

Evaluation of the quality of life and burnout syndrome in university professors

Avaliação da qualidade de vida e síndrome de burnout em professores universitários

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Abstract

Introduction: The expression quality of life involves objective and subjective parameters, such as health and other factors, and its understanding is somewhat individual and dynamic. Teachers, due to their work dynamics, are prone to develop Burnout Syndrome and have their quality of life negatively affected. **Objective:** To evaluate the presence of Burnout Syndrome among professors of an undergraduate medical course and its correlation with quality of life. **Methods:** Cross-sectional study with higher education teachers, by assessing sociodemographic and behavioral characteristics, quality of life by the WHOQOL-bref and the presence of Burnout by the Maslach Burnout Inventory - Educators Survey. In addition to the descriptive analysis, the intraclass correlation coefficient (ICC), Cronbach's alpha and Pearson's correlation coefficient were used. **Results:** The results of the 22 participants showed a majority of male teachers, with an average age of 36.4 years, married and working as a teacher, on average, 29.5 hours per week. A negative correlation was identified between exhaustion and the physical ($p = 0.005$), psychological ($p = 0.015$) and general ($p = 0.009$) domains, suggesting a reduction in quality of life; and a positive correlation between professional effectiveness and psychological domain ($p = 0.023$), suggesting that the positive perception of professional effectiveness raises QOL among teachers. **Conclusion:** The prevalence of Burnout syndrome among university professors was low, although factors that interfere in QOL, both positive and negative, have been identified. The findings can assist in understanding the characteristics of this audience and in the development of preventive strategies for these conditions.

Keywords: quality of life; faculty; mental health.

Introdução: A expressão qualidade de vida envolve parâmetros objetivos e subjetivos, como a saúde e outros fatores, sendo sua compreensão algo individual e dinâmico. Os professores, por sua dinâmica de trabalho, estão propensos a desenvolverem a Síndrome de Burnout e terem

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sua qualidade de vida afetada negativamente **Métodos:** Estudo transversal com docentes do ensino superior, mediante avaliação das características sociodemográficas, comportamentais, qualidade de vida pelo WHOQOL-bref e presença de Burnout pelo Maslach Burnout Inventory - Educators Survey. Além da análise descritiva, foram utilizados o coeficiente de correlação intraclasse (CCI), o alfa de Cronbach e o coeficiente de correlação de Pearson. **Resultados:** Os resultados dos 22 participantes apontaram maioria de docentes do sexo masculino, idade média de 36,4 anos, casados e que trabalham como docente, em média, 29,5 horas por semana. Identificou-se uma correlação negativa entre exaustão e os domínios físico ($p=0,005$), psicológico ($p=0,015$) e geral ($p=0,009$), sugerindo redução da qualidade de vida; e uma correlação positiva entre a eficácia profissional e domínio psicológico ($p=0,023$), sugestivo de que a percepção positiva de eficácia profissional eleva a QV entre os professores. **Conclusão:** A prevalência da síndrome de Burnout entre os docentes universitários foi baixa, embora tenham sido identificados fatores que interferem na QV, tanto positiva quanto negativamente. Os achados podem auxiliar na compreensão das características desse público e na elaboração de estratégias preventivas dessas condições.

Palavras-chave: qualidade de vida; docentes; saúde mental.

Introduction

The World Health Organization (WHO) defines quality of life (QOL) as “an individual’s perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns”¹.

The concept of quality of life was first used in the post-World War II context, in the United States of America, with the sole purpose of describing the acquired material goods, such as travel and investments. Over time this concept has broadened and incorporated some indicators for its measurement such as gross domestic product and per capita income. Later, it also started to incorporate the social concept and to measure the development through other indicators like housing, health and education².

Currently, the expression quality of life involves objective and subjective parameters such as health, urban planning, leisure, sports, education, environment, security, entertainment, new technologies and everything related with the human beings, their culture and their environment. The understanding of quality of life is individual and dynamic³.

Teachers are exposed to several factors that are detrimental to their quality of life, including violence, lack of security, overcrowded classrooms, lack of autonomy,

feelings of frustration, inadequate salaries, excessive workloads, unprepared students all of which pose the risk of an inability to manage stress^{3,4,5}.

