

Psychological Well-Being and Attitudes towards Work of Nurses at a Hospital in Botswana

Chisomo S. Letso¹, Botswana. Dorothea dela Cruz², Philippines

¹Student, Centro Escolar University, Manila, Philippines

²P/b 0027, Gaborone, Botswana

DOI: <https://dx.doi.org/10.47772/IJRISS.2025.905000142>

Received: 29 April 2025; Accepted: 02 May 2025; Published: 04 June 2025

ABSTRACT

The study assessed the psychological well-being of nurses in a hospital in Botswana and their attitudes towards work. The study took a quantitative- correlational design with 41 respondents in Outpatient, Female medical, Male medical, Infectious Disease Control Centre, Pediatrics ward and Accidents & Emergencies units. A purposive sampling technique was employed on the target group, using the 42 psychological wellbeing (PWB) scale of C.D Ryff. Respondents were profiled according to gender, age, level of education, marital status and work unit. Quantitative data was analyzed using Statistics Analysis System (SAS) and the level of significance was declared @ $P < 0.05$, Correlation coefficients were used to determine nurses' attitudes toward work psychological well-being. The findings revealed high psychological well-being levels in nurses working in male medical ward ($p < 0.05$) for purpose in life and self-acceptance than that of nurses working in outpatient and Female medical units. Nurses who worked in senior positions showed high levels ($p < 0.05$) for purpose in life than those in other units. The psychological wellbeing and the attitude towards work were not ($p > 0.05$) affected by the demographic profile (age, gender, marital status, years of service) of nurses. Nurse's psychological wellbeing does not impact on their attitudes to work. Nurses at this government hospital had high psychological wellbeing scores and moderate to good attitudes towards work. These results can inform future research on nurses' psychological well-being in Botswana and suggest strategies for improving psychological well-being and work attitudes among participating nurses. Emphasizing nurses' psychological well-being should be a priority in nursing education, as a healthy mind is essential for effective patient care.

Keywords: Psychological Well-Being; Attitude Towards Work; Nurses; Botswana; Hospital

INTRODUCTION

The psychological well-being of nurses has generated curiosity among many, since time immemorial. The field of physical health services has been envied and entered into as a profession for its different influences, others are influenced by their family, as it is never their first choice. This has piqued the interest of many researchers in Botswana who explore the nursing industry and the behavior of nurses from different perspectives. Some of the researched topics include motivation in nursing, job satisfaction, and attitudes of nurses in numerous areas of the nursing job (Kinman, et al., 2020). The emotional well-being of nurses has also frequented the search as a topic. Discussing the psychological well-being of nurses brings out important aspects of their welfare at the work place that influence other people's view of them. Moamogwe (2019) reports how work stress affects the psychological well-being of workers, thereby, demanding consideration on the process of becoming a nurse be taken into account, noting that traits developed during training could result in accumulated psychological baggage in the work field, if unattended to. Well-being is the state of being in health, be it physically, mentally or psychologically. The psychological aspect speaks to the inner muscle in a person's psyche that enables him or her to make precise decisions about everything he or she does, the choices he or she makes in life, and the attitude he or she develops in addressing his or her circumstances. Adynski et al. (2021) lament how stressful a nurses' job is in itself and the environment in which they work yet their training centers largely on treating pathogens and seldom addresses the psychological need of the caregiver, the first respondent. It's for this reason the present study gauged the psychological well-being of nurses in Botswana and further investigated some

dynamics that influence them to develop particular attitudes toward work, such as nurse's individual background, attitudes toward work as measured by their stress levels, motivation, factors leading to job anxieties, social skills and level of education as noted by Samarkandi, (2018) and Maomogwe, (2019). Botswana is in the Southern part of Africa and the hospital in review is in Kgatleng as shown in the map of Botswana below. The figure below depicts the region where the study was conducted

