A Study on Mental and Physical Health of Married Nurses Working In Privet and Government Hospitals

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I. Introduction

World Health Organization's (WHO) definition of health which states 'health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity'. Similarly, (Prince, Patel, Saxena, Maj, Maselko, Philips, 2007) describes the concept of there being 'no health without mental health', where they describe the connectedness and interactions between mental and physical conditions as protean, with one being able to affect the other and vice versa.

WHO envisages specific dimensions of health are mental and physical. Good mental health is the ability to respond to the many varied experiences of life with flexibility and sense of purpose. So the physical dimension conceptualizes a perfect functioning of the body.

Health and behaviour are correlate with each other, if a person is healthy especially married female nurses, the whole family can be healthy which will result is peace and happiness and health of the whole world. So the present study is an attempt to examine the mental and physical health of married nurses working in private and government hospitals.

It is becoming increasingly difficult to ignore the factors that are clearly important in stress induced by work, i.e., including long hours of working, the quality of the relationships between hospital workers, poor supervision, high workload, and poor work environment. The physical environment (including the factors like temperature, lighting, the levels of sound in hospitals etc.), in addition, has a great impacts on the levels of stress in the healthcare staff (Chen, Wang, Hsin, Oates, Sun, 2001).

 Stress levels among professional nurses have increased due to the increased demands of clinical nursing in recent years. Previous studies have shown that there is an association of work demands and stress with adverse mental health like emotional exhaustion (yang, (2017), depressive disorder (Lamont, Brunero, Perry, Duffield, Sibbritt, Gallagher (2017) (sakata, wada, tsutsumi, ishikawa, aratake, watanabe(2008) and fatigue (Letvak, Ruhm, McCoy (2012) Fang, kunaviktikul, olsan, chontawan, kaewthummanukul, 2008). Which found to result in sleep problems and absences from work due to sickness (Yang ,2017).

Workers in the health field are particularly exposed to continuous stress, which causes physical, psychological and cognitive symptoms, demanding prolonged adaptive responses to tolerate, overcome or adapt to stressors (Almeida, Gurgel, Silva, 2013). However, healthcare professionals have been more concerned with improving their activities and the care offered to patients than caring for their own health, especially regarding to occupational risks and mental health (yang ,2017).

The prevalence of depressive symptoms among nurses in the USA was between 35–41%, but another study reported it to be 18% (Mealer, Shelton, Berg, Rothbaum, Moss, 2017). 11%–80% in Iranian nurses (Tabrizi, Kavari, 2011) and 51% in Brazilian nurses (Schmidt, Datnas, Marziale 2011). Additionally, approximately 33% of French nurse managers and 10% Canadian nurses were found to suffer from depressive symptoms as well (Rushton, Batcheller, Schroeder, Donohue, 2015). (Sembajwe, Wahrendorf, Siegrist, Sitta, Zins, Goldberg 2012). A high incidence of anxiety in nursing professionals is also evident, with studies stating prevalence rates ranging 32–43% in Chinese nurses (Gao, Pan, Sun, Wu, Wang,(2012). and 22–24% of American nurses who showed PTSD symptomology (Mealer, Shelton, berg, Rothbaum, moss,2017).

The level of stress among nurses can generally range from moderate to high (Opie, Lenthall, Wakerman, Dollard, Macleod, Knight, Rickard, Dunn, 2011). Holt (1993) found that shift work can lead to a variety of physical complaints, including sleep and gastro-intestinal problems and can also interfere with the family life.

Predictive actors such as job satisfaction, high workloads, shift work, sleep disturbance, years of employment, and marital status (Welsh, 2009); Tabrizi, Kavari, 2011) were commonly implicated with these mental disorders.

NEED FOR THE STUDY:
Good mental health is the ability to respond to the many varied experiences of life with flexibility and sense of purpose. So the physical dimension conceptualizes a perfect functioning of the body. Health and behaviour are correlate with each other, if a person is healthy especially married female nurses, the whole family can be healthy which will result is peace and happiness and health of the whole world. So the present study is an attempt to examine the mental and physical health of married nurses working in private and government hospitals.

Statement of the problem:
To analysis the physical and mental health of married nurses, working in government and private hospitals

Defining keywords:
1. **Physical Health**
2. **Mental Health**

OBJECTIVES:
1. To assess the significant difference between physical health and mental health of nurses working in Private hospitals.
2. To assess the significant difference between physical health and mental health of nurses working in Government hospitals.
3. To assess the significant difference between physical health of nurses working in Government and Private hospital.
4. To assess the significant difference between mental health of nurses working in Government and Private hospital.

II. Material and methods

Aim: To assess the mental and physical health of married nurses working in private and government hospitals.

