# Burnout, Depression, and Stress in Emergency Department Nurses and the impact on quality care

Nawal Lafi Ali Al-Atawi<sup>1</sup>, Huda Ali Mohammed Al-Atawi<sup>2</sup>, Masirah Radi Al-Helili Al-Slopi<sup>3</sup>, melha mfade sleem al shrari<sup>4</sup>, Haya Abdullah Saad AlDwail<sup>5</sup>, Jamila Abdullah Al-Ruwaili<sup>6</sup>, Mohra Sayyaf Sharif Al-Muawi<sup>7</sup>, Hazlaa Muhammad Ali Al-Shahrani<sup>8</sup>, Mamdouh Musa Hamid Al-Banaqi<sup>9</sup>, Aisha Othman Ahmed Barnawi<sup>10</sup>, Naif Hazam Haliban Al-Anzi<sup>11</sup>, Afra Domairy Helal alrwily<sup>12</sup>, Eman Rajanmardy Alanazi<sup>13</sup>

- 1. General Nursing, Al-Aziziyah Health Center, Tabuk, Saudi Arabia.
- 2. General Nursing, Al-Aziziyah Health Center, Tabuk, Saudi Arabia
- 3. Nursing Technician, Al-Uwaigilah General Hospital, Saudi Arabia
- 4. Nursing Technician, Hadithah General Hospital, Al-Qurayyat, Saudi Arabia
- 5. Nursing Specialist, Al-Rawshan Hospital, Bisha, Saudi Arabia
- 6. Nursing, Health Center Al Wadi, Riyadh, Saudi Arabia
- 7. General Nursing Technician, Al-Shadakhah Health Center, Bisha, Asir, Saudi Arabia
- 8. General Nursing Technician, Al-Shadakhah Health Center, Bisha, Asir, Saudi Arabia
- 9. Nursing, Northern Borders, Al-Shu'bah Health Center, Saudi Arabia.
- 10. Nursing Technician, Al-Safiyah Health Center Urgent Care, Medina, Saudi Arabia
- 11. Nursing Technician, Al-Shu'bah Center, Saudi Arabia.
- 12. Nursing Specialist, General Suwair Hospital, Skaka Aljouf, Saudi Arabia
- 13. Nursing Technician, Tarif General Hospital, Tarif, Saudi Arabia

#### Abstract

The emergency department (ED) is a high-stress environment where nurses are constantly exposed to critical patient care situations, long working hours, and resource constraints. These factors contribute to high levels of burnout, depression, and chronic stress among ED nurses, which not only affect their mental and physical well-being but also have significant implications for the quality of patient care. Burnout, characterized by emotional exhaustion, cynicism, and reduced personal accomplishment, is particularly prevalent in this setting due to the intense emotional labor and high demands placed on nurses. Depression, often stemming from chronic stress and exposure to suffering, further exacerbates the challenges faced by nurses, leading to impaired cognitive function and reduced job performance. Chronic stress, if unmanaged, can result in serious health issues, including cardiovascular disease and weakened immune function, further diminishing nurses' ability to provide effective care. The impact of these conditions on patient care is profound. Nurses experiencing burnout, depression, or stress are more likely to make errors, miss critical details, and provide suboptimal care, leading to adverse patient outcomes such as increased mortality rates, medication errors, and longer hospital stays. Additionally, the emotional detachment associated with burnout can hinder the

establishment of therapeutic relationships with patients, compromising the overall quality of care. The ripple effects extend to the healthcare team, fostering a toxic work environment characterized by poor communication and decreased collaboration. Addressing these challenges requires a multifaceted approach, including organizational support, mental health resources, and leadership initiatives. Strategies such as wellness programs, flexible scheduling, and resilience training can help mitigate the effects of burnout, depression, and

1

stress. By prioritizing the mental health of ED nurses and fostering a supportive work environment, healthcare organizations can enhance nurse well-being, improve patient outcomes, and ensure a sustainable healthcare system. This review highlights the critical need for interventions to support ED nurses and underscores the interconnectedness of nurse well-being and quality patient care.

