



"A COMPARATIVE STUDY TO ASSESS THE LEVEL OF STRESS AMONG MARRIED AND UNMARRIED NURSES IN THE SELECTED HOSPITALS OF THE CITY."

Suman A Azad*	M.Sc. in Mental Health Nursing, VSPM MDINE, Digdoh Hill, Hingna Road, Nagpur – 440019 Maharashtra, India. *Corresponding Author
Susanne Mathew	Professor, M.Sc. in Mental Health Nursing, VSPM MDINE, Digdoh Hill, Hingna Road, Nagpur – 440019 Maharashtra, India
Siddeshwari Barbatkar	Lecturer, M.Sc. in Mental Health Nursing, VSPM MDINE, Digdoh Hill, Hingna Road, Nagpur – 440019 Maharashtra, India
Sushma Manwatkar	Lecturer, M.Sc. in Mental Health Nursing, VSPM MDINE, Digdoh Hill, Hingna Road, Nagpur – 440019 Maharashtra, India

ABSTRACT

Objectives: To assess the level of stress among married and unmarried nurses and to compare the level of stress among married and unmarried nurses. To find out the association between level of stress with selected demographical variables. **Material and Methods:** Non probability purposive sampling technique was used to select the sample. Comparative descriptive research design was used to assess the level of stress among married and unmarried nurses in the selected hospitals of the city using Semi-Structured questionnaire and Modified Expanded Nurses Stress Scale. **Results:** The result of the study shows that the married nurses have more stress in comparison to unmarried nurses. **Conclusions:** The study reveals that 54% of the married nurses had moderate level of stress and 46% had severe level of stress. And 8% of the unmarried nurses had mild level of stress, 74% had moderate and 18% of them had severe level of stress.

KEYWORDS : Stress, level, married nurses, unmarried nurses.

INTRODUCTION:

"The greatest weapon against stress is our ability to choose thought over another."

William James

Stress is defined as a process in which environmental demands strain an organism's adaptive capacity resulting in both psychological demands as well as biological changes that could place at risk for illness. Things that cause us stress are called stressors. Stress affects everyone, young and old, rich and poor. Life is full of stress. Stress is an every fact of life that we must all deal with. It comes in all shapes and sizes; even our thoughts can cause us stress and make the human body more susceptible to illness.³

Stress in nurses is an endemic problem. It contributes to health problems in nurses and decreases their efficiency. The nursing profession is known to be stressful throughout the world and has detrimental effects on the physical and psychological well-being of an individual's health. Occupational stress is of key interest to employers because of known adverse effects on employee performance, productivity, job satisfaction and health as a whole. Stress basically involves the relationships between individuals and their environment that are considered as challenging or exceeding their resources and jeopardizing their well-being.

BACKGROUND OF THE STUDY:

Stress is everyday life's reality. Everyone is struck by it in one way or the other. No one is safe from it and no one can avoid it, because we are living in an unpredictable world. Everyone faces stress in different life situations and circumstances, which make them physically and emotionally overwhelmed and vulnerable. Stress creates either a positive or a negative effect on life. Positive stress is motivating and leads to progress, new inventions and awareness. On the contrary, negative stress develops feeling of distress, rejection, depression and leads to physical and mental problems or trauma. The Industrial Revolution in part was fueled by the economic necessity of many women, single and married, to find waged work outside their home. Women mostly found jobs in domestic service, textile factories, and piece workshops. They also worked in the coal mines. For some, the

Industrial Revolution provided independent wages, mobility and a better standard of living.

According to Clinic community health, (2010) we may be motivated by events of our lives or we may respond to some stressful events in the manner that have negative effects on our physical, mental and social well-being.

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(2011) found that 92% nurses experienced average level of stress and 8% nurses have high level of stress due to workload, decreases job autonomy, inadequate supervisor support, less opportunities for learning, and inappropriate feedback.⁵

NEED FOR THE STUDY:

Job-related stress factors are adverse working conditions such as excessive noise, extreme temperature or overcrowding, role ambiguities, conflict, overload and under load. Explored stress management techniques used by working women are sleep and relaxation, exercise, time management, diet and yoga. The research study has reported that supportive work and family policy, effective management, communication, health insurance coverage for mental illness and chemical dependence, and fixed scheduling of work hours were effective in reducing job burnout. Work and family are two important parts of a person's life and both are closely related. Since an increasing number of women are entering the work force and pursuing careers; they have to balance the competing demands of both workplace and family life. Working women are working for longer hours and taking more work at home. This situation results in a greater amount of stress for working women.¹⁵

Nursing is generally perceived as a stressful and demanding profession. It is both physically and psychologically challenging as they deal with people who are suffering from major or minor health problems and life threatening situations.⁵

OBJECTIVE OF THE STUDY:**Primary Objectives:-**

- To compare the level of stress among married and

unmarried nurses.

