Effect of Gender and Age on the Anxiety Level on Private Hospital Nurses

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Abstract:

> *The study investigated the effect of gender and age on anxiety level of private hospital nurses. Sample consisted of 180 nurses (90 males and 90 females) selected from Meerut city. Sinha's Comprehensive Anxiety Test (SCAT) developed by A.K.P. SINHA and L.N.K. SINHA (Patna) (1995) containing 90 items was administered to them with the help of research assistants and the unit matrons. 2x2 factorial design having two level of gender; male and female, two level of age; 25-35 and 36 - 45 was used and a-2 way analysis of variance (ANOVA) employed to analyze the data. The results of the study showed that gender has a significant effects on nurses' anxiety level at P<0.01 and while interaction of gender and age was non- significant.*

Key words: Hospital nurses, Gender, Age and Sinha's Comprehensive Anxiety Test (SCAT)

1. Introduction

Nursing profession is an important part of social and civic life. It is a difficult profession as nurses get involved with the suffering in hospitals. The nurses go through tremendous stress

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during this phase due to profession demand. They enter into a state of multiple roles from a protective family atmosphere where the adjustment mechanisms are effective in dealing with problems, the dynamic state of equilibrium results in fostering the goals of persons, but when usual attempt to cope with anxiety become ineffective, then this results in anxiety. It is important to mention here that there are no organised details on anxiety as related to gender and age of nurses. Hence, the investigators feel that there is sufficient need to study the anxiety problems of nurses.

Daily human beings face anxiety. The insatiability of human wants, instability of human society, stressful work environment, desire to keep pace with our fast moving technological age, fear of the future, job demands, economic recession and weak relationships etc, constantly generate anxiety in us. In clinical practice, an anxiety can be classified into three forms: happy or every day, objective and neurotic anxiety. Every day anxiety occurs to everybody. It is a healthy type that assists us to be active rather than being emotionally flat. Sometimes, it is referred to as happy anxiety because it makes us to do and be where expected of us within the required space and time. Objective anxiety is a realistic response to danger in an environment while neurotic anxiety arises from an unresolved and unconscious conflict within an individual. There are symptoms peculiar with anxiety such as nausea, dizziness, Palpitations, shaking, difficulty breathing etc. Anxiety of any type involves tension and discomfort. However, not all forms of anxiety are unhealthy. There is a normal or needed anxiety which helps us to be up and doing in our daily activities. But there is an abnormal anxiety which is often referred to as anxiety disorder. This kind of anxiety is majorly characterized by tenseness, irritability and acute panic, and those suffering from it are hypersensitive to criticism and easily get discouraged and that is why it is sometimes called "free floating anxiety". This is the type of anxiety that we are to examine for

the purpose of this study. Researchers have shown that personality types, gender, age, shifting work, promotions, motivation, economic strength, work schedules and organizational variables are among key factors that initiate and sustain anxiety whether minor or major types. Nursing is a unique profession that makes contribution with others in the health care delivery system that perceives man as an integrated whole or a bio-psycho-social being and as such, the holistic concept of health is then seen as including physical, emotional, psychological, intellectual and spiritual dimensions.

Anxiety is a normal reaction to stressful situations. But in some cases, it becomes excessive and can cause sufferers to dread everyday situations and is called Generalized Anxiety Disorder. Other anxiety-related disorders include panic attacks—severe episodes of anxiety which happen in response to specific triggers—and obsessive-compulsive disorder, which is marked by persistent invasive thoughts or compulsions to carry out specific behaviours (such as hand-washing). Anxiety so frequently co-occurs with depression that the two are thought to be twin faces of one disorder. *"Anxiety is an emotional and/or physiological response to known and/or unknown causes that may range from a normal reaction to extreme dysfunction (indicative of an anxiety disorder), affect decision-making and adherence to treatment, and impair functioning and/or affect quality of life."* American Psychiatric Association [APA], 2000

