

Theses of Doctoral (PhD) Dissertation

**The research of protective role of the religious
belief/spirituality with regard to burning out**

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I. The aim of the dissertation

The aim of the survey is to study the connection between piety and the burnout. To be more precise, I would like to check the empirical fact, and the - relatively few - statements found in the works consulted (Fekete, S. 1991), according to which faith is a protective factor against burnout for the religious people. I did this research with nurses working beside hospital bed.

My hypothesis was the following:

1. Religion is a protective factor against burnout.
2. The rate of burnout is the smallest in the case of monastic nurses (the people on the highest level of piety), and smaller in the case of religious nurses compared to the less religious nurses.
3. For the entire sample of analysis the score indicative of religious attitude in the community of the monastic nurses are highest than others, and the monastic nurser's rate of burnout are the smallest. The religious belief show linear connection, reciprocal ratio with the burnout.

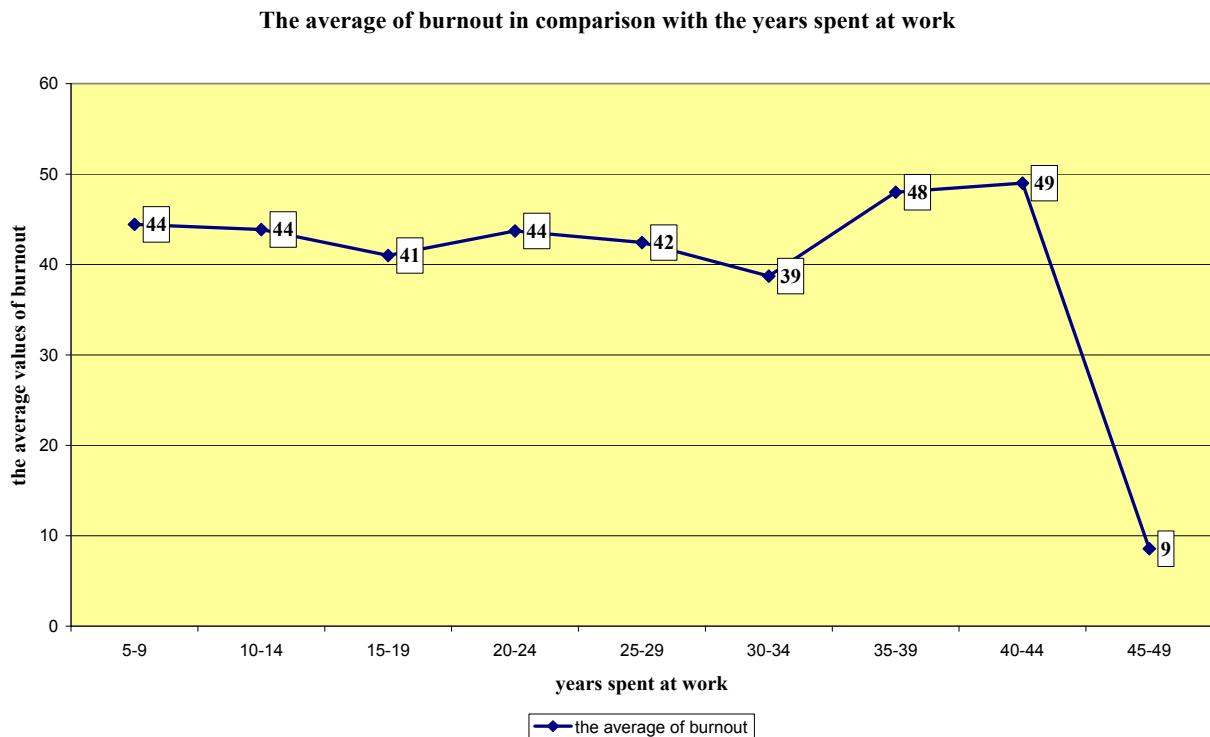


Figure 1. The average of burnout compared to the number of years spent at work

The data above show the connection between the number of years spent at work and the burnout. Interestingly, the extent of burning out is not increasing in a direct proportion to the number of years at work. I get similar results after 10, 20, or 30 years. It refers to the fact that not only the number of years matters in the rate of burnout, but other variables (that is endangering and protective factors) must be searched for. In my study, it was faith and the factor of piety.

