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Research Article



Distance learning and its impact on occupational stress among hospital workers (Field study at the specialized hospital for mothers and children - El OUED)

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| ARTICLE INFO | ABSTRACT |
|---|--|
| Received: 01-05-2024 Accepted: 01-10-2024 Published: 12-11-2024 | The current study aims to try to reveal the effect of distance training on professional stress among a sample of hospital workers of the specialized hospital institution for mothers and children Ben Nasser Bashir - El Oued. The descriptive exploratory approach was used, where we examined a sample of (70) workers from doctors and nurses. The distance training scale and the professional stress scale were used. The study found that there is a statistically significant effect between distance training and professional stress among workers of the specialized hospital for mothers and children Ben Nasser Bashir - El Oued at the significance level (0.05) |
| | Keywords : Distance training, professional stress. |

Introduction:

Distance training is one of the training methods that the institution relies on in order to develop the performance of workers and keep pace with developments in all fields today. In light of the technological development that the world is witnessing, it has become the duty of institutions to exploit it in what raises their performance and develops their human resources. Considering that this resource is part of the organizational environment, it is exposed to various pressures, including professional pressure, which is widely spread in the field of work.

-The problem: The business world is currently witnessing a great development in various fields, especially in the field of information technology, as the path of institutions has become to search for a mechanism for obtaining information and using it in the fields of learning, training, education, and others, in conjunction with the interest of studies and literature and their emphasis on the importance of the human element and its vital role in performing all functions and its reflection on the performance of any institution, and in adaptation to these developments, new terms have emerged with this use, such as e-learning and training, which means employing Internet technology in teaching and training individuals remotely using the World Wide Web, while overcoming the restrictions of time and place, which makes their progress in learning and training, and it can be said that these innovative applications in providing information have contributed to transferring technology in the field of education and training to a level in which the four applications are integrated; educational technology, information technology, communication technology, and digital technology (Ben Habib et al., 2022, p. 878). The International Labor Organization confirmed that training and continuous learning are essential for developing human resources and raising their efficiency, but they are not sufficient to achieve sustainable economic and social development in countries. Therefore, human resources training and development policies must be compatible with economic and social policies and plans and the requirements of the integrated labor market (International Labor Office, 2004, p. 3). Training and education are also among the most prominent features of the modern era, those massive and continuous changes in human knowledge and the resulting continuous changes in work systems, which necessitates the need to redevelop the workforce to confront these changes, absorb them and adapt to their requirements (Zuhran, 2022, p. 161). Institutions were forced to develop their training and education systems, so it became imperative for them to move away from traditional rigid molds, and to think of new patterns and training and education methods that are a response to the rapid changes. This is what helped the emergence of distance training as a modern trend in training to keep pace with the era of the information revolution and make training and education processes a continuous process that is not restricted by time and place, and takes place in an interactive environment rich in modern technological applications that are characterized by With flexibility, efficiency and design (Abdel Gawad, 2024, p311). Distance learning provides opportunities to train the largest number of trainees, and Al-Hababi (2013) indicated that the distance learning and training experience is effective and achieves training objectives with flexibility that suits people and the nature of their work (Al-Qarni & Al-Qahtani 2021, p566)