Map of Botswana

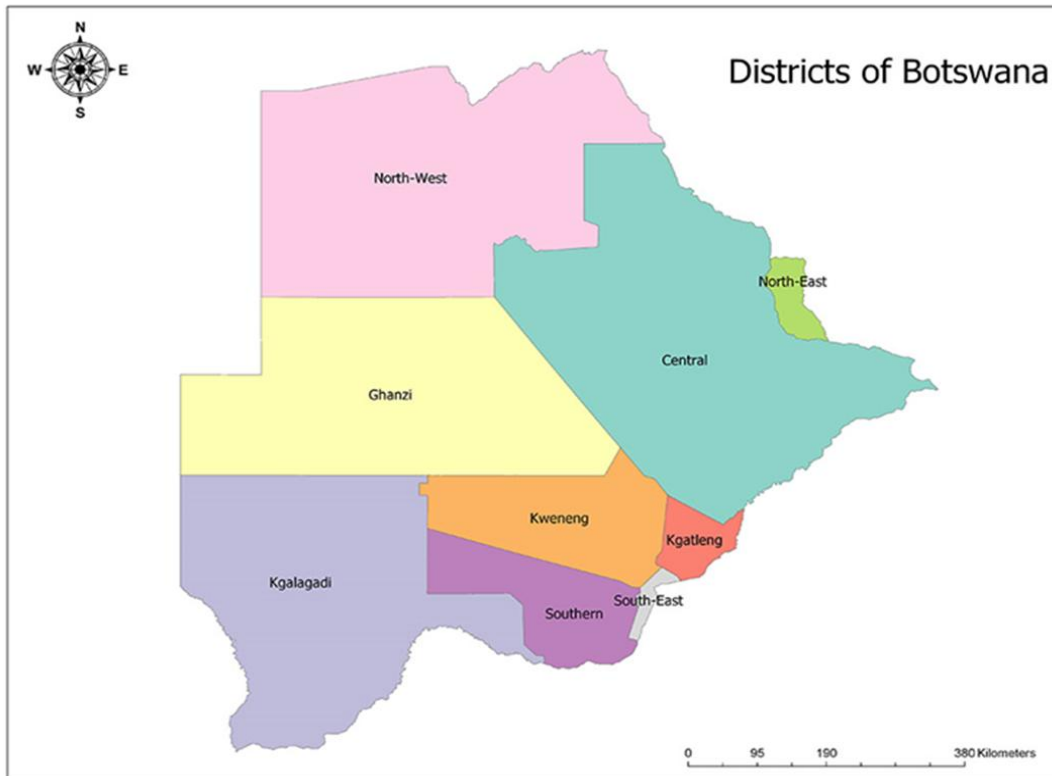


Fig. 1 <https://www.mappr.co/counties/botswana/>

The image above shows the districts of Botswana, in particular the area where the study was conducted- in the Kgatleng District. It is located between latitude 23.88°S-24.51°S and longitude 25.89°E- 26.82°E. In view of the highlighted intrigues above, the paper's objective was to assess the psychological state of nurses in Botswana and further understand their attitudes around work by seeking to establish whether there were some significant correlations between nurses' mental wellbeing and their attitudes towards work.

METHODOLOGY

The study utilized a descriptive correlational design and purposive sampling technique to meet its research objectives. According to Hassan (2023), purposive sampling allows researchers to select participants based on specific criteria that ensure the inclusion of individuals who can provide valuable insights, not obtainable through other sampling methods. The use of purposive sampling was to aid the understanding of nurses' psychological well-being in view of their attitudes towards work. A structured PWB questionnaire adapted from Curhan et al.(2014) and a Lickert scale (Sahin, 2021) measuring attitudes was administered to 41 respondents at Deborah Retief Memorial Hospital (DRM) after obtaining an ethics clearance from DRM and from the Ethics governing body at the Centro Escolar University (CEU). The dimensions were Work Aspects (Opportunity for challenging work, Chance to gain new skills, Tasks that use up all skills and knowledge) Team and team activities (Information on Hospital goals, Rewards) Patient care communication (Helpful Hints on problem solving, Physician recognize of nurses' contribution on patient care), Leadership skills (Information on management goals, Receives continuing information on education on health promotion, Career Development). Data for the study were collected and administered on site only from identified 41 nurses working in Accident and Emergency Room (A&E), Out Patient Department (OPD) Male & Female wards and the Infectious Disease Control Center

(IDCC) at Deborah Retief Memorial Hospital. A theoretical framework model (Gonzalo (2018), was formulated on the basis of the objectives of the study and is presented in figure 2 below.

