

Research Article

Role of Organisation in Management of Stress among Nurses Working in Civil Hospital, Jhajjar

Satpal and Deepak Sharma*

Department of Management Studies, D.C.R.U.S.T, Murthal, Sonapat. Haryana, India

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Abstract

Introduction: Stress is a very common issue with healthcare professionals, including doctors and nurses. Stress in nurses can result in multiple negative results. Detecting stress levels at early stage can yield positive outcomes for nurses, their families and the patients they care for. There is growing concern about stress in healthcare professionals working in public hospitals; still there is lack of studies on stress among these healthcare professionals in India.

Methods: A Descriptive study using a self-administered, standardized questionnaire was conducted among nurses working in civil hospital, Jhajjar, Haryana. The research questionnaire was distributed and returned anonymously to ensure confidentiality.

Results: Of the 50 nurses in the study, most of the nurses were satisfied in their dealing with doctors but most of the nurses had problems with supervisors. The work load is another major cause of un-satisfaction. The nurses working in critical care areas have problems with excessive paperwork because they were constantly busy with serious patients. Irregular working hours are also the cause of stress among nurses. Majority of the nurses were satisfied as regards interpersonal relations. However the study revealed large Number of nurses was not satisfied with the organization's policy of recognition for good work. The hospital has very less opportunity of advancement.

Conclusion: Study revealed large Number of nurses was not satisfied with the organization as there is lack of support by supervisors, recognition of good work and there was insufficient staff to handle workload. Majority of nurses were stressed due to excessive paperwork and that stress has led to decreased level of confidence.

Keywords: Nurses, Stress, Healthcare, Civil hospital, Jhajjar, Organization Role

Introduction

Health professionals frequently suffer from stress owing to the characteristics and working conditions typically found in hospitals. Pressure at work can be positive leading to increased productivity. However, when this pressure becomes excessive, it has a negative impact. The individual perceive themselves as being unable to cope and not to possess the necessary skills to combat their stress. Stress is acknowledged to be one of the main causes of absence from work. Prevalence of occupational stress amongst nurses in India is 87.4%.

Nursing is a stressful profession. Caring for clients, individuals, families, groups, populations or entire communities, with multiple, complex and distressing problems can be overwhelming for even the most experienced person. Nurses regularly face emotionally charged situations and encounter intense interpersonal and inter professional situations and conflict in the workplace while trying to make

appropriate and safe decisions. Research has shown that nursing is a high-risk occupation in respect of stress-related diseases. Stress can reduce the enjoyment in life, cause hypertension, cardiac problems, reduce immunity, contribute to substance abuse, lead to frustration, irritability and reduce the overall status of mental and physical wellbeing. Stressful work may propagate substance abuse amongst workers, which they might use to reduce or cope with stress. It is very essential to determine the magnitude of the problem and study the factors responsible for it

Need for study

Stress is like an iceberg. We can see one-eighth of it above, but what about what's below?"

Stress and burnout are concepts that have sustained the interest of nurses and researchers for several decades. These concepts are highly relevant to the workforce in general and nursing in particular. Many studies of stress in nurse in developed countries have shown chronic stress as a major contributor to suicide

*Corresponding author **Dr. Deepak Sharma** is doing Masters in Hospital administration; **Dr. Satpal** is working as Assistant Professor

or suicidal thoughts, smoking, excessive coffee consumption, and alcohol intake.

Lack of professional respect and recognition by authorities and doctors is the major cause of stress among nurses in India. Poor relationship with physicians was related to stress, which is seen as the most important reason for nurses leaving hospitals. Lack of autonomy, poor participation in patient care due to lack of sufficient knowledge and empowerment deprives them from job satisfaction. Nurses in India are mainly from the lower economic strata and have low educational qualifications. Their main motivators are salary and benefits to support their home and maintain a decent standard of living. Shortage of staff makes them easily succumb to increasing their pay package by doing excessive hours of overtime at the expense of their health. They have limited access to claims and compensation for occupational hazards.

