



Workaholism, organizational life and well-being of Norwegian nursing staff

Norwegian
nursing staff

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Abstract

Purpose – The purpose of this study is to examine the relationship of individual difference personality characteristics (Big Five, generalized self-efficacy), workaholism components and work life factors on measures of job satisfaction, burnout and health complaints.

Design/methodology/approach – Data were gathered from 496 nursing staff caring for terminally ill patients in five health care facilities in Norway using questionnaires.

Findings – Hierarchical regression analyses, controlling for personal demographic and work setting characteristics, indicated strong relationships of particular Big Five personality factors, workaholism components and work life factors with both job satisfaction and burnout; health complaints were only predicted by personality factors.

Practical implications – Future research must examine the generalizability of these findings to other samples in different countries. Implications for management and organizations are offered.

Originality/value – This paper contributes to the understanding of personality factors to workaholics in work outcomes and well-being.

Keywords Workaholism, Personality, Job satisfaction, Personal health, Nurses, Norway

Paper type Research paper

Some writers have suggested that workaholics approach their jobs or work differently than do non-workaholics. Workaholics are addicted to, obsessed with, and driven to work because of internal needs, not external organization demands (Fassel, 1990; Killinger, 1991; Oates, 1971; Porter, 1996). The motivations for working long hours tend to be self-protective or negative (Robinson, 1998). It has also been shown that workaholics are more perfectionistic, have greater difficulty in delegating work to others, encounter more conflict and tension in their interpersonal relationships and report higher levels of work stress than do non-workaholics (see Burke, 2000a, and McMillan *et al.*, 2003, for reviews).

There is accumulating research evidence that support some of these conclusions. Burke (1999a) found, using the Spence and Robbins workaholism types (1992), that work addicts scored higher on a measure of beliefs and fears than did both work enthusiasts and enthusiastic addicts. This measure taps aspects of a self-protective or

Preparation of this manuscript was supported in part by the Schulich School of Business, York University and the Department of Psychology, University of Bergen. The authors would like to thank our respondents for making the study possible. Lisa Fiksenbaum assisted with data analysis.



negative motivation such as the need to prove oneself, the need to achieve materialistic trappings of success to feel a sense of worth, and belief that the world is a "dog eat dog", zero-sum game. Work addicts scored higher than work enthusiasts and enthusiastic addicts on measures of perfectionism, non-delegation and job stress as well (Burke, 1999b; Spence and Robbins, 1992).

Some researchers have proposed the existence of different types of workaholic behavior patterns, each having potentially different antecedents and associations with job performance, work and life outcomes, (Naughton, 1987; Scott *et al.*, 1997; Spence and Robbins, 1992). Naughton (1987) presents a typology of workaholism based on the dimensions of career commitment and obsession-compulsion. Job-involved workaholics (high work commitment, low obsession-compulsion) are hypothesized to perform well in demanding jobs, be highly job satisfied with low interest in non-work activities.

Scott *et al.* (1997) propose three types of workaholic behavior patterns: compulsive-dependent, perfectionist and achievement-oriented. They suggest that compulsive-dependent workaholism will be positively related to levels of anxiety, stress, physical and psychological problems and negatively related to job performance and job and life satisfaction. Perfectionist workaholism will be positively related to levels of stress, physical and psychological problems, hostile interpersonal relationships, low job satisfaction and performance and voluntary turnover and absenteeism. Finally, achievement-oriented workaholism will be positively related to physical and psychological health, job and life satisfaction, job performance, low voluntary turnover and pro-social behaviors.

Spence and Robbins (1992) identified three workaholism components based on an extensive review of the literature: work involvement, feeling driven to work and work enjoyment. Profile analysis of scores on these components indicated three workaholic types. Work Addicts score high on work involvement and feeling driven to work and low on work enjoyment. Work enthusiasts score high on work involvement and work enjoyment and low on feeling driven to work. Enthusiastic work addicts score high on all three components. They then offer a number of hypotheses as to how these three workaholic patterns might differ from each other. Thus, work addicts would be more perfectionistic, would experience greater stress and report more physical health symptoms. The existence of different types of workaholic patterns might help reconcile conflicting observations and conclusions cited above. Most writers view workaholism as a stable individual characteristic (Scott *et al.*, 1997; Spence and Robbins, 1992).

