

The psychological pressures of married nurses working in public hospitals

الضغوط النفسية لدى الممرضات المتزوجات العاملات بالمستشفيات العمومية

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Abstract:

The current study aims at revealing the level of psychological pressures among married nurses working in public hospitals, where women represent the greatest percentage of nursing work compared to men, and as married women have many responsibilities toward their husbands, sons and various domestic work. Let alone add to this woman the double responsibility of working in the nursing profession, which needs a high level of psychological and physical health, which makes her work in the best possible way requires meeting her needs in different aspects, the most important of which is the psychological aspect. The work of women married to the nursing profession is subject to psychological pressures in their different family, professional and professional dimensions. This is directly reflected in the quality or unquality of their work and the lack of psychological pressure leads to the quality of performance and performance in the field of nursing leads to the quality of the public health of individuals and communities as the health system seeks.

Keywords: Married nurses; Nurses; Psychological pressures; Working women.

ملخص:

هدفت الدراسة الحالية إلى الكشف عن مستوى الضغوط النفسية لدى الممرضات المتزوجات العاملات بالمستشفيات العمومية، حيث تمثل المرأة النسبة الأكبر في العمل بمهنة التمريض مقارنة بالرجل، وباعتبار المرأة المتزوجة كثيرة المسؤوليات تجاه زوجها و أبنائها و أشغالها المنزلية المتعددة، ناهيك أن تضاف إلى هذه المرأة مسؤولية مضاعفة وهي مسؤولية العمل في مهنة التمريض التي تحتاج إلى مستوى عالي من الصحة النفسية والجسمية الأمر الذي يجعل من عملها في أجود صورة ممكنة يتطلب تلبية احتياجاتها في مختلف الجوانب، والتي من أهمها الجانب النفسي، فعمل المرأة المتزوجة بمهنة التمريض يعرضها للضغوط النفسية بأبعادها المختلفة الأسرية و المهنية و...، وهو ما ينعكس بشكل مباشر على جودة أو عدم جودة عملها، فقلة الضغوط النفسية تؤدي إلى جودة الأداء وجودة الأداء في ميدان التمريض تؤدي إلى جودة الصحة العمومية للأفراد والمجتمعات وهو ما تسعى إليه المنظومة الصحية..

الكلمات المفتاحية: الضغوط النفسية؛ الممرضات؛ الممرضات المتزوجات؛ المرأة العاملة.

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1. INTRODUCTION

Social change is the product of time change. What was not present in society at a time of great time has become highly in the present era. Women's work has been confined to a small group of women in previous times, but rapid changes, openness to the world, economic conditions and other reasons have made women in the present era move strongly to work in all fields, especially the health field, considering women as professional health-related, especially in the field of nursing. Women have succeeded in the nursing profession throughout the ages because of their giving, swearing, mercy, and other characteristics that support and increase the quality of nursing, but working women are not independent of externalities, i.e. they are exposed to many daily events that make them less able to perform their professional duties.

Married women are more responsible than single working women, especially in the presence of children, which makes them more vulnerable to daily pressures. This calls for satisfying the psychological needs of married nurses, which makes the search for the most important causes of the suffering of married nurses from the psychological side.

Occupational pressures are among the most serious problems experienced by nurses, because of their sudden situations, sense of responsibility toward patients, and excessive workloads, which expose nurses to many psychological and health problems resulting from their feeling of psychological pressures in work. This has prompted us to look for the level of psychological pressure in a sample of married nurses working in the hospital institutions of the Christian state.

Work is the first source of meeting the material needs of individuals, and women have been actively involved in working with men since ancient times. But what has been new about women's work in modern times is that they have become more restricted to their freedom, since women can no longer work as much as they can and must work as they have been assigned, and they have no choice to offer or delay work on one another. More complex family tasks day after day, In the end of the year, the government of the United States and the United States, which has been in power since the end of the year, has been in the process of increasing the number of women in the world In the midst of all these duties, we can ignore married working women, who have the burden of cleaning, cooking and arranging the home... here women's work and the quality of this work have the greatest impact on maintaining their psychological balance and stability of their psychological health. Her work as a sewing profession or a cooking profession does not put her in front of her work in the nursing profession, as she deals with material things in the first and second, as she deals with a person who may be mistaken in her work, which may endanger his life. This makes work for married nurses a major psychological stress factor, as many studies have emphasized.

