Iraqi specialists known for its rapid transmission, as well as a high probability of their injury or transmission to their families is pressure and psychological burden born to them with psychological exhaustion.⁶⁴

This result was in agreement with the Maslach & Jackson study, 1981, the Ziegler study, the Arther & Houerer study, 2018, the Abdi study, 2012, and the Maarouf study, 2017.

Second, The significance of the statistical differences in psychological exhaustion between doctors and nurses

The results of the research show the (t)-test for two independent samples that the average of doctors on the scale of psychological exhaustion was (73,800) and with a standard deviation of (7.64), while the level of nurses reached (73,920) and with a standard deviation of (7.85). The calculated figure (- 0.105), which is not statistically significant, after comparing it with the tables (1.96) for a degree of freedom (178) and the level of significance (0.05) shown in the table (6).

specialist, resident, or nurse is one of the stressful professions because it has the possibility of exposure to injuries and also the workload is for the doctor and the nurse alike .⁶⁵ Italy and almost all European countries no longer accommodate patients in unprecedented numbers, and they were forced to place patients in parks, corridors and streets.

And the significance of the statistical differences in the psychological exhaustion of doctors and nurses, according to the gender variable as well as the marital status (married - single). The results of the research show the t-test for two independent samples. The mean of the males in the sample was (73.09) with a standard deviation of (7.39), while the mean of the females was (75.01) with a standard deviation of (8.35). The calculated (t), which is (1.041), is not statistically significant after comparing it to the tabular (1.96) at a degree of freedom (178) and a level of significance (0.05), as shown in Table (7).

Gender	Number	Mean	SD	(t)Calculated	(t)Tabulated
Males	120	73,09	7,39	-1,041	1,96
Female	60	75,01	8,35		

This result was consistent with the theoretical framework, so there is no relationship between psychological exhaustion and gender, there are no differences between males and females in the medical profession in psychological exhaustion, but there are differences that males have a weak sense of achievement than females as well as their work is similar and there is no A difference between the work of a doctor and a female doctor or a nurse and a nurse. Thus, this mobilization of capabilities requires the solidarity of all cadres to compensate for the lack of capabilities and specialized cadres, which contributed to the distribution of pressure on all medical personnel,

Table 8. Show t-test results for the differences between married and unmarried people in psychological exhaustion

Social status	Number	Mean	SD	(t)Calculated	(t)Tabulated
Married	91	73,3	7,51	0,97	1,96
Not married	89	74,43	7,97		

It is evident from the above that by comparing the extracted (t) value with the table, there are no differences between married and unmarried people in psychological exhaustion - the social status does not affect psychological exhaustion, and this result was in agreement with the literature that confirmed that there is no relationship to demographic variables with psychological exhaustion, so the doctor and the nurse, whether married or unmarried, is The same source of stress that he suffers from is the possibility of infection with it or a lack of acquaintances or relatives, children and relatives, and here doctors and nurses must stay and overnight and deal with wearing protective clothing, mask and muzzle for long periods.

Table 9. Show the average deviation of the sample members according to the testimony

Certificate	Number	Mean	SD
Bachelor	71	74,39	7,84
Master	47	73,29	7,53
Junior high	62	73,69	7,87

Table 10. Show the analysis of variance demonstrates the differences in psychological burnout according to the testimony variable

Source of variation	Sum of squares	df	Ms	F
Between totals	36,83	2	18,418	0,305
Inside totals	10697,9	177	60,440	
Total	10734.8	179		

even non-medical personnel and workers in the health sector (such as ambulance drivers and quarantine teams).

This result was consistent with a study, and this result differed,⁶⁶ which concluded that females are more exhausted than males. As for marital status, the average of married doctors and nurses reached (73.30) with a standard deviation of (7.51), while the average for unmarried people was (74.43) with a standard deviation of (7.77). The calculated (t), which amounts to (0.97), is statistically significant after comparing it to the table (1.69) at a degree of freedom (178) and a level of significance (0.05), as shown in Table (8).

This result was different from the study Maslach & Jackson, 1982, which concluded that unmarried and divorced people are more exhausted than married people. As for the significance of the statistical differences according to the certificate variable. Analysis of variance was used to extract the differences in psychological exhaustion according to the certificate variable (graduate degree, bachelor's, junior high). The calculated final value of the certificate variable was (0,305) degrees, and by comparing it with the tabular value, it was found to be non-significant. As it was explained in Table (9) and (10).