Distance education is a technology designed to provide training and learning solutions using technology. Chen (2008) defined it as the combination of technology and learning. This type of education and training is provided on a computer or other electronic device. According to Adkins (2011), the cost of distance education and training services for companies in the United States is estimated at \$6.8 billion, and the 2015 expenditures reached \$7.1 billion. Adkins (2011) confirms that the overall growth rate of demand for distance education is on an upward trend after analyzing the expenditures of small, medium and large companies. It is mentioned that the global nature of business today has caused many companies to rely on the process of distance education and training as a future due to its ability to reach large groups of people in different regions or countries, which reduces costs, reduces travel costs, and disseminates information efficiently. With one click on the Internet, it can be done anywhere. According to Clark and Hermens (2001), distance education has become an alternative to classical corporate education due to technological development, dissatisfaction with traditional education methods, and its meeting of educational and training needs and organizational strategies (Ellis & Kuznia, 2014). Distance learning is one of the organizational strategies adopted by the Ministry of Health in recent years, as workers in hospital institutions deal with many medical cases daily and use many devices in providing health care, which exposes them to the risk of these machines or they are vulnerable to the transmission of infectious diseases to them (Abdul Moez, 2008, p. 2). Such environments are also known for the continuous development of machines, diseases, medicines, etc., which imposed stressful conditions on workers in this sector that increase day after day. This was confirmed by the study of Al-Nasrawi (2020) that doctors suffer from a very high level of professional stress, as well as the study of "Bjork and Richard" on work stress associated with practicing the medical profession as a window through which the forces causing stress can be identified, whether these forces are related to the nature of the profession or the nature of the individual's life, as this study included a sample of (2087) doctors in Canada, in which a questionnaire tool was used that includes several measures, including a measure of sources of work stress, and a general measure of stress, and it was concluded that doctors suffer from a very high level of professional stress, and that there are a number of factors that cause stress for them (Al-Ahmadi ,2002: 68), and this is what prompted us through this study to identify the effect of distance education on professional stress among hospital workers - (a field study at the specialized hospital institution for mothers and children -El Oued)

-Study hypotheses:

The study hypotheses came as follows:

-There is a statistically significant effect between distance education and professional stress among workers in the specialized hospital institution for mothers and children – El Oued at a significance level of (0.05)

-Study objectives:

The main objective of the study is to answer the research problems, represented in trying to reveal the effect of distance education on professional stress among hospital workers in the specialized hospital institution for mothers and children –El Oued.

-Importance of the study:

The major importance of this study is to identify the effect of distance education on professional stress among hospital workers. The importance of this study also comes from the fact that it deals with health sector workers, doctors, psychologists, nurses, and administrators, who are considered the most important component of the health sector. The hospital institution is the one that bears the responsibility of health care for patients and providing the requirements of comfort and protection by providing appropriate working conditions and developing the gains of its employees, as this requires developing strategies to get rid of professional stress and develop the professional performance aspect.

Basic concepts of the study:

This stage is considered one of the research stages, as it is through it that the most important variables of the subject are clarified and defined and the connotations and meanings of important terms that help in understanding the subject are understood.

Distance training:

Before addressing the concept of distance training, training must be defined in general, as training is defined as the process of developing the skills necessary to develop activities, as it includes all means used to improve skills, and it also relates to all activities that aim to spread knowledge within the organization (Martory & Du Montcel, 1988).

The concept of distance training is still in the development phase, is unstable, and is subject to continuous modification, due to its association with modern technologies that grow and develop day after day, and it is also associated with a changing virtual world. Some believe that the origins of this term go back to the 1980s, in the same time frame as the emergence of other types of online training, distance education is defined as "a process that uses the Internet or intranet to provide an individual with the necessary knowledge in various selected subjects or a selected specialty with the aim of raising the academic level or achieving qualification using computers, audio, video, multimedia, e-books, email, chat and discussion groups". Others see it as "Internet-based training that facilitates cooperation between trainers and trainees to improve education". Others see the term distance education as referring to "the use of multimedia technologies and the Internet to improve the quality of education by facilitating access to media and services as well as remote exchange and cooperation. It is also defined as "a training process that aims to deliver training content through any modern means of communication such as computers and the Internet to overcome geographical distances between the trainer and the trainee; It is a training system between trainees and trainers who are separated in space and time to enable individuals to train and overcome the conditions of time and space (Ben Amara & Atia, 2016)

Distance training is defined as a distance training process through the use of the Internet and various information networks, which gives individuals the required knowledge on various topics (Wiradendi Wolor et al, 2020)

The operational concept of distance training:

Distance training refers to training based on the use of technology techniques in the process of teaching information and knowledge required to accomplish the work, without the need for the direct presence of the trainer and trainee, and without physical and spatial barriers, as it is measured through the grades obtained by health sector workers of the specialized hospital institution for mothers and children in the state of El Oued for their responses to the paragraphs of the distance training measurement tool used in the study by Enas Muhammad Ibrahim Al-Shiti (2023), through its following dimensions:

Distance training infrastructure: This means the availability of the capabilities required to implement distance training and training with the required efficiency and effectiveness.

