## Sources of Stress among Nurses at Tertiary Hospitals

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#### Abstract

Every human face stress at every level of life as with the passage of life, type of stress has changed. As humane enter into the professional life he/she faces different types of stress. Stress is a crucial factor influencing employees' job satisfaction and organizational commitment, which are key turnover predictors. Occupational stress occurs when there is an imbalance between the demands of the work place and a worker's ability to cope(Tuna & Baykal, 2014). Stress is defined as "adaptive response to a situation that is perceived as challenging or threatening to a person's to well-being" It has become global problem for working individuals in North America, Europe, and Asia (Ngotngamwong, 2018). A study reported that there is need of special attention by government to enrich the quality of healthcare segments as it is the primary source to provide aid and hope to the patients and relative of them. Health care significant is also clear from the point of view that it provides help to sustain human capital (Fatima et al., 2017) .quantative descriptive cross sectional design will be used in this study .In this study target population will be the registered nurses working at Jinnah hospital Lahore. The samples were selected from Jinnah hospital Lahore. Data will be collected through convenient sampling technique .the data were analyzed using software. Statistical package for social science (spss version 21). Overall the mian finding is that all health professionals and hospitals consultants ,general practitioners and senior health service managers(Weinberg and creed, 2000). Its indicated that work stress was not influenced by the educational level the gender, the marital status, the language of the employee. This result goes along with the importance of treating difficulties outside the workplace in order to decrease the prevalence of anxiety and stress. Keywords: work stress; sources of stress; stress outcomes.

#### Introduction

Stress is a crucial factor influencing employees' job satisfaction and organizational commitment, which are key turnover predictors. Occupational stress occurs when there is an imbalance between the demands of the work place and a worker's ability to cope(Tuna & Baykal, 2014). Work is an essential need for everyone. It is estimated that over 75% of adult's non sleeping, time is devoted to job activities and people find satisfaction and personal identity by means of their employment, among life events the workplace stands out (Alio, 2016). As a potentially important source of stress purely because of the amount of time spent in this setting (Scott, 2012). Stress tends to influence the brain and reduce some of its functionality such as memory, concentration and learning and damages the immune system; all of them are the vital part for the effective and efficient job performance. Further it also due reduce the efficiency and effectiveness managerial pressures and makes the individuals weak in different ways, evidence of which is still increasing(Chapman, 2015). A study reported that there is need of special attention by government to enrich the quality of healthcare segments as it is the primary source to provide aid and hope to the patients and relative of them. Health care significant is also clear from the point of view that it provides help to sustain human capital (Fatima et al., 2017). The nursing profession is linked with different job-related demands that play a role in generating stressful work settings. Studies have reported that stressors create considerable job stress among the nurses which can lead towards the low quality of services and health disorder (Kawano, 2008). Nurses establish the largest group of individuals in the healthcare workforce and do play important role in provision of care services, so their health may influence the quality of healthcare (Jaradat, 2017). According to (Nayomi, 2016) stress is "an adaptive response to an external situation that results in physical, psychological, and/or behavioral deviations for an organizational participant". Abilities are not use properly, ineffective communication system, promotion on personal relationship, limited opportunities for enhance the development, short breaks, absence of appreciation for good work cause stress in the nurses' (Dawson, Stasa, Roche, Homer, & Duffield, 2014). Lack of stability at home, ambiguity in the job roll, lack of spouse satisfaction with job, having to work long hours, disagreement with subordinate or head of the department, unclear promotion requirements, lack of power and influence, is also cause stress(BIRHANU, 2015). Working hours do not match with personal life cause stress in nurses, frequently change work shift also generate stress, and absence of cooperation with collogues on work environment cause stress (Al-Omar, 2003). Feeling isolated on work environment, dealing with risky task, working with opposite sex difficulties in having vacation, less participation in decision making, lack of technical facilities cause of stress in nurses in working environment(Harper, 2015).

#### Method

Quantitative descriptive cross-sectional design was used in this study. Data was collected from the registered Nurses. All registered staff nurses' age from 21 years to 40 years working in Jinnah Hospital Lahore include in this study. Qualification included Diploma in General nursing/Specialization, BSN (Generic) and BSN (Post RN), And those nurses who show willingness to participate and was present on duty was included in the study. All those nurses were less than 21 years and more than 40 years were excluded. The Head nurses, student nurses, on leave staff nurses were also not be included in this research, And all those nurses was not show willingness also be excluded from this study. Data was collected by using convenient sampling technique. The data was analyzed by using the Software Statistical Package for Social Sciences (SPSS) version 21. Tables, graphs, charts, and percentages are used to present the data.

#### **Results and Discussion**

Overall, the main finding is that all health professionals and hospital managers agree significantly that they experienced work-stress. This result is similar to those found in a study conducted on hospital consultants, general practitioners, and senior health service managers (Weinberg and Creed, 2000). It also supports the assumption that health sector employees are among the highest groups subjected to work stress. Knowing the significant positive correlation between work-stress level and costly negative outcome such as quitting the practice or changing the hospital or the job must ring a bell to all decision makers, especially that Saudi Arabia faces very serious problems in health-related manpower. Working in any area of hospital results in stress Anyhow, some units of the hospital such as intensive care units; emergency units etc. are more stressful as patients in these units require great level of care and attention from the attendant. These unites require immediate and quick response from the nurses and results in high stress level (Aly & El-Shanawany, 2016). Results also indicated that work-stress was not influenced by the educational level, the gender, the marital status; the language of the employee .This might have something to do with the employee's community and social obligations. This result goes along with the importance of treating difficulties outside the work place in order to decrease the prevalence of anxiety and stress. Age and experience showed negative correlation with stress which could be interpreted by the fact that the older and experienced the worker, the more ability he/she has to cope with stress. Based on these results the professionals needs to work hard in order to have sufficient technical facilities. Therefore, it is wise that the hospitals provide health services to non-eligible through the cooperative health insurance scheme. This will generate more financing ability to hospitals which allow them to improve the available technical facilities. Good quality management requires hospital management to show appreciation whenever a good work is performed. Study concludes that health care professional experience the work related stress. Especially nurses results indicate that health organization need to facilitate the employee to cope with the situations.

