Professional Stressors and Coping Strategies Among Nurses

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Abstract

Stress affects the work life balance and quality, which is also inclusive of happiness, interpersonal relations and family related life. Additionally, it argued that stress may also result in unnecessary work absenteeism, high level of turnover, early retirement from the job, low efficiency and effectiveness, and also the low quality of products and services (European Foundation for the Improvement of Living and Working Conditions, 2014; (Jacobs et al., 2018). In health sector nurses are facing the high level of stress, highly disturbed work life balance etc. Previous studies suggest that nurses which do experience high level of work-related stress, such kind of higher degree stress can endanger their health and lives of the patients, (Phillips, Hall, Elmitt, Bookallil, & Douglas, 2017). A Quantitative descriptive cross-sectional design was used in this study. Findings of this study showed that respondent's experienced high level stress from the stressors at work, with the highest level of stress is linked to the unease, nervousness, depression, and restlessness. The present study also showed that ''relational issues'' caused low level stress for the nurses. The study concludes that organizational issues are more important cause of work related stress. The convenient sampling method was use to select the respondents. Sample size of this study was 175 Nurses.

Keywords: Stressors; stress; coping strategies.

Introduction:

Stress has emerged as important concern in recent years. It is globally admitted that stress has influence psychological and physiological health of individuals and this state has become major concern for all kinds of organizations. Further, it has also become the major concern for the employees as well. Sometimes, organizational stress and burnout is the major concerns of the decade (Moustaghfir, Schiuma, & Carlucci, 2016). Stress is global issue and results in costs for both the individuals and organizations. According to World Health Organization it affects more than 90% of population. Stress is the major reason for low performance, satisfaction and welfare of individuals, professional and personal development and finally results in higher financial costs (Ribeiro, 2015). Nurses are work in stressful work settings (Aziz, 2004) and this sector has become major concern of studies due to its influence on the life of professionals. A study has confirmed that nurses experience greater level of stress as compared to other general working professionals (Firth-Cozens, 2003). Further, studies have also enlightened that stress adversely affects the physiological and psychological welfare of nurses (Liem et al., 2015). Furthermore, stress also does affect the work life balance and quality, which is also inclusive of happiness, interpersonal relations and family related life. Additionally, it argued that stress may also result in unnecessary work absenteeism, high level of turnover, early retirement from the job, low efficiency and effectiveness, and also the low quality of products and services (European Foundation for the Improvement of Living and Working Conditions, 2014; (Jacobs et al., 2018). Coping strategies are important to cope with the stress and to do job in the best manner. It is important for an individual to select the best coping strategy as wrong strategy may worsen the situation. Previous study supports this phenomenon by arguing that students' stress in their clinical practices can be changed and influenced by their coping strategy, they choose to imply. Effectiveness of coping strategy helps the students to perform better in their studies; strategies to cope also help them to get rid of students' stress. It was noted that the best and most useful strategies to cope the stress are as follows; solving the problem, transference (to have positive attitude towards the stressful situation) and relentless optimism (Aedh, Elfaki, & Mohamed, 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

The major findings of the study, implication for nursing the study was conducted to determine level of stress experienced by nurses; Findings showed that respondents experienced high level stress from the stressors at work, with the highest level of stress obtained from work organizational issues (3.00) was the greatest stressor for the respondents. Work related stress is linked to the unease, nervousness, depression, and restlessness. Further, physiological and psychological weakness is also meant to be related with the stress (Jacobs et al., 2018). The present study also showed that "relational issues" caused low level stress for the nurses. This is contrary to Parikh, et al (2004) who found that shift work is highly prevalent among nurses and a significant source of stress. In health sector nurses are facing the high level of stress, highly disturbed work life balance etc. Previous studies suggest that nurses which do experience high level of work-related stress, such kind of higher degree stress can endanger their health and lives of the patients, it also undermine the quality of services and results in high level of health care cost (Phillips, Hall, Elmitt, Bookallil, & Douglas, 2017)

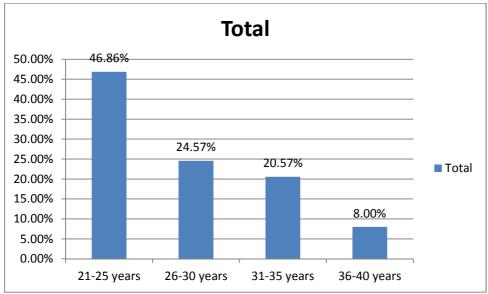
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With the name of Allah, Who is the most Beneficent and Merciful, the source of knowledge and wisdom to mankind, all respect to our last Prophet Hazrat Muhammad (S.A.W) who knew the ways of learning knowledge and wisdom for all humanity, Thanks to my dear parents who enable me to get higher education at this level. Researchers are also thankful to the principal Muhammad Afzal School of Nursing, who provide as the great opportunity to conduct research in department. It is my immense pleasure to express my gratitude to my subject faculty Mr. Muhammad Hussain associate professor School of nursing and research preceptor Mr., Muhammad Azhar faculty member school of Nursing, New campus, The University of the Lahore for providing me valuable suggestion, persistent inspiration and continuous supervisions to complete this research.

