

**PERCEIVED INFLUENCE OF BURNOUT SYNDROME ON ACADEMIC
PERFORMANCE AMONG UNDERGRADUATE NURSING STUDENTS IN
SELECTED TERTIARY EDUCATIONAL INSTITUTIONS IN EDO STATE**

BY

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BENIN CITY**

APRIL, 2024

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**IN PARTIAL FULFILMENT OF THE REQUIREMENTS OF NURSING AND
MIDWIFERY COUNCIL OF NIGERIA FOR THE AWARD OF
“REGISTERED NURSE”**

APRIL, 2024

DECLARATION

This is to declare that this research project titled **PERCEIVED INFLUENCE OF BURNOUT SYNDROME ON ACADEMIC PERFORMANCE AMONG SELECTED TERTIARY EDUCATIONAL INSTITUTIONS IN EDO STATE** was carried out by OKUNDAYE IYOBOSA JOY is solely the result of my work except where acknowledged as being derived from other person (s) or resources.

EXAMINATION NUMBER: _____

DEPARTMENT/SCHOOL: NURSING SCIENCE, SCHOOL OF BASIC MEDICAL SCIENCES, UNIVERSITY OF BENIN, BENIN CITY.

Signature:

Date:

CERTIFICATION

This is to certify that this research project by OKUNDAYE IYOBOSA JOY with Matriculation No. BMS1802553 has been examined and approved for the award of “Bachelor of Nursing Science”.

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DEDICATION

This research study is dedicated to God Almighty, whose mercy, grace, strength, wisdom and love has kept me through my period of study and training and for enabling me to carry out and complete this research work.

ACKNOWLEDGEMENT

My profound gratitude goes to God almighty for his strength, wisdom and guidance all through my period of study and for making my work a success.

I am grateful to my supervisor; Mrs E.N Oyanah who despite her busy schedule has taken time to review my work and advise me accordingly, spurring me to carry on this project. Your assistance, critics and encouragement saw me through this project work.

With great sense of sincere gratitude, I wish to express my appreciation to the Head of Department, Dr. Mrs R.E Esewe for her positive structure of the department, the academic staff Dr. F.U. Okafor, Dr. (Mrs.) R. E. Esewe, Dr.(Mrs.) Afemikhe, Dr. (Mrs) C.E Omorogbe, Dr. Oko-ose, Dr. C. Enuke, Mr. T.A Ehwarieme, Rev sis chukwura Mrs. E.N Oyana, Mrs. Edo-Osagie, Mrs. Iniomor, Mrs. Lawal for the knowledge impacted throughout the period of my study and the non-academic staff of the Department of Nursing Science.

My appreciation goes also to my wonderful parents Mr. and Mrs. Dennis Okundaye and my siblings for their financial, moral and emotional support in the pursuit of my career. I must remember the student's association (NUNSA) who has sincerely supported me in so many ways most especially in my studies , My Course-mates, Friends; sochimma, Sonia ,Goodnews Amarachi and others too numerous to mention – thanks for your encouragement and understanding. God bless you all.

ABSTRACT

This study addresses the impact of burnout syndrome on academic performance among undergraduate nursing students, a population highly susceptible due to the demanding nature of their education. Conducted at the University of Benin and Benson Idahosa University in Edo State. The study employed the descriptive survey design and multi-stage sampling technique was used to select three hundred and nineteen (319) students in Nursing department of both Universities. A well-structured questionnaire was used as instruments of data collection. The questionnaire was made up of four sections (A, B, C, and D). Section A was made up of respondents' Bio-data while the other sections comprised of Simple structured questions used to elicit information on the level of burnout syndrome on academic performance. The data was presented using tables and were analyzed using simple percentages, while the research hypothesis were tested using Chi-square test of association. The analysis was conducted using the IBM Statistical Package for Social Sciences (SPSS) version 26.0 for windows. The level of significance was set at $p < 0.05$. Findings highlighted the prevalence of emotional exhaustion, academic competition, and high workload among students. Burnout significantly impacts academic performance, although it shows no correlation with gender, residence, or entry mode. The study emphasizes the need for supportive environments and interventions to mitigate burnout. Further research is recommended to explore tailored interventions, faculty roles, and long-term consequences of student burnout. Limitations include the study's cross-sectional nature and reliance on self-reported data.

KEYWORDS: *Burnout syndrome, Academic performance, Undergraduate nursing students.*

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CHAPTER ONE

INTRODUCTION

1.1 Background to the study

People from all walks of life work hard daily to tend to their needs, in other to do this they require energy (Lee, 2023). This energy gets combusted or used up when the source of energy runs low (Marrisa et al., 2021) this phenomenon is termed burnout. According to Sothan, (2019) burnout is a state of emotional, physical and social exhaustion caused by excessive and prolonged stress. When burnout occurs, individuals feel overwhelmed, emotionally drained and usually unable to meet up with regular demands of life (Sothan, 2019).

Little wonder the World Health Organization (WHO,2019), added to the 11th revision of international classification of disease (ICD). This organization described this phenomenon as a syndrome caused by persistent academic stress that has been poorly dealt with. WHO (2019) distinguished three key characteristics of this syndrome as thought of diminished professional effectiveness or personal performance, increasing mental detachment or cynicism towards coworkers and feeling of tiredness. According to Masiero, (2019) burnout syndrome is characterized by employee's feeling of emotional weariness, depersonalization and decreased sense of personal accomplishment that usually occur among workers and students. It is associated with self-doubt, helplessness and defeat resulting in detachment, loss of motivation, and decreased satisfaction. Nursing as a profession is very demanding, this is as a result of frequent involvement with stressful settings and deep emotional interaction with

patients. Nursing student as learners have greater risk to all these and more (Arian et al.,2018). Numerous factors are attributed to these factors such as the curriculum, teaching methodology and social interaction (Lino et al., 2021). These group of students have high levels of burnout as it relates to poor academic performance, inappropriate behaviors like absence from class or inattention, and anxiety symptoms (Wang et al., 2019). Nursing students also face various challenges during their academic training, including studying strategies, completing tasks within limited time frames, managing their time effectively, navigating the power dynamics between teachers and students, engaging in healthcare practices, having direct interactions with patients, witnessing their pain and the potential for loss of life, confronting ethical dilemmas and managing the fear of making errors while handling internal pressures, all these have effects on their academic performance (Edivaldo Cremer et al.,2019).

Nursing students receive intense clinically-oriented training during their 3rd and 4th year and they are often exposed to similar stressful workplace and real-life traumatic situations as professional nurses, which affect their physical and mental well-being (Valero-Chillerón et al., 2019), because of this stress, the student may feel exhausted or ineffective in their studies which can lead to further feeling of burnout (Liu et al.,2018). In general, it is important to recognize that burnout syndrome should not be seen as solely the individual's problem, as the institution bears responsibility for the academic training process that could contribute to the student's burnout (Galdino et al.,2020).

1.2. Statement of the problem

Burnout syndrome affect individuals across various professionals, but it has been identified as particularly prevalent among health professionals especially nurses (Rios-Risquez et al., 2018). Over the last three decades, burnout has been a major research topic among psychologist and other related fields (Izbedski et al., 2023). Burnout syndrome is a prevalent issue all over the world. Several studies have been conducted to investigate burnout syndrome among nursing student, with recurrent findings indicating a high occurrence rate ranging from 27.9% to 36.9% in Sweden among first-year nursing student, in China 23% (Ling-Nakong et al.,). Burnout among student, who are exposed to demanding academic coursework and clinical placement, is a growing concern as it can have far-reaching consequences for their personal wellbeing, development and overall quality of health services they provide.

This can have serious consequences including negatively impacting their academic performance. This syndrome causes emotional anguish such as worry, despair, frustration, aggression or death, these circumstances may contribute to feelings of exhaustion and inefficiency, which may ultimately cause academic burnout(Ghods et al.,2020).There is proof that burnout syndrome can raise dropout rates(Tomaschewski-Barlem et al.,2019)..While attending college is enjoyable and thrilling, many student find it stressful and this can have adverse effect on the student educational achievement, resulting in lower productivity, poorer medical care (Alwhaibi et al., 2022)and overall lower well-being.

Even though there is an increasing awareness of how burnout affects healthcare professionals, there has been limited research that specifically looks at how burnout is perceived by undergraduate nursing students. Consequently, it is necessary to conduct a study to fully comprehend the perceived impact of burnout syndrome among these students. This study will examine burnout effects on their emotional well-being, engagement in academic activities, proficiency in clinical settings, and overall satisfaction with their career. The aim is to fill the knowledge gap and contribute to the development of targeted support systems and strategies to alleviate burnout and its consequences among this vulnerable group.

1.3. Objectives of the study

The main objective of this study is to assess the perceived influence of burnout syndrome on academic performance among undergraduate nursing students in selected tertiary educational institution.

The specific objective includes;

1. To assess the levels of burnout syndrome among undergraduate nursing student.
2. To describe factors contributing to burnout syndrome among undergraduate nursing student including workload, stress level, and personal characteristics.
3. To assess the levels of academic performance among undergraduate nursing students.

1.4. Research questions

1. What is the perceived influence of burnout syndrome on academic performance of undergraduate nursing student?
2. What are the factors contributing to burnout syndrome among undergraduate nursing student?

1.5. Research hypothesis

1. There is no significant relationship between perceived influence of burnout syndrome and academic performance among selected undergraduate nursing student.
2. There is no significant difference between undergraduate student demographic profile and burnout syndrome.

1.6. Significance of the study

Understanding the perceived impact of burnout on academic performance allows for a better knowledge of the potential negative consequence of burnout among undergraduate nursing students. This understanding provides valuable insight into the challenges faced by nursing students and the obstacles that impede their success. Improving student welfare is crucial, especially considering the prevalence of burnout syndrome among student, particularly in demanding programs like nursing. The study can play a crucial role in identifying risk factors and facilitating early intervention can be implemented to support student in managing academic tension, improving coping mechanism and maintain optimal academic performance.

Moreover, studying the perceived influence of burnout syndrome on academic performance contribute to the achievement of nursing education. It provides

evidence-based insights into the relationship between burnout and student success, which can be utilized to shape various aspect of nursing education. This includes curriculum development, teaching methodologies, and clinical practice experience that prioritize student well-being and foster academic achievement. Overall, it not only improves student well-being but also reforms educational policies and contribute to the advancement of nursing education by creating a supportive and nurturing learning environment that emphasizes academic success alongside the metal health and overall well-being of nursing student. This study enhances the overall educational experience and prepare competent healthcare professional.

Through studying the relationship between burnout and academic performance, researchers can contribute to the development of intervention and support system that prioritize student wellbeing. The research findings will help to identify specific areas that require attention, such as stress management, workload optimization, and the establishment of supportive learning environment.

1.7. Scope of the study

The scope of the study is focused on perceived influence of burnout syndrome on academic performance. This study will be limited to the causes of burnout syndrome among undergraduate nursing student in selected tertiary educational institution.

1.8. Operational definition of terms

1. **Perceived Influence:** An unconscious process of taking information from the environment.

2. **Burnout Syndrome:** Refers to feeling of reduced energy, tiredness, loss of interest among the undergraduate nursing student
3. **Undergraduate nursing student:** Individuals who are enrolled in a nursing program, in selected tertiary educational institution, in Benin metropolis.

CHAPTER TWO

LITERATURE REVIEW

This chapter reviews extant literatures as it relates to the present study. It will be discussed under the following headings: conceptual review, theoretical framework and empirical review.