The various reports from the scientific heritage in the field of administration have indicated that professionals from different professions are more subject to labor pressures, and that among those professionals are nursing and education professionals, which are characterized by high levels of job pressures. This was supported by many studies, such as Ahmed Mohamed Al-Dasouki (1998), Raja Mariam (2008), Zuhair Al-Sabbagh (1999) and other researchers, who generally emphasized that there is a high level of pressure in these two functions, and that pressures affect both sexes. The life of working women, including the nurse and the school, requires a multiple and interconnected

network of pressures, as they play more than one role, as they work, as well as the commitment and discipline required by the labor law, while at the same time having family roles that they cannot step aside as wives and mothers of children. And the Lord of Pitt, all these roles are surrounded by you of tasks and responsibilities. (Mansouri and Schweimr, 2013, p.90).

From here, our study revealed the level of psychological pressures of married nurses working in the public hospitals of M'sila, answering the following question:

What is the level of psychological pressures for married nurses working in the public hospitals of M'sila?

To answer this question, the following hypothesis is raised:

The level of psychological stress in married nurses is high.

This study is also of the utmost importance in explaining and revealing the level of psychological pressures of married nurses working in public hospitals.

1. General framework of study:

1.1.Theory Background:

The subject of psychological pressures has been of great importance across different cultures, as the research interest of it shows through the huge amount of studies in which researchers handled this variable of different segments of society, and among the samples that were studied for their psychological pressures is the sample of nurses. This made us mention some of these studies that serve our research subject, starting with Ahmed's study and his colleagues (1994), which aims at identifying the psychological pressures experienced by the nurses working in the intensive care units, especially the main factors causing the work pressure. In addition to determining the psychological effects of working pressure on nurses working in the intensive care units in Al-Hussein Medical City in Jordan, the research sample consisted of three groups of nurses, as the first group included fifty nurses and nurses working in the intensive clinic units. The second group dealt with twenty nurses working in the industrial college unit, while the third group focused on fifty nurses working in the internal and surgical units. This study concluded that the patients of the first group face more labor pressures than the other two groups, and that their main sources of pressure are the workload, the noise of medical equipment, and the patient's death, and the levels of labor pressure in the first and third groups are higher than the second group, and that the main source of work pressure is lack of nursing experiences. As for the psychological effects, the study showed that the nurses in the first group were more worried, sad and gloomier than the other two groups. (Muslim, 2010, p. 57)

Jasman Benz conducted a study aimed at revealing a relationship between the burden of low-income working mothers and their interactions with their young children. 61 mothers were asked to report on their work size, mood and interaction with pre-school children every day for two weeks; Low-income mothers reported significant fluctuations in the workload day by day, and the results showed an indirect negative pattern of work for family members, with a higher negative mood, fatigue and a lower positive mood for the mother; Thus, the negative effects between mother and child increase, and the mood and pressure of younger mothers vary in terms of experience, as younger mothers increase their negative mood, because they still learn how to balance work with family needs.

A study was also carried out (1997) to compare married female workers with high-level social workers with married women workers with low-level social support in the face of stressful life events and mental disorders, and the study sample consisted of a pilot group of 50 married women workers supported by social support, whether from the family or the working group. The researcher used the Social Support Questionnaire, the lifestyle questionnaire, the disease checklist, and the results resulted in statistically significant differences between the two groups in coping with life events and psychiatric disorders for socially supported married women. (NBHN, 2014, p. 60, 62, 63).

1.2. definition of psychological pressure:

In the absence of a definition of the concept of psychological pressure, we cannot in any way go into the details of its subjects, but the definition of this concept and other psychological concepts is very difficult for the researcher, as the concept of psychological pressure is considered a hypothetical something and not a tangible, abstract, measurable thing. Rather, it infer psychological pressure through specific behavioral responses (a specific response to a set of pressure -related items).

Moreover, the concept of pressure is used in many fields other than psychology and social sciences, such as medicine, physics, and others.

The American Society of Psychiatry defined stressful life events as overburdened by an individual's experience of a chronic illness, loss of a job, a severe struggle to perform his or her various roles, or acute problems related to his or her marital family life. The individual's inability to cope with such events is a state of confusion. (Ghanem, 2008, p. 343)

According to al-Rachidi, psychological pressure is a complex and multidimensional phenomenon (social, economic, professional ...) thus, scientists did not agree on a specific definition that could reflect the qualitative and quantitative aspects of psychological pressures. (Al-Rachidi, 1999, p. 15)

1.3. Linguistic definition of psychological pressure:

The word pressure has several meanings in the Arabic language, so it is called pressured pressure, meaning immersing it into something like a wall or the like. Speech pressure is said if it exaggerates its abbreviation and brevity, so that it abandons the details, and the conjugations of the word are compressive, i.e. when one crowds the other, and each one narrows the other end.