Sample: The sample for the present study consisted of 60 married Nurses which were selected through purposive random sampling technique, Out of 60 Nurses, 30 Nurses belonged to Private Hospitals and 30 Nurses belonged to Government Hospitals of Udaipur (Raj.).

Procedure: All the subjects were contacted by the investigator at their work place and at their home. Adequate rapport was established and took concern with each subject before giving a questionnaire. The data was collected in accordance with the convenience of the respondents in order to maintain the level of motivation and encouragement. The questionnaire was given to them individually and was expected to fill the same in the presence of the investigator and return it back. They were requested to be free and frank. This helps in removing the doubts of the respondents if any and ensures maximum return of the completed questionnaire. They were motivated and encouraged to given correct answer and fill form completely. They were assured that their responses would be kept confidential and used only for research purpose.

It also safeguarded against the mutual consultation amongst the respondents, unbiased response and misuse of the questionnaire .Some of the subjects had problem regarding Hindi language of the questionnaire. It was either explained in English or was filled by the investigator as per respondent.

Score of each test was done on the basis of instructions given in the manual.

Tools:
1. P.G.I. Health Questionnaire N-1 by Verma, S.K. Wig, N.N., and Prasad, D.
It was developed by *Dr. S.K. Verma, Dr. N.N. Wig and Prasad* in 1974. It consists of 38 items divided into A (Physical distress) and B (Psychological distress) sections with 16 and 22 items. Reliability of the test was examined using 'test-retest' and 'split-half' method and was found to be significant high 0.88 and 0.86 respectively sections were more with total score rather than between physical and psychology sections. The low scores shows better health.
2. Mental Health Inventory by Jagdish, and Shrivastave, A.K.
Mental Health Inventory was developed by *Dr. Jagdish and Dr. Shrivastava A.K.* It consists of 56 items. It was developed to know about ability to make positive self-evaluation, to perceive the reality, to integrate the personality, autonomy group oriented attitudes and environmental mastery. Reliability of Mental Health Inventory was found .73. The high scores shows better Mental health.

Parameters
1. Independent variables: Type of Hospital (Private and Government hospital)
2. Dependent Variables: Mental Health & Physical Health

Hypothesis
1. There would be significant difference in physical health and mental health of private hospital nurses.
2. There would be significant difference in physical health and mental health of Government hospital nurses.
3. There exist significant difference in physical health of Government and private hospital
4. There exist significant difference in mental health of Government and private hospital

Inclusion criteria
1. Nurses between the age group of 23 to 45 years

Exclusion criteria
1. Male nurses are excluded from the study.
2. Nurses with Physical illness like diabetics, hypertension, and thyroid were excluded.
3. Pregnant nurses were excluded.

Statistical analysis:
The score obtained on different tests of the study were analysed statistically. In analysis of data statistical procedure such as t-test was employed it was used to find out the significance of results.

III. Result and Discussion

The nurses in the present study out of 60 nurses, 30nurses belonged to private hospitals and 30 nurses belonged to government hospitals of Udaipur, (Raj.) having the age ranging from 23 to 45years. The result of the study discussed as follows:

Hypothesis 1: There would be significant difference in physical health and mental health of private hospital nurses. The hypothesis was put to test, using t-Test. The result obtain from the test are summarized in table 1.

Table 1 indicates the physical health and mental health of married nurses working in private hospital. The t-test reveals that there was statistically significant (t = 75.59, p <0.0001). The result gives support to the first hypothesis. Hence the hypothesis was accepted.

Hypothesis 2: There would be significant difference in physical health and mental health of Government hospital nurses. The hypothesis was put to test, using t-Test. The result obtain from the test are summarized in table 2.

Table 2 indicates the physical health and mental health of married nurses working in government hospital. The t-test reveals that there was extremely statistically significant (t = 39.7408, p <0.0001). The result gives support to the second hypothesis. Hence the hypothesis was also accepted.

Table No. 1: Values of SD and mean of physical health and mental health of private hospital

Types of Health	N	Mean	SD	t-Score	P Value
Physical health	30	7.76	4.01	75.59	<0.0001*
Mental health	30	170	11.05		

 * By conventional criteria, this difference is considered to be extremely statistically significant.

Table No. 2: Values of SD and mean of physical health and mental health of Government hospital

Types of Health	N	Mean	SD	T-Score	P Value
Physical health	30	10.26	6.33	39.7408	<0.0001*
Mental health	30	162.53	20.009		

 * By conventional criteria, this difference is considered to be extremely statistically significant.

Hypothesis 3; There exist significant difference in physical health of Government and private hospital. The hypothesis was put to test, using t-Test. The result obtain from the test are summarized in table 3.

