Correlation between Attachment Styles, Emotional Needs and Empowerment among Nurses Working at Psychiatric Hospital

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Abstract:

Background: Psychiatric nurse's attachment styles, empowerment and emotional needs can be influenced negatively by the contact with mentally ill patients, workload, high levels of stress. Aim: This study aimed to assess the correlation between attachment styles, emotional needs and empowerment among nurses working at psychiatric hospital. Research design: A descriptive correlational research design used to achieve the aim of the study. Setting: This study was conducted at the Psychiatric and Mental Health Hospital at Benha City, Qalubia Governorate. Sample: A convenient sample of 142 psychiatric nurses working at Psychiatric and Mental Health Hospital were included in the study. Tools: Four tools used in this study Tool (1) A Structured Interview Questionnaire. Tool (2) Adult Attachment scale. Tool (3) Emotional Needs Scale. Tool (4) Empowerment Scale. Results: More than two thirds of psychiatric nurses had moderate level of attachment, also more half of them had moderate level of emotional needs and more than two thirds of them have moderate level of empowerment. In addition, there was high statistically significant positive correlation between attachment styles, emotional needs, and empowerment. Conclusion: Psychiatric nurses who had secure attachment style, had more emotional needs satisfaction and high level of empowerment. Recommendation: Designing intervention programs to improve psychiatric nurses' empowerment and satisfying their emotional needs.

Keywords: Attachment Styles, Emotional Needs, Empowerment, Psychiatric Nurses.

Introduction

There is a great interest in the well-being of nursing staff members in psychiatric care contexts. the work environment in psychiatric hospitals often include a multitude of aspects, such as organizational climate and culture, work demands, work control, emotional wellbeing, leadership, empowerment and co-worker support and collaboration. It is a common assumption that favorable work environments are important for the emotional need satisfaction, enhancing positive attachment, improving empowerment and well-being of the psychiatric nursing staff, and reducing the risk of burnout. The opposite, a poor work environment, has been found to create stress, anxiety, and burnout. (Varcarolis, 2021).

Mental illness may be life threatening and often results in added social complications, which makes psychiatric nursing staff in complex and challenging work life. Also, organizational pressures in the complex psychiatric care system add further to high demands and emotional needs on the nursing staff. They often have feelings of inadequacy, which has been shown to be related to insecure attachment style. There is a strong need for more research aimed at exploring the impact of stress factors and individual characteristics on attachment styles,
emotional needs, and empowerment among psychiatric nursing staff. (Elder et al., 2019).

Attachment can be defined as the warm feelings and support that are associated with a desire for proximity to the attachment figure and results in distress following individual separation. Previous studies have demonstrated that, among a wide variety of influential factors, attachment styles are important antecedents of interpersonal relationship quality. Building on Bowlby’s attachment theory that conceptualizes attachment styles as secure or insecure. More productive approach might be to consider the attachment styles of psychiatric nurses as a potential prerequisite of the quality of patient care. Furthermore, adult attachment styles can be conceptualized in terms of two dimensions of attachment anxiety and attachment avoidance. Attachment anxiety is associated with a negative self-image and an excessive need for approval from others, coupled with a fear of rejection and abandonment. Attachment avoidance is associated with a negative image of others, social withdrawal, and either an excessive need for self-reliance or a fear of depending on others. (Farmakas et al., 2022).

Attachment styles may contribute to later interpersonal functioning and emotional self-regulation. Psychiatric nurses with a secure attachment style are generally more resilient in stressful situations, experience greater emotional health, greater levels of perceived social support, better work adjustment, and adopt more adaptive strategies for coping with negative affect than insecurely attached nurses. Attachment theory is a lifespan developmental theory that proposes there is a universal need to form close affectional bonds and that attachment behavior functions as a homeostatic mechanism for modulating distress in adulthood as well as childhood (Bordoagni., 2021).

