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## THE STRESS AND SUPPORT OF PSYCHOLOGICAL WELL-BEING II

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**Abstract:** In summary of article is formulation of problem and assignment of research activity goals in Czech Republic Prison Service.

In harmony with novelization of prison service employees' mental and psychosomatic health company preventive care programs new sources of possible mental diseases and eventual consequential psychosomatic difficulties are looked for. The goal is to predicate possible mental failures in stress and then innovate programs, tracking mental health strengthening and stress-related hardiness, to prevent failure in emotionally difficult situations. Risk factors leading to excessive work strain of prison service employees had to be analyzed firstly, followed by analysis of over-limit stress reactions concrete expression's character and intensity. Consecutively the relations and connections between prison service employees' stress rate and their personal and emotional protective and risk factors were sought out. Simultaneously the interceding variables (age, gender, marital status, educational attainment, length of service, type of workplace, localization of workplace, managerial post service) were taken into consideration.

Partial outcomes show statistically significant difference of neuroticism according to length of service in prison ( $p < 0,05$ ). Contrary to our supposition that respondents with 5 or less years of practice will express higher values we find out that higher values of neuroticism express persons with practice of 20 or more years. Higher values signal that these persons are emotionally unstable, reacting inappropriately to emotional inputs and requiring long time to clear away mental strain. Ground of their problems lies in stress that's incited by unclear, indefinite, irrational worry "what all could happen or what all could fail". Higher rigidity and minor ability to creatively solve actual problem situations are other complications. Compared to people with lower values of neuroticism these persons show higher frequency of negative emotions in relationships. They often suffer from sleeplessness and psychosomatic problems. During research we find out that these facts about persons with higher rates of neuroticism are in contradiction with findings about them acquired by Stress Profile and 8SQ questionnaires. That predicates about these persons attempt to look better and "prettify" their responses.

The most expressive predictor of stress situations handling in our research is high level of mental hardiness that correlates ( $p < 0,05$ ) with all tracked scales (see Table 3). Higher rate of emotional stability as another outstanding protective factor results also from Table 3. Contrary to emotionally unstable persons, respondents with higher rates of emotional stability along with lower rates of emotional exhaustion reach simultaneously significantly higher values in mental hardiness questionnaire. They also express higher rates of life well-being, don't exhibit psychic strains and worries and better resist to emotional stressors. Their personal satisfaction is related to their social support and ability to react to stress by adaptive coping strategies. Interesting finding is statistically significant relation between higher rate of externality, nursed worry and higher rate of stress in emotionally unstable persons in comparison to emotionally stable or internally-based people. This fact needs to be verified by further research.

**Key words:** Psychological hardiness – stress resilience, personality-related and emotional protective factors, frustration tolerance, quality of life, makers of psychological failure under stress, maladaptive and adaptive strategies of coping with stressful circumstances

The purpose of this article is to inform expert public about first results of a research taken in facilities belonging to the Prison Service of the Czech Republic during 2008. In its content, the article is linked to preliminary methodical notice, published in SFFBU (P-12, 2008).

Following the updated programmes of intramural preventive care regarding mental and psychosomatic well-being of employees in prison service, various studies are undertaken to inquiry into the sources that can result in mental disorders and possible psychosomatic hardships. Their aim is to predicate mental failures, to strengthen hardiness under stress, and consequently to continue updating the programmes themselves.

It comes to be evident that excessive stress reactions and their intensity are not merely proportional to the level of personality-related and emotional protective factors, and to the intensity of stressing circumstances in prison service in general. It is neither possible to clarify concrete mental and psychosomatic impacts of psychological stress, nor their intensity with mere reference to intervening variables (age, gender, marital status, level of education, years of practice, type of work and its location, leading position) in case we only take them into account as isolated factors, not as factors embedded in entire human existence. After all, primary groups are to be taken into account if we want to know one's quality of life.

During the first phase, we aimed at those employees who are in everyday direct contact with convicts. It means that especially tutors, guards and selected specialists were included. Tutor is the member of the team whose basic goals are complex pedagogical, educational, diagnostic and preventive activities in the context of resocialization. In addition, he is supposed to deal permanently with everyday demands made by convicts, and to do so in close contact with them. The same applies for the guards who are in charge of daily routine of convicts.