Nurses are responsible for creating the environment in which nursing is practiced and patient care is given, it is important to explore interventions that will reduce the stress and burnout experienced by nurses. By reducing the stressful nature of the nurses' work, nurse could be more satisfied in their positions. This role satisfaction, in turn, could lead to improve the work environment for staff nurses.

Review of literature

A study was conducted by Nagoya University, Japan on Association of job-related stress factors with psychological and somatic symptoms among Japanese hospital nurses: effect of departmental environment in acute care hospitals. The study clarified associations of departments and job-related stress factors with mental and physical symptoms. The results showed that working in intensive care units (ICU) was associated with anxiety, and that working in surgery and internal medicine was associated with anxiety and depression independently of demographic factors and job-related stress factors (J Occup Health. 2008).

A study was conducted by Pakistan Psychiatric Society on Occupational Stress and Job Satisfaction among Nurses in Intensive Care Units at a Tertiary Care Hospital. A Cross sectional study was conducted at Rawalpindi General Hospital with 50 female staff nurses working in ICUs as samples. Results showed that the nurses in ICUs at a tertiary care hospital have a high index of occupational stress and majority of it generates from the administrative disorganization of the firm. (J Pak Psychia Society. 2006).

A study was conducted by University of New England on Personality hardiness, occupational stress, and burnout in critical care nurses. Personality hardiness, occupational stress, and burnout were investigated in 100 critical care nurses. Hardiness was predictive of occupational stress and burnout. Hierarchical multiple regressions revealed that one of the three dimensions of hardiness, commitment to work, was the only variable to account for significant

amounts of variance (up to 24%) across three of four measures of burnout (Res Nurs Health. 1989).

A study was conducted by Hospital Sirio Libanes, Brazil on Characterization of stress in intensive care unit nurses. The study proposes a characterization of the nurses who work in intensive care units (ICU) in different regions of Brazil and the association of the stress level they report with age, position, time since graduation, and enrollment in Graduate courses. Results concluded that both nurses and hospitals must make efforts to get subsidies for improving assistance conditions and for strategies to cope with stress (Rev Esc Enferm USP. 2008).

A study was conducted by Florence Nightingale School of Nursing and Midwifery, England on Job satisfaction and its related factors: a questionnaire survey of ICU nurses in Mainland China. Results showed that more than half of nurses (53.7%; n=275) were satisfied or very satisfied with their jobs and 15% (n=77) felt moderate to extreme occupational stress & majority of the sample reported a high level of organizational commitment (63.7%; n=326) and professional commitment (85.9%; n=440) and only 5.9% (n=30) and 10.0% (n=51), respectively reported role conflict and role ambiguity often or very often (Int J Nurs Stud. 2007)

A study was conducted by Centro Universitario, Brazil on Stress among nurses who work at the intensive care units. Stress has been observed among various professionals, including intensive care unit (ICU) nurses, due to their close contact with patients in distress and at the risk of death. This situation becomes worse due to the need for direct and intensive care. This study was performed to characterize nurses working at ICU and verify the presence of stress among them. Stress continues to affect these professionals, and institutions do not offer any special care for nurses in the sense of promoting comprehensive health care (Rev Esc Enferm USP. 2009)

A study was conducted by Grand Valley State University, USA on Role stress and Career Satisfaction among ICU nurses by work shift patterns. Initial findings indicate ICU nurses working 12-hour shifts were younger, less experienced, and more stressed than colleagues working 8-hour shifts. Although overall career satisfaction was comparable between groups, significant differences were found in the areas of salary and professional status. These findings suggest that ICU nurses may experience greater professional fulfillment when strategies are implemented that promote autonomous practice environments, provide financial incentives, and recognize professional status (J Nurs Adm. 2003)

A study was conducted by Universidade Estadual de Londrina, Brazil on Nurses' work in intensive care units: feelings of suffering. The purpose of this study was to investigate the feelings of suffering that Intensive Care Unit (ICU) nurses experience, and the strategies they use to face these feelings. Results showed that suffering is related to: taking care of a

young patient in critical condition, taking problems home, the patient's family, the team's work, and technology at work. As for the defense strategies used, emphasis is given to the search for strength in religion, promoting inter-relationships among team members, engaging in physical activity, and withdrawing from the patient (Rev Lat Am Enferm. 2009)

