

WORKING CAPACITY AND HEALTH SURVEY AMONG THE EMPLOYEES OF A PLASTIC MANUFACTURING COMPANY IN HUNGARY

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OBJECTIVES

The purpose of our research was to explore work ability, health status, workplace stress level, sleep quality and health behaviour and the relationship between them in case of plastics factory workers at Soltvadkert (Hungary).

METHODS

Quantitative, cross-sectional study was performed in Hungary, in a plastic manufacturing company. Purposful sampling method was applied (n=184). We performed questionnaire with own questions (socio-demographic data, job characteristics, health status, health behaviour, and number of sick days) and validated questionnaires: The Copenhagen Psychosocial Questionnaire, Work Ability Index, Groningen Sleep Quality Scale, Effort–Reward Imbalance Questionnaire. In addition, descriptive statistical analysis χ^2 -test, ANOVA, Independent samples t-tests were applied (p<0.05) with SPSS software.

RESULTS

The mean age was 44.21 years. The average point of sleep quality was 5.1±2.2 points (value above 6 points indicates a significant deterioration in sleep quality). The ones with only primary school education (56.3%) sleep significantly (p=0.006) worse than those with higher education (20.3%, 28.6%). Work stress decreases slightly with age: reward (p=0.026; r=0.164), effort (p=0.010; r=0.189), overcrowding (p=0.032; r=0.158). Work ability was poor in 3.2% (6 people), moderate in 28.6% (53 people), good in 53% (98 people) and excellent in 14.6% (27 people). Those with poorer sleep quality (47.6%) had significantly (p=0.003) worse ability to work (24%). The mean score for health and well-being was 59.2±20.2 points (a higher score on a scale of 0-100 means a worse score). The well-being score of day shift workers (62.13%) was significantly (p=0.039) higher than that of shift workers (55.96%).

CONCLUSIONS

Neither age nor health behaviour affect work ability, however, it is affected by stress and well-being at work. If an individual sleeps poorly and this is permanently present, it affects his or her ability to work and is significantly reduced. Those with very good / excellent health are exposed to lower work-related stress.