Employees in prison service are thus exposed to never-ending pressure on the part of convicts who do not hesitate to impose even quite excessive requirements and strive to make them met. Another stressing factor for employees arises also from the fact that their sincere effort to enhance convicts' quality of life is often confronted with distrust and sometimes even boycotted. Goodwill is often abused by imprisoned persons as an opportunity for trickery, misconduct and crossing the rules. It is a kind of paradox, then, that refusals to meet prisoners' demands leads to collective "complaining campaigns" against the staff. These objectively unfounded grievances have to be investigated not only by respective organs of prison service but also by authorities of prosecution, by ombudsman and others.

Another potential source of stressors is raising percentage of highly educated and qualified people in the imprisoned population, sentenced mostly for crimes against property. They are capable of leading particularly sophisticated "complaining campaigns." This new tendency brings about urgent need for change in employees' education and enhancing their qualification.

Stress-breeding, as we identify them, are also unclear powers and responsibilities of the prison personnel. They may cause feelings of helplessness in dealing with convicts engaged in misconduct. Further, we must mention inadequate evaluation from superiors together with their inactivity when support is needed in times of crisis, persistent personal security risks, insufficient information on changes in legal norms, applicability of violent means, lack of programmes aimed at family members, competing expectations in spheres of work and family, respectively, rather limited offer of regeneration programmes and low number of opportunities to career growth. We should count as well other risk factors, such as never-ending effort of the convicts to use forbidden means of communication, and leaking of these problems to mass media, inability to make all prisoners work, insufficient accommodation capacity in the penitentiaries, prison breaks etc.

All the above-mentioned requirements bring about psychological problems, namely increased inclination to fatigue, exhaustion, mental strains and hypersensitiveness, increased impulsiveness in dealing with other people, conflicts, fear of failure and of future, depressions, deterioration in quality of life and propensity to burnout. Among psychosomatic problems, we find cardiovascular, gastrointestinal disorders and arthritis. Neuropsychological problems are to be mentioned, too, including headaches, insomnia etc.

On the other hand, despite all of that, persons do exist that are not likely suffer from burnout and suffer no worries about possible failure. They feel that their ability to influence results of their work is not threatened etc. Those individuals are endowed with resistance and they are capable to keep high cognitive and problem-solving performance even under stress.

Psychological resistance as a scientific notion still lacks precisely established meaning. Researchers tend to stuff it with meanings that are influenced more by their particular field of interest than by substantial content. Majority of them, however, agree on necessity to study certain aspects of the phenomenon such as adaptive capacity, level of frustration tolerance, emotional hardiness, problem-solving performance also in relation to long-term stressful circumstances (thus representing functional interconnections between inner and outer variables). As we cannot review all the diverse theoretical groundings of resilience here, we just mention helpful introductory information contained in: V. Kebza (2005) *Psychosociální determinanty zdraví [Psycho-social Determinants of Health]*. Prague: Academia. Kebza suggests to broaden the scope of research in the context of psychological hardiness by using protective determinants like Sense of Coherence (A. Antonovsky), conception of hardiness as developed by S. Kobas, Optimal Experience concept (M. Csikszentmihalyi), Locus of Control Concept (J. Rotter), concept of self-efficacy (A. Bandura, belief in one's ability to perform well in order to attain goals), measure of optimism by M. Seligman, notion of psycho-social resilience by D. Strumpfer.

Taking into account length of practice in prison service, there are statistically significant (on 0,05 level) variations in values of scale of neuroticism. Persons

