FACTORS INFLUENCING OCCUPATIONAL STRESS AMONG NURSES IN GULU REGIONAL REFERRAL HOSPITAL, GULU CITY A CROSS-SECTIONAL STUDY.

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ABSTRACT

Background:

The purpose of the study was to assess the factors influencing occupational stress among nurses at Gulu Regional Referral Hospital, Gulu City.

Methodology:

This descriptive cross-sectional study took a quantitative research approach and it was conducted in Gulu Regional Referral Hospital, Gulu City. A sample of 30 nurses was selected using the convenience sampling method. A structured questionnaire was used to collect data and it involved both open and closed-ended questions. The data collected was presented in the form of tables, pie charts, and graphs for analysis.

Results:

Study results revealed that; 14(47%) were aged between 26-30 years, 23(77%) were female, and 30(100%) experienced stress while at work, with 12(40%) faced with a lot of demands from work and family. Results also revealed that 20 (67%) received supervision and training during their work to enable them to get relieved of stress, while 17 (56%) never received rewards at the facility when they worked hard. 28 (93%) faced some stressful moments with patients during work, 24 (80%) found caring for the dying so stressful and successful, 30 (100%) found that caring for uncooperative patients caused work-related stress, and 17 (57%) agreed that caring for severely ill patients is not interesting and it is frustrating.

Conclusion:

This research established that, although the nurses liked their job and perceived their profession as interesting, they experienced stress while caring for the severely ill, uncooperative patients and the dying.

Recommendation:

The government of Uganda should improve the working conditions of the nurses to reduce the stress at the workplace by recruiting more staff, conducting CMEs on stress management and improving their salaries.

Keywords: Occupational Stress, Nurses, Gulu Regional Referral Hospital

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BACKGROUND TO THE STUDY.

Occupational stress is the distress experienced by individuals in the face of work caused by stressors of the work environment, physical environment, organizational systems, and individuals (WHO, 2020). Nurses are exposed to a lot of stress when performing their duties because they are exposed to duties that cause negative impacts like fatigue and hence stress. Stress-related to occupational among nurses can be noticed when they lose concentration, face anxiety, dizziness, lose appetite, and become irritable or depressed, (Mina, 2018).

Globally, a minimum of 3 million nurses suffer occupational stress problems and this is responsible for 50 to 60% productivity losses in working days, (Eleni et al, 2020) where stressors of the work environment, physical environment, organizational systems, and individuals cause distress to the individual, (Khamisa et al, 2019). In addition, a study done by Rashaun et al., (2019) in the United States of America, indicated that more than 40% of all nurses

experienced occupational stress and 43.2% reported high levels of emotional exhaustion where over 40.4% of the health care professionals change workplaces due to stress faced at their workplaces. In Africa, a study done in Nigeria by Okwaraji, et al., (2018) among nurses from tertiary institutions, it was discovered that high levels of occupational stress were indicated in 42.9% (emotional exhaustion) of the nurses involved in the study; 47.6% in the area of depersonalization and 53.8% in the area of reduced personal accomplishment while 44.1% scored positive indicating the presence of psychological distress, all of this was related to the heavy workload (Wang et al., 2023)

In East Africa, a study in Kenya revealed that 85% of the nurses had moderate stress and 11.5% had high stress, majority mentioned low motivation for the heavy work they do as the cause of occupational stress, (Afulani et al, 2021).

In Uganda, according to a study done among nurses, it indicated that 63% of them were stressed and not satisfied with their jobs. The health profession has been acknowledged as stressful and all nurses bear a significant burden of stress in the course of their duties. Although no study has been done to indicate the level of stress at Gulu Regional Referral Hospital among nurses, different sources of information including the media (Britannica, T. (2023), the Ministry of Health have reported the existence of stress among these health workers. Such stress has contributed to limited human resources for health in the country (Bakibinga, 2019). Therefore, this study seeks to determine the factors influencing occupational stress among nurses at Gulu Regional Referral Hospital, Gulu City.

The study describes the factors influencing occupational stress among nurses at Gulu Regional Referral Hospital, Gulu City.

METHODOLOGY.

Study design.

In this study, a descriptive cross-sectional study design that utilized quantitative methods of data collection was opted. This research study design was preferred because it was less time consuming and in addition, the researcher collected data at once without following up with respondents.

Study setting.

