

IMPACT OF STRESS MANAGEMENT ON NURSES' RETENTION AT WORKPLACE IN A TERTIARY CARE HOSPITAL

ABID I, FAROOQ Z*, ZAFAR M, NAWAZ Z, TANIA R, ROMEEN A, SHEHBAZ S, PARVEEN S

Department Of Nursing, Saida Waheed FMH College of Nursing Lahore, Pakistan

*Correspondence author email address: Zambeelfarooq@gmail.com

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Abstract: *Upper crossing syndrome is a common postural dysfunction resulting from the muscles in the body's shoulder girdle/cervicothoracic region having a deficient tone. The muscles typically affected are the upper trapezius and the levator scapula, which is extremely common in physiotherapists. Poor posture is the main driver of UCS. Researchers have long seen the syndrome, whose work demands much bending and twisting. A cross-sectional study assessed the Upper Cross Syndrome in working female physiotherapists. Two hundred female physiotherapists completed The Oswestry Neck Pain and Disability Questionnaire, administered to individuals aged 23-38 who met the inclusion and exclusion criteria. Significant factors for the prevalence of upper cross syndrome in female physiotherapists were Age, gender, and working hours, all of which posed serious risks for the emergence of UCS. UCS was, nevertheless, very common among female physiotherapists. It was determined that 27% of practicing physiotherapists had Upper Cross Syndrome (UCS). The study found that pain intensity, headache, driving, and work were all significantly associated, with P-values of 0.000, 0.005, and 0.002, respectively, as determined by the chi-square test. This indicates that the results were statistically significant. Additionally, the study revealed that upper cross syndrome was highly prevalent among working physiotherapists, with a prevalence rate of 27%. The prevalence was directly related to the duration and hours of work. Furthermore, there was a strong correlation between work-related musculoskeletal disorders and upper cross syndrome.*

Keywords: Nurses, Stress Management, Tertiary Care, Hospital, Nurses Retention

Introduction

The Nursing Profession is very noble. Nurses are considered the hospital's heart due to their pivotal role. The nursing profession is vigilant in maintaining the quality of care provided by the health care professionals. The industry of health care is very challenging, with lots of obligations. This exposes nurses to both emotional and physical jeopardy. In severe cases, despair, apprehension, exhaustion syndrome, and post-traumatic stress disorder can all be brought on by high stress levels. The personal, professional, and institutional things and situations fluctuating daily are closely related to greater unrealistic stress among nurses providing intensive care. This happens for emergent integrative clarifications to lessen stress in the future (Vahedian-Azimi et al., 2019).

Based on the American Institute of Stress, stress is an important factor in 40% of the economic strain on a job and 80% of all work-related damages. High hopes, massive responsibility, and little power have been emphasized as the primary stresses in nurses, which are noted for having problematic and hectic job requirements and duties (Babapour et al., 2022).

Managerial inefficiency, high employee retention, absenteeism brought on by work-related stress, rising healthcare expenditures, and decreasing job satisfaction are all significantly influenced by stress. So, a goal for great healthcare is to provide a stress-free, healthy workplace for nurses. Therefore, stress management requires much work. Identification and analysis of tension-related problems and

various counseling strategies to alter the stressors. This will help to overcome the feeling of stress, which is all part of managing stress. These therapeutic techniques are applied as a component of a broader strategic model with deeper philosophical significance.

Additionally, stress reduction is a group of practices that promote wellness and shield people from stress's negative physical and mental impacts. Appropriate coping strategies are essential for nurses to improve the work setting, reduce stress, and perform better on the job. These include tricky skills like problem-solving, multitasking, meditation, and yoga (Ahmed and Zakaria).

The ability to retain nurses complements patient care and administrative skills, and it is a crucial measure of the excellence of healthcare services demonstrating effectiveness and productivity. Nurses' retention supports the objectives of the health care organization. To achieve objectives and deliver the best possible care to the suffering, nurses must specialize in different domains. To achieve competitive advantages, hospitals require strong-performance nurses, consequently appreciation, leading to nurse retention. Therefore, this study aims to determine the impact of stress management on nurses' retention.