A study was conducted by Delhi University, India on Occupational Stress Amongst Nurses from Two Tertiary Care Hospitals in Delhi. 'Time Pressure' was found to be the most stressful factor. Other highly stressful sources were caring for own children/parents, own work situation and personal responsibilities, 'high level of skill requirement of the job'. Results showed high prevalence of stress amongst nurses, and suggests the need for stress reduction programmes targeting specific important stressors (Aus Med J 2010)

A study was conducted by University of Rajasthan, India as a comparative study of Role Stress in Government & Private Hospital ICU nurses. Obtained results revealed that male ICU nurses experienced significantly higher stress level as compared to females. Second, male ICU nurses from private hospitals showed significantly higher level of stress levels than the government ICU nurses on eight out of the ten dimensions of Organizational Role Stress Scale (J Health Manag 2006)

A study was conducted by Maharashtra Medical Research Society, Pune, India on Stress causing psychosomatic illness among ICU nurses. This study used a questionnaire relating to stressors and a list of psychosomatic ailments. One hundred and six ICU nurses responded and they were all included in the study. Stressors were based on four main factors: work related, work interactions, job satisfaction, and home stress. Most important causes of stress were jobs not finishing in time because of shortage of staff, conflict with patient relatives, overtime, and insufficient pay. Psychosomatic disorders like acidity, back pain, stiffness in neck and shoulders, forgetfulness, anger, and worry significantly increased in ICU nurses having higher stress scores. Results showed that moderate levels of stress are seen in a majority of the ICU nurses. Incidence of psychosomatic illness increases with the level of stress (Indian J Occup Environ Med. 2009)

Research methodology

Objectives of the study

- To assess the level of stress among nurses working in Civil Hospital Jhajjar.
- To find out the association between organizational factors and stress.

- To find out the role of organization in management of stress among nurses working in Civil Hospital Jhajjar.

Research design

The research design adopted for this study is descriptive survey design.

Research approach

Research approach is non-experimental survey (descriptive survey).

Setting of the study

The study will be conducted at Civil Hospital Jhajjar.

Method of data collection

Prior permission is obtained from the Chief Medical Officer of Distt. Jhajjar before conducting the study. Data will be collected within 4 weeks. Data will be collected by questionnaire method.

Sampling technique

Sampling technique adopted for the selection of sample is convenience sampling.

Sample size

The sample consists of 50 nurses working in Civil Hospital Jhajjar

Tool for data collection

Stress Rating Scale will be used to collect the data from the nurses working in Civil Hospital Jhajjar

Data analysis method

The Data collected will be analyzed by using descriptive and inferential statistics. Descriptive Statistics: Frequency and Percentage will be used for analysis of demographic variables and mean, mean percentage and standard deviation will be used for assessing the level of occupational stress.

Limitations of the study

1. The study is limited to nurses working in General Hospital Jhajjar.
2. The study is limited to a sample size of 50.

Data analysis and interpretation

Age of respondent

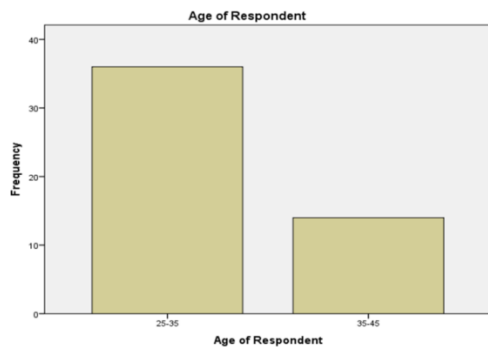


Figure 1

The present study reveals that 72% of the respondent was in age group of 25-35 years and 28% of respondent were in age group of 35-45 years.

