

# Relationship quality of nursing work life and burnout among nurses: A systematic review

## Relación calidad de vida laboral de enfermería y burnout entre enfermeras: Una revisión sistemática

Tita Rohita<sup>1ad\*</sup>, Nursalam Nursalam<sup>2b</sup>, Muhammad Hadi<sup>3c</sup>, Ferry Efendi<sup>4b</sup>, Dedeng Nurkholik<sup>5d</sup>,  
Idyatul Hasanah<sup>6e</sup>

### SUMMARY

**Introduction:** Nurses are professionals who are significantly at risk of experiencing burnout due to their high workload and work stress, most of which are caused by long-term patient interactions. One of the causes of burnout is the occurrence of work-family conflicts, which will cause a decreased quality of nursing work life. Moreover, this study intends to identify the relationship between the Quality of Nursing Work Life (QNWL) and burnout among nurses.

**Methods:** This study conducted a systematic review using four academic databases (Science Direct, PubMed, Scopus, and ProQuest) with a publication range from 2017 to 2022. Furthermore, the subjects in this study were nurses who worked in hospitals. Therefore, these variables include quality of nursing work life and burnout. The inclusion criteria in the literature study were cross-sectional articles measuring QNWL and burnout among nurses. The guidelines for

reviewing journals used Preferred Reporting Items for Systematic Review and Meta-Analysis (PRISMA).

**Results:** The results of 20 studies exploring QNWL and nurse burnout. Moreover, most reviews of the result showed a significant relationship between QNWL and burnout among nurses. Furthermore, the factors related to QNWL, and burnout include environmental factors including role conflict, workload, lack of social support, pressure from patients, bullying at work, lack of professional development opportunities, alcohol consumption, and level of flexibility in working time while personal factors are gender, age, marital status, personality, expectations, length of work, and having children.

**Conclusion:** There is a relationship between QNWL and burnout among nurses. In addition, nurse burnout needs to be controlled because it can affect QNWL nurses, impacting the quality of nursing care, satisfaction, and performance.

**Keywords:** Burnout, Nurse, Quality of Nursing Work Life.

DOI: <https://doi.org/10.47307/GMC.2022.130.s5.46>

### RESUMEN

ORCID ID: 0000-0003-3715-7960<sup>1</sup>  
ORCID ID: 0000-0002-9052-6983<sup>2</sup>  
ORCID ID: 0000-0002-6721-1190<sup>3</sup>  
ORCID ID: 0000-0001-7988-9196<sup>4</sup>  
ORCID ID: 0000-0002-1605-1860<sup>5</sup>  
ORCID ID: 0000-0002-3277-9392<sup>6</sup>

**Introducción:** Las enfermeras son profesionales que tienen un riesgo significativo de sufrir burnout debido a su alta carga de trabajo y estrés laboral, la mayoría de los cuales son causados por interacciones a largo

<sup>1</sup>Doctor of Nursing Students, Faculty of Nursing, Universitas Airlangga, Surabaya, Indonesia

<sup>2</sup>Faculty of Nursing, Universitas Airlangga, Surabaya, Indonesia

<sup>3</sup>Faculty of Nursing, Universitas Muhammadiyah Jakarta, Jakarta, Indonesia

<sup>4</sup>Faculty of Health Sciences, Universitas Galuh, Ciamis, Indonesia

<sup>5</sup>Department of Nursing, Mataram Institute of Health Science, Mataram, Indonesia

Recibido: 11 de septiembre 2022  
Aceptado: 18 de octubre 2022

\*Corresponding Author: Tita Rohita  
E-mail: rohitatita@gmail.com

*plazo con los pacientes. Una de las causas del burnout es la ocurrencia de conflictos trabajo-familia, lo que provocará una disminución de la calidad de vida laboral de enfermería. Además, este estudio tiene como objetivo identificar la relación entre la Calidad de Vida Laboral de Enfermería (QNWL) y el desgaste profesional de los enfermeros.*

**Métodos:** Este estudio realizó una revisión sistemática utilizando cuatro bases de datos académicas (Science Direct, PubMed, Scopus y ProQuest) con un rango de publicación de 2017 a 2022. Además, los sujetos de este estudio fueron enfermeras que trabajaban en hospitales. Por lo tanto, estas variables incluyen la calidad de vida laboral de enfermería y el desgaste profesional. Los criterios de inclusión en el estudio de la literatura fueron: artículos transversales que miden QNWL y burnout entre enfermeros. Las pautas para la revisión de revistas utilizaron Elementos de informes preferidos para la revisión sistemática y el metaanálisis (PRISMA).

**Resultados:** Los resultados de 20 estudios que exploran QNWL y el agotamiento de las enfermeras. Además, la mayoría de las revisiones de los resultados mostraron una relación significativa entre la QNWL y el agotamiento entre las enfermeras. Además, los factores relacionados con QNWL y el agotamiento incluyen factores ambientales que incluyen conflicto de roles, carga de trabajo, falta de apoyo social, presión de los pacientes, intimidación en el trabajo, falta de oportunidades de desarrollo profesional, consumo de alcohol y nivel de flexibilidad en el tiempo de trabajo, mientras que los factores personales son sexo, edad, estado civil, personalidad, expectativas, tiempo de trabajo y tener hijos.

