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WORK STRESS IN NURSES IN ADULT INPATIENT WARDS

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ABSTRACT
Work Stress is a common phenomenon experienced by nurses, especially those working in adult inpatient wards. High workload, physical and emotional demands, and dynamic work environment can affect nurses' well-being and the quality of services provided. Therefore, understanding the level of nurses' Work Stress is very important to find effective solutions in managing stress in the hospital environment. Objective to describe the level of Work Stress experienced by nurses in the adult inpatient ward of Dabo Regional Hospital and to identify the classification of Work Stress they experience. This study used a descriptive design with a total sampling of 45 nurses in the adult inpatient ward of Dabo Regional Hospital. Data collection was carried out using the Nursing Stress Scale (NSS) questionnaire, which consists of 33 items with a Likert scale. Data were analyzed descriptively to describe the frequency distribution of nurses' Work Stress. The results showed that 53.33% of nurses experienced mild Work Stress, 11.11% of nurses experienced moderate Work Stress, and 35.56% of nurses experienced severe Work Stress. Factors such as coworker support and good management play a role in reducing stress, while high workload and lack of resources contribute to severe stress. Work Stress in nurses in the adult inpatient ward of Dabo Regional Hospital varies, with the majority experiencing mild stress, but a significant number of nurses experiencing severe stress.

Keywords: inpatient; nurse; work stress

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INTRODUCTION

Work stress in the nursing profession is a common and significant issue, especially in the inpatient setting (Cheng et al., 2020). Nurses face high physical and emotional demands, including managing the care of critically ill patients, dealing with family expectations, and performing administrative tasks (Sheroun et al., 2020). Heavy workloads, coupled with long working hours, often trigger stress that impacts nurses' well-being (Lamiri et al., 2020). Unmanaged stress can reduce the quality of health care, increase the risk of medical errors, and cause burnout in nurses. This causes the quality of patient care and hospital performance to be threatened, making the management of work stress in nurses an important priority in maintaining the welfare of health workers and the quality of service (Qin et al., 2020).

Work stress can be defined as a condition resulting from the subjective experiences of an individual and the work environment which can threaten and put pressure on the individual psychologically, physiologically and attitudinally (Shirmohammadi et al., 2021). Global research states that the total cases of work-related stress, depression and anxiety in the UK in 2016–2017 reached 526,000 cases (Yu et al., 2021). In the same study it was stated that stress shows a high prevalence in the service industry, such as health services and social services. Stress, depression and anxiety due to work in the health service industry stated that nurses and midwives were the professions with the highest cases, even reaching 3,090 cases per 100,000 workers (Wynter et al., 2021).

Nurses working in inpatient settings are at high risk of experiencing work stress, as they face heavy workloads and constant demands. Nurses must deal with patients with a variety of conditions, often in critical situations that require intensive care and full attention (Jafari et al., 2020). They are also required to always be on standby, manage various medical procedures, and meet the expectations of patients and families that may be high and difficult to meet (Anderson & Dutton, 2022). A busy work schedule that often involves night shifts also adds to the pressure, worsening stress levels (Al-Maraira & Shennaq, 2021). In addition, the working environment conditions are sometimes less than supportive, such as a shortage of nurses or medical equipment, further increasing the mental and emotional burden (Grabbe et al., 2020).

Research on work stress in nurses is very important because of its significant impact on nurse performance, both psychologically and physically. High work stress can cause various psychological problems, such as anxiety, depression, and burnout, as well as physical problems such as chronic fatigue, sleep disorders, and decreased immunity (Mariyati et al., 2020). This condition not only affects the health of nurses, but also reduces the quality of their interactions with patients, which can ultimately reduce the quality of health services (Gawlytta et al., 2020). In addition, there is a close relationship between high levels of work stress and turnover among nurses, where nurses who experience prolonged stress tend to have the intention to leave the profession or change jobs (Wynter et al., 2021). At Dabo Regional Hospital, research on nurses' work stress is still very limited, so such research is needed at Dabo Regional Hospital.

Work Stress in nurses is caused by various internal and external factors that are interrelated. Internal factors include high physical, mental, and emotional demands in carrying out daily tasks (Zhang et al., 2021). Nurses must be able to handle a variety of patient conditions, manage complex care, and deal with emergency situations that require quick and accurate decisions (Deo et al., 2020). Emotionally, they often deal with patients in critical condition, which can cause psychological stress. In addition, external factors also contribute greatly, such as a less supportive work environment. A busy work schedule, irregular shifts, and less harmonious relationships between colleagues can increase stress (Setiawaty & Yuliana, 2021). In addition, nurses have to deal with high expectations from patients and families that are often difficult to meet, adding to the stress (McVeigh et al., 2021).

