

Study on Burnout Syndrome within the Portuguese Firefighters Population

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ABSTRACT

The purpose of this study is to contribute to a better knowledge of the Burnout Syndrome within the Portuguese firefighter population. It will also refer to the relation between Burnout and work satisfaction. Despite the overall intention of the work is to study the entire Portuguese firefighter population, in this stage, only a sample of 39 elements from the operational corps within Alcabideche Firefighter Volunteers was studied.

The investigation follows the model of analytical epidemiological studies used to exam associations formed by hypothesis of casual relation. The main intention is to identify, or measure de risk factors and its effects on the health of the operational firefighter referred. It was used a cross-sectional analytic study, as it analyses, on a particular moment one specific population, trying to establish correlations and interferences between selected variables chosen regarding its importance on the firefighters health. It was used a specific questionnaire adapted from the MBI method.

The analyses results appointed for no significant statistic correlation between Gender, Age, and Working hours and the three dimensions of Burnout: exhaustion, cynicism and professional efficiency. This may be explained by the possible existence of protection factors: social support, proper working conditions and good relationships among colleges.

Keywords: Burnout; Portuguese Firefighter, Maslach, MBI

INTRODUCTION

During the socialization process, the human being gets prepared for the future, creating expectations, learning experiences, motivations and ambitions over what he would like to become one day, as a professional. However, often, when confronted with reality when exercising his professional activity, not always what he has envisioned comes true.

We verify that different professionals often show aggressive and distant attitudes, in a professional activity where the quality of the relationships is a critical factor. From readings in studies over this subject, we verified that, when approached, their tales demonstrate suffering, disillusion, revolt and anger. Their ideals, as professionals, fade away, conditioning the quality of service.

In any profession, stress may have positive aspects which challenge and allow for a personal and professional evolution, and negative aspects, which pose obstacles and overtime deteriorate a person's attitude towards work. How someone evaluates events in the work and how he deals with them has an impact in a person's physical and mental health.

There are many factors and sources of professional stress to which individuals are continually exposed. Factors related to the organization and organizational culture, aspects specific to the professional activity and factors related to personal and inter-personal aspects. When professional stress becomes chronic, it can contribute, among other situations, to the settlement and, or, development of Burnout Syndrome and depression.

The Burnout Syndrome has a negative effect over an individual's performance at work and has been related with absenteeism to the work shift, low productivity and efficiency, to the decrease of satisfaction and the decrease of work (ANGERER, 2003). However, according to Benevides-Pereira (2002a), we suppose a decrease in the quality of life of affected professionals, and, consequently, a deterioration in the quality of their services, directly affecting interpersonal relations both in the professional and personal spheres, with personal, social, organizational and work losses.

The earliest researches on Burnout Syndrome are the outcome of research on the study of emotions and the way of dealings with them, developed with professionals that, by the nature of their work, need to maintain direct contact with others (health workers, social and educational services), once there is an expression of emotional stress by those professionals.

The term Burnout, which translated means "being exhausted" (professional exhaustion), as a scientific terminology emerged in the early seventies, with Freudenberger (1974), who applied the concept to refer to the physical and mental state of young volunteers working in their "Free Clinic" in New York. These youngsters struggled in his duties, sacrificing their own health to achieve higher ideals without receiving any reward for effort expended. Just checked out that after one to three years in mission performance, they presented irritation manners, exhaustion, cynicism attitudes regarding the patients and tend to avoid them.

Freudenberger describes burnout as "a state of fatigue or frustration emerged by devotion to a cause, a way of life or a relationship that failed with regard to the expected reward" (Freudenberger, 1974 p.162). Reason why it was "baptized" for "Syndrome". Subsequently, Freudenberg complemented his studies in 1975 and 1977, including in its definition behaviors of depression, irritability, boredom, overwork, rigidity and inflexibility (Perlman & Hartman, 1982).

From their observations, Freudenberger describes a profile of individuals at risk of developing burnout syndrome and is characterized by idealistic, naive and optimistic thoughts. It also states that these individuals indulge too much work to get a good opinion of themselves, and to promote the common good, however, despite the effort and commitment, professionals fail to make a difference in the lives of the beneficiaries. The meaning of personal existence is exposed to labor under which generates excessive complicity with work and usually ends in abandonment (Mingote, 1998).

