Original Article :

Prevalence and Psychosocial Determinants of Burnout Among Medical Students and Staff at Majmaah University

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Abstract

Background and Aims:
Burnout is a widely recognized phenomenon characterized by emotional exhaustion, depersonalization, and reduced personal accomplishment. This study assesses the prevalence and psychosocial determinants of burnout among students and staff at Majmaah University, Majmaah, Riyadh, Saudi Arabia.

Methods:
A descriptive, cross-sectional study was conducted using convenience sampling. Data were collected from 155 students and 66 staff members from various demographics, including age, gender, academic year, specialty, and marital status, using the Maslach Burnout Inventory (MBI). The methodology involved descriptive statistics and logistic regression analysis to explore the relationships between burnout dimensions and demographic factors.

Results:
Among students, 34.2% (53 students) experienced high burnout, 32.3% (50 students) moderate, and 33.5% (52 students) low, with medical students facing the highest levels. Significant predictors of burnout included gender (female students showing higher burnout) and academic year (sixth-year students had significantly higher burnout levels). Among staff, 31.8% (21 staff members) reported high burnout, 34.8% (23 staff members) moderate burnout, and 33.4% (22 staff members) low burnout, with significantly higher burnout observed in female staff and those with lower educational backgrounds. Logistic regression revealed that emotional exhaustion and cynicism were the strongest contributors to burnout scores in both groups.

Conclusion:
Burnout is highly prevalent among students and staff at Majmaah University, particularly among medical students and female participants. Targeted interventions, such as stress management programs, counseling, and workload adjustments, are urgently needed to improve well-being and performance.

Keywords:
Burnout, Medical Students, University Staff, Maslach Burnout Inventory (MBI), Psychosocial Determinant

Introduction:

Burnout is a psychological syndrome defined as a state of chronic stress characterized by emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment[1] Emotional exhaustion reflects feelings of being overextended and drained, depersonalization refers to a detached and impersonal attitude towards work or others, and reduced personal accomplishment denotes feelings of ineffectiveness and lack of achievement[1,2]. Burnout has garnered significant attention globally due to its impact on individuals' quality of life, job performance, and overall well-being [3].

In higher education, burnout among students and staff is recognized as a critical issue stemming from the unique challenges of academic settings. Students face intense academic pressures, including workload, high expectations, and the need to balance academics with personal and social responsibilities[4]. Similarly, university staff, both academic and administrative, are often burdened by heavy workloads, research demands, and the dual responsibilities of teaching and mentoring, making them highly susceptible to burnout [5]. These challenges can result in reduced job satisfaction, poor performance, and negative organizational outcomes.

Globally, research highlights the prevalence of burnout in academia[5]. Studies have consistently shown that medical students are at particularly high risk, reporting elevated levels of emotional exhaustion and depersonalization compared to peers in other academic disciplines [1,5,6]. Similarly, university staff members face burnout due to heavy workloads, insufficient institutional support, and workplace conflicts[7].

Within Saudi Arabia, research has shown similarly alarming trends. Studies from institutions such as King Saud bin Abdulaziz University for Health Sciences and Qassim University reveal that medical students and academic staff experience high rates of burnout, driven by factors such as academic workload, cultural expectations, and limited access to mental health resources [8-10] These findings underscore the pressing need for tailored interventions to address burnout in academic settings within the country.

This study seeks to evaluate burnout levels among students and staff at Majmaah University, assessing the psychosocial factors that influence burnout. It builds upon previous work by exploring burnout across diverse academic disciplines, gender, and academic levels. The findings aim to inform effective strategies for reducing burnout and improving the well-being and performance of the university community.

Objectives:

1. To determine the prevalence of burnout among students and staff by categorizing them into low, moderate, and high burnout levels based on established cut-off scores.
2. To describe the demographic characteristics of the study population, including age, gender, academic year, and specialty.
3. To investigate the associations between burnout dimensions (emotional exhaustion, depersonalization, and reduced personal accomplishment) and key demographic factors through cross-tabulation analyses.

In addition to determining the prevalence of burnout among students and staff, this study also aims to explore potential associations between burnout dimensions and key demographic factors. The following hypotheses were formulated:

Hypothesis 1: Female students will report higher levels of emotional exhaustion compared to male students.

Hypothesis 2: Medical students will have higher depersonalization scores than students in other specialties.

Hypothesis 3: Staff members with lower educational backgrounds will experience higher levels of burnout than those with higher qualifications.

