

# Assessment of the Health Condition of Nursing

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## ABSTRACT

Nowadays, in the field of healthcare, nursing performs one of the most important functions, which is largely indicative of the economy, and the high quality of services. The state of health, satisfaction with work and wages determines the main characteristics by which the profession of a nurse is popular in the world. Factors that determine and affect health are multifaceted. In different countries and cities of one country, the distribution of the share of the influence of factors influencing health conditions is very large. Depending on what factors affect the state of nursing specialists, its shortage in a particular region of workers determines.

**Keywords:** nurse, healthcare, job satisfaction, health conditions

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## INTRODUCTION

In our world where the development of microtechnology, cyber technology and gadgets is in full swing, the quality of life plays the most important role for every person (1, 27). The lack of a particular profession beats the state in all key categories on key indicators. As in the whole world, in our country there is also a shortage of health professionals. For example, the lack of medical specialists in Turkey creates the need to find important key points and create a working strategy for engaging in the profession and subsequent satisfaction with their work. The shortage is especially felt in the middle level of health care, such as nurses, social workers (2, 24). As you know, if an employee is satisfied with his work, this gives an increase in working capacity and beneficial work. One of the criteria for job satisfaction is employee health. Job satisfaction among employees is a very important criterion that affects productivity and quality of work. (3). Satisfaction is like a complex that includes attitudes to one's work, love for him, which affect career growth, health and relationships between colleagues, motivation to work in general (4-6, 26).

According to WHO, "quality of life" includes 12 aspects of quality of life, for example, health status, material security, upbringing, working conditions, employment, consumption and supplies, transport and communications, living conditions, clothing, leisure, social confidence and personal freedom (8-11). And all 12 aspects play an important role in the life of each individual. The negative relationship between these events is largely obvious, but is a complex phenomenon and continues to be studied. (1, 15).

Nursing - is both art and science. Nursing at all times was called upon to solve the most difficult tasks associated with changing the situation in the health of the world's population, as well as provide overwhelming help to a doctor. The role of nursing specialists, which is the most significant part of the public health workforce, has developed under the influence of time and the need to meet new health requirements. The areas of activity of nursing specialists include the provision of a wide range of services not only at the hospital level, but also within the framework of primary health care. In spite of the complex structure, the nursing is dynamic in practice, flexibly responding to demographic, economic and social problems, to changing medical needs of the population. Therefore, the creation of favorable working conditions, respectively, to improve the quality of life and health of medical workers are constantly in the focus of attention

at all levels of healthcare. Preservation of professional health and longevity, quality of life due to advanced technologies, reduction of morbidity and injuries is one of the main tasks of society, the most important function of the state and the basis of its social policy, determines the possibilities and rates of economic development of the country (12-14, 16). The problem of morbidity and a decrease in the quality of life of nurses is becoming increasingly important due to the sharply increased pace and intensity of work activity, increased requirements for the quality of work. The work activities of nurses are associated with high neuro-emotional stress, contact with chemical, biological substances and drugs, the influence of various types of radiation, and low wages in a market economy often force nurses to work beyond the prescribed time (17-20). In general, the health care of our republic and not only medical personnel is one of the main resources. Accordingly, the quality of care provided by medical personnel, especially medical networks, mainly depends on the level of their qualifications, professionalism and ability to make decisions independently, mainly go along with the quality of life, working conditions and regimen (21-23).

## PURPOSE

The purpose of this study is to analyze the opinions of nurses on the level of prestige of their work and the degree of satisfaction with their profession, as well as assessing their health status, quality of life and wage levels.

## MATERIALS AND RESEARCH METHODS

The research materials use the data obtained in the course of a sociological study using a questionnaire specially developed by the author and leader. The following blocks were reflected in the questionnaire: 1. personal data, 2. qualifications, schedule and mode of work, 3. housing, 4. marital status, 5. health (general and female), 6. lifestyle. But in this article we will describe only about the health (general and female) of nurses.