- The nursing profession is very hectic, and nurses face stressed death and dying emergency situations in departments. It leads to the stress in nurses. Different job stressors lead to physical and mental illness.

Work stress and burnout remain significant concerns in nursing, affecting individuals and organizations. Stress

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management should be considered to overcome the negative consequences (Kumar & Jin, 2022). Therefore, it is required to investigate the impact of stress management on nurses' retention in the workplace.

A computerized fictional analysis was done utilizing Academic Search Premier, Google Scholar, CINHAL, Pub Med, and Google before the initiation of the study. Key search words used included stress management, nurses' retention, and stress. Articles were reviewed from 2019 to current as they related to the population of interest.

Nurse workforce sustainability in small countries monitoring mobility, managing retention. A policy brief was written for policymakers, nurses, and managers to investigate the interconnected concerns of regulating recruitment and retention and keeping track of their movement, which have come up in the WHO Europe Small Countries Initiative Human Resources for Health Working Group. The COVID-19 outbreak provided a background for the brief's preparation in 2020. It considers COVID-19's exceptional demands on the nursing workforce and how they will affect forms of turnover. It provided a flexible presentation on the most recent research on staff retention and movement to offer a policy framework and proposed control methods. The main points are that the COVID-19 pandemic, the diversity of the nurse staffing concerns, and the spectrum of viable remedies are all shared by low-population states with other nations, but to confirm that the packages of policy interventions they classify, implement, and assess, apply to their exceptional labor-advertise circumstances (Organization, 2022).

A qualitative descriptive design was used to conduct a study on "Work Features that Influence the Retention of Professional Nurses in the Public Health Sector in Windhoek, Namibia" to investigate how a health institution in Windhoek, Namibia, perceives the issues that affect professional nurses' retention (Washeya, F. N., & Fürst, L. N. (2021). 11 licensed nurses participated in semi-structured, in-person interviews. Tesch's eight processes for data analysis produced two themes: 1) Satisfaction with salary varied; the work environment was unfavorable, and 2) Disappointment was brought on by the unfavorable psychological impacts of the workplace and a lack of opportunity for career advancement. Compared to the commercial healthcare industry, which was seen as offering better opportunities, compensation packages in the public healthcare sector were considered insufficient. The physiological work environment is affected when staff members experience sentiments of guilt, frustration, tension, feeling unsafe and uncared for—all possible catalysts—because the physical work environment is unsupportive and under-resourced, leading to the loss of the professional nurse workforce due to letters of resignation (Nanda et al., 2020). In addition, professional growth chances were seen as biased and imbalanced. Policies are endorsed to recover the payment packages and deliver a well-resourced and favorable work setting, supportive for the professional nurse to ensure quality patient care. The study's objectives are to determine whether stress management impacts nurses' retention in a tertiary care hospital. The hypothesis is that stress management impacts nurses' retention at the workplace.

Methodology

A quantitative descriptive study design was used to conduct this study in Jinnah Hospital Lahore, Punjab, Pakistan. The study duration was six months after the approval of the Institutional Review Board (IRB). The sample consisted of 133 registered nurses working in Jinnah Hospital Lahore, Punjab, Pakistan, aged over 25 years, had valid Pakistan Nursing Council registration proof (PNC Card), and had clinical experience of less than three years. A convenient sampling technique was used to select the sample size, and Solvin's formula was used to calculate the sample size. Participants who were not cooperative or reluctant to participate were excluded from the study, as were novice nurses and nursing managers. Data was collected with the help of questionnaires, including a demographic data profile part and nurses' retention questionnaires. The nurses' retention questionnaire comprised 15 questions about retention and stress management. Informed consent was obtained from all participants, and the questionnaire was divided into two parts: the demographic profile and the retention questionnaire.

The data collection was analyzed using SPSS version 23.0 and MS Excel, and descriptive statistics were used to describe the study results. Frequency distributions, cross-tabulations, and graphs were used for this purpose. The statistical analyses were carried out using SPSS version 23.0.

