

IMPACT OF BURNOUT AND WORK-LIFE BALANCE ON THE PSYCHOLOGICAL HEALTH OF HEALTHCARE WORKERS AT OLABISI ONABANJO UNIVERSITY TEACHING HOSPITAL, SAGAMU, NIGERIA

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Abstract

Healthcare workers globally and in Nigeria in particular, are confronted with a high level of stress, burnout and reduced work-life balance, thereby negatively affecting their psychological health and reducing their care for patients. Therefore, this paper investigates the impact of burnout and work-life balance on the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria. The study employed a descriptive research design. The participants were selected using a simple random sampling technique. They included 205 (F = 92, M= 113: mean age =30.22) healthcare workers at Olabisi Onabanjo University Teaching Hospital. Three scales were used for the study, which include the Maslach Burnout Inventory, Work-Life Balance Scale and General Health Questionnaire. Data were analysed using percentages, correlation and multiple regression. The result indicates a significant relationship between burnout and the psychological health of healthcare workers ($r = 0.505$, $p < 0.05$). Work-life balance is significantly related to the psychological health of healthcare workers ($r = 0.418$, $p < 0.05$). Furthermore, the results showed that Burnout ($\beta = -0.405$, $t\text{-value} = 6.421$, $p\text{-values} < 0.05$) and Work-Life Balance ($\beta = -0.263$, $t\text{-value} = 4.179$, $p\text{-values} > 0.05$) indicate a significant joint influence of burnout and work-life balance on the psychological health of healthcare workers. The study concluded that burnout and work-life balance both significantly impact the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu. Moreover, the combined effect of burnout and work-life balance further influences their psychological well-being, indicating that managing these factors is crucial for improving mental health outcomes. Based on the findings, the study recommended the introduction of flexible working hours, job-sharing options, and opportunities for remote work where possible.

Keywords: *Burnout, Work-Life Balance, Psychological Health, Healthcare Workers, Nigeria*

Introduction

Healthcare is a crucial sector that supports the health of the population and the well-being of the community, but healthcare professionals are prone to serious work-related problems that negatively impact their psychological well-being, especially following COVID-19. Burnout and challenges in achieving work-life balance have become critical determinants of the psychological well-being of healthcare professionals in Olabisi Onabanjo University Teaching Hospital (OOUTH) in Sagamu, Ogun State, Nigeria. OOUTH is a tertiary care centre with a high number of patients and complicated cases, which may cause stress among staff. This paper examines the complexities of burnout and work-life balance in healthcare workers. This is driven by its dire consequences on healthcare providers and patients in the healthcare system, where burnout and work-life balance may have a significant impact on the quality of patient care and the productivity of the workforce.

Mental health or psychological health is the state of well-being in which an individual fulfils his or her potential, manages the everyday normal stresses in life, works efficiently and also, he/she gives back to his or her community (World Health Organization, 2001). It is not only the absence of mental disorders, but also positive functioning and emotional stability. Keyes (2002) defines psychological health as a combination of hedonic well-being (happiness and life satisfaction) and eudaimonic well-being (realisation of potential and personal growth). It is essential to be psychologically healthy to achieve quality of life and well-being.

Psychological health issues are widespread in all fields of practice and impact both individuals on a personal

level and in their work environment. Healthcare providers experience a high level of psychological health hazards characterised by stress levels, burnout and mental illness. A study by Shanafelt *et al.* (2015) revealed that over 50 per cent of physicians in the United States had manifested burnout with the symptoms of emotional exhaustion and depersonalization. Likewise, in the United Kingdom, Hall *et al.* (2016) observed that high-stress levels among National Health Service (NHS) staff are caused by workloads and a lack of support, which result in anxiety and depression. A survey conducted by Rees *et al.* (2018) in Australia established that excessive working hours and the emotional demand of attending to patients exposed the healthcare worker to high levels of psychological distress. These issues are exacerbated by systemic factors, such as staffing shortages, inadequate work-life balance, and the absence of mental health support, which highlights the importance of adopting a holistic support program in any healthcare environment worldwide.

The psychological well-being of healthcare workers in Nigeria mirrors the global pattern, with considerable issues being reported. In one of the studies, Ogunnubi *et al.* (2018) observed that workload, poor resources, and stress in the workplace are chronic aspects of healthcare providers which result in emotional exhaustion and depression. Likewise, Olatunde *et al.* (2019) observed that these challenges are intensified by poor work-life balance and lack of institutional support, which contribute to higher levels of anxiety and psychological distress. These findings underscore the immediate need for improved mental health care and mental health care facilities among healthcare practitioners in Nigeria because it is comparable with the

global requirement of enhancing mental health care in the medical sector.

