



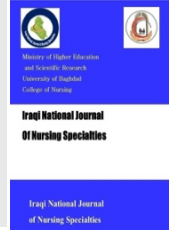
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Evaluation of the Psychological Empowerment among Nurses at Primary Health Care Centers

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ABSTRACT

Objective(s): This study aimed to evaluate the level of psychological empowerment among nurses as perceived by their point of view, and identify the differences in their psychological empowerment in terms of their age, gender, education and years of employment.

Methodology: A descriptive evaluation design was conducted on nurses at Psycho-social Health Units in Primary Health Care Centers in Kirkuk Governorate. A convenience sample of 84 nurses was selected. The data was collected through the self-report method for the period from 25th August to 10th October 2022. The questionnaire was adopted and modified for achieving the current study's goal; it was composed of "Socio-demographic" variables, and the Psychological Empowerment Scale (PES). Face and content validity of the questionnaire was conducted by a panel of experts, also the reliability had been evaluated, through the SPSS (Version 26) by applying Cronbach's Alpha coefficient, which was ($\alpha = 0.81$). The descriptive data was determined through Frequency, percentage, mean of the score, and standard deviation. Inferential data analysis approach: - used by enforcement of the "independent t-test" and "Analysis of Variance" (ANOVA).

Results: - The results found that 66.7% of nurses perceive a high level of "psychological Empowerment", and there is a significant difference in overall "psychological empowerment" related to "age group" (50-59) years of nurses, however, there is a highly significant difference in overall "psychological empowerment" concerning their years of employment in (6-10) years.

Conclusions: Highlights the importance of psychological empowerment as a strong indicator of positive organizational behavior of nurses, which can increase their self-efficacy of them, ultimately leading to improvement and elevation of the efficiency of care provided.

Recommendations: It is recommended that a periodic and comprehensive evaluation of nursing staff be conducted to take appropriate means to provide a supportive work environment in order to retain the perceived high psychological empowerment among them to ensure the continuity of quality of care.

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تقويم التمكين النفسي بين الممرضين في مراكز الرعاية الصحية الأولية

المستخلص

الأهداف: هدفت الدراسة الى قياس مستوى التمكين النفسي بين الممرضين من وجهة نظرهم، وتحديد الفروق الاحصائية في التمكين النفسي للممرضين بالنسبة للعمر، الجنس، مستوى التخرج، وسنوات العمل.

منهجية البحث: أجريت تصميم مقطعي وصفي على الممرضين في وحدات الصحة النفس-اجتماعية في مراكز الرعاية الصحية الأولية في محافظة كركوك لتحقيق أهداف الدراسة. تم اختيار عينة ملائمة من (84) ممرض وممرضة. وتم جمع البيانات المطلوبة من خلال طريقة التقرير الذاتي للفترة من 25 اب إلى 10 تشرين الاول 2022 ، بالاعتماد على استبانة الدراسة المكونة من الجزئين هما المتغيرات الاجتماعية والديموغرافية، ومقياس التمكين النفسي (PES) تم إجراء صحة الاستبيان من قبل فريق من الخبراء، وتقييم موثوقية الاداة من خلال برنامج SPSS (الإصدار 26) بتطبيق معامل ألفا كرونباخ ، والذي كان $(\alpha = 0.81)$. حيث تم تحديد البيانات الوصفية من خلال: التكرار، النسبة المئوية، متوسط الدرجة، والانحراف المعياري. نهج تحليل البيانات الإحصائية الاستنتاجية: تم استخدام تطبيق اختبار t المستقل وتحليل التباين (ANOVA).

النتائج: أوجدت الدراسة ان 66.7% من الممرضين مرتبطين بمستوى عالٍ من التمكين النفسي، وهناك فروق كبيرة في التمكين النفسي العام فيما يتعلق بالفئة العمرية ما بين (50-59) سنة للممرضين، ومع ذلك هناك فرق كبير عالي في التمكين النفسي العام فيما يتعلق بسنوات العمل لديهم ما بين (6-10) سنوات. **الاستنتاجات:** يسلط الضوء على أهمية التمكين النفسي كمؤشر قوي على السلوك التنظيمي الإيجابي للممرضين ، والذي يمكن أن يزيد من الكفاءة الذاتية لهم ، مما يؤدي في النهاية إلى تحسين ورفع كفاءة الرعاية المقدمة.

