

BURNOUT AND JOB SATISFACTION AMONG HEALTH CARE PROVIDERS AT SAUDI ARABIA: SYSTEMATIC REVIEW

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Abstract

The purpose of this systematic review is to investigate the prevalence, risk factors, and impact of burnout on job satisfaction among Saudi healthcare providers, with a focus on the implications for patient care and the overall healthcare environment. According to the literature, unstable working conditions, high productivity demands, and inadequate workplace assistance all lead to mental health issues for healthcare personnel, reducing job satisfaction and service quality. Job satisfaction is critical for patient safety, whereas burnout, which is defined by emotional weariness, depersonalization, and a lack of personal accomplishment, has a negative impact on job performance and patient outcomes. This review summarized findings from five empirical research published between 2020 and 2024, focusing not just on physicians but also on other healthcare professionals. The findings show a significant prevalence of burnout and low levels of job satisfaction across diverse Saudi healthcare settings. Burnout was significantly influenced by a high workload, stress, and gender dynamics. The findings highlight the critical need for comprehensive interventions that reduce burnout and increase job satisfaction through better management practices and support systems. This information is critical for healthcare policymakers and stakeholders looking to establish healthier work environments, which will contribute to better patient outcomes and healthcare services in Saudi Arabia.

Keywords: Burnout Job, Satisfaction, Among Health Care, Providers.

Introduction

Precarious employment, high productivity and efficiency demands, competing hierarchical interpersonal connections, and insufficient working environment may all have a negative impact on employees' mental health (Rocha et al., 2020). Furthermore, a lack of solidarity among coworkers contributes to physical, mental, and emotional tiredness, which may result in distress and disease, with direct repercussions for the quality of services (Rocha et al., 2020).

Job satisfaction is a key concern among medical professionals, as it has a direct impact on patient safety and the quality of health care services, burnout has been found to be linked to job satisfaction (Kader et al., 2021). Job satisfaction is defined as the extent to which individuals feel positive or negative about their jobs (Singh et al., 2019). Employees are motivated by job satisfaction, which is a positive emotional aspect, it relates to employees' feelings toward their jobs, in other words, it is about satisfying and meeting job requirements, workload, and effectiveness (Rostami et al., 2021).

Job satisfaction can be measured globally as the general satisfaction with a job, or in a



multifaceted way based on the satisfaction with specific dimensions such as salary, benefits, career development, training, work relationships, promotion, management, work environment, recognition, and supervision (Wang et al., 2024). Burnout was first identified in 1974 by Freudenberger as the result of tiredness, disillusionment, and loss of interest in work, and it is more common among workers whose employment involves service delivery, and hence direct interaction with other people (da Silva et al., 2020). Burnout, defined by the WHO as an occupational ailment, is the result of continuous stress. This condition has three dimensions: emotional tiredness, depersonalization, and a sense of low personal satisfaction, which causes emotional, behavioral, psychosomatic, and social changes, loss of work efficiency, and disruptions in family life (Acea-López et al., 2021). However, estimates of burnout prevalence differ significantly based on the sample population, therapeutic settings, and occupation, for instance, a previous cross-sectional study conducted in the Southern region of Saudi Arabia, which included 95 physicians and 187 nurses working in different emergency departments, indicated that 88% of HCPs experienced emotional exhaustion (Siraj et al., 2023).

Burnout impacts the mental health and job happiness of healthcare personnel, and it can lead to decreased productivity, increased medical errors, and compromised patient safety (Alshurtan et al., 2024). Burnout among health workers can reduce job satisfaction, resulting in a decline in patient care, the majority of published studies in Saudi Arabia focus solely on physician burnout (Althobaiti & Issa, 2023). There is a clear need to understand the risk factor and the effect of burnout on health workers in order to improve worker job satisfaction and patient care (Althobaiti & Issa, 2023).

Objective

The purpose of this systematic review was to integrate available literature in order to assess the prevalence, risk factors, and effects of burnout on job satisfaction, highlighting the implications for patient care and the overall healthcare environment in Saudi Arabia. The review aims to fill gaps in the present understanding of this subject, with a special emphasis on the experiences of healthcare professionals other than physicians in Saudi Arabia.