Modernity of distance learning methods: This refers to the extent to which distance learning methods are compatible with what is available.

Adaptiveness of training content: This refers to the extent to which distance learning content is compatible with their requirements and specializations.

Efficiency of trainers: This refers to the extent to which trainers are able to master the training content provided remotely.

Professional stress:

Roland Reggio defines professional stress as pressure in general, which is nothing but physiological, emotional and psychological reactions to incidents or specific things that threaten the individual in the work environment. Physiological reactions include signs of over-arousal such as rapid breathing, heart rate, increased blood pressure, and profuse sweating. It seems that these physiological responses help the individual confront or survive potential dangers (Farag and Ragheb, 2010, p. 9)

The operational concept of occupational stress:

In the current study, occupational stress refers to the extent to which hospital workers are exposed to work pressure as a result of psychological burden, level of decision-making, and the level of social support they receive in their work environment. It is the degree that hospital workers obtain (high, low) on the Kresak scale in its three dimensions: psychological burden, level of decision-making, and social support. These dimensions can be defined as follows:

Psychological burden dimension: includes the amount of work required by the job and its speed, along with the mental conditions that must be met, as well as time constraints related to the work, the possibility of division, the conflicting demands that the employee receives, etc., all of which represent the psychological burden at work.

Decision-making independence dimension: This dimension expresses the worker's ability to make decisions in managing the work, choosing how to practice his job, and using and developing his abilities.

After social support: This element intervenes as a stress reliever at work, i.e. a softener for the stressful atmosphere, as it is represented in the technical and emotional support from officials and colleagues. Field procedures of the study:

Study method: This method is embodied in the study of the analysis of the correlation between the variables, as the correlation study describes the degree of the relationship between the variables in a quantitative description, because the purpose of collecting data and determining the degree to which the quantitative variables are related to each other, and the degree of the relationship between the variables is expressed by the correlation coefficient. (Abu Alam, 2004, p. 231)

Study limits:

Spatial limits: The study was conducted at the specialized hospital institution for mothers and children, Ben Nasser Bashir, El Oued Governorate, with its different interests.

Time limits: The study was conducted in the period from 10/09/2023 to 11/11/2023.

Human boundaries: represented by doctors and nurses working in the specialized hospital institution for mothers and children, Ben Nasser Bashir, El Oued, with different interests.

Study sample:

The sample was selected randomly from doctors and nurses in the specialized hospital institution for mothers and children, Ben Nasser Bashir, El Oued, so that the opportunities were equal for all its members. (85) questionnaires were distributed, after which (75) questionnaires were retrieved, and then (05) questionnaires were cancelled due to incomplete answers by the sample members.

Sample characteristics:

The current study sample consisted of (70) employees and was distributed according to the following characteristics:

-In terms of gender:

Table No. (01): Distribution of the study sample according to gender variable.

| Sex | Repetitions | % |
|-----------|-------------|-----|
| male | 26 | 37 |
| feminine | 44 | 63 |
| the total | 70 | 100 |

Source: Prepared by researchers based on SPSS 22 outputs

We note from the table above, which shows the distribution of the study sample according to the gender variable, that the study sample members are mostly females, estimated at 44, representing 63%, followed by males, estimated at 26, representing 37%.

-In terms of profession:

Table No. (02): Distribution of the study sample according to the profession variable.

| Profession | Repetitions | % |
|------------------|-------------|-----|
| Doctors' Wire | 20 | 29 |
| Paramedical wire | 50 | 71 |
| the total | 70 | 100 |

Source: Prepared by researchers based on SPSS 22 outputs

We note from the table above, which shows the distribution of the study sample according to the profession variable, that the study sample members are mostly from the paramedical corps, estimated at 50, representing 71%, followed by the category of doctors, numbering 20, representing 29%.