**Conclusión:** Existe una relación entre QNWL y burnout entre enfermeros. Además, el agotamiento de las enfermeras debe controlarse porque puede afectar a las enfermeras QNWL, afectando la calidad de la atención, la satisfacción y el desempeño de enfermería.

**Palabras clave:** Burnout, enfermera, calidad de vida laboral de enfermería.

## INTRODUCTION

High stress associated with various diseases and the increased workload have led to nurses' high risk of burnout (1). Burnout is a critical condition that affects patient safety and the functioning of healthcare organizations (2). Nurses are professionals who are very at risk of experiencing burnout due to their high workload and work stress, most of which are caused by long-term interactions with patients (3). Burnout causes low job satisfaction and a high turnover rate for nurses (4).

The problem of burnout abroad is a trending issue that shows an increase in health services. In California, 30 % of nurses experience burnout, and 31 % do not experience job satisfaction. Another survey indicated that 85.5 % of female nurses experienced burnout (5). The same research presented that 67.2 % of nurses were lack of satisfaction with the quality of their work life, which impacts burnout (6). Research in Ghana showed that one of the causes of burnout is work-family conflict, which will cause a decrease in female nurses' work-life quality (7). In addition, low QNWL has an essential role in the incidence of burnout (8). QNWL is important for nurses in carrying out their duties and work; a good work-life can positively impact performance (6).

Many researchers have discussed burnout in paediatrics, gynecology, exigency, and nursing principles, and other investigators have reviewed the relationship of burnout to social support. However, no review has been conducted to determine the relationship between QNWL and burnout and the factors associated with QNWL and burnout. Therefore, the review aimed to assess the relationship between QNWL and burnout.

## METHODS

### Study Design

This systematic review follows the guidelines of the Statement of Preferred Reporting Items for Systematic Review and Meta-Analysis (PRISMA). In addition, data has been completed on a journal review using four academic databases (Science Direct, PubMed, Scopus, and ProQuest) with a publication range from 2017 to 2022.

### Inclusion and Exclusion Criteria

The inclusion criteria for this systematic review have been determined using population, intervention, comparison, outcomes, and study design (PICOS). The population in this study were nurses who worked in hospitals. We employed cross-sectional studies examining QNWL and burnout among nurses. The exclusion criteria such as (a) studies that did not examine QNWL and burnout, (b) studies that did not involve

nurses, (c) qualitative studies and review articles because there were no numerical measurements provided of QNWL and burnout, (e) intervention research and (f) publication in a language other than English.

**Search strategy**

This literature search used articles in English from Pubmed, Science Direct, Proquest, and Scopus from 2017 to 2022. The literature search used the keywords “Quality of nursing work life”, “burnout”, and “nurses”. The literature search

found there were 1 296 articles filtered using the keywords above. The articles were then narrowed down and identified based on the PICOS and obtained as many as 109 articles that could be included in the article screening process. At the article screening stage, according to the suitability of the article based on the abstract, there were 74 articles. Then a feasibility selection was carried out based on the whole discussion’s essence and scope in the article. It was found that 32 articles could be made for further selection, namely as many as 20 articles included in the inclusion and 12 articles excluded.

