

# STRESS OF INDIAN NURSES IN PRIVATE AND PUBLIC HOSPITALS A CONTRAST

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## ABSTRACT

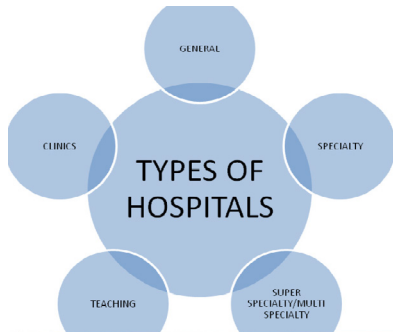
*The healthcare industry is an extensive and intensive form of services which are related to the well being of human beings and can be alarming without it. Health care industry covers hospitals, health insurances, medical software, health equipments and pharmacy. The Indian healthcare industry is estimated to reach USD 155 billion in terms of revenues by 2017, according to a study by LSI Financial Services. Over the next five years, the size of the healthcare industry is expected to almost double driven by rise in per capita spending on healthcare, change in demographic profile, transition in disease profile, increase in health insurance penetration and fast growing medical tourism market. In hospitals today patients are very important and their care is vital for which nurses have to be sincere in their work. The paper focused the Indian nurses in private and public sector and compared their stress. Amos and Structural Equation Modeling is used for the research. We conclude that private nurses work better than government hospital nurses.*

**Keywords:** Healthcare, Structural Equation Modeling(SEM), Theory of planned behavior(TPB), Attitude(ATT), Subjective Norms(SN), perceived behavioral control(PBC), hospitals

**INTRODUCTION**

Here we have used the theory of reasoned action and theory of planned behavior to bring out whether stress is more for nurses working in private care and public hospitals. Here we are focusing on all types of hospitals.

**Find below figure 1 types of hospitals**



**Figure1: Types of hospitals**

**Types of Patients**

Some patients go to a hospital just for diagnosis, treatment, or therapy and then leave, without staying overnight. They are considered as the ‘outpatients’. While others are ‘admitted’ and stay overnight or for several weeks or months and they are considered as the ‘inpatients’.

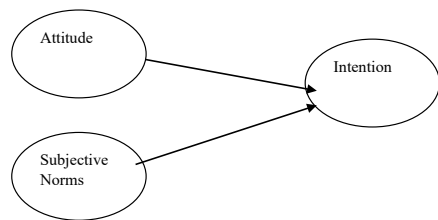
**Public and Private Sectors**

According to National Family Health Survey-3, the private medical sector remains the primary source of health care for the majority of households in both urban areas (70 percent) and rural areas (63 percent) of India. Reliance on public and private health care sector varies significantly between states. Several reasons are cited for relying on private rather than public sector; the topmost reason at

national level is poor quality of care in public sector, with more than 57% households pointing to this as the reason for the preference of private health care. Other major reasons are distance of the public sector facility, long waiting time, and inconvenient hours of operation.”Rani Sushmitha”

**REVIEW OF LITERATURE**

The TRA model is extensively used as a model for prediction of behavioral intentions. It has been used in a diversity of researches such as psychology, horticulture, tourism, healthcare, marketing, management and academics Chang (1998). Here we use this model and another extended model which is dealt in next part of this study in academic institution, known as the theory of planned behaviour. Ajzen & Fishbein (1980) have divided beliefs into conceptually strong and distinctive groups such as behavioral (Attitude) and normative (Subjective Norms) in the TRA model.



**Figure 2: Theory of Reasoned Action**

Here, information affects intentions either through attitudes and/or through subjective norms. Knowledge sharing behavior is the extent to which a knowledge hand actually shares knowledge with other members of their organization. Whereas, intention studies the knowledge of

academician's keenness to connect in knowledge sharing. Theory of planned behavior was formulated which differs from the theory of reasoned action in its addition of the construct, perceived behavioral control."Ajzen,(1991).