As for the differences according to the testimony, the analysis of the discrepancy shows that there are no differences between higher degrees and holders of a bachelor's degree and middle school, what contributed to the increase in psychological exhaustion, psychological pressure from infection and virus transmission, as well as long working hours, night work and administrative orders, both in terms of weak production capabilities Whether sterilizers, oxygen, routine, health protocols, diagnostic and isolation method, and opposes administrative and health instructions. All are factors that contribute to the psychological exhaustion of medical staff (doctors and nurses), and there is no relationship to testimony with, and this result was identical to the study,⁶⁷ which concluded that there were no differences in psychological exhaustion according to the type of study.

RECOMMENDATIONS

1. Taking into consideration the actual working hours, especially the night time, to reduce the workload.
2. The Iraqi Ministry of Health, through a schedule, circulates doctors to hospitals and special departments that receive Corona patients.
3. Providing the community support needed by the Iraqi medical staff.
4. Focusing on providing medical supplies to medical personnel, including (masks, protective clothing, and sterilizers).

THE PROPOSALS

1. Conducting a similar study on other Iraqi medical personnel, such as pharmacists and paramedics.
2. Conducting a similar study on other segments that contribute to the Corona crisis cell, such as policemen and security men who are in direct contact with various individuals.
3. Study the psychological exhaustion of the Iraqi medical staff and its relationship to other variables (personality traits, psychological and physical health, role conflict, family compatibility, and marital compatibility).

REFERENCES

1. Labid. My. (2015): Compassion fatigue, the wellness of care providers and the quality care. Portland State University. [Http://pdxscholar.library.pdx.edu/honourseses](http://pdxscholar.library.pdx.edu/honourseses).

2. Abu Husayn, Muhammad Farah Allah Muslim, (2010), Psychological stress among nurses working in the government field and its relationship to self-efficacy, Master Thesis, Islamic University, Gaza, College of Education, Department of Psychology [HTTP / www. Libray. Ingaza.edu.ps](http://www.Libray.ingaza.edu.ps), 91745.
3. Maslach, C (1978), The Clientrole in Staff burnout, Journal of social issues 34(4) 111-124.
4. Maryam, Rajaa, (2008), Sources of psychological and professional stress among women working in the profession of nursing, Journal, Damascus University, Volume 24, Number Two, College of Education, University of Damascus.
5. Ismail, Razan (2015), Sources of occupational stress among a sample of male and female nurses, a field study at Al-Assad University Hospital in Lattakia, Tishreen University Journal for Research and Scientific Studies, Volume 37.
6. Othman, Nawal Ahmad (2008), Psychological Burnout and Its Relation to Some Character Traits of Female Workers with Special Needs, Umm Al-Qura University, Kingdom of Saudi Arabia.
7. Taylor, Shelley, (2008), Psychological Health Science, Translated by: Wissam Darwish Break and Fawzi Shaker Dawood, Al-Hamid House for Publishing and Distribution, First Edition, Amman - Jordan.
8. Mithoubi Fawzi (2013), Psychological Burnout among Nurses, University of Blida. Journal of Human and Social Sciences, a special issue, the International Forum on Suffering at Work, the organizational climate prevailing within the health institution - the psychological burnout among nurses, the University of Blida.
9. Jellouli, Nassima, Shtouhi (2003), Occupational attrition among nurses and the strategies of resistance used, unpublished master's thesis, Social Psychology, Algeria.
10. Al-Qarni, Ali, (2003), Media and Psychological Burnout, King Saud University Journal, Saudi Arabia, Volume 16, Literature 153-195.
11. Kotula, K,R(2015) Compassion Fatigue critical care nur Sing and development of an education Module , Master thesis, North Dakata State University , Fargo, North Dakota.