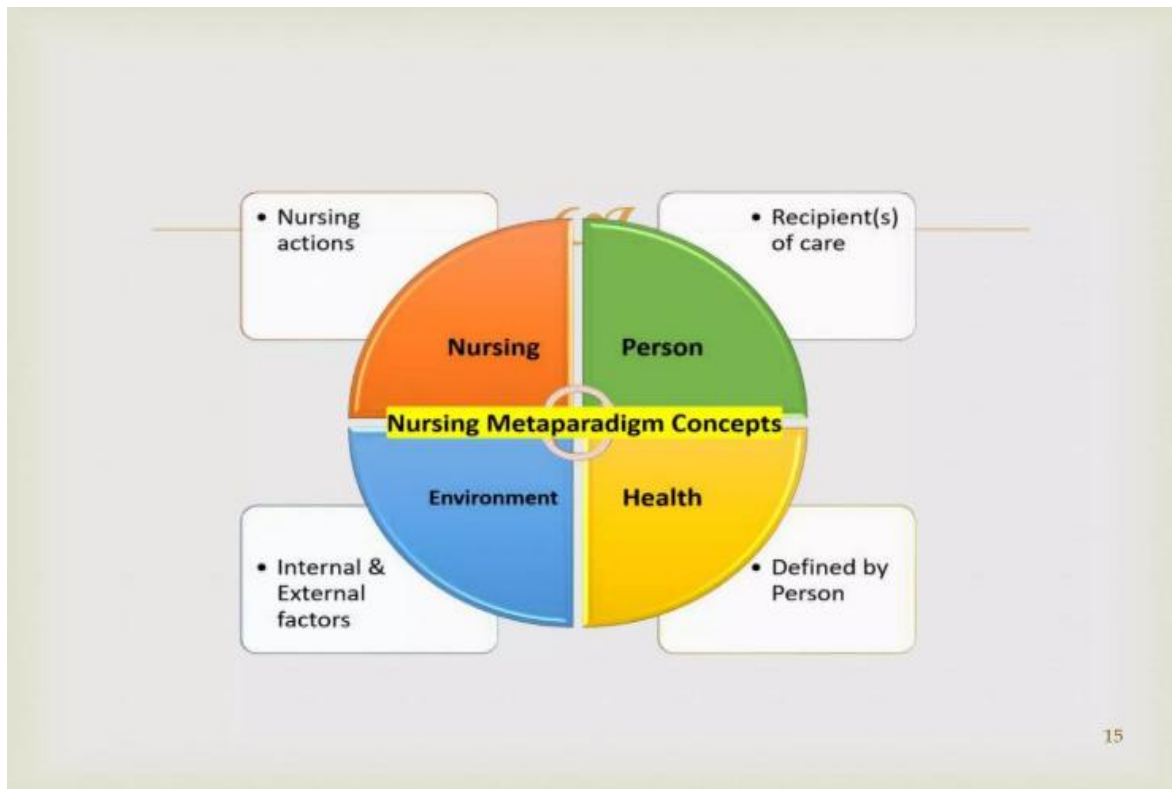


Figure 2. The Pender health promotion model

The above model illustrates the nurses' physical health as reflected in its environment. Though originally meant to address physical wellbeing of nurses, the model replicates their mental wellbeing perfectly. In the current study, the Pender health model helps draw attention to nurses' PWB levels, their attitude towards work and the significance between nurses' PWB and attitudes to work.

RESULTS

The respondents varied in age from 23 to 56 years the majority (68%) of them were females (Figure 4). There was no significant difference in age of respondents. Nurses had qualifications that ranged from diploma to post-graduate. Their length of service ranged from 1 year to over 20 years. The results from the study are presented in Figures 3 to 7 and Tables 1 to 7 below.

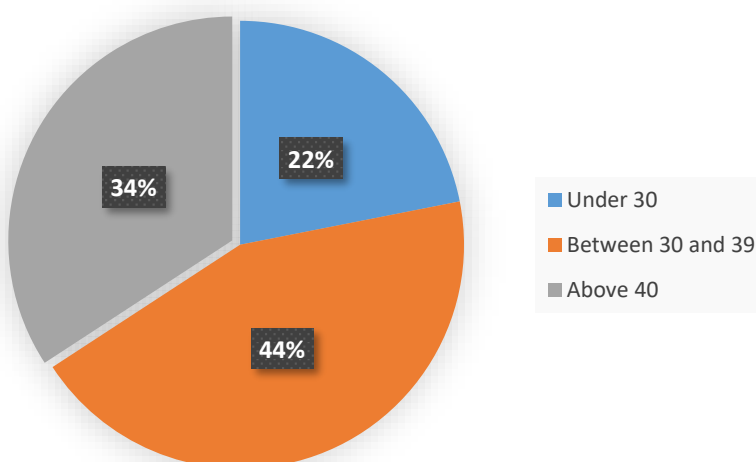


Figure 3. Frequency (%) distribution of respondents by age

From the Figure 3 above, most respondents (44%) were between 30-39 years in age. However, the chi-square test indicates that there was no difference ($P>0.05$) in the number of nurses among the three age groups. Fig. 3 shows that most (56%) of the respondents were less than 40 years in age. This implies that nurses at this hospital were relatively young and therefore could improve in attitudes if the right interventions were put in place.