The study was carried out among nurses in Gulu Regional Referral Hospital, Gulu City. Gulu Regional Referral Hospital is located in the northern Ugandan city of Gulu, the largest metropolitan area in Uganda's Northern Region. Its location is approximately 101 kilometers, by road, northwest of Lira Regional Referral Hospital. This is approximately 332 kilometers, by road, north of Mulago National Referral Hospital, in Kampala, Uganda's capital and largest city. The geographical coordinates of Gulu Hospital are 02°46'40.0"N, 32°17'52.0" E (Latitude:

2.777778; Longitude: 32.297778). The hospital has different departments like OPD, pediatrics, surgery, obstetrics & gynecology, it has over 50 nurses who provide health care services and are prone to stress. This number of nurses was where the sample for this study was generated. Because these nurses are suffering from the challenge of occupational stress, the study area was more suitable, therefore.

Study population.

The study targeted all nurses providing health care services to patients at Gulu Regional Referral Hospital, Gulu City.

Sample size determination.

The sample size was determined by the use of Roscoe's (1975) method which stated that a Sample size not less than 30 and not more than 500 is appropriate for the generalization of most scientific studies. Therefore 30 nurses at Gulu Regional Referral Hospital who were available during the time for data collection were used. The sample size was influenced by resource constraints that included limited time and inadequate financial resources.

Sampling procedure.

A convenient sampling method was used. Convenience sampling is a non-probability sampling method where respondents are selected for inclusion in the sample because they are the easiest for the researcher to access. This can be due to geographical proximity, availability at a given time, or willingness to participate in the research. This is because nurses were on duty and it was not easy for them to gather at the same time which might endanger patients. The researcher approached each nurse, explained the purpose of the study, and in case he/she consents, the respondent was enrolled in the study. This was repeated until the desired sample size of 30 nurses was reached during the three days of data collection.

Inclusion Criteria.

The study included nurses at Gulu Regional Referral Hospital who were available during the data collection periods, and those willing to voluntarily consent to participate in the study.

Exclusion criteria.

The nurses at Gulu Regional Referral Hospital and those who were eligible but with reasons for not participating in the study.

Definition of variables.

The independent variables included;

Individual factors influencing occupational stress among nurses.

Health facility-related factors influencing occupational stress among nurses.

Patient-related factors influencing occupational stress among nurses.

The dependent variables included;

Work-related stress among nurses and midwives.

Research Instruments.

The data was collected from respondents using a questionnaire with open and closed-ended questions in simple English language designed to explore the factors influencing occupational stress among nurses. The instrument was chosen because it was time-saving.

Data collection procedures.

The questionnaire was self-administered by the researcher to each respondent after they had consented and if possible was filled immediately or followed up accordingly. The questionnaire was then collected and checked there and then for completeness.

Data management.

In the process of data collection, each questionnaire after filling was checked for completeness, and accuracy before leaving the area of study. Filled questionnaires were kept properly in a locker for confidentiality and safety.

Data analysis.

The data collected was analyzed by entering it into the computer using Microsoft Office Word and Microsoft Excel where data was represented in tables, graphs, pie-charts, and figures.

Ethical considerations.

An introductory letter was obtained from the principal of Lubaga Hospital Training School. This letter was presented to the hospital administrator seeking permission to carry out the study. Participants received an explanation of what the study was about in simple and easy language that was understood by everyone before enrollment and only those willing to participate consented and anyone who wanted to pull out of the study was free to pull out. People were not forced to participate in the study which is a fundamental principle of voluntary participation in research ethics. Confidentiality was ensured to respondents and was highly observed during the study by respondents using serial numbers instead of names and questionnaires were kept in a locked cupboard and the key kept by the researcher.

RESULTS.

Socio-demographic characteristics of the respondents.

Table 1: A table showing the socio-demographic characteristics of the respondents n=30

Variable	Category	Frequency(f)	Percentage (%)
Gender	Male	07	23
	Female	23	77
Age	20 – 25	09	30
	26 – 30	14	47
	31 – 35	07	23
	Others (Above 35)	00	00
Level of education	Certificate	13	43
	Diploma	17	57
	Masters	00	00
Working experience	< 1 year	06	20
	1-4 years	06	20
	More than 4 years	18	60
Marital status	Single	10	33
	Married	18	60
	Divorced	00	00
	Widowed	02	07

From Table 1, majority 1 above, the majority of the residents, 14(47%) were aged between 26-30 years, 09(30%) were aged 20- 25 years, while the minority, 07(23%) were aged 31-35 years. Most, 23(77%) of the respondents were female, while the least 07(23%) were males.

