

IMPACT OF JOB STRESS IN THE QUALITY OF NURSES' WORK LIFE WITH SPECIAL REFERENCE TO CHENNAI CITY

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ABSTRACT:

Background: The concept of quality of work life refers to the extent to which individuals can use their skills and abilities and confront and navigate circumstances that need autonomous decision-making and self-guidance. Moreover, the persons engaged in this activity perceive it to be of value. The objective of this research is to evaluate the quality of working life and job stress among nurses in the private hospitals in Chennai city, as well as to establish any potential correlation between the two variables.

Research Design: The research used a descriptive correlational methodology, with a purposive sample of 112 nurses. The study included individuals of both genders working in the nursing profession. The study was conducted at privately owned hospitals situated in the city of Chennai. The data was gathered by the use of a standardised questionnaire comprising two distinct sections. In the first section, the inclusion of personal information, work-related details, and an evaluation of the working conditions experienced by nurses was observed. Section II of the study was dedicated to the assessment of occupational stress by the use of a standardised scale.

Results: The study's results indicated that a significant majority of staff nurses working in private hospitals expressed a considerable degree of satisfaction with their work environment. Furthermore, a significant proportion of these nurses, namely 40%, reported a strong sense of contentment with the equilibrium between their professional and personal lives. In contrast, a minority of the participants, specifically fewer than one-quarter, indicated happiness with their work environment, while just a small number expressed contentment with the calibre of their job and the design of their tasks. Regarding the elements that contribute to job-related stress among staff nurses employed in private sector hospitals, a substantial majority of respondents, nearly 75%, indicated their agreement with the proposition that their working hours are not aligned with their personal life. Furthermore, a majority of the participants (more than 50%) identified frequent fluctuations in work schedules, insufficient remuneration relative to the demands of their responsibilities, and restricted opportunities for career advancement and personal development within their particular healthcare establishments.

Conclusion: A significant inverse association was observed between nurses' sense of quality of work life and their experience of workplace stress. Additionally, it was observed that there was a rise in the average scores of job stress when there was a low level of work design, work life, work context, work environment, and overall work quality of work life.

Keywords: Job stress, Quality of Work Life, and Quality of Nurses' work life.

INTRODUCTION

Nurses constitute a substantial and heterogeneous workforce within the healthcare system. The term "nurse" has its etymological roots in the Latin word "Nutricius," which conveys the concept of someone who provides nourishment, stimulates growth, and offers protection. The function of nurses within the healthcare system is undergoing a process of expansion and transformation.

The scope of their responsibilities extends beyond institutional care to include the provision of services across several tiers of the healthcare system. Nurses play a vital role in the healthcare delivery system by offering individuals secure, cost-effective, and high-quality services. Nurses have a crucial role in achieving favourable health outcomes such as a decrease in mortality, morbidity, and disability, as well as the promotion of health via the adoption of healthy lifestyles (Suresh, 2013).

The concept of Quality of Work Life (QWL) refers to the level of satisfaction experienced by employees concerning their personal and professional demands, as well as their engagement in the workplace and the attainment of organisational objectives (Swamy, Nanjundeswaraswamy & Rashmi, 2015). The analysis of work-life quality is conducted to enhance work circumstances, while considering the many aspects of a person's well-being, including physical, mental, psychological, and social demands (Sirin & Sokmen, 2015).

A good quality of work life (QWL) is important to effectively recruit new workers and maintain a stable staff. As a result, organisations are actively exploring strategies to effectively tackle challenges related to the recruitment and retention of employees, intending to attain a high Quality of Work Life (QWL). Prioritising the enhancement of Quality of Work Life (QWL) has the potential to augment the overall well-being and contentment of workers, hence yielding several benefits for the individual worker, the organisation, and the customers. Conversely, the inability to effectively address and control these elements may result in significant consequences for employee behavioural outcomes, including as organisational identity, work satisfaction, turnover intention, and organisational commitment (Gayathiri & Ramakrishnan, 2013; Jebel, 2013).

Nursing is characterised by demanding labour, and occupational stress is widespread among nurses, thereby impacting their quality of work life (QWL).

