



# A STUDY TO ASSESS THE LEVEL OF HAPPINESS AMONG NURSING FACULTIES

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<https://doi.org/10.53926/YNJR/0010>

<https://ynjr.in/>

## Abstract

**Background of the study:** Nursing education is considered one of the academic disciplines with higher levels of job stress. Nursing faculty are seldom viewed as a vulnerable population, yet those who teach nursing are susceptible to physical, psychological, and emotional harm from students, peers, and administrators.[13] In the nursing faculty role, individuals face multiple stressors that, if not handled in a proactive manner, may result in serious stress reactions characterized by negative behavioural, psychological, and physiological outcomes. Burnout, in particular, is a negative consequence of stress. Faculty with higher happiness levels could treat student nurses better. It will have a direct impact nurse's level of happiness and is often displayed how they act in the clinical setting and treat their patients. This study was conducted to assess the level of happiness among nursing faculties working in various colleges of Uttar Pradesh, India. **Materials & Methods:** Descriptive research design was used in study. The study was conducted among nursing faculties employed in Government and Private nursing colleges of Uttar Pradesh. Through Snow ball sampling method data was gathered among 79 nursing faculties from different nursing colleges. Structured self-administered questionnaire was used to obtain data from the samples. Structured self-administered questionnaire consists of two parts. Part A consists of questions related to demographic data such as Age in Years, Gender, Education, Nature of Job, Annual Income, Marital status and Employment of Spouse. Part B of the tool consists of Oxford Happiness Questionnaire. **Results:** The mean score of Oxford Happiness Questionnaire of this study is 4.3. Lowest score is 1 and highest score is 5.9. 56.96% of the participants score was between 4 – 5. It indicates the majority of the participants of this study was rather happy or pretty happy. 17.72% of the participants score was in between 5 – 6, which indicates they are very happy. 20.25% OF participants score was in between 3 – 4, and it was interpreted as neutral (not really happy/ unhappy). Oxford Happiness Questionnaire score of 2.53 samples was in between 2 – 3 (somewhat happy). 1.27 % of the samples score was 1, which indicates that they are not happy. **Conclusion:** Results of our study revealed that majority of nursing faculties working in nursing colleges were found pretty happy. Interestingly level of happiness of nursing faculties participated in this study had no association with the demographic variables such as age, gender, education, nature of Job, annual Income, marital status and employment of spouse etc.

**Keywords:** Happiness, Nursing Faculty, Oxford Happiness Questionnaire

## Introduction

Happiness is a positive concept that is vital and important in maintaining health. Happiness has been defined as “a lasting, complete, and justified satisfaction with life as a whole”. According to Kraut, Happiness includes “the belief that one is getting the important things one wants, as well as certain pleasant affects that normally go along with this belief”. Happiness has also been conceptualized as a positive inner experience, the highest good, and the ultimate motivator for all human behaviours. According to Hills and Argyle, happiness is a multidimensional

construct comprising both emotional and cognitive elements. [1] Happiness is of great importance to all professions, particularly the nursing profession [2] because nurses are in direct and constant contact with patients and clients whose unique conditions require nurses to be altruistic, self-confident, dedicated, creative, kind, and energetic. All of these attributes are directly linked with happiness [3]. On the other hand, daily exposure to patients' pain and suffering, heavy workload, and poor working conditions impose high levels of occupational stress for nurses [4]. Occupational stress, in

turn, undermines nurses' self-confidence and concentration, increases their irritability, brings them to sleep disorders and job burnout, and thereby, negatively affects their happiness and care quality [4, 5,6].

