



TRNC

CYPRUS INTERNATIONAL UNIVERSITY

SCHOOL OF HEALTH SCIENCES

NURSING DEPARTMENT

**BURNOUT AMONG FINAL YEAR NURSING STUDENTS AND IT
CONTRIBUTING FACTORS**

**A Project submitted in partial fulfillment of
The requirements for the Bachelor of Science in Nursing**

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DECLARATION

I, Aji Fatou Njie, hereby declare that this project entitled "Burnout Among Final-Year Nursing Students and Its Contributing Factors" is my own original work and has not been submitted in any other form to any institution for any award. All sources used have been duly acknowledged.

DEDICATION

I dedicate this project to the Almighty Allah for His unwavering love, protection, and provision throughout my studies. To my mentors, for their guidance and insights; to my family, for their sacrifices and encouragement; and to my friends and colleagues, for their motivation and inspiration.

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ABSTRACT

Burnout is a prevalent issue among nursing students, particularly those in their final year, due to intense academic and clinical demands. This descriptive cross-sectional study examined the prevalence and contributing factors of burnout among 48 final-year nursing students at Cyprus International University. Data were collected using a structured questionnaire incorporating the Perceived Stress Scale (PSS) and burnout-related items. Descriptive statistics (frequencies, percentages) summarized the data. Findings revealed an 89.6% prevalence of burnout, with academic pressure (64.6%) and clinical workload (39.6%) as principal contributors. Common symptoms included sleep disturbances (62.5%), fatigue (58.3%), and anxiety (54.2%). Nearly half (45.8%) reported negative impacts on academic performance, and 37.5% experienced reduced confidence in their nursing career. Coping strategies centered on self-care activities (66.7%) and peer support (33.3%), while only 18.8% sought professional counseling. A majority (70.8%) felt institutional support was insufficient. The study underscores the urgent need for curriculum adjustments, resilience training, and enhanced support services to safeguard student well-being and prepare resilient future nurses.

Keywords: Burnout, Nursing students, Academic stress, Clinical workload, Coping strategies, Cyprus

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LIST OF ACRONYMS/ABBREVIATIONS

CIU – Cyprus International University
MBI – Maslach Burnout Inventory
PSS – Perceived Stress Scale
JD-R – Job Demands-Resources Model
COR – Conservation of Resources Theory

CHAPTER ONE: INTRODUCTION

1.1 Background of the Study

Burnout is defined as a multidimensional syndrome characterized by emotional exhaustion, depersonalization, and reduced personal accomplishment (Maslach & Jackson, 1981; Leiter & Maslach, 2016). Originally described in human service professions, burnout also affects students, particularly those in demanding programs such as nursing. Final-year nursing students must balance advanced theoretical coursework, intensive clinical rotations, and preparation for licensure and employment, placing them at high risk of burnout before entering practice.

Recent meta-analyses report that nearly 46% of nursing students globally experience burnout, with rates up to 62% in some cohorts (Arian et al., 2023; Prakash et al., 2023). Burnout leads to fatigue, anxiety, and cynicism, negatively impacting academic performance and mental health, and can carry over into professional practice, compromising care quality and contributing to early career attrition (Arian et al., 2023; Rudman & Gustavsson, 2012).

At Cyprus International University's School of Health Sciences, informal feedback indicates many final-year nursing students face significant stress and burnout. However, systematic data quantifying prevalence, causes, and outcomes were lacking prior to this study. Understanding burnout in this local context is essential to design effective interventions and support mechanisms.

1.2 Problem Statement

The intense demands of final-year nursing education—rigorous academics and extensive clinical placements—often culminate in burnout among students. Yet, the extent and drivers of this burnout at CIU remain undocumented. Without empirical evidence, the Nursing Department cannot tailor support or curriculum adjustments to mitigate burnout. As a result, students risk diminished academic performance, mental health challenges, and waning interest in nursing careers, which may affect graduate readiness and patient care quality.

1.3 Research Objectives

1. To determine the prevalence of burnout among final-year nursing students at CIU.
2. To identify contributing factors (academic, clinical, personal, institutional) to burnout.
3. To assess the impacts of burnout on academic performance and career outlook.
4. To explore coping strategies used by students and evaluate perceived institutional support.

1.4 Significance of the Study

This study fills an information gap at CIU by providing data on burnout prevalence, causes, and consequences among final-year nursing students. Findings will guide curriculum planners, faculty, and administrators in implementing targeted interventions—such as workload adjustments, resilience training, and enhanced counseling—to promote student well-being, academic success, and a robust future nursing workforce.

1.5 Limitations of the Study

- Single-site scope: Conducted only at CIU, limiting generalizability.
- Cross-sectional design: Captures burnout at one time point without causal inference.
- Self-report instrument: May introduce response bias.
- Non-standardized burnout inventory: The questionnaire was researcher-designed, though content-validated.

