**Investigation the Relationship among personality characteristics, burnout and marital disenchantment with mental health in nurses in Isfahan City**

Farzaneh Forouzanfar1, Mohammad Ali Nadi2, Hossein Molavi3

1. Msc of General Psychology, Islamic Azad University, Research Science Branch, Isfahan, Iran

2. Assistant Professor of Psychology, Islamic Azad University Isfahan science and Research

3. Professor of Psychology, Islamic Azad University Isfahan science and Research

shakiba.forozanfar@yahoo.com

**Abstract: Background:** Nursing is one of the main pillars of the health system and public health nurses and the factors influencing it as a continuation of the health system objectives. This study was conducted to determine the relationship between personality characteristics, burnout and marital disenchantment with public health nursing is done. **Methods:** This study was a cross - correlation. The population of nurses in private hospitals in Isfahan sample included 250 patients with multi-stage cluster sampling by using the Cohen, et al (2001), was selected. Instruments included a demographic questionnaire, the Big Five personality, burnout, marital disenchantment with public health.

**Results:** Acceptable correlation between neuroticism and depression was significant (P ≤ 0.01). Marital disenchantment with all aspects of public health has had a significant association (P ≤ 0.01). Components of burnout in terms of public health intensity with frequency, but not significantly related to emotional exhaustion had a significant relationship with all aspects of general health (P ≤ 0.01). The prevalence of anxiety and depression were significantly related to depersonalization and lack of social function of frequency of failure is significant (P ≤ 0.05).

**Conclusion:** Results of regression analysis showed that the best predictors of general health, frequency of emotional exhaustion, marital disenchantment, failure intensity, and acceptability of neuroticism (P ≤ 0.01). Provide counseling sessions aimed at expression recognition problems and marital problems and attempts to fix them, nurses can cause physical and mental health of nurses and increase their productivity.

[Farzaneh Forouzanfar, Mohammad Ali Nadi, Hossein Molavi. **Investigation the Relationship among personality characteristics, burnout and marital disenchantment with mental health in nurses in Isfahan City.** *N Y Sci J* 2014;7(7):13-17]. (ISSN: 1554-0200). <http://www.sciencepub.net/newyork>. 2

**Keywords:** Personality characteristics, burnout, marital disenchantment, public health nurses

**1. Introduction**

Nursing is one of the most stressful professions (1).State of health is not only a person's physical functions, but also depends on many aspects of his mental functioning and the welfare of the complete physical, mental, social, and not just the absence of disease (2).Cole and Nelson believe that 93% of nurses are frequently affected by workplace stress that this can affect their physical and mental health.One of intrapersonal factors that influence personality has a major impact on public health. A person's pattern of thoughts, emotions and behaviors with psychological mechanisms behind these patterns is known to hide or reveal. Buss believes each of the five major factors neuroticism, extraversion, flexibility, acceptability and conscientiousness are finding a set of attributes that can be adapted to the individual and the group to achieve needs help (3).Srivastava believes in operating neuroticism, emotional stability in a range of negative emotions such as sadness, irritability and nervous tension and flexibility is the extent, depth and complexity of thought forms, experiences and one's mind is concerned (4). Josef & Hayes showed high marks in each of the safety devices with higher extraversion, higher conscientiousness were associated with low effect.

The researchers concluded the study on 212 students of medical university dormitory that there is a significant relationship between neuroticism and general health (5).The results of another study showed that between extraversion and conscientiousness have significant relationships with general health (6).Burnout describe negative changes in attitudes, mood, and behavior in dealing with work-related stress is due to the continuity and duration of stressors, affects health. Depression, feelings of helplessness and feeling trapped in a job of work and emotional problems in these patients. Although these pressures are increasingly tolerated in the short term, but long-term physical and psychological resistance in humans wither eventually leads to burnout (7). Insecurity in intimate relationships, personality traits influencing multilateral relations and crisis profoundly intimate partner behavior and marital life can be a gradual deterioration of resource exhaustion and disenchantment appears that when couples are realized despite the efforts, their relationship does not and will not live.

