

A STUDY ON JOB STRESS AMONG WOMEN NURSES IN COIMBATORE CITY

Dr.M.Eswari* Dr.C.Meera**

*Assistant Professor, Women's Christian College, Chennai.

**Assistant Professor, Park College of Engineering and Technology, Coimbatore.

ABSTRACT

The purpose of this study was to investigate the stress level among the women nurses in Coimbatore city, Tamil Nadu. The researcher chose randomly 167 nursing homes from a total of 253 Hospitals located in Coimbatore city, Tamil Nadu. The participants (500) were randomly chosen from a list of nursing staff provided by each facility. Henry Garrett Ranking Technique was used to rank the problems faced by the women nurses whose are working in Hospitals in Coimbatore City. In this method the respondents were asked to rank the given problem according to the magnitude of the problem. Studies of this nature and magnitude may be instrumental in helping administrators to better meet the needs of long-term care nurses employed in their organizations, which may have implications for services delivery.

Keywords: Stress, Nursing, Problems of nurses

INTRODUCTION

More women are employed now than ever before, but more likely women get low productivity, low pay and vulnerable jobs, lack of social protection and basic rights than men according to a new report by the international labour organization ILO.

The report “Global employment trends for women – March 2003” said that the number of employed women grew by almost 200 million over the decade, to reach 1.2 billion in 2007 compared to 1.8 billion men. However, the number of unemployed women also grew from 70.2 to 81.6 million over the same period.

According to the report, improvements in the status of women in labour markets throughout the world have not substantially narrowed gender gaps in the workplace. The share of women in vulnerable employment, either unpaid contributing family workers or own account workers, rather than wage and salaried workers, decreased from 56.1 to 51.7 percent since 1997. However, the burden of vulnerability is still greater for women than men, especially in the world’s poorest regions.

The other key findings are that worldwide female unemployment rate stood at 6.4 percent compared to the male rate of 5.7 percent. Less than 70 women are economically active for every 100 men globally. Remaining outside the labour force is often not a choice but an imposition. It is likely that women would opt for paid work outside the home.

At the global level, female employment to population ratio indicates how much economies are able to take advantage of the productive potential of their working age population, which was 49.1 percent in 2007 compared to male employment to population ratio of 74.3 percent.

Over the past decade, the service sector has overtaken agriculture as the prime employer of women. In 2007, 35.1 percent of employed women worked in agriculture and 46.3 percent in services. In comparison, male sectoral shares were 34 percent in agriculture and 40.4 percent in services.¹

A nurse is a healthcare professional, who along with other health care professionals, is responsible for the treatment, safety, and recovery of acutely or chronically ill or injured people, health maintenance of the healthy, and treatment of life-threatening emergencies in a wide range of health care settings.

Nursing requires gentleness, compassion and sensitivity. These are innate qualities of a woman and for this reason women dominate the nursing profession. However, it is a field in which men also have and must continue to contribute. The largest group of workers in the health sector is those in the nursing occupations as nurses and nursing assistants. In a [hospital](#) from the general ward to the operating theater, nursing forms an integral part. This is one of the few domains of work that is almost totally dominated by women.

Nursing duties are manifold and cover a wide range of functions and responsibilities that depends with the level of qualification and the working [environment](#). At the initial level, nurses are required for the bedside care of patients, while at senior level they are required to manage special group of people like psychiatric, pediatric, intensive care patients etc., which require specialized skills. They are also involved in dispensing medication, keeping records of the patients’ progress, setting up and operating medical equipment, administration and several other routine chores.

This field is both mentally and physically demanding and nurses are often exposed to health risks from infectious diseases. As such this profession demands long hours of work and duties which incorporate both skill and understanding of patients needs. Those

1

who come forward to take up this as a career has to be patient, courageous, have a service mentality and at the same time be ready to work for extra hours even night shifts.

WORK STRESS

Stress has been categorized as an antecedent or stimulus, as a consequence or response, and as an interaction. It has been studied from many different frameworks (or perspectives?). For example, Selye² proposed a physiological assessment that supports considering the association between stress and illness. Conversely, Lazarus³ advocated a psychological view in which stress is “a particular relationship between the person and the environment that is appraised by the person as taxing or exceeding his or her resources and endangering his or her well-being.” Stress is not inherently deleterious, however. Each individual’s cognitive appraisal, their perceptions and interpretations, gives meaning to events and determines whether events are viewed as threatening or positive. Personality traits also influence the stress equation because what may be overtaxing to one person may be exhilarating to another.⁴

SCOPE OF THE STUDY

The scope of the study is confined to the 142 bedded hospitals in Coimbatore City. It highlights the Job stress among the women nurses in Coimbatore city. The working conditions of the nurses in Coimbatore city may be taken to be representative in character in reflecting the conditions of service of the nursing community of the whole state and a study of their condition would reasonably reflect the general conditions of the services of the nursing professions as a whole. The study, therefore, has made a humble attempt to assess the Job stress among the women nurses in Coimbatore city of Tamil Nadu.

OBJECTIVES OF THE STUDY

1. To find out the opinion towards the level of stress among the women nurses in Coimbatore city.
2. To study Job stress among the women nurses in Coimbatore city.