According to the academician, doctor of medical sciences, doctor of sociological sciences, professor A.V. Reshetnikova (5) questionnaires are reliable, comprehensive, anonymous. The quality of life of medical workers was studied on the questionnaire in programme SPSS - 20, 108 points of questions characterize the indicators of quality of life, satisfaction with working conditions, work schedule, prestige of mid-level work. Answers to questions were evaluated differently.

Nurses working in medical organizations (hospitals, clinics) of the Republic of Kazakhstan

**Object of study**

**Table 1.** Do nurses cause or exacerbate the disease

	unsatisfactory condition		There are significant health problems.		satisfactory		good health, slight deviations		excellent health		t	P
	Abs	%	Abs	%	Abs	%	Abs	%	Abs	%		
Male	37	13,1	164	58,1	72	25,5	0	0	9	3,2	2,12	<0,05
Female	261	10,0	1543	59,0	636	24,3	57	2,2	121	4,6		

\*Abs - Absolute indicators

This table shows self-esteem data on your health status of nurses. As can be seen in the table, there are significant problems with health, mainly female nursing specialists 90.4%, but it can also be considered that 9.6% men have

certain problems. Student's T-test equals - 2.12, significance level <0.05. It follows that self-assessment of the health status of nurses has a statistical significance of 95% probability.

**Table 2.** Do nurses take any drugs?

	Yes		No		Difficult to answer		t	P
	Abs	%	Abs	%	Abs	%		
Male	191	67,7	0	0	91	32,3	0,26	>0,05
Female	1739	66,4	31	1,2	848	32,4		

\*Abs - Absolute indicators

For any clinician and doctor, disease prevention is a priority. In this regard, we were also interested in whether the health workers themselves. And one of the questions was whether they prevent the onset/exacerbation of the disease. As it turned out, the majority of respondents that prevent the

onset/exacerbation of the disease. And more than 32.4% found it difficult to answer whether they carry out the prevention of the disease. Also, Student's T-test is 0.26, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

**Table 3.**

	No		Yes		t	P
	Abs	%	Abs	%		
Male	97	34,4	185	65,6	0,03	>0,05
Female	898	34,3	1720	65,7		

\*Abs - Absolute indicators

After the issue of prophylaxis, we wondered how many respondents of nursing specialists were taking drugs and whether it depends on gender. And the answer was not a surprise for us, since more than 65.7% of respondents said that they take various drugs, depending on the

nosology and symptoms of the disease. Also, Student's T-test is - 0.03, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

**Table 3a.**

	antihypertensive drugs		sugar-lowering drugs (for diabetes)		hormonal drugs		analgesics		another		t	P
	Abs	%	Abs	%	Abs	%	Abs	%	Abs	%		
Male	114	40,4	38	13,5	49	17,4	0	0	81	28,7	3,38	<0,001
Female	768	29,3	377	14,4	537	20,5	2	0,08	934	36,0		

\*Abs - Absolute indicators

After we got the answer yes to taking the drugs, we decided to find out what kind of all such drugs the bulk of nursing specialists take. And in the responses, more than 67.83% scored 4 categories of drugs: antihypertensive, hypoglycemic, hormonal drugs and analgesics. And 32.4% got different drugs, such as iron-containing, anti-

allergic, anticonvulsant, expectorant drugs, antibiotics of various kinds and generations. Student's T-test is equal to - 3.38, significance level <0.001. And this means that the answers in this sample do not have 0.1% error output. And the survey and the reliability of the results is 99.9%.

