Research Article

The relationship between happiness and demographic characteristics in hospitals' staff in Abadan

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ABSTRACT

Introduction: Happiness as one of the fundamental positive feelings has a determining role in individual's and society's health. The present study was conducted with the aim of determining the relationship between happiness and demographic characteristics in hospitals' staff in Abadan.

Method: This descriptive cross-sectional study was conducted in 2015 on 233 staff of Taleghani and Imam Khomeini hospitals using census method. For data collecting a questionnaire of demographic characteristics and the Oxford Happiness Inventory were used. The data analysis was done using descriptive statistical methods and chi-square by the software SPSS version 21.

Discussion: The results of the study indicated that 60.6 % and 1.8 % of the participants reported high and low levels of happiness respectively. There was a significant relationship between happiness and satisfaction with family life (p=0.006), happiness and health level (p=0.000) and happiness and economic status (p=0.04). No significant relationship of happiness with age, sex, marital status, education level, job satisfaction, organizational position, workplace and type of residence was found.

Conclusion: Most of the participants had a favorable level of happiness. Therefore, the emphasis of happiness-related elements is recommended for the improvement of the happiness level in other staff.

Keywords: happiness, demographic characteristics, hospitals' staff

INTRODUCTION

Among positive concepts, happiness is a concept with a special importance for health and is considered as a complete and stable satisfaction with life and it is considered as a whole (1). The need for hope and happiness in different stages of life in humans keep alive the feeling of perfectionism in them. Happiness as one of the fundamental feelings has a positive role in the fulfillment of health in the individual and ultimately in the society in a way that it leads to satisfaction, optimism, hope and trust (2). The word "happiness" that has been sometimes lexically considered as e contentment is judgments that the individuals have about their condition. These judgments are in relation to the individuals' stable mood (pleasure) and their assessment of themselves (for example, satisfaction with physical, mental and performance-related health aspects) and in relation with the physical, mental and social environment (such as satisfaction with life and job). Therefore, happiness is consisted of emotional and cognitive aspects (3).

The average levels of happiness are different in different regions and countries (4). According to

the latest ranking, the happiness level is highest in Denmark, Switzerland, Iceland, Norway and Finland respectively and lowest in Burundi, Syria, Togo, Afghanistan and Benin respectively. Iran is ranked 105th among 157 countries (5). The association of factors such as age, education level, income, employment status, religion, and sex with happiness has been shown in some studies (6). However, the Easterlin paradox suggests that economic growth inside a country does not lead to the increase of happiness (7). This means that happiness is related to income level and social class to some extent. The World Health Organization (WHO) considers happiness to be a health component (3). According to Mir Ahmadi et. al. (2012), Eysenck suggests that happiness is a combination of positive emotion, satisfaction with life and the lack of negative emotions such as depression and anxiety. Happy individuals think positively and obtain a high score in happiness criteria, life is valuable in their view and in contrast, the individuals with a low happiness score are pessimist, sad and hopeless. The feeling of joy, satisfaction with life and, overall, a better life quality is seen more in happy individuals (8). Fear, feeling of hostility and shyness are associated with reduced happiness while traits such as being social and energetic are associated with a higher level of happiness. And emotional stability and extraversion predict happiness. Happiness is one of the six major emotions; the other five are surprise, fear, disgust, anger and sadness (9).

Scott asserts that "being happy at the workplace is a basic element in satisfaction with life". Happiness in the workplace and satisfaction with workforce are among the factors involved in organizational success and consumer satisfaction. The reason for this is that creativity is more significant in happy individuals, these individuals waste time less often in the day, stay more in the workplace, gain their value among staff and are more successful in work competition (10). In a study conducted by Rajabi Gilan et. al. in hospital's staff in the city of Kermanshah, the results indicated that the happiness mean score

was highest in the physicians and lowest in midwives (11). Considering the importance of happiness in social life and work and considering the significant duty of hospitals' staff and public organizations, especially hospitals' staff, in providing services, their complex role in the fulfillment of individuals' health and welfare in the society and their relationship with different groups of people in the society, the present study was conducted with the aim of determining the relationship between demographic characteristics happiness in hospitals' staff in Abadan (2015) , so that effective steps are taken in decision-makings for improvement of happiness in the hospitals' staff by providing the authorities with the results.