**Keywords:** burnout, depression, emergency service, health personnel, mental health, quality of life, stress

### Introduction

The emergency department (ED) is a high-stakes environment where healthcare professionals, particularly nurses, are required to make rapid decisions, manage critical patients, and navigate complex interpersonal dynamics. The nature of this setting, characterized by unpredictability, high patient acuity, and resource constraints, places immense psychological and emotional demands on ED nurses. Over time, these demands can lead to burnout, depression, and chronic stress, which not only affect the well-being of nurses but also have profound implications for the quality of patient care. This article explores the interplay between burnout, depression, and stress in ED nurses, examining their causes, manifestations, and the subsequent impact on the delivery of quality care [1]. The emergency department is often described as the frontline of healthcare, where the urgency and intensity of patient care are unparalleled. Nurses in this environment are tasked with managing a wide range of medical emergencies, from life-threatening injuries to acute illnesses, often with limited information and time. The high-pressure nature of the ED, combined with the emotional toll of caring for patients in distress, creates a unique set of challenges that can take a significant toll on the mental and physical health of nurses [2]. Burnout, depression, and stress are increasingly recognized as critical issues in the nursing profession, particularly in high-stress environments like the ED. These conditions not only affect the individual nurse but also have far-reaching consequences for patient care, team dynamics, and the overall functioning of the healthcare system. Understanding the factors that contribute to these conditions, as well as their manifestations and impact, is essential for developing effective strategies to support ED nurses and ensure the delivery of highquality care [3].

Nawal Lafi Ali Al-Atawi1, Huda Ali Mohammed Al-Atawi2, Masirah Radi Al-Helili Al-Slopi3, melha mfade sleem al shrari4, Haya Abdullah Saad AlDwail5, Jamila Abdullah Al-Ruwaili6, Mohra Sayyaf Sharif Al-Muawi7, Hazlaa Muhammad Ali Al-Shahrani8, Mamdouh Musa Hamid Al-Banaqi9, Aisha Othman Ahmed Barnawi10, Naif Hazam Haliban Al-Anzi11, Afra Domairy Helal alrwily12, Eman Rajanmardy Alanazi13

### **Understanding Burnout, Depression, and Stress in ED Nurses**

Burnout, depression, and stress are distinct yet interrelated phenomena that often coexist in the lives of ED nurses. Burnout is a state of emotional, physical, and mental exhaustion caused by prolonged exposure to stressful work conditions. It is characterized by feelings of cynicism, detachment from work, and a sense of reduced personal accomplishment. Depression, on the other hand, is a clinical condition marked by persistent sadness, loss of interest in activities, and a range of physical and cognitive symptoms that impair daily functioning. Stress, in this context, refers to the physiological and psychological responses to perceived threats or challenges in the workplace [4].

In the ED, nurses are frequently exposed to traumatic events, such as patient deaths, violent incidents, and ethical dilemmas. These experiences, coupled with long working hours, understaffing, and administrative pressures, create a fertile ground for the development of burnout, depression, and stress. The cumulative effect of these conditions can erode a nurse's resilience, leading to impaired job performance, absenteeism, and even attrition from the profession [5].

Burnout is particularly prevalent among ED nurses due to the high levels of emotional labor required in their work. Emotional labor refers to the effort involved in managing one's own emotions while providing compassionate care to others. In the ED, nurses often encounter patients and families in distress, requiring them to remain calm, empathetic, and professional in the face of intense emotions. Over time, this emotional labor can lead to emotional exhaustion, a key component of burnout [6].

Depression in ED nurses often stems from the chronic stress and emotional exhaustion associated with their work. The constant exposure to suffering and death can lead to feelings of hopelessness and despair, particularly when nurses feel powerless to change the outcomes for their patients. Additionally, the stigma surrounding mental health in the nursing profession can prevent nurses from seeking help, exacerbating their symptoms and prolonging their suffering [3].

Stress in ED nurses is a natural response to the high-pressure environment in which they work. However, when stress becomes chronic, it can have detrimental effects on both physical and mental health. Chronic stress is associated with a range of health problems, including cardiovascular disease, gastrointestinal disorders, and weakened immune function. For nurses, the physical toll of stress can further impair their ability to perform their duties effectively, creating a vicious cycle of declining health and job performance [7].

## The Causes of Burnout, Depression, and Stress in ED Nurses

The etiology of burnout, depression, and stress in ED nurses is multifaceted, encompassing organizational, interpersonal, and individual factors. Organizational factors include high workload, inadequate staffing, lack of resources, and insufficient support from management. Interpersonal factors involve conflicts with colleagues, difficult patient interactions, and the emotional toll of caring for critically ill or injured individuals. Individual factors include personality traits, coping mechanisms, and personal life stressors [5].