Work stress experienced by nurses not only affects the physical and mental well-being of nurses, but also has the potential to reduce the quality of patient care, increase the risk of medical errors, and worsen relationships with patients and coworkers (Perveen et al., 2021). In an era where demands for professionalism and quality of healthcare services are increasing, understanding the levels and causes of work stress is key to creating a better working environment for nurses (Urban et al., 2021). Based on this, research is needed related to the description of nurses' stress in the inpatient room of Dabo Regional Hospital. The purpose of this study is to determine the description of nurses' stress in the inpatient room of Dabo Regional Hospital.

METHOD

This study used a descriptive research design to describe the level of work stress in adult inpatient nurses at Dabo Regional Hospital. The descriptive approach aimed to provide a clear picture of the phenomenon of work stress in nurses based on data collected from respondents. The population in this study were all nurses working in the adult inpatient ward of Dabo Regional Hospital, totaling 45 nurses. The sampling technique used was total sampling, where the entire population that met the inclusion criteria were included as research samples. The

inclusion criteria included nurses who were willing to be respondents, cooperative, on duty in the adult inpatient ward, not on leave, and not on study assignment or attending education/training. The exclusion criteria in this study were nurses who refused to be respondents, were not cooperative, or were not on duty in the adult inpatient ward. The number of samples in this study was 45 nurses.

Data collection was carried out using a questionnaire to identify work stress in nurses. The instrument used was the Nursing Stress Scale (NSS) which consists of 33 items and is measured in the form of a Likert scale with a range of (0) never, (1) sometimes, (2) often, and (3) very often. This questionnaire is compiled based on aspects of work stress according to Toft and Anderson (Rosnawati et al., 2010), which includes the physical environment, psychological environment, and social environment. The results of the validity test showed a table r value of 0.576, and the results of the NSS questionnaire reliability test showed a value of 0.955, which indicated that this instrument was valid and reliable for use in the study. Based on the classification of work stress used in this study, the level of nurse stress was grouped into three categories based on the score scale of the Nursing Stress Scale (NSS) questionnaire. The mild work stress category includes respondents who scored between 26–30, while moderate work stress is in the range of 31–38. Respondents who scored 39–59 are included in the severe work stress category.

In conducting research, several ethical considerations are prioritized to protect the rights and welfare of respondents. The principle of autonomy is applied by giving respondents the freedom to decide to participate or refuse without coercion. In addition, the principle of justice is implemented by ensuring that each respondent receives fair and equal treatment during the research process. Researchers also consider beneficence and maleficence by minimizing the risks that may arise for respondents and maximizing the benefits of the research results. Finally, the principle of confidentiality is maintained by ensuring the confidentiality of data obtained from respondents, where data will only be used for research purposes and will not be disseminated to third parties without permission. The data obtained were analyzed using descriptive statistics with a univariate analysis approach. Univariate analysis was conducted to describe the characteristics of respondents based on gender, age, education level, length of service, and marital status, as well as nurses' work stress. The analysis was conducted by presenting the mean, min-max, and standard deviation values. Work stress data were also presented in the form of frequency distribution tables and percentages to provide a clearer picture of the level of stress in nurses.

RESULTS

Demographic Characteristics

Based on the research results, the characteristics of respondents based on age, gender, education level, length of service and marital status of nurses in the inpatient ward of the Regional Public Hospital can be described as follows on table 1.

Table 1, the results showed that respondents aged 24–32 years were 28 respondents (62.23%). For gender, the majority of respondents were female, with 39 respondents (86.67%). In terms of education, 37 respondents (82.22%) had a 3-year diploma. Regarding the length of service, 18 respondents (40%) had worked for 1–3 years. Finally, 25 respondents (55.5%) were married.

Table 1.
Distribution of Demographic Characteristics (n=45)

Variables	f	%
Age		
18 – 24 Years	8	17.78
24 – 32 Years	28	62.23
32 – 42 Years	9	20
Gender		
Man	6	13.33
Woman	39	86.67
Level of education		
3-year diploma	37	82.22
S1 / Nurse	8	17.78
Length of work		
1 – 3 Years	18	40
4 – 6 Years	13	28.89
7 – 10 Years	5	11.11
11 Years and Above	9	20
Marital status		
Not married	20	44.5
Married	25	55.5

Frequency Distribution of Occupational Stress of Nurses in Adult Inpatient Wards
Nurses' work stress in this study used the NSS questionnaire. The following are the results of the research that has been conducted:

Table 2.
Frequency Distribution of Nurses' Work Stress (n=45)

Variables	f	%
Mild	24	53.33
Moderate	5	11.11
Severe	16	35.56

Table 2, the results show that the majority of nurses experience mild work stress, with 24 respondents (53.33%). Moderate work stress is experienced by 5 respondents (11.11%), and severe work stress is experienced by 16 respondents (35.56%).

