

Nurses' mental well-being levels and their influencing factors

Cansu Atmaca Palazoğlu^{a 1}, Tokat Gaziosmanpasa University, Erbaa Vocational School of Health Services, Tokat 60500, Turkey. 

Zeliha Koç, Ondokuz Mayıs University, Samsun 55200, Turkey.

Suggested Citation:

Palazoğlu, C. A. & Koç, Z. (2023). Nurses' mental well-being levels and their influencing factors. *New Trends and Issues Proceedings on Humanities and Social Sciences*. 10(2), 42-50.
<https://doi.org/10.18844/prosoc.v10i2.9099>

Received from July 22, 2023; revised from August 06, 2023; accepted from September 05, 2023.

Selection and peer review under the responsibility of Prof. Dr. Nilgun Sarp, International Final University, Faculty of Health Sciences, North Cyprus

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Abstract

This research was carried out as a descriptive study to determine the mental well-being levels of nurses and the factors affecting them. The research was carried out between 01/04/2023-07/04/2023 with the participation of 190 nurses working in a university hospital. The data were collected by using a 22-question information form, prepared by the researcher in line with the literature, which determines the sociodemographic and working life characteristics of the nurses, and the Warwick-Edinburgh Mental Well-Being Scale. Frequency, percentage, mean, standard deviation, median (min-max), Kruskal Wallis test, Mann Whitney U test, One-Way Analysis of Variance, and Independent Sample t-test were used for data analysis. In line with the findings obtained from this study, the mental well-being levels of nurses were determined at a moderate level. It is recommended that mental well-being-based interventions should be planned to support nurses mentally, as it will contribute to the development of their professional skills and their daily lives.

Keywords: Mental well-being; nurse; psychological well-being; well-being.

* ADDRESS FOR CORRESPONDENCE: Cansu Atmaca Palazoğlu, Lecturer, Tokat Gaziosmanpasa University, Erbaa Vocational School of Health Services, Tokat 60500, Türkiye.
E-mail address: cansuatmaca029@windowslive.com

1. Introduction

Mental health is as important as physical health and is an integral component of general health [1,2]. The World Health Organization defines mental health as "a state of well-being in which the individual is aware of his/her abilities, can cope with the normal tensions of life, can work productively and efficiently, and can contribute to the society in which he/she lives" [3]. Accordingly, mental well-being is not only the absence of a psychological illness but also the ability of the individual to be functional. Therefore, it is reported that an individual who is not mentally well cannot be considered healthy [4].

It is stated that individuals with high levels of mental well-being (psychological well-being) have good mental and physical health, can establish healthy interpersonal relationships, work more efficiently in work environments, can improve themselves, have stronger immune systems, live longer, and have a higher quality of life [4-7].

Nurses may face many physical, environmental, chemical, biological, and psychosocial risk factors during health care delivery [8-10]. Nursing is an emotionally affecting profession and nurses may experience intense stress in the work environment [11-13]. This situation can negatively affect nurses' mental well-being, productivity, and care practices. It is reported that the mental well-being of nurses who provide services to individuals, families, and society affects their potential and functionality [14-16].

1.1. Purpose of the study

Within the scope of this study, the mental well-being levels of nurses and the factors affecting them will be determined and appropriate strategies and recommendations will be developed in line with the findings obtained. In this study conducted to determine the mental well-being levels of nurses and the factors affecting them, answers to the following questions were sought.

- What are the socio-demographic and working-life characteristics of nurses?
- What is the level of mental well-being of nurses?
- Do the mental well-being levels of nurses differ according to their socio-demographic and working-life characteristics?

2. Material and methods

This study planned as descriptive one was conducted at a university hospital between 01/04/2023-07/04/2023.

2.1. Participants

The population of the study consisted of 406 nurses. The sample size was calculated as at least 163 nurses with a 90% confidence limit and 5% error. The data collection process was completed with 190 nurses who agreed to participate in the study.

2.2. Data collection tools

In this study, data were collected using the "Nurses' Introductory Information Form" and the "Warwick-Edinburgh Mental Well-Being Scale". The nurses' descriptive information form consists of 22 questions determining the socio-demographic and working-life characteristics of nurses. The questionnaire form was pre-tested in a group of 10 nurses and the nurses who participated in the pilot study were not included in the sample. Ethics committee permission was obtained before starting the study. After the nurses participating in the study were informed about the study and their informed consent was obtained, the data were collected by the researchers through face-to-face interviews.