One of the primary drivers of burnout in ED nurses is the mismatch between job demands and available resources. When nurses are required to care for a high volume of patients with limited time, equipment, or support, they are more likely to experience feelings of overwhelm and helplessness. This sense of being overburdened is compounded by the emotional labor inherent in nursing, which involves managing one's own emotions while providing compassionate care to others [8].

Depression in ED nurses often stems from the chronic stress and emotional exhaustion associated with their work. The constant exposure to suffering and death can lead to feelings of hopelessness and despair, particularly when nurses feel powerless to change the outcomes for their patients. Additionally, the stigma surrounding mental health in the nursing profession can prevent nurses from seeking help, exacerbating their symptoms and prolonging their suffering. The fear of being perceived as weak or incapable can deter nurses from discussing their mental health struggles, leading to isolation and worsening conditions [9].

Stress in ED nurses is a natural response to the high-pressure environment in which they work. However, when stress becomes chronic, it can have detrimental effects on both physical and mental health. Chronic stress is associated with a range of health problems, including cardiovascular disease, gastrointestinal disorders, and weakened immune function. For nurses, the physical toll of stress can further impair their ability to perform their duties effectively, creating a vicious cycle of declining health and job performance. The inability to manage stress effectively can lead to burnout, which in turn can exacerbate feelings of depression and anxiety [10].

The Manifestations of Burnout, Depression, and Stress in ED Nurses The manifestations of burnout, depression, and stress in ED nurses are diverse and can affect every aspect of their lives. Burnout often presents as emotional exhaustion, where nurses feel drained and unable to cope with the demands of their job. They may become cynical and detached, viewing their work as meaningless or futile. This emotional detachment can lead to a decline in job satisfaction and a loss of motivation to provide high-quality care. Nurses may also experience a sense of reduced personal accomplishment, feeling that their efforts do not make a meaningful difference in patient outcomes [11].

Depression in ED nurses may manifest as persistent sadness, irritability, and a lack of interest in activities they once enjoyed. Nurses with depression may struggle with concentration and decision-making, which can compromise their ability to deliver safe and effective care. They may also experience physical symptoms such as fatigue, insomnia, and changes in appetite, further impairing their ability to function at work. The cognitive effects of depression can lead to difficulties in processing information and responding to urgent situations, which is particularly concerning in the fast-paced ED environment [12]. Stress in ED nurses can manifest as anxiety, irritability, and difficulty concentrating. Physically, stress can cause headaches, muscle tension, and gastrointestinal disturbances. Over time, chronic stress can lead to burnout and depression, creating a cycle of worsening mental and physical health. The inability to cope with stress can also lead to maladaptive coping strategies, such as substance use or withdrawal from social interactions, further exacerbating the problem [13].

Nawal Lafi Ali Al-Atawi1, Huda Ali Mohammed Al-Atawi2, Masirah Radi Al-Helili Al-Slopi3, melha mfade sleem al shrari4, Haya Abdullah Saad AlDwail5, Jamila Abdullah Al-Ruwaili6, Mohra Sayyaf Sharif Al-Muawi7, Hazlaa Muhammad Ali Al-Shahrani8, Mamdouh Musa Hamid Al-Banaqi9, Aisha Othman Ahmed Barnawi10, Naif Hazam Haliban Al-Anzi11, Afra Domairy Helal alrwily12, Eman Rajanmardy Alanazi13

### The Impact on Quality Care

The presence of burnout, depression, and stress in ED nurses has significant implications for the quality of patient care. Nurses who are emotionally exhausted, depressed, or stressed are more likely to make errors, miss important details, and provide suboptimal care. This can result in adverse patient outcomes, including medication errors, increased length of hospital stays, and higher rates of patient dissatisfaction. Furthermore, the emotional state of nurses can influence their interactions with patients and colleagues, potentially leading to a less supportive and compassionate care environment [14]. Research has shown that burnout among nurses is associated with increased rates of patient mortality and morbidity. When nurses are overwhelmed, their ability to advocate for patients and respond to critical situations diminishes. This decline in vigilance can compromise patient safety, as nurses may overlook vital signs or fail to communicate effectively with the healthcare team. Additionally, the emotional detachment that often accompanies burnout can hinder the establishment of therapeutic relationships with patients, which are essential for effective care. The lack of connection can lead to patients feeling unsupported and anxious, further complicating their recovery process [15]. Moreover, the impact of burnout, depression, and stress extends beyond individual nurses to affect the entire healthcare team. A workforce that is struggling with these issues can lead to a toxic work environment, characterized by poor communication, increased conflict, and decreased collaboration. This not only affects the morale of the nursing staff but can also create a ripple effect that impacts the quality of care provided to patients. When nurses are unable to work cohesively as a team, patient care can suffer, leading to fragmented services and increased risk of errors [16].