This excess of stress can cause several factors such as insomnia, fatigue, irritability, anxiety and even depression⁶. Moreover, it is related to the low performance at work, interfering in the teacher-student relationship, generating questions about the professional choice, and possibly triggering the Burnout Syndrome (BS)^{5,7}. This term was perfected by Maslach and Jackson, and it is defined as a mental disorder composed by emotional exhaustion, depersonalization, and low personal accomplishment, caused by prolonged situations of work-related stress⁸.

Although it can affect professionals from different categories, BS has been occurring more frequently among health, security, and education professionals. Over the years some researches have shown the presence of BS among teachers, which raise more concern about this public^{7,9-14}.

The International Labor Organization (ILO) considers the teaching profession as one of the most stressful e with strong presence of elements that can predispose to BS⁵. A meta-analysis pointed out that the dissatisfaction with work was associated to mental and psychological problems, being related in a higher level with Burnout Syndrome, depression, anxiety and self-esteem¹⁴.

A survey carried out in 2017 about the main results of researches conducted regarding factors related to BS in Brazilian teachers, pointed out that the emotional exhaustion increases by believing that the profession is interfering with personal life; considering the profession less interesting than when it started; working with many students; in addition to the exercised workload. Depersonalization, on the other hand, increases with students' misbehavior and longer time of service. Professional fulfillment decreases as the time of profession, workload and number of students increase¹⁵.

A cross-sectional study carried out in Rio de Janeiro with college professors showed that a quarter of the participants experienced symptoms compatible with BS, and dehumanization was an item reported by 30.6% of the teachers¹³. In Belém, a study carried out with medical professors identified SB and a high depersonalization index in more than 50% of the interviewees⁹, and in another research with university professors from São Paulo, 11.2% of the participants showed moderated symptoms of BS and 3% presented severe symptoms, especially in the dimensions of work disappointment and emotional exhaustion¹⁰.

Worker's Health is a fundamental right protected by the Brazilian Federal Constitution which assigns to the Unified Health System (SUS, initials in Brazilian Portuguese) the duty to perform actions aimed at guaranteeing this right. In this context, several norms regulate the theme, being the compulsory notification of cases involving work accidents and occupational diseases one of the most important for public health policies. Burnout Syndrome is part of the list of work-related mental and behavioral disorders, which have compulsory notification, according to the Ministry of Health¹⁶. Notifying the cases is extremely relevant once it enables the establishment of an information-decision-action process regarding measures to

prevent and control diseases or health problems.

Moreover, studies on this theme can contribute to the knowledge about the profile of Brazilian university professors and help to understand the factors that can interfere in their health and well-being. The objective of this study was to evaluate the presence of Burnout Syndrome among professors of a undergraduate medical course and its correlation with quality of life.

Materials and Methods

Cross-sectional study, with professors from the Medicine course of University de Rio Verde, campus Aparecida de Goiânia, conducted between 2017 and 2018. Fifty-four active professors were identified at the medical school. Nine teachers who performed only administrative activities were excluded and those who were on leave (maternity, vacation and medical). All the others were invited to take part in the research through a face-to-face approach. There were seven refusals, and 16 professors did not deliver the questionnaire within the stipulated date, even after three contact attempts, totaling a sample of 22 professors.

For data collection three instruments were used: one sociodemographic and lifestyle instrument, the World Health Organization Questionnaire for Quality of Life – Brief Form (WHOQOL-bref), and the Maslach Burnout Inventory - Educators Survey (MBI-ES).

The World Health Organization Questionnaire for Quality of Life – Brief Form (WHOQOL-bref), is an instrument developed by WHO and validated in Brazil.^{1,10} It is a shortened version of the World Health Organization Questionnaire for Quality of Life - 100 (WHOQOL-100), consisting of 24 questions representing each of the 24 parts that compose the original instrument, divided into four domains that aim to verify physical ability (seven questions), psychological well-being (six

questions), social relations (three questions), the environment in which the individual is inserted (eight questions), and also two general QL questions. The Portuguese version of WHOQOL-bref was considered to have good internal consistency, satisfactory in relation to discriminant, concurrent and content validity, and reliable test-retest¹⁷.

