The Relationship Between Healthcare Providers' Work Stress, Resilience, Social Support, and Health Status

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Purpose:

The health status of healthcare providers often affects important indicators of the stability of human resources. Nevertheless, factors affecting the health status of healthcare providers are quite diverse and complex. Therefore, there is a need to gain an in-depth understanding of fundamental influencing factors. This study examined the health status of healthcare providers and related factors.

Methods:

Using a cross-sectional and a correlational design, this study explored the work stress, resilience, social support, and health status of healthcare providers at a medical center, a regional hospital, and a local hospital in southern Taiwan. Data were collected using a structured questionnaire. The questionnaire consisted of a biographical survey and work stress, resilience, social support, and health status scales. A total of 500 respondents were enrolled in the study through convenience proportional sampling, based on the inclusion criteria and the establishment of medical staff. The collected data were statistically analyzed using the SPSS 19.0 software package. Healthcare providers' demographic characteristics were analyzed through descriptive statistics, and the potential predictors of self-perceived health status were analyzed through logistic regression.

Results:

The healthcare providers' health status scores showed that 345 were healthy, whereas 155 were unhealthy. There were no significant differences with regard to their demographic characteristics. However, significant differences ($P < 0.001$) were observed in their scores on work stress, resilience, and social support. Work stress was found to be a major predictor of the healthcare providers' health status.

Conclusion:

In total, 69% of the healthcare providers were identified as healthy, and 31% as unhealthy. There were no significant differences with regard to their demographic characteristics. However, differences were observed in the levels of work stress, resilience, and social support. In terms of work stress, the top three items with the highest scores, in descending order, were "I feel fatigued," "I feel tense," and "I feel very confident" (reverse-coded item). With regard to resilience, the top three items, in descending order, were "when I am frustrated, I motivate myself to gain experience from the failure," "there is always a way to overcome any difficulty," and "I am a tough person." In terms of social support, the highest score was assigned to "relatives, friends, or family." The top three items, in descending order, were "level of trust," "level of care," and "level of respect." An important predictor of the health status of healthcare providers was their work stress. Hospital administrators could implement systemic health management and tracking schemes for healthcare providers. Longitudinal data analysis could be used to further screen staff in the high-risk group, requiring health management. Health intervention programs could then be implemented, and their effectiveness determined afterwards. Examples of such programs include health promotion activities such as mindfulness-based stress reduction workshops, spiritual growth groups for rebuilding resilience, and the strengthening of interpersonal support systems.

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Keywords:

health status, healthcare providers and work stress

References:

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Abstract Summary:

Hospital administrators could implement systemic health management and tracking schemes for healthcare providers. Work stress was found to be a major predictor of the healthcare providers' health status.

Content Outline:

Background: The health status of healthcare providers often affects important indicators of the stability of human resources. Nevertheless, factors affecting the health status of healthcare providers are quite diverse and complex. Therefore, there is a need to gain an in-depth understanding of fundamental influencing factors.

Objective: This study examined the health status of healthcare providers and related factors.

Methods: Using a cross-sectional and a correlational design, this study explored the work stress, resilience, social support, and health status of healthcare providers at a medical center, a regional hospital, and a local hospital in southern Taiwan. Data were collected using a structured questionnaire. The questionnaire consisted of a biographical survey and work stress, resilience, social support, and health status scales. A total of 500 respondents were enrolled in the study through convenience proportional sampling, based on the inclusion criteria and the establishment of medical staff. The collected data were statistically analyzed using the SPSS 19.0 software package. Healthcare providers' demographic characteristics were analyzed through descriptive statistics, and the potential predictors of self-perceived health status were analyzed through logistic regression.

Results: The healthcare providers' health status scores showed that 345 were healthy, whereas 155 were unhealthy. There were no significant differences with regard to their demographic characteristics. However, significant differences ($P < 0.001$) were observed in their scores on work stress, resilience, and social support. Work stress was found to be a major predictor of the healthcare providers' health status.

Conclusions: In total, 69% of the healthcare providers were identified as healthy, and 31% as unhealthy. There were no significant differences with regard to their demographic characteristics. However, differences were observed in the levels of work stress, resilience, and social support. In terms of work stress, the top three items with the highest scores, in descending order, were "I feel fatigued," "I feel tense," and "I feel very confident" (reverse-coded item). With regard to resilience, the top three items, in descending order, were "when I am frustrated, I motivate myself to gain experience from the failure," "there is always a way to overcome any difficulty," and "I am a tough person." In terms of social support, the highest score was assigned to "relatives, friends, or family." The top three items, in descending order, were "level of trust," "level of care," and "level of respect." An important predictor of the health status of healthcare providers was their work stress. Hospital administrators could implement systemic health management and tracking schemes for healthcare providers. Longitudinal data analysis could be used to further screen staff in the high-risk group, requiring health management. Health intervention programs could then be implemented, and their effectiveness determined afterwards. Examples of such programs include health promotion activities such as mindfulness-based stress reduction workshops, spiritual growth groups for rebuilding resilience, and the strengthening of interpersonal support systems.

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