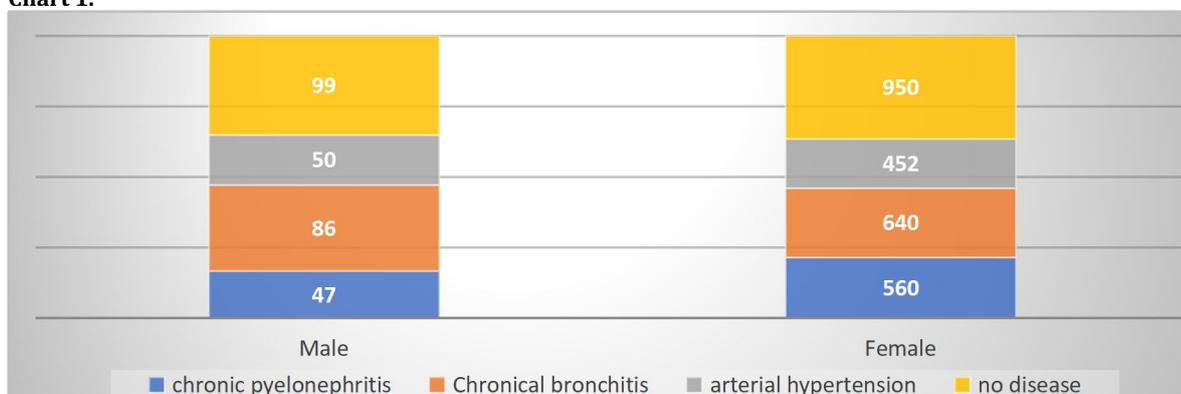
**Table 4.**

	Yes		No		t	P
	Abs	%	Abs	%		
Male	210	74,5	72	25,5	1,62	>0,05
Female	2066	78,9	553	21,1		

More than 76.7% of both male and female nursing specialists have chronic diseases on an equal basis. What follows is that the chronic course of the incidence does not depend on the gender of the respondent. Student's T-test equals - 1.62, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

Among chronic diseases, it mainly occupied a leading position in respiratory diseases, despite the fact that as **Chart 1.**

far as the question of whether you take drugs, it was not noted how often drugs are used to treat diseases of the respiratory system. And he is equally equal among male and female medical workers. And minor diseases were noted, such as chronic gastritis, endemic goiter, iron deficiency anemia. Together, they scored 0.5%. Student's T-criterion is - 0.02, significance level > 0.05. And this means that the answers in this sample do not have statistical significance (chart 1)



**Table 5.**

	Yes		No		t	P
	Abs	%	Abs	%		
Male	185	65,6	97	34,4	0,37	>0,05

## Assessment of the Health Condition of Nursing

Female	1747	66,7	871	33,3		
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Having chronic diseases, as a result, you need to stand on the dispensary account. For disease control and prevention of relapse and disability. And I am glad that everything is so, 66.2% are registered at the dispensary, conducts timely prevention of relapse, complications, and

as a consequence of disability in the future. Student's T-criterion is - 0.37, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

**Table 6.**

	never		1 time		2 time		3 times and more		t	P
	Abs	%	Abs	%	Abs	%	Abs	%		
Male	16	6,0	58	21,0	38	13,5	170	60,3	1,43	>0,05
Female	74	2,8	550	21,0	325	12,4	1669	64,0		

When asked how many times they got sick last year, middle-level medical workers 62.2% answered that 3 times or more once a year. What gives us food for thought, that so often you can get sick only because of a strong

decrease in immunity. Student's T-criterion is - 1.43, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

**Table 7.**

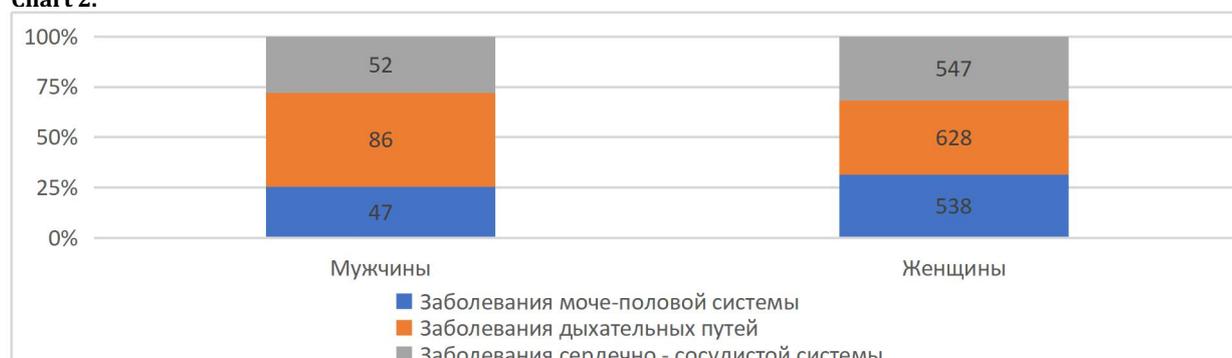
	Yes		No		t	P
	Abs	%	Abs	%		
Male	169	60,0	113	40,0	0,20	>0,05
Female	1584	60,5	1034	39,4		

