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Examining job satisfaction burnout and reality shock amongst newly graduated nurses

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Abstract

This study has been conducted on 347 nurses with a maximum of two years of professional experience working at Ministry of Health Training and Research hospitals in Istanbul. This study aimed to investigate job satisfaction, burnout and reality shock amongst newly graduated nurses. Data has been collected using questionnaire including socio-demographic characteristics of nurses, reality shock and affecting factors, Minnesota Occupational Satisfaction Scale and the Maslach Burnout Inventory. It has been found that 78,2% of nurses perceive the early periods of their career as difficult, 72,9% report that their job expectations are not met and therefore 52,2% stated that they do not plan to choose this profession again, whereas 42,4% think of quitting their job after the first two months of employment. In conclusion nursing schools and hospital administrations should give place to organizational and administrative regulation to make nurses' transition to the profession more straightforward.

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1. Introduction

Transition can be defined as the process of adapting to a new role and is experienced by newly graduated nurses (2). The transition process is entitled as reality shock. Reality shock is a term for describing the reaction of an individual who has received education in the field and has just started working (21).

Regarding the process of transition, reality shock is affected by the organizational arrangements in institutions and the education in the field. Institutions prepare orientation programs in order to achieve the organizational socialization of newly graduated nurses. Another factor that affects the newly graduated nurses' perceptions on the transition process is nursing education (13).

Many researchers in Turkey conducted studies on the quality of undergraduate nursing education and reported that students do not find the undergraduate education programs sufficient (13). In addition to students' negative opinions about undergraduate programs, the findings of Komurcu et al.'s study (1999) indicate another important problem is that students do not feel ready to work as nurses after graduation (14).

If the reality shock experienced by newly graduated nurse, is not resolved, the tension and stress resulting from this situation leads to job dissatisfaction, job changes and quitting jobs in newly graduated nurses (7, 10, 21).

This study aims to determine the level of job satisfaction and burnout in newly graduated nurses and the effects

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of nursing education and administrative arrangements at the workplace on the reality shock experienced by nurses. It has been assumed that the results of this study would guide nursing education programs and hospital administrations.

2. Method

This is a descriptive and analytical study. The study has been conducted in the training and research hospitals in Istanbul, which are affiliated to the Ministry of Health. The universe of the study included 389 graduate nurses who worked at those hospitals, had a minimum work experience of two months and a maximum experience of two years. Although it has been planned to recruit 100% of the universe, 347 nurses (89% of the universe) participated in the study.

Data were gathered with the Minnesota Job Satisfaction Questionnaire, Maslach Burnout Inventory and the questionnaire form. The purpose of the study was explained to the participants and the questionnaires were given to the nurses in sealed envelopes.

A written permission was received from the Istanbul Provincial Health Directorate. Ethical permissions were received from the Marmara University, School of Health Sciences, and Commission of Preliminary Evaluation for Clinical Research. Finally, written consent was obtained from the participants.

The Statistical Package for Social Sciences (SPSS) for Windows 16.0 was used for data analyses. Results were interpreted according the criterion of 0,05 level of significance.

3. Results

The majority of nurses was women, single and had a bachelor's degree. The mean age of the participants was 24,05 years. Among the newly graduated nurses, 53,3% worked at specialized units.

Regarding the nurses' evaluations on their undergraduate education, it has been found that 49,3% of the participants found clinical practice insufficient whereas 38% thought that the theoretical knowledge they gained was insufficient for nursing practice. Among the nurses, 23,1% completed internship and 37,5% of nurses who completed their internship found this practice insufficient.

It has been found that 85,6% of nurses received an orientation training for 4,18 days in average and 42,8% of these nurses stated that the orientation training did not meet their needs.

It has been determined that approximately one-third of newly graduated nurses (32%) worked under the supervision of a consultant nurse and 47,7% of them found the duration of supervision insufficient, stating that they would like to be supervised for a minimum of six months.

Among the participants, 78,2% found the initial stages of their career difficult. In addition, 72,9% of nurses stated that their vocational expectations were not met and therefore 52,2% reported that they do not plan to choose the nursing profession again. It has been found that 42,4% of nurses considered quitting their job after the first two months of employment.

Among the nurses, 72,9% thought that increasing vocational practice in education programs would provide a solution for reality shock and 78,7% recommended that working in a unit of their choice would provide a solution in the institutional context.

