

Assessing the Psychological Well-Being among Nursing Faculty: Experience from Saudi Arabia

¹Ghada K. Almukhaini, ²Nazik M.A. Zakari and ²Ahmed E. Aboshaiqah

¹Psychiatric and Mental Health Nursing Department,
College of Nursing, King Saud University, Kingdom of Saudi Arabia

²Nursing Administration and Education, College of Nursing,
King Saud University, Kingdom of Saudi Arabia

Abstract: Psychological well-being is defined as being in the right condition both in physical and emotional aspects to cope with life stresses and carry out ones activities effectively. Purpose; this study examined the relationship between the psychological wellbeing dimension and the demographic characteristics among nursing educators in Saudi Arabia. The study was carried out using an analytic cross-sectional correlation design. Non-probability sample comprised participants from four departments at the college of nursing. 110 questionnaires were distributed and 66 were returned with 60% of response rate. The 42 item version of the Ryff scale of psychological well-being was used. It measure six positive psychological functioning, which are autonomy, environmental mastery, personal growth, positive relations with others, purpose in life and self-acceptance. Result; revealed that the highest means were positive relations with others and purpose in Life. While, the lower mean was for environmental mastery. The high correlation existed between autonomy and positive relations. Nursing faculty age correlated highly with year of experience and moderately correlated with nationality and autonomy. Conclusion: The faculty needs more action toward their workplace developments that engaging them in developing their environmental mastery and personal growth

Key words: Well Being • Psychological Well-Being Scale • Saudi Arabia Autonomy • Environmental Mastery • Personal Growth • Positive Relations With Others • Purpose In Life And Self Acceptance

INTRODUCTION

Psychological well-being is an important concept for both tutors and students in any learning institution. The reason is that both categories of people rely heavily on the use of their minds whose functioning relies on how psychologically well-being they are. In this case, the psychological well-being among nursing faculty (tutors and professors) is important for them to administer their healthcare duties effectively. Very few studies mirror the psychological well being of professionals in the field of nursing education. However, some of the aspects of psychological well-being faced by these educators are severe. Some of the factors perceived to influence the behavioral responses of nursing educators include lack of

professional autonomy, age, interaction with colleagues and students, individual health status, working environment and levels of income. A low level of environmental mastery has been chiefly cited to loss of psychological well-being. It is also an issue that affect the lives of human beings and affect their undertakings either positively or negatively [1].

The issues of inadequate skills among nurses, low levels of motivation and low job satisfaction, as revealed by one study, are to blame for poor quality services in the Health care sector [2]. The same study indicated also that the level of job satisfaction, Which is directly associated with psychological well-being among nurses and other workers in the sector, was very low in nursing as compared to the other professions [2].

In other study, argued out that the psychological state of nurses determined their level of commitment in their places of work and the study revealed that the nurses' job satisfaction, the support they receive from the organization, transformational leadership, as well as their education level were positively correlated with their commitment to those organizations in which they work [3]. While the nursing faculty continues to increase other people's knowledge on issues concerning nursing career, such a move negatively affects their psychological well-being. This was revealed in a study conducted where it was found out that dental students and their tutors in Saudi Arabia experienced high levels of stress. The study indicated that feminine gender was more prone to stress as compared to the masculine gender [4]. Saudi Arabian professionals in the medical field had high stress incidences as compared to those in other disciplines. The medical practitioners and learners were also found to have high number of cases of problems relating to mental health, depression, as well as anxiety. Such findings were associated with social problems facing medical students [5].

In connection to this, nurses who choose to teach while they are still practicing will most probably have more stress relating to academic workload, social problems and workplace stress. As a result, the nurses' psychological well-being will be compromised. Another study cited the issues of anxiety and depression nurses as great challenges that students and instructors need to deal with. The reason is that stress and anxiety have a positive correlation. Failure to address such issues leads to poor state of well being among nursing faculty not only in Saudi Arabia but also in other parts of the world [6].