Gender status of respondents

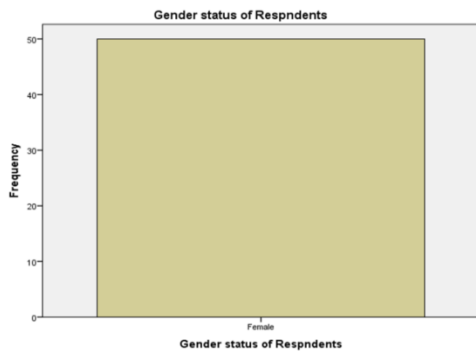


Figure 2

The present study reveals that all of the respondents were female.

Marital status of respondents



Figure 3

The present study reveals that 80% of the responding nurses are married and rest of the 20 % of responding nurses are unmarried.

Nursing experience of respondents

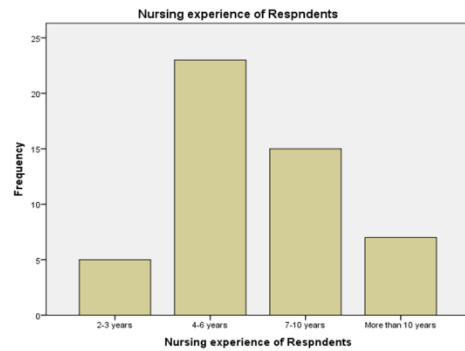


Figure 4

The present study reveals that 10% of the respondents have nursing experience of 2-3 years, 46% of respondents have nursing experience of 4-6 years and the 30 % respondents have nursing experience of 7-10 years. And rest of 14% respondents has nursing experience of more than 10 years.

Data analysis of questionnaire regarding stress due to interpersonal relationship at work

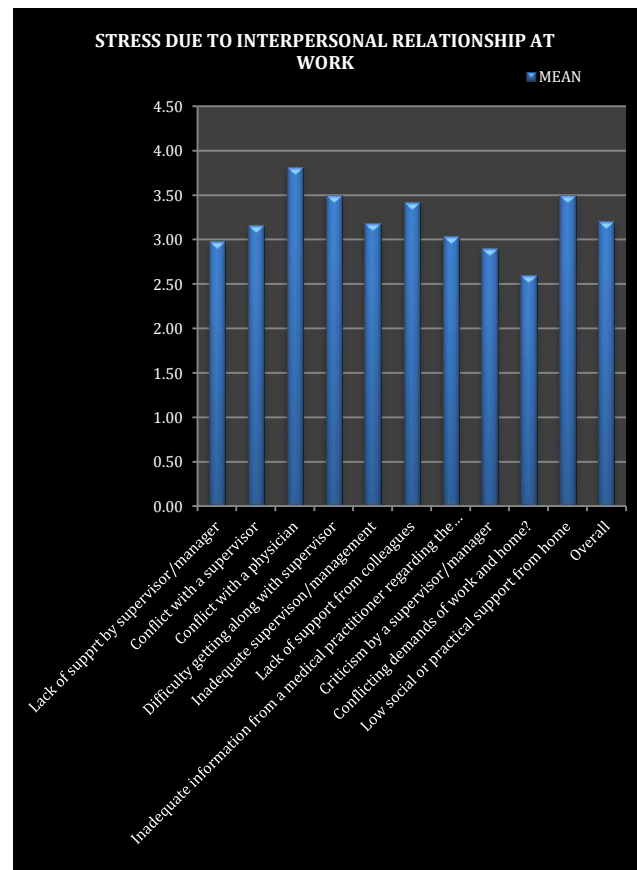


Figure 5

Various questions were asked to study factors related to stress regarding *stress due to interpersonal relationship at work*. The present study from data

analysis showed Mean response of respondents was $3.21 + 1.086$ which interprets that there is scope of improvement in the area regarding conflict with a supervisor and support should be provided by supervisor/manager in resolving issues of nursing professionals. Positive side of the study is that there is very less or few conflicts with a physician but there is still some scope of improvement in the area regarding Difficulty getting along with supervisor. There is still huge scope of improvement in the area regarding inadequate supervision/management and Lack of support from colleagues. From the study it is revealed that there is huge scope of improvement in the area regarding inadequate information from a medical practitioner regarding the medical condition of a patient. Most of the nursing professionals felt that there is huge scope of improvement in the area regarding Criticism by a supervisor/manager and find it difficult in managing a balance between conflicting demands of work and home

