

Article

Examining the relationship between professional identity and psychological Well-being among nurses

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Abstract

Background: Various factors are known to influence psychological well-being and professional identity, both of which can subsequently affect the optimal performance and efficiency of nurses.**Objectives:** The present study was conducted to investigate the relationship between professional identity and psychological well-being among nurses.**Methods:** The current research was a descriptive correlational study conducted on 242 nurses in 2021. The hospitals of Birjand City were selected by cluster sampling based on the inclusion criteria. The data were collected using a demographic information questionnaire, the Ryff psychological well-being questionnaire, and Hao's professional identity questionnaire. Data were analyzed by SPSS 19 software using the independent t-test, one-way analysis of variance, chi-square, Pearson correlation, and Spearman correlation.**Results:** The results showed that the mean (SD) score of professional identity in nurses was 58.49 (10.09), and the average score (SD) of psychological well-being among the nurses was 69.74 (10.96). There was a positive and significant relationship between psychological well-being and professional identity, meaning that with the improvement of professional identity, the level of psychological well-being also increased among nurses ($\text{sig}=0.005$, $\alpha=0.185$).**Conclusion:** By promoting professional identity, it is possible to upgrade psychological well-being among nurses. This can be achieved by implementing stress-coping measures such as optimization of the work conditions and work indicators, which can promote nurses' professional identity and, subsequently, psychological well-being.

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Implications of this paper in nursing and midwifery preventive care:

- Increasing the presence of nurses in scientific societies and public media will improve their public image and help them gain a stronger position in healthcare organizations, which will ultimately improve their professional identity.
- Nursing training programs, as a foundation, should be focused on strengthening the professional identity of nurses and improving their social status.
- The role of nursing instructors in creating a positive image of the profession for nursing students and the role of managers in nurturing an atmosphere full of respect in the work environment can improve the image of nursing in clinical environments and help build a positive professional identity.

Introduction

Nurses are the largest group of health providers, and their professional identity plays an important role in fulfilling the missions of the health system. Acquiring, maintaining, and developing a professional identity is one of the important issues in every profession [1]. Professional identity is defined as "professional self-understanding" based on attitudes, opinions, feelings, values, motivations, and experiences, as well as a person's constant awareness about his/he uniqueness [2]. Professional identity is a form of social identity that includes a deep insight into professional performance and creates professional values and goals widely accepted by employees.

The professional identity of a nurse primarily requires knowing social goals and values [3]. Based on the results of a systematic review, teamwork, collaborative and communication activities, professors and clinical trainers, individual characteristics (age, gender, self-confidence, etc.), educational approaches, ambiguity in the role, cultural factors, and media are the most important elements related to the formation of professional identity in nurses. Professional identity is very important in obtaining job satisfaction and independence and preventing job burnout in nurses [4]. A positive professional identity reduces job burnout and increases interest in and enthusiasm for work,

creates job satisfaction, improves the quality of care, and keeps the nursing team together [3]. Also, it can lead to the personal, professional, and social development of a person [5]. A positive professional identity allows nurses to play multiple roles in providing quality care to patients and reducing their workplace stress [4]. In a 2017 study, Hao et al. found that increased professional identity and reduced stress improved the quality of care [3].

Nursing is one of the professions that imposes a great level of stress and predisposes to psychological problems such as anxiety, depression, and fatigue. Exaggerated stress and depression decrease job performance, break down personal relationships, wear down attention and concentration, weaken problem-solving skills and professional efficiency, and decrease the ability to communicate with patients. The emergence of such issues in the nursing profession will reduce the psychological well-being of nurses. Psychological well-being, defined as cognitive and effective life assessment, is the striving for perfection and is essential to realizing one's real potential abilities [6,7]. Also, mental well-being is considered a psychological component of quality of life and is defined as people's understanding of their own lives in terms of emotional behaviors, mental functions, and mental health dimensions. Mental well-being includes two important components; the first component is how to function, and the second component includes health. [6].