RESEARCH METHODOLOGY

The validity of any research is based on the systematic method of data collection and analysis. Both primary and secondary data were used for the present study. The primary data was collected from 500 sample respondents from Coimbatore City. For collecting the first-hand information from the women nurses, five hundred of them were chosen by simple random sampling method.

TOOL FOR DATA COLLECTION

Questionnaire was the main tool used to collect the pertinent data from the selected sample respondents. For this purpose, a well structured questionnaire was framed with the help of faculty guide, the research expert and the Chief Nurses of various Hospitals in Coimbatore.

DATA COLLECTION

Field survey method was employed to collect the primary data from the selected sample respondents. For this purpose, direct face-to-face interview method was employed to collect the data from the respondents.

LIMITATIONS OF THE STUDY

1. The study was restricted to the nurses working in Coimbatore city only.
2. The sample of 500 makes it difficult to generalize the results
3. The data was obtained through questionnaire and it has its own limitations
- 4.

STATISTICAL TOOLS USED – Henry Garrett ranking techniques

This technique was used to rank the problems faced by the women nurses whose are working in Hospitals in Coimbatore City. In this method the respondents were asked to rank the given problem according to the magnitude of the problem. The order of merit given by the respondents was converted into ranks by using the following formula.

$$\text{Percentage Position} = \frac{100 (R_{ij} - 0.5)}{N_j}$$

The percentage position of each rank thus obtained is converted into scores by referring to the table given by Henry Garrett. Then for each factor the scores of individual respondents were added together and divided by the total number of respondents for whom the scores were added. These mean scores for all the factors were arranged in order of ranks and inference drawn.

REVIEW OF LITERATURE

Nancy Flanagan(2006)⁵ in her study titled “Testing the relationship between job stress and satisfaction in correctional nurses” stated that the influence of organizational decision making strategies, staff support systems, and employee unions on job satisfaction and stress might provide further information about intent to stay and turnover and also found that the job stress was a significant predictor of job satisfaction.

Lambert et al., (2004)⁶ In addition to work place issues that nurses find stressful, prior studies have also identified factors that influence and/or predict nurses level of well being, either physically or psychologically. Some of these factors include the likelihood to leave the current nursing position, lack of support, use of escape-avoidance as a coping mechanism, age, conflict with physicians and conflict with other nurses psychological hardiness ,lack of emphatic concern and poor communication self esteem and social intimacy, work family conflict, confidence in one’s ability and use of self control and distancing as coping methods.

OPINION TOWARDS THE LEVEL OF STRESS

The respondents’ opinion towards their job stress level may differ for everyone. To evaluate the stress level among the selected sample respondents sixteen factors are categorized and discussed in the following table.

**Table No: 1
STRESS LEVEL AMONG THE NURSES**

S. No	Factors	Not Stressful	Very Mild	Mild	Moderate	Severe
1	Torture of the higher authorities	42 (8.4)	133 (26.6)	46 (9.2)	264 (52.8)	15 (3.0)
2	Conflict with supervisor	58 (11.6)	90 (18.0)	84 (16.8)	240 (48.0)	28 (5.6)
3	Work overload	47 (9.4)	129 (25.8)	73 (14.6)	241 (48.2)	10 (2.0)
4	Disturbance at work due to overcrowding	40 (8.0)	143 (28.6)	73 (14.6)	243 (48.6)	1 (0.2)
5	Shift problems	32 (6.4)	169 (33.8)	85 (17.0)	213 (42.6)	1 (0.2)
6	Unpredictable scheduling	68 (13.6)	111 (22.2)	80 (16.0)	203 (40.6)	38 (7.6)
7	Fear of making a mistake	35 (7.0)	84 (16.8)	150 (30.0)	195 (39.0)	36 (7.2)
8	Conflict between team members	96 (19.2)	146 (29.2)	93 (18.6)	123 (24.6)	42 (8.4)
9	Lack of team work	41 (8.2)	138 (27.6)	42 (8.4)	263 (52.6)	16 (3.2)
10	No recognition from Co-workers and higher authorities	64 (12.8)	83 (16.6)	87 (17.4)	241 (48.2)	25 (5.0)
11	Insufficient equipment for working	48 (9.6)	92 (18.4)	72 (14.4)	241 (48.2)	47 (9.4)
12	Lack of inter professional communication	19 (3.8)	135 (27.0)	73 (14.6)	251 (50.2)	22 (4.4)
13	Insufficient training	24 (4.8)	168 (33.6)	99 (19.8)	196 (39.2)	13 (2.6)
14	Staff shortage	82	85	133	106	94

		(16.4)	(17.0)	(26.6)	(21.2)	(18.8)
15	Frequent change of work pattern	22 (4.4)	92 (18.4)	65 (13.0)	272 (54.4)	49 (9.8)
16	Lack of security in the work	67 (13.4)	134 (26.8)	97 (19.4)	176 (35.2)	26 (5.2)

Note : Parentheses indicates Percentages

The above table discussed the stress level among the selected sample respondents.