Gradual disintegration of the marital relationship is affected by several factors. Painez believes accumulation and erosion psychological stresses of everyday life will eventually lead to marriage are fed up. Backer also believes that marital disenchantment among exogenous factors is individual impact on public health and marital disenchantment with the role of mediator in the relationship between burnout and general health of the people (8). Review of published research in recent years, it is found that the studies only investigate the relationship between burnout and public health nursing (9, 10). Some public health has addressed the relationship between marital disenchantment (11, 12). Factors affecting the occupational and public health nurses can achieve help researchers to be able to help with planning strategies and approaches for providing physical and mental health and welfare activities. The present study investigated the personality characteristics, burnout and disenchantment with public health nurses has married together.

**Methods**

This study was a cross - correlation. A survey of all nurses in private hospitals in the city which was estimated at 700 people is significant. To determine the sample size based on Table kohen et al., 250 subjects were considered. Multistage cluster sampling method and data were collected through a questionnaire. First, demographic information about the respondents' age, sex, marital status, job experience was important.

The Big Five Personality Inventory (BFI) The main features of the five-factor inventory through short-term measures, ie the need to measure the ratio of the principal components of five factors of personality, including neuroticism, extraversion, flexibility, openness and conscientiousness through expressions Kentel & Donahu, Jone encouraged to build inventory. Accordingly, an efficient and flexible measuring five dimensions of personality of an individual when there is a distinct measurements provide. The questionnaire included 44 items with five-point scale from strongly disagree is equal 1 and expressions that completely agree is graded 5.

Research on Reliability was calculated using Cronbach's alpha for the factors were neuroticism, extraversion, flexibility, openness and conscientiousness were 0.84, 0.72, 0.76, 0.6, 0.85, respectively (13). Maslach Burnout Inventory III includes 22 items with three subscales: emotional exhaustion, depersonalization and lack of personal 7-point Likert scale ranging from never (zero) to very high (6) has been set. It has two types of instruction execution.

(1) Frequency: The number of times the feeling of burnout is experienced in encompasses three aspects.

(2) Intensity: The intensity of the subject in each case to feel the burn covers.

Research on the reliability of the questionnaire, 0.74 reported (14). In the present study, Cronbach's alpha for the subscales of the questionnaire based on the following:

Emotional fatigue, 0.8, the intensity of depersonalization, 0.77, severity, lack of personal accomplishment, 0.64, the frequency of emotional exhaustion, 0.86, depersonalization frequency 0.80 and the frequency of failure of individual 0.48. Four questionnaires aimed at measuring the degree of disenchantment with disenchantment Pinez marital and marital couples were made consisting of 21 questions, 17 questions including negative ones, such as fatigue, discomfort, worthless and 4 questions including positive expressions such as happy and energetic being. The 7-point Likert scale questions in a range between (1) never to (7).

Naim in their study of the reliability of the questionnaire using Cronbach's Alpha and attenuation, respectively, 0.78 and 0.81 has been estimated (15). In the present study, the Cronbach alpha reliability of this scale on 0.60 is obtained. Fifth General Health Questionnaire General Health Questionnaire (GHQ) was prepared by Hiller and Goldberg consists of 28 questions in 4 domains of physical symptoms (from Question 1 to 7), anxiety (question 8-14), Social function (question 15-21) and depression (from Question 22 to 28) will be assessed. Each subscale contains 7 questions and 5 multiple choice questions, Likert scale questionnaire reliability rate of 0.85 and reliability of the above mentioned order of 0.80, 0.92, 0.75 and 0.88 has been reported (16).

In the present study, the alpha reliability of the questionnaire based on 0.80 and its dimensions were 0.95, 0.96 and 0.98 is obtained. Reference data, after obtaining permission from the authorities and hospital staff nurses were collected. Data analysis was performed using the software spss 20. To analyze the data, descriptive statistics, including mean, standard deviation and inferential level, the Pearson correlation coefficient and regression analysis were used.

**Results**

In presenting the findings, the demographic variables are presented in frequency tables. At the end of the research findings of the structural equation is outlined.

According to the results in Table (1) 78.54 % of participants in the study were female and 21.46 percent were men.

Table 1: Distribution of participants in terms of gender

|  |  |  |
| --- | --- | --- |
| Statistical IndexGender | Frequency | Frequency percent |
| Woman | 194 | 78.54 |
| man | 53 | 21.46 |
| Total | 247 | 100 |

The overall mean (SD) age was 7.25 34.18 years and the mean and standard deviation, work records 7.20 10.05 years.Most of the study population was 78.54% were female. Table 2 shows this openness, acceptance and severity of failure, respectively; with averages of 33.96, 32.68 and 32.25 have the highest average. Marital disenchantment, the frequency and intensity of depersonalization, respectively, with a mean of 1.56, 4.14 and 5.19 are the lowest.