A compelling case could be made for devoting more research attention to workaholism (Burke, 2000a; McMillan *et al.*, 2003). The concept has received considerable attention in the popular press. There has also been suggestions that workaholism may be increasing in North America (Schor, 1991; Fassel, 1990). In addition it is not clear whether workaholism has positive or negative organizational consequences (Machlowitz, 1980; Killinger, 1991). There is also debate on the association of workaholic behaviors with a variety of personal well-being indicators such as psychological and physical health and self-esteem. Finally, different types of workaholic behavior patterns likely exist, each having unique antecedents and outcomes. The question of whether workaholism can, or should be reduced, had also been raised (Porter, 1996; Killinger, 1991; Seybold and Salomone, 1994).

A number of antecedents of workaholism have been examined in previous investigations (see Burke, 2000a, and McMillan *et al.*, 2003, for reviews). These include personal demographic characteristics (Burke, 1999b; Spence and Robbins, 1992), work situation characteristics (Burke, 1999b, Spence and Robbins, 1992), feelings of inadequacy and needs to prove oneself (Burke, 1999a; Robinson, 1998), and workplace values (Burke, 2001a; Schaefer and Fassel, 1988). Personal demographic and work situation characteristics have generally shown no relationship with the three workaholism types.

There has been considerable speculation and some research findings on the relationship of workaholism to work experiences and satisfactions. It has been suggested that workaholics are more perfectionistic, have greater difficulty in delegating job responsibilities and relying on others and experience more job stress (Porter, 1996; Scott *et al.*, 1997; Spence and Robbins, 1992; Killinger, 1991). It is not clear, however, how levels of workaholism relate to job and career satisfaction and progress. Some (e.g. Machlowitz, 1980) report that workaholics are highly satisfied with work and career; others (e.g. Burke, 2001b; Killinger, 1991; McMillan *et al.*, 2002; Porter, 1996; Schaefer and Fassel, 1988) offer a more negative picture.

Finally, there is some agreement that workaholism is likely to be associated with adverse health consequences (Burke, 2000b; Robinson, 1998; Killinger, 1991; Spence and Robbins, 1992) and less satisfaction with family and other relationships (Killinger, 1991; Robinson, 1998).

Personality factors

There is accumulating evidence that almost all personality dimensions can be subsumed under five factors termed the Big Five: neuroticism, extraversion, openness to experience, agreeableness, and conscientiousness (Digman, 1990; Goldberg, 1990). Three of these (neuroticism, extraversion, conscientiousness) seem particularly relevant to career success (Barrick and Mount, 1991; Barrick and Ryan, 2003). Though the relationship of these five personality factors and workaholism has not been examined.

- (1) *Neuroticism* is associated with instability, stress proneness, person insecurity and depression (a lack of positive psychological adjustment, and emotional stability). Likely to experience negative moods and physical symptoms. More strongly affected by negative life events, and to have negative moods linger.
- (2) *Extraversion* is associated with sociability, dominance, ambitiousness, and assertiveness. Related to positive emotions, having more friends, and taking on leadership roles.
- (3) *Conscientiousness* is typically related to job performance. It is associated with persistence, dependability and being organized.
- (4) *Agreeableness* is related to being cooperative, caring and likeable.
- (5) *Openness to experience* is associated with being intellectual, imaginative and non-conforming.

Judge *et al.* (1999) examined the relationship of the Big Five and general mental ability and career success. Two aspects of career success were considered: intrinsic (job satisfaction) and extrinsic (income, occupational status). Conscientiousness positively

predicted intrinsic and extrinsic career success; neuroticism negatively predicted extrinsic success; and general mental ability positively predicted extrinsic career success. Personality was related to career success controlling for general mental ability. Adult measures of the Big Five more strongly predicted career success than did childhood measures, but both contributed unique variance in explaining career success.

