

Original Article

Evaluation of the Media Usage Status and Mental Status of Women

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Abstract

Aim: This study was aimed to examine the media use status and mental status of women and their relationship with each other.

Material and Method: This study was made as sectional on the date between 01.01.2016-01.12.2016. The research's universe consists of women ages ranged from 15 to 49 years that apply to the five different Family Health Center in Erzurum province in Turkey. The all population was taken by sampling and the research was completed with 747 women. The personal questionnaire form, which was formed after searching the literature by the authors and General Health Questionnaire (GHQ)-12 and were used collecting tool.

Results: It was occurred women scored average 1.87 ± 2.39 from GHQ-12 and the %41.6 of women took ≥ 2 points that means their mental health is risky. It has been determined that situations such as low income, living in fragmented families, not following the news, and not keeping up to current events adequately affect women's mental health ($p < 0.05$). Some approaches should be made to protect and develop the mental health of women by nurses for mental illnesses in the family health centers.

Keywords: Woman, media, mental health, nursing.

Introduction

Although being mentally healthy varies from culture to culture, it is mostly accepted as "the individual to be in a dynamic balance and harmony with oneself and the environment" (Oguz, 2010; Baynal, 2015). Protection and maintenance of the individual's this balanced state is within the scope of health improvement (Ozbas and Ozkan, 2010). Considering the health of women constituting nearly half the world's

population and mental and social well-being as well as the factors affecting these should also be examined. Health and disease patterns in men and women show significant differences (Nalbantoglu, 2011). The differences regarding women's health are influenced by numerous factors such as the psycho-social factors originating from family and community, personal health status of woman, fertility behavior (Ozbas and Ozkan, 2010). Being a woman brings about

struggling with acute though life experiences and chronic social challenges. Women are at a greater risk in terms of mental diseases due to reasons such as hormonal factors in women, exposure to violence since childhood, suppression from the aspect of assertiveness, obedience, learning to be passive and dependent, social roles of women (housework, childcare, duty towards a partner), low education and income opportunities, unemployment, low socioeconomic status, exposure to discrimination (Oguz, 2010; Buzlu, Bostanci, Ozbas and Yilmaz, 2006). Due to a variety of reasons as these ones, women face with stress more and psychological problems are more common among them (Koyun, Taskin and Terzioglu, 2011). The lifetime incidence of depression in women is approximately 1.7-2.7 times more than men (WHO, 2014). However, according to the predictions of World Health Organization for the future, depression will be the leading disease-causing ability loss in women and developing societies in 2020 (Akdeniz and Gonul, 2004).

According to the studies conducted, the number of people experiencing mental difficulties due to social, economic and political conditions is gradually increasing (Cavus, 2006; Yalcinkaya, Ozer and Yavuz, 2007; Ozturk and Ulusahin, 2008). The impact of mental disorders on people, families and societies is quite high. By experiencing the difficulties caused by these disorders, people have difficulty in attending work and social life and are often excluded from society. They feel anxiety and sense of worthlessness, thinking that they cannot fulfill their responsibilities to their family and they are burden. In the meantime, the normal family order of people is deteriorated and social life is restricted (Kelleci, Asti, Kucuk, 2003; Bozdogan, 2007; Altinel, 2008). In addition to many factors affecting health, technological advancement and the significant role of mass media in people's lives definitely affects people's lives negatively and positively. Our rights and wrongs, family perception and perspective on life changes via the mass media. Today, people experience mental distresses and tensions as a result of these changes and developments (Aktas, 2016; Kurar and Baltaci, 2015; Etiler, 2015).

Information sources such as newspapers, television and Internet are not only the tools to turn to in order to find out what is going on in the country and in the world, but also they are in a

position suggesting how to get dressed in certain occasions, how to behave oneself properly, how to eat, what kind of music to listen to, what kind of attitude to be assumed under which condition, who spouses should treat each other, what should families like and also in a position affecting decisions, offering options and guiding (Kucukcan 2011; Tiggemann and Miller, 2010; Sonmezer, Cetinkaya and Nacar, 2012; Aktas, 2016). Women's mental health seems to be at a greater risk compared to men. The mental status of women who play a leading role in the education of children that will shape the future needs to be examined in terms of various factors. This study was conducted to examine the media use and mental status of women and their relationship with each other.

Methods

Materials and Methods: This descriptive and cross-sectional research was conducted between 01.01.2016-01.12.2016. The research population was composed of all women aged 19 and 45 years who admitted to five Family Health Centers located in the city center of Erzurum due to any reason between 01.01.2016-01.12.2016. No sample selection was performed in the research, and 747 women who admitted to FHCs within this time period, who could cooperate, who were voluntary to participate when they were informed about the study and who were literate. For collecting of the data, written and oral consents were obtained from the individuals and face-to-face interview technique was used.