Occupational stress, personal characteristics, and coping strategies of nurses in the work environment have many consequences on their health and psychological well-being [7]. Psychological well-being, in addition to reducing stress, anxiety, and depression in the individual, improves the individual's performance and increases the quality of care [6]. Welfare is a dynamic process that requires continuous efforts and investment by organizations and individuals [3]. In their study in 2013, Kavousi et al. found that there was a positive and significant relationship between nurses' psychological well-being and job performance [6]. Long-term work stress has negative effects on the mental and physical health of nurses and reduces their psychological well-being [8].

Today, nursing in its professional path has reached a stage where it must pay attention to many concepts, including professional identity as one of the pillars of professional performance in nurses. A positive professional identity depends on having a good level of psychological well-being. In addition to reducing anxiety and stress, psychological well-being improves job performance and the quality of clinical care.

Since psychological well-being and professional identity are important factors in the performance of nurses, and because of the fact that no study has been conducted in this field in Iran, the present study was conducted to investigate the relationship between professional identity and psychological well-being among nurses.

Methods

The present study employed a descriptive correlational design. The statistical population consisted of all nurses working in five hospitals in Birjand City. The sample size was estimated as 242 people based on the study of Ren et al. [9] and a sample size formula [9], considering 1% attrition. For the selection of nurses among five hospitals in Birjand City, since the hospitals were assumed to be similar in terms of managerial structure, financial resources, and the level of literacy of nurses, two of them were selected by lottery. Then, using a simple random sampling method based on nurses' personnel codes, 242 individuals were selected, and their information was entered into Excel software.

Nurses with at least one year of work experience who were willing to participate in this study were included. Questionnaires were sent to all eligible nurses by e-mail (e-mail addresses were taken from the nurses in person). The necessary explanations were given to the nurses, who were requested to complete the questionnaires after giving informed written consent. The participants ensured us that they did not suffer from psychological disorders or had bad moral backgrounds. It was explained to the participants that they did not need to introduce themselves and that their information would remain confidential and would be sent only to them if required. They were asked to complete the questionnaires by the appointed date and send it via email. The data was collected over three months, from January to March 2021.

Data collection tools included a demographic information questionnaire, the professional identity questionnaire, and the Riff psychological well-being questionnaire. The demographic information questionnaire included age, gender, marital status, work experience, and workplace.

Hao et al.'s professional identity questionnaire [3] consists of 17 questions that measure 5 factors (professional self-image, job achievements, social comparison/self-reflection, professional autonomy, and social modeling). The responses are marked on a 5-point Likert scale from completely disagree (score 1) to completely agree (score 5). Finally, the person achieves a score between 17 and 85. The higher the score obtained from this questionnaire, the higher the professional identity. Cronbach's alpha of this questionnaire was equal to 0.83, reported by the designers of the questionnaire, and its reliability coefficient was also equal to 0.84 (based on dividing the tool into two halves) [10].

The 18-question form of Riff's Psychological Wellbeing questionnaire is a multidimensional tool and includes 6 domains: 1- Self-acceptance, 2- Positive relationships with others, 3- Autonomy, 4- Mastering the environment, 5- Purposeful life, and 6- Individual growth [11]. The scoring of the Riff psychological well-being questionnaire is based on a 6-point Likert scale from 1 (completely disagree) to 6 (completely agree). The final score ranges between 18 and 108 (the higher the score, the higher the psychological well-being). The validity and reliability of this questionnaire were confirmed in the study of Bayani, reporting the reliability coefficient of 0.82 for the whole tool and the coefficients of 0.82, 0.82, 0.77, 0.78, 0.77, 0.70, and 0.78 for the subscales of self-acceptance, positive relationships with others, autonomy, mastery of the environment, purposeful life, and

personal growth, respectively, indicating statistically significant values ($p < 0.001$) [12].