2.3.1. Warwick-Edinburgh Mental Well-Being Scale (Warwick-Edinburgh Mental İyi Oluş Ölçeği)

Warwick-Edinburgh Mental Well-Being Scale is a scale developed by Tennant et al. [17] and adapted into Turkish by Keldal [4]. The scale covers psychological well-being and subjective well-being and deals with the positive mental health of individuals. This five-point Likert-type scale consists of 14

items. A minimum score of 14 and a maximum score of 70 can be obtained from the scale. High scores on the scale indicate high mental (psychological) well-being. Scale items are scored as "1=strongly disagree, 2=disagree, 3=somewhat agree, 4=agree, 5=strongly agree". All items on the scale consist of positive statements. The Cronbach's Alpha reliability coefficient of the scale was found to be 0.89. In this study, the Cronbach's Alpha reliability coefficient of the Warwick-Edinburgh Mental Well-Being Scale was 0.87.

2.3. Data collection and ethics

It was explained to the nurses that the decision about whether to participate in the study was entirely up to them and that the data to be collected from this study would only be used within the scope of the research. Informed consent was obtained from the nurses included in the study with the permission of the institution and ethics committee to collect the data. The data collection period took approximately 15-20 minutes.

2.4. Data analysis

The data obtained in this study were analyzed using the IBM SPSS 25 package program. The normality test of quantitative data was examined with Shapiro-Wilk and Kolmogorov Smirnov. Kruskal Wallis test, Mann Whitney U test, One-Way Analysis of Variance, and Independent Sample t-test were used to analyze the data. The reliability of the scale used was analyzed with Cronbach Alpha. Quantitative data were presented as median (minimum-maximum) and qualitative data were presented as frequency (percentage). The significance level was taken as $p < 0.05$.

3. Results

Of the nurses participating in the study, 71.6% were female, 28.4% were male, 67.9% were married, 69.5% had a bachelor's degree, 91.6% had a nuclear family structure, 88.4% worked as ward nurses, 72.1% worked in shifts, 68.4% willingly chose the service where they worked, 51.6% were satisfied with the service where they worked, 61.1% willingly chose the nursing profession, 58.9% loved their job, 74.7% did not smoke and 89.5% did not drink alcohol, 87.4% did not have a physical illness and 94.2% did not have a mental illness. The mean age of the nurses was 33.6 ± 7 years, the mean number of years of employment was 11.5 ± 6.9 , the mean number of working hours per week was 48 ± 10 , the mean number of patients cared for per day was 15 ± 24 , and the mean number of total nurses working in the ward was 14.9 ± 11 (Table I).

TABLE I
DISTRIBUTION OF SOCIO-DEMOGRAPHIC CHARACTERISTICS OF NURSES (N=190).

Features	n	%
Age groups (33.6 ± 7.0)	20-29 years old	61 32.1
	30-39 years old	93 48.9
	40 years and older	36 18.9
Gender	Female	136 71.6
	Male	54 28.4
Marital status	Married	129 67.9
	Single	61 32.1
Education status	Health Vocational High School	4 2.1
	Associate Degree	25 13.2
	Bachelor's degree	132 69.5
	Master's degree	21 11.1
Family type	PhD degree	8 4.2
	Extended family	16 8.4
Income status	Nuclear family	174 91.6
	Income less than expenditure	26 13.7
	Income equal to expenditure	120 63.2

	Income more than expenditure	44	23.2
Role in the service	Service nurse	168	88.4
	Nurse in charge	22	11.6
Mode of operation	Continuous daytime	53	27.9
	Shift	137	72.1
Year of operation (11.5 ± 6.9)	1-5 years	39	20.5
	6-10 years	60	31.6
	11-15 years	56	29.5
	16 years and above	35	18.4
Status of willingly choosing the service they work in	Yes	130	68.4
	No	60	31.6
Satisfaction with the service they work in	Satisfied	98	51.6
	Partially satisfied	78	41.1
	Not satisfied	14	7.4
Status of choosing the profession voluntarily	Yes	116	61.1
	No	74	38.9
Liking the profession	Likes	112	58.9
	Dislikes	26	13.7
	Indecisive	52	27.4
Smoking status	Yes	36	18.9
	No	142	74.7
	Sometimes	12	6.3
Alcohol use status	Yes	7	3.7
	No.	170	89.5
	Sometimes	13	6.8
Doing sports	Regular	13	6.8
	Sometimes	117	61.6
	Nothing	60	31.6
Having a physical illness	Yes	24	12.6
	No	166	87.4
Having mental illness	Yes	11	5.8
	No	179	94.2

In this study, the mean score of the nurses on the Warwick-Edinburgh Mental Well-Being Scale was 48.9 ± 7.6 and the median score was 49 (28 - 67) (Table II).