Occupational stress is a significant health concern for both nurses and the organisations they work for. The influence of elements in the nursing work environment and work organisation on nurses' quality of work life (QWL) is generally acknowledged. Hence, occupational stress is a progressively acknowledged health concern that impacts the quality of work life (QWL) for nurses. According to Behdin (2013), enhancing the work environment by detecting stresses may lead to improvements in both the work life of nurses and the overall quality of health care.

The presence of job-related stress poses a significant threat to the quality of work-life (QWL) experienced by nurses. Nurses are often exposed to the challenges of severe disease and mortality, a distinct stressor that sets their job apart from others. This exposure has a significant influence on their quality of work life (QWL) (Wilson et al., 2009). Cross-sectional research was conducted on Croatian nurses (n=1,392) employed at four university hospitals. The study aimed to identify and analyse the influence of eight primary categories of occupational stressors on the quality of work life (QWL) of these nurses. The primary objective of this research was to contribute to the current

body of literature in the field of occupational health by conducting a comprehensive analysis of the correlation between occupational stress and quality of work life (QWL) (**Wu, Chi, Chen, Wang, & Jin, 2010**).

STATEMENT OF THE PROBLEM

The nursing profession is impacted by a challenging and rigorous work environment. Nurses frequently face a variety of stressors within their professional setting, typically characterised by prevalent instances of physical and mental exhaustion, dissatisfaction with job demands, compromised emotional health, persistent fatigue despite work obligations, and the occurrence of burnout. The advent of the pandemic resulted in heightened levels of stress within the workplace, particularly among primary healthcare workers employed in the healthcare sector. The nursing profession has a significant influence on several aspects of an individual's personal life.

Various workplace aspects have a significant impact on individuals' impression of their performance, level of satisfaction with their work-life balance, and overall happiness in their nursing jobs. The primary focus of the nursing workforce is centred on job satisfaction. According to a survey, job dissatisfaction is mostly attributed to factors such as low pay and unfavourable working circumstances, which include deficiencies in the office environment, such as inadequate equipment. In situations when enterprises are unable to provide employees with necessary resources as a result of uncontrollable factors, it may impede the ability of workers to fulfil their responsibilities which is an additional stress to the nurses.

SIGNIFICANCE OF THE STUDY

Stress has been seen to be correlated with a perceived deficiency in achieving a harmonious equilibrium between work and personal life. The concept of work-life balance is often understood as the state in which individuals can effectively manage their responsibilities and obligations both in the workplace and in their personal lives while minimising any conflicts that may arise between these two domains (**Sturges & Guest, 2004**).

The preservation of highly skilled nurses is crucial for the sustainability of healthcare institutions. One potentially effective approach for examining nurse retention is to evaluate the quality of work life (QWL) and its associated factors. This assessment can enhance healthcare organisations' comprehension of the influence of the work environment and other related factors on nurses' professional and personal lives, as well as on organisational productivity (**Brook & Anderson, 2005; Brooks et al., 2007**).

In this particular context, the investigator noted that a significant number of nurses express dissatisfaction with many aspects of their work environment. These include working conditions, possibilities for professional advancement, involvement in decision-making processes, workplace safety, organisational and interpersonal relationships, as well as working hours. This research has the potential to provide vital insights into the elements related to quality of work life that have a substantial impact on job stress among critical care nurses. Therefore, this allows hospital management to implement more effective policies and processes to foster and cultivate a culture of professionalism inside the hospitals, thereby enhancing the current level of dedication towards the institutions.

REVIEW OF LITERATURE

According to the study conducted by **Brooks and Anderson (2005)**, The complexity and possibilities inherent in this conceptual framework of the Quantum Neural Network Language (QNWL) are readily apparent. The concept of Quality of Nursing Work Life (QNWL) is supported by robust theoretical underpinnings and has strong institutional validity. The field of organisational literature has garnered significant interest as a consequence. The complexity mostly arises from the presence of overlapping, poorly defined, and improperly measured empirical referents. The concept of job satisfaction does not bear resemblance to the Quality of Nursing Work Life and instead hinders comprehension.