12. Siddiq Kamal Muhammad (2011), Social Propaganda for the Elderly in Iraq, Field Study at the Aged Care Home in Baghdad, Master Thesis, College of Arts, Sociology, University of Baghdad.
13. Yarkandi, Hanim Hamed, (1993), The level of teacher stress and its relationship to psychological reassurance and some demographic variables, The Egyptian Journal of Psychological Studies, pp. 28-44.
14. Abdullah, Mohamed Adel (1994), Some personality traits, gender, duration of experience and their impact on the degree of psychological burnout for teachers, Journal of Psychological Studies, Egyptian Statistical Association, Volume 5, Number 2.
15. Askar, Ali and Jamea, Hassan and Al-Ansari, Muhammad (1986) The extent to which secondary school teachers in Kuwait were exposed to increased psychological burnout, The Educational Journal, College of Education, Kuwait University, Issue Ten, Volume Three, pp. 59-43.
16. Al-Bahas, Syed Ahmed (2002) Psychological exhaustion and its relationship to psychological toughness among special education teachers, Journal of Education Mechanism, Tanta University.
17. Maslach.C, & Jackson (1984a) Burnout in Organizational Settings Applied social Psychology Annual, 5, 133-153.
18. Maarouf, Khadija (2017), Psychological Burnout among Surgeons, Unpublished Master Thesis, Faculty of Humanities and Social Sciences, Department of Psychology, Al-Arabi University, Algeria.
19. Moussaoui, Hana (2018), Psychological Burnout and its Relation to Physicians' Dimensions of Mental Health, Lamai University, College of Social Sciences and Human Sciences, Department of Psychology.
20. Maslach, c8 & Jockson, S.E (1984b) Patterus of burnout among anational sannp;e of public contact workers Journal of Heaht and Human Resources Adm inistration , 7(2) 189-212.
21. Norendike, Robert and Hagen, Elizabeth (1989), Measurement and Evaluation in Psychology and Education, Amman, translated by: Abdullah Zaid Al-Kilani, and Abdel-Rahman Adas, Jordan Book Center.
22. Ahmad, Hamad Awad Bani Ahmad (2007), Psychological Burnout and Organizational Climate in Schools, Al-Hamid House for Publishing and Distribution, Amman - Jordan.
23. Badran, Mona Muhammad Ali (1997) Psychological burnout among secondary school teachers and its relationship to some variables, a field study, an unpublished master's thesis, Institute of Educational Studies and Research, Cairo University.
24. Al-Badawi, Ahmad Zaki (1982), Dictionary of Social Sciences Terms, Beirut, Lebanon Library.
25. Jabr, Niran Yusef (2010), Social Pain and Its Relation to Psychological Endurance among Nurses in Baghdad Hospitals, Unpublished Master Thesis, College of Education, Al-Mustansiriya University.
26. Hatim, Wahiba (2005), Occupational Burnout among Urologists, Unpublished Master Thesis, Clinical Psychology, University of Algiers.
27. Al-Hafi, Sanaa (2013), Nurses are the angels of mercy between a diverted view and professional duty.
28. Hajjaj, Khalil Ja'far (), Factors Affecting the Psychological Burnout among Nurses in Shifa Hospital in the Gaza Strip, Journal of Al-Quds Open University for Research Studies, Ghazwa, Issue 31, Part 2.
29. Khaza'leh, Abdel Aziz (1997), Job satisfaction for male and female nurses working in the Ministry of Health in Jordan, Center for Future Studies, Assiut University - Egypt.
30. Rabi', Muhammad Shehata (2010), Industrial and Professional Psychology, Dar Al-Masirah for Publishing and Distribution, 1st Edition, Amman-Jordan.
31. Al-Rahal, Kamal (2016), Iraq nurse, a nurse in shackles.
32. Al-Zuhdani, Nawal Bint Othman (2008) Psychological burnout and its relationship to some personality traits among female workers with special needs, Master Thesis, Department of Psychology, Umm Al-Qura University, Kingdom of Saudi Arabia. [http // www domasuiniuniversity edu / stories / 475000 pdf](http://www.domasuiniuniversity.edu/stories/475000pdf)
33. Al-Ziyoud, Nader (2002) The Psychological Burnout Reality of the Educational Counselor in Zarqa Governorate in Jordan, Journal of Educational Sciences, College of Education, Qatar, Issue 1, 197-222.
34. Choucair, Zainab Muhammad (2007), Burnout Psychometric, Dar Al-Nahda Arab Publishing.

