

Psychological Well-being of ambulance personnel in Elbeheira Governorate

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Abstract: Psychological well-being of ambulance personnel is essential in order to perform work duties effectively and cope with the stressful work environment. This in turn will improve their general health and enhance their work skills.

Objective: To determine the psychological well-being among ambulance personnel.

Design: A descriptive research design.

Settings: The study was carried out in twenty seven ambulance stations in Elbeheira

Subjects: All ambulance personnel in the previously mentioned stations were included in the study. Their number amounted to 100.

Tools: Two tools were used: Socio-demographic and Clinical data structured Interview Schedule, and Psychological well-being scale.

Results: More than two thirds of the study subjects have psychological well-being. The main factors associated with their psychological well-being were family and peer support.

Conclusion: Ambulance personnel had a psychological well-being and positive relationships "family and peer support" had a significant and positive effect on their psychological well-being and either verbal or physical abuse was the main stressor they face during their work.

Recommendation: In- service training program for all ambulance personnel in Elbeheira is important to be scheduled periodically about coping with work stressors in order to help them to express their feelings and work effectively.

Keywords: Psychological well-being, ambulance personnel, coping, positive relationships.

1. INTRODUCTION

Staff working in the emergency services (EMS) in general and ambulance personnel in particular is exposed to an important number of psychosocial risk factors as a consequence of the type of work, including high intensity of workload, lack of social support, lack of free time, violent, abusive, demanding patients or seriously ill patients, etc. These risk factors may alter their physical health, and above all, their mental health. The negative consequences of continuous exposure to these psychosocial risk factors outline serious problems not only for the physical and psychological well-being of ambulance personnel, but also for the quality of the care provided to their patients^(1, 2).

Traumatic events are often unpredictable, uncontrollable and can provoke feelings of fear and anxiety. Employees working in emergency services, by the nature of the work, are routinely exposed to traumatic events^(3, 4). Traumatic incidents and death constitute a significant part of the daily routine of the personnel of EMS. Research suggests that EMS personnel experience many reactions after exposure to traumatic events yet^(5, 6), admitting to being emotionally affected is regarded as difficult as it may lead to being perceived by their peers as not tough enough for the job⁽⁷⁾.

Research concerning traumatic events has shown that acute stressors may lead to serious mental disturbances, in particular post-traumatic stress disorder (PTSD) ⁽⁸⁾. PTSD is characterized by three interacting groups of symptoms; intrusive, avoidant, and hyperarousal phenomena. Post-traumatic stress disorder (PTSD) negatively affects the psychological well-being of rescue workers. The decisions they have to make within seconds about their patients' health and life, combined with the traumatic events that these professionals live every day have a significant impact on their performance as well as on the quality of patient's care ^(9,10).

Psychological well-being (PW) refers to positive mental health and it is a combination of positive affective states such as happiness and functioning with optimal effectiveness in individual and social life ^(7,11). Psychological well-being is about lives going well, the evaluations and judgments individuals make about the quality of their lives and the combination of feeling good and functioning effectively. Therefore, people with high PW report feeling happy, capable, well supported, satisfied with life, and so on. Also, as a consequence of PW is to include better physical health, mediated possibly by brain activation patterns, neurochemical effects and genetic factors ^(12,13).

The psychological wellbeing of employees is likely to significantly affect their functionality at work and can also have a ripple effect on their family, organizational productivity, and on wider society. Paying due care and attention to the psychological impact of traumatic events is an important consideration. So, the aim of this study was to determine Psychological well-being among ambulance personnel in Behira governorate.

Aim of the study:

The aim of this study was to determine the psychological well-being of ambulance personnel in El - Behiera Governorate.

Research question:

What is the level of the psychological well-being of ambulance personnel in El Behiera Governorate?

2. MATERIALS AND METHOD

MATERIALS:

Design:

A descriptive research design was utilized to accomplish this study.

Setting:

This study was conducted in 27 out of 54 of ambulance stations services in El Behiera Governorate. These stations are affiliated to the Egyptian ambulance authority. They provide many services including providing first aid for people in all types of emergencies and accidents either in the agriculture and desert roads or inside the governorate itself.

Subjects:

- A sample size was estimated using Epi Info program with the following parameters: Population size 180 over 3 months, Expected frequency=50%, Acceptable error10%, Confidence co-officion99%, Minimum sample size 86.
- All ambulance personnel in the previously mentioned stations who agree to participate in the study were included. Their total number was 100 persons.