- In terms of professional experience:

Table No. (03): Distribution of the study sample according to the variable of professional experience.

| Professional experience | Repetitions | % |
|-------------------------|-------------|-----|
| Less than 05 years | 7 | 10 |
| 05 to 10 years | 17 | 24 |
| More than 10 years | 46 | 66 |
| the total | 70 | 100 |

Source: Prepared by researchers based on SPSS 22 outputs

We notice from the table above, which shows the distribution of the study sample according to the variable of professional experience, that the study sample members are mostly from the category of more than 10 years, estimated at 46, representing 66%, followed by the category of 05 to 10 years, numbering 17, representing 24%, and in last place was the category of less than 05 years, numbering 07, representing 10%. * Study tools:

-Distance training questionnaire:

We relied on previous literature and studies to design and make a set of modifications to the questionnaire designed by Enas Muhammad Ibrahim Al-Shiti (2023), which includes (04) four dimensions, which are consistent with achieving the objectives of our current study, as it is distributed as follows:

The first dimension: The infrastructure for distance training and consists of (05) items distributed from number 01 to 05.

The second dimension: The modernity of distance training methods and consists of (04) items distributed from number o6 to 09.

The third dimension: Design of the distance training content and consists of (06) items distributed from number 10 to 15.

The fourth dimension: The efficiency of trainers and consists of (07) items distributed from number 16 to 22. We relied on the five-point Likert scale, which gives five responses to each statement of the questionnaire that determines their level of agreement with it, and the answers are given numerical weights that represent the degree of answering the statement, where The grades are in order (1.2.3.4.5).

-Psychometric properties of the study tool:

Validity and reliability were relied upon to calculate the psychometric properties of the study tool. The following is a detailed presentation of the calculation of each property in the scale.

Validity of the arbitrators:

To ensure the validity of the scale, we presented it in its initial form to (05) professors teaching in the Department of Social Sciences at Hama Lakhdar University in El Oued, in order to express their observations and point of view on the scale. In light of the opinions of the arbitrators, some phrases were reformulated to improve the study tool.

Validity of the internal consistency of the scale paragraphs:

Validity of the internal consistency of the scale paragraphs means "the extent to which all the questionnaire paragraphs are consistent with the axis to which they belong". We calculated the internal consistency by calculating the 'Pearson' correlation coefficients between each item of the dimension and the total score of the dimension itself.

Table No. (04) shows the internal consistency between the items and their dimensions.

| Significance level | Pearson coefficient | Items | Dimensions | Significance level | Pearson coefficient | Items | Dimensions |
|-----------------------|------------------------|-------|-----------------------|----------------------------|------------------------|-------|-------------------|
| | 0.458 | 6 | Modernity of distance | stance ng ods (0.01) | 0.452 | 1 | |
| (0.01) | 0.572 | 7 | | | 0.632 | 2 | Remote |
| (0.01) | 0.468 | 8 | learning | | 0.569 | 3 | training |
| | 0.712 | 9 | methods | | 0.348 | 4 | infrastructure |
| | 0.523 | 16 | | | 0.56 | 5 | |
| | 0.621 | 17 | Trainer efficiency | | 0.635 | 10 | |
| | 0.725 | 18 | | | 0.548 | 11 | Content Design |
| (0.01) | 0.511 | 19 | | | 0.557 | 12 | |
| | 0.535 | 20 | | | 0.428 | 13 | Remote |
| | 0.441 | 21 | | | 0.465 | 14 | Configuration |
| | 0.656 | 22 | | | 0.594 | 15 | |

Source: Prepared by researchers based on SPSS 22 outputs

We notice from the table above that shows the internal consistency between the items and their dimensions, where all the items were significant at the level (0.01), which indicates the existence of internal consistency for all items with their dimensions in the remote formation questionnaire.