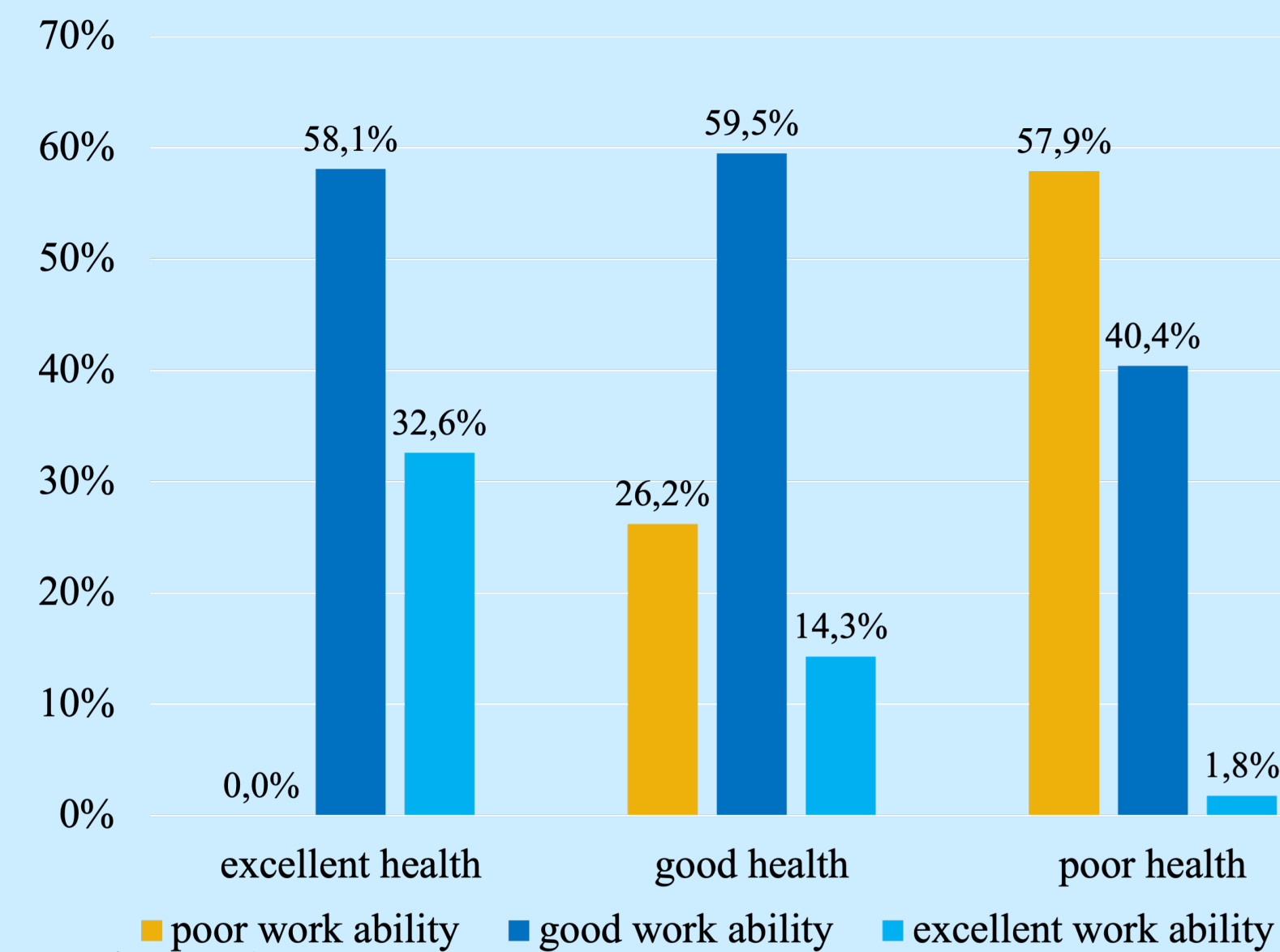


Figure 1.

Distribution of work ability based on self-assessment of health status (n=184)