The results of limited studies into nurses' happiness show that nurses have low levels of happiness. For instance, two studies showed that out of a possible score range of 0-5, the happiness mean score of Korean nurses were 3.3 and 2.94 [7]. A study in Iran also showed that the mean score of nurses' happiness was 37.8 out of a possible total score of 87 [8]. On the other hand, the results of studies into the factors contributing to nurses' happiness are contradictory. Study findings indicate that nurses who work in teaching hospitals in Kashan, Iran, have moderate happiness. Their happiness is affected by different factors such as their mental health, monthly salary, satisfaction with salary, quality of life, current hospital ward, the length of working in the current ward, work shift, age, job satisfaction, and satisfaction with physicians' conduct and performance.[9]

A descriptive study conducted among nurses who work in emergency departments of Iran hospitals using Oxford Happiness Inventory revealed that nurses have moderate levels of happiness. Additionally, the findings suggest that their happiness was associated with their economic status and closure over their duties. [10] Another cross-sectional study conducted to investigate happiness among nurses in educational hospitals shows that level of happiness was moderate in the majority of nurses. Therefore, the researchers recommend planning and implementing appropriate interventions to increase the happiness of nurses and improve the quality of nursing care. [11] Nursing education is foundational in preparing nurses to care for society. Nursing faculty member is considered as one of the principal elements of nursing education system. Nursing faculty make a choice to enter the profession of nursing education to educate future nurses and practice nursing in the setting of an academic environment. Nursing faculties function as advocates, change agents and leaders. As a nursing faculty or as a nurse educator one can model professional values and skills, and ultimately influence the quality of care provided by future nurses. Being a role model is very important in order for nurse teachers to develop nurse professionals, promote students' competence and confidence. [12]

Nursing education is considered one of the academic disciplines with higher levels of job stress. Nursing faculty are seldom viewed as a vulnerable population, yet

those who teach nursing are susceptible to physical, psychological, and emotional harm from students, peers, and administrators.[13] In the nursing faculty role, individuals face multiple stressors that, if not handled in a proactive manner, may result in serious stress reactions characterized by negative behavioural, psychological, and physiological outcomes. Burnout, in particular, is a negative consequence of stress.

Nursing faculty, in particular, experience stressors as a result of high job expectations associated with the teaching, service, research paradigm, heavy workloads precluding personal, professional life balance, pressure to maintain clinical competence, and feelings of frustration associated with a perceived inability to satisfy the demands of multiple constituencies. Stressors on nursing faculty are compounded by lack of empowerment structures within hierarchical organizations of higher learning and by the steep expectations associated with promotion and tenure. Interestingly, occupational stress in the nursing faculty role is not a new phenomenon. Long-term solutions for stress and burnout in the nursing faculty role, however, seem to elude us. [14] Faculty with higher happiness levels could treat student nurses better. It will have a direct impact nurse's level of happiness and is often displayed how they act in the clinical setting and treat their patients. Despite the importance of the issue, limited number of studies have investigated nursing faculties happiness. Therefore, this study was conducted to assess the level of happiness among nursing faculties working in various colleges of Uttar Pradesh, India.

### Methodology:

Descriptive research design was used in study. The study was conducted among nursing faculties employed in Government and Private Nursing Colleges of Uttar Pradesh. Through Snow ball sampling method 79 nursing faculties from different nursing colleges were selected. Structured self-administered questionnaire was used to obtain data from the samples. The questionnaire consists of two parts. Part - A consists of questions related to demographic data such as Age in Years, Gender, Education, Nature of Job, Annual Income, Marital status and Employment of Spouse. Part - B of the tool consists of Oxford Happiness Questionnaire. The Oxford Happiness Questionnaire was developed by psychologists Michael Argyle and Peter Hills at Oxford University. It is a widely used scale for assessment of personal happiness. It consists of 29 statements about happiness. Respondents

were asked to indicate how much they agree or disagree with each by entering a number in the blank after each statement, according to the following scale:

1 = Strongly Disagree, 2 = Moderately Disagree, 3 = Slightly Disagree, 4 = Slightly Agree, 5 = Moderately Agree, 6 = Strongly Agree. Final score will be calculated by adding the obtained numbers of all the statements and dividing it by 29. The lowest possible score is 1 and the highest possible score is 6. The average is around 4.30.

**Score Interpretation:** 1-2: Not happy. 2-3: Somewhat unhappy. 3-4: Not particularly happy or unhappy. 4: Somewhat happy or moderately happy. This is what the average person scores. 4-5: Rather happy; pretty happy. 5-6: Very happy. 6: Too happy. [15] Descriptive and inferential statistics were used to analyse the data.