Subsequently Freudenberger, Maslach in 1976 investigates the emotional workload of nurses, doctors, social workers, lawyers, and notes that the term burnout (be consumed, burned at work) was generally used to express a gradual emotional exhaustion, cynicism and a lack of commitment experienced due to high work requests.

According to Maslach and Shaufeli (1993, P.02) "burnout first emerged as a social problem and not as an academic construct," so that the discovery and definition of burnout not derived from a previous theory, but developed with based on several years of exploratory research "(Maslach, 1993, p.21).

Initially, Maslach works with individual cases through interviews and identifies a large number of professionals exhausted physically and emotionally, with loathing and contempt for the people who lent their services (patients, clients, etc. .) and living a sense of failure professional who made them question their competence (Maslach, 1993). At a later stage, he began to make observations with professional groups through questionnaires, and observed a correlation between the variables of burnout with certain work-related stressors: high number of clients / patients (overload), prevalence of negative assessments of patients / clients in relation to work of professional and also the scarcity of resources for the proper performance of the tasks.

Maslach and Jackson (1981) use psychometric tests to assess the prevalence of burnout in certain professional categories, which allows you to confirm the existence of the scale of loss of personal achievement as essential to the construction of this problem work-related testing along with exhaustion and attitudes negative (Maslach, 1993). Maslach, in convergence with the preliminary observations of Freudenberger, arrives, thus the discovery of burnout as a "psychological syndrome resulting from chronic emotional stress experienced by professionals whose job involves frequent and intense relationship with people in need of care and / or assistance."

Thus, in the '80s, Jackson and Maslach Burnout describes Burnout as a behavioral manifestation of occupational stress and define burnout as a syndrome of emotional exhaustion and cynicism, which affects professionals who spend time intensely involved with other people and whose professional interaction / customer focuses on the psychological, social or physical problems. Think of it as a three-dimensional syndrome characterized by emotional exhaustion, depersonalization (cynicism) in the treatment with patients / clients and as a third dimension to Personal Fulfillment.

The Burnout dimensions

The dimension of emotional exhaustion:

It is a dimension of greater weight in the identification of Burnout, in which the subject is found exhausted, exhausted, no energy to tackle another project, and others unable to recover from an overnight (Maslach, Shaufeli & Leiter, 2001).

In its indicators (Maslach and Jackson 1981), look to check the emotional exhaustion to work, the feeling of tiredness after a day of work and the difficulty to face a new one, the feeling of exhaustion as having to work with people daily, the feeling of working too much and on the limit of their possibilities, as well, the feeling of frustration at work. In other words, the emotional exhaustion variable is characterized by the psycho-physical experience of exhaustion and by the fact that the person has reached the end of his strengths.

The dimension of depersonalization (cynicism)

It is characterized by the fact that the subject adopt attitudes of disbelief, distance, coldness and indifference to work and to co-workers and represents the interpersonal component of burnout (Maslach, Shaufeli & Leiter, 2001).

In its indicators, Maslach & Jackson (1981) looks at whether the professional treats its customers or patients and colleagues as if they were objects, if the professional has become insensitive to the people who watch and feel guilty for having these problems and finally, if someone has become emotionally hardened due to the work performed. In other words, the dimension of depersonalization covers the relationship with others and is characterized by indifference, neglect, cynicism and disengagement with the needs and sufferings of assisted persons and their colleagues. In this sense, Burnout is not only the syndrome of the exhausted professional, but also of the indifferent and uncompromising professional, towards people with whom he works.

The extent of loss of Personal Achievement:

It is characterized by the fact that people feels inefficient, incapable and certain that their work makes no difference. Their indicators try to check whether the professional can easily understand what their patients need, if he can create a peaceful atmosphere and finds himself stimulated after work, if he deals efficiently with the problems of people assisted, and feel his positive influence the lives of others through the work he does. This third dimension concerns the area of "I" (Maslach, 1993), the trial of himself in relation to the work performed. This allows concluding that Burnout is the syndrome of the professional who lost his self-realization, uncompromising with others and emotionally exhausted (Benevides-Pereira, 2002).

This definition of the phenomenon of burnout has been confirmed by investigations that attest cohesion between the three constitutive dimensions of the syndrome and its relationship with organizational stressors. An important study in this regard is the meta- analysis of Lee and Ashfort (1996) who investigate the correlation between the three dimensions of burnout and its relationship with high job demands and low resources. The authors analyze empirical studies conducted between 1982 and 1994 that used the multidimensional definition of Maslach and Jackson (1981) about Burnout, and seek thereby to confirm the correlations between the three variables and work-related stressors.

