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THE FACTORS INFLUENCING NURSE MENTAL HEALTH IN HOSPITAL RAJA PEREMPUAN ZAINAB II (HRPZ II)

By

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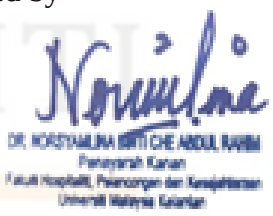

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UNIVERSITI MALAYSIA KELANTAN

TABLE OF CONTENT

TABLE OF CONTENT ..... **iv**

CHAPTER 1 ..... **1**

1.1 INTRODUCTION **1**

1.2 BACKGROUND OF STUDY **1**

1.3 PROBLEM STATEMENT **3**

1.4 STUDY QUESTIONS **4**

1.5 STUDY OBJECTIVES **5**

1.6 SIGNIFICANT OF THE STUDY **5**

1.7 DEFINITION OF TERMS **6**

1.7.1 NURSES 6

1.7.2 MENTAL HEALTH 7

1.7.3 ORGANIZATIONS 8

1.7.4 PERSONAL PROBLEM 9

1.7.5 STRESS LEVEL 10

1.7.6 SLEEP QUALITY 10

1.7.7 FINANCIAL 11

1.8 SUMMARY **12**

CHAPTER 2 ..... **14**

LITERATURE REVIEW **14**

2.1 INTRODUCTION **14**

FYP FHPK
UNIVERSITI MALAYSIA KELANTAN

2.2 LITERATURE REVIEW 15

2.2.1 MENTAL HEALTH 15

2.2.2 ORGANIZATIONS 16

2.2.3 PERSONAL PROBLEM 17

2.2.4 STRESS LEVEL 18

2.2.5 SLEEP QUALITY 19

2.2.6 FINANCIAL 20

2.3 HYPOTHESES 21

2.4 CONCEPTUAL FRAMEWORK 22

2.5 SUMMARY 23

CHAPTER 3 24

METHODOLOGY 24

3.1 INTRODUCTION 24

3.3 POPULATION 26

3.4 SAMPLE SIZE 26

3.5 SAMPLING METHOD 28

3.6 DATA COLLECTION PROCEDURE 29

3.7 STUDY INSTRUMENT 29

3.8 DATA ANALYSIS 33

3.8.1 DESCRIPTIVE STATISTIC…. 34

3.8.2 RELIABILITY TEST 34

FYP FHPK
UNIVERSITI
MALAYSIA
KELANTAN

3.8.3 PEARSON CORRELATION 35

3.8.4 PILOT TEST 36

3.9 SUMMARY 37

CHAPTER 4 38

RESULTS AND DISCUSSIONS 38

4.1 INTRODUCTION 38

4.2 RESULT OF FREQUENCY ANALYSIS 38

4.2.1 Gender 40

4.2.1 Age 40

4.2.3 Marital Status 40

4.2.4 Race 41

4.2.5 Religion 41

4.3 RESULT OF DESCRIPTIVE ANALYSIS 41

4.3.1 Organization 41

4.3.2 Personal Problem 43

4.3.3 Stress Level 44

4.3.4 Sleep Quality 45

4.3.5 Financial 46

4.3.6 Mental Health 47

4.3.7 Dependent and Independent Descriptive 48

4.4 RESULT OF RELIABILITY TEST 49

FYP FHPK
UNIVERSITI
MALAYSIA
KELANTAN

4.4.1 Pilot Test Result 50

4.5 RESULT OF PEARSON'S CORRELATION COEFFICIENT ANALYSIS..... 52

Hypothesis 1 53

Hypothesis 2 ..... **54**

Hypothesis 3 ..... **55**

Hypothesis 4 ..... **56**

Hypothesis 5 ..... **57**

4.6 DISCUSSION BASED ON RESEARCH OBJECTIVES 58

4.7 SUMMARY 66

CHAPTER 5 61

DISCUSSION AND CONCLUSION 61

5.1 INTRODUCTION 61

5.2 RECAPITULATION OF THE FINDINGS 61

5.2.1 Relationship between organizations and mental health among the nurses in HRPZ II. 62

5.2.2 Relationship between personal problems and mental health among nurses in HRPZ II. 63

5.2.3 Effect of stress level on mental health among nurses in HRPZ II. 64

5.2.4 Relationship between sleep quality and mental health among the nurses in HRPZ II……..... 65

5.2.5 Relationship between financial and mental health among the nurses in HRPZ II... 66

FYP FHPK
UNIVERSITI
MALAYSIA
KELANTAN

5.3 LIMITATIONS **67**

5.4 RECOMMENDATIONS **68**

5.4.2 Future Study 69

5.5 CONCLUSION **70**

REFERENCES **72**

FYP FHPK

UNIVERSITI
MALAYSIA
KELANTAN

LIST OF FIGURES

Figure	Title	Page
Figure 2.1	Conceptual Framework	19

LIST OF TABLES

Tables	Title	Page
Table 3.1	Sample Size Determination	24
Table 3.2	The Measurement of Items	27
Table 4.1	Summary of Demographic Profile	41
Table 4.2	Descriptive Statistics of Organization	42
Table 4.3	Descriptive Statistics of Personal Problems	43
Table 4.4	Descriptive Statistics of Stress Level	44
Table 4.5	Descriptive Statistics of Sleep Quality	45

FYP FHPK
UNIVERSITI MALAYSIA KELANTAN

Table 4.6	Descriptive of Financial	46
Table 4.7	Descriptive of Mental Health	47
Table 4.8	Dependent and Independent Variable	48
Table 4.9	Cronbach's Alpha Coefficient Value	49
Table 4.10	Pilot Test Result	50
Table 4.11	Reliability Analysis Result	51
Table 4.12	Coefficient Correlation and Strength of Relationship	52
Table 4.13	Correlation Analysis for Hypothesis 1	53
Table 4.14	Correlation Analysis for Hypothesis 2	54
Table 4.15	Correlation Analysis for Hypothesis 3	55
Table 4.16	Correlation Analysis for Hypothesis 4	56
Table 4.17	Correlation Analysis for Hypothesis 5	57

FYP FHPK

UNIVERSITI MALAYSIA KELANTAN

Table 4.18	Summary for Hypothesis Testing	58
Table 5.1	Research Objective 1 and Research Question 1	62
Table 5.2	Research Objective 2 and Research Question 2	63
Table 5.3	Research Objective 3and Research Question 3	64
Table 5.4	Research Objective 4 and Research Question 4	65
Table 5.5	Research Objective 5 and Research Question 5	66

LIST OF SYMBOLS AND ABBREVIATIONS

Abbreviations

WHO	World Health Organization
SPSS	Statistical Package for the Social Scientists
HRPZ II	Hospital Raja Perempuan Zainab II

FYP FHPK
UNIVERSITI MALAYSIA KELANTAN

ABSTRACT

Nursing staff work procedures have been associated with emotional anxiety, sadness, psychological discomfort, sleep problems, fatigue and other physical ailments, all of which have a significant impact on the emotional health of these healthcare professionals. The purpose of this study is to determine the impact of organizational, personal problems, stress levels, sleep quality, and financial issues on mental health among nurses at HRPZ II. This is a cross-sectional descriptive study that was conducted among 104 nurses at HRPZ II. Data was obtained using an online questionnaire and processed using SPSS 26.0 software. This study analysed 104 respondents, with 62.5% female and 37.5% male. Respondents were also divided into four age groups, namely 30 years and above (33.7%), 26-29 years (31.7%), 22-25 years (24.9%), and 18-21 years (7.7%). Most of the nurses were married (54.8%), while 45.2% were single. The racial distribution is 76.9% Malay, 14.4% Chinese, 7.7% Indian, and 1.0% Iban. The majority of respondents are Muslims (78.8%), followed by Buddhists (12.5%). The Christian population had the fewest respondents (8.7%). In a bivariate analysis, the results of this study show that there are five factors that affect nurses' mental health, namely organization, personal problems, stress level, sleep quality and finances. Further analysis using Pearson's correlation showed that all hypotheses were rejected at the 0.01 significance level. Independent variables, such as organization, personal problems, stress levels, sleep quality, and finances, have weak positive correlations with mental health. The results of the study show that the majority of respondents are not overly burdened with daily responsibilities and have good mental health. A strong culture that promotes high ethical standards can positively impact employee behaviour.

Keywords: Mental Health, Nurses, Quantitative, Workplace, HRPZ II.

FYP FHPK
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ABSTRAK

Prosedur kerja kakitangan kejururawatan telah dikaitkan dengan kebimbangan emosi, kesedihan, ketidakselesaan psikologi, masalah tidur, keletihan dan penyakit fizikal lain, yang kesemuanya mempunyai kesan yang besar terhadap kesihatan emosi profesional penjagaan kesihatan ini. Tujuan kajian ini adalah untuk menentukan kesan organisasi, masalah peribadi, tahap tekanan, kualiti tidur, dan isu kewangan terhadap kesihatan mental dalam kalangan jururawat di HRPZ II. Ini adalah kajian deskriptif keratan rentas yang telah dijalankan di kalangan 104 jururawat di HRPZ II. Data diperolehi menggunakan borang soal selidik dalam talian dan diproses menggunakan perisian SPSS 26.0. Kajian ini menganalisis 104 responden, dengan 62.5% perempuan dan 37.5% lelaki. Responden juga dibahagikan kepada empat kumpulan umur iaitu 30 tahun ke atas (33.7%), 26-29 tahun (31.7%), 22-25 tahun (24.9%), dan 18-21 tahun (7.7%). Kebanyakan jururawat telah berkahwin (54.8%), manakala 45.2% adalah bujang. Taburan kaum ialah 76.9% Melayu, 14.4% Cina, 7.7% India, dan 1.0% Iban. Majoriti responden adalah beragama Islam (78.8%), diikuti oleh penganut Buddha (12.5%). Penduduk Kristian mempunyai responden paling sedikit (8.7%). Dalam analisis bivariat, hasil kajian ini menunjukkan terdapat lima faktor yang mempengaruhi kesihatan mental jururawat iaitu organisasi, masalah peribadi, tahap tekanan, kualiti tidur dan kewangan. Analisis lanjut menggunakan korelasi Pearson menunjukkan semua hipotesis ditolak pada aras keertian 0.01. Pembolehubah bebas, seperti organisasi, masalah peribadi, tahap tekanan, kualiti tidur, dan kewangan, mempunyai korelasi positif yang lemah dengan kesihatan mental. Hasil kajian menunjukkan majoriti responden tidak terlalu terbeban dengan tanggungjawab harian dan mempunyai kesihatan mental yang baik. Budaya kukuh yang menggalakkan standard etika yang tinggi boleh memberi kesan positif kepada tingkah laku pekerja.

Kata kunci: Kesihatan Mental, Jururawat, Kuantitatif, Tempat Kerja, HRPZ II.

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CHAPTER 1

INTRODUCTION

1.1 INTRODUCTION

Researchers will discuss the factors impacting the mental health of nurses at Hospital Raja Perempuan Zainab (HRPZ) II in this chapter. This chapter starts with an introduction to chapter 1 before outlining the study's historical framework. The requirements for conducting this study are also mentioned in chapter 1 along with the problem statement for the chosen topic. The study's topic and goal are also explained and examined in chapter 1of the book. In a later section of this chapter, it will be covered in further depth how important study and word definitions are. A summary or analysis of the topic, which is the mental health of nurses in HRPZ II, will be discussed at the conclusion of Chapter 1.