TABLE II
WARWICK-EDINBURGH MENTAL WELL-BEING SCALE TOTAL SCORE, MEAN, STANDARD DEVIATION, AND MEDIAN SCORE VALUES

	Mean ± SD	Median (Min-Max)
Warwick-Edinburgh Mental Well-Being Scale	48.9 ± 7.6	49 (28 - 67)

Min: Minimum. Max: Maximum. S.S: Standard Deviation

Socio-demographic and working life characteristics of the nurses and Warwick-Edinburgh Mental Well-Being Scale total score are compared in Table 3. In line with the findings obtained, the total score of the Warwick-Edinburgh Mental Well-Being Scale was compared with nurses' age ($p=0.003$), family type ($p<0.001$), income status ($p=0.001$), willingly choosing the service ($p=0.030$), satisfaction with the service ($p=0.003$), willingly choosing the profession ($p<0.001$), liking the profession ($p=0.009$) and doing sports ($p=0.009$) (Table 3).

It was determined that the total score of the Warwick-Edinburgh Mental Well-Being Scale of the nurses participating in the study did not differ according to gender, marital status, educational

status, position in the service, working style, working years, smoking and alcohol use status, and having physical and mental illness (Table III).

TABLE III
COMPARISON OF NURSES' SOCIO-DEMOGRAPHIC AND WORKING LIFE CHARACTERISTICS AND WARWICK-EDINBURGH MENTAL WELL-BEING SCALE TOTAL SCORE

Features		Median (Min- Max) Mean ± SD	Test değeri p
Age groups	20-29 years old	52 (31-61)AB	$\chi^2=11.488$ p=0.003
	30-39 years	47 (28-57)A	
	40 years and older	51 (36-67)B	
Gender	Female	49.4 ± 7.2	t=1.362
	Male	47.7 ± 8.5	p=0.175
Marital status	Married	50 (28-67)	U=3768.0
	Single	49 (31-64)	p=0.638
Education status	Health Vocational High School	52.5 (49-56)	$\chi^2=2.173$ p=0.704
	Associate Degree	51 (39-61)	
	License	49 (28-67)	
	Master's degree	50 (31-64)	
Family type	PhD degree	47 (33-51)	
	Extended family	42.2 ± 6.8	t=-3.797
Income status	Nuclear family	49.5 ± 7.4	p<0.001
	Income less than expenditure	42 (31-57)A	$\chi^2=14.447$ p=0.001
	Income equal to expenditure	49 (28-67)B	
Income more than expenditure	51 (35-61)B		
Role in the service	Service nurse	50 (31-67)	U=1544.0
	Nurse in charge	46 (28-64)	p=0.209
Mode of operation	Continuous daytime	49 (33-65)	U=3593.5
	Shift	50 (28-67)	p=0.913
Year of operation	1-5 years	49 (31-61)	$\chi^2=5.395$ p=0.145
	6-10 years	47 (28-61)	
	11-15 years	49.5 (35-57)	
	16 years and above	51 (36-67)	
Voluntary choice of the service they work in	Yes	49.7 ± 7.6	t=2.185
	No	47.1 ± 7.6	p=0.030
Satisfaction with the service they work in	Satisfied	51 (28-67)A	$\chi^2=11.372$ p=0.003
	Partially satisfied	46 (31-61)B	
	Not satisfied	47 (41-55)AB	
Status of choosing the profession voluntarily	Yes	50.7 ± 7.6	t=4.214
	No	46.1 ± 6.7	p<0.001
Liking the profession	Loves	50 (31-67)A	$\chi^2=9.504$ p=0.009
	Dislikes	45.5 (28-54)B	
	Indecisive	49 (31-57)AB	
Smoking status	Yes	47 (39-67)	$\chi^2=3.344$ p=0.188
	No	50 (31-65)	
	Sometimes	46 (28-57)	
Alcohol use status	Yes	46 (45-50)	$\chi^2=6.713$
	No	50 (28-67)	p=0.065

	Sometimes	46 (41-51)	
Doing sports	Regular	44.8 ± 8.9A	
	Sometimes	50.1 ± 7.4B	F=4.792 p=0.009
	Nothing.	47.4 ± 7.4AB	
Having a physical illness	Yes	51 (35-57)	U=1815.5
	No	49 (28-67)	p=0.483
Having mental illness	Yes	41 (35-61)	U=666.0
	No	50 (28-67)	p=0.072

χ^2 : Kruskal Wallis Test Statistic, U: Mann-Whitney U Test Statistic, F: One Way ANOVA Test Statistic, t: Student t Test Statistic, A-B: No difference between groups with the same letter.