Data analysis of questionnaire regarding work related stress

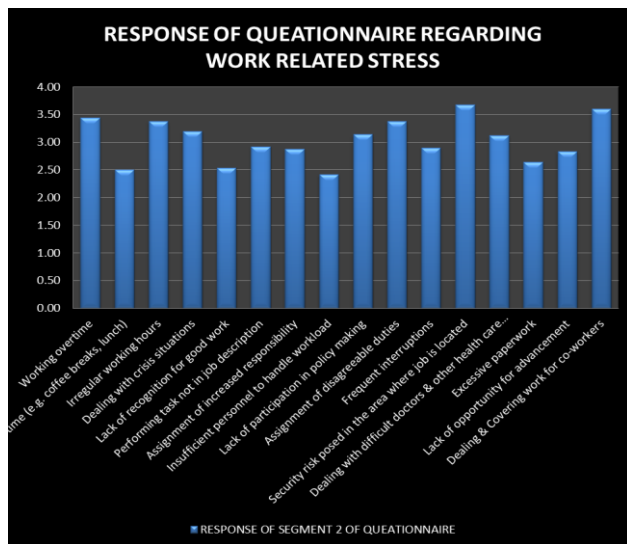


Figure 6

Various questions were asked to study factors related to *work related stress*. The present study from data analysis showed Mean response of respondents was $3.04 + 1.046$ which interprets that many of the nurses felt that there is still some scope for improvement in the area of working schedule and working overtime but most of the nurses answered they are lacking their personal time (e.g. coffee breaks, lunch) and it should be improved. A lot of respondents complained regarding irregular working hours nursing staff is finding difficulty in dealing with crisis situation and it is affecting their performance in crisis situation, lack of recognition for good work and this lack of recognition for good work demotivates staff & staffs is performing duties other than described in their job description or disagreeable duties. A lot of staff is assigned with

increased responsibility which is also a result of insufficient personnel to handle workload. Most of staff feels that they are seldom asked to participate in policy making which gives them less chance of getting there problem solved and their participation in policy making should be increased. Nursing staff is frequently interrupted which is hampering their efficiency and steps should be taken so that frequent interruptions can be minimized. Another concern which is revealed from present study raised issues regarding risks of security in the area where job is located, excessive paperwork and there is lack of opportunity for advancement as their work is not appreciated but small issue of dealing and covering work for co-workers which is manageable but small improvement can lead to good results.

Data analysis of questionnaire regarding effect of stress

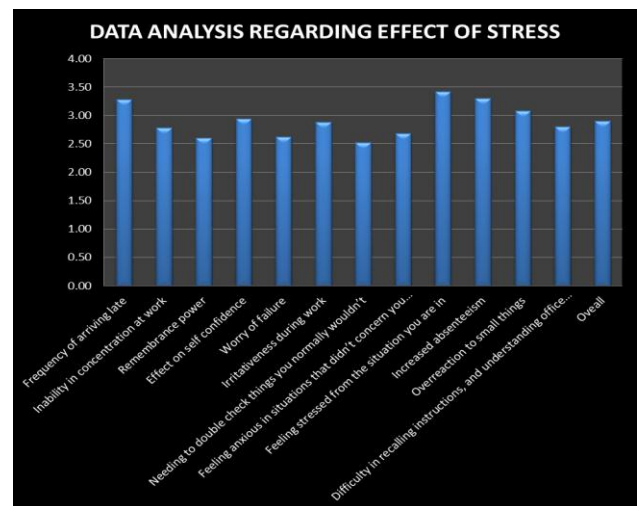


Figure 7

The present study from data analysis of various factors regarding *effect of stress* showed Mean response of respondents was $2.91 + 0.901$ which interprets that many of the nurses felt that Increase in level of stress has resulted in their frequency of arriving late and decreased ability in concentration at work and remembrance power. Effect of stress is such that the confidence level of nurses is decreased to a little and maximum nurses felt that stress has increased the worry of failure Most of nurses felt that due to increased stress they have become irritated during working hours so and they now days need to double check things which they normally didn't. Due to increased level of stress, nursing professionals are feeling anxious in situations in which they previously were normal and Feeling stressed from the situation they are in which is resulting in increased absenteeism. Mean response of responding nurses felt that they now over react to small things which is the result of stress they fell during work hours and they now find it difficult to recall instructions so steps should be taken

to decrease this problem as it is hampering their work performance & understanding office procedure.