Majority,18(73%) were married, 10(33%) were single, while the minority 02(07%) were widowed. Most of the nurses,17(57%) were diploma holders while the minority, 13(43%) had certificates.

The majority of the nurses, 18(60%) had a working experience of more than 4 years, while the least 06(20%) had < 1 year, and 1 — 4 years
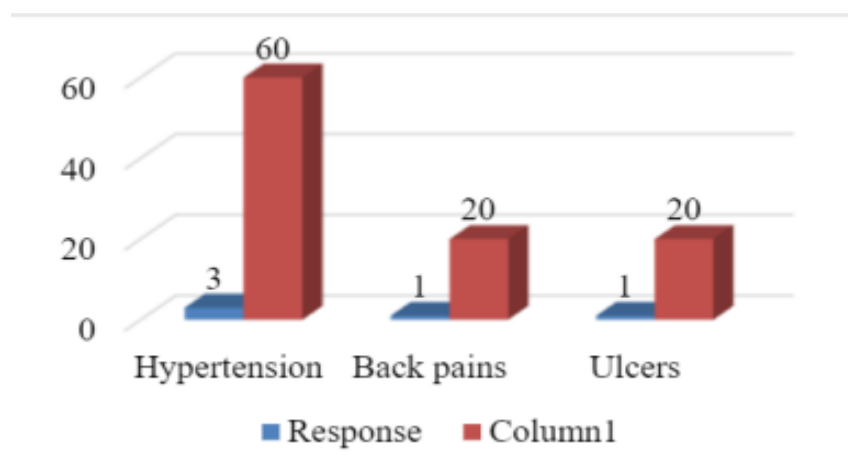
Individual factors influencing occupational stress among nurses.

Table 2; Shows the response to the causes of stress experienced by the nurses (n=30)

| Variable	Frequency(f)	Percentage (%)
Low salaries	11	37
Personal illness	05	17
A lot of demands from both work & family	12	40
Attitude of other health workers	02	06

From Table 2, most, 12(40%) of the respondents reported that they faced a lot of demands from work and family, 11(37%) low salaries, 5(17%) reported personal illness, while the least, 02(06%) reported attitude from other health workers.

Figure 1: Shows response to the respondent's illnesses that to their stress (n=5)

According to Figure 1, most 03(60%) reported that they were stressed by hypertension, while the least 01(20%) reported ulcers and back pains.

Figure 2; Shows the response to how the respondents found the nursing profession (n=30)
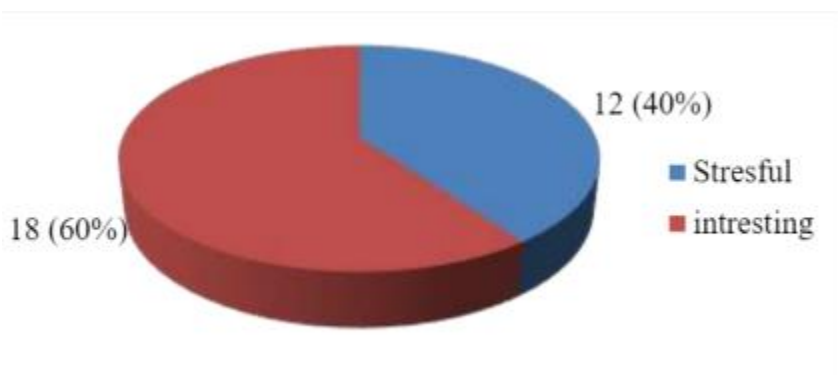
From Figure 2, most, 18(60%) of the respondents reported that their work was interesting, while the least, 12(40%) reported it was stressful.

**Health Facility-Related Factors Influencing Occupational Stress among Nurses.**

Table 3; Showing what causes stress while at Work (n=30)

Variable	Frequency (f)	Percentage (%)
Heavy workload	14	47
Shortage of staff	12	40
Many emergencies	04	13
Harsh in-charges/ facility administrators	00	00
Total	30	100

In Table 3, the majority 14 (47%) of the respondents mentioned heavy workload as a cause of stress while at work, 12 (40%) of the respondents mentioned the shortage of staff, and 4(13%) mentioned many emergencies as a cause of stress.