Generalized self-efficacy

Considerable research has also been devoted to examining the effects of self-efficacy in the workplace (Schwarzer, 1992). Individuals scoring higher on generalized self-efficacy report greater commitment to their work and more satisfaction from their work. One might make the case that self-efficacy would be positively related to particular components of workaholism as well as to work and well-being outcomes.

Workaholism

There is accumulating research evidence indicating a relationship between workaholism components or behaviors and psychological ill health (see Burke, 2000a, b; McMillan *et al.*, 2003, for reviews). It was expected that nursing staff scoring higher on particular workaholism components would indicate different levels of psychological health.

Organizational life factors

Maslach and Leiter (1997) contend that burnout is a gradual process of loss resulting from an increasing mismatch between the needs of employees and the demands of the organization. Individuals do not begin a job feeling burnout; instead they are typically involved, energetic and effective. Energy, involvement and efficacy are the opposites of exhaustion, cynicism and lacking in feelings of accomplishment. Burnout is the presence of negative emotions and the absence of positive emotions. Burnout results in a downward spiral of negative emotions.

Maslach and Leiter suggest six organizational life factors as the sources of burnout. These were: work overload, lack of control, insufficient rewards and recognition, unfairness, breakdown in community and value conflicts between an employee and the organization.

Work satisfaction and health

This study examines three work and health outcomes: job satisfaction, burnout and subjective health complaints. There is considerable evidence that both individual differences and work environment factors affect these outcomes (Schaufeli and Enzmann, 1998).

Research model

A research model was developed to guide both selection of measures and data analyses (see Figure 1). In this model, predictors were considered in blocks entered in a specific order. These predictors were: personal demographic characteristics, work situation characteristics, personality factors, workaholism components and organizational life factors.

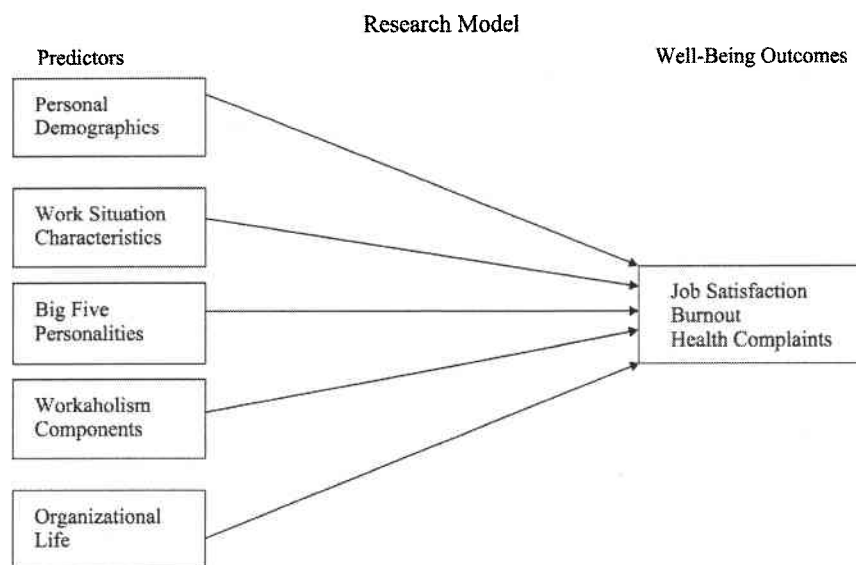


Figure 1.
Research model

Method

Procedure

Data were collected from a sample of 496 nursing home employees in Norway using anonymous questionnaires. Respondents worked in one of five facilities of a single provider of nursing care. Clients in these units had severe health problems with most living less than three years. A total of 1,022 questionnaires were distributed yielding a response rate of about fifty percent when respondents who had left their jobs or were on sick leave were excluded.