التوصيات: يوصى بإجراء تقييم دوري وشامل للملاكات التمريضية، واتخاذ الوسائل المناسبة لتوفير بيئة عمل داعمة لهم، من أجل الحفاظ على التمكين النفسي العالي المتصور لضمان استمرارية جودة الرعاية.

الكلمات المفتاحية: تقييم، الممرضين، التمكين النفسي، مركز الرعاية الصحية الأولية

Introduction

Psychological empowerment is a personal and direct positive perception of employees and their different perspectives on their role in the organization in relation to work and active participation ⁽¹⁾. It provides the resourcefulness required to create vital conditions for high-performance work ⁽²⁾.

Psychological enabling can motivate and encourage employees to work with enthusiasm and full ability to achieve the goals of the organization and create a positive work climate ⁽³⁾.

Psychological empowerment consists of four basic processes: meaning, competence, self-determination, and influence that strongly motivate nurses to create and generate a high feeling of self-control relevant to work and to energetically participate in their function positively ⁽⁴⁾.

Dealing effectively with management and supervisors with new ideas and constructive proposals is the basis for enhancing their activity, appreciating their abilities, and supporting them to revive a

dynamic and productive work environment ⁽⁵⁾.

A study about the quality of Primary Health Care Services at Primary Health Care Centers in Baghdad City focused on nurses employed in psycho-social health units where the workload and patient requirements are at maximum degree and assigning nurses to more than one job, with the lack of encouraging matters for them. Although high-quality care is mandatory in primary health care centers ⁽⁶⁾.

In today's competitive environment, it is necessary to recognize the value of the nursing workforce in the quantitative and qualitative advancement of healthcare systems ⁽⁷⁾, by providing opportunities for development and relationships and promoting collaborative work to facilitate the building of effective work teams ⁽⁸⁾.

Psychological empowerment is a critical factor in making the nurses a voice in the decision-making and allowing them to contribute valuable ideas to promote activity, intervening effectively in building leadership among nurses ⁽⁹⁾.

In general, if nurses within the organization show greater psychological empowerment of the effectiveness of an empowerment program that is provided by a qualified trainer periodically, this can have a positive impact on the internal environment of the organization and its reputation, and this will depend on the comprehensiveness and strength of the program, and as determined by the initial evaluation as a management action (10).

Employees with higher self-esteem are energetic, motivated, more confident, are more engaged while learning the course (11). It is necessary to pay close attention to psychological empowerment as a condition for providing the best services and continuous awareness activities, and the perspectives of service recipients constantly will change for the better, if it sees that the services provided to them by employees have moved for the better (12).

A descriptive cross-sectional design was conducted on nurses at Psycho-social health Units in Primary Health Care Centers in Kirkuk Governorate.

A convenience (non-probability) sample of (84) nurses was selected. It included those who were collaborative, had more than one year of employment, and excluded those who participated in the pilot study.

Official approval of the Kirkuk Health Directorate / Health Centers / for the purpose of facilitating the task of conducting the study and interviewing the nurses participating in the psychosocial health units from the workplace verbally before starting, and the confidentiality of the data was also emphasized.

The data required for this study was collected through the self-report method by the researcher, collected the actual data through an Arabic version questionnaire, which lasted from 25th August to 10th October 2022, and the questionnaire was composed of two parts: The first was "Socio-demographic"

The abilities, experiences, and decisions that the employees obtain from psychological empowerment, can stimulate them to influence organizational decisions, and the ability to change the course of actions and adapt to the internal working circumstance effectively, and this is known as organizational power (13).

In Iraq, limited published studies are available regarding the topic of nurses' empowerment in the clinical setting. Moreover, with the current nurse staffing challenges experienced by hospital organizations, foster elements of a positive organization. Therefore, this study came in an attempt to investigate the perceptions of young staff nurses toward psychological empowerment within the clinical context and whether there is a significant relationship between other variables.