The Maslach Burnout Inventory - Educators Survey (MBI-ES), which evaluates the Burnout Syndrome, verifies how the worker experiences his job, according to the three dimensions which constitute the Syndrome: Emotional Exhaustion (EE), Depersonalization (DEP), and Professional Accomplishment (RP). It consists of 22 items, measured by a Likert-type scale, ranging from 0 to 6, being 0 (never), 1 (a few times a year), 2 (once a month or less), 3 (a few times a month), 4 (once in a week), 5 (a few times in a week), and 6 (every day). To calculate the variable, the average of the scores obtained in each dimension is constructed, which will give the index achieved in each dimension. High scores of emotional exhaustion and depersonalization and low score in professional accomplishment (this subscale is inverse) indicate a high level of Burnout. Scores up to 2.5 were considered as no involvement, those between 2.6 and 3.0, moderate level of involvement, and above 4.0 high level. Although there is no consensus in the literature for the diagnosis of Burnout Syndrome the presence of a high level in at least one of the dimensions was used as definition¹⁸. The Brazilian version of the MBI presents the necessary requirements in terms of internal consistency and factorial validity to be used in the evaluation of Burnout Syndrome in teachers in our reality¹⁹.

Data were analyzed in STATA software, version 14.0 (StataCorp, 2015). The Kolmogorov-Smirnov test with Lilliefors correction was performed to verify the normality of the quantitative variables of the study. The qualitative variables were used descriptively as

absolute (n) and relative (%) frequency and the quantitative variables as mean and standard deviation (SD), minimum and maximum. For the dimensions of the instrument of quality of life and Burnout Syndrome, median, 95% IC of the mean and interquartile range (IIQ) were also presented.

To analyze the reliability and internal consistency of the WHOQOL-bref, the interclass correlation coefficient (ICC) and Cronbach's alpha coefficient were used. Pearson's correlation coefficient was used to verify the correlation between the domains of quality of life and the dimensions of the Burnout instrument. In all analyses p values < 0.05 were considered statistically significant.

The study was approved by the Research Ethics Committee of the Fundação do Ensino Superior de Rio Verde – FESURV – Universidade de Rio Verde by Opinion No. 2,288,371, CAAE 69111317.0.0000.5077 on September 21st, 2017.

Results

In this study the sample was composed of 22 university professors of the medical course of a public institution of higher education, six of whom had varied backgrounds in the field of health and 16 were physicians. This number corresponded to 40.7% of the teachers with employment relationship in the institution during the evaluated period.

In the analyzed sample, most participants were male (54.5%), with an average age of 36.4 years old (SD ± 4.4) years, married (63.6%) with an average time of experience as a teacher of 39.3 months (SD ± 30.3) and average working hours as a teacher of 29.5 hours (SD ± 12.4). About 63.6% of the teachers did not work in another educational institution and 81.2% had another function concomitant to teaching. Among those who worked in other functions, 54.5% were clinical

doctors, 13.6% in the surgical area and the others in administrative services.

About 63.3% of the participants reported sleeping well almost always and a total of 86.4% almost felt able to manage stress. Regarding lifestyle habits, 68.2% consumed the recommended number of fruits/vegetables, 72.7% did not consume high calorie foods, 86.4% exercised

regularly, 86.4% had never smoked, 63.6% used alcohol regularly, and 40.9% reported having some pathology.

Table 1 presents the descriptive analysis of QOL domains of the professors, as well as internal consistency tests. It was found that the highest QOL score was in the environmental domain (74.1), and the lowest in the social domain (68.6).

Table 1. Analysis of the domains of quality of life by the WHOQOL-bref in university professors. Aparecida de Goiânia (GO), 2018.