METHODOLOGY

The method in this study is descriptive cross-sectional and the study has explored the relationship between happiness and demographic characteristics in hospitals' staff in Abadan in 2015. The population of this study consists of all staff (doctors, nurses, nurse aides, practical nurses and midwives) in the Taleghani Hospital (affiliated to Abadan School of Medical Sciences) and Imam Khomeini Hospital (affiliatied to Abadan Oil Industries) which were 223 individuals that were selected using census method. The inclusion criterion was the lack of serious physical or mental problem and the exclusion criterion was the failure to complete the questionnaire.

The following questionnaires were used for data collection:

1. **Demographic Characteristics Questionnaire:** This questionnaire measured 11 characteristics regarding age, sex, marital status, education level, workplace, organizational position, job satisfaction, satisfaction with family life, economic status, health perception and housing status.

2. **Oxford Happiness Inventory(OHI):** Amiri Majd and Zari Moghada point out that Argyle and Lu have asserted that this questionnaire has 29 items and each item has 4 options in Likert style with a score of 0 to 3; the option

never gets score 0, rarely gets score 1, sometimes gets score 2 and always results in score 3. The maximum score for the test is 87. A higher score indicates a higher level of happiness. The categorization of scores is as follows: the scores lower than 22(low level of happiness), scores between 22 and 44 (average level of happiness, scores between 44 and 68 (high level of happiness and scores between 68 and 87 (very high level of happiness). Argyle and Lu explored the reliability of this questionnaire, using Cronbach's alpha, on 347 subjects and they obtained a Cronbach's alpha of 0.90 (12). Also, Alipour and Agah (2007) explored the reliability and validity of this questionnaire and they obtained Cronbach's alpha of 0.91 (13). Alipour and Noorbala (1999) gave the questionnaire to experts (psychologists and psychiatrists) in order to explore the face validity and all of the experts verified the Oxford Happiness Inventory's ability to measure happiness. In addition, factor analysis was used for exploring factorial validity and it was able to explain 57 percent of the overall variance and the Cronbach's alpha

for each factor i.e. satisfaction, positive mood, health, efficacy, self-esteem was 0.89. 0.84, 0.68, 0.51 respectively (14).

The questionnaires were given to the staff for completion, after obtaining their written consent, assuring them of the information confidentiality and giving them explanations about the study process.

The data were analyzed in SPSS software version 21 using descriptive statistics (mean, standard deviation and absolute and relative frequencies) and Chi-square test.

RESULTS

223 participants completed the questionnaires. The participants' mean age were 36.12±8.4 years. Most of the participants (38.2%) were in the 31-40 years-old range. 89.47% of the staff in this age range reported high and very high levels of happiness. Chi-square was used for exploring the relationship between age and happiness. The results indicated that there was no relationship between these two variables. The demographic characteristics of the participants are presented in table 1.

Table 1. Absolute and relative frequencies of demographic characteristics of hospitals' staff

variable		Number (percentage)
Sex	female	178(79.8)
	male	45(20.2)
Marital status	single	74(33.2)
	married	149(66.8)
Education level	Associate degree and lower	35(15.8)
	Bachelor's degree	149(66.8)
	Master's degree	7(3.1)
	doctor	32(14.3)
Organizational position	doctor	33(14.8)
	nurse	154(69.1)
	practical nurse	20(9)
	nurse aide	7(3.1)
	midwife	9(4)
Economic status	Weak	12(5.4)
	average	119(53.4)
	good	83(37.2)
	excellent	9(4)
Type of residence	Personal	88(39.5)
	Rented	37(16.6)
	Organizational	53(23.7)
	With spouse's family	45(20.2)
Total		223(100)

1.8 percent of the participants reported low level, 15.8 percent reported average level, 60.6 percent reported high level and 21.7 percent reported a very high level of happiness. In exploring the relationship of sex, marital status, education level and type of residence with happiness, chi-square indicated that there was no relationship between the aforementioned variables and happiness while a significant relationship between economic status and happiness ($p=0.04$). Distribution of relative and absolute frequencies of hospitals' staff in Abadan based on the level of happiness and some demographic characteristics in 2015 is presented in table 2.