The research data were collected using the personal data form created by the researchers and the General Health Questionnaire (GHQ-12).

Personal data form: It was created by researchers in order to determine the socio-demographic data of the women, whether they watched TV or not, and their level of following current events.

General Health Questionnaire-12 (GHQ-12): The "General Health Questionnaire" is a self-administered questionnaire questioning the mental signs within the last week mental and aiming to reveal mental disorders among the public and among participants in the non-psychiatric clinical settings. The "General Health Questionnaire" was developed by David Goldberg in 1972. Its translation into Turkish as well as its validity and reliability studies were carried out by Kilic. The validity and reliability sensitivity was 0.74 and specificity was shown to

be 0.84, respectively (Bingol, Gebes, Yavuz, 2012).

The cut-off value of the scale is 2. Those scoring 2 points or more are considered risky. In the present study, the Cronbach's alpha coefficient of the scale was detected to be 0.81.

Data assessment: SPSS program was used for statistical analysis of the data obtained from the research. While evaluating the data, first, the data were determined to be non-homogenous and non-parametric tests were applied. The statistical operations performed included percentage calculations, means, the Kruskal Wallis test, Mann Whitney U test and correlation analysis. $p < 0.05$ was accepted as statistically significant.

Ethical Aspects of Research: First of all, the permission of the ethics committee was obtained from Atatürk University. In order to protect the rights of the individuals within the scope of research, the following ethical principals were fulfilled; the principle of "Informed Consent" by explaining the purpose of the research, the principle of "Confidentiality and Privacy Protection" by stating that the data obtained would be kept confidential, and the principle of "Respect for Autonomy" by enrolling those who were volunteer to participate in the research

Research limitations: The results of the research were limited to women who lived in Erzurum and who agreed to participate in the research. The fact that the research could not be resumed during the coup attempt on 15 July 2016 and the following three months is also one of the limitations of the research.

Results

The mean age of 747 women participants was observed to be 30.95 ± 7.99 . No statistically significant relationship was determined between GHQ-12 and age ($r = -0.056$, $p = 0.127$) as a result of the correlation analysis carried out with the mean scores of the GHQ-12 scale (Table 1).

As it is seen in Table 1, 35.5% of women were university graduates with respect to their education levels and 77.2% of them were observed to be unemployed when their employment statuses were examined. Both education level ($p = 0.233$) and employment status of the women ($p = 0.099$) were analyzed in terms of the mean scores of GHQ-12, no statistically significant difference was noted among the groups. Examining the women in terms of their income levels revealed that the income was equal

to expense in 67.7% of the women, that it created a statistically significant difference in terms of the mean scores of GHQ-12 ($p = 0.000$) among the groups and that the women whose income was expense scored lesser from the GHQ-12 at a significant level (Table 1). The majority of the women (77.2%) had a nuclear family, followed by 21.8% with a large family, and 0.9% with fragmented family. When the differences among the groups were examined in terms of GHQ-12, the mean GHQ-12 score of the women with fragmented family (4.57 ± 2.63) was determined to be higher in a statistically significant manner ($p = 0.007$, Table 1).

Of the participating women, 81.3% answered "yes" to the question of "Do you watch TV?" whereas 5.2% answered "no". When the groups were examined in terms of the mean GHQ-12 scores, no difference was observed ($p = 0.970$). It was observed that the variable of program type followed by the women was not effective on GHQ-12 and that there was no statistically significant difference among the groups ($p = 0.086$, Table 1).

Of the participating women, 87.3% answered "yes" to the question "Do you watch the news?" and there was a statistically significant difference among the groups ($p = 0.002$). However, when the mean GHQ-12 scores were examined in terms of the variable of news type, it was determined that there was no statistically significant difference among the groups ($p = 0.101$, Table 2). It was observed that 60.4% of the women participated in the research answered "yes" to the question of "Do you think you can follow current events?" and 30.4% of them answered "yes, but I do not think it is adequately". A statistically significant difference was noted among the groups when the mean scores were examined among the groups in terms of GHQ-12 score ($p = 0.000$, Table 2). Of the women followed the current events, 50.2% were determined to follow from the sources such as television, newspapers, magazines and only 3.4% followed from the conversations with neighbors, friends or relatives. The analysis performed revealed a statistically significant difference among the groups ($p = 0.005$). A great majority of women (74.4%) were observed to have a time only spared for themselves. The analysis performed revealed a statistically significant difference among the groups ($p = 0.000$).

