



Occupational Stress And Psychological Wellbeing Among Nurses Working In Government Hospitals

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Abstract:

Nursing stress is considered a problem that affects the practice worldwide. Occupational stress is a harmful response physically and emotionally when the nurses' skills, resource and needs could not fulfill the requirement of the job. The more psychological healthy the nurses are the more likely they will be productive and successful in the field. This study aims to investigate the occupational stress and psychological well-being among nurses working in the government hospitals. Random sampling technique was used to select the sample of 100 nurses of working in government hospitals (male-50 & female -50) from Satara, district of Maharashtra. For obtaining data occupational stress scale and psychological well-being scale were used respectively. Statistical technique such as t-test and correlation was applied for data analysis.

The result of the study revealed that there is no significant gender difference in occupational stress among nurses working in the government hospitals. It is also found that there is no significant gender difference in psychological well-being among nurses working in the government hospitals. Whereas, a significant correlation between occupational stress and psychological well-being of nurses working in the government hospitals.

Keyword: Occupational Stress, Well Being.

Introduction:

Basically Nursing is a stressful job. Nursing job requires a lot of mental, emotional and physical energy to caring for others. Nurses are often caught between complex hierarchy of authority of Doctors, Matrons, families or caretakers and administrators. The health care is a growing phenomenon in India. Nurses play the major role in health care industry and are the first ones who are thought about when we talk about health care. The

success of patient care and the repudiation of the hospital depend on large extent of the efficiencies extended by the nursing staff. Nurses are the backbone of the health industry.

Stress, in general and occupational stress, in particular, is a fact of modern day life that seems to have been on the increase. Occupational stress can be defined as the harmful physical and emotional responses that when the requirements of the job do not match the

capabilities resources, or needs of the worker. Edwards and Burned (2003) classify stress in the workplace as “occupational stress” The term refers to the “disruption in individual’s psychological and physiological homeostasis that forces them to deviate from normal functioning in interaction with their jobs and work environment”. Allen, Hitt and Green (1982). Holmlund and Strandvick (2005) defined occupational stress as “incapability of employees to manage the job pressures due to gap of job demands and employees capabilities to fulfill the job needs”. Occupational stress is a mental and physical condition which affects an individual’s productivity, effectiveness, health and quality of work Comish and Swindle, (1994).

The concept of well-being is expressed as “subjective well-being, psychological well-being, happiness”, “health and happiness”, or “quality of life”. In psychological studies it is generally labeled as “mental health” or “psychological health” (Galinha I. & Pais-Ribeiro, J. (2011). Gough et.al. (2007) defined well-being as ‘What people are notionally able to do and to be, and what they have actually been able to do and to be’. Levi (1987) defined ‘psychological well-being as a dynamic state characterized by reasonable amount of harmony between individual’s abilities, needs and expectations, environmental demands and opportunities’. Psychological well-being has more to do with the management of the existential challenges

of life such as having meaning in one’s life growing and developing as a person. According to Anger (2008), even the philosophical literature refers to the ‘simple notion’ of wellbeing in a variety of ways, including a person’s good, benefit, advantage, interest, prudential value, welfare, happiness flourishing, utility, quality of life, and thriven. Therefore the present study is designed to investigate the difference between occupational stress and Psychological wellbeing of Nurses working in government hospitals and correlation between these two psychological variables.

Review of Literature:

It contains an overview of the development and establishment of approaches to Occupational stress and Psychological well-being particularly in the Nursing profession. Many researchers have been to know the level of occupation related stress. Sharma et.al., (2014) study examined occupational stress of nurses and found that hospital working nurses moderate (51%) to severe (3%) level of job related stress. According to them occupational stressors were poor doctor’s attitude, posting in busy departments, inadequate pay, too much work, time pressure and tiring job with insufficient time for rest and meals.

Alhajjar (2013) conducted a study to investigate into stress among hospital nurses. He found a high prevalence of psychological distress, depression among nurses. The most severe occupational stressors identified were, not enough staff

to adequately cover the unit', 'lack of drugs and equipments required for nursing care', 'unpredictable staffing and scheduling', respectively. Further, 'workload', and 'death and dying' were identified as the most frequent and severe occupational stressors.

Mosadeghrad (2013) explored the status of occupational stress among hospital nurses. The Researcher found that the major sources of stress among nurses were : inadequate pay, inequality at work, too much work, staff shortage, lack of promotion, job insecurity and lack of management support. Bryan et. Al. (2000) investigate workplace stress levels and personal or workplace demographics using a sample of 170 urological nurses. They found that excessive workload was the most prominently identified causes of the work stress among the sample of urological nurses. Consdine & Buchanan (1990) reported that nurses major sources of stress were related to hours and roistering, particularly the regular working of unpaid overtime : inadequate staffing, absence of trained and experienced staff : excessive workload and increasing level of responsibility.

