

Level of psychological resilience of nurses in the multi-services clinic in Rouissat

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Abstract: The current study aims to identify the level of psychological resilience of nurses working in the multi-services clinic in Rouissat. It was conducted on a sample of 30 (male and female) nurses in order to achieve the study's objectives; we adopted the the Connor-Davidson Resilience Scale (20003) translated to Arabic by el kalali .As we followed the exploratory descriptive approach which is mostly convenient in such studies..

The results of the study found a high level of psychological resilience among sample members, with no statistically significant differences in sample members' scores according to the following variables: sex and years of experience.

Keywords: psychological résilience; nurses; multi-services clinic.

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1 - Introduction

Today's day-to-day life is characterized by the diversity and acceleration of events that may be subject to various and different events and triggers that can be controlled and may be exceeded by many considerations. Medical staff and health workers are among the workers who face many events and pressures shaped by the nature of the profession and its handling with various conditions and human subjects. Workers in this sector are the main pillar of any effective health system in society. They guarantee that everybody exercise the right of healthcare as they have, as workers, the right to work in healthy conditions to maintain their health. On this basis, the mental health and well-being which lead the individual to psychological, social and job satisfaction and harmony of the employees in the sector should be a high priority as this helps to improve their performance as well as their job satisfaction.

Working in this sector is considered among the challenging tasks because of its characteristics and the associated duties fallen on nurses as sense of responsibility and burden of overwork. Each sector worker's ability to improve and upgrade their production varies on the basis of many features and characteristics, including psychological resilience. It is the fundamental aspect of mental health through which an individual can cope with pressures, problems and difficult conditions while maintaining a level of balance in life. It has the power to sense the purpose, ability to adapt and adapt positively to difficulties and adversity

Psychological resilience is one of the concepts that positive psychology has incorporated that indicates an individual's sources of strength, which he or she can highlight and employ when exposed to difficult situations. They are concepts with positive contents that are supported over a wide range of environmental pressures.

The nursing profession is one of the most demanding tasks and is highly human responsibility, which make the worker lives under great pressure and has an indispensable place in all circumstances. The nurse is a fundamental element of the medical staff, where he has significant tasks and responsibilities in the provision of primary nursing care .

Among the Studies on psychological resilience : Ismail's study (2017), which aimed to identify the level of psychological resilience and high alertness as well as the relationship between them. And predictability of mental alertness through psychological resilience . (Basionie, 532,2019)

The characteristic of psychological resilience is due to an individual's dynamic, which is supported by positive thinking, dialogue and good interaction and also , it is an important aspect of personality formation and a method that enables the individual to fit in. Because the nursing profession is one of the hardships whose owner needs to be able to withstand its difficulties and adapt to its pressures, the current study answers the question: what level of psychological resilience do the nurses working in the multi-services clinic in Rouissat ?

Study questions:

- Are there any statistically significant differences between sample members' degrees of psychological resilience attributable to the sex variable ?
- Are there statistically significant differences between sample members' degrees of psychological resilience attributable to years of experience ?

Study hypotheses: To examine this study we assumed:

- The level of psychological resilience of nurses working in the multi-services clinic is high.

- There are no statistically significant differences between sample members' scores in the level of psychological resilience attributable to the sex variable.
- There are no statistically significant differences in the level of psychological resilience of the sample personnel attributable to the variable experience

The importance of the study: The objectives of the study are to :

- Defining the concept of psychological resilience based on all the definitions presented to it.
 - Identify the level of psychological resilience of the sample's members.
- The importance of the study shows the importance of enriching the knowledge of researchers and health professionals and identifying the most important characteristics and features of this category, which can help to create programs that help to improve performance in this sector

1.1- First Sub-title

A:Psychological resilience: Psychological resilience is operationally defined as the degree to which the examinee is given in the psychological resilience measure used in the study, which demonstrates the examinee's ability to exhibit positive adaptive behaviors while facing work pressures and difficulties.