Table 3 shows the physical health of nurses working in Government and Private hospital. The t-test reveals that there was no significant difference (t = 1.82, p = 0.072). The result not support to the third hypothesis. Hence the hypothesis was rejected.

Hypothesis 4; There exist significant difference in mental health of Government and private hospital. The hypothesis was put to test, using t-Test. The result obtain from the test are summarized in table 4.

Table 4 shows the mental health of nurses working in Government and Private hospital. The t-test reveals that there was no significant difference (t = 1.401, p = 0.1665). The result not support to the third hypothesis. Hence the hypothesis was rejected.

Table No. 3: Values of SD and mean of physical health of Government and Private hospital

Types of Hospital	N	Mean	SD	t-Score	P Value
Government	30	10.26	6.33	1.82	0.0728
Private	30	7.76	4.01		

By conventional criteria, this difference is considered to be not quite statistically significant.

Table No. 4: Values of SD and mean of mental health of Government and private hospital

Types of Hospital	N	Mean	SD	t-Score	P Value
Government	30	164.6	18.443	1.401	0.1665
Private	30	170.1	11.055		

By conventional criteria, this difference is considered to be not statistically significant.

The present study investigation the psycho-sexual health of married nurses has been assessed. Comparison was made between physical and mental health of married nurses working in private and government hospitals. Two variables were chosen for the purpose of study viz.

The finding of present study revealed that significant difference on physical health and mental health of Government and private hospitals nurses.

Mental health and physical health of private and government hospitals nurses were found significantly associated with health. It shows that nurses who belong to private hospitals has higher than government hospitals.

They remain busy in their profession. It is obvious that their job requires lots of time and energy longer hours away from home. Nurses live in more stress conditions psychologically which strains one's adaptive mechanism. Prolonged tension may produce physiological disorders, problems reported cry easily, tension, worry about small matters, easily irritated and aggressive. Similar finding has been reported by (Letvak, Ruhm, Mccoy, 2012)it is becoming increasingly difficult to ignore the factors that are clearly important in stress induced by work, i.e., including, long work hours, time constraints, meeting patients' needs, irregular schedules, and lack of professional support and the quality of the relationships between hospital workers, poor supervision, high workload, and poor work environment (Opie, Lenthell, Wakerman, Dollard, Maclead, Knight, Rickard, Dunn, 2011).

Nursing is generally related to intense pressure, because of its high demanding, challenging, and stressful professional characteristics (yang, 2017). Occupational stressors in nursing are linked to increased workload, low levels of support, and workplace factors, including psychosocial factors (Lamont, Brunero, Perry, Duffield, Sibbritt, Gallagher, 2017). High job-related stress levels among nurses can lead to substance abuse, depression, anxiety, low job satisfaction, disengagement and decreased organizational loyalty, and increased intention to leave their job (Rushton, Batcheller, Schroder, Donohue, 2015).

It is becoming increasingly difficult to ignore the factors that are clearly important in stress induced by work, i.e., including long hours of working, the quality of the relationships between hospital workers, poor supervision, high workload, and poor work environment. The physical environment (including the factors like temperature, lighting, the levels of sound in hospitals etc.), in addition, has a great impacts on the levels of stress in the healthcare staff (Chen, Wang, Hsin, Oates, Sun, Liu, 2011). Occupational stress has a significant impact on workers' health and well-being, job satisfaction, their quality of life and quality of family life, turnover, and absences from work (Salih, Abajobir, 2014). In general, the prevalence of mental health problems among people was estimated to be 14 to 18% (Mark, Smith, 2012).

Increased level of fatigue among evening and night shift nurses as compared to nurses who work during the day and more fatigue among nurses who work in the intensive care unit then those in the other wards, which could explain the different level of burnout in the two sitting. The level of mental demand experienced by nurses working in the intensive care unit is high, as they are faced with critical decisions about the patients (Thomas, 1997).

The prevalence of mental health problems (anxiety and depression) among nurses is high. Excessive workloads, organizational factors and job factors are found to be the important leading causes of mental health problem in nurses (Sambajwe, Wahrendorf, Siegrist, Sitta, Zins, Goldberg, 2012), Thomas, 1997). Job dissatisfaction was -high in the hospital nursing staff, and 22% of them wanted to change jobs (Salih, Abajobir,(2014).

IV. Conclusion:
Physical health and mental health of married nurses working in private hospitals are higher than government hospitals. As revealed in this studies government hospital has high work load, long working hours, lack of job satisfaction etc. creates stress on nurses.

LIMITATIONS:
1. The sample size is limited to 60.
2. Variables are limited to physical health and mental health.

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