- ✓ However, piety has a role in burnout that I measured on the basis of three aspects.
- ✓ The rate of piety is inversely proportional to the burnout. The role of the monastic nurses is that I can include people representing the highest level of piety in the comparison.

I' am aware of the fact that the survey is not spread out to such other, important factors as marital status, socio-cultural factors, etc, but these would have exceeded the frameworks of this present enquiry.

People and circumstances under investigation

The people under investigation work at the following workplaces:

- 1.Monastic nurses from the Order of Franciscan Monastic Nurses /63 people/, who serve in different departments, at different hospitals.
- 2.Nurses working in religious institutions /98 people/.
- 3.Nurses working in state-owned hospitals /189 people/.

The three groups above gave me the opportunity to meet piety of different extent, but the survey itself is about the sample as a whole.

The sample spread out to 350 people. All of them were women. They all met the requirement of working beside hospital bed at least for 5 years. I chose the people under investigation from different departments randomly. The nurses under investigation can be regarded as a homogeneous group of people concerning their qualification, and as a result of that, their financial situation, as well. Thus, I created such homogeneous groups, in which the members were of the same sex, their average age can also be regarded as the same (the average age of all the three groups shows such small difference that, on the basis of statistical analyses, I cannot say that it would be significant), they had the same qualification, and thus the same financial situation, so they were of similar social situation as regards their socio-cultural circumstances.

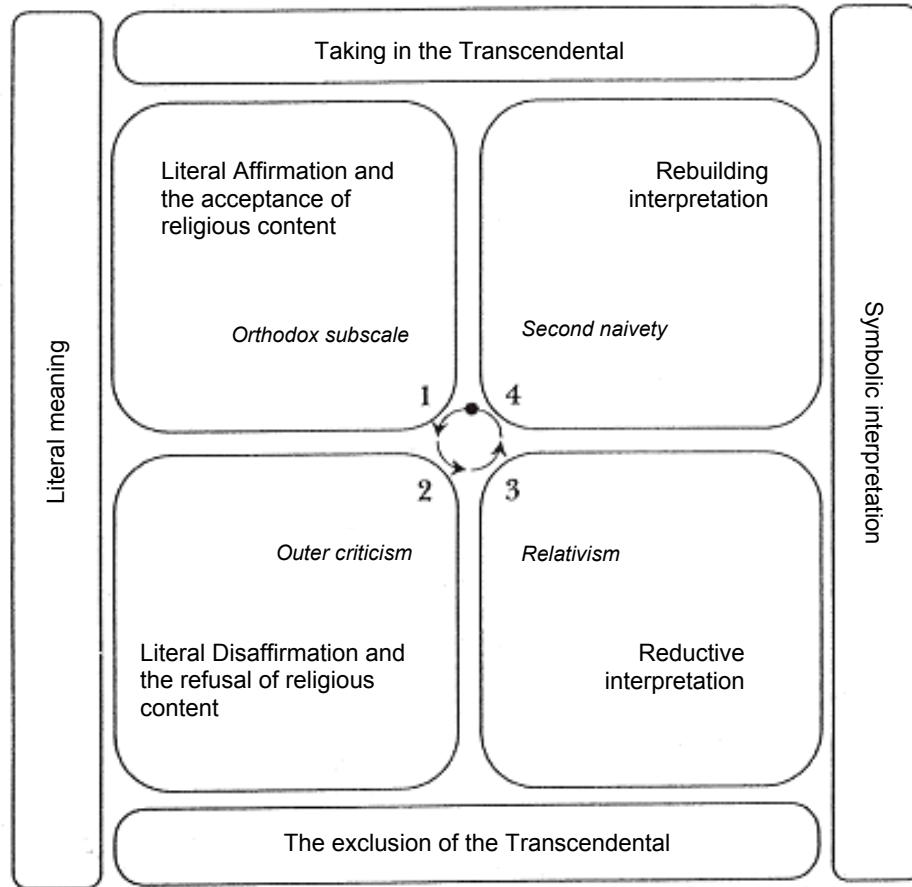
Because of all this, I did not compare these aspects with the rate of burnout one-by-one (though these are also extremely important factors), since my survey aimed at the investigation of piety compared to that.

