



## Quality of work life and its association with job burnout and job performance among Iranian healthcare employees in Islamabad-e Gharb, 2016

Ehsan Bakhshi<sup>1\*</sup>, Faramarz Gharagozlou<sup>2</sup>, Ali Moradi<sup>3</sup>, Mohammad Reza Naderi<sup>4</sup>

1- MSc of Ergonomics, Health Center, Islamabad-e-Gharb Health Network, Kermanshah University of Medical Science, Kermanshah, Iran.

2- Assistant Prof., Department of Occupational Health, School of Public Health, Kermanshah University of Medical Science, Kermanshah, Iran.

3- Faculty of Humanities, Kermanshah Branch, Islamic Azad University, Kermanshah, Iran.

4- Medical Doctor, Islamabad-e-Gharb Health Network, Kermanshah University of Medical Sciences, Kermanshah, Iran.



**Citation:** Bakhshi E, Gharagozlou F, Moradi A, Naderi MR. Quality of work life and its association with job burnout and job performance among Iranian healthcare employees in Islamabad-e Gharb, 2016. JOHE 2019; 8(2):94-101.

### Article Info

#### \* Corresponding author:

Ehsan Bakhshi,


#### E-mail:

Ehsanbakhshi63@gmail.com

#### Article history

**Received:** Dec, 2018

**Accepted:** Mar, 2019

 10.29252/johe.8.2.94

**Print ISSN:** 2251-8096

**Online ISSN:** 2252-0902

Peer review under responsibility of Journal of Occupational Health and Epidemiology

### Abstract

**Background:** Health care centers play an important role in providing health service to the public and maintaining the health of the community. This study was an attempt to evaluate the quality of work life and its association with job burnout and job performance among healthcare employees.

**Material and Methods:** This cross-sectional study was carried out on 136 employees of healthcare centers and health homes in Islamabad-e Gharb in 2016. The data collection tools were a demographic characteristics questionnaire, Walton's Quality of Work Life Questionnaire, Maslach Burnout Inventory, and Hersey and Goldsmith's Job Performance Questionnaire. The statistical analysis was conducted using descriptive statistics, the spearman correlation coefficient, one-way ANOVAs, and independent t-tests.

**Results:** The quality of work life was obtained to be low for only over a quarter of participants, whereas only 0.7% of them reported it to be high. The majority of respondents (72.63%), however, stated it as moderate. The quality of work life had a significant negative correlation with job burnout ( $r = -0.291$   $P = 0.001$ ) and held a significant positive association with job performance ( $r = 0.642$   $P = 0.000$ ).

**Conclusion:** The findings of this study suggested a clear link between the quality of working life and both job burnout and job performance. Therefore, taking actions such as providing opportunities for the staff to continue their education, increasing their salaries and benefits as well as promoting their jobs would be considered as common-sense approaches contributing to enhancing the quality of work life.

**Keywords:** Burnout, Job Performance, Healthcare Workers, Iran.

### Introduction

Health organizations play an important role in the maintenance and development of health in human societies (1) while the fulfillment of this objective requires a healthy and highly motivated workforce (2).

Quality of work life refers to the conceptions and thoughts that employees have about their job, the extent to which they are satisfied with their job, and the way they consider their job relative to their goals

(3). In the unfavorable quality of work life, dissatisfaction and maladjusted behavior may arise among personnel. By contrast, high quality of work life leads to a climate of trust and mutual respect, in which employees can be active and develop their psychological as well as reducing the rigid control mechanisms in organization (4). Quality of work life contains two basic concepts in its definition. First, it includes a subjective concept and, second, it has a multidimensional structure. In terms of dimensions,

it includes the physical, psychological, and environmental factors that compare the desires and needs of individuals between what they should have and what is available (5). The concept of quality of work life is currently related to a philosophy in the organizations that seek to increase employees' dignity. In some organizations, managers aim to enhance employees' trust, engagement, and problem-solving skills by implementing appropriate quality of work life plans and, thereby, to enhance organizational satisfaction and effectiveness (6). These plans and programs will exert significant impacts on employee's behavioral responses such as job satisfaction, work participation, job performance, intention for job resignation, and organizational change and transformation (7). Hood & Smith believe that of managers' close attention to quality of work life variables can facilitate a more humanistic work environment, which not only addresses the basic needs of employees but also encompasses the needs of higher levels, continuous growth, and improved performance (8). Much attention has been recently drawn to QWL as an approach to balancing job burnout (9).