In French, the old French word "Stress" is derived from the word "dresse", which means suffocation, distress or injustice. (Boumjan, 2016, p. 38)

1.4. Psychological concept of pressure:

According to the Encyclopedia of Psychology, the expression " Psychological pressure or overburden " is used to recall the many difficulties that an individual cannot face (life-stressful events that also claim to be vital events) and the means he has to manage these problems. (Pumjan, 2016, p. 39)

The Psychology and Psychiatric Analysis Dictionary defines psychological pressures as "the presence of external factors that pressure the individual either in his entirety or in part and to the extent that he has a sense of tension. When the intensity increases, the individual may lose his ability to balance and change his behavior pattern to a new one and have effects on the individual's

physical and psychological apparatus." (Sabban, 2003, p. 38)

2. Some concepts related to pressure:

2.1. Stressors:

The concept of compressors refers to the factors or stimuli that provoke the pressure response of an organic object and cause changes in its physical and psychological side, these changes are called pressure response.

Therefore, the pressure refers to events, stimuli, and circumstances, and all that can change the psychological and physical condition of the individual, and these pressures may be negative or positive.

The pressure is the combination of changes that occur at the psychological and physical level of the individual, and therefore pressure can be said to reflect the causes or events to which the individual is exposed. Pressure expresses the result and refers to the responses of individuals to the pressures. (Hussein and Hussein, 2006, pp. 23-27)

2.2. Frustration: It is any psychological motive or activity of the individual that is active and persistent in seeking gratification and increasing the desire for ambition. Whether this impulse is innate or acquired from the environment in which we live, consciously or unconsciously, the internal balance of any of us must follow this impulse and try to satisfy it, and when none of us can satisfy the impulse directly, it results in frustration. (Abou Delou, 2009, p. 183)

Frustration is, therefore, the emotional or motivational situation that an individual feels when confronted with a hindrance or obstacle to satisfying his or her motives, or achieving certain goals that he wishes to achieve.

Frustration may be caused by the characteristics of the individual himself, and may be caused by conditions related to the environment in which he lives, leading to the search for a way out of this situation or at least to alleviate it. If the individual does not succeed in removing this frustration, it will become psychological pressures of an exciting and influential nature on the individual's behavior. Pressure can result from frustration and conflicts that an individual is exposed to in his life, and this frustration may be symptomatic of pressure. (Boumjan, 2016, p. 39).

2.3. Conflict: The conflict was defined as a situation in which an individual could not please two stimuli together, and each of them has it. (Obaid, 2008, p. 171)

Levin divided the conflict into three simple forms, with a fourth subform added as follows:

2.3.1. Feats Feets Conflict: This type of conflict arises between two objectives that are incompatible with each other, whether they can be achieved together and both are positively assessed by the individual, and this conflict cannot be confronted and overcome by choosing one of the two themes, without any negative effects mentioned as a result of leaving the other matter. (Radwan, 2009, p. 222)

2.3.2. The conflict of paradoxical tendencies multiplier: It is not an independent form of conflict, but one of the three above-mentioned forms of conflict, in which additional force is added to one side of the conflict that enhances the possibility of one side and reduces reluctance or vice versa. (Radwan, 2009, p. 224)

2.4. Anxiety: It is a psychological consequence of individual exposure to pressure and a lack of satisfaction of needs, and concern is different from pressure, pressure is a direct cause of anxiety,

while pressure has two sides, one negative and the other positive. Anxiety is the negative side only.(Al-Serafy, 2008,p. 47)

2.5. Strain: It means the inability of the individual to bear or face the pressures he faces, that is, it is a state of loss of all the forces that the individual possesses, and Strain differs from stress in that stress is considered one of the physiological consequences of stress, where stress arises from the individual only, while stress arises from the environment and The work and the individual in itself. While stress has two sides, one negative and the other positive, Strain represents only the negative side (Al-Serafy, 2008, pg. 49).