**Figure 3; shows whether doctors. laboratory technicians and senior nurses or midwives. n=30**
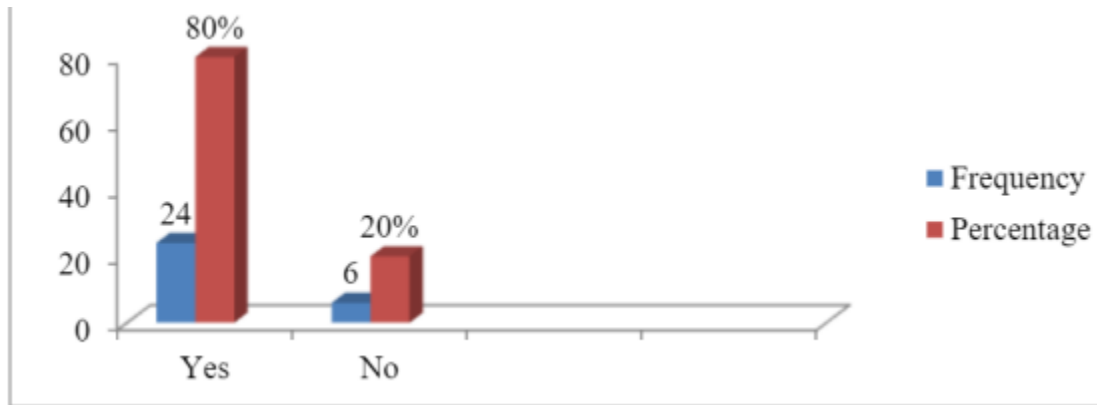
From Figure 3, the majority 24 (80%) of the respondents mentioned that doctors, lab technicians senior nurses, and midwives usually helped them out and 6 (20%) of the respondents mentioned that they were not helped out.

Figure 4; shows whether the respondents received supervision and training during their work to enable them get relieved of stress (n=30)
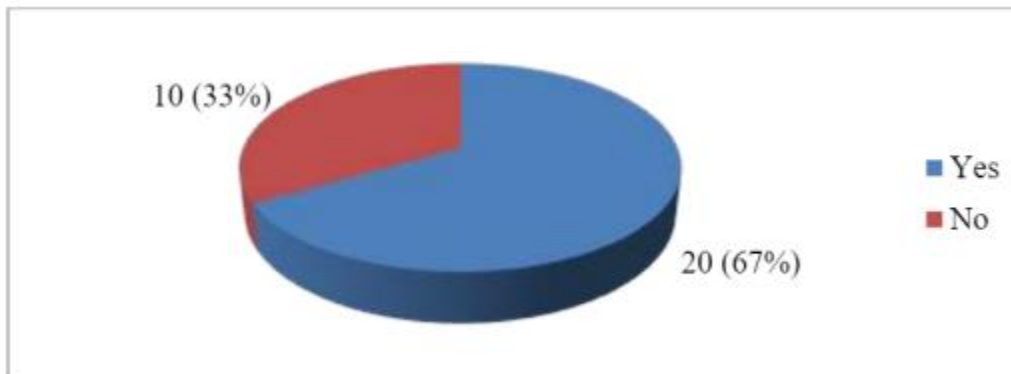
The majority 20 (67%) of the respondents received supervision and training during their work to enable them to get relieved of stress and 10 (33%) of the respondents did not receive supervision and training during their work. (Figure 4)

Figure 5; Shows whether the respondents' supervisor is accessible and approachable when they wanted something during nursing work (n=30)
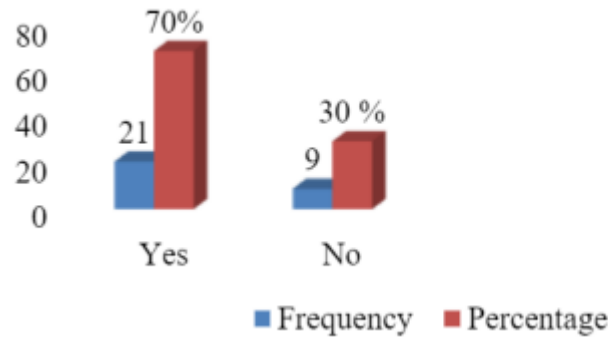
From Figure 5, the majority 21(70%) of the respondents mentioned that their supervisor was accessible and approachable especially when they wanted to inquire about something regarding nursing work and 9 (30%) of the respondents mentioned that the supervisor was not accessible and approachable.