## Results

Majority of the participants 54.5% were in between the age group of 20 – 35 years. 32.9% of the participants were in between the age group of 35 – 45 years. 10.1% of the samples were in between 45 – 60 years and the remaining 2.5% of them belongs to above 60 age group. In regard to the gender 70.9 % of samples were male and 29.1% were female. 72.2% of the samples have completed Post Graduation in Nursing and 27.8 % of them have completed UG programme in Nursing. Majority of the samples around 64.6% were working in private nursing

colleges and the remaining 35.4% of the nursing faculties were working as a nursing faculty/educator in Government nursing colleges. Majority of the nursing faculties and educators' annual income is less than 2.5 lakhs rupees per annum. 22.8% of the study sample annual income is between 2.5 lakhs to 5 lakhs, 13.9% of the samples annual income is between 5 lakhs to 10 lakhs rupees and the remaining 8.9% of the participants is above 10 lakhs rupees per annum. 67.1% of the samples were married and the remaining 32.9% of them were unmarried. In regard to the employment status of the spouse 57% of participants responded that their spouse is employed and 10.1% of the participants spouses were unemployed. Remaining 32.9 % of unmarried respondents answered as not applicable.

The Table No – 1 depicts the Oxford Happiness Score of Nursing Faculties: The mean score of Oxford Happiness Questionnaire of this study is 4.3. Lowest score is 1 and highest score is 5.9. 56.96% of the participants score was between 4 –5. It indicates the majority of the participants of this study was rather happy or pretty happy. 17.72% of the participants score was in between 5 – 6, which indicates they are very happy. 20.25% OF participants score was in between 3 – 4, and it was interpreted as neutral (not really happy/ unhappy). Oxford Happiness Questionnaire score of 2.53 samples was in between 2 – 3 (somewhat happy). 1.27 % of the samples score was 1, which indicates that they are not happy.

**Table No – 1 Oxford Happiness Score of Nursing Faculties**

<i>Score</i>	<i>Level of Happiness</i>	<i>Frequency</i>	<i>Percentage</i>	<i>Mean</i>	<i>Standard Deviation</i>
<i>Between 1 – 2</i>	<i>Not Happy</i>	<i>01</i>	<i>1.27</i>		
<i>Between 2 - 3</i>	<i>Somewhat Happy</i>	<i>02</i>	<i>2.53</i>		
<i>Between 3 - 4</i>	<i>Neutral (Not really Happy/Unhappy)</i>	<i>16</i>	<i>20.25</i>		
<i>4</i>	<i>Moderately Happy</i>	<i>01</i>	<i>1.27</i>	<i>4.34</i>	<i>0.77</i>
<i>Between 4 – 5</i>	<i>Rather Happy / Pretty Happy</i>	<i>45</i>	<i>56.96</i>		
<i>Between 5 - 6</i>	<i>Very Happy</i>	<i>14</i>	<i>17.72</i>		
<i>6</i>	<i>Too Happy</i>	<i>00</i>	<i>00</i>		