Tools:

Tool I: Socio-demographic and work related data Structured Interview Schedule

It was developed by the researchers, based on related literature and was intended to investigate certain items related to:

- Socio-demographic characteristics of the ambulance personnel such as age, social status, level of educationetc.
- Ambulance personnel work related data includes; years of experience, weekly working hours, Types of accidents, presence of additional work, number of staff member in each center, ability to take decision during work, attending training programs.....etc.

Tool II: Psycho-social factors and Psychological Well -being Scale (PWB):

- **Psycho-social factors:** such as coping with work stressors, psychological impact of his job on his life, presence of frequent physical and psychological complaints as headache, abdominal pain, insomnia, low mood and anhedonia.

- **Psychological Well -being Scale (PWB):** It was developed by Ryff (1995)^(14, 15), it is a theoretically grounded instrument that specifically focuses on measuring multiple facets of psychological well-being. It consisted of 42 statements reflecting the six areas of psychological wellbeing namely; autonomy, environmental mastery, personal growth, positive relations with others, purpose of life and self- acceptance. Respondents rate statements on a scale of 1 to 6, with 1 indicating strong disagreement and 6 indicating strong agreement. Total score of each component ranged from 7-42. For each component, if total score ranged from 7-18 indicating poor level, 19-30 indicating fair level and 31-42 indicating good level. A high score indicates that the respondent has a mastery of that area in his or her life. Conversely, a low score shows that the respondent struggles to feel comfortable with that particular component.

- The total score of Ryff scale ranged from 42 to 252. If total score ranged from 42-112 indicating poor level, 113-182 indicating fair level and 183-252 indicating good level.

METHOD:

- Official letters were issued from the Faculty of Nursing, Damanhour University to the director of the main El Behiera regional ambulance service center.

- Approval of the director of the main regional ambulance center was obtained.

- **Tool I, data** Socio-demographic and work related data structured interview schedule was developed by the researchers based on relevant literature.

- **Tool II**, “Psycho- social factors and psychological Well-being Scale” was translated into Arabic language.

- The study tools were tested for their content validity by five jury experts in Psychiatric Nursing in Alexandria University.

- A pilot study was carried out on fifteen ambulance personnel in El-Beihera Governorate to test clarity of the tools and in order to determine the approximate time needed for the tools to be completed. The necessary modifications were done and ambulance personals that were enrolled in pilot study were excluded from the study sample.

- Reliability of tool I and tool II were tested using Cronbach's Alpha test and results were 0.87, 0.85 respectively.

- A list of all ambulance stations in El-Beheira was obtained from the director of the main regional ambulance center. All stations presented in El- Beheira were classified into 3 regions including stations placed on agriculture road, stations placed on desert road and stations around center of Damanhour . Nine stations were chosen randomly using simple random sampling technique from each region.

- An interview was done with every ambulance personnel at each station which was chosen randomly to collect the data in their working place using tool I and tool II. It took between 15-20 minutes.

- Data were collected during a period of almost one year starting from January 2017 to March 2018.

Ethical considerations:

- Verbal consent was obtained from each ambulance personnel after explaining the purpose of the study. Privacy was maintained during the process of data collection. Confidentiality of the collected data and anonymity were guaranteed.

Data analysis:

The raw data were coded and transformed into coding sheets. Then, the data were entered into the Statistical Package for Social Sciences (SPSS) version 17 using personal computer. Output drafts were checked against the revised coded data for typing and spelling mistakes. Finally, analysis and interpretation of data were conducted. The following statistical measures were used:

- Descriptive statistics including frequency and distribution were used to describe different characteristics.
- ANOVA test was used to examine the normality of data distribution.

3. RESULTS

Table (1): Frequency distribution of the studied ambulance personnel according to socio -demographic characteristics:

Socio- demographic characteristics	No./%
Age (years)	
20 -	39
35 –	38
50 – ≤ 60	23
Level of education	
Nursing school	39
Technical Institute	30
Bachelor in nursing	5
Others	26
Marital status	
Single	4
Married	93
Divorced	3
Years of experience	
1 -	6
5 -	35
10 -	23
≥15	36

Table (I) shows socio- demographic characteristics of ambulance personnel. In relation to age, more than one third of the studied ambulance personnel (39%), (38%) was ranged between 25-35 years old and 35- <50 years old respectively. Regarding level of education 39% were graduated from nursing school. Moreover, the majority of the studied ambulance personnel were (93%) married. In addition, more than one third of studied ambulance personnel (36%) have 15 years and more of experience.