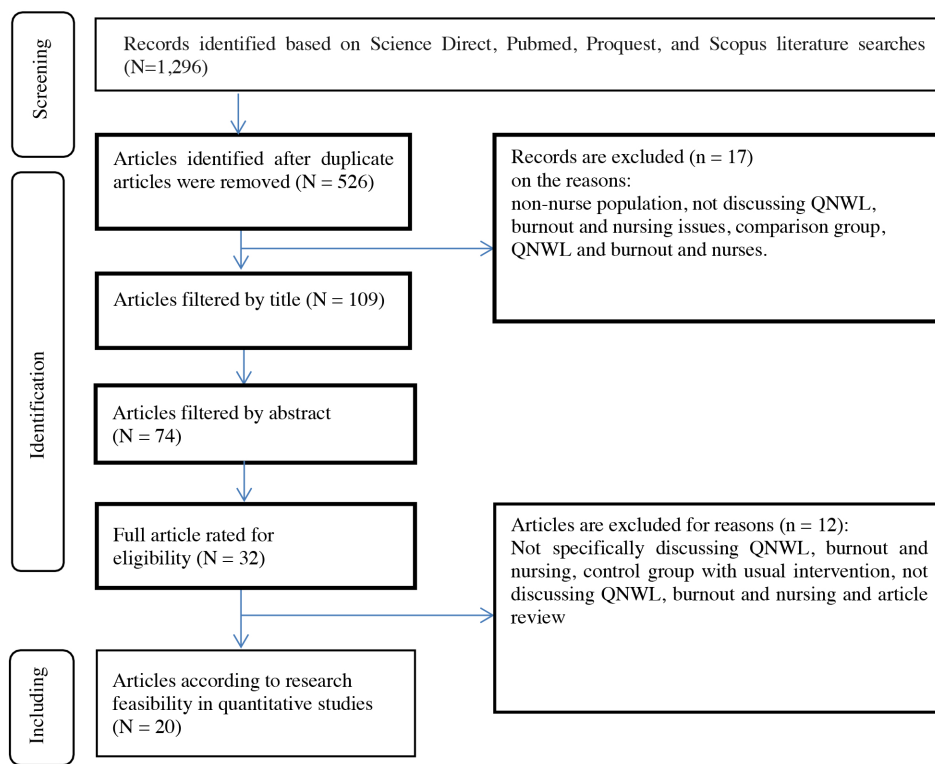


Figure 1. PRISMA Literature Search Flowchart.

**RESULTS**

**Summary of Sociodemographic Characteristics of The Studies**

The sample is oncology nurses (9), operating room nurses (10), psychiatric nurses (11-13), Critical nurses (14), and ICU nurses (15). The studies involved mostly female nurses

(19 studies), married nurses (13 studies), and undergraduate nursing (10 studies).

**Definitions of QNWL and Burnout of Reviewed Studies**

The study found explaining the definition of QNWL is defined as the ability of employees to meet their important personal needs while

Table 1. Summary of Sociodemographic Characteristics of The Studies Reviewed.

Author (year)	Country	Gender	Age	Marital status	Education	Length of work
Alotmi & Elgazzar (2020)	Saudi Arabia	Female (93.5%)	<40 years (60%)	Single (50%)	Bachelor's degree (97.6%)	1-6 years (64.1%)
Casida et al (2019)	United States of America	Female (83%)	43.3 years	Married (62%)	Masters (89%)	5.8 years
Celmeçe & Menekay (2020)	Turkey	Female (80.5%)	-	Married (54%)	-	-
Elias et al (2020)	Cairo	Female (64%)	40 years (53%)	Marry (81%)	Diploma in Nursing (74%)	10 years (51%)
Erkorkmaz et al (2018)	Turkey	Female (87%)	<25 years (69.5%)	Married (57.3%)	Bachelor of Nursing (69.5%),	1-5 years (38.2%)
Ewa Kupewicz (2020)	Northeast Poland	-	-	Marry (76.8%)	Bachelor of Nursing (34.8%)	-
Hong J. et al (2021)	Korea	Female (92.9%)	Average < 30 years	Married 77.9% have children (85%)	-	Average 5.4 years
Huang H. et al (2020)	China	Female (65%)	-	Marry (42%)	Bachelor (60%)	< 3 years (50%)
Jais et al (2021)	Brunei Darus-salam	Female (77.8%),	-Average 20-50 years	Marry (55.6%),	Bachelor (39.7%)	Average 0-10 years
Jarzynkowski et al (2022)	Poland	Female (74.2%)	-Average 23-63 years	Marry (60%)	Nursing secondary school 23.1%.	Average 1.5-43 years old
Nursalam, et al (2018)	Indonesia	Women (61.2%),	36-40 years (33.6%),	-	Bachelor (49.3%)	5-10 years (51.5%)
Paniona et al.(2017)	Greece	Female (49%)	Average < 40 years	Married (46%)	Bachelor (52%)	Average <10 years
Pernarupun, et al (2020)	Malaysia	Female (85%)	31 -41 years (52.8%)	Marry (57.6%)	Bachelor (78.9%)	6-10 years (35.6%)
Raeissi et al. (2019)	Iran	Female (70.4%)	21 and 29 years old (43%)	Marry (63.1%)	Bachelor (57.2%)	5 years (59.9%)
Ruiz-Fernández et al (2020)	Malaysia	Female (75.5%),	Average 23-64 years old	Marry (69.8%)	-	275.36 months
Seo et al (2020)	Seoul Korea	Female (91.4%)	<30 years (51.4%)	Single (71.4%)	Bachelor (78.1%)	2 years (50.5%)
Sok, S et al (2020)	South Korea	Woman (92.2%)	25-30 years (55.7%)	Bachelor (84.3%)	Undergraduate (73.0%)	Average 4.5 years (66.1%)
Kim Y. et al (2019)	Seoul	Female (96.3%)	-	-	-	< 1.9 years (38.3%)
Zahedzhad et al. (2021)	Iran	81.7% Female	Average 1.31-44.747	-	-	Average 8.24 ± 6.76 years
Zeng et al (2021)	China	Female (80.5%)	-Average 19-59 years	Married & have children (80.1%)	-	Average - 1 -40 years.

also achieving organizational goals is important element nurses possess and can affect the quality of health services provided to patients (1,12,16-19).