Significant relationship between demographic variables, there is a component of general health. It has not been used in structural analysis.

Table 2: summarizes the mean and standard deviation variables

|  |  |  |
| --- | --- | --- |
| Variables | Mean | SD |
| Neuroticism | 25.49 | 4.43 |
| Extraversion | 23.38 | 3.38 |
| Openness | 33.94 | 4.44 |
| Acceptance | 32.68 | 4.12 |
| Conscientious | 3.93 | 4.55 |
| Physical | 13.47 | 2.87 |
| Anxiety | 13.36 | 2.87 |
| Social | 14.42 | 2.93 |
| Depression | 9.75 | 4.08 |
| Marital disenchantment | 1.56 | 0.69 |
| Emotional fatigue | 17.15 | 12.37 |
| Intensity of depersonalization | 5.19 | 5.92 |
| Severity of failure | 32.25 | 7.96 |
| The frequency of emotional exhaustion | 41.11 | 10.27 |
| The prevalence of personality profile | 4.14 | 4.38 |
| Frequency of failure | 28.65 | 8.66 |
| Age | 34.18 | 7.25 |
| Work experience | 10.05 | 7.20 |

Table 3: Correlation matrix of variables

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Variables | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| neuroticism | - |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| extroversion | 0.39 | - |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Openness | 0.30 | 0.20 | - |  |  |  |  |  |  |  |  |  |  |  |  |  |
| acceptance | -0.07 | -0.15 | 0.24 | - |  |  |  |  |  |  |  |  |  |  |  |  |
| conscientiousness | 0.32 | 0.27 | 0.43 | 0.14 | - |  |  |  |  |  |  |  |  |  |  |  |
| Physical | -0.10 | 0.04 | -0.06 | -0.16 | 0.02 | - |  |  |  |  |  |  |  |  |  |  |
| anxiety | 014 | 0.02 | -0.02 | -0.08 | -0.01 | 0.64 | - |  |  |  |  |  |  |  |  |  |
| Social | -0.07 | 0.09 | -0.01 | 0.02 | 0.00 | 0.45 | 0.47 | - |  |  |  |  |  |  |  |  |
| depression | -0.23 | -0.09 | -0.15 | -0.17 | -0.11 | 0.52 | 0.57 | 0.43 | - |  |  |  |  |  |  |  |
| marital disenchantment | -0.11 | 0.03 | -0.05 | -0.02 | -0.06 | 0.42 | 0.40 | 0.23 | 0.33 | - |  |  |  |  |  |  |
| intensity of emotional exhaustion | -0.12 | -0.04 | 0.03 | 0.03 | -0.03 | 0.14 | 0.08 | 0.05 | 0.01 | 0.07 | - |  |  |  |  |  |
| intensity of depersonalization | 0.00 | 0.02 | 0.09 | -0.04 | 0.01 | 0.08 | 0.14 | 0.07 | 0.06 | 0.16 | 0.59 | - |  |  |  |  |
| failure to strictly | 0.01 | 0.03 | 0.03 | 0.03 | 0.03 | 0.15 | 0.02 | 0.02 | 0.10 | -0.05 | 0.39 | 0.16 | - |  |  |  |
| frequency of emotional exhaustion | -0.11 | -0.01 | -0.03 | -0.04 | -0.02 | 0.36 | 0.43 | 0.28 | 0.37 | 0.46 | 0.11 | 0.17 | -0.02 | - |  |  |
| frequency of depersonalization | -0.02 | 0.01 | -0.01 | 0.01 | -0.02 | 0.15 | 0.24 | 0.07 | 0.26 | 0.25 | 0.08 | 0.17 | -0.02 | 0.53 | - |  |
| Frequency of failure | 0.01 | -0.02 | -0.02 | -0.05 | -0.08 | 0.14 | 0.13 | 0.17 | 0.15 | 0.13 | 0.00 | 0.04 | 0.04 | 0.26 | 0.12 | - |

Table 4: Results of simultaneous multiple regression analysis to predict the way the general health characteristics, burnout and marital disenchantment