Respondents

Table I presents the demographic characteristics of the sample. The sample was predominantly female (89 percent), married (68 percent), most had children (74 percent), had five or fewer years of unit tenure (59 percent), fell between 36 and 55 years of age (53 percent), worked half time or more (71 percent), had no leadership responsibilities (69 percent), worked both day and night shifts (60 percent), and were in nursing roles (75 percent),

Measures

Personality factors

Five personality factors were measured by scales developed by Costa and McCrae (1992) and translated into Norwegian. Respondents indicated their agreement with each item on a five-point scale (1 = strongly disagree, 5 = strongly agree).

- (1) *Neuroticism* was measured by 12 items ($\alpha = 0.82$). One item was "I feel inferior to others".
- (2) *Extraversion* was also measured by 12 items ($\alpha = 0.47$). An item was "I like to have a lot of people around me".

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	<i>n</i>	%
<i>Gender</i>		
Male	39	8.1
Female	442	89.1
<i>Age</i>		
25 or less	76	16.4
26-35	81	17.5
36-45	98	21.2
46-55	146	31.5
56 or older	62	13.4
<i>Marital status</i>		
Married	326	68.2
Divorced	48	10.0
Widowed	8	1.7
Single	96	20.1
<i>Children</i>		
Yes	346	73.8
No	123	26.2
<i>Number of children</i>		
1	52	14.9
2	146	42.8
3	107	30.3
4 or more	42	12.0
<i>Position</i>		
Nurse	67	14.1
Assistant nurse	175	35.3
Nurse helper	112	23.5
Administrative	35	7.4
Other	87	18.3
<i>Unit tenure</i>		
1 year or less	92	19.5
2-5	168	35.6
6-10	98	20.7
10 or more	114	24.2
<i>Work status</i>		
25% or less	52	11.3
26-50%	102	22.0
51-75%	98	21.3
75-100%	209	45.3
<i>Shift type</i>		
Days	121	25.4
Day/night	285	29.9
Night	49	10.3
Day/eve/night	15	3.2
Eve/night	6	1.3
<i>Leader</i>		
No	324	69.1
Shift	67	14.3
Unit	59	12.6
Department	19	4.1

Table I.
Demographic
characteristics of sample

- (3) *Openness* to new experiences was measured by 12 items ($\alpha = 0.62$). One item was "I am intrigued by the patterns I find in art and nature".
- (4) *Agreeableness* was assessed by twelve items ($\alpha = 0.65$). An item was "I try to be courteous to everyone I meet".
- (5) *Conscientiousness* was also measured by twelve items ($\alpha = 0.71$). One item was "I keep my belongings clean and neat".
- (6) *General self-efficacy* was measured by a ten item scale ($\alpha = 0.85$) developed by Schwarzer (1992). Respondents indicated on a four-point scale (1 = not at all true, 4 = very true) how true each item was. One item was "I can always manage to solve difficult problems if I try hard enough."

Workaholism components

Spence and Robbins (1992) derive three workaholism components on the basis of an extensive literature review: work involvement, feeling driven to work and work enjoyment. Their measures were used in this study.

- (1) *Work involvement* ($\alpha = 0.46$) had eight items (e.g. "I get bored and restless on vacations when I haven't anything productive to do").
- (2) *Feeling driven to work* ($\alpha = 0.82$) had seven items (e.g. "I often feel that there's something inside me that drives me to work hard").
- (3) *Work enjoyment* ($\alpha = 0.78$) had seven items (e.g. "My job is more like fun than work").

Responses were made on a five point Likert scale (1 = Strongly disagree, 3 = Neither agree nor disagree, 5 = strongly agree).

Organizational life experiences

Six aspects of work life were measured by scales developed by Maslach and Leiter (1997).