Lee and Ashfort (1996) conclude that the set of empirical studies conducted in the period in respect of burnout, confirms the multidimensional nature of this phenomenon, noting that the dimension of emotional exhaustion appears regularly correlated with high job demands (overload , time pressure, conflicts and ambiguities of professional role) and that the dimensions of depersonalization and loss of personal achievement regularly appear correlated with low resources (low autonomy and decision-making and lack of support from colleagues and supervisors) .

Regarding the high demands, they are specified as follows:

- Increased workload, characterized by the fact that few people are doing more work;
- Time pressure, characterized by time not be sufficient to fulfill the job requirements;
- Increased complexity of tasks, characterized in that the same professional perform multiple functions simultaneously;
- Conflicting paper , characterized by the professional obligation to perform two opposing and conflicting roles (for example, a doctor who aims to provide the best care to their patients , but is bound by organizational requirements to provide a fast and precarious support) ;
- And finally, the ambiguity of roles, due to the inadequate length of the professional function, which affect the achievement of the objectives of job information.

Regarding the set of dimensions associated with few resources, are specified as follows:

- Lack of support at work by supervisors, who leave without a professional leadership that support for facing and solving problems;
- Lack of support from colleagues, characterized by loss of confidence in teamwork, building relationships of competition and isolation among professionals;
- Lack of control and autonomy over important aspects of their professional activities , which prevents professionals to address problems related to their work and thus prevents to correctly perform the tasks for which they have training and capacity;
- And finally, lack of material reward characterized by lower wages and benefits and fewer opportunities for career development.

Shaufeli and Buunk (2003), by making the state of the art on the phenomenon of burnout, they confirm the same set of organizational stressor dimensions related to the burnout triggering, with particular emphasis on overload, time pressure, conflict of roles, and lack of support. Beyond these, stands out also interpersonal dimensions (lack of support) and also related to the type of organizational performance (role conflict and lack of autonomy) that, when acting together, takes out the individual capability of performing well their job, and also, their capability of self-realization through work.

To understand the phenomenon of burnout is therefore necessary to place the individual within that set of organizational stressor dimensions and work that, in turn, show a certain logic operation and management in which the individual belongs and which becomes necessary to understand.

There is a general agreement that the burnout syndrome is a response to chronic stress at work (long-term and cumulative) , with negative consequences on individual and organizational level and has very specific peculiarities in certain areas of professional, voluntary or domestic work , when this is done directly with groups with great emotional dependence or conflicting students . These cases are further repeated, but do not exclude others because it appears that the syndrome manifests itself less in jobs of an administrative ou manual nature.

However, the controversy continues and it is possible to find other settings that complement the Maslach, for example, Burke (1987), which explains that Burnout is a process of adaptation-of works-related stress, that is characterized by professional disorientation, wear, feelings of guilt for lack of professional success, coldness or emotional withdrawal and isolation.

Farber (2000) describes it as a reflection of most current work environments and that labor competence requires increasing production and better results with less time possible and with the least possible resources. From this fact, this author points out four important variables to explain the emergence and development of Burnout:

- Pressure to meet the requests of others;

- Intense competition;
- Desire for more money;
- Feeling of not being rewarded by something that you deserve.

In the tendency to apply the Burnout only professionals who provide assistance to others, Maslach and Schaufeli (1993) invented an application of the concept, accepting various settings, due to some similar characteristics, which are:

- Prevails the mental or behavioral symptoms over the physical ones, and among dysfunctional symptoms, we underline the mental or emotional stress, fatigue and depression, being the main one the emotional stress;
- The symptoms manifest themselves in people who did not have any previous psychopathology;
- The syndrome is classified as a clinical syndrome labor;
- Is triggered by an inadequate adaptation to the work that culminates with the decrease in labor performance and a sense of low self-esteem.

On the other hand, other authors apply the syndrome not to healthcare professionals, highlighting the known works of Pines and Aronson (1988) which believe the symptoms of burnout can also be seen in people who do not work in the social care sector. The syndrome manifests itself also as a state of emotional, mental and physical exhaustion that includes feelings of helplessness and worthlessness, feelings of imprisonment, lack of enthusiasm and self-esteem. This state could be caused by a long time exposure to situations that are emotionally demanding.