Methodology

variables of age, gender, education, and years of employment. The second part was Psychological Empowerment Scale (PES) designed by Thomas, & Velthouse (1990) (14). It was developed by Spreitzer in (1995) (15).

The scale is composed of 4 separate but interrelated dimensions: meaning; competence; self-determination; and impact, in a total of 12 items. A 5-point scale, ranging from 1 to 5 was used for respondents' responses, which were (strongly disagree, disagree, neutral, agree, and strongly agree) were scored respectively as (1, 2, 3, 4, and 5) (16), (17). Each dimension's scores were calculated by estimating the range score for each dimension's total score, divided into three levels, and scored as follows: Low= 3 – 6, Moderate= 7 – 10, High= 11– 15.

The content validity of the tool was reviewed by the Institutional Review Board (IRB) at the College of Nursing, University of Baghdad. Minor changes were made in some items to accurately fit the measure of the level

of psychological empowerment of nurses working at the primary health care centers.

In addition to the consent of the participants obtained before participating in this study. This work was carried out in accordance with the Code of Ethics of the “World Medical Association”, for Studies. The approval of the “Scientific Research Committee” was obtained at the College of Nursing at the University of Baghdad.

The overall score of psychological empowerment was also calculated by estimation of the range score for the total score of scale and divided into three levels and scored as follows: Low=12–28, Moderate= 29– 44, High=45 – 60. The level is estimated based on the Interquartile Range (IQR) which is divided into three quartiles: (low, moderate, and high).

The reliability of the questionnaire had been evaluated, by applying the Cronbach Alpha coefficient for the total of P.E was ($\alpha = 0.81$). It made the questionnaire statistically acceptable and appropriate for data collection.

Data were analyzed and interpreted through the use of the application of SPSS, version 26.0. Descriptive data through the determination of: (Frequency, Percentage, Mean of score, and Standard Deviation). Inferential data analysis approach: - used by enforcement of the (Independent t-test, and Analysis of Variance), to determine the significant differences in psychological empowerment among nurses with regard to Socio-demographic variables.

Results

Table (1): Distribution of Nurses According to their Socio-demographic Characteristics

No.	Socio-demographic Characteristics	f	%	
1.	Age Group (years) M±SD = 39±11	20 – 29	22	26.2
		30 – 39	22	26.2
		40 – 49	19	22.6
		50 – 59	21	25
		Total	84	100
2.	Gender	Male	40	47.6
		Female	44	52.4
		Total	84	100
3.	Qualification in Nursing	Preparatory school	19	22.6
		Diploma	54	64.3
		Bachelor	10	11.9
		Postgraduate	1	1.2
		Total	84	100
4.	Years of employment M±SD= 4.5±3	1 – 5	54	64.3
		6 – 10	25	29.8
		11 +	5	6
		Total	84	100

(No: Number, f: Frequency, %: Percentage, M: Mean, SD: Standard deviation)

The descriptive analysis in Table 1 illustrates that the average age of nurses is 39±11 years; 26.2% of nurses are seen with both age group of 20-29 years and 30-39 years. Concerning gender, slightly more than half of nurses are Females (52.4%) while the remaining are males (47.6%). The Level of

Graduation refers that 64.3% of nurses are graduated with diploma degree, 22.6% are graduated from nursing preparatory schools, and only 11.9% are graduated with bachelor degree. The average for years of employment among nurses refers to 4.5±3 years in which 64.3% of them are seen with 1-5 years of employment.

Table (2): Overall Evaluation of Psychological Empowerment among Nurses

Levels	F	%	M	SD
Low	0	0	47.24	5.884
Moderate	28	33.3		
High	56	66.7		
Total	84	100		

(f: Frequency, %: Percentage)(M: Mean for a total score, SD: Standard Deviation for a total score) (Low = 12 – 28, Moderate = 29 – 44, High = 45 – 60)

This table displays that nurses show high psychological empowerment (M±SD= 47.24±5.884) in which 66.7% of them are associated with a high level.