The concept of burnout was first described as a feeling of failure and exhaustion due to excessive demands (20). Also, it is associated with poorer physical and mental health, including increased irritability, impaired concentration, depression, headaches, insomnia (13), anxiety, and fatigue from being unable to raise children (21). While definition according to Maslach, burnout is a syndrome of emotional exhaustion, depersonalization, and decreased personal achievement (1,4,9-11,14,16,19,20).

### **Factors Associated with QNWL and Burnout**

The study found explaining the factors associated is the most significant variable that harms QNWL and affects burnout as well, namely workload, control, community, rewards, fairness, values, and work environment (1,4,9-12,22,23), is also determined by the interaction between risk factors (e.g., symptoms of depression/ bullying and anxiety) and protective factors (e.g., good social support) (10,13,24). The sociodemographic variables associated with QNWL and Burnout are age, finances, education, gender, marital status, having children, personality, and expectations and shift work (10,14,21,22,25-28).

Another study found that burnout syndrome occurs mainly in healthcare professionals such as doctors and nurses due to their daily contact with human conflict and demands from patients. Nurses who are frequently exposed to uncomfortable patient circumstances might hurt their professional quality of life, resulting in poor patient outcomes, and working during the COVID-19 pandemic (21,29,30).

### **Impact of QNWL and Burnout**

The rise in QNWL will impact nurses' relationships and motivation with all supporting elements in the hospital, including an awareness of the organization's aspirations and demands for environmental and work safety, as well as a pleasant working environment (18). QNWL and

nurse turnover rates are difficult for healthcare organizations due to their consequences and impact on patient care (31).

While the impact of burnout is worsening health, increased absenteeism, negative emotions, conflict, depression, low job satisfaction, criticism, blame, and a lack of empathy for patients, as well as decreased performance and increased interpersonal difficulties, as a result, the service quality is low (10,11,14,16).

### **Relationship of QNWL and Burnout of the Reviewed Studies**

There is a very statistically significant correlation between QNWL and burnout (1,4,10,11,13,21,22,25,27,32). Professional burnout impacts the quality of life in the somatic, social and environmental domains, especially in the older group of nurses (25). Poor QNWL was significantly associated with low levels of empathy, and this relationship was mediated by personal achievement, a sub-dimension of burnout (30).

The provision of high-quality health care is linked to nursing personnel with higher QNWL, which increases psychological empowerment and reduces the effects of burnout (4), increases organizational commitment and job satisfaction, improves the quality of care, increases individual and organizational productivity, and reduce individual and organizational burnout and turnover (33). The unavailability of the QNWL factor is the main cause of poor performance and leaving work (18).

### **Strategies to Improve QNWL and Reduce Burnout**

Hospital managers and nurses must develop strategies to reduce burnout nurses and improve QNWL, such as optimal nursing staff arrangements, offering reasonable financial compensation, and establishing appropriate shift work schedules (34). The nurse's teaching strategies for managing stress and practicing life practices, providing consultation, producing a supportive environment, and providing psychological services areas to limit turnout (14). Provide adequate and fair compensation,

Table 2. Summary of Reviews on QNWL and Burnout Among Nurses.

Study	Design	Sample	Instrument	Results
Alomi & Elgazzar (2020)	Cross-sectional	170 critical care nurses	Professional Quality of Life & MBI Scale	Age, nationality, years of experience, and the desire to change departments are all significantly related to burnout. Finally, burnout and the critical care nurses' quality of life scores significantly correlated.
Casida et al (2019)	Cross-sectional	47 Nurse Practitioners	QOWL scale & Copenhagen scale	Work-related fatigue is negatively associated with low QNWL among practicing nurses
Celimeçe & Menekay (2020)	Cross-sectional	240 healthcare professionals,	Quality of Life Scale & (MBI)	Healthcare personnel caring for COVID-19 patients may experience stress, anxiety, and burnout, which can negatively impact their quality of life.
Elias et al (2020)	Cross-sectional	100 mental nurses	Professional Quality of Life Scale (ProQOL) & MBI	There is a very statistically significant correlation between endurance, fatigue, and QNWL
Erkorkmaz et al (2018)	Cross-sectional	131 nurses	Professional Quality of Life Scale (ProQOL-30 items) & MBI	Nurse fatigue negatively affects nurses' quality of work life / QNWL
Ewa Kupcewicz (2020)	Cross-sectional	1,806 nurses working in 23 hospitals in northeastern Poland	WHOQOL-Bref, Rosenberg Self-Esteem Scale & Copenhagen	Burnout harms the quality of life both socially, somatically, and in the environment, especially for nurses in the elderly group, so a strategy is needed to overcome it, burnout
Jais et al (2021)	Cross-sectional	63 Nurse Oncology	Copenhagen Psychosocial Self-administered QNWL Questionnaire & Maslach	Improved leadership qualities, respect, fairness, and respect can minimize emotional exhaustion among oncology nurses
Jarzynkowski et al. (2022)	Cross-sectional	325 nurses in 7 hospitals in Poland.	(AWS) & Maslach Fatigue syndrome inventory (MBI)	Workplace factors such as workload, control, community, rewards, fairness, and values were found to be predictors of job burnout among those surveyed.
Hong J et al (2021)	Cross-sectional	227 nurses	Quality of Life Scale & (MBI)	Free time and rest are easier for nurses to find in two shifts so that they can increase job satisfaction by increasing the continuity of care
Huang H. et al (2020)	Cross-sectional	52 nurses	Quality of Nursing Work Life Scale (QNWLS) & MBI	Balint group training is an excellent technique to reduce burnout among ICU nurses and increase their performance. QNWL
Nursalim, et al (2018)	Cross-sectional	134 respondent	QNWL Questionnaire, Work Effectiveness (CWEQ-II), Work Activity Scale (JAS), Organizational Relations Scale (ORS), Psychological Empowerment Scale (PES), & MBI	Structural empowerment affects psychological empowerment. Psychological empowerment is influenced by burnout, and burnout affects QNWL
Paniora et al. (2017)	Cross-sectional	100 mental health nurses and nursing assistants working in a psychiatric centre	Professional Quality of Life Scale (ProQOL-30 items) & MBI	Burnout rates of nurses and nursing assistants working in psychiatric centers are low
Permarupan, et al (2020)	Cross-sectional	432 nursing staff from 10 hospitals in the Selangor area	Self-administered QNWL Questionnaire & MBI	Psychological empowerment can reduce the effects of burnout by mediating QNWL

