

Prevalence and Management of Stress among Nurses in Ughelli North Local Government Area of Delta State, Nigeria

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Abstract

This study investigated the prevalence and management of stress among nurses in Ughelli North Local Government Area of Delta State, Nigeria. The descriptive cross-sectional survey design was adopted for the study. The population for the study consisted of 212 registered nurses in Ughelli North Local Government Area of Delta State. The sample size for this study was 161 registered nurses. Data was collected using a semi-structured questionnaire titled prevalence and management of stress among nurses questionnaire. The instrument attained a reliability co-efficient of 0.70. Data was analyzed using descriptive statistics of percentages. The finding of the study showed that 43.7% always experienced excessive work load, 56.2% always experienced stress from death and dying, 37.5% experienced uncertainty concerning treatment, 18.8% experienced conflicts with other nurses, while 12.5% always experienced conflicts with physicians. The finding of the study also showed that 56.2% agreed going on dates, clubbing, seeing a movie and hanging out, and going home to relax, 25% agreed watching movies and listening to music, dancing, 12.5 agreed playing football, table tennis and engaging in other sporting activities, 62.5% agreed sleeping and resting, 62.5% agreed talking to a counselor, chatting and relaxing with friends, engaging in social activities, 50% indicated regular exercise like swimming, jogging among others, 25% agreed engaging in extra-curricular activities. It was concluded that prevalence of stress was significantly high, and nurses adopt several management strategies to cope with stress. It was recommended amongst others that the government, ministries of health and other relevant health management agencies should implement professional counseling units to offer coping strategies among nurses

Keywords: Stress, Prevalence, Management strategies, Nurses, Delta State

Introduction

Stress in the nursing profession is a chronic issue, as they participate in many health activities in the hospital settings. Stress is a global phenomenon generally of which nurses have their fair share. Stress has detrimental outcomes and consequences on the physical, psychological, and emotional well-being of a person's health condition (Olayinka & Osamudiamen, 2013). The nursing profession is a demanding, enquiring, and stressful profession. The nurse promotes, protects, and advocates for human rights, shares the responsibility and supporting human needs, provides the quality of health and patient's safety (International Council of Nurses (ICN), 2012). Morgan and Tromborg (2007) described stress as a condition of having internal or external demands that are imbalanced to the human's capacity for responding or coping abilities to those demands.

The prevalence of stress is the rate at which stress exist in all occupation including nursing. A study on prevalence of depressive symptoms among nurses by Maharaj, Lees and Lal (2018) reported it to be 35–41%, in the USA, 18%, 11%–80% in Iranian nurses, 35% in Chinese nurses, 17% in Australian Midwives, and 51% in Brazilian nurses, approximately 33% of French nurse managers and 10% Canadian nurses. Lasebikan and Oyetunde (2012) reported a high level of burnout was identified in 39.1% of the respondents in the area of emotional exhaustion (EE), 29.2% in the area of depersonalization and 40.0% in the area of reduced personal accomplishment among nurses in Nigeria. High level of stress may also be experienced among nurses in Delta State. The prevalence of stress among nurses has devastating health consequences on them as well as the patients and this, at some point in time make them to be rude to some patients as they attend to the patients. To this extent, it is pertinent for nurses to adopt ways to manage stress.

Stress management has been defined as a form which includes an extensive variety of techniques, methods, and procedures to be adopted to alleviate stress (Kurki, 2018). Therefore, different ways of managing stress were adopted by nurses as was best suited to their personality. Some of these effective techniques includes massage, acupuncture, sports and acupressure, which has been proven to be the stress relief and reducing the burnout (Sincero, 2012). Several studies have shown that the strategies nurses have used to cope with occupational stress included motivating themselves by looking forward to going home at the end of the day, having social activities, hobbies, and interests (Edwards, Burnard, Coyle, Fothergill & Hannigan, 2000 in Kurki, 2018).

Therefore, it is completely possible to recover and get rid of the stress syndrome without experiencing any harmful consequences (McCormack & Cotter 2013). Stress management could contain any kind of effective activities or actions as a source of reducing mental or emotional strain such as sports, meditation, cognitive therapy, and relaxation techniques) (Medical Dictionary, 2009). Another approach to stress managing among nurses is from a holistic perspective which include mentally, physically, and spiritually (Misterek, 2009; Duran, 2015). The process of reducing the stress by using the holistic methods demands that nurses should take part in self-care actions such as exercises, eating healthy diets and getting involves in new hobbies. Misterek (2009) noted that to be able to provide health care for others, nurses must take care of themselves by staying healthy in mind, body, and spirit.