The mean of the total score of GHQ-12 in 747 women included in the study was determined to be 1.87 ± 2.39 . In the present study, 41.6% of the women were found to score a mean score of 2 points or higher from GHQ-12 (Table 3).

Table 1. Comparison of Women's Introductory and Media Characteristics with Their Mean GHQ-12 Scores

Descriptive Characteristics			GHQ-12	
	n	%	X±SD	Test and p value
Age	30.95±7.99 years		r=-0.056	p=0.127
Educational status				
Illiterate	62	8.3	1.98±2.07	KW= 5.573 p=0.233
Literate	82	11.0	1.57±2.21	
Primary education	193	25.8	1.87±2.40	
High school	145	19.4	1.75±2.43	
University	265	35.5	2.01±2.49	
Employment Status				
Yes	170	22.8	1.73±2.48	MW-U=45134.00 p=0.099
No	577	77.2	1.91±2.36	
Income level				
Income less than expense	128	17.1	2.69±2.76	KW= 17.078 p=0.000
Income equal to expense	506	67.7	1.68±2.20	
Income more than expense	113	15.1	1.78±2.57	
Family type				
Nuclear family	577	77.2	1.82±2.40	KW= 9.965 p=0.007
Large family	163	21.8	1.93±2.28	
Fragmented family	7	0.9	4.57±2.63	
TV watching status				
Yes	708	81.3	1.87±2.38	MW-U=13758.50 p=0.970
No	39	5.2	1.97±2.58	
The most commonly watched program types on TV				
I do not follow any program	16	2.2	1.93±2.26	KW= 11.090 p=0.086
Series	219	30.5	2.03±2.35	
Daytime programs	94	13.1	2.19±2.85	
Magazine programs	30	4.2	2.10±2.80	
Contests	75	10.4	2.01±2.80	
Programs about health	69	9.6	2.00±2.33	
Child programs	19	2.6	2.31±2.40	
Those following more than one program type	196	27.3.	1.43±1.97	

Table 2. The Kruskal Wallis and Mann Whitney U test Analysis Results of the Mean GHQ-12 Scores According to Demographic Variables

Descriptive Characteristics			GHQ-12	
	n	%	X±SD	Test and p value
Status of watching the news				
Yes	652	87.3	1.78±2.38	MW-U=25029.50 p=0.002
No	95	12.7	2.49±2.39	
The most appealing news recently				
Magazine news	24	3.7	1.37±1.76	KW= 6.218 p=0.101
Violent news	158	24.2	1.96 ± 2.48	
Any news about my country	217	33.3	1.50±2.11	
Policy news	253	38.8	1.95±2.55	
Following current events				
Yes	451	60.4	1.63±2.27	KW= 16.220 p=0.000
No	69	9.2	1.98±2.33	
Yes, but not adequate	227	30.4	2.31±2.57	
Source of following current events				
TV, newspaper, magazine	326	50.2	1.76±2.29	KW= 12.991 p=0.005
Internet media	160	24.6	2.01±2.63	
From conversations with neighbor, friend or relative	22	3.4	3.95±3.53	
Those who use more than one route	142	21.8	1.47±1.94	
Sparing time for oneself				
Yes	556	74.4	1.61±2.16	MW-U=40888.00 p=0.000
No	191	25.6	2.64±2.82	

Table 3. Mean GHQ-12 Scores of Women

GHQ-12	n	%	X±SD
Individuals scoring less than 2 points	436	58.4	0.29±0.45
Individuals scoring 2 points and more	311	41.6	4.09±2.24
Total	747	100	1.87±2.39

Discussion

According to the results of the study examining the media use of women and their general health status and their relationship with each other, it was determined that there was no significant relationship among the mean GHQ-12 scores. When the literature was reviewed, there were also the results of other studies showing no relationship between GHQ-12 and age (Bingol, Gebes and Yavuz, 2012). It can be considered as

a sign that women can face various mental problems unrelated to their ages. The results of this study seem parallel to the study results in the literature.

When the education levels and employment status of the women participating in the research were examined in terms of the mean GHQ-12 scores, it was found that there was no statistical difference among the groups. The literature review showed that there were studies indicating

that there was no significant difference between the education levels of women and GHQ-12 (Kelleci, Asti and Kucuk, 2003; Kilic and Uzuncakmak 2016).

However, there are also the studies in which the mean GHQ-12 scores of the employed individuals were found to be significantly low (Etiler, 2015). In the present study, the lack of a significant relationship between GHQ-12, and the employment statuses and education levels was attributed to the perspective of the region where the study was conducted on women.