4. Discussion

The findings of this study, which was conducted to determine the mental well-being levels of nurses working in a university hospital located in the Central Black Sea Region in northern Türkiye and the factors affecting them, were discussed in line with the relevant literature.

In this study, it was determined that the total score of the Warwick-Edinburgh Mental Well-Being Scale of nurses differed according to the age of the nurses, and the mental well-being levels of nurses aged 20-29 years were higher. Supporting the findings of the study, Oates et al. [18] also found that the mental well-being levels of nurses between the ages of 20-29 were high. As individuals get older, their perceptions about themselves and their environment may change. It is thought that this may be affected by the fact that young individuals have high ideals about the future, while middle-aged and older individuals have decreased goals for the future due to their past-oriented lives [19,20].

In line with the findings obtained from this study, it was determined that the total score of the Warwick-Edinburgh Mental Well-Being Scale of nurses differed according to the family type and income status of the nurses and that the mental well-being levels of nurses with a nuclear family structure and whose income was higher than their expenses were higher. Consistent with the findings of the study, Şensoy et al. [21] and Liu et al., [22] reported that nurses who defined their income levels as adequate had higher levels of mental well-being. It is thought that high economic income can increase the individual's life satisfaction and satisfaction and well-being, increase purchasing power, and this may positively affect the mental well-being of individuals [19].

In this study, it was determined that the total score of the Warwick-Edinburgh Mental Well-Being Scale of the nurses differed according to the nurses' willingly choosing their profession, liking their profession, willingly choosing the service where they work, and being satisfied with the service where they work; the mental well-being levels of the nurses who willingly chose their profession liked their profession, willingly chose the service where they worked, and were satisfied with the service where they worked were higher. Supporting the findings of the study, Aksu [14] found that the mental well-being levels of nurses who chose their profession willingly were higher. In the literature on this subject, it is reported that individuals who love their profession and work willingly have high levels of mental well-being; they work more peacefully in the work environment, their work performance is high, they feel better, their self-confidence is high and they establish good relationships with their colleagues [23].

It was determined that the total score of the Warwick-Edinburgh Mental Well-Being Scale of the nurses participating in the study did not show statistically significant differences according to gender, marital status, educational status, position in the service, working style, working year, smoking and alcohol use status, and having physical and mental illness. In some studies that support the findings of the research, mental (psychological) well-being levels of nurses and gender [14, 18,21,24,25], marital status [14,15,21,24,26], educational status [15,26,27], type of work [18], years of work [14,15,24,25], and having physical illness [14].

When the literature on this subject is examined, it is seen that there are significant differences between the mental (psychological) well-being levels of nurses and gender [15,26,27], marital status [27], educational status [14], position in the service [15,26], working style [15,26], working year [21], smoking and/or alcohol use [25], as well as studies reporting that there is no statistically significant difference between nurses' age [14,15,24,26], income status [26], and like their profession [14] and mental well-being levels.

5. Conclusion

Although the factors affecting the mental well-being levels of nurses differ according to the studies, this may be due to differences in the personality and working environment characteristics of nurses and their ability to cope with the problems they face. As a result, it is thought that it is extremely important to develop strategies to increase the mental well-being levels of nurses to increase the quality of nursing care and improve patient care outcomes.

In this study, it was determined that the mental well-being levels of nurses were high. In line with the findings obtained from this study, it is recommended that the mental well-being levels of nurses should be evaluated periodically, nurses working in units with a high workload in the hospital should be supported more in terms of bio-psycho-psycho-social aspects, psychological guidance, and counseling services should be provided, and the working conditions and environment of nurses should be improved.