Methods:

Study Design:

This study utilized a cross-sectional design to evaluate the prevalence of burnout among students and university staff at Majmaah University. Data were collected at a single point in time using convenience sampling, which facilitated participant recruitment and streamlined the data collection process within the university setting.

Sample Characteristics:

The sample comprised students from various academic years and specialties, as well as staff members from different departments, representing a broad range of demographic backgrounds such as age, gender, and marital status.

Inclusion Criteria:

- Enrolled students in any academic year.
- Active university staff members.

Exclusion Criteria:

- Individuals who were unavailable during the data collection period.
- Participants who declined to provide informed consent.

Instruments:

The Maslach Burnout Inventory (MBI) is the most widely used instrument for measuring burnout, and it assesses three key dimensions: emotional exhaustion, depersonalization and reduced personal accomplishment[1]. The Maslach Burnout Inventory (MBI), a well-established

tool for measuring burnout across three dimensions, has been validated extensively through rigorous testing and research, demonstrating its reliability and validity in diverse populations and settings[11]. It measures burnout across three dimensions: Emotional Exhaustion (EE), reflecting feelings of being emotionally overextended and exhausted; Cynicism (CY), representing detachment and impersonal responses to work or studies; and Personal Accomplishment (PA), measuring feelings of competence and achievement in work or studies[11]. Emotional exhaustion (EE) refers to the depletion of emotional energy, manifesting as emotional fatigue or unwellness. Depersonalization (CY) is characterized by a cold, sarcastic attitude toward duties and studies, often leading to a loss of empathy and compassion. Reduced personal accomplishment (PA) reflects a diminished sense of competence and achievement, resulting in feelings of inefficiency. The MBI employs a 7-point Likert scale, with higher scores in EE and CY and lower scores in PA indicating greater burnout. Scores are computed as mean values and categorized into quartiles, with a cut-off value of 50 used to dichotomize burnout into low (≤50) and high (>50) levels.

Data Collection Procedure:

Data collection was carried out through self-administered surveys, distributed both in person and electronically to students and staff. Participation was voluntary, and informed consent was obtained from all participants. Anonymity and confidentiality were maintained throughout the study.

Ethical Considerations:

The study was approved by the Ethics Committee of Majmaah University (Ref Ethics Number, MUREC-1an.30/COM-2024/4-6) prior to data collection. Informed consent procedures ensured that participants were fully aware of the study's aims and their rights to withdraw at any time without consequences. Data protection protocols were rigorously followed to safeguard participants' personal information.

Data Analysis:

Demographic variables were summarized using frequencies. Burnout scores were categorized into quartiles, then recoded into a dichotomous variable using a cut-off value of 50, following the methodology used in previous studies[12,13]. Stressors were grouped into two categories: 'never/rarely/sometimes' and 'often/always'. Multiple regression analysis (backward method) was employed to identify significant determinants of burnout, with burnout scores as the dependent variable and demographic factors (age, gender, academic year, specialty, etc.) and stressors as predictors.

The backward elimination method systematically removed non-significant predictors to arrive at the final regression model, presenting the most significant determinants of burnout scores. All analyses were conducted using IBM SPSS Statistics for Windows, version 21.0 (IBM Corp., Armonk, NY, USA).

Effect Size:

Effect sizes were calculated to assess the magnitude of the relationships found in the regression analysis, using Cohen's d for comparison between burnout groups. Effect size interpretation followed standard guidelines (small: 0.2, medium: 0.5, large: 0.8).

Results:

The demographic profile of students at Majmaah University indicates that the majority (60%) were aged 21-23, with notable representation across all academic years, particularly the fifth (23.2%) and fourth years (23.2%). Most students (71%) were in the MBBS program, with others in Nursing (7.7%), Physiotherapy and Rehabilitation (6.5%), and various other specialties. The student population was predominantly single (98.7%) and resided mainly in Majmaah (72.9%), with a balanced gender distribution (52.3% male, 47.7% female). Most students lived with their parents (61.3%) or alone (24.5%). Chi-square associations of demographics and burnout levels are given in Table 1.