Neha Gupta's 2021 study titled "Occupational Stress, Work-Life Balance, and Turnover Intentions among Nursing Staff" examines many factors contributing to the occurrence of occupational stress among nursing staff. Employees often experience heightened levels of occupational stress as a result of many factors and problems related to their job duties, organisational dynamics, relationships with supervisors and colleagues, and prevalent working conditions, among other relevant features. Research has shown that work-related stress has negative impacts on several dimensions of employees' lives, including job performance, job satisfaction, physical health, mental well-being, emotional state, commitment to the company, social interactions, personal life, and connections within the organisation. The correlation between employee stress and increased occurrence of health problems and decreased work productivity has been observed, leading to lower levels of job satisfaction and negative repercussions for the company as a whole. The primary aim of this study is the examination of the stress experienced by nurses.

Nursing professionals constitute about 33% of the healthcare workforce. The nursing profession is distinguished by a considerable degree of stress. Although stress is a fundamental component of all occupations and professions, some work roles are characterised by a greater level of stress in comparison to others. Occupations or careers that need continuous interaction with others, including diverse aspects of psychological, cognitive, or emotional connection, often demonstrate heightened levels of demand and stress in comparison to alternative employment opportunities. This presents a significant issue in the administration of professions such as healthcare, education, and other closely associated fields.

Singh (2022) did research entitled "Job Stress and Quality of Work Life in Hospitals," in which the author focused on the viewpoints of healthcare professionals, particularly nurses employed in both government and commercial healthcare facilities. The findings of the research indicate that nurses working in private hospitals regard their workload as a prominent determinant impacting their quality of work life, relative to their colleagues at government hospitals. When doing a comparative analysis of absenteeism rates among healthcare professionals, namely doctors hired by government hospitals and nurses and other medical workers, it becomes apparent that the latter group exhibits a greater prevalence of absenteeism. The aforementioned phenomenon might be ascribed to the arduous working conditions encountered by individuals in their respective

positions. The impact of stress on the quality of life experienced by nurses in private hospitals is mostly adverse.

The publication is authored by **Yustina P. M. Paschalia** and was published in the year 2022. Healthcare professionals are actively involved in a range of healthcare duties during the COVID-19 epidemic. If the epidemic persists for a prolonged period, it will give rise to a significant degree of uncertainty and danger. The conditions listed above possess the capacity to worsen people's adverse self-perception, heighten stress associated to work, and reduce the general quality of life for healthcare workers. The researcher observed a statistically significant link ($p < 0.001$) between professional stress and the general well-being of healthcare workers during the COVID-19 pandemic.

The research done by **Babapour et al. (2022)** The nursing profession poses considerable obstacles, and the professional stress experienced by nurses may potentially have detrimental impacts on their general well-being and quality of life. The primary aim of this study was to investigate the potential relationship between the quality of life perceived by nurses and their caregiving practises, alongside the degree of work stress they confront. The study was concluded by delivering the subsequent findings. The impact of occupational stress on the holistic well-being of nurses, with a specific focus on their physical and mental health, is mostly detrimental. Moreover, it is important to acknowledge that this phenomenon can impede the delivery of nursing care

OBJECTIVES OF THE STUDY

The primary objective of the present research is to evaluate the quality of working life and job stress experienced by nurses working in the private hospitals of Chennai City.

Additionally, the study aims to establish the link between the quality of work life and job stress among these nurses.

RESEARCH METHODOLOGY

The study used a quantitative descriptive research approach. The research was carried out among the workforce employed in the metropolitan area of Chennai. The calculation of the sample size was performed via the Rao sample size calculator. The survey includes a sample of 112 nurses who are currently employed in private hospitals in Chennai. Data was collected from the nurses via the use of the convenience sampling approach.

DATA ANALYSIS

The statistical analysis was performed using the Statistical Package for the Social Sciences (SPSS 20.0). Quality control measures were included throughout both the coding and data input stages. The data were subjected to analysis using descriptive statistics, which included the calculation of frequencies and percentages for qualitative variables, as well as the determination of the mean and standard deviation (SD) for quantitative variables.

