



Self-Perceived Work Stress between Emergency Department Nurses' and General Wards Nurses

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ABSTRACT

Background: Nursing profession is a very stressful profession and mounting evidence indicates that it may be on the rise in death and dying, conflict with physicians, inadequate emotional preparation, problems relating to peers, problems relating to supervisors, workload, uncertainty concerning treatments, 8) patients and families and, discrimination especially among nurses who work in emergency department nursing.

Objectives: The current study aimed to assess self-perceived work stress between emergency department nurses' (ED) and general wards nurses (GW).

Methodology: The study was conducted by selecting a non-probability (purposive) sample. Ninety six nurses included in the current study; (48) work in emergency department and (48) in general ward. By interviewing each nurse, we prepared a draft of 57 items within nine domain (Expanded Nursing Stress Scale) questionnaire.

Results: The assessment of stress was moderate for both ED nurses and GW nurses with mean of scores (2.00 and 2.47) respectively. The mean difference was high statistically significant (p-value <0.0001).

Conclusion: ED nurses reported a high level of occupational stress compared to GW nurses.

Keywords: stress, Nurses, expanded nursing stress scale, Emergency department, general department.

INTRODUCTION

Nurses are at increased risk of stress, which occurs because of work-related preoccupation with excessive work demands and inadequate rest. In nursing work, heavy workload, long working hours including mandatory overtime, and other stressful situations are common. Moreover, night shifts and short rest periods between shifts included in shift work can affect sleep quality, impede recovery from

fatigue, and thus significantly build up fatigue and progression to fatigue ^(1,13). Previous studies have reported that nurse stress is associated with an individual's mental health problems. Burnout, intentions to change jobs, and a decrease in work performance all put nurses under a lot of stress. Therefore, managing and reducing stress for nurses, through screening and early intervention based on

effective indications, is essential, This is considered sufficient evidence that emergency department nursing is exposed to the utmost levels of fatigue and others, since all the pressures mentioned in various studies indicate that it is an environment exposed to all kinds of troubles (2,9).

According to world health organization, stress can be defined as any type of change that causes physical, emotional or psychological strain. Stress is your body's response to anything that requires attention or action. Everyone experiences stress to some degree (13). The way you respond to stress, however, makes a big difference to your overall well-being (8,3). The highlights some of the challenges faced by nurses in emergency departments are exposed to many problems including (long work shifts, problems with doctors and colleagues, and frequent assaults on them by patients or their families), which makes the profession of emergency nursing a profession that requires physical and emotional effort (4). This puts emergency department nurses under great psychological, emotional and physical pressure, which affects their physical and mental health, as well as behavior with patients, their families or colleagues, as well as serious damage to their immunity, especially at the present time overall, emergency department nursing is a challenging and essential profession, and it's crucial that nurses are supported in their roles to provide the best possible care for their patient's, The pressures of nurses working in the field of health care reduce the provision of health care to patients and dissatisfaction with the service; therefore, determining the severity and extent of its devastating effects in different parts of the hospital, especially in the emergency department, would be one of the solutions to improve mental health and the quality of service provided to patients as well as nurses (4,13).

Therefore, stress is an interesting research topic because it has the potential to reduce an individual's quality of life and ultimately lead to increased morbidity and mortality rates; Stress can have a detrimental effect on mental and physical health and immunity (6,5). According to a recent study conducted in the United States, more than half of the respondents indicated that stress had a detrimental effect on their work productivity (11).

AIMS OF THE STUDY

The current study aimed to assess self-perceived work stress between emergency department nurses' (ED) and general wards nurses (GW).

METHODOLOGY

The study was conducted by selecting a non-probability (purposive) sample. The sample size consisted of (90) nurses from three large hospitals (Al-Manathira General Hospital, Al-Sadr Teaching Hospital, and Al-Hakim General Hospital) at Al-Najaf province included in the study, 45 emergency department nurses and 45 general ward nurses. The researcher used the Expanded Nursing Stress Scale (ENSS) developed by French et al. (2000) (9) to measure job stress. Expanded nursing stress scale is used to measure the sources and frequency of job stress perceived by nurses in the changing health care delivery and nursing work environments. Previous internal reliability was assessed by using Cronbach's coefficient alpha. The whole expanded nursing stress scale demonstrated the reliability was 0.92. The expanded nursing stress scale is congruent with the current nursing situation and has been found to have a good validity and high reliability. Moreover, it measures all aspects of job related stress and it is in line with the status in the health care system.