1.2 BACKGROUND OF STUDY

In order to learn more about the mental health of the nurses who participated in the study at Hospital Raja Perempuan Zainab II, researchers from Universiti Malaysia Kelantan used several procedures, including methods for gathering data, tools for doing research, and data analysis. The sampling strategy of the snowball. This study includes a detailed

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examination of the data from the 104 respondents to the survey that was sent out. The researchers conducted the initial investigation. The HRPZ II nurses' shown emotional stability will boost nurses' involvement levels even more.

According to Dall'Ora C., Ball J., Reinius M., Griffiths P. Burnout, 2020 has demonstrated that working long hours and feeling unsatisfied professionally are the main causes of nursing's high stress levels, bad quality of life, and burnout syndrome. The work process of the nursing staff has also been connected to symptoms of worry, melancholy, psychological distress, sleep issues, weariness, and other somatic ailments, all of which significantly harm the emotional health of these healthcare personnel.

The psychological and emotional components of wellbeing are one of the main foundations that need to be taken into account. Unstable emotions have a big impact on people because they cause them to lose focus on their involvement in the hospital. According to the study, people's physical, mental, emotional, and social well-being were all impacted by the nursing staff's work practices, which were a substantial cause of psychological distress and stress. The occupational dangers that come with nursing include risks to one's mental health, psychological well-being, personal safety, biological concerns, and social problems.

Last but not least, the study has already addressed and clarified the findings of the analysis, which are further explored in the last chapter, namely the goals of the study, study questions, and hypotheses. As the report's final chapter, consequences, restrictions, and suggestions for additional study are also presented. Finally, the researchers will wrap up their investigation at the end of this chapter.

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1.3 PROBLEM STATEMENT

An accurate and succinct summary of the issue is a problem statement. The current state, the planned future state, and any discrepancy between the two are all mentioned in the problem statement.

An individual who is mentally healthy is emotionally steady, has strong behavioural control, is mainly free of anxiety and other debilitating symptoms, is able to form meaningful connections, and can cope with the stresses and responsibilities of daily life (adapted from the APA psychology dictionary). A yearly increase in mental health issues among nurses in Malaysia has been reported. Previous studies have demonstrated that some psychiatrists, psychiatric trainees, and therapists have suffered severe emotional wounds as a result of witnessing patient suicides (Fan, 2002). When a patient commits suicide, a nurse who is caring for the patient or has some other relationship to the patient may be profoundly impacted. She may blame herself and feel unworthy for not being able to stop the patient's suicide (Chizuko Takahashi, 2011).

The purpose of this study was to investigate the effects of stress levels, personal issues, poor sleep, and monetary issues on the mental health of healthcare professionals. The Malaysian government has implemented the World Mental Health Day celebration in addition to aiming to share rehabilitation programmes for patients with mental illness so that they can communicate with the community, especially family members, friends, and the community. This is done to raise public awareness of the significance of and generate support for various aspects of mental health care. According to Khairi Jamaluddin as the Minister of Health, emotional disorders among health workers are particularly noticeable in states that

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record a high number of cases and deaths such as in the Lembah Klang. At Hospital Kuala Lumpur (HKL) almost 2,000 staff underwent mental health screening online or face-to-face and recorded that almost half of them suffered from emotional disorders such as extreme stress.

Today, there is a lack of information on mental health status among health workers in Malaysia. Therefore, the researcher will conduct a study to report the mental health status among health workers in Malaysia, particularly at Hospital Raja Perempuan Zainab II.

1.4 STUDY QUESTIONS

The purpose of this study is to determine the variables that affect the mental health of nurses at Hospital Raja Perempuan Zainab II. As a result, the following five study questions have been devised to be addressed:

1. What is the relationship between organizations and mental health among the nurses in HRPZ II?
2. Is there any relationship between personal problems and mental health among nurses in HRPZ II?
3. Does there any effect of stress level on mental health among nurses in HRPZ II?
4. Is there any relationship between quality of sleeping and mental health among nurses in HRPZ II?

5. What is the relationship between financial and mental health among the nurses in HRPZ II?

1.5 STUDY OBJECTIVES

The objectives of this study are:

1. To identify the relationship of organizations on mental health among nurses in HRPZ II.
2. To determine the relationship of personal problems to mental health among nurses in HRPZ II.
3. To identify the effect of stress level on mental health nurses in HRPZ II.
4. To examine the relationship between quality of sleeping and mental health among nurses in HRPZ II.
5. To identify the effect of financial to mental health among nurses in HRPZ II?

1.6 SIGNIFICANT OF THE STUDY

The importance of a study determines its significance. It refers to the study's influence and contribution to a specific field of study. Additionally, the importance specifies who and

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how the study findings are useful. As a result of this investigation, researchers identified a mental health gap among healthcare workers. The importance of this study is that it will advance our understanding of the variables that influence health problems in HRPZ II nurses. According to this study, nurses can fight health problems on their own by using coping skills. The coping skills identified in this study can help them avoid or treat mental health problems. The results can also aid future study on nurses' mental health prevention.

1.7 DEFINITION OF TERMS

1.7.1 NURSES

A person who has successfully finished a basic, generalised nursing education programme and been given permission to practise nursing in their country by the competent regulatory agency is referred to as a nurse (International Council of Nurses). A well-rounded and solid foundation in the behavioural, life, and nursing sciences is provided by basic nursing education, a professionally accepted course of study. It is designed for management positions as well as post-basic training for specialised or advanced nursing practise and general nursing practise. The nurse has the training and authority to perform a variety of nursing tasks, such as supervising and instructing nursing assistants and other healthcare support staff, conducting research, and actively engaging in the healthcare team. The promotion of health, the prevention of illness, and the treatment of physically ill, mentally ill,

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and disabled individuals of all ages in all healthcare and other community settings are also covered by these practises.

1.7.2 MENTAL HEALTH

Psychological well-being might be present or absent, depending on one's definition of mental health. According to the World Health Organization, mental health refers to a condition of wellbeing in which a person may achieve their full potential, manage everyday stressors, engage in fruitful and profitable work, and contribute back to the community (World Health Organization, 2007). A person's physical health, relationships, and daily life can all be impacted by their mental health (World Health Organization, 2007).

Environmental, biological, and social factors all play a role in one's mental health during the course of their lifetime. Social determinants of health, societal norms, and factors including political systems, economic policies, and policy aims all contribute to the maintenance of risk and resilience in society. A lack of social safety nets, unstable or inadequate housing, racism, epidemics, discrimination based on gender or sexual orientation, educational gaps, the effects of climate change, food insecurity and malnutrition, civil unrest, and environmental risks are just a few of the factors that contribute to social inequality and an increased risk of mental health disorders. Nurses face risk factors such as workplace aggression, intense physical and psychological demands, and exhaustion, in addition to sharing the risk with the general population.

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1.7.3 ORGANIZATIONS

An organisation is a group of people who work together to achieve specific goals. It can be thought of as a social structure that includes all formal human connections. The organisation includes employee job division and task alignment towards the company's ultimate aim. It is also known as the second most essential managerial role because it coordinates employee labour, acquires resources, and integrates the two in order to achieve the company's goals. Organisation is a process that seeks to achieve goals via adequate planning and coordination of operations. It is based on the principle of work division and establishes an authority-responsibility connection among the members of the organisation.

The formal organisation structure is made up of jobs and roles with specific activities and interactions. It is produced by management to achieve the company's goals. Line organisation is the oldest and simplest organisational form, in which the supervisor has complete authority over the subordinate. The flow of authority is from the highest-level executive to the lowest level of the organization's echelon. As the name implies, a functional organisational structure is one in which the comprehensive duty of managing and directing personnel is divided into functions or types of work. This organisational system is superior to the standard line organisation. Primary and supportive activities in line and staff organisation are related to the line of supervision by assigning supervisors and specialists who are linked to line authority.

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1.7.4 PERSONAL PROBLEM

Specific issues are any problems a person has that are personal to them. Family, finances, addiction, handicap, or health are a few examples of common personal issues that might be connected to others. There are numerous personal issues that may have an impact on the workplace, as well as numerous solutions that employers can use to lessen the effects. Personal issues with mental health and wellbeing are now quite prevalent in the workplace, especially among nurses (Jablonski, 2022). Nurse challenges are demanding situations, occurrences, or expectations that frequently occur in the nursing profession. Due to the particular demands of being a nurse, these obstacles encompass mental, emotional, and physical challenges. According to Indeed Editorial Team, 2021, Nurses usually have busy schedules because their occupation requires them to work around the clock, 24/7. These long hours could involve working several 12-hour shifts in a row, being on call, or putting in extra time. Nurses have difficult schedules and frequently work more than 40 hours per week. Nursing is one of the most rewarding and challenging professions in healthcare. Due to a lack of staff, nurses may encounter a difficult burden during a 12-hour shift, have to deal with bullying at work, be at danger of getting sick, and still lose patients despite their excellent training.

Besides, in a person's daily life, when the workers are not living in the same household or near their partner, distance alone can increase their levels of stress. Being apart from the person they want to be with the most in a long-distance relationship can be very stressful. Additionally, misunderstandings and conflicts can very easily occur when co-workers, partners, or family members are under stress. The two will argue more frequently than before and become easily irritated over trivial matters.

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1.7.5 STRESS LEVEL

Conflicting internal and external forces that put people under pressure and reduce their effectiveness are the sources of stress that nurses face. According to the Lazarus & Folkman Model, the interaction or relationship between a person and his environment is what causes stress. These folks explain that a person will experience stress when the pressure from the environment is deemed to be demanding and has outstripped their capacity to handle it.

Health professionals have a known issue with workplace stress. High levels of stress have been linked to the nursing profession. Stress has a cost for people in terms of their health, well-being, and job satisfaction. It also has a cost for the company in terms of absenteeism and turnover, both of which can affect the standard of patient care (Davey et al., 2014). The three different ways that stress might manifest are as an antecedent or stimulus, a result or response, and as an interaction. Occupational stress has actually been identified as a serious health issue.

1.7.6 SLEEP QUALITY

The loss of a person's physical response characterizes the immobile state known as sleep, which might cause a rearrangement of brain activity. The two components of sleep are quantity and quality. The major indicators of high-quality sleep are sleeping more than 85% of the time in bed, dozing off in 30 minutes or less, waking up no more than once every

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night, and getting up no more than 20 minutes after dozing off. Age is an indicator of how much sleep that is getting. It is not advised for adults between the ages of 26 and 64 to sleep for fewer than 6 hours or for more than 10 hours. The ideal quantity of sleep for them is between 7 and 9 hours (Chloe Patel, 2022).

Both quality and quantity of sleep deprivation may exist. There is a strong connection between the two. Tiredness upon waking, which may last throughout the day, sleepiness after rest, and frequent awakenings at night are all subjective descriptions of poor sleep quality. People who get enough sleep and those who suffer from insomnia both have problems with their sleep. The long-term performance of workers' motor skills, mental and physical health, and their ability to think clearly are all affected by poor sleep quality and quantity (Muhammad Habiburrahman, 2006). Employee productivity at work may suffer from any of these factors. Nurses will suffer serious consequences from lack of sleep. Because of the need to care for patients, nurses sometimes have to work through the night.

1.7.7 FINANCIAL

A response to stress regarding one's overall financial well-being, such as emotional or physical discomfort, is referred to as financial distress. According to O'Neill et al. (2006), it refers to how someone is perceived to be able to manage their financial resources, including their income and savings, pay off their debts and take care of their essential requirements and desires. It could be a chronic condition or a transient one. Stressful situations that affect one's finances, such as getting delinquent notices from creditors and collection agencies, writing checks that aren't enough to cover them, paying bills late, and worrying about whether one

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will be financially prepared for significant life events like retirement, can make matters worse (Garman et al, 2004).