- (1) *Workload* was measured by six items ($\alpha = 0.77$). One item was "This job demands more than I can fit into a work day".
- (2) *Control* was measured by three items ($\alpha = 0.55$). "I am my own boss when it comes to pursuing the tasks that I am assigned".
- (3) *Reward and recognition* was assessed by four items ($\alpha = 0.82$). "The recognition and reward people receive reflect their contribution to the organization".
- (4) *Fairness* was assessed by six items ($\alpha = 0.78$). "Respect is evident in relationships within the organization".
- (5) *Community* was measured by five items ($\alpha = 0.68$). "This organization does a good job of responding to the distinct cultural perspectives of its client population".
- (6) *Values* was measured by five items ($\alpha = 0.77$). "This job provides me with the opportunities to do work that I feel is important".

Responses were made on a five point Likert scale (1 = Strongly disagree, 3 = Neither agree nor disagree, 5 = strongly agree).

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Work outcomes

- *Job Satisfaction* was measured by a five item scale ($\alpha = 0.82$) developed by Quinn and Staines (1979). One item was "All in all, how satisfied are you with your job?" (1 = Very dissatisfied, 5 = Very satisfied).

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Burnout

Burnout was measured by the Bergen Burnout Indicator (BBI), a 25 item scale developed ($\alpha = 0.90$) by Matthiesen and Dyregrov (1992). Responses were made on a six point Likert scale (1 = Disagree totally, 6 = Agree totally). Sample items were "I feel tired when I am at work". "I frequently question the value of my work". And "I feel that I am gradually losing interest in my clients/patients".

Subjective health complaints

Subjective health complaints was measured by a 29 item scale ($\alpha = 0.87$) developed by Eriksen *et al.* (1999) and Eriksen *et al.* (1998). Respondents indicated how frequently they had experienced each complaint during the past month on a four-point scale (0 = not at all, 3 = serious). Items included neck pain and dizziness.

Results

Means, standard deviations and intercorrelations of study variables are presented in Tables II and III.

Regression analyses

Hierarchical regression analyses were undertaken in which the three outcomes (job satisfaction, burnout, subjective health complaints) were regressed on five blocks of predictors entered in a specified order. The first block ($n = 4$) consisted of personal demographics (e.g. age, gender, marital status). The second block of predictors ($n = 2$) comprised work situation characteristics (e.g. unit tenure, work status). The third block of predictors ($n = 5$) consisted of the personality factors (Big Five). The fourth block of predictors ($n = 3$) were the workaholism components. The fifth and last block of predictors were comprised of the organizational life factors ($n = 6$). The first two blocks of predictors served as control variables before considering the relationship of the other predictors to the three work and health outcomes. When a block of predictors accounted for a significant amount or increment in explained variance on a particular outcome ($p < 0.05$), individual predictors within such blocks having significant and independent relationships with these outcomes ($p < 0.05$) were identified. The results of these analyses are shown in Table IV.

Job satisfaction

The following comments are offered in summary. Four blocks of predictors accounted for significant increments in explained variance on job satisfaction (not personal demographics). Nursing staff scoring lower on Openness and nursing staff scoring higher on agreeableness indicated greater job satisfaction ($\beta_s = -0.18$ and 0.10 , respectively). Nursing staff reporting more joy in work and nursing staff reporting less feeling driven to work also were more job satisfied ($\beta_s = 0.32$ and -0.18 respectively). Finally, nursing staff indicating greater fairness, indicating greater reward and