Table (1): Transformation of Expanded Nursing Stress Scale

Mean score	Level of Job stress scale
1.00-1.99	Low
2.00 - 2.99	Moderate
3.00- 4.00	High

Scoring system: The Expanded Nursing Stress Scale on a 4- point Likert scale, is rated. The participant responses were graded by the researcher as follows: 1- never, 2- occasionally, 3- frequently, and 4- always. Transformation of the scores: The greatest mean score was 4 and the lowest mean score was 1. The interval of 1 is obtained by dividing the difference between the highest mean score and the lowest mean score by 3 (Polit & Hungler, 1999).

The Analysis of the data in the current study has been done by using the SPSS version 20. The frequency, percentage, Chi square, comparison significance, probability value, degree of freedom and standard deviation were used for descriptive statistics of the data. Pearson correlation, and Non-parametric Mann-Whitney U test were used for inferential statistics. The outcomes are considered statistically significant when the P-value is equal to or less than 0.05.

The expanded nursing stress scale consists of a total of 57 items with nine subscales including 1- death and dying, 2- conflict with physicians, 3- inadequate emotional preparation, 4- problems relating to peers, 5- problems relating to supervisors, 6- workload, 7- uncertainty concerning treatments, 8- patients and families and, 9- discrimination (11).

RESULTS

Table (1.1) illustrates the statistical distribution and difference between the GW and ED groups by their socio-demographic data. This table explains that most of the nurses in GW group are those in the age's group (≤ 30) years old, while in ED group are those in the age's group (31-35) years old. In addition, the table shows that the high percentages of participants in both groups are males in the GW and ED groups (57.78 and 68.89 %) respectively.

Concerning the level of education, (46.66%) in the GW have B.Sc. and (40%) in the ED have diploma. Concerning the Marital Status, (84.44%) in the GW and (68.89%) in ED, were married. Regarding the Residence, (75.56%) in the GW and (66.67%) in ED, were in rural area.

Statistically, there is no significant difference between the GW and ED groups (gender, residence, marital status, and achievement education) when analyzed by Fisher's exact probability test, except age groups, it was statistically high significant (p-value < 0.01).

Table (1.2): Distribution of Socio-Demographic Data for both GW and ED Groups Participants (N=90; 55 for each Group).

Demographic data		Groups				C.S.		
		GW		ED		Chi-square	(df)	P-value
		Freq.	%	Freq.	%			
Age groups (Years)	<= 30	20	44.44	10	22.22	12.54	3	0.006 (HS)
	31 - 35	14	31.11	20	44.44			
	36 - 40	2	4.44	11	24.44			
	41 Up	9	20	4	8.89			
Gender	Males	26	57.78	31	68.89	1.196	1	0.274 (NS)
	Females	19	42.22	14	31.11			
Residence	Rural	34	75.56	30	66.67	0.865	1	0.352 (NS)
	Urban	11	24.44	15	33.33			
Marital Status	Married	38	84.44	31	68.89	6.777	3	0.079 (NS)
	Interrupted	0	0	4	8.89			
	Widower	7	15.56	10	22.22			
Education Level	Middle school Nursing Academy (diploma)	14	31.11	12	26.67	4.683	4	0.321 (NS)
	Bachelor's degree	10	22.22	18	40			
		21	46.66	15	33.33			
Total		45	100%	45	100%			

%= percentage, freq. = frequency, C.S: comparison significance, p- value= probability value, df degree of freedom, NS= non-significance, HS= high significant

Table (1.2) shows the overall assessment of GW group Stress regarding Expanded nursing stress scale domain. It was a moderate in both GW and ED

groups (2.00 and 2.47) mean scores respectively see figure (1.1). The mean difference was high statistically significant (p-value <0.0001).

Table (1.3): Overall Evaluation of Stress Regarding Expanded nursing stress scale domains in the GW and ED Groups

Overall items	GW		M.S	Assess.	ED		M.S	Assess.	t-test (Sig.)
	F.	%			F.	%			
ENSS	Low	25	55.56	2.00	Moderate	7	15.56	2.47	Moderate (<0.0001) HS
	Moderate	20	44.44			35	77.78		
	High	0	0			3	6.67		
Total		45	100%			45	100%		

Low (mean of scores 0-1.99), Moderate (mean of scores 2-2.99), High (mean of scores 3 and more).