The correlation coefficient test was used by the researchers to analyse the association between empowerment and job satisfaction. The statistical significance was established using a significance threshold of $p < 0.05$.

Table:1
DEMOGRAPHIC PROFILE AND JOB PROFILE OF THE SELECTED NURSES

DEMOGRAPHIC VARIABLES	PARTICULARS	FREQUENCY	PERCENT
GENDER	Male	36	32
	Female	76	68
	Total	112	100.0
EDUCATIONAL STATUS	GNM (Diploma)	15	13.4
	B.Sc. Nursing	61	54.5
	M.Sc. Nursing	20	17.9
	Other Courses	16	14.3
	Total	112	100.0
EMPLOYMENT STATUS	Permanent	45	40.2
	Temporary	42	37.5
	Contract	25	22.3
	Total	112	100.0
PERIOD OF TENURE	0 to 6 years	43	38.4
	7 to 10 years	33	29.5
	More than 10 years	36	32.1
	Total	112	100.0
MONTHLY INCOME	Up to 10000	18	16.1
	10001 to 20000	34	30.4
	20001 to 30000	46	41.1
	30001 to 40000	10	8.9
	More than 40000	4	3.6
	Total	112	100.0
TOTAL NUMBER OF FAMILY MEMBERS	0 to 3	56	50.0
	3 to 6	44	39.3
	More than 6	12	10.7
	Total	112	100.0

JOB PROFILE VARIABLES	PARTICULARS	FREQUENCY	PERCENTAGE
REGISTRATION STATUS	Registered	34	30.4
	Not Registered	78	69.6
	Total	112	100.0
SHIFT AND DURATION	Morning Shift	46	41.1
	Evening Shift	24	21.4
	Night Shift	12	10.7
	Rotational Shifts	30	26.8
	Total	112	100.0
GENDER RATIO	Mostly Female	86	76.8
	Mostly Male	7	6.3
	Equal Proportion	19	17.0
	Total	112	100.0
SALARY DISCRIMINATION	Equal	82	73.2
	Unequal	30	26.8
	Total	112	100.0
UNIT	Critical Care	23	20.5
	General wards	37	33.0
	Others	52	46.4
	Total	112	100.0
NO OF PATIENTS	0 to 4	23	20.5
	4 to 8	39	34.8
	8 to 12	28	25.0
	More than 12	22	19.6
	Total	112	100.0
DAY OFF	NIL	21	18.8
	1-2	89	79.5
	3-5	2	1.8
	Total	112	100.0

BREAKS	Nil	62	55.4
	5-30 Minutes	31	27.7
	1 Hour	8	7.1
	Depends Patients Count	11	9.8
	Total	112	100.0
SHIFT PREFERABLE	Morning shift	68	60.7
	Evening shift	33	29.5
	Night shift	11	9.8
	Total	112	100.0
WORKING HOURS PER WEEK	Less than 36	12	10.7
	36-48	23	20.5
	48-54	17	15.2
	54-60	32	28.6
	60-70	9	8.0
	70-80	6	5.4
	Above 90 hours	11	9.8
	Total	112	100.0