According to the National Institute for Healthcare Management, the prevalence rates of any mental illness and serious mental illness both increased in 2018 compared to 2008 by 8% and 24%, respectively. Higher levels of psychological stress are linked to worries about one's own financial and physical wellbeing, according to a Pew Study Center report released in 2021. This is a concerning trend because psychological stress is linked to a variety of unhealthy health outcomes, such as emotional exhaustion, a weakened immune system, heart disease, and an increase in mortality (Arvids Dotter et al., 2016; Barry et al., 2020; Marshall et al. al., 1998; McLachlan & Gale, 2018; Rasul et al., 2005; Segerstrom & Miller, 2004).

1.8 SUMMARY

The first chapter of this study, which has a focus on mental health, explores ways that HRPZ II nurses can operate more effectively. The researchers also defined the words “mental health”, “organization”, “personal problems”, “sleep quality”, “financial status”, and “stress levels”. The study questions and objectives that relate to mental health as the dependent variable and organizations, personal difficulties, sleep quality, finances, and stress levels as the independent variables come after the problem description. This statement, which relates to factors that have an impact on mental health, also includes the performance of all nurses employed by Malaysia's government hospitals. The definition of words, which clarifies the definition of the terms used in this study, is discussed last. A summary of how the researcher

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determined the value of the programme created to increase nurses' awareness of how to deal with mental health difficulties follows a statement about the study's significance.

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CHAPTER 2

LITERATURE REVIEW

2.1 INTRODUCTION

According to (Mukesh, Salim, & Ramayah, 2013), in a generic sense, the term "literature" refers to poems, stories, and novels. However, in a literature review, the term "literature" refers to the published or unpublished study articles that others should describe, objectively summarize, clarify, and assess in the fields that are relevant to one's study. These articles are used to comprehend and look into a person's study issue. The purpose of this study is to study the mental health among nurses in Hospital Raja Perempuan Zainab II (HRPZ). Financial issues, stress levels, poor sleep, organization, and personal issues are all components of mental health issues. It affects our attitudes, feelings, and actions. It also affects how we respond to stress, communicate with others, and form wise judgements. Mental health is important at every stage of life, from childhood and adolescence through adulthood.

While the terms "mental illness" and "poor mental health" are occasionally used interchangeably, they are not the same. A person may be in poor mental health even if they do not have a mental disorder. Even those who are suffering from mental diseases can experience periods of excellent physical, mental, and social wellness.

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2.2 LITERATURE REVIEW

2.2.1 MENTAL HEALTH

A wide range of experiences are possible because mental health is a factor in general wellbeing and can be a source of introspection on both a personal and ethical level. When mental health is equated with well-being, scientific and medical prescriptions for a healthy life are encouraged, which are at best ineffective and at worst oppressive (Simon Keller, 2005).

On a regular basis, nurses deal with high-stress scenarios at work, such as severe workloads that compromise sleep quality, personal issues, financial stress, a lack of staff, team friction, and witnessing patient suffering and death. Nursing professionals are more likely to experience mental health issues while dealing with working pressures. Effects of nurses' mental health on behaviours connected to their jobs, such as presenteeism and absenteeism, as well as the quality and safety of patient care (Farinaz Havaei, 2022). This is crucial because nurses play a significant influence in the 3.6 million patient fatalities and 136 million adverse events that occur each year across the globe. Reassessing and understanding the connection between nurse reported mental health and perceived safety and quality of patient care is urgently required. The prevalence of mental health issues among healthcare professionals, particularly nurses, has increased.

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2.2.2 ORGANIZATIONS

Employees who are aligned with organizational ideals are considered to work in environments with organizational relationships. In contrast, a weak culture is one where there is minimal adherence to organisational values and where command must be conducted through laborious formalities and bureaucracy. Strong cultures are those, according to Kilmann, Saxton, and Serpa (1986), "where organisation members put pressure on other members to adhere to norms." A strong organisational culture will have a greater impact on employees than a weak one, according to Byrne (2002). The culture should have a substantial and positive impact on employee behaviour if it is supportive of high ethical standards.

All companies have cultures, but some seem to have them more strongly and firmly established than others. An organization's strong culture was once envisioned as a unified collection of views, values, presumptions, and practises that were shared by the majority of its people. The degree of consistency of beliefs, values, assumptions, and practises was stressed, as well as the prevalence (or quantity) of consistent beliefs, values, assumptions, and practises among organizational members. A lot of the early proponents of organizational culture tended to think that a strong, ubiquitous culture was advantageous to all organizations because it encouraged commitment, identity, solidarity, and sameness, which in turn enabled internal integration and coordination.

Others pointed out potential problems with a strong culture, even going so far as to say that it might not necessarily be a good thing. For instance, a strong culture and the internalized rules that go along with it may cause people to place unreasonable demands on themselves and may prevent them from adapting to change. Strong cultural ties could also be

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used for coercion and manipulation (Perrow 1979). It may also lead to the establishment of new goals or sub-goals, which would mean that social conventions and practises would start to take precedence over the organization's initial purposes (Merton 1957; March and Simon 1958).

Therefore, addressing work stress and psychosocial risks should be part of safety and health strategies to reduce accidents and injuries at work. Organizational weaknesses also have an impact when there is an extreme workload or conflicting tasks where there is no cooperation between other employees which also causes problems. In addition, they will also feel less confident about the future. The superiors also need to play a role by providing good and good support so that the organization becomes strong and whole.

2.2.3 PERSONAL PROBLEM

Employees who are coping with personal concerns have a big impact on the workplace today. Study on the connection between work and family concerns has shown that problems at home can have a negative effect on performance at work, and inversely (Forthofer, Markman, Cox, Stanley, & Kessler, 1996).

Absenteeism is the situation when an employee begins to chronically miss work. Absenteeism is one of the most unpleasant issues facing the nursing profession. Direct and indirect patient care are both negatively impacted by insufficient nurse staffing. Nurse morale may deteriorate, and care may not be provided in line with set standards if the correct nurse leaves and is replaced by someone unfamiliar with the routine. This may result in working

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with an inadequate number of nurses or putting in extra hours to cover for absent nurses, both of which can be physically and mentally taxing. Usually, substitute nurses need additional oversight, which can be costly as well as detrimental to productivity and patient care quality. Co-workers may unintentionally feel annoyed about having to take on more work or feel under pressure to put in extra hours. Chronic absences can cause staff tension to rise, employee morale to drop, and eventually, overall staff absences to rise. The stress that nurses may experience as a result of this circumstance may have an impact on their mental health.

2.2.4 STRESS LEVEL

The field of nursing is inherently stressful. Nurses work in stressful circumstances because their primary role is to assist patients, who are frequently going through difficult times in their lives (Ramli, 2018). The causes and effects of work-related stress among the nursing profession have been the subject of numerous studies. In Malaysia, Rokiah's 1994 study indicated that more than 49.5% of nurses in a public hospital in Kuala Lumpur were under stress from work-related issues, as opposed to a survey of community nurses in Kelantan, which discovered a 38.5% incidence of work-related stress.

In recent years, the workload for nurses has increased in line with the rapid growth. A nurse who can multitask is therefore essential to meet expectations. Nurses should fulfil a variety of responsibilities, including those of teacher, communicator, caregiver, and others. According to Wu, Liao, and Yeh (2012), one of the most stressful vocations is nursing; meanwhile, according to study by Frassrand (2005), nurses are viewed as the beating heart of medical facilities. There are several things that cause stress. According to study by Blewett et

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al. (2006), there are a number of causes, including work-life balance, inadequate work organisation, job overload, poor management, personal issues, unsatisfactory working conditions, and poor relationships at work.

In addition to having an adverse effect on the individual, workplace stress also has a detrimental impact on the business as a whole. For nurses, job discontent is fairly high. According to Aiken et al. (2011), 1 in 5 nurses planned to leave their current position due to stress, burnout, and discontent.

2.2.5 SLEEP QUALITY

According to Nemade and Patricelli (2020), after physical health, mental health is a crucial foundation. Compared to individuals who lead healthier lifestyles, nurses find it more difficult to deal with depression. Inability to accomplish jobs well and poor sleep quality are common problems. In addition, nurses won't exercise as much if they get enough quality sleep. Due to their physical and mental frailty, nurses in this situation will have less free time to engage in leisure activities. As a result, it makes nurses feel stressed out, which promotes depression.

According to Cheung, Wong S, Wong K, Law, Ng, Tong, Wong, Ng & Yip (2016), Nurses with poor mental and physical health are more likely to experience depression than those with good mental and physical health. This demonstrates how nurses and patients may experience a wide range of issues due to inadequate sleep. The quality of nurses' sleep can be enhanced by paying attention to the function of cognitive and metacognitive processes.

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Another study revealed that those who struggled with depression would benefit from exercising (Khatony, Zakiei, Khazaie, Rezaei, & Janatolmakan, 2020)

2.2.6 FINANCIAL

Financial and mental health are strongly related to personal happiness and to one another. According to Zawani Miscom (2022), nurses who have recently graduated are paid RM1,500 a month, which is less than graduates in many other professions. Nurses are highly trained medical professionals who are frequently the first response and the last line of defines between life and death. Many regard them as second-class members of the medical hierarchy, with no competence of their own, and believe they do little more than accept orders from doctors. Low pay contributed to an unhealthy lifestyle and had a significant negative impact on nurses' relationships, connections with co-workers, and general quality of life. Sleep, self-esteem, and energy levels can all suffer when one feels defeated by financial problems. No matter how much money a person has, it might leave them feeling furious, ashamed, or afraid. It can also cause tension and disagreements with their closest friends and family.

As a result, it is ridiculous to put our health at risk in the name of achieving financial success just to have our earning potential decreased as a result of being ill. Inaction compromises both health and wealth and is required for both. social and mental wellbeing.

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2.3 HYPOTHESES

A claim made with the intention of testing a theory or presumption is called a hypothesis. The researchers have made a precise, verified forecast of the study's conclusion (Enago Academy, 2022). The research's hypothesis is based on the factors under investigation, including organization, personal issues, stress levels, sleeping patterns, and financial circumstances, which affected the mental health of nurses at Hospital Raja Perempuan Zainab (HRPZ II). The following hypothesis was developed and was to be evaluated based on the study:

H1: There is a significant relationship between organizations and mental health among nurses at Hospital Raja Perempuan Zainab (HRPZ II).

H2: There is a significant relationship between personal problems and mental health among nurses at Hospital Raja Perempuan Zainab (HRPZ II).

H3: There is a significant relationship between stress level and mental health among nurses at Hospital Raja Perempuan Zainab (HRPZ II).

H4: There is a significant relationship between sleep quality and mental health among nurses at Hospital Raja Perempuan Zainab (HRPZ II).

H5: There is a significant relationship between financial and mental health among nurses at Hospital Raja Perempuan Zainab (HRPZ II).