As Uwakwe (2017) stated, psychological health in Nigeria is about being stable in the mind, emotionally, and being able to cope with life problems. According to a study by Nwokoma and Oseremen (2023) on healthcare providers in Auchi, the staff members reported high levels of stress, burnout, and emotional exhaustion, mainly attributed to the long working hours, insufficient resources, and heavy patient load. Such circumstances lead to anxiety, depression, and dissatisfaction with their jobs (Ajayi and Abimbola, 2018). Ogundipe *et al.* (2019) discovered that the inadequacy of institutional support and work-life balance exacerbate these problems and result in a reduction in mental health and performance as well. The unavailability of mental health services and the high workload put on them leads to great psychological stress, affecting personal well-being and professional performance.

According to the World Health Organization (2019), burnout is a syndrome that is conceptualised as a consequence of chronic stress at the workplace that has failed to be managed. It occurs when the stress encountered at work exceeds the cognitive, physical, and emotional resources of an individual to maintain their effort, performance, and personal well-being while at work. Maslach and Leiter (2017) were the first to introduce burnout into the scientific community and described it as a progressive process of exhaustion, cynicism, and lack of commitment in social care professionals. Close correlations are observed between burnout and poor psychological health, which is marked by emotional exhaustion, depersonalization, and diminished personal achievement (Maslach *et al.*,

2001). In the meantime, burnout levels are linked to elevated risk of developing mental health problems, including anxiety, depression, and stress (Shanafelt *et al.*, 2015). Additionally, emotional exhaustion leads to a significant decline in mental well-being, while depersonalization contributes to negative attitudes and detachment from work (Maslach and Leiter, 2016). Similarly, burnout is seen to drain psychological resources, which may wear out the health of individuals and their work-life balance. This is particularly pertinent to the case of OOUTH Sagamu, where medics are faced with high work pressure. It is therefore important to examine the psychological state of employees in this institution so as to comprehend and solve these alarming problems further.

Work-life balance is defined as the times when work is balanced with personal life, and both factors do not predominate over the other. It involves balancing work needs and ensuring that there is time to have family, leisure and self-care, hence lowering stress levels and improving the overall well-being (Greenhaus and Allen, 2011). As such, a good work-life balance enhances job satisfaction, productivity and mental health (Kossek and Lambert, 2005). It is crucial in preventing burnout and establishing a healthier workplace, which makes the work and life professional and satisfying. Good psychological health is heavily dependent on life-work balance. Positive work-life balance correlates with lower levels of anxiety and depression since the person now has time to rest and perform personal tasks, which contributes to emotional resilience (Bulger *et al.*, 2025). On the contrary, low work-life balance is the cause of increased stress and poor psychological health, which increases the sense of exhaustion and

dissatisfaction. This problem is especially topical at OOUTH Sagamu, where healthcare workers have problems with the balance between the work schedule and personal life. The concern raised in this regard underscores the importance of a study which dwells on the psychological well-being of the staff in this institution in order to address and curb these challenges.

Olabisi Onabanjo University Teaching Hospital (OOUTH) in Sagamu, Nigeria, serves as an ideal location for studying the impact of burnout and work-life balance on the psychological health of healthcare workers due to its diverse and sizable workforce. The patient overload and the scarcity of resources in the hospital are typical features of most healthcare facilities in Nigeria, which makes it a suitable location to conduct the research. The distinctive socio-economic situation in Sagamu and the presence of the hospital as an important part of the local healthcare system offer important insights into the interdependence of workload and mental health. The OOUTH results can also be used to provide useful information to enhance mental health support and work-life policies in other similar healthcare institutions in Nigeria.

Statement of the Problem

The challenges of chronic stress, excessive workloads, and insufficient resources is a major psychological health issue for healthcare workers in Nigeria. It has been found that long working hours, large patient-to-staff ratios, and a lack of support systems are associated with high burnout rates, especially emotional exhaustion and depersonalization (Ogunnubi *et al.*, 2018). Psychological distress is also influenced by the work-life imbalance, as the stressful nature of the working environment does not give an opportunity to dedicate time to family and personal life (Olatunde *et al.*, 2019). The

COVID-19 pandemic exacerbated these difficulties, adding workload, exposure to risks, and emotional stress (Fawzy and Hamed, 2020), whereas mental health services and stigma remain the impediments to help-seeking (Adejumo *et al.*, 2020). Irrespective of the research that has been conducted, there are still gaps in the literature, such as the lack of longitudinal studies of long-term outcomes, the lack of intervention-focused research, and the lack of focus on the cultural and demographic factors, i.e., gender, age, and job roles. Therefore, this study seeks to address these gaps by examining the impact of burnout and work-life balance on the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria.