2.6. Psychological Combustion: Lazar and Sovolkman (1984) see that occupational pressures occur when the demands of work are arduous and exhausting, and exceed the sources of compatibility of the individual, that is, they arise from the imbalance between the demands of work and the ability of the worker to respond to them, and that the combustion represents the final stage, and the individual is unable to adapt to Work demands. And that this combustion appears in several different physical, emotional, motivational and behavioral symptoms.(Hussein and Hussein. 2006, p. 28)

3. Components of psychological pressure: pressure has three interrelated components:

3.1. Stimuli (stressful events): They are the forces that initiate the overburden state, that is, they are all situational requirements that represent a threat to the individual. The stimuli may be internal (conflict) or external (loss of a loved one).

3.2. Evaluation: the individual's awareness and assessment of these stressful events in terms of their nature, dynamics, effects, and the extent of their ability to deal with them, contain them and control them .

3.3. Response: It is the psychological and physical reactions that the individual makes to the threatening events. (Jabali, 2012, p. 66)

4. Types of psychological pressure:

Psychological pressure varies according to the multiplicity of schools of psychology, and the specialization of psychologists, and these are some of the types:

Al-Khatib "2003" indicates that there are several types, including:

4.1. Acute pressures: results in responses that are so strong, that they exceed the individual's ability to resist, and indicate the need for intervention to provide assistance.

4.2. Non-acute pressures: results in slight responses with a range of stress signs and symptoms, which are easy to notice.

4.3. Late pressures: they do not always appear during the occurrence of the event, but appear after a while.

4.4. Post-traumatic pressures: resulting from violent, severe and high incidents, which have long-term effects on the organism .

These types can be explained as follows:

Acute pressures, they mean those events that defense mechanisms are unable to establish, while non-acute stresses can be called "transient" such as the daily events experienced by the individual, while delayed pressures, the response is delayed until the individual realizes that that situation is stressful, while Post-traumatic stressors result from a violent event as mentioned above, such as the

death of a loved one, or an earthquake (Daily, 2013, pp. 56, 55)

As mentioned, psychological pressure is divided into:

1.Positive pressures: They are challenges that benefit the growth and development of the individual, and it is a degree of pressure or tension that pushes an individual to work consecutively, which makes him improve overall performance and achieve his goals .

It is considered a health pressure, leads to an improvement in the quality of life such as the burden of a new position or promotion to a higher degree.

2.Negative pressures: The exposure of the individual to difficult stressful situations has a negative impact, which makes the individual unable to achieve his goals and incapable of interacting with others, which negatively affects his physical and psychological condition. And it has a negative impact that exceeds the individual's ability to adapt, and leads to physical and mood changes, and therefore it is called hardship that causes disease, such as the death of a loved one, or the incidence of a chronic disease, or retirement ...

Table (1) Comparison between positive and negative pressures according to Kelly 1994

Negative pressures	Positive pressures
Cause a drop in morale, a feeling of backlog of work.	It gives motivation to work and a challenging outlook to it.
It generates confusion and calls to think about the effort expended	Helps to think and focus on results
It causes emotions to appear and not be able to express them	Providing the ability to express emotions and feelings
It leads to anxiety and failure	Gives a sense of fun and achievement
It causes weakness and pessimism about the future	It provides the individual with strength and optimism for the future
It causes a person to feel tired	It helps the person to sleep well
The inability to return to psychological equilibrium after going through an unpleasant experience.	It gives him the ability to return to psychological balance after going through an unpleasant experience

5. Sources of psychological pressure:

Al-Dahadaha (2010) mentioned four sources of psychological pressure, which are:

5.1. Environment: such as weather, disturbances, pollution and others.

5.2. Physiological factors: such as different periods of growth, illness, injuries, poor nutrition, sleep disturbances, stomachaches and anxiety caused by threats to the social environment and urgent changes

5.3. Social pressures: such as appointments, financial and work problems, lecturing, disagreement, losing relatives and friends, time requirements and making use of it.

