



# International Journal of Advanced Psychiatric Nursing

E-ISSN: 2664-1356  
P-ISSN: 2664-1348  
[www.psychiatricjournal.net](http://www.psychiatricjournal.net)  
IJAPN 2022; 4(1): 17-20  
Received: 10-11-2021  
Accepted: 05-01-2022

**Nirmala Bhavanidas Adsul**  
Research Scholar, Shri  
Jagdishprasad Jhabarmal  
Tibrewala University,  
Rajasthan, India

**Dr. Sheela Upendra**  
Research Guide, Department  
Of Nursing, Shri  
Jagdishprasad Jhabarmal  
Tibrewala University,  
Rajasthan, India

## A phenomenological study: Experiences of stress among nurses working in hospital

**Nirmala Bhavanidas Adsul and Dr. Sheela Upendra**

### Abstract

**Introduction:** Stress if persist for longer duration and is continuous in nature tends to create physical and mental problems in individuals. It impacts on blood vessels and heart and on hormone levels too which shows adverse reaction in the body. Stress impacts emotionally on individual which include fear, anxiety, irritability, anger and frustration.

**Objective:** To Explore Nurses experience of stress who are working in hospital

**Material and Method:** Research approach for the study was Quantitative approach and descriptive phenomenological research design was used. Setting was hospitals of Pune city and sample size for the study were 09 Nurses working in hospitals. Data saturation reached after nine nurses and no new theme were emerged from the interview so after that did not interview the nurses. Non probability purposive sampling technique was used. Using in-depth Interview the researcher conducted the interview on lived experiences of nurses on stress. Interview guide was used by researcher and maintained with open ended questions and nurses were tutored to share the experience honestly, openly and with Fairley as per the questions. Qualitative rigor was maintained. Bracketing was done by researcher Triangulation and member checking was done. Dependability, transferability and authenticity was ensured in the study. Data analysis was done by using Colaizzi's phenomenological method Findings: Themes that were emerged includes appearance of physical symptoms declining motivation, improper communication, and Imbalance in personal and professional responsibilities.

**Conclusion:** Stress is response to event, situation and challenge stress helps to meet and follow the timelines and avoid danger but when stress exceeds or continuous stress pour on individual it invites health problems. As stress is subjective in nature so getting the experience to will help in developing the techniques to relieve the stress.

**Keywords:** Phenomenological study, nurses, working, stress, hospital

### Introduction

Stress if persist for longer duration and is continuous in nature tends to create physical and mental problems in individuals. It impacts on blood vessels and heart and on hormone levels too which shows adverse reaction in the body. Stress impacts emotionally on individual which include fear, anxiety, irritability, anger and frustration. Stress is considered one of the chronic long term illness if not treated and taken precaution timely.

For stress many number of traits of working life have been associated like lack of power, role doubt, role conflict, work overload. Stress results in condensed efficiency, performance capacity reduced, a lack of concern for the associates and coworkers<sup>[1]</sup>.

Study findings state that job stress has major consequence on nurse's physical and mental health and also focused with less stressed and highly stressed nurses showed significant difference in personal and work behaviour. <sup>[2]</sup> Study review focused on nurse's stress that stress can be determined that among nurses the job itself is the chief cause of job stress. <sup>[3]</sup>

Study concluded that for occupational stress two factor viz role boundary and role insufficiency considered the most associated cause and to cope with stress and to fulfill the demand of the job, health education (occupational) and training programmes (occupational) is considered required to recover and expand the knowledge and to lessen occupational stress <sup>[4]</sup>. Nursing has been identified by a number of studies as a stressful occupation <sup>[5, 6]</sup>. Stress has a cost for individuals in terms of health, wellbeing, and job satisfaction, as well as for the organization in terms of absenteeism and turnover, which in turn may impact the quality of patient care <sup>[7, 8]</sup>. The nurse's role has long been regarded as stress-filled based on the physical labor, human suffering, work hours, staffing, and interpersonal relationships that are central to the work nurses do.