## Strategies for Mitigating Burnout, Depression, and Stress

Addressing burnout, depression, and stress in ED nurses requires a multifaceted approach that encompasses organizational changes, individual support, and cultural shifts within the healthcare environment. Organizations must prioritize the well-being of their nursing staff by implementing strategies that promote a healthy work-life balance, provide adequate staffing levels, and foster a supportive workplace culture [17].

One effective strategy is to implement regular wellness programs that focus on stress management, resilience training, and mental health support. These programs can provide nurses with the tools they need to cope with the demands of their job and promote a culture of openness regarding mental health. Encouraging nurses to take breaks, utilize vacation time, and engage in self-care activities can also help mitigate the effects of chronic stress. Providing access to mental health resources, such as counseling services or peer support groups, can further empower nurses to seek help when needed [18].

Additionally, fostering a supportive work environment where nurses feel valued and heard is crucial. This can be achieved through regular check-ins, mentorship programs, and opportunities for professional development. Creating a culture that encourages teamwork and collaboration can help alleviate feelings of isolation and promote a sense of community among nursing staff. Encouraging open dialogue about mental health and creating safe spaces for nurses to express their concerns can also contribute to a more supportive atmosphere [19].

Leadership plays a vital role in addressing burnout, depression, and stress in ED nurses. Nurse managers and administrators should be trained to recognize the signs of these conditions and to provide appropriate support. By promoting open communication and actively seeking feedback from nursing staff, leaders can identify areas for improvement and implement changes that enhance the work environment. Leadership should also model healthy work-life balance behaviors, demonstrating the importance of self-care and mental health [20].

Another important strategy is to implement flexible scheduling practices that allow nurses to have more control over their work hours. This can help reduce the stress associated with long shifts and provide nurses with the opportunity to recharge. Additionally, organizations can consider offering incentives for nurses who engage in wellness activities or participate in mental health training, reinforcing the importance of self-care and resilience [21]. Training programs that focus on coping strategies, emotional intelligence, and conflict resolution can also be beneficial. By equipping nurses with the skills to manage stress and navigate challenging situations, organizations can help reduce the likelihood of burnout and improve overall job satisfaction. Furthermore, incorporating mindfulness practices, such as meditation or yoga, into the workplace can provide nurses with effective tools to manage stress and enhance their well-being [22].

### Conclusion

Burnout, depression, and stress are significant challenges faced by emergency department nurses, with far-reaching implications for both their well-being and the quality of patient care. Understanding the causes and manifestations of these conditions is essential for developing effective strategies to mitigate their impact. By prioritizing the mental health of nurses and fostering a supportive work environment, healthcare organizations can enhance the resilience of their nursing staff and ultimately improve the quality of care provided to patients. Addressing these issues is not only a moral imperative but also a critical component of ensuring a sustainable and effective healthcare system. The commitment to supporting ED nurses in their mental health journey will not only benefit the nurses themselves but will also lead to improved patient outcomes, a healthier work environment, and a more robust healthcare system overall.

#### **References:**

- 1. Pradas-Hernández et al. "Prevalence of burnout in paediatric nurses: A systematic review and meta-analysis" Plos one (2018) doi:10.1371/journal.pone.0195039
- 2. Lee et al. "Mediating Effects of Anger Expression in the Relationship of Work Stress with Burnout among Hospital Nurses Depending on Career Experience" Journal of nursing scholarship (2021) doi:10.1111/jnu.12627
- 3. Al-Rawee et al. "Knowledge, Attitude and Practice of Nursing Staff toward Working at Emergency Unit" Annals of the college of medicine mosul (2022) doi:10.33899/mmed.2021.131807.1118
- 4. Waheed et al. "Mental health assessment of healthcare workers in the Emergency Department of a low middle-income country during COVID 19 pandemic" (2021) doi:10.21203/rs.3.rs-741263/v1

