The relationship between mental workload and general health among welders of Tehran Heavy Structures Metal Company

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ABSTRACT

Mental workload is one of the factors that influence individuals' performance in the work environment as well as their efficiency and productivity. The present study aimed at examining the association between mental workload and general health among welders of Tehran Heavy Structuress Metal Company. This cross-sectional study was conducted in 2016. The sample included 100 welders who were working in Tehran Heavy Structures Metal Company. Sampling was done through conducting a census. A demographic questionnaire, General Health Questionnaire-28 (GHQ-28), and National Aeronautics and Space Administration Task Load Index (NASA-TLX) mental workload questionnaire were used to collect data. The obtained data were fed into SPSS (version 22) and analyzed through Chi-square, one-way ANOVA, Kruscal Wallis Test, Pearson product moment correlation, and Mann-Whitney U Test. The results showed that the participating welders had an average age of 36.16±7.81, an average work experience of 9.65±5.83, and a BMI of 25.95±3.39 kg/m². The mean and standard deviation of the overall score of welders' mental workload were 65.88±21.15. The cut-off scores for the total mental workload questionnaire and the subscales were respectively set at 23 and 6. The results demonstrated that 26% of the welders were suspected of mental disorder. Furthermore, the results of Pearson correlation indicated that there was no significant relationship between the overall score of NASA mental workload and that of general health (p-value>0.05). Welders' mental workload is relatively high. Therefore, further research should be conducted in order to identify main risk factors that lead to mental and health disorder. Future studies should also be performed to present some solutions for te purpose of decreasing or preventing these side effects among welders as much as possible.

Keywords: mental workload; general health; performance; welders.

INTRODUCTION

In recent years, half of the world population is living in cities and suburbs because of industrialization and immigration. As a result of these social and economic changes, the number of stressful situations and socio-psychological problems is on the rise in the society. Significant changes are also observed in epidemic diseases and people's health needs. Nowadays, psychological problems, such as psychosis and chronic depression are among the most important factors causing disability and early death [1]. Work-related stress and workload are two influential factors that threaten the fitness and health of a wide range

of people in organizations [2]. Over the past years, the subject of workload and its influence on organizations has received considerable attention in discussions related organizational behavior [3]. Workload and work-related stress affects individuals' safety, health, and comfort and have a direct relationship with people's performance [2]. The workload has to do with the amount of overall work that should be done by somebody or a group of people in a particular period of time [4]. Mental workload encompasses factors that impact the mental process of information processing, decision making, and individuals' response in the workplace [5,6]. It was first

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proposed by NASA to study staff members who supervised control systems. The aim was to assess human errors, physical and mental needs, understanding of management systems, the ability to recognize warning signs, and the speed of decision making in sensitive jobs [7,8]. One procedure for measuring mental workload is National Aeronautics and Space Administration Task Load Index (NASA-TLX). This index is one of the most important and widely used tools to assess the mental workload that may be imposed on an operator [9,10]. The index consists of six subscales including mental demand, physical demand, temporal demand, performance, effort, and frustration. The mean of these six subscales is considered as the overall workload [11]. General health is a subcategory of the health system and is defined as a collection of important social actions which mainly rely on prevention strategies [12]. Based on the definition proposed by the World Health Organization (WHO), health is far more than lack of disease or inability and entails complete physical, mental, and social well-being. WHO emphasizes that none of these dimensions has priority over others [13]. In fact, the most important phenomenon in today's world is a human resource [14]. The studies that have concentrated on the mental health condition of Iranian people over 15 have indicated that, on the average, around 21% of people suffer from mental disorders. These studies have also shown that women are more vulnerable than men when it comes to mental illnesses [15]. It is believed that if a person is flexible in difficult situations and can keep his/her mental balance in every situation, he/she enjoys a high level of mental health [16]. Numerous studies in Iran and across the world have concentrated on workers' health [17]. However, there are few studies investigating the relationship between welders' mental workload and general health. Thus, the present study aimed at examining the association between mental workload and general health among welders of Tehran Heavy Structures Metal Company in 2016.

MATERIALS AND METHODS

Sample and sampling procedure

This cross-sectional study was conducted in the winter of 2015. The sample consisted of 100 welders who were working in Heavy Structures Metal Company. Sampling was done through conducting a census.

Instrument

A survey was used to collect data. It consisted of three sections: the first one aimed at collecting participants' demographic information. The second section comprised of NASA-TLX questionnaire, while the third section involved the General Health Questionnaire-28 (GHQ-28).

Demographic features questionnaire

This questionnaire was completed by the welders and included information such as age, work experience, academic degree, marital status, and body mass index (BMI). It also asked participants whether they had a second job and if they were smokers.

