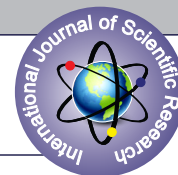


EFFECTIVENESS OF SELF-EMPOWERMENT PROGRAMME ON STRESS AMONG CRITICAL CARE NURSES



Nursing

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ABSTRACT

The present study investigated the Effectiveness of Self-Empowerment Programme on Stress among Critical Care Nurses in a selected tertiary care hospital, Kottayam. The theoretical framework of the study was based on Betty Neuman's system model. A Quantitative pre-experimental research approach was used for the study. 60 critical care nurses were selected using purposive sampling. The tools used for data collection were Socio personal data sheet and Nursing Stress Scale to assess the stress among critical care nurses. Pilot study was conducted to assess the feasibility of this study. For the main study, researcher selected sixty critical care nurses who met the inclusion criteria. The data were tabulated and analysed by descriptive and inferential statistics. The results of the study revealed that self-empowerment programme was effective in reducing stress ($p < 0.05$) among critical care nurses at different levels of assessment.

KEYWORDS

effectiveness, self-empowerment programme, stress, critical care nurses.

1. INTRODUCTION

Nurses play a very important role in the healthcare industry, as well as they save and improve lives as front line members of the health care delivery team¹. Critical care healthcare workers deal with an especially high-risk context because they must encounter patients, who are critically ill, care for unstable patients, carry out procedures accurately, react to extremely urgent matters, support the families when the patient dies etc². Stress is increasingly recognized as one of the most serious occupational health hazard for critical care nurses. High levels of stress may result in depression, anxiety, burnout syndrome, and in extreme cases, post-traumatic stress disorder. Failure of proper stress management among nurses has a huge impact to health care delivery and quality outcome³. Mindfulness based interventions have been shown to significantly decrease stress, improve all aspects of burnout, and increase self-compassion and compassion satisfaction among nurses.

2. OBJECTIVES

1. To assess the stress among critical care nurses
2. To evaluate the effectiveness of self-empowerment programme on stress among critical care nurses.

3. MATERIALS AND METHODS

Quantitative research approach was adopted for the study. Research design used for the present study was pre-experimental, one group pre-test post-test design. A total of 60 samples selected by non probability purposive sampling technique. Subjects were selected based on the inclusion and exclusion criteria from critical care areas of Government Medical College Hospital, Kottayam.

Inclusion criteria of the present study were critical care nurses who are willing to participate in the study and having a minimum of six months experience in critical care setting. Those who excluded from the study were critical care nurses who are adopting any relaxation techniques like yoga, meditation and who are on treatment for psychiatric disorders. Tools and techniques used to collect data in the present study were Socio- personal data sheet and Nursing Stress Scale for assessing stress among critical care nurses. The investigator met the participants individually and willingness to participate in the study was ensured. The investigator explained the purpose of the study and obtained informed consent before the commencement of the study. On the same day, the basic information of the critical care nurses were collected by socio-personal data sheet, pre-test assessment of stress among critical care nurses were done using Nursing Stress Scale. On day 2, a computer assisted teaching on benefits of positive thinking, ways to identify negative thinking, how to focus on positive thinking, and techniques of positive thinking was carried out by the investigator. Positive self-talk and preparation of gratitude diary was taught to the participants. On day 3, computer assisted teaching and training on

mindful breathing was conducted by the investigator for 20 minutes. Participants were instructed to practice positive thinking exercise and mindful breathing guided by audio recorded specific instructions, each for 10 minutes daily for 28 days.

First post-test was conducted on 14th day after the pre-test and the second post-test was conducted on 28th day after the pre-test using Nursing Stress. The obtained data was tabulated and analysed in terms of objectives of the study using descriptive and inferential statistics.

4. RESULTS

4.1 Socio personal data of critical care nurses

Majority (76.7%) of critical care nurses belonged to the age group of 20-30 years, 20% were within age group 31-40 years, and only 3.3% were within age group 41-50 years.

Regarding gender majority (96.7%) of critical care nurses were females and only 3.3% among them were males. Among the subjects 65% of critical care nurses were married. Majority (80 %) of critical care nurses were coming from home and 20% were staying in hostel. Among the subjects 51.7% of critical care nurses were residing within 8 to 50 kilometres. Among the study participants 45% were not having any dependent family member and 15% were having children as their dependent family member. Majority (90%) of critical care nurses did not attend any stress management programme within six months to one year, and only 10% among them have attended stress management programme within six months to one year. Among the subjects, majority (71.7%) of critical care nurses are not practicing any stress management programme regularly and only 28.3% of them are regularly practicing stress management programme. Regarding the leisure time activities 33.3% of critical care nurses spend their leisure time by listening to music and 31.7% of critical care nurses were watching movies during holidays. Among the subjects, 56.7% were not having any physical illness, 25% were having back pain and 6.6% were having varicose vein. Majority (63.3%) of the study participants were undergone Bachelor of Science in Nursing and 31.7% were undergone General Nursing and Midwifery and 5% among them were holding Master of Science in Nursing. Among the subjects, 66.7% of critical care nurses were on temporary appointment and 33.3% were on permanent appointment. Majority (63.3%) of critical care nurses were posted according to personal preference and 36.7% were posted by compulsory transfer. Among the study participants 43.3% of critical care nurses were having experience below one year. Majority (98.3%) of critical care nurses were satisfied with the posting in critical care unit.