Emotional need of psychiatric nurses is a state or condition that must be fulfilled for them to experience happiness and peace. Emotion is fundamental to nursing practice. As frontline mental health care workers and nurses form and maintain relationships within emotionally charged environments where emotion is central to the fabric of mental health care delivery. Additionally, Emotions influence professional relationships, impact patient care decisions, and affect mental healthcare workers at an intrapersonal level. There is strong acknowledgement that understanding the impact of emotion is essential (Varcarolis, 2021).

Research indicates that psychiatric nursing staff who support people with psychosis can experience negative feelings of frustration, incompetence, and helplessness in response to some of the behaviors expressed by psychiatric patients (e.g., anger and self-harming behaviors) and this may lead them to adopt negative and avoidant attitudes. Under normal circumstances, emotional social support can help nurses mobilize their psychological resources and master their emotional burdens as well as providing money, materials, skills, and cognitive guidance to handle situations optimally. On the other hand, joining emotions and cognition, when done well, facilitates decisions, manages emotions, improves relationships, and ultimately results in more intelligent decisions. (Elder et al., 2019).

Empowerment is a multifaceted approach, and its essence cannot be captured by a single concept. In other words, empowerment is a multidimensional social process that involves two main perspectives namely, structural, and psychological empowerment. Psychiatric nurses are subjected to many sources of
stress, including shortage of resources and staff, low income with increased workload as well as death and dying. In addition, the increased liability to encounter workplace violence in nursing units is undoubtedly a daily risk. They are also subject to difficulty in making harmony between their exhausting work and family demands. These stressors can have a significant impact on individual nurses and their ability to accomplish tasks because of their altered decision-making, concentration, motivation, and sense of empowerment. Accordingly, their susceptibility to develop physical as well as psychological illness increases (Gutiérrez et al., 2020).

It was reported that there is a strong link between empowerment and decreased susceptibility of nurses to develop stress related disorders. In the challenging working environment, one way to empower psychiatric nurses is to allow them to make decisions about their tasks of care delivery or get them involved in a participative way. These management practices not only enhance the contributions or productivity of nurses in an effective manner but also enable nurses to exercise their autonomy, to sense the value of their work and satisfaction (Lautizi et al., 2019).

Psychiatric nurse's attachment styles, emotional needs and empowerment can be influenced negatively by the contact with mental illness, workload, high levels of stress, and conflicts with colleagues, supervisors or patient’s relatives, the degree of work satisfaction, the balance between work, family and personal development, staff adequacy and salary. All these stressors may lead to losses in job performance, work overload and stress, and interfere with the mental wellbeing of mental health nurses. In contrast, improving working conditions and promoting a less stressing work environment can affect positively on these issues among psychiatric nurses (Hasan and Tunah, 2019).

**Significance of the study**

Psychiatric nurses with secure attachment style can constructively express, modulate and manage negative affect, having the confidence to manage and regulate distress, are open to new, even threatening information, and are able to develop suitable strategies for dealing realistically with the imposed demands (Ilali et al., 2019).

Many factors influence psychiatric nurse's satisfaction and empowerment including social support, physical health, and financial resources. Also, psychiatric nurses who have a sense of control over important aspects of their life have a positive effect on health. Being securely attached to others, emotionally satisfied, and highly empowered are psychological resources that can help psychiatric nurses to work productively and cope with work stress (Alotaibi et al., 2020).

**Aim of the study:**

This study aims to assess the correlation between attachment styles, emotional needs and empowerment among nurses working at psychiatric hospitals.

**Research questions:**

1. What are attachment styles among nurses working at psychiatric hospitals?
2. What are the emotional needs of nurses working at psychiatric hospitals?
3. Do nurses work at psychiatric hospitals feel empowered?
4. What is the correlation between attachment styles, emotional needs and empowerment among nurses working at psychiatric hospitals?

**Subject and Methods**

**Research Design:** A descriptive correlational research design used to achieve the aim of the study.

**Research Setting:**

This study was conducted at the Psychiatric and Mental Health Hospital at
Correlation between Attachment Styles, Emotional Needs and Empowerment among Nurses Working at Psychiatric Hospital

Benha city, Qalubia governorate which is affiliated to General Secretariat of Mental Health in Egypt. The hospital has (6) departments (5 male and 1 female) with capacity of 219 beds.