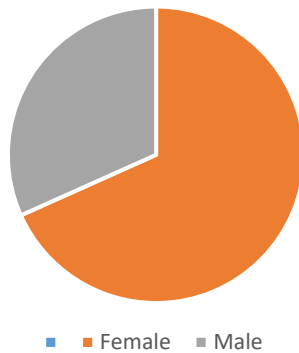


Figure 4. Frequency (%) distribution of respondents by gender

Figure 4 shows there were more ($P<0.05$) females (68.3%) than males in the study. On average, females were older and had more years of service to the profession than male respondents (Table 1). The nursing profession in Botswana is generally dominated by females. I

Table 1. Average age, length of service and years in marriage of respondents.

	Means (years)		
	Age	Years of Service	Length of Marriage
Females	37.7	7.1	6.5
Males	34.9	6.8	7.0
Average	36.8	7.0	6.6
No statistical test due to data being unbalanced			

The average age and the number of years served by the respondents was 36.8 and 7.0 years respectively (Table 1). Since normal retirement age for public employees in Botswana is 55 years, it means that these nurses still have many years to serve the profession.

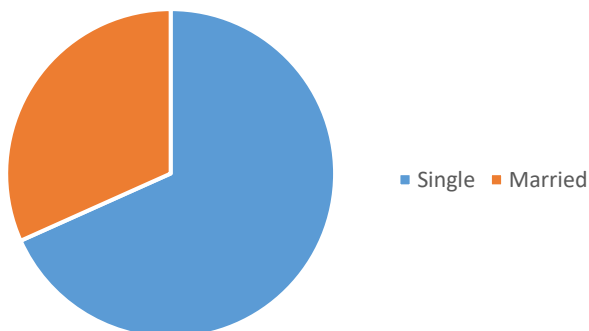


Figure 5. Civil status (married vs. singles) of respondents

There were more ($P<0.05$) singles (68.3%) than marrieds in the study (Figure 5). Single respondents were more than twice the number of the married ones. Perhaps this is an indication that nurses prioritized career development over starting a family.

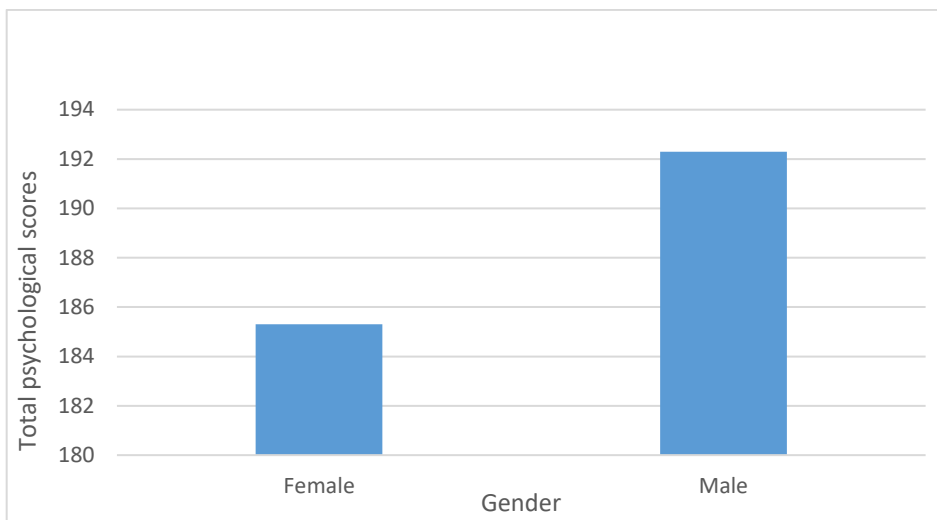


Figure 6. Total psychological wellbeing scores of female and male respondents.

Although not statistically different, female nurses had slightly lower PWB scores compared to their male counterparts. In general, total PWB scores of respondents in the study were high (>170).