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2.4 CONCEPTUAL FRAMEWORK

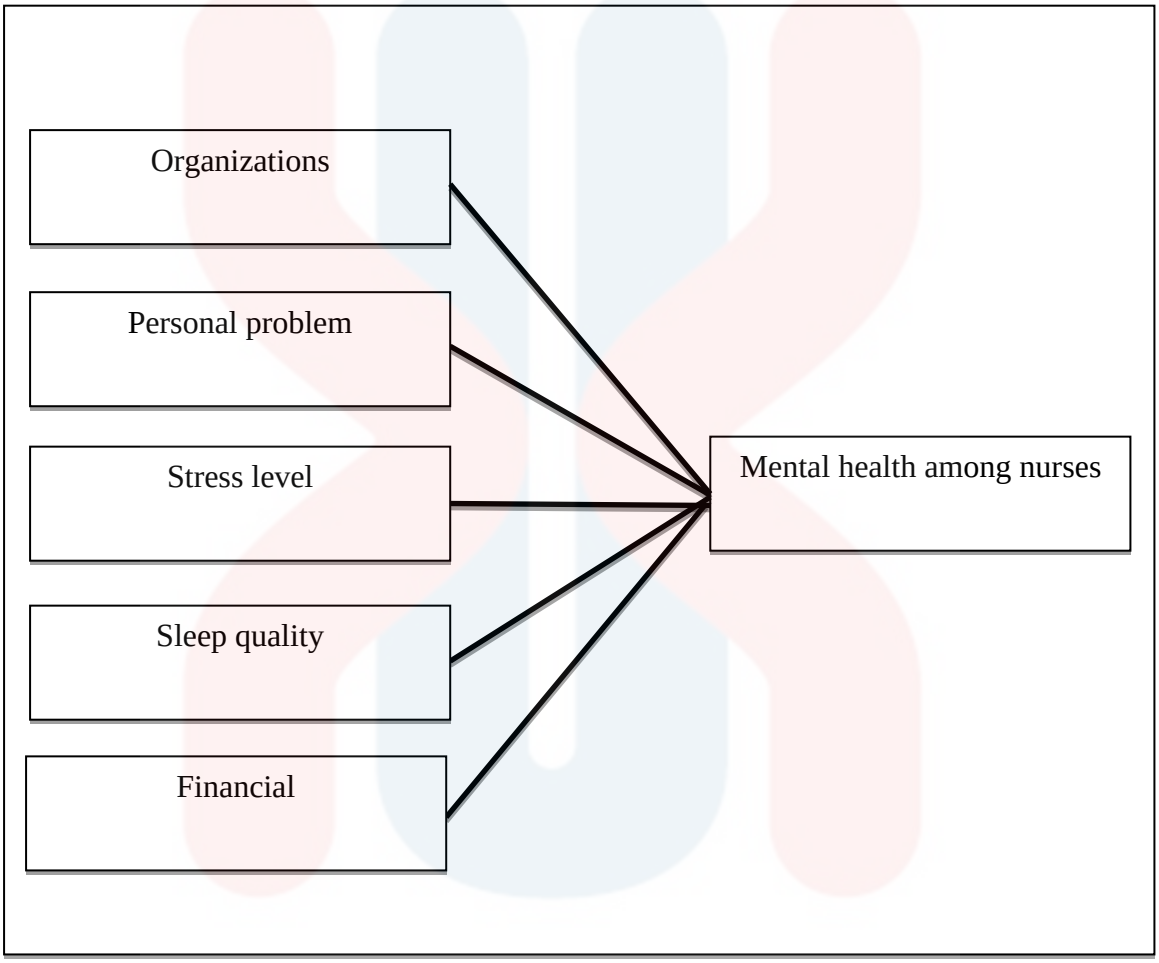

Figure 2.1 Conceptual Framework

Figure 1 shows the conceptual framework of the influences of organization, personal problem, stress level, financial, and sleeping quality on mental health status among nurses at HRPZ II.

The independent variables are organization, personal problem, stress level, financial and sleeping quality meanwhile the dependent variable is mental health status among nurses at HRPZ II.

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2.5 SUMMARY

Personal problems, stress level, sleep quality and financial use as independent variables were reviewed in this chapter, while mental health status among nurses at HRPZ II was considered as a dependent variable. The relationship between the independent and dependent variables, as well as the research's conceptual framework and hypotheses, are crucial.

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CHAPTER 3

METHODOLOGY

3.1 INTRODUCTION

Study methodologies are covered in this chapter. This chapter provides a detailed explanation of the study techniques used to complete the study. The researchers provide details on how they collected, organised, and examined the data and information required to address the study's objectives and central question. The techniques or approaches used to find, select, organise, and analyse content on a topic are known as study methods. The methodology portion of a study article assists the reader in assessing the study's overall validity and dependability.

A study technique is used to develop the study approach to a large extent, which includes the demographic target and the difficulty of reaching it. One of the factors that will influence the study approach is the importance of the decisions that will be made as a result of the investigation. The study technique, data collecting method, sample strategy, field work plan, and analysis plan are the primary components of study methods.

Since study is an intellectual endeavour, the term must be interpreted in an industrial context. In short, this section outlines the methodology used in this study. This chapter will outline the whole process used to carry out this study session. In other words, the methodology chapter should demonstrate how the methods and approaches chosen are the best matches for the study's aims and objectives and will produce accurate and valid data in

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order to justify the design decisions. An effective study approach yields results that are backed by science, whereas an ineffective methodology yields none.

3.2 STUDY DESIGN

The method through which a researcher seeks to comprehend a phenomenon or group that is genuinely based on its content is known as study design (Ary, et. al. 2002). The design process starts with how to examine and gather information about generalizations in order to address the issue. According to Brink and Wood (1998: 100), a study design's purpose is to provide a strategy for responding to the study question and "is a blueprint for action." It is comprehensive, explanatory, and impartial information.

The purpose of the study design is to make sure that the data gathered enables the researcher to successfully focus on the study issue. The process of gathering data for the study is what has made it challenging. In essence, it involves the kinds of data required to fully understand a phenomenon, examine a theory, and assess a programme. However, researchers could start their inquiry before they have thought about the data required to critically address the study issue. Without these design concerns, the conclusions reached run the danger of being flimsy and doubtful and failing to address the larger study issue.

This study uses quantitative study techniques that are numerical, continuous and differential data will be collected. According to Burns and Grove, 1997: 40, a rigorous, objective, and systematic approach for gathering knowledge about the world is quantitative research. The specific issues raised will result in knowledge generation that will directly enhance clinical practise. Numerical data is a type of quantitative data. Sensing, measuring,

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counting, quantifying, calculating, estimating and predicting are the main categories of quantitative data. The researcher intends to find data about the personal relationship of nurses with their service as nurses and how it leads to mental health among nurses in HRPZ II hospitals whether they can serve well, or it affects job reputation.

3.3 POPULATION

A population is referred to as a group of people who live together and belong to the same species. A population's members typically cooperate to share resources, face similar environmental restrictions, and depend on one another's perseverance to survive over time (Tarsi & Tuff, 2012). A population, however, is any collection of institutions, individuals, or objects that have certain characteristics (Ogula, 2005).

In this study, the target population of the researchers are nurses at Hospital Raja Perempuan Zainab II. Therefore, the total population studied by the researcher is 420 nurses.

3.4 SAMPLE SIZE

Sampling is a method, procedure, or process for selecting a part of a population to be studied (Ogenda, 2005). It is a technique for picking many respondents for a study while ensuring that each one fairly represents the wider population from which the respondents were picked. According to Ary, et al. (2002: 163), the sample represents a very small

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observed group. Additionally, the sample is a subset of the target population that the researcher intends to analyse in order to draw generalisations about the target population, according to Creswell (2012: 142).

The sample size of a study is the number of subjects or observations that are included. This number is typically denoted by the letter n. Two statistical qualities that are affected by the sample size are the accuracy of our estimations and the study's ability to draw inferences. The target demographic for the study is the nurses at Hospital Raja Perempuan Zainab II. The overall cohort that the researcher looked at consisted of 201 nurses.

Table 3.1: Sample Size Determination

N	*S*	*N*	*S*	*N*	*S*
10	10	220	140	1200	291
15	14	230	144	1300	297
20	19	240	148	1400	302
25	24	250	152	1500	306
30	28	260	155	1600	310
35	32	270	159	1700	313
40	36	280	162	1800	317
45	40	290	165	1900	320
50	44	300	169	2000	322
55	48	320	175	2200	327
60	52	340	181	2400	331
65	56	360	186	2600	335
70	59	380	191	2800	338
75	63	400	196	3000	341
80	66	420	201	3500	346
85	70	440	205	4000	351
90	73	460	210	4500	354
95	76	480	214	5000	357
100	80	500	217	6000	361
110	86	550	226	7000	364
120	92	600	234	8000	367
130	97	650	242	9000	368
140	103	700	248	10000	370
150	108	750	254	15000	375
160	113	800	260	20000	377
170	118	850	265	30000	379
180	123	900	269	40000	380
190	127	950	274	50000	381
200	132	1000	278	75000	382
210	136	1100	285	1000000	384

Note.—*N* is population size. *S* is sample size.
Source: Krejcie & Morgan, 1970

Source: Krejcie & Morgan (1970)

3.5 SAMPLING METHOD

Since there were 104 nurses total at HRPZ II, which is less than 201, the researchers chose the entire population to serve as the sample for this study. According to Sugiyono (2007: 124), Total sampling is a method of data collection when the total sample size resembles the entire population. In order to fill out the surveys, the entire population served as the representative respondents.

Sampling is the practise of taking a representative sample from a population in order to examine the sample and ascertain its qualities or characteristics before extrapolating those traits to the complete population. There are two different types of sampling techniques. A researcher uses the sampling method known as probability sampling to choose samples from a larger population using a method based on probability theory. A respondents must be picked at random if they are to be carefully investigated as a probability sample.

According to the definition given below, non-probability sampling is a sampling strategy in which samples are selected depending on the researcher's judgement rather than by chance. It assumes a more hospitable stance. This sampling technique gives the researchers' knowledge a fundamental framework. It is employed in quantitative study and mostly involves observational approaches.

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3.6 DATA COLLECTION PROCEDURE

A quantitative method is selected for collecting data. One of the methods in collecting data is by self-administered questionnaires. There are many types different of sample, but this study used the probability sampling which is a simple and random technique to select the respondents.

The data collection method is the process of collecting information for the targeted variables in an organised method. Data can be divided into main categories which are primary data and secondary data. For this research, primary data will be used, and the data collected through an online survey which is an online questionnaire. The questionnaires will be distributed to share surveys on WhatsApp's randomly to the respondents who work at (HRPZ II). In this way, researchers may provide the most direct and simple technique of collecting extensive and in-depth data regarding a certain event. When deciding on the type of questions to employ to collect data, consider study questions, participant characteristics, and the researchers preferred approach.

3.7 STUDY INSTRUMENT

The tool used to develop steps to gather data and provide an answer to the study question is known as a study instrument. When designing a good study instrument, the researcher should take into account a number of factors, including its validity, reliability, objectivity, and usability (Fraenkel and Wallen, 2009).

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Google Form was used to distribute the survey. Nurses from HRPZ employed the snowball sampling approach to obtain the data. These surveys enable researchers to collect large amounts of information while carefully controlling their target audience, questions, and format. They can also easily and rapidly collect survey results utilising mobile applications, receiving responses and insights in as little as 24 hours.