In recent times nursing job was regarded as the most stressful one and had led to many work-drop-out globally. It has been affirmed by current research that occupational stress is a significant problem among nurses in several parts of the world. Further, recent research suggests that several work-related stressors are associated with nursing including poor social support, lake of knowledge as well as noise pollution. It is affirmed by another recent research that occupational stress is very dangerous for nurses and for the organization. It deters nurse's health both physically and mentally during job. Physically and mentally disturbed nurses feel ill and insecure on the duty, so elements such as illness, lack of motivation, insecurity can cause stress among nurses at workplace. Occupational stress has significant impact on organizational overall growth. This is may be the situation of nurses in Ughelli North local government area. Evidence showed that higher level of occupational stress and physical and psychological burnout in health workers have led to the clashes between personnel, impaired health and inability to perform medical task, predisposition to professional negligence and commission, and ultimately reducing the quality of health care provided.

Additionally, organizations whose employees are stressed may turn out unsuccessful, less productive and less dynamic. Documentary evidence by research shows that role boundary and role insufficiency are leading indicators for occupational stress among nurses. In the light of this, workers with sensitive job who deals with the health of human and their duties influences both personal health and health of others in the society. Therefore the researcher intends to assess the prevalence of stress and management among nurses,

Purpose of the Study

The purpose of this study is to investigate the prevalence and management of stress among nurses in Ughelli North Local Government Area of Delta State. Specifically the study sought to determine:

1. Assess the prevalence of stress among nurses in Ughelli North Local Government Area of Delta State
2. The stress management strategies among nurses in Ughelli North Local Government Area of Delta State

Research Questions

Based on the purpose of this research, the work is designed to answer the following research questions.

1. What is the prevalence of stress among nurses in Ughelli North Local Government Area of Delta State?
2. What are stress management strategies among nurses in Ughelli North Local Government Area of Delta State?

Methods

The design for this study was a cross-sectional survey design. According to Elendu (2010) cross-sectional survey design is used to generate data from a section of the population describing events based on their occurrence in the natural setting at a point in time. The population for the study consisted of 212 registered nurses in Ughelli North Local Government Area of Delta State (National Association of Nigeria Nurse and Midwives, 2019). The sample size for the study consisted of 161 nurses in Ughelli North Local Government Area of Delta State. This is 75% of the total population. Purposive sampling technique was used to select the seven clans in Ughelli North Local Government Area. Convenient sampling technique was used to access nurses in government health facilities in Ughelli North Local Government Area of Delta State. The instrument used for data collection was a questionnaire adapted from Adzakpah, Laar and Fiadjoe (2016) titled "Occupational stress among nurses in a hospital setting in Ghana". The instrument was made of 3 sections; section A provide the socio-demographic data of respondent, section B focused on prevalence of stress among nurses and section C, on management of stress among nurses.

Validity is the ability of an instrument to measure what it is intended to measure. The instrument that was used in this study is a standardized questionnaire which is valid. Hence, does not need to be validated. Reliability refers to the ability of an instrument to consistently measure what it is designed to measure. The reliability coefficient of the adopted questionnaire was 0.70. Hence, the instrument was considered reliable for use in this study. The questionnaire titled Prevalence and Management of Stress among Nurses

Questionnaire (PMSNQ) was self-administered by the researcher and 6 trained research assistants on the nurses in Ughelli North Local Government Area of Delta State. The research assistants were briefed on how to approach respondents, explain the objectives of the study and how to collate filled instrument. Filled instruments were collected at the spot for onward sorting and analysis. Data collected from this study were coded and analyzed using simple percentage (%).

Results

Table 1: Prevalence of stress among nurses

Variables	Frequency	Percentage
Work load		
low	30	18.8
average	60	37.5
excessive	70	43.7
Total	160	100.0
Death and dying		
Never	30	18.8
Occasional	40	25
always	90	56.2
Total	160	100.0
Uncertainty concerning treatment		
Never	40	25
Occasional	50	31.2
Always	60	37.5
Total	160	100.0
Conflicts with other nurses		
Never	90	56.2
Occasional	40	25
Always	30	18.8
Total	160	100.0
Conflicts with physicians		
Never	110	68.7
Occasional	30	18.8
Always	20	12.5
Total	160	100.0
Inadequate preparation for emergency		
Never	25	15.6
Occasional	35	21.8
Always	110	68.7
Total	160	100.0
Lack of staff support		
Never	75	46.8
Occasional	55	34.3
Always	30	18.8
Total	160	100.0
Not enough staff to adequately cover the unit		
Never	25	15.6
Occasional	45	28.1
Always	90	56.2
Total	160	100.0
Conflicts with supervisors		
Never	90	56.2
Occasional	40	25.0
Always	30	18.8
Total	160	100.0



Discrimination		
Never	100	62.5
Occasional	35	21.8
Always	25	15.6
Total	160	100.0

Table 1 revealed the prevalence of stress among nurses. The table showed that 43.7% of the population always experienced excessive work load, 56.2% always experienced stress from death and dying, 37.5% experienced uncertainty concerning treatment, 18.8% experienced conflicts with other nurses, while 12.5% always experienced conflicts with physicians. The table further revealed the prevalence of stress among nurses. The table showed that always experienced 68.7% inadequate preparation, 18.8% experienced lack of staff support, 56.2% experienced not enough staff to adequately cover the unit, 18.8% experience problem with supervisors while 15.6% experience discrimination.