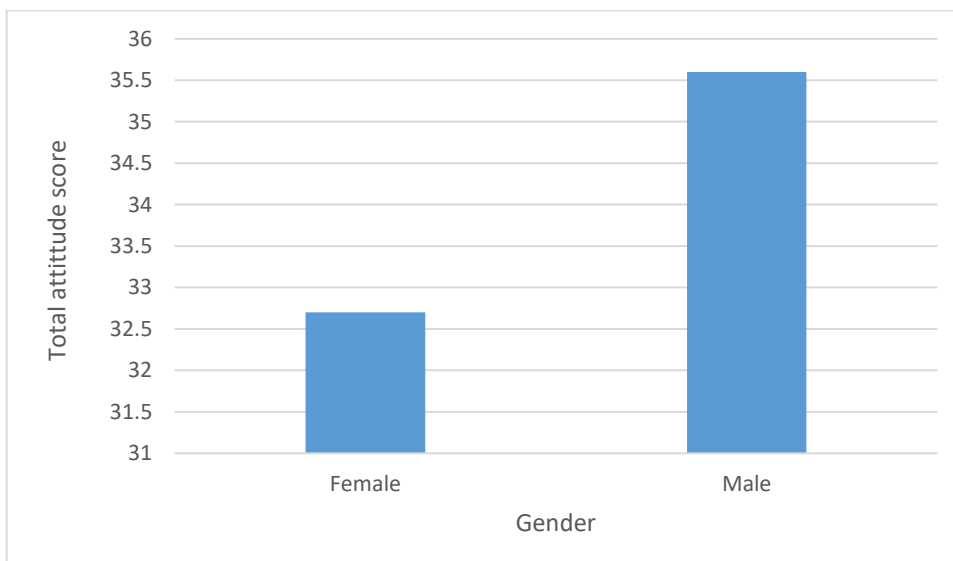


Figure 7. Total attitude toward work scores of female and male respondents.

Male nurses at DRMH had better attitude toward work when compared to the female ones. The males had a good score (>35) for attitude while the females had moderate (< 35) score.

Table 2 Total psychological well-being of respondents as influenced by their age.

	Total psychological wellbeing score				
Age (years)	≤150	150-170	170-190	190-210	≥210
≤30	-	2.44	4.88	7.32	7.32
30-39	9.76	7.32	7.32	9.76	9.76
≥40	4.88	4.88	4.88	12.20	7.32
Total	14.63	14.63	17.07	29.27	24.39

About 15% of the respondents had a low (≤150) total psychological wellbeing score (Table 2). Most of these were in the > 30 year age bracket.

Table 3 Gender mean scores of psychological well-being of respondents

Gender	Psychological Well-Being						
	Total Psychological	Autonomy	Environmental Mastery	Personal Growth	Positive Relations	Purpose In Life	Self-Acceptance
Female	[^] 185.3	30.0	28.1	32.3	31.8	32.6	30.5
Male	192.3	31.8	30.2	34.3	31.9	33.5	30.5
Grand mean	187.5	30.6	28.8	32.9	31.8	32.9	30.5
LSD(0.05)	19.18	3.65	3.57	4.24	3.58	4.18	4.58
*Means with the same letter in a column are not significantly related using LSD(0.05)							
[^] Means without any letter are not significant							

Although male nurses scored 7 points higher in PWB, (Table 3), their score was not statistically higher ($P>0.05$) than that of the female respondents.

The total PWB scores of male and female nurses in the study were high (>170).

Table 4 Age Group mean scores for the levels of attitude towards work of the respondents

Age Group	Attitude Towards Work										
	Total. Attitude.	Opportunity	Chance To Gain	Tasks On Skills	Info On Hospital	Info Goals	Rewards	Continue Education	Helpful Hints	Physician Recognition	Career Develop
Under 30	[^] 34.2	4.2	4.1	4.2	*2.4 ^a	2.7	2.4	3.4	3.9	3.3	3.4
Age 30-39	33.3	3.8	4.2	3.7	3.2 ^{ab}	2.9	2.4	3.4	3.5	3.1	3.1
Above 40	33.6	4.1	3.6	3.9	3.4 ^b	3.5	1.9	3.1	3.5	3.6	3.1
Grand mean	33.6	4.0	4.0	3.9	3.1	3.0	2.3	3.3	3.6	3.3	3.1
LSD(0.05)	5.14	0.90	2.02	0.81	0.89	2.02	1.08	0.90	0.75	0.82	0.96
*Means with the same letter in a column are not significantly different (LSD >0.05) [^] Means without any letter in a column are not significant											
Table 4 above shows no significant difference in nurses' total attitude towards work											