2.1. Conceptual review

2.1.1 Concept of Burnout

Burnout is the depletion of physical and mental energy caused by being overworked, stressed, and involved in demanding situations for an extended period of time. It leaves one exhausted, depleted, overwhelmed, and irritated (Jamie Aten and Kent Annan 2023). While burnout may influence health and can be a reason for people contacting health services, it is not itself classified by the WHO as a medical condition or mental disorder. The World Health Organization states that Burn-out refers specifically to phenomena in the occupational context and should not be applied to describe experiences in other areas of life.” [World Health Organization (WHO), 2019]

In 1974, Herbert Freudenberger an American psychologist, coined the term burnout [dubious – discuss] and in 1974 was the first researcher to publish in a scientific

journal research on the syndrome. The paper was based on his observations of the volunteer staff (including himself) at a free clinic for drug addicts. He characterized burnout by a set of symptoms that includes exhaustion resulting from work's excessive demands as well as physical symptoms such as headaches and sleeplessness, quickness to anger, and closed thinking. He observed that the burned-out worker looks, acts, and seems depressed. After the publication of Freudenberger's original paper, interest in occupational burnout grew. Wolfgang Kaskcha has written on the early documentation of the subject. Because the phrase burnt-out was part of the title of the 1961 Graham Greene novel *A Burnt-Out Case*, which dealt with a doctor working in the Belgian Congo with patients who had leprosy, the phrase was likely in use outside the psychology literature before Freudenberger employed it. Wolfgang Kaskcha has written on the early documentation of the subject (Wolfgang, 2017).

Christina Maslach described burnout in terms of emotional exhaustion, depersonalization (treating clients, students, customers, or colleagues in a distant and/or cynical way), and reduced feelings of work-related personal accomplishment. In 1981, Maslach and Susan Jackson published an instrument for assessing burnout, the Maslach Burnout Inventory (MBI). It is the first such instrument of its kind and the most widely used burnout instrument. The MBI originally focused on human service professionals (e.g., teachers, social workers). Since that time, the MBI has been used for a wider variety of workers (e.g., healthcare workers). The instrument or its variants are now employed with job incumbents working in many other

occupations. The WHO adopted a conceptualization of burnout that is consistent with Maslach's, although the organization does not treat burnout as a mental disorder (Ruotsalainen, et al., 2017).

Maslach advanced the idea that burnout should not be viewed as depression. Moreover, the World Health Organization (WHO, 2019) does not recognize burnout as a medical or psychiatric condition. A meta-analysis by Koutsimani et al. (2019) suggests that burnout and depression are different constructs although they found that correlation of burnout and depression was 0.75, very high for social science research, but still far from 1.00 (the highest a correlation can be is 1.00). Another recent meta-analytic research indicates that burnout may be best viewed as a depressive syndrome (Bianchi, et al., 2021). Confirmatory factor-analytic evidence indicates that the exhaustion component of burnout is more highly related to depression than the depersonalization and personal accomplishment components (Bianchi, Schonfeld, & Verkuilen, 2020).

Diagnosis

Classification

Burnout is not recognized as a distinct mental disorder in the current revision of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5). Its definitions for adjustment disorders, and Unspecified Trauma- and Stressor-Related Disorder in some cases reflect the condition. The Royal Dutch Medical Association, however, defines burnout as a subtype of adjustment disorder. In The Netherlands burnout is included in handbooks and medical staff are trained in its diagnosis and treatment

(Boudoukha, et al., 2021).

Regarding the International Statistical Classification of Diseases and Related Health Problems (ICD), the ICD-10 edition (current 1994–2021) classifies burn-out as a type of non-medical life-management difficulty under code Z73.0. It is considered to be one of the factors influencing health status and contact with health services and should not be used” for primary mortality coding. It is also considered one of the problems related to life-management difficulty. The condition is further defined as being a state of vital exhaustion, which historically had been called neurasthenia.

The ICD-10 also contains a medical condition category of F43.8 Other reactions to severe stress, which sometimes has also been labeled neurasthenia). The Swedish National Board of Health and Welfare defines neurasthenia as more serious than burnout. Swedish sufferers of severe burnout have been treated as having neurasthenia. This category is in the same group as adjustment disorder and post-traumatic stress disorder, other conditions caused by excessive stress that continue once the stressors have been removed. A new version of the ICD, ICD-11, was released in June 2018, for first use in January 2022. The new version has an entry coded and titled QD85 Burn-out. The ICD-11 describes the condition this way:

Burn-out is a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed. It is characterized by three dimensions: 1) feelings of energy depletion or exhaustion; 2) increased mental distance from one’s job, or feelings of negativism or cynicism related to one's job; and 3) reduced professional efficacy. Burn-out refers specifically to phenomena in the occupational

context and should not be applied to describe experiences in other areas of life (WHO, 2019).

This condition is classified under Problems associated with employment or unemployment in the section on factors influencing health status or contact with health services. The section is devoted to reasons other than recognized diseases or health conditions for which people contact health services. In a statement made in May 2019, the WHO said burn-out is included in the 11th Revision of the International Classification of Diseases (ICD-11) as an occupational phenomenon. It is not classified as a medical condition. (WHO, 2019)

The ICD's browser and coding tool both attach the term caregiver burnout to category QF27 Difficulty or need for assistance at home and no other household member able to render care QF27 thus acknowledges that burnout can occur outside the work context. The ICD-11 also has the medical condition 6B4Y Other specified disorders specifically associated with stress, which is the equivalent of the ICD-10's F43.8.

2.1.2. Types of Burnouts

A novel burnout model has been established to separate three subtypes: frenzied, under-challenged, and worn-out, which are defined as being overloaded, under-stimulated, and disengaged at work, respectively (Demarzo et Al.,2020).

Frenetic burnout

Frenetic refers to a state of frantic or chaotic activity, often characterized by high energy and a sense of urgency. Burnout, on the other hand, is a state of emotional, physical, and mental exhaustion that results from prolonged stress or overwork.

Frenetic burnout might refer to a situation where someone experiences burnout due to their excessively fast-paced lifestyle. This could occur when someone consistently operates at an unsustainable pace, trying to keep up with high demands and expectations, without allowing themselves enough time for rest and recovery. This could lead to a range of symptoms, including extreme fatigue, decreased productivity, irritability, mood swings, and physical health issues. It's important for individuals experiencing such a state to recognize the signs and take steps to prioritize self-care, manage their workload, and establish healthier boundaries to avoid reaching a point of burnout.

Under- Challenged Burnout

Under-challenged burnout can be seen as the opposite of overload burnout. It emerges when individuals find their job uninteresting and devoid of stimulation, resulting in a decrease in motivation. Those experiencing under-challenged burnout might feel undervalued and frustrated due to the absence of opportunities for learning, growth, or meaningful interaction with colleagues and superiors. When tasks become repetitive and unfulfilling, employees often lose their enthusiasm, leading to cynicism and lethargy. To manage the stress of feeling under-challenged, they resort to avoidance strategies such as distraction, dissociation, or thought suppression (e.g., instructing themselves to stop thinking about that.)

Worn-Out Burnout

The worn-out subtype, also known as neglect burnout, is the third form of burnout. It arises from a sense of helplessness when confronted with challenges. Neglect burnout materializes when individuals, whether in work or academic settings, lack sufficient structure, guidance, or direction. This can lead to difficulty in managing responsibilities and a sense of being incapable of meeting expectations. This sustained experience can breed feelings of inadequacy, frustration, and uncertainty Roddenberry (2021).

Individuals dealing with worn-out burnout resort to learned helplessness, a state where they perceive themselves as unable to find solutions to challenging situations, even when potential solutions exist. In essence, those with learned helplessness feel powerless to create any positive impact on their circumstances. When faced with unfavorable outcomes at work, individuals grappling with neglect burnout adopt a passive stance and cease their efforts.

2.1.3. Features of burnout

Burnout manifests as a psychological condition that develops over time due to continuous stress from work-related interpersonal challenges. This condition consists of three main features identified by Maslach (1981): an intense state of fatigue, a sense of cynicism and disconnection from the job, and feelings of inefficacy and a lack of achievement. What makes this three-part model / features important is its ability to situate personal stress experiences in a social framework and consider how individuals perceive themselves and others.

1. Emotional Exhaustion

Emotional fatigue is a key element of burnout, where people feel emotionally drained and overwhelmed due to their job demands. This can result in detachment from emotions and a decreased ability to handle stress effectively. The exhaustion dimension was also described as wearing out, loss of energy, depletion, debilitation, and fatigue.

2. Depersonalization

Sometimes referred to as cynicism or emotional disconnection, encompasses the development of unfavorable and distant attitudes towards others, especially clients, coworkers, or patients. Those experiencing burnout might exhibit a more indifferent and disconnected stance, perceiving others as objects rather than individuals. Initially labeled as depersonalization due to the nature of roles in human services, the cynicism dimension was also characterized by negative or unsuitable client attitudes, irritability, diminished idealism, and a tendency to withdraw.

3. Reduced personal Achievement

Individuals undergoing burnout often notice a decline in their job performance and self-assurance. This could stem from reduced motivation and a sense of inadequacy in meeting work-related requirements, despite having previously achieved success and proficiency. Originally termed reduced personal accomplishment, the inefficacy dimension was also identified as diminished productivity or ability, decreased morale, and difficulty in managing challenges. This can create a domino effect, influencing

team interactions and the overall achievement of the organization.

2.1.4. Effect of Burnout Syndrome on Academic Performance

Research by Galdino et al. (2020) has also identified emotional exhaustion, depersonalization, and reduced academic effectiveness as central dimensions of burnout (Galdino et al., 2020). According to previous studies, the variables that result in academic burnout may include personal intrinsic factors, interpersonal relationships and environmental factors [Deary, 2003]). The rigorous demands of academic pursuits, coupled with external pressures and personal anticipations, provide an environment conducive for burnout to take root. As burnout advances, it can significantly affect a student's capacity to excel academically.

A primary manner in which burnout impacts academic performance involves a decline in cognitive abilities. The chronic stress and fatigue linked to burnout can impair memory, attention, and focus. Students grappling with burnout may encounter difficulties concentrating on studies, retaining information, and comprehending intricate concepts. This cognitive strain can lead to subpar results on exams, assignments, and class involvement.

Moreover, burnout can result in a waning of motivation and involvement in academic pursuits. Students who were once enthusiastic about learning might experience diminished interest in their studies. This lack of motivation can translate to procrastination, unfinished assignments, and a decreased willingness to invest the effort needed for excellence. Consequently, academic performance may decline,

resulting in lower grades and academic setbacks.

Additionally, burnout can deeply affect a student's emotional well-being, exacerbating its consequences on academic performance. Sentiments of cynicism, detachment, and emotional exhaustion can cultivate a sense of disconnect from academic objectives. Students might become disillusioned with the learning process, their professors, or even the entire educational system. This emotional detachment can impede their ability to engage with course content, peers, and mentors, ultimately influencing their academic accomplishments.

The constant pressure to meet academic expectations, excel in classes, and uphold high grades can perpetuate the burnout cycle. As students push themselves beyond their limits, neglecting self-care and leisure, they become more vulnerable to the detrimental effects of burnout. Physical symptoms like fatigue, insomnia, and headaches might surface, further impinging on their ability to focus and perform effectively academically (Dyck, 2021).

Burnout can also lead to social isolation, which can impact academic performance. Students overwhelmed by burnout may withdraw from social interactions and extracurricular activities, missing out on support networks that play a pivotal role in stress management and enhanced learning. Without social connections, students may lack the emotional support necessary to effectively cope with academic challenges.

Ultimately, the consequences of burnout on academic performance can set off a cycle. Poor academic performance can trigger heightened stress and feelings of inadequacy, perpetuating the burnout loop (Ongori, 2018).

To address the influence of burnout on academic performance, educational institutions should prioritize mental health and well-being programs. Offering access to counseling services, advocating stress-management tactics, and fostering a nurturing learning environment can aid students in managing burnout and preserving their academic performance.