Table 4; shows whether respondents received rewards at the facility when they worked hard (n=30)

Variable	Frequency (f)	Percentage (%)
Always	02	7
Sometimes	11	37
Never	17	56
Total	30	100

In Table 4, the majority 17 (56%) of the respondents never received rewards at the facility when they worked hard, 11 (37%) sometimes received rewards at the facility when they worked hard and 2 (7%) of the respondents always received rewards at the facility when they worked hard.

Figure 6; shows whether work-related stress can be reduced by awarding you promotions and special titles such as being in charge or head of any department(n=30).
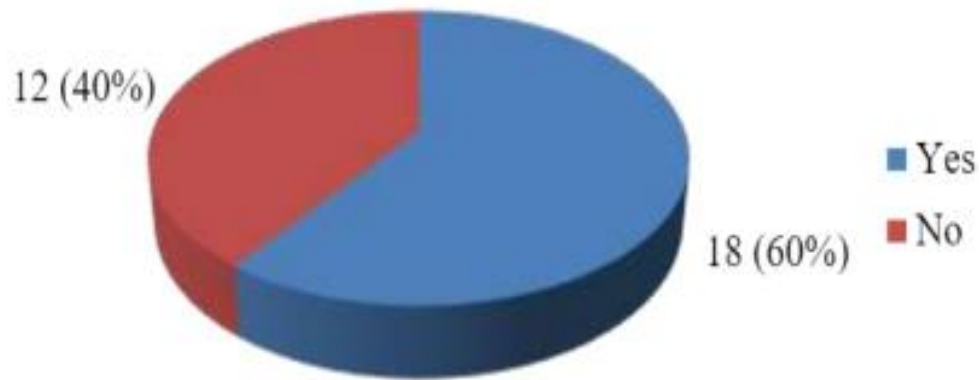
In Figure 6, the majority 18(60%) of the respondents mentioned that work-related stress could be reduced by awarding the respondents promotions and special titles like being in charge and head of any department while 12(40%) of the respondents mentioned that work-related stress could not be reduced by awarding their promotions.

Table 5; shows why promotions and special titles reduced stress(n=18)

Variable	Frequency (f)	Percentage (%)
Having special titles comes with great motivations like better salaries	13	72
There is less work with special titles	03	17
You are only involved in overseeing and leading others hence reducing work related stress.	02	11
Total	**18**	**100**

From Table 5, the majority 13 (72%) of the respondents mentioned that promotion and special titles reduced work-related stress as having special titles came with great motivation like better salaries, 3 (17%) mentioned that there was less work with special titles and 2 (11%) mentioned that they were involved in overseeing and leading others hence reducing work-related stress.

Patient-Related Factors That Influence Occupational Stress among Nurses

Figure 7; Showing whether respondents face some stressful moments with patients during work. n=30
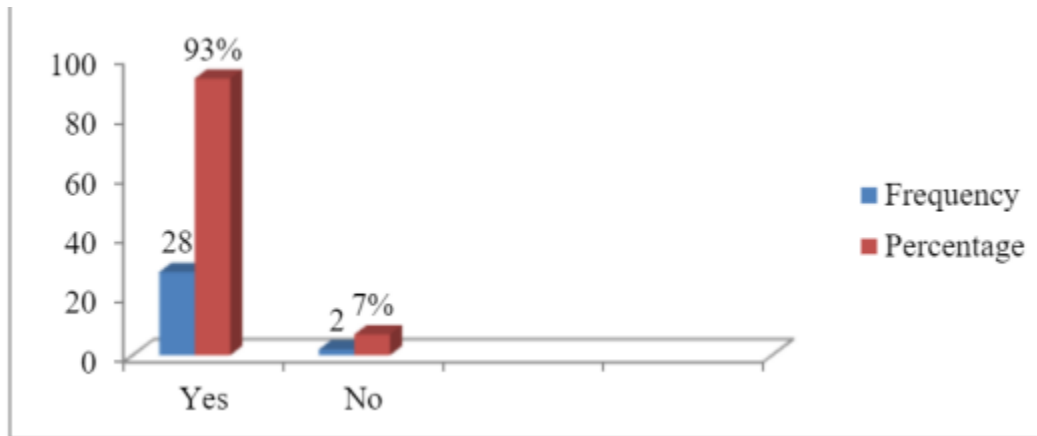
Results from Figure 7, the majority 28 (93%) of the respondents replied that they face some stressful moments with patients during work and 2 (7%) of the respondents do not face stressful moments during work.