Significance of the Review

The impetus for undertaking this systematic evaluation derives from Saudi healthcare providers' growing concerns about burnout and job satisfaction. In recent years, healthcare workers have experienced rising challenges due to high production demands, uncertain employment conditions, and limited workplace assistance, all of which can have a severe influence on their mental health and general well-being. Because job happiness is inextricably tied to both employee motivation and the quality of patient treatment, understanding how burnout affects this element of healthcare professionals' life is essential. Despite the considerable literature on burnout, there is a significant dearth in studies concentrating on healthcare practitioners other than physicians, particularly in the setting of Saudi Arabia. Addressing this gap is critical for designing tailored interventions and support systems that increase job satisfaction while reducing burnout, resulting in improved patient safety and healthcare outcomes. Furthermore, the review aims to synthesize existing findings to provide a comprehensive understanding of the prevalence, risk factors, and consequences of burnout in the Saudi healthcare setting, which will assist policymakers and stakeholders in creating healthier work environments for healthcare professionals.



Methods

Introduction

This systematic review sought to evaluate and synthesize available evidence on burnout and job satisfaction among Saudi healthcare providers. The review aimed to acquire a thorough picture of how burnout influences job satisfaction, which in turn affects patient care in Saudi Arabia's unique healthcare context, by adhering to strict methodological standards. The evaluation used a rigorous search strategy with specific inclusion and exclusion criteria, as well as a systematic data extraction procedure, to verify that the findings were credible and applicable to relevant healthcare practices.

Search Strategy

A thorough search strategy was employed to locate studies relevant to our research on burnout and work satisfaction among healthcare providers. To guarantee complete coverage of relevant literature, the search was conducted across many electronic databases, including PubMed, CINAHL, Scopus, and PsycINFO. Key terms such as "burnout," "job satisfaction," "healthcare providers," and "Saudi Arabia" were utilized in different combinations, with results refined using Boolean operators (AND, OR). The search was restricted to studies published within the last five years, particularly from 2020 to 2024, in order to capture the most recent trends and statistics in Saudi healthcare.

Inclusion Criteria

To ensure that the evaluation was relevant and focused, precise inclusion criteria were set. Eligible papers have to be empirical research published during the timeframe of interest, specifically looking into the relationship between burnout and job satisfaction among Saudi healthcare providers. Both qualitative and quantitative studies were included, providing for a wide spectrum of perspectives on the subject. Furthermore, research must investigate many areas of job satisfaction (e.g., emotional well-being, professional fulfillment) and be published in English to facilitate comprehension and accessibility. This structured method was designed to capture a wide range of literature important to understanding the dynamics of burnout and work satisfaction in the Saudi healthcare setting.

Exclusion Criteria

The exclusion criteria were crucial in restricting the scope of the systematic review while maintaining analytical quality. Articles that did not clearly target healthcare providers operating in Saudi Arabia, or that focused on burnout and job satisfaction outside of this context, were excluded. Furthermore, research that primarily focused on organizational outcomes with no explicit link to healthcare professional well-being were eliminated. Opinion articles, editorials, and non-empirical studies with no original research data were also excluded to maintain the review's scientific rigor and guarantee that only peer-reviewed publications were examined. The review intended to improve the overall quality and application of the synthesis data by systematically following these exclusion criteria to remove less relevant findings.

Selection process

In 2024, the review search generated 100 results. After removing duplicate studies, 50 remained. After reviewing the titles and abstracts, 30 studies were excluded because they did not match the inclusion criteria. Thus, 20 research were thoroughly analyzed to determine eligibility; 15 studies were removed since they did not describe the original studies. As a result, 5 studies were included in this systematic review (Results Chapter and Figure 1).

Data Extraction



A review search was carried out, with all titles and abstracts provided, inclusion and exclusion criteria applied, reasons for inclusion and removal explained, and duplicates removed. A PRISMA flowchart was used to depict the four stages of the systematic review approach. Figure 1 depicts the process for a systematic review. The features of the included studies ($n = 5$) were collected and presented in Table 1. The summarised data was then assessed. The author(s), study design, findings, and conclusions were all gathered and evaluated.