The collected data were analyzed by SPSS 19 software using appropriate statistical tests. First, the normality of the quantitative variables was examined using the Kolmogorov-Smirnov test, and the results showed that all quantitative variables had normal distribution ($P > 0.05$). Then, the correlation of professional identity with psychological well-being was assessed using Pearson's correlation, and the relationship of other contextual and demographic variables with psychological well-being was investigated using the independent t-test (for the variables of marital status and gender) and one-way analysis of variance (for age). Work experience and workplace were also analyzed. A significance level of less than 0.05 was considered for all analyses. Finally, step-by-step regression was used to prepare a model for identifying the factors influencing psychological well-being.

Results

All 242 nurses answered the questionnaires. The average (SD) age of the nurses was 32.35 (6.55) years. The minimum and maximum ages of the participants were 22 and 52 years, respectively. The average working experience among the nurses was 7.97 (5.75) years, with the minimum and maximum of 1 and 29 years, respectively.

The mean (SD) of the professional identity score among the nurses was 58.49 (10.09), and the lowest and highest scores were 25 and 85, respectively. The mean (SD) of the psychological well-being score in the nurses was 69.74 (10.96), with a range of 37 to 101. The means and standard deviations of the scores of different dimensions of professional identity and psychological well-being are presented in Table 1.

Table 1: Average scores of professional identity and psychological well-being in general and in their sub-dimensions

Row	Dimensions	Mean (standard deviation)
	Professional identity	58.49(10.09)
1	Professional personal image	21.87(4.42)
2	Job achievements	13.32(2.09)
3	Social comparison and self-reflection	10.29(2.01)
4	Professional independence	6.15(1.68)
5	Social modeling	6.84(1.78)
	Psychological well-being	69.74(10.96)
6	Self-acceptance	12(2.51)
7	Positive relationships with others	10.22(2.71)
8	Independence	12.14(2.21)
9	Mastery of the environment	12.12(2.26)
10	Objective life	11.11(2.44)
11	Personal growth	12.12(2.32)

results of Pearson's correlation showed that there was a positive and significant relationship between psychological well-being and professional identity, meaning that with an

improvement in the professional identity of nurses, their psychological well-being also increased ($p = 0.005$, $r = 0.185$) (Table 2).

Table 2: Correlation coefficients between professional identity and psychological well-being according to subgroups of demographic variables

Variables	The correlation coefficient	meaningful * $p < .05$
Total	0.185	0.005*
Age (years)	<25	0.22
	26 - 30	0.16
	31 - 35	0.28
	36 - 40	0.06
	41 - 45	0.28
	>45	-0.35
Sex	Female	0.16
	Male	0.2
Marital status	Single	0.32
	Married	0.11
Work experience (years)	5-1	0.11
	10-6	0.24
	15-11	0.37
	20-16	0.19
	>20	0.56
Workplace	Internal medicine	0.13
	Surgery	0.26
	Emergency department	0.34
	Obstetric and Gynecology	-0.12
	Pediatric ward	0.81
	Intensive care units	0.43
	Infectious diseases	-0.14
	Psychiatric diseases	0.47
	Orthopedics	-
	Burns	-

The one-way analysis of the variance test showed a significant association between professional identity and age ($F = 2.34$, $P = 0.04$) and between

psychological well-being and the workplace ($F = 2.04$, $P = 0.04$). The independent t-test showed that professional identity was significantly

associated with marital status ($T = 2.2$, $P = 0.02$) (Table 3).
but not with other demographic characteristics

Table 3: The relationship of professional identity and psychological well-being with nurses' demographic information