References

- [1] W.H.O. (2004). Date of Access: 13.06.2023. <https://apps.who.int/iris/bitstream/handle/10665/42940/9241591595.pdf>.
- [2] WHO (2022). Date of Access: 13.06.2023. <https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response>.
- [3] W.H.O. (2001). Date of Access: 13.06.2023. <https://apps.who.int/iris/handle/10665/42390>
- [4] G. Keldal, "Warwick-Edinburgh Mental İyi Oluş Ölçeği'nin Türkçe Formu: Geçerlik ve güvenilirlik çalışması," *The Journal of Happiness & Well-Being*, vol. 3, no. 1, pp. 103-115, 2015. <https://tr-scales.arabpsychology.com/wp-content/uploads/pdf/warwick-edinburgh-mental-iyi-olus-olgei-toad.pdf>
- [5] H. N. Keleş, "Anlamlı iş ile psikolojik iyi oluş ilişkisi," *The Journal of Happiness & Well-Being*. Vol. 5, no. 1, pp. 154-167, 2017. https://www.researchgate.net/profile/Hatice-Keles-2/publication/341271043_Anlamli_is_ile_psikolojik_ iyi_olus_iliskisi/links/5eb6c3694585152169c11f3d/Anlamli-is-ile-psikolojik-iyi-olus-iliskisi.pdf
- [6] C. L. M. Keyes, S. S. Dhingra, & E. J. Simoes, "Change in level of positive mental health as a predictor of future risk of mental illness," *American Journal of Public Health*. Vol. 100, pp. 2366-2371, 2010. doi: <https://doi.org/10.2105/AJPH.2010.192245>.
- [7] E. Diener, S. Oishi, & L. Tay, "Advances in subjective well-being research," *Nat Hum Behav*, vol. 2, pp. 253-260, 2018. doi:<https://doi.org/10.1038/s41562-018-0307-6>.
- [8] Z. Orhan, A. Kayış, M. Sönmez, Ş. İnal, E. Kaya, & M. Aral, "Hemşirelerin mesleki riskleri ve hastane enfeksiyonları ile ilgili bilgi düzeyleri ve uygulamaları," *Türkiye Sağlık Bilimleri ve Araştırmaları Dergisi*, vol. 4, no. 1, pp. 18-30. 2021. <https://dergipark.org.tr/en/pub/tusbad/issue/61834/819684>
- [9] E. Yılmaz, & S. Özkan, "Bir ilçede çalışan hemşirelerin sağlık sorunları ve yaşam alışkanlıklarının değerlendirilmesi," *Fırat Sağlık Hizmetleri Dergisi*, vol. 1, no. 3, pp. 81-99, 2006.
- [10] J. D. V Holtzhausen, S. K. Coetzee, & S. M. Ellis, "Influence of the practice environment on community service nurses' subjective well-being, compassion practice, and psychological capital," *International Journal of Africa Nursing Sciences*, vol. 13, p. 100243, 2020. <https://www.sciencedirect.com/science/article/pii/S2214139120301207>