Objectives of the Study

The main objective of this study is to investigate the impact of burnout and work-life balance on the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria. However, the specific objectives of the study are:

- i. To examine the relationship between Burnout and the Psychological Health of Healthcare Workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria.
- ii. To investigate the relationship between Work-life balance and psychological health among healthcare professionals at Olabisi Onabanjo University Teaching Hospital, Ogun, Nigeria.
- iii. To determine the joint influence of burnout and work-life balance on the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria.

Research Questions

The study sought to answer the following research questions:

- i. What is the relationship between Burnout and the Psychological Health of healthcare Workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria?
- ii. Is there any relationship between Work-life balance psychological health among healthcare professionals at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria?
- iii. Will there be any joint influence of Burnout and Work-life balance on psychological health among healthcare professionals at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria?

Literature Review

Relationship between Burnout and the Psychological Health of Healthcare Workers

The connection between burnout and the mental health of healthcare workers is a widely researched topic because of the stressful nature of the healthcare environment. Burnout is a mental health issue with far-reaching consequences on the mental state of healthcare professionals due to its emotional exhaustion, depersonalization, and loss of personal achievement. Several studies have pointed out the relationship between emotional exhaustion and negative psychological outcomes. Maslach and Jackson (1981), pioneers in burnout research, found that emotional exhaustion is a core component of burnout that significantly impacts mental health. Emotionally exhausted healthcare workers have increased chances of reporting depression, anxiety, and other

stress-related disorders. Similarly, Shanafelt *et al.* (2002) found that physicians experiencing high levels of depersonalization were more likely to suffer from psychological distress, including feelings of cynicism and detachment from patients, which exacerbate mental health issues. In a study conducted by Aiken *et al.* (2002), lower perceived accomplishment by nurses was associated with increased levels of depression and poorer mental health outcomes. Accordingly, a systematic review by Aluko (2023) summarised the literature available on burnout and mental health of Nigerian healthcare workers. Their analysis has affirmed that burnout is a common problem that greatly impacts the psychological well-being of medical practitioners. It highlighted the necessity of specific interventions to minimise burnout and enhance mental health outcomes in the healthcare sector.

The article by Iduh (2025) emphasised the role of diminished personal accomplishment in the psychological health of health practitioners in Nigeria. The researchers discovered that nurses with ineffective and undermined attitudes towards their work and role mentioned more depressive symptoms and poorer mental health in general. Professional recognition and support were lacking, and this was also a major contributor to these feelings. Nevertheless, Eze *et al.* (2019) discovered that high depersonalization levels were related to more stress reports, lower job satisfaction, and a greater number of mental health problems (anxiety and depression). This disconnection is usually a consequence of excessive work-related stress and the absence of supportive systems. The study by Bernard Ubom *et al.* (2023) investigated how emotional exhaustion impacts the psychological health of

healthcare providers in Lagos. Their results showed that the symptoms of depression and anxiety were strongly linked with emotional exhaustion. When healthcare workers had a high degree of emotional exhaustion, they had more chances of reporting their sadness, irritability, and hopelessness, which adversely impacted their overall mental health. However, a systematic review by West *et al.* (2016) concluded that burnout is a significant predictor of mental health problems, including depression, anxiety, and suicidal ideation, among healthcare professionals. The review noted that interventions to minimise burnout were necessary to enhance the psychological well-being of healthcare workers. Moreover, Ogunnubi *et al.* (2018) conducted a study to determine the level of burnout among Nigerian healthcare workers. Emotional exhaustion, Depersonalisation, and lower personal accomplishment in doctors and nurses were found to be high. Approximately 60% of the respondents reported experiencing significant burnout, which correlated with high levels of job stress and inadequate work-life balance.

Relationship between Work-Life Balance and the Psychological Health of Healthcare Workers

The relationship between work-life balance and the psychological health of healthcare workers has received considerable attention in research due to the demanding nature of healthcare professions. Research has continuously shown that work-life balance has a great influence on the psychological health of such professionals. Multiple studies have established that an improved work-life balance is linked to lower stress levels among healthcare professionals. As an illustration, Geiger-Brown *et al.* (2012) discovered that healthcare workers who

reported having a good work-life balance had lower rates of job stress and burnout. This equilibrium contributed to a decrease in the psychological pressure of working long hours and high work demands and improved mental health results. A study conducted by Shanafelt *et al.* (2012) showed that doctors who felt they had a good work-life balance reported greater job satisfaction and reduced burnout and depression. The research highlighted that work-life balance is a key aspect of keeping mental health and professionally satisfied, thus minimising the chances of mental health problems.