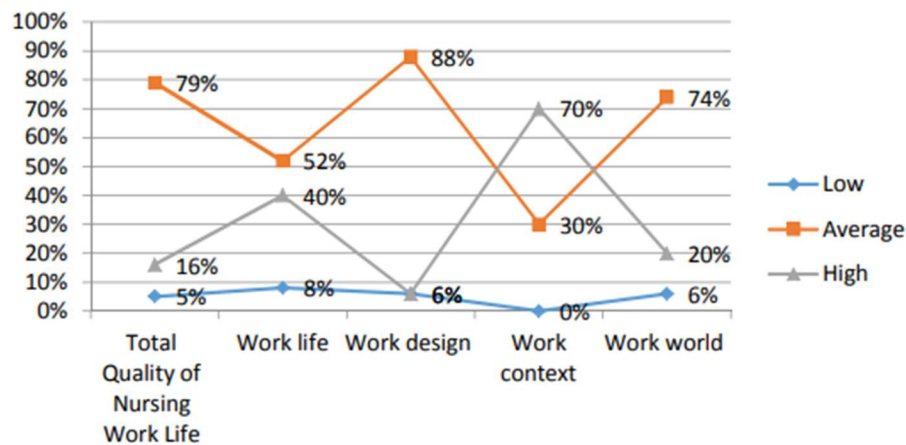
Interpretation: According to the data shown in the table above, it can be seen that a significant proportion of the participants are of the female gender, accounting for 68% of the total respondents. Furthermore, the majority of the respondents, namely 54.5%, possess an associate bachelor's degree in the field of nursing. The majority of nurses working in private hospitals earn a salary within the range of 20,000 to 30,000, while their tenure typically spans fewer than 10 years. A mere 30% of the nursing staff employed in private hospitals have completed the registration process. According to the findings, a significant majority of nurses, namely 78%, said that the predominant gender within their profession is female. The majority of nurses employed in private hospitals are assigned a patient load ranging from 8 to 12 individuals. More than half of the samples said that they do not get scheduled breaks throughout their shifts. According to a survey conducted at private hospitals in Chennai, a majority of 61% of respondents expressed a preference for the morning shift.

TABLE 3: MEAN JOB STRESS SCORE

DIMENSIONS	NO. OF ITEMS	MIN- MAX	MEAN±SD
Origins of Stress at Work	12	35 - 67	50.5 ± 6.4
Workplace Stress Level	12	27- 53	41.1 ± 5.6
Effects of Stress at Work	6	10- 24	16.4 ± 3.1
Complete Stress at Work	30	74 - 134	108.0 ± 12.5

Interpretation: Table 3 presents the mean overall work stress ratings, which were found to be 108.0 ± 12.5. The minimum and maximum values varied from 74 to 134.

FIGURE 1: FREQUENCY DISTRIBUTION



Interpretation: The findings of the study indicate that a significant proportion of the sampled population, specifically 88%, perceived the work design to be of average quality. This was followed by 79% of the participants who perceived the total quality of work-life scores to be average. Additionally, 74% of the respondents perceived the work world to be of average quality, while 52% perceived the work life to be average. Lastly, 30% of the participants perceived the work context to be of average quality.

FINDINGS AND DISCUSSION

According to **Bragard et al. (2012)**, improving their organisational efficiency requires a QWL. For them to be able to provide their patients the best care possible, nurses especially those who work in critical care units—should have a fulfilling work life. As a result, consideration for nurses' working lives is necessary. Because they are more focused on their personal lives than their jobs, over half of nurse’s report being unsatisfied with their work life, which might have a negative impact on the quality of their work.

In order to guarantee worker wellbeing, **Ojekou et al. (2015)** advocated in their research that hospital administration create a conducive work atmosphere by allocating sufficient resources and scheduling sufficient breaks. Also, most staff nurses in critical care units were unable to manage work and family obligations, according to **Abdelhakam et al. (2015)**, who evaluated the quality of work as seen by staff nurses and its connection to their turnover intention.

Thus, it can be inferred from both past and current research that administrators of health care facilities create effective strategies to raise employee satisfaction. This aids in enhancing the work and home settings to raise nurses' dedication and performance.

Job stress was examined in another part of this research. This section's research findings spoke to the nurse's opinions on the origins, severity, and effects of work-related stress. When it came to the many causes of workplace stress, such as work hours that interfere with personal life, the majority of respondents agreed. The hospital offers limited professional growth and development opportunities, with work shifts that change frequently. Additionally, the salary is not commensurate with the tasks required, and there are no financial incentives. Employees also face instability at home, lack of respect, and difficulty keeping up with the rapid advancements in technology. In addition to the stresses already described, it seemed possible that nurses working in various work contexts would feel varying amounts of stress.