2.1.5. Academic Performance

Academic performance refers to how well a student performs in their educational endeavors, such as school, college, or university. It's a measure of their achievements and success in various aspects of their studies. This performance is typically evaluated through a combination of grades, test scores, class participation, and other indicators of learning (Sothan 2019).

Here are some key components that contribute to academic performance:

Grades: Grades are usually the most direct measure of academic performance. They reflect a student's performance in assignments, exams, projects, and other assessments. These grades are often given in letter form (A, B, C, etc.) or as a numerical value (Asrat et Al.,2020)

Test Scores: Standardized tests, such as SAT, ACT, GRE, or subject-specific exams, can provide an objective measure of a student's knowledge and skills in a particular

area. These scores are used by educational institutions to assess an applicant's suitability for admission.

Class Participation: Actively engaging in class discussions, asking questions, and contributing to group activities demonstrates a student's level of interest and understanding of the subject matter.

Assignments and Homework: Completing assignments and homework tasks on time and with high quality demonstrates a student's ability to apply what they've learned.

Extracurricular Activities: Participation in extracurricular activities like sports, clubs, and volunteering can also contribute to a well-rounded academic performance. These activities showcase a student's time management, leadership skills, and ability to balance multiple commitments.

Self-Motivation and Study Habits: Effective study habits, time management skills, and a strong work ethic play a significant role in academic success (Tesfaye, 2019).

Teacher Feedback and Interaction: Building a positive relationship with teachers can provide valuable feedback and guidance, helping students improve their performance.

Critical Thinking and Problem-Solving: Higher academic performance often involve the development of critical thinking skills, enabling students to analyze complex problems and arrive at well-reasoned solutions.

2.2. Theoretical framework

Self-efficacy theory (SET) is a subset of Bandura's (1986) social cognitive theory. According to this approach, the two key determinants of behavior are perceived self-efficacy and outcome expectancies. The latter construct refers to the perceived positive and negative consequences of performing the behavior. See Schwarzer and Fuchs (1996) for a version of this model that incorporates risk perceptions and behavioral intention, as well as components of the action phase of behavior change. No meta-analysis of SET has been published, though there is substantial evidence for the predictive validity of self-efficacy (Schwarzer and Fuchs 1996).

This theory revolves around individuals' confidence in their capacity to achieve particular objectives or tasks. This belief significantly influences their motivation, performance, and behavior. Those with strong self-efficacy tend to establish ambitious goals, persist when confronted with difficulties, and attain success. Conversely, individuals with low self-efficacy may shy away from challenges and readily abandon their pursuits. Self-efficacy levels can be shaped by prior experiences, social encouragement, and introspection, and this concept finds practical use across diverse domains such as education, psychology, and healthcare.

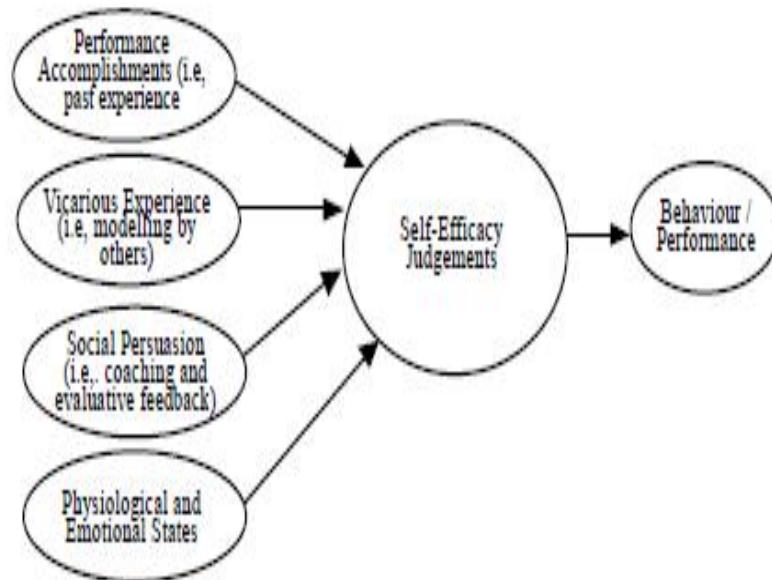


Figure 1: Self-Efficacy Theory by Bandura 1977, Adapted from Regina and Loke (2019).

Application of self -Efficacy Theory

Self-efficacy theory can help students understand how their beliefs in their abilities affects their reaction to burnout and subsequent academic outcomes. This hypothesis can be utilised in the following ways:

1. **Burnout and Self-Efficacy Beliefs:** Self-efficacy refers to a person's confidence in their capacity to complete specific tasks or reach specified goals. Students' self-efficacy views may suffer as a result of burnout. They may have doubts about their ability to overcome academic challenges, manage time effectively, or deal with stress.
2. **Influence on Coping Strategies:** When faced with burnout, students with high self-efficacy may be more likely to employ effective coping strategies. To deal with academic stress, individuals may seek assistance, set realistic goals, and use problem-solving skills. Those who lack self-efficacy, on the other

hand may avoid or engage in less.

3. **Academic success:** Beliefs in self-efficacy can have a major impact on academic success. Students who have a better sense of self-efficacy are more likely to persevere through problems, stay motivated, and strive for excellence even when they are exhausted. Those with poor self-efficacy, on the other hand, may experience a drop in academic achievement because they mistrust their ability.
4. **Interventions and Support:** Understanding the role of self-efficacy in burnout might help inform interventions. Educational institutions can create programs to boost students' self-efficacy, giving them the confidence and skills, they need to manage burnout while maintaining or improving their academic performance

2.3. Empirical Review

In a study conducted by Obekpa, Amedu and Udofia in 2020, the researchers aimed to determine the prevalence of burnout syndrome among undergraduates and its relationship with psychological morbidity and quality of life. They surveyed 933 undergraduates from the faculties of education, law, and medicine at Bayero University Kano. Using various questionnaires and statistical analysis, they found that 16.4% experienced emotional exhaustion, 24.7% reported cynicism, and 20.8% had reduced academic efficacy, indicating different aspects of burnout. Burnout was more common among students with longer academic activities, higher psychological morbidity, and lower quality of life. Education students showed more

cynicism-related burnout, while medical students experienced higher academic efficacy-related burnout. In comparison, law students had the lowest levels of burnout. The study concluded that burnout is prevalent among undergraduates at Bayero University Kano, highlighting the need for interventions from families and university authorities to reduce this burden. Furthermore, the researchers suggested the necessity for further research to better understand burnout and its impact on students' mental health.

The study by Pushpa Prakash, Melita Sheilini and Shalini Nayak in 2023 aimed to assess academic burnout among undergraduate nursing students in Udupi Taluka, South India and explore its association with demographic factors and relaxation technique practice. Using a descriptive survey design, data was collected from 266 students, revealing high levels of academic burnout, emotional exhaustion, and disengagement among participants. Significant associations were found between academic burnout and age, as well as relaxation technique practice. Disengagement was also significantly associated with gender, residence location, and relaxation technique practice.

However, Alanoud (2020) conducted a study to assess the impact of burnout on the academic achievement of female students in the colleges of health sciences and to explore on their educational levels of study regarding burnout. Therefore, 540 female Saudi students were chosen to participate in this study. The tools used were Maslach Burnout Inventory–General Survey for Students MBI–GS (S) to measure the level of burnout and a socio-demographic questionnaire were administered on participants.

The MBI-GS (S) proved internal consistency reliability at 0.86 across many samples. The level of burnout among participants was 51.9%. Some 27.2% of the participants experienced mild burnout, while 14.4% showed moderate levels of burnout. Only 6.5% of participants displayed a high level of burnout, and they were among the Colleges of Pharmacy (25.0%) and Dentistry (10.1%).

Also, in 2015, Rahmatia conducted a study to examine academic burnout among university students with varying levels of self-efficacy. The study involved 120 students from Allame Tabatabaie University who completed questionnaires related to academic burnout and self-efficacy. The students were divided into two groups based on their self-efficacy scores: one group with high self-efficacy and another with low self-efficacy, with the criteria being one standard deviation above or below the mean. Statistical analysis using a T-test was employed to analyze the data. The study's findings indicated that there were negative relationships between self-efficacy and academic burnout, as well as its individual components, including academic exhaustion, academic disinterest, and academic inefficacy. Students with higher self-efficacy tended to experience lower levels of academic burnout and its associated factors.

In 2021, Khosravi conducted a study to investigate the relationship between personality dimensions and academic burnout among medical students in Iran, with a particular focus on the potential moderating effect of physical activity. The study involved 417 medical students selected from three major cities in Iran, using stratified multistage sampling. The researchers collected data through various questionnaires,

including a demographic information form, the Baecke Physical Activity Questionnaire, the Temperament and Character Inventory, and Bresó's Academic Burnout Questionnaire. Among the participants, 400 medical students (39% male and 61% female) correctly completed the questionnaires. The study found that the overall prevalence of academic burnout among medical students was 25.5%, with varying levels of burnout observed. The results of regression analysis revealed several key findings:

The study conducted in South Africa by Merwe, Botha, and Joubert, the researchers examined burnout and related factors among undergraduate students at a medical school. They collected data through an anonymous self-administered questionnaire, including the Copenhagen Burnout Inventory (CBI) and information on resilience and demographics. The study involved 500 students, divided into preclinical and clinical groups. The CBI mean scores indicated that students had low burnout levels in personal, work-related, and patient-related areas. Male students and those with high self-reported resilience and low stress experienced lower burnout levels. White preclinical students had lower personal and work-related burnout, while black clinical students had less patient-related burnout. The study concluded that high mean scores across all burnout subscales indicated low burnout levels among students. Academic and personal stress, as well as perceived lack of support from institutional structures, were associated with higher personal and work-related burnout, but not patient-related burnout in clinical students.

In 2018, Aghajari and colleagues conducted a study at Shahid Beheshti University of Medical Sciences involving 223 nursing students in Tehran. They aimed to understand the link between the quality of learning experiences and academic burnout. Using various methods, including questionnaires and statistical analysis, they discovered a significant negative correlation between these factors, with the strongest relationship observed between lack of academic interest and curriculum content. The study suggested that factors like students' initial interest in their field of study and their academic performance can indirectly influence academic burnout through the quality of their learning experiences.

Khosravi (2021) conducted a study to find out an experimental answer to the following questions: Is there a simple relationship between personality dimensions and academic burnout? Can physical activity affect this relationship? In this cross-sectional correlational study, 417 medical students were selected from three major cities of Iran through stratified multistage sampling and assessed by demographic information form, Baecke Physical Activity Questionnaire, Temperament and Character Inventory, and Bresó's Academic Burnout Questionnaire. Bivariate Pearson correlations and hierarchical linear regression were used to examine the relationships between academic burnout, personality traits, and physical activity. In this study, 400 medical students (39% male and 61% female) filled the questionnaires correctly. The total prevalence of academic burnout was 25.5% (n=102), with heterogeneous levels. Regression analysis indicated that in a multivariate model, being male ($\beta=0.08$, $p=0.013$), higher years of medical school

($\beta=0.18$, $p<0.001$), and lower scores in novelty seeking ($\beta=-0.53$, $p=0.006$), cooperativeness ($\beta=-0.55$, $p=0.010$), and physical activity ($\beta=-1.22$, $p<0.001$) could be attributed to higher scores of academic burnouts. Furthermore, physical activity had a moderating role in “novelty seeking-academic burnout” ($\beta=-0.47$, $p=0.044$) and “cooperativeness-academic burnout” ($\beta=-0.89$, $p=0.001$) relationships ($\Delta R^2=0.02$, $p<0.001$). The results suggested that male gender, higher years of medical school, and lower levels of novelty seeking, cooperativeness, and physical activity are associated with higher levels of academic burnout among Iranian medical students. Therefore, paying attention to male gender and individual difference factors, as well as planning for physical education classes during the medicine courses (especially in the last years of medical school), seems essential. However, more extensive investigations need to be carried out in this field through longitudinal studies.