1.6 Profile of the Study Area

CIU, located in Nicosia, Northern Cyprus, hosts a diverse student body in its four-year B.Sc Nursing program. The final year integrates advanced theoretical modules and extensive clinical rotations across medical, surgical, pediatric, and maternity units. Clinical demands and academic requirements converge in Year 4, making it a critical period for stress and burnout.

1.7 Definition of Terms

- Burnout: A syndrome of chronic academic stress manifesting as exhaustion, cynicism, and

reduced efficacy (Maslach & Jackson, 1981).

- Final-Year Nursing Student: A student in the fourth (final) year of the B.Sc Nursing program at CIU.
 - Coping Strategies: Methods employed by students to manage stress (e.g., self-care, peer support, counseling).
 - Institutional Support: Resources and services (counseling, mentorship, curriculum flexibility) provided by the university to assist students.
-

CHAPTER TWO: LITERATURE REVIEW

2.1 Theoretical Framework

Maslach Burnout Theory: Defines burnout's three dimensions—emotional exhaustion, depersonalization, reduced personal accomplishment—measured by the MBI (Maslach & Jackson, 1981).

Job Demands-Resources Model (JD-R): Posits that burnout arises when academic/clinical demands exceed available resources (social support, time, coping skills) (Demerouti et al., 2001).

Conservation of Resources (COR) Theory: Explains burnout through loss of resources (time, energy) without adequate replenishment, leading to exhaustion (Hobfoll, 1989).

Self-Efficacy Theory: Highlights the buffering role of confidence in one's skills against stress; higher self-efficacy reduces burnout risk (Bandura, 1977).

2.2 Review of Related Studies

Prevalence: Meta-analyses report 35–58% burnout among nursing students globally, typically higher in senior years (Arian et al., 2023; Prakash et al., 2023).

Contributing Factors: Academic workload, clinical stress, personal issues (financial, family), and lack of support are primary drivers (Hwang & Kim, 2022; Velando-Soriano et al., 2023).

Impacts: Burnout impairs concentration, academic performance, and career intentions; it also correlates with anxiety, depression, and lower graduation preparedness (Rudman & Gustavsson, 2012; Stevenson, 2022).

Coping & Interventions: Effective strategies include time management, exercise, peer support, mindfulness, and counseling. Institutional measures—resilience training, mentorship, curriculum adjustments—have demonstrated reductions in student burnout (Reeve et al., 2013; Mealer et al., 2012; Yu & Lee, 2018).

CHAPTER THREE: METHODOLOGY

3.1 Study Design

A descriptive cross-sectional survey captured burnout prevalence, causes, and effects among final-year nursing students.

3.2 Study Population

All final-year (Year 4) B.Sc Nursing students at CIU during the 2024–2025 academic year ($N \approx 50$).

3.3 Sample Size

A census approach yielded 48 valid respondents (96% response rate), meeting the required sample size for descriptive precision.

Yamane's formula for a finite population,

$$n = N / (1 + N \cdot e^2)$$

where N is population size (50) and e is the margin of error (0.05), we get:

$$n = 50 / (1 + 50 \cdot 0.05^2)$$

$$= 50 / (1 + 50 \cdot 0.0025)$$

$$= 50 / 1.125$$

$$\approx 44.44$$

3.4 Sampling Technique

Census sampling: all final-year students invited; 48 participated.

3.5 Data Collection Instrument

A structured questionnaire comprised:

- Demographics (age range, gender, employment status)
- Burnout experience (Yes/No) and year(s) of occurrence

- Severity rating (Mild/Moderate/Severe)
- Contributing factors (academic pressure, clinical workload, personal issues, lack of support, other)
- Physical symptoms (fatigue, sleep disturbance, headache, other)
- Emotional symptoms (anxiety, depression, irritability, emotional numbness, other)
- Impacts on academic performance and patient care
- Coping strategies (self-care, peer support, counseling, other)
- Perceived institutional support (Yes/No/Partially)

3.6 Data Collection Procedure

The questionnaire was administered online in April 2025 via Google Forms. Informed consent was obtained electronically. Two reminders were sent to maximize participation. Data were downloaded for analysis.

3.7 Ethical Issues

- Informed Consent: Participation was voluntary, with consent obtained prior to the survey.
- Anonymity & Confidentiality: No personal identifiers collected; data stored securely.
- Non-maleficence: Questions were reviewed to avoid undue distress; counseling contacts provided.
- Ethical Approval: Obtained from CIU School of Health Sciences Research Ethics Committee.