Demographic Statistics for Students:

Table 1: Burnout Levels Among Students Based on Demographic Factors:

Variables	Low Burnout Levels (n, %)	High Burnout Levels (n, %)	χ^2 value	p-value
Gender			7.033	0.03
Female	(43.2%) 32	(25.7%) 19		
Male	(25.7%) 20	(42.0%) 34		
Academic Year			10.230	0.016
Fifth Year	(33.3%) 12	(30.6%) 11		
Fourth Year	(33.3%) 12	(19.4%) 7		
Sixth Year	(16.7%) 12	(21.9%) 16		
Third Year	(10.8%) 8	(12.2%) 9		
Second Year	(7.9%) 6	(7.9%) 6		
Preparatory Year	(5.2%) 3	(3.9%) 3		
Internship	(1.3%) 1	(1.3%) 1		
Specialty/College			21.406	0.042
MBBS	(31.8%) 35	(37.3%) 41		
Nursing	(0%) 0	(0.6%) 1		
Physiotherapy and Rehabilitation	(5.1%) 4	(5.1%) 4		
Laboratory	(3.8%) 3	(2.5%) 2		

Radiology	(3.8%) 3	(0%) 0		
Dentistry	(1.3%) 1	(0%) 0		
Marital Status			21.406	0.042
Single	(33.5%) 52	(34.2%) 53		
Married	(0.6%) 1	(1.3%) 1		
Place of residence			5.9	0.12
Majmaah	(100%) 113	(72.9%) 113		
Zulfi	(20.5%) 15	(9.7%) 15		
Riyadh	(18.2%) 14	(9.0%) 14		
Hodat Sudair	(3.9%) 3	(1.9%) 3		
Ghat	(3.9%) 3	(1.9%) 3		
Living Arrangements			2.3	0.08
With Parents	(61.3%) 95	(61.3%) 95		
Alone	(24.5%) 24	(24.5%) 24		
With Colleagues	(9.7%) 14	(9.7%) 14		
With Siblings	(1.3%) 2	(1.3%) 2		
With Single Parent	(0.6%) 1	(0.6%) 1		
With Spouse	(1.9%) 3	(1.9%) 3		
Age			0.40	0.56
years 18-20	(20.6%) 20	(20.6%) 20		
years 21-23	(60%) 93	(60%) 93		
years 24-26	(20.6%) 20	(18.1%) 20		
Over 26 years	(1.3%) 2	(1.3%) 2		

For staff, the majority were aged 26-45 years (77.8%) and primarily worked in administrative roles (77%), with 21.2% being faculty members. Most were associated with specific colleges (81.8%) and were predominantly married (69.7%) and Saudi nationals (84.8%). The gender distribution was nearly balanced (50% female, 45.5% male), and educational levels varied, with 43.9% holding a bachelor›s degree. and educational levels varied, with 43.9% holding a bachelor›s degree. Descriptive statistics for both groups included measures of emotional exhaustion, depersonalization, and personal accomplishment, providing insights into burnout levels at the university. Chi-square associations of demographics and burnout levels for staff are given in Table 2

Table 2: Burnout Levels Among Staff Based on Demographic Factors:

Variables	Low Burnout Levels (n, %)	High Burnout Levels (n, %)	χ^2 value	p-value
Age				
years 18-25	(1.5%) 1	(7.5%) 5	5.123	0.012
years 26-35	(15.2%) 10	(42.4%) 28		
years 36-45	(12.1%) 8	(30.3%) 20		

years 46-60	(3.0%) 2	(12.1%) 8		
Over 60 years	(1.5%) 1	(1.5%) 1		
Education Level			2.345	0.10
Bachelor's Degree	(23.1%) 12	(76.9%) 40		
(Higher Degree	(5.8%) 3	(94.2%) 49		
Affiliation			10.123	0.002
Administration	(42.3%) 22	(57.7%) 30		
Faculty	(0%) 0	(100%) 14		
College	(35.2%) 19	(64.8%) 35		
Marital Status			8.764	0.004
Married	(26.9%) 14	(73.1%) 38		
Single	(15.4%) 8	(84.6%) 44		
Gender			6.789	0.006
Female	(13.5%) 7	(86.5%) 45		
Male	(28.8%) 15	(71.2%) 37		
Nationality			4.321	0.008
Saudi	(34.6%) 18	(65.4%) 34		
Non-Saudi	(7.7%) 4	(92.3%) 48		

Predictors of stressors For Students:

Burnout Dimensions:

The item mean scores (M) and standard deviations (SD) for the Maslach Burnout Inventory (MBI) were calculated by averaging responses for each item, while the aggregated mean represented the average of all item means within each burnout dimension (emotional exhaustion, cynicism, and personal accomplishment).