	<i>x</i>	SD	<i>n</i>	2	3	4	5	8	9	10	11
<i>Personal demographics</i>											
1. Age	41.8	12.41	463	0.48***	0.32***	-0.04	-0.19***	-0.16***	-0.10*	0.08	0.07
<i>Work situation characteristics</i>											
2. Unit tenure	6.9	7.14	472	-	0.17***	0.01	-0.10*	0.08	0.08	0.03	-0.04
3. Work status	70.9	28.61	461	-	-	-0.03	-0.02	-0.07	-0.04	0.04	0.05
<i>Personality</i>											
4. Neuroticism	19.2	6.86	474	-	-	-	-0.42***	-0.10*	-0.43***	-0.18**	0.36***
5. Extraversion	32.0	5.70	474	-	-	-	-	0.16***	0.36***	0.11*	-0.04
6. Conscientiousness	34.5	4.58	475	-	-	-	-	-0.01	0.25***	0.04	0.02
7. Agreeableness	36.4	4.22	476	-	-	-	-	0.04	0.06	0.10*	-0.14**
8. Openness	25.3	4.97	473	-	-	-	-	-	0.20***	0.04	-0.08
9. Self-efficacy	29.6	3.62	460	-	-	-	-	-	-	0.03	0.01
<i>Workaholism components</i>											
10. Work involvement	24.4	4.36	472	-	-	-	-	-	-	-	0.15**
11. Feeling driven	22.3	6.15	471	-	-	-	-	-	-	-	-
12. Work enjoyment	20.3	4.82	472	-	-	-	-	-	-	-	-
<i>Organizational life</i>											
13. Workload	17.6	4.62	475	-	-	-	-	-	-	-	-
14. Control	10.7	6.15	471	-	-	-	-	-	-	-	-
15. Rewards and recognition	14.1	3.06	472	-	-	-	-	-	-	-	-
16. Fairness	16.9	2.22	473	-	-	-	-	-	-	-	-
17. Community	19.4	3.71	474	-	-	-	-	-	-	-	-
18. Values	20.3	3.44	463	-	-	-	-	-	-	-	-
<i>Outcomes</i>											
19. Job satisfaction	13.6	2.61	461	-	-	-	-	-	-	-	-
20. Burnout	68.2	22.8	469	-	-	-	-	-	-	-	-
21. Health complaints	14.2	10.42	468	-	-	-	-	-	-	-	-

Notes: * $p < 0.05$; n_s range from 440 to 474; ** $p < 0.01$; *** $p < 0.001$

Table II.
Means, standard deviations and intercorrelations of study variables

Table III.
Means, standard deviations and intercorrelations of study variables

	<i>x</i>	SD	<i>n</i>	12	13	14	15	16	17	18	19	20	21
<i>Personal demographics</i>													
1. Age	41.8	12.41	463	0.02	0.24***	-0.08	-0.08	-0.06	-0.07	-0.02	-0.02	0.09	0.03
<i>Work situation characteristics</i>													
2. Unit tenure	6.9	7.14	472	0.09	0.21***	-0.06	-0.12**	-0.08	-0.17***	-0.09	-0.10*	0.20***	0.14**
3. Work status	70.9	28.61	461	0.04	0.18***	0.03	-0.12*	-0.04	0.01	0.06	0.00	0.08	0.00
<i>Personality</i>													
4. Neuroticism	19.2	6.86	474	-0.06	0.25***	-0.28***	-0.21***	-0.22***	-0.18***	-0.24***	-0.24***	0.45***	0.44**
5. Extraversion	32.0	5.70	474	0.21***	-0.05	0.15***	0.16***	0.17***	0.04	0.12**	0.11*	-0.16***	-0.13**
6. Conscientiousness	34.5	4.58	475	0.07	0.06	0.13**	0.16	0.19***	0.00	0.14**	0.08	-0.12*	-0.06
7. Agreeableness	36.4	4.22	476	0.02	-0.05	0.09*	0.19***	0.19*	0.02	0.16***	0.19***	-0.24***	-0.09
8. Openness	25.3	4.97	473	0.11*	0.05	-0.01	-0.02	0.00	0.02	0.05	-0.13**	0.06	0.01
9. Self-efficacy	29.6	3.62	460	0.27***	-0.11*	0.24***	0.11*	0.09*	0.06	0.08	0.08	-0.15	-0.13**
<i>Workaholism components</i>													
10. Work involvement	24.4	4.36	472	0.22***	0.07	0.12*	0.12*	0.04	0.11*	0.16**	0.22***	-0.18**	-0.10*
11. Feeling driven	22.3	6.15	471	0.15	0.34***	-0.18***	-0.15***	-0.09	-0.18***	-0.16***	0.24***	0.42***	0.22***
12. Work enjoyment	20.3	4.82	472	-	-0.14**	0.13*	0.14**	0.05	0.12**	0.17**	0.35***	-0.20**	-0.12*
<i>Organizational life</i>													
13. Workload	17.6	4.62	475	-	-	-0.22***	-0.13**	-0.14*	-0.28***	-0.19***	-0.32***	0.57***	0.24***
14. Control	10.7	6.15	471	-	-	-	0.38***	0.25***	0.31***	0.32***	0.25***	-0.26***	-0.11*
<i>Rewards and recognition</i>													
15. Fairness	14.1	3.06	472	-	-	-	-	0.29***	0.40***	0.29***	0.32***	-0.32***	-0.14*
16. Community	16.9	2.22	473	-	-	-	-	-	0.31***	0.45***	0.24***	-0.26***	-0.10*
17. Values	19.4	3.71	474	-	-	-	-	-	-	0.41***	0.34***	-0.35***	-0.14*
18. Outcomes	20.3	3.44	463	-	-	-	-	-	-	-	0.38***	-0.36***	0.21***
<i>Outcomes</i>													
19. Job satisfaction	13.6	2.61	461	-	-	-	-	-	-	-	-	-0.60***	-0.30**
20. Burnout	68.2	22.8	469	-	-	-	-	-	-	-	-	-	0.43***
21. Health complaints	14.2	10.42	468	-	-	-	-	-	-	-	-	-	-