It has been determined that nurses who did not choose this profession willingly, is dissatisfied with the institution they work at, perceive the vocational transition "very difficult", and whose vocational expectations are unmet exhibit low levels job satisfaction, high levels of burnout and highly attribute their reality shock to elements in the institutions they work at (Table 1). It has been shown that nurses who have higher levels of job satisfaction tend to evaluate the institution's and their university education's effect on reality shock as low, whereas nurses with higher levels of emotional burnout tend to evaluate the institution's effect on reality shock as high (Table 2).

Tablo1: Status of choosing nursing willingly, vocational expectations, satisfaction with the institution, and evaluations on transition and comparison of job satisfaction, burnout and reality shock (N:347)

		n	Job satisfaction	Emotional exhaustion	Depersonalization	Personal accomplishment	The school's effect on reality shock	The hospital's effect on reality shock
Status of choosing the profession willingly	Yes	200	3.21±0.49	1.85±0.67	1.34±0.70	2.49±0.45	5.70±2.27	6.03±2.24
	No	147	2.88±0.46	2.25±0.67	1.34±0.59	2.42±0.52	5.88±2.06	6.52±2.41
			p^c=0.0001	**p^c=0.0001**	p^d=0.853	p^d=0.186	p^d = 0.675	**p^d = 0.043**
Status of meeting vocational expectations	Yes	94	3.44±0.46	1.59± 0.62	1.24±0.60	2.58±0.44	4.82±2.02	5.18±1.86
	No	253	2.93±0.45	2.18±0.66	1.38±0.67	2.42±0.49	6.13±2.14	6.63±2.36
			p^c=0.0001	**p^c=0.0001**	p^d=0.101	**p^d=0.007**	**p^d = 0.0001**	**p^d = 0.0001**
Satisfaction with the institution	Yes	222	3.25±0.47	1.82±0.64	1.20±0.61	2.49±0.45	5.42±2.18	5.84±1.96
	No	125	2.25±0.41	2.38±0.66	1.59±0.67	2.41±0.52	6.40±2.05	6.94±2.73
			p^c=0.0001	**p^c=0.0001**	**p^d=0.0001**	**p^d=0.047**	**p^d = 0.0001**	**p^d = 0.0001**
Evaluating the transition process	Very difficult	38	2.81±0.45	2.54±0.72	1.45±0.77	2.48±0.55	7.63±2.12	8.63±1.55
	Difficult	263	3.07±0.49	1.99±0.63	1.31±0.62	2.44±0.46	5.89±1.90	6.28±2.09
	Easy	31	3.35±0.50	1.77±0.85	1.58±0.75	2.55±0.45	2.87±1.08	3.45±1.33
	Very easy	15	3.40±0.68	1.25±1.02	0.56±0.09	2.77±0.89	3.60±3.28	3.00±2.73
			p^a=0.0001	**p^a=0.0001**	**p^b=0.007**	p^b=0.623	**p^b=0.0001**	**p^b =0,0001**

Tablo 2: Comparison of the Effects of Job Satisfaction, Burnout, University Education, and the Institution on Reality Shock (N:347)

		The school's effect on reality shock	The hospital's effect on reality shock
Job satisfaction	R	-.135	-.158
	P	**0.012**	**0.003**
	N	347	347
Emotional exhaustion	R	0,024	.275
	P	0,651	**0.0001**
	N	347	347
Depersonalization	R	-0.024	0.102
	P	0.660	0.057
	N	347	347
Personal accomplishment	R	-0.098	-.112
	P	0.069	**0.037**
	N	347	347

4. Discussion

This study recruited newly graduated nurses who have minimum six months and maximum two years work experience. According to the findings, 53,3% of nurses worked at specialized units. Many studies also show that newly graduated nurses tend to work at specialized units (6, 8, 12, 18). Studies that support our findings indicate that hospital administrators assign newly graduated nurses to specialized units without evaluating their demand and adaptation levels. It can be said that during the transition process, the fear of making a mistake would be higher in intensive care units due to the sudden increase of work load. In a study by Delaney et al., it has been reported that newly graduated nurses experience stress deriving from increased responsibilities, patient load, learning new skills, communicating with doctors, and fear of hurting a patient; which may lead to anxiety and tension in newly graduated nurses (5). Considering these findings, we suggest that hospital administrators should gradually increase the work load of nurses by initially placing them in services with a lower work load and then rotating them to other services with more work load, such as intensive care and the emergency ward.