(continue on page S1211).

Table 2. Summary of Reviews on QNWL and Burnout Among Nurses. (continue from page S1210).

Study	Design	Sample	Instrument	Results
Raeissi et al. (2019)	Cross-sectional	22391 nurses in 85 Iranian public hospitals	Professional Quality of Life Scale (ProQOL-30 items) & MBI	Approximately 64.0% of nurses underwent burnout, and their QNWL was at a moderate level. Workplace weariness, hospitalization rate, salary, age, night shift, and patient-nurse ratio are all important aspects of working life quality.
Ruiz-Fernández et al. (2020)	Cross-sectional	1521 nurse	Professional quality of life (ProQOL v. IV)	Burnout affected by shift work. Work-related factors affect QNWL.
Seo et al. (2020)	Cross-sectional	105 healthcare professionals from public hospitals in Seoul	Jefferson of Physician Empathy scale, and one sentence. WLB & MBI subjective question	Personal achievement was considered a potential mediating variable between QNWL and empathy. Conclusions that encourage personal achievement can help reduce burnout among health professionals
Sok, S et al. (2020)	Cross-sectional	115 nurses treat DNR patients in the ICU at a South Korean hospital.	Professional Quality of Life Scale (ProQOL-30 items) & Copenhagen	Burnout positively related to job stress and depression
Kim Y. et al. (2019)	Cross-sectional	324 nurses	ProQoL & MBI	Preventing bullying in the workplace is important for reducing burnout and clinical nurse turnover.
Zahednezhad et al. (2021)	Cross-sectional	202 Iranian nurses employed in three teaching hospitals	QNWL Brooks & Maslach	Endurance and QNWL are protective variables against fatigue in nursing professionals
Zeng et al. (2021)	Cross-sectional	1449 nurse	(WHOQOL-BREF) & (MBI)	Psychiatric nurses who report fatigue have lower QOL. Fatigue is common among psychiatric nurses in China

workplace constitution, safe and healthy working conditions, social integration in the workplace, the social importance of working life, opportunities to grow and be safe, opportunities to use and develop human resources, and work and life span at the workplace (4,34).

Nursing managers can foster a support network of friends and colleagues, as well as a strong teamwork spirit, by adopting policies to improve work-life quality in nursing professionals, such as providing professional development opportunities, work-life balance, managing workload, providing an adequate nursing workforce, providing a safe work environment, and increasing financial compensation. Furthermore, routine screening of nurses for burnout symptoms and the psychological impacts of the COVID-19 pandemic is required to identify nurses who are at risk and intervene quickly (1).

Increase physical activity and mental health (12). Psychological therapies have been reported to help nurses and doctors deal with burnout and other psychological issues., such as Mindfulness-Based Stress Reduction (MBSR), Cognitive Behavior Therapy (CBT), Balint Group (BG), and so on (16). Compared with no intervention, Balint group training results in a greater reduction in burned-t and increased QNWL (16). In addition, coworkers are a valuable resource for decreasing the consequences of psychological stress and reducing the likelihood of nurses switching jobs (35). However, rational, emotional therapy also positively reduces nursing work stress and burnout (36).