B: Nurse: A worker who has received a nursing profession formation of not less than three years at the Higher Institute of paramedical Training after obtaining a baccalaureate certificate is employed by a health sector institution.

C: Multi-services clinic: Is a micro-health unit that lines within its classification after the major unit which is the hospital. It is operated by the Public Corporation for Neighbourhood Health. It also plays the same role as hospitals except for medical hospitalization

1.2- Theoretical framework

Psychological resilience concept and components:

With the emergence of positive psychology that is interested in studying and developing one's personality, positive features have emerged many concepts and terminology, including what is known as psychological resilience.

A:History of psychological resilience: The history speaking, Garmezy is the first to refer to psychological resilience in 1973 in his research and the use of what is known as epidemiology, which studies who develops the disease than others and why to detect the risk factors and protective factors that help define psychological resilience. (Abu Halawa, 25:2018)

The origin of the term psychological resilience (Résilience) is the Latin term Salive to return to the equal state. It also means in English (plasticity, softness and severity of resistance) which in its meaning refers to a person's ability to succeed in dealing with stressful conditions in life. (Hashemiya, 10:2017)

B: Definition of psychological resilience : refers to the tendency to remain stable and maintain calm and self-balance in pressure situations and the ability to comply effectively and positive confrontation. (Abu Halawa, 13:2018)

Shaqoura (2012) defines it as the ability to effectively confront and respond to pressures rationally as well as to associate relations with others with all the cordial and respect (Hashemiya, 10:2017)

Raima Afifi Swed (2012) points out that psychological resilience is a concept that indicates coping, which shows a similar meaning to that of mental health (Abu Halawa 19:2018)

Therefore, psychological resilience is a psychological formation depends not only on the ability to cope, but also on the ability to employ it and its social, personal and even cultural sources to cope with pressures, achieve compatibility and maintain balance

C: Components of psychological resilience: Psychological resilience key components are: The recovery component refers to overcoming the crisis and returning to normal functional level and the component of psychological immunity or immunization means confronting the compressor event and conditions positively without subsequent negative effects. (Abu Halawa, 20:2018)

In this context, Derek added that psychological resilience consists of adaptation that helps to respond flexibly to the challenges and personal vision of what one believes, and clarity of the desired idea of implementation.

A regulatory framework that helps to counter chaotic presence and uncontrolled events. In a personal interaction, there is a high degree of self-awareness and social self-management. (Hashemiya, 14:2017)

Resilience is a preventive factor for mental health: Hart, Blenco and Thomas state that psychological resilience has six adaptive qualities that promote an individual's mental health, centred on mutual social relationships, the ability to be independent, persistent and diligent, as well as the ability to manage negative strong feelings all raise the level of problem-solving skills. The ability to think without impulsiveness as a sixth quality. (Hashemiya, 18:2017)

D: Factors associated with resilience:

Werner (1995) distinguishes between three contexts of prevention associated with psychological resilience:

- Personal characteristics, including positive self-concept
 - The family and its ties promote the warmth of relationships and unconditional positive acceptance.
 - Society and its sources of support and support, as well as positive communication with peers.
- as well as an individual's ability to develop flexible plans, self-confidence, a positive self-image, communication skills and the ability to manage and tame strong impulses and impulses (Abu Halawa. 2018. p. 28)

E; Building psychological resilience: The American Psychological Society has identified some factors contributing to building psychological resilience, including:

1. Establish positive relationships and ties with family and friends.
2. Avoid seeing crises as unresolved problems.
3. Move towards achieving goals.
4. Accepts circumstances that cannot be changed.
5. Take decisive actions in difficult situations.
6. Looking forward to opportunities for self-exploration after conflict with loss.
7. Develop self-confidence. (Abu Halawah, 2018, p 31)

Features of Psychological Resilience : Many researchers have pointed special features of psychological resilience , including :

- The ability to establish mutual social relations is an element of giving and receiving emotional support, contributing to the development of a sense of belonging as well as being a source of sense of reassurance and psychological security.
- Feeling independent and self-reliant.
- Ability to withstand ambiguity and positive ability to manage, control and regulate emotions and feelings (Abu Halawa, 2018, p. 09)

The importance of psychological resilience : psychological resilience has an importance that we can present it as follows: it helps mental health, which is a relatively permanent condition in which the individual is compatible (psychologically, emotionally and socially) with himself and his environment. It also drives a positive view of life where the level of psychological resilience determines how positive an individual is in dealing with what he is about and also helps to continuously keep giving sheikh.