### Theory of Planned Behavior (TPB)

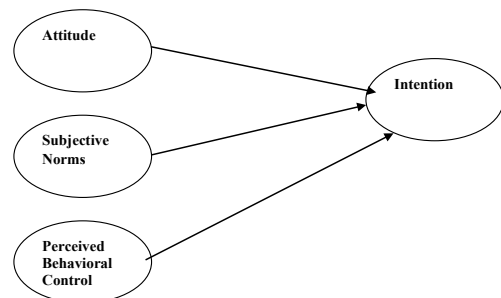
"Taking the Theory of Planned Behaviour into consideration, intention is influenced by three predictors namely attitude, subjective norm, and perceived behavioural control. Attitude reflects an individual's positive or negative assessment of performing the behaviour. For example: if one shares his knowledge with other academicians, he/she feels pleasant or unpleasant. Subjective norms is the apparent social stress (pressure) to perform or not to perform the behaviour, like expectation of a person (by others) to share knowledge among academicians and perceived behavioural control (the extent to which a person feels like enacting the behaviour. It has two aspects: how much a person has control over the behaviour and how confident a person feels about being able to perform or not perform the behaviour). PBC is the perceived ease or difficulty that the individual faces to perform the behaviour (Emma L. Pelling and Katherine M. White, 2009), (Craig R Ramsay et al), (Ching-Fu Chen and Cheng-Wen Chen, 2011)." This well established theory acts as a basis for a well fitted theoretical background for examining how academicians share knowledge. In this study, the Theory of Planned Behaviour model suggests that academicians' intention to share knowledge is resolved by their attitudes, subjective norms and perceived behavioral control.

"This could be represented by a simple equation of Behavioural

Intention = Attitude + Subjective Norms + Perceived Behavioral Control." Goh K S and Manjit Singh Sandhu (2013).

"The Theory of Planned Behavior aims to provide a framework for explaining and predicting the deliberate behavior of individuals within specific social contexts. The theory stems from an earlier version with latent variables such as attitude and subjective norms, the Theory of Reasoned Action" (Ajzen & Fishbein, 1980). According to (Ajzen 1992) there is a need for perceived behavioral control in a state of affairs such as when an individual does not have extensive control over the targeted behaviour

**Figure.3:** Theory of Planned Behaviour with additional construct Perceived Behavioral Control with Theory Reasoned Action.



**Figure 3: Theory of Planned Behaviour**

Theory of Planned Behavior is an extension of theory of reasoned action that is, with the additional construct perceived behavioral control. "Behavioural intention (BI) is asserted by three other variables: attitude (ATT) subjective norm (SN), and the perceived behavioural control (PBC) .(Ajzen, 1991). (M Punniyamoorthy, Antonette Asumptha, 2019).

| Industry     | Author                                                      | Year |
|--------------|-------------------------------------------------------------|------|
| Service      | Seewon Rya,<br>Seung Hee Ho,<br>Ingoo,Han                   | 2003 |
| Horticulture | Alexis a.Clark-<br>Richardson`                              | 2003 |
| Ecommerce    | Angel Herrero<br>Crespo, Ignacio<br>Rodriguez del<br>Bosque | 2008 |
| Tourism      | Julie Anne Lee,<br>Geoffrey Soutar                          | 2010 |

## RESEARCH GAP

In the table below we characterize tpb used in several other sectors.

### Table 1: Research Gap

TPB has been used in several contexts but not in the basis of nurses stress in private or public care(in contrast)

## Data Collection

A questionnaire depending upon (See Kwong, 2003) was constructed and distributed to nurses in hospitals of tamil nadu, surveys around 750 were administered through person, post and mail. After a stipulated period all the filled in forms were collected out of which 680 were taken for analysis.

## RESEARCH METHODOLOGY

### Content Validity

Based on the validated research, all of the measurement items were adopted. Characterization of items like attitude, subjective norms, perceived behavioral control, and intention to work was validated.

## Internal Consistency Reliability

The construct reliability was investigated by Cronbach's alpha based on 680 responses from the survey. Thus, the obtained alpha values ranging from 0.78 to 0.84 were above the acceptable threshold (0.70).

## Construct Validity

The construct validity was evaluated by examining the factor loadings within the constructs by confirmatory factor analysis (CFA) and the correlation between constructs.