**Table- 2 Association between Level of Happiness among Nursing Faculties with Demographic Variables**

<i>Demographic Variables</i>		<i>Happiness Score</i>							<i>Chi Square</i>
		<i>1-2</i>	<i>2-3</i>	<i>3-4</i>	<i>4</i>	<i>4-5</i>	<i>5-6</i>	<i>6</i>	
<i>Age in Years</i>	<i>20 – 35</i>	<i>01</i>	<i>02</i>	<i>07</i>	<i>00</i>	<i>25</i>	<i>08</i>	<i>00</i>	<i>X2 =15.192</i> <i>df=18</i> <i>P&lt;0.05</i> <i>NS</i>
	<i>35 – 45</i>	<i>00</i>	<i>00</i>	<i>08</i>	<i>00</i>	<i>13</i>	<i>04</i>	<i>00</i>	
	<i>45 – 60</i>	<i>00</i>	<i>00</i>	<i>01</i>	<i>01</i>	<i>06</i>	<i>01</i>	<i>00</i>	
	<i>Above 60</i>	<i>00</i>	<i>00</i>	<i>00</i>	<i>00</i>	<i>01</i>	<i>01</i>	<i>00</i>	
<i>Gender</i>	<i>Male</i>	<i>00</i>	<i>00</i>	<i>10</i>	<i>00</i>	<i>10</i>	<i>03</i>	<i>00</i>	<i>X2=11.76</i> <i>df = 6</i> <i>P&lt;0.05</i> <i>NS</i>
	<i>Female</i>	<i>01</i>	<i>02</i>	<i>06</i>	<i>01</i>	<i>35</i>	<i>11</i>	<i>00</i>	
<i>Education</i>	<i>Post Graduates</i>	<i>01</i>	<i>02</i>	<i>14</i>	<i>01</i>	<i>27</i>	<i>12</i>	<i>00</i>	<i>X2 =8.02</i> <i>df = 6</i> <i>P&lt;0.05</i> <i>NS</i>
	<i>Under Graduates</i>	<i>00</i>	<i>00</i>	<i>02</i>	<i>00</i>	<i>18</i>	<i>02</i>	<i>00</i>	
<i>Nature of Job</i>	<i>Private Jobs</i>	<i>01</i>	<i>01</i>	<i>14</i>	<i>01</i>	<i>36</i>	<i>10</i>	<i>00</i>	<i>X2 =2.82</i> <i>df = 6</i> <i>P&lt;0.05</i> <i>NS</i>
	<i>Government Jobs</i>	<i>00</i>	<i>01</i>	<i>02</i>	<i>00</i>	<i>09</i>	<i>04</i>	<i>00</i>	
<i>Annual Income</i>	<i>Below 2.5 Lakhs rupees</i>	<i>01</i>	<i>01</i>	<i>08</i>	<i>00</i>	<i>28</i>	<i>06</i>	<i>00</i>	<i>X2 =23.8</i> <i>df = 18</i> <i>P&lt;0.05</i> <i>NS</i>
	<i>2.5 – 5 Lakhs</i>	<i>00</i>	<i>00</i>	<i>04</i>	<i>00</i>	<i>10</i>	<i>04</i>	<i>00</i>	
	<i>5 Lakhs to 10 Lakhs</i>	<i>00</i>	<i>00</i>	<i>03</i>	<i>01</i>	<i>06</i>	<i>00</i>	<i>00</i>	
	<i>Above 10 Lakhs</i>	<i>00</i>	<i>01</i>	<i>01</i>	<i>00</i>	<i>01</i>	<i>04</i>	<i>00</i>	
<i>Marital Status</i>	<i>Married</i>	<i>00</i>	<i>01</i>	<i>10</i>	<i>00</i>	<i>33</i>	<i>08</i>	<i>00</i>	<i>X2 =5.79</i> <i>df = 6</i> <i>P&lt;0.05</i> <i>NS</i>
	<i>Unmarried</i>	<i>01</i>	<i>01</i>	<i>06</i>	<i>01</i>	<i>12</i>	<i>06</i>	<i>00</i>	
<i>Employment of Spouse</i>	<i>Employed</i>	<i>00</i>	<i>00</i>	<i>08</i>	<i>00</i>	<i>31</i>	<i>07</i>	<i>00</i>	<i>X2 =18.44</i> <i>df = 12</i> <i>P&lt;0.05</i> <i>NS</i>
	<i>Unemployed</i>	<i>00</i>	<i>01</i>	<i>02</i>	<i>01</i>	<i>03</i>	<i>02</i>	<i>00</i>	
	<i>Not Applicable</i>	<i>01</i>	<i>01</i>	<i>06</i>	<i>00</i>	<i>11</i>	<i>05</i>		

## Discussion

Happiness is the ultimate goal in life for nearly everyone. As workers spend most of their daily lives in workplace settings, their happiness is closely related to their working life [16]. People who often experience happiness are more likely to actively set new goals at work and try to realize them. These factors, in turn, can result in better job outcomes [17]. Nurses who are happy can become immersed in their professional nursing practice, perform their work creatively and have a positive effect on organizational performance [18]. Aim of this study is to assess the level of happiness in nursing faculty using Oxford happiness questionnaire. Findings of this study indicated that mean happiness score of nursing faculty was 4.4. According to Oxford happiness questionnaire the

score 4.34 indicates Pretty happy. This result reveals that nursing faculties working in academic institution was pretty happy.