In this context, Pines and Aronson have developed a range of one-dimensional character, distinguishing three aspects: exhaustion, demoralization and loss of motivation. Similarly, Shirom (1989), through a review of several studies, concluded that the content of the Burnout syndrome is related to a loss of energy sources of the subject and defined it as "a combination of physical fatigue , tiredness emotional and cognitive fatigue".

There are other factors to add, like the cultural, occupational, educational, and individual personality (De Las Cueva, 1996). More recently, Hombrados (1997) proposes a definition of behavior based on coexistence of a set of motor, cognitive, verbal and physiological responses facing a work situation with high demands and prolonged in time. The repercussions of this coexistence on worker health and worker's duties, presume a development of burnout syndrome. However, the author consider as fundamental elements the following: " the emotional and cognitive changes , negative changes in professional organization and a situation of social or professional pressure that appears on an ongoing basis ."

In summary, currently the Burnout Syndrome is applied to several groups of professionals, ranging from directors to housewives, from social workers to volunteer within the tertiary sector organizations. However, it is unanimous that the syndrome is a result of a process in which the worker finds himself exposed to a situation of chronic occupational stress and coping strategies are not effective. It's the same as saying that, at the individual level , the workers in their effort to adapt and respond effectively to requests and work pressures, can reach strive excess and in a prolonged way in time, which gives them that feeling they describe as " I'm burnt " . However, in the workplace in which most of the cases are studied, every day more due to companies interest, the feeling that the performance is low and the organization fails, lead to the deterioration of service quality, absenteeism, high number of work-rotation, and even, the abandonment of the job. (Martínez Pérez , 2010)

The definitions of Cherniss (1980) and Etzion (1987), clearly conceive Burnout as a process. Schaufeli and Enzmann (1998), claim that:

- The Burnout is triggered by tensions resulting from the gap between the expectations, intentions, efforts, ideals of the individual and the demands of the harsh reality of everyday life;
- The stress that results from this imbalance develops gradually. It can be felt consciously by the person or just stay ignored for a long period of time;
- The way the individual faces the stress is crucial for the development of burnout.

The firefighters are a professional class constantly exposed to situations of risk and stress, and as mentioned by Vara (2007), considering the diversity of phenomena they are exposed to, they can't always gather enough resources to adapt or deal effectively with the problem. They are, also, under constant pressure to deal with time issues, of immediate problem solving, responsibility and work time overload, as well as physical, emotional and cognitive demands, which somewhat wear them out and also reduce their professional satisfaction and motivation.

The role nowadays played by the firefighters is that of a professional activity, essential to society, which presents specific characteristics. Being a relatively closed organization, with few scientific studies about the professional stress in Portugal, the firefighters possess a relevant social role in the safety of populations, because they ought to be effective, without failure, they become subject of high levels of stress.

With the present study we seek to contribute to a better understanding of the Burnout Syndrome in the activity of the Portuguese Voluntary Firefighters.

MATERIALS AND METHODS

The present investigation follows the epidemiological analytic model of study, sketched to examine associations considered by hypotheses of casual relations. It has the goal of identifying or measuring the risk factors and their effects in the health of the firefighters with operational characteristics in the Alcabideche Firefighters Corps.

Within analytical studies, it is a cross-sectional study, meaning, transversal and of prevalence, since it analyzes in a single moment a set population (operational in the Alcabideche Firefighters Corps), in which we try to establish correlations and interferences between selected variables with impact in the health of the firefighters.

The study technique used was that of the questionnaire and the instruments were given by the MBI (Maslach Burnout Inventory).

The present study focused a population of 55 operational firefighters of the Alcabideche Voluntary Firefighters, having been asked for permission from the Corps Commander. These 55 Firefighters are part of 8 teams, constituted by 6 or 7 elements who render services on the night shift on a rotating basis. Granted the permission, the shift bosses were contacted, for application of the questionnaires during eight consecutive days, to include all teams, for collection of the questionnaire answers.

The questionnaires were handed in person, inside an envelope without any subscription, so the participants would have their confidentiality ensured. Inside the envelope was attached a brief presentation of the study with its goals.

From the total of 55 elements, 39 questionnaires were collected, with only 38 being validated. The sample analyzed in the present study is comprised by firefighters with ages ranging from 16 to 57 years old, with an average of, approximately, 33 years old and a verified standard deviation of about 11 years ($M=32,89$; $DP=11,52$).