Table 5 Gender mean scores for the levels of attitude towards work of the respondents

Gender	Attitude Towards Work										
	Total Attitude	Opportunity for challenging work	Chance to gain new skills	Tasks that use all Skills and knowledge	Info On Hospital goals	Information on management Goals	Rewards for innovation in the job	Receives Continuing Education on health promotion	Helpful Hints on problem solving	Physicians Recognize nurses' contribution to	Career Development
Female	[^] 32.7	3.9	3.9	3.8	3.1	3.0	2.3	*3.0 ^b	3.6	3.2	3.0
Male	35.6	4.4	4.2	4.2	3.2	3.1	2.2	3.8 ^a	3.5	3.5	3.5

Grand mean	33.6	4.0	4.0	3.9	3.1	3.0	2.3	3.3	3.6	3.3	3.1
LSD(0.05)	4.41	2.02	0.75	0.67	0.78	0.80	0.91	0.71	0.63	0.69	2.02

*Means with the same letter in a column are not significantly different. LSD (>0.05). ^Means without any letter in a column are not significant

Similar to nurses' PWB (Table 3), male respondents had slightly higher scores in attitudes towards work (Table 4). However, there was no statistical difference ($P>0.05$) in total attitudes towards work. The main contributor to male nurses' higher total attitude towards work was that they received ongoing education on health promotions more ($P<0.05$) than their female counterparts. This is a vital aspect in health provision as health matters consistently change (Jang 2019).

Table 6 Total PWB scores and total attitude towards work scores of respondents according to work units.

Units	Total Psychological Wellbeing	Total Attitude
Accident and Emergency	*172.0 ^b	^34.0
Female Medical Ward	197.0 ^{ab}	32.5
Infectious Disease Control Centre	182.8 ^{ab}	36.5
Male Medical Ward	208.5 ^a	29.8
Outpatient Department	195.6 ^{ab}	34.2
Paediatrics	170.4 ^b	33.0
Grand mean	187.5	33.6
LSD ($P<0.05$)	33.11	8.45

*Means with the same letter in a column are not significantly different (LSD >0.05); ^Means without any letter in a column are not significant.

Total PWB score ranged from 170 (Paediatrics) to 208 (Male Medical Ward) and total attitude towards work varied from 29 (Male Medical Ward) to 36 (Infectious Disease Unit). It was noted that male medical scored average on attitude despite scoring highest for PWB (Table 6).

Table 7. Spearman Correlations coefficients between the nurses' psychological well-being and attitudes towards work

Nurse's Attitude	Nurses' Psychological Well-Being						
	Total Psychological	Autonomy	Environmental Mastery	Personal Growth	Positive Relations	Purpose In Life	Self-Acceptance
Total Attitude	*-0.12	-0.12	-0.09	-0.04	-0.10	-0.12	-0.16
	^0.45	0.44	0.60	0.82	0.52	0.44	0.33
Opportunities	0.14	0.05	0.21	0.21	0.12	0.15	-0.03
	0.38	0.75	0.20	0.19	0.46	0.34	0.85
Chance to Gain	-0.04	-0.05	-0.01	-0.02	-0.03	0.07	-0.17
	0.83	0.73	0.94	0.91	0.83	0.65	0.29
Tasks on Skills	0.09	0.03	0.16	0.17	0.02	0.12	-0.05

	0.57	0.84	0.32	0.29	0.89	0.47	0.74
Info on Hospital	-0.26	-0.19	-0.22	-0.23	-0.14	-0.22	-0.27
	0.10	0.24	0.16	0.15	0.37	0.16	0.09
Info Goals	-0.19	-0.18	-0.19	-0.28	-0.10	-0.19	-0.10
	0.23	0.26	0.25	0.08	0.55	0.24	0.51
Rewards	-0.11	-0.22	-0.13	0.08	0.05	-0.22	-0.19
	0.50	0.16	0.40	0.63	0.75	0.17	0.23
Continue Education	-0.13	0.02	-0.19	-0.07	-0.15	-0.12	-0.12
	0.41	0.90	0.24	0.65	0.35	0.45	0.44
Helpful Hints	-0.03	-0.12	-0.07	-0.06	0.02	0.03	-0.02
	0.86	0.47	0.64	0.73	0.88	0.85	0.89
Physician Recognition	0.29	0.21	0.34	0.26	0.13	0.13	0.28
	0.07	0.19	0.03	0.10	0.41	0.43	0.07
Career Development	0.16	0.15	0.17	0.11	0.10	0.12	0.01
	0.32	0.33	0.30	0.48	0.54	0.45	0.93