Table 3.2: The measurement of items

SECTION	VARIABLE	QUESTIONS	ANSWER
A	**DEMOGRAPHIC PROFILE**	**GENDER:**	
		Male	**( )**
		Female	**( )**
		AGE:	
		18-21 years old	**( )**
		22-25 years old	**( )**
		26-29 years old	**( )**
		30 years old and above	**( )**
		RACE:	
		Malay	**( )**
		Chinese	**( )**
		India	**( )**
		(Others)	**( )**

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	Dimension	Item	Supporting References
B INDEPENDENT VARIABLE	**ORGANIZATION**	• **Did your organization have a system that allows members to learn succession practices from other organizations?** • **Did your skills and knowledge are utilized in achieving the organization's mission?** • **Did nurses in my organization are willing to accept changes?**	**Bassam Farah, Rida Elias, Cristine De Clercy, Glenn Rowe (2020)**
	PERSONAL PROBLEM	• **Current work ability compared with their lifetime best.** • **Is there a recent incident involving literal violence in your work area that you like to share?** • **I don't have enough time for family.**	**Rajna Golubic (2009)** **Karen M Stanley (2014)**
	STRESS LEVEL	• **Sometimes I have to deal with aggression patients.** • **The sight of weeping patients makes me sad.** • **I have to do with patients expressing unrealistic treatment hope.**	**Christof Schäfer**
	SLEEP QUALITY	• **How is waking up usually?**	**Guozhong Zheng (2019)**

		• **Do you think you get enough sleep?** • **How long does it usually take to you fall asleep?**	**Kunert, Kryssie (2007)** **Qiuzi Sun (2018)**
	FINANCIAL	• **Are you satisfied with your income?** • **Are you aware of job promotions and what are the requirements?** • **Is the hospital management listening to your feedback, comments, or suggestions?** • **What do you think about the financial management competencies of nurse managers?**	**Unruh (2008)** **YangBaiRN (2017)**
C DEPENDENT VARIABLE	**MENTAL HEALTH**	• **Have you been feeling tired or having little energy?** • **Do you feel guilt about yourself or feel that you are worthless?** • **Have you been anxious, restless, or having multiple worries and doubts in mind more than usual?**	**Elaine K. Luo, MD (2019)** **Marijn Wiersma, Chantal Korteweg, Lidewij Wiersma, and Tessel Van Willigen (2021)** **Kimberly Holland, Laura Goldman, Karin Gepp, PsyD (2022)**

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3.8 DATA ANALYSIS

Data analysis is a systematic collection of mathematical, statistical, and logical approaches that can be used to characterize the data context, modularize the data structure, condense the data representation, highlight statistical tendencies, gather useful data, and draw conclusions. By eliminating the extraneous noise that the rest of the data creates, these analytical techniques help us to get the underlying insight from the data. Data analysis is a continuous, iterative process in which data collection and analysis occur continually since data production is a continuous activity. One of the most important aspects of data analysis is data integrity. There is primary and secondary data in study methods. The information obtained by researchers from their first sources, such as interviews and surveys, is known as primary data. On the other hand, secondary data is information that has been obtained from sources that are openly accessible.

This study made use of the Statistical Package for Social Science (SPSS). A group of software applications have been compiled into a single package called SPSS. The study of scientific evidence in social science is the main application of this curriculum. Data analysis, surveys, and marketing strategy may all benefit from this information. Researchers may swiftly comprehend market demand for a product using the statistical data they have obtained and change their strategy.

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3.8.1 DESCRIPTIVE STATISTIC

A descriptive statistic is a simple descriptive coefficient that is used to summarise a specific set of data, which may be a sample of the entire population or a representative of that group. If you want to see an illustration of descriptive statistics, just take a look at a student's grade point average (GPA). A student's overall grade point average (GPA), which aggregates data from a variety of grades, classes, and tests, gives an overview of their typical academic achievement.

Standard deviation, variance, minimum and maximum variability, and skewness are examples of measurements of variability, while mean, median, and mode are examples of measures of central tendency. Large amounts of data can be simplified with the use of descriptive statistics. Each descriptive statistic packs a lot of information into a small area.

3.8.2 RELIABILITY TEST

Reliability measures the consistency of test results or the test's reliability. The study may also conceive of it as the capacity to replicate a test or discover new information. For instance, a reliable instrument that regularly takes the right temperature is a medical thermometer. Contrarily, a reliable math test will accurately assess each student's mathematical proficiency, and reliable study results can be repeated time and time again.

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Test reliability, parallel type reliability, and inter-rater reliability are the three subcategories of reliability. When a test is administered repeatedly over the course of a certain period with the same sample group, it is said to have attained test-retest reliability. In order to compare test results and assess the stability of scores, respondents may be invited to take the same survey on mental health among nurses in HRPZ II twice within a week. Despite the fact that the calculation achieved by doing the evaluation of the same phenomena with the participation of the same study community with multiple evaluation processes is connected to the dependability of the parallel type. As implied by the concept's name, interrater reliability is the computation of sets of findings obtained by multiple raters using the same instrument.

3.8.3 PEARSON CORRELATION

The researcher studies the statistical link (correlation) between two variables in correlation analysis, a non-experimental study method, without making much of an effort to control unrelated elements. For two reasons, researchers interested in statistical correlations between variables prefer correlational studies to experiments. Furthermore, they reject statistical correlation as proof of causality. Because the statistical link of significance is assumed to be causative, the researcher cannot change the independent variable because it is impractical, impossible, or immoral. Another reason why researchers prefer regression testing over trials is this.

One of the most important techniques for assessing the strength of the linear relationship between the independent variable (IV) and the dependent variable is the Pearson

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Correlation Analysis (DV). In this study, there is a correlation between the independent variable (IV), which ascertains whether mental health issues exist among HRPZ nurses, and the dependent variable (DV), which assesses the impact on nurses' mental health. The strength of any association between the independent variable (IV) and the dependent variable must be understood by the researcher (DV).

3.8.4 PILOT TEST

A pilot study is the first step of the entire research protocol and is often a smaller-sized study assisting in planning and modification of the main study (Thabane L, Ma J, Chu R, Cheng J, Ismaila A, Rios LP, et al 2010). More specifically, in large-scale clinical studies, the pilot or small-scale study often precedes the main trial to analyse its validity. Before a pilot study begins, researchers must fully understand not only the clear purpose and question of the study, but also the experimental methods and schedule. Researchers become aware of the procedures involved in the main study through the pilot study, which aids in the selection of the research method most suitable for answering the research question in the main trial. Despite the benefits and importance of the pilot study, researchers often are not interested.

A pilot study is performed either as an external pilot study independent of the main study or as an internal pilot study included in the research design of the main study. This article describes the core items of an external pilot study and misconceptions and ethical aspects of a pilot study and introduces the appropriate method for reporting the outcomes of the pilot study. A pilot survey can be used to detect the lack of training of the personnel to be

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surveyed, issues with the logistics of distribution and collection of the survey as well as errors in the data recording. These problems can be fixed before taking the actual survey.

3.9 SUMMARY

The study technique for the study has been thoroughly detailed in this chapter. The quantitative study approach is thought to be logical since it can be used to collect data, analyse data, and answer study questions. Topics like study design, target population, sample size, sampling technique, data collection, study tools, and data analysis are covered in great detail during the session. The guidance from this chapter will be used in Chapter 4's following chapter.

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CHAPTER 4

RESULTS AND DISCUSSIONS

4.1 INTRODUCTION

This chapter elaborates the findings from an analysis of the information gathered through the distribution of a survey to 104 respondents who are nurses at HRPZ II. This chapter discusses the survey's findings. The findings from the frequency analysis, descriptive analysis, reliability test, Pearson Correlation Coefficient analysis, and discussion based on research objective.

4.2 RESULT OF FREQUENCY ANALYSIS

The survey has been conducted with 104 respondents with filter questions and the result of demographic profile is collected and has been summarized. The demographic profile that has been asked in the questionnaire is gender, age, marital status, race, and religion. The summary of demographic profile is shown in table 4.1 below.

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Table 4.1: Summary of Demographic Profile

Demographic	Categories	Frequency (n)	Percentage (%)
Gender	Male	39	37.5
	Female	65	62.5
Age	18 – 21 years old	8	7.7
	22 – 25 years old	28	26.9
	26 – 29 years old	33	31.7
	30 years old and above	35	33.7
Marital Status	Single	47	45.2
	Married	57	54.8
Race	Malay	80	76.9
	Chinese	15	14.4
	Indian	8	7.7
	Iban	1	1.0
Religion	Muslim	82	78.8
	Buddha	13	12.5
	Christian	9	8.7

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4.2.1 Gender

Based on the result from table 4.1, the table shows the gender distribution of the respondents. The total respondent is 104 respondents. In this study, the female respondents were higher with 62.5% (n=65) respondents as compared to 37.5% (n=39) for male respondents.

4.2.2 Age

Table 4.1 shows the age distribution. The respondents were allocated into four age groups. The highest number of respondents were from the group age of 30 years and above with 33.7% (n=35) respondents and then followed by the group age of 26-29 years with 31.7% (n=33) respondents. The third highest group is 22-25 years with 26.9% (n=28) respondents and lastly is group age of 18-21 with 7.7% (n=8) respondents.

4.2.3 Marital Status

Table 4.1 illustrates the respondents' marital status. Most of the nurses are married, and it is 54.8% (n=57) respondents. Meanwhile, with 45.2% (n=47) of the respondents are single status.

4.2.4 Race

The race distribution among the respondents is seen in Table 4.1. With 76.9% (n=80) respondents, Malay is the race group with the most responders in the survey, followed by

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Chinese with 14.4% (n=15) respondents. With 7.7% (n=8) respondents, Indians are the third most common group race, followed by Iban with 1.0% (n=1) respondents.

4.2.5 Religion

The percentage of the respondent's religion is shown in Table 4.1. The majority of the respondents are Muslim, accounting for 78.8% (n=82), followed by Buddha, accounting for 12.5% (n=13). Lastly, Christian had the fewest respondents, with only 8.7% (n=9).

4.3 RESULT OF DESCRIPTIVE ANALYSIS

Table 4.2 below shows the mean and standard deviation for each variable in research with the number of respondents is 104 nurses on duty at Hospital Raja Perempuan Zainab (HRPZ II).

4.3.1 Organization

Table 4.2: Descriptive statistics of Organization

	Variables	N	Mean	Standard Deviation

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Do you work according to a set schedule?	104	3.41	1.391
You often work overtime in a month.	104	3.50	1.215
There are still nurses doing other people's work.	104	3.69	1.175

The table shows the mean and standard deviation statistics of the respondents to the organization. “There are still nurses doing other people’s work” got the largest mean value, which was 3.69, where the respondents strongly agreed that the organizational factor of “there are still nurses doing other people’s work” had led to the mental health problems of the nursing staff at HRPZ II. While the lowest mean is “do you work according to a set schedule?” with a mean value of 3.41, where respondents strongly agreed that the organizational factor of “do you work according to a set schedule?” has pushed respondents to mental health problems. “You often work overtime in a month” recorded a mean value with 3.50 where the respondents are neutrally agreed that “you often work overtime in a month” can cause a mental health among nurses. Also, the higher standard deviation is the diversity of “do you work according to a set schedule?” which is 1.391. Higher standard deviation values indicate greater dispersion in the data. So, for organizational factors respondents has been stated.

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4.3.2 Personal Problem

Table 4.3: Descriptive statistics of Personal Problem

Variables	N	Mean	Standard Deviation
Most nurses will have conflicts with co-workers or family members.	104	3.32	1.264
Living far away from work places a high workload on you.	104	3.89	1.131
A less conducive environment at work will disturb your emotions while working.	104	3.85	1.189

Table shows the mean and standard deviation statistics of respondents on the personal problem. “Living far away from work places a high workload on you” scored the greatest mean value, which was 3.89, where the respondents strongly agreed that “living far from work places a high workload on you” has been led to mental health among nurses. Meanwhile, the lowest mean was “most nurses will have conflicts with co-workers or family members” with the mean value of 3.32, where the respondents lightly agreed that personal problems of “most nurses will have conflicts with co-workers or family members” can led to mental health. Also “a less conducive environment at work will disturb your emotions while working” recorded a mean value with 3.85 where the respondents are slowly believing that “a less conducive environment at work will disturb your emotions while working” can make the nurses to experience mental health. Besides, the higher standard deviation is “most nurses will have conflicts with co-workers or family members” which is 1.264. The higher standard deviation value indicates the greater spread in the data.