The participation in the survey was on a voluntary basis. I tried to ensure full anonymity with the help of closed envelopes.

II. Methods

One of the tools of the survey was the Post-Critical Belief Scale (Pszichológiai Szemle, 2003/1), which is a Likert-type scale that contains 33 religious statements. The person under investigation has to express the rate of her assent with the given statement on a 1 to 7 point scale. The scale was created by Dirk Hutsebaut in 1996.

Several theories deal with the religious development of the personality. One of them for me to understand the Post-Critical Belief Scale (the questionnaire that I used) is the review of the Stages of Faith by Fowler, which belongs to the ‘Interactive – Constructive’ theories. Several authors (Schweitzer, 1999) mention the fact that Fowler explicates in detail: as opposed to earlier beliefs, he does not regard faith as something complete that either exists or does not exist, but he believes that it is the result of a developmental process, so everyone may be on the move concerning faith.



The Post-Critical Belief Scale in Wulff's model

Source: Wulff, 1977, 635

Figure 2. The Post-Critical Belief Scale in Wulff's model

Religious attitudes:

- **Orthodox**
- **Outer critical attitude**
- **Relativism**
- **Second naivety stage of faith**

Hutsebout, who created the Post-Critical Belief Scale, places Fowler's stages of faith along Wulff's two central dimensions. This way, I can observe the individual relations to religion in a frame of reference.

Hutsebout places Fowler's stages of faith along Wulff's 2 central dimensions. These are the literal and the symbolic interpretation, and the taking in or the exclusion of the Transcendental. This way, I can observe the individual relations to religion in a frame of reference. (See *Figure 2.*)

The Orthodox or, in its sharp form, fundamentalist religious attitude is characterized by the literal interpretation of religious statements and the acceptance of the religious reality, the Transcendence. It belongs to the 1st quarter in Wulff's model. The person who has outer critical attitude interprets the religious statements literally, as in the Orthodox subscale, but handles its content with quite strong criticism, and mostly refuses what is included in it. It belongs to the 2nd quarter in Wulff's schema. The relativistic religious attitude is typical of the reductive interpretation stage.

...It is opened towards the symbolic interpretation, but handles the content of religious statements with strong criticism, their refusal or acceptance depends on the content. It is opened towards complexity, but still refuses uncertainty (3rd quarter). The attitude that relates to religion with the second naivety expresses Ricoeur's rebuilt piety that is related to Allport's mature piety. The contradictions that are discovered in religion are dissolved in a comprehensive synthesis. He looks at life, his own existence and the world with admiration and astonishment. Wulff classifies this kind of piety into the 4th quarter. (Horváth-Szabó, 2003)

What do these data mean from my survey's perspective?

The faith of those people who are in the Orthodox stage, is family tradition rather than individual conviction.

The outer critical attitude points towards atheism.

The level of religious relativism includes the attraction towards other, new type of religions that are mythologizing or imitating scientism.

Those who belong to the second naivety are the ones who are convinced about their belief, they have mature faith. This faith can be Catholic, Protestant, or any other type of belief that the individual can accept as her own.

Practically, I can say that the development of faith is similar to a flexible spiral, and progressing from the stage of the first naivety with the strengthening of my critical thinking, and through an intellectual searching process, I can get to the stage of the second naivety that dissolves contradictions. Horváth-Szabó, 2003)

In my survey, the *frequency of going to church* and the *judgement of own piety* are regarded as two important index-numbers beside the Post-Critical Belief Scale.