A study conducted by Jones et al in California in 2018 explores a comprehensive empirical review on stress and burnout among nursing students, addressing a historical gap in research on this topic. Over the past five years, there has been a notable increase in research focusing on predictors associated with stress and burnout among nursing students, driven by a concerning 70% burnout rate in the nursing profession. Using Pollock's Nursing Adaptation Model as a conceptual framework, the study employed a correlational descriptive non-interventional survey design to gather data from 217 participants. The Perceived Stress Scale and Maslach's Burnout Inventory were utilized for data collection. Results revealed that increased time spent on homework and studying was associated with higher levels of stress and cynicism

among students. Interestingly, students who spent less time studying reported higher levels of exhaustion, indicating the influence of external factors.

A study by Ebbas et al in 2022 explores burnout among nursing students in Azad and public universities in Netshabur, employing both quantitative and qualitative methods. Quantitative analysis of 91 students' responses to the Maslach Burnout Inventory-Student Survey highlighted differences in burnout scores across semesters. Qualitative interviews with 13 students, a nurse, and an instructor revealed a fourth dimension of burnout: incompatible learning style, supplementing the Maslach model's three dimensions. These findings underscore the complexity of burnout among nursing students and advocate for targeted interventions.

In 2020, Tomaszek and Muchacka-Cymerman conducted a study exploring the relationship between student burnout (SB) and internet addiction (IA) among Polish late adolescents. The study involved 230 high school students, and the results indicated that there were no significant differences between boys and girls in the overall problematic use of the Internet. Specific aspects of school burnout, such as burnout related to studying, loss of interest in school, and burnout due to parental pressure, as well as school-related factors like additional classroom lessons and low-quality relationships with classmates, were found to significantly predict problematic Internet use. These factors collectively explained 19% of the variations in the total score of internet addiction.

Furthermore, in 2020, Edjah, Ankomah, Domey, and Laryea conducted a study in Ghana to investigate stress and its effects on the academic and social lives of university students. They employed a descriptive cross-sectional survey design and

randomly selected 500 regular undergraduate students. The research used a questionnaire consisting of the Perceived Stress Scale and Students' Life Satisfaction Scale to collect data. The study found that the majority of students experienced moderate levels of stress. The primary sources of stress were academic stressors, followed by institutional stressors, and external stressors. Importantly, stress had a significant and positive impact on both the academic and social aspects of students' lives. As a conclusion, the study highlighted that undergraduate students commonly face various forms of stress during their academic journey. It was recommended that the university, specifically through its Students' Affairs and Counseling Sections, should continue to provide support and guidance to help students manage and cope with stress, thereby enhancing their overall academic experience

2.4. Summary of Related Literature

In the literature reviewed, burnout was seen as a state of complete mental physical and emotional exhaustion that occur due to prolong exposure to stressors. This syndrome can cause emotional anguish such as worry, despair, frustration, aggression or death. These circumstances may contribute to feelings of exhaustion and inefficiency, which may ultimately expose the student to academic burnout. Burnout can be either frenetic, neglect or under challenged depending on the causes of burnout.

Empirical review of literature showed that there is low to moderate levels of burnout among undergraduate nursing student. Negative perceptions towards the cause and management of burnout were also reported by most of the literature reviewed. The factors that contribute to burnout syndrome such as workload, stress level and personal characteristics was also cited.

The theoretical framework of the study was hinged on Bandura's theory of self-efficacy which states that People with high self-efficacy are more likely to set challenging goals, persevere in the face of obstacles, and achieve success, while those with low self-efficacy may avoid challenges and give up easily. The theory emphasizes the profound impact of one's belief in their own abilities on motivation, performance, and behavior. It underscores the idea that building and maintaining confidence in one's skills can lead to greater success and resilience in the face of challenges.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1. Introduction

This section describes the methods and procedures that will be used in the study. This will be discussed under the following sub-headings: Research design, Research setting, Population target, Sample size and sampling techniques, Instrument for data collection, Validity/reliability of the instrument, Ethical consideration, Method of data collection, Method of data analysis.

3.2 . Research Design

A research design refers to the overall strategy or framework of the study and it constitutes the blueprint for the collection, measurement, and analysis of data. The descriptive survey method is considered the most appropriate design because it is cheap and most suitable for this study considering the fact that surveys used to obtain information concerning the current status of the phenomena and to describe "what

exists” with respect to variables or conditions in a situation.

3.3 . Research Setting

Research setting is the physical location and conditions in which data collection takes place in the study (Polit & Beck, 2012). The research setting can also be seen as the physical, social, and cultural site in which the researcher conducts the study. The research was carried out in the School of Basic Medical Sciences, College of Medical Sciences, University of Benin and Benson Idahosa University (BIU) Edo State. The University of Benin is an established and licensed university housing different individuals that cut across all areas of the educational discipline. The University was founded in 1970, it started as an Institute of Technology and was accorded the status of a full-fledged university by the National Universities Commission (NUC) on July 1 1971. The University comprises of 13 faculties. The School of Basic Medical Sciences comprise of seven departments: Anatomy, Medical Biochemistry, Medical laboratory Science, Nursing Science, Physiology, Physiotherapy and Radiography/Radiation Sciences.

BIU was founded on February 2002 and it comprises of 5 faculties. The School of Basic Medical and health Science comprises of four departments: Medical laboratory science, Nursing science, Anatomy and Physiology. Nursing department was created on 22 July 2019 after the approval from NUC and gained accreditation 14th April 2022.

3.4 . Target Population

Essel and Owusu (2017) defined population as the complete set of individuals, objects

or scores that on investigation that the researcher is interested in studying. It basically, refers to the entire collection of all observation of study.

Target population refers to the entire group of individuals or objects to which researchers are interested in generalizing the conclusions. The target population of the study comprise of all students in 200-500 level in Nursing department, University of Benin and Benson Idahosa university Edo State totaling 1087 (Statistics from School Secretary; July, 2019). This target population will be chosen because these set of students know the rudiments and they receive core nursing lectures. This meet the criteria to be subjects of the research study .Sample size for the study is 1087 and this was gotten from Student Affairs Office of both Universities.

3.5. Sampling

Sample is a proportion of a population. It is a subset of population selected to participate in a research study. It defines the selected group of elements, that is, individuals, groups or organizations. (Chinweuba *et al.*, 2014). Sample size is the number of subjects or participants recruited and to which the study findings will be generalized. The sample size for the study will be calculated from the study population using Taro Yamane equation with 95% confidence level.

n = sample size

N = population size

e = level of precision. (e = 0.05).

n =

= **290**

With 10% attrition rate, which is 29

$$n = 290 + 29 = 319$$

The sample size for this study is 319 students.

3.6. Sampling Technique

In this study, multistage sampling technique was used to select study sample from the Nursing departments in both schools. The sampling would run till the proportion allocated for each level is completed.

For this study, the first stage is to list all nursing schools in Edo state. Secondly is to divide the schools into senatorial districts. Thirdly, by a way of convenience is the use of the non-probability sampling technique, this was used to select Edo-South senatorial district. Fourthly, the researcher divides schools into LGAs that make up Edo-South senatorial district and randomly select one (1) school each from the three (3) inclusive schools in the LGA. Lastly, two schools are selected from the LGA.

Level	Population	Number of students to be sampled	Approximate number of students to be sampled
Uniben Nursing			
200	133	$(133 \div 1087) \times 319$	39
300	159	$(159 \div 1087) \times 319$	49
400	146	$(146 \div 1087) \times 319$	42
500	89	$(89 \div 1087) \times 319$	26
BIU Nursing			
200	172	$(172 \div 1087) \times 319$	50
300	156	$(156 \div 1087) \times 319$	45
400	126	$(126 \div 1087) \times 319$	37
500	106	$(106 \div 1087) \times 319$	31

Stage Two: Convenient sampling technique will be used to select students in each selected level.

3.7. Instrument for Data Collection

The instrument for this study was a self-structured questionnaire, which was chosen because the survey research design was used in this study. The questionnaire enhanced the collection of data from a large number of respondents within a limited period of time (Chinweuba, Iheanacho, & Agbapuonwu, 2014). The research instrument is a standard tool and it was constructed in four (4) sections such that section A covered the demographic characteristics of the students, section B contains items on Students' Academic stress, Section C contains items on Burn Out Syndrome (Maslach Burnout Inventory-Student Survey (MBI-SS) and D contains academic performance. The MBI-SS is a validated instrument used by several studies to screen for burnout. These studies include; Impact of burnout on academic achievement of female student in health sciences by Alanoud (2020), Assessment of burnout in medical students by Obregon et al (2020) and this tool has proven effective for measuring student burnout. The items evaluate three dimensions: emotional exhaustion, cynicism, and academic efficacy. Low scores for academic efficacy (Low: 22 or lower; Moderate: 23-27; High: 28 or higher) and high scores for emotional exhaustion (Low: 0-9; Moderate: 10-14; High: 15 or higher) and cynicism/depersonalization (Low: 0-1; Moderate: 2-6; High: 7 or higher) are

indicative of burnout, according to the three-dimensional criterion, the most frequently adopted in studies. The two-dimensional criterion involves high scores for emotional exhaustion and cynicism. The one-dimensional criterion involves only high scores for emotional exhaustion. The questionnaire contained closed ended questions and was constructed using the multiple-choice questions and Likert scale.

3.8 . Reliability of the Instrument

Reliability refers to the degree to which a research instrument produces stable and consistent results (Davidson, 2011). A reliable instrument is one that can produce the same results if the behaviour is measured again by the same scale. According to Jessen (2012), the reliability of a measuring tool can be assessed in various ways. The Cronbach Alpha reliability technique was employed in this study. Reliability was upheld by using the same instrument to collect data from the respondents and clarifications was done so that they did not misunderstand the items in the questionnaire. In this study, the reliability testing was carried out such that 20 questionnaires were distributed to university (Ambrose Alli University) not selected for this study and their responses was analyzed for reliability. The Cronbach Alpha value greater than 0.692 was considered reliable.

3.9 . Validity of the Instrument

Validity refers to the degree to which a research instrument measures what it intends to measure (Jessen, 2012). To ensure the validity of the instrument, it was structured by the researcher in relation with the research topic and its objectives. Due corrections were made before it was distributed. Face and content validity testing was done by

experts in nursing education, the project supervisor and statistician The questionnaire measured what it was supposed to measure and this ensured its validity.

3.10. Method of Data Collection

Data for this study was collected through the administration of questionnaires to respondents. It was administered to the students during their break period. The distribution and collection of filled questionnaires from the respondents took place from September to November 2023.

3.11. Method of Data Analysis

Data analysis is a mechanism for reducing and organising data to produce findings that require interpretation by the researcher (Jessen, 2012). All data was coded, entered and analyzed using Statistical Package for Social Sciences (SPSS) version 26.0 spread sheet. Data was presented using frequency and percentages in tables and charts. Hypotheses testing was tested using Chi-square (χ^2) test of association and Analysis of Variance (ANOVA). The level of significance was set at $p < 0.05$.

3.12 . Ethical Consideration

The ethical principles of research include certain requirements for the researcher: the research information given by the participants, voluntary and autonomous participation and the possibility to withdraw at any time they wish (Polit & Hungler, 2014 Pp 416-417).