The majority of firefighters in the analyzed sample are male ($n=30$, 78,9%). Relating to civil status, the majority of the sample is constituted by single man ($n=14$, 36,8%) or married ($n=14$, 36,8%), and 20,6% are divorced or separated ($n=10$). It was also verified that the vast majority of respondent firefighters work as volunteers ($n=22$, 57,9%). About the work schedule, a superior number work in shifts ($n=20$, 52,6%) and 47,4% work a set schedule ($N=18$).

About time spent on the job, in average, firefighters work approximately 41 hours a week ($M=41,28$; $DP=9,99$), with a minimum spent time of 16 hours and a maximum of 70 hours.

RESULTS AND DISCUSSION

The analysis of the results on the several dimensions of Burnout allowed to imply that:

- On average terms mental exhaustion is slightly low ($M=18,05$; $DP=12,27$), considering a possible minimum of 0

and a maximum of 54 points. The median value obtained is $Md=18$, the most common being $Mo=12$. The minimum obtained is 0 to the maximum of 45. In terms of result distribution, these present themselves symmetrical, according to the obtained symmetry coefficient ($Sk/erro Sk=1,07$) which is in the value interval between -2 and 2. In terms of kurtosis, the distribution presents itself mesokurtic, taking into consideration the obtained kurtosis coefficient ($Ku/Err Ku=,72$) also located between -2 and 2.

- In relation to the Depersonalization dimension, the average results obtained ($M=7,40$; $DP=6,51$) point towards a low depersonalization, considering the minimum possible values of 0 to a maximum of 30 points. The median value is $Md=6,50$ the mode being $Mo=0,00$. In terms of symmetry, the distribution of results presents itself positive asymmetrical or skewed to the left, according to the obtained symmetry coefficient (2,05) superior to 2, meaning a tendency for more cases with inferior results of depersonalization in the sample. In terms of kurtosis, the distribution presents itself mesokurtic, according with the obtained kurtosis coefficient (,016)

- About personal achievement, according to the average results obtained ($M=33,77$; $DP=7,03$), we note a tendency towards a higher personal achievement, taking into consideration the minimum possible value of 0 to a maximum of 48 points. The median value is $Md=34,00$, with the mode or most frequent value being $Mo=42$. The minimum obtained is 12, the maximum being 42. The distribution presents itself negative asymmetrical or skewed to the right, according with the obtained symmetry coefficient (-2,60) inferior to -2, which is indicative of a tendency to superior values of personal achievement in the sample. In relation to Kurtosis, this presents itself as mesokurtic, according to the value of the kurtosis coefficient (1,78) framed between -2 and 2.

A more specific analysis of the results obtained, relatively to the various dimensions of Burnout according to levels (low, medium and high), allows us to find that the majority of firefighters in the sample presents low levels of emotional exhaustion ($n=20$; 52,6%), of depersonalization ($n=16$; 42,1%) and medium levels ($n=12$; 31,6%) and high ($n=17$; 44,7%) of personal achievement.

Considering the Burnout as the result of a low personal achievement and a high emotional exhaustion and depersonalization, it is expected that, considering the results obtained in any of this dimensions, the proportion of firefighters with clinically significant Burnout presents itself low. Indeed we verified that in the studied sample, operational from the Alcabideche firefighters, just two firefighters (5,3%) exhibit Burnout.

After analyzing the results relative to Burnout and respective dimensions were analyzed the differences between the two genders at the dimensions Emotional Exhaustion, Personal Achievement and Depersonalization, figuring out, by the lack of significant results in the Emotional Exhaustion ($U=106,50$; $p>=,05$), Depersonalization ($U=88,00$; $p>=,05$) and Personal Achievement ($U=120,00$; $p>=,05$) that male and female firefighters are characterized in a very similar manner at these dimensions which define Burnout.

It was also analyzed how the results vary according to the professional situation, verifying, from the results obtained with the Mann-Whitney test, that the levels of Personal Achievement ($U=158$; $p>=,05$) and Depersonalization ($U=165,00$; $p>=,05$) are not significantly different between employee and volunteer firefighters. Whereas at the Emotional Exhaustion level, the results were statistically significant ($U= 89,50$; $p<,05$) with employee firefighters having higher levels of Emotional Exhaustion compared to volunteer firefighters.

In terms of age, the absence of statistically significant correlations with the Personal Achievement ($rs=-,135$; $p>=,05$), Depersonalization ($rs=-,030$) and Emotional Exhaustion ($rs=,206$, $p>,05$) do not allow us to conclude about the influence of age in the several dimensions of Burnout.