**DISCUSSION**

The results of our review show that most studies discuss about QNWL and Burnout, QNWL is important element nurses possess and can affect the quality of health services provided to patients (18). It is related to job satisfaction, turnover rate, and job stress (16). Concept of burnout definition according to Maslach, burnout is a syndrome of emotional exhaustion, depersonalization, and decreased personal achievement (1,4,9,10,14,16,20). Emotional exhaustion is a feeling of physical and mental tiredness that results in the desire

to leave the workplace. Depersonalization is a callous negative cynicism/ignorance in attitude and feelings of hostility towards others (whether clients or coworkers). Finally, the reduced personal achievement is a feeling of not achieving anything of value at work and feeling inadequate and powerless (10,11,19). Most nurses experienced low QNWL and moderate to high burnout rates and explicitly concluded that QNWL was associated with burnout incidence in nurses (1,10).

The factors associated is the most significant variable that harms QNWL and affects burnout as well are Individual factors and environmental factors. Environmental factors include role conflict, workload, lack of social support, control, community, rewards, fairness, values, and the level of flexibility of working time, while personal factors are gender, age, marital status, personality, and expectations (10,18,26). However, the different levels of fatigue across the included studies could be explained by different work environments such as different units/wards, shift work (28), and different workloads (10). Women suffer from higher burnout rates than men. The results of other studies show the level of burnout experienced by female nurses was 89 % (38). This study validated the effect of higher education on job burnout levels and found that more education was most typically related to greater responsibility and, in some cases, larger job breadth (10). Low salaries and heavy workloads will cause nurses to experience work fatigue, decreased motivation, and decreased willingness, and creates a low quality of work life (18). Burnout is too influenced by shift work (39). Shift work has been shown to cause circadian rhythm disturbances. As a result of sleep deprivation, shift workers are likely to experience disruption of daily life, which can lead to chronic illness, higher levels of fatigue harm to job satisfaction and quality of life (28).

There is a very statistically significant correlation between QNWL and burnout. The low QNWL is predominant in nurses' burnout incidence (8). QNWL is important for nurses in carrying out their duties and work; a good work-life can positively impact performance (6). Several other work-related factors cause burnout and require professional attention to reduce burnout effects among nursing staff (40).

Research in Ghana shows that one of the causes of burnout is work-family conflict, which will cause a decrease in QNWL in female nurses (7).

Nurse burnout needs to be controlled because it can affect the nurse's QNWL it has an impact on the quality of nursing care, satisfaction, and performance. Many strategies can be done to increase the QNWL of nurses and reduce burnout, namely by increasing a conducive work environment and support from managers(1,41,42) Increase physical activity and mental health (12). Due to its impact on nurses' health and patient care, a comprehensive intervention program such as salary increases, working hours reduction, and counseling sessions on stress management is needed to improve QNWL and prevent nurse burnout. In addition, social support and managers are also important to prevent nurse burnout and improve QNWL (14). In addition, it is important to control the workload that makes nurses vulnerable to burnout, such as high workload and low satisfaction (10). Improving the work environment remains a solution for hospitals in reducing burnout (43).

Our systematic review shows there is a relationship between QNWL and burnout among nurses. QNWL is important for nurses, a good work-life can have a positive impact on the performance of nurses. In addition, nurse burnout needs to be controlled because it can affect QNWL nurses, impacting the quality of nursing care, satisfaction, and performance. Improving the work environment is a solution for hospitals that want to simultaneously reduce burnout and increase nurse and patient satisfaction in providing safe and high-quality care. So that hospital management needs to make further efforts to improve QNWL and reduce burnout are increasing a conducive work environment and management support and increasing physical activity and mental health, as well as through continuous training in good workload management, increasing nurse control in carrying out tasks and creating a reward system that recognizes nurses' contributions with a caring approach.

## CONCLUSION

Most studies show a positive relationship between QNWL and burnout. Burnout rates



were moderate to high in all included studies and influenced nurses' QNWL. Factors related to QNWL and burnout include environmental factors including role conflict, workload, lack of social support, pressure from patients, bullying at work, lack of professional development opportunities, alcohol consumption, and level of flexibility in working time, while personal factors are gender, age, marital status, personality, expectations, length of work, and having children. Some strategies that can be done to increase the QNWL of nurses and reduce burnout are increasing a conducive work environment and management support and increasing physical activity and mental health.

#### ACKNOWLEDGMENT

Special thanks to Universitas Airlangga, Surabaya, and Faculty of Science Universitas Galuh, Indonesia, for supporting this research and all parties involved.