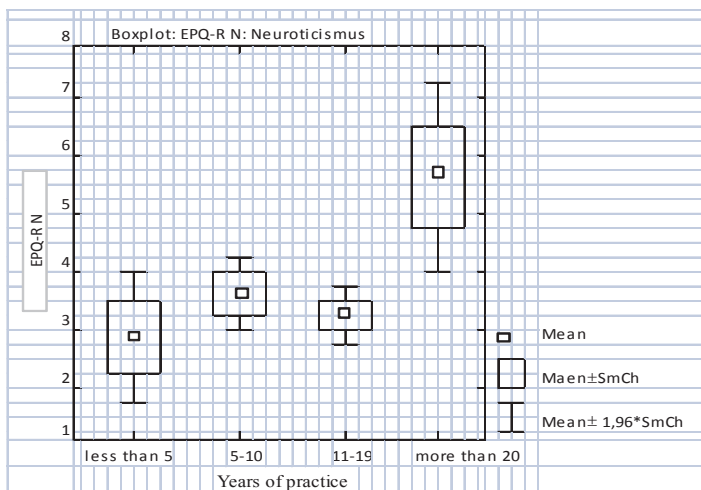
involved in prison service for period exceeding 20 years are likely to perform significantly higher values on scale of neuroticism (see Graph 1: Average values of neuroticism according to categories sorted by the length of practice in prison service). LSD test confirms the results are statistically significant (see Table 2: LSD-test for EPQ-R variable neuroticism and length of practice). Other scales show no significant variations.

### Research project realization (research project see SPFFBU, P-12)

Research itself was realized by 10 university students that tested 45 hypotheses. Research report in length will be published on 2009 IMS collection. Test battery included standard questionnaires EPQ-R and IVE, d2 Test of attention, Gordon Personal Profile Inventory (GPPI), PVS (S. Kobasa), DUSIN questionnaire, Logo test, SOC (A. Antonovsky), Social support questionnaire (MOS), ICL (Leary), SUPOS 8 (O. Mikšík), LOC (J. Rotter), SVF 78 questionnaire (W. Janek, G. Erdmannová), Stress Profile questionnaire, IMB questionnaire (Ch. Maslachová) and 8SQ questionnaire (J.P. Curran, R.B. Cattell).

### Research sample

There were 188 respondents included into research project. 14 respondents were excluded who had failed to fill in all items in batteries. Two-thirds of respondents were women, one third were males. 25 percents of respondents have higher or university education, the rest of them high school education. One third of respondents work as guards other third as tutors last third as specialists (i.e. social workers, psychologists).



Graph 1. Years of practice by mean values on neuroticism scale.

### Selected research outcomes and its preliminary interpretation

In light of length of service in prison we find out statistically significant difference on neuroticism scale ( $p < 0,05$ ). People working in prison service for more than 20 years performed significantly higher values of neuroticism in comparison to other person (see Graph 1; Table 1). LSD test confirm this significance (see Table 2). No significant differences appear in other scales.

Table 1. Cross tabulation: years of practice and scale of neuroticism.

Table of descriptive statistics (Human and stress)			
Minimum N: 167			
Years of practice (categorized)	EPQ-R N průměr	EPQ-R N	EPQ-R N Sm.odch.
less than 5	2,809524	21	2,676174
5 through 10	3,603448	58	2,803129
11 through 19	3,313433	67	2,438386
more than 20	5,571429	21	3,762598
All categories	3,634731	167	2,869363

Table 2. LSD-test of EPQ-R variable: neuroticism and years of practice.

Years of practice (categorized)	LSD-test; EPQ-R N variable (Human and stress)			
	Marked differences are significant on ,05 level			
	{1} M=2,8095	{2} M=3,6034	{3} M=3,3134	{4} M=5,5714
less than 5 {1}		0,265093	0,470838	0,001597
5 through 10 {2}	0,265093		0,562670	0,006220
11 through 19 {3}	0,470838	0,562670		0,001455
more than 20 {4}	0,001597	0,006220	0,001455	

The most expressive predictor of stress situations handling seems to be the level of mental hardness that significantly correlates ( $p < 0,05$ ) with all tracked scales (see Table 3:...).

Another outstanding protective factor is higher rate of emotional stability. Markedly major correlations express emotional stability measured by EPQ-R and GPPI.

Persons more aware of their potency are less governed by emotional exhaustion in intensity and frequency. They also express higher level of well-being, don't exhibit signs of worry and bear up against leverage of stress factors.

Social support demonstrates statistically significant relation especially with personal satisfaction frequency. Social support perceived as love can defend from intensity of feelings of depersonalization. Adaptive coping strategies correlate to personal satisfaction the same way as social support. Other relations were not detected.