In the study of Karakus, it was reported that only 42% of the nurses were not pleased with the nursing profession but the majority of them were happy with the nursing profession [19]. In another study, similar to our study findings, 64.7% of nurses did their job happily.[20] Similar study conducted among nurses working in teaching hospitals of Kashan, Iran reported moderate happiness. [21] Another cross-sectional study conducted among nurses working in China reported the similar findings. Findings revealed that overall happiness index among nurses was moderate. Researcher also concluded that appropriate nursing interventions can improve

nurses' happiness index scores, thereby increasing nurses' motivation and promoting the development of their nursing practice. [22] According to the results of a descriptive study conducted among 73 randomly selected nurses at Shahid Sadoughi Hospital revealed that, happiness could not be generalized to all the nurses, however, nurses were shown to have a good state of happiness while it was affected by their workplace. Schwartz tried to compare happiness in nurses and other people in Iceland concluding that nurses were happy, like other individuals of the society. Another finding of the study was that nurses of intensive units were less happy, that represents a possible impact of working place on the morale of nurses. Kushali believed that working conditions and workplace could affect nurses' mental health and well-being. [23]

Findings of this study also revealed that demographic variables such as Age in Years, Gender, Education, Nature of Job, Annual Income, Marital status and Employment of Spouse had shown no association with the happiness score of the nursing faculty. These findings were consistent with the results of the similar study which

revealed no significant association between the level of happiness and demographic variables such as age ( $P=0.81$ ), gender ( $P=0.24$ ), marital status ( $P=0.36$ ), job history ( $P=0.62$ ), and educational level ( $P=0.63$ ). [23]

### Conclusion

Quality nursing education relies largely on well-trained and competent faculty members. Nursing faculties play a pivotal role in strengthening the workforce, serving as role models, and providing the leadership needed to implement evidence-based practice and improve patient outcomes. Existing large number of studies related to the level of happiness among nurse's provides different results from low, moderate and average level of happiness. Results of our study revealed that majority of nursing faculties working in nursing colleges were found pretty happy. Interestingly level of happiness of nursing faculties participated in this study had no association with the demographic variables such as age, gender, education, nature of Job, annual Income, marital status and employment of spouse etc.

### References

1. Bekhet AK, Zauszniewski JA, Nakhla WE. Happiness: Theoretical and Empirical Considerations. Nursing Forum [Internet]. Wiley; 2008 Jan;43(1):12–23. Available from: [\[Crossref\]](#)
2. Ozkara SE. Concept analysis of nurses' happiness. Nurs Forum. 2015;50(1):55–62.
3. Salas-Vallina A, López-Cabrales Á, Alegre J, Fernández R. On the road to happiness at work (HAW): transformational leadership and organizational learning capability as drivers of HAW in a healthcare context. Pers Rev. 2017;46(2):314–38.
4. Kshetrimayum N, Bennadi D, Siluvai S. Stress among staf nurses: a hospital-based study. J Nat Sci Med. 2019;2(2):95.
5. Kim SY, Kwon YE. Effect of happiness and empowerment on nurs-ing performance of clinical nurses. J Korea Acad Ind Coop Soc. 2020;21(1):112–20.
6. Javanmardnejad S, Bandari R, Heravi-Karimooi M, Rejeh N, Sharif Nia H, Montazeri A. Happiness, quality of working life, and job satisfaction among nurses working in emergency departments in Iran. Health and Quality of Life Outcomes [Internet]. Springer Science and Business Media LLC; 2021 Apr 1;19(1). Available from: [\[Crossref\]](#)
7. Ju EJ, Kwon YC, Nam MH. Influence of clinical nurses' work environment and emotional labor on happiness index. J Korean Acad Nurs Adm 2015;21(2):212e22.
8. Rjabi-Gilan N, Ghasemi S, Reshadat S, Zangeneh A. Happiness in health sector personnel: some demographic and occupational related factors. J Isfahan Med School 2015;32(309):1897e906.
9. Khosrojerdi Z, Tagharrobi Z, Sooki Z, Sharifi K. Predictors of happiness among Iranian nurses. International Journal of Nursing Sciences [Internet]. Elsevier BV; 2018 Jul;5(3):281–6. Available from: [\[Crossref\]](#)
10. Javanmardnejad S, Bandari R, Heravi-Karimooi M, Rejeh N, Sharif Nia H, Montazeri A. Happiness, quality of working life, and job satisfaction among nurses working in emergency departments in Iran. Health and Quality of Life Outcomes [Internet]. Springer Science and Business Media LLC; 2021 Apr 1;19(1). Available from: [\[Crossref\]](#)
11. Vakili M, Farzaneh F, Momayyezi M. Evaluation of Happiness and its Related Factors among Nurses in Educational Hospitals of Yazd Shahid Sadoughi

