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Original article

The impact of job demands, climate, and optimism on well-being and distress at work: What are the mediating effects of basic psychological need satisfaction?



Les effets des demandes au travail, du climat et de l'optimisme sur le bien-être et la détresse au travail : quels effets médiateurs de la satisfaction des besoins psychologiques fondamentaux ?

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ABSTRACT

Introduction. – Psychological health at work, a multidimensional concept grasped by the absence of negative states and by the presence of positive states, is here approximated in terms of distress and well-being.

Objective. – This study was aimed at examining the extent to which job demands, individual resources (optimism), and organizational resources (climate) are linked to well-being and distress at work. We looked at whether these links are mediated in satisfaction of the three basic psychological needs posited in self-determination theory (competence, relatedness, and autonomy).

Method. – The participants were 298 French elementary, middle, and high school teachers who were asked to answer a questionnaire. The data was analyzed using Hayes and Preacher's method for testing multiple mediations.

Results. – Satisfaction of the psychological needs for competence and relatedness fully mediated the links between job climate and psychological health at work (well-being and distress). Optimism turned out to be an important factor of health, not only because it had a strong impact on well-being and distress, but also because its effects were partially mediated by satisfaction of the need for competence.

Conclusion. – The present results confirm the relevance of the variables used to predict psychological health (particularly optimism). Job demands directly affected well-being and distress levels. The climate – by way of satisfaction of the need for competence and for relatedness – plays a critical role in matters of occupational health.

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R É S U M É

Introduction. – La santé psychologique au travail, concept multidimensionnel appréhendé par l'absence d'états négatifs et par la présence d'états positifs, est approchée ici en termes de détresse et de bien-être.

Objectifs. – Cette recherche vise à vérifier les liens entre, d'une part, des inducteurs organisationnels (demandes liées à l'emploi), ressources organisationnelles (climat de travail) et personnelles (optimisme) et, d'autre part, le bien-être et la détresse au travail. Cette étude examine si certains de ces liens sont médiatisés par la satisfaction de trois besoins fondamentaux (compétence, affiliation et autonomie) issus de la théorie de l'autodétermination.

Méthode. – Deux cent quatre-vingt-dix enseignants français d'écoles élémentaires, de collèges et de lycées ont rempli un questionnaire. Les données ont été analysées en recourant à la méthode de Hayes et Preacher afin de tester des médiations multiples.

Mots clés :

Santé psychologique
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Résultats. – La satisfaction des besoins fondamentaux (besoins de compétence et d'affiliation) médiatise complètement le lien entre climat et santé psychologique au travail (bien-être et détresse). L'optimisme est un facteur important de santé parce qu'il influence non seulement directement la détresse et le bien-être mais aussi au travers de la satisfaction du besoin de compétence.

Conclusion. – L'étude confirme la pertinence des variables (en particulier de l'optimisme) pour prédire la santé psychologique. La charge de travail affecte directement le bien-être et la détresse. Le climat – par l'intermédiaire des besoins de compétence et d'affiliation – joue un rôle majeur sur la santé au travail.

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1. Introduction

Seen as a multidimensional concept, psychological health can be grasped not only in terms of the absence of negative states but also by the presence of positive states (Achille, 2003a, 2003b; Keyes, 2005), as recommended by the World Health Organization (WHO) as early as 1946: "Health is defined as a state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity." The present study approaches this concept from two complementary angles: well-being and distress (WHO, 1946; Health Canada, 1996; Commission of the European Communities, 2004). To break away from a psychologizing perspective, one can represent psychological health at work as a dynamic system, emerging as an interlinked set of predictors, mediators, and outcomes. In terms of health predictors, the onset of psychological problems on the job cannot be ascribed to the individual's personal dispositions alone; such problems also arise from a deleterious job and work environment (Marchand, Demers, & Durand, 2005; Maslach, Schaufeli, & Leiter, 2001). This idea necessarily requires taking health predictors into account, whether organizational, psychosocial, or personal (Achille, 2003b; WHO, 1946, 2005).