Research by Fawole *et al.* (2017) examining the gender differences in work-life balance and its impact on psychological health in healthcare workers in Nigeria found that female healthcare workers perceived more challenges in attaining work-life balance than their male counterparts. Therefore, this difference was associated with increased stress and anxiety in female healthcare workers, which draws attention to the necessity of gender-sensitive policies and support mechanisms in the medical field. Additionally, Ajayi and Abimbola (2018) focused on the role of organisational support in enhancing work-life balance for healthcare workers. Their research showed that healthcare institutions that offered flexible working hours, mental health resources, and supportive work environments significantly improved employees' work-life balance. Such supportive interventions were linked to decreased stress and increased overall psychological well-being. Moreover, Adeniyi *et al.* (2020) emphasised the relationship between work-life balance, job satisfaction, and burnout in Nigerian nurses. The research concluded that nurses with a more positive work-life balance

were more satisfied with their job, and they had lower burnout. This equilibrium played a significant role in alleviating the mental stress of their high-stress jobs, resulting in better psychological health and performance at work.

Dyrbye *et al.* (2014) study revealed that physicians with poor work-life balance were significantly more likely to experience symptoms of anxiety and depression. These negative psychological consequences were caused by the stresses of professional life and personal life requirements. Also, According to McLinton *et al.* (2018), the work-life balance of staff in healthcare institutions that offered flexible working schedules, mental health support, and supportive policies was highly enhanced. This support, however, was accompanied by less stress, less burnout, and better mental health. A meta-analysis by Caruso *et al.* (2014) reported that work-life balance interventions (lessening overtime and more time off) had a positive impact on mental health outcomes and job satisfaction in healthcare. Similarly, Olatunde *et al.* (2019) also examined the impacts of work-life balance on the mental health of healthcare workers in Lagos. The researchers concluded that the inadequate work-life balance was substantially linked with an increase in stress, anxiety, and depression in healthcare professionals. Therefore, the stressful nature of their work, prolonged working hours, and lack of rest were contributing factors to these negative mental health outcomes.

Relationship among Burnout, Work-Life Balance and the Psychological Health of Healthcare Workers

The issue of burnout in relation to work-life balance and the psychological well-being of healthcare workers has been examined considerably. These studies point to the complicated interconnection

of these elements and their influence on the professional well-being of healthcare professionals. In this regard, Maslach and Leiter (2016) identified that healthcare workers experiencing burnout are more likely to suffer from depression, anxiety, and other mental health disorders. This is typical, particularly in high-stress environments such as hospitals and emergency care environments. In the meantime, McDonald *et al.* (2008) reported that healthcare professionals with a hard time balancing work and personal life are more prone to burnout. The researchers have determined that excessive working hours, lack of rest, and the inability to forget about the working duties contribute to stress and emotional exhaustion, which results in higher burnout.

Nonetheless, Ajayi and Abimbola (2018) also emphasised that organisational support can help alleviate burnout and enhance work-life balance. Their submission indicated that healthcare organisations with flexible work arrangements, mental health services and enabling work environments improved the work-life balance of their employees to a considerable extent. This support was associated with a decrease in the level of stress and an increase in the overall psychological state, and changes need to be made in the field of healthcare in a systematic way. Nevertheless, the study of Olatunde *et al.* (2019) in Lagos has identified the combined influence of work-life balance and high burnout rates as the causes of psychological distress among healthcare staff. The study reiterated the need to have additional work-life balance interventions since they may be beneficial in reducing burnout levels among workers and enhancing mental health outcomes. On the other hand, Ogunnubi *et al.* (2018) investigated

burnout among Nigerian healthcare workers and its impact on mental health. The researchers discovered that the levels of burnout were high, and emotional exhaustion was the most common. The level of depression, anxiety, and stress among the healthcare workers who reported burnout was significantly high. Hence, the strenuous character of their job, combined with poor support, led to these negative psychological consequences.