Another means of the survey is the Maslach Burnout Inventory (MBI) (1981). The questionnaire aims at revealing the rate of burnout. Its 22 thesis statements can be valued on a 7-degree scale.

III. Dissertation's results

The total score of burnout within the population under investigation shows normal distribution, as it could be expected from statistical-mathematical point of view.

The burnout did not increase in direct ratio with the number of years spent at work, although, I would think it so. (See *Figure 1.*)

However, the burnout can be described by one number only, the piety of the individual cannot be classified the same way. For this reason, I examined the piety of the people under investigation from three aspects during the survey:

- 1.the estimated value of their own piety
- 2.the frequency of their going to church
- 3.the Post-Critical Belief Scale that shows the stage of the individual's religious development

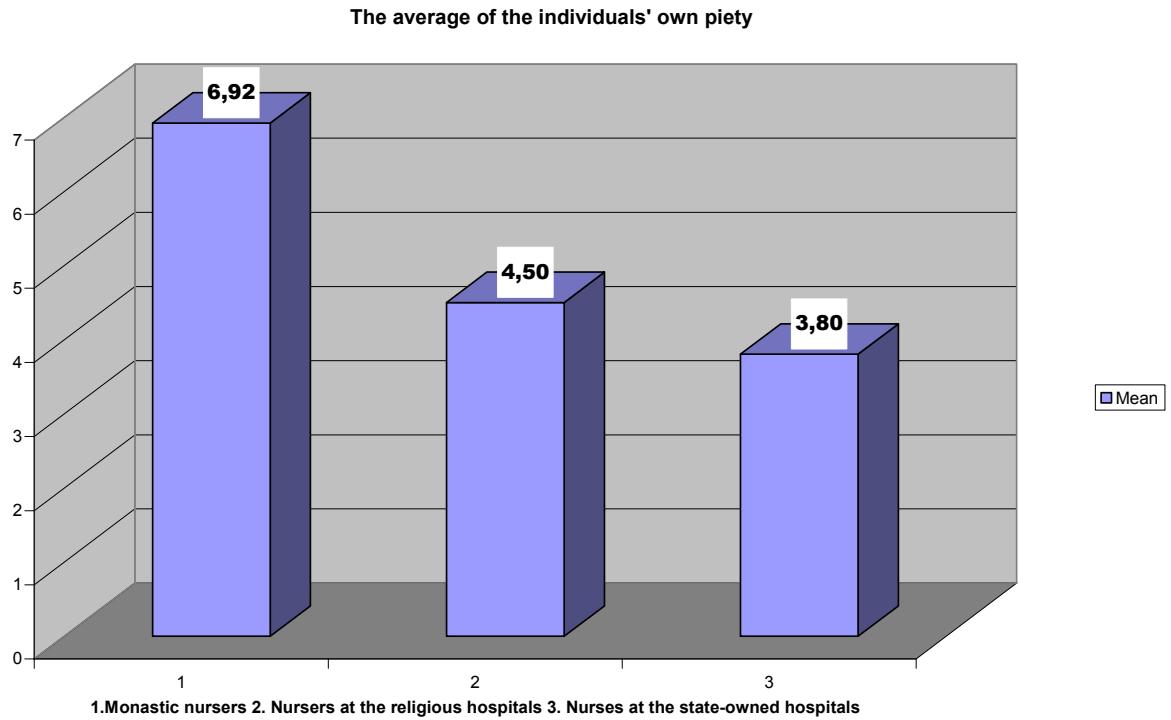


Figure 3. The average of the individuals' own piety

The first aspect of piety is the self-estimated piety. The method belonging to this was a 7-degree scale, where the people had to indicate how religious they judge themselves to be.

I can see that this value is high in the case of monastic nurses: the average was 6.92, in the religious hospital it was lower, 4.50, and it was the lowest in the state-owned hospital, 3.80.

