

Predictors of *burnout* in midwives

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1. INTRODUCTION

Midwives play a central and essential role in the care they provide to women and newborns. They end up being subjected to stressful factors and working conditions that cause emotional exhaustion, instability in the workforce and a reduction in the quality of care, which can culminate in situations of burnout. Burnout is defined as a prolonged response to chronic physical and emotional stressors culminating in exhaustion and feelings of ineffectiveness (Maslach et al., 2001 cit. por CUF, 2019).

This study aims to analyze the factors that trigger burnout and exhaustion in midwives.

2. METHODS

The methodology used was a narrative literature review, using the "PubMed" and "Scopus" databases. The descriptors were combined in the following Boolean equation: ((indicators) AND (burnout) AND (midwives)).



3. RESULTS AND DISCUSSION

The *burnout* syndrome has negative effects on physical and mental health and is related to the quality of care provided, absenteeism rates and sick leave (Martos, N.; García, L.; Urquiza, J.; Román, K.; Baena, L.; Campos, Elena; Solana, Emilia, 2020).

Understanding the factors that favour the development of *burnout* is the key to adjusting organizational policy and regulating practice. The factors identified as triggering *burnout* in midwives were: the high workload, the lack of human and material resources for the demand, the amount of existing work, the lack of continuity of care, low support from peers, experienced colleagues and doctors, conflicts with management and colleagues and the existence of traumatic births (Cramer, E. & Hunter, B., 2019).

Awareness of the harmful factors enables primary prevention and prevents escalation to worse situations. Cognitive-behavioral therapy, building meaningful relationships with women, empowering relationships and continuity of care stand out as mitigating the effects of workload on their emotional health. Organizational interventions such as reducing work demands, redesigning work, flexible control of working hours, adopting new care models, improving communication and managing conflicts are essential to increasing satisfaction and reducing *burnout*.

4. CONCLUSION

Understanding the factors that contribute to *burnout* will allow healthcare organizations to consider their interventions, preventing escalation into aggravated situations. Organizations thus have a key role to play in improving working conditions, valuing professionals and boosting their well-being and work skills.

5. REFERENCES

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