**Corresponding Author:**  
**Nirmala Bhavanidas Adsul**  
Research Scholar, Shri  
Jagdishprasad Jhabarmal  
Tibrewala University,  
Rajasthan, India

### Need of the Study

Nursing is considered one of the stressful profession. It is regarded that nurses faces high job stress. Though hospitals organized stress management workshops but it is observed that multiple pressure translate into significant stress on them stress. This fact made researcher to explore Nurses stress experience working in Hospital.

Occupational stress was assessed because according to the WHO report, "Raising Awareness of Stress at Work in Developing Countries" in 2007 [9] and it is one of the most common forms of stress in developing countries as the socioeconomic states, social inequalities, and overpopulation forces employees to work based on job availability without a choice.

Nurses in India are overburdened as the nurse-to-patient ratio is low (1:2250) [10]. They are responsible – along with other health-care professionals – for the treatment, safety, and recovery of acutely or chronically ill, injured, health maintenance, treatment of life-threatening emergencies, and medical and nursing research. Nurses do not only assume the role of caregivers but are also administrators and supervisors of patients. These multiple work roles contribute to the significant amount of occupation-related stress among nursing staff, particularly those working at the bottom of the hierarchy such as staff nurses and nursing sisters, who end up sharing most of the work burden. Shift duties, time pressures, lack of respect from patients, doctors as well as hospital administrators, inadequate staffing levels, interpersonal relationships, death of patient, and a low pay scale significantly add to their stress levels [11]. These factors are intrinsic to nursing and are compounded by environmental factors such as difficult patients and their families, relationships with physicians, low institutional commitment to nursing, and the delivery of poor quality care [12]. Research has shown that nursing is a high-risk occupation in respect of stress-related diseases [13]. Hence study had assessed the stress among nurses by using Expanded Nursing Stress Scale [ENSS] [14] and Perceived Stress scale [PSS] [15].

### Problem Statement

"A Phenomenological Study: Experiences of Stress among Nurses working in Hospital"

### Aim of the study

Study aims to describe the experiences of Nurses who faces stress at hospitals as it is better to recognize it before the stress out of control and which in turn causes negative impact the mental health and develops many problem.

### Material and Method

Research approach for the study was Quantitative approach and descriptive phenomenological research design was used. Setting was hospitals of Pune city and sample size for the study were 09 Nurses working in hospitals. Data saturation reached after nine nurses and no new theme were emerged from the interview so after that did not interview the nurses. Non probability purposive sampling technique was used. Using in-depth Interview the researcher conducted the interview on lived experiences of nurses on stress, which was lasted between 50 minutes to 70 minutes. Researcher maintained the field notes, observations and nonverbal expressions of each participants. Interview guide was used by researcher and maintained with open ended questions

and nurses were tutored to share the experience honestly, openly and with Fairley as per the questions.

Throughout the qualitative rigor was maintained. Bracketing was done by researcher Triangulation and member checking was done. Dependability, transferability and authenticity was ensured in the study. Data analysis was done by using Colaizzi's phenomenological method.

## Results

### Findings

#### Demographic Variables- Descriptions

Majority of Nurses (89%) were female nurses and (11%) were male nurses. All Nurses were registered with State Nursing Council. The ages were ranged between 24-54 years. Professional Clinical experience were ranged from 2 - 30 years working in Hospitals.

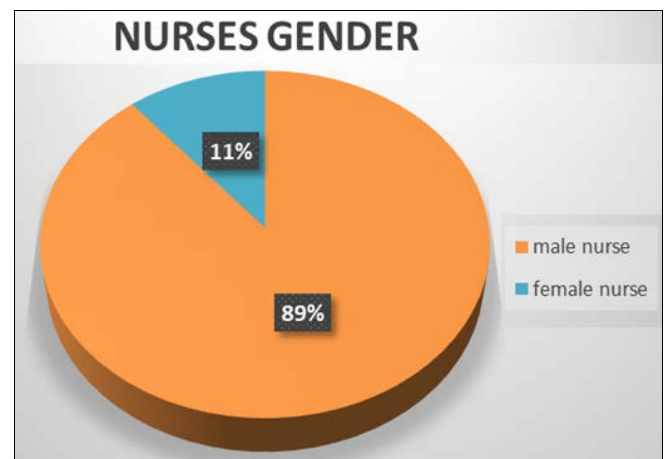


Fig 1: The figure shows the distribution of nurses according to gender.

