

# Polish psychiatric nurses' psychosomatic health status in relation to sociodemographic variables

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## ABSTRACT

**Objective :** The primary goal of the research was to evaluate psychiatric nurses' psychosomatic health state using sociodemographic factors. **Materials & Methods.** 101 people employed as nurses participated in the study, which was carried out at the Mazovian Provincial Hospital in Żąbki. Every participant granted their free and informed consent to take part in the study. The bioethical committee gave the study its blessing. A GHQ-28 questionnaire that has been verified and standardised was used to evaluate the respondents' state of health. At  $p=0.05$ , the significance level was established.

**Results :** Participants' social dysfunction rose with age and length of employment at their current job ( $p<0.05$ ). Higher education levels and those in married partnerships showed significantly higher scores ( $p < 0.05$ ) in this domain. A substantial ( $p < 0.05$ ) increase in the severity of anxiety and insomnia was observed among those with secondary education, those in married relationships, and those with more than 30 years of total job experience, including more than 15 years in the current position. The respondents' lack of higher education was linked to the severity of their depressed symptoms. Age over 50 was the factor that had the biggest influence on somatic symptoms among the nurses surveyed ( $p < 0.05$ ).

**Conclusions :** The age of participants has a substantial

correlation with the severity of somatic symptoms, anxiety, sleeplessness, and functional difficulties. The severity of individuals' symptoms of anxiety and insomnia, their functional limitations, and their marital status are all significantly correlated. The degree of participants' education is significantly correlated with the severity of their social dysfunction, anxiety, sleeplessness, and depression symptoms.

**Keywords :** Mental Health; Psychiatric Nursing; GHQ-28

## INTRODUCTION

For every person to be truly well and be able to participate effectively in society, they must have good mental health. Everybody faces obstacles and challenging circumstances in their personal and professional lives. As a helping profession that also aims to prevent disease, nursing exposes nurses to physical and psychological stressors that might result in social, personal, and health issues [1]. People who are in good mental health are able to control their negative emotions, such as anger, despair, or discontent. In this regard, Galderisi and colleagues offer an updated definition of mental health, characterizing it as an ever-evolving internal equilibrium that permits people to live in harmony and uphold universal principles. The body and the mind have a dynamic interplay that helps to sustain internal harmony all the way through life [2]. Keyes posits that well-being is a composite of emotional, psychological, and social dimensions that include feelings of fulfillment and happiness as well as a positive outlook on responsibilities, other people, and social integration, all of which contribute to the experience of authentic happiness [3].

The present investigation examined the correlations between mental health and its constituent elements with respect to a range of socio-demographic factors, including gender, age, educational attainment, work experience, and length of employment. The primary aim of the research was to evaluate the mental health condition of psychiatric nurses concerning socio-demographic factors.

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## METHODS

The standardized GHQ-28 questionnaire, which evaluates general emotional stress and its intensity in four subscales, was used to determine the participants' state of health. Somatic symptoms, sadness, social dysfunction, anxiety, and sleeplessness are some of these subscales. Responses from the first and second columns of the questionnaire were given a value of 0, while responses from the third and fourth columns were given a value of 1. The results were computed using the dichotomous technique, the GHQ score scale. Furthermore, nominal variables were constructed for every subscale, with a score greater than 4 signifying the existence of the symptoms described by that subscale.

### Statistical Analysis

The R statistical environment version 3.6.0, SPSS, and MS Office 2019 were used for the computations. Parametric tests, like the Student's t-test or ANOVA, and non-parametric tests, like the Mann-Whitney U test or Kruskal-Wallis test, were used to assess quantitative data. The variable distribution determined which test to use, and the Shapiro-Wilk test was used to confirm the findings. A significant threshold of  $p=0.05$  was applied. To analyze nominal or ordinal variables, chi-square distribution-based tests were used. Continuity correction was applied to 2x2 tables, and Fisher's exact test—which was expanded for tables greater than 2x2—was utilized in situations when the chi-square test requirements were not satisfied.

## DISCUSSION

Mental wellness can be defined as the capacity to grow and become self-aware, which shows itself as a feeling of contentment, confidence, self-belief, and self-worth. Mental health affects how one feels, thinks, and behaves. Those in good mental health are better able to face challenges, enjoy life to the fullest, and make wise decisions. Additionally, it facilitates social and cultural norm adaptation. Using the GHQ-28 questionnaire, a validated research tool, this study sought to evaluate the psychosomatic health of Polish nurses employed in mental units. The study's findings showed that physical problems like anxiety, sleeplessness, and social dysfunction worsen with aging. In women, symptoms of dysfunction, sleeplessness, and anxiety also worsen with age. This result is corroborated by epidemiological studies McLean CP, et al.[4], which demonstrate that Women are twice as likely as males to develop different anxiety disorders

throughout their life, such as social phobia or specialized phobias, which might lead to dysfunction in the field under investigation.

The results of the study showed that work experience had a detrimental impact on social dysfunction and certain aspects of health, including anxiety and insomnia. Similar findings were made in a study involving 76 psychiatric nurses [5], in which tenure at work and professional experience were linked to several facets of mental health. The prevalence of mental health problems increases with length of employment. This is also supported by Kliszcz et al., who claim that women's health is negatively impacted by the fast-paced lifestyle, excessive responsibilities, and hormonal changes throughout time [6]. Professional experience and age positively linked with the prevalence of somatic symptoms, according to Gallagher et al. [7]. Sleep issues, worry, and sadness were more common among older nurses with longer tenure in the field physical signs and decreased social skills. The study by Bazazan et al. [8] found a correlation between exhaustion and mental health concerns, confirming the direct and indirect effects of life quality on mental health problems across all domains.

Using the GHQ-28 questionnaire, Lewko et al. [9] showed that shift work had a substantial impact on psychiatric nurses' symptoms of depression. The study found that married people had higher levels of social dysfunction and anxiety and sleeplessness symptoms than single people. Work-family conflict, marital communication, and shift workers' health are all correlated with mental health issues in shift workers, including somatic symptoms, anxiety and insomnia, social dysfunction, acute depression, and general health status, according to a study by Siemiginowska that used the Work-Family Influence Scale, Marital Communication Questionnaire, and GHQ-28 [10].

The education of the surveyed nurses was not found to be associated with their general health status in this study. Zdończyk's research, however, demonstrated that stable work environments and a higher educational attainment among nurses were linked to greater rates of health-promoting activities [11].

Researchers Andruszkiewicz et al. looked into how 364 nurses' health was affected by their workplace. They discovered that anxiety and sleep disorders were the most prevalent health problems by using the GHQ-28 questionnaire to find numerous significant associations between the work environment and health status [12]. According to Kliszcz et al. [6], nurses with the least amount of job experience tend to feel

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significant levels of anxiety. In summary, somatic symptoms such as anxiety, sleeplessness, and dysfunction worsen with age and professional experience among the nurses polled who work with patients who have mental problems.

## CONCLUSION

There was evidence of a correlation between the individuals' ages and the severity of their physical problems, anxiety, insomnia, and social dysfunction.

People in relationships showed noticeably greater levels of social dysfunction, anxiety, and insomnia. This finding may indicate that the surveyed persons experience higher levels of anxiety and insomnia as a result of combining their working and personal lives.

A substantially higher level of emotional weariness was displayed by those with a medium level of education. This may imply that more educated nurses are better equipped to handle challenging and stressful circumstances. Anger, sleeplessness, and dysfunction are more severe the longer nurses have worked as professionals and the longer they have worked at a particular location of employment. The respondents who had more work experience found it more difficult in these areas.

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