Job burnout arises from the response to long-term stress in the workplace, and this syndrome is related to the workplace, in which one's attitudes towards efforts and endeavors in the workplace are negatively affected (10). People with burnout often suffer from headaches, sleep disorder, irritable mood, anxiety, depression, and hypertension (11). Job burnout reduces cognitive ability and, hence, results in reduced job satisfaction and increased disorder in organizational commitment as well as personal injury (12). The imbalance between expectations, knowledge, and skills of employees on one hand, and job requirements, job resources, and responsibilities on the other hand lead to burnout. In addition, high workload and the lack of social support are among the other major risk factors for this phenomenon (13). Since job burnout creates a negative attitude toward the job and a sense of disconnection with the patient during care delivery, it leads to a serious loss of quality of healthcare services; therefore, a careful identification of more effective factors in this area will be beneficial for improving the quality of services provided in the field of health and treatment (14). In addition to job burnout, quality of work life could also have impact on job performance of employees.

Job performance has a significant association with an organization's goals, and it is necessary for the organization to pay special attention to it (15). Job performance refers a set of behaviors controlled by individuals, which affect the goals of the employing organization. The main key to the development and improvement of job performance of individuals is the

identification of the various organizational factors that influence individuals' performance (16). The employees' attitude towards different organizational issues, especially towards the job and the profession they perform, as well as promotions, assigned tasks, selection for training, and pay raise based on assessment can play an important role in increasing their motivation and cause them to perform their duties and responsibilities in the best way, which, in turn, leads to an increase in the effectiveness and efficiency of the organization (17, 18). Today, healthcare organizations are in need of strong support on part of managers in terms of performance evaluation. Performance measurement is one of the most important strategic processes that determines the extent to which the goals and plans of an organization are fulfilled inasmuch as the enhancement of accountability and responsiveness (19). Regarding the role of health staff in the quality of service delivery, it can be argued that the progress and enhancement of an organization hinges upon the employees, who must be aware of the quality of care in their organization. With regard to the important role of staff of health centers and public health centers in the maintenance of people's health, this study aimed to evaluate quality of work life and its effect on burnout and job performance.

## Materials and Methods

In the beginning, this project was approved by the Vice Chancellor of Research Affairs at Kermanshah University of Medical Sciences, Iran (ID code: IR.KUMS.REC.1397.988).

This cross-sectional, descriptive study was conducted based on the census methods at the healthcare centers in Islamabad-e Gharb in 2016. In total, 180 questionnaires were distributed among the participants, and 136 questionnaires were completed and returned (response rate: 75%)

In this study, the following four questionnaires were used:

A demographic characteristics questionnaire: It included information about age, gender, marital status, work experience, education level, history of smoking, place of employment, and employment status.

Walton's Quality of Work Life Questionnaire: This questionnaire is constructed based on Walton's components (20). The reliability of the questionnaire was reported by Ghaleei et al. to be 0.78 (21). This questionnaire includes such components as adequate and fair compensation, safe healthy working environment, opportunity for continued growth and security, constitutionalism in the work organization, social relevance of work life, social

integration and cohesiveness, and the development of human capacities. The questionnaire items are scored based on a five-point, qualitative Likert scale (very low =1, low = 2, moderate = 3, high = 4, very high = 5). The scores can range from 32 to160, where scores lower than 74 are considered as low, 75 to117 as moderate, and those higher than 118 are known as high.