Calculating the reliability of the scale

Internal consistency using the Cronbach's alpha method: The reliability of the scale was calculated using the Cronbach's alpha test, and the reliability coefficient of the scale reached (0.745), which is a high degree indicating the reliability of the scale.

Occupational Stress Questionnaire:

This questionnaire was designed by Robert Karsak (1979) as this measurement allows for the assessment of psychological health at work. The questionnaire includes twenty-six items distributed as follows:

Nine (9) statements related to psychological burden, nine (9) statements related to the dimension of stability in decision-making, and eight (8) statements related to the axis of social support. The items are distributed as follows:

Table No. (05): Distribution of items in the Krsak scale

| 140101101(00)/121011101110111011101110111101111011 | | | | | | | | | |
|--|---------------|-----------------------------|-----------|---------------------|--------------------------------|-----------------------------|--------------------|-----------------------------|------------------|
| After social support | | After settling the decision | | | After the psychological burden | | | | |
| Emotion support | | Profession technical s | | Skillsde velopme | Curren t use of | Position or margin of | predicta bility | intensit y and comple | Quantit y and |
| Collea gues | Offi cials | Colleagu es | Officials | nt skills | managem ent | bility | xity | speed | |
| 25/24 | /20 19 | 26/23 | 21/22 | 9/3/1 | 2/5/7 | 8/6/4 | 18/17/16 | 15/14/11 | 13/12/10 |

It was adapted to the Arab environment by researchers Maalom Laila (2014) in her study on "occupational stress and its relationship to psychological burnout, where the test reliability coefficient reached (0.84) which is statistically significant at (0.01). The researchers also studied the validity of the scale in its results using the self-validity method which reached (0.91). It can be said that the scale has met the conditions of stability and confidence in its results and the validity of its use in the current study.

Correction of the scale:

The respondent puts the mark (×) in one of the boxes that represents his feelings, and it comes in the form of four statements which are completely disagree, disagree, agree, completely agree, where these answers are corrected based on the Likert method, by giving a score from (01) to (04) degrees for each Answers are arranged in order, and in the end the result of each axis is calculated in the following way:

The result of the psychological burden axis is calculated in the following way:

$$Q_{10} + Q_{11} + Q_{12} + (5-Q_{13}) + Q_{14} + Q_{15} + Q_{16} + Q_{17} + Q_{18}$$

Calculating the result of the decision position axis is done in the following way: (4*Q4) + 4(5-Q6) + (4*Q8) + 2(5-Q2) + (2*Q5) + (2*Q7) + (2*Q1) + (2*Q3) + (2*Q9)

The result of the social support axis is calculated in the following way:

$$Q_{19} + Q_{20} + Q_{21} + Q_{22} + Q_{23} + Q_{24} + Q_{25} + Q_{26}$$

Table No. (06): Represents the levels of occupational stress.

| | | After the burden | psychological | | |
|--------------|--|-----------------------------------|------------------------------------|------------------------------------|--------------|
| | | Low if less than 20 degrees | High if it is more than 20 degrees | | |
| After making | High if it is more than 70 degrees | Relaxed work | Active work | High if it is more than 24 degrees | After social |
| the decision | Weak if less than 70 degrees | Negative action | Compressive work | Low if less than 24 degrees | support |

From the table above, we notice that the situation is very stressful when the result obtained in the psychological burden is higher than twenty (20) degrees, and the degree of the decision-making situation is less than seventy (70) degrees, and the weakness in social support is less than twenty-four (24) degrees, and the situation is in a state of relaxation if there is a weakness in the psychological burden and a high decision-making situation to practice the profession, and it is in a state of activity if there is a high psychological burden and a high decision-making situation, but the situation is negative if there is a decrease in the psychological burden and a weakness in the decision-making situation.

Statistical processing methods:

The computer was used to analyze the data and reach the results, and this required arranging the data and unloading it according to the computer system, then coding the basic variables, after which all the obtained degrees were entered into the computer memory, then starting the statistical processing using the program (22Spss v)

Presentation and discussion of the study results:

Results of the normal distribution test:

In order to verify the objectivity of the study results, the normal distribution test for the data was relied upon. The latter is used to determine whether the data is subject to normal distribution or not, which in turn affects the selection of the tests required to test the hypotheses. The following table summarizes the most important results.