The present investigation is an attempt to measure the occupational stress level of nurses with respect to gender and age. Also the investigators have tried to compare the anxiety of gender and age of nurses. Anxiety is an unpleasant emotion or state of mind characterized by worry, apprehension, dread and fear. It is a common place experience that everyone has from time to time. Sometimes it is categorized as an emotion or affect depending on whether it is being described by the person having it (emotion) or by an outside observer (affect). Freud

(1923) in his psychodynamic theory of anxiety, views anxiety not just for external danger but also for the threatening breakdown in the ego's struggle to satisfy the id without violating the demand of reality and superego. Spielperger (1966) proposed that an operational and conceptual distinction be made between anxiety as a transitory state that fluctuates across time (state anxiety) and anxiety as a personality trait that is relatively stable across time (trait anxiety).The view of trait anxiety is similar to Atkinson's conceptualization of motives, which he defined as dispositional tendencies acquired early in childhood that are latent until aroused by situational ones. Samuel Atindanbila, Edward Abasimi Michael T. Anim. (2012) the results indicated that there was a significant difference in all the emotional states of depression, anxiety and stress with regards to the age of the nurses. Results show that the higher age of the nurses the more he or she is exposed to these emotional conditions and the stress level was higher in Rehabilitation unit as compared the rest of the unit. Shows, that the anxiety of female nurses was more than male nurses. Aguocha (2011) Career has been found to be highly associated with anxiety. Nursing profession in linked with anxiety and of course the hospital where the nurse's work either amplifies or keeps under manageable control their anxiety level and manifestations. Gellis, Z V P et. al. (2004) has conducted the study age difference, depressive mood, anxiety and propensity to leave in older and young mental health. They found that younger case mangers(cms) satisfaction with the supervisor, perceive job pressure and lack of organizational support were significant predictors of propensity to leave the job, older cms who reported lower satisfaction with financial rewards. The type of work they did and greater use of avoidance/ resignation and help seeking coping strategies, were more likely to rate themselves higher on the depressed mood scale.

Lambert and Lambert (2001) men are less satisfied in nursing than woman and male nurses have greater turnover intentions than do female nurses. Uwaoma (2000) the traditional beliefs that males are stronger than females and as such can face all that go with diseases. Singh (1989) found that employees who experienced high role stress manifested more symptoms of free floating anxiety, obsessive neurotic depression, hysterical neurosis, phobic anxiety, and somatic concomitants of anxiety.

2. Aim of the study

The aim of the study was that are difference in the anxiety level of male and female nurses' age range 25-35 compare to male and female nurses age range 36-45**.**

3. Hypothesis

There will be no significant difference in the anxiety level of male and female nurses' age range 25-35compare to male and female nurses' age range 36-45.

4. Method Participants

This study was conducted on a sample of 180 private hospital nurses of Meerut city (U.P.). The sample consisted of male (90); female (90); hospital nurse. The age range of nurses was between 25-36 and 36-45 years .The purposive sampling technique was used for selecting the sample.

Tools Used

The following tests were used in this study. Anxiety in occupational nurses is measured by using **Sinha's Comprehensive Anxiety Test (S C A T) Hindi version**,

constructed by A.K.P. Sinha (Raipur M.P.) and L.N.K. Sinha (Patna) scale and approved by National Psychological Corporation, Agra. Scale comprises of 90 questions, which are related to the personality of the individual. Individuals have to respond to all questionnaires without any time limit. Response for the questioner was kept secret for privacy.

   Statistical Analysis :-The obtained score data were analyzed by using 2 x 2 analysis of Variance (ANOVA), mean, and standard deviation (S.D.) of the anxiety score were also calculated.

5. Results

The obtained data after tabulation were statistically analyzed with the help of Analysis of Variance (ANOVA),mean and Standard deviation(SD).The obtained data result are interpreted and shown in the following tables, ANOVA is shown in table 1; Mean scores are shown in table 2 and Standard deviation test also shown in table 3.