#### REFERENCES

- Zahednezhad H, Zareiyan A, Jame SZB. Relationship between quality of work-life, resilience and burnout among nursing professionals during COVID-19 pandemic in Iran: A cross-sectional study. *Belitung Nursing J.* 2021;7(6):508-515.
- Lewis HS, Cunningham CJL. Linking Nurse Leadership and Work Characteristics to Nurse Burnout and Engagement. *Nursing Res.* 2016;65(1):13-23.
- Luis Gómez-Urquiza J, de La Fuente-Solana EI, Albendín-García L, Vargas-Pecino C, Ortega-Campos EM, Cañadas-De La Fuente GA. Prevalence of Burnout Syndrome in Emergency Nurses: A Meta-Analysis. *Critical Care Nurse.* 2017;37(5):1.
- Permarupan YY, Mamun A al, Samy NK, Saufi RA, Hayat N. Predicting nurses burnout through quality of work life and psychological empowerment: A study towards sustainable healthcare services in Malaysia. *Sustainability (Switzerland).* 2020;12(1).
- Zou G, Shen X, Tian X, Liu C, Li G, Kong L, et al. Correlates of psychological distress, burnout, and resilience among Chinese female nurses. *Industrial Health.* 2016;54(5):389-395.
- Kelbiso L, Belay A, Woldie M. Determinants of Quality of Work Life among Nurses Working in Hawassa Town Public Health Facilities, South Ethiopia: A Cross-Sectional Study. *Nurs Res Pract.* 2017;2017:5181676.
- Asiedu EEA, Annor F, Amponsah-Tawiah K, Dartey-Baah K. Juggling family and professional caring: Role demands, work-family conflict and burnout among registered nurses in Ghana. *Nursing Open.* 2018;5(4):611-620.
- Widayati D, Keperawatan P, Karya S, Kediri H, Kunci K. Quality Nursing Work Life dan Burnout Syndrome pada Perawat. 2020; Available from: <http://jnk.phb.ac.id/index.php/jnk>
- Jais FA, Choo TY, Kahan H, Shahbudin S, Abdul-Mumin KH, Rahman HA. Psychosocial factors and burnout among oncology nurses in Brunei Darussalam: A pilot study. *Belitung Nursing J.* 2021;7(5):418-424.
- Jarzynkowski P, Piotrkowska R, Mędrzycka-Dąbrowska W, Książek J. Areas of work life as predictors of occupational burnout of nurses and doctors in operating theaters in Poland—multicenter studies. *Healthcare (Switzerland).* 2022;10(1).
- Elias A, Shima AA, Adam S. Relationship between Resilience, Burnout and Professional Quality of Life among Nurses Working at El-Abbassiya Psychiatric-Mental Health Hospital. *Original Article Egyptian J Health Care.* 2020;11.
- Paniora R, Matsouka O, Theodorakis Y. The effect of physical activity on the “Burnout” syndrome and the quality of life of nurses working in psychiatric centers. *Hellenic J Nursing.* 2017;56(3): 225-232.
- Zeng LN, Lok KI, An FR, Lu L, Jackson T, Ungvari GS, et al. The Prevalence of Burnout and its Associations with Demographic Correlates and Quality of Life among Psychiatric Nurses in China. *Psychiatric Quarterly.* 2021;92(2):645-653.
- Alotni MA, Elgazzar SE. Investigation of Burnout, its Associated Factors and its Effect on the Quality of Life of Critical Care Nurses Working in Buraydah Central Hospital at Qassim Region, Saudi Arabia. *Open Nursing J.* 2020;14(1):190-202.
- Sok S, Sim H, Han B, Park SJ. Burnout and Related Factors of Nurses Caring for DNR Patients in Intensive Care Units, South Korea. *Int J Environ Res Public Health.* 2020;17(23):8899.
- Huang H, Zhang H, Xie Y, Wang S bin, Cui H, Li L, et al. Effect of Balint group training on burnout and quality of work life among intensive care nurses: A randomized controlled trial. *Neurol Psychiat Brain Res.* 2020;35:1621.
- Brooks BA, Anderson MA. Defining quality of nursing work life. *Nurs Econ.* 2005;23(6):279:319-326.
- Nursalam N, Fardiana A, Asmoro CP, Fadhillah H, Efendi F. The correlation between the quality of nursing work life and job performance. *Indian J Public Health Res Develop.* 2018;9(10):330-335.
- Erkorkmaz U, Dogu O, Cinar N. The relationship between burnout, self-esteem and professional life quality of nurses. *J College of Physicians and Surgeons Pakistan.* 2018;28(7):549-553.

