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Health-enhancing behaviours of nurses in Poland and their association with shift work and age

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ABSTRACT

Background: Deficiencies in terms of healthy lifestyle may exacerbate the negative characteristics of nursing work, especially those arising from shift work.

Aim: The purpose of the study was to examine the frequency of selected health-enhancing behaviours and abstinence from health-risk behaviours among Polish nurses considering their age and performance of shift work.

Methods: Cross-sectional survey; study conducted among 1107 nurses (female; average age: 43.2 ± 7.23 ; 73% working in shifts) who followed a specialty training programme. The data were collected in March–May 2016. An anonymous questionnaire with a Positive Health Behaviours Scale was used (4 subscales: nutrition, physical activity, relaxation and behaviours related to mental health, preventive behaviours). The impact of the age and shift work on the incidence of health-enhancing behaviours was assessed by linear regression.

Findings: Out of the 29 recommended health-enhancing behaviours only 3 were practised “always or almost always” by more than 50% of the respondents. The mean score in all subscales on a ten scale was 50 per 100. Most of the nurses (65–82%) abstained from health-risk behaviours. Shift work had a statistically significant negative impact in three domains: nutrition ($\beta_{\text{stand.}} = -0.065$), relaxation and behaviours related to mental health ($\beta_{\text{stand.}} = -0.194$) and preventive behaviours ($\beta_{\text{stand.}} = -0.092$).

Conclusions: Deficiencies in terms of a healthy lifestyle (greater in nurses who worked in shifts) influence the health of the nurses, their performance of professional duties and their capacity for modelling of health enhancing behaviours in patients. Health promotion programmes should be introduced at healthcare institutions.

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Problem

The relationship between health-enhancing behaviours and a shift work/age among Polish nurses.

What is already known

- The nursing profession entails many burdens and risks associated with the effects of many factors, including shift work.

- The results of a systematic literature review indicate that nurses are more likely to develop health problems and less likely to lead a healthy lifestyle.
- It was found that shift work has a negative impact on nurses' health and quality of life. It increases the risk obesity, sleeping problems, locomotor disorders, circulation disorders, incidence of accidents and injuries among nurses, and the likelihood of making mistakes in patient care. The profession makes leading a healthy lifestyle—following dietary guidelines, undertaking physical activity, avoiding tobacco and alcohol abuse—more difficult.

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What this paper adds

- Presentation of data concerning the lifestyle of nurses in the context of their age, type of work and actual working conditions, and the economic situation of this profession in Poland.
- Inclusion of five domains of a healthy lifestyle—nutrition, physical activity, relaxation and behaviours related to mental health, preventive behaviours, and abstinence from health risk behaviours—in the research.
- Focus on positive health behaviours as a resource for health; presentation of the Positive Health Behaviours Scale (PHBS)—a simple tool that can be easily used in health-promotion practices in hospitals and outpatient clinics.

1. Introduction

In Poland there are around 285,000 nurses, 98% of whom are women (CSIOZ, 2016). Their average age is 48.4 years and this has been steadily increasing in recent years. There is also a nursing shortage: Poland has 4.8 nurses per 1000 population (NIPiP, 2015), which places the country at the bottom of the OECD (2013) rankings. This impacts on the workload of the majority of nurses. According to the results of a study conducted by OZZPiP (2015), 95% of nurses are not capable of fulfilling all their professional duties within normal working hours, 53% are assigned extra duties (e.g. filing medical records, completing the referral form for diagnostic tests, rewriting medical orders, transporting patients and even cleaning) and one in four nurses was alone on duty in hospital at least once in the last three months. It is not compatible with applicable standards, but forced from deficiencies of the shortage of nursing staff. Many healthcare providers do not introduce employment standards for nurses and do not employ new staff.

Polish nurses have high position (ahead of physicians) in a hierarchy of professions ranked (CBOS, 2013). However, nurses' economic position is low: their average wage accounts for 84% of the national average (Hajec, 2015); their average salary is twice lower than physicians' salaries (OZZPiP, 2015). Nurses feel their salaries are low for the amount of work performed; they protest on that basis, and a number of younger nurses move abroad to work (NIPiP, 2015; Kozek, 2013). Many nurses take on additional jobs within their profession; they work in a number of healthcare centres in a variety of positions (Kozek, 2013), hence their working time is longer and workload and fatigue are greater.

