

A Study on the Professional Stress, Coping Approach and Mental Fitness in Nurses



Management

KEYWORDS : Stress, professional stress/ occupational stress, stressors, burn out, coping strategies.

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ABSTRACT

Stress in general and professional stress in particular is a fact of modern day life that seems to have been on the increase. In recent years there has been a broad discussion on the nature of stressors experienced by members of "high risk" occupations and professions, for instance nursing and emergency workers, whose role is to support others through traumatic scenarios. Nursing profession is one profession where the stress related issues are many and thus nurses have been selected for this current study due to the complex array of stressors that they face on a day to day basis resulting in high levels of negative mental and physical health they suffer owing to their challenging profession. Emergency Department Nurses are in particular expected to deal with additional stressors. The issues of job stress, coping and burn outs among nurses are of universal concern to all the managers and administrators in the area of health care. Therefore, the specific aim of this study was to investigate the sources of professional stress and coping strategies among nurses.

INTRODUCTION:

Stress is a state of mental or emotional strain or tension resulting from adverse or demanding circumstances. We generally use the word "Stress" when we feel that everything seems to have become too much; we are overloaded and wonder whether we can cope with the pressures placed on us. Thus, anything that poses a challenge or a threat to our well being is termed as Stress.

Difference between "Stress" and "Stressor": A "stressor" is an agent or stimulus that causes "stress". Stress is the feeling we have when under pressure, while stressors are the things we respond to, in our environment. Examples of stressors are noises, unpleasant people or circumstances, a speeding car, a challenging situation etc. Generally the more stressors we experience, the more stressed we feel. Part of our response to stressors is Physiological and affects our physical state. Our body's sympathetic nervous system reacts to a stressful event by producing larger quantities of the chemical cortisol, adrenaline and non adrenaline which triggers a higher heart rate, heightened muscle preparedness, sweating and alertness, which lead to alarming threats like rise in blood pressure, rapid breathing, slowing down of digestive system, rise in heart/pulse rate, lowering of immune system and sleep disorders. Thus response to stress can affect our health adversely.

PROFESSIONAL/ OCCUPATIONAL /JOB STRESS.

Professional or occupational or job stress is stress involving work. According to the current World Health Organization (WHO) definition, occupational or work related stress is "The response people may have when presented with work demands and pressures that are not matched to their knowledge and abilities and which challenge their ability to cope."

Job stress is not caused by any single variable, but results from the complex interactions between a large system of interrelated variables. Strains can be mental, physical or emotional. Occupational stress can occur when there is a discrepancy between the demands of the environment/work place and an individual's ability to carry out and complete these demands. Often a stressor can lead the body to have a physiological reaction that can strain a person physically as well as mentally. A variety of factors contribute to the workplace stress such as excessive workload, isolation, extensive working hours, toxic work environment, lack of autonomy, difficult relationships among co workers and management, management bullying, harassment and lack of opportunities or motivation to advancements in one's skill levels.

Categories Associated With Stress :

- 1) Factors unique to the job.
- 2) Role in the organization.
- 3) Career development.
- 4) Interpersonal work relations.
- 5) Organizational structure/climate.

These individual categories demonstrate that stress can occur specifically when a conflict arises from the job demands of the employee and the employee itself. If not handled properly, the stress can prove to be very harmful not only to the employee but even to the organization. Professional stress or job stress is a chronic disease caused by the conditions in the workplace that negatively affects an individual's performance and/or overall well being of his/her body and mind. One or more of a host of physical and mental illness manifests job stress. In chronic cases, job stress can be disabling and a psychiatric consultation is usually required to validate the reason and degree of work related stress.

SYMPTOMS OF JOB STRESS: The signs of job stress vary from person to person depending on the particular situation as to how long the individual has been subjected to the stressors and the intensity of stress itself. Physical symptoms of stress are:

- Loss of mental concentration
- Insomnia
- Anxiety
- Absenteeism
- Depression
- Extreme anger and frustration
- Family conflict
- Physical illness such as, heart disease, migraine, headaches, stomach disorders and back problems.

The experience of professional stress has long been implicated in the development of negative outcomes for the individual employee and the employing organization. Over the past 30 years, numerous studies have suggested that job stress, defined in different ways, is associated with an increased risk of adverse health and behavioral outcomes. Professional stress or job stress and burn out have become the high words of the 1990's for human resource departments throughout all of industry and in particular of the human service industry and health industry. According to the National Institute for Occupational Safety and Health (NIOSH), one fourth of employees believe that the worker has more on-the-job stress than a generation ago (NIOSH 1999). However, occupational stress can be an extremely difficult construct to define. Obviously, it is stress on the job; but stress on the job occurs within a person. This is where we run into problems because every worker brings to the job a certain level of predisposition to be stressed (Greenberg 1990). Working very hard within normal hours can cause tiredness; working very long for prolonged periods can lead to fatigue and further problems.