Secondary objectives:-

- To assess the level of stress among married and unmarried nurses.
- To compare the level of stress among married and unmarried nurses.
- To find out the association between level of stress with selected demographical variables among married and unmarried nurses.

ASSUMPTIONS:

- There may be difference in level of stress among married and unmarried nurses.
- There may be an association between levels of stress with selected demographic variables among married and unmarried nurses.

ETHICAL ASPECTS:

- The study proposal was accepted by ethical committee of the institution.
- Prior permission was obtained from the higher authorities to conduct study.
- Written inform consent has been taken from the samples after explaining them the research process in their own language.
- Confidentiality regarding the samples information will be maintained throughout the whole study.

CONCEPTUAL FRAMEWORK:

The conceptual framework selected for present study is developed from Sister Callista Roy's Adaptation Model (1991).

SAMPLING CRITERIA:

INCLUSIVE CRITERIA

In this study, inclusive criteria was, staff nurses who are:

1. Registered nurses having ANM, RGNM, B.B.Sc.Nursing and P.B.B.Sc. Nursing, M.Sc. Nursing qualification.
2. Willing to participate in study.
3. Available at the time of data collection.

EXCLUSIVE CRITERIA

In this study exclusive criterion was, staff nurses who:

1. Are having less than one year of working experience.
2. Are not willing to participate in study.

METHODOLOGY:

Non probability purposive sampling technique was used to select the sample. Comparative descriptive research design was used to assess the level of stress among married and unmarried nurses. The main study data was gathered from 4th November 2019 to 26th November 2019. Total 100 samples were selected. Before giving the questionnaire self introduction was given by the investigator and the purpose of the study mentioned. After obtaining consent from the subjects, Semi-Structured questionnaire and Modified Expanded Nurses Stress Scale were administered and data were collected.

TOOLS:

Preparation of tool:

Based on the objectives of the study, demographic data, modified expanded nursing stress scale were prepared to assess the level of stress among married and unmarried nurses. After extensive and systemic review of literature the investigator developed the tool. The source of tool construction were, review of literature from text books, journals, online sources reports and other publications and thesis and discussion with the experts i.e. experts from mental health nursing specialty, psychiatrist, clinical psychologist and statistician, who enlightened and refined the investigator's idea about the tool preparation.

A tool is an instrument or equipment used for collection of data.

DESCRIPTION OF TOOLS

Section A- Demographic variables

The investigator constructed this tool to collect the background data of the study subjects and to identify the influence of the sample characteristics with the knowledge in them.

It includes total 10 demographic variables such as age, religion, marital status, married status, area of residence, number of children, type of family, professional qualification, monthly income and year of experience.

Section B – Modified Expanded Nursing Stress Scale

This rating scale are structured to assess the level of stress; it has total 8 sections like death and dying, inadequate emotional preparation, conflict with doctors, problems relating to peers, problems relating to supervisors, workload, uncertainty concerning treatment, patients and their families. There are total 35 items in the rating scale with each item answered on a four points score as never, rarely, sometimes and always.

SCORING OF THE RATING SCALE

No stress	0 - 21
Mild level of stress	22 - 42
Moderate level of stress	43 - 63
Severe level of stress	64 - 84
Very severe level of stress	85 - 105

RESULT:

After the detailed analysis, this study leads to the following conclusion:

The study reveals that 54% of the married nurses had moderate level of stress and 46% had severe level of stress. Minimum stress score was 48 and maximum stress score was 75. Mean stress score in married nurses was 60.84 ± 8.03 and 8% of the unmarried nurses had mild level of stress, 74% had moderate and 18% of them had severe level of stress. Minimum stress score was 34 and maximum stress score was 72. Mean stress score in unmarried nurses was 54.46 ± 8.73 .

Thus, it was concluded that the married nurses have more stress than unmarried nurses.

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