A significant relationship was found between the income level of the women and their mean GHQ-12 scores in the research (Table 1, $p < 0.05$). Depressive symptoms were reported to be at higher rates in individuals with lower economic levels in the studies conducted (Bingol, Gebes and Yavuz 2012; Cagan and Pehlivan 2012; Kilic and Uzuncakmak, 2016). Our research findings are consistent with the literature. The lack of women's economic power to afford their personal needs is considered to cause helplessness, development of frustration, feeling unhappy and consequently, the development of psychological problems in women.

The mean GHQ-12 scores of the women with fragmented family (4.57 ± 2.63) were found to be high enough to produce a statistically significant difference ($p = 0.007$). When the studies in the literature were examined, the mean GHQ-12 scores of the individuals with bad family relationships and family environment were found to be higher. These people are defined as more risky groups in terms of mental health (Kelleci, Asti and Kucuk, 2003; Bingol, Gebes and Yavuz, 2012; Kilic and Uzuncakmak, 2016). The study by Hoeymans et al. indicated that the rates of having mental problems by divorced women were higher (Hoeymans, Garssen, Westert and Verhaak, 2004). The result of our research is similar to the other research conducted, and it is considered that the women with fragmented family are a risk group in terms of mental health, which is a consequence of the traumatic events such as death and divorce and subsequently, financial difficulty experienced by women.

Watching TV by women ($p = 0.970$) and type of TV program followed in the TV ($p = 0.086$) were determined to not to cause a significant difference on GHQ-12. The reason for the media claimed to have an effect on the changing of the

cultural structure and lifestyle not to be able to affect the mental health of adult women is considered to originate from the fact that their personalities are already formed. The mean GHQ-12 scores of the women watching the news were found to be low at a significant level ($p = 0.002$) whereas the news type watched was found to not to have an effect on GHQ-12 ($p = 0.101$). The fact that the women who follow the news are aware of the events, informed about the events, and that having information about the environment has a positive effect on the mental health. Not watching the news, living in their shells without being aware of their surrounding may suggest that the individual may be more depressed and emotionally fragile.

Although there are studies examining this issue and carried out for identifying the general health statuses of women, no study examining the effect of media on the general health statuses of women was encountered.

It was detected that more than half of the women followed up current events and this created a positive effect on the women's mean GHQ-12 score ($p = 0.000$). Whereas the mean GHQ-12 scores of the women who stated that they followed current events from conversations with 'neighbors, friends or relatives' were determined to be high enough to create a significant difference. It is striking finding that following current events from the conversations with neighbors, friends or relatives affected the mental health of women more negatively than the media tools such as television, newspaper, magazine, internet. This suggests that women are more influenced by mental terms when they found out current information through relatives or friends.

The mean GHQ-12 scores of the women sparing time for themselves were found to be significantly lower (Table 2). When the literature is examined, the people who spent time in a more quality way and more actively were observed to feel better in spiritual terms (Kurar ve Baltaci, 2015; Etiler, 2015). It is also seen in this study that if women spare time for themselves, and do something for themselves, this positively affects their mental health.

GHQ-12 was used to assess participants' mental problems in the present research. Those scored 2 or more in GHQ-12 assessment are considered as the high-risk group. The mean GHQ-12 score of the participating women was 1.87 ± 2.39 and

41.6% of them scored a score that can be said to be risky mental health (≥ 2). This ratio which almost constitutes half of the women was considered to be important since t showed that many women had mental symptoms and that going for further psychiatric diagnosis was necessary. This result obtained from the research was found to be lower than the studies in the literature (Kucuk and Bayat, 2012; Cagan and Pehlivan, 2012, Kilic and Uzuncakmak 2016; Kelleci, Asti and Kucuk, 2003). The reason for this is that people are more knowledgeable about mental illnesses than they were in the past and that they can access psychiatric services more easily, suggesting that people can express themselves healthier and better compared to past.

Conclusion and Recommendations

As a result of the study, the mean GHQ-12 score admitting to the primary healthcare was 1.87 ± 2.39 and 41.6% of them were determined to score a point that can be considered risky in terms of mental health (≥ 2). In the light of the data obtained from research, screening for mental disorders should be performed in the primary healthcare and nurses should make approaches for protecting and improving the mental health of women.

Conditions such as having a low income, living in a fragmented family, not following the news, and not keeping up with current events adequately were determined to affect the mental health of women negatively. Also, learning current from relatives, neighbors or friends affected the mental health of women more adversely than getting information through the media. In line with these results, it can be suggested that women's media use is increased.

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