Higher rate of neuroticism can be related to major intensity of feelings of depersonalization and minor intensity of personal satisfaction.

In light of Rotter's "Locus of Control" there is statistically significant relation between higher rate of externality and felt worry and stress abreast with rela-

tion between higher rate of internality and felling of well-being frequency, minor sheepishness and stress.

Table 3. Correlations of personality-related and emotional factors with impact of stress.

Marked correlations are significant on ,05 level, N=125 (Entire cases missing in ChD).

	MBI-C-EE	MBI-C-DP	MBI-C-PA	MBI-I-EE	MBI-I-DP	MBI-I-PA	8SQ-Anxieta	8SQ-Stres	D2-1_CV	SP-str*
S-EF	-0,29	-0,14	0,41	-0,27	-0,12	0,38	-0,22	-0,17	0,08	-0,18
GOR-A	-0,13	-0,15	0,19	-0,19	-0,02	0,19	-0,07	0,07	0,10	-0,14
GOR-E	-0,19	-0,15	0,05	-0,17	-0,12	0,01	-0,33	-0,31	0,07	-0,15
GOR-SE	-0,17	-0,24	0,24	-0,19	-0,18	0,18	-0,20	-0,16	0,10	-0,15
SVF POZ	0,03	0,11	0,26	-0,01	0,03	0,26	0,02	0,09	-0,02	-0,02
EPQ-R P	0,01	0,09	-0,09	-0,09	0,21	-0,18	0,12	0,13	0,04	-0,03
EPQ-R E	-0,17	-0,28	0,16	-0,19	-0,19	0,20	-0,06	0,07	0,14	-0,21
EPQ-R N	0,42	0,16	-0,20	0,46	0,10	-0,16	0,32	0,32	-0,14	0,29
PVS-HA	-0,40	-0,24	0,36	-0,38	-0,19	0,47	-0,34	-0,31	0,04	-0,19
MOS-H	-0,02	-0,02	0,10	-0,01	-0,06	0,01	0,03	-0,05	0,01	-0,05
MOS-L	-0,05	-0,06	0,23	-0,13	-0,18	0,09	-0,14	-0,17	0,04	-0,08
MOS-PSI	-0,06	-0,03	0,25	-0,11	-0,12	0,14	-0,07	-0,10	0,03	-0,08
MOS-E/I	-0,08	-0,07	0,23	-0,13	-0,14	0,12	0,02	-0,00	0,00	0,01
LOC – Exter	0,03	0,02	-0,04	0,02	0,03	0,01	0,28	0,19	0,14	0,01
LOC – Inter	-0,11	-0,00	0,19	-0,15	-0,12	0,15	-0,26	-0,19	-0,11	-0,25

Though expected relations were not fully demonstrated, we can claim that stress and its impacts on human's psyche is better handled chiefly by persons with higher rate of mental hardiness, emotionally stable, self-confident, with dominance of extraversion and internalized sense of control of events.

Positive coping strategies and social support are connected mainly with feeling of well-being that is undoubtedly important source of energy for handling of stress situations.

For interest we correlate single scales of MBI questionnaire. As we can see in Table 4 well-being is in negative relation to emotional exhaustion and feelings of depersonalization.

Table 4. Correlations of intensity and frequency of personal wellbeing with intensity and frequency of personal exhaustion and depersonalization (MBI).

Marked correlations are significant on ,05 level N=162 (Entire cases missing ChD).

	MBI-C-EE	MBI-C-DP	MBI-I-EE	MBI-I-DP	8SQ-Anxieta	8SQ-Stres	SP-str*
MBI-C-PA	-0,04	-0,01	-0,18	-0,21	-0,01	0,00	0,00
MBI-I-PA	-0,3	-0,31	-0,16	-0,18	-0,08	-0,06	-0,11

For comparison of stress and difficult situations handling rates between males and females. We used multifactor analysis ANOVA. No significant differences between genders.

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## STRES A PODPORA DUŠEVNÍHO ZDRAVÍ II.