Spearman correlation coefficient. \hat{p} -value - if p -value < 0.05 then the relationship is significant. Sample size = 41 Generally, there were no significant relationships between attitudes and psychological well-being (Table 7). However, there was a significant ($P < 0.05$) relationship between environmental mastery (PWB-indicator) and nurses being recognized as helpful by the physicians (Table 7).

DISCUSSION

The study aimed to assess the psychological wellbeing of nurses and their attitude towards work. In terms of quantified analysis, the respondents displayed high (>170) levels of psychological well-being (Fig. 6), signifying minimal levels of work-related stress. Nurses working in the male medical ward (Table 6) displayed the highest total psychological score (208.50) perhaps indicating their ability to perform under pressure or that their ward was less stressful. Despite having the highest PWB scores, nurses in the male medical ward had the lowest total attitude score (Table 6). Female respondents had lower PWB and total attitude scores (Fig. 6 and Fig 7). Though the difference was not statistically significant, it was probably due to societal expectations that women carry a lot more responsibilities than men. Contrary to this, Platt-McDonald (2009) showed that women are better able to manage stress than men. Work units tended to influence PWB scores but not total attitudes (Table 6). Nurses in the pediatric unit and those in the Accidents and Emergency units had the lowest PWB scores (Table 6). The nature of work for nurses in these units are such that they are exposed to traumatic incidents which probably impact their wellbeing. However, their attitudes to work were moderate to good. The relationship between PWB and attitudes towards work in this study was generally very weak ($R^2 < 0.3$ and negative (Table 7). These psychological scores mirror Samarkandi's (2018) advice that knowledge is a factor that contributes to PWB. Other studies showed nurses had poor overall PWB due to lack of support and continued education on health promotions (Hussein et al, 2024).

Attitudes are a complex aspect of an individual's feelings and beliefs. Respondents to the study showed varied levels in attitudes towards work as depicted in the sampled summary (Table 7). In total attitude scores, nurses showed moderate to good levels. Attitude score range was <25 poor, 25-35 moderate and >35 good. Male nurses had a good total attitude score (Table 4), indicating their serene approach in patient care, foresight for opportunity for challenging work and great ability to gain new skills for their work. In comparison, the female nurses also had moderate to good attitudes as they searched for opportunities for challenging work and found helpful hints

on problem solving techniques. Hyeonmi et al. (2018) conveyed the importance of pursuing such factors to good work performance, as they help develop work resilience. Nurses working in male medical wards exhibited high psychological wellbeing yet attained average attitude scores towards work, signifying a sense that a high psychological wellbeing does not mean equal strong levels of attitudes to work. There were no other significant relationships in other dimensions among psychological well-being and attitudes towards work. Jang et al. (2019) echoed the statement it would be difficult to separate PWB and attitudes since the duo have a cause and resultant effect. Using the theoretical model, nurses' PWB is not detached from their actions

The findings indicated the respondents to the study had on overall, high levels of psychological well-being, and high attitude levels towards work.

CONCLUSIONS

The forty-one nurses in the study had varied gender, qualifications, experiences and civil status. Their differences in age and years of service also reflected the levels of expertise in the field. Based on the findings of the study, the following conclusions were drawn:

1. Nurses psychological wellbeing scores were high (>190)
2. Nurses in the study had moderate to good attitudes towards work (>35)
3. Correlation between PWB and attitude was very weak and negative (LSD 0.05)

These findings highlight the importance of assessing nurses' psychological welfare and how it aligns with their attitude to work. As well, by focusing on nurses from the Botswana context, the study augments first-hand data from a cultural perspective, thereby contributing to previous research from other continents and will serve as a reference point for future research on the psychological wellbeing of nurses and their attitude towards work.

