







3RD-4TH NOVEMBER 2024, IDCC IDEAL CONVENTION CENTRE, SHAH ALAM, SELANGOR, MALAYSIA

Contributing factors of Mental Health Issues among Women Healthcare Providers and Future Strategies: A Literature Review

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INTRODUCTION

Health professionals are responsible in providing preventive, curative, rehabilitative, and promotional health services related to diagnosing and treating diseases or managing issues related to the illnesses. The increasing number of women in healthcare workforce, coupled with their traditional homemaking roles and additional career demands, has heightened their mental health burden. In Malaysia, the health workforce is mainly composed of women in most professions, with the exception of specialist and assistant medical officer roles. Nearly all nurses (95%) are female, and a significant majority of pharmacists (72%) and dentists (69%) are also women.

OBJECTIVE

This study seeks to identify the factors impacting the mental health of female healthcare providers and the associated effects, with the aim of improving their quality of life.

METHODOLOGY

This study utilized a systematic literature review to collect and analyze existing data on factors affecting mental health among women healthcare provider. The review focused on peer-reviewed journal articles, reports, and other relevant sources published between 2016 until 2023.

FINDINGS

Percentages of Malaysian Women in Workforce (%)

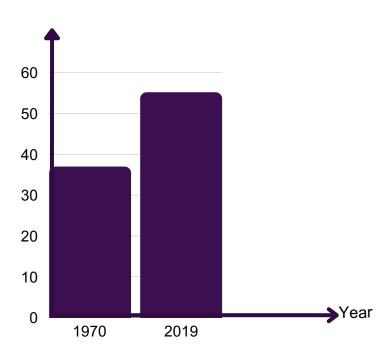


Figure 1: Statistics of women in Malaysian workforce according to year

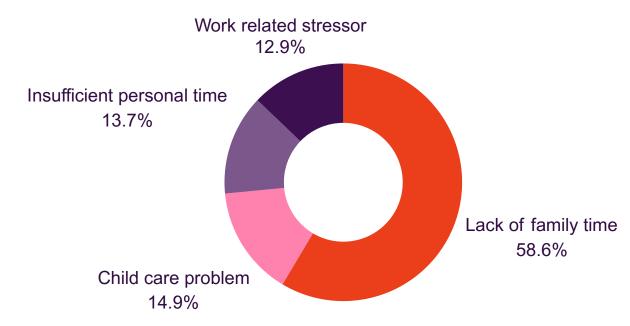


Figure 2: Issues affecting poor mental health outcome in women healthcare worker

Challenges face by women in workplace

- Breastfeeding (unsuccessful exclusive breastfeeding at 6 month of 58.3%)
- Difficulty taking leaves (55.0%)
- Pregnancy (40.0%)
- Bullying (29.4%)
- Limited career advancement opportunities (15.7%)
- Long working hours (14.5%)
- Psychological abuse (8.9%)
- Sexual harassment (6.6%)
- Limited advancement opportunities (15.7%)

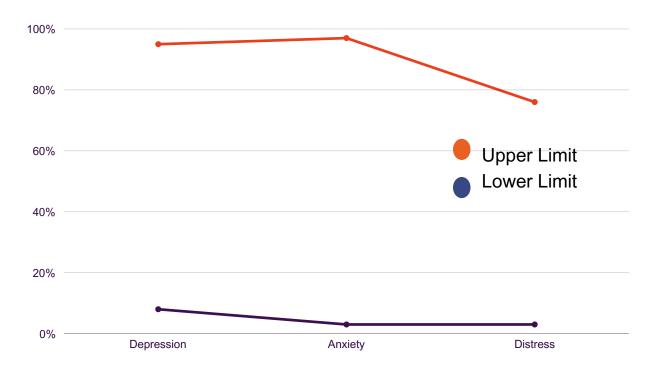


Figure 3: Variation of mental health issues among healthcare worker

CONCLUSION

Women healthcare providers are the core of the nation's health system. The mental health challenges among them are significant and shall be addressed effectively. Thus, we want to ensure that women healthcare providers are physically and mentally healthy, following Sustainable Development Goal 3 in ensuring healthy lives and promoting well-being for all ages. We propose biopsychosocial approaches to create mental health awareness in the community. They should be encouraged to practice healthy lifestyles such as regular physical activities, adequate nutrition and sleep. Appropriate pharmacological treatment should be considered when it's indicated. Referrals for counselling or cognitive-behavioural therapy are recommended as effective psychotherapeutic options. Mental health helplines like HEAL, Telenita, and MHPSS are available in Malaysia. The support of families, particularly spouses, is equally vital. They play a crucial role in helping female healthcare providers maintain a healthy balance between work and family life, especially in the context of child-rearing. Understanding and empathy from family members can significantly contribute to the mental well-being of these providers. Employers should encourage teamwork, peer support, effective management, and enhanced mental health oversight among female healthcare workers. Workplace rights of female healthcare workers need to be upheld by management and the Ministry of Women, Family and Community Development, potentially in collaboration with government and non-government organizations like PUSPANITA (Persatuan Suri dan Anggota Wanita Perkhidmatan Awam Malaysia), AWAM (All Women's Action Society) or WAO (Women's Aid Organisation), to address the mental health issues at the workplace.

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