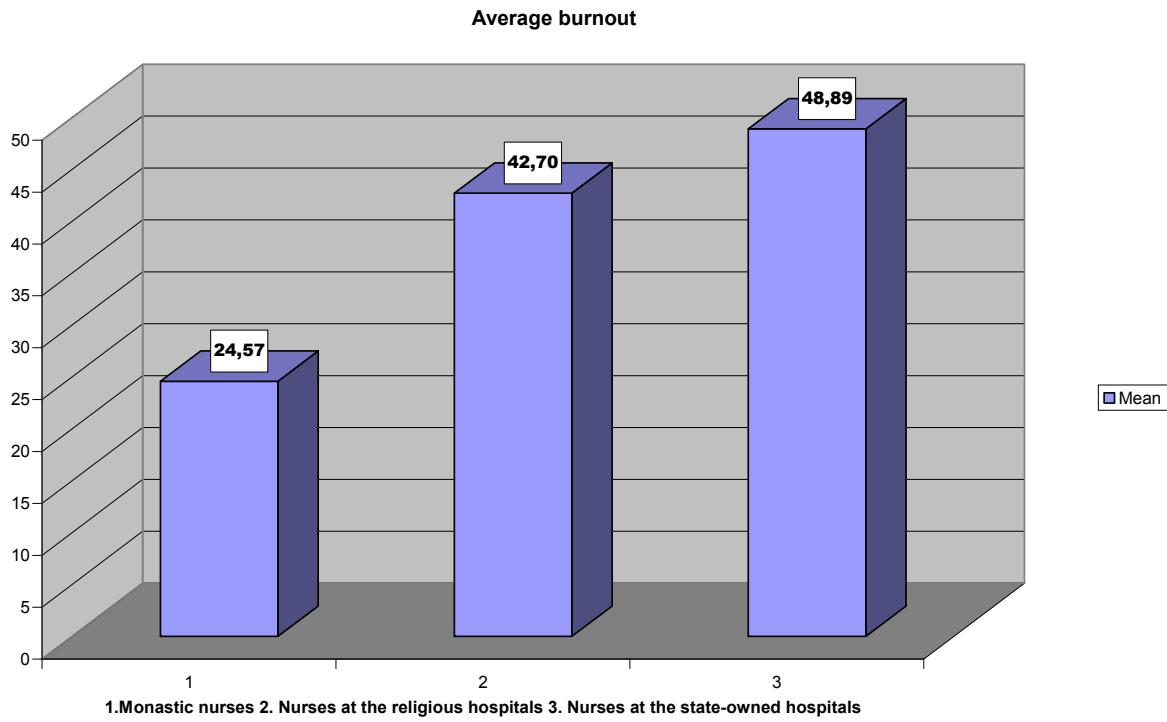


Figure 4. Average burnout

If I compare these data with the number of average burnout, I can observe unequivocal reciprocal ratio between them, so I can see that the monastic nurses who placed themselves to the highest level of piety are the least burnt out, while those who placed themselves to a lower level of piety, the rate of burnout is higher.

The same connection can be seen when comparing the second measured aspect of piety, the church-going, with the rate of burnout. It is presented in the following figures:

The comparison of the self-estimated average of the practice of religion and piety