### Themes That Emerged

#### Theme 1: Appearance of Physical Symptoms

Under this theme it reflects that nurses shows symptoms like headaches, frequent cold and infections, low energy, tiredness, lack of concentration, burning sensation in stomach and chest and frequent sleep disturbance.

"I get irrigated frequently and sometimes I wonder why I am concerning too much on this event/ matter (N 09).

".....I experience headache very often which interfere in my work ....." (N04).

#### Theme 2: Declining Motivation

Under this theme, it reflects that nurses wanted to grow, update their knowledge and skill but due to stress shows there is decrease of motivation in this field and bound to select the task which is mandate only. Following statements supports for the theme.

".....did not attend any kind of workshop or conference past three years though I am very much interested in attending conferences/workshop and to update in my skill" (N02).

".....I just wanted to finish my clinical task ... there is no time to think any other areas" (N07)

#### Theme 3: Improper Communication

This theme refers as, due to stress often leads misunderstandings, conflict and misinformation that results in mismanagement of work at workplace. Disconnected attitude among the health team members.

“.....does not get time to talk and lost attitude often feel” (N05).

“.....self-engaged and merged only with task” (N8)

#### **Theme 4: Imbalance in Personal and Professional responsibilities**

This theme refers to safe mismatch with personal and professional responsibilities. Due to work overload and staff shortage at workplace there is demand of more shift and double duty which hampers the personal family life.

“... .. Not able to prioritize the things at workplace and at home.” (N07).

“No time for family members and even cant spare time to self to look after self-health... (N06)

#### **Discussion**

Present study findings shown that following themes emerged after collecting the experiences from nurses viz appearance of physical symptoms, declining motivation, improper communication and difficult in balancing the personal and professional life.

Findings of study focused that with an elderly people, the stress of caring for dying patients and their families is one of the important cause for the stress of high. Study mentioned that caring for dying patients is stressful for nurses although there is slight data regarding that experience. Study adopted approach of grounded theory approach to scrutinize the experiences of nurses and their particular concerns about caring for a dying patient and the study shows nurses expressed personal concerns, concerns related to relatives of patient and patient self which comprise communication challenges with families and patient.

#### **Conclusion**

Stress is response to event, situation and challenge stress helps to meet and follow the timelines and avoid danger but when stress exceeds or continuous stress pour on individual it invites health problems. As stress is subjective in nature so getting the experience to will help in developing the techniques to relieve the stress. Exploration of nurses' perceptions of stress during the pandemic's early phase provides important insight into the nature of nurses' experiences and potential measures that healthcare institutions can take to mitigate nurses' stress. Providing nurses with adequate personal protective equipment is one concrete measure that can help to keep nurses safe and to alleviate their fear of becoming infected. Healthcare units should provide opportunities for nurses to discuss the stress they are experiencing, support one another, and make suggestions for workplace adaptations during this pandemic. Healthcare institutions and nurse managers need to recognize these sources of stress in order to identify potential organizational interventions to maintain nurses' health, safety, and well-being. The emerging evidence suggests that there is a global phenomenon of mass trauma experienced by nurses working in the COVID-19 response. The phenomenon is complex and intertwined with various issues including persistently high workloads, increased patient decency and mortality, occupational burnout, inadequate personal protective equipment.

#### **Limitations**

- The study has used the purposive sampling technique
- Generalization of findings could not done as sample

size was less which is not representative of all nurses.

- The study was limited to descriptive phenomenological in nature.