Definition of nurse: is the worker who receives the scientific knowledge and competencies that qualify him to provide treatments and enable him to work in various health units and participate in various interventions in the field of preventive and health education (Boutabal, Qurboua, 36.2017)

He is, thus, an individual who is allowed to provide nursing services aimed at the establishment of health and care of the patient whether he has completed his nursing studies at a middle school, university or training in the provision of nursing services while working in hospitals. (Abu al-Omrin. 7.2008)

role and functions of the nurse: nurse has many roles and tasks, including :

- The healing or therapeutic role where the nurse uses methods that help in the success of natural healing.
- The role of care where the patient supports through his trends and actions that show his interest in the patient's well-being and acceptance of him as a human being.
- The role of communication includes gathering and communicating information to others in clarifying the patient's situation to parents and the patient. They provide information and promote behavioral change.
and work to provide a suitable environment that enables the patient to learn and identify the patient's needs.
- Protection where it works to protect the patient from injuries, complications and sterilization of substances and provide people with information about infectious diseases and methods of infection. (Boutabal, Qarboua, 35.2017)

2- Method and Tools:

Study Procedures:

Study approach : In this study, we adopt the descriptive approach, which is the suitable approach for such studies, which aims to describe the reality of phenomena as they are. The descriptive approach is defined as a form of systematic analysis and interpretation of the phenomenon which is being studied, its conception as it is and its subjected to a careful study. (Abdussalam Mohammed, 163:2020)

Study tool: This study relied on Connor and Davidson's psychological resilience scale (2003). An scale composed of 25 items divided into 5 core dimensions which are (personal efficiency, positive self-acceptance and successful social relations resist negative impacts, control and believe in faith). The scale is based on a 5-point Likert scale ranging from (never applicable, always applicable) where an answer never applies to a single score and an answer always applies to five degrees. High degree indicates high psychological resilience. The scale has a high degree of reliability of the Alpha cronbach coefficient (0.84) and an internal consistency of between (0.32-0.94). (Alkali Mohammed, 2:2022)

Boundaries of the study:

Time boundaries: This study took place between 18/25 September 2023

Place boundaries: The study was applied in multi-services clinic Rouissat .

Human boundaries: The human boundaries of the study were a sample represented by 30 nurses from workers of the multi-services clinic in Rouissat whom were selected in a random manner.

3- Results and Discussion

Scale's reliability and consistency:

Scale's reliability and consistency was confirmed as follows :

The table above shows Cronbach alpha reliability coefficient is 0.607, which is an acceptable value, showing that the scale has an acceptable constant ratio to correlate factors with each other.

Table No.(03) pairwise comparison reliability;

The results of the previous table show that there are differences between the arithmetic average of the grades of the sample individuals in the higher category of 104.700 and in the lower category of 86.700 and that the value of "T" 7,535, which is a significant function at significance level , therefore, the scale is valide because it differentiate between upper value and lower value.

Discussion of the study's result hypotheses:

Discussion of the results of the first hypothesis: the first hypothesis states the level of psychological resilience of nurses working in the multi-services clinic is high.