Table No. (07): Test of normal distribution of data

| Shapiro-Wilk | | Study questionnaire | |
|--------------|---------|------------------------------|--|
| Sig | value Z | Study questionnaire | |
| 0.117 | 0.945 | The questionnaire as a whole | |

Source: Prepared by researchers based on SPSS 22 outputs

From the table above, we find the significance level of the study questionnaire (0.117) which is greater than (0.05) and therefore the data of the studied sample follow the normal distribution, and from this we conclude that the data of the study questionnaire are normally distributed, and therefore it is necessary to rely on parametric tests to answer the hypotheses.

Hypothesis Test Results

Hypothesis text: There is a statistically significant effect between distance education and professional stress among workers of the specialized hospital institution for mothers and children - El Oued at a significance level of (0.05)

Table No. (08): Summary of the simple linear correlation of the hypothesis.

| Anova (F) | Sig | Correlation coefficient (R) | Sig | Regression coefficient (B) | |
|-----------|------|-----------------------------|------|----------------------------|---------------------------|
| 07.253 | 0.02 | 0.310 | 0.02 | 0.568 | Independent variable (B1) |

Source: Prepared by researchers based on SPSS 22 outputs

From the table above, we find that the value of the regression coefficient reached (0.568B=) which is significant at the level of (0.05), and the correlation coefficient reached (R=0.310), which indicates that the independent variable (remote training) affects the dependent variable (professional pressures) according to the answers of the survey sample. The value of (F) was estimated to have reached (F=07.253), which is significant at the level of significance (0.05), and this confirms that there is a statistically significant effect between remote training and professional pressures among workers at the specialized hospital institution for mothers and children - Al oued at the level of significance (0.05). This is because distance learning allows workers to participate in the training process at times that suit them, whether during or outside work periods, as this is noted through the timing of the training, which is usually at (09.30) in the morning according to many of the ministry's correspondences. It also allows the use of the (ZOOM) website in any place that the trainee sees as helping him without imposing a specific place for training, as training can be followed at work, home or other places.

This reduces the physical fatigue associated with daily travel and reduces the stress associated with adhering to specific deadlines. Training also helps improve skills to perform tasks and keep up with all developments in the field of disease treatment and others. Distance learning allows for more focus on explaining and enriching discussions that take place in the chat directly with fellow trainees or trainers, which allows for the absorption of all information, which helps trainees learn in a comfortable way, in addition to the feature of recording and saving the video in order to review it at another time or send it to their colleagues, making them feel comfortable with the availability of all training information whenever they want. The trainer also provides all his information to contact or inquire about any information, even that which was not included in the training, and the institution provides The hospital is a special place to attend training and the provision of equipment and strong Internet frequency facilitated the process of keeping up with all the trainings included by the Ministry. The results of our study agreed with what was indicated by (Martory & Du Montcel, 1988) that training contributes to the development of skills and helps in investing in it, as well as what was stated by (Abdel Gawad, 2024) that electronic training contributes to the development of positive attitudes among trainees and increases their self-motivation for further education. The results of our study also agreed with the study of each of Inas Muhammad Ibrahim Al-Shiti (2023) and Ben Al-Habib and others (2022), Nasra and Boutarfa (2023), and the study (Ben Amara & Atia, 2016).

Recommendations and suggestions:

Based on the results of the current study, the researchers recommend the following:

-Increase interest in the distance training process, which in turn contributes to raising and improving the level of performance

of the institution and achieving its goals, especially since the nature of the tasks of doctors and paramedics requires their presence in the workplace and the inability to move.

-The necessity of preparing strategic plans for distance training based on a careful study of training needs.

-Providing an appropriate budget for distance training that covers all needs, including the development of devices and their provision in the departments.

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