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Predicting Variables | R | R2 | R2 Modified | F | B | T | P |
| Marital disenchantment |  |  |  |  | 0.27 | 4.44 | 0.01 |
| Severity of failure | 0.055 | 0.31 | 0.27 | 9.55 | 0.13 | 2.23 | 0.02 |
| The frequency of emotional exhaustion |  |  |  |  | 0.30 | 4.11 | 0.01 |
| Neuroticism |  |  |  |  | -0.12 | -1.98 | 0.04 |

These findings suggest that beta coefficient per unit increase in marital disenchantment, public health, 0.27, for every one unit increase in the severity of failure, public health, 0.13, for every one unit increase in the frequency of emotional exhaustion, general health of the 0.30 and for every one unit increase in neuroticism, general health, and 0.12 decreases. Based on the beta coefficients in the table show that the only effect of marital disenchantment and frequency of emotional exhaustion on public health is significant (P <0.05).

**Discussion:**

The results in Table 2 indicate that marital disenchantment has had a significant mental health (P <0.01). The study findings are consistent with Wissmann, Ablacrou and Setirk, Estee et al.; Shahi and Ghaffari et al. (17).

Marital instability or any hand in an unhappy marriage, in addition to the mental peace is disturbed and increased anxiety and depression, as well as family life and survival is threatened and will add to the broken family. Depression and anxiety, spouses, and other mental health problems before were increased. Nursing jobs due to the pressure that builds, not only job performance but also affects the functioning of the family environment and family problems and their causes to be intensified (18).

Nurses' incidence of marital disenchantment due to severe interference problems within the family and within jobs by which people can not tolerate environmental stresses in both developed and brought pressure to respond and deal with them is difficult. The higher the level of marital satisfaction and general health is obtained.

Significant correlation between the frequency of emotional exhaustion burnout and mental health (P <0.01) results are in agreement with the results of Saberi and colleagues (10).

In the present study, results showed that those terms do not affect the severity of stressors, but in terms of continuity and duration of the stressors involved are suffering from burnout such as emotional exhaustion and mental health nurses have shown maximum influence. Nursing jobs due to difficult working conditions and high responsibility, high stress jobs are among the most multiple internal factors and demands of the organization and the client's issues such as jobs, including interpersonal conflicts and job security are factors that are a source of pressure. Every human being, next to their deep questions is considered. The person's general health while stress is not removed.

The burnout will continue due to a long-term involvement in emotionally demanding situations is occurring resources include organizational factors, is between the individual and the individual. In this study, simultaneous entry of all independent variables were the best predictors of general health, frequency of emotional exhaustion, marital disenchantment with the intensity of personal failure, neuroticism has been investigated.

The greatest effect on mental health nurses' burnout and emotional exhaustion dimensions of burnout also has the highest power to predict effects; this indicated that nurses in stressful situations than is its emotional force and inappropriate emotional reactions offer. Their emotional reactions are anxious because they feel a sense of stagnation and depression and lose their effectiveness.

Then we can predict the effect of marital disenchantment has. Family issues and problems that occur in their families and are associated with workplace stress, has had the most influence on public health nurses.

Failure of the component that is strongly predictive of general health effects. Take that feeling and perception of people towards themselves and their functioning, general health affects. If your practice and your inertia was estimated as the ineffective or feedback control based on the ineffective managers and their clients are to receive makes a frustrated Individuals been weaken self and they trust to reduce their breath. The incidence of anxiety, depression and feelings of efficacy are lacking. It's a significant correlation between neuroticism and general health P<0.01 and our findings were consistent with Baghiani and colleagues (5). High scores on neuroticism and affective instability, negative an emotion such as fear, sadness, hurriedly, anger and hatred. These individuals are more prone to impulsivity and aggression. Physical activity is less likely to prefer to stay at home that will not lead to public health.  Nurses have an ongoing relationship with patients suffering from physical problems of morale and negatively affected their mood.

According to the results obtained in this study suggest that training in emotional control, communication skills, improve self-knowledge and to improve public health nurses to be held within the individual characteristics and counseling sessions to create problems for the expression and recognition of nurses' marital problems and attempts to fix them is to be held.

Limitation of this study is that the results are based on the relationship between cause and effect as a result of this interpretation is not reasonable. This study was conducted on nurses in private hospitals in generalizing the results to the spatial and temporal ranges should be cautious.