Table 2: stress management strategies

Variables	Frequency (F)	Percentage (%)
Going on dates, clubbing, seeing a movie and hanging out, and going home to relax		
Yes	90	56.2
No	70	43.7
Total	160	100.0
Watching movies and listening to music, dancing		
Yes	40	25.0
No	120	75.0
Total	160	100.0
Playing football, Table tennis and engaging in other sporting activities		
Yes	20	12.5
No	140	87.5
Total	160	100.0
Sleeping and resting		
Yes	100	62.5
No	60	37.5
Total	160	100.0
Talking to a counsellor, chatting and relaxing with friends, engaging in social activities		
Yes	100	62.5
No	60	37.5
Total	160	100.0
Regular exercise like swimming, jogging etc		
Yes	80	50
No	80	50
Total	160	100.0
Engaging in extra-curricular activities		
Yes	40	25.0
No	120	75.0
Total	160	100.0
Playing video games and browsing		
Yes	90	56.2
No	70	43.8
Total	160	100.0
Reading, studying the scriptures and praying		
Yes	120	75.0
No	40	25.0

Total	160	100.0
Smoking and drinking, using of drugs		
Yes	15	9.4
No	145	90.6
Total	160	100.0

Table 2 revealed stress management strategies among nurses. It revealed that 56.2% agreed going on dates, clubbing, seeing a movie and hanging out, and going home to relax, 25% agreed watching movies and listening to music, dancing, 12.5% agreed playing football, table tennis and engaging in other sporting activities, 62.5% agreed sleeping and resting, 62.5% agreed talking to a counsellor, chatting and relaxing with friends, engaging in social activities, 50% indicated regular exercise like swimming, jogging among others, 25% agreed engaging in extra-curricular activities, 56.2% agreed playing video games and browsing, 75% indicated reading, studying the scriptures and praying, while 9.4% agreed smoking and drinking, using of drugs.

Discussion

The finding of the study in table 1 showed that 43.7% of the population always experience work load, 56.2% always experience stress from death and dying, 37.5% experience Uncertainty concerning treatment, 18.8% experience conflicts with other nurses, while 12.5% always experience conflicts with physicians, 68.7% always experience inadequate preparation, 18.8% experience lack of staff support, 56.2% experience not enough staff to adequately cover the unit, 18.8% experience problem with supervisors while 15.6% experience discrimination. The finding collaborates with that of Ben and Loo (2012) and Dagget et al (2016) whose studies discovered that there were experiences of stress among nurses such as much work load, stress from death and dying among others. The study of Gheshlagh et al (2017) also found out that stress was reported among nurses. The studies of Adzakpah et al (2018) indicated that nurses were facing some sort of stress amongst them. The studies of Trans et al (2019) also reported that some stress amongst nurses. The similarities between the present and previous studies might be attributed to the fact that the nursing profession is a universal profession that may likely demand the same level of tasks or activities around the world. Hence, the prevalence noticed among them.

The finding in table 2 showed that 56.2% agreed going on dates, clubbing, seeing a movie and hanging out, and going home to relax, 25% agreed watching movies and listening to music, dancing, 12.5% agreed playing football, table tennis and engaging in other sporting activities, 62.5% agreed sleeping and resting, 62.5% agreed talking to a counsellor, chatting and relaxing with friends, engaging in social activities, 50% indicated regular exercise like swimming, jogging etc, 25% agreed engaging in extra-curricular activities, 56.2% agreed playing video games and browsing, 75% indicated reading, studying the scriptures and praying, while 9.4% agreed smoking and drinking, using of drugs. The finding of the study is in line with that of Gu, et al (2014) whose study reported that respondents were able to develop some coping strategies towards stress. The finding of the study also confirms that of Adzakpah, et al (2018) whose study found out that respondent applied some stress management strategies to help themselves. The study also collaborates with that of Gheshlah, et al (2017) whose study reported that nurses devised strategic method to overcome stress. The reasons behind the similarities reported in these studies might be attributed to the fact that most individuals will always want to device strategies to cope with stress especially when they are affected or when the stress will adversely affect their emotions towards their activities.

Conclusion

Based on the findings of the study, it was concluded that the prevalence of stress was significantly high, and nurses adopt several management strategies to cope with stress.

Recommendations

- In view of the findings of this study, the following recommendations were made:
1. The government, ministries of health and other relevant health management agencies should implement professional counseling units to offer coping strategies among nurses
 2. The healthcare management should ensure adequate facilities and regular employment of staff are done to relieve work load reported among nurses
 3. The management of healthcare system should put in place measures aimed at promoting healthy work environment amongst nurses.



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