35. Al-Shammari, Faten Ghayeb (2017), Stress of compassion and its relationship to the meaning of life, unpublished MA thesis, Department of Psychology, College of Arts, Al-Mustansiriya University.
36. Abd al-Rahman, Saad (2008), Psychometrics, Theory and Practice, Egypt, 5th Edition, Gift of the Nile for Publishing and Distribution.
37. Abdi, Ibtisam (2014), Psychological Burnout among Nurses and Night Work, Master Thesis in Psychology of Work and Organization, Al-Arabi University / Algeria Ben Mahidi, College of Humanities and Social Sciences, Department of Social Sciences, Psychology.
38. Al-Azzawi, Rahim Younis, 2007, Measurement and Evaluation in the Teaching Process, Amman, 1st Edition, Dijlah Publishing and Printing House.
39. Omar, Mahmoud Ahmad, Fakhro, Hessa, Abdul-Rahman Al-Subaie, Turki, Amna Abdullah (2012) Psychological and Educational Measurement, Amman, Dar Al-Masirah for Publishing and Distribution, i 1.
40. Awad, Abbas Mahmoud, (1998), Psychometric evaluation between theory and practice, Alexandria, University Knowledge House.
41. 2Karaja, Abdul Qadir (1997), Measurement and Evaluation in Psychology, Amman, 1st Edition, Bazurdi Publishing House.
42. Kamal, Downey, Al-Kilani, Anmar, Alyan Khalil (1986), levels of psychological burnout among government schools teachers in Jordan, The Education Journal, 5 (19), pp. 253-273.
43. Muhammad, Ali Odeh (2012), Research Methods in Education and Psychology, Baghdad, Adnan Library for Printing and Publishing.
44. Makhoulouf, Souad (2012), Supplication and its relationship to the level of psychological burnout of the surgeon, University of Constantine.
45. Murad, My Salvation (2014) Psychological Burnout and its Relationship to Professional Jewelry, University of Constantinople.
46. Al-Mashat, Hoda Abd al-Rahman, (2011) The concept of self and its relationship to psychological combustion among a sample of secondary school teachers in Jeddah Governorate, Journal of Arab Studies in Education and Psychology, Volume 5 Number 1.
47. Al-Mashat, Hoda Abdel-Rahman (2011), Self-concept and its relationship to psychological combustion in a sample of secondary school teachers in Jeddah Governorate, Journal of Arab Studies for Education and Psychology, Volume 5, Number 1.
48. Arther, C (2018) Physician Wellness and Burnout FSMB.
49. Chace, M.M, (2005) Emregency department nurses lived experience with compassisoh fatigue Masters Thesis, University state florida Talla hassee, Rlorida, lib-ir@edu.
50. Cherhiss, C (1995) Beyond Burnout, Newyork: Routledge
51. Chernis, C (1980) Professional Burnout in Human Service Organizations, New York, Praeger.
52. Ebel, R(1972) : Essential of Educational measurement Engle Woodcliff's, New Jersey Prentice-Hall.
53. France et le Languedoc Roussillon, These de doctorat enmedecine, Universite Pierr et marine curie (franca).
54. Lazaras, R.S 1993: From Psychological Stress to the emotious : History of Changing out books and Rev, Psychol.
55. Lazarus, R.S & Folkman, S(1984) : Stress appraisal and Coping, New Yotk: Springer.
56. Marrina, T.Guid To Nursing Management. Toronto: Mosby (1984) ,555.
57. Maslach & Jakson (1981), The measurement of experienced burnout Journal of Occupational behavior Vol.2, pp.299-311.
58. Maslach C, Leiler M (2009) Six areas of work life, Amodel of the organizational context of burnout, Journal of Heath and Human Resoureces Administration 21 : 472-489.
59. Maslach, C,(1978) Burned-out, Human Behavior 5,16-22.
60. Maslach, C,Schaufel : BW. & Leiter P,M (2001) Job Burmout / Annual Review of Psychology, 52.
61. Mastach C.Leiterm Mp, (1997) : The Truth about Burnout, San Francisce, CA Jossey-Bass.
62. Peter Bugel, avril, (2005) Burnot, Sante Conjuguee N 122.
63. Ruiller ,c 2012, Lecaractere-de emotionnel Des relations de Soutien Sociala Ihopital
64. Taris T.W Schaufe 1,W,B Shreurs P.j 1999 : Burnout Inverntory- General Survey : a tow-Sample. Examination of its Factor Structure and correlates, In worka and Streso-vol ,132.

65. Taris, T.W Schufel,W,B Shreurs P.J (1999) Burnout Inventory Manual , 3rd ed, Consulting Psychologists Press Palo Alto, CA USA,1996.
66. Thevent , Marie (2011) analyse du burnout chez les in tèmes de médecine générale Sarla base d'une étude comparative entre les 11-de.
67. Wiertz, Ruth (2012)_Psychiatres et burnout ? étudier de la Prévalence du syndrome d'épuisement Professionnel auprès des-Psychiatres hospitaliers du nord pour l'obtention du titre de doctorat en médecine, université de Lille (France).