Result

According to Halawani et al. (2021), job satisfaction among healthcare personnel is critical for both productivity and quality of care. Their cross-sectional study in Saudi Arabia surveyed 226 healthcare workers, indicating that 73.9% were women and 50% were married. Key findings revealed that stress management ($p = 0.001$) and patient satisfaction ($p = 0.021$) had a substantial impact on job satisfaction, however inadequate management was identified as a main factor influencing treatment quality, albeit without statistical significance ($p = 0.210$). The study discovered that the majority of participants expressed indifferent (38.1%) or low work satisfaction (52.7%). The study found a strong link between job satisfaction and care quality, with the concerning finding that job satisfaction levels among Saudi healthcare providers were low, highlighting the need for improved management practices to improve both worker satisfaction and patient care.

Alkanfari et al. (2022) conducted a comprehensive review of various interventions aimed at improving job satisfaction among Saudi healthcare personnel. They examined interventional studies and clinical trials published between 2007 and 2022 in several databases. Thirteen studies matched the requirements, with interventions including leadership training, workload management, staff recognition, and physical workplace enhancements. The research discovered that leadership training and workload management were especially beneficial, with risk ratios of 1.2 to 1.8 and 2.0, respectively. Staff recognition programs also had a considerable impact on job satisfaction (risk ratio of 1.8), although improvements to the physical work environment had a minor effect (1.2).

Alqarni et al. (2022) conducted a cross-sectional study from January 2017 to October 2018 to examine the levels of stress, burnout, and job satisfaction among mental healthcare practitioners in Jeddah City, Saudi Arabia. The study included 107 mental health professionals and used the Perceived Stress Scale-14 (PSS-14), Maslach Burnout Inventory (MBI), and Job Satisfaction Scale (JSS) to assess sociodemographic factors and relevant psychological measures. The findings revealed a considerable prevalence of stress (56.1%), with 38.3% of respondents reporting emotional weariness and 24.3% reporting depersonalization. Furthermore, more than half of the participants (57%) reported low personal accomplishment. Job satisfaction was found to be low, with only 23.4% indicating satisfaction and 69.2% expressing uncertainty about their job satisfaction levels. The study found that male participants had considerably greater emotional tiredness levels than females, and those with a monthly income of more than SR 20,000 reported higher job satisfaction. Finally, the study emphasizes the alarming rates of stress and burnout among Jeddah's mental healthcare workers, noting that less than one-quarter of participants reported job satisfaction. The authors underscore the need for additional research to uncover relevant causes, as well as targeted initiatives by authorities to reduce rising levels of stress and burnout in this essential workforce.

Battar et al. (2024) conducted a cross-sectional survey of 385 healthcare professionals in Saudi



Arabia to investigate the prevalence of burnout syndrome (BOS). The Maslach Burnout Inventory-Human Services Survey was used to assess emotional weariness, depersonalization, and personal accomplishment. The findings revealed that 42.4% of participants had significant emotional weariness and depersonalization, whereas 33.8% felt low personal accomplishment. Female gender, younger age, nursing responsibilities, shorter work experience, on-call tasks, longer working hours, sleep difficulties, lack of exercise, and prejudice were all significant factors to BOS. The report emphasizes the urgent need for comprehensive treatments to combat burnout in the healthcare profession.

Furthermore, Shdaifat et al. (2023) used structural equation modeling (SEM) to evaluate the associated effects of work-related stress, compassion satisfaction (CS), and job satisfaction on burnout (BO) and secondary traumatic stress (STS) among Saudi nurses. The study used a cross-sectional methodology and surveyed 727 nurses in a teaching hospital in eastern Saudi Arabia. The ProQOL scale, the Nursing Stress Scale, and the Job Satisfaction Survey were all important tools. The resulting model provided a decent match for the data ($X^2 = 2.726$, RMSEA = 0.032). It was discovered that work-related stress had a direct affect on BO and STS, whereas job satisfaction, BO, and CS had a direct impact on STS. Importantly, BO served as a mediator in the link between stress and STS. The study stated that knowing the effects of stress, CS, and job satisfaction is critical since these variables can have both good and negative effects on nurses' BO and STS. The authors stressed the need of effective management practices for reducing stress and increasing job satisfaction, thereby boosting nurses' quality of life and patient care.