V obsahu odborného článku je formulace problému a stanovení cíle výzkumné aktivity ve Vězeňské službě ČR. V souladu s novelizací programů věnovaných závodní preventivní péči o psychické a o psycho-somatické zdraví zaměstnanců vězeňské služby se hledají zdroje jejich možných psychických poruch a eventuálních následných psychosomatických obtíží. Cílem je predikovat možná psychická selhání v zátěži a následně pak inovovat programy, sledující posílení psychického zdraví, posílení nezdolnosti v zátěži tak, aby nedocházelo k selhání v emočně vypjatých situacích. Proto musely být nejprve analyzovány rizikové faktory, vedoucí k nadměrné pracovní zatíženosti zaměstnanců vězeňské služby, a poté charakter a intenzita konkrétních projevů nadhraničních stresových reakcí. V následující fázi výzkumu se hledaly vztahy a souvislosti mezi mírou stresovanosti zaměstnanců vězeňské služby a jejich osobnostními a emočními protektivními a rizikovými faktory. Současně se braly do úvahy intervenující proměnné (věk, pohlaví, stav, výše dosaženého vzdělání, délka praxe, typ pracoviště, lokalizace pracoviště, výkon služby ve vedoucí funkci).

Dílčí výsledky ukazují, že z hlediska délky praxe ve vězeňství se prokázal statisticky významný rozdíl na 5% hladině statistické významnosti na škále neuroticismu. Oproti předpokladům, že vyšší hodnoty budou vykazovat lidé s praxí do pěti let, se ukázalo, že vysokých hodnot dosahovali lidé s praxí dvacet a více let. Vyšší hodnoty signalizují, že se jedná o lidi do určité míry emočně labilní, nepřiměřeně reagující na emociogenní podněty, potřebující delší dobu na odeznění psychického napětí. Jejich problém spočívá především v tom, že toto psychické napětí je provokováno nejasnými, neurčitými, iracionálními obavami, „co všechno by se mohlo stát nebo co všechno by se nemuselo podařit“. Další komplikaci jim působí vyšší míra rigidity a menší schopnost tvořivě řešit aktuální problémové situace. Oproti lidem s nižšími hodnotami na škále neuroticismu vykazují ve vztazích vyšší frekvenci negativních emocí. Mnohdy trpí nespavostí a psychosomatickými problémy. V průběhu výzkumu jsme zjistili, že výše uvedená fakta o některých lidech s vyšší mírou neuroticismu jsou v rozporu s daty, získanými o těchto lidech například dotazníkem Stress Profile a dotazníkem 8SQ. Vypovídá to o snaze těchto lidí jevit se v lepším světle a „přikrašlovat“ svoje odpovědi.

Nejvýznamnějším prediktorem zvládnání zátěžových situací se v naší výzkumné skupině jeví vysoká úroveň psychické nezdolnosti, která na 5% hladině statistické významnosti koreluje se všemi sledovanými škálami (viz tab.3). Z tabulky 3 také vyplývá, že dalším výrazným protektivním faktorem je vyšší míra emoční stability. Ti lidé, u nichž jsme výzkumem zjistili vyšší míru emoční stability a tím i nižší míru emočního vyčerpání, současně dosahovali statisticky významně vyšších hodnot v dotazníku psychické nezdolnosti oproti lidem emočně labilním. Tito lidé současně vykazují vyšší míru osobního pohody v životě, neprojevují psychické napětí a úzkost a lépe odolávají působení emociogenních stresorů. Jejich osobní uspokojení úzce souvisí i s jejich sociální oporou a se schopností v zátěži reagovat adaptivními copingovými strategiemi. Zajímavým zjištěním je

statisticky významný vztah mezi vyšší mírou externality, prožívanou úzkostí a vyšší mírou stresovanosti u lidí emočně labilních oproti lidem s vyšší mírou internality. Tuto skutečnost je nutné ještě jednou výzkumně ověřit.

**Klíčová slova:** psychická odolnost-resilience vůči stresu, osobnostní a emocionální protektivní faktory, frustrační tolerance, kvalita života, makery psychického selhání v zátěži, maladaptivní a adaptivní strategie zvládnání zátěžových situací.