Emotional Exhaustion (EE): Items such as "I feel emotionally drained by my studies" (M = 3.70, SD = 2.13) and "I feel burned out from my studies" (M = 3.77, SD = 1.99) indicate moderate to high emotional exhaustion, reflecting a significant emotional strain associated with academic responsibilities.

Cynicism/Depersonalization (CY): Items like "I have become more cynical about the potential usefulness of my studies" (M = 4.07, SD = 1.87) and "I doubt the significance of my studies" (M = 4.38, SD = 1.63) suggest high levels of detachment and cynicism, potentially impacting students' motivation and engagement.

Reduced Personal Accomplishment/ Academic Efficacy (PA): Items such as "I can effectively solve the problems that arise in my studies" (M = 4.03, SD = 2.18) and "I believe that I make an effective contribution to the classes that I attend" (M = 3.86, SD = 1.99) reflect a diminished sense of accomplishment, indicating reduced academic efficacy among students.

These findings suggest that burnout manifests across emotional, cognitive, and efficacy-related dimensions, potentially

affecting motivation, satisfaction, and academic outcomes.

Table 3: Frequency of Stressors reported by students

Domains of Burnout	Mean (M)	Std. Deviation (SD)
I feel emotionally drained .by my studies	3.70	2.130
I feel used up at the end of a day at school	3.66	2.008
I feel burned out from my .studies	3.77	1.999
I feel tired when I get up in the morning and I have to .face another day at school	3.65	2.037
Studying or attending a class is really a strain for .me	3.88	1.842
I have become less interested in my studies since my .enrolment at the school	3.97	1.802
I have become less enthusi-.astic about my studies	3.48	1.968
I have become more cynical about the potential usefulness of my .studies	4.07	1.873
I doubt the significance of .my studies	4.38	1.633
I can effectively solve the problems that arise in my .studies	4.03	2.177
I believe that I make an effective contribution to the classes that I .attend	3.86	1.997
In my opinion, I am a good .student	3.77	2.066
I have learned many interesting things during the course of my .studies	3.46	1.998
I feel stimulated when I .achieve my study goals	3.44	1.994
During class I feel confident that I am effective in getting things .done	3.73	2.166
Aggregated Mean	**4.11**	**2.07**

The overall burnout levels among students were categorized into low, moderate, and high based on established cut-off scores. The results show that 53 students (34.2%) experienced high levels of burnout, 50 students (32.3%) experienced moderate burnout, and 52 students (33.5%) experienced low burnout levels. This distribution highlights a concerning trend, with a substantial proportion of students facing moderate to high levels of burnout, which can negatively impact their academic performance, well-being, and overall university experience.

Staff:

Burnout Dimensions:

Descriptive statistics from the Maslach Burnout Inventory (MBI) reveal high levels of burnout among staff. Emotional exhaustion, reflected in items like "I feel emotionally exhausted because of my work" (M = 4.38, SD = 2.021) and "I feel burned out because of my work" (M = 4.86, SD = 2.052), indicates significant overwhelm. Depersonalization/cynicism, with items such as "I have become more callous to people since I have started doing this job" (M = 4.85, SD = 1.931), suggests notable detachment from work and colleagues, potentially harming workplace relationships. Reduced personal accomplishment, as seen in "I feel that I influence other people positively through my work" (M = 3.71, SD = 1.854), points to decreased job satisfaction and fulfillment. The overall aggregated mean of 4.38 (SD = 1.969) highlights the urgent need for interventions to support

staff well-being.

Table 4: Frequency of Stressors reported by staff members:

Domains of Burnout	Mean (M)	Std. Deviation (SD)
I feel emotionally exhausted because of my work	4.38	2.021
I feel worn out at the end of a working day.	3.80	1.866
I feel tired as soon as I get up in the morning and see a new working day stretched out in front of me	4.27	1.926
I can easily understand the actions of my colleagues/supervisors	3.98	1.933
I get the feeling that I treat some clients/ colleagues impersonally, as if they were objects.	4.74	1.995
Working with people the whole day is stressful for me	4.42	2.016
I deal with other people's problems successfully	3.97	1.969
I feel burned out because of my work	4.86	2.052
I feel that I influence other people positively through my work	3.71	1.854
I have become more callous to people since I have started doing this job	4.85	1.931
I'm afraid that my work makes me emotionally harder	4.71	2.014
I feel full of energy	4.2	2.092
I feel frustrated by my work	4.88	1.989
I get the feeling that I work too hard	4.73	1.981
I'm not really interested in what is going on with many of my colleagues	4.48	2.002
Being in direct contact with people at work is too stressful	4.29	1.887
I find it easy to build a relaxed atmosphere in my working environment	4.45	2.069
I feel stimulated when I been working closely with my colleagues	4.06	2.007
I have achieved many rewarding objectives in my work	3.88	1.934
I feel as if I'm at my wits' end	4.7	1.889
In my work I am very relaxed when dealing with emotional problems	4.24	2.023
I have the feeling that my colleagues blame me for some of their problems	4.67	1.876
Aggregated Mean	**4.38**	**1.969**