Table (3): Evaluation of Psychological Empowerment by Their Domains among Nurses

Psychological Empowerment Dimensions	M± SD	Evaluation
Meaning	12.13 ± 1.822	High
Competence	11.63 ± 1.789	High
Self-determination	11.85 ± 1.833	High
Impact	11.63 ± 1.789	High

(M: Mean for a total score, SD: Standard Deviation for a total score) Low= 3 – 6, Moderate= 7 – 10, High= 11 – 15

This table indicates that nurses show a high level of meaning, competence, self-determination, and impact as seen with mean scores among all dimensions of psychological empowerment.

Table (4): Significant Difference in Psychological Empowerment among Nurses in Terms of Their Age (N=84)

Age Psychological Empowerment	Source of variance	Sum of Squares	Df	Mean Square	f	Sig.
Meaning	Between Groups	25.465	3	8.488	2.715	.051
	Within Groups	250.094	80	3.126		
	Total	275.560	83			
Competence	Between Groups	37.956	3	12.652	4.447	.006
	Within Groups	227.604	80	2.845		

	Total	265.560	83			
Self-determination	Between Groups	14.325	3	4.775	1.484	.225
	Within Groups	257.341	80	3.217		
	Total	271.667	83			
Impact	Between Groups	30.476	3	10.159	3.457	.020
	Within Groups	235.084	80	2.939		
	Total	265.560	83			
Overall	Between Groups	371.812	3	123.937	3.964	.011
	Within Groups	2501.426	80	31.268		
	Total	2873.238	83			

(d f: Degree of freedom, F: F-statistic, Sig: Significance)

This table displays that there is a significant difference in overall evaluation of the psychological empowerment among nurses regarding their age at p-value= .011, particularly with dimensions of competence and impact at p-values= .006, and .020.

Table (5): Multiple Comparisons Test for Significant Differences in Overall Psychological Empowerment among Nurses in Terms of their Age (N=84)

<i>Dependent Variable</i>	<i>(I) Age</i>	<i>(J) Age</i>	<i>Mean Difference (I-J)</i>	<i>Std. Error</i>	<i>Sig.</i>
Psychological Empowerment	(20 – 29 year)	(30 – 39 year)	-2.545	1.686	.520
		(40 – 49 year)	-3.833	1.751	.197
		(50 – 59 year)	-5.727*	1.706	.014
	(30 – 39 year)	(20 – 29 year)	2.545	1.686	.520
		(40 – 49 year)	-1.287	1.751	.910
		(50 – 59 year)	-3.182	1.706	.330
	(40 – 49 year)	(20 – 29 year)	3.833	1.751	.197
		(30 – 39 year)	1.287	1.751	.910
		(50 – 59 year)	-1.895	1.770	.766
	(50 – 59 year)	(20 – 29 year)	5.727*	1.706	.014
		(30 – 39 year)	3.182	1.706	.330
		(40 – 49 year)	1.895	1.770	.766

This table depicts that nurses with age group of 50-59 years have higher psychological empowerment than other age groups as indicated by significant difference at p-value= .014.

Table (6): Significant Difference in Psychological Empowerment among Nurses in Terms of their Gender (N=84)

Gender Psychological Empowerment		M	SD	T	Df	p≤ 0.05	Sig
Meaning	Male	12.23	1.993	.449	82	.665	N.S
	Female	12.05	1.670				
Competence	Male	11.78	1.819	.702	82	.485	N.S
	Female	11.50	1.772				
Self-determination	Male	11.68	1.817	-.763	82	.448	N.S
	Female	11.98	1.811				
	Male	11.85	1.718	1.071	82	.287	N.S

Impact	Female	11.43	1.848				
Overall	Male	47.55	5.800	.461	82	.646	N.S
	Female	46.95	6.011				

(M: Mean, SD: Standard deviation, t: t-test, df: Degree of freedom, Sig: Significance, p: Probability value, N.S: Not significant, S: Significant, H.S: High significant)

This table discloses that there is no significant difference in psychological empowerment among nurses about their gender.