Finally, we also sought to verify in what measure did the number of weekly hours spent by firefighters, possible fatigue factor, may be related with their levels of Personal Achievement, Depersonalization and Emotional Exhaustion. The obtained results indicate the absence of statically significant correlations in the dimensions of Personal Achievement ($rs=-,012$; $p>=,05$), Depersonalization ($rs=,266$; $p>=,05$) and Emotional Exhaustion ($rs=,207$; $p>=,05$).

In the present study, it is interesting to notice that a clear minority of firefighters presented Burnout (5.3%) (Table 1), being also low the results regarding the emotional exhaustion, depersonalization and personal accomplishment, dimensions. This turns out to be a positive and possibly significant aspect, of a good environment and working conditions, as well as a possible good ability of firefighters to adopt positive strategies in solving their problems, thereby limiting the possibility of development of stress and burnout.

Table 1 - Frequency of firefighters with Burnout

<i>Burnout</i>	N	%
<i>No</i>	36	94,7
<i>yes</i>	2	5,3
<i>Total</i>	38	100,0

It's important to refer that low frequency of Burnout has been already mentioned in previous works, mainly on the level of emotional exhaustion (Stick and Queiroz, 2009; Ferreira, 2008; Silva, Lima & Caixeta, 2011).

Furthermore, it is important to note that Burnout is negatively related to job satisfaction, in that the lower the satisfaction levels are, the higher are the burnout levels (Brewer & Clipard, 2002; Halbesleben & Bowler, 2007; Maslach, Jackson & Leiter, 1996; Razza, 1993; Stick & Queiroz, 2009). Also in the study by Baptista et al (2005) with a sample of firefighters clearly superior (n = 101) it was possible to observe high levels of job satisfaction which the authors consider associated with few signs of chronic psychological problems.

It was found that most interviewed firefighters works as a volunteer, 57.9% (n = 22), and these have lower levels of emotional exhaustion compared to remunerated firefighters. This may be due to a lower obligation and necessity of work commitment compared to remunerated firefighters.

There was no statistically significant correlation between Gender (table 2), Age and Hours of Work and the three dimensions of burnout, which may be explained by the possible existence of common protective factors, including social support, good working conditions, and good relationships with colleagues.

Table 2 - Results related to emotional exhaustion, depersonalization and personal accomplishment among male and female firefighters

Burnout	Gender										U	P
	Male (n=30)					Female (n=8)						
	N	M	Md	Dp	Mean Rank	N	M	Md	Dp	Mean Rank		
Emotional exhaustion	30	17,32	18,00	11,66	19.05	8	20,75	17,00	14,90	21.19	106.50	.629
Personal accomplishment	30	33,81	34,00	7,09	19.50	8	33,62	34,00	7,28	19.50	120.00	1.000
Depersonalization	30	7,91	7,70	6,55	20.57	8	5,50	4,50	6,41	15.50	88.00	.250

On the other hand, regarding the number of working hours, this factor is not, by itself, associated to higher exhaustion, as it can be seen that firefighters that work fewer hours, may be subjected to conditions of greater stress compared to others who work fewer hours.

CONCLUSIONS

Burnout is, as mentioned by Schaufelli and Bakker (2004), essentially explained by work demands and also by the lack of work conditions. Also, it tends to develop according to the coping strategies adopted to deal with stress situations (Cherniss, 1980).

The firefighters are a professional class constantly exposed to situations of risk and stress, and as mentioned by Vara (2007), considering the diversity of phenomena they are exposed to, they can't always gather enough resources to adapt or deal effectively with the problem. They are, also, under constant pressure to deal with time issues, of immediate problem solving, responsibility and work time overload, as well as physical, emotional and cognitive demands, which somewhat wear them out and also reduce their professional satisfaction and motivation.

It is important to note that at this stage of the research study we set out to accomplish, was only studied a small sample of the operational firefighter within the Alcabideche Firefighter Corporation which is a limiting factor of possible comparisons and correlations between groups, to the extent that, in general, smaller samples tend not to produce significant results. Therefore, we wish to continue the investigation by extending the object of our study to a more representative sample of the population of Portuguese firefighters, including a sizeable number of individuals, by group, by regions and Firefighter Corporation.

As a suggestion for future studies, we also point out the importance of analyzing, in addition to the research of the different dimensions of burnout syndrome, the risk factors and protective factors associated with the syndrome, such as job satisfaction, well-being, quality of life, optimistic disposition, social networking, among others.

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