Similarly, the study conducted by Dyrbye *et al.* (2014) showed that inadequate work-life balance and high rates of burnout are significant predictors of mental health issues, such as depression and anxiety, in healthcare professionals. The study emphasises the fact that work-life balance interventions can reduce burnout and enhance psychological health, which enhances job satisfaction and overall well-being. However, Shanafelt *et al.* (2016) proved that the healthcare organisations offering flexible work hours, mental health support, and encouraging policies can significantly decrease burnout and enhance the psychological well-being of their staff members. Their results highlight the significance of systemic interventions in helping healthcare professionals to have a healthier working environment. Moreover, Adeniyi *et al.* (2020) investigated the work-life balance among nurses at the public hospitals and discovered that the work-life balance was an important predictor of burnout. Nurses experiencing problems in balancing their professional and personal lives were more emotionally exhausted and depersonalised, which enhanced burnout.

Methodology

The study employed a descriptive survey research approach, where data

were collected using questionnaires. The aim is to investigate the impact of burnout and work-life balance on the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria. Psychological health is the dependent variable, and the independent variables are burnout and work-life balance.

Participants

The study population consisted of all health workers at the Olabisi Onabanjo University Teaching Hospital, Sagamu. The target population derived for inclusion in the study is all healthcare workers (permanent) who have been in the service of the hospital for at least two (2) years in their respective profession, excluding those on annual, maternity, or study leave. For the generalisability of the study results, the workers were selected across the various healthcare professions. The simple random sampling was used to choose the sample size for this study. This sampling method ensured that each participant had an equal opportunity of becoming a member of the sample. The sample size was 215 healthcare workers in the Olabisi Onabanjo University Teaching Hospital.

Instrument

The research instrument used was a structured questionnaire consisting four sections (A-D): Section A addressed the socio-demographic variables, including gender, age, marital status, religion, ethnicity, profession, and years of service of the health workers. Section B assessed burnout with the help of the Maslach Burnout Inventory (MBI), a 22-item measurement scale designed to evaluate burnout risk. The MBI evaluates three key dimensions of burnout: the exhaustion dimension, which measures feelings of being emotionally overextended and exhausted by one's work. High scores in

this dimension indicate a high level of exhaustion, which is a core aspect of burnout; the depersonalisation component assesses an unfeeling and impersonal response towards recipients of one's service, care, treatment, or instruction. A high score on depersonalisation implies that one is very cynical or disengaged in their work, especially in their relationship with others at work, and the personal achievement dimension determines the sense of competence and successful accomplishment in their work with people. Scoring low on this dimension implies inefficacy or lack of achievement and output in the workplace (Leiter and Schaufeli, 1996). Section C contained the Work-Life Balance scale developed by Hayman (2005). The WLBS includes items that assess job satisfaction, family satisfaction, and personal satisfaction of participants. The high validity of the work-life balance measures in the WLBS that include job satisfaction and personal satisfaction render it a strong instrument in academic research and practice in an organisational context (Hayman, 2005; Haar, 2013). Work Life Balance was measured on a 5-point Likert scale with anchors 1=strongly disagree to 5=strongly agree. These descriptors have been selected to counter or countercheck any propensity to over-report challenging or intolerable behaviours and conditions being experienced by the participants at their workplace (Fairbrother and Warn, 2003). The five-point scale is widely applicable in WLB studies (such as Boyar *et al.*, 2003; Fairbrother and Warn 2003; Forsyth and Polzer-Debruyne, 2007). While section D measured Psychological Health using a 12-item General Health Questionnaire (GHQ-12) developed to assist in identifying mental-health issues in community and non-psychiatric medical settings. Responses are given on

a four-point scale ranging from Often (0), Sometimes (1), Seldom (2), and Never (3), and total scores can range from 0 to 36. A higher score indicates greater psychological distress. For mental health screening purposes, a cutoff score of 12 is used, and higher scores suggest a possible mental health issues. The General Health Questionnaire short version 12 (GHQ-12) is renowned for its reliability in assessing psychological well-being. Internal consistency is found to be high, and Cronbach's alpha values are mostly above 0.85 (Goldberg *et al.*, 1997). It also has high test-retest reliability, ensuring consistent results over time (Pevalin, 2000). The GHQ-12's concise format and robust psychometric properties make it a preferred instrument for screening mental health issues in diverse populations and settings (Goldberg *et al.*, 1997; Pevalin, 2000). This study instrument underwent pilot testing on healthcare workers at the University College Hospital, Ibadan, Nigeria. The resulting Cronbach Alpha value on standardisation is 0.87, 0.90 and 0.86, respectively.