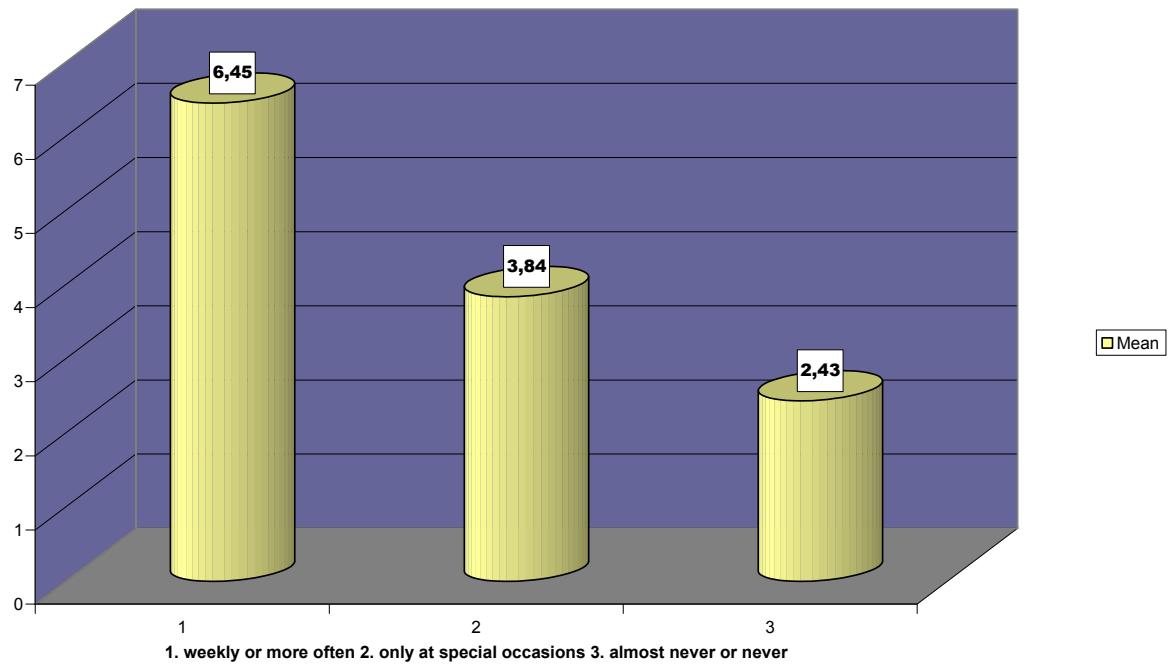


Figure 5. The comparison of the self-estimated average of the practice of religion and piety

Average burnout

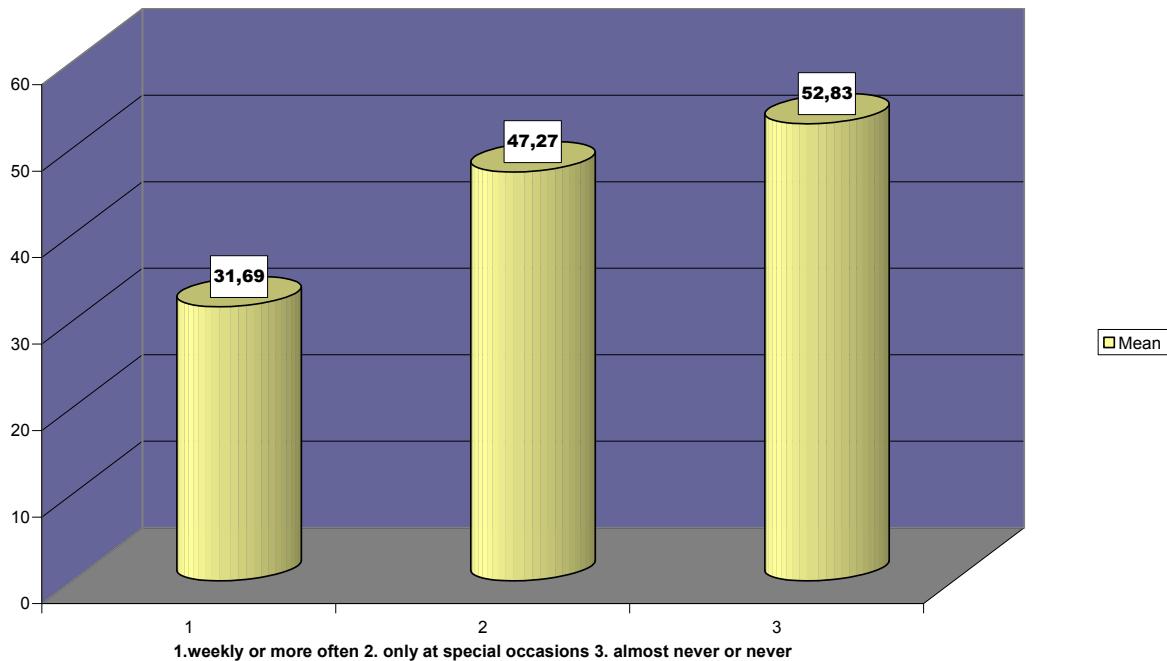


Figure 6. Average burnout

If I compare the burnout averages of the people belonging to the different stages of faith development, the result will be that the Orthodox faith, and the one being in the stage of the second naivety show a defender role against burnout. The value of burnout is the highest among those who have outer critical attitude, which means the level of critical attitude towards religious questions.