Maslach Burnout Inventory: This questionnaire is one of the most common tools used for the measurement of burnout, which consists of 22 statements. It was designed by Maslach and measures three dimensions of job burnout (22). where nine items pertain to emotional exhaustion, five items relate to depersonalization, and eight statements are about personal accomplishment. The reliability and validity of this questionnaire were confirmed in Iran for the first time by Filian, who reported a test-retest reliability index of 0.78 (23). for the questionnaire. The total score range for total job burnout varies between 0 and 132, in which the scores below 44 ( $\leq 44$ ) represent low job burnout, 45 to 89 show moderate job burnout, and those higher than 99 ( $\geq 90$ ) indicate high job burnout. Hersey and Goldsmith's Job Performance Questionnaire: This

questionnaire, developed by Hersey and Goldsmith, consists of 16 questions under seven components including ability, clarity of role, support, motivation, feedback, validity, and environment. The validity and reliability of this questionnaire were confirmed by Ardestani et al. with a Cronbach's alpha of 0.86 (24). The Cronbach's alpha reliability of this scale was calculated to be 0.75 in the present study. The scores are classified into three ranges: 16-37, 37-58, and 59-80 representing low, moderate, and high job performances, respectively.

The obtained data were analyzed using descriptive statistics, the spearman correlation coefficient, independent t-tests, and one-way ANOVAs at a confidence level of 0.95 in version 19 of the SPSS software.

### Results

In this study, 48.52% of the participants were male. The mean and standard deviation of the participants' age was  $36.4 \pm 8.1$  years old. Table 1 shows the demographic characteristics of the staff in healthcare centers and health homes.

**Table 1:** The demographic characteristics of the staffs in healthcare centers and health homes

Variable	N	%
Sex	Male	48.52
	Female	51.48
Marital status	Married	19.85
	No married	80.15
Education level	Less than diploma	13.23
	Diploma	28.67
	Associates degree	18.85
	Bachelor degree	39.25
Age groups	Under 30	16.17
	31-40	40.53
	41 and older	43.30
Years of service	1-10 years	40.44
	11-20 years	38.24
	21-30 years	21.32
Type of employment	Contractual	19.11
	Employment contract	20.58
	Permanent	60.29
Job category	Health center	56.61
	Health house	43.38
Cigarette smoking	Yes	9
	No	91

In this research, the most experienced QWL level (72% of the participants) was at moderate, followed by low (26%). The mean and standard deviation of job burnout, job performance, and quality of work life were  $45.95 \pm 17.77$ ,  $52.5 \pm 9$ , and  $73.91 \pm 13.22$ ,

respectively. Table 2 illustrates the mean and standard deviation of all components of QWL, job performance and job burnout in staff of healthcare centers and health homes.

**Table 2:** Mean and standard deviation of QWL, job performance, job burnout and their aspects

Variable	Mean ±SD	Range of score
<b>Quality of work life:</b>	76.91±13.25	32-160
-Adequate and fair compensation	10±2.80	5-25
-Safe and healthy working conditions	7.61±2.10	3-15
-Opportunity for continued growth and security	7.50±2.41	3-15
-Organizational legality	14±4.92	6-30
-Social relevance of work life	8±2.51	3-15
-Work and the total life span	11.12±3.15	5-25
-Social integration in the work organization	8.70±2.31	4-20
-Developing human capabilities	9.71±2.82	3-15
<b>Job burnout:</b>	45.95±17.77	0-132
-Emotional Exhaustion	21.23±11.93	0-54
-Depersonalization	4.64±4.22	0-30
-Personal Accomplishment	30.17±8.26	0-48
<b>Job performance:</b>	52.51±9	16-80
-Ability	10.90±2.31	3-15
-Clarity	7.82±1.32	2-10
-Help	5.91±2	2-10
-Incentive	8.92±2.41	3-15
-Evaluation	5.62±2	2-10
-Validity	6.62±1.93	2-10
-Environment	6.82±1.91	2-10

The Pearson correlation coefficient showed that quality of work life had a significant negative correlation with job burnout (p-value = 0.001) but a significant positive correlation with job performance (p-value = 0.001). Moreover, there was a significant negative association between job burnout and job performance (p-value = 0/01). All components of

quality of work life, with the exception of the overall work environment, had a significant effect on job performance (p-value≤0.05). Similarly, job burnout was significantly influenced by all components of quality of work life, except for social integration (p-value≤0.05) (table 3).

