

# Effect Of Family Cohesion On Burnout Among Community Pharmacists

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**Abstract-** Burnout has become a critical concern among healthcare professionals, particularly community pharmacists who are exposed to continuous occupational stressors such as heavy workload, long working hours, administrative responsibilities, and frequent patient interactions. These stressors contribute to psychological burnout, characterized by emotional exhaustion, depersonalization, and reduced personal accomplishment. The present study aimed to examine the relationship between family cohesion and burnout among community pharmacists. A quantitative correlational research design was employed, with a sample of 150 community pharmacists selected using purposive sampling. Data were collected using the Family Adaptability and Cohesion Evaluation Scale (FACES IV) and the Maslach Burnout Inventory (MBI). Pearson's correlation were used for data analysis. The findings revealed a statistically significant negative correlation between family cohesion and burnout ( $r = -0.438, p < 0.01$ ), indicating that higher levels of family cohesion are associated with lower levels of burnout. The study highlights the importance of family support as a protective factor in reducing occupational stress and promoting psychological well-being among pharmacists. These findings suggest the need for holistic interventions that incorporate both workplace and family-based support systems.

**Keywords:** Burnout, Community Pharmacists, Family Cohesion, Occupational Stress, Psychological Well-being

## I. INTRODUCTION

Burnout is increasingly recognized as a critical concern in contemporary workplaces, particularly within healthcare professions characterized by continuous exposure to occupational stress. Pharmacists are especially vulnerable due to demanding workloads, extended working hours, administrative obligations, and frequent interactions with patients. These conditions contribute to the development of burnout, a psychological state marked by emotional exhaustion, depersonalization, and diminished professional effectiveness. Empirical evidence indicates that burnout is highly prevalent among pharmacists, with a substantial proportion reporting significant symptoms. Contributing factors commonly include excessive workload, prolonged

working hours, and administrative pressures. Community pharmacists often experience stress associated with high patient volume, whereas hospital pharmacists encounter additional challenges such as complex clinical responsibilities and workforce shortages. These occupational demands have been linked to adverse psychological outcomes and increased risks in clinical practice, including medication-related errors. Research conducted during the COVID-19 pandemic further underscores the relationship between heightened anxiety, burnout, and decreased work engagement, with burnout functioning as an intermediary factor (Kiriazopolus et al., 2024). Previous studies consistently demonstrate that burnout affects pharmacists across diverse settings, leading to increased emotional exhaustion, reduced job satisfaction, and a greater likelihood of leaving the profession (Dyrbye et al., 2017). Beyond occupational consequences, burnout is associated with mental health difficulties, including anxiety and depression, which further compromise overall well-being and professional performance. In recent years, attention has expanded beyond workplace determinants to include the role of personal and social contexts in shaping stress outcomes. Among these, family dynamics have emerged as a significant factor influencing how individuals experience and manage occupational stress. Family cohesion, defined as the emotional bonding and connectedness among family members, plays an important role in psychological functioning. According to Olson's Circumplex Model, cohesion ranges from disengaged to enmeshed patterns, with balanced levels associated with optimal well-being (Olson, 2000). Family Systems Theory further emphasizes the interdependent nature of family relationships, suggesting that supportive family environments enhance emotional stability and adaptive coping (Minuchin, 1974; Bowen, 1978). The stress-buffering hypothesis (Cohen & Wills, 1985) provides additional support by proposing that social support reduces the negative impact of stress through improved coping resources and altered stress appraisal. Research findings indicate that cohesive family environments promote emotional support, resilience, and reduced psychological distress, whereas strained family relationships increase vulnerability to stress and burnout. This is particularly relevant for pharmacists, who often face challenges in maintaining work-life balance due to demanding schedules and workload pressures (Dee et al., 2022).

Ineffective work–family interactions may hinder emotional recovery and contribute to prolonged stress (Pinto et al., 2021), while supportive family systems can act as protective resources that facilitate coping and well-being (Connelly, 2024). Despite extensive research on occupational burnout, limited attention has been given to the role of family-related factors among pharmacists, indicating a notable gap in the literature. Accordingly, the present study aims to examine the influence of family cohesion on burnout among community pharmacists. The objectives are to assess levels of family cohesion, evaluate burnout, and analyze the relationship between these variables. By integrating occupational and family perspectives, this study seeks to contribute to academic knowledge, inform clinical interventions, and support the development of organizational strategies aimed at enhancing pharmacist well-being.