Table (7): Significant Difference in Psychological Empowerment among Nurses in Terms of their “Qualification” (N=84)

Qualification	Source of variance	Sum of Squares	Df	Mean Square	f	Sig.	
Psychological Empowerment							
	Meaning	Between Groups	6.256	3	2.085	.619	.604
		Within Groups	269.304	80	3.366		
	Total	275.560	83				
Competence	Between Groups	12.738	3	4.246	1.344	.266	
	Within Groups	252.821	80	3.160			
	Total	265.560	83				
Self-determination	Between Groups	6.144	3	2.048	.617	.606	
	Within Groups	265.523	80	3.319			
	Total	271.667	83				
Impact	Between Groups	4.775	3	1.592	.488	.691	
	Within Groups	260.784	80	3.260			
	Total	265.560	83				
Overall	Between Groups	54.512	3	18.171	.516	.673	
	Within Groups	2818.727	80	35.234			
	Total	2873.238	83				

(df: Degree of freedom, F: F-statistic, Sig: Significance)

This table indicates that there is no significant difference in psychological empowerment among nurses with regard to their qualifications in nursing.

Table (8): Significant Difference in Psychological Empowerment among Nurses in Terms of Their Years of Employment (N=84)

Years	Source of variance	Sum of Squares	Df	Mean Square	f	Sig.	
Psychological Empowerment							
	Meaning	Between Groups	48.596	2	24.298	8.672	.001
		Within Groups	226.964	81	2.802		
	Total	275.560	83				
	Between Groups	67.474	2	33.737	13.795	.001	

Competence	Within Groups	198.086	81	2.446		
	Total	265.560	83			
Self-determination	Between Groups	32.514	2	16.257	5.506	.006
	Within Groups	239.153	81	2.953		
	Total	271.667	83			
Impact	Between Groups	27.840	2	13.920	4.743	.011
	Within Groups	237.719	81	2.935		
	Total	265.560	83			
Overall	Between Groups	674.586	2	337.293	12.426	.001
	Within Groups	2198.653	81	27.144		
	Total	2873.238	83			

(df: Degree of freedom, F: F-statistic, Sig: Significance)

This table reveals that there is high a significant difference in overall psychological empowerment among nurses regarding their years of employment at p-value= .001.

Table (9): Multiple Comparisons Test for Significant Differences in the Overall Evaluation of the Psychological Empowerment among Nurses IN Terms of their Years of Employment (N=84)

Independent Variable	(I) Years	(J) Years	Mean Difference (I-J)	Std. Error	Sig.
Psychological Empowerment	1 – 5 years	6 – 10 years	-6.030*	1.260	.001
		11 + year	-5.270	2.435	.103
	6 – 10 years	1 – 5 years	6.030*	1.260	.001
		11 + year	.760	2.552	.957
	11 + year	1 – 5 years	5.270	2.435	.103
		6 – 10 years	-.760	2.552	.957

This table shows that nurses with 6-10 years have higher psychological empowerment than others as indicated by a significant difference at p-value= .001

Discussion

The findings of the overall evaluation of nurses' psychological empowerment reveal a high level among them, there could be various factors that may have contributed to the result, such as the quality of training, the availability of enthusiasm for work in the provision of psychological service, the importance of qualifications, and the appropriate environment. It is embodied in a high sense of the importance of work, that it is meaningful, has value within the framework of responsibility, and is exercised in an

atmosphere of freedom and self-efficacy, leading to influence and creating new conditions full of vitality.

This finding is supported by many previous studies conducted among nurses in Iran, which were recorded most strongly at (Mean= 54.97) ⁽¹⁸⁾, and in Iraq, five hospitals in Mosul reported a high level at (Mean =47,59) ⁽¹⁹⁾, also a similar finding was reported in the Philippines among nurses working in two tertiary hospitals ⁽²⁰⁾.