**Table 3:** Association between aspects of quality of work life with job performance and job burnout

Dimensions of quality of work life	Job performance	Job burnout
	r	r
Adequate and fair compensation	0.397**	-0.281**
Safe and healthy working environment	0.336**	-0.184*
Growth and security	0.479**	-0.205*
Organizational legality	0.675**	-0.282**
Social relevance of work life	0.533**	-0.192*
Work and the total life span	-0.087	0.233*
Social integration in the work organization	0.561**	-0.085
Developing human capabilities	0.537**	-0.224*
Quality of work life	0.642**	-0.291**
Job burnout	-0.242**	-

Spearman correlation efficiencies level of significant: p≤0.05    p<0.001\*\*    p<0.050\*

The Pearson correlation coefficient showed that quality of work life had a significant effect on all components of job performance except the work

environment. In addition, quality of work life was significantly correlated with emotional exhaustion (p-value≤0.05) (Table 4).

**Table 4:** Association of quality of work life with aspects of job performance and job burnout

Job performance:	Quality of work life
	-Ability
-Clarity	0.307**
-Help	0.423**
-Incentive	0.651**
-Evaluation	0.538**
-Validity	0.571**
-Environment	0.506**
<b>Job burnout:</b>	-0.070
-Emotional Exhaustion	-0.291**
-Depersonalization	-0.329**
-Personal Accomplishment	-0.069
	-0.136*

Spearman correlation coefficients level of significant: p≤0.05    p<0.001\*\*    p<0.050\*



The one-way analysis of variance (ANOVA) showed that job performance and quality of work life were correlated with educational level (p-value <0.05). An independent t-test revealed a significant association

between job performance and gender (p-value = 0.04). Table 5 shows the association between quality of work life, job performance, and job burnout with demographic and contextual variables.

**Table 5:** Association between quality of work life, job performance, and job burnout with demographic and contextual variables

Variables	Job performance	Quality of work life	Job burnout	Type of test
Age groups	0.70	0.11	0.21	ANOVA
Sex	0.04 *	0.31	0.355	T-TEST
Married status	0.90	0.66	0.29	T-TEST
Type of employment	0.91	0.3	0.71	ANOVA
Education	0.004*	0.003 *	0.92	ANOVA
Years of work	0.31	0.36	0.31	ANOVA

\* P ≤0.05

### Discussion

The results of this study showed that the quality of work life is inversely related to job burnout, while it has a direct significant correlation with job performance. Therefore, improving the quality of work life would lead to a reduction in job burnout and an increase in job performance. Furthermore, job burnout had a significant negative effect on job performance. Research has shown that employees usually experience high levels of job burnout (25). Acar and Erkan, reported a negative significant association between quality of work life and burnout syndrome (26). In a study by Zhang et al. the association between quality of work life and job burnout with job stress were significant (27). It seems that, in order to prevent job stress and job burnout, it is necessary to promote quality of work life.

In Farsi et al.'s study, quality of work life was significantly correlated with the two components of emotional exhaustion and personal accomplishment. However, in the present study, only emotional exhaustion correlated significantly with quality of work life (28). In a study carried out by Ashrafi et al. on nursing, it was revealed that quality of work life has a significant negative association with job burnout, which is consistent with results of the current study (29). Moreover, Karim's findings on prison staff indicated that there was a significant association between job burnout and quality of work life (30). Therefore, it can be said that it is feasible to reduce job burnout among the staff of all occupations through the enhancement of quality of work life. In this study, the components of constitutionalism in the work organization and adequate and fair compensation had a significant negative association with job burnout. On the other hand, Barret and Yates argue that low payment and salary is one of the causes of burnout (31). In addition, Aziznejad and Hosseini referred to low

salaries and payment as the main cause of job burnout (32).