The principle of voluntary participation, maintenance of anonymity and confidentiality was maintained throughout the study. The students was not forced to participate in the study and their views and interests was handled with utmost

confidentiality. A written permission was obtained from the ethics and research committee of College of Medical Sciences, University of Benin and Benson Idahosa University, Benin City. The following ethical considerations was maintained during the research exercise;

1. **Confidentiality:** The information provided by respondents was treated with utmost confidentiality, hence, no name or addresses was requested for, in the questionnaire. Respondents was made to understand that their responses to the questionnaire remained completely confidential and that the observations is intended to be used only for scientific research purposes solely. To maintain this confidentiality and anonymity, no personal identifier was used or indicated on any document or questionnaire.

2. **Self-determination/voluntary participation:** The respondents have the right to voluntarily decide whether to participate in the study or not without the risk of incurring any penalty or prejudicial treatment. They were given the right to decide at any point during the study to withdraw their participation or refuse to provide any information on any point that is not clear to them.

3. **Plagiarism:** All authors used in this study was appropriately cited both in the body of the work and at the reference page.

4. The purpose and benefit of the study was explained to the respondents to obtain their informed consent.

The researcher maintained the following ethical consideration during the research exercise

A written permission was obtained from the ethics and research committee of University of Benin, School of Basic Medical Sciences and Benson Idahosa University, School of Basic and Health Science. Due permission was obtained from the Head of Departments, Department of Nursing Science, to go on with the research. An informed written consent was sought from all respondents, explaining to them the nature of the research and how it is prepared to prevent personal identification. A copy of the ethical approval certificate is attached in the appendix.

CHAPTER FOUR

DATA PRESENTATION AND ANALYSIS

4.1. Introduction

This chapter presents and analyzes the survey data collected during the study. The demographics of undergraduate nursing students were examined. Following that, the chapter looked at the factors considered to contribute to burnout syndrome, such as academic stressors like competition, workload, and exam-related concerns. Burnout prevalence and distribution among these students are also explored. Furthermore, the chapter examines these students' academic performance levels. Finally, hypothesis testing is carried out to evaluate the relationships and differences between the variables under consideration.

4.2. Demographic Profile of Undergraduate Nursing Students

The first section of the questionnaire provided information on the demographics of undergraduate nursing students. Table 4.1 summarizes the characteristics of the respondents, along with their frequencies and percentages.

According to the findings, 50.8% of respondents were between the ages of 21 and 25 while 33.2% of respondents were between the ages of 16 and 20. Respondents aged 26-30 years were represented by 15.4% of the total, with a small proportion, 0.6%, aged 31 and above. In terms of gender, male respondents accounted for 11%, while female respondents accounted for 89%. Based on the academic level findings, students in their first year made up 0.9% of the sample, while those in their second year made up 24.8%. The 300L students made up 7.5% of the sampled population, while the 400L students made up the majority, accounting for 49.5%. The 500L students made up 17.2% of the respondents.

Results on residence reveal that a significant portion, 53.6%, reside on campus, 38.9%, off campus, and 7.5%, at home. Regarding the mode of entrance into the university, 88.7% were admitted through the UTME, 10.3% were admitted through direct entry, and 0.9% were transfer students.

Table 4.1. Demographic Profile of Undergraduate Nursing Students

Student Demographic Profile			
Age	Frequency	Percent	
16-20years	106	33.2	
21-25years	162	50.8	
26-30years	49	15.4	

31years and above	2	0.6
Sex		
Male	35	11
Female	284	89
Level		
100L	3	0.9
200L	79	24.8
300L	24	7.5
400L	158	49.5
500L	55	17.2
Residence		
On Campus	171	53.6
Off-Campus	124	38.9
From Home	24	7.5
Mode of Entry		
UTME	283	88.7
Direct Entry	33	10.3
Transfer	3	0.9

4.3. Factors Contributing to Burnout Syndrome

Examining the causes of burnout syndrome is essential to understanding how undergraduate nursing students perceive its impact on their academic performance.

These factors cover a range of student experiences and academic stress.

According to the findings, a large majority of students perceived the competition with their peers for grades to be quite intense, with 29.8% agreeing and 26.3% strongly agreeing, resulting in a mean score of 3.62. This suggests that academic competition among students plays a significant effect on their perceived stress. Concerning teachers' critical tendency toward academic performance, 47.6% agreed and 16.3% strongly agreed. The mean score of 3.62 indicates that many students considered their

teachers as demanding, which added to their stress.

Parents' expectations were noted to stress some students, with 30.4% disagreeing, 24.1% neutral, and 15% agreeing. A mean score of 2.65 indicates that parental expectations do not significantly stress a large portion of the student body. When evaluating the amount of time allotted to classes and academic work, a balanced distribution was evident, with 26.3% disagreeing, 14.1% neutral, and 20.1% agreeing. This, combined with a mean score of 2.95, suggests that while some students believe time allocation is insufficient, others believe it is adequate. Students acknowledged an excessive curriculum workload, with 32.9% agreeing and 47.6% strongly agreeing. This resulted in a pronounced mean score of 4.16, indicating student agreement on the demanding nature of the curriculum.

The amount of work assigned was perceived as significant, with 35.7% neutral and 29.2% agreeing. The mean score of 3.32 indicates that a significant portion of students recognize the magnitude of their academic workload. Students acknowledged the difficulty of examination questions, with 32.6% neutral and 31.3% agreeing, yielding a mean score of 3.45. This indicates that students are aware of the difficult nature of examination assessments. Examination periods were found to be particularly stressful for students, with a significant 50.8% strongly agreeing and 37% agreeing. The mean score of 4.31 reflects the level of stress associated with examination periods.

Students were afraid of failing courses, with 44.8% strongly agreeing and 21.9%

agreeing. A mean score of 3.9 indicates that many students are worried about academic failure. Some students saw their exam anxiety as a character flaw, with 30.7% disagreeing, 22.6% neutral, and 16% agreeing. A mean score of 2.68 indicates that this perception is not shared equally by the students. Table 4.2 and Figure 4.2 summarize the findings.

Perceived Academic Stress (Factors contributing to burnout syndrome)	Strongly Disagree (%)	Disagree (%)	Neutral (%)	Agree (%)	Strongly Agree (%)	Mean
Competition with my peers for grades is quite intense	11(3.4)	43(13.5)	86(27)	95(29.8)	84(26.3)	3.62
My teachers are critical of my academic performance	7(2.2)	43(13.5)	65(20.4)	152(47.6)	52(16.3)	3.62
The unrealistic expectations of my parents stress me out	64(20.1)	97(30.4)	77(24.1)	48(15)	33(10.3)	2.65
The time allocated to classes and academic work is enough	62(19.4)	84(26.3)	45(14.1)	64(20.1)	64(20.1)	2.95

The size of the curriculum (workload) is excessive	11(3.4)	18(5.6)	33(10.3)	105(32.9)	152(47.6)	4.16
I believe that the amount of work assignments is too much	13(4.1)	54(16.9)	114(35.7)	93(29.2)	45(14.1)	3.32
The examination questions are usually difficult	12(3.8)	46(14.4)	104(32.6)	100(31.3)	57(17.9)	3.45
Examination times are very stressful for me	7(2.2)	10(3.1)	22(6.9)	118(37)	162(50.8)	4.31
I fear failing courses this year	13(4.1)	44(13.8)	49(15.4)	70(21.9)	143(44.8)	3.9
I think that my worry about examinations is a weakness of character	63(19.7)	98(30.7)	72(22.6)	51(16)	35(11)	2.68

Table 4.2. Factors Contributing to Burnout Syndrome

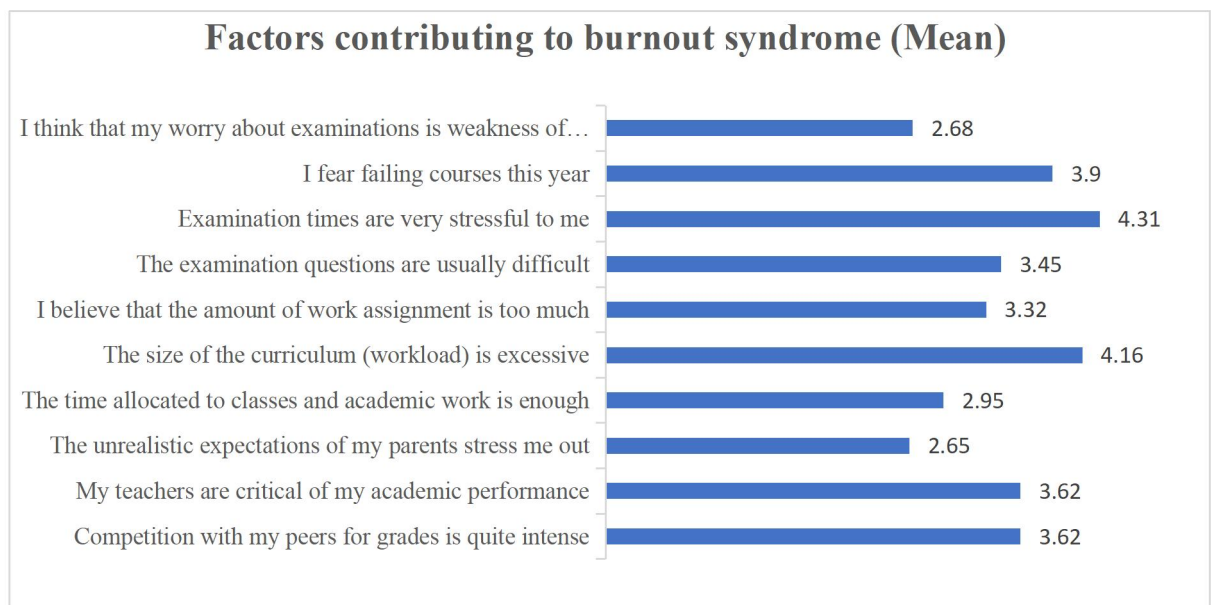


Fig. 4.2. Factors contributing to burnout syndrome (Mean)

4.4. Burnout Among Undergraduate Nursing Students

The manifestations of burnout among undergraduate nursing students at selected tertiary educational institutions in Edo State were examined.

Participants reported feelings of being emotionally drained. A significant 36.1% of students always felt this way, while 13.2% frequently felt this way, yielding a mean score of 4.24. Similarly, feeling exhausted at the end of the day was shared by a significant proportion, with 48.6% always experiencing this sensation, yielding a mean score of 4.93. This was closely related to the sensation of being tired upon waking up in the morning, which had a mean score of 4.22.

Attending class or studying was perceived as a strain by many students, with 22.9% always feeling burdened, resulting in a mean score of 3.65. This academic fatigue was emphasized when 37.3% of the students reported that they were always exhausted by their studies, resulting in a mean score of 4.28.

However, it was noted that a portion of the respondents' enthusiasm for their studies seemed to wane. A total of 22.9% of the students never felt enthusiastic about their studies, resulting in a mean score of 2.29. Furthermore, 45.5% of the participants never doubted the significance of their studies, resulting in a low mean score of 1.68.

Despite the students' feelings of burnout, there were signs of resilience and problem-solving among them. With a mean score of 3.95, it was discovered that 21.3% of students always felt they could effectively solve problems in their studies. The achievement of study objectives remained a source of stimulation for many, with 41.4% always feeling energized upon achieving their academic objectives, resulting in

a mean score of 4.62. Confidence in their ability to perform well in class was expressed by 22.3% of those polled, resulting in a mean score of 3.97. Table 4.3 and Figure 4.3 summarize the findings.