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4.3.3 Stress Level

Table 4.4: Descriptive statistics of Stress Levels

Variables	N	Mean	Standard Deviation
Job stress can affect your physical and psychological health.	104	3.93	1.176
Stress can reduce your organizational productivity and job satisfaction.	104	3.79	1.228
The patient's irrational behaviour can affect your performance.	104	3.63	1.166
Excessive work stress that occurs in the workplace can cause chronic health problems.	104	3.71	1.188
Stress can affect productivity and impact productivity in your workplace.	104	3.88	1.160

Table shows the mean and standard deviation statistics of respondents on the stress level. "Job stress can affect your physical and psychological health" was scored the greatest mean value, which was 3.93, where the respondents strongly agreed that "job stress can affect your physical and psychological health" has been led the nurses to experience the mental health. Meanwhile, the lowest mean was "the patient's irrational behaviour can affect your performance" with the mean value of 3.63, where the respondents agreed that stress level of "the patient's irrational behaviour can affect your performance" can lightly cause respondents to mental health. Besides, the higher standard deviation is "stress can reduce

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your organizational productivity and job satisfaction", which was 1.228. The higher standard deviation value indicates the greater spread in the data.

4.3.4 Sleep Quality

Table 4.5: Descriptive statistics of Sleep Quality

Variables	N	Mean	Standard Deviation
Less of sleep can affects your quality of life and work productivity.	104	3.87	1.315
Nursing is an occupational that is more prone to insufficient sleep quality.	104	3.81	1.231

Table shows the mean and standard deviation statistics of respondents on the sleep quality. "Less of sleep can affects your quality of life and work productivity" recorded the greatest mean value, which was 3.87, where the respondents strongly agreed that sleep quality of "less of sleep can affects your quality of life and work productivity" can cause mental health among nurses. Meanwhile, the lowest mean "nursing is an occupational that is more prone to insufficient sleep quality with the mean value of 3.81, where the respondents agreed that sleep quality of "nursing is an occupational that is more prone to insufficient sleep quality" can led the nurses to experience the mental health. Besides, the higher standard deviation is "less of sleep can affects your quality of life and work productivity", which was 1.315. The higher standard deviation value indicates the greater spread in the data.

4.3.5 Financial

Table 4.6: Descriptive statistics of Financial

Variables	N	Mean	Standard Deviation
You are satisfied with your current salary.	104	3.09	1.337
Your current salary enough to support you and your family.	104	3.24	1.273
You will change your career as a nurse if the salary earned is not satisfactory.	104	3.33	1.265

Table shows the mean and standard deviation statistics of respondents on the financial. “You will change your career as a nurse if the salary earned is not satisfactory” recorded the highest mean value, which was 3.33, where the respondents strongly agreed that financial of “you will change your career as a nurse if the salary earned is not satisfactory” led the factors influence the mental health among the nurses in HRPZ II. Meanwhile, the lowest mean was “you are satisfied with your current salary” with the mean value of 3.09, where the respondents agreed that financial factors of “you are satisfied with your current salary” can cause mental health among nurses. Besides, the higher standard deviation is “you are satisfied with your current salary”, which was 1.337. The higher standard deviation value indicates the greater spread in the data.

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4.3.6 Mental Health

Table 4.7: Descriptive statistics of Mental Health

Variables	N	Mean	Standard Deviation
Mental health issue are common among you.	104	4.41	.705
Your productivity at work will suffer if you suffer from mental health problems.	104	4.36	.749
Increased awareness of mental health will impact and help your health	104	4.17	.830

Table shows the mean and standard deviation statistics of respondents on the mental health. “Mental health issue are common among you” recorded the highest mean value, which was 4.41, where the respondents strongly agreed that mental health of “mental health issue are common among you” led the mental health among the nurses in HRPZ II. Meanwhile, the lowest mean was “increased awareness of mental health will impact and help your health” with the mean value of 4.17, where the respondents agreed that mental health factors of “increased awareness of mental health will impact and help your health” can cause the nurses to experience the mental health. Besides, the higher standard deviation is “increased awareness of mental health will impact and help your health”, which was 0.830. The higher standard deviation value indicates the greater spread in the data.

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4.3.7 Dependent and Independent Descriptive

Table 4.8: Dependent and independent variable

Variables	N	Mean	Standard Deviation
Organization	104	3.53	.943
Personal Problem	104	3.69	1.023
Stress Level	104	3.79	1.022
Sleep Quality	104	3.84	1.171
Financial	104	3.22	1.075
Mental Health	104	4.31	.614

The table shows the number of respondents, mean and standard deviation for both independents variables (IV) and dependent variable (DV). For independent variables (IV), sleep quality had the highest mean score which is 3.84 and followed by stress level (3.79), personal problem (3.69), organization (3.53) and lastly is financial (3.22) The mean score of dependent variables (DV), the mental health, is 4.31.

Meanwhile for the independent variables (IV), the highest standard deviation is the sleep quality, which is 1.171, followed by financial (1.075), personal problem (1.023), stress level (1.022) and lastly is organization with 0.943. The standard deviation for dependent variable (DV), the mental health, is 0.614.

4.4 RESULT OF RELIABILITY TEST

Reliability analysis shows how stable and consistent a measure is without any bias and helps figure out how "good" the measure is (Sekaran, 2003). The collected data was subjected to a reliability test to obtain the results of the pilot research. The higher the alpha value, the more dependable the terms in a survey are to one another (Tavakol & Dennick, 2011).

Cronbach's alpha coefficient is a measure of the reliability of a reliability test. Researchers can identify and define if this was valid, reliable, and understandable by the respondent based on the results of the survey. According to the rule of thumb, the value of Cronbach's alpha coefficient is shown in Table 4.9.

Table 4.9: Cronbach's Alpha Coefficient Value

Cronbach's Alpha	Internal Consistency
$\alpha \geq 0.9$	Excellent
$0.9 > \alpha \geq 0.8$	Good
$0.8 > \alpha \geq 0.7$	Acceptable
$0.7 > \alpha \geq 0.6$	Questionable
$0.6 > \alpha \geq 0.5$	Poor
$0.5 > \alpha$	Unacceptable

Table 4.9 shows that the higher and closer the Cronbach's alpha value is, the greater the item's internal consistency is and the more dependable it is for survey purposes. For

internal consistency to be considered satisfactory, Cronbach's alpha must be greater than 0.5. The reliability of a Cronbach's alpha coefficient is good when it's more than 0.7.

4.4.1 Pilot Test Result

Before the actual data collection started with 104 respondents, a pilot test was taken of 46 respondents to complete the questionnaire. A pilot test was conducted before the actual questionnaire was distributed to identify any possible errors in the questionnaire, such as unclear questions, that might have been overlooked. As a result, researchers have the opportunity to detect and correct any issues that may arise in developing the questionnaire and be able to distribute the actual questionnaire. Table 4.10 shows the survey's pilot test results.

Table 4.10 Pilot Test Result

Construct	Cronbach's Alpha	No of Item	N
Organization	0.593	3	46
Personal problem	0.412	3	46
Stress level	0.873	5	46
Sleep Quality	0.930	2	46
Financial	0.889	3	46
Mental health	0.676	3	46

This table shows evidence about the dependability of five factors. Cronbach's Alpha was applied to investigate the consistency of the 19 items, which served as a measurement of the five different constructs. The coefficients of the constructs are good and excellent, according to the results. However, there is one construct had a value below 0.5. Furthermore,

the result is above 0.7 indicating that this questionnaire can be disseminated, and the survey can proceed.

According to the statistics, the coefficient for sleep quality has the highest coefficient with a result of reliability testing of 0.930 (excellent), while the coefficient for personal problem has been found to be the lowest at 0.412 (unacceptable).

4.4.2 Reliability Test

Table 4.11: Reliability Analysis Result

Construct	Cronbach's Alpha	No of Item	N
Organization	0.593	3	104
Personal Problem	0.928	3	104
Stress Level	0.930	5	104
Sleep Quality	0.889	2	104
Financial	0.676	3	104
Mental Health	0.676	3	104

The reliability test for accuracy and repeatability has been carried out. There were 104 random responders who completed the survey and submitted their responses.

The survey's reliability analysis is shown in Table 4.11 between 0.593 to 0.676 the reliability of all the constructs. The coefficient is good and excellent based on the results of all the constructs. When the score is more than or equal to 0.7, it indicates that the survey may be administered according to the rule of thumb (Kline, 1999).

As a result of this study, the excellent value of the construct is stress level at 0.930, which is followed by personal problem with 0.928 (excellent), and then sleep quality with

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0.889 (good) continue with financial and mental health with 0.676 (questionable), and organization with 0.593 (poor).

4.5 RESULT OF PEARSON'S CORRELATION COEFFICIENT ANALYSIS

Pearson's Correlation Coefficient analysis used to examine the relationship between independent variables: organization, personal problem, stress level, sleep quality and financial with the dependent variable: mental health. Pearson correlation is used to determine the strength of the relationship between an independent variable and a dependent variable based on the size of the correlation. The table below displays the researchers' guideline coefficient correlations and strength of relationship.

Table 4.12: Coefficient Correlation and Strength of Relationship

Correlation Coefficient Value	Strength of Correlation
$r = 1$	Perfectly Positive
$0.5 < r < 1$	Strongly Positive
$r = 0.5$	Moderately Positive
$0 < r < 0.5$	Weakly Positive
$r = 0$	No Correlation
$-0.5 < r < 0$	Weakly Negative

$r = -0.5$	Moderately Negative
$-1 < r < -0.5$	Strongly negative
$r = -1$	Perfectly Negative

Hypothesis 1

H1: There is a significant relationship between organization with mental health among nurses at Hospital Raja Perempuan Zainab (HRPZ II).

Table 4.13: Correlation Analysis for Hypothesis 1

CORRELATIONS			
		Organization	**Mental Health**
Organization	Pearson Correlation	1	0.372**
	Sig. (2-tailed)		0.000
	N	104	104
Mental health	Pearson Correlation	0.372**	1
	Sig. (2-tailed)	0.000	
	N	104	104

** Correlation is significant at level 0.01 level (2-tailed)

Sources: SPSS

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Table 4.13 shows the correlation value of 0.372 reveals a weak relationship between organization and mental health among nurses in HRPZ II. This shows that the relationship between organization and mental health among nurses at HRPZ II is weakly positive. As a result, there is no relationship between organization and mental health among nurses in HRPZ II. Hence, H1 is no significant and rejected.

Hypothesis 2

H2: There is a significant relationship between personal problem with mental health among nurses in HRPZ II.

Table 4.14: Correlation Analysis for Hypothesis 2

CORRELATIONS			
		Personal problem	**Mental Health**
Personal Problem	Pearson Correlation	1	0.310**
	Sig. (2-tailed)		0.001
	N	104	104
Mental health	Pearson Correlation	0.310**	1
	Sig. (2-tailed)	0.001	
	N	104	104

** Correlation is significant at level 0.01 level (2-tailed)

Sources: SPSS

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Table 4.14 shows that there is a correlation value between personal problem and mental health among nurses in Hospital Raja Perempuan Zainab II, with a correlation value of 0.310. This suggests that the relationship between personal problem and mental health is weakly positive and no significantly connected among nurses. Hence, there is no significant relationship between personal problem and mental health among nurses in HRPZ II. Hence, H2 is not supported and rejected.

Hypothesis 3

H3: There is a significant relationship between stress level with mental health among nurses in HRPZ II.