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This chapter includes the descriptive and inferential statistics to explore the aim and objective of the study. **Gender of nurses** 

#### Table 1

gender of the nurses				
Female	Frequency 175	<b>Percent</b> 100.0		

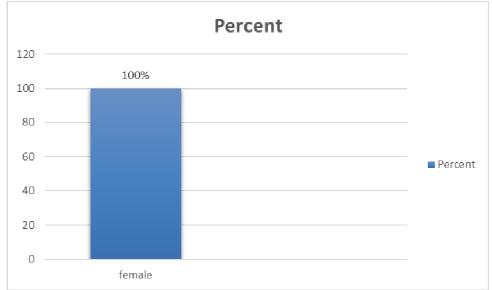


Table 1 shows the frequency and percentage of gender of the nurses. 175(100) are female.

Table	2
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marital	status of the nurs	es
	Frequency	Percent
Married	94	53.7
Unmarried	81	46.0
Total	175	100.0

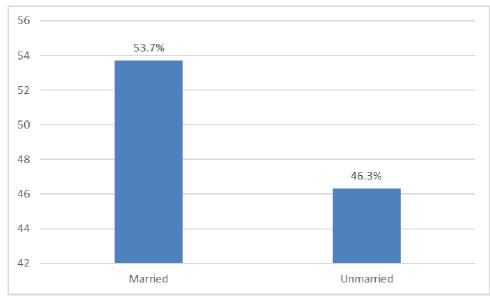


Table 2 shows the frequency and percentage of married and married nurses. 94(53.7) are married and 81(46.3) are unmarried.

# Table 3

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tay in organization of the nurses		
	Frequency	Percent
less than 5 year	17	9.7
6-10 years	58	33.1
11-15 years	66	37.7
16-20 years	34	19.4
Total	175	100.0

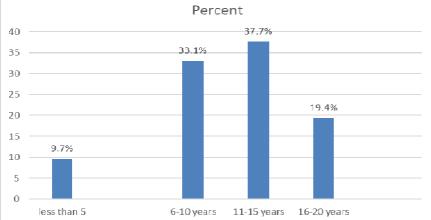


Table 3 shows the frequency and percentage of duration in organization.17 (9.7) are less than 5 years and 58(33.1) nurses are working 6 to 10 years and 66 (37.7) nurses from 11 to 15 years and 34(19.4) nurses from 16 to 20 years.

	Mean	Std. Deviation	decision
stay in organization	2.67	.899	Low stress
Working -hours do not fit with my personal life.	3.70	.841	High
Job-requirement is more than my ability.	3.53	.999	Neutral
Work shifts are changing frequently.	3.64	1.256	High
Absence of cooperation between colleagues.	3.33	1.008	Neutral
My abilities and talents are not used properly.	3.92	.656	very high
Supervising the work of other people.	3.39	.863	Neutral
Patients lose temper very quickly.	3.70	.739	High
Hospital objectives do not match mine	4.11	.979	very high
Ineffective communication system.	4.05		very high
Unclear Hospital-policies.	3.55	.793	High
Unfair Performance evaluation.	3.78	1.179	High
Promotion depends only on Personal relationship.	3.22		medium stress
Limited opportunities for enhancement and development in this hospital	4.03	1.119	very high
limited opportunities for education in this hospital	4.13		very high
Improper relationship with colleagues.	3.59		High
Short breaks is sources of stress	3.02		medium stress
Unhealthy work environment is sources of stress	3.99		very high
Salary does not match with the required tasks.	3.59	.978	High
Absence of financial incentives.	4.03	1.116	very high
Absence of appreciation of good work.	4.04		very high
Having to adapt negative decisions(i.e.sacking an employee)	4.03		very high
Conflicting requests.	3.55		0
Lack of stability at home.	3.62		High
Lack of ability to catch up with the rapid technology	3.10		medium stress
Ambiguity in the job roll.	3.58		High
Attending lots of committees.	4.03	.787	very high
Lack of spouse satisfaction of my job.	3.19		medium stress
Having to work long hours.	4.02		very high
disagreement with subordinate or head of department	3.20	1.174	medium stress

Unclear promotion requirements.	4.02	.788very high
Lack of power and influence.	3.18	1.175 medium stress
Threat of not re-contracting.	3.21	1.176 medium stress
Feeling isolated is sources of stress.	4.03	.780very high
Being not respected is sources of stress.	4.03	.784 <mark>very high</mark>
Dealing with risky job or tasks.	4.03	.791very high
Working with opposite sex is sources of stress.	3.17	1.186 medium stress
Difficulties in having vacations (or leaves).	4.05	1.124very high
No participation in department's decision making.	3.19	1.173 medium stress
Insufficient technical facilities are sources of stress.	3.89	1.137very high

Inferential statistics

The differences in work-stress level due to socio-demographic variables

(ANOVA and t-test)

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