Burnout Among Undergraduate Nursing Students	Never (%)	Rarely (%)	Occasionally (%)	Sometimes (%)	Moderately often (%)	Frequently (%)	Always (%)	Mean
Feel emotionally drained	9(2.8)	14(4.4)	28(8.8)	63(19.7)	47(14.7)	42(13.2)	115(36.1)	4.24
Feel used up at the end of the day	3(0.9)	11(3.4)	13(4.1)	16(5)	48(15)	72(22.6)	155(48.6)	4.93
Feel tired getting up in the morning	8(2.5)	12(3.8)	33(10.3)	51(16)	63(19.7)	46(14.4)	105(32.9)	4.22

Studying or attending a class is a strain	10(3.1)	51(16)	20(6.3)	59(18.5)	71(22.3)	34(10.7)	73(22.9)	3.65
Burned out from studies	13(4.1)	11(3.4)	24(7.5)	52(16.3)	63(19.7)	36(11.3)	119(37.3)	4.28
Less enthusiastic about studies	73(22.9)	55(17.2)	47(14.7)	58(18.2)	38(11.9)	29(9.1)	18(5.6)	2.29
Doubt the significance of studies	145(45.5)	40(12.5)	37(11.6)	27(8.5)	27(8.5)	20(6.3)	22(6.9)	1.68
Effectively solve problems in studies	9(2.8)	23(7.2)	14(4.4)	82(25.7)	58(18.2)	64(20.1)	68(21.3)	3.95
Feel stimulated to achieve study goals	5(1.6)	14(4.4)	17(5.3)	31(9.7)	62(19.4)	56(17.6)	132(41.4)	4.62
Confident of effectiveness during class	10(3.1)	18(5.6)	36(11.3)	46(14.4)	78(24.5)	59(18.5)	71(22.3)	3.97

Table 4.3. Burnout Among Undergraduate Nursing Students

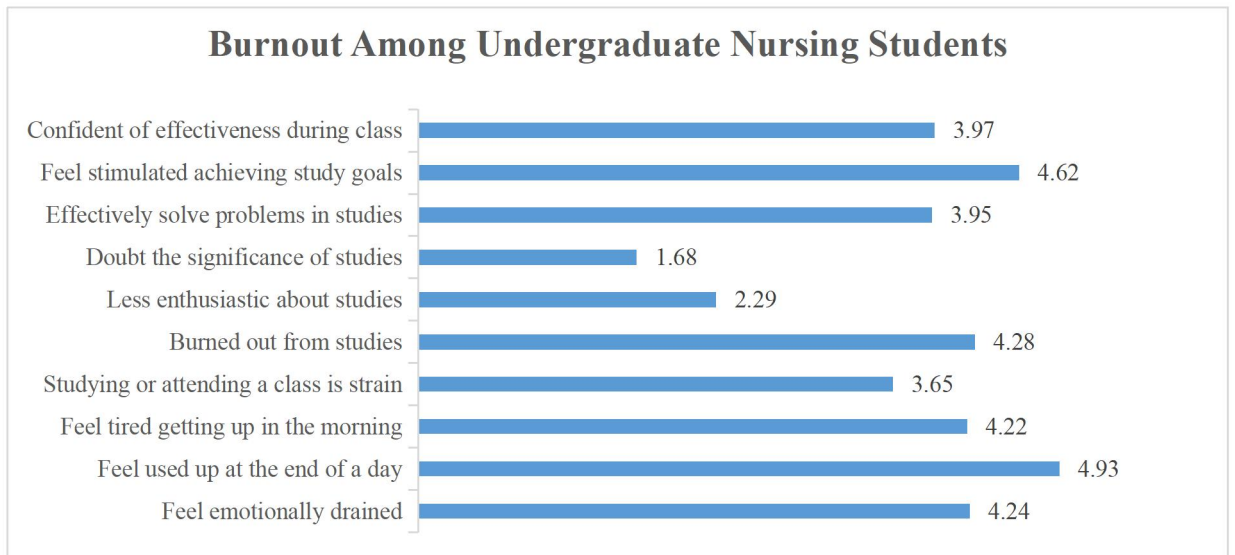


Fig. 4.3. Burnout Among Undergraduate Nursing Students

4.4.1. Levels of Burnout Syndrome among Undergraduate Nursing Students

Burnout syndrome was assessed in undergraduate nursing students. The findings revealed distinct levels of burnout syndrome, providing important insights into these students' well-being.

A significant proportion of respondents, 36.05%, had a low level of burnout syndrome. These students reported minimal feelings of exhaustion, cynicism, and reduced professional efficacy. This finding suggests that a significant portion of the student body is coping with academic and personal challenges without experiencing significant burnout.

The findings revealed that 30.72% of undergraduate nursing students had moderate burnout syndrome. When compared to those with low burnout, this group reported a higher level of exhaustion, cynicism, and reduced professional efficacy. While not suffering from severe burnout, these students displayed signs of stress and emotional exhaustion during their academic journey.

A significant 33.23% of the students were found to have high levels of burnout syndrome. This group reported significant emotional exhaustion, cynicism, and reduced professional efficacy. Their experiences indicate a significant level of burnout, which could harm their academic performance and overall well-being. Table 4.3.1. summarizes the results.

Table 4.3.1. Levels of Burnout Syndrome among Undergraduate Nursing Students

Levels of Burnout Syndrome	Frequency	Percent
Low Burnout Syndrome	115	36.05
Moderate Burnout Syndrome	98	30.72
High Burnout Syndrome	106	33.23

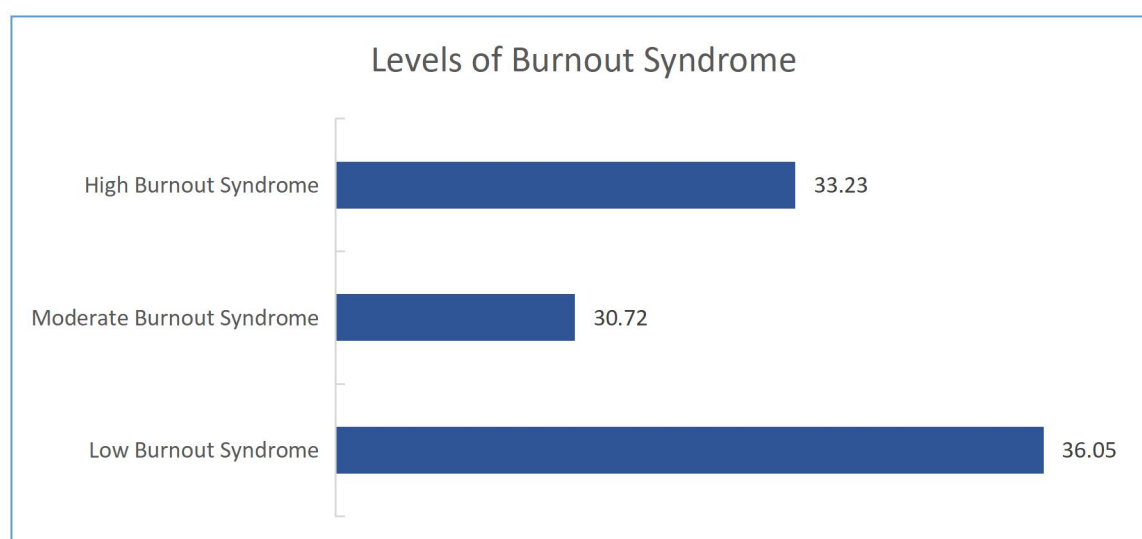


Fig. 4.3.1. Levels of Burnout Syndrome among Undergraduate Nursing Students

4.5. Academic Performance of Undergraduate Nursing Students

Undergraduate nursing students' academic habits and performance were examined. Regarding commitment to studies, it was discovered that 18.8% of students spent less than 5 hours per week studying. The majority, 34.8%, dedicated between 5 and 10

hours per week. Furthermore, 30.7% of respondents spent 10-15 hours per week studying, while 15% of students spent 15-20 hours per week studying.

The timely completion of homework is another indicator of students' academic dedication. It was discovered that only 1.3% of students never completed their assignments on time. A larger proportion, 12.5%, rarely met deadlines. However, a significant 38.2% of students were able to submit their work on time several times. Surprisingly, 47.6% of students always made sure their homework was submitted on time, demonstrating their commitment to academic responsibilities.

Various trends were observed when assessing academic performance as represented by the Cumulative Grade Point Average (CGPA) across different levels. In the 100L CGPA distribution, 0.6% of students had a CGPA ranging from 1.50-2.09. The majority of students, 39.2%, had CGPAs ranging from 3.10-4.00, while 23% and 20.6% had CGPAs ranging from 4.01-4.49 and 4.50-5.00, respectively.

The majority of the 200L distribution, 41.8%, had a CGPA between 3.50 and 4.00. Meanwhile, 26.8% and 7.2% of students had CGPAs ranging from 4.01-4.49 and 4.50-5.00, respectively. In the 300L, 21% had a CGPA of 3.50-4.00, followed by 15.8% and 8.7% in the 4.01-4.49 and 4.50-5.00 ranges, respectively.

Finally, the 400L CGPA distribution revealed that 11.4% of students had CGPAs ranging from 3.50-4.00, while 8.7% had CGPAs ranging from 4.01-4.49. Moreover, 7.3% achieved a CGPA in the 4.50-5.00 range. Table 4.4. summarizes the results.

Table 4.4. Academic Performance of Undergraduate Nursing Students

Academic Performance		Frequency	Percent
How many hours do you typically study per week?	Less than 5 hours	60	18.8
	5-10 hours	111	34.8
	10-15 hours	98	30.7
	15-20 hours	48	15
	Never	4	1.3
How often do you complete your homework on time?	Rarely	40	12.5
	Sometimes	122	38.2
	Always	152	47.6
100L CGPA	1.50-2.09	2	0.6
	2.10-3.09	15	4.6
	3.10-4.00	126	39.2
	4.01-4.49	74	23
	4.50-5.00	66	20.6
200L CGPA	2.50-3.09	6	1.8
	3.10-3.49	16	5.1
	3.50-4.00	134	41.8
	4.01-4.49	86	26.8
	4.50-5.00	23	7.2
300L CGPA	2.50-3.09	7	2.2
	3.10-3.49	10	3
	3.50-4.00	68	21
	4.01-4.49	51	15.8
	4.50-5.00	28	8.7
400L CGPA	2.50-3.09	8	2.5
	3.10-3.49	17	5.1
	3.50-4.00	37	11.4
	4.01-4.49	28	8.7
	4.50-5.00	24	7.3

4.5.1. Levels of Academic Performance among Undergraduate Nursing Students

The academic performance of undergraduate nursing students was evaluated. The findings revealed different levels of academic performance.

A significant proportion of respondents, 35.4%, demonstrated low academic performance. These students achieved academic results that fell short of expectations. Their performance could have been influenced by a variety of factors, including burnout syndrome, which was a major focus of this study.

A significant 31.3% of undergraduate nursing students demonstrated a moderate level of academic performance. This group obtained mid-range academic results, indicating satisfactory but not exceptional performance. While they may not be experiencing the lowest level of academic performance, they may still face challenges that affect their achievement.

The results also revealed that 33.2% of the students achieved high academic performance. These students consistently surpassed the norm in their academic performance. Their performances in school show a high level of dedication, commitment, and possibly effective strategies for dealing with the challenges of their academic journey. Table 4.4.1 summarizes the results.