The fourth source is the way of thinking, the mind interprets changes in the environment and the body determines when to respond as an emergency. (Nabhan, 2014, pg. 30)

6. Psychological and social theories explaining pressure:

Psychological and social theories focused on explaining and confronting stress, and we will present them as follows:

6.1. Psychoanalytic theory: Freud believes that the ego is subjected to strong pressures from multiple sources, represented by the pressures of the external environment, pressures from the conscience, pressures from the innate motives of the id. The strong ego is the one who clearly perceives the external reality and the existing forces that affect the individual. (Abdulaziz, 2010, p. 229)

The pressures that the individual suffers from in every situation or behavior, as psychoanalysts have mentioned, is an expression of a conflict between different or conflicting conflicts and desires, whether between the individual and the external environment or within the individual himself. When instinctive tendencies collide with a prohibition that comes from the social environment or from the internal psychological control represented by the (super-ego), these interactions lead to the emergence of defensive mechanisms

According to the psychoanalytic theory, most individuals have unconscious conflicts, and some of these struggles are more intense and numerous. These people see the circumstances and events of their lives as causes of psychological stress, and the methods of confronting these pressures are through repression, which Freud considered a defense mechanism towards stress. (Bumjan, 2016, p. 68)

6.2. Behavioral Theory: It looks at psychological pressure as a result of factors whose sources are the environment, and these factors can be controlled and may be not, and the main reason stems from the environment, and behaviorism goes to the fact that some individuals are affected more than others by environmental pressures, and therefore these pressures appear. Its effects are different in intensity and size. And behaviorism in its different stages, which is the old behaviorism (Watson) emphasized the environmental pillar in the psychological pressure, and the median and modern behavioral. (Abdulaziz, 2010, p. 228).

6.3. Cognitive theory: The cognitive theory assumes that the individual's thinking is responsible for his emotions. On this basis, the pressures and emotional difficulties begin when the individual's way of perceiving the event is exaggerated and his thinking is illogical, as the individual's wrong thinking patterns negatively affect his feelings and behaviors. The ability to think correctly, and then resort to cognitive distortions when dealing with stressful events, and accordingly he tends to explain stressful events and situations, and accordingly he tends to interpret stressful events and situations in a negative way. The cognitive psychology that the dysfunctional behavior and negative feelings of the individual are due to the existence of negative and illogical ways of thinking in interpreting the experiences and events that he is going through through different life situations. The main thing in feeling pressure is the interpretation and meaning of the event for the individual. When two individuals look at a situation, they reach a different perception. The first may perceive the situation as normal and may The other perceives it as a threat and a challenge to his abilities, and here pressure occurs based on the individual's perception, meaning that the situation becomes stressful when the individual perceives the situation as posing a threat to him. His knowledge and

his method of evaluating events, and getting rid of the negative effects resulting from the events he faces in the environment. (Hussein and Hussein, 2006, p. 68)

7. Symptoms of pressure: Psychological pressure manifests itself through several symptoms, which are:

7.1. Physical symptoms: In a normal pressure reaction, the heart beats hard and fast, muscles convulse, breathing becomes rapid, the throat dries up, sweating, and a feeling of an upset stomach.

7.2. Mental symptoms: difficulty concentrating.

7.3. Emotional symptoms: It is common for people under pressure to feel nervous, anxious, tense, irritable, irritable, restless or excited, and on the other hand, some individuals may find slow, frustrated, sad or depressed.

7-4-Behavioral symptoms: When the individual feels pressure, he tries to get rid of it by doing behaviors, such as: shaking the knee, biting nails, coercion to eat, smoking, speaking loudly, blaming others, and others (Nabhan, 2014, p. 32)

8. Psychological pressures in women:

Women in particular face more psychological pressures due to the multiple roles they have to play. The woman is the primary responsible for the affairs of her home, and if she works a number of hours away from her home, this makes a lot of psychological and nervous pressures on her shoulders... and studies differ in the issue of the existence of differences between men and women in the ability to face pressures. Some believe that men and women use similar strategies in facing pressures; As most of them use the direct method in facing pressures, while some studies confirm that women are more capable than men in facing social and emotional pressures; Because they often resort to emotional venting in order to get social support, while men are more affected by pressure and often resort to changing work or engaging in recreational activities or resorting to alcohol when exposed to pressure.

3. The field study:

3.1. Study Method: Considering this study deals with the psychological pressure of married women working in the field of nursing, and it's among the variables with multiple dimensions (family dimension, occupational, health, not being able to enjoy the joys of life...) you need to collect data and then analyze and describe it and Determining its level, the descriptive-analytical Method was used because it collects, classifies, analyzes and describes data and information to reach the results that answer the predetermined problem.

3.2. The sample: In order to reach representative results for the study community, the researchers tried to reach most of the married nurses working in the public hospitals of the state of M'sila and in the various wards (maternity ward, surgical operations , oncology , pediatric ...), and the sample was chosen in a way that allows to identify the level of Psychological stress among all married nurses, whether with long-term professional experience or less professional experience, which necessitated us to select a sample of 62 married nurses.