Variables		Number (percentage)	Professional identity mean (standard deviation)	meaningful *p < .05.	Psychological well-being mean (standard deviation)	meaningful *p < .05.
Age (years)	<25	(%14.0)34	(60.96(12.09)	0.04*	73.47(9.09)	0.09
	26 - 30	(%36.4)88	59.29(10.97)		69.46(12.94)	
	31 - 35	(%21.5)52	58.60(8.28)		66.86(10.97)	
	36 - 40	(%14.0)34	54.21(9.46)		69.21(9.03)	
	41 - 45	(%9.5)23	59.72(7.96)		72.43(6.71)	
	>45	(%4.5)11	53.63(5.31)		71.31(4.24)	
Sex	Female	(%59.9)145	59.13(10.55)	0.17	70.81(11.16)	0.07
	Male	(%40.1)97	57.31 (9.27)		68.27(10.31)	
Marital status	Single	(%36.8)89	60.3(9.97)	0.02*	68.89(11.69)	0.3
	Married	(%63.2)153	57.32(10.00)		70.34(10.38)	
Work experience (years)	5-1	(%41.7)101	59.22(11.6)	0.4	69.81(12.66)	0.2
	10-6	(%32.2)78	58.85(9.47)		69.2(10.55)	
	15-11	(%16.1)39	55.94(9.15)		69.81(9.04)	
	20-16	(%5.4)13	58.38(5.34)		72.30(5.29)	
	> 20	(%4.5)11	56.45(5.69)		71.21(4.75)	
Workplace	Internal medicine	(%24.0)58	58.38(10.35)	0.1	69.77(11.27)	0.04*
	Surgery	(%15.3)37	56.45(5.69)		69.77(11.27)	
	Emergency department	(%18.6)45	58.38(10.35)		70.36(10.85)	
	Obstetric and Gynecology	(%15.7)38	60.28(9.48)		65.6(12.14)	
	Pediatric ward	(%3.7)9	58.19(12.63)		73.73(9.17)	
	Intensive care units	(%9.9)24	62.11(10.45)		68.82(10.57)	
	Infectious diseases	(%5.4)13	60.95(9.22)		68.82(10.57)	
	Psychiatric diseases	(%6.6)16	51.30(7.68)		67(8.62)	
	Orthopedics	(%0.4)1	57.25(6.22)		67(0)	
	Burns	(%0.4)1	45(0)		67(0)	
The p-value was calculated by the one-way ANOVA test for the variables of age, work experience, and workplace and by the t-test for the variables of gender and marital status (*p < 0.05).						

Considering psychological well-being as a dependent variable, all demographic variables and professional identity were entered into a univariate analysis model, which showed that

only professional identity and marital status remained independent predictors of psychological well-being in the multivariate stepwise regression model ($F = 6.9$, $P < 0.001$) (Table 4).

Table 4: Linear regression analysis of psychological well-being with residuals (number=242)

Variables	B	SE	β	t	sig	R ²	F	sig
Model 1								
Fixed	46.58	4.2	-	11.06	0.001			
Professional identity	0.17	0.06	0.18	2.86	0.005	0.03	8.19	0.005
Model 2								
Fixed	51.02	4.57	-	11.16	0.001			
Professional identity	0.18	0.05	0.19	3.06	0.002	0.05	6.98	0.001
Marital status	-3.18	1.34	-0.15	-2.36	0.01			

Abbreviations: B, unstandardized coefficients; SE, standard error; β , standardized coefficients.
 ***p < .001

Discussion

The present study was conducted to investigate the relationship between professional identity and psychological well-being among nurses working in Birjand City's hospitals in 2021. The results of the present study showed that according to the professional identity score obtained, the nurses believed that their professional identity was at a high level, reflecting progress in nursing science and knowledge compared to before. Also, simultaneously with the strengthening of the nursing profession, the work commitment of nurses towards the organization and society has also increased, and with changes in society's view of the nursing profession, this profession has received great attention from health system officials. Karimi Johani et al. (2019) concluded in their study that the development of professional identity was related to the position of a person in society, and nurses needed to gain a stronger position in the organization and improve their public image to develop their professional identity [13]. According to a study by Jisun Min et al. (2019) in China, the identity, self-esteem, and values of professional nursing significantly affected job performance, and nursing educators increased the self-esteem and professionalism of nursing students [14]. In the study of Ribeiro et al. (2021), the majority of nurses believed that nurses were subordinate to doctors [15]. Professional identity facilitates the personal, social, and professional development of nurses and also encourages them to stay in this profession [16]. In the review study of Naimeh Seyed Fatemi and colleagues (2018), professional identity was the main goal and a valuable consequence of the socialization of an individual in the profession. It