Table 5: Multiple regression model for burnout scores (Students):

Predictor	B	Std. Error B	Beta	P-value
(Constant)	-0.522	0.458		0.259
Age	-0.102	0.122	-0.058	0.402
Gender (Female)	0.297	0.141	0.145	0.036
Marital Status (Single)	0.223	0.378	0.055	0.556
Specialty (MBBS)	0.387	0.351	0.096	0.274
Academic Year (Fifth)	0.179	0.145	0.102	0.227
Academic Year (Fourth)	0.124	0.137	0.067	0.315
Academic Year (Sixth)	0.296	0.287	0.084	0.047
Place of Residence (Majmaah)	0.115	0.136	0.048	0.401
Living Situation (With Parents)	-0.047	0.205	-0.024	0.812
Emotional Exhaustion	1.220	0.403	0.315	0.005
Cynicism	1.007	0.386	0.276	0.013
Reduced Personal Accomplishment	-0.933	0.374	-0.261	0.011

ANOVA (Students): $F = 2.947$, $P < 0.001$, Adjusted $R^2 = 0.124$, backward method.

The multiple regression analysis results indicate several significant predictors of burnout scores among students. Gender (Female) ($B = 0.297$, $p = 0.036$) and academic year (Sixth) ($B = 0.296$, $p = 0.047$) were significant predictors. Additionally, the domains of the Maslach Burnout Inventory (MBI) revealed that emotional

exhaustion (B = 1.220, p = 0.005) and cynicism (B = 1.007, p = 0.013) significantly contribute to higher burnout scores, while reduced personal accomplishment (B = -0.933, p = 0.011) was associated with lower burnout scores. Other variables, such as age, marital status, specialty (MBBS), academic years (Fifth and Fourth), place of residence (Majmaah), and living situation (with parents), did not show significant associations with burnout scores. The overall model was significant (ANOVA F = 2.947, p < 0.001), with an adjusted R^2 of 0.124, indicating that approximately 12.4% of the variance in burnout scores can be explained by the predictors included in the model.

Table 6: Multiple regression model for burnout scores (Staff):

Predictor	B	Std. Error B	Beta	P-value
(Constant)	-0.456	0.512		0.364
Age	-0.097	0.108	-0.065	0.370
Gender (Female)	0.311	0.128	0.157	0.015
Marital Status (Married)	-0.067	0.139	-0.034	0.633
Education Level (Bachelor's Degree)	-0.154	0.129	-0.079	0.239
Education Level (Higher Degree)	-0.284	0.112	-0.162	0.012
Nationality (Saudi)	0.112	0.141	0.047	0.432
Emotional Exhaustion	1.483	0.267	0.412	<0.001
Cynicism	1.216	0.292	0.313	<0.001
Reduced Personal Accomplishment	-0.948	0.217	-0.244	<0.001

ANOVA (Staff): F= 3.857, P < 0.001, Adjusted R^2= 0.194, backward method.

The multiple regression analysis results indicate several significant predictors of burnout scores among staff. Gender (Female) (B = 0.311, p = 0.015) and education level (Higher Degree) (B = -0.284, p = 0.012) were significant predictors. Additionally, the domains of the Maslach Burnout Inventory (MBI) revealed that emotional exhaustion (B = 1.483, p < 0.001) and cynicism (B = 1.216, p < 0.001) significantly contribute to higher burnout scores, while reduced personal accomplishment (B = -0.948, p < 0.001) was associated with lower burnout scores. Other variables, such as age, marital status, education level (Bachelor's Degree), and nationality, did not show significant associations with burnout scores. The overall model was significant (ANOVA F = 3.857, p < 0.001), with an adjusted R^2 of 0.194, indicating that approximately 19.4% of the variance in burnout scores can be explained by the predictors included in the model.