CHAPTER FOUR: FINDINGS OF THE STUDY

4.0 Demographic Characteristics (N=48)

Table 1: Demographic Profile of Participants

Demographic Category	n	%
Age	Under 20	5 10.4
	20–24	24 50.0
	25–29	16 33.3

	30+	3 6.3
Gender	Female	32 66.7
	Male	16 33.3
Employment	Not working	32 66.7
	Part-time	9 18.8
	Full-time	7 14.6

4.1 Prevalence and Severity of Burnout

- Prevalence: 43/48 (89.6%) reported experiencing burnout.
- Year of Occurrence: First year (18.6%), Second (27.9%), Third (34.9%), Final (69.8%).
- Severity: Mild (26%), Moderate (74%), Severe (12%) among those with burnout.

4.2 Contributing Factors

Figure 1: Primary Causes of Burnout

- Academic pressure: 64.6%
- Clinical workload: 39.6%
- Personal issues: 37.5%
- Lack of support: 14.6%
- Other: 18.8%

4.3 Symptoms and Impacts

Physical: Sleep disturbances (62.5%), Fatigue (58.3%), Headaches (50%), Other (12.5%).

Emotional: Anxiety (54.2%), Depression (37.5%), Emotional numbness (35.4%), Irritability (27.1%), Other (18.8%).

Academic Impact: Negative (45.8%), No impact (29.2%), Positive (25.0%).

Career Interest: Decreased (37.5%), No change (52.1%), Increased (10.4%).

4.4 Coping Strategies and Institutional Support

Figure 2: Coping Strategies

- Self-care (time management/exercise): 66.7%
- Peer support: 33.3%
- Professional counseling: 18.8%
- Other: 10.4%

Institutional Support: No (70.8%), Partially (14.6%), Yes (14.6%)

CHAPTER FIVE: DISCUSSION, CONCLUSIONS & RECOMMENDATIONS

5.0 Discussion

The 89.6% burnout prevalence exceeds global averages (35–58%), indicating particularly high stress at CIU. Academic and clinical demands were the leading contributors, confirming literature that senior nursing cohorts experience peak burnout (Arian et al., 2023; Hwang & Kim, 2022). Physical and mental health effects (sleep disturbance, anxiety, depression) mirror established symptom profiles (Maslach & Jackson, 1981). Nearly half of students reported negative academic impacts, aligning with studies linking burnout to poorer academic outcomes (Rudman & Gustavsson, 2012).

Burnout's influence on career confidence (37.5% decreased interest) poses risks for early career attrition, echoing concerns about workforce shortages (Stevenson, 2022). Yet, 44% reported enhanced resilience post-burnout, suggesting potential for post-adversity growth if supported properly.

Coping strategies favored self-care and peer support, with low utilization of counseling—highlighting underused institutional resources. The perception that support was insufficient (70.8% dissatisfied) underscores urgent need for expanded mental health services, flexible policies, and proactive mentorship.

5.1 Summary

This study documented an exceptionally high burnout rate (~90%) among CIU final-year nursing students, driven by academic and clinical pressures, personal stressors, and limited institutional support. Burnout manifested in significant physical, emotional, academic, and professional impacts. Coping relied largely on self-initiated strategies, and students called for greater institutional interventions.

5.2 Conclusion

Burnout is endemic among final-year nursing students at CIU, with far-reaching implications for student well-being, academic success, and future nursing practice. Addressing burnout through structural curriculum changes, resilience training, and robust support services is essential to cultivate a healthy and competent nursing workforce.

5.3 Recommendations

For Faculty & Department:

1. Redistribute workload and integrate wellness breaks into the curriculum.
2. Offer mandatory stress-management and resilience workshops each semester.
3. Assign faculty mentors for regular check-ins on student well-being.
4. Implement flexible deadline policies for students in acute distress.

For University Administration:

5. Expand dedicated counseling services within the Nursing Department.
6. Create peer-support networks and formalize peer mentoring programs.
7. Provide scholarships or financial aid to alleviate economic stress.
8. Offer on-site wellness activities (yoga, mindfulness sessions, relaxation rooms).

For Students:

9. Engage proactively in time management and self-care routines.
10. Seek professional help early when stress is unmanageable.
11. Form or join student wellness committees to advocate for peer needs.

5.4 Application to Nursing Practice

Integrating burnout prevention into clinical orientation and residency programs can foster resilient new nurses, improve patient care quality, and reduce early career turnover. Healthcare institutions should model academic interventions by providing ongoing support, monitoring nurse well-being, and implementing staff wellness initiatives to break the cycle of burnout from school into practice.

REFERENCES

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APPENDICES

Appendix A: Burnout Prevalence Calculation Formula

Burnout Prevalence (%) = (Number experiencing burnout / Total respondents) \times 100 = (43 / 48) \times 100 \approx 89.6%.

Appendix B: Questionnaire Instrument

(Full survey instrument with 21 items on demographics, burnout experience, causes, symptoms, impacts, coping, and institutional support.)