Procedure for Data Collection

The researchers secured the approval of the Hospital management to conduct the study. Similarly, the participants (healthcare workers) were assured of the confidentiality of their responses. The instrument was administered to the healthcare workers during working hours after their routine ward round with the assistance of each unit head of the hospital. What is more important, the researchers did not attempt to administer the questionnaire to the healthcare workers who were not included in the study (that is, on annual, maternity or study leave). This was undertaken to ensure that the data obtained is extraneous variable-free and provides adequate

answers to the research problems identified.

Data Analysis

The data obtained in the study were analyzed using both descriptive and inferential statistics such as frequency, percentage, mean and standard deviation

which were used to describe the participants characteristics. The inferential statistics such as zero -order correlation and regression were used to test the hypotheses, all with IBM/ SPSS 25.0 programme.

Result

Table 1: Socio-Demographic Characteristics of the Respondents (n=205)

Variables	Frequency	Percentage
Age		
Mean ± S. D	30.22±10.11	
Gender		
Female	92	44.9
Male	113	55.1
Marital status		
Single	87	42.4
Married	109	53.2
Divorced	9	4.4
Religion:		
Christianity	128	62.4
Islam	73	35.6
Others	4	2
Ethnicity:		
Igbo	60	29.3
Yoruba	115	56.1
Hausa	18	8.8
Others	12	5.9
Profession:		
Doctor	48	23.4
Nurse	85	41.5
Health Assistant	10	4.9
Psychologist	14	6.8
Dentist	4	2
Radiologist	3	1.5
Ophthalmologist	12	5.9
Record officer	13	6.3
Laboratory staff	11	5.4
Others	5	2.4
Years of Service:		
Less than 1yrs	33	16.1
2–5yrs	84	41
6–10yrs	46	22.4
Above 10yrs	42	20.5

The socio-demographic characteristics of the respondents in this study, consisting of 205 participants,

reveal several insights into their backgrounds. The sample consists of 55.1% male and 44.9% female

respondents, indicating a slight male predominance in the study. The age distribution is diverse, with the majority of respondents (31.2%) being below 20 years old. The smallest group (4.4%) is aged 50 years and above. A majority of the respondents (53.2%) are married, while 42.4% are single, and a small percentage (4.4%) are divorced. This distribution may reflect the general marital status trends within the population. Most participants identified as Christians (62.4%), followed by Muslims (35.6%), and a minority (2%) adhering to other religions. The majority of participants are Yoruba (56.1%), followed by Igbo (29.3%), Hausa (8.8%), and other ethnic groups (5.9%). The sample includes a variety of healthcare professionals, with the largest groups being nurses (41.5%) and doctors

(23.4%). Other roles such as health assistants, psychologists, and other staff members are also represented. The participants have varying lengths of service, with the largest group (41%) having 2–5 years of experience. A smaller percentage (16.1%) have less than 1 year of service, while 22.4% have 6–10 years, and 20.5% have more than 10 years of experience.

Hypothesis One: The first hypothesis states that there is no significant relationship between Burnout and the Psychological Health of Healthcare Workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria. Hypothesis one was tested using Pearson correlation at a 0.05% level of significance. The summary of the tested hypothesis is presented in table1 below.

Variables	Mean	S.D	Df	r	Sig.
Burnout	101.17	15.12	204		
Psychological Health	28.736	4.382		.505*	< . 05

*. Correlation is significant at the 0.05 level (2-tailed)

The table presented above indicates a significant relationship between burnout and the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria. The analysis was conducted using Pearson correlation at a 0.05 level of significance. The results show that burnout has a mean score of 101.17 with a standard deviation of 15.12, while psychological health has a mean score of 28.736 with a standard deviation of 4.382. The Pearson correlation coefficient (r) is 0.505, and the result is significant at the 0.05 level (2-tailed). This positive correlation suggests a moderate relationship, indicating that higher levels of burnout are associated with poorer psychological health among healthcare workers. Given this result, the null hypothesis, which states that there is

no significant relationship between burnout and psychological health, is rejected. The result supports the alternate hypothesis, suggesting that burnout significantly impacts the psychological health of healthcare workers, highlighting the need for interventions to address burnout and improve psychological well-being in this setting.

Hypothesis Two: The second hypothesis states that there is no significant relationship between Work-Life Balance and the Psychological Health of Healthcare Workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria. Hypothesis two was tested using Pearson correlation at a 0.05% level of significance. The summary of the tested hypothesis is presented in table 2 below.