- [11]F Nadeem, A Sadiq, A Raziq, Q Iqbal, S Haider, F Saleem, M. Bashaar, "Depression, Anxiety, and Stress Among Nurses During the COVID-19 Wave III: Results of a Cross-Sectional Assessment," *J Multidiscip Healthc*, vol. 14, pp. 3093-3101, 2021. <https://doi.org/10.2147/JMDH.S338104>
- [12]D. A. N Xin, Y. Huang, R. E. N. Jian-Hua, T. I. A. N. Ya-Lin, & H. E. Ya-Lin, "Professional Nursing Practice Environment and Work Engagement: The Mediating Roles of Self-Efficacy and Achievement Motivation," *Journal of Nursing Research*, vol. 31, no. 4, p. e285, 2023. https://journals.lww.com/jnr-twna/fulltext/2023/08000/professional_nursing_practice_environment_and_work.6.aspx
- [13]C. A. Villagran, G. D. L. Dalmolin, E. L. D. Barlem, P. B. T. Greco, T. C. Lanes, & R. Andolhe, "Association between Moral Distress and Burnout Syndrome in university-hospital nurses," *Revista Latino-Americana de Enfermagem*, vol. 31, 2023. <https://www.scielo.br/j/rlae/a/MckTp4VVTYx4YKCKdtFTH7k/>
- [14]B. Aksu, "Hemşirelerin örgütsel stres düzeyi ve psikolojik iyi oluşlarının belirlenmesi," İstanbul Okan Üniversitesi, Sağlık Bilimleri Enstitüsü, Yüksek Lisans Tezi, İstanbul, Turkey, 2020.
- [15]E. B. Dalokay, "Hemşirelerin iletişim becerileri, mental iyi oluşları ve aleksitimi düzeyleri," İstanbul Okan Üniversitesi, Lisansüstü Eğitim Enstitüsü, Yüksek Lisans Tezi, İstanbul, Turkey. 2022.
- [16]X. Yin, & L. Zeng, "A study on the psychological needs of nurses caring for patients with coronavirus disease 2019 from the perspective of the existence, relatedness, and growth theory," *International Journal of Nursing Sciences*, vol. 7, no. 2, pp. 157-160, 2020. <https://www.sciencedirect.com/science/article/pii/S2352013220300508>
- [17]R. Tennant, L. Hiller, R. Fishwick, S. Platt, S. Joseph, S. Weich, J. Parkinson, J. Secker, & S. Stewart-Brown, "The Warwick-Edinburgh Mental Well-being Scale (WEMWBS): Development and UK validation," *Health and Quality of Life Outcomes*, vol. 5, no. 63, 2007. doi:<https://doi.org/10.1186/1477-7525-5-63>.
- [18]J. Oates, J. Jones, & N. Drey, "Subjective well-being of mental health nurses in the United Kingdom: Results of an online survey," *Int J Mental Health Nurs*. Vol. 26, pp. 391-401, 2017. doi:<https://doi.org/10.1111/inm.12263>.
- [19]C. Topuz, "Üniversite öğrencilerinde özgeçiliğin öznel iyi oluş ve psikolojik iyi oluş ile ilişkisinin incelenmesi," Fatih Üniversitesi, Sosyal Bilimler Enstitüsü, Yüksek Lisans Tezi, İstanbul, Turkey, 2013.
- [20]R.N. Wakilabad, R. Kheiri, N. Islamzadeh, *et al.* "A survey of social well-being among employees, retirees, and nursing students: a descriptive-analytical study," *BMC Nurs* vol. 22, p. 199, 2023. <https://doi.org/10.1186/s12912-023-01321-w>
- [21]N. Şensoy, P. K. Çolak, & N. Doğan, "Sağlık çalışanlarında psikolojik iyi oluş düzeyi ile sanal ortamda yalnızlık düzeyi arasındaki ilişki," *Türk Aile Hekimliği Dergisi*, vol. 24, no. 1, pp. 41-50, 2020. https://jag.journalagent.com/z4/download_fulltext.asp?pdire=tahd&plng=tur&un=TAHD-60243
- [22]L. Liu, D Wu, L Wang, Y Qu, H. Wu, "Effort-Reward Imbalance, Resilience, and Perceived Organizational Support: A Moderated Mediation Model of Fatigue in Chinese Nurses," *Risk Manag Health Policy*, vol. 13, pp. 893-901, 2020. <https://doi.org/10.2147/RMHP.S259339>
- [23]E. Kanbur, & V. Mazioglu, "Psikolojik iyi oluşun iş becerikliliği üzerine etkisi," *İnsan ve Toplum Bilimleri Araştırmaları Dergisi*. Vol. 10, no. 2, pp. 1839-1857, 2021. <https://dergipark.org.tr/en/pub/itobiad/issue/62559/851820>
- [24]H. K. Eren, Ö. Kersu, & H. Özen, "COVID- 19 pandemi sürecinde hemşirelerin sosyal damgalanma algısı ve psikolojik iyi oluş arasındaki ilişkinin araştırılması," *Euroasia Journal of Mathematics, Engineering, Natural & Medical Sciences*, vol. 10, no. 26, pp. 47-59, 2023. doi:<https://doi.org/10.5281/zenodo.7771600>
- [25]R. Kurt, "Covid-19 pandemisi döneminde hemşirelerin Covid-19'a karşı korkusu, psikolojik iyi oluş düzeyleri ve iş doyumunun incelenmesi," Biruni Üniversitesi, Lisansüstü Eğitim Enstitüsü, Yüksek Lisans Tezi, İstanbul, Turkey, 2023. <http://openaccess.biruni.edu.tr/xmlui/handle/20.500.12445/3171>

- [26]H. T. Ően, "Yönetici, çalıřma arkadaşları ve örgütsel destek algısının hemřirelerin psikolojik iyi oluř ve iř performansına etkisi," İstanbul Üniversitesi, Sađlık Bilimleri Enstitüsü, Doktora Tezi, İstanbul, 2018.
- [27]Y. S. Ü. Özçetin, G. Sarıođlu, & S. İ. Dursun, "Onkoloji hemřirelerinin psikolojik sađamlık, tükenmiřlik ve psikolojik iyi oluř düzeyleri," *Psikiyatride Güncel Yaklařımlar*. Vol. 11, pp. 147-164, 2019. <https://dergipark.org.tr/en/pub/pgy/issue/43450/589202>