Table 2 shows frequency distribution of the studied ambulance personnel according to work characteristics. It can be noted that, more than three quarters of ambulance personnel (80%) were worked 48 hrs / week consecutively. Moreover, more than half of ambulance personnel (59%) reported that their number is not enough in the station. Considering additional work more than half of the studied sample (60%) did not have additional work. On the other hand, the majority of ambulance personnel who had additional work 27 working as nurse in private hospitals.

Regarding availability of rest, the majority (94%) reported that they have a place for taking rest when they were not on call and more than half of ambulance personnel (55%) reported that sleeping hours are not enough. However, the majority of ambulance personnel (83%) deal with the all types of emergency and nearly half of ambulance personnel (49%), (45%) reported that the rate of the emergency situations they had per day was from one to less than three times and from three to six times respectively. Concerning, availability of workshops, the majority of ambulance personnel (81%) attend workshops to increase their skills. Moreover, more than three quarter of ambulance personnel (77%) reported that the institution provide chances for workshop.

Table (2): Frequency distribution of studied ambulance personnel according to work characteristics:

Work characteristics	No./%
- Working hours	
48 hrs / week	80
72 hrs / week	9
More than 72hrs / week	11
- Presence of enough member in station	
Yes	41
No	59
- Additional work:	
- presence of additional work:	40
Yes	60
No	
- Type of additional work (40)	27
Nursing in private hospital	4
Private work	9
Others	

Conti. Table (2): Frequency distribution of studied ambulance personnel according to work characteristics:

Work characteristics	No./%
- Availability of rest:	
- Hours of sleeping	45
Enough	55
Not enough	
- Presence of a place for taking rest in work	
Yes	94
No	6
Emergency work:	
- Emergency type	
Suicide	4
Medical emergencies	8
Accidents	26
All types of emergencies	83
- Emergency rate/day	
1 -	49
3 -	45
≥6	6
- Availability of workshops:	
- Attending workshops to increase skills	81
Yes	19
No	
- Institution provide chances for workshop	
Yes	77
No	23

Table 3 illustrates frequency distribution of the ambulance personnel according to their physical and psychological complain, coping strategies with stressors and recreational activities. In relation to their physical and psychological complains the entire studied ambulance personnel reported that they exposed to either verbal or physical abuse during their work from relatives or people in the street. More than half of them (52%) had insomnia and nearly half of the sample (47%) had headache. Moreover, more than two third (67%) of the personnel felt that they are burned psychologically and physically from their profession and they reached to the end.

Table (3): Frequency distribution of ambulance personnel according to their physical and psychological complains.

Statements	NO. /%
- Physical and psychological complains:	
- Exposure to verbal or physical abuse?	
Yes	100
No	0
- *Complaining from any physical symptoms	
Headache	47
Abdominal pain	15
Insomnia	52
Others	13
- Feeling burned psychologically and physically	
Yes	67
No	33
- Profession consumes member psychologically	
Yes	78
No	22
Feeling reached to the end	
Yes	31
No	69

* More than one answer

Table 4 reveals Frequency distribution of ambulance personnel according to their coping methods with stressors and recreational activities. In relation with coping method with stressors, it was found that more than half of the ambulance personnel (57%) cope with stressors by talking with their colleagues, while more than one third of them (36%) were thinking in the positive gains of work and few of them (6%) reported taking work leaves. Concerning recreational activities, 91% of ambulance personnel reported that the institution did not provide chances for recreation, more than three quarter of the studied ambulance personnel (77%) sit with their families during week end as a recreational activities.

Table (4) : Frequency distribution of ambulance personnel according to their coping methods with stressors and recreational activities.

Statements	NO. /%
*Coping methods with work stressors	
Talking with collogues	57
Keep silent and not talk with anyone	14
Being sarcastic	17
Thinking in times that work will be ended	22
Thinking in the positive gain of work	36
Stop thinking	16
Being absent in work	6
- Recreational activities:	
- Institution provide chances for recreation	
Yes	9
No	91
- * Recreational activities during week end	
Sleeping the most of the day	15
Meeting friends	37
Sitting with family	77
Practice sports	19
Others	18

* More than one answer

Table 5 demonstrates levels of psychological well-being and its components of the ambulance personnel. It can be noted that the highest percent with level good was in positive relationship component (69%) with total score 75.66%, followed by life goals component (65%) with total score 71.11%. While, the percent score of autonomy was the lowest score 62.49 %. Moreover, more than half of ambulance personnel were in level fair (55%) in this component. In addition, near two thirds of studied ambulance personnel were in level good (61%) and the total score of psychological wellness was 69.70 %.