60% of mid-level medical workers dismissed that they have one or another disability group. Student's T-criterion is - 0.20, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

respiratory tract and cardiovascular systems. And among the respondents, 34.4% of mid-level medical workers said that there was no disability for any disease. Student's T-criterion is - 0.30, significance level > 0.05. And this means that the answers in this sample do not have statistical significance. (Chart 2)

Basically, that is, 65.6% of mid-level medical workers noted disability for diseases of the genitourinary,

**Chart 2.**



**Table 8.**

	1 group		2 group		3 group		No group		t	P
	Abs	%	Abs	%	Abs	%	Abs	%		

### Assessment of the Health Condition of Nursing

Male	0	0	124	44,0	61	21,6	97	35,0	1,02	>0,05
Female	0	0	1013	39,0	698	27,0	907	34,0		

Among the three disability groups, 2 disability groups prevail. And only 24.3% of respondents said that they have 3 disability groups. And 34.5% do not have any

disability groups. Student's T-criterion is - 0.30, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

**Table 9.**

	Less than 6		7 to 10 days		11 to 21 days		More than 22 days		another		t	P
	Abs	%	Abs	%	Abs	%	Abs	%	Abs	%		
Male	0	0	136	48,2	85	30,1	45	15,9	16	6,0	0,58	>0,05
Female	59	2,3	1174	44,8	812	31,0	491	19,0	82	3,1		

During the year, mid-level medical workers due to illness were disabled from 7 to 10 days, 46.5% of respondents. In the next 11 to 21 days, 35.5% of the nurses did not go

to work due to illness. Student's T-criterion is - 0.58, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

**Table 10.**

	Yes		No		t	P
	Abs	%	Abs	%		
Male	250	89,0	32	11,0	1,44	>0,05
Female	2246	86,0	372	14,0		

Due to disability, a sick leave certificate is issued according to the law of the labor code. And the nurse filled out a temporary disability sheet of 87.5%. Student's

T-criterion is - 1.44, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

**Table 11.**

	never		1 time		2 time		3 times and more		another		t	P
	Abs	%	Abs	%	Abs	%	Abs	%	Abs	%		
Male	71	25,2	21	7,5	113	40,0	77	27,3	0	0	0,94	>0,05
Female	554	21,2	293	11,2	1002	38,3	765	29,2	4	0,2		

Last year, the nurse had 39.2% of cases who reported that 2 times a year they steadily left and issued a sheet of temporary disability due to illness. Student's T-criterion

is - 0.94, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

**Table 12.**

	Yes		No		Difficult to answer		t	P
	Abs	%	Abs	%	Abs	%		
Male	0	0	213	76,0	69	24,0	2,05	<0,05
Female	26	1,0	1778	68,0	814	31,0		

According to the results of the survey, namely 72% of the nurses noted that they do not need appropriate employment according to the nature of the disease. In general, according to the survey, it can be judged that,

middle-level medical workers there is no need to change the place of work due to illness or disability. Student's T-criterion is - 2.05, significance level <0.05.

**Table 13.**

	Free		I pay by myself		At the expense of a medical institution		t	P
	Abs	%	Abs	%	Abs	%		
Male	155	55,0	127	45,0	0	0	2,36	<0,05
Female	1252	47,8	1363	52,0	3	0,2		

On the issue of payment for treatment, mid-level medical workers noted that they were free of charge from state funds allocated to medical institutions at the place of registration. Half also noted that there is a share of self-paid for the treatment of the disease. And only 0.2% of

women said that they undergo treatment at the expense of the medical facility at the place of work. And none of the respondents at the time of the survey did not participate in voluntary health insurance. Student's T-criterion is - 2.36, significance level <0.05.