## II. REVIEW OF LITERATURE

Katsogiannis et al. (2024) conducted a study titled “Occupational Burnout and Job Satisfaction among Community Pharmacists” to examine burnout and health-related quality of life among community pharmacists in Greece. The study adopted a quantitative cross-sectional design with a sample of 368 pharmacy professionals, predominantly female and pharmacy owners. Data were collected using standardized instruments, namely the Maslach Burnout Inventory (MBI) and the Short Form-36 Health Survey (SF-36), which assessed burnout dimensions and physical and mental health respectively. Statistical analyses included descriptive statistics, t-tests, odds ratios, and Pearson’s correlation. The findings revealed very high levels of emotional exhaustion and depersonalization along with low personal accomplishment, indicating severe burnout. Burnout was significantly associated with poorer physical and emotional health outcomes. The study concluded that community pharmacists experience substantial occupational burnout, emphasizing the need for organizational support and preventive interventions.

Patel et al. (2021) conducted a study titled “Prevalence and Risk Factors of Burnout in Community Pharmacists” to assess the extent and determinants of burnout. The research used a quantitative cross-sectional design and employed standardized tools such as the Maslach Burnout Inventory (MBI) to measure burnout dimensions. The sample consisted of community pharmacists working in various settings. Data analysis involved descriptive and inferential statistics to identify burnout prevalence and associated risk factors. The results indicated that 74.9% of pharmacists experienced burnout in at least one MBI dimension, with emotional exhaustion being the most prominent. Key

contributing factors included excessive workload, long working hours, and workplace stress. The study concluded that burnout is highly prevalent among pharmacists and highlighted the need for effective stress management and organizational interventions.

AlKudsi et al. (2022) conducted a study titled “Mental Health, Burnout and Resilience in Community Pharmacists during the COVID-19 Pandemic” to assess psychological outcomes among pharmacists in Qatar. A cross-sectional design was used with a sample of 256 licensed community pharmacists selected from a national database. Data were collected using an online questionnaire that included MBI-HSS for burnout, CD-RISC-10 for resilience, DASS-21 for depression, anxiety, and stress, and the Fear of COVID-19 Scale. Statistical analyses involved descriptive statistics and multivariable regression techniques. The results showed moderate levels of burnout, with more than half of the participants reporting emotional exhaustion and depersonalization, and 52.7% reporting low personal accomplishment. The study concluded that pharmacists are at significant psychological risk during pandemics and require comprehensive support systems. Gubbins et al. (2015) conducted a study titled “Family Commitment and Work Characteristics among Pharmacists” to examine the relationship between work demands and family commitment. The study used a cross-sectional survey design with a sample of 363 pharmacists, of whom 269 married participants were analyzed. Data were collected using a structured questionnaire assessing family commitment, workload, job stress, work challenge, and job satisfaction. Statistical analyses included descriptive statistics, Spearman correlation, and logistic regression. The findings indicated that higher workload and job stress were significantly associated with greater family commitment needs. Additionally, higher stress levels negatively affected job satisfaction, while work challenge was positively related to career satisfaction. The study concluded that demanding work conditions increase the importance of family support, highlighting the role of work–life balance in professional well-being.

## III. METHODOLOGY

A quantitative correlational research design was adopted to examine the relationship between family cohesion and burnout among community pharmacists. The study sample consisted of 150 community pharmacists selected using convenience sampling. Participants included pharmacists with at least six months of work experience and the ability to understand English, while hospital pharmacists, pharmacy interns, and individuals on long-term leave were excluded. Family cohesion was considered the independent variable, and

burnout was the dependent variable. Data were collected using standardized instruments, namely the Family Adaptability and Cohesion Evaluation Scale (FACES-IV) to assess family cohesion and the Maslach Burnout Inventory (MBI) to measure burnout across emotional exhaustion, depersonalization, and personal accomplishment. Statistical analysis was performed using SPSS, including descriptive statistics and Pearson correlation.

#### IV. RESULT AND DISCUSSION

The findings of 150 members revealed that there is a significant negative relationship between family cohesion and burnout ( $r = -0.438$ ,  $p < 0.01$ ). Descriptive statistics showed family cohesion had a mean of 1.328 (SD = 0.8330), while burnout had a mean of 72.907 (SD = 17.7418). This indicates that individuals with higher levels of family cohesion are less likely to experience burnout. The results suggest that strong emotional bonding and support within the family enhance coping abilities and reduce the impact of occupational stress. In professional settings, this contributes to better emotional stability, improved well-being, and greater resilience in handling work-related demands. The findings support theoretical perspectives that view family support as a protective factor that buffers the negative effects of stress and reduces the likelihood of burnout.