NASA-TLX questionnaire

NASA-TLX contains two main parts. The first one measures the workload, while the second one is used to assess the importance of each workload subscale in relation to other subscales from respondents' point of view [16]. The index, which was developed by Hart and Staveland (1988), is a well-known measure for evaluating workload from a personal perspective [18]. It is a multidimensional tool that provides an overall score based on the mean scores of six subscales, namely mental demand, physical demand, temporal demand, performance, effort, and frustration [19]. A large number of studies have confirmed the reliability and validity of this instrument in assessing workload [20]. Studies conducted by Malekpour have approved the reliability and validity of the instrument, with the reported Cronbach alpha being 0.83 [1].A brief description is provided for each of the six subscales. The person who collects data should read these descriptions to the respondent before completing the questionnaire based on his/her answers. The total score for each subscale is 100, with a 20-point likert scale ranging from 5-very low to 100-very high [18]. The descriptions for the six subscales are as follows:

Mental demand

How mentally demanding was the task? (This could include decision making processes, calculations, thinking processes, and remembering past information). And, whether the task was difficult or easy, simple or complicated.

Physical demand

How physically demanding was the task? (This could include a lot of physical pulling, pushing, and movement). And whether the task was easy or difficult, included a break, or demanded strenuous physical activity.

Temporal demand

How hurled or rushed was the pace of the task? And whether the pace was fast or slow.

Performance

How successful were you in accomplishing what you were asked to do? How much were you happy with your performance?

Frustration

How insecure, discouraged, irritated, stressed, and annoyed were you?

Effort

How hard did you have to work mentally or physically to accomplish your level of performance?

General Health Questionnaire-28 (GHQ-28)

In order to assess the welders' general health condition, GHQ-28 was used. This questionnaire is a screening device for identifying some psychiatric disorders. It is not a diagnostic test and can only be used to screen people who are suspected of some mental disease [21,22,23].

GHQ-28, which was designed by Goldberg and Hiller (1979), entails four subscales which somatic symptoms, anxiety assess insomnia, social dysfunction, and severe depression. Each subscale is measured through seven items [24]. Previous studies have provided considerable evidence for the reliability and validity of this instrument. Based on the studies conducted in Iran, the reliability and validity of the instrument with the cut-off score of 23 varies from 0.68 to 0.94, while, with the cut-off score of 6, they range between 0.84 and 0.93 [12].A four-point likert scale is used for each item of the questionnaire with anchors at 0-never. 1-sometimes, 2-often, and 3-always. A respondent's score may vary from 0 to 84 [25]. In this study, the cut-off score was set at 23, meaning that welders who scored above it were suspected of mental disorder.

STATISTICAL ANALYSIS

The data obtained through the demographic questionnaire, NASA-TLX, and GHQ-28 were fed into SPSS (version 22). Chi-square, oneway analysis of variance (ANOVA), Kruscal Wallis Test, Pearson product-moment correlation, and Mann-Whitney U Test were conducted to analyze the data.

RESULTS

Table 1 illustrates the demographic features of the participants.

Table 1. Welders' demographic features (n=100)

Variable	Variable	Percentage	
	<25	8	
Age (in years)	25-35	39	
	35-45	43	
	>45	10	
	<10	60	
Work experience (in years)	10-15	26	
work experience (in years)	15-20	10	
	>20	4	
Academic degree	Lower than a diploma	52	
	Diploma	44	
	University degree	4	
	Single	8	
Marital status	Married	92	
Second job	Yes	3	
Second Job	No	97	
	≤ 19	2	
$BMI(kg/m^2)$	19-23	17	
	>23	81	
Smoking status	Smokers	48	
Smoking status	Non-smokers	52	

According to this table, the lowest mean score belongs to frustration (22.4±9.7), while the highest one has been recorded for effort (83.8±16.80). The overall mean score for

mental workload is 65.88±21.55. Table 2. Studied welders' mean, standard deviation, minimum, and maximum for the six subscales and the overall score of NASA-TLX mental workload (n=100).

Table 2. contains the mean scores of the six mental workload subscales as well as the overall mean score.

Mental workload subscales	Mean-Standard deviation			
Mental demand	73±25.28			
Physical demand	69.7±29.14			
Temporal demand	71.3±26.64			
Performance	75.1±21.39			
Effort	83.8±16.80			
Frustration	22.4±9.7			
Overall score	65.88±21.15			

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As observed in this table, with a cut-off score of 23, the prevalence of mental health disorder is 26% among the welders. Table 3. The results of

the four subscales and the overall score of general health for the studied welders (n=100)

Table 3. displays the results for the four subscales of GHQ-28 as well as the overall health score of the welders

General health subscales	Disorder percentage
Somatic symptoms	18
Anxiety and insomnia	10
Social dysfunction	74
Severe depression	6
Overall score for general health	26

Table 3 indicates that, in the light of general health subscales, 18% of the participants suffer from somatic disorders, 10% are suspected of anxiety and insomnia, 74% suffer from social dysfunction, and 6% have severe depression

and suicidal tendencies. Table 4 shows the results of Pearson correlation conducted to find the association between the overall mean score of mental workload and the subscales of general health.