Table 4.15: Correlation Analysis for Hypothesis 3

CORRELATIONS			
		Stress Level	**Mental Health**
Stress Level	Pearson Correlation	1	0.413**
	Sig. (2-tailed)		0.000
	N	104	104
Mental health	Pearson Correlation	0.413**	1
	Sig. (2-tailed)	0.000	
	N	104	104

** Correlation is significant at level 0.01 level (2-tailed)

Sources: SPSS

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Table 4.15 shows a correlation value of 0.413, which indicates there is a positive correlation between stress level and mental health among nurses in Hospital Raja Perempuan Zainab II. This implies the relationship between stress level and mental health among nurses in HRPZ II is weakly positive and no significantly connected. Therefore, there is no significant relationship between stress level and mental health among nurses. Hence, H3 is no significant and not supported.

Hypothesis 4

H4: There is a significant relationship between sleep quality with mental health among nurses in Hospital Raja Perempuan Zainab II.

Table 4.16: Correlation Analysis for Hypothesis 4

CORRELATIONS			
		Sleep Quality	**Mental Health**
Sleep Quality	Pearson Correlation	1	0.358**
	Sig. (2-tailed)		0.000
	N	104	104
Mental health	Pearson Correlation	0.358**	1
	Sig. (2-tailed)	0.000	
	N	104	104

** Correlation is significant at level 0.01 level (2-tailed)

Sources: SPSS

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Table 4.16 shows there is a correlation value between sleep quality and mental health among nurses in Hospital Raja Perempuan Zainab II, as evidenced by a correlation value of only 0.358. This shows that the relationship between sleep quality and mental health is weakly positive and no connected among nurses in HRPZ II. There is no significant relationship between sleep quality and mental health among nurses in HRPZ II. Hence, H4 is rejected.

Hypothesis 5

H5: There is a significant relationship between financial with mental health among nurses in Hospital Raja Perempuan Zainab II.

Table 4.17: Correlation Analysis for Hypothesis 5

CORRELATIONS			
		Financial	**Mental Health**
Financial	Pearson Correlation	1	0.196**
	Sig. (2-tailed)		0.046
	N	104	104
Mental health	Pearson Correlation	0.196**	1
	Sig. (2-tailed)	0.046	
	N	104	104

** Correlation is significant at level 0.05 level (2-tailed)

Sources: SPSS

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Table 4.14 shows that there is a correlation value between personal problem and mental health among nurses in Hospital Raja Perempuan Zainab II, with a correlation value of 0.196 which is weakly positive. This suggests that the relationship between personal problem and mental health is very weak and significantly not connected among nurses. Hence, there is no significant relationship between financial and mental health among nurses in HRPZ II. Hence, H5 is not supported and no significant.

4.6 DISCUSSION BASED ON RESEARCH OBJECTIVES

This analysis of the literature on factors influencing mental health among nurses in Hospital Raja Perempuan Zainab II. The findings of this study show that to examine the relationship between organization, personal problems, stress level, sleep quality and financial with mental health among nurses.

Table 4.18: Shows the summary for hypothesis testing in this study.

Hypothesis	**Pearson's correlation results**	
H1: There are relationship between organization and mental health among nurses at Hospital Raja Perempuan Zainab II.	$r = 0.413$, $p < 0.00$	Not supported
H2: There are relationship between personal problem and mental health among nurses at Hospital Raja Perempuan Zainab II.	$r = 0.310$, $p < 0.01$	Not supported

H3: There are relationship between stress level and mental health among nurses at Hospital Raja Perempuan Zainab II.	r = 0.413, p < 0.00	Not supported
H4: There are relationship between sleep quality and mental health among nurses at Hospital Raja Perempuan Zainab II.	r = 0.358, p < 0.00	Not supported
H5: There are relationship between financial and mental health among nurses at Hospital Raja Perempuan Zainab II.	r = 0.196, p < 0.05	Not supported

Based on the table 4.18 shows that Pearson's correlation analysis was performed to evaluate the hypothesis on organization, personal problems, stress level, sleep quality and financial with mental health among nurses. At the 0.01 significance level, all hypotheses provided were rejected. Moreover, all the hypothesis is no supported as the end result show that independent variables which are organization, personal problems, stress level, sleep quality and financial have a weakly positive correlation with the mental health.

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4.7 SUMMARY

Chapter 4 defines the result of frequency analysis, descriptive analysis, reliability analysis and Pearson Correlation Coefficient analysis. These variables were found to be not significant and negatively correlated of organization, personal problems, stress level, sleep quality and financial with mental health among nurses. Moreover, all hypotheses are not supported because p-value is more than 0.05.

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CHAPTER 5

DISCUSSION AND CONCLUSION

5.1 INTRODUCTION

This chapter is all about discussion and conclusion. The chapter will begin with an introduction, followed by a recapitulation of the research findings, limitations, recommendations, and summary. This chapter goes through the results from Chapter 4. Furthermore, this chapter discusses the recommendations that may be applied for this research in the future. The researchers will draw conclusions regarding this study at the end of this chapter.

5.2 RECAPITULATION OF THE FINDINGS

This research will discuss recapitulation of the findings from previous chapter 4 (Result and Discussion) which are based on research objectives, research questions and hypothesis for this study.

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5.2.1 Relationship between organizations and mental health among the nurses in HRPZ II.

Research question 1 of this study asked any Relationship between organizations and mental health among the nurses in HRPZ II? This is also to answer the first objectives and hypothesis.

Table 5.1: Research Objective 1 & Research Question 1

Research Objectives (RO)	Research Question (RQ)
To identify the relationship of organizations on mental health among nurses in HRPZ II.	What is the relationship between organizations and mental health among the nurses in HRPZ II?
H1: There is a significant relationship between organizations and mental health among nurses at Hospital Raja Perempuan Zainab II (HRPZ II).	

The results of hypothesis H1 in the previous chapter were reviewed to answer research question 1. In addition, H1 states that there is a weakly relationship between organization and mental health among staff nurses who are at the hospital (HRPZ II). From the findings of the study, it shows that organization is positively and not related to mental health among nurses working in the hospital with a correlation value of 0.372. In addition, the relationship between organization and mental health among nurses at HRPZ II is no significant. Therefore, H1 is rejected.

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5.2.2 Relationship between personal problems and mental health among nurses in HRPZ II.

Research question 2 of this study asked any relationship between personal problems and mental health among nurses in HRPZ II? This is also to answer the second objective and hypothesis.

Table 5.2: Research Objective 2 & Research Question 2

Research Objectives (RO)	Research Question (RQ)
To determine the relationship of personal problems to mental health among nurses in HRPZ II.	Is there any relationship between personal problems and mental health among nurses in HRPZ II?
H2: There is a significant relationship between personal problems and mental health among nurses at Hospital Raja Perempuan Zainab II (HRPZ II).	

The result of hypothesis H2 in the previous chapter reviewed to answer research question 2. Apart from that, H2 stated that there is a relationship between personal problems and mental health among nurses at Hospital Raja Perempuan Zainab II (HRPZ II). From the findings, it shows that personal problems are positive and not related to mental health among nurses at Hospital Raja Perempuan Zainab II (HRPZ II) with correlation coefficient of 0.310. In addition, there is no relationship between personal problems and mental health among nurses at Hospital Raja Perempuan Zainab II (HRPZ II). Therefore, H2 rejected.

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5.2.3 Effect of stress level on mental health among nurses in HRPZ II.

Research question 3 of this study asked about any effect of stress level on mental health among nurses in HRPZ II? This is also to answer the third objective and hypothesis.

Table 5.3: Research Objective 3 & Research Question 3

Research Objectives (RO)	Research Question (RQ)
To identify the effect of stress level on mental health nurses in HRPZ II.	Does there any effect of stress level on mental health among nurses in HRPZ II
H3: There is a significant relationship between stress level and mental health among nurses at Hospital Raja Perempuan Zainab II (HRPZ II).	

The result of hypothesis H3 in the previous chapter reviewed to answer research question 3. Apart from that H3 stated that there is a relationship between stress level and mental health among nurses at Hospital Raja Perempuan Zainab II. From the findings, it shows that stress level is positive and not related to mental health among nurses in HRPZ II with correlation coefficient of 0.413. In addition, there is no relationship between sleep quality and mental health among nurses in HRPZ II. Therefore, H3 are not significant and rejected.

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5.2.4 Relationship between quality of sleeping and mental health among nurses in HRPZ II.

Research question 4 of this study asked about any relationship between quality of sleeping and mental health among nurses in HRPZ II? This is also to answer the fourth objective and hypothesis.

Table 5.4: Research Objective 4 & Research Question 4

Research Objectives (RO)	Research Question (RQ)
To examine the relationship between quality of sleeping and mental health among nurses in HRPZ II.	Is there any relationship between quality of sleeping and mental health among nurses in HRPZ II?
H4: There is a significant relationship between sleep quality and mental health among nurses at Hospital Raja Perempuan Zainab II (HRPZ II).	

The result of hypothesis H4 in the previous chapter reviewed to answer research question 4. Apart from that H4 stated that there is a relationship between sleep quality and mental health among nurses at Hospital Raja Perempuan Zainab II. From the findings, it shows that sleep quality is positive and not related to mental health among nurses in HRPZ II with correlation coefficient of 0.358. In addition, there is no relationship between sleep quality and mental health among nurses in HRPZ II. Therefore, H4 are not significant and rejected.

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5.2.5 Relationship between financial and mental health among the nurses in HRPZ II.

Research question 5 of this study asked about any relationship between financial and mental health among the nurses in HRPZ II? This is also to answer the fifth objective and hypothesis.

Table 5.4: Research Objective 5 & Research Question 5

Research Objectives (RO)	Research Question (RQ)
To identify the effect of financial to mental health among nurses in HRPZ II	What is the relationship between financial and mental health among the nurses in HRPZ II?
H5: There is a significant relationship between financial and mental health among nurses at Hospital Raja Perempuan Zainab II (HRPZ II).	

The result of hypothesis H5 in the previous chapter reviewed to answer research question 5. Apart from that H5 stated that there is a relationship between financial and mental health among nurses at Hospital Raja Perempuan Zainab II. From the findings, it shows that financial is positive and not related to mental health among nurses in HRPZ II with correlation coefficient of 0.196. In addition, there is no relationship financial and mental health among nurses in HRPZ II. Therefore, H5 are not significant and rejected.

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5.3 LIMITATIONS

Through the entire research, a valuable and important process to complete the research was experienced by the researcher throughout. Even so, there are some limitations that cannot be avoided from letting the research go as expected. This is because there are some limitations of the current study that need to be acknowledged. The first limitation of this study is the time constraint of several months to complete the entire data collection. The researcher has tried to get respondents quickly in a short time.

Additionally, respondents' reluctance to cooperate in taking the time to answer the online questionnaire. An online questionnaire that only took five minutes to answer was distributed through WhatsApp groups, Facebook pages and Instagram received only a small response. The researcher had to repeatedly ask and appeal to them to fill out this survey to get participation from the respondents.

Next, this study also only focused on one department at Raja Perempuan Zainab II Hospital. This is because the study was done randomly. This study was also conducted after the covid-19 pandemic. As a result, nurses can control their mental health. Therefore, the results of the study obtained are less supportive of the hypothesis carried out by the researchers and the population from the hospital.

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5.4 RECOMMENDATIONS

Studying the factors that influence the mental health of nurses is an important and valuable endeavour. Nurses' well-being directly impacts their ability to provide quality care and their overall job satisfaction. Some suggestions for future research in this area are in terms of job stress, which is to investigate specific work-related stressors that contribute to nurses' mental health issues, such as high workload, emotional demands, lack of control, organizational culture and interprofessional conflict. Examine the impact of these stressors on a range of mental health outcomes, including fatigue, anxiety, depression and job satisfaction.