Research Subject:

Sample size and technique:
A convenient sample of psychiatric nurses working at Psychiatric and Mental Health Hospital were included in the study. The estimated sample size is 142, at confidence level 95% and precision rete at 0.5 by using Cochran’s sample size Formula (Cochran, 1977). Since the total number of them is 223 nurses.

\[
   n = \frac{n_0}{1 + \left(\frac{n_0 - 1}{N}\right)}
\]

Where:
- n= Sample size
- n₀= 385
- N= Total sample (223)

Tools of Data Collection:
To fulfill the aim of the study, the data was collected using the following four tools:

Tool (1): A Structured Interview Questionnaire:
The questionnaire was developed by the researcher based on scientific review of literature and was designed on Arabic format in suitable language to suit all nurses' level of education to assess the following data:

- Socio-demographic data of nurses such as: age, sex, marital status, years of experience, residence, level of education, family size, social support and exposure to traumatic events.

Tool (2): Adult Attachment Scale (AAS)
This scale was officially developed by (Collins & Read, 1990). It is aimed to measures adult attachment styles which are (Secure attachment style, Avoidant attachment style and Anxious attachment style). It consists of 18 items divided into three subscales namely Close subscale (6 items), Depend subscale (6 items) and Anxiety subscale (6 items) all of which carry a 5-point range of responses, as follows: never (1), rarely (2), some- times (3), often (4), and always (5).

Scoring system:
- Low attachment style: (18 – 42).
- Moderate attachment style: (43 – 66).
- High attachment style: (67 – 90).

Tool (3): Emotional Needs Scale (ENS)
The scale was developed by (Brett Culham, 2008). The scale designed to measure nine emotional needs, which are the need for security, attention, being emotionally connected to others, having a sense of autonomy and control, feeling part of a wider community, privacy, sense of status within social grouping, being accepted and valued as well as sense of competence and achievement. The Scale consists of 14 items using a five-point Likert scale for respondents’ answers ranged as follow: never (1), rarely (2), sometimes (3), often (4), and always (5).

Scoring system:
- Low emotional need: (14-33)
- Moderate emotional need:(34-51)
- High emotional need: (52-70)

Tool (4): Empowerment Scale (ES)
It was developed by (Rogers et al., 1997). It is aimed to assess empowerment in adults by measuring five dimensions including optimism and control over the future, righteous anger, self-esteem, power/powerlessness as well as community activism and autonomy. It consists of 28 items, the respondents’ answers ranged as follow: strongly disagree (1), disagree (2), agree (3), and strongly agree (4).
Scoring system:
- Low empowerment: (28-56).
- Moderate empowerment: (57-83).
- High empowerment: (84-112).

Content Validity of tool:
Content validity of tools was done by jury of 5 expertise (4 in Psychiatric Nursing from Benha and 1 in Psychiatric Nursing from Beni-suef University) who checked the relevancy, comprehensiveness, clarity and applicability of the questions. According to their opinions, Modifications were done in some words in the Arabic form of the tool to give the right meaning of the phrase and the final form was developed.

Reliability of the tool:
Test the reliability of the tools through Alpha Cronbach reliability analysis.

<table>
<thead>
<tr>
<th>Tools</th>
<th>Alpha Cronbach</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Attachment Scale</td>
<td>0.861</td>
</tr>
<tr>
<td>(AAS)</td>
<td></td>
</tr>
<tr>
<td>Emotional Needs Scale</td>
<td>0.91</td>
</tr>
<tr>
<td>(ENS)</td>
<td></td>
</tr>
<tr>
<td>Empowerment Scale (ES)</td>
<td>0.885</td>
</tr>
</tbody>
</table>

Ethical Consideration:
The aim of the study was clarified by the researcher to every participant in the study, oral consent was obtained prior to the interview, and they were assured for maintaining anonymity and confidentiality. Every participant was informed that they have the right to participate in the study. Studied nurses were informed that the content of the tools was used for research purpose only. The researcher respects the right of the study sample to be withdrawn from the study at any time of data collection without any consequences.