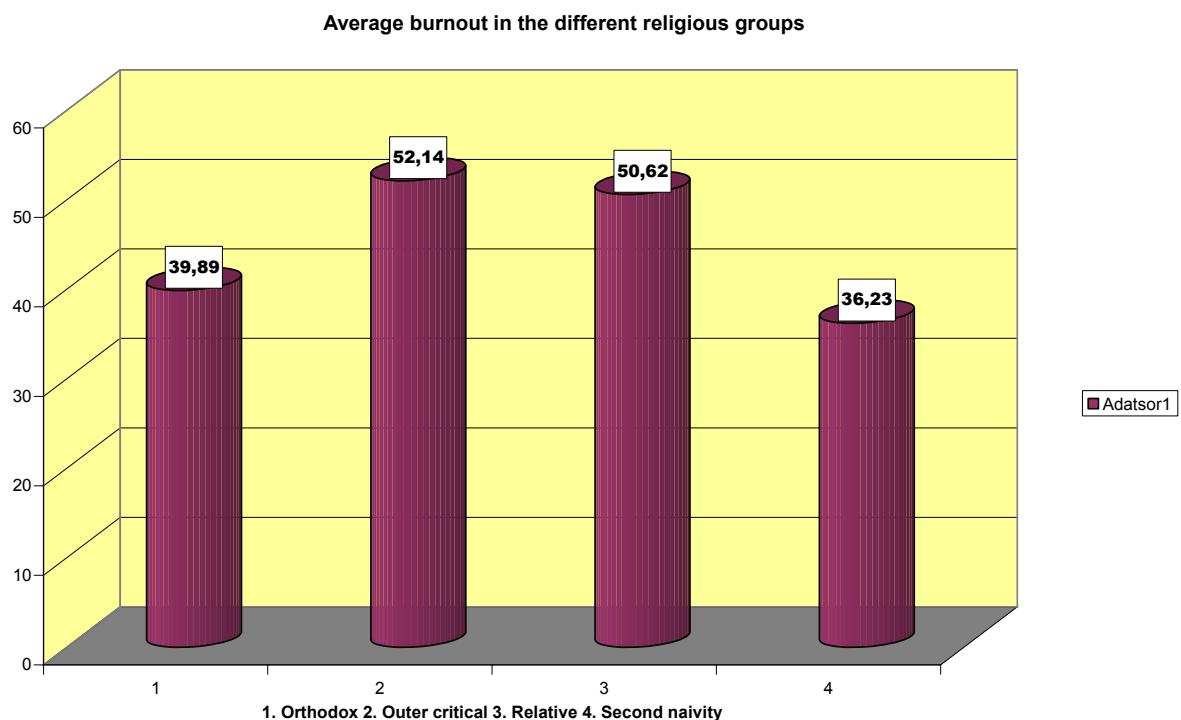


Figure 7. Average burnout in the different religious groups

Finally, let us have a look at the following figure where the conclusion of the whole survey can be seen. I can see linear connection, in this case reciprocal ratio, between the burnout and the religious belief.

Linear connection can be established between the religious belief and the burnout.

With the help of mathematical statistical methods, in the second phase I managed to determine a score indicative of religious attitude, which -- when I compared it to the scores on burn-out -- gave the same inverse proportion between burn-out and religious attitude.

To follow from this, I can say that religious belief is a protective factor as opposed to the burnout in my sample.

This result is true for the entire sample of analysis.