Convergent validity was checked by the factor loading values. No items were dropped due to the factor analysis. The results of the measurement assessment, such as number of the item, mean, S.D., Cronbach  $\alpha$ , and convergent and discriminant validity, are shown below

Table 2: Discriminant validity

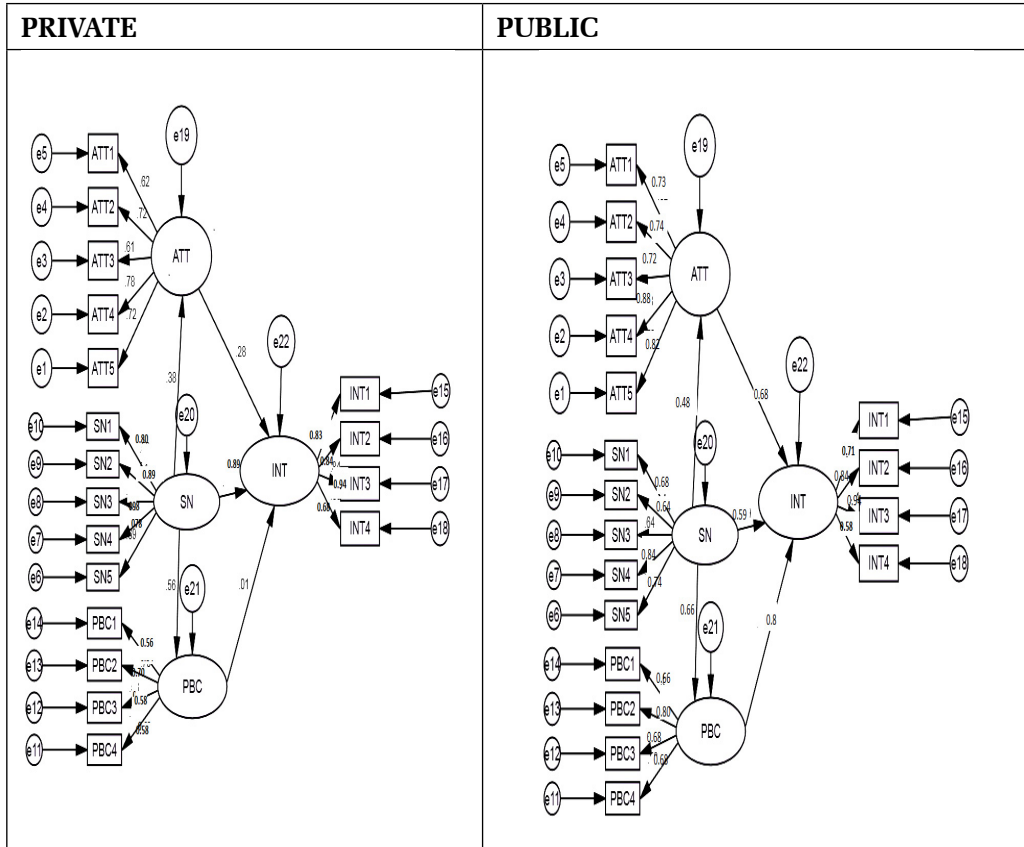
|     | ATT          | SN          | PBC         | INT         |
|-----|--------------|-------------|-------------|-------------|
| ATT | <b>0.673</b> |             |             |             |
| SN  | 0.35         | <b>0.64</b> |             |             |
| PBC | 0.32         | 0.55        | <b>0.61</b> |             |
| INT | 0.46         | 0.4         | 0.39        | <b>0.75</b> |

Convergent validity can be established by the AVE (Average Variance Extracted) and it should be above 0.5. The convergent validity was checked with factor loading values. No items were dropped. Discriminant validity can be established by comparing the square root of AVE with its corresponding construct correlation values. The construct correlation values should be less than the Square root of the AVE values (Fornell and Larcker, 1981).