#### V. SUMMARY

The present study examined the relationship between family cohesion and burnout among community pharmacists. Family cohesion refers to the emotional bonding, support, and connectedness among family members, while burnout represents a state of emotional exhaustion, depersonalization, and reduced professional effectiveness resulting from prolonged occupational stress. Community pharmacists often experience demanding work environments characterized by long working hours, high patient interaction, workload pressure, and responsibility for medication safety. These factors can increase the risk of occupational burnout and negatively affect their psychological well-being and job performance. Supportive family relationships may serve as an important protective factor that helps individuals cope with professional stress. The research was conducted using a quantitative correlational design with a sample of 150 community pharmacists. The demographic results showed that most respondents were male (68%), and the majority were in the 25–29 age group, followed by those aged 20–24. Most participants also belonged to nuclear families (73%), while a smaller proportion came from joint families (27%). The results indicated variations in the levels of family cohesion and burnout experienced by the pharmacists. Correlation analysis

revealed a significant negative relationship between family cohesion and burnout ( $r = -0.438$ ,  $p < 0.01$ ). This means that pharmacists who reported stronger emotional support and connection within their families tended to experience lower levels of burnout, whereas those with weaker family cohesion reported higher burnout. Overall, the findings suggest that supportive family relationships play an important role in helping community pharmacists cope with work stress and reducing emotional exhaustion.

#### VI. CONCLUSION

The study concludes that family cohesion significantly influences burnout among community pharmacists. Higher levels of family cohesion are associated with lower levels of burnout, indicating that strong emotional bonding and support within the family reduce the impact of occupational stress. These findings highlight the importance of maintaining healthy family relationships to promote emotional well-being and resilience in professional settings.

Looking into how individuals manage their work stress connects closely with the kind of support they receive at home, especially among community pharmacists who often face demanding work conditions. Handling responsibilities, emotions, and daily pressures becomes easier when there is a sense of connection and understanding within the family. One side reflects the demands of professional life, while the other offers emotional grounding. What happens at work does not remain there; it carries into personal space, where support can either ease or intensify the burden. Over time, it becomes clear that individuals who feel emotionally supported at home are less likely to feel overwhelmed by work. Instead of carrying stress alone, they are able to share, reflect, and recover. This sense of connection creates a balance that helps them stay steady even during demanding situations. Without such support, stress may build up quietly, leading to exhaustion and reduced well-being.

In the context of community pharmacy, where responsibilities are continuous and often intense, this emotional backing plays a crucial role. Those who experience stronger family cohesion tend to approach their work with more stability and clarity. They are less likely to feel drained, as their personal environment provides space for recovery and reassurance. Even though the pressures at work remain the same, the way they are handled changes with the presence of support. The findings show that the idea of no relationship between family cohesion and burnout does not hold. Instead, there is a clear connection between the two, where stronger family bonds reduce the likelihood of burnout.

## VII. LIMITATIONS

Even though the study adds useful understanding, it has some limitations that need to be considered. The study was conducted with 150 community pharmacists, so the findings may not apply to a wider population or to other healthcare professionals. Since the data was collected through self-report questionnaires, there is a possibility that participants may have responded in ways they considered appropriate rather than completely reflecting their actual experiences. While the process was structured, individual interpretation of questions and personal perceptions could have influenced the responses.

Looking at the design, the study captured information at a single point in time, which makes it difficult to determine cause and effect. It remains unclear whether strong family cohesion reduces burnout, or if lower burnout allows individuals to engage better within their family environment. The direction of influence cannot be clearly established. Additionally, several important factors were not included in the study, such as work environment, job stress, coping strategies, organizational support, and individual personality traits. Each of these elements may play a role in shaping both family cohesion and burnout levels, but they remain outside the scope of this research.

## VIII. IMPLICATIONS

The findings of the study show that family cohesion plays an important role in reducing burnout among community pharmacists. When individuals feel supported and connected within their family, they are more likely to handle stress in a better way. This support helps them stay emotionally stable and reduces the chances of feeling exhausted or overwhelmed by work. For professionals such as counselors and psychologists, the results suggest that focusing only on the individual may not be enough. Including family-based approaches in interventions can help improve emotional well-being. Strengthening communication and support within the family may lead to better coping and healthier relationships. For organizations, the study highlights the importance of maintaining work–life balance. When individuals are given time and flexibility to stay connected with their families, it may indirectly reduce burnout and improve job satisfaction. Overall, the study shows that both personal life and work life are connected, and strengthening family relationships can support better mental health.

## IX. RECOMMENDATIONS

Future studies can improve on this research by including a larger and more diverse samples of healthcare

professionals to improve the generalizability of the findings. Researchers may also include pharmacists from different regions, hospitals, or clinical settings to better understand how workplace environments influence burnout. Longitudinal studies could be carried out to examine how family cohesion and burnout change over time and to better understand the direction of their relationship. In addition, future studies may explore other related variables such as job satisfaction, work–life balance, coping strategies, organizational support, and psychological resilience. Investigating these factors may provide a more comprehensive understanding of burnout and help in developing effective interventions to support the well-being of community pharmacists

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