Variables	Mean	S.D	Df	r	Sig.
Work-Life Balance	58.229	6.221	204		
Psychological Health	28.736	4.382		.418*	< .05

* Correlation is significant at 0.05 level (2-tailed)

The table presented above indicates a significant relationship between work-life balance and the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria. Pearson correlation analysis was used at a 0.05 level of significance. The results show that work-life balance has a mean score of 58.229 with a standard deviation of 6.221, while psychological health has a mean score of 28.736 with a standard deviation of 4.382. The Pearson correlation coefficient (r) is 0.418, and the result is significant at the 0.05 level (2-tailed). This positive correlation suggests a moderate relationship, indicating that better work-life balance is associated with improved psychological health among the healthcare workers. Given this result, the null hypothesis, which states that there is

no significant relationship between work-life balance and psychological health, is rejected. The data supports the alternate hypothesis, suggesting that work-life balance significantly influences the psychological health of healthcare workers, underscoring the importance of effective work-life balance strategies in promoting mental well-being in this population.

Hypothesis Three: The third hypothesis states that there is no significant joint influence of burnout and work-life balance on the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria. Hypothesis three was tested using multiple regression method. The summary of the tested hypothesis is presented in table 3 below.

Table 3: Summary of Multiple Regression table showing joint and independent prediction of Burnout and Work-Life Balance on Psychological Health

Variables	B	T	P	R	R ²	F	P
Burnout	-.405	6.421	<.05				
Work-Life Balance	-.263	4.179	<.05	.561	.314	46.318	<.05

The table presented above indicates a significant joint influence of burnout and work-life balance on the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria. The results showed that Burnout has a beta coefficient (β) of -0.405 with a t-value of 6.421 and a p-value less than 0.05, indicating a significant negative influence on psychological health while Work-Life Balance has a beta coefficient (β) of -0.263 with a t-value of 4.179 and a p-value less than 0.05, also

indicating a significant negative influence on psychological health. Additionally, the overall model has an R-value of 0.561 and an R² value of 0.314, with an F-value of 46.318 and a p-value less than 0.05. This suggests that the combined effect of burnout and work-life balance explains 31.4% of the variance in psychological health and is statistically significant. Given these results, the null hypothesis, which states that there is no significant joint influence of burnout and work-life balance on psychological health, is

rejected. The result supports the alternate hypothesis, indicating that both burnout and work-life balance significantly impact the psychological health of healthcare workers.

Discussion

The results of the first hypothesis indicated a significant relationship between burnout and the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria. This finding implies that burnout, characterized by emotional exhaustion, depersonalisation, and a reduced sense of personal accomplishment, significantly affects the psychological well-being of healthcare workers. This result is supported by several Nigerian studies. For instance, a study by Ibigbami *et al.* (2020) found a significant relationship between burnout and psychological distress among healthcare professionals in Lagos. Their research highlighted that the intense work environment, coupled with inadequate resources and support, led to high levels of burnout, which in turn negatively impacted the mental health of healthcare workers. On the contrary, some Nigerian literature offers a different perspective. For example, Okwaraji and Aguwa (2014) suggested that while burnout does affect psychological health, other factors such as job satisfaction, workplace culture, and personal coping strategies might play a more critical role in determining the psychological health of healthcare workers. They argued that healthcare workers with strong coping mechanisms and supportive work environments might experience lower levels of burnout, thereby mitigating its impact on psychological health. A plausible explanation for the significant relationship

between burnout and psychological health could be the high-stress nature of the healthcare profession and inadequate mental support and resources particularly in a teaching hospital setting. The pressure to deliver high-quality patient care, manage heavy workloads, and navigate complex interpersonal dynamics within the hospital can lead to burnout, which then adversely affects mental health.

The results of the second hypothesis indicated a significant relationship between work-life balance and the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria. This result means that work-life balance is a key determinant affecting the psychological health of healthcare professionals. Healthcare workers often face demanding work schedules, long hours, and high stress levels, which can make it challenging to balance work responsibilities with personal life. When work-life balance is disrupted, it can lead to increased stress, fatigue, and burnout, all of which negatively impact psychological health. Work-life balance is a key factor in eliminating stress and enhancing mental health. This result aligns with findings from other Nigerian studies. Notably, a study by Adebayo and Olusegun (2019) highlighted a significant relationship between work-life balance and psychological health among healthcare professionals in southwestern Nigeria. Their study revealed that the group of healthcare workers who experienced poor work-life balance had high chances of reporting effects of depression and anxiety, and that the balance between work-related demands and personal time is crucial. Other literature in Nigeria, on the other hand, presents a different view. A study by

Muojekwu *et al.* (2023) argued that while work-life balance is important, other factors such as job satisfaction, organisational support, and professional development opportunities might play a more crucial role in determining psychological health. Thus, they implied that the issue of work-life balance could be addressed more effectively by healthcare workers under the strong organisational support and, therefore, reduce its influence on mental health.