Table (5): Levels of psychological well-being (PW) and its components of ambulance personnel:

psychological well-being and its components	Total score				
	Poor	fair	good	Mean ± SD.	(%)
	No/ %	No/ %	No/ %		
Autonomy	3	55	42	28.87 ± 5.52	62.49± 15.77
Environmental empowerment	1	54	45	30.14± 5.33	66.11 ± 15.23
Personal growth	4	39	57	32.03 ± 7.06	71.51± 20.18
Positive relationship	3	28	69	33.48 ± 6.77	75.66 ± 19.35
Life goals	4	31	65	31.89 ± 6.43	71.11 ± 18.37
Self-acceptance	4	33	63	31.95 ± 6.72	71.29 ± 19.20
Psychological wellness	1	38	61	188.4 ± 28.96	69.70 ± 13.79

Table 6 demonstrates relationship between total score of psychological well-being of ambulance personnel and its components. From this table it can be shown that there was a significant relationship between the ambulance personnel’s psychological well-being and their autonomy, environmental mastery, personal growth, positive relationships, purpose in life and self-acceptance p= 0.001for each component.

Table (6): Relationship between total score of psychological well-being of ambulance personnel and its components

Components of psychological well-being	Psychological wellness	
	R	P
Autonomy	0.705*	<0.001*
Environmental Mastery	0.742*	<0.001*
Personal growth	0.883*	<0.001*
Positive relationships	0.737*	<0.001*
Purpose in life	0.702*	<0.001*
Self-acceptance	0.800*	<0.001*

R: Pearson coefficient *: Statistically significant at p ≤ 0.05

Table 7 reveals relationship between the ambulance personnel psychological well-being and age, emergency rate, coping methods with stressors and recreational activities. The researcher tested the relationship between ambulance personnel psychological well-being and all variables in this study. It was found a significant relationship only between ambulance personnel psychological well-being and their age, emergency rate, coping methods and the week end recreational activities p=0.010, 0.002, 0.001, 0.013 respectively.

Table (7): Relationship between the ambulance personnel psychological well-being and age, emergency rate, coping methods with stressors and recreational activities:

Items	Psychological wellness	Test sig.	of p
Age (years) 20- 35- 50 – 60	73.44 ± 11.89 64.49 ± 14.26 71.95 ± 13.87	F= 4.80*	0.010*
Emergency rate 1 - 3 - ≥6	74.52 ± 10.61 65.29 ± 14.74 63.33 ± 17.95	F= 6.603*	0.002*
Coping methods with stressors Talking with colleagues Keep silent and not talk with anyone Being sarcastic Thinking in times that work will be ended Thinking in the positive gain of work Stop thinking Being absent in work	70.31 ± 13.50 63.16 ± 15.15 74.37 ± 10.83 66.49 ± 15.20 78.98 ± 9.92 72.86 ± 15.35 60.08 ± 7.75	F= 4.508*	<0.001*
Activities in the week end Sleeping the most of the day Meeting friends Sitting with family Practice sports Others	72.92 ± 14.94 69.70 ± 14.28 69.36 ± 14.84 81.55 ± 7.13 71.30 ± 9.84	F= 3.272*	0.013*

F: ANOVA test P: p value for comparing between different categories * : Statistically significant at $p \leq 0.05$

4. DISCUSSION

Ambulance personnel play a vital role in any society. They save others life, provide first aid, help and care for the unable persons. Being exposed to traumatic experiences, death and being responsible for taking the decision about cases that need an emergency intervention make the working environment highly stressful and consequently affect the individuals' psychological well-being^(16,17).

In the current study the total score of psychological well- being was 69.70 %, their mean ±SD was 188.4 ± 28.96, near two thirds of the studied ambulance were psychologically well with good level (61%) and satisfied with their work despite all stressors they faced. This may be due to the fact that the ambulance personnel realize that their job has a reward from Allah as a part of their faith and just providing help and saving others' life is satisfying especially when dealing with children. This is in accordance with Ramirez et al (1996)⁽¹⁸⁾ who reported that ambulance personnel indicated that providing care for others is personally gratifying.

Although, emergency work may be a source of stress for ambulance personnel, yet it has different advantages as it enhances altruistic behaviors, spiritual wellbeing, personal growth & satisfaction, and finding a meaning and purpose of life through saving other's life or helping other at a time of inability⁽¹⁹⁾. This mature coping mechanism may help ambulance personnel to feel psychologically well as it was mentioned by nearly three quarters of the studied subjects that they had a purpose in their life and they go through promoting themselves. Moreover, in our study there was a significant relationship between thinking of ambulance personnel in the positive gain of work as a way of coping with stressors and their psychological well- being. In addition, there is a significant relationship between ambulance personnel psychological well-being and their self - acceptance, positive relations, autonomy, environmental mastery, purpose in life and personal growth.