Pilot Study:
After the tools were designed, they were tested through a pilot study, which was done before its application in the field work to check clarity and feasibility of the designed tools to be sure that it was understood and to estimate the time needed to complete its items. It was carried on a sample of 10% (14 nurses working at psychiatric hospital) who were included later from the main study sample to assure stability of the results.

Result of Pilot Study:
After conducting the pilot study, it was found that:
1. The tools were clear and applicable; however, few modifications were made in rephrasing of some sentences in the Adult Attachment Scale, Emotional needs scale and Empowerment scale.
2. Tools were relevant and valid.
3. No problem that interferes with the process of data collection was detected.
4. Following this pilot study the tools were made ready for use.

Field work:
- The researcher started data collection by introducing herself to the nurses working at psychiatric hospital.
- The researcher followed the specific precautions (wear mask, personal distance and using alcohol) due to corona virus circumstances after explanation and reassurance of nurses.
- Brief description about the purpose of the study and the type of questionnaire required to fill was given to every participant.
- The sample was selected by interviewing 142 nurses working at psychiatric hospital that met the previous prescribed criteria.
- An individual interview to collect the necessary data by using the tools of data collection.
Correlation between Attachment Styles, Emotional Needs and Empowerment among Nurses Working at Psychiatric Hospital

collection was conducted for every nurse who met the inclusion criteria and accepted participation in this study.

- The researcher started to collect data from nurses, 8-9 nurse / day and interview lasted (30-45 minute).
- The process of data collection took a period of two months (from the first of October 2022 to the end of November 2022), 2 days / week (Monday and Tuesday), from 9 A.M.: 2 P.M., 8-9 nurses / day.

Statistical analysis

All data collected were organized, coded, computerized, tabulated and analyzed by using The Statistical Package for Social Science (SPSS) program (version 25), which used frequencies and percentages for qualitative descriptive data, Chi-square was used for relation tests, mean and standard deviation was used for quantitative data and person correlation coefficient (r) was used for correlation analysis and degree of significance was identified. A highly statistical significant difference was considered if p-value < 0.01, statistical significant difference was considered if p-value < 0.05 and non-statistical significant difference was considered if p-value p > 0.05.

Results

Table (1) shows that more than two fifth (40.2%) of the studied nurses their age from 20 - < 30 years old with Mean ± SD 35.71 ± 1.21, more than half (55.6 %) of them are female, majority of them (80.3%) are married, more than one thirds (37.3%) of them have more than 15 years of experience in psychiatry, more than two thirds (69%) of them are live in rural area. Also, nearly half (48.6%) of them have Nursing institute education, more than one third (36.7%) of them their family consist of Five members. Furthermore, more than half (57.7%) of them not receive social support, nearly one quarter (23.9%) of them have Network support and more than half (56.3%) of them have exposure to traumatic events. In addition, less than three quarts (71.8%) of them work in male department.

Figure (1) reveals that minority (9.2%) of the studied nurses have high attachment style level while more than two thirds (67.6%) of them have moderate level of attachment style and less than one quarter (23.2%) of them have low adult attachment style level.

Figure (2) shows that minority (9.9%) of the studied nurses have low emotional needs level. As well as more half (57.0%) of them have moderate level of emotional needs and nearly one third (33.1%) of them have high emotional needs level.

Figure (3) indicates that minority (2.1%) of the studied nurses have low empowerment level. In addition, more than two thirds (67.6%) of them have moderate level of empowerment and less than one third (30.3%) of them have high empowerment level.