Table 4.4.1. Levels of Academic Performance among Undergraduate Nursing Students

Levels of Academic Performance	Frequency	Percent
Low Academic Performance	113	35.4
Moderate Academic Performance	100	31.3
High Academic Performance	106	33.2

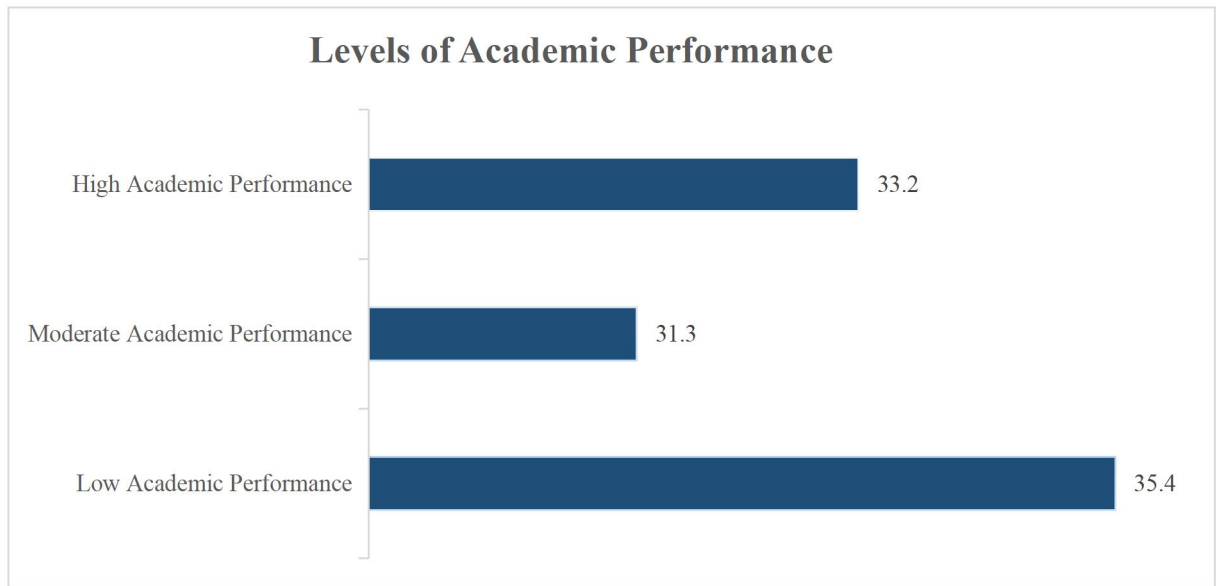


Fig. 4.4.1. Levels of Academic Performance among Undergraduate Nursing Students

4.6. Hypothesis Testing

4.5.1 *Hypothesis 1: There is no significant relationship between burnout syndrome and academic performance among selected undergraduate nursing students.*

The first research hypothesis was statistically tested using ANOVA to investigate the relationship between burnout syndrome and academic performance among selected undergraduate nursing students.

Given a significance value of 0, which is less than 0.05 ($p < 0.05$), the null hypothesis - that there is no significant relationship between burnout syndrome and academic performance - can be rejected. This suggests that burnout syndrome has a significant relationship with academic performance among the selected Edo State undergraduate nursing students. Table 4.5.1 summarizes the results.

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	20778.316	212	98.011	2.236	0
Within Groups	4602.467	105	43.833		
Total	25380.783	317			

Table 4.5.1. Relationship between burnout syndrome and academic performance

The regression analysis was further employed to evaluate the perceived influence of burnout syndrome on the academic performance of undergraduate nursing students while considering several potential influencing variables.

The unstandardized coefficient (B) for burnout syndrome was -0.026. This indicates that for each unit increase in burnout syndrome, there is a corresponding decrease of 0.026 units in academic performance. This means that the more students experience burnout, the less their academic performance.

The standardized coefficient (Beta) for burnout syndrome was -0.041, and the t-value was -0.786, with a significance level (Sig.) of 0.432. This result suggests a negative relationship between burnout syndrome and academic performance and the p-value of 0.432 indicates that this relationship is not statistically significant. This result is not reliable and cannot be trusted at a 95% confidence interval. Hence, burnout syndrome does not have a substantial impact on academic performance.

It is essential to consider that the adjusted R-square value is 0.17, which means that the model explains 17% of the variance in academic performance. This suggests that other variables, such as age, sex, academic level, residence, and mode of entry, included in the model might collectively have a more substantial impact on academic performance compared to burnout syndrome. Table 4.5.1.1. summarizes the results.

Table 4.5.1.1. Perceived influence of burnout syndrome on academic performance

Model Summary	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	F	p-value
	B	Std. Error	Beta				
(Constant)	15.036	3.299		4.558	0		
BS	-0.026	0.033	-0.041	-0.786	0.432		
Age	-0.249	0.106	-0.134	-2.351	0.019		
Sex	-0.299	0.933	-0.017	-0.32	0.749	11.855	.000b
Level	0.024	0.003	0.462	8.036	0		
Residence	-0.271	0.465	-0.03	-0.582	0.561		
Mode of Entry	-0.217	0.856	-0.013	-0.254	0.8		

a Dependent Variable: Academic Performance

b Predictors: (Constant), Mode of Entry, Age, Sex, Residence, Burnout Syndrome, Level

Adjusted R Square = 0.17, Std. Error of the Estimate = 5.15957

4.5.2. Hypothesis 2: There is no significant difference between undergraduate student demographic profile and burnout syndrome.

The Chi-square test was used to evaluate the second research hypothesis, which states that there is no significant difference between undergraduate student demographic profiles and burnout syndrome among selected Edo State undergraduate nursing students.

Significant findings emerged from the analysis of age groups concerning burnout syndrome levels. A Pearson Chi-Square statistic of 58.724 was obtained, with a p-value of 0.003. This demonstrates a significant relationship between age and levels of burnout syndrome among the selected undergraduate nursing students. Notably, students aged 16 to 20 displayed varying levels of burnout syndrome when compared

to students of older ages.

The chi-square analysis revealed that there was no significant difference in burnout syndrome levels based on gender (sex). The Pearson Chi-Square statistic of 2.731 yielded a p-value of 0.255, indicating that gender plays no significant role in determining burnout syndrome levels among students.

The examination of academic levels to burnout syndrome yielded notable results. A Pearson Chi-Square statistic of 20.215 was obtained with a p-value of 0.027. This implies that there is an association between academic levels and burnout syndrome. Different academic levels demonstrated varying levels of burnout syndrome, implying that the academic journey influences students' burnout experiences.

There was no statistically significant difference between residence types and burnout syndrome levels. A Pearson Chi-Square statistic of 5.599 yielded a p-value of 0.231, indicating that the type of residence (on campus, off campus, or from home) has no significant influence on students' experience of burnout syndrome.

The chi-square analysis revealed no significant relationship between the mode of entry (UTME, Direct Entry, or Transfer) and burnout syndrome levels. The Pearson Chi-Square statistic of 6.191 yielded a p-value of 0.185, indicating that the mode of entry has no significant effect on the students' experience of burnout syndrome. Table 4.5.2. summarizes the results.

Table 4.5.2. Difference between undergraduate student demographic profile and burnout syndrome.

		Burnout Syndrome (BS)			Pearson Chi-Square	P-value
		Low BS	Moderate BS	High BS		
Age	16-20years	36	29	41	58.724a	0.003
	21-25years	66	42	54		
	26-30years	13	25	11		
	31years and above	0	2	0		
Sex	Male	10	10	16	2.731a	0.255
	Female	105	88	90		
Level	100	0	0	4	20.215a	0.027
	200	33	17	28		
	300	7	5	12		
	400	55	61	42		
	500	20	14	20		
	600	0	0	1		
Residence	On Campus	54	60	57	5.599a	0.231
	Off-Campus	49	32	42		
	From Home	12	6	7		
Mode of entry	UTME	108	85	90	6.191a	0.185
	Direct Entry	6	12	16		
	Transfer	1	0	1		

CHAPTER FIVE
DISCUSSION OF FINDINGS, SUMMARY, CONCLUSION AND
RECOMMENDATIONS

5.1. Introduction

This chapter discusses the study's results and emphasizes their importance in light of the body of existing literature. It also offers a summary of the study and its implications for the field of nursing education. The chapter concludes with suggestions for addressing the problem of burnout among undergraduate nursing students, adding to the ongoing academic conversation and guiding future research initiatives.

5.2. Discussion of findings

According to the study's demographics, the majority of respondents (50.8%) were between the ages of 21 and 25, while 33.2% were between the ages of 16 and 20. Notably, 15.4% were between the ages of 26 and 30, highlighting the importance of age diversity. Females made up the vast majority (89%), which is consistent with the field's trend. Among academic levels, 400L students predominated (49.5%), indicating that they may face burnout issues as they advance to advanced clinical responsibilities as noted by Hwang & Kim, (2022). First-year students (100L) made up a small proportion (0.9%), indicating that burnout is less severe in the early stages. Residence showed 53.6% on-campus, 38.9% off-campus, and 7.5% at home. UTME was the most common mode of entry (88.7%), with direct entry accounting for 10.3% and transfers accounting for 0.9%. These demographics have an impact on burnout

experiences and should be taken into account when evaluating burnout and academic performance. These findings are consistent and similar to the results obtained by Farahani et al., (2016); Mohamed et al., (2022); Obekpa et al., (2020); and Prakash et al., (2023).

The study's research questions look into the perceived impact of burnout syndrome on academic performance among undergraduate nursing students, as well as the factors that contribute to burnout syndrome in this population. This study's findings provide important insights into these critical questions.

The perceived impact of burnout syndrome on academic performance among undergraduate nursing students was a major focus of this study. A significant number of students frequently reported feelings of emotional exhaustion, exhaustion at the end of the day, and morning fatigue. These findings are consistent with those of Obekpa et al., (2020), who reported a strong relationship between emotional exhaustion and academic performance in nursing students. Furthermore, students who saw attending class and studying as a strain reported more frequent burnout symptoms, indicating a significant impact on their academic lives. This is also consistent with the findings of (Obekpa et al., 2020) highlighting the negative impact of burnout on academic engagement.

While the ANOVA result shows a significant relationship between burnout syndrome and academic performance, the regression result suggests that burnout syndrome has no substantial impact on academic performance.

Various sources of stress were examined to address the second research question about the factors contributing to burnout syndrome among undergraduate nursing students. Notably, academic competition emerged as a significant factor contributing to burnout, with a high percentage of students finding it intense. This competitive environment can be especially demanding, which is consistent with the findings of Farahani et al., (2016) on the impact of academic pressure on student well-being. The study also looked into the critical nature of lecturers, discovering that many students perceived their lecturers to be demanding, which is consistent with previous research by Mohamed et al., (2022) on the role of faculty in burnout experiences. Parental expectations, on the other hand, did not significantly stress a large proportion of students, implying that, while parental expectations can influence students, they may not be the primary source of burnout. The widespread recognition of excessive workload and the difficulty of examination periods as stressors in the academic journey is consistent with research by Hwang & Kim, (2022) and Lino et al., (2022).

The evaluation of the second research hypothesis yielded significant results. In regards to age groups, the study found an association between age and burnout syndrome levels among undergraduate nursing students. When compared to older age groups, students aged 16 to 20 demonstrated varying levels of burnout syndrome. This finding is consistent with the findings of Prakash et al., (2023) and Lino et al., (2022), who both emphasized the importance of age in understanding burnout among nursing students. The observed relationship between age and burnout levels implies that different age groups may experience different stressors or coping mechanisms, which

may have implications for support and intervention strategies tailored to specific age cohorts.

In contrast, there was no significant difference in burnout syndrome levels based on gender (sex) in the study. Gender had no effect on burnout syndrome levels among undergraduate nursing students, which is consistent with previous research by Valero-Chillerón et al., (2019).

The study also found a significant connection between academic levels and burnout syndrome. This suggests that students at various academic levels, such as 100L, 200L, 300L, 400L, 500L, and 600L, had varying degrees of burnout syndrome. The academic journey, marked by transitions and increased academic demands, appears to influence students' burnout experiences, correlating with Prakash et al., (2023) findings on the evolving nature of burnout throughout nursing programs.

The study findings showed no statistically significant differences in burnout syndrome levels based on residence (on campus, off campus, or at home). This finding suggests that students' living arrangements do not have a significant impact on their experience of burnout syndrome, which contradicts the findings of Prakash et al., (2023) highlighting the role of housing in burnout experiences.