4.2 Stress among critical care nurses

Table 1 Frequency distribution and percentage of level of stress among critical care nurses (n=60)

Level of Stress	f	%
Mild (<34)	31	51.7
Moderate (35-68)	19	31.7
Severe (69-102)	10	16.6

Table 1 shows that majority (51.7%) of critical care nurses had mild level of stress, 31.7% had moderate level of stress, and 16.6% had severe level of stress.

4.3 Effectiveness of self-empowerment programme on stress among critical care nurses

H₀: There is no significant difference in the scores of stress among critical care nurses before and after self-empowerment programme.

Table 2 Median, interquartile range and chi square value of pre-test and post-test scores of stress among critical care nurses before and after self-empowerment programme (n=60)

Stress				
Groups	Median	IQR	χ^2	p
Pre-test	35	37	49.5	0.000
Post-test 1	32	36		
Post-test 2	32	32		

Table 2 depicts that chi square value of Friedman's test of stress among critical care nurses was statistically significant at 0.05 level. This shows that self-empowerment programme was effective in reducing stress among critical care nurses and the effect was sustained at repeated intervals.

Table 3 Mean ranks, sum of ranks and Z value of scores of stress among critical care nurses before and after self-empowerment programme (n=60)

Sl. No.	Pairs	Stress		Z	p
		Mean Ranks	Sum of Ranks		
1	Pre-test	22.96	895.50	-3.16	0.002
	Post-test 1	31.17	280.50		
2	Pre-test	28.72	1407.50	-4.621	0.000
	Post-test 2	30.69	245.50		
3	Post-test 1	27.91	1256.00	-4.092	0.000
	Post-test 2	28.40	28.00		

Pair wise comparison using Wilcoxon signed rank test revealed that there was a statistically significant difference in stress among critical care nurses between pre-test and post-test1, pre-test and post-test 2 and post-test1 and post-test 2. It shows that there was statistically significant difference at 0.05 level. Hence, the null hypothesis H₀ was rejected and it was inferred that self-empowerment programme was effective in reducing stress among critical care nurses at different levels of assessment.

CONCLUSION

The study results revealed that self-empowerment programme was effective in reducing stress among critical care nurses. Critical care nurses should practice self-empowerment programme daily to manage stress and anxiety thereby creating a positive attitude in their work environment and to inculcate resilience and strengthen their skill in dealing with stress. Nurse administrators can utilize the findings of the study to organize programmes regarding stress management techniques in the hospital routinely. Mindfulness based interventions and positive thinking techniques have been shown to significantly decrease stress among nurses.

REFERENCES

- Rodriguez-Rey, R., Palacios, A., Alonso-Tapia, J., Pérez, E., Álvarez, E., Coca, A., & Llorente, A. (2019). Burnout and posttraumatic stress in paediatric critical care personnel: Prediction from resilience and coping styles. *Australian critical care*, 32(1), 46-53.
- Meltzer, L. S., & Huckabay, L. M. (2004). Critical care nurses' perceptions of futile care and its effect on burnout. *American journal of critical care*, 13(3), 202-208.
- Chegini, Z., Asghari Jafarabadi, M., & Kakemam, E. (2019). Occupational stress, quality of working life and turnover intention amongst nurses. *Nursing in critical care*, 24(5), 283-289.
- Akter, M., Begum, M. R., Begum, R., & Sultana, N. (2022). Opportunities and Challenges of Nurses after Upgradation of Class 2 Status. *Bangladesh Journal of Medical Education*, 13(1), 20-26.
- Lan, H. K., Subramanian, P., Rahmat, N., & Kar, P. C. (2014). The effects of mindfulness training program on reducing stress and promoting well-being among nurses in critical care units. *Australian Journal of Advanced Nursing*, The, 31(3), 22-31.
- Mealer, M. L., Shelton, A., Berg, B., Rothbaum, B., & Moss, M. (2007). Increased prevalence of post-traumatic stress disorder symptoms in critical care nurses. *American journal of respiratory and critical care medicine*, 175(7), 693-697.
- Green, A. A., & Kinchen, E. V. (2021). The effects of mindfulness meditation on stress and burnout in nurses. *Journal of Holistic Nursing*, 39(4), 356-368.