The reason(s) for the significant relationship between work-life balance and psychological health could be the high demands placed on healthcare workers in a teaching hospital setting, which involves the need to provide continuous patient care, handling complex medical cases, and fulfilling administrative duties thereby making it difficult for healthcare workers to find time for personal activities and self-care, leading to stress and burnout. Moreover, the absence of institutional policies which facilitate the work-life balance, including flexible working hours or mental health care, can complicate the problems of healthcare workers. Healthcare workers in settings where the work-life balance is not a priority can have difficulties in balancing their personal lives and professional duties, leading to worse psychological health outcomes. In addition, cultural requirements in Nigeria could also contribute to it. Healthcare workers may experience the pressure of society to choose work over personal life, particularly in such a highly regarded and respected profession.

The results of the third hypothesis revealed that the psychological well-being of healthcare workers in Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria, was significantly influenced by the synergistic impact of burnout and

work-life balance. This finding indicates that neither burnout nor work-life balance is a determining factor in the psychological well-being of healthcare employees, but a combination of the two is. Burnout can be worsened by poor work-life balance and is characterised by emotional fatigue, diminished feeling of achievement, leading to more serious psychological health issues, such as depression, anxiety, and stress. When healthcare workers are unable to cope with the excessive workload and properly take care of their personal health, their mental well-being may begin to deteriorate further.

This finding is in line with several studies in Nigeria. Indicatively, a research study conducted by Ibigbami *et al.* (2022) established that healthcare workers with high levels of burnout and poor work-life balance were more prone to report high levels of psychological distress. They emphasised the synergistic nature of these variables and how inadequate work-life balance can contribute to the outcomes of burnout on mental health. Conversely, other Nigerian works of literature give a different view. According to a study by Akanji *et al.* (2020), the role of burnout and work-life balance is not the most critical in the determination of the psychological well-being of healthcare workers; other factors, including organisational support, job satisfaction, and coping mechanisms, may be more significant. They stated that healthcare workers who have strong organisational support and coping strategies may be more capable of managing the issue of burnout and work-life balance, which would minimise their effects on mental health. One suggestion that might explain the massive combined impact is the stressful nature of the environment in which

healthcare professionals operate. Repeated stress of providing care to the patient, working long hours, and experiencing emotional stress can cause burnout. When such burnout is coupled with a lack of work-life balance, in which healthcare workers have little time to rest, recreate, and maintain family life, the result is a significant decline in psychological health. Additionally, the lack of support systems and resources to help healthcare workers manage burnout and achieve work-life balance may exacerbate the situation. In many Nigerian healthcare settings, there may be limited access to mental health support, flexible work schedules, or other resources that promote well-being, making it difficult for healthcare workers to recover from burnout or maintain a healthy balance between work and personal life. Moreover, cultural expectations in Nigeria, which often emphasize hard work and dedication to one's profession, might contribute to healthcare workers prioritizing their job over personal well-being. This cultural context could lead to neglecting self-care and personal relationships, further worsening the impact of burnout and poor work-life balance on psychological health.

Implication of the Study

The results of the study indicate that there is a strong relationship between burnout, work-life balance and psychological health of healthcare workers in Olabisi Onabanjo University Teaching Hospital, Sagamu, Nigeria. It highlights how important job-related stress and the possibilities to balance between professional and personal life are to the well-being of healthcare professionals. The strong combined impact of burnout and work-life balance is

another factor that highlights the idea that neither of them works separately; on the contrary, they work together to form the psychological well-being of employees. These findings suggest that burnout and work-life balance should be considered to enhance mental health outcomes among healthcare professionals. Interventions should focus on reducing workplace stress, promoting healthy work environments, and ensuring that employees have the resources and support to achieve a sustainable work-life balance.

Conclusion

In the study, burnout and work-life balance both significantly impact the psychological health of healthcare workers at Olabisi Onabanjo University Teaching Hospital, Sagamu. Moreover, the combined effect of burnout and work-life balance further influences their psychological well-being, indicating that managing these factors is crucial for improving mental health outcomes in this population.

Recommendations

Following from the findings, the present study recommends introducing flexible working hours, job-sharing options, and opportunities for remote work where possible. Encourage the use of leave days and create a culture that supports taking breaks to prevent overwork.

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