Among the participants, 49,3% found clinical practice insufficient whereas 38% thought that the theoretical knowledge they gained was insufficient for nursing practice. In a study by Khorshid et al. (2007), which aimed to evaluate nurses' undergraduate education, it has been reported that nurses perceive their undergraduate education as "below average" (13). Dag (2006) has also shown that 47,1% of nurses perceive their undergraduate education as

insufficient (4). In a study by Gumral and Cosar (2006), it has been reported that 32,2% of nurses find their intern training insufficient (11). In addition, Eryilmaz and Gencalp (2000) have shown that 16,1% of nurses find the duration of internship insufficient (9). In Turkey, standardization regarding internship in nursing education is not available. Therefore, all nurses do not receive intern training and intern practice differ across universities. Our findings, which are similar to those of other studies, indicate that the curricula used in nursing education should be revised.

In our study, participants reported that the orientation training they received did not meet their needs and had an insufficient duration. Thomka (2001) suggested that an ideal orientation program for newly graduated nurses should be 6-10 weeks long (17). Ileri (2007) reported that only 8,6% of newly graduated nurses thought that the orientation training met their needs (12). Casey et al. (2004) stress that newly graduated people should be supported by orientation and continuous education programs in order to facilitate the transition process (3). Our findings and other research results indicate that nurses have high expectations from orientation programs. Orientation programs may help decreasing the reality shock if they are re-evaluated in means of content and duration and planned in a way that would facilitate the transition process of newly graduated nurses.

More than half of the participants whose vocational expectations were not met stated that they do not think of choosing the nursing profession again. Additionally, almost half of the nurses reported that they considered quitting their jobs after the initial two months of employment. In a study by Beecroft et al. (2001), it has been shown that the personnel rotation speed among newly graduated nurses is highest during the first year of employment and the rate of job quitting in this population is 35-60% (1). Scott (2005) also reported that 55% of newly graduated nurses changed jobs (15). In addition, Ileri (2007) has shown that 65,7% of newly graduated nurses thought about quitting their jobs (12). Our findings, which are similar to the results of other studies, indicate high rates of personnel rotation in newly graduated nurses. It can be assumed that unmet expectations affect choosing the same profession again and intending to quit negatively.

In our study, nurses see increased clinical practice during nursing education and working in units of their own choice as solutions for reality shock. In a study by Uzun and Arslan (2007), it has been reported that the majority of newly graduated nurses state that there is a discrepancy between their expectations and that they experienced difficulty in clinical practice. In the same study, the participants recommended that universities should spare more time for clinical practice and that experienced nurses should be more understanding and tolerant (19). Our results stress the importance of cooperation between universities and hospitals as well as institutions' sensitivity regarding the newly graduated nurses' expectations and demands.

In our study, it has been determined that nurses who chose the nursing profession unwillingly, have expectations that are unmet, and are dissatisfied with the institutions they work at exhibited lower levels of job satisfaction and higher level of burnout (Table 1). Similarly, other studies show that people who chose their profession unwillingly experience more burnout (12, 16). Results from other studies support our findings and indicate that people who chose their profession unwillingly have less job satisfaction and higher burnout levels.

Newly graduated nurses who found the transition process "very difficult" have low job satisfaction and high burnout levels (Table 1). Nurses who have higher levels of job satisfaction tend to evaluate the institution's and their university education's effect on reality shock as low, whereas nurses with higher levels of emotional burnout tend to evaluate the institution's effect on reality shock as high (Table 2). These findings indicate that the reality shock affect the levels of job satisfaction and burnout in newly graduated nurses. Winter-Collins and McDaniel (2000) has found a strong relationship between feeling like a part of the institution and job satisfaction in newly graduated nurses (20). According to these findings, it can be presumed that the perception of newly graduated nurses regarding the transition process is a factor that affects job satisfaction and burnout.

5. Conclusion

In order to facilitate the transition process in newly graduated nurses, nursing schools should include intern practice in their curricula, increase the duration of internship in specialized units and amount of clinical practice as well as making arrangements that would provide cooperation between the school and hospitals.

Institution administrators should provide supervision of expert nurses, who can be a guide and a model for newly graduated nurses, for at least six months. In addition, they should gradually increase the work load of nurses by initially placing them in services with a lower work load and then rotating them to other services with more work load, such as intensive care and the emergency ward.

Institutions should re-evaluate the content and duration of orientation programs regarding the needs of newly graduated nurses and provide social support in order to help nurses manage stress and anxiety during the transition process.

Hospital administrators should make arrangements which would increase job satisfaction and decrease burnout by assigning newly graduated nurses to units that they would like to work at and giving them opportunities for vocational development. In addition, periodical feedback should be received from nurses about their transition process.

Quantitative studies which include newly graduated nurses from state and private university hospitals as well as state hospitals should be conducted. In addition, qualitative studies which would help describing difficulties in more detail would be beneficial.

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