3.3. Study tool: The psychological pressure scale for working women was used by Badria Kamal Ahmed, which performs the required purpose of the current study, and it consists of five dimensions as follows:

Family dimension: It deals with the pressures of a woman's personal life, in terms of her relationship with her husband or with her children.

Professional dimension: It deals with pressures from the point of view of women's relationships at work with colleagues and superiors.

Health dimension: related to the physical symptoms that a woman may experience as a result of psychological pressure.

After the inability to enjoy the joys of life: This dimension shows the extent to which a working woman can enjoy her life amidst the psychological pressures she is exposed to.

emergency events dimension: This dimension expresses the impact of emergency events, whether modern or old, on women's defense mechanisms and their ability to resist current psychological pressures .

The scale is corrected according to the answers of the examinees, where the yes answer takes two marks, the answer with no certainty takes one degree, and the answer without takes the degree zero, this is in the case of positive statements, but in the case of negative expressions, the yes answer takes zero, and the answer without certainty takes one degree, in When you take the answer without two degrees, and we have relied on the scale after it has been modified on the Algerian environment by the researcher Dailey Najia (2013), and we have also verified the psychometric properties of the scale from validity and stability, as this led to the deletion of items that do not fit the objective of the current study, the study It targets the psychological pressures that a married nurse can be exposed to in her daily life and does not target sudden and transient stressful circumstances such as the death of a relative or exposure to a disaster ...

3.4. Statistical tools used: To analyze the results of the questionnaire, it was relied on calculating percentages and frequencies according to the following law: Percentage = (number of repetitions/total of the sample) * 100

5. Analysis of the results:

5.1. Presentation and discussion of the results of the study:

Table N°1. shows the Percentage of the answer to all the statements:

Answer alternatives	Yes	No	Not sure
Percentage of the answer to all the statements	62%	28%	10%

Through Table No. (1) it becomes clear to us the high percentage of psychological pressure among married nurses, where the sample responded to an alternative (yes) by 62%, which is a high percentage, while the study sample responded to an alternative (no) only by 28% and the remaining 10% to the answers of the examinees came to An uncertain alternative, reflecting the high psychological pressure of married nurses.

Table N°2. shows the percentages of the respondents' answers to each item of the scale:

statements	Yes	No	Not sure
I am overburdened by the burdens of my family.	%57	%41	%2
My life is threatened with separation at any time.	%48	%41	%11
I suffer from chaos in my house.	%66	%25	%9
I find it difficult to express my positive feelings.	%59	%29	%11
I have failed in raising my children.	%59	%29	%11
My husband pushes me to have a special relationship, without being indifferent to the fatigue I feel.	%52	%32	%16
I feel negative about my family.	%53	%29	%18
My children's problems are endless.	%52	%32	%16
Emotional separation prevails between me and my husband.	%43	%43	%14
My relationship with my children is not satisfactory.	%45	%39	%16
My husband doesn't care about anything.	%45	%43	%12
I feel many family pressures that I cannot express.	%52	%29	%18
I suffer from a lack of intimacy and affection in my home.	%48	%36	%16
My husband tends to burden me more than I can handle.	%55	%29	%16
I feel threatened by my family.	%52	%29	%18
My husband neglects my very own rights.	%55	%32	%14
There is an atmosphere of love in my family.	%73	%18	%9
I feel dissatisfied with my married life.	%48	%39	%14
I find it difficult to make my home a comfortable place for my family members because of my work outside the home.	%43	%48	%9
I get nervous when I think about what is waiting for me from the housework on my way back from home.	%50	%25	%25
I feel fear for my marital relationship, because of my work.	%71	%19	%10
My husband takes any opportunity to criticize me, and accuses me of negligence in the affairs of the house.	%65	%32	%3
I feel sad, because the time I spend with my family is little.	%55	%35	%10
I find it difficult to combine home and work requirements.	%55	%35	%10
I am not satisfied with my work.	%68	%26	%6
My work is not commensurate with my physical abilities.	%61	%26	%13
My relationship with my colleagues is undesirable.	%68	%19	%13
My work is of the kind that requires mental effort.	%68	%26	%6
I was subjected to several investigations in my work.	%65	%29	%6
I suffer from losing the interest of my superiors at work.	%62	%32	%6
My work is not financially remunerative.	%49	%35	%16
My work tends to take me risks.	%83	%7	%10
My work does not lift my spirits.	%77	%19	%3
I was subjected to many pressures with my work.	%87	%7	%6
I don't have time at work to rest.	%87	%6	%7
The quality of my work requires hard physical effort.	%77	%19	%3
My work has many responsibilities, even when I'm at home.	%61	%26	%13
My motivation to work decreases due to my family problems.	%58	%29	%10
My profession does not fulfill my ambitions.	%58	%29	%10
I suffer from sleep disorders.	%71	%19	%10
I am afraid to express any weakness in me.	%74	%16	%10
I tend to neglect the appearance of any physical or psychological symptoms.	%84	%10	%6
I don't care about my food.	%87	%10	%3
I drink too much tea and coffee.	%74	%13	%13
I do not leave an opportunity for a walk unless I have seized it.	%58	%39	%3
Act according to the wisdom that says that your body has a right over you.	%55	%39	%6