Discussion:

This study assessed and compared burnout levels among students and staff at Majmaah University, exploring relationships between burnout dimensions and demographic factors. A significant proportion of students experienced high burnout levels (53 students, 34.2%) and moderate burnout levels (50 students, 32.3%). These findings align with previous studies highlighting elevated burnout rates in university set-

tings, particularly in demanding fields like medicine[7-9]. The recurring negative feelings of emotional exhaustion, cynicism, and reduced academic efficacy are often fuelled by academic pressure, workload, and the challenge of balancing multiple responsibilities. Contributing factors may include the demanding medical curriculum, academic culture, and high expectations from social and family spheres[9,10,14].

In terms of emotional exhaustion, contrary to the hypothesis that female students would report higher levels, male students (34 students, 42.0%) demonstrated greater levels of exhaustion compared to female students (19 students, 25.7%). This unexpected finding may reflect gender-specific coping mechanisms or societal expectations that place additional pressure on male students to excel. While this contrasts with findings from other contexts, such as Vietnam, where females reported higher emotional exhaustion, it underscores the importance of considering cultural and situational factors in burnout research[14].

Medical students exhibited significantly higher levels of depersonalization compared to students in other health-related specialties, confirming the hypothesis regarding their vulnerability to this dimension of burnout. Specifically, 41 medical students (37.3%) reported high levels of depersonalization, likely due to the rigorous academic and clinical demands of their training. These findings are consistent with systematic reviews highlighting that medical students face greater emotional detachment and cynicism due to the intense pressures inherent in their programs [12].

Among staff members, those with lower educational backgrounds, particularly bachelor's degree holders (40 staff members, 76.9%), experienced significantly higher levels of burnout compared to those with higher qualifications (14 staff members, 22.7%). This aligns with the hypothesis that educational attainment influences burnout, as individuals with advanced degrees often have better coping strategies and access to resources that mitigate stress[15,16]. Furthermore, 21 staff members (31.8%) reported high burnout levels, and 22 (34%) experienced moderate burnout. Female staff (31 staff members, 50%) were particularly affected, reflecting gender-specific stressors such as balancing work and family responsibilities. These findings are consistent with previous research highlighting similar gendered disparities in burnout [17-19].

The findings of this study underscore the widespread nature of burnout in medical education and academia. For instance, a study conducted at King Saud bin Abdulaziz University for Health Sciences reported alarmingly high rates of emotional

exhaustion (53.3%, or 320 students) and depersonalization (49.3%, or 296 students), comparable to the high levels observed among students at Majmaah University (53 students, 34.2%)[20]. Another study found that 45.5% (273 students) of medical students exhibited high burnout levels, further highlighting the prevalence of this issue in Saudi Arabia and the urgent need for targeted interventions [21,22].

Recognizing the detrimental effects of burnout on students' well-being and academic performance[4], previous research suggests that strategies such as mindfulness training, stress management programs, and resilience-building workshops can effectively mitigate burnout[4,23]. Similarly, a U.S. study reported significant improvements in emotional exhaustion and depersonalization through a facilitated small-group curriculum aimed at promoting resilience [24].

This study has several limitations. Its cross-sectional design prevents the establishment of causal relationships between burnout and demographic factors. The use of convenience sampling may have introduced selection bias, limiting the generalizability of findings to a broader population. Additionally, the lack of direct interventions during the research restricted further insights into burnout mitigation strategies. Future research should explore additional variables, such as behavioural changes and suicidal ideation, to provide a deeper understanding of burnout's broader impacts. Incorporating longitudinal and qualitative methodologies will ensure a more comprehensive approach in future studies.

Our findings underscore the urgent need for student-centred programs at Majmaah University, such as stress management training, counselling services, time management workshops, and initiatives to promote a healthy work-life balance. Similarly, fostering a supportive workplace culture, encouraging open communication, and providing professional development opportunities for staff can help reduce stress and enhance overall well-being. Future research should focus on evidence-based strategies for preventing and managing burnout effectively, considering the diverse needs of students and staff alike.

Conclusions:

This study highlights the significant prevalence of burnout at Majmaah University. The findings reveal that a substantial proportion of students, particularly those in medical disciplines, experience high levels of emotional exhaustion and depersonalization, while university staff with lower educational backgrounds report higher burnout rates. Male students show greater emotional exhaustion, while female staff face burnout due to work-life balance challenges. These trends align with previous

research in Saudi universities. Addressing burnout requires stress management programs, resilience workshops, counseling, and institutional support through workload adjustments and professional development.

Declaration of Interest: None.

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