FINDINGS

- Most (52.8% and 48.0%) of the respondents are having moderate stress towards torture of the higher authorities and conflict with supervisor.
- Maximum (48.2%) of the respondents are having moderate stress towards work overload, No recognition from Co-workers and higher authorities and Insufficient equipment for working.
- Majority (48.6% and 42.6%) of the respondents are having moderate stress towards disturbance at work due to overcrowding and shift problems.
- Most (40.6% and 39.0%) of the respondents are having moderate stress towards unpredictable scheduling and fear of making a mistake.
- Majority (29.2% and 52.6%) of the respondents are having very mild stress towards conflict between team members and lack of team work.
- Maximum (50.2% and 39.2) of the respondents are having moderate stress towards No recognition from Lack of inter professional communication and Insufficient training.
- Majority (26.6%) of the respondents are having mild stress towards staff shortage followed by 18.8 percentage are having severe stress.
- Most (54.4% and 35.2%) of the respondents are having moderate stress towards Frequent change of work pattern and Lack of security in the work.

STRESS LEVEL AMONG THE NURSES

Table No: 2
STRESS LEVEL AMONG THE NURSES

S. No	Factors	Total Score	Mean Score	Rank
1	Torture of the higher authorities	24498	49.00	X
2	Conflict with supervisor	24340	48.68	XII
3	Work overload	24934	49.87	VII
4	Disturbance at work due to overcrowding	25118	50.24	V
5	Shift problems	25504	51.01	III
6	Unpredictable scheduling	24941	49.88	VI
7	Fear of making a mistake	23949	47.90	XIII

8	Conflict between team members	26726	53.45	I
9	Lack of team work	24513	49.03	IX
10	No recognition from Co-workers and higher authorities	24478	48.96	XI
11	Insufficient equipment for working	23627	47.25	XV
12	Lack of inter professional communication	23900	47.80	XIV
13	Insufficient training	25163	50.33	IV
14	Staff shortage	24575	49.15	VIII
15	Frequent change of work pattern	22617	45.23	XVI
16	Lack of security in the work	25739	51.48	II

In management of the house, the need for job satisfaction from their job places. But due to less satisfaction and more stress in their job they face lot of problems. Among the selected sixteen problems, most of the women nurses face a problem ‘Conflict between team members’ which ranked as first followed by them with Garrett scored as 26726 points. They feel that Lack of security in the work, shift problems and insufficient training also a major problem. Disturbance at work due to overcrowding got the fifth rank with a score of 25118. Insufficient equipment for working and frequent change of work pattern is not affecting the nurses much among these problems.

SUGGESTIONS

1. The study shows that the majority of women nurses are suffered from high level of torture from their supervisors. It is essential for the management to hire eminent personalities who have very good leadership qualities and make others also to be so. If supervisors are trained under such trainers, the attributes of an individual can be upgraded. This will lead to increase job satisfaction of women nurses.
2. As per this study, unpredictable schedule and workload is the major problem faced by the women nurses in Coimbatore city. Nurses in supervisory positions, who make patient care assignments, need to be sensitive to the workload involved with each assignment and the schedule should be informed well in advance. It will be helpful to enhance the job satisfaction.
3. The main findings of the study indicate that women nurses face many problems due to the conflict between their domestic commitments and workplace demands. The study suggests that women nurses should take a fresh look at their personal and professional goals and devise ways to balance them. The hospitals and government should come up with policies and programs to protect the interests of the women nurses.
4. The women nurses expect support, recognition and encouragement from their family members, which is essential for mutual benefits and reduce their stress. It is encouraging to observe that most of the women nurses have a positive attitude on overcoming the difficulties faced by them in course of performing their dual role. Given a right support, they will be able effectively to overcome the negative effects of role conflicts and prove themselves to be efficient both at home and at the work place.

CONCLUSION

In conclusion, there are many factors that contribute to dissatisfaction in the work place. Recognition of frustrations, such as turnover, lack of internal empowerment, burnout, and elimination of external sources of stress can decrease satisfaction in the nursing care setting. Stress is a concept that has sustained the interest of nurses and researchers for several decades. These concepts are highly relevant to the workforce in general and nursing in particular. Despite this interest and relevance, the effects of stress and burnout on patient outcomes, patient safety, and quality care are not well defined by evidence.

REFERENCE:

1. The Hindu, March 7, 2008
2. Selye H(1956.). The stress of life. New York: McGraw Hill
3. Lazarus RS, Folkman S(1984). Stress appraisal and coping. New York: Springer (p. 19)
4. French JRP, Caplan RD(1972) Organizational stress and individual strain. In: Marrow AJ ed. The failure of success. New York: AMACOM. pp 30-66.
5. Nancy A Flanagan(2006) “Testing the relationship between job stress and satisfaction in correctional nurses”, *Nursing Research*, ,Vol.55,No.5. p.316-327
6. Lambert,V., Lambert,C & Ito,M.2004 Cross cultural comparison of workplace stressors, ways of coping and demographic characteristics as predictors of physical and mental health among hospital nurses in Japan, Thailand, South korea and the USA(Hawaii) *International journal of nursing studies*, 41, 671-684.