Table No. (4) which indicates the arithmetic average for sample's members grades : It is observed from the results of the table that the sample's the arithmetic average of 95.57 is greater than the hypothetical average of the scale which is 65, and the T value of the difference indicator (9.031) is statistically significant at the significance level. This indicates that the level of psychological resilience of sample members is high, and thus the first hypothesis of the study is validated, which states the presence of a high level of psychological resilience for doctors and nurses working in the multi-services clinic in Rouissat

Because of the high the level of psychological resilience of the sample's members, which indicates that they have the ability to re-create new strategies to adapt to emerging and difficult situations and demonstrate their ability to evolve normally

This shows that sample individuals have the ability to recreate new strategies to adapt to emerging situations and their ability to develop and recover, which are two components of psychological resilience which all help to maintain a high level of adaptation. As It also helps to modify and mitigate the impact of stress events on the individual.

Discussion of the results of the second hypothesis: This states that; there are no statistically significant differences, between sample members' scores, at the level of psychological resilience attributable to the sex variable.

Table No. (05) "T" Value for Gender Differentials;

The table presented above shows the results of the following test: the arithmetic average of the male sex sample 98.11 with a standard deviation estimated at 9,619 and the value of "T"- 0.094. It is non-significant versus the arithmetic average of the female sex sample at 98.40 and a standard deviation estimated at 9,073 and the value of "T"- 0.092. The results of the current study and the study (Yahya omar Shaqoura 2012), which found differences in psychological resilience depending on gender, as well as the study (Yahya Samia, 2013) which found differences in psychological resilience by sex for males (Yahya, 2013:290)

The results of this study also agreed with the statement of Basil Ashour study (2017) which declared that there are no statistically significant differences between the degrees of the sample members in the psychological resilience attributable to the sex variable, which confirms that both sexes fall under the same influence in the working environment, shared responsibility, adaptation to daily events and the ability to solve problems and make decisions that increase the quality of the health services. (Ashour. 67.2017)

Discussion of the results of the third hypothesis: This states that there are no statistically significant differences in the psychological resilience of sample individuals attributable to the variable years of experience

Table No. (06) ANOVA analysis ;

The results of the examination of this hypothesis came from the results of the ANOVA analysis, as follows. The value of "T" 0,246 is greater than 0.05.

Therefore, there are no differences. These are identical to the results of the Basil Ashour study (2017), which states that there are no statistically significant differences between the averages of the sample's psychological resilience scores. (Ashour.69.2017).

4- Conclusion

The results of the study showed that the level of psychological resilience is high, helping nurses adapt to compressed working conditions and its increasing burden, and this shows their high level of awareness of responsibility And there is no role for the sex factor in having a high level of psychological flexibility and showing us that the drivers of human behavior in the sample are clear in the direction of seeking to meet the unknown challenges and work to create new strategies for adaptation, The results also showed that there are no differences in the level of psychological resilience among members of the sample attributable to years of experience, which confirms that accountability for the direction and ethics of the profession does not depend on the number of years and also governs the ability to withstand difficulties and cope with the pressures of the profession.

Appendix of Tables and Figures:

Table (1) : Sample Characteristics

Sample	Females	males	Less than 10 years	More than 10 years
30	11	19	07	23

Table (02) Cronbach alpha reliability coefficient

Items	Cronbach alpha Reliability coefficient
25	0,607

Table No.(03) pairwise comparison reliability

Data	numbers	Arithmetic Average	Standard Deviation	T-Value	Degrees of Freedom	Significance level
per	15	104.,700	7,702	7,535	28	0,000
Lower	15	86.,700	6,970			

Table No. (4) which indicates the arithmetic average for sample's members grades

Sample N =30	Hypothetical Average	Sample average	Degree of Freedom	Value "T"	Significance level
Psychological resilience	65	95,57	29	9,031	0,000

Table (05) "T" Value for Gender Differentials

Features values	Sample	Arithmetic Average	Standard Deviation	Value T
Males	19	,9811	9,619	-0,094
Females	11	98,40	9,073	-0,092

Table (06) ANOVA analysis

	Sum of squares	Mean squares	Significance
Between Groups	237,795 2170,505	118,897 80,389	0,246

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