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Workplace Psychological Health among Canadian Nurses

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abstract

Due to the demanding nature of their work, nurses are at higher risk of developing work-related psychological distress and associated psychological illness when compared to the general Canadian workforce. Nurses experience high levels of physical and psychological injury, job burnout and depression, which are associated with increased levels of absenteeism, disability claims and compromised patient care. We advocate for improvements to workplace psychological health for Canadian nurses at an organizational level. This is an occupational health and safety matter that has the potential to enhance both nurse and patient health.

introduction

The risk of psychological distress is exceptionally high among nurses.¹ The 2005 National Survey of the Work and Health of Nurses (NSWHN) found that 9% of nurses (both women and men) experienced clinical depression within the previous year, compared to 7% of women and 4% of men in the general Canadian workforce.² Research shows that the high physical and psychological demands of the nursing profession are strongly associated with job burnout, job disengagement, job dissatisfaction, anxiety, and depression.^{3,4,5,6,7}

This results in an increased number of employee disability claims, turnover; and

absenteeism, which in turn imposes additional challenges to the already burdened health care system.^{8,13} Mental health claims account for 30% of short- and long-term disability claims and 70% of disability costs in Canada.⁹ Arguably, the most alarming concern is the impact that nurse psychological distress has on the quality of patient care that they are able to provide.¹⁰ Recent legislation requires health care organizations in British Columbia to enforce the Worker's Compensation Amendment Act (Bill 14), which emphasizes the protection of employee psychological health from the cumulative long-term effects of work-related stress.¹¹ The psychological health concerns of nurses are becoming increasingly evident, and it is therefore crucial

that they are recognized and addressed.

Nurses comprise the backbone of Canada's health care system, and as such, the prevalence of workplace-related psychological distress is an occupational matter that needs to be acknowledged and managed according to the Canadian Occupational Health and Safety standards. In this commentary, we will highlight factors with the potential for organizational level improvements: physical and psychological aggression and violence, excessive workload, and organizational support. These factors were chosen based on a literature review, which explores workplace psychological risk factors among health care workers, as well as the 2005 NSWHN.

factor 1: physical and psychological aggression and violence

Physical, psychological, and emotional violence are commonly experienced by nurses in the workplace.^{12,13,14} A study conducted by Henderson (2010) found that all nurses experienced physical violence, or threat of physical violence, at least once throughout their career, as well as some form of verbal abuse on a daily basis.¹³ Although physical assault is identified as the greatest risk to their physical safety, verbal assaults can result in many similar negative psychological health outcomes, including concern for personal security and feelings of anger and fearfulness.^{12,14} In response to these events, study participants demonstrated an increase in sick-leave substance use, job resignation, and patient avoidance.^{13,15}

factor 2: excessive workload

A manageable workload is essential to a psychologically healthy work environment.¹⁶ The 2005 NSWHN explored this link and found that nurses have higher workloads compared to other professions, which leads to an increased risk of poor mental health.² Specifically, the survey found that nurses often work overtime without full compensation, skip breaks, arrive early and leave late, and feel there is insufficient time to complete their work. In fact, 67% of nurses reported feeling that they were assigned too much work, and 45% reported that they had insufficient time to complete their duties.

factor 3: lack of organizational support for psychological health

Organizational support offered for psychological distress, plays a key role in the psychological health of employees.¹⁷ At an organizational level, psychological support is defined by a work environment that promotes employee psychological health

and wellness, and in which supervisors appropriately respond to the psychological concerns of their employees.¹⁹ Multiple components of workplace organization are related to poor psychological health among nurses, including strained relationships between physicians and nurses, ineffective use of nurses' skills and training, and limited autonomy.² These dynamics can result in decreased job commitment and productivity, and increased probability of making medical errors.¹⁸ Unfortunately, since nurses commonly feel that administrative staff do not listen and respond appropriately to their concerns, many of these factors, including workplace bullying, often go unreported.¹⁸

discussion

Awareness of the serious negative health implications that result from a failure to address the workplace psychological health of nurses at an organizational level is growing. The creation of psychologically healthy workplaces can help counter outcomes, such as nurse psychological and emotional distress, mental illness, and compromised patient care. Improved workplace psychological health has motivated the development of a national standard targeted at organizational changes intended to create psychologically healthy work environments for Canadian workers.

In 2013, the Canadian Standards Association (CSA Group), the Bureau de Normalisation du Québec (BNQ), and the Mental Health Commission of Canada (MHCC) released the National Standard of Canada for Psychological Health and Safety in the Workplace (or, more simply, the National Standard). The National Standard is a set of guidelines intended to help employers promote psychological health and prevent psychological illness and distress among their employees. It provides employers with a framework to develop strategies that enhance psychologically healthy and safe working environments. The National Standard is based on a large body of scientific evidence, which includes thirteen evidence-informed psychosocial factors.¹⁹ It emphasizes that certain psychosocial factors, such as psychological and physical protection, workload management, and organizational psychological support, are key to safeguard the psychological health of the Canadian

workforce.

It is recognized that the implementation of the National Standard can be a daunting endeavour for health care organizations. First, healthcare organizations should aim to achieve measurable psychological health and safety goals.²⁰ Objectives should be defined using a collaborative inter-sectorial process, and could include organizational departments such as Workplace Health and Safety and Organizational Development. Furthermore, nurse input is essential in promoting work engagement, which is associated with increased self-efficacy and reduced burnout.^{21,22} Second, the implementation of the psychosocial factors should be staged and piloted. Integrating a few high priority psychosocial factors in a staged manner reduces organizational change resistance, promotes change adoption, and identifies initial challenges.²³ Third, strategies and programs aimed to improve workplace psychological health and safety should be evaluated. This will assess whether goal targets are met and identify areas in need of improvement.²⁰ The Centre for Applied Research and Mental Health and Addiction (CARMHA), based within the Faculty of Health Sciences at Simon Fraser University, is currently involved in research exploring the process of implementation of the National Standards across a variety of Canadian organization. The purpose of this research is to provide insight into current implementation strengths and challenges and the ways in which implementation of the National Standard can be supported in the future.

Adhering to the National Standard can lead to many positive benefits for a workplace environment, including greater job satisfaction, stronger organizational commitment, enhanced teamwork, reduced sick leave, and less turnover.²⁴ Healthcare organizations, nurses, and patients are stakeholders who all benefit from the promotion of psychological health and the prevention of distress in the workplace. It is important that nurses are able to participate in the discussion of actions that affect their psychological health at work. Healthcare organizations should strive to implement measurable policy objectives to reduce psychological illness related to disabilities, and increase opportunities to promote workplace psychological health and well-being.¹

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