Table 4. The results of correlation between overall mental workload score and the subscales of general health for the studied sample (n=100)

Variable	Somatic disorder	Anxiety and insomnia	Social dysfunction	Severe depression and suicidal tendencies	Overall score in general health	Overall score in mental workload (NASA)
Somatic disorder						
Pearson correlation	1	0.599**	-0.125	0.068	0.655**	-0.103
P-value		0.001	0.216	0.501	0.001	0.307
Anxiety and insomnia						
Pearson correlation	0.599**	1	-0.203*	0.514**	0.796**	-0.116
P-value	0.001		0.043	0.001	0.001	0.251
Social dysfunction						
Pearson correlation	-0.125	-0.203*	1	-0.104	0.274**	0.354**
P-value	0.216	0.043		0.305	0.006	0.001
Severe depression						
Pearson correlation	0.068	0.514**	-0.104	1	0.600**	-0.024
P-value	0.501	0.001	0.305		0.001	0.816

**Two tailed, significant at 0.01 *Two tailed, significant at 0.05

As indicated in Table 4, the results of Pearson correlations demonstrated significant associations between overall score of general health and each of the four subscales, namely somatic disorder (p-value=0.001), anxiety and insomnia (p-value=0.001), social dysfunction (p-value=0.006), and severe depression (pvalue=0.001). Additionally, there was a significant correlation between the overall score of NASA mental workload and social dysfunction (p-value=0.001). On the other hand, significant relationships were observed between somatic disorder and anxiety and insomnia (p-value=0.001) and between somatic disorder and the overall general health score (pvalue=0.001). Nevertheless, no significant correlation was detected between somatic disorder and social dysfunction (p-value=0.216) or somatic disorder and severe depression (pvalue=0.501). With respect to mental workload, significant correlations were observed between the overall score of NASA mental workload and its subscales, including mental demand (pvalue=0.001), physical demand (pvalue=0.001), temporal demand (pvalue=0.001), performance (p-value=0.001), effort (p-value=0.001), and frustration (pvalue=0.007).In contrast, no measurable relationship was detected between the overall score of general health and the subscales of NASA mental workload, namely mental demand (p-value=0.762), physical demand (pvalue=0.524), temporal demand (p-value=0.53), performance (p-value=0.279), and effort (pvalue=0.412).

DISCUSSION

The current study aimed at examining the relationship between mental workload and general health among welders of Tehran Heavy Structuress Metal Company in 2016. The minimum and maximum scores of mental workload were 30 and 90, respectively. Also, the overall score was 65.88±21.15. This is similar to the mean score obtained in Malekpoor et al.'s study (68.14±14.61) (1). Based on the findings, it can be concluded that, save for frustration, in all the subscales of NASA-TLX, the scores were considerablyhigh, a phenomenon that indicates the professional nature of welding. The subscale scores obtained

in Safari et al.'s study were all similar to the ones recorded in this research. The only discrepancy was observed in the case of frustration [26]. According to our findings, 26% of the welders were suspected of adverse health condition. Zare et al. (2012) investigated the prevalence of mental disorder among the workers of Gol Gohar Mining Company. The overall cut-off score was considered to be 23 and the cut-off score for each subscale was set at 6. They found that 29.4% of the participants were suspected of mental disorders, a finding that is very similar to the ones obtained in the present study [12]. The results also indicated that there is no significant relationship between welders' general health and age, degree experience, and academic (pvalue>0.05). Mokremi et al. (2008) also came to a similar conclusion, showing that there is no significant relationship between general health and age, work experience, and academic degree (p-value=0.23) [27]. The results of Pearson correlation demonstrated that there is no significant association between age and the overall score of NASA mental workload (pvalue=0.552). No significant correlation was either observed between work experience and the overall score of NASA mental workload (pvalue=0.374) or BMI and the overall score of NASA mental workload (p-value=0.456). These findings are in line with the ones obtained by Safari et al. (2012). However, Young et al. [28] concluded that there is a significant relationship between the overall score of mental workload and age (pvalue<0.05), in the sense that older workers are exposed to heavier workload compared to their younger counterparts. This discrepancy can be attributed to the differences in the sample of each research, the nature of the jobs, and the number of individuals who participated in each The results of Pearson correlation study. showed a significant positive relationship between academic degree and the overall score of NASA mental workload (p-value=0.002). This is in agreement with Haghi et al.'s (2013) findings (p-value=0.01) [11]. In contrast, the results of Safari et al.'s (2012) study indicated no significant correlation between academic degree and the overall score of mental workload (p-value>0.05) [26]. The results of Kruscal Wallis Test demonstrated that there is no significant difference in the general health of

the four age groups (p-value=0.066).

The results of the current study indicated that welders' mental workload is considerably high. This can be due to factors like lack of a regular work-rest cycle and lack of work shift cycles or regular work shifts. Other influential factors may involve working for 12-14 hours a day, being forced to make orders ready immediately, having no job security because of nature of existing work contracts (workers are forced to sign one-year contracts; even some workers are forced to sign conditional one-year contracts employer's request), inappropriate sanitary facilities and amenities, working in improper environments (some welders are forced to work in outdoor areas and are exposed to direct sunlight), working in an undisciplined, disordered environment, and not recruiting occupational health and safety engineers in this industry. All these factors increase welders' mental stress. Further research should be conducted in order to identify main risk factors that lead to mental and health disorder. Future studies should also present some solutions to decrease or prevent these side effects among welders as much as possible.

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