As revealed by a study in 2012 [7], lack of written policies concerning the Saudi Arabian nursing faculty negatively affected the performance of nurses and their general psychological well being. A good example is the lack of a policy stating whether family members should be present when their loved ones are being resuscitated despite the fact that 65% of Saudi Arabian nurses were against the idea of resuscitating patients in the presence of their family members. This makes it difficult for students and their trainers to relate well especially when it comes to practical lessons [7].

In 2011, a study found out that majority of the Saudi Arabian nursing faculty were experiencing a great challenge of role ambiguity as well as role conflict. As a result, it was found out that such challenges reduced their

levels of commitment to the organization. The challenges were associated with the administrators' inability to create a good work environment that would dilute such challenges and foster academic scholarships among nurses in the kingdom [8]. In a different study, revealed that Saudi Arabia's faculty commitment was mainly based on obligations but not desire. Faculty nurses were found to have high level of disengagement as well as great production emphasis [9].

Thus the purpose of this study is to assess the dimensions involved in the psychological well-being and explore the relationship between psychological well-being dimensions which are autonomy, environmental mastery, personal growth, positive relations with others, purpose in life and self- acceptance and demographic characteristic of nursing educators in Saudi Arabia.

Method and Material Research Design: This study was carried out using an analytic cross-sectional correlation design.

Sample and Setting: Non-probability sample comprised participants from four departments at the college of nursing which are medical surgical, community and mental health, maternity and pediatric and administration and education. 110 questionnaires were distributed and 66 were returned with response rate of 60%. The criteria adopted for inclusion was surveying members of the nursing faculty from the College of Nursing in King Saud University, in the field of professional nursing specialization. For the participants, 74% (n=49) were women while 26% (n=17) were men. The study was conducted on voluntary grounds and participants were at liberty to leave at their free will.

Instruments: Data were collected via a questionnaire containing the Ryff's scale of psychological wellbeing (PWB which was designed to measure positive psychological functioning wellbeing [10]. The PWB scale consists of 42 items on a 6- point format: strongly disagree (1), moderately disagree (2), slightly disagree (3), slightly agree (4), moderately agree (5) and strongly agree (6). The items are classified into six psychological dimension (self- acceptance, autonomy, purpose in life, positive relations with others, personal growth and environmental mastery). 22 items were positively worded and 20 negatively worded. Negative phrased items were recorded that if the scored is 6 in negative items the

Adjusted score is 1 ; if 5 then the adjusted scored is 2 and so on [10, 11]. The total score was divided by the number of items giving a mean score for each dimension. Furthermore, the fact that Ryff' scale of PWB has widely been used and internal consistency (alpha) coefficient for this study scale range from 0.84-0.91 for each dimension which indicates good reliability.

Procedures: Prior to data collection, an institutional review board granted approval for the study. Before the study was conducted, the research team met with the supervisor of each department and explained the study procedure. Questionnaires were handed out to supervisors in the selected departments who then gave them to faculty members. A letter to each participant accompanied the questionnaire explaining the objective of the research. All questionnaires were self-administered; paper-and pencil instruments were distributed, completed and collected on the supervisor office. Throughout the study, protection of human rights was assured and adherence to ethical principles was secured. Thus, the researcher ensured that each individual's autonomy was supported. Participation was voluntary and there was no penalty for withdrawal from or termination of the study. In addition, the research methodologies were non-invasive and there were minimal or no anticipated risks to participants. Total confidentiality of information was also ascertained.

Statistical Analysis: Data entry and analysis were done using the SPSS 13.0 statistical software package. Pearson correlation analysis was used for assessment of the inter-relationships among quantitative variables PWB dimensions and the demographic characteristics among nursing faculty. The Cronbach's alpha coefficient was calculated to assess the reliability of the adapted tool through internal consistency. As well as descriptive and ANOVAs statistics were computed. Statistical significance was considered at a P- value < 0.05.

RESULTS

Of 110 questionnaire forms distributed, 66 were completed, returned and validated, with a response rate of 66%. Table 1 present the demographic characteristics. The majority of the nursing faculty are expatriates had over 7 years of experience in the field of professional nursing education whose ages more than 41 years.