Domains	Average (SD)	95% CI	Median	IIQ	Value		Cronbach's Alpha	CCI	p-value*
					Min.	Max.			
Physical	73,7 (9,2)	69,6-77,8	75,0	67,8-79,5	53,6-85,7	0,499	0,419	< 0,001	
Psychological	72,7 (11,0)	67,8-77,6	75,0	65,0-80,0	50,0-95,0	0,530	0,514	0,011	
Social	68,6 (17,8)	60,7-76,4	66,7	56,2-83,3	33,3-100,0	0,786	0,768	< 0,001	
Environmental	74,1 (9,7)	69,8-78,4	70,3	65,6-82,0	62,5-96,9	0,659	0,652	< 0,001	
General	69,3 (19,6)	60,6-78,0	75,0	62,5-75,0	12,5-100,0	0,855	0,848	< 0,001	

Abbreviations: SD: Standard deviation; 95% IC: 95% confidence interval; IIQ: Interquartile range; Min: Minimum; Max: Maximum; CCI: intraclass correlation coefficient; *Test F

Table 2 presents the analysis of the Burnout scale dimensions of the medical school professors. It was observed that the average scores for the emotional exhaustion, depersonalization and

professional accomplishment dimensions were 1.9, 0.8 and 4.5 respectively. Only one professor presented alterations in the EE dimension (4.5%), characterizing the presence of Burnout Syndrome.

Table 2. Analysis of the Burnout scale domains in university professors. Aparecida de Goiânia (GO), 2018.

Domains	Average (SD)	95% CI	Median	IIQ	Value		Cronbach's Alpha	CCI	p-value*
					Min.	Max.			
Exhaustion	1,9 (1,1)	1,4-2,4	1,8	1,0-2,8	0-4,3	0,895	0,890	< 0,001	
Depersonalization	0,8 (0,9)	0,3-1,2	0,5	0,0-1,4	0-3,6	0,763	0,663	< 0,001	
Professional Accomplishment	4,5 (0,7)	4,2-2,8	4,5	4,0-4,9	3,2-5,6	0,643	0,485	< 0,001	

Abbreviations: SD: Standard deviation; 95% IC: 95% confidence interval; IIQ: Interquartile range; Min: Minimum; Max: Maximum; CCI: intraclass correlation coefficient; *Test F

Table 3 presents the correlation between the QOL domains and factors of the Burnout scale. Data analysis indicated a moderate negative correlation between exhaustion and the physical (p=0.005), psychological (0.015) and general (p=0.009) domains, suggesting a reduction in QOL the greater the exhaustion

presented. We also observed a moderate positive correlation between professional accomplishment and psychological domain of QOL (p=0.023), suggesting that the positive perception of professional accomplishment raises QOL among professors.

Table 3. Correlation between QOL domains and Burnout scale factors in university professors. Aparecida de Goiânia (GO), 2018.

Variable	Emotional Exhaustion	Depersonalization	Professional Accomplishment
Physical (r)*	-0,575	-0,305	-0,003
p-value	0,005	0,167	0,990
Psychological (r)*	-0,511	-0,058	0,483
p-value	0,015	0,078	0,023
Social (r)*	-0,211	-0,146	0,120
p-value	0,347	0,518	0,595
Environmental (r)*	-0,257	-0,215	0,243
p-value	0,248	0,338	0,277
General (r)*	-0,544	-0,308	0,234
p-value	0,009	0,163	0,294

*Pearson correlation coefficient.

Discussion

The profile of the teaching staff of the present study corroborates with other studies of literature focused on this public: male, married, between 30 and 40 years old, and workload around 30 hours a week^{20,21}.

Regarding lifestyle habits, it was possible to notice that the professors of this study have some concern about health, prioritizing a better-quality diet, physical exercises and non-smoking. Healthy lifestyle habits can reduce the risk of developing non-transmissible chronic diseases, besides contributing positively to mental health aspects²².

Although it has been shown that they almost always sleep well, the average number of hours of sleep in this group was 5.8 hours, which is below the recommended time for adults, which is 7-9 hours a day²³. One of the reasons that may contribute to sleeping problems is the very dynamics of the teaching life, marked by numerous activities such as preparing and teaching classes, monitoring students, preparing tests and extra activities, correcting tests, and getting involved in extra-class activities such as research and extension²⁴. Teachers often sacrifice their rest time in order to be able to fulfill all their obligations.