Notes: * $p < 0.05$, n_s range from 440 to 474; ** $p < 0.01$; *** $p < 0.001$

	<i>r</i>	<i>r</i> ²	Δr^2	<i>p</i>
Job satisfaction (<i>n</i> = 364)				
Personal demographics	0.08	0.01	0.01	NS
Situational characteristics	0.18	0.03	0.02	0.05
Personality factors	0.36	0.13	0.10	0.001
Openness (-0.18)				
Agreeableness (0.10)				
Workaholism components	0.56	0.32	0.19	0.001
Joy (0.32)				
Driven (-0.18)				
Organizational life	0.66	0.43	0.11	0.001
Fairness (0.15)				
Reward (0.12)				
Values (0.10)				
Burnout (<i>n</i> = 370)				
Personal demographics	0.09	0.01	0.01	NS
Situational characteristics	0.23	0.05	0.04	0.001
Tenure (0.08)				
Personality factors	0.56	0.32	0.27	0.001
Neuroticism (0.24)				
Openness (0.11)				
Conscientious (-0.09)				
Agreeableness (-0.08)				
Workaholism components	0.68	0.46	0.14	0.001
Driven (0.19)				
Joy (-0.15)				
Organizational life	0.79	0.62	0.16	0.001
Workload (0.36)				
Rewards (-0.13)				
Values (-0.12)				
Fairness (-0.11)				
Health complaints (<i>n</i> =370)				
Personal demographics	0.12	0.01	0.01	NS
Situational characteristics	0.18	0.03	0.02	NS
Personality factors	0.52	0.27	0.24	0.001
Neuroticism (0.44)				
Openness (0.10)				
Workaholism components	0.54	0.29	0.02	0.01
Organizational life	0.55	0.30	0.01	NS

Table IV.
Predictors of work
satisfaction and health

recognition and those indicating a stronger value fit with their organization indicated more job satisfaction (β s = 0.15, 12 and 10, respectively).

Burnout

Four blocks of predictors accounted for significant increments in explained variance on burnout (not personal demographics). Nursing staff having longer unit tenure indicated higher levels of burnout ($\beta = 0.08$). Nursing staff scoring higher on neuroticism and openness, those scoring lower on conscientiousness, and those scoring lower on agreeableness also indicated greater burnout (β s = 0.24, 0.11, -0.09 and -0.08 respectively). Nursing staff scoring higher on feeling driven and nursing staff

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scoring lower on joy in work reported greater burnout (β s = 0.19 and -0.15 respectively). Finally nursing staff indicating greater workload, those indicating less rewards and recognition, those indicating less value fit with their organization and those reporting less fairness indicated higher levels of burnout (β s = 0.36, -0.13 , -0.12 and -0.11 respectively).