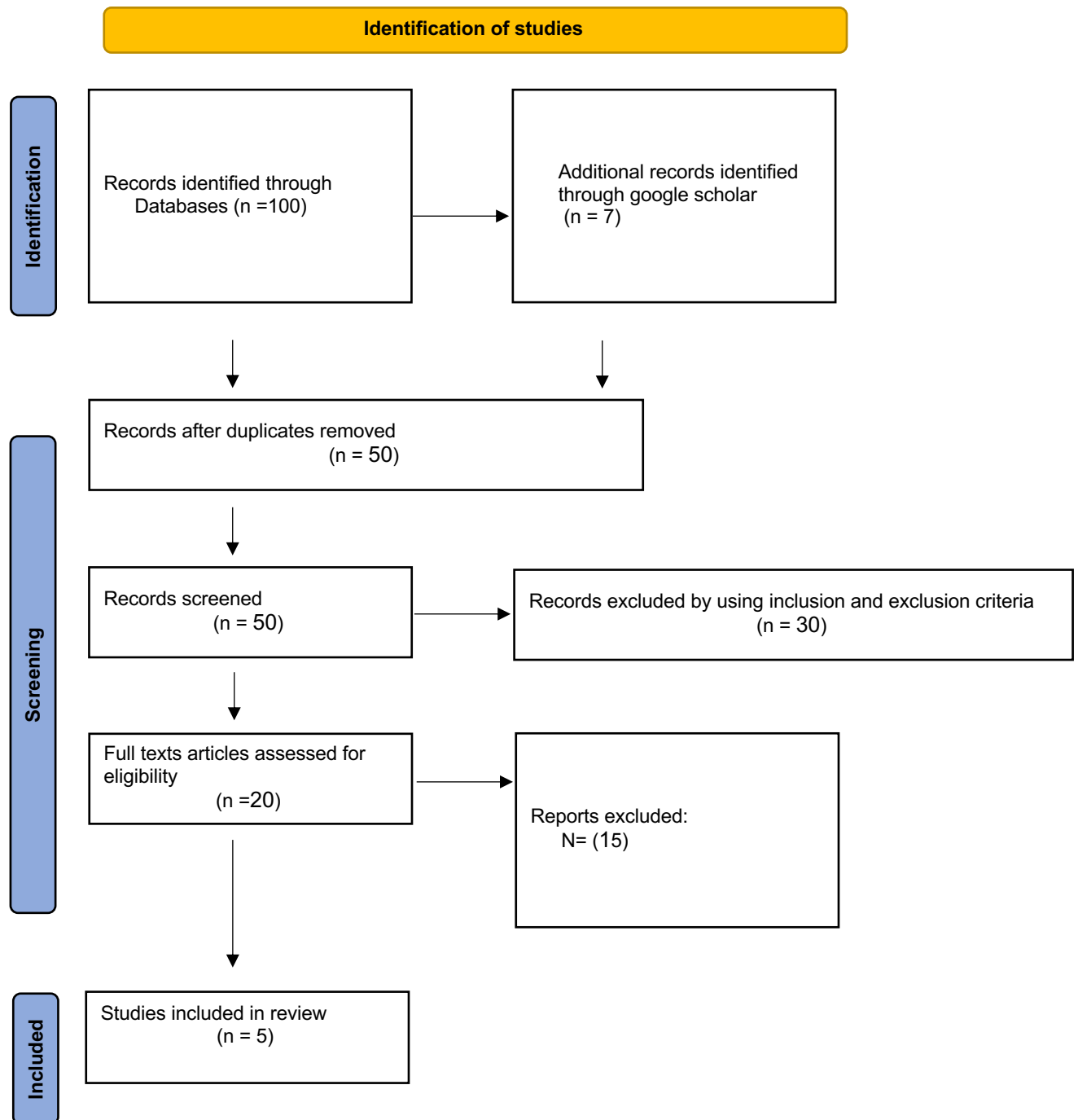


Fig. 1. PRISMA 2009 Flow Diagram

Discussion

Introduction

The amount of research on job satisfaction, burnout, and stress among healthcare personnel in Saudi Arabia sheds light on the intricate interplay of these characteristics and their ramifications for both providers and patients. While the research examined have a common focus on understanding work satisfaction and its drivers, there are subtle variances in techniques, findings, and consequences that



underscore the importance of focused interventions in the healthcare industry.