I don't have time to exercise.	%55	%35	%10
I spend my vacation at home.	%68	%19	%13
She was subjected to two violent emotional shocks.	%71	%23	%6
I was shocked in my life.	%81	%13	%6

each item of the scale, it was found that the study sample suffers from psychological pressure in varying proportions according to the field of psychological pressure and its impact, as the largest percentage of pressure was recorded through the following items: I do not care about my food and I do not find time during work to rest, and I was exposed to many pressures in my work, as the response rate to these items was estimated at 87%. This percentage is explained by the fact that the working woman does not have enough time to take care of her food or rest, which is evidenced by her response to the following items: I have no time to exercise 55% and I suffer from sleep disorders by 71%, and I spend my vacation at home by 68%. Vacation or recreation outside the home relieves psychological pressure, and we find that working nurses miss it greatly, in addition to what studies have proven of the importance of sleep and the extent of its need to relieve the burdens of pressure. However, the nurses do not have this blessing sufficiently to meet their needs, but sleep has become disturbed in their lives at a high rate. The percentage of psychological stress among nurses, their tendency to neglect the appearance of any physical or psychological symptoms by 84%, due to the requirements of the nursing profession in terms of physical fitness, activity and mental health ‘

The nurses expressed their exposure to trauma in their lives at a very high rate, estimated at 81%, which negatively reflects on the mental health of the nurses and positively on the percentage of psychological pressure for them. For this item, nurses are also exposed to many professional pressures at high percent, which is what appeared in the item I am dissatisfied with my work by 68%, and the item My relationship with my colleagues is undesirable by 68%, and the same percentage for the item My work is of the kind that requires mental effort, and Approximately to the two items, I have been subjected to several investigations in my work and suffer from the lack of interest of my superiors in work and the item my work is not commensurate with my physical abilities, as all these percentages show a high level of pressure. Between 43% and 57%, except for the two statements, an atmosphere of love prevails in my family, where it was estimated at 73%, while the response rate was yes to the item. Minds that the high atmosphere of love meets with fear for the marital relationship, the psychological nature of the woman and her emotionality makes her fear for her marital relationship despite the love that prevails in her family, all this calls us to intensify the recommendations to provide the maximum level of psychological comfort for the working woman and meet her psychological needs, especially biological, women A mass of feelings before it is a material mass, and it is smart to meet the psychological needs of these nurses in order to obtain quality and effectiveness in their performance, and the many obligations and duties accumulated by married nurses on the one hand, on the one hand, the husband, children, housework ... and work on the other hand makes them compromise on Many, if not all, of their rights and chances in a happy life, family occasions, recreational trips, practicing sports, and ... where the opportunity to win their rights leads to emotional venting of the psychological pressures that they face in their daily life and increases their vitality, activity and ability to perform well, which has

been proven by most Studies in the Arab and even foreign environment.

6. CONCLUSION:

At the conclusion of our study, we should only insist strongly on the need to pay attention to the psychological suffering that married nurses are exposed to, especially the psychological pressures, which they are constantly exposed to as a result of many factors, including family, professional, health ..., where we do not find In front of the nurses, what makes them less vulnerable to psychological pressures from the support of their superiors at work, such as encouragement and interest, or even holding parties in their honor, in order to express to them the extent to which their gratitude is acknowledged. In the best possible conditions for the community to obtain health services of a high level of quality, and thus to improve the level of public health for individuals.

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