RELATIONSHIP QUALITY OF NURSING WORK LIFE AND BURNOUT AMONG NURSES

20. Ruiz-Fernández MD, Pérez-García E, Ortega-Galán ÁM. Quality of life in nursing professionals: Burnout, fatigue, and compassion satisfaction. *Int J Environ Res Public Health*. 2020;17(4):1253.
21. Çelmeçe N, Menekay M. The Effect of Stress, Anxiety and Burnout Levels of Healthcare Professionals Caring for COVID-19 Patients on Their Quality of Life. *Front Psychol*. 2020;11:597624.
22. Casida JM, Combs P, Schroeder SE, Johnson C. Burnout and Quality of Work Life Among Nurse Practitioners in Ventricular Assist Device Programs in the United States. *Prog Transplant*. 2019;29(1):67-72.
23. Raeissi P, Rajabi MR, Ahmadizadeh E, Rajabkhah K, Kakemam E. Quality of work life and factors associated with it among nurses in public hospitals, Iran. *J Egypt Public Health Assoc*. 2019;94(1):25.
24. Kim Y, Lee E, Lee H. Association between workplace bullying and burnout, professional quality of life, and turnover intention among clinical nurses. *PLoS One*. 2019;14(12):e0226506.
25. Kupcewicz E, Józwiak M. Role of Global Self-Esteem, Professional Burnout and Selected Sociodemographic Variables in the Prediction of Polish Nurses' Quality of Life - A Cross-Sectional Study. 2020;13:671-684.
26. Maslach et al. Different Perspectives of on Burnout, Contemporary Psychology, APA Review of Books. 2004.
27. Nursalam N, Sukartini T, Maf'ula D, Priyantini D. Quality of Nursing Worklife Based on Caring Model for Improving Nurse Performance in Hospitals. *Indonesian Nursing J Educ Clin*. 2020;5(2):172.
28. Hong J, Kim M, Suh EE, Cho S, Jang S. Comparison of Fatigue, Quality of Life, Turnover Intention, and Safety Incident Frequency between 2-Shift and 3-Shift Korean Nurses. *Int J Environ Res Public Health*. 2021;18(15):7953.
29. Gerami Nejad N, Hosseini M, Mousavi Mirzaei S, Ghorbani Moghaddam Z. Association between Resilience and Professional Quality of Life among Nurses Working in Intensive Care Units. *Iran J Nursing*. 2019;31(116):49-60.
30. Seo HY, Lee DW, Nam S, Cho SJ, Yoon JY, Hong YC, et al. Burnout as a Mediator in the Relationship between Work-Life Balance and Empathy in Healthcare Professionals. *Psychiatry Investig*. 2020;17(9):951-959.
31. Kaddourah B, Abu-Shaheen AK, Al-Tannir M. Quality of nursing work life and turnover intention among nurses of tertiary care hospitals in Riyadh: A cross-sectional survey. *BMC Nurs*. 2018;17:43.
32. Sok S, Sim H, Han B, Park SJ. Burnout and Related Factors of Nurses Caring for DNR Patients in Intensive Care Units, South Korea. *Int J Environ Res Public Health*. 2020;17(23):8899.
33. Raeissi P, Rajabi MR, Ahmadizadeh E, Rajabkhah K, Kakemam E. Quality of work life and factors associated with it among nurses in public hospitals, Iran. *J Egypt Public Health Assoc*. 2019;94(1):25.
34. Wang Q, Lv W, Qian R, Zhang Y. Job burnout and quality of working life among Chinese nurses: A cross-sectional study. *J Nursing Management*. 2019;27(8):1835-1844.
35. van der Heijden B, Mahoney CB, Xu Y. Impact of Job Demands and Resources on Nurses' Burnout and Occupational Turnover Intention Towards an Age-Moderated Mediation Model for the Nursing Profession. *Int J Environ Res Public Health*. 2019;16:2011.
36. Kim HL, Yoon, Sook-Hee. ISSN (Print) 2005-3673 ISSN (Online) 2093-758X. *J Korean Acad Nurs*. 2018;48(4):432.
37. Nursalam N, Fibriansari RD, Yuwono SR, Hadi M, Efendi F, Bushy A. Development of an empowerment model for burnout syndrome and quality of nursing work life in Indonesia. *Internat J Nursing Sci*. 2018;5(4):390-395.
38. Kelly LA, Gee PM, Butler RJ. Impact of nurse burnout on organizational and position turnover. *Nursing Outlook*. 2021;69(1):96-102.
39. Ruiz-Fernández MD, Pérez-García E, Ortega-Galán ÁM. Quality of Life in Nursing Professionals: Burnout, Fatigue, and Compassion Satisfaction. *Int J Environ Res Public Health*. 2020;17(4):1253.
40. Permarupan YY, Mamun A al, Samy NK, Saufi RA, Hayat N. Predicting nurses burnout through quality of work life and psychological empowerment: A study towards sustainable healthcare services in Malaysia. *Sustainability (Switzerland)*. 2020;12(1).
41. Khatatbeh H, Pakai A, Al-Dwaikat T, Onchonga D, Amer F, Prémusz V, et al. Nurses' burnout and quality of life: A systematic review and critical analysis of measures used. *Nursing Open*. John Wiley and Sons Inc; 2022;9:1564-1574.
42. Zhou J, Yang Y, Qiu X, Yang X, Pan H, Ban B, et al. Serial multiple mediations of organizational commitment and job burnout in the relationship between psychological capital and anxiety in Chinese female nurses: A cross-sectional questionnaire survey. *Internat J Nursing Stud*. 2018;83:75-82.
43. Schlak AE, Aiken LH, Chittams J, Poghossyan L, Mchugh M. Leveraging the Work Environment to Minimize the Negative Impact of Nurse Burnout on Patient Outcomes. *Int J Environ Res Public Health*. 2021;18(2):610.