There is a strong significant correlation between quality of work life and job performance, which is an indicative of the fact that an increase in quality of work life leads to an increase in employees' job performance. The improvement of quality of work life is essential for the promotion of the organization's performance in such a way that the relation between some dimensions of quality of work life with organizational performance has been proven in the studies conducted by Aketch, et al, (33), Rai et al. (34). The results of the current study is in agreement with those of the study undertaken by Yazdani and Ghasemi on employees of Shiraz Petrochemical Company, where it was shown that quality of work life has a significant association with job performance (35). In addition, the findings of this study regarding the association between quality of work life and job performance is consistent with those of the study carried out by Shahbazi et al., (36). In this study, the components of social integration and cohesiveness, opportunity for continued growth and security, constitutionalism in the work organization, and social relevance of work life were found to have a significant association with staffs' performance, which is in line with the findings of Abasalt's study. Thus, one of the most important steps in improving employees' performance is to increase the quality of their work life. Indeed, a work environment is of high quality if individuals are considered as the main and core members of the organization and if the workplace enjoys indicators such as in-service training, employee participation in decision-making, job security, and fair pay (37). In this study, job burnout was revealed to have a significant negative association with job performance; on the other hand, research findings have shown that job burnout reduces work capacity (38). In this regard, Gandi et al. also argue that job burnout affects job performance (39). Another

confirming the association between job burnout and job performance is Hosseini et al.'s study, which was conducted on auditors wherein it was revealed that there is a significant negative association between job burnout and job performance (40).

The promotion of quality of work life is essential in improving organizational performance (33) and individuals' job performance, and quality of work life can be improved through an autonomous work redesign, job security, opportunities for growth, administrative and organizational justice, job enrichment and job redesign, suggestions system, employee participation, and flexibility in work schedules (41).

The quality of work life is a comprehensive and inclusive plan that enhances employees' satisfaction, promotes their learning in the environment, and helps them with tasks pertaining to management, change, and transformation. Employees' dissatisfaction with quality of work life is detrimental to all employees, but it is relatively difficult to determine exactly what indicators are correlated with quality of work life (42). However, a study conducted in China shows that all occupational features, including autonomy, support, and feeling of worthiness should be taken into consideration by organizations so that employees will be motivated and get enabled to achieve the goals of the organization (43).

Both job burnout and job performance may also be affected by other factors such as stress and organizational factors, in addition to quality of work life. Therefore, it is suggested that other factors should be considered in this respect for future studies.

Regarding the limitations, it is worth mentioning that, since this research was a cross-sectional study, it only addressed the relationships among factors, not the cause and consequences. Another limitation was related to the fear of disclosing information which, in some cases, could have led the participants to give unreal responses, but the attempts were made to tackle this issue by making the subjects aware of the confidentiality of the research project and the security of the data.

## Conclusion

Quality of work life is significantly correlated with job burnout and job performance. Consequently, it should be noted that each organization needs to have employees who are physically and mentally healthy in order to achieve its goals because occupational burnout significantly affects job performance. Thus, it is possible to reduce job burnout and improve job performance through promoting quality of work life, improvement of salary

payment, observance of rules and fairness in dealing with all staff, the provision of a healthy physical and mental environment, promoting employees' job status, encouraging employees to continue education, and job-time adjustment.

## Acknowledgement

We extend our gratitude to all the colleagues at the Vice Chancellor of Research Affairs, the hospitals, and health centers for assisting us in this research project.

**Conflict of interest:** None declared.

## References

1. Farsi Z, Nayeri ND, Sajadi A. General health status and burnout of the hematopoietic stem cell transplantation nurses in Tehran. *International journal of community based nursing and midwifery*. 2013;1(1):52-61.
2. Suner-Soler R, Grau-Martin A, Font-Mayolas S, Gras M, Bertran C, Sullman M. Burnout and quality of life among Spanish healthcare personnel. *Journal of psychiatric and mental health nursing*. 2013;20(4):305-13.
3. Hashemi Dehaghi Z, Sheikhtaheri A. Quality of work life and job satisfaction of nursing managers. *Iran J Public Health* 2014; 43(4):537-8.
4. González-Baltazar R, Hidalgo-Santacruz G, León-Cortés SG, Contreras-Estrada MI, Aldrete-Rodríguez MG, Hidalgo-González BJ, et al. Quality of Work Life and Mental Health in Primary Care Physicians. *Procedia Manuf* 2015; 3:4935-40.
5. Argentero P, Miglioretti M, Angilletta C. Quality of work life in a cohort of Italian health workers. *G Ital Med Lav Ergon* 2007; 29(1 Suppl A):A50-4.
6. Ngambi HC. Can job-sharing improve quality of work life in South Africa? *Southern African Business Review* 2000; 4(1):1-14.
7. Sirgy MJ, Efraty D, Siegel P, Lee DJ. A New Measure of Quality of Work Life (QWL) Based on Need Satisfaction and Spillover Theories. *Soc Indic Res* 2001; 55(3):241-302.
8. Hood JN, Smith HL. Quality of work life in home care. The contribution of leaders' personal concern for staff. *J Nurs Adm* 1994; 24(1):40-7.
9. Farsi Z, Rajaei N, Habibi H. The relationship between burnout and quality of working life in nurses of AJA hospitals in Tehran. *Journal of Military Caring Sciences* 2015; 1(2):63-72
10. Meyer RM, Li A, Klaristenfeld J, Gold JI. Pediatric novice nurses: examining compassion fatigue as a mediator between stress exposure and compassion satisfaction, burnout, and job satisfaction. *J Pediatr Nurs* 2015; 30(1):174-83.
11. McCue JD. The effects of stress on physicians and their medical practice. *N Engl J Med* 1982; 306(8):458-63.