The predictors of psychological health at work are multiple and varied, but a few pioneering studies (Blais, Hess, Bourbonnais, Saitonge, & Riddle, 1995; Lévesque, Blais, & Hess, 2004) found evidence of a link between psychological health and satisfaction of basic needs (Deci & Ryan, 2000, 2008). Links between life quality and need satisfaction were discovered in research based on the motivational model of burnout. In a study by Lévesque et al. (2004) on the motivational dynamics of burnout and well-being among African teachers, the authors demonstrated the merits of this two-dimensional measure and showed that non-self-determined motivation has an impact on burnout by inducing distress. Another series of studies found a link between engagement and motivation (Meyer, Becker, & Vandenberghe, 2004) and between engagement and performance (Greguras & Diefendorff, 2009). In this vein, we conducted the present study on teachers, a profession at risk for psychological health. Based on a multivariate previsionsal model of occupational health (Brunet, Savoie, & Boudrias, 2009), we set out to determine how psychological health at work is affected by job demands, organizational resources (job climate), individual resources (optimism), and mediators (basic need satisfaction).

The teaching profession is known to be a high-risk occupation in terms of stress (Janot-Bergugnat & Rasclé, 2008; Travers & Cooper, 1996), burnout (Bauer et al., 2006; Chang, 2009; Truchot, 2015; Wawrzyniak & Lassarre, 1999), and emotional disorders (Chang, 2009; Ponnelle, 2008). Various reasons why teachers are subjected to psychological health problems have been identified (Bauer et al., 2006; Travers & Cooper, 1996; Vandenberghe & Huberman, 1999), including a heavy workload (overly large classes, student discourteousness and violence, parental demands, inspections, work evaluations), insufficient resources (lack of recognition for the profession, lack of materials, unsuitable work schedules, elimination of auxiliary staff to assist teachers), a poor job climate, and tensions among coworkers.

A review of the literature indicates that, in reality, very few studies have measured health from two angles. The research focuses either on stress, or burnout, or well-being, but rarely assesses both the positive and the negative dimensions of health. Our first objective, then, was to study psychological health, following the recommendations of the WHO, by including both positive (well-being) and negative (distress) indicators. Our second objective was to identify the predictors of a person's state of psychological health. To do this, we will try to determine how resources and demands are linked to needs and psychological health (well-being and distress). Next, we wanted to find out whether need satisfaction plays a central role as a mediator of psychological health, and then model the conditions that cause mental health to decline or improve. Finally, by linking psychological health and satisfaction (or non-satisfaction) of each of the basic psychological needs (BPNS) described in self-determination theory (Deci & Ryan, 1985), we propose some avenues for addressing the issue of occupational risks and their prevention.

The predictive model of psychological health used here (Brunet et al., 2009) is based on an operationalization of the definition of psychological health at work that incorporates the ability of individuals to satisfy their basic psychological needs (BPNS) and thereby achieve well-being, thanks to organizational, psychosocial, and personal resources.

2. Presentation of the Psychological Health Model

The purpose of the present study is to predict well-being and distress at work, based on the adapted model shown in Fig. 1.

In line with a two-dimensional view of psychological health at work, we look at whether satisfaction of the three basic needs plays a mediating role in the effects of job demands and climate- and optimism-related resources. Among the factors influencing the psychological health dimensions, BPN satisfaction – although seldom studied – provides a promising avenue of research. The rationale for measuring psychological health from both the positive and negative angles is drawn from studies showing that it has two major axes (Barbier, Peters, & Hansez, 2009; Diener, 1994; Karademas, 2007; Labelle et al., 2001), one pertaining to negative symptoms (distress) and one pertaining to positive signs (well-being). Several authors (Keyes, 2003; Massé et al., 1998b) have pointed out the limitations of the numerous studies on psychological health at work that look mainly at distress and its many derivatives (stress, anxiety, burnout). In Diener's (1994) model, the two axes are distinct but contribute together to form a higher-level variable: psychological health (Boudrias et al., 2014).

3. Criteria of psychological health at work: distress and well-being on the job

Today, well-being is widely acknowledged as a positive indicator of health (Diener, 1994; Massé et al., 1998a, 1998c). In an eudaimonic perspective, well-being is approached in terms of individual motivation and the search for optimal functioning (Ryan &

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