Results

Demographic data shows that respondents age was >25 years of age. Respondents included males' 9% and 91% of females in this study. The educational level of this study's participants showed that 40.6% were BSN, 28.6% were POST RNs, and 30.8% were GNM. Respondents' clinical experience was <3 Years in this study. 48.1% belonged to the medical unit, and 51.9% were selected from surgical departments.

Table 1 Demographic of the study population:

Demographic Variables	Construct	Number (n)	Percent (%)
Gender	Male	12	9%
	Female	121	91%
Age	<25 years	0	0%
	25-35 years	0	0%
	>35 years	133	100%
Educational status	General Nursing and Midwifery	41	30.8%
	BS Nursing	54	40.6%
	Post Registered Nursing	38	28.6%
Designation	Charge Nurse	133	100%
	Nurse Manager	0	0%
	Nurse Intern	0	0%
Experience	<3 years	0	0%
	3-5 years	0	0%
	>5 years	133	100%

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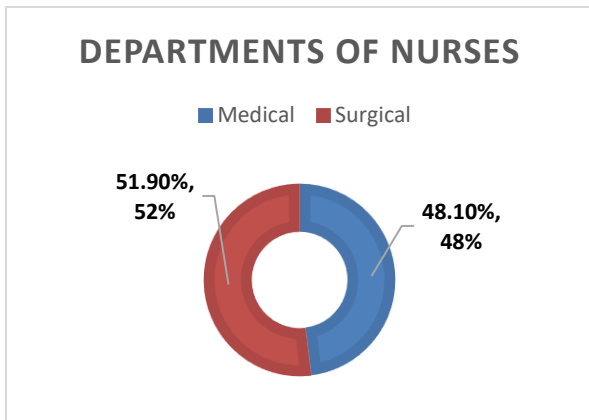


Figure 1: Departments of nursing in the study population

The table provides a comprehensive overview of respondents' perceptions and sentiments on various work-related aspects within the healthcare setting. It encompasses several statements and the corresponding percentages of agreement and disagreement, shedding light on the attitudes and experiences of the participants.

The first statement, "My work Challenges me," reflects how respondents perceive the challenging nature of their work. Most respondents, comprising 53%, expressed some level of agreement. Within this group, 27% agreed, while 26% strongly agreed. On the contrary, 46% of respondents disagreed, with 27% agreeing and 18% strongly disagreeing with the statement.

The second statement, "I feel that my talents are appreciated," gauges whether respondents believe their talents are acknowledged and valued in healthcare. A total

of 55% of the respondents agreed to some extent. Within this group, 29% agreed, and 26% strongly agreed. Conversely, 45% of respondents expressed disagreement, consisting of 38% in disagreement and 7% in strong disagreement.

The third statement, "I feel that I make a difference with patient care," highlights respondents' confidence in their ability to positively impact patient care. Remarkably, 56% of respondents strongly agreed with this statement, while 5% agreed. Notably, no respondents disagreed or strongly disagreed with this statement, indicating strong self-belief in their contributions to patient care.

The fourth statement, "I feel that I am a respected member of the healthcare team," assesses whether respondents feel respected and valued within their healthcare team. Unfortunately, 64% disagreed with this statement, with 46% in disagreement and 18% in strong disagreement. Only 36% expressed some level of agreement, with 21% strongly agreeing and 15% agreeing.

The fifth statement, "I feel supported by my team on my units," explores respondents' perceptions of support from their teams while working on their respective units. The majority (56.1%) expressed some level of agreement, with 51.1% in strong agreement and 5% in agreement. However, 44% of respondents disagreed, with 38% in disagreement and 6% in strong disagreement.

The final statement, "I feel that the charge nurse supports me," investigates whether respondents feel supported by the charge nurse in their role. Unfortunately, a significant majority (64%) disagreed with this statement, with 46% in disagreement and 18% in strong disagreement. Only 36% expressed some level of agreement, with 21% strongly agreeing and 15% agreeing.