Table (2) illustrates that there is high statistically significant positive correlation between all studied variables: total attachment styles, total emotional needs and total empowerment at (p<0.001).
Table (1): Frequency distribution of the studied nurse’s socio demographic characteristics (n=142)

<table>
<thead>
<tr>
<th>Socio demographic characteristics</th>
<th>No</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 - &lt; 30 years</td>
<td>57</td>
<td>40.2</td>
</tr>
<tr>
<td>30 - ≤ 40 years</td>
<td>33</td>
<td>23.2</td>
</tr>
<tr>
<td>&gt; 40 years</td>
<td>52</td>
<td>36.6</td>
</tr>
<tr>
<td>Mean ± SD</td>
<td>35.71 ± 1.21</td>
<td></td>
</tr>
<tr>
<td><strong>Sex</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>63</td>
<td>44.4</td>
</tr>
<tr>
<td>Female</td>
<td>79</td>
<td>55.6</td>
</tr>
<tr>
<td><strong>Marital status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>15</td>
<td>10.6</td>
</tr>
<tr>
<td>Married</td>
<td>114</td>
<td>80.3</td>
</tr>
<tr>
<td>Divorced</td>
<td>7</td>
<td>4.9</td>
</tr>
<tr>
<td>Widowed</td>
<td>6</td>
<td>4.2</td>
</tr>
<tr>
<td><strong>Years of experience in psychiatry</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 5 years</td>
<td>19</td>
<td>13.4</td>
</tr>
<tr>
<td>5 to less than 10 years</td>
<td>40</td>
<td>28.2</td>
</tr>
<tr>
<td>10 to 15 years</td>
<td>30</td>
<td>21.1</td>
</tr>
<tr>
<td>More than 15 years</td>
<td>53</td>
<td>37.3</td>
</tr>
<tr>
<td><strong>Residence</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural</td>
<td>98</td>
<td>69.0</td>
</tr>
<tr>
<td>Urban</td>
<td>44</td>
<td>31.0</td>
</tr>
<tr>
<td><strong>Level of education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secondary nursing school</td>
<td>53</td>
<td>37.3</td>
</tr>
<tr>
<td>Nursing institute</td>
<td>69</td>
<td>48.6</td>
</tr>
<tr>
<td>Bachelor of nursing</td>
<td>18</td>
<td>12.7</td>
</tr>
<tr>
<td>Master or Doctorate</td>
<td>2</td>
<td>1.4</td>
</tr>
<tr>
<td><strong>Family size</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Three members</td>
<td>18</td>
<td>12.9</td>
</tr>
<tr>
<td>Four members</td>
<td>49</td>
<td>34.5</td>
</tr>
<tr>
<td>Five members</td>
<td>52</td>
<td>36.7</td>
</tr>
<tr>
<td>More than five members</td>
<td>23</td>
<td>15.9</td>
</tr>
<tr>
<td><strong>Do you receive social support</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>60</td>
<td>42.3</td>
</tr>
<tr>
<td>No</td>
<td>82</td>
<td>57.7</td>
</tr>
<tr>
<td><strong>If the answer is yes, Type of social support is</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional support</td>
<td>20</td>
<td>14.2</td>
</tr>
<tr>
<td>Financial support</td>
<td>6</td>
<td>4.2</td>
</tr>
<tr>
<td>Network support</td>
<td>34</td>
<td>23.9</td>
</tr>
<tr>
<td><strong>Exposure to traumatic events</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>62</td>
<td>43.7</td>
</tr>
<tr>
<td>No</td>
<td>80</td>
<td>56.3</td>
</tr>
<tr>
<td><strong>Department</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>102</td>
<td>71.8</td>
</tr>
<tr>
<td>Female</td>
<td>40</td>
<td>28.2</td>
</tr>
</tbody>
</table>
Correlation between Attachment Styles, Emotional Needs and Empowerment among Nurses Working at Psychiatric Hospital

Figure (1) Percentage distribution of the total adult attachment style level among the studied nurses (n=142)

Figure (2): Percentage distribution of the total emotional needs level among the studied nurses (n=142)