Bailey *et.al.* (1980) investigated stressors in intensive care unit nurses' work environment using the Stress Audit with 1,794 respondents. Interpersonal relationships were listed as the most common stressor by respondents, e.g. personal conflicts with staff and physicians, disagreement with physicians over patient care and therapy, conflicts with organizational leadership, lack of

respect by physicians, lack of team work, and communication problems.

Babalola E O & Olumuyiwa O (2015) studied Job Satisfaction and Psychological wellbeing among mental Health Nurses on the Sample of 110 psychiatric nurses. Result revealed that 84.5% of nurses reported positive psychological wellbeing, while 15.5% had psychological distress. Job satisfaction had a positive significant relationship with psychological wellbeing. Majority of the respondents in the study reported that they were satisfied with their work. Many of them also reported positive psychological wellbeing.

Purpose of Study:

One of the important and major working is health. In the health sector many different services are there, among them Nurses play a very prominent role of health sector. The nurses day by day, face different problem of situation like, work stress, mental health disturbance, work load and psychological issues. Hence the present study is undertaken to know the level of occupation stress and psychological well being among working nurses in the government hospitals.

Objectives:

1. To study the occupational stress among nurses working in the government hospitals.
2. To know the psychological wellbeing among nurses working in the government hospitals.

3. To study the correlation between occupational stress and psychological well-being among nurses working in the government hospitals.

Hypotheses:

1. There will be a significant gender difference in occupational stress among nurses working in the government hospitals.
2. There will be a significant gender difference in psychological well-being among nurses working in the government hospitals.
3. There will be significant correlation between occupational stress and psychological wellbeing of nurses working in the government hospitals.

Sample:

For this study a sample of 100 (male = 50 & female = 50) nurses working in government hospitals were randomly selected from different government hospitals of Satara district of Maharashtra.

Psychological Tools:

Occupational Stress scale developed by Srivastava and Singh (1981)

was used to measure the occupational stress. It consists 46 items and 12 sub areas. Each item has 5 responses “Strongly disagree, Disagree, Undecided, Agree and strongly agree. The sub dimensions are such as. 1. Role overloads 2. Role ambiguity 3. Role conflict 4. Powerlessness group and Political pressure 5. Responsibility for

person 6.Under participation 7. Powerlessness 8. Poor peer relations 9. Intrinsic impoverishment 10. Low status 11. Strenuous working conditions 12. Unprofitability. Higher the score on this scale indicates high occupational stress and vice versa. The split-half method and Cronbach’s alpha-coefficient reliability is 0.90 and computing coefficients validity of scale is 0.59.

Psychological Wellbeing scale developed by Singh and Choudhary (2012)

was used to measure the Psychological Wellbeing. It consists 50 items and 5 sub areas. Each item has 5 responses “Strongly Agree, Agree, Undecided, Disagree and Strongly Disagree. The scale has 5 dimensions such as. 1. Satisfaction 2. Efficiency 3. Sociability 4. Mental Health and 5. Interpersonal Relations. Higher the score is on this scale indicates high Psychological wellbeing. The test-retest reliability is 0.90 and external criteria coefficient validity of scale is 0.94.

Test administration:

Occupational Stress and Psychological wellbeing scales were administered individually as well as on the small group of Nurses by the researchers personally in their respective working places.

Statistical tools:

The *t*-test and Karl Pearson’s coefficient of correlation statistical techniques were used to analyze the data.

Results And Discussion:**Table – 1 : Shows the Mean, SD and t-value of overall Occupational Stress &its dimensions of working Nurses in the government hospitals.**

Occupational Stress	Male (N = 50)		Female (N = 50)		t-value
	Mean	SD	Mean	SD	
Role overloads	49.57	10.122	50.43	9.961	- .42
Role ambiguity	48.88	9.787	51.12	10.184	- 1.11
Role conflict	48.73	9.757	51.27	10.176	- 1.27
Unreasonable group and Political pressure	48.83	9.428	51.17	10.506	- 1.16
Responsibility for person	49.72	9.837	50.28	10.252	- .27
Under participation	53.29	9.537	46.71	9.437	3.46 ***
Powerlessness	51.17	8.997	48.83	10.876	1.17
Poor peer relations	50.69	9.540	49.31	10.491	.66
Intrinsic impoverishment	51.49	9.538	48.51	10.322	1.49
Low status	50.00	10.177	50.00	9.923	.00
Strenuous working conditions	48.93	8.935	51.07	10.948	-1.07
Unprofitability	46.74	9.049	53.26	9.921	3.436***
Overall Occupational stress	49.78	9.32	50.22	10.72	.21 NS

NS : Not significant, *** Significant at 0.001.