The data concerning quality of life show that the teachers of this study had satisfactory QOL, with better performance in the environmental domain and worse in the social domain. These results diverged from a study carried out in Minas Gerais, with teachers of health courses, where the

social domain had the highest score, being, therefore, the least affected domain in the QOL of the participants³ and from another study carried out with 203 professors from Rio Grande do Sul, where the physical domain had the highest average score and the environmental one the lowest²⁵.

The environmental domain refers to issues of sense of physical safety and security, home environment, financial resources, health care, participation and opportunities for recreation and leisure, the physical environment (pollution / noise / traffic / climate) and transportation. A good evaluation in this item may reflect the location of the municipality where the study was developed, because the metropolitan region of Goiânia, of which Aparecida de Goiânia is part, is among the best metropolitan region in the country, with the highest quality of life²⁶.

The social domain refers to interpersonal relationships and social support networks. The sample of this study was predominantly made up of medical professionals, and many of them had the assistance function concomitant with teaching, working in a double shift. Time is one of the main factors that interfere with the teachers' QOL, and the greater dedication to work, the less availability for other personal activities, such as spending time with family, friends, domestic activities, health care, and leisure, negatively impacting the social context³.

Concerning the Burnout scale, the results of this study were similar to a study carried out with professors from a private

university in the state of São Paulo, in which emotional exhaustion obtained an average score of 1.80; depersonalization 0.84, and professional efficacy 1.095. On the other hand, the findings diverged from the study carried out in Santa Maria (Rio Grande do Sul), where the 60 university professors presented average scores of each dimension suggesting a severe degree in the depersonalization domain (4.1) and moderate in emotional exhaustion (2.7) and professional accomplishment (2.5)²⁷.

In this study only one professor showed a score consistent with BS on EE dimension, suggesting emotional distress and physical exhaustion because of work at a severe level. According to one of the creators of the instrument, this dimension is a precursor in the process of developing the Syndrome²⁸. Other studies conducted using the same scale to evaluate Burnout, but considering the total score of the instrument, one carried out in Rio Grande do Norte and the other in Colombia, showed levels of involvement in each dimension ranging from low to moderate among the professors^{29,30}.

Variation in commitment among faculty members can occur and are influenced by many factors, such as workload, professional experience, number of courses taught, and number of students served^{5,31}.

A negative correlation was observed between exhaustion and the physical, psychological, and general domains, suggesting that the greater the exhaustion, the lower the quality of life of the professors in this study. The physical domain involves the perception of the professor regarding pain and discomfort, sleep, rest, mobility, daily activities, dependence on medication and other treatments and capacity to work. The psychological domain refers to positive feelings, thinking, learning, memory, concentration, self-esteem, body image and appearance, negative feelings, and spirituality. In fact, exhaustion, which is characterized by feelings of overload and depletion of physical and emotional

resources, can be reflected in physical pain and affect interpersonal relationships and professors' quality of life in several aspects^{2,20}.

Exhaustion can still trigger feelings of apathy, discouragement, and drive difficulties in visualizing strategies to regain motivation, leisure, and health, compromising the relationship with students and even the sharing of knowledge³².

Another relevant point in the present study concerns the positive correlation between the professional accomplishment dimension and the psychological domain. Increased professional accomplishment is associated with greater active coping, emotional support and positive reinterpretation¹⁵.

Some factors can be associated with professional fulfillment, such as enjoying the profession, the possibility of working on different fronts such as research combined with extension work with the community, professional recognition by the students and society, the gratification of contributing to the formation of professionals, autonomy, flexibility, and the possibility of learning³³.

Some limitations of the study in question should be considered regarding the results, such as the fact that it has a cross-sectional design, a small number of participants, and refers to only one higher education institution.

Although the prevalence of Burnout Syndrome was low, there is a growing concern with this professional class regarding the risk of developing professional exhaustion. There are several stressors present in the teaching work environment, such as classrooms with many students, professional undervaluation, inadequate working conditions, excessive demands, excessive workload, and lack of participation in institutional decisions^{31,34,35}.