Link Between Job Satisfaction and Quality of Care

Halawani et al. (2021) discovered a substantial relationship between job happiness and the quality of treatment provided, highlighting the crucial role that healthcare personnel' satisfaction plays in promoting optimal patient outcomes. Their findings, which show a significant discontent among 52.7% of healthcare workers, are consistent with Alqarni et al. (2022), who found that mental healthcare personnel reported only 23.4% job satisfaction despite high levels of stress (56.1%) and emotional weariness. This contrast underlines the general issues that all healthcare workers encounter, regardless of their individual roles. The implications of both research are clear: low job satisfaction is more than just a people issue; it has a direct impact on patient care quality, implying that systemic adjustments are required to improve job satisfaction.

Importance of Stress Management and Interventions

Both Halawani et al. (2021) and Alkanfari et al. (2022) emphasize the need of stress management strategies, but they approach the issue from distinct perspectives. Halawani et al. found stress management to be a statistically significant factor impacting job satisfaction ($p = 0.001$), whereas Alkanfari et al. highlighted the effectiveness of different interventions, particularly leadership training and workload management. The systematic review undertaken by Alkanfari et al. reveals a broader intervention perspective, implying that holistic approaches integrating managerial skills and organizational support are critical for increasing job satisfaction. This contrasts with the more personalized approach to stress management outlined in Halawani et al. This mismatch suggests a potential knowledge gap in how organizational structures and management practices might be adjusted to support healthcare workers, implying that future study should look deeper into the structural factors that promote or impede happiness and well-being.

Burnout: Variables and Their Impact

According to Battar et al. (2024), burnout syndrome (BOS) is common among healthcare workers, with a variety of contributing factors including gender, age, and job duties. In contrast to Halawani et al. and Alqarni et al., who concentrated on job satisfaction and stress, Battar et al.'s study on BOS emphasizes the diverse aspect of well-being among healthcare workers. The data indicate that a higher prevalence of burnout is associated with not only personal factors but also professional circumstances such as workload and organizational climate. The discovery that sleep difficulties and discrimination experiences strongly contribute to BOS emphasizes the importance of multifaceted approaches to worker health management. This is especially important when discussing Shdaifat et al. (2023), who demonstrate the interconnected nature of work-related stress, compassion fulfillment, and job satisfaction as they effect burnout and secondary traumatic stress. The complexities of these linkages necessitate comprehensive methods that target both the human and organizational levels, bridging the gap noted in prior research that may have focused primarily on job satisfaction or burnout in isolation.

Comparative Analysis of Methodologies

Methodologically, the evaluated research has both strengths and drawbacks. Cross-sectional designs, as used by Halawani et al. (2021) and Alqarni et al. (2022), provide useful insights into connections but fall short of determining causation. In contrast, Alkanfari et al. (2022) propose a



comprehensive approach based on a systematic assessment of intervention research, providing stronger evidence for beneficial methods in increasing job satisfaction, however longitudinal data to measure long-term effectiveness is still lacking. Shdaifat et al. (2023) use structural equation modeling to present a comprehensive analytical approach that captures intricate interrelationships between stress, compassion satisfaction, and job satisfaction, thereby proposing a more holistic picture of workplace dynamics. These disparities in techniques demonstrate the variety of approaches adopted in exploring these relevant concerns, as well as the importance of diverse research designs that may address causation and long-term repercussions fully.

Conclusions and Future Directions

To summarize, the existing body of research demonstrates an urgent need for systemic improvements within the Saudi healthcare system to promote job satisfaction and prevent burnout. Individual research confirms the idea that addressing the aspects influencing job satisfaction—such as stress management, leadership support, and recognition mechanisms—is critical. Alkanfari et al.'s findings further highlight the importance of comprehensive interventions that focus on the organizational context. Future research should use longitudinal designs to assess causal links and long-term effects of interventions, as well as prioritize the investigation of cultural elements that specifically affect job satisfaction among diverse populations in the healthcare workforce. Finally, tackling these complex difficulties holistically will improve not only the well-being of healthcare personnel, but also the quality of patient treatment in Saudi Arabia.

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