Figure (3) Percentage distribution of the total empowerment level among the studied nurses(n=142)
### Table (2): Correlation matrix between total attachment styles, emotional needs and empowerment among the studied nurses (n=142)

<table>
<thead>
<tr>
<th>Studied variables</th>
<th>Total attachment styles</th>
<th>Total emotional needs</th>
<th>Total empowerment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>R</td>
<td>P</td>
<td>R</td>
</tr>
<tr>
<td>Total attachment styles</td>
<td>--</td>
<td>--</td>
<td>.501</td>
</tr>
<tr>
<td>Total emotional needs</td>
<td>.50</td>
<td>.0001**</td>
<td>--</td>
</tr>
<tr>
<td>Total empowerment</td>
<td>.522</td>
<td>.000**</td>
<td>.451</td>
</tr>
</tbody>
</table>

(*) Statistically significant at p<0.05. (**) highly statistically significant at p<0.001

### Discussion

The results of the present study revealed that more than two fifth of the studied subjects age ranged between (20 - < 30) years old and less than one quarter of them age ranged between (30 - ≤ 40) years old with Mean ± SD 35.71 ± 1.21. This result was incongruent with the study done by Elnakeeb et al., (2019) Who conducted a study entitled "Psychological Empowerment and Susceptibility to Stress Related Illnesses among Psychiatric Nurses in Alexandria, Egypt" and found that less than one third of the studied subjects were aged between (20 - < 30) years old and the least was aged between (50 – 59) years old.

As regard gender, the result of the present study revealed that more than half of the studied subjects were females; this result was congruent with the study done by Berry et al., (2019) who conducted a study entitled "A Pilot Study Investigating the Influence of Adult Attachment Styles on Psychiatric Nursing Staff Psychological Mindedness and Therapeutic Relationships " and found that more than two thirds of the studied subjects were females. Also, the result of this study was congruent with the study done by Elnakeeb et al., (2019) Who mentioned that more than two thirds of the studied subjects were females.

Regarding marital status this study revealed that most of the studied subjects were married; this result was congruent with the study done by Başoğul et al., (2019) who conducted a study entitled "Emotional intelligence and personality characteristics of psychiatric nurses and their situations of exposure to violence" and mentioned that the majority of the studied subjects were married. The result of this study also was congruent with the study done by Son and Kim, (2020) who conducted a study entitled "The Mediating Effect of Empowerment on the Relationship between Communication Ability and Nursing Performance in Psychiatric Nurses" and mentioned that more than two thirds of the studied subjects were married.

Regarding years of experience this study revealed that more than one third of the studied subjects have more than 15 years of experience in psychiatric field. This result was congruent with the study done by Elnakeeb et al., (2019) Who found nearly two thirds of the studied subjects have more than 15 years of experience in psychiatric field.

Regarding level of education this study revealed that nearly half of the studied subjects had nursing institute education. This result was incongruent with the study done by Elnakeeb et al., (2019) who mentioned that nearly two thirds of the studied subjects had a diploma degree. Also, this result was incongruent with the study done by Son and Kim, (2020) who
conducted a study entitled “The Mediating Effect of Empowerment on the Relationship between Communication Ability and Nursing Performance in Psychiatric Nurses” and mentioned that nearly half of the studied subjects had a bachelor’s degree.

Concerning the relation between attachment styles, emotional needs and empowerment, this result illustrated that there was high statistically significant positive correlation between all studied variables, total attachment styles, total emotional needs, and total empowerment. From the researcher’s point of view, being securely attached to others, emotionally satisfied and being empowered help psychiatric nurses to accept patient aggression, achieve ego integrity, cope effectively with work stress, adjust to work environment. In addition, they have an active engagement in life, and maintain emotional wellbeing. This will let them have a successful practical and social life with a positive effect on patient outcomes and quality of care.