Conclusion

Only one professor presented an impairment compatible with Burnout Syndrome in this study, indicating a low prevalence in the studied sample. The findings pointed to factors that interfere with the QOL of university professors, such as higher scores in the exhaustion domain,

which had a negative impact and a higher perception of professional fulfillment, which had a positive influence. Future researches on this subject are important once they can contribute to a better understanding of the aspects that lead to professional burnout and decrease the QOL of professors, supporting future strategies to avoid these conditions in this public.

References

1. WHOQOL Group. Development of the World Health Organization WHOQOL-BREF quality of life assessment. The WHOQOL Group. *Psychol Med.* 1998; 28(3):551-8.
2. Alves PC, Oliveira AF, Paro HBMS. Quality of life and burnout among faculty members: How much does the field of knowledge matter? *PLoS ONE.* 2019; 14(3): e0214217.
3. Souto LES, Souza SM, Lima CA, Lacerda MKS, Vieira MA, Costa FM, Caldeira AP. Fatores Associados à Qualidade de Vida de Docentes da Área da Saúde. *Rev. bras. educ. med.* 2016; 40(3):452-60.
4. Ribeiro LCC, Barbosa ACR, Soares AS. Avaliação da prevalência de Burnout entre professores e a sua relação com variáveis sociodemográficas. *R. Enferm. Cent. O. Min.* 2015; 5(3):1741-51.
5. Prado RL, Bastianini ME, Cavalleri MZ, Ribeiro SFR, Pizi ECG, Marsicano JA. Avaliação da síndrome de Burnout em professores universitários. *Revista da ABENO.* 2017;17(3):21-9.
6. Moss M, Good VS, Gozal D, Kleinpell R, Sessler CN. An official critical care societies collaborative statement: burnout syndrome in critical care health care professionals: a call for action. *Crit Care Med.* 2016; 44(7):1414-21.
7. Baptista MN, Soares TFP, Raad AJ, Santos LM. Burnout, estresse, depressão e suporte laboral em professores universitários. *Rev. Psicol., Organ. Trab.* 2019;19(1): 564-70.
8. Maslach C, Jackson SE, Leiter MP. MBI Maslach Burnout Inventory. CPP, Incorporated, 1996.
9. Gonçalves TB, Leitão AKR, Botelho BS, Marques RACC, Hosoume VSN, Neder PRB. Prevalência de síndrome de burnout em professores médicos de uma universidade pública em Belém do Pará. *Rev Bras Med Trabalho.* 2011;9(2):85-9.
10. Costa LST, Gil-Monte PR, Possobona RF, Ambrosano GMB. Prevalência da síndrome de Burnout em uma amostra de professores universitários brasileiros. *Psicol Reflexão Crit.* 2013;26(4):636-42.
11. Dallacosta FM. Avaliação do nível de satisfação no trabalho e dos sintomas de burnout em docentes da área da saúde [Tese] Rio Grande do Sul: Programa de Pós-Graduação da Faculdade de Medicina da Pontifícia Universidade Católica. 2014.
12. Borges RSS, Lauxen IAG. Burnout e fatores associados em docentes da Universidade Federal do Rio de Janeiro. *Saúde em Redes.* 2016; 2(1):97-116.
13. Massa LDB, Silva TSS, Sá ISVB, Barreto BCS, Almeida PHQT, Pontes TB. Síndrome de Burnout em professores universitários. *Rev Ter Ocup Univ.* 2016;27(2):180-9.
14. Faragher EB, Cass M, Cooper CL. The relationship between job satisfaction and health: a meta-analysis. *Occup Environ Med.* 2005;62(2):105-12.
15. Dalcin L, Carlotto MS. Síndrome de Burnout em professores no Brasil: considerações para uma agenda de pesquisa. *Psicol. Rev.* 2017; 23(2):745-71.
16. Brasil. Portaria de Consolidação nº 4, de 28 de setembro de 2017. Anexo V - Capítulo I e Portaria de Consolidação nº 5 - ANEXO XLIII) - Lista Nacional de Notificação Compulsória.
17. Fleck MPA, Louzada S, Xavier M, Chachamovic E, Vieira G, Santos V, et al. Aplicação da versão em português do instrumento abreviado de avaliação da qualidade de vida "WHOQOL-Bref". *Rev Saúde Pública.* 2000; 34(2):178-183.