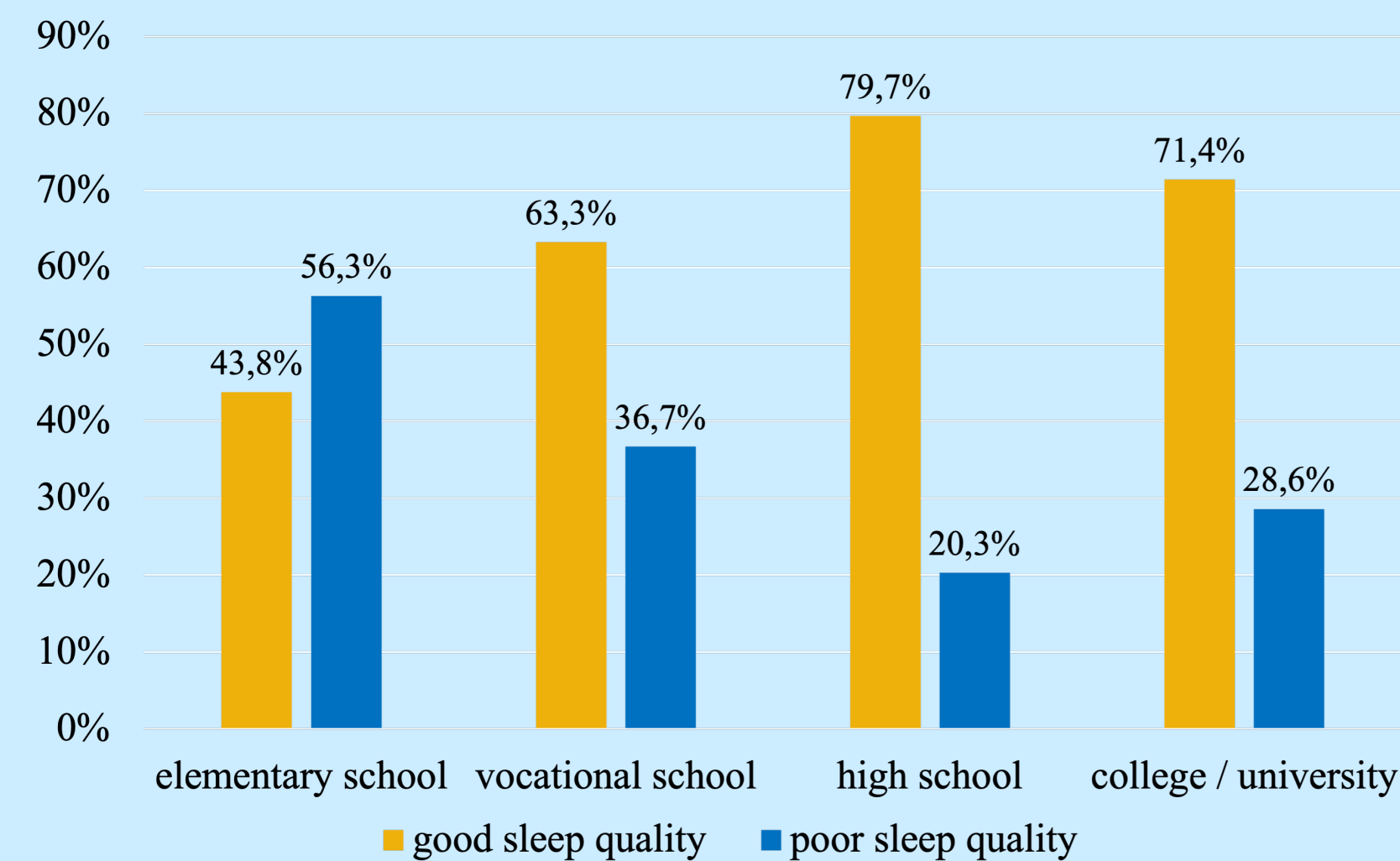


Figure 3.

Sleep quality by education level (n=184)

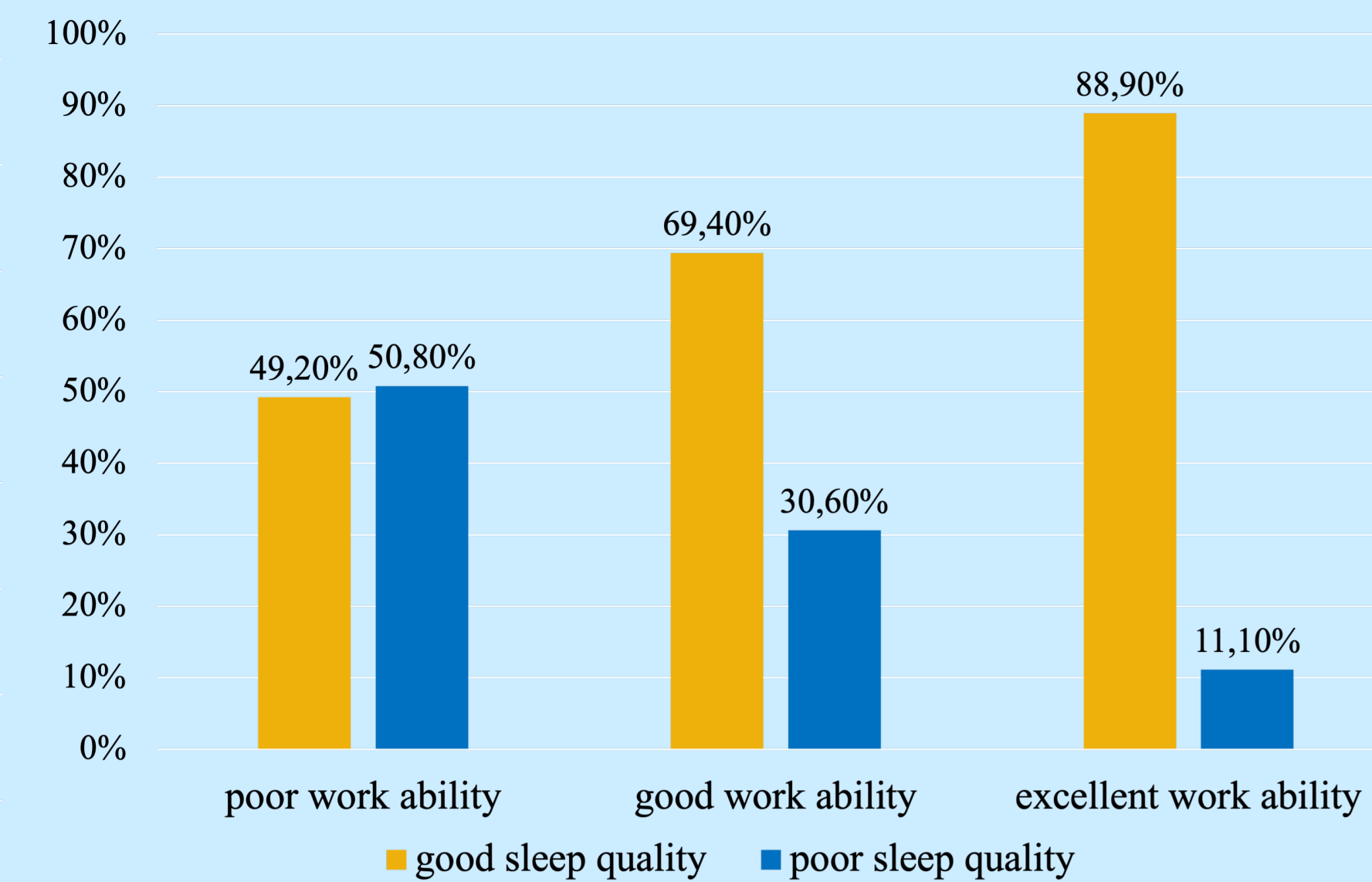


Figure 2.