CONCLUSION

The present study's results suggest the presence of a noteworthy inverse relationship between the degree of job-related stress encountered by staff nurses and their evaluations of their work life's quality. Additionally, it was noted that there existed a favourable association between average job stress scores and diminished levels of work life, work design, work context, work environment, and overall work quality of work life.

The presence of Quality of Work Life (QWL) has been shown to positively impact several aspects of the work. Therefore, healthcare administrators can enhance their efforts in advancing the quality of work life for nurses in private hospitals. The study aims to establish that by improving the environment provided by the organization, nurses would be better equipped to balance their home and professional lives.

REFERENCES

- [1]. Abdelhakam E., Abdellfattah M., and Abdelrahman S., (2015). Quality Of Work As Perceived By Staff Nurses And Its Relation To Their Turnover Intension At Critical Care Units. Master Thesis. Minia University, Egypt
- [2]. Al-Omar B., (2003). Sources of Work-Stress among Hospital-Staff at the Saudi MOH JKAU: Econ. & Adm., Vol. 17, No. 1, pp. 3-16.
- [3]. Behdin, N. (2013). Quality of work life: investigation of occupational stressors among obstetric nurses in Northeastern Ontario. Laurentian University of Sudbury.
- [4]. Bragard I., Dupuis G., Razavi D., Reynaert C., and Etienne, A (2012). Quality of Work Life In Doctors Working with Cancer Patients. Occu. Med., 62:34- 40. DOI:10.1093/occmed/kqr149
- [5]. Brooks, B. A, Storfjell, J., Omoike, O., Ohlson, S., Stemler, I., Shaver, J., and Brown, A. (2007). Assessing the quality of nursing work life. Nursing administration Quarterly. 2007, 31(2):152-157.
- [6]. Brooks, B. A., and Anderson, M. A. (2005). Defining quality of nursing work life. Nursing Economics, 23(6), 319.

- [7]. Gayathiri, R., and Ramakrishnan, L. (2013). Quality of Work Life – Linkage with Job Satisfaction and Performance. *International Journal of Business and Management Invention*. 1(2): 1-8.
- [8]. Jebel, G. (2013). Quality of work life and organizational commitment of employees in commercial bank of Ethiopia. Master thesis. College of Business and Economics, Addis Ababa University. 93P.
- [9]. Mohammed J., Almalki1, Gerry FitzGerald and Michele Clark Almalki (2012); Quality of work life among primary health care nurses in the Jazan region, Saudi Arabia: a cross-sectional study, *Human Resources for Health*, 10:30.
- [10]. Mosadeghrad A.M, Ewan F. and Duska R., (2011); A study of relationship between job stress, quality of working life and turnover intention among hospital employees , *Health Services Management Research* 2011; 24: 170–181.
- [11]. Ojekou, G.P. and Dorothy, O.T. (2015) Effect of Work Environment on Level of Work Stress and Burnout among Nurses in a Teaching Hospital in Nigeria. *Open Journal of Nursing*, 5, 948-955.
- [12]. Rita A.A; Atindanbila S; Mwini-Nyaledzigbor; Portia P. and Abepuoring P.(2013). *International Journal of Asian Social Science*, 2013, 3(3):762- 771.
- [13]. Sirin, M., and Sokmen, S. M. (2015). Quality of Nursing Work Life Scale: The Psychometric Evaluation of the Turkish Version. *International Journal of Caring Sciences*. 8 (3): 543-554
- [14]. Suresh, D. (2013). Quality of Nursing Work Life among nurses working in selected government and private hospitals in Thiruvananthapuram. SCTIMST.
- [15]. Swamy DR, Nanjundeswaraswamy T S. and Rashmi S. (2015). Quality of Work Life: Scale Development and Validation, *International Journal of Caring Sciences*. 8(2):281-300.
- [16]. Wilson, N., Couper, I., De Vries, E., Reid, S., Fish, T., and Marais, B. (2009). Inequitable distribution of healthcare professionals to rural and remote areas. *Rural Remote Health*, 9, 1060
- [17]. Wu, H., Chi, T. S., Chen, L., Wang, L., and Jin, Y. P. (2010). Occupational stress among hospital nurses: cross