**Table 14.**

	Yes		No		t	P
	Abs	%	Abs	%		
Male	73	26,0	209	74,0	1,02	>0,05
Female	604	23,0	2014	77,0		

The question of how to attend a sanatorium-resort treatment, middle-level medical workers 75.5% said they did not attend. What is the reason for this at the time of

the survey was not known. Student's T-criterion is - 1.02, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

**Table 15.**

	At the expense of personal funds		At the expense of the employer		За счет средств проф.союзной организации		Difficult to answer		t	P
	Abs	%	Abs	%	Abs	%	Abs	%		
Male	201	71,3	65	23,0	16	5,7	0	0	1,71	>0,05
Female	1747	67,0	370	14,1	482	18,4	19	0,7		

Of those who still visit health resort areas and undergo treatment, most of them go at their own expense. Student's T-criterion is - 1.71, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

**Table 16.**

	Yes		No		Difficult to answer		t	P
	Abs	%	Abs	%	Abs	%		
Мужчины	48	17,0	234	83,0	0	0	2,22	<0,05

Женщины	342	13,0	2244	86,0	32	1,2		
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According to the results of the survey, middle-level medical workers noted that they did not hide their state

of health from colleagues, from people around them. Student's T-criterion is - 2.36, significance level <0.05.

Table 17.

	Yes		No		t	P
	Abs	%	Abs	%		
Male	35	12,0	247	88,0	1,71	>0,05
Female	233	9,0	2385	91,0		

Well, the question that is relevant today in connection with the introduction of compulsory social health insurance is, of course, do health workers have health insurance. And 89.5% do not have health insurance at the time of the survey. Student's T-criterion is - 1.71, significance level > 0.05. And this means that the answers in this sample do not have statistical significance.

### CONCLUSIONS

The conclusions of the survey are mixed. To begin with, independent assessment of one's health (according to a five-point system), the need for a change or appropriate employment according to the nature of one's disease and at what expense the treatments are used have error assumptions of 5% significance levels. Which allows us to understand that up to 5%, most likely we can make a mistake in the conclusions based on the questionnaire, while an independent assessment of nursing specialists can give inaccurate answers. But in general, 95% we can be sure that, nevertheless, middle-level medical workers adequately assess their current state of health. On the question of which groups of drugs are most often used by middle-level medical workers, the significance level is 0.1%. Which gives us the opportunity to be sure that middle-level medical workers made erroneous answers in 0.1% of all respondents. And by this result we can be sure of the reliability of their answers. But in other questions, you can be wary of correctness in the answers. And we do not know the reasons for this. It means whether the occurrence / exacerbation of the disease is prevented, on the basis of taking drugs on an ongoing basis, the presence of a chronic disease, whether they are registered on the dispensary, how many times they were sick last year, the disability group, the design of the disability sheet has a P level of 95% significance. Which gives us conclusions that we can only rely on 5% reliability for answers to these questions. And so in general, both the female half and the male half of nursing specialists have significant health problems, which in the future can lead to the loss of temporary or permanent disability of our specialists. But at the same time, at the same time, the fact that the middle level of health care is actively preventing the onset / exacerbation of their disease is encouraging. Depressing is the fact that they take a lot of drugs to treat a particular disease. And of course, we could not get around the issue of the presence of a chronic disease. And in this matter again, we did not find the difference between men and women. They equally have chronic diseases of various organs and systems. The main diseases are the respiratory tract, urine - genital and cardiovascular systems. And they are

actively registered at the dispensary; they actively participate in the prevention of relapse and exacerbation of their own diseases. last year, middle-level medical workers filled out a sheet of temporary disability 3 times or more, which tells us the health status of middle-level medical workers is below satisfactory. What the answer to the question of self-esteem of the state of health demonstrated to us.

All this leads us to the idea that there is a need for reform and the proper conduct of preventive examinations not only when applying for a job, but also afterwards. I believe that it is necessary to organize the possibility of undergoing preventive examinations, passing tests and passing various instrumental examinations at the place of work. That is, it enables the timely determination of the disease, prevention and prevention of exacerbation of the disease, and its subsequent disability. Economic disability is not beneficial to the state. On the other hand, the presence of disability among middle-level medical workers and their performance today is very commendable.

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