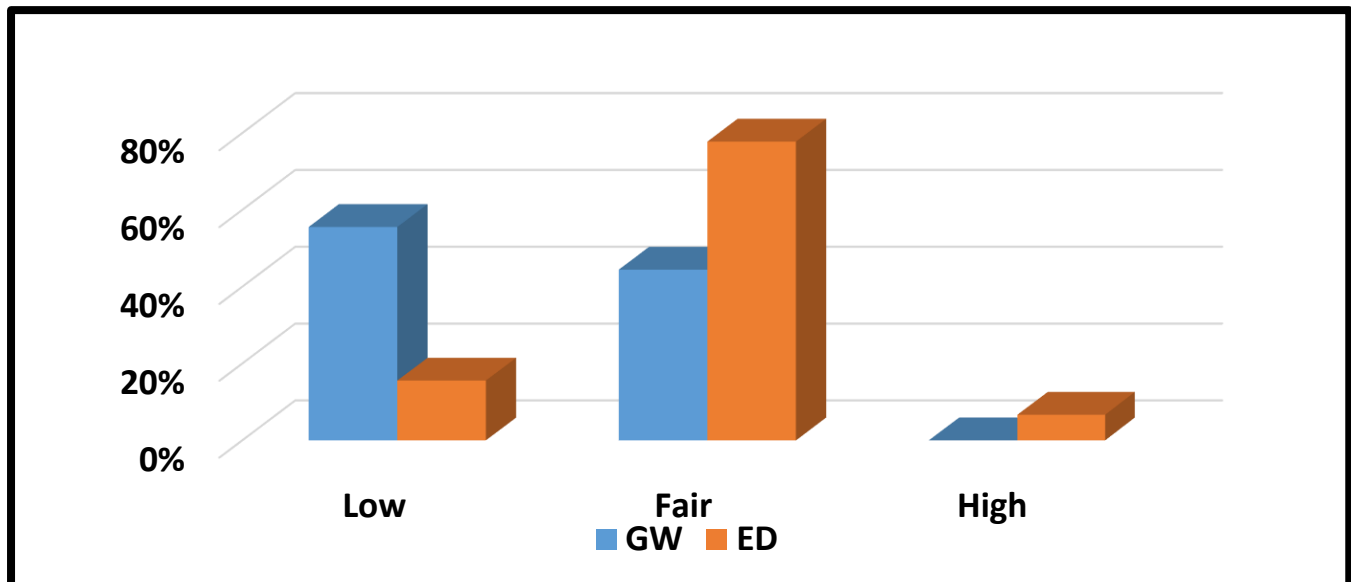


Figure (1.1): Overall Evaluation of Stress Regarding Expanded nursing stress scale domains in the GW and ED Groups

DISCUSSION:

The emergency department is a more complex and highly technical environment where nurses provide care to critically ill patients, compared to GW. In contrast, patients in GW are relatively stable, and the emergency score is low. The main finding of this study showed that ED nurses had significantly higher levels of stress than GW nurses with regard to fatigue, depressive mood, and higher tendency toward anxiety (7,12).

Our study recorded that the emergency department nurses suffer more from not having enough empathy, while the general ward nurses recorded a lower percentage. The same applies to problems related to colleagues in the same workplace, as well as with the special official of the department. While it was recorded that there was a medium degree, but with a clear disparity between the emergency department and the general wards, regarding problems with patients and their families, and insufficient information about medications, as well as workloads.

ED nurses scored significantly higher on the PSS than GW nurses. This is in accordance with Revicki and Gershon's (1996) study results of work

related stress in emergency medicine worker. The results indicate that nurses working in ED study results 532 departments perceived themselves to experience more stress than GW nurses (14). From the PSS subscales, patient related difficulty and workload were the two subscales that showed the highest score for both groups. The result was similar to other; even though no significant difference was shown between the two groups, ED nurses perceived higher levels of patient related difficulties, organizational structure, lack of resources, and conflict with other professionals than did GW nurses.

This suggests that those subscales reflected important causes of work related stress. The mean PSS score in this study was 1.51. The study of Cushway et al 1999, study, where the mean PSS score of nurses was relatively low at 1.30, showed good internal consistency coefficients of 0.87 to 0.94.22 Thus, PSS score within this range should have similar internal consistency (6, 1, and 15). Our results show a non-significant relationship in the GW and ED group's between demographic data and Expanded nursing stress scale according to their Age, Gender, Residence, and Level of Education, at a p-value of more than 0.05 (data Not mentioned).

These findings support previous results that ED nursing is more stressful than GW nursing. ED nurses, reported perceived a moderate level of stress than GW nurses. This is considered as a result of the pressures that the nursing staff in the emergency department is exposed to more than others in the general wards, such as workloads dealing with different patients and their moods, difficult situations, lack of support, conflicts with doctors or colleagues.

CONCLUSIONS:

Emergency department nurses had higher levels of stress Compared to general ward nurses with respect to dying and dying, conflict with physicians, inadequate preparation, problems with peers, problems with supervisors, workload, uncertainty about treatment, patients and their families, and discrimination. which was accompanied by a modified expression of Signs of logical stress according to ENSS.

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