In addition, the workplace environment by exploring the influence of the physical and psychosocial work environment on the mental health of nurses. Factors such as workspace design, noise levels, lighting, safety measures, and the presence of supportive colleagues or supervisors can significantly affect a nurse's well-being.

Work-life balance should also be emphasized by examining the relationship between work-life balance and nurses' mental health. Investigate how factors such as flexible work schedules, family support, childcare arrangements and availability of time off affect nurses' ability to manage work stress and maintain a healthy work-life balance.

Furthermore, the next study should detect the social support system on the mental health of nurses. Explore the role of support from colleagues, supervisors and healthcare organizations in reducing the negative effects of stress and promoting mental well-being. Examine the effectiveness of interventions such as peer support programs, mentoring, and counselling services in improving nurses' mental health outcomes.

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Technology and workload also need to be taken seriously by investigating the impact of technology implementation, such as electronic health records and digital documentation systems, on nurses' mental health. Assess the impact of increased workload, information overload and blurring of work-life boundaries due to technological advances.

These recommendations provide a starting point for future research in understanding the factors that influence nurses' mental health. By expanding our knowledge in this area, we can develop evidence-based strategies and interventions to promote nurse well-being and ultimately improve the quality of health care delivery.

5.4.1 Future Study

This research does use quantitative methods for better research purposes. Nevertheless, for future research, researchers may use qualitative methods to find information since it is using pa different approach and may obtain different information from using quantitative methods. The purpose of using a different method is to determine whether there is any different outcome from previous research. For example, when using a quantitative method, researchers may not receive specific data but, when using a qualitative method, researchers are more likely to receive accurate data.

The last piece of guidance for potential researchers is to become familiar with analysis tools like SPSS, which is what we do. SPSS (a statistical tool for the social sciences) was used to analyses the replies, or as we might refer to them, the specifics of the respondents' input. Because there are no recommendations for the most effective methods of data analysis, learning how to utilize SPSS requires a lot of study. The assessment assumes a

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significant role after the data have been summarised and analysed. The analytical system that will be utilized for future researchers' studies should be properly reviewed and understood.

5.5 CONCLUSION

As the conclusion, this research has been carried out to explore factors influencing mental health among nurses at HRPZ II. The influential factors (independent variables) which are organization, personal problem, stress level, sleep quality and financial can affect mental health (dependent variable) among nurses. However, with good support from employers and colleagues, work will be easier and there will be no stress at work. As mentioned in Chapter 3, researchers using Google Form with 104 respondents were administered among the respondents who are nurses in the HRPZ II answered this questionnaire. The researchers also collect all data and information using quantitative methods. In addition, the researchers also used Google Forms as a medium to reach respondents in the hospital. This is because using this Google form makes it easier for respondents to answer all questionnaires and helps researchers save time and costs.

In the findings from the survey questionnaire that analysed using several analyses such as frequency analysis, descriptive analysis, reliability analysis and correlation analysis. Next, the results that have been obtained in the previous chapter and all the data from the questionnaire have also been evaluated by the software program that is Statistical Package for the Social Science (SPSS). Researchers use this software program because it is easy to know

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all the results. Finally, it is more about summarizing and concluding the final results based on data analysis. For this study, all hypotheses (H1, H2, H3, H4 and H5) stated are not accepted. In addition, limitations and recommendations have also been implemented for this research and are expected to be used for further studies. Therefore, all the information provided throughout this research is also expected to help the next researcher.

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REFERENCES

Bitstream. (n.d.). *Bitstream.* Retrieved from Chapter 3 Study methodology: https://uir.unisa.ac.za/bitstream/handle/10500/1899/03chapter3.pdf

Chizuko Takahashi, F. C. (2011). The impact of inpatient suicide on psychiatric nurses and their need for support. *BMC Psychiatry*, No. 38.

Emilia Zainal Abidin, I. N. (2007). Work-related stress and coping: A Survey on Medical and Surgical nurses in a Malaysian teaching hospital. *Researchgate*.

Farinaz Havaei, X. T. (2021). The Association between Mental Health Symptoms and Quality and Safety of Patient Care before and during COVID-19 among Canadian Nurses. *Healthcare*.

Fleetwood, D. (2018, 11 13). *Question Pro*. Retrieved from Sampling Methods: Types with Examples: https://www.questionpro.com/blog/types-of-sampling-for-social-research/

Hill, K. S.-B. (2011). Work Satisfaction, Intent to Stay, Desires of Nurses, and Financial Knowledge Among Bedside and Advanced Practice Nurses. *The Journal Of Nursing Administration*, Vol 41, No 5, pages 211-217.

International Council of Nurses. (Adopted in 1995). Retrieved from Mental Health: https://www.icn.ch/sites/default/files/inline-files/PS_A_Mental%20Health_0.pdf

Ishtiaq, M. (2019). Creswell, J. W. (2014). Study Design: Qualitative, Quantitative and Mixed Methods Approaches (4th ed.). Thousand Oaks, CA: Sage. *Academia*.

Jablonski, K. (2022). Personal issues impacting the workplace. *International Bar Association*.

JB Medical . (2022, 05 11). Retrieved from What Are The Biggest Risks of Mental Health Nursing?: https://jbmedical.com.au/what-are-the-biggest-risks-of-mental-health-nursing/

Jonathan M. Mwania, T. M. (2017). THE INFLUENCE OF TEACHING AND LEARNING RESOURCES ON . *European Journal of Education Studies*, Vol 3, Issues 11.

Khatony, A., Zakiei, A., Khazaie, H., Rezaei, M., & Janatolmakan, M. (2020). A Study of Sleep Quality Among Nurses and Its Correlation With Cognitive Factors. *Nursing Administration Quarterly*, Vol 44, No 1, Pages E1-E10.

Laura Chandler, C. P. (2022). Improving university students' mental health using multi-component and single-component sleep interventions: A systematic review and meta-analysis. *ScienceDirect*, Vol 100, Pages 354-363.

McCombes, S. (2019, 09 19). *Scribbr*. Retrieved from Sampling Methods | Types, Techniques & Examples: https://www.scribbr.com/methodology/sampling-methods/

Miscom, Z. (2022). Jururawat terlalu banyak bekerja, kurang gaji dan tidak dihargai. *Homage*.

Muhammad Habiburrahman, E. L. (2021). The Impact of Sleep Deprivation on Work Performance towards Night-shift Healthcare Workers: An Evidence-based Case Report. *Acta Medica Philippina The National Health Science Journal*, Vol 55 No 6.

Pan American Health Organization and WHO. (2007). Retrieved from Mental Health: https://www.paho.org/en/topics/mental-health#:~:text=The%20World%20Health%20Organization%20(WHO,to%20his%20or%20her%20community%E2%80%9D

Parul Sharma, A. D. (2014). Occupational stress among staff nurses: Controlling the risk to health. *Indian Journal of Occupational & Environmental Medicine* , Vol 18, No 2, Pages 52-56.

Psychology, A. D. (2022, 09). *American Psychological Association.* Retrieved from Mental health: https://www.apa.org/topics/mental-health

Ramli, A. A. (2018). Stress Among Nurses: A Case Study At Healthcare Centers In Melaka. *European Proceedings*.

Soomin Ryu, L. F. (2022). The Relationship Between Financial Worries and Psychological Distress Among U.S. Adults. *Nature Public Health Emergency Collection* , 1-18.

Tarsi, K. (2012). *The Nature Education Knowledge Poject* . Retrieved from Introduction to Population Demographics: https://www.nature.com/scitable/knowledge/library/introduction-to-population-demographics-83032908/

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Team, I. E. (2021). 8 Challenges as a Nurse and Tips for Overcoming Them. *Indeed*.

Tuovila, A. (2020, 05 28). *Investopedia*. Retrieved from Sampling: What It Is, Different Types, and How Auditors and Marketers Use It: https://www.investopedia.com/terms/s/sampling.asp

Universitas Muhammadiyah Malang . (n.d.). Retrieved from CHAPTER III Study Methodology.

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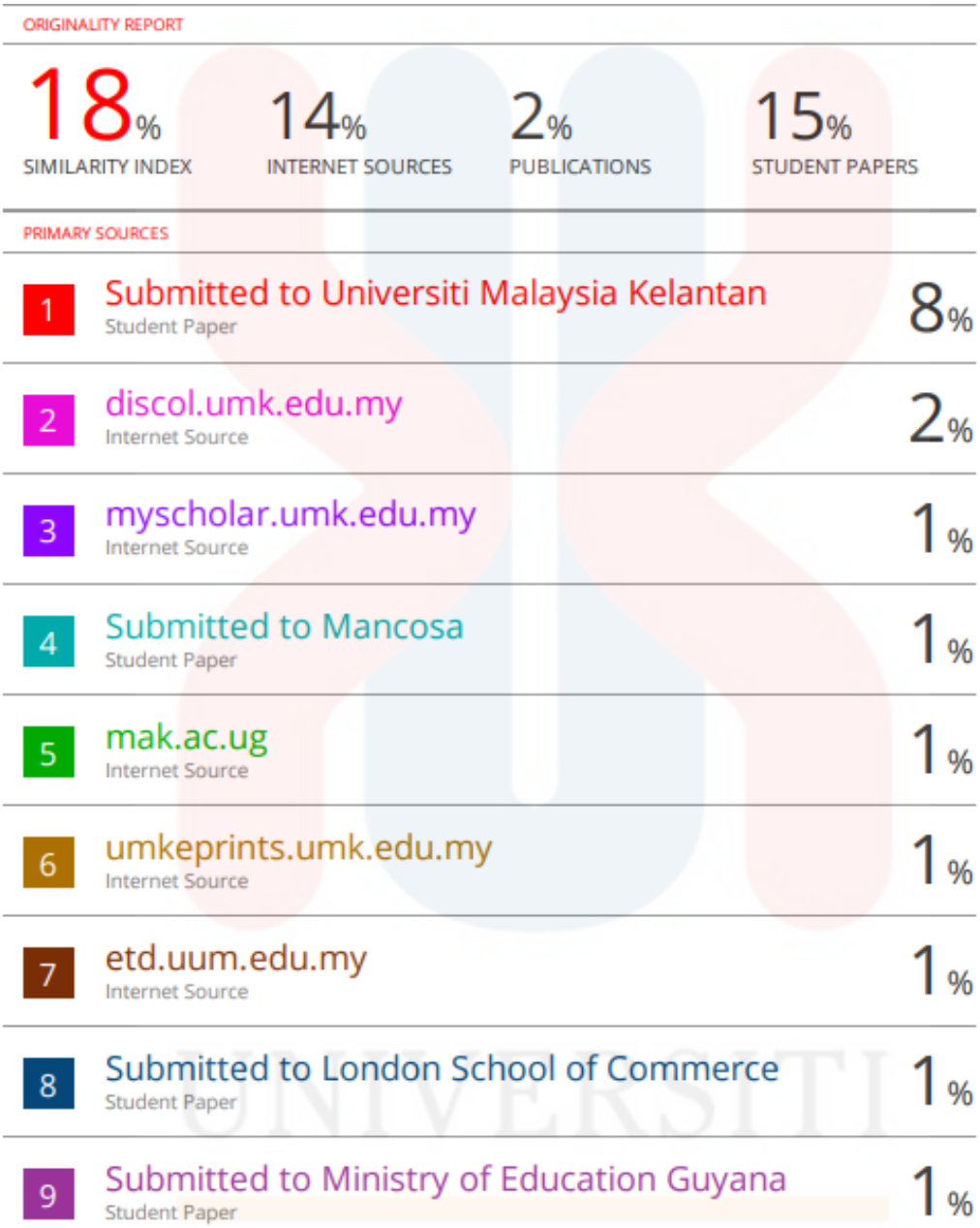
Appendix



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