JOB STRESS IN NURSING PROFESSION:

Nursing is a profession where these situations are very common and therefore nurses are more prone to occupational stress. Professional stress in nursing is an endemic problem. It contributes to decrease of efficiency among nurses due to health problems. According to WHO (2011), stress arises from a wide

range of work circumstances and becomes worse due to lack of support, low skill discretions, high job demands and organizational conditions. (Hallien et.al.2007) . Stressors vary among health care occupations and even within occupations, depending on the task being performed. In general, studies of nurses have identified the following factors to be linked with stress.

- i) work load
- ii) Time pressure
- iii) Lack of social support at work(especially from supervisors, head nurses, and higher management, Exposure to infectious diseases, Needle stick injuries, Exposure to Work related violence or threats, Sleep deprivations. A number of studies have provided practical support for the job strain in nursing profession by suggesting that individuals in this occupation with high work demands and low control are at an increased risk for physical and psychological symptoms of health disorders. In this paper I have tried to examine the effect of Professional Stress, Coping Approach and the mental fitness of nurses in India. Stress associated with demands of the job and lack of communication issues, in particular, seemed to have a negative influence on how much satisfied are the nurses in jobs. Inadequate communication systems are sometimes a symptom of rapid change. Workplace violence, death of a child, death or suicide of a co-worker, and mass casualty incidents, are just some of the workplace stressors experienced by nurses. In nursing jobs, the nurses also experience problems of workload from time to time.

MENTAL FITNESS:

Nursing is generally seen as a stressful occupation, with nurses being susceptible to physical as well as mental health problems, and in chronic cases, even suicide (Baldwin 1999) the nature of the work can require them to either daily witness to or be a participant in life and death decisions. (Hirsch horn and may 1999). Baldwin identified their main stressors as high work load, lack of staff support, contact with critically ill patients, emotional demands of patients and relatives, and increasingly high risk of violence, particularly for nurses in psychiatric settings. The current turbulent environment in the health care field requires nurses and hospitals to re-examine their practices.

REVIEW OF LITERATURE:

Profession related stress comes in many shapes and forms.HSE defines occupational stress as “ The adverse reaction people have to excessive pressures or other types of demand placed on them.” Professional stress may have harmful physiological and psychological effects on workers. Various studies have showed that workers suffering from stress exhibit decreased productivity, absenteeism, higher number accidents, lower morale and greater interpersonal conflict with colleagues and superiors.

W.Cranwell an Alyssa J.Job stress produces negative effects for both the organization and the employee. For the organization, the results are disorganization, disruption in normal operations, lowered productivity, and lower margins of profit. For the employees, the effects are threefold: increased physical health problems, psychological distress, and behavioral changes. (1992).

Various studies have revealed that the nursing profession is challenging due to occupational stress and burn outs. Factors such as low skill discretions, high job demands, low support from supervisors, and organizational conditions were among significant factors to contribute to occupational stress. In addition , repeated challenges with people’s needs , problems and suffering are also recognized as additional factors causing job stress.

Researchers have raised concern about stress among nurses. (kak et al 2010; Wang et al. 2009;Piasanti et.al. 2011; Kravits et.al.2010; Verhaeghe et.al.2008 & Lewis et.al.2010).Dewe (1987) also examined the relationship between stressors and stress in over 2000 New Zealand nurses, identifying coping strategies used by nurses. He identified six dimensions: problem oriented behaviors; unwinding strategies

in relation to colleagues) ; keeping problems to oneself; acceptance; resignation; avoidance behaviors such as smoking, and drinking alcohol, tea and coffee.

Schuler identified stress in organizations as an increasingly important concern in both organizational research and practice. Ursin& Eriksen’s cognitive arousal theory of stress states that a person’s feelings of hopelessness, helplessness and inability to cope in stressful situations can trigger lower emotional health, which can potentially lead to feelings of frustration, deprivation or discontentment(Ursin & Eriksen, 2002)

Callaghan et al(2000) , in a study attempted to identify the factors related to stress and coping among Chinese nurses in Hong Kong. The major sources of stress were identified as too much work, interpersonal relationships and dealing with hospital administration.

Xianyu, Vickie & Lambart (2006) performed a study to investigate the relationship among workplace stressors, ways of coping and the mental health of Chinese head nurses. Positive reappraisal, planful problem solving and self control were found to be the three most frequently used ways of coping.

In a study performed by Bianchi(2004) , he attempted to identify the stress and coping among cardio vascular nurses in Brazil. The results identified work conditions as the major source of stress for nurses and use of positive reappraisal, self controlling skills and social support as strategies to cope with job stress.

Ryan, Quayle (1999) conducted a study to identify the stress in psychiatric nursing in Ireland and they found that the most frequently reported method of coping was the use of self controlling strategies, while least frequently reported method of coping was accepting responsibilities.

According to Folkman and Lazarus’ cognitive appraisal model of coping (Folkman1984) coping involves a conscious effort to reduce stress.