This result was congruent with the study done by Özbaş and Tel (2019) who conducted study entitled "Psychological Empowerment, emotional need satisfaction and Burnout in Psychiatric Nurses " and reported that there was high statistically significant positive correlation between empowerment and emotional needs satisfaction. Also, this result was consistent with the study done by Mimura & Norman (2018) who conducted study entitled "The relationship between mental healthcare workers’ attachment styles, empowerment and patient outcomes" and reported that there was high statistically significant positive correlation between empowerment and attachment styles. This result was consistent with the study done by Cooper, (2020) who conducted study entitled "Attachment Styles, Emotion Regulation, and Adjustment in Adults " and found that there was high statistically significant positive correlation between attachment styles and emotional needs satisfaction.

**Conclusion**

Secure attachment, emotional needs satisfaction, and high empowerment are psychological resources that can help psychiatric nurse to work productively and cope with work stress. This study revealed that more than two thirds of Psychiatric nurses have moderate level of attachment, also more than half of them have moderate level of emotional needs and more than two thirds of them have moderate level of empowerment. In addition, there is a high statistically significant positive correlation between attachment styles, emotional needs, and empowerment.

**Recommendations**

**Recommendation for education:**
- Designing intervention programs to improve psychiatric nurses' empowerment and satisfying their emotional needs.
- Empowerment and time management techniques should involve in curriculum to promote nurses mentally and physically well-being.

**Recommendation for psychiatric nurses:**
- Equip psychiatric nurses with the enough up-to-date knowledge related to the importance of satisfying the basic emotional needs in developing secure attachment style and improving empowerment. in the form of in-hospital training courses.
- Staff training programs and workshops for nurses and caregivers about the importance of social support, how to meet the emotional needs of psychiatric nurses and its effect on their well-being, are suggested.

**Recommendation for future research:**
- Conduct the same study in other psychiatric hospitals in Egypt.
• Further research should be focusing on the importance of attachment and its psychosocial impact in later life.

References


Rogers, E., Chamberlin, J., Ellison, A. Consumer (1997). Constructed Scale to...
Correlation between Attachment Styles, Emotional Needs and Empowerment among Nurses Working at Psychiatric Hospital


العلاقة بين أنماط التعلق وال الاحتياجات العاطفية والتمكين بين التمريض العاملين في مستشفيات الصحة النفسية

أسماء سعد أحمد – فتحية سعد سيد – ضحي عبد البصير محمود

إن دراسة العلاقة بين أنماط التعلق والاحتياجات العاطفية والتمكين لدى التمريض النفسي أمر بالأهمية لخلق بيئة عمل داعمة وصحية والتي لها أثار كبيرة على صحتهم العقلية ورضاه الوظيفي وتحسين رعاية المرضى وتعزيز رفاهية الممرضات. لذلك هدفت الدراسة إلى تقييم العلاقة بين أنماط التعلق والاحتياجات العاطفية والتمكين بين التمريض العاملين في مستشفيات الصحة النفسية. وأجريت هذه الدراسة في مستشفى الصحة النفسية والأدمان بمدينة بنها بمحافظة القليوبية. وقد تم أخذ عينة ملائمة تتألف من 142 من التمريض العاملين في مستشفيات الصحة النفسية. وقد كشفت النتائج أن أكثر من ثلثي التمريض النفسي لديه مستوى متوسط من التعلق، كما أن أكثر من نصفه لديه مستوى معتدل من الاحتياجات العاطفية وأكثر من ثلثه يتمتع بمستوى معتدل من التمكين. بالإضافة إلى ذلك، كان هناك ارتباط إيجابي ذو دلالة إحصائية عالية بين أنماط التعلق والاحتياجات العاطفية والتمكين. وأوصت الدراسة بأن هناك حاجة لتزويد التمريض العاملين بمصادر التعلم والتحفيز والتي يمكن أن تشمل تنسيق دورات تدريبية وبرامج تعلم تتيح للمرضى رعاية عالية الجودة في مستشفيات الصحة النفسية. 

الأساسية في تطوير أساليب التعلق الأمن وتحسين التمكين في شكل دورات تدريبية داخل المستشفى.