

International Journal of Research Publication and Reviews

Journal homepage: www.ijrpr.com ISSN 2582-7421

A Study to Assess the Quality of Life of Staff Nurses Working in Selected Hospitals in Kerala

Fr. RejiK. J¹, Prof.Dr.M. Christopher²

¹ Research Scholar, Malwanchal University, Indore

Introduction

The individual's "individual judgements of one's position in life in the light of one's cultural background, and in connection to aspirations, expectations, models, and one's interests," is one of the factors that determines a person's quality of life, according to the World Health Organization. This is one of the factors that determines a person's quality of life. When assessing the quality of an individual's life, it is essential to take into account not only their physical health but also their mental and social well-being in addition to their physical health.

It is possible that we will use this framework to investigate the effects that diseases have on the mental and physical health of individuals at some point in the future.

Despite this, the academic community has not come to a consensus on a single definition of Quality of life. The assessment of a person's health is an essential component of a more in-depth look at that person's quality of life, but it is a subject area that is frequently ignored by researchers.

Because there is a lack of clarity surrounding the topic, it may be difficult to pinpoint exactly what is meant by the term "Quality of life." It is essential, when determining an individual's health-related quality of life, to take into account not only their physical and mental health, but also their emotional, cognitive, social, and sexual health as well. This is because the physical and mental health of an individual are only two aspects of their overall health. This study's objectives were to (1) evaluate the quality of life of nurses who are employed in the private sector in Kerala and (2) investigate the factors that have an effect on that quality of life.

Methodology

The research was carried out in a selection of Kerala's hospitals, and the sample consisted of one thousand registered nurses working in private hospitals throughout the state. The research was carried out using a descriptive survey design. For this particular investigation, a straightforward random sampling strategy was used. The demographic questionnaire, the quality of life survey scale, and the mental health scale were the instruments that were used for the data gathering process. SPSS 2022 was used to do an analysis of the data, during which descriptive and inferential statistics were considered.

Results

The results show that the mean values (mean=75.21, SD=5.125) and the highest and lowest scores (mean=75.21, SD=5.125) acquired by the nursing staff in the eight categories of overall health, physical functioning, emotional role, vitality, mental health, physical pain, and social role are as follows: The average value for an individual's state of health is 75.21, while the standard deviation for an individual's state of health is 5.125. The average ratings that nurses gave for eight different facets of health care are presented here (mean value of 52.0, standard deviation of 4.43, and mode value of 50.00). (overall, physical functioning, role, emotions, energy, mental health, pain). The physical health of an individual is the primary focus of the first half of the quality scale, while the mental health of an individual is the primary focus of the second half of the scale. In this essay, we look at both facets in further detail. The results of the survey revealed that the responses obtained, on average, for indicators of both physical and mental health fell within the range that was predicted for the general population. This was the case for both the physical and mental health indicators.

When questioned about their overall health and wellbeing, people offered a mean score of 48.82 on the Physical Health Composite Scale, while they gave a mean score of 55.00 on the Mental Health Scale. It was found that the gender of the respondent had a significant impact on both the nature of the association between quality of life and socioeconomic and occupational factors, as well as the magnitude of that impact.

On the MCS, for instance, guys seem to have performed substantially better than women did, with a mean score of 52.14 compared to the female average of 48.12, which indicates that men appear to have done far better.

There was not a statistically significant connection found between age and employment, number of years spent working at a job, degree of education, or number of years on the job.

²Research Supervisor, Malwanchal University, Indore

Conclusion

According to these findings, nurses have a health status that is somewhere in the centre of the spectrum, between that of the general population and that of the extremely healthy. This places nurses midway between the general population and those who are very healthy. It was shown that there is a statistically significant correlation between an individual's physical and mental health, as well as a positive linear relationship that exists between the two types of health in general. [Citation needed] When people's physical health improved, they also observed gains in their mental and emotional health at the same time. When comparing the two sexes side by side in terms of quality of life, the findings suggested that men did better on both health indicators. This was the case when both genders were considered together.

Reference

- Skevington SM, Lotfy M, O'Connell KA, WHOQOL Group. The World Health Organization's WHOQOL-BREF quality of life assessment: Psychometric properties and results of the international field trial. A Report from the WHOQOL Group. Qual Life Res 2004;13:299-310. Back to cited text no. Development of the World Health Organization WHOQOL-BREF quality of life assessment. The WHOQOL Group. Psychol Med 1998;28:551-8. Back to cited text no. 4
- Saxena S, Carlson D, Billington R, WHOQOL Group. World Health Organisation Quality Of Life. The WHO quality of life assessment instrument (WHOQOL-Bref): The importance of its items for cross-cultural research. Qual Life Res 2001;10:711-21. Back to cited text no.
- Saxena S, Chandiramani K, Bhargava R. WHOQOL-hindi: A questionnaire for assessing quality of life in health care settings in India.
 World health organization quality of life. Natl Med J India 1998;11:160-5. Back to cited text no. 6
- Agnihotri K, Awasthi S, Chandra H, Singh U, Thakur S. Validation of WHO QOL-BREF instrument in Indian adolescents. Indian J Pediatr2010;77:381-6. Back to cited text no. 7
- Meena UK, Sen RK, Behera P, Tripathy SK, Aggrawal S, Rajoli SR, et al. WHOQOL-BREF Hindi questionnaire: Quality of Life assessment in acetabular fracture patients. Indian J Orthop2015;49:323-8. Back to cited text no. 8
- Folasire OF, Iabor AE, Folasire AM. Quality of life of people living with HIV and AIDS attending the antiretroviral clinic, university college hospital, Nigeria. Afr J Primary Health Care Fam Med 2011;4:8. Back to cited text no. 9
- Sathvik BS, Parthasarathi G, Narahari MG, Gurudev KC. An assessment of the quality of life in hemodialysis patients using the WHOQOL-BREF questionnaire. Indian J Nephrol 2008;18:141-9. Back to cited text no. 10
- Arogya Bandhu Scheme for Involving Private Medical Colleges and Other Agencies in the Management of PHCs under Partnership Agreement; August, 2008. Government of Karnataka. Available from: http://www.karhfw.gov.in/PDF/AROGYA%20BANDHU-PPP%20.pdf. [Last accessed on 2015 Feb 06]. Back to cited text no. 11
- PPP Initiatives in Karnataka State. Available from: http://www.karhfw.gov.in/KSHRDP/ppp.aspx. [Last accessed on 2014 Jul 12]. Back to cited text no. 12
- National Health Policy 2015 Draft; 2014. Available from: http://www.mohfw.kar.nic.in. [Last accessed on 2015 Feb 16]. Back to cited text no. 13
- Pandke HT, Pandve TK. Primary healthcare system in India: Evolution and challenges. Int J HeatlhSyst Disaster Manag2013;1:123-8. Back to cited text no. 14