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Subjective health complaints

Only two blocks of predictors accounted for a significant amount or increment in explained variance on subjective health complaints (personality factors, workaholism components). Nursing staff scoring higher on neuroticism and those scoring higher on openness also indicated more health complaints (β s = 0.44 and 0.10, respectively). None of the workaholism components had an independent and significant relationship with subjective health complaints. Three other observations are worth noting.

First, the five blocks of predictors accounted for a relatively large amount of explained variance on all three outcome measures. Second, the predictors accounted for more variance on job satisfaction and burnout than on health complaints. Third, the personality factors generally accounted for the most variance on all outcome measures, with the workaholism components and work environment measures contributing lower levels of explained variance.

Discussion

This research examined the relationship of stable aspects of personality, workaholism components and work life experiences on work and health outcomes. Our approach was guided by the increasing efforts of researchers to include both personality and work life factors to further our understanding of behavior in the workplace.

Our findings were consistent with previous conclusions as well as adding to our understanding of personality, work experiences and health. As reported by others, personal demographic and work situation characteristics were relatively weak and inconsistent predictors of job satisfaction, burnout and health complaints (see Burke, 2000a; Schaufeli and Enzmann, 1998, for similar conclusions).

Research has only begun to examine the role of stable personality factors in explaining work and health outcomes. The Big Five personality framework seems particularly promising in this regard. Neuroticism was associated with both levels of burnout and health complaints while agreeableness was associated with higher levels of job satisfaction. Interestingly, openness appeared to function in much the same way as neuroticism. That is, nursing staff reporting higher levels of openness indicated more negative outcomes. Future research is needed here to determine the robustness of these findings.

Workaholism components were found to predict work and health outcomes in this sample in ways consistent with earlier conclusions. That is respondents scoring higher on feeling driven to work indicated more distress while those scoring higher on joy in work, not surprisingly reported more favorable outcomes.

A number of investigations have demonstrated a somewhat consistent relationship between the work environment and satisfaction and health indicators (see Schaufeli and Enzmann, 1998). Our data support the suggestions of Maslach and Leiter (1997) that the specific work life features they propose as sources of burnout predict other work and health outcomes as well.

More general comments on the findings shown in Tables II and III should be noted. First, more variance was accounted for in both job satisfaction and burnout than in subjective health complaints; the latter are likely affected by variables not included in the study. Second, personality factors accounted for more explained variance on the two health outcomes (burnout, health complaints) than on the work outcome while the workaholism components accounted for more variance on the work outcome (job satisfaction) than did the other blocks of predictors. Third, variables within the same block of predictors often had opposite relationships with a given outcome (e.g. feeling driven and joy in work; openness and agreeableness) highlighting the complex patterns of relationship among the variables under study. Fourth, generalized self-efficacy did not predict any of the work and health outcomes.

Practical implications

While personality factors are likely to be difficult to modify, organizations can impact on the work life experiences of their employees. As Maslach and Leiter (1997) suggest, the goal of an organizational initiative is to build management structures and processes that promote engagement and prevent burnout. This involves exposing staff to a manageable and sustainable workload, developing in staff a feeling of choice and control, providing recognition and rewards to staff, building a sense of community, promoting a sense of fairness, respect and justice in the workplace, and creating meaningful and valued work.

Limitations of the study

Some limitations of the study need to be noted to help put the findings in a larger context. First, all data were collected using questionnaires opening up the possibility of response set consistencies. Second, some of the measures had levels of reliability that fell below the generally accepted value of 0.70. Third, the data was collected at one point in time making it impossible to address issues of causality. Fourth, it is not clear the extent to which these findings would generalize to other occupational groups in other countries.

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