Table 1: Descriptive analysis of sample characteristics

Demographic Characteristic	Frequency	Percent
Age		
20-40	26	39.4
41+	40	60.6
Gender		
Female	49	74.0
Male	17	26.0
Citizenship		
Saudi	27	41.0
None Saudi	39	59.0
Marital status		
Married	64	95.5
Unmarried	3	4.5
Year of experience		
1-6	10	15.0
7+	56	85.0

Table 2: Descriptive analysis of Psychological Dimension of well-being

Wellbeing Dimensions	Mean	Std. Deviation
Autonomy	31.3	4.7
Environmental Mastery	29.9	2.7
Personal Growth	30.3	5.2
Positive Relations	33.8	3.8
Purpose in Life	32.8	5.2
Self-Acceptance	31.9	5.2

On average, 74% of those surveyed were females. Around 30% participants from medical surgical nursing department and 90% living with family with more than two children.

The results reveal in Table 2 that the highest means 33.8 were Positive Relations followed by Purpose in Life 32.8 respectively. Self-Acceptance and Autonomy show moderate mean (31.9, 31.3) respectively. Whereas environmental mastery recorded a lower mean 29.9.

With respect to the PWB dimensions, Table 3 points to statistically significant highest positive correlations exist between autonomy and personal growth (R= 0.737). Likewise, statistically significant highest positive correlations exist between nursing faculty years of experience and their age (R=.719). The statistically significant moderate correlation appear between environmental mastery, personal growth and purpose in life (R=. 515, .517 respectively). The nationality of nursing faculty moderately correlated with and autonomy (R=.

Table 4 reflects the mean differences between selected demographic characteristics and psychological dimensions. The study revealed that a significance difference between the mean of self-acceptance and nursing faculty nationality having children, their age and gender (p= .023, p=.002, p=.043, p=.053 respectively). Consequently three of dimensions namely personal

Table 3: Correlation Matrix between Psychological Dimensions of well-being and Demographic Characteristics

Psychological Dimensions & Demographic Characteristics	1	2	3	4	5	6	7	8
1-Autonomy	1.00							
2- Environmental Mastery	.440**	1.00						
3- Personal Growth	.737**	.515**	1.00					
4- Positive Relations	.374**	.291*	.417**	1.00				
5- Purpose in Life	.433**	.517**	.350**	.303*	1.00			
6- Year of Experience	-.052	.114	-.031	-.001	-.169	1.00		
7- Nationality	-.045	-.075	-.178	.032	-.068	.406**	1.00	
8- Age	.117	.162	.119	.153	.059	.719**	.453**	1.00

*P < 0.01; **P < 0.05.

Table 4: ANOVA analysis between the Psychological Dimensions and Demographic Characteristics

ANOVA	Nationality	Children	Age	Gender
Autonomy	.917	.372	.565	.583
Environmental mastery	.672	.925	.352	.417
Personal Growth	.353	.267	.647	.063*
Positive Relations	.967	.405	.672	.073*
Purpose in Life	.867	.535	.073*	.008
Self-Acceptance	.023*	.002*	.043*	.053*

*. The mean difference is significant at the level $\alpha=0.05$

growth, positive relations and self-acceptance of wellbeing scale were indicated a significance difference ($p=.063$, $p=.073$ and $p=.053$ respectively) according to faculty nursing gender. Furthermore, significance mean difference among the mean of purpose in life, self-acceptance and faculty age were detected as ($p=.073$ and $p=.043$) respectively.

DISCUSSION AND CONCLUSION

Despite being a faculty in college of nursing and featured with warm satisfying, trusting relationships with students and colleagues and concerned about the welfare of their students, they have difficulty managing everyday affairs and feel unable to change or improve surrounding context and lacks sense of control over external world. This may relate to the cultural and organizational diversity [12]. The faculty needs more action toward their workplace developments that would them in developing their environmental mastery and personal growth. As well this gives a clue why they have moderate autonomy which means moderately self-determined and independent and moderately able to resist the social pressures.