Figure 8; Showing Whether Caring for the Dying Is So Stressful and Frustrating (n=30)
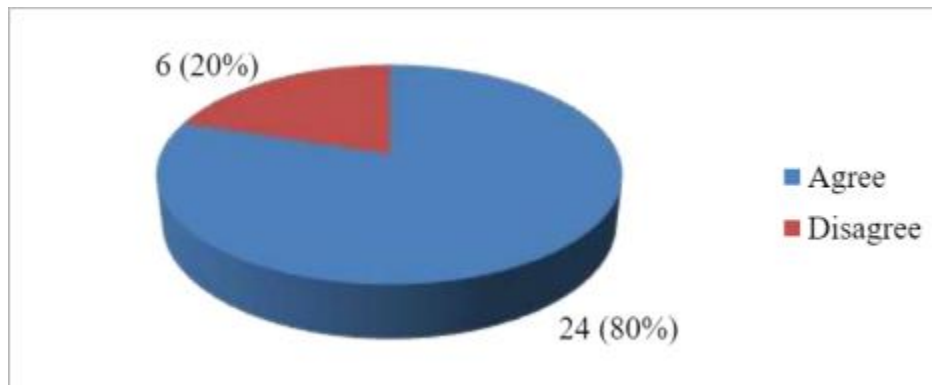
The majority 24 (80%) of the respondents find caring for the dying so stressful and successful while 6 (20%) of the respondents don't find it stressful and frustrating.
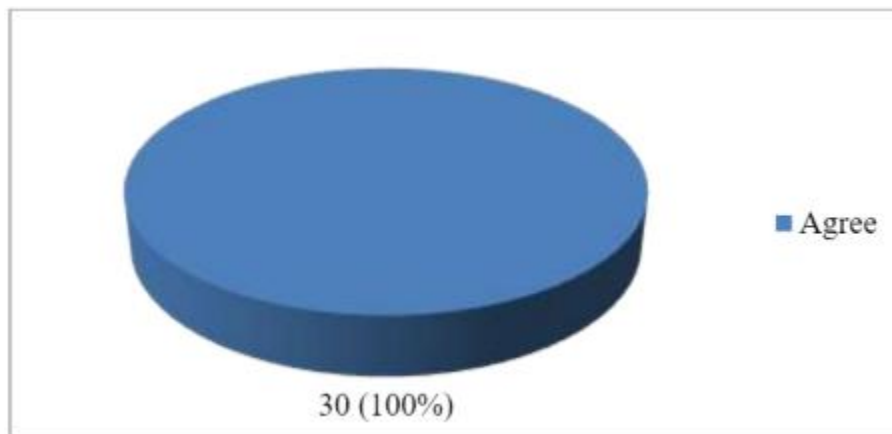
Table 6; Showing whether caring for aggressive patients is difficult and made work so stressful(n=30)

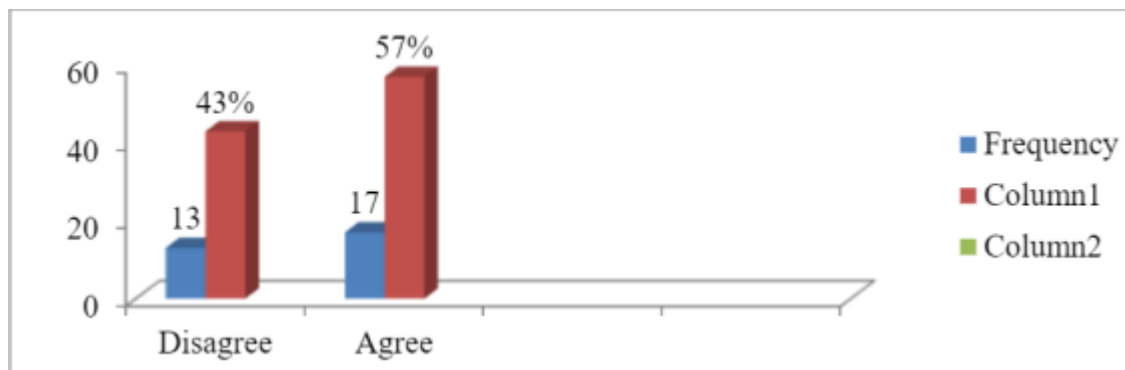| Variable	Frequency (f)	Percentage (%)
Agree	30	100
Disagree	00	00
Total	30	100

(Source: Primary Data 2023)

From table 6, the majority 30 (100%) of the respondents agreed that caring for aggressive patients is difficult and makes work so stressful.