Conclusion & recommendations

Questionnaire was divided in three segments to study stress due to interpersonal relationship at work, work related stress and effect of stress.

From the study it was concluded that

- There is scope of improvement in the area regarding conflict with a supervisor and support should be provided by supervisor/manager in resolving issues of nursing professionals. However Positive side of the study is that there is very less or few conflicts with a physician but there is still some scope of improvement in the area regarding Difficulty getting along with supervisor
- There is still huge scope of improvement in the area regarding Inadequate supervision/management and Lack of support from colleagues From the study it is also revealed that that there is huge scope of improvement in the area regarding inadequate information from a medical practitioner regarding the medical condition of a patient
- Most of the nursing professionals felt that there is huge scope of improvement in the area regarding Criticism by a supervisor/manager and find it difficult in managing a balance between conflicting demands of work and home Most of the nurses answered they lack social or practical support from home
- Many of the nurses felt that there is still some scope for improvement in the area of working schedule and working overtime but most of the nurses answered they are lacking their personal time (e.g. coffee breaks, lunch) and it should be improved. A lot of respondents complained regarding irregular working hours nursing staff is finding difficulty in dealing with crisis situation and it is affecting their performance in crisis situation.
- Most of the nursing staff felt that there is lack of recognition for good work and this lack of recognition for good work demotivates staff & staffs is performing duties other than described in their job description or disagreeable duties and it is resulting in stress.
- A lot of staff is assigned with increased responsibility which is also a result of insufficient personnel to handle workload. Most of staff feels that they are seldom asked to participate in policy making which gives them less chance of getting there problem solved and their participation in policy making should be increased.
- Nursing staff is frequently interrupted which is hampering their efficiency and steps should be taken so that frequent interruptions can be

minimized. Another concern which is revealed from present study raised issues regarding risks of security in the area where job is located.

- Most of nurses felt that there is problem in dealing with some difficult doctors and other health care professionals and there is scope of improvement to solve this issue.
- A lot of nursing staff complained about excessive paperwork and there is lack of opportunity for advancement as their work is not appreciated but small issue of dealing and covering work for co-workers which is manageable but small improvement can lead to good results. With Increase in level of stress has resulted in their frequency of arriving late and decreased ability in concentration at work and remembrance power.
- Effect of stress is such that the confidence level of nurses is decreased to a little and maximum nurses felt that stress has increased the worry of failure
- Most of nurses felt that due to increased stress they have become irritated during working hours so and they now days need to double check things which they normally didn't.
- Due to increased level of stress, nursing professionals are feeling anxious in situations in which they previously were normal and Feeling stressed from the situation they are in which is resulting in increased absenteeism. Responding nurses felt that they now over react to small things which is the result of stress they fell during work hours and they now find it difficult to recall instructions so steps should be taken to decrease this problem as it is hampering their work performance & understanding office procedure.

Recommendations

This study derived some of the suggestions for improvement, they are:

- The 2- way communication channel between the nurses and the supervisor should be easy , effective and a closed loop control system thereby increasing the standards constantly.
- Conducting stress management lectures by personnel at regular intervals to create an insight into one's own self.
- Following stipulated and limited working hours by methods like increasing the number of shifts.
- Introduction of more recreation facilities like TV room , indoor games and internet facilities etc.
- There should be a system of appreciation and recognition of good work and provision of advancement in their field should be there,
- Organising periodic picnics and cultural involvements as a relief from the normal strenuous routine.
- Regular yoga and meditation classes should be organised for the staff.

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