This research report is done automatically, regardless of where they are used in most internal and external research adverse decision may serve to socially desirable or undesirable power to intervene in future research that can be controlled during the data analysis.

**Conclusion:**

Public healths nurses are the most common factors affecting occupational stressors and issues that exist in the work environment and makes people gradually wither and stagnate the psychological and physical fatigue and this has affected the responses to their surroundings. It measures the efficiency and effectiveness of strategies that can be felt desirable to keep the focus on organizational stressors and reduce their and developing tools and programs for the improvement of negative feelings and emotions can greatly help individuals and hospital environments.

**References:**

1. Payami Bosari M. The status of the relationship between social support and burnout nurses, critical care journal university of Medical sciences in Zanjan. 2000; 8 (33): 52-57.
2. Ganji H. Mental health. Tehran. Arsbaran. 1997.
3. Buss DM. Social adaptation and Five major foctors of personality. Inj .s. wiggins (Ed). The Five-Factor model of personality. 1996; Theorctical perspectives. New York: Guilford. (180-207).
4. Srivastava S. Measuring The big Five personality factors. Retrieved [Today’s data] from http: //www.uorgan. edu/~sanjan/big five. Html. 2006.
5. Baghyani Moghadam M, Motlagh Z, Sabze Makan L, Ghari pour Gherghaniza, Tavasoli A, Shahbazi H. The relationship between personality charactristics and Public health in the medical university students yazd. Journal of research in the medical science zahedan. 2011; 13: 38-45.
6. Grosi Farshi MT, Sofiani H. The relationship between personality charactristics and public health in the university students Tabriz. Studies and Psychology. 2008; 9 (2): 47-63.
7. Vankomen GJ. Physician life and career health and development. In: Goldman LS, Myers M, Dickstein Ly, Editors, The hand book of physician health: The essential guide to understanding the health care needs of physicians New York: American Medical Association. 2002; 289-299. Lukmans. Medical surgical nursing. 3 rd ed. Philadephia: W. B saunder. 1987.
8. Backer AB. The crossover of burnout and its relation to partner health. Stress and Health. 2009: 25: 343-353.
9. Asadi J, Borjali A, Jomehri F. The relaitionship between emotional intelligence, burnout and mental health workers of Iran khodro company. Research news and Advice. 2007; 6 (22): 41-56.
10. Saberi M, Sadr Sh, Ghadyari M, Bahari F, Shahmoradi H. Public health related burnout of judges and prosechotors working in the courts of Tehran. 2008; 14 (2): 92-98.
11. Ahmadi Kh, Fathi Ashtiani A, Navabi Nejad Sh. The underlying factos – interpersonal communication – affecting bilateral zuzgay marriage, Family Research. 2005; 1 (3): 221-237.
12. Ahmadzadeh A. Examine the relationship between marital satisfaction and mental health amoung famel and male Teachers working in secondary schools education in Tehran high school academic year 2004-2005. MA Thesis psychology. University of Teacher education. Faculty of psychology and educational science. 2005.
13. Shokri O, Daneshvar pour Z, Asgari A. Geneder Differences in Academic Performance: The Rale of personality traits. Journal of behavioral sciences. vol 2, NO. 2; 127-142.
14. Fahimnia F, mosakhani M, Azargon M. The relationship between learning organization dimensions of burnout (Case study: The National Library and Archives of the Islamic Republic of Irans). Journal of Academic Librarianship and Information Reserch. Vol, 45 No. 56. Summer 2011; 13-34.
15. Naderi F, Eftekhar Z, Amelazade S. The relationship between personality traits and intimate partner relationships with marital disenchantment with the spouses of male drug users in Ahvaz. New findings in the psychology woman and family research center. 2009.
16. Norbala A, Mohamady K. Bagheri yazdy A. Study of psychiatric disorders in Tehran. Journal of research Hakim. Vol 2, No. 4. 1999.
17. Whisman MA, Veblacker LA, Weinstock LM. Psychopathology and marital satisfaction: The importance of evaluating both. Journal of consulting and clinical psychology. 2004; 72: 830-838.
18. Fadavi Rodsari A. Emotional effect of Teaching on marital satis faction and marilal confict mothers with children in elememtary Rasth. MA Thesis psychology. University Branch Tonekabon. 2010.

6/13/2014