UNIVERSITI TEKNOLOGI MARA

THE RELATIONSHIP BETWEEN PSYCHOSOCIAL RISK AND THE DEVELOPMENT OF WMSD AMONG NURSE IN KUALA KRAI

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ABSTRACT

Work related musculoskeletal disorders (WMSD) are a group of uncomfortable symptoms and involve several parts of the body including muscles, tendons, joints and nerves. Some examples of common musculoskeletal disorders are Carpal Tunnel Syndrome, Tendonitis, Thoracic Outlet Syndrome, and Tension Neck Syndrome. According to DOSH (2016), there are total of 448 WMSD cases were reported to SOCSO in 2012 and the numbers are increasing by year. Psychosocial factors in the workplace mean interactions between the work environment, type of work, organizational conditions and capacity of employees, needs, culture and additional personal job considerations that can affect their health, work performance and employment satisfaction. According to Ashiyat K et al., (2019) on their study in investigated the association between work-related musculoskeletal disorders (WMSDs) and work ability among nurses in Southwest Nigeria, the nursing population in South-west Nigeria constitutes about 33% of the hospital workforce, and nurses are at a high risk, accounting for 60% of reported occupational injuries. It is estimated that 12% of nurses leave the profession annually, and 52% complain of chronic lower back pain. The combination of high demands and low decision latitude, as well as high efforts and low rewards are prospective risk factors for common mental disorders among nurses. This suggests that the psychosocial work environment is important for mental health. Therefore, the study between psychosocial aspects of mental demand among nurses at work that lead to WMSD was carried out. The study was carried out Kuala Krai, Kelantan as it is one of the largest district in Kelantan. Apparently, there is a correlation – $p < 0.050$ ($r = -0.227$, $p = 0.017$), between the psychosocial stress level and WMSD symptoms. Therefore, further recommendations were directed for the respective nurses and future researchers.

Keywords: *Work-related Musculoskeletal (WMSD), Psychosocial, Nurses, Health Care Workers (HCW), Hospital workforce.*

CHAPTER 1

INTRODUCTION

1.1   BACKGROUND OF STUDY

Musculoskeletal disorders (MSDs) are described as disorders of the muscles, nerves, tendons, ligaments, joints, cartilage, or spinal discs. The term "work-related musculoskeletal disorders" (WMSDs) refers to MSDs that are made worse or longer lasting by work conditions. (Rahman, M., Chowdhury et al, 2017). Stress is a condition in which a person experiences instability either physically or mentally and it is related to our way of life or "lifestyle" (Wan Ermiyati, 2016).

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Frequently, repetitive work activities or activities with awkward postures can cause this disorder which may be painful while working or resting. Muscle, tendon and joint injuries caused by overuse and injuries that occur over time are also one of the contributing factors of this musculoskeletal disorder. Almost all jobs require the use of hands. That is why most WMSD affects the hands, wrists, elbows, neck, and shoulders. Excessive foot use while working can cause WMSD in the hips, thighs, ankles and feet.

The predictors for the risk of developing MSDs can be divided into individual (Ekman et al., 2000, Spyropoulos et al., 2007, Johnston et al., 2008), ergonomic (Demure et al., 2000) (Palmer et al., 2001) and psychosocial factors (Faucett and Rempel, 1994). In office users, the risk of developing MSDs is higher among users who have a high work