DISCUSSION

Based on demographic characteristics, the majority of respondents were aged 24–32 years (62.23%) which is a productive age. At this age, although nurses may be more resilient in dealing with work stress, they also face the demands of family life and career which can add to the stress, especially for those who are married (Al-Maraira & Shennaq, 2021). Based on gender, the majority of respondents were women (86.67%), and social and cultural factors may play a role in the high levels of stress in female nurses. Women are often faced with a double burden, namely work responsibilities and domestic responsibilities, which have the potential to increase their work stress levels (Vincent et al., 2022).

Based on education level, most respondents have a Diploma 3 background (82.22%), which may make them more vulnerable to work stress compared to nurses with higher education, because further education can help in stress management and clinical decision making (Haruna et al., 2022). Regarding length of service, the majority of new nurses have worked for 1–3 years (40%), who tend to have higher levels of stress compared to more senior nurses due to their lack of experience in handling heavy workloads. Marital status is also an

important factor, with 55.5% of respondents married, and family support can be a balancing factor in managing stress, although domestic demands can also add to the stress for nurses who are married (Ali et al., 2022).

The results of the study showed that the majority of nurses in the adult inpatient ward of Dabo Regional Hospital experienced mild work stress (53.33%). This can be explained by several factors, such as support from colleagues and good management. In an effective hospital environment, the relationship between nurses and between nurses and management can create a supportive work atmosphere, so that the pressure that arises from work can be managed well (Hikmat et al., 2024). In addition, the role of management in providing a regular work system, such as setting a balanced schedule and providing adequate facilities, can also help reduce stress levels among nurses (Zhan et al., 2020).

However, the study also showed that 35.56% of nurses experienced severe work stress, which is a significant number. Some factors that can cause this include high workloads and lack of resources in adult inpatient rooms (Levi et al., 2020). This condition can trigger feelings of being overwhelmed among nurses, especially when they have to handle many patients with complex needs, without adequate resource support, such as a lack of nurses or incomplete facilities. The severe stress experienced by nurses not only affects their mental and physical well-being, but also has an impact on the quality of service to patients (Goldsby et al., 2020). Nurses who experience severe stress are at risk of burnout, which can ultimately reduce performance and increase the risk of medical errors. This highlights the importance of stress management and improving the work environment in hospitals to ensure nurse well-being and optimal service quality (Okstoria, 2022).

Classification of work stress has a direct impact on nurse performance and quality of health services. Nurses who experience mild work stress tend to be able to maintain good interactions with patients, maintain focus, and provide optimal care, so that patient health outcomes are more positive (Hoskote et al., 2022). However, at moderate levels of work stress, nurse performance begins to decline, with an increase in minor errors and less effective interactions with patients due to fatigue or work pressure, potentially reducing the quality of care (Tenbult et al., 2022). This condition worsens in high work stress, where nurses are at risk of burnout, which causes them to be less responsive and more emotional in dealing with work situations, thus reducing the quality of interactions with patients and increasing the risk of medical errors (Sari & Putri, 2022). As a result, patient health outcomes may be negatively impacted, such as delays in care or increased risk of complications (Zhao et al., 2022).

Stress management strategies for nurses in adult inpatient settings are essential to maintaining their well-being and improving the quality of care. One step that can be taken is to provide mental health support programs, such as regular counseling or psychological services, that enable nurses to deal with work stress effectively (Anderson & Dutton, 2022). Better work schedule arrangements, including fair shift allocation and adequate rest periods, can also help reduce physical and mental fatigue (Kandula & Wake, 2022). In addition, stress management training for nurses is essential, so that they have the skills to deal with stressful situations, such as relaxation techniques and more efficient time management (Chauhan et al., 2022).

Hospital management also plays an important role in creating a supportive work environment. Team support through good communication and collaboration between staff can strengthen the sense of togetherness, which will reduce the mental burden of nurses (Kandula & Wake, 2022). It is also important to encourage work-life balance, by providing flexibility in

scheduling so that nurses can maintain their health outside of the workplace (Hamadi et al., 2021). Other management interventions include improving facilities and resources, as well as regular evaluation of nurses' workload, so that they do not feel overwhelmed (Goto et al., 2023). By creating a supportive environment and paying attention to the mental health of nurses, hospital management can help reduce stress levels and improve the performance and quality of care provided to patients.

CONCLUSION

This study shows that the majority of nurses in the adult inpatient ward of Dabo Regional Hospital experience mild work stress (53.33%), but some nurses also experience severe work stress (35.56%). Factors such as co-worker support and effective management help reduce stress levels, but high workload and lack of resources contribute to severe work stress. This shows the importance of proper stress management, such as mental health support, good work schedule arrangements, and stress management training to maintain nurse performance and patient care quality. The nursing implications of these findings are the need for ongoing interventions to reduce nurses' work stress levels, including increased support from management, provision of adequate facilities, and mental health programs. With a more supportive work environment, it is expected that nurses' well-being will increase and the risk of errors in service will decrease.

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