Table 2 Impact of stress management on nurses' retention at workplace

Statement	Strongly Agree	Agree	Disagree	Strongly Disagree	Total Agree	Total Disagree
My work Challenges me	27.0%	26.0%	27.0%	18%	53%	46%
I feel that my talents are appreciated.	26%	29%	38%	7%	55%	45%
I feel that I make a difference in patient care	51%	5%	0%	0%	56%	0%
I feel that I am a respected member of the healthcare team	21%	15%	46%	18%	36%	64%
I feel supported by my team in my units.	51.1%	5%	38%	6%	56.1%	44%
I feel that I feel supported by the charge nurse	21%	15%	46%	18%	36%	64%

Discussion

In our study, 9% were males and 91% females. The participants are aged > 25. In the first statement regarding stress, it was evident that >53% of those who said that they have work challenges faced by them. 2-10 questions related to good retention and very good retention, showing that they have managed their stress in a better way by adopting different modalities of stress management techniques. The search revealed many studies on stress management's impact on nurse retention (Milliken et al., 2007). A pilot

study was conducted on "Stress Management Strategies and Quality of Life in undergraduate nursing and midwifery students in Poland" in June 2019 (Kowalska and Szwamel, 2022). The Mini-Cope Inventory of Stress Management Measurement (Mini-Cope) and the Global Health Organization Quality of Living Instrument Brief Form analyzed 234 college students. The respondents' overall Quality of Living was rated as excellent. The students gave the interpersonal relationship area of their quality of life the highest rating and the physical health domain the lowest. The materialistic position and the source of funding impact

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the standard of life (Mayer, 1997). The schemes that participants utilized the most frequently in tense events were Physical handling and Finding Comfort and care. In the interpersonal connection (p .001) and environmental (p .001) categories, the latter is most strongly linked with the Quality Of Life (Kowalska and Szwamel, 2022). This is reinforced further by McNeese-Smith (1997), who conducted a meta-analysis of 48 research to investigate nurse work satisfaction. She discovered that organizational dedication, communication with supervisors and peers, autonomy, recognition, fairness, age, years of experience, and professionalism are positively associated with work happiness (McNeese-Smith, 1997). A study conducted (by Milliken et al., 2007) shows that results are similar to this study that {, 2009 #62} stress management has a positive impact on nurse retention. If it is not properly dealt with, the nurse shortage will have to be faced. Most participants responded to 30-50%, showing that the retention rate was good as moderate stress management was noted. Management and policymakers need to prioritize stress management techniques. This can be achieved by implementing programs that provide incentives and raise awareness about stress management. According to Peterson (2001), the reality is that the nursing profession will be unable to compete with the myriad of other career opportunities unless we improve RN working conditions and provide clinical practice opportunities and responsibilities that match the RN's knowledge and skills (Peterson, 2001). Schaufeli and Enzmann, referenced in Cottrell (2000), provided instances of typical interventions at the person, group, and organizational levels (Cottrell, 2001). These stress management interventions, such as team building, workload management, mentorship, counseling, and Employee Assistance Programs, must be introduced and promoted to minimize stress at work. According to Aiken et al. (2001), several hospitals in the United States are known as magnet hospitals because they offer distinct attributes for nurse retention. Nurses at these institutions have a better position, more autonomy, and more influence over their practice settings (Aiken et al., 2001). Additionally, it is crucial to ensure that the organization's environment is peaceful and conducive to work. Conflict management strategies should also be implemented among employees, and strict compliance with rules and regulations should be maintained. Certain strategies should be considered to improve remuneration packages and create a supportive work environment that promotes quality patient care. In future studies, a qualitative approach should be taken into consideration.

Conclusion

The study found that most participants responded with a 30-50% retention rate, indicating that stress management was moderately effective. The study also concluded that stress management positively and moderately impacts nurses' retention in tertiary care hospitals. Implementing effective retention strategies can improve nurse job satisfaction, promote professionalism, reduce organizational costs, and enhance patient care.

Declarations

Data Availability statement

All data generated or analyzed during the study are included in the manuscript.

Ethics approval and consent to participate

Approved by the department Concerned.

Consent for publication

Approved

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Not applicable

Conflict of interest

The authors declared absence of conflict of interest.

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