Source of variance	Sum of squares	Degree of freedom	Mean Scores	F-ratio
Gender (A)	2464.20	1	2464.20	26.94**
Age (B)	60.09	1	60.09	0.66 ns
AxB	115.2	1	115.2	1.26 ns
Error	16090.49	176	91.42	
Total	18729.9	179		

Note: **Significant at 0.01 level   n.s.: Non Significant
Table 1: Summary of the Analysis of Variance for Anxiety Scores (N=180)

Gender (A)	Male (a₁)		Female (a₂)	
Age (B)	25-35 (b₁)	36-45 (b₂)	25-35 (b₁)	36-45 (b₂)
Mean	18.93	21.68	27.93	27.48
SD	8.40	6.41	13.21	9.19

Table 2: Table showing of mean Anxiety level and Standard Deviation (SD) of both the Independent Variables

Independent variables	Mean	Numbers
Gender: Male	20.30	45
Female	27.70	45
Age: 25-35	23.43	45
36-45	24.58	45

Table 3: Mean of Anxiety Score

6. Discussion

The Purpose of the present research was to study the effect of gender and age on the anxiety level of private hospital nurses. The obtained results have shown very interesting pattern of the effect of anxiety, gender and age on hospital nurses. In this study first independent variable was gender is designated as factor *A* second independent variable was age designated by *B*. Factor A has two levels male and female; factor B also has two levels 25-35 and 36-45 years.

The first hypothesis was that there was no significant difference in anxiety score of gender i.e. male and female nurses. The findings of the study show that there is significant difference in the anxiety level of male and female nurses. So, null hypothesis is rejected. A close look of table of ANOVA (table1) clearly reveals that F value of factor A is 26.94 that exceed that critical value at P<0.01 levels. This significant F ratio indicates that gender significantly affects the anxiety level of the nurses. The mean value of anxiety score of male nurses is 20.30 whereas for female is 27.70, which reveals the fact that female nurses have higher degree of anxiety, while male nurses have lower degree of anxiety. The reason might be that the gender differences are found to be important hallmarks of human behaviour which affects the anxiety and stress level of male and female differently because of the different biological system besides this female nurses doing double duty of home and hospital. Female nurses in addition to their job responsibilities have responsibilities of their families and household activities and family roles. The results of this study reveal that nurses who work in the private hospitals manifest anxiety with gender showing a significant effect on nurses' anxiety. Further investigations supported by Aguocha (2011) Gender have been associated with differences in anxiety manifestations and management that female nurses show greater degree of anxiety than their male counterparts.

Parmelee pa, Katz IR, Lawton MP.(1993) The study found that anxiety disorder in the female nurses were more than male nurses because most of Maternity and Riparian Hospitals nurses' were female nurses, and generally females are more susceptible to anxiety, these finding results coincide with the findings of which was done in Jordanian nurses.

A close look of the table of ANOVA clearly reveals that F value for factor B is 0.66. F ratio indicates that age has no significant effect on the anxiety level of private hospital nurses. But other studies show that according to *Samuel Atindanbila, Edward Abasimi, Michael T. Anim (2012)* there was a significant difference in all the emotional states of depression, anxiety and stress with regards to the ages of the nurses. The results showed that higher the age of the nurse the more he or she is exposed to these emotional conditions and the stress level was higher in Rehabilitation Unit as compared to the rest of the Units. The indication effect between age and gender was also found non-significant which suggest that these two variables do not interact with each other. In all the situation female nurses showed higher anxiety level than male nurses.

7. Conclusion

1-There is statistically significant difference between male and female nurses with female nurses shows high anxiety level of anxiety than their counterparts.

2- There is no significant difference in the anxiety level between two age groups (25-35 and 36-45 years) of nurses.

3- There is no significant interaction difference in anxiety level between gender and age of nurses.

Prevented

Although anxiety disorders cannot be prevented, there are ways to reduce your risk and methods to control or lessen symptoms. Recommendations include:

*Reducing caffeine, tea, cola and chocolate consumption.

*Checking with a doctor or pharmacist before using over the counter or herbal remedies to see if it contributes to anxiety.

*Exercising regularly, eating healthy foods, keeping a regular sleep pattern and avoiding alcohol.

*Seeking counselling and support after a traumatic or disturbing experience.

Acknowledgements

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