12. West CP, Huschka MM, Novotny PJ, Sloan JA, Kolars JC, Habermann TM, et al. Association of perceived medical errors with resident distress and empathy: a prospective longitudinal study. *JAMA* 2006; 296(9):1071-8.
13. Ahola K, Hakanen J, Perhoniemi R, Mutanen P. Relationship between burnout and depressive symptoms: A study using the person-centred approach. *Burn Res* 2014; 1(1):29-37.
14. Dashti S, Faradmal J, Soheili Zad M, Shahrabadi R, Salehiniya H. Survey of factors associated with burnout among health care staffs in Hamadan County in year 2012. *Pajouhan Scientific Journal* 2014;13(1):1-8.
15. Abdul Ghani NM, Muhamad Yunus NSN, Bahry NS. Leader's Personality Traits and Employees Job Performance in Public Sector, Putrajaya. *Procedia Economics and Finance* 2016; 37:46-51.
16. Afzali A, Motahari AA, Hatami-Shirkouhi L. Investigating the influence of perceived organizational support, psychological empowerment and organizational learning on job performance: an empirical investigation. *Tehnički vjesnik* 2014; 21(3):623-9.
17. Bakker AB, Demerouti E. Towards a model of work engagement. *Career Development International* 2008; 13(3):209-23.
18. Swansburg RC, Swansburg RJ. Introduction to Management and Leadership for Nurse Managers. 3rd ed. Burlington, Massachusetts, United States: Jones & Bartlett Learning; 2002.
19. Taris TW. Is there a relationship between burnout and objective performance? A critical review of 16 studies. *Work Stress* 2006; 20(4):316-34.
20. Zarei E, Ahmadi F, Danshkohan A, Ramezankhani A. The correlation between organizational commitment and the quality of working life among staff of Sarpolzahab health network. *Journal of Health Promotion Management* 2016; 5(2):61-9.
21. Ghaleei A, Mohajeran B, Taajobi M, Imani B. Relationship between quality of work life and occupational stress in staff of Bu-ali Sina university of Hamadan, 2013. *Pajouhan Scientific Journal* 2015; 13(4):60-6.
22. Circenis K, Millere I. Compassion Fatigue, Burnout and Contributory Factors among Nurses in Latvia. *Procedia Soc Behav Sci* 2011; 30:2042-6.
23. Ziaei M, Yarmohammadi H, Karamimatin B, Yarmohammadi S, Nazari Z, Gharagozlou F. Prevalence and risk factors of occupational burnout among nurses of a hospital in Kermanshah in 2013. *Iranian Journal of Ergonomics* 2014; 2(2):67-74.
24. Ardestani SS, Momeni M, Marjani AB. Investigating of Factors Affecting on Employees' Performance (Case study: National Bank of western branches of Tehran). Paper presented at: The International Conference on Managing Challenges and Solutions ; 2013 Dec 26; Shiraz, Iran.
25. Grunfeld E, Whelan TJ, Zitzelsberger L, Willan AR, Montesanto B, Evans WK. Cancer care workers in Ontario: prevalence of burnout, job stress and job satisfaction. *CMAJ* 2000; 163(2):166-9.
26. Acar A, Erkan M. The Effects of Quality of Work Life on Burnout Syndrome: A Study on Hospitality Industry. *Journal of Tourismology* 2018; 4(1):35-53.
27. Zhang Y, Liu XI, Wei TD, Lan YJ. [Relationship of job stress with job burnout and quality of work life in workers for offshore oil platforms]. *Zhonghua Lao Dong Wei Sheng Zhi Ye Bing Za Zhi* 2017 ; 35(3):198-202.
28. Farsi Z, Rajaei N, Habibi H. The relationship between burnout and quality of working life in nurses of AJA hospitals in Tehran. *Journal of Military Caring Sciences* 2015; 1(2):63-72.
29. Ashrafi Z, Ebrahimi H, Khosravi A, Navidian A, Ghajar A. The Relationship Between Quality of Work Life and Burnout: A Linear Regression Structural-Equation Modeling. *Health Scope* 2018;7(1):e68266.
30. Karimi H. Investigating the relationship between job burnout and quality of working life of prison staff in Fars province. Paper presented at: The 2th National Conference on Modern Management Science; 2013 Sep 5; Gorgan, Golestan, Iran.
31. Barrett L, Yates P. Oncology/haematology nurses: a study of job satisfaction, burnout, and intention to leave the specialty. *Aust Health Rev* 2002; 25(3):109-21.
32. Aziz Nejad P, Hosseini SJ. Occupational burnout and its causes among practicing nurses in hospitals affiliated to Babol University of Medical Sciences, 2004. *Journal of Babol University of Medical Sciences* 2006; 8(2):63-9.
33. Aketch JR, Odera O, Chepkuto P, Okaka O. Effects of Quality of Work Life on Job Performance: Theoretical Perspectives and Literature Review. *Current Research Journal of Social Sciences* 2012; 4(5):383-8.
34. Rai R, Tripathi Sh. A Study on QWL and its effects on Job Performance. *Journal of Management Scieces and Technology* 2015; 2(2):33-42.
35. Yazdani A, Yazdani A, Ghasemi F, Ghalenoei M. The relationship between quality of work life and job performance of employees Shiraz petrochemical operations. Paper presented at: The 1st National Conference on Education and Psychology; 2014 Dec 14; Marvdasht, Fars, Iran.
36. Shahbazi B, Shokrzadeh S, Bejani H, Malekinia E, Ghoroneh D. A survey of relationship between the quality of work life and performance of Department Chairpersons of Esfahan University and Esfahan Medical Science University. *Procedia Soc Behav Sci* 2011; 30:1555-60.
37. Esmaeeli Lahmali A. A Study of Relationship between Quality of Work Life (QWL) and