Distribution of work ability based on sleep quality (n=184)

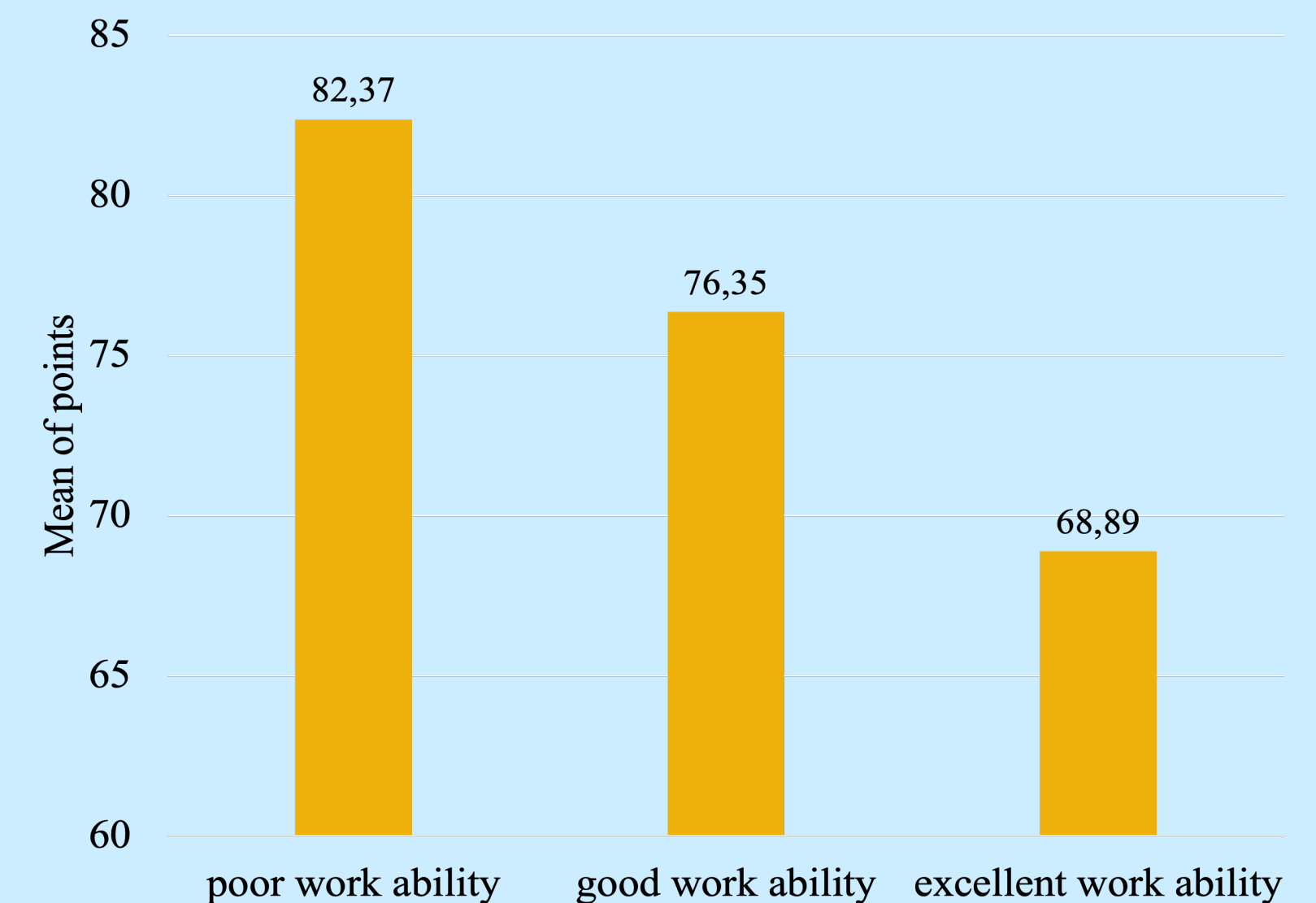


Figure 4.

Over-commitment average scores by the work ability (n=184)

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86

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