was also mentioned in this study that active participation in the learning process, personal growth, habits and prejudices, discarding mental images, and trying to create abstract and creative thinking were among the important indicators of nursing socialization [17]. The low psychological well-being score among nurses in the present study can be related to numerous work stressors and psychological issues such as anxiety, depression, and fatigue among nurses, confirming the results of Soltani et al. (2019). In a recent study, among 194 nurses, less than a quarter of them had a high psychological well-being score, and the rest of them attained low to moderate well-being scores [18]. Efforts to improve the psychological well-being of nurses can have profound positive effects on their professional and personal lives, and it should be noted that long-term work stress adversely affects the mental and physical health of nurses and decreases their optimal performance and job satisfaction [6].

The findings of the present research showed that there was a positive and significant relationship between psychological well-being and professional identity, so the level of psychological well-being of nurses increased with the promotion of their professional identity. The results of this study were in line with the results of Hao C. et al.'s (2020) study, which conducted serial multiple mediations on professional identity and psychological capital and assessed the relationship between work-related stress and work-related well-being among intensive care nurses, Qiqihar City, Heilongjiang Province, China. The results of this cross-sectional study showed that the mental well-being of nurses was at low and medium levels, and after adjusting for

potential confounding factors, professional identity still retained a positive correlation with mental well-being [3]. Also, in the study of Ribeiro et al. (2021) in China, it was found that psychological well-being had a positive relationship with professional identity, and the level of professional identity could significantly affect psychological well-being among nurses [19].

The findings of the present study showed that there was a significant relationship between psychological well-being and the workplace. In fact, nurses working in special, pediatric, and emergency departments had higher levels of psychological well-being. Yousefi et al. (2013), in their study entitled "Comparison of happiness, psychological well-being, and job perfectionism among female nurses in different departments of Isfahan hospitals," concluded that there was a statistically significant difference in the psychological well-being scores of nurses working at oncology, obstetrics and gynecology, and internal medicine wards, which was inconsistent with the results of the present study. These findings indicate the overall complexity of the nursing profession, as well as the low salaries and benefits of nurses and their hard work and lack of social support in the hospital environment [7].

Also, in the present study, we observed that professional identity was significantly associated with age and marital status. In this regard, the average score of professional identity was higher in younger and single nurses than in their older married peers. Meanwhile, no significant relationship was found between professional identity and gender or work experience, which was inconsistent with a review by Walizadeh et al. (2014) under the title of "Professional Identity of Nurses and Factors Related to its Formation," noting that demographic factors such as gender could influence the formation of a positive social identity in nursing students [5].

Of the limitations of the current research, we can mention its restriction to the hospitals of the city of Birjand. It is suggested that research with larger sample sizes, including homogenous and heterogenous occupational groups, be conducted. Also, similar studies can increase the generalizability of our findings. In general, considering the importance of psychological well-

being in shaping the quality of life of nurses, it is suggested that future studies on nurses address other variables that can affect psychological well-being.

Conclusion

Based on the results of the present study, it can be noted that the level of psychological well-being in nurses increases with the improvement and promotion of their professional identity. A high level of psychological well-being also improves the performance of nurses. Since nurses are considered one of the most important groups of health workers in society, the smallest defect in their performance endangers human lives. Therefore, it is suggested that researchers and officials in health organizations make more efforts to improve the professional identity and psychological well-being of nurses.

Ethical Consideration

This article was extracted from a research project approved by the Postgraduate Education Council of Birjand University of Medical Sciences and the Medical Ethics Committee of Birjand University of Medical Sciences with ethics code IR.BUMS.REC.1401.040.

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Conflict of interest

The authors have no conflict of interest and participated in the present study solely at their personal expense.

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Authors' contributions:

Fatemeh Taheri and Fahima Hereati developed the idea, designed the study, and prepared the manuscript. Fatemeh Taheri was responsible for revising and final approval of the manuscript. Nahid Rayhani was responsible for gathering

information. Maleeha Abdulahi performed data analysis and presented the final results.

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