RECOMMENDATIONS

The study makes the following recommendations:

1. Though respondents to this study attained high levels of PWB, their attitudes towards work were moderate, therefore, nurses should pursue higher education in order to improve their confidence on their outlook on life's challenges and strengthen their attitude towards work
2. Work units should run internal workshops or trainings focused on nurses PWB to boost aspects of autonomy, environmental mastery and personal growth, areas that were lagging behind by respondents to this study
3. Further research on the benefits of nurses psychological wellbeing and attitudes towards work can be considered

ACKNOWLEDGMENTS

I am grateful to my adviser, Dr. Dorothea C. Dela Cruz, for the advice and continued support towards this project. I further extend my appreciation to Dr. Bernardino Ofalio, Dr. Sonia Janice Pilao, and Dr. Teresita I. Barcelo for helping me put the pieces together. Through the process, I have gained knowledge on carrying out scientific research, and I appreciate the personal and professional guidance I have received. I would also like to share my heartfelt gratitude to Atty. Eduard M. Riparip for being my language editor and making my work so presentable.

I am most grateful to my family who are my real and ideal role models. Their support and encouragement through my sleepless nights have given me the strength to undertake this project. To my wonderful husband, Dr. Moagi Letso, I salute you. You are my fountain of knowledge. To my wonderful sons, Webster Moagi, David Moagisi and Sean Mphatso, you have stood by me and took over my duties when I could not attend to them. May God

richly bless you for these things you have done. As you have done for me, may the Lord also do for you, much more.

Chisomo Shupiwe Sanga Letso

REFERENCES

1. Adynski, G.I., Leeman, J., Adynski, H. (2021). Nurses' Attitudes Toward their Jobs in Outpatient HIV Facilities in Namibia: A Qualitative Descriptive Study https://www.researchgate.net/publication/356754644_Nurses'_Attitudes_Toward_their_Jobs_in_Outpatient_HIV_Facilities_in_Namibia_A_Qualitative_Descriptive_Study
2. GONZALO, A. (2020) Nola Pender: Health Promotion Model <https://nurseslabs.com/nola-pender-health-promotion-model/#:~:text=Pender's%20health%20promotion%20model%20defines,the%20environment%20to%20pursue%20health.>
3. Hassan, (2023) Purposive Sampling Methods, Types and Examples. <https://researchmethod.net/purposive-sampling/>
4. <https://www.sciencedirect.com/science/article/abs/pii/S0029655422000574>
5. Hussein, A.H.M, Hashish, E.A.A, Younes, B.M. (2024) The Relationship Between Nurses' Psychological Well-Being and Their Work Productivity Loss: A Descriptive Correlational Study. SAGE Open Nursing. <https://doi.org/10.1177/23779608241285400>
6. Hyeonmi Cho, A. S., Kihye, H. (2018). Associations Among Nursing Work Environment and Health-Promoting Behaviors of Nurses and Nursing Performance Quality: A Multilevel Modeling Approach <https://sigmapubs.onlinelibrary.wiley.com/doi/abs/10.1111/jnu.12390>
7. Jang, M. H., Gu, S. Y., & Jeong, Y. M. (2019). Role of Coping Styles in the Relationship Between Nurses' Work Stress and Well-Being Across Career. *Journal of nursing scholarship: an official publication of Sigma Theta Tau International Honor Society of Nursing*, 51(6), 699–707. <https://doi.org/10.1111/jnu.12523>
8. Maomogwe, P.L., (2019). Relationship Between occupational Stress, Resilience and Psychological Well-being among Prosecutors in Botswana https://repository.nwu.ac.za/bitstream/handle/10394/36982/Moamogwe_PL.pdf?sequence=1
9. Curhan, K. B., Levine, C. S., Markus, H. R., Kitayama, S., Park, J., Karasawa, M., Ryff, C. D. (2014). Subjective and objective hierarchies and their relations to psychological well-being: A U.S./Japan Comparison. *Social Psychological and Personality Science*, 5(8), 855–864. <https://spsrtools.org/mobility-measure/psychological-wellbeing-scale/>
10. Rekiesso, A.D., Mengistu, Z. & Wurjine, T.H. (2021). Nurses' attitudes towards the nursing profession and associated factors in selected public hospitals, Addis Ababa, Ethiopia, 2021: a cross-sectional study. *BMC Nurs* 21, 21 (2022). <https://doi.org/10.1186/s12912-022-00808-2>
11. Samarkandi O. A. (2018). Knowledge and attitudes of nurses toward pain management. *Saudi journal of anaesthesia*, 12(2), 220–226. https://doi.org/10.4103/sja.SJA_587_17