Nawal Lafi Ali Al-Atawi1, Huda Ali Mohammed Al-Atawi2, Masirah Radi Al-Helili Al-Slopi3, melha mfade sleem al shrari4, Haya Abdullah Saad AlDwail5, Jamila Abdullah Al-Ruwaili6, Mohra Sayyaf Sharif Al-Muawi7, Hazlaa Muhammad Ali Al-Shahrani8, Mamdouh Musa Hamid Al-Banaqi9, Aisha Othman Ahmed Barnawi10, Naif Hazam Haliban Al-Anzi11, Afra Domairy Helal alrwily12, Eman Rajanmardy Alanazi13

- 5. Vasconcelos et al. "Burnout and depressive symptoms in intensive care nurses: relationship analysis" Revista brasileira de enfermagem (2018) doi:10.1590/00347167-2016-0019
- 6. Alomari et al. "Stressors for emergency department nurses: Insights from a crosssectional survey" Journal of clinical nursing (2021) doi:10.1111/jocn.15641
- 7. Hao et al. "Latent profile analysis of mental workload among emergency department nurses: a cross-sectional study" (2024) doi:10.21203/rs.3.rs-5488330/v1
- 8. Arora et al. "Review article: Burnout in emergency medicine physicians" Emergency medicine australasia (2013) doi:10.1111/1742-6723.12135
- 9. Ariapooran et al. "Depression, anxiety, and suicidal ideation in nurses with and without symptoms of secondary traumatic stress during the COVID-19 outbreak" Archives of psychiatric nursing (2022) doi:10.1016/j.apnu.2021.05.005
- 10. Hou et al. "Preparedness of Our Emergency Department During the Coronavirus Disease Outbreak from the Nurses' Perspectives: A Qualitative Research Study" Journal of emergency nursing (2020) doi:10.1016/j.jen.2020.07.008
- 11. Liu et al. "Experiences of front-line nurses combating coronavirus disease-2019 in China: A qualitative analysis" Public health nursing (2020) doi:10.1111/phn.12768
- 12. Ma et al. "Compassion fatigue, burnout, compassion satisfaction and depression among emergency department physicians and nurses: a cross-sectional study" Bmj open (2022) doi:10.1136/bmjopen-2021-055941
- 13. Yücel and Camci "Investigation of Thesis to Determine the Effect of Nursing Care on Quality of Life in Turkey: A Systematic Review" Health and technology journal (htechj) (2024) doi:10.53713/htechj.v2i1.134
- 14. Öztaş et al. "Experiences and Challenges Faced by Nurses in Traumatic Wound Care in the Emergency Department: A Systematic and Comprehensive Review" (2024) doi:10.21203/rs.3.rs-4609319/v1
- 15. Alsalmi and Alilyyani "The role of authentic leadership in nurses' stress and burnout in emergency departments" Leadership in health services (2023) doi:10.1108/lhs-012023-0005
- 16. Mohammed et al. "Assessment of the perception of emergency department nurses regarding obstetric triage" International journal of advance research in nursing (2022) doi:10.33545/nursing.2022.v5.i1b.234
- 17. An et al. "Prevalence of depression and its impact on quality of life among frontline nurses in emergency departments during the COVID-19 outbreak" Journal of affective disorders (2020) doi:10.1016/j.jad.2020.06.047
- 18. Jiang et al. "Factors related to turnover intention among emergency department nurses in China: A nationwide cross-sectional study" Nursing in critical care (2022) doi:10.1111/nicc.12770
- 19. Morrison and Joy "Secondary traumatic stress in the emergency department" Journal of advanced nursing (2016) doi:10.1111/jan.13030
- 20. Ariapooran and Amirimanesh "Depression, Anxiety and Suicidal ideation of Nurses in the Outbreak of COVID-19: The Role of Demographic Variables" Journal of arak university of medical sciences (2020) doi:10.32598/jams.23.cov.4093.1

- 21. Muliantino et al. "Psychological Responses Among Indonesian Nurses In The Outbreak Of Covid-19 Pandemic" Journal of nursing care (2021) doi:10.24198/jnc.v4i2.31195
- 22. Jung and Park "Association of Nursing Work Environment, Relationship with the Head Nurse, and Resilience with Post-Traumatic Growth in Emergency Department Nurses" International journal of environmental research and public health (2021) doi:10.3390/ijerph18062857