- University of Medical Sciences, 2016. The Journal of Toloobehdasht. 2020 Sep 14.
12. Klunklin A, Sawasdisingha P, Viseskul N, Funashima N, Kameoka T, Nomoto Y, et al. Role model behaviors of nursing faculty members in Thailand. *Nursing & Health Sciences* [Internet]. Wiley; 2011 Mar;13(1):84–7. Available from: [\[Crossref\]](#)
  13. DalPezzo NK, Jett KT. Nursing faculty: a vulnerable population. *J Nurs Educ.* 2010 Mar;49(3):132-6. doi: 10.3928/01484834-20090915-04. Epub 2010 Mar 5. PMID: 19877574.
  14. Shirey, Maria R. MS, MBA, RN, CNA, BC, FACHE Stress and Burnout in Nursing Faculty, *Nurse Educator*: May 2006 - Volume 31 - Issue 3 - p 95-97
  15. Hills, P., & Argyle, M. (2002). The Oxford Happiness Questionnaire: a compact scale for the measurement of psychological well-being. *Personality and Individual Differences*, 33, 1073–1082.
  16. Fisher C.D. Happiness at work. *Int. J. Manag. Rev.* 2010;12:384–412. [\[CrossRef\]](#) [\[Google Scholar\]](#)
  17. Fredrickson B.L. The role of positive emotions in positive psychology: The broaden-and-build theory of positive emotions. *Am. Psychol.* 2001;56:218. doi: 10.1037/0003-066X.56.3.218. [\[CrossRef\]](#)
  18. Loukzadeh Z., Bafrooi N.M. Association of coping style and psychological well-being in hospital nurses. *J. Caring Sci.* 2013;2:313.
  19. Karakus, H, Hemsirelerin is tamin duzeyleri: Sivasiliornege. *Dicle Universities Sosyal Bilimler Enstitusu Dergisi* 3, 46 – 57
  20. Erkayiran, Orkun & Şenocak, Süleyman & Demirkiran, Fatma. (2019). The Role of Nurses in Professional Perceptions of Nursing Students: A Cross-Sectional Study. 12. 199-209.
  21. Khosrojerdi Z, Tagharrobi Z, Sooki Z, Sharifi K. Predictors of happiness among Iranian nurses. *International Journal of Nursing Sciences* [Internet]. Elsevier BV; 2018 Jul;5(3):281–6. Available from: [\[Crossref\]](#)
  22. Meng R, Luo Y, Liu B, Hu Y, Yu C (2015) The Nurses' Well-Being Index and Factors Influencing This Index among Nurses in Central China: A Cross-Sectional Study. *PLoS ONE* 10(12): e0144414. [\[Crossref\]](#)
  23. Rahigee F (2015) A Descriptive Study of Nurses' Happiness at Shahid Sadoughi Hospital, Iran. *J Ment Disord Treat* 1: 102. [\[Crossref\]](#)

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