18. 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: 166-9.
19. Carlotto MS, Câmara SG. Análise fatorial do Maslach Burnout Inventory (MBI) em uma amostra de professores de instituições particulares. *Psicologia em Estudo*, v. 9, n. 3, p. 499-505, 2004.
20. Sanchez HM, Sanchez EGM, Barbosa MA, Guimarães EC, Porto CC. Impacto da saúde na qualidade de vida e trabalho de docentes universitários de diferentes áreas de conhecimento. *Ciênc. saúde coletiva*. 2019; 24(11): 4111-22.
21. Tolomeu R, Tavares FS, Monteiro IP, Camargos GL, Correa AAM. Qualidade de vida e estresse em professores de uma instituição de ensino superior do interior de Minas Gerais. *Rev Científica Fagoc Saúde*. 2017;2: 9-15.
22. Ministério da Saúde. Vigitel. Vigilância de fatores de risco e proteção para doenças crônicas por inquérito telefônico. Brasília. Ministério da Saúde. 2017. 130p.
23. Hirshkowitz M, Whiton K, Albert SM, Alessi C, Bruni O, DonCarlos L, et al. National Sleep Foundation's sleep time duration recommendations: methodology and results summary. *Sleep Health* 2015;1(1): 40-43.
24. Martins PJF, Mello MT, Tufik S. Exercício e sono. *Rev Bras Med Esporte*. 2001;7(1):28-36.
25. Koetz LCE. Qualidade de vida de professores de instituições de ensino superior comunitárias: relações entre ambiente e saúde [Dissertação]. Lageado: Centro Universitário UNIVATES; 2011.
26. Ibeu: índice de bem-estar urbano / organização Luiz Cesar de Queiroz Ribeiro, Marcelo Gomes Ribeiro. - 1. ed. - Rio de Janeiro: Letra Capital, 2013.
27. Ferreira MDL, Medeiros JCS, Nogueira ER, Assis EV, Dias MJ. Síndrome de Burnout em docentes do ensino superior. *Rev. e-ciência*, 2020; 8(2): 10-17.
28. Maslach C. Maslach Burnout Inventory. 2 ed. Palo Alto: CPP; 1986.
29. Bedoya, EA, Veja NE, Severiche CA, Meza MJ. Síndrome de Quemado (Burnout) en Docentes Universitarios: El Caso de un Centro de Estudios del Caribe Colombiano. *Formación universitaria*, 2017;10(6): 51-58.
30. Leite TIA, Fernandes JPC, Araújo FLC, Pereira XBF, Azevedo DM, Lucena EES. Prevalência e fatores associados da síndrome de Burnout em docentes universitários. *Rev Bras Med Trab*. 2019;17(2):170-9.
31. Carlotto MS, Palazzo LS. Síndrome de Burnout e fatores associados: um estudo epidemiológico com professores. *Cad. Saúde Pública*. 2006; 22:1017-26.
32. Servilha EAM. Estresse em professores universitários na área de fonoaudiologia. *Rev Ciênc Méd*. 2005;14(1):43-52.
33. Cardoso CGLV, Costa NMSC. Factors connected with professional satisfaction and dissatisfaction among nutrition teacher. *Cien Saude Colet*. 2016; 21(8): 2351-2364.
34. Bertaci AC, Santos BB, Coelho AT, Suda EY. Síndrome de burnout e nível geral de saúde em professores universitários. *Neurobiologia*. 2011;74(1): 167-187.
35. Silva FM, Silva N, Martini CM. Síndrome de Burnout em professores da Escola Polo José de Anchieta e da Escola Estadual Cora Coralina na cidade de Ariquemes. *Rev Fiar*. 2013; 2(1):187-202.

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