On the other hand, this is inconsistent with the results of other studies conducted in

two hospitals that have a similar work environment in the Jordan capital city of Amman, which reported a low level of psychological empowerment ⁽²¹⁾, And yet another study in Iran, which examined nurses working in two hospitals affiliated with the University of Medical Sciences (Khatam-al-Anbia and Shahid Beheshti) also revealed a moderate level of nurses psychological empowerment ⁽²²⁾.

Regarding to nurses' psychological empowerment's domains, high levels are seen among all domains, and the result of the meaning domains has a slightly higher score, with a slight difference in the degree between them.

Table (3), demonstrates the strength of loyalty and sincerity of belonging in a lively atmosphere, generating a sense of self-confidence, competence, and motivation to make effective decisions that lead to fruitful and positive results in his work environment. This result coordinates with that carried out in Iraq by Al-Hussein, among nurses at five hospitals in Mosul Governate which demonstrated a high level for all dimensions ⁽¹⁹⁾.

In the same context, a matching result conducted in Philippines-Iloilo City, in a private teaching and training hospital, mentioned that staff nurses had high perceptions about all dimensions ⁽²³⁾.

Regarding the first characteristic of socio-demographics age groups, there is a significant difference in overall nurses' psychological empowerment with their age, particularly with the domains of Competence and Impact.

Table (4), nurses in the age group (50-59) years have more experience, associated with high psychological empowerment, especially in the Competence and Impact domains. This may be due to the fact that older nurses have more experience and confidence in their abilities, which can lead to a greater sense of empowerment, and most likely to endure and face stressors.

Evidence suggests that there is be differences in the psychological empowerment of nurses based on their age group. One study conducted in Egypt among nurses showed the opposite result, an insignificant relationship ⁽²⁴⁾. Another study at Sirs Elian Hospital found a weak correlation between psychological empowerment and nurses' age ⁽²⁵⁾.

Related to nurses' gender the present study reveals that there is no significant difference in psychological empowerment among the studied sample based on gender. Unlike other studies that prove the opposite in the result.

Regarding the Gradational Level, also confirms that there is no significant difference in psychological empowerment among nurses concerning their Gradational Level in nursing.

Table (7), revealed that this finding is consistent with that conducted in Egypt among nurses, which illustrated an insignificant relationship between psychological empowerment and "Gradational Level" ⁽²⁴⁾. While other studies with opposite results proved that holders of a high degree have high psychological empowerment and a degree attained was associated with differences in levels of psychological empowerment ⁽²⁶⁾. Most studies are directed to increase psychological

empowerment with the escalation of the certificate.

Related to nurses' Years of Employment, it is revealed that there is a highly Significant Difference in the overall psychological empowerment among nurses with regard to their years of employment, especially those with (6-10) years having higher psychological empowerment than others, as seen in Table (8). which can lead to a greater sense of competence and confidence in their abilities. Nurses who are employed for a longer period may have more opportunities to build relationships and establish a supportive work environment, which can contribute to higher levels of psychological empowerment.

This result disagrees with that conducted in Jordin on registered nurses from two hospitals which informed nurses who had an average total experience in nursing of fewer than 10 years, associated reported a moderate level of a low level of psychological empowerment ⁽²¹⁾. In Egypt among nurses, which illustrated an insignificant relationship between nurses' psychological empowerment and level of "Years of Employment" ⁽²⁴⁾, furthermore, the study of Radwan in Egypt revealed a weak correlation between them among nurses ⁽²⁵⁾.

Conclusions

This study highlights the importance of psychological empowerment as a strong predictor of positive organizational behavior for nurses. According to the results, the study concluded to the psychological empowerment of the nurses was at a high level. Therefore, providing the prerequisites needed to enhance the psychological empowerment of nurses can increase self-efficacy, ultimately improving the quality of nursing care.

Recommendations

According to the results of the current study, it is recommended to periodically and comprehensively evaluate the nursing staff, which will help continuously to identify areas that need to be improved and monitor the factors affecting them in the workplace, and implement strategies such as providing professional development opportunities, providing a supportive work environment, recognizing their contributions, and creating special incentives among workers in psychosocial health units, to retain high psychological empowerment to ensure continuity of care.

Conflict of Interest

None.

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