**ANALYSIS**

We analyse with the difference between Private and Public hospital nurses with Structural Equation Modelling

**Table 3: Differences between private and public nurses taking model with extended paths**



**Table 4: Construct Values**

|     | PRIVATE | PUBLIC |
|-----|---------|--------|
| AT1 | 0.62    | 0.73   |
| AT2 | 0.72    | 0.74   |
| AT3 | 0.61    | 0.72   |
| AT4 | 0.68    | 0.88   |
| AT5 | 0.72    | 0.72   |
| SN1 | 0.80    | 0.68   |
| SN2 | 0.89    | 0.64   |
| SN3 | 0.98    | 0.64   |
| SN4 | 0.78    | 0.84   |

|      |      |      |
|------|------|------|
| SN5  | 0.69 | 0.74 |
| PBC1 | 0.56 | 0.66 |
| PBC2 | 0.70 | 0.80 |
| PBC3 | 0.58 | 0.68 |
| PBC4 | 0.58 | 0.68 |
| INT1 | 0.71 | 0.83 |
| INT2 | 0.78 | 0.84 |
| INT3 | 0.84 | 0.94 |
| INT4 | 0.58 | 0.68 |

|         | Private | Public |
|---------|---------|--------|
| AT1     | 0.62    | 0.73   |
| AT2     | 0.72    | 0.74   |
| AT3     | 0.61    | 0.72   |
| AT4     | 0.68    | 0.88   |
| AT5     | 0.72    | 0.72   |
| AVERAGE | 0.67    | 0.75   |

**Table 4: Attitude construct values**

Attitude of working that is feeling the work is beneficial, useful is more in public than private

|         | Private | Public |
|---------|---------|--------|
| SN1     | 0.80    | 0.68   |
| SN2     | 0.89    | 0.64   |
| SN3     | 0.98    | 0.64   |
| SN4     | 0.78    | 0.84   |
| SN5     | 0.69    | 0.74   |
| AVERAGE | 0.828   | 0.708  |

**Table 5: Subject norms effect on nurses.**

Social pressure high in private care

|         | Private | Public |
|---------|---------|--------|
| PBC1    | 0.56    | 0.66   |
| PBC2    | 0.70    | 0.80   |
| PBC3    | 0.58    | 0.68   |
| PBC4    | 0.58    | 0.68   |
| AVERAGE | 0.605   | 0.705  |

**Table 6: PBC role on nurses.**

Perceived ease of difficulty is more in public than private.

**DISCUSSION AND CONCLUSION**

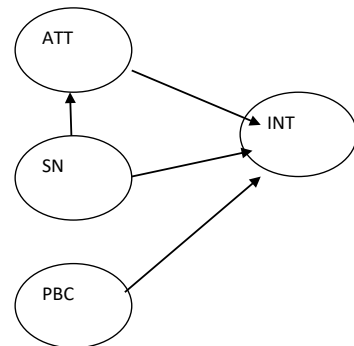
**Table 7: Intention To Work Effect On Nurses**

|       | Private | Public |
|-------|---------|--------|
| INT1  | 0.83    | 0.71   |
| INT2  | 0.84    | 0.78   |
| INT3  | 0.94    | 0.84   |
| INT4  | 0.68    | 0.58   |
| TOTAL | 0.8225  | 0.7275 |

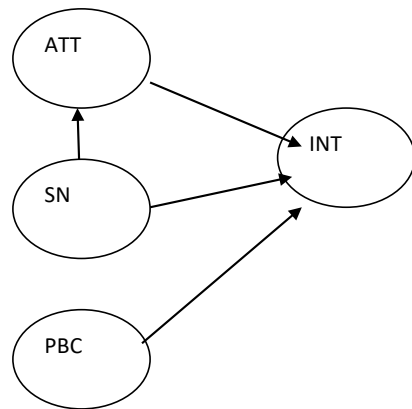
Intentions to work is found more in private. As the physicians and nurses in the private healthcare are forced they have more intention in working output is huge and they want to shine more in their career,while public sector have become “come what may” attitude.

**PATH CO-EFFECIENTS**

Let us first consider how the models are built.



**Figure 4: Seewon's causal path SN to Attitude.**



**Figure 5 :Other model with two causal path**

Here we consider two paths one from Subjective Norms to Intention and other we see Subjective Norms to Perceived Behavioral Control. Here below we see the path co-efficients.

**Table 8: Path coefficients – Private and Public**

| Paths     | Private | public |
|-----------|---------|--------|
| SN to ATT | 0.38    | 0.48   |
| SN to PBC | 0.56    | 0.66   |

The values of Public are more than private stating Subjective Norms influence Attitude more in private hospital nurses, and Subjective Norms play a vital role in perceived behavioral control more in private.

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