Workplace stress in nursing: a literature review

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Abstract
A world-wide shortage of nurses, a significant challenge facing the healthcare sector in many developed and developing countries. Health development (growth) is an important fact for Sri Lanka as a developing country. It gives free health system to its people around the clock. Nurses play an important role in this field to uplift the health development. Accordingly to Key social indicators Nurses per 10,000 persons 15.4 in Sri Lanka. Similarly statistics at present qualified nurses 32,272 employed in Sri Lanka and a nurse for every 650 persons. The government allocates a large amount of money for health within a one year. The aspiration of these expenditures is well progress of health sector. When nurses are doing their dignity correctly, it is a massive strength to improvement of health sector. The purpose of this study to review the knowledge on workplace stress in nursing. Stress in nurses has been linked to reduce physical and psychological health, reduce job satisfaction, increase sickness absence, increase staff turnover, and poorer job commitment. A literature search from January 2000 to 2014 was conducted using the key words nursing, stress, workplace stress, stress management and review 20 article according to above key words. Poor working relationship between nurses and doctors and other health care professionals, demanding communication and relationships with patients and relatives, emergency cases, high workload, under staffing and lack of support or positive feedback from senior nursing staff have been main source of stress for nurses.

Key words: nursing, stress. Workplace stress, stress management

Introduction
The “mother” of modern nursing throughout the world, Florence Nightingale. Nursing is more than just a job; it is a professional career requiring commitment. Nursing encompasses autonomous and

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collaborative care of individuals of all ages, families, group and communities, sick or well and in all settings. Nursing includes the promotion of health, prevention of illness, and the care of ill, disabled and dying people. Advocacy, promotion of a safe environment, research, participation in shaping health policy and in patient and health systems management, and education are also key nursing roles (ICN, 2002).

Every profession has work stresses. In organizational psychology, for example, stress is understood as a long-lasting and harmful emotional and somatic response to stressors when the requirements of work do not accord with employees’ capabilities, expectations, and needs (Ahmed, 2000). This working stress can be changed according to the job environment. Among the various occupation present in the hospital industry, the researchers interests lies in the nursing profession, simply because medicine/caring profession such as nursing is ranked as the second most stressful among the various profession (USA job bank, 2006). Nursing is working with the risky background. The hospital must foster a caring, sharing and supportive work environment to build and retain a committed, trusting, satisfied, and equally a supportive work force. As well nursing is respectfully and a risky one. When the risky is increasing, working stress is increasing. The course of stress for nurses has found to be related to the nature of the profession, Included in these stressors are an intense work hours, weekends, night and holidays (Jayewardene, 2013). Nursing as a first stressful job among 40 stressful professions as many stressful factors were identified in this profession (Mojdeh, et.al, 2008).

**Important of studying workplace stress in nursing**

Mccain & Smith (1994 cited in Moideh et al. 2008), Considered occupational stress as the most important occupational hazard in modern era. Reason being, every year health care system charged zoo billion dollars on it. It results in decreasing productivity, absence of work, staff rotation in wards and a high expense of health care staffs.

Kane (2009) stated that it is important to identity the extent and sources of stress in a healthcare organization to find stress management strategies to help the individual and the environment. Stress in nurses affects their health and increases absenteeism, attrition rate, injury claims, infection rates, and
errors in treating patents. Unless the healthcare setups acknowledge the problem and take preemptive steps to tackle the growing menace of chronic stress, personnel costs will keep rising and add to the already soaring costs of care. Nurses’ absenteeism, turnover, and sickness significantly increase the cost of employment in healthcare units.

Kawano (2008) stated that chronic job related stress factors affect physical and mental health, risk of cardiovascular disease, medical costs and work performance. Thus reducing work stress factors is important to prevent the development of stress related diseases and to promote workers health. Nursing being a highly stressful occupation, chronic environmental job related stress factors among nurses are associated with job satisfaction and musculoskeletal disorders, but not with risk indicators for cardiovascular disease, such stress factors are also associated with the mental and physical health of nurses is important for the quality of nursing care.

**Concept of job stress**

Stress can be described as feeling tense, anxious, or worried (Gibson et al, 2009). Whereas Luthans (2008) defined stress as “an adaptive response to an external situation that results in physical, psychological, and/or behavioral deviations for an organizational participant”. According to Luthans (2008), stress means the physical, psychological and behavioral deviations in the general behavior of individual in response to any external events or situations. According to Robbins (2003) Stress is dynamic condition in which individual is confronted with an opportunity, constraint, or demand related to what he or she desires and for which the outcomes is perceived to be both uncertain and important.