Figure 9; Showing whether curing for uncooperative patients caused work-related stress (n=30)

30 (100%)

All 30 (100%) of the respondents find caring for uncooperative patients causes work-related stress.

Figure 10; Showing whether caring for severely ill patients is not interesting and is frustrating. (n=30)

**Table 7; shows the language the respondents use to communicate with patients (n=30)**

Variable	Frequency (f)	Percentage (%)
Vernacular	01	3
Mixed or both languages	29	97
Total	30	100

From Table 7, the majority 29 (97%) of the respondents used mixed or both languages to communicate with patients and 1(3%) of the respondents used vernacular.

Figure 11; shows whether respondents find it difficult and stressful to communicate to patients in vernacular (n=30)

All 1(100%) of the respondents found it difficult and stressful to communicate with patients in the vernacular.
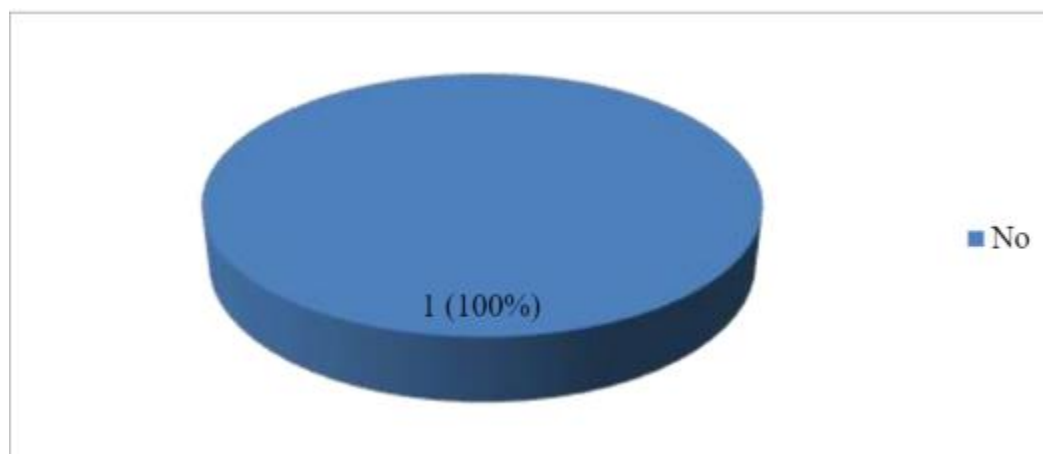
DISCUSSION.

Socio-demographic characteristics of the respondents.

The study findings revealed that the majority of the residents, 14(47%) were aged between 26-30 years. This might have been due to them being with a lot of responsibilities at their age.

The study findings revealed that Most, 23(77%) of the respondents were female, in line with a study done by (Babapour et al., 2022), in which it was reported that female nurses experience more occupational stress than males; study further revealed that this fact was due to female nurses being involved in balancing work activities and home activities, besides that they usually tend to be involved in nursing procedures than the male counterparts.

The study findings revealed that the majority, 18(73%) were married.

The study findings revealed that most of the nurses, 17(57%) were diploma holders

The study findings revealed that the majority of the nurses, 18(60%) had a working experience of more than 4 years(Perry et al., 2015)

Individual factors influencing occupational stress among nurses.

The study findings revealed that all, 30(100%) reported that they experienced stress while at work. This might be due to satisfaction leading to stress. This is in line with a study by Silas (2015), which found out 56% of the nurses were dissatisfied because of their work and this made them stressed.

The study findings revealed that most, 12(40%) of the respondents reported that they faced a lot of demands from work and family. The study findings revealed that most 03(60%) reported that they were stressed by hypertension. This is probably due to the stress experienced at work.

The study findings revealed that most, 18(60%) of the respondents reported that their work was interesting. This was perhaps because of their love and commitment to their job.

The study results indicated that the majority 21 (70%) of the respondents mentioned that their supervisor was accessible and approachable

Health Facility-Related Factors Influencing Occupational Stress among Nurses.

The study results indicated that the majority 14 (47%) of the respondents mentioned heavy workload as a cause of stress while at work. This is in line with a study The study results indicated that the majority 24 (80%) of the respondents mentioned that doctors, laboratory technicians senior nurses, and midwives usually (Van Deemter, Kees. "University of Aberdeen.") helped them out. This is indicative of the teamwork among the staff members.