Furthermore, the faculty has purpose of life by which they have determined goals in life and a sense of directedness and he feels there is meaning to present and past life and has aim and objective for living, however; they have a sense of personal stagnation, lack sense of improvement over time, feels bored with life. This may gives a vision about the moderate self-acceptance and the low environmental mastery in the same study group. the

same result was discussed that the self acceptance and environmental acceptance may possess self fulfillment t that lead to successful life harmony [13]. Self acceptance possess a positive attitudes towards the self, acknowledges and accepts multiple aspects of self including good and bad qualities, feels positive about past life.

This study shows that there is a strong correlation between autonomy and personal growth. This explains that being highly self-determined, independent and able to resist social pressure. In addition, they will strongly increase the feeling of continuous development sees self as growing and expanding and open to new experience. Moreover, the study revealed that there is a moderate correlation among environmental mastery, personal growth and purpose in life. With that been said, whenever the faculty has high beam of a sense of mastery and competency in managing the environment and control the external activity [13].

All members of the nursing faculty can improve their psychological well being as well as initiatives geared towards bolstering their support and control. Additionally, psychological well-being can be fostered through positive peer interactions, induction programs, social engagements, support from lectures and personal tutors, environmental mastery, age, experience and self-acceptance. The faculty needs more action toward their workplace developments that engaging them in developing their environmental mastery and personal growth. Nursing educators can correspondingly be strengthened periodically by validating the teaching

outcomes and professional relationships through written comments and practical simulation of working experiences.

Limitations: The present study has limitations which must be acknowledged. First, self-report questionnaires were used for data collection with research assumption of trustworthiness of the respondents. Second, for the majority of the nursing workforce, English is the second language. Psychological dimensions concepts may have been difficult for faculty to interpret in concrete terms. Third, the tool was limited to address the cultural diversity among nurses.

ACKNOWLEDGEMENT

The authors acknowledge the support provided by the Deanship of Scientific Research at King Saud University, Through Research Center at college of Nursing.

REFERENCES

1. Carr, A., 2004. Positive psychology: The science of happiness and human strengths. Brunner-Routledge publications.
2. Bhandari, P., R. Bagga and D. Nandan, 2010. Levels of job satisfaction among healthcare providers in CGHS dispensaries. *Journal of Health Management*, 12(4): 403-422.
3. Al-Hussami, M., 2009. Predictors of nurses' commitment to health care organisations. *Australian Journal of Advanced Nursing*, The, 26(4): 36.
4. Al-Saleh, S.A., E.M. Al-Madi, N.S. Al-Angari, H.A. Al-Shehri and M.M. Shukri, 2010. Survey of perceived stress-inducing problems among dental students, Saudi Arabia. *The Saudi Dental Journal*, 22(2): 83-88.
5. Al-Lamki, L., 2010. Stress in the Medical Profession and its roots in Medical School. *Sultan Qaboos University Medical Journal*, 10(2): 156.
6. Al-Mutair, A.S., V. Plummer and B. Copnell, 2012. Family presence during resuscitation: a descriptive study of nurses' attitudes from two Saudi hospitals. *Nursing in Critical Care*, 17(2): 90-98.
7. Ratanasiripong, P., 2012. Mental Health of Muslim Nursing Students in Thailand. *ISRN nursing*.
8. Zakari, N.M., 2011. The Impact of Nurse Role Ambiguity and Role Conflict on Nursing Faculty Commitment in Saudi Arabia. *Life Science Journal*, 8(3): 179-86.
9. Zakari, N., 2012. The Influence of Academic Organizational Climate on Nursing Faculty Members' Commitment in Saudi Arabia. *Journal of Higher Education Theory & Practice*, 12(1).
10. Ryff, C., 1989. Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57: 1069-1081.
11. Seifert, T., 2005. The Ryff Scales of psychological well-being". Retrieved on 1st May, 2012 from <http://www.liberalarts.wabash.edu/ryff-scales/>
12. Telander and J. Kyle, 2012. An Exploratory Evaluation of a Culturally Specific Model of Psychological Well-Being for An African American Population" Dissertations Paper, pp: 397.
13. Garcia, D., O. Alnima and A. Kjell, 2014. The Affective profiles, psychological well-being and harmony: environmental mastery and self acceptance predict the sense of a harmonious life. *Peer J.*, volume10.7717 (21). peer J. 259.