Furthermore, there was no significant relationship between the mode of entry (UTME, Direct Entry, or Transfer) and burnout syndrome levels. The mode of entry did not affect students' experience of burnout syndrome. However, some studies like Farahani et al., (2016) have suggested that students entering through different pathways may

face different challenges, indicating the complexities of this relationship.

5.3. Study summary

This study discusses burnout syndrome and its impact on undergraduate nursing students. It highlights that burnout, which is characterized by emotional, physical, and social exhaustion, results from excessive and prolonged stress, thereby affecting individuals' overall well-being and performance. The study emphasizes that nursing students, in particular, are at a high risk of experiencing burnout due to the demanding nature of their profession, involving exposure to stressful clinical settings and emotional interactions with patients. Factors contributing to burnout among nursing students include curriculum workload, academic pressures, time management, and the challenges of managing internal and external stressors.

Empirical literature shows that undergraduate nursing students experience low to moderate levels of burnout, often with negative perceptions regarding its causes and management. Contributing factors include workload, stress levels, and personal characteristics. The study is based on Bandura's theory of self-efficacy, highlighting the importance of individuals' belief in their abilities, which can impact motivation, performance, and resilience when facing challenges.

The research design for this study is a descriptive survey, aiming to obtain information on the current status of phenomena related to burnout syndrome and its impact on undergraduate nursing students. It is conducted in the School of Basic Medical Sciences at the University of Benin and Benson Idahosa University in Edo

State. The target population includes all students in the 200-500 level in the Nursing department of these universities, totalling 1087. The sample size is determined to be 319 students. A multistage sampling technique is employed, and the number of students to be sampled at each level is based on proportions. The data is collected using a self-structured questionnaire, comprising sections on demographic characteristics, academic stress, burnout syndrome (using the Maslach Burnout Inventory-Student Survey), and academic performance. Hypotheses are tested using the Chi-square (χ^2) test of association and Analysis of Variance (ANOVA). The significance level is set at $p < 0.05$.

The first section of the questionnaire collected demographic data about undergraduate nursing students, revealing details such as age, gender, academic level, residence, and mode of university entry. Most students were between 16-30 years old, predominantly female, with a varied distribution across academic levels and living situations. The majority entered through the UTME.

The study also explored factors contributing to burnout syndrome among these students. Results showed that intense competition for grades, critical teachers, and concerns about workload contributed to academic stress. Some students were particularly stressed during examination periods and feared failing courses.

The study further examined burnout among undergraduate nursing students, revealing that many experienced emotional exhaustions, feeling drained, and academic fatigue. While some students felt energized upon achieving academic goals, others doubted

the significance of their studies.

The levels of burnout syndrome among students varied, with a significant portion experiencing low, moderate, and high levels of burnout. Additionally, the study analyzed students' academic performance, finding a diverse distribution in terms of study hours, timely completion of assignments, and Cumulative Grade Point Averages (CGPA) across different academic levels.

The first hypothesis which suggested a significant relationship between burnout syndrome and academic performance, was confirmed through ANOVA analysis, indicating that burnout syndrome is indeed related to academic performance. The second hypothesis examines the relationship between demographic factors and burnout syndrome and produces mixed results. Age and academic level were associated with different levels of burnout, but gender, residence type, and mode of entry had no significant impact on students' experiences of burnout.

5.4. Conclusion

This study examined the perceived influence of burnout syndrome on academic performance among undergraduate nursing students in selected tertiary educational institutions in Edo State and yielded significant insights. The research objectives, questions, and hypotheses were used as a guide to evaluate the factors contributing to burnout, levels of burnout syndrome, and the association between burnout syndrome and academic performance.

The demographic profile of the participating students revealed a diverse student body

with varying ages, genders, academic levels, residences, and modes of entry into the university. This provides a foundation for understanding the impact of burnout across a spectrum of student experiences.

Students expressed a significant sense of academic competition, with a substantial portion agreeing that the competition for grades was intense. Teachers' critical tendencies were also a source of stress, as many students perceived their instructors as demanding. The findings suggested that parental expectations did not exert a widespread influence, and opinions regarding the adequacy of time allocated to academic work were divided. However, the curriculum's workload was widely acknowledged as excessive, and the difficulty of examination questions was a common concern. The examination period, in particular, emerged as a highly stressful phase for students, with a substantial proportion indicating their apprehension about failing courses.

Furthermore, when investigating burnout among undergraduate nursing students, this research found that a significant proportion of participants reported feelings of emotional exhaustion, fatigue, and strain associated with attending classes or studying. Despite these challenges, a portion of the students displayed resilience and problem-solving abilities, maintaining enthusiasm for their studies and achieving their academic goals.

In terms of levels of burnout syndrome, this study categorized students into low, moderate, and high levels of burnout. It was revealed that a substantial portion of the

students experienced moderate to high levels of burnout, with emotional exhaustion being a prevalent concern. These findings underscore the significance of addressing burnout in nursing education to enhance student's overall well-being and academic performance.

The results of the hypothesis testing further validate the relationships explored in this study. The significant association between burnout syndrome and academic performance corroborates the hypothesis, indicating that burnout negatively impacts students' academic achievements.

5.5. Implications to Nursing

The implications of this study extend beyond the confines of academia. The study's findings have several significant implications for the field of nursing and nursing education.

The study emphasizes how crucial it is to identify and treat burnout among nursing students. A proactive approach is required due to the prevalence of burnout, which is demonstrated by the substantial percentage of students who report experiencing moderate to severe emotional exhaustion. Emotional exhaustion, depersonalization, and a reduced sense of personal accomplishment are characteristics of the psychological occupational syndrome known as burnout. People in a variety of professions are affected by this syndrome (Singh et al., 2023). The impact on clinical outcomes, patient safety, and patient-centered care in healthcare settings has been acknowledged as a significant global problem (West et al., 2022). As a result, nursing

programs should include interventions and support systems to recognize, stop, and minimize burnout.

Burnout studies among undergraduate nurses provide valuable insights into the effectiveness of nursing curricula and clinical experiences. Educators can use this information to adapt curriculum content, teaching methods, and clinical placements to better support student well-being and preparedness for nursing practice.

Interventions should focus on the precise stressors the study identified, such as academic competition, demands from lecturers, and the pressure of examination periods. Academic stressors that nursing students experience can be reduced by interventions that promote a supportive and collaborative learning environment. Nursing students have been found to benefit greatly from multi-component interventions that promote resilience building, skill application, and information sharing (Tating et al., 2023). The role of faculty and instructors in fostering an atmosphere that fosters resilience and well-being is critical (Majeed, 2023).

5.6. Recommendations

The following recommendations are made in light of the study's findings to minimize the negative effects of burnout on academic performance and to improve the general well-being of nursing students.

The development of an encouraging and collaborative learning environment should be a top priority for nursing institutions and educators. According to the study, academic competition and demands from lecturers are factors in students' perceived stress.

Faculty members are critical in setting the tone for a positive learning environment. As a result, faculty development programs should be implemented to provide educators with the skills necessary to create nurturing and supportive classroom environments (Majeed, 2023).

It is also recommended that nursing programs include interventions to improve students' stress management and resilience. Integrating psychological resources and resilience training into the curriculum is one of these interventions (Alaween & Alzayyat, 2023). These programs can provide students with effective coping strategies for dealing with stress and avoiding burnout. Furthermore, mental health and counselling services should be readily available to provide students with a safe environment in which to seek help when needed. Early detection and intervention are essential for preventing burnout from getting worse.

5.7. Suggestion for further studies

The results of this study have made room for more research and exploration. The suggestions for further study are intended to advance knowledge of this problem and guide evidence-based interventions.

Future studies could examine the effects of particular burnout reduction strategies on nursing students' academic performance. While the presence of burnout and its relation to academic performance was highlighted in this study, it would be beneficial to investigate how targeted interventions, such as stress management courses, mindfulness exercises, or resilience-building activities, may reduce burnout and

improve academic results.

Investigation is also necessary into the role that lecturers and teaching strategies play in causing or preventing student nurses' burnout. A study could investigate the relationship between students' stress levels and academic performance and various teaching strategies and faculty attitudes.

To examine how burnout during education affects performance, job satisfaction, and retention in the nursing workforce, a prospective study could follow nursing students throughout their academic careers and into their professional careers.

5.8. Limitations of the study

The study has offered insightful information. However, it is critical to recognize and address the limitations of this study, as they may have an impact on the generalizability and interpretation of the findings.

It is difficult to determine causality because the data were only collected at one point in time. Even though the research shows a relationship between burnout and poor academic performance, it cannot prove that burnout is responsible for it. To determine the direction of this relationship, longitudinal studies that track students over time would be required.

The findings' generalizability may be constrained by the study's focus on just a few tertiary institutions in Edo State. These institutions could have special qualities that set them apart from other institutions. Therefore, care must be taken when extending the findings to nursing students in various locations or institutional settings. The

external validity of the results would be improved by a larger, multi-site study.

Another limitation is that the data are self-reported. Students may give answers they think are expected or favourable in response to questionnaires, which is a phenomenon known as social desirability bias. This bias may have an impact on the data's accuracy, especially when sensitive issues like perceived academic stress and burnout are being studied. Future research might use a variety of data sources, like interviews or observations.

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Reliability Statistics		
Cronbach's Alpha	No. of Items	Cases
0.692	31	20

Appendix

A. RELIABILITY TEST

B. QUESTIONNAIRE

Department of Nursing Sciences

School of Basic Medical Sciences

University of Benin

Benin City

Edo State

Dear Respondent,

The researcher is an undergraduate student of the above-named institution, carrying out a research on *Perceived impact of burnout syndrome on academic performance among undergraduate nursing students of selected tertiary institution in Benin City, Edo State*. Your personal information will not be required for this study; thus, a high level of anonymity and confidentiality will be maintained.

Yours faithfully,

OKUNDAYE IYOBOSA JOY

INSTRUCTION: Tick [✓] the options you consider most appropriate in the space provided.

Section A: Demographic characteristics of respondents

1. Age -----
2. Sex: (a) Male [] (b) Female []
3. Level: _____
4. Residence: On campus [] Off Campus [] From Home []
5. Mode of Entry: UTME [] Direct Entry []

SECTION B: Perceived Academic stress

Please rate your perception about the following statements in contributing to academic stresses

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
1. Competition with my peers for grades is quite intense					
2. My teachers are critical of my academic performance					
3. The unrealistic expectations of my parents stress me out					
4. The time allocated to classes and academic work is enough					
5. The size of the curriculum (workload) is excessive					
6. I believe that the amount of work assignment is too much					
7. The examination					

questions are usually difficult					
8. Examination times are very stressful to me					
9. I fear failing courses this year					
10. I think that my worry about examinations is weakness of character					

SECTION C: BURNOUT AMONG UNDERGRADUATE NURSING STUDENTS

Kindly rate 0 (Never) – 6 (Always)

	0	1	2	3	4	5	6
1. Feel emotionally drained							
2. Feel used up at the end of a day							
3. Feel tired getting up in the morning							
4. Studying or attending a class is strain							
5. Burned out from studies							
6. Less enthusiastic about studies							
7. Doubt the significance of studies							

8. Effectively solve problems in studies							
9. Feel stimulated achieving study goals							
10. Confident of effectiveness during class							

SECTION D: ACADEMIC PERFORMANCE OF UNDERGRADUATE NURSING STUDENTS

How many hours do you typically study per week?

Less than 5 hours []]

5-10 hours []]

10-15 hours []]

15-20 hours []]

How often do you complete your homework on time?

Always []]

Sometimes []]

Rarely []]

Never []]

Current level CGPA

100 level CGPA -----

200 level CGPA -----

300 level CGPA -----

400 level CGPA -----