Working in the ambulance service is a job where you have to be a healer, and a listener - where you have got to take the complaints and the aggression that people show you. Staff in emergency settings is regularly exposed to demanding and traumatic situations, including severe injuries, aggressive individuals, and death.⁽²⁰⁾ In our study, the entire studied ambulance personnel reported that they exposed to either verbal or physical abuse during their work from relatives or people in the street and it was the main stressor they faced during their work. These findings are in accordance with many studies done on emergency workers including ambulance personnel who rated physical and verbal abuse as major stressors in their jobs.^(21, 22)

Needless to say that working in such environmental stressors will need many coping strategies from the ambulance personnel to enable them to continue working properly. The finding of this study shows that more than half of the studied ambulance personnel (57%) cope with stressors by talking with their colleagues and they reported that they spent their week end with their families followed by meeting friends. Moreover, the majority of the studied subjects were married and supported by their family. In addition, nearly three quarters of the studied sample reported that positive relations, that are common in the rural areas where they live, played an important role in helping them to tolerate and cope with work stressors. The study also shows that positive family relationships have a significant relation with ambulance personnel psychological well-being, this is in accordance with Porter(2013)⁽²³⁾ who stated that living within a family, having friends, giving and receiving love, giving the ambulance personnel opportunity to express emotion and fulfill their needs for belonging and intimacy, having a meaning and purpose in life which in turn act as coping mechanism against negative effect of stress on ambulance personal psychological well-being.

It was proven that ambulance personnel may complain from either physical or psychological problems as mentioned by Pek E et al (2015)⁽²⁴⁾. This is in accordance with our study as nearly half of the studied subjects were complaining from insomnia followed by Headache and bad mood, and more than two thirds reported that their work burned them physically and psychologically. But, the surprising issue is that generally they were psychologically well. It may be due to their engagement in work as few percent 6% reported being absent from work. Also, the need of the ambulance personnel for the salary to meet life demands and being responsible for their families motivates them to accept their work.

Some individuals, regardless of high job demands and long working hours, show no symptoms of burnout as 69% of studied sample reported that they did not feel burned psychologically and physically and 69% did not feel reached to the end. On the contrary, they seem to find pleasure in working hard and dealing with job demands. From a positive psychology perspective (Seligman & Csikszentmihalyi, 2000)⁽²⁵⁾, such individuals could be described as engaged in their work. The focus on engagement as the positive antithesis of burnout promises to yield new perspectives on interventions to promote healthy perceptions, beliefs and physical well-being and to alleviate burnout (Salovey, Rothman, Detweiler, & Stewart, 2000)⁽²⁶⁾. Sense of coherence might moderate the impact of occupational stressors on the individual's affective outcomes (e.g., burnout and work engagement)⁽²⁷⁾.

Another issue that is surprising in the present study that ambulance personnel aged between twenty to less than thirty years and those aged 50 years and more were more psychologically well than the others. In relation to who aged between twenty to less than thirty years; this may be due to their resilience and acceptance of their work to keep in this job while ambulance personnel aged 50 years and more, their psychological wellbeing may be related to the effect of the experience throughout their working life. Some studies confirmed our results as Alexander (1998)⁽²⁸⁾ and Robinson (1993)⁽²⁹⁾ and other studies against our results as Humpel(2001)⁽³⁰⁾. Ambulance personnel in the present study verbalized that even if they deal with accidents with different types they still feel pain each time they do their work even after many years, but years of experience helped them to take decision about cases rapidly and provide care skillfully.

5. CONCLUSIONS

It can be concluded from the present study that the ambulance personnel faced many work stressors. Family and peer support play a great role in coping with these stressors and enhancing their psychological being. Being from a rural culture emphasizes the role of family support.

6. RECOMMENDATIONS

Based on the results of the study, the following recommendations are suggested:

- 1) In service training program for all ambulance personnel in all ambulance stations in Elbeheira Governorate should be done periodically about coping with work stressors. This will help them to ventilate their negative emotions and improve their practice while dealing with accidents.

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- 2) The ambulance institutions should provide recreational activities and trips for their personnel to enhance their psychological well being.
- 3) Listening to ambulance personnel needs , opinions and sharing their experiences with their authoritative figures is very important to solve the problems they face during their work and to provide incentives to motivate them.
- 4) Media programs should inform citizens about the great role of the ambulance personnel and their rights to be respected from people.

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