The nursing profession entails a number of risks for health associated with the impact of biological, chemical, physical, ergonomic, and psychological factors, as well as factors related to work organisation and rhythm (Canadian, 2013; Jordan, Nowrouzi-Kia, Gohar, & Nowrouzi, 2015). Those who work in the nursing profession are at comparatively high risk of suffering a burnout (Adriaenssens, De Gucht, & Maes, 2015; Epp, 2012). The results of a systematic literature review indicate that nurses are more likely than the rest of the population to develop musculoskeletal disorders, breast cancer and tuberculosis, and to be exposed to blood borne pathogens (HIV, hepatitis B virus, hepatitis C virus, hepatitis A virus) (Fronreira & Ferrinho, 2011). The available results of research demonstrate that the level of risk factors among nurses is similar to or higher than in the general population (Schluter, Turner, Huntington, Bain, & McClure, 2011; Tucker, Harris, Pipe, & Stevens, 2010; van Dam, Li, Spiegelman, Franco, & Hu, 2008).

Major risks for nurses' health are related to shift work, including night shifts. Most nurses have to work in shifts. As a result, their bodies' circadian rhythms (the endogenous, roughly 24 h cycle in physiological processes, responding primarily to light and darkness in the environment) become disrupted. In effect, they suffer from sleep pattern disorders, sleep deprivation and poor quality of sleep,

sleepiness during the day and during night shifts. They are more likely to suffer from stress and fatigue and have difficulties balancing their work, family and social life (Caruso, 2014; Stavroula & Aditya, 2010). The results of many studies indicate that shift work can undermine the health and quality of life of nurses (Berger & Hobbs, 2005). It increases the risk of obesity, sleep disorders (including sleep apnoea), circulatory (cardiovascular) disorders and even breast cancer, as well as the incidence of accidents and injuries among nurses and the number of mistakes they make in patient care (Berger & Hobbs, 2005; Buss, 2012; Frost, Kolstad, & Bonde, 2009; Geiger-Brown et al., 2013; Jordan et al., 2015; Schernhammer et al., 2001; Syrocka, Gaworska-Krzemińska, & Barton, 2014).

Shift work makes it more difficult to lead a healthy lifestyle. The most comprehensive of the studies published so far, "The Nurses' Health Study" conducted in the United States on a population of registered nurses aged 30–55, demonstrated that risk factors associated with lifestyle are independent predictors for death in that professional group, and they are related to around 55% of recorded deaths (Sarna et al., 2008; van Dam et al., 2008). The lifestyle adopted by nurses is a key determinant of their health, as well as the quality of their work and patient safety. So far no one has conducted a large study in the Polish context that would assess nurses' attempts at a healthy lifestyle and the subject has not been examined in enough detail. This study is an attempt to fill the gap. Research into the lifestyles of nurses should be a starting point for planning actions in the area of health promotion designed to nurses.

The aim of this study was to analyse the frequency of selected health-enhancing behaviours and abstinence from health-risk behaviours among Polish nurses considering their age and performance of shift work.

2. Methods

2.1. Study design

The study had a cross-sectional design. The applied research tool was an original anonymous questionnaire divided into three sections:

1. Positive Health Behaviours Scale (PHBS) for adults. The scale included 29 statements concerned with selected health-enhancing behaviours in four domains (subscales): I. Nutrition, II. Physical activity, III. Relaxation and behaviours related to mental health, IV. Preventive behaviours (Table 1). The respondents specified the frequency of engaging in specific behaviours on a four-point scale: *always or almost always* (3 points), *often* (2 points), *sometimes* (1 point), *never or almost never* (0 points). The desirable choice was *always or almost always*. PHBS was originally designed and validated among Polish teachers. It had good properties with respect to internal consistency of measurement (Cronbach's alpha = 0.825) and good criterion validity (Woynarowska-Sołdan and Węziak-Białowolska, 2012). Good psychometric characteristics of the scale were confirmed by unpublished preliminary results of PHBS validation among Polish nurses. The results of the psychometric analysis of PHBS for reliability confirmed the high internal consistency of the entire scale (Cronbach's alpha reached 0.844) and specific subscales (0.623–0.761). The scale's criterion validity was validated on the basis of positive results of correlation and trend analysis.
2. Statements about abstinence from selected health-risk behaviours (abuse of alcohol, smoking, passive smoking, abuse of drugs not prescribed by a physician—painkillers, hypnotics and sedatives drugs). The statements have been formulated in such a way as to describe advisable, health-

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