**Conflict of Interest:** The authors certify that they have no involvement in any organization or entity with any financial or non-financial interest in the subject matter or materials discussed in this paper.

**Source of Funding:** Self-Funded

**Ethical Clearance:** The study was approved by Institute Research Committee. Informed consent was obtained for the study from each respondent. Codes were used for the respondents and hence privacy and confidentiality was maintained.

**Acknowledgement:** I most sincerely convey my deep sense of gratitude to my guide/Organisation for her/their remarkable guidance and academic support during this study.

#### **References**

1. Moustaka E, Constantinidis TC. Sources and effects of work-related stress in nursing. *Health science journal*. 2010;4(4):210.
2. Mojinyinola JK. Effects of job stress on health, personal and work behaviour of nurses in public hospitals in Ibadan Metropolis, Nigeria. *Studies on Ethno-Medicine*. 2008;2(2):143-148.
3. Beh LS, Loo LH. Job stress and coping mechanisms among nursing staff in public health services. *International Journal of Academic Research in Business and Social Sciences*. 2012;2(7):131.
4. Wu H, Chi TS, Chen L, Wang L, Jin YP. Occupational stress among hospital nurses: cross-sectional survey. *Journal of advanced nursing*. 2010;66(3):627–634.
5. Marshall J. Stress amongst nurses. In: Cooper CL, Marshall, editors. *White Collar and Professional Stress*. London, Chicester: Wiley; 1980. [Google Scholar]
6. Bailey RD. *Coping with stress in caring*. Oxford: Blackwell. 1985. [Google Scholar]
7. Price JL, Mueller CW. *Professional turnover: The case for nurses*. New York: New Medical and Scientific Books; 1981. [Google Scholar]
8. Cronin-Stubbs D, Brophy EB. Burnout: Can social support save the psychiatric nurses? *J Psychosoc Nurs Mental Health Serv*. 1985;23:8-13. [PubMed] [Google Scholar]
9. Houtman I, Jettinghoff K. *Raising Awareness of Stress at Work in Developing Countries: A Modern Hazard in a Traditional Working Environment*. World Health Organization Publications. Available from: [http://www.who.int/occupational\\_health/publications/raisingawarenessofstress.pdf](http://www.who.int/occupational_health/publications/raisingawarenessofstress.pdf). [Last assessed on 2011 May 12].
10. Kumar D. *Nursing for the Delivery of Essential Health Interventions*. Available from: [http://www.whoindia.org/LinkFiles/Commission\\_on\\_Macroeconomic\\_and\\_Health\\_Nursing\\_for\\_the\\_delivery\\_of\\_essential\\_health\\_interventions.pdf](http://www.whoindia.org/LinkFiles/Commission_on_Macroeconomic_and_Health_Nursing_for_the_delivery_of_essential_health_interventions.pdf). [Last accessed on 2011 Jun 06].

11. Nizami A, Rafique I, Aslam F, Minhas FA, Najam N. Occupational stress and job satisfaction among nurses at a tertiary care hospital. *J Pak Psychiatr* 2006;3:25.
12. Chang EM, Hancock KM, Johnson A, Daly J, Jackson D. Role stress in nurses: Review of related factors and strategies for moving forward. *Nurs Health Sci.* 2005;7:57-65.
13. Olofsson B, Bengtsson C, Brink E. Absence of response: A study of nurses' experience of stress in the workplace. *J Nurs Manag.* 2003;11:351-8.
14. French SE, Lenton R, Walters V, Eyles J. An empirical evaluation of an expanded nursing stress scale. *J Nurs Meas.* 2000;8:161-78.
15. Kumar N, Shekhar C, Kumar P, Kundu AS. Kuppuswamy's socioeconomic status scale-updating for 2007. *Indian J Pediatr.* 2007;74:1131-2.
16. Peterson JL, Johnson MA, Halvorsen B, Apmann L, Chang PC, Kershek S. What is it so stressful about caring for a dying patient? A qualitative study of nurses' experiences. *International Journal of Palliative Nursing.* 2010;16(4):181-187.