Job stress is known as work stress or occupational stress. It is defined as the experience of negative emotional situation. Occupational stress is a very subjective concept, affecting every individual differently. In the area of organizational psychology, job dissatisfaction, workload dissatisfaction, work/non work conflict, absenteeism, reduced job performance, reduced life satisfaction and increased turnover intentions (Siu, 2003). Greenberg and baron (2003) identified stress is the pattern of emotional states and physiological reactions occurring in response to demands from
within or outside an organization. There are several factors effect to the nurse’s job stress. Some of factors are discussed here.

**Factor responsible for nurse’s job stress**

The working environment of the nurses include and enclosed atmosphere, time pressures, excessive noise or undue quiet, sudden swings of them intense to mundane tasks, no second chance, unpleasant sights and sounds, and long standing hours. In spite of the fact that nurses are trained nurses are to deal with these factors like home stress, conflict at work, inadequate staffing, poor teamwork, inadequate training, and poor supervision. Stress is known to cause emotional exhaustion in nurses and lead to negative feeling towards those in their cure (Kane, 2009). From the above research findings, quite evidently the most frequent causes of stress are role conflict and ambiguity, workload, responsibility for the others, poor relationships with others, job conditions, career planning and development. Role ambiguity arises out of being given inadequate information to perform a job properly (Al- omar, 2003).

According to Konstantinos and Christina (2008), research studies carried out on stress in nursing have identified a variety of stressors that depend upon the clinical specialty, although, some common stressors across nursing specialties include poor working relationship between nurses and doctors and other health care professionals, demanding communication and relationships with patients and relatives, emergency cases, high workload, under staffing and lack of support or positive feedback from senior nursing staff.

In her study carried out about stress in different types of psychiatric nurses, Trygstad (1986), as cited in Konstantinos and Christina (2008), found that problems with patients accounted for 13% of overall stressors, relationships between nurses and physicians accounted for only 91% of the stressors (when the former ignored nurse’s input and made unilateral decisions), 17% involved the ward sister’s poor supervisory attitudes and practices (when there is insufficient positive reinforcement or support for staff, and lack of clinical or administrative expertise) and she concluded that the relationship between staff nurses and their ward sister and their ability to work together was an important determinant of the work stress experienced
by psychiatric nurses, and the most important determinants of stress experienced by these nurses was the difficulties in relationships among staff nurses and their ability to work together. Among other stressors that psychiatric nurses experienced were related with working relationship with co-workers and other unit staff, and the problems arose involving ineffective communication and in-fighting between individuals and group, in the unit.

**Consequences of work stress**

The consequences of these conditions can have a significant impact on individual nurses and the ability to accomplish tasks; specifically, poor decision making, lack of concentration, apathy, decreased motivation, and anxiety may impair job performance, possibly resulting in lethal threats to patient safety. In addition, absenteeism due to stress-related problems requires the administrative use of unplanned and expensive replacement staff from agencies, or mandatory overtime for staff nurses, which further contributes toward an environment of stress and burnout. Interpersonal difficulties commonly stemming from stressful situations may compromise group cohesion, thus impacting the efficient functioning of the complex work units within the health care organization, and ultimately adding work to the already over-burdened middle and senior management teams. The bottom line for nursing administrators is that employee stress and burnout incur significant financial obligations to agencies; specifically, estimates, nationally, based on government, industry, and health groups, place the cost of stress at approximately $250 to $300 billion annually (Jones, Tanigawa, & Weisse, 2003). This includes estimates of the dollar effects of reductions in operating effectiveness, poor decision making, medical expenses, and attrition resulting from stress.

Kamau et al, (2014) stated, Occupational stress is a serious problem affecting nurses, and research shows that this is connected with absence from work and intentions to quit a hospital. According to Hsien Ho, (2009) research studies carried out on stress in nursing have identified, job rotation among nurses could have an effect on their job satisfaction; job rotation could have an effect on organizational commitment; job satisfaction could have a positive effect on organizational commitment; role stress among
nurses could have a negative effect on their job satisfaction; and role stress could have a negative effect on their organizational commitment. There have several consequences of job stress for their organization, Social and individual.

**Conclusion**
Nurses work with physicians and other medical staff in a wide variety of medical and community settings. They provide preventive, primary, acute and chronic care for sick and injured patients with health information, restorative care, medication administration and emergency care. Nurses work different work climate than other profession. Especially, the nurses working at hospitals not only implement independent and professional nursing activities in accordance with doctors’ advice, but take responsibility for any immediate threat to patients' lives as well. Thus, the importance of nurses is undeniable, and the influence of nurses' qualities and capabilities on medical care quality can never be ignored. A literature review shows that workload, professional conflict and the emotional burden of caring, pay, and shift work are the major work stressors in the nursing profession. Occupational stress is a serious problem affecting nurses, and literature review shows that this is connected with absence from work and intentions to quit a hospital. Consequently more research into identifying the most effective way of detecting when individuals are experiencing early difficulties, and of improving their stress management techniques so as to prevent the transition to severe stress.

**List of References**