Table 2. Absolute and relative frequencies of hospitals' staff based on the level of happiness and some demographic characteristics

Happiness level / Variable		Low < 22	Average (22-44)	High (44-68)	Very high (68-87)	P
sex	female	5(2/80)	30(16/85)	107(60/11)	36(20/22)	P=0/78
	male	1(2/22)	5(11/11)	27(60)	12(26/66)	
Marital status	single	1(1/49)	14(16/41)	37(55/22)	15(22/38)	
	married	3(2/02)	21(14/18)	94(63/5)	30(20/27)	
	divorced	0	0	2(50)	2(50)	
	Widow(er)	0	0	1(50)	1(50)	P=0/79
Education level	Associate degree and lower	2(5/71)	5 (14/29)	18(51/43)	10(28/57)	
	Bachelor's degree	3(2/01)	24(16/1)	95(63/75)	27(18/12)	
	Master's degree	0	2(28/57)0	3(42/85)	2(28/57)	
	doctor	1(3/12)	4(12/5)	18(56/25)	9(8/12)	
Economic status	weak	0	3(25)	7(58/33)	2(16/66)	
	average	5(4/20)	23(19/32)	73(61/34)	18(15/12)	P=0/04
	good	0	8(9/75)	51(62/19)	23(28/04)	
	excellent	0	1(11/11)	3(33/33)	5(55/55)	
Type of residence	Personal	2(2/27)	9(10/22)	63(71/59)	14(15/9)	
	Rented	1(2/70)	6(16/21)	19(51/35)	11(29/72)	P=0/24
	Organization	0	10(18/87)	32(60/38)	11(20/75)	
	With the spouse's family	2(4/44)	9(20)	21(46/67)	13(28/89)	

In answering "are you satisfied with your family life?", 93.3 percent of the employees answered positively and in answering "are you satisfied with your job", 70.4 percent of the individuals answered positively. In answering the question "how do you assess your health level?", 69.5% of the employees assessed their health status to be good, very good and excellent. Distribution of relative and absolute frequencies of hospitals' staff in Abadan based on the level of happiness and some satisfaction variables in 2015 is presented in table 3.

Table 3. Absolute and relative frequencies of hospitals' staff based on the level of happiness and some satisfaction variables

Happiness level / variable		Low < 22	Average (22-44)	High (44-68)	Very high (68-87)	P
Satisfaction with life	yes	3(1/44)	29(14)	127(61/35)	48(23/19)	p=0.006
	no	2(12/5)	7(43/75)	7(43/75)	0	
Health level	weak	3(23/07)	5(38/46)	5(38/46)	0	
	average	3(5/35)	13(23/21)	32(57/14)	8(14/28)	
	good	0	14(14/58)	65(67/7)	17(17/7)	p=0.000
	Very good	0	3(6/52)	24(52/17)	19(41/30)	
	excellent	0	0	8(66/66)	4(33/33)	
Satisfaction with job	yes	1(0/64)	22(14/1)	95(60/90)	38(24/35)	p=0.29
	no	3(4/47)	13(19/40)	40(59/70)	11(16/41)	

Among the employees, the highest percentage of high and very high levels of happiness was reported by the midwives (88.88%) and the lowest percentage (75%) was reported by practical nuress. Chi-square was used for determining the association between organizational position and happiness. The result indicated that there was no significant association between them.

DISCUSSION AND CONCLUSION

The present study explored the relationship of happiness with demographic characteristics of the hospitals' staff in Abadan. The results indicated that there was a significant relationship between happiness and economic status; this means that the happiness was increased with the improvement of economic status. The findings of this study are consistent with the results of the studies by Lipovkan and Larsen (2016), Ramirez de Arellano (2014) and Key and Park (2014), but not consistent with the results of the study by Keshavarz (2008) conducted in the city of Isfahan (15-18). This may be due to the difference in the populations. Keshahvarz (2008) explored 100 individuals in the city of Isfahan and the individuals are socially and culturally completely different with the population of the present study (18). In this regard, Amiri Majd and Zari Moghadam (2010) quote Argil (2001) saying: "there is a positive association between happiness and income and this association is stronger among low-income groups. This means that income impacts happiness as much as it meets individuals'' needs and an amount of money beyond one's needs does not increase happiness" (12). Islam (2009) suggests that income is an important factor in predicting happiness but this may act through general lifestyle mechanisms such as the way the individual perceives his/her place in the society or the way he/she reflects the subjective consumption patterns of lifestyle (19).