Table – 1 reveals that there is no significant gender difference in the Occupational Stress of Nurses working in the Government hospitals. The Male nurses Mean = 49.78, SD = 9.32 and Female nurses Mean = 50.22, SD = 10.72 and t-value = .21. This shows that there is clearly no significant gender difference in occupational stress among male and female nurses. The female Nurses are exhibited slightly more Occupational Stress compared to their counterparts but it is negligible. Therefore the first hypothesis stating that there will be significant difference in occupational stress between male and female nurses working in the government hospitals, has been rejected.

The earlier study conducted by Apeksha Gulavani and Mahadeo Shinde (2014) indentifies there was no significant association found in male and female nurses occupational stress. The Study observed by Anju, Kumkum Singh (2015) reported that there was statistically significant difference among male and female nurses, female nurses show higher occupational stress compared to male.

With regard to the under participation dimension the government working nurses male mean = 53.29, SD = 9.53. While the female nurses mean 46.71, SD = 9.43, the obtained t-value = 3.46, which is significant at 0.01. This indicates that the male nurses working in the

government hospitals shows more under participation compared to female nurses. May be because of lack of interest, poor motivation and proper environment etc.

Further in case of unprofitability dimension the male nurses mean = 46.75, SD = 9.04, the female nurses mean = 53.26, SD = 9.92, the obtained t-value = 3.43, which is significant at 0.01 level. This show compare to male, the female mean high. Because the female nurses work commitment better than male nurses.

Male nurses involvement is less compare to female nurses.

Whereas on the remaining dimensions of Occupational Stress such as Role overload, Role ambiguity, Role conflict, Unreasonable group and Political pressure, Responsibility for person, Powerlessness, Poor peer relations, intrinsic impoverishment, Low status; Strenuous working conditions it is found that there is no significant difference among male and female nurses working in government hospitals.

Table-2: Shows the Mean, SD and t-value of Psychological wellbeing & its dimension working Nurses in government hospitals.

Psychological wellbeing	Male (N=50)		Female (N=50)		t-value
	Mean	SD	Mean	SD	
Satisfaction	48.29	11.15	51.71	8.462	-1.72
Efficiency	48.79	8.71	51.21	11.09	-1.21
Sociability	50.79	9.25	49.21	10.72	.78
Mental Health	50.25	9.36	49.75	10.68	.25
Interpersonal Relations	49.93	8.59	50.07	11.31	-07
Overall Psychological wellbeing	49.47	8.91	50.53	11.04	.53NS

NS-Not Significant

Table-2 reveals that there is no significant gender difference in the Psychological wellbeing of nurses working in government hospitals. The Male nurses Mean = 49.47, SD = 8.91 and Female nurses Mean = 50.53, SD = 11.04 and t-value = .53. This result shows there is no significant difference in the overall psychological well-being of male and female nurses. Therefore the second hypothesis stating that there will be significant difference in psychological

well-being among male and female nurses working in the government hospitals, has been rejected. Madhuchandra, Shrimati (2016) the study revealed that male and female doctor and nurses' do not differ significantly on overall psychological wellbeing, however domains wise result indicate that male and female doctors and nurse differ significantly on Personal Growth. Male nurses and doctors were found to be more on personal growth as compare to female respondents.

Whereas, Susmita Halder, & Akash Kumar Mahato (2013) studied on Stress and psychological well being status among

health care professionals. Result of the study shows that stress leel was highest among nurses.

Table-3 : Shows correlation Between Occupational Stress and Psychological wellbeing of nurses working in government hospitals.

Variable	r-value
Occupational X Psychological wellbeing	.442***

****Significant at 0.01 levels**

Table -3 depict that there is significant correlation between occupational stress and psychological well-being of nurses working in government hospitals. The r value – 442 is significant at 0.01 levels and there is significant correlation between occupational stress and psychological well-being of nurses working in government hospitals. Therefore the third hypothesis stating that there is will be significant correlation between occupational stress and psychological wellbeing of nurses working in the government hospitals has been accepted. It suggests that better the psychological well-being decreases the occupational stress among nurses.

Conclusions;

1. There is no significant gender difference in occupational stress among nurses working in the government hospitals.
2. There is no significant gender difference in psychological well-being among nurses working in the government hospitals.

3. There is a significant correlation between Occupational Stress and Psychological wellbeing among nurses working in the government hospitals.

Limitation of the Study:

1. Restricted only to the Satara district Maharashtra state & Government hospitals.
2. The data was collected only from GNM nurses. (General Nurse Midwife)
3. Sample size is less.

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