

## Chapter 3

# ORGANIZATIONAL COMMITMENT, DEPRESSION, AND BURNOUT AMONG ONCOLOGY CLINIC PERSONNEL

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### Introduction

Hospitals are complex businesses and service providers that accommodate teams comprised of individuals from different occupational groups (Qureshi, Nazir & Ajaz, 2005; Satyashankar, Rinkoo & Somu, 2007; Akbulut & Kutlu, 2016). Healthcare personnel are continually serving patients and coping with challenges and emerging negative factors. Such difficult working conditions are exemplified in hospital oncology departments due to patient's personnel healthcare problems, the necessity to make the right decision, time pressures, and stress (Rada & Johnson-Leong, 2004; Tuncel & et al., 2014). Unhappiness, alienation from work, and similar traits are expected among those employees who are involved in the treatment cancer patients (Alacacioglu & et al., 2009). If a patient's cancer is not diagnosed at an early stage and the patient goes without treatment then death is inevitable (Tokgoz & et al., 2008). Even if a patient receives treatment, their outward appearance and psychological health can be negatively affected due to chemotherapy and radiation therapy (Pereira, Figueiredo & Fincham, 2012). This is a major source of stress and burnout for oncology department personnel.

A harmonious relationship between an employee and their organization is important for organizational commitment (Kristof, 1996). Organizational commitment can be defined as an employee adopting the interests, goals and objectives of their organization while having a continued desire to work at that organization as an integral and valued element (Meyer & Allen, 1991). Affective commitment is when an employee works for an organization at their own discretion, has an emotional connection to that organization, and identifies personally with it. Continuance commitment is an employee's decision to stay with an organization after considering the costs and advantages of their employment (Lämsä & Savolainen, 2000). Normative commitment refers to an employee's perceived need to remain with an organization (Allen & Meyer, 1993).

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that frequent staff changes should be avoided due to the negative repercussions this can have on their affective and continuance commitment levels. Night shifts should be distributed among all workers so that the responsibility of working at night is fulfilled by all. This will help to reduce insensitive behavior among workers and maintain their affective and continuance commitment. Additionally, workers' satisfaction regarding their salaries is both a motivating factor and helps to reduce burnout, according to the results of this study.

### **Limitations and Recommendations for future research**

There are some limitations to this study. The study was applied to the clinic staff who constituted the sample. The variables involved in the research can show different results with passing of time. For this reason, this study should be considered within the time frame. The researchers recommend that similar studies be carried out on hospital operating rooms and on hospital emergency departments. Because it is thought that exhaustion and depression of the hospital staff who are working there may be quite high.

### **Ethical Considerations**

Ethical issues (Including plagiarism, informed consent, misconduct, data fabrication and/or falsification, double publication and/or submission, redundancy, etc.) have been completely observed by the authors.

### **Acknowledgements and Conflict of Interest**

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