- Performance of the Staff in Mazandaran Provin Tax Affairs General Directoratece. *Journal of Tax Research* 2013; 21(19):171-96.
38. Honkonen T, Ahola K, Pertovaara M, Isometsä E, Kalimo R, Nykyri E, et al. The association between burnout and physical illness in the general population--results from the Finnish Health 2000 Study. *J Psychosom Res* 2006; 61(1):59-66.
39. Gandi JC, Wai PS, Karick H, Dagona ZK. The role of stress and level of burnout in job performance among nurses. *Ment Health Fam Med* 2011; 8(3):181-94.
40. Marvian Hosseini Z, Lariye Dashte Bayaz M. Investigation the role of occupational burnout on the relationship between stress and job performance of auditors. *Quarterley Journal of Health Accounting* 2015; 4(1):57-80.
41. Srivastava S, Kanpur R. A Study on Quality of Work Life: Key Elements & It's Implications. *IOSR Journal of Business and Management* 2014; 16(3):54-9.
42. Nasl Saraji G, Dargahi H. Study of Quality of Work Life (QWL). *Iranian Journal of Public Health* 2006; 35(4):8-14.
43. Chan KW, Wyatt TA. Quality of Work Life: A Study of Employees in Shanghai, China. *Asia Pacific Business Review* 2007; 13(4):501-17.