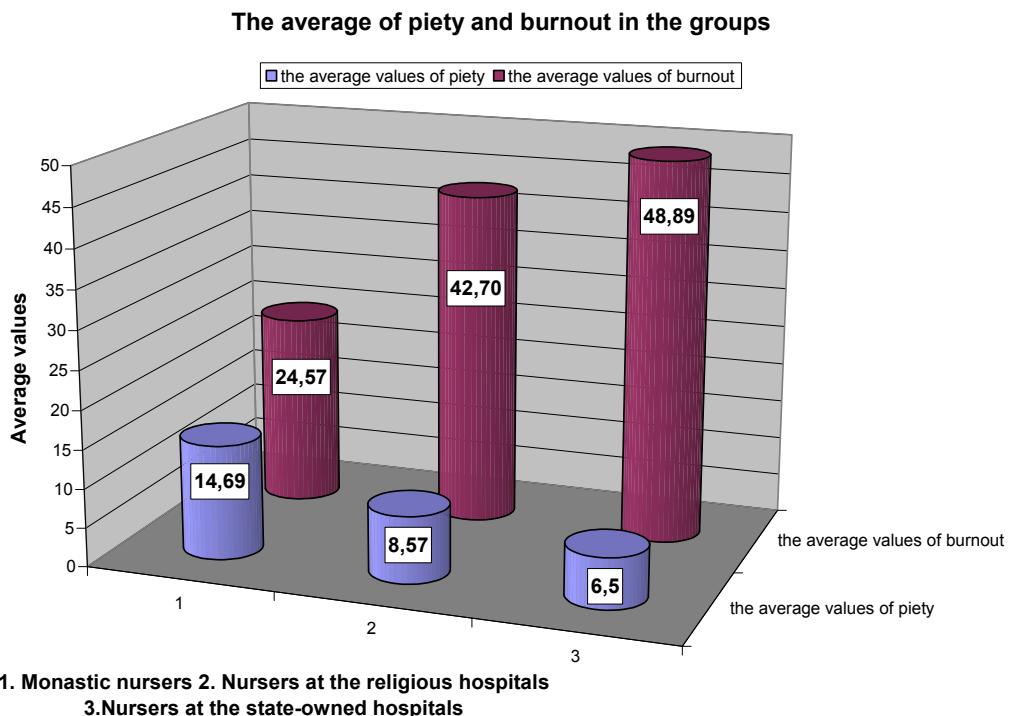


Figure 8. The average points of burnout and the religious belief

To sum it up, I can say that:

I have received answers to my hypothesis from the survey. It means that the statistical enquiries showed that nothing else – *among the factors that I used in my investigation* – is as important in the avoidance of burnout as the religious belief. The results answered the *second hypothesis* as well: the rate of burnout is the lowest in the case of the monastic community, it is ahead of the result of those secular nurses who work in religious institutions, and it is far more

lower than the burnout-rate of the nurses working in state-owned hospitals. The third hypothesis is also true, namely for the entire sample of analysis the score indicative of religious attitude in the community of the monastic nurses are highest than others, and the monastic nurser's rate of burnout are the smallest. The religious belief show linear connection, reciprocal ratio with the burnout.

Summation

What I can conclude for sure in the course of this investigation is that faith, the practical, religious life, and the higher level of the development of faith are unequivocally protective factors against burnout in my sample, as the data also showed it to me in advance.

The hypothesis that was worded in my investigation, namely that religion is a protective factor against burnout, and that the rate of burnout is lower in the case of monks than in the case of less-religious people, could be seen in the evaluation of the survey.

With the help of mathematical statistical methods, in the second phase I managed to determine a score indicative of religious attitude, which -- when I compared it to the scores on burn-out -- gave the same inverse proportion between burn-out and religious attitude.

To follow from this, I can say that religious belief is a protective factor as opposed to the burnout in my sample.

This result is true for the entire sample of analysis. On projecting it to groups, I received a result showing that the extent of burnout is the lowest in the community of the monastic nurses, the burnout of those nurses who work in ecclesiastical institutions is higher than this, and I found that the rate of burnout is the highest among the nurses who work in state-owned hospitals.

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