The study results indicated that the majority of 20 (67%) of the respondents received supervision and training during their work to enable them to be relieved of stress. This is contrary to Harris, N. (2001). which revealed that lack of training led to work-related stress among nurses especially when they made mistakes that required to be avoided with added knowledge. For healthcare institutions, it is imperative that training goes hand in hand with professional work so that there is always a ready pool of trained and competent personnel.

especially when they wanted to inquire about something regarding nursing work. This indicated good leadership and teamwork in the hospital.

The study results indicated that the majority 17 (56%) of the respondents never received rewards at the facility when they worked hard, in line with a study in Sri Lanka by Somatunga et al, (2015) which revealed that hospitals do not usually reward or compensate highly performing nurses which increases the chances of stress. Most of the time highly performing or less performing nurses are treated equally which stresses the ones who work hard (Fang, J. (2015).

The study results indicated that the majority of 18(60%) of the respondents mentioned that work-related stress could be reduced by awarding the respondents promotions and special titles like being in charge and head of any department. This is in line with a study in the United Kingdom, which revealed that the lack of rewards demotivated nurses and increased stress levels (Mark et al, (2012) .

The study results indicated that the majority 13 (72%) of the respondents mentioned that promotion and special titles reduced work-related stress as having special titles came with great motivation like better salaries.

Patient-Related Factors That Influence Occupational Stress among Nurses.

The study results indicated that the majority 28 (93%) of the respondents replied that they faced some stressful moments

with patients during work. This is in line with a study carried out in Nigeria which revealed that the emotional load of dealing with aggressive and demanding patients influenced the stress among 62.6% of nurses (Oyediran et al., 2022).

The study results indicated that the majority 24 (80%) of the respondents find caring for the dying so stressful and successful. This is in line with a study by L'ubica, (2017) which indicated that ling with death and dying; a study carried out in Slovakia revealed that 26% of the nurses were frequently stressed when they attended to dying patients.

The study results indicated that the majority 30 (100%) of the respondents agreed that caring for aggressive patients is difficult and makes work so stressful. This is in line with a study carried out in Nigeria which revealed that the emotional load of dealing with aggressive and demanding patients influenced the stress among 62.6% of nurses (Oyediran et al., 2022)

The study results indicated that all, 30 (100%) of the respondents found that caring for uncooperative patients caused work-related stress.

The study results indicated that the majority 17 (57%) of the respondents agreed that caring for severely ill patients is not interesting and is frustrating. This is in line with a study done in Iran by Manojlovich, (2021) among cancer patients, 79% were female patients and 21% consisted of males, where it was noted that patients' condition had a very big impact, patients whose condition was very severe were having high levels of depression and communicating to them was very difficult, due to excessive pain, they felt that whatever had been done by the nurse was useless and so they could not give attention to what is being communicated, this made the work of nurses very hard and stressful.

The study results indicated that the majority 29 (97%) of the respondents used mixed or both languages to communicate with patients. This in line with a study by(McGrath et al., 2003) which it was reported that the differences in the language between nurses and patients increase occupation stress this is because in such cases, healthcare delivery is very hard, and in such cases using a third person who is familiar with the language of the patient and that of the nurse is the only possible solution to break the problem of a language barrier in the nurse-patient communication (Ali, P. A., & Watson, R. (2018).

CONCLUSIONS.

This study established that, although the nurses liked their job and perceived their profession as interesting, they experienced stress while at work, due to facing a lot of demands from work and family, which led to some of them acquiring hypertension. Also, a heavy workload with low salaries, lack of motivation, and recognition led to the stress of the respondents, even though there was teamwork between them and other staff of different cadres,

supervision, and training during their work to enable them to get relieved of stress.

The study further established that the nurses faced some stressful moments while caring for the dying, aggressive, uncooperative, or severely ill patients during work.

RECOMMENDATIONS.

The government of Uganda should work on improving the working conditions of the nurses to reduce stress by recruiting more staff. More so, it should conduct CMEs for the nurses to provide them with the skills to manage patients with different conditions.

Health workers need to improve the attitude and skills of patient management, especially the dying, aggressive, uncooperative, or severely ill patients.

ACKNOWLEDGEMENT.

LIST OF ABBREVIATIONS.

WHO: World Health Organization

UNMEB: Uganda Nurses and Midwives Examinations Board

CMEs: Continuous Medical Education

OPD: Out Patient's Department

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