OBJECTIVES:

The objective of the present study was to know the extent of the contribution of Coping approach and the mental Fitness of nurses. This study was aimed to identify the different sources of job stress associated with high levels of job dissatisfaction and negative well being among nurses. The goal of the study was to describe the impact of work related stress on the mental health of nurses and also to identify interventions to manage this occupational stress amongst them. The study also aimed to look at the main causes of professional stress within the hospital industry by examining different areas within the individual’s occupation, including physical work environment, the organization itself, the individual’s role within the organization and other nursing specific potential stressors such as hospital safety and public misconceptions about the industry. It also examined coping mechanisms used by nurses, in order to determine what sources of help and support individuals could utilize if they were experiencing stress. Having identified the adverse effects of professional stress, the purpose of this study is to define the characteristics of professional stress, in particular how professional stress affects nurses. The nurses identified in this study are employed by both public and private funded inpatient and outpatient mental health facilities in Indore.

COPING APPROACH:

Coping can be defined as the “constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person.” Coping activities may be problem-focused in that they are directed externally and involve attempts to manage or change the problem causing the stress. On the other hand, coping activities may be emotion-focused in that they are internally directed and involve attempts to alleviate emotional distress. Examples of problem-focused coping includes problem-solving activities, recognizing one’s role in solving a problem and confronting the situation by using some degree of risk-

taking behavior; while emotion-focused coping includes wishful thinking, avoidance of confrontive behavior, and detachment or disengagement from the situation. According to Lazarus and Folkman individuals use both problem-focused and emotion-focused coping when dealing with stressful situations.

Stress management is an important act to eradicate professional burnouts, physical and psychological illness. The Oxford University Press (2011) defines it as the act of developing emotional and physical changes to control and reduce stress. It involves identifying the source and the effects of stress on health and personal skills. In previous researches, stress interventions have been seen to rapidly reduce stress symptoms. The identification of interventions for Stress management is therefore important. (Kravits et al. 2007) Nurses can be provided with opportunities to approach their managers when they have problems. Management team should introduce methods that would create opportunities for this approach as well as have an appropriate approach to the problem. Exposing nurses with the concept and principles of emotional intelligence will increase their capabilities in using, regulating and managing emotions to control physiological and psychological stress symptoms in performing job. The content of such trainings will be easily implemented if nurses are trained using proper case studies and role play techniques. Secondly, hospital management should encourage nurses participation in teamwork.

The most common strategy used by the nurses was positive reappraisal. One of the reasons why positive reappraisal may be used more is because this coping strategy has religious dimensions and nurses who are working in India utilize more religious coping than other countries. May be spirituality plays a major role In addition, both painful problem solving and positive reappraisal are coping methods that can be enhanced through increased educational preparation and work experience. Nurses can be offered opportunities to attend gymnasiums etc. Although it has been noticed that spiritual practices like mindful meditations, non attachment and compassion can be used to reduce stress in the workplace, relatively limited research has been conducted on the effects of spiritual quotient on employee stress management in the workplace.

The intent of the current qualitative research study was to explore the live experiences of employees to better understand the work related stress and the effect of using spiritual practices in attempting to manage stress in the workplace.

FINDINGS:

The study revealed that the majority of nurses suffer from stress, anxiety or depression as a direct result of working in the

industry. The analysis found that nurses rated their organizations significantly lower on effectiveness in managing workplace stress across all dimensions, including their roles. Nurses feel that they are less able to cope with the stress of their job; have less say in how they perform their job; receive inadequate information, assistance and support from their peers and superiors; and are more often subjected to unacceptable relationship behaviors such as harassment. Nurses are unlikely to find other employment opportunities without leaving the area, a move that might be difficult due to family and/or financial circumstances. Nurses in the large hospitals reported very high levels of Excessive Work Demands, a finding consistent with previous research (Baldwin 1999 et al. 2001). They also recorded low scores on the Appraisal and Recognition scale, indicating that they did not feel they were given adequate feedback on the quality of their work, nor were their efforts appreciated. Lack of resources, work overload and lack of communication and comfort with supervisor and colleagues have contributed to increased stress in nurses. The findings of this study confirm that physiological stress acts as an important detriment of mental fitness in the nursing profession. The findings of this study can be used as a guideline by the hospital management to overcome occupational stress problems of nurses in hospitals, encourage nurses' assistance program through professional consultants or internal counseling and guidance unit.

CONCLUSION:

The sources of stress reported by district nurses fell into five categories. These were; demands of the job and lack of proper communication, working environment, career development, problems with patients and work/home interface and social life. Analysis of individual stressor items showed that administrative responsibility, lack of resources, interruption, behavior of patients and peers, work load and long working hours were the major ones to cause stress among nurses. The findings also indicated that the interventions for stress management vary with the nursing settings. The physical, emotional, spiritual, mental and social activities were identified to provide nurses the energy to enhance their professional skills and practices. The prevention and management of workplace stress requires hospital level interventions because it is the hospital that creates the stress. A culture of openness and understanding rather than that of criticism, is essential. This study further suggests that properly managed physiological and psychological stresses in performing job will strongly increase the capability and mental fitness of nurses to cope with occupational stress, and this may lead to higher positive attitudinal an behavioral outcomes.

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