Demographic characteristics of respondents (n = 175)

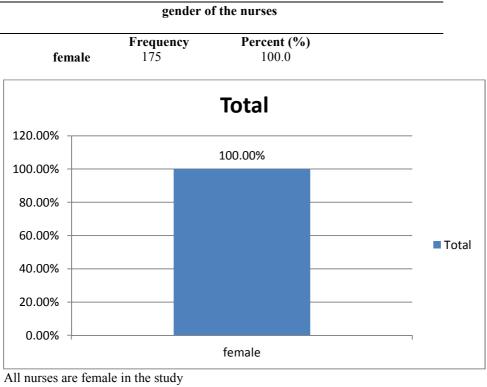
Age range

| | Age of the nurses | |
|-------------|-------------------|-------------|
| | Frequency | Percent (%) |
| 21-25 years | 82 | 46.9 |
| 26-30 years | 43 | 24.6 |
| 31-35 years | 36 | 20.6 |
| 36-40 years | 14 | 8.0 |
| Total | 175 | 100.0 |



The table show that 82 (46.8%) nurses belong to the age group of 21-25 years of age. 14(8%) nurses are from age of 36-40 years of age.

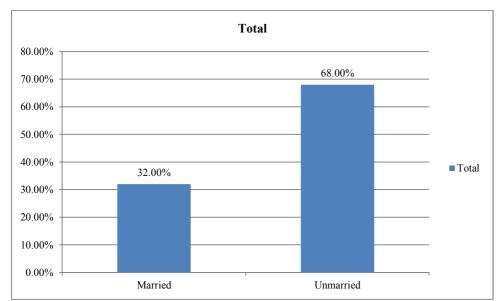
Gender of nurses Table 2



Marital status of nurses

Table 3

| marital status of the nurses | | | |
|------------------------------|-----------|---------|--|
| | Frequency | Percent | |
| Married | 56 | 32.0 | |
| Unmarried | 119 | 68.0 | |
| Total | 175 | 100.0 | |



119(68.0%) nurse were unmarried and 56 (32%) were married. Stay in organization of nurses

Table 3: Work environment issues

| Work environment issues | No Stress (f)% | Mild Stress (f)% | Moderate Stress (f)% | Severe Stress (f)% | Total f(%) |
|--|-------------------|------------------------|-------------------------|-----------------------|---------------|
| Poor lighting at workplace related stress | (9)5.1% | (45)25.7% | (68)38.9% | (53)30.3% | (175) 100% |
| Poor ventilation at workplace related stress | (26)14.9% | (35)20.0% | (70)40.0% | (44)25.1% | (175) 100% |
| Insufficient resources to Manage stress | (2)1.1% | (62)35.4% | (69)39.4% | (42)24.0% | (175) 100% |
| Unhygienic and unsafe environment related stress | (22)12.6% | (42)24.0% | (49)28.0% | (61)34.9% | (175) 100% |
| Noisy work environment related stress | (11)6.3% | (67)38.3% | (38)21.7% | (59)33.7% | (175) 100 |

| S # | Distancing coping strategy | SDA F(%) | DA F(%) | N F(%) | A F(%) | SA F(%) |
|-----|--|-------------|------------|-----------|-----------|------------|
| 1 | I went on as if nothing happened | 21(12.0%) | 25(14.3%) | 70(40.0%) | 34(19.4%) | 25(14.35%) |
| 2 | I tried to look on the bright side of life | 7(4.0%) | 10(5.7%) | 64(36.6%) | 66(37.7%) | 28(16.0%) |
| 3 | I tried to forget the whole thing | 28(16.0%) | 32(18.3%) | 33(13.9%) | 65(37.1%) | 17(9.7%) |
| 4 | I refuse to believe that it had happened. | 15(8.6%) | 30(17.1%) | 60(34.3%) | 52(29.7%) | 18(10.3%) |

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