The results of the present study also indicated that there was a positive significant relationship between happiness and satisfaction with life. This means that happiness is increased with the increase of life satisfaction. This finding is consistent with the finding by Amiri Majd and Zari Moghadam (2010) (12) that was conducted in the city of Arak. The significant relationship between happiness and life satisfaction may be

mostly due to having positive feelings that are seen in happy individuals.

The results also indicated that there was a positive and significant relationship between happiness and health level which is consistent with the findings of the study by Ramirez (2014) (16). Happiness is one of the factors that has been discussed in psychology for a while and the studies conducted in this regard indicate that happiness has a direct relationship with improved immune system in the body. The reason that individuals have to be happy is that there is a relatively strong relationship between happiness level and health. A low level of happiness and the lack of health are related as unhealthy individuals often have a limited and painful life and this negative characteristic results in the lack of unhappiness. In addition, unhappiness and stress can have negative impacts on individuals' health. Those who are under stress, compared with other individuals, are more susceptible to physical and mental diseases (20).

No significant relationship was found between happiness and job satisfaction and it is recommended that this result should be viewed cautiously as some studies have shown a relationship between happiness and job satisfaction including the study by Stauf et al. (2016) whose results are not consistent with those of the present study in this regard. In the aforementioned study which was conducted with the aim of analyzing the possible impact of job satisfaction and physical and mental health, happiness and self-esteem, 971 adults were studied and the results indicated the existence of a supportive impact of job satisfaction on health, happiness, mental wellbeing and self-esteem (21). The results of some studies indicate that job satisfaction is associated with overall happiness, mental health and hope for longevity and it is a factor that impacts mental health. Therefore, one

of the main managers' duties in organizations is paving the way for job satisfaction (22). Therefore, the lack of a significant relationship between happiness and job satisfaction in the present study may be due to the fact that the employees of the health sector are working in jobs that involve complex and heavy duties on one hand and the continuous and daily presence in the workplace has created a kind of repetition and tiredness in the employees on the other hand. Therefore, job satisfaction in this group of individuals cannot alone lead to happiness of the lack of it.

A significant relationship was not found between happiness and sex either which is consistent with the results of the study by Safari (2009) who explored happiness among students at Eslamshahr Branch of Islamic Azad University(23). However, the results in this regard are not consistent with those of the studies by Naghibakht et al(2015) and Yousefi et al (2015) (24-25), which may be due to the small sample size in the present study and the difference in the populations of the two studies. As the depression rate is higher in women, compared with men with the same level of happiness, happiness is expected to be lower in women than men.

No significant relationship of age, marital status and education level with happiness was found in this study which is consistent with the result of the study by Keshavarz et al (2008) that explored the relationship between vitality and demographic variables with happiness in people in the city of Isfahan (18). Mehrdadi et al. too did not find a significant relationship of happiness with marital status and education level (26).

A significant relationship was found between life satisfaction and happiness and this result is consistent with the result of the study by Neshat Doost et al (2009). In their study, these researchers indicated that staff' happiness was significantly associated with life satisfaction, optimism, satisfaction with family, spouse's happiness, exercise and job satisfaction (27).

Among participants, the highest percentage of high and very high levels of happiness was reported by the midwives and the lowest percentage was reported by practical nurses. In the study by Rajabi Gilan et al (2013) the doctors obtained the highest score and the midwives obtained the lowest score for happiness (11). As midwives create happiness for family with childbirth, they are expected to have a higher level of happiness.

Overall, most of hospitals' staff in Abadan had a favorable level of happiness. Therefore, in order to improve the happiness level in other staff, the emphasis on happiness-related factors such as paying attention to health by making obligatory the periodic examinations, effort for scientific development of health education as an empowering approach for staff and improvement of economic conditions, especially in practical nurses that who lowest level of happiness, is recommended. The diversity of the employees participating in this study was one of the strengths of the present study. The present study had also some limitations including the physical, mental and social conditions of the staff during the completion of the questionnaires that can impact the responding and probably the results of the study and also the lack of correct answer to the questions that were beyond the researcher's control. In addition, the data collected in this study were collected from the hospitals in Abadan and therefore they have a limited generalizability. Therefore, it is recommended that more studies be conducted in other cities in Iran. In addition, it is recommended that the level of happiness and the factors impacting it be explored in other professions and compared with the results of the present study.

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